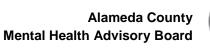


Criminal Justice Committee APPROVED Minutes Wednesday, March 24, 2021 ◊ 4:30 PM-6:00 PM 2000 Embarcadero Cove, Oakland, CA Alvarado Niles Room Video Conference Meeting





Committee Members:	□ Brian Bloom (Co-Chair, District 4); ⊠ Juliet Leftwich (Co-Chair, District 5); ⊠ Lee Davis (District 5)
ACBH Staff:	Angelica Gums (Administrative Liaison); Asia Jenkins (Administrative Liaison)

Meeting called to order @ 4:32 PM by Chair Juliet Leftwich.

ITEM	DISCUSSION	DECISION/ACTION
Roll Call	Roll Call completed.	
Approval of Minutes	February minutes tabled for next meeting.	
Presentation by Dr. Lorenza Hall Regarding Santa Rita Jail Data Provided in Response to MHAB's	Chair Leftwich provided a brief overview of the data request submitted to ACBH in November regarding the population of mentally ill clients housed at Santa Jail. Dr. Lorenza Hall was invited back to the Board to present on the data.	
Request of November	Presentation Overview:	
6, 2020	Dr. Hall reviewed the attributes associated with SMI clients. In creating the request, Chair Leftwich provided a definition of SMI, and there seemed to be a disconnect on what was provided in the report and what was asked by the Committee. A question was raised on where this definition came from, and if it is used elsewhere in the County? Dr. Hall responded saying that they use this definition with other requests related to mental illness. Their attempt is to cast a wide net to meet the definition provided.	
	for SMI clients. Yvonne Jones informed us that housing unit 9 is designated for behavioral health clients and a pod in housing unit 24 is specifically designated for women.	

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	Chair Leftwich asked if Dr. Hall could explain the role of a level 3 provider. Level 3 providers are individual licensed clinical social workers, marriage and family therapists, Doctor of Psychology, and psychiatrists. They service clients with mild to moderate behavioral health needs.	
	Committee Review of the Presentation:	
	Item 1: The number of seriously mentally ill people who were incarcerated at Santa Rita Jail, including their race, age and gender identity, and whether they suffered from anosognosia (impaired ability to perceive one's mental illness).	
	 There are many people who can refuse treatment due to anosognosia. This information will be captured in the clinical chart. Question: Do they do a mental health evaluation for everyone that enters Santa Rita? Answer: When a staff person does an intake, they ask the individual if they have a mental illness or history with mental illness. They don't break down the reason why someone refuses treatment. There must be a joint effort to document the types of mental illnesses and the accompanying systems to support with drilling in the refusals when its part of the treatment plan for the psychiatrists. Need to make alterations to the form to run a report. An electronic health record is what we'll be building out in the future. 	
	The race of each seriously mentally ill person at Santa Rita Jail 10/1/2018 thru 9/30/2020.	Julie to follow up on the gender of the entire jail population.
	• This information includes unique individual stays and not multiple stays.	
	The age of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.	
	 Majority of individuals at Santa Rita Jail are younger. Chair Leftwich has requested the age data for the entire Jail. The ethnicity of the jail population cannot be provided, and therefore, they are unable to do a comparison. Over representation of Blacks, males, and young people remain high. 	
	The sex of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.	

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	The diagnosis of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.	
	 Counting the episodes of those with mental illness, not the individuals. When you open a report for a client, you can enter a primary, secondary, and tertiary diagnosis. The highest number of episodes were Schizophrenia Spectrum and Other Psychotic Disorders and Trauma- and Stressor-Related Disorders. If multiple doctors diagnose me with various primary disorders, then it would show up here. Chair Leftwich requested more detailed data on SMI's and not autism or eating disorders. Dr. Hall responded saying that could be done. 	
	Item 2. The number of persons who received psychiatric medication at Santa Rita Jail from 10/2/2018 thru 9/30/2020.	
	 Dr. Hall explained that sorting through the data trying to determine standard medication vs. psychiatric medication could be a challenge but could be done if that is the request. Many of the meds were psychotropic medications but they do include medications such as stool softeners and pain medications. 	
	Item 3: The mean and median length of stay for seriously mentally ill persons at Santa Rita Jail and number of persons with single and multiple stays from 10/1/2018 thru 9/30/2020.	
	 Clients are in Jail less than five days. Most of them have two or more stays. 	
	Item 4: The housing and case management needs of seriously mentally ill persons who were released from Santa Rita Jail from 10/1/2018 thru 9/30/2020.	
	• To appear in this report, we had to have information on subsequent episodes within our mental health system. The system will be able to capture if a client is picked up from Jail upon their release and if they are currently homeless or had a history of being homes, in addition to case management history.	
	Item 5: The number of incarcerated people at Santa Rita Jail who were 5150'd and transported to Psychiatric Emergency Services at John George Psychiatric Hospital (JGP) from 10/1/2018 thru 9/30/2020.	

