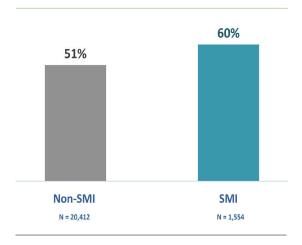
FRANKLIN COUNTY, OHIO: A County Justice and Behavioral Health Systems Improvement Project

BACKGROUND

- In October 2013, the leadership of Franklin County's justice and behavioral health systems wrote to the Council of State Governments (CSG) Justice Center about the challenges the county faced regarding the large numbers of people with mental illnesses cycling in and out of jail. County leaders asked the CSG Justice Center to conduct comprehensive data analysis and policy development to identify long-term system improvements and data-driven strategies for responding to people with mental illnesses in the county jail and other service facilities.
- The year-long project was overseen by the Franklin County
 Criminal Justice Planning Board, whose project work group
 included County Commissioner Marilyn Brown; representatives of
 the Columbus Mayor's Office and the City Council, the Columbus
 City Attorney's office, the Franklin County Prosecutor's Office, and
 the Sheriff's Office; the Franklin County Public Defender; judges
 and administrators of the Municipal and Common Pleas Courts;
 the Columbus Police Department; the Municipal Court and Adult
 Probation Services; the Department of Homeland Security and
 Justice Programs; the Alcohol, Drug, and Mental Health Board;
 the Community Shelter Board; the Community-Based Corrections
 Facility; and other community leaders.

Figure 1. Percentage of People with Behavioral Health Disorders Rebooked into Franklin County Jail within Three Years of Release*



*Analysis of 2010 Franklin County jail bookings

SMI identified using match to behavioral health service utilization data

■ Over the course of the project, the CSG Justice Center reviewed extensive raw data, drawing on information systems maintained by the Franklin County Jail, the Community Shelter Board, and treatment providers funded by the local Alcohol, Drug, and Mental Health (ADAMH) Board, and conducted more than 50 in-person interviews with local and state leaders. Based on the findings of this analysis and with the guidance of the members of the work group and senior county officials and stakeholders, the CSG Justice Center identified four core challenges and a set of strategic policy recommendations to improve outcomes for people with mental illnesses who are involved with the local criminal justice system.

SUMMARY OF CORE CHALLENGES

- More than half of all adults entering jail returned within three years of release. People booked into county jail returned to jail frequently—56 percent of people charged with felonies returned within three years of release, while 49 percent of people charged with misdemeanors were reincarcerated.
- Information on risk and needs is not systematically collected and used to inform decision making. The actual prevalence of people with mental illnesses in the Franklin County Jail is unknown, due to a lack of systematic screening, assessment, and electronic data management at the time of jail booking.
- People with behavioral health disorders stay longer in jail and return more frequently than those without behavioral health disorders. People identified as having serious mental illnesses (SMI) who were booked into county jail had an average length of stay of 32 days, while people without an SMI had an average length of stay of 20 days. People with an SMI return to jail within three years at a higher rate (60 percent) than those without an SMI (51 percent).
- Many people with behavioral health disorders who are released from jail are not connected to the treatment and supports they need in the community. Over one-third of people identified as having an SMI and over two-thirds of those identified with an alcohol or substance use disorder did not receive treatment in the year following their release from jail.





RECOMMENDATIONS

- Develop community-based behavioral health resources that can be accessed directly by people with behavioral health needs in order to reduce crisis calls for service to law enforcement.
- Ensure that law enforcement's response to people with mental illnesses promotes the safety of all involved, facilitates timely and efficient connection to community-based behavioral health care services, and allows law enforcement to divert people in crisis away from the criminal justice system when appropriate. Increase the number of Franklin County Sheriff's Office (FCSO) and Columbus Police Department officers who have completed Crisis Intervention Team (CIT) training. Improve officers' understanding of available community-based resources and provide clearer guidance about how to access crisis services such as NETCARE. Develop data tracking for cases involving CIT-trained officers. Expand the capacity of NETCARE and other 24/7 crisis intervention programs, including hospital emergency services, to eliminate the need for law enforcement to transport people to the county jail when other interventions are appropriate.
- Use the results of a validated pretrial risk assessment to inform decisions about pretrial release and detention.

 Conduct an assessment of a defendant's risk of failure to appear in court and/or risk of reoffending prior to his or her first appearance in court to inform the court's first release or detention decision. Charge the judges of the Common Pleas and Municipal Courts with leading the design of a process that ensures timely and effective pretrial decision making. Establish pretrial services for the municipal court.
- Use the results of behavioral health screenings and assessments to inform decisions about jail population management and the delivery of behavioral health care services. Conduct behavioral health screening at the time of booking. Charge the FCSO with developing a process that includes universal screening for behavioral health disorders for all jail admissions and timely mental health and substance use assessments for people who screen positive for these disorders.

- Use risk and behavioral health information to develop comprehensive community-based supervision plans. Identify the service and supervision needs for people with mental illnesses who are assessed as being at moderate to high risk of reoffending. Use risk information to inform pretrial release and community supervision decisions. Use behavioral health care information to inform community supervision decisions. Share the results of risk assessments and behavioral health screenings with the assigned supervising agency and community-based service providers when community-based supervision is ordered to enable appropriate follow-up assessment, treatment, and case planning.
- Connect people detained in jail who have behavioral health care needs to community-based behavioral health care services prior to their release. Develop a jail in-reach program to facilitate continuity of care. Ensure that probation and community-based service providers are fully apprised of Ohio Benefit Bank and Veterans Justice Outreach resources. Build on existing strategies that are already addressing individuals with mental illnesses who are involved with the criminal justice system.
- Increase the capacity of community-based behavioral health and housing services and prioritize those services for people who are at higher risk of reoffending for such services. Deliver community-based services that address the behaviors associated with recidivism. Improve access to housing and support services to reduce the incidence of homelessness for people with serious mental illnesses who are released from jail.
- Develop a method of ongoing system analysis and outcome measures. Charge a single entity with responsibility for managing, coordinating, and monitoring the implementation of the recommendations of this report, as well as producing detailed, bi-annual accountings of the status of the implementation of the recommendations in this report. Commission a bi-annual report that tracks the number people with behavioral health needs in jail, their average length of stay in jail, and their recidivism rates.



Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails, which is sponsored by the National Association of Counties, the American Psychiatric Foundation, and the Council of State Governments Justice Center, calls on counties across the country to reduce the prevalence of people with mental illnesses being held in county jails. The work being done in Franklin County, the leadership that

the Franklin County Criminal Justice Planning Board has demonstrated, and the findings emerging from the data analysis presented in this report are instructive for counties everywhere that are "stepping up" to reduce the numbers of people with mental illnesses in their jails.