



**Meeting Notes**

March 4, 2026

3:30 p.m. to 5:00 p.m.

Emergence Health Network

Board Room

201 E. Main, 6<sup>th</sup> Floor

El Paso, Texas 79901

**Attendees:**

Adela Alonzo  
Robert Anchondo  
Yovanni Atienzo  
Leslie Alyssa Bamba  
Joel Bishop  
Sharon Butterworth  
Alba Calzada  
Jennifer Chavez  
Michael Cuccaro  
Chrystal Davis (JLC Vice Chair)  
Sandra Day  
Donna Elizondo  
Ricki Estrada  
Patrick Gailey  
Carolina Gonzalez  
Chris Hendricks  
Rebeka Isaac  
Josue Lachica  
Amy Lechuga  
Andra Litton  
Enrique Mata  
Abel Morales  
Aaron Nevarez  
Celeste Nevarez  
Jacqueline Padilla

**Representing:**

City of El Paso - OCHD  
DWI Specialty Court/Criminal Court No. 2  
Centro San Vicente Health Center  
County of El Paso Criminal Justice Coordination  
El Paso County Administration  
Paso del Norte Center at Meadows Institute  
El Paso County Sheriff's Office  
Emergence Health Network – Jail Based Comp Rest  
Council Of Judges Administration, El Paso County  
Emergence Health Network  
Paso del Norte Health Foundation  
El Paso County Sheriff's Office  
Aliviane Inc.  
Chief Deputy El Paso County Sheriff's Office  
Aliviane Inc.  
Emergence Health Network – Chief of Corr Care  
Emergence Health Network  
Paso del Norte Center at Meadows Institute  
District Attorney's Office 34th Judicial District  
District Attorney's Office 34th Judicial District  
Paso del Norte Center at Meadows Institute  
El Paso County Sheriff's Office  
El Paso County Sheriff's Office  
Emergence Health Network  
Emergence Health Network

Annabelle Perez (JLC Chair)	Judge 41 <sup>st</sup> District Court
Guillermo Ramirez	El Paso County Sheriff's Office
Li Rosario	County of El Paso Criminal Justice Coordination
Alejandra Ruiz	County of El Paso Public Defender's Office
Nicole Schiff	Paso del Norte Center of Hope
Cheri Shapleigh	El Paso County Attorney's Office
Abril Silvadoray	Emergence Health Network – Chief of Diversion
Ruben Soria	El Paso County Sheriff's Office
Manuel Soria	Chief Deputy El Paso County Sheriff's Office
Regina Tapia	Aliviane Inc.
Rene Vargas	El Paso County Public Defender's Office
Luis Vasquez	El Paso County Sheriff's Office
Sgt. Scott Wilkins	El Paso Police Department

### **Welcome**

Judge Perez convened the meeting at 3:35 p.m. and called for brief introductions.

### **Opioid / Addiction Collaboration**

Joel Bishop provided an overview of the Opioid Abatement funding and how it is being used. He explained that opioid funding coming into the community is likely to be approximately \$5 million over the next 15 years. The most recent use of funds was based on needs identified by the existing Harm Reduction Committee. There was a need for Narcan to be disseminated among law enforcement as well as nonprofits serving outreach and coordination for individuals with addiction conditions. These funds have also been used to support other existing programs through University Medical Center and Emergence Health Network. Mr. Bishop also recognized Judge Anchondo's efforts to help individuals with DUI cases. Judge Anchondo thanked law enforcement and other partners for assisting him with programs. He also recognized all the judges for their efforts to prevent waiting lists and assisting where it is possible to help individuals in need of support in lieu of sending them to long penitentiary sentences. Mr. Bishop added that recent data show El Paso now has one of the lowest recidivism rates he's ever seen.

### **El Paso County Sheriff's CIT Evaluation**

The Meadows Institute Public Safety Team members provided a brief review of the findings from the recent evaluation of the Sheriff's Office Crisis Intervention Team (CIT) program. [Kate Reed](#), [Lisa Kurtz](#), and [Rebecca Marcolina](#) provided a virtual presentation then responded to questions from the group. The collaboration among local partners and the Paso del Norte Health Information Exchange (PHIX) was recognized during the presentation. Ms. Reed commented that it is a huge challenge to integrate justice and health data and few

communities have been successful. In her experience only Camden County, New Jersey and Ohio health information exchanges have had success similar to the great work El Paso is doing. Judge Perez thanked the Sheriff's Office for their great work collaborating on the CIT evaluation and recognized the importance of having data across all CIT programs, including the El Paso Police Department and others working with Emergence Health Network. With consistent metrics more areas for improvement can be identified and addressed in a timely manner. The group also discussed the benefits of exploring increased CIT training versus traditional law enforcement.

***Other Business:***

- ***Reentry Report***

Li Rosario and Chris Hendricks provided a brief overview of the current activity with preparing inmates as they leave the jail. The group discussed ongoing challenges with individuals leaving the jail with no support or connection to services. Public Defenders only connect with about 30% of the cases. There continues to be a need for options to ensure that individuals reentering the community do not fall back into the justice system due to lack of navigation or other supports. Mr. Hendricks responded to questions and shared ideas on ways to address individuals' needs. The Reentry Work Group will take up this discussion and work on solutions to bring to a future Justice Leadership Council Meeting.

- ***Jail Diversion Committee***

The Jail Diversion Committee met at 11:30 am on March 4<sup>th</sup>. The topics discussed during the meeting included improving conditions to serve individuals who are identified with special needs of a history of intellectual and developmental disabilities (IDD).

- ***Crisis System – 911/988 - MCOT/YCOT***

Emergence Health Network leaders shared progress highlights for crisis system improvement including the addition of diversion options added to the crisis stabilization unit at 1600 Montana and continued progress toward developing a new center on the East side of El Paso. EHN is also in the final stages of developing a collaboration with University Medical Center El Paso to offer onsite mobile crisis outreach services. The group also discussed tracking of the number of people who call the crisis line and the disposition of the calls. A report of the most recent numbers is included with these meeting notes.

