

DIVERSION ACTION PLAN 2010



A PARTNERSHIP BETWEEN CRIMINAL JUSTICE

AND



CONTENTS

INTRODUCTION 1

TASK FORCE MEMBERS 2

 Southern Task Force 2

 Northern Task Force 3

MISSION..... 4

System components 4

 Components of the Justice System..... 4

 Components of Community Healthcore..... 5

 Integration of systems 6

DELIVERABLES..... 6

 ADULT 6

 Jail Booking Process..... 7

 EARLY AND ONGOING IDENTIFICATION FOR PERSONS IN COUNTY JAIL..... 7

 Screenings for non-Crisis inmates at the county jail 7

 REQUESTs FOR JAIL DIVERSION 8

 TRAINING FOR FIELD DEPUTIES AND LOCAL LAW ENFORCEMENT 9

 JUVENILE..... 10

 Gregg County Juvenile Probation – Identification of Detainees with history of Mental illness 10

 Counseling services 10

 CRCG Meetings 10

 Anger Management..... 11

Appendix A Flow Chart for Jail Bookings 11

INTRODUCTION

Since FY04 there has been a cooperative plan between Gregg County and Community Healthcore. Each successive year this plan has been built upon to encompass new needs and refine existing activities as directed by the jail diversion task force. Gregg County was initially selected as it has the highest population of the nine-county catchment area. With a Jail Census of 500 and 25 to 40 bookings a day, it is by far the busiest jail in our area. Likewise the Juvenile Probation Office for Gregg County works with 600 adolescents annually.

This Plan then builds on prior years and works to promote a more effective system when persons with mental illness are arrested or placed into juvenile detention.

TASK FORCE MEMBERS

Community Healthcore wishes to thank the following persons for their willingness to have served on this ongoing project. Members are grouped into two geographic areas. The Southern Task Force includes Gregg, Harrison, Marion, Panola, Rusk and Upshur. The Northern Task Force includes Bowie, Cass, and Red River Counties. Some work is completed within smaller groups such as the county level.

Southern Task Force

- Judge Bill Stoudt, County Judge – Gregg County
- Rebecca Simpson, Judge – Gregg County Court at Law #1
- Sheriff Maxey Cerliano, Sheriff – Gregg County
- Mark Polk, Sheriff's office – Gregg County
- Rodney Burns, Sheriff's Office, Jail Captain – Gregg County
- Stephen L Clark, Sheriff's office, Jail Lieutenant – Gregg County

- Mike Dooley, Sheriff's Office – Gregg County
- Molly Lewis, Asst. Dist. Attorney – Gregg County
- Charles Homes, Advocate, Family Member, NAMI representative
- Clair Balliett, Advocacy Incorporated, Advocate
- Shelly Smith, Casework Supervisor, Juvenile Probation Dept – Gregg County
- Cindy Martindale, Juvenile Probation
- Paula Brown, National Alliance of the Mentally Ill
- Prudence Thrasher, Advocate, Consumer, & local NAMI Member
- Barry Holzbach, Jansen Pharmaceutical Representative
- Paula Hendrix, President, East Texas NAMI Chapter
- Inman White, Executive Director of Community Healthcore
- Rick Roberts, Director of Integrated Health Services (CHC)
- David Deel, Director of Crisis Services (CHC)
- Tom Tinsley, MH Outpatient and Children Services Program Director (CHC)
- Lee A. Brown, Contract Manager (CHC)

- Steve Archer, ACT (CHC)

