THE STEPPING UP INITIATIVE

Region 6 Behavioral Healthcare

Sarpy County Nebraska

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

Sarpy County, Nebraska
QUARTERLY REPORT
Data from Quarter 2
July 20, 2021

Stepping Up Agenda

1. Welcome and Introductions
2. Data and Strategy Review (Packet)
3. Other/Updates
4. Next Quarterly Meeting Oct. 21, 2021
5. Conclude

Sequential Intercept Model (SIM) Priorities for Change

County Priorities:
1. Plan for a specialized law enforcement response to individuals experiencing a mental health crisis.
2. Explore developing a Crisis Stabilization Center to provide law enforcement and the community with a single point of contact to access mental health services for individuals in crisis, providing an alternative to jail and/or Emergency Departments.
3. Explore building a new jail to expand capacity.

CJ-BH Collaborative Team Priorities:
1. Create a Data Analyst position
2. Implement Familiar Faces Project
3. Enhance Re-entry Planning Efforts; in-reach and warm transitions

Sequential Intercept Model (SIM) PRIORITIES FOR CHANGE (August 2018):
1. Creation of a crisis stabilization center located within and utilized by Sarpy County law enforcement agencies accompanied by a single point of entry phone line/triage service.
2. Transportation
3. Implement utilization of virtual/telehealth crisis response services for jail staff and law enforcement officers in the field.
4. Utilization of mobile crisis response staff as a resource to provide assessment to hospital in Sarpy County.
5. Provide sufficient medications to person at the point of reentry from the jail to the community, as well as access to medication management and follow-up service in the community in a timely manner.
6. Improve data collection and data sharing to identify familiar faces for improved outcomes.
7. Expand space in the jail for needed programming and services.
8. Utilize data as a tool to access needed funding for services, treatment, and support.
9. Expand and increase in-reach services and programs to provide services in the jail at Intercept 3.
10. Create a systematic assessment of an individual's social determinants of health prior to reentry, inclusive of familiar and social supports, housing, transportation, income

Stepping Up Key Measures

GOAL 1: Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail	**GOAL 2:** Shorten the Average Length of Stay for People with a Serious Mental Illness (SMI) in Jail
Numerator: the number of adults booked into the jail with a diagnosed or self-reported SMI during the month	**Numerator**: the monthly average LOS for those *discharged* from jail with a SMI
Denominator: the average daily total population of the jail for the month	**Denominator**: the average daily total population of the jail for the month
Data Source: Sarpy County Jail **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** Data through April 2019 reflects individuals with an MH disorder. Data from May 2019 to current reflect individuals with SMI	**Data Source:** Sarpy County Jail **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** July 2018 – March 2019 used Mental Health Disorder: April 2019 definition changed to SMI
GOAL 3: Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail	**GOAL 4:** Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail
Numerator: the number people who have a Type 1 and/or Type 2 Connections to Care made during their stay in jail - reported during the month they were released from jail	**Numerator**: Number of repeat bookings (regardless of reason for booking)
Denominator: number of all people with a SMI discharged from jail that month	**Denominator**: Total number of bookings
Data Source: Public Defender's Office, Department of Corrections **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** Definition updated January 2021, targets updated May 2021 - Note an individual can be represented in each measure (type 1 and 2) but multiple connections within the same type will only count once.	**Data Source:** Sarpy County Jail **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** Will compare those with SMI and those without a SMI

Stepping Up Key Measures

Definitions

- **SMI (Serious Mental Illness):** Individuals who self-report with (i) Schizophrenia, (ii) Schizoaffective Disorder, (iii) Delusional Disorder, (iv) Bipolar Affective Disorder, (v) Major Depression, and (vi) Obsessive Compulsive Disorder (Self-Report and Diagnosed)
- **Connection to Care/Service Type 1:** Information & Referral; defined as any one of the following:
  - Verbal or written information is shared about a service or program with the client
  - Written contact information about a service or program is shared with the client
- **Connection to Care/Service Type 2:** Linking to Service; defined as any one of the following:
  - Verbal or written communication is received confirming that the client and the agency have been connected
  - Verbal or written communication is received confirming that the client has an appointment
  - The client is aware of the agency and the agency is aware of the client's need for service.
- **Long Acting Injectable (LAI):** LAI antipsychotics are a pharmacologic strategy for treating patients with schizophrenia who relapse due to nonadherence to antipsychotic medication
- **Recidivism –** Refers to a person's relapse into criminal behavior and is measured by criminal acts that result in being "re-booked" into jail within the 12 months of the person's last release date.
- **Mental Health First Aid (MHFA):** is an 8-hour public education training that introduces participants to risk factors and warning signs of mental health problems, builds understanding of the impact, and provides an overview of common treatments. Recertification is required every 3 years.
- **Crisis Intervention Training (CIT):** The Memphis Crisis Intervention Team (CIT) is innovative police based first responder program that has become nationally known as the "Memphis Model" of pre-arrest jail diversion for those in a mental illness crisis. This program provides law enforcement-based crisis intervention training for helping those individuals with mental illness. Involvement in CIT is voluntary and based in the patrol division of the police department. In addition, CIT works in partnership with those in mental health care to provide a system of services that is friendly to the individuals with mental illness, family members, and the police officers.
- **Medication-Assisted Treatment (MAT):** is the use of medications with counseling and behavioral therapies to treat substance use disorders and prevent opioid overdoes.

Data Applications Used:

P1-CAD – This system dispatches Law & Fire agencies of Sarpy County.

LRMS – Law Records Management System for the Law agencies of Sarpy County.

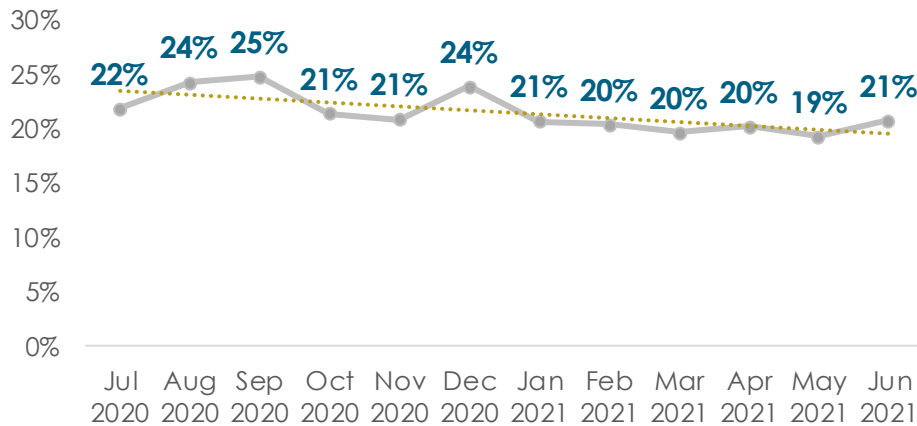ProPhoenix RMS – This will be replacing LRMS for the Law agencies of Sarpy County.

IMACS – Jail booking software used at the Sarpy County Jail.

MH – System used to help track MH type customers.
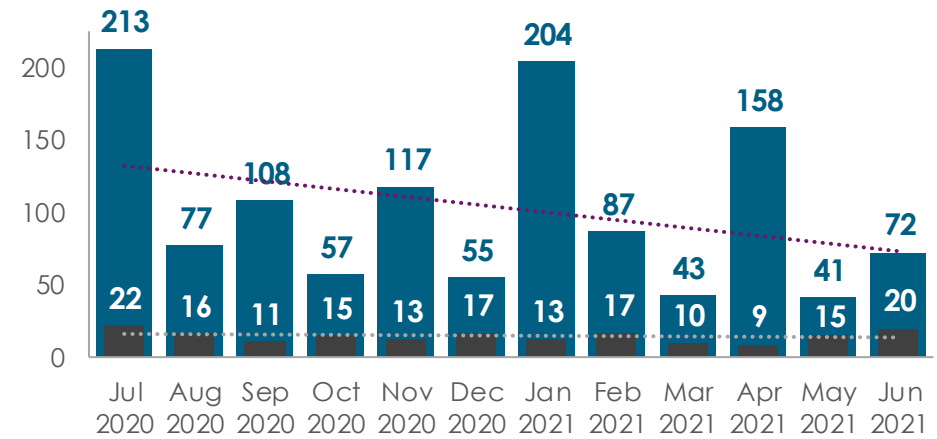
Stepping Up 4 Key Measures

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

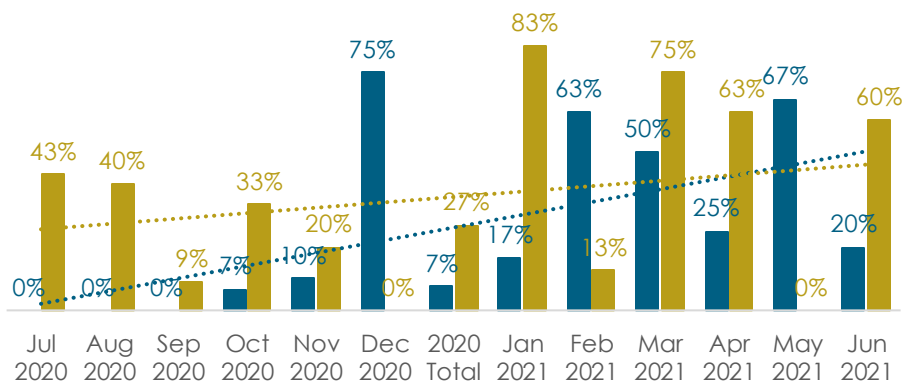Percentage of Average Daily Population of Individuals with a Serious Mental Illness (SMI)

