Stepping Up: Strategies to Measure Prevalence and Assess the Needs of Individuals with Mental Illnesses in Jails
Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails
Webinar Recording and Evaluation Survey

• This webinar is being recorded and will be made available online to view later
  – Recording will also be available at www.naco.org/webinars

• After the webinar, you will receive a notice asking you to complete a webinar evaluation survey. Thank you in advance for completing the webinar evaluation survey. Your feedback is important to us.
Tips for viewing this webinar:

• The questions box and buttons are on the right side of the webinar window.

• This box can collapse so that you can better view the presentation. To unhide the box, click the arrows on the top left corner of the panel.

• If you are having technical difficulties, please send us a message via the questions box on your right. Our organizer will reply to you privately and help resolve the issue.
Poll Questions
The Problem:

www.stepuptogether.org
Stepping Up Steering Committee
Get Started

What You Can Do

Counties that have passed resolutions  Individuals who have signed up

Whether you are a state or local policymaker, a criminal justice or behavioral health professional, an individual living with mental illness, or someone who is simply committed to reducing the number of people with mental illnesses in jails, you can play a critical role in this initiative. When you click to take action, you will receive an email with information about how to get involved.

Despite important efforts already underway in many counties, there is an urgent need to address this national crisis using a common data-driven process that can encourage innovation and bring good work to scale. The time is now to launch a nationwide initiative to provide coordinated support to counties to help people living with mental illnesses stay out of jail and on a path to recovery.

www.stepuptogether.org/what-you-can-do
Accessing Resources: Online Toolkit

- Webinars
- Self-Assessment Tools
- County Examples
- Planning Exercises
- Research

Diagram showing the cycle of accessing resources.
Stepping Up Webinar Schedule

• **Getting Started with Stepping Up** May 14, 2015. Archived.

• **Strategies to Measure Prevalence and Assess the Needs of Individuals with Mental Illnesses in Jails** June 30, 2015 at 2pm ET.

• **Effective Law Enforcement Strategies** August 20, 2015 at 2pm ET.

• **Effective Pretrial Strategies** September 10, 2015 at 2pm ET.

• **Effective Reentry Strategies** October 8, 2015 at 2pm ET.

• **Preparing a Plan and Tracking Progress** November 19, 2015 at 2pm ET.
Today’s Speakers

Dr. Fred Osher, MD
Director of Health Systems and Services Policy
Council of State Governments Justice Center

Tim DeWeese
Director
Johnson County Mental Health Center
Johnson County, Kansas
Speaker: Dr. Fred Osher
Screening and Assessment of Mental Illnesses in Jail Populations

Fred C. Osher, M.D., Director of Health Systems and Services Policy

Council of State Governments Justice Center
Introduction

Screening and Assessment

Establishing Prevalence Rate

Summary
• In order to safely and effectively reduce the number of adults with mental illnesses in jails, counties need to know:
  – who is entering and leaving the jail;
  – their pre-trial risks;
  – the number of people with mental illnesses; and
  – the extent of their complex risks and needs—for both behavioral health and public safety outcomes.
“Tilling the Soil” - Cross-System Collaboration

- Develop multi-system partnerships with shared goals and commitments
- Understand the context of the work and available resources and/or gaps
- Work together to develop comprehensive strategies and implement policies and practices
- Build upon shared goals over time and across the criminal justice continuum
An early goal is to establish a prevalence rate of mental illnesses in your jail in order to:

- Understand scope of the problem
- Assess resource and capacity concerns
- Inform policy decisions
- Measure progress
Obtain and Use Your Prevalence Rate

- Work with county partners to obtain consensus on the definition of whom should be counted
- Implement valid and consistent screening and assessment processes
- Measure people with treatment needs
- Consistently track the prevalence rate over time
Define Mental Illness

Work with county partners to obtain consensus on the definition of whom should be included

• Sites can, and do, use a wide range of criteria for their definitions of who has MI including:
  – Acuity of symptoms, including suicidality
  – Individuals posing behavioral challenges within jail
  – The need for psychotropic medication
  – Service utilization data (e.g., data matching)
  – Specific diagnoses or “flags”
  – State or county definitions for “serious” and/or “persistent” mental illnesses
Not All Mental Illnesses Are Alike

