

Jail & Jail Alternatives Committee

2016 Minutes

Jail & Jail Alternatives Committee
Winona County Criminal Justice Coordinating Council
January 28, 2016
12:00 p.m. at Kensington Banquet Room

Present: Don Cratchy, Bridget Klinger, Ben Klinger, Helen Newell, Justin Green, Latrisha Green, Kalene Engel, Alaina Zimmerman, Mary Olson, Marie Kovecsi, Karen Bunkowski

Call to Order: 12:50 p.m. (The Stepping Up Workgroup Meeting ran late)

Approval of Minutes: Minutes from the previous meeting were approved without changes.

CARE Staff and Team Updates: The new CARE intern is Alaina Zimmerman. Latrisha is continuing her efforts to educate clients about services in the community, as well as to encourage communication between different organizations. She is updating the Community Resource Brochure which was done a few years ago and intends to offer that publication to anyone who is released. Ben suggested sending it via e-mail so it is accessible via cell phone. CARE continues to offer three levels of services, from less intensive to most intensive. On average, CARE receives six Level Three (most intensive) clients per quarter, with the remaining 16 clients being level 1 and 2.

Stepping Up Initiative Workgroup: The Stepping Up Workgroup met immediately prior to the JJA Meeting, spending most of the 90 minutes working on Sequential Intercept Mapping (see attached). The committee also heard about possible mental health training opportunities and received information on the local crisis response team.

Jail Programs: Jail programming has expanded. Karen Moore from Community Services presented a class on economic support services and health insurance last week. Ben sat in on the class and learned a lot. Plans are underway to offer the class on a monthly basis. Karen is also willing to communicate about clients on an individual basis. Sandra Burke and Justin will be doing a class on community-based resources next week. Dave Fruth is teaching a two hour 1st Aid/CPR class for which the participants will receive certification. The employment class continues to be well attended.

Jail Inspection: The jail recently received the results of the Department of Corrections inspection. The facility does not meet DOC regulations, so it will be downgraded from a Class 3 to a Class 2 facility. This means that pre-conviction or presentence individuals and sentenced individuals without work release or STS can be housed up to 90 days. No maximum security inmates can be housed. The inspectors were pleased with the way the annex was being run. Marie noted that the effective date for the required changes had been pushed back from April 1st to August 1st.

Adjourn: 1:30 p.m.

Next Meeting: February 25, 2016 at noon at Kensington Banquet Room

Stepping Up Sequential Intercept Mapping (1.28.16)

	Intercept 1-Community (Pre-Law Enforcement Involvement)	Intercept 1-911/Dispatch
Existing Programs	<ul style="list-style-type: none"> • Mental Health Case management • Public health nursing/med management • Family supports/natural supports • Crisis response for SE Minnesota (CRT) • Education/Trainings – e.g. Mental Health 1st Aid Training; NAMI Groups/Offerings • Traditional mental health medical care – psych/therapists – see Community Collaboration Booklet (compilation of resources) • Peer Support Specialists • ILS & ARMHS (Independent Living Skills & Adult Rehab Mental Health Services) • Physician’s Hold – Prepetition Screening – Civil Commitment (253B) • Guardianship/Conservatorships – Advance Psychiatric Directives – Advance Crisis Planning 	<ul style="list-style-type: none"> • Crisis Response for SE Minnesota (CRT) • LETG Alerts are available for law enforcement to note special concerns about individuals • Unified dispatch system (county does all dispatch) • Unified software system throughout county (LETG) provides access about prior law enforcement involvement in county
Gaps/Challenges	<ul style="list-style-type: none"> • Limited psychiatric care – lack of providers • Voluntary v. involuntary care (Personal Rights v. Danger to self or others) • MI person has burned bridges w/family; No natural supports • HIPAA/Privacy laws may limit family’s ability to engage/help • Health Insurance – getting and keeping • Housing – appropriate to needs • Difficulty Navigating the system – confusing processes = lack of follow thru = loss of benefits • Help in completing guardianship petitions; no court-appointed attorneys anymore • Lack of information about resources in the community • Lack of follow through by County on Commitment Petition/no grounds to commit 	<ul style="list-style-type: none"> • Difficult for 911/dispatch to differentiate between MI and CD with calls • Mental health history may be unknown/inaccessible, so responding officers may not be aware of what they are responding to • LETG is not consistently being used to denote MH issues (possible HIPAA issues?)
New/Improved	<p>Telemedicine Better use of existing services (ILS/ARMHS) & Peer Specialists Increase #/variety of providers (PS training, possible use of college interns) Crisis home—not jail or hospital Information on guardianships and other services to professionals Public education to know what resources are out there.</p>	<ul style="list-style-type: none"> • Crisis intervention training – 911 & dispatch • Crisis home or place where those in crisis could be taken • Increased referrals to Crisis Response for SE MN (as opposed to law enforcement response)

Stepping Up Sequential Intercept Mapping (1.28.16)

	Intercept 1-Law Enforcement Contact	Intercept 2-Booking
Existing Programs	<ul style="list-style-type: none"> • citation v. arrest discretion per rules • detox (Crisis Receiving Unit) for CD • Mental health hold if danger to self/others allows transport to hospital and could lead to civil commitment • Officer's observation of behavior, MH v. CD (Trained DREs; no recent crisis intervention training) • Option to call family member or other responsible party to take/watch individual 	<ul style="list-style-type: none"> • medical info collected at booking • Mental health screening at booking via- Correctional Mental Health Screen (CMHS-M; CMHS-W) • person must be medically cleared to enter jail (shift commander makes that call)
Gaps/Challenges	<ul style="list-style-type: none"> • If person is placed on ER hold, Community Services is notified but sometimes person is released prior Community Services intervention (via pre-petition screening) • If voluntary stay, Community Services is not notified • Lengthy (time consuming) drop-offs at hospital • Hospital refuses to admit because person doesn't meet admit criteria (lack of information/education about hold criteria) • Hospital may not request hold • If person has not committed a crime or is a danger to self or others, law enforcement cannot hold/detain • Lack of other options (Query: Do colleges have a crisis response team? Or other mental health intervention at this stage?) • Discharge planning for people who are released without holds/released without community services involvement • Lack of beds in behavioral health • Costs of security at hospital 	<ul style="list-style-type: none"> • lack of cooperation/inability to cooperate with booking process • Info received is self-reported (some are bad historians) • Collateral information info difficult to obtain – HIPAA challenges – lack of information sharing within County (WCCS & Jail) and by others (but if inmate wants meds, they will usually sign releases) • Crisis response for the jail – no one provides that service, but Hiawatha used to provide that service • Handling of Medication: if they come in with prescription, jail will determine whether meds can continue. If no meds brought with, jail needs to determine medication needs (Jail's goal is to stabilize)
New/Improved	<ul style="list-style-type: none"> • Crisis intervention training • Education on prepetition/civil commitment for law enforcement and ER staff <ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • place to divert people to who need more than jail can offer but less than hospital (secure area)—something akin to a detox center but for mental health patients • Sharing of information about mental health to more quickly and comprehensively assess needs

Stepping Up Sequential Intercept Mapping (1.28.16)

