

ALL SHERIFFS' AUTHORITY 2019 MENTAL HEALTH REPORT: RECOMMENDATIONS

1. National Policy Initiative: Education and Awareness -

Across the country, public mental health services are overwhelmed, inadequately funded and, as a result, individuals with mental health and substance use disorders do not receive the treatment and support services they need to remain in the community and out of the criminal justice system. Raising awareness of the challenges and needs of sheriffs and their community mental health partners is the first step in developing collaborations, identifying solutions, and securing necessary resources.

Action: Establish a National Policy Initiative to Increase Education and Raise Awareness of the Nation's Mental Health Crisis and its Impact on Law Enforcement, Jails, Behavioral Health Systems, and the Safety of Our Communities.

- Create a Standing, Interagency Working Group on Mental Health to address the mental health challenges facing our nation's jails and communities.
- Develop coloborative partnerships with sheriffs, criminal justice, mental health and human service stakeholders to identify resource gaps and areas of need with prevention, intervention, and diversion programming designed to assist individuals with mental health and substance use disorders before they touch the criminal justice system.
 - Secure increased funding for the National Institute of Corrections (NIC) and Bureau of Justice Assistance (BJA) to develop training and technical assistance (TTA) opportunities, including Sequential Intercept Mappings, for building crosssystem partnerships to respond to the national mental health crisis.
 - Continue discretionary TTA funding under BJA's Justice and Mental Health Collaboration Program.
- Support education for sheriffs, prosecutors, and judges through in-person, virtual, and peer-to-peer training and technical assistance on mental illness, substance use disorders, and alternatives to incarceration.
- Secure private sector partner input to enhance outcomes.
- 2. Establish Integrated Crisis Response, Diversion, and Jail-Based Mental Health Services -

Law enforcement and mental health professionals must form partnerships to offer prevention and intervention strategies before at risk individuals come into contact with the criminal justice system. These partnerships must also build a comprehensive continuum of care that includes crisis response. Through federal investments in research, grant programs, and technical assistance, promising practices and innovative programs have been identified in the areas of preand post-arrest diversion, crisis response and jail-based mental health services.

Action: Through federal leadership, incentivize law enforcement and mental health partnerships that divert individuals with mental health and substance use disorders from the criminal justice system.

Opportunities:

- Convene leadership from the U.S. Department of Justice and U.S. Department of Health and Human Services to efficiently and effectively coordinate existing federal resources for the creation and implementation of diversion programs.
- Allocate resources for TTA that support law enforcement and their mental health partners in building the necessary infrastructure for crisis response.
- In coordination with the Substance Abuse and Mental Health Services Administration, identify and disseminate promising practices and critical considerations, including financing, and programming for the development and use of crisis stabilization centers or law enforcement friendly mental health drop-off centers.
- Establish a demonstration grant program that funds five (5) super regional crisis stabilization centers. These centers should provide a humane alternative placement for individuals in mental health crisis who require assessment, triage, and connection to services, but who do not pose a threat to public safety and do not require the use of public safety resources.
- Continue support for TTA funding for BJA's Justice and Mental Health Collaboration Program.

Action: Enhance jail-based mental health services to respond to individuals with mental health and substance use disorders.

- Support the development of national jail guidelines for care, which specifically cover the provision of mental health care services.
- Develop and disseminate model contract language for jail-based mental health care service delivery.
- Provide resources and technical assistance to support the sharing of information across systems to better understand this population and to prioritize those that need services and diversion while maintaining and protecting privacy.
- Provide additional resources and support to sheriffs' offices and police departments to implement co-response models for their patrol function to include mental health clinicians and/or social workers on response calls relating to behavioral health and substance use.

• Establish a promising practices response center for law enforcement to receive training and technical assistance on how to respond to individuals perceived in a mental health crisis.

3. Development of and Support for Cohesive and Evidence Based Reentry Programming -

The vast majority of individuals with mental health and substance use disorders who enter jails will return to their communities and need continued support through a variable continuum of care. By providing evidence-based reentry services that connect individuals to treatment and support services, the likelihood an individual recidivates is decreased.

Action: Implement evidence-based reentry services that include warm-handoffs to mental health care and substance use treatment and connection to support services that will reduce the likelihood that an individual recidivates.

