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 6, 2026

Stepping Up Agenda

August 6, 2026

1. Welcome and Introductions
2. Updates:
    - Statewide Summit: Sequential Intercept Model (SIM) Intercepts 2 Initial Detention & 3 Jail/Courts
    - Survey for Jails coming from Region 6
    - Sarpy County SIM, Monday, Sept. 14th (Registration went out August 4). Douglas County SIM is Wed. Sept. 16th (Registration went out August 3). Vote or go with predetermined priorities and use time to develop plans. Use Stepping Up Sarpy Co Steering Committee to oversee SIM priorities.
    - Tour Lincoln Regional Center (LRC)
    - Certified Community Behavioral Health Center (CCBHC)
    - Information Sharing Project Update: Recommendation to Regional Governing Board on August 12
    - Update on Megan Davidson-Stepping Up Program Director The Council of State Governments (CSG) Justice Center
        - Left CSG on Monday, August 3, going to the National Association of State Head Injury Administrators (NASHIA), leading training, evaluation, and technical assistance work around brain injury as it intersects with the justice system, behavioral health, and child welfare.

3. Review Workplan and Data Reports
4. Next Meeting Thursday, October 29th at 1pm
5. Else
6. Conclude

Sarpy County Sequential Intercept Mapping (SIM) Priorities (May 2022)

1. Create a Sarpy County specific Emergency System Team to focus on solutions to challenges within the Emergency System.
2. Improve collaboration among providers service individuals from both the criminal justice and behavioral health systems.
3. Communicate upcoming Board of Mental Health changes.
4. Improve data sharing between criminal justice and behavioral health systems.

Stepping Up Definitions and Glossary

Terms and Abbreviations

Brief Jail Mental Health Screen (BJMHS):	primary tool utilized in detainee screening to determine whether futher mental health assessment is warranted.
Crisis Intervention Teams (CIT):	the Memphis Crisis Intervention Team (CIT) model is an innovative, police-based, first responder program that has become nationally known as the "Memphis Model" of pre-arrest jail diversion for those in a mental health crisis. This program provides law enforcement based crisis intervention training for helping those individuals with mental illness. Involvement in CIT is voluntary and based on the patrol division of respective police departments. In addition, CIT works in partnership with those in mental health care services to provide a system of services that is friendly to the individuals with mental illness, family members, and police officers.
Crisis Response and Intervention Training (CRIT):	is a 40-hour training program designed to prepare police officers in their response to people experiencing crises related to behavioral health conditions (including mental health conditions and substance use disorders) and intellectual and developmental disabilities. This training is based upon the origial Crisis Intervention Team (CIT) training and is designed to complement the development and delivery of crisis response programs planned by law enforcement agencies, behavioral health service providers, and disability service providers in the community.
Long-Acting Injectables (LAI):	long-acting injectables (LAIs) are antipsychotic psychotropic medications administered through an injection. LAIs provide a pharmacological strategy for treating patients with serious mental illness(es) who relapse due to non-adherence to other antipsychotic medications often administered through other routes.
Medication-Assisted Treatment (MAT):	medication-assisted treatment (MAT) is the use of medications with counseling and behavioral health therapies to treat substance use disorders and prevent opioid overdoses.
Mental Health First Aid (MHFA):	mental health first aid (MHFA) is an eight-hour public education training that introduces participants to the risk factors and warning signs of mental health problems, builds understanding of the impact of mental health problems, and provides an overview of common treatments. Re-certification is required every 3 years for this training.
Recidivism:	refers to a peson's relapse into criminal behaviors, and is measured by criminal acts that result in a person being 're-booked' into jail within twelve (12) months of that person's last release date for other offenses.
Serious Mental Illness (SMI):	individuals who self-report a serious mental illness, and/or are diagnosed with one of the following diagnostic groupings: **(i)** Schizophrenia, **(ii)** Schizoaffective Disorder, **(iii)** Delusional Disorder, **(iv)** Bipolar Affective Disorder, **(v)** Major Depressive Disorder, **(vi)** Obsessive-Compulsive Disorder, and/or **(vii)** Psychotic Disorder.

Data Applications and Software Used

P1-CAD:	this is the primary dispatch system for law enforcement and fire department agencies across Sarpy County.
IMACS:	the primary jail booking software utilized at the Sarpy County Jail.
ProPhoenix Records Management System (RMS):	the primary records management system for law enforcement agencies across Sarpy County.
MH:	primary system utilized in Sarpy County to help track MHY type persons.

Stepping Up 4 Key Measures

Sarpy County

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 serious mental illness (SMI) during the month.

Denominator: The average daily population (ADP) of the jail for the month.

Data Source: Sarpy County Department of Corrections

Date Provided: Quarterly

Review Frequency: Quarterly

Notes: Current metric does not separate out people who are 're-booked' due to a jail commitment, bench warrant, or custodial sanction.

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

Numerator: The monthly average length of stay (ALOS) for adults released from jail with a serious mental illness (SMI).

Denominator: Total number of adults released from the jail.

Data Source: Sarpy County Department of Corrections

Date Provided: Quarterly

Review Frequency: Quarterly

Notes:

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

Numerator: **In Development**

Denominator: **In Development**

Data Source: Sarpy County Department of Corrections; Sarpy County Public Defender's Office

Date Provided: Quarterly

Review Frequency: Quarterly

Notes: New dataset is currently in development for this metric to better capture persons eligible for re-entry planning through the jail and public defender's office.

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

Numerator: The number of adults with a serious mental illness (SMI) who are re-booked into jail within twelve (12) months following their last release date.

Denominator: The total number of bookings with a serious mental illness (SMI)

Data Source: Sarpy County Department of Corrections

Date Provided: Quarterly

Review Frequency: Quarterly

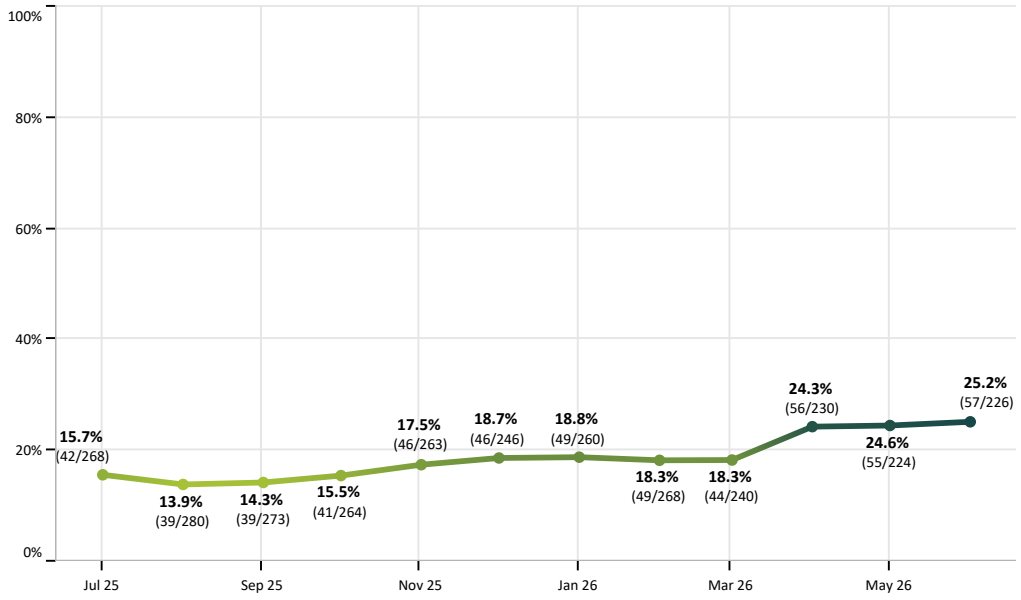
Notes: Current metric does not separate out people who are 're-booked' due to a jail commitment, bench warrant, or custodial sanction.

Stepping Up 4 Key Measures

Sarpy County

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

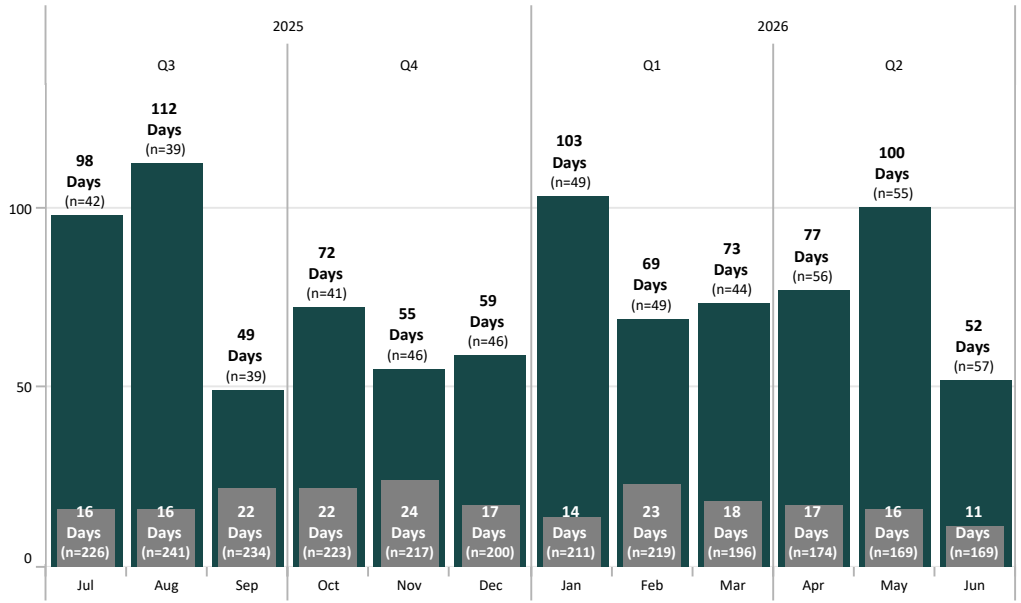
Percentage of Average Daily Population (ADP) with a Serious Mental Illness (SMI)



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

Average Length of Stay (ALOS) in Days for those Incarcerated

(SMI / Non-SMI)



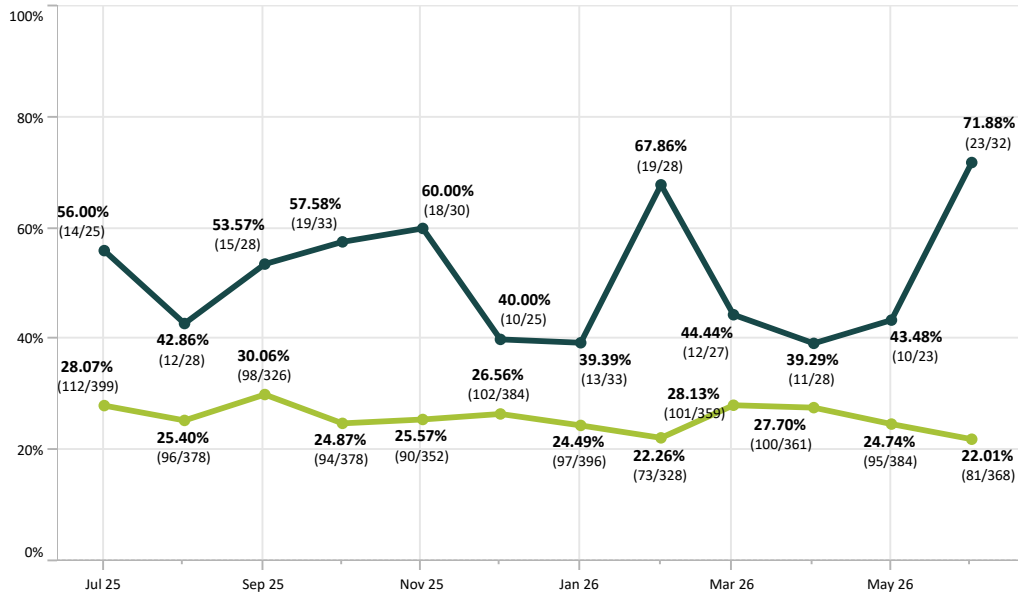
Goal 3: Increase Percentage of Connections to Care for People with a Serious Mental Illness (SMI) in Jail

New Metric In Development

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

Percent of Bookings per Month with a Previous Booking in the Last 12 Months

(SMI / Non-SMI)



"Set, Measure, & Acheive" 4 Key Measures

Sarpy County

Goal 1: Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail by 5% annually

Numerator:	The number of adults booked into the jail with a diagnosed or self-reported serious mental illness (SMI) during the month.
Denominator:	
Data Source:	Sarpy County Department of Corrections
Date Provided:	Quarterly
Review Frequency:	Quarterly
Notes:	Current metric does not separate out people who are 're-booked' due to a jail commitment, bench warrant, or custodial sanction.

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 length of stay (ALOS) for adults released from jail with a serious mental illness (SMI).
Denominator:	Total number of adults released from the jail.
Data Source:	Sarpy County Department of Corrections
Date Provided:	Quarterly
Review Frequency:	Quarterly
Notes:	

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

Numerator:	**In Development**
Denominator:	**In Development**
Data Source:	Sarpy County Department of Corrections; Sarpy County Public Defender's Office
Date Provided:	Quarterly
Review Frequency:	Quarterly
Notes:	New dataset is currently in development for this metric to better capture persons eligible for re-entry planning through the jail and public defender's office.

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

Numerator:	The number of adults with a serious mental illness (SMI) who are re-booked into jail within twelve (12) months following their last booking date.
Denominator:	The total number of bookings with a serious mental illness (SMI)
Data Source:	Sarpy County Department of Corrections
Date Provided:	Quarterly
Review Frequency:	Quarterly
Notes:	Current metric does not separate out people who are 're-booked' due to a jail commitment, bench warrant, or custodial sanction.

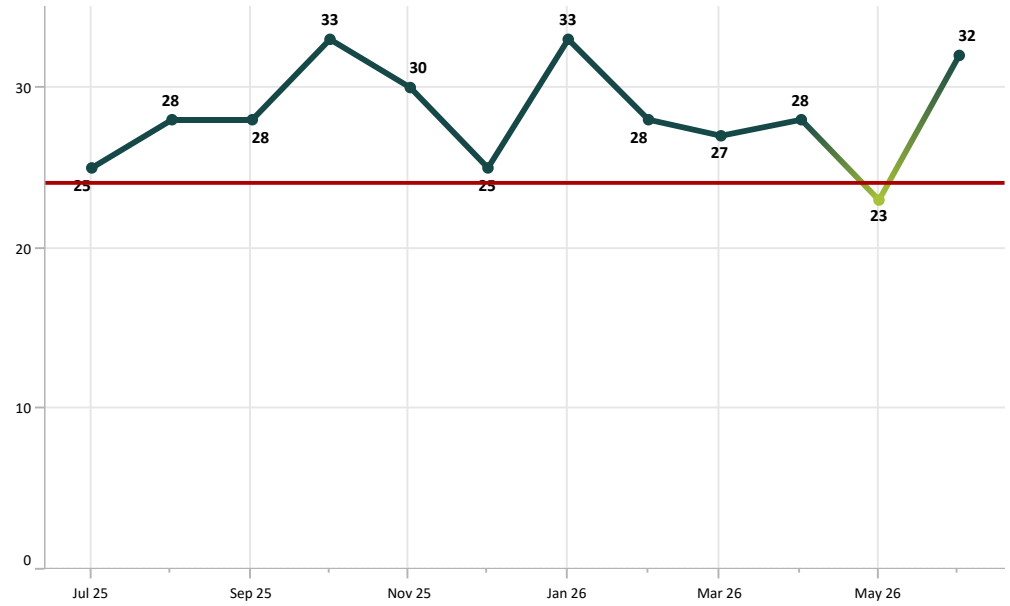
"Set, Measure, & Acheive" 4 Key Measures

Sarpy County

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

Number of Bookings for Persons with a Serious Mental Illness (SMI) in the Last 12 Months

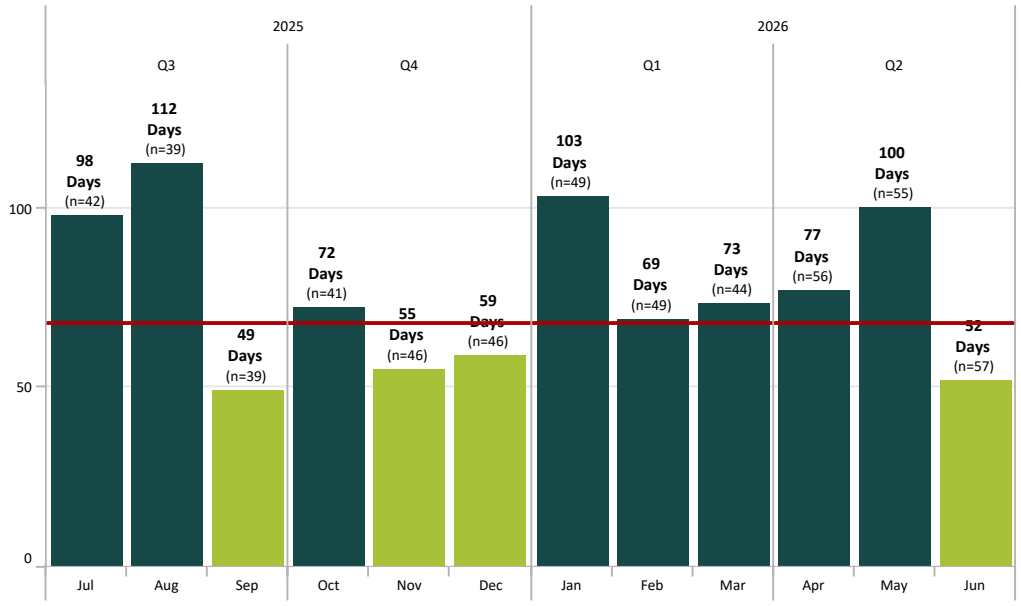
(Target = 24 Bookings)



