

USING BOUNDARY SPANNERS FOR CROSS-SYSTEM COLLABORATION

Policy Brief | March 2020



The Michigan Mental Health Diversion Council (MMHDC) and the Wayne State University Center for Behavioral Health and Justice (CBHJ) recommend to the State of Michigan the use of ‘boundary spanners’ who can work across criminal/legal and treatment systems to facilitate both diversion from jail and optimal community re-entry.

BACKGROUND:

For individuals with serious mental illness, the hours and days directly following release from jail present a critical juncture for intervention. After receiving stabilizing care in jail, quick and immediate connection to services in the community significantly improve treatment outcomes for individuals with mental health concerns.

Boundary spanners—professionals who facilitate system-wide coordination between the criminal/legal system and the treatment sector—play a crucial role in connecting individuals with serious mental illness to services. Boundary spanners foster communication between community mental health agencies and county jails. These connections can be immediate, through strategies such as **warm hand-offs**—when an individual is transported directly to a community-based service agency.

Community mental health agencies provide services to individuals with serious mental illness (SMI) through federal Medicaid funding. However, the Social Security Act prohibits the use of federal dollars for medical care provided to “inmates of a public institution”, and applies to services administered in county jails, including those who have not been sentenced. This **Medicaid inmate exclusion policy** leaves counties with the bill for medical care, including critical mental health care.

RECOMMENDATIONS:

Boundary spanners play a critical role in system-wide collaboration by facilitating diversion from jail directly into services and empowering clients’ smooth transitions between jail, court, and treatment systems. The MMHDC and the CBHJ recommend the State of Michigan support the use of boundary spanners across the state, including the communities that have started the work of cross-system communication and connection.

Communities across the state and country are developing systems and models for notification between CMHs and Jails. For example, Kalamazoo County CMH operates the Interceptor notification system, an automated process which matches Kalamazoo County Jail booking and release reports and upcoming court dockets with CMH databases. After verification, jail clinicians and case managers are notified. Over 70% of individuals released from Kalamazoo County jail receiving a mental health service experience continuity of care.

Expanding Medicaid funding to individuals incarcerated in Michigan’s jails would greatly alleviate the burden of funding mental health care for Michigan’s counties and the provide further support to state resources. The MMHDC and the CBHJ endorse current proposed strategies that might allow Medicaid funding for the 30-day period prior to release, and support the exploration of legislative or other funding solutions for coverage in jails within this 30-day window and beyond to meet the needs of individuals served. In the absence of federal healthcare coverage, it is crucial the State identify funding sources for individuals with serious mental illness in Michigan’s jails to be directly connected to stabilizing mental health care and medication and leverage partnerships to utilize strategies for funding these services across local, county, state, and federal resources.

QUICK FACTS:

- In 2019, **23%** of individuals booked into a sample of ten MI county jails **were identified as having a mental health concern** during booking screening.
- In ten county jails, **only 10%** of individuals identified by the jail as having mental health concerns **received a diversion service.**
- Only **11%** of a subsample of those receiving behavioral health treatment in ten county jails **received a mental health service in the community within 14 days** of their release.
- In one Michigan county, individuals who received continuity of mental health care **stayed out of jail 3.3 times longer** than those who did not.
- **Nearly half (49%)** of individuals identified as having a mental health concern **did not receive mental health or substance abuse services in the 14 months** following their release.
- Currently, there is **no definition for ‘diversion’** that is generally accepted across the state.



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