CALAVERAS COUNTY, CALIF. Connecting Justice-Involved People to Treatment and Services

The County of Calaveras is a diverse, rural community about an hour southeast of Sacramento in Northern California. In March 2016, the Calaveras County Board of Supervisors passed a resolution to join the national *Stepping Up* initiative and commit to safely reducing the number of adults with mental illnesses in the Calaveras County Jail by connecting them to community-based treatment whenever possible. In May 2018, Calaveras County was selected for the inaugural cohort of *Stepping Up* Innovator Counties due to its efforts to accurately identify and collect data on individuals with mental illnesses coming into its jail.

Community Corrections Partnership (CCP)

In 2009, the U.S. Supreme Court ordered the state of California to dramatically reduce its prison population. In response, the state passed AB109: Public Safety Realignment. The law transfers responsibility for supervising people with certain felony offenses and those on parole to county jails and supervision. As part of AB109, each county was directed to create a Community Corrections Partnership (CCP) to develop an implementation plan for realignment and to allocate state funds to the various county and city agencies. In Calaveras County, the CCP meets bimonthly and is composed of seven voting members: the chief probation officer, sheriff, district attorney, public defender, presiding judge, director of the county health and human services department and chief of police. This group also serves as the planning team for the county's *Stepping Up* efforts.

Identifying People with Serious Mental Illness in Jail

In March 2018, through collaboration with the CCP, the jail implemented a mental health screening and assessment process to better identify people with serious mental illness (SMI) coming into the jail. Jail intake staff now conduct the Brief Jail Mental Health Screen on every person entering the jail to identify symptoms of SMI. The results of the screen are then entered into the jail's client management system (CMS) and positive screens are shared with in-jail clinicians who can match individuals to community behavioral health records or conduct full assessments to confirm the presence of SMI. In addition, the CCP data analyst can pull information from the CMS to analyze data by mental health status, charges, length of stay, participation in in-jail treatment programs, post-release supervision status and more. While the screening process is new, the CCP used the initial information to develop a baseline count of people with SMI in the jail and hopes to use this process to track trends over time.



POPULATION: 45,578

collaboration with the In Stepping Up initiative, the **Data-Driven Justice initiative** and the John D. and Catherine T. MacArthur Foundation's Safety and Justice Challenge, the Substance Abuse and Mental Health Services Administration (SAMHSA) convened a **Best Practices Implementation** Academy to Reduce the Number of People with Mental Illnesses and Substance Use Disorders in Jails (BPIA) in April 2018 in Alexandria, Va. At the BPIA, delegations from 24 jurisdictions involved in one or more of the three initiatives met to showcase best practice strategies and advance implementation efforts to prevent or reduce the jail involvement of individuals with mental illnesses and substance use disorders.

This case study is part of a series highlighting the six counties that constituted the "Best Practices" teams representing the **Data-Driven Justice initiative** and the **Stepping Up initiative** at the BPIA.



Continuum of Care

The CCP funds several in-jail and community-based positions to work collaboratively to serve individuals with SMI in the justice system. One licensed mental health clinician works solely in the jail and conducts mental health assessments on those who screen positive for symptoms of SMI. She also provides one-on-one and group therapy sessions, including relapse prevention, cognitive behavioral therapy, art therapy and more. Since this clinician started, the number of people in the administrative segregation unit has fallen from 10 to one or none and jail grievances have fallen from 10 to 12 per month to almost none. The in-jail clinician has also been critical for medication compliance for people with SMI and works closely with the substance abuse counselor to help engage people in treatment when needed.

The in-jail clinician also collaborates with a community-based mental health clinician who is stationed at the Day Reporting Center, which is located next door to the county's mental health clinic. This clinician works with individuals, their probation officers and the in-jail clinician on discharge planning to ensure a smooth transition back to the community. This may include enrollment in health care insurance, referrals to treatment and services or connecting individuals to peer-run groups. She also provides community-based treatment and connections to services for people on parole or probation. Probation officers work closely with these clinicians and are dedicated to long-term compliance and success for the people they supervise.

Finally, a behavioral health case manager works with the two clinicians as well as law enforcement to respond to people experiencing a mental health crisis in the community. The case manager is stationed at dispatch and will respond with officers to calls for service involving people experiencing a mental health crisis to help de-escalate the situation. She will also respond to crisis situations inside the jail or to referrals from family members. Together, these staff create a continuum of care to help individuals connect to services and reduce their likelihood of returning to jail.

Calaveras County has made great strides with helping people who come into the justice system who have mental illness. The next step for the CCP and the county is to focus on more prosocial and proactive supports and connections in the community to keep people from ever coming to the attention of the justice system.

SAMHSA contracted with Policy Research Associates (PRA), which operates SAMHSA's GAINS Center for Behavioral Health and Justice Transformation, to facilitate the BPIA. Additional partners included the lead organizations of the Stepping Up initiative (the National Association of Counties. Psychiatric the American Association Foundation and The Council of State Governments Justice Center), the Data-Driven Justice initiative (the National Association of Counties and the Laura and John Arnold Foundation) and the John D. and Catherine T. MacArthur Foundation's Safety and Justice Challenge.

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