

**Lincoln, Nebraska
December 12, 2007**

**JUSTICE BEHAVIORAL HEALTH COMMITTEE
*MEETING MINUTES***

The Justice Behavioral Health Committee (JBHC) of the Community Corrections Council (Council) met Wednesday, December 12, 2007, in Conference Room B, at Bryan LGH West, Lincoln, Nebraska. The meeting was open to the public and was preceded by advance publicized notice in the Lincoln Journal Star.

Members Present:

John Atherton
Jerome Barry, Co-Chair
Scott Carlson
Dave Carver
Kathleen Grant
Linda Krutz
Joel McCleary
Rick McNeese
Terri Nutzman
Michael Overton
Bruce Prenda
Christine Salvatore
Lee Tyson
Linda Wittmuss

Members Absent:

Michael Behm
Robert Bell
Roxie Cillessen
Ellen Fabian-Brokofsky
Cathy Gibson-Beltz
Lori Griggs
Julie Hippen
Lee Kimzey
Randy Kohl
Lewien, Barbara
Dennis McChargue
Mona McGee-Snyder
Deb Minardi
Nancy Probst
T. Hank Robinson
Steve Rowoldt, Co-Chair
Kathy Seacrest
Dave Wegner

Council Staff Present:

Nickette Allen
Tia Bachman
Jeffrey Beaty

Others Present:

Toni Arntzen

WELCOME & INTRODUCTIONS

Jerome Barry, Co-Chair, called the meeting to order and announced that the meeting was subject to the Nebraska Open Meetings Act. Attendance is indicated above. Linda Krutz introduced Jeffrey Beaty as the new Policy Analyst for the Community Corrections Council (Council). Each member present introduced him or herself and gave a brief statement about their involvement.

APPROVAL OF MINUTES

Members reviewed the September 12, 2007 meeting minutes. A correction was made on page 7 to change 'The Evidence Based Practice Committee met October 23, 2007' to 'The Provider Subcommittee met August 23, 2007.' Michael Overton moved for approval of the September 12, 2007 minutes as corrected. John Atherton seconded the motion and the motion passed unanimously by acclamation.

MEMBERSHIP VACANCIES

JBHC consists of thirty-seven total committee members. Five member positions are currently vacant.

Rick McNeese will propose a candidate for the Department of Correctional Services (DCS) Behavioral Health vacancy at the next meeting.

Krutz noted the Governor has not yet filled the two Council vacancies.

Jeff Runnings declined the consumer position as voted on during the September 12, 2007 meeting. Bruce Prenda will propose a new consumer at the next meeting.

Discussion on the Criminal Defense Attorney vacancy was postponed until the next meeting.

COMMUNITY CORRECTIONS COUNCIL REPORT

Krutz gave the Community Corrections Council Report and noted the Council meeting minutes from November 2, 2007 were included in the packet. Krutz noted the Council meeting scheduled for December 14, 2007 is postponed until December 21, 2007 due to the unavailability of the Vera Institute of Justice (Vera) final report on the Probation/ Parole Services Study.

Krutz stated Vera is working with Council staff to facilitate a strategic planning retreat for the Council. It will be held February 6-8, 2008.

Mike Overton gave a report on the Uniform Data Analysis Fund and will also have a standing agenda item at successive meetings. Overton stated Mike Dunkle, Crime Commission, is obtaining data from Probation regarding Specialized Substance Abuse

Services (SSAS), compliance of the Standardized Model, and use of the Simple Screening Instrument (SSI).

PROBATION ADMINISTRATION UPDATE

Christine Salvatore gave the Probation Administration Update. Salvatore noted Probation has visited five provider facilities in Omaha, three in Lincoln, and will visit provider facilities in western Nebraska in the following weeks to train providers on the use of the computer based Fee for Service voucher program. Salvatore stated providers thought it was a simple process once they were trained. Salvatore noted the process for payment of vouchers has been expedited from six weeks to three weeks.

Probation will be implementing evidence based practices (EBP) throughout the state on January 1, 2007. Salvatore noted EBP is a combination of evidence based principles, organizational development, and collaboration between agencies. The implementation will change how offenders are classified and supervised. Intensive Supervision Probation (ISP) will change to Community Intervention Supervision (CIS). The change will allow Probation to avoid over supervising low risk offenders and under supervising high risk offenders. In conjunction with the Presentence Investigation (PSI), Salvatore noted two tools will be used to screen offenders. The Proxy will be utilized first and if necessary the Level of Service/Case Management Inventory (LS/CMI) will also be conducted.

