

# Intercept Model

As you know, there are several activities and assignments which are related to the single social justice topic of your choosing. **Throughout this module, students will be working independently to choose and learn about a social justice topic/issue and explore how it intersects with criminal justice. The relationship between criminal justice and social justice will be examined through the lens of an ethical theory!** (See other module pages for more information).

The social justice topic areas you may choose from are as following:

- Behavioral health (e.g., drug use, mental health)
- Environmental justice
- Gender justice
- Hunger & Homelessness

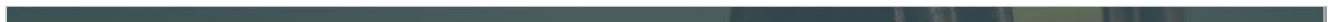
## The Sequential Intercept Model

In our Criminal Justice courses, we often speak of community-based strategies and planning. In your capstone project, you are being asked to address a social justice topic that intersects with criminal justice and how we respond to delinquent and criminal behaviors.

Below, I am presenting part of the [Sequential Intercept Model](#)

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<https://webcourses.ucf.edu/courses/1342762/files/77970061/download?wrap=1> (click the name to download the full pdf). The concept of "interceptions" is dominant in the field of social work and their focus on case management. The following model is specific to responding to people with mental and substance use disorders, but is easily adapted to other types of delinquents and offenders, as well as victims, who come to the attention of criminal justice officials. In reviewing the diagram, you can see that the criminal justice system is depicted at various stages. At each intercept, the authors provide examples of how criminal justice officials may respond at these various stages. I recommend you keep this in mind as you plan and implement your capstone project!

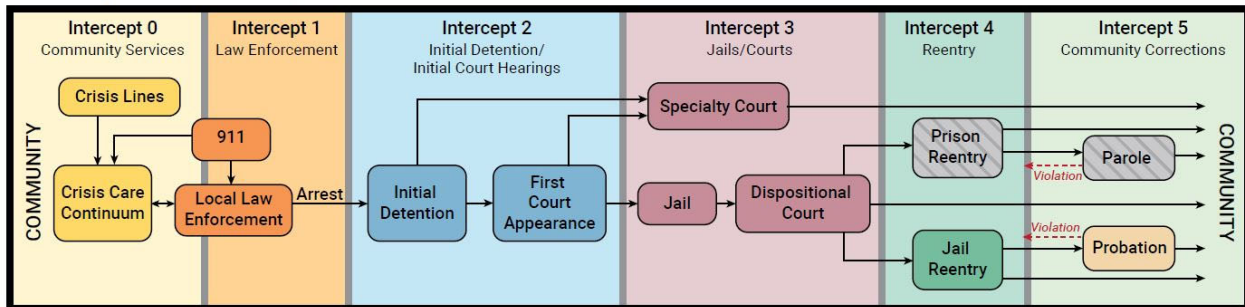


# THE SEQUENTIAL INTERCEPT MODEL

Advancing Community-Based Solutions for Justice-Involved People with Mental and Substance Use Disorders



## The Sequential Intercept Model



## Key Issues at Each Intercept

### Intercept 0

**Mobile crisis outreach teams and co-responders.** Behavioral health practitioners who can respond to people experiencing a behavioral health crisis or co-respond to a police encounter.

**Emergency Department diversion.** Emergency department (ED) diversion can consist of a triage service, embedded mobile crisis, or a peer specialist who provides support to people in crisis.

**Police-friendly crisis services.** Police officers can bring people in crisis to locations other than jail or the ED, such as stabilization units, walk-in services, or respite.

### Intercept 1

**Dispatcher training.** Dispatchers can identify behavioral health crisis situations and pass that information along so that Crisis Intervention Team officers can respond to the call.

**Specialized police responses.** Police officers can learn how to interact with individuals experiencing a behavioral health crisis and build partnerships between law enforcement and the community.

**Intervening with super-utilizers and providing follow-up after the crisis.** Police officers, crisis services, and hospitals can reduce super-utilizers of 911 and ED services through specialized responses.

### Intercept 2

**Screening for mental and substance use disorders.** Brief screens can be administered universally by non-clinical staff at jail booking, police holding cells, court lock ups, and prior to the first court appearance.

**Data matching initiatives between the jail and community-based behavioral health providers.**

**Pretrial supervision and diversion services to reduce episodes of incarceration.** Risk-based pre-trial services can reduce incarceration of defendants with low risk of criminal behavior or failure to appear in court.

### Intercept 3

**Treatment courts for high-risk/high-need individuals.** Treatment courts or specialized dockets can be developed, examples of which include adult drug courts, mental health courts, and veterans treatment courts.

**Jail-based programming and health care services.** Jail health care providers are constitutionally required to provide behavioral health and medical services to detainees needing treatment.

**Collaboration with the Veterans Justice Outreach specialist from the Veterans Health Administration.**

### Intercept 4

**Transition planning by the jail or in-reach providers.** Transition planning improves reentry outcomes by organizing services around an individual's needs in advance of release.

**Medication and prescription access upon release from jail or prison.** Inmates should be provided with a minimum of 30 days medication at release and have prescriptions in hand upon release.

**Warm hand-offs from corrections to providers increases engagement in services.** Case managers that pick an individual up and transport them directly to services will increase positive outcomes.

### Intercept 5

**Specialized community supervision caseloads of people with mental disorders.**

**Medication-assisted treatment for substance use disorders.** Medication-assisted treatment approaches can reduce relapse episodes and overdoses among individuals returning from detention.

**Access to recovery supports, benefits, housing, and competitive employment.** Housing and employment are as important to justice-involved individuals as access to behavioral health services. Removing criminal justice-specific barriers to access is critical.