



DALLAS COUNTY
Criminal Justice Department

Behavioral Health Steering Committee

Friday, June 17, 2016

Agenda

1. Welcome and Call to Order
2. Review/Approval of Minutes
3. Caruth Presentation *Dr. Andy Keller*
4. SAMHSA Update *Laura Edmonds*
5. 530 Sub Committee* *Laura Edmonds*
6. BHLT & CSP Update *Charlene Randolph*
7. Jail Reports
 - Hospital Movement *Brandy Coty*
 - Pregnant Patients *Shenna Oriabure*
 - Veterans Reports *Shenna Oriabure*
 - Homeless Report *Shenna Oriabure*
 - Northstar Matches *Mike Laughlin*
8. Public Defenders Report *Lynn Richardson*
9. District Attorney's Report *Lee Pierson*
10. Provider Reports
 - The Bridge *Jay Meaders*
 - Metrocare *Crystal Garland*
 - IPS Reports *Enrique Morris*
11. Problem Solving Courts
 - Outpatient Competency *Brandy Coty*
 - DIVERT *Keta Dickerson*
12. Specialty Courts CSCD *Serena McNair*
13. Announcements
14. Adjourn

***Action and Discussion Items**

**Minutes of the Behavioral Health Steering Committee (BHSC) Meeting
Thursday, May 19, 2016**

Attendee	Agency/Dept.	Attendee	Agency/Dept.
Judge Kristin Wade	CCCA No. 1	Harry Ingram	Public Defender's Office
Marlene Buchanan	Metrocare Services	Stella Lee	Public Defender's Office
Paul Blocker	DCPDO	Nakish Greer	Criminal Justice
Tonya Whitzel	ADA	Kendall McKamy	ADA
Alyssa Aldrich	Adapt	Kelly Kane	Bridge
John Carlough	District Attorney's Office	Jay Meaders	Bridge
Holly Dotson	Adapt	Judge Doug Skemp	Misdemeanor Comp. Court
Janice Jeffries	Value Options	Serena McNair	CSCD
Ashley Trudell	IPS Recovery	P. Alexander	NTBHA
Patrick Jonas	PHHS	Keta Dickerson	DIVERT
Janine Capetillo	Criminal Justice	R. Lennox	Public Defender's Office
La Shonda Taylor	Public Defender's Office	Germaine White	Com. Daniel's Office
Angela Heggins	Public Defender's Office	Lela Mays	STAC Court
Lee Pierson	District Attorney's Office	Shenna Oriabure	Criminal Justice
Blythe Barnes	Public Defender's Office	Angie Byrd	Transicare
Abdul Mohammed	Criminal Justice	Laura Edmonds	Criminal Justice
Brandy Coty	Criminal Justice	Leah Gamble	Criminal Justice
Mike Laughlin	Criminal Justice	Crystal Garland	Metrocare Services
Brent Lewis	Public Defender's Office	Avril Edwin-Boxill	Criminal Justice

Introduction

The meeting was called to order by Judge Wade at 8:30 am. Mike Laughlin introduced a group of students and their professor from Abilene Christian University. The professor indicated that every year he takes a group of students to visit City Square, Ron Stretcher, the Public Defender's Office, and other contacts in Dallas. The students are pursuing a variety of majors and are interested in poverty, housing and behavioral health issues.

Next BHSC Meeting - Temporary Change

Judge Wade announced that the next BHSC meeting will be moved to Friday, June 17th at 8:30 am (BHSC meetings are usually held on Thursdays), to facilitate a presentation by Dr. Andy Keller, CEO of the Meadows Mental Health Policy Institute. Dr. Keller will provide an in-depth account of the Caruth Smart Justice Initiative, including project implementation guidelines and the procedure to apply for additional funding.

Caruth Smart Justice Grant (pp. 5 -13) – Mike Laughlin

Mike reported that the Caruth Smart Justice initiative is in the planning phase and project implementation is expected to commence in July 2016. The grant comprises five (5) intercepts (a high level overview is available on pp. 5 and 6 of meeting packet). Intercept 1 entails an assessment of the way in which police and fire personnel respond to community incidents. Earlier this month a site visit was undertaken by MMHPI to Colorado City, CO to observe their model in practice. Consultations were held and technical assistance sought, with a view to developing an optimal model for Dallas County. One of the innovative strategies being considered is pairing clinicians with first responders, to reduce the need for the Dallas Police Department to respond to mental health related 911 calls.

Intercepts 2, 3 and 4 are associated with the jail and court systems, primarily the screening and assessment aspects of mental health P.R. bonds and bond supervision opportunities for pre-trial supervision of mental health P.R. bond releases. Implementation of these three intercepts is being spearheaded by Mike Laughlin in collaboration with Judges Wade, Lewis and Mulder.

Intercept 5 focuses on community supervision services and on-going treatment support, components targeted to receive increased support and attention. A number of providers have been formally approached to identify service gaps, and make recommendations to improve existing pre-arrest and post-conviction services.

SAMHSA Grant – Laura Edmonds

Laura explained that the SAMSHA Grant funds residential treatment at NEXUS for any female participating in the specialty work program. There are currently twelve (12) participants in the program. The goal is to fund a maximum of thirty-six (36) participants each year. Referrals were previously limited to three (3) courts: PRIDE, DIVERT and STAC, however, in an effort to meet the aforementioned quota, referrals from other specialty court programs are being accommodated. To this end, Laura welcomed suggestions from participants on how to increase referral levels.

Janine Capetillo, SAMSHA Grant Coordinator was introduced to meeting participants. Laura stated that Janine's excellent organizational skills have been instrumental in keeping the project on track.

530 Sub-Committee – Laura Edmonds

No new funding requests were received by the 530 Sub-Committee. The Fund's balance is \$136,617. The Sub-Committee is currently processing funding requests for the Texas Association of Drug Court Professionals (TADCP) conference, and drafting policies and procedures to govern the implementation of the 530 Fund.

Judge Wade added that one of the goals of the 530 Sub-Committee (a relatively new entity) is active engagement in training advocacy. Shenna Oriabure will be tasked with getting specialty court judges and their teams to access state training by providing information about application guidelines etc., and technical assistance to apply for stipends.

TADCP

Judge Wade volunteered Harry Ingram, an Assistant Public Defender, to provide a summary of events at the recently held TADCP state conference. Harry stated that he attends the conference every year, and was very pleased that this year the sessions were specifically tailored to meet the needs of the various disciplines that support the specialty courts. He found the session on ethical responsibilities particularly useful, as well as the presentation delivered by a retired probation officer from California, who provided guidance on dealing with clients, including, being cognizant of the latter's limitations and tempering expectations accordingly.

CSP Update – Alyssa Aldrich (ACS), Angie Byrd (Transicare)

ACS identified seven hundred and thirty-nine (739) clients in March and provided two hundred and eighty-seven (287) face-to-face services. A total of four thousand, five hundred (4,500) clients were identified, and more than one thousand, seven hundred (1,700) face-to-face services were provided from October 1, 2015 to March 31, 2016.

Transicare received forty-five (45) referrals in March, thirty-two (32) of whom were admitted. A total of one hundred and fourteen (114) clients were served. Five (5) clients were released from Terrell State Hospital, four (4) of whom made their seven-day provider connect, that is, an eighty-four percent (84%) connect rate.

Jail Reports

Hospital Movement (p. 24) - Brandy Coty, Judge Skemp

Brandy reported that the number of state hospital admissions increased from twenty-six (26) in March to thirty-eight (38) in April, adding that there is a longer wait time for individuals going to Vernon State Hospital. Seven individuals were admitted to that facility in April. The average wait time for males admitted to Vernon State Hospital is one hundred and eighty-one (181) days, and for females, twenty (20) to thirty (30) days. There were ninety-three (93) clients waiting to go to a state hospital at the end of April.

Judge Skemp indicated that the total numbers and referrals at the competency courts have increased. Two (2) out of three (3) clients waiting to go to the hospital do not meet the criteria for outpatient services. He added that because the courts have a limited amount of time under the Law to deal with the competency issues of clients with misdemeanors, the long wait times for beds at the state hospitals are exacerbating an already difficult issue. Efforts are currently underway to improve this situation.

Pregnant Women - Shenna Oriabure stated that she did not have a current count of the number of pregnant women in jail, and indicated that the April figures are inaccurate because they do not include data from Parkland Hospital. She added that the primary reasons for the incarceration of pregnant women are: new offenses (mainly assaultive and drug and alcohol related offenses), followed by probation violations. It was noted that only twenty-four percent (24%) of the incarcerated pregnant women were not considered to be mentally ill (p. 26 -27, May packet).

Veterans - Shenna indicated that the veteran related information on page twenty-eight (28) of the packet is consistent with the data that she has been reporting.

Homeless Report – Shenna Oriabure

Shenna stated that the homeless report on pages thirty-one (31) to thirty-three (33) was in keeping with the information reported by Christina Gonzales. One of the participants enquired whether there had been a spike in the number of homeless people arrested since the closure of Tent City. Shenna indicated that in light of the fact that the number of jail days increased by three thousand (3,000) in May, it was reasonable to conclude that there had been a significant increase in the number of homeless individuals arrested.

Judge Wade indicated that an attendee at the last BHLT meeting who was involved in relocating people from the tent city (later revealed to be Zachary Thompson by Shenna Oriabure), stated that although approximately fifty percent (50%) of the residents had income, many of them moved to another tent city, because they did not want to pay shelter fees. She contended that fixing homelessness is not simply about dealing with monetary issues, but also about trying to change people's attitudes.

Northstar Matches – Mike Laughlin reported that Northstar matches averaged twenty-five percent (25%) of the total jail population in 2015, and have remained at twenty-five percent (25%) since January 2016. There were a total of one thousand, four hundred and eighty-seven (1,487) repeat book-ins among this group in 2016 (p. 30 of May packet).

Public Defender's Report – Paul Blocker

Paul Blocker indicated that the data provided on page thirty-four (34) of the packet is self-explanatory. He stated that the Public Defender's Office is partnering with the UNT Dallas School of Law to establish a community lawyering program. The program will be held at two (2) locations (the South Dallas area and downtown Dallas), primarily in the evening. Additional details will be provided later.

The Second Chance Community Improvement Court received a \$200,000, two-year grant from the Bureau of Justice for Court Innovation. The kick-off teleconference was held on May 18, 2016. The deadline for the release of funds will be in July or August 2016. The monthly Mental Health Table Talk will be held in the Central Jury room, right before the Jail Population Committee meeting on Friday, June 10th.

District Attorney's Report – Lee Pierson

The SET program is progressing well. There are currently twenty (20) participants in the twenty-five (25) participant program. It has been difficult getting referrals. This is more than likely due to the fact that the program is relatively new.

Provider Reports

The Bridge – Jay Meaders indicated that there was a discrepancy in the Metrocare Chemical Dependency Services data. The numbers show an increase from fifty-nine (59) to four hundred (400) because a duplicate number was included. He reported that there were forty-seven (47) housing placements in April, the second highest total for the last twelve (12) months, and forty-two (42) job placements, the highest total for the year. He added that the Bridge had assisted with the closure of Tent City, and he has been navigating the fringes of the former camp site to ensure no one is sleeping outdoors, instead of going to a shelter. Jay also indicated that Wayne Pollard (Our Calling) has a very large database on homeless and tent city sites. He will continue to collaborate with Wayne to reduce the number of homeless individuals residing in tent cities, and will try to secure him as a guest speaker for the July meeting.

Metrocare Services – Crystal Garland reported that Metrocare Services received the following referrals from the specialty courts: ATLAS: sixteen (16), Post DDRTC: twenty-four (24), STAC: seventeen (17), Misdemeanor: nineteen (19) and PRIDE: four (4). Mental health referrals have been increasing.

ACS – Alyssa Aldrich indicated that the Adapt of Texas Clinics will be permanently closed on May 20, 2016. Metrocare Services will take over the operations of the Dallas Clinic and will retain the services of the ACT team. The clinic will be closed for a week to host a boot camp, and will open with a skeleton crew during the week of May 30, 2016.

IPS Recovery – Ashley Trudell stated that in quarter one, there were on average sixteen (16) specialty court admissions per month. The April numbers were twelve percent (12%) lower than those in quarter one, and there was a fifty-two percent (52%) successful outpatient treatment episode outcome for specialty court patients, a significant accomplishment when compared to the national average of thirty-four percent (34%). (Page 44, May packet).

Problem Solving Courts

Outpatient Competency Restoration (OCR) – Brandy Coty indicated that there were twenty-three (23) misdemeanor OCRs at the beginning of May. Three consumers were placed in OCR and there were five (5) dispositions (p. 46, May packet).

DIVERT – Keta Dickerson reported that there were one hundred and fifty-five (155) participants in the DIVERT program at the beginning of April, fourteen (14) admissions, three (3) unsuccessful discharges and six (6) graduates, resulting in a total of one hundred and sixty (160) participants at the end of the month. The program is currently at full capacity and will be unable to accept referrals until July 2016. She added that Mr. Blocker will be the guest speaker at a program on Saturday, May 21, 2016, to commemorate National Drug Court month.

Judge Wade commented on Keta's willingness to help others, and the great work that she has done helping employees interested in attending the state conference (even though this is not one of her responsibilities) to complete the stipend application forms, etcetera.

Specialty Courts CSCD – Serena McNair

Serena McNair reported the following 'end of month' numbers for the Probation Department for April: DDC - forty-eight (48), ATLAS – twenty-nine (29), STAR – fifteen (15), Mental Health - fifty-nine (59), SET A & B – two hundred and forty-two (242).

Adjournment: The meeting was adjourned at 9:20 am. The next meeting will be held on Friday, June 17th at 8:30 am.

Caruth Smart Justice Implementation Plan

Review Draft Overview v2 – June 2016

A draft plan has been developed with Dallas County (including its three Caruth Work Groups), the Dallas Police Department (DPD), the City of Dallas Fire-Rescue Department, local providers, and the University of Texas Southwestern (UTSW) Medical School based on the Phase One findings, and we expect to have the plan fully vetted and refined with the other partners and the community as a whole by the end of June 2016.

This ambitious five-year plan seeks to leverage more than \$100 million in state, local, and federal governmental and private health system expenditures in order to move away from current practices that mire both law enforcement and individuals with mental illness in an inefficient and destructive cycle of repeat arrest, incarceration and ineffective expenditures. Through this effort, we intend to:

- Free up Dallas County law enforcement officers to focus more on public safety rather than emergency mental health service delivery,
- Reduce Dallas County's high rate of repeat offenses (recidivism), which is driven to a large extent by higher than average recidivism rates for people with mental illness, and
- Permanently shift more than \$40 million in annual spending to sustain a comprehensive array of evidence-based policies and practices.

