

Cook County Resolution #23-0523: Resolution to Assess Needs and Improve the Quality and Effectiveness of Behavioral Health Care Provided by Cook County Government

Cook County Sheriff's Office
Behavioral Health Services
Semiannual Report
June 2023 – November 2023



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Table of Contents

Executive Summary	3
Cook County Department of Corrections (CCDOC) Department of Behavioral Health	4
(1) General Information	4
(2) Overall Goals	5
(3) Information on Providers	6
(4) Key Performance Indicators	7
(5) Expectations for Contracts	9
(6) How Program Serves the Best Interest of Patients and Communities	9
(7) Information on Continuum of Care	10
(8) Best Practices	11
(9) Meetings/Coordination with Partners	11
(10) Program Evaluation and Overlap with Other City/County Agencies	14
(11) Program Costs and Funding Sources	15
(12) Additional Information to Facilitate Committee’s Understanding	15
(13) Opportunities for Growth & Collaboration	16
(14) Information on Follow-up at a Cook County Hospital	16
Community Resource Center (CRC)	17
(1) General Information	17
(2) Overall Goals	17
(3) Information on Providers	17
(4) Key Performance Indicators	18
(5) Expectations for Contracts	18
(6) How Program Serves the Best Interest of Patients and Communities	19
(7) Information on Continuum of Care	19
(8) Best Practices	20
(9) Meetings/Coordination with Partners	20
(10) Program Evaluation and Overlap with Other City/County Agencies	21
(11) Program Costs and Funding Sources	22
(12) Additional Information to Facilitate Committee’s Understanding	22
(13) Opportunities for Growth & Collaboration	22
(14) Information on Follow-up at a Cook County Hospital	22
Treatment Response Team (TRT)	23
(1) General Information	23
(2) Overall Goals	23

(3) Information on Providers	24
(4) Key Performance Indicators.....	24
(5) Expectations for Contracts.....	24
(6) How Program Serves the Best Interest of Patients and Communities.....	25
(7) Information on Continuum of Care.....	25
(8) Best Practices	25
(9) Meetings/Coordination with Partners	26
(10) Program Evaluation and Overlap with Other City/County Agencies	26
(11) Program Costs and Funding Sources.....	27
(12) Additional Information to Facilitate Committee’s Understanding	27
(13) Opportunities for Growth and Collaboration	27
(14) Information on Follow-up at a Cook County Hospital	28

Executive Summary

This Behavioral Health Services Semiannual Report complies with the requirement put forth in Cook County Board Resolution #23-0523: Resolution to Assess Needs and Improve the Quality and Effectiveness of Behavioral Health Care Provided By Cook County Government. The Cook County Sheriff’s Office provides behavioral health treatment and interventions at the community level intersecting with the Sheriff’s police, at the detention level within the Cook County Jail, and upon release via the Community Resource Center and for select pre-release programs that include a post-release component. The following report contains information on these programs broken down by the Cook County Department of Corrections Department of Behavioral Health, the Community Resource Center, and the Treatment Response Team. Information in this semiannual report reflects the June 1, 2023 – November 30, 2023 timeframe where relevant.

Cook County Department of Corrections (CCDOC) Department of Behavioral Health

(1) General Information

General information on the population served, including how patients were identified or applied for services, a breakdown of where patients of the program(s) reside in Cook County and the number of patients served over the last 24-month cycle

The table below provides general information on the multiple behavioral health programs offered at the Cook County Sheriff's Office (CCSO) through the Cook County Department of Corrections (CCDOC), including population served by each program, how program participants are identified and the number of participants in each program for the last 24 months ending November 30, 2023. We have provided both the number of unique bookings that have participated in the program as well as the number of unique individuals¹. We have also attached zip code data on CCDOC program participants to demonstrate where our patients reside when outside of the CCDOC.

Cook County Department of Corrections (CCDOC) Department of Behavioral Health				
Program	Population Served	How patients are identified	Unique bookings	Unique people
Sheriff's Men's Addiction Recovery Treatment (SMART)	Male IICs at the Cook County Jail with substance use and co-occurring disorders	This is a court-ordered program	718	693
Therapeutic Healing Recovery Initiative for Vitality and Empowerment (THRIVE)	Female IICs at the Cook County Jail who suffer from addiction.	This is a court-ordered program	983	932
Mental Health Transition Center (MHTC)	Male IICs at the Cook County Jail in need of mental health and substance use treatment, criminal risk reduction and intervention, vocational skills training, and education services.	MHTC is a voluntary program. Individuals may request to be in the program or CCSO data team identify candidates based on assessment at intake.	287	267
Sheriff's Opioid Addiction Recovery Program (SOAR)	Cook County Jail IICs who are recovering from opioid addiction.	SOAR participants are either court-ordered to the program or volunteer to participate.	256	252
The Sheriffs' Anti-Violence Effort (SAVE)	Male IICs at the Cook County Jail or those who have recently been at the jail and now receive services in the community. Participants are between the ages of 18 and 25 who are likely to be victims of violence or to perpetuate violence.	Participants volunteer for the program.	455	453

¹ A unique booking references a specific instance of an individual being booked at the Cook County Jail. An individual can have more than one booking so we are reporting both unique bookings and persons who have participated in CCDOC programs.

The Clinical Assessment and Rehabilitation Program (C.A.R.P.)	Individuals in Custody (IICs) develop a healthier outlook on mental health through evidence-based treatment modalities via a co-responder approach and are provided clinical support.	Participants volunteer for the program.	165	165
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(2) Overall Goals

Overall goals of behavioral health program(s) including goals unique to the specific population served

Cook County Department of Corrections (CCDOC) Department of Behavioral Health	
Program	Description & Goals
SMART	The Sheriff's Men's Addiction Recovery Treatment (SMART) program is a modified therapeutic community treatment program for substance use and co-occurring disorders. It is dedicated to helping IICs learn pro-social behaviors designed to reduce substance use and criminal activity. The program seeks to target those struggling with such issues and equip them with the support and tools they need to be successful in the community. SMART is a court-ordered program, but judges have the discretion to give sentences that are longer or shorter than the recommended 90 days.
THRIVE	The Therapeutic Healing Recovery Initiative for Vitality and Empowerment program (T.H.R.I.V.E.) was created to support women who suffer from addiction while they are in CCDOC custody. Participation in the program consists of a 90-day curriculum designed to address the biopsychosocial factors related to addiction and incarceration. THRIVE is a court-ordered program but judges have the discretion to give sentences that are longer or shorter than the recommended 90 days. Programming is gender-specific and targeted towards individuals in custody with non-violent drug-related charges who have a history of substance use, trauma and/or mental illness. THRIVE programming uses evidence-based treatment aimed at establishing thought patterns and habits that prevent future substance use.
MHTC	The Mental Health Transition Center (MHTC) opened in 2014 and offers a holistic array of services including substance use and mental health treatment, vocational skills training, educational services, fine arts programming, and comprehensive discharge planning. The goal of the program is to empower justice-involved individuals diagnosed with a substance use and/or clinical mental health disorder with the development of a support system to ease their transition back into the community and aid their long-term recovery.
SOAR	The Sheriff's Opioid Addiction Recovery (S.O.A.R.) Program was created to address the particularly high opioid overdose death rate for people recently released from incarceration. SOAR participants have recently transitioned from the Cook County Jail to the electronic monitoring program. The SOAR program is dedicated to helping IICs recover from opioid addiction and transition into the community with supportive wraparound services. SOAR is a step-down program available to individuals who have completed a 90 day in-custody drug treatment program, either SMART or THRIVE. Participants are linked to community resources through an individualized case management re-entry plan. The case manager assists participants with addressing their needs and achieving identified goals. Services can include but are not limited to educational services, vocational training, employment, religious services, medical services, substance use services and mental health services. In the summer of 2020, SOAR merged with the SMART and THRIVE programs, so SOAR eligibility is now determined by SMART and THRIVE program staff. Participants either voluntarily participate in the program or are court ordered to participate in SOAR.
SAVE	The Sheriff's Anti-Violence Effort (SAVE) is a voluntary program that targets 18 to 25-year-old males who are likely to be victims of violence or to perpetuate violence. The cohort-based programming is grounded in an effective form of psychotherapy known as cognitive behavioral therapy, widely recognized as an

