Appendix D

Jail Diversion Plan
Jail Diversion Plan
February 1, 2005

Update February 1, 2006
Introduction:

Lubbock Regional MHMR Center (LRMHMR) has long been concerned about the growing number of people with serious and persistent mental illness and serious emotional disturbances in the criminal and juvenile justice systems. Collaborative efforts between the Lubbock County Sheriff Department and LRMHMR produced a Memorandum of Understanding (MOU), which has been continuously in effect since 1999. Additional agreements with the Lubbock County Juvenile Justice Center and several other criminal and juvenile justice entities have since been added. The existence of the Lubbock County Drug Court and the expertise represented provide an outstanding resource to strengthen the LRMHMR service delivery system and to strengthen and expand collaborative efforts in the planning and implementation of jail and detention diversion efforts within the local service delivery area.

Strategies:

I. Jail and Detention Diversion Task Force

The Lubbock County Drug Court is being presented a proposal to accept the charge as the Criminal and Juvenile Justice (CJJ) Advisory Committee. The members represent a good cross section of varied interests, experience and expertise. The charge of this advisory committee is:

Purpose: To participate in the development and monitoring of the Lubbock Regional MHMR (LRMHMR) Jail Diversion Plan.

Tasks: To review and recommend revisions to the LRMHMR Jail Diversion Plan as needed but at least every 6 months. (Due January 2006 & July 2006)

To report outcome of reviews to the LRMHMR Network Management Committee.

To report current membership information to the LRMHMR Network Management Committee.

A task force has been formed to research successful models of Mental Health Courts. This task force is seeking potential resources for the development of a Mental Health Court in Lubbock County. Members represent participation from various community stakeholders.

II. Identification of Consumers:

A uniform assessment: [MH Adult Uniform Assessment for Resiliency and Disease Management] [Child and Adolescent Evaluation Assessment for Resiliency and Disease Management] is required to be completed upon a person’s admission into the MHMR system and subsequently at least every 90 days thereafter. The assessment, both adult and child, captures information of criminal justice involvement as well as other potential risk factors. LRMHMR maintains a MOU with the Lubbock County Juvenile Justice Center (LCJJC) and the Lubbock County Jail each of which identifies the processes for identification and referral of people within the target population to LRMHMR.
III. Crisis Screening and Assessment for Inpatient Hospitalization for Juveniles in Detention:

A. Crisis Assessment Protocol:

Crisis Services Protocol-Lubbock County Juvenile Justice Center, LCJJC [Memorandum of Understanding, MOU, renewal submitted to LCJJC for execution 1-18-06.]

**Purpose**
To ensure inmates receive prompt crisis assessment to authorize the most appropriate level of care for youths detained at the Lubbock County Juvenile Justice Center.

**Protocol**
- Eligibility determination for all LRMHMR services including Psychiatric hospitalization is available 24/7, 365 days a year. The telephone number to reach a crisis worker is (806) 740-1414 or 1-800-687-7581.
- Triage will obtain information on the presenting problem and determine the necessary disposition for the crisis call.
- Crisis assessment is provided face to face, at LCJJC unless otherwise directed by facility management, with the youth/legally authorized representative (LAR).
- Crisis services may include but is not limited to
  a. Assessment of dangerousness of the individual to self or others
  b. Coordination of crisis services
  c. Problem solving
  d. Behavior skills training to assist in the reduction of stress
  e. Reality orientation
  f. Providing guidance and structure to the individual in adapting to and coping with stressors
  g. Completing outpatient eligibility determination
- Inpatient eligibility includes risk of harm to self; risk of harm to others.
- Assessment for hospitalization is provided one-on-one, in-vivo both off and on site with individual/LAR.
- After determining eligibility and need for inpatient treatment, the assessor authorizes admission and records the admission on the hospital log. The assessor communicates the following information to the admitting facility:
  - Name of consumer
  - Date of birth
  - Social security number
  - Medicaid, private insurance or any third party information
  - Presenting problem
  - Status of admission
- The admitting facility will receive a copy of:
  - Hospital assessment
  - Voluntary admission and/or involuntary commitment documentation
  - Pertinent medical information/documentation
- Peace officer(s) will provide transportation to admitting facility. Alternate transportation may be utilized if necessary through Lubbock Aid Ambulance and coordinated by the assessor.
B. **Continuity of Care:**

