

Contact with the Criminal Justice System

Introduction

This report summarizes the Cross-Systems Mapping & Taking Action for Change workshop held in Sumter County, Florida on February 20, 2009 with a follow meeting held on April 23, 2009. The workshop was facilitated by the Florida Criminal Justice Mental Health and Substance Abuse (CJMHSAs) Technical Assistance Center at Florida Mental Health Institute (FMHI), University of South Florida (USF). This report includes:

- ™ A brief review of the origins and background for the workshop
- ™ A summary of the information gathered at the workshop
- ™ A cross-systems intercept map as developed by the group during the workshop
- ™ Observations, comments, and recommendations from the Florida CJMHSAs Technical Assistance Center to help Sumter County achieve its goals

Recommendations contained in this report are based on information received prior to or during the Cross-Systems Mapping & Taking Action for Change workshop.

Background

The Sumter County Criminal Justice Mental Health and Substance Abuse (CJMHSAs) Planning Council along with the full support of multiple local stakeholders requested that the Florida CJMHSAs Technical Assistance Center facilitate the Cross-Systems Sequential Intercept Model Mapping and Taking Action for Change in Sumter County, Florida to provide assistance with:

- ™ Development of a strategic action plan to promote progress in addressing the criminal justice diversion and treatment needs of the target population

The participants in the workshop included 18 individuals representing multiple stakeholder systems, including mental health, substance abuse treatment, human services, corrections, advocates, family members, consumers, law enforcement, and the courts. A complete list of participants is available at the end of this document. John Petrila, J.D., LL.M. and Nicolette Springer, M.S. both from FMHI facilitated the workshop sessions. The follow up meeting on April 23rd was also facilitated by Nicolette Springer.

or if possible observed continuously by staff. All other individuals are seen within about 10 days and no later than 14 days. The medical staff in the jail includes:

- 1 general physician (twice a week)
- 1 psychiatrist (once a week and on call)
- 1 physician's assistant (40 hours a week)
- 3 licensed practical nurse (3 day a week rotation)
- 1 registered nurse (40 hours a week)
- 1 medical clerk (40 hours a week)

It is noteworthy to mention that the psychiatrist that serves the jail also serves Lifestream and Langley. Jail administration estimates that about 10 to 15 percent of inmates are provided psychotropic medications. There are currently no formulary restrictions, doctors are allowed to prescribe at their own discretion. For medical reasons, the jail does not accept a person with a blood alcohol level greater than 0.3; those individuals are sent to Leesburg for clearance and then potentially to Lifestream or back to the jail.

Within 24 hours of arrive at the jail, all defendants appear before a judge via video for their initial court hearing. At this time,

by jail. Therefore, those with minor ailments, who could benefit from services, often are overlooked and “fall through the cracks.”

- It was suggested that once the screens are implemented that the jail use that data to inform the public defender of potential needs.
- There was some concern raised about this suggestion. The group agreed to consult John Petrila at FMHI for legal advise on this matter.

Intercept III: Jails / Courts

Defendants are filtered into one of three court options: County court (misdemeanor), circuit court (felony) or drug court. There is no mental health court at either the misdemeanor or felony levels. In county court in the docket will be tagged if mental health concerns are raised. The public defender, state attorney and judge will work together to make services a condition of probation for all adjudicated defendants. If the defendant is found incompetent to stand trial, then he or she is released into community without services. If found competent then usually sentenced to probation with court ordered treatment. Violations of probation usually result in jail time. Conversion among attendees revealed that treatment is standard court order for mental health and/or substance abuse defendants however more likely for substance abuse clients then those with a mental health illness.

Felony defendants in Circuit court follow a similar path to County court defendants however if a defendant is found to be incompetent to stand trial

¾ Gaps Identified during February Meeting

- „ No access to diversion court for mental health or co-occurring clients.
- „ Lack of services for misdemeanor defendants who are incompetent to stand.
- „ No Drug Court for misdemeanant defendants.
- „ More In-jail treatment and services are needed:
 - Substance abuse service in jail are limited. AA only meets once a week and NA on occasion. Lifestream offers a prevention program but no treatment.
 - Limited access to mental health professionals of all levels.
 - Services that are available are usually limited to acute ill and not broader group of those who may need services.

¾ Priorities Identified during April follow up Meeting

- „ Explore expanding in-jail treatment and service.
- „ Explore possibility of diversion programs.