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

Average Length of Stay in Days for People with a Serious Mental Illness (SMI)

(Target = 68 Days)



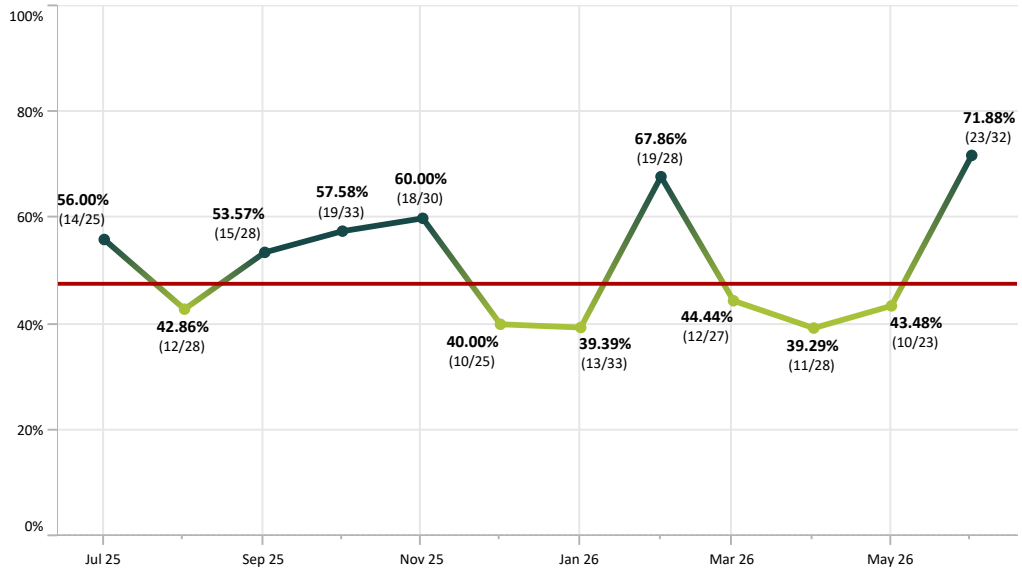
Goal 3: Increase Percentage of Connections to Care for People with a Serious Mental Illness (SMI) in Jail

New Metric in Development

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

Percent of Bookings per Month for Persons with a Serious Mental Illness (SMI) and a Previous Booking in the Last 12 Months

(Target = 47.48%)



Stepping Up 4 Key Measures – Sarpy County

Goal 1	Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail Set, Measure, Achieve Target = 24 Individuals or Less		
	Strategy	**Status/Target**	**Notes/Updates**
Objective 1:	**Each Law Enforcement Agency in Sarpy County will work toward having 100% of Sworn Officers Trained in CIT, and/or CRIT, MHFA, or both.**		
a.	Review CIT and/or CRIT and MHFA data for each law enforcement agency, develop strategies as needed.	Ongoing	
Objective 2:	**The 911 Call Center, County Attorney's Office, Public Defender's Office, and Probation will have 100% Identified Staff Trained in CIT and/or CRIT and MHFA.**		
a.	Collect and monitor baseline data; develop strategies as needed.	Ongoing	
Objective 3:	**Law Enforcement Agencies will Provide the Best Possible Response to Calls Involving a Mental Health Related Crisis.**		
a.	Collect baseline data on Crisis Center Triage Disposition; develop strategies as needed.	Ongoing	
b.	Collect baseline data on Mobile Crisis Response Assessments completed by law enforcement agency; develop strategies as needed.	Ongoing	
c.	Collect baseline data on Mobile Crisis Response Disposition categories; develop strategies as needed.	Ongoing	
d.	Region 6 leading Information Sharing Project.	Ongoing	
Objective 4:	**Monitor Number of Individuals with a Serious Mental Illness (SMI) Booked into Jail with a Misdemeanor Charge.**		
a.	Collect baseline data on individuals with a SMI booked into jail with a misdemeanor charge (highest charge) by law enforcement agency; develop strategies as needed.	Ongoing	

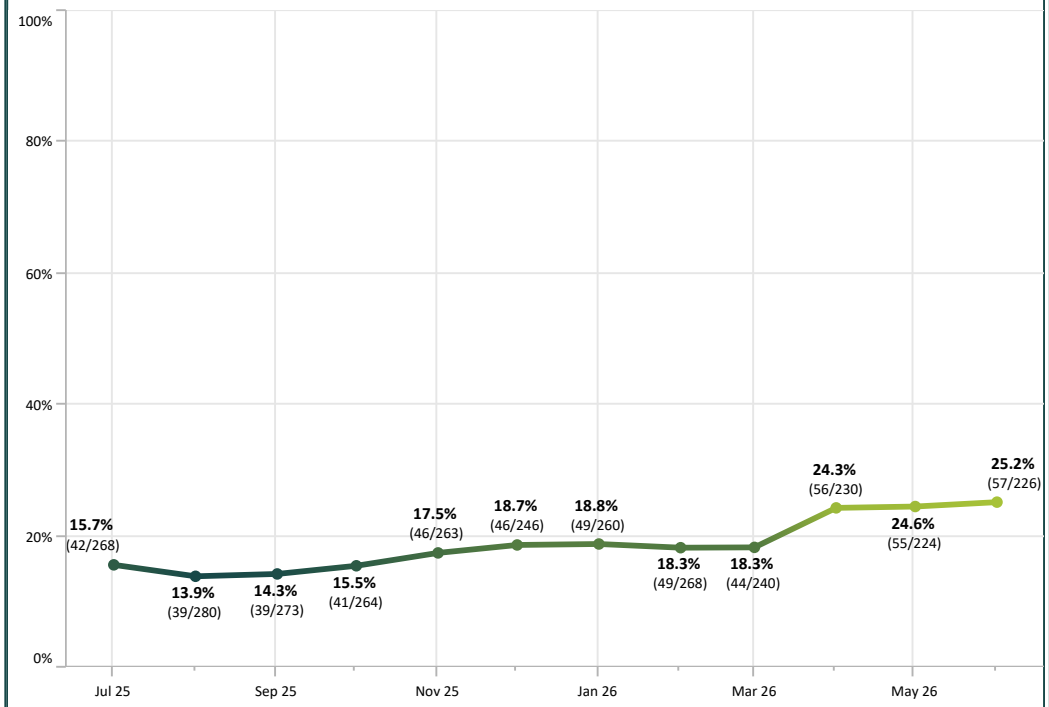
The Crisis Stabilization and Resource Center could impact the number of misdemeanor bookings. Short overnight stays will be available in early 2026 (Voluntary only, not for those who are EPC'd).

Stepping Up

Sarpy County

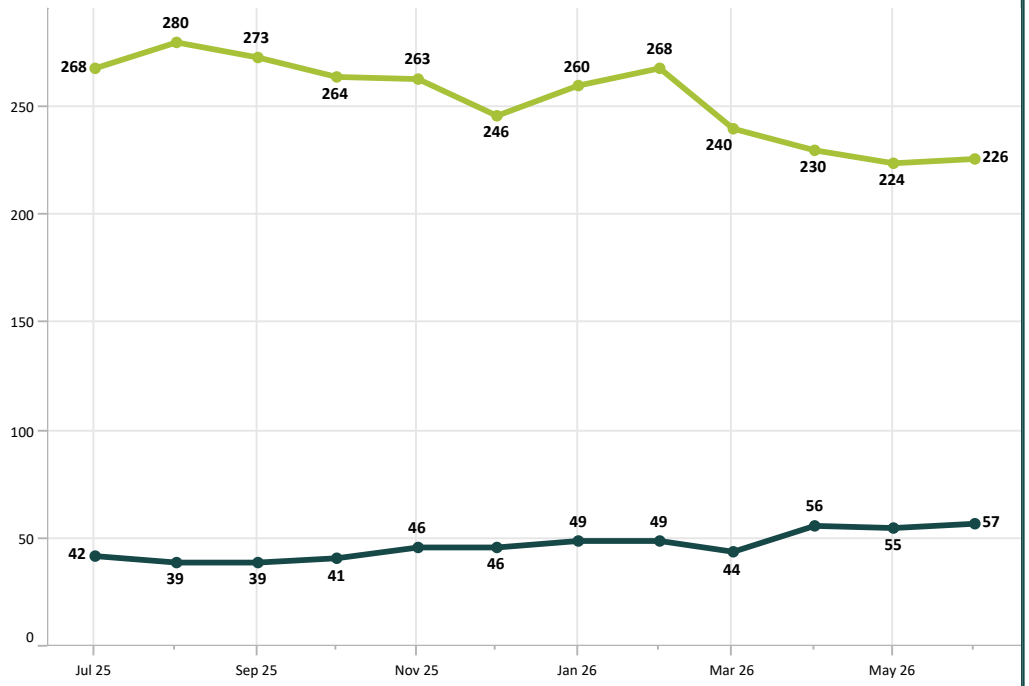
Goal 1: Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

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



Average Daily Population (ADP) of Sarpy County Jail

(SMI/Jail Total)



Measure:	Definition:	Data Source:	Review Frequency:
The average daily population (ADP) for those with a serious mental illness (SMI) in the jail for the month	By month	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

• These numbers may also be impacted by warrants, citations, sanctions, or commitments based on new charges for existing releases. Any factor that may result in a repeat booking on the same charge could influence these metrics.

• The overall percentage of the Sarpy County Jail population reported as having a serious mental illness (SMI), when compared to the total jail population, had been decreasing over the course of CY 2025. This was tied to increases in the non-SMI population being served over time and increases in overall jail volume each month. However, starting in Q4 of CY 2025 and continuing through Q2 of CY 2026, there have been notable increases in the ratio of SMI population over the total jail population again, again due to decreases in the non-SMI population at the jail. This can be seen in the most recent quarter, where the total non-SMI population dropped to it's lowest point over the last twelve (12) rolling months (see chart on right), while the SMI population increased to it's highest point in the same period. This has resulted in a sharp increase in the percent ADP on the left chart over the current quarter, with June 2026 reporting 25.2% of the jail's ADP flagged as having an SMI.

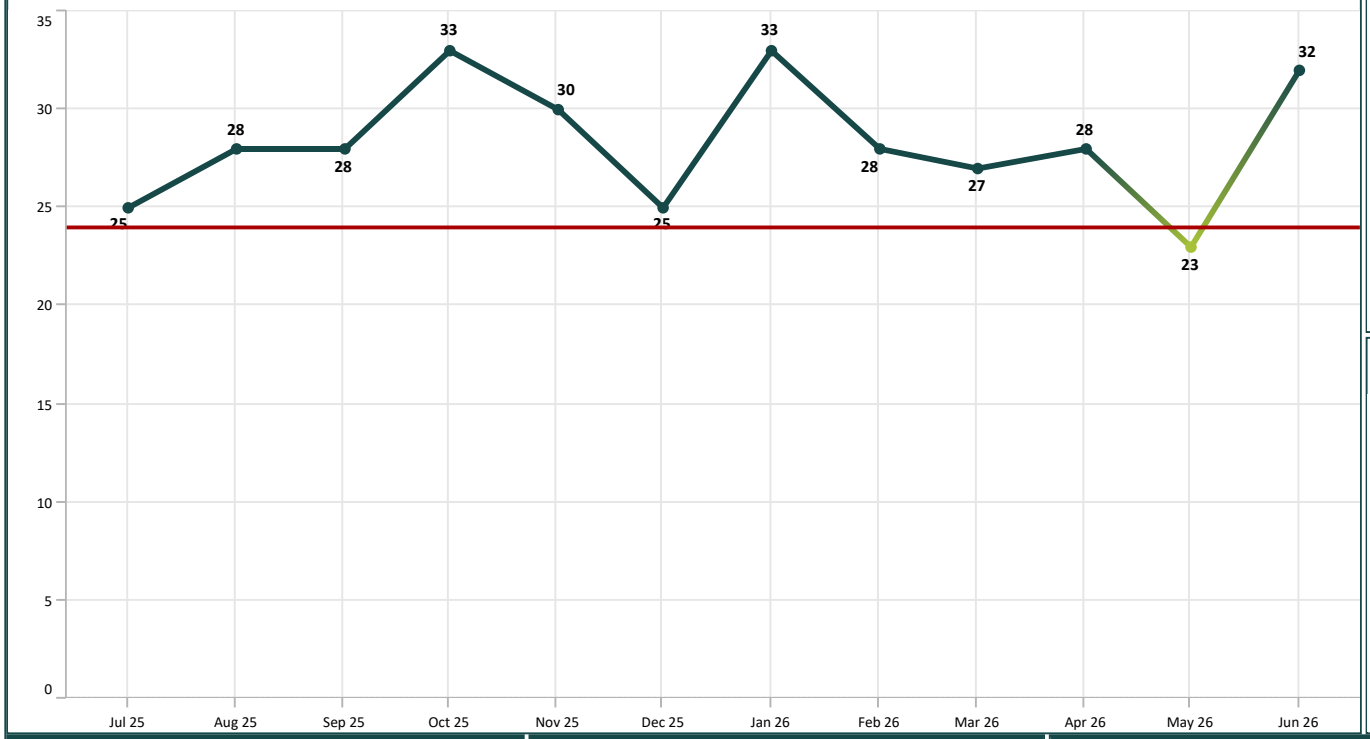
Stepping Up

Sarpy County

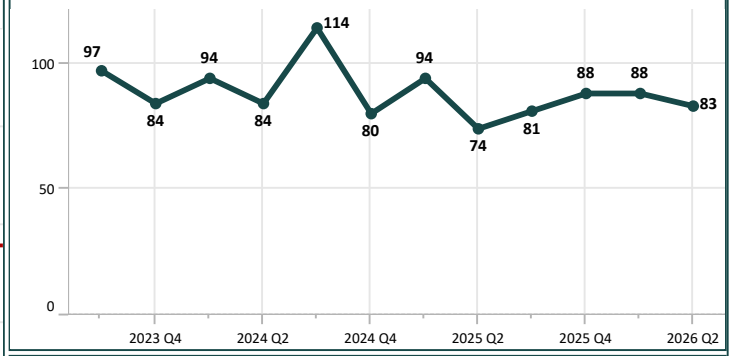
Goal 1: Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

Number of Bookings for Persons with a Serious Mental Illness (SMI) in the Last 12 Months

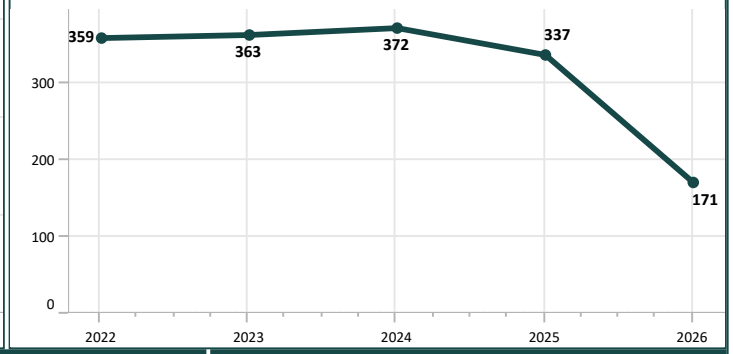
(Target = 24 Bookings)



Number of Bookings for Persons with a Serious Mental Illness by Quarter



Number of Bookings for Persons with a Serious Mental Illness by Year



Measure:	Definition:	Data Source:	Review Frequency:
The number of adults booked into the jail with a diagnosed or self-reported serious mental illness (SMI) during the month)	By month, quarter, and year	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

• A new target of twenty-four (24) bookings was established for this metric in CY 2025. The new target was based on a new data set introduced in CY 2025, and a 5% reduction in the total number of monthly bookings from the CY 2024 average. As the CY 2025 monthly average for bookings was higher than this target (26.83), the existing target was held for CY 2026.

• Sarpy County has been at or below the new target of twenty-four (24) bookings for individuals with a serious mental illness (SMI) for one (1) of the last twelve (12) months. For CY 2026 specifically, Sarpy County has been below the target for one (1) of the six (6) months of the calendar year.

