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# BETTER TOGETHER

When Social Workers and Police Join Forces for a Stronger Community



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# NELSON WHITNEY

Chief of Police, Falls Township

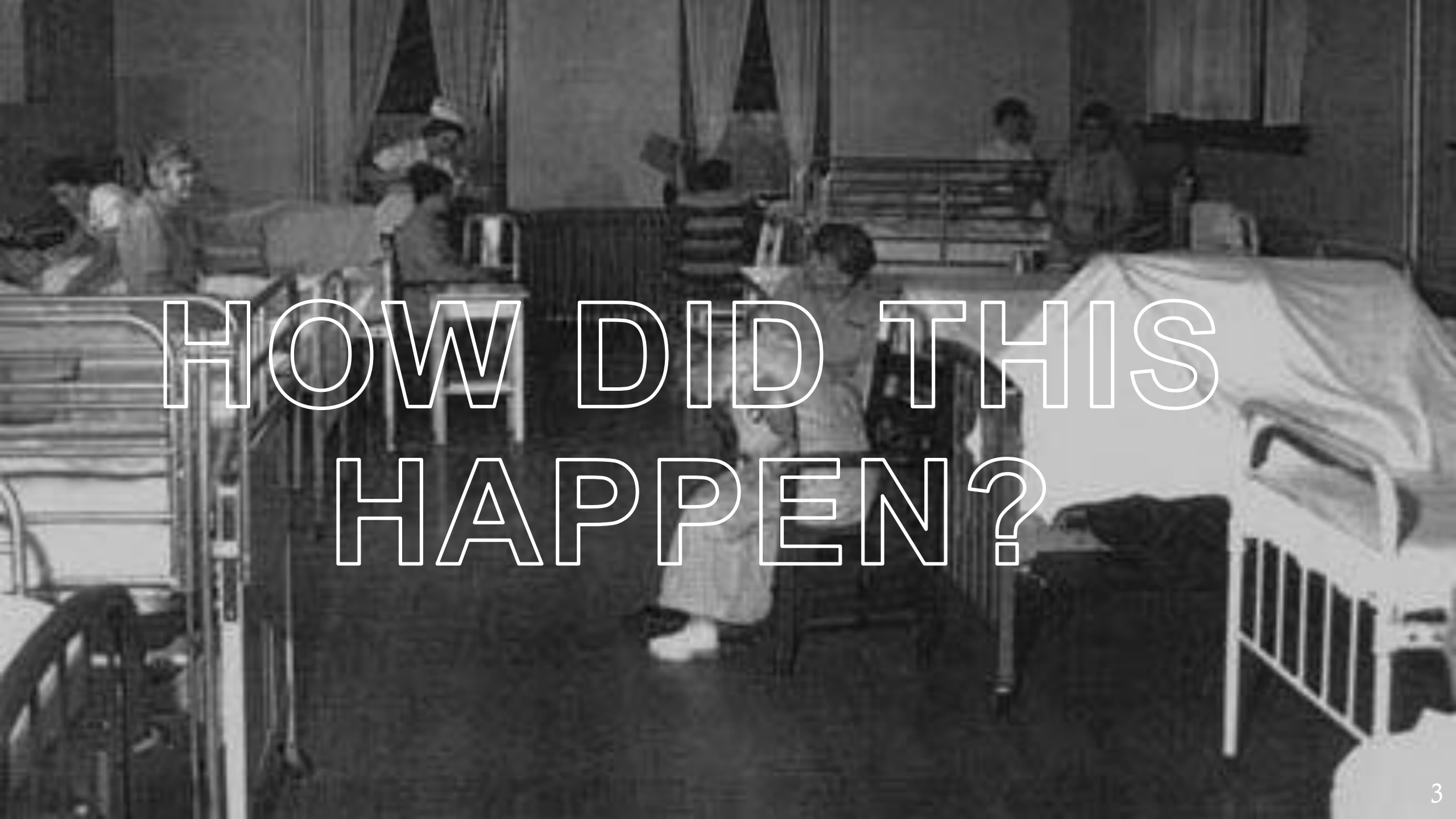
# IVONE KOVALSKY

Community Engagement Officer

# CARA GADZINSKI

Human Service Co-Responder





# HOW DID THIS HAPPEN?



# BEDLAM 1946

**MOST U.S. MENTAL HOSPITALS  
ARE A SHAME AND A DISGRACE**

by **ALBERT Q. MAISEL**

By Philadelphia's magazine Commissioner of Philadelphia's Commission on Mental Health, a landmark, unimpaired mental "hospital" leaves a legacy. "There is no more and it is a landmark and appropriate to the name of the 'Hospital' and not only that but the present day 'Hospital' and not just the 'Hospital'.

