



COMMONWEALTH OF VIRGINIA

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January 5, 2024

Laura Wilborn
Information Specialist
Division of Legislative Automated Systems (DLAS)
900 E. Main Street
Pocahontas Building, Suite W528
Richmond, VA 23219
Attention: Legislative Documents and Reports Processing

Dear Ms. Wilborn,

The Compensation Board presents a PDF document to the Division of Legislative Automated Systems (DLAS): 2023 Mental Illness in Jails Report (115 pages). The 2023 Mental Illness in Jails Report is also available on our website at <https://www.scb.virginia.gov/docs/2023mentalhealthreport.pdf>.

The statutory mandate for this report document is Chapter 1, Item 73, Paragraph J. of the 2023 Virginia Acts of Assembly, Special Session I.

Please contact me for questions on this report. My phone number and email address are 804-225-3439 and robyn.desocio@scb.virginia.gov.

Sincerely,

A handwritten signature in cursive script, appearing to read "Robyn M. de Socio".

Robyn M. de Socio
Executive Secretary
Compensation Board

cc: Jeffrey Palmore, Chairman, Compensation Board (w/o enclosure)
Staci Henshaw, Ex-Officio Member, Compensation Board (w/o enclosure)
Craig Burns, Ex-Officio Member, Compensation Board (w/o enclosure)

**Mental Illness in
Jails Report
Compensation Board**

2023

**November 1,
2023**

Compensation Board Mental Illness in Jails Report (2023)

Authority: 2023 Special Session I, Virginia Acts of Assembly, Chapter 1

Item 73 J.1. The Compensation Board shall provide an annual report on the number and diagnoses of inmates with mental illnesses in local and regional jails, the treatment services provided, and expenditures on jail mental health programs. The report shall be prepared in cooperation with the Virginia Sheriffs Association, the Virginia Association of Regional Jails, the Virginia Association of Community Services Boards, and the Department of Behavioral Health and Developmental Services, and shall be coordinated with the data submissions required for the annual jail cost report. Copies of this report shall be provided by November 1 of each year to the Governor, Director, Department of Planning and Budget, and the Chairs of the Senate Finance and Appropriations and House Appropriations Committees.

2. Whenever a person is admitted to a local or regional correctional facility, the staff of the facility shall screen such person for mental illness using a scientifically validated instrument. The Commissioner of Behavioral Health and Developmental Services shall designate the instrument to be used for the screenings and such instrument shall be capable of being administered by an employee of the local or regional correctional facility, other than a health care provider, provided that such employee is trained in the administration of such instrument.

Executive Summary: The Commonwealth of Virginia supports 58 local and regional jails and jail farms. Of this number, there are 24 county jails, 11 city jails, 22 regional jails and 1 jail farm. City and county jails are operated under the authority of the sheriff in that locality. An appointed superintendent operates the jail farm under the authority of the locality it serves. Regional jails are operated under the authority of a regional jail board or authority consisting of at least the sheriff and one other representative from each participating jurisdiction.

A survey to identify mental illness in Virginia jails was initially developed by staff of the Department of Behavioral Health and Developmental Services (DBHDS), staff of the Senate Finance Committee, and staff of the Compensation Board. The Compensation Board distributed a mental health survey in June, 2023 for completion by local and regional jails. With the support of the Virginia Sheriffs' Association and the Virginia Association of Regional Jails, the Compensation Board received surveys from 53 out of 58 local and regional jails, excluding Franklin County Jail, Patrick County Jail, Sussex County Jail, Chesapeake City Jail and Danville City Jail. The data in this report is as provided to the

Compensation Board by local and regional jails in their 2023 mental health surveys, submitted as of August 25, 2023.

The goal of the survey is to provide information regarding the incidence of mental illness among individuals incarcerated in Virginia jails, characteristics of this population and methods by which jails seek to manage mental illness within their facility. Survey questions directed jail personnel to report data for the month of June 2023, with the exception of treatment expenditures, which were reported for the entire fiscal year (July 1, 2022 – June 30, 2023). Although the report includes statistics on the average daily population of federal and out of state inmates housed in jail this year, the data regarding inmates with mental illness is reflective only of local and state responsible inmates housed in local and regional jails.

Item 72P requires the Compensation Board to provide data related to the jails' use of new behavioral health case manager and medical/treatment positions allocated in FY23. Additional questions were added to the 2023 Mental Illness in Jails Survey to collect this data.

Acknowledgement:

The Compensation Board would like to express its appreciation to the Sheriffs, Regional Jail Superintendents, and all jail staff involved in the collection and reporting of the data requested in the 2023 Mental Health Survey. The Board and Staff are thankful for the cooperation and efforts of jail leadership and staff in this reporting process.

Note: Riverside Regional Jail did not provide mental illness diagnoses counts, so their survey was removed from the cohort. Their average daily population in June, 2023 was 977. Charlotte County Jail reported that they held no mentally ill inmates during the survey month, so their survey was removed from the cohort; their average daily population in June, 2023 was 32. Franklin County Jail noted that they do not hold mentally ill inmates. They noted that any inmates that require the need for mental health services are transferred to the Western Virginia Regional Jail. Franklin County Jail's average daily population in June, 2023 was 43. Montgomery County Jail did not hold mentally ill inmates during the survey period so their survey was removed from the cohort. Their average daily population in June, 2023 was 79. Patrick County Jail did not respond to the survey; their average daily population in June, 2023 was 73. Sussex County Jail noted that they do not hold mentally ill inmates; their average daily population in June, 2023 was 34. Chesapeake City Jail did not respond to the survey; their average daily population in June, 2023 was 704. Danville City Jail did not respond to the survey; their average daily population in June, 2023 was 171.

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Survey Background

The Compensation Board developed a mental illness survey for completion by all local and regional jails, requesting statistical information for the month of June, 2023. Information relating to screening and assessment, diagnoses, housing, and most serious offense type of mentally ill inmates was collected by the survey instrument. The survey also collected data regarding inmates' access to mental health programs and assistance in the facility, including medication and treatment services. Additionally, the survey is used to identify the providers of screening/assessment and treatment in each facility, whether they are private mental health professionals, Community Services Board (CSB) staff, or jail staff. Jails also reported how inmate mental health data is collected and stored, as well as the amount of mental health and/or Crisis Intervention Team training provided to the jail staff, if any. Finally, jails were asked to provide the fiscal year cost of all mental health services and medications.

Data gleaned from surveys of 50 out of 58 local and regional jails is included in this report. A copy of the survey instrument is included in Appendix A.

Population & Demographics in Jails

Based upon data contained within the Compensation Board's Local Inmate Data System (LIDS) for the month of June, 2023 there was an average daily inmate population (ADP) of 17,649 in jails in the Commonwealth of Virginia (8 jails are excluded from this report, and their inmate populations are excluded from this number). Of these, 2,205 were state responsible (SR) inmates. A state responsible (SR) inmate is any person convicted of one or more felony offenses and (a) the sum of consecutive effective sentences for felonies, committed on or after January 1, 1995, is (i) more than twelve months or (ii) one year or more, or (b) the sum of consecutive effective sentences for felonies, committed before January 1, 1995, is more than two years. An additional 14,258 were local responsible (LR) inmates. A local responsible (LR) inmate is any person arrested on a state warrant and incarcerated in a local correctional facility prior to trial, any person convicted of a misdemeanor offense and sentenced to a term in a local correctional facility, any person convicted of a felony offense on or *after* January 1, 1995 and given an effective sentence of (i) twelve months or less or (ii) less than one year, or any person convicted of one or more felony offenses committed *before* January 1, 1995, and sentenced to less than two years. A further 69 inmates were local ordinance violators. Unlike SR and LR offenders, who have been arrested on a state warrant, offenders held for ordinance violations have been arrested on a local warrant, having been charged with an offense specific to that locality which may or may not also appear in the Code of Virginia. The remaining 1,118 of the ADP were federal and out of state inmates; however, these inmates are not included in the jails' reporting or in the analysis of any statistics in this report. Therefore, the average daily population included for analysis in this report is 16,532.

Of these 16,532 inmates, 59% were pre-trial and 41% were post-conviction. Pre-trial refers to inmates held in a local or regional jail awaiting trial. Post-conviction refers to inmates who have been found guilty of one or more criminal charges, with or without additional pending charges, and are serving sentence in the jail or awaiting transfer to a Department of Corrections (DOC) facility. Of the 16,532, 17% were female, 83% were male, 1% was Unknown or Other.

Table 1: Jail Population Percentages-Average Daily Population

Year	Pretrial	Post-Con	Female	Male
2023	59%	41%	17%	83%
2022	54%	46%	16%	84%
2021	48%	52%	15%	85%
2020	48%	52%	15%	84%
2019	45%	55%	17%	83%
2018	43%	57%	16%	84%
2017	42%	58%	17%	83%
2016	40%	60%	16%	84%
2015	40%	60%	15%	85%
2014	39%	61%	14%	86%
2013	34%	66%	13%	87%
2012	32%	68%	14%	86%

From this point forward in the report, statistics will be noted that refer to the percentages of certain populations that are mentally ill. Where these statistics are cited, staff has calculated percentages using individual inmate counts, not the average daily inmate population. The annual survey submitted by jails requires them to indicate the number of individual inmates mentally ill within their facility for a specific month. To most accurately make comparisons between this population and the general population, individual inmate counts within the jails for the same time period are required.

The following are the counts of the general population used to calculate mental illness percentages in the following section: Total, 25,324; Female, 4,554; Male, 20,747; and Unspecified, 23.

Note: The population count used to calculate mental illness percentages is the number of inmates confined long enough to have received a comprehensive mental health assessment by a qualified mental health professional, should a screening indicate that an assessment was necessary. The determination of whether an inmate was confined long enough to have been assessed is made based upon each jail's answer to question 14 of the survey, which asks the average length of time to conduct a comprehensive mental health assessment once one is determined by screening to be needed.

Note: Total General Population Inmate Count = **32,234**; Projected General Population Inmate Count Incarcerated long enough to be assessed = **25,324**

Note: General Population inmate counts used to calculate mental illness percentages in June 2023 are: Total; **25,324** Female; **4,554** Male; **20,747** Unspecified; **23**.

Note: The total inmate count includes inmates counted one time for each jail in which they were held during the month of June, 2023.

Note: Total General Population Inmate Count does not include the individuals incarcerated in the Charlotte County Jail (63), Franklin County Jail (135), Montgomery County Jail (247) Patrick County Jail (102), Sussex County Jail (64), Chesapeake City Jail (1,245), Danville City Jail (590) or Riverside Regional Jail (1,606).

Mental Illness Statistics

Mental illness is defined as with a diagnosis of schizophrenia or a delusional disorder, bi-polar or major depressive, mild depression, an anxiety disorder, post-traumatic stress disorder (PTSD), or any other mental illness as set out by the Diagnostic & Statistical Manual of Mental Disorders (DSM-V), published by the American Psychiatric Association, or those inmates who are suspected of being mentally ill but have received no formal diagnosis.

Of the female population count, 2,016 inmates (44.27%) were reported to be mentally ill. Of the male population count, 5,193 inmates (25%) were reported as having a mental illness. Of the total assessable general population count, 7,209 inmates (22.36%) were known or suspected to be mentally ill.

Table 2 includes the percentage of the female/male general population diagnosed as mentally ill for the current as well as previous 10 years.

Table 2: Percentage of Female/Male and Total General Population with Mental Illness Using Inmate Counts

Year	Female	Male	Total
2023	44.27%	25%	22.36%
2022	43.71%	24.85%	25.59%
2021	38.15%	20.09%	18.94%
2020	48.77%	23.75%	23.57%
2019	43.30%	19.33%	23.53%
2018	34.48%	16.74%	19.84%
2017	28.03%	15.13%	18.63%
2016	25.79%	14.35%	16.43%
2015	25.29%	13.63%	16.81%
2014	20.87%	12.43%	13.95%
2013	16.13%	12.64%	13.45%
2012	14.40%	10.35%	11.07%

There was a total of 7,209 inmates known or suspected to be mentally ill in jails during the month of June, 2023. Of these mentally ill inmates, 27.97% were female and 72.03% were male. Of the same population, 67.51% were pre-trial and 32.49% were post-conviction.

Table 3: Number of Inmates with Mental Illness

Year	Num Inmates with MI	Female %	Male %	Pre-Trial %	Post-Con %
2023	7,209	27.97%	72.03%	67.51%	32.49%
2022	9,205	24.23%	64.69%	58.09%	30.83%
2021	7,452	27.87%	72.13%	62.83%	36.96%
2020	7,455	28.38%	71.62%	57.79%	42.21%
2019	8,473	32.31%	67.69%	52.31%	47.69%
2018	7,852	30.50%	69.50%	52.67%	47.33%
2017	7,451	31.14%	68.86%	52.01%	47.99%
2016	6,554	28.75%	71.25%	48.95%	51.05%
2015	7,054	29.43%	70.57%	45.92%	54.08%
2014	6,787	27.04%	72.96%	49.90%	50.10%
2013	6,346	27.80%	72.20%	48.12%	51.88%
2012	6,322	23.16%	76.84%	47.33%	52.67%
2011	6,481	28.30%	71.70%	45.55%	57.66%
2010	4,867	26.81%	73.19%	n/a	n/a
2009	4,278	27.07%	72.93%	n/a	n/a
2008	4,879	n/a	n/a	n/a	n/a

While an inmate may have multiple diagnoses each inmate is counted only once, in the category of the most serious illness for which they have been diagnosed. Figure 1 reflects the number of mentally ill inmates housed in June, 2023 and the type of disorder.

Figure 1: Number & Diagnoses of Inmates with Mental Illness

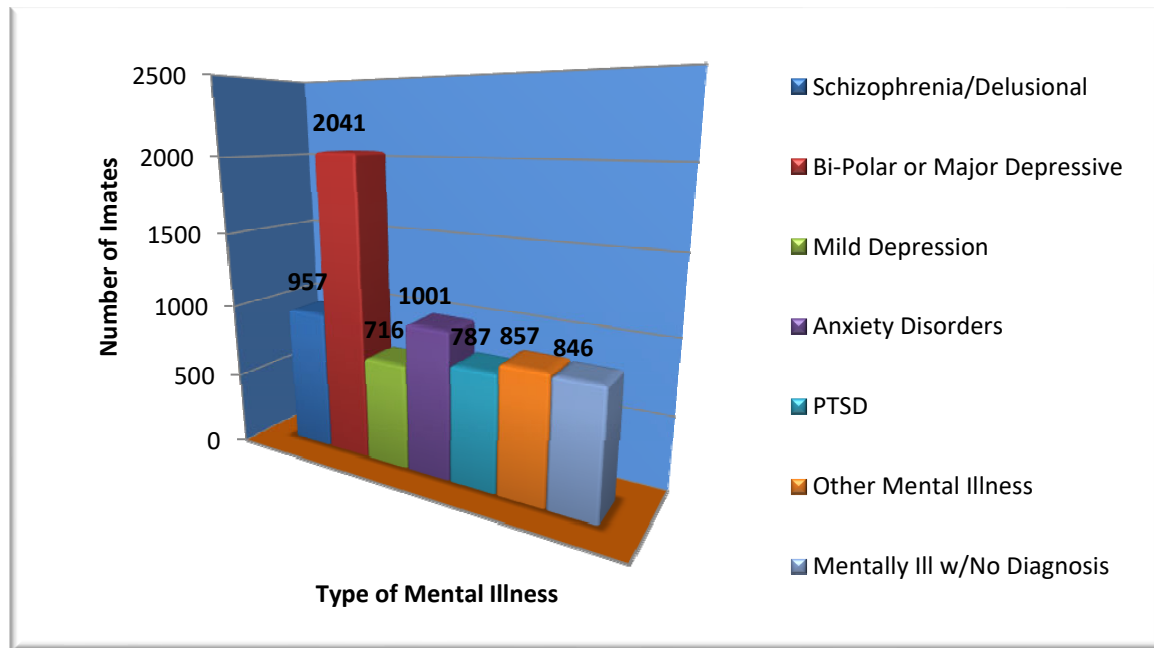


Figure 2 shows the number and percentage that each mental illness represents in both the Female and Male mentally ill populations.

Figure 2: Number & Percentage of M/F Mentally Ill Population Diagnoses

	Schizo/ Delusional	Bi- Polar/Major Depressive	Mild Depression	Anxiety Disorders	PTSD	Other Mental Illness	Mentally Ill w/no Diag
Female	177	612	178	326	306	214	203
Male	780	1433	538	675	481	643	643
Female	8.78%	30.36%	8.83%	16.17%	15.18%	10.62%	10.07%
Male	15.02%	27.59%	10.26%	13%	9.26%	12.38%	12.38%

A diagnosis of bi-polar/major depressive disorder continues to be the most prevalent for both males and females. In this year's survey, a diagnosis of bi-polar/major depressive disorder accounted for 28.37% of all reported mental illness.

A serious mental illness includes diagnoses of schizophrenia/delusional, bi-polar/major depressive or post-traumatic stress disorder. Survey responses indicate that 52.56% (2022-57.58%,2021-47.62%) of the mentally ill population and 14.95% (2022-18.22%, 2021-11.01%) of the assessable general population have been diagnosed as having a serious mental illness.

Table 4: Percentage of the Assessable General Population with Mental Illness/Serious Mental Illness

Year	Mental Illness	Serious Mental Illness
2023	28.47%	14.95%
2022	31.64%	18.22%
2021	23.12%	11.01%
2020	27.57%	13.08%
2019	23.53%	11.40%
2018	19.84%	10.42%
2017	18.63%	9.55%
2016	16.43%	8.41%
2015	16.81%	7.87%
2014	13.95%	7.50%
2013	13.45%	7.53%
2012	11.07%	5.33%
2011	12.08%	5.99%

Figure 3: Percentage and Number of Mentally Ill Populations by Region

	Central Region	Western Region	Eastern Region
Number of Mentally Ill inmates in Region	3,008	2,259	1,941
Percentage of Total MI Pop by Region	41.73%	31.34%	26.92%
Percentage of Mentally Ill inmates in Region w/ Serious MI	55.78%	52.10%	46.88%
Percentage of Mentally Ill inmates in Region Pretrial	70.45%	58.30%	73.21%
Percentage of Mentally Ill inmates in Region Post-Conviction	29.55%	29.66%	26.79%

Note: Regional percentages of the total ADP: 16,532; Central, 44%, Western, 33%, Eastern, 23%.

Note: Not all jails that reported mental illness counts reported the inmate's trial status.

Note: The percentage of mentally ill inmates in the total general population without excluding inmates which the jails indicated would typically not have been assessed due to release prior to having received a comprehensive mental health assessment, would have been 22.36%. The percentage of seriously mentally ill inmates in the total general population without excluding inmates which the jails indicated would typically not have been assessed due to release prior to having received a comprehensive mental health assessment, would have been 11.75%.

Screenings & Assessments

Mental Health Professionals

A Qualified Mental Health Professional (QMHP) is a person in the human services field trained and experienced in providing mental health services to individuals with mental illness. Within the scope of providers, a QMHP is one whose completed education curriculum allows them to assess and provide treatment but who is not licensed to diagnose or prescribe medications. For clarification purposes, in this report this unlicensed group of mental health professionals are referred to as QMHP.

A Licensed Mental Health Professional (LMHP) is a mental health provider who is able to provide diagnostic as well as other mental health services, and these providers fall into two groups: LMHP's able to diagnose, treat and prescribe medication include psychiatrists, licensed medical doctors and nurse practitioners; LMHP's who may diagnose and provide treatment but are unable to prescribe medication include clinical psychologists, licensed clinical social workers (LCSW), and licensed professional counselors (LPC).

Mental health treatment in jails may include collaboration amongst several provider types in order to ensure that all mental health needs of an individual are met.

Screening

The purpose of a mental health screening is to make an initial determination of an individual's mental health status, using a standardized, validated instrument. Language included in paragraph J.2., of Item 73, Chapter 1 (2023 Special Session I Appropriation Act) requires that all local and regional jails *screen each individual booked into jail for mental illness using a scientifically validated instrument, provided that jail staff performing booking are trained in the administration of the validated instrument. The Commissioner of the Department of Behavioral Health and Developmental Services is charged with designating the instrument to be used for the screenings, and the instrument must be capable of being administered by a jail employee (that does not have to be a health care or mental health care provider).* The Commissioner has designated the use of either the Brief Jail Mental Health Screen (BJMHS) or the Correctional Mental Health Screen (CMHS, for Women or for Men) as meeting the requirement of the language.

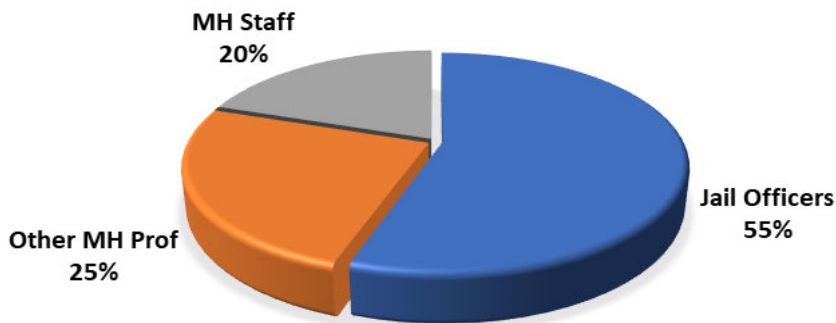
Questions are included in the survey to gather information regarding current screenings and results using the designated instruments. Fifty (50) jails specifically reported using the BJMHS or CMHS to screen 11,441 and 2,863 inmates, respectively. Of these 14,304 screened inmates, jails report that 2,657 (19%) were referred for a comprehensive mental health assessment.

- 50 jails report that inmates displaying acute mental health crisis or suicide risk at initial screening are seen by a mental health or medical professional within 72 hours
- 50 jails report that inmates displaying acute mental health crisis or suicide risk at initial screening receive continual monitoring
- 49 jails report that the jail behavioral/mental health provider is consulted for immediate interventions when an inmate exhibits signs of an acute mental health crisis or suicide risk during their mental health screening. For the jail who noted that the mental health provider is not always consulted immediately, it was noted that this is they are on-call for emergencies when they are off-site.

Occasionally, there are times when an inmate might not be screened. Jails noted that in June 2023, 580 inmates were not screened upon booking. Reasons most often given for an inmate not being screened are: intoxication, refusal to cooperate with screening, swift bonds, overnight court returnees.

Figure 4 shows the percentage of screenings conducted by each provider.

Figure 4: Provider of Jail Mental Health Screenings.



If legislation, regulations, or standards required **all** inmates who receive a positive mental health screen to receive a comprehensive mental health assessment within 72 hours,

- 18 jails feel they would have No Difficulty complying
- 12 jails feel they would have Some Difficulty complying
- 20 jails feel they would have Extreme Difficulty complying

Of the 20 jails who report they would have extreme difficulty complying, 5 of them report that at least 25% of their total population count is mentally ill. Reasons given as barriers to assessing within 72 hours include: times when a greater number of inmates happen to screen positive in a short period, QMHP not on-site daily, or additional funding and staffing required.

Note: A copy of the Brief Jail Mental Health Screen and the Correctional Mental Health Screen (for Men and for Women) may be found in Appendices R and S.

Note: "Other Health Professionals" includes psychiatrists, medical doctors, nursing staff, etc.

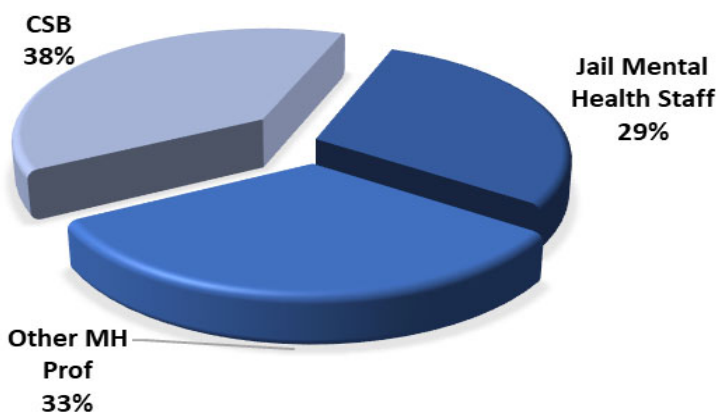
Assessment

Depending upon the results of an initial mental health screening, a comprehensive mental health assessment may also be conducted. A comprehensive mental health assessment is 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. Jails report that mental health assessments are prioritized using the following criteria: acute crisis (aggression toward others, suicidal comments or self-harm), urgent risk referral from medical or security staff, history of previous suicide attempt, transfer from psychiatric admission, and inmates currently taking psychotropic medications.

