THE STEPPING UP INITIATIVE

Utilizing Data-Driven Strategic Approaches to Reduce the Number of People with Serious Mental Illness in Jail

Sarpy County, Nebraska

QUARTERLY REPORT

Data from Quarter 2
August 10, 2023

Stepping Up Agenda

1. Welcome and Introductions

2. Review Data & Corresponding Strategies

3. Stepping Up: Sarpy County SIM and Steering Committee (SCSC) Priorities

4. Next Quarterly Meeting: April 20, 2023 10:30am

5. Other/ Updates

6. Conclude

Stepping Up Key Measures

Definitions

SMI (Serious Mental Illness): Individuals who self-report and/or are diagnoised with (i) Schizophrenia, (ii) Schizoaffective Disorder, (iii) Delusional Disorder, (iv) Bipolar Affective Disorder, (v) Major Depresssion, and (vi) Obsessive Compulsive Disorder.

Connection to Care/Service Type 1: Information and Referral; defined as any one of the following:

Verbal or Written information is shared about a service or program with the client.

Written contact information about a service or program is shared with the client.

Connection to Care/Service Type 2: Linking to Service; defined as any one of the following:

Verbal or written communication is received confirming that the client and the agency have been connected.

Verbal or written communication is received confirming that the client has an appointment.

The client is aware of the agency and the agency is aware of the client's need for service.

LAI (Long Acting Injectable): LAI antipsychotics are a pharmacologic strategy for treating patients with schizophrenia who relapse due to nonadherence to anti-psychotic medication.

Recidivism: Refers to a person's relapse into criminal behavior and is measured by criminal acts that result in being "re-booked" into jail within the 12 months of the person's last release date.

MHFA (Mental Health First Aid): Is an 8-hour public education training that introduces participants to risk factors and warning signs of mental health problems, builds understanding of the impact, and provides an overview of common treatments. Recertification is required every 3 years.

CIT (Crisis Intervention Training): The Memphis Crisis Intervention Team (CIT) is an innovative police based first responder program that has become nationally known as the "Memphis Model" of pre-arrest jail diversion for those ina mental illness crisis. This program provides law enforcement based crisis intervention training fro helping those individuals with mental illness. Involvement in CIT is voluntary and based in the patrol division of the police department. In addition, CIT works in partnership with those in mental health care to provide a system of services that is friendly to the individuals with mental illness, family members, and the police officers.

MAT (Medication-Assisted Treatment): Is the use of medications with counseling and behavioral therapies to treat substance use disorders and prevent opiod overdoses.

Data Applications Used:

P1-CAD: This system dispatches Law and Fire agencies of Sarpy County

LRMS: Law Records Management System for the Law agencies of Sarpy County

ProPhoenix RMS: This will be replacing LRMS for the Law agencies of Sarpy County

IMACS: Jail booking software used at the Sarpy County Jail

MH: System used to help track MHY type customers

Stepping Up 4 Key Measures

Goal 1: Reduce the number of people with a Serious Mental Illness (SMI) Booked into Jail

Numerator: The number of adults booked into the jail with a diagnosed or self-reported SMI during the month

Denominator: The average daily total population of the jail for the month

Data Source: Sarpy County Jail

Date Provided: Monthly

Review Frequency: Monthly

Notes: Data through April 2019 reflects individuals with an MH disorder. Data from May 2019 to current reflect individuals with SMI

Goal 2: Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Numerator: The monthly average LOS for those discharged from jail with a SMI

Demoninator: The average daily total population of the jail for the month

Data Source: Sarpy County Jail

Date Provided: Monthly

Review Frequency: Monthly

Notes: July 2018 - March 2019 used Mental Health Disorder; April 2019 definition changed to SMI
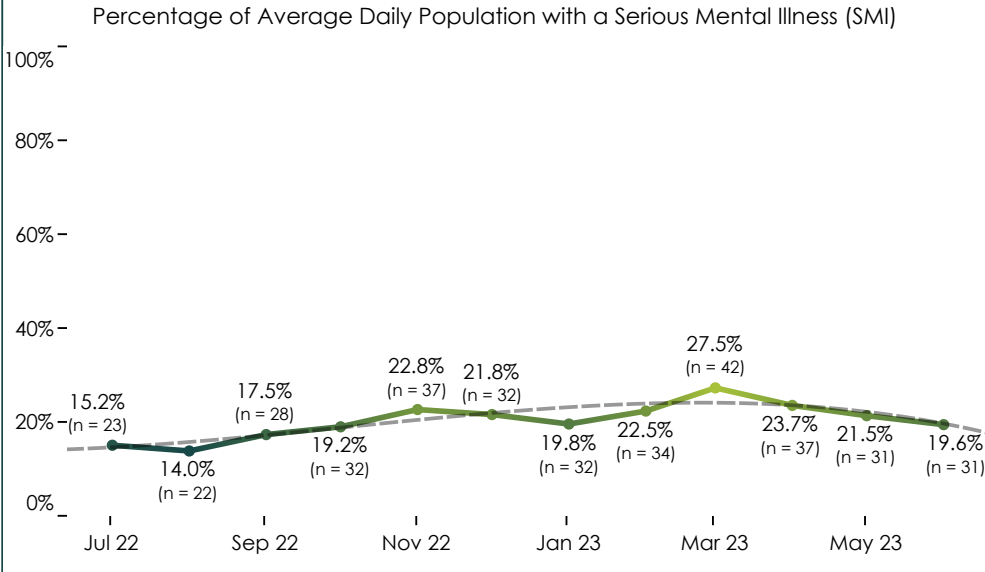
Goal 3: Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail

Numerator: The number of individuals with a Serious Mental Illness (SMI) who have a Type 1 an/or Type 2 Connections to Care made during incarceration - reported during the month they were released from jail.

Denominator: Number of all individuals with a SMI discharged from jail that month

Data Source: Public Defender's Office; Sarpy County Jail

Date Provided: Monthly

Review Frequency: Monthly

Notes: Definition updated January 2021; targets updated May 2021; Note: an individual can be represented in each measure (type 1 and 2) but multiple connections within the same type will only count once.

Goal 4: Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail

Numerator: The number (percentage) of individuals with a SMI who are re-booked into jail for new offenses within 12 months following their last release date.

Denominator: Total number of bookings

Data Source: Sarpy County Jail

Date Provided: Monthly

Review Frequency: Monthly

Notes: Will be compared for the SMI population and non-SMI populations.
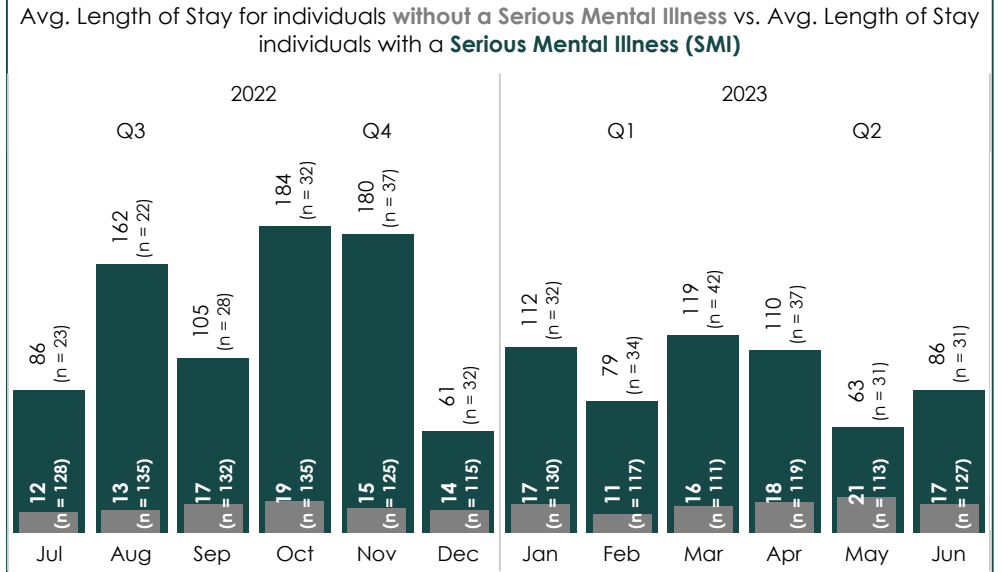
Stepping Up 4 Key Measures

Goal 1:
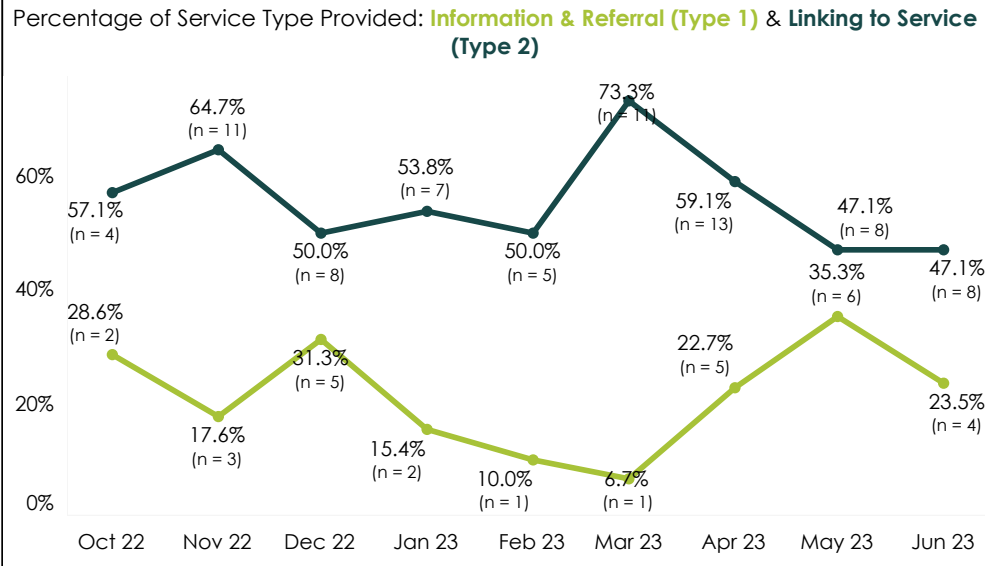Reduce the number of people with a Serious Mental Illness (SMI) Booked into Jail

Percentage of Average Daily Population with a Serious Mental Illness (SMI)

- 15.2% (n = 23) — Jul 22
- 14.0% (n = 22)
- 17.5% (n = 28) — Sep 22
- 19.2% (n = 32)
- 22.8% (n = 37) — Nov 22
- 21.8% (n = 32)
- 19.8% (n = 32) — Jan 23
- 22.5% (n = 34)
- 27.5% (n = 42) — Mar 23
- 23.7% (n = 37)
- 21.5% (n = 31) — May 23
- 19.6% (n = 31)

Goal 2:
Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Avg. Length of Stay for individuals without a Serious Mental Illness vs. Avg. Length of Stay individuals with a Serious Mental Illness (SMI)

2022

Quarter	Month	SMI	Non-SMI
Q3	Jul	86 (n = 23)	12 (n = 128)
Q3	Aug	162 (n = 22)	13 (n = 135)
Q3	Sep	105 (n = 28)	17 (n = 132)
Q4	Oct	184 (n = 32)	19 (n = 135)
Q4	Nov	180 (n = 37)	15 (n = 125)
Q4	Dec	61 (n = 32)	14 (n = 115)

2023

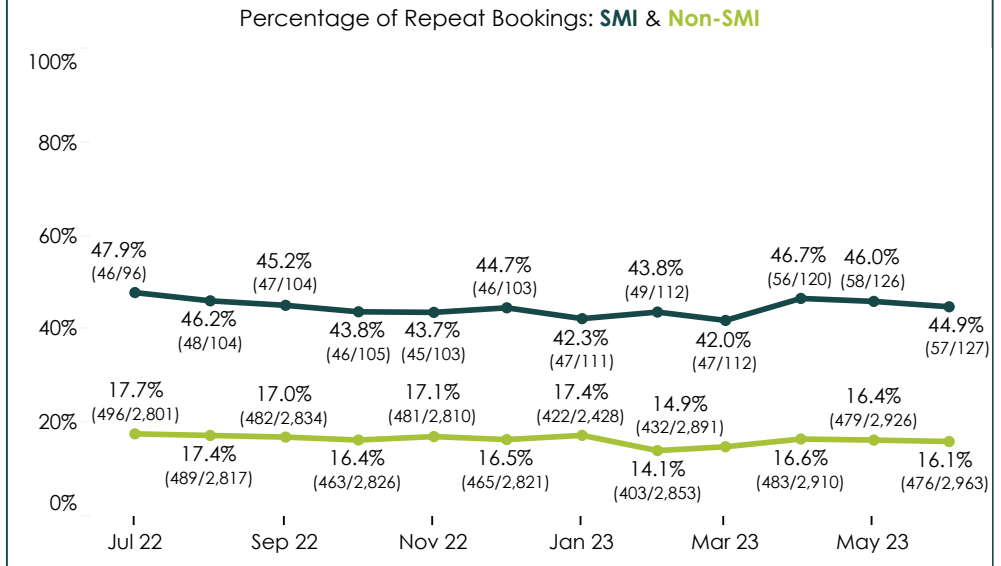| Quarter	Month	SMI	Non-SMI
Q1	Jan	112 (n = 32)	17 (n = 130)
Q1	Feb	79 (n = 34)	11 (n = 117)
Q1	Mar	119 (n = 42)	16 (n = 111)
Q2	Apr	110 (n = 37)	18 (n = 119)
Q2	May	63 (n = 31)	21 (n = 113)
Q2	Jun	86 (n = 31)	17 (n = 127)

Goal 3:
Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail

Percentage of Service Type Provided: Information & Referral (Type 1) & Linking to Service (Type 2)

- Oct 22: 57.1% (n = 4); 28.6% (n = 2)
- Nov 22: 64.7% (n = 11); 17.6% (n = 3)
- Dec 22: 50.0% (n = 8); 31.3% (n = 5)
- Jan 23: 53.8% (n = 7); 15.4% (n = 2)
- Feb 23: 50.0% (n = 5); 10.0% (n = 1)
- Mar 23: 73.3% (n = 11); 6.7% (n = 1)
- Apr 23: 59.1% (n = 13); 22.7% (n = 5)
- May 23: 47.1% (n = 8); 35.3% (n = 6)
- Jun 23: 47.1% (n = 8); 23.5% (n = 4)

Goal 4:
Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail

Percentage of Repeat Bookings: SMI & Non-SMI

SMI:
- 47.9% (46/96)
- 46.2% (48/104)
- 45.2% (47/104)
- 43.8% (46/105)
- 43.7% (45/103)
- 44.7% (46/103)
- 42.3% (47/111)
- 43.8% (49/112)
- 42.0% (47/112)
- 46.7% (56/120)
- 46.0% (58/126)
- 44.9% (57/127)

Non-SMI:
- 17.7% (496/2,801)
- 17.4% (489/2,817)
- 17.0% (482/2,834)
- 16.4% (463/2,826)
- 17.1% (481/2,810)
- 16.5% (465/2,821)
- 17.4% (422/2,428)
- 14.1% (403/2,853)
- 14.9% (432/2,891)
- 16.6% (483/2,910)
- 16.4% (479/2,926)
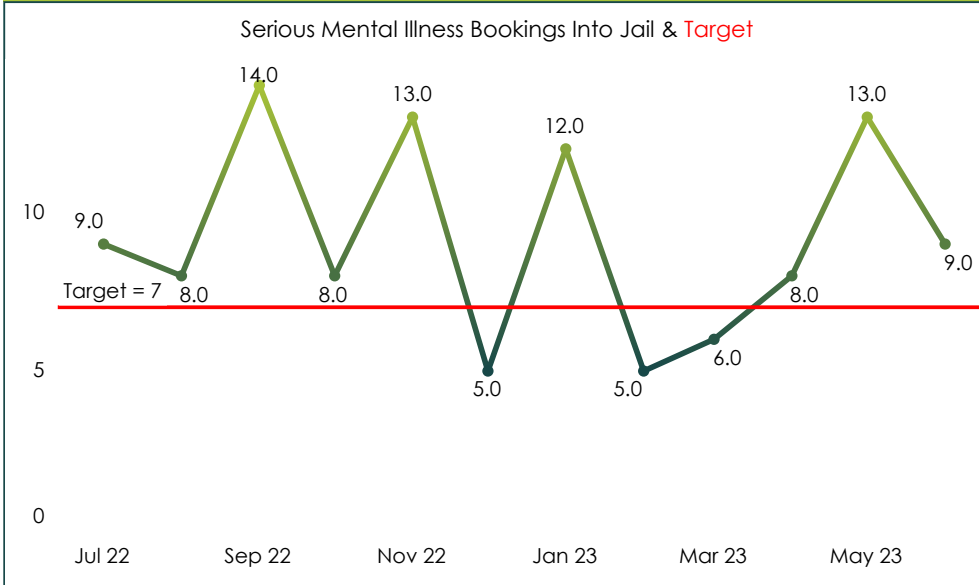- 16.1% (476/2,963)

