County Cour	sel Concurrence	e	Auditor-Cor	troller Concurrence	
SUBJECT:		Services Oversight and San - Reducing Crimina		nmission (MHSOAC) <i>for People with Mental</i>	_
	Director(s) Contact Info:	Lieutenant Kevin H	uddle (x4136)		
FROM:	Department	Sheriff Bill Brown (x4290)		
то:	Board of Superv	isors			
			If Yes, date from: Vote Required:	Majority	
			Continued Item:	No	
			Estimated Tme:	30 Minutes	
			Placement:	Departmental	
			For Agenda Of:	032 May 1, 2018	
			Department Name: Department No.:	Sheriff's Office	
OS CALIFORN	105 E. Anap Santa B	Board of Supervisors bamu Street, Suite 407 arbara, CA 93101 05) 568-2240			
	N	NDA LETTER			
SANTA	BOARD (JF SUPERVISORS	Agenda Number:		

As to form: Yes

<u>Auditor-Controller Concurrence</u> As to form: N/A

Other Concurrence: N/A As to form: N/A

Recommended Actions:

That the Board of Supervisors:

- a) Receive and file the Mental Health Services Oversight and Accountability Commission (MHSOAC) *Together We Can* report; and
- b) Determine that the approval of the recommended action is not subject to the California Environmental Quality Act (CEQA) pursuant to CEQA Guidelines Section 15378 (b) (5), since the recommended action is a government administrative activity which does not involve commitment to any specific project which may result in potentially significant physical impact on the environment.

Summary Text:

This item is on the agenda to provide information from the MHSOAC on their comprehensive *Together We Can - Reducing Criminal Justice Involvement for People with Mental Illness* – report published in November 2017.

Background:

The Mental Health Services Oversight and Accountability Commission (MHSOAC or the "Commission"), an independent state agency, was created in 2004 by voter-approved Proposition 63, the Mental Health Services Act. The 16-member Commission is composed of one Senator, one Assemblymember, the State Attorney General, the State Superintendent of Public Instruction, and 12

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public members appointed by the Governor. By law, the Governor's appointees are people who represent different sectors of society including individuals with mental health needs, their family members, law enforcement, education, labor, business, and the mental health profession. California voters created the Commission to provide oversight, accountability and leadership to guide the transformation of the California mental health system. The Commission fulfills this charge by advising the Governor and Legislature, conducting research and evaluation, administering mental health triage personnel grants, and reviewing and approving county innovation projects.

Other Commission responsibilities include:

- Ensuring public mental health funds are spent in the most cost-effective manner and that services are provided in accordance with recommended best practices;
- Developing strategies to eliminate the stigma associated with mental illness;
- Ensuring that the perspectives of California's diverse communities, as well as people suffering from mental illness and their families, are included in all Commission deliberations and actions; and
- Undertaking special research projects to document problems with California's mental health care delivery system and produce recommendations for reform.

In 2010, Governor Brown appointed Santa Barbara County Sheriff Bill Brown to the Commission. The Commissioners are as follows:

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Commissioners					
TINA WOOTON** Chair	BILL BROWN* Sheriff	SEBASTIAN RIDLEY-THOMAS Assemblymember			
JOHN BOYD, Psy. D. Vice Chair	KEYONDRIA BUNCH, Ph.D.	DEANNA STRACHAN-WILSON RICHARD VAN HORN** Former Commissioner * Subcommittee Chair ** Subcommittee Member			
RENEETA ANTHONY	ITAI DANOVITCH, M.D.				
	DAVID GORDON				
LYNNE ASHBECK	KATHLEEN LYNCH				
KHATERA ASLAMI-TAMPLEN	MARA MADRIGAL-WEISS				
JIM BEALL Senator	GLADYS MITCHELL				
	LARRY POASTER, Ph.D.				

TOBY EWING MHSOAC Executive Director ASHLEY MILLS Criminal Justice and Mental Health Project Lead

After an eighteen month review, the Committee prepared the attached report, *Together We Can*, which looked at the intersection of mental illness and the criminal justice system. The Committee believes this report encapsulates the issues, contains a creative and achievable plan to reduce the number of mentally ill persons entering California's jails, and a roadmap to providing better mental health care and treatment for those who must be kept in custody. The Committee recognizes that fiscal and human resources in all forms of government are in short supply, and that in many cases they are stretched to the limit. But the

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Committee understands how communities facing similar challenges have come together to solve parts of this vexing problem. Their approaches were varied, but what they had in common was a collaborative spirit of good will and a resolve to combine forces, share their resources and solve the problem collectively.

The Report contains six recommendations, with a focus on collaboration in creating change.

