

# **San Joaquin County Sheriff's Office Operational Efforts to Assist Subjects with Mental Illness**

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**SHERIFF STEVE MOORE**

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# Purpose

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- The purpose of this presentation is to explain the comprehensive strategies the Sheriff's Office employs to deliver quality service to county residents
- Our mission statement proclaims residents shall be treated with dignity, respect, and compassion while relying on community partnerships to deliver the highest level of service
- And, share with you the Sheriff's Office commitment to assisting those with mental illness

# Mission Statement of the San Joaquin Sheriff's Office

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- The San Joaquin County Sheriff's Office is dedicated to delivering quality service through the creation of partnerships with the people we serve.
- All members of this department will carry out their duties and responsibilities in such a manner as to afford dignity, respect and compassion to every individual with whom they come in contact.
- With community partnerships as our foundation, we are driven by goals to enhance the quality of life, investigating problems as well as incidents, seeking solutions, and fostering a sense of security in communities and individuals. We nurture public trust by holding ourselves to the highest standards of performance and ethics.

# Statements of San Joaquin County Behavioral Health Services

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## **Mission**

- The mission of San Joaquin County Behavioral Health Services is to partner with the community to provide integrated, culturally and linguistically competent mental health and substance abuse services to meet the prevention, intervention, treatment and recovery needs of San Joaquin County residents.

## **Vision**

- The vision of San Joaquin County Behavioral Health Services is to collaborate as a resilient team exploring changes, sharing ideas, striving to empower consumers, families, volunteers and care providers toward building hope, addressing disparities, and fostering wellness and recovery through individual strength-based treatment.

## **Values**

- The personal commitment of every individual contributes to the overall success and integrity of the organization, creating a caring, positive, fiscally responsible and productive environment.

# Mission Statement of National Alliance on Mental Illness (NAMI)

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NAMI recognizes that the key concepts of recovery, resiliency and support are essential to improving the wellness and quality of life of all persons affected by mental illness. Mental illnesses should not be an obstacle to a full and meaningful life for persons who live with them.

NAMI will advocate at all levels to ensure that all persons affected by mental illness receive the services that they need and deserve, in a timely fashion.

# San Joaquin Sheriff's Office Policy

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418.3 Deputy considerations and responsibilities: Any deputy responding to or handling a call involving a suspected or actual mentally disabled individual or "5150" commitment should carefully consider the following:

- (a) Any available information which might assist in determining the cause and nature of the mental illness or developmental disabilities.
- (b) Conflict resolution and de-escalation techniques for potentially dangerous situations involving mentally disabled persons.
- (c) Appropriate language usage when interacting with mentally disabled persons;
- (d) If circumstances permit, alternatives to lethal force when interacting with potentially dangerous mentally disabled persons
- (e) Community resources which may be readily available to assist with the mentally disabled individual(s)

# Patrol Response

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## TRAINING

### **1. 11550(A) of the Health & Safety Code training**

- Dozens of deputies have received 24 hours of training to determine if people are under the influence of a controlled substance
- Important because an expert is necessary to determine if subject is “high” on drugs versus symptoms/behaviors being caused by mental illness
- The results of the evaluation determines whether someone is transported to the jail for booking or to Mental Health Services for an evaluation

# Patrol Response Cont'd

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## **TRAINING CONT'D**

### **2. Crisis Intervention Training (CIT)**

- 32 or 40 hours of training
- Topics: symptoms/behaviors of mentally ill, developmentally disabled, Traumatic Brain Injury (TBI), medications used to treat mental illness, suicide prevention, nonviolent intervention, legal issues, and community resources
- CIT trained deputies can respond to a crisis anywhere in the county

# Patrol Response Cont'd

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## **TRAINING CONT'D**

### **3. Tactical Communications**

- 24 hours of training for department instructors, 2 hours of training every 2 years for deputies
- Topics: diffuse conflict when encountering hostile, uncooperative/emotionally upset people
- Designed to make contacts with Law Enforcement Officials positive, reduce complaints and reduce escalation into higher levels of force

# Patrol Response Cont'd

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## TRAINING CONT'D

### **4. Critical Incident Stress Management (CISM) Training**

- 8 hours of training
- Crisis Incident Stress (CIS)= physical/psychological response to events that provoke strong emotions
- Topics: coping skills identify grief, identify CIS