The public mental health system is well in the hands of other people to mental institutions to provide mental health to the public. The present system is not unique. Present public mental health institutions are providing care and help for patients for the past and present of the country and to experience this time from the present to the future.

And not only that but the present system is being to provide for the future to the present. The public mental health system is being to provide for the future to the present. The public mental health system is being to provide for the future to the present. The public mental health system is being to provide for the future to the present.

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ment to get the best of the best. This—and it is an excellent example—would be the building for the future as well as the present. The present system is being to provide for the future to the present.

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The author of this article, through his previous writings and his activities before a congressional committee, helped to bring national attention to the National Mental Health Association's mental health program.

A black and white photograph of President John F. Kennedy sitting in a large leather chair at a desk in the Oval Office. He is wearing a dark suit, white shirt, and dark tie, and is focused on signing a document with a pen. The desk is cluttered with papers and a rotary telephone. In the background, an American flag is visible, and a person's hand holding a camera is partially seen on the right side of the frame. The lighting is dramatic, highlighting the president's face and the desk.

**The Mental Health Act  
of 1963 was the last  
legislation signed by  
President Kennedy  
prior to his  
assassination.**



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# IMPACT

- 1960 – 339 beds per 100,000 people
- Over 550,000 beds nationwide in state hospitals
- 2020 – 11.7 beds per 100,000 people
- Around 37,000 beds nationwide in state hospitals

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**WE ARE THE  
SOLUTION!**



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# WHO ARE WE?

- The Bucks County Co-Responder Program was implemented to effectively address situations involving mental health crises, substance use, and other social services needs by pairing law enforcement officers with behavioral health professionals.
- This approach allows for a more nuanced response by diverting individuals away from the criminal justice system and connecting them with appropriate social services.
- Instead of arrests, the program works to improve outcomes for people in crisis and reducing strain on law enforcement agencies.

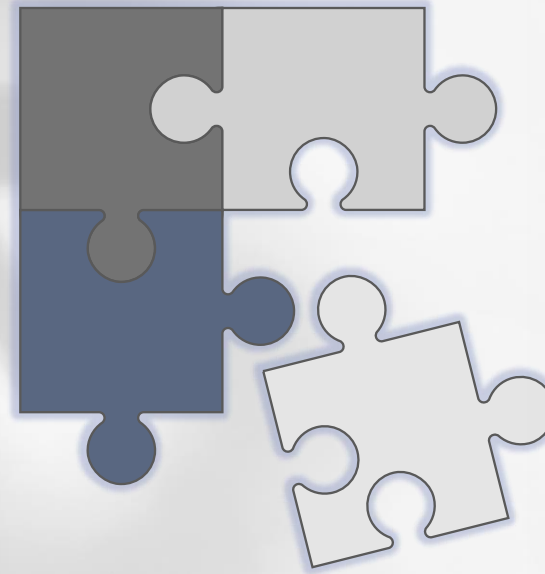




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# HOW WE STARTED

In 2020, many Bucks County Departments and organizations came together to discuss program importance and the urgency in creating a program to respond to support the community and law enforcement to avoid tragedies and mental health situations that were exacerbated by the pandemic. So, in November 2020, the county partnered with Bensalem police department to take on the first co-responder program.



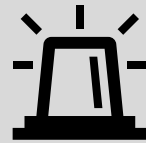
- ✓ The Bucks County Commissioners
- ✓ Human Services
- ✓ Department of Behavioral Health & Developmental Programs
- ✓ Bucks County Drug and Alcohol Commission, Inc.
- ✓ Children and Youth
- ✓ Area Agency on Aging
- ✓ The DA's Office
- ✓ Juvenile Probation and Parole
- ✓ Public Defenders Office
- ✓ Emergency Services
- ✓ Bensalem Police Department
- ✓ NAACP
- ✓ Holy Family University
- ✓ MH Providers

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# PROGRAM OBJECTIVES



Decrease the time law enforcement spends in response to a situation involving mental health, substance disorder, or any other social service needs



Provide a more effective emergency response through the addition of clinical-informed support, de-escalation, and an enhanced community resource knowledge base



Ensure those who outreach for an emergency response receive timely and streamlined connection to the appropriate resources



Divert individuals with primary social service needs from further penetration into the criminal justice system



Provides many community benefits and cost savings

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# REFERRALS



Referrals to the Co-Responder program are received in real time from the 911 call center or given by the assigned designee (Chief, Sergeant, Lieutenant, or secretary) the next workday if occurred overnight. The decision to request support from the Co-Responder remains with the officer at the scene.

