

# Ross County, Ohio

## Sequential Intercept Mapping Final Report

October 15-16, 2018

### Ross County Core Planning Team

<b>Name</b>	<b>Position</b>	<b>Agency</b>
Kathi Bircher	Director, Outpatient Psychiatric Services	Adena Counseling Center
Jon Dick	Case Manager	Ross County Jail
Pat Friel	Owner/Director of Commission on Accreditation of Rehabilitation Facilities	Friel and Associates
Tonnie Guagenti	Emergency Services Manager	Scioto Paint Valley Mental Health Center
Jim Hagen	Clinical/Forensic Psychologist	Scioto Paint Valley Mental Health Center
Kim Jones	Director, Community Health Advancement	Adena Health System
Bud Lytle	Detective	Chillicothe Police Department
Brandy McCord	Community Liaison Officer	Ross County Juvenile Court
Lynn Miner	Case Manager and Certified Peer Recovery Supporter	Recovery Council
Julie Oates	Executive Director	Child Protection Center
Melanie Swisher	Associate Director	Paint Valley Alcohol, Drug Addiction & Mental Health Board

### Workshop Facilitators and Consultants

David Brown	Attorney at Law	David H. Brown, LLC
Haley Farver	Dissemination Coordinator	Criminal Justice Coordinating Center of Excellence
Jodi Long	Director of Treatment and Supportive Services	Montgomery County Alcohol, Drug Addiction & Mental Health Services Board
Teri Minney	Retired Coordinator	Ross County Heroin Partnership Project
Ruth H. Simera	Director	Criminal Justice Coordinating Center of Excellence



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# *Sequential Intercept Mapping*

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# 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 Ross County, Ohio on October 15-16, 2018. The workshops were hosted at Adena Hospital's Medical Education Center with local coordination provided by the Scioto Paint Valley Mental Health Center, along with a local 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 Ross 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

The Paint Valley ADAMH Board, the Ross County Sheriff, and the Scioto Paint Valley Mental Health Center requested the *Sequential Intercept Mapping* and *Taking Action for Change* workshops. A local committee was looking into the availability, accessibility, and demand for mental health services in Ross County and through that process determined that more formal assessment of the needs for and availability of mental health services was warranted. The requesting parties recognized the potential benefits of a mapping workshop from their previous participation in opioid-focused Sequential Intercept Mapping in 2015 and submitted a letter of interest in April 2018. The Sequential Intercept Mapping exercise was meant to aid Ross County with:

- Creation of a map indicating points of interface among all relevant local systems
- Identification of resources, gaps, and barriers in the existing systems
- Development of a strategic action plan 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 34 individuals representing multiple stakeholder systems including mental health, substance use treatment, criminal justice, social services, community health, health care, family support, peer and volunteer Board membership, and nursing. A complete list of participants is available in the resources section of this document. David Brown, Jodi Long, Teri Minney 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, and the belief that Recovery is Possible.*

## **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 Ross 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.
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 Ross County Sequential Intercept Map created during the workshop can be found in this report on page 6.

## **Keys to Success: Cross-System Task Force, Individuals with Lived Experience Involvement, Representation from Key Decision Makers, Data Collection**

### **Existing Cross-Systems Partnerships**

Ross County stakeholders and service providers have been involved in a variety of collaborative relationships and initiatives over the years. There are currently three primary cross-system collaborative teams/coalitions: Crisis Intervention Team (CIT) training, Post Overdose Response Team and specialized dockets. Ross County Board of Commissioners also passed a Stepping Up resolution, 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.

### **Individuals with Lived Experience Involvement**

The local planning team included a peer supporter; however, individuals with lived experience who were not also working in another role or capacity were not present at the workshop.

### **Representation from Key Decision Makers**

- The group composition provided reasonable cross-system representation of direct service staff and some middle management personnel. Key decision makers and executive staff were notably absent from the process.
- Key players that were missing at the workshops: dispatch representation, individuals with lived experience, defense attorney, prosecutor, and key decision makers for the court system and jail.

## Data Collection

- The Ross 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
  - Ross County Jail Data for 2017-2018
  
- Additional data provided by the Criminal Justice Coordinating Center of Excellence included:
  - Ross County Crisis Intervention Team Cumulative Training Report, with Ohio CIT Map – status of Crisis Intervention Team Development in Ohio, September 1, 2018
  - Fayette, Highland, Pickaway, Pike and Ross Counties CIT Officers Roster Project Summary Report, September 2015