The transformative potential of this project results from both collaborative planning and the unique timing of this proposed implementation. Because of the local mental health system's transition away from the NorthSTAR model, hundreds of millions of dollars will be spent differently in 2017. Active planning with NTBHA leadership has identified the potential to shift millions in annual spending away from crisis / emergency / jail costs into law enforcement diversion and assertive treatment, but only if new funds can build the assertive treatment infrastructure to break today's crisis cycle. Similarly, Dallas County is ready to implement more assertive pre-trial supervision supports for people with mental illness to ensure that they get care rather than cycle back to an emergency room or the jail, but momentum needs to be established to start the process before county funds can be freed to take the process to scale. Without this potential leverage, we could not envision accomplishing the range of changes encompassed in this plan, and without the leadership of Dallas County commissioners and NTBHA leaders committed to take change across the system, this plan would not exist.

If we achieve the outcomes set for this five-year implementation period, the plan will propel Dallas more than half of the way toward MMHPI's long-term goal of ending the use of Dallas County Jail as a psychiatric facility for people who do not have a forensic reason to be in the jail.

Achieving this assertive goal will not be easy, MMHPI plans to ask the W.W. Caruth Foundation for \$15 million over five years to accomplish it. We recognize that this is a very large request, and the plan is both scalable and something for which MMHPI is prepared to engage other donors to accomplish, but the major components of the \$15 million request (all of which are subject to revision during the plan finalization process in May and June) include current projections of:

- **Approximately one-third of the funds to build front-end diversion**, including:
 - Investment to leverage additional hospital system and county funds to develop **real-time information systems** to track emergency room, hospital, and law enforcement use by each person in Dallas County presenting with emergency psychiatric needs, and that can then link pre-identified super-utilizers in real time to enhanced clinical diversion resources;
 - Funding for integrated police-fire-behavioral **Rapid Response Teams** in each sector of the City of Dallas to reduce demands on law enforcement, leveraging additional city and county funds to sustain the teams; and
 - Development of **additional psychiatric drop-off locations and expanded hours at current locations** across the county (particularly in Southern Dallas County) to house the new treatment services noted below, leveraging current provider interest in relocating current sites that are less optimally located, as well as other (non-Caruth) philanthropic sources to develop these new facilities; we will also **develop better coordination across all of the emergency room and hospital providers** in Dallas through the Dallas-Fort Worth Hospital Council, including the Parkland Health & Hospital System, Green Oaks Hospital and the HCA system, Texas Health Resources, Baylor Scott & White, and the Methodist system.
- **Just under one-fifth of the funding within the criminal justice system** to improve identification of mental health needs, risk assessment, pre-trial supervision, coordination, and re-entry planning, leveraging additional county spending as Dallas County adds more pre-trial supervision capacity in years two through five to build on the foundation established by the grant funds.
- **Approximately one-third of the funds to build the ongoing treatment and housing supports sufficient to keep just over half (54%) of the highest utilizing people and half of all new cases of schizophrenia occurring in Dallas County in the best state-of-the-art treatment rather than jail**, including:
 - Core funds to serve as a catalyst for over 25 times more federal, state, and local funding to increase **assertive treatment** capacity for “super-utilizers” by 1,625 slots, from the current annual level of 725 cases (one-sixth of need) to 2,350 cases (54% of need) by the end of the five years;
 - Core funds to leverage additional federal, state, and local funding to provide **step-down care** for 750 more of these “super-utilizers” each year once they are able to receive care in less intensive outpatient settings;

- Core planning and implementation funding to leverage additional county, state, and federal housing funds to build **permanent supported housing** capacity for “super-utilizers” needing housing supports;
- Additional funds for **substance abuse services** given the high rates of substance use in the target population; and
- Core funds to leverage additional state, Medicaid, philanthropic, and private insurance funding to develop ongoing, state-of-the-art, **aggressive early intervention treatment for schizophrenia and other psychoses** that will enable half of the estimated 400 people in Dallas County who first develop schizophrenia and related psychoses each year to receive care in Dallas’s leading medical institutions, rather than languishing without adequate care until they come to the attention of law enforcement and emergency providers.
- **Fifteen percent (15%) of funding for infrastructure to support and evaluate this transformation**, including:
 - 3.3% (matched 1:1 by other funding) for **MMHPI administration of the grant**,
 - 5% (plus a substantial in-kind match) for **Dallas County administration of the transition process**,
 - 6.7% for **technical assistance by the CSG Justice Center and national experts** to support the transition, and
 - The ability to leverage **additional support from a national foundation to fund a rigorous evaluation** of the project’s success and its capacity to be taken to scale in Dallas County and across Texas.



THE MEADOWS MENTAL HEALTH POLICY INSTITUTE

Caruth Smart Justice Implementation Plan – Community Review

June 2016

Subcommittee members required courts show need for training. Judge Wade advocated unless a person is involved in the governance of an entity, that 530 funds should not utilize to send the same individual to training every year. Lynn Richardson outlined the distinction of personal commitment vs. work commitment. Lynn opined 530 funds should not fund a personal commitment. The group suggested a brief application questionnaire for those seeking funding for training. Those with ideas for what to include in the questionnaire were asked to send suggestions to Laura. Clarification was made the 530 fund only pay for training for the public defenders, prosecutors, and judges associated with approved specialty court programs. Judge Mays volunteered to set up an informational meeting about 530 for the judges. Lynn suggested courts should include training cost when writing grants. Judge Wade stated judges can request for money from Commissioner's Court.

Judge Mays brought up the topic of debriefing. A suggestion was made those attending training funded by 530 must attend a debriefing meeting. Judge Wade described a hypothetical scenario of a person who receives 530 funds for training but elects not to attend, and inquired what can be done about the person in that scenario. The subcommittee agreed last minute cancellations (without a valid excuse) will be taken into consideration when determining approval for future training.

Lynn stated new special courts/programs are emerging and inquired about the proper protocol. With the addition of new court program, more courts will be looking for funding sources. Judge Wade articulated the financial and time commitment required to start and maintain a specialty court. Judge Wade recommended any judge contemplating the creation a specialty court should attend training funded by their own investment or DDA funds. Those with questions related to 530 and special courts should be directed to Laura Edmonds. Shenna Oriabure and Keta Dickerson can be utilized as additional sources of information.

From the discussion the following protocols were approved by the subcommittee:

- Information will be communicated through a series of timely emails.
- The specialty court coordinator will communicate deadlines, training, and stipend opportunities to specialty courts.
- Those using funds must room with the same gender if available.
- Bus passes distributed based on percentage of consumers. Bus passes to be purchased and distributed by the committee directly to the specialty court program.
- Creation of a questionnaire for those seeking 530 funding for training.

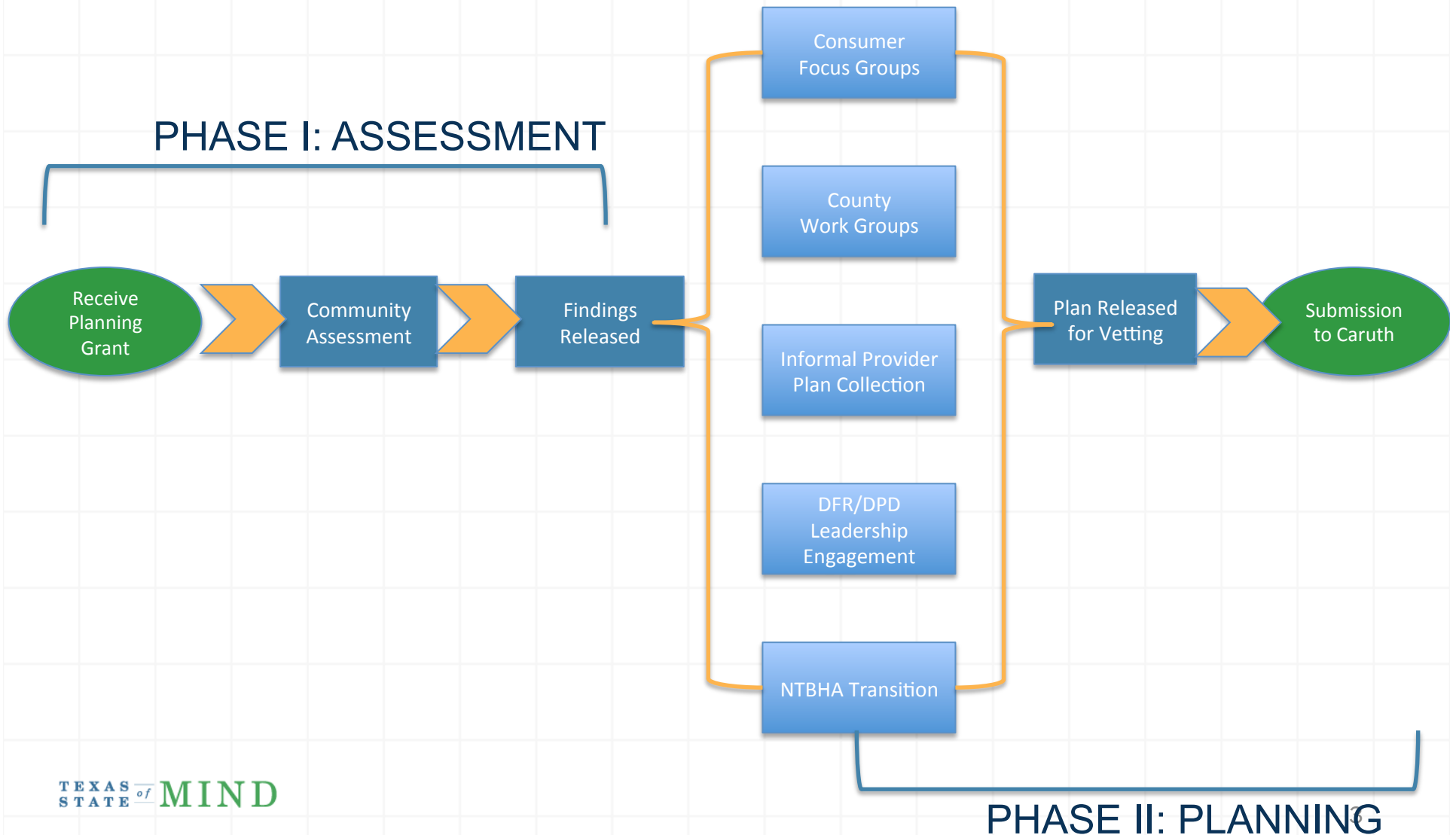
Adjourn

The meeting was adjourned at 10:19am and will reconvene on 6/8/16 @9:30am.

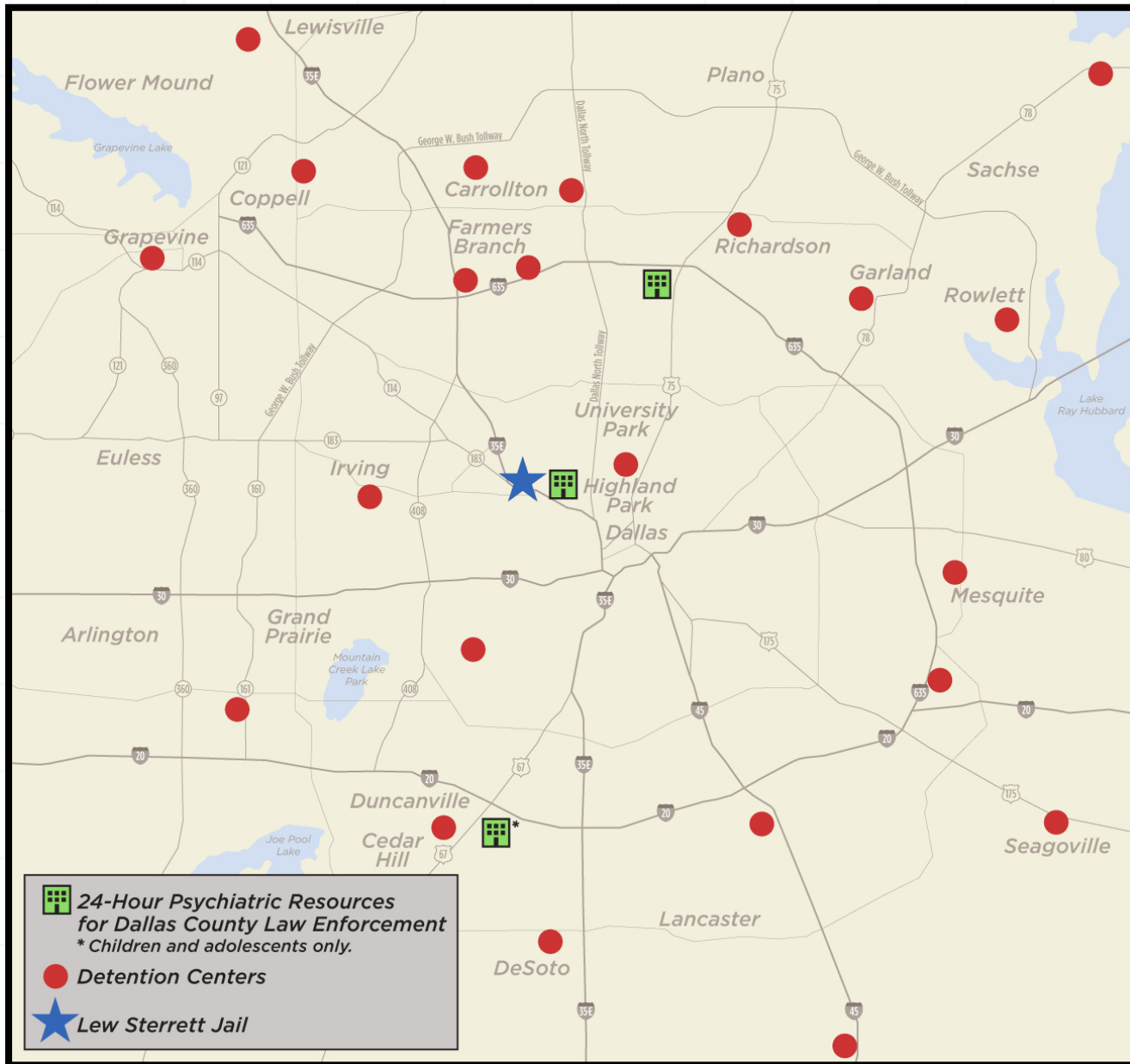
About the Implementation Plan

- Based on Phase 1 findings (see summary report provided)
- Vision and Primary Outcome: Move away from current practices that mire both law enforcement and individuals with mental illness in an inefficient and destructive cycle of repeat arrest, incarceration and ineffective expenditures.
- Priority outcomes:
 - Free up law enforcement officers to focus more on public safety rather than mental health service delivery,
 - Reduce Dallas County's high recidivism rates for people with mental illness after their first release from jail, and
 - Permanently shift more than \$40 million in annual spending to sustain a comprehensive array of evidence-based policies and practice.