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	Item 6: The number of incarcerated people at Santa Rita Jail who were 5150'd and transported to Psychiatric Emergency Services at JGP and subsequently admitted to an inpatient unit at the Hospital from 10/1/2018 thru 9/30/2020.	
	 Chair Leftwich requested information on the number of SRJ inmates who were 5150'd and not admitted to JG PES. Specifically, clients transported to John George and were turned away or triaged for services in the community or returned to Jail. In psychiatric emergency services (PES), you will receive some treatment but not all cases will result in your being involuntarily held in the hospital. 	
	Questions:	
	Joe Rose: How many people need to be medically cleared before going to John George?	
	Everyone who is sent to John George from the Jail and is 5150d needs medical clearance. We do have a medical healthcare provider, Well Path, who can perform the medical clearance. Could there be people who are refusing medications that are prescribed? Yes, but staff are notified within three days. They could also move the medication schedule. If they continue to refuse, then they will discontinue the medication.	
	Allison: If a person refuses medication, would they be in the category here as receiving meds?	Angelica to send the comments recorded in the Chat to Julie and Brian.
	We're tracking and reporting on prescribed medicines. If they refuse or palm the medication, we don't capture that data.	
	John: People are being 5150d from the community and brought to John George, then a certain percentage of them get placed in the units Then a certain percentage are discharged from PES.	Julie will reach out to Dr. Tribble to secure a speaker next month to present on the data and answer our questions.
	Based on the data, there are 5244 SMI in Jail, 3600 admitted, 14% have SMI. That is misleading if we don't account for the amount of time people are spending in Jail. If people with SMI are spending longer of periods in Jail, then it's going to be a higher percentage. This should be a point of reference when addressing the jail reduction.	

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	Its troubling that SMI is counted by service category than diagnosis.	
	Level 3 may include clients who do not have an SMI diagnosis. Count the people who are diagnosed and then figure out who is getting services.	
	Allison: We only want data for people who are SMI.	
	Chair Leftwich: We'll be asking for that as follow-up, regarding the people that come from Santa Rita and are placed in the Units.	
	Lorenza: 29.23% of SRJ inmates who were 5150d and administered to John George PES were subsequently admitted into the hospital.	
	Lee: Is there drug testing that happens when someone is perceived to have a mental illness that could be drug-related?	
	Staff do not order drug testing. If a person stays long enough, you will see that those symptoms continue. When someone begins to detox, within 30 days they will begin to notice symptoms subsiding.	
	Chair Leftwich: Do you screen every inmate?	
	Yvonne: As we increase our staff at the jail, we have expanded initial screening.	
	John: Where is the information drawn from?	
	It's a combination of information from Santa Rita Jail, Behavioral Health Data, and Administrative Data in ACBH.	Lee is interested in seeing what an assessment looks like. Yvonne will
	We aren't using the newer data source.	follow up. What they do is a mental status exam.
	Are all the questions asked self-reporting questions or are there questions that are answered by the clinicians on their assessment of the individual?	
	The staff who are doing the screenings are licensed clinicians. They are seeing if the individual has any history of mental illness and are doing their assessment based on the client's responses.	
	Committee to come up with a list of follow-up questions for Dr. Hall	

ITEM	DISCUSSION	DECISION/ACTION
Next Steps		
Adjournment	Adjourned at 6:00 PM	

Minutes submitted by A. Gums