

Diversions/Reentry Workgroup

March 4, 2022



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California Department of Corrections and Rehabilitation (CDCR)



Housekeeping:

**** Workgroup is being recorded ****

- **Use the “raise hand” feature to make a comment**
- *You will be placed in line to comment in the order in which requests are received by the host.*
- **When it is your turn to comment, the meeting host will unmute your line and announce your name.**
- *Members of the public should be prepared to complete their comments within 3 minutes or less if a different time allotment is needed and announced by the Executive Officer.*

Email:

CCJBH@cdcr.ca.gov



Webinar Policies:

PARTICIPATION

We welcome your participation throughout this meeting. Please note that disruptive behavior is not aligned with the purpose of this session and will not be tolerated. Any individuals disrupting the meeting may be removed without warning. In the event of a security incident, this session will end immediately and will not resume. If this occurs, a separate email will be sent to all participants with further instructions.

Q&A

Participant comments in the Q&A do not reflect the views or policies of the presenters, the Council on Criminal Justice and Behavioral Health, the California Department of Corrections and Rehabilitation or its affiliates or contractors. By using this Q&A, you agree to keep comments relevant to the topic of today's event. While a variety of diverse perspectives and opinions is welcome, disruptive comments are not aligned with the purpose of this meeting, and users creating disruption may be removed without warning.



Agenda

Time	Topic
1:00 PM	Welcome & Introductions
1:10 PM	Diversion Technical Assistance Contract Update
1:20 PM	Whole Person Care Program Presentation
2:10 PM	Q&A with Councilmember Advisors Public Discussion
2:55 PM	Announcement/Next Steps
3:00 PM	Adjourn



Mental Health Diversion Contract

The *Mental Health Diversion: Consultation, Technical Assistance & Policy Recommendations* contract was awarded to the Council of State Governments (CSG) Justice Center and includes:

- Subject matter expert specialty consultation and technical assistance to enhance, sustain and/or expand local capacity to successfully implement mental health diversion.
 - Learning Communities
 - Listening Sessions
- A final report that includes recommendations to expand mental health diversion in California.



Diversions Contract Update (cont.)

Learning Community County Participants

- Alameda
- Butte
- Contra Costa
- Fresno
- Humboldt
- Kern
- Orange
- Plumas
- San Bernardino
- Santa Barbara
- San Francisco
- San Mateo
- Santa Cruz
- Shasta
- Siskiyou
- Solano
- Sonoma



Diversion Contract Update (cont.)

Learning Community Schedule

Session 1 (January 20th): Identifying candidates for diversion

Session 2 (February 17th): Diversion referral process

Session 3: (March 17th): Diversion evaluation process

Session 4 (April 7th): Judges-only session

Session 5 (April 27th): Diversion treatment planning

Session 6 (May 12th): Treatment monitoring



Diversion Contract Update (cont.)

Listening Sessions

➤ Goals

1. Recognize strengths in diversion policies and identify key areas for further improvement.
 2. Distinguish supports to build on areas of strength in diversion practices and examine solutions for areas of improvement.
- Five (5) Regional listening sessions scheduled thru June 2022.
- Separate professional stakeholder and lived experience sessions.



****Q&A with Councilmember Advisors****

****Public Comment****





Coordination of Care in the Justice Involved Population

Judi Nightingale, DrPH, RN
Director, Population Health
Riverside University Health System

What is Whole Person Care?

- A State Funded Program (one of 4 components of the 1115 Medi-Cal Waiver), designed to assist complex, high needs clients.
- 5 year program-funding scheduled to end in December 2020.
- Funding extended to December 2021 due to COVID
- CalAIM go-live January 2022
- Each County designed their own unique program to incorporate the following key elements:
 - Value-Based
 - Care Coordination/Integration
 - Care Management
 - Population Health Management

Riverside County WPC Program

- Focus is on Transition out of incarceration-identify needs in releasing/newly released Probationer/Parolee and provide linkages to services.
- Goals
 - Communication of high needs inmates releasing to the community.
 - Upstream identification of needs for releasing justice involved population.
 - Warm handoff to partners providing needed services.
 - Reduction in re-incarceration.
 - Reduction in unnecessary ED usage

2015 Riverside County Probationer Data

- On average, 350-450 probationers admit to being homeless at any single moment, (about 3% of the county's supervised population). At release, the screening RNs believe most are homeless or, at risk of homelessness.
- Most probationers are under-housed, staying with friends and/or family.
- About half of all probationers in the county return to court within the first year as a result of substance/alcohol abuse.