• The Crisis Stabilization and Resource Center opened Triage services in August of CY 2024.

• These numbers may also be impacted by warrants, citations, sanctions, or commitments based on new charges for existing releases. Any factor that may result in a repeat booking on the same charge could influence these metrics.

• New data has been provided by Probation around re-entry to the jail from the Sarpy County Problem-Solving Courts (Drug Court, Wellness Court, Veterans Court, etc.). Currently only Q1 of CY 2026 is available, but we are anticipating additional data over the course of the calendar year. While the data is being cleaned and connected, initial results show that for this quarter, nine (9) bookings identified as having a SMI by the Sarpy County Jail were brought back on custo..

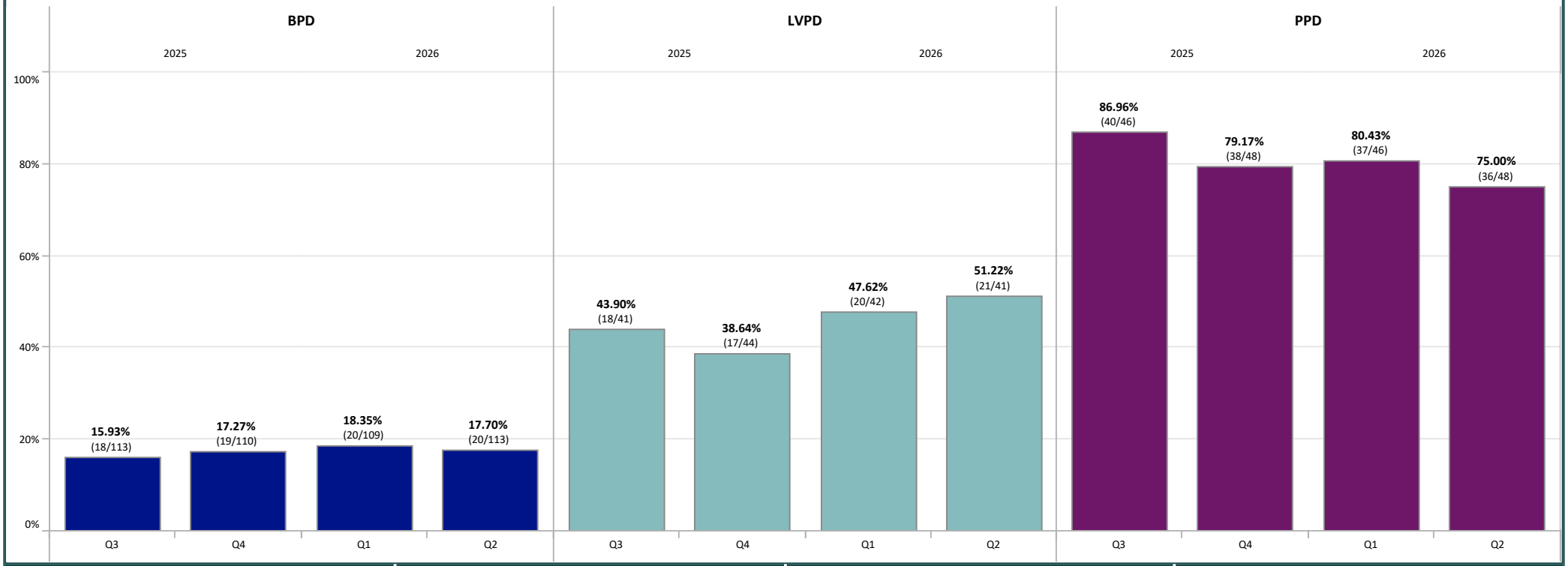
Stepping Up

Sarpy County

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

Objective 1: Each Law Enforcement Agency in Sarpy County will work toward having 100% of Sworn Officers Trained in either CIT/CRIT, MHFA, or Both

Percentage of Law Enforcement Officers Trained in CIT/CRIT



Measure:	Definition:	Data Source:	Review Frequency:
The total number of sworn officers with Crisis Intervention Team (CIT)/Crisis Response and Intervention Training (CRIT) / Total number of sworn officers	By quarter By law enforcement agency	**Sgt. Manning -** Bellevue Police Department (BPD) **Cpt. Gomon -** La Vista Police Department (LVPD) **Dep. Chief Orchard -** Papillion Police Department (PPD) **Dep. Dawn Herlacher -** Sarpy County Sheriff's Office (SCSO)	Quarterly

Analysis/Notes:

- Recertification for MHFA is required every 3 years. This metric does not take into consideration recertification for law enforcement officers, but counts whether or not they have completed the training at all.

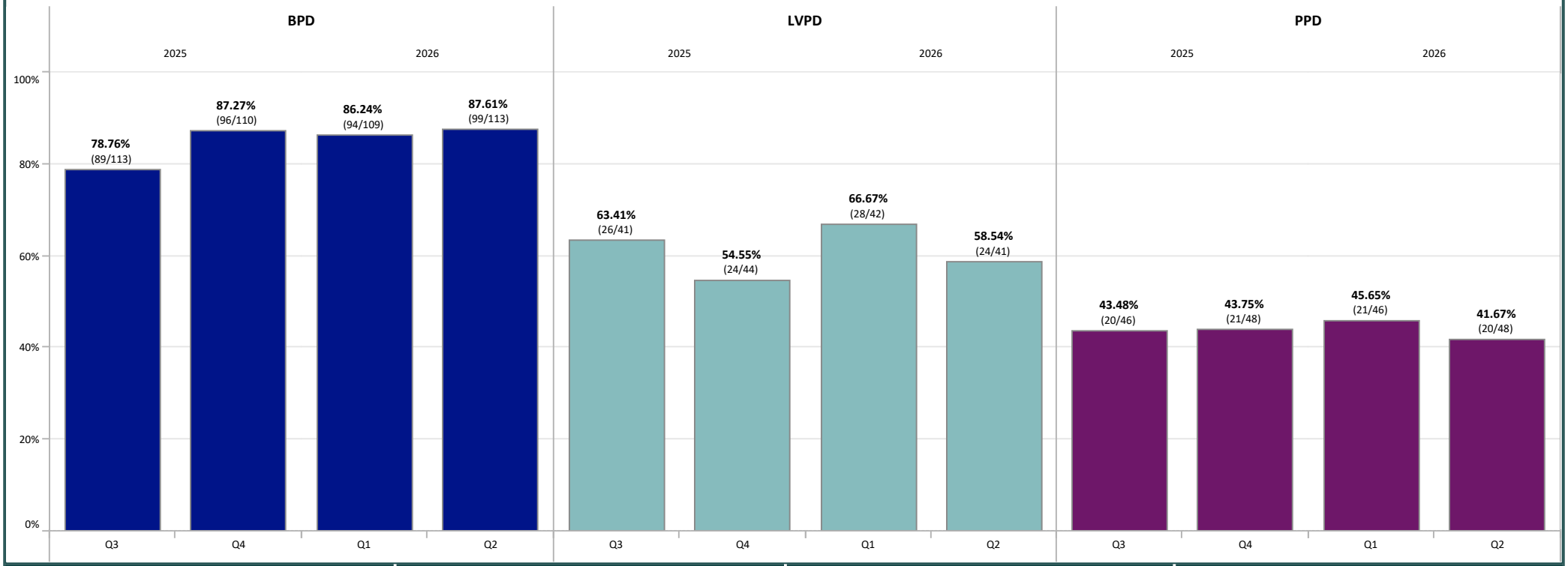
Stepping Up

Sarpy County

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

Objective 1: Each Law Enforcement Agency in Sarpy County will work toward having 100% of Sworn Officers Trained in either CIT/CRIT, MHFA, or Both

Percentage of Law Enforcement Officers Trained in MHFA



Measure:	Definition:	Data Source:	Review Frequency:
The total number of sworn officers with Mental Health First Aid (MHFA) training / Total number of sworn officers	By quarter By law enforcement agency	**Sgt. Manning -** Bellevue Police Department (BPD) **Cpt. Gomon -** La Vista Police Department (LVPD) **Dep. Chief Orchard -** Papillion Police Department (PPD) **Dep. Dawn Herlacher -** Sarpy County Sheriff's Office (SCSO)	Quarterly

Analysis/Notes:

- Recertification for MHFA is required every 3 years. This metric does not take into consideration recertification for law enforcement officers, but counts whether or not they have completed the training at all.

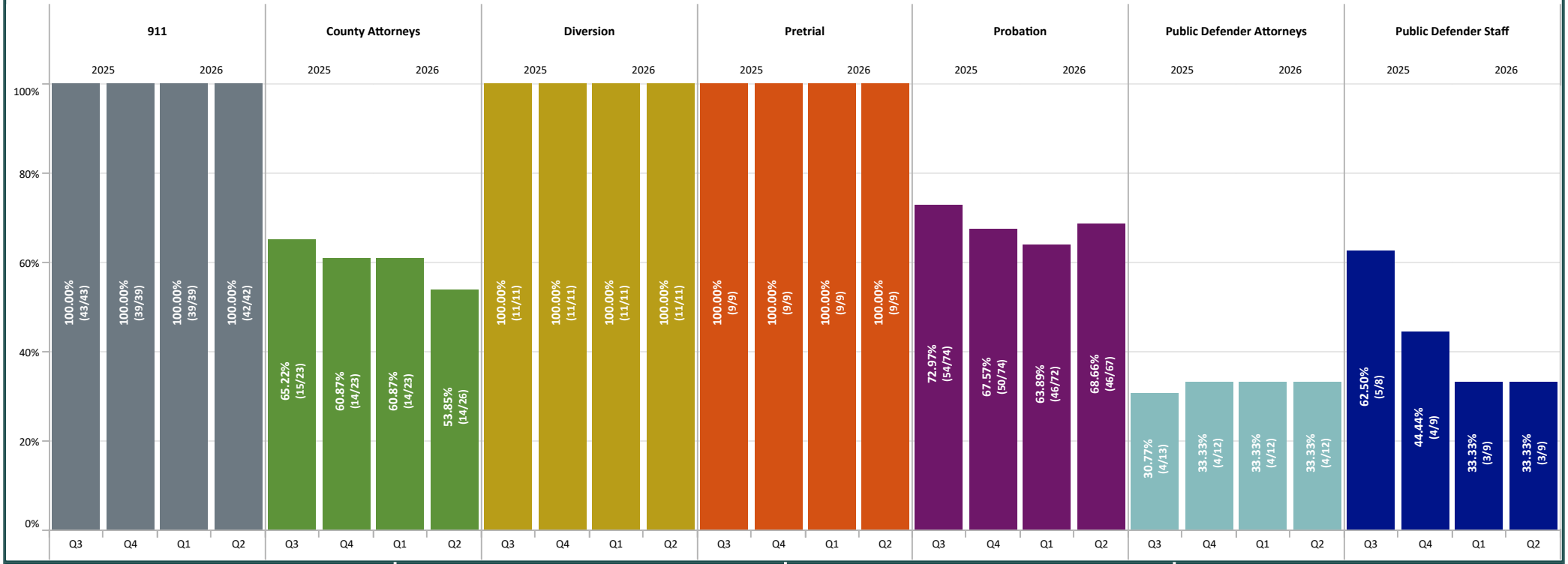
Stepping Up

Sarpy County

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

Objective 2: The 911 Call Center, County Attorney's Office, Public Defender's Office, Probation, Pretrial, and Diversion will have 100%% of Identified Staff Trained in CIT/CRIT and/or MHFA

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



Measure:	Definition:	Data Source:	Review Frequency:
The total number of eligible employees with Crisis Intervention Team (CIT) training/Crisis Response and Intervention Training (CRIT) and/or Mental Health First Aid (MHFA) training / Total number of eligible employees	By quarter By criminal justice stakeholder group	**William Muldoon** - 911 **Dylan Folchert** - Sarpy County Attorney's Office **Carisa Gosda** - Mental Health Diversion **Ashlie Weisbrodt** - Mental Health Pretrial **Jeff Jennings** - Probation **Ashley Berg** - Sarpy County Public Defender's Office	Quarterly

Analysis/Notes:

- Recertification for MHFA is required every 3 years.
- The Public Defender's Office has shown a decrease in the number of attorneys and staff trained with respect to CIP/MHFA. This decrease is due to recently expired FTEs and no further directives to renew training for attorneys or staff.
- The 911 Call Center, Diversion, and Pretrial have all continued to report 100% of staff trained in CIT/CRIT and/or MHFA as of Q2 of CY 2026.
- The Sarpy County Attorney's Office utilizes CIP not CIT/CRIT/MHFA.

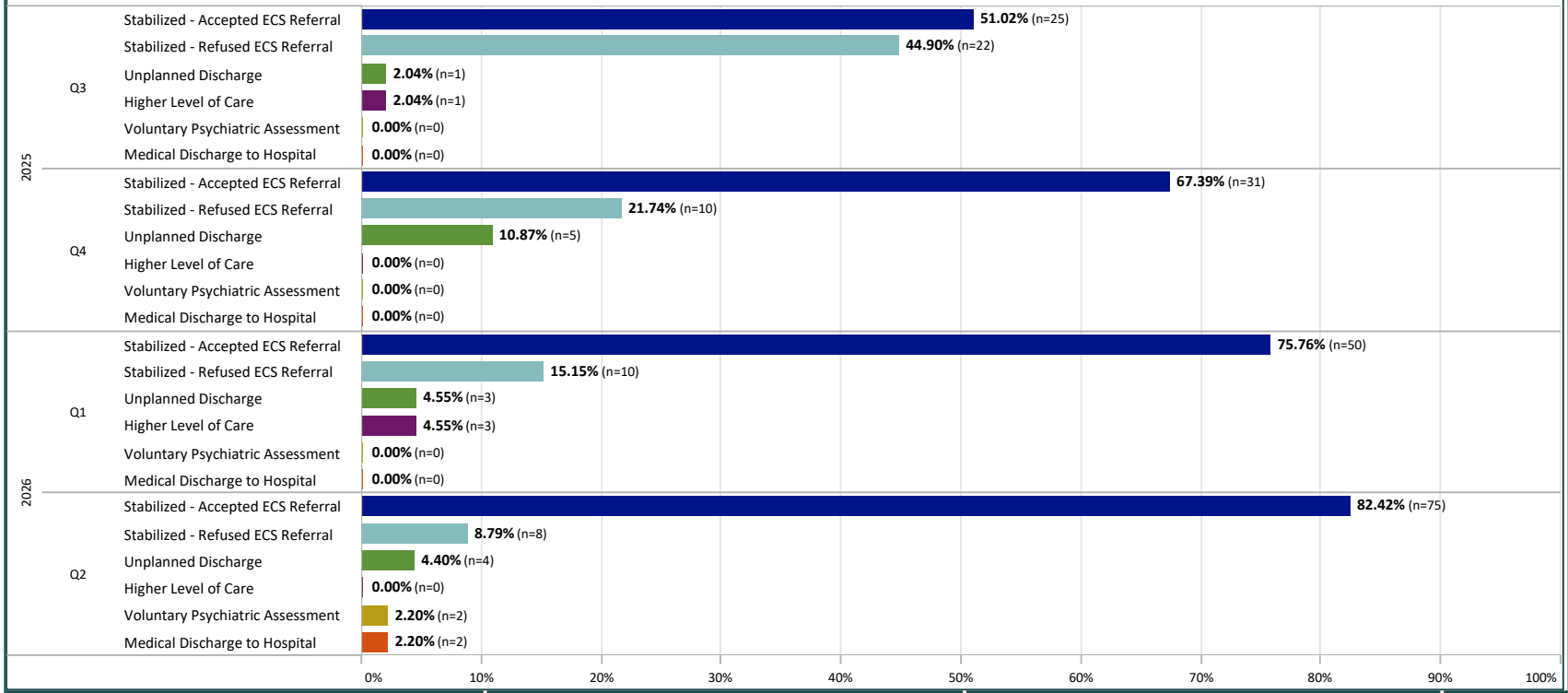
Stepping Up

Sarpy County

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

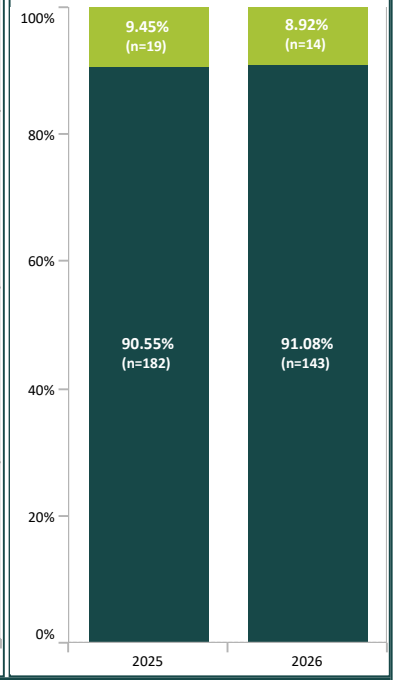
Objective 3: Law Enforcement Agencies will Provide the Best Response Possible to Calls Involving a Mental Health Related Crisis

Percent of Persons Discharged from the Crisis Stabilization and Resource Center's Triage Services by Final Disposition



Percent of Persons Discharged from Triage Services by Final Disposition and Year

(Stabilized / Not Stabilized)



Measure:	Definition:	Data Source:	Review Frequency:
Percent of persons discharged from the Crisis Stabilization and Resource Center's Triage Services by Final Disposition	By quarter and year Does not apply to other services provided through the Crisis Stabilization and Resource Center (i.e., Crisis Stabilization, Emergency Community Support, Mental Health Respite)	**Jenny Stewart** Heartland Family Service	Quarterly

Analysis/Notes:

- The Crisis Stabilization and Resource Center opened Triage services in August of CY 2024.