"Set, Measure, & Achieve" Stepping Up 4 Key Measures

Goal 1:	Reduce the number of people with a Serious Mental Illness (SMI) Booked into Jail **by 10% annually**

Measure:	The number of individuals with a SMI booked into jail each month (Self-Report)
Data Source:	Sarpy County Jail
Date Provided:	Monthly
Review Frequency:	Monthly
Notes:	8-month average for 2019 was 7.75 SMI bookings per month. A 10% reduction would be 7 bookings per month (2 less each month)
	(#) in label is n for month

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail **by 5% (annually)**

Numerator:	The monthly average LOS for those **discharged** from jail with a SMI
Demoninator:	The average daily total population of the jail for the month
Data Source:	Sarpy County Jail
Date Provided:	Monthly
Review Frequency:	Monthly
Notes:	2019 had 111.5 days ALOS for SMI. A 5% reduction is 105.9 days

Goal 3:	Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail **by 10%**

Numerator:	The number of individuals with a SMI who are represented by the Public Defender's Office who experience an intake into jail that month who are linked to a service via Type 1 or Type 2
Denominator:	The number of all people with a SMI who experience intake into jail that month
Data Source:	Public Defender's Office; Sarpy County Jail
Date Provided:	Monthly
Review Frequency:	Monthly
	an individual can be represented in each measure (type 1 and 2) but multiple connections within the same type will only count once.
Notes:	Category 1 avg. 28.1% (Jan-Apr 2021) Target =25% (10% reduction) Category 2 avg. 43.8% (Jan-Apr 2021) Target = 39% (10% reduction)
	(#) in label is n for month

Goal 4:	Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail **by 5% annually**

Numerator:	Number of repeat bookings (regardless of reason for booking)
Denominator:	Total number of bookings
Data Source:	Sarpy County Jail
Date Provided:	Monthly
Review Frequency:	Monthly
Notes:	2019 rate was 21.4% for those with an SMI. 5% reduction is 20.3% rate of recidivism (6 less for year, 106 individuals). 2020 avg. 39.9% (all months) Target = 38% (5% reduction) *(#) in label is n for month*

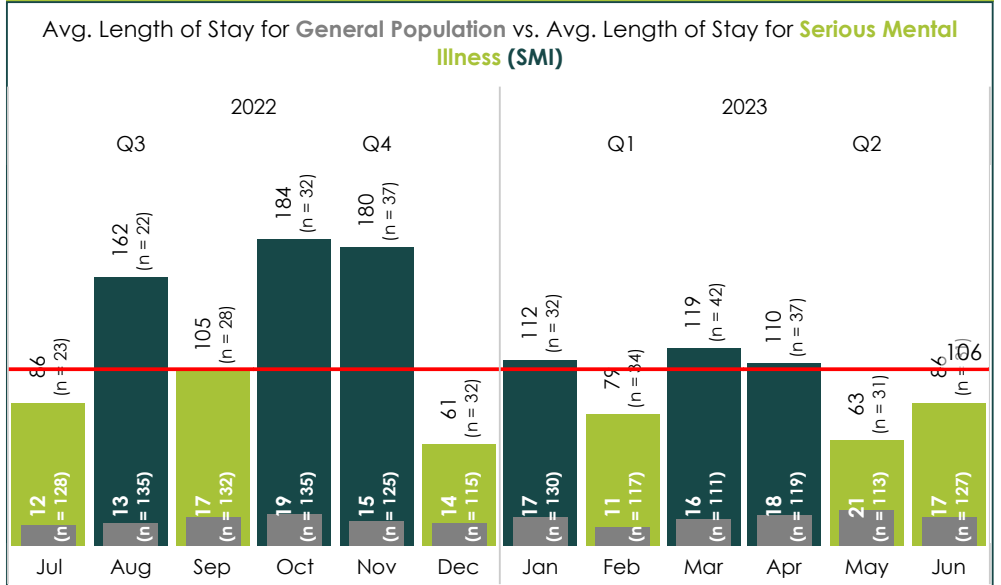# "Set, Measure, & Acheive" Targeted Reduction Measures

Goal 1:
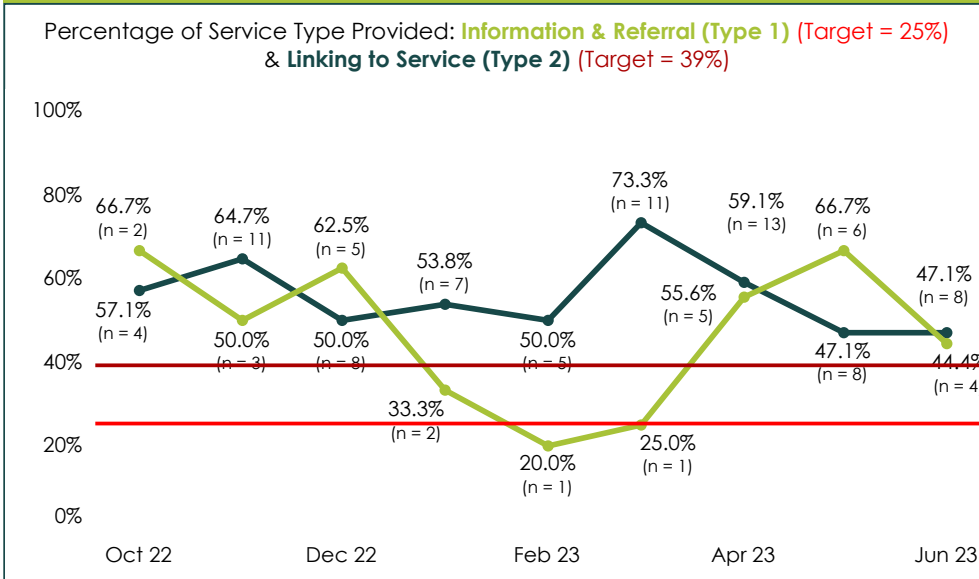Reduce the number of people with a Serious Mental Illness (SMI) Booked into Jail **by 10%**

Serious Mental Illness Bookings Into Jail & Target

Goal 2:
Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail **by 5%**

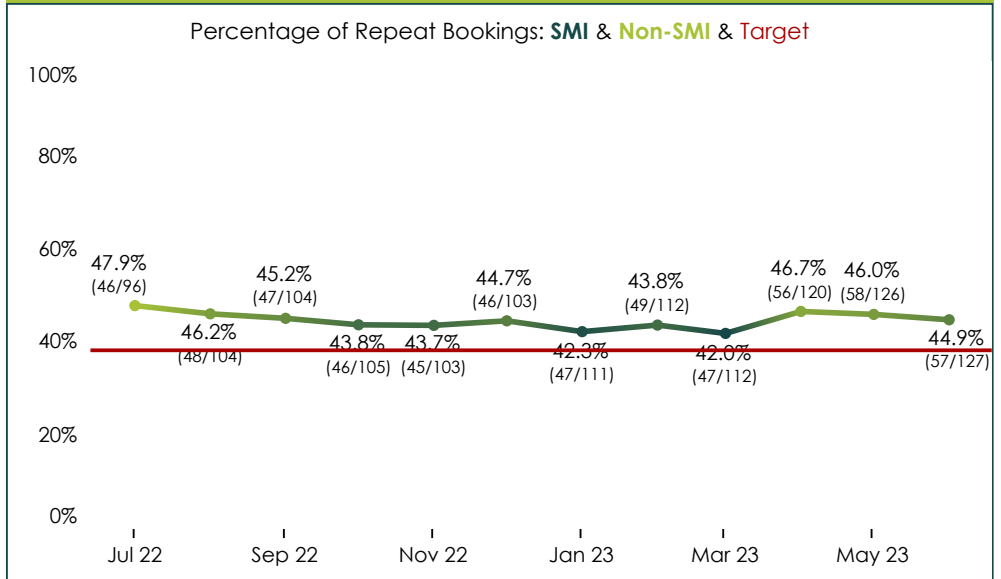### Avg. Length of Stay for General Population vs. Avg. Length of Stay for Serious Mental Illness (SMI)

Goal 3:
Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail **by 10%**

Percentage of Service Type Provided: **Information & Referral (Type 1)** (Target = 25%) & **Linking to Service (Type 2)** (Target = 39%)

Goal 4:
Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail **by 5%**

Percentage of Repeat Bookings: **SMI** & **Non-SMI** & Target

Stepping Up 4 Key Measures

Goal 1:	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail 10% Reduction or an Average of 2 Less People Each Month / Intercepts 0,1

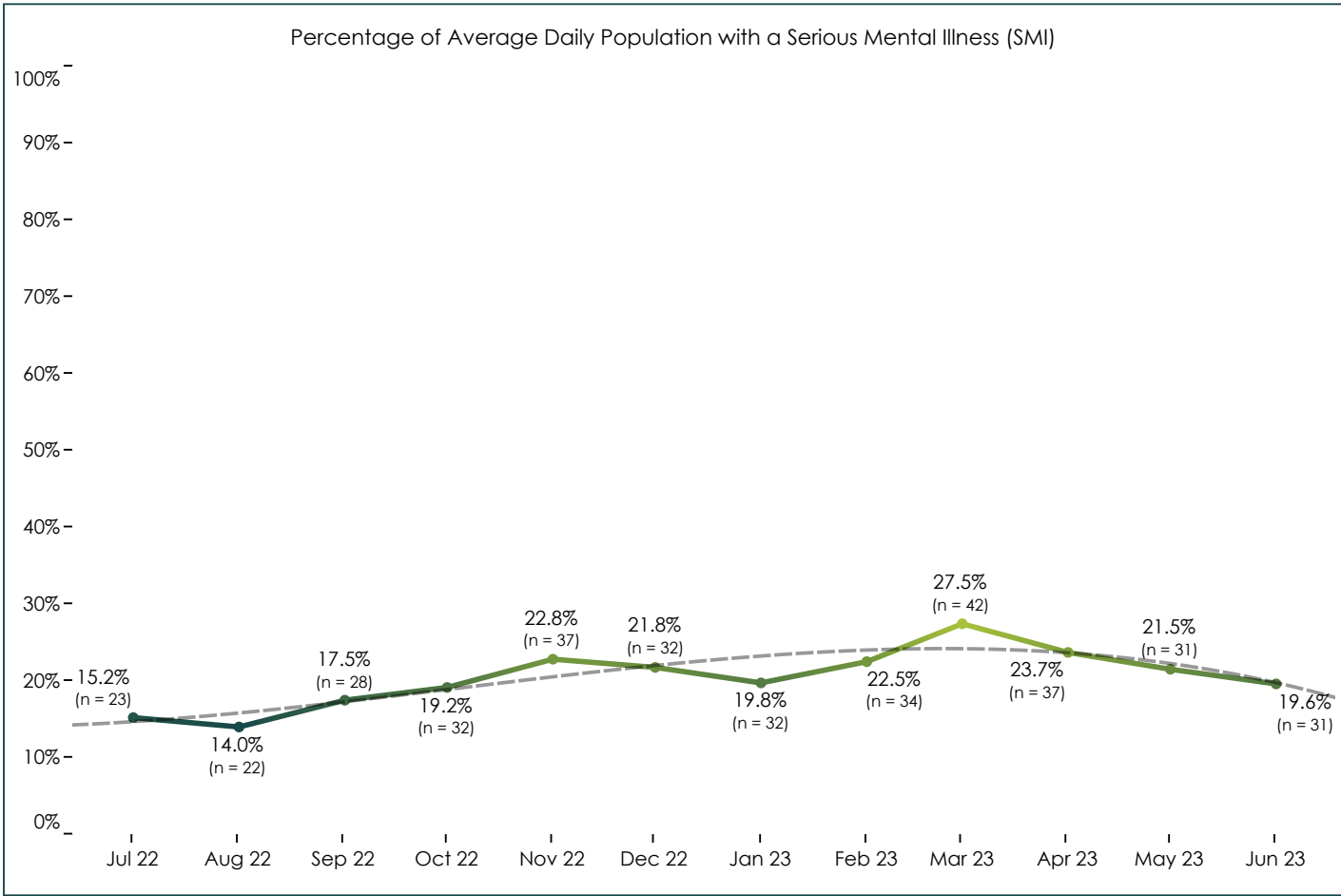|	**Strategy**	**Target**	**Notes/Updates**
Objective 1:	Each law enforcement agency in Sarpy County will work toward having 100% of sworn officers trained in either CIT, MHFA, or both.		
a.	Review CIT and MHFA data for each law enforcement agency, develop strategies as needed.	Ongoing	
b.	Engage all LE agencies; identify representative to attend quarterly meetings.		SCSC Team
c.	SCSO will explore having an in-house MHFA trained trainer.	PAUSE - COVID	
d.	MHFA training will continue to be provided during new hire training at the Sarpy/Douglas County Training Academy	Ongoing	
Objective 2:	911 Call Center, County Attorney's Office, Public Defender's Office, and Probation will have 100% of identified staff trained in MHFA or CIT.		
a.	Collect and monitor baseline data; develop strategies as needed.		
Objective 3:	Law enforcement agencies will provide the best possible response to calls involving a mental health related crisis.		
a.	SCSO collaborating with other partners to identify data-sharing software platform.		
b.	Track baseline data on the number of Mobile Crisis Response contacts activated each month by Law Enforcement Agency	Ongoing	
Objective 4:	Collect baseline data on the number of individuals with a SMI who were booked into jail on a misdemeanor charge, by law enforcement agency.		
a.	Analyze data and develop strategies as needed. Deep dive as needed to determine if indiviuals are unique or duplicated.	Ongoing	
Objective 5:	SCSO will add Co-Responder (Mental Health Professional) to existing mental health response.		

Percentage of Average Daily Population with a Serious Mental Illness (SMI)

Data points:
- Jul 22: 15.2% (n = 23)
- Aug 22: 14.0% (n = 22)
- Sep 22: 17.5% (n = 28)
- Oct 22: 19.2% (n = 32)
- Nov 22: 22.8% (n = 37)
- Dec 22: 21.8% (n = 32)
- Jan 23: 19.8% (n = 32)
- Feb 23: 22.5% (n = 34)
- Mar 23: 27.5% (n = 42)
- Apr 23: 23.7% (n = 37)
- May 23: 21.5% (n = 31)
- Jun 23: 19.6% (n = 31)

Measure:

The number of adults booked into the jail with a diagnosed or self-reported SMI during the month / The average daily total population of the jail for the month
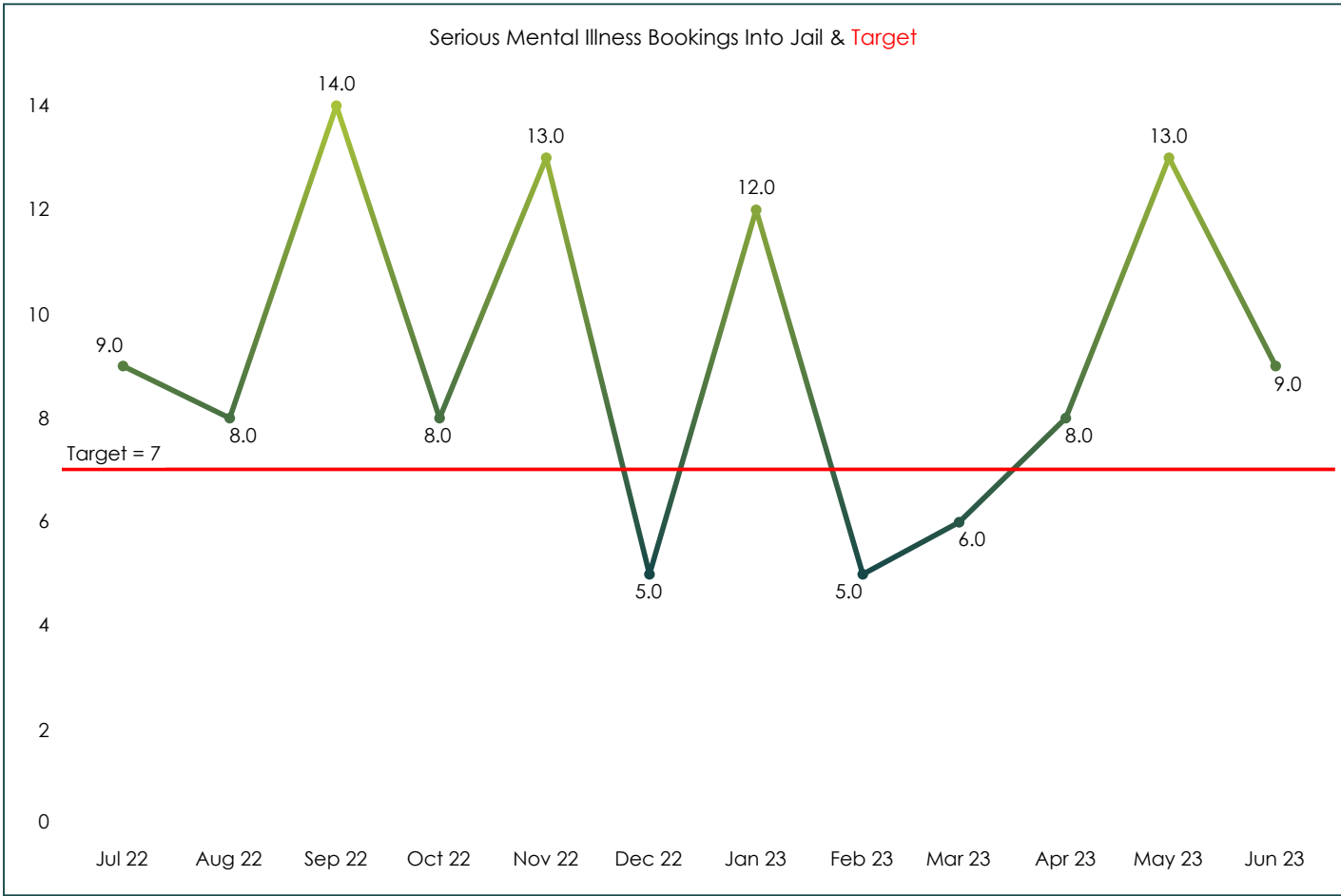
Definitions:

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• The average overall daily population for individuals with a Serious Mental Illness (SMI) increased to it's highest recorded point in March 2023. This is likely attributed to an update to the "SMI" flag through the Jail data systems which now counts individuals with known SMI diagnoses who are not seen by medical. An increase in this metric should be expected over the calendar year with this change, and should more accurately reflect the actual SMI population within the jail setting.

