

NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

Division of Mental Health,
Developmental Disabilities and
Substance Use Services

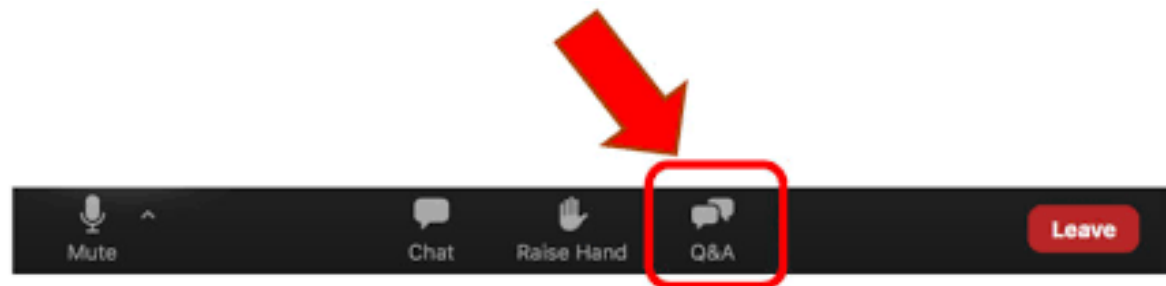
Justice Request for Applications (RFA) Community Engagement Webinar

August 29th, 2024

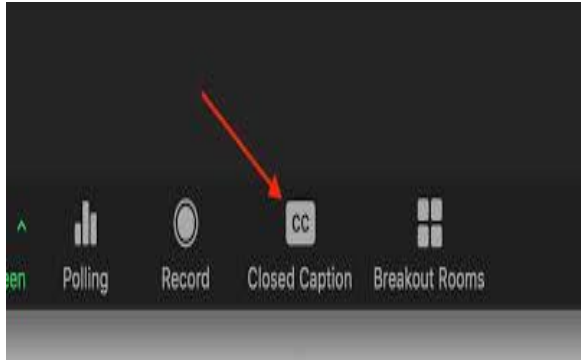
9:00-10:00 am ET

Reminders about the webinar technology:

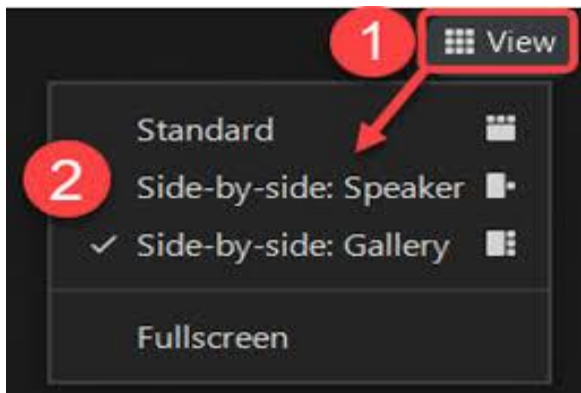
- Please make sure you are using a computer or smart phone connected to the internet, and the audio function is on, and the volume is turned up.
- Please make sure your microphones are muted for the duration of the call unless you are speaking or asking questions.
- Questions can be submitted any time during the presentation using the “Q&A” box located on your control panel, and we will answer as many questions as time allows after the presentation.



Housekeeping (2/2)



- American Sign Language (ASL) Interpreters and Closed-Captioning
 - ASL Interpreters and Closed-Captioning options will be available for today's event.
 - For closed-captioning options select the "Closed Caption" feature located on your control panel.



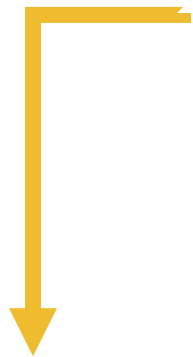
- Adjusting Video Layout and Screen View
 - Select the "View" feature located in the top-right hand corner of your screen.

- **DMH/DD/SUS' Justice Vision for Adults and Investment Guiding Principles**
- **Justice RFA Goals**
- **RFA Funding Priorities**
- **Justice RFA Application Process**
- **Question and Answer Session**

DMH/DD/SUS' Justice Vision for Adults and Investment Guiding Principles




DHHS is Making Historic Investments in Behavioral Health (BH) and Justice Systems

PROVISION	FY24	FY25	Total
Medicaid Reimbursement Rates <i>Effective 1/1/24, benchmarking to 100% of Medicare rates</i>	\$165M	\$220M	\$385M
Crisis System	\$54M	\$77M	\$131M
★ Justice System	\$29M	\$70M	\$99M
BH Workforce	\$44M	\$71M	\$115M
Child and Family Well-Being	\$20M	\$60M	\$80M



The \$99M justice system investment from the biennial budget must be allocated toward 1) community-based pre-arrest diversion and reentry programs; 2) local partnerships between law enforcement, counties, and BH providers; and 3) community-based and detention center-based capacity restoration programs.

