The White House unveiled its $4.8 trillion Fiscal Year (FY) 2021 budget proposal Feb. 10, which includes many provisions that would affect counties, if adopted by Congress.

Each year, the president and his administration are responsible for providing Congress with an outline and request for appropriation for each department and agency in the executive branch. Though the president’s budget is not signed into law, it provides insight on the administration’s policies and priorities for the next fiscal year and is the opening move in the annual appropriations process.

This year, the budget proposal follows Congress passing and the president signing a $2.7 trillion budget agreement in August 2019, which raised federal spending caps for both FY 2020 and FY 2021 by nearly $320 billion over the next two years. Notably, the president’s budget adheres to the defense spending caps, but proposes spending for non-discretionary programs currently and historically funded by federal grants down to state and local governments including transportation infrastructure, workforce initiatives, economic development and health care. Combined, these changes would increase the fiscal burden carried by state and local governments who may be unable to adequately fill the gap left by a lack of federal resources.

Similar to last year’s budget request, to achieve the goal of reducing federal aid to state and local governments, the White House proposes the “Cross-Agency Priority (CAP) Goal: Results-Oriented Accountability for Grants.” The CAP proposal aims to ensure that federal grants are administered in the most efficient and effective way by using a risk-based and data-driven spending at $3 trillion.

Of note for counties, the FY 2021 budget proposes to significantly reduce federal contribution to the federal-state-local intergovernmental partnership by limiting numerous state and local grant and aid programs. The budget proposes to move much of the responsibility for many of the programs currently and historically funded by federal grants down to state and local governments including transportation infrastructure, workforce initiatives, economic development and health care. Combined, these changes would increase the fiscal burden carried by state and local governments who may be unable to adequately fill the gap left by a lack of federal resources.

Counties respond to coronavirus

“False.” The image of the five red letters tweeted by the Harris County Public Health Department in Texas reassured county residents that a disinformation site claiming four individuals in the county had the 2019 novel coronavirus was wrong.

Grant County, Okla. Commissioner Cindy Bobbitt testifies on behalf of NACo at a congressional hearing Feb. 11 on EPA’s Lead and Copper Proposal: Failing to Protect the Public Health before the Subcommittee on Environment and Climate Change in the U.S. House of Representatives in Washington, D.C. Photo by Hugh Clarke

Coast to coast, counties and local health departments are responding to the spread of the coronavirus, but their response goes beyond testing patients for the virus.

“There are always two different kinds of emergencies that come up,” said Umair Shah, executive director of the Harris County Public Health Department. “One is the actual emergency and the second is all the misinformation and all the impact of the anxiety because of the misinformation.”

The Centers for Disease Control (CDC) describe the novel coronavirus as a respiratory illness that was first detected in Wuhan, China. It is currently unclear how easily the virus

NACo Past President Jim Snyder retires after 39 years of service

Jim Snyder had traveled all over the world, seen everything, been everywhere, and the place he wanted to be was tiny Cattaraugus County, NY.

That sums up Maggie Kasper-ski’s stepfather, who retired from the county Legislature at the end of 2019, following 39 years of service.

Since returning to his home county after a short stint elsewhere in upstate New York, he spent 13 years as the chairman of the legislature, a year as NACo president and two years as President George H.W. Bush’s director of intergovernmental affairs.

“It wasn’t putting up buildings or roads my shtick in all of my years of public service was helping people with their problems, people who had no voice other than me,” he said. “Helping people find jobs, helping them solve
Substance abuse, voting machines top funding woes

by Rachel Looker  
staff writer

More than a third of counties face funding shortages for fighting substance abuse, upgrading voting machines and beefing up their public defender’s office, according to a recent report from researchers at Ohio State University and Cornell University. Nearly a quarter of counties have trouble funding services for the elderly.

The county government survey collected data on county governments’ capacities and challenges.

Other results show using the internet for communicating with the public lags for nonmetropolitan counties, with 77 percent of rural counties maintaining a website compared to 93 percent of metropolitan counties and 86 percent of adjacent counties.

Professor of Rural Sociology at Ohio State University Linda Lobao, who designed the survey, has conducted four county government surveys since 2001. “The reason why we have done these surveys is that systematic data on counties, particularly rural counties, doesn’t exist,” she said.

For rural counties, Lobao said capacity issues have been a challenge with smaller governments having fewer staff members and facing difficulties integrating basic technology, such as county websites.

The survey also found the services provided most widely by county governments are law enforcement, 911 emergency services, jails and correctional facilities, courts, road maintenance, parks and recreation and senior citizen programs. Rural governments are less likely to provide 15 of the 28 documented services in the survey.

The survey took place from late spring 2018 to early winter 2019. A total of 1,097 counties responded to the survey after researchers mailed copies to county officials using a mailing list from the National Association of Counties.

Researchers divided counties into three categories based on rural-urban continuum codes developed by the Economic Research Service: Metropolitan for counties located within a region that has large urban cores; adjacent for counties located next to metropolitan counties and rural for nonmetropolitan counties that are not adjacent to metropolitan counties and have no urban populations.

Although her survey includes data from counties of all sizes, her goal for conducting the survey is to obtain datasets for rural counties, which she said are often overlooked.

“We really wanted to be able to assess the status of all types of counties in the United States over time,” she said.

New this year: Asking county governments about using arts programs for economic development.

They found 27 percent of counties are engaged in arts-based community development.

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County health officials battle coronavirus rumors, misinformation

From CORONAVIRUS page 1

spreads between people. Similar to the flu or common cold, symptoms include fever, cough and shortness of breath.

As of the publication of this story, 15 people in the United States tested positive for coronavirus, according to the CDC, with cases confirmed in Washington, California, Arizona, Wisconsin, Illinois, Massachusetts and Texas.

Harris County, the third largest county in the United States, has no confirmed cases of coronavirus, but the potential for an infectious disease has raised anxiety and concerns for those in the community, Shah said.

"Whenever you have concerns, then that is what makes people susceptible to rumors and misinformation," he said. "Where it's either inadvertently or purposefully, there are unfortunately people out there that will spread information that is just simply inaccurate."

Through traditional media and social media, Harris County is responding to myths about the virus by providing daily updates and fact sheets in multiple languages to the community. The Harris County Public Health Department launched a website in January with information and links to the CDC and the World Health Organization.

To help combat the spread of misinformation, Shah said county officials are launching a rumor control webpage that debunks rumors circulating around the county.

"This is where county leadership, emergency management and public health are coming together to really ensure that misinformation is not spread in our community," he said.

In Harris County, Shah said the Asian American and Chinese-American communities have seen the spread of misinformation surrounding the coronavirus including decreased business for grocery stores and restaurants in Chinatown.

"People are getting misinformation and saying, 'Oh, I’m not going to go eat in a Chinese restaurant,'" he said. "That's a problem and we really need to do everything we can to address that."

A resident in Snohomish County, Wash., was the first confirmed case of the 2019 novel coronavirus in the United States. The state Department of Health and Snohomish Health District worked with the CDC to establish a travel history of the patient and identify contacts who may have been exposed to the virus through contact with the individual.

The Snohomish County resident traveled from Wuhan City, China to an airport in neighboring King County, according to Meredith Li-Vollmer, risk comm-
The U.S. Supreme Court’s Jan. 27 order, allowing the Department of Homeland Security (DHS) to begin enforcing the agency’s “public charge” rule, may increase the use of county-provided social services and impose new administrative demands on counties. The court lifted a nationwide injunction on the rule as litigation continues, allowing its enforcement starting Feb. 24, delayed a few months from its October 2019 implementation date after federal judges in multiple states blocked it.

The rule widens the scope of programs and factors that federal immigration authorities may consider when determining whether an individual seeking permanent legal residency or a visa extension is likely to become a public charge — that is, primarily dependent on the federal government for subsistence.

An individual is considered a public charge if they access government benefits that provide cash assistance — such as the Temporary Assistance for Needy Families program or Supplemental Security Income — or receive government-funded long-term institutional health care. The new rule would expand that, defining public charge as someone who relies on cash and non-cash benefits such as housing or food assistance for more than 12 months in a three-year period.

When the proposal was first announced in September 2018, NACo submitted comments expressing concerns, that if implemented, the public charge proposal would result in fewer individuals accessing federal benefits, thereby increasing usage of and demand for local services. Additionally, the change could also impose new administrative demands on counties already facing strict budget constraints. NACo also released an analysis of the rule that outlines key modifications to the “public charge” definition and how the rule may impact counties.

Under the proposed definition, DHS cites that nearly 400,000 immigrants per year already in the United States would be subject to the new requirements and regulations. The proposal also reduces the dollar amount an individual may receive in public assistance before they are deemed a “public charge.” An individual who accepts the equivalent of at least 15 percent of federal poverty guidelines (equivalent to roughly $1,800 a year, or $150 a month) would be deemed a “public charge.”

