

Allegheny County has a multitude of services designed to help people with human service and behavioral health needs, including mental health crisis responders, substance use assessment and treatment centers, homeless outreach and housing supports, financial assistance programs, case management for individuals with justice system involvement, and more.

But these individual programs don't add up to a **comprehensive crisis system**—a linked set of programs and services that prevent crises (like acute mental health distress or homelessness), respond with the right intervention, share protocols and performance measures, and consistently link people to follow up support that attempts to address the causes of the crisis. Instead, people continue to struggle and law enforcement remains the default responder for individuals and families struggling with unmet behavioral health needs.

Following a six-month study and planning process, a diverse group of stakeholders issued [16 recommendations](#) for improving the County's crisis prevention and response system.

Allegheny County reviewed these recommendations and is committed to moving the County from our current state to a comprehensive, effective crisis prevention and response system.

Vision

As a result of these recommendations, we are envisioning an [improved crisis system](#) that leverages the new national mental health crisis line, called 988, that launches in July 2022, while also equipping 911 and law enforcement to send the appropriate responder(s) to behavioral health calls. The improved crisis system will strive to have “no wrong door,” so that it will be more likely for a person to get connected to the care they need, regardless of where they call or show up for help. It will also improve access to care by bolstering existing 24/7/365 human services and adding new services that are available during both traditional and non-traditional hours, in new areas around the county. We seek to ensure that no matter what people need help with, no matter when people need help, they can get the right level of care. This work is intended to reduce the use of and interaction with law enforcement, jail, emergency departments and inpatient hospitalization for people with behavioral health and other human service needs, while improving health and human service outcomes.

Strategies

Building a comprehensive crisis system will take time. Following are the strategies the County has been working on to realize this vision since the Crisis Response Stakeholder Group (CRSG) delivered its recommendations.

1. Improving response from central crisis call numbers

The County's vision is that residents will have a single, easy-to-remember phone number to call when they are experiencing a crisis, will be able to get the most appropriate responder(s), and that these responders will operate within a system that prioritizes connection to sustainable follow-up care, utilizing both data and client feedback to understand how effectively the system is operating. This will make it easier for the residents of Allegheny County to access the kind of help they need, when they need it.

Preparing for 988:

The county is preparing for the implementation of the national mental health crisis line, 988, in mid-2022. We are doing this by improving our crisis system's capacity and processes so that it can respond to increased demand when this central, easy-to-remember number is introduced and marketed. 988 will be the number people can call when experiencing mental health distress or when trying to help a friend or family member who is. Local staff at 988 will be able to provide telephone and in-person assistance and will triage calls to determine the most appropriate crisis intervention, including the ability to dispatch the right type of team directly to where help is needed, provide care coordination, assist in diverting from arrest and incarceration, and help people gain access to resources and treatment. In Allegheny County, we envision 988 will be connected to a Care Traffic Control system that spans the entire crisis continuum, and can provide an overarching view of the system, including outpatient scheduling, bed inventory tracking and performance metrics in real time.

Next step: Additional discussion with local partners and the Pennsylvania Department of Human Services to determine how the County can most effectively leverage 988 to improve our crisis prevention and response system. We expect to be able to share additional information about plans for 988 in early 2022.

Building alternative responder capacity with 911 and local municipalities:

DHS and Allegheny County Emergency Services (ACES) are working to identify how alternative responders can be sent to calls that may benefit from a behavioral health response. This has involved examining both data and operations. While most crisis calls will go to 988, our 911 system will always be a trusted resource that people may call when in crisis. Rather than send those calls to police or ambulance to manage alone, however, our vision is to use the 911 structure to send out "response teams" that have special training and skills to handle behavioral health and other human service crises. Some of these teams may accompany first responders while others will be able to be deployed directly to the person in crisis.

Next step: Having mapped a preliminary approach, we are seeking to build out this alternative responder model during the first quarter of 2022 with up to three municipalities (and/or their broader radio channels).

Responsive to CRSG Recommendations 5, 6, 7, 10

2. Expanding mobile options and functions

Mobile teams are crucial parts of the vision – to be deployed by 988, 911 and other parts of the system. We have worked on determining how to expand mobile teams to better address demand, as well as to how improve the way mobile teams engage with people experiencing crisis, so that teams can respond meaningfully to a broader range of community needs. We seek to diversify the scope and nature of mobile response and ensure timely response throughout the county.

Increasing capacity and diversifying the scope of service delivered by mobile teams:

The County is supporting resolve Crisis Services to adapt and grow their mobile response to better meet the needs of community members and law enforcement in a timely fashion. This may include community-based staging of resolve mobile response teams so that they can respond more quickly, prioritizing certain types of calls for quicker response, pairing mental health clinicians with peers, and building out secondary response and follow up supports through additional partnerships.