**Continuity of Care Requirements for Children and Youth Admitted to an Inpatient Facility**

**Policy**

The organization insures that services following discharge from an inpatient facility are responsive to the needs of the individual, complying with the provisions as outlined in Title 25 TAC, Chapter 412, Subchapter D, Post Discharge/ATP: Contact and Implementation of Continuing Care Plan Standards, §412.208.

**Purpose**

Prior to and post discharge, staff working with children and youth admitted to an inpatient facility shall follow this procedure as listed.

- The designated staff person shall make face-to-face contact within seven days after discharge of a person who was admitted to an inpatient facility.
- The designated staff person shall develop or review a person's treatment plan within three weeks after the face-to-face. The treatment plan shall include all clinical and non-clinical services and supports recommended in the continuing care plan or justification for their exclusion.
- The designated staff person shall make a good faith effort to locate and contact a person who fails to show up for the face-to-face contact. If the designated Local Mental Health Authority (LMHA) does not have a face-to-face contact with a person, then the designated staff person shall document the reasons for not doing so.
- The designated staff person will ensure that the person previously admitted to an inpatient facility has an appointment with a physician scheduled to occur before the earlier of the following events: the day the person's entire supply of medication from the State Mental Health Facility (SMHF) has been administered as prescribed; or the 15th day after the person is discharged from inpatient facility if the person was placed on psychoactive medications.
- The designated staff person shall document in the person's record the continuity of care activities described in this section, and the person's responses to those activities.

C. **Transportation:**

Transportation is not an issue or barrier due to the assessment team will travel to the youth in crisis unless the facility prefers another location.

D. **Juvenile Probation Plan**

LCJJC currently contracts with a provider other than LRHMHR for mental health professional services to meet the requirements of Title 37 TAC, Chapter 343, Subchapter B, Pre-Adjudication and Post-Adjudication Secure Facility Standards §343.10. If requested, LRHMHR would contract with LCJJC to provide a mental health professional to participate in the development and review of the Suicidal Youth Prevention Plan and conduct assessments and referrals as required.

IV. **Identification of High Risk Consumers:**

As stated earlier, the Uniform Assessment provides information to identify persons at high risk for criminal justice involvement identified by various risk factors. Daily census of arrests and
releases are accessed via the Lubbock County Jail website. MOUs have also been executed with the surrounding counties of Crosby, Cochran, Hockley and Lynn for a process to collect the arrest and release data from these four counties. This data identifies the number of people that are detained or incarcerated that have been active in the Client Assignment and Registration System (CARE).

V. **Matching Jail and Detention Records with CARE:**
Inmates detained at the Lubbock County Jail are cross-referenced with the CARE System daily. MOUs with Crosby, Cochran, Hockley and Lynn County Jails give the ability to do the same. Referrals received from the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) in Huntsville are also cross-referenced to the CARE System.

VI. **Procedures for Referrals:**

A. **Lubbock County Jail [Memorandum of Understanding, MOU, 2/1/05 – 8/31/08]**

**Booking/Intake**
- Every individual presented for admission into a detention facility is screened for mental disability during booking, in accordance with jail commission standards.
- All initial screening efforts are documented on a Mental Disability/Suicide Intake Screening (MD/SIS) form for each detainee. Each form is forwarded to Lubbock County Hospital District (LCHD)/Medical staff by the end of each shift, and the date and time recorded in the detainee’s jail file. LCHD/Medical staff place this form into the detainee’s medical file. All individuals identified to be in need of further psychiatric evaluation are forwarded to LCHD/Medical staff immediately.

**Evaluation of Objective Information**
- During booking, jail medical staff may contact LRMHMR to determine whether the person receives services from LRMHMR, what medication may be prescribed, and other related issues.
- If feasible, the booking officer consults with the officer who transported the detainee to jail to determine whether the detainee’s behavior since encountering law enforcement authorities indicates a possible mental disability, and whether the officer knows that the detainee has a history of mental disability.