The new rule would apply to any individual seeking to come to the United States through various visas, with limited exceptions for certain immigrant populations, such as refugees. The proposal would also impact individuals already in the country who are seeking to become permanent legal residents or to extend their stay in the country by renewing their immigration status.

Despite the Supreme Court ruling, lower courts are expected to hear lawsuits on the public charge rules in the coming months. Once those lawsuits are settled, it is possible the Supreme Court will review the public charge issue again.

Merker is a NACo associate legislative director for Human Services and Education; Hurley is a NACo associate legislative director for Finance, Pensions and Intergovernmental Affairs.
**COPS Office Updates:** Grant programs, Presidential Commission on Law Enforcement

**by Phil Keith**

In October 2019, President Trump signed an Executive Order establishing the President’s Commission on Law Enforcement and Criminal Justice. The last time a president’s commission on law enforcement was established was 1965, when President Lyndon B. Johnson created the President’s Commission on Law Enforcement and Criminal Justice. The commission’s historic responsibilities included initiatives to combat crime and improve the criminal justice system and address the capacities and support crime prevention efforts. Approximately $400 million in funding is available. The solicitation closes on March 11.  
- Up to $50 million is available under the School Violence Prevention Program (SVPP). These grants are awarded to states, units of local government and Indian tribes to improve security at schools and on school grounds. SVPP closes on April 8.  
- Community Policing Development (CPD) funds are used to help law enforcement implement community policing strategies in a variety of ways. Up to $5.6 million is available this year; check out our website for details on specific topics. The program closes on March 31. There is also the CPD Micro-grants program, which allows agencies to develop demonstration projects or pilot programs. The deadline is March 11.  

Other exciting programs include initiatives to combat meth and heroin abuse; grants to assist law enforcement in Indian country; training to assist law enforcement when encountering active shooters and important work in addressing officer mental health and safety. We encourage you to follow the work of the commission as we launch our hearings at the end of February and to visit our website (https://cops.usdoj.gov) to learn more about both the commission and our solicitations. Our goal is to keep our communities and our officers safe and healthy. Thank you for helping us work toward that important goal.

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**Snyder’s shtick? Helping people**

*From SNYDER page 1*

their problems, that where my passion was,” Kasperski said that. “There was someone in town who had been a little antagonistic toward Jim, but they were trying to get one of their parents into a nursing home,” she said. “He spent about two days making it happen and I asked why he’d do that if she wasn’t very nice to him. He just said ‘If you have a minute to help someone else, you do it’.”  

Snyder grew up in Olean and earned a basketball scholarship to Syracuse University, where he shared a room with Jim Brown. After graduation, he took a job with Exxon Mobil, but 10 years later returned with his family to Cattaraugus County.  

“I wanted my children to grow up in a rural community, and I didn’t want my mother living by herself,” he said. “She raised me on her own and she deserved better than seeing her grandkids just every now and then.”  

When Kasperski joined his family, she saw his devotion to his hometown. “He thinks it’s the best place in the world,” she said. “He always wanted to make the community as good for his family as it had been to him.”  

A friend convinced him to run for an alderman’s position before he moved on to the county Legislature.  

“I felt the wind kept blowing me toward where I needed to go,” he said. While at a NACo Legislative Conference, he took a trip to visit Gettysburg. When he came back, Past President Bill Murphy announced that Snyder would run for NACo president. This was news to Snyder. “I didn’t want to do it, but after talking to enough people, it seemed like I’d have a pretty good chance to win,” he said.  

While on the NACo executive committee, he befriended the name who would precede him in office, Miami-Dade County, Fla. Clerk of Courts Harvey Ruvin, and the unlikely pair—the collegiate basketball playing Republican and the compact Democrat, became close friends. “He was a Republican, but he approached every issue from a bipartisan perspective,” Ruvin said. “There were times I convinced me and there were times I convinced him. We were both open to rational arguments, and I feel like our relationship would be a great model for Congress.”  

The pair negotiated NACo’s contract with Nationwide Retirement Solutions, which helped fortify NACo’s financial strength in the tumultuous 1980s. “Jim was an amazing negotiator,” Ruvin said. “You never knew what was on his mind, but he always had a plan. The work we accomplished affected every county official from that day on.”  

During his presidency, 1988-1989, Snyder initiated the adoption of NACo’s key legislative priorities. “It’s all there, on one page, our position and priorities, clear as a slam dunk,” he is quoted in Serving America’s Counties: A History of the National Association of Counties. “No one should have any trouble knowing where county governments stand.”  

“We just had so many resolutions floating around, we had to simplify it,” he said three decades later in 2020. “Everything was more strategic.”  

Snyder’s presidency raised his profile with the Reagan Administration, and two years later, when the Bush Administration needed a director of intergovernmental affairs, we was the man for the job. “It was a natural job for me,” he said. “Sometimes you go for a job, sometimes a job goes for you. It was easy for me.”  

But there was work to do on basic levels. “We hadn’t done as good as a job with counties as we should have,” he said of the executive branch. “Some people in the White House didn’t know the difference between a county and a city, it was a shock to me.”  

He regarded the opportunity as the experience of a lifetime, allowing him to get to know President Bush and First Lady Barbara Bush and to be involved in state dinners. In 1993, it was back to Olean, and soon after, back to the county Legislature, helping people. Though Snyder ran up against a term limit, he was planning to retire at the end of 2019 anyway. Before his family surprised him with a retirement party, Snyder’s colleagues on the Legislature renamed their chambers in his honor. “I did the best I could, I know you folks did the best you could with the power in your hands,” he said at the dedication during his last meeting. “I did the best I could, right or wrong.”

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**Phil Keith** is the director, Office of Community Oriented Policing Services (COPS Office), Department of Justice and chair of the President’s Commission on Law Enforcement and Criminal Justice. He served as the chief of police for Knoxville, Tenn., from 1988 to 2004.
Innovative Program, CashVest, that shows counties how to generate higher-interest income on every dollar in deposit.

NACo is pleased to announce its partnership with three+one, a liquidity management and financial technology firm based in Monroe County, N.Y. that offers an innovative program, CashVest, that shows counties how to generate higher-interest income on every dollar in deposit.

Program creates additional non-tax revenues for counties

Karin Walls and Hablow: “We read, hear and listen to the value of every tax dollar received from your constituents. We receive, hear and listen to the taxpayers' cash assets are receiving their maximum possible value. …”

Conducting a simulation will help you determine what your entity’s investment guidelines are for investing short-, medium-, and long-term. This will tell you what your opportunities are for investing short-, medium-, and long-term.

Can you ever imagine a time when demand for services will not outpace the limited financial resources? It seems unlikely. Yet with that demand comes an equal one to minimize the tax burden. Done right, liquidity data and analysis can assure you that your taxpayer-provided cash assets are receiving their maximum possible value.

by Garrett Macdonald CTP and Peter Forsgren, CTP

There is one commonality among finance personnel — the drive to make the most of the cash assets that are received from tax-paying constituents, to keep those funds safe, and to make the most of them while under their stewardship. In our technology-driven era, there is a tool that propels this desire to a much higher level. That tool is liquidity data.

We read, hear and listen to subject-matter experts talk about data, big data and data analytics all the time, but often times public finance officials do not have the available time, resources or staff to sort, scrub, format, simulate and analyze the financial data that’s available to them. It’s also difficult to determine what data are vital and actionable — not just nice to look at. Liquidity data and analysis hold the key to maximizing the value of every tax dollar received from your constituents.

Liquidity data has brought a new level of dynamism to the work of public treasurers and chief financial officers that hasn’t been available in the past. While interest rates are unpredictable, tax increases are unpopular, and the fiduciary duty to provide as much savings and interest on taxpayers’ cash continues to be at top of mind of every treasurer and CFO, how to accomplish the best results has evolved.

Orange County, NY, with an annual budget of $816 million (all funds) was used to generate a significant amount in interest income annually. Karin Hablow, the county’s commissioner of Finance, is assertive and proactive when it comes to maximizing the value on taxpayer resources. In an effort to identify if there was an additional benefit that could be realized, Hablow put CashVest to work. This financial product of three+one, a liquidity data provider headquartered in Rochester, NY, provides ongoing liquidity analyses and cash-management monitoring to ensure all tax dollars are receiving the highest level of value possible.

Year-over-year, Orange County increased interest by 159 percent (interest rates only increased 42 percent comparatively over the same period). Hablow’s interest income annually is contributing to the equivalent of 2.15 percent of the county’s entire tax levy — revenue that would have otherwise been raised through tax increases.

Treasurer Maria Walls in Beaufort County, S.C., has used CashVest to increase interest income by 330 percent — from $1.2 million to $5.2 million annually (interest rates increased 233 percent over the same time period). This is contributing 4.96 percent of her county’s projected ad valorem tax revenue in additional income. Walls has always sought to earn and save the most on taxpayer dollars, but the resources were not available for her to internally produce the type of data necessary to accomplish these results. She attributes the net 97 percent increase in revenue to three+one’s CashVest liquidity data.