We are also identifying opportunities to diversify the type of mobile response that can be dispatched through 988, including coordinating with and learning from the City of Pittsburgh's partnership with AHN outreach teams. Existing mobile teams at resolve Crisis Services offer brief de-escalation, clinical assessment, crisis counseling, and referral information. They were designed to deliver crisis response. In recognition that preventing future crisis often requires sustained engagement to enhance trust, support system navigation and coordinate of services, it is anticipated that new mobile teams may: respond to calls where acute crisis is not the presenting problem, offer follow up mobile response, incorporate peer support, warm hand-offs to additional community resources, and, in some cases, provide brief case management.

Next steps: We expect to issue one or more solicitations aimed at diversifying the range of mobile responders as well as the scope of service delivered by those teams, in December 2021. These solicitations will be explicit in seeking to attract organizations led by, operated by and serving people experiencing the worst outcomes from our crisis systems, especially black and LGBTQ community members. In addition, the solicitations will budget to ensure a baseline requirement that all frontline staff will earn no less than fifteen dollars per hour.

Responsive to CRSG Recommendations 1, 2, 9, 10, 11, 13, 14, 16

Alternative Transportation Options:

The County has explored options to support alternatives to police transport for involuntary commitments and other crisis responses. This has involved learning from other jurisdictions and examining where our statutory framework may allow for new solutions. When a petition for a 302 has been authorized, police are regularly relied upon to transport the individual to a hospital for evaluation. But police transport involves placing an individual who is experiencing a behavioral health crisis into handcuffs, which can escalate the crisis and add to what is already a traumatic experience for the person and their loved ones. Law enforcement officers and community members are largely aligned in desiring a safe alternative.

Next steps: Though additional review is necessary, we anticipate issuing a solicitation to pilot a third-party transportation service that allows for safe, trauma-informed transport of individuals experiencing

a mental health crisis in cars designed for this purpose, whenever possible. This will require establishing criteria and a process for accessing this service.

3. Stabilizing people and connecting them to health and human services

Peer-operated respite and other crisis prevention centers:

The County plans to support the design and implementation of up to two short-term, residential support programs for individuals experiencing stressors or an increase in symptoms related to their mental health and/or substance use. It is envisioned that the respite centers will be low-barrier, peer-led and operated, and non-clinical in nature. They may offer intake, assessment, one-on-one and group peer support, connection to community resources, development of mental health advance directives, as well as mindfulness, physical recreation and creative outlets.

These and other brick and mortar crisis/diversion resources are intended to help people avoid emergency department visits, inpatient hospitalization, and incarceration whenever possible, connecting them instead to natural supports, treatment, or other services as desired. The County expects to seek additional partners to provide services in several community-based hubs, and is also supporting existing providers to adapt their services and protocols to better prevent and address crisis. We intend to prioritize broader access to support outside the traditional 9-5 schedule.

Next step: We expect to issue a solicitation in December 2021. This solicitation will be explicit in seeking peer-led and operated organizations, and organizations led by, operated by and serving people experiencing the worst outcomes from our crisis systems, especially black and LGBTQ community members. In addition, the solicitations will budget to ensure a baseline requirement that all frontline staff will earn no less than fifteen dollars per hour.

Responsive to CRSG Recommendations 1, 8, 14, 16

Informal Mental Health Supports:

The County intends to fund community-led organizations to establish or grow a range of informal mental health supports. These services will be designed to reach community members who may mistrust or feel alienated by traditional service providers, providing person-centered engagement, education and needed bridges to care.

Next step: We expect to issue a solicitation in December 2021. This solicitation will be explicit in seeking to attract organizations led by, operated by and serving people experiencing the worst outcomes from our crisis systems, especially black and LGBTQ community members. In addition, the solicitation will budget to ensure a baseline requirement that all frontline staff will earn no less than fifteen dollars per hour.

Responsive to CRSG Recommendation 11, 13, 14, 16

START:

The County is developing an initiative intended to provide targeted resources, services, and linkages to individuals with intellectual and developmental disabilities and/or autism spectrum disorder and co-occurring behavioral health concerns and their caregivers to be part of the crisis continuum. With support from the University of New Hampshire's Center for START Services, this effort will enhance participants' ability to prevent, manage, and move forward from crisis situations.

Next step: We expect to issue a solicitation in the first quarter of 2022. This solicitation will be explicit in seeking to attract organizations led by, operated by and serving people experiencing the worst outcomes from our crisis systems, especially black and LGBTQ community members. In addition, the solicitation will budget to ensure a baseline requirement that all frontline staff will earn no less than fifteen dollars per hour.

Supporting Law Enforcement Assisted Diversion (LEAD) Pilots:

The County is working with police, CONNECT, municipal governments, and the community to prevent the arrest of people with low-level offenses. LEAD staff will provide community-based, long-term, trauma-informed case management to individuals who *frequently encounter the criminal-legal system* because of their unmet behavioral health and human service needs.