• The ALOS for this population compared to the ALOS for the general population is likely a contributing factor towards maintaining the relatively high percentage of individuals with an SMI.

• Data Questions: Does this number reflect individuals with a known SMI who re-enter the jail, or only those with a current assessment? Are the charges against this population more significant than what is found in the general population, on average? Are there processes that would inherently retain this population in the jail longer than intended, compared to the general population (e.g. evaluations, court continuances).

Goal 1:	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail **by 10% Annually**

Serious Mental Illness Bookings Into Jail & Target

Measure:

Number of SMI bookings to Jail each month
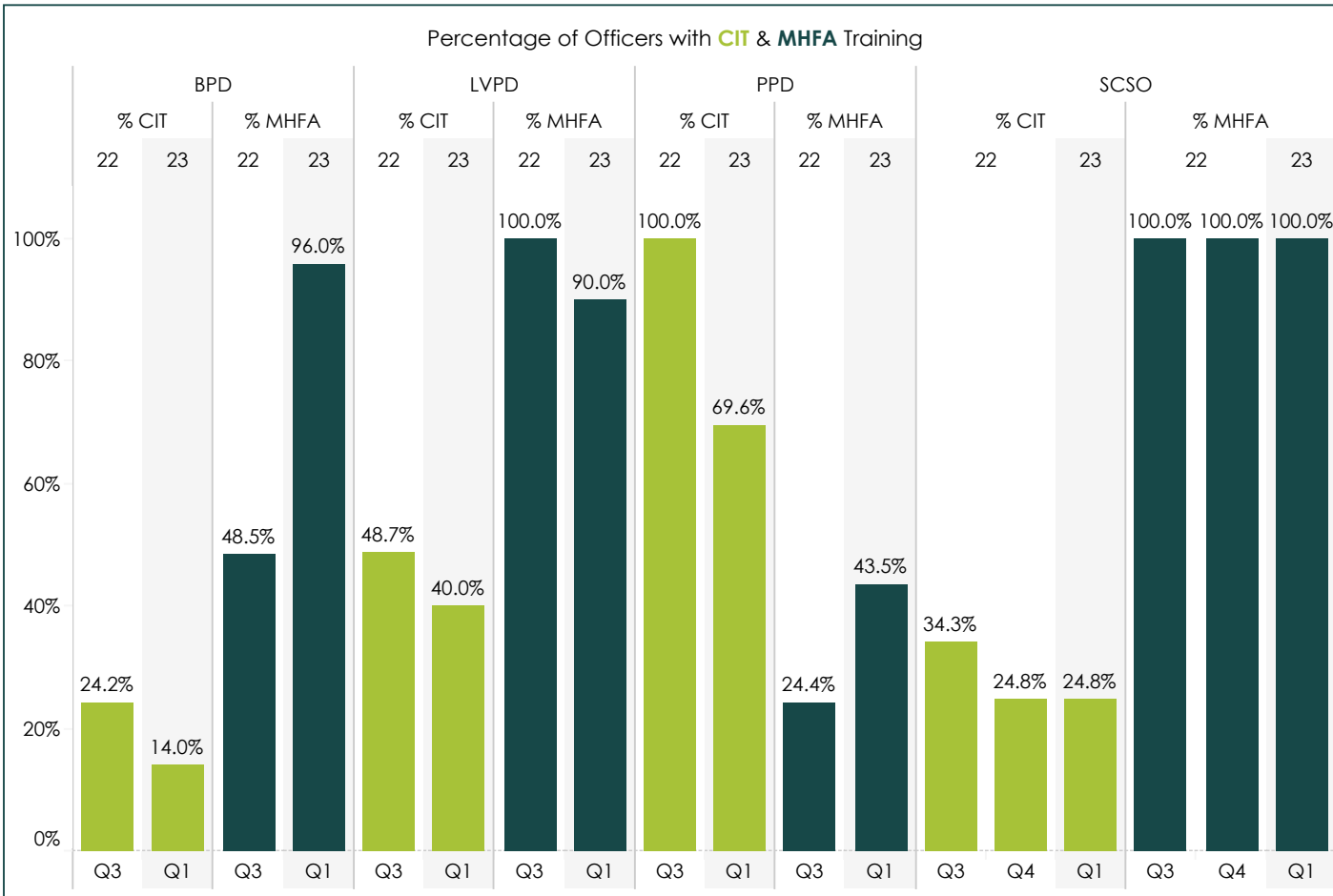
Definitions:

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• This item continues to have a "small *n*" effect, where meeting the target and missing the target may be a matter of one or two bookings in total. Over the last running 12 months, we have started going below our expected target for SMI booking each month.

• There is no statistically significant trend found with the calendar year data.

Goal 1:	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

Objective 1:	Each identified Law Enforcement Agency in Sarpy County will have 100% of sworn officers/designated staff trained in CIT, MHFA, or Both.

Percentage of Officers with CIT & MHFA Training

Bar chart data:

BPD
- % CIT: Q3 '22 — 24.2%; Q1 '23 — 14.0%
- % MHFA: Q3 '22 — 48.5%; Q1 '23 — 96.0%

LVPD
- % CIT: Q3 '22 — 48.7%; Q1 '23 — 40.0%
- % MHFA: Q3 '22 — 100.0%; Q1 '23 — 90.0%

PPD
- % CIT: Q3 '22 — 100.0%; Q1 '23 — 69.6%
- % MHFA: Q3 '22 — 24.4%; Q1 '23 — 43.5%

SCSO
- % CIT: Q3 '22 — 34.3%; Q4 '22 — 24.8%; Q1 '23 — 24.8%
- % MHFA: Q3 '22 — 100.0%; Q4 '22 — 100.0%; Q1 '23 — 100.0%

Measure:

Number with training / Total Officers

Definitions:

Percentage of Law Enforcement Officers (by LE Agency) with CIT and MHFA training

Data Source:

Sgt. Hillabrand - SCSO
Cpt. Tim Melvin - BPD
Chris Goley - PPD
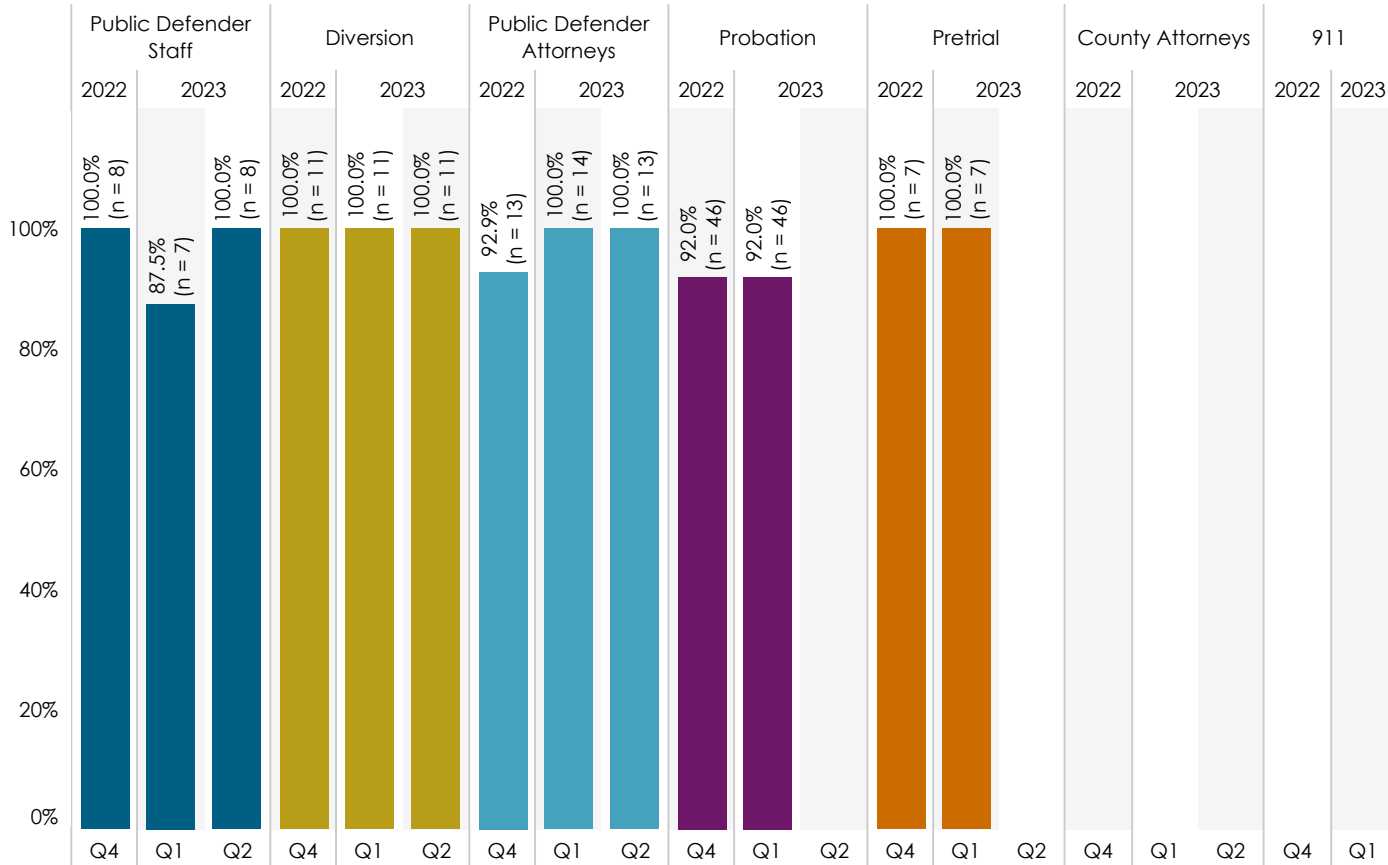Jeremy Kinsey - LVPD

Review Frequency:

Quarterly

Analysis:

• Each reporting LEA agency has at least 90% of sworn officers trained in either CIT or MHFA as of Q1 of CY 2023.

• Recertification for MHFA is required every 3 years.

• Data Questions: What current barriers exist in exploring MHFA training for the agencies who need training? Have any agencies reported any noticable change with training in regards to applicability to their responses to calls, or does the training appear to be mitigating other items (e.g. filing charges, SMI bookings)?

Goal 1:	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

Objective 2:	911 Call Center, County Attorney's Office, Public Defender's Office, and Probation will have 100% of identified staff trained in MHFA or CIT.

Percent of Criminal Justice Stakeholders with CIT and/or MHFA Training

	Public Defender Staff			Diversion			Public Defender Attorneys			Probation			Pretrial			County Attorneys			911	
	2022	2023		2022	2023		2022	2023		2022	2023		2022	2023		2022	2023		2022	2023
	Q4	Q1	Q2	Q4	Q1	Q2	Q4	Q1	Q2	Q4	Q1	Q2	Q4	Q1	Q2	Q4	Q1	Q2	Q4	Q1
	100.0% (n = 8)	87.5% (n = 7)	100.0% (n = 8)	100.0% (n = 11)	100.0% (n = 11)	100.0% (n = 11)	92.9% (n = 13)	100.0% (n = 14)	100.0% (n = 13)	92.0% (n = 46)	92.0% (n = 46)		100.0% (n = 7)	100.0% (n = 7)						

Measure:

Number of Criminal Justice Stakeholders with MHFA and/or CIT Training / Total Staff

Definitions:

Number of Criminal Justice Stakeholders with MHFA and/or CIT Training

Data Source:

By Agency

Review Frequency:

Quarterly

Analysis:

- All reporting stakeholders have at least 85% of staff trained in either CIT or MHFA.

- This was previously point-in-time data that was being collected. Data is now being tracked across time to understand movement of training throughout intercepts.

- Recertification for MHFA is required every 3 years.

Goal 1:	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

Objective 3:	Law Enforcement Agencies will provide the best response possible to calls involving a mental health related crisis.

Placeholder / SCSO Mental Health Unit

Measure:

Definitions:

Data Source:

Sgt. Hillabrand - SCSO

Review Frequency:

Analysis:

• Data is currently being explored with the Sarpy County Sheriff's Office.

• Mental Health Tracking Data is being gathered from various Law Enforcement Agencies, and will be processed for data analysis in future meetings.

Goal 1:	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

Objective 3:	Law Enforcement Agencies will provide the best response possible to calls involving a mental health related crisis.

Mobile Crisis Response Assessments by Law Enforcement Agency
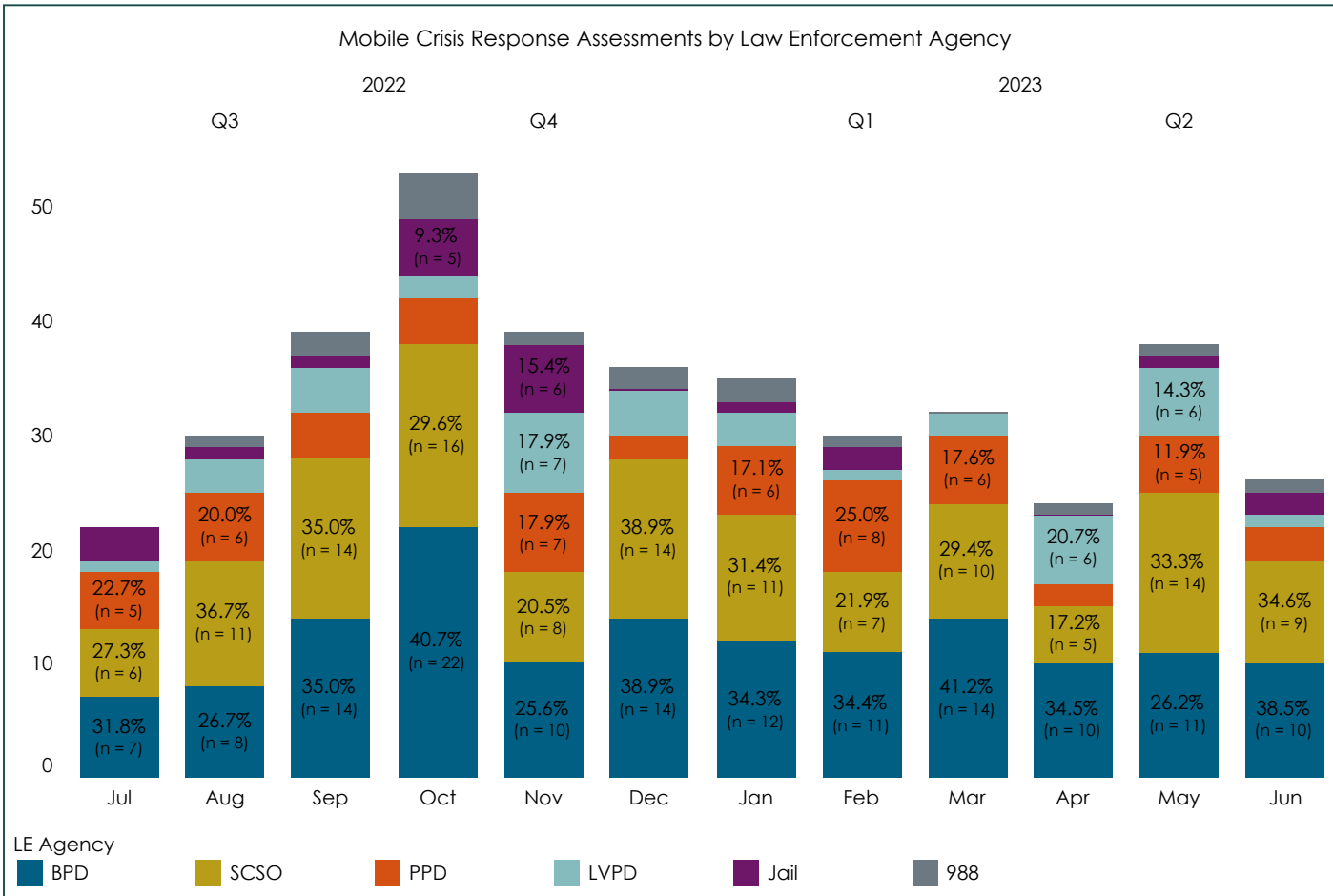
Measure:

Total MCR Interventions by Month

Definitions:

Number of MCR Interventions by Month

Data Source:

Jenny Stewart - Heartland Family Service

Review Frequency:

Quarterly

Analysis:

• Data includes Face to Face Assessments, Telehealth Assessments, Telephone Consultations, and Cancelled Calls.