GOAL 2: Shorten the Average Length of Stay for People with a Serious Mental

Avg. Length of Stay for General Population vs. Avg. Length of Stay for Individuals with SMI (in days)
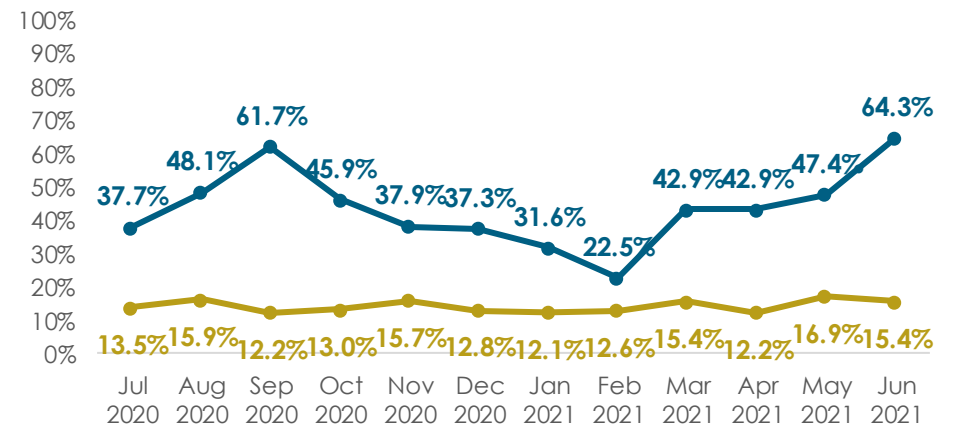

GOAL 3: Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail

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

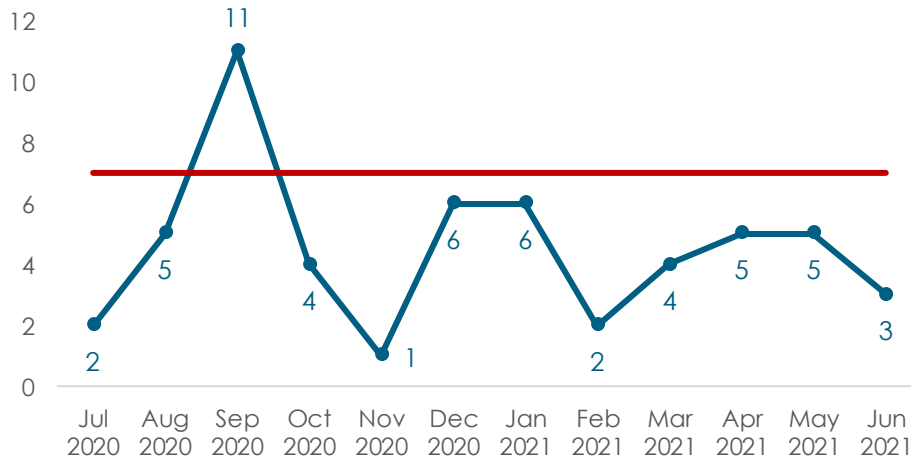### GOAL 4: Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail

Percentage of Repeat Bookings: Individuals with SMI and those without SMI

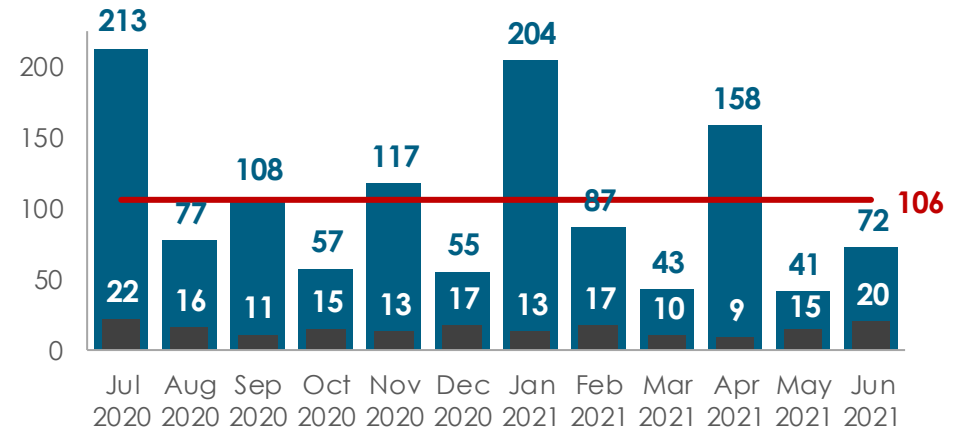## "Set, Measure & Achieve" Targeted Reduction Measures

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

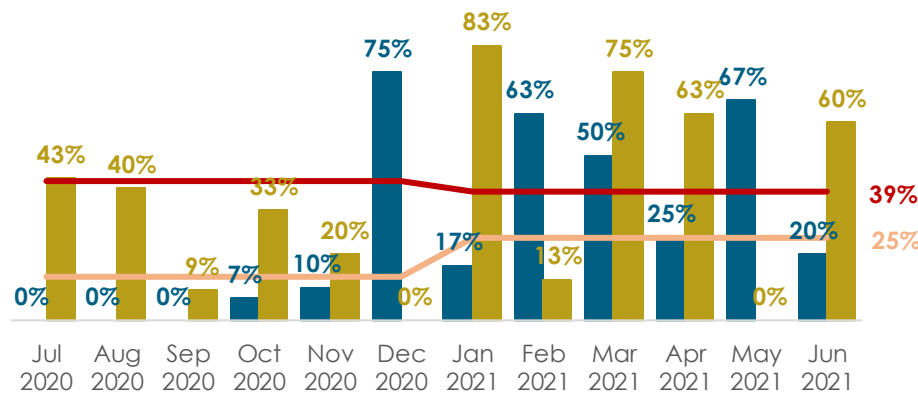SMI Booking into Jail by Month & 2020 Target

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

Avg. Length of Stay for General Population vs. Avg. LOS with SMI (in days) & Target

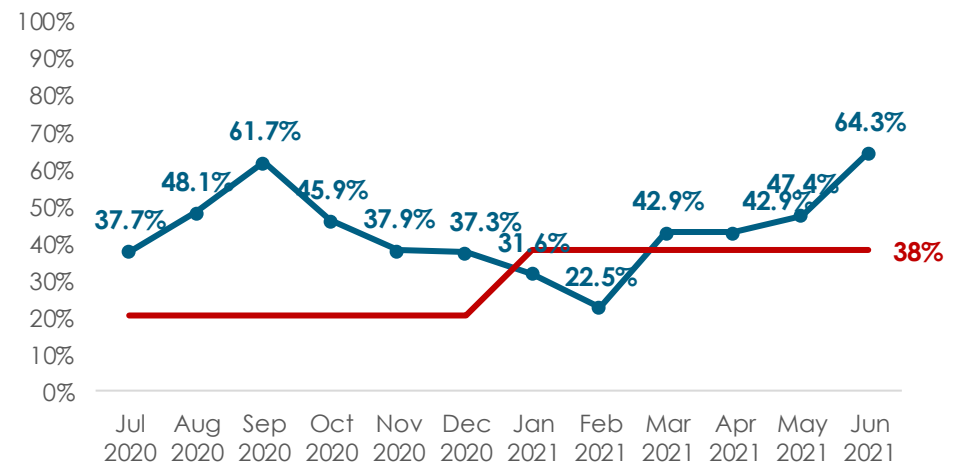
GOAL 3: Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail by 10%.

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

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

Percentage of Repeat Bookings: SMI & Target

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

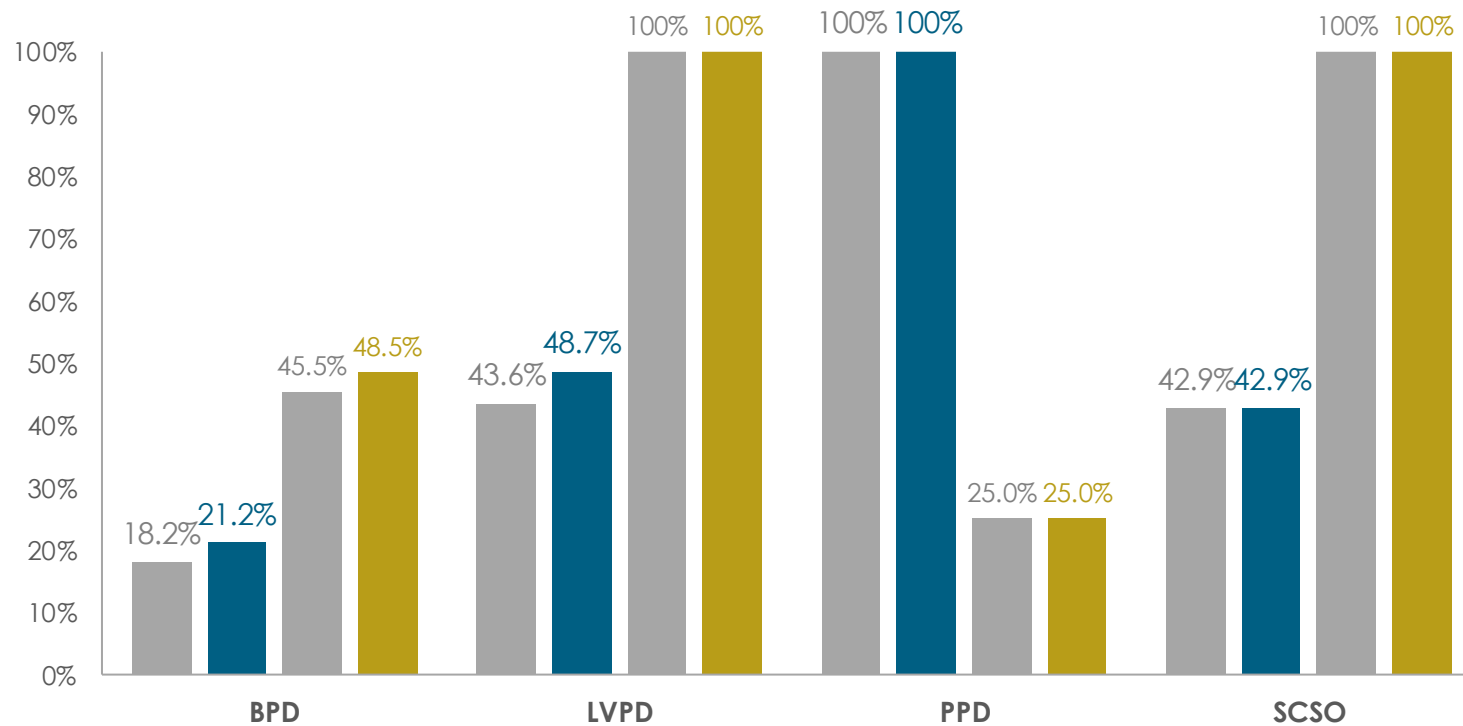| GOAL 1: Reduce the Number of People with a Serious Mental Illness (SMI) Booked into Jail by 10% Annually	GOAL 2: Shorten the ALOS for People with a Serious Mental Illness (SMI) in Jail by 5% (Annually)
Measure: The number of individuals with SMI booked into jail each month (Self-Report) **Data Source:** Sarpy County Jail **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** 8-month average for 2019 was 7.75 SMI bookings per month. A 10% reduction would be 7 bookings per month (2 less each month)	**Numerator**: The monthly ALOS for those *discharged* from jail with a SMI **Denominator:** The average daily total population of the jail for the month **Data Source:** Sarpy County Jail **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** 2019 had 111.5 days ALOS for SMI. A 5% reduction is 105.9 days
GOAL 3: Increase the Percentage of Connection to Care for People with a Serious Mental Illness (SMI) in Jail by 10%	GOAL 4: Lower the Rates of Recidivism for Individuals with a Serious Mental Illness (SMI) in Jail by 5% Annually
Numerator: The number of individuals with a SMI who are represented by the Public Defender's Office who experience an intake into jail that month who are linked to a service via Type 1 or 2 **Denominator**: The number of all people with a SMI who experience intake into jail that month **Of those discharged from jail during the month** **Data Source:** Public Defender's Office, Department of Corrections **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** Definition updated January 2021, targets updated May 2021 Category 1 avg. 28.1% (Jan-Apr 2021) Target = 25% (10% reduction) Category 2 avg. 43.8% (Jan-Apr 2021) Target = 39% (10% reduction)	**Numerator**: The number of repeat bookings (regardless of reason for booking) **Denominator**: The total number of bookings **Data Source:** Sarpy County Jail **Date Provided:** Monthly **Review Frequency:** Monthly **Notes:** 2019 rate was 21.4% for those with an SMI. 5% reduction is 20.3% rate of recidivism (6 less for year, 106 individuals) 2020 avg. 39.9% (all months) Target = 38% (5% reduction)