2015 Riverside County Probationer Data (cont.)

- More than 50% of probationers need medical insurance. Many qualify for Medi-Cal, but have not enrolled.
- According to national statistics, a large number of returning prisoners have communicable diseases including HIV/AIDS, hepatitis, and tuberculosis.
- Many probationers have co-morbid Behavioral and Physical health conditions (esp cardiac). Reduction in life span is est. at 20 years.
- Highest rate of suicide is within the first few weeks of release.

Netsmart Data

- **40%** of individuals with serious mental illness have been in jail or prison at least once in their lives.
- **45%** of inmates in local jails and state prisons have co-occurring mental illness and substance use disorders.
- **High rates of recidivism**
 - Currently, 25% of inmates with a mental health problem had three or more prior incarcerations (compared to 5% of inmates without a mental health problem).
- **15%** of jail population were homeless in the year prior to arrest, a rate **7 to 11** times higher than the general population.

Riverside County Whole Person Care

- Implementation-hired the following
 - 8 RNs to screen in all 9 probation sites, 2 Parole sites and 2 Behavioral Health Clinics.
 - 12 housing outreach specialists to provide assistance with housing and social service access.
 - 8 RN Case managers to ensure those who are referred, successfully receive services.
 - 2 RN Managers to oversee above personnel.
 - 1 Program Coordinator for data tracking and submission to the State.

RN Screening, in Probation, for the Following:

- Health insurance coverage (m/cal)
- Mental health needs
- Medical conditions
 - (including TB, Hep C, HIV, Hgb A1C, BP)
- Substance abuse
- Homelessness
- Additional support services

What is Being Measured?

Metrics summary:

- Total number of probationers offered vs. screened
- Total number of probationers referred vs. enrolled in services for:
 - behavioral health
 - physical health
 - social/support services
 - substance abuse
 - housing needs
- Medi-Cal enrollment
- Jail recidivism
- Avoidable admission to psychiatric and primary care hospitals
- Avoidable emergency department usage for physical and behavioral primary care needs
- Number of homeless who acquired housing
- Depression remission

Barriers to Care after Release

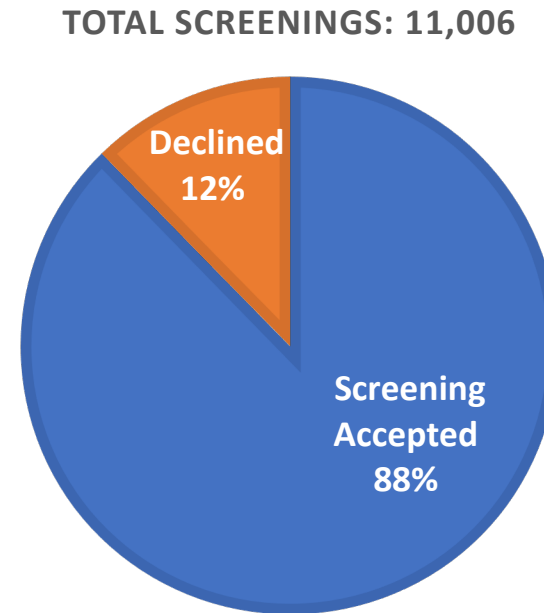
- **Problem:**
 - Expensive medications → noncompliance if client has to choose between food, shelter or medications.
- **Solutions:**
 - Identification of inmates who are on medications >14 days during incarceration.
 - This list is provided to the WPC screening RN, when the inmate is released.
 - Communication and coordination of care between the “in-jail” team of probation officer, behavioral health worker, RN and substance use worker with the “community” equivalents.
 - Efforts to begin eligibility work for access to Medi-Cal services while incarcerated for at least clients with chronic health needs.
 - Extension of provision of medication, at release, from 3 days for *some* medications to up to 14 days for *all* “chronic” medications