• 988 Data is included in this chart in gray.

• No statistically significant trends regarding MCR assessments have been identified over time by law enforcement agency.

• Bellevue Police Department and SCSO continue to show the largest percentage of MCR response assessments completed, compared to other referral sources.

Goal 1:	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail
Objective 4:	Collect baseline data on the number of individuals with a SMI who were booked into jail on a misdemeanor charge, by Law Enforcement Agency

Individuals with an SMI Misdemeanor Charges by Law Enforcement Agency By Month
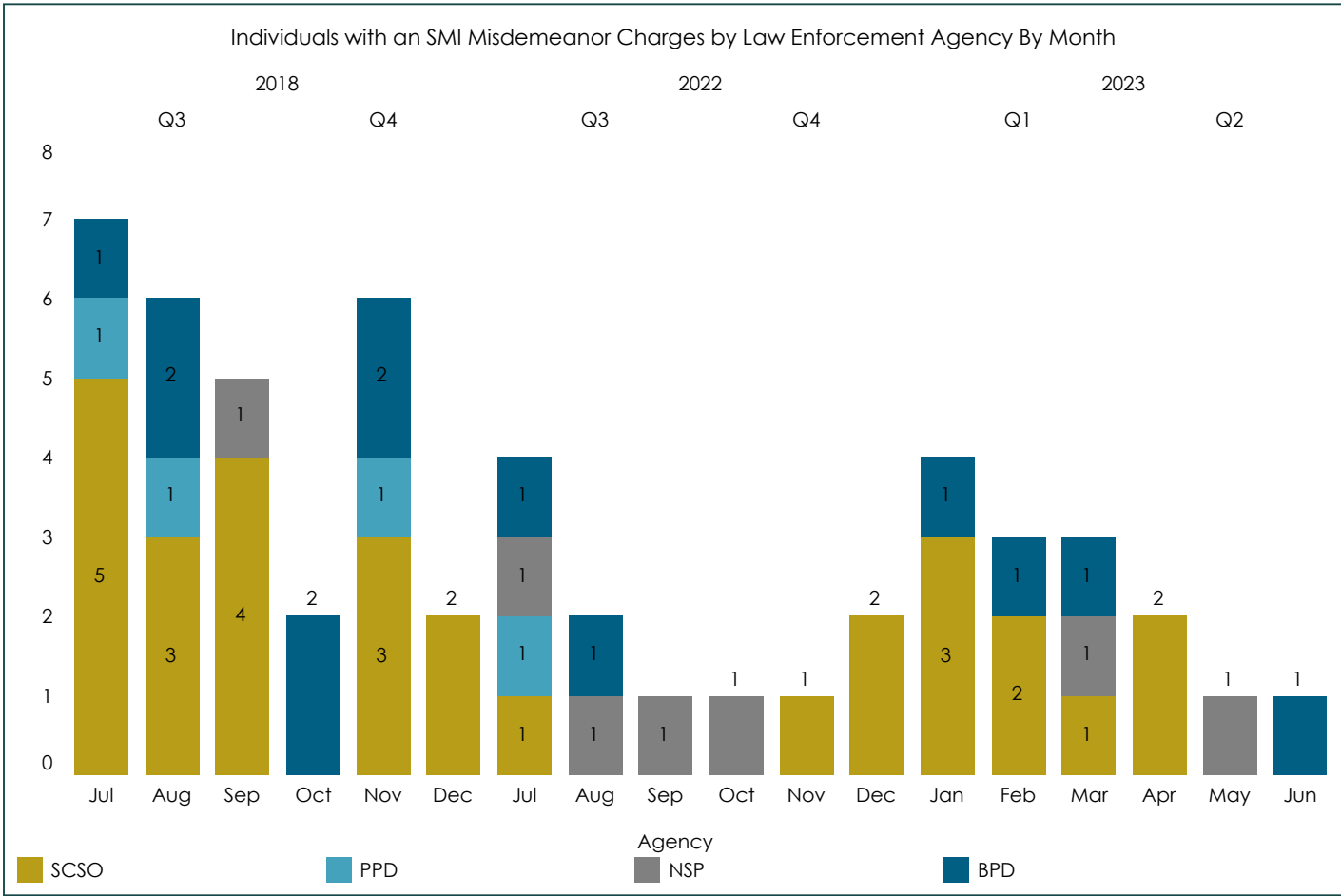
Measure:

Number of Individuals with a SMI booked into Jail on a Misdemeanor each Month, Organized by Law Enforcement Agency

Definitions:

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• No SMI Misdemeanor Charges were reported for March 2023 for the entire county!

• These may be unique or repeat bookings/individuals.

• Region 6 is adding funding to support a Peer.

Stepping Up 4 Key Measures

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail Shorten by 5% or 6 Fewer Days in Jail for Each Person / Intercepts 2,3		
	Strategy	**Target**	**Notes/Updates**
Objective 1:	**Corrections will work to have 100% of Correctional Officers trained in CIT, MHFA, or both.**		
a.	Collect and review baseline data on CO's training.		Using Heartland CIT Training as Douglas County Jail's CIT was suspended due to COVID.
Objective 2:	**Collect and analyze Mental Health Diversion data.**		
a.	Collect and review baseline data; identify opportunities; establish benchmarks/targets.		
Objective 3:	**Collect and analyze Pre-Trial (Mental Health) data.**		
a.	Collect and review baseline data; identify opportunities; establish benchmarks / targets.		
Objective 4:	**Utilize best practices and data to drive improvements with Competency to Stand Trial / Competency Restoration (CST / CR).**		
a.	Form a workgroup with Public Defender's, County Attorney's, Corrections, and LRC to identify opportunities to improve communication and flow of information re. CST / CR practices, utilize lessons learned from GAINS Center Technical Assistance.	Completed Nov. 2022	Document has been drafted; next step is to engage Presiding Judges. CA has the lead.
b.	Explore Jail-Based Competency Restoration with DHHS/LRC representatives.	In Process	Jo leads this
Objective 5:	**Identify opportuntiies to improve information sharing between CJ & MH systems.**		
a.	Form a Douglas and Sarpy County combination workgroup to review Nebraska Revised Statute 38-2136 to explore aligning NE state statute with HIPAA, as recommended by J.D. Petrila, national consultant. LB 337 (2023)	January 2023	Please Support
b.	Utilize workgroup to identify data sharing software platform to be utilized by OPD, Douglas ..		RFP In Development (April 2023)

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Avg. Length of Stay for individuals **without a Serious Mental Illness** vs. Avg. Length of Stay individuals with a **Serious Mental Illness (SMI)**

2022

Q3   **Q4**

2023

Q1   **Q2**

Month	SMI ALOS	(n)	General ALOS	(n)
Jul	86	(n = 23)	12	(n = 128)
Aug	162	(n = 22)	13	(n = 135)
Sep	105	(n = 28)	17	(n = 132)
Oct	184	(n = 32)	19	(n = 135)
Nov	180	(n = 37)	15	(n = 125)
Dec	61	(n = 32)	14	(n = 115)
Jan	112	(n = 32)	17	(n = 130)
Feb	79	(n = 34)	11	(n = 117)
Mar	119	(n = 42)	16	(n = 111)
Apr	110	(n = 37)	18	(n = 119)
May	63	(n = 31)	21	(n = 113)
Jun	86	(n = 31)	17	(n = 127)

Measure:

Average Length of Stay for the General Population in Jail vs. Average Length of Stay for individuals with a Serious Mental Illness (SMI).

Definitions:

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• Sarpy continues to show progress overall on reducing this number; ALOS over the first quarter of CY 2023 has shown improvement compared to previous months, and continues to report months below the established target.

• Changes in the Jail's flagging of SMI individuals may impact this data point as well.

• The average length of stay for individuals with an SMI continues to far exceed the ALOS for the general population; however, the established target of 106 days is being acheived more consistently than in previous fiscal years, with about 50% of report months in calendar year 2022 acheiving this target (light green). The ALOS for the general population conitnues to remain very low in comparision.

• Data Questions: What are known contributing factors for this descrepancy from the perspective of the jail; is this related to seriousness of charges, court delays, competnecy ev..

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail **by 5%**

Avg. Length of Stay for General Population vs. Avg. Length of Stay for Serious Mental Illness (SMI)

Chart data:

2022

Q3:
- Jul: SMI 86 (n = 23), General 12 (n = 128)
- Aug: SMI 162 (n = 22), General 13 (n = 135)
- Sep: SMI 105 (n = 28), General 17 (n = 132)

Q4:
- Oct: SMI 184 (n = 32), General 19 (n = 135)
- Nov: SMI 180 (n = 37), General 15 (n = 125)
- Dec: SMI 61 (n = 32), General 14 (n = 115)

2023

Q1:
- Jan: SMI 112 (n = 32), General 17 (n = 130)
- Feb: SMI 79 (n = 34), General 11 (n = 117)
- Mar: SMI 119 (n = 42), General 16 (n = 111)

Q2:
- Apr: SMI 110 (n = 37), General 18 (n = 119)
- May: SMI 63 (n = 31), General 21 (n = 113)
- Jun: SMI 86 (n = 31), General 17 (n = 127)

Target line: 106

Measure:

Average Length of Stay for the General Population in Jail vs. Average Length of Stay for individuals with a Serious Mental Illness (SMI).

Definitions:

Data Source:
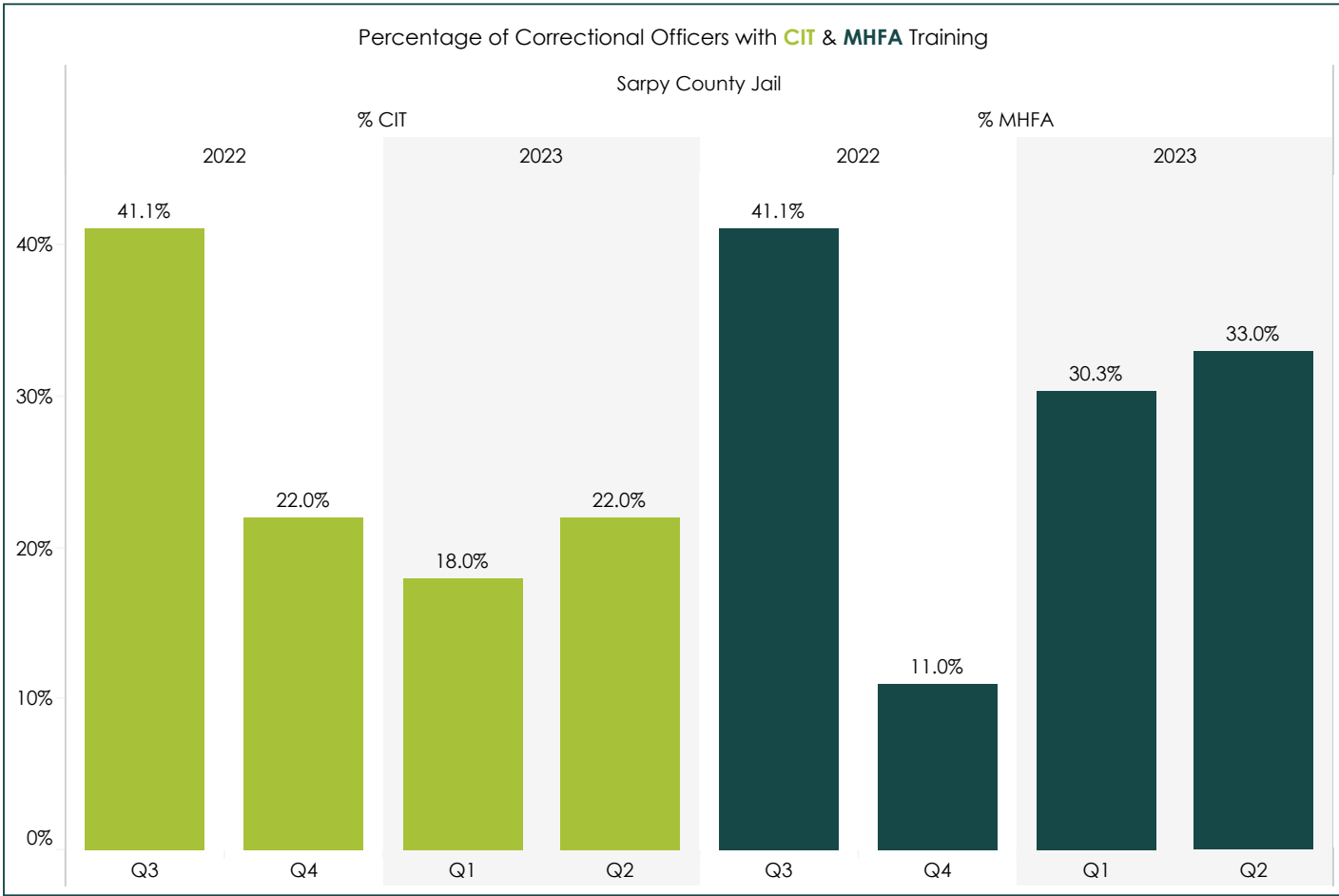
Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• Sarpy continues to show progress overall on reducing this number; ALOS over the first quarter of CY 2023 has shown improvement compared to previous months, and continues to report months below the established target.

• Changes in the Jail's flagging of SMI individuals may impact this data point as well.

• The average length of stay for individuals with an SMI continues to far exceed the ALOS for the general population; however, the established target of 106 days is being acheived more consistently than in previous fiscal years, with about 50% of report months in calendar year 2022 acheiving this target (light green). The ALOS for the general population conitnues to remain very low in comparision.

• Data Questions: What are known contributing factors for this descrepancy from the perspective of the jail; is this related to seriousness of charges, court delays, competnecy ev..

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 1:	Corrections will work to have 100% of Correctional Officers trained in CIT (40 hours), MHFA (8 hours), or both.

Percentage of Correctional Officers with CIT & MHFA Training

Sarpy County Jail

Measure:

Number of Correctional Officers with Training / Total Correctional Officers

Definitions:

Correctional Officers who have completed CIT and/or MHFA

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• This is point in time data gathered at the end of the period of review.

• Recertification for MHFA is required every 3 years.

• Q4 Decrease is due to new staff at the Jail.

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 2:	Collect and analyze Mental Health Diversion data.

