MENTAL HEALTH SCREENING IN LOCAL & REGIONAL JAILS

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Role of Mental Health Screening in Jail

• Mental Health Screening is included in most best practice guidelines for jails

• Provides a cost effective means to identify inmates in need of mental health services
  – Use correctional officers to perform initial screen
  – For those who score (+) follow-up assessment by nursing/mental health staff
  – For those in need of psychiatric services, follow-up assessment by psychiatrist/psychiatric nurse practitioner

• Mental Health Screening conducted by trained correctional officers has been found to reliably identify inmates in need of further assessment

• Some studies have found that without the use of standardized screening tools some jails fail to identify up to 67% of inmates with serious mental illness
Screening Tools

• There are a variety of screening tools which have been developed for the purpose of identifying inmates in need of mental health services

• Only six have been subjected to replication studies
  – Brief Jail Mental Health Screen (BJMHS)
  – Correctional Mental Health Screen for Men (CMHS-M)
  – Correctional Mental Health Screen for Women (CMHS-W)
  – England Mental Health Screen (EMHS)
  – Jail Screening Assessment Tool (JSAT)
  – Referral Decision Scale (RDS)

• Each has demonstrated sensitivity (rate at which it identifies “true positives”) and specificity (rate at which it identifies “true negatives”) rate

• Goal is to balance true positive vs. false positive and to minimize false negative
Screening Tools

- If false positive rate is too high then have to use scarce resources on individuals who really don’t need services.
- If false negative rate is too high then individuals in need of assessment/services are not properly identified. Risk of psychiatric decompensation.
Screening Tools – Strengths & Limitations

- BJMHS developed to address limitations of the RDS, therefore most do not recommend the use of the RDS

- BJMHS, CMHS –M, CMHS-W, and EMHS are brief (administration time of 5 minutes or less) and can be administered by either health or correctional staff

- BJMHS accurately identifies males with mental illness although it is less accurate in identifying females with mental illness

- JSAT is to be completed by nursing or psychology staff and requires 20-30 minutes to administer. Many jails do not have nursing staff/psychology staff readily available at all times thus creating barriers to use

- BJMHS – 74% accurate with males & 55% accurate with females

- CMHS-M – 75.5% accurate; CMHS-W – 75% accurate
• Virginia has long encouraged jails to utilize the BJMHS
• Byrne Justice Assistance Grants (federal criminal justice grants) have been awarded to localities to standardize the use of the BJMHS in jails
• Per the 2015 Mental Illness in Jails report from the State Compensation Board – 53 of 58 jails reported they conduct mental health screening for new inmates.
• 58.49% of Virginia jails reported using the BJMHS
• Department of Criminal Justice Services (DCJS) required jails who applied for pilot project funding to utilize standardized screening
• Justice Involved Transformation Team recommended that Virginia develop standard screening practices
Recommendations Regarding Screening

- Utilizing standardized screening tool is best practice standard
- DBHDS currently encourages the use of the BJMHS for men and CMHS-W for women
- DBHDS encourages the General Assembly to support/mandate the use of standardized mental health screening processes in local/regional jails
- The requirement to utilize standardized screening tools can either be incorporated in 6VAC-40: Minimum Standards for Jails & Lockups or be included in budget language
- DBHDS recommends that rather than naming a particular screening tool by name, the General Assembly utilize language such as “jails shall utilized a standardized screening tool recommended by the Commissioner of DBHDS (or alternatively by the BOC) during the intake/classification process to identify inmates in possible need of mental health services.
Cost to Implement Uniform Screening in All Jails

- BJMHS & CMHS-M/W are both within the public domain and are “free” to use
- Best practice standards require that correctional officers be trained in utilizing the recommended tool
- Training can be accomplished in 2-4 hours
  - Cost to have staff in training rather than working on units
  - Cost to have staff trainers
- Need program specialist who is responsible for developing and implementing the training
  - Salary of approximately $75,000 + benefits
- Use a train the trainer model so that jails can eventually train their own staff
- Investigate using Adobe Connect to provide web based training so as to make training more readily available to staff on all three shifts in jails and to minimize disruption to jail
- Set goal to have 75% of staff trained within one year