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**Kelly Rabalais on behalf of Judge Garcia and the Jail Diversion Committee.**

As you may recall, the Jail Diversion Committee has formed sub-committees so that each could focus on their particular roles in the Safe Haven mission.

Here is a summary of the committees and their goals:

Safe Haven Jail Diversion Committee Sub-committees:

1. Judicial
2. Law Enforcement
3. Treatment and Advocacy
4. Jail Screening and Assessment

The Sequential Intercept Model identifies key points of interception to divert individuals with mental health issues in the criminal justice system into appropriate treatment. This model is to be used by each sub-committee to ensure:

* Prompt access to treatment
* Opportunities for diversion
* Timely movement through the criminal justice system
* Links to community resources

The strategy to accomplish these goals should include:

* Nurture cross collaboration (for example: STPSO→FPHSA)
* Map the local system (by committee) to include an inventory of available resources, gaps and log-jams
* Agree on priorities
* Build an action plan

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**Judicial**

Chair: Judge Peter Garcia

* Teresa Bravo has been hired as a navigator to assist the commissioner with identifying individuals for potential jail diversion with substance abuse and mental health disorders.
* Collect information for four baseline data indicators:

1. Prevalence of mental illness in the jail
2. Length of stay in the jail
3. Successful referral and connection to community resources and treatments after discharge; how to track upon re-entry; case management
4. Recidivism

* As reported by Sgt. Nastasi of the bond office, the Interagency Electronic Communication Committee (IECC) met in October to address the electronic communications needs of the various justice-affiliated agencies and the creation of a platform for information sharing. (Kelly will probably address the $397,000 opioid grant that will fund part or all of this effort.)
* Sgt. Nastasi also generates a booking list which is sent to the court administrator for dissemination to the judges.

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**Law Enforcement**

Chair: Chief Tim Lentz

* How can law enforcement begin to share information on frequent users of the system with other entities in the behavioral health system i.e., FPHSA, Safe Haven Crisis Intervention Center, outpatient and inpatient resources, jail, Crisis Intervention Teams, etc.
* Chief Lentz raised the possibility of doing away with radio codes and terms and instituting “plain talk” as is done during an emergency.

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**Treatment and Advocacy**

Co-Chairs: Nick Richard, NAMI St Tammany & Joseph Bodenmiller, FPHSA

* Created a map of the current system to determine where to send people (pre-Safe Haven)
* Determine exactly who FPHSA would be willing to accept, and obtain more specific information on admission criteria to FDU inpatient and outpatient referrals. Establish policies and protocols to disseminate to referring bodies within the criminal justice system (ex: DA’s office, judiciary, and law enforcement). In the future we need to review the RFP responses to map out the protocols for various agencies to make referrals to Safe Haven.
* Make recommendations of where these services could be integrated into Sequential Intercept Model pre- and post-arrest and the Safe Haven BH continuum of care. Define treatments and services needed.
* Develop a definition of mental illness, substance use disorder to be reviewed and adopted by the Jail Diversion Committee as a system-wide definition for law enforcement and the judicial system.
* Joseph Bodenmiller presented the FPHSA flow chart and the sub-committee discussed the transmission of the jail list from the jail to treatment (to identify persons in jail with a mental illness). Treatment looks at jail list to determine who has ever been treated in this system for substance abuse or mental health disorders.

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**Jail Screening and Assessment**

Co-Chairs: Dr. Brian Murphy & Diane Dicke

* Look into County in VA that compares jail list to patient list.
* Develop a process to expedite Behavioral Health Assessment of inmates in order to give them access to treatment. Coordinate with FPHSA.
* Discussion with FPHSA to explore the possibility of clinicians coming to the jail to provide the BH assessment. Daily? PRN? In person or by video conference?

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**Nick Richard on behalf of the Training and Education Committee**

Nick Richard informed everyone that on the 28th and the 30th of November Chief Tim Lentz of the Covington Police Department hosted a two-day, eight-hour MHFA Public safety training.