NORTHERN TASK FORCE

- Judge James Carlow, County Judge – Bowie County
- Judge Morris Harville, County Judge – Red River County
- Jack Pappas, Adult Probation – Bowie County
- Mary Choate, Juvenile Probation – Bowie County
- Sherry Jones, Adult Probation, TCOOMMI – Bowie County
- Deborah Lann, Judge’s Office, Bowie County
- Sterling Corbett, Jail Administration – Cass County
- Val Varley, District Attorney’s Office – Red River County
- Randal Case, Sheriff’s Department – Red River County
- Larry Parker, Sheriff’s Department – Bowie County
- Errol Owen, District Attorney’s Office – Bowie County
- Shane Campbell, Bi-State Civigenics – Bowie County
- Richard Burton, Bi-State Civigenics – Bowie County
- Christopher Petrozzi, Bi-State Civigenics – Bowie County
- Inman White, Executive Director (CHC)
- Marilyn Wyman, Director of Operations (CHC)
- Rick Roberts, Director of Integrated Health Services (CHC)
- David Deel, Director of Crisis Services (CHC)
- Lee Brown, Director Contracts Management (CHC)
- Troy Johnson, Director of Information Services (CHC)

MISSION

Working together as a Community System:

- Keep People out of the Criminal Justice System who do not need to be there due to their mental health or co-occurring illness.
- Provide better coordinated services to persons in jail / detention.
- Provide linkage to services and supports upon release from incarceration.
- And to provide awareness and learning opportunities to assist with the care and treatment of persons with mental illness.

In part adopted from Dr. Stedman of the TAPA Center for Jail Diversion

SYSTEM COMPONENTS

COMPONENTS OF THE JUSTICE SYSTEM

- The Gregg County Jail. This facility houses a jail population up to 500 persons. With 20 to 40 bookings a day, it is estimated that 11,000 persons are booked into the County Jail per year. Using a national average of 15% for persons in jail who have a mental illness, it is estimated that 1,095 persons in the Gregg County jail have a mental illness.
- The Marvin A. Smith Regional Facility, Gladewater, TX has been updated and converted from a juvenile facility into an adult facility to help the county address a growing jail population. It is a 40 bed facility.
- The Gregg County Juvenile Probation Department. This unit of the justice system works with 200 adolescents at any one time. Annually they serve 600 adolescents. Of these it was estimated that 50% or 300 adolescents have mental health needs.
 - The Gregg County Juvenile Detention Center on Turk Street, Longview, TX is a short term facility where adolescents live until their disposition; usually occurs within 14 days.

- Information regarding Bowie County, the largest county in the northern region, will be gathered and added for future plans.

Pre-Booking Diversion – Ongoing interactions with key county and city officials and law enforcement has assumed a more assertive response approach envisioned to pattern after the CIT model developed by Harris County, the City of Houston and Harris County MHMR where QMHP-CS Crisis Intervention staff, local police and sheriff deputies are cross trained and assigned in special teams to respond to calls identified as potential mental health emergencies. While funding is currently not available to provide continuous teams as developed in Houston, coordination of Community Healthcore Mobile Crisis Teams with local police and sheriff deputies have greatly improved. Local law enforcement have received mental health crisis training and receive on-going training, and Community Healthcore has been invited to coordination opportunities such as participation in Police briefings as well as regular meetings with local Sheriff staff and mental health deputies. Such coordinated response helps to minimize involvement of local law enforcement in processing individuals experiencing acute psychiatric symptoms and avoid unnecessary booking while providing these individuals with more rapid mental health intervention and continuity of care.

Post-Booking Diversion – Ongoing discussions with county and local officials focus on continued improvement in coordination of CHC crisis staff with law enforcement and improved interaction with the legal process to more effectively meet the mental health needs of individuals charged with an offense relative to degree of that offense and degree of psychiatric need and impairment of the individual.

System Progress Evaluation – Efforts to develop and improve coordination of community mental health, law enforcement and legal systems have brought general positive feedback; however, the need for an objective evaluation methodology has been identified to ensure establishment and on-going improvement of efforts. An data matrix has been developed in cooperation with Christus St. Michael to objectify gains in a joint community mental health crisis response project. This matrix which draws from data collected by both organizations has shown specific gains in local emergency department admissions, lengths of stay, psychiatric inpatient diversion and fiscal efficiency. A similar matrix is being considered that combines data from the local jail and Community Healthcore to show similar gains.