# Patrol Response Cont'd

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## TRAINING CONT'D

### **5. Hostage Negotiation Team (HNT)**

- 40 hours of training initially, updates as needed, team training 6 plus times a year
- Skills: crisis negotiations, de-escalation of situations/subjects in crisis, threat assessment

### **6. Peer Support**

- Department volunteers to counsel peers, can also use skills in contacts with the public
- Skills: identification of people in crisis, suicide intervention/prevention, de-escalation of crisis

# Patrol Response Cont'd

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## COMMUNITY RESOURCES

### **7. Crisis Community Response Team (CCRT)**

SJC Behavioral Health Services team, available 7 days a week, 0700-2300 hours, 468-8686

- CCRT responds to calls from mental health consumers, family members of consumers, and the community
- CCRT also accepts referrals from: Law enforcement, community agencies, hospitals and board and care staff

# Patrol Response Cont'd

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## COMMUNITY RESOURCES CONT'D

- CCRT puts the emphasis on early intervention and education
- Deputies have their brochures to hand out to the public
- CCRT are summoned when a person does not meet the criteria for a 72 hour evaluation under Welfare and Institutions Code 5150, but is obviously in crisis and exceeds the resources available on scene
- Behavioral Health Services is in the early stages of implementing 3 Mobile Crisis Support Teams (MCST) to supplement behavioral health services in the community. It is planned to have a dedicated team for law enforcement and justice referrals

# Patrol Response Cont'd

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## COMMUNITY RESOURCES CONT'D

### 8. Warm-Line

- 24/7/365 a year by SJC Behavioral Health Services, telephone support line 468-3585
- SJSO can refer individuals to support line
- Support line staffed by trained mental health outreach workers who are either mental health service consumers or family members of individuals with mental health illness

# Patrol Response Cont'd

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## RISK MITIGATION

### **9. Premise Hazards “Prem Hazard” (The address can be run for prior calls for service)**

- Behaviors (not diagnoses) attached to address so responding units have knowledge of past history at the location.
- Knowing a pattern of behavior or the presence of drugs or weapons in the household can aid deputies in crafting an appropriate response to the call for service
- Sheriff's personnel can stage resources designed to minimize injuries and successfully resolve a crisis.
- Example: Man in Mountain House calls patrol regularly to report believing a prowler is in his house (hears noises).
- Example: Woman on Auto Avenue, Stockton who calls in the evening to report the vampire has returned and is throwing rocks at her window.

# Patrol Response Cont'd

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## **RISK MITIGATION CONT'D**

### **10. Common Medication Reference Card**

- Distributed by SJC Behavioral Health Services, 3x5 laminated card.
- Shows generic and brand names of mental health medications used to treat mental illness and include categories: anti-anxiety and sedatives, anti-depressants, anti-psychotics, seizure medications and medications to mitigate side effects
- The cards are a valuable tool which allows deputies who have no psycho-pharmacological training to readily identify mental health related medications

# Patrol Response Cont'd

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## RISK MITIGATION CONT'D

- The presence of certain medications could identify specific health concerns
- The ability to categorize mental health medications can aid an 11550 Health and Safety trained officer in determining if a person is under the influence of drugs or if the individual has mental health challenges

# Patrol Response Cont'd

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## POSSIBLE RESOLUTIONS

### **11. Voluntary Commitment**

- Deputies encourage people to voluntarily speak to staff at Mental Health
- Deputies transport from anywhere in the county to 1212 N. California Street in Stockton for treatment and evaluation

### **12. 5150 Welfare & Institutions Code**

- 72 hour detention for evaluation and treatment upon probable cause=danger to self/others, gravely disabled due to mental illness
- Deputies transport from anywhere in the county to 1212 N. California Street
- Deputy should remove dangerous weapons from individuals meeting the criteria in W & I 5150

# Patrol Response Cont'd

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## POSSIBLE RESOLUTIONS CONT'D

### **13. Seeking mental health commitments over incarceration**

- If minor offense occurs (vandalism, disturbing the peace, etc) Deputy can seek voluntary or 5150 W&I commitment rather than incarceration.
- Community better served if mentally ill go to Mental Health instead of jail as their mental health problems are the reason patrol was called to respond.

