

# Stark County, Ohio

## *Sequential Intercept Mapping* FINAL Report

October 4 - 5, 2016

### Stark County Core Planning Team

NAME AND TITLE	TITLE/POSITION	AGENCY/ORGANIZATION
John Aller	Executive Director	StarkMHAR
Taryn Heath	Judge	Stark County Court of Common Pleas
George Maier	Sheriff	Stark County Sheriff's Office
Bobby Hamlet	Peer and LEAD Coordinator	Stark County TASC
Ivan Rosa		CommQuest
Bruce Lawver	Chief of Police	City of Canton Police Department
Jennifer Boswell	Reentry Coordinator	Adult Parole Authority, ODRC
Michael Kochera	Court Administrator	Canton Municipal Court
Michele Boone	Manager of Programs and Evaluations	StarkMHAR
Jeannie Cool	Forensic Coordinator	StarkMHAR

### Workshop Facilitators and Consultants

Haley Durig	Dissemination Coordinator	Criminal Justice Coordinating Center of Excellence
Daniel Peterca	Retired Pretrial Services and Special Projects Manager	Cuyahoga County Court of Common Pleas Probation Department
Douglas Powley	Retired, Chief Prosecutor	City of Akron
Ruth H. Simera	Program Administrator	Criminal Justice Coordinating Center of Excellence



OHIO CRIMINAL JUSTICE  
COORDINATING CENTER  
OF EXCELLENCE

# *Sequential Intercept Mapping*

## Table of Contents

<b><i>Sequential Intercept Mapping</i></b> .....	- 2 -
<b>Introduction</b> .....	- 2 -
<b>Background</b> .....	- 2 -
<b>Values</b> .....	- 2 -
<b>Objectives of the Sequential Intercept Mapping Exercise</b> .....	- 3 -
<b>Keys to Success</b> .....	- 3 -
<b>Existing Cross-Systems Partnerships</b> .....	- 3 -
<b>Representation from Key Decision Makers</b> .....	- 3 -
<b>Stark County Sequential Intercept Map</b> .....	- 6 -
<b>Stark County Sequential Intercept Map Narrative</b> .....	- 7 -
<b>Intercept I: Law Enforcement / Emergency Services</b> .....	- 7 -
<b>Intercept II: (<i>Following Arrest</i>) Initial Detention / Initial Court Hearing</b> .....	- 10 -
<b>Intercept III: Jails / Courts</b> .....	- 12 -
<b>Intercept IV: Prisons / Reentry</b> .....	- 14 -
<b>Intercept V: Community Corrections / Community Support</b> .....	- 16 -
<b>Stark County Priorities</b> .....	- 19 -
<b>Top Priorities</b> .....	- 19 -
<b>Other Priorities</b> .....	- 19 -
<b>Additional Recommendations</b> .....	- 20 -
<b>Additional Resources</b> .....	- 21 -
<b>Participant List</b> .....	- 22 -
<b>Action Planning Matrix</b> .....	- 24 -

# Stark 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 Stark County, Ohio on October 4 & 5, 2016. The workshops were sponsored by StarkMHAR and the Stark County Court of Common Pleas, who provided staff to coordinate the effort 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 Stark 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

Member agencies and representatives of the local Stark County SIM Planning Team requested the *Sequential Intercept Mapping* and *Taking Action for Change* workshops, following a period of open invitation to selected Ohio counties. Specifically, the request was made by StarkMHAR, Stark County Court of Common Pleas, Quest Recovery Services, Ohio Department of Rehabilitation and Correction (Reentry), Stark County Sheriff's Office, Stark County TASC, Canton Police Department, and Canton Municipal Court for assistance to Stark 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 31 individuals representing multiple stakeholder systems including mental health, substance use treatment, criminal justice and corrections, consumers and consumer support/advocacy, law enforcement, courts, housing, county jail, and community healthcare. A complete list of participants is available in the resources section of this document. Daniel Peterca, Douglas Powley, 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 Stark 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 Stark County Sequential Intercept Map created during the workshop can be found in this report on page 6.

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

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

Stark County stakeholders and service providers have been involved in a variety of collaborative relationships and initiatives over the years. There are currently two primary cross-system collaborative teams: CIT Steering Committee and the Corrections Planning Board. Other examples include specialized docket teams a pre-arrest diversion program through Canton Police Department. Stark County Board of Commissioners also recently 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. The county is in the process of establishing a Stepping Up Committee, for which the Corrections Planning Board will have general oversight.

### **Consumer Involvement**

The local planning team included two peer support individuals, with additional representation during the workshop consisting of a consumer/peer support individual and NAMI Executive Director.

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

- 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: Dispatch services and Veterans services.

### **Data Collection**

- The Stark County Planning Team compiled the following items to be reviewed by facilitators in preparation for the workshops and in some cases to be included in the workshop manual:
  - Completed Community Collaboration Questionnaire
  - Stark County Jail Data for January 2015 to June 2016
  - Jail and Heartland Behavioral Healthcare Pilot Project Overview, November 30, 2015
  - Polaris Project MOU, July 14, 2016
  - Law Enforcement Assisted Diversion (LEAD) MOU draft
  - LEAD Tracking Form
  - The Resolution endorsing the Stepping Up Program, May 18, 2016
  - Stark County CIT Steering Committee Contact List
  - Canton Police CIT Tracking Form
  - Stark County CCPB Roster, August 2, 2016
  - Jail Liaison Tracking Form
  
- Additional data provided by the Criminal Justice Coordinating Center of Excellence included:
  - Stark County Crisis Intervention Team Cumulative Training Report, with Ohio CIT Map – status of Crisis Intervention Team Development in Ohio, July 1, 2016
  - Stark County CIT Officers Roster Project Summary Report, September 2015
  - Stark County CIT Peer Review, June 2014

