

MENTAL HEALTH SERVICES IN THE COUNTY JAILS AND IMPACT OF THE CONNECTIONS PROGRAM

SUMMARY

According to a report from the National Mental Health Association (06/06/03), “a shocking number of adults...with mental health problems are incarcerated because of the lack of treatment options in the community....” According to a study by Human Rights Watch (10/22/03), there are more mentally ill people in jails than in hospitals. San Diego County follows this national trend where the local county jail system is our biggest mental health provider. At any given time, there is an average of 800 to 900 inmates under psychiatric care out of an approximate population of 5000 inmates. Occasionally the population expands to larger numbers. For example, in August 2003 there were 1093 psychiatric cases in the San Diego County jail system.

In contrast to the national profile, San Diego County jails operate an effective mental health treatment program. The jail mental health services provide individualized services that are based on recognized standards of care. The goal is when mentally ill offenders return to the community they can continue needed treatment services and remain out of the criminal justice system. This goal was supported by the *Connections Program*, a program providing intensive case management through a grant from the State Board of Corrections. It is the purpose of this report to support strategies for continuing case management services, and to highlight the quality of mental health services that are provided in the county jail system. Particular emphasis is given to the acute care Psychiatric Security Units in the San Diego Central Jail and in the Las Colinas Detention Facility for women.

PURPOSE OF THE STUDY

The Grand Jury initiated its investigation to study and document the following:

- Assess the quality of mental health services.
- Document implementation of the *Connections* grant program, which sought to facilitate discharge support services.
- Suggest opportunities for increased cooperative efforts among county departments and nonprofit organizations in the community in order to achieve maximum benefit from shrinking public funds.

PROCEDURES EMPLOYED

Site visits:

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- San Diego County Central Jail
- Las Colinas Detention Facility.

Interviews:

- Administrative and clinical staff for mental health programs in the jails.

Document Review:

- Policies and Procedures and Documents – Medical Services Division, San Diego County Sheriff
 - Staffing/Organizational Chart of Detention Medical Services Division
 - Inmate Intake and Assessment Forms
 - Patient Informed Consent Form
 - Staff Training and Orientation Curriculum
 - Discharge Process Description
 - SANDAG Semi-Annual Report – September, 2003
 - *Connections Grant Program*
 - Patient Sample Treatment Plan
- Board of Corrections Mentally Ill Offender Crime Reduction Grant Program
- Inspection Forms for San Diego County Jail Facility, Title 15, Board of Corrections, 2003
- California Welfare and Institutions Codes 5150 – 5157
- Lanterman-Petris-Short Act
- California Penal Codes 1360 and 1370 governing due process
- National Mental Health Association News Release, June 6, 2003
- Human Rights News Release, October 10, 2003
- *Memorandum of Agreement for the Provision of Mental Health Services to Adult Inmates in the Sheriff's Detention Facilities*, February 14, 2000.

TREATMENT PROGRAM

TREATMENT PROGRAM DISCUSSION

The San Diego County jail mental health treatment programs are mainly housed in two facilities, the Central Jail for male inmates and at the Las Colinas facility in Santee for female inmates. Only the downtown and the Las Colinas facilities have Psychiatric Security Units (PSU) which are comparable to mental health hospitals in the community. The PSU in the Central Jail has 30 beds and the Las Colinas unit has 16 beds. On-site mental health staff in these facilities includes a psychiatrist, medical nurses, and social work staff. The George F. Bailey and Vista facilities have a psychiatrist and mental health clinician on-site 7 days a week.

For other county detention locations, any staff can request that an inmate be transferred to one of the facilities where a psychiatrist can perform an evaluation. An inmate from any county jail facility may be admitted to the PSU if a psychiatrist determines the patient presents a danger to self or others. Inmates who are concerned about their own mental stability can ask to be admitted on a voluntary basis.

According to mental health staff at the County Jail, an estimated 80% of their mentally ill jail population also has a substance abuse problem. This twofold problem is commonly referred to as dual diagnosis. Although psychiatric treatment together with drug and alcohol counseling provide some help, these patients have complex problems that require treatment by clinicians who have special knowledge about dual diagnosis management. Fiscal constraints limit the ability of the jail system to employ dual diagnosis specialists.

