

Stark County, Ohio

Sequential Intercept Mapping Final Report

May 10-11, 2023

Stark County Core Planning Team

Name	Position	Agency
John Aller	Executive Director	Stark County Mental Health and Addiction Recovery
Michele Boone	Director of Clinical Services	Stark County Mental Health and Addiction Recovery
Matthew Cooper	Peer	Stark County TASC, Inc.
Delaney Green	Forensic Coordinator	Stark County Mental Health and Addiction Recovery
Taryn Heath	Judge	Stark County Common Pleas Court
Erin Ivers	Recovery Program Manager	Stark Count Mental Health and Addiction Recovery
Mike Kochera	Court Administrator	Stark County Common Pleas Court
Sheriff George Maier	Sheriff	Stark County Sheriff's Department
Dr. Ashlie Martin	Medical Director	Addiction Medicine CommQuest Services, Inc.
Hannah Potts	Chief Officer	ColemanCrisis
CJ Stantz	Major	Stark County Sheriff's Department

Workshop Facilitators and Consultants

Ashley Eads	Dissemination Coordinator	Criminal Justice Coordinating Center of Excellence
Teri Gardner	Facilitator	Retired, Ohio Department of Mental Health and Addiction Services
Dan Peterca	Facilitator	Retired, Cuyahoga County Court of Common Pleas Probation Department
Ruth H. Simera	Executive Director	Coordinating Centers of Excellence



**CRIMINAL JUSTICE
COORDINATING CENTER**
of **EXCELLENCE**
A NEOMED CCoE

Sequential Intercept Mapping

Table of Contents

Sequential Intercept Mapping	- 2 -
Introduction.....	- 2 -
Background.....	- 2 -
Values.....	- 2 -
Objectives of the Sequential Intercept Mapping Exercise.....	- 3 -
Keys to Success	- 3 -
Cross-Systems Partnerships; Task Force	- 3 -
Representation from Key Decision Makers; Community Investment	- 4 -
Stark County Sequential Intercept Map.....	- 6 -
Stark County Sequential Intercept Map Narrative	- 7 -
Intercept 0: Ultimate Intercept	- 7 -
Intercept I: Law Enforcement / Emergency Services	- 8 -
Intercept II: (<i>Following Arrest</i>) Initial Detention / Initial Court Hearing	- 11 -
Intercept III: Jails / Courts	- 12 -
Intercept IV: Prisons / Reentry	- 14 -
Intercept V: Community Corrections / Community Support.....	- 16 -
Stark County Priorities	- 19 -
Top Priorities	- 19 -
Additional Resources	- 20 -
Participant List.....	- 22 -
Action Planning Matrix.....	- 24 -
Appendices	- 28 -

Stark County, Ohio

Sequential Intercept Mapping

Introduction

The purpose of this report is to provide a summary of the *Sequential Intercept Mapping* (SIM) and *Taking Action for Change* workshops held in Stark County, Ohio on May 10-11, 2023. The workshops were hosted at Stark State College with Stark County coordination provided by Delaney Green with Stark County Mental Health & Addiction Recovery (StarkMHAR) in co-sponsorship with and support from the Stark County Sheriff's Office, along with a Stark 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

Stark County Mental Health and Addiction Recovery (StarkMHAR) and the Stark County Sheriff's Office requested the *Sequential Intercept Mapping* and *Taking Action for Change* workshops. The request was made to identify strengths and areas of opportunities for Stark County in responding to the overrepresentation of individuals with behavioral health needs in the justice system. The Sequential Intercept Mapping exercise was meant to aid Stark County with:

- Creation of a map indicating points of interface among all relevant Stark County 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 33 individuals representing multiple stakeholder systems including mental health, substance use treatment, human services, corrections, individuals with lived experience and support/advocacy, law enforcement, and courts. A complete list of participants is available in the resources section of this document. Teri Gardner, Dan Peterca, 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 and what services and supports are available to help prevent criminal justice contact, i.e., Intercept 0 resources including crisis response, outpatient services, social service supports, community-based resources and evidenced-based treatment options.
2. Identification of gaps, resources, and opportunities at each intercept for individuals in the target population.
3. Development of priorities for activities designed to improve system and service level responses for individuals in the target population.

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

Keys to Success

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

Cross-Systems Partnerships; Task Force

Stark County stakeholders and service providers, like those from most other Ohio counties, have been involved in many collaborative projects and relationships over time. There are currently four primary cross-system collaborative teams/coalitions that were identified by the Stark Planning Team and workshop participants: Corrections Planning Board, Stepping Up, Collaboration Care Meetings, and Crisis Management Team. The Stark County Board of Commissioners 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 community intends to incorporate the Sequential Intercept Mapping participant group and action planning work groups into the Stepping Up framework, with Delaney Green at StarkMHAR identified as the person to coordinate the effort, including reconvening the SIM group.

Individual with Lived Experience Involvement

The Stark County Planning Team included one individual with lived experience/peer support, with one additional peer support representative from Stark County TASC, Inc. at the workshop. The SIM group is strongly encouraged to solicit participation from additional community members and individuals with lived experience; ideally each work group/committee will include lived experience, family and/or advocate representation.

Representation from Key Decision Makers; Community Investment

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

Data Collection

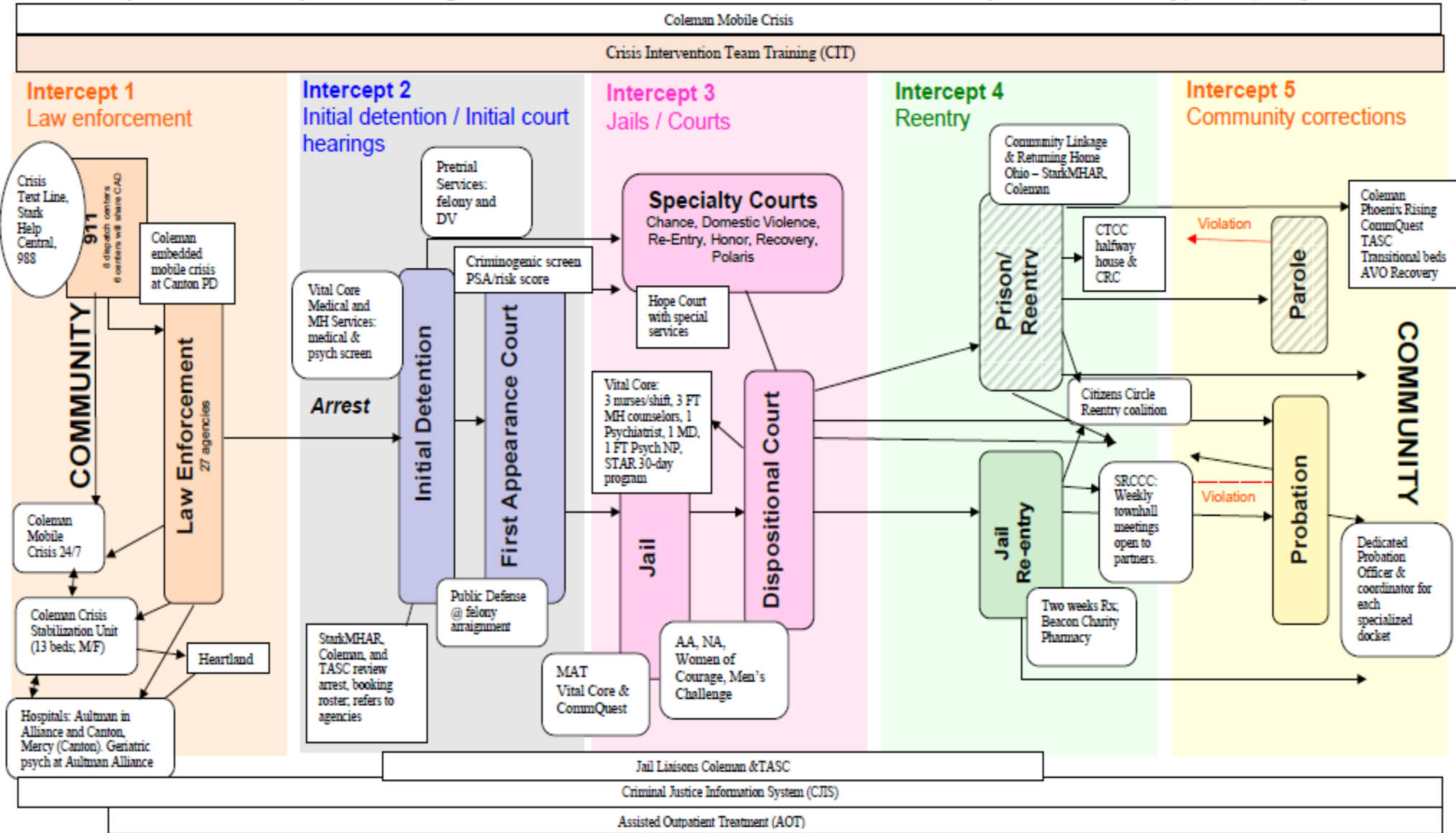
- The Stark County Planning Team compiled the following items to be reviewed by facilitators in preparation for the workshops and to be included in the workshop manual:
 - Completed Community Collaboration Questionnaire
 - Stark County Jail Data for 2022
- Additional data provided by the Criminal Justice 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, March 2023
 - Stark County CIT Officers Roster Project Summary Report, March 2023