	Intercept 2-1 st Appearances (Arrest/Arrestment)	Intercept 3-Jail Services
Existing Programs/Services	<ul style="list-style-type: none"> • Pretrial bail evaluations (on some) but no specific mental health screening • Judge makes personal observations of Defendant – may have past knowledge/experience • Prosecutor may provide information on mental health concerns when addressing release conditions (Jail will pass mental health concerns along to prosecutor) 	<ul style="list-style-type: none"> • Additional mental health screening by ACH within 14 days of admission by ACH Jail Nurse • ACH attempts to get collateral/other medical info/records when deemed important • Immediate referral by jail staff to mental health provider when + answers on CMHS or based upon observations by jail staff which indicate mental health concerns • MI/CD screening conducted by CARE using GAIN-SS within 5 days of admit • Jail programming specific to mental illness or CD, i.e. Gateway Program, AA/NA • Additional assessments available upon referral/request: Rule 25 for chemical dependency and DA (Diagnostic Assessment) for mental health • Jail staff referrals to Community Services for pre-petition screens
Gaps/Challenges	<ul style="list-style-type: none"> • No universal bail evaluation screening on all inmates • no reporting on bail evaluation of mental health issues (lack of information to release decision maker) • No public defender at 1st appearance – no advocate, no one to explain process or conditions of release (and consequences of violation) to defendant • No written pre-trial release orders – possibly lack of clarity/understanding by defendant of release conditions • No diversion/screening options prior to 1st appearance • Limited/no monitoring of pretrial release conditions (judges may be reluctant to grant release due to limited/no monitoring) • Mentally ill defendants who bail out (\$ bail) and have no conditions (or existing services) would be difficult to monitor 	<ul style="list-style-type: none"> • Sharing of information obtained while inmate is in jail— where does the ACH information go? • Concerns about jail medications—changing medications or not providing • Delays in prepetition screenings/filing of commitment petitions • Lack of programming space • Inmates shipped out of county and not accessible • Long wait times for mental health treatment (and chemical dependency), even if ordered by court and despite statute to the contrary—people may remain in jail for a long time awaiting opening • Funding: lack of health insurance. Rule 25 CCDTF funding is available for CD; MN Care is available in jail, but Medicaid is not
New/Improved Efforts	<ul style="list-style-type: none"> • Public defender at 1st appearances • Expansion of release authority to Prosecutors? Others? • Court date reminders to increase compliance and decrease FTAs (possibly via e-mails delivered through MNCIS to cell phones) • Provide more comprehensive information to judges regarding mental health issues • Earlier/more screening by prosecutors for diversion • Pretrial services Program to provide monitoring between 1st appearance and disposition 	<ul style="list-style-type: none"> • Education on pre-petition/civil commitment process to jail staff • Possible “wing” for mental health services • Utilize peer support specialists to initiate contact in jail • Increased use of DAs to assess mental health issues • Health exchange or other alternatives which would allow for increased information sharing.

Stepping Up Sequential Intercept Mapping (1.28.16)

	Intercept 3-Court Intervention	Intercept 4-Reentry
Existing Programs/Services	<ul style="list-style-type: none"> • Authorizes furloughs for CD/MI Treatment • Rule 20 procedures for competency (20.01 competency to stand trial; 20.02 mental illness defense) • Drug Court for chemical dependency (post-conviction) • Continuing review of bail/release decision • Diversion for non-felony levels (felony diversion program was recently discontinued) • PSI (Pre-sentence investigation) conducted by probation provides additional information to court re: individual and possibly addresses mental health needs 	<ul style="list-style-type: none"> • Pre-release planning through CARE • Informal planning/preparation via jail staff/attorneys/family • Case management through CARE • Jail Programming and CARE provides education/information prior to release • Resource list distributed to inmates upon discharge
Gaps/Challenges	<ul style="list-style-type: none"> • Gap for those who meet Rule 20 standards but not civil commitment standards • No specialty court for mental illness • No diversion for mental illness • Furloughs are problematic – we lose people after treatment is done b/c providers do not notify jail; no discharge from facility planning • PSI information goes no further than to inform judge on sentencing; is valuable information that could help determine future needs/services 	<ul style="list-style-type: none"> • Jail discharges can be unpredictable due to last minute plea deals, lack of communication, etc. and this makes discharge planning difficult—can't notify service providers, obtain benefits, make probation appt, etc • Health insurance not in place upon discharge, inability to access meds/providers • Jail provides only 3 days of meds upon jail discharge – if no health insurance in place, no meds • There are multiple strikes v. a person with criminal charges who also has mental illness—difficult to get housing, job, etc. • Institutionalization which occurs during lengthy jail stay + general mental health issues causes inability to understand/navigate the community to access/retain benefits and services • Information sharing challenges between departments – difficult to provide good planning without good information (everyone must get their own info) • Lack of personnel to case manage a needy population • Probation not involved in release planning/don't meet client until after release; client does not know what conditions of release are until AFTER re-entry occurs • Sustainability • General lack of knowledge of community resources
New/Improved Efforts	<ul style="list-style-type: none"> • Court date reminders to increase compliance and decrease FTAs (Failure to Appear) • Incorporate mental health information into pretrial bail eval (or as a separate component) for judges to consider • Increase diversion options (mental health court or otherwise) • Pretrial services program to monitor 	<ul style="list-style-type: none"> • Information sharing through health exchange • Utilize ILS and ARHRS for case management • Involve peer support specialists • Distribute community resource information upon discharge • Dedicated social worker in jail to coordinate re-entry planning and connections with existing community resources; person in jail who would meet with inmate upon discharge to ensure that there was a plan in place

Stepping Up Sequential Intercept Mapping (1.28.16)

Intercept 5-Corrections/Probation	
Existing Programs/Services	<ul style="list-style-type: none"> • Probation conducts PSIs (pre-sentence investigations) on some clients prior to sentencing, so PO could have some knowledge of mental health concerns • Probation requires released individual to schedule an appointment within a short time frame (immediately if going out of state), within XXX days (?) if not in order to go over probation agreement
Gaps/Challenges	<ul style="list-style-type: none"> • Although the individual is required to <u>schedule</u> an appointment within days of release, the actual appointment may not take place until a couple weeks later. By that time, some clients have already lost their way • Individuals suffering from mental health concerns may have problems remembering/keeping appointments or other technical (non-criminal) requirements of probation which may result in FTAs, warrants, jail stays, etc.
New/Improved Efforts	<ul style="list-style-type: none"> •

Jail & Jail Alternatives Committee
Winona County Criminal Justice Coordinating Council
February 25, 2016
12:00 p.m. at Kensington Banquet Room

Present: Don Cratchy, Ben Klinger, Helen Newell, Justin Green, Latrisha Green, Kalene Engel, Alaina Zimmerman, Mary Olson, Marie Kovecsi, Judy Gilow, Karin Sonneman

Call to Order: 12:15 p.m. (The Stepping Up Workgroup Meeting ran late)

Approval of Minutes: Minutes from the previous meeting were approved without changes.

CARE Staff and Team Updates: CARE has 36 clients and is in Quarter 6 of the grant. Latrisha is continuing to form community partnerships. The state grant manager is using Winona County's model as an example for other grantees during an upcoming grantee training workshop. Joy from Workforce Center is interested in helping with reentry planning in the jail. Helen Newell discussed the services provided by ORC with respect to mentoring and employment. Don Cratchy from Acumen will be starting a mental health program in the jail for inmates who need additional mental health treatment, beyond what Thinking for a Change would do

Stepping Up Initiative Workgroup: The Stepping Up Workgroup met immediately prior to the JJA Meeting. Winona was not selected to participate in the Stepping Up Summit, but will have access to webinar excerpts of the summit. Kalene reported on the National Network of Criminal Justice Coordinating Council's "Data Driven Justice" initiative and how it intersected with the work done by both the Stepping Up and Pretrial Services Workgroup. Committee members discussed hosting/sponsoring Mental Health 1st Aid Training. Kalene will gather additional details on the types/costs of training. The workgroup reviewed the mental health report commissioned by the State Legislature, noting that its findings and recommendations were very similar to those of the Stepping Up Workgroup. The Sequential Intercept Map was reviewed. Justin will reach out to Mike Peterson of Dispatch to get information for the 911/Dispatch intercept. A lengthy discussion was held on the recently released "Second Chance Act" request for proposals. Although the grant does not require a match, only 8 grants will be awarded nationwide. Despite the low chances of being selected for funding, the grant does provide an evidence-based framework for much of the work being done by both the Stepping Up and Pretrial Services Workgroup. Latrisha is willing to pull together information for the grant. Even if it is not possible to develop a proposal prior to the grant deadline, the work in pulling together a proposal will be helpful to establish an action plan for the Workgroup. Therefore, Latrisha will start working on the grant application. Members also discussed the need to provide an update to the County Board and agreed to strive for a May 2016 meeting date at which to provide the update.

Jail Programs: Jail programming has continued to expand. The Workforce Center recently applied for an American Jobs Center grant which would expand job services work in the jail. Phil Huerta held his first budgeting class, which was well attended (6 people). Four inmates received certification in First Aid Training. Justin Green and Sandra Burke will be doing a class

on private sector services. Karen Moore from Community Services has been coming in once a month to discuss economic support services and health insurance. She has also been coordinating with Ben to discuss individual cases. Express Personnel continues to come into the jail every two weeks.

Pre-Trial Services: Kalene provided an update on the Pre-Trial Services Workgroup, noting that she will supplement the SIM mapping done by this committee with information from the Pretrial Services Workgroup.

Other: The Gateway Program is in need of additional referrals. One of the issues is that there is a lag time of 1-2 weeks from referral to qualification. Another issue is that inmates prefer (and the judges will grant) a furlough from the jail. Furloughs continue to pose problems in communication for jail staff, who are not consistently notified when furloughed individuals complete treatment or are transferred. Winona County is one of few counties that authorizes furloughs for treatment. Latrisha and Ben indicated that their programs/staff could improve recruiting efforts for Gateway.

