



**Justice Center**

THE COUNCIL OF STATE GOVERNMENTS

# **FY19 Justice & Mental Health Collaboration Program**

Category 1: Reducing the Number of People  
with Mental Illnesses in Jail

December 10, 2019

# Presentation Outline

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I. Introductions

II. Overview of the JMHCP Category 1 Grant Program

III. Grant Requirements and How We Can Help

IV. Hear from the Grantees

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# Welcome and Introductions

- **Jessica Yates**, *Business Analyst, Justice and Mental Health Collaboration Program, San Luis Obispo Sheriff's Office*
- **Maria Fryer**, *Justice System and Corrections Policy Advisor for Substance Abuse and Mental Health, Bureau of Justice Assistance, U.S. Department of Justice*
- **Marilyn Leake**, *Policy Analyst, Council of State Governments Justice Center*
- **Mark Stovell**, *Senior Policy Analyst, Council of State Governments Justice Center*
- **Risë Haneberg**, *Deputy Division Director, Council of State Governments Justice Center*
- **Sheila Tillman**, *Senior Policy Analyst, Council of State Governments Justice Center*

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# The U.S. Department of Justice Bureau of Justice Assistance

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**Mission:** BJA provides leadership and services in grant administration and criminal justice policy development to support local, state, and tribal law enforcement in achieving safer communities.

The logo for the Bureau of Justice Assistance (BJA) features the letters "BJA" in a large, bold, dark blue sans-serif font. A thin red horizontal line is positioned directly beneath the letters.

**Bureau of Justice Assistance  
U.S. Department of Justice**

[www.bja.gov](http://www.bja.gov)

# Justice and Mental Health Collaboration Program

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JMHCP supports innovative cross-system collaboration for individuals with mental illnesses or co-occurring mental health and substance use disorders who come into contact with the justice system.



# Category 1 Grantees

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## **Category 1: Collaborative County Approaches to Reducing the Prevalence of Individuals with Serious Mental Illnesses in Jail**

Category 1 supports counties as they go through collaborative planning and implementation phases in improving their comprehensive response to people with mental illness that come into contact with the justice system.

**For more information, please refer to General JMHCP  
Application/Solicitation Webinar**

**<https://csgjusticecenter.org/mental-health/webinars/responding-to-the-2017-justice-and-mental-health-collaboration-solicitation/>**



# The Council of State Governments Justice Center

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We are a national nonprofit, nonpartisan organization that combines the power of a membership association, representing state officials in all three branches of government, with policy and research expertise to develop strategies that increase public safety and strengthen communities.

# How We Work

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- We bring people together
- We drive the criminal justice field forward with original research
- We build momentum for policy change
- We provide expert assistance

# Our Goals

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## **Break the cycle of incarceration**

*We assist those working inside and outside of government to reduce both crime and incarceration among youth and adults in contact with the justice system.*

## **Improve health, opportunity, and equity**

*We work across systems to develop collaborative approaches to improve behavioral health, expand economic mobility, and advance racial equity for people and communities affected by the justice system.*

## **Expand what works to improve safety**

*We help leaders understand what works to improve public safety and what does not, and assist them to develop strategies, adopt new approaches and align resources accordingly.*