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

Strategy	Target	Notes/Updates
Objective 1: Each law enforcement agency in Sarpy County will work toward having 100% of sworn officers trained in either CIT, MHFA or both.		
a. Review CIT and MHFA data for each law enforcement agency, develop strategies as needed.		Look at data in Oct. 2021
b. Distribute CIT and MHFA aggregate data with all Law Enforcement agencies.		
c. SCSO will explore having an in-house MHFA trained trainer.	PAUSE	HOLD COVID-19
d. MHFA training will continue to be provided during new hire training at the Sarpy/Douglas County Training Academy.	On-going	
Objective 2: 911 Call Center, County Attorney Attorney's Office, Public Defender's Office and Probation will have 100% of identified staff trained in MHFA or CIT.		
a. Collect and monitor baseline data; develop strategies as needed.	On-going	Look at data in Oct. 2021
Objective 3: Law Enforcement agencies will provide the best response possible to calls involving a mental health related crisis.		
a. Once OpenLattice has been implemented, Rob will re-engage with Sarpy Co LE agencies to increase the number of Crisis Intervention Tracking Forms completed.	PAUSE until OpenLattice has been implemented	
b. Track baseline data on the number of Mobile Crisis Response contacts activated each month by Law Enforcement Agency.	On-going	Look at data in Oct. 2021
Objective 4: Collect baseline data on the number of individuals with SMI who were booked into jail on a misdemeanor charge, by law enforcement agency.		
a. Analyze data and develop strategies as needed. Deep dive as needed to determine if individuals are unique or duplicated.	On-going	Look at data in Oct. 2021

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

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

Percentage of Officers with CIT & MHFA Training: 2021 Q1 & Q2

	Measure: Number with training /Total Officers
	Definitions: Percentage of Law Enforcement Officers (by LE Agency) with CIT and MHFA training
	Data Source: Sgt. Hillabrand SCSO
	Review Frequency: Quarterly

Chart values:
- BPD: 18.2%, 21.2%, 45.5%, 48.5%
- LVPD: 43.6%, 48.7%, 100%, 100%
- PPD: 100%, 100%, 25.0%, 25.0%
- SCSO: 42.9%, 42.9%, 100%, 100%

Analysis:
All law enforcement agencies have 100% sworn officers trained in either CIT or MHFA with the exception of Bellevue Police Department.
Recertification for MHFA is required every 3 years.
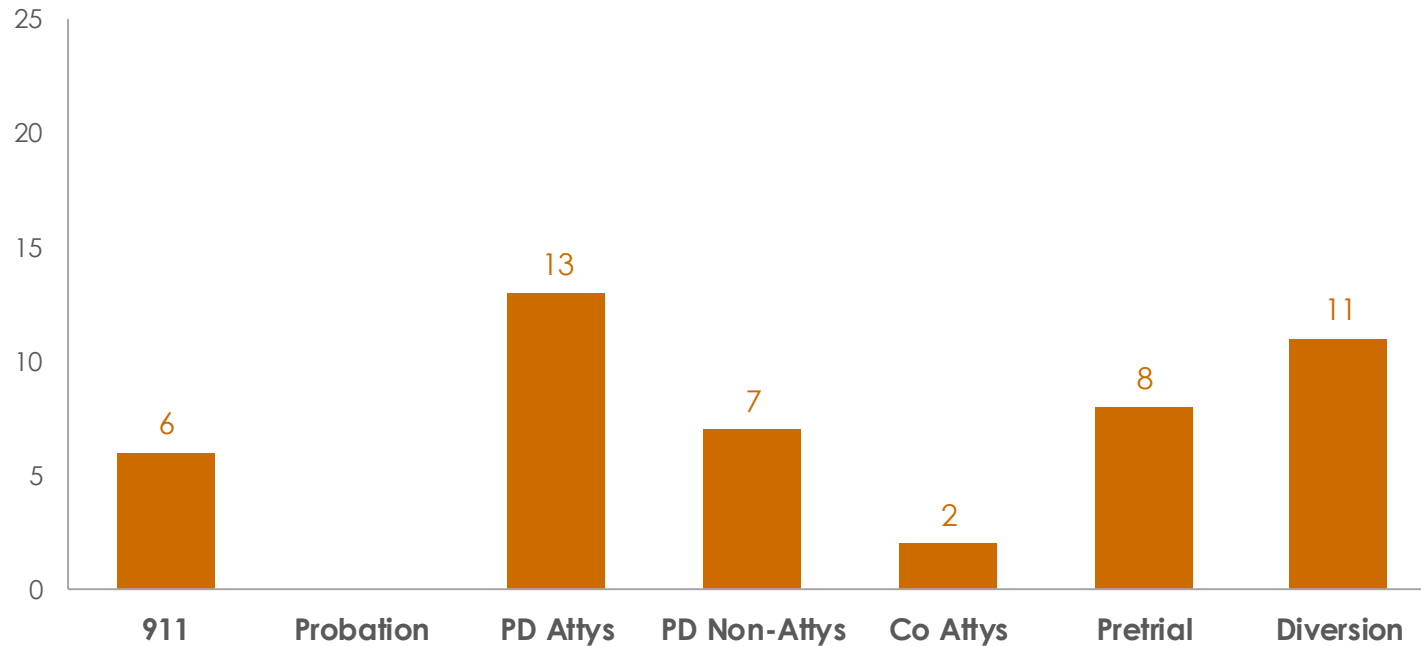CIT Training dates for 2021: May 24 – 28, July 19 – 23, Sept. 20 – 24, Nov. 29 thru Dec. 3
Gray data is for previous quarter compared to current quarter in blue (CIT) and gold (MHFA).

** Data impacted by COVID – 19 as training has been suspended.

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

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

Number of Criminal Justice Stakeholders Trained in CIT and/or MHFA: 2021 Q2

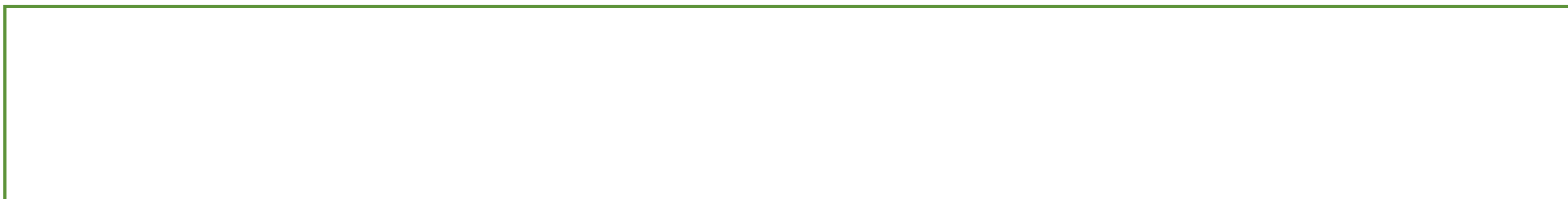|	Measure: Number of Criminal Justice Stakeholders with MHFA and or CIT training / total staff
	Definitions: Number of Criminal Justice Stakeholders with MHFA and/or CIT training
	Data Source: Agency
	Review Frequency: Quarterly

Analysis:
This is point in time data gathered at the end of the period of review.
Recertification for MHFA is required every 3 years.