16 Regional Partners Including

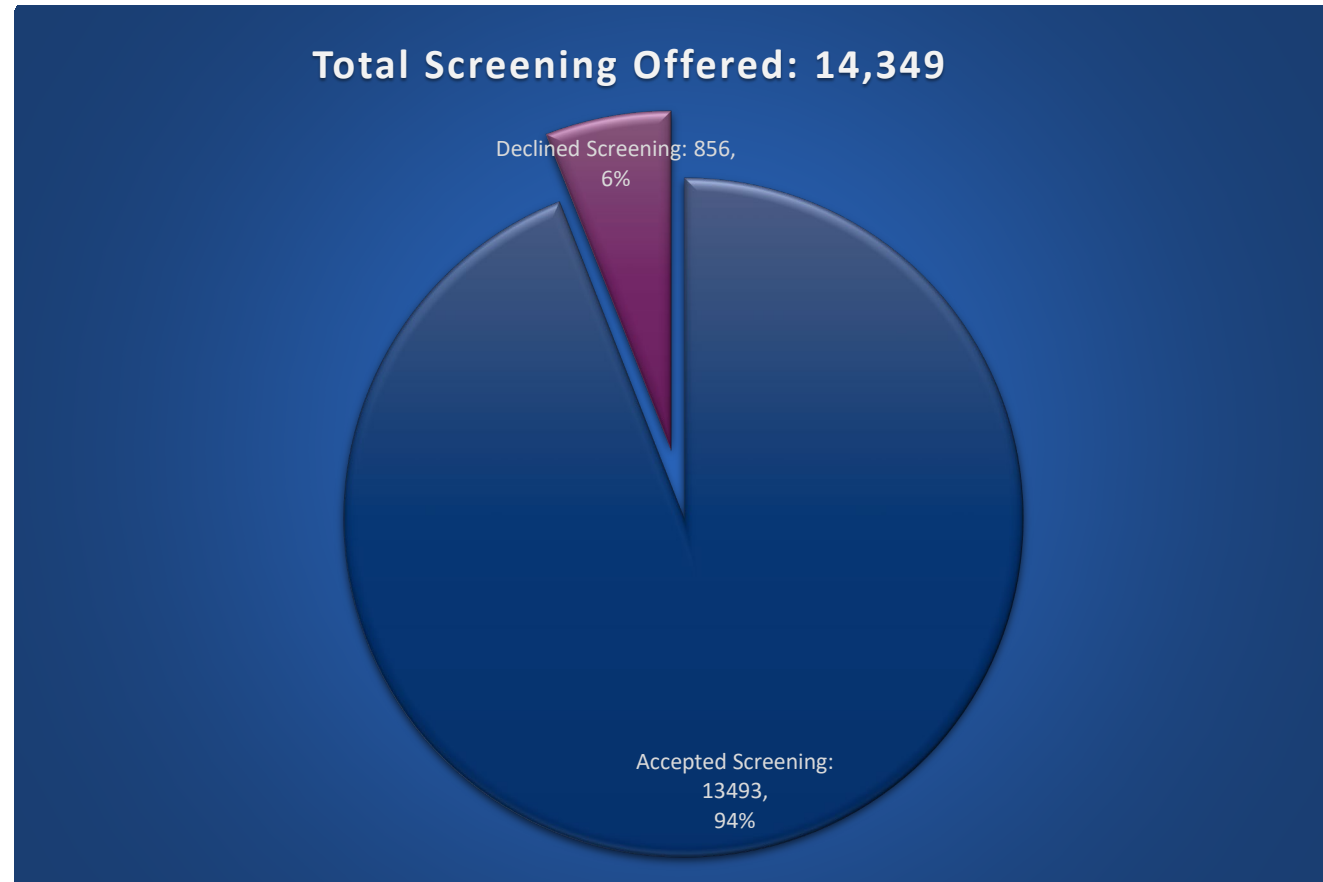
- Riverside County Probation Department
- Riverside County Sheriff's Department
- Riverside University Health System
 - Dept of Behavioral Health
 - Medical Center
 - FQHCs
- Riverside County Department of Public Social Services
- Riverside County Economic Development Office
- City of Riverside, Mayor's office
- Inland Empire Health Plan
- Molina Healthcare
- National Community Renaissance
- Health to Hope Clinics
- Coachella Valley Rescue Mission-housing
- Path of Life Ministries-housing