# THE STEPPINGUP INITIATIVE

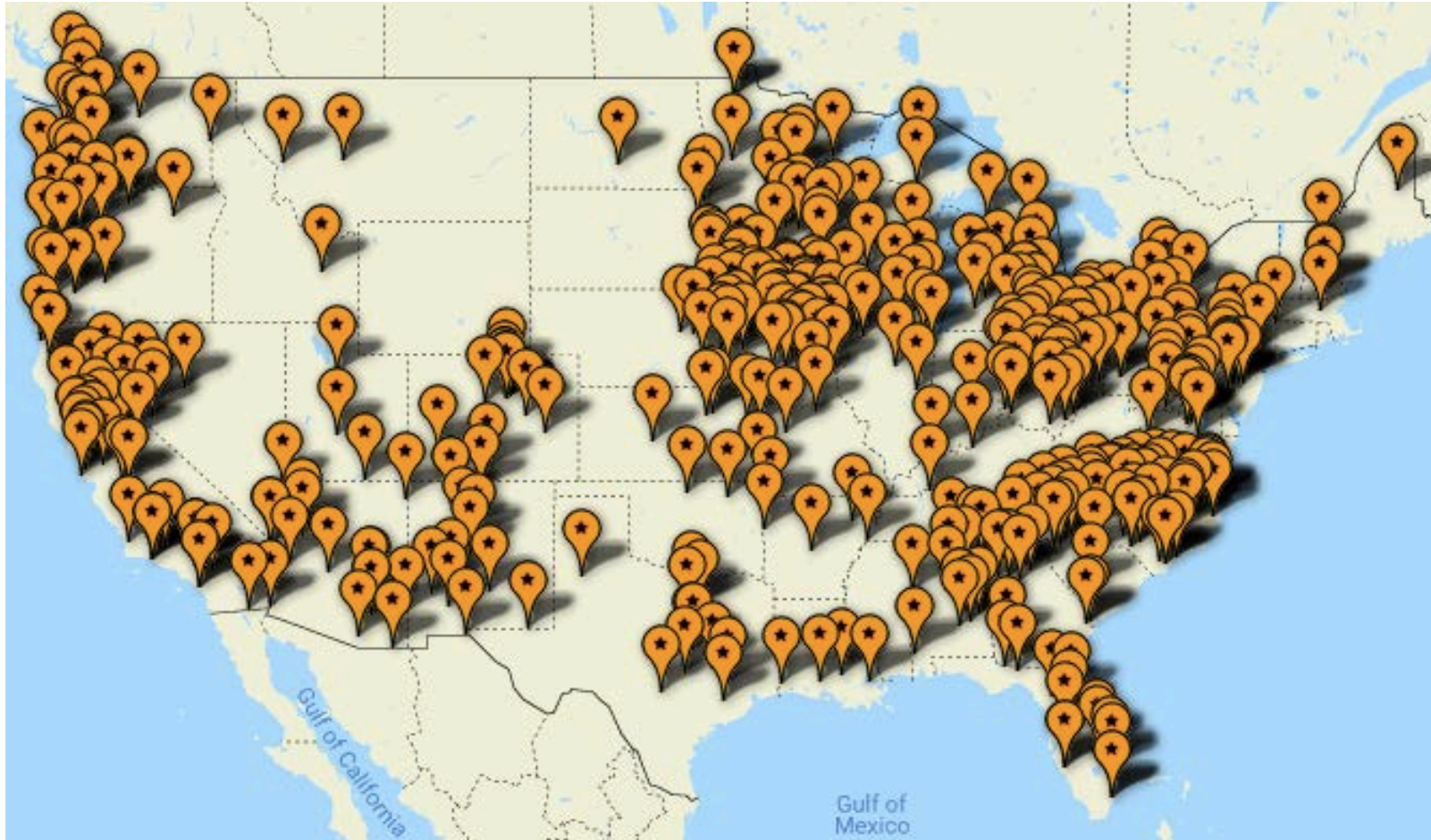
## A National Initiative to Reduce the Number of People who have Mental Illnesses in Jails



*GOAL: There will be fewer people who have mental illnesses in our jails tomorrow than there are today*

*"Stepping Up is a movement and not a moment in time"*

THE  
**STEPPINGUP**  
I N I T I A T I V E



Since May 2015, **500+** counties across **43** states have passed resolutions

# Category 1 JMHCP Counties



## FY19 Category 1 Sites

Bureau County, IL	Chatham County, GA	Fort Bend County, TX	Forsyth County, GA	Lucas County, OH	Indianapolis, IN	Mendocino County, CA	Pickens County, SC	36 <sup>th</sup> District, MI	Waukesha County, WI
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# Grantee Orientation Process

- ✓ JMHCP General Orientation Webinars
  - Part 1- November 5<sup>th</sup>
  - Part 2- November 12<sup>th</sup>
- ✓ Orientation Call
  - Scheduled with your CSG Justice Center TA provider in December 2019
- ✓ Category 1 Specific Orientation Webinar
  - **Today! Tuesday December 10th**

## Next Up:

- Grants Financial Management Online Training (within 120 days of acceptance)
- Review 2019 P&I Guide



# Grant Expectations

## Engage in a Collaborative Planning Process with County Leadership

- Targeted analysis of baseline data
- Review of existing community resources
- Identification and initial implementation of policy and practice changes

# Grant Expectations

## Demonstrate a Commitment to a Systems-Level Reduction in the Prevalence of MI in Jail

- A county system analysis
- Screening and assessment in the jail
  - Clinical
  - Risk
- Effective data management and information sharing
- Shared definitions and language across BH and CJ systems