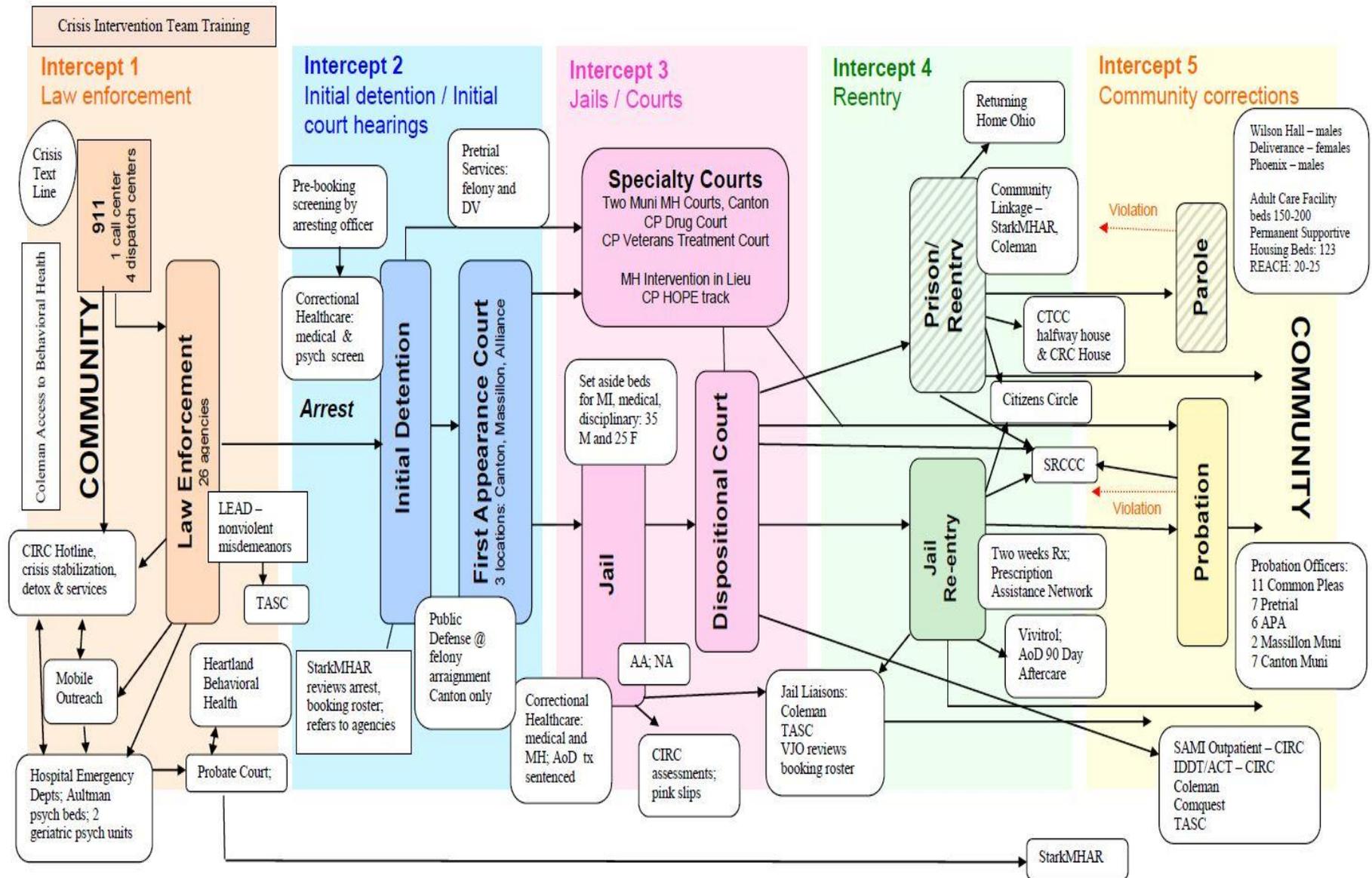
**General Recommendations:**

- 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 Stark 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

## Stark County, Ohio

# Sequential Intercepts for Change: Criminal Justice - Mental Health Partnerships: Stark County, Ohio, October 2016



# Stark 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 Stark 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

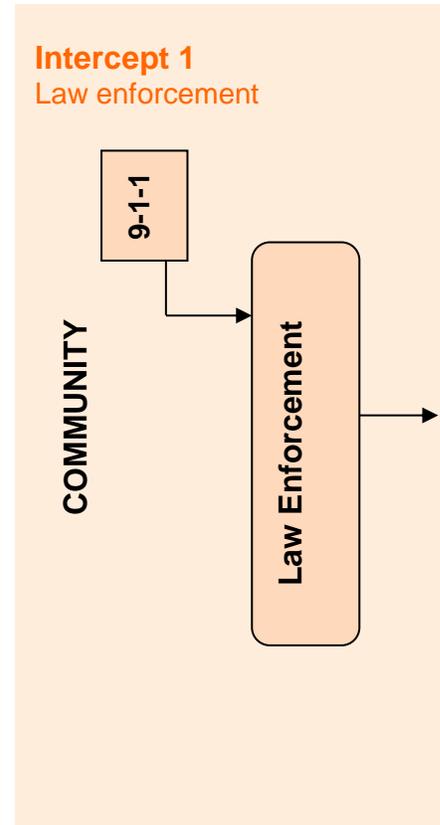
In Stark County, law enforcement is accomplished by the County Sheriff’s Office, Ohio State Highway Patrol, and local law enforcement agencies in various towns or cities. Law enforcement options for responding to people with mental illness include advise, summons, arrest, transport to county jail, transport to crisis services, access to mental health mobile crisis team or Law Enforcement Assisted Diversion Program, referral to provider agencies, involuntary civil commitment (pink slip), referral to hospital emergency departments, or a combination of these options.

### Dispatch / 9-1-1

- Stark County has one central call center operated by the Stark County Sheriff’s Office and several dispatch centers. The Regional Emergency Dispatch Center (RED Center) dispatches police, fire and EMS for 21 agencies in the county. Canton City 911 Communication Center dispatches police, Fire and EMS for Canton proper, Louisville and East Canton. Alliance also has its own dispatch center.
- Seven dispatchers from Perry Township P.D. and one from North Canton P.D. have completed the full 40-hour CIT course.
- A 4-hour CIT Companion course for dispatchers has been offered four times in Stark county. 22 dispatchers have completed the companion training, with plans to offer the training again in 2017.
- 911 Call-takers have the option of transferring individuals to CIRC.
- Occasionally there is a code/signal for mental illness but this code/signal varies from district to district.
- There is currently no formal data collection process re: mental illness and/or CIT.

### Law Enforcement and Crisis Intervention Team model

According to the Ohio Peace Officer Training Commission (OPOTC) County Agency Report issued January 21, 2016, Stark County has 26 Law Enforcement Agencies: Alliance, Beach City, Brewster, Canal Fulton, East Canton, Hartville, Heartland Behavioral Health Care, Hills and Dales, Jackson Township, Lawrence Township, Louisville, Magnolia, Malone University, Marlboro, Massillon, Minerva, Navarre, North Canton, Perry



Township, Republic N&T Railway (Republic Steel), Stark County Park District Enforcement Division, Stark County Sheriff's Office, Uniontown, Walsh University, Waynesburg, and Wilmot Police Departments.

- Stark County Crisis Intervention Team (CIT) training program has held twenty-seven courses since inception. 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. Five law enforcement agencies have not participated in CIT training: Brewster, East Canton, Hills and Dales, Navarre, and Republic N&T Railroad.
- According to the January 2016 OPOTC report, Stark County has an estimated 563 full-time officers. Since inception of CIT, 412 officers and five state troopers have completed CIT training.
  - EMS and fire personnel are not incorporated in the 40-hour CIT training course.
  - The current 40-hour CIT training does not include information about FIRST (First Episode Program).
- Local Hospital Emergency Departments serve as the typical after-hours access to mental health care. Police do not typically transport individuals; EMS transports on the officers' pink slips.
  - The Eastern part of the county does not utilize pink slips at the scene; however, they utilize the pink slip at the hospital.
- The Law Enforcement Assisted Diversion (LEAD) program was implemented to serve the Canton Municipal Court service area. Canton and Louisville Police Departments utilize the program for non-violent crimes by contacting the TASC CARE Coordinator for assessment and linkage to services in lieu of arresting/charging an individual. Referrals can be made 24/7; however, the care coordinator is not available 24/7 and will respond during designated work hours. The program is designed for both mental illness and substance use response, however is primarily used for substance use, often heroin addiction and occasionally co-occurring disorders, but seldom for mental illness. The challenge is that the substance use referrals are overwhelming the potential mental health referrals, and the local culture has become to view LEAD as substance use response and mobile outreach as mental health response. Those present at the workshop indicated that law enforcement buy-in for LEAD has not been strong.
- Law enforcement can drop off individuals at CIRC for substance use and mental health crises, or may be directed to transport to the hospital ER for medical clearance where CIRC staff will meet the individual. Officers do not always have to wait at the ER if hospital security is alerted and able to resume responsibility; however, at time officers are required to remain on site.
- Options to aid diversion, such as CIRC and mobile outreach, are not consistent throughout Stark County and are primarily available through the Sheriff's Office, Canton and Canal Fulton. In the eastern part of the county, options are typically limited to de-escalation on scene, arrest, or transport to Alliance Community Hospital Emergency Department. If an individual is arrested and transported to the hospital, the officer must wait for release. If not arrested and a pink slip is issued, then drop off can occur. Officers in this area of the county do not pink slip on scene. Instead, they issue a misdemeanor charge to enable custody. Those present at the workshop indicated they do not utilize CIRC because of the geographic distance. Also, Alliance has 3-4 counties that overlap in their law enforcement jurisdiction, making referral decisions more complicated. Mobile crisis is also not readily available to this geographic area.
- A Sheriff's Deputy works on site at the Board of Developmental Disabilities and assists with diversion options.
- Participants noted that Walmart hires its own law enforcement officers and does not follow the same protocols, nor use the same diversion options as community law enforcement agencies.
- There is currently no formal or widespread collection of CIT data. A limited number of police departments began piloting CIT Data Sheets in January 2016. The CIT Steering Committee has expanded in membership and scope and now includes a data sub-committee.