### **14. Booking into jail**

- When subject commits serious crime, Deputy requests psych evaluation through Correctional Officer at jail, also notifies staff of any suicide concerns.
- Verbally notifies Correctional Officer, makes appropriate notification into CAD history, documents in report.

# Custody Response

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## DEMOGRAPHICS:

- **1.** Average daily population (ADP) of San Joaquin County Jail is 1420 inmates.
- **2.** 45% are under some type of psychiatric care; medication, psychiatric visits or under observation in our Sheltered or Medical housing units.
- **3.** Care is provided for inmates at our facility on a constant basis; we offer services 24 hours a day, seven days a week.

# Custody Response Cont'd

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## ARRIVAL TO THE JAIL:

4. When an individual arrives at pre-book, the pre-book officer will ask a series of questions to include:
- Are you currently under the care of a doctor for medical or psychiatric reasons?
  - Are you currently taking any medications?
  - Have you ever been told you are developmentally disabled?
  - Are you a client of Valley Mount Regional Center? Do you have a case manager?
  - Have you ever attempted suicide?
  - Do you feel like harming yourself now?
  - Determining Veteran's status

# Custody Response Cont'd

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## ARRIVAL TO THE JAIL CONT'D

5. If yes is answered to any of the questions, our psychiatric staff will be notified.
6. If the individual states they feel like harming themselves they will be placed in:
  - Booking safety cell, or
  - Transported to Medical Housing Observation or Ward Rooms for further observation as deemed necessary by our psychiatric staff.

# Custody Response Cont'd

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## **ARRIVAL TO THE JAIL CONT'D**

7. When notified, psychiatric staff comes to booking and completes an assessment on the individual:
  - Necessary calls are made for persons with prior mental health history and/or currently taking medication.
  - Booking nurse contacts mental health to confirm mental health history
  - Psychiatric team members perform an evaluation and completes a mental health status examination on the individual
  - Appropriate decision made based on the presentation and history of the individual
  - A consultation with the psychiatrist or Chief Mental Health Clinician also occurs
  - All information is reviewed by the psychiatrist and/or Chief Mental Health Clinician
  - Once inmate is housed, an appointment is made with nurse practitioner, Mental Health Clinician, or psychiatrist for follow-up.

# Custody Response Cont'd

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## **SETTING OF MEDICATIONS:**

- 8.** Medications will be set upon confirmation. Verification required as follows:
- Individual's already taking medication and we have verification of that medication (current prescription).
  - History of the individual prior custody history and the psychiatric team is aware of the medications needed: immediate contact with psychiatrist and verbal order is received to set medication.
  - County Mental Health consumers: we contact the department to obtain and verify information. Once completed medications are set.

# Custody Response Cont'd

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## SETTING OF MEDICATIONS CONT'D:

- **9.** The psychiatrist or provider will follow up with the inmate.
- **10.** Medications are set within 24 to 48 hours. Industry standard is five days.
- **11.** If a person is new to the correctional setting and is in need of a medication evaluation, a referral will be made from the psychiatric team. Industry standard five days unless the individual is in crisis and requires immediate care.

# Custody Response Cont'd

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## **TELEMEDICINE:**

- 12.** Medical appointment conducted via a monitor screen in our medical clinic.
  - Allows individuals to be seen faster
  - Doctor and patient are both able to see and hear each other
  - LVN or Psychiatric technician is present in the room to ensure that any order is written down correctly and to answer any questions that the inmate may have after the teleconference is completed
- 13.** Prior to the appointments, the technician contacts the doctor to review all of the individuals that are scheduled to be seen that day.
  - Individuals history and background information regarding prior or current mental health issues discussed

# Custody Response Cont'd

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## TELEMEDICINE CONT'D

- 14.** Inmates housed at the Honor Farm or General Population will be scheduled for the telemedicine doctor.
  - Follow up appointments will usually be done with the telemedicine doctor
- 15.** More serious at risk cases will be seen in person by the provider and/or Dr. Hart.
- 16.** Individuals can request to be seen by placing an inmate request or a referral can come from the psychiatric team based on their assessment/evaluation of the individual, recommendation of the court. (Note: The Honor Farm has triage clinic every Thursday)
  - Psychiatric team will try to see the individual first to obtain any information that may be helpful to the psychiatrist.
  - If a person is a consumer from BHS, CHC attempt to obtain information from them as well to further assist the doctor.

