

Criminal Justice Coordinating Council (CJCC)

August 4, 2016

8:00 a.m.

Hy-Vee Hall

CJCC Members Present: Tom Hockensmith, John Mauro, Sheriff McCarthy, John Sarcone, Dana Wingert, Judge Ovrom (for Judge Gamble), Valorie Wilson, Jerry Evans, Chad Jensen, Susie Osby.

CJCC Members Absent: Gary Mikulec.

CJCC Coordinator: Gary Sherzan.

Others Present: Angela Connolly, Sarah Boese, Frank Marasco, Joe Simon, Marty Ryan, Dillon Kraft, Nick Lemmo, Tom Jackowski, Larry James, Annie Uetz, Dee Martin, Bob Glass, Michele Keenan, Arnold Woods, James Cornick, Jered Headrick, Christopher Patterson, Sara Kendricks, Betty Andrews.

Approval of the June 9, 2016, Minutes:

Moved by McCarthy, Seconded by Sarcone to approve the June 9, 2016, meeting minutes.

I-Leads Committee Update – Frank Marasco, Polk County Sheriff’s Office (handout)

Frank reported that the transition of the jail health care provider from Corizon to Correct Care Solutions (CCS) is complete, and given the scope of it, things went smoothly. They are working on a staffing matrix, based on recommendations from CCS. The emphasis right now is on early detection of mental illness, and suicide prevention. Tom Hockensmith asked “How long is the wait time for Oakdale?” It is currently 7 days, but has been as low as 4. With some changes to operations and a new vehicle for transporting, it is much more efficient.

Jail Diversion; Crisis Observation Center Update – Annie Uetz, Polk County Health Services (handout)

Jail Diversion is now fully staffed; they currently have 32 clients and are working their way back up to the maximum 40 clients. The Mobile Crisis pre-screener position transitioned to Broadlawns on 8/1/16. The contracts for the Crisis Stabilization Center and Crisis Observation Center are being moved from Eyerly Ball Community Mental Health to Broadlawns. The centers are closed this week to provide staff training and get them on board; police departments were notified and are also on board; the centers will start back up on Monday at 8:00 a.m. The Mental Health Services Coordination program has housed 408 individuals.

Pretrial Release – Teri Sommerlot, Fifth Judicial District Department of Correctional Services (handout)

The stats for the month of July for the Pretrial Release Unit are in the handout provided. The reports for the number of Jail Bed Days and Revocations just came out this morning, so Teri doesn’t have those numbers at this time.

Bridges Substance Abuse Treatment Program and St. Gregory Update – Tom Jackowski, CEO, Bridges of Iowa

Admissions remain steady, with 55 women and 215 men (270 total) in the program. They are adding Evaluation Counselors to help at Washington Street and the jail. There were 125 referrals and 39 admits in June; 86 referrals and 30 admits in July. Denials are at 25-30%, which is on track with the national average for individuals in custody with substance abuse issues.

Bridges of Iowa (BOI) is partnering with Des Moines Area Community College (DMACC) to open a training kitchen to provide training in culinary arts. There is a commercial kitchen in their Thornton location where they will operate a breakfast and lunch bar with coffee service. Hy-Vee is committed to hiring an individual at \$14-\$17 per hour. Funding received by Prairie Meadows' Legacy Grant, with Bridges Foundation making up the difference.

DMACC has committed to begin offering GED training at the jail, and also to take clients into their mechanics and truck driving schools. Thanks to the Fifth Judicial District, BOI will begin offering Outpatient Services at Fort Des Moines on July 15, as part of the expansion of the program. BOI will apply the jobs training and employment readiness components. Problems with the privatization of Medicare have not impacted BOI yet, but it is beginning to. Tom didn't elaborate on the subject, but just wanted the CJCC to be aware.

Bridges has completed the initial phase of their psychotropic medication study. They measure certain things using an independent 'Outcome Measurement Service'. One trend they noted is a significant amount of anti clinical or anti-medical advice people leaving, mostly because they want to get back on their psychotropic medication. BOI will now allow them to go back on a certain level of mental health medication after Phase I (a 6 week clinical phase) if they have a Community-Based Mental Health provider. They are monitored for approximately a year, and data is compared to determine which process is evidence-based. This will be implemented soon.