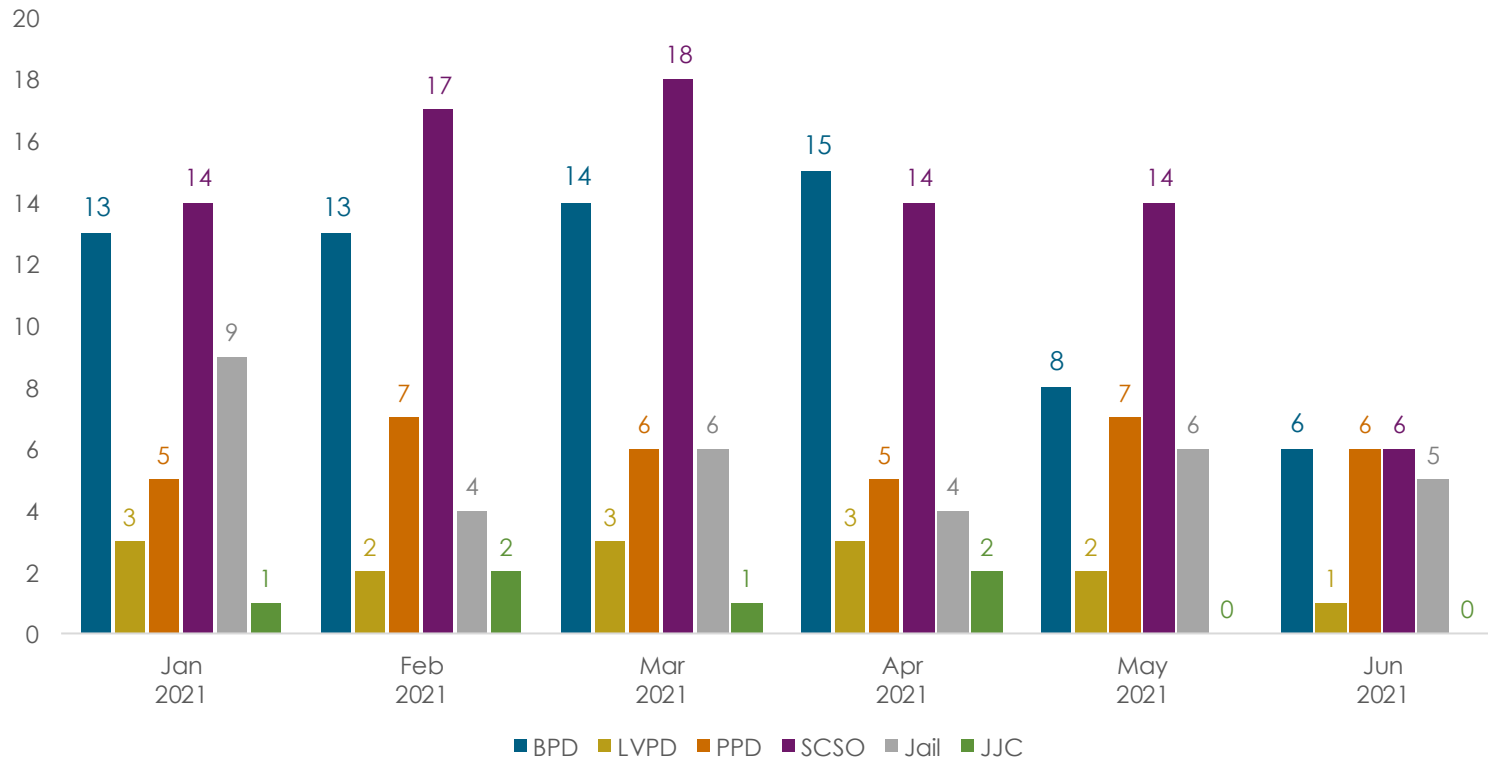|			
911 Call Center:	6/?	Co Attys:	2/4 =50%
Probation Officers:	24/43= 56%	Pretrial:	8/8=100%
PD Attys:	13/14=92.9%	Diversion:	11/11=100%
PD Non-Attys:	7/8=87.5%		

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

Objective 3: Law Enforcement agencies will provide the best response possible to calls involving a mental health related crisis.
Would like to have OPEN Lattice placeholder first then MCR assessment data.

Mobile Crisis Response Assessments by Law Enforcement Agency

Legend: BPD, LVPD, PPD, SCSO, Jail, JJC

	Measure:
	Total MCR interventions by month
	Definitions: Number of MCR interventions by month.
	Data Source: Heartland Family Services Trisha McArthur
	Review Frequency: Quarterly

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

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

Objective 4: Collect baseline data on the number of individuals with SMI who were booked into jail on a misdemeanor charge, by law enforcement agency.

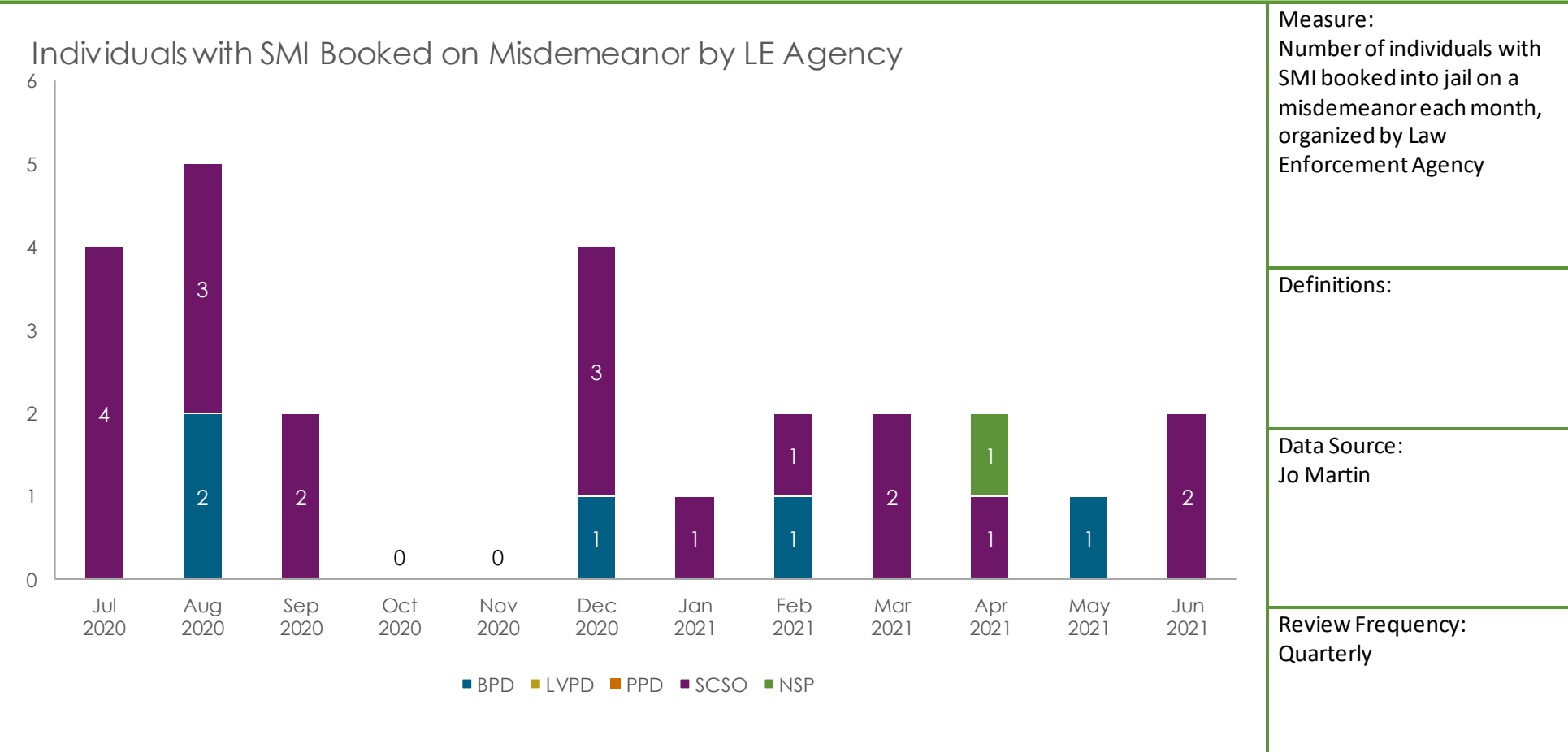|	Measure:
DELETE THIS PAGE	Definitions:
	Data Source: Sgt. Hillabrand SCSO
	Review Frequency:

Analysis:

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

Objective 4: Collect baseline data on the number of individuals with SMI who were booked into jail on a misdemeanor charge, by law enforcement agency.

Individuals with SMI Booked on Misdemeanor by LE Agency

Legend: BPD, LVPD, PPD, SCSO, NSP

	Measure:
	Number of individuals with SMI booked into jail on a misdemeanor each month, organized by Law Enforcement Agency
	Definitions:
	Data Source: Jo Martin
	Review Frequency: Quarterly

Analysis:

These may be unique or repeat bookings/individuals.

