Warren County, Ohio

Sequential Intercept Mapping Report

January 10-11, 2023

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Sequential Intercept Mapping

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Warren 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 Warren County, Ohio on January 10-11, 2023. The workshops were hosted at the Countryside YMCA with Warren County coordination provided by Chief Jeffrey Mitchell with support from Warren County Mental Health and Recovery Board, along with a Warren 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 Warren County achieve its goals

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

Background

The Warren County Mental Health and Recovery Board, Lebanon Police Department, and Warren County Sheriff's Office requested the *Sequential Intercept Mapping* and *Taking Action for Change* workshops. The Sequential Intercept Mapping exercise was meant to aid Warren County with:

- Creation of a map indicating points of interface among all relevant Warren 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 29 individuals representing multiple stakeholder systems including mental health, substance use treatment, human services, corrections, persons with lived experience, support/advocacy, law enforcement, and courts. A complete list of participants is available in the resources section of this document. Teri Gardner, Douglas Powley, and Emily Ribnik 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 Warren 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 Warren 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

Warren County stakeholders and service providers, like those from most other Ohio counties, have been involved in many collaborative projects and relationships over time. There is currently one cross-system collaborative team/coalition identified by the Warren planning team and workshop participants, the Criminal Justice Planning Board. Warren County Board of Commissioners also passed a Stepping Up resolution, a commitment on the part of the county's governmental offices to address the issue of over-representation of individuals with mental illness in the county criminal justice system. If an overarching task force does not currently exist, the SIM participant group could serve as the foundation for a Stepping Up group, and the previously mentioned teams could be incorporated into that structure. The Warren County Criminal Justice Planning Board may be an opportunity to enhance or add to work already being started within the criminal justice system. Some Ohio counties incorporate the Stepping Up Initiative as a subset of the Criminal Justice Planning Board.

Individual with Lived Experience Involvement

The Warren County planning team did not include persons with lived experience but did have one such representative during 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 persons with mental illness and justice involvement, family members 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: Adult Parole, family members of people with lived experience, hospital(s), veterans' services, probate court, and hotline/helpline services.

Data Collection

- The Warren 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
  - Warren County Jail Data for 2022

- Additional data provided by the Criminal Justice Coordinating Center of Excellence included:
  - Warren County Crisis Intervention Team Cumulative Training Report, with Ohio CIT Map – status of Crisis Intervention Team Development in Ohio, September 2022
  - Warren County CIT Officers Roster Project Summary Report, September 2022

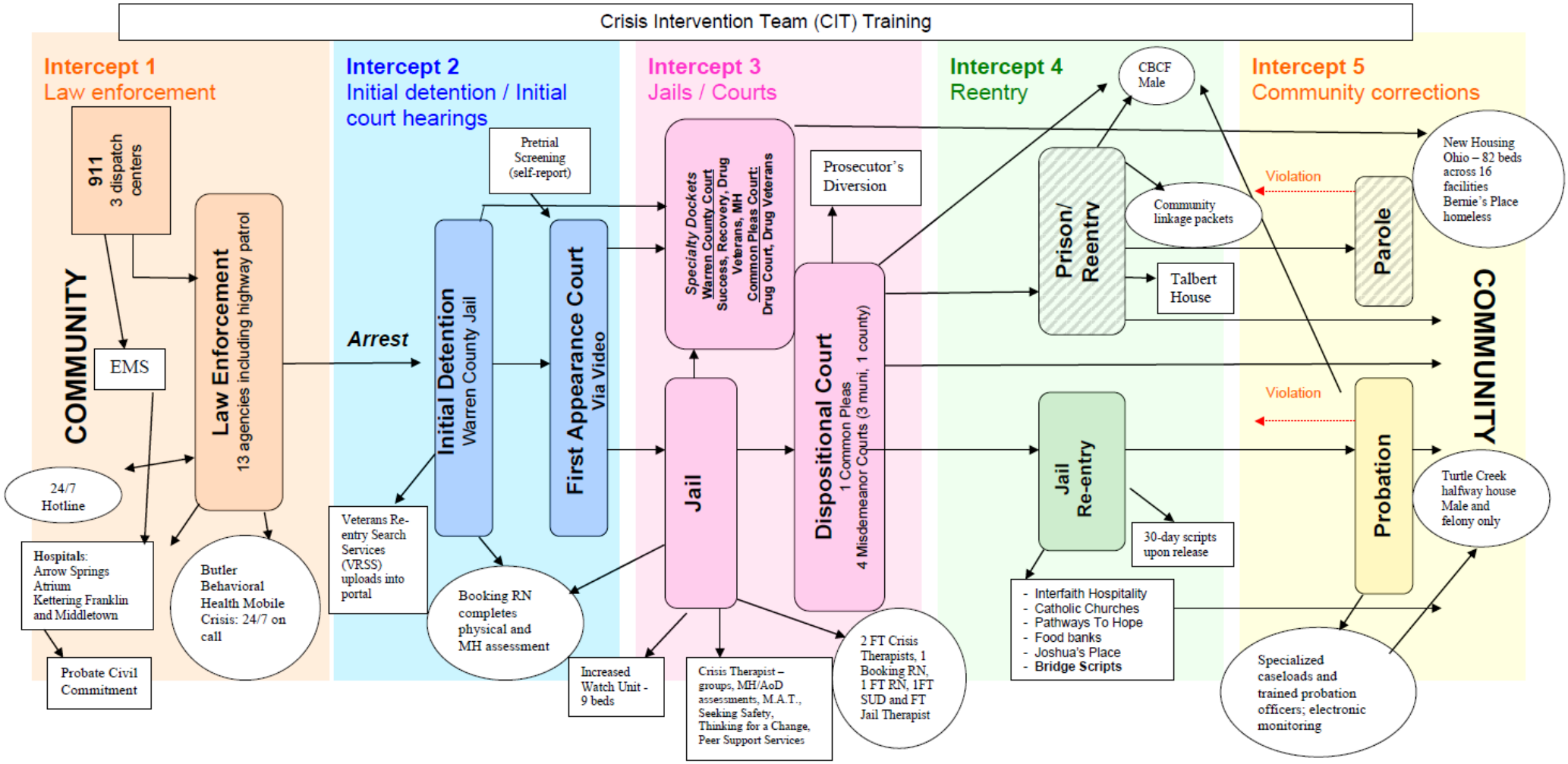
Recommendations

- 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 Warren 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.
- Outreach the key stakeholders that were identified as missing from the workshops to share this report, map, priorities for change, and action plans for their involvement and participation.
- Outreach and engage persons with lived experience, families and/or advocate representatives across all stages of the Intercept Model and Action Plan work groups/committees.