# Grant Expectations

## Establish a Planning Team

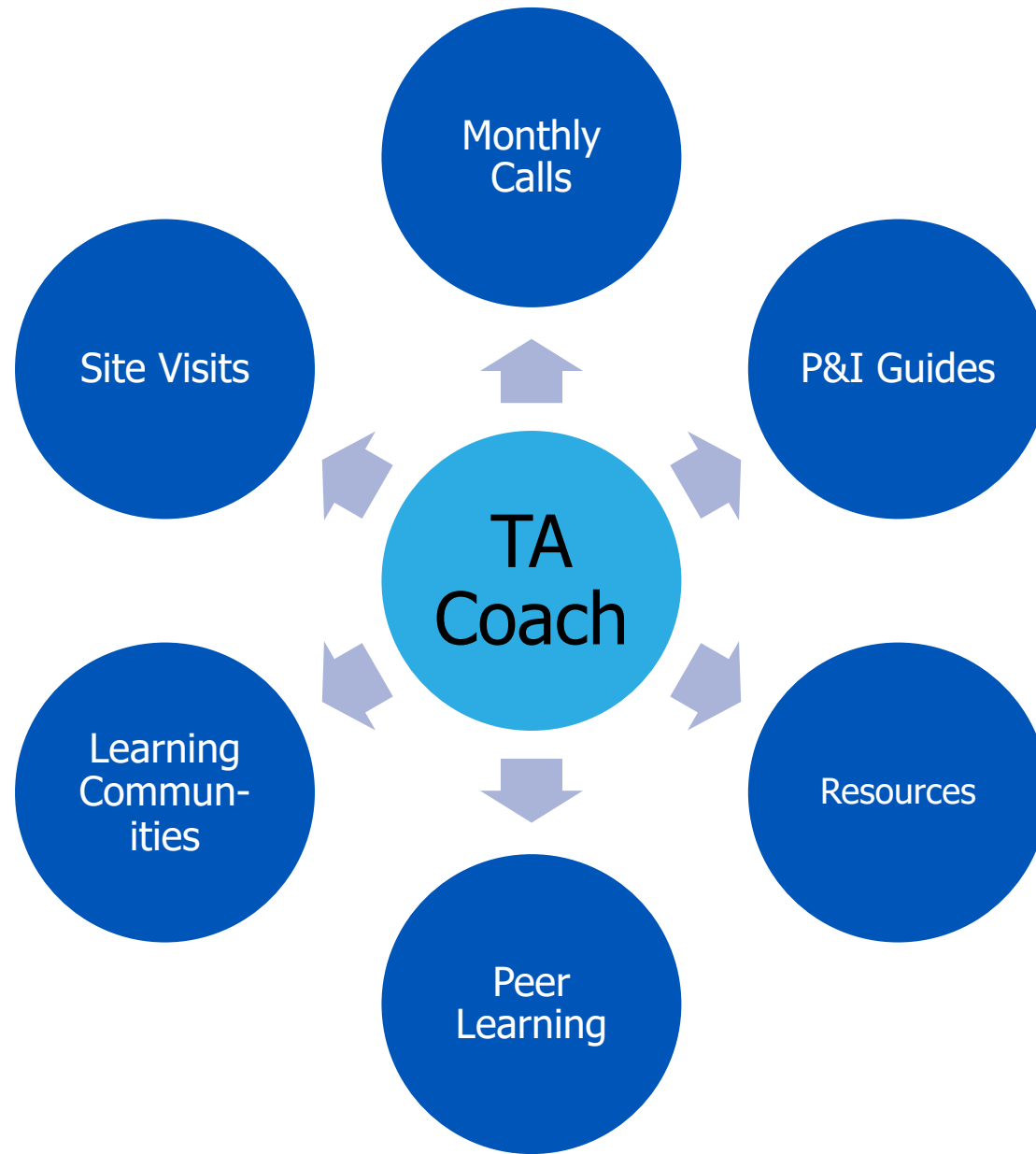
All grantees must establish a team (or utilize a pre-existing team) of county leaders, stakeholders, and decision makers from multiple agencies to engage in the planning process.

# Grant Expectations

## Work with CSG Justice Center to Receive Technical Assistance

Your designated JMHCP Technical Assistance Lead will provide and coordinate support in several areas, including:

- Completion of the P&I Guide
- Identifying measures and strategies to track progress
- Content and facilitation support
- Sharing successes with stakeholders, the field, and the press



# Other Requirements and Special Conditions

## Complete and submit the Planning and Implementation Guide

- Grantees will receive intensive technical assistance and will have access to up to \$100,000 of the total grant award in order to complete and submit a required Planning and Implementation Guide. Program budget approval and coordination with a technical assistance coordinator is required to complete and submit a Planning and Implementation Guide.