The safety of the situation should be stabilized before the Co-Responder is called to enter the scene.

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# TYPES OF REFERRALS

Suicidal thoughts without attempt

Strange or bizarre behavior

Persons with known mental illness disconnected from services

Family and domestic violence

Child and adolescent issues without criminality

Questionable need for Adult or Child Protective Services

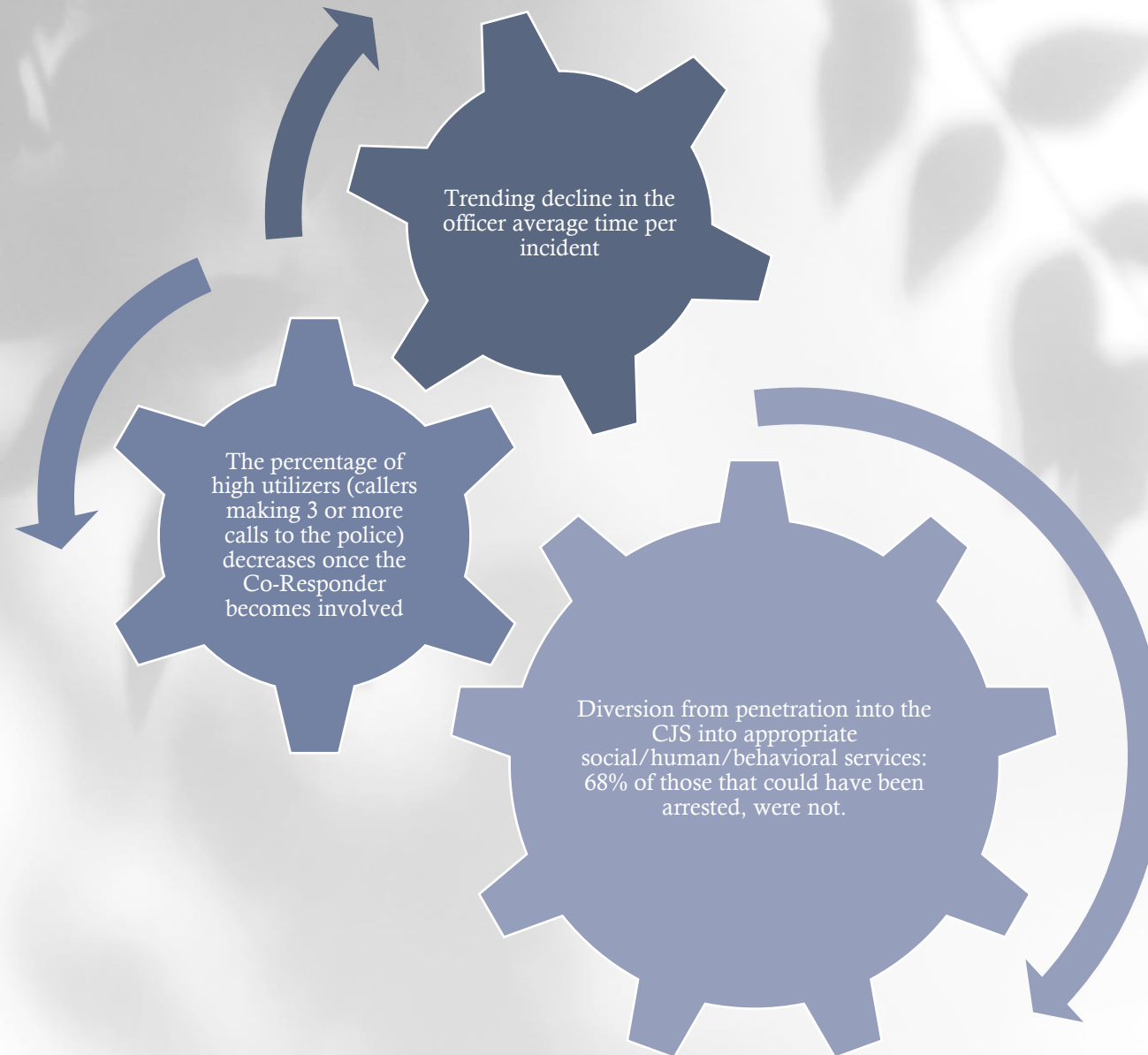
Repeat calls who request attention unrelated to legal issues