Adjourn: 1:30 p.m.

Next Meeting: March 24 2016 at noon at Kensington Banquet Room

Jail & Jail Alternatives Committee
Winona County Criminal Justice Coordinating Council
March 31, 2016
12:00 p.m. at Kensington Banquet Room

Present: Don Cratchy, Ben Klinger, Helen Newell, Justin Green, Latrisha Green, Kalene Engel, Alaina Zimmerman, Mary Olson, Marie Kovecsi, Karen Bunkowski

Call to Order: 12:10 p.m.

Approval of Minutes: Minutes from the previous meeting were approved without changes.

CARE Staff and Team Updates:

- **Program Updates:** Today is the final day of Quarter 6 of the grant. Thirty-four new clients were served this quarter, with 22 of them being Level 3 – Case Management clients. With three graduations and six unsuccessful terminations, there are currently 45 active clients participating in CARE.
- **Evaluation:** The second CARE Evaluation has been completed and, in general, confirms that the program is following evidence-based practices as much as possible and practicable, given other external factors. The report includes a number of recommendations and Latrisha is in the process of working through those recommendations. CARE has benefitted from increased referrals from other providers and increased linkages with the community. A WSU class is currently working on asset mapping. The grant term expires in October, but it may be possible to extend the length if grant funds have not been used. At this point, it does not appear likely that the County would pick up the funding for CARE once the grant funds expire.
- **Housing:** An issue regarding procedures for placement of CARE clients into appropriate housing recently arose. The procedure was reviewed by CARE staff and supervisor and found to be appropriate and consistent with grant terms. Committee members noted that there was no sober housing in Winona and a lack of other housing options, especially for individuals with criminal records.
- **National Reentry Week Event:** The Department of Justice has designated April 24-30th as National Reentry Week. During this week, U.S. Attorneys' Offices throughout the nation will lead reentry-related efforts in their districts. After discussion, committee members were in general agreement that we should do something to recognize reentry week and the CARE Program. Latrisha will reach out to the WSU students to see if they would like to participate/assist. Possible ideas include inviting a U.S. Attorney, the grant manager, past CARE participants and Latrisha to speak at an organized event—similar to the Community Talk that ASAP is sponsoring on April 12th. Other ideas included speaking at the April 22nd County Board Meeting. Kalene will reach out to the U.S. Attorney from our district to see if he would be available sometime during that week.

Stepping Up Initiative Workgroup: The Stepping Up Workgroup met immediately prior to the JJA Meeting. The workgroup recommended that the CJCC join the White House Data-Driven Initiative, so it will be placed on the April CJCC Agenda as an action item. Kalene will reach out to Family and Children's Center to arrange for one or more Mental Health First Aid for Public Safety Training. A three-day Crisis Intervention Training (CIT) will be offered to law enforcement later this year, likely in August. After reviewing the Second Chance Act request for proposals, Latrisha determined that it was not a good fit for our County because we lacked appropriate linkages to post-incarceration housing—which was a priority item. She did complete a summary of her research. Workgroup members discussed a possible framework for a presentation to the County Board in May. Kalene, Justin, Judy and Latrisha will prepare a presentation and bring it back to the Stepping Up Workgroup for input. Kalene provided updated SIM (Sequential Intercept Mapping) charts which incorporated recommendations from two recent legislative reports as well as the pretrial services workgroup findings/recommendations. The SIM chart contains multiple recommendations, which will need to be prioritized for the Board, especially in light of jail reclassification issues.

Jail Programs: Jail programming is going very well. The Workforce Center started holding classes last week and Don Cratchy started a mental health group yesterday. The classes have allowed the jail to reclassify some offenders to the Annex.

Adjourn: 1:05 p.m.

Next Meeting: April 25, 2016 at noon at Kensington Banquet Room

Jail & Jail Alternatives Committee
April 25, 2016

The Jail and Jail Alternatives Committee did not meet in April of 2016; however, the Stepping Up Workgroup met on April 25, 2016 and discussed the following issues:

1. Mental Health First Aid for Public Safety Training has been set for May 25th from 8 – 4:40 p.m. at the Kensington Banquet Room.
2. A workgroup will meet on April 27th to discuss the possibility of applying for funding through the Justice and Mental Health Collaboration Grant.
3. Workgroup members gave input on the Stepping Up presentation for the Winona County Board, which is tentatively scheduled for May 10, 2016.

The next meeting of the Jail & Jail Alternatives Committee is on May 26, 2016 at noon at the Kensington Banquet Room.

Jail & Jail Alternatives Committee
Winona County Criminal Justice Coordinating Council

May 26, 2016

12:00 p.m. at Kensington Banquet Room

Present: Don Cratchy, Justin Green, Latrisha Green, Kalene Engel, Alaina Zimmerman, Mary Olson, Karen Bunkowski, Brooke Merchlewitz, John Otis.

Call to Order: 12:00 p.m.

Approval of Minutes: Minutes from the previous meeting were approved without changes.

CARE Staff and Team Updates: CARE has almost 40 active clients and additional clients who are in treatment. Recently, Latrisha attended training in the Cities for Motivational Interviewing for re-entry grantees. Other re-entry grants have been underspending so, after the CARE Grant closes, funding will be available for an additional two years, provided evidence-based practices are being followed. CARE will have to provide information on its use of evidence-based practices to secure the funding. CARE will start doing CAREY Guides, which is similar to Thinking For a Change, but more individualized. This would be used for Level 3 clients (case management). John is the new intern for the summer and another is lined up for the Fall. Latrisha has the report back from the WSU college students; she will share with the committee via e-mail. The Helpful Resources Guide has also been updated and will be distributed to committee members.

Stepping Up Initiative Workgroup: Kalene gave a Stepping Up Update to the Winona County Board on Tuesday (May 24th). Attached is the slide presentation she used. The update was very well received and the Board seemed particularly interested in the secure video teleconferencing idea mentioned as one of the possible action steps. The workgroup will take a break for May and meet again on June 23, 2016 at 11:00 a.m.

JMHC (Justice and Mental Health Collaboration) Grant: The County Board gave approval for a JMHC grant application on May 10th. A small group of individuals met to discuss the proposed grant contents and Kalene and Latrisha authored the grant, with proofreading and other assistance from Marie. Some key highlights of the grant include “train-the-trainer” CIT training for three individuals; development of a health information exchange for criminal justice applications; secure teleconferencing capabilities for remotely located inmates and telemedicine; a jail intake worker to perform universal bail evaluation and MI/CD screening and 1st Aid Mental Health training for 50 individuals. Awards will likely be announced in late September.

Voyage Program: Discussion deferred at the request of Common Ground.

Other:

- The Adult Mental Health 1st Aid Training has been rescheduled until June 22, 2016—see attached flier
- The Minnesota Department of Human Services has released a new training and education program for Civil Commitment which can be found at http://www.dhs.state.mn.us/Training/cc/story_html5.html
- Another resource that could be useful for this committee is the Minnesota Center for Chemical and Mental Health, which can be accessed at <http://mncamh.umn.edu/>

Adjourn: 1:05 p.m.

Next Meeting: June 23, 2016 at noon at Kensington Banquet Room

THE STEPPING UP INITIATIVE

A Report to the Winona County Board on the Winona
County Initiative
May 24, 2016

What is it?

The Stepping Up Initiative is a national initiative to reduce the number of people with mental illnesses in jails. It is about creating a long-term, national movement to raise awareness of the factors contributing to the over-representation of people with mental illnesses in jails, and then using practices and strategies that work to drive those numbers down.

National Partners

APF American Psychiatric
Foundation
Research. Education. Impact.