Risk Assessment Update – Gary Sherzan, CJCC Coordinator, and Jerry Evans, 5th Judicial DOC

The State Department of Corrections is overseeing the implementation of the risk assessment that the CJCC is interested in using. Teri Sommerlot relayed information about a visit from two people from Justice Systems Partners, the agency that handles the implementation of the assessment; and two people from Harvard University, who is doing a study that goes along with the introduction of the assessment. On July 20 and 21, they observed the Pretrial Release, and the Jail Court Initial Appearance processes. They took a tour of the jail, observing the process from booking to release. They met with jail personnel, judges, public defenders, county attorneys, etc. They also looked at the data management systems being used, such as Iowa Courts Online and ICON.

Jerry Evans feels that all indications are that Justice Systems Partners saw their visit as a favorable experience, and they are looking at 1-2 sites in Iowa in which to implement the assessment tool, with the Fifth Judicial District being strongly considered. Tom Hockensmith asked if the assessment was initially planned to be a state wide initiative? With so many rural sites in Iowa, there are only a few more populated metropolitan areas, such as Cedar Rapids, Davenport, Des Moines and Waterloo that have pretrial release programs that may meet the criteria for use of the assessment tool.

Teri said we have to have electronic data for implementation; no paper copies. She believes that is to eliminate errors and provide some consistency. She also believes that the state has offered to help develop the system, and she assumes Justice Systems Partners will have some sort of base starting point as a result of the assessment being used in other places across the country. We would then create a system that will work for us, which would ideally include a feature that would auto-fill information into the assessment for scoring purposes. Tom asked if different divisions, i.e., the Sheriff's Office, the County Attorney's Office, etc. would use different systems. Since ICON is the state data system used by the DOC, it should have much of the information, but it may be necessary for the jail, for instance, to use the I-Lead System, which is the jail management system. All systems, new or existing, must be compatible with ICON.

MacArthur Foundation's Safety and Justice Challenge – Gary Sherzan, CJCC Coordinator (handout)

In 2015, Gary applied for, and was denied, a grant from the John D. and Catherine T. MacArthur Foundation's Safety and Justice Challenge. As one of the original applicants, Gary received a letter from the Foundation in July announcing a new funding opportunity. The Foundation established the 'Innovation Fund' at the Urban Institute, and they will be formally announcing the competition in September. The program will provide seed funding for projects aimed at reducing jail incarceration. The letter requests that jurisdictions indicate whether or not they are interested by August 15.

Data Driven Justice Initiative– Annie Uetz, Polk County Health Services (handout)

In June, Annie, and Susie Osby, Polk County Health Services, and Officer Kelly Drane with the Des Moines Police Department, were invited to Washington, D.C. to participate in a community workshop on Data Driven Justice. Preparing for the workshop was a collaborative effort between Polk County Health Services, Polk County Sheriff's Office, Des Moines Police Dept., the Fifth Judicial District, and Community Based Service Providers.

The day long workshop included presentations from the Presidents' Chief Technology, Legal, and Data Science Officer's, among others. There was a presentation by the family member of an individual that had been in and out of jail and prison, but thru community support, has now turned their life around. Another individual told about their own experiences during the 20+ years they spent in the corrections system. That person has also turned their life around, and is now a nationally renowned speaker.

The county, city, and state governments attending the workshop were broken up into groups based on each jurisdiction's experience with crisis services—those that had programs in place that were doing well, and those that hadn't done much, or anything, in that area. Polk County was in a group that included representatives from the State of Maryland, the City of Hartford, CT, and the City of Oakland, CA. Oakland was one of the jurisdictions that don't have any crisis services in place, and really don't know where to start. Polk County, on the other hand, has a number of programs being used that are doing very well, and can share information and provide some direction. Although there is still much to work on, it's clear that Polk County has already done a lot in this area. Annie stated it was eye opening to see just how far ahead the CJCC has brought us compared to some of the jurisdiction's attending the workshop.

