Virginia Local and Regional Jails Survey:
Assessment and Treatment of Inmates with Mental Illness
Please do not attempt to complete this survey before July 1, 2015.

The Virginia Sheriffs' Association and the Virginia Association of Regional Jails have reviewed this survey, and encourage their members to respond. Our goal is to provide information to the Compensation Board, the Virginia General Assembly, and the Dept. of Behavioral Health and Developmental Services (DBHDS), regarding jail resource needs for appropriately identifying and managing inmates with mental illness.

Please provide the data for your jail by July 13, 2015.
Thank you for completing this survey. (*Please be sure not to use commas in any numeric field*)

Name of Jail/ADC: _____

Address: _____ City: _____ State: ____

Zip: _____

Phone: _____

Fax: _____

Email address: _____

Sheriff/Chief Administrator: _____

Name of contact person completing survey: _____

Phone number of contact person: _____

Email address for contact person: _____

****Please do not attempt to answer questions 1-3. Compensation Board staff will populate this data from your LIDS-CORIS June Financials****

1. The total ADP of the jail (**except federal and out-of-state contract**) for June 2015 was ____ inmates. Of the jail's June 2015 ADP ____ were female and ____ were male.

2. Please indicate below the ADP of inmates from each category that are included in Question 1 above:
   - State responsible ____
   - Local responsible ____
   - Ordinance Violators ____

   Total ____ (should match total ADP in Question 1)

3. Please indicate below the ADP of inmates from each category that are included in Question 1 above:
   - Pre-trial ____
   - Post-conviction ____

   Total ____ (should match total ADP in Question 1)

4. The number of inmates charged with public intoxication housed in the jail during the month of June, 2015 was ____.

5. Are inmates charged with **only** public intoxication evaluated for mental illness or substance abuse?

   - Yes
   - No

6. Jail inmates with Substance Use/Abuse Disorders: There were ____ inmates known or suspected to have Substance Abuse Disorders but who have no clinically diagnosed or suspected, mental illness, in the jail during the month of June 2015.

7. Special Education Jail Inmates. There were ____ inmates receiving special education during the month of June 2015.
8. Please indicate the number of inmates with mental illness in each of the categories below. **Please count each inmate only once for this item (unduplicated counts), counting only the most serious or prominent diagnosis for that inmate. (Do not include federal or out-of-state contract inmates.)** Be sure to indicate the total number of inmate days for each category.

   The LIDS June Payment Details Report can provide a pretrial jail roster to assist in separating pretrial from post conviction inmates, as well as data on the number of inmate days. (May financials must be certified/approved before June may be generated).

   Please be sure to only include inmate days in the 'Total Inmate Days' **not** inmate counts. The final column is **not** a sum of the counts in the first four columns.

Mental Illness Category	**Females (Pretrial) in jail in June 2015**	**Females (PostConviction) in jail in June 2015**	**Males (Pretrial) in jail in June 2015**	**Males (PostConviction) in jail in June 2015**	**Total Inmate Days**
Inmates with Schizophrenia, Schizoaffective Disorder or Delusional Disorder					
Inmates with Bipolar Disorder or Major Depressive Disorder					
Inmates with Dysthymic Disorder (mild depression)					
Inmates with Anxiety Disorder					
Post Traumatic Stress Disorder (PTSD)					
Inmates with other mental illness diagnosis					
Inmates believed by history, behavior or other indicators to be mentally ill, for whom no clinical diagnosis is available					
Total number of inmates diagnosed with or suspected to have a mental illness in this jail during the month of June 2015					

9. Please indicate the offense type of the mentally ill inmates in each category. Report the inmates' offense type using their **most serious offense, for current confinement. (Do not include federal or out-of-state contract inmates.)**

   In order to accurately complete this question the mental health staff must either provide the LIDS Technician with a list of mentally ill inmates (this list does not need to include diagnoses) so that they may provide the mental health staff with a most serious offense for each offender, or access LIDS themselves to determine the most serious offense.

