Cory Runge

- **Education:**
  - BS in Psychology (NAU)
  - MA Sociology (NAU)

- **Experience:**
  - USMC
  - 19 Years policing

- **Other Qualifications:**
  - Crisis Intervention Team (CIT)
  - SME Crisis Intervention (AZPOST)
  - Hostage Negotiations Team
  - Critical Incident Stress Management (CISM)

- **Sgt. Cory C. Runge**
  Flagstaff Police Department

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Sharie Brock: who the He$$ are you

- BS: Justice Studies, Pre-law, Communication
- Masters: Professional Counseling
- PhD: Psychology, Cognition (IN-Process)
- Law Enforcement 21 years
- Counselor 4 years (SMI Population, JS)
- ICM 2 years with HCIC: AzSH, DOC and County Judicial Systems
- Justice and Court Administrator
Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA.
History of Problem

- Deplorable conditions in Mental Health Facilities (Up to 1980’s)
- Deinstitutionalization (1980’s)
- Homelessness (1990’s to Current)
- Criminalization of Homeless/Mentally Ill (1990’s to current)
CIT History

• Development:
  • 1988
  • Memphis, TN.
  • DR. Randolf Dupont and Maj. Sam Cochran
  • - Has become standard best practices model called the “Memphis Model”.

• Stepping-Up Initiative
Criminal Justice and Health Structures
Key Concepts in the Modern Systems

Model of Rationality
- Definitive line versus spectrum

Fairness in Systems
- Procedural Justice versus Equity in Health

Competing Theories based on Perspective
- Societal Interests versus Individual Interests
- Medicalization of Deviant Behavior versus Criminalization of Mental Health
Fragmented Health Care System

- Mental Illness
- Developmental Disability
- Organic Brain Injury or Disease
Barriers for Rural Areas:

1. **Funding**: Cost is higher< more services needed to respond but receive less $$$$
2. **Access** to programs are limited
3. **Tracking**: Can this be a lack of tracking....ID in rural communities....what do you think are some of the barriers not mentioned.
Bridging the Gaps

Criminal Justice Coordination Council
Specialty Courts
Reach in Treatment Services
Information Sharing
Available Resources
  i.e. Medical Bed Spaces
  Secure treatment facilities
Medical Units in Jails
Training-
  Collaborative
  Multi-disciplinary
  Locally focused
Evidence Based Criminal Justice Models

Sequential Intercepts
Best Clinical Practices: The Ultimate Intercept

I. Law Enforcement/Emergency Services
II. Post-Arrest: Initial Detention/Initial Hearings
III. Post-Initial Hearings: Jail/Prison, Courts, Forensic Evaluations and Commitments
IV. Re-Entry From Jails, State Prisons, & Forensic Hospitalization
V. Community Corrections & Community Support

Munetz & Griffin
Psychiatric Services
57: 544–549, 2006
Sequential intercept model

Myth: People with mental health problems are violent and unpredictable.

• Fact: The vast majority of people with mental health problems are no more likely to be violent than anyone else. Most people with mental illness are not violent and only 3%-5% of violent acts can be attributed to individuals living with a serious mental illness. In fact, people with severe mental illnesses are over 10 times more likely to be victims of violent crime than the general population.

www.mentalhealth.gov
Overview of Changes

• AHCCCS Complete Care (ACC) is effective 10/1/18.
• Health Choice Arizona will become Steward Health Choice Arizona. The new plan will be an ACC.
• ACC encourages more coordination of care between providers which can mean better health outcomes for members.
• Health Plan Choices may change in each Geographic Service Area (GSA).
• Steward Health Choice Arizona is exiting the South GSA and will not serve Pima County.
• Steward Health Choice Arizona will serve Yavapai County.

Why?

<table>
<thead>
<tr>
<th></th>
<th>GENERAL PUBLIC</th>
<th>STATE PRISONS</th>
<th>JAILS</th>
<th>PROBATION &amp; PAROLE</th>
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<tbody>
<tr>
<td>SERIOUS MENTAL ILLNESS</td>
<td>5.4%</td>
<td>16%</td>
<td>17%</td>
<td>7-9%</td>
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<tr>
<td>SUBSTANCE USE DISORDER – ABUSE &amp;/OR DEPENDENCE</td>
<td>16%</td>
<td>53%</td>
<td>68%</td>
<td>35-40%</td>
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<tr>
<td>CO-OCCURING SUBSTANCE USE DISORDER WHEN SMI IS DIAGNOSED</td>
<td>25%</td>
<td>59%</td>
<td>72%</td>
<td>49%</td>
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<tr>
<td>CO-OCCURING SMI WHEN SUBSTANCE USE DISORDER IS DIAGNOSED</td>
<td>14.4%</td>
<td>59.7%</td>
<td>33.3%</td>
<td>21%</td>
</tr>
</tbody>
</table>
IN A MENTAL HEALTH CRISIS, PEOPLE ARE MORE LIKELY TO ENCOUNTER POLICE THAN GET MEDICAL HELP

• Once in jail, many individuals don't receive the treatment they need and end up getting worse, not better.
• They stay longer than their counterparts without mental illness.
• They are at risk of victimization and often their mental health conditions get worse.
Examples of System Failures and Successes

• System Failure 72 Day Restoration Low Level with SMI Client
  • “Kimberlie”
  • “Patty”
Tactics and Techniques For Collaboration

• Pre-diversion Programs
• Post Diversion
• Informal Diversions
  • Speak in hypotheticals
More Information

• Resources
  • Watch the AHCCCS website for updates: https://www.azahcccs.gov/AHCCCS/Initiatives/AHCCCSCompleteCare/
  • Steward Health Choice Arizona has a new website: www.stewardhealthchoiceaz.com/

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