- 44 jails, or 90%, reported conducting comprehensive mental health assessments on all inmates who receive a positive screening for mental illness.
- 4 jails, or 8%, reported conducting comprehensive mental health assessments only on inmates with acute symptoms of mental illness.
- 1 jail, or 2%, reported conducting comprehensive mental health assessments on no inmates who screen positive for mental illness.
- 16 jails, or 26% reported that their procedures were adjusted over the weekends or on holidays. Most of these jails reported that they do continue to screen during booking, but assessments are not conducted during the weekend unless jail staff deems it to be an acute case.

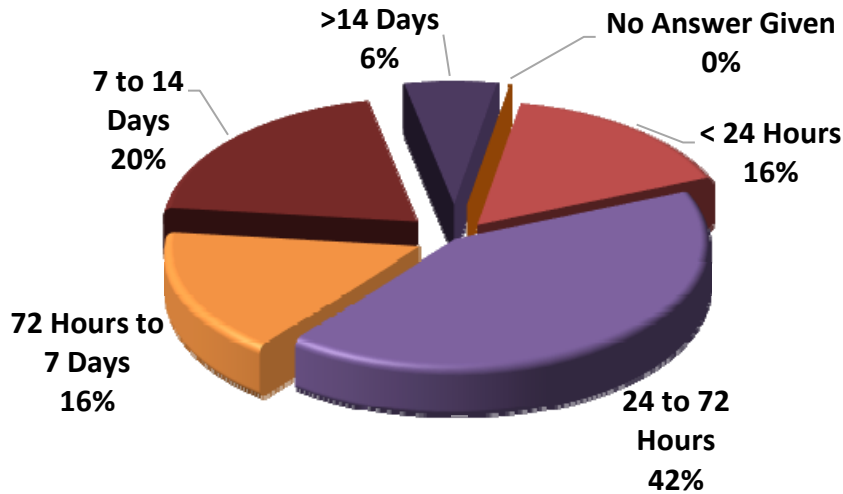
As with initial screenings, the type of individual conducting comprehensive mental health assessments, as well as the method of assessment, differs between facilities. Jails identify that comprehensive mental health assessments are performed in their jail by either community services boards, by jail mental health staff (which include jail employees that are licensed medical or mental health professionals), or by other mental health professionals (which include private or contracted medical or mental health professionals such as psychiatrists, medical doctors, nursing staff, etc.), as shown in Figure 5.

Figure 5: Provider of Jail Comprehensive Mental Health Assessment.



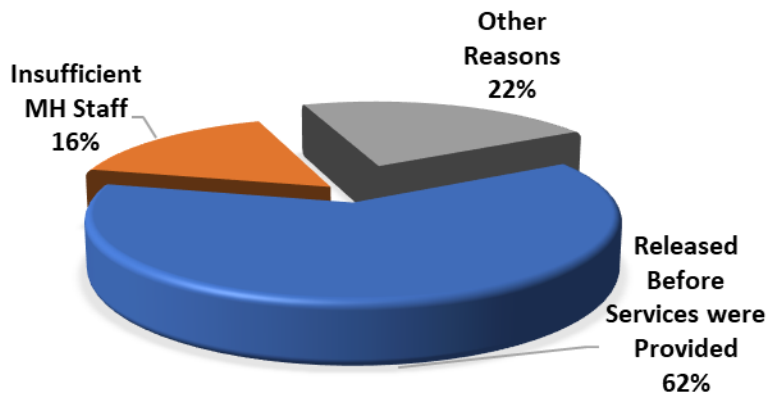
The average number of hours an inmate is confined in jail before receiving a comprehensive mental health assessment, if needed, varies from jail to jail. Figure 6 reflects the percentage of jails that reported they typically conduct comprehensive mental health assessments within specific time periods from the initial mental health screening performed at the time of commitment.

Figure 6: Average Confinement Time before Mental Health Assessment



Of the 4,042 inmates whose mental health screen indicated the need for a comprehensive assessment, 1,283 did not receive one.

Figure 7: Reasons Provided when an Inmate Who Screens Positive is not Assessed



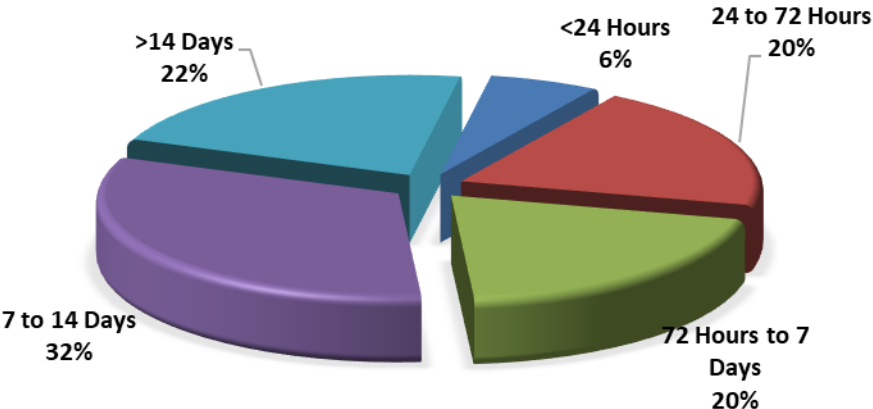
It is reasonable to assume, based upon survey responses, that a certain percentage of the population, based upon their brief length of stay, would not be confined long enough to receive a comprehensive mental health assessment, even if a screening indicated assessment would be appropriate. To include these inmates in the general population count for the purpose of calculating percentages of the population that are mentally ill, could lead to understated statistics. To more accurately reflect the mental illness percentages of the general population, Compensation Board staff has removed from its calculations the general population count of all inmates from each jail for which that jail's response regarding average hours of confinement prior to assessment indicated that the inmate would not typically be incarcerated long enough to be assessed.

A comprehensive mental health assessment may be conducted by a Licensed Mental Health Professional (LMHP) or a non-licensed Qualified Mental Health Professional (QMHP). Although assessment by an LMHP following a positive screening would be preferable, many jails do not have the resources for a licensed professional to conduct each assessment. In such cases, a non-licensed QMHP would measure the acuity of an inmate's symptoms and their additional needs, as well as determining priority of referral for diagnosis and/or psychotropic medication.

Of the inmates who received a comprehensive mental health assessment in June, 2023, 1,646 were referred for psychiatric services or other prescriber (Psychiatrist, MD, NP).

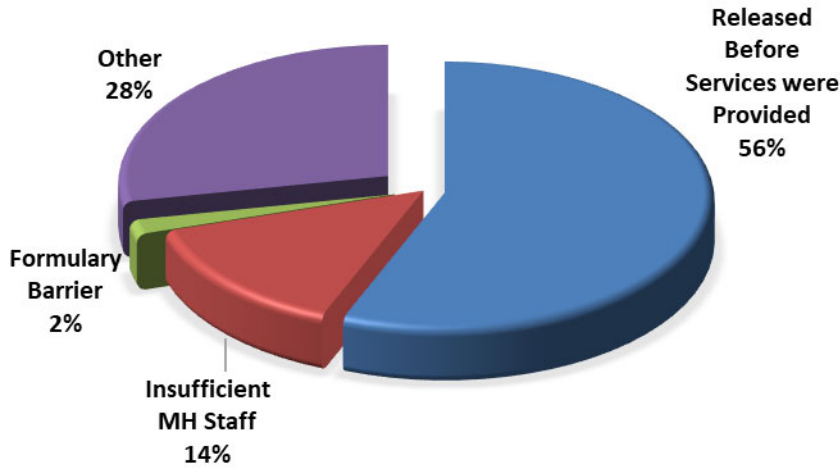
In addition to measuring the average time an inmate is confined before receiving a comprehensive mental health assessment, the survey also measures the average amount of time an inmate may wait between a comprehensive mental health assessment and an evaluation by a psychiatrist, doctor or nurse practitioner to determine further diagnosis and/or prescription needs. The time an inmate may have to wait between a comprehensive assessment and a clinical assessment, should one be needed, varies. These times may vary based upon jail mental health/medical staff resources as well as other factors such as breaks in confinement, court appearances (some of which may require overnight transfers to other jails), bond etc. Figure 8 reflects the percentage of jails that reported they typically conduct clinical assessments within specific time periods from the time of comprehensive assessment.

Figure 8: Average Confinement Time between Mental Health Assessment and Clinical Mental Health Assessment



Of the 2,088 inmates whose mental health assessment indicated the need for further services from a clinician (MD, Psyc, NP) 643 inmates did not receive those services.

Figure 9: Reasons an Inmate Referred to a Clinician May not Receive Services



The path an inmate with mental health needs may take from screening to clinical diagnosis may be different depending on the acuity of their needs as determined by mental health staff, staff resources and offense specific circumstances (bond, court appearances, violence risk assessment).

Note: Responses for figures 6 and 8 are based upon the typical assessment time reported by jails in the survey. These assessment times do not take into account inmates who are in acute crisis.

Veterans and Homeless

Data reported here regarding veteran and homeless status is as reported to the jail by the inmates and not all jails currently collect this data. Therefore, these figures are likely an incomplete representation of the numbers of veterans and homeless individuals incarcerated in jails.

- Out of 612 inmates identifying themselves as veterans, 177, or 28.92%, were identified by the jail as having a mental illness. Of the veteran group, 158, or 25.82%, were identified by the jail as having a mental illness as well as a co-occurring substance abuse disorder.
- Out of 1,344 inmates identifying themselves as being homeless, 430, or 31.99%, were identified by the jail as having a mental illness. Of the homeless group, 349, or 25.97%, were identified by the jail as having a mental illness as well as a co-occurring substance abuse disorder.

Housing

The housing of mentally ill inmates differs from jail to jail.

- 18 out of 50 reporting jails have mental health units or bed areas separate from the General Population. In these 18 jails, there are 144 beds for Females and 520 beds for Males.
- Jails reported that a total of 2,294 beds would be needed to house all inmates with non-acute mental illness in mental health beds or units, which would currently require 1,630 additional beds.
- Of the 7,209 identified mentally ill inmates, 1,037 were housed in isolation, for a total of 15,605 days. 25 of the 43 jails that housed mentally ill inmates in isolated or segregated cells did not operate a Mental Health Unit (435 inmates). If a mental health unit existed in the facility, it is possible that these inmates may not have had to be housed in isolation.)
- 23 jails have noted that they would consider hosting a state-funded Mental Health Residential Treatment Program.

There is no state funded Mental Health Residential Treatment Program operating within jail facilities at this time.

A temporary detention order (TDO) may be issued by a court or magistrate if an individual meets the criteria as set out by § 19.2-169.6. and/or § 37.2-809. Prior to the issuance of a TDO an evaluation must be conducted by the local Community Services Board or their designee. Within 72 hours from the issuance of a TDO, a hearing must be held to determine whether there is justification for a psychiatric commitment.

- A total of 11 inmates were housed in jails more than 72 hours following the issuance of a TDO during the month of June, 2023.
- Feedback from jail staff suggests that the TDO process can be inconsistent. Requests from jail staff have been made within the survey of a review of state hospital responsibilities in the process of acceptance of the incarcerated mentally ill.

Mental Health Treatment Services Provided

Mental health treatment services offered, as well as providers of those services, differ from jail to jail. Some jails may have a full-time psychiatrist or general practice physician (MD) to attend to mental health needs and dispense psychotropic medications; other jails may contract with an outside psychiatrist/general practice physician (MD) to provide services on certain days of each month, etc. Nursing staff may also provide mental health treatment.

Treatment Hours & Providers

In 2023, Community Service Boards (CSBs) were reported as providing the most significant portion of mental health treatment in jails. Community Services Boards have a statutory requirement to evaluate inmates for whom a temporary detention order is being sought (§37.2-809), however they have no statutory obligation to provide treatment in the jail.

Community Services Boards have consistently been the most often used provider of mental health treatment in the Central Region. In the Western Region, the largest overall provider of treatment has shifted back and forth between CSB's and Private contractors over the years. In 2022 and 2023 the Western Region has reported CSB as the highest provider of treatment. Eastern Region has consistently reported Private Contractors as their primary provider of mental health treatment services.

Community Service Boards are both state and locally funded so their ability to provide services may vary greatly. Some localities have a CSB office dedicated to their specific city/county, while other localities may share a regional CSB with neighboring cities/counties.

Figure 10: Average Number of Treatment Hours per Type of Provider in June, 2023

Provider	Central Region	Western Region	Eastern Region
Psychiatrists	55.68	28.13	38.47
Medical Doctors	4.75	12.21	3.67
Jail Mental Health Staff	38.60	23.07	65.67
Community Services Board	356	49.93	44.33
Private Contractors	41.20	36.43	154.57

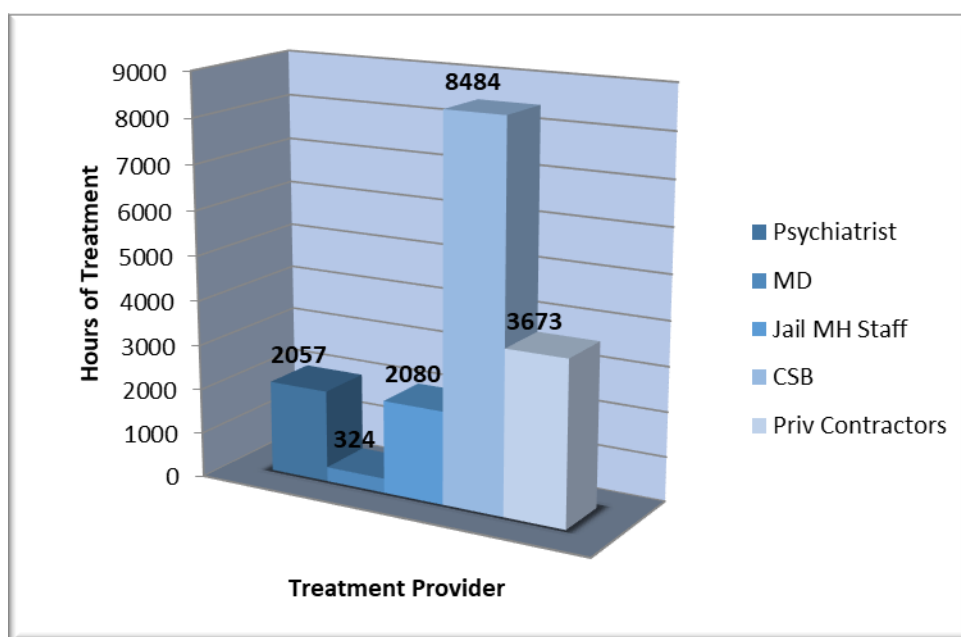
Provider	Average # of MH Trtmt Hrs Provided
Psychiatrists	41.81
Medical Doctors	6.48
Jail Mental Health Staff	41.60
Community Services Board	169.68
Private Contractors	73.45

The information provided below is for the month of June, 2023.

- A total of 16,618 treatment hours were provided, including treatment by any provider included in Figure 10. This is a continuation of the bounce back in treatment hours since measures were put in place in 2020 to reduce COVID transmission. (2022-16,279; 2021-12,644; 2020-13,912; 2019-14,817).
- All data reflected in Figures 10, 11 and 12 and in Tables 5 and 6 are for a mentally ill population of 7,209 plus a population of 3,049 inmates reported to have a substance abuse disorder without co-occurring mental illness.
- In addition to in-jail treatment, 28 jails reported providing follow-up case management for mentally ill inmates after their release from the jail. Hours related to follow-up case management are not included in any figures in this section. Specific information regarding type of post-release assistance provided is not currently collected by the survey.

Figure 11 reflects the total hours of treatment given by provider types in all jails.

Figure 11: Hours of Treatment Provided



The 2023 five jails with the highest numbers of hours of treatment provided per mentally ill inmate for the month reported in the survey were: Alexandria City Jail (45:1), Pamunkey Regional Jail (12:1), Western Tidewater Regional Jail (12:1), Portsmouth City Jail (10:1), and Prince William-Manassas Jail (9:1).

The 2023 five jails with the highest number of hours of treatment provided for all inmates for the month reported in the survey were: Alexandria City Jail (3,828), Virginia Beach City Jail (2,388), Prince William-Manassas City Jail (1,465), Fairfax County Jail (1,035), and Arlington County Jail (920).

Table 5: Historical Treatment Hours

Year	Psychiatrist	MD	Jail MH Staff	CSB	Private Contractor
2023	2,057	324	2,080	8,484	3,673
2022	2,901	269	1,354	8,964	2,748
2021	2,411	276	1,103	5,463	3,392
2020	2,108	567	1,767	4,576	4,894
2019	1,648	315	687	8,968	3,199
2018	1,776	302	2,480	13,788	3,681
2017	1,663	468	1,467	12,353	4,635
2016	1,529	290	3,307	9,903	4,998
2015	1,411	235	1,246	4,810	6,061
2014	1,125	309	1,715	5,649	3,700
2013	1,235	212	2,667	5,935	6,744
2012	1,316	406	1,436	7,204	7,013
2011	1,160	260	4,286	6,681	5,351
2010	1,309	202	2,666	4,760	2,484
2009	1,008	229	2,673	9,336	2,163
2008	251	100	520	1,872	935

Figure 12 shows the percentage that each provider comprises of the total treatment hours reported.

Figure 12: Providers of Treatment

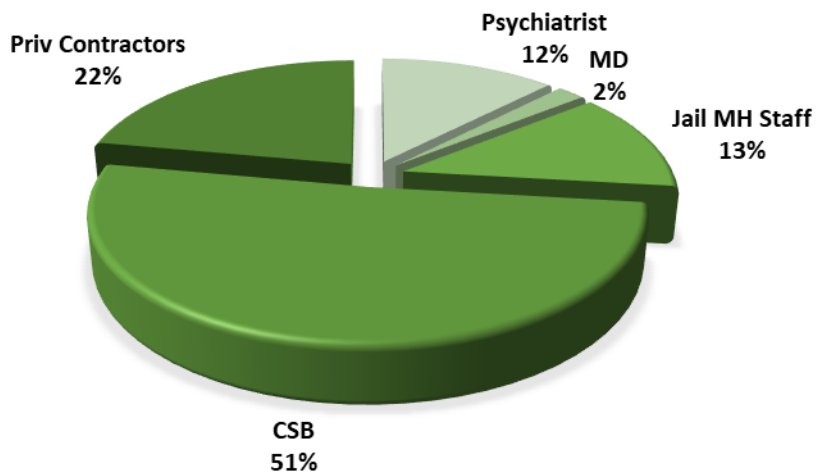


Table 6: Historical Percentage of Treatment by Provider

Year	Psychiatrists	MD	Mental Health Staff	Private Contractors	CSB
2023	12%	2%	13%	22%	51%
2022	18%	2%	8%	17%	55%
2021	19%	2%	9%	27%	43%
2020	15%	4%	13%	35%	33%
2019	11%	2%	5%	22%	61%
2018	8%	1%	11%	63%	17%
2017	8%	2%	7%	23%	60%
2016	8%	1%	18%	25%	49%
2015	10%	2%	9%	44%	35%
2014	7%	2%	10%	23%	58%
2013	7%	2%	16%	40%	35%
2012	8%	2%	8%	40%	42%
2011	7%	1%	24%	30%	38%
2010	11%	2%	23%	22%	42%
2009	7%	1%	18%	14%	61%

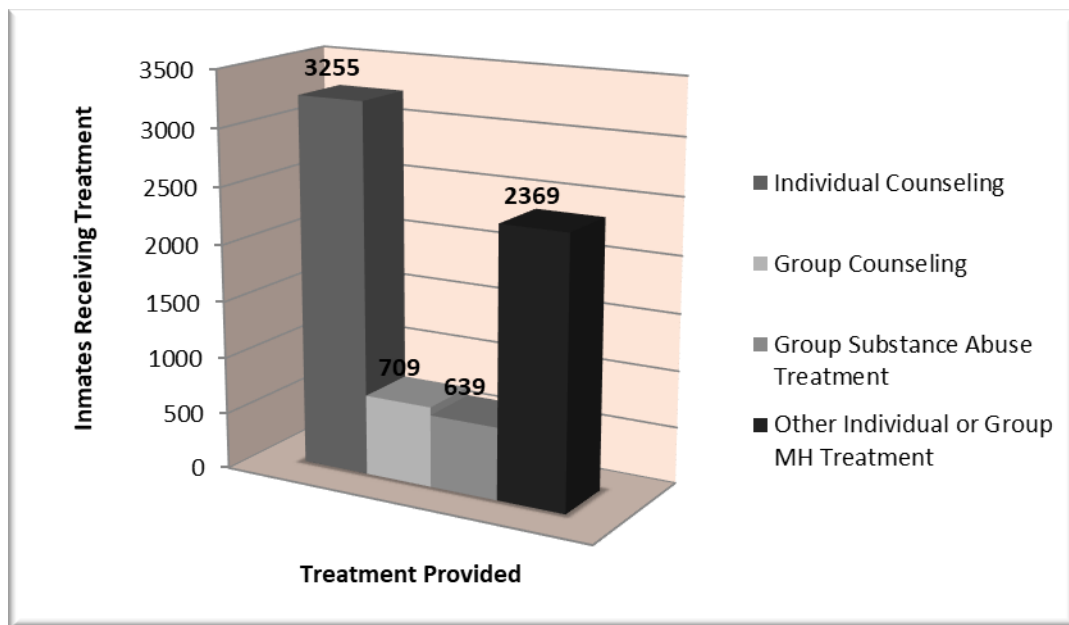
Treatment Services

An inmate may receive multiple types of treatment. Treatment may be given by any of the providers referenced previously in Figure 11 (psychiatrists, medical doctors, jail mental health staff, community services board, private contractors). Treatment includes any individual/group counseling or substance abuse services but does not include dispensing of medication.

Forty-nine (49) of the 50 reporting jails provided data on the number of inmates receiving treatment services in the categories shown below in their facilities. All inmate numbers reflected in Figures 13, 14, and 15 are from a general population of 24,967, a mentally ill population of 7,191, and a population of inmates with substance abuse without mental illness of 3,049.

- 6,972 inmates were reported to receive a type of mental health or substance abuse treatment during the month of June, 2023 (indicating some inmates received multiple types of treatment).

Figure 13: Type of Treatment Provided

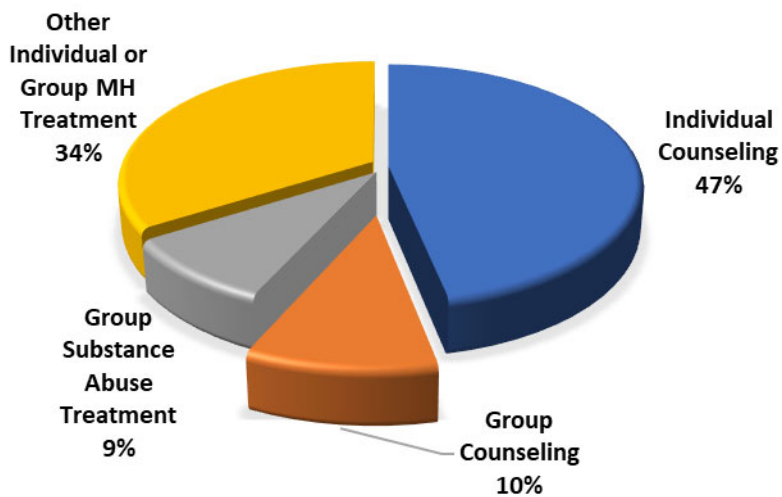


Not all facilities provide all of the above services.

Figure 14: Hours of Treatment Provided by Region

	Central Region	Western Region	Eastern Region
Individual Counseling	2,476	352	1,565
Group Counseling	479	72	69
Group Substance Abuse Treatment	1,677	680	312
Other MH Treatment	4,085	242	1,634

Figure 15: Type of Service Percentage by Number of Inmates Treated



Note: Piedmont Regional Jail did not respond to the question regarding types of treatment.

Medication

Some inmates with mental illness require the assistance of psychotropic medications. Psychotropic refers to mood altering drugs which affect mental activity, behavior, or perception. Often these medications are provided and dispensed by the jail. However, as noted in the survey, there are certain medications that some jails do not provide. In certain cases, an inmate's medication may be delivered to the jail by a 3rd party, such as a physician treating the offender pre-incarceration, or a family member authorized by the jail to bring the necessary prescribed medication.

Psychotropic medications are broken down into 4 categories: antipsychotic, mood stabilizer/anticonvulsant, anti-depressant and anti-anxiety.