	<p>evidence-based component to effective rehabilitation. SAVE is designed to instill positive social norms and values in participants. Motivated participants are provided with the tools and support they need to reintegrate into some of the Chicago communities most impacted by violence.</p> <p>The SAVE program consists of two components. During the first component SAVE participants are housed together on a single tier. While in custody, participants are provided with daily individual therapy and programming based on and related to cognitive behavior therapy, anger management, and life skills. Upon discharge, participants are linked to intensive case management services and partner agencies in the community. Both SAVE staff and community partners offer support to participants as they transition to the community.</p>
CARP	<p>The mission of The Clinical Assessment and Rehabilitation Program (C.A.R.P.) is to use a co-responder approach to cultivate a healthier outlook on mental health through evidence-based treatment modalities and to provide clinical support to Individuals in Custody (IICs).</p> <p>CARP is designed to engage IIC's in individual and group programming to develop skills that will deter extreme behaviors. This includes participating in individual and group interventions, administering assessment measures, developing and implementing crisis related safety plans, increasing self-awareness of risk and protective factors, and providing additional resources for long term sustainability.</p>

(3) Information on Providers

Information on the providers, managers, and/or operators of the behavioral health care program, activity or service and any overlap in funding, to the extent it is known.

The Department of Behavioral Health is comprised of various mental health and substance use programs throughout SMART, THRIVE, MHTC, SAVE, SOAR, and CARP. Each of these programs is staffed with mental health professionals with clinical training including Licensed Clinical Psychologists, Licensed Social Workers (LSW), Licensed Clinical Social Workers (LCSW), Licensed Professional Counselors (LPC), and Licensed Clinical Professional Counselors (LCPC). Additionally, we have individuals who are Certified Alcohol Drug Counselors (CADC). The Department of Behavioral health staff work with clients from a variety of backgrounds and have experience working with the most vulnerable populations and providing a variety of services such as specialized mental health and substance use treatment, trauma informed cared, anti-violence, case management, and re-entry care coordination.

In the second half of 2023, twenty new team members were added. All positions are funded through the CCSO general operating budget, except for one position for SMART which is funded by a grant from the Illinois Criminal Justice Information Authority (ICJIA). There is no overlap in funding for CCDOC Department of Behavioral Health staff. Members added:

MHTC

- July 2023: Community Recovery Specialist, CCSO general operating budget.
- August 2023: Behavioral Health Specialist, CCSO general operating budget.
- October 2023: Behavioral Health Specialist, CCSO general operating budget.

THRIVE

- September 2023: Behavioral Health Specialist, CCSO general operating budget.
- October 2023: Behavioral Health Specialist, CCSO general operating budget.
- November 2023: DOC Inmate Population Specialist, CCSO general operating budget.

SMART

- June 2023: Clinical Program Manager of Men’s Treatment (LCSW), budgeted under the RSAT grant.
- August 2023: Re-Entry Care Coordinator, CCSO general operating budget.
- September 2023: Re-Entry Care Coordinator, CCSO general operating budget.

The Clinical Assessment and Rehabilitation Program (CARP) [New Program, 2023]

- August 2023: Mental Health Clinician, CCSO general operating budget.
- August 2023: Mental Health Clinician, CCSO general operating budget
- September 2023: Mental Health Clinician, CCSO general operating budget.
- October 2023: Behavioral Health Specialist, CCSO general operating budget
- October 2023: Behavioral Health Specialist, CCSO general operating budget
- October 2023: Mental Health Clinician, CCSO general operating budget.
- October 2023: Mental Health Clinician, CCSO general operating budget.
- October 2023: Mental Health Clinician, CCSO general operating budget.
- October 2023: Additional request of two Mental Health Clinicians and two Behavioral Health Specialists.

SAVE

- September 2023: Reentry Care Coordinator, CCSO general operating budget.
- October 2023: Reentry Care Coordinator, CCSO general operating budget.
- October 2023: Behavioral Health Specialist, CCSO general operating budget.

The CCDOC Department of Behavioral Health also works with clinical interns who are unpaid. During the academic year, CCDOC works with local graduate schools to provide clinical training to students earning their Masters or Doctoral degrees. Students are on site between 16 and 20 hours per week and are with us between 9 and 12 months. In this reporting period, CCDOC has nine interns.

(4) Key Performance Indicators

Key performance indicators measuring the results of the program

Computerized Adaptive Testing for Mental Health (CAT-MH)

The CCDOC implemented the Computerized Adaptive Testing for Mental Health (CAT-MH) across four CCDOC programs – SMART, THRIVE, SAVE and MHTC. This serves as another key performance indicator for the CCDOC behavioral health programs, and information on the number of assessments is included in these semiannual reports.

Despite the extremely high rates of depression, anxiety, and other psychiatric symptoms in incarcerated individuals, mental health conditions often go undiagnosed and undertreated in this population. An often-cited reason for this disparity is that correctional institutions often lack the resources to conduct widespread mental health screening of individuals-in-custody (IICs) in their care. Technology-enabled mental health services have shown great promise in helping to bridge this gap by creating reliable, cost-efficient, and adaptable means of psychiatric assessment. The CAT-MH is one such technology, which uses principles of computer adaptive testing to efficiently and accurately measure symptoms across major diagnostic categories.

The CAT-MH implementation at CCDOC started in June 2021 with the goal of validating the CAT-MH tool in a sample of individuals detained at the Cook County Jail. CCDOC continues use of the tool to track the mental health of IICs over time. IICs enroll in this program alongside their enrollment in the separate behavioral health programs within CCDOC.

CAT-MH Participant numbers (June 2023 – November 2023)

MHTC:

- Total number of interviews: 3649
- Total number individuals enrolled: 499
- Number of active/current participants: 74

SMART:

- Total number of interviews: 6430
- Total number individuals enrolled: 719
- Number of active/current participants: 64

SAVE:

- Total number of interviews: 3642
- Total number individuals enrolled: 431
- Number of active/current participants: 38

THRIVE:

- Total number of interviews: 1610
- Total number individuals enrolled: 219
- Number of active/current participants: 33

Across all four programs:

Total number of individuals enrolled (across all four programs, since July 2020): **1,868**

Total number of assessments (across all four programs, since July 2020): **15,331**

CAT-MH Participant Outcomes

Anxiety

The anxiety score decreased between the baseline assessment and the last assessment taken by each participant. The number of participants scoring within the normal range increased, and the number of participants scoring in the mild, moderate, and severe ranges decreased over time.