DMH/DD/SUS aims to:

-  Prevent justice involvement by strengthening pathways to community-based treatment.
-  Effectively support youth and adults with BH, intellectual/developmental disorders (I/DD) and/or traumatic brain injury (TBI) needs through justice system involvement by providing evidence-based treatment and services.
-  Ensure seamless reentry and stabilization in the community.

DMH/DD/SUS is committed to improving the continuum of services and supports for youth and adults who are at risk of or experiencing justice involvement.

Investments In Progress

DMH/DD/SUS is advancing investments* in the following areas:



Juvenile Justice Prevention and Reentry Support



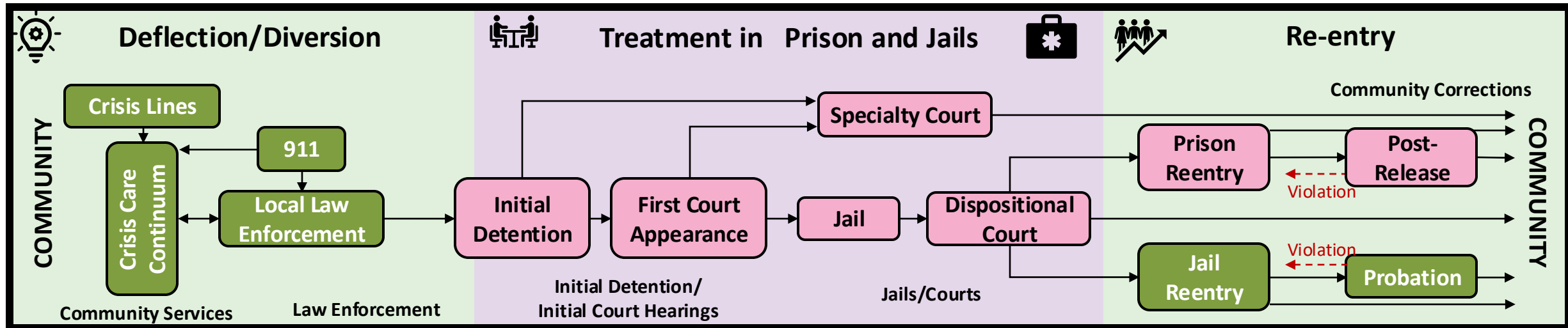
Adult Reentry Support, Training, and Technical Assistance

- **Recruits, trains, and assigns “Credible Messengers”**, community-rooted leaders with justice lived experience, to support youth in NC juvenile justice facilities.
- **Statewide awareness and education initiative** to promote safe storage of firearms.
- **Additional staffing and basic needs supports** for individuals served by the **Department of Corrections (DAC) Priority Re-entry Program**.
- **Expands the University of North Carolina (UNC) Formerly Incarcerated Transitions (FIT) program** to serve new counties.
- Stands up **new Forensic Assertive Community Treatment (FACT) teams**.
- **Expands the Mecklenburg Capacity Restoration Pilot** model to additional counties.
- Expands the capacity of **transitional housing vendors** to serve individuals with serious mental illness (SMI) and substance use disorder (SUD) by funding the cost of additional beds, staffing, and treatment services.
- **Funds a partnership with the NC Technical Assistance Center (NC-TAC) and Wilson Center (Duke)** to support communities in sharing best practices related to improving local responses to justice involved individuals.
- **Training for DAC staff** and, potentially, other justice system partners (e.g., probation and parole officers, local re-entry councils, and judges) on TBI.
- **Re-entry care planning and transition supports for individuals with I/DD and TBI** at select state prisons.

*Dollar amount of investments to be determined. This slide does not reflect all of DMH/DD/SUS' planned investments and evaluation costs.