Opportunities:

- Allocate federal resources for training and technical assistance to sheriffs and jail administrators for developing reentry services that focus on individuals with mental health and substance use disorders.
 - Increase TTA funding for NIC and BJA's Second Chance Act Program.
- Identify jail data points which should be collected (screening, assessment, treatment services provided, etc.) and guidance around data sharing with criminal justice partners.
- Provide federal resources to support the development and dissemination of an opensource jail management system which can track necessary data, facilitate information sharing for reentry planning, and be adopted by any jail.
- Provide additional funding and resources for the development of Medication Assisted Treatment (MAT) programs within detention facilities to include maintenance, induction, withdrawal management, data collection, and reentry connection to treatment and services in the community.
- Provide additional funding and resources for the utilization of long-acting injectable medications to treat mental health conditions within the jail setting as well as reentry into the community.
- Provide additional resources to both in-reach and post-release navigation services for individuals returning to the community with mental health and co-occuring substance use disorders.
- Secure private sector, and stakeholder group input into programming, operations, financial incentive research, and business solutions to enhance outcomes.

4. Policy Development, Including Sheriffs and Other Stakeholders, to Combat the Mental Health Crisis -

Federal and state policies impact the course of business for sheriffs and their partners in the efforts to reduce the number of individuals with mental health and substance use disorders in the criminal justice system. These policies create significant financial and operational burdens for sheriffs and their partners at the local level. Including the voice of sheriffs and other community

stakeholders in policy development can ensure that policies are less burdensome at the local level.

Action: Policymakers must include opportunities and strategies for sheriffs, mental health leaders, the private sector and community stakeholders to contribute to federal and state policy development.

Opportunities:

- Support a change to the federal Medicaid Inmate Exclusion Policy (MIEP) to allow pretrial detainees to receive their federal benefits while in jail. Currently, pretrial detainees are denied federal benefits, including Medicaid, Medicare, CHIPS and access to Veteran's benefits, despite their pretrial status and presumption of innocence.
- Support the elimination of the Institutions for Mental Disease Exclusion Policy (IMD) as it prevents communities from funding needed treatment beds.
- Support DOJ's opioid funding to be used for services that address co-occurring mental health and substance use more broadly. A significant number of individuals with opioid and substance use disorders also have a co-occurring mental health disorder.
- Advocate for the U.S. Department of Veterans Affairs to provide reentry services to veterans who are in jail as opposed to focusing services on post-release.
- Create a federal interagency working group to include representation from, but not limited to, the U.S. Department of Justice, U.S. Department of Health and Human Services, U.S. Department of Veterans Affairs, U.S. Department of Agriculture, U.S. Department of Commerce, and U.S. Department of Labor to identify federal policies that create obstacles in reducing the number of individuals with mental health and substance use disorders in the criminal justice system.
- Direct NIC to lead quarterly policy round table discussions on the mental health challenges facing our nation's jails.
- Direct DOJ to meet annually to review and address the All Sheriffs' Authority Mental Health recommendations.

5. Fund Enhanced Training for Correctional Staff Regarding Mental Health and Substance Use Disorders -

Sheriffs, jail administrators, and frontline correctional officers need support to execute their roles effectively while maintaining their health and well-being. There is a critical need for training and technical assistance in this area.

Action: Fund enhanced training for sheriffs and correctional staff to specifically build leadership capacity and skills to effectively assist individuals who have mental health and substance use disorders.

Opportunities:

• Expand funding of jail-based, peer-to-peer exchange meetings to include NIC's Large Jail Network and Chief Jail Inspectors' meetings. These jail-based meetings further disseminate and educate correctional leadership.

- Expand funding for the National Sheriffs' Institute (NSI) I, which is a leadership training program for newly elected sheriffs.
- Expand the funding for the National Sheriffs' Institute (NSI) II, which is jail administration training for sheriffs who have successfully completed the NSI I leadership program. NIC, in collaboration with NSA, has augmented this jail training to enhance the sheriffs' knowledge and ability to administer mental health and substance abuse programs.
- Support the expansion of the Texas Mental Health Jail Training for Correctional Professionals. This initiative, developed by the NIC, Sam Houston State University, and the Sheriffs' Association of Texas, was designed to disseminate statewide Crisis Intervention Training (CIT) to every correctional professional in the State and is a model for other states to replicate.
- Provide additional funding to NIC and BJA for technical assistance programs and resources that create awareness of vicarious and secondary trauma among correctional officers and frontline law enforcement.

6. Increase Resources for Rural Communities -

Rural counties generally have fewer deputies, fewer community resources, and receive little to no federal or state funding to respond to individuals with mental health and substance use disorders who come into contact with law enforcement and the criminal justice system. Many rural jurisdictions have few, if any, mental health professionals and limited treatment options.

