

# Butler County, Ohio

## Sequential Intercept Mapping Report

December 2-3, 2021

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# Sequential Intercept Mapping

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# Butler County, Ohio

## *Sequential Intercept Mapping*

### Introduction

The purpose of this report is to provide a summary of the *Sequential Intercept Mapping* and *Taking Action for Change* workshops held in Butler County, Ohio on December 2 – 3, 2021. The workshops were hosted at the Butler County Mental Health & Addiction Recovery Services Board (BCMhARS) at 5963 Boymel Drive Fairfield, OH 45014. Planning and coordination for the workshop was provided by BCMhARS and Butler County NAMI along with a planning team comprised of representatives from behavioral health and criminal justice agencies and the community. This report includes:

- A brief review of the origins and background for the workshop
- A summary of the information gathered at the workshop
- A *sequential intercept map* as developed by the group during the workshop
- An action planning matrix as developed by the group
- Observations, comments, and recommendations to help Butler County achieve its goals

Recommendations contained in this report are based on information received prior to or during the *Sequential Intercept Mapping* workshops. Additional information is provided that may be relevant to future action planning.

### Background

Butler County stakeholders participated in a Sequential Intercept Mapping exercise in December 2014. At that time, Butler County was not registered for the Ohio Stepping Up Initiative; nor was the county participating in the Crisis Intervention Team (CIT) model of police mental health collaboration. Butler County joined the Ohio Stepping Up initiative in November 2016 and through co-leadership of Butler County NAMI and West Chester Police Department initiated a CIT program in 2019. These structural and collaborative changes in the county, among other driving factors, such as the statewide efforts to build and expand the crisis response care system, prompted the renewal of the county's Sequential Intercept Map and action plans.

On behalf of the Butler County Stepping Up committee, the Butler County Mental Health & Addiction Recovery Services Board (BCMhARS) and the Butler County Common Pleas Court requested the *Sequential Intercept Mapping* and *Taking Action for Change* workshops in May 2021 to update the 2014 Butler County Sequential Intercept Mapping report. The Sequential Intercept Mapping exercise was meant to aid Butler County with:

- Creation of an updated map indicating points of interface among all relevant Butler County systems
- Identification of resources, gaps, and barriers in the existing systems
- Development of a strategic action plan that supplements, and in some instances, replaces the action plans from 2014, to promote progress in addressing the criminal justice diversion and treatment needs of adults with mental illness in contact with the criminal justice system

The participants in the workshop included 36 individuals representing multiple stakeholder systems including mental health, substance use treatment, human services, corrections, consumers and consumer support/advocacy, law enforcement, and the courts. This includes five individuals that attended

to observe the workshop, signed in, and may or may not have directly participated in the workshop activities. Additional observers were invited, and their attendance was unable to be confirmed. A complete list of participants is available in the resources section of this document. Dan Peterca, Teri Gardner and Ruth H. Simera from the Criminal Justice Coordinating Center of Excellence facilitated the workshop sessions.

## Values

Those present at the workshop expressed commitment to open, collaborative discussion regarding improving the cross-systems response for justice-involved individuals with mental illness and co-occurring disorders. Participants agreed that the following values and concepts were important components of their discussions and should remain central to their decision-making: *Hope, Choice, Respect, Compassion, Abolishing Stigma, Using Person-First Language, Celebrating Diversity, the belief that Recovery is Possible, and Empathy.*

## Objectives of the Sequential Intercept Mapping Exercise

The *Sequential Intercept Mapping* Exercise has three primary objectives:

1. Development of a comprehensive picture of how people with mental illness and co-occurring disorders flow through the Butler County criminal justice system along five distinct intercept points: Law Enforcement and Emergency Services, Initial Detention/Initial Court Hearings, Jails and Courts, Reentry, and Community Corrections/Community Support and what services and supports are available to help prevent criminal justice contact, i.e., Intercept 0 resources including crisis response, outpatient services, social service supports, community-based resources and evidenced-based treatment options.
2. Identification of gaps, resources, and opportunities at each intercept for individuals in the target population.
3. Development of priorities for activities designed to improve system and service level responses for individuals in the target population.

The Butler County Sequential Intercept Map created during the workshop can be found in this report on page 6.

## Keys to Success

In addition to the items below, communities are strongly encouraged to A) identify or develop agencies and/or individuals who are champions to the cause and can serve as **boundary spanners** – spanning the gap between systems, understanding and effectively representing the needs and concerns of individuals being served and of the multiple systems involved, and effectively assisting in articulating and reconciling different points of view, B) create early opportunities for **momentum** by addressing manageable action items early in the change process, developing measurable and reasonable action plans, and recognizing that change is necessary while resisting temptation to tackle global, pervasive problems; and C) utilize and implement **evidence-based or evidenced-informed practices** whenever possible and practical.

## Cross-Systems Partnerships; Task Force

Butler County stakeholders and service providers, like those from most other Ohio counties, have been involved in many collaborative projects and relationships over time. The current cross-system collaborative teams/coalitions that were identified by the Butler County planning team and workshop participants include Stepping Up, Crisis Intervention Team program (CIT), Coordinated Specialty Care for First Episode Psychosis (FIRST), and Mobile Crisis. The Stepping Up resolution passed by the Butler County Board of Commissioners is a commitment on the part of the county's governmental offices to address the issue of over-representation of individuals with mental illness in the county criminal justice system. The community is strongly encouraged to consider how best to incorporate the Sequential Intercept Mapping participant group and action planning work groups into the Stepping Up framework and if possible into an existing structure instead of creating a new task force. If an overarching task force does not currently exist, the SIM participant group could serve as the foundation for a Stepping Up group, and the previously mentioned teams could be incorporated into that structure.

## Individual with Lived Experience Involvement

The Butler County planning team included the Executive Director of Butler County NAMI, along with representation during a portion of the workshop by one family member with lived experience. The SIM group is strongly encouraged to solicit participation from additional community members and individuals with lived experience; ideally each work group/committee will include consumer, family and/or advocate representation.

## Representation from Key Decision Makers; Community Investment

- The group composition provided reasonable cross-system representation with key decision makers present for the court system, jail, and mental health system.
- Key players that were missing at the workshops: transportation.

## Data Collection

- The Butler County Planning Team compiled the following items to be reviewed by facilitators in preparation for the workshops and to be included in the workshop manual:
  - Completed Community Collaboration Questionnaire
  - Butler County Jail Data for 2019-2020
- Additional data provided by the Criminal Justice Coordinating Center of Excellence included:
  - Adult Parole Authority Regional Workforce Analysis ending July 2021
  - Ohio CIT Training Report 09.2021
  - Ohio Peace Officer Training Commission County Agency Report printed 9.29.2021

## Recommendations

- At all stages of the Intercept Model, seek opportunities to utilize and share data and information across systems, both public and private, that will aid in identifying and documenting the involvement of people with severe mental illness and often co-occurring disorders in the Butler County criminal justice system and promoting use of alternatives.
- Be strategic in collecting data. Identify and clearly define across systems the population being addressed so that a specific data set can be tracked to gauge improvement and inform the mental health and criminal justice systems of needs within the systems and needs of persons being served.

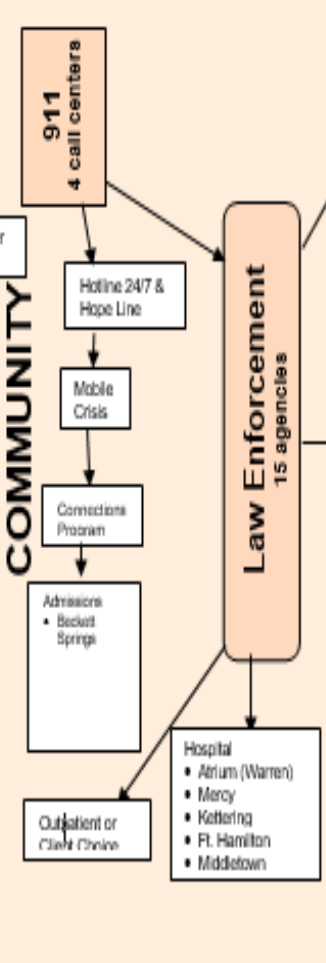
# Sequential Intercept Mapping

Butler County, Ohio

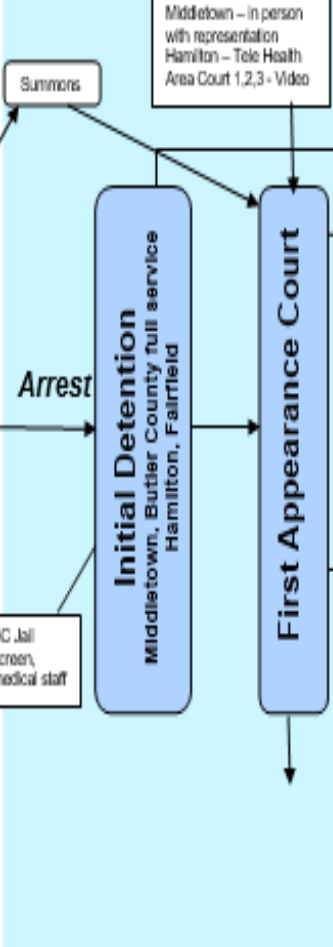
# Sequential Intercepts for Change: Criminal Justice - Mental Health Partnerships – Butler County, December 2021