- 90.6% of individuals in Triage services over CY 2025 were reported to discharge as "Stabilized", with 64.7% discharging with an accepted referral for Emergency Community Support and 25.9% discharging as stabilized and refusing an ECS referral.

- So far in CY 2026, 91.1% of individuals in Triage services were reported to have discharges as "Stabilized", with 79.6% discharging with an accepted referral for Emergency Community Support and 11.5% discharging as stabilized and refusing an ECS referral - showing continued stabilization at the time of discharge, but also increasing requests and/or acceptance of ECS services overall from Heartland Family Service at discharge. Over the last four (4) quarters, the acceptance rate of ECS referrals has increased from 51.0% to 82.4%.

- Current data collection does not support the ability to separate out consumers by County of residence.

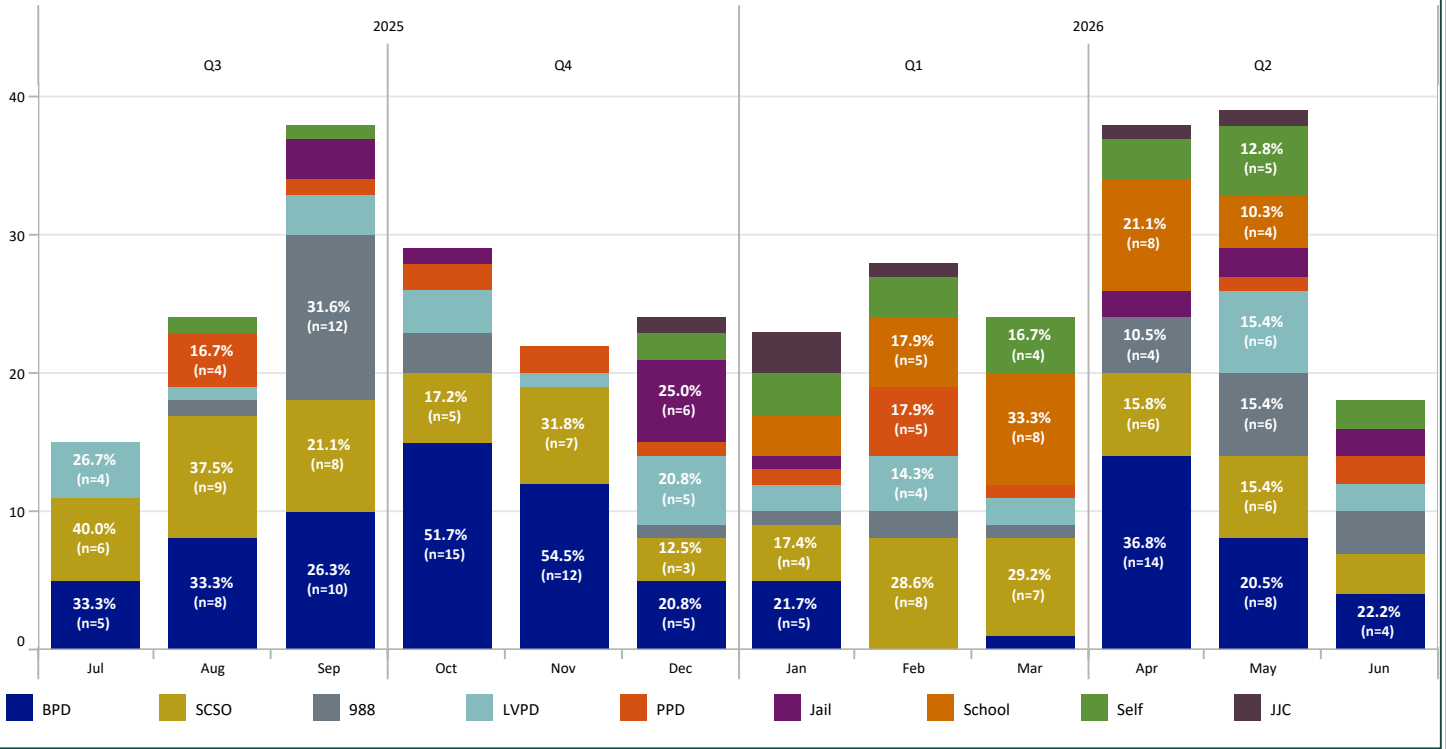
Stepping Up

Sarpy County

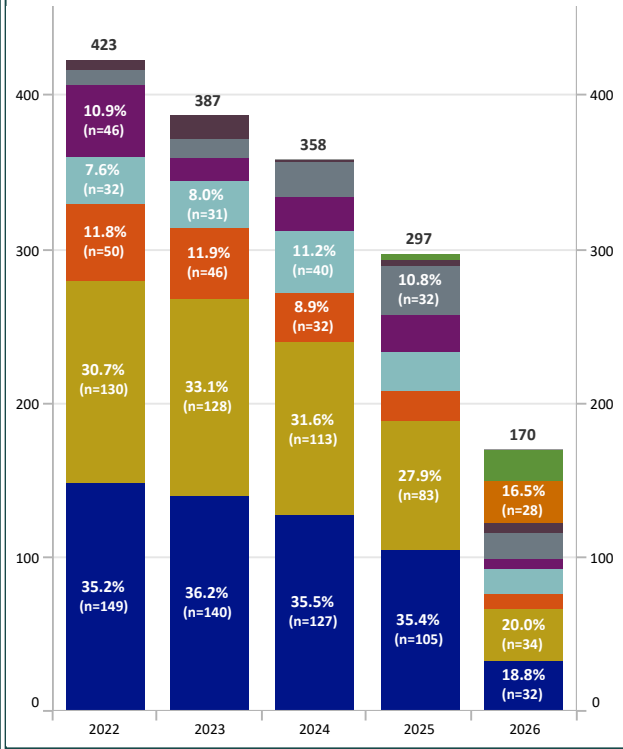
Goal 1: Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

Objective 3: Law Enforcement Agencies will Provide the Best Response Possible to Calls Involving a Mental Health Related Crisis

Mobile Crisis Response Calls by Law Enforcement Agency by Month



Mobile Crisis Response Calls by Law Enforcement Agency and Year



Measure:	Definition:	Data Source:	Review Frequency:
The total number of Mobile Crisis Response (MCR) interventions by agency and month	By month and quarter	**Emily Boardman** Heartland Family Service	Quarterly

Analysis/Notes:

- Data includes Face to Face Assessments, Telehealth Assessments, Telephone Consultations, and Cancelled Calls.
- 988 Data is included in this chart in gray. A new category of calls to schools has also been added as of Q1 of CY 2026.
- Bellevue PD and the Sarpy County Sheriff's Office historically have been the largest utilizers for Mobile Crisis Response in Sarpy County. With the addition of school activations, this category is currently the third highest activation source for CY 2026.
- Mobile Crisis Response activations have continued to decline in overall usage across Sarpy County. This could be due to a variety of reasons, to include the SCSO's Mental Health Unit, the implementation of the Crisis Stabilization and Resource Center in August of CY 2024, and other factors .However, current estimates at the end of Q2 CY 2026 indicate that there could be an overall increase in activations by the end of the year.
- Certified Community Behavioral Health Clinics (CCBHC) in Nebraska went live within the last two reporting periods, bringing Mobile Crisis Response and other key services onboard for other providers. This also opens the service up for funding from other sources, such as Medicaid, which may limit data availability. Historically, Heartland Family Service provided the vast majority of MCR response in Sarpy County, but that may change with the CCBHC implementation. Currently, there is one CCBHC providing MCR that does not currently submit data to Region 6. Region 6 is working on improving reporting with all MCR providers to better capture data across the system and county.

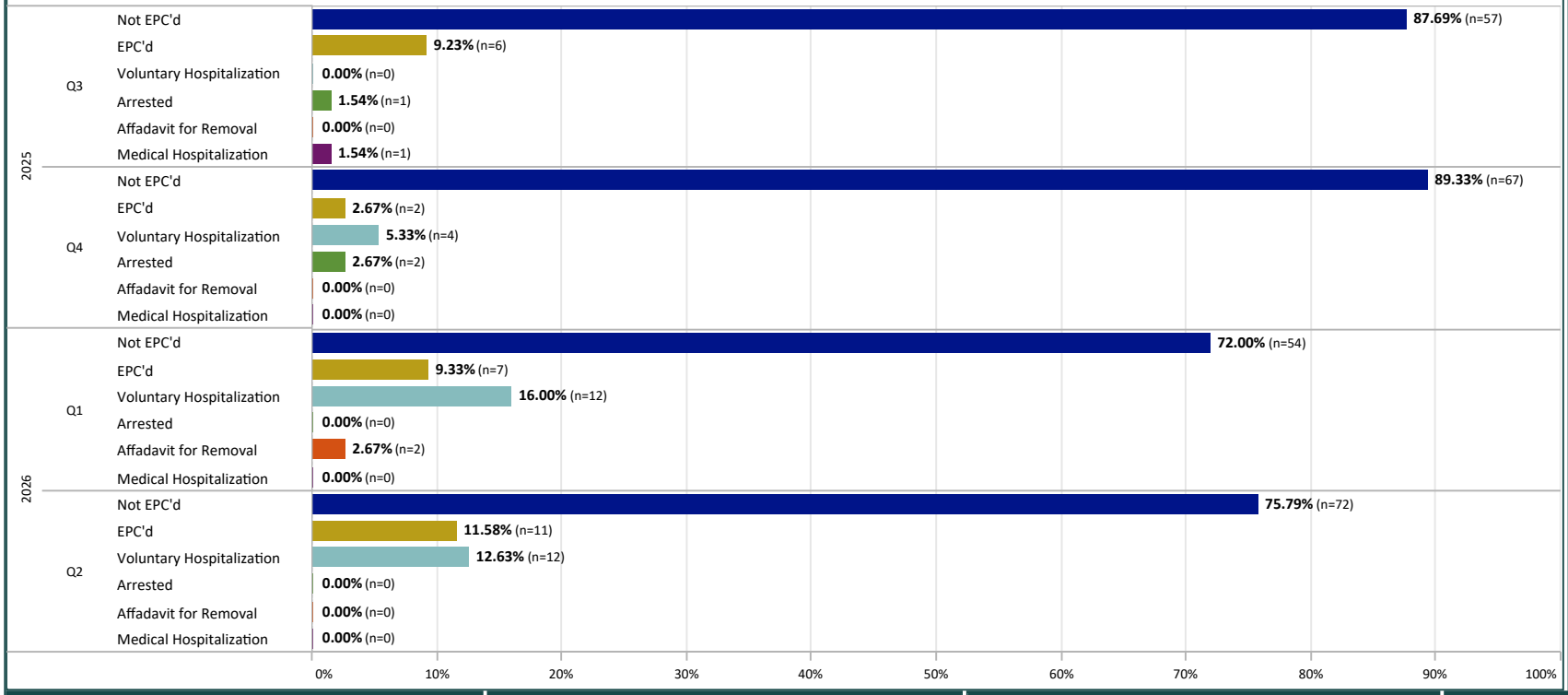
Stepping Up

Sarpy County

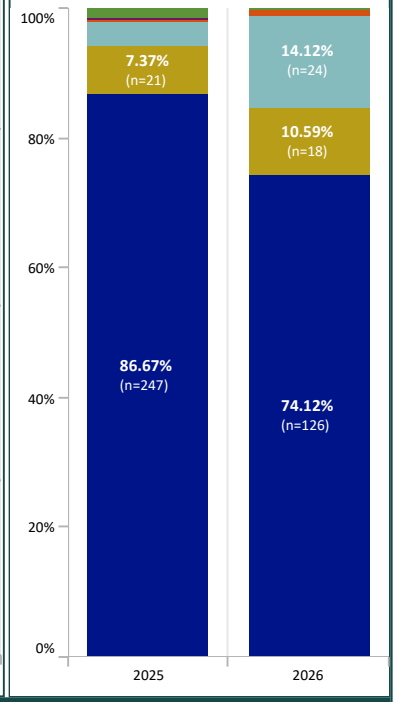
Goal 1: Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail

Objective 3: Law Enforcement Agencies will Provide the Best Response Possible to Calls Involving a Mental Health Related Crisis

Percent of Persons Discharged from Mobile Crisis Response by Disposition Category



Percent of Persons Discharged from Mobile Crisis Response by Disposition Category



Measure:	Definition:	Data Source:	Review Frequency:
The total number of Mobile Crisis Response (MCR) interventions by final disposition	By quarter and year	**Emily Boardman** Heartland Family Service	Quarterly

Analysis/Notes:

• Data derived from Heartland Family Service ASAP Mobile Crisis Response Stats.

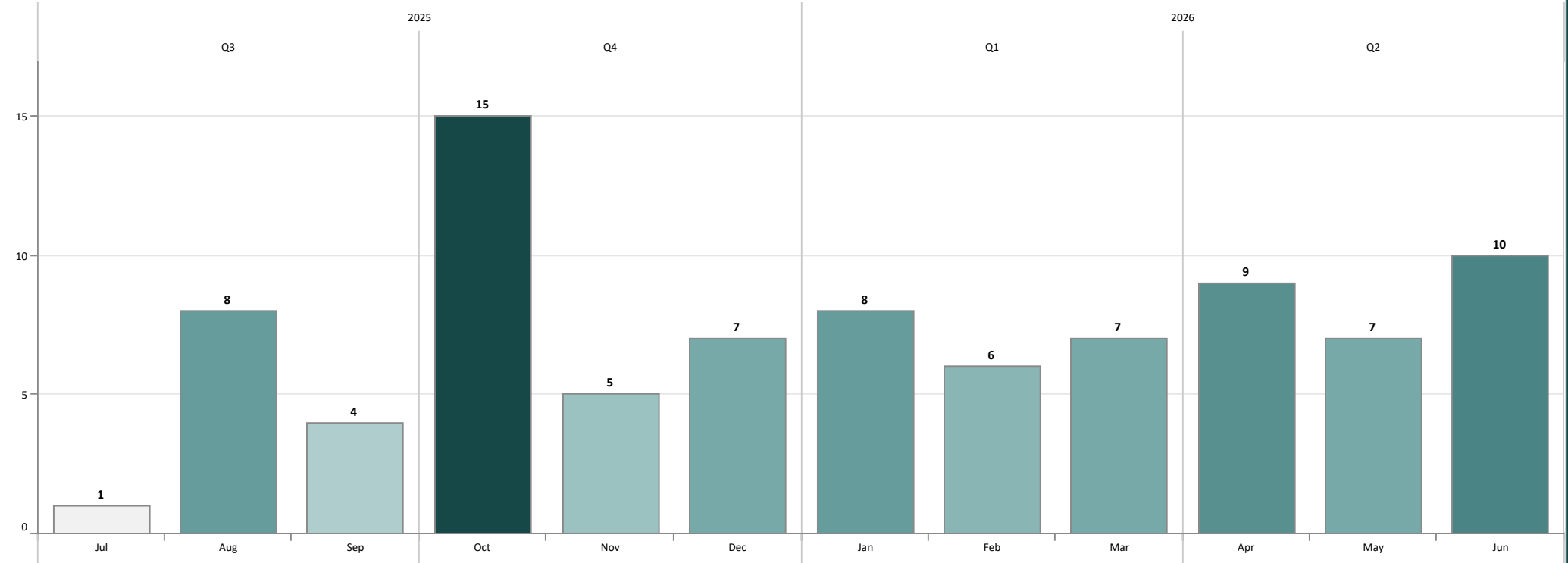
• In CY 2025, 86.7% of Mobile Crisis Response activations have resulted in no EPC or follow-up intervention (i.e., hospitalization, arrest, etc.) in Sarpy County. So far in CY 2026, this percent has dropped to 74.1% of interventions, with a sharp increase in voluntary hospitalizations and EPCs occurring compared to the previous two years. While voluntary hospitalizations and EPCs account for only 24.7% of MCR dispositions, this is a significant increase from the previous calendar year.