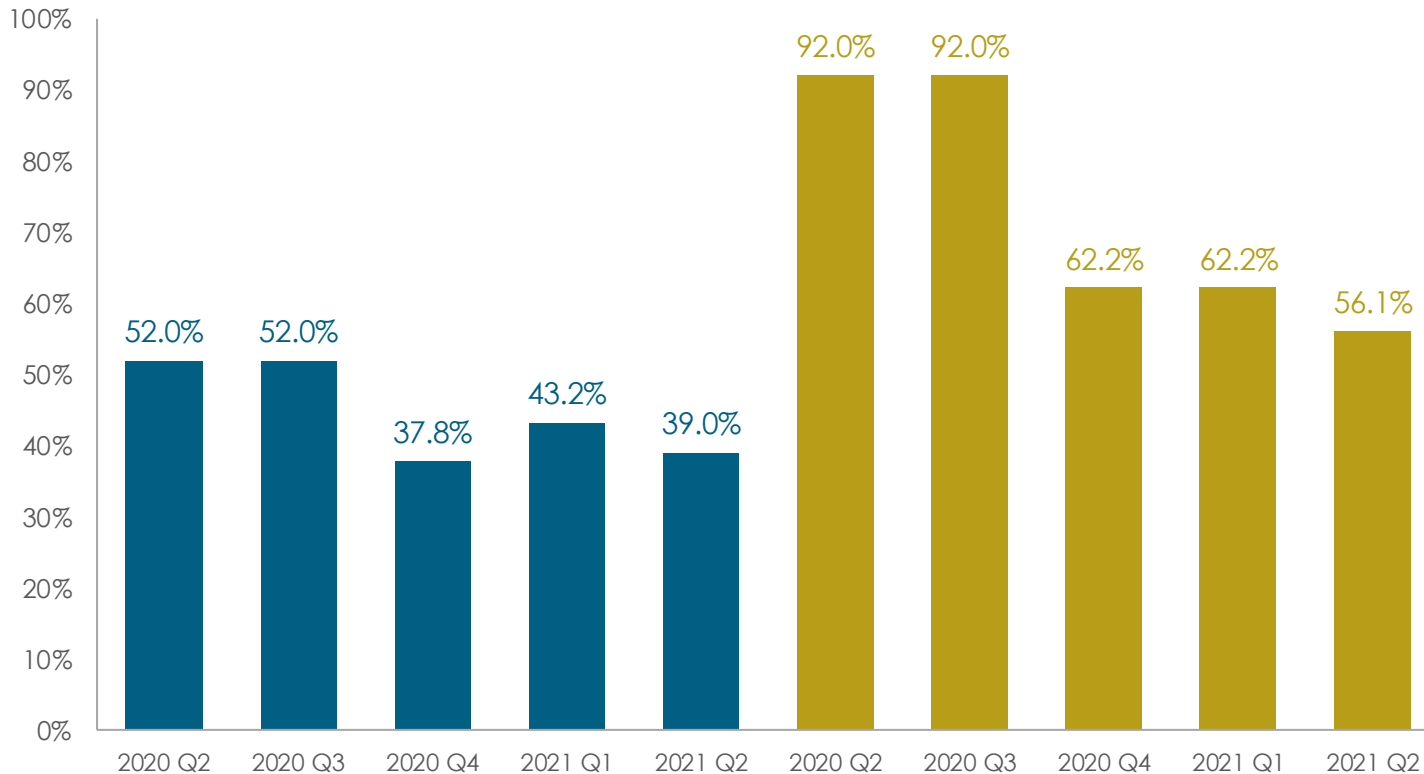April 2021 = First occurrence by Nebraska State Patrol

GOAL 2: Shorten the Average Length of Stay for People with a Serious Mental Illness (SMI) in Jail
   Shorten by 5% or 6 Fewer Days in Jail for Each Person

Strategy	Target	Notes/Updates
Objective 1: Corrections will work to have 100% of Correctional Officers trained in CIT, MHFA or both.		
a. Collect and review baseline data on CO's training.		Using Heartland CIT Training as Douglas Co Jail's CIT was suspended due to COVID. Look at data in Oct. 2021
Objective 2: Collect and analyze Mental Health Diversion data.		
a. Collect and review baseline data; identify opportunities; establish benchmarks/targets		Look at data in Oct. 2021; review targets.
Objective 3: Collect and analyze Pre-Trial (Mental Health) data.		
a. Collect and review baseline data; identify opportunities; establish benchmarks/targets		Look at data in Oct. 2021; review targets.
Objective 4: Utilize best practices and data to drive improvements with Competency to Stand Trial/Competency Restoration (CST/CR).		
a. Form workgroup with POD, CA, Corrections and LRC to identify opportunities to improve communication and flow of information re. CST/CR practices, utilize lessons learned from GAINS Center Technical Assistance.	In-Process	Document has been drafted; next step is seeking approval from agency heads and presiding judges.
b. Collect and review baseline on the number of days individuals are in jail waiting to go to LRC for competency treatment.	On-going	Look at data in Oct. 2021

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

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

Percentage of Correctional Officers with CIT & MHFA Training:

Measure: Number of correctional officers with training / total Correctional Officers	
Definitions: Correctional Officers who have completed CIT and/or MHFA	
Data Source: Sgt. Hillabrand SCSO	
Review Frequency: Quarterly	

Analysis:
This is point in time data gathered at the end of the period of review.
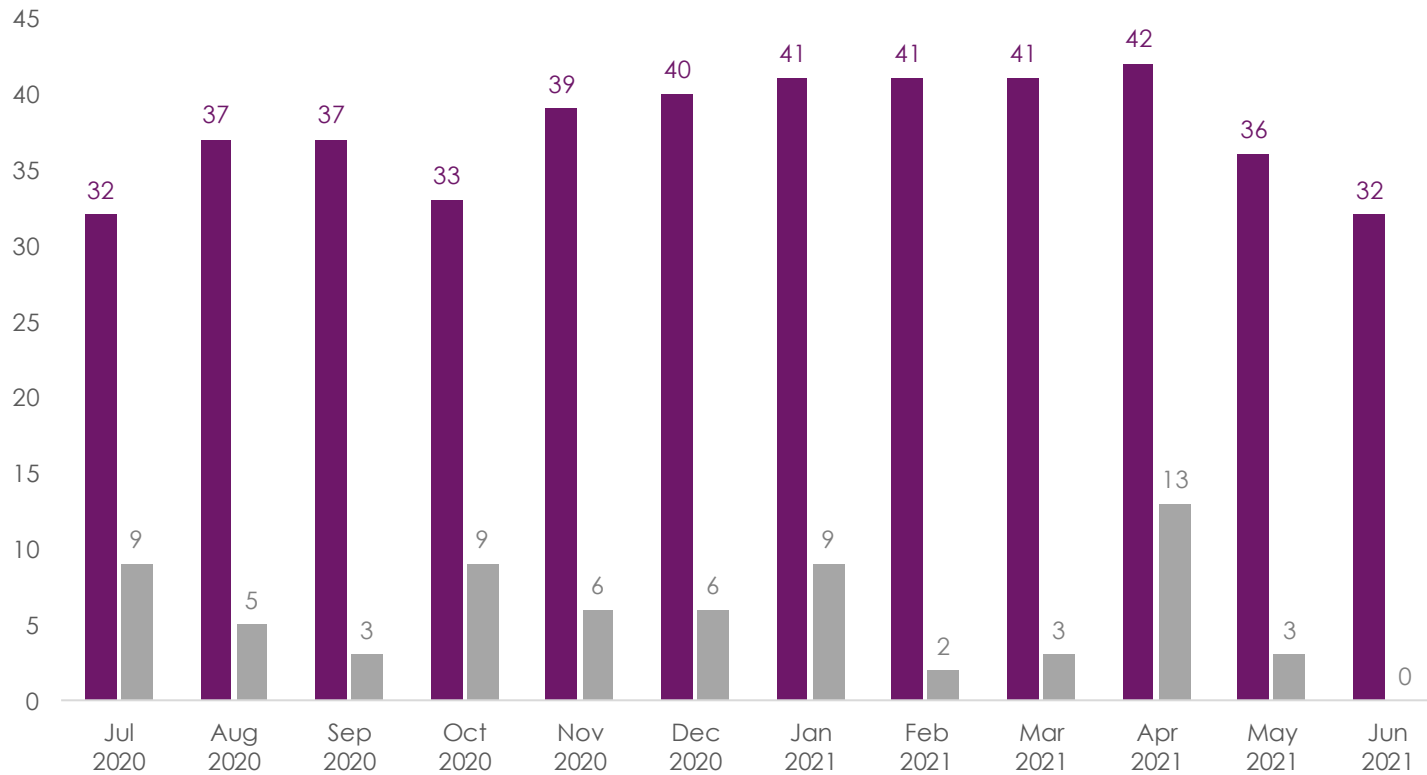Employees who are trained and employed at end of reporting period.

Staff increased from 37 to 41 for 2021 Q2

** This data is impacted by COVID – 19 – training was temporarily suspended

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

Objective 2: Collect and analyze Mental Health Diversion data.

MH Diversion Active Clients & Referrals by Month

Measure:
Mental Health Diversion data organized by total number

Definitions:
Number of consumers active in mental health diversion and number of new referrals by month
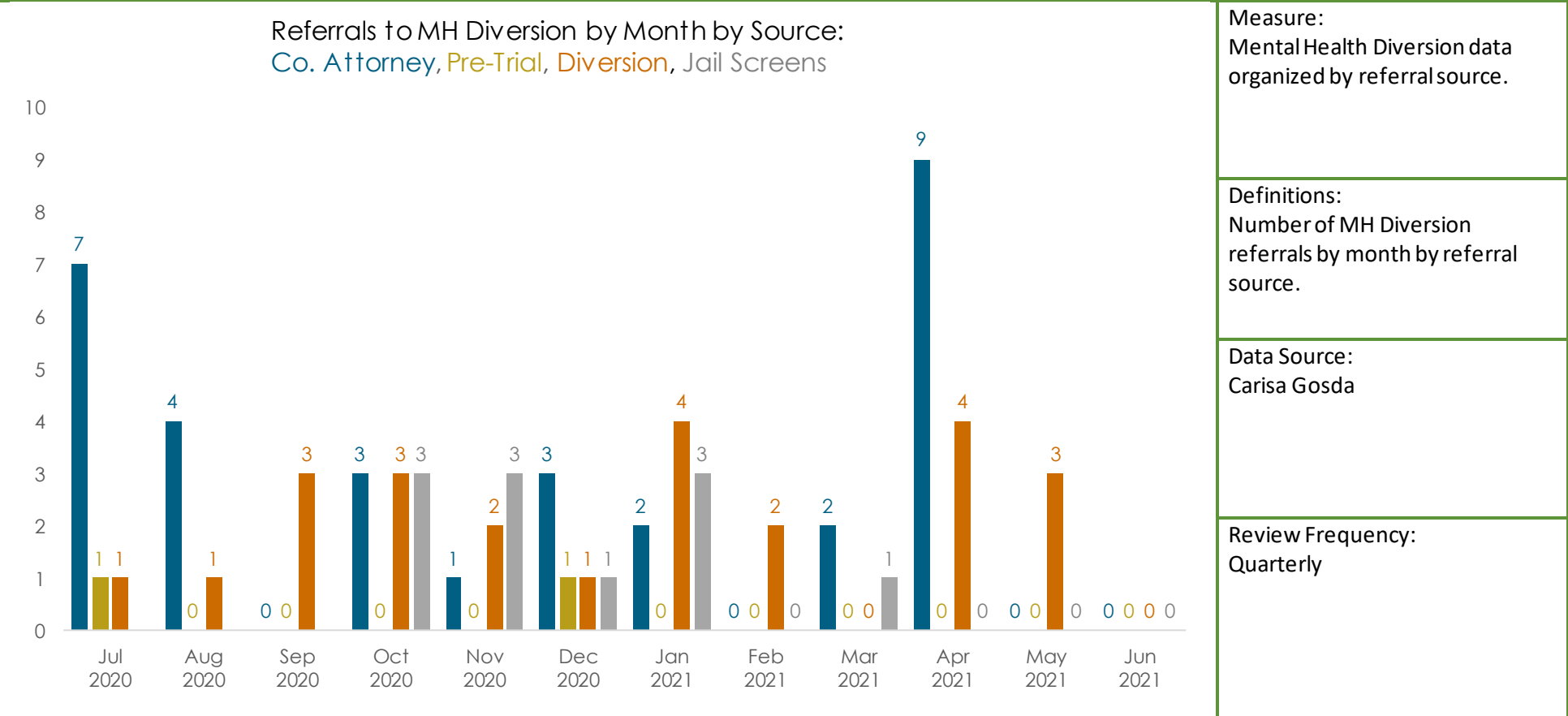
Data Source:
Carisa Gosda

Review Frequency:
Quarterly

Analysis:
The number of active clients had gradually been increasing, but has declined the last two months.

