

Forensic Assertive Community Treatment (FACT)

A Service Delivery Model for Individuals With Serious Mental Illness Involved
With the Criminal Justice System

FACT OVERVIEW

Forensic assertive community treatment (FACT) is a service delivery model intended for individuals with serious mental illness (SMI) who are involved with the criminal justice system. These individuals may have co-occurring substance use and physical health disorders. Their needs are often complex, and their disorders are often under-managed and further complicated by varying degrees of involvement with the criminal justice system. FACT builds on the evidence-based assertive community treatment (ACT) model by making adaptations based on criminal justice issues—in particular, **addressing criminogenic risks and needs**. In this sense, FACT is an intervention that bridges the behavioral health and criminal justice systems.

FACT is designed to do the following: improve clients' mental health outcomes and daily functioning; reduce recidivism by addressing criminogenic risks and needs;¹ divert individuals in need of treatment away from the criminal justice system; manage costs by reducing reoccurring arrest, incarceration, and hospitalization; and increase public safety.

Like ACT, FACT provides services that are **client-focused, community-based, time-unlimited, and delivered by a multidisciplinary team**. These services include intensive, continuous engagement. While FACT adds forensic components, providers should always ensure fidelity to the ACT model.² For more information and resources related to ACT and fidelity tools, see SAMHSA's [ACT Evidence-Based Practices Kit](#).³

The following forensic components distinguish FACT from ACT:⁴

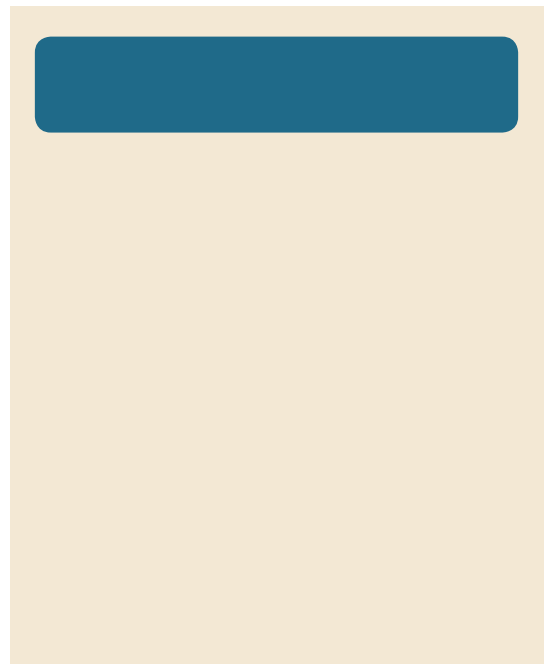
- Addressing criminogenic risk and needs as part of the treatment plan, including the use of evidence-based cognitive behavioral therapies shown to reduce recidivism
- Having a criminal justice partner and a peer specialist with lived criminal justice experience on the treatment team

KEY COMPONENTS OF FACT

1. Forensic services that address criminogenic risks and needs
2. Client eligibility based on a set of well-defined criteria, including multiple incarcerations
- 3.

- Serving clients with SMI who have prior arrests and incarcerations
- Leveraging sanctions and incentives imposed by the criminal justice agencies providing supervision, when appropriate

- **Behavioral Health:** Well-being promoted by preventing or intervening in mental illnesses or substance use disorders
- **Serious Mental Illness (SMI):** Mental, behavioral, or emotional disorder that seriously impairs functioning and interferes with one or more major life activities
- **Law Enforcement:** Individuals and agencies responsible for criminal justice supervision and enforcement of OHJDO VDQFWLRQV H J SROLFH VKHULIIV VKHULIIV GHSXWLHV SURE
- **Community Corrections:** Programs that oversee individuals released from jail or prison who are placed



community supervision, incarcerated and pending imminent release, or recently released from incarceration or a forensic hospital setting. They may also have a **history of non-compliance** with valid court orders and criminal justice mandates.

:KDW DUH)\$&7 FOLHQWV¶ QHHGV"

Criminal justice-involved individuals with SMI and co-occurring substance use and physical health disorders have **complex needs** that call for coordination and the sharing of information and resources across criminal justice and mental health systems, as well as human services and housing.

Like ACT clients, individuals appropriate for FACT may have frequent contacts with emergency services and have a **history of non-compliance** with valid court orders and criminal justice mandates.

Individuals appropriate for FACT often have histories of chronic homelessness and may have **substandard housing** or **beat risk of homelessness**. They may struggle with activities of daily living. Due to their current or recent involvement with the criminal justice system, individuals appropriate for FACT may need to navigate contacts with law enforcement, repeated jail admissions, and **community corrections**.