Sequential Intercept Mapping

Warren County, Ohio

Sequential Intercepts for Change: Criminal Justice - Mental Health Partnerships – Warren County, Ohio – January 10, 2023



Warren 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 Warren 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 Warren County Sequential Intercept Map. The cross-systems Warren 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 Warren 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 Warren County.

- NEED Local Hotline
  - still in use while the rollout of 988 is in process
- NAMI Southwest Ohio education and peer support
  - Support Line Monday – Friday 8am – 4pm
  - Family to Family, Peer to Peer, Ending the Silence (middle/high school students, parents and staff)
  - Available in person and online
- Prevention programming in schools
  - SAFE on Main is a local non-profit organization that provides comprehensive services for domestic violence, sexual assault, and human trafficking survivors. Their services include a crisis shelter, court advocacy, therapy, and support groups, and prevention education in schools.
  - Beech Acres is a parenting center. They will also visit schools to provide mental health resources.
- Mental Health First Aid, provided by Beach Acres by request
- Teen Advocacy Committee (TAC)
  - Eight school districts
- Talbert House
  - Open Access (5 days a week, includes walk in services)
- Assisted Outpatient Treatment (AOT) with a limited roster of clients
- Forensic Assertive Community Treatment at Greater Cincinnati Behavioral Health
- Assertive Community Treatment (ACT) at Solutions
- Talbert House
  - Intensive Case Management for severe mental illness (ICM2)
- Medication Assisted Treatment (MAT)
  - Suboxone, Methadone, Vivitrol, Sublocade, Naltrexone

Intercept 0 Gaps

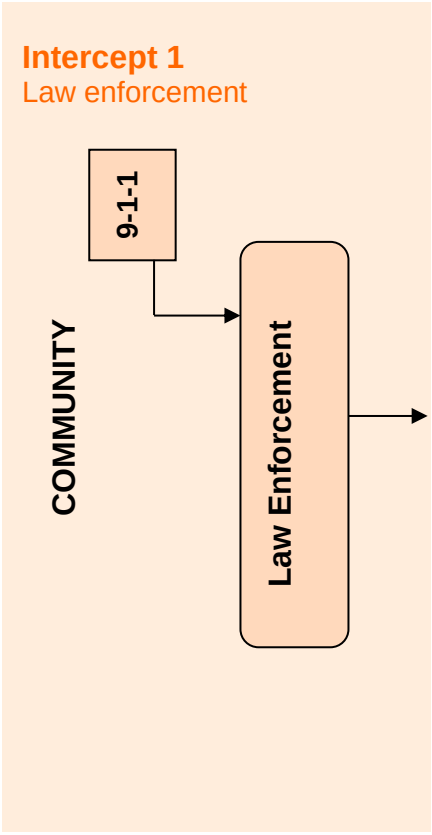
- NAMI in schools
- State Hospital is inaccessible because of wait list/wait time
- County is in footprint of 3 major hospital systems, yet there is not a coordinated response to mental health crises

Intercept 0 Opportunities

- Private hospitals (Lindner and Arrow Springs)
- Warren County school systems

Recommendations

- Expansion of the AOT program



Intercept I: Law Enforcement / Emergency Services

In Warren County, law enforcement is accomplished by the 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

- Warren County has 3 dispatch centers, each of which operate 24/7 and handle police, fire, and EMS coverage: Lebanon, Franklin, and Emergency Services.
- Dispatch uses plain language to capture call information; however, the code EDP (emotional disturbed person) will be used for calls in which an individual is identified as having a mental illness. A report of EDP calls can be pulled from the dispatch system by request.
- Protocol is to dispatch police first, and police determine the need for EMS response. Transportation may be done via police or EMS, but there is currently no definitive process and there is uncertainty surrounding who should transport. There have been situations in which transportation was "debated" on scene between police and EMS.
- Dispatch is currently contracted through each agency. Each dispatch center must dispatch to their area and not out to other jurisdictions. Whether or not Crisis Intervention Team (CIT) officers are dispatched on a call is dependent on the agency's contract with the call center and the coverage of CIT officers on patrol.
- There has been staff turnover in dispatch so there needs to be another CIT training course for new hires.

Law Enforcement and Crisis Intervention Team model

According to the Ohio Peace Officer Training Commission (OPOTC) County Agency Report issued September, 2022, Warren County has 13 Law Enforcement Agencies: Carlisle Police Department, Clearcreek Township Police Department, Franklin Police Department, Hamilton Township Police Department, Harveysburg Police Department (all volunteer; WCSO is back-up), Lebanon Police Department, Lindner Center of Hope Police Department, Mason Police Department, Morrow Police Department (all volunteer; WCSO is back-up), Ohio State Patrol Post 83, Springboro Police Department, Warren County Sheriff's Department (WCSO), and Waynesville Police Department, with an estimated 303 full-time officers.

- Most Law Enforcement Agencies have participated in CIT training, which is a 34-hour course composed of lectures, interactions with persons with lived mental illness experience, mental health services, and scenario-based roleplays including practice of de-escalation skills. Records indicate that 117 full-time officers have completed CIT training. Two law enforcement agencies have not participated in CIT training: Harveysburg Police Department and Morrow Police Department.
- Warren County Crisis Intervention Team training began in 2011. The Sergeant of the Clearcreek Township Police Department is the county-wide CIT Training Coordinator.

- A recent development for CIT in Warren County is the CIT Patrol Officer Training Course being increased from 32 to 34 hours. The CIT Steering Committee has discussed increasing the training to 40 hours to include ride-a-longs and holding Advanced CIT Training. Three law enforcement agencies (Clearcreek, Franklin, and Lebanon) have CIT and/or mental health crisis intervention policies/procedures (on file with the CJ CCoE).