MH Diversion Active Clients and Referrals by Month
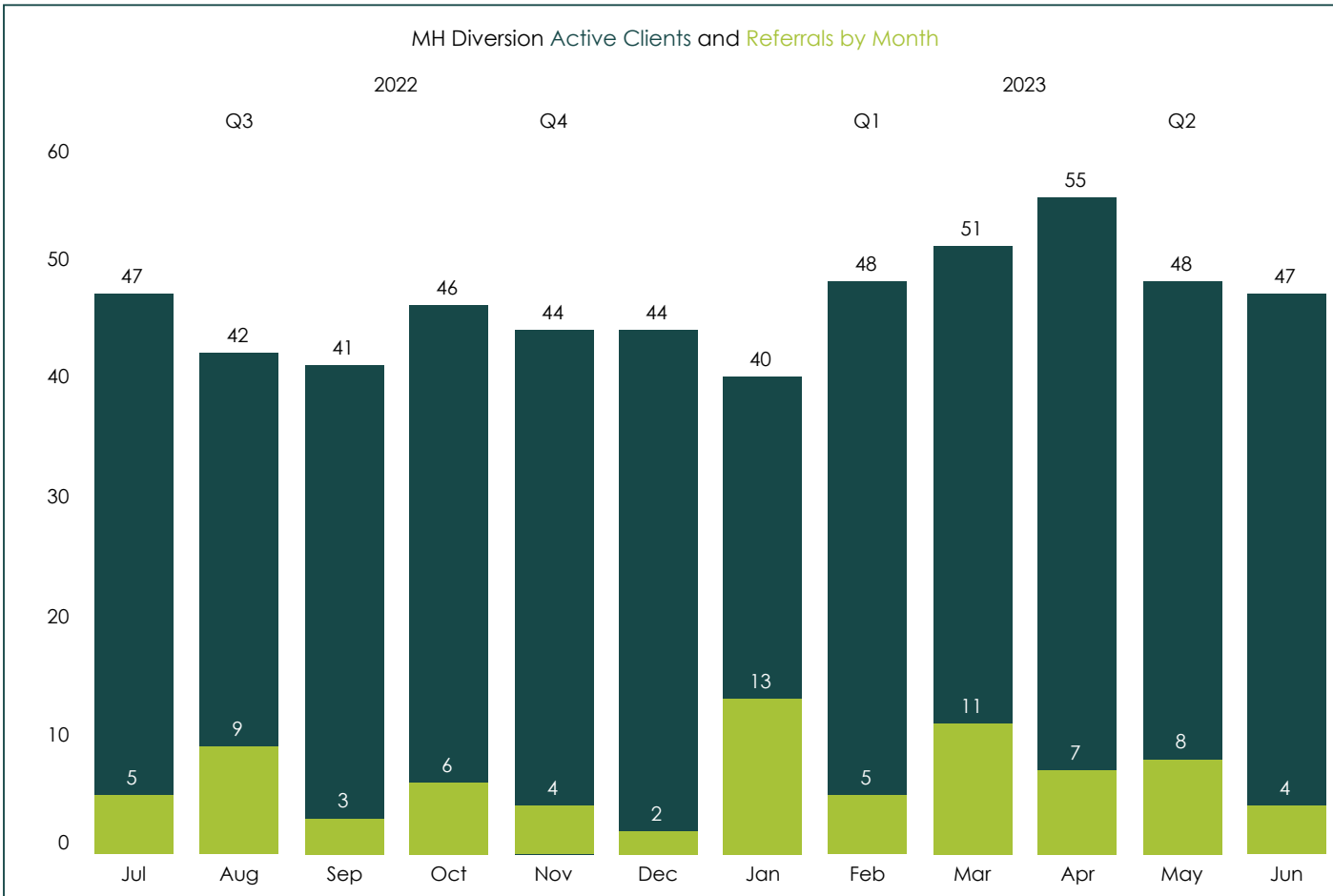
Measure:

Mental Health Diversion Data Organized by Total Number

Definitions:

Number of Consumers Active in Mental Health Diversion and Number of New Referrals by Month

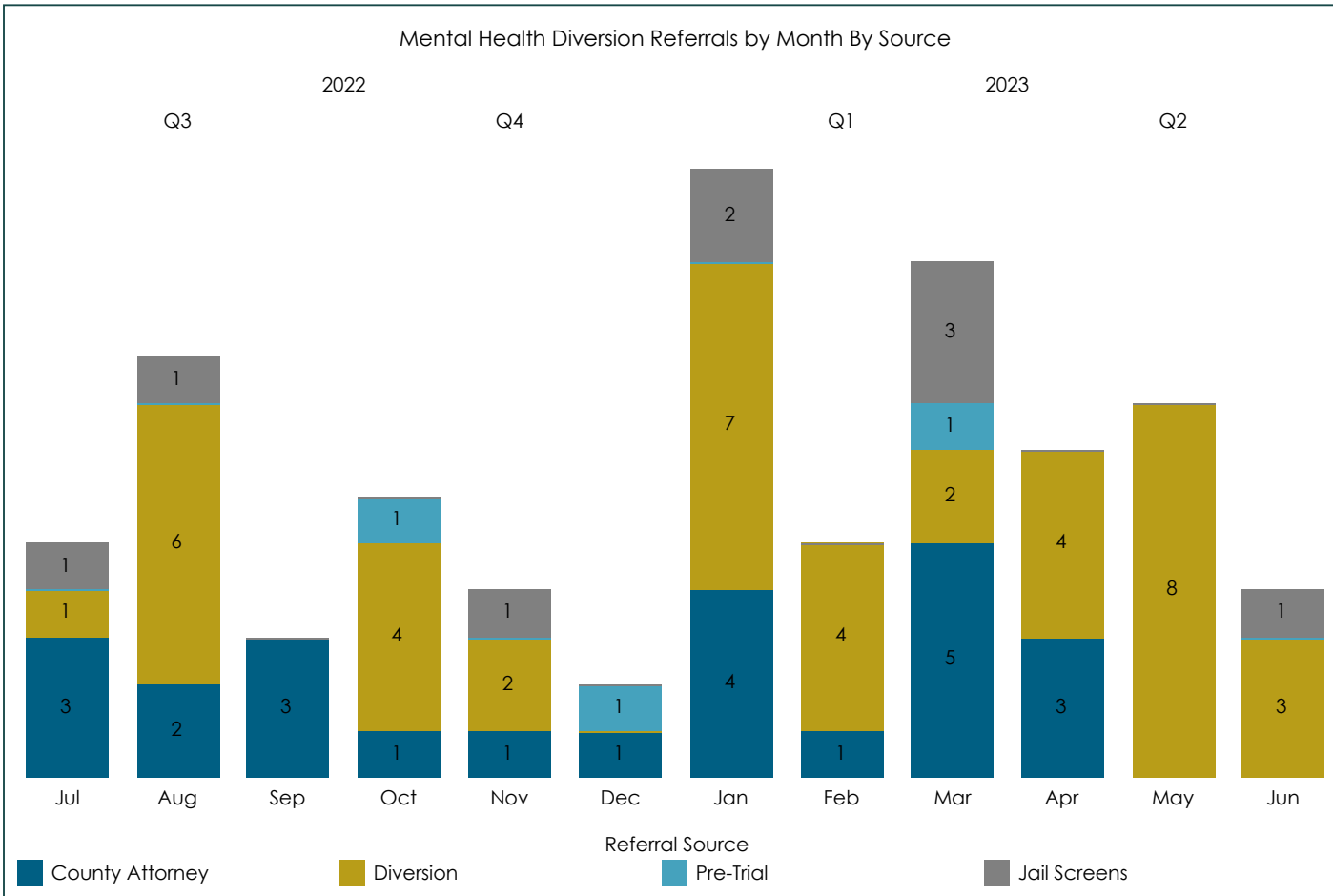**Data Source:**

Carisa Gosda - MH Diversion

Review Frequency:

Quarterly

Analysis:

• MH Diversion is showing a significant increase in the number of Active Clients and referrals received over the last quarter.

• Data Questions: Do we know the success rate and/or recidivism rate for consumers who participate in MH diversion?

• Team of 5 MH Diversion Officers.

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 2:	Collect and analyze Mental Health Diversion data.

Mental Health Diversion Referrals by Month By Source

Measure:

Mental Health Diversion Data Organized by Referral Source

Definitions:

Number of Mental Health Diversion Referrals by Month by Referral Source

Data Source:

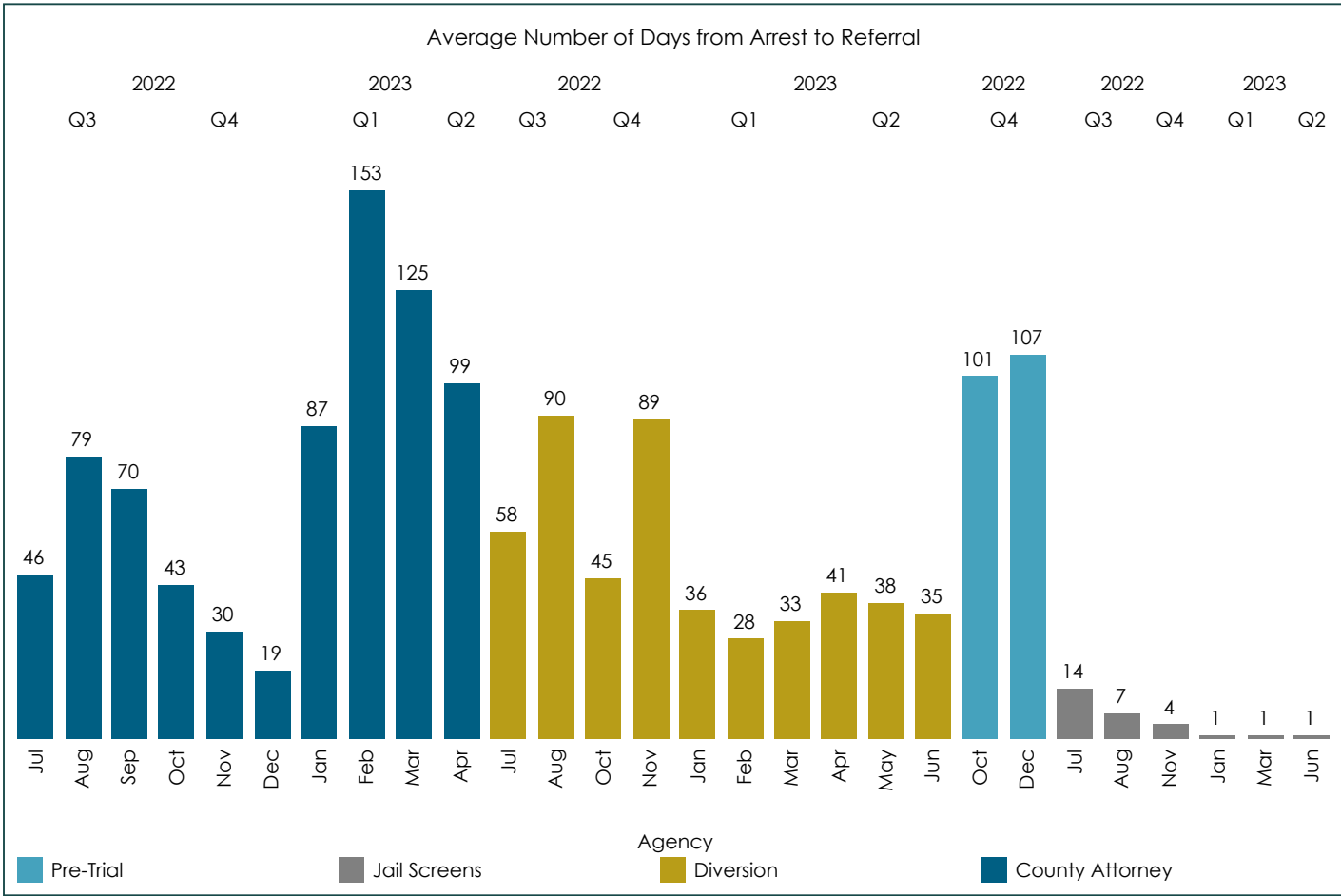Carisa Gosda - MH Diversion

Review Frequency:

Quarterly

Analysis:

• During calendar year 2022, the County Attorney's Office and Diversion constituted the largest portions of MH Diversion referrals.

• There is a small downward trend in the number of MH Diversion referrals over the calendar year, but the overall *n* each month remains small.

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 2:	Collect and analyze Mental Health Diversion data.

Average Number of Days from Arrest to Referral

Chart legend: Pre-Trial, Jail Screens, Diversion, County Attorney

Measure:

Mental Health Diversion Data Organized by Category

Definitions:

Number of Days from Date of Arrest to Date of Referral

Data Source:

Carisa Gosda - MH Diversion

Review Frequency:

Quarterly

Analysis:

• Missing months in the data indicate no referrals made during that period of time *OR* a 0 day wait time, where applicable.

• Wellness Court may impact this data at times.

• This is impacted by a low *n* across all programs.

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 2:	Collect and analyze Pre-Trial (Mental Health) data.

Mental Health Pretrial Data
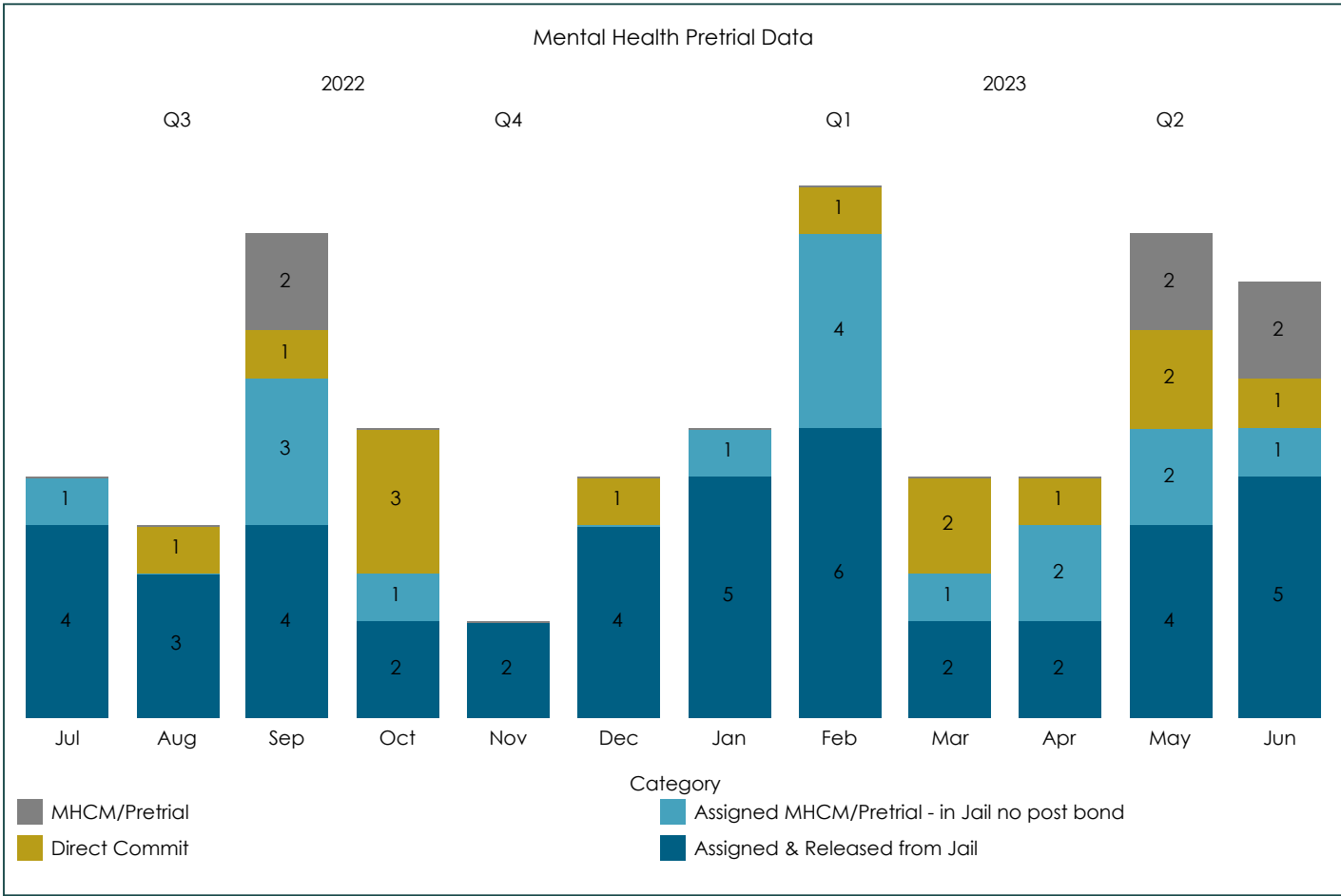
Measure:

The Number of Individuals Referred to Mental Health Pre-Trial Organized by Referral Source and Month.