# Custody Response Cont'd

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## **RIESE HEARINGS:**

- 17.** For individuals refusing to take the medication, a Riese Hearing will be set:
- Specifically court ordered and related to mental health medications
  - Usually requested by the public defender and/or Linda Collins the court liaison of BHS
  - The judge will make an order
  - Hearings are typically done on Mondays and Wednesdays at San Joaquin Mental Health Crisis/Psychiatric Health Facility unit (having the hearings here, rather than the actual court house, makes it easier on the individual)
  - As this is still a court hearing, those present are the attorneys, judge and psychiatrists.

# Custody Response Cont'd

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## **RIESE HEARINGS CONT'D**

- 18.** The individual is usually transported over to the Psychiatric Health Facility one or two days in advance to see if they will begin taking their medications while in the unit.
- If the individual continues to refuse they will go before a judge and their case will be presented to determine the need as whether or not to take medication. If the inmate continues to refuse, the judge can order medications be forced while housed at the Psychiatric Health Facility.
  - If the individual is compliant in taking their medications, they will still go through the process to ensure that they remain in agreement with continuing to take their medications.
  - \*\*\*Once an individual returns to jail, there is no guarantee that they will continue to take their medications. S.J. County Jail **does not** force medicate inmates. The inmates are able to refuse and must sign a refusal form.

# Custody Response Cont'd

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## SUPERIOR COURT DEPARTMENT 25:

- 19.** For inmates pending criminal charges and have a psychiatric history:
- Designated specifically for individuals that have psychiatric needs,
  - Usually a judge from another court room or the individual's attorney will make a referral to Department 25.
  - Generally there is some evidence to warrant the need for the case to be heard in this department.

# Custody Response Cont'd

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## **SUPERIOR COURT DEPARTMENT 25 CONT'D**

- 20.** If a person is a known mental health consumer they will usually immediately be assigned to Department 25 (history taken into account) where their mental health needs will be addressed, usually in the form of a 1368 evaluation to determine competency. The 1368 evaluation is ordered by the judge and assigned to two approved mental health doctors to evaluate the individual. A third doctor will be assigned if there is a split decision regarding competency.

# Custody Response Cont'd

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## **SUPERIOR COURT DEPARTMENT 25 CONT'D:**

- 21.** If an individual is found incompetent, an appropriate placement will be determined to attempt to restore the individual's competency. The Community Program Director of SJC Behavioral Health will make the recommendations to the court for the individual to either participate in the CONRep (Conditional Release Program) or be moved to a state hospital.
- 22.** Once a person is found competent they will return to their original court room to address their charges.

# Custody Response Cont'd

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## **RELEASE:**

- 23. Any person who has exhibited and still exhibits mental health issues will either be transported by our transportation deputies to:**
- **San Joaquin Mental Health Crisis on referral by Correctional Health Care,**
  - **Law Enforcement W & I 5150 hold, (when BHS is unwilling to accept the client from the jail), or**
  - **Psychiatric Health Facility (PHF) if meeting the criteria.**
- 24. Correctional Health Care clinicians have the ability to make arrangements with a community based facility, such as Grant House, Bright House, or Mourfield House. Either a family member can deliver the client to the facility, or in some cases the facility has the means to pick the client up at the jail.**

# Custody Response Cont'd

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## RELEASE CONT'D

- **25.** If the individual is stable and connected to the mental health department, the identified case manager and/or clinician is notified regarding release and arrangements are either made for follow up or even possible pick up at the jail upon being released.
- **26.** If a person is not connected, every effort is made to direct the individual to appropriate services through the mental health department.

# IN CONCLUSION

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The San Joaquin County Sheriff's Office is dedicated to delivering the highest possible level of service to the residents of the county, while treating those we encounter with dignity, respect and compassion. We have partnered with other organizations to increase the quality of life for individuals, and constantly evolve in our effort to seek solutions. Our training and skill building is ongoing, as is our commitment to provide comprehensive responses to dynamic issues faced by the people in our community.

# QUESTIONS

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THANK YOU