Intercept IV: Re- Entry

Individuals who are sentenced to more than one year of incarceration are transferred to State Prison. Those serving less than one year are housed in Sumter County Jail. The Sumter County jail has a capacity of 173. The population on February 20th was 280. According to jail administration they average about 100 over capacity. The average length of stay is 60 days and cost \$54.00 per inmate per day. The jail is currently

¾ Priorities Identified during April follow up Meeting

„ Case Management – only available to those you have a preexisting case manager

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¾ Gaps Identified during February Meeting

- „ Lengthy wait time for mental health appointment.
- „ Lack of transportation options to receive services.
- „ Limited assistance with reinstating benefits.
- „ No peer involvement.
- „ Lack of long term and residential treatment after discharge from jail.
- „ Difficulty getting people with mental illness into long term treatment.
- „ Affordable, supportive and stable housing.

¾ Priorities Identified during April follow up Meeting

- „ Transportation – inmates have limited access to public transportation upon release.
 - Agreed to explore additional routes and services provided by Sumter Transit.
- „ Reinstating Benefits – although there are state kiosks available within the county for benefit applications, it was unclear where actually these are located and how inmates could access them
 - Discussed possibility of SOAR training
 - Agreed to explore the possibility of having a kiosk in or near the jail.
 - List location of kiosks in the resource packet being developed by Barbara Wheeler.

Conclusions and Recommendations: Summary

A process such as the Cross-Systems Mapping & Taking Action for Change workshop can result in the acknowledgment of a somewhat daunting list of service gaps. In this respect, Sumter County is much like most Florida counties and indeed like many jurisdictions in the United States. At the same time, Sumter County is very unique and has important strengths.

TM First, the individuals who participated in this workshop represented all of the major stakeholders necessary to accomplish change in this area.

TM Second, participants were enthusiastic and frank in their comments and observations. This spirit of collegiality and willingness to discuss limitations as well as strengths is an important part of being able to work across systems, as is necessary in improving the lives of people with mental disorders in or at risk for entering the criminal justice system.

As Sumter County moves forward in addressing the issues identified during this process, there are three issues in particular that may be of particular importance.

TM First, the planning process over time needs to identify the specific points in the process where intervention is possible and might have the biggest impact. It is impossible within existing resources to resolve every problem identified in a planning process, but it is possible to identify the potential points where an intervention might make the most difference.

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TM Third, it is critical that the planning process not lose the momentum created to date. Planning meetings involving all relevant stakeholders should be conducted on a regular basis and assigned priority by stakeholders. In addition, there are a number of resources available to Sumter County to accomplish some of the tasks identified during the workshop as next steps. Those resources should be utilized whenever possible to expand the capacity of the planning group.

In closing, we would like to thank Sumter County for allowing the CJMHSA Technical Assistance Center to facilitate this workshop. In particular we would like to thank Jeff Feller for his work in handling the local arrangements. Finally, a great gratitude to all the local stakeholders who took the time to share their experiences throughout the three day visit. We look forward to continuing to work with Sumter County.

Resources

Website Resources and Partners	
Florida Criminal Justice Mental Health and Substance Abuse Technical Assistance Center	www.floridatac.org
Louis de la Parte Florida Mental Health Institute Department of Mental Health Law and Policy	http://mhlp.fmhi.usf.edu
Florida Partners in Crisis	http://www.flpic.org
Justice Center	www.justicecenter.csg.org
Policy Research Associates	www.prainc.com
National GAINS Center/ TAPA Center for Jail Diversion	www.gainscenter.samhsa.gov

Other Web Resources	
Center for Mental Health Services	www.mentalhealth.samhsa.gov/cmhs
Center for Substance Abuse Prevention	www.prevention.samhsa.gov
Center for Substance Abuse Treatment	www.csat.samhsa.gov
Council of State Governments Consensus Project	www.consensusproject.org
National Alliance for the Mentally Ill	www.nami.org
National Center on Cultural Competence	www11.georgetown.edu/research/gucchd/nccc/
National Clearinghouse for Alcohol and Drug Information	www.health.org
National Criminal Justice Reference Service	www.ncjrs.org
National Institute of Corrections	www.nicic.org
National Institute on Drug Abuse	www.nida.nih.gov
Office of Justice Programs	www.ojp.usdoj.gov
Partners for Recovery	www.partnersforrecovery.samhsa.gov
Substance Abuse and Mental Health Services Administration	www.samhsa.gov

Participant List