Both the Central Jail and Las Colinas PSUs comply with all standards for the protection of patient's rights. The Patient Rights Advocate monitors compliance and represents clients when necessary. At the downtown jail, the 6th floor is reserved for patients who do not require hospitalization but who do require close medical monitoring and supervision. Other psychiatric cases throughout the county jail system are mixed in with the general jail population.

The treatment process begins with a mental health diagnosis made by the psychiatrist, followed by a functional level assessment made by the nursing staff. The functional assessment focuses on problem behaviors that staff can recognize, such as potential for violence to self or others. The treatment team includes a psychiatrist, psychiatric and medical nurses, social worker, occupational therapist, recreational therapist, and deputies. The PSU program involves the following:

- Regular observation and interaction with patient and written notes recording progress and problems.
- Presentation of new patients to the treatment team.

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- Daily reports on patients with a practical focus on effective behavior management strategies.

Patients in the PSU, on the 6th floor of the Central Jail as well as at Las Colinas, and other patients in the general jail population, may take part in the following activities:

- Patient group therapy and discussion meetings conducted by mental health staff.
- Drug and alcohol counseling and education provided by volunteer groups such as Alcoholics Anonymous and Narcotics Anonymous.
- Educational services, including classes in Adult Basic Education, substance abuse, parenting, and domestic violence provided by Grossmont Union High School District at the Central Jail and Las Colinas facilities.

It is important to note that the integration of volunteers into the treatment program presents challenges during these times of limited resources. Health staff must train and monitor the volunteers. Additional security measures must be taken to ensure volunteer safety when inside the jails. All volunteers must pass a security screening.

Prior to release, mentally ill offenders receive counseling regarding appropriate mental health services in the community. Follow-up support in the community has been provided by case managers through the *Connections Program* grant funds. These were depleted as of December 2003.

There has been an attempt by the county jail system to access Federal Targeted Case Management funds. These are funds that would allow the county to bill Medi-Cal for case management services. There were not enough eligible clients to fully fund the required staff. It would require \$1.6 million per year to cover case management costs but neither the Sheriff nor the Probation Department has the funds.

TREATMENT PROGRAM FACTS AND FINDINGS

Fact: The treatment program is a multi-disciplinary, coordinated effort between correctional, medical, and social work staffs. Staffing includes a psychiatrist, psychiatric nurses, mental health clinicians, deputies, social workers, and occupational and recreational therapists.

Finding: The coordinated treatment effort enhances the ability of staff to coordinate clinical and supervisory functions that results in consistent behavior management practices that support patient safety and well being.

Fact: County Jail mental health staff estimates that 80% of their mentally ill population has a substance abuse problem, a condition commonly referred to as dual diagnosis. Fiscal constraints limit the ability of the Sheriff to employ dual diagnosis specialists.

Finding: Although psychiatric treatment together with drug and alcohol counseling provide some help, these patients have complex problems that require treatment by clinicians who have special knowledge about dual diagnosis management.

Fact: It is a challenge for jail staff to integrate formal volunteer programs due to limited staff available for training and monitoring.

Finding: Treatment program enhancement opportunities are limited.

Fact: Educational services are provided by Grossmont Union High School District at the downtown and Las Colinas facilities.

Finding: Some patients are able to earn GED credits toward a high school equivalency certificate. Through other classes, some patients are able to address issues involving substance abuse and domestic violence.

Fact: With the discontinuation of the *Connections Program*, there is no way to ensure access to mental health services after release. For example, there has been some difficulty getting appointments at community clinics on short notice. There have also been problems with the process of applying for Supplementary Security Income.

Finding: Vulnerable populations have the need for assistance in securing continuing mental health services upon release. They need case management support and close collaboration with health and human services organizations in order to facilitate patient access to ongoing treatment.

TREATMENT PROGRAM RECOMMENDATIONS

The Grand Jury recommends that the San Diego County Board of Supervisors and the San Diego County Sheriff's Department:

- 04-03-1** Build case management services into contracts with all community-based organizations that serve released mentally ill offenders.
- 04-03-2** Ensure that reliable and consistent drug and alcohol counseling services are included in the Sheriff's mental health programs with a focus on specialized dual diagnosis treatment.
- 04-03-3** Enhance collaborative efforts with community-based organizations and with the local office of the Social Security Administration to facilitate access to services and benefits for released mentally ill offenders.