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

Objective 2: Collect and analyze Mental Health Diversion data.

Referrals to MH Diversion by Month by Source:
Co. Attorney, Pre-Trial, Diversion, Jail Screens

Measure:
Mental Health Diversion data organized by referral source.

Definitions:
Number of MH Diversion referrals by month by referral source.

Data Source:
Carisa Gosda

Review Frequency:
Quarterly

Analysis:
The yellow bar=referrals from Ashlie W (Pretrial)

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

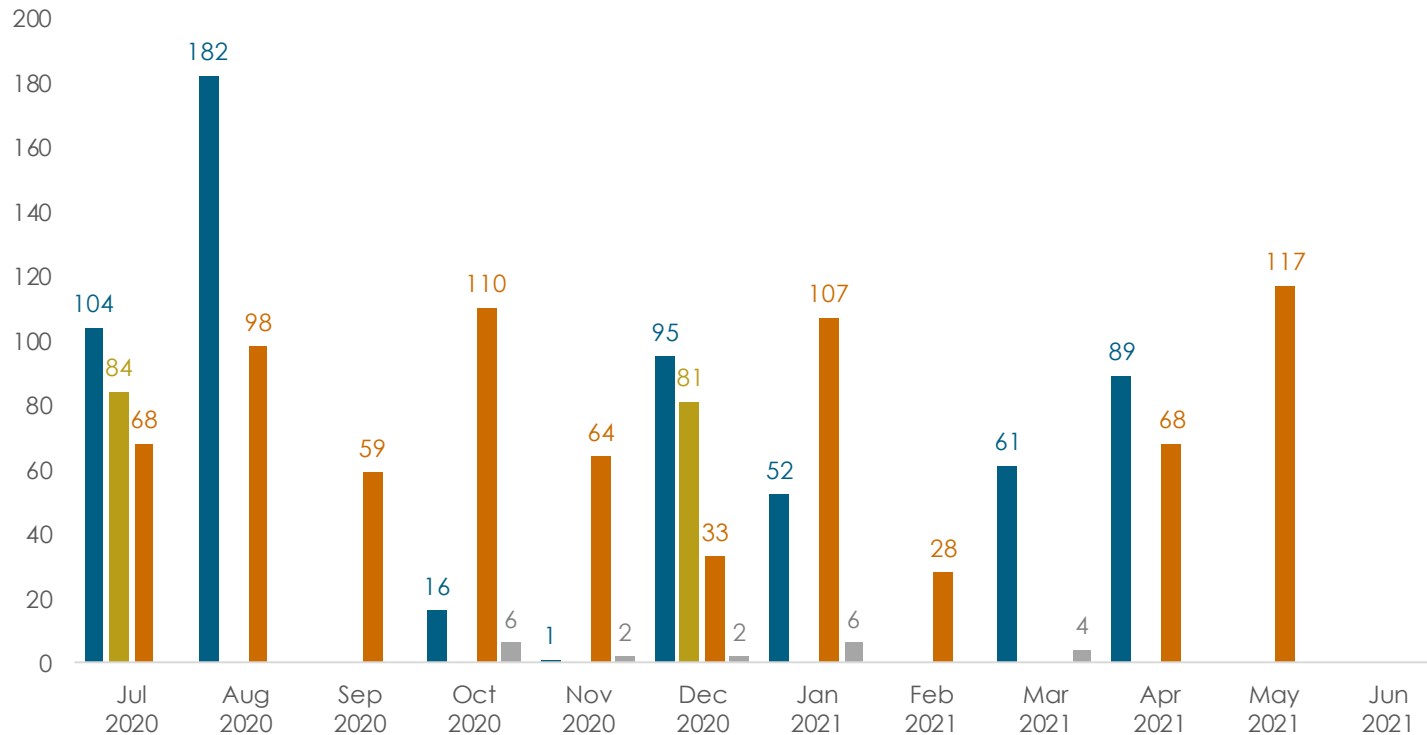| Objective 2: Collect and analyze Mental Health Diversion data. |
|---|

Average Number of Days from Arrest to Referral
Co. Attorney, Pre-Trial, Diversion, Jail Screens

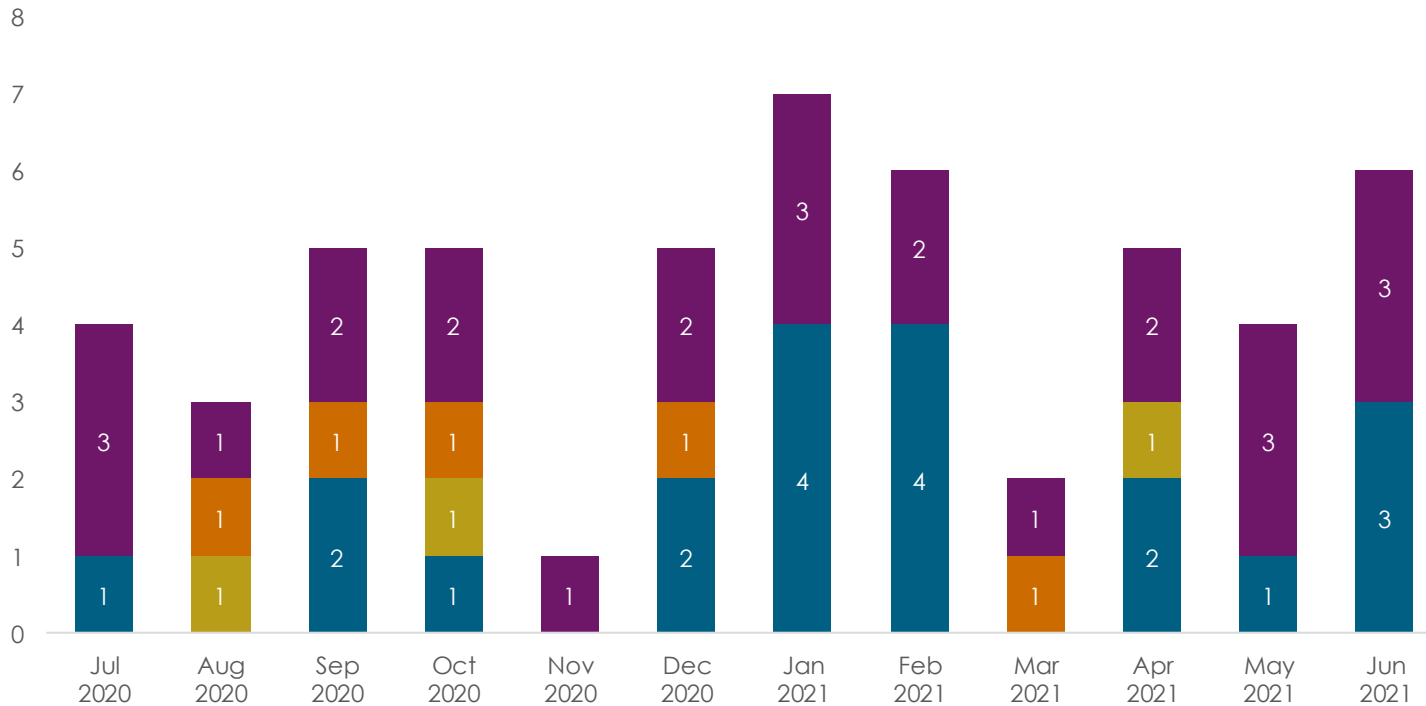|	
Measure:	Mental Health Diversion data organized by category
Definitions:	Number of days from date of arrest to date of referral
Data Source:	Carisa Gosda
Review Frequency:	Quarterly

Analysis:

Oct. 2020: Started jail screenings, individuals are getting connected to MH Diversion much quicker now. If an individual in jail screens positive for a possible mental health disorder, their criminal history is reviewed and if they appear to be a good candidate for MH Diversion, Dean will go into jail and meet with the individual to obtain additional information. This is shared with the County Attorney who reviews and decides if individual is appropriate for MH Diversion. Wellness Court may impact the data at times.

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

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

Mental Health Pretrial Data: Direct Commit, Pretrial to MHCM, Assigned & Remain in Jail-Need to Post Bond, Assigned & Released from Jail (Screened & Placed on MHCM at Bonds/Court)

Measure: Mental Health Pretrial consumers organized by category by month.