Mental Illness Category	Ord Viol	Mis Nonviolent	Mis Violent	Mis Drug	Felony Nonviolent	Felony Violent	Felony Drug
Inmates with Schizophrenia, Schizoaffective Disorder or Delusional Disorder							
Inmates with Bipolar Disorder or Major Depressive Disorder							
Inmates with Dysthymic Disorder (mild depression)							
Inmates with Anxiety Disorder							
Post Traumatic Stress Disorder (PTSD)							
Inmates with other mental illness diagnosis							
Inmates believed by history, behavior, or other indicators to be mentally ill, for whom no clinical diagnosis is available							
Total number of inmates diagnosed with or suspected to have a mental illness in this jail during the month of June 2015							

10. During the month of June 2015, there were a total of _____ inmates clinically diagnosed with co-occurring mental illness and substance abuse disorder in the jail.

11. A total of _____ jail inmates clinically diagnosed with mental illness were housed in medical isolation cells, or other segregation cells in the jail during the month of June 2015 and spent a total of _____ days in isolation/segregation.

12. Does your jail have one or more mental health housing units or bed areas that are physically separated from the general population and distinct from other medical bed units?
    - Yes
    - No

13. If your jail has a mental health unit or bed area, indicate the number of mental health treatment beds in that area:
    - Total beds for male inmates with mental illness _____
    - Total beds for female inmates with mental illness _____
    - N/A

14. A total of _____ mental health beds would be needed at this jail during the month of June 2015, to house all inmates with mental illness in mental health beds or units.(**This number should include all inmates identified in Question 13).**

15. Does your jail conduct a mental health screening upon admission, in addition to standard booking questions, for some or all inmates?

(Check the item that applies to your jail.)

- All new admissions are screened for mental illness.
- Some new admissions are screened for mental illness.

(Estimated percentage of inmates screened) %)

- No, our jail does not screen for mental illness on admission.
- If screenings are not done at admission, when are they conducted?

16. If your jail conducts a mental health screening, does the jail use a **validated** screening instrument, in addition to standard booking questions, with all inmates?

- Yes
- No

17. Jail mental health screenings are conducted by: **Check all that apply**

- Jail Officers
- Jail MH Staff
- Other MH professional

18a. If so, what is the **validated** screening instrument used?

- Brief Jail MH Screen
- Jail Admission Screening Assessment Test (JASAT)
- Other validated jail MH screening instrument:

18b. Name of Instrument:

18c. Are there any other methods of screening for Mental Health issues in your jail? If so, please describe.

19. Indicate whether or not inmates suspected of having a mental illness receive a professional mental health assessment, following screening, or when needed. (check one)

- All inmates with a positive screening are referred for professional mental health assessment.
- Professional mental health assessments are only conducted when inmates have acute symptoms of mental illness.
- Professional mental health assessments are not conducted.

20. Professional mental health assessments of jail inmates are conducted by: (please mark all that apply.)

- Jail licensed MH/medical staff
- Private, contract MDs or other MH professionals
- CSB staff

21. What is the typical time period an inmate is confined before receiving a professional mental health assessment?

- =<4 hours
- 4-8 hours
- 8-23 hours
- 24-72 hours
- >72 hours
- Additional Comments

22. A total of _____ inmates remained housed at this jail for more than 48 hours, following the issuance of a court order to a state hospital for psychiatric commitment (Temporary Detention Orders) during the month of June 2015.

23. Please indicate the CSB/BHA that provides MH prescreening services for psychiatric commitment (Temporary Detention Orders) for this jail.
   - The CSB/BHA that serves the county/city where our jail is located provides prescreening services for jail inmates. Name of CSB/BHA: _____
   - Both the CSB/BHA that serves the county/city where our jail is located and other CSB's in the region that is served by our jail provide MH prescreening for psychiatric commitment

24. CSB prescreenings for psychiatric commitment (Temporary Detention Orders) for this jail are done via video:
   - Always
   - Sometimes
   - Never

25. If your jail has a consulting or staff psychiatrist (MD), indicate the number of hours of psychiatrist consultation time provided at your jail, during the month of June 2015. A total of _____ hours of psychiatrist time were provided during the month of June 2015.