Mental Illnesses in the General Population

- Diagnosable mental illnesses: 16%
- Serious mental illnesses: 5%
- Severe mental illnesses: 2.5%

Not All Mental Illnesses Are Alike
Prevalence of Serious Mental Illnesses in Jail Populations

**General Population**
- 95% with Serious Mental Illness
- 5% with No Serious Mental Illness

**Jail Population**
- 83% with Serious Mental Illness
- 17% with No Serious Mental Illness
- 72% with Co-Occurring Substance Use Disorder
- 28% with No Co-Occurring Substance Use Disorder

Legend:
- Blue: Serious Mental Illness
- Red: No Serious Mental Illness
- Green: Serious Mental Illness
- Purple: No Serious Mental Illness
- Yellow: Co-Occurring Substance Use Disorder
- Orange: No Co-Occurring Substance Use Disorder
Serious Mental Illnesses (SMI) vs. Less Serious Mental Illnesses

Source: The City of New York Department of Correction & New York City Department of Health and Mental Hygiene
2008 Department of Correction Admission Cohort with Length of Stay > 3 Days (First 2008 Admission)
Choosing a Definition(s)

- What will the definition(s) be used for?
- How does the definition(s) relate to your Stepping Up objectives?
- How practical is obtaining the information needed to establish your definition(s)?
- What resources are available/needed to establish your definition(s)?
- How soon can you start using your definition(s)?
• Conduct universal screening as early as feasible and throughout criminal justice continuum to detect possible presence of:
  – Pre-trial options
    • FTA
    • Risk of new crime
    • Risk of violence
  – Mental illnesses
  – Substance use disorders
  – Criminogenic risks and needs
Importance of Developing Consistent Screening and Assessment Processes

Implement valid and consistent screening and assessment processes

• Information is vital to establish accurate prevalence rates
• A broad range of screens and assessments are needed to inform:
  • Release decisions
  • Jail management
  • Diversion opportunities
  • Conditions of release
  • Sentencing decisions
  • Supervision levels
  • Appropriate community treatment and supports
Screening

Screens are short in duration

Screens can:
- Use information routinely available (e.g., demographics, charges
- Be self-administered (if appropriate), or
- Conducted interview style
  - Can be administered by jail staff, jail behavioral health staff, community provider staff

Valid and reliable screening instruments for the target population should be used

A positive screen means the potential presence of a condition (e.g., mental illness), and follow up ought to be conducted with comprehensive assessments
Selecting Screening Instruments

- Reliability and validity of instruments
  - Challenges
    - use of non-standardized instruments
    - large number of instrument options

- Cost, ease of use, and training requirements
  - Challenges
    - cost of proprietary tools
    - cost associated with training and process implementation

- Appropriateness for criminal justice settings and populations
  - Challenge: instruments not validated in criminal justice settings
Mental Health Screening Instruments

Multiple screening instruments to consider, e.g.:

- Brief Jail Mental Health Screen
- Correctional Mental Health Screen
- Mental Health Screening Form III
Assessment is a process that collects more comprehensive information, from multiple sources, over time to confirm screens.

Assessments are conducted by appropriately trained professionals.

Assessment should take place as individuals proceed through criminal justice settings, and as new issues emerge.
The assessment process obtains information about:

- Pathways to criminal involvement;
- Criminogenic needs (dynamic risk factors);
- Clinical needs (mental health and substance use);
- Strengths and protective factors; and
- Social and community needs.

This information will come a number of sources, so working collaboratively with multiple partners is essential.
Introduction

Screening and Assessment

Establishing Prevalence Rate

Summary
The percentage of people with mental illnesses within an overall population over a specified period of time will reveal the prevalence rate.
How to Measure Prevalence Rates

- Agree on a working definition at the county level of who should be counted
- Determine appropriate methodology
  - Booking/admissions
  - ADP
- Agree on a consistent screening and assessment process
- Establish a baseline prevalence rate

*Consistency is the most important feature*
Using Booking/Admissions Data

Prevalence Rate = \[
\frac{\text{Number of people at booking/admissions determined to have mental illnesses}}{\text{Total number of people booked/admitted}}
\]
Using Booking/Admissions Data

BENEFITS
• Inform the flow of individuals with mental illnesses
• Track process improvements
• Counties may currently be screening and assessing at booking

CHALLENGES
• Does not take length of stay into consideration
• Considers the full incoming population

To mitigate these challenges, consider developing thorough assessments to follow-up with individuals who have positive screening results.
Jail Average Daily Population

To calculate prevalence rate using ADP, take the ADP of people with mental illnesses in jail and divide by total ADP over the same specified period of time.