**Detainee Interview**
- Upon notification by the booking department, LCHD/Medical staff screen identified detainees.
- Staff will indicate on the MD/SIS whether the detainee needs further evaluation by LRMHMR staff.
- If further evaluation is appropriate for any detainee, LCHD/Medical staff arrange for evaluation by LRMHMR to be completed within the following time frames. Emergent evaluations are completed within 1 hour. Urgent evaluations are completed within 24 hours. Routine evaluations are completed within 14 days. (See urgent, emergent, routine definitions in attachments.) LCHD/Medical staff will fax a copy of their screening to Triage at 740-1515. When making this referral, LCHD/Medical staff provide the following information:
1. Legal name
2. Social security number
3. Home address and phone #
4. Date of birth
5. Sex
6. Ethnicity
7. Marital status
8. Family size

- Further evaluation for mental disability consists of an evaluation performed by LRMHMR Assessment staff. This must be performed by a psychiatrist, psychologist, or clinician with a master’s or higher academic degree in the behavioral sciences credentialed by LRMHMR. If the detainee is found to meet the Department of State Health Services (DSHS) target population guidelines at the time of this evaluation, an initial psychiatric history and exam including diagnostic, financial, and service eligibility is generated.
- LRMHMR Assessment staff performs these evaluations at the Lubbock County Jail. Whenever possible several assessments are scheduled consecutively. LCHD/Medical staff arrange for the assessment. There are no restrictions on the times that an assessment may take place within the Lubbock County Jail.

**Access to Mental Health Professionals**
- When an evaluation indicates that a detainee meets DSHS target population criteria, LRMHMR staff notifies LCHD/Medical staff that the detainee is opened for LRMHMR services. LCHD/Medical staff arranges for jail staff to schedule an appointment with a LRMHMR psychiatrist for further examination. The detainee, detainee’s family, and detainee’s friends must not be notified of appointment time for safety reasons. A copy of the psychiatric history and exam is given to LCHD/Medical staff for the jail/medical record. If the detainee is not found to meet DSHS target population guidelines, this information is provided to LCHD/Medical staff so that the detainee’s needs can be met through other jail resources.
- LCHD/Medical staff will notify Lubbock County jail administration when a detainee is determined to meet DSHS target population. If determined appropriate for diversion, Lubbock County jail administration begins to work with the District Attorney’s office.
- The detainee is assigned to the appropriate LRMHMR staff. If detainee is already a member of the Assertive Community Treatment (ACT) team, they continue to follow. The LRMHMR staff work with detainee, jail staff, LCHD/Medical staff, and any assigned LRMHMR provider staff to ensure that continuity of care is followed and detainee’s psychiatric needs are met. The LRMHMR staff ensures that the detainee has access to all psychiatric medications prescribed by the LRMHMR psychiatrist. LRMHMR staff will follow the “Medication to Lubbock County Jail” protocol.
- The LRMHMR staff also notify assessment and support staff of detainee’s imminent release so that the initial psychiatric history and exam can be revised to reflect needs of detainee once living in the community and assignment of the detainee can move to community based staff.
Transfers from Lubbock County Jail to Sunrise Canyon Hospital

- If during the screening process, the LCHD/Medical staff determines that a detainee may be in need of inpatient psychiatric services at Sunrise Canyon Hospital, they contact the LRMHMR crisis line at 740-1414.
- Crisis line staff will take pertinent information and contacts the LRMHMR Assessor covering emergencies.
- The LRMHMR Assessor evaluates the detainee at the Lubbock County Jail within 1 hour of the initial call to the Lubbock Regional MHMR Crisis line. The LRMHMR Assessor gathers all pertinent information from LCHD/Medical staff. The LRMHMR Assessor completes the “LRMHMR” Inpatient Consultation Assessment”.
- If admission to Sunrise Canyon Hospital is authorized, the LRMHMR Assessor contacts the SRCH physician who makes the final determination for admission. The physician also determines whether medical clearance will be obtained through UMC/ER or at the Sunrise Canyon Facility.
- The LRMHMR Assessor contacts the SRCH charge nurse to authorize admission.
- The LCHD/Medical Staff arrange for transport to SRCH and the UMC/ER, if deemed necessary.