Recommendations

- At all stages of the Sequential 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, May 2023



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 and as part of the discussion of Intercept 0.

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

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

Intercept 0: Ultimate Intercept

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

- Outpatient walk-in assessments are available at Coleman Health Services. Otherwise, there is a wait time of 11-14 days for the general population for mental health assessments, although efforts are made to have quicker turn-around times for jail or other urgent populations.
- Commquest has same day assessments
- Assertive Community Treatment (ACT) – for Assisted Outpatient Treatment (AOT) participants and non-AOT clients
- Clozapine prescribers
- Assisted Outpatient Treatment (AOT) provided by Coleman Health Services – referrals are received from Heartland Behavioral Health hospital, courts and community. StarkMHAR has a one-page program description that can be more broadly disseminated.
- Cognitive Enhancement Therapy (CET) and Action-based Cognitive Remediation (ABCR) provided by Coleman Health Services
- Cognitive Behavioral Therapy (CBT) provided by Coleman Health Services
- Cognitive Behavioral Therapy for Psychosis (CBT-P) provided by Coleman Health Services
- Dialectical Behavior Therapy (DBT) provided by Coleman Health Services
- Eye Movement Desensitization and Reprocessing (EMDR)
- FIRST Coordinated Specialty Care for First Episode Psychosis (CSC for FEP) provided by Coleman Health Services
- Integrated Dual Disorder Treatment (IDDD) with both Intensive Outpatient Treatment (IOP) and Residential provided by CommQuest. IDDD is also provided by Coleman Health Services.
- Medication Assisted Treatment (MAT) provided by both CommQuest and Coleman Health Services
- Mental Health First Aid (MHFA) and Question Persuade Refer (QPR) – both available through StarkMHAR training site
- Motivational Interviewing
- Peer support specialists
- Whole Health Action Management (WHAM)
- The county is migrating from the 211 community information and referrals service to StarkHelpCentral.com, an online local information and referral site

Intercept 0 Gaps

- Lack of hospital as a resource for the severely mentally ill (SMI) and no in-county psychiatric/mental health unit except for Aultman's geriatric psychiatric unit
- No hospital or emergency department representation at the mapping
- Medical clearance from the local hospital is required prior to an inpatient referral, creating a secondary transportation need
- Transportation – Medicaid rides – getting from sober living to outpatient care; to hospital / psychiatric evaluation
- Integration of mental health, substance use disorder, and primary/physical health care
- Knowledge about AOT across systems and in the community to enable appropriate referrals. Participant numbers are low in comparison to similar sized counties.

Data to indicate how people access the treatment system without police involvement

Intercept 0 Opportunities

- Shorten the instructions about resources for individuals with severe mental illness (SMI) that are available in the hospital emergency departments
- Increase the marketing and advertising for the Stark Help Line

Recommendations

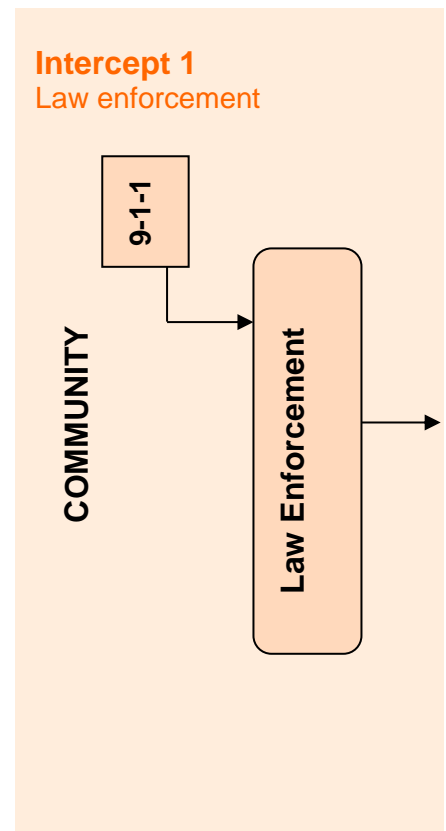
- Participants at the workshop were generally unaware of the StarkHelpCentral.com service. Partner organizations (StarkMHAR, Stark County Job & Family Services, Stark County Educational Service Center and Stark County Board of Developmental Disabilities) are encouraged to create marketing and informational materials for broad dissemination to accelerate the community's knowledge of this resource.
- Explore how to implement peer support across all the intercepts; reach out to other communities that have implemented peer support.
- Engage key stakeholders and partners to identify how to work together with the hospitals and EMS providers.

Intercept I: Law Enforcement / Emergency Services

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

Dispatch / 9-1-1

- Stark County has six primary dispatch centers (Sheriff's Office, Alliance, North Canton, Canton, and RED Center regional) that answer calls from 22 law enforcement agencies and Fire/EMS. By the end of 2023, all departments, except Alliance and Ohio State Highway Patrol, will be on the same computer-aided dispatch (CAD) system.
- All cell phone calls to 911 route to Canton City Dispatch or the Sheriff's Office. All landline calls go to the closest dispatch center.
- Not all dispatching centers call takers are Crisis Intervention Team (CIT) trained. There is also no consistent model of training for dispatchers regarding mental illness across the dispatch centers.
- One mobile crisis staff member from Coleman Health Services is embedded at Canton Police Department 911/dispatch to assist in response to mental health calls for service.



- Law enforcement officers can call in Mobile Crisis Response when at a scene.

Law Enforcement and Crisis Intervention Team model

According to the 2022 Ohio Peace Officer Training Commission (OPOTC) County Agency Report Stark County has 27 law enforcement agencies: Alliance Police Department, Beach City Police Department, Brewster Police Department, Canal Fulton Police Department, Canton Police Department, East Canton Police Department, Hartville Police Department, Heartland Behavioral Healthcare Police Department, Hills & Dales Police Department, Jackson Township Police Department, Lawrence Township Police Department, Louisville Police Department, Magnolia Police Department, Malone University Police Department, Marlboro Township Police Department, Massillon Police Department, Minerva Police Department, Navarre Police Department, North Canton Police Department, Perry Township Police Department, Republic N&T Police Department, Stark State College Police Department, Stark County Sheriff's Office, Uniontown Police Department, Walsh University Police Department, Waynesburg Police Department, and Wilmot Police Department. Stark County employs an estimated 602 full-time officers.

- The Stark County Crisis Intervention Team (CIT) program held its first CIT Patrol Officer Training Course in 2006, with the latest training course held in 2022. Their annual CIT training averages 25 participants. 24 of the 27 Law Enforcement Agencies in the county have participated in CIT training, which is a 40-hour course composed of lectures, interactions with individuals with lived experience and representatives from mental health service providers, and scenario-based roleplays including practice of de-escalation skills. Records indicate that 656 full-time officers have completed CIT training. Three law enforcement agencies have not participated in CIT training: Malone University Police Department, Republic N&T Police Department, and Wilmot Police Department. The Stark County CIT program completed a CIT Peer Review in 2014. Crisis Intervention Contact sheets are utilized via the Criminal Justice Information System (CJIS) system. All law enforcement, criminal justice, and mental health providers have access to this system to view contact sheets. Identified mental health providers will initially follow up on CIT forms with outreach to individuals within 24 hours. Not all law enforcement jurisdictions utilize a Crisis Intervention Contact sheet.