## Two Phases to the Grant:

- Planning- 8 months
- Implementation

## PMT Reporting

# Planning and Implementation Guide

## Planning & Implementation Guide

Justice and Mental Health Collaboration Program  
Category 1: Collaborative County Approaches to Reducing the Prevalence of  
Individuals with Mental Disorders in Jail

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### DESCRIPTION

This Planning & Implementation Guide is intended for recipients of Justice and Mental Health Collaboration Program (JMHC) grants administered by the U.S. Department of Justice's Bureau of Justice Assistance. JMHC grantees will complete this guide in partnership with a technical assistance provider from The Council of State Governments Justice Center.

The Council of State Governments Justice Center prepared this guide with support from the U.S. Department of Justice's Bureau of Justice Assistance (BJA). The contents of this document do not necessarily reflect the official position or policies of the U.S. Department of Justice.

**A grant requirement, but also a useful tool for planning purposes**

# How Is the P&I Guide Used?

- Provides exercises that guide the county on how to develop a plan to reduce the number of people with mental illnesses in jail
- Identify things grantees are doing well
- Provide guidance on challenges or areas the grantee is working on
- Helps the TA provider target assistance
- Aids the grantee in focusing on areas of need
- Creates opportunities for peer to peer learning
- Enables ideas and best practices to be exchanged



JANUARY 2017

## Reducing the Number of People with Mental Illnesses in Jail

### Six Questions County Leaders Need to Ask

Risë Haneberg, Dr. Tony Fabelo, Dr. Fred Osher, and Michael Thompson

#### Introduction

Not long ago the observation that the Los Angeles County jail serves more people with mental illnesses than any single mental health facility in the United States elicited gasps among elected officials. Today, most county leaders are quick to point out that the large number of people with mental illnesses in their jails is nothing short of a public health crisis, and doing something about it is a top priority.

Over the past decade, police, judges, corrections administrators, public defenders, prosecutors, community-based service providers, and advocates have mobilized to better respond to people with mental illnesses. Most large urban counties, and many smaller counties, have created specialized police response programs, established programs to divert people with mental illnesses charged with low-level crimes from the justice system, launched specialized courts to meet the unique needs of defendants with mental illnesses, and embedded mental health professionals in the jail to improve the likelihood that people with mental illnesses are connected to community-based services.

Despite these tremendous efforts, the problem persists. By some measures, it is more acute today than it was ten years ago, as counties report a greater number of people with mental illnesses in local jails than ever before.<sup>1</sup> Why?

After reviewing a growing body of research about the characteristics of people with mental illnesses who are in contact with local criminal justice systems; analyzing millions of individual arrest, jail, and behavioral health records in a cross-section of counties across the United States; examining initiatives designed to improve outcomes for this population; and meeting with countless people who work in local justice and behavioral health systems, as well as people with mental illnesses and their families, the authors of this brief offer four reasons why efforts to date have not had the impact counties are desperate to see:

**There are insufficient data to identify the target population and to inform efforts to develop a system-wide response.** New initiatives are frequently designed and launched after considerable discussion but without sufficient local data. Data that establish a baseline in a jurisdiction—such as the number of people with mental illnesses currently booked into jail and their length of stay once incarcerated, their connection to treatment, and their rate of recarrest—inform a plan's design and maximize its impact. Furthermore, eligibility criteria are frequently established for diversion programs without the data that would show how many people actually meet these criteria. As a result, county leaders subsequently find themselves disappointed by the impact of their initiative. Counties that recognize the importance of using this data to plan their effort often find the data they need do not exist. It is rare to find a county that effectively and systematically collects information about the mental health and substance use treatment needs of each person booked into the jail, and records this information so it can be analyzed at a system level.

**Program design and implementation is not evidence based.** Research that is emerging on the subject of people with mental illnesses in the justice system demonstrates that it is not just a person's untreated mental illness but also co-occurring substance use disorders and criminogenic risk factors that contribute to his or her involvement in the justice system. Programs that treat only a person's mental illness and/or substance use disorder but do not address other factors that contribute to the likelihood of a person reoffending are unlikely to have much of an impact. Further, intensive supervision and limited treatment resources are often not targeted to the people who will benefit most from them, and community-based behavioral health care providers are rarely familiar with (or skilled in delivering) the approaches that need to be integrated into their treatment models to reduce the likelihood of someone reoffending.