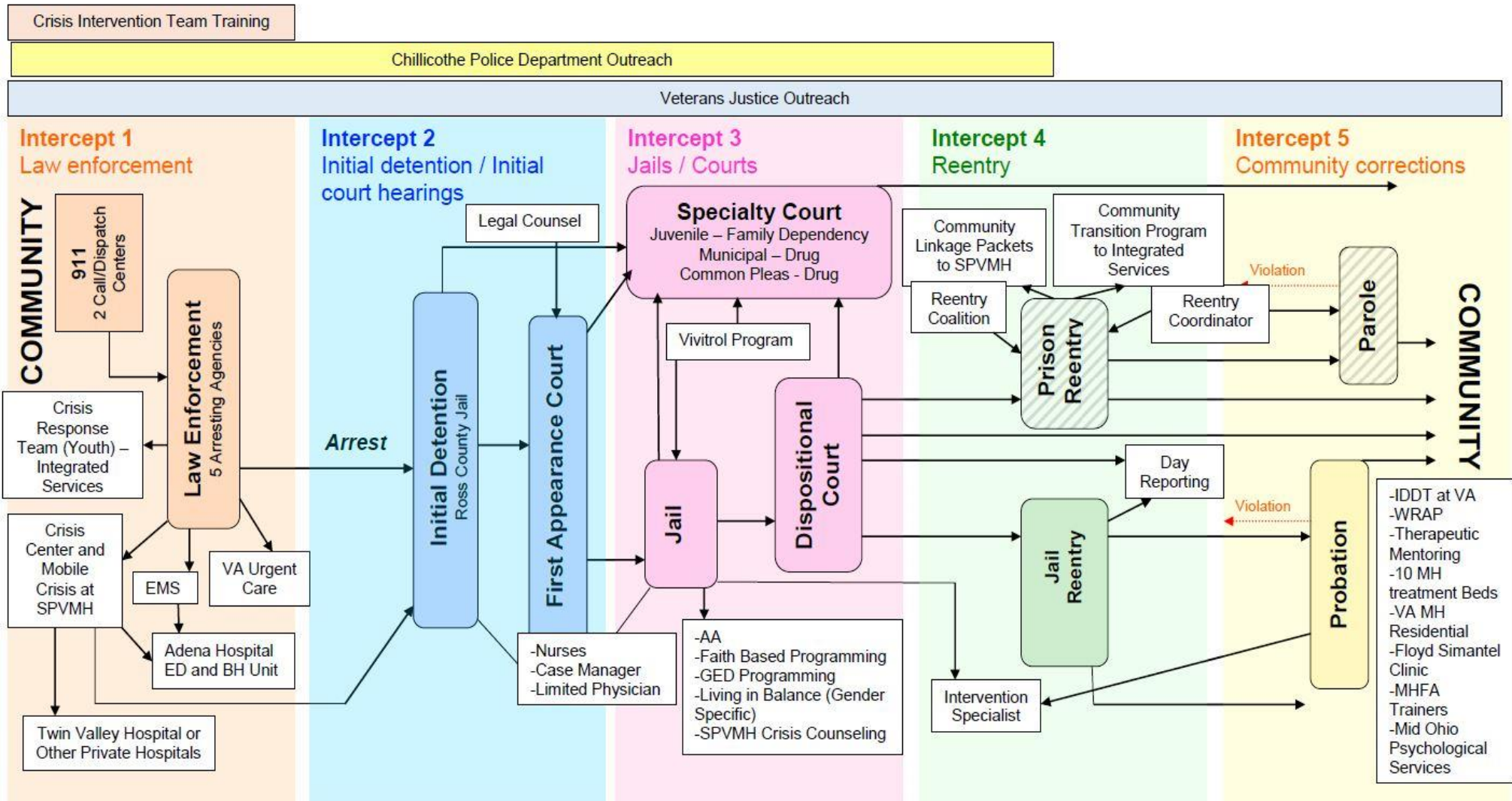
### **General Recommendations:**

- Engage criminal justice leadership, individuals with lived experience, and community/family members in the ongoing process of system improvement. Ensure that each work group has cross-system representation.
- 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 Ross 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

## Ross County, Ohio

# Sequential Intercepts for Change: Criminal Justice - Mental Health Partnerships – Ross County October 2018



## Ross 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.

This narrative reflects information gathered during the *Sequential Intercept Mapping* Exercise. It provides a description of local 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 Ross County Sequential Intercept Map. The cross-systems local 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 local task force may need to seek further information from participants to clarify the context or scope of the comments.

### Intercept I: Law Enforcement / Emergency Services

In Ross County, law enforcement is accomplished by the County Sheriff’s Office, Ohio State Highway Patrol, and local 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), transport to crisis services, referral to hospital emergency department, or a combination of these options.

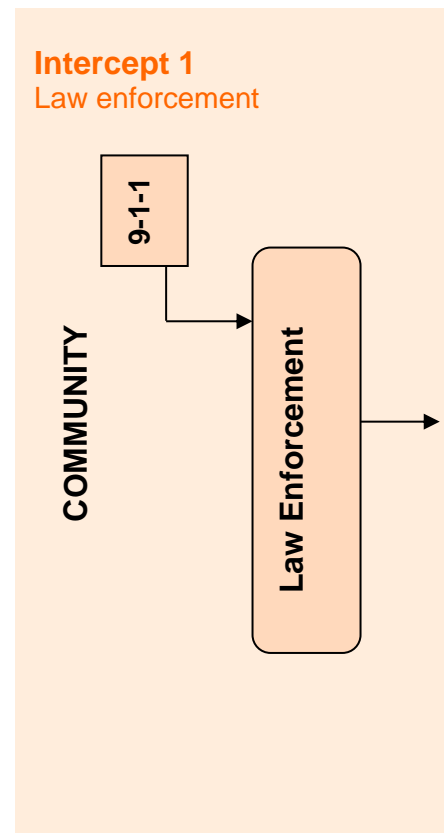
#### Dispatch / 9-1-1

- Ross County has two call and dispatch centers located in the same building: Chillicothe Police Department Joint Dispatch Center and Ross County Sheriff’s Office Communications Center.
- Ross County Sheriff’s Office Communications Center utilizes code 72 for mental health related calls. Otherwise, there is not formal data collection process, re: mental illness or Crisis Intervention Team (CIT) encounters.
- There is currently no formal training of dispatchers re: mental illness and/or the CIT model, although one dispatcher from Jackson Township Volunteer Fire Department and one dispatcher from the Ross County Sheriff’s Office Communications Center completed the full 40-hour CIT course.
  - A 4-hour training regarding de-escalation skills has been offered to dispatchers/call-takers.
- There is currently no protocol in place for callers to request a CIT officer or for the call centers to specifically dispatch CIT officers.

#### Law Enforcement and Crisis Intervention Team model

According to the Ohio Peace Officer Training Commission (OPOTC) County Agency Report issued January 2018, Ross County has three Law Enforcement Agencies: Adena Health System Police Department, Chillicothe Police Department and Ross County Sheriff’s Office, with an estimated 105 full-time officers. In addition, the Veterans Administration (VA) and Ohio State Highway Patrol have officers within the County.

- As of October 1, 2018, the Fayette, Highland, Pickaway, Pike and Ross Counties Crisis Intervention Team (CIT) training program has held ten courses, with annual CIT training averaging 24 participants across the five counties served by the ADAMH Board. Most 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 44





full-time officers have completed CIT training. Adena Health System Police Department has not participated in CIT training.

- Emergency Medical Services (EMS) and fire personnel are not incorporated in the 40-hour CIT training course.
- Law Enforcement can contact Integrated Services to request the youth crisis response team to respond to the scene.
- Law Enforcement can transport individuals to the Scioto Paint Valley Mental Health Center crisis center; however, more often now they call upon EMS, which transports individuals to Adena Health System Medical Center (hospital).
- The use of citations/summons in place of arrest is dependent on the offense. There is no formal agreement with the court, but officers exercise discretion.
- Typically, if an individual is intoxicated, officers will transport to Ross County Jail where they can provide an 8-hour intoxication hold.
- Chillicothe Police Department has an officer available during business hours who will do outreach to individuals and families if the person is not hospitalized, the situation is non-emergent, and the individual remains in the community. The officer will make referrals to services and agencies for individuals with mental health concerns and/or substance use disorders. The department is in the process of educating additional officers to be able to provide this function.
- In response to the opioid epidemic, the county developed a post overdose response team.
- There is currently no formal or widespread collection of CIT data.

### **Crisis Services**

- Scioto Paint Valley Mental Health Center operates a 24-hour walk-in/voluntary drop-off crisis center and mobile crisis team.
  - The crisis center consists of one staff person per shift and will complete an assessment for referral to Twin Valley Behavioral Healthcare. Law Enforcement may need to wait for a second staff person to arrive before leaving.
  - The mobile crisis unit will respond to Adena Health System Medical Center or the Ross County Jail for evaluation for Twin Valley Behavioral Healthcare.
- Integrated Services operates a 24-hour Crisis Response Team (CRT) for youth. The mobile crisis unit serves the county and will meet Law Enforcement on scene for juvenile disturbances or family disputes at any location.
- Mental Health First Aid training is offered to local crisis services and community residents.