Crisis Services

- Stark Hotline
- Crisis Text Line
- 988 is active and available but not yet being promoted in Stark County. The local Stark Hotline will continue to be used and promoted until the geolocation function of 988 is more accurate.
- Crisis Center – an Advanced Practice Nurse is on site M-F, can see anybody who is not yet connected with services, and assess for immediate needs, including medication. A charitable community pharmacy is available for individuals without means to support prescriptions.
- Workshop participants discussed the new Ohio law that allows for donation of prescription medications: <https://www.cantonrep.com/story/news/state/2023/01/26/new-ohio-law-allows-individuals-to-donate-unused-prescriptions/69815194007/>
- Mobile Crisis (24/7) Response by Coleman Health Services is available upon request from law enforcement
- Crisis Stabilization (voluntary) Unit at Coleman Health Services has 13 beds
- 23-hour observation for substance use: Commquest
- Crisis Residential
- Peer respite/sobering support
- Hospitals and emergency rooms

Hospitals / Emergency Rooms / Inpatient Psychiatric Centers

- One of the state psychiatric hospitals is Heartland Behavioral Health (HBH) in Massillon. The HBH does not have an assessment center or services, cannot accept drop-offs, and does not have an emergency department.
- Hospital emergency departments serve as the typical after-hours access to mental health care. Stark County hospitals include Aultman Hospital (Alliance and Canton), and Cleveland Clinic Mercy Medical. The hospitals

rotate mental health responsibilities with Aultman Hospital responsible on odd days of the week and Cleveland Clinic Mercy Medical responsible on even days of the week.

- Aultman's geriatric psychiatric unit is the only in-county mental health/psychiatric unit.

Detoxification

- Aultman Hospital, Canton, has detox and observation beds. Some criminal offenses are excluded from eligibility.

Probate

- The county has an Assisted Outpatient Treatment (AOT) program that may be underutilized.

Veterans

- Stark County has a Veterans Service Office in Canton
- Louisville Police Department is currently working on a veteran response model.

Intercept I Gaps

- No centralized dispatch
 - Uncertainty about how other dispatch centers dispatch calls/ No process sharing
- CIT dispatch training not consistent across the community
- Transportation protocol issues
 - Insurance coverage
 - Working with Office of Public Safety
 - Medicaid coverage
 - Private vs public Emergency Medical Services (EMS)
 - Cross county transfers of people being transported
- Inconsistent policies or practices regarding involuntary commitment/pink slips across the community
- Hospital refusing to accept paperwork for involuntary commitment/pink slips
- Crisis stabilization/drop-off/ Observation for involuntary individuals

Intercept I Opportunities

- All dispatch centers will centralize in CAD system – except Ohio State Highway Patrol
- Explore how to transfer dispatch calls to mental health agencies directly; training and practice needed
- Embedded social worker with Canton Police Department can inform dispatch protocol to redirect calls to mental health

Recommendations

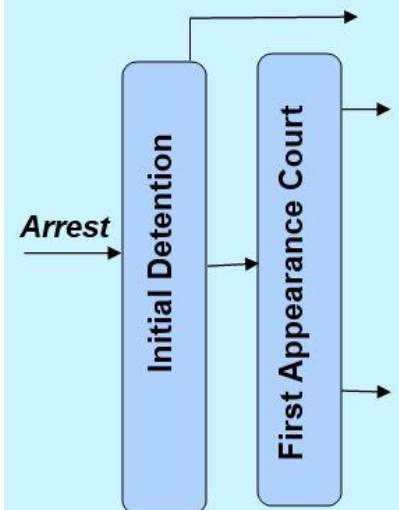
- The Ohio Office of Criminal Justice Services, Ohio Collaborative, recently established a Crisis Intervention Standard to provide guidance to Ohio law enforcement officers and other agency personnel when responding to or encountering persons in crisis. The standard is consistent with the CIT policy guidance issued by the Criminal Justice Coordinating Center of Excellence. Stark County's police agencies should review their policies and make any updates necessary to align with the standards. The county CIT program and partner mental health agencies should collaborate on the police agency policies and adopt policies that support and cooperate with the police agency policies and uphold CIT core elements.
- The county is encouraged to adopt and regularly include CIT training for dispatchers and call-takers.

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

Initial Detention

- After arrest, all individuals are held at the Stark County Jail (SCJ). The arresting officer provides the arrest report to the jail, which can assist in screening.
- At booking, individuals are screened through the new Tyler Odyssey system in the Criminal Justice Information System (CJIS) that captures previous arrests and is shared with mental health agencies if flagged.
- The Ohio Risk Assessment System (ORAS) and PSA are used to help inform bond-setting.
- Health and mental health services at the jail are provided by VitalCore Health Strategies. A nurse provides a mental health screening at booking. Based on the screening answers, individuals are housed accordingly and may be assessed regularly while in jail. The Columbia Suicide Risk Assessment tool is used as warranted.
- If an individual enters the jail while withdrawing from a substance, they are seen by nursing staff. Mental health professionals are not on site 24/7 but receive the information in the morning.
- Booking roster information is shared with Stark Mental Health and Recovery Board, Commquest, and Coleman Health Services. The roster is compared to the claims data at StarkMHAR and can be shared among the behavioral health agencies, but not beyond without a valid release of information.
- There is specialized housing for those with a mental health concern. They are placed in Level 2 housing. The capacity of the Level 2 unit is 11 and includes both male and female beds. The average stay in Level 2 housing is 2-4 days.

Intercept 2 Initial detention / Initial court hearings



Arraignment and Initial Hearing

- Within 24 hours, the individual is arraigned either in person or via video. There are three municipal courts: Alliance, Canton, and Massillon. The criminogenic risk score is provided to the judge at arraignment for common pleas and Canton municipal court, but the mental health assessment that was completed during the booking process is not offered.
- A public defender is provided at arraignment for felony offenses only. If the individual is charged with a misdemeanor, they enter a plea at the arraignment, typically with no legal representation. A public defender is typically in attendance at all initial hearings but not necessarily standing up/ providing formal representation for every charge. At the pre-trial hearing, public defenders are available for all defendants.
- There are no referrals to specialty courts at the initial hearing. At the pre-trial hearing, a judge can decide to refer to a specialty court.
- Pretrial services personnel go to the jail to meet with defendants.
- Criminogenic risk-based assessment – the PSA (Public Safety Assessment) is completed after the detention hearing, before arraignment for felony charges/Common Pleas and at Canton Municipal Court

Veterans

- There is a prescreen question at booking that asks if the individual identifies as a veteran.

Intercept II – Identified Gaps

- More mental health personnel in the jail
- Increase in observation units for individuals with mental health concerns in the jail

- Sharing initial booking mental health screenings and information with courts and pre-trial services for the initial hearing. Also need information from community mental health providers to be provided to the courts or judges for the initial hearing.
- Interagency communication (i.e., Jail with community mental health providers)
- Improve engagement strategies at release
- Agency liaison involvement at initial hearing/pretrial phase (earlier involvement)

Intercept II – Identified Opportunities

- While screening information may not be offered, pretrial services personnel can request booking information, including non-medical screening information, when they visit defendants in the jail

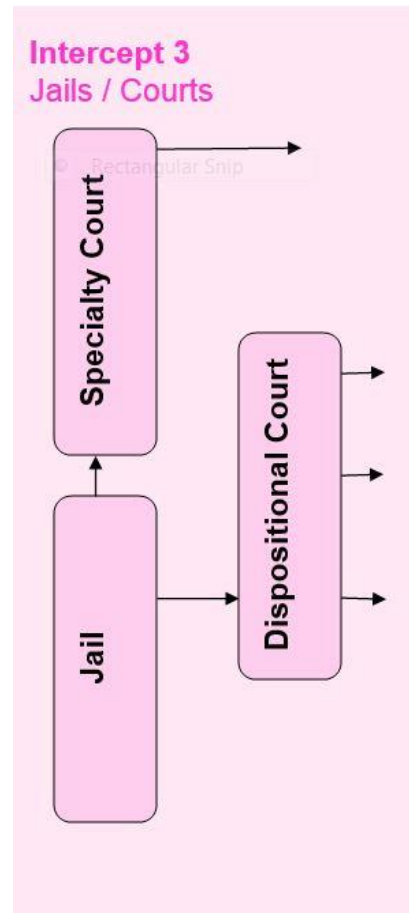
Recommendations

- Brief Jail Mental Health Screen (BJMHS) or equivalent at booking to give jail data on prevalence of people likely to need further mental health and/or substance use assessments or services (Stepping Up). This data can then be compared to aggregate data from VitalCore Health Strategies without releases of information.
- Increase information sharing with the courts. Results of screening tools used by the booking staff at the jail can be shared with the court without a release of information. The jail and court could also routinely include the option for a signed release of information to enable information sharing by VitalCore.

