2011-2012 GRAND JURY REPORT Detention Mental Health Services

Background

The Riverside County Department of Mental Health (RCDMH) is divided into three geographical areas: Western, Mid-County, and Desert. RCDMH Services are provided in all areas, including Detention Mental Health (DMH) which covers Sheriff's County jail sites and the Probation Department's (Probation) juvenile institutions and treatment facilities. Currently there is one DMH administrator for the Sheriff's adult facilities Countywide and three DMH administrators for Probation's juvenile facilities. These are divided by the geographical boundaries that cover the juvenile facilities.

The Riverside County Probation Department is responsible for five juvenile institutions which have a total of 476 beds:

- Riverside Juvenile Hall is located in the City of Riverside, with a bed capacity of 143.
- Southwest Juvenile Hall is located in Murrieta and has 69 beds. This is the only facility that houses females.
- Indio Juvenile Hall and Youth Offender Program (YOP) have a total of 150 beds. Of these beds, 70 are designated for the YOP. A Probation document, entitled Youthful Offender Program, dated September 24, 2007, describes the program as "...designated to reduce criminal behavior of high risk youthful offenders by placing them in a structured treatment program." The program emphasizes education, vocation, and intensive mental health treatment for males and females ages 16 to 21.
- Van Horn Youth Center YOP, located 0.2 miles from Riverside Juvenile Hall, has a bed capacity of 44 for males ages 13 to 16.
- Twin Pines Ranch YOP is located in the San Jacinto Mountains south of Banning. It is designated for males between the ages of 15 and 18 and has a 70-bed capacity.

The Riverside County Sheriff's Department Corrections Support and Corrections Operations Divisions manage five adult detention/correctional facilities that have a total of 3,906 beds. The five facilities combined process approximately 60,000 individuals a year. These facilities are qualified to hold inmates from arrest,

through booking, trial, sentencing, disposition, and serving time as directed by the courts. (Time directed by the courts has increased as of October, 2011, as a result of Assembly Bill 109 (AB109). AB109 requires that certain identified inmates shall serve what were originally state prison sentences over one year in county jails.) Bed capacities shown below are current as of this writing:

- Robert Presley Detention Center in Riverside has 807 beds.
- Southwest Detention Center in Murrieta has 1,111 beds.
- Larry D. Smith Correctional Center in Banning has 1,520 beds.
- Indio Jail in the Coachella Valley has 353 beds.
- Blythe Jail has 115 beds.

The requirement for necessary medical and mental health care for both adult and juvenile inmates is found in California Code of Regulations Title 15, *Minimum Standards for Local Detention Facilities (Division 1, Chapter 1, Subchapter 4)* and *Minimum Standards for Local Juvenile Facilities (Division 1, Chapter 1, Subchapter 5)*. These requirements are the responsibility of the Riverside County Sheriff and Chief Probation Officer for emergency and basic health care in their respective facilities. In the mid-1990's, the Riverside County Board of Supervisors elected to transfer this responsibility to RCDMH.

The Sheriff's and Probation Departments currently contract with RCDMH for inmate mental health services, which are administered through DMH. A Memorandum of Agreement between the Sheriff's Department and RCDMH was approved in December, 2011. It was to provide adequate services and personnel to service the Sheriff's jail inmates in need of mental health services. Probation and RCDMH are currently in the process of developing a Memorandum of Agreement to cover the mental health needs in juvenile facilities.

In 2007, the State of California approved Assembly Bill 191 (AB191) which transferred responsibility for a significant number of high-risk juveniles to the counties from state detention facilities. In 2011, the State of California began the transfer of adults back to the counties under AB109. The Grand Jury received documentation that of the inmates currently being placed into county jails, due to AB109 mandates, more than 40 percent are in need of mental health services. This is twice as many as non AB109 inmates. The adult inmate population resulting from AB109 mandates is currently 25 percent of the total inmate population and is growing. The juvenile inmate population, resulting from AB191 is currently 23 percent of the total juvenile inmate population.

Findings

Detention Mental Health Staffing

1. In July, 2011, DMH was advised in a 2010-2011 Grand Jury report and was notified by the Institute of Medical Quality that the medical/mental health staffing levels in county jails needed to be restored to 2007 levels, in order to be in compliance with Title 15, Chapter 4, Article 9. As of this writing, the Grand Jury learned through sworn testimony that during the eight months following the 2010-2011 Grand Jury report, DMH staffing levels were allowed to decrease even further. This was a result of transferring experienced, mental-health, registered nurses out of the jails before licensed clinician replacements were available. The 2012 RCDMH organizational chart reflects currently there are 21 vacant positions out of 40 positions funded with adult detention facilities and three vacant positions out of nine funded in the juvenile facilities. The same chart shows staffing in adult non-detention mental health facilities as having only one vacant position. The Grand Jury learned from sworn testimony that all have the same credentials, but non-detention clinicians have not completed the required background investigation as required by Title 15.

The same issues exist in juvenile facilities, which also experienced staff reductions in 2009. The current 2011-2012 budget has not restored the juvenile facilities staffing of 2007.

The Grand Jury learned from sworn testimony that filling vacant positions in DMH has been made even more difficult due to the non-competitive salary structure.

Annual Performance Evaluations

2. Through sworn testimony, the Grand Jury learned that up to 60 percent of DMH staff working in detention facilities have not received annual performance evaluations as required by Riverside County Board of Supervisors Policy C-21.