If your jail has a consulting or staff psychiatrist (MD) please provide their name, even if no services were provided during the month of June.

Psychiatrist's name(s) or group name
_____

26. If the jail has a general practice, or staff MD, please enter the total number of hours of that MD's time devoted to the provision of mental health treatment (medication prescribing and monitoring) for the month of June 2015. A total of _____ hours of general MD time were devoted to mental health treatment during the month of June 2015.

If your jail has a general practice (MD) please provide their name, even if no services were provided during the month of June.

General Practice MD's name or group name
_____

27. What percentage of your jail's general or psychiatric MD consultations are provided by a remote video (MD) consultant:
   - The jail does not use remote video MD services for mental health assessments and/or treatment.
   - The jail uses remote video MD services for less than 50% of mental health assessments and/or treatment
   - Yes, the jail uses remote video MD services for more than 50% of mental health assessments and/or treatment.

28a. Are inmates with diagnosed mental illness provided with follow up case management or discharge planning services upon release from your jail?
   - Yes
   - No

28b. Type of Services Provided
_____

29. Jail Medication Formulary: Section 53.1-126 of the *Code of Virginia* requires that sheriffs and regional jail superintendents *"...purchase at prices as low as reasonably possible all foodstuffs... and medicine as may be necessary"* for the care of the inmates in their jails. Is your jail's purchase of psychotropic medication limited by Section 53.1-126?
   - Yes
   - No

30. The jail's formulary is set by:
   a. Contract general medical services provider (Name of contractor providing medication)

   b. Special contract with local or national pharmacy (Name of local or national pharmacy)

   c. Other

31. List the numbers of inmates who received each type of psychotropic medication treatment at your jail during the month of June 2015**:**

If an inmate received medication from more than one category, please count that inmate in each relevant category. Some inmates receive treatment with more than one type of medication; the number of medications administered in June may exceed the number of inmates receiving treatment.
Please *count an inmate for each type of antipsychotic or mood stabilizer* medication he or she receives, and *count only once for all types of antidepressant or antianxiety medication*, even if the inmate received *more than* one *type* of antidepressant or antianxiety medication.

Medication Categories	**Total number of Jail Inmates receiving each medication for treatment of mental illness**	
I. Antipsychotic medications	**Total number of inmates treated with each brand or type of medication**	**Please place an X in this column if the jail does not provide this medication**
Haldol/haloperidol		
Zyprexa/olanzapine		
Risperdal/risperidone		
Seroquel/quetiapine		
Triliafon/perphenazine		
Prolixin/fluphenazine		
Thorazine/chlorpromazine		
Abilify/aripiprazole		
Geodon/ziprasidone		
Clozaril/clozapine		
Other antipsychotic medication(s)		
II. Mood Stabilizer/Anticonvulsant medications for major Mood Disorder	**Total number of inmates treated with each medication brand/type**	**Please place an X in this column if the jail does not provide this medication**
Depakote/Depakene/valproic acid		
Lithobid/lithium carbonate		
Tegretal/carbamazepine		

Topamax/topiramate		
Trileptal		
Other mood disorder medication(s)		
III. Antidepressant medications	**Total number of inmates treated with this category of medication**	**Please place an X in this column if the jail does not provide this medication**
(Examples: Prozac/fluoxetine, Zoloft/sertraline, Lexapro, escitalopram, Wellbutrin/bupropion, Paxil/paroxetine, Elavil, amitriptyline, Pamelor/nortriptyline, Desyrel/trazodone, etc.)		
IV. Antianxiety medications (Examples: Ativan/lorazepam, Xanax/alprazolam, Librium/chlordiazipoxide, Valium/diazepam, etc.)		