• Heartland Family Service has reported moving away from a non-law enforcement model of response, which would not require law enforcement activation or presence for Crisis Response calls. Another CCBHC, Community Alliance, currently does not use a law-enforcement model either. Region 6 is currently working with MCR providers in the region to improve data collection and reporting.

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

Objective 4: Monitor the number of Individuals with a Serious Mental Illness (SMI) Booked into Jail with a Misdemeanor Charge

Number of Misdemeanor Bookings for Persons with a Serious Mental Illness



Measure:	Definition:	Data Source:	Review Frequency:
The number of persons with a Serious Mental Illness (SMI) booked into Jail on a Misdemeanor each month	By month	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

• These may be unique or repeat bookings/individuals.

• The data source for these metrics was updated in Q3 of CY 2025, and is currently based on highest charge booking data provided by the Sarpy County Department of Corrections. Individuals in this metric do not have any higher charges than a Misdemeanor at the time of booking.

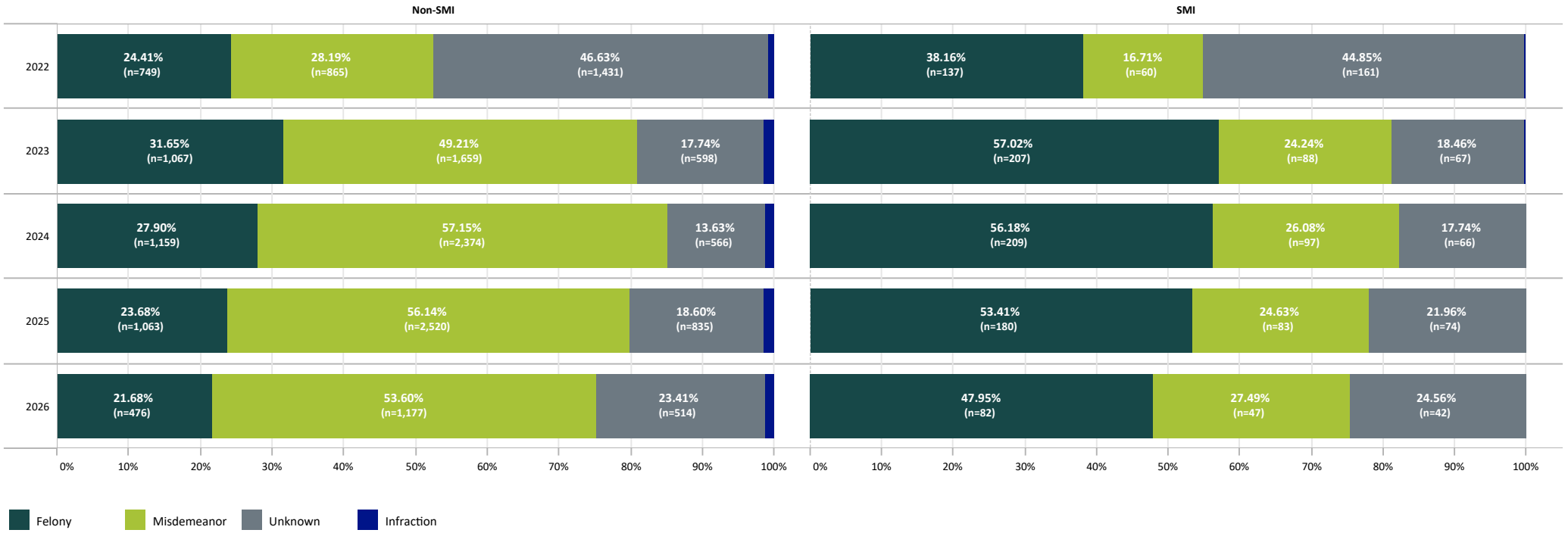
• This metric previously focused on the arresting law enforcement agency; however, it was noted at Stepping Up meetings that the Sarpy County Sheriff's Office will be disproportionately reflected in these booking numbers, as they are the only law enforcement agency to make arrests at the Sarpy County Courthouse.

• These numbers may also be impacted by warrants, citations, sanctions, or commitments based on new charges for existing releases. Any factor that may result in a "repeat" booking on the same charge could influence these metrics.

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

Objective 4: Monitor the number of Individuals with a Serious Mental Illness (SMI) Booked into Jail with a Misdemeanor Charge

Percent of Bookings by Highest Charge Class and Year



Measure:	Definition:	Data Source:	Review Frequency:
The percent of bookings for those with a serious mental illness and those without a serious mental illness by highest charge type and calendar year	By year	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

• Focusing on the highest charge type for each booking, there are significant differences between the SMI and non-SMI populations. So far in CY 2026, 21.7% of non-SMI bookings and 48.0% of SMI bookings had a listed highest charge as a felony. With respect to misdemeanors, these percentages were 53.6% and 27.5% respectively. This indicates that the majority of SMI bookings are unlikely to be diverted from arrest and booking, but highlights the smaller misdemeanor booking population that can potentially be diverted for further analysis.

• These numbers may also be impacted by warrants, citations, sanctions, or commitments based on new charges for existing releases. Any factor that may result in a repeat booking could also influence these metrics, even if a new charge does not occur.

• Differences in charge type could also help explain differences in the average length of stay (ALOS) for those being booked, but may create additional complications around re-entry rates for this population.

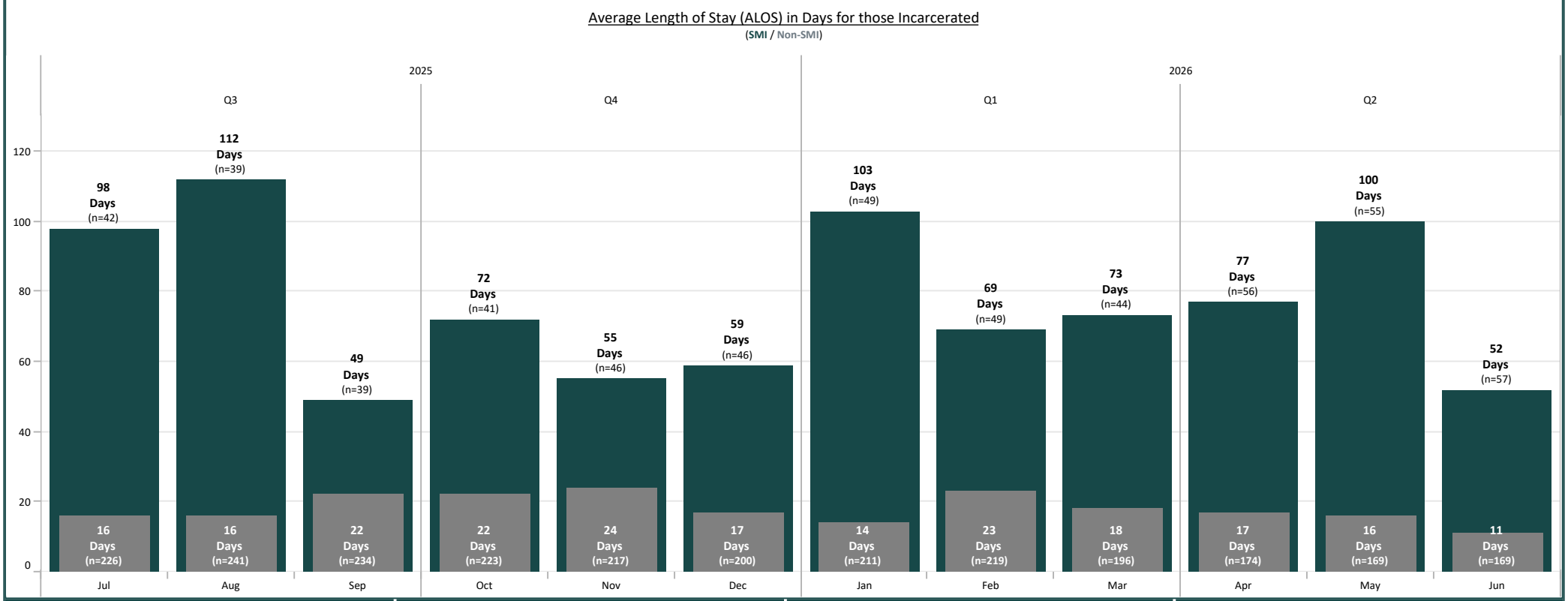
• Region 6 continues to work with Probation and the Sarpy County Problem-Solving Courts (PSC) to identify individuals on a custodial sanction at this time. With test data in the previous quarter, controlling for PSC clients primarily showed a decrease in the percentage of felony bookings, which doesn't directly impact the question of where to divert, but did change metrics related to recidivism and the overall number of SMI bookings.

Goal 2	Shorten the Average Length of Stay for People with a Serious Mental Illness (SMI) in Jail Set, Measure, Achieve Target = 68 Days or Less		
	Strategy	**Status/Target**	**Notes/Updates**
Objective 1:	**100% of Corrections Officers will Complete Training in CIT and/or, MHFA, or Both.**		
a.	Review CIT and/or CRIT and MHFA training data for Correctional Officers at the Sarpy County Jail, develop strategies as needed.	Ongoing	
Objective 2:	**Collect and Analyze Mental Health Diversion and Mental Health Pre-Trial Data.**		
a.	Collect and review baseline data; identify opportunities; establish benchmarks and/or targets.	Ongoing	
Objective 3:	**Utilize Data and Best Practices to Drive Improvements with Competency to Stand Trial / Competency Restoration (CST/CR) Processes.**		
a.	Form a workgroup to identify opportunities to develop a "CST/CR Guidelines" document to be used by County Attorney's Office, Public Defender's Office, Lincoln Regional Center, and the Bench.	Completed Have not shared with Judges as of yet	

Stepping Up

Sarpy County

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



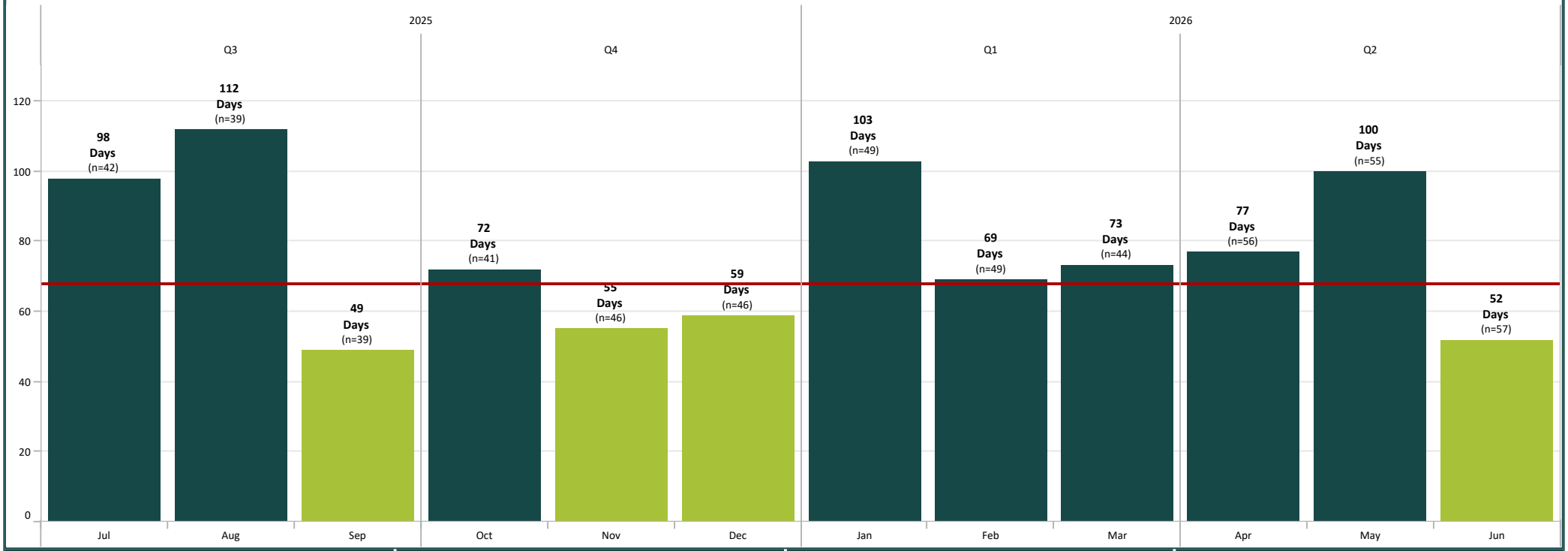
Measure:	Definition:	Data Source:	Review Frequency:
The average length of stay (ALOS) for people with a serious mental illness (SMI) vs. the average length of stay for the general population	By month	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

- The average length of stay for people with a serious mental illness continues to far exceed the length of stay for those in the general population.
- Due to how the data is currently reported, outliers are not able to be identified at this time, and data cannot be accurately aggregated into quarters or calendar years. Region 6 is currently exploring feasibility of parsing jail release data to identify specific outliers and causes for this metric to continue showing discrepancies between populations.
- Mental Health Diversion and Mental Health Pretrial Case Management continue to help individuals secure earlier releases from jail with supervision.

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

Average Length of Stay in Days for People with a Serious Mental Illness (SMI)
(Target = 68 Days)



Measure:	Definition:	Data Source:	Review Frequency:
The average length of stay (ALOS) for people with a serious mental illness (SMI) vs. the average length of stay for the general population	By month	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

• A new target of 68 days was set in CY 2025. This target was based on a 5% reduction in the average of monthly booking *averages* (71.17 days) for CY 2024. For CY 2026, the current target will be maintained, as the previous calendar year's average of monthly booking *averages* was 84.74 days.

• With the existing target of 68 days, the Sarpy County Jail has been at or below their target four (4) of the last twelve (12) rolling months, or 33% of represented months. With respect to CY 2026, only one (1) of the six (months) in the current calendar year was below the established target, that being June 2026, with an average LOS of 52 days across 57 individuals.

Stepping Up

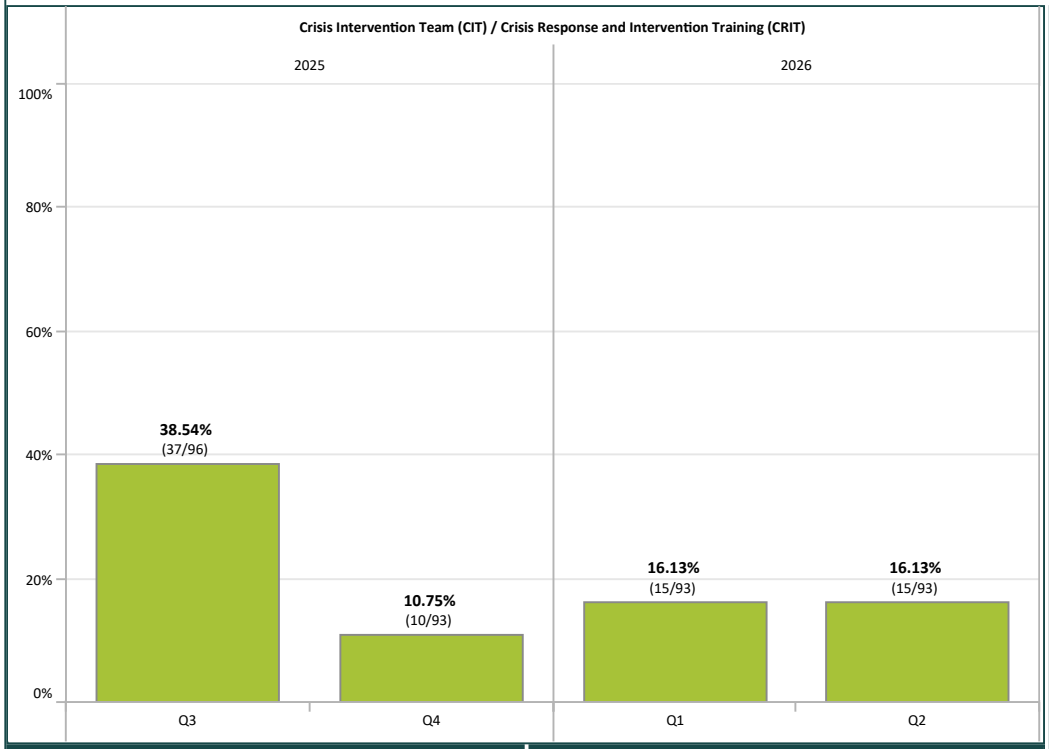
Sarpy County

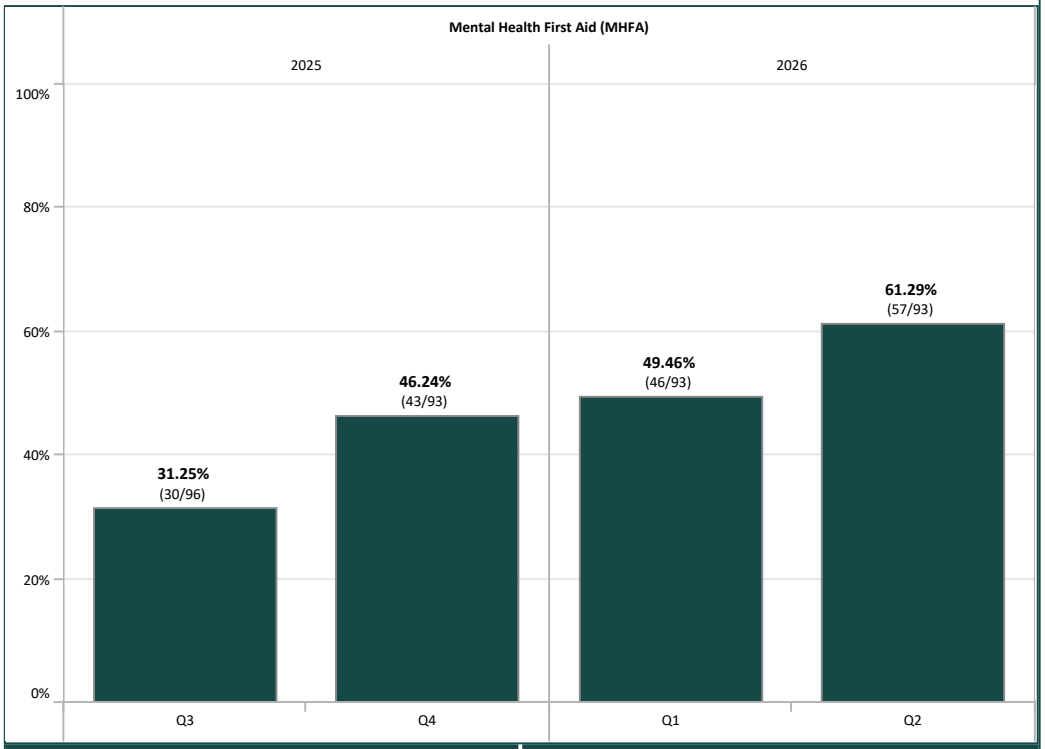
Goal 2: Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 1: 100% of Corrections Officers will Complete Training in Crisis Intervention Teams (CIT)/Crisis Response and Intervention Training (CRIT), Mental Health First Aid (MHFA), or Both