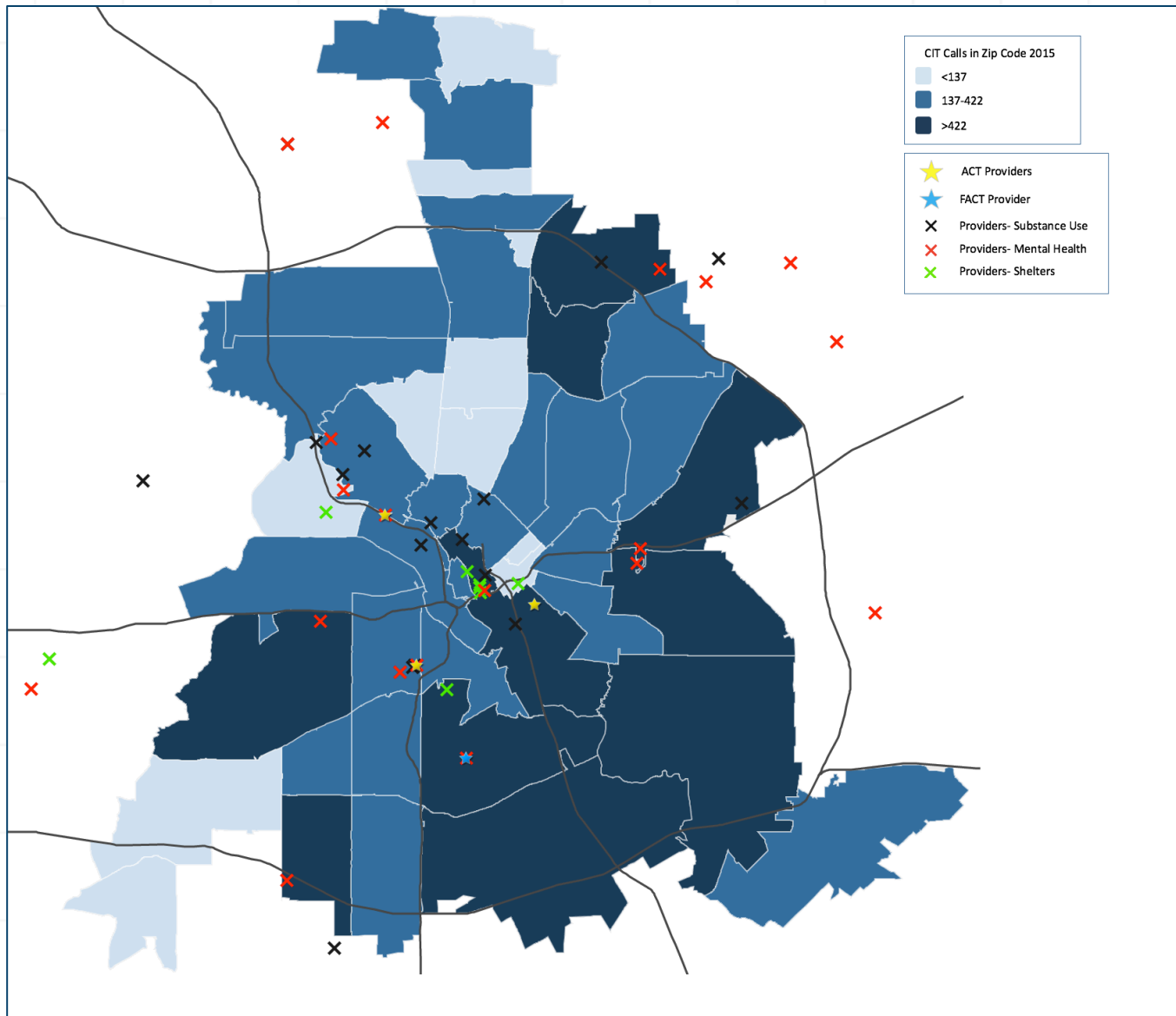
Caruth Smart Justice Planning Process



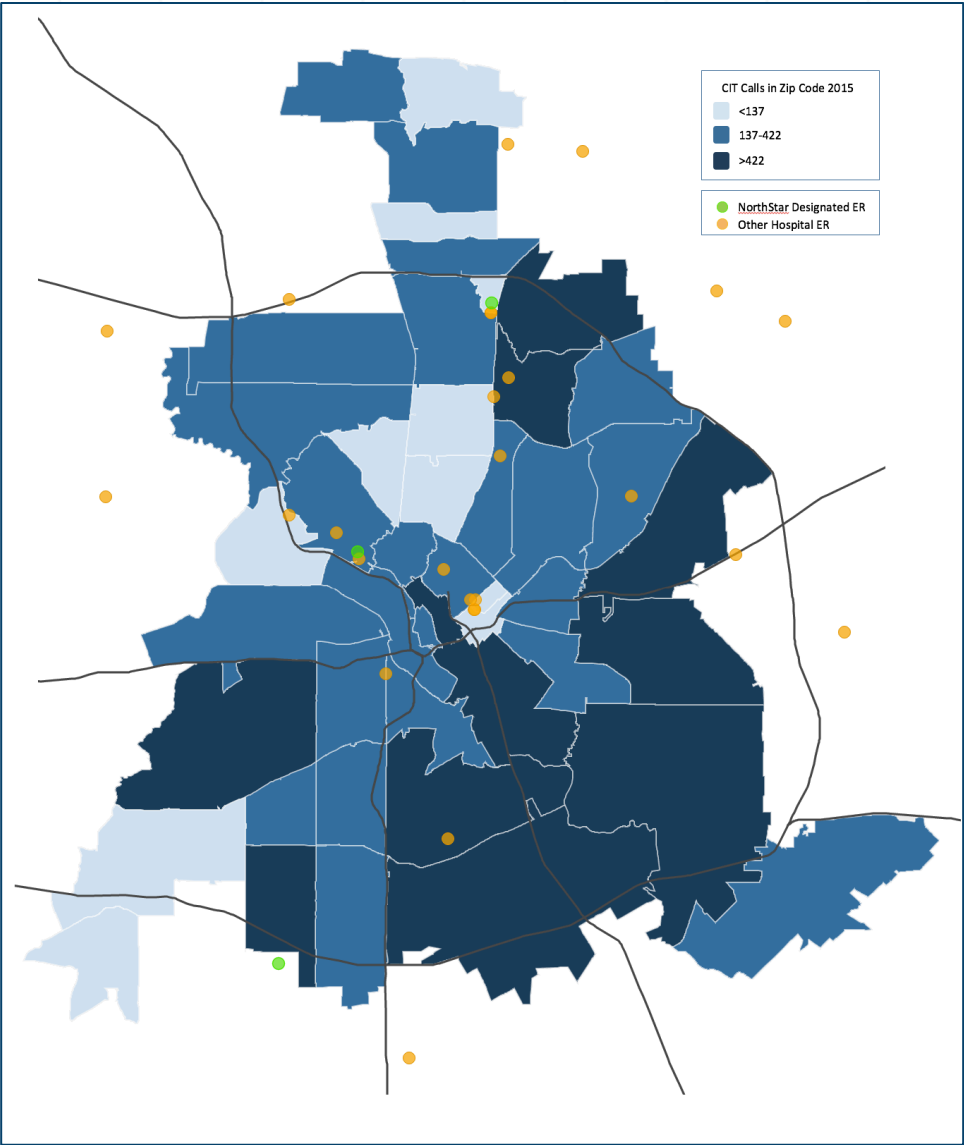
How to compete with 25 detention centers?



Strategy 1: Build on our existing provider base



Strategy 3: Engage more ED's proactively





DRAFT PLAN FOR COMMUNITY REVIEW

Law Enforcement and EMS (Intercept 1)

Approximately one-third of the funds to build front-end diversion including:

Mental Health Clinician At Dispatch

- Decrease unnecessary 46/46A calls
- Provide officer support for complex calls

R.I.G.H.T. Care Teams

- Decrease law enforcement response to 46/46A
- Decrease emergency department utilization

Additional Psychiatric Drop-Off Site in Southern Region

- Increase likelihood of diversion to care
- Increase access to services for Southern area

Law Enforcement Assisted Diversion Framework

- Increase likelihood of care engagement
- Divert low risk persons from initial arrest

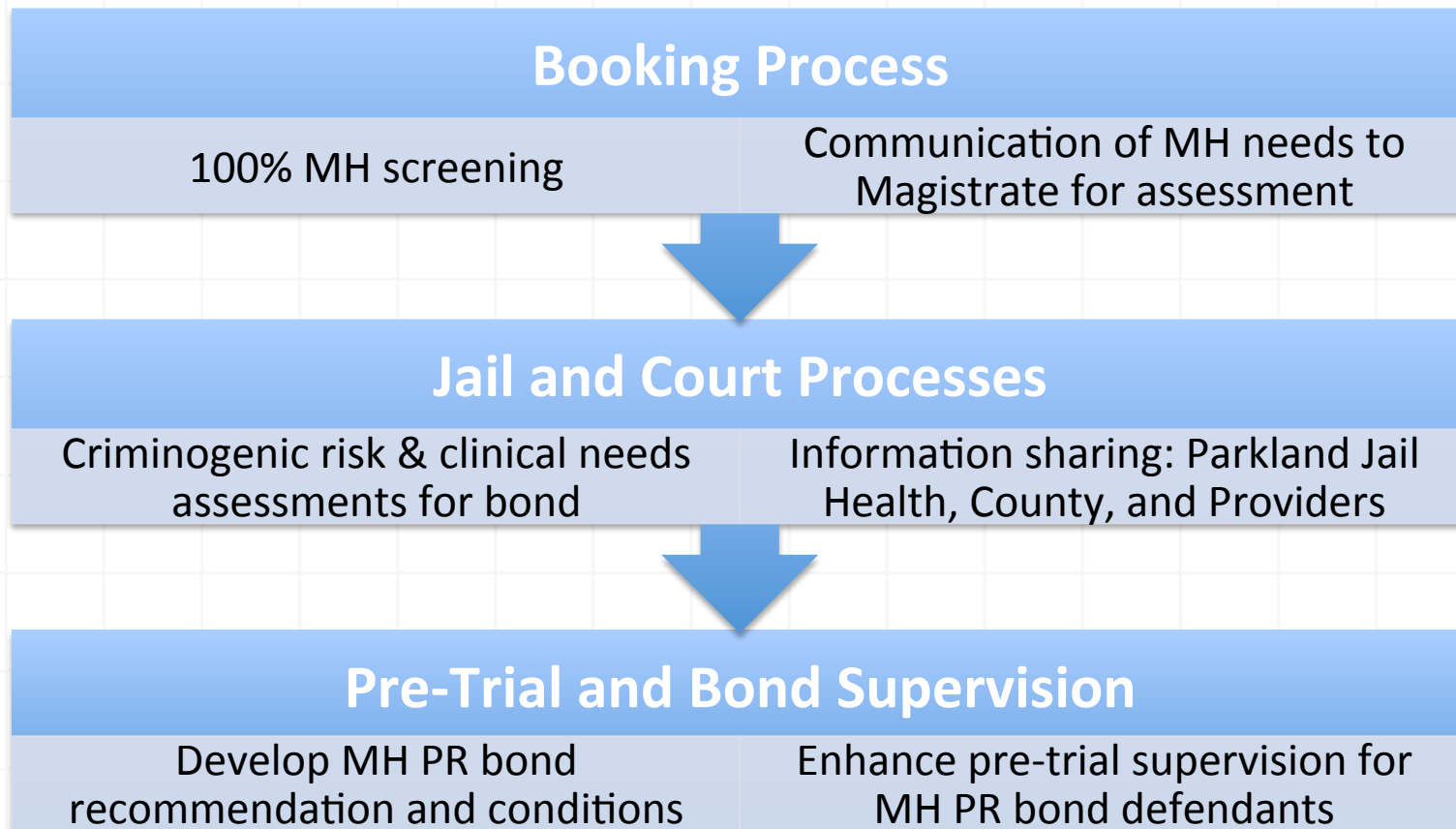
Point-in-Time Information Systems

- Increase care coordination for super-utilizers
- Increase coordination across all ED locations

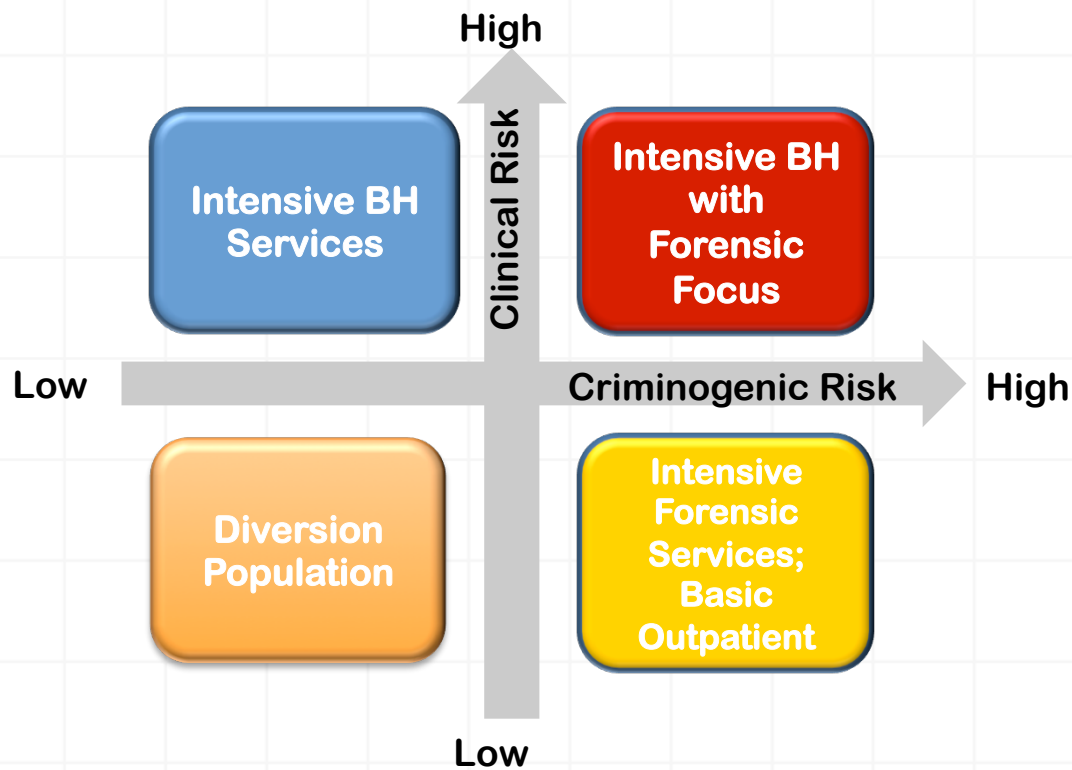
Increasing public safety by decreasing use of law enforcement for behavioral health calls and focusing on an improved medical response.

