

## **Community Service Boards- Co-Responder Model for Crisis Intervention**

### What are Community Service Boards?

- Community Service Boards (CSBs) are public agencies created to provide treatment and care for individuals
  with mental illness, substance use disorders, (jointly referred to as behavioral health) and
  intellectual/developmental disabilities.
- CSBs serve Georgians who may not have access to private providers due to lack of income or insurance. The underinsured and Medicare/Medicaid recipients are also served by CSBs.
- CSBs were created by the Georgia General Assembly in 1994 and codified in state law (O.C.G.A 37-2-6) as
  the state's behavioral health safety-net, ensuring all Georgians have access to mental health, substance use,
  and intellectual/developmental disability services and supports in their community regardless of their ability
  to pay.

### Where are Community Service Boards located?

- There are 22 CSBs in Georgia that together serve all the state's 159 counties; most CSBs serve several counties. No matter where someone lives in Georgia, there is a CSB available to them.
- In many Georgia counties, the local CSB is the only service provider.

#### What is Co-Response?

- Georgia Law defines a Co-Responder Program as, "a program established through a partnership between a
  community service board and a law enforcement agency to utilize the combined expertise of peace officers
  and behavioral health professionals on emergency calls involving behavioral health crises to de-escalate
  situations and help link individuals with behavioral health issues to appropriate services.
- There are also models that pair law enforcement with other first responders like fire personnel and emergency medical technicians.

## What is the goal of Co-Responder Programs?

- De-escalate crisis situations and connect to local services,
- Assist in diverting those is crisis from jail or hospital emergency departments by connecting them with access to a crisis stabilization unit or CSB safety net of services, and
- Increase access to care and promote engagement with treatment.

### **How many CSBs have Co-Responder Programs?**

- Each of the 22 CSBs is either actively responding to crisis calls or are forming a team to do so.
- There are 35 Co-Responder Programs that have 47 teams responding to crisis calls with first responders across Georgia.
- There are many more first responder agencies that are inquiring about starting a co-responder program with their local Community Service Board.

## **Barriers to implementing Co-Response Programs**

- Lack of sustainable State or Federal Funding
- Expiration of federal funding that will require teams to cease operating without continued funding
- Lack of available workforce for both law enforcement and mental health professionals
- Lack of training for co-responders that will be staffing a co-responder team



Highlights from the 2024 DBHDD Co-Responder Program Annual Report <a href="https://dbhdd.georgia.gov/organization/be-informed/reports-performance/co-responder-annual-report">https://dbhdd.georgia.gov/organization/be-informed/reports-performance/co-responder-annual-report</a>

# Summary of Stakeholders Surveyed:

- ✓ Co-Responder programs effectively manage crises, preventing unnecessary incarcerations.
  - ✓ Strong law enforcement relationships are crucial for Co-Responder success.
  - ✓ Challenges include staffing difficulties and limited resources, especially in rural areas.

# **Summary of Data Collected:**

- Notably, arrests are infrequent, with emerging data from Georgia sites showing that only 2.6% of encounters end in arrest, reflecting a preference for rehabilitative over punitive measures.
- Assistance is extended to a diverse group of individuals. Georgians of varied ethnic and cultural backgrounds
  have been benefactors of co-response, demonstrating an inclusive approach. The program also supports other
  demographics, including juveniles, and veterans, ensuring a wide-ranging impact. Homeless individuals
  represent 17% of those served by co-responders demonstrating the vulnerabilities of this group. This highlights
  the importance of providing targeted support and resources to address the complex needs of homeless
  individuals, who often face barriers to accessing services.
  - Referrals to community resources are the most frequent outcome, with roughly 41% of cases resulting in individuals being connected to community resources, reflecting a strong reliance on local support networks and services.
  - The outcome "Resolved on Scene" which is approximately 27% of the total interactions, indicates that many situations are being dealt with immediately and on-site, without the need for further referrals or services. It also reflects the capability of the responding teams to provide immediate solutions or support.
    - Referrals to CSB services and emergency rooms account for approximately 24% of outcomes. The data underscores the necessity of having access to more intensive care options and the seamless integration of these services with initial response efforts.
  - Voluntary admissions lead at 58.97%, illustrating a preference or capability for individuals to seek help on their terms while 41.03% require involuntary admissions.

DBHDD recommends that \$238,235 be considered an appropriate standard budget for a Co-Responder program capable of complying with the goals of SB 403. This amount would allow for staffing a Co-Responder program with three CSB employee roles to partner with peace officer team members.

\*GACSB notes that this amount is an average based on one co-response team and does not reflect changes in market rates for staffing and community needs.

As of June 2023, DBHDD is aware of 44 law enforcement agencies wanting to partner with their local CSB to offer constituents Co-Responder services. At the recommended funding level, the total annual cost to meet SB 403 mandates would be approximately \$10.5M.