- Antipsychotic medications include drugs such as: Haldol, Zyprexa, Risperdal, Seroquel, Triliafon, Prolixin, Thorazine, Abilify, Geodon, Clozaril
- Mood Stabilizer/Anticonvulsant medications include drugs such as: Depakote, Lithium, Tegretal, Topamax, and Trileptal
- Anti-depressant medications include drugs such as: Prozac, Zoloft, Lexapro, Wellbutrin, Paxil, Elavil, Pamelor, and Desyrel
- Anti-anxiety medications include drugs such as: Ativan, Xanax, Librium and Valium

During June, 2023 there were 9,341 prescriptions for psychotropic medications being dispensed in local and regional jails. The number of medications administered may exceed the number of inmates receiving treatment, as an inmate may be taking more than one medication. There were 3,476 fewer reported medications dispensed in 2023 than in 2022. (It should be noted that nonresponsive jails Riverside Regional Jail, Chesapeake City Jail and Danville Jail reported a combined total of 1,200 medications dispensed in 2022.) It has been noted by several jails that it is less expensive to provide mentally ill inmates medication than it is to provide treatment services.

6,909 total inmates were dispensed psychotropic medications. This number will not equal the number of medications dispensed as an inmate may be prescribed more than one.

Table 7: Historical Trend of Medications Dispensed

<u>Year</u>	<u>Number of Medications Dispensed</u>
2023	9,341
2022	12,817
2021	12,287
2020	10,475
2019	11,050
2018	10,675
2017	11,547
2016	10,723
2015	11,052
2014	8,894
2013	9,316
2012	6,576
2011	6,490
2010	6,274
2009	5,746

Figure 16: Number and Type of Psychotropic Medications Dispensed

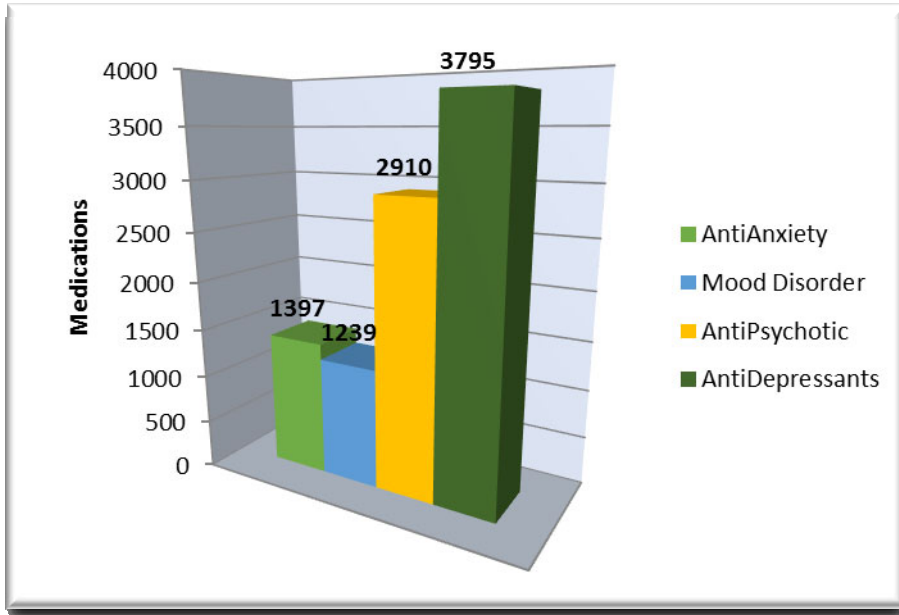
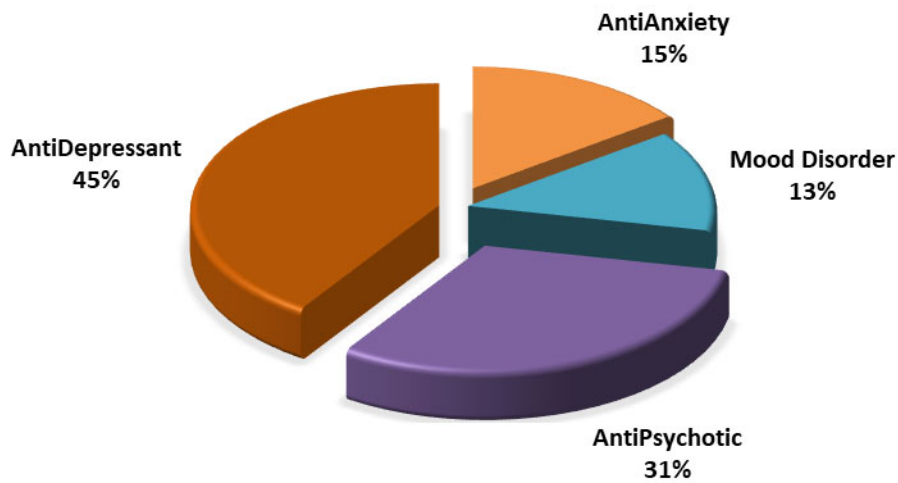


Figure 17: Percentage of Psychotropic Medication Dispensed by Type



The 2023 top five distributors of psychotropic medications for the month reported in the survey were: Southwest Virginia Regional Jail (818), Western Virginia Regional Jail (677), Virginia Beach City Jail (545), Roanoke City Jail (543) and Hampton Roads Regional Jail (467).

The 2023 five distributors of the highest ratio of psychotropic medications per mentally ill inmate for the month reported in the survey were: Pamunkey Regional Jail (6.73:1), Roanoke City Jail (6.24:1), Western Tidewater Regional Jail (4.92:1), Western Virginia Regional Jail (4.42:1), and Northern Neck Regional Jail (3.83:1).

A total of 1,080 jail inmates with mental illness refused psychotropic medication. This is 15.29% of the mentally ill population. Jails were asked to report their procedure when an inmate refuses medication. Responses varied, but the most commonly reported actions taken were: require the inmate to sign a refusal form; refer the inmate to the psychiatrist or other qualified mental health professional for counseling; contact prescribing provider if not jail mental health staff, and monitor inmate for changes in behavior.

In the June, 2023 survey, jails were asked to report how often they seek judicial approval for involuntary treatment when an inmate refuses medications.

- 1 Jail Always seeks judicial approval for involuntary treatment when an inmate refuses medications.
- 2 Jails Sometimes seek judicial approval for involuntary treatment when an inmate refuses medications.
- 33 Jails Only if the Inmate is a Danger do they seek judicial approval for involuntary treatment when an inmate refuses medications.
- 14 Jails Never seek judicial approval for involuntary treatment when an inmate refuses medications.

Note: Pamunkey Regional Jail did not respond to the question regarding whether they seek judicial approval for involuntary treatment
Note: Roanoke City Jail did not report the number of inmates receiving medication.

Substance Abuse/Special Education

- Of the 7,209 inmates with mental illness, 3,963 had a co-occurring substance use/abuse disorder, or about 54.97% of the mentally ill jail population.
- Those inmates with co-occurring mental illness and substance use/abuse disorder comprised 15.65% of the general jail population.
- 3,049 inmates without mental illness were reported to have substance use/abuse disorders, representing about 12.04% of the general population.
- As illustrated earlier in Figure 15, 9% of all inmates receiving jail provided treatment services are receiving group substance abuse treatment.

The general population inmate count used to calculate the percentages of mental illness and substance abuse in this section is 25,324.

Federal regulations mandate that all correctional facilities provide access to special education for inmates. During the month of June, 2023, 66 inmates were receiving special education.

Note: The population counts used to calculate mental illness percentages are the number of inmates confined long enough to have received a comprehensive mental health assessment by a qualified mental health professional, should a screening indicate that an assessment was necessary. The determination of whether an inmate was confined long enough to have been assessed is made based upon the jails answer to question 14 of the survey.

Mental Illness & Offense Type

For each inmate identified as mentally ill, jails were asked to note the most serious offense (MSO) type on which the offender was held. The following are the offense types, listed in order of severity: violent felony, drug felony, non-violent felony, violent misdemeanor, drug misdemeanor, and non-violent misdemeanor. Most serious offense classification is based on the most serious offense with which an inmate is currently charged, and not necessarily of which the inmate is ultimately convicted.

Of the 7,209 inmates with mental illness, jails reported the most serious offense type for 5,810, or 80.59% of them. Of the inmates for whom the most serious offense type was reported, 74.73% had felony offenses, 23.25% were held on misdemeanor offenses and 2.07% were held on ordinance offenses.

Table 8: Percentage of Mental Illness by Offense Type-Crime Type

Year	Felony	Misdemeanor	Ordinance
2023	74.73%	23.25%	2.07%
2022	72.18%	23.40%	4.42%
2021	76.55%	20.75%	2.70%
2020	84.51%	12.52%	2.96%
2019	78.17%	19.34%	2.49%
2018	74.59%	21.22%	4.19%
2017	76.93%	20.52%	2.54%
2016	80.58%	16.85%	2.57%
2015	75.85%	22.04%	2.12%
2014	76.96%	20.68%	2.36%
2013	69.70%	26.93%	3.38%
2012	73.39%	24.02%	2.60%
2011	76.95%	20.96%	2.09%

Table 9: Percentage of Most Serious Offense-Crime Type of the General Population

Year	Felony	Misdemeanor	Ordinance
2023	70%	28%	2%
2022	72%	26%	2%
2021	74%	24%	2%
2020	80%	18%	2%
2019	71%	26%	3%
2018	70%	27%	3%
2017	70%	27%	3%
2016	67%	29%	4%

Figure 18 illustrates the percentage each offense type comprises of the total mentally ill population reported in the survey question that references Most Serious Offense. The count of mentally ill inmates used for this graph does not include 788 inmates reported to be held for ordinance violations.

Figure 18: Percentage of Mental Illness by Most Serious Offense Type (Crime Severity)

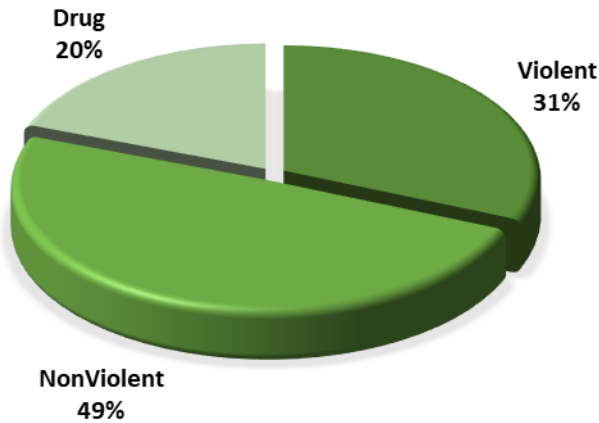


Figure 19 illustrates the percentage each offense type comprises of the total general population.

Figure 19: Percentage of General Population by Most Serious Offense Type (Crime Severity)

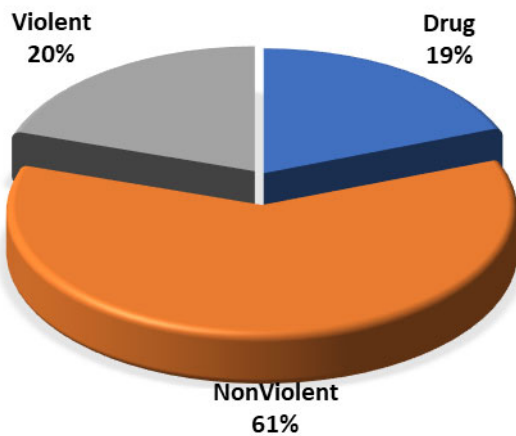


Figure 20 illustrates the percentage each offense comprises of each diagnosis.

Figure 20: Mental Illness Categories & Offense Type

	Felony Violent	Felony Drug	Felony Non-Violent	Mis Violent	Mis Drug	Mis Non-Violent	ORD
Schizophrenia/Delusional	37.78%	11%	22.62%	3.79%	0.49%	23.35%	1.34%
Bi-Polar/Major Depressive	26.26%	18.31%	32.32%	1.21%	0.97%	18.98%	1.94%
Mild Depression	27.68%	14.11%	30.71%	3.21%	1.96%	16.43%	5.89%
Anxiety Disorder	28.07%	20.19%	30.21%	2.54%	2.54%	15.11%	1.34%
PTSD	27.54%	22.46%	27.54%	1.76%	1.76%	17.38%	1.56%
Other Mental Illness	31.68%	21.52%	27.27%	3.07%	0.80%	14.17%	1.47%
Mentally Ill w/ No Diagnosis	22.45%	17.81%	24%	1.55%	1.03%	31.23%	1.94%

Figure 21 illustrates the regional offense type percentage of mentally ill inmates for whom most serious offense type was reported.

Figure 21: Mental Illness and Offense Type Percentage by Region

	Central Region	Western Region	Eastern Region
Felony	66.46%	89.17%	74.73%
Misdemeanor	28.19%	10.55%	24.16%
Ordinance	5.35%	.28%	1.11%

Figure 22 illustrates the regional crime type percentage of mentally ill inmates for whom most serious offense type was reported. This figure does not include inmates whose most serious offense was an ordinance violation.

Figure 22: Mental Illness and Crime Type Percentage by Region

	Central Region	Western Region	Eastern Region
Violent	28.68%	31.65%	34.09%
Non-Violent	47.02%	37.34%	52.26%
Drug	19.81%	31.83%	13.08%

Figure 23: Mental Illness & Offense Type Percentage of Increase/Decrease since 2022

	Felony Violent % Change	Felony Drug % Change	Felony Non-Violent % Change	Mis Violent % Change	Mis Drug % Change	Mis Non-Violent % Change	ORD % Change
Schizophrenia/Delusional	7.74%	-0.08%	0.87%	-1.27%	-1.88%	1.07%	-6.08%
Bi-Polar/Major Depressive	2.53%	-1.70%	2.09%	-1.63%	-1.20%	1.54%	-1.63%
Mild Depression	1.06%	-2.71%	3.30%	-1.02%	-3.73%	3.45%	-0.33%
Anxiety Disorder	6.22%	-2.07%	3.93%	-0.68%	-2.39%	-2.72%	-2.29%
PTSD	2.25%	-1.00%	1.91%	-2.57%	-2.11%	5.65%	-4.13%
Other Mental Illness	3.29%	1.45%	-4.49%	0.80%	-0.84%	0.76%	-0.96%
Mentally Ill w/ No Diagnosis	2.69%	0.55%	-4.17%	-2.14%	-2.80%	8.22%	-2.34%

Note: The percentages in Figures 18,19, 20, 21,22 and 23 are from a total mentally ill population of 5,810.

Note: Alleghany Regional Jail did not respond to the question regarding diagnosis and offense. The responses for Richmond City Jail, Roanoke County Jail, Blue Ridge Regional Jail and Southwest Virginia Regional Jail regarding diagnosis and offense were removed from the report data due to inmates being reported for *each* offense on which they were held, instead of simply the most serious offense.

Inmate Aggression

There were 322 documented incidents of inmate aggression (to include physical or sexual assault and/or threats of violence) toward other inmates and 145 documented incidents of inmate aggression toward jail staff in the month of June, 2023. 168 inmate perpetrators had been diagnosed as mentally ill, and 95 victims of inmate aggression had been diagnosed as mentally ill.

Table 10: Inmate Aggression

Year	Toward Inmates	Toward Jail Staff	Perpetrators MI	Victims MI
2023	322	145	168	95
2022	399	283	258	97
2021	410	200	183	81
2020	463	299	155	75
2019	503	313	159	76
2018	337	132	117	46
2017	318	137	92	36
2016	321	108	134	53
2015	288	104	133	56
2014	353	132	97	74
2013	287	90	91	33
2012	297	208	90	35

During FY2023, there were 48 inmates who died while in the custody of a local or regional jail. Fifteen of these inmates were reported by jails to have died due to an unnatural cause. Of the fifteen unnatural deaths in custody, 7 were confirmed as suicide, 1 drug related, 7 reason was unreported. Whether or not these inmates were suffering from a mental illness is unknown.

Table 11: Deaths in Jails

Year	Death by Natural Cause	Death by Unnatural Cause
FY2023	33	15
FY2022	43	20
FY2021	41	23
FY2020	34	13
FY2019	43	12
FY2018	42	15
FY2017	20	10
FY2016	25	6
FY2015	0	15
FY2014	33	11
FY2013	5	6
FY 2012	27	13
FY 2011	29	6

Note: Figures do not include potential deaths of individuals on Home Electronic Monitoring

Treatment Expenditures

The following reflects the cost of all mental health treatment, including medications, as reported by the jails for FY23. Some jails provided estimated or pro-rated annual costs; total figures have not been audited.

- The total reported cost of all psychotropic medications administered was \$4.7 million.
- The total reported cost of mental health services, excluding medication but including medical doctors and nursing, was \$24.6 million. This was \$3.3 million more than reported for FY22.
- Total cost of mental health treatment was estimated at approximately \$29.3 million in FY23.

Table 12: Treatment Expenditures

Year	Medication	MH Services	Total Cost
2023	\$4.7 million	\$24.6 million	\$29.3 million
2022	\$4.5 million	\$21.8 million	\$26.3 million
2021	\$3.9 million	\$24.1 million	\$28 million
2020	\$4.2 million	\$18.7 million	\$22.9 million
2019	\$3.8 million	\$16.9 million	\$20.6 million
2018	\$3.8 million	\$17.8 million	\$21.6 million
2017	\$3.8 million	\$10.5 million	\$14.3 million
2016	\$3.7 million	\$10.3 million	\$14 million
2015	\$5.1 million	\$9.1 million	\$14.2 million
2014	\$3.6 million	\$9.1 million	\$12.7 million
2013	\$2.7 million	\$8 million	\$10.7 million
2012	\$3.7 million	\$9.6 million	\$13.3 million

Note: Roanoke City Jail dispensed medications and provided treatment services but did not report the cost of either.

Note: Albemarle-Charlottesville Regional Jail and Western Tidewater Regional Jail reported that mental health services were provided but did not report the cost of such services.

Note: Rockbridge Regional Jail dispensed medication but did not report the cost.

Note: Fund source (State, Federal, Local, Other) was not included in this year's report due to the inability to reconcile totals as reported by source.

Jail Staff & Maintenance of Mental Health Data

Depending on the operational capacity of the jail, the number of staff members, including jail officer/sworn deputies and civilian personnel, ranges from 13 to 506

- 40 of 50 reporting jails provide mental health training to each new jail officer/deputy prior to his/her initial assignment to the jail. Of these jails, there is an average of 14.23 hours of mental health training provided per jail officer/deputy. 10 jails provide 20 hours or greater of mental health training per jail officer/deputy prior to initial assignment.
- 33 of 50 reporting jails require jail officers/deputies to complete additional training in mental health topics annually. Of these jails, jail officers/deputies are required to complete an average of 6.28 hours of training in mental health topics each year.

Forty jails indicated that their jail's electronic inmate management system includes mental health screening items, while 5 jails indicated that their electronic inmate management system also includes inmate psychiatric diagnoses.

BHCM and PMED Positions Funded

Every year, jails report that housing mentally ill offenders creates unique challenges. To assist in addressing those challenges, the 2022 Special Session I of the General Assembly appropriated \$17 million in additional funding to the Compensation Board for behavioral health case managers and partially-funded medical and treatment positions in local and regional jails. As a result of this appropriation (\$7,332,246 in FY23 and \$9,835,820 in FY24) 127 new partially-funded medical positions and 125 new behavioral health case manager positions were allocated to jails in FY23. Positions designated for medical and treatment services in jails by the Compensation Board are established under a shared funding mechanism, where 2/3 of the designated Compensation Board salary is payable by the Compensation Board, and the local government/regional jail is required to pay the remaining 1/3 of the salary amount. Consequently, such positions are designated with the term “partially-funded”. Positions allocated for behavioral health case management were not established under this shared funding mechanism (although local governments and jails may still provide local salary supplements to increase salary levels).

Funding was appropriated based on the cost to provide 50% of the total number of positions due according to Compensation Board staffing standards established for these position types, with half of the funded positions allocated on 8/1/22 and the remainder on 1/1/23. Position allocation to each jail was based on current Compensation Board staffing standard methodologies.

The number of BHCM (behavioral health case management) positions due in each jail is based on a ratio of 1 position per every 160 inmates of ADP, with a minimum of 1 position in each jail. This was a new standard, not previously funded, established as recommended in a report prepared by the Department of Criminal Justice Services (in conjunction with the Compensation Board and DBHDS) in July, 2021, estimating costs to meet minimum standards proposed by the Board of Local and Regional Jails for mental and behavioral health services in Virginia jails (a link to the report may be found in the appendices).

The number of PMED (partially-funded medical) positions due in each jail is based on a ratio of 1 partially-funded position per every 25 inmates of ADP or Board of Local and Regional Jails (BLRJ) rated capacity, whichever is greater. This staffing standard is not new, but many of the positions due for this function had not previously been funded. In the interest of ensuring jails had minimum staffing allocated for the existing standard for medical and treatment positions, new positions were allocated in jails where the standard was not previously funded.

(A list of the number of BHCM and PMED positions and funding allocated to each jail in FY23 may be found in the appendix of this document.)

In 2023 questions were added to the Mental Illness in Jails survey to collect data related to the use of the new positions, as well as any possible barriers to implementation.

BHCM Positions

Of the 58 local and regional jails, at least one BHCM position was allocated to each jail.

- 9 of 49 reporting jails have hired for All of Them
- 6 of 49 reporting jails have hired for Some of Them
- 34 of 49 reporting jails have hired for None of Them

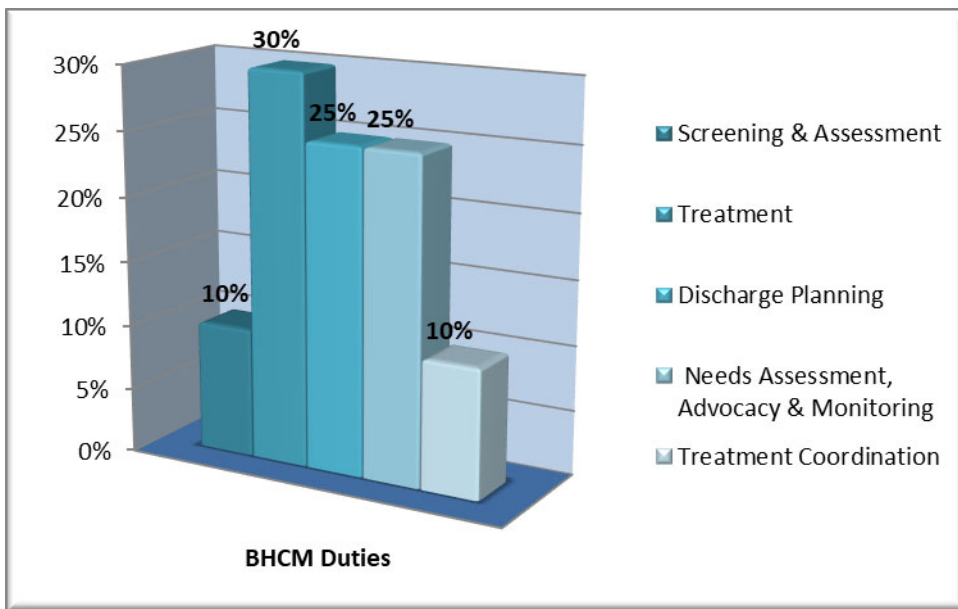
Of the jails who have not filled their BHCM positions,

- 10 jails reported it is because funds are used to cover the cost of a medical services contract where the BHCM responsibilities are provided under the contract.
- 5 jails reported it is because those funds are used to pay the salary of a Community Services Board (CSB) employee working full time within the jail to provide services.
- 15 jails reported it is due to lack of availability of qualified professionals seeking employment in a medical capacity
- 15 jails reported that the positions were not hired due to other reasons

The Compensation Board does not provide job descriptions for positions in local and regional jails, as classification levels and duty assignments are the responsibility of the elected Sheriff or appointed Superintendent. Depending upon region, average daily jail population, total jail staff and other factors, the duties of a position in a particular classification, such as PMED or BHCM, may vary. However, in the July, 2021 report estimating costs to meet minimum standards for mental and behavioral health services in jails, the recommendation for staffing included behavioral health case managers with direct responsibility for overseeing discharge planning among other elements of effective case management (QMHPs or individuals otherwise qualified to provide mental and behavioral health case management).

Figure 24 reflects the basic BHCM job duties reported by jails who have filled their new BHCM position(s) or intend to fill them soon.

