Editor’s Note

I, like many of you, often find myself having a conversation about where I work and what I do. The conversation inevitably ends with someone saying, “I didn’t know those services were offered in the jail.” So, as the New Year begins, what better time to introduce to the community the forensic services provided within the jail, and as the year progresses, more detail about the jail and other services provided by MHMRA of Harris County to the criminal justice community? Additionally, I hope to bring to light some of the great work agencies from across the country are doing to help consumers of mental health services remain in the community and keep the cuffs off.

Harris County Jail Mental Health Services Overview

By Robert Simon

Mental health services in the Harris County Jail can often begin long before a person arrives to the jail. Arresting officers obtain pertinent information that is shared with Harris County Sheriff’s Office (HCSO) Jail staff at the time of booking. HCSO security staff will ask additional questions regarding mental health history as well as thoughts of self harm. The booking process culminates with a nursing assessment to determine any medical and/or mental health needs that warrant contact with a provider prior to a person receiving their housing assignment.

Individuals needing mental health services will be seen by an MHMRA psychiatrist in the Front Door Clinic located in the 1200 Baker Street Jail. The Front Door Clinic is the first contact a mental health patient will have with a MHMRA psychiatrist. The psychiatrist will complete an evaluation looking at mental health needs and will make housing recommendations. Some will go to general population and others may go to one of the Forensic Inpatient Services mental health units.

Forensic Inpatient Services consist of two (2) infirmary cell blocks and three (3) step-down units. These cell blocks are a joint effort between MHMRA and HCSO. Staff for the infirmary units consist of HCSO nursing, psychiatric technicians and specially trained deputies. In addition, MHMRA provides psychiatrists, physician assistants (PA), advance practice nurses (APN), clinical case managers, and other licensed clinicians. Licensed clinicians such as Licensed Chemical Dependency Counselors (LCDC), Licensed Professional Counselors (LPC), Licensed Clinical Social Worker (LCSW) and etc., provide group counseling to address mental health and substance abuse needs.

Services for individuals housed in general population are provided by the Forensic “Outpatient Services” and Chronic Care Units. “Outpatient Services” consist of licensed clinical staff and psychiatric staff who respond to request for MHMRA services from patients, HCSO staff, family members, courts and many others. These clinicians complete assessments and determine the most appropriate level of care needed at that time. Chronic Care consists of registered nurses and psychiatrists who are responsible for monitoring and addressing ongoing medication concerns expressed by patients or any other referral source. Patients who are stable and require no medication changes or concerns, are seen face-to-face by a registered nurse, at least once every ninety (90) days, and then discussed with an MHMRA psychiatrist. Continuity of Care services, for individuals active with MHMRA community clinics at the time of arrest, are provided by case management staff.

Psychologists are available to conduct evaluations for those individuals whose competency or sanity come into question. The Competency and Sanity Unit completes evaluations in the jail and at MHMRA’s Bristow Clinic for individuals out on bond.

The final and newest program is the SB1185 or Harris County Mental Health Jail Diversion Program. This program is under the direction of Dr. Regenia Hicks out of Harris County Judge Ed Emmett’s Office. This program works closely with multiple stakeholders to provide services in and out of the jail. Look for future articles regarding this exciting new program, along with in-depth looks at all jail services.
Legal Corner

By Kendra Thomas

A significant number of persons with mental illness are incarcerated in local jails and state prisons. For example, in 2014, the average monthly jail census in the Harris County Jail was 7289 detainees and approximately 30% of the jail population was prescribed medication to treat a mental illness. The Harris County Jail continues to be a primary mental health care provider in the community. This growing public health problem emphasizes the ongoing need for community mental health treatment providers to enhance and expand proactive clinical practices that promote productive and healthy living within the Harris County community, avert psychiatric crises and contact with law enforcement, and prevent the incarceration of persons with mental illness.

“JAIL IS THE LAST THING MENTAL PATIENTS NEED...AND TOO OFTEN, THEY EXPERIENCE. Please join us in our quest to decriminalize mental illness in America...”

-Dorothea Lynde Dix (1802 - 1887)

Detainees have a constitutional right to adequate medical and mental health care, including psychological and psychiatric services. Constitutional standards of mental health care include the following elements:

1) A system to screen and evaluate detainees to identify mental health needs;
2) Treatment that involves more than segregation and seclusion;
3) Skilled and trained mental health professionals participating in the delivery of individualized treatment;
4) Accurate, complete and confidential mental health records;
5) Medication that is not prescribed in dangerous amount, by dangerous methods or without appropriate supervision and periodic evaluation;
6) A basic program for identifying, treating and supervising detainees who are at risk of harming themselves.

Detainees’ rights are violated when jail or prison officials exhibit deliberate indifference to detainees’ serious medical needs. The same constitutional standard applies to the mental health care of detainees. Jail personnel exhibit deliberate indifference when there is a “reckless disregard of a substantial risk of harm to a person.” More specifically, jail personnel must have known of and disregarded a serious risk of harm to a detainee by failing to take reasonable steps to eliminate the risk.

The mental health care services provided at the Harris County Jail meet and exceed the constitutional standards of care. The mental health care services provided at the jail include a pre- and post-booking screening, referral and evaluation process, structured therapeutic activities, a specialized mental health treatment unit, individualized treatment plans for detainees with chronic care needs, and ongoing collaboration among medical, mental health and trained security personnel to enhance access to care for detainees with mental illness. The mental health personnel at the jail also provide discharge planning services to detainees with mental illness by engaging spouses, friends, attorneys and community mental health providers.

While the Harris County Jail provides comprehensive mental health care to detainees, this is an expensive and reactive response to the mental health care needs in Harris County. In most cases, incarceration has lifelong consequences. Once a person has a criminal record, it is difficult to obtain gainful employment, housing and reinstatement of benefits. Cost-effective and productive community mental health treatment programs, such as, assertive community treatment (ACT) programs, mobile crisis response teams and supportive employment and housing programs have limited capacity and are often underfunded. State legislators and local mental health care providers must develop an action plan to address the unmet mental health needs in the community and invest in community mental health programs that reduce the likelihood that persons with mental illness will become incarcerated.

3 Estelle, 429 U.S. at 102.
4 Hoptowit v. Ray, 682 F.2d 1237, 1254 (9th Cir. 1982); Bowring v. Godwin, 551 F.2d 44, 47 (4th Cir. 1976).
Farewell to a Rose

On January 30, 2015, Rose Childs retired from MHMRA of Harris County after 42 years of service with MHMRA and the Harris County community.

Rose started her career as a caseworker in 1973 worked her way to Deputy Director of Adult Mental Health Services. Rose Childs was an exceptional leader, teacher and coach. No matter what the challenge, she was always “right there on the front line or in the trenches” with you. Rose cultivated the development of many, many staff.

Laughter is a great characteristic of Rose. She sprinkled cheer throughout the week and, often, made it feel good to be at work.

She truly loves people- getting to know them and she appeared genuinely interested in various aspects of their lives. Rose was like a magnet; co-workers were drawn to her.

I would like to thank Pat Sibley and Debbie Shelby for helping summarize the many things Rose was to MHMRA and this community.

Did you know MHMRA will be celebrating 50 years of service to the Harris County Community this year?

Changes

Considerable changes occurred as MHMRA said farewell to Rose. MHMRA leaders choose to divide the Adult Mental Health Division creating two distinct divisions. Leadership responsibilities for community services has been assumed by Interim Deputy Director Michael Downey. Monalisa Jiles has assumed responsibilities as Interim Deputy Director of the newly created, Forensic Division.

Next Issue: See What is Happening at DDRP