B. Referrals from TCOOMMI -Huntsville
The Texas Correctional Office of Offenders With Medical or Mental Impairments (TCOOMMI) Continuity of Care (COC) worker arranges to interview the inmate at the designated prison unit within one week (or as soon as possible) of receiving Referral Form 1 from TCOOMMI.

C. Juvenile Probation:
- Juvenile Probation/Parole Officers send the Referral Form by fax to (806-740-1515) LRMHMR triage department to schedule an appointment with Intake/Assessment and to the TCOOMMI Program Director by fax (806-766-0387).
- A face-to-face intake appointment is scheduled.
- Upon determination of eligibility, the appropriate service package is recommended.

D. TYC:
Protocol for TYC Referrals
- TYC sends referrals to the LRMHMR Contracts Management Department.
- The Contracts Management Department forwards the referral to the TCOOMMI Program Director, Triage, the Triage Director, and the Utilization Management Department.
- The TCOOMMI Program Director makes contact with TYC by email or phone call. The PSW/Case Worker’s name and phone number or email address is on the referral form at the top of the page. We use email if possible so that we have a paper trail. When no email address is included with the referral, we use the phone number instead and we ask for the firm date of discharge verification and post discharge records which include: social history, medical records, and discharge summary.
- The TCOOMMI Program Director emails the TCOOMMI Huntsville Office to apprise them of the contact with TYC.
- The TCOOMMI Program Director attempts to contact the parent/guardian/LAR to explain the benefits of the TCOOMMI program to them. The TCOOMMI Program
Director also tells them how to make contact with the TCOOMMI Program Director either when the youth is discharged or they receive a firm discharge date confirmation. The process for calling triage at 806-740-1421 prior to the youth’s discharge from TYC is also explained at this time.

- The TCOOMMI Program Director notifies TCOOMMI staff of the assessment appointment times so that they can be present to initiate treatment.
- The TCOOMMI staff notifies the TYC Parole Officer of the appointment time so that he/she can be present to share relevant information at the intake/assessment appointment.
- Upon discharge, the youth and parent/guardian/LAR attends the screening and assessment appointment for eligibility determination.
- The assessor sends the assessment package through the Utilization Management department for authorization as soon as the Uniform Assessment and Diagnosis are completed.
- The Utilization Management department calls the TCOOMMI staff on their individual cell phone numbers (whoever is at the assessment) with either a denial or an authorization after a decision has been reached.
- The TCOOMMI staff completes a treatment plan with the youth, parent/guardian/LAR and the TYC Parole officer present.
- The TCOOMMI Program Director makes the staff assignment as soon as the Utilization Management department authorizes the youth to receive services.
- The TCOOMMI Program Director notifies the TCOOMMI office in Huntsville of the intake disposition within ten (10) working days.

E. Drug Court:
Protocol for the Access to Recovery (ATR) Program

- Assessment will be provided promptly within 48 hours to eligible clients referred by the drug court.
- The assessment will be conducted by qualified staff using the Addiction Severity Index (ASI) and a modified Brief Psychiatric Rating Scale (BPRS) and client placement guidelines.
- The Behavioral Health Integrated Provider System (BHIPS) will be used to determine the client’s financial eligibility, to record the assessment and all other services provided to the client, including development of an individual service plan.
- An electronic voucher will be initiated in BHIPS for each client to access treatment and recovery support services based on the needs identified in the assessment.
- The client will be referred to other community services, including state agencies, for appropriate services, such as assistance with food and medical needs and application for Texas Assistance to Needy Families (TANF).
- The client will be assisted to: choose appropriate eligible providers based on the client’s service plan, be successfully referred to the selected provider, confirm provider availability, and schedule an appointment. If a client requests a change in treatment or recovery support provider, the request will be discussed with the client, assisted to select an alternate provider, and be successfully linked to services.
- Case management services, including service coordination for all services will be provided to include conducting status interviews at prescribed intervals, updating vouchers as service needs change, communicating changes in client status to the drug court and serving as billing/fiscal agent for recovery support providers as necessary.
VII. Pre and Post Booking Diversion Strategies:

A. Protocol coordinating services for detainees with suspected mental disabilities In the Lubbock County Jail.

Initial Contact
- A County Mental Health Officer/Lubbock Sheriff’s Officer (LSO) is available to respond to crisis calls in which mental health issues may be a factor both in the Lubbock County jail and in the community.
- In a psychiatric emergency the County Mental Health/LSO communicates with LRMHMR Triage staff (740-1414) to obtain relevant information that will assist in getting the individual the appropriate care needed in that specific situation.
- When placing an individual who may be mentally ill into protective custody due to potential harm to self/others or inability to care for self, the County Mental Health Officer/LSO takes the individual to the Lubbock County Jail facility to await an evaluation by a LRMHMR Assessor. Dispatch contacts the LRMHMR crisis line (740-1414) to notify of the need for an evaluation. Once notified by dispatch the LRMHMR Assessor arrives at the Lubbock County Jail within 1 hour to complete an evaluation.
- Upon evaluation, the LRMHMR staff member provides a recommendation for the least restrictive environment to ensure proper treatment of the individual. If the individual is not being hospitalized, transportation is provided back to the individual’s residence by LSO unless LSO chooses to book on related charges. If the individual is being hospitalized, the proper medical clearance and admission protocol is followed. LSO transports the individual to the proper facility (Sunrise Canyon Hospital or UMC/ER).

B. Pre-Booking: Juvenile Detention Center:
The Provision of Services for youth who are at risk of entering the juvenile justice system.

Policy: The organization makes attempts to engage into services, children and youth, who are at risk of penetrating the juvenile justice system.

Purpose: In efforts to minimize youth who have serious emotional disturbance from further penetration in the juvenile justice system the following protocol shall be followed.

Procedure:
- LRMHMR assessment personnel will conduct appointments at the offices of Lubbock County Juvenile Probation. The frequency of these appointments will be negotiated by LRMHMR and Juvenile Probation staff dependent on Juvenile Probation’s need.
- Lubbock County Juvenile Probation will make space available to LRMHMR staff, suitable to conduct consumer and parent interviews.
- Lubbock County Juvenile Probation will schedule and maintain all assessment appointments to be conducted within their offices. Appointment times will be predetermined and agreed upon by both LRMHMR and Juvenile Probation.
Probation will have the discretion of prioritizing appointments based on youth who are most at need.

- Juvenile Probation Officers will identify youth who may be in need of mental health services. An appointment will be scheduled via the designated Juvenile Probation staff. The Juvenile Probation Officer will communicate the appointment date and time to the youth and parent(s) along with the expectation of their attendance.
- LRMHMR assessment staff will conduct on-site eligibility screenings and assessments, and when indicated, will ensure the completion of the necessary documentation needed for service authorization.
- To help facilitate an accurate assessment of the youth, Juvenile Probation will ensure pertinent information about the youth is available to the LRMHMR assessment staff. This information will preferably be communicated face-to-face by Juvenile Probation, or at a minimum, through appropriate documentation, i.e. TCOOMMI referral form, etc.
- In the event that a youth does not meet service eligibility criteria, LRMHMR staff will communicate the outcome to either the youth’s Juvenile Probation Officer or to designated Juvenile Probation staff.
- LRMHMR rehabilitation staff will be present at each assessment appointment. They will be responsible for the ongoing care of the youth; and with input from the youth, family and Probation officer, will develop a treatment plan. In addition the LRMHMR rehabilitation staff will assist the family with completing applications to any available third party resources (MDCD, CHIP). The goal of this initial participation by the rehabilitation staff is to ensure that programming can begin immediately upon the authorization of service.
- Prior to traveling to Lubbock County Juvenile Probation for an intake assessment, LRMHMR staff will contact the designated Juvenile Probation staff to confirm the scheduled appointment(s). In the event that an appointment is not scheduled, the LRMHMR staff will not travel to the Juvenile Probation site.
- Lubbock County Juvenile Probation and LRMHMR will make all reasonable efforts to assure that predetermined appointments are scheduled and attended by the participants in order to facilitate program efficiency.