Crisis Services

- Crisis stabilization services are available at Beckett Springs in Butler County.
- Mobile Crisis services are available through Butler Behavioral Health, including:
  - The Child and Adolescent Needs and Strengths (CANS) Model
  - Co-response with law enforcement and social workers/therapists, preferring to see individuals in the community whenever possible.
  - During daytime hours M-F, Mobile Crisis response time is reported to be close to 25 minutes. However, after hours, weekends and on holidays it can be as long as an hour or more. Law enforcement advised that due to the long wait times for Mobile Crisis during these identified times, they do not request services as consistently as they do during weekday business hours. In addition, Mobile Crisis requires that law enforcement stay at the scene with them until there is a resolution/disposition to their assessment.

Hospitals / Emergency Rooms / Inpatient Psychiatric Centers

- The state hospital is Atrium Medical Center in Middletown, OH in Butler County. There are currently 36 psychiatric beds in the hospital.
- There are 4 hospitals in Warren County:
- Arrow Springs – no psychiatric unit; Identified as a location for sexual assault care and evidence collection.
- Lindner Center of Hope – medical center with inpatient psychiatric services but no emergency department (ED).
- Kettering – Middletown 0 Emergency Department (ED) only. They will accept law enforcement transports and set up assessment.
- Kettering – Franklin - Emergency Department only. They will accept law enforcement transports and will coordinate mental health and crisis assessments.
- Law enforcement reported that officers must wait at the EDs to transfer custody when they transport an individual in mental health crisis.
- The Mental Health Recovery Board Serving Warren & Clinton Counties has funded a “hospital specialist” position to assist with discharge and linkage. This staff member will work with multiple hospitals on discharges that will occur for someone returning to Warren County.
- Dohn Street, operated by Talbert House in Wilmington, is the county’s 90-day transitional housing facility.. This facility provides 24-hour observation.

Detoxification

- There is no available detox center separate from hospital emergency rooms. There is withdrawal management at Beckett Springs, but these services must be scheduled. There is no drop-off or walk-in option.
- The closest detox center is in Cincinnati, but law enforcement transportation is unavailable.
- The jail has appropriate staff and resources to manage detoxification at the jail.

Probate

- Probate did not have representation at the workshop.

Veterans

- Warren County Veterans Service Office
- When mobile crisis is dispatched, they ask if individual is a veteran. If the individual identifies as a veteran, VA personnel can also be called to respond to the scene to complete a screening and engage in services.

- Law Enforcement does not document or ask about veterans when dispatched. Warren County Sheriff's Office is working on how to change this.

Intercept I Gaps

- Crisis Drop Off Center
- Question of which agency, law enforcement or EMS, transports after an individual situation is identified as having a serious mental illness (SMI).
- EMS can typically only transport to Arrow Springs (rarely Atrium). The question was raised of who to contact if a community member is not transported to the hospital, and/or what resources EMS can access when on a mental health crisis call without law enforcement
- Coordination of police department protocols with dispatch for CIT, including response protocols for 2 police departments without CIT training
- Gathering CIT data for county

Intercept I Opportunities

- Involving NAMI in CIT
- CIT training for Fire/EMS
- Begin gathering CIT and mental health call information from jurisdiction to report on activity across the county

Recommendations

- Visit with other CIT Coordinators and Programs to identify how they increased their training hours and continued to expand their reach.
- Develop data collection and sharing guidelines across agencies.
- CIT Steering Committee, with enhanced participation, can be an excellent forum for working out transportation protocols and memoranda of understanding among mental health providers, EMS, and law enforcement, associated with community response to individuals with mental illness. Having policies and MOUs in place will also help as the county further builds out crisis response continuum services.

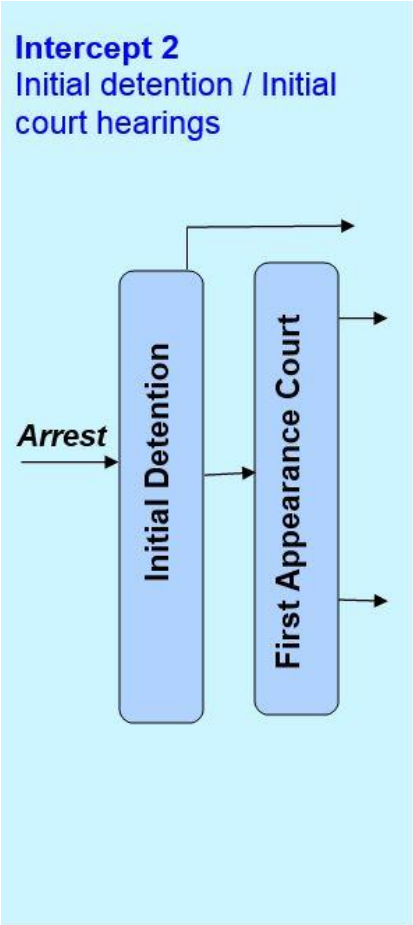
Intercept II: (*Following Arrest)* Initial Detention / Initial Court Hearing

Initial Detention

- The Warren County jail has a capacity of 499. The average daily population is 298 inmates. There are up to 160 female beds with current occupancy at 132.
- As of 2022, the jail underwent a redesign. They added 2 full time crisis therapists, 1 full time substance use disorder therapist, 1 full time therapist, 24/7 booking RN, increased but unknown amount of psychiatry hours, and full-time healthcare. These changes indicate the county is taking a more proactive approach to mental health care instead of reactive.
- In pre-booking, the individual is searched, and their information is entered into the Jail Management System (JMS), Central Squared. A physical and intake screening is completed within 24 hours by an RN at booking. The intake screening has a mental health component that is compliant with NCHC and jail standards. It is not a researched and validated tool, , but reportedly has the same components as the Brief Jail Mental Health Screen and follows a similar pattern and structure. An RN is available 24/7 to conduct the physical and intake screening. The booking RN also manages medication review and distribution. After the physical and intake screening, and a rating of minimum, medium, or high risk, the inmate is placed in housing.
- The intake screening completed by the RN is not entered into the jail information system. These, and other mental health services information, go into Modicor's electronic medical record system (for both medical and mental health services). Jail staff and administration do not have access to this information, not even in aggregate form. The information must be requested from the staff. Jail staff also advised that they will be

informed in case-by-case situations about individuals with mental health needs, typically because of needs or issues.