Initial Detention/Hearing/Jails/Courts (Intercepts 2-4)

Just under one-fifth of the funding within the criminal justice system to:



Risk / Needs / Responsivity Model



Intensive Community Support (Intercept 5)

Approximately one-third of the funds to build ongoing treatment and housing supports by:

Assertive Treatment

- Increase treatment slots from 725 to 2,350 slots (just over half of current need)
- Enhance capability to address severe substance use and criminogenic risk
- Stepwise growth: Begin by enhancing existing ACT, ACT-like, FACT-like teams
- Build additional teams as local (and hopefully state) funds become available
- Develop housing for all additional ACT / FACT capacity

Step-Down Levels of Care

- Increase slots by 750 to accommodate all people stepping down from assertive care
- Enhance capability to address severe substance use and criminogenic risk at all levels of care

First Episode Psychosis

- Build capacity to serve half of the estimated 400 people in Dallas County who first develop psychosis each year
- Leverage additional state, Medicaid, philanthropic, and private insurance funding

Housing Plan: Key Components

A contractor will be engaged to develop a detailed plan to be completed in first 90 days. Key components expected to include:

- Improve system coordination through a centralized function.
- Improve work with landlords: outreach, support, incentives.
- Improve housing search capacity.
- Explore and pursue master leasing strategies.
- Improve fidelity to Permanent Supported Housing model.
- Maximize city and county policy and regulatory authority.
- Improve and expand use of project-based vouchers.
- Expand commitment to project-based vouchers.
- Explore use of general obligation bonds, master leasing and other financing strategies in support of new PSH units.

Administration and Program Evaluation

Fifteen percent (15%) of funding for infrastructure to support and evaluate this transformation, including:

- 3.3% (matched 1:1 by MMHPI core funding) for **MMHPI administration of the grant,**
- 5% (plus a substantial in-kind match) for **Dallas County administration of the transition process,**
- 6.7% for **technical assistance by the CSG Justice Center and national experts** to support the transition, and
- Additional support from a national foundation to fund a **rigorous evaluation of the project's challenges and successes,** including its capacity to be taken to scale in Dallas County and across Texas.



WHERE DO WE GO FROM HERE? Review in
June, Submit Proposal Mid-July, Decision in August

TEXAS STATE
— of —
MIND

THE MEADOWS MENTAL HEALTH POLICY INSTITUTE

okay
to say

The truth is: mental illness affects more people than you may think, and we need to talk about it. It's Okay to say..." okaytosay.org



Behavioral Health Steering Committee
530 Fund Sub-Committee

Attendees

Laura Edmonds (chair), Leah Gamble, Judge Kristin Wade, Judge Lela Mays, Judge Elizabeth Frizell Ruth Kaiser, Shenna Oriabure, Gayle Dawson, and Lynn Richardson.

Minutes for May 11, 2016

Laura Edmonds called the meeting to order at 9:33am and asked for a motion to approve the minutes. Judge Wade made a motion to accept the minutes as recorded, Leah Gamble seconded the motion and the minutes were accepted as recorded by the group.

530 Fund Balance

An update of the 530 Fund Balance was provided, currently the balance for the Felony account (4020) is \$63,896.29; the Misdemeanor account (4031) is \$72,721.67 for a total of \$136,617.96. Laura Edmonds noted the Mental Health Coordinator's salary, Pride Graduation, and TADCP travel were expensed in March and April. \$5,916.60 has been spent thus far on TADCP training. Laura noted there will be additional TADCP expenses recorded in the month of May as the final costs are submitted. Laura presented a 530 Fund Monthly Expenses report for the period of October 2015-March 2016.

Policy and Procedure

Laura Edmonds presented specific policy matters to be considered. Discussions began with issue of deadlines for submission of funding requests and standardizing the method of communicating and publicizing information. Lynn Richardson suggested a representative be sent, in person, to each specialty court/judge to communicate training information and deadlines. Judge Wade proposed the responsibility of providing information to each specialty court be the onus of the specialty court coordinator. Judge Wade recommended courts attempt to obtain stipends before seeking 530 funding. Judge Wade further explained that having the entire court team trained every year is not a fiscal reality. Leah Gamble suggested compiling a brief information sheet sent by Judge Mays and followed-up by the specialty court coordinator.

Lynn Richardson requested clarification between in-state training and national training provided in-state. The subcommittee will continue to discuss if 530 funds will be available for national training taking place in-state. Lynn inquired if specialty courts had to be certified by the Governor's Office to be eligible for 530 funding. The consensus of the subcommittee was courts must be licensed by the Governor's Office to obtain 530 funding.

Subcommittee members required courts show need for training. Judge Wade advocated unless a person is involved in the governance of an entity, that 530 funds should not utilize to send the same individual to training every year. Lynn Richardson outlined the distinction of personal commitment vs. work commitment. Lynn opined 530 funds should not fund a personal commitment. The group suggested a brief application questionnaire for those seeking funding for training. Those with ideas for what to include in the questionnaire were asked to send suggestions to Laura. Clarification was made the 530 fund only pay for training for the public defenders, prosecutors, and judges associated with approved specialty court programs. Judge Mays volunteered to set up an informational meeting about 530 for the judges. Lynn suggested courts should include training cost when writing grants. Judge Wade stated judges can request for money from Commissioner's Court.

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- The specialty court coordinator will communicate deadlines, training, and stipend opportunities to specialty courts.
- Those using funds must room with the same gender if available.
- Bus passes distributed based on percentage of consumers. Bus passes to be purchased and distributed by the committee directly to the specialty court program.
- Creation of a questionnaire for those seeking 530 funding for training.

Adjourn

The meeting was adjourned at 10:19am and will reconvene on 6/8/16 @9:30am.

Triage 12	4,479
Recidivism 12-12	837
Recidivism 12-12%	18.69%

Triage 6	3,972
Recidivism 6-6	646
Recidivism 6-6%	16.26%

Triage 6	3,972
Recidivism 6-12	826
Recidivism 6-12%	20.80%

	October	November	December	January	February	March	April	May	June	July	August	September
Triage 12-12	810	1539	2201	2822	3413	3970	4513	4479				
Recidivism 12-12	19	72	174	304	461	643	864	837				
Recidivism 12-12%	2.35%	4.68%	7.91%	10.77%	13.51%	16.20%	19.14%	18.69%				
Triages 6-6	810	1539	2201	2822	3413	3970	3972	3972				
Recidivism 6-6	19	72	174	304	461	643	645	646				
Recidivism 6-6%	2.35%	4.68%	7.91%	10.77%	13.51%	16.20%	16.24%	16.26%				
Triage 6-12	810	1539	2201	2822	3413	3970	3972	3972				
Recidivism 6-12	19	72	174	304	461	643	849	826				
Recidivism 6-12%	2.35%	4.68%	7.91%	10.77%	13.51%	16.20%	21.37%	20.80%				



Crisis Services Project

CSP Total
 CSP Monthly Report DY5_No Graphs
 Last Refresh: 5/24/16 at 9:22:38 AM GMT-05:00

	Past Year Avg	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Total Service Episodes:	631	829	780	750	725	745	743	729	757.29	5,301
Total Unique Consumers:	461	810	728	661	614	589	552	503	636.71	4,457
% Change to DY 4		175.70%	157.92%	143.38%	133.19%	127.77%	119.74%	109.11%		

<u>Total Encounters by Type:</u>		2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Triage		829	780	750	725	745	743	729	757.29	5,301
Care Coordination		3,140	2,973	3,669	3,872	3,524	3,728	3,329	3,462.14	24,235
F2F Encounter		284	267	330	299	284	290	260	287.71	2,014
Sum:		4,253	4,020	4,749	4,896	4,553	4,761	4,318	4,507.14	31,550



**Crisis
Services
Project**

Frank Crowley

CSP Monthly Report DY5_No Graphs

Last Refresh: 5/24/16 at 9:22:38 AM GMT-05:00

	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Service Episodes:	829	780	750	725	745	743	729	757.29	5,301

<u>Unique Consumers:</u>	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
By N* ID	762	667	594	560	555	500	459	585.29	4,097
By Client ID	48	61	67	54	34	52	44	51.43	360
TOTAL Unique Consumers:	810	728	661	614	589	552	503	636.71	4,457
TOTAL Unique Consumers as %:	97.71%	93.33%	88.13%	84.69%	79.06%	74.29%	69.00%		

<u>Unique F2F:</u>	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
By N* ID	236	202	202	195	177	170	161	191.86	1,343
By Client ID	16	14	23	17	10	20	19	17	119
TOTAL Unique F2F:	252	216	225	212	187	190	180	182.75	1,462
TOTAL Unique F2F as %:	88.73%	80.90%	68.18%	70.90%	65.85%	65.52%	69.23%		

	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
F2F Percentages:	34.26%	34.23%	44.00%	41.24%	38.12%	39.03%	35.67%	38.08%	266.55%



Crisis Services Project

Frank Crowley

CSP Monthly Report DY5_No Graphs

Last Refresh: 5/24/16 at 9:22:38 AM GMT-05:00

Encounters by Type:	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Triage	829	780	750	725	745	743	729	757.29	5,301
Care Coordination	3,140	2,973	3,669	3,872	3,524	3,728	3,329	3,462.14	24,235
F2F Encounter	284	267	330	299	284	290	260	287.71	2,014
TOTAL Encounters:	4,253	4,020	4,749	4,896	4,553	4,761	4,318	4,507.14	31,550

Female:	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Black	121	119	96	90	95	89	78	98.29	688
Hispanic	38	34	18	24	28	20	19	25.86	181
Other	1	1		1	1		1	1	5
Unknown	2	1	5		2	3	2	2.5	15
White	84	65	65	62	44	53	51	60.57	424
TOTAL Female:	246	220	184	177	170	165	151	187.57	1,313

Male:	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Black	345	278	310	261	257	225	196	267.43	1,872
Hispanic	75	79	52	50	50	54	52	58.86	412
Other	4	4		4	4	2	1	3.17	19
Unknown	5	5	5	4	5	5	3	4.57	32
White	135	142	110	118	103	100	100	115.43	808
TOTAL Male:	564	508	477	437	419	386	352	449	3,143



Crisis Services Project

Frank Crowley

CSP Monthly Report DY5_No Graphs

Last Refresh: 5/24/16 at 9:22:38 AM GMT-05:00

<u>Gender Not Collected:</u>	2016-03	Average:	Sum:
Unknown	1	1	1
TOTAL Gender Not Collected:	1	1	1

<u>Age of Triage Encounters:</u>	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Adult	799	719	657	608	580	544	499	629.43	4,406
Minor	6	8	3	6	8	6	4	5.86	41
Uncollected	5	1	1		1	2		2	10
TOTAL Age of Triage Encounters:	810	728	661	614	589	552	503	636.71	4,457

<u>Age of F2F Encounters:</u>	2015-10	2015-11	2015-12	2016-01	2016-02	2016-03	2016-04	Average:	Sum:
Adult	249	210	224	211	183	188	178	206.14	1,443
Minor	3	6	1	1	4	2	2	2.71	19
TOTAL Age of F2F Encounters:	252	216	225	212	187	190	180	208.86	1,462

Forensic Diversion Unit (FDU) Report

	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16
Beginning Census	49	45	46	46	48	49			
Number of Referrals Received from CSP	6	8	6	10	8	5			
Adapt	6	7	6	10	8	5			
Metrocare	0	0	0	0	0	0			
Transicare	0	1	0	0	0	0			
Number of Admissions	5	7	5	7	7	3			
Number Discharged	10	6	9	5	6	3			
Number not admitted due to:									
Client qualifies for ACT	0	0	0	0	0	0			
Client qualifies for other programs	0	0	0	0	0	2			
Client didn't meet level of need required	0	0	0	0	0	0			
Other reasons	1	1	1	3	1	0			
Average Service Utilization:									
Average hours seen	11.26	10.22	9.87	11.87	10.22	11.1			
Encounter Breakdown:									
Face to Face	578	602	532	608	683	592			
Service Coordination	71	68	73	80	74	83			
Number of clients accessing:									
Emergency Room (medical)	0	0	0	0	0	1			
23-hour observation (psych)	0	0	1	0	1	1			
Inpatient (med/ psych)	1	1	2	0	0	0			
Jail book-in	0	2	1	0	1	1			
Reasons for Discharge:									
Graduate	0	0	3	0	1	2			
Client Disengagement	1	1	0	1	1	1			
Extended Jail stay (case-by-case basis)	6	5	6	1	2	0			
Other Intervening factors	3	0	0	3	2	0			
End of Month Stats:									
Number of Active FDU clients end of month	45	46	42	48	49	49			
Number of Unique Consumers	2	2	3	2	2	3			

# of clients waiting to be released from jail	5	6	4	7	8	7			
Average Length of stay on FDU (month)	12.62	12.22	12.14	12.4	12.1	12.8			
Maximum Census	46	46	46	46	46	46			

the consumers on the "waiting" list are being actively s

seen in jail until release

MAY 2016 Monthly Report

Dallas County Crisis Services Program	Program Specific and Systems Update	Summary of VO's Monthly Activities	Numeric Outcomes Reporting
1	Adapt Community Solutions (ACS) - Targets members released from jail using ACS to ensure continuity of care.	Conducted case consultations on approximately 9 cases this month and supported ACT linkage when requested	
2	Transicare Post Acute Transitional Services (PATS) - Targets high utilizers released from jail with more intensive need to ensure continuity of care.	Available for case consults/clinical support for Transicare Post-Acute Transitional Services (PATS)-Clinical Rounds Updated Flags-add/discharges Monthly reconciliation Supported 7-day after-care appts. (4-ICR/4 jail discharges)	Flags in system - VO outcomes reports in progress.
3	After-care Extension IOP/SOP (SUD) - Provides extension of SUD supportive services when VO's IOP/SOP benefits have been completed and exhausted	Review of clients for benefit exhaustion Review IPS consumers for benefit exhaustion (13) March/April 2016.	Not Applicable
4	ACT FDU - Provides ACT for high utilizers of the legal system-Responsible for approving evaluations of FDU referrals. FDU-Oversight	Clinical Review of cases for appropriate LOC/recommendations on 12 FDU referrals Reviewed 5 TX plans and consulted with 1115 Medical Director for psychiatric oversight as needed	Not Applicable
5	CSP-Cottages Project	Reviewed MH HX on 19 consumers to support appropriate H-risk referrals to program.	Not Applicable