VIII. Services in Jail:

A. Protocol for Obtaining Psychiatric Medication for LRMHMR Consumers

- LRMHMR will ensure that authorized consumers have access to all psychoactive medication prescribed by LRMHMR. These funding sources include but are not limited to the Lubbock County Jail (LCJ) formulary, Medicaid, family, United Coalition voucher.
- When Lubbock County Hospital District (LCHD/medical staff determines that an inmate in the LCJ is likely to meet eligibility guidelines for DSHS, target population, the LCHD staff will refer that inmate to LRMHMR for assessment following the protocol for “Coordinating Services for Detainees with Suspected Mental Disabilities.”

B. Protocol to Provide Physician Services to Incarcerated ACT Consumers

The assigned ACT physician/extender will see each consumer a minimum of one time per month in Lubbock County Jail.

C. Services in Juvenile Detention:
LCJJC currently contracts with a provider other than LRMHMR for mental health professional services. LRMHMR does provide crisis assessment.

IX. Services After Release from Jail

A. Protocol for Continuity of Care During Release of LRMHMR Consumers

• When an inmate is scheduled for release by whatever means, the Release Officer will notify Lubbock County Hospital District (LCHD)/Medical Staff of planned release. LCHD/Medical Staff will notify the Lubbock Regional MHMR (LRMHMR) TCCOOMI Continuity of Care (COC) worker so a follow up appointment can be scheduled with LRMHMR.
• Whenever possible the Lubbock County jail will call the COC Worker in advance to notify which detainees are being released.
• In the event that the detainee’s needs are immediate, the COC Worker will work with the LRMHMR Assessors to obtain a referral for necessary resources.
• On weekends and evenings the LSO can leave a message on the COC Worker's voice mail informing them what detainee(s) have been released and what problems/needs have been identified.
• For immediate/crisis needs on weekends and evenings the LSO can call the crisis line at (806) 740-1414.

B. Services After Release from Juvenile Detention

The Provision of Services for Youth who are discharged from Juvenile Detention or the Texas Youth Commission.

Policy: The organization makes attempts to engage into services to children and youth, who are currently in the juvenile justice system or at risk of or are incarcerated.
Purpose: In efforts to minimize youth who have serious emotional disturbance from further penetration in the juvenile justice system the following protocol shall be followed.

Procedure:

• LRMHMR assessment personnel will conduct appointments at the offices of Lubbock County Juvenile Probation. The frequency of these appointments will be negotiated by LRMHMR and Juvenile Probation staff dependent on Juvenile Probation’s need.
• Lubbock County Juvenile Probation will make space available to LRMHMR staff, suitable to conduct consumer and parent interviews.
• Lubbock County Juvenile Probation will schedule and maintain all assessment appointments to be conducted within their offices. Appointment times will be predetermined and agreed upon by both LRMHMR and Juvenile Probation. Juvenile Probation will have the discretion of prioritizing appointments based on youth who are most at need.
• Juvenile Probation Officers will identify youth who may be in need of mental health services. An appointment will be scheduled via the designated Juvenile Probation staff. The Juvenile Probation Officer will communicate the appointment date and time to the youth and parent(s) along with the expectation of their attendance.
• LRMHMR assessment staff will conduct on-site eligibility screenings and assessments, and when indicated, will ensure the completion of the necessary documentation needed for service authorization.

• To help facilitate an accurate assessment of the youth, Juvenile Probation will ensure pertinent information about the youth is available to the LRMHMR assessment staff. This information will preferably be communicated face-to-face by Juvenile Probation, or at a minimum, through appropriate documentation, i.e. TCOOMMI referral form, etc.

