

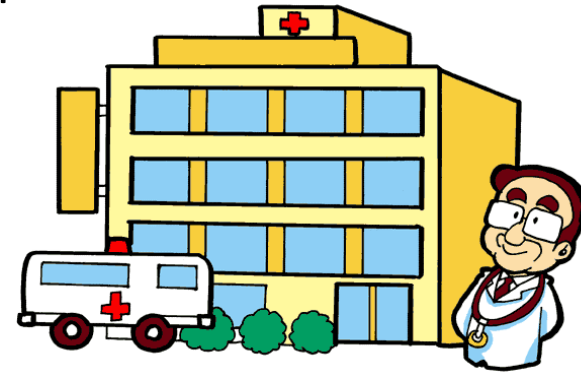


A different course

DIVERSION

Diversion

- Crisis will focus on diversion from hospitalization



- SBD will focus on diversion from Juvenile Justice



Diversion from Hospitalization

- Voluntary hospitalization
- Family support/Natural support
- Referrals/Linkages to community agencies or resources
- Respite
- Decompression time
- De-escalation opportunity
- The person may have a crisis plan
- Contact with the HMO Care Coordinator

Diversion from the Criminal Justice System

- All people with mental health needs are at increased risk when placed out of home or in a correctional facility and during the transition back to the community
- Over 18 – Mental Health Needs trump criminal needs – advocacy to divert from criminal justice system when MH driven
- Under 17 - Directed to Juvenile Justice system for MH needs.



New Horizons

SCHOOL BASED DIVERSION (SBD TEAM)



SBD

SCHOOL BASED DIVERSION TEAM

Intervention as Prevention: School Based Diversion Team

- Mission
 - Our mission is to reduce Juvenile Justice Involvement of youth with Mental Health and Substance Use Disorder needs by diverting from arrest in schools and creating clear pathways to effective individualized assessments, treatments, and supports.



SBD Team

- Lowering the threshold for crisis response
- Allowing for earlier intervention as prevention
- Diversion from JJ
- Assessment includes risk for JJ involvement
- Targeting interventions on specific and expanded risk factors
- Linkage and Follow up

SBD Team Conducts an Assessment

- Strengths
- Thorough assessment of suicide/homicide risk
- Mental Status/MH Symptoms*
- Family dynamics/Natural Supports
- Current or serious medical problems
- Current medications
- History of drug abuse
- Is client currently involved in the legal system?
- Is the legal involvement related to the crisis?

**standardized validated tools to stay true to the effort of reducing disparity in response and determined by age

Determining Which Service to Request

CRISIS VS SBD

What is a Crisis?

- A person has a mental health crisis when they are in a state of mind in which they are unable to cope with and adjust to the recurrent stresses of everyday living in a **functional** or **safe** way.



When a Functional Crisis Occurs...

- Functional Crisis are marked by a sudden change in behavior
 - Aggression
 - Irritability
 - Hyper-motor activity
 - Lack of emotional regulation
- If you would call the SRO/LEO and Mental Health Needs are Identified– Call SBD
 - If policy directs or imminent need exists (Fighting/weapon/drugs) call SRO/LEO first

When a **Safety** Crisis Occurs...

- A Safety Crisis is marked by threat to immediate safety and is captured in the Chapter 51 Criteria
- Contact a crisis worker
- If Imminent Danger is present – Call 911 for first responder presence prior to calling crisis



SBD vs. Crisis

SBD

- 757-5024
 - Call when you would have called SRO/LEO and mental health concerns are identified

NOTE call 911 under any circumstance of imminent danger

Crisis

- 757-5025
 - Call when risk of harm to self or others is present or when you would have called crisis

SBD vs. Crisis

SBD

- Student exhibits a behavior that would initiate a SRO/LEO call
- Teacher completes screen
- If screen indicates possible MH concern call SBD

Crisis

- Student exhibits or directly makes a threat of suicide/homicide
- School counselor (?)
- Call to Crisis

SBD vs. Crisis

SBD

- Refer to diagram of SBD Response

Crisis

- Refer to diagram of crisis response

Hmmm

**WHAT DOES THIS LOOK LIKE FOR
IN A CLASSROOM OR SCHOOL?**

Case Scenarios

- Can you think of a time when you called the SRO/LEO due to a child's behavior/functional crisis? What did that look like?

- Can you think of an example when you called crisis due to a safety crisis?

How to improve

PILOT PROJECT

Program in Process

- Feedback loop
 - SIT team involvement
 - Consumer Satisfaction Survey
 - Continued meetings to evaluate and adjust

Patience, please...