Figure 24: Job Duties of BHCM Positions Allocated in FY23



Some jails who have contracted with an outside provider (private or CSB) for mental/behavioral health treatment have opted to use funds from the newly allocated positions toward those contracts to provide behavioral health case management services. Transfer of funds for such use would require jails to request approval from the Compensation Board annually. The Compensation Board may approve an annual transfer of the salary funds from these positions to another budget category to reimburse the contracted expenses.

Of the jails that maintain a private contract for mental/behavioral health, ten (10) reported that the number of employees and/or hours of mental/behavioral health treatment from their contractor have been increased since the additional positions (budgeted funds) were allocated to their jail. No jails have reported that their locality has reduced local funding allocated to mental/behavioral health at this time as a result of the allocation of additional state funds.

Of the jails that contract with their local CSB for mental/behavioral health, four (4) reported that the number of employees and/or hours of mental/behavioral health treatment from the CSB have been increased since the additional positions (budgeted funds) were allocated to their jail. No jails have reported that their locality has reduced local funding allocated to mental/behavioral health at this time as a result of the allocation of additional state funds.

Fourteen (14) jails also reported having mental/behavioral health staff in their jail funded by a grant, for a total of thirty-five (35) grant funded mental/behavioral health staff members.

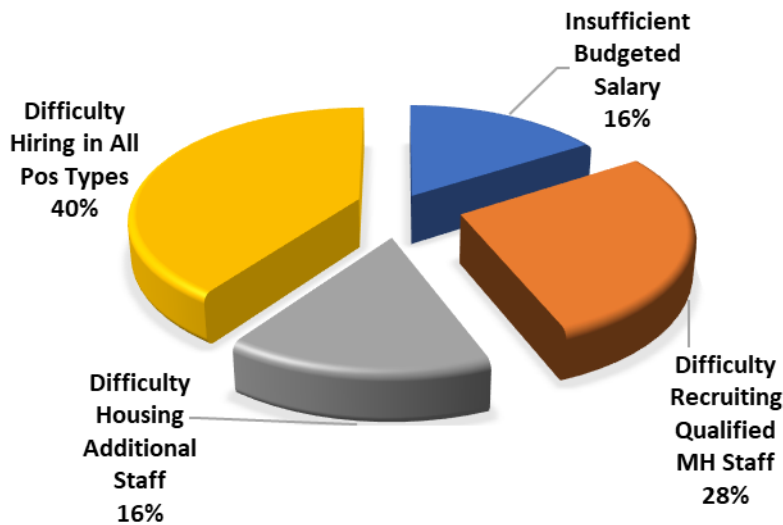
Of the jails with grant funded positions, the sources identified are shown in Figure 25 below.

Figure 25: Number of Jails with Grant-funded Mental/Behavioral Health Positions by Source of Grant Funding

DBHDS Forensic Discharge Planning	6
Federal	2
DCJS	6

For Sheriffs/Superintendents who wish to direct-hire into these new positions in lieu of transferring funds to fund a medical services contract, but experienced difficulties doing so, the barriers to hiring reported are shown in Figure 26.

Figure 26: Reasons for Difficulty in Hiring BHCM



Fourteen (14) jails reported that they are able to offer additional services since receiving one or more BHCM positions. Examples of new services provided are: additional re-entry services that allow staff to follow clients into the community; supervision of other clinicians; supervised peer counseling; discharge planning; group counseling; medication assisted treatment (MAT) services.

Fifteen (15) jails reported that they have been able to improve existing services since receiving one or more BHCM positions. Examples of improvements to existing services are: expediency of evaluation and treatment; expansion of re-entry services to a larger subset of the jail population; greater scope and efficiency of discharge planning; stronger provider-patient communication with seriously mentally ill inmates; expansion of Opioid Use Disorder (OUD) services; increase in amount of QMHP availability, particularly during usual off-hours.

Additional explanation for barriers to hiring for BHCM positions provided are: budgeted salary is low, without a salary supplement from the locality hiring would be difficult; limited physical space for housing/treating MI inmates; lack of qualified mental/behavioral health professionals willing to work in a correctional setting; rural location; competing with nearby jurisdictions for qualified professionals.

The only barrier to implementation of additional services reported this year was in regard to discharge planning. One jail reported difficulty in identifying release dates in order to execute robust discharge planning due to the fluidity of the LR jail population and the need to wait for release date notification from DOC in the case of the SR jail population.

PMED Positions

Of the 58 local and regional jails, at least one additional PMED position was allocated to 26 of them. Jails who did not receive any PMED positions were not found to be due additional positions in accordance with the staffing standards methodology.

Of the 26 jails who received one or more additional PMED positions,

- 1 jail has hired for All of Them
- 1 jail has hired for Some of Them
- 24 jails have hired for None of Them

For the jails who have received a PMED position that remains unfilled

- 9 jails reported it is because funds are used to cover the cost of a medical services contract
- 11 jails reported it is due to lack of availability of qualified professionals seeking employment in a medical capacity
- 5 jails reported it is due to an insufficient budgeted salary
- 14 jails reported that the positions were not hired due to other reasons

Ten jails reported that the number of employees and/or hours of medical treatment from their medical contractor have been increased since the additional PMED positions (budgeted funds) were allocated to their jail. No jails have reported that their locality has reduced local funding at this time as a result of the allocation of additional state funds.

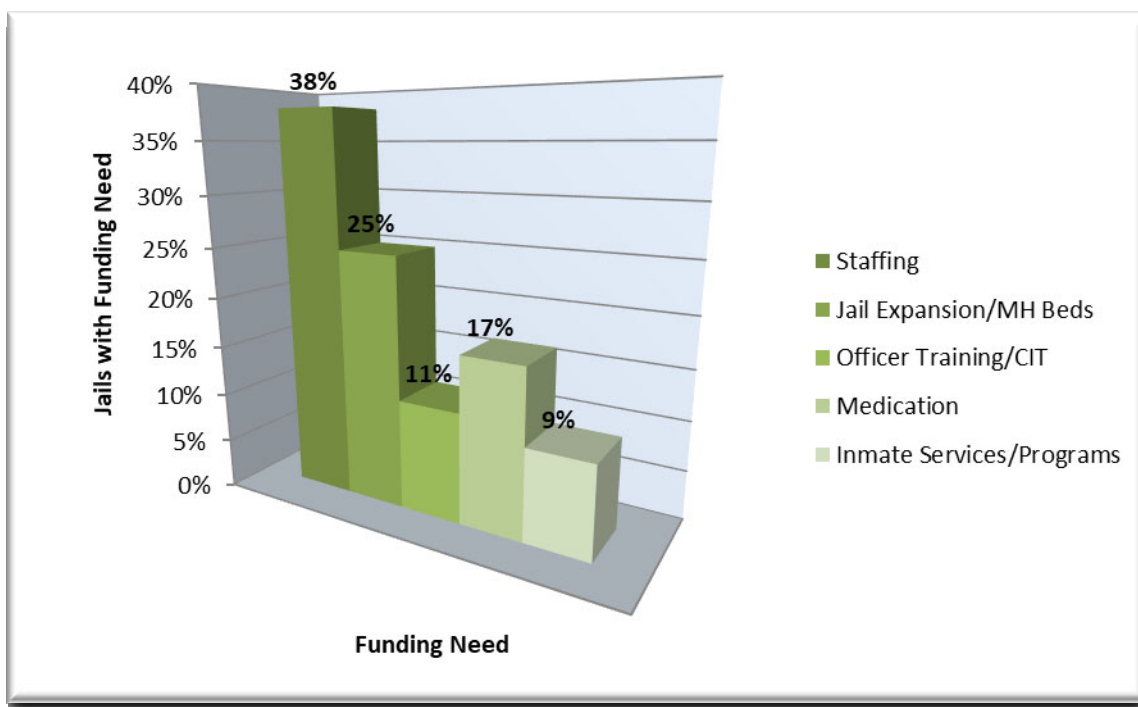
Note: Jails may have provided more than one explanation for unfilled new positions
Note: Culpeper County Jail did not respond to the questions regarding new positions

Areas of Greatest Need for Funding

In the 2023 survey, jails again reported the areas in which they still felt additional funding would be most beneficial. Forty-nine (49) jails responded to the question regarding additional funding needs.

Figure 27 illustrates the percentage of responding jails reporting each type of funding that would be most beneficial. Each jail may have reported more than one type of funding that would be of greatest benefit.

Figure 27: Greatest Funding Needs



Jails continued to report that additional community resources are needed to better facilitate re-entry, bridging the gap between jail and return to community. The need for transitional medications (medication to last from release until the person can be seen by a community mental health provider) as well as continuity of care within the community.

A number of facilities included comments explaining the need for funding for training and treatment services/programs specifically addressing Opioid Use Disorder (OUD). Within the scope of any such funding is the need for increased capacity to identify opiate use as well as provide evidence-based treatment. Several jails specifically noted assistance needed with development of a jail-based MAT (medication assisted treatment) program. Medication assisted treatment (the use of

medications in combination with counseling and behavioral therapies) is often used in the treatment of OUD but can be used in the treatment of other substance abuse disorders as well.

Of the jails who noted that more training should be made available for jail staff (through DCJS, DBHDS or other resource) specifically noted was training for jail staff on dealing with military veterans in crisis.

A facility that marked jail expansion/mental health beds as a funding need provided additional feedback to explain that due to the age of their jail, the current cell construction did not lend itself to the best accommodation of MI inmates.

Note: Blue Ridge Regional Jail did not respond to the question regarding greatest funding needs.
Note: Fairfax County Jail notes that they currently operate a robust opioid treatment program.

Crisis Intervention Teams

The Department of Criminal Justice Services (DCJS) and the Department of Behavioral Health and Developmental Services (DBHDS) collaborate to support and administer Crisis Intervention Team (CIT) programs across the Commonwealth. At its core, CIT provides 1) law enforcement crisis intervention training to enhance response to individuals exhibiting signs of a mental illness; 2) a forum to promote effective systems change and problem-solving regarding interaction between the criminal justice and mental health care systems; and 3) improved community-based solutions to enhance access to services for individuals with mental illness. Successful CIT programs improve officer and consumer safety, reduce inappropriate incarceration and redirect individuals with mental illness from the criminal justice system to the health care system when to do so is consistent with the needs of public safety.

Although CIT training is primarily for law enforcement, it is also offered to other first responders such as Fire and EMS, mental health staff, correctional officers, and others. In local and regional jails, the primary purpose of the CIT training is to help jail officers recognize when a person may be suffering from a mental illness, to give them a better awareness of the needs of individuals with mental illness and to give them the tools and strategies needed for de-escalation in a situation where a mentally ill offender appears to be in crisis.

Forty-eight (48) of 50 reporting jails have jail officers/deputies who have completed Crisis Intervention Team (CIT) training. Of these jails, an average of 42 jail officers/deputies in each jail has completed CIT training. Ten jails reported that at least half of their total staff has completed CIT training.

CIT Programs are comprised of three components: a community engagement component, a training component, and an access to services component. The access to services component is typically achieved through Crisis Assessment Sites. Assessment Sites are designed to enable police officers or sheriffs' deputies to take a person experiencing a mental health crisis for quick and appropriate mental health assessment and linkage to treatment in lieu of arrest or jail.

The CIT Assessment Site program has reduced the number of Site locations in the last year as programs began working toward a more comprehensive model of crisis care. The model being utilized is 23-hour care and observation, known by many different names nationwide but referred to as a Crisis Receiving Center (CRC) in Virginia. The build out of these centers is a critical piece of both the DBHDS strategic plan and Governor Youngkin's Right Help Right Now initiative. CRCs provide the same level of clinical evaluation when needed as a CIT Assessment Site, however, also include medical evaluation, psychiatric evaluation, peer recovery specialists, and intense case management and discharge planning to other levels of care for the individual presenting in crisis.

CRCs are often built onto existing CIT Assessment Site programs as it is widely held that individuals who may avoid inappropriate arrest may also avoid unnecessary hospitalization when provided with appropriate supports immediately upon engagement with both CIT trained law enforcement and the behavioral health system. Virginia has four operational CRCs as of summer 2023, with 10 in development and additional funding for the creation of about 9 more in FY24. The goal is a network of centers that can be reached by individuals within an hour or less in any area of the Commonwealth.

Current Initiatives, Final Remarks & Future Measures

Sheriffs and Jail Superintendents were notified in June, 2023 of survey deadlines and instructions and were forwarded an advanced copy of the mental health survey. There were a number of questions added to the survey this year to collect data regarding the use of partially-funded medical/treatment (PMED) and Behavioral Health Case Management (BHCM) positions allocated to jails by the Compensation Board.

The 2022 Appropriation Act, Chapter 2, Item 72 paragraph P. appropriated \$7,332,246 the first year and \$9,835,820 the second year to the Compensation Board for the funding of new behavioral health case manager and medical and treatment positions in local and regional jails. This funding provides for the allocation of 127 new medical and treatment positions in jails and the allocation of 125 new behavioral health case manager positions in jails in FY23. Updates on the use of the new positions and barriers to implementation were addressed earlier in this document.

In 2023, the Governor's Chief Transformation Office established the Re-Entry Optimization Taskforce which focuses on improving outcomes for probationers, including those leaving from jails, on several key metrics such as employment, supervision level, housing, mental health, benefit enrollment (including Medicaid), and substance use. The taskforce is comprised of several state agencies including the Virginia Department of Corrections (VADOC), the Department of Medicaid Assistance Services (DMAS), the Virginia Department of Behavioral Health and Developmental Services (DBHDS), the Virginia Employment Commission (VEC), and the Department of Housing and Community Development (DHCD).

In 2023, the Governor issued Executive Order 26—Crushing the Fentanyl Epidemic: Strengthening Virginia's interdiction and enforcement response to fentanyl crisis. Section 8 directed the Secretary of Public Safety and Homeland Security to establish a workgroup to improve pathways for incarcerated individuals with substance use disorders to remain drug-free when they are released from incarceration. The workgroup, Re-entry to Recovery, is comprised of multiple state agencies, private entities, and representatives from the Virginia Sheriff's Association and the Virginia Association of Regional Jails.

The 2023 General Assembly created the Virginia Opioid Use Reduction and Jail-Based Substance Use Disorder Treatment and Transition Fund, (§9.1-116.8) to be effective July 1, 2024. The Fund shall be administered by DCJS, who shall adopt guidelines, in consultation with the Virginia Sheriffs' Association and the Virginia Association of Regional Jails, to make funds available to local and regional jails for the planning or operation of substance use disorder treatment services and transition services for persons with substance use disorder who are incarcerated in local and regional jails. The guidelines shall direct the distribution of funds to programs including medical assisted treatment therapies, addiction recovery and other substance use disorder services, or reentry and transitional support. DCJS shall establish a grant procedure, in consultation with the Virginia Sheriffs' Association and the Virginia Association of Regional Jails, to govern funds awarded for this purpose. No grant funds shall be used by the grantee to supplant funding for an existing program.

The 2016 Appropriation Act, Chapter 780, Item 398, paragraph J. directed the Department of Criminal Justice Services (DCJS) to recommend up to six local or regional jails for participation in a mental health pilot program. The selected jails would provide behavioral health services to inmates while incarcerated, and a continuum of care when they are released back into communities. The pilot program received funding as part of 2017 budget language and has continued to receive funding to facilitate continuation of the program every biennium since. The most recent Acts of

Assembly continues the allocation of \$2,500,000 in FY23 and FY24. This allocation is intended solely for the continued operation of the current programs. No funding has been appropriated for expansion of this pilot program beyond the initial six jails (Chesterfield County Sheriff's office, Hampton Roads Regional Jail, Middle River Regional Jail, Prince William Adult Detention Center, Richmond City Sheriff's office and Western Virginia Regional Jail). A report on the findings of data collected from each site shall be provided annually by DCJS to the Chairmen of the House Appropriations and Senate Finance and Appropriations Committees (a link to the 2021, 2022 and 2023 reports may be found in the appendices).

STEP-VA (System Transformation Excellence and Performance), developed in 2017 and funded under the Department of Behavioral Health and Developmental Services (DBHDS), is a nine-step program with a goal toward providing equitable and consistent behavioral healthcare statewide. The steps of the program are: same day access to assessments; primary care screenings and referrals; access to outpatient services within 10 days of assessment; behavioral health crisis services; peer/family support services; psychiatric rehabilitation; veterans behavioral health; case management; and care coordination. Despite the COVID-19 pandemic, as well as the behavioral health workforce crisis, STEP-VA implementation and planning have continued. Currently all CSB's have successfully fully implemented the first three steps and additional steps have implemented at some level. As part of the FY22 budget, funding for the outpatient services, crisis services, infrastructure, peer recovery services, and military and veterans' services STEPs was continued and funding for psychiatric rehabilitation services, case management, care coordination, and additional infrastructure was appropriated. (DBHDS STEP-VA FY22 Annual Report).

In 2020, the Virginia General Assembly directed DCJS and DBHDS to collectively develop and establish the Marcus Alert System (§37.2-311.1; The Marcus-David Peters Act). The goal of the Marcus Alert System is to set up a framework in which acute mental health crises can be met with a mental health response, diverting individuals from law enforcement into community crisis care. Successful implementation of the Marcus Alert system will reduce the number of individuals in crisis committed to jail. The Marcus Alert system is intended to complement, not replace, the existing STEP-VA program.

The initial five partners are; Rappahannock-Rapidan Community Services (serving the counties of Orange, Madison, Culpeper, Fauquier, Rappahannock), Prince William County Community Services, Highlands CSB (serving the county of Washington and city of Bristol), Richmond Behavioral Health Authority, and Virginia Beach Human Services. As of July 1, 2023 an additional program has been established in each region. By July 1, 2028, all Community Services Boards or Behavioral Health geographical areas shall have established a Marcus alert system that uses community care or mobile crisis teams. DBHDS, with assistance from DCJS, will report annually regarding the comprehensive crisis system and its effectiveness in meeting the goals established in §37.2-311.1.

Virginia's comprehensive crisis system is now comprised of these two primary components; Step-VA and the Marcus Alert System. The aim is for the programs to function in tandem to provide mental/behavioral health access within the community and diversion from the criminal justice system. Ongoing support for and investment in the comprehensive crisis system is crucial to the maintenance of services provided (a link to the comprehensive crisis system summary may be found in the appendices).

The Behavioral Health Commission, established in 2021, after initial monitoring of the STEP-VA program, approved recommendations by its staff in October, 2023 aimed toward enhancing the implementation of the program (a link to the review may be found in the appendices). Key Findings

of the STEP-VA program monitoring were: the legislature did not clearly articulate the specific goals of STEP-VA or the scope of its services; STEP-VA has not fully realized its goal of providing access to behavioral health services across all CSB's; Governor Youngkin's Right Help Right Now initiative builds on strategies that are established in STEP-VA.

Virginia's Department of Behavioral Health and Developmental Services (DBHDS) currently funds 13 jail diversion programs across the Commonwealth. These programs are diverse in their approaches to jail diversion, but all thirteen programs target individuals with serious mental illness and/or co-occurring serious mental illness and substance use disorders. In addition, there are currently 9 Forensic Discharge Planning (FDP) programs in the Commonwealth in local and regional jails; these programs are providing FDP services in fourteen facilities by fifteen CSBs. FDP programs focus on the early identification of individuals with serious mental illness (SMI), and provide a range of case management services to individuals being released to the community; FDPs provide services during an individual's period of incarceration and for a minimum of 30 days post-release. Since program inception in FY19, 1,666 individuals have been served. Jails currently participating in FDP programs are: Arlington County Jail, Hampton Roads Regional Jail, Chesapeake City Jail, Norfolk City Jail, Virginia Peninsula Regional Jail, Eastern Shore Regional Jail, Accomack County Jail, Fairfax County Jail, Henrico County Jail (East and West), Southwest Virginia Regional Jail (all sites).

The Compensation Board, with input and assistance from DBHDS and other appropriate Executive agencies, the Virginia Sheriffs' Association and the Virginia Association of Regional Jails, along with staff of appropriate legislative committees, will continue to review the survey instrument on an annual basis and make improvements and updates as needed.

Data in this report continues to be utilized by executive and legislative agencies and committees for research, as well as to assist in the development of funding needs analysis for jail mental health treatment, jail diversion programs, expansion of Crisis Intervention Teams and post-confinement follow-up care.

Further details of data gleaned from the 2023 mental health survey and summarized in this report, including the survey instrument and organization of jail regions, are available in the appendices of this document.

APPENDICES

Appendix A: 2023 Virginia Local & Regional Jail Survey: Assessment and Treatment of Inmates with Mental Illness

Appendix B: Jail Regions

Appendix C: Number & Diagnoses of Inmate Mental Illness in Jails

Appendix D: Inmates Screened

Appendix E: Average Hours of Confinement before Receiving MH Assessment/Diagnosis

Appendix F: Inmates in Acute Distress

Appendix G: Inmates Screened Positive who were Not Assessed

Appendix H: Veterans and Homeless

Appendix I: Housing

Appendix J: Hours of Mental Health Treatment Services Provided

Appendix K: Type of Mental Health Treatment Services Provided

Appendix L: Mental Health Medication Dispensed

Appendix M: Most Serious Offense of Inmates with Mental Illness in Jails

Appendix N: Incidents of Inmate Aggression

Appendix O: Mental Health Treatment Expenditures

Appendix P: Allocation of PMED and BHCM Positions in FY23

Appendix Q: Areas of Benefit for Funding

Appendix R: Brief Jail MH Screen

Appendix S: Correctional MH Screen (for Men/Women)

Appendix T: CIT Programs & Assessment Sites

Appendix U: Amendments to Prior Years

Appendix V: Relevant Links

Appendix A: 2023 Mental Illness in Jails Survey

Virginia Local and Regional Jails Survey: Assessment and Treatment of Inmates with Mental Illness

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.

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 use disorder.

Clinical Diagnosis: A Diagnostic and Statistical Manual of Mental Disorders – Fifth Edition (DSMV) disorder/condition. In general, clinical diagnoses 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 use clinician for the purpose of providing psycho-education about various substance use topics and/or to provide group feedback and support with regard to substance use issues.

Individual Counseling: One on one session with a qualified mental health 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.

Licensed Mental Health Professional (LMHP): mental health provider who is able to provide diagnostic as well as other mental health services. These providers fall into two groups . LMHPs who are able to diagnose, treat and prescribe medication include: psychiatrists, licensed medical doctors, or nurse practitioners. LMHPs who may diagnose and provide treatment but are unable to prescribe medication include: clinical psychologists, clinical social workers (LCSW), or licensed professional counselors (LPC).

MH: Mental Health

Mental Health Screening: A brief process conducted at time of intake by staff in order to identify potential mental health conditions/disorders and a need for further assessment. A validated screening tool must be used by staff. A screening is generally brief and narrow in scope and does not provide a diagnosis. Screenings do not need to be completed by a mental health professional.

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

Approved screening instruments are the Brief Jail Mental Health Screen (BJMHS) and the Correctional Mental Health Screen (CMHS). Use of any other screening instrument must first be approved by DBHDS. 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 manage 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 treatments, therapies or supports. Many mental health services also address co-occurring substance-related disorders (see definition).

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

Most Serious Offense: Question 20 asks that you report an inmate's 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, Ordinance

Professional Mental Health Assessment: A mental health assessment is a comprehensive evaluation of a person's functioning and it includes history as well as current symptoms. It can assist in diagnosis, treatment planning, and need for further treatment. Assessments must be completed by a qualified mental health professional (QMHP).

A QMHP is not qualified to make a diagnosis.

Professional Diagnosis: A review of a client's clinical condition conducted by a licensed mental health professional (LMHP), such as a Clinical Psychologist, Clinical Social Worker, Psychiatrist or a Licensed Professional Counselor, or a licensed medical professional such as a Doctor or Nurse Practitioner, resulting in a diagnosis.

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.

Qualified Mental Health Professional (QMHP): This definition may be reviewed from the website of DBHDS. <https://dbhds.virginia.gov/assets/document-library/archive/library/quality%20risk%20management/qmhp.pdf>.

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 Correctional Mental Health Screen are examples of validated instruments.

Please provide the data for your jail by July 18, 2023.

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 for June 2023 was inmates. Of the jail's June 2023 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
- Federal
- Other (excluding HEM)

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 **only** public intoxication housed in the jail during the month of June, 2023 was .

5. Jail inmates with Substance Use Disorders: There were inmates known or suspected to have Substance Use Disorders but who have no clinically diagnosed or suspected, mental illness, in the jail during the month of June 2023.