• In the event that a youth does not meet service eligibility criteria, LRMHMR staff will communicate the outcome to either the youth’s Juvenile Probation Officer or to designated Juvenile Probation staff.

• LRMHMR rehabilitation staff will be present at each assessment appointment. They will be responsible for the on going care of the youth; and with input from the youth, family and Probation officer, will develop a treatment plan. In addition the LRMHMR rehabilitation staff will assist the family with completing applications to any available third party resources (MDCD, CHIP). The goal of this initial participation by the rehabilitation staff is to ensure that programming can begin immediately upon the authorization of service.

• Prior to traveling to Lubbock County Juvenile Probation for an intake assessment, LRMHMR staff will contact the designated Juvenile Probation staff to confirm the scheduled appointment(s). In the event that an appointment is not scheduled, the LRMHMR staff will not travel to the Juvenile Probation site.

• Lubbock County Juvenile Probation and LRMHMR will make all reasonable efforts to assure that predetermined appointments are scheduled and attended by the participants in order to facilitate program efficiency.

X. Integration of Community Resources
The Competency Restoration Program initiated in 2003 at Sunrise Canyon Hospital ensures access to the most appropriate and available treatment in the person’s home community for individuals judged incompetent to stand trial.

Multiple funding sources for criminal justice related services have been aggressively pursued to supplement general revenue funded services.

XI. Collaboration and Coordination
• The LRMHMR Planning Network Advisory Committee (PNAC) recruited a peace officer from the Lubbock Police Department to serve on the committee. The PNAC is charged by the LRMHMR Board of Trustees to assist the Board in an advisory capacity by making recommendations concerning the development of the Local Plan and the development, design, management, evaluation and procurement of providers within the Service Delivery System.

• Both the Lubbock County Drug Court and the Mental Health Court task force represent a wide base of community stakeholders.

• The MOUs with the Criminal and Juvenile Justice entities call for joint review and updating of both MOUs and protocols during the year as system changes occur.

• The South Plains Association of Governments (SPAG) Criminal Justice Community 2004 Plan was reviewed to identify priority needs in the community.
Robert D. Morgan, Ph.D., is the Associate Clinical and Forensic Director of Lubbock Regional MHMR Center and maintains an independent practice in Criminal Forensic Psychology. He provides supervision to assessment staff and is also the Director of the Competency Restoration Program at Sunrise Canyon Hospital. Dr. Morgan is also the principal investigator of a current research grant addressing *Thinking Patterns of Mentally Disordered Offenders* and a previous grant addressing *Inmate Perceptions of Mental Health Services*.

LRMHMR has been awarded grant funding through the Department of State Health Services (DSHS) to develop and implement an Access to Recovery (ATR) program. A provider network will be built of community and faith-based organizations within the catchment area that are willing to offer treatment and recovery support services to people addressing substance abuse recovery issues. Referrals are made to LRMHMR program by the local Community Supervision and Corrections Department (CSCD) Probation Department supervising officers or courts. CSCD clients may self-report to LRMHMR and upon being identified as a probationer and approval from his/her supervising officer or court initiate services. LRMHMR published a Public Notice January 7-9, 2006 to the attention of Substance Abuse Treatment and Recovery Support Providers. An ATR Informational Meeting was provided by DSHS staff at LRMHMR on January 19, 2006 for those interested in becoming a part of the ATR Provider Network.

The CJJ Advisory Committee initiates approval and oversight of the Jail Diversion Plan. The Jail Diversion Plan is incorporated into the LRMHMR Local Plan and follows the Local Planning Process and Quality Management Process of LRMHMR. The basic tenant behind the local planning strategy is that every aspect of the process should include mechanisms for consumer, family, stakeholder, and community participation. The flow of the Local Planning and Quality Management program is illustrated by the following:
### XII. Action Steps

<table>
<thead>
<tr>
<th>Action Step</th>
<th>Assigned</th>
<th>Due</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Implement a formal Continuity of Care process for person’s released from the Lubbock County Correctional Facility who meet the eligibility criteria for LRMHMR services</td>
<td>2-01-05</td>
<td>Closed</td>
<td>Behavioral Health Division L. Valderaz</td>
</tr>
</tbody>
</table>

**Status:**
A meeting was held with the Lubbock County Correctional Facility Director on April 5, 2005. The meeting was held with Magda Rivera and Leonard Valderaz discussed the purpose of the Jail Diversion Plan. It was agreed that she would discuss the plan with her staff and begin developing a referral process. Ms. Rivera also requested a tour of Sunrise Canyon Hospital; we agreed that she would contact me within two weeks.