32. A total of _____ jail inmates clinically diagnosed with mental illness refused prescribed psychotropic medication treatment during the month of June 2015.

Questions 33 through 35 should be answered using data from the entire Fiscal Year 2015

33. **Total cost for all psychotropic medications administered at your jail during Fiscal Year 2015:** $_____

(Check one: ◉ estimated cost; ○ actual, prorated cost)

34. **Total cost for all mental health services (excluding medications, but including MDs and nursing) provided by the jail during Fiscal Year 2015:** $_____

(Check one: ◉ estimated cost; ○ actual, prorated cost)

35. Indicate the amount of **funding from each of the sources below** for the amounts listed in questions 33 and 34.

- Commonwealth of Virginia (state) Funds: $ 0
- Federal funds: $_____
- Local funds: $_____
- Other funds: $_____
- Total funds: $_____ (**Should equal the sum of questions 33 & 34)**

(Check one: ◉ funding sources are estimated ○ funding sources are actual)

36. Does, or would the jail dispense psychotropic medications provided free of charge by the CSBs, DBHDS, or private provider, when the jail's MD has approved the medication for a particular inmate?

- Yes we currently accept such medications, under the proper circumstances
- No, we do not currently accept such medications
- Yes, we would accept such medications under the proper circumstances
- No, we would not consider accepting such medications

37. Indicate the numbers of inmates who received each of the following types of mental/behavioral health treatment delivered by all mental health services providers, for the month of June 2015.

Treatment Category	Number Treated	Hours of Treatment Provided
Individual counseling		
Group mental health counseling		
Group Substance Abuse treatment		
Other types of individual or group mental health treatment		

38. Please indicate the total number of **hours of mental/behavioral health treatment** provided by each of the below entities during the **month of June 2015. Please only include nursing treatment time, do not include time spent distributing medications. Please do not include the hours of treatment provided by psychiatrists or other MDs in this section. Number of hours here should match number of hours in question 37.**

Treatment Provider	Number of Treatment Hours
Jail mental health treatment staff (jail employees)	
Community Services Board (CSB/BHA) staff (Please include CSB staff assigned full-time to the jail. Not employees of the jail)	
Private contractors, including jail medical contractor (e.g., PHS, CMS)	
Total number of hours of individual or group mental health counseling provided to inmates at your jail **for the month of June 2015**	

39. Please indicate if your jail/locality would consider hosting a state-funded Mental Health Residential Treatment Program
   - Yes, would consider housing a MH Residential Treatment program in the jail or jail complex.
   - No, would not support housing a MH Residential Treatment program in the jail or jail complex.

40. Please indicate the number of documented incidents of inmate aggression, (to include physical or sexual assault and/or threats of violence). There were _____ documented incidents of inmate aggression toward other inmates and _____ documented incidents toward jail staff during the month of June 2015. Of these incidents _____ inmate perpetrators had been clinically diagnosed as mentally ill, and _____ victims of inmate aggression had been clinically diagnosed as mentally ill.

41. Please indicate the mental health data source used by your jail for responding to this survey. (Please mark all that apply).
   - Mental Health Module of Jail Management System
   - Other Mental Health Management System
   - Access/Excel Database
   - Paper Forms
   - Other

   Additional Comments

42. Please enter the name of the jail's electronic inmate management system

43. Does the jail's electronic inmate management system include MH screening items?
   - Yes
   - No

44. Does the jail's electronic inmate management system include inmate psychiatric diagnoses?
   - Yes
   - No

45. Please indicate who is responsible for maintaining mental health data, including but not limited to data used to respond to this survey. (Please mark all that apply).
   - Jail licensed MH/medical staff
   - CSB staff
   - Private, contract MDs or other MH professionals
   - Jail Officers

46. The total number of staff employed at this jail is _____.

47. A total of _____ hours of mental health training is provided to each new jail officer/deputy, prior to his/her initial assignment to the jail.

