



IMPROVING

CRIMINAL JUSTICE RESPONSES

FOR PERSONS WITH MENTAL ILLNESS

2019 ANNUAL REPORT



In accordance with 2017 House Bill 1183, the second annual report of the Oversight Council for Improving Criminal Justice Responses for Persons with Mental Illness is hereby presented to the leaders and citizens of the state of South Dakota.

The annual report shows the progress made on key policies outlined in the legislation, which focus on the following legislative goals:

1. Improve public safety and the treatment of people with mental illness who come in contact with the criminal justice system;
2. More effectively identify mental illness through training, screening, and expanded response and diversion options; and,
3. Better allocate resources to improve early intervention services.

In the past year, we have seen progress in several areas. Most importantly, the level of communication between the jail and local mental health providers has increased in several jurisdictions across the state.

While it is still too soon to appreciate the fruits of the increased partnerships, I am excited to see how each community—both rural and urban—respond to their

own unique challenges and thus make the system efficient, effective, and equitable for all who are involved.

Finally, achieving these legislative goals requires the cooperation and collaboration between numerous levels of government, as well as the public and private sector. The work accomplished in the past year could not have been achieved without the help of the many entities involved. I would like to extend a special thanks to all individuals and entities that worked so tirelessly to move these reforms forward.

Respectfully Submitted,

Greg Sattizahn
Chairman, Oversight Council for Improving Criminal
Justice Responses to Individuals with Mental Illness

State Court Administrator

Address mental health crises to prevent entry into the criminal justice system

Goal: Prevent jail admissions of people in crisis when appropriate, accomplishing training goals.

TOOLS FOR LAW ENFORCEMENT

Crisis intervention training coordinator hired. The CIT Training Coordinator, tasked with serving as the liaison with all law enforcement agencies, facilitating CIT Training, and coordinating online CIT Training, was hired and began accomplishing training goals.



Continued training for new law enforcement officers. In FY2018, Law Enforcement Training increased the number of hours of crisis response training provided in its Basic Certification Course. Since that time, 177 have completed 16 hours of crisis response training in:

- ✓ Mental Health 101
- ✓ Crisis Threat Assessment
- ✓ Crisis Intervention Team Training
- ✓ Scenario Based Training

Crisis Intervention Team Training Provided through the Statewide CIT Coordinator (9 mos.)



137 LAW ENFORCEMENT OFFICERS	16 DISPATCHERS
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COMING SOON!

In the coming year, South Dakota will have available a certified CIT training course to make the training more accessible. It will include 24 hours online and 16 hours in a classroom.

CRISIS RESPONSE SERVICES

Investment in Pennington County Crisis Care Center. In FY2018, the Department of Social Services provided a one-time grant to assist Behavior Management Systems to move the County's Crisis Care Center into the newly developed Care Campus facility. During FY2019, the Crisis Care Center **served 1,603 individuals in crisis**, with an **average of 8.2 hours per stay**. The majority of referrals for crisis care were self-referrals, while law enforcement accounted for 15% of referrals.

Planning Grant for the Minnehaha County Community Triage Center. Minnehaha County received a one-time grant to convene community partners to help plan and build momentum for the development of a triage center. This type of center is an alternative way to provide help to an individual experiencing a behavioral health crisis that does not require a jail booking or emergency room visit. Almost a quarter of all 2016 jail bookings in the Sioux Falls area were individuals who self-reported substance abuse or mental health disorders, costing Minnehaha county nearly \$3.5 million dollars. That same year, Avera and Sanford Hospitals combined had over 6,500 behavioral health-related hospital visits, costing upwards of \$40 million dollars. The Triage Center, expected to open in mid-2020, **will divert individuals from the justice system and emergency rooms and help them with a care plan so they can remain stable and in the community.**¹