**Transicare Reporting
Crisis Services Project**

		2015-09	2015-10	2015-11	2015-12	2015-1	2015-2	2015-3	2015-4
1	Beginning Census	62	61	63	68	76	86	79	97
2	REFERRALS	33	39	29	26	33	40	44	39
3	Admissions								
4	Referred Admitted	9	14	13	17	18	21	22	16
5	No Admit Client Refusal	1	2	0	0	2	3	3	0
6	No Admit Criteria	15	8	5	0	5	1	4	9
7	No Admit Structural	3	3	4	2	4	0	11	4
8	Pending	5	11	7	7	4	15	5	10
9	<i>PRIOR PENDING</i>								
10	Pending Admitted	3	2	9	3	5	5	10	4
11	No Admit Client Refusal	1	0	3	0	0	1	4	1
12	No Admit Criteria	6	2	2	0	0	0	0	1
13	No Admit Structural	0	0	0	0	1	0	0	0
14									
15	Total Admissions	12	16	22	20	23	26	32	20
16									
17	Discharges								
18	Success Transfer	1	0	5	3	3	13	3	5
19	DC Midterm Disengage	4	6	6	2	7	6	2	7
20	DC Rapid Disengage	1	1	2	3	0	0	1	4
21	DC Structural	7	7	4	4	3	14	8	8
22	Total Discharged	13	14	17	12	13	33	14	24
23	Active End Of Month	61	63	68	76	86	79	97	93
24									
25	Outcome Data								
26	<i>Terrell State Hospital Linkages</i>								
27	≤7 Connect To Prescriber	4	3	2	4	5	3	4	1
28	≤30 Connect To Prescriber	0	0	0	0	0	0	0	0
29	Missed Metric	0	0	0	1	1	1	1	0
30	Total Released	4	3	2	5	6	4	5	1
31									
32	Cummulative ≤7 Connect %	80.6%	100.0%	100.0%	90.0%	87.5%	85.0%	84.0%	84.6%
33	Cummulative ≤30 Connect %	87.1%	100.0%	100.0%	90.0%	87.5%	85.0%	84.0%	84.6%
34	Missed Metric	12.9%	0.0%	0.0%	10.0%	12.5%	15.0%	16.0%	16.0%
35	<i>Unduplicated Served</i>								
36	Monthly Unduplicated	91	89	81	84	99	102	113	108
37	DSRIP YTD Unduplicated Served	349	89	114	166	201	227	273	300
38									
39	<i>Encounter Data</i>								
40	F2F Encounter	407	388	335	411	467	595	360	585
41	Care Coord	163	174	143	184	154	135	118	173
42	Total	570	562	478	595	621	730	478	758

Jail Competency Stats 2016

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals
Active													
New Evals - Incompetent	46	64	64	45	67								286
Waiting for the hospital - End of month	72	86	89	93	78	0	0	58	0	0	0	0	
Less than 30 days	22	45	37	41	37								
30 to 60 days	31	15	31	27	14								
Greater than 60 days	19	26	21	25	27								
Returned to jail from the hospital	12	21	22	16	23	0	0	0	0	0	0	0	94
Felony	10	18	18	13	21								
Average length of stay (days)	359	119	101	125	114								
Misdemeanor	2	3	4	3	2								
Average length of stay (days)	80	89	58	68	34								
Previous return legal case pending	21	23	23	24	22	0	0	0	0	0	0	0	113
30 to 60 days	4	4	8	8	8								
61 to 120 days	5	7	5	8	8								
121 to 180 days	6	5	5	3	2								
181 days or longer	6	7	5	5	4								
Closed													
New Evals - Competent	31	45	42	34	53								205
Admitted to the state hospital	24	30	26	38	58	0	0	0	0	0	0	0	176
Felony -- Maximum Secure Facility	3	9	5	7	8								
Average wait (days)	52	140	168	181*	152								
Felony -- Non-Maximum Secure Facility	11	14	10	13	32								
Average wait (days)	80	62	61	70	48								
Misdemeanor	10	7	11	18	18								
Average wait (days)	71	59	56	63	40								
Hospital Return Legal Case Resolved	7	8	17	14	10	0	0	0	0	0	0	0	56
Felony	7	7	14	9	9								
Average length of stay (days)	52	98	72	38	84								
Misdemeanor	0	1	3	5	1								
Average length of stay (days)	0	6	8	7	14								
Case dismissed at the hospital	5	5	5	6	9	0	0	0	0	0	0	0	10
Felony	0	0	0	1	1								
Misdemeanor	5	5	5	5	8								

* Average wait for Maximum Secure Facility is calculated for males waiting. The wait for a female bed averages between 20 to 30 days

Unique Individuals

2016

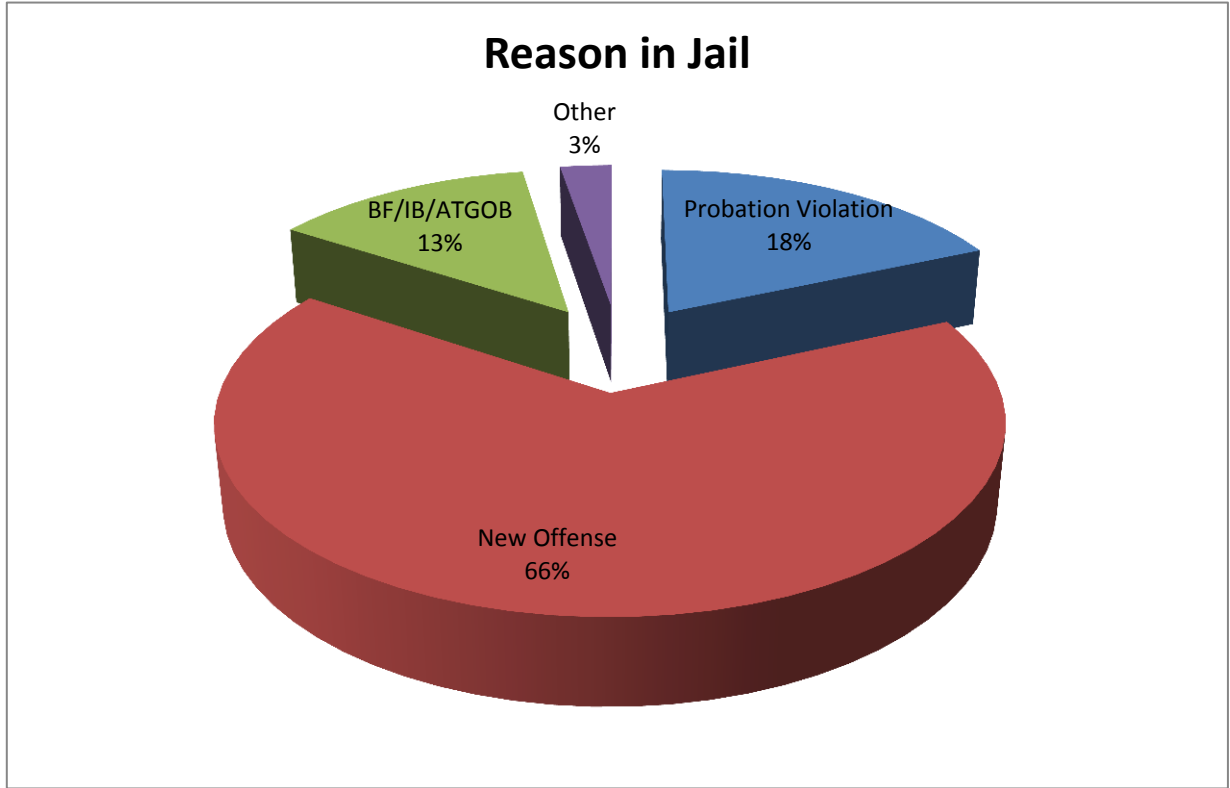
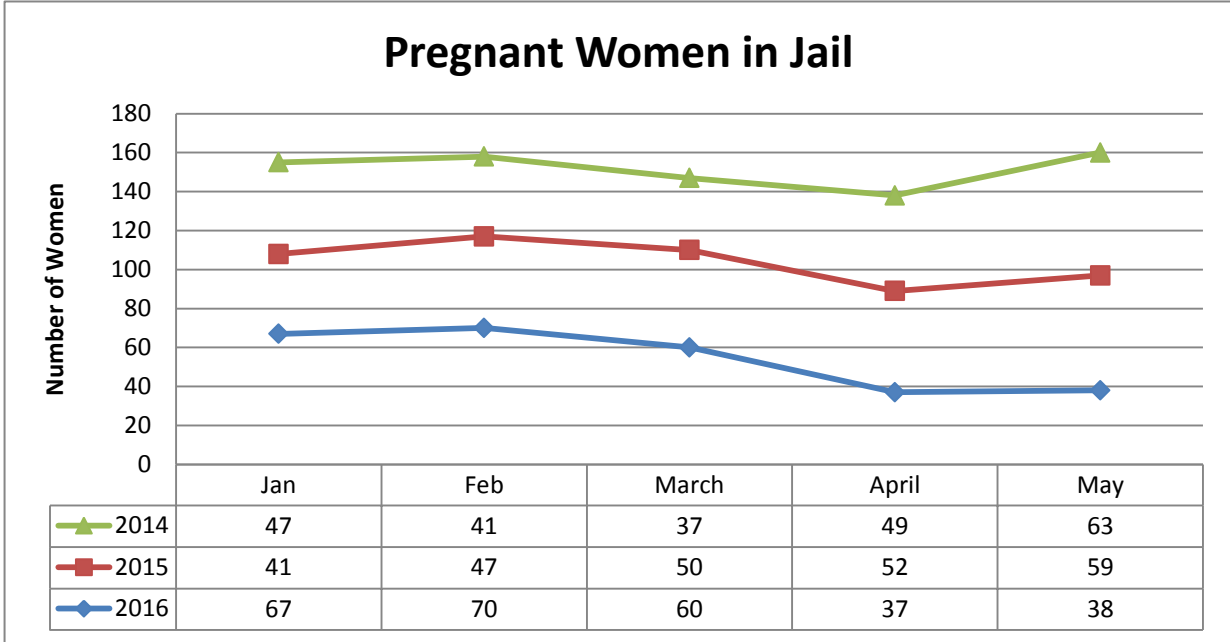
Days In Jail

38

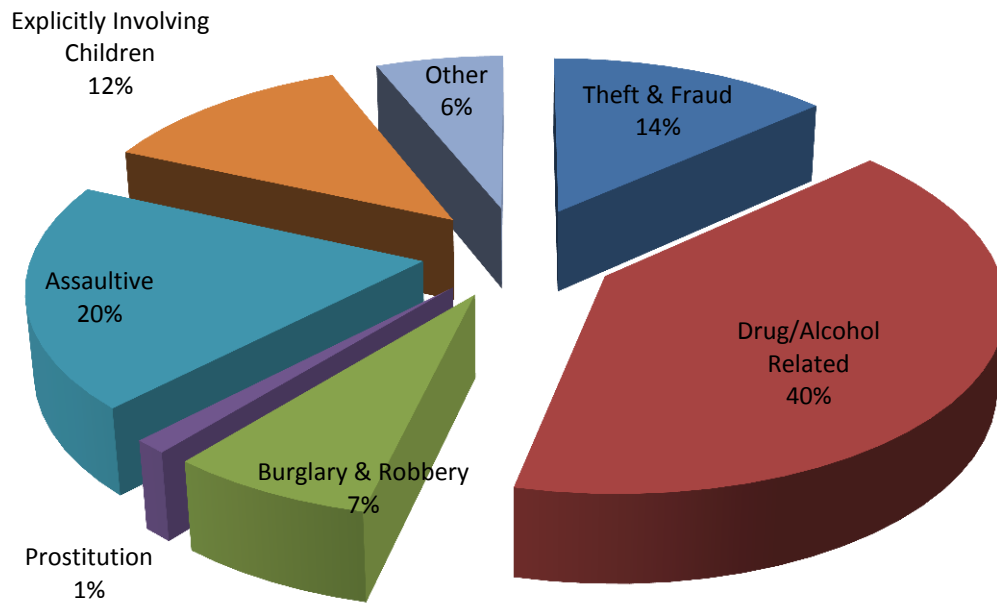
Average Number of Days in Jail for May releases