Here are the top five data analyses that led to increased value on all cash according to Walls and Hablow:

1. Identify what your entity’s daily total net-cash position is. This will tell you what your options are for investing short-, medium-, and long-term.

2. Run multiple simulations on all cash to identify the “time horizon” of your cash position. Conducting a simulation will quantitatively provide greater confidence in knowing what you can invest and for how long.

3. Understand the difference between cashflow and liquidity. Cashflow is ensuring you have enough on deposit to meet accounts payable and payroll expenditures. Liquidity is what the financial marketplace says your cash is worth based on its time horizon.

4. Calculate the effective return on all cash in deposit — all cash — not just the cash you believe you have for a long period of time, but every dollar you have in deposit. This helps provide a frame of reference for your rate performance. For example, Beaufort County’s effective rate of return on all cash is equal to 2.12 percent and Orange County’s is 1.71 percent. Each state has very different public funds investment guidelines. You may need to benchmark your performance against your peers.

5. Incorporate your bank billing (analysis) statements with your liquidity-management practices. If you don’t analyze these analysis statements with your cash-management strategy, you will miss out on additional savings.

Can you ever imagine a time when demand for services will not outpace the limited financial resources? It seems unlikely. Yet with that demand comes an equal one to minimize the tax burden. Done right, liquidity data and analysis can assure you that your taxpayer-provided cash assets are receiving their maximum possible value.
Medicaid financing
NACo submitted comments on the Center for Medicare and Medicaid Services’ proposed rule to reshape the federal, state and local partnership in financing Medicaid. As drafted, the proposal would mean changes to Medicaid’s supplemental payments and to Medicaid’s financing structure, including capping intergovernmental transfers and certifying public expenditures. NACo’s comments emphasized the potentially burdensome impacts of these proposed provisions on counties. (https://www.naco.org/blog/naco-submits-comments-proposal-alter-medicaid-financing)

Medicaid block grant option
The Centers for Medicare and Medicaid Services released a State Medicaid Director letter encouraging states to pursue block grant or per capita cap funding options. Under the Federal Medical Assistance Percentage formula, every dollar a state contributes to medical care beneficiaries is matched by the federal government, meaning there is no cap on how much federal money can be spent on medical care. Implementation of a block grant or per capita cap in Medicaid would eliminate the state and federal match system and use pre-set formulas to determine Medicaid spending. Counties oppose using block grants and per capita caps in Medicaid as these approaches could force counties to make cuts to program eligibility, benefits and provider payment rates. Counties also face increased costs for uncompensated care and costs for individuals who become uninsured as a result of the reduced federal share in Medicaid payments. (https://www.naco.org/blog/cms-rolls-out-medicaid-block-grant-option-states)

Reducing jail populations
The John D. and Catherine T. MacArthur Foundation’s Safety and Justice Challenge recently awarded five counties additional funding to help support initiatives aimed at eliminating unfair or ineffective practices that negatively impact people of color, low-income communities and people living with mental illness. The counties are Cook County, Ill.; Mecklenburg County, N.C.; Multnomah County, Ore.; Palm Beach County, Fla. and Pennington County, S.D. (https://www.naco.org/blog/macarthur-foundation-awards-additional-funding-counties-safety-and-justice-challenge)

Transportation
House Democrats released their “Moving America and the Environment Forward” framework Jan. 29, a $760 billion infrastructure proposal. The framework would roll a surface transportation reauthorization into a package with other infrastructure legislation that would fund roads, transit, rail, aviation, ports, broadband, wastewater and drinking water projects. The U.S. House Committee on Ways and Means held a hearing to consider financing options for the framework, including reinstating advanced refunding bonds and maintaining the tax-exempt status of municipal bonds. (https://www.naco.org/blog/us-house-committees-take-action-infrastructure-and-financing-options)

Older Americans Act
Congress has introduced bipartisan legislation that will increase resources and flexibility for counties serving aging residents. The Supporting Older Americans Act represents a victory for county governments as counties strengthen and expand networks to support the aging population. (https://www.naco.org/blog/congress-introduces-bipartisan-legislation-reauthorize-older-americans-act)

WOTUS
The EPA and Army Corps released its final Waters of the U.S. (WOTUS) definition Jan. 23 to replace a controversial 2015 WOTUS rule. The final rule outlines six categories that would be considered a WOTUS and details what would not be considered a WOTUS. NACo is in the process of developing a comprehensive analysis of the new definition. (https://www.naco.org/blog/epa-finalizes-new-waters-us-definition)

GET TO KNOW...

Seminole County, Fla.

Welcome, Seminole County, Fla.
Seminole County was founded in 1913 and formed from part of bordering Orange County. The county was named after the Seminole tribe of Indians who historically lived in the area. The name “Seminole” means “runaway” in Spanish.
Seven cities make up the county with Sanford, the largest city, as the county seat. The county is a 15-minute drive to Orlando and comprises the Orlando-Kissimmee-Sanford Florida Metropolitan Area.
Known as “Florida’s Natural Choice,” Seminole County has natural springs, parks and waterways where visitors can hike, bike, fish or kayak. The world’s oldest cypress tree, named “The Senator,” called the county home before being burned down in 2016. The tree was over 3,500 years old. A second cypress tree named “Lady Liberty” is still standing in the county and is over 2,000 years old.
Lake Jesup is located in the central part of the county and is famous for having the most alligators in the state, with an estimated 421 per mile.

Lake Jesup is located in the central part of the county and is famous for having the most alligators in the state, with an estimated 421 per mile.
Partnerships, innovation and aligning economic, political and social incentives are some of the solutions to the nation’s housing affordability issue, experts and policymakers said Feb. 6 at an affordable housing summit in Washington, D.C.

“We have to have intergovernmental partnerships — federal, state, local, tribal working together and we have to have public-private and non-profit working together,” said NACo CEO/Executive Director Matt Chase, who spoke on a panel at the National Association of Realtors Policy Forum on Housing Affordability, held at the National Press Club.

“We really need to peel back the onion on what are the different roles and responsibilities of each level of government?” Chase noted. “The federal government plays a huge role in financing with the Fed, with interest rates, with HUD.”

“From a county level, our tools are typically around taxes and land use if we have that authority,” he said.

The sharing economy and global real estate development are also exacerbating the situation, he noted.

Steve Francks, CEO of the Washington Association of Realtors, explained how the association tried and failed to change laws in his state to open up home ownership to “the missing middle” trying to buy their first home.

While the first attempt at changing laws failed, a second attempt worked, with the state legislature passing 12 of 16 bills. Francks attributed the victory to educating state lawmakers, launching a multimedia campaign and getting help from the National Association of Realtors.

Innovation is going to be key in solving the affordable housing crisis, said fellow panelist Kent W. Colton, president of the Colton Housing Group and senior research fellow at the Joint Center for Housing Studies at Harvard University.

Colton noted that the University of Utah’s Ivory Prize rewards those who come up with creative ways to solve housing problems, in several categories:

- Technology that enables builders to build more homes for less.
- Programs that enable preservation and production of affordable housing in existing neighborhoods.
- Creating financing approaches that helps more people qualify for a mortgage.
- Innovative use of lots and existing housing.
- Removal of regulatory barriers at the local, state and federal level.

One of the finalists this year for the Ivory Prize for Housing Affordability is Community Action of Allegan County, Mich. Its board includes Commissioner Dean Kapenga.

Its Dual Community Development Program addresses education, employment and housing by offering a Pre-Apprenticeship Certified Training, a curriculum that prepares students for building trade careers.

The program is 20 percent classroom and 80 percent applied learning for actual home construction and remodeling projects.

To read more about the finalists, visit: https://ivory-innovations.org/2020-ivory-prize-top-25.
Interactive Map Showcases County Art

**PROBLEM:**
County lacks a tool to track public art throughout communities.

**SOLUTION:**
Launch a public art map and database that consists of art installations throughout the county.

by Rachel Looker  
staff writer

All roads lead to art for county residents in Macomb County, Mich., with the help of an interactive map that tracks art installations throughout the community.

The Macomb County Department of Planning and Economic Development launched the Interactive Map of Public Art in 2018. The crowdsourced database tracks art installations throughout the county.

Leaders from OneMacomb, an initiative that promotes diversity and inclusion in the arts, approached the department and asked for the development of a public art-based platform, according to Megan Ochmanek, a communications specialist for the Macomb County Department of Planning and Economic Development.

County leaders identified a need to promote public art in the county because there was no existing database or list that tracked art in the county’s communities.

The Geographic Information System (GIS) team within the Department of Planning and Economic Development built the platform to allow the public to find art throughout the county, Ochmanek said. A GIS specialist created the mobile and online application.