## **Crisis Services**

- CIRC operates a 24-hour crisis hotline, 24-hour 14-bed male/female drop-off Crisis Stabilization Unit, 11-bed detox unit, a co-response mobile crisis service, access to health officers for emergency evaluation and commitment, a crisis text line for ages 13-20, and crisis recovery center. Mobile crisis services, available during first and second shifts as a co-response model with the Sheriff's Office and Canton Police, provides consultation, co-response with law enforcement, or deferred response. Average response time is 15-20

minutes. The agency will add six 23-hour observation beds in an unlocked unit in December 2016 for voluntary clients.

- Coleman Professional Services operates a 24-hour phone triage line. Counseling, case management, and housing services are available Monday-Friday 8:30 AM – 5:00 PM.
- Foundations operates the Warm Line.

## Hospitals / Emergency Rooms / Inpatient Psychiatric Centers

- Local hospitals include Aultman, Mercy Medical Center, Affinity Medical Center and Alliance Community Hospital; all have Emergency Departments.
- CIRC responds to all four area hospitals as needed for pre-screening to the state hospital. There was a behavioral health navigator at Aultman Hospital employed by CIRC; however, those in attendance reported that position no longer exists. Aultman has in-house social workers to identify and link to services.
- Local inpatient psychiatric care includes 10-bed geriatric psychiatric unit at Alliance Community Hospital, one geriatric psychiatric unit at Affinity Medical Center, and one 14-bed psychiatric unit at Aultman.
- Mercy Medical Center does not have a psychiatric unit and reported a significant flow of psychiatric patients through the emergency department. Nurses conduct psychiatric evaluations and if the individual is medically cleared they will try to find an inpatient facility. If no beds are available, they will contact CIRC and house the individual in the hospital until a bed can be found. Because there is no locked unit at the hospital, someone is assigned to sit with patients while waiting for an open bed or for Crisis to respond. Mercy staff reported that it might take several hours for Crisis to respond. The hospital tracks the number of hours spent sitting in wait with patients. The emergency department wait time is of great concern. Average time in the E.R. is 6-8 hours.
- The state hospital is Heartland.

## Detoxification

- Currently, there are no drop-off detoxification units.
- CIRC provides sub-acute detox, prioritizing opiates, benzodiazepines and alcohol. They will provide “break the cycle” care for other substances, where individuals do not require medical detox; however, there is a waiting list for this service.
- Commquest provides RECOR, ambulatory detox services for opiates, located in Massillon and is in the process of opening a detox unit in Alliance.

## Probate

- The court reported that most referrals come from the local hospitals and that they sparingly use court ordered outpatient commitment because in the past it has not been as effective as inpatient commitment. Probate orders go almost exclusively to Heartland, although there is some concern by the mental health system that some individuals are in the state hospital who do not need to be.

## Veterans

- Stark County Vet Center and the Canton Outpatient Clinic are both located in Canton and operate during business hours, but neither accept emergent patients.

## Intercept I Gaps

- ▣ CIT Training for Dispatcher, Fire and EMS
- ▣ Mental Illness coding and collection of data/outcomes at dispatch
- ▣ Crisis outreach service capacity, especially for Alliance Community Hospital
- ▣ LEAD – communication, utilization, expansion and coverage
- ▣ Detox and Crisis Stabilization bed capacity
- ▣ Data collection issues on activities, including FIRST episode, Jail and CIT

- FIRST program information not currently included in CIT training information

## Intercept I Opportunities

- One 911 Call Center and 4-5 dispatcher centers
- Community awareness of 211, Hotline and Text Line
- Increase utilization of LEAD Program, especially for mental health
- 6-bed assessment program in December 2016
- Mobile Crisis expansion plans
- Analyze CIT pilot data collected in the last year and determine how to proceed/next steps

### Recommendations:

- Implement call-taker and dispatcher mental illness/CIT data collection protocol, which may include a common code for first responders
- Add companion courses to the routine CIT training offerings. These courses, often for dispatchers, EMS, and fire, range in length but are typically shorter than the 40-hour course. The average length of dispatcher CIT companion training in other Ohio communities is 8-16 hours.
- Provide routine offerings of refresher and advanced training for existing CIT officers. It can be helpful to ask CIT officers to provide input on these topics.
- Include information on the FIRST program in the CIT training curricula.
- Increase the geographic service area for the co-response mobile crisis service.
- Work toward a consistent procedure across all law enforcement agencies for collecting and analyzing law enforcement data on mental health calls and dispositions and sharing encounter information with the mental health system. This will enable earlier mental health response for clients with repeat contacts and potentially clients experiencing early episodes of psychosis or other mental illness crisis, as well as a means for evaluating law enforcement strategies and outcomes when interacting with persons in crisis who have a mental illness.
- Probate Court and Mental Health System leadership should collaborate to identify alternatives to the state hospital for court ordered commitments.

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

### Initial Detention

- Stark County Jail is the only full service detention facility. All arrests are transported to the county jail.
- The jail pre-screens all potential inmates before acceptance into the facility.
  - The 20-question pre-booking screening is completed by the arresting officer in a designated pre-booking area and presented to the receiving officer.
  - The receiving officer pre-screens the potential inmate with 6 additional questions related to suicide and weapons.
  - Screening information is provided to the nurse/medical provider for review and determination of acceptance or denial for housing. The arresting agency must wait until acceptance occurs before leaving.
- LEADS and/or BCI information is not available or used by the jail in its screening.
- Once an inmate is accepted, they are booked and meet with a nurse within 24 hours. The nurse completes a mental health screen and all booking information is entered into CJIS. If a mental illness is perceived, then the inmate is seen typically within 48-hours by the psychologist.
  - The jail does not have screening for individuals with developmental disabilities.
- The StarkMHAR Forensic Coordinator/Monitor accesses CJIS for the booking roster and some arrests and identifies individuals that have received services in the past year based on billing data. StarkMHAR then provides this information to the jail liaisons at TASC (18-25 years old) and Coleman (26 years and older). There are gaps in this data because it is based only on new complaints.