Action: Create opportunities through federal policies and programs that support rural jurisdictions in expanding their community mental health treatment options.

- Advocate for the U.S. Department of Health and Human Services to create incentives, such as student loan forgiveness programs, that encourage mental health service providers to serve rural regions.
- Advocate for the U.S. Department of Agriculture to create additional incentives and guidance for rural county programs to include regional treatment and diversion facilities.
- Allow rural counties to partner and apply for grants either as part of a collaborative effort or allow larger jurisdictions to apply for federal funds on behalf of smaller, rural jurisdictions.
- Coordinate with the U.S. Department of Health and Human Services to advance and financially support regional, telehealth treatment models that reach rural jurisdictions. Project ECHO (Extension for Community Healthcare Outcomes) is one example of a rural "hub and spoke" model that is effectively improving health outcomes in rural areas.
- Provide competitive demonstration grants that focus on community capacity and mental health infrastructure.
- Simplify and streamline mental health and opioid grant opportunities for rural communities.

7. Continued Support for DOJ's Jails Technical Assistance and Training Support Working Group -

The nations' jails remain the subject of increasing litigation related to ensuring constitutional compliance specific to conditions of confinement; some of the federal litigation has resulted in protracted investigations and consent decrees.

Action: Continue to provide leadership and support to the nation's sheriffs and their jails by supporting DOJ's Jails Technical Assistance and Training Support Working Group.

- On November 8, 2018, the U.S. Attorney General's Office issued a directive to the Civil Rights Division as to the appropriate use of consent decrees at local and state levels of government.
- On December 14, 2018, the National Sheriffs' Association submitted a memorandum for consideration to the Deputy Attorney General proposing both the development of a pilot program and working group to assist our nation's jails with a mechanism to reduce jail litigation and expense through enhanced cooperation, targeted technical assistance and training.
- On July 17, 2019, the U.S. Attorney General's Office directed the National Institute of Corrections and Bureau of Justice Assistance to convene the Department of Justice's Jails Technical Assistance and Training Support Working Group.
- On August 28, 2019, DOJ's Jails Technical Assistance and Training Support Working Group, consisting of leadership from ODAG, CRT, NIC, BJA, COPS Office, held its inaugural meeting.
- In October of 2019, DOJ's Jails Technical Assistance and Training Support Working Group submitted its report outlining the recommendations and implementation plan for executive leadership.

- Continue the support for DOJ's Jails Technical Assistance and Training Support Working Group.
- Provide the requisite financial support of NIC, BJA, COPS and CRT for the training and technical assistance needed to assist at risk jails.
- Provide an annual report, with clear metrics, on the actions of the DOJ's Jails Technical Assistance and Training Support Working Group.

PARTICIPANTS ALL SHERIFFS' AUTHORITY 2019 MEETING ON MENTAL HEALTH

Office of the Deputy Attorney General, USDOJ

Steven Cook, Associate Deputy Attorney General

Sheriffs

Sheriff Mike Allen, Humboldt County, Nevada Sheriff (retired) Larry Amerson, Calhoun County, Alabama Sheriff Donald Barnes, Orange County, California Sheriff Brett Clark, Hendricks County, Indiana Sheriff Jerry Clayton, Washtenaw County, Michigan Sheriff Nick Cocchi, Hamden County, Massachusetts Sheriff Thomas Dart, Cook County, Illinois Sheriff Jeremy Floyd, Ottawa County, Oklahoma Sheriff Daron Hall, Davidson County, Tennessee Sheriff Calvin Hayden, Johnson County, Kansas Sheriff Peter J. Koutoujian, Middlesex County, Massachusetts Sheriff Mark Lamb, Pinal County, Arizona Sheriff Dennis Lemma, Seminole County, Florida Sheriff David Mahoney, Dane County, Wisconsin Sheriff Kenneth McGovern, Douglas County, Kansas Sheriff Gabe Morgan, Newport News, Virginia Sheriff Kelly Rowe, Lubbock County, Texas Sheriff Ron Spike, Yates County, New York Sheriff Craig Webre, LaFourche Parish, Louisiana Sheriff Ben Wolfinger, Kootenai County, Idaho

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National Partners

American Jail Association American Correctional Association American Psyciatric Foundation Association of State Correctional Administrators Council of State Governments National Alliance on Mental Illiness National Association of Counties National Association of County Behavioral Health and Developmental Disability Directors National Commission on Correctional Health Care National Tactical Officers Association Treatment Advocacy Center

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