JUSTICE CENTER
The University of Southern California
Collaborative Approaches to Public Safety

NACO National Association of Counties
The Voice of America's Counties

 **BJA**
Bureau of Justice Assistance
U.S. Department of Justice

“Call to Action” Steps

1. Secure local support for the initiative by passing a resolution in support of the Stepping Up Initiative.
2. Convene or draw on a diverse team of leaders and stakeholders
3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs
4. Examine treatment and service capacity and identify policy and resource barriers
5. Develop a plan with measurable outcomes
6. Implement research-based approaches
7. Create a process to track and report on progress

Timeline of Events

Pass Resolution

- Resolution passed 6/9/15

Launch of Initiative

- Kickoff Meeting held 6/11/15

Mental Health Roundtable

- July 2, 2015 with Sen. Al Franken

Timeline of Events

Ongoing Meetings

- 6/11/15
- 6/30/15
- 8/20/15
- 10/8/15
- 12/14/15
- 1/28/16
- 2/25/16
- 3/31/16
- 4/25/16

Education Webinars

- 6/11/15: Getting Started
- 6/30/15: Measuring Prevalence
- 8/20/15: Capacity & Funding
- 9/10/15 Law Enforcement & Diversion Strategies
- 10/8/15: Reentry Strategies

Community Collaboration Summit on Mental Health

- 10/8/15 at Winona Middle School
- Co-sponsored by CJCC, Project Compass, Winona Area Public Schools, NAMI-Winona, Project Fine and Hiawatha Valley Mental Health Center
- Featured keynote speaker, Sue Abderholden of NAMI-MN

1. Secure local support for the initiative by passing a resolution in support of the Stepping Up Initiative.

RESOLUTION TO JOIN THE "STEPPING UP" INITIATIVE TO ADDRESS THE CONFINEMENT OF PEOPLE WITH MENTAL ILLNESS IN THE COUNTY JAIL

WHEREAS, a number of people confined in the Winona County Jail typically display symptoms of mental illness or have been diagnosed with a mental illness, and

WHEREAS, almost three-quarters of adults with serious mental illnesses in jail in the United States also have co-occurring substance use disorders, and

WHEREAS, adults with mental illnesses tend to stay longer in jail and receive care at a higher risk of re-arrest than people without these disorders, and

WHEREAS, county jails nationwide spend two to three times more on adults with mental illnesses who require interventions compared to inmates without these illnesses, and

WHEREAS, while an appropriate treatment and services, people with mental illnesses continue to cycle through the criminal justice system, often resulting in long sentences for them and their families, and

WHEREAS, Winona County has already begun to assess that the local criminal justice system respects the rights of defendants, before-arrest, while, after-arrest, and in post-arrest, to change the direction of their lives and make the best use of the public's funds, and

WHEREAS, winning counties who will offer mental illness reform will significantly reduce the number of people who will become justice and protective members of our society significantly, and

WHEREAS, through the Stepping Up Initiative, the National Association of Counties, the Council of State Governments, Justice Center and the American Psychiatric Association are encouraging public, private, and academic partners to reduce the number of people with mental illnesses in jail;

NOW, THEREFORE,

LET IT BE RESOLVED, THAT the Winona County Board of Commissioners do hereby agree to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016.

Accordingly, the Winona County Board of Commissioners, Council of Commissioners, do hereby agree to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016.

- approve a resolution to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016;
- approve a resolution to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016;
- approve a resolution to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016;
- approve a resolution to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016;
- approve a resolution to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016;
- approve a resolution to join the "Stepping Up" Initiative to address the confinement of people with mental illness in the county jail, and to support the initiative with other counties and support a county-wide initiative for public law in September 2016;

I, Mike Peterson, Clerk of the Winona County Board of Commissioners, certify that the above resolution was adopted by the Winona County Board of Commissioners on June 9, 2016.

MICHAEL J. GARDNER
 County Clerk
 June 9, 2016

STEPHEN F. TOLSON
 County Clerk
 June 9, 2016

2. Convene a Diverse Group of Stakeholders

Stakeholder	Representing	Stakeholder	Representing	Stakeholder	Representing
Marie Kovesci	County Board	Don Cratchy	Mental Health Provider	Rena Patterson	Probation
Latrisha Green	Reentry Program	Amy Moe	WCCS-Adult Mental Health/CD	Nancy Buytendorp	Judiciary
Ben Klinger	Jail	Jerry Obieglo	Veterans Services	Gabe Vargas	WCCS-Adult Mental Health
Julie Hanson	Mental Health Provider	John Rislove	Mental Health Provider	Sam Carter	Drug Court
Andrea Gierok	Public Health	Kathryn Jargo	WCCS-Adult Mental Health	Beth Wilms	Community Services
Judy Gilow	Public (Family)	Justin Green	Faith Based Organizations	Steve Buswell	Jail
Erin Stephens	Prosecution	Helen Newell	Mental Health Educator	Sue Aberholden (NAM)	Mental Health Advocacy Group
Chris Rogers	Media	Carmaine Sturino	Public Defense	Bridget Klinger	Winona City Police
Laurie Becker	Jail Healthcare	Mary Olson	CD/Mental Health Provider	Karen Bunkowski	WCCS-Adult Mental Health
Matt Brickl	Mental Health Provider	Christine Ledebuhr	Defense Attorney	Kalene Engel	CJCC
Karin Sonneman	Prosecution	Alaina Zimmerman	CARE Program	Mike Peterson	Dispatch

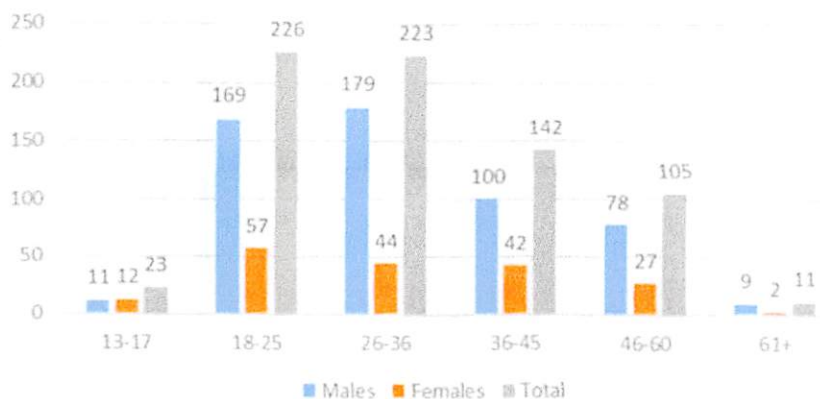
3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs

- ▶ Data Task Force established
- ▶ Jail procedures for screening & assessing mental health was reviewed
 - ▶ Screening at booking
 - ▶ Screening by Jail Nurse within 14 days of admission
 - ▶ Additional mental health-specific screening by Jail mental health provider for those referred with mental health concerns
 - ▶ Screening for MI/CD by CARE Program
- ▶ Validated screening tools were reviewed and new gender-specific screening tool (Correctional Mental Health Screen) was implemented on 10/1/15 for use during bookings

3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs

LETG
Data

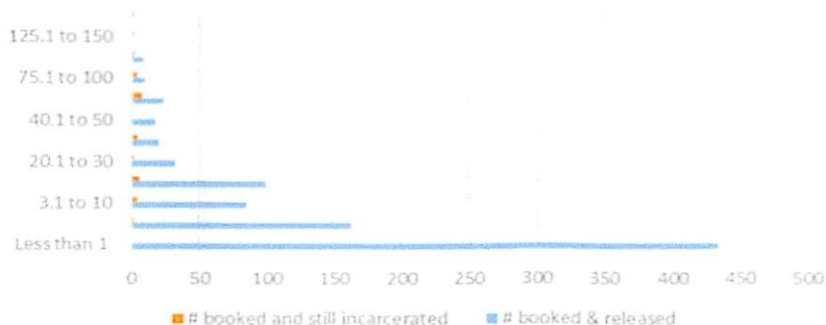
Winona County Jail Bookings by Age and Gender
November 1, 2015 - April 30, 2016 (928 total or 4.4 per day)



3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs

LETG
Data

Length of Stay for Persons Booked
10/1/15 - 4/30/16 (928 persons)

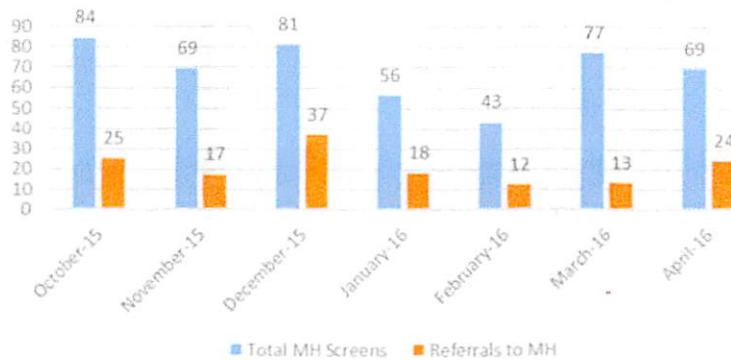


Less than 1 day is normally juveniles or "book and release"

3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs

LETG
Data

Mental Health Referrals from Screens
10/1/15 - 4/30/16 (479 screens: 146 referrals)