905

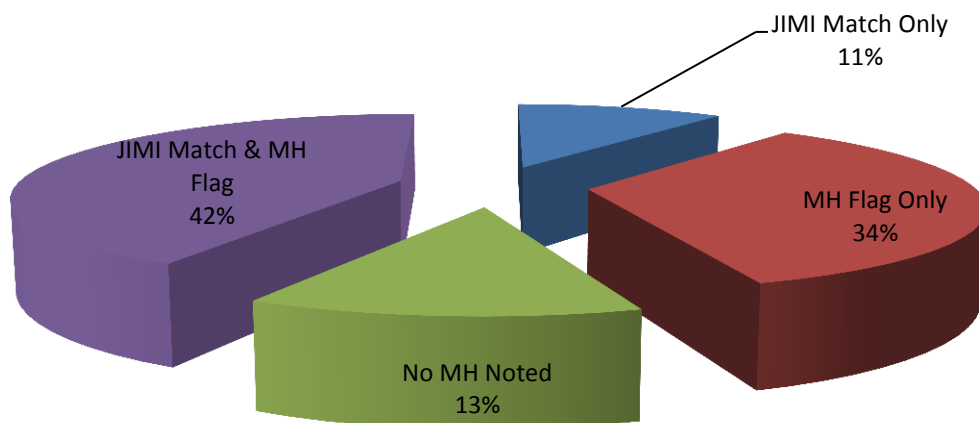
23.82



Offense Type

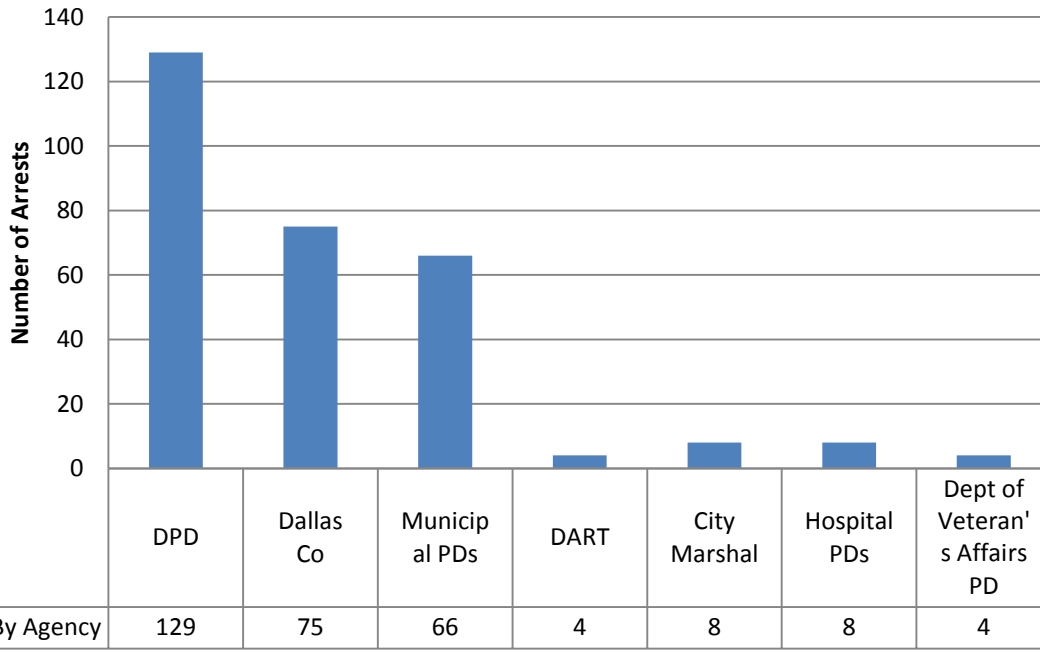


Mental Health Concerns

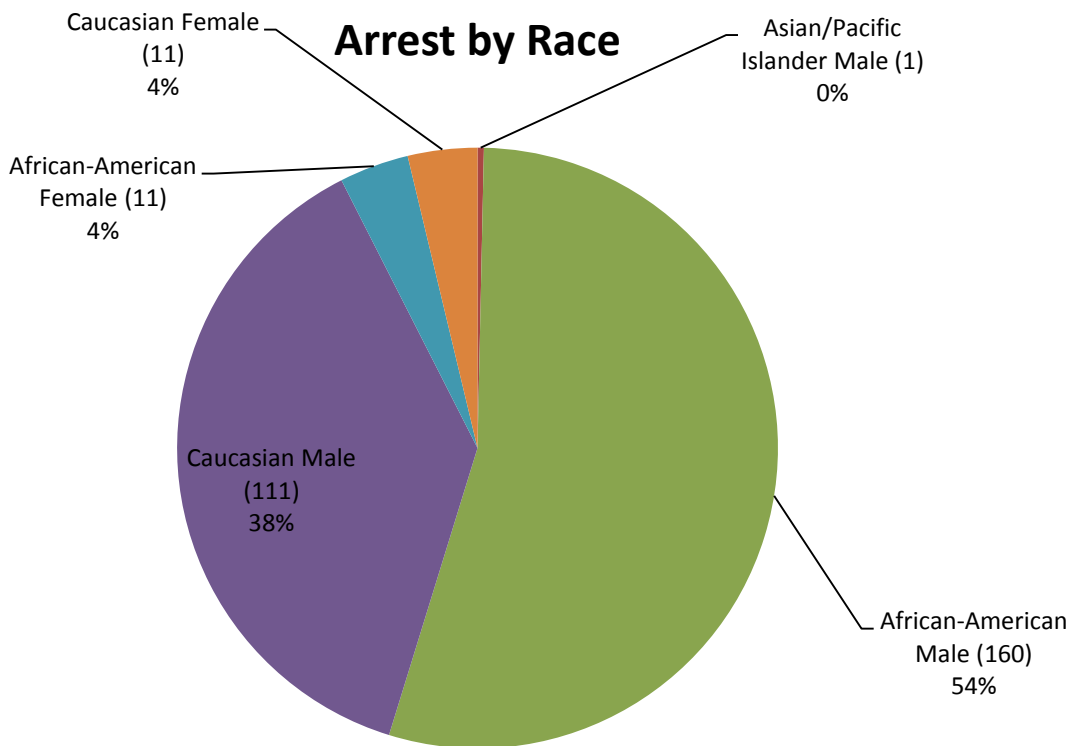


	May 2013	May 2014	May 2015	May 2016
In Jail (atleast one day in month-not total at end of the month)	37	63	59	38
Probation Violations	13	16	9	7
New offenses	21	36	47	25
BF/IB/ATGOB only				5
Parole Violations only	1	2	1	-
Other reason in jail	2	9	2	1
Released Since Last Month	17	30	40	14
Released to SAFPF	1	1	1	-
Released to Nexus Recovery	1	1	7	6
Released to state hospital	1	-	2	-
Released to other treatment	-	-	1	-
Released to TDCJ (ID or SJ)	3	5	-	1
Released on Probation	1	3	9	1
Released on bond	4	6	6	1
Released to Other Agencies	2	3	4	1
Released for other Reasons	4	11	10	4
New Cases Since Last in Month	15	25	25	12
Emails To Court Coordinators for settings	1	2	3	1
Email Notifications to Probation	3	5	2	-
Email Notifications to TDCJ desk (Sgt. Temple)	2	1	-	1
Pregnant Patient Interviews for Referral Purposes	-	-	-	-
Nexus Notifications	-	-	-	-

Arrest By Agency

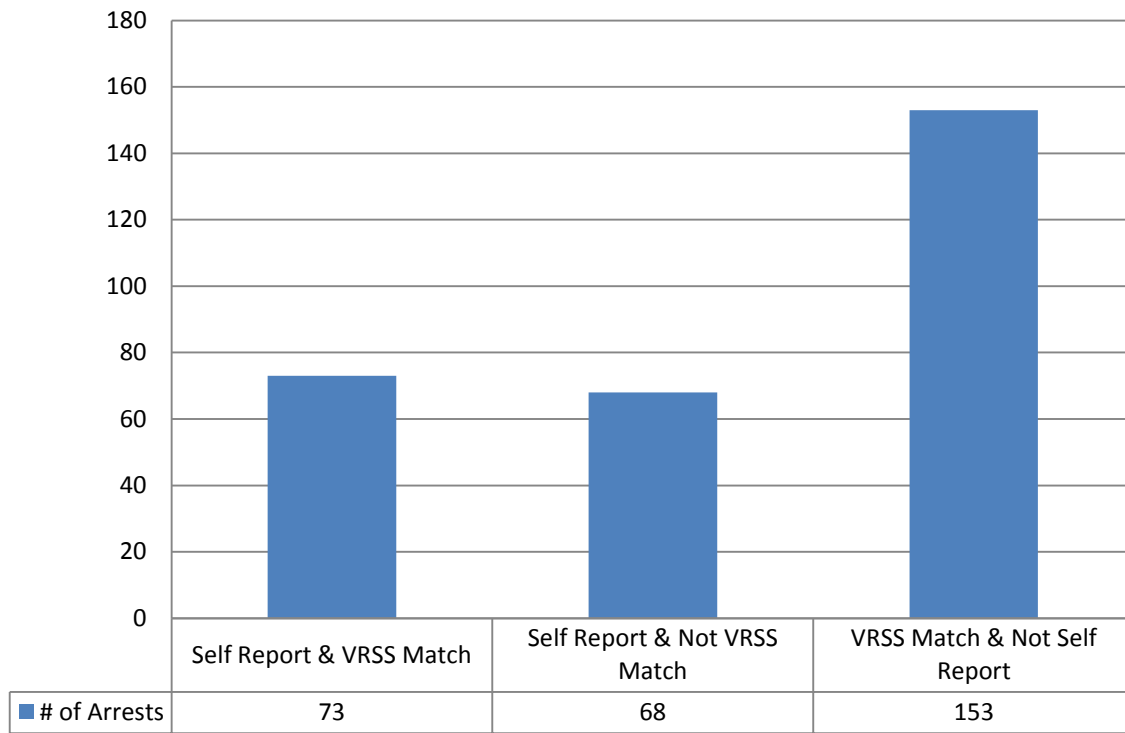


Arrest by Race

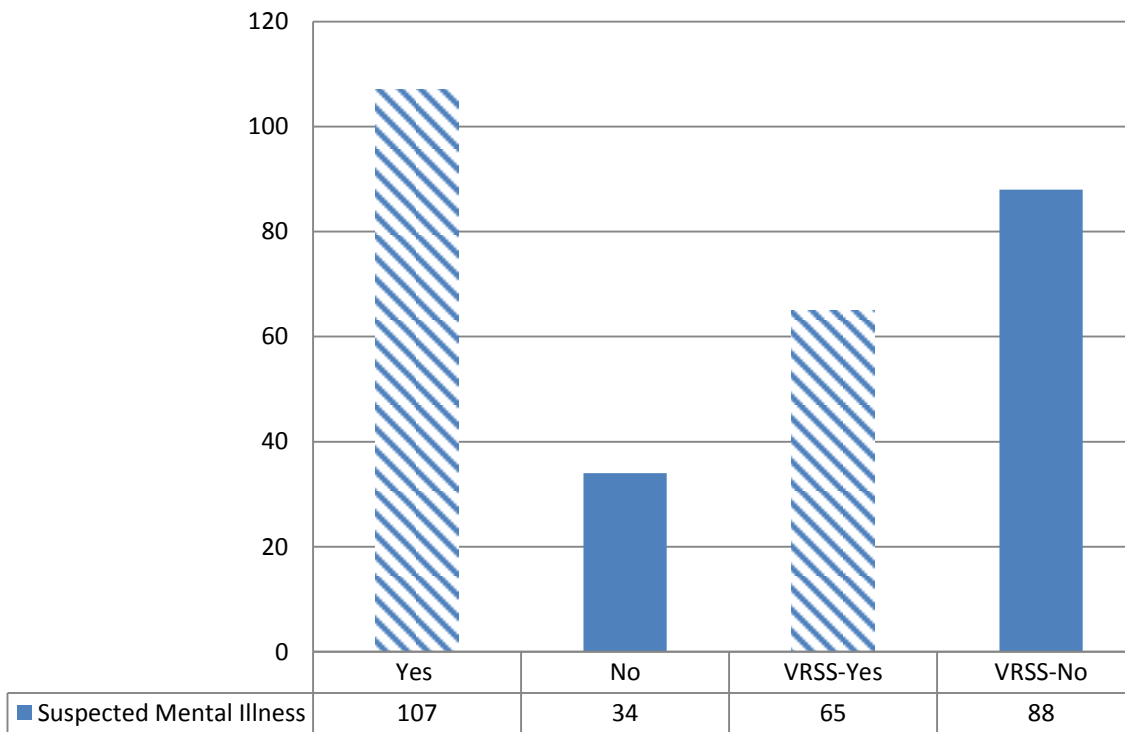


Veteran's Report
May 2016

Reporting



Suspected Mental Illness



2016

308

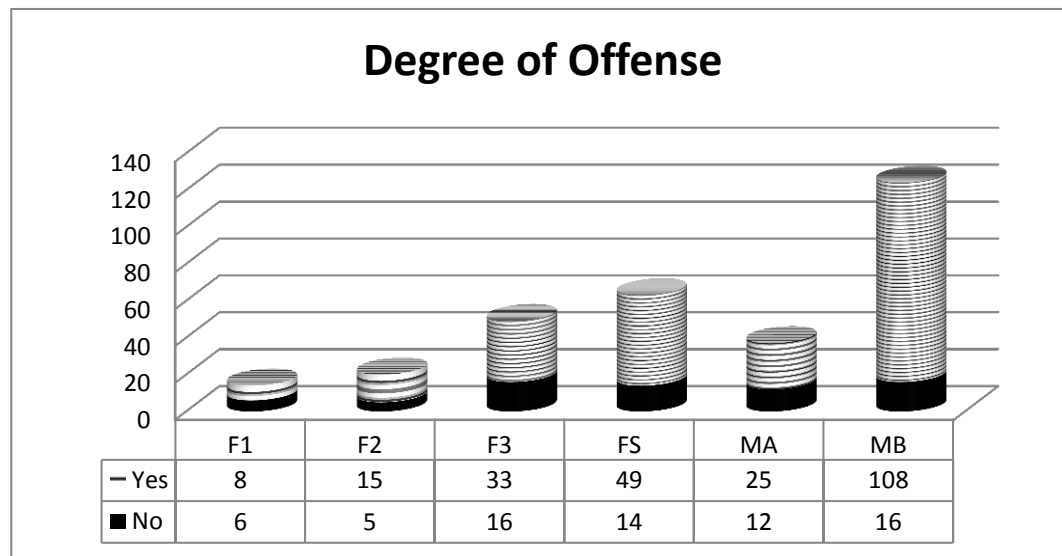
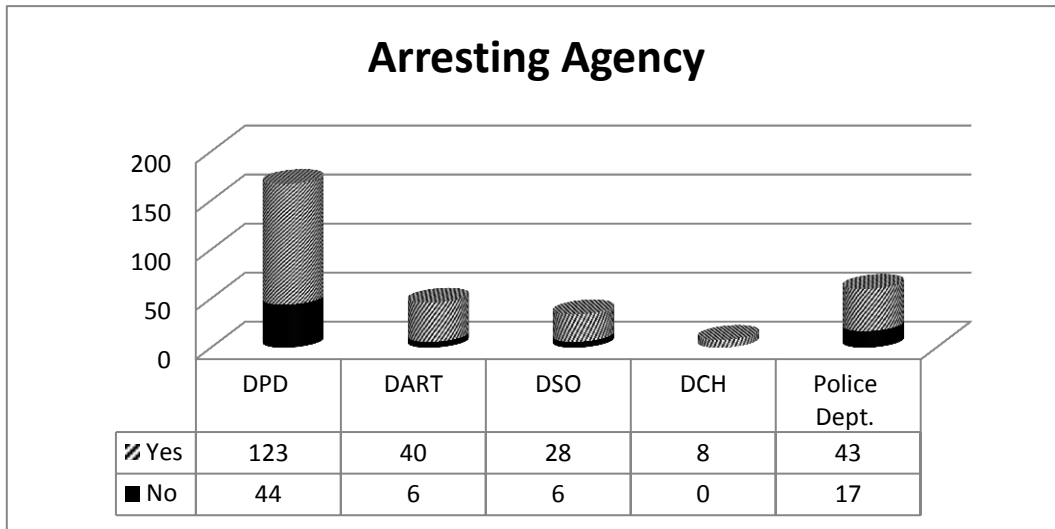
16,031