### **Hospitals / Emergency Rooms / Inpatient Psychiatric Centers**

- The state hospital is Twin Valley Behavioral Healthcare in Columbus.
- The only hospital and Emergency Department in Ross County is Adena Health System Medical Center.
  - The hospital employs a social worker during business hours and on-call. Hospital staff will conduct a medical screen. After medical clearance, the hospital will contact the psychiatric unit for behavioral health screening for on-site inpatient psychiatric care or Scioto Paint Valley Mental Health Center for access to Twin Valley Behavioral Healthcare for acute care.
  - If under arrest or active warrant, Law Enforcement is required to stay until a disposition is determined.
- Local inpatient psychiatric care is provided by Adena Health System Medical Center with a 14-bed short-term stay psychiatric unit; average stay is four days. Individuals that are combative or under the influence of substances are ineligible.

### **Detoxification**

- Currently, there are no detoxification units in Ross County.

## Probate

- Assisted Outpatient Treatment (AOT) is not yet utilized; however, the goal is to pilot a program under Judge Benson with Scioto Paint Valley Mental Health Center providing a case manager. Treatment Advocacy Center is engaged to assist with program development. Parties will be visiting the Butler County AOT program to learn more.

## Veterans

- The Chillicothe VA Medical Center is in Chillicothe and operates from 7am-8pm. They do not accept emergency patients, but provide medical services, medication management, and case management. However, if an individual has been arrested, they are unable to serve them.

## Intercept I Gaps

- Chillicothe Police Department Joint Dispatch Center does not utilize mental health codes
- CIT program development
  - Dispatcher/call-takers are not receiving CIT training
  - EMS/Fire are not receiving CIT training and do not have the same protocols or philosophy regarding mental health response; need to develop stronger partnership
  - Adena Health System Police Department is not participating in CIT training
  - Lack of a formal mechanism for requesting CIT officers
  - Lack of CIT stat sheet and data collection
- Lack of a cross-agency or cross-system meeting to discuss individuals
- Lack of respite beds for youth in a mental health crisis
- Coordinating mental health care for court-ordered outpatient treatment clients
- Chillicothe VA Medical Center cannot serve individuals under arrest or with an active warrant, and VA physicians are reluctant to pink slip

## Intercept I Opportunities

- The 4-hour dispatcher/call-taker training could be enhanced to include information regarding mental illness
- Chillicothe Police Department will be training more individuals to provide outreach; other departments could be oriented to the same process
- Chillicothe Police Department and Ross County Sheriff's Office is in the process of transferring to a common electronic system; target November 2019
- Planning stages for a drop-in center with ancillary services
- Track mobile crisis data
- Assisted Outpatient Treatment (AOT) is in process
- Chillicothe VA Medical Center's urgent care operates 7a.m. – 8p.m. daily; after-hours can get direct admission from Adena Health System Medical Center
- Mental Health First Aid Trainers are available

## Recommendations:

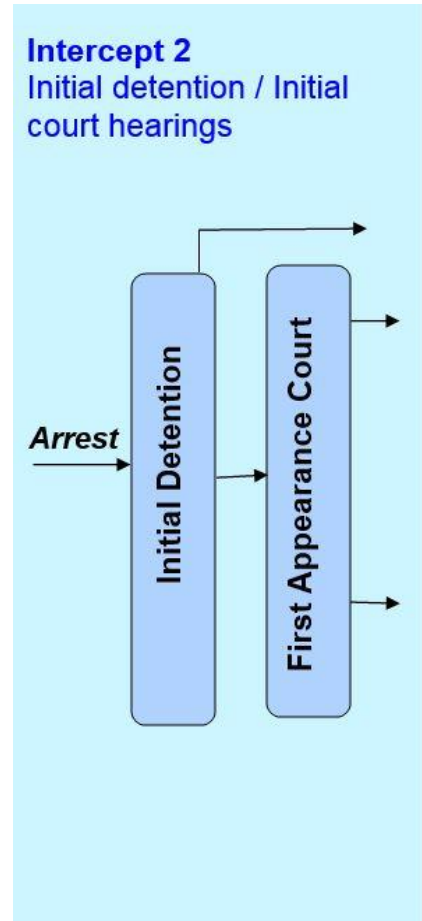
- Establish a county-wide plan for the dissemination of Mental Health First Aid Training, including non-CIT law enforcement officers
- Have the CIT Steering Committee devise a plan to address the CIT program development gaps, to include companion trainings for first responder partners, e.g., dispatch, EMS, fire and a consistent approach to data collection and information sharing

- Ensure that as Coordinated Specialty Care for First Episode Psychosis and Assisted Outpatient Treatment programming become more formalized and readily available, that law enforcement and other first responders are trained in eligibility criteria and referral procedures related to the programs

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

### Initial Detention

- Ross County Jail is the only full-service detention facility and has two general pods, one for Common Pleas Court inmates and one for Municipal Court inmates. The jail pre-screens all potential inmates before acceptance into the facility.
  - The arresting officer completes a commitment form, which includes information pertaining to offense, past/current medication and suicide.
- Upon acceptance, booking officers perform an intake screening, which includes questions pertaining to medical, mental health, risk level and substance use; then individuals are placed into a holding cell. Information pertaining to substance use is provided to the case manager; however, information pertaining to mental health is placed in the individual's file.
  - If determined that an individual requires mental health attention, referral to medical staff occurs.
  - Afterhours, Scioto Paint Valley Mental Health Center is on-call 24/7 for acute crisis.
- The jail employs the medical staff, which consists of nurses on site 8:00 AM – 8:00 PM seven days/week and on-call at other times, and one physician two hours a week. The jail employs a full-time case manager on site during business hours. There are no psychiatric services in the jail.
  - Those present at the workshop voiced that if psychiatric services were available within the jail then competency evaluations and referrals to Twin Valley Behavioral Healthcare would greatly decrease.
- Outside medications are permitted and verified. If an individual does not come in with medication, their prescriptions are verified. If individuals do not have an active prescription, the physician is not comfortable prescribing psychiatric medications and will only prescribe medications that are considered medically necessary.
  - Those present at the workshop stated that Ross County does take advantage of the funds available through the Ohio Department of Mental Health and Addiction Services to fund medication access in the jail.
- The jail disseminates the booking roster to Job and Family Services; however, other service providers do not receive this information.



### Arraignment

- Ross County has one Municipal Court located in Chillicothe. All felony and misdemeanor initial hearings, except felony direct indictments, take place in this court via video within 72 hours, barring a holiday or long weekend. Felony direct indictment initial hearings take place in the Ross County Common Pleas Court.
- Pretrial services are provided by one FTE officer at Common Pleas Probation and include bond investigation and basic bond supervision. There are no formal pretrial services at the Municipal level. Release decisions are made by traditional utilization of a bail schedule.
  - Medicaid status is asked and individuals that wish to apply are told to do so in the jail.
  - Theft Diversion Program lost its funding; individuals are now supervised by Common Pleas Pretrial Officer
- The Ross County Public Defender's Office represents both misdemeanor and felony cases and counsel is present at initial hearing. Typically, defense counsel will identify individuals with mental health concerns for evaluation.
- Individuals can be referred to specialty courts at initial hearing via individual request or attorney referral.

