

Behavioral Health in Corrections...

More than just a jail

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Relevant History & Current Trends



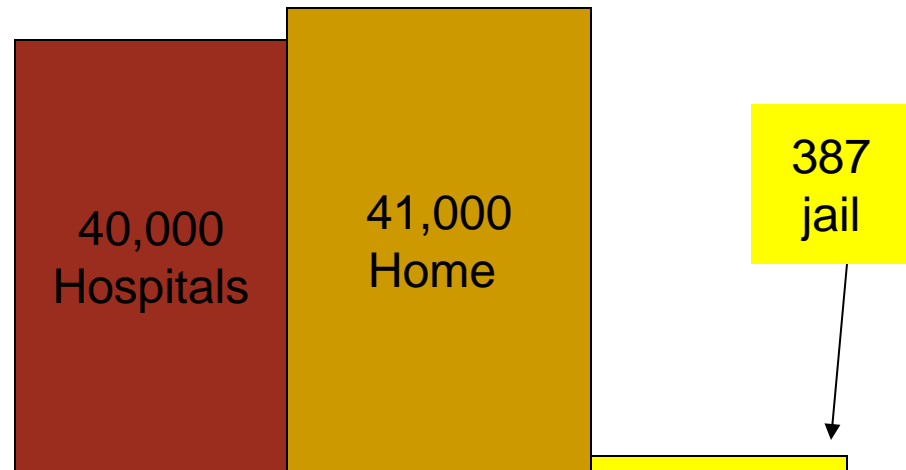
“Boring” but Relevant History

- 1773 The first hospital for the mentally ill opened in Williamsburg Virginia
- 1827 Massachusetts began investigating conditions for mentally ill offenders in jails
- 1840-47 Dorothea Dix began crusading for proper treatment & was effective in getting hospitals built
 - 32 institutions throughout US and Canada



The First Complete Census

In 1880 the first complete census of insane persons was carried out. Census takers wrote to psychiatrists asking them to enumerate all “insane persons” in the community, hospitals, jails and almshouses. Results were...



More “Boring” but Relevant History

**THE GREAT DEPRESSION
ERA**

1920's to 1945ish

**1949 Nobel Prize awarded
for Prefrontal lobotomy!**

November 1963

**President Kennedy
assassination**

1952 Thorazine Introduced!

Wildly popular by 1954

Deinstitutionalization:

Decreasing public hospitals beds in favor of community based treatment



The Psychiatric Titanic

One of the most well-meaning but poorly planned social changes ever carried out in the United States.

President John F. Kennedy's October 1963 Community Mental Health Centers Act

Deinstitutionalization

LIFEBOAT ANYONE?



- The number of inpatient beds available to each group of 100,000 citizens decreased from over 200 beds in 1970 to 17 in 2005. (Est. min is 50)
- In 1955, 77% of all patient care episodes in mental health organizations took place in 24-hour hospitals.
- By 1994, although the numbers of patient care episodes increased by more than 500%, only 26% of mental health treatment episodes were in these hospitals.
- The total estimated shortfall of public psychiatric beds needed to achieve a minimum level of psychiatric care is 95,820 beds.