CIT

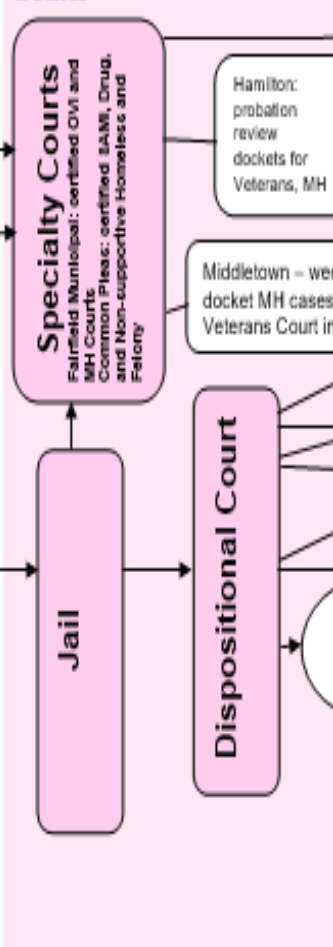
## Intercept 1 Law enforcement



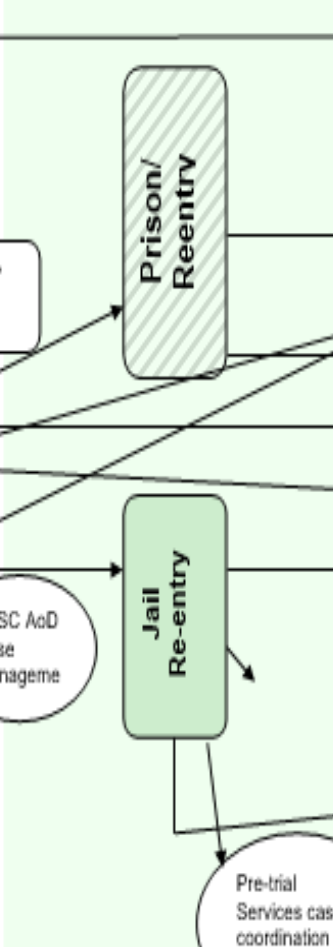
## Intercept 2 Initial detention / Initial court hearings



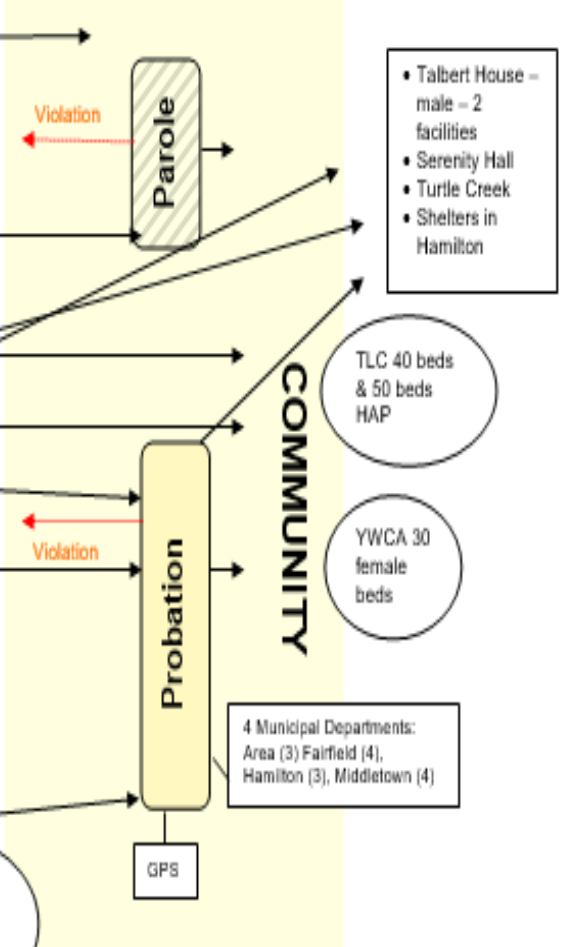
## Intercept 3 Jails / Criminal Courts



## Intercept 4 Reentry



## Intercept 5 Community corrections



## Butler County Sequential Intercept Map Narrative

The *Sequential Intercept Mapping* exercise is based on the Sequential Intercept Model developed by Mark Munetz, MD and Patty Griffin, PhD in conjunction with the National GAINS Center (Munetz & Griffin, 2006). During the exercise, participants were guided to identify gaps in services, resources, and opportunities at each of the five distinct intercept points and as part of the discussion of Intercept 0.

This narrative reflects information gathered during the *Sequential Intercept Mapping* Exercise. It provides a description of Butler County activities at each intercept point, as well as gaps and opportunities identified at each point. This narrative may be used as a reference in reviewing the Butler County Sequential Intercept Map. The cross-systems Butler County planning team may choose to revise or expand information gathered in the activity.

The gaps and opportunities identified in this report are the result of “brainstorming” during the workshop and include a broad range of input from workshop participants. These points reflect a variety of stakeholder opinions and are therefore subjective rather than a majority consensus. In some instances, the Butler task force may need to seek further information from participants to clarify the context or scope of the comments.

### Intercept 0: Ultimate Intercept

The following represents evidenced based practices (EBP) and services that were highlighted during discussion of the Ultimate Intercept. This list is not meant to be an exhaustive or comprehensive roster of all EBPs and services available in Butler County.

- 24- hour crisis hotline - Staffed by clinical professionals. 100% answer rate with redundancies in place to ensure live answer. People use it as a crisis line and a warm line; to connect with mobile crisis; to get resources and referrals. Text line also available but utilization is very low.
- Hopeline – separate from the crisis hotline and focused on substance use concerns.
- FIRST Coordinated Specialty Care for First Episode Psychosis through Butler Behavioral Health; collaborate with Hamilton County
- Clozapine Prescribers: multiple providers at agencies throughout the county
- Mobile Crisis: uses 3 EBP for suicide: Assessing and Managing Suicide Risk (AMSR), Cognitive Behavioral Therapy for Suicide Prevention (CBT-SP), and CAMS-care. Seven Challenges is also employed for substance and is being used with the dual disorder population as well, though the practice is not considered evidence based for serious mental illness.
- Cognitive behavioral therapy: Cognitive Behavioral Therapy (CBT): Thinking for a Change; Decision Points, EPICS, Carey Guides, Motivational Interviewing
- Dialectical Behavior Therapy (DBT)
- Eye Movement Desensitization and Reprocessing (EMDR)
- Medication Assisted Treatment options: Vivitrol, Suboxone, and Methadone
- Mental Health First Aid
- Peer Support Specialists
- Supported Employment Services
- Though not specific to SPMI, New Path (previously St. Joseph orphanage) has Independent living/transitional youth-adult programming (age 16-22)
- Walk-in, open access model is used in all agencies

### Intercept 0 Gaps

- ▣ High intensity/high fidelity
- ▣ Long-term hospitalization
- ▣ Education of mental health and substance use professionals about law enforcement; cross-training
- ▣ In county detox is limited
- ▣ Housing options: affordability, quicker access to long-term lack of landlords who will take vouchers

- Integrated Dual Disorder Treatment (IDDT)

## Intercept 0 Opportunities

- Inclusion of bar association for training re: mental health issues, specialty dockets, etc. (training, system issues); specific invitations to defense counsel/public defenders
- Cross systems training
- The county is in the process of significantly vetting a crisis stabilization unit to serve as a hub, access point, drop-off and pre-hospitalization screening service. This was priority #1 from the 2014 mapping exercise, and the hope is to get an RFP out for bids in the near future. An advisory group is investigating best practices, models, and holding focus groups. Because this work is continuing forward from the previous mapping exercise it is not listed as a gap but should be maintained as a vital action plan group.
- The MHRS Board is currently engaged in a needs assessment with two hospitals that have agreements to share data

## Recommendations

- The issue of effectively sharing information emerged in Intercept 1, but really should be addressed starting in Intercept 0. Despite using the standard authorization form for release of information it was reported that some agencies will not respond to the request or provide information. There doesn't appear to be a reliable way to obtain needed information even in emergent situations. The MHRS Board may want to consider convening a key stakeholder group to address this issue and define clear understandings and expectations, which could become increasingly important once a crisis stabilization unit is in place. It is possible in some instances that differently defined terms can get in the way of effective information sharing.

## Intercept I: Law Enforcement / Emergency Services

In Butler County, law enforcement is accomplished by the County Sheriff's Office, and Butler law enforcement agencies in various towns or cities. Law enforcement options for responding to people with mental illness include advise, summons, arrest, transport to county jail, referral to provider agencies, involuntary civil commitment (pink slip), referral to hospital emergency departments, or a combination of these options.