1

Is our leadership committed?

2

Do we conduct timely screening and assessments?

3

Do we have baseline data?

4

Have we conducted a comprehensive process analysis & inventory of services?

5

Have we prioritized policy, practice, and funding improvements?

6

Do we track progress?

# THE STEPPINGUP INITIATIVE

Systems-Level, Data-Driven Changes Should Focus on **Four Key Measures**



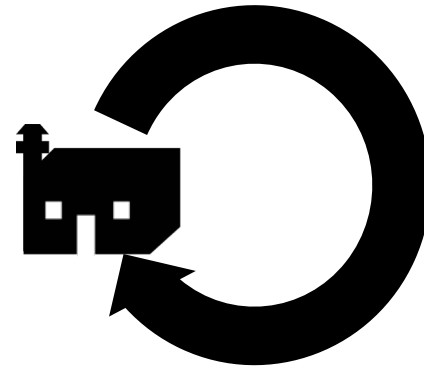
**1. Reduce** the number of people who have mental illnesses booked into jails



**2. Shorten** the length of stay in jails for people who have mental illnesses



**3. Increase** connection to treatment for people who have mental illnesses



**4. Reduce** recidivism rates for people who have mental illnesses

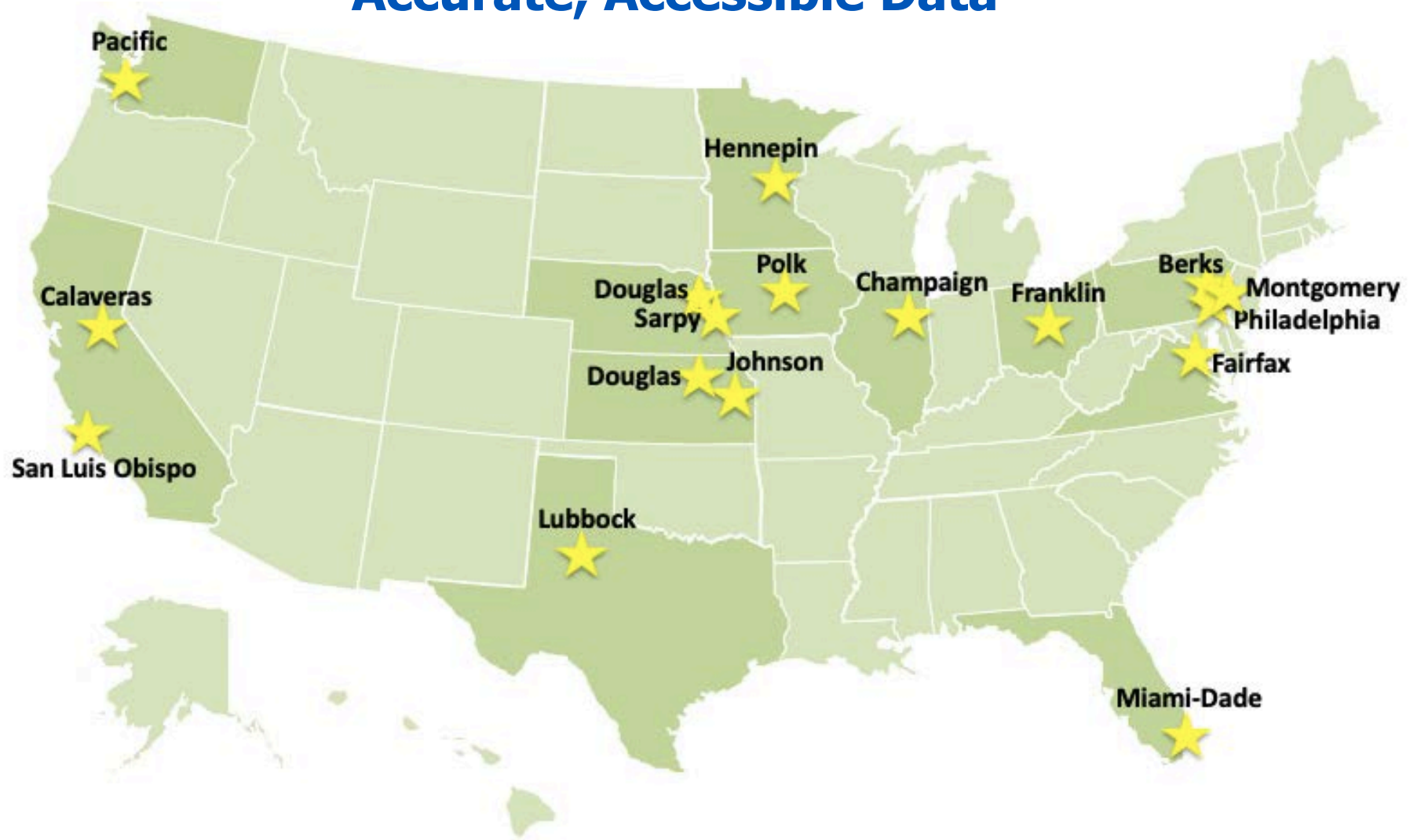
# Goal: Every County Has Accurate, Accessible Data