- ***Justice Leadership Council Action Plan***

Enrique Mata shared a set of slides with highlights of progress that has occurred since the 2022 Consortium action plans were set in motion. He reported that the opportunities for change identified using the 2021 El Paso Behavioral Health System

Assessment, and ongoing input from community leaders and stakeholders were the catalyst for the action plans. These documents are living documents and may be amended based on input from groups such as the leaders within the Justice Leadership Council. Using the slides he highlighted that a good majority of the strategies were aspirational in 2022 but implemented with great success over the past few years. He added that updated data, the Mental Health Law Plan, and reports such as the Sheriff's Office CIT evaluation will lay the groundwork for the next phase of improvements in area systems of care. A revised version of the Justice Leadership Council action plans and plans for the Family Leadership Council will be developed and shared. He emphasized the importance of having these action plans as benchmarks and recognizing the wins at public meetings. A Consortium General Meeting is being planned for April or May. Presentation slides are included with these notes.

### **Next Meeting**

Judge Perez identified either April 1<sup>st</sup> or April 8<sup>th</sup>. The group selected April 1<sup>st</sup>. An outlook meeting notice will be disseminated to hold the date for the next meeting, and the Paso del Norte Center will work to set a regular meeting time on the calendar for the first Wednesday afternoons of the month at 3:30 pm. Meetings will be held at the Paso del Norte Health Foundation, 221 N. Kansas, 19<sup>th</sup> Floor.

### **Adjourn**

Judge Perez adjourned the meeting at 5:05 pm.

# El Paso County CIT Evaluation

Findings and Recommendations

# Agenda



# Evaluation Goals and Approach

# Evaluation Goals

Assess the effectiveness of EPCSO's CIT program in behavioral health crisis response.

Evaluate system-level impacts and potential cost savings of the County's CIT investment.

Examine CIT outcomes in the context of broader behavioral health trends.

Compare program structure and operations with national best practices.

Deliver data-driven recommendations to strengthen crisis intervention outcomes.

# Evaluation Approach

- **The evaluation draws on data from CIT activity logs, CAD/RMS, jail bookings, emergency department records, officer focus groups, and client quality-of-life surveys.**
- **The mixed-methods analyses in the report examined the following:**
  - ✓ Trends in CIT encounters, dispositions, treatment linkage, and officer time on calls.
  - ✓ Trends in countywide mental health-related calls.
  - ✓ Officer confidence and decision-making.
  - ✓ Officer injuries and use of force.
  - ✓ Jail bookings and recidivism by mental health status.
  - ✓ Emergency department utilization.
  - ✓ Quality-of-life indicators.
  - ✓ Estimated cost savings.
  - ✓ Changes during the COVID-19 pandemic.
  - ✓ El Paso County's CIT program outcomes against those of the City of El Paso's CIT program.

# CIT Program Highlights

# Model and Operational Assets

Aligns closely with national best practice standards across several program features.



Three-week academy with ongoing quarterly refresher trainings.



Awareness training for new cadets.



Selective officer participation.



Robust call triage and dispatch protocols.



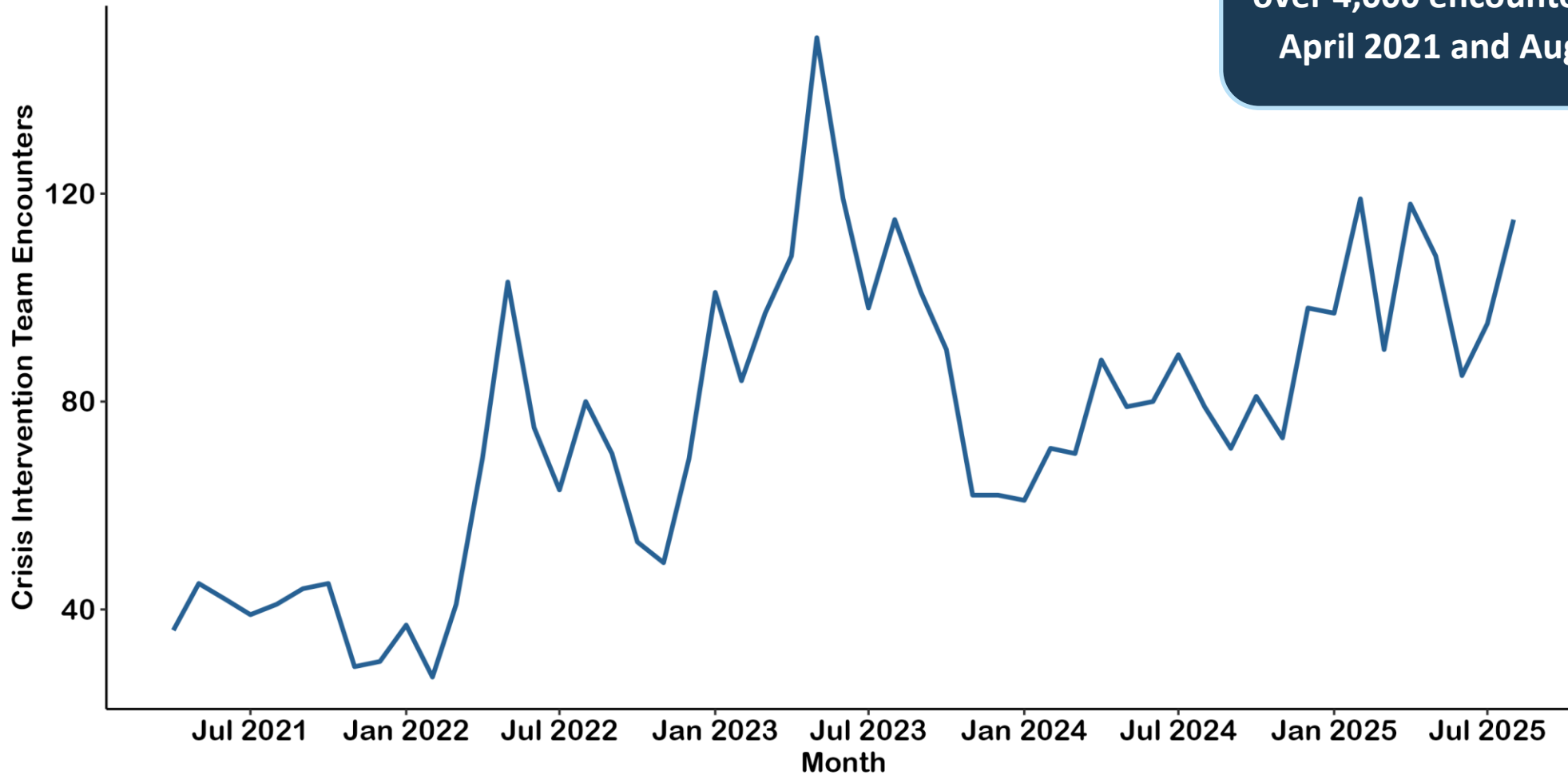
Expansion to school-based CIT.