6. Special Education Jail Inmates. There were inmates receiving special education during the month of June 2023.

7. As of July 1, 2017, jails are **required** to conduct mental health screenings using a validated screening instrument on **all inmates** upon admission, in addition to standard booking questions. Upon intake, jail mental health screenings are conducted by: **Check all that apply**

- Jail Officers
- Jail MH Staff
- Other MH professional

Note: “Jail MH Staff” are employees of the jail and therefore this category should not include any contracted personnel. Contracted MH staff should be considered “Other MH professional”.

8a. As of July, 2017 jails are required to screen with a validated instrument. What is the **validated** screening instrument used by your jail? **Check all that apply:**

- Brief Jail MH Screen
- Correctional Mental Health Screen (CMHS)
- Other validated jail MH screening instrument approved by DHBDS:

8b. Name of Instrument:

8c. Are there any other methods of screening for Mental Health issues implemented in your jail? If so, please describe.

9a. Report the number of inmates committed to the jail in June, 2023 who were not screened, if any.

9b. For the inmates reported in 9a please explain the barriers to screening these inmates.

10. Please indicate how many inmates were screened using either the Brief Jail Mental Health Survey (BJMHS) or the Correctional Mental Health Screen (CMHS). inmates were screened using the BJMHS; inmates were screened using the CMHS.

11. Of the inmates screened using the BJMHS or CMHS, inmates scored at or above the threshold and thus were recommended for a more thorough assessment.

12. Indicate whether or not inmates suspected of having a mental illness receive a comprehensive professional mental health assessment. (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.

13. Professional mental health assessments of jail inmates are conducted by: (please mark all that apply.)
- Jail MH/medical staff
 - Private, contract MDs or other MH professionals
 - CSB staff

14. For inmates whose initial mental health screen indicates that a comprehensive mental health assessment is needed, what is the **average** time period between a positive mental health screening and when the assessment is conducted by a QMHP? (**Note: This response should not take into account assessments conducted as a result of an acute mental health crisis.**)

- <24 hours
- 24 hours to 72 hours
- 72 hours to 7 days
- 7 to 14 days
- >14 days
- No answer given
- Additional Comments

15a. Are some mental health assessments prioritized over others?

- Yes
- No

15b. If so, what are the criteria used to prioritize the order in which inmates are assessed?

16a. Are the jails' screening and assessment procedures adjusted over weekends/holidays?

- Yes
- No

16b. If yes, please explain:

17a. Are all inmates who exhibit signs of an acute mental health crisis or suicide risk during their mental health screening assessed within 72 hours of that screening? **Effective July 1, 2021 jails are required to conduct mental health assessments on all inmates who are experiencing acute mental health distress and/or at risk for suicide within 72 hours of the positive screening (excluding weekends or legal holidays).**

- Yes
- No

17b. If no, please explain:

18a. Do all inmates who exhibit signs of an acute mental health crisis or suicide risk during mental health screening receive continual monitoring? **Effective July 1, 2021 jails are required to provide ongoing monitoring of all inmates experiencing acute mental health distress/suicide risk.**

- Yes
- No

18b. If no, please explain:

19a. Is the jail behavioral health service provider consulted for immediate interventions whenever an inmate exhibits signs of an acute mental health crisis or suicide risk during their mental health screening? **Effective July 1, 2021 jails are required to consult the behavioral health service provider for implementation of immediation interventions for any inmate who is experiencing acute mental health distress/suicide risk**

- Yes
- No

19b. If no, please explain:

20. Of the inmates whose June, 2023 mental health screen indicated the need for a comprehensive mental health assessment, did not receive the assessment.

Please check all reasons that apply.

- Inmates were released before services could be provided
- Insufficient mental health staff
- Other

Please Explain

Additional Comments

21a. If legislation, regulations, or standards required **all** inmates who receive a positive mental health screen to receive a comprehensive mental health assessment with 72 hours, please note the level of difficulty you feel your jail would have in complying with such a requirement.

- No difficulty
- Some difficulty
- Extreme difficulty

21b. Please provide an explanation/further information for all responses, and identify any barriers to providing the comprehensive assessment within 72 hours if compliance would involve some or extreme difficulty:

22. Following a comprehensive mental health assessment indicating a need for psychiatric services or other prescriber, what is the **average** time period between the assessment and when the inmate sees the licensed medical professional (Psychiatrist, MD, NP)?

- <24 hours
- 24 hours to 72 hours
- 72 hours to 7 days
- 7 to 14 days
- >14 days
- No answer given
- Additional Comments

23. Of the inmates who received a comprehensive mental health assessment in June, 2023 were referred for psychiatric services or other prescriber (Psychiatrist, MD, NP).

24. Of the inmates whose June, 2023 mental health assessment indicated that further services from a licensed medical professional (Psychiatrist, MD, NP) were needed, did not receive those services.

Please check all reasons that apply.

- Inmates were released before services could be provided
- Insufficient mental health staff
- Prescription drug/formulary barriers
- Other

Please Explain

Additional Comments

25. Please indicate the number of inmates with mental illness in each of the categories below. **Please count each inmate only once for this item, counting only the most serious or prominent diagnosis for that inmate. (Do not include federal or out-of-state contract inmates.)**

The LIDS June Payment Details Report can provide a pretrial jail roster to assist in separating pretrial from post conviction inmates. (May financials must be certified/approved before June may be generated).

Subset of Female Post Conviction and Male Post Conviction: There are two new columns. The data requested in these columns is, of the number of Females/Males Post Conviction reported in this question, how many of them are sentenced to a state responsible sentence length of two years or less.

The number of State Responsible inmates may be retrieved from the SR Felon A and SR Felon B categories of your LIDS June Payment Details Report. From these lists identify any of your mentally ill inmates and retrieve that inmate’s record in LIDS to determine if their sentence length is less than or equal to two years.

For the subset of data regarding SR inmates sentenced to two years or less, please maintain your information somewhere easily accessible, as you may be contacted by DOC staff for followup on the inmates that fall within this subpopulation.

Mental Illness Category	Females (Pretrial) in jail in June 2023	Females (PostConviction) in jail in June 2023	<u>Subset of Females PostCon:</u> (SR Sent =<2 years) in jail in June 2023	Males (Pretrial) in jail in June 2023	Males (PostConviction) in jail in June 2023	<u>Subset of Males: Post Con:</u> (SR Sent =<2 years) in jail in June 2023
Inmates with Schizophrenia, Schizoaffective Disorder or Delusional Disorder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with Bipolar Disorder or Major Depressive Disorder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with Dysthymic Disorder (mild depression)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with Anxiety Disorder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Post Traumatic Stress Disorder (PTSD)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with other mental illness diagnosis	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates believed by history, behavior or other indicators to be mentally ill, for whom no clinical diagnosis is available	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total number of inmates diagnosed with or suspected to have a mental illness in this jail during the month of June 2023	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

26. 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	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with Bipolar Disorder or Major Depressive Disorder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with Dysthymic Disorder (mild depression)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with Anxiety Disorder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Post Traumatic Stress Disorder (PTSD)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates with other mental illness diagnosis	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Inmates believed by history, behavior, or other indicators to be mentally ill, for whom no clinical diagnosis is available	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total number of inmates diagnosed with or suspected to have a mental illness in this jail during the month of June 2023	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

27. During the month of June 2023, there were a total of inmates clinically diagnosed with co-occurring mental illness and substance use disorder in the jail.

28. During the month of June 2023 there were a total of inmates who were veterans, of which were mentally ill and of which were clinically diagnosed with co-occurring mental illness and substance use disorder.

29. During the month of June 2023 there were a total of inmates who were homeless, of which were mentally ill and of which were clinically diagnosed with co-occurring mental illness and substance use disorder.

30. 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 2023. A total of hours of psychiatrist time were provided during the month of June 2023.

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

31. 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 2023. A total of hours of general MD time were devoted to mental health treatment during the month of June 2023.

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

32. 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.

33. 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 2023.

Treatment Category	Number Treated	Hours of Treatment Provided
Individual counseling	<input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/>
Group mental health counseling	<input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/>
Group Substance Use treatment	<input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/>
Other types of individual or group mental health treatment	<input style="width: 40px;" type="text"/>	<input style="width: 40px;" type="text"/>

34. Please indicate the total number of **hours of mental/behavioral health treatment** provided by each of the below entities during the **month of June 2023**. 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 33.

Treatment Provider	Number of Treatment Hours
--------------------	---------------------------

Jail mental health treatment staff (jail employees)	<input type="text"/>
Community Services Board (CSB/BHA) staff (Please include CSB staff assigned full-time to the jail. Not employees of the jail)	<input type="text"/>
Private contractors, including jail medical contractor (e.g., PHS, CMS)	<input type="text"/>
Total number of hours of individual or group mental health counseling provided to inmates at your jail for the month of June 2023	<input type="text"/>

35. 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

36. 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

Question **37a** asks that you report on the number of medications dispensed, so **one inmate could be counted multiple times** if they are taking more than one psychotropic medication.

Question **37b** asks for the **unduplicated** count of inmates prescribed psychotropic medication, so **each inmate will be counted only once** regardless of the number of medications they are taking.

37a. List the numbers of inmates who received each type of psychotropic medication treatment at your jail during the month of June 2023:

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	<input type="text"/>	<input type="checkbox"/>
Zyprexa/olanzapine	<input type="text"/>	<input type="checkbox"/>
Risperdal/risperidone	<input type="text"/>	<input type="checkbox"/>
Seroquel/quetiapine	<input type="text"/>	<input type="checkbox"/>
Triliafon/perphenazine	<input type="text"/>	<input type="checkbox"/>
Prolixin/fluphenazine	<input type="text"/>	<input type="checkbox"/>
Thorazine/chlorpromazine	<input type="text"/>	<input type="checkbox"/>
Abilify/aripiprazole	<input type="text"/>	<input type="checkbox"/>
Geodon/ziprasidone	<input type="text"/>	<input type="checkbox"/>
Clozaril/clozapine	<input type="text"/>	<input type="checkbox"/>
Other antipsychotic medication(s)	<input type="text"/>	<input type="checkbox"/>
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	<input type="text"/>	<input type="checkbox"/>
Lithobid/lithium carbonate	<input type="text"/>	<input type="checkbox"/>
Tegretal/carbamazepine	<input type="text"/>	<input type="checkbox"/>
Topamax/topiramate	<input type="text"/>	<input type="checkbox"/>
Trileptal	<input type="text"/>	<input type="checkbox"/>
Other mood disorder medication(s)	<input type="text"/>	<input type="checkbox"/>
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.)	<input type="text"/>	<input type="checkbox"/>
IV. Antianxiety medications (Examples: Ativan/lorazepam, Xanax/alprazolam, Librium/chlordiazepoxide, Valium/diazepam, etc.)	<input type="text"/>	<input type="checkbox"/>

37b. A total of inmates, were being dispensed psychotropic medications during the month of June, 2023.
Each inmate should be counted only once.

38a. A total of jail inmates clinically diagnosed with mental illness refused prescribed psychotropic medication treatment during the month of June 2023.

38b. Please note the jail's procedure when an inmate refuses to take prescribed medication.

39. When an inmate refuses medication, how often does the jail seek judicial approval for involuntary treatment?

- Always
- Sometimes
- Only if the inmate is a danger to themselves or others

- Never

40. 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 2023 and spent a total of days in isolation/segregation.

41. 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

42. 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

43. A total of mental health beds would be needed at this jail during the month of June 2023, to house all inmates with mental illness in mental health beds or units. **(This number should include all beds identified in Question 42).**

44. 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

45. CSB prescreenings for psychiatric commitment (Temporary Detention Orders) for this jail are done via video:

- Always
- Sometimes
- Never

46. A total of inmates remained housed at this jail for more than 72 hours, following the issuance of a court order to a state hospital for psychiatric commitment (Temporary Detention Orders) during the month of June 2023.

Questions 47 through 49 should be answered using data from the entire Fiscal Year 2023

47. Total cost for all psychotropic medications administered at your jail during Fiscal Year 2023:

\$

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

48. Total cost for all mental health services (excluding medications, but including MDs and nursing) provided by the jail during Fiscal Year 2023: \$

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

49. Indicate the amount of **funding from each of the sources below** for the amounts listed in questions 47 and 48.

Commonwealth of Virginia (state) Funds: \$

Federal funds: \$

Local funds: \$

Other funds: \$

Total funds: \$ **(Should equal the sum of questions 47 & 48)**

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

50. 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

51a. Are all inmates with diagnosed mental illness provided with follow up case management or discharge planning services upon release from your jail?

- Yes
- No

51b. Type of Services Provided

52. 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.

53. 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 2023. Of these incidents inmate perpetrators had been clinically diagnosed as mentally ill, and victims of inmate aggression had been clinically diagnosed as mentally ill.

54. 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

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

56. Does the jail's electronic inmate management system include MH screening items?

- Yes
- No

57. Does the jail's electronic inmate management system include inmate psychiatric diagnoses?

- Yes
- No

58. 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 MH/medical staff
- CSB staff
- Private, contract MDs or other MH professionals
- Jail Officers

59. The total number of staff employed at this jail is .

60. 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.

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

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

63. If state funding were available to assist jails with their mentally ill population, in what area would it be most beneficial to your jail? (Ie; Staffing, Medications, Jail Expansion etc)

The 2022 Appropriation Act, Chapter 2, Item 72P allocated funds/positions to the Compensation Board for the funding of additional behavioral health case manager and medical and treatment positions in local and regional jails. Chapter 2 also requires that the Compensation Board collect followup data regarding the use of these new positions.

This legislation resulted in additional BHCM/RBHCM and PMED positions for all jails. Positions were allocated in August, 2022 and January, 2023.

Below questions are specifically related to the aforementioned positions. Please do not include data related to other positions you may have received as part of the Compensation Board's Position Reallocation policy.

Part I: Behavioral/Mental Health

The below questions seek to collect data **ONLY** on the **new BHCM/RBHCM** positions your jail has received.

Data regarded PMED positions is collected in Part II.

64. Has your jail hired for the new RBHCM/BHCM positions that you were allocated?

- Yes, all
- Some, but not all
- No

65. Please describe the basic job functions of each new BHCM position that has been filled.

- N/A
- Description Below

66. If your jail has not filled some or all of your allocated BHCM positions please check one or all of the reasons that apply:

- The funds are being used to cover the cost of a medical/behavioral health contract
- The funds are being used to pay the CSB for one or more full time staff members operating out of your jail.
- Lack of availability of qualified professionals seeking employment in a mental/behavioral health capacity
- Other, Please Explain

The purpose of the questions below is to determine whether the additional funds allocated by the Compensation Board are being used to increase the level of mental/behavioral health services, or are being absorbed by the local government.

67. If your jail has a contract with a mental/behavioral health provider, has the number of employees or hours of mental/behavioral health staff allocated to your jail been increased?

- Yes
- Please explain:

- No
 - If not, has your local government reduced the local funding amount as a result of the additional state funds?
 - Yes
 - No
- N/A

68. If your jail has a contract with your local Community Services Board (CSB) to provide services, has the number of employees or hours of mental/behavioral health staff allocated to your jail been increased?

- Yes
- Please explain:

- No
 - If not, has your local government reduced the local funding amount as a result of the additional state funds?
 - Yes
 - No
- N/A

69. Are there any mental/behavioral health staff operating in your jail in a grant-funded position?

- Yes
- No
- Partially

69a. If so, how many?

69b. If so, what is the source of the grant?

70. If your jail is experiencing difficulties hiring for the new BHCM positions please choose all reasons that apply.

- Insufficient budgeted salary
- Lack of availability of qualified professionals seeking employment in a mental/behavioral health capacity
- Logistical difficulties of space within the jail to house additional staff
- The jail has been experiencing difficulties hiring across all job types
- Other, Please Explain

71. Are there any *new* services your jail now provides as a result of the new BHCM positions that you were not able to provide before? (Examples: Ability to provide discharge planning or have an LMHP on site where you were not before.)

- Yes

Please explain:

No

Please explain:

72. Please note any additional barriers to hiring or implementation of additional mental/behavioral health case management practices or procedures. Please also provide any other feedback that may be unique to your jail/locality/region, or that you feel is relevant.

73. Are there any services your jail was providing that they were able to *improve* as a result of the new mental/behavioral health positions? (Examples: Ability to assess and/or diagnose faster. The jail has been providing discharge planning, but now the process has improved because...)

Yes

Please explain:

No

Please explain:

Part II: Medical

The below questions seek to collect data **ONLY** on any **new PMED** positions your jail has received.

74. Has your jail hired for any additional PMED positions that you were allocated?

- Yes, all
- Some, but not all
- No

75. If your jail has not filled some or all of your newly allocated PMED positions please check one or all of the reasons that apply:

- The funds are being used to cover the cost of a medical contract
- Lack of availability of qualified professionals seeking employment in a medical capacity
- Insufficient budgeted salary
- Other, Please Explain

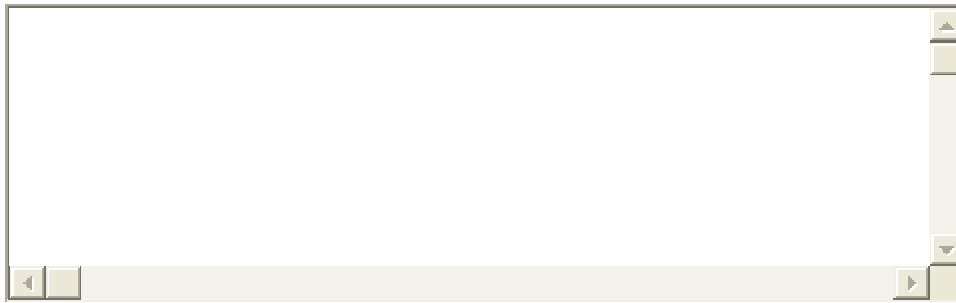
The purpose of the below question is to determine whether the additional funds allocated by the Compensation Board are being used to increase the level of medical services, or are being absorbed by the local government.

76. If your jail has a contract with a medical provider, has the number of employees or hours of medical staff allocated to your jail been increased?

- Yes
- Please explain:

- No
 - If not, has your local government reduced the local funding amount as a result of the additional state funds?
 - Yes
 - No
- N/A

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



If you have any questions about this survey, please phone Kari Jackson at 804-371-4299 (SCB) or email kari.jackson@scb.virginia.gov. If you should experience any difficulties with the survey spreadsheet please contact Mark Pellett at mark.pellett@scb.virginia.gov

Thank you for your participation in this important

Appendix B: Jail Regions

Central Region

Albemarle-Charlottesville Regional Jail
Alexandria Detention Center
Arlington County Detention Facility
Central Virginia Regional Jail
Charlotte County Jail
Chesterfield County Jail
Culpeper County Jail
Fairfax Adult Detention Center
Fauquier County Jail
Henrico County Jail
Loudoun County Adult Detention Center
Meherrin River Regional Jail
Northwestern Regional Jail
Northern Neck Regional Jail
Page County Jail
Pamunkey Regional Jail

Prince William-Manassas Detention Center
Rappahannock-Shenandoah-Warren Regional Jail
Rappahannock Regional Jail
Richmond City Jail
Rockingham-Harrisonburg Regional

Western Region

Alleghany County Regional Jail
Blue Ridge Regional Jail Authority
Botetourt-Craig Jail
Danville City Jail
Danville City Jail Farm
Franklin County Jail
Henry County Jail
Martinsville City Jail
Middle River Regional Jail
Montgomery County Jail
New River Valley Regional Jail
Patrick County Jail
Pittsylvania County Jail
Roanoke City Jail
Roanoke County Jail

Rockbridge Regional Jail
Southwest VA Regional Jail
Western VA Regional Jail

Eastern Region

Accomack County Jail
Eastern Shore Regional Jail
Gloucester County Jail
Hampton Roads Regional Jail
Lancaster County Jail
Middle Peninsula Regional Jail
Riverside Regional Jail
Southampton County Jail
Southside Regional Jail
Sussex County Jail
Virginia Peninsula Regional Jail
Chesapeake City Jail
Hampton City Jail
Newport News City Jail

Norfolk City Jail
Portsmouth City Jail
Western Tidewater Regional Jail
Virginia Beach City Jail

Appendix C: Number & Diagnoses of Inmate Mental Illness in Jails

Jail Num	Jail Name	Schizophrenia & Delusional	Bipolar or Major Depressive	Mild Dep	Anxiety Disorder	PTS D	Other MI	MI with no Diag	Total MI Pop	SMI
001	Accomack County Jail	5	9	12	17	3	22	0	68	17
003	Albemarle-Charlottesville Regional Jail	30	59	39	58	8	51	10	255	97
005	Alleghany County Regional Jail	2	7	5	8	1	1	4	28	10
013	Arlington County Detention Facility	75	93	11	12	21	11	52	275	189
023	Botetourt County Jail	4	32	20	14	12	1	0	83	48
041	Chesterfield County Jail	6	147	0	8	7	0	0	168	160
047	Culpeper County Adc	4	19	17	28	0	9	3	80	23
059	Fairfax Adult Detention Center	102	87	18	35	45	82	270	639	234
061	Fauquier County Jail	5	11	6	2	2	5	7	38	18
069	Northwestern Regional Jail	30	48	47	11	10	28	0	174	88
073	Gloucester County Jail	0	4	12	4	4	0	0	24	8
087	Henrico County Jail	79	76	13	26	46	42	4	286	201
089	Henry County Jail	5	20	0	15	10	20	0	70	35
103	Lancaster Correctional Center	1	1	3	3	0	0	0	8	2
107	Loudoun County Adult Detention	9	27	4	16	3	11	0	70	39
119	Middle Peninsula Regional	10	51	0	26	37	3	0	127	98
131	Eastern Shore Regional Jail	3	1	0	2	0	1	0	7	4
135	Piedmont Regional Jail	3	1	0	0	3	11	0	18	7
137	Central Virginia Regional Jail	18	65	14	24	27	17	0	165	110
139	Page County Jail	4	7	18	26	13	0	4	72	24
143	Pittsylvania County Jail	7	13	17	6	2	0	1	46	22
153	Pr. William/Manassas Regional	28	74	6	4	29	1	14	156	131
161	Roanoke County/Salem Jail	1	41	0	25	2	0	0	69	44
163	Rockbridge Regional Jail	4	10	0	28	5	0	0	47	19
165	Rockingham-Harrisonburg Regional Jail	11	33	7	13	13	21	7	105	57
175	Southampton County Jail	2	4	3	6	5	4	0	24	11
193	Northern Neck Regional Jail	6	18	24	2	10	1	11	72	34

Jail Num	Jail Name	Schizophrenia & Delusional	Bipolar or Major Depressive	Mild Dep	Anxiety Disorder	PTS D	Other MI	MI with no Diag	Total MI Pop	SMI
220	Danville Jail Farm	1	2	2	0	3	2	1	11	6
460	Pamunkey Regional Jail	4	13	0	3	1	9	0	30	18
470	Virginia Peninsula Regional	45	120	0	19	34	36	269	523	199
475	Hampton Roads Regional Jail	56	77	13	25	26	34	17	248	159
480	New River Regional Jail	14	50	18	31	9	7	0	129	73
485	Blue Ridge Regional Jail	50	72	82	113	100	46	70	533	222
491	Southside Regional Jail	3	12	7	7	0	0	0	29	15
492	Southwest Virginia Regional Jail	34	220	76	128	126	3	0	587	380
493	Middle River Regional Jail	49	97	1	61	63	32	1	304	209
494	Western Virginia Regional Jail	8	29	0	21	12	111	33	214	49
495	Meherrin River Regional Jail	14	44	26	1	1	0	0	86	59
496	RSW Regional Jail	8	13	17	4	4	14	5	65	25
510	Alexandria Detention Center	20	24	1	12	23	5	1	86	67
620	Western Tidewater Regional	8	18	4	12	13	8	8	71	39
630	Rappahannock Regional Jail	13	19	0	11	3	41	2	89	35
650	Hampton Correctional Facility	8	6	0	6	7	5	11	43	21
690	Martinsville City Jail	3	8	2	10	5	2	0	30	16
700	Newport News City Jail	22	55	0	9	15	3	0	104	92
710	Norfolk City Jail	54	50	167	27	4	33	0	335	108
740	Portsmouth City Jail	3	9	0	5	0	4	4	25	12
760	Richmond City Jail	25	37	3	15	11	0	10	101	73
770	Roanoke City Jail	4	53	0	22	0	8	0	87	57
810	Virginia Beach Correction Ctr	57	59	1	40	9	112	27	305	125
	Totals	957	2041	716	1001	787	857	846	7209	3789

Appendix D: Inmates Screened

Jail Num	Jail Name	Inmates screened with BJMHS	Inmates screened with CMHS	Recommended for thorough assessment	Inmates not screened	Reasons Inmates were not Screened
001	Accomack County Jail	77	43	0	0	n/a
003	Albemarle-Charlottesville Regional Jail	184	0	74	0	n/a
005	Alleghany County Jail	73	73	8	0	0
013	Arlington County Detention Facility	218	n/a	92	207	Client's were booked and released, court and returns, change in confinement, or otherwise uncooperative with the assessments.
023	Botetourt County Jail	92	0	22	0	0
041	Chesterfield County Jail	511	146	61	42	1) Bonded 2) Released to Pretrial Services 3) Transferred
047	Culpeper County Adc	84	0	12	0	0
059	Fairfax Adult Detention Center	1182	0	135	146	Individual right to refuse screening. Individual too intoxicated to answer. They could also be in a mental health crisis and can not respond. Individuals can bond out prior to the completion of screening.
061	Fauquier County Jail	118	118	0	0	0
069	Northwestern Regional Jail	247	0	59	0	N/A
073	Gloucester County Jail	113	0	1	0	0
087	Henrico County Jail	614	0	157	0	0
089	Henry County Jail	136	136	76	0	0
103	Lancaster Correctional Center	24	0	0	0	0
107	Loudoun County Adult Detention	297	0	15	0	N/A
119	Middle Peninsula Regional	132	0	0	0	0
131	Eastern Shore Regional Jail	40	0	3	0	N/A
135	Piedmont Regional Jail	241	0	98	0	0
137	Central Virginia Regional Jail	195	0	16	0	0

Jail Num	Jail Name	Inmates screened with BJMHS	Inmates screened with CMHS	Recommended for thorough assessment	Inmates not screened	Reasons Inmates were not Screened
139	Page County Jail	115	116	0	0	0
143	Pittsylvania County Jail	69	0	7	0	n/a
153	Pr. William/Manassas Regional	762	772	64	14	The inmates were either uncooperative, too intoxicated/under the influence of substances; detoxing and refused to complete the BJMHS or CMHS.
161	Roanoke County/Salem Jail	261	113	5	0	0
163	Rockbridge Regional Jail	108	108	all	0	0
165	Rockingham-Harrisonburg Regional Jail	178	0	72	88	0
175	Southampton County Jail	36	0	0	0	0
193	Northern Neck Regional Jail	0	119	35	0	0
220	Danville Jail Farm	29	0	0	0	N/A
460	Pamunkey Regional Jail	255	0	29	0	N/A
470	Virginia Peninsula Regional	135	0	78	0	0
475	Hampton Roads Regional Jail	32	0	32	0	0
480	New River Regional Jail	0	449	53	1	Inmate was acutely psychotic and TDO was issued
485	Blue Ridge Regional Jail	All	0	238	0	0
491	Southside Regional Jail	69	0	9	0	0
492	Southwest Virginia Regional Jail	403	0	128	0	0
493	Middle River Regional Jail	301	0	122	0	0
494	Western Virginia Regional Jail	305	293	165	0	0
495	Meherrin River Regional Jail	108	0	61	0	N/A
496	RSW Regional Jail	293	0	1	0	N/A
510	Alexandria Detention Center	261	0	16	0	N/A
620	Western Tidewater Regional	158	0	85	None	N/A
630	Rappahannock Regional Jail	886	0	110	0	0
650	Hampton Correctional Facility	145	145	6	0	0
690	Martinsville City Jail	94	0	12	0	0
700	Newport News City Jail	325	0	76	52	Bonded out prior to screening and/or refusal of initial screening due to erratic behavior.