Having accurate and timely data is critical for counties to know the *scale of the problem*, develop a strategic action plan that effectively targets scarce resources, and tracks progress

## Recommended approach for accurately identifying people who have SMI in jail:

1. Establish a **shared definition of SMI for your Stepping Up efforts** that is used throughout local criminal justice and behavioral health systems
2. Use a validated **mental health screening** tool on every person booked into the jail and refer people who screen positive for symptoms of SMI to a follow-up **clinical assessment** by a licensed mental health professional
3. **Record** clinical assessment results and regularly **report** on this population

# 17 Stepping Up Innovator Counties Recognized for Having Accurate, Accessible Data



# Additional Guides to Implement the Six Questions Framework

## Project Coordinator's Handbook

## Online County Self-Assessment

## Series of Briefs

### Reducing the Number of People with Mental Illnesses in Jail: Six Questions County Leaders Need to Ask The Project Coordinator's Handbook

#### Choosing a *Stepping Up* Project Coordinator

Determining who will serve as the project coordinator is the first step for a jurisdiction in the *Stepping Up* planning process. A criminal justice coordinator can fill this role, if that position already exists. If not, the county can contract for these services, or the county planning team can designate someone to serve in this role—such as a staff member from the jail, behavioral health care provider, or community supervision agency—in addition to that person's regular duties. The person selected should have knowledge of the local criminal justice and behavioral health systems, have excellent facilitation and organizational skills, and demonstrate the ability to proactively drive the planning process to ensure progress.

This handbook is designed to complement the [Reducing the Number of People with Mental Illnesses in Jail: Six Questions County Leaders Need to Ask](#) (Six Questions) framework as a step-by-step facilitation guide for project coordinators. For each of the framework's six questions, this handbook provides:

- A summary of the question and its related objectives for the planning team;
- Facilitation tips to assist the project coordinator in managing the planning process; and
- Facilitation exercises designed to achieve objectives and establish an efficient process for capturing the work of the planning team.

#### The Role of the Project Coordinator

Your role as the project coordinator is critical to the success of your county's *Stepping Up* efforts. It is the project coordinator who ensures that key leaders are engaged, manages meeting agendas and minutes, coordinates subcommittee work, provides research and data to guide the decision-making process, and continuously motivates the planning team.

This handbook is designed to help you manage your county's planning process. It will guide and systematize the flow of your work as you develop meeting agendas and decide how best to utilize members of the planning team. Other members of the planning team may benefit from having access to this handbook, especially those who are providing facilitation support, such as leading subcommittee work. You are not required to fill out or submit this handbook to the *Stepping Up* partners.

Additional complementary training materials are available through the [Stepping Up Toolkit](#), including webinars, briefs that provide information and guidance for applying the Six Questions, and other [resources](#).

**THE STEPPING UP INITIATIVE**

Welcome

The Stepping Up County Self-Assessment is designed to assist counties participating in the Stepping Up initiative or other counties interested in evaluating the status of their current efforts to reduce the prevalence of people with mental illnesses in jails and in determining their needs for training and technical assistance to advance their work.

[Create Your Account](#)

Sign In

E-Mail Address

Password Forgot Your Password?