- Typically, no information is relayed to service providers from the courts or to the courts from the jail during the initial detention.

## Veterans

- There are no designated screening tools for Veterans or utilization of the Veterans Reentry Search Services (VRSS) at this phase of the system.

## Intercept II – Identified Gaps

- ▣ Lack of a validated screening tool at the jail
- ▣ Lack of psychiatric services within the jail
- ▣ Information sharing
  - Information is not relayed from the jail to the courts
  - Information is not relayed from the jail to probation
  - Mental health screening information is not provided to the jail case manager
  - Service providers are not notified of the booking roster
- ▣ Lack of formal pretrial services for Municipal Court
- ▣ Mental health assessments prior to disposition
- ▣ Medication policies and practices in the jail
  - Jail does not employ a prescriber for psychiatric medications
  - Lack of knowledge of jail formulary
  - Inconsistency on whether medications that were brought into the jail actually go to the individual
  - Inconsistent amount of medications when released
- ▣ Not utilizing Veterans Re-entry Search Services (VRSS) or a designated screening tool for Veterans

## Intercept II – Identified Opportunities

- ▣ Upload the jail booking roster and compare the roster to the Paint Valley Alcohol, Drug Addiction & Mental Health Board roster
- ▣ Service providers are able to check the jail roster
- ▣ The jail is completing renovations that will allow separate housing/classification for medical, mental health, etc.

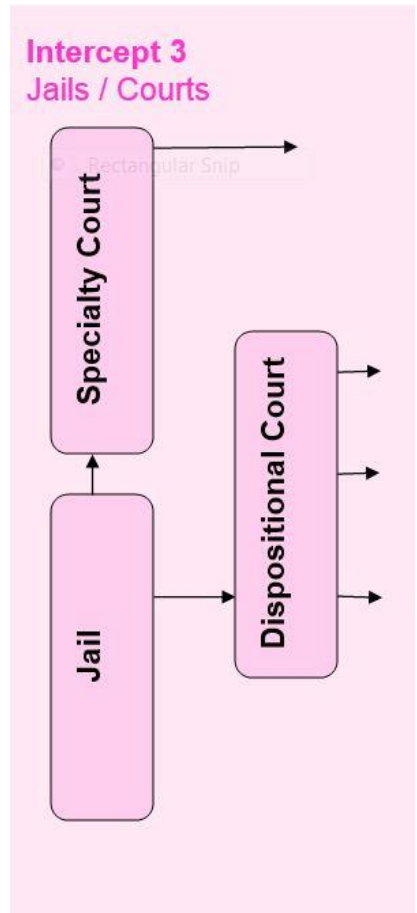
## Recommendations

- ▣ Jail administration should aggressively pursue psychiatric services for inmates to ensure continuity of care and enable prescription of psychiatric medications when warranted.
- ▣ Implement an evidence-based screening instrument for mental illness at booking at the jail. The Brief Jail Mental Health Screen could easily be inserted into the existing screening and replace similar untested questions.
- ▣ The jail and courts should be urged to define a process for information sharing, so that results of the initial screening, if available, are provided to the court to aid in decision-making in place of charge-based decision-making.
- ▣ Consider completing risk assessments, e.g., Ohio Risk Assessment System (ORAS), and using results of the risk assessments to inform bond release decision and pretrial decision-making in place of charge-based decision-making.

## Intercept III: Jails / Courts

### Jail

- The Ross County Jail's rated capacity is 125 with a median population of 180-190 and average population of 155. The current per diem is \$54/day and an estimated 45% are pretrial and 10% probation detainees.
- Ten Correction Officers have completed the full 40-hour CIT course.
- The jail utilizes Emergtech as the jail management system but does not currently capture data on individuals with mental illness; as a result, recidivism and length of stay information is not available for this target population. At the time of the workshop, it was estimated on average 85 individuals per day have a mental health concern.
- Individuals with serious mental illness can be separated from the general population but only when the individual's mental health has declined; there is not a dedicated housing unit specific to mental illness. The goal is to stabilize the individual and return them to general population. The jail is completing renovations that will allow separate housing/classification pods for medical, mental health, and more.
- The on-site case manager will visit individuals per request and provide trauma informed counseling/intervention.
- There is a mechanism in place to identify individuals who may benefit from medication assisted treatment, specifically Vivitrol. Those individuals must complete an assessment and those that are compliant with the program may receive a bond reduction and early release.
- For withdrawal management, Hopewell Health can prescribe comfort medications to inmates.
- Integrated Services and Ross County Recovery Council will provide services by request or to individuals on their caseload.
- The jail has the following additional services available to individuals: GED programming, AA, Bible Study, substance use education program with gender specific components (Living in Balance, Hazelton), and brief/crisis counseling upon request through SPV
- Currently, peer supporters are not available within the jail.



### Court

- Municipal Court evaluations are completed by private providers, often Dr. Jim Hagen.
- Intervention in Lieu of Conviction is available but primarily utilized for Felony 4 and 5 drug cases; seldom is it used for individuals with mental illness.
- Those present at the workshop stated that the Ross County Public Defender's Office has a capacity concern.
- The NAMI representative stated that NAMI has tried to attend court hearings and are often turned away by the public defenders.
- Typically, no information is relayed to the courts from the jail for competency evaluations.
- Prosecutors completed Trauma Informed Care training

### Specialty Courts

- According to the Supreme Court of Ohio Specialized Dockets Certification Status Sheet, as of August 17, 2018, Ross County has the following specialized dockets:

Judge Name	Jurisdiction	Docket Type	Status August 17, 2018
Judge Michael Ater	Common Pleas	Drug	Certified
Judge J. Jeffrey Benson	Juvenile	Family Dependency	Certified
Judge Toni L. Eddy	Municipal	Drug	Certified

- Typically, specialty court referral is completed by the public defender/defense counsel.
- The Juvenile Family Dependency Court is a post-adjudication program for neglect, dependency, abuse. The Juvenile Court Probation has a treatment team with specialized training.
- Municipal Drug Court has a caseload of 7-10.
- Common Pleas Drug Court will determine eligibility via the Ohio Risk Assessment System (ORAS) and will complete an assessment for mental health and substance use disorders. Individuals that have been diagnosed with bipolar disorder are eligible; however, individuals that have been diagnosed with schizophrenia are ineligible.