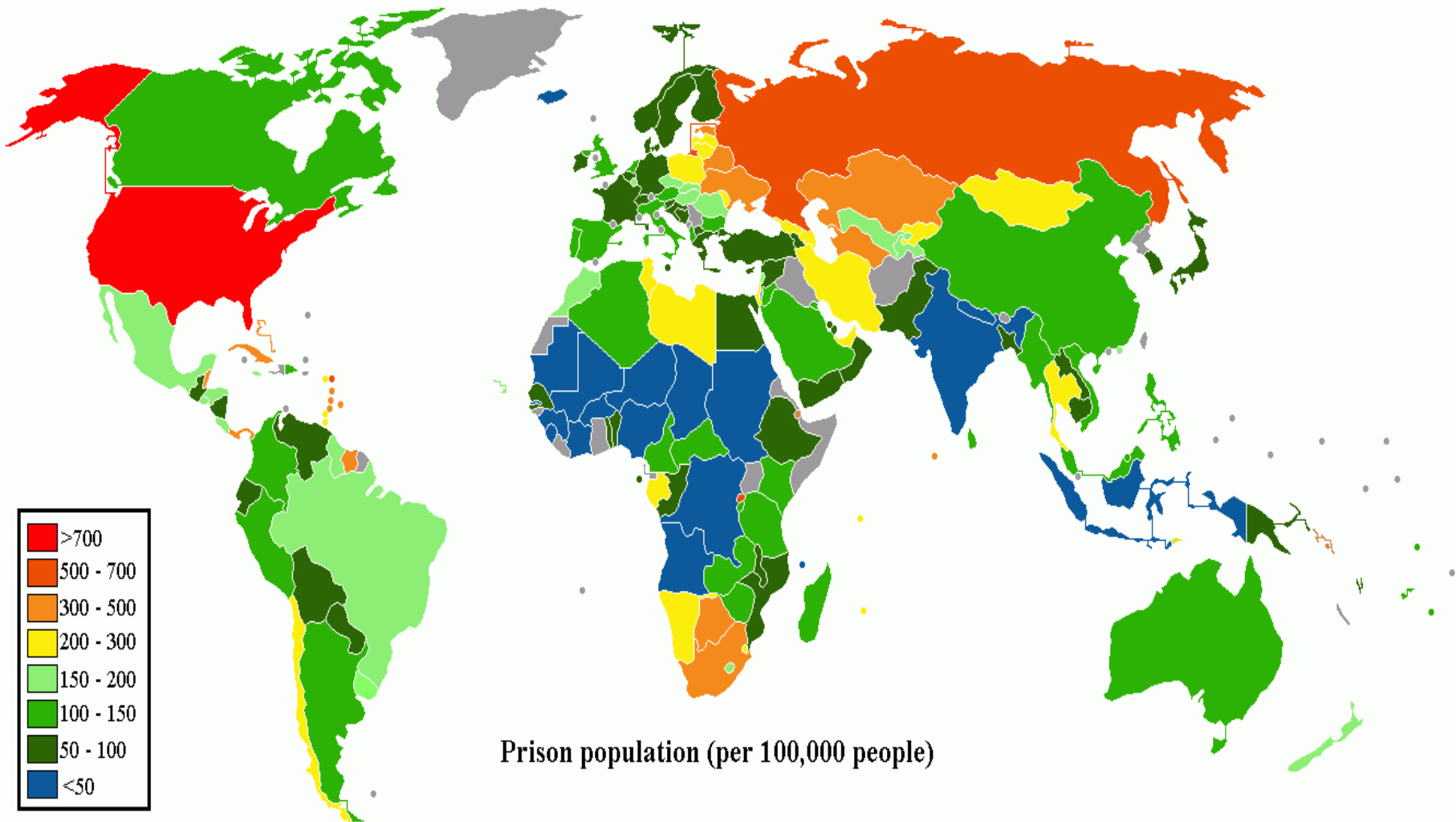
Transinstitutionalization

From hospitals...to jails

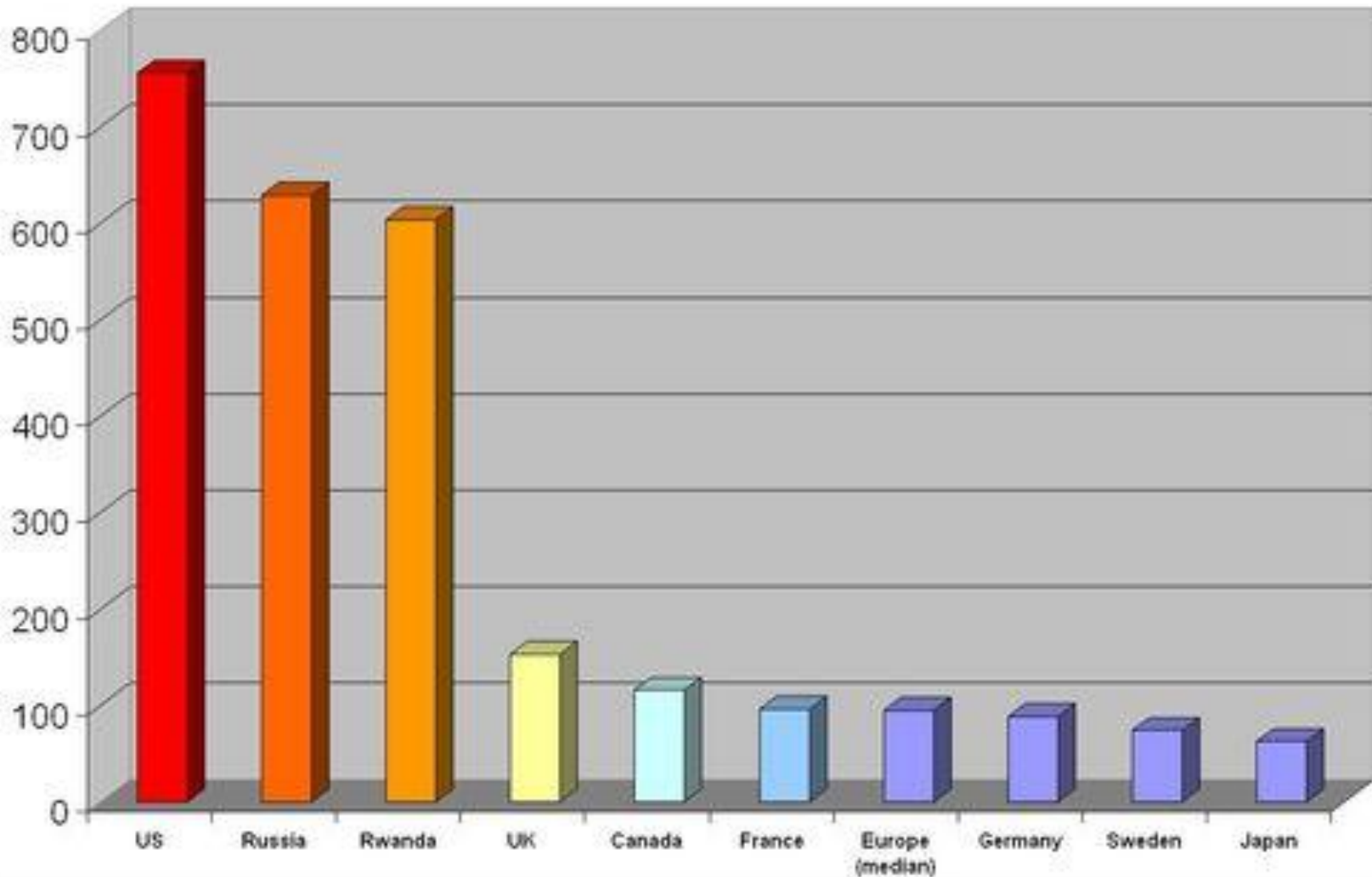
Nation's Largest Psychiatric Institutions:

1. Los Angeles County Jails
2. Rikers Island Correctional Facility in New York City
3. Cook County Jail in Chicago



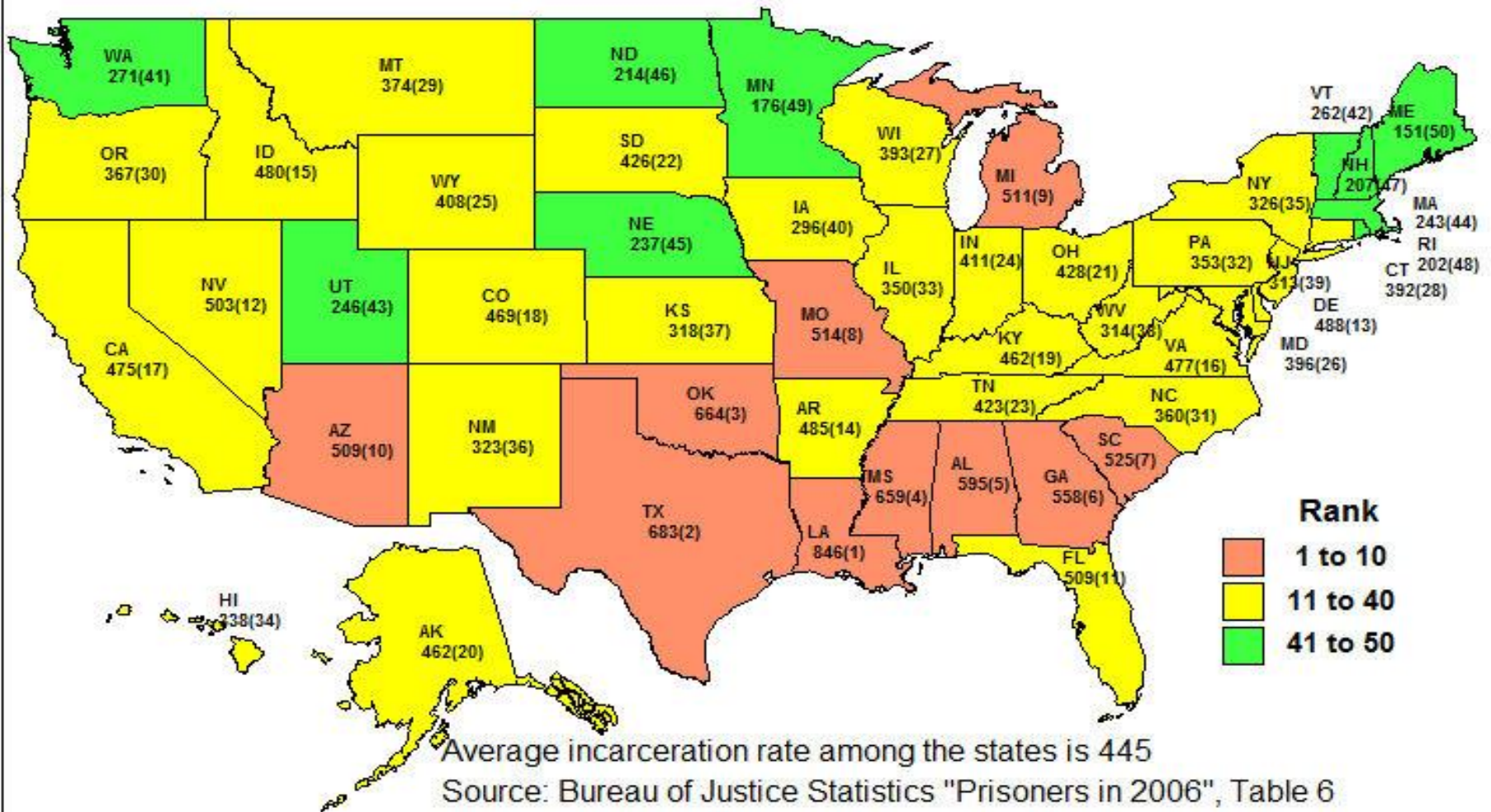


Incarceration Rate Per 100,000 People



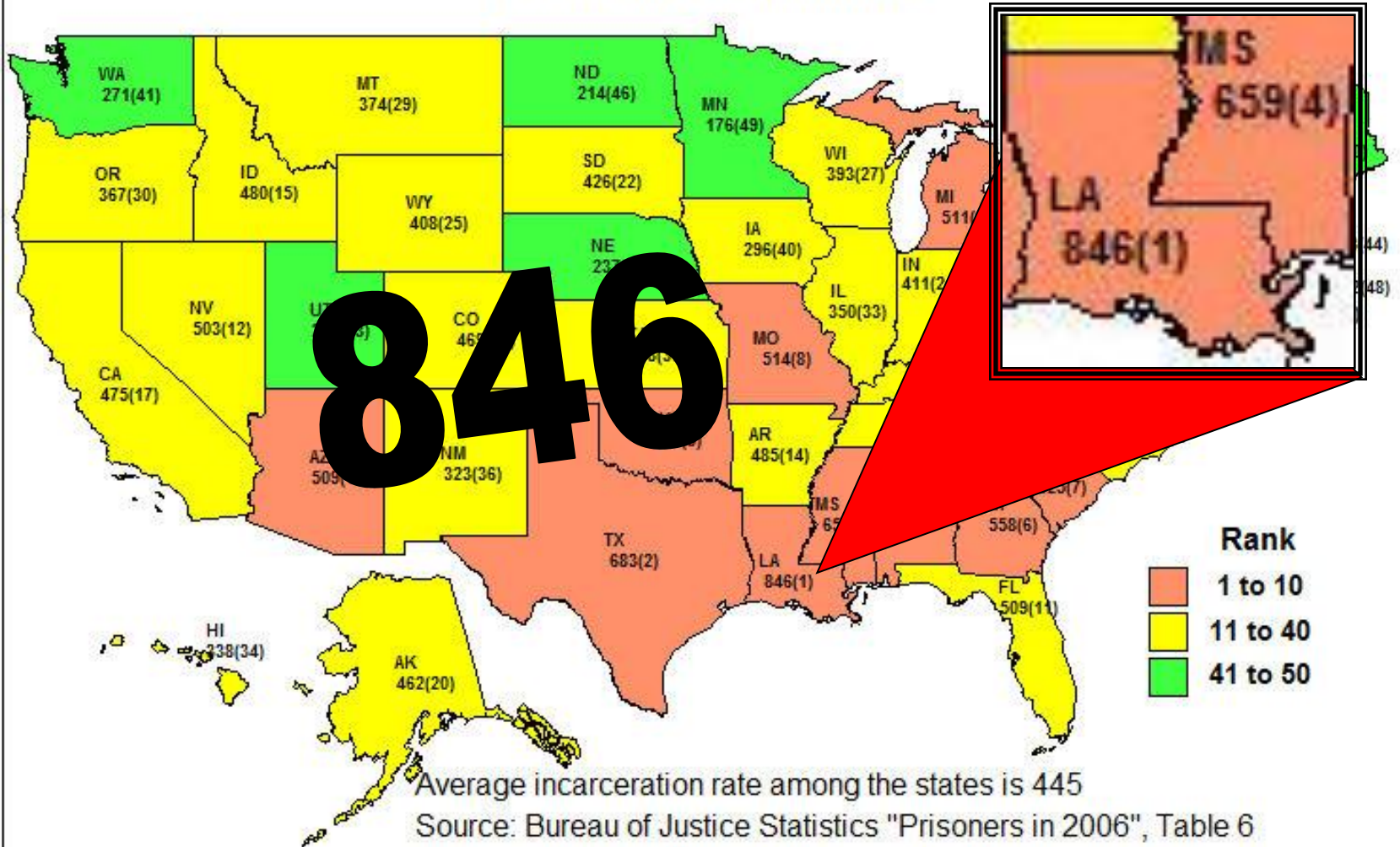
2006 Incarceration Rate(Rank)