Percentage of Correctional Officers with Training

(CIT or CRIT / MHFA)





Measure:	Definition:	Data Source:	Review Frequency:
The total number of correctional officers with Crisis Intervention Team (CIT)/Crisis Response and Intervention Training (CRIT) and/or Mental Health First Aid (MHFA) training / Total number of correctional officers	By quarter	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

- This is point in time data gathered at the end of the period of review.
- Recertification for MHFA is required every 3 years.
- The Sarpy County Jail showed new growth in correctional officers trained in MHFA over the last quarter, with 61.3% of correctional officers trained in MHFA at the end of the quarter.

Stepping Up

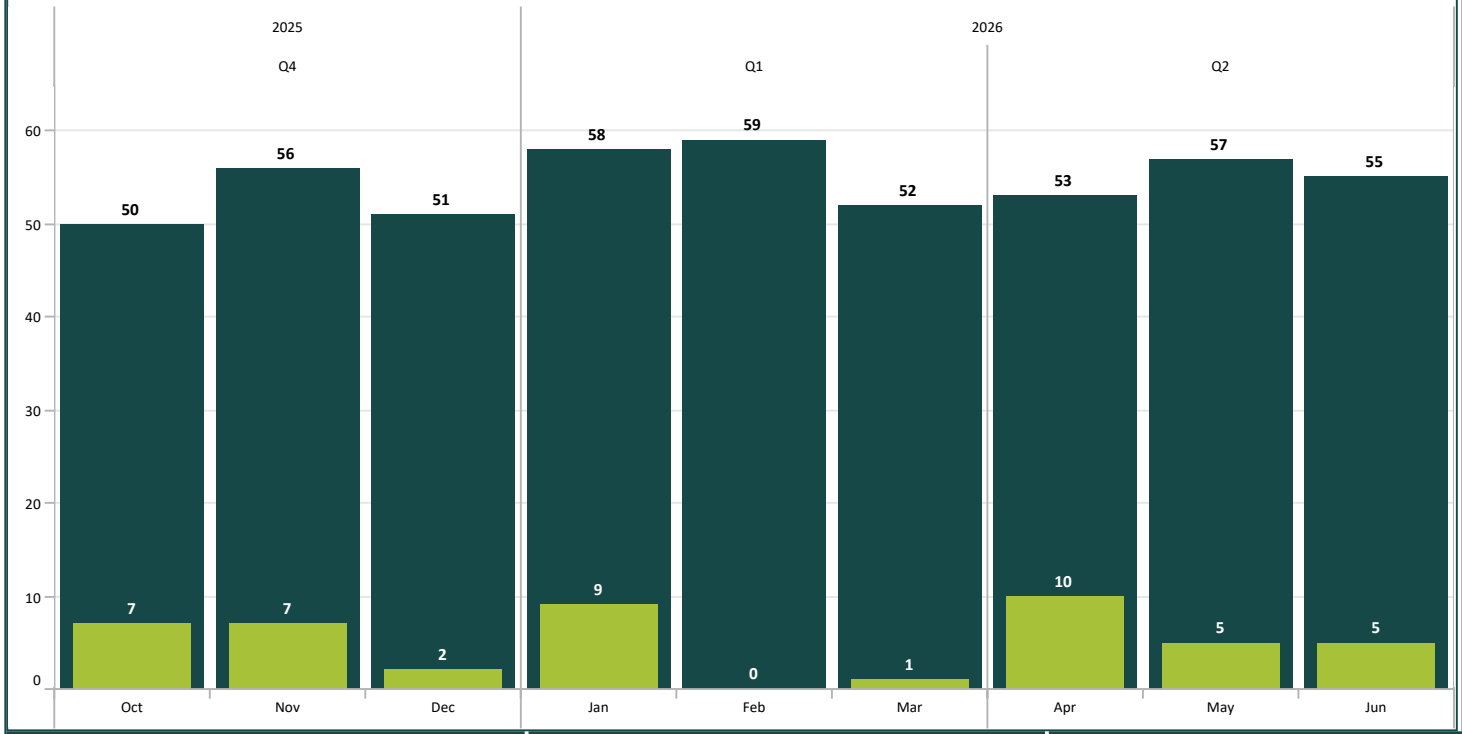
Sarpy County

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 and Mental Health Pre-Trial Data

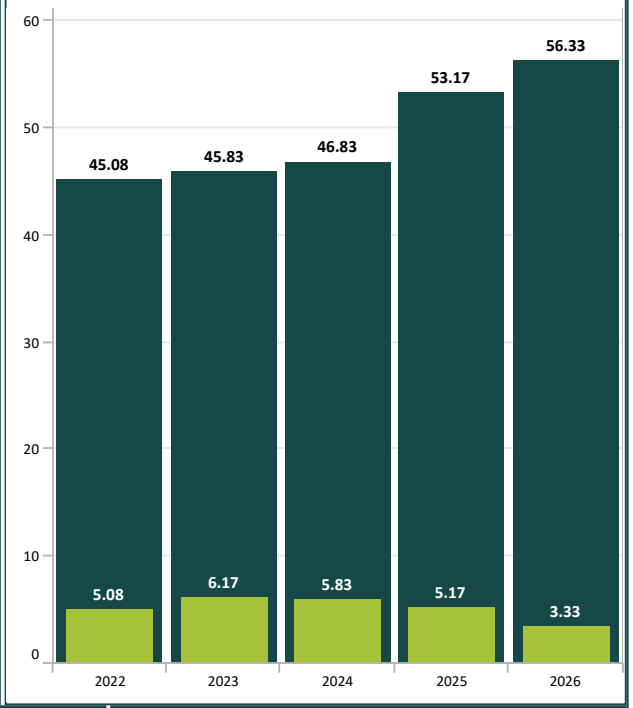
Active Clients with, and Referrals Made to Mental Health Diversion

(Active Clients / Referrals)



Monthly Average of Active Clients with, and Referrals Made to Mental Health Diversion by Year

(Active Clients / Referrals)



Measure:	Definition:	Data Source:	Review Frequency:
The total number of people active in mental health diversion and the number of new referrals received by mental health diversion by month	By month and year	**Carisa Gosda** Mental Health Diversion **David Soto** Mental Health Diversion	Quarterly

Analysis/Notes:

- **Mental Health (MH) Diversion moved to a new system for data and reporting in CY 2025. Data for April - September 2025 is currently not available.**

- Most Mental Health Diversion referrals are reported to be internal referrals from Diversion. Referrals from the County Attorney's Office also occur, but are less frequent than these internal referrals. Jail screenings used to occur fairly consistently, however it was reported that there are presently very few resources to continue completing jail screenings with current caseloads and operational needs.

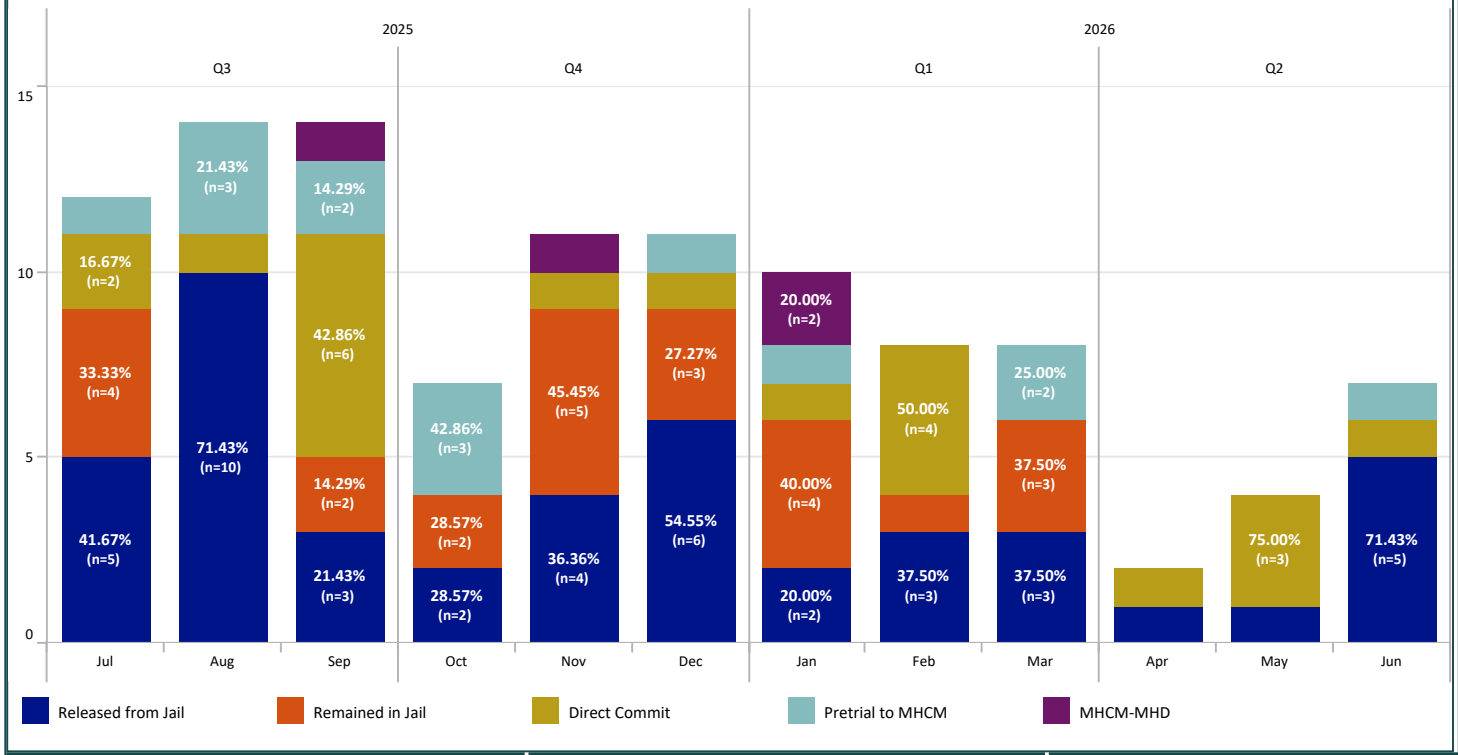
- MH Diversion has reported that the number and severity/acuity of needs for MH clients has continued to increase over the last calendar year, which in turn continues to help drive a high number of active clients, despite seemingly modest number of new referrals each month. This is noted in the year-over-year comparison, where the monthly average number of active clients continues to climb over time, despite the average number of monthly referrals decreasing overall.

- MH Diversion representatives have reported carrying current caseloads of 40 - 50 individuals, with standard diversion running at 80 - 90+ cases. They reported Diversion and MH Diversion to be at an all time high with respect to the number of adult cases currently. It was also noted that the averages in the right graph may actually be higher than listed, as it doesn't include successful clients in the metrics.

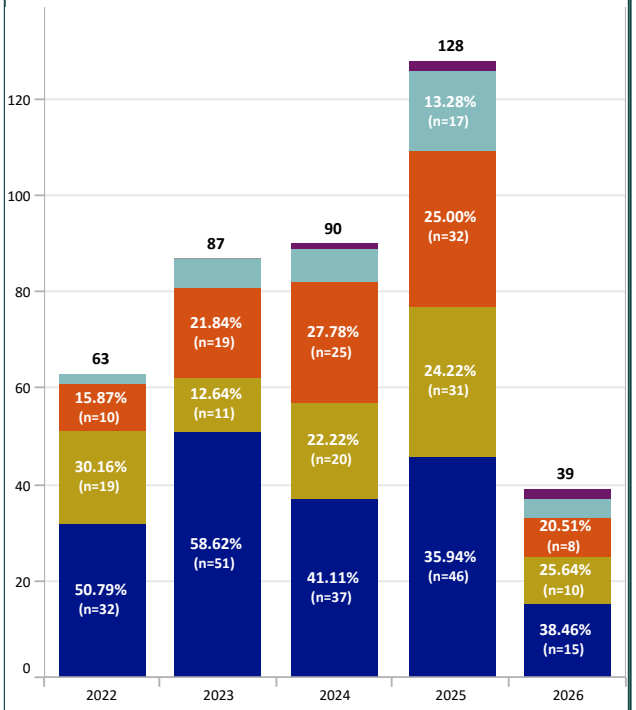
Goal 2: Shorten the Average Length of Stay (ALOS) for People with a Serious Mental Illness (SMI) in Jail

Objective 2: Collect and Analyze Mental Health Diversion and Mental Health Pre-Trial Data

Number of Clients Assigned to Mental Health Pretrial Services by Referral Type



Number of Clients Assigned to Mental Health Pretrial Services by Referral Type by Year



Measure:	Definition:	Data Source:	Review Frequency:
The total number of people referred to mental health pretrial by referral type and month	By month and year	**Ashlie Weisbrodt** Mental Health Pretrial **Caley Hartner** Mental Health Pretrial	Quarterly

Analysis/Notes:

• So far in CY 2026, there have been a total of 39 new assignments to Mental Health (MH) Pretrial case management. 38.5% of said assignments were released from jail, and an additional 20.5% remained in jail after assignment. The actual rate of clients released, remaining in jail, or that are direct commitments continues to vary widely from month to month and year to year.

• A mental health diagnosis or SMI designation is not needed for assignment to MH Pretrial Case Management. In many cases, individuals can be assigned prior to any screening, and may be assigned to the Mental Health team based on other factors.

• MH Pretrial is intended to be a voluntary service, but when directly assigned to MH Pretrial services, successful service completion is more difficult for those who did not want to participate.