Salvatore noted the information from the LS/CMI would be very useful to substance abuse providers. Barry noted providers will need to be trained on how to read the LS/CMI reports.

Salvatore stated Probation is not adequately equipped to deal with the mental health population, and noted the need to look closer at how to meet the needs of offenders that are dually diagnosed. Krutz noted the *Strategic Planning Workshop on Transforming Services for Persons with Mental Illness in Contact with the Criminal Justice System* hosted by the Department of Health and Human Services (DHHS) on December 5-6, 2007 addressed this issue. During the meeting, Probation officers noted they do not feel adequately trained to deal with mental health offenders.

Barry noted the only dual disorder recognized by Nebraska is two 'Axis I category diagnosis'. In the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association as the standard for diagnostic criteria in determining mental illness; Axis I is described as mental illness, and or substance abuse or dependence. Wittmuss noted most state issued federal funding involves the dual disorder residential program, and the expectation is for an offender's co-existing mental illness to be stable enough to then treat the substance abuse problem.

Barry noted a Licensed Alcohol and Drug Counselor's (LADC's) scope of practice is having the competency to screen for substance abuse; not assess, diagnose, or treat. The American Society of Addiction Medicine (ASAM) expects substance abuse

providers to have the capability to make appropriate referrals for assessment. On December 11, 2007 Governor Heinemann signed a bill to give continuing education to LADC's regarding substance abuse. Barry noted the oral evaluation for LADC will be eliminated in 2008 and only a written exam will be required.

John Atherton noted a Licensed Mental Health Practitioner (LMHP) and LADC can not make a diagnosis for a major mental illness, but the Licensed Independent Mental Health Practitioner (LIMHP) can make a diagnosis the same as a psychologist. Barry noted during training conducted with LADC's, they stated they are taught to only treat Substance Abuse cases. Salvatore noted many LADC's are practicing outside their scope of practice. Barry stated recent decisions made by the licensing board to punish LADC's who are practicing outside their scope in order to receive payment from insurance companies.

Carver questioned the difference between screening and diagnosis and requested JBHC look at creating a verbal assessment tool. Barry questioned if there was a document already available that could be used to assess mental issues. Carver suggested creating a standardized model for mental health screening. Barry questioned if it was presumptuous to draft a standardized evaluation for mental health. Carver noted the Addiction Severity Index (ASI) covers some parts of the mental health history, and state laws delineate who can screen and assess.

Barry requested 'Co-occurring Mental Health/ Criminal Justice Discussion' be an agenda item for the March 12, 2008 meeting.

Kathleen Grant said she is the co-chair of the Co-occurring Task Force in Omaha. Grant noted they are the recipients of a two year training grant from Community Benefit Trust to conduct a series of workshops and small group mentoring programs for LADC's and LMHP's. Lee Tyson said she is willing to write the Screening, Brief Intervention, Referral and Treatment (SBIRT) grant due January 31, 2008. Grant is willing to send the proposal information used two years ago to apply for a grant.

Tyson noted DHHS has been asked by the Center for Substance Abuse Treatment (CSAT) to conduct a statewide needs assessment. Tyson stated this would be an opportune time to assess needs for co-occurring mental health offenders. Tyson noted DHHS Behavioral Health will host a conference in 2008, and suggested JBHC conduct training at the conference.

A 10 minute recess was called.
Called back to order at 11:06.

PAROLE ADMINISTRATION

The Parole Administration report will be tabled until the March 12, 2008 meeting.

JUVENILE REPORT

Terri Nutzman gave a report on Juvenile Services. Nutzman noted a Request for Proposal (RFP) was created for a Juvenile Services Triage Center for Douglas & Sarpy counties, and a letter of intent was posted on the website. Heartland will partner with Girls and Boys Town to implement the program. Nutzman noted the expected opening date is March 2008.

Nutzman noted the Youth Level of Service/Case Management Inventory (YLS/CMI) risk assessment will be administered within two hours of sentencing. Office of Juvenile Services (OJS) officers will also administer the Diagnostic Interview Schedule for Children (DISC) within seven days. If further testing is needed, the Comprehensive Children and Adolescent Assessment (CCAA) will be administered within 14 days. OJS officers will be trained to uniformly administer all assessments.

Barry questioned how this process compares with the Supreme Court ruling in which all adolescents are required to receive the Comprehensive Adolescent Severity Inventory (CASI) when arrested. Nutzman noted the CASI which is part of the CCAA will still be used if the juvenile is suspected of have a drug or alcohol dependency.