# Officer Support and Perceived Strengths

- The program enjoys strong support from both CIT and non-CIT deputies.
- CIT deputies feel well-equipped by their training, emphasizing the impact of regular co-training and collaborative case review with EHN.
- Deputies feel that the clinician-led co-response approach contributes to positive community perception of, and receptivity to, the program, highlighting the following benefits:
  - More effective de-escalation
  - More accurate on-scene assessments
  - Greater access to care for individuals in crisis

# Trend in CIT Encounters

## Trend in Monthly CIT Encounters (April 2021 – August 2025)



The EPCSO CIT responded to over 4,000 encounters between April 2021 and August 2025.

# Geographic Distribution of EPCSO CIT Encounters

## Key Geographic Findings

Over 50% of all encounters occurred in two ZIP codes:

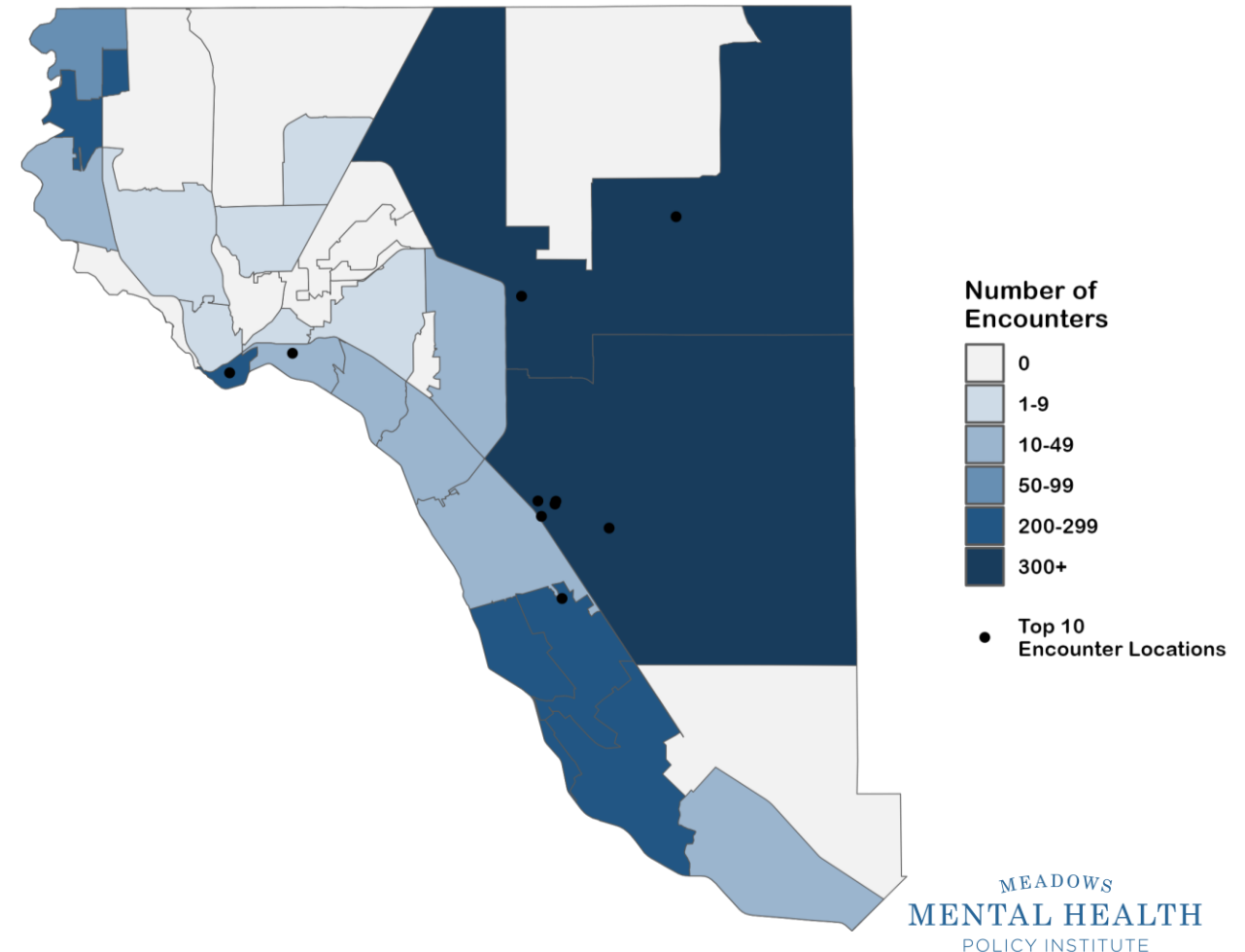
- 79928 – 1,364 encounters
- 79938 – 741 encounters

More than half of the top 10 encounter locations were within these two ZIP codes.

## Additional High-Activity Areas

- Downtown El Paso
- Socorro–San Elizario–Clint region (southeast county)
- Northwest area near Canutillo

Spatial Distribution of EPCSO CIT Encounter by ZIP Code  
(April 2021 – August 2025) N=4,041



# CIT Outcomes: Diversion, Service Linkage, Use of Force | 11

## Diversion Impact

### 94% Overall Diversion Rate

- 88% avoided jail
- 72% avoided hospital
- 65% avoided both jail & hospital

### Improvement Over Time:

- 82% (2021) → 99% (2024)

CIT consistently diverts individuals to community-based care.

## Service Linkages

### 91% Connected to Services

Disposition Breakdown:

- 47% Emergency Detention Orders
- 41% Community discharge with referrals
- Only 2% Arrested

Behavioral health intervention — not criminalization — is the norm.