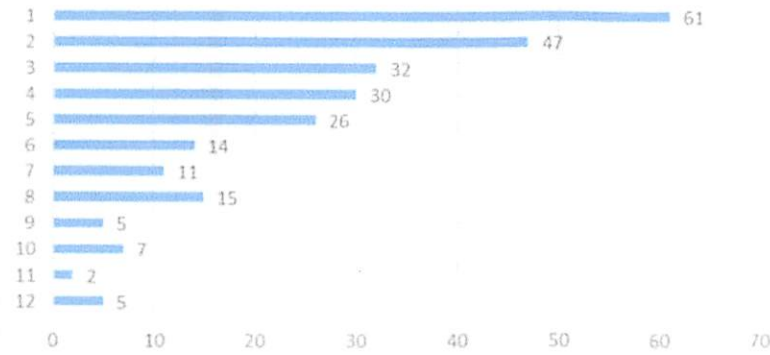


Screens are not done on juveniles or "book and release"

3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs

LETG Data

of Self-Reported "Positive" Answers on CMHS
(10/1/15 - 4/30/16)

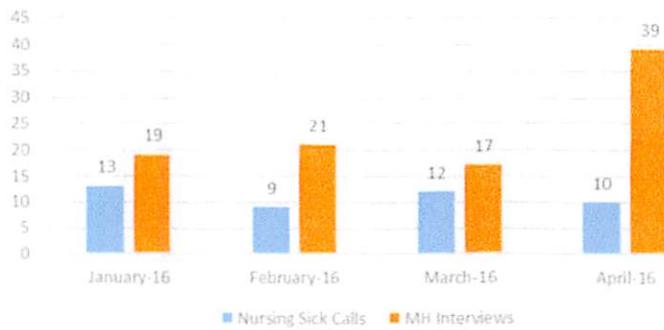


CMHS-M has 12 questions; CMHS-F has 8 questions

3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs

ACH Data

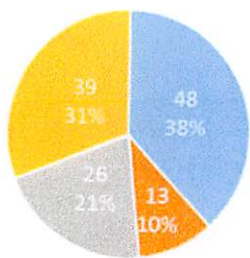
Jail Nursing Sick Calls v. Mental Health Interviews
January 2016 to April 2016



3. Collect and review data on the prevalence of people with mental illnesses in jails and assess their treatment needs

CARE Data

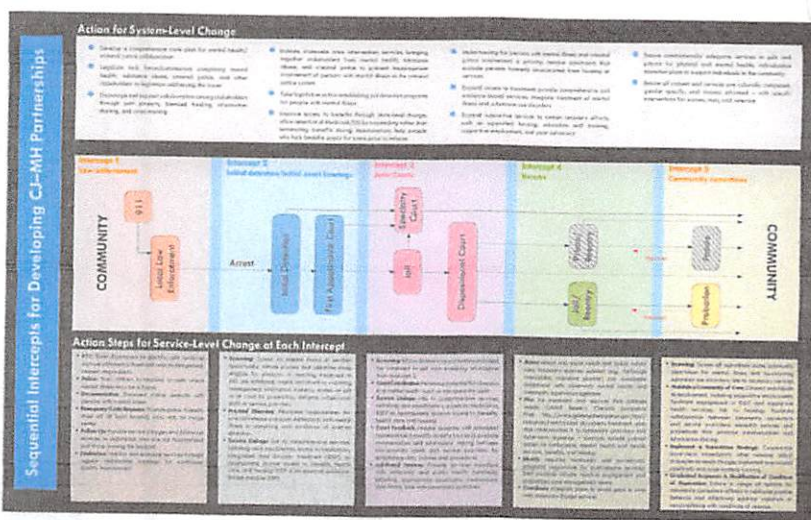
CARE GAIN-SS (Voluntary) Screenings
11/1/14 to 4/30/16 (126 Total)



78 Respondents or 62% had positive findings for either MI or CD or both

■ None ■ MI Only ■ CD Only ■ MI/CD

4. Examine treatment and service capacity and identify policy and resource barriers (Sequential Intercept Mapping)



Basics of the Sequential Intercept Model

- ▶ Developed by Mark R. Muetz, MD, and Patricia A. Griffin, PhD and used by the Substance Abuse and Mental Health Services Administration GAINS Center.
- ▶ SIM has been used as a focal point for states and communities to assess available resources, determine gaps in services and plan for community change.
- ▶ There are a series of points of inceptions at which an intervention can be made to prevent individuals from entering or falling deeper into the criminal justice system.
- ▶ People with mental disorders should not “penetrate” the criminal justice system at a greater frequency than people in the same community without mental disorders.
- ▶ Ideally, most people will be intercepted at early points, with decreasing numbers at each subsequent point.

Sequential Intercept Points

FROM COMMUNITY

- ▶ Intercept 1: 911/Law Enforcement
- ▶ Intercept 2: Initial Detention/1st Appearance in Court
- ▶ Intercept 3: Jail/Specialty Court/Dispositional Court
- ▶ Intercept 4: Jail or Prison Reentry
- ▶ Intercept 5: Probation/Parole

BACK TO COMMUNITY

Highlights of the SIM Mapping (SIM Handout)

- ▶ There are more MH resources available to people in the community (as opposed to those incarcerated)
- ▶ There is a lack of MH Providers, particularly psychiatric
- ▶ It can be difficult/confusing to navigate the system for people with MH

Highlights of the SIM Mapping (SIM Handout)

- ▶ Lack of pretrial bail monitoring may cause over-incarceration due to public safety concerns
- ▶ Mental health information is not routinely provided to judges at first appearance
- ▶ Inmates shipped out of county cannot access in-jail resources
- ▶ Medicaid coverage stops during incarceration
- ▶ Civil commitment process is slow; wait times for facilities are long

Highlights of the SIM Mapping (SIM Handout)

- ▶ No diversion or specialty courts for mental illness
- ▶ Jail discharge dates sometimes cannot be pre-determined due to sudden plea bargains for time served (creates problems for re-entry planning)
- ▶ Lack of a “warm” handoff to probation from jail; people get “lost” between jail and probation
- ▶ Housing remains a significant challenge

Recommendations

- ▶ Crisis Intervention Training-more appropriate response; less ER visits and incarceration
- ▶ Better utilization of Crisis Response Team
- ▶ Telemedicine-to expand offerings of MH services
- ▶ Video-conferencing-to expand services offered in Winona County to remote locations (Wabasha/Houston)
- ▶ Health Information Exchange to share medical info and improve responses
- ▶ More education on and better utilization of available community resources

Recommendations

- ▶ Diversion program for mental health (similar to drug court)
- ▶ Pretrial release monitoring to allow for greater release options
- ▶ Dedicated social worker in jail to coordinate re-entry and “warm handoff” including with probation
- ▶ Financial workers assist with health insurance application pre-jail discharge
- ▶ More housing resources

Recent JMHC Grant Application Highlights

- ▶ Crisis Intervention Training - Train the Trainer (note CIT Training will be offered in August)
- ▶ Health Information Exchange
- ▶ Secure Video Teleconferencing between Winona/Wabasha/Houston for remotely located inmates
- ▶ Jail Intake Worker to conduct universal bail screening and early MH screenings; allowing reentry coordinator to focus on reentry.

Future Steps

- ▶ Share information with NIC once it begins its system assessment
- ▶ Drill-down on data or gather more, as needed
- ▶ Continue to research evidence-based solutions/ideas, especially those introduced via the Data Driven Justice Initiative
- ▶ Prioritize list of strategies
- ▶ Seek funding resources

Jail & Jail Alternatives Committee
June 23, 2016

The Jail and Jail Alternatives Committee did not meet in June of 2016; however, the Stepping Up Workgroup met on June 23, 2016—see attached minutes.

Additionally, the following information was provided via e-mail:

CARE Update (Latrisha Green):

- Since 11-2014 CARE has served 140 individuals (unduplicated count) who have been screened and referred to services.
- There were 9 new interactions last month ?? including: 5 new clients this quarter and 4 clients who were screened and referred to other services. In addition, 2 previously dismissed clients have reengaged services.
- Currently there are 42 active clients.
- Latrisha will be attending the Core Correctional Practices training tentatively set for the week of August 15.

Jail Programs Update (Ben Klinger):

Programs are going well and are well attended. Express is taking a break for the summer, but jail staff has been receiving applications from inmates with work release and providing them to Express. Jail staff has also arranged for interviews for some inmates through Express. Work Force Center reps have been coming in bi-weekly and jail staff has received a lot of positive feedback about the interaction.