Stepping Up

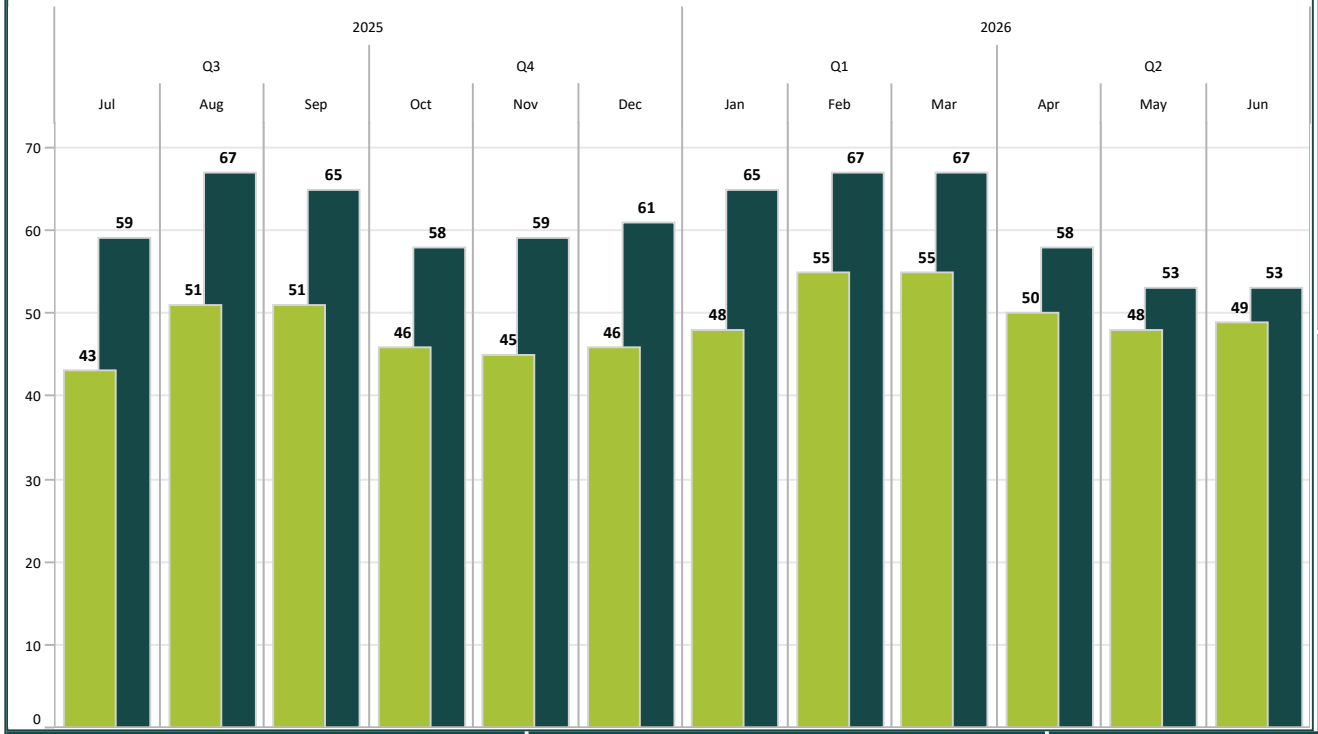
Sarpy County

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 and Mental Health Pre-Trial Data

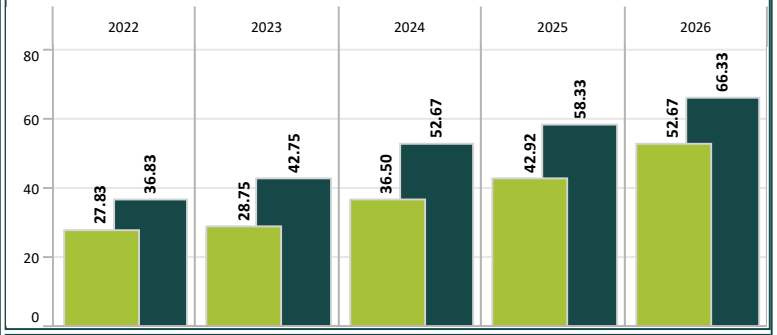
Assigned and Active Clients for Mental Health Pretrial by Month

(Assigned / Active and Participating)

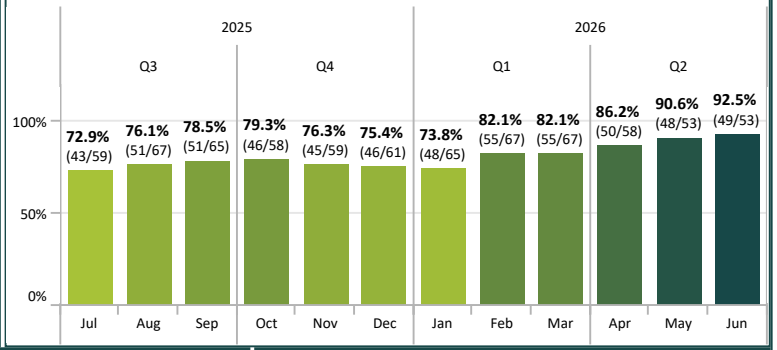


Average Number of Assigned and Active Clients by Year

(Assigned / Active and Participating)



Average Participating out of Assigned



Measure:	Definition:	Data Source:	Review Frequency:
The total number of active and assigned clients in mental health pretrial by month	By month and year	**Ashlie Weisbrodt** Mental Health Pretrial **Caley Hartner** Mental Health Pretrial	Quarterly

Analysis/Notes:

- Prefered active caseload is 23 clients per Mental Health Case Manager (MHCM).

- The average number of both assigned clients and participating clients continues to grow year over year for Mental Health Pretrial, with notable shifts around 2024 with the addition of a new Mental Health Case Manager. Mental Health Case Managers continue to experience assignments beyond their preferred active caseload of 23.

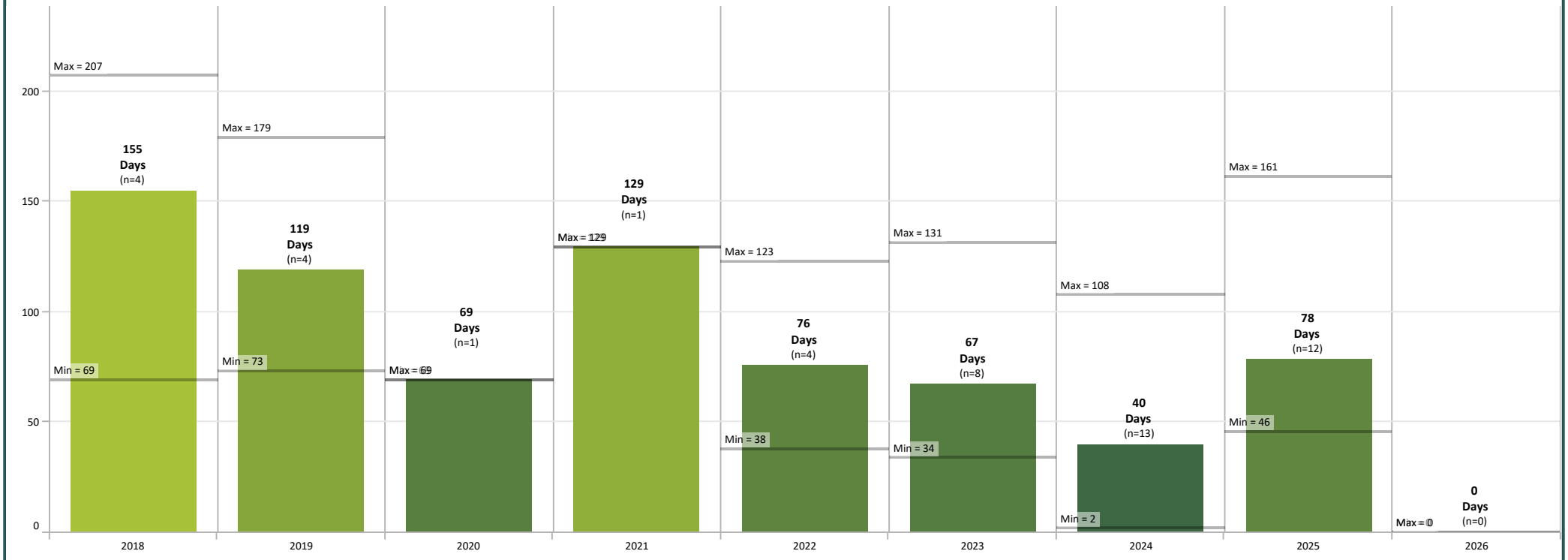
- It has also been noted that the average number of clients participating in Mental Health Pretrial out of the total number assigned has been steadily increasing. MH Pretrial reported 92.5% of assigned clients participating at the end of June 2026.

- Most assigned clients that are not participating are still in jail or on warrants.

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

Objective 3: Utilize Data and Best Practices to Drive Improvements with Competency to Stand Trial/Competency Restoration (CST/CR) Processes.

Average Number of Days Waiting in Jail for Competency Restoration at the Lincoln Regional Center by Year of Court Order



Measure:	Definition:	Data Source:	Review Frequency:
The average number of jail days for persons waiting to receive restorative treatment at the Lincoln Regional Center (LRC) by year of court order	By year	**Jo Martin** Sarpy County Jail	Quarterly

Analysis/Notes:

- *n* is the number of people court ordered in said year (not the year they transferred) and waiting to access the Lincoln Regional Center (LRC) for competency restoration by year.

- The Lincoln Regional Center (LRC) reportedly was down a treatment provider for part of CY 2025, which increased wait times for persons and organizations across the board. In Sarpy, this can be seen with the minimum, maximum, and mean wait times all being elevated compared to CY 2024. LRC was able to fill this position, and wait times improved towards the end of the calendar year.

- So far in CY 2026, no individuals have been reported to be waiting to receive restoration at LRC.

- This metric not include outpatient competency restoration.

Goal 3	Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail		
	Strategy	**Status/Target**	**Notes/Updates**
Objective 1:	**Ensure all eligible individuals with a Serious Mental Illness (SMI) Receive a Re-Entry Plan (Jail) or a Case Plan (Public Defender's Office) Completed Prior to Release.**		
a.	Revising current metric to better capture information re. individuals with an SMI leaving jail.	In Development	Will resume this strategy when Christy B. returns
b.	Understand why those with a SMI who were eligible to receive Re-Entry/Case Plan did not receive a plan; develop strategies.	In Process	Will resume this strategy when Christy B returns
Objective 2:	**The Jail will Provide Medication Assisted Treatment (MAT) to those Individuals that are Clinically Appropriate.**		
a.	Do we want to collect this data?		
Objective 3:	**Monitor implementation of LB921; Medicaid Enrollment, Assistance to Those Incarcerated.**		
a.	Collect and review baseline data on the number of Medicaid applications being completed and submitted while individuals are incarcerated.	Ongoing	Will resume this strategy when Christy B. returns.
Objective 4:	**Eligible inmates will receive Assessment and Reentry Services as is federally required.**		
a.	Sarpy County Jail will provide updates on MCO's implementation of Section 5121 of the CAA to the team.	Ongoing	

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

Objective 1: Ensure all Eligible Individuals with a Serious Mental Illness (SMI) Receive a Re-Entry Plan (Jail) or a Case Plan (Public Defender's Office) Completed Prior to Release

New Dataset in Development

Measure:	Definition:	Data Source:	Review Frequency:
		Ashley Berg Sarpy County Public Defender's Office - Social Work **Christy Barge** Sarpy County Department of Corrections - Re-Entry	Quarterly

Analysis/Notes:

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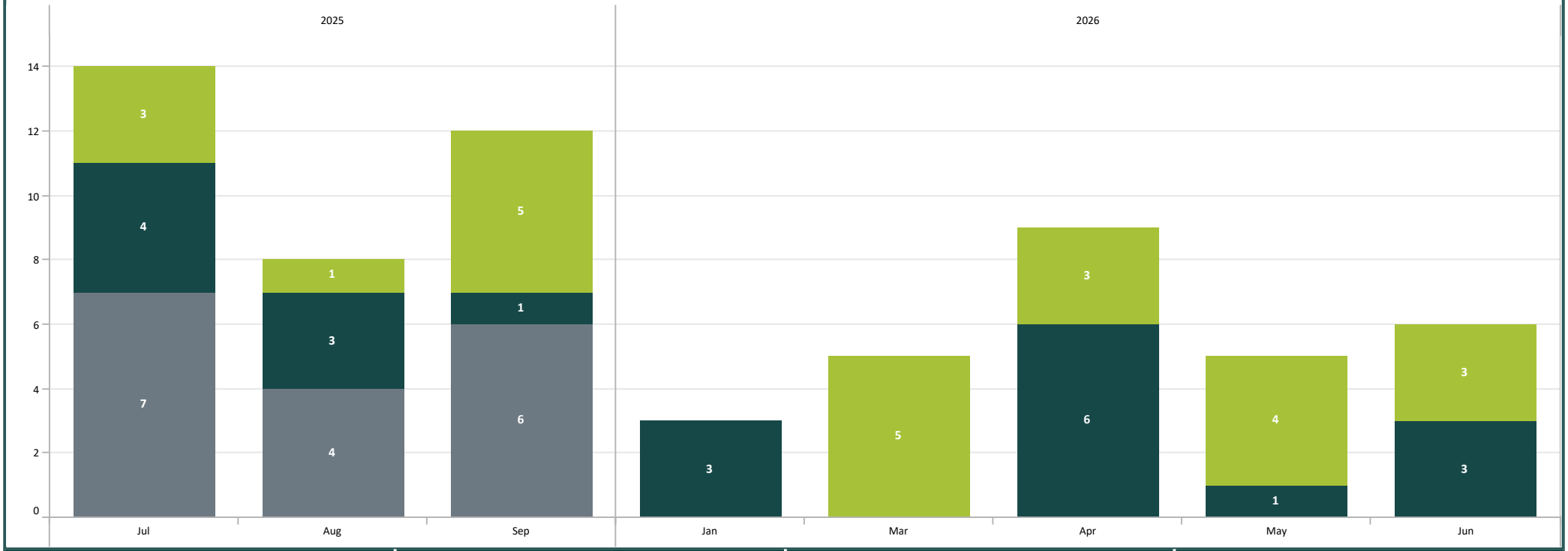
Goal 3: Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail

Objective 3: Monitor the Implementation of LB921; Medicaid Enrollment, Assistance to those Incarcerated

Number of Medicaid Status Checks/Reactivations and Applications by Re-Entry

(Applications / Status Checks & Reactivations / Other Assistance)



Measure:	Definition:	Data Source:	Review Frequency:
The total number of Medicaid applications, Medicaid status checks, and Medicaid reactivations completed by month	Medicaid applications include all applications made by/on behalf of persons, and is not specific to those with a serious mental illness By month	**Christy Barge** Sarpy County Department of Corrections - Re-Entry	Quarterly

Analysis/Notes:

- This number is for the entire jail population, not only persons with a serious mental illness.
- Sarpy County Re-Entry reports ongoing staffings for high-acuity SMI releases at this time, helping to ensure that those with serious mental illness get connected with Medicaid at the time of discharge.
- A data gap exists between September 2025 and the current calendar year, due to leave at the jail.

Goal 4	Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) who are in Jail Set, Measure, Achieve Target = 49.5 or Less		
	Strategy	**Status/Target**	**Notes/Updates**
Objective 1:	**Utilize Specialized Transition Planning (STP) via Emergency Community Support to Decrease Recidivism.**		
a.	Explore funding for STP beyond 90 Days.	Paused	
Objective 2:	**Utilize Long-Acting Injectables (LAI) when Clinically Appropriate.**		
a.	Collect and monitor baseline data to better understand the utilization of LAIs.	Ongoing	
Objective 3:	**Provide up to 30 Days of Medication to Individuals with a Serious Mental Illness (SMI) at the Time of Release.**		
a.	The Jail will identify a solution that allows individuals with a SMI to leave the jail with medication to bridge to their next medication management appointment.	Completed August 8, 2023	Jo developed contract with Gretna Community Pharmacy
Objective 4:	**Use Data to Better Understand Recidivism Rate; Develop Strategies.**		
a.	What else do we want to know about those that are recidivating? Does that data exist?	In Process	Resume when Christy B returns
b.	Utilize a team approach to staff individuals with complex needs and/or those who have returned to jail.		
Objective 5:	**Provide Strong Re-Entry Planning for Individuals with a Serious Mental Illness (SMI).**		
a.	The Jail will share the names of individuals leaving jail who would benefit from supportive contact with the Sheriff's mental health unit, who can also activate Emergency Case Manager when needed (new service from HFS).	Ongoing Initiated Sept. 2024	Christy Barge (Jail) now notifies law enforcement

- The recidivism data includes custodial sanctions (Wellness Court/Drug Court/Veterans Court) and Probation sanctions.