Per 100,000 Population



2006 Incarceration Rate(Rank)

Per 100,000 Population



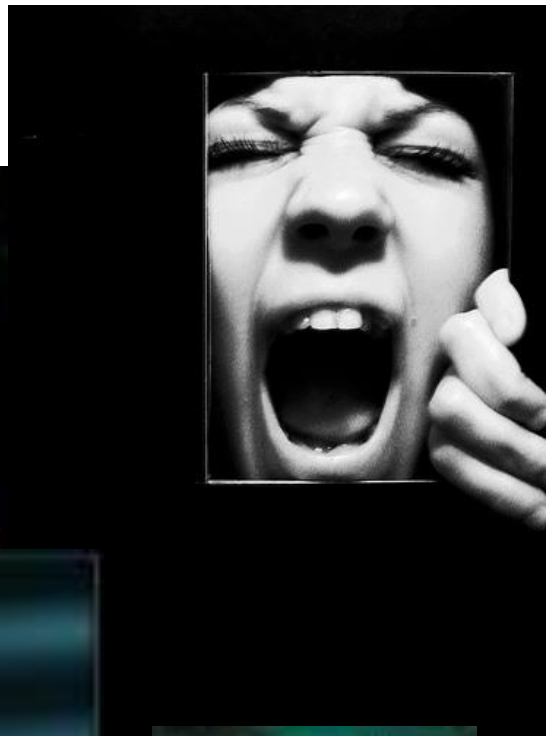
And today....

- *Louisiana has the **highest** incarceration rate per capita in the **world!***
 - Largely due to our Louisiana criminal justice system:
 - The District Attorney's office has:
 - **45** days for a misdemeanor
 - **60** day for a felony
 - To “formally charge” you with a crime
 - At which point you are scheduled for a first appearance (FAPP)
 - Then scheduled for your next court date about a month later
 - Vera Institute of Justice released a study in 2012
 - The annual average taxpayer cost was \$31,286 per prison inmate

Goals for Jail Behavioral Health

- To divert offenders to community care and treatment
- If not able to be diverted...
 - Provide adequate level of care & treatment while incarcerated
 - Ensure safety and wellbeing of offenders, staff, and other people in jail
- To maximize continuity of care and treatment for offenders in the community following release from incarceration
 - Establishing links

Common Diagnosis



Common Diagnoses

(exacerbation of symptoms brought on by incarceration)

- Depression
- Bipolar Disorder
- Schizophrenia
- Personality Disorders
- Addictive Disorders



Treatment in Correctional Settings



Dr. Terry O'Leary, Assistant Center for Correctional Research, Department of Psychology, University of North Carolina at Charlotte