## Arraignment

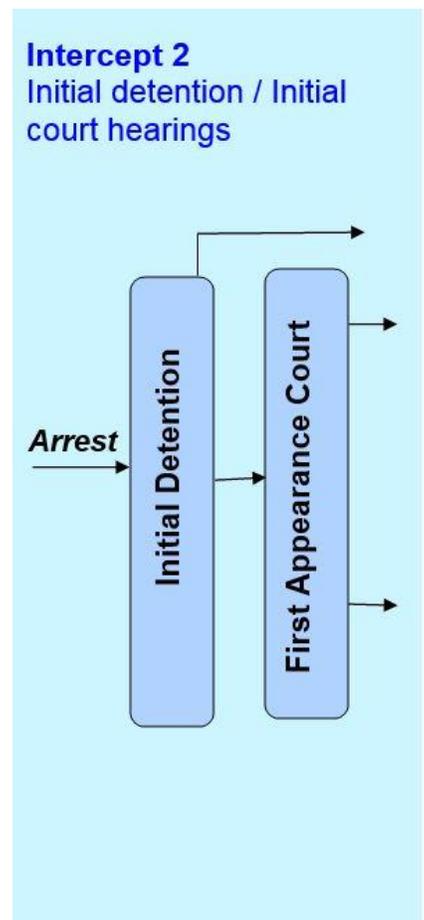
- Municipal Courts are located in Canton, Massillon, and Alliance. All felony and misdemeanor initial hearings take place in these courts.
- Probable Cause hearings are held at the jail by magistrates, with initial hearings held on the next business day, or within 48 hours. No weekend hearings are available.
  - Canton and Alliance provide video arraignments.
  - Massillon provides in-person arraignments.
- Typically, clients do not have legal representation at the initial hearing, unless it is a felony case in Canton. Anyone in custody after the initial hearing will get Public Defender representation if no conflicts exist. Staff capacity is a concern for the Public Defender's Office.
- Pretrial services are available for felony cases and misdemeanor domestic violence cases only. Common Pleas Pretrial Services has seven Probation Officers. The vast majority are assigned to specialized court dockets, and most of these officers have the required ORC training and some additional training; however, there is not a set standard for specialized trainings.
- Direct indictments are used roughly 50% of the time in the Municipal courts.
  - Secret indictments are used in the Common Pleas.
- Felony Drug Court completes their screening at the initial hearing. No other specialty courts complete their screening at this time.
- Alliance will order mental health evaluations; however, they will only be ordered for individuals who are not in jail and the evaluation will be a condition to their bond.
- Intervention in Lieu is available at this stage, but typically occurs later in the process.

## Veterans

- During the screening process, the jail nurse inquires about veteran status; however, it was not clear whether this information is passed onto the courts.
- The Common Pleas Court utilizes the Veterans Re-Entry Search Services (VRSS) to identify veterans in the jail. The Program Director of Honor Court and the Veterans Justice Outreach Specialist receive the information and a jail liaison is assigned to meet the individuals at the jail.

## Intercept II – Identified Gaps

- Information sharing, e.g., mental health commitment information to law enforcement, pre-sentence investigation information, Probation Officers' arrests are not captured for notice to mental health and continuity of care
- Confirmation of prescription medication taking too long
- Questioning authority for court ordered medications
- Pretrial bail investigation or other services for misdemeanors
- Defense counsel not at all arraignments
- Screening for Polaris at arraignment
- Screening and referral for cases other than felony and Domestic Violence
- Jail data



## Intercept II – Identified Opportunities

- CJIS has the capacity to flag items of interest

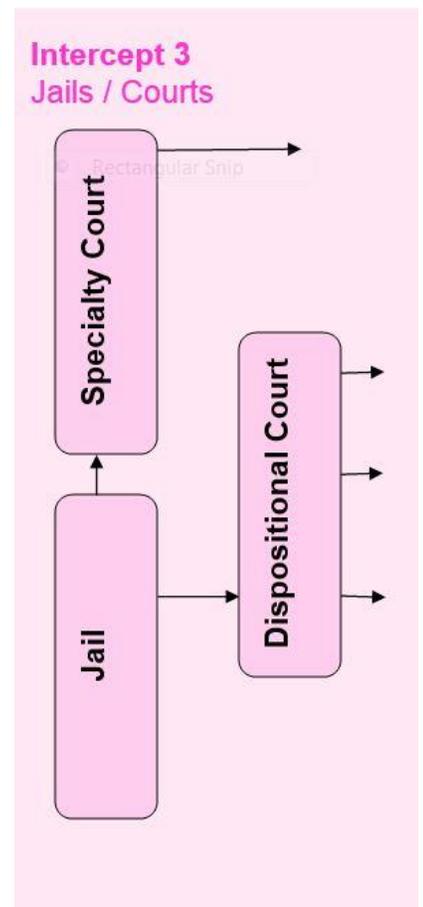
### Recommendations

- Develop a jail screening protocol to identify individuals with developmental disabilities.
- The jail and courts should be urged to define a process for information sharing so that results of the initial screening, and assessment if available, are provided to the court to aid in decision-making pertaining to addressing health needs. SAMHSA's 2016 publication, "Screening and Assessment of Co-occurring Disorders in the Justice System," will be provided in a Community Packet.
- Utilize Public Defenders or assigned counsel at the initial hearing process.
- Consider completing risk assessments, e.g., ORAS, and using results of the risk assessments to inform bond release decisions and pretrial decision-making in place of charge-based decision making. It is further recommended to use mental health and substance use screening or assessment results in conjunction with risk assessment results to link individuals with needed services and treatment. Individuals on pretrial release can be ordered by the court to participate in indicated treatment as a condition of release. In conjunction, it can be helpful when standardizing screening and referral at municipal court to employ a liaison with the mental health system to coordinate response by the court and the mental health agencies for defendants with mental health needs.
- Establish expectations for meaningful, appropriate, and timely sharing of information across systems to improve continuity of care of clients and decrease barriers to effective management of cases where clients have a high level of need. Written information is available to educate system stakeholders, some of which will be included in the Community follow-up packet. Also, the Council of State Governments Justice Center sponsored an Information Sharing Webinar for the Justice Mental Health Collaboration Program grantees. Interested parties can listen to the recording of this webinar at [www.csgjusticecenter.org/mental-health/webinars/sharing-information-between-behavioral-health-and-criminal-justice-systems](http://www.csgjusticecenter.org/mental-health/webinars/sharing-information-between-behavioral-health-and-criminal-justice-systems).

## Intercept III: Jails / Courts

### Jail

- The Stark County Jail rated capacity is 527; actual capacity was 480 at the time of the workshop.
- The jail provides 24/7 contracted medical and treatment services through Correctional Healthcare, including 24-hour nurses. Two full-time counselors provide assessment, continuing counseling, and crisis response. One half-time psychologist provides individual counseling and is also on-call. A psychiatrist is on site three hours/week and on-call.
- The Inmate Addiction Recovery Program (IARP) is an in-jail Intensive Outpatient Substance Use Treatment Program, certified by OHMHAS and provided to individuals by court order, post-disposition only. No substance use treatment services are available pre-sentence.
- AA and NA meetings are also available.
- Outside agencies visit clients in the jail as needed or requested, but do not provide treatment. Correctional Healthcare is the sole provider.
- Crisis Services responds to the jail for emergency evaluations and pink slipping.
- Inmates may have access to outside medications once the medications are verified. It typically takes 24-hours to verify if a valid prescription is brought into the jail. Increasingly, officers are bringing medication and medical equipment with the arrested individuals, although the jail would like to see this occurring more often.



- If inmates do not bring in medication they can be seen by the psychologist within 48-hours to begin the process of ordering and verifying the medication, which can take 7-10 days.
- Forced medication orders are available via hearings, typically for competency cases, although the jail reported having occasions of receiving Common Pleas orders, outside of the special hearings, for medication and permission to forcibly give medications if refused.
- Individuals with serious mental illness are separated from the general population when the individual's mental health has declined, with the goal to stabilize the individual and return them to general population; however, there is not a dedicated housing unit specific to mental illness.
  - 35 beds for males and 25 beds for females are available for individuals with serious mental illness, medical concerns or disciplinary interventions.
  - The mental health screening by the nurse is sent to the medical/mental health unit. Response to the individual depends upon level of need. Critical needs are referred to on-call providers. Staff will request records from service agencies.
  - Suicidal individuals are placed on precautions and seen the next day.
  - Staff in this area have mental health training; however, it is not clear if the training is CIT and/or Mental Health First Aid.
- No mental health data is available in CJIS, and the jail has no electronic medical record. There is some capacity to flag cases innocuously in CJIS, but this is not currently used.
- Jail Liaisons (identified above) accept referrals from anyone at the jail beginning at the point of incarceration and continuing through reentry.
- 118 Sheriff's Deputies have completed CIT training. Corrections Officers that work in the special units also receive mental health training from the Correctional Healthcare staff.