Definitions: Mental Health Pretrial consumers by category
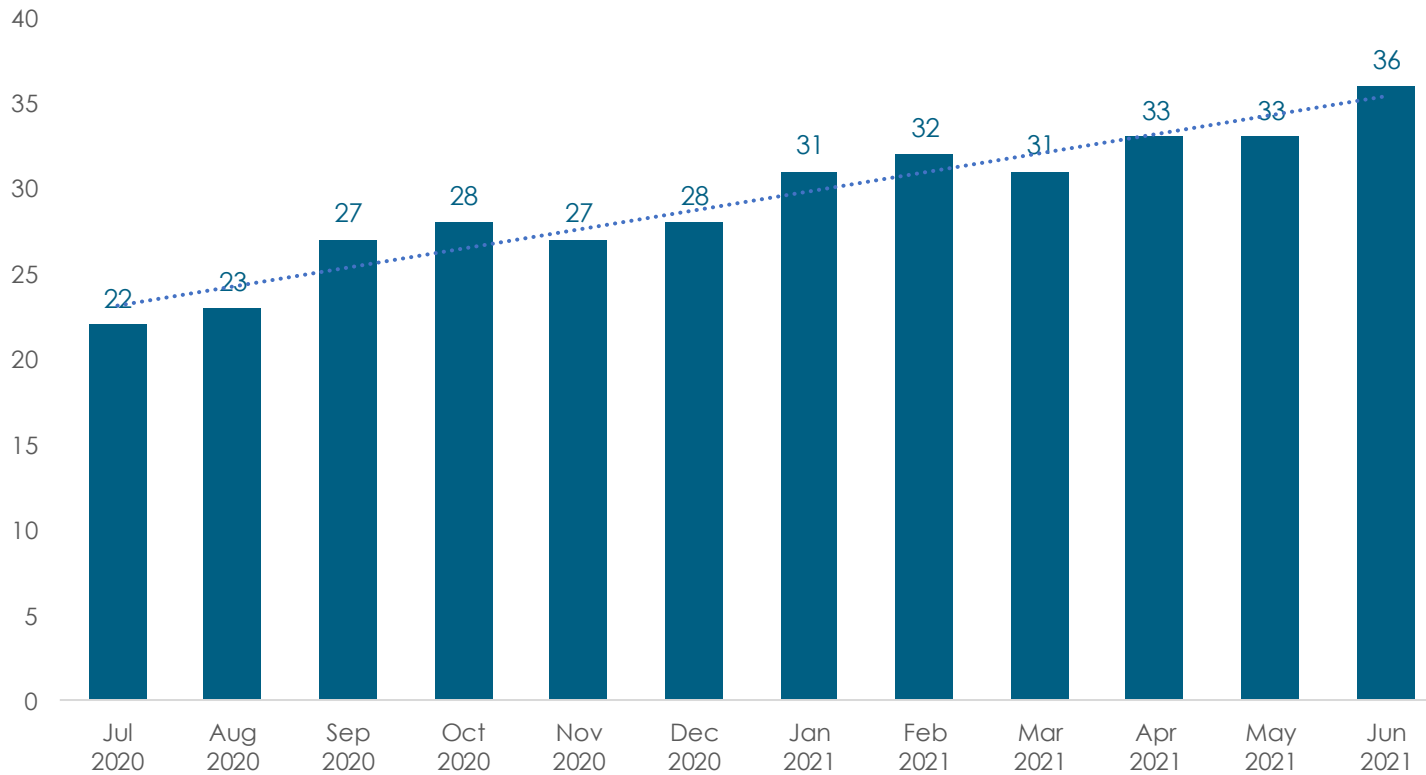
Data Source: Ashlie A. Weisbrodt

Review Frequency: Quarterly

Analysis:

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

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

Mental Health Pretrial Data: Active Clients Participating

Measure:
Number of active clients participating in Mental Health by month

Definitions:
Active clients participating in Mental Health Pretrial each month

Data Source:
Ashlie A. Weisbrodt
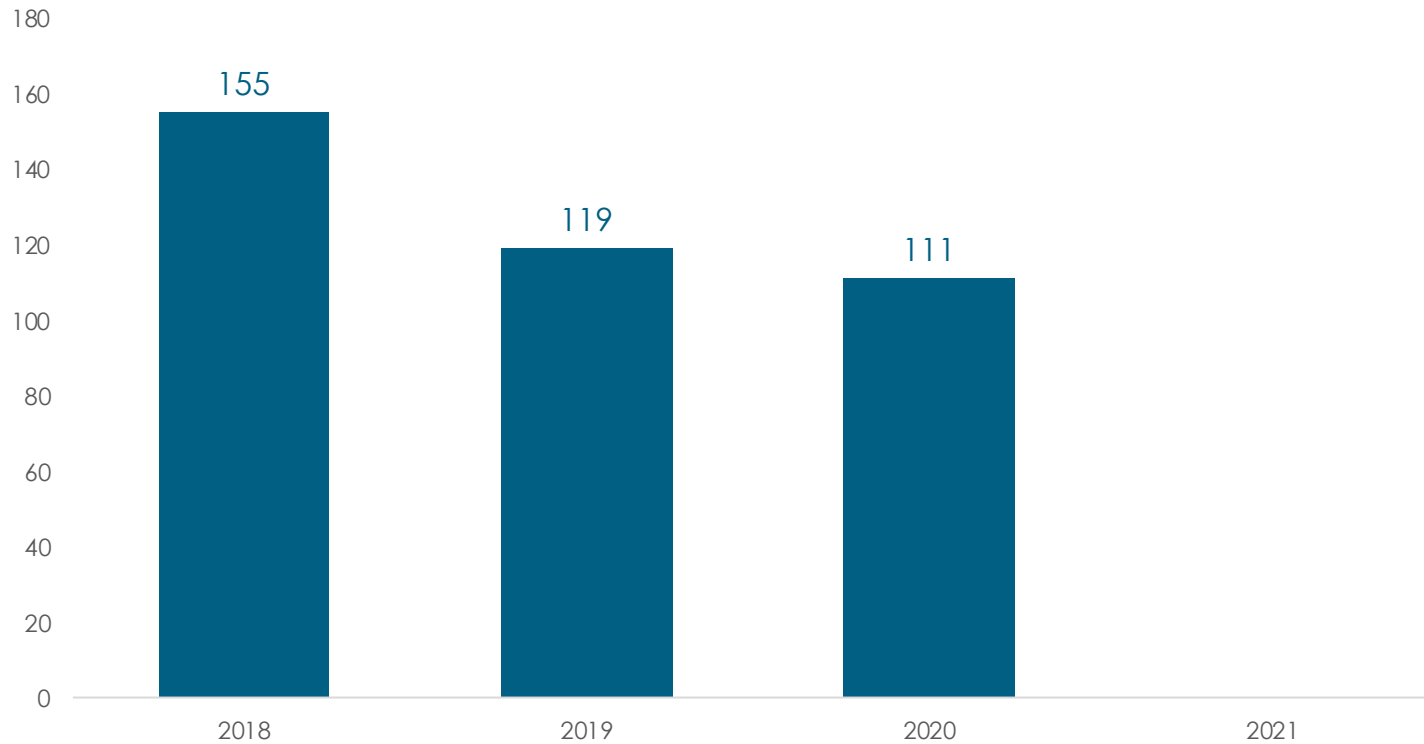
Review Frequency:
Quarterly

Analysis:
The number of active cases has been trending up.

Caseload Capacity is 31-32

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

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

Compentency Restoration: Average days Waiting in Jail for Competency Restoration at LRC

Year	Average days
2018	155
2019	119
2020	111
2021	

Measure:
Total jail days for individuals waiting to receive restorative treatment at LRC, organized by year

Definitions:
The average number of days individuals wait (in jail) to receive competency restoration at LRC.

Data Source:
Jo Martin-Sarpy Co Jail

Review Frequency:
Quarterly

Analysis:
N for each year:
2018: 4, 2019: 4, 2020: 2, 2021: 0
N is for those court ordered in said year, not the year they transferred to LRC.

GOAL 3: Increase the percentage of connection to care for people with a SMI in jail.   **Increase by 10%**
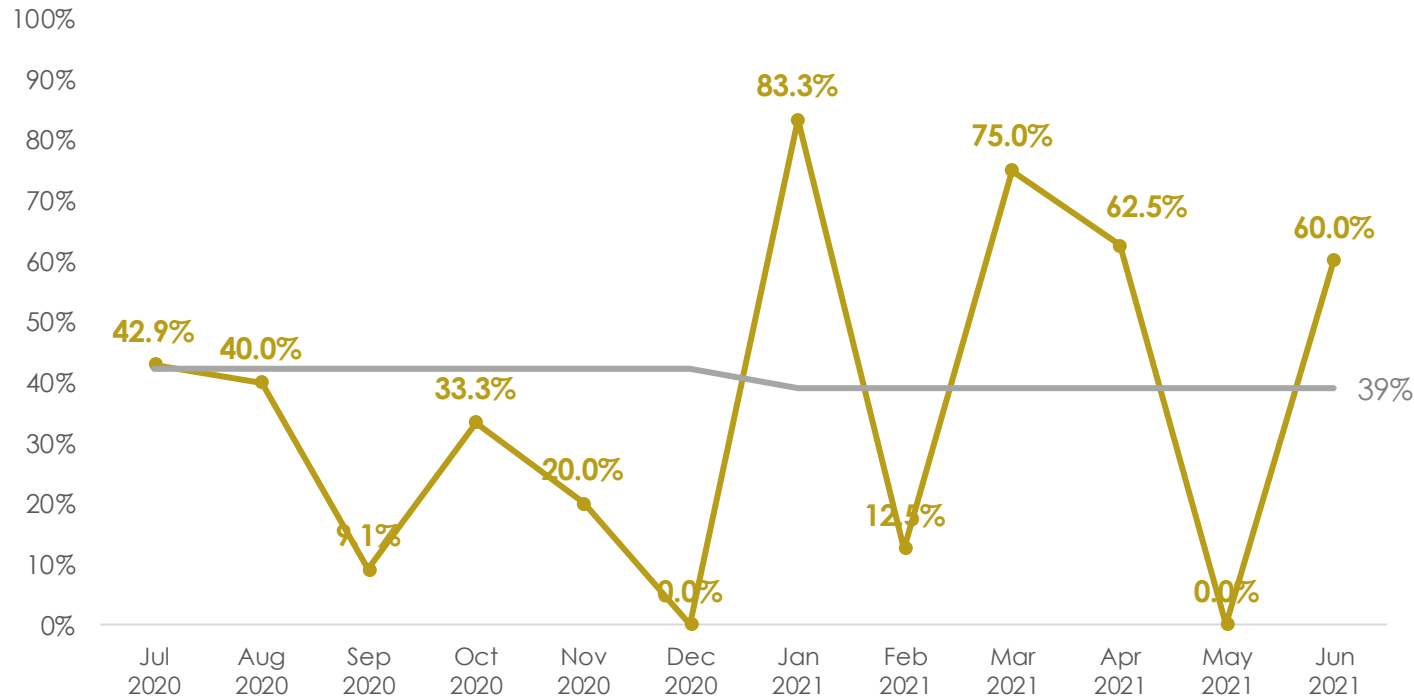
- **Connection to Care/Service Type 1:** Information & Referral; defined as any one of the following:
    - Verbal or written information is shared about a service or program with the client
    - Written contact information about a service or program is shared with the client
- **Connection to Care/Service Type 2:** Linking to Service; defined as any one of the following:
    - Verbal or written communication is received confirming that the client and the agency have been connected
    - Verbal or written communication is received confirming that the client has an appointment
    - The client is aware of the agency and the agency is aware of the client's need for service.