Depression

The depression score across all programs decreased between the baseline assessment and the last assessment taken by each participant. The number of participants scoring within the normal range for depression increased, and the number of participants scoring in the mild, moderate, and severe depression ranges decreased over time.

PTSD

The PTSD score across all programs decreased between the baseline assessment and the last assessment taken by each participant. The number of participants who had no evidence of PTSD symptoms increased while the number of participants who scored within the possible and highly likely ranges for PTSD decreased over time.

(5) Expectations for Contracts

Quality measures or expectations for contracts involved in the program, where applicable

The CCDOC behavioral health programs do not have contracts with outside agencies, but our behavioral health programs do work with the community partners regarding referrals for service and providing continuity of care once an individual in custody is released. We often utilize a Memorandum of Understanding (MOU) to formalize our partnership with community agencies. See below for the MOUs that the CCDOC programs are currently working under.

MOUs	MOU Expectations
Roseland Community Hospital	Collaboration between CCSO and Roseland Community Hospital to provide reentry planning services for IICs scheduled to be released
Heartland Alliance/READI	Collaboration between CCDOC and Heartland Alliance to identify CCSO IICs who would benefit from READI Chicago services (Rapid Employment and Development Initiative).
Illinois Department of Employment Services (IDES), Chicago Cook Workforce Partnership, and Central States SER Jobs for Progress.	This MOU between IDES, the Partnership, SER and the CCSO SAVE program is a collaboration between stakeholders to provide post-release Workforce Innovation and Opportunity employment services to SAVE participants.
Southwest Organizing Project (SWOP)	Collaboration between CCSO (SAVE) and SWOP to provide post release supportive services in the community.
Westside Health Authority	Collaboration between the CCSO SAVE program and the Westside Health Authority to provide comprehensive post-release supportive services to SAVE participants.

(6) How Program Serves the Best Interest of Patients and Communities

Information on how the care being provided in this program serves the best interests of the patient/recipient of care as well as the communities where the patient/recipient of care or services resides.

For each of the programs within the Department of Behavioral Health (SAVE, SMART, THRIVE, SOAR, MHTC, and CARP), each client is assessed on an individual basis by a clinician. Based on that clinical assessment or intake, a treatment plan is developed to assist the client with working toward their treatment goals. Additionally, our case managers and re-entry care coordinators work to develop a client centered re-entry plan to assist the individual with successful reintegration into the community. The re-entry plan addresses the individuals clinical, medical, educational, employment/vocational, individual, community, and familial needs.

Our SMART and THRIVE programs typically rely on support from the judiciary and community, including local community organizations, and treatment facilities such as recovery homes for our participants once they are discharged from our custody. These entities provide community re-entry services and wrap around services which are essential to the recovery of our clients. Community support is encouraged to maintain ongoing recovery.

One of the biggest components of our SOAR and SAVE program is the community component. We identify appropriate community partners for individuals in these programs to work with upon discharge. We rely on community partners to work hand in hand with CCODC staff to provide treatment, wrap around services, and resources. Additionally, family and community support are encouraged to promote ongoing improvement and recovery.

In our SAVE program, we specifically match individuals in custody to community providers from the communities that they will reside in post release. We connect the providers with the men in custody through programming at CCDOC to foster relationships between the provider and the patient while in custody.

In the CARP program, Individuals in Custody (IICs) are assisted in cultivating a healthier outlook on mental health and are provided clinical support. The program design engages IICs in individual and group programming to develop skills which includes participating in individual and group interventions, administering assessment measures, developing, and implementing crisis related safety plans, increasing self-awareness of risk and protective factors, and providing additional resources for long term sustainability.

With all programs, we keep community in mind when making recommendations so that individuals are paired with the most appropriate services geographically and culturally.

(7) Information on Continuum of Care

Information on how the continuum of care may be addressed through this program

The Department of Behavioral Health is comprised of various mental health and substance use programs including SMART, THRIVE, MHTC, SAVE, and SOAR. Each of these programs addresses the continuum of care by assessing client individual needs and wants and creating re-entry plans to assist the individual with successful transition to the community. Additionally, we make referrals to a variety of community agencies for community reentry services, including housing, substance use treatment, mental health, medical, educational, employment/vocational services, etc. Furthermore, all programs offer intensive case management and re-entry care coordination which allows individuals to meet with case managers either in person or via phone to provide as much support as possible. Moreover, we facilitate alumni groups for each behavioral health program, where individuals who are alumni of our programs are invited to remain connected to our clinical staff and treatment team. Finally, we also utilize “in reaching” programming where we engage community agencies to come to the jail to begin providing their services to individuals while still incarcerated. This allows rapport to be built between the community provider and the program participants which will increase the likelihood of continued engagement in their program post release.

(8) Best Practices

Information on the best practices in this type of programming

The Department of Behavioral Health is comprised of various mental health and substance use programs including SMART, THRIVE, MHTC, SAVE, and SOAR. Each of these programs is based on best clinical practices. We use the latest research, trauma informed care and practices and are informed on appropriate jail-based standards. Examples of evidenced based programming include the Thinking For Change curriculum (used for MHTC) and Stephanie Covington's Addiction Recovery Materials for justice involved women (used for THRIVE). In addition, many of our programs use a cognitive behavioral therapy approach to reframe cognitions as a way to improve behavior. We comply with ethical standards such as utilizing informed consent and appropriate disclosures of information. Clinical staff are provided with daily clinical supervision, attend trainings, and seek peer consultation as needed.

An additional best practice that the CCDOC employs is naloxone distribution to those at risk of an opioid overdose. Naloxone training alerts are added by our partners at Cermak Health Services for patients who they have identified and agreed to be trained while in custody. This typically occurs when patients are admitted into the detox unit or speak with a provider about their addiction. Patients receive education from the provider and then issued an alert in the Jail Management System, CCOMs. At discharge, CCSO staff recognize the alert and distribute a kit with information and naloxone to the patient.

(9) Meetings/Coordination with Partners

Information detailing meetings and coordination on patient identification, programs and goals with other Cook County agencies, City of Chicago or other partners or entities on this program, where applicable

The CCDOC has multiple partner agencies in the community that contribute to the success of individuals leaving our custody. We continue to work very closely with the City of Chicago, Circuit Court of Cook County, Cook County Public Defenders, Cook County State's Attorneys, and Cook County Health and Hospital System. The CCDOC also continues to work with many community stakeholders who assist us with wrap around services, continuum of care services and supervision and monitoring of our participants.

Partner meetings included (June 2023 – November 2023):

THRIVE

- 6/15/23: TASC facilitated a CCDOC tour for delegates from Mexico and Columbia. The tour focus was on alternatives to incarceration, notably substance use and recovery. The tour visited Division 3 annex to learn more about women's programming, including THRIVE and the medium/max program tier.
- 8/22/23: Cermak Staff facilitated a site visit with SAMSHA grant officers. Women's Services staff participated and led the visitors on a tour of THRIVE in the Residential Treatment Unit.
- 9/14/23: Ascend facilitated a presentation on Economic Justice to THRIVE, the Program Tier, and General Population women.
- 9/28/23: Women's Justice Institute in partnership with Cermak presented to THRIVE women on re-entry through substance use inpatient and outpatient services.