Recommendation 1 | California's mental health agencies, in partnership with law enforcement and others, should have a comprehensive, prevention-focused plan that reduces the incarceration of mental health consumers in their communities.

Too many mental health consumers, particularly those from African American, Latino, Native American, and LGBTQ communities, end up in jail because of unmet needs and system inequities. A robust, prevention-oriented system can reduce this unnecessary harm. The commitment to diversion should continue but there also must be a focus on preventing contact with the criminal justice system. Local services should be aligned through comprehensive planning to address unmet needs before they reach the attention of law enforcement. Community-based programs and facilities must be available and accessible to support diversion.

Recommendation 2 | The Board of State and Community Corrections should facilitate a collaborative effort with counties to identify, develop, and deploy services and strategies that improve outcomes for mental health consumers in jail, including universal screening for mental health needs at booking and enhanced training for custody staff.

California's jails are not equipped to serve mental health consumers. Diversion should be prioritized but counties need more effective in-custody options to ensure they can provide appropriate and necessary services for those who cannot be diverted. Universal screening for mental health and substance use disorders at booking, along with timely follow-up assessments, must be mandatory. Revisions to the mental health curriculum for correctional staff training should continue, and should include strategies to support correctional staff mental health and address issues of stigma, discrimination, and implicit biases.

Recommendation 3 | To reduce the backlog of people found incompetent to stand trial, California must maximize diversion from the criminal justice system. For people who cannot be diverted and are found incompetent to stand trial, the state and counties should expand options for restoring competency.

A large and growing number of people found incompetent to stand trial because of unmet mental health needs are forced to spend months in jail awaiting services necessary for their cases to proceed. The state and counties should have an array of options to provide competency restoration services to people found incompetent to stand trial so that these Californians do not wait unnecessarily in jail.

Recommendation 4 | The Council on Criminal Justice and Behavioral Health should fortify its efforts to champion collaboration among state agencies to support local prevention and diversion of mental health consumers in the criminal justice system.

California has not put in place a statewide, systemic approach for prevention and diversion to reduce criminal justice involvement for mental health consumers and improve outcomes. California's counties

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are well-positioned to develop more effective responses to the increased number of people with unmet mental health needs in jails. Yet the state should clear the path for more effective responses, by providing clarity regarding state and federal law, facilitating information sharing, promoting best practices, and identifying and addressing barriers to innovation, among other tasks.

Recommendation 5 | The California Health and Human Services Agency should reduce or eliminate barriers so that data and information technology are used to drive decision-making, identify service gaps, and guide investments in programs to reduce the number of people with mental health needs in the criminal justice system.

Data is a critical tool in decision-making and service delivery, but state and local agencies are not effectively harnessing its power to improve outcomes for those in need. When data is not collected or available, people within a system become invisible and problems are minimized, especially for people disproportionately impacted by criminal justice involvement, such as members of African American, Latino, Native American, and LGBTQ communities. However, there are significant technological, cultural, and legal barriers to sharing data in ways that protects confidentiality. The state should develop solutions that allow agencies to legally integrate and leverage data to build responsive systems, provide better case management, and continuously improve services.

Recommendation 6 | The State, in partnership with the counties, should expand technical assistance resources to improve cross-professional training, increase the use of data and evaluation, and advance the dissemination of best practices, including community-driven and evidence-based practices.

To build effective prevention and diversion systems, professionals in the criminal justice and mental health fields will need new knowledge, skills, and abilities to better serve mental health consumers and their communities. The state and counties should jointly improve training and technical assistance to ensure professionals are trained and cross-trained to provide appropriate responses and quality services reflecting the needs and diverse cultures of clients. Evaluation and dissemination of best practices, including community-driven and evidence-based practices, are essential to continuous quality improvement.

The Committee strongly believes that now is the time for counties, along with other State and governmental partners, to implement these recommendations with an emphasis on the following three priorities:

- Collaboration and combination of resources to effectively address the problem. For example, The Stepping Up Initiative is a proven vehicle that can help communities come together to facilitate these efforts.
- Provision of crisis services and other alternatives to custody for mentally ill persons. This priority requires having appropriate places and programs that people suffering from mental illness can be diverted to.
- Expansion of jail-based and community-based restorative services for persons found Incompetent to Stand Trial (IST).
 This is a state-wide problem that congests our courts and overcrowds our jails. Effective prevention and early diversion strategies can reduce the number of people found incompetent to

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stand trial. The County should also consider implementing or expanding both community-based and jail-based competency restoration programs.

Fiscal and Facilities Impacts:

Budgeted: N/A

Attachments:

MHSOAC Together We Can November 2017 Report

Authored by:

Lieutenant Kevin Huddle, Sheriff's Office (x4136)