Jail Num	Jail Name	Inmates screened with BJMHS	Inmates screened with CMHS	Recommended for thorough assessment	Inmates not screened	Reasons Inmates were not Screened
710	Norfolk City Jail	679	0	244	0	N/A
740	Portsmouth City Jail	0	129	30	0	N/A
760	Richmond City Jail	460	103	76	30	There were no barriers to screening. The inmates were released before screening took place.
770	Roanoke City Jail	396	0	74	0	N/A
810	Virginia Beach Correction Ctr	0	0	0	0	0

Appendix E: Average Hours of Confinement Before Receiving Comprehensive MH Assessment/Diagnosis

Jail Num	Jail Name	Average Confinement Time Until Comprehensive MH Assessment	Average Time from Comp MH Assessment to LMHP Diag
001	Accomack County Jail	<24 hours	24 hours to 72 hours
003	Albemarle-Charlottesville Regional Jail	72 hours to 7 days	<24 hours
005	Alleghany County Jail	72 hours to 7 days	72 hours to 7 days
013	Arlington County Detention Facility	<24 hours	72 hours to 7 days
023	Botetourt County Jail	72 hours to 7 days	72 hours to 7 days
041	Chesterfield County Jail	24 hours to 72 hours	24 hours to 72 hours
047	Culpeper County Adc	24 hours to 72 hours	24 hours to 72 hours
059	Fairfax Adult Detention Center	72 hours to 7 days	7 to 14 days
061	Fauquier County Jail	72 hours to 7 days	24 hours to 72 hours
069	Northwestern Regional Jail	72 hours to 7 days	7 to 14 days
073	Gloucester County Jail	<24 hours	24 hours to 72 hours
087	Henrico County Jail	>14 days	>14 days
089	Henry County Jail	24 hours to 72 hours	24 hours to 72 hours
103	Lancaster Correctional Center	<24 hours	24 hours to 72 hours
107	Loudoun County Adult Detention	24 hours to 72 hours	>14 days
119	Middle Peninsula Regional	24 hours to 72 hours	7 to 14 days
131	Eastern Shore Regional Jail	7 to 14 days	7 to 14 days
135	Piedmont Regional Jail	24 hours to 72 hours	7 to 14 days
137	Central Virginia Regional Jail	>14 days	>14 days
139	Page County Jail	24 hours to 72 hours	24 hours to 72 hours
143	Pittsylvania County Jail	<24 hours	<24 hours
153	Pr. William/Manassas Regional	7 to 14 days	7 to 14 days
161	Roanoke County/Salem Jail	<24 hours	<24 hours
163	Rockbridge Regional Jail	7 to 14 days	7 to 14 days
165	Rockingham-Harrisonburg Regional Jail	7 to 14 days	>14 days
175	Southampton County Jail	7 to 14 days	72 hours to 7 days
193	Northern Neck Regional Jail	24 hours to 72 hours	>14 days
220	Danville Jail Farm	24 hours to 72 hours	24 hours to 72 hours
460	Pamunkey Regional Jail	24 hours to 72 hours	7 to 14 days
470	Virginia Peninsula Regional	7 to 14 days	7 to 14 days
475	Hampton Roads Regional Jail	<24 hours	7 to 14 days
480	New River Regional Jail	24 hours to 72 hours	>14 days
485	Blue Ridge Regional Jail	7 to 14 days	7 to 14 days
491	Southside Regional Jail	24 hours to 72 hours	7 to 14 days
492	Southwest Virginia Regional Jail	7 to 14 days	>14 days
493	Middle River Regional Jail	72 hours to 7 days	7 to 14 days
494	Western Virginia Regional Jail	24 hours to 72 hours	72 hours to 7 days

Jail Num	Jail Name	Average Confinement Time Until Comprehensive MH Assessment	Average Time from Comp MH Assessment to LMHP Diag
495	Meherrin River Regional Jail	24 hours to 72 hours	7 to 14 days
496	RSW Regional Jail	24 hours to 72 hours	72 hours to 7 days
510	Alexandria Detention Center	24 hours to 72 hours	72 hours to 7 days
620	Western Tidewater Regional	0	24 hours to 72 hours
630	Rappahannock Regional Jail	>14 days	>14 days
650	Hampton Correctional Facility	24 hours to 72 hours	72 hours to 7 days
690	Martinsville City Jail	7 to 14 days	>14 days
700	Newport News City Jail	24 hours to 72 hours	>14 days
710	Norfolk City Jail	72 hours to 7 days	>14 days
740	Portsmouth City Jail	24 hours to 72 hours	72 hours to 7 days
760	Richmond City Jail	24 hours to 72 hours	7 to 14 days
770	Roanoke City Jail	<24 hours	72 hours to 7 days
810	Virginia Beach Correction Ctr	7 to 14 days	7 to 14 days

Appendix F: Inmates in Acute Crisis

Jail Num	Jail Name	Inmate in Acute MH crisis during MH screening assessed within 72 hours? Y/N	Do Inmates in Acute Crisis receive Continual Monitoring? Y/N	Behavioral Health provider consulted for intervention when inmate in Acute Distress? Y/N
001	Accomack County Jail	Yes	Yes	Yes
003	Albemarle-Charlottesville Regional Jail	Yes	Yes	Yes
005	Alleghany County Jail	Yes	Yes	Yes
013	Arlington County Detention Facility	Yes	Yes	Yes
023	Botetourt County Jail	Yes	Yes	Yes
041	Chesterfield County Jail	Yes	Yes	Yes
047	Culpeper County Adc	Yes	Yes	Yes
059	Fairfax Adult Detention Center	Yes	Yes	Yes
061	Fauquier County Jail	Yes	Yes	Yes
069	Northwestern Regional Jail	Yes	Yes	Yes
073	Gloucester County Jail	Yes	Yes	Yes
087	Henrico County Jail	Yes	Yes	Yes
089	Henry County Jail	Yes	Yes	Yes
103	Lancaster Correctional Center	Yes	Yes	Yes
107	Loudoun County Adult Detention	Yes	Yes	Yes
119	Middle Peninsula Regional	Yes	Yes	Yes
131	Eastern Shore Regional Jail	Yes	Yes	Yes
135	Piedmont Regional Jail	Yes	Yes	Yes
137	Central Virginia Regional Jail	Yes	Yes	Yes
139	Page County Jail	Yes	Yes	Yes
143	Pittsylvania County Jail	Yes	Yes	Yes
153	Pr. William/Manassas Regional	Yes	Yes	Yes
161	Roanoke County/Salem Jail	Yes	Yes	Yes
163	Rockbridge Regional Jail	Yes	Yes	Yes
165	Rockingham-Harrisonburg Reg Jail	Yes	Yes	Yes
175	Southampton County Jail	Yes	Yes	Yes
193	Northern Neck Regional Jail	Yes	Yes	Yes
220	Danville Jail Farm	Yes	Yes	Yes
460	Pamunkey Regional Jail	Yes	Yes	Yes
470	Virginia Peninsula Regional	Yes	Yes	Yes
475	Hampton Roads Regional Jail	Yes	Yes	Yes
480	New River Regional Jail	Yes	Yes	Yes
485	Blue Ridge Regional Jail	Yes	Yes	Yes
491	Southside Regional Jail	Yes	Yes	Yes
492	Southwest Virginia Regional Jail	Yes	Yes	Yes
493	Middle River Regional Jail	Yes	Yes	Yes
494	Western Virginia Regional Jail	Yes	Yes	Yes

Jail Num	Jail Name	Inmate in Acute MH crisis during MH screening assessed within 72 hours? Y/N	Do inmates in acute crisis receive continual monitoring? Y/N	Behavioral health provider consulted for intervention when inmate in acute distress? Y/N
495	Meherrin River Regional Jail	Yes	Yes	Yes
496	RSW Regional Jail	Yes	Yes	Yes
510	Alexandria Detention Center	Yes	Yes	Yes
620	Western Tidewater Regional	Yes	Yes	Yes
630	Rappahannock Regional Jail	Yes	Yes	Yes
650	Hampton Correctional Facility	Yes	Yes	Yes
690	Martinsville City Jail	Yes	Yes	Yes
700	Newport News City Jail	Yes	Yes	Yes
710	Norfolk City Jail	Yes	Yes	Yes
740	Portsmouth City Jail	Yes	Yes	Yes
760	Richmond City Jail	Yes	Yes	Yes
770	Roanoke City Jail	Yes	Yes	Yes
810	Virginia Beach Correction Ctr	Yes	Yes	No

Appendix G: Inmates Screened Positive who were Not Assessed

Jail Num	Jail Name	Inmates who Screened Pos & Referred for Assessment	Inmates Referred for Assessment who were not Assessed	Inmates not Assessed Due to Release Before Services Could be Provided Y/N	Inmates not Assessed due to Insufficient Staff Y/N	Level of Difficulty if All Inmates screened Pos are required to be Assessed within 72 hours (None, Some, Extreme)
001	Accomack County Jail	43	13	Yes	No	None
003	Albemarle-Charlottesville Regional Jail	74	24	Yes	No	Some
005	Alleghany County Jail	8	0	0	0	Extreme
013	Arlington County Detention Facility	92	3	Yes	No	None
023	Botetourt County Jail	22	5	Yes	No	Some
041	Chesterfield County Jail	61	38	Yes	Yes	Extreme
047	Culpeper County Adc	12	0	Yes	Yes	None
059	Fairfax Adult Detention Center	499	107	Yes	No	Some
061	Fauquier County Jail	9	3	Yes	Yes	None
069	Northwestern Regional Jail	59	0	No	No	None
073	Gloucester County Jail	1	0	0	0	None
087	Henrico County Jail	157	45	Yes	Yes	Extreme
089	Henry County Jail	44	0	No	No	Some
103	Lancaster Correctional Center	0	0	No	No	None
107	Loudoun County Adult Detention	19	1	Yes	No	None
119	Middle Peninsula Regional	132	0	0	0	None
131	Eastern Shore Regional Jail	3	0	No	No	Some
135	Piedmont Regional Jail	19	0	0	0	Extreme
137	Central Virginia Regional Jail	15	1	Yes	No	Extreme
139	Page County Jail	5	0	No	No	Extreme
143	Pittsylvania County Jail	7	0	No	No	Extreme
153	Pr. William/Manassas Regional	64	22	Yes	Yes	Extreme
161	Roanoke County/Salem Jail	113	148	Yes	0	None
163	ROCKBRIDGE REGIONAL JAIL	108	0	Yes	No	0
165	Rockingham-Harrisonburg Regional Jail	72	37	Yes	Yes	Extreme

Jail Num	Jail Name	Inmates who Screened Pos & Referred for Assessment	Inmates Referred for Assessment who were not Assessed	Inmates not Assessed Due to Release Before Services Could be Provided Y/N	Inmates not Assessed due to Insufficient Staff Y/N	Level of Difficulty if All Inmates screened Pos are required to be Assessed within 72 hours (None, Some, Extreme)
175	Southampton County Jail	0	0	No	No	Extreme
193	Northern Neck Regional Jail	112	306	Yes	0	Extreme
220	Danville Jail Farm	20	0	No	No	Extreme
460	Pamunkey Regional Jail	45	7	Yes	No	None
470	Virginia Peninsula Regional	62	11	Yes	No	Some
475	Hampton Roads Regional Jail	32	0	No	No	None
480	New River Regional Jail	153	8	Yes	No	Extreme
485	Blue Ridge Regional Jail	278	65	Yes	No	Some
491	Southside Regional Jail	35	4	Yes	No	NOne
492	Southwest Virginia Regional Jail	437	116	Yes	No	Extreme
493	Middle River Regional Jail	122	65	Yes	No	Extreme
494	Western Virginia Regional Jail	165	85	Yes	Yes	Extreme
495	Meherrin River Regional Jail	61	0	0	0	Some
496	RSW Regional Jail	13	0	No	No	Some
510	Alexandria Detention Center	16	0	No	No	None
620	Western Tidewater Regional	45	5	Yes	No	None
630	Rappahannock Regional Jail	110	0	0	0	None
650	Hampton Correctional Facility	6	0	No	No	Some
690	Martinsville City Jail	18	4	Yes	No	Extreme
700	Newport News City Jail	49	12	Yes	No	Some
710	Norfolk City Jail	244	84	Yes	Yes	Extreme
740	Portsmouth City Jail	129	0	0	0	0
760	Richmond City Jail	76	6	Yes	No	Some
770	Roanoke City Jail	61	22	Yes	No	None
810	Virginia Beach Correction Ctr	115	36	Yes	No	Extreme

Appendix H: Veterans and Homeless

Jail Num	Jail Name	Vets	Vets w/MI	Vets w/MI & SA	Homeless	Homeless w/MI	Homeless w/MI & SA
001	Accomack County Jail	1	0	1	3	0	1
003	Albemarle-Charlottesville Regional Jail	5	1	1	14	7	7
005	Alleghany Regional Jail	0	0	0	0	0	0
013	Arlington County Detention Facility	7	5	1	108	54	50
023	Botetourt County Jail	7	1	1	3	1	0
041	Chesterfield County Jail	17	8	0	36	13	2
047	Culpeper County Adc	6	1	4	5	5	0
059	Fairfax Adult Detention Center	28	11	7	254	57	34
061	Fauquier County Jail	1	0	0	0	0	0
069	Northwestern Regional Jail	26	12	9	36	17	7
073	Gloucester County Jail	4	2	2	5	1	1
087	Henrico County Jail	38	5	5	76	3	16
089	Henry County Jail	7	4	4	0	0	0
103	Lancaster Correctional Center	0	0	0	0	0	0
107	Loudoun County Adult Detention	12	0	1	6	0	2
119	Middle Peninsula Regional	15	8	8	3	2	2
131	Eastern Shore Regional Jail	0	0	0	1	0	0
135	Piedmont Regional Jail	0	0	0	1	1	1
137	Central Virginia Regional Jail	11	6	5	2	0	1
139	Page County Jail	0	0	0	0	0	0
143	Pittsylvania County Jail	0	0	0	0	0	0
153	Pr. William/Manassas Regional	12	4	2	168	26	14
161	Roanoke County/Salem Jail	11	1	0	14	6	4
163	Rockbridge Regional Jail	0	0	0	2	0	0
165	Rockingham-Harrisonburg Reg Jail	4	2	2	15	13	11
175	Southampton County Jail	1	0	0	1	0	0
193	Northern Neck Regional Jail	10	5	4	4	4	2
220	Danville Farm	1	1	0	1	0	0
460	Pamunkey Regional Jail	0	0	0	6	4	4
470	Virginia Peninsula Regional	40	21	38	36	33	32
475	Hampton Roads Regional Jail	23	10	12	20	7	13

Jail Num	Jail Name	Vets	Vets w/MI	Vets w/MI & SA	Homeless	Homeless w/MI	Homeless w/MI & SA
480	New River Regional Jail	41	4	3	43	9	8
485	Blue Ridge Regional Jail	4	4	4	15	15	15
491	Southside Regional Jail	0	0	0	3	3	3
492	Southwest Virginia Regional Jail	15	8	2	18	11	2
493	Middle River Regional Jail	2	1	1	27	20	14
494	Western Virginia Regional Jail	16	11	9	7	4	4
495	Meherrin River Regional Jail	11	2	2	4	2	2
496	Virginia Beach Correction Ctr	18	1	1	35	5	5
510	Alexandria Detention Center	2	0	2	44	10	25
620	Western Tidewater Regional	11	5	4	20	5	15
630	Rappahannock Regional Jail	2	2	2	7	6	1
650	Hampton Correctional Facility	7	7	4	3	3	3
690	Martinsville City Jail	0	0	0	2	2	0
700	Newport News City Jail	38	7	4	16	5	2
710	Norfolk City Jail	12	1	1	9	2	2
740	Portsmouth City Jail	1	1	1	9	3	3
760	Richmond City Jail	11	2	2	41	31	25
770	Roanoke City Jail	26	6	4	28	4	1
810	Virginia Beach Correction Ctr	108	7	5	193	36	15
	Total	612	177	158	1344	430	349

Appendix I: Housing

Jail Num	Jail Name	MH Unit Y/N	Male MH Beds in Unit	Female MH Beds in Unit	MH Beds Needed
001	Accomack County Jail	No	0	0	n/a
003	Albemarle-Charlottesville Regional Jail	No	0	0	45
005	Alleghany County Regional Jail	No	0	0	31
013	Arlington County Detention Facility	Yes	21	8	191
023	Botetourt County Jail	No	0	0	0
041	Chesterfield County Jail	No	0	0	0
047	Culpeper County Adc	No	0	0	5
059	Fairfax Adult Detention Center	Yes	58	8	66
061	Fauquier County Jail	No	0	0	0
069	Northwestern Regional Jail	Yes	14	14	28
073	Gloucester County Jail	Yes	2	2	1
087	Henrico County Jail	Yes	46	6	64
089	Henry County Jail	No	0	0	0
103	Lancaster Correctional Center	No	0	0	1
107	Loudoun County Adult Detention	No	0	0	62
119	Middle Peninsula Regional	Yes	11	2	84
131	Eastern Shore Regional Jail	No	0	0	0
135	Piedmont Regional Jail	Yes	0	0	14
137	Central Virginia Regional Jail	No	0	0	172
139	Page County Jail	No	0	0	0
143	Pittsylvania County Jail	No	0	0	3
153	Pr. William/Manassas Regional	Yes	12	4	40
161	Roanoke County/Salem Jail	No	0	0	0
163	Rockbridge Regional Jail	No	0	0	0
165	Rockingham-Harrisonburg Regional Jail	Yes	20	0	20
175	Southampton County Jail	No	0	0	0
193	Northern Neck Regional Jail	Yes	0	0	NA
220	Danville City Jail Farm	No	na	na	15
460	Pamunkey Regional Jail	No	0	0	0
470	Virginia Peninsula Regional	No	0	0	25
475	Hampton Roads Regional Jail	Yes	77	20	150
480	New River Regional Jail	No	0	0	20
485	Blue Ridge Regional Jail	No	0	0	0
491	Southside Regional Jail	No	0	0	35
492	Southwest Virginia Regional Jail	No	0	0	566
493	Middle River Regional Jail	No	0	0	15
494	Western Virginia Regional Jail	No	0	0	0
495	Meherrin River Regional Jail	No	0	0	40
496	Rsw Regional Jail	No	0	0	66
510	Alexandria Detention Center	Yes	18	6	44

Jail Num	Jail Name	MH Unit Y/N	Male MH Beds in Unit	Female MH Beds in Unit	MH Beds Needed
620	Western Tidewater Regional	No	0	0	0
630	Rappahannock Regional Jail	No	0	0	N/A
650	Hampton Correctional Facility	No	0	0	0
690	Martinsville City Jail	Yes	14	14	28
700	Newport News City Jail	Yes	65	6	244
710	Norfolk City Jail	Yes	19	3	22
740	Portsmouth City Jail	Yes	36	12	51
760	Richmond City Jail	Yes	38	6	44
770	Roanoke City Jail	Yes	69	33	102
810	Virginia Beach Correction Ctr	0	0	0	0
	Totals		520	144	2294

Appendix J: Hours of Mental Health Treatment Services Provided

Jail Num	Jail Name	Hours of Psyc Time	Hrs of MD devoted to MH	Hrs of Trtmt Prov by Jail MH Staff	Hrs of Trtmt Prov by CSB	Hrs of Trtmt Prov by Priv Cont	Total Hours
001	Accomack County Jail	8	8	0	0	24	40
003	Albemarle-Charlottesville Regional Jail	1	0	124	60	0	185
005	Alleghany County Jail	20	6	0	0	20	46
013	Arlington County Detention Facility	323	0	0	597	0	920
023	Botetourt County Jail	36	0	0	0	0	36
041	Chesterfield County Jail	48	6	60	0	0	114
047	Culpeper County Adc	0	6	0	6	0	12
059	Fairfax Adult Detention Center	266	4	0	765	0	1035
061	Fauquier County Jail	0	3	0	12	14	29
069	Northwestern Reg Jail	24	4	101	0	0	129
073	Gloucester County Jail	0	2	0	19	0	21
087	Henrico County Jail	9	0	0	179	0	188
089	Henry County Jail	0	0	0	0	160	160
103	Lancaster Correctional Center	0	5	0	20	0	25
107	Loudoun County Adult Detention	64	0	0	360	40	464
119	Middle Peninsula Regional	8	4	160	32	0	204
131	Eastern Shore Regional Jail	6	2	0	9	0	17
135	Piedmont Regional Jail	24	24	0	0	24	72
137	Central Virginia Regional Jail	32	2	0	46	0	80
139	Page County Jail	0	8	6	6	0	20
143	Pittsylvania County Jail	0	10	0	0	0	10
153	Pr. William/Manassas Regional	32	0	341	1092	0	1465
161	Roanoke County/Salem Jail	12	0	0	542	0	554
163	Rockbridge Reg Jail	32	32	0	0	32	96
165	Rockingham-Harrisonburg Reg Jail	25	0	0	47	4	76
175	Southampton County Jail	0	8	0	0	0	8
193	Northern Neck Regional Jail	12	8	140	2	8	170
220	Danville Jail Farm	0	2	0	0	0	2
460	Pamunkey Regional Jail	15	16	0	0	326	357
470	Virginia Peninsula Regional	50	25	0	0	178	253
475	Hampton Roads Regional Jail	144	0	0	0	18	162