- 10/25/23: CCDOC Women's Services team participated in a Domestic Violence Poetry Slam with Fox Valley Prison and Decatur Prison. Women's Justice Institute hosted via Zoom and provided snacks and refreshments. Six women at CCDOC presented their poems, and their families were able to register and watch performance. THRIVE and the Medium/Maximum Program Tier were in the audience.
- 10/26/23: Women's Services held their second annual Talent showcase featuring performances by THRIVE and the Med/Max Program tier. IICs, program staff, and officers performed in the show. Community partners Ascend, Kolbe House, Northwestern Law, and Women's Justice Institute donated care packages and attended the performance.

SAVE

- 6/12/23: SAVE program met with Tina Dorow to discuss parenting groups.
- 6/23/23: Safer Foundation began a 10-week course on Know Your Rights Know Your Resources.
- 7/11/23: Northwestern University began a 5-week course on Technology, Power, and Resistance.
- 8/2/23: SAVE program met with Institute for Nonviolence Chicago to discuss potential collaboration.
- 8/8/23: SAVE program met with Story Catchers Theatre to discuss potential collaboration.
- 9/27/23: SAVE program met with Violence Interrupter Tio Hardiman to discuss potential collaboration.
- 9/27/23: SAVE program met with Aaron Smith, Escaping The Odds, to discuss potential collaboration.
- 10/6/23: Tio Hardiman, Violence Interrupter, began programming with SAVE program.
- 10/10/23: Victor Woods, guest speaker, visited SAVE to share past experiences related to criminal behavior, incarceration, and overcoming life challenges.
- 10/11/23 and 10/13/23: The Chicago School of Professional Psychology met to discuss volunteers working with the SAVE program.
- 10/19/23: Institute for Nonviolence began programming with the SAVE program.
- 10/31/23: Precious Blood Ministries met to discuss peace circles within CCDOC programs.
- 11/21/23: Aaron Smith, Escaping The Odds, began programming with SAVE program.

MHTC

- 5/26/23: MHTC Thinking for Change Graduation Ceremony. Graduates of MHTC have completed the Course which focuses on examining cognition and behavior.
- 6/14/23: FAMILY CARES Father's Day event.
- 6/22/23: The Internal Advisory Council was created in partnership with Chicago Beyond-Holistic Safety Action Alliance. The goal of the IAC is to create an environment that promotes healing and wellness for staff, building trust between staff and people incarcerated, and create a model that can be used in other departments within the Cook County Sheriff's Office. The Committee consists of civilian and sworn CCSO staff.
- 8/18/23: Two Connecting to the Community (CTC) members from the Ashunti house, a community based transitional living facility, addressed MHTC men to share information on their housing services to assist IICs with re-entry service upon release.

- 9/1/23: Collaboration with community organization Angel Tree signed up MHTC IICs for Christmas gift assistance for their children.
- 9/22/23: CTC conducted a virtual forum to share supportive services to the MHTC men.
- 10/20/23: CTC member, and former MHTC participant, conducted an intimate and informational group for Domestic violence month, October, to bring awareness to domestic violence.
- 10/23/23: First Institute launched a program to teach welding skills. A welding certificate can be earned with successful completion of the course.
- 11/3/23: Goodwill of Chicago established a vocational 6-week closed Group in November and December of 2023. The collaboration will assist the MHTC men with employment skills and opportunities.
- All on November 2023: Ongoing collaboration with TASC to assist MHTC participants with medical assistance and Medicaid enrollment.

SMART

- 6/12/23: Dr. Benneth Lee, founder of National Alliance for the Empowerment of the Formerly Incarcerated (NAEFI), began providing weekly groups to SMART IICs.
- 7/17/23: Cook County Adult Mental Health Court – Bridgeview graduation ceremony included a SMART alumnus.
- 6/20/23: UIC Healthy Start began facilitating a weekly fatherhood group to IICs.
- 8/30/23: SMART began a partnership with UIC College of Nursing students who provide weekly groups to IICs.
- 9/14/23: SMART established a community partnership with Cara Chicago to facilitate bi-weekly vocational training and re-entry education groups to IICs.
- 9/15/23: SMART coordinated with community partners, Kolbe House Jail Ministry, to begin weekly addiction recovery groups that are facilitated by a licensed psychologist.
- 10/6/23: The Chicago School of Professional Psychology toured the SMART program to gain more information about volunteer opportunities.
- 11/1/23: SMART established a community partnership with Oxford House, who will facilitate monthly presentations about re-entry services.
- 11/30/23: Seven SMART participants graduated from the Cook County Adult Drug Court RAP/WRAP Program.
- SMART maintains an ongoing partnership with the Chicago School of Professional Psychology. Student interns and volunteers work with SMART staff to provide therapeutic services to IICs.

The Clinical Assessment and Rehabilitation Program (CARP)

- 8/29/23: CARP honored International Overdose Awareness Day (IOAD). IOAD is the world's largest annual campaign to end overdose, remember without stigma those who have died from overdose, and acknowledge the grief of the family and friends left behind.
- 9/6/23: Like MHTC, CARP took part in the Internal Advisory Council (IAC), a partnership with Chicago Beyond to improve staff wellness and policy changes.
- 9/13/23: Program leaders attended The Chicago School of Professional Psychology hosted Job and Volunteer Fair which connected their partner sites and students.
- 9/25/23: CARP team attended State of Mental Health 2023 Conference, hosted by The Chicago School of Professional Psychology, presenting on mental health in black communities.

- 10/25/23: Chicago Beyond, Holistic Safety Action Alliance (HSAA) team, Dr. Nneka Jones, Carl Williams, and Quincy Jones, toured CARP programming and discussed program development and officer morale.
- 10/27/23: Thematic Analysis Focus Group was created to provide recommendations from the data interpreted by The Chicago School of Professional Psychology.

(10) Program Evaluation and Overlap with Other City/County Agencies

An evaluation of the program and an overview of any overlap in outreach, communities served, and programs with other Cook County and City of Chicago Agencies, and an evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access.

The CCDOC behavioral health programs are unique in that they are directed towards individuals in custody (IICs) at CCDOC and individuals on electronic monitoring. Although there are other behavioral health services available to individuals in the community, CCDOC is the only agency uniquely positioned to offer behavioral health services directly to those who are detained in the jail or on electronic monitoring. As indicated in our answer to Question #4, various items are evaluated as performance indicators for each CCDOC program. Participants in all CCDOC programs trend toward outperforming a comparison group (if available) made up of individuals with similar characteristics. Individuals who are detained by the CCDOC either within the jail or on electronic monitoring are already classified as a vulnerable population. Additionally, the population served with CCDOC is overwhelming persons of color who experience behavior health disparities. The CCDOC Department of Behavioral Health aims to work with these individuals to help address health needs related to behavioral/mental health and substance use disorder and ultimately assist individuals find the care they needed for rehabilitation.