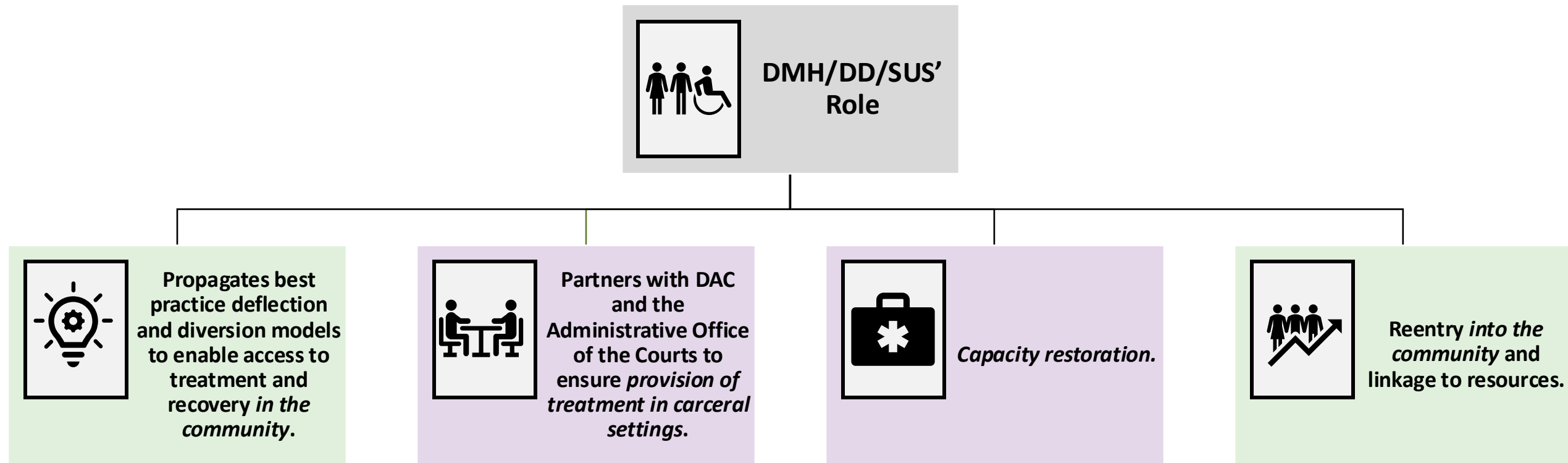
Adult Justice Continuum

As adults move through the justice system, DMH/DD/SUS has identified gaps in services and supports that divert individuals away from justice involvement and facilitate re-entry into the community.



Adapted from the Sequential Intercept Model

DMH/DD/SUS' Role to Strengthen the Justice Foundation for Adults







Foundational Elements

- Access to housing, employment, health benefits and other community services.
- Outreach, education, and awareness among community and justice providers.
- Leadership, expertise, and support to enable local communities identify their needs and implement best practices.

Justice RFA Goals

DMH/DD/SUS Plans to Release a Justice RFA in October 2024

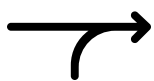
The RFA is a funding opportunity, aligned with the DMH/DD/SUS Strategic Plan, to expand services to serve justice-involved adults with behavioral health, I/DD, and/or TBI needs. The goals of the Justice RFA are to:

-  Strengthen pathways to **community-based programs that divert adults** with behavioral health [inclusive of mental health (MH) and SUD], I/DD and/or TBI needs away from incarceration.
-  Expand access, as part of diversion or upon reentry, to **community-based housing and employment supports** to promote community integration and stabilization.
-  Expand the use of **best practices**.
-  Build capacity to ensure the **long-term sustainability** of justice programming.

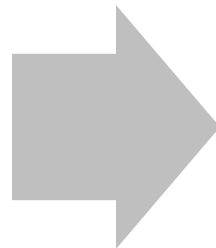
The goals of this RFA also align with several key objectives of the North Carolina Reentry 2030 Strategic Plan to: 1) improve the economic mobility of formerly incarcerated adults by increasing employment opportunities post-release; 2) improve individuals' mental and physical health by promoting access to BH, I/DD and/or TBI services; and 3) expanding housing opportunities for formerly incarcerated adults.

The Justice RFA Seeks to Address Data Driven Gaps

The RFA aims to address data and stakeholder feedback that law-enforcement assisted diversion services are not available statewide; and communities lack housing and employment resources dedicated to justice-involved adults with BH, I/DD, and/or TBI needs.



Diversion programs are not widely available statewide: there are gaps in Department of Health and Human Services-funded diversion programming in counties with high arrest or substance use overdose rates (see Appendix).

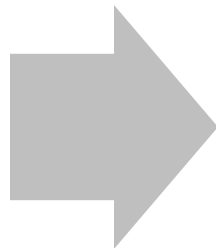


The RFA will fund new or expand existing Law-Enforcement Assisted Diversion (LEAD) programs that employ trauma-informed, harm reduction-based approaches.



Formerly incarcerated individuals are 10 times more likely to experience homelessness than the general population, and individuals are at a higher risk of rearrest upon reentry if they are experiencing homelessness.

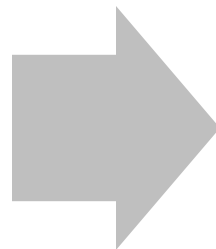
Affordable, secure housing tailored to the needs of justice-involved adults with co-occurring or complex conditions **is limited statewide.**



The RFA will fund new or expand existing housing models across the state to serve justice-involved individuals according to their needs. Housing models eligible for funding will include transitional, bridge, enhanced bridge and permanent supportive housing.



Formerly incarcerated individuals in NC experience poor employment outcomes: fewer than 50% of people gain employment following release. Further, employment programs are **often not tailored to the needs of justice-involved individuals.**