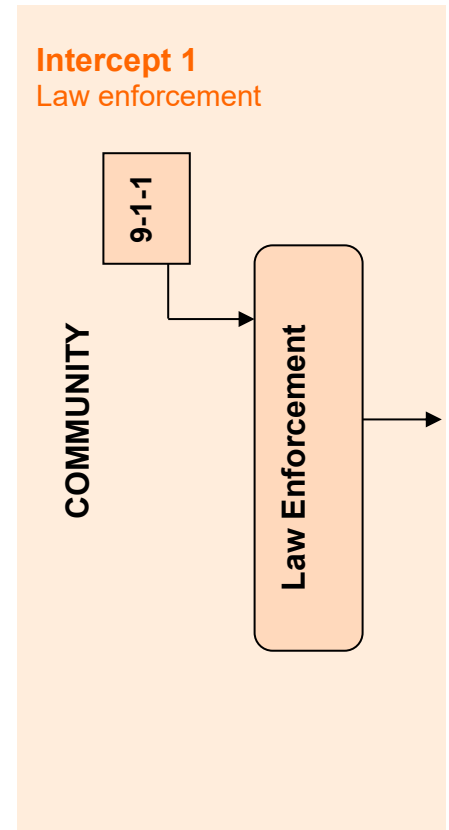
### Dispatch / 9-1-1

- Butler County has four primary dispatch centers that answer 911 calls for nine law enforcement agencies and seventeen Fire/EMS agencies.
- There is currently no formal training of dispatchers re: mental illness and/or the CIT model, however, the goal is for all dispatchers to be trained.
- There is currently no protocol in place for callers to request a CIT officer or for the call centers to specifically dispatch CIT officers.
- Mental health codes exist but are used inconsistently
- Limited staff coverage tends to limit the amount of support that can be provided on calls. Dispatch may call the hotline after an officer has been dispatched to the scene; hotline then calls the mobile crisis team

### Law Enforcement and Crisis Intervention Team model

According to the Ohio Peace Officer Training Commission (OPOTC) County Agency Report issued September 29, 2021, Butler County has fifteen Law Enforcement Agencies: Butler County Metro Parks Butler County Sheriff's Office, Fairfield Police Department, Fairfield Township Police Department, Hamilton Police Department, Miami University Police Department, Middletown Police Department, Monroe Police Department, New Miami Police Department, Oxford Police Department, Oxford Township Police Department, Ross Township Police Department, Seven Mile Police Department, Trenton Police Department, , and West Chester Police Department, with an estimated 619 full-time officers.

- As of September 2021, the Butler County Crisis Intervention Team (CIT) training program has held three courses, with annual CIT training averaging 25-30 participants. Nine of the fifteen Law Enforcement Agencies have participated in CIT training, which is a 40-hour course composed of lectures, interactions with mental health consumers and services, and scenario-based roleplays including practice of de-escalation skills. Records indicate that 81 full-time officers have completed CIT training. The six law enforcement agencies that have not yet participated in CIT training include Butler County Metro Parks, Miami University PD, New Miami PD, Oxford Township PD, Seven Mile PD, and Trenton PD.
  - Though the CIT program is early in its development, there seems to be some attempt to provide follow-up services to community members with mental health issues, some through law enforcement follow up and some through behavioral health agencies that have a policy /practice to follow up within 24 hours with clients who have had law enforcement contact. Where these policies exist, law enforcement is provided confirmation that follow up has occurred without any additional details.
- Records management systems are different across the jurisdictions.
- Law enforcement report challenges in accessing records and client information in emergent situations, making alternatives to arrest more challenging. Related to this is a sense of stigma for law enforcement who are viewed by some as preferring arrest when they report using arrest as a last resort but struggle when there is no alternative.
- Law enforcement in West Chester and Middletown both reported that their officers can advise jail at initial detention to recommend drug or mental health court. This can serve as a direct referral from law enforcement to mental health court, though the request will occur via defense counsel.
- School Resource Officers (SRO) exist in each district, typically provided by the jurisdiction's law enforcement agency. Those schools not within municipal jurisdictions work through the Butler County Sheriff's Office to get SROs, except one district that hires its own SRO.



## Crisis Services

- Crisis Hotline –The hotline is not within the National Hopeline answering network, however the national hopeline will transfer calls to them. Participants indicated that the largest referral source is mental health providers and that active mental health consumers are more likely to utilize the crisis hotline than individuals new to the system or seeking services. Data indicates that 45% of individuals engaging crisis services are already engaged in ongoing mental health services.
- Hopeline - This line is also not accredited through the national hopeline
- Mobile Crisis Services - provided by Butler Behavioral Health – co-responder model with adult clients in partnership with Butler County Sheriff's Office. Co-response is not used for minors. Mobile crisis designed as a safety net program to provide crisis assessments, diversion from hospitals connection resources. It was estimated that only 30% of contacts are referred to hospital for admission, and that arrests are very rare. The only hospital admission that can be facilitated by mobile crisis is Becket Springs. The service has seen a 12% increase of referrals from law enforcement, which seems correlated to CIT. has a direct number, and hotline will refer directly. The line is advertised to clinicians. NAMI pushes out information to families.

## Hospitals / Emergency Rooms / Inpatient Psychiatric Centers

- The state hospital is TriHealth in Hamilton. With the state hospital so focused on forensic cases, the community does not recognize the state hospital as a resource for their system.
- Hospital Emergency Departments (ED) serve as the typical after-hours access to mental health care, and all Eds can facilitate admissions to public and private hospitals; however, there are no Medicaid psychiatric beds

in-county, and mobile crisis indicates that only Atrium and Kettering will accept and know how to handle acute psychiatric issues. Hospitals include:

- Atrium (Warren County) – distance issue and therefore transportation issues, but has a dedicated psychiatric intake
- Mercy – no inpatient unit; will send to Clermont
- Kettering -
- Ft. Hamilton, Middletown; however, mobile crisis indicates that only Atrium and Kettering will accept and know how to handle acute psychiatric issues.
- There are discharge planning and continuity challenges
  - If out-of-county admission occurs, there can be challenges with transportation back to their residence. With lack of transportation, some clients will pick up charges in another county due to their behaviors and can get “lost” in another county’s criminal justice system, similar to transient issues even though they are not really transient.
  - It was noted that private hospitals seem to experience more challenges with connection for discharge planning
  - CONNECTIONS Program attempts to form relationships with referring hospitals to assist with discharge planning, physical return to residence and linkage to outpatient services.
- No data on how many Butler County residents are in private hospital that the mental health system does not know about
- Beckett Springs is a private hospital and is trying to increase psychiatric bed capacity. They do not have an ED and only accept one Medicaid provider, which limits their capacity.
- Peer Support is available at Beckett Springs (both mental health and substance use) and Kettering in Montgomery County. Availability of peer support is not as clear in Butler County, although for substance use Mercy Fairfield has contracted peers and McCullough Hospital in Oxford will have peers in 2022.

## Detoxification

- There is no designated in-county location for alcohol detox
- Police are getting called for behavioral disturbances related to drug use
- Lack of insurance coverage, including Medicaid for acute meth detox
- Meth and drug use creating significant concerns – physical concerns for first responders jail staff, Emergency Departments, clinicians, law enforcement and jail.

## Probate

- The county has a longstanding and robust Assisted Outpatient Treatment program.

## Veterans

- Beckett Hospital has intensive outpatient (IOP) for first responders and veterans
- Critical Incident Stress Management (CISM) focuses on veterans
- Nearest VA hospital is Hamilton and Montgomery Counties
- One of the shelters has a team that will work with veterans

## Intercept I Gaps

- General knowledge of hotline
- CIT Training for all dispatch
- Warm handoff to hotline/hope line
- Effective alternatives for frequent 911 callers who decline services, prior to resulting in charges of abusing emergency services
- Finding historical information quickly on a 911 call is difficult
- Mobile crisis alternative to hospital
- Consistent information linkage from hospitals back to Butler County

- Shared law enforcement/jail information sharing
- Hospital options
- Alternatives for law enforcement on scene other than arrest
- Crisis hotline and Hopeline not part of the national hopeline network
- General community does not engage and/or does not know how to engage with crisis hotline

### Intercept I Opportunities

- CIT training for dispatch
- Beckett Springs – non-Medicaid inpatient
- Follow-up from CIT (similar to QRT)
- Connections Program
- Ohio’s version of Casey’s Law has been updated and may present greater opportunities for early intervention and civil options for substance use disorders
- Community Education on who to call first

### Recommendations

- Consider a work group to discuss options for two-way information sharing and warm hand-offs between 911 call centers and the 24/7 mental health hotline. There is a growing body of public safety telecommunication centers and hotlines across the country working closely to more effectively and efficiently triage and manage citizens with mental health concerns. Houston stood up the first formal collaboration in 2015, the Crisis Call Diversion program, to identify and redirect non-emergent, non-life-threatening calls for service that are mental health crisis related away from police and EMS and toward mental health and intellectual disabilities services. Houston’s model of co-locating tele-health counselors in the 911 center may not be a good fit for a smaller community like Butler County, but the diversion premise has potential for any sized community. Basic information on the program can be found at <https://www.houstoncit.org/ccd/>
- While not identified as a gap, is there a need for consistent training of hospital Emergency Department staff?
- Marysville Fire Division in Union County has a Community Paramedic Program (Appendix B) to address frequent utilizers of emergency medical services. Perhaps a similarly structured response could be considered in Butler County to address frequent utilizers of 911.