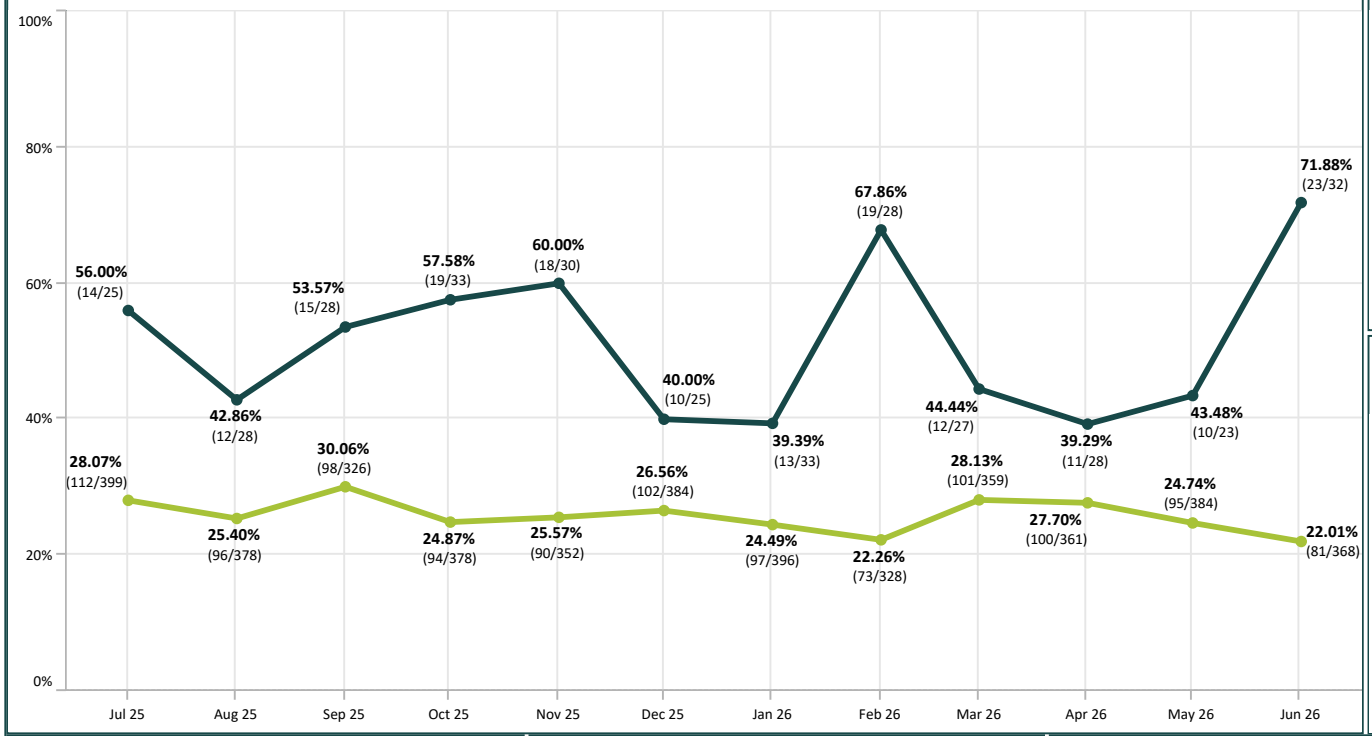
Stepping Up

Sarpy County

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

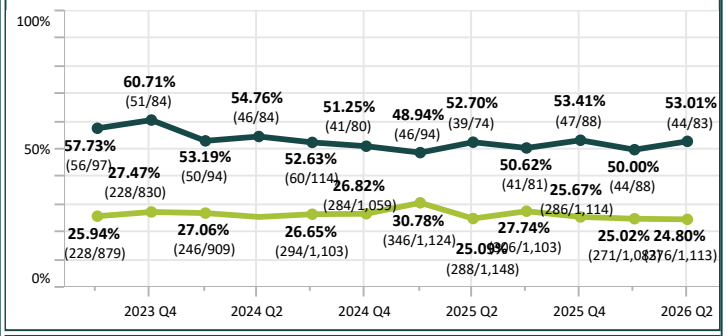
Percent of Bookings per Month with a Previous Booking in the Last 12 Months

(SMI / Non-SMI)



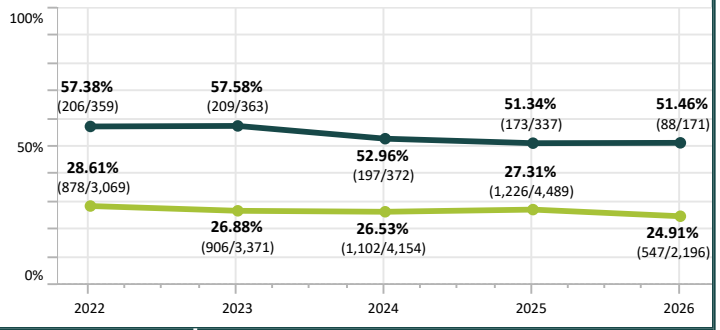
Percent of Repeat Bookings per Quarter

(SMI / Non-SMI)



Percent of Repeat Bookings per Year

(SMI / Non-SMI)



Measure:	Definition:	Data Source:	Review Frequency:
The number of adults with a serious mental illness (SMI) who are re-booked into jail within twelve (12) months following their last booking date.	By month Repeat bookings are calculated based on whether an individual had a previous booking with the past 365 days (12 months) Current metric does not separate out people who are 're-booked' due to a jail commitment, bench warrant, or custodial sanction	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

• So far in CY 2026, Sarpy County has had an average re-entry rate of 51.5% for those with a SMI, compared to 24.9% for the non-SMI population. In CY 2025, these rates were 51.3% and 27.3%, respectively, indicating a continued discrepancy between the two populations with respect to re-entry liklihood.

• Data collection on this metric is currently reported out on through the Jail management system. Due to how this metric is calculated, and the criteria to meet a SMI definition, individuals who are flagged as having a SMI at a later date in the dataset are retroactively categorized in the SMI population for the re-entry calculations, meaning that data for previous quarters may change as the SMI population continues to be identified.

• These numbers may also be impacted by warrants, citations, sanctions, or commitments based on new charges for existing releases. Any factor that may result in a re-booking of the same individual could influence these metrics, regardless of whether a new charge occurred.

• New data has been provided by probation for the Sarpy County Problem-Solving Courts (e.g., Drug Court, Wellness Court, Veteran's Court, etc.), specifically providing assistance in identifying custodial sanctions that may impact recidivism. Data from Q1 CY 2026 is currently available, but being cleaned and connected for publication. Initial results show a decrease in re-entry for the SMI population in February and March 2026, down to 66.67% and 42.86% respectively when controlling for individuals re-booked on the same charge through PSC. Updated data for this is in progress.

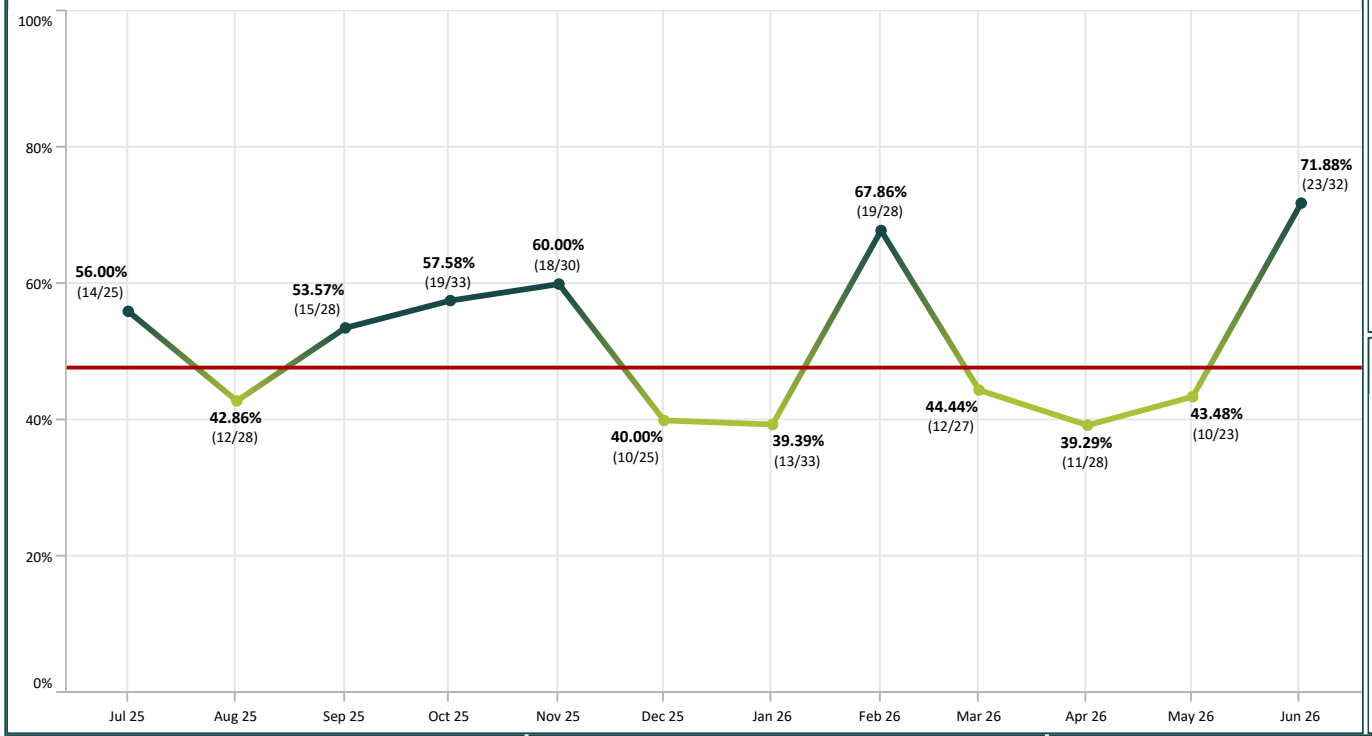
Stepping Up

Sarpy County

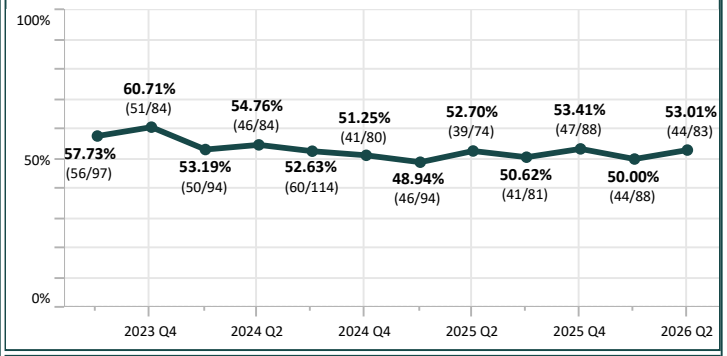
Goal 4: Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail

Percent of Bookings per Month for Persons with a Serious Mental Illness (SMI) and a Previous Booking in the Last 12 Months

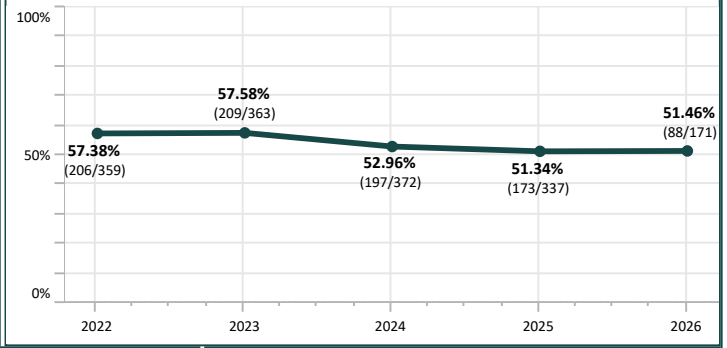
(Target = 47.48%)



Percent of Repeat SMI Bookings per Quarter



Percent of Repeat SMI Bookings per Year



Measure:	Definition:	Data Source:	Review Frequency:
The number of adults with a serious mental illness (SMI) who are re-booked into jail within twelve (12) months following their last booking date.	By month, quarter, and year Repeat bookings are calculated based on whether an individual had a previous booking with the past 365 days (12 months) Current metric does not separate out people who are 're-booked' due to a jail commitment, bench warrant, or custodial sanction	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

• June 2026 showed a high spike in re-entry for those flagged as having an SMI. A deeper look shows that 56.5% re-entered on a Felony, while 30.4% re-entered on a misdemeanor, and the remainder having no charge class listed. At a minimum of four (4) individuals are likely to have been released and re-booked when sentenced, emphasizing a need to identify these populations more consistently.

• A new target is calculated every calendar year, based on a 5% reduction of the previous calendar year - so long as the previous year showed improvement. This creates an ongoing moving target of reduction each year that is consistent with recent metrics. A new target of 47.48% was established for CY 2026 for this metric, based on a 5% reduction to the CY 2025 average re-entry for the SMI population, down from the previous 49.57% target.

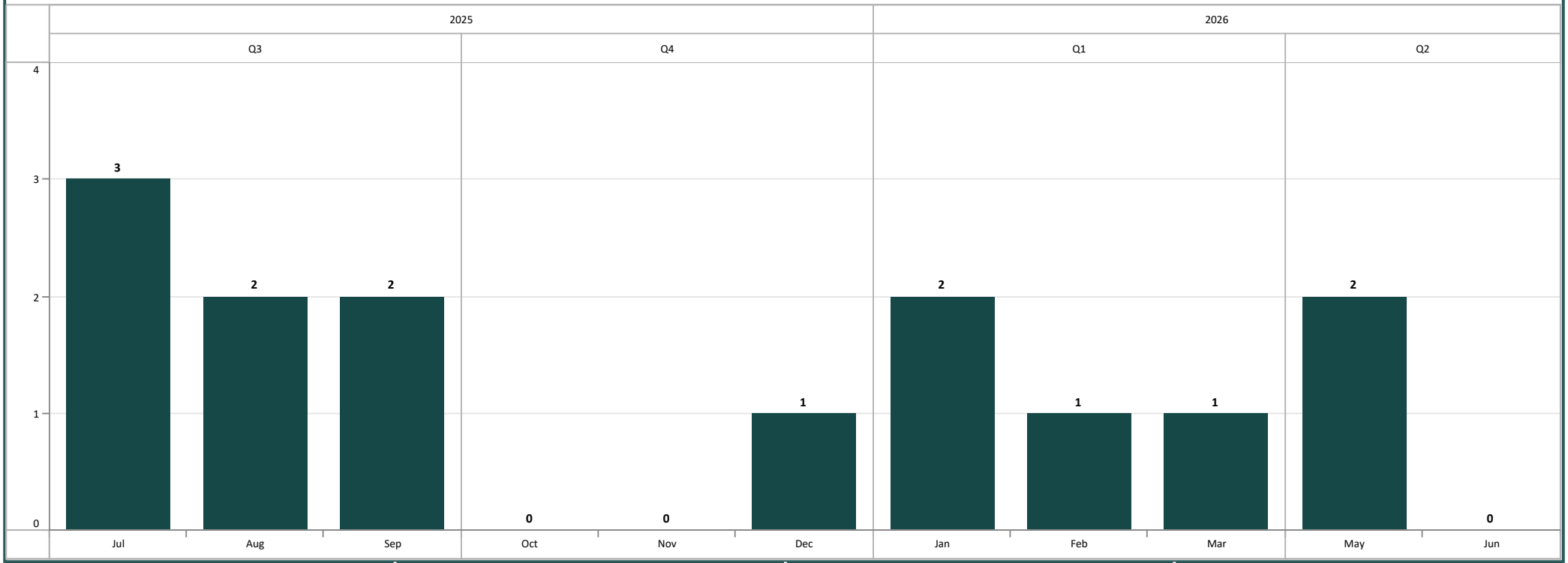
• Data collection on this metric is currently reported out on through the Jail management system. Due to how this metric is calculated, and the criteria to meet a SMI definition, individuals who are flagged as having a SMI at a later date in the dataset are retroactively categorized in the SMI population for the re-entry calculations, meaning that data for previous quarters may change as the SMI population continues to be identified.

• These numbers may also be impacted by warrants, citations, sanctions, or commitments based on new charges for existing releases. Any factor that may result in a re-booking of the same individual could influence these metrics, regardless of whether a new charge occurred.

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

Objective 2: Utilize Long-Acting Injectables (LAI) when Clinically Appropriate

Number of Long-Acting Injectable (LAI) Administrations



Measure:	Definition:	Data Source:	Review Frequency:
The number of adults with a serious mental illness (SMI) who received a long-acting injectable (LAI) during their incarceration.	By month	**Jo Martin** Sarpy County Department of Corrections	Quarterly

Analysis/Notes:

- Data collection on this metric resumed in CY 2025.

Sarpy County Stepping Up Team Members

Administration

Tom Dargy - Sarpy County Administration

Sarpy County Department of Corrections

Jo Martin - Director of Corrections

Jake Berst - Assistant Director of Corrections

Christy Barge - Re-Entry Coordinator

Daltynn Haskins - Mental Health

County Attorney and Public Defender's Offices

Ashley Berg - Public Defender's Office / Social Work

Dylan Folchert - County Attorney's Office

Community Corrections

Megan Jacobsen - Director of Community Corrections

Ashlie Weisbrodt - Mental Health Pretrial

Caley Hartner - Mental Health Pretrial

Carisa Gosda - Mental Health Diversion

David Soto - Mental Health Diversion

Law Enforcement & 911 Operations

Bill Muldoon - Emergency Communications 911

Deputy Dawn Herlacher - Sarpy County Sheriff's Office / Mental Health Unit

Captain Kraig Gomon - La Vista Police Department

Captain Tim Melvin - Bellevue Police Department

Sergeant Jess Manning - Bellevue Police Department

Deputy Chief Orin Orchard - Papillion Police Department

Probation

Jeff Jennings - Probation

Creston Ashburn - Probation / Speciality Courts

Region 6 Behavioral Healthcare Contacts

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