## Court

- The county has a Public Defender's Office; however, public defenders are typically only used after the initial hearing.
- The courts do use Intervention in Lieu; however, typically it is used after the initial hearing. The Court uses in-house counselors and assigns cases to the HOPE Track Probation Officers. Currently there is a caseload of five.
- StarkMHAR received a grant from the Ohio Department of Mental Health and Addiction Services for Medication Assisted Treatment (MAT) for court involved individuals; however, the Court's current provider is not certified by OHMHAS, which is a requirement of StarkMHAR. Involved parties are working to reconcile this situation so the grant project can move forward.

## Specialty Courts

- According to the Supreme Court of Ohio Specialized Dockets Certification Status Sheet, as of December 6, 2016, Stark County has the following specialized dockets:

Judge Name	Jurisdiction	Docket Type	Status August 30, 2016
John G. Haas	Common Pleas	Domestic Violence	Certified
Kristin G. Farmer	Common Pleas	Drug	Certified
Jim D. James	Family	Drug – Juvenile	Certified
John G. Haas	Common Pleas	Reentry	Certified
Taryn L. Heath	Common Pleas	Veterans Treatment	Certified
Curt Werren	(Canton) Municipal	Mental Health	Certified
Mary A. Falvey	(Canton) Municipal	Mental Health	Certified

- The specialty court representatives indicated they did not have a capacity concern.
- There is a case by case rule-out for serious mental illness in the Common Pleas Domestic Violence and Drug Courts.
- The Common Pleas Domestic Violence Court has specially trained Probation Officers; however, the nature of the specialized training was not defined during the workshop.

- There are no certified specialized dockets available for mental health in Common Pleas. However, Common Pleas does have the HOPE (Helping Offenders Psychologically & Emotionally) Track, which is a specialized probation track with two dedicated probation officers, but without the court oversight of a specialized docket. Crisis provides screening and assessment of referrals for the program. Judge, attorneys, prosecutor and SRCCC make referrals.
- There are no formal screening processes for any of the dockets. Consequently, triaging for the specialized dockets can be complicated and perhaps could benefit from targeted efforts in decision making.
- There is no peer-to-peer programming for the dockets.

## Veterans

- The Common Pleas Veterans Court - Honor Court - has specially trained probation officers; however, it is not clear what their training entails.
  - This court also includes a mentor program.
  - When an individual is released from this court they are released to their Intensive Supervision Probation (ISP) officer. This officer provides extra support as well as housing support.
- Massillon Municipal Court has an uncertified Veterans Court.

## Intercept III – Identified Gaps

- Peer programming expansion and access to individuals in jail
- HOPE track to become a certified court or a mental health court - review outcome data to help with this decision
- Combine risk/needs for decision making opportunities
- Drug treatment at jail for non-sentenced
- Continuity of care in the jail
- Jail Data

## Intercept III – Identified Opportunities

- Use of certified Peer Support providers
- Use of behavioral health framework

## Recommendations

- Review the jail procedures related to identifying, validating and accessing medications for inmates to determine if there are opportunities to expedite the process.
- Select validated screening tools for criminogenic risk, mental health, substance use, and trauma to be used in conjunction with other criteria for determining specialty court eligibility and related recommendations.
- Implement peer support services in the specialty courts and identify a model for use of peer support services in the jail that will be acceptable and manageable for jail administration.
- Explore including external providers in the treatment and mental health service offerings within the jail to decrease service interruption and increase continuity of care for individuals with serious mental illness. Relatedly, it is recommended that the jail review length of stay data for pre-sentence inmates to determine if substance use treatment services should be made available to this population.

## Intercept IV: Prisons / Reentry

### Prison

- Community Linkage referrals from OHMHAS regarding individuals returning from prison to the community are sent to the Forensic Coordinator/Monitor at StarkMHAR. Services are coordinated through Coleman

Professional Services Access to Behavioral Healthcare. From 9/21/15 – 9/21/16 OHMHAS completed 77 referrals to Stark County.

- If the individual does not attend their appointment Coleman Professional Services will contact the individual's Parole Officer and if a release is signed, they will work together to find the individual. Data on attendance at initial appointments is provided to OHMHAS, but it was unclear if any follow up data is tracked, re: recidivism, etc...
- Coleman Professional Services offers the Returning Home Ohio program. The agency can service a case load of 10 homeless individuals returning from prison and provides in-reach to these individuals to begin case planning. One challenge is competition for the placement spots with other counties.
- The Community Treatment & Correction Center, Inc. (CTCC) is a male halfway house with roughly 55 beds. Average length of stay is 60-90 days. The majority of residents at this CBCF are from the community; the remainder are from judicial release. The CTCC was not able to provide data on residents with mental illness.
  - CTCC receives Community Linkage packets for their residents.
  - Individuals with serious mental illness are released with a 30-day supply of medication and a 60-day prescription.
    - All other individuals leave with a 15-day supply of medication and a 60-day prescription.
    - CTCC will help bridge gaps in medication if necessary.
    - Transitional Control residents are still under DRC supervision and receive their full medications.
- Inmates have access to the Citizens Circle program. This program is for families and returning inmates to learn more about resources and different supports within the county.

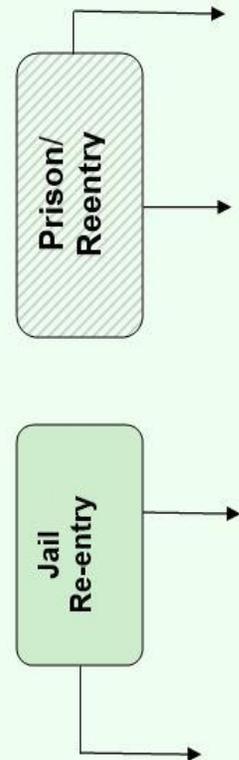
## Jail

- Coleman Professional Services and TASC provide liaisons at the jail, one full-time through Coleman and one full-time, one part-time through TASC, to set up resources and make linkages to services for the inmates. There are, however, challenges to knowing when individuals are being released from jail.
- Those present at the workshop confirmed that individuals are released from jail after a medical review by the jail clinic with a 2-week prescription for medications. If inmates bring outside medication with them, they are able to be released with all that remains.
  - If an individual cannot afford their medication, the Prescription Assistance Network (PAN) in Canton offers a sliding fee scale.
- The Inmate Addiction Recovery Program requires individuals to complete a 90-days aftercare program operated by Correctional Healthcare.
  - All courts in the county have access to funding to help pay for the program; however, if the funding has been depleted an individual would have to pay for the program themselves, and there are instances where ability to pay is a concern.
- Vitriol Program.
- Inmates and their families have access to the Citizens Circle program, to learn about resources and supports; however, it is predominantly used for prison reentry.
- SARTA stops at the jail.
- LOOP offers services to families of inmates.

## Veterans

- There is a Veteran Jail Outreach Coordinator that goes into the jail to provide resources to veterans.
- If an individual is accepted to Honor Court, they are released to an Intensive Supervision Probation Officer, who will ensure they have a place to live.