TRAINING

TRAINING DISCUSSION

All PSU staff members receive training to ensure that they have knowledge and skills regarding the management of inmates with mental health concerns. A multi-disciplinary team jointly developed the training curriculum. The team consisted of a psychiatrist, nurse, social worker, deputy, occupational therapist, and recreational therapist. Deputies may volunteer for the training if they commit to work in the PSU facility for one year. Many deputies have taken advantage of this opportunity. After completion of the one-year commitment, these deputies are able to effectively utilize their skills to recognize and manage mental health problems while on other assignments.

Orientation training topics are based on the application of recognized practices that help to reduce the risk of aggression and violence. Topics covered in the training program include:

- Definition of crisis and crisis resolution.
- Essentials of documentation.
- Provision of firm, kind support.
- Definition of drug abuse and addiction.

In addition, nursing staff is trained to:

- Recognize behaviors related to psychiatric diagnoses.
- Become familiar with the medications commonly prescribed to treat symptoms of mental illness.
- Understand concepts such as transference and models of violence.

Ongoing training is provided by the psychiatrist during morning treatment team meetings. There is periodic training on special topics such as patient advocacy.

TRAINING FACTS AND FINDINGS

Fact: Mental health cross training is provided for correctional and clinical staff who will work in the PSU.

Finding: As a result of cross training there has been improved understanding of mental health issues by correctional staff, as well as more effective communication between correctional and clinical staff.

Fact: Correctional staff who have mental health training and experience are taught how to manage behaviors competently and with compassion.

Finding: The safety and welfare of patients is enhanced through cross training.

TRAINING RECOMMENDATION

The Grand Jury recommends that the San Diego County Board of Supervisors, and the San Diego County Sheriff's Department:

04-03-4 Expand cross training to develop greater understanding of special needs of released mentally ill offenders by opening training sessions to probation officers and workers in the public mental health community.

BUDGET

BUDGET DISCUSSION

The Sheriff has allocated \$11.4 million in FY 2003-04 for the jail mental health program. According to a Memorandum of Agreement for the Provision of Mental Health Services to Adult Inmates in the Sheriff's Detention Facilities (02/14/00), the San Diego County Health & Human Services Agency "will pay reimbursement to the Sheriff's Department based on actual costs, not to exceed a maximum amount of \$4,328,226..." per year.

For FY 2003-04, the Health & Human Services Agency withheld \$650,000 from the expected allocation due to budget constraints. The San Diego County Public Safety Group is using reserves and has promised to cover this shortage for 2003-04, but there is no commitment for continued support after this year. Based on an assumption that there will be no funding changes or staff raises, there is a projected shortage of \$650,000 for FY 2004-05.

Attempts have been made to find other revenue sources. For example, if a patient has private insurance, the Sheriff's Department can collect reimbursement for the mental health services provided in jail. Unfortunately, few mentally ill offenders have private insurance. It is not possible to use Supplemental Security Income, Medicare or Medi-Cal reimbursement to defray mental health service costs because patients are not eligible for these payments while incarcerated.

The county jail system is the largest mental health provider in the county, and operates a model program that has been recognized throughout the state. New interdepartmental and community partnerships need to be developed in order to ensure continued support.

BUDGET FACTS AND FINDINGS

Fact: County general and state funds, which provide for psychiatric care in jails, are experiencing cuts due to the State of California budget crisis.

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Finding: Jail staff is working to overcome the budget cuts to maintain quality mental health services in the jails.

Fact: State budget constraints are exerting pressure on existing funding agreements between the Health & Human Services Agency and the Sheriff's Department.

Finding: Long-term plans are needed for additional funding of mental health services in the jails to maintain the current level of care.

BUDGET RECOMMENDATIONS:

The Grand Jury recommends that the San Diego County Board of Supervisors and the San Diego County Sheriff's Department:

- 04-03-5** Work to enhance community understanding of the benefits of effective mental health services in the county jail system in order to generate public and private support.
- 04-03-6** Develop long term plans to ensure funding for mental health services in the county jail system.
- 04-03-7** Develop and strengthen the working partnerships among Health & Human Services Resource Development Division, Sheriff's Health Services, and Probation Department. This partnership would work on coordinated grant requests so that mental health services grant revenues can be increased.