Next Meeting: The next meeting of the Jail & Jail Alternatives Committee is on July 28, 2016 at noon in the Kensington Banquet Room.

Stepping Up Workgroup
Winona County Criminal Justice Coordinating Council
June 23, 2016
11:00 a.m. at Kensington Banquet Room

Present: Don Cratchy, Helen Newell, Justin Green, Latrisha Green, Kalene Engel, Mary Olson, Judy Gilow

Call to Order: 12:05 p.m.

Mental Health 1st Aid for Public Safety: Several workgroup members and 6 law enforcement officers attended the Mental Health 1st Aid for Public Safety day-long training taught by Craig Putz of Family and Children's Center. Workgroup members in attendance felt that the training was very beneficial. One of the big concerns expressed by law enforcement officers was the lack of viable alternatives for law enforcement when responding to a call involving a potentially?? mentally ill individual. Frustrations arise because the hospital often will not hold the individual who the officers believe is unsafe to be returned to home.

Discussion of the SIM Chart: The majority of the meeting time was spent discussing the SIM Chart and identifying/prioritizing strategies that the Workgroup could recommend that would help Winona County accomplish the goal of the Stepping Up Initiative: reduce the number of people with mental illness in the jail. Workgroup members began by discussing the first (and last) step in the SIM—Community Resources. Following is a summary of the key strategies identified by the workgroup at the Community Resources Intercept:

- Public education about mental health and mental illness in general and with specific reference to resources in the community needs to be increased/improved.
 - Stigma may be preventing people from seeking mental health services; public education about mental health may help reduce stigma, making it OK and acceptable for people to seek treatment
 - NAMI does provide some education; the 1st Aid Mental Health Training is also helpful, but not everyone will/can spend that time to learn
 - Training programs inform a small number of people. The stigma often associated with mental illness must be addressed as a matter of public knowledge
 - The community has a number of mental health resources, but information on them is not widely available (no clearinghouse). CARE and the CJCC COD Committee have both produced directories/resource guides. Circulation and knowledge of their existence is limited, especially as related to the public.
 - Knowledge of the Crisis Response Team (CRT) is limited. Instructions on when the CRT should be called and by whom are lacking. Do the law enforcement agencies and dispatchers have a protocol that helps decide whether to call CRT? Have patrol officers been informed about CRT.
 - Possible strategies include a phone “app” or using 211 or creating an alternative directory. Keeping information current will be a challenge

- HIPAA/Information about mental sharing needs to be demystified
 - This strategy begins at the Community Resources Intercept but stretches across all intercepts
 - Everyone with a role in the criminal justice system should be trained in what HIPAA forbids and what HIPAA permits.
 - The county needs better ways to share the information to which HIPAA does not limit access. Mental health information should be in every criminal justice data base to the extent permitted by HIPAA.
 - Responsible information sharing can improve the client's care and functioning by eliminating duplicative work and honing in on the best possible treatment plan.

- Advance Crisis Planning/Psychiatric Directives should be better utilized
 - Much like people use advance directives and powers of attorney to pre-plan for health or financial decision-making, such alternatives should be available for mental health needs
 - Civil commitment is time consuming, potentially embarrassing and costly.
 - Many people have periods during which they are fully capable of making decisions about their healthcare, including mental health care. By the time they need mental health care, it may be impossible to get their consent.
 - The current Advanced Psychiatric Directive form may be quite lengthy and difficult to understand. Can it be modified locally? Is legislative action necessary?
 -

- The community has no place where a person suffering from temporary mental illness can be held safely and can obtain necessary treatment.
 - The jail is not appropriate unless criminal charges are to be brought.
 - The hospital will not hold people once the immediate crisis has passed.

OTHER UPDATES: Some of the following information was not specifically discussed in the meeting, but is provided as a courtesy to workgroup members to bring them up-to-date on Stepping Up activities since the time of the last workgroup meeting on April 25, 2016.

- **White House Data-Driven Justice Initiative:** On April 26, 2016, the Winona County Board approved the CJCC's request to join the White House Data Driven Justice Initiative. The request initially came from the Stepping Up Workgroup and was forwarded to the Board with approval of the CJCC. The initiative focuses on two populations: (1) superutilizers who are responsible for an outsized portion of jail admits/jail bed days and (2) individuals who pose no risk to the community but who cannot afford to bond out of jail. The goals of the program are to facilitate real-time data sharing; to implement pre-arrest mental health diversion programs; and to implement data-driven risk assessment tools to ensure appropriate pre-trial release decisions.

- **JMHC (Justice and Mental Health Collaboration) Grant:** On May 10, 2016 the Winona County Board signed a resolution authorizing the CJCC to submit a proposal for a federal Justice and Mental Health Collaboration Program grant. The proposal for Integrated Interventions for Safety and Success was submitted to the Bureau of Justice

Assistance on May 17th. Some key highlights of the proposal include “train-the-trainer” CIT training for three individuals; development of a health information exchange for criminal justice applications; secure teleconferencing capabilities for remotely located inmates and telemedicine; a jail intake worker to perform universal bail evaluation and MI/CD screening and 1st Aid Mental Health training for 50 individuals. Awards will likely be announced in late September.

- **Stepping Up Initiative Presentation to County Board:** On May 24, 2016, Kalene gave an update on the work of the Stepping Up Workgroup to the Winona County Board. Several members of the workgroup were also present for the presentation. The update was very well received. The Board seemed particularly interested in the secure video teleconferencing idea mentioned as one of the possible action steps.

Adjournment: 1:05 p.m.

Next Meeting: April 25, 2016 at 11 a.m. at Kensington Banquet Room

Jail & Jail Alternatives Committee
Winona County Criminal Justice Coordinating Council

July 28, 2016

12:00 p.m. at Kensington Cafe

Present: Justin Green, Latrisha Green, Kalene Engel, Mary Olson, Judy Gilow

Call to Order: 12:00 p.m.

Approval of Minutes: Minutes from the previous meeting were approved without changes.

CARE Staff and Team Updates: Due to a restructuring in the grant funding for all MN OJP re-entry grantees, the current CARE grant will end one quarter early (September 30, 2016) and the remaining funding will be returned to the OJP. This applies to all grantees, not just the Winona CARE Program. The funds will then be re-distributed among the grantees that are following evidence-based practices (Winona, included) following an application process. If approved, the grant funding will continue for an additional two years. Currently, there are 46 active clients, with half of those being Level 3 (intensive case management) clients. Kalene and John Otis (intern) are working on compiling data.

Stepping Up Initiative Workgroup: The Stepping Up Workgroup met just prior to the Jail & Jail Alternatives Committee. The group identified 8 major goals, with proposed strategies under each of the goals. In general, the goals are as follows:

1. Appropriate training for everyone in the system;
2. Community awareness of mental illness
3. Appropriate housing
4. Improved information sharing about the criminal justice involved individual
5. Adequate access to mental health treatment resources (mental health services)
6. Adequate funding for mental health services
7. Early identification of mental health issues and referrals
8. Facilitate individual's participation in/navigation of the system

Housing (transitional, juvenile and other): Justin and Kalene attended the Winona Housing Association's meeting on July 25, 2016 and gave a brief presentation on the need for additional housing opportunities in Winona for criminal-justice involved individuals. They made some promising contacts with Winona area landlords who are potentially interested in providing such housing. Justin had another meeting the following day with a landlord's representative. Justin will continue to follow-up on this issue, including possibly seeking grant funding to secure the services of a consultant to conduct a feasibility study.

Adjourn: 12:25 p.m.

Next Meeting: August 25, 2016 at noon at Kensington Banquet Room

Jail & Jail Alternatives Committee
Winona County Criminal Justice Coordinating Council
August 25, 2016
Noon at Kensington Banquet Room

Present: Justin Green, Latrisha Green, Kalene Engel, Mary Olson, Judy Gilow, Marie Kovecsi, Don Cratchy, Krysta Lenzi, Ben Klinger

Call to Order: 11:00 a.m.

Approval of Minutes: Minutes from the previous meeting were approved without changes.

CARE Update: Latrisha is working on the CARE Grant application, which is due this Friday. The program components will remain intact with the addition of the implementation of the Carey Guides. Funds are being requested for two more years of operation. Currently, there are 40 individuals participating in Levels 1-3 of the program. Kalene is working with an intern to compile outcome data. Krysta will be working on a research project involving CARE during her internship.

