



County Commissioners Association of Pennsylvania 2016 COUNTY GOVERNMENT PRIORITIES

COMPREHENSIVE BEHAVIORAL HEALTH REFORM

“Declining financial support for programs result in at-risk populations transitioning into the criminal justice system.”

While many county jails have successfully instituted best practices to reduce jail populations or reduce the rate of growth, nearly all report that they still have a fast growing sector of the population that challenges every aspect of their operations: Inmates with mental illness and substance abuse issues.

This trend has a clear and direct correlation to policy changes over the past several years. The commonwealth has closed state hospitals and reduced access to forensic services required for evaluation and treatment. Services in the community have been severely strained by more than a decade of declining state and federal financial support. Homelessness and unemployment have increased because of economic conditions, and veterans returning from service who experience depression, post-traumatic stress and other mental health issues are not accessing treatment. The result in each instance is at-risk populations ultimately transitioning into the criminal justice system.

No comprehensive approach exists to assure that inmates with substance abuse or mental health issues have the supports needed to keep them out of the prison system or to remain out of jail upon release. While there is a system in place to treat drug and alcohol problems, that system, just like the mental health services system, is strained financially and services are not provided in a coordinated fashion that would assure diversion before booking

an offender into a county jail, or that would assure a plan of care post-release.

The County Commissioners Association of Pennsylvania (CCAP) believes that a series of policy changes can materially lessen the problem of constantly incarcerating and releasing the same inmates. Numerous studies have shown that treating the reasons behind criminal behavior is the most effective way to reduce admissions and readmissions to county jails. Continuity of treatment post-release is an equally critical element, along with policies that encourage efforts to divert inmates and that assure a means of payment for services.

To better define a series of solutions that counties may pursue alone, in concert with other counties, or in partnership with state and federal government, the Association has formed a Comprehensive Behavioral Health Reform Task Force to develop a comprehensive plan examining the following areas:

RAPID RESTORATION OF PUBLIC BENEFITS UPON RELEASE

In Pennsylvania, individuals receiving medical assistance lose their benefits immediately upon incarceration, and restoration of benefits following release can take weeks. However, federal Medicaid rules allow states to suspend, rather than terminate, benefits during the

period of incarceration. Suspension or rapid restoration will allow benefits to be restored at the time of release, ensuring better continuity of treatment, access to medications and therapy services, and improved chances against recidivating. Pennsylvania has cited administrative difficulties in changing existing technologies to facilitate suspension rather than termination, but CCAP believes the long-term program benefit of suspension easily exceeds the short-term practical difficulty of technology upgrades.

CREATE THE NECESSARY STRUCTURES FOR INMATE QUALIFICATION FOR HEALTH INSURANCE

CCAP supports changes in law to provide inmates with health care coverage through low-cost benefit programs. CCAP believes such changes will result in both state and county inmates having improved access to health care services, including treatment for addictions and mental illness, even while incarcerated.

DEVELOP DIVERSION PROGRAMS

Strategies that avoid an initial booking into the jail are crucial for reducing the impacts of incarceration on the individual, as well as for assuring direction to treatment services at the point of intercept. Diversion programs, particularly for

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Individuals with mental health and substance abuse problems, can lead to immediate reductions in county inmate populations, and so treatment and support options should be considered first where possible and where public safety remains assured. Diversion also requires local collaboration and cooperation with police and providers to assure that homelessness and unemployment are not drivers for incarceration decisions.

EXPAND CAPACITY FOR DRUG AND ALCOHOL AND MENTAL HEALTH TREATMENT SERVICES WITHIN THE COMMUNITY

Counties' capacity for providing community services are stretched thin, and in most cases there are few if any resources available to assist with the development of effective programs such as re-entry and diversion programs. Recognizing that community services reduce overall system costs for both counties and the commonwealth, CCAP supports commonwealth investment of both financial and technical assistance resources in community programs and services.

ENCOURAGE CRISIS INTERVENTION TRAINING

Local police are often the first to encounter someone who is experiencing a mental health problem and possibly acting out. If law enforcement officers have the training to deescalate and properly redirect individuals to treatment and other supports, jail admissions could be further reduced.

IMPROVE STAFF TRAINING IN JAILS

Mental Health First Aid is a known concept that trains individuals in the most effective techniques for interacting with those experiencing mental health issues. The state Department of Corrections is expanding this training to its correctional facilities staff, and a similar training strategy for counties should be explored, taking into account the staffing challenges presented by having staff out of the jail for training. Further, with jails often last on the list as scarce county resources are triaged at the community level, suicide prevention training is often difficult to obtain given the stress of many years of budget cuts to county mental health administrative systems.

EXPLORE REGIONALIZATION OF CRITICAL SERVICE BEDS

Many individuals languish in county jails and their conditions decline due to the nature of the confinement. Medical models are often more appropriate, especially for seriously mentally ill inmates. Counties are hard pressed to provide services within the jail setting, but may be able to find regional relationships that open up access to Medicaid and other resources. Counties seek opportunities to collaborate with their neighboring counties in the development of these models and urge support from state and federal funding programs.

SERVICES FOR VETERANS

Diversion programs and re-entry services that specialize in the unique needs of veterans must be explored. Although there are veterans specialty courts available in many counties, not all counties have the volume or resources to establish them. A more appropriate approach, though, can be found in other types of direct assistance such as housing with supports for homeless veterans, community-based counseling, and job assistance. Counties seek partnership with the state in developing best practices and in expanding available options.

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