COMPONENTS OF COMMUNITY HEALTHCORE

- **Crisis Services.** This is a 24 hour crisis response unit that will respond to crisis needs within a one hour response time (often in less time).
- **Outpatient Clinics for both Children and Adults.** Community Healthcore operates clinics in five of the six surrounding counties. All five of the clinics are open 5 days a week including evening hours and at least one day a week is visited by a Board Certified Child Psychiatrist.
- **Services to at Risk Youth (STAR).** Community Healthcore operates a STAR program that works with youth and their families in thirteen surrounding counties. It is a grant funded by the Texas Department of Family and Protective Services.
- **CORE Team.** The CORE Team is Community Healthcore's process that brings key components of Community Healthcore together to staff difficult cases.
- **Intensive Outpatient Services.** Intensive outpatient services have been enhanced and integrated with an expanded crisis intervention response system to provide an assertive community treatment team approach to aid in community retention, jail and hospital diversion, rapid stabilization and continuity of care. This includes psychiatric assessment, medication, psychosocial rehab and service coordination services with essential frequency to manage acute symptoms that otherwise might lead to legal offense, jail booking and/or inpatient psychiatric admissions.

INTEGRATION OF SYSTEMS

Crisis Screenings. If there is a need from the jail, juvenile probation or other justice component to screen and assess a person for possible inpatient hospitalization, a call is placed to the 24-hour 1-800-832-1009 making the request. Information from the caller is screened to determine if the person is at risk of injuring self or others. Cases that meet the criteria are referred on to the on-call crisis team member who will come to the location and make a determination if the person is a threat to self or others. (Note: transportation for crisis screenings is not an issue as Community Healthcore crisis staff travel to the individual whether in jail or detention.) In such cases when this occurs, and the Mental Health Deputy agrees, the person is transported to Rusk State Hospital or Terrell State Hospital for treatment.

DELIVERABLES

ADULT

JAIL BOOKING PROCESS

Flow charts of the booking process at the Gregg County jail assist all participants to better understand how the process works and identify potential opportunities for pre or post-booking jail diversion. It includes points of interaction between Community Healthcore staff and the process. Molly Lewis, Deputies, Kathryn Jones, Rick Douglas and Lee Brown combined to diagram this process. These are located in Appendix A.

EARLY AND ONGOING IDENTIFICATION FOR PERSONS IN COUNTY JAIL

Since February 2005 Gregg County Jail has sent Monday – Friday a listing of all persons who have been booked since the last submission. Through funding provided by TCOOMMI this information comes in an electronic format that is CARE batch ready. Community Healthcore staff upload this information and submit to CARE. The next working day, the results are emailed to the jail identifying persons who have received services in the past from within the Department of State Health Services or its contractors.

Since January 2006 Community Healthcore staff have faxed to the nurse at the local jail a list of any prescribed medications ordered by Community Healthcore psychiatrists if currently under their treatment. This information is sent in response to a request to improve continuity of care for persons currently receiving treatment by Community Healthcore.

Over the years Community Healthcore has worked with other county jails to facilitate the exchange of information and the early identification of persons with a history of receiving mental health services.

This process for all jails will change effective March 1, 2010 as local jails will have direct access to the needed information. Community Healthcore stands ready to assist and it can with this transition.

SCREENINGS FOR NON-CRISIS INMATES AT THE COUNTY JAIL

County jails contact David Deel, Crisis services, when there is a particular case that they would like to have screened. As already described above, Community Healthcore screens persons in the jail who appear to be a threat to themselves or others. The service described here is for cases that don't meet that definition but something seems to be going on and the Jail would like a consultative look. The results of the screening will be shared with the Jail. Some of the cases

may be referred to the Community Healthcore CORE team, where high profile / difficult cases are staffed. For example if a person is routinely going into jail for vagrancy as they are both mentally ill and homeless, the core team could explore if there are any services or supports that might meet this need.

This process is working well and continues.