## Safety & Use of Force

### Very Low Safety Risk

- <1% officer injuries
- <3% civilian injuries
  - Most (86%) occurred before CIT arrival

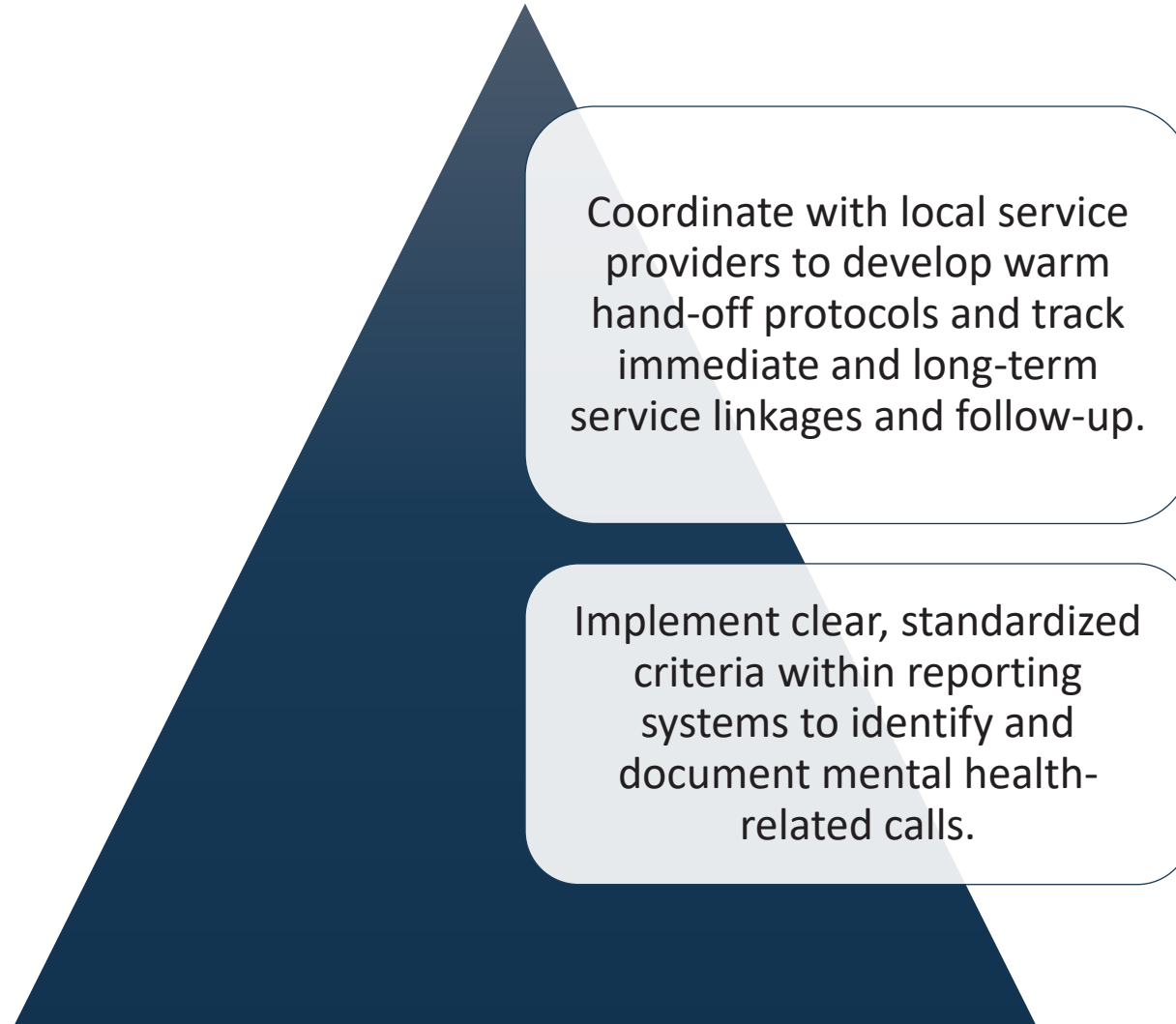
### Minimal Use of Force

- 1% of encounters
- Mostly low-level (soft empty-hand)

CIT responses are safe, controlled, and rarely require force.

# Recommendations

# Enhanced Program Impact and Evaluation



# Data Quality and Integration

## Dispatch and Record Systems (CAD/RMS) Updates

- Add flag(s) to identify mental health- and substance use-related responses.
- Identify unit(s) that respond to each call and discern primary and secondary units.
- Complete timestamps to track officer time spent on each call.

## CIT Activity Log Improvements

- Standardize documentation of BH conditions, disposition, and other information fields through defined drop-down categories.
- Add a repeat client identifier.
- Add injury and service linkage detail.

## Data Dashboard Development

- Develop shared performance dashboards between EPCSO, EHN, and other community partners.
- Track diversion, safety, and follow-up metrics.

## Health Information Exchange Participation

- Integrate justice/public safety with PHIX to enhance cross-systems data sharing.
- Monitor service utilization, evaluate outcomes, and guide resource allocation.

# Officer and Community Support

Invest in scenario-based training, cross-disciplinary exercises with BH partners, and professional development in culturally responsive practices.

Partner with community leaders, faith-based organizations, and Spanish-speaking BH clinicians to develop outreach strategies that reduce stigma.

Ensure adequate staffing (24/7 coverage and 5-8 deputies per shift) to allow time for safe, relationship-centered responses.

Collect and share success stories to highlight the program's impact and strengthen community trust.

# Resource Utilization and System Capacity

Pursue a long-term funding strategy to stabilize and expand staffing.

Consider regional deployment zones to minimize response times in more distant areas.

Implement and integrate structured telehealth protocols to ensure continuity of coverage.

Collaborate with PHIX to support coordinated follow-up, data sharing, and monitoring of high-utilizers.

Use clear performance indicators to demonstrate program value.

# Questions

## **Lisa A. Kurtz**

Assistant Director of Integrated Public Safety Policy

[lkurtz@mmhpi.org](mailto:lkurtz@mmhpi.org)

## **Rebecca Marcolina**

Director of Population Health Analytics

[rmarcolina@mmhpi.org](mailto:rmarcolina@mmhpi.org)

## **Kate Reed, LPC**

Director of Health and Public Safety Programs

[kreed@mmhpi.org](mailto:kreed@mmhpi.org)

# Thank You!

MEADOWS  
MENTAL HEALTH  
POLICY INSTITUTE

**PASO *del* NORTE CENTER**  
Meadows Mental Health Policy Institute

 **THE HACKETT CENTER**  
FOR MENTAL HEALTH

**TRAUMA & GRIEF CENTER**  
Meadows Institute

Meadows Institute | **DALLAS**

Meadows Institute | **PANHANDLE**

**Due 1<sup>ST</sup> of the Month**

# Crisis and Emergency Services Jail Diversion Committee Data Report

Month of: February

## Crisis Hotline

REPORTING INFORMATION:		DATA:	
Total Monthly CHL Calls		3402	
Percentage of PD Call Referrals to Emergency Departments		3.26%	
Total Referrals to Emergency Departments		169	
Number of PD Calls		<i>Total</i>	111
		<i>EPPD</i>	106
		<i>Socorro PD</i>	0
		<i>Horizon PD</i>	2
		<i>Texas Tech PD</i>	0
		<i>Sheriff's Office</i>	2
		<i>Anthony PD</i>	1
		<i>San Elizario Marshall</i>	0
Number of CIT Referrals to Emergency Departments		<i>Total</i>	58
		<i>CIT</i>	53
		<i>CIT-SO</i>	5