(11) Program Costs and Funding Sources

Information with the costs associated with the program(s) and funding source(s)

The major costs associated with the CCDOC Department of Behavioral Health programs are primarily staff time. The table below represents staff salaries and benefits for June 2023 through November 2023. Most CCDOC Department of Behavioral Health staff salaries are covered under the CCSO general operating budget, however currently there is one SMART staff member whose salaries and benefits are covered by an ICJIA grant.

CCDOC Program	# of FT Staff	Funding Source: CCSO Operating Budget	Funding Source: Other specified	Total Funds for Staff salaries + benefits (6/1/23 - 11/30/23)
SMART	13	\$385,370	ICJIA RSAT grant: \$51,852	\$499,048
THRIVE	10	\$358,951	NA	\$452,278
MHTC	7	\$281,233	NA	\$354,353
SOAR	In the summer of 2020, SOAR merged with the SMART and THRIVE programs. SMART and THRIVE staff operate the SOAR program.			
SAVE	8	\$240,067	NA	\$302,484
CARP	11	\$396,294	NA	\$499,330
TOTAL	33	\$1,661,915	\$51,852	\$2,107,493

(12) Additional Information to Facilitate Committee’s Understanding

Any additional information which may facilitate the Committee’s understanding of the program, initiative, or activity.

When new best practices are recognized, CCDOC will update current programs, establish new programs or host unique opportunities for staff or IICs. Additional opportunities that the DOC has utilized over the second half of the year include the following:

THRIVE

- 6/8/23: Joanie Bayhack began a dance class in Division 8 RTU with THRIVE women.
- 6/16/23: Dr. Willie Wilson held a speaker event with program tiers in Division 3 Annex. Dr. Wilson delivered a motivating message as well as donated commissary funds to the women in attendance.
- 7/19/23: Tom Cook from Kolbe House began the first cohort of the Understanding Dreams class.
- 7/19/23: In Judge Burns’ courtroom, nine employees from Women’s Services attended a training by Sesame Street in Communities and All Rise to enhance treatment court’s ability to serve children, youth and families. A portion of the training aired on ABC 7, *‘Sesame Street’ characters to help children of defendants in Cook County drug court by Leah Hope.*
- 8/11/23: At Division 16 gym, Dr. Willie Wilson spoke to program tiers including THRIVE. Elements included providing encouragement, musical selections, and a donation of \$25.00 toward IIC accounts.

SAVE

- 6/16/23: SAVE Alumni Meeting.
- 10/25/23: Mikhail Korenman began implementation of a SAVE chess program.

SMART

- 8/2/23: NBC Chicago News published an article highlighting the SMART program including interviews with participants.
- 8/3/23: SMART created a quarterly newsletter initiative for program IICs with the goal of promoting rehabilitation through creative expression.
- 8/4/23: Injustice Watch reporters toured the SMART program and interviewed participants about restorative justice.
- 10/12/23: SMART staff hosted a talent showcase to promote the positive changes of SMART IICs, while also highlighting the rehabilitative efforts of the Cook County Sheriff's Office. SMART staff partnered with Krispy Kreme to provide donuts to all SMART IICs and staff in celebration of the showcase. A Cook County Circuit Court Judge was also in attendance.

MHTC

- MHTC holds an Alumni meeting every 3rd Monday of the month.
- 12/15/23: MHTC Graduation Ceremony will be held 10:30-12:30 in Division 16 Gymnasium.

(13) Opportunities for Growth & Collaboration

Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government entity's behavioral health care programs.

The CCDOC Department of Behavioral Health provides mental and behavioral health programming to individuals in custody in coordination with Cermak Health Services of Cook County. Having this programming at the CCDOC is a practical and effective way to reach the individuals in custody of the Cook County Jail, as no other entity has such a direct connection to CCDOC-involved individuals. The CCDOC mental and behavioral health programs are rooted in evidence-based practice. Our clinicians are regularly assessing the department's program methods and outcomes and are kept apprised of the latest research regarding justice-involved individuals, so that they may adjust or change their approach and provide the best care to all CCDOC program participants.

(14) Information on Follow-up at a Cook County Hospital

Any additional information if patients receive follow up care at a Cook County hospital including medication management as a part of aftercare.

Individuals in custody of the Cook County Jail receive medical services from Cermak Health Services of Cook County. Further, individuals who are taking medications while detained at the Cook County Jail can receive a prescription for a refill at Stroger or select Cook County Health clinics post-release.

Community Resource Center (CRC)

(1) General Information

General information on the population served, including how patients were identified or applied for services, a breakdown of where patients of the program(s) reside in Cook County and the number of patients served over the last 24-month cycle

The Community Resource Center (CRC) most often serves individuals with some connection to the Cook County Sheriff's Office (CCSO); however, all members of the public may reach out to the CRC, regardless of their involvement in the criminal justice system. Participants are typically referred from electronic monitoring, the Cook County Department of Corrections, the CCSO evictions social service team or identified through outreach calls made to returning citizens. Over the last 24 months, ending November 30, 2023, CRC staff have assisted **15,772** individuals with services. Zip code data on where CRC clients reside is attached.

(2) Overall Goals

Overall goals of behavioral health program(s) including goals unique to the specific population served.

The Community Resource Center (CRC) is a supportive services initiative created and launched in 2020 by Sheriff Tom Dart, in direct response to the increase in critical situations caused by the COVID-19 pandemic, to connect individuals to resources in their communities. The CRC aims to leverage new and existing community partnerships to provide linkages to members of the community to address an individual's unique mental health, substance use, housing, mortgage/rental assistance, trauma, domestic violence, and/or employment and financial needs, regardless of involvement in the justice system.

What makes the CRC unique is how the Center functions as a hub for all in need of assistance, regardless of what assistance is needed. Together, the CRC staff have experience in many areas including case management, evictions, domestic violence/survivor support, counseling, substance use, and advocacy. The Center operates virtually from a Jail location but also has a walk-in location in West Town.

(3) Information on Providers

Information on the providers, managers, and/or operators of the behavioral health care program, activity or service and any overlap in funding, to the extent it is known.

CRC is now encompassed in the Community Engagement Unit. The Community Engagement Unit is headed by an Executive Director with a Juris Doctorate and 32 years of work in government administration. The Clinical Program Manager started in October of 2021, possesses a Master of Science in Administration and is a Licensed Clinical Professional Counselor. The preexisting direct services staff include Master of Social Work (MSW), Master of Science in Criminal Justice, MAs, MA in Clinical Mental Health Counseling, MS in Mental Health Counseling, and MA in Forensic Psychology. All clinical staff have some level of certification or licensure which include a Certified Alcohol Drug Counselor (CADC), Licensed Clinical Professional Counselor (LCPC), Licensed Social Worker (LSW), and Licensed Professional Counselor (LPC). All positions are funded by the general CCSO budget. There is no overlap in funding for CRC positions with other programs at the CCSO. CRC has added no new staff members during the second half of FY2023.

(4) Key Performance Indicators

Key performance indicators measuring the results of the program

The CRC tracks many variables each week on number of individuals called, those accepting services, and types of calls made. Listed below are the current key performance indicators that the CRC has been tracking and data collected during the specified timeframe.

Key Performance Indicators	Timeframe	Outcomes
Total Outreach Calls	6/1/23-11/30/23	17,485
New Individuals called weekly	6/1/23-11/30/23	3,952
Individuals who accept services	6/1/23-11/30/23	654
Referrals made	6/1/23-11/30/23	25,698

(5) Expectations for Contracts

Quality measures or expectations for contracts involved in the program, where applicable.