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\text{Prevalence Rate} = \frac{\text{ADP of people with mental illnesses in jail}}{\text{Total ADP}}
\]

You can also express this formula in terms of your daily counts over a specified period of time.

\[
\text{Prevalence Rate} = \frac{\text{Total count of people with mental illnesses in jail}}{\text{Total population}}
\]
BENEFITS
• Provides a broader view of mental illnesses in jails
• Tracks how jail resources are being used
• Can be used to track length of stay

CHALLENGES
• Does not take into consideration people who are quickly released
• Can be resource intensive
ABC County wants to calculate the prevalence rate of people with mental illnesses in their facility over a one-week period. They decide to calculate prevalence rate over the week of May 14. Every day that week ABC County jail officials take a count of their population with mental illnesses ($m_1,m_2,…m_7$) and a count of their total population ($a_1,a_2,…a_3$).
To find the prevalence rate, ABC county calculates the ADP of people with mental illnesses and total ADP during the week of May 14. They then divide the ADP of people with mental illnesses by the total ADP to get the prevalence rate.

\[
\text{ADP of people with mental illnesses} = \frac{(67+73+66+83+82+79+79)}{7} = 75.6
\]

\[
\text{Total ADP} = \frac{(193+210+201+221+219+217+213)}{7} = 210.6
\]

\[
\text{Prevalence Rate} = \frac{75.6}{210.6} = 35.9\%
\]
Introduction

Screening and Assessment

Establishing Prevalence Rate

Summary
• Come to a consensus on a working definition at the county level of who should be counted
• Agree on a consistent screening and assessment process
• Explore different methods for calculating prevalence
  • Booking/Admissions
  • ADP
• Establish a baseline prevalence rate
• Calculate prevalence rate routinely and consistently
• Use the information to inform policy and practice
Thank You

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Poll Questions
Stepping Up in Practice

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Mental Health Director

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Background

Johnson County Kansas

550,000
0
on: 650
Criminal Justice Advisory Council (CJAC)

CJAC was tasked with:

– Studying and evaluating the criminal justice system within Johnson County
– Overseeing criminal justice data collection
– Analyzing trends in jail populations
– Identifying gaps in policy and practice
Justice Information Management System (JIMS)

• A fully integrated data management system where case activity, from the time of booking to case resolution, is entered in one system with literally thousands of fields that can be accessed for reporting.

• The entire justice system in Johnson County is paperless with millions of pages of documents scanned into the system. Judges, jail personnel, prosecutors, probation and defense all function with access to screens as determined by security settings. Each user department can customize reports which are supplemented by the implementation of COGNOS software, an IBM product that generates interactive data visualizations that enable the user to more easily interpret operations and performance for their department.
“Mental Health Flag”

• Effective January 1 2010, a “mental Health flag” was added as a data field within JIMS.
  – Meaning that a referral had been made to the mental health team within the Jail, not that the individual had a mental illness.
Power of the Data

• Sequential Intercept Model developed by the GAINS Center - Map the system then identify barriers and analyze data.
Data Driven Decisions

- CIT (Crisis Intervention Team)
- MH Mobile Crisis Response Team (MCRT)
- MH After-Hours Call Center
- MH Co-Responder
- Mental Health Diversion Mental Health Diversion
Questions?

Type your question into the questions box.
Next Steps: Go to www.StepUpTogether.org

- Check out the Stepping Up website and sign on!
- Review the Stepping Up sample resolution!
- Register for the next webinar on August 20 at 2pm EDT!
Next Webinar: August 20

Stepping Up: Effective Law Enforcement Strategies

Thursday, August 20, 2015
2:00pm EDT - 3:00pm EDT
Register at www.naco.org/webinars
NACo’s Annual Conference and Exposition

July 10-13, 2015

www.naco.org
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