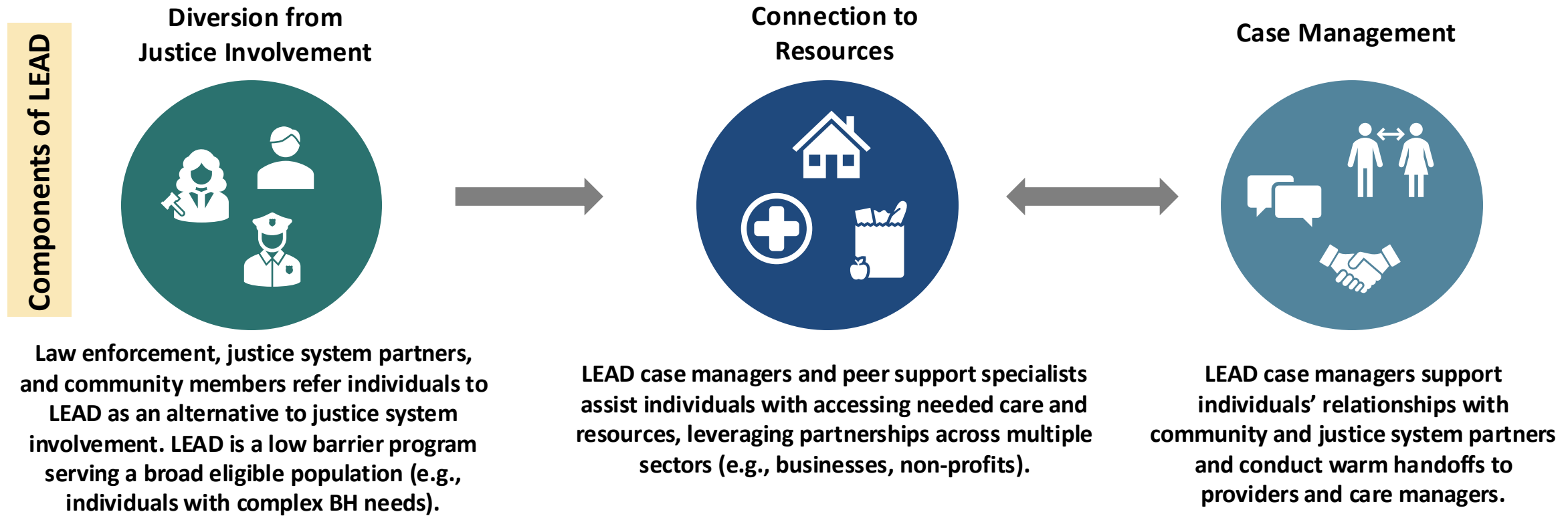


The RFA will fund new or expand existing supported employment programs tailored to help justice-involved individuals with BH, I/DD and TBI needs who seek to work or obtain vocational education.



RFA Funding Priorities



Investments in LEAD Programs

Applicants may use RFA funds to launch or expand LEAD programs, which facilitate diversion from standard jail booking and criminal prosecution for individuals suspected of low-level offenses and provide a bridge to community-based treatment and supports. LEAD programs also offer post-overdose initiation using a harm reduction lens.



Allowable Uses of RFA Funds

-  **Workforce/direct service provision** (e.g., staff recruitment and orientation/funding gaps in services)
-  **Operational costs** (e.g., rent/utilities for office space, technology)

-  **Training/certification** (e.g., harm reduction, trauma-informed)
-  **Basic needs funding for participants** (e.g., cell phone, clothing)

LEAD Data Collection

Applicants using RFA funds for LEAD programs will be asked to share required data elements with DMH/DD/SUS and its contracted evaluator.* Data elements may include:



- **Demographics of all persons offered a referral to program services**, documenting their referral source (e.g., officer, social contact, or community), whether they accept the referral, and whether the individual enrolls in the program.
- Demographics of people **charged with eligible charges but were never offered diversion**.
- Number and types of **clinical and health-related social needs** services participants are referred to.
- **Justice outcomes measures** (e.g., arrests, periods of incarceration exceeding 30 days, recidivism rates).




*More information on the timing for data submission and required data elements for LEAD and other program components is forthcoming.

Investments in Housing and Related Supports

Applicants may use RFA funds to launch or expand one or more of the four following housing models, along with related participant support costs, to improve access to housing for justice-involved adults with BH, I/DD and/or TBI needs.



Allowable Uses of RFA Funds

-  **Start-up/expansion costs** (e.g., renovations, new construction, workforce development).
-  **Ongoing staffing and service provision costs** (e.g., embedded program coordinators, peer support specialists).
-  **Participant support costs** (e.g., ongoing rent/utilities, one-time needs like a cellphone, security deposit, basic household items).

Investments in Supported Employment

Applicants may use RFA funds for the purpose of expanding access to supported employment programs statewide that offer services for justice-involved individuals tailored to their BH, I/DD, and/or TBI needs, including partnering with employers.

Supported Employment



Supported employment programs assist individuals with BH, I/DD and TBI needs in obtaining and maintaining meaningful employment.

Relationships with Providers and Partners



As part of receiving RFA funds, selected entities must demonstrate how relationships with employment service providers (e.g., workforce development boards and career centers), peers, and business partners are central to their supported employment initiatives.



Allowable Uses of RFA Funds



Capacity building to create new or expand existing supported employment programs (e.g., brick and mortar costs, salary supports, recruitment of new employers who will hire participating justice-involved individuals, recruitment and retention of peer supports, other administrative costs).



Training, education, and technical assistance.



Costs associated with building a network of fair chance employers (e.g., employer outreach, developing pitch materials).