50.89

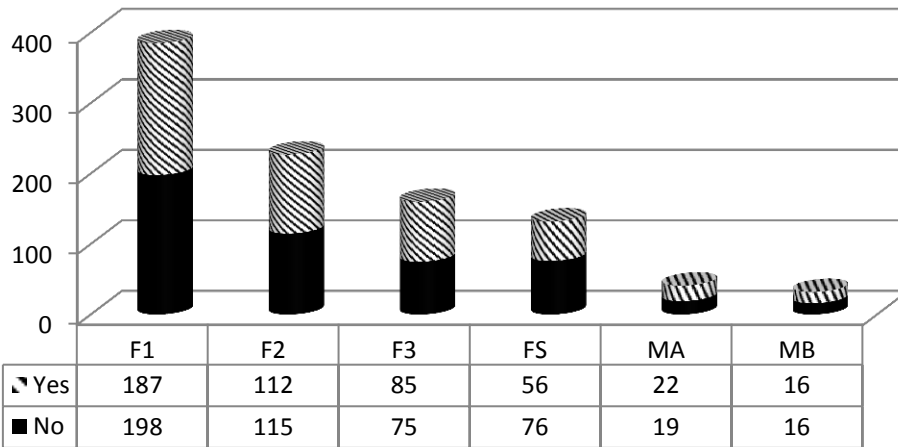
Unique Individuals

Days In Jail

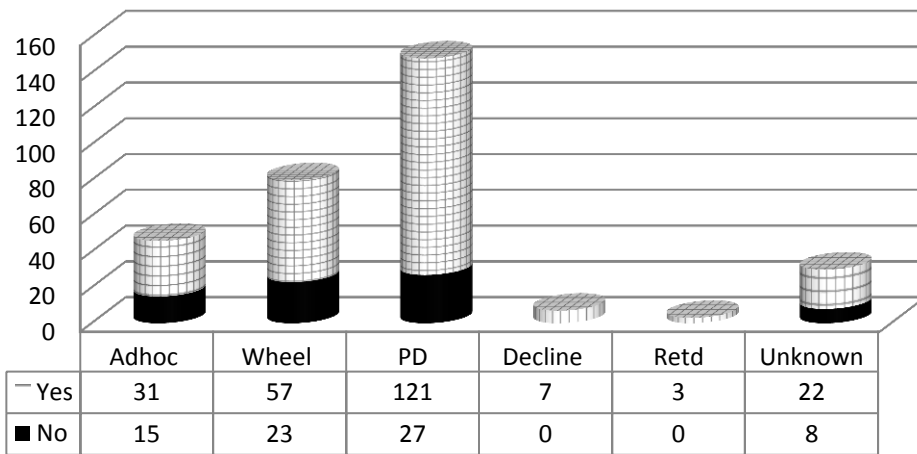
Average Number of Days in Jail



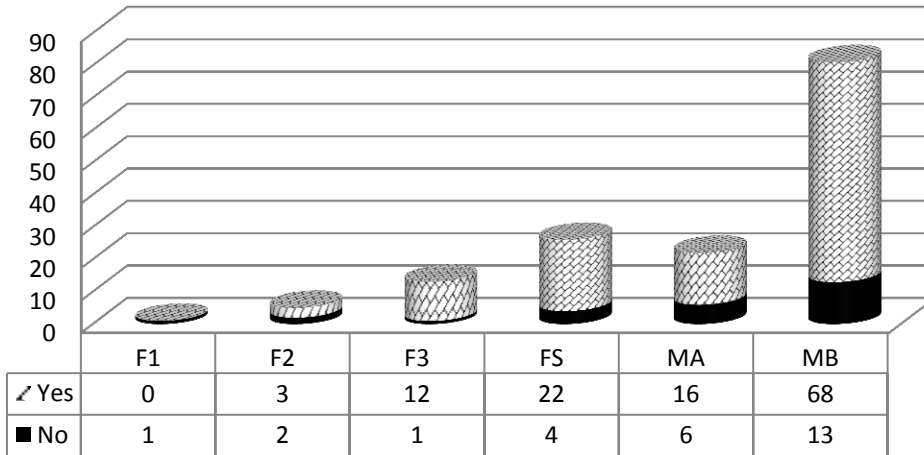
Avg. Days in Jail



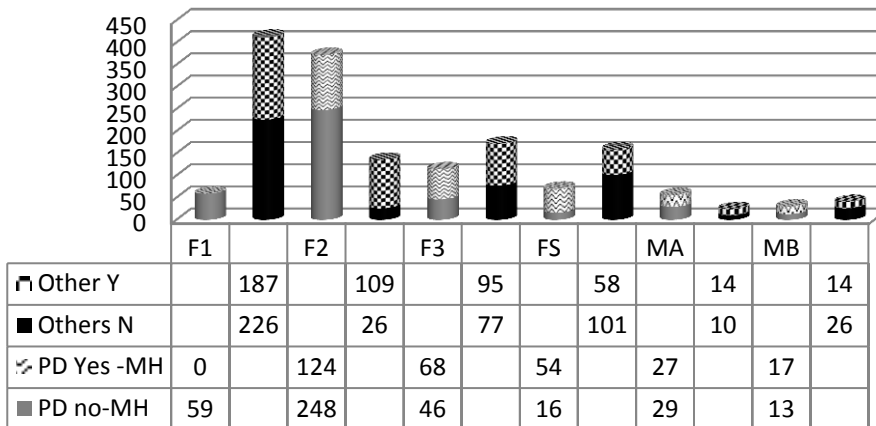
Attorney Type



PD Degree of Offense



Avg. Days in Jail Attorney Type



Monthly NorthSTAR Intakes

Month-Year	Total inmates booked into the jail with a NorthStar match	Book in Totals for the month	% of people with a NorthStar match booked into the jail
2007 Total	6501	93413	7%
2008 Total	8200	99580	8%
2009 Total	10636	98407	11%
2010 Total	12994	96245	14%
2011 Total	15810	90429	17%
2012 Total	17036	83524	20%
2013 Total	17762	81010	22%
2014 Total	16919	73168	23%
Jan-15	1433	5941	24%
Feb-15	1228	5164	24%
Mar-15	1546	5979	26%
Apr-15	1587	6350	25%
May-15	1505	5901	26%
Jun-15	1440	5848	25%
Jul-15	1537	6357	24%
Aug-15	1480	6103	24%
Sep-15	1360	5697	24%
Oct-15	1391	5713	24%
Nov-15	1194	5042	24%
Dec-15	1297	5090	25%
2015 Total	16998	69185	25%
Jan-16	1436	5839	25%
Feb-16	1596	6086	26%
Mar-16	1449	5788	25%
Apr-16	1513	6036	25%
May-16	1453	6029	24%
2016 Total	7447	29778	25%

Multi-Bookin NorthSTAR Tracking

2016	# Times Booked In	# Unique Clients
	Bookins 16	1
	Bookins 13	2
	Bookins 10	3
	Bookins 9	5
	Bookins 8	4
	Bookins 7	6
	Bookins 6	12
	Bookins 5	27
	Bookins 4	51
	Bookins 3	146
	Bookins 2	732
	Bookins 1	4995
Total		5984
As of 6/1/16		

HARRY INGRAM FY2016 ATLAS STATISTICS 203/HAWTHORNE

MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	REV	GRADUATES	PROBATION MODIFICATIONS	DISMISSALS	OTHERS	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT ATLAS PARTICIPANTS	CURRENT PARTICIPANTS IN CUSTODY	FORMER ATLAS PARTICIPANTS	BOND
May	76	2	78	0	0	0	0	1	1	0	1	3	75	26	0	0	26

HARRY INGRAM FY2016 MISDEMEANOR MENTAL HEALTH COURT STATS CCCAP1/WADE

MONTH	BEGINNING # OF PENDING CASES	Rediverts	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	DISMISSAL	OTHER	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT PARTICIPANTS	NUMBER OF GRADUATES	BOND***
May	108	0	12	120	0	0	8	0	1	9	111	35	0	35

May 2015 FY2016 MHPD STATS

MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TRIALS	PLEAS	COND. DISM.	REVO-CATION	DISMISSALS	INCOMPETENT	REFERRALS	OTHER COUNSEL APPT.	TOTAL CLOSED
R. LENOX	210	29	239	0	13	6	2	10	0	0	12	45
L. TAYLOR	240	18	258	0	8	3	4	0	1	1	0	17

MALCOM HARDEN FY2016 FELONY COMPETENCY STATISTICS

MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR
May	180	16	0	0	0	0	0	1	0	2	0	0	0	0	2	16

MALCOM HARDEN FY2016 MISDEMEANOR COMPETENCY STATISTICS

MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR
May	156	46	0	0	0	0	0	27	0	21	0	0	0	0	4	27

May 2015 MI Court

MONTH	TOTAL NEW CASES RECEIVED	NEW CLIENTS AT GREEN OAKS	NEW CLIENTS AT MEDICAL CENTER MCKINNEY	NEW CLIENTS AT PARKLAND	NEW CLIENTS AT DALLAS BEHAVIORAL HEALTH	NEW CLIENTS AT HICKORY TRAILS	NEW CLIENTS AT ZALE LIPSHY	NEW CLIENTS AT SUNDANCE BEHAVIORAL HEALTHCARE	NEW CLIENTS AT OCEANS BEHAVIORAL HOSPITAL	PROBABLE CAUSE HEARINGS HELD	NO CONTEST COMMIT	CONTESTED COMMIT	FORCED MEDS HEARING IN COURT
L. ROBERTS	242	237	0	0	0	0	0	5	0	6	0	16	16
L. TAYLOR	23	0	0	7	8	0	8	0	0	0	0	2	2

RANDA BLACK MI COURT

MONTH	NEW CLIENTS	PROBABLE CAUSE HEARINGS HELD	NO CONTEST COMMIT TO TSH	CONTESTED COMMIT TO TSH	RECOMMITMENTS	MEDICATION HEARINGS	OUTPATIENT	JURY TRIAL
May	54	5	4	8	3	19	3	0

*More clients were sent to TSH for competency restoration in May. This contributed to the decrease in new cases.

Personal Stats - Misdemeanor Cases Only

Prosecutor		Hire Date									Court	
McKimmey, Kendall		2/11/2013									MENTAL HEALTH	
2016 Term	Jury Trial Leads*	Jury Picks	Non-Jury Trials	Pleas	Dismissals	Compe-	Conditional	OCR	Class C Traffic Dispos	A&B Dispositions	List Pending Cases Assigned to you	
January	0	0	0	0	0	0	0	0	0	0	App'd	Unapp'd
February	0	0	0	0	0	0	0	0	118	0		
March	0	0	0	1	0	0	0	0	92	1	0	
January Term Total	0	0	0	0	0	0	0	0	210	1		
April	0	0	0	0	0	0	0	0	91	0		
May	0	0	0	0	8	7	0	3	55	8		
June	0	0	0	0	0	0	0	0	91	0	0	
April Term Total	0	0	0	0	0	0	0	0	237	8		
July	0	0	0	0	0	0	0	0	0	0		
August	0	0	0	0	0	0	0	0	0	0		
September	0	0	0	0	0	0	0	0	0	0	0	
July Term Total	0	0	0	0	0	0	0	0	0	0		
October	0	0	0	0	0	0	0	0	0	0		
November	0	0	0	0	0	0	0	0	0	0		
December	0	0	0	0	0	0	0	0	0	0	0	
October Term Total	0	0	0	0	0	0	0	0	0	0		
Y-T-D Total	0	0	0	1	8	7	0	3	447	9		

The Bridge - MAY 2016	2015	2015	2015	2015	2015	2015	2015	2015	2015	2016	2016	2016	2016	2016	
	May	June	July	August	Sep.	Oct.	Nov.	Dec	Jan	Feb.	Mar.	Apr.	May	AVG.	
Bridge Emergency Shelter	289	282	292	311	314	307	298	286	316	309	329	292	306	302.3846	
Bridge Transitional Shelter	112	112	105	111	114	119	114	104	113	118	116	114	113	112.6923	
Direct Referrals to Other Shelters	645	710	706	713	709	531	534	529	671	541	520	527	537	605.6154	
Care Management	867	915	954	905	1221	1177	1135	1034	1137	1035	1044	1052	1114	1045.385	
Job Ready (Workforce)	100	111	113	99	118	125	118	122	92	59	63	58	70	96	
Job Placements (Workforce)	28	34	29	23	34	30	27	25	18	23	19	42	39	28.53846	
Housing Placements	26	32	20	30	26	28	32	26	45	39	32	47	36	32.23077	
Metrocare Mental Health Serv.	368	420	418	400	393	425	395	389	400	340	387	348	349	387.0769	
Metrocare Chemical Dep. Serv.	51	43	46	99	78	73	65	71	59	88	98	219	233	94.07692	
Parkland Clinic*	777	820	748	821	705	829	720	721	727	805	795	760	852	775.3846	
VA Services	28	38	23	26	18	20	7	11	20	11	23	14	7	18.92308	
Judicial Re-Entry	7	12	6	5	3	6	4	10	4	3	4	5	2	5.461538	
Jail Release (General)	24	23	24	34	22	22	15	19	28	18	16	16	20	21.61538	
Triage Assessments*	515	602	544	581	556	475	465	448	497	430	416	424	443	492	

Each category represents *unduplicated guests* , not totals served.

*exception - Parkland Clinic and Triage Assessment numbers are for totals served.