SERVICES THAT MAY BE DELIVERED BY FACT TEAMS

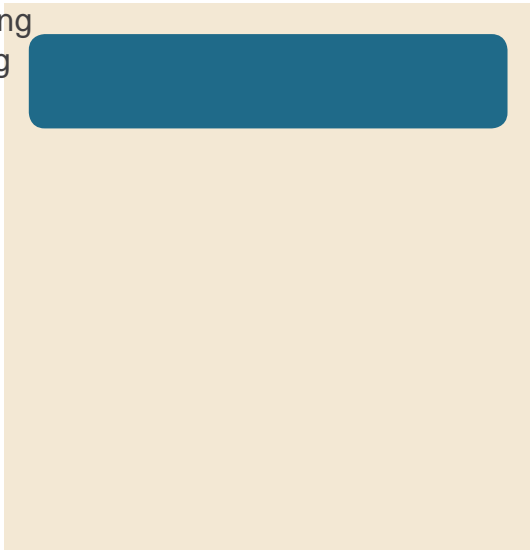
- Cognitive behavioral interventions and skill development that address criminogenic risk and need
- idmiss

:KDW VHUYLFHV GRHV)\$&7 SURYLGH LQ
DGGLWLRQ WR WUDGLWLRQDO \$&7 VHUYLFHV "

As with ACT, services should be **person-centered, trauma-informed, and deliverable as needed 24 hours a day, 7 days a week**. A FACT client's personal recovery advances the core criminal justice principles of individual accountability and public safety. FACT services can effectively address criminal justice court orders that include treatment, working collaboratively with criminal justice professionals in ensuring FRPSOLDQFH +RZHYHU ~~time is limited~~, VHUYLFHV DUH meaning engagement continues beyond an individual's criminal justice involvement.

+RZ DUH FOLHQWV UHIHUHG WR)\$&7 E\ WKH FUL
00500053004F004C0044005100430051004400450048004B0052048005700480055005600D</MCID 12

FACT provides an alternative to traditional case processing at multiple points in the criminal justice system, offering



+ R Z G R) \$ & 7 W H D P P H P E H U V Z R U N Z L W K F U L P L Q D

FACT teams should work with criminal justice professionals to establish roles, clarify expectations, and coordinate decision making from the outset. FACT team members should understand what client actions would warrant arrest or jail, what levels of relapse will be tolerated, and how to leverage the power of the court and criminal justice system to support, motivate, and maintain client engagement.

All team members should be **cross-trained in behavioral health, criminogenic risk, and the criminal justice system** in order to build a cohesive team and coordinate service delivery. Team members should offer their criminal justice partners this same cross-training in mental and substance use disorders and the behavioral health system.

In addition to all the capabilities needed for ACT, FACT teams should be trained in the following areas to prepare them for serving clients with criminal justice involvement:

- Screening for criminogenic risk and needs
- Providing trauma-responsive care for people who are justice involved
- Using cognitive behavioral approaches for addressing criminogenic needs
- Being conscious of cultural and implicit bias around criminal justice involvement
- 2 I I H U L Q J F R P P X Q L W \ U H V R X U F H Q D Y L J D W L R Q D Q G E H Q H ; W histories
- 8 Q G H U V W D Q G L Q J F R Q ; G H Q W L D O L W \ O D Z V J R Y H U Q L Q J L Q I health systems
- Attending to personal safety when working with clients who have a history of violence

: K D W N L Q G R I L Q V W L W X W L R Q D O V X S S R U W L V Q H F

Generally, FACT teams are housed in a licensed mental health treatment agency that has a formal partnership with criminal justice system professionals or agencies. **Information sharing between stakeholders** is critical and may be established through a formal agreement or, at minimum, with client consent. Agency and system leaders should collaboratively determine what, how, and with whom information about client H Q J D J H P H Q W D Q G R X W F R P H V Z L O O E H V K D U H G D Q G V W U X F W decisions.

Ideally, FACT teams have access to H [L E O H D Q G D G H t o a d d r e s s c l i e n t s n e e d s . A g e n c y and system leaders can work collaboratively with payer sources to ensure support for FACT. Potential S D U W Q H U V L Q F O X G H K R V S L W D O V S U L Y D W H L Q V X U D Q F H F R P managed care organizations, and criminal justice agencies, all of which stand to gain from FACT teams' successes.