Incentivizing engagement in employment programming among participating individuals (e.g., stipends).



Flexible funds (e.g., clothing, cellphone, laptop, GED classes/standardized testing, costs to obtain identification/driver's license, expungement costs, transportation, obtaining a Certificate of Relief).

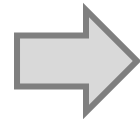
Justice RFA Application Process

Justice RFA Application, Selection, and Funding Distribution Process

1. RFA Is Released

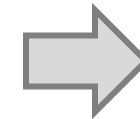
DMH/DD/SUS will release the Justice RFA in October 2024.

Applicants will have approximately one month to prepare and submit their applications to DMH/DD/SUS.



2. Entities Are Selected

Through a competitive process, in December 2024, DMH/DD/SUS will select applicants to receive funding based on the content, quality, and completeness of the responses to the items in the RFA and how well each response addresses the factors in the application requirements (see next slides).



3. Awards Are Distributed

DMH/DD/SUS will strategically distribute funds with consideration for geographic and population-based needs.

Overview of Key RFA Application and Programmatic Requirements



Applicant Eligibility Criteria

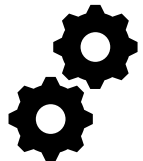
Applicants must:

- Be a **non-profit entity, for-profit entity, or local government entity (e.g., county government, local area agency)** located in North Carolina.
- Demonstrate capabilities to serve justice-involved adults with BH, I/DD, TBI, and **co-occurring needs no matter their county of residence, insurance status, or health plan.**
- Have existing, **working relationships** with key stakeholders (i.e., law enforcement, county governments, court systems) or a **plan to develop these relationships.**



Requirements for Applications

- **Describe their project in detail**, including their qualifications to serve justice-involved adults with BH, I/DD and/or TBI needs, their implementation plan, how they will collaborate with their communities, potential impact of their approach, budget and sustainability plan, and include an analysis of project risks and limitations, including how these will be addressed or minimized.



General Programmatic Requirements

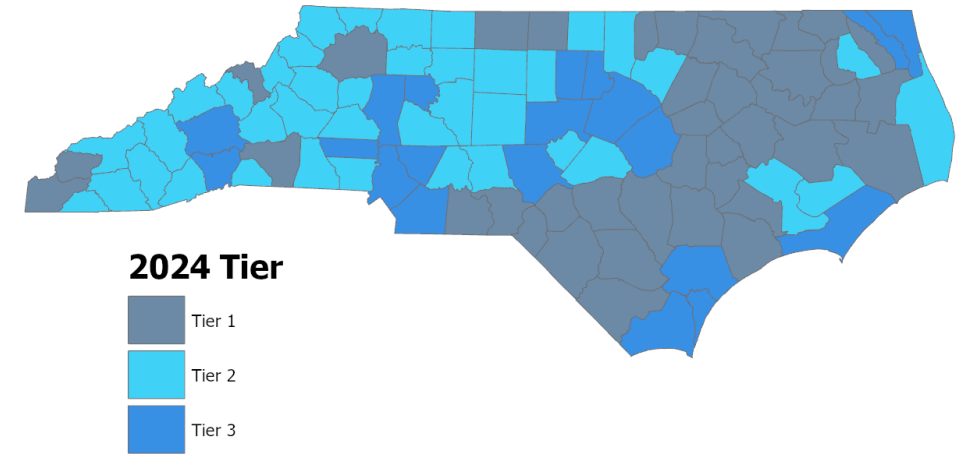
- Make best efforts to **coordinate closely with all types of health plans** that may be covering an individual receiving program services or supports.
- Participate in **technical assistance and learning collaboratives** as specified by DMH/DD/SUS.
- Coordinate with DMH/DD/SUS as part of the Division's **marketing and community awareness/outreach efforts**, as needed.
- **RFA funds may not replace Medicaid, other state, county or federal grant funding sources. For programs with existing funding streams, applicants must show how RFA funds will expand its current offerings and address gaps in services.**

RFA Scoring Criteria

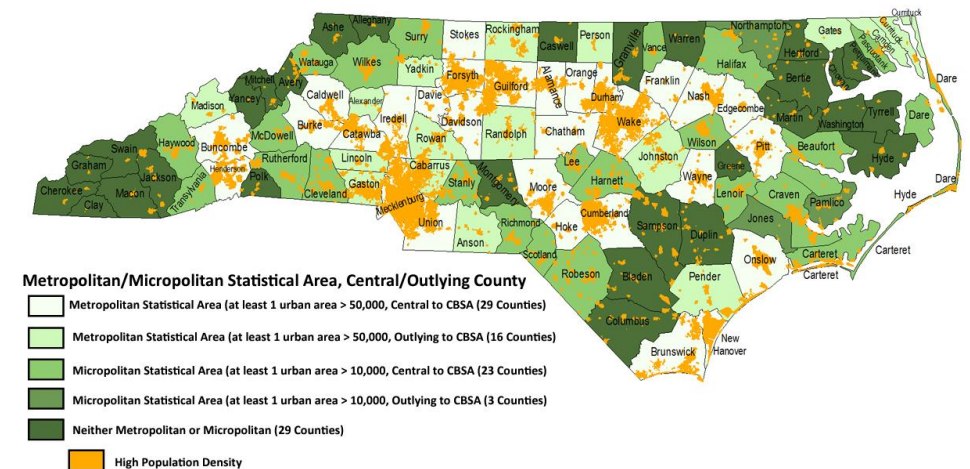
Applications will be scored on the content, quality, and completeness of the responses to the items in the RFA and how well each response addresses the factors in the application requirements.