### **Intercept III – Identified Gaps**

- ▣ No formal data for the number of individuals with mental illness
- ▣ Lack of evidence based practice curriculums for individuals with serious mental illness within the jail
- ▣ Lack of treatment providers/liaisons for individuals with serious mental illness in the courts and lack of communication between the jail and courts regarding mental health needs
- ▣ Plans for sustainability of peer recovery specialist program after August 2019
- ▣ Lack of mental health services in the jail except brief crisis counseling as needed
- ▣ No psychiatry services, no formulary for psychiatric medications, and no prescriber for mental health medications in the jail; lack of knowledge about the jail formulary limitations among the community
- ▣ Lack of peer supporters in the jail
- ▣ Capacity concern for the Ross County Public Defender's Office
- ▣ Lack of specialized training for public defenders
- ▣ NAMI is discouraged to attend court hearings by public defenders
- ▣ Lack of utilization of Intervention in Lieu of Conviction
- ▣ Specialized docket for mental health

### **Intercept III – Identified Opportunities**

- ▣ Ross County Recovery Council will be training peer supporters; Grant through 8/2019 should enable peer supports to serve jail
- ▣ GPS monitoring can save costs (jail costs \$54/day vs. \$10/day for GPS monitoring)
- ▣ Tele-psychiatry in the jail
- ▣ An external agency could share a nurse practitioner with the jail
- ▣ Potential for diversion to Assisted Outpatient Treatment once program is running

### **Recommendations**

- To improve and verify estimates of the numbers of individuals with mental illness in the jail, stakeholders should agree on a working definition of the target population or adopt the state's Stepping Up definition and agree upon data points for measuring the target population.
- Increase access to services in the jail.

## **Intercept IV: Prisons / Reentry**

### **Prison**

- Community Linkage referrals from the Ohio Department of Mental Health and Addiction Services (OMHAS) regarding individuals returning from prison to the community are sent to Scioto Paint Valley Mental Health Center. From August 1, 2017 to August 31, 2018, OMHAS completed 23 referrals to Ross County.

- The Community Transition Program (CTP) of CareSource and the Ohio Department of Rehabilitation and Correction (ODRC) completes screening and assessment for substance use disorders and sends referral packets to Integrated Services. Integrated Services provides an in-reach assessment and numerous resources are available to participating individuals, e.g., housing, recovery placement, but clients need to know to ask for it. Referrals can come from the county jail as well.
- Parole officers make referrals to Friel and Associates and other providers, typically within ten days of release, and follow-up with providers routinely. Friel and Associates indicated they are working on expedited applications with CareSource via CTP.
- Inmates can request information and assistance through case workers for reentry services. The local Reentry Coordinator provides monthly in-reach via video conference to those individuals referred from the Ohio Department of Rehabilitation and Correction (DRC) case manager.
- Reentry Coalition provides a reentry fair twice per year.

## Jail

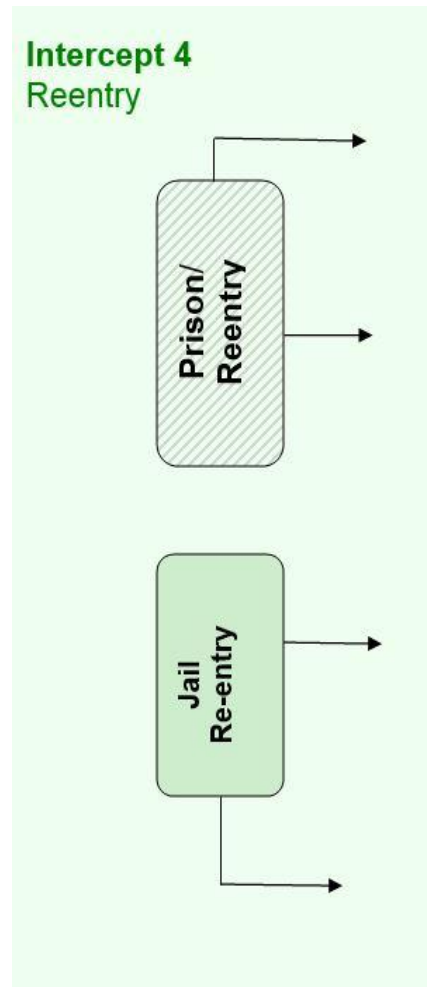
- On average, individuals are released within 24 hours.
- Jail staff is not consistently informed of release dates; therefore, there are challenges to discharge planning. If a release date is known or if an individual's sentence is modified and includes treatment, the jail case manager will make referrals to service providers. Otherwise, the jail does not provide a formal discharge process or reentry plan. If requested, the jail case manager provides aid in completing Medicaid applications.
- Scioto Paint Valley Mental Health Center will provide referrals if an individual receives crisis counseling within the jail.
- Individuals are released with a resource guide.
- Individuals that are participating in Drug Court or Pretrial Supervision receive a written release plan/letter stating where to go upon release.
- Individuals can be referred to the Terry Collins Reentry Center, which provides day reporting and *Thinking for a Change*.
- The Common Pleas Probation Department Intervention Specialist will provide in-reach by offering screening and referral to services.
- If individuals bring outside medication with them, they can be released with all that remains; however, individuals that begin medication while incarcerated are not released with a prescription or remaining medication unless medications are paid for. This was noted as a concern in that individuals may not have ample medication upon release to bridge the gap between release and community-based appointment.
- Ross County Recovery Council will be hiring peer supporters in the future and are interested in having peer supporters in the jail.

## Veterans

- The Veterans Justice Outreach (VJO) will provide in-reach and transport individuals from the county jail to treatment.

## Intercept IV – Identified Gaps

- ▣ Outcomes are not tracked for the Community Linkage Program
- ▣ Service providers do not provide in-reach into the jail
- ▣ No discharge planning or organized communication between service providers, probation and jail staff, unless designed through sentencing
- ▣ Medicaid suspension while in jail interrupts services
- ▣ Few providers doing open access appointments
- ▣ Probation does not interact with Adult Parole Authority regarding reentry



- Inconsistent medications when leaving jail
  - No new meds or prescriptions at release
  - If jail paid for medications, individual cannot take meds with them
  - Cannot count on medications being delivered to inmate by jail staff prior to release

### Intercept IV – Identified Opportunities

- Ross County Recovery Council will be training peer supporters
- Community Transition Program (CTP) funding when individuals are referred

### Recommendations:

- Review the jail's release policies pertaining to the provision of medications upon release. If needed, shore up practices to ensure that all individuals with significant health and mental health needs have ample medications to bridge the gap from release to provider appointments.
- Establish formal discharge planning protocols for individuals leaving the jail; this could include mirroring the linkage program from prison with a similar linkage program from the jail and should include improved information sharing across systems and ideally warm hand-offs.
- With so many inmates leaving the jail within 24 hours, mental health and jail staff should consider developing practices to call or write to discharged individuals within 24-72 hours, to check on their well-being and make referrals as warranted by screening results.
- Encourage in-reach by mental health service providers

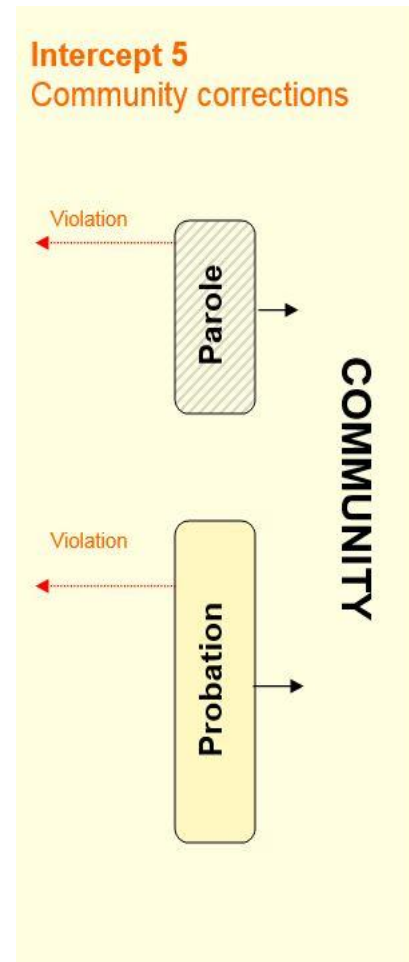
### Intercept V: Community Corrections / Community Support