Committee Recommendations for NIC Jail & Justice System Assessment: A team from the National Institute of Corrections will be on-site in Winona on September 7-9th to conduct a Justice System Assessment. In preparation for the visit, the committee discussed its recommendations for justice system improvement. The top four recommendations are as follows:

1. **Transitional Housing:** There is an ongoing need for transitional housing for inmates exiting correctional facilities. This has been extensively researched and discussed at the workgroup level and efforts are currently underway by a small workgroup to partner with area landlords to expand housing opportunities.
2. **Increased Technology:** The jail and justice system would benefit from increased use of technology, including (a) telemedicine/teleconferencing to increase programming/conferencing opportunities for jail inmates; (b) health information exchange and to allow for expanded sharing of information about justice-related individuals, resulting in more individualized services; (c) integrated data systems to streamline delivery of services and collection/exchange of data.
3. **Specialized Programming and Space in the Jail to Provide those Services:** (Same as recommendation from Stepping Up Workgroup). There is not enough space in the current jail to provide adequate programming for mental health and other services. Moreover, inmates need to be held in Winona to receive the benefit of the programs that have already been created (CARE, employment, other in-jail programs) and those that will be developed in the future. Programming is disrupted when inmates are transported to jails in other counties due to overflow/licensing issues.
4. **Case Manager/Service Coordinator:** There is a need for a social work-type position in the jail to provide case management type services to pre-trial individuals, which would free up the re-entry coordinator to provide re-entry services. Currently the reentry coordinator is trying to fulfill multiple roles, but there is a need for additional personnel to provide adequate staffing.

Adjourn: 1:00 p.m.

Next Meeting: September 29, 2016 at noon at Kensington Banquet Room

Jail & Jail Alternatives Committee
Winona County Criminal Justice Coordinating Council
September 29, 2016
Noon at Kensington Banquet Room

Present: Present: Latrisha Green, Kalene Engel, Judy Gilow, Marie Kovecsi, Krysta Lenzi, Ben Klinger, Helen Newell, Michael Kuehn

Call to Order: 12:00 a.m.

Approval of Minutes: Minutes from the previous meeting were approved without changes.

MN OJP Community Justice Reinvestment Grant: The Minnesota Office of Justice Programs is seeking applications for its Community Justice Reinvestment Grant. Proposals are due by October 31, 2016. One year grants are expected to range from \$75,000 to \$100,000 with up to \$475,000 being awarded statewide. Funding is available to support the following programs:

- Chemical dependency and mental health treatment programs;
- Programs that improve supervision
- Pretrial and precharge supervision programs,
- Programs to reduce recidivism of controlled substances, offenders on probation or supervised release or participating in drug courts,
- Support local participation in drug court initiatives approved by the Judicial Council.

Kalene encouraged members to review the application at

<https://dps.mn.gov/divisions/ojp/grants/Documents/CJR%20RFPFinalf.pdf> and notify her of any suggestions for a proposal.

JMHC Grant Update: County Administrator Fritz checked the status of the grant just prior to the meeting and it was still listed as pending. NOTE, on morning after the meeting, Mr. Fritz received an e-mail from the Office of Justice Programs indicating that the proposal had been selected for funding!

CARE Update:

- **Receipt of New Grant Award:** CARE was selected to receive \$200,000 for an additional two years of funding from the Minnesota Office of Justice Programs. The CARE Grant program has been continuously funded by the OJP since 2009, except for a few week period of time in between grants. Latrisha met with the OJP Grant Manager just prior to the committee meeting. The OJP is pleased with the progress of the program, including the results, but is concerned about sustainability. The Grant Manager wanted to make it clear that grants were intended to be used as seed money to initiate promising, evidenced based programs. It is not intended as a long term funding stream. Rather, the expectation is that the recipient agency will recognize the value of programs that meet or exceed goals (such as the CARE Program) and integrate that program into its justice system and funding. In short, the OJP would like to see more buy-in from the

communities in which they are investing. Sustainability will be one of the main focuses of the new grant (assuming it is accepted by the County Board). The start date for the new grant is supposed to be October 1, 2016. Under the grant proposal, the program will be expanded to add a part-time case aide to help with data collections, clerical tasks and communication with other justice system professionals, leaving the case manager more time to do screenings, assessments, referrals and case management. The case manager position time was decreased to 32 hours per week to fit within budget constraints. In addition to sustainability, another main focus will be to integrate the Department of Corrections into the continuum of services—which is another area of concern of the Office of Justice of Programs.

- **Data/Results:** Latrisha provided a handout and discussed data which was collected on the grant which ended 9/30/16. All of the goals of the grant were met. Midway through the grant term, the three tiers for CARE Program involvement were established. Therefore, the data tracking for the three tiers did not start until late in the third quarter of the grant. By way of review, the three tiers of the program are as follows:
 - **Level 1: Early Screening & Referrals:** Candidates who respond positively to the CARE Introduction letter and offer of GAIN-SS screening meet with the CARE Coordinator in the jail. The CARE Coordinator administers the GAIN-SS and provides the results of the screening (usually during the same meeting). The CARE Coordinator talks about the GAIN-SS results and educates the candidate on the CARE Program, providing the candidate with referrals for further mental health or chemical dependency assessment and treatment.
 - **Level 2: Rapid Release Planning:** Candidates who are interested in discussing additional areas of concern outside of those covered by the GAIN-SS have a more in-depth interview with the CARE Coordinator, typically right after the Level 1 discussion (time allowing). During the interview, the CARE Coordinator takes information from the GAIN-SS and uses motivational interviewing to elicit other client-identified concerns. The coordinator discusses possible resources and makes referrals to those resources by way of a word-processed release plan which is delivered to the client within a day or two of the meeting.
 - **Level 3: Extended Case Management:** At level three, the CARE Coordinator administers the ORAS-CSST (Community Supervision Screening Tool) to determine the candidates level of risk. High-risk candidates who are interested in further involvement with the CARE Program (including ongoing case management and CARE funding) are eligible for extended case management. Level 3 clients are asked to further explore with the CARE Coordinator (and later the CARE Team) barriers to re-entry. With input from the CARE Team, a case plan is developed for the CARE client. The CARE Coordinator provides ongoing case management for that client as they work on their plan.
- **Intern Project:** Krysta is conducting a research project which involves taking closer “magnifying view” glass of the 911 intercept of the Sequential Intercept Map. She will be talking to law enforcement officers to review the process of how the police respond to

mental health incidences. Her project will involve a literature review which will include both evidence based approaches and “what other jurisdictions are doing.”

Stepping Up Workgroup Update: The workgroup met just prior to the Jail & Jail Alternatives Committee Meeting and discussed (1) the NAMI-MN Criminal Justice Award which will be presented to the CJCC in early November; (2) the National Institute of Corrections Jail & Justice System Assessment Town Hall Meeting; and (3) area mental health training and other activities.

Strategic Planning: Although the CJCC typically holds a Strategic Planning Session in October, this year’s session will be delayed until after CJCC members receive and review the NIC report on the Jail and Justice System Assessment, which is expected to be received by the first week in October.

Other: The Community Services Advisory Board is currently meeting four times per year but is in the process of reviewing its charge and purpose.

Adjourn: 1:00 p.m.

Next Meeting: October 27, 2016 at noon at Kensington Banquet Room



Winona County

CARE Program

Community Assessment and Reintegration

Level 1-3 July 2014 - Sept 2016

66% of all screened presented a mental health need
 70.6% of all screened presented a chemical dependency need
 91.6% of all screened received other referral
 100% of all screened received referrals

MI/CD Screening & Referrals

Referral Type:	
Mental Illness	95
Chemical Dependency	101
Other	131
Total Screened	143

CARE Clients Per Quarter								
Quarter	I	II	III	IV	V	VI	VII	VIII
Candidates at Quarter Start	*	*	*	72	118	171	71	97
Level One	*	*	*	9	4	7	0	2
Level Two	*	*	*	3	4	5	4	3
Level Three	27	5	8	4	8	22	5	5
Total Participants	*	*	*	16	16	34	9	10

* GAIN SS use, and Level One and Two tracking started in late Quarter 3

Average Jail Bed Days of Level Three Clients

Client Status	Pre-CARE	During-CARE	Post-CARE
Closed	110.2	41.2	34.4
Current Client	159.9	54.1	0
Completed	116.9	12.9	3.1

Total Jail Bed Days	8506	2734	1731
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Total Participants	Closed	Current*	Completed
	59	12	15

*Client has not yet completed or been closed

Total Bookings	Pre CARE	During CARE	Post CARE
497	383	76	38

**Criminal Justice Coordinating Council
Jail & Jail Alternatives Committee
October 27, 2016 at noon
Kensington Banquet Room**

Present: Amy Moe, Mary Olson, Marie Kovesci, Don Cratchy, Helen Newell, Latrisha Green, Krysta Lenzi, Ben Klinger, Bridget Klinger, Judy Gilow, Kalene Engel

Minutes by: Kalene Engel

Welcome & Call to Order: 12:05 a.m.