### Intercept II: (*Following Arrest*) Initial Detention / Initial Court Hearing

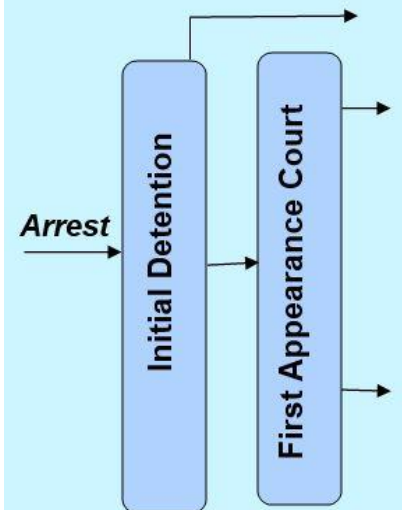
#### Initial Detention

- The complaint form has an area for mental health history or concerns, but not in the form of a validated tool. Due to software limitations, there is also no way to collect or report aggregate data associated with mental illness or veteran status.
- There is no information exchange with the mental health system, re: the booking roster
- Middletown Law Enforcement will call ahead to informally report mental health concerns to the jail and court
- There are four holding cells located within the jail
- The average stay in jail is three days
- Medical staff will accept medications from individuals at arrest and will review for dispensing to them
- The Butler County jail has a forensic unit and court will sometimes issue a transfer for mental health care
- There are 14 beds in the mental health unit of the jail.

## Arraignment

- Initial hearing occurs within 24 hours
- One court – Middletown- has legal representation available at initial hearing; all other courts do not unless previously retained; counsel is typically assigned at initial hearing for the rest of the process.
- Hamilton Court arraignment is in-person. Area courts do video arraignment.
- There is a daily felony arrest review in the mornings and then sent to lower courts for bond decisions
- There is no felony, prosecutor-based diversion programming available at this stage in the process.
- There are no pre-trial services at the municipal/county courts. For felony bookings, the Pretrial Assessment Tool of the ORAS (Ohio Risk Assessment System) is completed and individuals are assigned a pretrial worker. The resulting report is sent to the lower court on the same day to aid the judge in setting bond. Individuals do not get bound over to Common Pleas Court until seen by the lower court.
  - Support cases and occasionally other cases are processed by direct indictment; however, most cases are bind-overs, ensuring a review process.

### Intercept 2 Initial detention / Initial court hearings



## Veterans

- Veterans can self-disclose military history at booking. The jail will send their identifier number and can request services. County jail utilizes Cincinnati VA; all other jails go to Dayton Veterans Affairs due to the county coverage split, which can cause issues in follow up and continuing care.
- Veterans Justice Outreach (VJO) does partner with the jail and will work together to make sure services continue and there is follow up and outreach.

## Intercept II – Identified Gaps

- Lack of process to collect information on mental health and veterans at booking. Validated screening tool is not in use to identify SPMI
- Sharing the mental health report and screening collected at the jail with the court at initial hearing
- Lack of booking information being shared with board and provider agencies
- Formalized training for attorneys about working with clients with serious mental illness

## Intercept II – Identified Opportunities

- Changing to new jail data tracking system in 12/2021 (from JMS Central Square to New Jail)
- Support VJOs in the counties to work together

## Recommendations

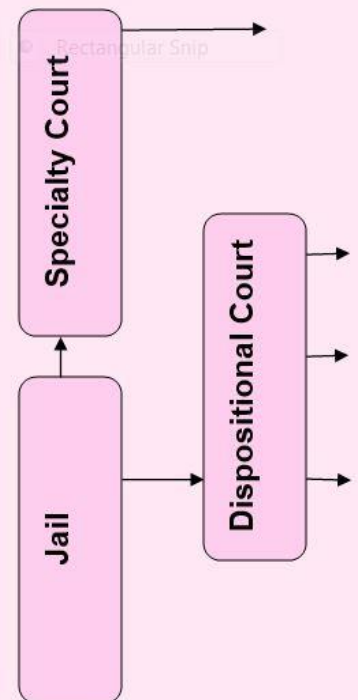
- The Butler County Jail utilizes two evidence-based screening tools as part of the intake process, to identify depression/suicide risk and substance use but no validated tool to screen for serious mental illness. Consistent with Stepping Up goals and metrics, the jail is encouraged to consider implementing a tool such as the Brief Jail Mental Health Screen to aid in identifying individuals with potential mental illness. This will also give the jail some baseline data to support the expressed needs for additional mental health staffing and services in the jail. The Middletown Jail should be encouraged to consider the same.

## Intercept III: Jails / Courts

### Jail

- Rated Capacity Butler County Jail: 1170
- Average Daily Population: 1061. Roughly half the population is Butler County residents; the other half are inmates housed through federal contract.
- Daily bookings, average: 29; due to COVID, these numbers were likely lower in 2020. Currently, every person booked is quarantined for ten days upon entrance.
- Average length of stay is 28 days.
- Evidence-based screening includes the PHQ2 depression screening and the SSI Simple Substance Index. Results of both are entered into Excel and a mental health professional determines next steps.
- There are three buildings at the Butler County Jail
  - Housing units have 96 beds for medical and mental health, described as for circumstances that are “controllable” but symptomatic, engaged and do not need to be on watch.
  - Another housing unit is divided into thirds and is segregated male/female for harm watch with ten-minute checks, or non-controlled circumstances. Those on suicide watch have clinical contact daily; those on homicide watch have clinical contact every other day. Number of inmates on watch ranges from six to 25/day and can include 2-4 waiting for a state hospital bed
- The jail has programming housing units for 18 men, 14 women, and 14 veterans. These units are for Butler County residents or individuals sentenced by a Butler County judge, i.e, not for federal inmates, and are typically full with a waiting list. Inmates must be in the housing pods to get the services.
  - Men’s and Women’s Programming includes full-scale substance use treatment services. Participants begin with a full assessment and can be referred or self-referred. Some peer support is available, although hiring is currently a challenge. One peer is dedicated to the jail and works with individuals from programming through discharge. Group includes coping skills and mentoring.
  - Veterans Education Training Services is not treatment-based but provided by the VA commission.
- Forensics Team is on site seven days/week for ten-hour shifts. is separate from the programming team and has six staff, of which four are independently licensed clinicians. The team includes a discharge coordinator and forensics coordinator. Team members report spending most of their time on crisis situations and suicide/homicide watch, greatly limiting their ability to identify and outreach support to other mental health needs.
- TLC and CBH work in the jail providing mental health services, but unpredictable lengths of stay limits availability of individual therapy. Pre-Covid also had substance use disorder classes, mental health awareness class – funding changes eliminated these.
- Long-acting injectable medications are accessible in the jail, and the county takes advantage of the money available through OhioMHAS to fund mental health medications. Medication Assisted Treatment available upon release via CBH and initiated in the jail. Pregnant women will get MAT in the county jail.
- Of the estimated number of Butler County residents housed in the county jail in 2019, it was further estimated that approximately 42% had mental health issues. Average daily population was estimated at 75% with mental illness, though the jail data system is not able to validate these figures Individuals can be flagged and referred to the forensic team or the programming units if the booking information indicates mental health needs. There are additional people with needs who could benefit from services, but the jail relies on self-identification if not identified by law enforcement or booking.
- Correct Tech is the contracted medical provider for the county jail including a physician dentist, administrator, twenty full-time and twelve part-time medics to ensure 24/7 coverage with four to five on shift at any given time.

### Intercept 3 Jails / Courts



- The jail employs a psychiatrist and contracts with Careline for a forensic coordinator. The forensic coordinator contacts inmates based on information received to offer resources and link to community services. A discharge coordinator focuses on reentry.
- City of Middletown Jail has a capacity of 70. At the time of the workshop, census was at 52. All sentenced individuals go to the county jail. Upon arrest, Middletown police contacts Kathy Becker regarding any individual with mental health concerns. Four holding cells can be used to separate individuals with serious mental illness. In most cases, individuals with SMI would be transferred to the county jail. Average stay in city jail under three days. The city jail contracts a nurse and physician to be on-call; they go to the jail once per day to make rounds.