Intercept III: Jails / Courts

Jail

- The Stark County Jail capacity is 526, with a current average daily population of 401
- Daily bookings average: 22
- Daily population average for persons with mental illness: 40-50%
- Daily booking average for persons with mental illness: 10
- Approximately 70% of the jail population are pre-trial detainees, with more felonies than misdemeanors.
- The automated system used for jail booking, classification, health, and release information is the Tyler Odyssey system. The system is used to identify and flag individuals with mental illness for future booking information.
- Medical and mental health personnel are provided through VitalCore Health Strategies. The Stark County Jail has three nurses on each shift; one psychiatric nurse; one nurse practitioner; one psychiatrist on site one day a week for a total of three hours; and three full-time counselors that work daily 8am-5pm. One counselor works evening, weekend, and holiday shifts. Within the first few days of incarceration, mental health providers will meet with individuals if potential mental health or substance use concerns are flagged.
- Psychotropic medications are continued if current prescription is in place.
- The jail offers programs that include:
 - STAR - a 30-day program for males and females with substance use disorders who are psychiatrically stable. Participation requires sentencing/order from the court.
 - Women of Courage – faith-based; individuals in the mental health unit are excluded from the program
 - Men’s Challenge – faith-based; individuals in the mental health unit are excluded from the program
 - AA and NA
- Medication Assisted Treatment (MAT) is available at the jail. If an inmate comes to the jail already on buprenorphine, it will be continued. Naltrexone can also be prescribed/administered, and they have started prescribing/administering Subutex. Additionally, the jail plans to begin prescribing/administering Sublocade.



However, the jail is not licensed to prescribe/administer methadone. CommQuest will help to maintain their clients on methadone while in the jail.

- Mobile Crisis will also conduct assessments at the jail.
- The jail is staffed by both correction officers and deputies. Currently, 25% of jail staff are CIT trained, with more deputies than COs trained. Corrections Officers are required to attend Mental Health First Aid training within one year of their employment. Deputies do all transporting.

Court

- There are six certified specialty dockets in Stark County:
 - CHANCE – eligible felony drug and alcohol related cases
 - Domestic Violence
 - Reentry – provides support and connections to services to those released from the prison system to reduce recidivism.
 - Honor Court – treatment court for veterans and active service members charged with felonies. Individuals must be Stark County residents and cannot be convicted or charged with a sex related offense. The program uses peers/mentors from Stark County to guide individuals through the process. A representative of the court program goes to the jail to screen individuals for Honor Court, and full assessments are completed after release from jail. The program also has Memorandums of Understanding (MOUs) with other counties for Stark County residents with cases pending in other counties to participate in this treatment court.
 - Recovery Court – eligible to Stark County residents with a substance use disorder and a misdemeanor charge. The average case load is 30-40.
 - Polaris Court – municipal mental health court assists those suffering from mental illness and substance use by providing treatment as an alternative to incarceration. ORAS is used to help determine eligibility. The average case load is 18-25, and the court can accept more referrals.
- Screenings for the court are done by court employees, and referrals to specialty dockets are made by the judges.
- Stark County also has a non-certified mental health court docket, Helping Offenders Psychologically and Emotionally (H.O.P.E), that can serve as an alternative to incarceration. During the pre-sentence investigation process, referrals can be made for the individual to join the H.O.P.E program, and assessments are completed in the jail by Summit Psychological Services. To be eligible, the individual must be a Stark County resident, have a history of mental illness, and agree to be a participant in the program. The length of the program is 12-18 months. The court has mental health services available in-house. If individuals cannot use these services due to scheduling or other barriers, referrals will be made to community-based services.

Specialty Courts

- According to the Supreme Court of Ohio Specialized Dockets Certification Status Sheet, as of March 2022, Stark County has the following specialized dockets:

Judge Name	Jurisdiction	Docket Type	Status March 2022
Judge Kristin G. Farmer	Stark Common Pleas	General Drug (CHANCE Program)	Certified
Judge Natalie R. Haupt	Stark Common Pleas	Domestic Violence	Certified
Judge Chryssa N. Hartnett	Stark Common Pleas	Reentry	Certified
Judge Taryn L. Heath	Stark Common Pleas	Veterans Treatment (Honor)	Certified
Judge Curt Werren	Canton Municipal	Drug (Recovery)	Certified
Judge Mary A. Falvey	Canton Municipal	Mental Health (Polaris)	Certified

Veterans

- There is a prescreen question on the pretrial questionnaire that asks if the individual identifies as a veteran, and again at court.

- Rosters are scrubbed, people identified, and mentors assigned. Attempts are made to relink to services or refer to new services.
- The Veterans Justice Outreach worker was doing jail visits prior to the pandemic; it was unclear whether these visits were currently happening.

Intercept III – Identified Gaps

- Need more mental health staff at the jail and a full-time officer to work with the mental health staff
- Continuity of care, specifically related to MAT while in jail and connection/reconnection to outpatient services for medication continuance
- Methadone maintenance protocol for non-CommQuest clients
- Capacity to make HOPE Court a certified specialized docket in Common Pleas (It was determined following the 2016 mapping exercise that HOPE track should be a certified specialized docket, but have not been able to identify a judge to preside)
- Mental health court isn't available in all areas, i.e., would like to refer clients from other municipal courts to the existing mental health court ability of municipal specialized courts to accept referrals from other Stark County municipal courts

Intercept III – Identified Opportunities

- HOPE Court is well established. With an eligible judge to preside, this program could be transitioned to a certified specialized docket
- Potential legislation pending for multi-jurisdictional dockets

Recommendations

- Work with key stakeholders to transition the HOPE Court to a certified specialized docket.

Intercept IV: Prisons / Reentry

Prison

- The Community Transition Program (CTP) and Community Linkage Program of the Ohio Department of Mental Health and Addiction Services (OMHAS) offers voluntary referrals to community substance use disorder treatment and mental health treatment, respectively, for those individuals diagnosed with substance use disorders and mental illness. In Stark County, referrals are made to Coleman Health Services to initiate services upon release from prison. In state fiscal year 2022, OMHAS completed 109 referrals to Stark County. For clients that follow through with appointments, assessments are completed by Coleman within two weeks of release from prison. Coleman also provides in-reach after receipt of the referral packet but it may be via video. Coleman estimates that 30% of clients stay engaged. The following represents eligible individuals at ODRC, with the number participating indicating the number of individuals who volunteered for community referrals.

• Mental Health clients:	31 participated	3 refused	Total: 34
• Mental Health/CTP:	17 participated	1 refused	Total: 18
• CTP:	61 participated	39 refused	Total: 100
• Totals:	109 participated	43 refused	Total eligible: 152

- Stark Regional Community Correction Center (SRCCC) is the Community Based Correctional Facility that serves Stark, Tuscarawas, Wayne, and Holmes Counties. SRCC has 154 treatment beds: 122 male, 32 female. There are currently 97 treatment beds being utilized. Nearly half (45-48%) of residents are from Stark County. Individuals with serious mental illness who are stable and able to participate are eligible.
 - Town Hall meetings occur at SRCC every Thursday 11:30am – 1:15pm. These meetings include invitations to mental health providers and community partners and are held to build trust and

familiarity amongst the attendees. It is also an opportunity for clients/inmates to meet with providers and community partners. There is no request or appointment needed for attendance.