Strategy	Target	Notes/Updates
Objective 1: At least 43% of people with SMI are connected to Type 2 service prior to re-entry.		
a. Collect and monitor data; identify opportunities for improvement; include data from Practicum Students in PD's Office and in Jail.		Look at data in Oct. 2021
Objective 2: At least 14% of people with a SMI who are not connected to type 1 services prior to re-entry are connected to type 1 services prior to re-entry.		
a. Collect and monitor data; identify opportunities for improvement; include data from Practicum Students in PD's Office and in Jail.		Look at data in Oct. 2021
Objective 3: Utilize Long-Acting Injectables (anti-psychotic) when clinically appropriate.		
a. Re-engage discussions with pharmaceutical reps to identify and document the process for accessing the LAI free samples.	Summer 2021	
b. Develop a process for ensuring 100% LAI recipients have a community-based appointment with a prescriber, prior to release.		Will have data once implemented
Objective 4: Partner with BAART to explore opportunities to provide methadone to individuals who were receiving methadone prior to incarceration.		
a. Schedule meeting with BAART to explore opportunities.		Vicki will reschedule meeting
Objective 5: Explore opportunities to use the Daily Arrest Report with specific service providers.		
a. Form a Douglas and Sarpy Co combo workgroup to review Nebraska Revised Statute 38- 2136 to explore aligning NE state statute with HIPAA, as recommended by J.D. Petrila, national consultant.		In-Progress
Objective 6: Collect baseline data to understand the impact of Medicaid expansion with those involved with the criminal justice system.		
a. Collect and review baseline data on the number of Medicaid applications being completed and submitted while individual is incarcerated (Practicum Student, Re-entry and Pre-Trial)		Look at data in Oct. 2021

GOAL 3: Increase the percentage of connection to care for people with an SMI in jail.

Objective 1: At least 43% of people with a SMI are connected to Type 2 services prior to re-entry.

Percentage of Service Type Provided:
Linking to Service (Type 2) & Target

Measure:
Number of SMI discharged individuals linked to service / total number of SMI individuals discharged from jail in the month

Definitions:
Percentage of individuals with an SMI that were linked to service(s).

Data Source:
Shannon Eustice
Ashley Berg

Review Frequency:
Quarterly

Analysis:
** 39% represents an increase of 10% above Sarpy County's baseline of Type 2 connections to care in accordance with the National Stepping Up Initiative's target goal for CY21.
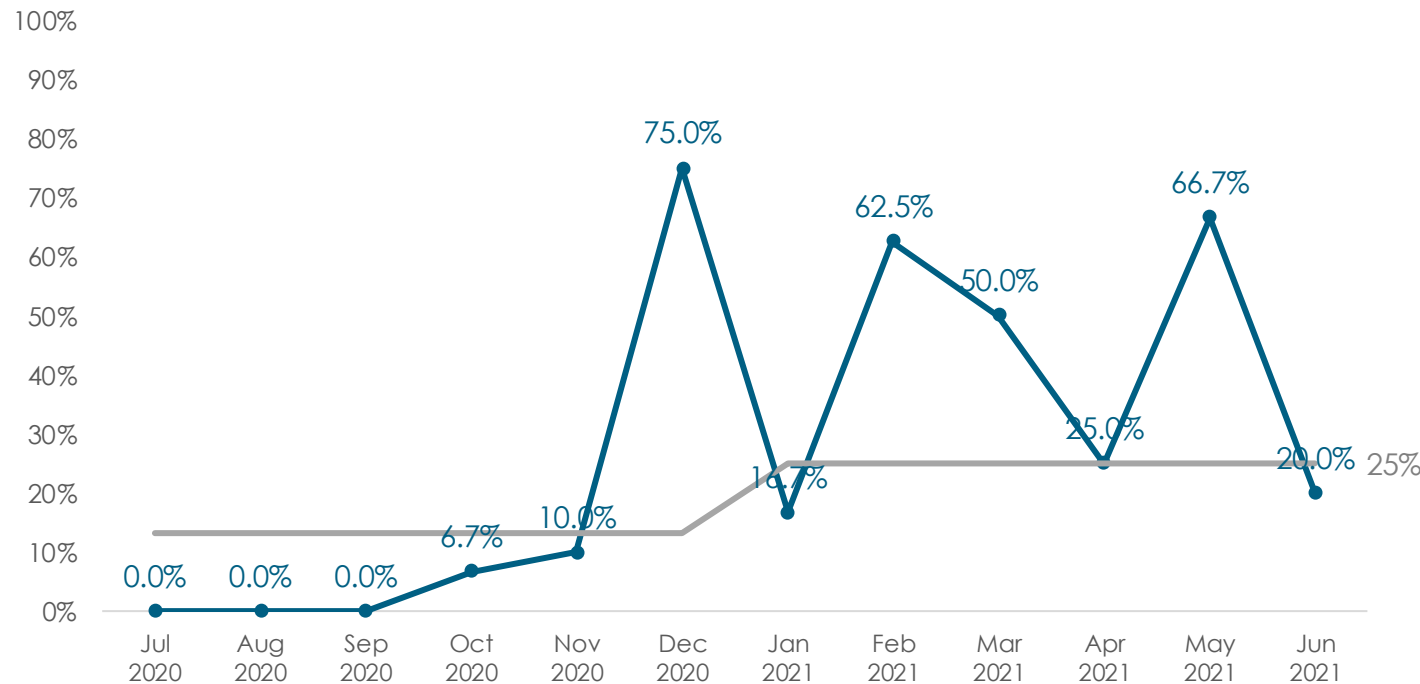** This data point is impacted by the COVID-19.

Target changed when data reporting was revised, beginning January 2021. - Note an individual can be represented in each measure (type 1 and 2) but multiple connections within the same type will only count once.

GOAL 3: Increase the percentage of connection to care for people with an SMI in jail.

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

Percentage of Service Type Provided:
Information & Referral (Type 1) & Target

Measure:	Number of SMI individuals given information or a referral to a service / total number of SMI individuals discharged from jail in the month
Definitions:	Percentage of individuals with an SMI that were given information or referred to a service.
Data Source:	Shannon Eustice Ashley Berg
Review Frequency:	Quarterly

Analysis:

** 25% represents an increase of 10% above Sarpy County's baseline of Type 1 connections to care in accordance with the National Stepping Up Initiative's target goal for CY21.

** This data point is impacted by the COVID-19.

Target changed when data reporting was revised, beginning January 2021.

GOAL 3: Increase the percentage of connection to care for people with an SMI in jail.

Objective 3: Utilize Long-Acting Injectables (anti-psychotic) when clinically appropriate.

PLACEHOLDER	Measure:
	Definitions:
	Data Source:
	Review Frequency:

Analysis:

GOAL 3: Increase the percentage of connection to care for people with an SMI in jail.

Objective 4: Partner with BAART to explore opportunities to provide methadone to individuals who were receiving methadone prior to incarceration.	
PLACEHOLDER	Measure:
	Definitions:
	Data Source:
	Review Frequency:
Analysis:	

GOAL 3: Increase the percentage of connection to care for people with an SMI in jail.

Objective 5: Explore opportunities to use the Daily Arrest Report with specific service providers.	
May or may not be data with this objective **PLACEHOLDER**	Measure: Definitions: Data Source: Review Frequency:
Analysis:	

GOAL 3: Increase the percentage of connection to care for people with an SMI in jail.

Objective 6: Collect baseline data to understand the impact of Medicaid expansion with those involved in the criminal justice system.	
PLACEHOLDER	Measure:
	Definitions:
	Data Source:
	Review Frequency:
Analysis:	

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

Strategy	Target	Notes/Updates
Objective 1: Evaluate data from the Specialized Transition Planning (STP) to determine impact on recidivism.		
a. Collect baseline data, develop report, share with team.	Winter 2021	Vicki work with Jo and Kim to develop this report
b. Distribute final report with Stepping Up Team for feedback.	Winter 2021	
Objective 2: Consider if LB247 (2019) Advanced Mental Health Directives impacts recidivism.		
a. Curt V./Region 6 will keep us updated as things develop.	On-going	

Could use a placeholder on next page for STP data.

AD HOC Data

	Analysis & Findings

Analysis:

Participants

- Ryan Mahr-Corrections Director
- Jo Martin- Corrections Admin.
- Sgt. Rob Hillabrand-Sarpy Co. Sheriff
- Kate Gatewood- County Attorney
- Ashley Berg- Public Defender/Social Work
- Dean Loftus-Mental Health Diversion
- Carisa Gosda-Diversion
- David Soto-Diversion
- Jacob Berst- Community Corrections
- Ashlie Weisbrodt-Mental Health Pre-Trial
- Sharon Boehmer-Human Services
- Jeff Jennings-Probation
- Honorable Stefanie Martinez-District Court Judge

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