### Intercept 4 Reentry



## Intercept IV – Identified Gaps

- Inmate Addiction Recovery Program funding gap
- Engaging jail release in Citizen Circle, i.e, jail focus in Reentry Coalition

## Intercept IV – Identified Opportunities

- Resources available from ODRC

### Recommendations:

- Utilize the Citizens Circle program for the jail reentry population more often. This may be a simple matter of educating jail inmates and their family members.
- There may be future opportunities in Ohio for specialized mental health and diversion training for public defenders. In the meantime, it could be beneficial to consider ways to further engage local attorneys who have expressed interest in providing services to individuals with mental illness. For example, the Mental Health Public Defender program in Travis County, TX may provide some interesting ideas for more holistic involvement with some cases: <https://www.traviscountytexas.gov/criminal-justice/mental-health-public-defender>. On a smaller scale and more local, the Cuyahoga County Court of Common Pleas sponsors an Attorney Training Seminar for assignment eligibility of Mental Health and Developmental Disability (MHDD) Court docket cases, which could potentially be replicated and adapted to Stark County.

## Intercept V: Community Corrections / Community Support

### Probation

- Common Pleas has 11 Probation Officers.
  - Honor Court has separate officers that provide additional support.
  - HOPE Track has two Probation Officers.
- Adult Parole Authority (APA) provides both post-release and probation supervision for Common Pleas, with six Probation Officers; however, there is not a formal referral process, and none of these officers receive specialized training to supervise individuals with mental illness.
- Canton Municipal Court has seven Probation Officers, all of whom have extensive training, including mental health training.
- Alliance Municipal Court has no Probation Officers.
- Massillon Municipal Court has two Probation Officers.

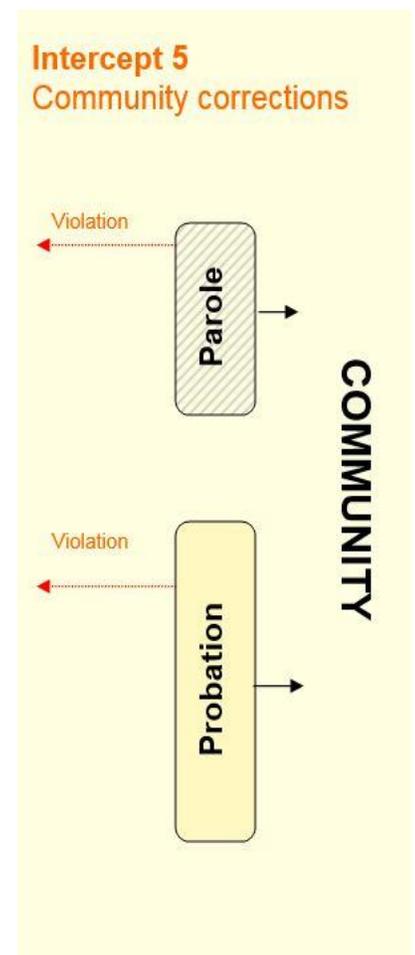
### Parole

- APA does not have specialized caseloads, specialized training or a formal referral process.

### 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 Stark County.

- Coleman Professional Services provides a continuum of mental health services, including medication and counseling to individuals that do not have insurance.



- SRCCC is the Community Based Correctional Facility serving Stark County. SRCCC operates a 133-bed (108 Males and 25 Females) facility. Last year, 55% of those served received mental health services due to a diagnosed mental illness. Individuals may be deemed ineligible for the CBCF if they are unable to access needed care, i.e., pay for services, access medication, or participate in Cognitive Restructuring Therapy (CRT). 3% of referrals last year were rejected because of inability to participate in CRT; most were individuals with dual or multiple disorders (mental illness, other medical conditions, and/or developmental disabilities). Individuals are not eligible for benefits during their stay at the facility.
- CIRC offers SAMI outpatient treatment services for co-occurring disorders. The ACT IDDT team (Assertive Community Treatment and Integrated Dual Disorder Treatment) is serving approximately 105 individuals. The agency receives referrals for treatment from HOPE Track.
- Housing was identified as a significant gap for Stark County. These existing services were highlighted:
  - Deliverance House provides residential supportive housing for adult females, including individual and group therapy, education and transitional housing options.
  - Wilson Hall provides residential long-term treatment care relating to substance use and co-occurring disorders.
  - Phoenix Rising provides recovery housing for adult males, including individual and group therapy, psychiatric services and case management.
  - Hunter House is operated by CIRC and provides 48 apartments for Permanent Supportive Housing for co-occurring disorders.
  - Halfway housing exists for persons on parole only, post-release.
- Coleman Professional Services and CommQuest are pursuing an ACT team.
- Transportation access varies by geography and agency resources. Bus passes for SARTA are provided by some organizations, and in some cases agencies will provide transportation for their services.

### **Intercept V – Identified Gaps**

- Funding for medications and mental health services at CBCF
- Housing: recovery, residential treatment; permanent housing; supportive housing for returning citizens
- Transportation to treatment appointments
- Data and information sharing – across intercepts

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

- None identified.

### **Recommendations:**

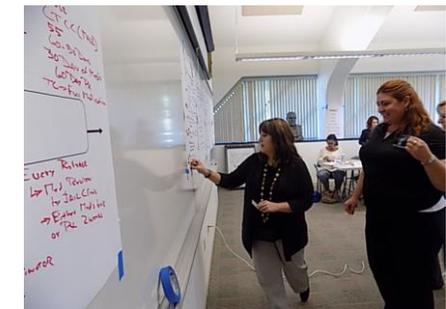
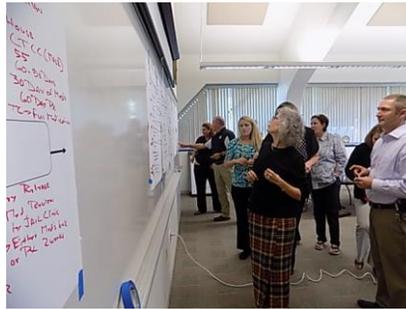
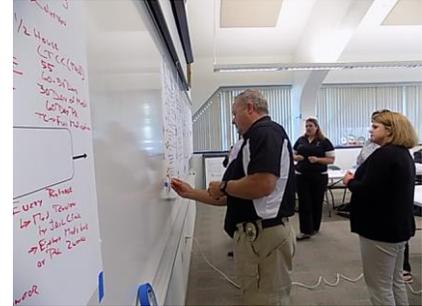
- Implement formal training for APA officers and Pretrial Services Probation officers, re: mental illness and/or CIT.
- Utilize valid risk assessment tools to inform decisions related to community supervision, i.e., the need for supervision and the level/type of supervision indicated.

# Priorities for Change

Stark County,  
Ohio

## Stark 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.

At the close of the workshop, it was agreed that StarkMHAR would serve as the convening entity for the stakeholder group and for the work groups as needed.

### Top Priorities for Change

1. Permanent Housing
2. Information Sharing
3. Data Collection
4. Determine if HOPE Track should become a certified court
  - a. Review outcome data

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

- Alliance Community Hospital crisis intake services capacity issue (6 votes, Intercept 1)
- Funding for medications and mental health services at CBCF (6 votes, Intercept 5)
- Detox and Crisis Stabilization bed capacity (5 votes, Intercept 1)
- Engaging jail release in Citizen Circle and Municipal Court and jail involvement in Reentry Coalition (4 votes, Intercept 4)
- Housing for recovery and residential treatment (3 votes, Intercept 5)
- CIT Training for Dispatcher, Fire and EMS. Mental Illness coding and collection of data/outcomes for Dispatchers. (3 votes, Intercept 1)
- LEAD – communication, utilization, expansion and coverage (2 votes, Intercept 1)

- Peer programming expansion and access to jail (2 votes (Intercept 3)
- Drug treatment at jail for non-sentenced (1 vote, Intercept 3)
- Pre-trial bail investigation for misdemeanors (1 vote, Intercept 2)
- The Inmate Addiction Recovery Program AoD funding gap (1 vote, Intercept 4)