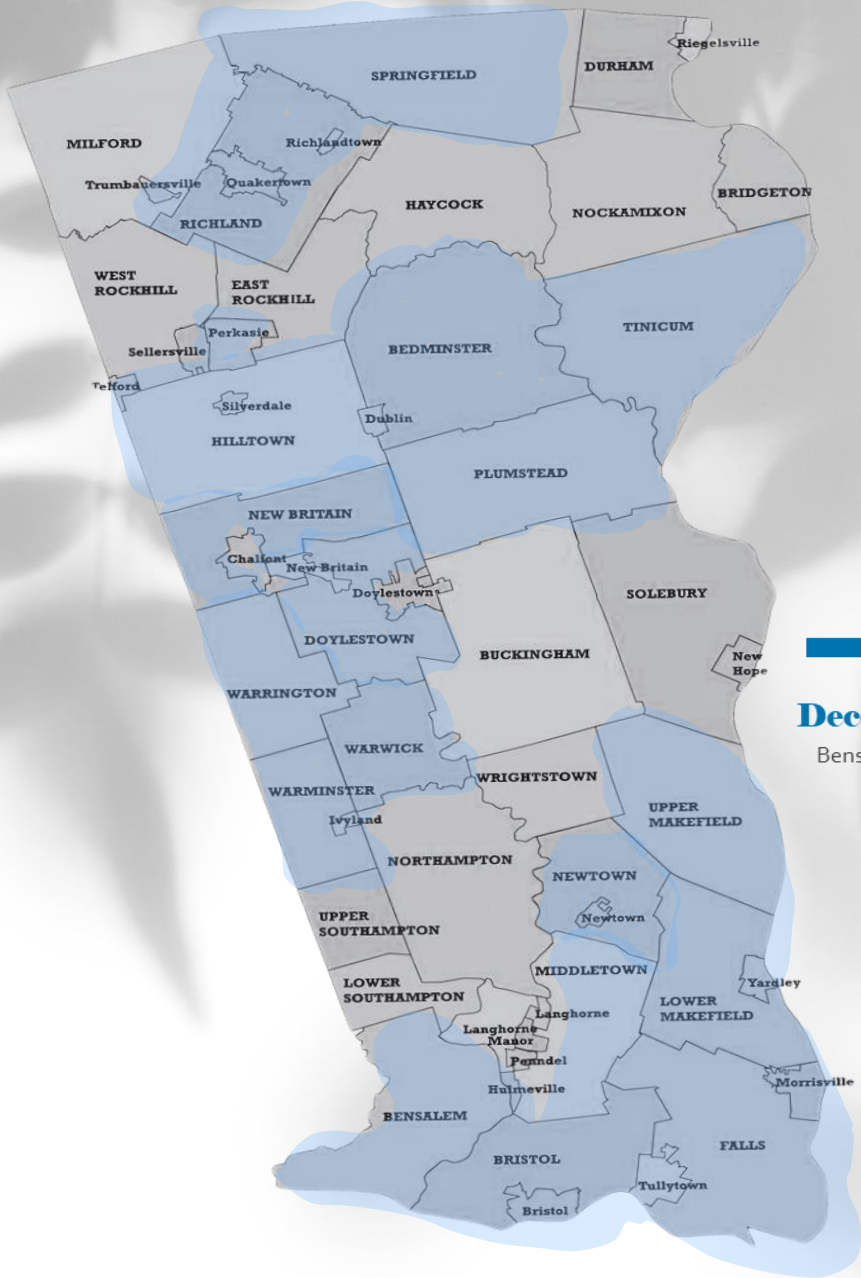
Families and victims of traumatic events

