The Eleventh Judicial Circuit Criminal Mental Health Project

**Success Story**

The Eleventh Judicial Circuit Criminal Mental Health Project (CMHP) in Miami-Dade, Florida is coordinating a continuum of care for adults involved in the justice system who have co-occurring substance use and mental health disorders. The CMHP uses case management and supportive services to divert individuals from the criminal justice system into community-based treatments that enhance and promote successful recovery and community integration for individuals who have been arrested, are in custody, or are reentering the community.

Program staff assess eligible program participants with validated tools to determine criminogenic risk and needs and to inform individualized transition plans. Those determined to have moderate-to-very high risk of committing a new crime are accepted for program services using the Assess, Plan, Identify, and Coordinate (APIC) transition plan that addresses treatment, services, and criminogenic interventions.

Recovery peer specialists who have firsthand experience living with behavioral health disorders support program participants with community reentry, treatment, and services. The peer specialists work alongside caregivers, family members, and other sources of support to minimize barriers to treatment engagement. The peer specialists model how to overcome challenges associated with behavioral health disorders by facilitating the development of adaptive coping skills and behaviors and assisting in building prosocial supports and activities.

Additionally, CMHP offers participants a one-of-a-kind, evidence-based cognitive behavioral intervention called Interactive Journaling that targets specific criminogenic risks and needs. Interactive Journaling teaches participants to reframe their past experiences and prepares them for a productive and healthy future.

Post-booking jail diversion programs operated by CMHP annually serve more than 400 individuals with serious behavioral health challenges/needs through this program. Over the past decade, CMHP and their partners have facilitated roughly 5,000 diversions of people with behavioral health challenges/needs, removing them from the county jails and placing them into community-based treatment and support services.

Based on the belief that community collaboration is key to successful, long-term institutional change, CMHP relies on cross-system commitment among stakeholders in the justice and behavioral healthcare systems in Miami-Dade County. Project partners include the Eleventh Judicial Circuit of Florida, the Criminal Mental Health Project, the Miami-Dade Department of Corrections and Rehabilitation, Jackson Health Systems-Corrections Health Services, and Thriving Mind.
Lessons Learned

CMHP learned:

• Partnerships facilitate the most effective transition from the justice system to the community mental health system where people with co-occurring disorders can be best served.
• Regular meetings to share information among staff are essential to promoting communication aimed at person-centered, individualized case management and transition planning for reentry.
• Rather than creating new services, merging and blending existing services is an efficient and cost-effective model of continuous care across systems.

What worked?

Key factors that contribute to the program’s success are:

• Consistent communication and stakeholder coordination.
• Assistance with collecting and analyzing program data, monitoring progress towards goals, and providing insight on what is and is not working.
• Improved case management using individualized assessment tools to determine program eligibility and APIC transition planning.
• Evidence-based cognitive behavioral interventions to support behavioral change.

What did not work?

COVID-19 negatively impacted some program components, including:

• Implementation of Interactive Journaling which was originally designed to take place in person. CMHP adapted sessions to be virtual or hybrid after collaborating with treatment providers and the creators of Interactive Journaling.
• Participant enrollment was impacted by pandemic-related restrictions on service provider intake and admission procedures, as well as challenges using a virtual platform. However, there have been adjustments; for example, peer specialists taught participants how to use virtual platforms and provided troubleshooting support.

What’s next?

• Continuing to engage project evaluator to gain insight into program participants’ experiences, learn what has led to successes, and expand knowledge on how to best serve this population.
• Data collection on how peer specialists currently support, and can further support, participants.
• Identifying service gaps to find new resources to incorporate into the existing network of services; CMHP will use the lessons learned for sustainability planning.

For more information, contact:

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