MEDICATION

MEDICATION DISCUSSION

The county jail health system uses the San Diego County Health & Human Services Agency (HHSA) as their pharmaceutical provider. HHSA would like to move the purchasing of medications to the Sheriff's Department. To facilitate the transition, HHSA has offered to pass along \$3 million to the county jail system. Based on yearly medication expenditure of \$3.2 – 3.4 million, this would not fully cover the expense incurred by the county jail system.

Expenses include costs of medications dispensed to patients during incarceration, as well as, costs of a 30-day supply of prescribed medications after release. Patients released from the county jail mental health program are provided with a voucher for a 30-day supply of medications. The voucher can be redeemed at a Savon Drug Store. When available, discount coupons from drug manufacturers are attached to the vouchers. These coupons provide some cost savings to the jail system.

It is notable that 50% of the total cost of medications for the entire county jail system can be attributed to drugs that help to relieve symptoms of mental illness. As required by law, these medications are used for the patients' benefit, not control. Medications are

administered only after obtaining the informed consent of the mentally ill offender or in an emergency situation with justification documented by a psychiatrist. All use of medications is monitored by a psychiatrist.

MEDICATION FACTS & FINDINGS

Fact: The San Diego County Health & Human Services Agency is the pharmaceutical provider for the county jail health system.

Finding: The county jail health system currently has no other cost effective medication purchasing options.

MEDICATION RECOMMENDATION

The Grand Jury recommends that the San Diego County Board of Supervisors:

04-03-8 Explore drug purchasing alternatives including those utilized by other states and public agencies to identify potential cost-savings.

CONNECTIONS PROGRAM

CONNECTIONS PROGRAM DISCUSSION

In 1999, the San Diego County Sheriff's Department was awarded a \$5 million, four-year grant from the Board of Corrections Mentally Ill Offender Crime Reduction Grant Program. San Diego was one of fifteen Counties in California to receive this funding. Funding was earmarked to provide services to mentally ill individuals who are incarcerated. The funds were exhausted as of December 31, 2003.

This program was named *Connections Program*. San Diego was recognized as having one of the most successful programs in the state. Probation officers teamed with mental health clinicians and others so that *Connections Program* participants could receive the following services:

- Pre-release needs assessment, treatment planning and engagement with community service linkages for follow-up treatment and assistance.
- Intensive case management services for 2 years following release with 24-hour staff availability 7 days a week.
- Payee program to assist clients in managing finances.
- Encourage involvement of families and significant others.
- Substance abuse monitoring and intervention.

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San Diego County has demonstrated the best outcomes in the state. Preliminary results from the 105 *Connections Program* clients who exited the program and the 71 who completed the 6-month follow up interview by June 3, 2003, revealed "...these individuals were less likely to be booked into jail and convicted of a crime in the 6 months following program exit. Other indications are that clients improved their level of functioning in the community and decreased their risk of recidivism over time..." (SANDAG, September 2003). The approximate cost avoidance in reducing the number of jail days for this group of clients is \$290,000.

Now that the funding is depleted, the Sheriff's staff that enabled this success story has been reassigned to other duties. The remaining services for mentally ill offenders who are exiting jail that are provided include:

- Continuing post discharge help for *Connections Program* clients who have already been engaged in community services.
- In-jail group-counseling by two community agencies that brief clients on where and how to access services.

Without this special assistance, mentally ill offenders who are exiting jails can continue to receive mental health treatment through Public Mental Health Services if:

- Pre-release arrangements have been made by Sheriff and Mental Health staff for the offender to receive services in a county funded program.
- The offender is successful in securing eligibility for Medi-Cal or Social Security Income because of his/her disabling condition.
- The severity of the offender's illness and condition meets the agency's eligibility criteria.

CONNECTIONS PROGRAM FACTS & FINDINGS

Fact: The California Legislature made millions of dollars available through the Mentally Ill Offender Crime Reduction Grant Program so that mentally ill offenders could receive assistance and treatment when they are released from jails.