Communication within Detention Mental Health

3. The Grand Jury learned that some detention mental health workers are fearful of communicating with supervisors and/or managers about urgent work-related issues for fear of retaliation. Testimony also revealed that a number of Juvenile DMH clinicians have had onsite visits by their supervisors as few as three times a year.

Temporary Replacement of Mental Health Workers

4. There is an insufficient number of qualified RCDMH personnel to fill vacancies that may arise in DMH. The requirement for level-one security in the jails makes a temporary assignment impossible when the appropriate level-one background investigation required is not completed. (Currently, juvenile facilities do not require a level-one security background check.) The requirements for a background check are the responsibility of the employing departments (i.e., RCDMH, Riverside County Regional Medical Center, and Riverside County Office of Education.) The background check consists of a fingerprint check for possible criminal background, physical exam, drug/alcohol screening, and education and licensure verification. Probation has the authority, through Title 15, Section 1400, to deny any person permission to work with juveniles; however, Probation is not provided with any background or security information obtained in the investigation.

Juvenile Detention Administration Consolidation

5. Current organizational charts of RCDMH show that the administration of the five juvenile detention facilities in Riverside County are under three administrators based on their geographical location. The staffing of DMH workers under these three administrators represents approximately two to five percent of their staffing, as they are also responsible for over 100 other employees. This situation does not allow effective personnel management among facilities as needed or free communication with Probation or within DMH.

Memorandum of Agreement for Juvenile Facilities

6. Sworn testimony from various sources in the RCDMH, DMH and Probation revealed mental-health-care services for in-custody juveniles lacks an adequate number of therapists and clerical assistants. This prevents provide mental-health services from being effective, as required by Title 15. The Probation director is responsible for the security of everyone in a juvenile facility per Title 15, but is not authorized access to the results of the findings of pre-employment investigation conducted by another agency for their employees.

Pre-employment background checks for RCDMH, Riverside County Regional Medical Center, and Riverside County Department of Education employees that work in juvenile custody areas are being conducted by the person's employing department without the Probation's involvement.

In addition, it was brought to the attention of the Grand Jury, through sworn testimony, that in some juvenile facilities mental-health records are not being completed in a timely manner as directed by Title 15, Section 1406, which states that the examination and paper work must be completed in 96 hours.

Referral Process in Adult Detention

- 7. Sworn testimony by mental health workers and correctional staff indicate procedures for generating and tracking mental health referrals in the adult detention facilities as being insufficient in their compliance with Title 15, Division 1, Chapter 1, Subchapter 4. Current problems are:
 - delays in notifying DMH of problems, concerns and requests for service,
 - significant backlogs of adult referrals, particularly with the new AB109 transfers,
 - no visual tracking or status reporting of referrals, and
 - collected data does not separate critical requests from routine, thereby making the severity of a problem difficult to ascertain.

Gaps in Coverage

8. The Grand Jury learned, through sworn testimony, that mental-health crisis management has been reported by DMH to have gaps in its mental-health coverage. Outlying juvenile detention facilities often do not have mental-health coverage in the after-hours. Transportation of an individual requires by law, at least two officers. This takes the officers away from the facility for up to six hours. This may require outside assistance such as, but not limited to, fire department paramedics and ambulance services.

Recommendations

Riverside County Board of Supervisors
Riverside County Department of Mental Health
Riverside County Probation Department
Riverside County Sheriff's Department
Riverside County Human Resources Department

- 1. RCDMH must maintain required staffing levels in detention facilities by ensuring existing mental health staff, outside of detention facilities, can be transferred temporarily into detention facilities until full-time replacements can be secured. RCDMH must perform a comparative salary survey of other agencies and adjust salary structures accordingly.
- 2. RCDMH must ensure that DMH workers have annual performance evaluations as directed by Riverside County Policy C-21.
- 3. DMH supervisors and managers must be given appropriate training as dictated by Riverside County Policy C-23 to ensure they are afforded access to information regarding the requirements and responsibilities of their positions. RCDMH and DMH department heads, managers, and supervisors must receive mandatory follow-up training by the Center for Government Excellence, focusing on the areas provided in the "Better Riverside County Supervisor Competency Clusters":
 - Communicating Effectively,
 - Inspiring Others,
 - Managing Diverse Relationships, and
 - Being Open and Receptive.

The County Human Resources Department will not only document, but must ensure there is frequent and ongoing training of supervisors and managers, provided by the Center for Government Excellence in its Management and Supervisory Excellence Academies.

RCDMH must implement a suggestion program to encourage open communication between administrators and DMH workers. When DMH supervisors are not located in the same geographical area as the clinicians, the supervisors must make frequent visits to the worksite to assist, direct and oversee the operation of DMH workers at the detention facility.

4. RCDMH must provide qualified backup mental-health staff for temporary assignment to detention facilities. These individuals must have the appropriate security clearance and be compensated appropriately if and when they are transferred to detention facilities.

- 5. RCDMH must consolidate juvenile DMH personnel positions under one administration.
- 6. DMH and Probation must develop a Memorandum of Agreement that addresses the staffing, security level, and scope of work issues required to address the needs of the juvenile population meeting the requirements of Title 15. Probation and RCDMH shall initiate an independent study possibly through the Institute of Medical Quality, a subsidiary of the California Medical Association, that completed a similar study for the Riverside County Jails.
- 7. The Sheriff's Department and DMH must establish a committee to revamp the current referral and reporting process to separate the urgent requests from the routine.
- 8. RCDMH must establish a backup plan to move DMH clinicians rather than moving the patient. It must further utilize an existing video system or install a video conferencing system at these outlying facilities connecting them to a location where services can be provided.

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