## Crisis Hotline Call Breakdown

REPORTING INFORMATION:		DATA:	
Total Monthly Calls		3402	
EHN Crisis Hotline Calls		1522	
EPCJ Crisis Calls		13	
988 Suicide & Crisis Lifeline Calls		1205	
911 Diversion Calls		53	
Number of EPCSO Calls		1	
Staff Line & Police Line Calls		588	
OUTCOMES			
Rescue Services		62	
Mobile Crisis Outreach Requests		188	
Crisis De-escalation		799	
Hospital Coordination		477	
Information and Referral		1876	

## Extended Observation Unit

REPORTING INFORMATION:		DATA:	
EOU admissions:		44	
Crisis walk-ins assessed:		166	
Crisis walk-ins with EOU Disposition:		24	
Law Enforcement drop-offs:		1	
Recidivist patients:		1 month	0

**Due 1<sup>ST</sup> of the Month**

	<b>3 months</b>	0
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**Crisis Intervention Team**

REPORTING INFORMATION:	Total Calls:	Remained in Community	Received In-Patient Mental Health Service	Hospitals-ERS	Other/Comm Follow up	Jail
<b>CIT EPPD:</b>	267	69	55	72	60	6
<b>CIT EPCSO:</b>	81	41	18	16	35	3
<b>CIT HPD:</b>	22	16	1	1	12	1
<b>CIT School Based:</b>	65	47	18	0	36	0

**Crisis & Emergency Services**

Reporting Information:	Total Encounters	Total MCOT Adults	Total MCOT CAD	Total Walk-Ins Adult	Total Walk-ins CAD	Hospitals-ERS (Medical Clearance)	Comm Follow up	Jail
<b>MCOT:</b>	315	149	8	142	16	26	0	0
<b>YCOT:</b>	40	1	6	3	29	1	151	0



EL PASO  
**Behavioral Health**  
CONSORTIUM



OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM



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**Justice**  
**Leadership Council**  
**OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM**

# JLC MARCH 4<sup>th</sup> Agenda

- I. Welcome and Introductions
- II. Opioid / Addiction Collaboration
- III. El Paso County Sheriff's CIT Evaluation
- IV. Other Business:
  - a) Reentry Report
  - b) Jail Diversion Committee
  - c) Crisis System – 911/988 - MCOT/YCOT
  - d) Justice Leadership Council Action Plan
- V. Announcements
- VI. Adjourn



# Opioid / Addiction Collaboration



# El Paso County Sheriff's Office CIT Evaluation

# Other Business



- a) Reentry Report
- b) Jail Diversion Committee
- c) Crisis System – 911/988 - MCOT/YCOT
- d) Justice Leadership Council Action Plan