- A mental health assessment is conducted within 12 days by crisis therapists who are contracted with the medical vendor, Modicor. This is a full-time employee and available 7 days a week.
- "Increased watch" is used for those on suicide watch. They are housed in individual cells on the unit if the individual needs to be segregated. There are nine beds utilized for increased watch and the associated observation.
- The jail posts its inmate list daily and several mental health provider agencies will check it to see if any clients are currently inmates. Current inmates are listed on the "In-Custody Inmate Information" section of the Warren County Sheriff's Office website. Individuals can search by a known last name or may see the list in segments by alphabetical letter.
- The jail staff advised that they ensure the jail is accessible to community based mental health providers 24/7 and have a set of interview rooms that they can utilize to meet with their clients that are in custody.
- It was also noted that family members may bring the jail an inmate's medications.



Arraignment

- Most initial hearings occur within a day or two of arrest via video. County Court (municipal) arraignments occur Monday, Tuesday, Thursday and Friday. Saturday arraignments have been discontinued, unless there is a holiday during the week.
- Legal representation does not take place until pretrial, unless privately retained.
- Pretrial supervision is only available for felony offenses.
- Pretrial release investigations occur with information available to the court for felonies (Municipal Court) but not completed before Common Pleas Court arraignment.
- There is no specific or formal screening process for a referral to a specialty court. A Public Defender or Judge can initiate a referral, and the referral can occur prior to arraignment.

Veterans

- There is limited veteran referral to services and no formal referrals are made at arraignment.
- Jail screening does include a veteran status question and jail roster is routinely uploaded into Veterans Reentry Search Service (VRSS) for VA to review. The VA can then provide services to any eligible inmate. The jail can set up appointments with VA providers and has also explored using iPads for virtual appointments.

Intercept II – Identified Gaps

- Pre-trial release investigation at the municipal court, including mental health and substance use disorder screening with validated tools
- Sharing information across systems and collecting and sharing data. This is an issue at the jail between the staff and the medical/mental health services staff.
- Mental health agencies are understaffed, causing delay in response at time of arrest and arraignment.

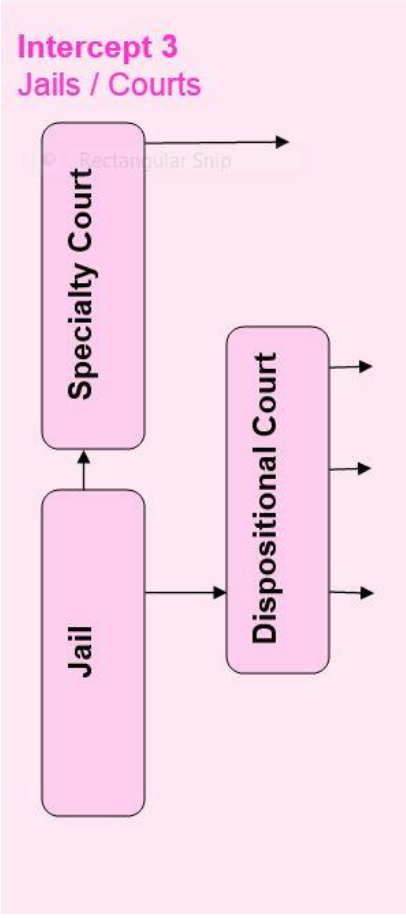
Intercept II – Identified Opportunities

- Increase hospital stay opportunities through increased access to inpatient beds and appropriate lengths of stay
- Explore ways when possible, to share booking information, e.g., mental health screening
- Explore screening opportunities and possible formal process for identification and referral of persons with serious mental illness and military veterans at or prior to initial court hearing

Recommendations

- Reach out to similar counties who have standardized screening for pre-trial and explore opportunities for formalizing a screening process and data collection.
- Develop data collection and sharing guidelines across agencies and within the criminal justice system. It is noteworthy that individuals wait for 12 days for mental health assessment. If a validated screening occurred at booking by non-medical staff, the jail would have data to support their Stepping Up efforts and would be able to refer individuals for a formal screening earlier in the process. In addition, if screening and referral occurred by non-medical staff, the court could be informed at initial hearing of potential mental health and behavioral needs.
- Consider standardizing the informal processes for screening.

Intercept III: Jails / Courts



Jail

- Warren County Jail is a full-service jail and is the only lock-up option. The facility has a rated capacity of 499 persons. The jail manages an average of 14 daily bookings and has an average daily population of 289.
- The average daily number of persons with mental illness is 75. The average number of daily bookings of people with mental illness is three to five.
- Corrections Officers participation in CIT training.
- Booking RN does medical and mental health assessment during the booking process. Per the Jail Administrator, the mental health assessment was created by their company and has the same components as the Brief Jail Mental Health Screen (BJMHS).
- There is a medical doctor in the jail two days a week.
- Solutions crisis counselor staffs the jail seven days a week.
- A boundary spanner works at jail full-time and is responsible for suicide assessments and watches. Mental health staff will see individuals within 24 hours if jail staff determines need for suicide watch.
- Psychiatric Nurse Practitioner works in the jail two hours a week on one day. The Nurse Practitioner can perform medication reinstatement and sees eight to ten people in those two hours.
- Valid prescriptions can be filled for non-mental health system clients, and family can bring in medications. The jail uses a formulary for medications, although the Mental Health and Recovery Services Board will pay for non-formulary if necessary. No benzodiazepines are allowed at jail; substitution is made as soon as possible, and monitoring is provided. Medical protocol is in place for withdrawal or detox. Injectable medications are also used in the jail.
- Substance use therapist runs a group and performs assessments. AA/NA groups are also available (weekends). All groups are co-ed, except for one female only human trafficking class done weekly by the Salvation Army.

- Peer specialist is on site Mon-Fri, 9-5 and offers group using Seeking Safety curriculum. Individual meetings are also available upon request.
- Probation provides Thinking for a Change classes.
- Other groups and individual sessions are available with the jail therapist.