In July, contact was made with Magda’s assistant and he informed L. Valderaz that the special needs program would no longer be funded; therefore, work did not need to continue on a process. LCCF will contact L. Valderaz if the funding issue changes.

2. Develop MOUs with Hockley, Crosby, Cochran and Lynn County Jails to report arrests and releases daily to LRMHMR | 2-01-05  | 8/31/06 | Contracts Director R. Johnston    |

**Status:**
MOUs are executed for 4/1/05-8/31/06 with Hockley, Crosby, Cochran & Lynn County Jails

3. Criminal and Juvenile Justice Advisory Committee Initial Meeting | 2-01-05  | 2-16-06 | Behavioral Health Division Liaison to LCDC T. Gilbert |

**Status:**
The Lubbock County Drug Court members were presented with the proposal to accept the charge as the Criminal and Juvenile Justice Advisory Committee 1-26-06. Members expressed interest in filling role as Advisory Committee. Next meeting scheduled 2-2-06.

4. Develop MOU with Lubbock County Drug Court (LCDC) | 2-01-05  | Executed 1-18-06 | 1-18-07 | Contracts Director R. Johnston |

**Status:**
Submitted to LCDC for execution 1-18-06

5. Explore resources to create (1) FTE position to serve as a MH liaison to the criminal and juvenile justice entities within the (5) county service area.
   a. Develop job description
   b. Develop budget for position
   c. Submit as Grant Proposal to TCOOMMI | 2-01-05  | Closed  | Behavioral Health Director M. Gerlach Resource Mgmt Director G. Loftus |

**Status:**
Reviewed a Request for Proposal issued 11-16-05 by the Department of State Health Services, “Projects for Jail & Juvenile Justice Diversion”. Requirements for consideration were not met.

6. Joint review of Jail Diversion Plans – LRMHMR and South Plains Association of Governments (SPAG) | 2-01-05  | 7-1-06  | Planning Director J. Harvey |

**Status:**
SPAG Criminal Justice Community Plan 2004 obtained. Executive Summary to be forwarded to LCDC for review of priority community needs identified.

### Added: 2-01-06

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<tr>
<td>7. Increase Access to Recovery (ATR) provider network</td>
<td>2-01-06</td>
<td>12-31-06</td>
<td>Contracts Department M. Ford</td>
</tr>
<tr>
<td>8. The LCDC, performing as the Criminal and Juvenile Justice Advisory Committee, will review and update the Jail Diversion Plan as needed and at least every 6 months.</td>
<td>2-01-06</td>
<td>7-6-06</td>
<td>Behavioral Health Division Liaison to LCDC T. Gilbert</td>
</tr>
<tr>
<td>9. A Mental Health Court will be established in Lubbock County</td>
<td>2-01-06</td>
<td>2-01-07</td>
<td>Behavioral Health Director Mary Gerlach</td>
</tr>
</tbody>
</table>

### XIII. Training to Local Law Enforcement

For at least five (5) years, LRMHMR’s Risk Management Director, Rebeca Wallace, had participated in the Lubbock Poliicy Academy training of new recruits. Effective January 1, 2005 the Texas Commission on Law Enforcement Officer Standards and Education, TCLEOSE, implemented changes to the curriculum. The crisis intervention and mental health curriculum is now mandated to be taught by specialized officers certified in the curriculum. The Lubbock Police Academy has asked Ms. Wallace to continue in the capacity of consultant. Training of law enforcement entities, police departments, sheriff departments, judges, parole officers, probation officers, etc. is recognized, as a priority need.