Legislature Follows Up on Recommendation to Explore 211 Helpline Center Expansion. HB 1183 charged the oversight council with evaluating the need for and feasibility of a statewide crisis call center or regional centers for people in crisis. In 2018, members of the Legislature's *Access to Mental Health Services Study Committee* reviewed and evaluated the Helpline Center 211 hotline processes, trainings, and statistics. As a result of this study, 14 legislators sponsored Senate Bill 8 (SB 8), an Act to provide a statewide resource information system, on behalf of Study Committee. SB 8 passed during the 2019 legislative session and enables the implementation of a statewide resource information system to provide information and referrals, resources, and assistance for a person in a crisis. Resources include social services, human services, legal assistance, financial assistance, and support for other related needs. With cooperation from the Department of Social Services, counties may develop and maintain a statewide centralized resource accessible to any resident.

¹Augustana Research Institute. "Minnehaha County Community Triage Center Baseline Data Report," 2018.
<https://www.minnehahacounty.org/ctcp/reports/Triage%20Baseline%20Report%20%20Final%20with%20attachment.pdf>



Strengthen opportunities to divert people from the criminal justice system

Goal: Establish mechanisms to appropriately divert people from the criminal justice system to mental health treatment.

MENTAL HEALTH COURTS

Mental Health Courts are an intense and specialized docket for individuals with severe mental illnesses. The goal is to divert qualifying individuals with severe and persistent mental illness from prison to a judicially supervised community-based program. Much like drug courts, participants are held accountable with frequent appearances before the judge. An interdisciplinary team headed by the judge and consisting of a prosecutor, defense attorney, case manager, and clinician follow the individual's progress and provide recommendations to the judge.

Pennington County: The Pennington County Mental Health Court has been operational since January 2019. At capacity, the court can provide supervision for up to 20 clients. Since January, there have been 35 referrals.

Minnehaha County: Minnehaha County is currently in the planning phase, and will be operational in January 2020. The members of the interdisciplinary team are currently in training.



Pennington County Courthouse

COMMUNITY COLLABORATION

3rd Judicial Circuit: The Codrington County court system is leading an effort in partnership with the County Detention Center and local community mental health center to demonstrate how to effectively use the provision in HB1183 (2017) that allows for mental health assessment and treatment to be ordered as conditions of bond. This process starts with the administration of the Correctional Mental Health Screen (CMHS) with individuals booked into the Detention Center by a provider from community mental health center. The results of that screening are provided to the court as another tool to utilize when determining at the bond hearing if an order the individual will be ordered to obtain a mental health assessment as a condition of bond. To make this determination the court considers the following:

- **Need:** Many would benefit, but few people actually need the assessment
- **Needed for pretrial success:** Only impose if the person needs it to either show up for pretrial court hearings or to avoid subsequent criminal activity during the pretrial period
- **Resources available:** Community Mental Health Centers have limited resources
- **Avoidance of over-conditioning:** Balance the referral for assessment with other bond conditions that will be imposed

If the decision is made to apply a bond requiring mental health assessment, the bond form and record release is signed and sent to the community mental health center. This provider then notifies the court if the individual is non-compliant.



Faulk County Sheriff: In early March 2019, the Faulk County Sheriff convened a meeting with his local hospital and the community mental health center that serves his county to talk about the mental health needs in the jail. As a result of the meeting, a collaborative process was put into place. 1) The Correctional Mental Health Screen is used at intake for the medical provider to access 2) When an individual in the jail requests assistance or staff determine assistance may be needed, jail staff arrange for the individual to talk by phone with a provider from the community mental health center. Following that call, a report is emailed to the jail for placement in the individual's file. In the three months this was in place in FY2019, it has been used four times and there have been no other follow-ups needed or issues in the jail with the individuals receiving this intervention.



Charles Mix County Jail: In FY2018, Lewis & Clark Behavioral Health Services (LCBHS) used a one-time crisis grant from the Department of Social Services to purchase equipment to provide behavioral health crisis services via telehealth to the Charles Mix County Jail. In the past year, that service has been utilized a dozen times for risk assessment for substance use and suicide. This partnership has provided a needed service, kept an individual out of jail through connection to services, and reduced the length of jail stays for an individual with serious mental illness. LCBHS has also established a similar partnership with another county jail and a holding facility.