Login

**TAKE ASSESSMENT**

Intro Question 1 Question 2 Question 3 Question 4 Question 5 Question 6 **Results**

Here are Your Results  
North Slope, AK

Overall  
You: 45%  
Others: 42%  
Total Steps: 60  
Total Participant Counties: 31

1. Is our leadership committed?  
You: 100%  
Others: 50%  
Total Steps: 6  
[Helpful Resources >](#)  
[Update Answers >](#)

2. Do we conduct timely screening and assessments?  
You: 98%  
Others: 41%  
Total Steps: 12  
[Helpful Resources >](#)  
[Update Answers >](#)

3. Do we have baseline data?  
You: 48%  
Others: 41%  
Total Steps: 22  
[Helpful Resources >](#)  
[Update Answers >](#)

4. Have we conducted a comprehensive process analysis and inventory of services?  
You: 42%  
Others: 38%  
Total Steps: 4  
[Helpful Resources >](#)  
[Update Answers >](#)

5. Have we prioritized policy, practice, and funding improvements?  
You: 27%  
Others: 41%  
Total Steps: 9  
[Helpful Resources >](#)  
[Update Answers >](#)

6. Do we track progress?  
You: 61%  
Others: 43%  
Total Steps: 7  
[Helpful Resources >](#)  
[Update Answers >](#)

See where other counties stand in implementation progress



### IN FOCUS IMPLEMENTING MENTAL HEALTH SCREENING AND ASSESSMENT

This brief focuses on implementing a mental health screening and assessment process, specifically to identify the number of people booked into jails who have serious mental illnesses (SMI). While implementing this process may also identify people who have less serious mental illnesses and other behavioral health needs who may require treatment while in jail, this brief is focused on identifying the people who have SMI because this population tends to represent the greatest draw on scarce behavioral health and social service resources.<sup>1</sup> Determining the prevalence of people who have SMI in jails will allow counties to develop or refine a strategic plan that will have the greatest impact on addressing this population's needs.

#### WHY IT'S IMPORTANT

To reduce the number of people who have SMI in jails, counties need to have a clear and accurate understanding of the size of the population that has SMI. Prior to being booked into jail, some people who have SMI may never have been diagnosed and may be unaware of their mental illness, while others may have been diagnosed with a mental illness and received but discontinued treatment. Screening and assessment are essential to identifying who should be connected or reconnected to services and treatment to address their behavioral health needs, which may also decrease the likelihood that they return to jail. Having this information will make counties better able to determine the treatment resources required to address this population's behavioral health needs. Moreover, having the ability to accurately and consistently identify the number of people who have SMI will help counties to track progress toward their goals.

#### WHY IT'S CHALLENGING

Implementing a screening and assessment process can be difficult, especially for counties that do not already have the staff, tools, and procedures in place to systematically conduct these activities. Jails are fast-paced environments; with many people being released in less than 48 hours, there is little time to complete screenings and assessments.

1. This brief does not include detailed information about additional screenings and assessments for suicide, substance addiction, and criminogenic risk, which are also beneficial to complete at the time of booking into jail to best match people with other services they need. For additional information on targeting resources based on behavioral health needs and criminogenic risk factors, refer to *Adults with Behavioral Health Needs Under Correctional Supervision: A Shared Framework for Reducing Recidivism and Promoting Recovery*.

*Stepping Up* is a national initiative to reduce the number of people who have mental illnesses in jails. Counties that have joined *Stepping Up* are using the initiative's framework document, [Reducing the Number of People with Mental Illnesses in Jail: Six Questions County Leaders Need to Ask](#) (Six Questions), to guide them in creating collaborative partnerships in their jurisdictions, systematically identifying people who have mental illnesses in their jails, and using data to inform systems-level changes and strategic plans to track progress over time. This brief is one of a series of companion products designed to provide counties with further guidance on how to apply the Six Questions framework. For key resources related to *Stepping Up*, including case studies, webinars, and network calls, visit the [Stepping Up Toolkit](#).

# Stepping Up Resources Toolkit: Webinars, Case Studies, and More!

Quarterly Network Calls for Rural, Urban, and Mid-Size Stepping Up Counties

The Stepping Up Resources Toolkit provides key resources intended to assist counties with developing and implementing a systems-level, data-driven plan that can lead to measurable reductions in the number of people with mental illnesses in local jails.

*Reducing the Number of People with Mental Illnesses in Jail: Six Questions County Leaders Need to Ask* serves as a blueprint for counties to assess their existing efforts to reduce the number of people with mental illnesses in jail by considering specific questions and progress-tracking measures. The report also informs the Stepping Up technical assistance that will be offered moving forward.