### **Additional Recommendations**

#### **Cross-Intercepts Recommendations:**

- Utilize valid risk assessment measures to determine level of risk, identify individual needs, and make recommendations for services along multiple points of intervention
- In conjunction, utilize the shared framework for reducing recidivism and promoting recovery among adults with behavioral health needs under correctional supervision as a decision-making guideline for appropriating effective services to individuals with the highest risk and needs. The framework is applicable at all points of intercept in the justice system provided that validated assessment information is available related to risk for recidivism, risk of violence, and mental health risks and needs. Jails and courts have a greater opportunity for organized use of the framework with the existing requirement for felony probation to utilize the Ohio Risk Assessment System (ORAS) and the existing screening mechanisms already in place in the county corrections facility, which can be supplemented or enhanced with validated tools. Print copies of the publication issued jointly by the National Institute of Corrections, The Council of State Governments Justice Center, and the Bureau of Justice Assistance which outlines this framework and provides general guidance on decision making were made available in limited quantities at the mapping workshop. Additional electronic copies can be obtained at no cost from the Justice Center website ([www.csgjusticecenter.org](http://www.csgjusticecenter.org))

#### **Parking Lot Issues**

- Funding challenges created by state billing protocol based on county
- Termination vs. suspension of Medicaid

#### **Moving Forward**

- Stakeholders are scheduled to meet again on Thursday, April 13, 2017 at 8:30 AM. Jeannie Cool agreed to be responsible for coordinating the meeting.

## Additional Resources

Arnold Foundation	<a href="http://www.arnoldfoundation.org">www.arnoldfoundation.org</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>
The Federal Bonding Program	<a href="http://www.bonds4jobs.com">www.bonds4jobs.com</a>
Lutheran Metropolitan Ministry Community Re-entry	<a href="http://www.lutheranmetro.org/Community-re-entry">www.lutheranmetro.org/Community-re-entry</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) NAMI Ohio	<a href="http://www.nami.org">www.nami.org</a> <a href="http://www.namiohio.org">www.namiohio.org</a>
National Center for Cultural Competence	<a href="http://nccc.georgetown.edu">http://nccc.georgetown.edu</a>
National Center for Trauma Informed Care	<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 GAINS Center/TAPA Center for Jail Diversion	<a href="http://www.gainscenter.samhsa.gov">www.gainscenter.samhsa.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/academics/criminal-justice-coordinating-center-of-excellence">www.neomed.edu/academics/criminal-justice-coordinating-center-of-excellence</a>
Ohio Department of Rehabilitation and Correction Ohio Reentry Resource Center	<a href="http://www.drc.ohio.gov/web/reentry_resource.htm">www.drc.ohio.gov/web/reentry_resource.htm</a>
Ohio Ex-Offender Reentry Coalition	<a href="http://www.reentrycoalition.ohio.gov">www.reentrycoalition.ohio.gov</a>
Partners for Recovery	<a href="http://www.partnersforrecovery.samhsa.gov">www.partnersforrecovery.samhsa.gov</a>
Partnership for Prescription Assistance	<a href="http://www.pparx.org">www.pparx.org</a>
Policy Research Associates	<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>
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://summitcountyreentrynetwork.org">http://summitcountyreentrynetwork.org</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>
Veterans Justice Outreach	<a href="http://www.va.gov/HOMELESS/VJO.asp">www.va.gov/HOMELESS/VJO.asp</a>

**Sequential Intercept Mapping**  
**Stark County, Ohio | October 4 & 5, 2016**

**Participant Roster**

1.	John Aller, Executive Director	Stark County Mental Health and Addiction Recovery	John.aller@starkmhar.org
2.	The Honorable Taryn Heath, Judge	Stark County Common Pleas Court	judgeheath@starkcountyohio.gov
3.	Captain Gary Kerr, Jail Administrator	Stark County Sheriff's Office	maier@starksheriff.org 346@starksheriff.org
4.	Lt. John Gabbard, Commander, Priorities Division	Canton Police Department	john.gabbard@cantonohio.gov
5.	Ivan Rosa, VP, Recovery Services & Facilities	CommQuest	IvanR@questrs.org
6.	Mike Kochera, Court Administrator	Canton Municipal Court	michael.kochera@cantonohio.gov
7.	Bobby Hamlet, LEAD Care Coordinator	Stark County TASC	bhamlet@starktasc.org
8.	Jennifer Boswell, Reentry Coordinator	Adult Parole Authority, Ohio Department of Rehabilitation and Corrections	Jennifer.Boswell@odrc.state.oh.us
9.	Michele Boone, Manager of Programs and Evaluations	Stark County Mental Health and Addiction Recovery	michele.boone@starkmhar.org
10.	Jeannie Cool, Forensic Coordinator/Monitor	Stark County Mental Health and Addiction Recovery	Jeannie.cool@starkmhar.org
11.	Jonathan Stump, Health Service Administrator, Stark County Jail	Correctional Health Care Group, Inc.	jstump@chcgweb.com
12.	Craig Prysock, Director	Stark Regional Community Correction Center	cprysock@srccc.net
13.	Jo Ann Edwards, Deputy Court Administrator	Stark County Court of Common Pleas	JAEdwards@starkcountyohio.gov
14.	Jennifer Arnold, Law Director	Alliance Court	lawdirector@allianceoh.gov
15.	Willette Bradley	Community Treatment and Corrections Center	
16.	Rose Morgan, Specialized Services Unit Supervisor	Stark County Board of Developmental Disabilities	MorganR@starkdd.org
17.	Jane James, Executive Director	National Alliance on Mental Illness, Stark County	jjames@namistarkcounty.org
18.	Monica Miller	Crisis Intervention & Recovery Services, Inc.	
19.	Kim Marshall, Assistant Nurse Manager, Emergency Department	Aultman Hospital	Kim.Marshall@Aultman.com
20.	Lyndley Corley, RN Case Manager, Emergency Department	Mercy Hospital	lyndley.corley@cantonmercy.org
21.	Carla Wright	ICAN Housing	
22.	Lt. Bill Morris	Alliance Police Department	morrisw@alliancepolice.com
23.	Vincent Giammarco, Mental Health Administrator, Lorain Correctional Institution	Ohio Department of Rehabilitation and Corrections	Vincent.Giammarco@odrc.state.oh.us
24.	Stephanie Wilson, Clinical Services Director	Heartland Behavioral Healthcare	stephanie.wilson@mha.ohio.gov

25.	Jean Van Ness	SC Homeless Continuum of Care	jvanness@scfcanton.org
26.	Magistrate Amy Kennedy	Probate Court	
27.	Michelle Beyer	Consumer	mbeyer1378@yahoo.com
28.	Chief Doug Swartz	Canal Fulton Police Department	dswartz@cityofcanalfulton-oh.gov
29.	Tammy Johnson, Public Defender	Stark County Public Defender's Office	trjohnson@starkcountyohio.gov
30.	Sherry Smith, Director of Nursing	Stark County Health Department	smiths@starkhealth.org
31.	Christa McCabi		

## Action Planning Matrix for Stark County, Ohio

Priority Area 1: Permanent Housing					
Objective	Action Step	Who	When		
1.	Determine best practices for housing for the criminal justice population with emphasis on reentry for persons with mental illness.	A. Contact CSH and arrange for consulting services to determine best practices for addressing barriers, involving peer support, data collection (Sisters of Charity funding)	Jean Van Ness	By December 31, 2016	
2.	Gather data to assess the need for reentry housing, particularly for persons with mental illness.	A. Facilitate CSH connection with criminal justice system B. Conduct focus groups with homeless individuals and people involved with the criminal justice system, regarding their view of the need for reentry housing C. Work with CSH to convene focus groups, drawing from homeless hotline	Jean Van Ness Jennifer Boswell Jennifer Boswell	Within 30 days after CSH input Within 30 days after CSH input	
3.	Identify resources and gaps in service delivery.	A. Identify leaders to convene housing providers and representatives of the reentry coalition B. Determine broader, affordable housing resources and those specifically available to reentry population. 1. Consult with Beth Pearson and Mike Cody to identify and follow up on leads and determine capacity and openness to housing the reentry population. Under what circumstances to serve reentry population, sex offenders and arsonists.	Chandra Bryant, Jean Van Ness, Mike Cody Natalie McClesky Dawn Spriggs Possible college intern referral	Within 30 days after CSH input By December 31, 2016	
4.	Establish a collaborative body of housing providers and reentry coalition representatives to identify strategies to respond to housing needs.	A. Identify organization to champion the cause and lead the group to develop solutions	To be determined	Within 3 months after CSH output.	