Pennington County Jail: The Pennington County Jail is working with Behavior Management Systems (BMS) to establish an electronic communication protocol with the goal of connecting or reconnecting people who are in jail and have serious mental illness to BMS services. This protocol is as follows:

- The Jail will transmit daily a link to BMS so BMS has ready access to a list of all individuals in custody;
- BMS is setting up an electronic method to query that list of people in custody against a list of current BMS clients;
- BMS will notify any case managers or counselors if their clients are in custody; and
- The case manager or counselor may make contact with jail or jail mental health staff to facilitate reconnection to services upon release.

Ensure speedier court processing and shorten jail stays

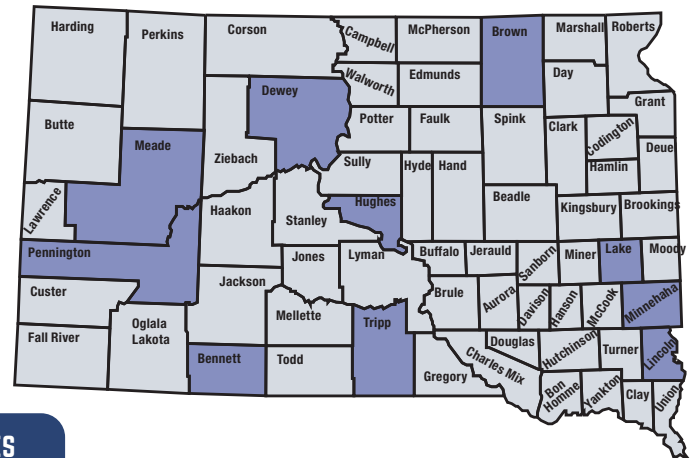
Goal: Reduce wait times for competency to stand trial evaluations to decrease jail stays for people with mental illness.

In 2017, South Dakota adopted a 3-pronged approach to expediting the completion of competency to stand trial evaluations.

1. Established a fund to reimburse counties for competency evaluations conducted locally;
2. Authorized additional professionals to conduct evaluations; and
3. Set a 21-day timeframe for completion of competency evaluations.

COMPETENCY EVALUATION FUND

In FY2018, a fund was established through the transfer of competency evaluation funds from the Human Services Center to the Association of County Commissioners. The fund is intended to assist counties with the cost of competency evaluations conducted locally and reduce the length of jail stays while awaiting completion of these evaluations by expediting court processing. Counties may request reimbursement from the Competency Evaluation Fund twice per year. To date, \$73,229 has been paid to counties.



REIMBURSEMENTS TO SOUTH DAKOTA COUNTIES

Year 1: 61 Claims Submitted

52 Claims Verified

\$45,701 Paid to 9 Counties

Year 2: 38 Claims Submitted

28 Claims Verified

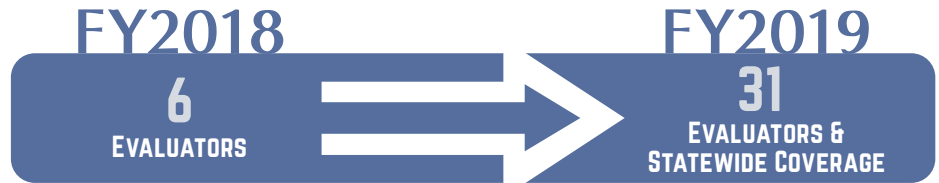
\$27,528 Paid to 6 Counties





EVALUATORS

In FY2018, South Dakota increased the number of evaluators approved to conduct competency evaluations to provide statewide coverage. That coverage was maintained through FY2019.