#### Probation

- Municipal Court has two Probation Officers. One officer staffs the Drug Court. The caseload average is 1,300 per officer. The officers do not have specialized training related to mental illness or specialized caseloads for individuals with mental illness.
  - Municipal Court refers to Friel and Associates for screening and assessments. The agency utilizes the Texas Christian University Drug Screen 5 and provides substance use disorder services, although referrals are made to multiple providers. Reports are sent weekly to Probation Officers.
- Common Pleas has seven Probation Officers, including the Chief Probation Officer. Three have specialized caseloads – two for Intensive Supervised Probation (ISP) and one for Drug Court. The Drug Court officer received specialized training related to substance use disorders; however, officers do not have specialized training related to mental illness or specialized caseloads for individuals with mental illness. All probation officers make referrals to in-house service provider as needed. This Intervention Specialist provides referral to services and screening to determine level of care.

#### Parole

- Currently, four or five Parole Officers are assigned to Ross County. Two have specialized caseloads – one for sex offenders and one for the halfway houses. Four officers have completed the 40-hour CIT course.
- Supervision level is in part determined by using the Ohio Risk Assessment System (ORAS) and TCU-V.
- Friel and Associates utilizes the Texas Christian University Drug Screen 5 and provides substance use disorder services.





- Parole Officers utilize several service providers for referrals.

## 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 Ross County.

- Mid-Ohio Psychological Services offers services for sex offenders.
- NAMI is trying to establish a greater presence in the community. They offer family support programming; however, attendance is low.
- Scioto Paint Valley Mental Health Center operates the Floyd Simantel Clinic, which offers housing, medication, drop-in services, intensive case management, telepsychiatry, residential treatment, substance use disorder treatment, and counseling.
- Ross County Recovery Council offers Open Access for assessments on Tuesdays and will be hiring peer supporters in the future.
- Scioto Paint Valley Mental Health Center and Ross County Community Action both have Ohio Benefit Bank.
- Housing was identified as a gap for Ross County. These existing services were highlighted:
  - Ten mental health treatment beds for males and females
  - Adult care facilities

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 Ross County.

- The Ohio State University Early Psychosis Intervention Center (OSU EPICENTER) provides technical assistance for Coordinated Specialty Care for FIRST Episode Psychosis through Scioto Paint Valley Mental Health Center.
- Veterans Administration offers integrated dual disorder treatment (IDDT).
- Scioto Paint Valley Mental Health Center and Integrated Services both offer cognitive behavioral therapy (CBT).
- Wellness Recovery Action Plan (WRAP) services are available.
- Therapeutic mentoring (in-home service) for youth is available.
- Mental Health First Aid trainers are available for individuals throughout the county.
- Clozapine is available (currently approximately twenty clients on this protocol).

## Veterans

- Veterans Administration offers 21-day residential treatment with 28 beds for males and females with mental health concerns; average length of stay is 21-days.
- Probation Officers will refer individuals to the Veterans Administration for services.
- Veterans Administration offers self-report home tele-health that is monitored by a case worker.
- The VA also provides Integrated Dual Disorder Treatment

## Intercept V – Identified Gaps

- ▣ Lack of specialized training or specialized caseloads for Probation Officers related to mental illness
- ▣ Screening is completed by court staff not probation officers/capacity concern for Common Pleas probation
- ▣ Municipal probation referrals are limited due to caseload size
- ▣ Lack of meeting between the Adult Parole Authority and Probation Officers to discuss clients
- ▣ Public education of issues, best practices and available services associated with mental illness
  - Lack of interaction between service providers and NAMI or between probation and NAMI
- ▣ Lack of providers offering walk-in or open access hours

- Limited housing

### **Intercept V – Identified Opportunities**

- Ross County Recovery Council will be training peer supporters
- Court staff are able to provide in-house treatment
- Court staff make referrals to external services
- Tracking system available for program compliance
- Future family education in Common Pleas
- Treatment providers offer family support programming
- Goodwill may expand
- VA offers vocational rehabilitation and residential treatment
- Start Program
- Integrated Services offers rapid rehousing
- NAMI is a willing partner and opportunities exist to enhance partnerships and family support

### **Recommendations:**

- Probation officers providing supervision and services to individuals with mental illness should receive special training related to mental illness.
- To promote and establish stronger ties to family programs, NAMI and Scioto Paint Valley Mental Health Center should work together to promote the importance of families throughout the intercepts. The FIRST Episode Psychosis Program may be a good starting point.

# Priorities for Change

Ross County,  
Ohio

## Ross County Priorities

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

Listed below are the results of the voting and the priorities ranked in order of voting preference, along with issues or information associated with each priority as brainstormed by the large group which all agreed need to be considered by each sub-committee.

### Top Priorities for Change

1. Medication policies and practices in the county jail
2. Specialized docket for mental health
3. CIT program development
4. Discharge planning at the jail
5. Mental health assessments prior to disposition

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

- Public education of services available within the county (6 votes, Intercept 5)
  - Lack of interaction between service providers and NAMI
- Coordinating mental health care for court ordered outpatient treatment clients (3 votes, Intercept 1)
- No formal data for the number of individuals with mental illness (2 votes, Intercept 3)
- Lack of a cross-agency or cross-system meeting to discuss individuals (1 vote, Intercept 1)
- Lack of respite beds for youth in a mental health crisis (1 vote, Intercept 1)
- Lack of formal pretrial services for Municipal Court (1 vote, Intercept 2)
- Information sharing (1 vote, Intercept 2)
  - Information is not relayed from the jail to the courts
  - Information is not relayed from the courts to probation
  - Mental health screening information is not provided to the jail case manager
  - Service providers, local schools, etc. are not notified of the booking roster
- Lack of treatment providers/liaisons for individuals with serious mental illness in the courts (1 vote, Intercept 3)
- Lack of peer supporters in the jail (1 vote, Intercept 3)
- Service providers do not provide in-reach into the jail (1 vote, Intercept 4)
- Screening is completed by court staff not probation officers/capacity concern for Common Pleas probation (1 vote, Intercept 5)

### Parking Lot Issues

- Chillicothe VA Medical Center cannot serve individuals that are arrested or have an active warrant. VA doctors are reluctant to utilize a pink slip
- Medicaid suspension while incarcerated in the jail