Definitions:

Mental Health Pre-Trial Consumers by Category

Data Source:

Ashlie A. Weisbrodt - MH PreTrial
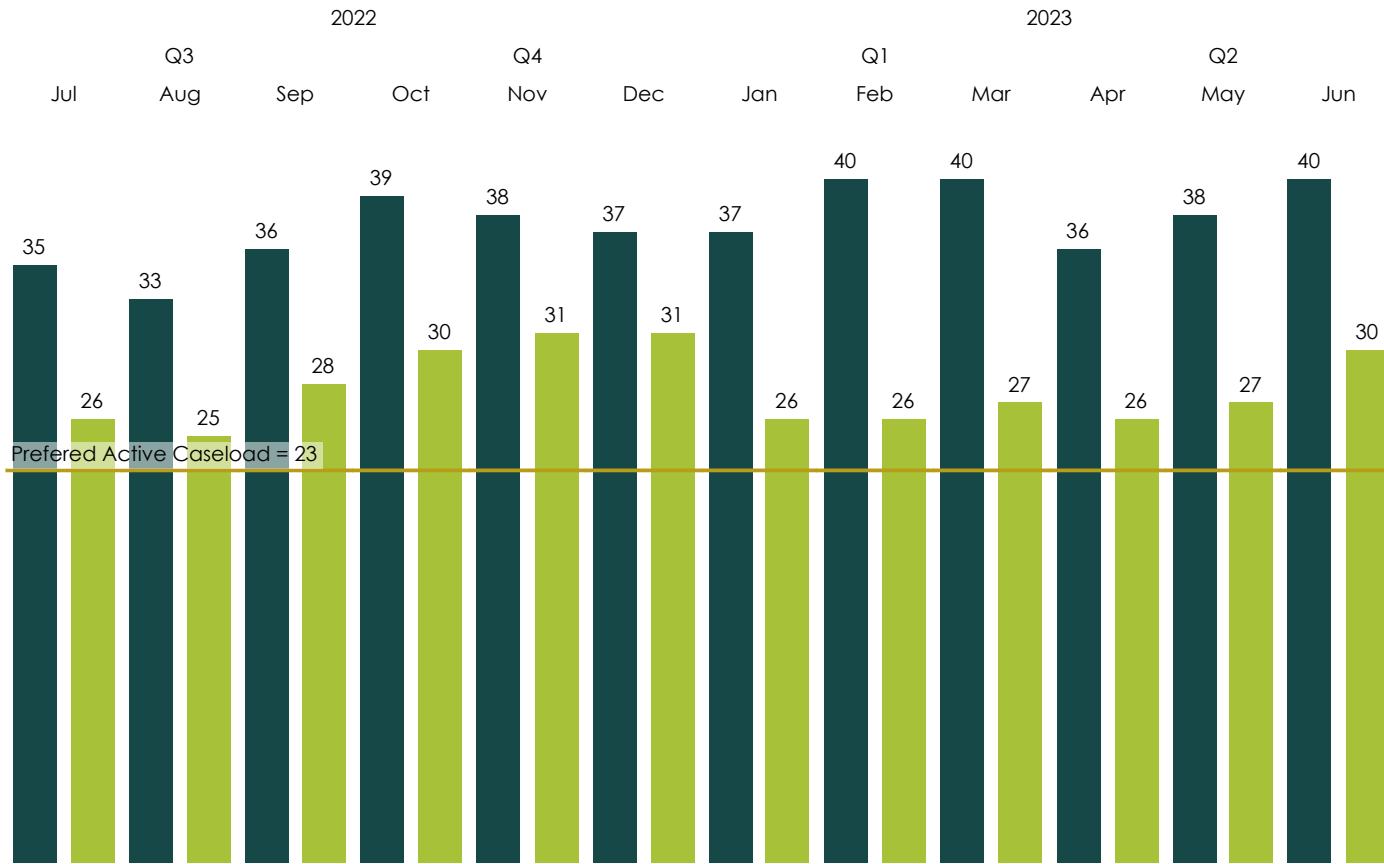
Review Frequency:

Quarterly

Analysis:

• Clients that are direct commits (from the court) and that already have a sentencing date set, cannot be referred to Diversion. There are direct commits that can be referred to Diversion as long as they are not set for sentencing.

• How many Pretrial clients are still in jail?

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail
Objective 2:	Collect and analyze Pre-Trial (Mental Health) data.

Mental Health Pretrial Data: Assigned Clients and Active and Participating

Bar chart. Months from Jul 2022 (Q3) through Jun 2023 (Q2).

2022 — Q3: Jul, Aug, Sep; Q4: Oct, Nov, Dec
2023 — Q1: Jan, Feb, Mar; Q2: Apr, May, Jun

Assigned Clients (dark) / Active and Participating (green) values:
- Jul: 35 / 26
- Aug: 33 / 25
- Sep: 36 / 28
- Oct: 39 / 30
- Nov: 38 / 31
- Dec: 37 / 31
- Jan: 37 / 26
- Feb: 40 / 26
- Mar: 40 / 27
- Apr: 36 / 26
- May: 38 / 27
- Jun: 40 / 30

Prefered Active Caseload = 23

Measure:

The Number of Active and Assigned Clients Participating in Mental Health Pre-Trial by Month

Definitions:

Active and Assigned Clients Participating in Mental Health Pre-Trial Each Month

Data Source:

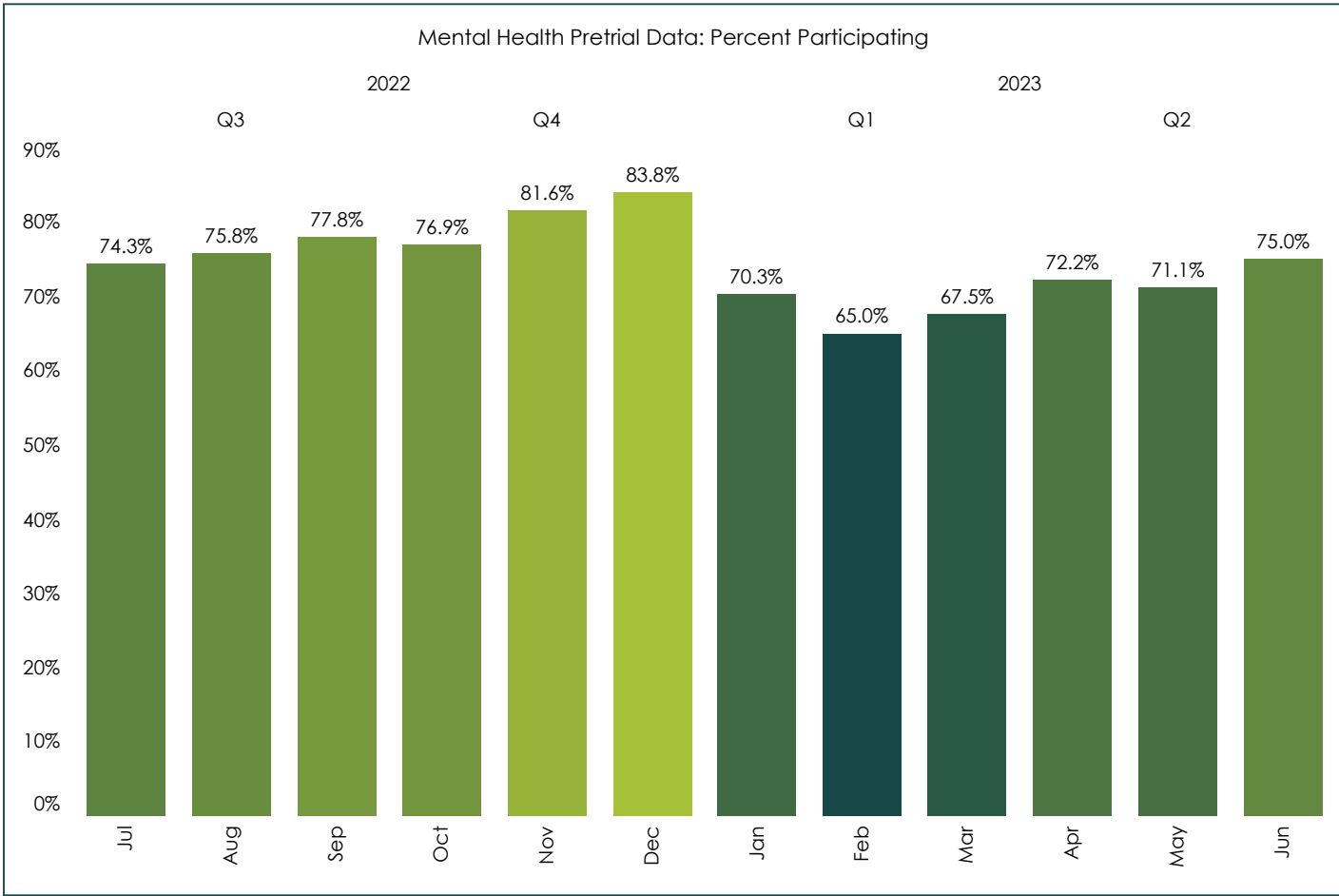Ashlie A. Weisbrodt - MH PreTrial

Review Frequency:

Quarterly

Analysis:

• Prefered active caseload is 23.

• The overall number of assigned clients has been over the ideal caseload capacity for the entirety of the calendar year.

• Despite tihs, the number of active and participating clients has shown some improvement over the course of the period under review, despite a sharp decline at the begining of Q2.

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 2:	Collect and analyze Pre-Trial (Mental Health) data.

Mental Health Pretrial Data: Percent Participating

2022 — Q3, Q4 | 2023 — Q1, Q2

Month	Percent
Jul	74.3%
Aug	75.8%
Sep	77.8%
Oct	76.9%
Nov	81.6%
Dec	83.8%
Jan	70.3%
Feb	65.0%
Mar	67.5%
Apr	72.2%
May	71.1%
Jun	75.0%

Measure:

The Number of Active and Assigned Clients Participating in Mental Health Pre-Trial by Month

Definitions:

Active and Assigned Clients Participating in Mental Health Pre-Trial Each Month

Data Source:

Ashlie A. Weisbrodt - MH PreTrial

Review Frequency:

Quarterly

Analysis:

• Data shows a decrease in Percent Participating over the first quarter of CY 2023; this is despite the number of assigned clients increasing during the quarter.

• Prefered active caseload is 23.

• This slide represents the percentage of active clients participating each month against the total number of assigned clients each month.

• Data Question: Are there Pre-Trial outcomes that can be tracked or measured to determine outcomes for this population?

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 4:	Utilize best practice and data to drive improvements with Competency to Stand Trial / Competency Restoration (CST/CR).

Competency Restoration
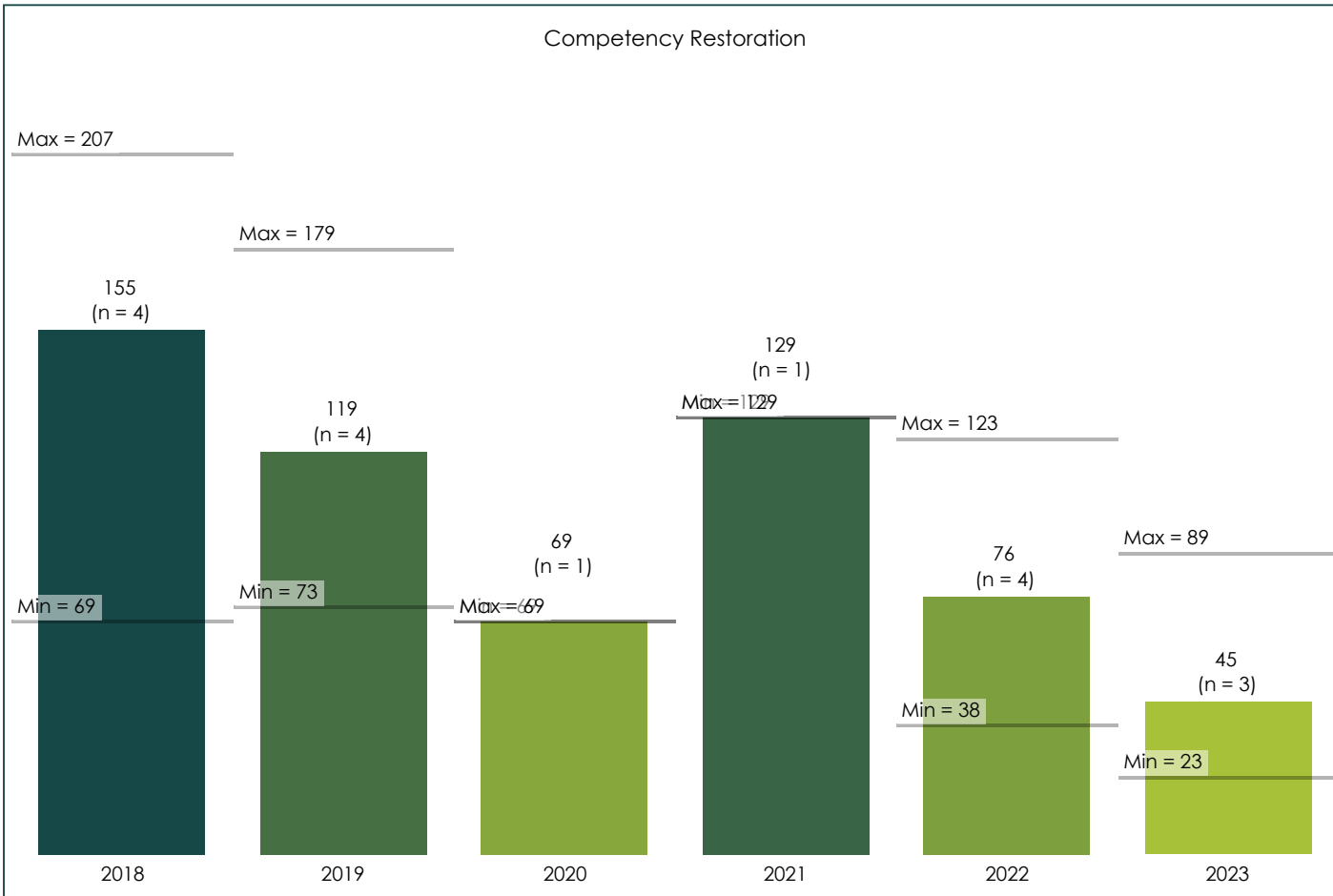
Measure:

Total Jail Days for Individuals Waiting to Receive Restorative Treatment at LRC, Organized by Year.

Definitions:

The Average Number of Days Individuals Wait (in Jail) to Receive Competency Restoration at LRC

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• So far in CY 2023, the average length of time waiting for competency restoration was 45 days for 3 indidivduals. This data may be skewed due to the "low *n*" effect; however, the length of time individuals are waiting has continued to show a decrease over the last 6 years.

• *n* is the number of people court ordered in said year (not the year they transferred to LRC) and waiting to access LRC for competency treatment by year.

• Average wait time for Competency Restoration shows a downward trend in the length of time waiting over years.

Goal 2:	Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail
Objective 5:	Identify opportunities to improve information sharing between CJ & MH systems.

Placeholder

Measure:

Definitions:

Data Source:

Review Frequency:

Analysis:

Stepping Up 4 Key Measures

Goal 3:	Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail Increase by 10% / Intercepts 3,4,5		
	Strategy	**Target**	**Notes/Updates**
Objective 1:	**At least 43% of people with a SMI are connected to Type 2 service prior to re-entry.**		
a.	Collect and monitor data; identify opportunities for improvement; include data from Practicum Students in PD's Office and in Jail.	In Process	
Objective 2:	**At least 14% of people with a SMI who are not connected to Type 1 services prior to re-entry are connected to Type 1 services prior to re-entry.**		
a.	Collect and monitor data; identify opportunities for improvement; include data from Practicum Students in PD's Office and in Jail.	In Process	
Objective 3:	**Utilize Long-Acting Injectables (anti-psychotic) when clinically appropriate.**		
a.	Develop a process for ensuring 100% LAI recipients have a community-based appointment with a prescriber, prior to release.		
Objective 3:	**Partner with BAART to explore opportunities to provide methadone to individuals who were receiving methadone prior to incarceration.**		
a.	Schedule a meeting with BAART to explore opportunities.		Meeting #1 Completed 7-14-22
Objective 4:	**Understand the impact of Medicaid expansion on those involved with the criminal justice system.**		
a.	Collect and review baseline data on the number of Medicaid applications being completed and submitted while individual is incarcerated (Jail: Re-entry and Practicum Student).	Ongoing for Jail	LB921 will impact this
b.	The jail will continue to monitor the implementation fo LB 921 - Medicaid enrollment assistance, process applications, and notification of eligibility.		

Goal 3:	Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail

Percentage of Service Type Provided: **Information & Referral (Type 1)** & **Linking to Service (Type 2)**

Measure:

Number of individuals with a SMI discharged and linked to service during their stay in jail (Type 2) *OR* Number of SMI individuals given information or a referral to a service (Type 1) / total number of individuals with a SMI discharged from jail in the month.

Definitions:

Percentage of individuals with a SMI that were linked to service(s) during their stay in jail.

Data Source:

Sarpy Public Defender Social Work Department
Ashley Berg
Taylor Stanton

Sarpy County Jail Social Work
Lauren Reed

Review Frequency:

Quarterly

Analysis:

• Old data has been phased out in favor of new data developed over the last several months with the Connection to Care team.

Goal 3:	Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail **by 10%**

Percentage of Service Type Provided: Information & Referral (Type 1) (Target = 25%)
& Linking to Service (Type 2) (Target = 39%)

Data points (Type 1 - Information & Referral):
- Oct 22: 66.7% (n = 2)
- Nov 22: 50.0% (n = 3)
- Dec 22: 62.5% (n = 5)
- Jan 23: 33.3% (n = 2)
- Feb 23: 20.0% (n = 1)
- Mar 23: 25.0% (n = 1)
- Apr 23: 55.6% (n = 5)
- May 23: 66.7% (n = 6)
- Jun 23: 44.4% (n = 4)

Data points (Type 2 - Linking to Service):
- Oct 22: 57.1% (n = 4)
- Nov 22: 64.7% (n = 11)
- Dec 22: 50.0% (n = 8)
- Jan 23: 53.8% (n = 7)
- Feb 23: 50.0% (n = 5)
- Mar 23: 73.3% (n = 11)
- Apr 23: 59.1% (n = 13)
- May 23: 47.1% (n = 8)
- Jun 23: 47.1% (n = 8)

Measure:

Number of individuals with a SMI discharged and linked to service during their stay in jail (Type 2) *OR* Number of SMI individuals given information or a referral to a service (Type 1) / total number of individuals with a SMI discharged from jail in the month.