Geriatric issues with unknown need for service

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# OUTCOMES





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# CASE STUDY

A dive into a complex case to highlight the following perspectives:

- ✓ Both police and human service professionals have strengths that, when combined, bring better outcomes to those we serve
  - ✓ Addressing the complex needs of our community requires compassion and persistence
  - ✓ Inspiration to innovate within your municipalities
- 



1

May 21, 2022

## Aggravated Assault

Charges approved for Aggravated Assault, Strangulation, Reckless Endangerment of Another Person (REAP), Simple Assault, and Harassment

Fled scene, turned himself in on warrant

Released ROR with bail term of no contact with victim







2

September 15, 2022

## Mental Subject

Resident called 911 requesting to go to crisis

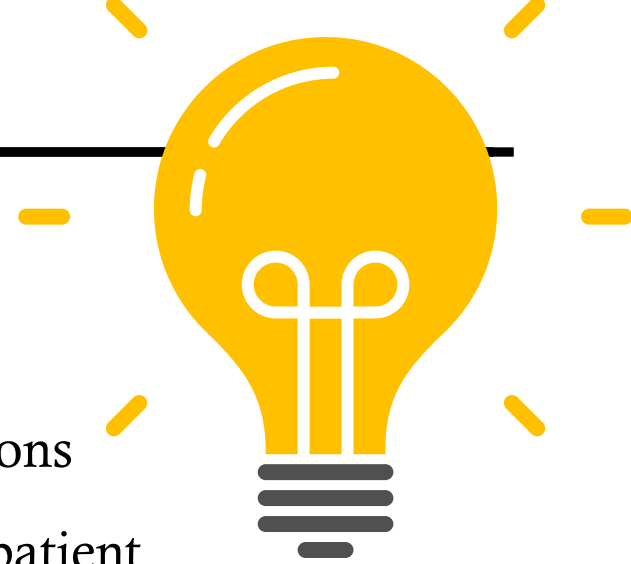
Referral to Co-Responder and first interaction with  
the family

Father allowed to return home after son found  
living in poor conditions

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## WHAT WE LEARNED

- Struggled with mental health since the age of 13
- Mother HIV positive and had several kidney transplants
- Brother was killed by a train as an adolescent
- No contact order between father and son
- Multiple hospitalizations
- Inconsistent with outpatient appointments and medication
- Past diagnoses of Bipolar Disorder and Schizophrenia
- Client has been on countless medications, but none seem to work



3

September 21, 2022

## Preliminary Hearing

A continuance was requested to allow Co-Responder more time to assess and work with client and family

Bail condition changed to no ADVERSE contact

Referral made to the Forensic Response Team,  
Lenape Valley Foundation



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"I'M WILLING TO WORK WITH YOU...  
BUT I HOPE THE NEXT CALL ISN'T FOR A **HOMICIDE**

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**BEHAVIOR CHANGE**

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A photograph of a courtroom. The walls are covered in dark wood paneling. In the foreground, there are two rows of blue upholstered chairs with white stitching, positioned behind wooden desks. The lighting is even, and the scene is empty.