Register for upcoming Webinars

Register for upcoming Network Calls

View the Report [PDF]

**Reducing the Number of People with Mental Illnesses in Jail**  
Six Questions County Leaders Need to Ask

Introduction

January 2017

County leaders across the country are experiencing the same challenges. Over the past several decades, administrators, public defenders, prosecutors, community-based service providers and advocates have mobilized to better respond to people experiencing mental health crisis. Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails was launched in May 2015 to provide counties with the resources to further address this issue.

In January 2017, Stepping Up released *Reducing the Number of People with Mental Illnesses in Jail: Six Questions County Leaders Need to Ask* (Six Questions), a report intended to help county leaders determine to what extent their county's efforts will have a system-level impact that not only results in fewer people with mental illnesses in jail but also does so in a way that increases public safety, applies resources most effectively and puts more people on a path to recovery.

[stepuptogether.org/toolkit](http://stepuptogether.org/toolkit)

THE STEPPING UP INITIATIVE

## Six Questions Case Studies

THE STEPPING UP INITIATIVE

### County Elected Officials' Guide to Talking to the Media and the Public About People with Mental Illnesses in their Jail

THE STEPPING UP INITIATIVE

### County Elected Officials' Guide to the Six Questions County Leaders Need to Ask

An estimated two million annual jail admissions involve people with serious mental illnesses. Over the past decade, county leaders, police, judges, corrections administrators, public defenders, prosecutors, community-based service providers and advocates have mobilized to better respond to people experiencing mental health crisis. Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails was launched in May 2015 to provide counties with the resources to further address this issue.

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# Stepping Up Strategy Lab

An interactive library of **over 65 programs, policies, and practices**

Features **over 100 examples** from **40 counties**


**Updated every 6 months** to reflect progress and changes in the field

## STEPPING UP STRATEGY LAB

Enter your search parameters below to search our database of resources and view details about each matching one. If you do not see an intervention in the database that has been implemented in your county and you believe it should be included, please let us know by [submitting a suggestion](#).

### Filters

#### SEARCH IN RESULTS

#### TYPES


- Policy & Practice
- Program

#### MEASURES

- 1 - Reduce bookings into jail
- 2 - Reduce length of stay
- 3 - Increase connection to treatment
- 4 - Reduce recidivism
- N/A

#### CATEGORIES

- Behavioral Health Services
- Court
- Crisis Services
- Housing
- Jail
- Law Enforcement
- Pretrial
- Project Coordination
- Reentry

Reset Search 

Export Results 

### Interventions

68 results found

« 1 2 ... 7 »

Title	Type	Measures	Categories
<b>Arrest warrants reviewed by mental health provider</b>	Policy & Practice	2 - Reduce length of stay 3 - Increase connection to treatment	Behavioral Health Services Court Jail Pretrial
The jail allows their mental health provider to see arrest warrants, which the provider scans for people that receive or have received services from their agency. Once identified, the provider can follow up to see if diversion options are available for the person, assist them through the criminal justice process, and ensure the provider's involvement in further disposition.			
<b>Behavioral health assessment informs in-custody care</b>	Policy & Practice	3 - Increase connection to treatment	Jail
The jail uses the results of a behavioral health assessment to inform a person's treatment and services while incarcerated.			
<b>Case management team</b>	Program	1 - Reduce bookings into jail 3 - Increase connection to treatment	Behavioral Health Services Law Enforcement
Law enforcement officers work with behavioral health professionals and pretrial and probation officers to develop specific solutions to reduce the likelihood someone will have repeat interactions with law enforcement. This approach--which often includes outreach and follow up--aims to keep people connected to mental health and community services and following their treatment plans.			

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# Meet the 2019 Grantees!

Tell us a little bit about yourself...

- ❖ Who you are
- ❖ Your jurisdiction
- ❖ Quick (2-3 minute) overview of your grant project

# Category 1 JMHCP Counties



## FY19 Category 1 Sites

Bureau County, IL	Chatham County, GA	Fort Bend County, TX	Forsyth County, GA	Lucas County, OH	Indianapolis, IN	Mendocino County, CA	Pickens County, SC	36 <sup>th</sup> District, MI	Waukesha County, WI
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For more information, please contact:

Risë Haneberg, Deputy Division Director, CSG Justice Center - [rhaneberg@csg.org](mailto:rhaneberg@csg.org)

*The presentation was developed by members of The Council of State Governments Justice Center staff. The statements made reflect the views of the authors, and should not be considered the official position of The Council of State Governments Justice Center, the members of The Council of State Governments, or the funding agency supporting the work.*