Court

- There is a prosecutor diversion program, however, it is not specific to persons with mental illness. To participate in the Diversion Program, the individual must be a first-time felony offender charged with a non-violent, Felony 4 or Felony 5 offense. Individuals who have misdemeanor records may apply. Acceptance is determined on a case to case basis and in the sole discretion of the Prosecuting Attorney. The individual must enter a plea of Guilty to each charge included in the indictment. This diversion program is not specific to individuals with mental illness and is open to them.
- Intervention in Lieu of Conviction is utilized primarily for drug offenses, with some individuals having co-occurring disorders, but appears to be expanding to those with mental illness. On average, there are 63 Intervention in Lieu assessments conducted each month. It was estimated that 75% of these assessment result in acceptance into the program with the opportunity to avoid conviction upon successful completion of the program.
- Common Pleas Court has two judges. Each judge conducts a specialty docket (drug court and veteran's court).
- Municipal Courts include Franklin, Lebanon, and Mason, each with a judge and magistrates. Warren County Court has two judges.
- The Municipal Courts stated they receive police reports and other information from police contact, but this is not consistent among all courts in the county. The Forensic Evaluation Center represented reported that her office is not notified when an inmate has bonded out and will travel to the jail expecting to see them. Other court staff stated they are not receiving timely information about inmates, including if an inmate is transferred/admitted to the hospital for medical or mental health care.

Specialty Courts

- According to the Supreme Court of Ohio Specialized Dockets Certification Status Sheet, as of March 10, 2022, Warren County has the following specialized dockets:

Judge Name	Jurisdiction	Docket Type	Status 2022
Judge Robert W. Peeler	Common Pleas: General	Drug	Certified
Judge Timothy N. Tepe	Common Pleas: General	Drug - Veterans Treatment	Certified
Judge Gary A. Loxley	County Court	Drug - Veterans Treatment	Certified
Judge Robert S. Fischer	County Court	Mental Health	Certified

- There have been increased efforts to educate attorneys in the county about the specialty courts.
- There is a Boundary Spanner from Talbert House who is an assessor for all the courts. Probation reported they often send this staff member referrals.
- The Drug Court has 20 individuals on the docket. While the length of the program can vary depending on performance and behavior, it typically lasts 18 months. The Mental Health court has 13 individuals on the docket. The program length is 2 years, and this expectation is set when the program is started, however, this may be adjusted due to performance and behavior. The two County Court specialty dockets each have approximately 15 individuals on their dockets at any given time.
- Jail staff can notify attorneys of an inmate's mental health concerns, and in turn the attorney can contact and notify the judge. Probation may also notify the judge after contact with the inmate or if they receive other information about the inmate.

- There has been discussion about removing charges from an individual's record after going through the programs. However, concerns have remained that this removal would lessen the known history of the individual should they return to court in the future.

Veterans

- There is one specialty docket (Drug-Veterans Treatment) in each court.

Intercept III – Identified Gaps

- Informal processes, without formal documentation of processes or procedures, may not preserve institutional knowledge for sustaining initiatives and services
- Common Pleas Mental Health Court

Intercept III – Identified Opportunities

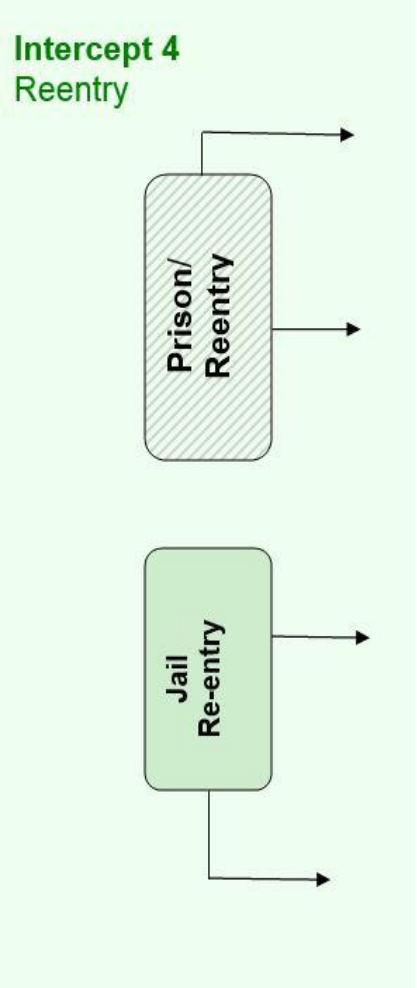
- There were no identified opportunities in this intercept

Recommendations

- Develop data collection and sharing guidelines across agencies.
- Consider standardizing the informal processes for pre-trial services and specialty court referrals to preserve institutional knowledge and ensure likelihood of sustaining practices.

Intercept IV: Prisons / Reentry

Prison



- Community Linkage referrals from the Ohio Department of Mental Health and Addiction Services (OMHAS) regarding individuals with serious mental illness returning from prison to the community are sent to the Mental Health Board and their Thrive program. Through Thrive, the referrals are diverted to the appropriate provider or agency. During state fiscal year 2022, OMHAS completed 25 referrals to Warren County, of which 8 were for individuals with co-existing mental health and substance use disorders.
- Similarly, the Community Transition Program of OMHAS completes screening and assessment for substance use disorders and sends referral packets to Thrive. In state fiscal year 2022, OMHAS completed 28 referrals to Warren County.
- While THRIVE will provide a "warm handoff" to the provider, there is currently no follow up to confirm that the individual attended their appointment with the service provider.
- The APA office is in Lebanon.
- Talbert House has the Community Correctional Center (CCC), the CBCF for male felony offenders with residential care, assessment, treatment, and reintegration programming. Talbert House also runs the Turtle Creek Center, a halfway house for male felony offenders.