STPSO SRO have all been trained in MHFA for public safety and they are now exploring the possibilities with parties involved within city limits to also have their SRO trained in MHFA.

“Family Guide” is completed and will be printed and available primarily in ER’s and with law enforcement. This is a guide that will help family/friends navigate their way through the mental health crisis and process. It explains their rights and mental health terms and resources.

It has also been confirmed that St. Tammany Parish Hospital has agreed to train their own ER Staff in mental health first aid.

NAMNI App is now up and running. Nick is willing to give an explanation if needed.

Nick Richard also confirmed that after a recent meeting with Via Link all tele- communications for 911 for STPSO will have additional training for suicide calls. This additional training is to be presented to the 911 Board for implementation. Athena Walker from 911 will be reaching out to other law enforcement agencies to see if they will also participate.



**Dr. Charles Preston on behalf of the Healthcare Committee**

Dr. Preston informed those present that the Healthcare Committee meetings had been on hold until the operator for Safe Haven had been selected. Dr. Preston said he recently met with representatives from Start Corporation and Northlake Behavioral Health, who are now the official operators for Safe Haven. He said he and his Healthcare committee were ready to assist them in the services they are going to deliver to Safe Haven. He informed everyone that the Healthcare Committee meetings were now ready to start again and one had already been scheduled for this week.



**Kelly Rabalais on Behalf of Finance and Administration Committee**

Kelly announced that operators for Safe Haven have been chosen. They are: START Corporation and Northlake Behavioral Health, who will be first be providing services at Safe Haven that are reimbursable. Mrs. Rabalais then informed us that initially the Parish would need to use funds for the construction of Safe Haven, but now are able to utitlize HUD funds. The advertisement for the construction of Safe Haven will be advertised in the first quarter of 2018.

NAMI Day Center is expected to be finshed by February.

Pelican Park approached the Parish with the proposisition of executing an Act of Exchange for Cardinal Cove. They have agreed on this exchange as Cardinal Cove is located on the grounds of Safe Haven and would fit in perfectly for the long term plans for Safe Haven and the healing campus. At this time the property is being surveyed in order to have accurate acreage details.

Health Management Systems has been chosen to produce the policy and procedure manual for Safe Haven and are in the preliminary stage of this process. This will be a play-by-play manual for those entering Safe Haven either from the jail or the emergency rooms. It will detail how clients/patients are moved for further care to prevent recidivism within the Justice Center/jail/ER’s.

Mrs. Rabalais also reported that Parish Government has been able to secure a grant from the Department of Justice to facilitate the integration of tracking opiod use. The position of a Program Analyst will gather, track and share data on opiod use. This position is still available and details are on the Parish website.

On a philanthropy note, Mrs. Rabalais reported that the Mandeville Rotary Club would like to contribute their time and effort by participating in a recreational project on the Safe Haven Campus. They have also offered to reach out to other Rotary Clubs in the area to see if they would also like to participate in projects on the Safe Haven Campus.

State Senator Jack Donahue is spear-heading the fundraising efforts. He is starting the Safe Haven Foundation and has reached out to leaders in our communty to be on the advisory panel.

Sharon Landry, Executive Director of Northshore Healthcare Alliance, wanted to share that they are hosting “The State Of the State” luncheon this Wednesday December 13rh from 11:15-1pm at Tchefuncte Country Club in Covington. The guest speaker is Dr. Rebekah Gee, Secretarty of the Louisiana Department of Health. There were still a few seats available.

Ayllson Villars, Director of Health and Human Services for STPG asked for more details on the policy and procedure manual. Mrs. Rabalais explained it was a play-by-play manual on the movement of individuals in Safe Haven. From a risk management standpoint, we must ensure that the highest level of care is achieved through following procedures. This would ensure safety at Safe Haven.

Patti Ellish from St. Tammany Parish Hospital asked if there were any restrictions on the HUD funds being transferred and utilized. Mrs. Rabalais responded that there are no restrictions, however, we have to show the statistics on arrests and suicide. We also have to show sustainability. Patti Ellish suggested that an annual report on Safe Haven to the public would be advisable.