

Criminal Justice Coordinating Council (CJCC)

December 13, 2012

8:00 a.m.

VM-CCCU-CC

CJCC Members Present (10): Judge Gamble, Tom Hockensmith, Bill McCarthy, Judy Bradshaw, Valorie Wilson,
Sally Kreamer, Lynn Ferrell, Marilyn Lantz, Gary Mikulec, John Sarcone

CJCC Members Absent (1): Angela Connolly

CJCC Coordinator (1): Gary Sherzan

Others Present: Sue Elliott, Michael O'Meara, Dave Higdon, Dave Knight, Doug Phillips, Frank Marasco, Dillon Kraft, Nancy Robinson, Teri Sommerlot, Nick Lemmo, Linda Ford, Rox Laird, Tony Tatman, Curtis Pione, Becky Buch, Tom Jackowski, Larry James, Anne Sheeley, Mollie Mertens, Barb & Bob Glass, Jean Basinger, Marty Ryan, Stephanie Farkes-Lee, Pat Coughlin, Jennifer Miner, Teresa Bomhoff, Chris Gammell, Jeanette Minor.

Approval of the October 25th Minutes

Moved by Mikulec, Seconded by Sarcone to approve the October 25, 2012 minutes.

I-Leads Update – Frank Marasco (handout)

As of Monday, in-facility population was 870, today is 854. They are seeing a downward trend. Other numbers remain the same for 2012. They are on track for a record year, second year in a row, with bookings and releases. This year has been a record year, but staff is able to maintain. Frank highlighted two new reports that have been created "Fully Released Inmates by Release Reason" and "Polk County Sheriff's Office Calls for Service-Mental Health Only." The average length of stay in jail is 19 days. Average lengths of stay data is calculated based on actual time spent in jail (i.e. from booking to release). We are up over 9 percent over last year on mental health calls. They make up 1.6 percent of the total calls. Staff is working on additional mental health reporting (Polk County only).

Pre-Trial Release – Teri Sommerlot (handout)

Teri said they are working with Polk County Information Technology on a data collection project. They have been very receptive. Nothing is ready yet, but there will be a better method for collecting data with this project.

Statistics for Fifth Judicial are very consistent month to month, nothing significant to report.

The Pre-Trial Release Program has two types of release: the supervised release program and the no supervised release program. Even though there is no supervision, clients are interviewed and released but clients are called with reminders of court dates and to monitor assessments they have received. In November there were 240 active cases of pre-trial release with no supervision if they remained in jail would have been 5,771 number of jail days. That is a significant number of jail days we are saving by getting them out on pretrial release. The supervised program requires clients to meet regularly with an

officer, testing, curfews, home visits, etc. In November there were 54 people out on this program. This does not include special units population (sex offenders, etc).

Our risk assessment program is outdated. We need an updated and validated program/instrument. Fifth Judicial has been asked to participate in a pilot study. Through a leading researcher on pre-trial release in the nation, Dr. Marie VanNostrand, we became aware of a foundation that is doing a study on creating a pre-trial risk assessment that will be used nationwide. This has never been done. They hope to have an updated risk assessment tool available by the end of January. We will be contacted after that. Supervisor Hockensmith asked how long the pilot will last. We are not sure how long the pilot will last. We will be piloting it and the state of Delaware will be piloting it. They have an aspect that looks at violent offenses. Fifth Judicial is excited to be a part of this.

Jail Diversion – Dave Higdon (handout)

We are still linking clients to existing providers is the primary thing that jail diversion does and keeping a watch on the “other/none refused” clients. Days by Charge Class: Misdemeanors are 40% of days year to date. This represents 63% of people with misdemeanors. Jail days connected versus non-connected: mental health clients connected to services usually get out quicker. Gary Sherzan asked if these were all connected to the mental health system. They are actively engaged in outpatient treatment at Eyerly Ball and Broadlawns and engaged with a residential provider or someone going into home supervision.

Health Services met with jail staff and would like to bring an analysis of individuals going to Mt. Pleasant (under court orders) or Bridges for substance abuse. We are trying to keep clients locally to save money. There will be some data to present at the January or February CJCC meeting.

Update on the Iowa Prescription Drug Corporation: A grant was received from Mid Iowa Health Foundation for prescription gap coverage when someone is released from jail and not engaged in outpatient services.

