



Law and Justice Interim Committee

60th Montana Legislature

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July 21, 2008

TO: Law and Justice Interim Committee Members

FROM: Subcommittee on Jail Standards and Suicide Prevention
Chairman: Sen. Gary Perry
Members: Sen. Jent and Rep. Ebinger

RE: Subcommittee Report

Subcommittee's tasks

On June 27, 2008, Law and Justice Interim Committee (LJIC) Chairman, Sen. McGee, appointed a three-member subcommittee consisting of Sen. Perry (chairman), Sen. Jent, and Rep. Ebinger. The Subcommittee was tasked to develop a bill draft to "generally revise jail and inspection standards in Montana with a focus on the prevention of suicide". (Motion by Sen. Jent) Later in the meeting, on June 27, Committee discussion led to general instructions to the Subcommittee to also consider what mental health data should be collected from jails, how, and to whom it should be reported.

Meeting on July 17

The Subcommittee on Jail Standards and Suicide Prevention met in Bozeman on July 17, 2008, to deliberate and discuss these tasks with key stakeholders. The Subcommittee walked through the decision points outlined in a memorandum by David Niss dated June 27, 2007 [2008] entitled "Subcommittee Bill Draft Ideas". Copies of the meeting agenda and the memorandum are attached.

Key stakeholders present and participating in the discussion were:

- Sheriff James Cashell, Gallatin County
- CPT Dennis McCave, Yellowstone County Detention Center and President of the Montana Sheriffs' and Peace Officers' Association (MSPOA)
- Jim Smith, Executive Director, MSPOA

- Terry Jessee, LCPC, Billings Clinic, stationed at the Yellowstone County Detention Center
- Deb Matteucci, Behavioral Health Program Facilitator, DPHHS/DOC
- Roland Mena, Executive Director, Montana Board of Crime Control

Public comment was also offered by:

- Jan Dwyer, ACLU - Montana
- Matt Kuntz, Executive Director, NAMI - Montana
- Charley McCarthy on behalf of himself and Disability Rights Montana

Actions and instructions to staff

The following is an outline of the Subcommittee's decisions and instructions to staff in drafting a bill for the full committee's consideration. These actions and instructions follow the decision point outline in the attached memorandum by David Niss.

1. Montana Mental Health Crisis Network for jail suicide prevention inspired by the Kentucky model
 - a. Discussion throughout the afternoon indicated that the Subcommittee favored flexibility out of recognition that one-size does not fit all. However, the Subcommittee also recognized that standardization in terms of a screening form and a general flow chart of process and risk management protocols was desirable. Thus, the general sense of the Subcommittee was for middle of the road detail in the bill draft.
 - b. The bill should provide for a pilot project.
 - c. The program should be administered by the DPHHS (as the agency the most deals with mental health providers and for which the statewide suicide prevention coordinator works).
 - d. Statute should not specify the screening form, however, the agency should be instructed to "work toward uniformity" and the development of standardized forms in consultation with detention centers and appropriate professionals.
 - e. The location of the mental health professionals should be left up to the agency,

which could contract with a mental health center or other interested private or non-profit entities. Or, the program could be done through the telepsychiatry program envisioned for the MSH. The agency should have the flexibility to do one or a combination of these approaches. However, it was agreed that the ultimate goal was a regional approach.

- f. The bill should basically mirror what Kentucky does with regard to follow-up in the jail, but the agency should be relied on to work with the contract provider in determining whether a mental health professional would need to be dispatched to the jail or whether videoconferencing follow-up would be sufficient. A sequential "flow chart" approach to risk management protocols for each level of suicide risk should be outlined either in administrative rule or through the contract with the providers, not in statute. The bill should include language to emphasize that jails are not the proper place for mental health treatment and that detainees with mental illness should be diverted from jail entirely. *[Staff comment: The bill could include a cross reference to section 53-21-138, MCA.]* However, it was agreed that the specific provisions of the bill draft should remain focused on the in-jail risk-management protocols and follow-up and not on mental health treatment through a diversion alternatives. Nonetheless, the Subcommittee strongly agreed that there was a need to develop diversion alternatives (i.e. secure crisis stabilization services).
- g. The bill should provide for certain basic suicide prevention and risk management protocols, but these protocols should be general in nature and take a middle of the road approach that is sensitive to differing capabilities and resource limitations at smaller jails.
- h. See the instructions in paragraph 1. e., above.
- i. & j. The bill should include a general fund appropriation for the program.
- k. The effective date should be July 1, 2009.

ADDITIONAL ITEM: The bill should require a report to the LJIC with special attention to collateral impacts, such as reducing access to mental health services by others (i.e., whether the program places additional pressure on an already pressured community mental health system), additional diversions to community crisis centers, or more transportation to the MSH.

2. Jail Standards and Training

- a. The Subcommittee decided not to pursue jail standards and training beyond the jail suicide prevention crisis network discussed under section 1. above.

- b. N/A.
- c. See d. below.
- d. See instructions under section 1. above relevant to suicide prevention protocols. The bill under section 1. above should outline that either through rule, policy, or contract, whichever is the appropriate vehicle, the protocols should outline risk management protocols to be taken by the jail. *[Staff note: Technical details would need to be worked out concerning how a state agency could, in effect, regulate a county jail if not in the context of an inspection program.]*

e. thru l.

The Subcommittee was assured by the MSPOA representatives that the association was moving forward with a peer inspection program and that it would keep the LJIC apprized of its progress.

3. Collection of jail mental health data.

a. & b.

As part of the jail suicide prevention program under section 1., DPHHS should ensure that data is collected and reported. The reporting should include the collateral impacts (see 1. ADDITIONAL ITEM above). Also, specific case study evaluations should be required -- Roland Mena can assist in developing a description of what this involves.

The Subcommittee, having completed its business, adjourned.