# Reentry Work Group



# Jail Diversion Committee



# Crisis Care MCOT/YCOT



# Justice Leadership Coordinating Committee



# Justice Leadership Council Action Plan

# Justice Leadership Council

OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM



Justice Leadership Council  
Sheriff Wiles Chair  
Chrystal Davis Vice Chair


**PASO del NORTE CENTER**  
Meadows Mental Health Policy Institute

Facilitator/Technical Support

Jail Diversion Committee  
SIM Intercepts 0,1,2

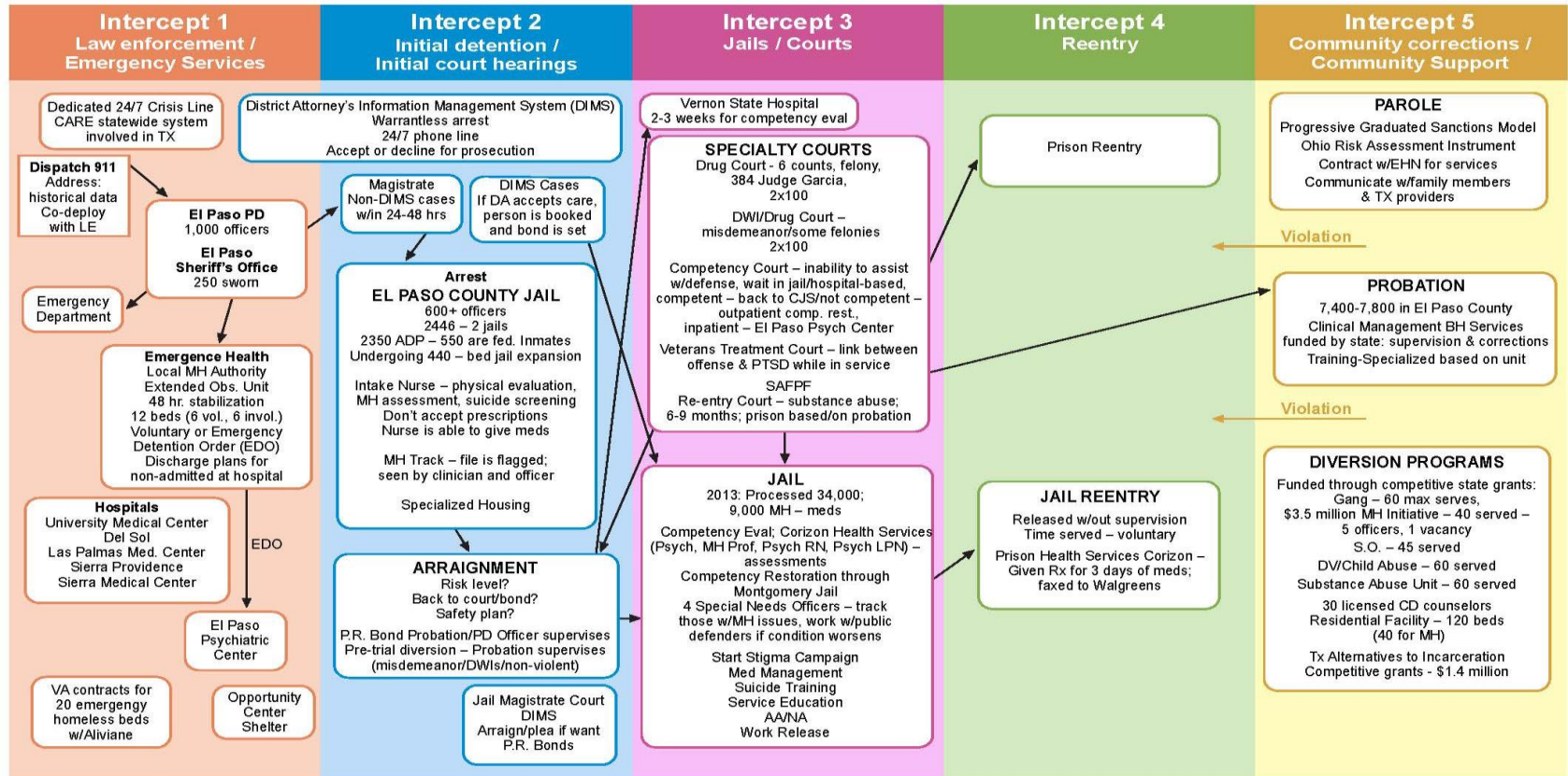


Justice Leadership Coordinating Committee



Reentry Task Force (BJA)  
SIM Intercepts 3,4,5

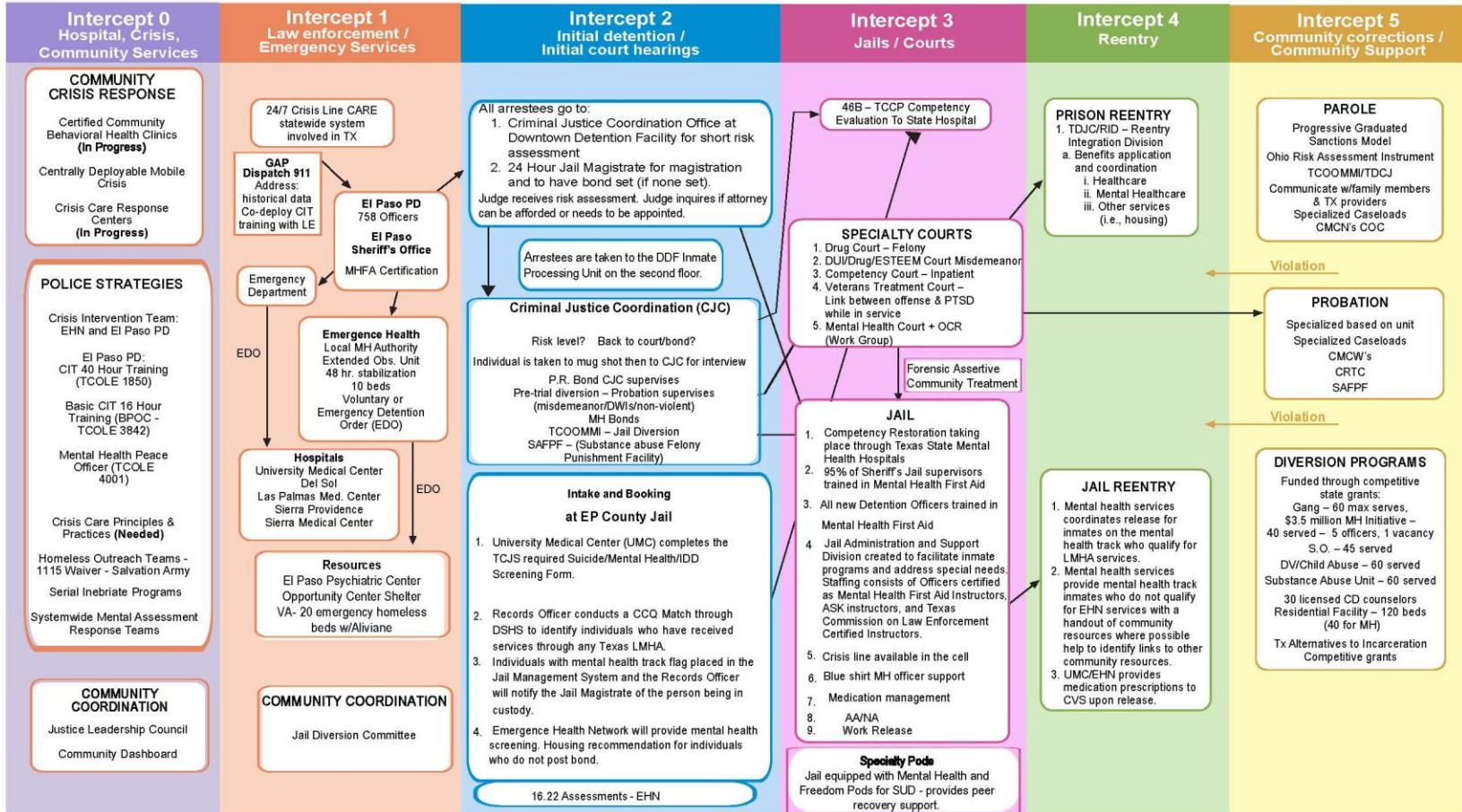
# September 2014 El Paso County, TX Sequential Intercept Map



## Community Resources



# 2019 El Paso County, TX Sequential Intercept Map



# SIM UPDATE 2022

**Intercept 0**  
Community Services

- **COMMUNITY CRISIS RESPONSE**
  - Certified Community Behavioral Health Clinic - 1 active EHN Clinic
  - Centrally Deployable Mobile Crisis
- Crisis Care Response Centers (*In Progress*)
- **POLICE STRATEGIES**
  - Crisis Intervention Team: EHN and El Paso PD - 14 Units
    - CIT Expansion
      - El Paso County Sheriff - 3 Units
      - City of Socorro - 2 units
    - Exploring use of tablets for Mental Health provider virtual access on site
  - El Paso PD: CIT 40 Hour Training (TCOLE 1850)
  - Basic CIT 16 Hour Training (BPOC - TCOLE 3842)
  - Mental Health Peace Officer (TCOLE 4001)
  - Crisis Care Principles & Practices (*Needed*)
  - Homeless Outreach Teams
  - Serial Inebriate Programs
  - Systemwide Mental Assessment Response Teams
  - Cohen/Endeavors Veterans Wellness Center
  - Substance use drop in (Punto de Partida)
    - project chance
- **COMMUNITY COORDINATION**
  - Justice Leadership Council
  - Community Dashboard