The CCSO behavioral health programs do not have contracts with outside agencies, but our behavioral health programs do work with the community partners regarding referrals for service and providing continuity of care once a IIC is released. We often utilize a Memorandum of Understanding (MOU) to formalize our partnership with community agencies. See below for the MOUs that the CRC has with community partners.

MOUs	MOU Expectations
MADO Health	MADO Health will work with CCSO to help provide residential mental health and substance use treatment services to individuals referred by the CRC.
Treatment Alternatives for Safe Communities (TASC)	TASC will work with the CCSO to provide specialized case management services to individuals referred by the CRC. This could include screening, clinical assessments, referrals, placement into community-based services, and client advocacy. Additionally, during this period, CCSO has been awarded a BJA 2 nd Chance grant, for which TASC will serve as the treatment partner. CCSO and TASC are currently in the year one planning phase of this grant.
Heartland Alliance Health (HAH)	HAH will provide flexible services to individuals leaving custody referred by the Sheriff's Community Resource Center's reentry care coordinators who have a history of repeated jail stays, homelessness, and severe mental health, substance use needs, and physical health needs.

Illinois Health Practice Alliance (IHPA)	Data sharing between CCSO and IHPA for the purpose of identifying individuals with mental health and substance use disorder treatment needs and providing linkages to services for such individuals.
Roseland Community Hospital	Collaboration between CCSO and Roseland to provide reentry planning services for IICs scheduled to be released.

(6) How Program Serves the Best Interest of Patients and Communities

Information on how the care being provided in this program serves the best interests of the patient/recipient of care as well as the communities where the patient/recipient of care or services resides.

As an agency that provides services to individuals who have had contact with the CCSO, the CRC is often the social service provider perfectly placed within the CCSO to assist an individual who may be in a vulnerable state. Our clinical staff are uniquely positioned to assist electronic monitoring (EM) participants when a person is in urgent need of support, but movement approval is pending. In such a situation, the CRC can reach out to CCSO colleagues that manage the EM program to help come up with resolution. CRC clinical staff embedded in CCDOC’s Discharge Unit have provided urgent assistance and immediate needs support, including shelter, SUD/mental health/medical hospitalization, transportation, and clothing to individuals prior to release from custody while additionally placing people in temporary stabilization housing.

The collaboration between our CRC clinicians and CCSO sworn partners is an ideal model to assist CCSO-involved individuals including those impacted by evictions, domestic violence survivors, and other victims of violence and crime. CRC’s inclusion within CCSO has helped address the needs of survivors of violence and other crimes, individuals in need of immediate substance use treatment or mental health services, persons displaced by eviction, and returning citizens much sooner than an outside agency, allowing for support and healing to begin as soon as possible. Once the CRC began developing the capacity to address the wide range of needs of individuals who come into contact with the CCSO, a natural transition was made to assist any Cook County residents who could benefit from these services.

(7) Information on Continuum of Care

Information on how the continuum of care may be addressed through this program

As an agency that provides care coordination and linkage services for individuals in need of a multitude of services related to housing insecurity and contact with the justice system, the CRC explicitly initiates the continuum of care chain for those we serve.

(8) Best Practices

Information on the best practices in this type of programming

CRC staff take a trauma-informed, strength-based approach to service delivery, working in collaboration with participants to identify risk and needs based on the individual's desired outcome. The Risk-Needs-Responsivity framework is used to assess risk level, need, and target interventions/guide case management. This evidence-based approach aligns well with the CRC's mission to address justice involvement, victimization, and eviction deficiencies and failures and foster empowerment, strength, and solutions.

(9) Meetings/Coordination with Partners

Information detailing meetings and coordination on patient identification, programs and goals with other Cook County agencies, City of Chicago or other partners or entities on this program, where applicable

CRC leadership is committed to building a broad network of partners, prioritizing relationship building while working to strengthen existing partnerships. In the first half of the year, CRC has collaborated with many outside partners including the following:

Organizations

- Brighton Park Neighborhood Network – Regularly attends virtual meetings of the Brighton Park Neighborhood Network to learn about the needs of the community and how we can assist.
- Age Options - Meets virtually with Age Options through external group meetings to learn about resources available to seniors and to assist them in steering their efforts.
- Cook County Medical Examiner- Discussions around how their new grief counselor initiative can assist their population and how we can partner to share resources.
- CHHRGE – Attend weekly virtual meetings of the Chicago Homelessness & Health Response Group for Equity to learn about the status of agencies that serve the unhoused population as well as how we can assist these agencies.
- Advocate Trauma Recovery Center – CRC works with Center to increase referrals and streamline the referral process for participants needing their services.
- Catholic Charities and Adult Protective Services – Discuss operations to improve referral process, educate each other on our individual programs, and work collaboratively for our shared clients.
- Chicago Furniture Bank – CRC has been established as one of their approved partner agencies. This partnership will allow CRC staff to assist those facing eviction, the previously unhoused, and those with limited financial resources to acquire furniture.
- Reloshare – The CRC utilizes Reloshare to place individuals in need of emergency shelter into housing while they develop referral plans.
- Alliance to End Homelessness in Suburban Cook County – CRC works with this organization to gain a stronger understanding of homelessness in the South Suburbs as well as to put on resource and referral fairs.

CCSO, County and State entities

- Community Engagement – Regularly attend events along with Community Engagement to provide resources and referrals to attendees.
- Sheriff’s Housing Assistance Resource Program (SHARP) – CRC is functioning as the referral branch for SHARP, assisting unhoused individuals with resources.
- Shower-up – Attend monthly “shower up” events along with SHARP to provide resources to the unhoused populations.
- Tails of Redemption (TOR) – Case management for those TOR participants that anticipate release soon and are ready to consider and plan their next steps.
- Specialty Courts – Communicate regularly with the State’s Attorney and Public Defenders offices to facilitate coordinated releases for those leaving CCSO with a court order to a treatment or other residential facility.
- Illinois Secretary of State – Working with CCSO executive staff to facilitate the ability for the reentry population to have easier access to obtaining their IDs onsite.
- Civil Process/Court Services – Participate in quarterly virtual presentations to stakeholders in the evictions process, such as landlords and attorneys, to explain the role of eviction social services.
- Court guidance – Attend court regularly with participants that have a higher level of need in navigating the system.

(10) Program Evaluation and Overlap with Other City/County Agencies

An evaluation of the program and an overview of any overlap in outreach, communities served, and programs with other Cook County and City of Chicago Agencies, and an evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access.

CRC is uniquely positioned to assist those who are facing struggles of any kind. Launched during the global COVID-19 pandemic, the CRC hit the ground running working with vulnerable individuals to address concerns relating to housing, employment, healthcare, and much more. CRC also works with recently released IICs, individuals on electronic monitoring, and persons at risk of eviction. To our knowledge, there is no other entity in Cook County that is set up to be a comprehensive information hub to link vulnerable individuals in need to the correct services available. Regarding impact, weekly call reports produced by the CRC reflect thousands of outreach efforts made each week to individuals, many of which are linked to services. In time, as the CRC grows, we hope to provide more compelling evidence of the need and effectiveness of the CRC when it comes to connecting vulnerable populations of Cook County to available services in their community.

