

Making Early Diversion Programs Work

Existing and Alternative Working Models

Purpose

Under certain circumstances an individual's charges can be suspended by the intervening Police officer when mental health conditions or substance-abuse issues are suspected. In return, the individual is diverted to mental health support services, and must complete a mandatory program.

This process is typically known as pre-charge diversion (PCD). Currently, the Peterborough Police Service have such a program, however there is a perception that this program is being underutilized.

The aim of this research was to understand how the program worked in Peterborough, why it was being underutilized, and draw comparisons to a successful program in the Durham region. The intention being to make recommendations on program improvement in Peterborough. This has been done by identifying:

- Elements of a successful pre-charge diversion program
- best practices, and
- Structural differences between programs



Methodology

- Literature Review
 - Emphasis on best practice in diversion
 - Successful models of crisis intervention
 - Programs applied in cities with populations less than 500,000
- Semi Structured Interviews
 - CMHA staff
 - Peterborough Police Service
 - Durham Regional Police Service
- Comparative Case Analysis: Peterborough & Durham
 - Comparing program structure & program documents
 - Comparing division of labour in program
 - Analyzing program outcomes

Recommendations

Incorporate PCD staff into annual Crisis Intervention Team (CIT) training.

Create detailed materials or video outlining program structure, process, and benefits to be provided to police and CIT training.

Establish clear responsibilities for program implementation and promotion.

Establish re-occurring communication through annual status updates with: PPS, PCD staff, and relevant Four County Crisis personnel

Hold focus groups with officers and relevant parties to identify key concerns and gaps.

Incorporate police experiences and feedback to recalibrate program structure.

Ensure all officers receive training on the program; identify key police briefings or trainings to achieve this.

Increase the number of mental health support staff to assist with consultation in order to facilitate program utilization.

Research: Trent Browett & Scott Maufront
Department: International Development IDST 4220Y
Faculty: Paul Shaffer
Host: Dave Jarvis & Paul Shauber
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