NAME OF MHMR PROGRAM: Metrocare Services
PROGRAM: SNOP

MONTH OF REPORT:5_2016

DATE SUBMITTED: 1_2016

	ATLAS	Post-DDRTC	STAC	Misd.	PRIDE	DDRTC	PROBATION ICM
1. Number of Offenders served at the beginning of the month:	17	36	20	27	4	47	66
2. Number of Referrals received:	2	5	3	5	0	15	3
3. Number of Assessments:	2	5	3	5	0	10	3
4. Number of Admissions:	2	5	3	5	0	10	3
5. Average length of stay by months:	2.8	1.38	2.64	1.9	2.28		4.27
5. a. Average hours served:	6.37	4.02	3.83	4.89	3.7		4.49
6. Services Utilized:	0	0	0	0	0	0	0
6. a. Visits to ER (medical)	0	0	0	0	0	0	0
6. b. 23-hour Observation (psych)	0	0	0	0	0	0	0
6. c. Inpatient Stay (med/psych)	0	0	0	0	0	0	0
6. d. Jail days less than 30 days:						0	
7. Number of Discharges:	6	7	10	3	1	11	2
7. a. Terminations (jail more than 30days)	0	0	0	0	0	0	0
7. b. Warrants/Suspension: (medical d.c.; abscond)	0	0	0	0	0	5	0
7. c. Graduates	0	0	0	0	0	6	1
8. Number of Offenders served at the end of month:	13	34	13	29	3	46	67
9. Total served in the month:	19	41	23	32	4	57	67
10. Number of Offenders on the waiting list:	0	0	0	0	0	20	0
11. Minimum/Maximum Census per FTE allocation	20-25	30-38	30-38	30-38	10-12	60	100-125
12. % of FTE Assigned	1	1.5	1.5	1.5	0.5		5
13. Vacancy(s)	0	0	0	0	0	0	0

Each FTE covers 20-25

PAROLE ICM
87
4
4
4
6.15
3.04
0
0
0
0
4
0
3
1
87
87
0
100-125
5
1



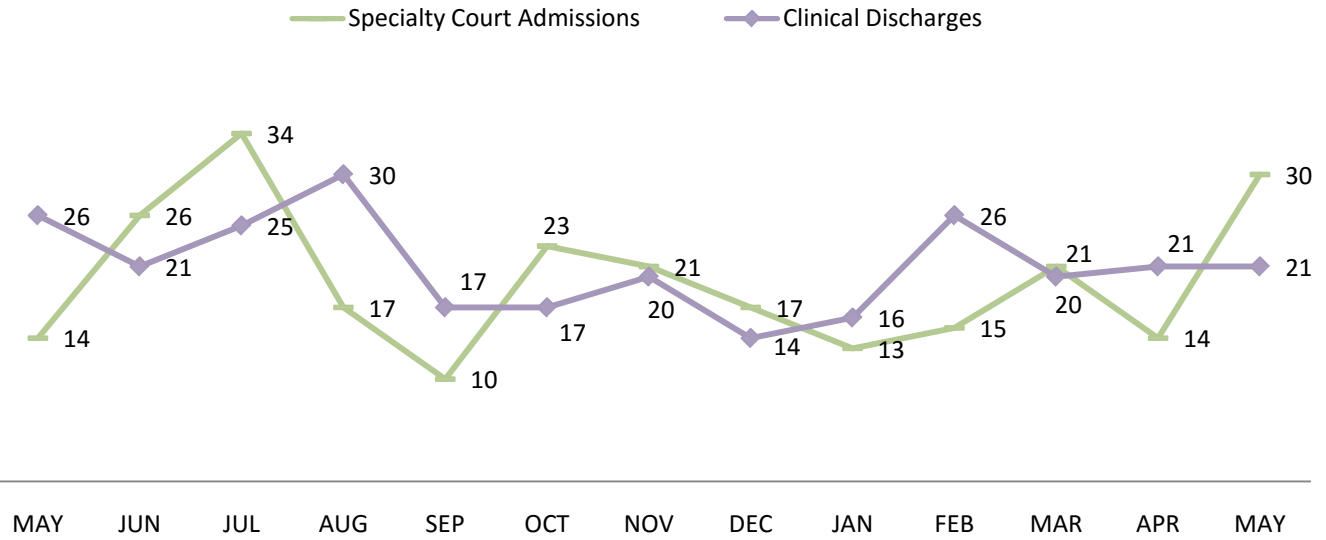
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The Intersection of Research & Practice

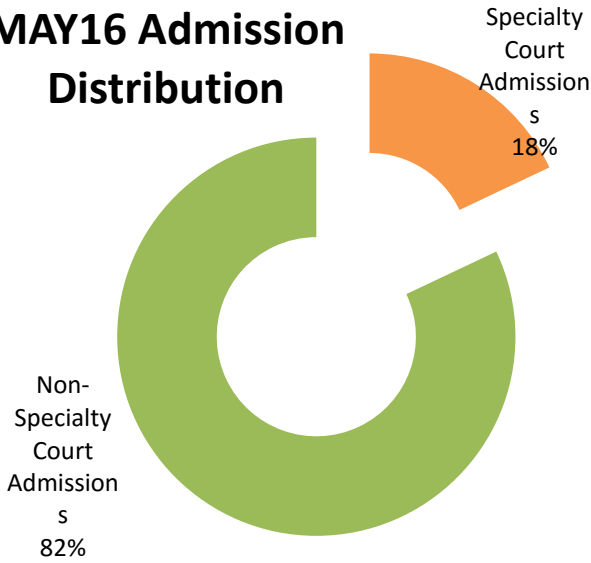
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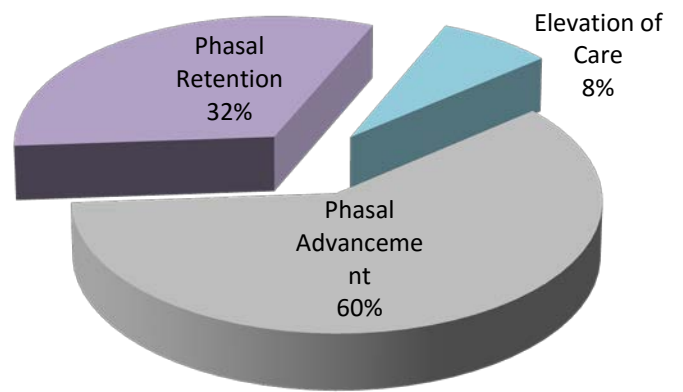
Specialty Court Admission / Discharge Trend



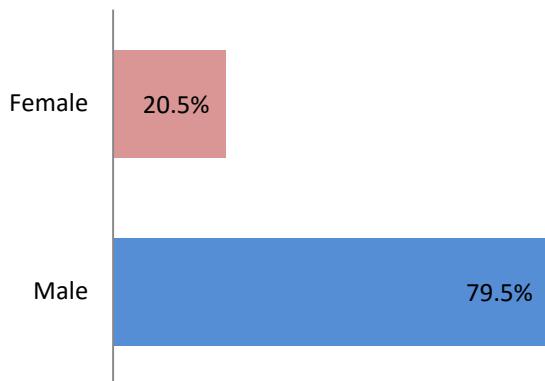
MAY16 Admission Distribution



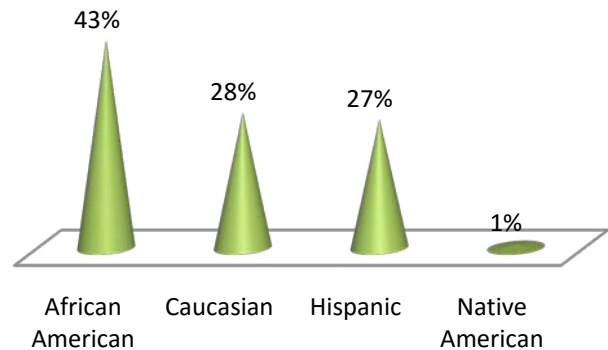
MAY16 Spec. Crt Treatment Prog. Progression Rate



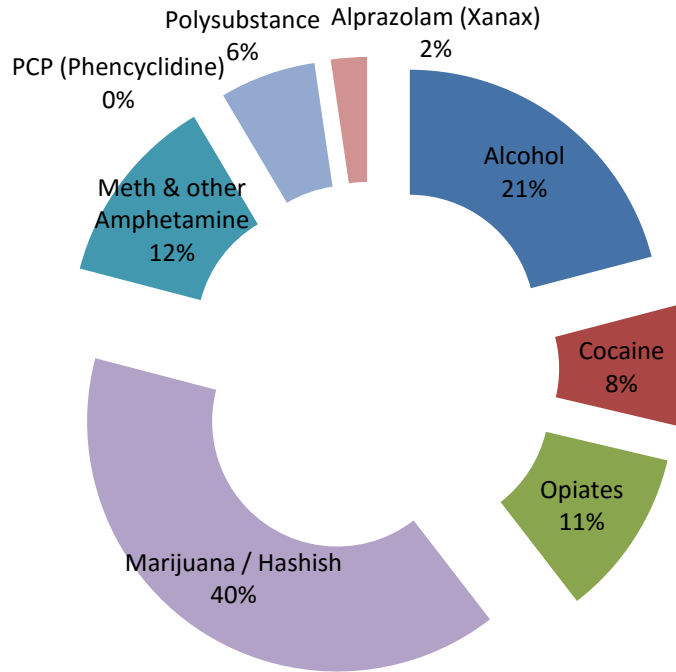
MAY16 Spec. Crt. Gender Distribution



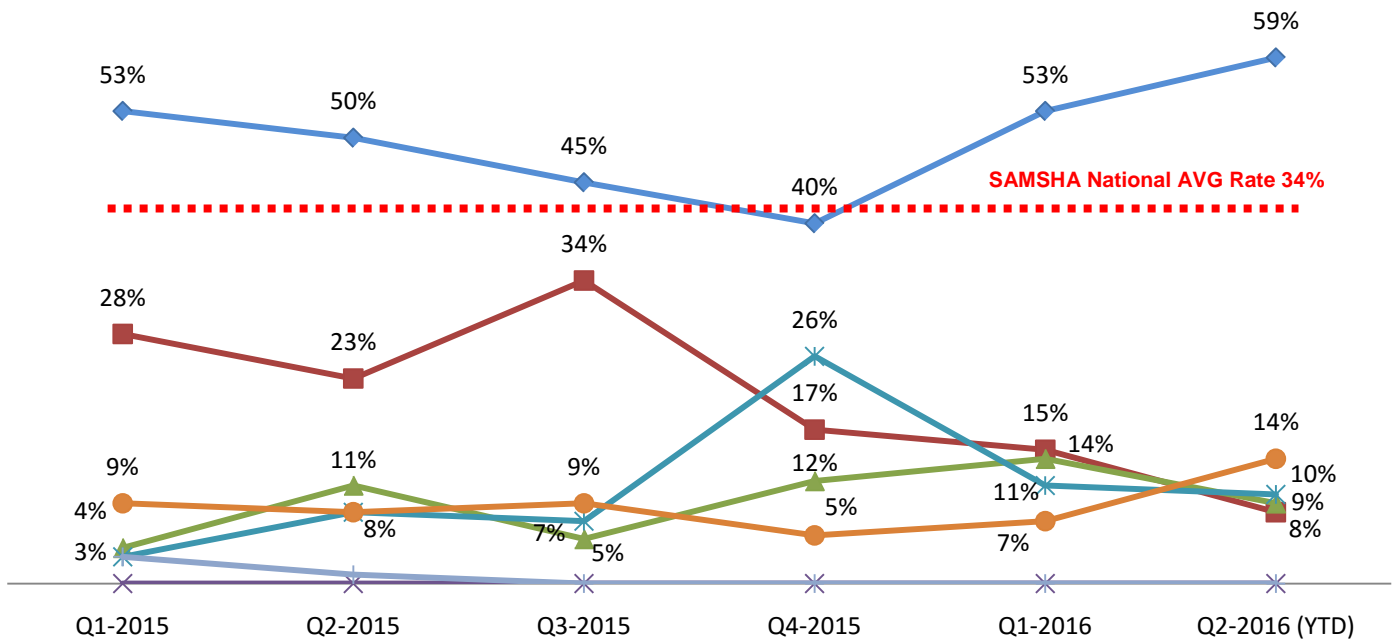
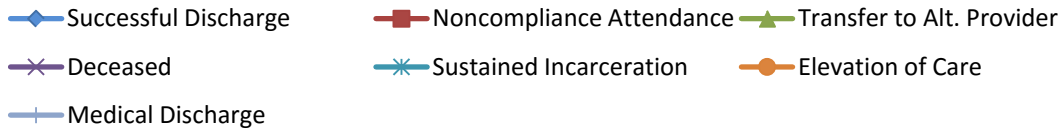
MAY16 Spec. Crt Ethnic Distribution



Spec. Crt. Patients by Reported Drug of Choice



Spec. Crt. Outcome Distribution Trend



DIVERT DATA MAY 2016

FY16	Start of Month	New admissions	DA Opt-out	Unsuccessful discharge	Graduates	End of Month
Sept. 15	163	7	0	2	19	149
Oct. 15	149	16	0	4	4	157
Nov. 15	157	11	0	3	0	165
Dec. 15	165	5	1	2	12	155
Jan. 16	155	10	1	8	12	144
Feb. 16	144	21	0	0	10	153
Mar. 16	153	13	0	2	9	155
Apr. 16	155	14	0	3	6	160
May. 16	160	9	2	5	3	159
Jun. 16						
Jul. 16						
Aug. 16						
total		106	4	29	75	

ATLAS Court

FY15*	Start of Month	New admissions	DA Opt-out	Unsuccessful discharge	Graduates	End of Month
Total		29		22	9	
Ave. Per Month		2.41666667		1.83333333	0.75	

FY16	Start of Month	New admissions	DA Opt-out	Unsuccessful discharge	Graduates	End of Month
Sept. 15	22	5	0	2	0	25
Oct. 15	25	5	0	2	6	22
Nov. 15	22	2	0	0	0	24
Dec. 15	24	4	0	0	0	28
Jan. 16	28	5	0	3	0	30
Feb. 16	30	4	0	0	3	31
Mar. 16	31	3	0	6	0	28
Apr. 16	28	2	0	1	0	29
May-16	29	2	0	4	1	26
Jun. 16						
Jul. 16						
Aug. 16						

* Denotes that numbers are slightly lower due to missing data.

STAC REPORT MAY 2016 - BHSC

FY16	Start of Month	New Admissions	MH Current Clients	Unsuccessful discharges	Graduates	End of Month
Sep. 15	208	15	24	13	8	202
Oct. 15	202	20	24	1	0	221
Nov. 15	221	19	23	5	19	216
Dec. 15	216	19	22	0	0	235
Jan. 16	235	19	27	0	0	254
Feb. 16	254	16	22	3	30	237
Mar. 16	237	14	26	0	7	244
Apr. 16	244	2	29	4	0	242
May. 16	242	10	22	5	35	212
Jun. 16						
Jul. 16						
Aug. 16						

MMH Court - MAY 2016

FY15	Start of Month	New admissions	DA Opt-out	Unsuccessful discharge	Graduates	End of Month
Total		81		43	64	
Ave. Per Month		6.75		3.58333333	5.33333333	

FY16	Start of Month	New admissions	DA Opt-out	Unsuccessful discharge	Graduates	End of Month
Sept. 15	52	9	0	3	3	55
Oct. 15	55	10	0	1	2	62
Nov. 15	62	7	0	3	1	65
Dec. 15	65	4	0	3	3	63
Jan. 16	63	5	0	6	0	62
Feb. 16	62	9	0	3	8	60
Mar. 16	60	8	0	6	4	58
Apr. 16	58	6	0	1	4	59
May-16	59	9	0	2	0	66
Jun. 16						
Jul. 16						
Aug. 16						

STAR Court - MAY 2016

* FY15	Start of Month	New admissions	DA Opt-out	Unsuccessful discharge	Graduates	End of Month
Total		12		8	9	
Ave. Per Month		1		0.66666667	0.75	

FY16	Start of Month	New admissions	DA Opt-out	Unsuccessful discharge	Graduates	End of Month
Sept. 15	18	2	0	3	3	14
Oct. 15	14	0	0	2	0	12
Nov. 15	12	1	0	0	0	13
Dec. 15	13	3	0	1	0	15
Jan. 16	15	5	0	1	4	15
Feb. 16	15	2	0	3	0	14
Mar. 16	14	2	0	1	0	15
Apr. 16	15	0	0	0	0	15
May-16	15	0	0	1	0	15
Jun. 16						
Jul. 16						
Aug. 16						

* Denotes slightly lower numbers due to incomplete data.