“People can click it, a little image pops up that says here’s the art, here’s where it’s located, here’s any story or information we have on a piece,” Ochmanek said. “It becomes a really great resource for the public.”

Initially, the Macomb County Department of Planning and Economic Development incorporated known pieces of public art by using information provided by local communities and art centers.

A unique aspect of the public art map is its crowdsourcing feature, which allows members of the community to submit art installations to the map using a Google form, Ochmanek said. The database grew as county residents contributed photos and information about public art throughout the county.

“We really needed to turn to our community to find out where the art was by using their vast knowledge and resources to map our county’s art,” Ochmanek said.

She added that this process allows the public to participate in the public art process and be a part of a greater movement in public art.

When an individual submits a piece of art, the department vets each submission, which must be approved before it is included on the map, explained Jeff Schroeder, deputy director of the Department of Planning and Economic Development.

“I think our communities are getting insight to installations and pieces they didn’t realize were within their boundaries,” he said.

The map is user-friendly and organizes art installations into different categories such as murals, sculptures, architecture or paintings. Users can click on different tabs and view previewed images and background information on different art pieces. A map on the side of the screen shows pinpointed locations for each installment.

The free platform, which includes over 150 art installations, is available to anyone and accessible on a computer, tablet or phone.

“Anyone can use it and find something to do,” Ochmanek said. “If you don’t have the budget to go out and travel, you can have a staycation in Macomb County by using this map and planning your own art trail.”

Ochmanek noted that art adds value to a community by adding economic and community growth through highlighting public art in local communities. “As county leadership, we wanted to make sure we were highlighting what our individual communities were doing,” she said.

The county partnered with local organizations and agencies such as the Detroit Institute of Arts, the Starkweather Arts Center and the Anton Art Center to launch the map.

The department’s communications team created a marketing plan to promote the tool which included a launch event, social media campaigns, graphics for the map, a webpage, invitations, social media and program books. Additionally, following the launch, a social media contest asked individuals to submit art installations to the map over six weeks. Every two weeks, the county randomly selected winners who received prizes donated by local art organizations.

“There’s also a more localized benefit where we’re bringing people together of all races, ethnicities, genders and age demographics to come experience these things in our community,” she said. “We’re hoping that fosters relationship growth, connection, placemaking in our community.”

The map, which is still accessible and open to receive submissions, lives on an existing GIS enterprise platform, which the county subscribes to yearly. There were no additional funds to create the database.

The Macomb County Interactive Map of Public Art can be viewed at GIS.Macomb.Gov/go/Art.

Macomb County’s Public Art Map and Database is the recipient of a 2019 NACo Achievement Award in the Arts, Culture and Historic Preservation category. 

Macomb County News  
Interactive Map Showcases County Art  
FEBRUARY 17, 2020  
NATIONAL ASSOCIATION OF COUNTIES
Tell Your Story

TALK TO CN WRITERS...

Give us a call at 202.393.6226 or email us at cnews@naco.org and we’ll be in touch.

Looking forward to hearing from you,
Mary Ann, Charlie and Rachel

B E H I N D 
T H E 
S E A L
W A S H T E N A W 
Seal designed by Lauren Wild, a county resident from Saline, Mich.

The year of the county’s legal organization, 1826, is included on the bottom of the seal. Washtenaw County uses its seal on county forms, letterheads, web pages, vehicles and publicity materials. The seal includes three abstract symbols.

If you would like your county’s seal featured in “Behind the Seal,” contact Rachel Looker at rlooker@naco.org.

A gear near the top of the inner circle represents industry.

Around the inner circle of the seal, tassels of wheat represent agriculture.

In the center of the seal, a “lamp of learning” features two flames that each represent the county’s two universities – the University of Michigan and Eastern Michigan University.

My favorite way to relax is: Work in my yard.

Number of years involved in NACo: Four
Years in public service: 12
Occupation: Retired after 33 years as a firefighter and retired homebuilder
Education: High school
The hardest thing I’ve ever done was: Fire a childhood friend my first year as an elected official
You’d be surprised to learn: I was an adjunct instructor at a local community college.
The most adventurous thing I’ve ever done was: Rappel over 200 feet off a building on a rope.
I’m most proud of: My two sons and the men they are today.

My favorite meal is: Any seafood
My pet peeve is: Negative people
My motto is: This is the day the Lord hath made, we will rejoice and be glad in it.
The last book I read was: The Guardians by John Grisham
My favorite movie is: It’s a Wonderful Life
My favorite music is: Anything in the ‘50s or ‘60s
My favorite U.S. president: Dwight D. Eisenhower
My county is a NACo member because: We have a voice in our national politics and benefits.
2020 NACo LEGISLATIVE CONFERENCE

WORKSHOPS

The NACo 2020 Legislative Conference features over 25 workshops on critical county issues. Featuring engaging speakers, interactive panels and an emphasis on practical, actionable advice from county officials, thought leaders, federal officials and more, you’ll find workshops on:

- State Policy Trends
- Childhood Development
- Federal Financing and Regulations
- Cyber and Data Security
- Supporting Aging Americans
- Cyber Disaster Recovery
- Outlook for the 116th Congress
- Competing in the Global Market
- USDA Programs
- Addressing Homelessness
- Navigating the Federal Permitting Process
- Future of Work
- Protecting Your County’s Election System
- County Workforce Development
- 2020 Census
- Justice Reform

REGISTRATION
naco.org/Leg2020
I f you look at a “toughest jobs to fill” list in the last several years, you will likely see registered nurse in the top 10. Add the word “correctional” to that title and most human resources directors will raise that ranking up to the top three.

Correctional nurses are an important part of any jail, ensuring the health and care of inmates. The nurses give medications and treat conditions ranging from colds to acute illnesses, while monitoring chronic conditions. Correctional nurses work with a range of age populations and often work with inmates with mental health conditions. The work is rewarding, and correctional nurses are appreciated by those for whom they care. The market demand for nurses combined with the criminal history check, background check, limits to drug use and a polygraph examination needed to work in a jail make it difficult to recruit nurses.

What people imagine to be the conditions of the job also make recruitment difficult. Enter the words “correctional nurse” into a web search and you will see “Is Correctional Nursing Dangerous?” listed as a frequently researched question. Despite the presumptions that may abound, correctional nursing is safe. Behind prison walls, nurses, like all jail staff, are constantly monitored on cameras and work alongside correctional officers. One of the ways to increase recruitment efficiency is to offer nurses flexibility so they can visualize the actual work environment and see the staff teamwork that goes on in a jail.

Another way to build the recruitment pool is to partner with a local nursing program so that nursing students can talk to a correctional nurse, ask questions, and maybe find ways for students to observe correctional nurses’ work. Many nurses don’t even realize there are career opportunities in a jail, so education and outreach are an important step in building the applicant pool. Maybe after a few years in a hospital setting, when the nurse is up for a new challenge, they may remember the dedication and passion with which the experienced correctional nurse spoke to their class.

Who is your applicant pool? Should your jail hire new nursing graduates or nurses without correctional experience? While correctional nurses work on a team with the detention officers, nursing colleagues, a nurse practitioner and under the direction of a Correctional Medical director, there may be few nurses on shift at one time.

It is important to consider the jail’s Medical Division staffing plan, the experience of currently employed nurses, and your established training program when understanding who is in your applicant pool. How many nurses are on staff? How many of them have the experience and communication skills needed to mentor, coach and train? Additional considerations include the number of nurses starting at one time, the number of current vacancies and the shifts you have open.

Understanding your applicant pool and who you are trying to reach with your advertising can not only make your advertising dollars more effective, it can help you to better understand the competitive wage.

There is a certification in correction nursing available from the National Commission on Correctional Health Care (NCCHC). To be eligible for the CCHP-RN certification, nurses must have an active RN license, two years full-time experience as a registered nurse, 2,000 hours of correctional nursing experience in the last three years, and 54 hours of continuing education in nursing with 18 hours in correctional healthcare in the last three years. They must also pass a written exam. Helping existing correctional nurses become certified is a retention strategy and may also be attractive to applicants.

According to RegisteredNursing.org, correctional nurses make an average salary of roughly $68,000 per year. But when recruiting, it’s best to list “Depends on Qualifications” on your posting. Not listing the salary may help you to begin conversations with more experienced nurses looking for something new to engage them in the work and fully utilize the skills they have obtained throughout their career. This strategy can also result in some candidates asking for a lot more money than you intended to offer. Strong communication that includes the many benefits of county employment will be required to come to a mutually beneficial employment offer. Don’t forget to discuss shift schedules, on-call rotation, the amount of overtime expected, etc.