Jail

- The Jail Administrator advised that the jail therapist helps with re-entry planning if time allows beyond group and individual sessions, and assessment needs.
- 60% of the inmates are pretrial detainees so release times are unpredictable which is making re-entry coordination difficult.
- Thrive does provide outreach but no further details were given.
- Job & Family Services initiates Medicaid applications prior to release, and individuals are given a 30-day prescription to Walmart to get medication. The waiting list is over 30 days for outpatient psychiatry.
- There is a Bridge Psychiatry program through Butler Behavioral Health Services to help continue refills. It does have a wait but not as long as other outpatient psychiatry and only has eight appointments open per month. Butler Behavioral has the funding for this but cannot find the workforce to fully staff the program and discussed having high no show rate which is another problem; more of these appointments do get scheduled but the no show rate is very high.
- There are no housing in reach services at this time.
- The jail is accessible for probation, parole, and community corrections officers to meet with inmates.
- Jobs program is on its third iteration; Butler Behavioral Health is the partner agency

Intercept IV – Identified Gaps

- Therapy and psychiatry appointment waitlist is more than 30 days.
- Bridge Psychiatry only allows eight appointments a month.
- Housing for reentry from any point is limited and restricted by affordability and location
- Workforce
- Transportation
- Childcare

Intercept IV – Identified Opportunities

- Formal re-entry jail program
- Review no show data and identify procedures for utilizing those resulting appointments

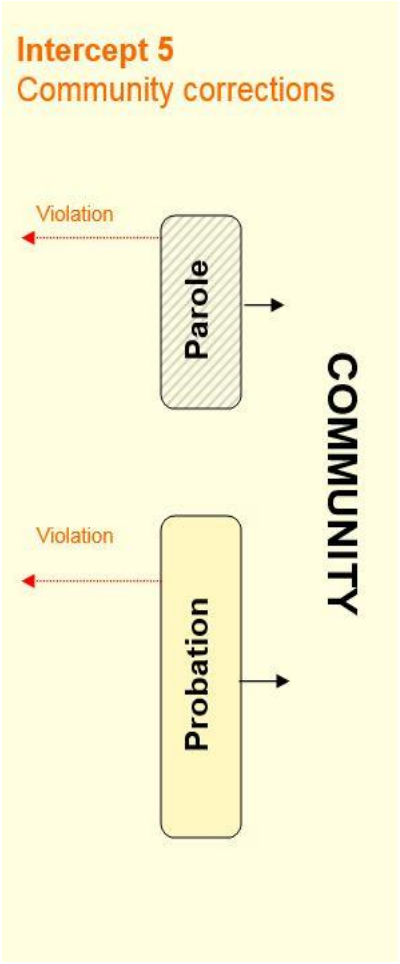
Recommendations

- Utilize the local expertise to begin to develop a formal re-entry process at the jail. Consider starting with individuals who are in jail due to Probation/Parole violations.

Intercept V: Community Corrections / Community Support

Probation

- There are two probation officers in the County Court. Drug -Veterans Treatment Court has one probation officer. There are currently 12-15 participants on each docket. The Mental Health Court has one probation officer with 12-15 participants, and at least 1 peer mentor. The peer mentor is not well utilized.
- There are 23 probation officers in Common Pleas Court. Two are in the Drug Court, one of which specializes in mental health. There is a specialized training for probation officers that includes mental health and trauma specific training. Both an internal and external assessment tool are used to determine eligibility in the program.
- Pathways to Hope provides grief counseling.



Parole

- Parole was not represented at the mapping workshop.
- There is not much of a relationship between parole and probation.

Community Supports

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

- The Mental Health Recovery Board housing contract (New Housing Ohio, Inc.) is for permanent supportive housing for clients of MHRS system, of which 25-30% of individuals being served are criminal justice involved. There are currently 100 individuals in housing and in transitional housing.
    - New Housing Ohio, Inc., operates a shelter within the county, a group home, and permanent supportive housing. Two of their facilities, located in Wilmington, have staffing for 12-16 hours per day. Eligibility for New Housing Ohio, Inc., facilities include being a Warren/Clinton county resident, having a severe mental illness/ severe and persistent mental illness diagnosis, and a housing need.
    - The goal of the Mental Health Recovery Board contracted housing is to ensure that each client will be placed in the least restrictive level of care available within the system. Evaluation of level of care (DLA-20 housing scale) is completed, along with a clinical determination of client's current functioning. In addition, the decision also incorporates providers' ability to wrap appropriate services around client at a lower level of care. At the time of referral to housing services, individuals must be an active client within the Warren County system of care.

- There is one, 14-bed shelter called Bernie's Place with 8 female beds and 6 male beds, of which 25-30% are persons with mental illness. The shelter will not accept an individual with a history of violence or sexual offenses.
- Safe on Main is a domestic violence shelter and does not have restrictions based on criminal charges; however, has other criteria for stays.
- There is no local female CBCF. The only options are out of the county.
- Talbert House includes one community based correctional facility and Turtle Creek halfway house.
- Talbert House is also the transitional housing provider. Their facility has 6 beds (3 male and 3 female). Staff is present 16 hours a day and the usual stay is less than 90 days. Participants noted that this facility is often utilized by individuals being discharged from the hospital or being released from jail settings.
- An organization of churches, Salvation Army, and local foodbanks provide assistance to individuals.

Veterans

- There is a mentor for each veteran that partners with the Veteran Services.

Intercept V – Identified Gaps

- Peer mentor project is not consistent
- Case managers to support specialized dockets
- Housing
- Parole authority coordination

Intercept V – Identified Opportunities

- No identified opportunities

Recommendations

- Consider adding a cross-section of stakeholders to the sharing information work group to increase understanding and explore ways to formalize data sharing across systems. Consider adding a boundary spanner to this group such as Brett Richardson or Chief Mitchel.
- Consider standardizing the informal processes for community linkage.
- Convene stakeholders and persons with lived experience to discuss how to constructively maximize use of peer mentors.