Definitions:

Percentage of individuals with a SMI that were linked to service(s) during their stay in jail.

Data Source:

Sarpy Public Defender Social Work Department
Ashley Berg
Taylor Stanton
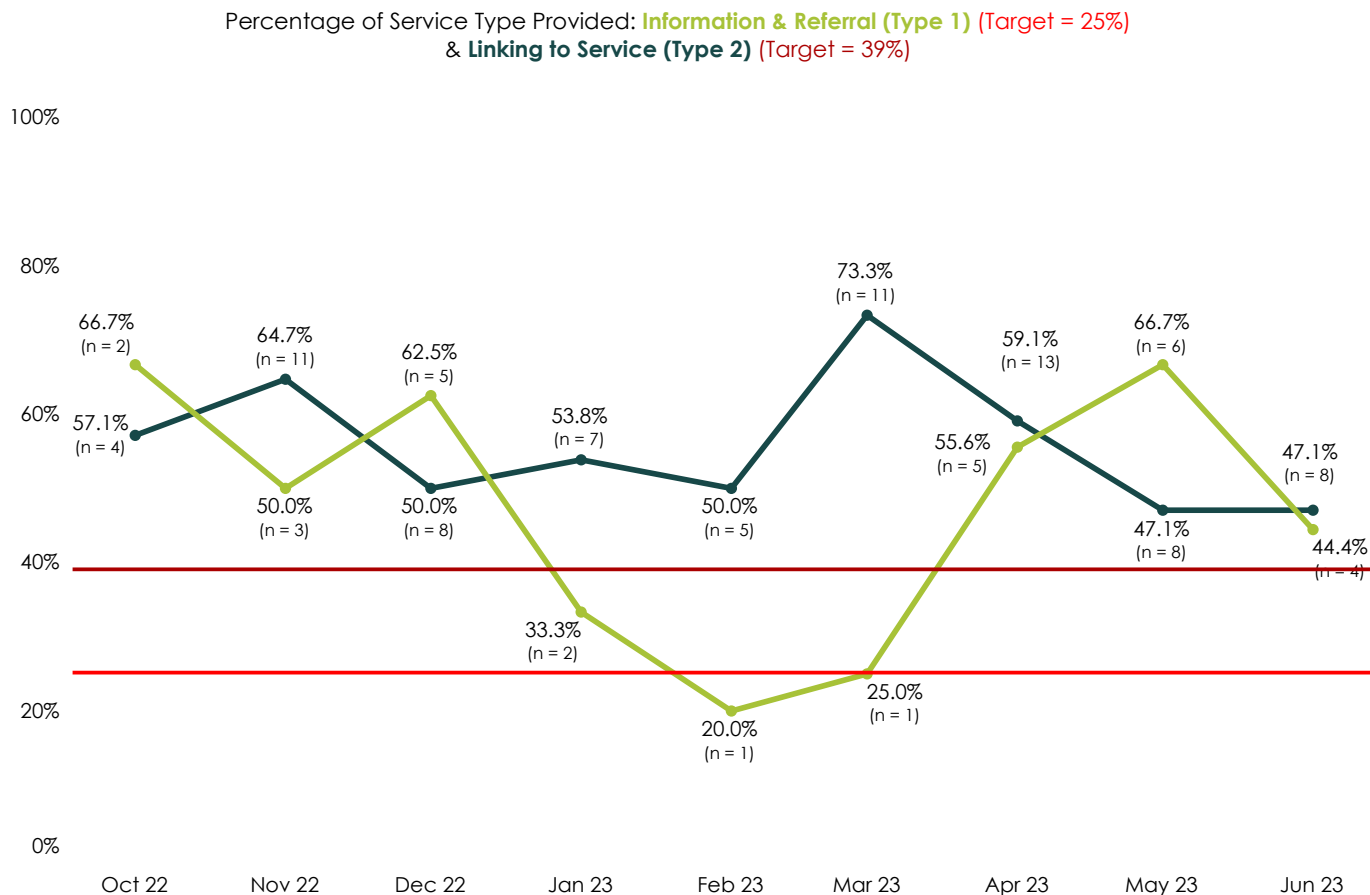
Sarpy County Jail Social Work
Lauren Reed

Review Frequency:

Quarterly

Analysis:

• Old data has been phased out in favor of new data developed over the last several months with the Connection to Care team.

• Type 1 Data appears to fall below the expected Target, due to having a low *N*.

Goal 3:	Increase the Percentage of Connection to Care for people with a Serious Mental Illness (SMI) in Jail

Objective 4:	At least 43% of people with a SMI are connected to Type 2 services prior to re-entry

Percentage of Service Type Provided: **Linking to Service (Type 2)** (Target = 39%)

Measure:

Number of individuals with a SMI discharged and linked to service during their stay in jail / total number of individuals with a SMI discharged from jail in the month

Definitions:

Percentage of individuals with a SMI that were linked to service(s) during their stay in jail.

Data Source:

Sarpy Public Defender Social Work Department
Ashley Berg
Taylor Stanton

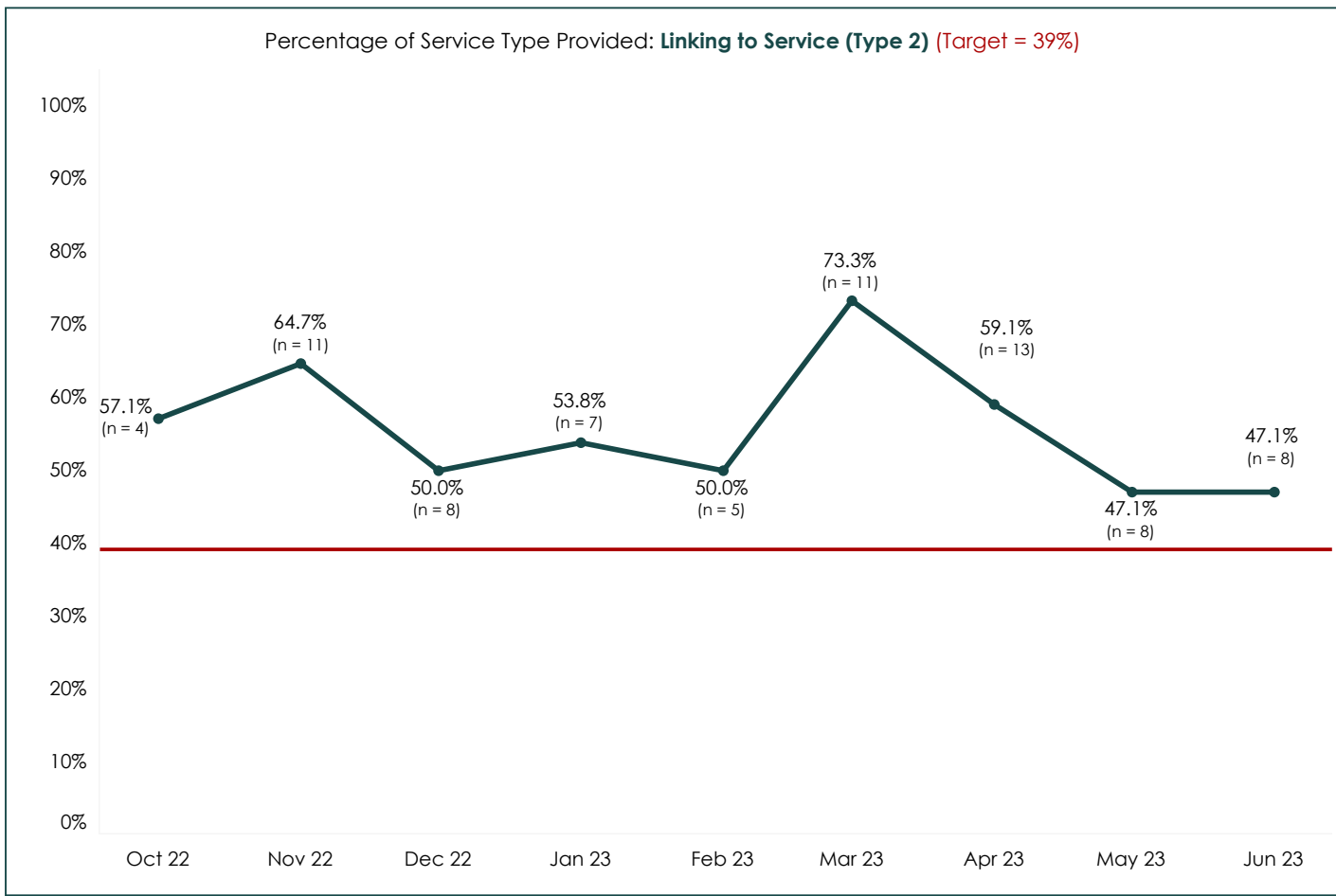Sarpy County Jail Social Work
Lauren Reed

Review Frequency:

Quarterly

Analysis:

• Old data has been phased out in favor of new data developed over the last several months with the Connection to Care team.

Goal 3:	Increase the Percentage of Connection to Care for people with a Serious Mental Illness (SMI) in Jail

Objective 4:	At least 14% of people with a SMI who are not connected to Type 2 services prior to re-entry are connected to Type 1 services prior to re-entry.

Percentage of Service Type Provided: **Information & Referral (Type 1)** (Target = 25%)

Data points:
- Oct 22: 66.7% (n = 2)
- Nov 22: 50.0% (n = 3)
- Dec 22: 62.5% (n = 5)
- Jan 23: 33.3% (n = 2)
- Feb 23: 20.0% (n = 1)
- Mar 23: 25.0% (n = 1)
- Apr 23: 55.6% (n = 5)
- May 23: 66.7% (n = 6)
- Jun 23: 44.4% (n = 4)

Measure:

Number of SMI individuals given information or a referral to a service / total number of SMI individuals discharged from jail in the month

Definitions:

Percentage of individuals with a SMI that were given information or referred to a service during their stay in jail.

Data Source:

Sarpy Public Defender Social Work Department
Ashley Berg
Taylor Stanton

Sarpy County Jail Social Work
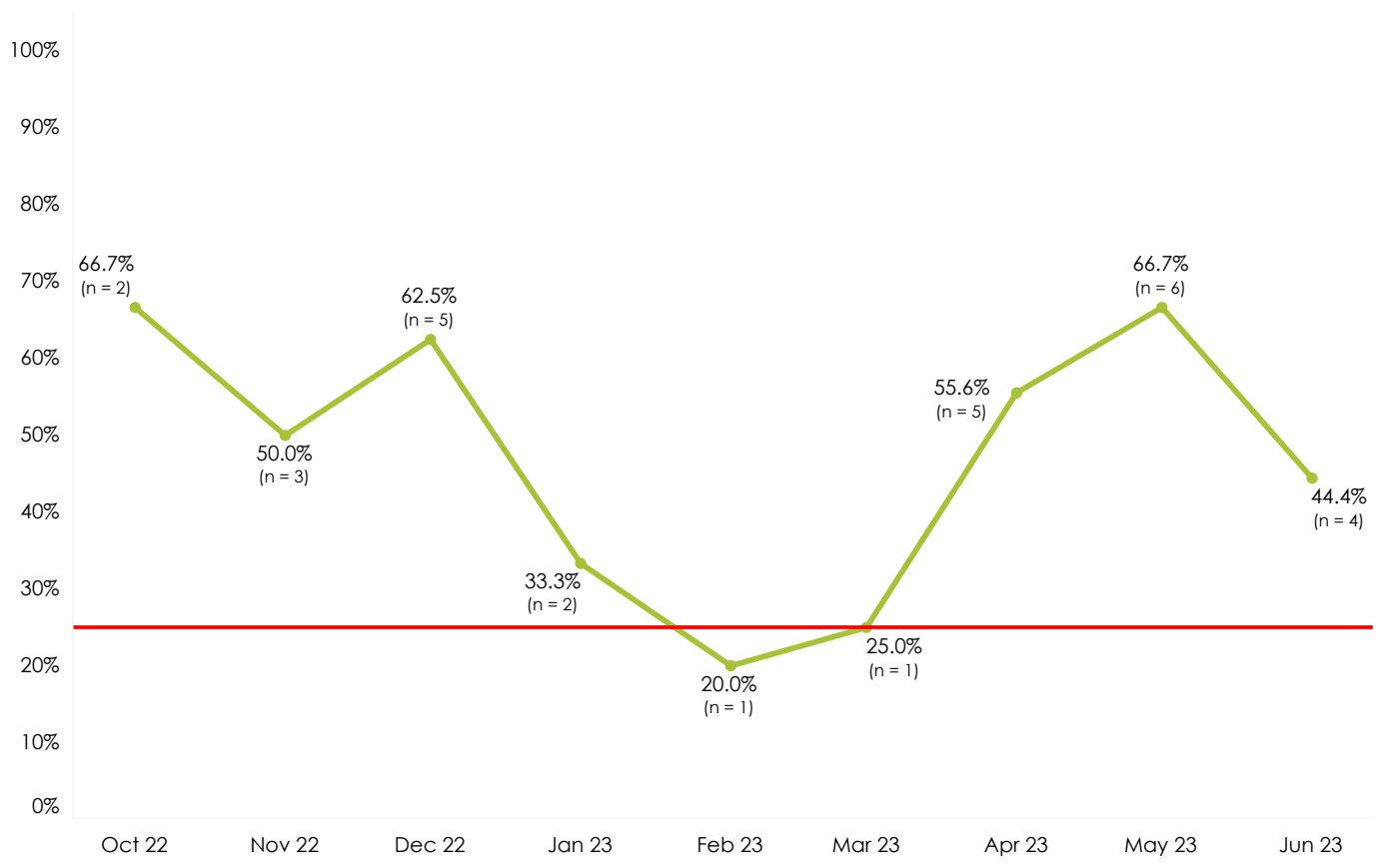Lauren Reed

Review Frequency:

Quarterly

Analysis:

• Old data has been phased out in favor of new data developed over the last several months with the Connection to Care team.

Goal 3:	Increase the Percentage of Connection to Care for people with a Serious Mental Illness (SMI) in Jail

Objective 4:	Partner with BAART to explore opportunities to provide Methadone to individuals who were receiving Methadone prior to incarceration.