REQUESTS FOR JAIL DIVERSION

DSHS Request. In the spring and summer of FY2005 TCOOMMI provided funding of a jail diversion project. Both Judge Stoudt and the County sheriffs commented that this was beneficial to the county and were disappointed when the funding ended. Community Healthcore applied in January 2006 for a very competitive grant sponsored by the Mental Health Program Services Unit of the Department of State Health Services. If funded Community Healthcore would receive \$79,000 to fund a Jail Diversion Case Manager, Psychiatrist time, and medications to support persons being diverted from the County Jail. Judge Stoudt stated that he would seek matching funds to expand this grant based upon the success of the grant in diverting persons out of the county jail last year. Unfortunately this grant was not funded.

Federal Bureau of Justice Grant. In late spring of FY2006, a grant was submitted to the Federal Bureau of Justice. The request was for \$50,000 for jail diversion. Unfortunately this grant was not funded.

Federal Bureau of Justice Grant. Gregg County has applied for a grant to support planning and jail diversion. The grant is for \$250,000 to cover 30 months. Community Healthcore will participate with Gregg County if the grant is funded.

TCOOMMI grant for Bowie County. Community Healthcore was approved for the TCOOMMI grant in Bowie County. We are currently working in the Texarkana area in cooperation with other justice agencies.

Gregg County Court at Law #1, Judge Rebecca Simpson. Judge Simpson reported on Friday, January 22, 2010 that Community Healthcore was doing a good job of identifying the mentally ill in jail; however, the problem remains as to what to do with them. She said there have been several "repeat offenders" booked into jail on misdemeanor charges and several that have been released from inpatient treatment that return to jail and need residential care. She said that

there have been a consistent number of individuals released from the state hospital determined to be incompetent and not expected to regain competence but having received max benefit from acute care. Though inappropriate for inpatient care the only other option in this area is non-therapeutic group homes, shelters, independent living, street or jail—none of which meets the need presented with low level of functioning. Judge Simpson said that this often presents a serious safety issue particularly during severe weather.

The need is for intermediate care for this population as a long range goal and the potential for a regional approach. For the immediate interim Community Healthcore talked about more aggressive jail diversion utilizing ACT/IST to help sustain individuals in a lesser level of care. While this will not address the more problematic cases, this will provide some relief in the interim.

An aggressive jail diversion will require closer coordination with key officials in the DA's office, Sheriff's office and jail, the county and district courts.

This will be pursued further in March 2010.

TRAINING FOR FIELD DEPUTIES AND LOCAL LAW ENFORCEMENT

May 24, 2006 task force members Paula Brown, Barry Holzbach, and Lee Brown provided the opportunity for persons to experience what a schizophrenic episode is like using technology. Jansen Pharmaceuticals made available a device that the user looks through that provided both visual and audio stimulation. This device helps the wearer to better understand what a schizophrenic episode is like from the patient's point of view. The demonstration and education was made available at the following locations:

- Community Healthcore – general public and staff
- Longview Police Department-Downtown Office– 2 shifts of officers
- Gregg County Sheriff Offices – 2 shifts of deputies and jail staff

By the end of the day over 60 persons had viewed the 3 minute episode. Supporting literature was also provided about mental illness.

The counties of Bowie, Cass, and Red River have expressed interest in obtaining further mental health training for their deputies. A regional resource has been identified and shared with those authorities.

Training was again provided through Paula Hendrix and Jansen Pharmaceuticals the week of October 12, 2009. Law Enforcement, Criminal Justice, and the public had opportunities in the Longview Area to experience an updated version of the machine. Current plans are underway to make it available to persons in the Texarkana area.

JUVENILE

GREGG COUNTY JUVENILE PROBATION – IDENTIFICATION OF DETAINEES WITH HISTORY OF MENTAL ILLNESS

In FY05 Shelly Smith, Casework Supervisor, Gregg County Juvenile Probation Department explored the availability of sharing information with Community Healthcore electronically for the purposes of identifying persons in detention who have a history of mental illness. This does not appear to be an avenue that is going to produce the hoped for results due to the interpretation of the law surrounding juveniles.