## Court

- All four specialty dockets accept Intervention in Lieu
- At the SAMI court, Attorneys file motion in lieu of conviction and then perform assessment
- There is one officer per court. Caseloads are as follows:
  - SAMI = 40 active, largest roster
  - Drug = 18-20 active
  - Felony nonsupport = 20 active
  - Veterans = 11 active
- West Chester Mental Health court serves three areas and is being recertified for the next three years. They are seeing an increase in first time offenders and are focused on early linkage to prevent re-offending
- Both prosecution and defense are highly involved
- Family Treatment Drug Court does warm handoff to adult courts, noted as having good communication and very positive cross-over program
- Discussion occurred regarding Senate Bill 2 changes associated with competency evaluation, restoration, referral and management. Since the law change, one case in Butler County has run through the entire process. The individual assessed as competent once sobriety was attained. The charges were filed for processing. The client struggled with the outpatient services and sobriety. Another staff person had to be hired to monitor the process due to complexity, supervision, criteria, monitoring, assessments, high level of contact, etc. Generally, there is a history of positive outcomes with community restoration, though there are struggles with individuals with developmental disabilities and acute psychosis.

## Specialty Courts

- According to the Supreme Court of Ohio Specialized Dockets Certification Status Sheet, as of May 31, 2021, Butler County has the following specialized dockets:

Judge Name	Jurisdiction	Docket Type	Status May 31, 2021
Judge Jennifer Muench-McElfresh	Butler Common Pleas	General Drug	Certified
Judge Keith Spaeth	Butler Common Pleas	General Drug	Certified
Judge J. Gregory Howard	Butler Common Pleas	General SAMI Court	Certified
Judge Michael A. Oster Jr.	Butler Common Pleas	General Veterans Treatment	Certified
Judge Kathleen Romans	Butler Common Pleas	Juvenile Family Dependency	Certified
Judge Daniel E. Haughey	Butler CC Area 3	County Court Drug	Certified
Judge Daniel E. Haughey	Butler CC Area 3	County Court Mental Health	Certified
Judge Daniel E. Haughey	Butler CC Area 3	County Court Veterans Treatment	Initial Review
Judge Joyce Campbell	Butler (Fairfield Municipal Court)	Municipal Mental Health	Certified
Judge Joyce Campbell	Butler (Fairfield Municipal Court)	Municipal OVI	Certified

- Hamilton Court initiated an Empowerment Docket last year. The idea was generated by police to address low level criminal behaviors associated with homelessness, e.g., trespassing, loitering, pan handling, etc. Wrap-around services are provided, and if successful, individual fines and costs will be dismissed.

- One of the Common Pleas Drug Court dockets is a felony non-support court with twenty active participants.

## Veterans

- See narrative above, re: Veterans Education Training Services

## Intercept III – Identified Gaps

- ▣ Certified peer resources. One barrier is very poor reimbursement rates to agencies for peer-based services which in turn affects the pay scales for peer support staff
- ▣ Education to attorneys for specialty involvement courts. Referrals from defense attorneys and public defenders are lower than hoped, and attorneys do not participate in treatment team meetings/specialized docket staff meetings
- ▣ Need more programs for substance use and mental health in the jail: sufficient staff and capacity of programming units
- ▣ Data is not available on the number of people with mental illness in the jail, the length of stay for individuals with mental illness and co-occurring substance use disorders, or the number of people with mental illness and co-occurring substance use disorders returning to jail.
- ▣ Warm hand-offs to services from the jail (other than residential or placement)

## Intercept III – Identified Opportunities

- ▣ New jail data system

## Recommendations

- ▣ As a Stepping Up county, Butler County should prioritize jail data collection efforts in line with Stepping Up metrics with the implementation of its new jail data system,
- ▣ The courts may want to explore mandatory training for assigned counsel to be eligible for assignment to mental health cases, like what Cuyahoga County requires,

## Intercept IV: Prisons / Reentry

### Prison

- Community Linkage referrals from the Ohio Department of Mental Health and Addiction Services (OMHAS) regarding individuals with serious mental illness and/or substance use disorders returning from prison to the community are sent to Transitional Living Center (TLC) or Community Behavioral Health. From July 2020 to June 2021, OMHAS completed 82 referrals to Butler County. CTP indicates Community Transition Program which focuses on substance use treatment:
  - Mental health referrals: 17
  - Mental health/CTP: 9
  - CTP referrals: 56.
- All Community Based Correction Facilities are out of Butler County. Three are utilized by courts in lieu of prison for residential treatment: CCC (Warren County), River City (Hamilton County) and Monday (Montgomery County)
- With SSI suspended during incarceration, it creates challenges for individuals transitioning out of correctional or hospital settings. Extra funds are being spend on group homes because people do not have SSI checks.

## Jail

- Jail Linkage program: there were 215 linkages with TLC and CBH in one year's time
- The county jail's standard release time is 5:00 a.m. This policy is based on other responsibilities and the physical structure.
- The jail has a collaboration with OhioMeansJobs
- The Butler-Warren Reentry Coalition was identified but information on services and eligibility was not available on the day of the workshop
- TCAP (Targeted Community Alternative to Prison for F4 and F5s) – some individuals are being incarcerated or sentenced to county jail. Funding for TCAP is relatively unrestricted as long as individuals are not sentenced to prison for felony 4 and 5 offenses. Butler County has chosen to put funds toward community correction and GPS monitoring.

## Intercept IV – Identified Gaps

- ▣ Increase communication between departments prior to release to reinstate benefits
- ▣ Jail release schedule
- ▣ Release from jail needs better coordination with providers, courts, and jail
- ▣ Targeted Community Alternatives to Prison (TCAP) individuals not eligible for all services they would have been if incarcerated

## Intercept IV – Identified Opportunities

- ▣ Butler-Warren Reentry Coalition – possible expansion or in-reach

## Recommendations

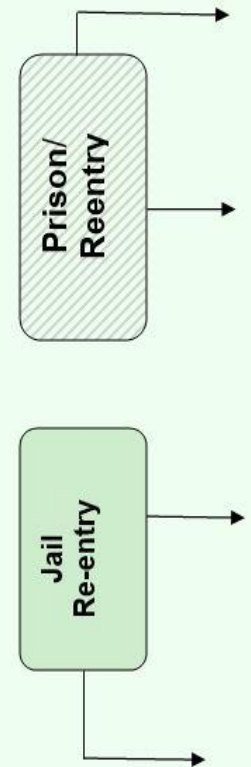
- ▣ While not a priority, it might be illustrative to do a full comparison study of outcomes for individuals on TCAP vs. individuals coming through the traditional prison to reentry pipeline
- ▣ Explore the status of the Butler-Warren Reentry Coalition and its capacity for expanded services

## Intercept V: Community Corrections / Community Support

### Probation

- There are four municipal probation departments
- There are 12 probation officers total (3-4 in each department)
- There are around 40 probation officers in probate
- All receive specialized training
- GPS Monitoring through Common Pleas Court

## Intercept 4 Reentry



- The Sheriff's department supervises individuals ordered on GPS monitoring (70 units), used for both probation and pretrial. All are currently being paid by TCAP, with funding set for the next two years. The goal is to continue offering more to reduce the jail population.
- Violations are reported to the court

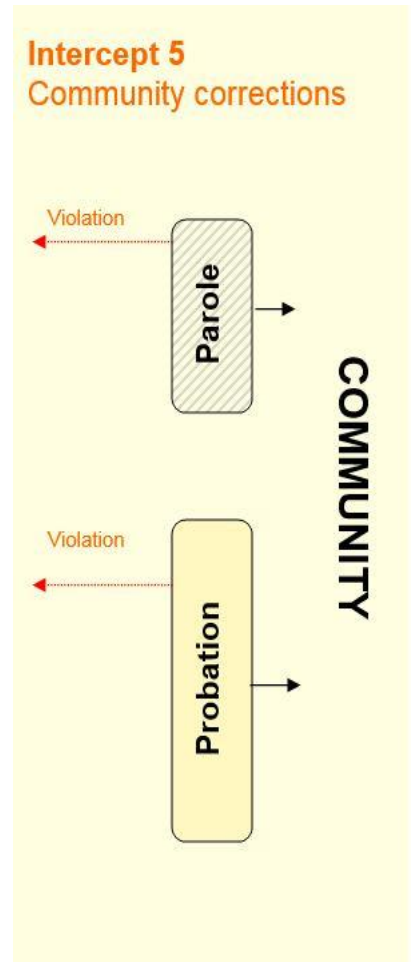
### Parole

- Most utilize resources and share information with probation

### Community Supports

The following represents services, agencies and programs that were highlighted during the workshop and is not meant to be an exhaustive or comprehensive roster of all community supports available in Butler County.

- Transitional or supportive housing
- Sober housing
- Shelters are available across the continuum and for the targeted population. Shelters are not secure facilities, so if someone has significant restrictions ankle monitoring is used
- Halfway houses are all out-of-county: Talbert House, Turtle Creek, Serenity Hall
- Transportation is a significant issue. Medicaid transportation services are primary. Regional Transit Authority is currently free of charge because of the pandemic. Beckett Springs transports people in for assessments if within 25 miles.
- Positive feedback from clients as reported by workshop participants: All SAMI court participants are referred to Opportunities for Ohioans with Disabilities. Clients like one-stop shop at SAMI docket (services brought together). There is a variety of behavioral health options and opportunities for relinkage.



### Veterans

- The Veterans Justice Outreach Program was identified as generally active and engaged, though nothing specific to probation or parole was noted.

