Beahavioral Health & Justice Working Group Minutes
Thursday, February 15, 2018 1:00 thru 2:00 PM

Meeting Location:
Codington County Commissioner Room

Attending: Lee Gabel (chair), Steve Rehorst (WPD), Laura Newman (HSA), Tom Walder (CCO), Kari Johnston (HSA), Dawn Sikkink (Beacon Ctr), Shawn Nills(HSA), Sarah Petersen(CWO), and Duane Kavanaugh (LSS) via zoom.

Agenda Approved: Motion by Steve, seconded by Kari to approve the agenda. All approved. Motion Carried.

Minutes Approved: Motion by Kari, seconded by Steve to approve minutes from the January 12, 2018 meeting with the following amendments: Add Steve Rehorst to the attendees, add (Beacon Center) after Denise Ragel’s name and remove “or for the consultants who drafted the report under Review of SIM Report.

Detention Center Data Collection:
Discussion was held on the mental health data collected in the detention center. Lee displayed an excel file with suggested data fields to track and proposed graph (attached to these minutes). The current process has the mental health professional in the jail collecting the booking date and charges. Consensus was that it would be better to rely on the jail’s Zuercher program for the booking and charge data. Consensus was held to only assess people who screen positive. If they screen negative, the inmate will return back to the jail.

It was discussed that prior data had included DSM diagnoses that were given previously. It was stated that moving forward HSA will only submit diagnoses from the current assessment that is done in the jail. Prior diagnoses will no longer be listed. If an inmate screens negative the rest of the data fields will be N/A. If an inmate screens positive an assessment will be done that will include substance use and determine if the person meets severe mental illness criteria established by the state.

Discussion was held on the attached draft dashboard by Lee.

Shawn mentioned another piece of data to consider collecting was if he able to follow up with those who had positive assessments to set up some case management prior to release. This would track if we are able to connect a person to services.

Laura suggested the following changes to the data report:
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A. Add two data elements
   1. We will add a field for the last 4 of social security. Shawn will get this from the sheets prepared for him each day at the detention center.
   2. We will add a Diagnosis Category to be required for those who are assessed. Choices will be:
      - Not mentally ill
      - Substance use
      - Mental health diagnosis
      - SMI
      - NA

B. For the report, we will do the following:
   1. A single listing for each person from the month featuring the record with the most recent screening date.
   2. All screenings for the month so we can get a total number of screenings and so we can assess how much variance there is from one to another if we want to.

The latter may help to identify super utilizers.

The former can be used as baseline data to obtain prevalence rates to determine if we are lowering the number of people with mental illness in jail.

Other: We would like to see a report of how many of the people who were screened positive and assessed get some sort of follow up with Shawn too.

Report Changes:
   - We will continue to include the Admit Date as reported by the client and it can be assessed for accuracy using Zuercher data.
   - We will not include the charge on the report.
   - We will form a key field to match the clients from the Detention Center’s system to HSA’s: the key field will have initials, birthdate, and last 4 of the social security if known. If no social security, we will use the initials and birthdate.

*Here is an example of what the state of South Dakota uses in case we want to try for something closer to that. The initials and birthdate are useful, and adding last 4 of SSN if known will help insure uniqueness. Last 4 of SSN + MMDDYYYY of birthdate + F or M for sex + First two letters in mom’s name. Example: 276406231998FLA

Laura runs a report once a month. Lee asked if HSA would be willing to match up jail booking data in the future. Laura stated that HSA would be willing to do that.

Consensus was to begin tracking and reporting data as describe above.

Sarah discussed looking at a target population that the group wants to focus on.

Shawn discussed the order and process he puts information in the computer as he screens and assesses inmates.
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Open
Discussion was held about CIT. Kari has seen an increase in those being brought in for holds.

Next meeting date: March 8th at 1:00 pm

Steve made a motion to adjourn, seconded by Kari. All approved. Motion carried.

Sarah Petersen
Sarah Petersen
BHJWG Secretary

3-8-18
Date Approved
MH Issue Prevalance 3%
SMI Prevalance 2%
Substance Prevalance 1%

Codington County Jail Mental Health Data

Screened relative to Bookings & ADP
- August-17: Screened 15, ADP 82.55, Booked 239, Assessed 2
- September-17: Screened 4, ADP 67.53, Not Screened 2
- October-17: Screened 73.77

Assessed relative to Bookings & ADP
- August-17: Assessed 8, ADP 82.55, Booked 239, Assessed 2
- September-17: Assessed 67.53, ADP 82.55
- October-17: Assessed 73.77

Screened relative to ADP
- August-17: Screened 15, ADP 82.55, Not Mentally Ill 3, MH disorder 3
- September-17: Screened 4, ADP 67.53
- October-17: Screened 73.77

SMI relative to ADP
- August-17: SMI 1
- September-17: SMI 2
- October-17: SMI 1

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<th>Assessed</th>
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Notional data