Shelly will pursue the sharing of information. Due to confidentiality laws she had doubts as to whether such information could be shared.

Shelly did say that they typically had good information from parents and school regarding any mental health issues.

This issue is still unresolved.

COUNSELING SERVICES

Last year the need for adolescents to receive counseling services was identified. Community Healthcore will be able to provide this service within the Resiliency and Disease Management (R&DM) model while available resources last. Shelly Smith shared this resource availability with juvenile probation caseworkers. Community Healthcore will be alert to referrals coming in from juvenile probation and work to see these adolescents.

Shelly Smith reported that the process appears slow in getting appointments to access the service. Rick Roberts will ask Tom Tinsley to establish a red flag system to help prioritize this population if possible. The flag system has been developed and is available to help expedite referrals upon request.

CRCG MEETINGS

Community Healthcore sends one or more representatives to the CRCG meeting. However, if Juvenile Probation has a special case and would like additional support at a CRCG meeting to staff this case, Tom Tinsley of SVC Children Services is to be contacted and he will arrange for additional staff to attend based upon the needs of the case.

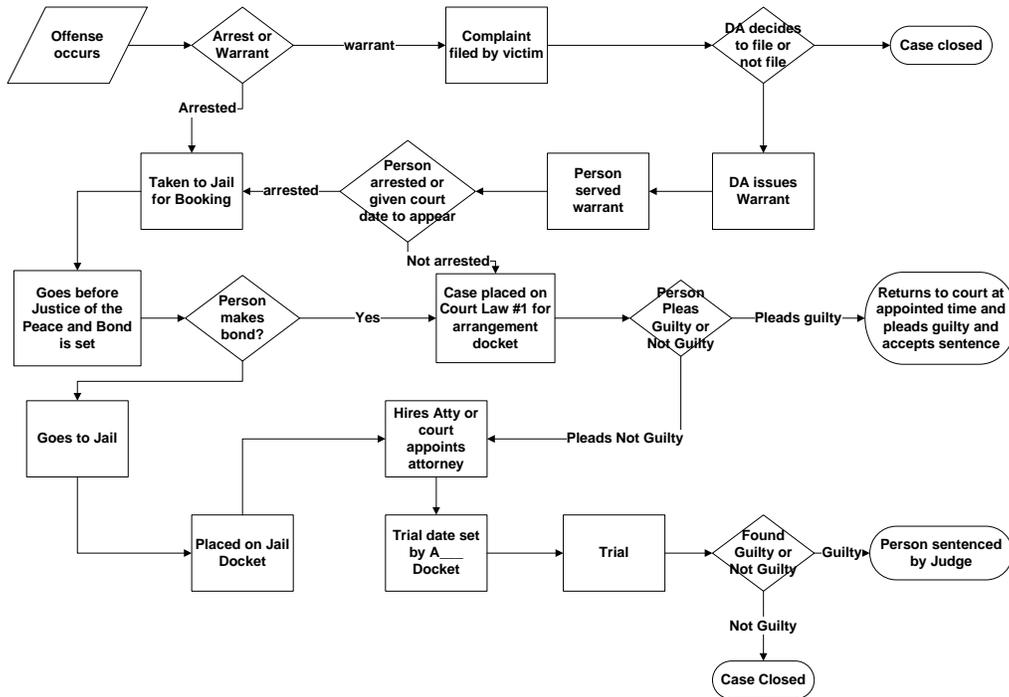
Cindy Martindale, stated that Community Healthcore has consistently been in attendance and there were no special needs cases this past year requiring additional staff.

ANGER MANAGEMENT

Through the reduction of funding, the Juvenile Probation Office is not able to directly provide anger management training as it has been able to in the past. The Juvenile Probation Office has worked with the STAR program to provide Anger Management through the STAR staff.

This continues to be a need.

Court Process for Arrests and Warrants



Jail Booking Process

