



BOARD OF SUPERVISORS
AGENDA LETTER

Agenda Number:

Clerk of the Board of Supervisors
105 E. Anapamu Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Department Name: Sheriff
Department No.: 032
For Agenda Of: October 6, 2015
Placement: Departmental
Estimated Time: 30 minutes
Continued Item: No
If Yes, date from:
Vote Required: No

TO: Board of Supervisors
FROM: Departments: Bill Brown, Sheriff – Coroner
Contact Info: Acting Chief Deputy Julie McCammon, 681-4246
SUBJECT: Mental Health Services: Current County Jail and Future Northern Branch Jail

County Counsel Concurrence

As to form: Yes

Auditor-Controller Concurrence

As to form: No

Other Concurrence: N/A

As to form: N/A

Recommended Actions:

Review and file a presentation on Mental Health Services currently being provided in the County Jail, and those which will ultimately be provided in the Northern Branch Jail upon its completion.

Summary Text:

Provide a summary of the treatment and continuity of care for the mentally ill offender while in custody. This is a review of current mental health services; and those that will be provided upon the completion of the Northern Branch Jail (NBJ). The focus is on how the design and infrastructure of the NBJ provides the opportunity for much needed improvement for medical and mental health care when compared with our current facility.

Background: Due to CDCR's (*California Department of Corrections and Rehabilitation*) inability to effectively treat mentally ill inmates, coupled with a paradigm shift in prison sentences, the State of California was sued in two class action suits: *Coleman v. Brown* and *Plata v. Brown*. These cases alleged Eighth Amendment violations in California's prison system based on insufficiencies in mental health care (*Coleman*) and medical care (*Brown*). These cases were both filed by the Prison Law Office (*PLO*), which led to the formation of Assembly Bill (*AB109*) – the Public Safety Realignment Act.

In these cases, the Federal District Court and Supreme Court respectively attributed the insufficiencies in mental health and medical care to the overcrowded prison system. Subsequently, the State legislators responded to this finding with the creation of *AB109* to significantly reduce the California prison

system's population. However, AB109 did not mention the mentally ill even though the mentally ill offender was one of the driving forces behind this legislation.

There are many studies regarding the mentally ill recidivism rate, however Professor Amy Blank Wilson¹ published a paper citing how the mentally ill inmates are often caught in the revolving door of recidivism, and may return to incarceration. In her study the percentage of recidivism for mentally ill inmates are between 54% and 68%, depending on their co-occurring mental illness.

After four years, Wilson's team found different rates of recidivism among different groups of inmates:

- 54% re-incarceration for people with severe mental illness;
- 66% for those with substance abuse problems; and
- 68% for those with co-occurring mental illness and substance abuse.

Analysis of the number of people readmitted to the jail found that people who had a diagnosis of mental illness alone had the lowest number of readmissions to jail in the 4-years after release with 54% having at least one readmission after their initial release. People with dual diagnoses, in contrast, had the highest number of readmissions to jail during the study time frame, with 68% having at least one readmission during the 4-years after release.

Substance abuse is a driving force behind the recidivism of people with mental illness leaving a US urban jail. These findings illustrate the importance of developing interventions that provide timely access to intensive co-occurring substance abuse and mental health treatment programs during and immediately following the individual's release.

On any given day, approximately 120 inmates are prescribed and taking mental health medications in our County Jail. Because of their criminal behavior coupled with their mental illness, medical needs and substance abuse, they require specialized services and coordinated care. This number represents approximately 13% of the overall inmate population.

Currently in the Santa Barbara County Jail the mentally ill offenders are evaluated by Custody Medical Professionals (*Corizon, Inc.*) to establish the appropriate treatment and continuity of care. The mentally ill inmate is provided the appropriate medication and medical treatment, as well as connecting them with the resources needed for their transition back into the community. This is done with the assistance of a Sheriff's Discharge Planner, who networks with the Public Defender's Discharge Planner, Probation and ADMHS' Forensic Liaison. Together this team coordinates specific needs and services for this type of inmate. They assist with obtaining identification documents and signing inmates up for eligible insurance (*i.e., Medi-Cal, SSI, SSDI, housing benefits, etc.*); arrange safe transportation upon discharge, including taxi service; make referrals and schedules first appointments (*i.e., Mental health and medical services*); coordinate medications for release and interim; and, finally, coordinate with the County's specialty treatment courts (*i.e., Veteran's, Mental Health and Homeless Court*).

The Northern Branch Jail Project: The services listed above will be implemented in the Northern Branch Jail. However, the design and infrastructure of the AB900 element of the new jail will provide

¹ Amy Blank Wilson, Jeffrey Draine, Trevor Hadley, Steve Metraux, Arthur Evans (2011). Examining the impact of mental illness and substance use on recidivism in a county jail. *International Journal of Law and Psychiatry*, v34, n4, July-August, p264-268

much needed improvement for medical and mental health care. This is done through more efficient design function and space. The 32 “special use beds” will be located in a wing called the “Health Care Housing Unit.” There will be an emphasis in this wing, as well as throughout the jail, of not just “locking down inmates” but rather to focus on their reentry into society. To accomplish this, their time in custody will be spent learning living skills, reconnecting with family, obtaining and connecting with resources and lastly, preparing their integration into the community.

Specifically, in the Health Care Housing Unit, the environment provides less negative stimulation from other inmates. Having single cell space, in addition to natural light, is helpful in maintaining the inmate’s emotional well-being. Inmates will have access to more private and personal space, while being provided opportunities to participate in therapeutic group sessions in nearby rooms, or via professional video visitation connections.

Communication and interaction with family members, either through video visitation or physical contact, is also essential. The Northern Branch Jail facility will incorporate advanced communication technology and have several family reunification spaces available for this type of interaction.

Separate rooms within the Health Care Housing Unit, can be used by the Sheriff’s Discharge Planner, Public Health, ADMHS’ Discharge Planner, Counselors, etc., to meet privately with the inmate. Lastly, licensed mental health and medical staff will have offices adjacent to this wing for easy and quick access.

Fiscal and Facilities Impacts: The majority of mental health services will be provided through a contracted health care provider. Current cost for the combined medical and mental health services in the jail is 4.8 million per year.

Since 2009, the Sheriff’s Office has employed a Discharge Planner that is paid out of Inmate Welfare Funds. However, through AB109 the Community Corrections Partnership (*CCP*) funds an additional Discharge Planner, who works out of the Sheriff’s Office.

In addition to the Discharge Planner, the Inmate Welfare fund pays for 4 Alcohol and Drug Counselors, 1 Discharge Planner, 1 Inmate Programs Supervisor, 1 Community Outreach Coordinator, and 1 Department Business Specialist II.

Inmate Welfare Fund also pays for the following: Educational expenses (*GED testing, vocation testing and supplies*) televisions, recreational equipment for inmates, newspaper subscriptions, library expenses, legal research, indigent transportation (*Taxi program, bus tokens, Clean Air Express, Greyhound*), print shop operational supplies, commissary office expenses, Sheriff Treatment Program (STP) curriculum, case management system, among other items.

The Sheriff’s Office plans to partner with various educational, social services, medical/mental health, vocational institutions and community based organizations to leverage existing resources and provide their services in the new jail environment.

Special Instructions:

Clerk of the Board: Please send a copy of the Minute Order to Acting Chief McCammon, Sheriff’s Office, Custody Operations.

Attachments:

Attachment A: Sheriff's Office PowerPoint presentation

Attachment B: Santa Barbara Sheriff's Office Jail Inmate's Services Overview; Programs Unit

Authored by:

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