Will there be bonuses? Nurses in all disciplines are familiar with bonuses, whether they be sign-on bonuses or retention bonuses. In government, we aren’t fond of the word bonus, but in order to be competitive, it may be necessary to come up with some one-time payments or additional pay, to fully compensate correctional nurses and help retain them. This might include one-time payments when training is completed or at completion of one year in the position. A nurse may receive additional pay for being a trainer or mentor to new staff. Perhaps they receive a one-time payment for their teamwork and dedication during an extended time of critically low staffing levels, which caused each member of the medical staff to work additional shifts and cancel days off.

When staffing levels are critically low and vacancies are high, it can be tempting for recruiters to hire any nurse applicant who can pass the background process in order to keep up morale and not risk losing additional nurses. Correctional nurses with transferable skills from an emergency room or acute care, who enjoy a fast-paced environment, who have strong self-awareness to recognize unconscious biases, who exhibit strong listening skills, who adapt to change and problem solve, who have skill in triaging cases, who work well as part of a larger team and show compassion to all they care for are ideal candidates for the position of correctional nurse.

The reward of caring for patients in need, of ensuring the right of health care to those in jail, and of treating all individuals with dignity and respect, regardless of circumstance, is a powerful connection to the work. Calling all nurses who are up to the challenge.

Erika Philpot is the human resources director and Rose Winkeler is the deputy county attorney for Coconino County, Ariz.
ALABAMA
The probate court in MADISON COUNTY recently established an Assisted Outpatient Treatment Program to provide support for individuals with mental illnesses. The court-ordered program will include a case manager and a therapist and focus on case management, WAFF-TV reported. Individuals in the program will report every 30 days for assessments and to confirm they are following a treatment plan. The program is a partnership with WellStone Behavioral Health and funding is provided from passport application fees paid to the court. The court will provide county firefighters and emergency medical services employees with the training, which includes a video on warning signs of traffickers and a reference sheet listing red flags to identify human trafficking victims. County officials are also using an app to identify minors who may be vulnerable based on social media profiles. The app identifies suspicious photos, comments or followers that may indicate a higher risk of sex trafficking. In the county, sex trafficking is an $810 million industry, according to the district attorney's office.

CALIFORNIA
- ORANGE COUNTY commissioners designated $10 million for an affordable housing trust fund. The money is part of a 10-year plan to eliminate the affordable housing crisis throughout the county and in Orlando, ranked as "most severe" when it comes to housing affordability by the National Low Income Housing Coalition. According to the Orlando Sentinel, the county attorney's office is drafting an ordinance to establish the trust fund.
- The District Attorney's Office in SAN DIEGO COUNTY launched a training program to help first responders recognize human trafficking victims, Fox 5 San Diego reported. The office will provide county firefighters and emergency medical services employees with the training, which includes a video on warning signs of traffickers and a reference sheet listing red flags to identify human trafficking victims. County officials are also using an app to identify minors who may be vulnerable based on social media profiles. The app identifies suspicious photos, comments or followers that may indicate a higher risk of sex trafficking. In the county, sex trafficking is an $810 million industry, according to the district attorney's office.

HAWAII
The state Supreme Court ruled that MAUI COUNTY does not have the power to include the value of wind turbines when assessing property taxes. The court determined the county exceeded its authority when it changed rules to allow wind turbines to be assessed for real property taxes, The Maui News reported. The court determined wind turbines are not real property because they are not "improvements" or "fixtures."

ILLINOIS
County residents in DUPAGE COUNTY helped celebrate Valentine’s Day with a dog left with free pet food. The bill comes after Maryland Gov. Larry Hogan made efforts to add toll lanes to Interstate 270 and the Capital Beltway to break regional gridlock. Nine Maryland counties on the Eastern Shore already have this authority, according to WTOP News.

MICHIGAN
OTTAWA COUNTY is accepting applications to preserve farmland through the Purchase of Development Rights program. Applicants can apply to preserve agriculturally zoned property by selling the development rights. By creating easements through the sale of development rights, the land is guaranteed to be used for agricultural purposes. Through the program, landowners are compensated for losing development potential, but own and retain all other rights to the land. The county has lost more than 14,000 acres of farmland in the past five years.

MINNESOTA
BLUE EARTH COUNTY is giving county residents a behind-the-scenes look at county government through its 2020 Citizens Academy. The program offers participants a chance to see county employees perform their jobs and learn about how departments serve the community, KEYC reported. County leaders will teach the classes on a variety of projects that include tolls.

FLORIDA
The Animal Services Department in MIAMI-DADE COUNTY spent Super Bowl Sunday celebrating another game — Animal Planet’s Puppy Bowl XVI. The department held a TAILgate party to celebrate three puppies, CafeCito, Goldie and Comet, who were featured in Animal Planet’s big game. CafeCito, a Chinese crested/Yorkshire terrier mix, kicked off the game by scoring a touchdown. The Puppy Bowl helps raise awareness about finding homes for shelter pets. Those who attended the TAILgate party and adopted a dog left with free pet food.

Photo courtesy Miami-Dade County Animal Services

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topics and will provide tours of county buildings. The academy is a free, seven-week program.

**NEBRASKA**

LANCASTER COUNTY commissioners passed the county’s first regulations for livestock and poultry operations. The new rules include stringent setback distances that will make it tougher to build new animal feeding operations. For years, such farms were regulated on a case-by-case basis, but now they must all be at least three-quarters of a mile from a residence. The new rules also established setbacks of 1.5 miles for large operations — open or enclosed — and 1 mile (for medium-sized operations) from schools, churches and similar properties.

The board also voted to require the largest class of animal feeding operations secure bonds that would pay for any future decommissioning of their barns or buildings, the Lincoln Journal-Star reported.

**NEW YORK**

- **ONONDAGA COUNTY** has its first chief diversity officer, former Legislator Monica Williams, who will oversee a new six-person (also new) Office of Diversity and Inclusion. The office will consolidate county operations related to minority hiring. Minority/Women-owned Business Enterprises compliance and human rights. Williams will also help recruit minority candidates and encourage them to take civil service exams, The Post-Standard reported.

- **ULSTER COUNTY** has started charging for the use of its electric vehicle charging stations in response to increased demand. The county began charging 50 cents an hour for parking in an electric vehicle charging spot once the vehicle has finished charging, with an aim toward getting people to move their cars when they’re done with the station. Users get a message on their phone informing them that their vehicle is done charging.

**OKLAHOMA**

The OTTAWA COUNTY commission limited the county’s liability and helped relieve the sheriff’s workload, when it approved a “Title 60 Trust” for the jail. Commissioners say it will protect the county from jail lawsuits, to an extent, and help with budgeting. The trust will be made up of seven unpaid members — the sheriff, the commission chairman, three members that are nominated by the commission, a member nominated by the district judge and a member nominated by the city of Miami, according to KOAM News. All of the jail staff would then become employees of the trust, and the trust would hire an administrator.

**VIRGINIA**

- **ARLINGTON COUNTY** is applying to the state wildlife resources commission for a lake to be designated a no wake zone after several residents of the lake expressed safety concerns. The danger of jet ski and boat traffic and a growing number of piers is driving much of the concern, the Salisbury Post reported.

- **ROWAN COUNTY** is applying to the state wildlife resources commission for a lake to be designated a no wake zone. After several residents of the lake expressed safety concerns, the county’s Department of Environmental Resources has received numerous complaints from people about vehicles being left in charging spots overnight or long after the vehicles are done being charged, The Daily Freeman reported. The county has the capacity to accommodate 38 vehicles at any one time.

- Efforts to reduce salt pollution have centered on using brine instead of rock salt to melt ice on the roads. With the supply falling, WARREN COUNTY might make its own. Brine sticks to pavement, prevents ice buildup more effectively and reduces the amount of salt pollution in groundwaters, lakes and streams.

County Public Works Superintendent Kevin Hajos told public works supervisors that Warren County could make its own salt brine — for 6 cents per gallon rather than the 25 to 30 cents per gallon the county routinely paid, The Sun reported. The brine-making equipment would cost between $40,000 and $50,000, and the Lake George Park Commission is seeking grant funding for the apparatus. Warren County can store 18,000 gallons of brine in its six 3,000-gallon brine tanks.

**NORTH CAROLINA**

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**WISCONSIN**

Blind transit users will have help navigating the MILWAUKEE COUNTY bus system with the use of a smartphone app. “Aira” users can receive free, one-on-one assistance riding the bus, connecting riders with professionals trained to help read signage, identify obstacles, identify bus stops and offer verbal step-by-step travel directions. It uses a device’s camera and GPS signal to offer accurate real-time support and guidance. In addition to the more than 5,000 bus stops in Milwaukee County, Aira is also available at 45 other locations, including Milwaukee Mitchell International Airport, the Milwaukee County Courthouse, the Marci P. Coggs Human Services Center, the Vel R. Phillips Youth and Family Justice Center, the Milwaukee County Zoo and dozens of Milwaukee County parks.

**News from Across the Nation is compiled by Charlie Ban and Rachel Looker. If your county has an item we should consider, please contact cban@naco.org or rlooker@naco.org.**
States have tested more than 300 for coronavirus

From CORONAVIRUS page 3

communication specialist for Public Health Seattle and King County. The individual also worked in King County.