Jail Num	Jail Name	Hours of Psyc Time	Hrs of MD devoted to MH	Hrs of Trtmt Prov by Jail MH Staff	Hrs of Trtmt Prov by CSB	Hrs of Trtmt Prov by Priv Cont	Total Hours
480	New River Regional Jail	12	0	0	46	0	58
485	Blue Ridge Regional Jail	43	0	0	38	106	187
491	Southside Regional Jail	16	0	0	0	26	42
492	Southwest Virginia Regional Jail	166	18	0	0	188	372
493	Middle River Regional Jail	51	0	80	0	0	131
494	Western Virginia Regional Jail	10	72	243	6	0	331
495	Meherrin River Regional Jail	20	0	0	0	160	180
496	RSW Regional Jail	16	8	0	0	32	56
510	Alexandria Detention Center	52	4	0	3772	0	3828
620	Western Tidewater Regional	40	0	800	0	0	840
630	Rappahannock Regional Jail	64	6	0	176	0	246
650	Hampton Correctional Facility	0	0	0	13	0	13
690	Martinsville City Jail	0	0	0	16	0	16
700	Newport News City Jail	80	0	0	12	160	252
710	Norfolk City Jail	56	0	25	0	12	93
740	Portsmouth City Jail	169	1	0	0	73	243
760	Richmond City Jail	64	20	0	0	240	324
770	Roanoke City Jail	8	10	0	51	0	69
810	Virginia Beach Correction Ctr	0	0	0	560	1828	2388
	Totals	2057	324	2080	8484	3673	16618

Appendix K: Type of Mental Health Treatment Services Provided

Jail Num	Jail Name	Num Rcvd Indiv Counslg	Hrs Trtmt Prov	Num Rcvd Group Cnslg	Hrs Trtmt Prov	Num Group SA Trtmt	Hrs Trtmt Prov	Num Rcvd Other Trtmt	Hrs of Trtmt Prov
001	Accomack County Jail	43	24	0	0	0	0	0	0
003	Albemarle-Charlottesville Reg Jail	140	70	31	26	12	28	25	60
005	Alleghany County Jail	13	20	0	0	0	0	0	0
013	Arlington County Detention Facility	23	37	0	0	20	91	232	469
023	Botetourt County Jail	0	0	0	0	0	0	0	0
041	Chesterfield County Jail	38	30	24	30	0	0	0	0
047	Culpeper County Adc	12	6	0	0	0	0	0	0
059	Fairfax Adult Detention Center	436	553	39	179	9	33	0	0
061	Fauquier County Jail	4	12	0	0	5	12	2	2
069	Northwestern Regional Jail	139	54	101	47	0	0	0	0
073	Gloucester County Jail	1	1	0	0	21	18	0	0
087	Henrico County Jail	173	179	0	0	0	0	0	0
089	Henry County Jail	76	160	0	0	0	0	0	0
103	Lancaster Correctional Center	5	20	0	0	0	0	0	0
107	Loudoun County Adult Detention	52	42.58	0	0	11	149.83	275	207.52
119	Middle Peninsula Regional	57	162	4	14	6	16	0	0
131	Eastern Shore Regional Jail	9	9	0	0	0	0	0	0
137	Central Virginia Regional Jail	16	16	8	10	10	20	0	0
139	Page County Jail	13	6	0	6	0	0	0	0
143	Pittsylvania County Jail	0	0	0	0	0	0	0	0
153	Pr. William/Manassas Regional	34	136	4	11	24	1092	110	195
161	Roanoke County/Salem Jail	0	0	0	0	10	500	21	42
163	Rockbridge Regional Jail	4	2	0	0	8	32	0	0
165	Rockingham-Harrisonburg Rel Jail	80	32	28	9	84	8.5	9	1.5
175	Southampton County Jail	0	0	0	0	0	0	0	0
193	Northern Neck Regional Jail	95	135	0	0	0	15	0	0
220	Danville Jail Farm	0	0	0	0	0	0	0	0
460	Pamunkey Regional Jail	317	326	0	0	0	0	0	0
470	Virginia Peninsula Regional	272	151	0	0	125	229	63	102
475	Hampton Roads Regional Jail	4	14	4	4	0	0	0	0
480	New River Regional Jail	37	26	0	0	0	0	39	20
485	Blue Ridge Regional Jail	182	122	0	0	14	8	15	14

Jail Num	Jail Name	Num Rcvd Indiv Counslg	Hrs Trtmt Prov	Num Rcvd Group Cnslg	Hrs Trtmt Prov	Num Group SA Trtmt	Hrs Trtmt Prov	Num Rcvd Other Trtmt	Hrs of Trtmt Prov
491	Southside Regional Jail	35	26	0	0	0	0	0	0
492	Southwest Virginia Regional Jail	0	0	0	0	0	0	0	0
493	Middle River Regional Jail	5	5	0	0	10	8	60	67
494	Western Virginia Regional Jail	15	21	106	72	53	84	106	72
495	Meherrin River Regional Jail	48	160	0	0	0	0	0	0
496	RSW Regional Jail	40	32	0	0	0	0	0	0
510	Alexandria Detention Center	303	466	0	0	6	156	31	3150
620	Western Tidewater Regional	306	720	350	50	132	20	108	10
630	Rappahannock Regional Jail	104	104	0	0	48	72	0	0
650	Hampton Correctional Facility	8	3	0	0	5	5	5	5
690	Martinsville City Jail	20	16	0	0	0	0	0	0
700	Newport News City Jail	39	39	0	0	0	0	0	0
710	Norfolk City Jail	0	0	8	1	18	24	16	12
740	Portsmouth City Jail	0	0	0	0	0	0	67	73
760	Richmond City Jail	28	79	2	161	0	0	0	0
770	Roanoke City Jail	0	0	0	0	8	48	3	3
810	Virginia Beach Correction Ctr	29	396	0	0	0	0	1182	1432
	Totals	3255	4413	709	620	639	2669	2369	5937

Appendix L: Mental Health Medications Dispensed

Jail Num	Jail Name	Inmates Receiving AntiPsychotic Meds	Inmates Receiving Mood Disorder Meds	Inmates Receiving Antidepressant Meds	Inmates Receiving AntiAnxiety Meds	Inmates Dispensed Psyc Meds	Inmates Refused Meds	Upon Refusal of Meds How often is Judicial Approval sought for Involuntary Treatment (Always, Sometimes, Inmate in Danger, Never)
001	Accomack County Jail	12	12	32	9	32	4	Some
003	Albemarle-Charlottesville Reg Jail	108	41	155	1	190	6	Some
005	Alleghany County Jail	13	18	19	15	27	4	Inmate is a Danger
013	Arlington County Detention Jail	119	23	218	0	201	28	Inmate is a Danger
023	Botetourt County Jail	19	33	71	4	50	5	Inmate is a Danger
041	Chesterfield County Jail	57	11	70	34	188	0	Always
047	Culpeper County Adc	13	7	25	0	45	3	Inmate is a Danger
059	Fairfax Adult Detention Center	119	29	131	64	207	141	Never
061	Fauquier County Jail	2	5	16	8	20	9	Inmate is a Danger
069	Northwestern Reg Jail	70	32	105	77	169	6	Never
073	Gloucester County Jail	3	4	7	1	12	0	Inmate is a Danger
087	Henrico County Jail	134	41	80	5	463	59	Inmate is a Danger
089	Henry County Jail	24	1	20	15	86	13	Inmate is a Danger
103	Lancaster Correctional Center	2	3	7	1	1	0	Some
107	Loudoun County Adult Detention	15	15	51	17	55	4	Never
119	Middle Peninsula Regional	19	7	13	1	55	15	Inmate is a Danger
131	Eastern Shore Regional Jail	9	3	5	1	13	2	Inmate is a Danger
135	Piedmont Regional Jail	22	13	19	1	78	0	Inmate is a Danger
137	Central Virginia Regional Jail	54	10	57	0	156	2	Inmate is a Danger
139	Page County Jail	9	6	37	0	25	0	Inmate is a Danger
143	Pittsylvania County Jail	6	5	27	0	16	3	Inmate is a Danger
153	Pr. William/Manassas Regional	60	30	80	0	101	50	Inmate is a Danger
161	Roanoke County/Salem Jail	12	6	49	1	61	0	Never
163	Rockbridge Reg Jail	25	16	25	0	8	2	Inmate is a Danger
165	Rockingham-Harrisonburg Reg Jail	47	10	66	45	86	0	Inmate is a Danger
175	Southampton County Jail	12	5	5	0	15	0	Inmate is a Danger
193	Northern Neck Regional Jail	60	23	66	12	123	2	Never
220	Danville Jail Farm	7	0	3	0	15	1	Never
460	Pamunkey Regional Jail	41	25	65	71	113	19	No Answer
470	Virginia Peninsula Regional	95	37	104	63	168	66	Inmate is a Danger

Jail Num	Jail Name	Inmates Receiving AntiPsychotic Meds	Inmates Receiving Mood Disorder Meds	Inmates Receiving Antidepressant Meds	Inmates Receiving AntiAnxiety Meds	Inmates Dispensed Psyc Meds	Inmates Refused Meds	Upon Refusal of Meds How often is Judicial Approval sought for Involuntary Treatment (Always, Sometimes, Inmate in Danger, Never)
475	Hampton Roads Regional Jail	155	16	261	35	208	69	Never
480	New River Regional Jail	86	44	93	66	289	3	Inmate is a Danger
485	Blue Ridge Regional Jail	137	29	97	5	400	4	Never
491	Southside Regional Jail	22	11	40	36	35	6	Inmate is a Danger
492	Southwest Virginia Regional Jail	215	40	373	190	629	6	Inmate is a Danger
493	Middle River Regional Jail	109	20	85	0	276	3	Never
494	Western Virginia Regional Jail	103	51	205	318	270	10	Inmate is a Danger
495	Meherrin River Regional Jail	23	6	12	15	90	5	Inmate is a Danger
496	RSW Regional Jail	44	14	42	1	66	59	Never
510	Alexandria Detention Center	20	5	40	11	48	32	Never
620	Western Tidewater Regional	100	62	187	0	158	69	Some
630	Rappahannock Regional Jail	131	33	53	1	277	2	Never
650	Hampton Correctional Facility	15	12	8	0	35	3	Inmate is a Danger
690	Martinsville City Jail	9	4	22	0	31	0	Inmate is a Danger
700	Newport News City Jail	93	56	123	35	178	25	Never
710	Norfolk City Jail	96	82	81	0	335	0	Never
740	Portsmouth City Jail	40	20	9	0	58	2	Inmate is a Danger
760	Richmond City Jail	85	18	36	34	202	34	Inmate is a Danger
770	Roanoke City Jail	83	94	165	201	0	0	Inmate is a Danger
810	Virginia Beach Correction Ctr	156	151	235	3	545	304	Inmate is a Danger
	Totals	2910	1239	3795	1397	6909	1080	

Appendix M: Most Serious Offense of Inmates with Mental Illness in Jails

Jail Num	Jail Name	Inmates Whose MSO Reported as Felony	Inmates Whose MSO Reported as Misdemeanor	Inmates Whose MSO Reported as Violent	Inmates Whose MSO Reported as Drug	Inmates Whose MSO Reported as Non-Violent	Total Inmates Reported
001	Accomack County Jail	60	10	29	17	21	70
003	Albemarle-Charlottesville Reg Jail	171	57	67	34	126	230
013	Arlington County Detention Facility	176	94	95	32	145	270
023	Botetourt County Jail	65	18	16	12	54	84
041	Chesterfield County Jail	98	31	12	50	67	129
047	Culpeper County Adc	21	57	10	33	35	79
059	Fairfax Adult Detention Center	478	146	193	133	307	639
061	Fauquier County Jail	28	11	5	4	26	40
069	Northwestern Regional Jail	87	36	48	35	46	174
073	Gloucester County Jail	7	18	5	1	19	25
087	Henrico County Jail	215	70	87	58	139	286
089	Henry County Jail	51	14	12	6	44	65
103	Lancaster Correctional Center	4	4	3	1	4	8
107	Loudoun County Adult Detention	54	28	26	14	42	83
119	Middle Peninsula Regional	44	16	11	7	42	60
131	Eastern Shore Regional Jail	6	1	4	1	2	7
135	Piedmont Regional Jail	18	13	14	6	14	31
137	Central Virginia Regional Jail	154	16	50	76	47	170
139	Page County Jail	14	42	16	9	32	70
143	Pittsylvania County Jail	41	8	10	2	37	49
153	Pr. William/Manassas Regional	128	24	67	21	64	152
163	Rockbridge Regional Jail	1	34	2	0	33	35
165	Rockingham-Harrisonburg Reg Jail	90	20	19	27	59	111
175	Southampton County Jail	21	3	10	0	12	24
193	Northern Neck Regional Jail	53	9	22	7	34	62
220	Danville Jail Farm	14	4	3	6	8	15
460	Pamunkey Regional Jail	26	1	8	6	14	27
470	Virginia Peninsula Regional	321	193	103	53	354	522
475	Hampton Roads Regional Jail	227	9	133	29	92	236
480	New River Regional Jail	126	3	47	42	38	129
491	Southside Regional Jail	30	8	9	14	15	38
493	Middle River Regional Jail	260	43	71	107	124	306

Jail Num	Jail Name	Inmates Whose MSO Reported as Felony	Inmates Whose MSO Reported as Misdemeanor	Inmates Whose MSO Reported as Violent	Inmates Whose MSO Reported as Drug	Inmates Whose MSO Reported as Non-Violent	Total Inmates Reported
494	Western Virginia Regional Jail	180	17	59	81	66	197
495	Meherrin River Regional Jail	74	12	33	16	37	86
496	RSW Regional Jail	56	10	11	17	32	66
510	Alexandria Detention Center	49	37	32	9	45	92
620	Western Tidewater Regional	21	49	24	22	24	85
630	Rappahannock Regional Jail	66	21	55	27	18	87
650	Hampton Correctional Facility	31	7	1	8	26	38
690	Martinsville City Jail	30	0	10	2	20	30
700	Newport News City Jail	90	13	59	8	38	103
710	Norfolk City Jail	280	55	132	22	181	335
740	Portsmouth City Jail	2	23	2	2	21	25
770	Roanoke City Jail	90	8	38	17	44	98
810	Virginia Beach Correction Ctr	284	58	128	35	178	342
	Totals	4342	1351	1791	1109	2826	5810

Appendix N: Incidents of Inmate Aggression

Jail Num	Jail Name	Num of Incidents of Inmate Aggression twd Other Inmates	Num of Incidents of Inmate Aggression twd Jail Staff	Num of Perpetrators MI	Num of Victims MI
001	Accomack County Jail	0	0	0	0
003	Albemarle-Charlottesville Regional Jail	15	2	2	3
005	Alleghany County Regional	5	1	3	1
013	Arlington County Detention Facility	4	2	3	1
023	Botetourt County Jail	0	0	0	0
041	Chesterfield County Jail	0	0	0	0
047	Culpeper County Adc	0	0	0	0
059	Fairfax Adult Detention Center	8	7	7	0
061	Fauquier County Jail	0	0	0	0
069	Northwestern Regional Jail	7	0	4	2
073	Gloucester County Jail	0	0	0	0
087	Henrico County Jail	25	14	8	2
089	Henry County Jail	5	3	2	1
103	Lancaster Correctional Center	0	0	0	0
107	Loudoun County Adult Detention	3	0	1	2
119	Middle Peninsula Regional	7	10	15	2
131	Eastern Shore Regional Jail	0	1	1	0
135	Piedmont Regional Jail	11	2	2	0
137	Central Virginia Regional Jail	1	0	0	1
139	Page County Jail	0	0	0	0
143	Pittsylvania County Jail	0	1	0	0
153	Pr. William/Manassas Regional	3	1	2	4
161	Roanoke County/Salem Jail	0	0	0	0
163	Rockbridge Regional Jail	1	0	1	0
165	Rockingham-Harrisonburg Reg Jail	0	0	0	0
175	Southampton County Jail	0	0	0	0
193	Northern Neck Regional Jail	3	1	0	3
220	Danville City Farm	0	0	0	0
460	Pamunkey Regional Jail	0	0	0	0
470	Virginia Peninsula Regional	8	7	14	7
475	Hampton Roads Regional Jail	5	8	4	2
480	New River Regional Jail	10	2	0	0
485	Blue Ridge Regional Jail	4	14	12	2
491	Southside Regional Jail	4	1	0	0
492	Southwest Virginia Regional Jail	47	0	12	9
493	Middle River Regional Jail	9	2	2	0
494	Western Virginia Regional Jail	33	4	33	35
495	Meherrin River Regional Jail	3	2	2	0
496	RSW Regional Jail	1	0	1	0

Jail Num	Jail Name	Num of Incidents of Inmate Aggression twd Other Inmates	Num of Incidents of Inmate Aggression twd Jail Staff	Num of Perpetrators MI	Num of Victims MI
510	Alexandria Detention Center	1	9	2	0
620	Western Tidewater Regional	13	5	3	1
630	Rappahannock Regional Jail	37	29	0	0
650	Hampton Correctional Facility	1	1	2	2
690	Martinsville City Jail	2	2	1	2
700	Newport News City Jail	5	4	4	1
710	Norfolk City Jail	6	2	5	4
740	Portsmouth City Jail	0	4	3	1
760	Richmond City Jail	12	2	3	1
770	Roanoke City Jail	12	2	9	1
810	Virginia Beach Correction Ctr	11	0	5	5
	Totals	322	145	168	95

Appendix O: Mental Health Treatment Expenditures

Jail Num	Jail Name	FY23 Cost of Meds	FY23 Cost of Services	FY23 Total Funds
001	Accomack County Jail	\$25,063	\$82,813	\$107,876
003	Albemarle-Charlottesville Regional Jail	\$311,209	\$0	\$311,209
005.	Alleghany Regional	\$39,854	\$450,000	\$489,854
013	Arlington County Detention Facility	\$300,633	\$1,990,429	\$2,291,062
023	Botetourt County Jail	\$72,570	\$58,301	\$130,871
041	Chesterfield County Jail	\$56,421	\$509,764	\$566,185
047	Culpeper County Adc	\$25,300	\$79,000	\$104,300
059	Fairfax Adult Detention Center	\$193,395	\$4,546,820	\$4,740,215
061	Fauquier County Jail	\$1,000	\$57,000	\$58,000
069	Northwestern Regional Jail	\$56,687	\$199,736	\$256,423
073	Gloucester County Jail	\$338	\$68,000	\$68,338
087	Henrico County Jail	\$271,086	\$821,971	\$1,093,057
089	Henry County Jail	\$3,900	\$0	\$3,900
103.	Lancaster Correctional Center	\$2,145	\$58,000	\$60,145
107	Loudoun County Adult Detention	\$8,283	\$1,123,609	\$1,131,891
119	Middle Peninsula Regional	\$29,503	\$452,681	\$482,185
131	Eastern Shore Regional Jail	\$60,000	\$30,000	\$90,000
135	Piedmont Regional Jail	\$112,231	\$129,452	\$241,683
137	Central Virginia Regional Jail	\$107,943	\$367,680	\$475,623
139	Page County Jail	\$87,193	\$219,193	\$306,386
143	Pittsylvania County Jail	\$10,000	\$3,000	\$13,000
153	Pr. William/Manassas Regional	\$199,642	\$1,233,571	\$1,433,213
161	Roanoke County/Salem Jail	\$4,200	\$35,000	\$39,200
165	Rockingham-Harrisonburg Regional Jail	\$38,051	\$34,209	\$72,260
175	Southampton County Jail	\$4,412	\$12,000	\$16,412
193	Northern Neck Regional Jail	\$120,000	\$713,954	\$833,954
220.	Danville City Farm	\$22,001	\$0	\$22,001
460	Pamunkey Regional Jail	\$22,356	\$261,755	\$284,111
470	Virginia Peninsula Regional	\$130,700	\$1,899,984	\$2,030,684
475	Hampton Roads Regional Jail	\$151,723	\$2,667,000	\$2,818,723
480	New River Regional Jail	\$90,593	\$368,522	\$459,115
485	Blue Ridge Regional Jail	\$195,649	\$118,567	\$314,216
491	Southside Regional Jail	\$54,150	\$85,595	\$139,744
492	Southwest Virginia Regional Jail	\$175,000	\$427,398	\$602,398
493	Middle River Regional Jail	\$62,277	\$322,916	\$385,192
494	Western Virginia Regional Jail	\$162,214	\$597,239	\$759,452
495	Meherrin River Regional Jail	\$58,135	\$120,000	\$178,135
496	Rsw Regional Jail	\$46,233	\$97,237	\$143,470
510	Alexandria Detention Center	\$65,225	\$1,151,785	\$1,217,010
620	Western Tidewater Regional	\$120,258	\$0	\$120,258
630	Rappahannock Regional Jail	\$234,523	\$355,097	\$589,620

Jail Num	Jail Name	FY23 Cost of Meds	FY23 Cost of Services	FY23 Total Funds
650	Hampton Correctional Facility	\$13,661	\$29,451	\$43,111
690	Martinsville City Jail	\$26,000	\$15,000	\$41,000
700	Newport News City Jail	\$55,000	\$432,000	\$487,000
710	Norfolk City Jail	\$109,636	\$890,242	\$999,878
740	Portsmouth City Jail	\$11,309	\$105,403	\$116,712
760	Richmond City Jail	\$331,236	\$715,564	\$1,046,800
810	Virginia Beach Correction Ctr	\$470,121	\$688,354	\$1,158,475
	Totals	\$4,749,055	\$24,625,291	\$29,374,346

Appendix P: Allocation of PMED and BHCM Positions in FY23

Jail	Jail Name	BHCM Positions Allocated 8/1/2022	BHCM Positions Allocated 1/1/2023	BHCM Salary Allocated	PMED Positions Allocated 8/1/2022	PMED Positions Allocated 1/1/2023	PMED Salary Allocated	FY23 Total Cost
001	Accomack County Jail	0	1	\$52,500	1	0	\$22,509	\$44,720
003	Albemarle-Charlottesville Regional Jail	1	1	\$52,500	0	1	\$22,509	\$82,549
005	Alleghany Regional Jail	0	1	\$52,500	1	0	\$22,509	\$44,720
013	Arlington County jali	1	0	\$52,500	0	0	\$0	\$48,151
023	Botetourt-Craig Reg Jail	1	0	\$52,500	0	0	\$0	\$48,151
037	Charlotte County Jail	0	1	\$52,500	1	0	\$22,509	\$44,720
041	Chesterfield County Jail	1	1	\$52,500	0	1	\$22,509	\$82,549
047	Culpeper County Jail	0	1	\$52,500	0	0	\$0	\$24,076
059	Fairfax County Jail	2	1	\$52,500	0	0	\$0	\$120,378
061	Fauquier County Jail	0	1	\$52,500	0	0	\$0	\$24,076
067	Franklin County Jail	0	1	\$52,500	0	0	\$0	\$24,076
069	Northwestern Regional Jail	2	1	\$52,500	2	4	\$22,509	\$202,956
073	Gloucester County Jail	0	1	\$52,500	0	0	\$0	\$24,076
087	Henrico County Jail	3	2	\$52,500	14	4	\$22,509	\$522,917
089	Henry County Jail	1	1	\$52,500	0	0	\$0	\$72,227
103	Lancaster County Jail	0	1	\$52,500	0	0	\$0	\$24,076
107	Loudoun County Jail	1	0	\$52,500	5	2	\$22,509	\$172,018
119	Middle Peninsula Reg Jail	1	0	\$52,500	0	0	\$0	\$48,151
121	Montgomery County Jail	0	1	\$52,500	0	0	\$0	\$24,076
131	Eastern Shore Reg Jail	0	1	\$52,500	0	0	\$0	\$24,076
135	Piedmont Regional Jail	1	1	\$52,500	2	1	\$22,509	\$123,838
137	Central Va Reg Jail	1	1	\$52,500	0	0	\$0	\$72,227
139	Page County Jail	0	1	\$52,500	2	0	\$22,509	\$65,365
141	Patrick County Jail	0	1	\$52,500	1	1	\$22,509	\$55,042

Jail	Jail Name	BHCM Positions Allocated 8/1/2022	BHCM Positions Allocated 1/1/2023	BHCM Salary Allocated	PMED Positions Allocated 8/1/2022	PMED Positions Allocated 1/1/2023	PMED Salary Allocated	FY23 Total Cost
143	Pittsylvania County Jail	0	1	\$52,500	0	0	\$0	\$24,076
153	Prince William-Man Reg Jail	2	1	\$52,500	0	0	\$0	\$120,378
161	Roanoke County Jail	0	1	\$52,500	0	0	\$0	\$24,076
163	Rockbridge Reg Jail	0	1	\$52,500	0	0	\$0	\$24,076
165	Rockingham-Harrisonburg Reg Jail	1	1	\$52,500	5	1	\$22,509	\$185,772
175	Southampton County Jail	0	1	\$52,500	1	1	\$22,509	\$55,042
183	Sussex County Jail	0	1	\$52,500	2	0	\$22,509	\$65,365
193	Northern Neck Reg Jail	1	0	\$52,500	2	2	\$22,509	\$110,085
460	Pamunkey Reg Jail	1	1	\$52,500	0	0	\$0	\$72,227
465	Riverside Reg Jail	3	2	\$52,500	0	5	\$22,509	\$244,216
470	Virginia Peninsula Regional	1	1	\$52,500	0	2	\$22,509	\$92,871
475	Hampton Roads Reg Jail	1	1	\$52,500	0	0	\$0	\$72,227
480	New River Regional Jail	2	2	\$52,500	5	6	\$22,509	\$309,610
485	Blue Ridge Regional Jail	3	3	\$52,500	0	3	\$22,509	\$247,647
491	Southside Regional Jail	1	0	\$52,500	3	1	\$22,509	\$120,407
492	Southwest Virginia Regional Jail	4	4	\$52,500	4	8	\$22,509	\$454,064
493	Middle River Regional Jail	2	2	\$52,500	5	5	\$22,509	\$299,288
494	Western Virginia Regional Jail	2	2	\$52,500	3	4	\$22,509	\$247,676
495	Meherrin River Reg Jail	1	1	\$52,500	0	0	\$0	\$72,227
496	RSW Reg Jail	1	1	\$52,500	0	0	\$0	\$72,227
510	Alexandria City Jail	0	1	\$52,500	0	0	\$0	\$24,076
550	Chesapeake City Jail	3	2	\$52,500	0	0	\$0	\$192,605
590	Danville City Jail	1	0	\$52,500	1	1	\$22,509	\$79,118
620	Western Tidewater Reg Jail	2	1	\$52,500	0	0	\$0	\$120,378
630	Rappahannock Reg Jail	3	3	\$52,500	0	5	\$22,509	\$268,292
650	Hampton City Jail	1	0	\$52,500	0	0	\$0	\$48,151

Jail	Jail Name	BHCM Positions Allocated 8/1/2022	BHCM Positions Allocated 1/1/2023	BHCM Salary Allocated	PMED Positions Allocated 8/1/2022	PMED Positions Allocated 1/1/2023	PMED Salary Allocated	FY23 Total Cost
690	Martinsville City Jail	1	0	\$52,500	0	0	\$0	\$48,151
700	Newport News City Jail	1	1	\$52,500	0	0	\$0	\$72,227
710	Norfolk City Jail	2	2	\$52,500	0	0	\$0	\$144,454
740	Portsmouth City Jail	1	0	\$52,500	0	0	\$0	\$48,151
760	Richmond City Jail	2	1	\$52,500	0	0	\$0	\$120,378
770	Roanoke City Jail	1	1	\$52,500	0	0	\$0	\$72,227
810	Virginia Beach Jail Jail	3	2	\$52,500	4	5	\$22,509	\$326,794
Total		63	62		64	63		\$6,497,768

Note that the FY23 appropriation for this funding initiative exceeded FY23 cost by \$834,478 and the FY24 appropriation is insufficient to fund annualized costs of positions funded in FY23 for a partial year by \$1,269,332.