They haven't heard about the Prairie Meadows grant application yet. They are requesting \$35,000 from Prairie Meadows.

John Sarcone asked about who will do what Mt. Pleasant does if clients stay here? Dave explained there are 30 day programs at Methodist and other places closer to Polk County. We will look at data of where they are going and what the recommendation is based on an assessment. Are there treatment beds not in use in Polk County (i.e. Mecca)? There might be a waiting list. Lynn Ferrell said they are trying to sort out if clients going to Mt. Pleasant can stay here at Bridges. Valorie mentioned that clients don't want to go to Bridges because it's faith based. Gary said we need to work through all this information because there is potential for savings. It was mentioned that those on psych medicines cannot go to Mt. Pleasant. The situation is more difficult when psych meds are involved, the State doesn't acknowledge this very well. There might be an effort to try this at Bridges.

Bridges Substance Abuse Treatment Program – Tom Jackowski, CEO, Bridges of Iowa

They are in the tenth week at the new location; things are going smoother than anticipated. Tom said the Sheriff's Office has been great to work with. We currently have 49 individuals in program; approximately 30 are located at the jail, with the remaining at the Vine Street after care facility. Referrals for November were eight; admissions from the jail directly were six. The referral process is still slower than we'd like. Fourteen individuals are approved for program but are waiting to get through the

criminal justice system. They are working to streamline the process. Bridges can take 2 – 4 clients a week. The current trend suggests they will be full by end of January. Capacity is very large, 120 between men and women.

Women's program – 2 of the 3 funding sources have been approved for funding, Access to Recovery gave us an additional 40 slots for clients to receive treatment and Greater DM Foundation awarded \$75,000 with the Lamberti Foundation making up the difference so we anticipate opening and accepting women between Jan 15 and Jan 30. The 5th Judicial District will help us with training issues revolving around gender based treatment (women's issues). Funding sources have come forward to bring this needed resource to women in Polk County.

Judge Gamble asked if there are local inpatient treatment beds not being used. There are no 30-day treatment beds at the level we're talking about and programs are full (insurance payments make up the majority in programs). There is a need for a shorter term treatment program. The main reason clients don't want to come to Bridges is because it is a year-long program. The real savings is where they are waiting at the jail. If they could go to a program immediately, this would save money.

Bridges modified their program to allow individuals on certain psych meds to come there. Clinical staff is working on this. Valorie asked if EFR is aware of this. They are and Bridges is working with them. John asked about 28 and 60 day programs available. There is space in the jail but funding is an issue. There is a non-faith based aspect of the program too. Gary mentioned there is no licensing issue with receiving psych meds. Sally said it's security/treatment issues (clients abusing, theft, etc) you have to figure out ways to secure their medications.

Department of Corrections Residential Study – Paul Stageburg, PhD, Administrator, Lynette Watson, PP, Justice Systems Analyst, Iowa Department of Human Rights, Criminal and Juvenile Justice Planning (handout)

A study was done regarding FY 2008 offenders placed in residential facilities focusing on risk principles. Low risk offenders did worse on recidivism but the study also found that the high risk offenders did worse

in residential facilities. In Iowa, we have regarded prison space the study suggests we should look at residential facility space in the same way and use that space. An offender who is homeless needs some place to live and in that case, a residential facility makes sense. All things equal, field supervision might be the option of choice. This idea is being used by the Board of Parole with high risk offenders. The Board of Parole has used work release as a way out. They have started more often with offenders who have a good parole and a planned place to live. They are now releasing them to straight to parole. The waiting lists have backed off the last few months. As a result of using work release less, there has been a reduction in the waiting lists.

Sally said if someone has a stable living environment, the \$2 a day bracelet is better than a residential facility.

Judge Gamble asked if sending someone to Ft. Des Moines due to probation violation is better or worse than prison. In some situations, that is the best alternative they have. John said they are watched more closely in a residential facility than in the field. Gary said these need to be looked at on an individual basis. Sheriff mentioned these are complicated issues that have to work themselves out and also with the juvenile issues we are confronting right now.

Open Discussion

Gary reported that we're looking at the legislative session budget issues for the 5th Judicial Department of Corrections, courts, mental health, 23 hour crisis facility funding. The biggest issue is sustainability and how do we sustain these programs in the future if we get funds. We are still having discussions regarding the 23 hour crisis center and will continue to have those to get something accomplished.

Meeting adjourned 9:00 a.m.