Finding: The San Diego County Sheriff's Department has been recognized by the California Board of Corrections as having one of the most successful transition programs and has demonstrated the best outcomes in the state.

Fact: The *Connections Program* team's pre-release assessments, planning and connections to needed services for offenders not only reduced numbers of re-offenses and bookings but also improved their level of functioning in the communities where they lived.

Finding: Without this type of individualized assistance from trained professionals mentally ill offenders do not consistently or automatically receive treatment or help from County Mental Health Service agencies when they are released from jail.

Fact: Through the *Connections Program* participants received monitoring and intervention services for co-existent substance abuse problems.

Finding: When released from jail mentally ill offenders do not necessarily receive assistance, referrals or monitoring for their substance abuse problems.

CONNECTIONS PROGRAM RECOMMENDATION

The Grand Jury recommends that the San Diego County Board of Supervisors:

04-03-9 Implement a training initiative for probation officers and workers in the public mental health and community agencies in order to enhance their understanding of special needs and concerns of released mentally ill offenders.

CONNECTIONS PROGRAM COMMENDATION

The San Diego Grand Jury commends the San Diego County Sheriff's Department's Mental Health Program staff for their exemplary work in designing and implementing the *Connections Program* and congratulates them for being recognized by the state Board of Corrections for demonstrating the best outcomes in the state.

MANAGEMENT AND GRANTS

The San Diego County Sheriff's Department has an administrative model that differs from that of most other counties in California. Here, jail mental health services are "owned" and operated by the Sheriff's Department, rather than by an outside department such as Health and Human Services. Since 1998, jail health staff has been under the direct supervision of the Sheriff's Department. This has enabled consistency of policies and practices, and prevented confusion caused by the sharing of supervision by two agencies. Other counties have sent representatives to San Diego to learn about this model.

The staff prides itself on the quality and depth of its services to its clients. The overall morale is high and there is a strong sense of pride and commitment to members of the community who need advocacy. This attitude starts at the management level and permeates the health staff.

Strong management, leadership, and positive professional attitude have enabled the San Diego County Sheriff's Department to obtain one of only 13 funded grants from the Federal Department of Education-Correctional Education Group. There were 125 applicants nationwide.

REQUIREMENTS AND INSTRUCTIONS

The California Penal Code §933 (c) requires any public agency which the Grand Jury has reviewed, and about which it has issued a final report, to comment to the Presiding Judge of the Superior Court on the findings and recommendations pertaining to matters under the control of the agency. Such comment shall be made *no later than 90 days* after the Grand Jury publishes its report (filed with the Clerk of the Court); except that in the case of a report containing findings and recommendations pertaining to a department or agency headed by an elected County official (e.g. District Attorney, Sheriff, etc.), such comment shall be made *within 60 days* to the Presiding Judge with an information copy sent to the Board of Supervisors.

Furthermore, California Penal Code §933.05(a), (b),(c), details, as follows, the manner in which such comment(s) are to be made:

- (a) As to each grand jury finding, the responding person or entity shall indicate one of the following:
 - (1) The respondent agrees with the finding.
 - (2) The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefor.
- (b) As to each grand jury recommendation, the responding person or entity shall report one of the following actions:
 - (1) The recommendation has been implemented, with a summary regarding the implemented action.
 - (2) The recommendation has not yet been implemented, but will be implemented in the future, with a time frame for implementation.
 - (3) The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a time frame for the matter to be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This time frame shall not exceed six months from the date of publication of the grand jury report.
 - (4) The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefor.
- (c) If a finding or recommendation of the grand jury addresses budgetary or personnel matters of a county agency or department head and the Board of Supervisors shall respond if requested by the grand jury, but the response of the Board of Supervisors shall address only those budgetary or personnel matters over which it has some decision making authority. The response of the elected agency or department head shall address all aspects of the findings or recommendations affecting his or her agency or department.

Comments to the Presiding Judge of the Superior Court in compliance with the Penal Code §933.05 are required by the date indicated:

<u>RESPONDING AGENCY</u>	<u>RECOMMENDATIONS</u>	<u>DATE</u>
San Diego County Board of Supervisors	04-03-1 through 04-03-9	07/28/04
San Diego County Sheriff's Department	04-03-1 through 04-03-7	06/28/04