## Additional Resources

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.csjusticecenter.org/mental-health">www.csjusticecenter.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>
Laura and John Arnold Foundation	<a href="http://www.arnoldfoundation.org">www.arnoldfoundation.org</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>
National Association of Pretrial Services Agencies	<a href="http://www.NAPSA.org">www.NAPSA.org</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 Center for Trauma Informed Care and Alternatives to Seclusion and Restraint	<a href="http://www.samhsa.gov/nctic">www.samhsa.gov/nctic</a>
National Clearinghouse for Alcohol and Drug Information	<a href="http://www.store.samhsa.gov/home">www.store.samhsa.gov/home</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
Partners for Recovery	<a href="http://www.samhsa.gov/partners-for-recovery">www.samhsa.gov/partners-for-recovery</a>
Partnership for Prescription Assistance	<a href="http://www.pparx.org">www.pparx.org</a>
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="http://www.prainc.com/soar">www.prainc.com/soar</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	<a href="http://www.uwsummit.org/programs/summit-county-reentry-network">www.uwsummit.org/programs/summit-county-reentry-network</a>
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**  
**Ross County, Ohio | October 15-16, 2018**

**Participant Roster**

<b>Name</b>	<b>Title</b>	<b>Organization</b>	<b>Email</b>
Mark Allen	Clinical Supervisor	The Recovery Council	<a href="mailto:m.allen@therecoverycouncil.org">m.allen@therecoverycouncil.org</a>
Ben Avery	Administrator	Ross County Health Department	<a href="mailto:bavery@rosscountyhealth.com">bavery@rosscountyhealth.com</a>
Dan Bielecki	Director of Clinical Services	BrightView	<a href="mailto:d.bielecki@brightviewhealth.com">d.bielecki@brightviewhealth.com</a>
Kathi Bircher	Director	Adena Counseling Center	<a href="mailto:kbircher@adena.org">kbircher@adena.org</a>
Becky Clever		Integrated Services Behavioral Healthcare	<a href="mailto:rebeccaclever@gmail.com">rebeccaclever@gmail.com</a>
Lance Cranmer	Director	NAMI Of Southern Ohio	<a href="mailto:lancecranmer@gmail.com">lancecranmer@gmail.com</a>
Kim Dement	Area Manager	Integrated Services for Behavioral Health	<a href="mailto:kdement@integratedservice.org">kdement@integratedservice.org</a>
Kelly Dennis		Ross County Health Department	<a href="mailto:kdennis@rosscountyhealth.com">kdennis@rosscountyhealth.com</a>
Glenn Detty	Captain	Ross County Sheriff's Office	<a href="mailto:g.detty@rosssheriff.com">g.detty@rosssheriff.com</a>
Jon Dick	Case Manager	Ross County Jail	<a href="mailto:j.dick@rosssheriff.com">j.dick@rosssheriff.com</a>
Pat Friel	Owner/Director of CARF	Friel and Associates	<a href="mailto:patfriel@frielandassociates.com">patfriel@frielandassociates.com</a>
Lisa Gordish	Forensic Coordinator	Ohio Department of Mental Health and Addiction Services	<a href="mailto:Lisa.gordish@mha.ohio.gov">Lisa.gordish@mha.ohio.gov</a>
Tonni Guagenti	Emergency Services Manager	Scioto Paint Valley Mental Health Center	<a href="mailto:tguagenti@spmhc.org">tguagenti@spmhc.org</a>
Jim Hagen	Clinical/Forensic Psychologist	Scioto Paint Valley Mental Health Center	<a href="mailto:Hagen.james@gmail.com">Hagen.james@gmail.com</a>
Tisha Hardin	Social Worker	Chillicothe VA Medical Center	<a href="mailto:Tisha.hardin@va.gov">Tisha.hardin@va.gov</a>
Kim Jones	GPC Director, Community Health Advancement	Adena Health System	<a href="mailto:sjones@adena.org">sjones@adena.org</a>
Nealy Kinnison	Emergency Department Manager	Adena Health System	<a href="mailto:nkinnison@adena.org">nkinnison@adena.org</a>
Kylie LeMaster	MAT Coordinator	Hopewell Health	<a href="mailto:Kylie.lemaster@hopewellhealth.org">Kylie.lemaster@hopewellhealth.org</a>
Bud Lytle	Detective	Chillicothe Police Department	<a href="mailto:Bud.lytle@chillicotheoh.gov">Bud.lytle@chillicotheoh.gov</a>
Brandy McCord	Probation Officer	Ross County Juvenile Court	<a href="mailto:bmccord@horizonview.net">bmccord@horizonview.net</a>
Ron Meyers	Captain	Chillicothe Police Department	<a href="mailto:Ron.meyers@chillicotheoh.gov">Ron.meyers@chillicotheoh.gov</a>
Tomiah Notestine	Intervention Specialist	Ross County Common Pleas Court	<a href="mailto:tomiahnotestine@rosscountyohio.gov">tomiahnotestine@rosscountyohio.gov</a>
Julie Oates	Executive Director	Child Protection Center	<a href="mailto:joates@adena.org">joates@adena.org</a>
Melonie Oiler	Registered Nurse	Ross County Health Department	<a href="mailto:moiler@rosscountyhealth.com">moiler@rosscountyhealth.com</a>
Charles Partridge	Social Science Researcher	Office of Criminal Justice Services	<a href="mailto:cpartridge@dps.ohio.gov">cpartridge@dps.ohio.gov</a>
Laura Perrott	Forensic Monitor/Jail Mental Health Specialist	Scioto Paint Valley Mental Health Center	<a href="mailto:lperrott@spmhc.org">lperrott@spmhc.org</a>
Mary Preston	Transitional Service Director	Scioto Paint Valley Mental Health Center	<a href="mailto:mpreston@spmhc.org">mpreston@spmhc.org</a>
Heather Remly	Community Liaison	The Counseling Source	<a href="mailto:hremley@thecounselingsource.com">hremley@thecounselingsource.com</a>
Sharon Rickey	Dietitian	Ross County Health Department	<a href="mailto:srickey@rosscountyhealth.com">srickey@rosscountyhealth.com</a>
Robin Rippeth	Site Supervisor	Mid Ohio Psychological Services	<a href="mailto:robinrippeth@mopsohio.com">robinrippeth@mopsohio.com</a>
Paul Schmidt	Relationship Specialist	The Counseling Source	<a href="mailto:pschmidt@thecounselingsource.com">pschmidt@thecounselingsource.com</a>
Sherry Shamblin	Chief Strategy Officer	Hopewell Health	<a href="mailto:Sherry.shamblin@hopewellhealth.org">Sherry.shamblin@hopewellhealth.org</a>
Cheri Smitley	Director	Ross County Juvenile Court	<a href="mailto:cherismitley@rosscountyohio.gov">cherismitley@rosscountyohio.gov</a>
Melanie Swisher	Associate Director	Paint Valley Alcohol, Drug Addiction & Mental Health Board	<a href="mailto:mswisher@pvadamh.org">mswisher@pvadamh.org</a>
Mary VanHooser	Social Worker	VA Medical Center	<a href="mailto:Mary.vanhooser@va.gov">Mary.vanhooser@va.gov</a>