Applications will be prioritized if:

- They plan to serve counties that:
 - Have a Tier 1 designation
 - Have high arrest rates relative to other counties;
 - Have high overdoes rates relative to other counties;
 - Are rural; and/or
 - Have a disproportionate share (i.e., 1.5x or 2x) of the state's Black/African American, Latinx, or American Indian/Native American population.
- 51% of the entity is owned by one or more persons who are members of at least one of the following groups: Black, Hispanic, Asian American, American Indian, Female, Disabled, or Disadvantaged.



County Designations of Core Based Statistical Areas



Note: a central county is part of a Core Based Statistical Area (CBSA) containing a substantial portion of an urbanized area or urban cluster or both, and to and from which commuting is measured to determine qualification of outlying counties. An outlying county that qualifies for inclusion in a CBSA on the basis of commuting ties with the CBSA's central county or counties.

Note: See the Appendix for additional data maps.


Question and Answer Session

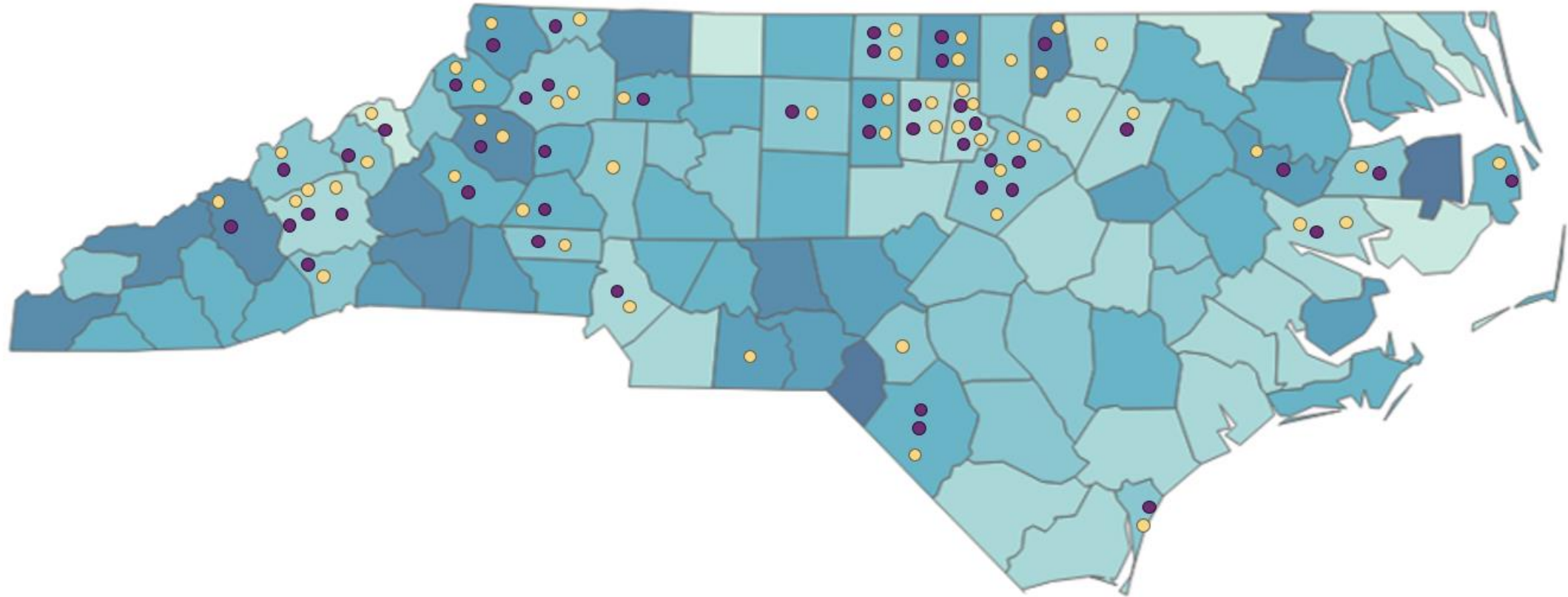
Appendix

Adult Arrest Rate and DHHS Justice Providers by County

There are gaps in availability of DHHS-funded diversion and reentry programs in counties with high arrest rates.