- CareSource does a lunch 'n learn.
- SRCC is also collaborating with Reentry Court, Goodwill, and the Reentry Coalition.
- Except for Subutex, inmates can be on Medication Assisted Treatment (MAT) while at SRCC.
- Summit Psychological Associates and Coleman Health Services provide some services; Summit Psychological Services provides services to those involved in HOPE program. Currently, there is funding from StarkMHAR to provide counseling, case management and psychotropic medications.
- Peer support available at SRCCC comes through the Clean Project, AA, and NA
- The local reentry coalition is the Stark Carroll County Reentry Coalition.
- Citizen Circle
- Reentry Court does video in-reach monthly for those pending release. Adult Parole Authority (APA) used to make referrals to Reentry Court, but that is no longer occurring. Those at the workshop did not know why or exactly when the referrals stopped. APA also previously participated in monthly in-reach but it is unclear if they continue to do in-reach now that APA is in a different location.
- Transitional Beds provide max stay of 89 days

Jail

- Coleman Health Services and Stark County TASC, Inc. provide in-reach services and are liaisons between the individual and outside services. This includes setting up appointments for after release from jail. Stark County TASC, Inc. meets with inmates aged 18-29, and Coleman Health Services meets with inmates aged 30 and over. This is voluntary, however can be ordered by a judge.
- Coleman Health Services, CommQuest, and Stark County TASC, Inc. all provide linkage to services for reentry and all have peer support available.
- Individuals are released from jail with a two-week prescription for medication. The jail tries not to initiate new prescriptions at discharge because it is difficult for new clients to get connected with services within the two-week period, although sometimes that is necessary. Davies is the receiving pharmacy for all prescriptions unless clients specifically request otherwise. Coleman Health Services has Genoa Pharmacy connected to their lobby and recommends that Coleman clients get their prescription there, as it will reduce a barrier. For clients without health insurance, prescriptions are provided at no cost through Beacon Charity Pharmacy.
- Individuals being released are provided with referral documents and scheduled appointments; however, there are challenges in engaging individuals after release and attending their appointments.
- Community Resource Fair for STAR Program at jail

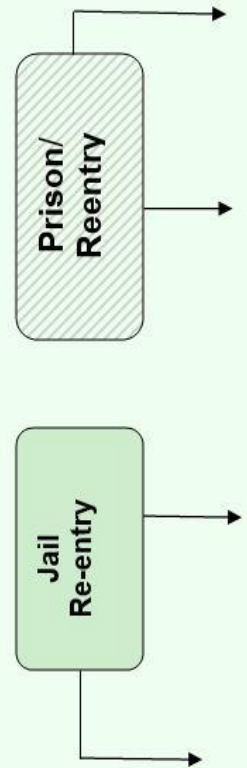
Intercept IV – Identified Gaps

- Adult Parole Authority (APA) communication regarding individuals referred through CTP
- Improve engagement strategies at release

Intercept IV – Identified Opportunities

- Expand the use of peers
- CBCF (SRCCC) reentry services are available to others

Intercept 4 Reentry



- Referrals from Coleman Health Services or jail for Assisted Outpatient Treatment (AOT) at release or soon after

Recommendations

- Market the availability of the Town Hall at SRCC and the Lunch & Learn at Care Source to further build relationships and share information.

Intercept V: Community Corrections / Community Support

Probation

- Mental Health and Recovery Court have one probation officer (PO) for each docket. The case load average for the Mental Health Court is 30 and Recovery Court is 45-48. Information was not available on caseloads for other municipal courts.
- Honor Court has a caseload of 25-30.
- H.O.P.E has two dedicated probation officers with caseloads of approximately 45 which are split between HOPE cases, other specialized dockets caseloads and general caseloads. The In Lieu of Conviction (ILC) program is also supervised by the H.O.P.E. probation officers and has a caseload of 30 individuals.
- Probation officers have training through National Drug Court Institute (NDCI), CIT for mental health, and School Certifying Officials (SCO).
- Probation utilizes more incentives than sanctions. They also utilize Thinking Errors assignments and follow up contacts.
- Day reporting services are available
- Probation officers can refer to crisis stabilization if needed
- Other linkages to services and coordination are part of most programs from pretrial to discharge. The Common Pleas Court has a lot of in-court services and tries to be one-stop for clients.

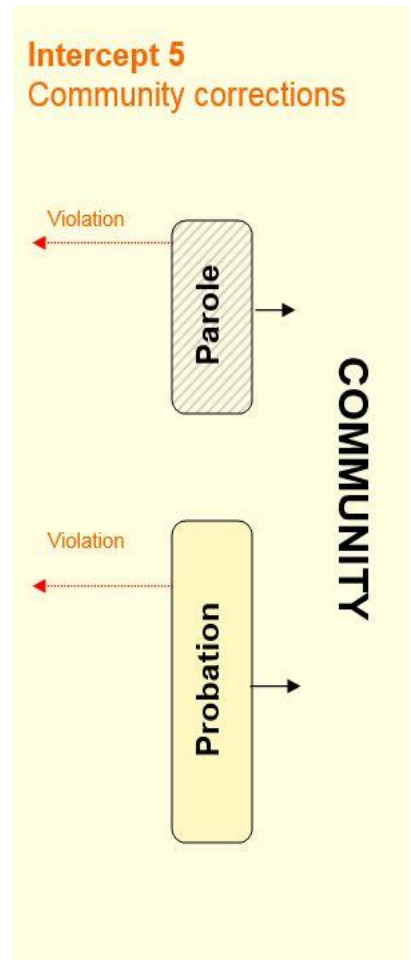
Parole

- Adult Parole Authority (APA) was not present at the mapping.

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 support available in Stark County.

- Homeless Navigation, PATH Homeless Outreach, and Homeless Shelters
- Transitional or supportive housing
 - Coleman Health Services
 - Kelly House
 - Phoenix Recovery Housing offers sober living housing; not designed for persons with serious mental illness but can serve those who are stable enough to participate in programming
- NAMI Stark County chapter – often cancelling family education class due to no-shows; some conjecture that this may be due to transitioning back to in-person vs. zoom
- Faith-based organizations were mentioned as collaborators with Reentry Court
- AVO Recovery, a newer organization in the community, serves a lot of Polaris clients
- Phoenix Rising is receiving more referrals from courts, providing case management, and working with other agencies



Intercept V – Identified Gaps

- ▣ Probation capacity if referrals are able to be made across court jurisdictions in future
- ▣ The Common Pleas specialty docket probation officers have caseloads in which they are supervising both the specialty docket and regular docket individuals.
- ▣ Consistency in services across all municipal courts
- ▣ Coordination with Adult Parole Authority (APA)
- ▣ Housing – affordable, permanent housing for those with felonies and multiple needs (large wait lists)
- ▣ Transportation resources are lacking and/or unreliable

Intercept V – Identified Opportunities

- ▣ Increased coordination between courts and Phoenix Rising

Recommendations

- ▣ Review the local data to better understand if there is a need for additional Probation Officers with specialized training to better serve the targeted population and explore if there are individuals slipping through the cracks who could benefit from being served on a specialized caseload.

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.