WPC Data: Prior to Pandemic (10/6/2017 – 4/30/2020)

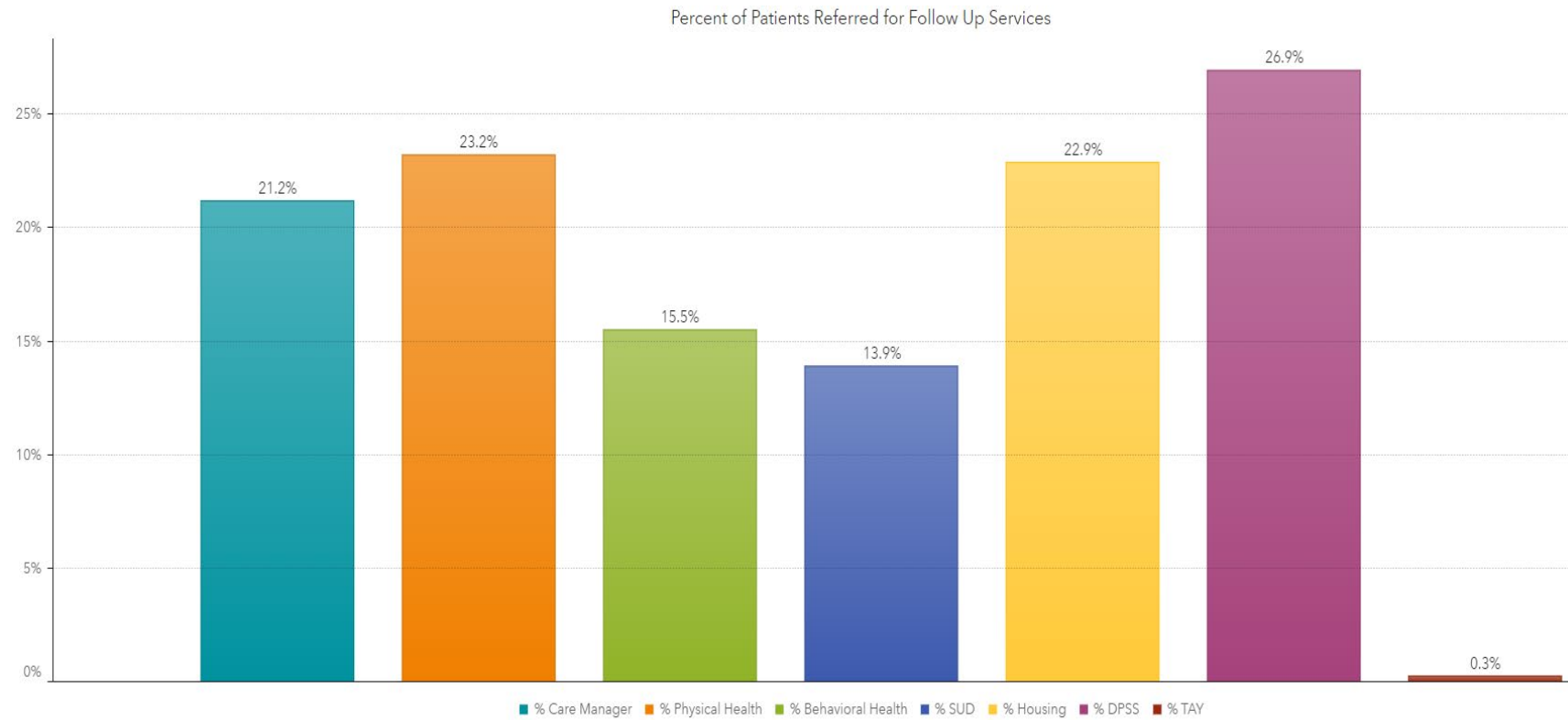
Screening Site	Initial Screening Offered	Screening Accepted	Declined	% Accepted
BLYTHE	9	9	0	100%
WPC EAST	56	56	0	100%
WPC WEST	74	74	0	100%
PALM SPRINGS	211	181	30	86%
BANNING	600	439	161	73%
CORONA	745	672	73	90%
SAN JACINTO	1,337	1,190	147	89%
INDIO	1,464	1,343	121	92%
MURRIETA	1,539	1,450	89	94%
MORENO VALLEY	2,062	1,653	409	80%
RIVERSIDE	2,909	2,584	325	89%
Totals:	11,006	9,651	1,355	88%