(11) Program Costs and Funding Sources

Information with the costs associated with the program(s) and funding source(s)

The costs associated with the CRC are primarily related to staff time. There are a total of 13 full-time CRC staff. The table below represents staff salaries and benefits for June 2023 through November 2023. CRC staff salaries are covered under the CCSO general budget.

Funding	# of CRC Staff	Funding Source: CCSO Operating Budget	Salary + Benefits (6/1/23 – 11/30/23)
CRC	14	\$481,950	\$607,256
TOTAL	14	\$481,950	\$607,256

(12) Additional Information to Facilitate Committee’s Understanding

Any additional information which may facilitate the Committee’s understanding of the program, initiative, or activity.

The Community Resource Center appeared in a WTTW piece on July 20th, featuring the intervention and prevention work at the community-based West Town location. CRC leadership has worked to expand the department’s overdose prevention efforts using their CDPH grant to purchase xylazine strips, fentanyl test kits so that they can in turn distribute these items and naloxone in the lobbies of Cook County Jail’s Division 5 and Division 10, along with the CRC West Town and all Cook County Court locations.

(13) Opportunities for Growth & Collaboration

Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government entity’s behavioral health care programs.

Although CRC services are available to the general public, a vast majority of the linkages and referrals the CRC provides are to individuals who have involvement with the Cook County Sheriff’s Office. CRC, as an entity of the CCSO, is the logical party to provide these links to community organizations and has a responsibility to those involved with CCSO to guide them to the service/assistance they need. The CRC should be the natural first stop for information for the CCSO-involved population. No other organization can fulfill this role as efficiently and effectively. As the CRC becomes more established and builds more relationships with community partners, CRC will be able to support stronger, healthier communities throughout Cook County.

(14) Information on Follow-up at a Cook County Hospital

Any additional information if patients receive follow up care at a Cook County hospital including medication management as a part of aftercare.

The CRC does refer individuals to the Cook County Health and Hospital System (CCHHS), however there is no guarantee that they will seek services there. Further, individuals who are taking medications while detained at the Cook County Jail are able to receive a prescription for a refill at Stroger or select Cook County Health clinics post-release.

Treatment Response Team (TRT)

(1) General Information

General information on the population served, including how patients were identified or applied for services, a breakdown of where patients of the program(s) reside in Cook County and the number of patients served over the last 24-month cycle.

Cook County Sheriff's Treatment Response Team (TRT) participants are typically identified by a Cook County Sheriff's police officer as an individual in need of mental health services or via citizen calls to the 9-1-1 Call Center. In the past 24 months ending November 30, 2023, TRT has referred a total of 2,639 clients. The table below displays the residence distribution of TRT clients.

# of TRT Participants	Area of Residence
1206	Unincorporated Cook County
2	15th District
925	18th District
95	Other, Chicago
301	Other, Suburban Cook
78	Ford Heights
32	Other

(2) Overall Goals

Overall goals of behavioral health program(s) including goals unique to the specific population served

The Cook County Sheriff's Treatment Response Team (TRT) operates under the umbrella of the Cook County Sheriff's Police Department (CCSPD). TRT consists of licensed mental health professionals who are developing innovative ways to support and augment police interaction with individuals and families impacted by mental illness, substance use, and other life stressors. TRT programs provide law enforcement with new tools, interventions, and support with 24/7 access to on-call clinicians to assist individuals experiencing mental distress who could benefit from immediate support from a mental health professional. In addition to being available via phone and tablet interaction to assist the individual in need directly, day or night, the team offers follow-up support in person. By utilizing a mental health clinician via tablet or phone, the immediate connection with a TRT clinician can deescalate the situation, give the police on scene critical time to evaluate conditions, and allow for collaboration with clinicians to determine a best course of action. In addition, TRT delivers overdose and violence prevention/disruption through "Street Outreach" and pre-/post-incident services to at-risk individuals.

TRT provides the following programs:

1. Street Outreach: an overdose prevention program in which TRT clinicians, with CCSPD, canvass areas impacted by high levels of overdoses, mental illness, and housing insecurity. TRT provides Narcan, immediate treatment options (detox, inpatient), housing options and case management.

2. Co-Responder Virtual Assistance Program (CVAP). CVAP aims to address the underlying problems that lead to the behavioral health related 9-1-1 calls for service by working directly with the individual and family/friend support to identify and navigate the treatment system. CVAP provides law enforcement access to clinicians 24/7 via tablets while on scene to provide support to individuals experiencing a behavioral health crisis.
3. Pre- and Post-Incident Services: this program provides assistance to justice-involved individuals who have experienced a traumatic event and/or at risk of harm to self or others in the future without supportive services in place. Additionally, individuals who are at risk or could be on a track for committing violent acts are referred to TRT for threat assessment and intervention to disrupt the pathway to targeted violence through treatment and prosocial engagement.

(3) Information on Providers

Information on the providers, managers, and/or operators of the behavioral health care program, activity or service and any overlap in funding, to the extent it is known.

TRT is comprised of master level social workers and mental health professionals who are available 24 hours per day, 7 days per week. All TRT staff hold credentials as either a Licensed Social Worker (LSW), Licensed Professional Counselor (LPC), Certified Alcohol Drug Counselor (CADC), Licensed Clinical Social Worker (LCSW), Licensed Clinical Professional Counselor (LCPC), or Co-Occurring Substance use and Mental Health Disorder Professional (CODP I/CODP II). TRT staff have over 50 years of combined experience serving vulnerable populations in Cook County. TRT staff positions are covered by the CCSO general operating budget. There is no overlap in funding. During the second half of the year (June 2023 through November 2023), TRT added one member with an LPC (Licensed Professional Counselor).

(4) Key Performance Indicators

Key performance indicators measuring the results of the program

Key Performance Indicators	Timeframe	Outcomes
Referrals	6/1/23-11/30/23	709
Referrals Engaged in Services	6/1/23-11/30/23	446
Current Active Cases	6/1/23-11/30/23	347

(5) Expectations for Contracts

Quality measures or expectations for contracts involved in the program, where applicable.

The CCSO behavioral health programs do not have contracts with outside agencies, but our behavioral health programs do work with the community partners regarding referrals for service and continuity of care. We often utilize a Memorandum of Understanding (MOU) to formalize our partnership with community agencies. See below for the MOUs that the TRT program has with community partners.

MOUs	MOU Expectations
Above and Beyond	CCSO and Above and Beyond to collaborate in order to provide substance use treatment service to TRT program participants.
Haymarket	CCSO and Haymarket to collaborate in order to provide substance use treatment service to TRT program participants.
Miles Square Health (U of I Health)	CCSO and Miles Square to collaborate in order to provide substance use treatment service to TRT program participants.

(6) How Program Serves the Best Interest of Patients and Communities

Information on how the care being provided in this program serves the best interests of the patient/recipient of care as well as the communities where the patient/recipient of care or services resides.

TRT clients work with TRT clinicians in creating, implementing, and completing treatment goals. Clients and their loved ones are included in the recovery process. Clients are provided with other tools and resources to avoid experiencing another crisis which might involve law enforcement. Clients are matched with community partners that provide the services identified between the client, TRT, and existing medical providers. TRT provides community outreach and targets overdose “Hot Spots” identified by ODMAP, a real-time suspected overdose data mapping program. Education includes Narcan/Naloxone training and harm reduction principles.