Priorities for Change

Warren County, Ohio

Warren 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. Transportation
2. Housing
3. Workforce
4. Sharing of Information

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

- Crisis drop-off center (intercept 1; 3 votes)
- Therapy and psychiatry appointment wait times is > 30 days (Intercept 4; 3 votes)
- Coordinating police department protocols with dispatch for CIT (Intercept 1; 1 vote)

Parking Lot Issues

- State hospital bed availability

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
Warren County, Ohio | January 10-11, 2023

Participant Roster

Name	Title	Organization	Email
Angel Voris	Clinical Counselor/Clinton County Jail	Talbert House	Angel.Voris@talberthouse.org
Angela Mustard	Chief of Probation/Chief Court Officer	Mason Municipal Court	amustard@masonmunicipalcourt.org
Barry Riley	Chief Deputy	Warren County Sheriff's Office	Barry.Riley@wcsooh.org
Bob Moertle	Police Chaplain	Lebanon Division of Police	bmoertle@lebanonohio.gov
Brett Richardson	Major, Jail Administrator	Warren County Sheriff's Office	Brett.Richardson@wcsooh.org
Chris Smith	Support Services Director	Warren County Board of Developmental Disabilities	Christopher.Smith@warrencountydd.org
Colleen Chamberlain	Executive Director	Mental Health Recovery Board Serving Warren and Clinton Counties	cchamberlain@mhrbwcc.org
Deona Bethart	Batterer's Intervention Facilitator	Safe on Main	dbethart@safeonmain.org
Deontrae Ellis	Director of Court Services	DeCoach Rehabilitation Centre	dellis@decoachrehabctr.com
Derek Harper	Battalion Chief	Lebanon Fire and EMS	dharper@lebanonohio.gov
Dr. Jenny O'Donnel	CEO, Forensic Psychologist	Forensic Evaluation Center	JODonnell@FESC-OH.org
Jamie Clarke	Director of Intervention Services	Safe on Main	jclarke@safeonmain.org
Jane A. Short	Attorney in Private Practice/ MHRB attorney	Law Offices of Jane A. Short, LLC	chelsea.shortlaw@gmail.com
Jeff Rhein	Deputy Director	Mental Health Recovery Board Serving Warren and Clinton Counties	Jrhein@mhrbwcc.org
Jeffrey Mitchell	Chief of Police - Deputy City Manager	City of Lebanon	jmitchell@lebanonohio.gov
Jennifer Nicholson	Assistant prosecutor	Warren County Prosecutor's Office	jennifer.nicholson@warrencountyprosecutor.com
Jesse Madden		Warren County Emergency Services	Jesse.Madden@wcoh.net
Katie Harper	Executive Director	NAMI Southwest Ohio	katie.harper@namiswoh.org
Katie Perdue	Chief Probation Officer	Franklin Municipal Court	kperdue@franklinohio.org
Keith Phillips	Communications Center Supervisor	Lebanon Division of Police	kphillips@lebanonohio.gov
Kristy Whaley	Court Administer, Chief Probation Officer	Lebanon Municipal Court	kwhaley@lebanonohio.gov
Mandy Weist	Court Administrator	Franklin Municipal Court	aweist@franklinohio.org
Marty Hubbell	Lebanon Municipal Court Judge	Lebanon Municipal Court	mhubbell@lebanonohio.gov
Mary Velde	Chief Probation Officer	Warren County Courts	Mary.Velde@co.warren.oh.us

Mike McCutchan	Operations Captain	Lebanon Division of Police	mmccutchan@lebanonohio.gov
Morgan Liddic		Butler Behavioral Health Services	mliddic@bbhs.org
Richard Jones	Community Member		Jonezesconsulting@gmail.com
Robert Fischer	County Court Judge	Warren County Court	Robert.Fischer@co.warren.oh.us
Scott Boone	President/CEO	New Housing Ohio	boone@newhousingohio.org

Priority Area 1: Transportation				
Objective		Action Step	Who	When

1	A county-wide fully functional CIT Team
	
	- Creates a "3rd bucket" from just medical vs criminal
	- Reduces R visits to result in better outcomes
		- Analyze data to determine peak hours of need
		
		- Collaborate with Butler County
		  o Sheriff's Office
		  o Fire/EMS
		
		- Identify costs
		
		- Identify funding sources
		
		- Reconvene
		
		- Develop an MOU
			- Jesse Madded
			
			- Marty Hubbel and Barry Riley
			- Derek Harper
			
			- Katie Harper
				Before reconvene
				
				Before reconvene
				
				Hold
				
				Hold
				
				1 month
				
				Hold

2	More public education surrounding local crisis process	- Public awareness campaigns to divert 911 calls		Hold

Priority Area 2: Housing				
Objective		Action Step	Who	When
1	Active Homeless coalition (short)	- Who and purpose	- Scott Boone – who	
2	Public education campaign (medium)	- Public service announcements - Visual information	- United Way - Interfaith	
3	Permanent supportive Housing (long) – those difficult to place	- Long-term sustainability (funding)	- Scott Boone and Colleen Chamberlain	
4	Warm weather homeless count	- Create group and purpose	- Interfaith and City of Lebanon	
5	Incorporate a judge into this group	- Make invite	- Jeff Mitchell	
6	Define the homeless mental health population	- Identify partners	- Who are they	

Priority Area 2: Workforce Professionals				
Objective		Action Step	Who	When
1	Create a workforce team	- Contact Matt Schnippkey - Contact Matt Fetty - Data about job vacancies	- Richard - Jeff	- 1st meeting in mid-February via Zoom
2	Focus on retention for criminal justice and mental health related jobs	- Exit interview		
3	Create a process to re-engage	- Could you get former employees back?		
4	Criminal Justice Planning Board Workforce	- Email criminal justice board 1/12/2023	- Board	- April 23rd quarterly meeting
5	Reach out to community municipal league area progress			
6	Onboarding			

*Try to have 6 month-1 year update

Priority Area 4: Information Sharing				
Objective		Action Step	Who	When
1	Increase utilization of existing resources (Criminal Justice Board)	- Expand participant list - Increase frequency of meetings	- Angela/Jeff Rhein	April 1, 2023
2	Explore implementation of OCSS	- Look into funding and availability	- Kimberly Lee /Municipal Courts	April 1, 2023
3	Share mental health intake screen results between jail and courts	- Generate release of information to be signed by inmates for sharing of information - Identify and introduce points of contact between jail and the courts	- Chief Deputy Barry Riley	- January 31, 2023
4	Add CIT disposition code on law enforcement report	- Reach out to telecommunicators to update report ▪ - Follow up with local law enforcement to get everyone on the same page for use	- Wally Stacey	- July 1, 2023