**Intercept 1**  
Law Enforcement and Emergency Services

- 24/7 Crisis Line CARE statewide system involved in Conversion to 988 System and processes
- Dispatch 911 - Explore refined dispatch with mental health professional consults
- **El Paso PD**
  - 1024 Officers
- **El Paso Sheriff's Office**
  - 240 Deputies
- MHFA Certification
- **EMERGENCE HEALTH NETWORK - LOCAL MENTAL HEALTH AUTHORITY**
  - Extended Obs. Unit
    - 48 hr. stabilization
    - 10 beds
    - Voluntary or Emergency Detention Order (EDO) Explore expanded availability of full service or medical clearance
- **HOSPITALS**
  - University Medical Center Del Sol
  - Las Palmas Med. Center
  - Sierra Providence Sierra Medical Center
- **RESOURCES**
  - El Paso Psychiatric Cntr.
  - Opportunity Center Shelter
  - VA- 20 emergency homeless beds w/Aliviane
  - Mobile Integrated Healthcare (MIH)
- **COMMUNITY COORDINATION**
  - Jail Diversion Committee
  - Re-Entry Taskforce

**Intercept 2**  
Initial Detention and Initial Court Hearings

- **ALL ARRESTEES GO TO:**
  - Criminal Justice Coordination Office at Downtown Detention Facility for short risk assessment
  - 24 Hour Jail Magistrate for magistration and to have bond set (if none set).
  - Judge receives risk assessment. Judge inquires if attorney can be afforded or needs to be appointed.
  - Arrestees are taken to the DDF Inmate Processing Unit on the second floor.
- **CRIMINAL JUSTICE COORDINATION (CJC)**
  - Risk level? Back to court/bond?
  - Individual is taken to mug shot then to CJC for interview
  - P.R. Bond CJC supervises
  - Pre-trial diversion - Probation supervises (misdemeanor/DWIs/non-violent)
  - MH Bonds
  - TCOOMMI - Jail Diversion
  - SAFFP - (Substance abuse Felony Punishment Facility)
- **INTAKE & BOOKING AT EP COUNTY JAIL**
  - University Medical Center (UMC) completes the TCJS required Suicide/Mental Health/IDD Screening Form.
  - Records Officer conducts a CQ Match through DSHS to identify individuals who have received services through any Texas LMHA.
  - Individuals with mental health track flag placed in the Jail Management System and the Records Officer will notify the Jail Magistrate of the person being in custody.
  - **COMMUNITY COORDINATION**
    - Jail Diversion Committee
    - Re-Entry Taskforce

**Intercept 3**  
Jails and Courts

- **46B - TCCP COMPETENCY EVALUATION TO STATE HOSPITAL**
- **SPECIALTY COURTS**
  - Drug Court - Felony
  - DUI/Drug/ESTEEM Court Misdemeanor
  - Competency Court - Inpatient
  - Veterans Treatment Court - Link between offense & PTSD while in service
  - Mental Health Court + OCR (Work Group)
- **FORENSIC ASSERTIVE COMMUNITY TREATMENT**
- **ASSISTED OUTPATIENT TREATMENT (AOT) Service for 50 Individuals**
- **JAIL**
  - Competency Restoration taking place through Texas State Mental Health Hospitals
    - Competency Waitlist(160)
      - 112: Non-Max Security
      - 54: MaxSecurity
    - 95% of Sheriff's Jail supervisors trained in Mental Health First Aid
  - All new Detention Officers trained in Mental Health First Aid
  - Jail Administration and Support Division created to facilitate inmate programs and address special needs. Staffing consists of Officers certified as Mental Health First Aid Instructors, ASK Instructors, and Texas Commission on Law Enforcement Certified Instructors.
    - Crisis line available in the cell
    - Blue shirt MH officer support
    - Medication management
    - AA/NA
    - Work Release
- **SPECIALTY PODS**
  - Jail equipped with Mental Health and Freedom Pods for SUD - provides peer recovery support.

**Intercept 4**  
Reentry

- **PRISON REENTRY**
  - DJC/RID - Reentry Integration Division
    - Benefits application and coordination
      - i. Healthcare
      - ii. Mental Healthcare
      - iii. Other services (i.e., housing)
- **JAIL REENTRY**
  - Mental health services coordinates release for inmates on the mental health track who qualify for LMHA services.
  - Mental health services provide mental health track inmates who do not qualify for EHN services with a handout of community resources where possible help to identify links to other community resources.
  - UMC/EHN provides medication prescriptions to CVS upon release.
- **COMMUNITY COORDINATION**
  - Re-Entry Transitional Living and Support Center (EP County - near Jail Annex)
  - Medication-assisted treatment (MAT) EHN

**Intercept 5**  
Community Corrections and Community Support

- **PAROLE**
  - Progressive Graduated Sanctions Model
  - Ohio Risk Assessment Instrument
  - Contract w/EHN for services
  - Communicate w/family members & TX providers
- **PROBATION**
  - 7,400-7,800 in El Paso County
  - Clinical Management BH Services funded by state: supervision & corrections
  - Training-Specialized based on unit
- **DIVERSION PROGRAMS**
  - Funded through competitive state grants:
    - Gang - 60 max serves, \$3.5 million MH Initiative
    - S.O. - 45 served
    - DV/Child Abuse - 60 served
    - Substance Abuse Unit - 60 served
    - 30 licensed CD counselors Residential Facility - 120 beds (40 for MH)
    - Tx Alternatives to Incarceration Competitive grants



## Community Mental Health Law Plan (CMHLP)

Eight counties participated in the County Mental Health Law Plan (CMHLP) program throughout 2024. A liaison from each county, most often a judge, created a multidisciplinary team that engaged in the Pilot Program.

# JLC – Crisis Response II

**Opportunity For Change #2:** Expand and Enhance crisis dispatch services including integration and coordination of 9-1-1 and 9-8-8 dispatch teams.