- DHHS-Funded Deflection/Diversion Program
- DHHS-Funded Reentry Program


2022 Adult Arrest Rate Per 100,000 Adults
0  6,890

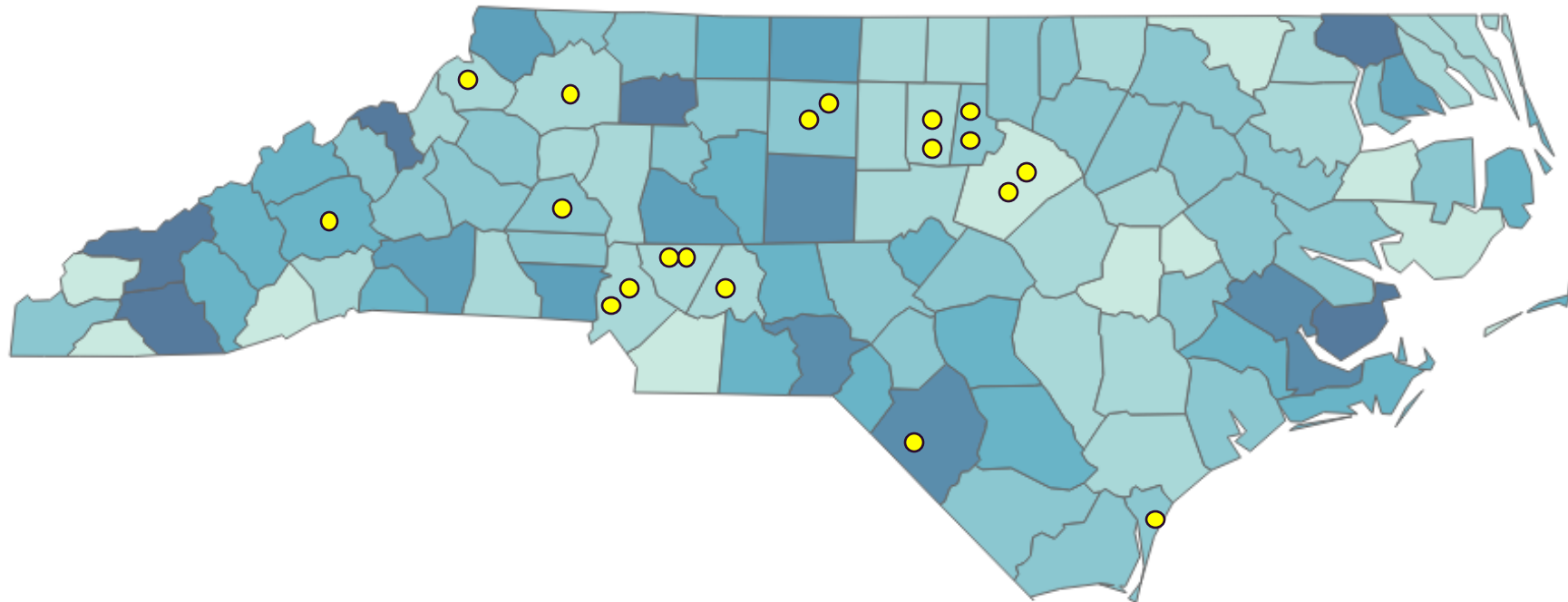


Overdose Deaths Per 100,000 and DHHS Justice Providers

There are gaps in DHHS substance use-focused programming in counties with high overdose rates.

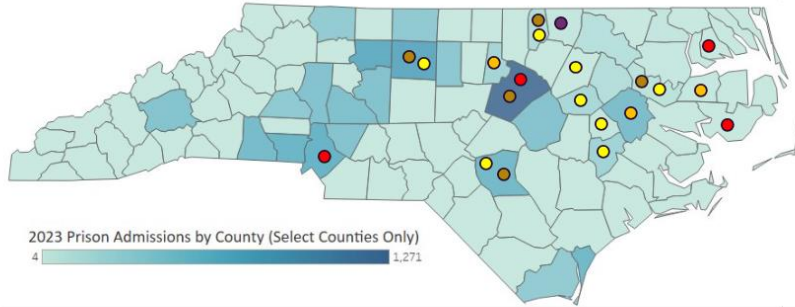
● DHHS-Funded Substance Use-Focused Program (McKinsey Funds)