Top Priorities for Change

1. Hospital Resources for Individuals with SMI (no group was formed for this priority at the workshop because there are potentially larger implications for local and state response)
2. Housing
3. Crisis-Stabilization and Drop-Off
4. Pink Slip Policies
5. Inter-Agency Information Sharing at Initial Hearing and Discharge

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

- Dispatch - Centralized dispatch and CIT dispatcher training not consistent across the community (9 votes, Intercept 1)
- Transportation protocol issues (as outlined in Intercept 1 notes) (6 votes, Intercept 1)
- Mental health specialized dockets (Missing a certified mental health court at the common pleas level; access/ability to refer to mental health court from other municipal courts) (5 votes, Intercept 3)
- Expanded use of peers (1 vote, Intercept 4)

Parking Lot Issues

- Medicaid Rates
- Workforce
- Funding
- Hospital Resources for Individuals with SMI

Additional Resources

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

Treatment Advocacy Center	www.treatmentadvocacycenter.org
University of Memphis CIT Center	www.cit.memphis.edu
Vera Institute of Justice	www.vera.org
Veterans Justice Outreach	www.va.gov/HOMELESS/VJO.asp

Sequential Intercept Mapping
Stark County, Ohio | May 10-11, 2023

Participant Roster

Name	Title	Agency	Email
Michele Boone	Director of Clinical Services	StarkMHAR	michele.Boone@starkmhar.org
Lauren Bosler	Quality Behavioral Health Specialist - Case Manager	Summit Psychological Associates	lbosler@summit-psychological.com
Marcie Bragg	Executive Director	Stark Housing Network	mbragg@starkhousingnetwork.org
Matthew Cooper	Peer Support	Stark County TASC, Inc.	mcooper@starktasc.org
Ashley Covey	Behavioral Health Coordinator	Vital Core- Stark County Jail	acovey@vitalcorehs.com
Terry Curry	Communications Supervisor	Stark County Sheriff's Office	315@starksheriff.org
Erik Davies	Director of Peer Support Services	Stark County TASC, Inc.	edavies@starktasc.org
Denise Frangos	SSA Supervisor	Stark County Board of DD	frangosd@starkdd.org
Kody Gonzalez	CJIS Project Manager/Chief Deputy Clerk	Stark County Criminal Justice Information System/Canton Municipal Clerk of Court	kody.gonzalez@cantonohio.gov
Delaney Green	Forensic Coordinator	StarkMHAR	delaney.green@starkmhar.org
Joellen Hartzell	Officer	Canton Police Department	joellen.hartzell@cantonohio.gov
Rebecca Haymond	Court Coordinator	Stark Common Pleas	rhaymond@starkcountyohio.gov
Taryn Heath	Judge	Stark County Common Pleas Court	judgeheath@starkcountyohio.gov
Matt Heck	Fire Chief	Massillon Fire Department	mheck@massillonohio.gov
Stephen Inchak	Chief Officer	Coleman Health Services Behavioral Health	stephen.inchak@Colemanservices.org
Erin Ivers	Recovery Program Manager	StarkMHAR	erin.ivers@starkmhar.org
Mike Kochera	Court Administrator	Stark County Municipal Court	michael.kochera@cantonohio.gov
Kristina Lockwood	Chief Assistant Prosecutor	Canton Prosecutor's Office	kristina.lockwood@cantonohio.gov
Andrea M Perry	Director of Public Safety	City of Canton	andrea.perry@canton.ohio.gov
Jackie McDougal	Coleman Crisis		jacquelyn.mcdougale@Colemanservices.org
Timothy Miller	Officer	Stark County Sheriff's Office (SCSO)	201@starksherrif.org
Eric Mitchell	Case Manager	Phoenix Rising Behavioral Healthcare & Recovery	ericm@phoenixrisingbhr.org
Jim Monigold	Major	Jackson Township Police Department	majormonigold@jtpd.com
Dixie Park	Judge	Stark County Probate Court	dnpark@starkcountyohio.gov
Kristy Pearson	Magistrate	Canton Municipal Court	christy.pierson@cantonohio.gov
Kay Raga	Executive Director	NAMI of Stark County	krage@namistarkcounty.gov
Tessa Rubenstein	Canton PD Mobile Counselor/Prescreener	Coleman Health Services	tessa.rubenstein@Colemanservices.org
CJ Stantz	Major	Stark County Sheriff's Office (SCSO)	146@starksherrif.org

Michael Tolson	Program Director	Stark County Regional Correction Center (SRCCC)	MBeebe@srccc.net
Andrew Turowski	Chief of Police	Louisville Police Department	policechief@louisvilleohio.org
Danijela Vranesevic	Director of Recovery Services	CommQuest	danijela.vransesevic@CommQuest.org
Dr. Debbie Walsh	Clinical Director	Summit Psychological Associates	dwalsh@summit-psychological.com
David A. Wills	Executive Director	Stark County TASC, Inc.	dwills@starktasc.org

Action Planning Matrix for Stark County, Ohio

Priority Area 2: Housing			
Objective	Action Step	Who	When
1	<ul style="list-style-type: none"> - Identify/ fully utilize Permanent Supportive (PSH) & Transitional Housing (TH) bed inventory (existing) 	<ul style="list-style-type: none"> -Complete environmental scan/review and discuss strategies -Identify improvement areas in the current process to obtain a Verification of Disability (VOD) – VOD is a requirement to be enrolled in PSH projects -Determine if the court can order an individual to a transitional housing bed -Invite Judges to visit Transitional Housing offered by Coleman Health Services and Kelly Care -Review group findings 	<p>M Bragg</p> <p>Scan complete; ready to discuss at next scheduled meeting</p>
2	<ul style="list-style-type: none"> -Engage additional stakeholders based on meeting agenda topics 	<ul style="list-style-type: none"> Invite the following stakeholders: Stark Metropolitan Housing Authority (SMHA), PSH providers such as ICAN Housing and the YWCA of Canton, Stark County Parole Officer, Canton City Administration, Veteran Service Organizations, Private or Faith-Based housing providers, others(?) 	<p>M Bragg (invite SMHA, ICAN and YWCA)</p>
3	<ul style="list-style-type: none"> -Identify and inventory private, or faith-based partners that offer housing 	<ul style="list-style-type: none"> -Build and distribute list -Explore was to improve capacity and collaboration 	
4	<ul style="list-style-type: none"> -Increase and encourage landlords' willingness to rent to subsidized housing tenants, specifically PSH and Rapid Rehousing (RRH) 	<ul style="list-style-type: none"> -Pilot a landlord incentive/risk mitigation funded program (current pilot is underdevelopment with the Stark Housing Network (SHNI)/Homeless Continuum of Care of Stark County) -Explore increased subsidized -Rent supplemental/incentive for risk mitigation -Identify further SMHA, local OHFA (Ohio Housing Finance Agency) stakeholders 	<p>M Bragg</p> <p>Next SHNI meeting is scheduled with consultant and provider on 5/31/2023, information can be shared at next scheduled meeting</p>
5	<ul style="list-style-type: none"> -Develop full housing/landlord list 	<ul style="list-style-type: none"> -Get current lists -Vet -Determine other ways to revise 	<p>Stark County Real Estate Investment Group</p>

Action Planning Matrix for Stark County, Ohio

Priority Area 3: Crisis-Stabilization and Drop-Off				
Objective	Action Step	Who	When	
1	-Create agreed upon rendering of center lay out	-Architect completes lay out	Coleman Health Services	Mid-June 2023
2	-Develop cost of build	-Architect provides quote	Coleman Health Services	Mid-June 2023
3	-Secure capital funding	-Submit grants, etc.	Coleman Health Services Stark County Mental Health & Addiction Recovery (StarkMHAR) Community Partners	September 2023
4	-Complete build out	-Contracts with contractors -Purchase equipment and furniture	Coleman Health Services	June 2024
5	-Determine staffing and service options	-Gather data -Coleman Health Services, Criminal Justice Information System (CJIS), law enforcement, Ohio Mental Health & Addiction Services survey -Site visits	Coleman Health Services, StarkMHAR, Health Care Perspectives (HCP), Sequential Intercept Mapping (SIM) sub-group committee	Mid- June 2023
6	-Create operating budget	-Proforma finalized	Coleman Health Services, StarkMHAR, HCP	September 2023
7	-Secure operating funding	-Submit grants, funding agreements with partners	Coleman Health Services, StarkMHAR partners	Sept 2023-June 2024
8	-Hiring of staff	-Position postings -Interviews -Onboarding	Coleman Health Services	April 2024-July 2024
9	-Update/Create policies and procedures	-Embed any need policies and procedures for the new services. -Train staff	Coleman Health Services, StarkMHAR, SIM sub-group committee	April 2024-July 2024
10	-Set open date and open for services	-Information flyers/brochures for community referral sources. Include menu of services offered. -Create marketing strategy	Coleman Health Services	June 2024-July 2024