Next, Annie discussed the eight innovative practices that the Data-Driven Justice Initiative is focusing on:

1. Share data across health and criminal justice to identify system 'super utilizers'
2. Create a 'Data Map' to identify existing data-sharing, gaps and barriers
3. Implement a data-driven risk based pre-trial assessment tool to inform pre-trial release decisions
4. Provide Crisis Intervention Training (CIT) to law enforcement and 911 dispatchers
5. Create a 'Services Map' to identify community based treatment options, including gaps and barriers to service delivery
6. Identify an alternate, non-jail location(s) for people to receive treatment while in mental health crisis
7. Identify or create an approach to provide care management and social supports for 'super utilizers'
8. Demonstrate interest from key system stakeholders

(Please refer to the DDJ handout to see the 'Current Practices' and 'Next Steps' for each innovative practice. Following is a summary of the comments/talking points made by Annie.)

Annie doesn't care for the term 'super utilizers' but rather 'familiar faces', people that are known to law enforcement, community mental health providers, etc. due to repeated contact with them. Each morning the Jail sends an electronic file to Health Services identifying individuals that have been booked into jail; names are cross-checked against a county-wide mental health data system. If someone has been arrested that is in the system, an email is sent to their case manager letting them know about the arrest and that they should contact the jail. The new jail mental health provider has begun looking everyone up in the system that she sees, then notifies workers that she is also seeing them in the jail. Medication lists are obtained so the person can be kept on the same meds. The 'Data Map' identifies gaps and barriers in the existing data-sharing and helps determine where communication can be improved. Right now, for instance, Broadlawns Community Providers have access to their EHR in the hospital, but no other community provider does. As for the pre-trial release scoring instrument that has been in use for over eighteen years, the district is being evaluated as a possible pilot site for use of a new risk assessment tool from the Laura and John Arnold Foundation. With the Sheriff's Office commitment to getting more Officers trained in Crisis Intervention Training (CIT), Annie has been working closely with Nick Clark from the Sheriff's Office, who has joined the Iowa Therapeutic Alternatives to Incarceration Coalition (ITAIC), and they have been attending meetings focused on jail diversion and CIT training. Tom Hockensmith asked if any of the police departments in the suburbs were involved in CIT training. Annie did not believe so, but other counties are training their officers in CIT, and there is talk about initiating a statewide program. When it came to creating a 'Services Map' for Innovative Practice #5, Annie had to ask if more boxes could be added to the four on the diagram because Polk County has so many community based treatment options already in place (see page 4 of handout). Desired services include expanding CIT training to include all first responders, Crisis Aversion and Sobering Centers/Units. Polk County has established several non-jail locations that offer treatment while in mental health crisis (#6). The next steps are to improve services by increasing prescriber and therapy services, improving collaboration with law enforcement, and providing pre-commitment screening. Broadlawns has hired a person to manage the crisis services program who formerly ran the program in Milwaukee, and he has some really good ideas. They've also hired a psychiatrist from New York whose practice has been 90% law enforcement dealing with trauma from being on the job. She's working with DMPD to see how she can bring that service to Des Moines. While Polk County has several Care Coordination options (#7) for the 'familiar faces' they are working on a better approach to support those who are not connected to our community based providers, and also to discuss options for individuals who are experiencing homelessness, to get them housing and employment. The Criminal Justice Coordinating Council (CJCC), created in 2008, falls under Innovative Practice #8, which goes to show how far ahead of many jurisdictions Polk County is in dealing with these issues, and why we were named one of the 'premier jurisdictions' along with five other cities and counties in the country. These jurisdictions will be developing a diversion playbook called 'How to Develop a Complete System of Diversion'. The book, to be done under guidance from the White House, will give information on how to set up a key stakeholder group such as CJCC, develop crisis service programs, identify different diversion practices, etc. White House staff is in the process of planning a visit with Polk, Johnson and Black Hawk counties in Iowa, who were also named as premier jurisdictions.

Open Discussion - Gary Sherzan said as of this a.m. there are 8,200 people in Iowa prisons designed to hold 7,300 (13% over capacity); 30,367 are in community based programs. That competition for space is part of what is driving the DDJI. Polk County has 7,000 of the Fifth Districts' 9,000 under supervision at any given time, 40% of the community based population across the state. He feels it is critical to have data to present to the courts regarding the number of people coming to the Fifth District who are released.