

Restoration Center: An Update

Rolando L. Santiago, PhD
Chief, Behavioral Health and Crisis Services
Department of Health and Human Services
Montgomery County, Maryland
Athena Morrow, Consultant

Virtual presentation delivered at City of Rockville Council
meeting, July 11, 2022

Overview

- ▶ The Crisis Now Model
- ▶ The Reality Now
- ▶ Description of Restoration Center
- ▶ Key Planning Features
 - ▶ Discharge Planning
 - ▶ Transportation Plan
 - ▶ Criteria for Site Selection
- ▶ Current and Future Actions

The Crisis Now Model

- ▶ Montgomery County has been developing the Crisis Now Model over the last two years to divert persons experiencing a behavioral health crisis from emergency rooms and jails.
- ▶ The key components of the Crisis Now Model in Montgomery County include:
 - ▶ Coordinated crisis call centers (i.e., 911, National Suicide Prevention Lifeline - 988, Crisis Center Hotline, and 311)
 - ▶ Mobile crisis and outreach teams (MCOTs)
 - ▶ Stabilization facilities (e.g., Restoration Center)
 - ▶ Follow-up system of care services

The Reality Now:

Service Gaps of Offenders Addressed by Restoration Center

- ▶ Offenders processed in Central Processing Unit (CPU) are being released on bond without having their behavioral needs addressed.
- ▶ Incarcerated individuals are being released on bond during all hours of day and night often without advance notice to service providers based in the jail.
- ▶ Offenders released in Court must come to the Detention Center to retrieve their property. They need transportation to their next destination.
- ▶ A portion of incarcerated individuals receive behavioral health assessments and discharge planning but many cycle through too rapidly for this planning process.
- ▶ Released individuals, sometimes in crisis, seek their own transportation and walk through the community to the nearest bus station on foot.
- ▶ The Restoration Center will be designed and staffed to address the behavioral health needs of these individuals by employing peers and a multidisciplinary team of medical, mental health, and substance use specialists with a variety of services described below.

Description: Purpose

- ▶ Stabilize persons experiencing a behavioral health crisis over the first 24 to 72 hours
- ▶ Divert persons in crisis from emergency rooms and jails

Description: Facility

- ▶ Staffed 24 hours/7 days a week/365 days of the year
- ▶ Triage and evaluation component
- ▶ Sobering station
- ▶ Stabilization unit
- ▶ Discharge planning - linkage & referrals
- ▶ Transportation options

Description: Triage and evaluation component

- ▶ Initial assessment of behavioral and medical needs to determine appropriate levels of intervention on a case-by-case basis.
- ▶ Five (5) recliners
- ▶ Supportive spaces: Triage room, observation room, interview room

Description: Sobering Station

- ▶ Persons under the influence of alcohol and other substances have a safe place to recover from the impact of the substances.
- ▶ Twenty (20) recliners
- ▶ Length of stay: Not to exceed 23 hours
- ▶ Key staff: Licensed medical professionals who can monitor patients for health concerns

Description: Stabilization Unit

- ▶ Provide persons experiencing a mental health or substance use crisis with emergency medical stabilization in a safe environment while waiting to be redirected to the most appropriate and least restrictive setting available in the community
 - ▶ Prevention and de-escalation of behaviors to decrease probability of inpatient hospitalization or incarceration
- ▶ Twenty (20) beds
- ▶ Length of stay: Not to exceed 48 hours
- ▶ Key staff: Multidisciplinary team to include a psychiatrist, nurse practitioner, licensed mental health staff, and peer support specialists
- ▶ Supportive spaces: Sensory/quiet room, dining and TV room

Discharge Planning - Linkage and Referrals

- ▶ Discharge planning will occur in collaboration with community providers and begins upon admission, regardless of length of stay and consistent with the individual needs of each client
- ▶ Referrals and linkages to new or existing providers:
 - ▶ Residential or outpatient treatment providers that include private nonprofit or for-profit service providers specializing in psychiatric, substance use or other behavioral health concerns
 - ▶ Housing and homeless resources
 - ▶ Entitlements
 - ▶ County resources such as behavioral and human services
 - ▶ Peer and other support services
 - ▶ Hospitals (when medical or psychiatric needs meet the medical necessity criteria required for admission to a hospital setting)

Transportation Options

- All clients served by the Restoration Center will be evaluated for their transportation needs to their next destination and provided with a variety of options that will include the following:
 - Access to Uber, Lyft or Taxi to transport clients to their next destination outside of the Seven Locks neighborhood.
 - Transport by peer specialists or other staff in facility-owned vehicle to another treatment facility.
 - Transport by Montgomery County Police Department (MCPD) to the local hospital emergency department for those who require an emergency evaluation petition (EEP).
 - Transport by client-owned vehicle or by family or friends-owned vehicles to client's next destination outside of the Seven Locks neighborhood.
 - Transport by Montgomery County Fire and Rescue Services (MCFRS) for those with medical needs who require transport to the hospital emergency department.

Criteria for Site Selection

- ▶ **Alternative processing for clients at the site.** Police can drop-off at the Restoration Center clients who have committed minor offenses, as an alternative to taking them to the Central Processing Unit (CPU) for criminal processing. Those who are not agreeable to receiving treatment services can be taken to CPU for charging.
- ▶ **Access to services for court-released clients.** Offenders released from Court return unescorted to retrieve their property from the Detention Center. Upon retrieval of their property they can self-admit for behavioral health services and referral to appropriate resources.
- ▶ **Resources readily available to Detention Center staff for exiting inmates.** This would include Department of Health and Human Services (DHHS) and Department of Corrections and Rehabilitation (DOCR) clinical staff or case managers providing transition services to reentering inmates.
- ▶ **Resources available for clients being released from CPU.** Offenders released from CPU are frequently experiencing crises such as actively detoxing, not having access to medications, cannot return to their homes, needing behavioral health services that might have led to criminal behavior, lacking resources to travel to safe destinations. They would receive services.
- ▶ **Enhanced community outreach.** Staff available for behavioral health interventions for released inmates or other clients demonstrating concerning behaviors.
- ▶ **Easy centralized transportation access to community providers, family members and first responders.** The site is right off I-270, with ample parking.

Current Actions

What is being done now?

- ▶ Completed Program of requirements (POR) for a Restoration Center
- ▶ Incorporated the Restoration Center in the FY23 Capital Improvement Program (CIP)
- ▶ Nurturing relationships with partners through workgroup that meets regularly, Leadership Collaborative, building relationships with the State, across jurisdictions, and across the country
- ▶ Fundraising activities:
 - ▶ Obtained State funding through efforts by Maryland's legislative delegation (FY23 - \$12 million, FY24 - \$5 million)
 - ▶ Submitted FY24 application for funds through the Capital Improvement Projects Grants and Loans of the Maryland Department of Health

Future Actions

What will happen in next 12 months?

- ▶ Engage in community conversations regarding the programming and functions of the Restoration Center
- ▶ Generate a Request for Proposal (RFP) to attract viable organizational candidates interested in operating the Restoration Center
- ▶ Continue to build partner relationships in the county, across the State, and nationally
- ▶ Collaborate closely with all interested parties such as City of Rockville and County leaders, DGS, MCPD, MCFRS, DOCR, the courts, hospitals, private service providers (e.g., treatment, housing, homeless services, benefits specialists, local charities)