- **Strategy I:** Create a long-term central location to house City and County 9-1-1, 3-1-1, and 9-8-8 dispatch services.
  - *The 911 Regional Command Center was completed in 2017. The 25-million-dollar project renovated a 100,000 square-foot existing structure at 6055 Threadgill Avenue in Northeast El Paso. The building now houses the City's situation center, 9-1-1, and the 9-8-8 dispatch services.*
  - *The 2-1-1 and 3-1-1 call centers are now located at the City Department of Public Health 9566 Railroad Drive, El Paso, TX 79924 which is less than three minutes away walking distance from the regional command center,*
- **Strategy II:** Implement model algorithms (procedures and practices) for appropriate triage of calls to the call center and appropriate dispatch of services suited to the individual's needs.
  - *The 911 and 988 unified call began to explore model algorithms in 2021 including exploring possible integration of health information exchange data to help build a more accurate and precise process for responding to calls for assistance.*
- **Strategy III:** Monitor 9-1-1, 3-1-1 and 9-8-8 dispatch data including crisis line calls, crisis diversions, response outcomes, and others to assist in evaluating and documenting progress.
  - *Emergence Health Network provides a monthly detailed breakdown of calls to 911 and 988 reporting during the monthly Jail Diversion Committee meetings for community stakeholders to discuss as needed.. Examples of information tracked include; EHN Crisis Hotline Calls, EPCJ Crisis Calls, 988 Suicide & Crisis Lifeline Calls, 911 Diversion Calls, 311 Diversion Calls, EPCSO Calls, Staff Line & Police Line Calls.*

# JLC – Crisis Response II

**Opportunity For Change #2:** Expand and Enhance crisis dispatch services including integration and coordination of 9-1-1 and 9-8-8 dispatch teams.

- **Strategy IV:** Explore policy change to maximize timely information sharing for all providers - including mental health and substance use service providers (e.g., convert to opt out rather than opt in for consent). Both federal and state law permit this practice change.
- **Progress:** Emergence Health Network is leading community efforts to maintain privacy while also transitioning to from an opt-in to an opt-out model as part of PHIX.
- **Strategy V:** Explore dispatch service collaboration with the Paso del Norte Health Information exchange to increase accuracy and precision of crisis triage and response.
- **Progress:** Emergence Health Network through its Crisis Intervention Team is exploring leveraged use of PHIX data to support response to calls. Additionally, PHIX is partnering with the City of El Paso EMS to explore timely data sharing for more precise response to crisis.

# JLC – Crisis Response III

**Opportunity For Change #3:** Create crisis respite options to address gaps for conditions such as competency restoration.

- **Strategy I:** Design and build a facility within the reserved space at the County jail annex with capacity for expanded outpatient, short term observation, and transitional living service options.
  - *Jail In-Reach programming in the El Paso County Jail System started on March 10, 2025 with four clients and now they have eight. Out of the original four, two have been deemed competent and able to follow with the court process. The program will have full capacity at 12 individuals. The importance of the program is that the individuals will continue to be followed to help ensure their success.*
- **Strategy II:** Increase community partner collaboration to provide timely and appropriate support services for individuals receiving care at the new jail annex facility.
  - *While progress through programs such as the El Paso Promise program help create transitional support options for individuals leaving the jail. There is still a need for case assistance outside of incarceration for lasting recovery and decreased need for justice system interaction to address mental health and substance use conditions.*

# JLC – Diversion Respite and Stabilization

**Opportunity For Change #4:** Increase availability of full-service extended observation units that include medical clearance.

- **Strategy I:** Collaborate with Emergence Health Network to expand and enhance current service options available in the 1600 Montana extended observation unit.
- **Progress:** Expansion of the service array at 1600 Montana continues as well as a repurposed appropriation by the state to develop a new East side crisis stabilization and step down center.
- **Strategy II:** Explore collaborative partner options to scale full service extended observation units within the El Paso County area.
- **Progress:** Expansion of the service array at 1600 Montana continues as well as plans to increase availability of Mobile Crisis Response Teams (MCOT/YCOT) to complement the current available care plus the new East side crisis stabilization and step down center.

# JLC – Reentry and Recovery

**Opportunity for Change #5:** Expand and enhance reentry and justice supported recover options to encourage effective reintegration, reduce recidivism, improve individual opportunities for lasting recovery and promote community safety

- **Strategy I:** Collaborate with the County of El Paso and Emergence Health network to offer program options for judges to consider as alternatives to incarceration (e.g., Assertive Community Treatment (ACT) and Forensic Assertive Community Treatment (FACT) Assisted Outpatient Treatment (AOT) and medication assisted therapeutic (MAT) approaches).
  - **El Paso County and Emergence Health Network under the Criminal Justice Coordination Department (CJC) now offer program interventions such as FACT, AOT and MAT to help those in need of the services. These services are still based on availability of grant funding, but work continues to maintain these services long after grant funding ends.**
- **Strategy II:** Collaborate with the County of El Paso to create successful and lasting reentry supports effectively utilizing grants from the Bureau of Justice Assistance (BJA), the Substance Abuse and Mental Health Services Administration (SAMHSA), and others. Services will include case management (>6 months support) and system navigation support, supported housing, life skills and workforce reintegration support, peer support specialists and other model programs.
  - **The El Paso County CJC Reentry Division is coordinating with local providers and nonprofits to reduce barriers to services such as supported housing, jobs, mental health and substance use services and other case management related interventions. Grants from BJA and SAMHSA help support the needs of the individuals receiving care.**

# JLC – Reentry and Recovery

**Opportunity for Change #5:** Expand and enhance reentry and justice supported recover options to encourage effective reintegration, reduce recidivism, improve individual opportunities for lasting recovery and promote community safety


- **Strategy III:** Collaborate with the University of Texas El Paso (UTEP) and other third-party evaluators, in a research-practitioner partnership to guide grant related planning and implementation, identify and track key metrics to inform progress, and engage in modifying programs as needed to meet funded target deliverables.
  - **The County of El Paso and UTEP have a strong relationship for evaluation of program materials and other research support. They connect as needs are identified.**
- **Strategy IV:** Increase availability of credentialed providers including providers that can provide Medication Assisted Therapy (e.g., methadone, buprenorphine, suboxone as part of a well supported plan of care.
  - **Data show an overall increase in the number of psychologists and psychiatric nurse practitioners in the region. However, there continues to be a need for providers, including providers that are credentialed to provide medication assisted therapy in the region.**



# Justice Leadership Council Action Plan



## NEXT MEETING

 Targeted for the first Wednesday  
of each month 3:30 – 5:00 pm

 **ADJOURN**

# Preventing Isolation and Promoting Social Connection

“isolation and silos weaken our communities; without strong communities, we cannot pull together in times of hardship and our diversity turns from a source of strength to a source of conflict. **When we have strong connections with each other everything is possible”.**

- U.S. Surgeon General Dr. Vivek Murthy