Appendix

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

Person Completing Form *(name/title)*_____

Time period being reported_____

	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?	499	No	
What is the average daily total population of the jail?	289		
What is the average number of total daily bookings?	14		
What type of automated system is used to collect Jail Booking, classification, health and release information?	Tri-Tech Inform Jail		
Please provide the number and types of booking that are used for the following categories: *(If unable to provide objective data on booking types, please provide average percentage of each population)*			
Pretrial Misdemeanor	207		Average for Month
Pretrial Felony	85		Average for Month
Probation Violation	34		Average for Month
Sentenced local	16		Average for Month
Sentenced awaiting transport	4		Average for Month
Other	44		Average for Month
Is there a separate facility or unit for mental health? If not, where are persons with mental illness housed?	No, Summitt Behavioral if cannot be housed in jail.		
How many people are identified as having mental health issues?			
By jail booking staff			
While incarcerated (by corrections officers, health staff or others)			

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
Does your Booking/Automated system allow the Jail to identify or flag defendants with Mental Illness for future booking information?	No		
What is the average daily population of persons with mental illness?	75		
What is the average number of daily bookings of people with mental illness?	3-5		
What percentage of the pre-trial population represents persons with mental illness?	Unknown		
What percentage of the sentenced population represents persons with mental illness?	Unknown		
CROSS TABULATION OF MULTI-SYSTEM DATA *For the entire population of persons booked into jail during the identified time period (open or closed cases):*			
Is Jail Booking information shared on a regular basis with public funded Mental Health, AOD or Developmental Disability Agencies?---if so how?			
How many were known to the publicly funded mental health system?	Unknown		
How many accessed acute crisis services during the specified reporting period?	40		
How many were known to the publicly funded substance abuse treatment system?	Unknown		
How many were known to the Developmental Disabilities system?	Unknown 3		
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			
Felonies			
Violent Behavior			
Violations of Probation			
Frequency - How many arrests / bookings per person? (average)			
Length of stay in the jail for each episode of incarceration (average)			
DISCHARGE / REENTRY of individuals with mental illness or co-occurring disorders:			
How many people left the jail with financial benefits or entitlements in place?			
How many people left the jail with a shelter as the identified residence?			

	insert number	Has this metric been affected by COVID-19? (Yes / No / I don't know)	Comments
How many people had no known residence?			
How many people left the jail with an appointment at a mental health or other treatment service?			
How many people with mental illness had contact with a helping professional from the community to facilitate reentry?			

Planning for *Sequential Intercept Mapping*

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: Warren County

Contact Person: Mary Velde **Phone** 513) 695-2517 **Email** mary.velde@warren.oh.us

	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? *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.*		X
3	Does your community provide for cross-training of mental health, substance abuse, criminal justice and other providers? *If yes, please list recent programs:*		X
4	Does your community have resources identified to work with people with mental illness and co-occurring disorders in the criminal justice system? *Please describe:* Community providers	X	

	Please check the appropriate box for each and provide descriptions as necessary.	**YES**	**NO**
5	Do agencies have dedicated staff or staff time to work with the criminal justice/mental health population? *Please describe:*		X
6	Does your community gather data about persons with mental illness and co-occurring substance use disorders involved with the criminal justice system? *Please describe:* Jicaid : Drug (1 agency)	X	
7	Does your community have one or more boundary spanners (individuals whose identified role is to link the criminal justice and mental health systems)? *Please describe the position and the person(s):* Mathew Gravely - Court Liason	X	
8	Does your community have mechanisms, such as MOUs or other agreements, to facilitate services, facilitate communication or enhance safety across agencies or systems? *Please describe or if possible, provide copies of MOUs:* Unknown		
9	Are there any local agencies that have not participated in collaboration efforts? *Please describe:* Unknown		
10	Does your community have any jail or court diversion programs at this time? *Please describe:* SAP	X	

	Please check the appropriate box for each and provide descriptions as necessary.	YES	NO
11	Does your community have a mental health, drug or other specialty court? *Please describe:* Mental Health Veterans	X	
12	Does your community have a mechanism (such as an MOU) to facilitate partnerships with probation, parole or law enforcement? *Please describe or if possible, provide copies of MOUs.* unknown		
13	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? *Please describe:* Screen through Attorney, Judge, Prosecutor & PO for Mental Health Docket	X	
14	Does your community use criminogenic risk assessment tools among the justice involved individuals with mental illness? *Please describe:*		X
15	Have re-entry services been instituted to help people returning to their communities from jail or prison? *Please describe:*		X
16	To be successful, what aspects of each agency's culture do the other agencies need to be sensitive? Mental Health Meds while in Jail		

	Please check the appropriate box for each and provide descriptions as necessary.	YES	NO
17	Do you have examples, other than what is already listed in this questionnaire, of successful collaboration between criminal justice and mental health? *Please describe:*		X
18	What would you list as your community's strengths? Community Leaders Passionate about Mental Health		
19	What would you list as your community's biggest challenge at this time? Lack of providers wait-times		

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	Has the Covid-19 pandemic affected any planning or implementation activities related to Sequential Intercept Mapping? If yes, please explain.		
22	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.	X	
23	Has the COVID-19 pandemic impacted community-based services, practices or policies in any way? If yes, please explain the nature of the changes. lack of providers	X	
24	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? lack of services, providers, longer wait times	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)	
Clozapine Prescribers	
Cognitive Enhancement Therapy (CET)	
Cognitive Behavioral Therapy (CBT) **Name Specific Practices:**	
Cognitive Behavioral Therapy for Psychosis (CBT-P)	
Dialectical Behavior Therapy (DBT)	
Eye Movement Desensitization and Reprocessing (EMDR)	
FIRST Coordinated Specialty Care for First Episode Psychosis	
Medication Assisted Treatment (MAT) **Specify Which Medications Are Available:** Suboxone, Methadone	X
Mental Health First Aid	
Motivational Interviewing	
Peer support specialists	X
Whole Health Action Management (WHAM)	
Other:	

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)	
Mobile crisis	
Crisis residential services	
○ Crisis stabilization	
○ 23-hour observation	
○ Crisis residential	
○ Peer respite/sobering support	
Hospitals (psychiatric and medical) and emergency rooms	X