48. Jail Officers/Deputies are required to complete _____ hours of annual training in mental health topics each year.

49. A total of _____ officers/deputies on the jail staff have completed DCJS Certified 40-Hr Crisis Intervention Team (CIT) training.

Comments: Please include any remarks you wish regarding the management of inmates with mental illness in your jail

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If you have any questions about this survey, please phone Kari Bullock at 804-371-4299 (SCB) or email kari.bullock@scb.virginia.gov. If you should experience any technical difficulties, please contact Anne Wilmoth at 804-225-3307(SCB) or email anne.wilmoth@scb.virginia.gov.

Thank you for your participation in this important work.

Below are a list of definitions that may be helpful in completion of this survey.

ADP: Average Daily Population of the jail. This information may be obtained from the LIDS Technician.

BHA: Behavioral Health Authority

Co-occurring disorder: (dual diagnosis) – a comorbid condition in which an individual is suffering from a mental illness and substance abuse problem.

Clinical Diagnosis: a Diagnostic and Statistical Manual of Mental Disorder – Fourth Edition (DSMV) Axis I or Axis II disorder/condition. In general, clinical diagnosis are determined by psychiatrists, licensed clinical psychologists, licensed clinical social workers, or licensed professional counselors.

CSB: Community Services Board

DBHDS: Department of Behavioral Health and Developmental Services

Group Mental Health Counseling: Meeting of a group of individuals with a mental health clinician for the purpose of providing psycho-education about various mental health topics and/or to provide group feedback and support with regard to mental health issues. Examples could include stress management, anger management, coping with depression, or NAMI meeting.

Group Substance Abuse Treatment: Meeting of a group of individuals with a substance abuse clinician for the purpose of providing psycho education about various substance abuse topics and/or to provide group feedback and support with regard to substance abuse issues. Examples could include AA meeting, NA meeting, or relapse prevention groups.

Individual Counseling: one on one session with licensed professional with the expressed purpose of improving the individual's understanding of their issues, enhancing their ability to cope with issues, and aiding them in the development of healthy coping skills.

MH: Mental Health

Mental health screening instrument: an instrument utilized to make an initial determination of an individual's mental health status, using standardized, validated instrument.

Two common types of screening instruments include, but are not limited to, the Brief Jail Mental Health Screen (BJMHS) and the Jail Admission Screening Assessment Test (JASAT). The standard booking questions related to mental health issues are not considered a screening instrument.

Mental health services: any type of service that helps treat or control an individual's mental health disorder(s). These can include but are not limited to individual mental health counseling, group mental health counseling, case management, or other types of individual or group mental health treatment. Many mental health services also address co-occurring substance-related disorders (see definition).

Mental Illness: conditions that disrupt a person's thinking, perceptions, feeling, mood, ability to relate to others and/or daily functioning.

Most Serious Offense: Question 9 asks that you report an inmates' offense type using their most serious offense. Offense severity should be ranked as follows: Felony-Violent, Felony-Drug, Felony-Nonviolent, Misdemeanor-Violent, Misdemeanor-Drug, Misdemeanor-Nonviolent

Professional mental health assessment: A review of a client's clinical condition conducted by a trained mental health or medical professional which provides an in depth determination of a person's mental health status and treatment needs.

Psychiatrist: a psychiatrist is a medical doctor who specializes and is certified in treating mental health disorders.

Psychotropic medications: psychotropic medications are commonly used to treat mental health disorders and are those which are capable of affecting the mind, emotions and behavior of an individual.

Special Education Inmates: The Federal Government requires jails to provide Special Education to inmates in need of it.

Substance abuse: a maladaptive pattern of substance use leading to clinically significant impairment or distress.

Validated instrument: questionnaire which has undergone a validation procedure to show that it accurately measures what it aims to do, regardless of who responds, when they respond, and to whom they respond. The Brief Jail Mental Health Screen and the JASAT are examples of validated instruments.