Similar to Harris County, King County officials are working to keep county residents informed with new information translated into different languages.

The county uses its website and also has a blog that features question-and-answer articles with the county health officer. With a large Asian and Asian American community in King County, Li-Vollmer said county officials created materials emphasizing that viruses do not discriminate and that race, ethnicity and nationality are not a risk to contracting the virus.

“We know that those communities have some very specific concerns and that they have been subject to discrimination and harassment related to coronavirus, so we’ve... made sure they had their questions answered by our health officer and our health director,” she said.

According to a statement from the National Association of County and City Health Officials (NACCHO), local health departments are working to protect the public’s health by communicating with transportation officials, educating healthcare providers and communicating with the public about best practices to reduce the spread of infectious diseases.

“Local health departments are working with their federal and state counterparts, along with healthcare partners, to ensure that our communities are doing all they can to prevent domestic transmission and prepare for possible cases in their communities,” said E. Oscar Alleyne, NACCHO’s chief of Programs and Services, in a statement.

More than 60,000 people were infected with the virus worldwide as of last week, the CDC reported.

There have been more than 1,000 deaths reported in China, as of last week.

While there is currently no vaccine to prevent the 2019 Novel Coronavirus infection, the CDC reported a World Health Organization team is traveling to China to study the virus.

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More than 60,000 people were infected with the virus worldwide as of last week, the CDC reported.

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While there is currently no vaccine to prevent the 2019 Novel Coronavirus infection, the CDC reported a World Health Organization team is traveling to China to study the virus.

In the MOVE...

NACo STAFF

• Aaliyah Nedd has joined NACo as an administrative assistant in the Executive Department, providing comprehensive support to the Executive Director and Board members. She was previously an executive assistant and translator, specializing in Russian and Spanish. She earned a dual bachelor’s degree in International Studies and Russian from the University of Florida.

• Executive Director Matt Chase stressed the need for powerful storytelling in federal policy efforts Feb. 10 when addressing the National Association of Regional Councils’ National Conference of Regions in Washington, D.C.

• Associate Legislative Director Arthur Scott spoke about data’s role in broadband funding while addressing students Feb. 12 at Texas A&M University’s V.G. Young Institute of County Government, in Brazos County, Texas.

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A FIX FOR HEALTHCARE IN JAILS

Counties seek reform of policies hurting their communities.
The federal Medicaid Inmate Exclusion policy (MIEP) is putting undue hardships on county judicial, law enforcement, public safety and human services systems across the nation and is a threat to the balance of health care costs, quality and access. The impacts of this policy are poorer health outcomes and quality of life for our residents — as more than 95 percent of inmates and those being detained eventually return to the community, bringing their health conditions with them.

It drives the over-incarceration of those suffering from mental health and substance use disorders, as our county jails are now among the largest behavioral health facilities in the nation.

It also puts an undue financial burden on local taxpayers to provide the full cost of health treatment services that would normally be shared among federal, state and local government partners.

In early 2019, the National Association of Counties (NACo) and National Sheriff’s Association (NSA) convened a joint task force to identify and raise awareness about the negative impacts of the MIEP.

The joint task force is made up of members representing both county law enforcement and local elected officials. The group’s goal was four-fold:

- First, the group sought to educate federal partners and the general public on the negative impacts of the inmate exclusion policy.
- The second goal was to amend this federal policy and identify local innovations that would complement legislative changes and strengthen the local health care safety-net for inmates returning to their community.
- The third was to develop resources that provide context to the negative impacts of health care discontinuity for jail detainees — especially for individuals plagued by significant substance use disorders and mental illness.
- The final goal was to consolidate information gleaned in Task Force discussions into a comprehensive report outlining recommendations and best practices that spanned federal, state and local governments.

Through the advocacy efforts of the task force, two key pieces of legislation have been introduced in the Senate (S. 2628 and S. 2626) that will amend Section 1905(a)(A) of the Social Security Act and protect access to health care benefits such as Medicaid, Medicare, CHIP and VA Health benefits for pretrial detainees. The Equity in Pre-Trial Medicaid Coverage Act and the Restoring Health Benefits for Justice-Involved Individuals Act were introduced last October. Since then, the task force has aimed to obtain bipartisan support for the bill, and secure companion legislation in the House.

Beyond federal policy change, the task force outlined ways in which states and counties can look to regulatory changes to build the local capacity to provide health services, such as:

- creating flexibility around the Institute for Mental Disease (IMD) exclusion policy
- expanding mechanisms for data collection and sharing
- and strengthening partnerships between counties and the Department of Veterans Affairs.

The group also identified best practices for improving the provision of health care for justice-involved individuals, by reinforcing community partnerships, identifying individuals with health care needs, creating linkages to health service providers and leveraging federal grant funding.

The work of this task force over the past year has made the need for reform evident. Amending federal policy is vital to turning around our nation’s behavioral health crisis, and the responsibility of change must fall equally among federal, state and local governments.

Blaire Bryant is an associate legislative director concentrating on Health in NACo’s Government Affairs department.
LEVERAGING NACo’S BEHAVIORAL HEALTH AND JUSTICE INITIATIVES

by Nastassia Walsh

The 11 million admissions to county and other local jails each year, an estimated two million of them involve a person with a serious mental illness. Nearly three quarters of people with serious mental illness such as bipolar disorder, major depression or schizophrenia who are arrested and detained in jail also have a co-occurring substance use disorder.

Ensuring that these individuals have access to appropriate and quality health care while they are detained and are connected to treatment and services immediately upon release from jail is key to their recovery and to keeping them from returning to jail.

Counties across the country are building innovative partnerships and policies to ensure that people with behavioral health treatment and other medical needs are receiving it before, during and after a jail stay. Not only do these partnerships result in positive outcomes for individuals served, but they support efficient use of scarce county resources.

NACo has several initiatives to support this work happening locally that all counties are welcome and encouraged to join and leverage as they continue their own efforts to support their residents.

Stepping Up

More than 500 counties have committed to implementing innovative policies, practices and programs to reduce the number of people with mental illnesses and co-occurring substance use disorders in jails through the national Stepping Up initiative.

Stepping Up is a partnership between NACo, the Council of State Governments Justice Center and the American Psychiatric Association Foundation that provides counties with a framework for strategic planning and collaboration across local behavioral health and justice agencies. From training law enforcement officers and providing crisis services to helping people get connected to treatment and housing upon release from jail, Stepping Up counties are reducing their jail populations and improving the way they interact with their most vulnerable residents. Find out more at www.NACo.org/SteppingUp.

Data-Driven Justice

In addition, 96 counties engage in Data-Driven Justice (DDJ), a project of NACo and Arnold Ventures that supports jurisdictions in their efforts to share data and information to better align local resources to respond to people experiencing a behavioral health crisis. In any given community, a small number of individuals cycle through health, human services and justice systems, including homelessness services, hospitals and jails. Counties are using this project to create partnerships to share data so they can identify these “frequent utilizers” and collaborate to provide better services and supports to these individuals to help in their recovery and long-term success.

From navigating HIPAA and building technology platforms to pairing law enforcement officers with mental health clinicians, DDJ counties are collaborating to improve outcomes for people in crisis. Find out more at www.NACo.org/DataDrivenJustice.

Innovating to improve service for patients/inmates

by Sean Moody

I feel lucky to work every day with a team that is excited to work in what some people would imagine being the most challenging work setting ever — the county jail. Together, we manage the health care needs of a large population of men and women detained at two facilities. Doing this job well requires empathy, kindness and some days, a lot of grit. We call the people we serve patients — not inmates — and strive to offer them high quality and timely care.

No one wants to wait a long time to get an appointment with a doctor, and this is no different for patients in our jails. A large majority of the patients we serve suffer from moderate to serious health and behavioral health issues. Waiting means their problems might get worse, which is why I was very concerned in the fall of 2019 when our wait times for non-urgent or emergent appointments spiked at our facilities.

With four unfilled positions, we were 33 percent below our ideal staffing model, which backed up our systems and contributed to an average wait time of nearly 45 days and in the worst-case scenario as long as 55 days for some patients, well above the targeted 14 days or less.

As we worked to address the staff vacancies quickly, we recognized that this wasn’t the only problem. A root cause analysis helped us to identify other major drivers to our growing problems. Putting a long list on a whiteboard, several distinct key issues stuck out: Our clinic scheduling processes, our demand into the system and inefficiencies in the flow of the medical clinic.

To improve our system, we agreed to test some new ways of doing business:

We decided to institute a practice of meeting with patients who had the longest wait times to see if their appointments were still needed. This reduced overall demand by 1.5 percent of referrals at the time of these check-ins.