Wittmuss questioned how the triage center relates with the Child Welfare or Medicaid system. Nutzman noted with the restructuring of DHHS, youth are separated into three categories: 3A - adjudicated as a neglect or abuse by a parent or guardian; 3B - status offender or truant; adjudicated law violator. Nutzman noted the triage center will only house 3B juveniles or adjudicated law violators.

Nutzman noted the goal is to get the youth assessed and back in court within 30 days and be placed in an appropriate facility. While the youth are at the triage center for 30 days or less, they will receive anger management, and drug and alcohol treatment.

Nutzman also noted the center will act as a transitional facility for youth released from the Youth Development Centers at Geneva and Kearney. Youth will be monitored with electronic tracking devices. Nutzman noted the triage center will also act as a crisis center for youth who have graduated from the program.

Nutzman stated the security of the facility will be between Staff Secure Detention and Staff Secure Shelter. The facility will be equipped with delayed doors and cameras to monitor movement. Staff of the facility will be trained in physical intervention techniques which are acceptable to DHHS. Nutzman noted the triage center will be considered a model process and be evaluated in approximately one year. Nutzman said the goal is to bring this service into Lancaster County and eventually provide services further west.

Nutzman noted The Children's Behavioral Health Task Force, created by LB 542, will meet on Friday, December 14, 2008 to vote on whether to close the 40 bed chemical dependency facility at Hastings Regional Center.

SUB-COMMITTEE BUSINESS

Curriculum: Wittmuss gave the update on the Curriculum Sub-Committee. Wittmuss noted the current members of the sub-committee are:

Dave Carver
Dennis McChargue
Monica Miles-Steffen
Kate Speck
Linda Wittmuss

Wittmuss noted the sub-committee has created an algorithm for levels of Knowledge, Skills, and Abilities (KSA's) for providers. Level I is basic knowledge with 1-3 years of experience. Level II is full licensure with 3-6 years of experience. Level III is capable of fulfilling a supervisory role with staff and has 6 or more years of experience. Wittmuss noted the sub-committee is also working on KSA's for continuing education required for providers.

The Curriculum Sub-Committee will meet again in January 2008.

Data: The Sub-Committee will meet in January 2008. Discussion on the Data Sub-Committee is tabled until the next meeting.

Provider: Due to Nancy Probst absence, Barry gave an update on the Provider Sub-Committee. Barry noted the sub-committee will develop a coordinated recommendation of evidence based practices/principles.

During the November 8, 2007 Provider Sub-Committee meeting, attendance included substance abuse professionals/providers from across the state. Barry reviewed the rough draft of evidence based practices prepared by Probst and the sub-committee.

Atherton suggested number six be changed to read: Group therapy is a primary modality of treatment intervention. Wittmuss suggested number three be changed to read: The treatment process incorporates the development of motivation to change techniques and motivational interviewing. Carver noted that developing a relationship with a client is essential.

Barry will relay to Probst the need for the research or bibliography behind each one of these items, and the need for the sub-committee to discuss creating a quality assurance form or procedure.

Barry requested 'Evidence Based Practices and Principles Definition Discussion' be an agenda item for the March 12, 2008 meeting.

PROVIDER FOLLOW-UP SURVEY

Scott Carlson discussed the Provider Follow-up Survey. Carlson noted Zoomerang, a program which is an automated survey tool, was used to conduct the survey. Carlson noted 136 out of 487, approximately thirty percent, of providers responded to the email survey. Carlson noted metro and rural providers were evenly matched in responses.

Carlson noted a significant response was the lack of communication between criminal justice and providers regarding information needed to complete evaluations.

Further discussion of the Provider Follow-up Survey will be tabled until the next meeting to allow all members to review the results.

NEXT STEPS DISCUSSION

The discussion on the Mission, Vision, and Goals will be tabled until the next meeting.

OTHER BUSINESS

Barry discussed the attendance requirement in the guidelines. A report showing attendance of each member in 2007 will be provided at the next meeting. A separate report of members absent more than two meetings in 2007 will be prepared for Barry's inspection only.

PUBLIC TESTIMONY

Toni Arntzen is the coordinator for gambling recovery services at First Step Recovery, one of two organizations who treat compulsive gamblers and family members. Arntzen requested gambling addiction be addressed in a future meetings. Wittmuss noted gambling addiction is a part of the SSI screening.

ADJOURNMENT

The next meeting has been scheduled for Wednesday, March 12, 2008, at 9:30 a.m., at the Bryan LGH West Conference Room A in Lincoln, Nebraska.

There being no further business, the meeting was adjourned.

Respectfully Submitted,

Tia M. Bachman