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## Feature

### Spotlight on JMHCP: Beaver County, Pa. (Planning)

*Each month the Justice Center spotlights collaborative criminal justice/mental health initiatives that have received funding from the Bureau of Justice Assistance's Justice and Mental Health Collaboration Program (JMHCP). Justice Center staff members ask the practitioners in these programs to discuss some successes and challenges they have encountered in the planning and implementation process. This month's profile is from Beaver County, Pennsylvania, a 2009 Planning grantee.*

#### *Brief Background on the Jurisdiction*

Beaver County, Pennsylvania, is a semi-rural county, located thirty miles northwest of Pittsburgh. It is an economically diverse area, with a total population of about 180,000. For more than ten years, the Beaver County Behavioral Health (BCBH) and the Beaver County criminal justice systems have worked collaboratively, leading to the development of an outpatient behavioral health "satellite" in the courthouse and a similar opportunity for outpatient services in the local jail, a Forensic Assertive Community Treatment (FACT) team, a re-entry liaison, specialized probation officers, and re-entry vocational support services.

*How did your jurisdiction realize that there was a need (or an additional need) to respond to the prevalence of individuals with mental illnesses in the criminal justice system?*

Planning for a new county jail in Beaver County galvanized local community advocates to work with BCBH and the criminal justice system to integrate provision of behavioral health services into the new jail's programming. In 2001, shortly after the new jail facility opened, BCBH developed a program with Gateway Rehabilitation Center (GRC) to provide integrated co-occurring disorder (COD) treatment to individuals in the Beaver County Jail and follow-up services in the community. Since its inception, this project has identified more than 850 unique individuals needing COD treatment. Success has been demonstrated by the following outcomes: 40 percent of those discharged from jail-based treatment remained out of jail for at least twelve months and nearly 58 percent of participants engaged in community-based behavioral health treatment.

In 2008, Beaver County joined other counties in Pennsylvania to establish a Criminal Justice Advisory Board (CJAB) to bring together county officials to address criminal justice policy and systems issues. As a member of the advisory board, BCBH has continued working with county leaders to identify opportunities for further work in this area. The success of the jail-based COD treatment program helped identify the need for appropriate COD interventions throughout the criminal justice system.

*Who initiated the grant application process? How were relationships formed between criminal justice and mental health agencies to prepare for this process?*

The grant application process was initiated by BCBH through its participation in the Beaver County CJAB. Due to the previous collaborative initiatives between behavioral health and criminal justice entities, the majority of key relationships had already been formed. Necessary new partnerships were facilitated by existing members on the planning subcommittee.

*What is the initiative your task force is currently planning? What will be the "end product" of the planning process?*

The end product of the Category I: Planning Grant is a strategic, collaborative plan to ensure the identification and treatment of both juveniles and adults with mental illnesses and CODs involved in the criminal justice system. The ultimate goal is to design a system that will promote public safety and public health by intercepting individuals at the earliest point in the criminal justice system and offering appropriate behavioral health services.

*How did your task force educate yourselves about available resources and processes in the behavioral health system?*

The task force is a subcommittee of the local CJAB, with members representing all major behavioral health and criminal justice partners. The broad representation of the task force facilitated collaboration and the sharing of expertise regarding the various processes in both the criminal justice and behavioral health systems.

Task force members have also sought to better educate themselves through a series of cross-trainings, including topics such as:

- Crisis Intervention Teams (CIT)
- The Beaver County Transition to Independence Process System (TIPS) program
- Beaver County Crisis Services
- Specialized probation and parole
- Jail-based assessment and treatment services
- An overview of CODs and their effect on criminal justice behaviors
- An overview of Beaver County's courthouse assessment program

*What resources or analysis have been most useful for your planning group in considering and*

*evaluating different approaches to this issue?*

Our planning initiative has primarily used the Sequential Intercept Model (SIM) as a framework to assess existing services and behavioral health programming opportunities. It has been helpful in enabling task force members to focus on a particular process area within the overall criminal justice system. The philosophy of “intercepting” individuals at the earliest point possible has also provided a means to organize the integration of behavioral health services throughout the criminal justice system, as opposed to viewing programs as a collection of stand-alone initiatives. Our [Justice and Mental Health Collaborative Grant](#) document shows how we were able to use the SIM to structure current processes, including the numbers of individuals involved, and opportunities for improvement.

*What has been your biggest challenge and how are you addressing it?*

The development of a training program for law enforcement that ensures the buy-in from first responders and accommodates the rural, urban, and suburban areas of the county has been challenging. Any initiative will need to accommodate the multiple small police departments as well as those areas covered by the state police in Beaver County. Although the county is considering CIT, the time commitment required for certification may be unreasonable in areas with only a few officers. In response to this challenge, the task force sought the advice of the director of the Municipal Police Training Academy in Beaver County. In addition, members of a regional CIT presented an overview of the program to subcommittee members and discussed specific challenges and techniques for its implementation in areas with similar demographics.

*Provide an example of a particular success your program has had to date.*

A key area of success has been sharing information about existing programs among task force members. The systematic review of behavioral health programs within the criminal justice system often resulted in an interest to increase the use of existing services. The cross-trainings held for both criminal justice and behavioral health practitioners educated task force members on new program opportunities and further highlighted existing programs within the behavioral health and criminal justice systems.

*Have you identified steps your initiative will need to take to move from planning to implementation?**What do these steps look like?*

The task force has prioritized the following interventions that address specific areas of need identified in our planning process:

- Training for law enforcement and first responders
- Developing a court-based assessment and diversion program
- Developing a safe alternative to incarceration, such as an adult residential respite program
- Ongoing cross-trainings on existing interventions and diversion programs

To implement these interventions we have begun to seek out further funding, such as through the Category II Planning and Implementation Grant.

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