Overdose Rate Per 100,000 Residents
10.30  102.20



Additional Adult Data Maps

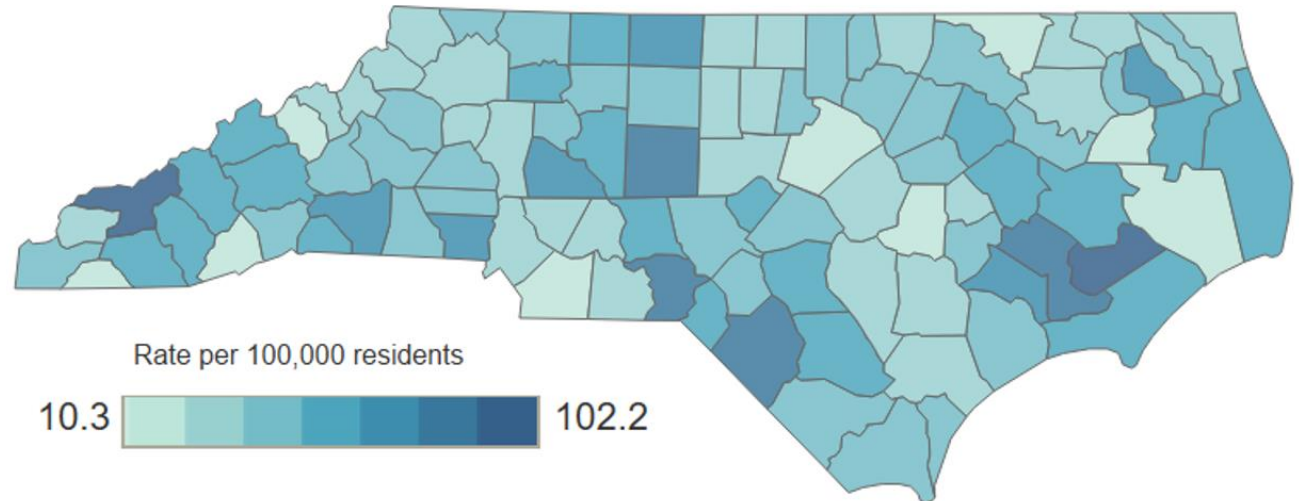
Prison Admissions by Race (2023)



Prison Admissions Percentage Compared to Share of NC Population		
Am. In./Nat. Am.	Black/Af-Am	Latinx
1.5x	1.5x	1.5x
2x	2x	2x
2.5x	2.5x	2.5x

Rank for Total Admissions	County of Conviction	# of Prison Admissions 2023	Prison Admission % by Race/Ethnicity			
			Am. In./Nat. Am./Indg./Als k. Nat.	Black/Af-Am.	Latinx	White
91	WASHINGTON	22	0.00	100.00	0.00	0.00
99	HYDE	4	0.00	100.00	0.00	0.00
50	EDGEcombe	131	0.00	80.15	2.29	16.79
4	MECKLENBURG	629	0.16	78.54	7.31	11.76
31	DURHAM	235	0.00	77.45	7.23	11.49
48	VANCE	145	0.69	77.24	2.07	19.31
81	HERTFORD	42	0.00	76.19	0.00	19.05
9	PITT	508	0.39	74.80	2.36	21.65
93	NORTHAMPTON	18	0.00	72.22	0.00	27.78
36	WILSON	200	0.00	71.00	4.50	23.00
29	LENOIR	264	0.00	70.45	1.89	26.14
34	NASH	209	0.96	69.86	4.31	23.44
89	BERTIE	26	0.00	69.23	0.00	30.77
54	HALIFAX	114	2.63	67.54	0.00	29.82
1	WAKE	1,271	0.63	66.80	7.79	22.74
95	PERQUIMANS	14	0.00	64.29	0.00	35.71
7	CUMBERLAND	554	5.78	63.18	2.71	25.63
79	GREENE	46	0.00	63.04	4.35	28.26
66	MARTIN	81	1.23	61.73	1.23	34.57
2	GUILFORD	731	1.64	61.70	2.87	30.92
87	WARREN	32	6.25	59.38	6.25	28.13

Overdose Rates by County Per 100,000 (2022)



- After participation in LEAD, **individuals had significant increases in obtaining housing, employment, and income sources/benefits.**
 - Achieving these benefits was also associated with fewer arrests.
- Compared to a control group, participants in LEAD had **60% lower odds of arrest both 6 and 2 years after starting LEAD, as well as 39% decreased odds of felony charges.**
- Decreased justice system involvement (e.g., court appearances, bookings) among LEAD participants was associated with **significant reductions in legal costs to the system than a control group.**
- An evaluation of LEAD programs in NC found that **program participation was associated with reduced arrests and citations, reduced costs of crisis-related service utilization, and increased utilization of Medication-Assisted Treatment (MAT).**
 - Note: Findings were limited to individuals who had high engagement in the program, rather than all participants in the study.

Sources:

1. Clifasefi, S., et al. [Seattle's Law Enforcement Assisted Diversion \(LEAD\) Program: Within-Subjects Changes on Housing, Employment, and Income/Benefits Outcomes and Associations with Recidivism](#). Crime and Delinquency, 1-17. 2017.
2. Collins, SE., et al. [Seattle's Law Enforcement Assisted Diversion \(LEAD\): Program effects on recidivism outcomes](#). Evaluation and Program Planning. 2017.
3. Collins, SE., et al. [Seattle's law enforcement assisted diversion \(LEAD\): program effects on criminal justice and legal system utilization and costs](#). Journal of Experimental Criminology, 15:201-211. 2019.
4. Gilbert, AR., et al. [Law Enforcement Assisted Diversion \(LEAD\): A multi-site evaluation of North Carolina LEAD programs](#). Duke University School of Medicine, 2022.