Next step: We expect to issue a solicitation for LEAD case management services, to be delivered initially in at least 13 municipalities outside of Pittsburgh, by December 2021. (The County will continue to coordinate actively with the City of Pittsburgh as they simultaneously work to implement LEAD). This solicitation will be explicit in seeking to attract organizations led by, operated by and serving people experiencing the worst outcomes from our crisis systems, especially black and LGBTQ community members. In addition, the solicitation will budget to ensure a baseline requirement that all frontline staff will earn no less than fifteen dollars per hour.

Responsive to CRSG Recommendation 1, 3, 14, 16

Improving discharge planning from the jail and hospitals:

While we continue to explore strategies to improve outcomes for more people upon discharge from the jail and hospitals, the County has invested in the Center for Inclusion Health's holistic post-incarceration clinic, supporting its efforts to address physical and social determinants of health for individuals leaving the jail who have chronic health conditions, including substance use disorders. The County is also working to expand housing opportunities for people upon discharge from jail and hospitals. This work includes a systems improvement project that we think will improve flow within the mental health housing continuum as well as efforts to create more reentry housing resources.

Next step: We expect to issue a solicitation in November 2021 to procure additional reentry housing for individuals leaving the jail. This solicitation will be explicit in seeking to attract organizations led by, operated by and serving people experiencing the worst outcomes from our crisis systems, especially black and LGBTQ community members. In addition, the solicitation will budget to ensure a baseline requirement that all frontline staff will earn no less than fifteen dollars per hour.

Responsive to CRSG Recommendation 4, 12, 14, 16

Robust 211 and LINK:

The County has invested in enhancing United Way's PASouthwest 211 and the Allegheny LINK so that people can find the health and human services they need. These are the main doors to human services in the county—providing hotlines, social workers who visit shelters and other sites to help with housing, and chat, web, and texting services that rely on their professional staff and databases. Taken together, they serve over 250,000 people each year.

The County's investments will soon expand the number of information and referral staff on the hotlines, improve training, improve the triage system of the LINK (which focuses on housing), and increase the IT/data capacity of these systems. By improving these existing entry points now, we will be positioned to envision more robust integration with 988 in the future.

Responsive to CRSG Recommendation 5

Digital Catalog of Health and Human Services:

A common and persistent complaint is that there's no "where to turn for help" book or website that stays current. The County is working with several partners on solving this issue by building and maintaining a central database that any organization can use to pull information into their websites and that anyone can search. The work already completed includes securing data-sharing agreements so organizations can share information about services (type of service, location, operating hours); creating the structure of this digital catalog; developing the means to keep the information current (through community and agency "ambassadors"); and integrating the information into one data set.

Next steps: Having merged the data to create the digital catalog, we will verify its initial accuracy, and "publish" a version of this catalog. When completed this will provide the crisis system and the public with accurate information about hundreds of services, by location. When 988 is ready, the County can add other features to the digital catalog. Additional next steps include scaling the collection and dissemination of client experience with these services so that people can make more informed choices about what services will work for them.

Responsive to CRSG Recommendation 7

4. Preventing issues from escalating into crises that can lead to arrest or hospitalization

Training and support for frontline staff:

The County is developing a crisis response training program which will provide mental health first aid and verbal de-escalation training to all jail staff, beginning in November 2021, with plans to build a more comprehensive, 40-hour crisis intervention training (CIT) for corrections officers over the next year. CIT planning for corrections officers can leverage parallel planning efforts within the City of Pittsburgh to revamp and enhance CIT for police.

Next step: In recognition that more training and support for various frontline staff is critical, and that it must be offered on an ongoing basis and consistently reviewed, the County expects to issue a solicitation to identify an entity who can manage this effort. The solicitation will be explicit in seeking to attract organizations led by, operated by and serving people experiencing the worst outcomes from our crisis systems, especially black and LGBTQ community members. In addition, the solicitation will budget to ensure a baseline requirement that all frontline staff will earn no less than fifteen dollars per hour.

Responsive to CRSG Recommendation 3

Convening critical partners for ongoing coordination:

The County is meeting regularly with a number of its existing crisis system providers, government and law enforcement representatives, and foundations and community-led organizations invested in crisis response and committed to system improvement. This includes regular coordination with the City of Pittsburgh's Office of Community Health and Safety as they develop and implement complementary crisis prevention and response strategies within the city limits.

Next steps: The County intends to convene coordinating groups and communities of practice to support the implementation of these strategies; improve communication, outcome tracking, and problem-solving; and to create shared protocols for the improved crisis system. In addition to critical government partners and individuals with lived experience, new and existing providers that make up the crisis continuum will be asked to participate. While some entities are meeting regularly already, we expect to formally convene these groups beginning in the second quarter of 2022.

Responsive to CRSG Recommendation 6, 14



**Allegheny County
Department of
Human Services**

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