Basic Behavioral Health Services for All Offenders @ LPCC

- A range of services available, include, but are not limited to:
 - Crisis intervention services
 - Psychotropic medication management, when indicated
 - Individual counseling & group counseling
 - Psychoeducational programs
 - Treatment documentation and follow-up post incarceration
 - Specialize housing
 - ID & referral of offenders in need
 - Transitional Coordinators
- We follow the *National Commission for Correctional Health Care (NCCHC)* Standard of Care for which we are accredited
- This is not the norm
 - Correctional facilities do not receive additional funding for special needs offenders, nor the medication associated with them

Unfortunate & Ugly Reality

- Correctional institutions are not mental health friendly~ they are *de facto* treatment facilities
- Most people with mental illness who are incarcerated have broken a law, but it is often due to their mental illness not strictly criminality.
 - And some mentally ill people spend time in jails without having committed any offense at all. Several states authorize the police to arrest mentally ill people who have not broken any law, simply to promote public order.
 - Ex: Remaining after forbidden or Loitering
 - More commonly, hospitals transfer patients to jails to handle overflow.
 - Society often prefers punishment over treatment
 - “The War on Drugs”
- Offenders with mental illness have a higher rate of violent behavior and disciplinary write ups than non-mentally ill offenders
- Malingering exists

Local Jails (\$54 a day)

- Lafayette Parish pays \$24.39, Department of Corrections (DOC) pays \$3.50
- LPCC was originally designed for 338, now holds 954

- Release without notice
 - Time served
- Detox
- Screening & Assessment
- Crisis
- Suicide risk
- Brief therapy
- Misdemeanor charges
 - Although LPSO books & releases these with a summons
- Community providers
 - Often run on grants which end
- Poor community service availability
 - Long waiting lists
 - Refusal to make appt prior to release
 - understaffed
- Continuity of Care
- Staffing
- Rural Communities

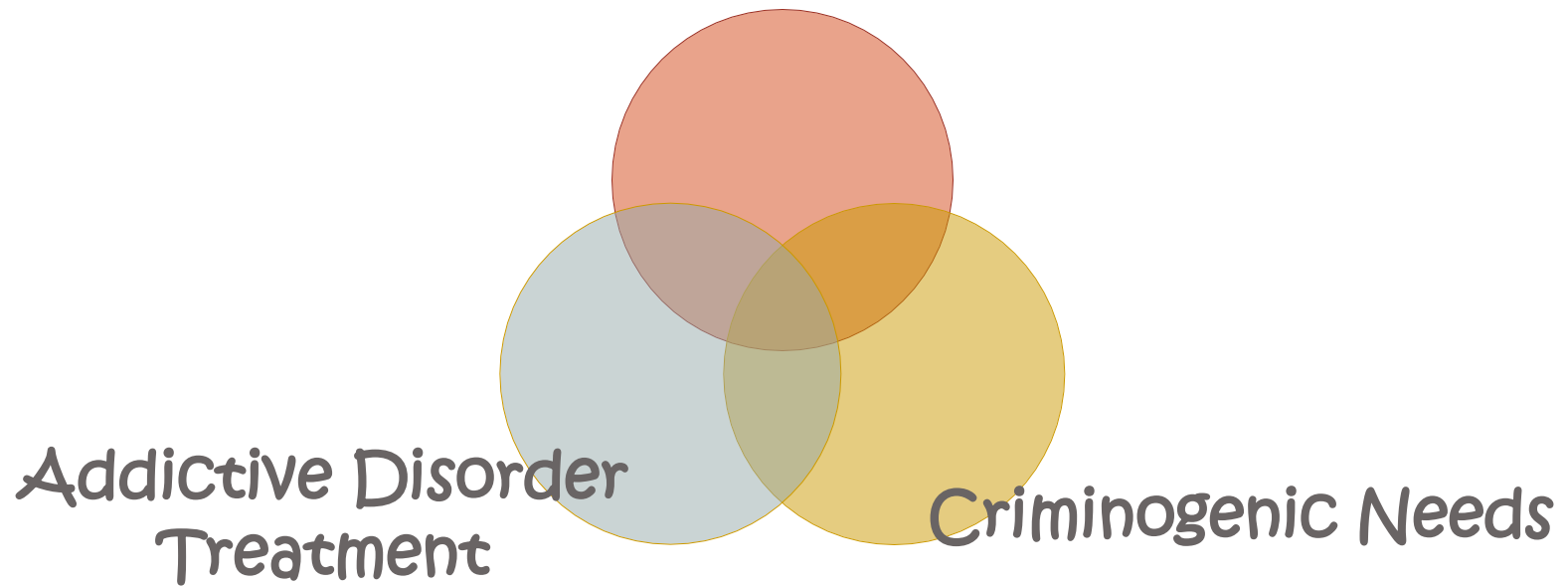
Local Jails

- Release without notice
- Detox
- Screening
- Crisis
- Continuity of Care
- Staffing
- Rural Communities
- Misdemeanor charges
- Community providers
- Poor

Treatment is difficult!