Appendix Q: Areas of Benefit for Funding

Jail	Jail Name	Staffing	Jail Expansion/MH Beds	Officer Training/CIT	Medication	Inmate Services/Programs
001	Accomack County Jail	1	1			
003	Albemarle-Charlottesville Reg Jail	1				1
005	Alleghany County Reg Jail	1	1			
013	Arlington County Detention Facility	1	1			1
023	Botetourt County Jail	1				
041	Chesterfield County Jail	1	1			
047	Culpeper County Adc	1	1	1	1	1
059	Fairfax Adult Detention Center	1	1	1	1	1
061	Fauquier County Jail	1	1		1	1
069	Northwestern Regional Jail			1		
073	Gloucester County Jail	1	1	1		
087	Henrico County Jail	1	1			
089	Henry County Jail	1		1	1	
103	Lancaster Correctional Center		1		1	
107	Loudoun County Adult Detention	1	1		1	
119	Middle Peninsula Regional	1			1	
131	Eastern Shore Regional Jail	1				
135	Piedmont Regional Jail					1
137	Central Virginia Regional Jail	1	1			
139	Page County Jail	1	1	1		
143	Pittsylvania County Jail	1	1			
153	Pr. William/Manassas Regional	1			1	
163	Rockbridge Regional Jail	1	1	1	1	1
161	Roanoke County/Salem Jail	1				

Jail	Jail Name	Staffing	Jail Expansion/MH Beds	Officer Training/CIT	Medication	Inmate Services/Programs
165	Rockingham-Harrisonburg Reg Jail	1	1			
175	Southampton County Jail		1			
193	Northern Neck Regional Jail	1	1		1	
220	Danville Jail Farm	1				
460	Pamunkey Regional Jail		1		1	
470	Virginia Peninsula Regional	1	1	1		
475	Hampton Roads Regional Jail	1	1			1
480	New River Regional Jail	1	1	1	1	1
491	Southside Regional Jail	1				
492	Southwest Virginia Regional Jail	1				
493	Middle River Regional Jail	1	1			
494	Western Virginia Regional Jail	1				
495	Meherrin River Regional Jail				1	
496	RSW Regional Jail	1			1	
510	Alexandria Detention Center	1				
620	Western Tidewater Regional		1	1	1	
630	Rappahannock Regional Jail		1	1		
650	Hampton Correctional Facility	1				
690	Martinsville City Jail	1				
700	Newport News City Jail	1				
710	Norfolk City Jail	1			1	1
740	Portsmouth City Jail	1	1		1	
760	Richmond City Jail	1	1		1	
770	Roanoke City Jail	1				
810	Virginia Beach Correction Ctr	1		1		
	Total	41	27	12	18	10

Appendix R: Brief Jail Mental Health Screen

BRIEF JAIL MENTAL HEALTH SCREEN

Section 1

Name: _____ <small style="display: block; text-align: center; margin-top: -5px;">First MI Last</small>	Detainee #: _____	Date: ___/___/____	Time: _____ AM PM
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Section 2

Questions	No	Yes	General Comments
1. Do you <i>currently</i> believe that someone can control your mind by putting thoughts into your head or taking thoughts out of your head?			
2. Do you <i>currently</i> feel that other people know your thoughts and can read your mind?			
3. Have you <i>currently</i> lost or gained as much as two pounds a week for several weeks without even trying?			
4. Have you or your family or friends noticed that you are <i>currently</i> much more active than you usually are?			
5. Do you <i>currently</i> feel like you have to talk or move more slowly than you usually do?			
6. Have there <i>currently</i> been a few weeks when you felt like you were useless or sinful?			
7. Are you <i>currently</i> taking any medication prescribed for you by a physician for any emotional or mental health problems?			
8. Have you <u>ever</u> been in a hospital for emotional or mental health problems?			

Section 3 (Optional)

Officer's Comments/Impressions (check all that apply):		
<input type="checkbox"/> Language barrier	<input type="checkbox"/> Under the influence of drugs/alcohol	<input type="checkbox"/> Non-cooperative
<input type="checkbox"/> Difficulty understanding questions	<input type="checkbox"/> Other, specify: _____	

Referral Instructions: This detainee should be referred for further mental health evaluation if he/she answered:

- YES to item 7; OR
- YES to item 8; OR
- YES to at least 2 of items 1 through 6; OR
- If you feel it is necessary for any other reason

Not Referred

Referred on ___/___/_____ to _____

Person completing screen _____

INSTRUCTIONS FOR COMPLETING THE BRIEF JAIL MENTAL HEALTH SCREEN

GENERAL INFORMATION:

This Brief Jail Mental Health Screen (BJMHS) was developed by Policy Research Associates, Inc., with a grant from the National Institute of Justice. The BJMHS is an efficient mental health screen that will aid in the early identification of severe mental illnesses and other acute psychiatric problems during the intake process.

This screen should be administered by Correctional Officers during the jail's intake/booking process.

INSTRUCTIONS FOR SECTION 1:

NAME: Enter detainees name — first, middle initial, and last
DETAINEE#: Enter detainee number.
DATE: Enter today's month, day, and year.
TIME: Enter the current time and circle AM or PM.

INSTRUCTIONS FOR SECTION 2:

ITEMS 1-6:

Place a check mark in the appropriate column (for "NO" or "YES" response).

If the detainee REFUSES to answer the question or says that he/she DOES NOT KNOW the answer to the question, do not check "NO" or "YES." Instead, in the General Comments section, indicate REFUSED or DON'T KNOW and include information explaining why the detainee did not answer the question.

ITEMS 7-8:

ITEM 7: This refers to any *prescribed* medication for any emotional or mental health problems.

ITEM 8: Include any stay of one night or longer. Do NOT include contact with an Emergency Room if it did not lead to an admission to the hospital

If the detainee REFUSES to answer the question or says that he/she DOES NOT KNOW the answer to the question, do not check "NO" or "YES." Instead, in the General Comments section, indicate REFUSED or DON'T KNOW and include information explaining why the detainee did not answer the question.

General Comments Column:

As indicated above, if the detainee REFUSES to answer the question or says that he/she DOES NOT KNOW the answer to the question, do not check "NO" or "YES." Instead, in the General Comments section, indicate REFUSED or DON'T KNOW and include information explaining why the detainee did not answer the question.

All "YES" responses require a note in the General Comments section to document:

- (1) Information about the detainee that the officer feels relevant and important
- (2) Information specifically requested in question

If at any point during administration of the BJMHS the detainee experiences distress, he/she should follow the jails procedure for referral services.

INSTRUCTIONS FOR SECTION 3:

OFFICER'S COMMENTS: Check any one or more of the four problems listed if applicable to this screening. If any other problem(s) occurred, please check OTHER, and note what it was.

REFERRAL INSTRUCTIONS:

Any detainee answering YES to Item 7 or YES to Item 8 or YES to at least two of Items 1-6 should be referred for further mental health evaluation. If there is any other information or reason why the officer feels it is necessary for the detainee to have a mental health evaluation, the detainee should be referred. Please indicate whether or not the detainee was referred.

Appendix S: Correctional MH Screen (for Men/Women)

Correctional Mental Health Screen for Men (CMHS-M)

Name _____ <small>Last, First, MI</small>	Detainee # _____	Date ___/___/____ <small>mm/dd/year</small>	Time ___:___
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QUESTIONS	NO	YES	COMMENTS
1. Have you ever had worries that you just can't get rid of?			
2. Some people find their mood changes frequently – as if they spend everyday on an emotional roller coaster. Does this sound like you?			
3. Do you get annoyed when friends or family complain about their problems? Or do people complain that you're not sympathetic to their problems?			
4. Have you ever felt like you didn't have any feelings, or felt distant or cut off from other people or from your surroundings?			
5. Has there ever been a time when you felt so irritable that you found yourself shouting at people or starting fights or arguments?			
6. Do you often get in trouble at work or with friends because you act excited at first but then lose interest in projects and don't follow through?			
7. Do you tend to hold grudges or give people the silent treatment for days at a time?			
8. Have you ever tried to avoid reminders, or to not think about, something terrible that you experienced or witnessed?			
9. Has there ever been a time when you felt depressed most of the day for at least 2 weeks?			
10. Have you ever been troubled by repeated thoughts, feelings, or nightmares about something you experienced or witnessed?			
11. Have you ever been in a hospital for non-medical reasons such as in a psychiatric hospital? (Do NOT include going to an Emergency Room if you were not hospitalized.)			
12. Have you ever felt constantly on guard or watchful even when you didn't need to, or felt jumpy and easily startled?			

TOTAL # YES: _____	General Comments: _____
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Refer for further Mental Health Evaluation if the Detainee answered Yes to 6 or more items OR If you are concerned for any other reason

- **URGENT Referral** on ___/___/____ to _____
- **ROUTINE Referral** on ___/___/____ to _____
- **Not Referred**

Person Completing Screen: _____

INSTRUCTIONS FOR COMPLETING THE CMHS-M

General Information:

The CMHS is a tool designed to assist in the early detection of psychiatric illness during the jail intake process. The Research Team under the direction of Drs. Julian D. Ford and Robert L. Trestman at the University of Connecticut Health Center developed this Correctional Mental Health Screen for Men (CMHS-M) with a grant funded by the National Institute of Justice.

Instructions for administration of the CMHS-M:

Correctional Officers may administer this mental health screen during intake.

Name: Detainee's name- Last, first and middle initial
Detainee#: Detainee's facility identification number
Date: Today's month, date, year
Time: Current time (24hr or AM/PM)

Questions #1-12 may be administered as best suits the facility's policies and procedures and the reading level, language abilities, and motivation of the detainee who is completing the screen. The method chosen should be used consistently. Two recommended methods:

- Staff reads the questions out loud and fills in the detainee's answers to the questions on the form
- Staff reads the questions out loud, while the detainee reads them on a separate sheet and fills in his answers

Each question should be carefully read, and a check mark placed in the appropriate column (for "NO" or "YES" response).

The staff person should add a note in the **Comments** Section to document any information that is relevant and significant for any question that the detainee has answered "YES."

If the detainee declines to answer a question or says he does not know the answer to a question, do NOT check "YES" or "NO." Instead, record DECLINED or DON'T KNOW in the **Comments** box.

Total # YES: total number of YES responses

General Comments: Staff may include information here to describe overall concerns about the responses (for example: intoxicated, impaired, or uncooperative)

Referral Instructions:

Urgent Referral: A referral for **urgent** mental health evaluation may be made by the staff person if there is any behavioral or other evidence that a detainee is unable to cope emotionally or mentally or is a suicide risk.

Routine Referral: A detainee answering "**YES**" to **6 or more items** should be referred for **routine** mental health evaluation. A referral also may be made if the staff person has any concerns about the detainee's mental state or ability to cope emotionally or behaviorally.

** If at any point during administration of the CMHS-M the detainee experiences *more than mild and temporary emotional distress* (such as severe anxiety, grief, anger or disorientation) he should be referred for immediate mental health evaluation.

Referral: Check the appropriate box for whether a detainee was referred. If referred, check URGENT or ROUTINE, enter the date of the referral and the mental health staff person or mental health clinic to whom the referral was given.

Person completing screen: Enter the staff member's name

Correctional Mental Health Screen for Women (CMHS-W)

Name _____ Last, First, MI	Detainee # _____	Date ___/___/____ mm/dd/year	Time ___:___
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Questions	No	Yes	Comments
1. Do you get annoyed when friends and family complain about their problems? Or do people complain you are not sympathetic to their problems?			
2. Have you ever tried to avoid reminders of, or to not think about, something terrible that you experienced or witnessed?			
3. Some people find their mood changes frequently-as if they spend everyday on an emotional rollercoaster. For example, switching from feeling angry to depressed to anxious many times a day. Does this sound like you?			
4. Have there ever been a few weeks when you felt you were useless, sinful, or guilty?			
5. Has there ever been a time when you felt depressed most of the day for at least 2 weeks?			
6. Do you find that most people will take advantage of you if you let them know too much about you?			
7. Have you been troubled by repeated thoughts, feelings, or nightmares about something terrible that you experienced or witnessed?			
8. Have you ever been in the hospital for non-medical reasons, such as a psychiatric hospital? (Do NOT include going to an Emergency Room if you were not hospitalized.)			

TOTAL # YES: _____	General Comments:
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Refer for further Mental Health Evaluation if the Detainee answered Yes to 5 or more items OR If you are concerned for any other reason

- **URGENT Referral** on ___/___/____ to _____
- **ROUTINE Referral** on ___/___/____ to _____
- **Not Referred**

Person Completing Screen: _____

INSTRUCTIONS FOR COMPLETING THE CMHS-W

General Information:

The CMHS is a tool designed to assist in the early detection of psychiatric illness during the jail intake process. The Research Team under the direction of Drs. Julian D. Ford and Robert L. Trestman at the University of Connecticut Health Center developed this Correctional Mental Health Screen for Women (CMHS-W), with a grant funded by the National Institute of Justice.

Instructions for administration of the CMHS-W:

Correctional Officers may administer this mental health screen during intake.

Name: Detainee's name- Last, first and middle initial
Detainee#: Detainee's facility identification number
Date: Today's month, date, year
Time: Current time (24hr or AM/PM)

Questions #1-8 may be administered as best suits the facility's policies and procedures and the reading level, language abilities, and motivation of the detainee who is completing the screen. The method chosen should be used consistently. Two recommended methods:

- Staff reads the questions out loud and fills in the detainee's answers to the questions on the form
- Staff reads the questions out loud, while the detainee reads them on a separate sheet and fills in her answers

Each question should be carefully read, and a check mark placed in the appropriate column (for "NO" or "YES" response).

The staff person should add a note in the **Comments** Section to document any information that is relevant and significant for any question that the detainee has answered "YES."

If the detainee declines to answer a question or says she does not know the answer to a question, do NOT check "YES" or "NO." Instead, record DECLINED or DON'T KNOW in the **Comments** box.

Total # YES: total number of YES responses

General Comments: Staff may include information here to describe overall concerns about the responses (for example: intoxicated, impaired, or uncooperative)

Referral Instructions:

Urgent Referral: A referral for **urgent** mental health evaluation may be made by the staff person if there is any behavioral or other evidence that a detainee is unable to cope emotionally or mentally or is a suicide risk.

Routine Referral: A detainee answering **"YES" to 5 or more items** should be referred for **routine** mental health evaluation. A referral also may be made if the staff person has any concerns about the detainee's mental state or ability to cope emotionally or behaviorally.

** If at any point during administration of the CMHS-W the detainee experiences *more than mild and temporary emotional distress* (such as severe anxiety, grief, anger or disorientation) she should be referred for immediate mental health evaluation.

Referral: Check the appropriate box for whether a detainee was referred. If referred, check URGENT or ROUTINE, enter the date of the referral and the mental health staff person or mental health clinic to whom the referral was given.

Person completing screen: Enter the staff member's name

Appendix U: Amendments to Prior Years

NONE

Appendix V: Relevant Links

Step-Va

Behavioral Health Commission Monitoring of STEP-VA
[PowerPoint Presentation \(virginia.gov\)](#)

The STEP-VA Plan (DBHDS)
<https://dbhds.virginia.gov/developmental-services/step-va/>

[FY22 STEP-VA Annual Report](#)

2022 'Update on the Implementation of STEP-VA' (DBHDS)
<http://bhc.virginia.gov/documents/2023-July-DBHDS-STEP-VA-update.pdf>

2020 Special Session, Item 322; Financial Assistance for Health Services (Additional Appropriation for STEP-VA)
<https://budget.lis.virginia.gov/item/2023/2/hb5005/enrolled/1/322/>

2019 JLARC Report on the Implementation of STEP-VA
<http://jlarc.virginia.gov/pdfs/reports/Rpt519-1.pdf>

Marcus Alert

The Marcus Alert Plan (DBHDS)
<https://dbhds.virginia.gov/human-resource-development-and-management/health-equity/mdpa/>

Chapter 837, Amendment of §53.1-133.03 (2023)
<https://lis.virginia.gov/cgi-bin/legp604.exe?201+ful+CHAP0837>

HB5043 (2020) Mental Health Crises; DCJS to assist DBHDS etc., with development of Marcus alert system.
<https://lis.virginia.gov/cgi-bin/legp604.exe?202+sum+HB5043>

§ 37.2-311.1. Comprehensive crisis system; Marcus alert system.
<https://law.lis.virginia.gov/vacode/title37.2/chapter3/section37.2-311.1/>

Mental Health Pilot Program

Report on the Virginia Department of Criminal Services Jail Mental Health Pilot Programs – January, 2023

[Evaluation of the Jail Mental Health Pilot Programs – January 10, 2023 \(virginia.gov\)](#)

Report on the Virginia Department of Criminal Services Jail Mental Health Pilot Programs – December, 2021. [Evaluation of the Jail Mental Health Pilot Programs – December 20, 2021 \(virginia.gov\)](#)

Report on the Virginia Department of Criminal Services Jail Mental Health Pilot Programs – December, 2020

<https://rga.lis.virginia.gov/Published/2021/RD68/PDF>

Report on the Virginia Department of Criminal Services Jail Mental Health Pilot Programs – October, 2019

<https://rga.lis.virginia.gov/Published/2019/RD528/PDF>

Report on the Virginia Department of Criminal Services Jail Mental Health Pilot Programs – October, 2018

<https://rga.lis.virginia.gov/Published/2018/RD390/PDF>

Additional Reporting

HB1918 (2019)/SB1598 (2019) Corrections, Board of; minimum standards for health care services in local correctional facilities

<https://lis.virginia.gov/cgi-bin/legp604.exe?ses=191&typ=bil&val=hb1918>

<https://lis.virginia.gov/cgi-bin/legp604.exe?ses=191&typ=bil&val=sb1598>

Office of the Inspector General “A Review of Mental Health Services in Local and Regional Jails-2014”

<https://www.osig.virginia.gov/media/governorvirginiagov/office-of-the-state-inspector-general/pdf/2014bhds004jailstudy.pdf>

University of Virginia Supplemental Reports

<https://uvamentalhealthpolicy.org/documents>

CIT Assessment Site Annual Report FY17

<http://dbhds.virginia.gov/assets/doc/forensic/fy17-cit-assessment-sites-annual-report.pdf>

Minimum Standards for Behavioral Health Services in Local and Regional Jails

<https://rga.lis.virginia.gov/Published/2020/RD137/PDF>

Estimated Costs of Meeting Minimum Standards for Mental and Behavioral Health Services in Virginia Jails – July 2021

<https://rga.lis.virginia.gov/Published/2021/RD292/PDF>

FY17 Jail Diversion Annual Report

<http://dbhds.virginia.gov/assets/doc/forensic/jail-diversion-annual-report-fy17.pdf>

Community Services Board 2017 Annual Report

<https://vacsb.org/wp-content/uploads/2018/04/VACSB-Annual-Report-Final-Version.pdf>

Joint Commission on Health Report on Healthcare in Jails and CSB Support

[http://jchc.virginia.gov/3.%20Quality%20of%20Health%20Care%20Services%20in%20Virg%20Jails.%20CSBs%20\(REVISED\)-1.pdf](http://jchc.virginia.gov/3.%20Quality%20of%20Health%20Care%20Services%20in%20Virg%20Jails.%20CSBs%20(REVISED)-1.pdf)

CGI 50 State Report on Public Safety

<https://50statespublicsafety.us/>

Code of Virginia and Acts of Assembly

Creation of the Behavioral Health Committee

<https://law.lis.virginia.gov/vacode/title30/chapter63/>

HB1933 (2019) Prisoners: medical and mental health treatment of those incapable of giving consent

<https://lis.virginia.gov/cgi-bin/legp604.exe?ses=191&typ=bil&val=hb1933>

HB1942 (2019) Behavioral health services; exchange of medical and mental health information and records

<https://lis.virginia.gov/cgi-bin/legp604.exe?ses=191&typ=bil&val=hb1942>

SB1644 (2019) Health information; sharing between community services boards and jails

<https://lis.virginia.gov/cgi-bin/legp604.exe?ses=191&typ=bil&val=sb1644>

Code of Virginia §19.2-169.6

<https://law.lis.virginia.gov/vacode/title19.2/chapter11/section19.2-169.2/>

Code of Virginia §37.2-809

<https://law.lis.virginia.gov/vacode/title37.2/chapter8/section37.2-809/>

2019 Virginia Acts of Assembly, Chapter 854

<https://budget.lis.virginia.gov/get/budget/3929/>

2021 Virginia Acts of Assembly, Chapter 1289

<https://budget.lis.virginia.gov/get/budget/4186/HB30/>

2023 Item 72P. Appropriation for Mental Health, Medical and Treatment Positions to Jails (SCB)

<https://budget.lis.virginia.gov/item/2023/2/HB6001/Chapter/1/72/>

Stakeholder Websites

Virginia Crisis Intervention Team Coalition

<https://virginiacit.org/>

Virginia Association of Community Services Boards

<https://vacsb.org/>

NAMI Virginia-National Alliances on Mental Illness in Virginia

<http://namivirginia.org/>