### Intercept V – Identified Gaps

- ▣ Transportation, especially for outlier communities, pro-social activities and events, and evening

# Priorities for Change

Butler County,  
Ohio

## Butler County Priorities

Upon completion of the *Sequential Intercept Mapping*, the assembled stakeholders reviewed identified gaps and opportunities across the intercepts and then proposed updated or new priorities for collaboration in the future. After discussion, each participant voted for their top three priorities.

In 2014 the two top priorities that emerged and were reflected in the report were Mental Health Crisis Drop-off and Stabilization; and AoD Detox Center. These two items were bundled in one priority action area and continue to be an active priority in Butler County. The current process to assess, plan, and implement a Crisis Stabilization Unit (CSU) in Butler County was discussed in the December 2021 SIM mapping meeting. It was assumed by the participants at this meeting that the CSU remains a high priority for the county and that a group was actively continuing to work on this action plan. As such, the CSU was not brought forward as a new gap to be voted on and is not reflected in the new or redefined gaps that were selected in the current 2021 priorities. The four priorities listed below are therefore in addition to the continuing work to develop a CSU. In addition, the housing gap priority that was selected in 2021 has a broader focus than the priority selected in 2014, which was more narrowly focused on evening and weekend access.

Listed below are the results of the voting and the updated priorities ranked in order of voting preference.

### Top Priorities for Change

1. Housing
2. Jail Programming
3. Cross-Training
4. Jail Reentry Coordination

### Other Priorities – items receiving one or more votes during the prioritization process

- Hospital options (7 votes; Intercept 1)
- Mobile crisis alternatives to hospital (6 votes; Intercept 1)
- Long-term hospitalization (5 votes; Intercept 0)
- Effective alternatives to 911 abusers (5 votes; Intercept 1)
- High intensity/high fidelity (4 votes; Intercept 0)
- Lack of booking information being shared with board/provider agencies (2 votes; Intercept 2)
- In-county detox (1 vote; Intercept 0)
- General knowledge of hotline (1 vote; Intercept 1)
- Attorney education on SMI (1 vote; Intercept 1)
- Increase of communication between departments prior to inmate release to reinstate benefits (1 vote; Intercept 4)

### Parking Lot Issues

- Payors
- Qualified staff shortage
- Parity insurance issues
- Medicaid access at individual county level
  - Reincarcerated – not convicted/convicted
- Release from state hospital - access to SSI benefits

## Additional Resources

Arnold Ventures	<a href="http://www.arnoldventures.org/">www.arnoldventures.org/</a>
BeST Practices in Schizophrenia Treatment Center (BeST Center)	<a href="http://www.neomed.edu/bestcenter/">www.neomed.edu/bestcenter/</a>
CIT International	<a href="http://www.citinternational.org">www.citinternational.org</a>
Coalition on Homelessness and Housing in Ohio	<a href="http://www.cohhio.org">www.cohhio.org</a>
Community Oriented Correctional Health Services	<a href="http://www.cochs.org">www.cochs.org</a>
Corporation for Supportive Housing	<a href="http://www.csh.org">www.csh.org</a> 40 West Long Street, Columbus, OH 43215-8955 <b>Phone:</b> 614-228-6263 <b>Fax:</b> 614-228-8997
Council of State Governments Justice Center Mental Health Program	<a href="http://www.csgjusticecenter.org/mental-health">www.csgjusticecenter.org/mental-health</a>
Crisis Text Line	<a href="http://www.crisistextline.org/">www.crisistextline.org/</a>
The Federal Bonding Program	<a href="http://www.bonds4jobs.com">www.bonds4jobs.com</a>
Lutheran Metropolitan Ministry Health & Wellness	<a href="http://www.lutheranmetro.org/home-page/what-we-do/health-wellness-services/">www.lutheranmetro.org/home-page/what-we-do/health-wellness-services/</a> <b>Phone:</b> 216-696-2715 <b>Email:</b> <a href="mailto:mail@lutheranmetro.org">mail@lutheranmetro.org</a>
Medicine Assistance Tool	<a href="https://medicineassistancetool.org/">https://medicineassistancetool.org/</a>
National Association of Pretrial Services Agencies	<a href="https://napsa.org/eweb/startpage.aspx">https://napsa.org/eweb/startpage.aspx</a>
National Alliance on Mental Illness (NAMI)	<a href="http://www.nami.org">www.nami.org</a>
NAMI Ohio	<a href="http://www.namiohio.org">www.namiohio.org</a>
National Center for Cultural Competence	<a href="http://www.nccc.georgetown.edu">www.nccc.georgetown.edu</a>
National Criminal Justice Reference Service	<a href="http://www.ncjrs.gov">www.ncjrs.gov</a>
National Institute of Corrections	<a href="http://www.nicic.gov">www.nicic.gov</a>
National Institute on Drug Abuse	<a href="http://www.drugabuse.gov">www.drugabuse.gov</a>
Office of Justice Programs	<a href="http://www.ojp.usdoj.gov">www.ojp.usdoj.gov</a>
Ohio Criminal Justice Coordinating Center of Excellence	<a href="http://www.neomed.edu/cjccoe/">www.neomed.edu/cjccoe/</a>
Ohio Department of Rehabilitation and Correction Ohio Reentry Resource Center	<a href="http://www.drc.ohio.gov/reentry-office">www.drc.ohio.gov/reentry-office</a>
Ohio Ex-Offender Reentry Coalition	<a href="http://www.drc.ohio.gov/reentry-coalition">www.drc.ohio.gov/reentry-coalition</a>
Ohio Housing Finance Agency	<a href="http://www.ohiohome.org">www.ohiohome.org</a> <b>Phone:</b> 888-362-6432
Policy Research Associates/SAMHSA's GAINS Center	<a href="http://www.prainc.com">www.prainc.com</a>
The P.E.E.R. Center	<a href="http://thepeercenter.org">http://thepeercenter.org</a>
Pretrial Justice Institute	<a href="http://www.pretrial.org">www.pretrial.org</a>
SOAR: SSI/SSDI Outreach and Recovery	<a href="https://soarworks.prainc.com/">https://soarworks.prainc.com/</a>
The Source for Housing Solutions - Ohio	<a href="http://www.csh.org/oh">www.csh.org/oh</a> <b>Phone:</b> 614-228-6263 <b>Email:</b> <a href="mailto:ohioinfo@csh.org">ohioinfo@csh.org</a>
Stepping Up Initiative	<a href="http://www.stepuptogether.org">www.stepuptogether.org</a>
Substance Abuse and Mental Health Services Administration	<a href="http://www.samhsa.gov">www.samhsa.gov</a>
Summit County Reentry Network	<b>Phone:</b> 330-615-0569
Supreme Court of Ohio Specialized Dockets Section	<a href="http://www.supremecourt.ohio.gov/JCS/specdockets/default.asp">www.supremecourt.ohio.gov/JCS/specdockets/default.asp</a>

Treatment Advocacy Center	<a href="http://www.treatmentadvocacycenter.org">www.treatmentadvocacycenter.org</a>
University of Memphis CIT Center	<a href="http://www.cit.memphis.edu">www.cit.memphis.edu</a>
Vera Institute of Justice	<a href="http://www.vera.org">www.vera.org</a>
Veterans Justice Outreach	<a href="http://www.va.gov/HOMELESS/VJO.asp">www.va.gov/HOMELESS/VJO.asp</a>

**Sequential Intercept Mapping  
Butler County, Ohio | December 2-3, 2021**

**Final Participant Roster**

<b>First</b>	<b>Last</b>	<b>Position</b>	<b>Organization</b>	<b>Email</b>
Dennis	Adams	Lieutenant	Warden Butler County Jail	<a href="mailto:dadams@butlersheriff.org">dadams@butlersheriff.org</a>
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Tiffany	Lombardo	Dir of Addiction Services	BCMhARS BOARD	<a href="mailto:lombardotr@bcmhars.org">lombardotr@bcmhars.org</a>
Steve	Longworth	Director of Court Services/Clerk of Courts	Middletown Municipal Court	<a href="mailto:stevel@cityofmiddletown.org">stevel@cityofmiddletown.org</a>
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Final Observer Roster

First	Last	Organization
Sheri	Bartels	TLC
Rob	Clevenger	Juvenile Justice Center
Myron	Fridman	Community Behavioral Health
Julie	Gilbert	Department of Jobs and Family Services
Ellen	Stollings	BCMhARS BOARD

Action Planning Matrix for Butler County, Ohio

Priority Area 1: Housing			
Objective	Action Step	Who	When
1	Review Housing Czar position	County – possibly neighborhood housing (county provider)	2022
2	Identify a 40-bed residential unit	Serve City – American Rescue Funds (ARF) Plan	2022
3	Assessment of residential housing needs. Including types, affordability, subsidies, and wrap around supports.	Housing Czar	2022
4	Schedule a housing summit with all housing providers in Butler County	Neighborhood housing	Spring 2022