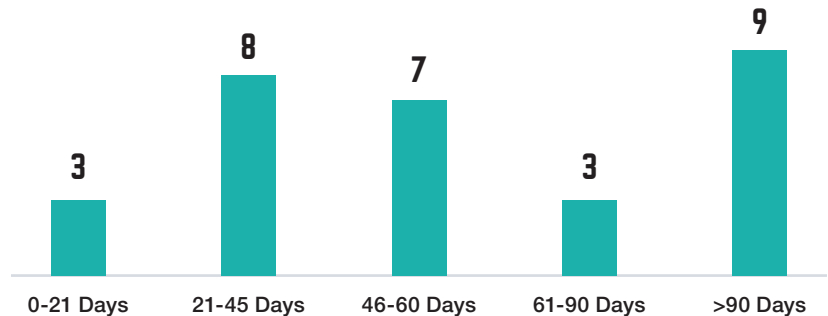
TIMELINES

In FY2018, the wait times for the completion of competency to stand trial evaluations dropped from an estimated four to six months to an average of 37 days.

For FY2019, the **average wait time is up 81% over the prior year.**

30 individuals had competency exams ordered statewide in FY2019, with 20 continuances granted by a judge to exceed the statutory goal of 21 days from the date of the court order to when the completed competency evaluation is filed with the court. The **average time to complete the evaluation is now 67 days.**

Average Number of Days to Complete Competency Evaluations



Improve access to treatment for those with mental illness in the criminal justice system

Goal: Reduce wait times for competency to stand trial evaluations to decrease jail stays for people with mental illness.

INCREASED ACCESS TO TREATMENT FOR PROBATIONERS

Mental health screening continues. Court Services implemented a mental health screening process on May 1, 2018. While not statutorily required, UJS worked with DSS to implement the Correctional Mental Health Screen (CMHS) to identify probationers who may need a referral for mental health evaluation and/or treatment. The intent is to assist probationers to access needed services. The Correctional Mental Health Screen (CMHS) continues to be used in screening probationers for mental health evaluations and/or treatment referrals.

Mental Health Screens for Probationers



STATEWIDE MENTAL HEALTH TRAINING

Training efforts continue for all stakeholders. South Dakota continues to prioritize mental health training for all criminal justice stakeholders.

Criminal Justice Stakeholder	Cumulative Number of Training Participants	Frequency of Training
Law Enforcement	Basic Certification Course: Response to Persons in Crisis = 177	16 hours required for all new law enforcement officers
Public Defenders	Representing Clients in Criminal Proceedings with a Mental Illness = 165 UJS Video Training Series: Attorneys Representing a Client with a Mental Illness = 289	Required for all court-appointed attorneys
State's Attorneys	Building the Next Generation of Prosecutor-Led Diversion Programs = 104	Mental illness training required every 4 years
Jail Corrections Officers	SAMHSA Online Course: Creating Safe Scenes = 652	Mental illness training required every 4 years
Judges	Judicial Work at the Interface of Mental Health & Criminal Justice = 45 Mental Health Panel Training = 53 Mental Health Court Implementation = 1	Determined by Chief Justice
Court Services Officers	Trauma Responsive Court = 130 Trauma Informed Court = 125 The Role of Telehealth Based Services: Improving Accessibility for Justice Involved Clients = 129 Mental Health Court Implementation = 1	Determined by State Court Administrator

Criminal Justice Stakeholder	Cumulative Number of Training Participants	Frequency of Training
State Prison Correctional Officers	Mental Health First Aid = 1938 Dialectical Behavior Therapy = 909 Crisis Intervention Team Training = 4	Mental illness training required every 4 years

In August of this year, over 110 community leaders from each corner of the state convened in Oacoma for the Summit on Improving Criminal Justice Responses to those with Mental Illness to discuss how individual communities can better respond to individuals experiencing a mental health crisis.

In addition to training officers in Mental Health First Aid and Dialectical Behavior Therapy (DBT), the Department of Corrections provides:

- **Bi-weekly DBT skills training** and **DBT coaching** to officers who work in the mental health housing units
- **Mindfulness training** for Officers in Charge