Action Planning Matrix for Stark County, Ohio

Priority Area 4: Pink Slip Policies			
Objective	Action Step	Who	When
1	<ul style="list-style-type: none"> -Determine disposition of pink slip processes 	<ul style="list-style-type: none"> -Determine data set(s) to collect -Determine methods and/or platforms collect data -Compile data and distribute to appropriate resources 	<ul style="list-style-type: none"> -StarkMHAR, first responders, provider agencies
2	<ul style="list-style-type: none"> -Training 	<ul style="list-style-type: none"> -Contact state about updated pink slip training efforts -Identify training audience based on role and response -Align training topics corresponding to roles identified above -Roll out trainings 	<ul style="list-style-type: none"> -Erin Ivers, StarkMHAR -Workgroup
3	<ul style="list-style-type: none"> -Policy and Procedures 	<ul style="list-style-type: none"> -Determine current policies and procedures across agencies and resources -Current requirements for health officers 	<ul style="list-style-type: none"> -Workgroup

Action Planning Matrix for Stark County, Ohio

Priority Area 5: Inter-Agency Info Sharing at Initial Hearing & Discharge				
Objective		Action Step	Who	When
1	Understand limitations a rural information-sharing regarding legalities/opportunities	-Determine if inmates can sign a universal Release of Information (ROI) for involved parties -release from NEOMED -Explore Summit County ROI as sample and universal record system	-Magistrate Kristy Pearson - Timothy Miller	May 19, 2023
2	Quicker identification of inmates involved in mental health services for court and pretrial purposes	-Add a question to booking related to involvement with a mental health and substance use disorder agency and upload to CJIS -Create questions inside complaints and booking section of CJIS	-Dr. Debbie Walsh and Judge Heath -Commander Miller -Cody Gonzalez	May 31, 2023 Ongoing
3	Better understand pretrial needs and process	-Assign someone from pretrial release on the committee	-Judge Heath	May 19, 2023
4	Improve connection to pretrial release by community agencies	-Identify one person as point of contact for pretrial legal needs -Make a list of contact persons for each agency	-All members -Magistrate Kristy Pearson	June 16, 2023
5	Determine what information is valuable for pretrial	-Consult with legal pretrial team -Make a list of need to know items	-Mike Kochera	June 11, 2023
6	Improve access/knowledge of psych/hospitalization utilization	-Explore Clinisync access for members	- Danijela Vransesevic	May 24, 2023

Appendix

Appendix A

Planning for Sequential Intercept Mapping

JAIL BOOKINGS	<i>Please report most recent data available (12-36 months)</i>
Person Completing Form <i>(name/title)</i> _____	Tracy Robson/ Jail Administrative Assistant
Time period being reported _____	1 year- 2022

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
What is the rated capacity of the jail?	526	Yes	
What is the average daily total population of the jail?	401	Yes	
What is the average number of total daily bookings?	22	Yes	
What type of automated system is used to collect Jail Booking, classification, health and release information?	Tyler Odyssey	No	
Please provide the number and types of booking that are used for the following categories: <i>(If unable to provide objective data on booking types, please provide average percentage of each population)</i>			
Pretrial Misdemeanor			
Pretrial Felony			
Probation Violation	24 Currently		
Sentenced local	69 Currently		
Sentenced awaiting transport	23 Currently		
Other			
Is there a separate facility or unit for mental health? If not, where are persons with mental illness housed?	Yes	Yes	

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
<i>How many people are identified as having mental health issues?</i>			
By jail booking staff	1,984 (in the last 365 days)	Yes	By Vitalcore Nursing Staff
While incarcerated (by corrections officers, health staff or others)			Data not Captured
Does your Booking/Automated system allow the Jail to identify or flag defendants with Mental Illness for future booking information?	Yes	No	Per VitalCore Electronic health record
What is the average daily population of persons with mental illness?	40-50%	No	Per VitalCore Electronic health record
What is the average number of daily bookings of people with mental illness?	10	No	
What percentage of the pre-trial population represents persons with mental illness?			Data not Captured
What percentage of the sentenced population represents persons with mental illness?			Data not Captured
CROSS TABULATION OF MULTI-SYSTEM DATA			
<i>For the entire population of persons booked into jail during the identified time period (open or closed cases):</i>			
Is Jail Booking information shared on a regular basis with public funded Mental Health, AOD or Developmental Disability Agencies?---if so how?	Yes	No	Reports daily with StarkMHAR, Commquest, Coleman
How many were known to the publicly funded mental health system?	100%	No	
How many accessed acute crisis services during the specified reporting period?	N/A	N/A	
How many were known to the publicly funded substance abuse treatment system?	100%	No	
How many were known to the Developmental Disabilities system?	10	No	
ADDITIONAL JAIL/OFFENSE-RELATED INFORMATION			
For those who are identified as persons with mental illness or co-occurring substance abuse or developmental disabilities (by jail, other criminal justice, or treatment systems), what are the nature of the charges?			
Misdemeanors	N/A	N/A	
Felonies	N/A	N/A	
Violent Behavior	N/A	N/A	

Planning for Sequential Intercept Mapping

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
Violations of Probation	N/A	N/A	
Frequency - How many arrests / bookings per person? (average)	N/A	N/A	
Length of stay in the jail for each episode of incarceration (average)	N/A	N/A	
DISCHARGE / REENTRY of individuals with mental illness or co-occurring disorders:			
How many people left the jail with financial benefits or entitlements in place?			Data not captured
How many people left the jail with a shelter as the identified residence?	11	N/A	From 7/1/22 – 12/31/22
How many people had no known residence?	11	N/A	From 7/1/22 – 12/31/22
How many people left the jail with an appointment at a mental health or other treatment service?	165	N/A	From 7/1/22 – 12/31/22
How many people with mental illness had contact with a helping professional from the community to facilitate reentry?	165	N/A	From 7/1/22 – 12/31/22

Community Collaboration Questionnaire

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

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

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

This information helps prepare the CJCCoE for providing the best direction during the training about the points of intervention most useful in your community. This document can be filled in and returned by way of email to rsimera@neomed.edu

Community: Stark County		
Contact Person: Delaney Green, LISW-S	Phone: 330-455-6644	Email: Delaney.green@starkmhar.org

Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
1	Has your community begun to collaborate in providing services/working with people with mental illness and co-occurring disorders in the criminal justice system?	X	
2	Does your community have a cross-system collaborative team or task force? <i>If yes, please attach the membership list by agency and/or title, listing mental health providers, criminal justice services, substance abuse services, consumers, family members, elected officials and others.</i> Corrections Planning Board, Stepping Up, Collab Care Meetings (Core team is Coleman Crisis and StarkMHAR representative but other team members depend on providers) Crisis Management Team (needing updated- Erin working on)	X	
3	Does your community provide for cross-training of mental health, substance abuse, criminal justice and other providers? <i>If yes, please list recent programs:</i> CIT for all Stark County Officers Commquest reporting Counselors receive Cross-Training for both mental health and substance use. Commquest's Nurse Practitioner- jail work, and community work. Most staff members are dually certified. Commquest requires new hires to cross train.	X	

Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
4	<p>Does your community have resources identified to work with people with mental illness and co-occurring disorders in the criminal justice system? <i>Please describe:</i></p> <p>Jail Liaisons, Specialized court dockets, Crisis Counselor at Canton Police Department, CTP, Recovery Court, Assessments for court, Methadone dosing in jail, Forensic Program with Coleman</p>	X	
5	<p>Do agencies have dedicated staff or staff time to work with the criminal justice/mental health population? <i>Please describe:</i></p> <p>Forensic Program, Jail Liaisons, Commquest can provide assessments in Jail, Vitalcore Mental Health Staff in Jail, dedicated Probation Officers for Hope Program (Common Pleas Mental Health Court Track), Canton PD has mental health officer, Recovery Court, Polaris Court (Mental Health Court), CTP</p>	X	
6	<p>Does your community gather data about persons with mental illness and co-occurring substance use disorders involved with the criminal justice system? <i>Please describe:</i></p> <p>CIT Report, Mobile Crisis Response, Jail, Heartland Behavioral Health Hospital Reports, Hope Program Stats, Specialized dockets have data reporting requirements</p>	X	
7	<p>Does your community have one or more boundary spanners (individuals whose identified role is to link the criminal justice and mental health systems)? <i>Please describe the position and the person(s):</i></p> <p>Coleman- Two Jail Liaisons TASC- One Jail Liaison CTP, Canton Mental Health Officer, Crisis Counselor at Canton PD, Probation Officers</p>	X	
8	<p>Does your community have mechanisms, such as MOUs or other agreements, to facilitate services, facilitate communication or enhance safety across agencies or systems? <i>Please describe or if possible, provide copies of MOUs:</i></p> <p>CIT MOUs, CIT Forms, Common Pleas Court working with Sheriffs Office, Polaris MOU, Recovery Court MOU</p>	X	
9	<p>Are there any local agencies that have not participated in collaboration efforts? <i>Please describe:</i></p> <p>Smaller Police Agencies not working with CIT or not using/utilizing CIT Forms Local Methadone Clinics not collaborating with Commquest services.</p>	X	

Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
10	<p>Does your community have any jail or court diversion programs at this time? <i>Please describe:</i></p> <p>Polaris Court, Recovery Court, HOPE Program, Chance Program, Star Program, Jail Liaisons, T- Beds, Honor Court, Re-Entry Court, DV Court</p>	X	
11	<p>Does your community have a mental health, drug or other specialty court? <i>Please describe:</i></p> <p>Municipal Court:</p> <ul style="list-style-type: none"> • Polaris Court (Mental Health) with Judge Falvey • Recovery Court (Substance Use) with Judge Werren <p>Common Pleas Court:</p> <ul style="list-style-type: none"> • HOPE Program (Mental Health Track) with Judge Heath • Chance Program (Substance Use) with Judge Farmer • Honor Court (Veterans) with Judge Heath • Re-Entry Court (Judicial Release or Post Release Control) Judge Hartnett • DV Court (Domestic Violence Charges) with Judge Haupt 	X	
12	<p>Does your community have a mechanism (such as an MOU) to facilitate partnerships with probation, parole or law enforcement? <i>Please describe or if possible, provide copies of MOUs.</i></p> <p>CIT MOU Probation Officers working with specific Mental Health clients and caseloads, Common Pleas Court working with Summit Psych</p>	X	
13	<p>Have screening or assessment procedures been instituted in the mental health, substance abuse and criminal justice systems to identify people with mental illness and co-occurring substance use disorders? <i>Please describe:</i></p> <ul style="list-style-type: none"> • Medical Screening at Jail- a form is filled out by arresting agency and this form is passed on to medical staff. Multiple screenings take place with jail staff. Within first few days- mental health will speak with them if mental health/substance use is flagged. • Officers should be screening for MH/SUD for calls/CIT forms • In progress- Mental Health Co-Response screenings are in process of being implemented with Dispatch Centers • At sentencing- Judges can order SUD/MH assessments when necessary • Pre-screen crisis assessment to determine level of care. • Coleman- Outpatient walk in assessments available • Commquest- same day assessments, same day detox services available 	X	

Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
14	<p>Does your community use criminogenic risk assessment tools among the justice involved individuals with mental illness? <i>Please describe:</i></p> <p>ORAS- Ohio Risk Assessment, PSA Risk Assessment Tool- tool to establish bonds, HCR20 for Forensic clients.</p>	X	
15	<p>Have re-entry services been instituted to help people returning to their communities from jail or prison? <i>Please describe:</i></p> <p>CTP- Assessment within 2 weeks of release from Prison T-BEDS SRCCC- Community Based Correctional Facility prior to release to community Community Resource Fair for STAR Program at Jail Jail Liaisons, Re-Entry Coalition, Citizens Circle, Mens Challenge</p>	X	
16	<p>To be successful, what aspects of each agency's culture do the other agencies need to be sensitive?</p> <p>All agencies are bound to own guidelines (HIPPA, Confidentiality, State Guidelines). Mental Health, Substance Use, Court Systems, Law enforcement all have different cultures. Different Level of care- admission criteria for hospitals, treatment facilities vary.</p>	X	
17	<p>Do you have examples, other than what is already listed in this questionnaire, of successful collaboration between criminal justice and mental health? <i>Please describe:</i></p> <p>Coleman Crisis Counselor with Canton Police Department Hope Program/Jail- Medication Protocol to make sure inmates receive medications (Mental and Physical) after release from jail Narcans in community, Good Samaritan Forms/Laws , Stepping Up Group, SOS/QRT Case managers reviewing CIT Forms- outreaching</p>	X	
18	<p>What would you list as your community's strengths?</p> <p>Collaboration, Great Group for Problem Solving- easy to come up with solutions, resourceful, Resource Rich, great wrap around services, insightful and compassionate. Community utilizes Evidenced Based Approaches and based on data, resiliency, and good communication.</p>		
Please check the appropriate box for each and provide descriptions as necessary.		YES	NO
19	<p>What would you list as your community's biggest challenge at this time?</p> <p>Access to services (Medicaid rides, getting from sober living to outpatient care) Integration of care (MH, SUD, Physical Health), data collection, Affordable Housing, Supportive Housing, Workforce shortages in agencies, Transportation to hospital/psych hospital evaluations, Family education/Support services, continuity of care- MAT while in jail and reconnection after release from jail</p>		

COVID-19 ADDENDUM

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

		Yes	No
21	<p>Has the Covid-19 pandemic affected any planning or implementation activities related to Sequential Intercept Mapping? If yes, please explain.</p> <p>Able to meet virtually</p>		X
22	<p>In response to the COVID-19 pandemic, have there been any new responses or changes in your approach to meeting the needs of people with mental illness and co-occurring substance use disorders in the criminal justice system? Please include impacts to law enforcement, jail, court, probation and/or reentry processes.</p> <p>Telehealth is used more (individual and group services), covid screenings/isolation-residential, in jail- screenings, signs/symptoms, processes in system to stop spread, court- video courts/arraignments, Psych at Jail- telehealth services on video with inmate</p>	X	
23	<p>Has the COVID-19 pandemic impacted community-based services, practices or policies in any way? If yes, please explain the nature of the changes.</p> <p>Telehealth, if someone is positive- being placed in psych hospital or inpatient services can become difficult, stopped all jail in-person programing. Commquest has had to shut down an outpatient facility and a detox center in alliance. Formal Policy has been implemented when a client is positive for COVID with goal of no outbreak. Decline of residential services utilization and availability</p>	X	
24	<p>What impact, if any, has the COVID-19 pandemic had on people living with mental illness and co-occurring substance use disorders who are involved in the criminal justice system?</p> <p>More isolation, Access to Services, increased symptoms of anxiety/depression and substance use. (awaiting data from Hannah)</p>	X	

Evidenced Based Practices Check List for Communities

Please check each evidenced based practice that has been implemented in your community

Assertive Community Treatment (ACT)	X
Clozapine Prescribers	X
Cognitive Enhancement Therapy (CET)	X
Cognitive Behavioral Therapy (CBT)	X
Name Specific Practices: Most Community Funded providers	
Cognitive Behavioral Therapy for Psychosis (CBT-P)	X
Dialectical Behavior Therapy (DBT)	X
Eye Movement Desensitization and Reprocessing (EMDR)	X
FIRST Coordinated Specialty Care for First Episode Psychosis	X
Medication Assisted Treatment (MAT)	X
Specify Which Medications Are Available: Vivitrol, Methadone, Suboxone, Acamprosate, Disulfiram	
Mental Health First Aid	X
Motivational Interviewing	X
Peer support specialists	X
Whole Health Action Management (WHAM) Ascend (former foundations)	X
Other: N/A	

Crisis Response Continuum Check List for Communities

Please answer/check each crisis response that is available in your community

What crisis response continuum services are available within your county?	
Agency/location:	
Hours/Limitations/Comments:	
Hotline/24-hour call center (not 911)	X
Crisis center (hub/access point, drop-off, pre-hospitalization screening)	X
Mobile crisis	X
Crisis residential services	
Crisis stabilization	X
23-hour observation- Commquest	X
Crisis residential	X
Peer respite/sobering support	X
Hospitals (psychiatric and medical) and emergency rooms	X