Using the Sequential Intercept Model to Drive Impactful Justice

Sequential Intercept Mapping (SIM) is a practical model for identifying gaps within criminal justice systems and highlighting resources to bridge those gaps for individuals with behavioral health needs. Developed in the early 2000s SIM recognizes that individuals with behavioral health problems can be pulled deeper into criminal justice systems, depending on what occurs at each of six touchpoints, or intercepts.

SIM is used as a strategic tool for policymakers and criminal justice planners to identify key points for intercepting and linking individuals with behavioral health treatment needs to programs and services that will limit deeper system penetration.

The six SIM Intercepts are:

- Intercept 0: Community Services
- Intercept 1: Law Enforcement
- Intercept 2: Initial Detention/Initial Court Hearings
- Intercept 3: Jails/Courts
- Intercept 4: Reentry
- Intercept 5: Community Corrections

The diagram below shows the various intercepts encountered as individuals move through criminal justice systems. Each intercept represents an opportunity to provide services and care that reduce the likelihood of moving deeper into the system.

Harris County, Texas launched a Telehealth for Patrol pilot initiative in December 2017 that helped police officers connect individuals in need to an appropriate mental health professional at any time through telehealth. An initial evaluation of the pilot program through December 2020 confirmed that the initiative provided cost-effective means of jail diversion and increased access to care at SIM Intercept One (law enforcement). Based on the successful pilot, the county has continued the program. Depending on an individual’s needs, options can include immediate evaluation or transport to local community-based crisis services. The county was able to support the project partly because of previous success using traditional co-responder models and community-based crisis services.

The county has released an implementation guide that provides a comprehensive look at all stages of the program—from pilot to evaluation—including an overview of the initial evaluation results.

The Rhode Island Department of Corrections has found success at Intercept Three (jails/courts) by becoming the first state system to offer all three forms of Medication Assisted Treatment (MAT) to all individuals in its correctional system. MAT programs have become very popular because of their immediate and marked success at reducing overdose deaths and at helping individuals with substance use disorders prepare for successful reentry following incarceration. After the implementation of the program in Rhode Island, the number of recently incarcerated individuals who died from an overdose decreased by over 60 percent.

Individuals benefit from MAT in secure correction environments because of the consistency of the treatment—their location and schedules are tightly controlled—and because treatment can be integrated into a reentry plan and maintained after release.

Addressing intervention at Intercept Five (community corrections), the Jefferson County (WV) Day Report Center (JDRC) provides an alternative to incarceration that provides treatment supervision to nonviolent, justice-involved individuals. West Virginia had been experiencing high rates of revocations of community supervision due to substance use-related violations. In 2014, Jefferson County opened the Center where a team of highly qualified medical and behavioral health professionals work with individuals to address treatment needs and provide wrap-around services that support reentry and recovery.

In 2018, the Center reported nearly 1,000 telehealth sessions and 4,500 patient encounters. It received an Innovation Now award from Addiction Policy Forum.

These are just a few of the examples included in NCJA’s 2021 publication, The Sequential Intercept Model: Building Blocks for Strategic Planning and Stakeholder Engagement. The guide explains how and why state and local systems can employ SIM to guide justice strategies.

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