## Action Planning Matrix for Stark County, Ohio

Priority Area 2: Information Sharing				
Objective	Action Step	Who	When	
1.	Determine existing information sharing occurring and determine information sharing best practices.	<p>A. Research what information sharing is already available in Stark County and map it across all intercepts (i.e. guardian list, CJIS)</p> <p>B. Determine what information to give to first responders and/or all agencies that might be involved.</p> <p>C. Research other jurisdiction justice and health information exchanges</p> <p>D. Research multi-party informed consents, data segmentation to allow for HIPAA/legal review, including who in Stark Co. needs notified and how (i.e. flags?)</p> <p>E. Explore Board of DD sharing community care plans</p> <p>F. Explore existing policy for law enforcement to contact guardian and review probate court records</p>	<p>Members of Data Collection work group and Information sharing work group</p> <p>NEOMED and assigned individuals from above groups</p> <p>Rose Morgan, Stark Board of DD Lt. John Gabbard, Canton Police</p>	<p>Next meeting scheduled for 11/17/16 at 10:00 a.m. at StarkMHAR</p> <p>Within 6 months</p> <p>11/17/16 11/17/16</p>
2.	Apply best practices of information exchanges that best fits Stark County.	TBD	<p>TBD</p> <p>Corrections Planning Board, SIM Task Force, Stepping Up Committee</p>	
3.	Train and adopt new justice and health information exchange.	TBD	<p>TBD</p> <p>Corrections Planning Board, SIM Task Force, Stepping Up Committee</p>	

## Action Planning Matrix for Stark County, Ohio

Priority Area 3: Data Collection				
Objective		Action Step	Who	When
1.	Define Terms	A. Identify commonly used terms at each intercept 1. Define 2. Usage 3. Categorize	Lyndley Corley	11/4/16
2.	Standardize CIT Form (stat sheet) in CJIS	A. Meet with Steering Committee on standardization B. Meet with C. Conzales (CJIS) on standardization C. Disseminate information through Chiefs of Police committees. D. Develop procedures on use of CIT form 1. CIT committee 2. Chiefs of police E. Travel and meet with Chief Bruce Pijanowski and determine how they provide this service.	M. Boone, C. Gonzales Doug Swartz J. Stump, Doug Swartz, Bill Morris Doug Swartz	1/4/17 12/4/16 2/4/17 3/4/17 11/4/16
3.	All dispatchers trained in CIT	A. Collect data on number of dispatchers trained in CIT and by agency B. Agree on the type of training C. Train all untrained CIT 1. Regular yearly training	Gary Kerr M. Boone Carol Vesely	11/4/16 12/4/16 11/4/17
4.	With trained CIT dispatchers, collect data on type and number of calls	A. Meet with Joe Concado to determine how to collect treatment data 1. Number of calls involving mental illness 2. Disposition of calls	Doug Swartz, M. Boone	2/4/17
5.	Determine the number of mental health cases that are booked into the jail	A. Look at the pre-booking screen for need for revision and revise if necessary B. Have nurse collect data at medical/mental health screening 1. S/P 2. H/P	J. Stump	11/4/16 11/1/17

### Action Planning Matrix for Stark County, Ohio

		<ul style="list-style-type: none"> <li>3. P/S</li> <li>4. Determine if we should use current psy screening or use another one</li> </ul>		
6.	Disseminate Jail Liaison tracking information	<ul style="list-style-type: none"> <li>A. Add number of inmates who refuse linkage or help/treatment</li> <li>B. Disseminate quarterly</li> </ul>	M. Boone	12/11/16
7.	Community prison reentry data	<ul style="list-style-type: none"> <li>A. Disseminate existing information to group</li> <li>B. Develop a method to track/identify inmates who have been released from jail or prison into community programs                             <ul style="list-style-type: none"> <li>1. Meet with MH Board IT department to collect information</li> </ul> </li> </ul>	M. Boone	5/4/17
8.	Court will identify the number of mental illness cases	<ul style="list-style-type: none"> <li>A. Obtain data on what the courts are currently collecting                             <ul style="list-style-type: none"> <li>1. Mental health cases</li> <li>2. Records #</li> <li>3. Specialty dockets</li> </ul> </li> <li>B. Meet with C. Gonzales to determine if he can put in CJIS</li> </ul>	Jennifer Arnold	1/4/17
9.	Keep track of specialty courts and seriously MI in jail	<ul style="list-style-type: none"> <li>A. Meet with MH to determine what data they collect</li> <li>B. Collect data on                             <ul style="list-style-type: none"> <li>1. SMI</li> <li>2. Housing/special units</li> <li>3. Percentage on medications</li> </ul> </li> <li>C. Explore jail system ability to track SMI movement                             <ul style="list-style-type: none"> <li>1. Number of days</li> </ul> </li> </ul>	<p>J. Stump</p> <p>G. Kerr</p>	<p>11/4/16</p> <p>12/1/16</p>

Action Planning Matrix for Stark County, Ohio

Priority Area 4: Determine if HOPE Track should become a certified court – review outcome data			
Objective	Action Step	Who	When
1. Determine whether or not establishment of a mental health court is justified.	A. Identify felony offenders who received mental health services within the last year	Jeannie Cool	11/2/16
	B. Obtain HOPE participant data 2013 to present	Jo Ann Edwards	11/2/16
	C. Obtain referrals and screening data vs. acceptance to HOPE 2013 to present	Christa McCabe	11/2/16
	D. Brochure on specialized dockets to committee	Jo Ann Edwards	10/19/16
	E. Polaris documents to committee	Mike Kochera	10/19/16
	F. Obtain data, re: competency and sanity evaluations	Jeannie Cool	11/2/16
	G. Obtain HOPE outcomes	Jeannie Cool	11/2/16
	H. Obtain research on evidenced based practices for mental health courts	Mike Kochera	11/2/16
	I. Obtain criteria for specialized dockets	Taryn Heath	10/19/16
	J. Meet again	Committee	12/15/16
2. If yes, identify presiding judge.	A. Talk to Judge Hartnett	Taryn Heath	12/31/16
3. If obtain presiding judge, present information to judges for approval.	A. Visit other mental health courts	Committee	3/31/17
	B. Identify willing participants	Presiding Judge	1/31/17
	C. Identify funding sources	Committee	3/31/17
	D. Identify needs for additional support staff	Presiding Judge, Jo Ann	3/31/17
	E. Identify available training	Taryn Heath	3/31/17
	F. Initial contact with Ohio Supreme Court	Presiding Judge	1/31/17
	G. Review needs for program coordinator	Presiding Judge, Jo Ann	3/31/17
	H. Explore payroll subsidy grants	Presiding Judge, Jo Ann	3/31/17
4. If no, evaluate HOPE program for potential improvement			