Which Cycle do we address?

Mental Health Needs



Staff training is key!

The Reference Handbook

- Anger
- Antisocial Behavior
- Anxiety
- Depression
- Eating Disturbances
- Educational Deficits
- Grief/Loss
- Hygiene Issues
- Mania
- Psychosis
- Sexual Abuse: Victim or Predator
- Substance Abuse Intoxication/Withdrawal
- Suicidal Ideation



Effective Treatment

Effective treatment (for recidivism) tends to target criminological needs.



Community Corrections Campus Programs

(\$33 a day)

-offender participants live at home and report daily

- 100 Poydras St
- Alternative Sentencing Program (ASP)
 - GPS
 - Day Reporting
 - Education (Hi-Set, formally GED)
 - Job & Life skills training
- Drug Testing Lab (newest addition)
- DOC Re-Entry program
 - Up to 100 offenders
- Behavioral Health Treatment
 - Clinical Services @ CCC
 - Average 500 clients seen per year

Community Corrections Campus Programs

cont.

- Acadiana Recovery Center Outpatient Services (formally Day Reporting Intensive Outpatient Program -DRIOP)
 - Traditional 90 day outpatient (**average 200 clients per year**)
 - Weekly Substance Abuse Education Classes (**average 150 clients per year**)
 - ReIOP (**average 200 clients per year**)
- Youth Services (now its own Division)
 - Check and Connect (formally Leadership and Resiliency)
 - Annual Free Summer Camp offered
 - Milestones
 - Functional Family Therapy (FFT)
 - Truancy
 - Teen Intervene
 - **NEW** Youth Assessment Center
 - Cognitive Behavior Therapy (CBT)
 - **NEW** Teen Court programming

Additional LPSO Treatment Programs:

offered to offenders and the public

- Behavioral Health Services at Lafayette Parish Correctional Center (LPCC)
 - Over 1000 clinical contacts per year
 - Helping Offenders Parent Effectively (HOPE)
 - Knowledge is the Effect (KITE)
- Acadiana Recovery Center (ARC) - 401 W. Vermilion St
 - 24 bed Residential treatment facility
 - Serves over 300 clients per year
 - Conveniently located behind the jail and across the street from the Transitional Housing Facility
- REHAB - 401 W. Vermilion St
 - 4-6 months Intensive Outpatient Program
 - Serves over 200 clients per year
 - Housing component provided by the TWF
 - Live at the TWF and work in the community

In May 2013: Received accreditation by the Commission on Accreditation of Rehabilitation Facilities

- Internationally recognized standards
- This allowed us to obtain additional funding as a Magellan provider of Medicaid
 - Additional monies are used to provide additional services or grow current services
- Other funding sources:
 - Office of Behavioral Health Department of Health and Hospitals grant
 - Louisiana Rehabilitation Services (LRS)
 - The Sheriff's General Fund
 - Sliding fee scales



NPR.org

States Push For Prison Sentence Overhaul; Prosecutors Push Back by Martin Kaste

July 9, 2014



The Lafayette Parish Correctional Center in downtown Lafayette, La. By most counts, Louisiana has the highest incarceration rate in the country, but sentencing reformers have loosened some of the state's mandatory minimum sentences and made parole slightly easier to get.



So HOW did we do it?

1. It starts with 1 person.
2. Set up small wins.
3. Go see it.
4. Learn something from the failures.
5. Redefine what “making a difference” means.
6. Do not get overwhelmed.
(How do you eat an elephant?)



VISIT THE WEBSITE
WWW.LAFAYETTESHERIFF.COM

OR

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ARC (residential)/REHAB (IOP)

#236-5446

ARC Outpatient Services (ARCOS)

#231-6365x4300

Youth Services

#231-6365 x4290



Thank you!