We agreed that clinical staff who refer patients for medical visits check the health record to ensure that the patient had not already been referred for the same issue. This reduced additional demand coming into the staff resource-strained system.

And we instituted a practice of having our clinic schedulers “combine” referrals into one visit so that multiple referrals could be addressed in one visit for patients who had more than one referral to the clinic, and this reduced the number of times a patient had to be escorted to the clinic on separate occasions.

The cumulative impact of these changes, plus our progress in filling our staff vacancies, resulted in a significant reduction in wait times. As of this article, the average wait time for our non-urgent medical visits is 16.6 days. Our staff’s combined ingenuity has resulted in a 62 percent reduction in wait time in just eight weeks after it had reached its peak.

Using collaboration, talent and knowledge present in our workgroups, we will continue improving our policies and processes to guide success in reducing those wait times even further. At Jail Health Services in King County, Wash., we are living up to the slogan pinned on our bulletin board: “We Are One Team.”

Sean Moody is director of Jail Health Services, Public Health, Seattle and King County, Wash.; Chris Hagleywood contributed to this article; he is Health Services Administrator, Jail Health Services, Public Health, Seattle and King County, Wash.
The U.S. Constitution is clear: individuals are presumed innocent until proven guilty. Despite this clear constitutional mandate, people who receive federal health benefits such as Medicaid, Medicare or CHIP benefits for juveniles are stripped of those benefits when arrested and jailed for an alleged crime, before conviction. From that starting point comes this report by a joint task force of the National Association of Counties and the National Sheriffs’ Association.

The Medicaid Inmate Exclusion Policy (MIEP), which denies or revokes federal health and other benefits, is a violation of the equal protection and due process clauses of the 5th and 14th amendments of the U.S. Constitution, respectively. This policy also places undue financial and administrative burdens on local jails and produces unfavorable health outcomes for individuals and communities.

By contrast, the uninterrupted provision of health care helps our residents break the cycle of recidivism exacerbated by untreated physical and mental illnesses and substance use disorders.

To address the challenges posed by the MIEP, NACo and NSA formed a joint task force representing county leaders, law enforcement, judges, prosecutors, public defenders, behavioral health experts and veterans’ service providers. Over the past year, our joint task force explored the impacts of this federal policy and its contribution to the national behavioral and mental health crisis and rates of recidivism in our nation’s jails.

As detailed in this report’s data on local justice systems, counties nationwide — especially our jails — face an increasing number of pre-trial detainees and inmates experiencing mental health complications, often with co-occurring substance use disorders. Local jails serve as one-stop treatment centers for individuals with these illnesses. Without adequate community resources, jails have become de-facto behavioral health hospitals and treatment facilities.

Access to federal health benefits for non-convicted individuals would allow for improved coordination of care, while at the same time decreasing short-term costs to local taxpayers and long-term expenses to the federal government. Cost savings could be invested to improve post-release care coordination that would decrease crime, reduce recidivism, and greatly contribute to the overall health and safety of our constituents.

Through the recommendations brought forth in this report, the members of our joint task force hope to demonstrate that improving care coordination across federal, state and local governments can alleviate the strain that the Medicaid Inmate Exclusion policy has placed on our local criminal justice system, our counties and most importantly, our residents.

The NACo-NSA Joint Task Force on Pre-Trial Detainee Health Care and Recidivism will release its report, “Addressing the Federal Medicaid Inmate Exclusion Policy” at NACo’s Legislative Conference, Feb. 29-March 4, in Washington, D.C.

**HEALTHCARE IN JAILS: BY THE NUMBERS**

- **People who cycle in and out of jail annually**: 11 million
- **People detained charged, not convicted**: 500,000 on any given day
- **Detainees who receive a prison sentence**: 4 percent
- **People in jail who are pre-trial detainees**: Six in 10
- **People in jail who can’t afford bail**: 34 percent*
- **Increase of pre-trial detainees, 1970-2015**: 433 percent
- **Inmates with chronic medical condition**: 40 percent
- **Inmates with a mental disorder**: 44 percent
- **Inmates with substance use disorder**: 63 percent
- **Days it takes to re-enroll in Medicaid**: Up to 90 days
- **People returning to jail**: 32 percent
- **Number of county jails**: 3,283*

*Prisonpolicy.org
WASHINGTON COUNTY, MD. 
TARGETS ADDICTION IN ITS JAIL

by Charlie Ban
senior writer

WASHINGTON COUNTY, MD.

With a captive audience and an emphasis on rehabilitation, jail stints can be the ideal opportunity to address addiction problems.

Seeing nearly two-thirds of its population entering with opioid addiction as their primary substance abuse issue, the Washington County, Md. Detention Center has made addiction treatment a priority, with more measures still to come.

“It’s a hard pivot from earlier jail policy, which was mostly just detox, with no preparations for returning to the general population after release. The county’s health department assesses inmates before their release and a contractor administers Naltrexone, a medication that can decrease the desire and dependency on opioids.

“They used to have individuals overdosing in the bathrooms before they even left the jail,” said Victoria Sterling, Washington County’s director of behavioral health.

“There wasn’t any real treatment in the jail. Now, we meet people where they are instead of where you want them to go because that’s not always going to happen. Those expectations (are) going to be detrimental to their health.”

Washington County sits at the junction of two interstates and has been designated a High Intensity Drug Trafficking Area by the Drug Enforcement Administration.

“You can be in Pennsylvania, West Virginia or Virginia in 10 minutes,” Sterling said. “We have a large transient population, and people can do some ‘doctor shopping’ to access more prescription drugs.

Inmates who have dealt with opioid addiction receive overdose-reversing Naloxone upon release, an exclamation point at the end of a sentence that involved plenty of therapy. It’s the culmination of the Jail Substance Abuse Program, a nine-week program that includes assessments, counseling, three hours of group therapy each week and, next year, the addition of medication-assisted treatment in the form of Suboxone, which is already available to pregnant inmates. And Sterling says one of the most crucial things the county can give its inmates to help their health outcomes is information.

“One of the most important things that people need to know is harm reduction principles, because it’s going to be the most important tool we have fighting this epidemic,” Sterling said. “It opens doors to resources.”

She has also seen strong support for the county’s drug court, which includes counseling from people who have beaten their addiction.

“I’m seeing peer counselors who were in treatment earlier in my career,” Sterling said. “That’s a sign this is working.”

Washington County recently changed eligibility rules so that inmates can choose the program, rather than just being ordered by the court to participate.

“That really removes an obstacle for people,” she said.

Sterling previously worked for neighboring Frederick County, Md. and in the private sector before coming to Washington County. She has seen attitudes toward addiction, outside of the healthcare field, change during her career.

“I came in when things were starting to change,” she said. “When I started, the jail focused on punishment, more than treating addiction problems. Now I see things evolve, particularly having access to treatment and reentry services.”

She noted that the jail now offers comprehensive discharge plans. Re-entry services, once just nine months, have been extended to a full year before release. And inmates are reenrolled in Medicaid, which protects 30 percent of Washington County’s residents eligible for.

“Before, we did plan, and maybe it was carried out, but you never knew,” she said. “There wasn’t coordination or follow-up.”

She credited Sheriff Douglas Mullendore with the change.

“He’s very supportive,” Sterling said. “He knows we can’t arrest our way out of the problem. And the jail was overcrowding with people who needed treatment.”

In addition to substance abuse services, the jail is also offering wellness training, which includes mindfulness, yoga, nutrition consultation, meditation and integrative health.

“They touch on things like how sleep, stress and nutrition affect your mood,” Sterling said. “All helpful for improving overall health when they’re out of jail.”

There are still challenges. If an inmate posts bond or is transferred to the state prison system, their treatment is interrupted.

“The state system doesn’t do anything quite like this,” Sterling said.

Washington County’s program treated 350 inmates in 2019 and it is funded by the state, with supplemental state grants. Addiction recovery is still an uphill battle, and opioids aren’t the end of it.

“Even when you take away the opioids, they’ll still have alcohol problems,” she said. “We’ve always had issues with substance abuse, alcohol will always be prevalent here. But I’m hopeful we’re giving people the tools to succeed once they are released.”
A collaboration with service providers in Fairfax County, Va. is providing behavioral health services to individuals who become involved in the criminal justice system and are living with a mental illness.

The Fairfax County Adult Detention Center’s average population in fiscal year 2019 was 964. Around 20 percent of the jail’s inmates have been diagnosed with a serious mental illness.

The Fairfax Falls Church Community Services Board (CSB), which includes Fairfax County, the City of Fairfax and the City of Falls Church, operates as part of the Health and Human Services System in Fairfax County. The board provides services for individuals of all ages in the community who experience a mental illness, substance use disorders or developmental disabilities.

The CSB oversees mental health and substance use services and established a staff on site at the Fairfax County Adult Detention Center to address the needs of incarcerated individuals living with mental illnesses, said Marissa Farina-Morse, a CSB mental health counselor who oversees mental health and substance use services at the detention center. The board provides behavioral health services including crisis response, assessment and referrals.