4

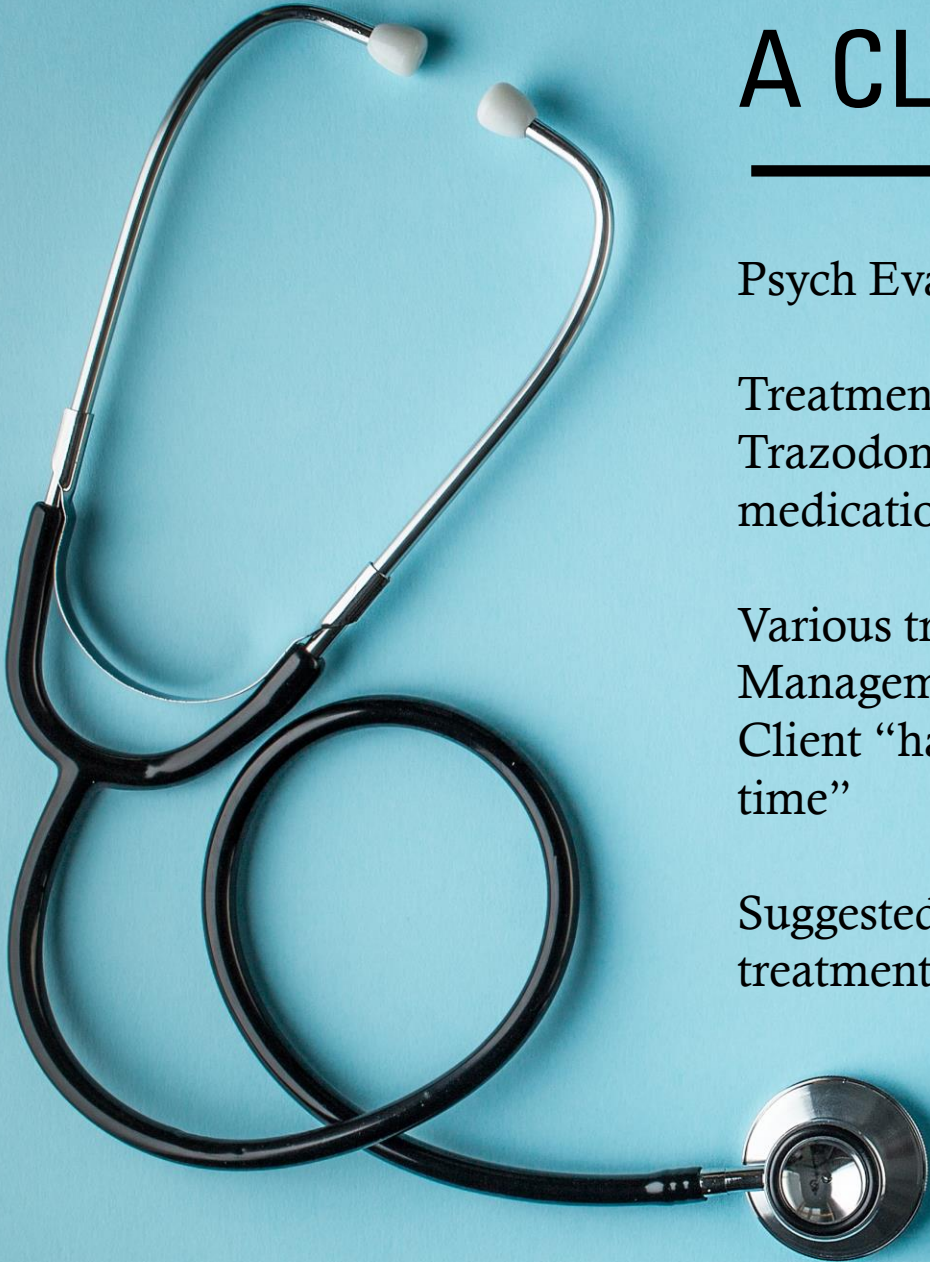
October 25, 2022

## Preliminary Hearing (Pt. 2)

Continued again until December 6<sup>th</sup>

ADA expressed concerns about the possibility of re-offending without appropriate supports

Discussed reduction of charges if compliant with MH treatment



# A CLINICAL PERSPECTIVE

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Psych Eval completed November 2022 with diagnosis of Schizophrenia

Treatment recommendation to start on Abilify and continue with Trazodone but client expressed unwillingness to take psychiatric medication

Various treatment options discussed with client (PHP, Case Management) but would require stabilization on medication  
Client “has many goals but no realistic way of achieving them at this time”

Suggested to take a slow approach as to not overwhelm with too many treatment recommendations

# BACK TO THE DRAWING BOARD

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- Explored residential treatment options but not meeting criteria
- Individual has the right to refuse medication and/or treatment
- Continued engagement and support between Co-Responder and FRT
- Discussed the importance of MH treatment and stabilization
- Client improved consistency with outpatient appointments
- Follow-up psychiatry appointment on 12/6





5

December 6, 2022

## Preliminary Hearing

Update letter sent to judge by FRT

Compliance with outpatient at this time

Felony charges reduced to misdemeanor (Simple Assault)

Formal Arraignment January 6, 2023



The image features a dark background with a large yellow arrow pointing to the right. The arrow is filled with a fine, diagonal hatching pattern. On the left side, there are two horizontal bands of a repeating geometric pattern consisting of interlocking triangles and squares, some filled with a similar hatching pattern. The text 'FAST FORWARD' is written in a white, outlined, sans-serif font, positioned to the right of the yellow arrow.