Approve Minutes from last meeting: Approved without changes.

Jail Programming Update: Chris Dembiac is no longer with Express, so his classes are not occurring. Mary is finishing up the third week of the Gateway Program. She started with three clients but is down to one. The final week of the program is individual counseling. Despite Common Ground's efforts at reaching out to judges, probation and others, they have not been receiving a lot of referrals. Ben is attempting to set up a meeting with the judges. On a probation violation, the judge could order the person to stay in jail for up to 90 days or complete the Gateway Program. Also, in order to complete the Gateway Program, the inmate must be given some release conditions. Successful completion of the Gateway Program should reduce the individual's risk, which should affect release conditions. Kalene suggested the possibility of a preformatted Order or language for the Gateway Program. WSU nursing students are putting together a Parenting Class for jail inmates. The jail nurse expressed an interest in possibly teaching the class. Females are being held at the jail. Don Cratchy is teaching a program called Connections, which is funded by CARE. The program is geared towards inmates who are in the precontemplative stage to help them understand how they got where they are, where they want to go and how they are going to get there. Anyone in the annex can attend as long as a CARE participant is involved. The class is taught on Thursday mornings, while the Gateway Program takes place on Thursday afternoons. This was done to better accommodate STS inmates who are concerned about missing workdays. Unfortunately, only in the inmates in the Annex can take advantage of both programs.

CARE Staff & Team Updates: Latrisha recently submitted the last CARE Grant report. Over 8 quarters of the grant, there were 18 graduates Level 3 who completed all their CARE goals. Those graduates reduced their LSCMI scores by an average of 7-10 points. Forty-eight individuals made some progress on their goals but did not complete all of them. For the next grant, there will be some changes in the terminology for clients. In fact, with the addition of a Jail Intake Worker (JIW) through the JMHC Grant (if accepted), the Level 1 and 2 clients may not exist. That is because the JIW will be handling Intercept 1 (of the Sequential Intercept Model) work. Once Latrisha undergoes mandatory training on the Carey Guides at the end of November, the multidisciplinary team may be reconfigured. For now, the team meetings are suspended. The Resource Mapping that was done by the WSU students and GIS is available on the Winona County website. Latrisha is in discussions with experts to have the map converted to a phone app.

Stepping Up Initiative Workgroup Update:

- **Solomon's Song:** Helen spoke with a representative from Solomon's Song and they would love to partner with CJCC. Marie, Judy, Helen, Ben and Kalene would like to be included in a meeting to take place after 6 pm when convenient for the Solomon's Song folks.
- **Police Mental Health Collaboration Toolkit:** Judy wanted to make everyone aware that the Bureau of Justice Assistance recently released a Police Mental Health Collaboration Toolkit. <https://csgjusticecenter.org/law-enforcement/posts/bja-launches-police-mental-health-collaboration-toolkit-at-national-conference/>. The City of Winona will be holding 1st Aid Mental Health Training and will have one of their firefighters undergo train-the-trainer training. The WSU Security team is also looking at undergoing mental health training. Ben, two dispatchers and a Winona police officer attended the Wisconsin Negotiators Association Conference. Ben is looking at going to the Basic Negotiator's School.

Homeless Center: A citizen's group spearheaded by Cynthia Dozier is looking at establishing a homeless center in a local church. Current plans include a 10 chair (reclining chair) warming center available from 9:00 p.m. until 8:00 a.m. Several tasks need to be completed to make this happen including creating a community board, creating policies and procedures and establishing a volunteer base to staff the center.

Adjourned: 1:07 p.m.

Next Meeting: December 29, 2016 at noon at Kensington Banquet Room

Jail & Jail Alternatives Committee
November 24, 2016

The Jail and Jail Alternatives Committee did not meet in November of 2016. The next meeting of the Committee is December 29, 2016 at noon in the Kensington Banquet Room.

**Criminal Justice Coordinating Council
Jail & Jail Alternatives Committee
December 29, 2016 at noon
Kensington Banquet Room**

Present: Michael Kuehn, Latrisha Green, Ben Klinger, Marie Kovesci, Jessica Shattuck, Justin Green, Helen Newell, Judy Gilow, Kalene Engel

Minutes by: Kalene Engel

Welcome & Call to Order: 12:05 a.m.

Approve Minutes from last meeting (October): Approved without changes.

CARE Update:

- **2016 Grant:** Although the new CARE grant was awarded in September and approved by the Winona County Board in early November, the grant has not yet been formally accepted, much less implemented. Without formal acceptance, there can be no payments issued to Winona County. The holdup to acceptance appears to be getting the correct answer from someone in administration or finance to a question in E-grants. Additionally, the new position created by the grant is set up to be managed by Express (as is the case with the current CARE Coordinator), but little or no progress has been made on filling that position.
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- **Program Updates:** There are 30 clients receiving case management services. All of them have housing and most are employed or actively seeking employment. As the CARE Program has morphed and changed, the CARE team component that was originally envisioned is no longer appropriate to assist the Coordinator manage the program. Instead, the Coordinator has established a different team to support the re-entry of inmates returning to the community. This team is comprised of people who are working with and/or providing services to the client, such as the Jail Program Coordinator, CARE Coordinator, Jail Intake Worker (once hired), Drug Court Probation Officer, and others who are working with the individual. Krysta (intern) has completed her research project on mapping the 911 procedures from the initial call to jail entry. Her report will be shared with the Committee. A new intern, Ryan Moen, will be starting shortly.

JMHC: Up until today, Kalene has been unable to access the Federal grant management software or grant manager because she is not a Winona County employee. It appears as though the Dept. of Justice is willing to make an exception to authorize her to have access. Unfortunately, as with the CARE grant, because she was not given access to the grant management software, not much progress has been made on implementation of the JMHC Grant. There are four main components to the grant: (1) teleconferencing capabilities between Winona, Houston and Wabasha jails; (2) mental health training including Crisis Intervention Training and 1st Aid for Mental Health training; (3) a health information exchange to share information about inmates with mental health issues; (4) hiring of a jail intake worker. Kalene has tentatively set

up a presentation by the teleconferencing expert for January 10th at noon, but needs confirmation from County Administration that they will attend. Additionally, a human resources mapping meeting was held on December 7, 2016 to map the pre-trial workflow from arrest to first appearance. The first technical assistance provider call was held on December 5th. Committee members agreed that the Stepping Up Workgroup should be the oversight task force for the JMHC Grant, since it is that workgroup out of which the need for the grant (and strategies used) developed.

Report/Data for the Winona County Board: At the last CJCC meeting, County Administrator Ken Fritz requested that the CJCC consider making an educational presentation to the County Board on the criminal justice system, including how the jail fits into the system. He also requested data that could help the County Board with the jail issue. On behalf of the Jail & Jail Alternatives Committee, Justin offered to have the committee prepare the presentation and look into the data question. Members recommended that both the SIM chart created by the Stepping Up Workgroup and the “seven decision points chart” referenced in the jail study report be incorporated into the presentation. Another recommendation was to incorporate different data charts following the seven decision points and to attempt, where possible, to attach dollar figures to items. Because of the complexity of the process and possible monotony in simply describing it, the group decided to prepare a “scenario-based” presentation wherein different scenarios would be presented and charted through the system. The scenarios would be “true to life” situations which are commonly encountered in the system. The Powerpoint presentation could be embedded with video clips to demonstrate different components of the process. Latrisha offered to head up a workgroup on the issue. She will work with Ben and others to prepare an outline of scenarios prior to the first meeting of the workgroup, which will be on January 9th at 3pm in the Kensington Banquet Room. Members also agreed that it was appropriate for Kalene to reach out individually to Commissioners to provide some baseline information about the criminal justice process in Winona County.

Homeless Center: The Winona Warming Shelter is scheduled to open soon. A training session for volunteers will be held on Tuesday, January 10 at 630 PM in the Center site at Community Bible Church on E. 3rd Street

Adjourned: 1:07 p.m.

Next Meeting: January 26, 2017 at noon at Kensington Banquet Room