**Observer Roster**

<b>Name</b>	<b>Title</b>	<b>Organization</b>	<b>Email</b>
Courtney Blue	Graduate Assistant	Department of Psychiatry, NEOMED	<a href="mailto:cblue@neomed.edu">cblue@neomed.edu</a>
Rebecca Miller	Intern	Criminal Justice Coordinating Center of Excellence	<a href="mailto:rlm165@zips.uakron.edu">rlm165@zips.uakron.edu</a>



Action Planning Matrix for Ross County, Ohio

Priority Area 1: Medication Policies and Practices in the County Jail				
Objective		Action Step	Who	When
1.	Determine volume/demand	<ul style="list-style-type: none"> <li>A. Determine number of individuals identified with serious and persistent mental illness (SPMI) in jail</li> <li>B. Define population – focus on target population                             <ul style="list-style-type: none"> <li>a. Assessment by mental health professional</li> </ul> </li> </ul>	<p>Captain Glenn Detty</p> <p>Mary Vanhooser</p>	<p>11/16/18</p> <p>11/16/18</p>
2.	Identify additional key stakeholders	<ul style="list-style-type: none"> <li>A. Establish stakeholder meeting to identify policies, barriers and contractual obligations</li> <li>B. Determine any additional stakeholders needed</li> </ul>	Kathi Bircher	11/16/18
3.	Research best practices	<ul style="list-style-type: none"> <li>A. Review key models in comparable areas</li> <li>B. Explore resources available</li> </ul>	<p>Mary Vanhooser</p> <p>Kathi Bircher</p>	<p>11/16/18</p> <p>11/16/18</p>

Action Planning Matrix for Ross County, Ohio

Priority Area 2: Specialized Docket for Mental Health			
Objective	Action Step	Who	When
1.	Determine best practices	A. Meet with administrative staff at Sheriff's Department	Bud Lytle/Cheri Smitley 10/31/18
		B. Modify electronic screening tool completed at booking to be determined by information technology (IT) availability	Bud Lytle/Mike Preston 12/31/18
		C. Screening to be done at booking	Booking Officer Committee To begin 1/1/19
		D. Coordinate with Workgroup #5 regarding further assessments	Bud Lytle 12/31/18
2.	Collection of data	A. Meet with Municipal Court Judges regarding assessment at intake	Brenda to Tomiah 11/30/18
		B. Collection of data from Municipal Court	Notestine To begin 1/1/19
		C. Collection of data from jail	Jon Dick to Tomiah Notestine To begin 1/1/19
		D. Collection of data from Adena/Health Department – Community Health Assessment	Kim Jones to Tomiah Notestine To begin 1/1/19
		E. Collection of data from Juvenile Detention Center (youth)	Juvenile Detention Center to Tomiah Notestine To begin 1/1/19
		F. Collection of data from Law Enforcement	Bud Lytle to Tomiah Notestine To begin 1/1/19
		G. Collection of data from mental health providers	Various to Tomiah Notestine To begin 1/1/19
		H. Recruit Human Services Technology (OUC) intern(s) to do data entry	Tomiah Notestine 12/31/18

Action Planning Matrix for Ross County, Ohio

Priority Area 3: CIT Program Development				
Objective	Action Step	Who	When	
1.	Develop CIT data sheet	A. Distribute to Law Enforcement	Melanie Swisher	11/1/18
		B. Begin pilot program for data sheet	Melanie Swisher	11/1/18
2.	Develop CIT training for dispatchers	A. Collect curriculums from Criminal Justice Coordinating Center of Excellence	Ron Meyers, Jim Hagen and Melanie Swisher	12/1/18
3.	Develop CIT training for EMS services	A. Collect curriculums from Criminal Justice Coordinating Center of Excellence	Ron Meyers, Jim Hagen and Melanie Swisher	12/1/18
4.	Involve Adena Police Department in CIT training	A. Discuss benefits to Adena Police Department	Kim Jones and Nealy Kinnison	12/1/18
5.	Pursue peer review	A. Coordinate with Criminal Justice Coordinating Center of Excellence	Melanie Swisher and Jim Hagen	1/1/19

## Action Planning Matrix for Ross County, Ohio

Priority Area 4: Discharge Planning at the Jail					
Objective		Action Step	Who	When	
1.	Data collection	A. Obtain data from the mental health docket committee	Jon Dick	1/15/19 (or when available)	
		B. Best practices - analyze practices within similar geographical and demographic areas (spectrum of care)	Sherry Shamblin	1/15/19	
		C. Identify gaps and possible barriers from collection of successful models, successes and failures	Committee	3/15/19	
2.	Program development	A. List of current community linkages	Julie Oates	1/15/19	
		B. Identify needed partnerships	Committee	3/15/19	
		C. Develop linkage agreements and memorandum of understandings	Laura Perrott and Julie Oates	6/15/19	
		D. Develop education plan for stakeholders (i.e. mental health first aid)	Committee	6/15/19	
3.	Discharge services	A. Define and develop values, and procedures and protocols (short term minimum 4 days/long term all cases)	Committee	1/1/19	
		a. Documentations across systems			
		b. Database tracking procedures across multiple systems			
		c. Succession planning			
		B. Program implementation	Committee		One year after implementation  Quarterly after implementation
		a. Educate across systems			
C. Evaluation					
a. Committee meetings					
b. System meetings					

Action Planning Matrix for Ross County, Ohio

Priority Area 5: Mental Health Assessments Prior to Disposition				
Objective		Action Step	Who	When
1.	Identify clients of local providers when they are booked into the jail for the purpose of care coordination	A. Contact Paint Valley Alcohol, Drug Addiction & Mental Health Board to begin steps to access Emergtech	Tonnie Guagenti	10/30/18
		B. Meeting with Sheriff Lavender on Veterans Reentry Search Service (VRSS)	Tisha Hardin	10/30/18
		C. Memorandum of understanding for non-contracted agencies to release names	Kim Dement and Robin Rippeth	11/2/18
2.	Establish a screening to identify the seriously mentally ill (SMI) population in the local jail for the purpose of identifying a need for further assessment	A. Identify current assessment tool	Robin Rippeth	11/2/18
		B. Propose the Brief Jail Mental Health Screen at time of booking	Tonnie Guagenti	1/30/18
		C. Research other jails using screening tools for seriously mentally ill (SMI) including Buckeye State Sheriff's Association	Dan Bieleck: Ruth Simera. Lisa Gordish will email Buckeye State Sheriff's Association	12/30/18; 10/30/18; 1/30/18
3.	Create a roadmap of who assesses those identified as seriously mentally ill (SMI) and where those assessments go in the system for the purpose of identifying treatment as a method of diversion from incarceration	A. Who will assess B. Assessment tool C. Funding D. Talk to court system about information being passed appropriately	Entire group will come back together. Location/time to be coordinated by Kim Dement	February 2019 (after objectives 1 and 2)