- Identify Housing Czar group
  - o Define position and salary
  - o Funding for position
  - o How to perform search
  - o Interviews
- Research/investigate building option
- Funding options and structure
- Who is landlord and sustainability
- Research and identify housing types in general
- Survey existing housing types in Butler County and capacity
- What treatment services at sites and are needed /gaps
- Determine short term vs long term housing
- \*important to reach out to Metro Housing as key financial voucher provider for supportive housing*
- Determine who holds the meeting and agenda for meeting and who to invite
- When data is needed pre-meeting and post-meeting
- Create housing inventory and make a housing guide
- Perform housing education and resources education

### Action Planning Matrix for Butler County, Ohio

5	Review and identify housing models/best practices	<ul style="list-style-type: none"> <li>- Research and identify local, state, and national housing models</li> <li>- Tour TLC and TAP Center Haven, YWCA, Serve City, and Hope House</li> <li>- Review funding for staff at models as well as staffing ratio</li> </ul>	Housing Czar and committee	2022
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Action Planning Matrix for Butler County, Ohio

Priority Area 2: Jail Programming			
Objective	Action Step	Who	When
1 Identify unmet needs	<ul style="list-style-type: none"> <li>- Jail system (Jail 6) track “court ordered” or court referred assessments (survey)</li> <li>- BCMHARS run report for any assessment billed at jail to the board</li> <li>- Provider waitlist sent to jail/court system for clients waiting on beds/programs in the community</li> <li>- Track inmates requesting jail programming on waitlist, but don’t make it to treatment in jail</li> </ul>	<p>Lindsey Baker</p> <p>Tiffany Lombardo</p> <p>Rob Menke &amp; Lindsey Baker</p> <p>Lindsey Baker</p>	?
2 Forensic team/non-crisis needs	<ul style="list-style-type: none"> <li>- Evaluate data from CIT, identify inmates who are incarcerated as “last/only” option                             <ul style="list-style-type: none"> <li>o could go to drop-off</li> <li>o no need for crisis service in jail</li> </ul>                             (request that CIT track data on who would have gone elsewhere than jail if an option)                         </li> <li>- identify two mental health requests in jail that could use on-going mental health treatment in jail (track that number vs requests that are situational)</li> </ul>	<p>Sheri Bartels</p> <p>Frank Jamieson</p>	?

Action Planning Matrix for Butler County, Ohio

**Priority Area 3: Cross-Training: goal is to facilitate cross-discipline cooperation through education to improve crisis outcomes**

Objective		Action Step	Who	When
1	Create committee	- Determine committee disciplines	CIT Steering Committee	January – March 2022
2	Identify goals	- Research: <ul style="list-style-type: none"> <li>o Summit County</li> <li>o Citizens Police Academy</li> </ul> - Determine scope - Modality of training	Cross-Training Committee	April – June 2022
3	Develop Curriculum	- Apply research to determine curriculum	Cross-Training Committee	October 2022 – October 2023
4	Confirm multi-agency commitment	- Reach out to command of agencies/associations	Cross-Training Committee	November 2022 – December 2023
5	Implement training	- Determine location - Determine invitees	Cross-Training Committee	2024

Action Planning Matrix for Butler County, Ohio

Priority Area 4: Jail Reentry Coordination				
Objective		Action Step	Who	When
1	Determine best practice	<ul style="list-style-type: none"> <li>- Map our current practice</li> <li>- Research other counties and Department of Rehabilitation and Corrections (DRC)</li> <li>- Connect with Opportunities for Ohioans with Disabilities (OOD)</li> </ul>	Jenny Kristen Kristen	
2	Determine volume/level of need	<ul style="list-style-type: none"> <li>- Gather release data (3 months?)</li> <li>- Report out to stakeholders</li> </ul>	Committee	January 11, 2022
3	Apply best practices	<ul style="list-style-type: none"> <li>- Identify key providers</li> <li>- Develop plan of coordination</li> <li>- Explore funding and viability of "one stop shop"</li> <li>- Pilot plan</li> </ul>	Committee	Court Admin Window  D/C Coordination OOD Jail

## Appendix

## Appendix A

### JAIL BOOKINGS

*Please report most recent data available (12-36 months)*

Person Completing Form *(name/title)* \_\_\_\_\_ **Scott Rasmus & Butler County SIM Group** \_\_\_\_\_

Time period being reported **CY2019**

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
What is the rated capacity of the jail?	1170	Using pre-covid data for all	CY2019 1170, 3 buildings PHQ2 depression and SSI – simple substance index BC Jail F pod – MH focused 3 pods that address MH inmates
What is the average daily total population of the jail?	1061		CY2019
What is the average number of total daily bookings?	29		
What type of automated system is used to collect Jail Booking, classification, health and release information?	JMS		Central Square Jail PHQ2, mental health screenings JMS system Correct Tech - medical
Please provide the number and types of booking that are used for the following categories: <i>(If unable to provide objective data on booking types, please provide average percentage of each population)</i>	?		Can't break these numbers down
Pretrial Misdemeanor	679		
Pretrial Felony	4614		
Probation Violation			
Sentenced local			
Sentenced awaiting transport			
Other	617		Waiting to transfer to prison
Is there a separate facility or unit for mental health? If not, where are persons with mental illness housed?	yes		3 pods addressing MH however F pod – MH especially These numbers are for 2019 and is expected the numbers would be lower for 2020 due to COVID.
<b><i>How many people are identified as having mental health issues?</i></b>			
By jail booking staff	4081		Self-reported at booking
While incarcerated (by corrections officers, health staff or others)	10,621 duplicated count,		Referrals are not something that TLC (jail MH focused agency) has tracked. They

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
	2,227 unduplicated (only counts Butler Co)		are tracking how many they saw. 12,821 inmates that came through the jail. Includes all inmates Butler County, other counties, U. S. Marshall inmates. Butler county % unknown. TLC numbers for Butler co seem to be about 75% of this total. Estimated at about 9,616. Identified with MH issues is 4081.
Does your Booking/Automated system allow the Jail to identify or flag defendants with Mental Illness for future booking information?	1751		This is included in the notes in JMS.
What is the average daily population of persons with mental illness?	796		1061X0.75 estimate
What is the average number of daily bookings of people with mental illness?	22		Estimate 29X75%
What percentage of the pre-trial population represents persons with mental illness?	?		Don't have this data
What percentage of the sentenced population represents persons with mental illness?	?		Don't have this data
<b>CROSS TABULATION OF MULTI-SYSTEM DATA</b>			
<i>For the entire population of persons booked into jail during the identified time period (open or closed cases):</i>			
Is Jail Booking information shared on a regular basis with public funded Mental Health, AOD or Developmental Disability Agencies?---if so how?	no		Booking information is not shared.  City of Middletown, OH jail – 70 capacity which is above and beyond BC Jail census and information
How many were known to the publicly funded mental health system?			Being done but not currently tracked.
How many accessed acute crisis services during the specified reporting period?			Being done but not currently tracked.
How many were known to the publicly funded substance abuse treatment system?			Being done but not currently tracked.
How many were known to the Developmental Disabilities system?			
<b>ADDITIONAL JAIL/OFFENSE-RELATED INFORMATION</b>			
For those who are identified as <b>persons with mental illness</b> or co-occurring substance abuse or developmental disabilities (by jail, other criminal justice, or treatment systems), what are the nature of the charges?			

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
Misdemeanors	?		Unable to do this in an effective way.
Felonies	?		
Violent Behavior	?		
Violations of Probation	?		
Frequency - How many arrests / bookings per person? (average)	?		Ability to track, Should be in JMS.
Length of stay in the jail for each episode of incarceration (average)	?		May be able to get in JMS. This data would be skewed due to summit and EMU and those waiting on beds elsewhere.
<b>DISCHARGE / REENTRY of individuals with mental illness or co-occurring disorders:</b>			
How many people left the jail with financial benefits or entitlements in place?	--		Not tracked
How many people left the jail with a shelter as the identified residence?	--		Not tracked
How many people had no known residence?	--		Not tracked
How many people left the jail with an appointment at a mental health or other treatment service?	--		Can track anyone that CBH or TLC tracks (these represent the 2 BH agencies that have jail contracts with the BCMHARSB to provide services in the BC jail. All agencies use walk-in/open access model, so that should count as appt in the spirit of access.
How many people with mental illness had contact with a helping professional from the community to facilitate reentry?	215		Don't track this data. 215 from linkage report (BH linkage grant from ODMHAS tracks a subset of entire BC Jail population. Estimate it is a lot higher than that, but only includes linkage of CBH and TLC. Only have data from in-jail providers.

## Community Collaboration Questionnaire

Effective and efficient services for people with mental illness and co-occurring substance use disorders in the justice system require meaningful cross-system collaboration. The *Community Collaboration Questionnaire* provides the CJ CCoE with background information about your community's experience in collaborating across systems. It is recommended that one questionnaire be completed in consultation with all of the key stakeholders.

Please note that it is preferable not to have separate questionnaires filled out by various key stakeholders.

*Note:* We have added an addendum to gather information on the impact of the COVID-19 pandemic as it relates to Sequential Intercept Mapping.