“We have a really unique situation here with the Community Services Board in that we are the provider of mental health and substance use and developmental disabilities services in the community, and then we’re also here in the jail,” Farina-Morse said.

CSB staff includes therapists, psychiatrists, nurse practitioners and nurses who work inside the Fairfax County Adult Detention Center.

With the CSB working both inside the detention center and outside in the community, CSB staff are able to easily partner with outside providers to meet an individual’s needs, allowing inmates in the jail access to a variety of services, Farina-Morse said.

“When someone comes in here [the jail], their mental health services are a continuation of what they have been getting in the community,” she said.

The CSB staff does not do it alone. The board partners with the Fairfax County Sheriff’s Office to provide emergency mental health needs and case management services. Fairfax County Sheriff Stacy Kincaid has made mental health a key priority in the county, explained Laura Yager, director of Correctional Health and Human Services for the Fairfax County Sheriff’s Office. Kincaid ensured the entire workforce, including both civilian and uniform, were trained in mental health first aid in partnership with the CSB.

“We’ve undergone major workforce development in understanding mental illness and addiction issues across our system and we’ve seen a huge change in how we interact with people,” Yager said.

As of 2018, Fairfax County saw nearly 735 graduates who completed Crisis Intervention Training.

“I think it’s pretty amazing that from the food service to the custodial staff to anyone who interacts with an inmate — all are trained to identify mental illness,” Yager said.

“The position I’m in didn’t exist a year ago,” Yager added. “It’s a position that she [Kincaid] created to really assure that we’re co-treating people, that our partnership between the sheriff’s office and CSB exists.”

When a person enters the detention center and goes through the booking process, a nurse asks questions during a complete mental health screening to determine one’s potential to have a serious mental illness or substance use disorder. If someone screens positive, they are referred to the CSB team within the Adult Detention Center, Farina-Morse said.

The Fairfax County Adult Detention Center’s Behavioral Health Unit serves as a special housing unit for inmates with serious mental illness. The unit is in close proximity to CSB staff and offers jail, trauma and treatment groups and recovery-oriented group programming. Individuals in the unit participate in recreational groups where they have opportunities to work on social skills and interact with others.

“Our goal is to not house people indefinitely or for the duration of their stay in the Behavioral Health Unit, but it is a place for some of the most vulnerable individuals where we can have them be in one place,” Farina-Morse said.

Individuals in the unit have more spacious single cells where they can turn the lights on and off themselves, have windows with natural light and may have the option to leave their cells during the day and participate in recreational activities.

Deputies who have crisis intervention and mental health training can make the determination if an individual should move to the Behavioral Health Unit.

“They become a part of the treatment team,” Farina-Morse said. “We want to hear from the deputy — what they are observing — and the deputies are also working and helping build rapport and they are part of the treatment.”

Some individuals with mental illnesses who commit low-level offenses may not even find themselves booked into the detention center. Diversion First, a county initiative, provides alternatives to incarceration for individuals with mental illness, substance use disorders or developmental disabilities who have become involved in the criminal justice system with low-level offenses.

The Merrifield Crisis Response Center, which opened in 2015, allows law enforcement officers to divert an individual with a low-level offense to treatment in lieu of arrest, Farina-Morse said. At the center, individuals are evaluated by a mental health professional. Those who are diverted from jail are not arrested or charged.

“That’s been an amazing and a real partnership with not just the sheriff’s office, but Fairfax County police, who also provide staffing because law enforcement has to be on site there 24 hours per day,” Farina-Morse said.

In 2018, 530 people were diverted from potential arrest and brought to the Merrifield Crisis Response Center. The center had over 6,660 total service encounters that year.

“It’s an opportunity to intercept someone with a mental illness or behavioral health issue and get them to treatment,” Yager said. “The whole idea is to identify and refer appropriately. Nobody is going to get well getting arrested who has a behavioral health issue.”

Both Farina-Morse and Yager emphasized the collaborative partnerships to address behavioral health needs among various organizations within the county including medical services, behavioral health services, the CSB and the Sheriff’s Office.

“I think the common ripple of everything we’re talking about is this collaborative relationship because we need each other to do the jobs we both have to do,” Yager said.
A RIGHT PATH CAN HELP YOUR CORRECTIONAL HEALTHCARE SERVICES

by James Martin

Ask those who work in your jail and see if this sounds familiar. An inmate pops a sprinkler head, causing a cell to flood, which causes the facility to go on lockdown. Oh yeah, this is right after you’ve given your diabetes patients their insulin before their evening meal and food service is now delayed.

No? Try this one. Your health services staff and your correctional staff don’t exactly “get along” because the flow of necessary information is fragmented. Still nothing? Here’s one everyone has dealt with. A person is booked into the jail and has mental health needs. They are all over. A person is booked into the jail and needs to be monitored for suicide precautions. What are you going to do? What did your jail do?

After 22 years in law enforcement, the last nine as an assistant jail commander, and now as vice president of program development for the National Commission on Correctional Health Care, I have just about seen it all. During those jail years, I was the liaison to our health services unit. I worked alongside the health services staff, dealing with the scenarios I just described.

I remember one inmate who was in our facility for a number of years. Because of his charges, his personal actions and our placement criteria, he was isolated from normal daily interaction. Now, I am not talking “Cool Hand Luke” put-them-in-the-box isolated, but not “White Collar” minimum security sort, either. Due to factors outside our control, his health deteriorated to the point where he was necessary to get him court-ordered to a facility that could care for him appropriately. Six months later, he came back fixed; six months later, he was broken again. This pattern was repeated several times.

Jails across the country are facing many of the same problems. Lack of funding, inexperienced staff, lack of education and training, and not following nationally recognized standards leads to poor outcomes. For instance, jails struggle with not being able to force medication on people who need them or care for patients with chronic care needs. They struggle with lack of mental health professionals trained to meet this population’s needs, and they struggle with meeting unfunded mandates from their states.

So, where do we go from here? I had a very good relationship with my health services administrator and saw value in the nationally recognized standards for health care services in jails. With their help, we developed responses to critical incidents for when jail operations were disrupted yet health care services needed to continue. With their help, our administrative meetings became much more useful and our communication gap closed. With their help, we developed a safe and appropriate suicide prevention plan. My health services administrator and our correctional leadership team had a plan and a path to follow. We used the resources available to us and to each and every jail across the United States. This helped our facility develop efficient and effective health care services and the path was easy to follow.

A thorough assessment of your health care system may warrant an external body to speak to you about what your goals are, where your facility currently stands and where you want to go. It is tough to take an objective look at what you are doing, but with an unbiased assessment, your team can develop a proactive approach and set the stage to meet your desired outcomes.

Education is key. Correctional health care is incumbent on all involved staff, not just the clinical and health care staff. Correctional officers are with the inmate population 24 hours a day. They are the eyes and ears of your facility. With proper training and preparedness, they can recognize changes in an inmate’s demeanor, health and mental stability before anyone else. Why limit them to the basic annual training requirements? Why not offer them more? Offering opportunities for specialized training not only increases quality of care, but also boosts staff morale.

Certification can help your staff develop professionally. If they are not already, allow them to become involved in a CCHP program or become Certified Correctional Health Professionals. Those professional development opportunities can then be recognized in a number of ways, bolster self-confidence and enhance the working environment.

Pursuing accreditation and living the accreditation lifestyle is key for an efficient and effective health care and mental health care delivery system. Throughout the years, I have heard more than a few sheriffs tell me they follow national standards, but they do not pursue accreditation. In those cases, it is all too easy to “skip” a standard here and “fudge” one there. When corners are cut, good outcomes can turn into bad outcomes very quickly. Accreditation offers assurance both internally and publicly that a facility holds itself to high standards of care.

Recently, I began working with a clinician with an economics background. Together, we are seeking to prove that following these pathways and living the accreditation lifestyle will enable facilities to create an efficient and effective health care system while lowering health care costs at the same time.

A reactive approach is always more expensive than a proactive one. Those who choose to react after a bad outcome, and the lawsuit that almost inevitably follows, will spend more money on the back end than the cost of taking a proactive approach on the front. Don’t believe me? Google “jails sued.” In about 50 seconds, your search will result in more than 20 million headlines.

Listen to your own stories and ask yourself if you want to be in control of your own destiny. Using the resources that are available to you can improve a facility’s operational system, personnel and outcomes. Choosing the right path is critical.

Lt. James Martin, MPSA, CCHP (Ret.), spent nearly 23 years with a sheriff’s office in Indiana, earning the rank of lieutenant and becoming an assistant jail commander. Martin is an expert on NCCHC accreditation and has spoken nationally on correctional health care and mental health topics, tactical communications for health care workers and building better relationships between custody and health care. He is the vice president of Program Development at the National Commission on Correctional Health Care.