# FAST FORWARD

1

March 6, 2024

## Disturbance

Client shows up at local school banging on doors and talking about someone winning a lottery ticket

Gone on arrival but officer responded to family home

Acknowledges MH challenges and not engaging in outpatient services



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## WHAT'S NEXT?

- Active probation
- Reporting outpatient services but not attending
- Coordination between PD, CR, and PO
- Emergency meeting scheduled with client at probation office
- Client sweating, lost significant weight
- Rapid speech and wide eyes
- Agreed to voluntary crisis evaluation with self transport
- Client did not complete evaluation
- Level of Care Assessment

2

March 15, 2024

302

Petition collaboration between co-responder and officer

Assistance from mobile crisis team after conducting level of care assessment

Transported to hospital for treatment

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# RECOVERY

- While client receiving inpatient treatment, mother passes away
- Father receiving treatment for kidney cancer
- Client discharged in time to attend mother's funeral services
- After-care visit
- Referred for case management
- Monthly injection of Invega
- Sustainability of outpatient and medication
- Obtained employment

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## 21 FTPD CONTACTS 2001-2024



2009 – repeated domestics w/Dad. Being thrown out of house. Intox.



2011 – Domestic related burglary. Stereo equipment



2012 – Feeling paranoid. Using benzos. No sleep in 5 days. LBH.



2015 – Passenger in hit and run crash.

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# PRIOR CONTACTS

2020 – “Mental Subject” call for 1<sup>st</sup> time.

At JBH. Considered hanging himself.

2021 – Dad looking to get PFA.

2022 – Strangulation assault on Dad.

2024 – Banging on door of PHS East. 302.

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My name is [REDACTED] I am a lifelong resident of Bucks County. I currently reside in Fairless Hills with my 35-year-old son [REDACTED]

[REDACTED] has a diagnosis of bipolar disorder. With medication [REDACTED] can live a stabler and more fulfilling life. Without medication he is unable to maintain a job. He struggles with impaired social or personal relationships. Unfortunately, a little over a year ago while off his medication Leonard Jr. experienced a dramatic episode which involved a police action. This was my first meeting with Cara Gadzinski, Human Services Co-Responder for the Falls Township Police Department. She became an advocate for both my son and me helping us to wade through the paperwork to get my son into treatment. She has been professional and caring throughout our ordeal.

I cannot speak highly enough of the splendid work that Cara has done for us. I also want to commend the Falls Township Police Department for recognizing and fulfilling this need in the community.

I am happy to report that [REDACTED] is making positive progress in his lifelong struggle with his diagnosis and is currently on his way towards a full recovery.

If I can be of further assistance, please feel free to contact me.

Sincerely

[REDACTED] Sr.

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CO-RESPONSE DOESN'T ALWAYS HAVE TO BE **COMPLICATED.**

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- Sheraton Hotel, Langhorne
- 82 year old man
- Car towed, no cell phone
- Virgin Islands
- Friendship of a lifetime



During this trying situation, however, I feel that (co-responder) went above and beyond her duties and her time in getting back to me with a solution within an hour after our initial discussion, in following up with the arraignment process, and in returning to the victim's house to reassure her and her family and provide needed information to keep her safe.



No matter what, know that each one of you is a difference maker in this world and so well placed as a Co-Responder. You never arrived at this work by accident.



Cara has really been there for my family for the past few years. She has referred us to several different programs in our area that help families with many resources. She has made calls to agencies on our behalf as well. There are so many organizations that I would not have known about if it wasn't for her help. Cara is always pleasant and very empathetic. My family doesn't just look at her as a social worker, ***we consider her a friend.***



(Co-Responder) is presented with some challenging situations, and it clear she handles all situations with professionalism, compassion, and a willingness to provide thorough support in some of the darkest times to families and individuals.



Great, helpful, courteous



He called me right after your e mail.  
He was at my house within 30 minutes.  
He was extremely helpful And Knowledgeable, I knew he was sincere.  
I have a rescue dog ,I had this dog 2yrs ,the dog don't like ANY PEOPLE, I'm sure for good reasons.

The dog stood next to Marlon the whole time Marlon was here, he must of felt positive vibes.  
Chief I definitely appreciate y'all.

I called mental health providers for two weeks and couldn't get past switch board, u had some one at my house to assist in half hour.

Thanks.

Shout out to Marlon!



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# THANK YOU!



## CONTACT US

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