This information helps prepare the CJ CCoE for providing the best direction during the training about the points of intervention most useful in your community. This document can be filled in and returned by way of email to [rsimera@neomed.edu](mailto:rsimera@neomed.edu)

<b>Community:</b>		
<b>Contact Person:</b>	<b>Phone</b>	<b>Email</b>

	Please check the appropriate box for each and provide descriptions as necessary.	YES	NO
1	Has your community begun to collaborate in providing services/working with people with mental illness and co-occurring disorders in the criminal justice system?  <i>BC MHARS board provides 2 providers in the jail and a linkage program in the jail with special dockets and providers in the courts.</i>	X	
2	Does your community have a cross-system collaborative team or task force? <i>If yes, please attach the membership list by agency and/or title, listing mental health providers, criminal justice services, substance abuse services, consumers, family members, elected officials and others.</i>  <b><i>BC Stepping Up team fits this definition</i></b>	X	
3	Does your community provide for cross-training of mental health, substance abuse, criminal justice and other providers? <i>If yes, please list recent programs:</i>  <i>CIT, regular behavioral health training across departments and agencies</i>	X	
4	Does your community have resources identified to work with people with mental illness and co-occurring disorders in the criminal justice system? <i>Please describe:</i>  <i>Jails, specialty courts, BH professional ride-alongs</i>	X	

Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
5	<p>Do agencies have dedicated staff or staff time to work with the criminal justice/mental health population?  <i>Please describe:</i></p> <p><i>Jails, specialty courts, BH professional ride-alongs</i></p>	X	
6	<p>Does your community gather data about persons with mental illness and co-occurring substance use disorders involved with the criminal justice system?  <i>Please describe:</i></p> <p><i>Being done within individual entities but there is no coordination nor accessibility to all stakeholders (e.g. specialty dockets, mobile crisis and ride-alongs.)</i></p>	X	
7	<p>Does your community have one or more boundary spanners (individuals whose identified role is to link the criminal justice and mental health systems)?  <i>Please describe the position and the person(s):</i></p> <p><i>Dedicated professionals involved in specialty courts and ride-alongs.</i></p>	X	
8	<p>Does your community have mechanisms, such as MOUs or other agreements, to facilitate services, facilitate communication or enhance safety across agencies or systems?  <i>Please describe or if possible, provide copies of MOUs:</i></p> <p><i>Examples of MOU's with Sojourner, OOD, &amp; BC TASC</i></p>	X	
9	<p>Are there any local agencies that have not participated in collaboration efforts?  <i>Please describe:</i></p> <p><i>Not all agencies have programming geared toward criminal justice.</i></p>	X	
10	<p>Does your community have any jail or court diversion programs at this time?  <i>Please describe:</i></p> <p><i>Many intervention programs are in place but no diversion programs.</i></p>	X	

Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
11	<p>Does your community have a mental health, drug or other specialty court? <i>Please describe:</i></p> <p><i>Yes, there are mental health, substance use, empowerment for homeless, veterans and felony non-supportive.</i></p>	X	
12	<p>Does your community have a mechanism (such as an MOU) to facilitate partnerships with probation, parole or law enforcement? <i>Please describe or if possible, provide copies of MOUs.</i></p> <p><i>Yes, there are mental health, substance use, empowerment for homeless, veterans and felony non-supportive.</i></p>	X	
13	<p>Have screening or assessment procedures been instituted in the mental health, substance abuse and criminal justice systems to identify people with mental illness and co-occurring substance use disorders? <i>Please describe:</i></p> <p><i>Jail, specialty court screenings and pre-trial.</i></p>	X	
14	<p>Does your community use criminogenic risk assessment tools among the justice involved individuals with mental illness? <i>Please describe:</i></p> <p><b><i>Pre-trial and probation do, Lower courts do not, Common pleas courts do ORAS survey commonly used</i></b></p>	X	
15	<p>Have re-entry services been instituted to help people returning to their communities from jail or prison? <i>Please describe:</i></p> <p><i>Linkage program, TLC coordinator, &amp; Butler/Warren County re-entry coalition</i></p>	X	
16	<p>To be successful, what aspects of each agency's culture do the other agencies need to be sensitive?</p> <p><i>Question unclear. CIT and ride-alongs are covering some of the gaps.</i></p>		

Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
17	<p>Do you have examples, other than what is already listed in this questionnaire, of successful collaboration between criminal justice and mental health?</p> <p><i>Please describe:</i>  <i>Police officers have begun serving on boards. Community Caring Collaborative (C3), NAMI, Butler Behavioral Health (BBH), BCMHARSB &amp; BC Jail, &amp; Stepping Up.</i>  <i>Competency restoration</i></p>	X	
18	<p>What would you list as your community's strengths?</p> <p><i>Commitment to SIM update</i>  <i>Collaboration</i>  <i>Open minded</i></p>		
19	<p>What would you list as your community's biggest challenge at this time?</p> <p><i>Funding</i></p>		

## COVID-19 ADDENDUM

To help us tailor our technical assistance to best meet your needs, we want to learn about your community's response to the COVID-19 pandemic and how that might relate to Sequential Intercept Mapping. Please respond to the following questions regarding the impact of COVID-19 on your community.

		Yes	No
21	<p>Has the Covid-19 pandemic affected any planning or implementation activities related to Sequential Intercept Mapping? If yes, please explain.</p> <p><i>It has delayed us in our SIM timing by about 1 year</i></p>		X
22	<p>In response to the COVID-19 pandemic, have there been any new responses or changes in your approach to meeting the needs of people with mental illness and co-occurring substance use disorders in the criminal justice system? Please include impacts to law enforcement, jail, court, probation and/or reentry processes.</p> <p><i>Teleconferencing however some SMI clients do not like it.</i></p>		X
23	<p>Has the COVID-19 pandemic impacted community-based services, practices or policies in any way? If yes, please explain the nature of the changes.</p> <p><i>Teleconferencing Difficulty in staffing agencies fully to provide services. Hiring credentialed BH staff and keeping these staff also</i></p>	X	
24	<p>What impact, if any, has the COVID-19 pandemic had on people living with mental illness and co-occurring substance use disorders who are involved in the criminal justice system?</p> <p><i>Isolation, aggravated symptomology, increased burden on law enforcement and courts.</i></p>		

## Appendix B



### Program Brief

#### Marysville Fire Division Community Paramedic Program – Marysville, Ohio

*Problem Statement:* The Marysville Fire Division within Union County, Ohio protects 30,000 individuals living in the City of Marysville, Paris, Dover and a portion of Darby townships. The Fire Division responds to approximately 3,800 incidents annually. The Division began seeing the same patients call repeatedly, sometimes several times a week, for emergency medical services. These calls affected the patient's quality of life due to time spent in the emergency department of the local hospital. To aid in this concern, the Division created the Marysville Fire Division Community Paramedic program.

*Program Overview:* The Marysville Fire Division Community Paramedic program is intended to be a provider of public health services to the elderly, underserved and chronic condition-patient populations. The program provides care as an extension of a physician, while acting as the patient's advocate to connect them to a variety of beneficial social services outside the emergency department or hospital. Community Paramedics provide health assessments, chronic disease monitoring and education, medication care and prescription regime compliance, hospital discharge follow-up care, and minor medical procedures approved by the medical director. Paramedics provide these services while on duty and not actively involved in emergency response activities. The goals of the program are threefold: to improve the quality of life of residents; to improve health outcomes among medically vulnerable populations; and to save healthcare dollars by preventing unnecessary ambulance transports, emergency department visits, and hospital readmissions.

The program targets super-users of the Marysville Fire Division Emergency Medical Services (EMS) system. These super-users are defined as those patients that utilize EMS services more than eight times in a 12-month period. Participation in the program is voluntary. Participants must be:

1. At least 18 years of age and capable of providing consent (exceptions for minors may be made on a case by case basis)
2. Not enrolled in an inpatient or residential Psychiatric Program designed for the Severely Mentally Ill (individuals receiving outpatient services are eligible)
3. Not enrolled in Hospice
4. Not an inmate of Ohio Reformatory for Women (ORW)

Participants may be referred to the program by other service agencies or identified as meeting the super-user criteria. The EMS Bureau Chief maintains a list of all participants in the program. Participants can be un-enrolled, terminated or graduate from the program by meeting one or more of the following criteria:

1. Voluntary exit from the program by the participant
2. Death of the participant
3. Participant primary residence moves outside the Marysville Fire Division response area
4. Participant is relocated to an assisted living facility or nursing home
5. Participant no longer meets the criteria for super-user within a six-month period
6. Participant is non-compliant with the program

The program has collaborated with Wings Recovery and Support for peer support services and various other organizations throughout Union County and Central Ohio.

*Outcomes:* Since implementation, the program has had ten participants graduate by having less than ten calls for EMS in a one-year period. Many of these past participants no longer require EMS, thus improving their quality of life by not spending hours per week in the local hospital emergency department.

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To learn more about the Marysville Fire Division Community Paramedic Program, please contact:  
Chief Jay Riley  
[jriley@marysvilleohio.org](mailto:jriley@marysvilleohio.org)