WPC Data: 10/6/2017-10/31/2021



WPC Data: 10/6/2017-10/31/2021



WPC Data: 10/6/2017-10/31/2021

Screening Site	Total Referrals	Care Manager	Physical Health	SUD	Behavioral Health	Housing	DPSS	TAY
BANNING	750	238	224	117	72	123	214	0
WEST	149	112	60	9	29	35	16	0
BLYTHE	13	4	2	1	2	4	4	0
EAST	129	75	28	7	35	42	17	0
MURRIETA	1,922	365	415	308	314	444	440	1
PALM SPRINGS	537	100	128	72	56	138	142	1
SAN JACINTO	4,935	776	1,457	501	699	1,148	1,127	3
INDIO	3,013	649	562	317	522	962	646	4
CORONA	1,263	413	411	185	173	178	309	7
MORENO VALLEY	2,870	948	511	612	471	659	603	14
RIVERSIDE	4,448	444	719	595	663	719	1,729	23
Totals:	20,029	4,124	4,517	####	3,036	4,452	5,247	53

Outcomes

- Increase in active Medi-Cal
 - Baseline ~5%
 - Highest point during WPC pilot >60%
- Medi-Cal as a proxy to obtaining SUD and DBH services.
 - Those who got active Medi-Cal showed statistically significant reduction in readmission due to SUD and DBH access.
- For those referred to DBH who attended at least 1 appointment
 - Reduction in reincarceration >65% compared to those who did not attend an appt.
- For those referred to SUD who attended at least 1 appointment
 - Reduction in reincarceration >50% compared to those who did not attend an appt.

Outcomes-continued

- Improved integration among partners for Patient Centered care.
- Reduction in duplication of efforts by multiple departments
- Increased collaboration for other projects as a result of knowing who to contact to help high needs clients-ie: COVID
- Grateful clients who have turned their lives around.

Taking care of a veteran's heart

- **Situation:**
 - Client had multiple medical problems, including congestive heart failure, hypertension, atrial fibrillation, recent hospitalization for pneumonia requiring a thoracentesis. He was told that his heart was working at 10% from meth-induced cardiomyopathy. He was wearing an external life vest defibrillator and reported feeling recent shocks. He said the doctor gave him 6 weeks to live.
 - Other diagnoses included were depression and anxiety. Client and longtime/supportive girlfriend were homeless, which made charging his defibrillator difficult.
 - Client was not interested in going to a shelter due to crowds and the possibility of being separated from girlfriend.
- **Success:**
 - WPC Outreach Team met with client and obtained information that the client was a Veteran. Client was placed in brand new Veteran housing within a month of screening.
 - His health improved drastically. His heart function increased to 40% and he no longer needs the external defibrillator. He also married his girlfriend.

Contact:

Judi Nightingale, DrPH, RN j.nightingale@ruhealth.org

****Q&A with Councilmember Advisors****

****Public Comment****



Upcoming Events

[Housing Recommendations Implementation Webinar 4: Developing New Rental Assistance and Supportive Services](#)

Thursday, March 24, 2022, 12:00 - 1:30 PM

[CCJBH Full Council Meeting](#)

Friday, April 29, 2022, 2:00 - 4:30 PM

Please visit our website at <https://www.cdcr.ca.gov/ccjbh/>

Email us at CCJBH@cdcr.ca.gov

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THANK YOU!