Placeholder

Measure:

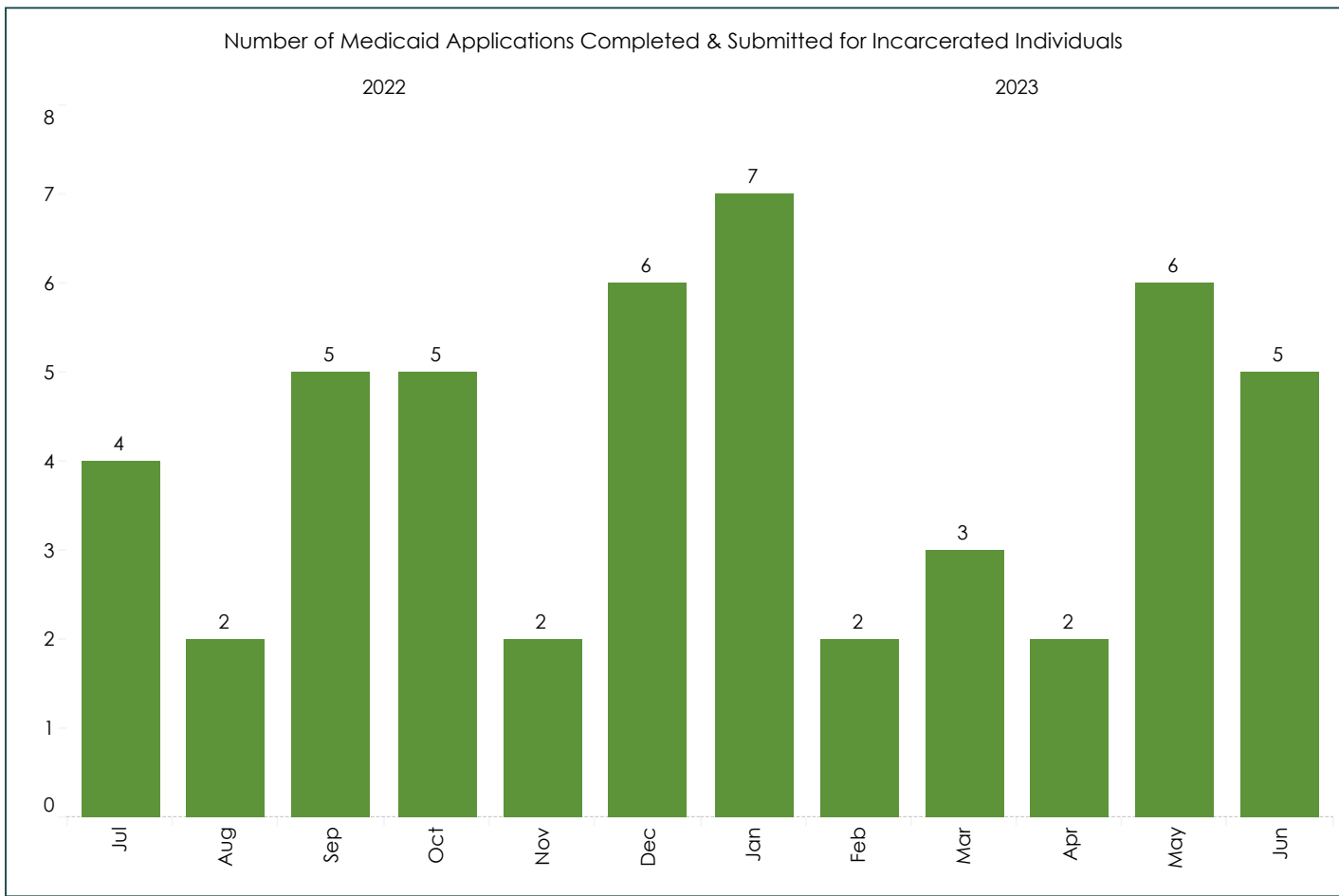**Definitions:**

Data Source:

Review Frequency:

Analysis:

Goal 3:	Increase the Percentage of Connection to Care for people with a Serious Mental Illness (SMI) in Jail

Objective 5:	Collect baseline data to understand the impact of Medicaid Expansion with those involved in the Criminal Justice System

Number of Medicaid Applications Completed & Submitted for Incarcerated Individuals

2022   2023

Chart values by month:
- Jul: 4
- Aug: 2
- Sep: 5
- Oct: 5
- Nov: 2
- Dec: 6
- Jan: 7
- Feb: 2
- Mar: 3
- Apr: 2
- May: 6
- Jun: 5

Measure:

Number of Medicaid applications completed and submitted while individual is incarcerated by month.

Definitions:

Data Source:

Lauren Reed - Re-entry Sarpy County Jail
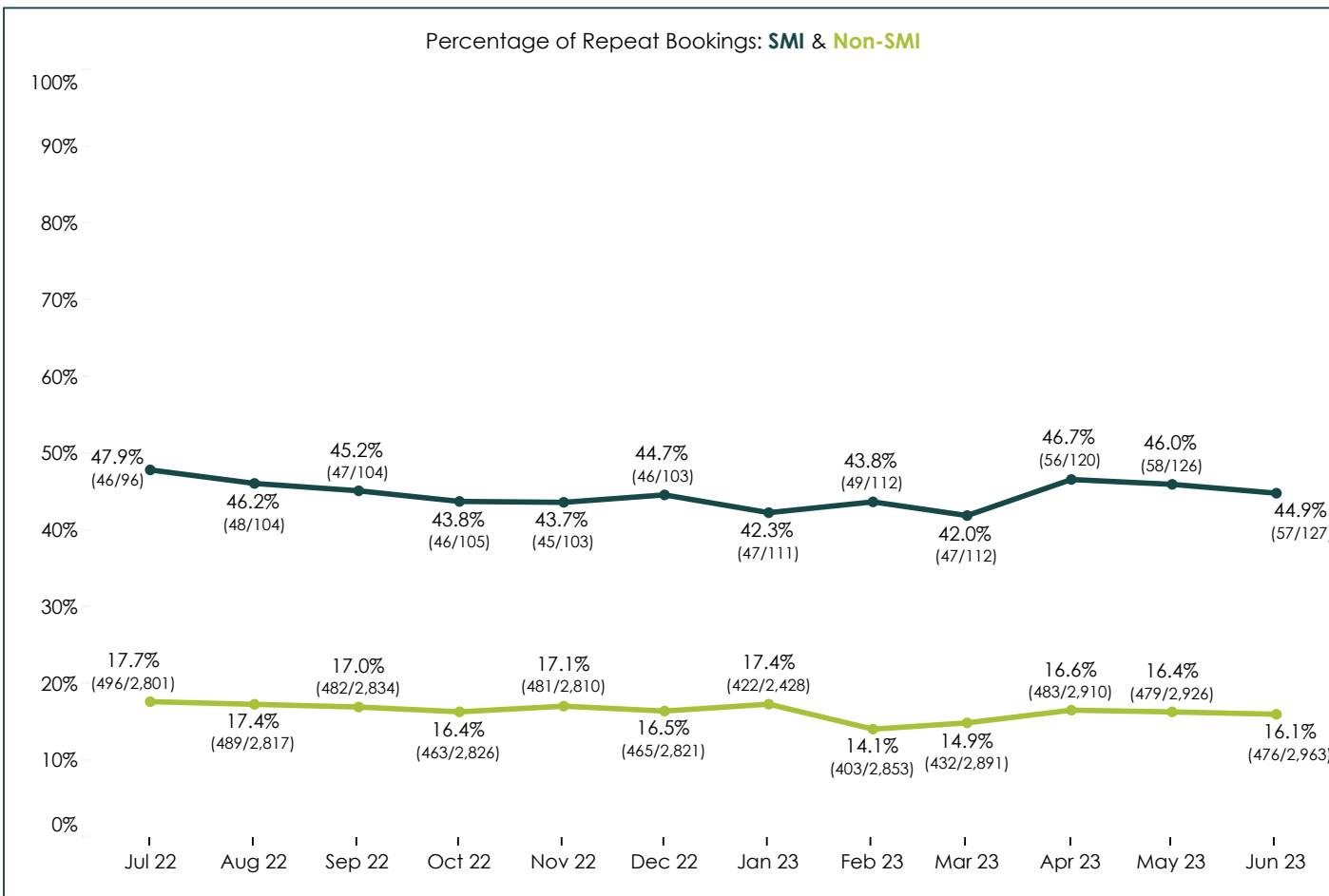
Review Frequency:

Quarterly

Analysis:

• No statistically significant pattern is able to be identified; this is likely due to the small *n* of referrals for this data point.

Stepping Up 4 Key Measures

Goal 4:	Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail
	Intercepts 0,1,2,3,4,5

Strategy	Target	Notes/Updates
Objective 1:	**Evaluate data from the Specialized Transition Planning (STP) to determine impact on recidivism.**	
a. Collect baseline data, develop report, share with the team.		Vicki will work with Lauren, Kim, and Jo.
b. Identify opportunities to improve.	2022	Steering Committee
Objective 2:	**Utilize Long-Acting Injectables (LAI) when clinically appropriate (voluntary).**	
a. Collect and monitor baseline data to better understand the utilization of LAI's in the jail.		Ongoing
Objective 3:	**Provide 7 days' worth of medication at the time of release from jail.**	
a. Review current practice, and identify any improvements as needed.		Steering Committee - Jo M. Lead

Goal 4:	Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail

Percentage of Repeat Bookings: SMI & Non-SMI

SMI line:
- Jul 22: 47.9% (46/96)
- Aug 22: 46.2% (48/104)
- Sep 22: 45.2% (47/104)
- Oct 22: 43.8% (46/105)
- Nov 22: 43.7% (45/103)
- Dec 22: 44.7% (46/103)
- Jan 23: 42.3% (47/111)
- Feb 23: 43.8% (49/112)
- Mar 23: 42.0% (47/112)
- Apr 23: 46.7% (56/120)
- May 23: 46.0% (58/126)
- Jun 23: 44.9% (57/127)

Non-SMI line:
- Jul 22: 17.7% (496/2,801)
- Aug 22: 17.4% (489/2,817)
- Sep 22: 17.0% (482/2,834)
- Oct 22: 16.4% (463/2,826)
- Nov 22: 17.1% (481/2,810)
- Dec 22: 16.5% (465/2,821)
- Jan 23: 17.4% (422/2,428)
- Feb 23: 14.1% (403/2,853)
- Mar 23: 14.9% (432/2,891)
- Apr 23: 16.6% (483/2,910)
- May 23: 16.4% (479/2,926)
- Jun 23: 16.1% (476/2,963)

Measure:

Number of repeat bookings for individuals across SMI/Non-SMI groupings / Number of repeat bookings for each group separately.

Definitions:
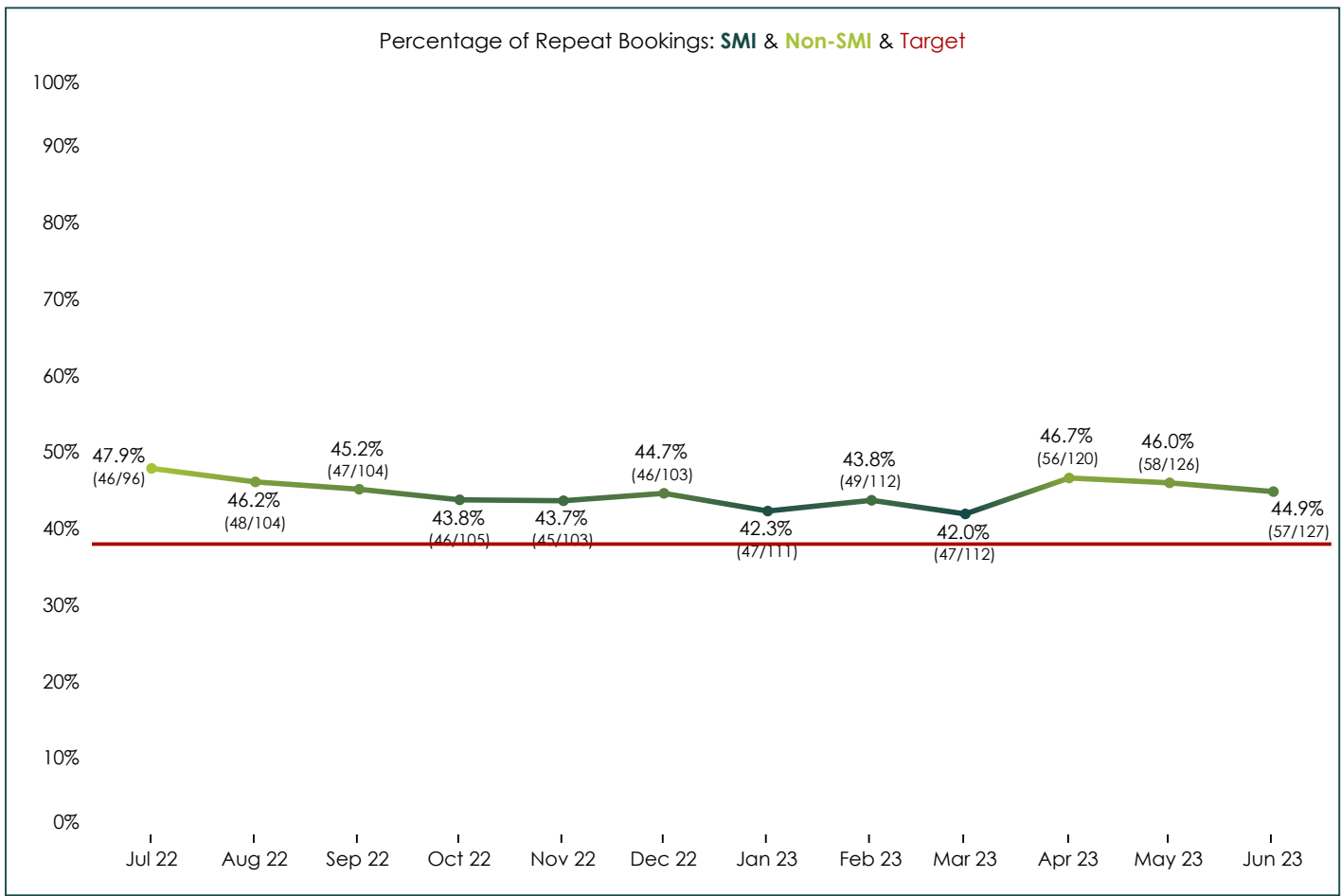
Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Analysis:

• Future analysis will focus on more granular detail, to include data related to the frequency of repeat bookings by group, and efforts to connect data from Measure 4 directly to Measures 1 - 3.

• The overall percentage of repeat bookings for both populations continues to remain flat over all data collected, with some minor variations over the calendar year of review.

• These numbers are compared against the number of bookings by each category, not by the *total* number of bookings, in order to highlight the recidivism differences between each population, rather than the percent of total bookings with an SMI.

Goal 4:	Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail **by 5%**

Percentage of Repeat Bookings: SMI & Non-SMI & Target

Data points:
- Jul 22: 47.9% (46/96)
- Aug 22: 46.2% (48/104)
- Sep 22: 45.2% (47/104)
- Oct 22: 43.8% (46/105)
- Nov 22: 43.7% (45/103)
- Dec 22: 44.7% (46/103)
- Jan 23: 42.3% (47/111)
- Feb 23: 43.8% (49/112)
- Mar 23: 42.0% (47/112)
- Apr 23: 46.7% (56/120)
- May 23: 46.0% (58/126)
- Jun 23: 44.9% (57/127)

Measure:

Number of repeat bookings for individuals with an SMI / Number of total bookings for individuals with an SMI

Definitions:

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Quarterly

Analysis:

• Future analysis will focus on more granular detail, to include data related to the frequency of repeat bookings by group, and efforts to connect data from Measure 4 directly to Measures 1 - 3.

• The overall percentage of repeat bookings for both populations continues to remain flat over all data collected, with some minor variations over the calendar year of review.

• These numbers are compared against the number of bookings by each category, not by the *total* number of bookings, in order to highlight the recidivism differences between each population, rather than the percent of total bookings with an SMI.

Goal 4:	Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail

Objective 1:	Evaluate data from the Specialized Transition Planning (STP) to determine impact on recidivism.

Placeholder

Measure:

Definitions:

Data Source:

Review Frequency:

Analysis:

Goal 4:	Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail
Objective 2:	Utilize Long-Acting Injectables (LAI; anti-psychotic) when clinically appropriate (Voluntary).

Inmates and Long-Acting Injectables (LAI)

Measure:

Inmates on Long-Acting Injectables

Definitions:

Inmates prescribed 1st or 2nd generation LAIs

Data Source:

Jo Martin - Sarpy County Jail

Review Frequency:

Analysis:

- Generation 1 LAI's include: Haldol, Clopixol, Fluanxol
- Generation 2 LAI's include: Aristada, Abilify, and Invega

Long-Acting Injectable (LAI): LAI anti-psychotics are a pharmocologic strategy for treating patients with schizophrenia who relapse due to non-adherence to anti-psychotic medication.

- The average number of LAI's prescribed has not changed significantly over the calendar year; this item has a very small *n* of individuals, and as such, it is difficult to assess the overall impact this is having on items related to ALOS in the jail, recidivism, etc.

- Data Question: How many individuals who receive LAI's have had re-entries into the jail? What services are this population being connected to help maintain LAI's following release?

Stepping Up

Analysis

Data Questions:

Data Considerations:

Complicating Factors:

Recommendations:

Notes:

Participants

- Jo Martin* - Corrections Admin.

- Lauren Reed - Corrections Reentry

- Sgt. Rob Hillabrand* - Sarpy County Sheriff

- Tom Dargy - County Administration

- Kate Gatewood - County Attorney

- Ashley Berg* - Public Defender Social Worker

- Taylor Stanton - Public Defender Social Worker

- Carisa Godsa - MH Diversion

- David Soto - MH Diversion

- Jacob Berst - Community Corrections

- Ashlie Weisbrodt - Mental Health Pre-Trial

- Jeff Jennings - Probation

- Creston Ashburn - Speciality Courts

- D.J. Barcal - LaVista PD

- Captain Tim Melvin - Bellevue PD

- Chris Goley - Papillion PD

" * " indicates Stepping Up Steering Committee Members

Region 6 Behavioral Healthcare Contacts

Nick Chadwell
Data Analyst
nchadwell@regionsix.com
OFFICE: 402.996.8390 | FAX: 402.444.7722

Curt Vincentini, MS
Emergency System Manager
cvicentini@regionsix.com
OFFICE: 402.444.7719 | CELL: 402.658.1298 | FAX: 402.444.7722

Kim Kalina, MSW
Director of Quality Improvement
kkalina@regionsix.com
OFFICE: 402.546.1196 | CELL: 402.637.6606 | FAX: 402.444.7722

Vicki Maca, LCSW, LMHP
Director of Criminal Justice / Behavioral Health Initiatives
vmaca@regionsix.com
OFFICE: 402.591.5010 | CELL: 531.444.8615 | FAX: 402.444.7722