In December 2022, TRT began taking non-emergency calls directed to it by the 9-1-1 Center. These calls which have mental health and/or substance use components are best served by being addressed by the clinicians in TRT. The utilization of TRT personnel for initiating and monitoring the low-risk calls improves the quality of CCSO response and care provided during the response.

(7) Information on Continuum of Care

Information on how the continuum of care may be addressed through this program

TRT addresses the continuum of care by assessing with the client what service they are interested in receiving and what is the least restrictive level of care to achieve their treatment goals. Clients moved through different levels of care to address the different stages of recovery they are in. TRT utilizes a bio-psycho-social model of intervention to provide the client with the most support possible.

(8) Best Practices

Information on the best practices in this type of programming

TRT follows the best practices and research from both the field of social work and law enforcement. The TRT is rooted in policy and procedure with diligent oversight and on-going training. The TRT is offered as a voluntary program for individuals and their loved ones who are experiencing mental duress, mental illness, and/or substance use disorders. Clients sign a release of information and a consent to work with the TRT which they can revoke at any time. TRT staff are provided with LCSW clinical supervision daily and monthly training on best practices. TRT staff routinely receive clinical training on crisis intervention, co-regulation, and compassion fatigue.

(9) Meetings/Coordination with Partners

Information detailing meetings and coordination on patient identification, programs and goals with other Cook County agencies, City of Chicago or other partners or entities on this program, where applicable

TRT has regular and on-going communication, coordination, and data sharing with many Cook County partners. TRT's Co-responder Virtual Assistance Program (CVAP) provides immediate on-scene mental health co-response to Northbrook, Oak Lawn, Bridgeview, Blue Island, Stickney, South Chicago Heights, Forest Park, Franklin Park, Cicero, Arlington Heights, Prospect Heights, Chicago Ridge, Posen, Alsip, Lincolnwood, Rosemont, River Grove, Barrington Hills, Hillside, Palos Park, Indian Head Park, Elgin, Elmwood Park, Hometown, Countryside, Lynwood, Willow Springs, and Merrionette Park police departments. TRT is also assisting the Chicago Police Department crisis intervention team in the 18th District.

In the first half of the year, TRT met with many police departments throughout Cook County in an effort to offer the CVAP program to all Cook County police agencies. From those engagements, TRT has substantially increased the co-response capability of Cook County and continues to add new collaborations. Currently, TRT has a commitment from a total of 37 Suburban Police Departments that have agreed to utilize the CVAP program.

(10) Program Evaluation and Overlap with Other City/County Agencies

An evaluation of the program and an overview of any overlap in outreach, communities served, and programs with other Cook County and City of Chicago Agencies, and an evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access.

Although there are many social service agencies throughout Cook County who aim to address mental/behavioral health and substance use disorder, TRT is unique as it offers the Sheriff's police a direct internal resource to utilize when they encounter individuals who may be of need of mental/behavioral health resources. The TRT CVAP model has been successful at deescalating behavioral health related calls to police, providing support to individuals with mental/behavioral health needs, and referring individuals to appropriate community services when needed. TRT has tracked that a large majority of their clients engage in services after referrals are given to them, which demonstrates that the follow up services that TRT is providing is linking individuals to the care that they need. The success of the TRT program is also reflected by the additional agreements with 37 other law enforcement agencies in Cook County.

(11) Program Costs and Funding Sources

Information with the costs associated with the program(s) and funding source(s)

The major costs associated with TRT consist primarily of staff salaries. The table below represents staff salaries and benefits for June 2023 through November 2023. All TRT staff salaries are covered under the CCSO general operating budget.

Funding	# of TRT Staff	Funding Source: CCSO Operating Budget	Salary + Benefits (6/1/23 – 11/30/23)
TRT	14	\$590,535	\$744,074
TOTAL	14	\$590,535	\$744,074

(12) Additional Information to Facilitate Committee’s Understanding

Any additional information which may facilitate the Committee’s understanding of the program, initiative, or activity.

In January 2021, the Treatment Response Team expanded its scope to include assisting Sheriff’s Police Officers’ response to both mental health and substance use calls. In June 2021, TRT partnered with Oak Lawn Police Department to implement the TRT CVAP model followed by the Blue Island Police Department in November 2021. In March 2022, TRT initiated the CVAP model with Northbrook Police Department. Similarly, TRT is assisting CPD and Chicago citizens in the River North area via outreach. At the end of 2022, TRT brought CVAP to Bridgeview, South Chicago Heights, and Stickney Police Departments. In 2023,

In the second half of this year, TRT initiated eight additional agreements with police departments. For the year, TRT has executed partnerships for CVAP with Forest Park, Franklin Park, Cicero, Arlington Heights, Prospect Heights, Chicago Ridge, Posen, Alsip, Lincolnwood, Rosemont, River Grove, Barrington Hills, Hillside, Palos Park, Indian Head Park, Elgin, Elmwood Park, Hometown, Countryside, Lynwood, Willow Springs, and Merrionette Park police department. Additionally, the 9-1-1 Center has been forwarding non-emergency calls to TRT since December 2022. In March 2023, two clinicians were hired who are now embedded at the 9-1-1 center taking non-emergency calls during business hours Monday-Friday. For the non-emergency calls overnight and on weekends, TRT addresses the calls off-site.

(13) Opportunities for Growth and Collaboration

Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government entity’s behavioral health care programs.

As our entire state moves to a more equitable approach to addressing mental and behavioral health emergencies, TRT is exploring ways to expand and grow their services. With the implementation of both the new national 9-8-8 suicide prevention and mental health crisis lifeline along with the passage of Community Engagement and Supportive Services Act (CESSA) in Illinois, CCSO and TRT envision being at the forefront of guiding the state’s response to mental health emergencies in Cook County. We foresee that opportunities will grow for mobile mental health crisis units and co-responder models, like the TRT CVAP program, as Illinois expands its capacity and expertise to respond to mental health emergencies.

TRT continues to expand their CVAP program in conjunction with, and not competition, with the State's development of alternative response to mental health and substance use crises. CCSO is a leading contributor to the development and implementation of 9-8-8 and CESSA with other partners across the State. The use of co-response and alternative response in collaboration will provide the most appropriate response to situations and provide care in the most effective manner. CCSO was a member of the 9-8-8 Planning Key Stakeholder Coalition and is actively involved in all CESSA committees including appointments by the Secretary of IDHS to CESSA Regional Advisory Committees (RACs) for EMT Regions 7 and 11. Congress mandated that the 9-8-8 hotline be available nationwide by July 16, 2022, and 9-8-8 launched on that date. Other civilian crisis response elements included in CESSA (including mobile crisis units) are not expected to be operational across the state until July 2024.

(14) Information on Follow-up at a Cook County Hospital

Any additional information if patients receive follow up care at a Cook County hospital including medication management as a part of aftercare.

TRT clients are given transportation benefits via UBER health transportation/travel vouchers for all treatment related appointments and referred to relevant providers which includes providers at the Cook County Health and Hospital System (CCHHS). These individuals are not engaged at the jail level, but rather in the community, thus they may not have received care from Cermak/Cook County Health as is more so the case with individuals detained.