BOARD OF COUNTY COMMISSIONERS
SARPY COUNTY, NEBRASKA

RESOLUTION AUTHORIZING THE CHAIRMAN TO SIGN THE LETTER OF SUPPORT AND GRANT APPLICATION FOR THE CONTINUATION OF THE MENTAL HEALTH CASE MANAGEMENT PROGRAM

WHEREAS, pursuant to Neb. Rev. Stat. §23-104(6), the County has the power to do all acts in relation to the concerns of the County necessary to the exercise of its corporate powers; and,

WHEREAS, pursuant to Neb. Rev. Stat. §23-103, the powers of the County as a body are exercised by the County Board; and,

WHEREAS, a Justice Assistance Grant (JAG) is available through the Nebraska Crime Commission; and,

WHEREAS, Sarpy County is requesting funding to continue a Mental Health Intensive Case Management Program through Pretrial Release Services; and,

WHEREAS, Sarpy County is committed to and supports an Mental Health Intensive Case Management Program; and;

NOW, THEREFORE, BE IT RESOLVED, By the Sarpy County Board of Commissioners that the Sarpy County Chairman is hereby authorized to sign the JAG application, letter of support, and all other documents associated with the Mental Health Intensive Case Management Program grant application.

The above Resolution was approved by a vote of the Sarpy County Board of Commissioners at a public meeting duly held in accordance with applicable law on the 16th day of October, 2018.

Sarpy County Board Chairman

ATTEST:

Sarpy County Clerk
To: Sarpy County Board

From: Lisa A. Haire

Re: Mental Health Intensive Case Management Grant

On October 16, 2018, the County Board will be asked to authorize the Chairman to sign the grant application and letter of support for the Mental Health Intensive Case Management Program. This grant is a request for continuation funding.

Sarpy County is requesting $63,915 for continuation of the Intensive Mental Health Case Management Program. Funding request is for the salary of one FTE Pre-trial Services employee to manage case load. If approved, this will be the sixth year of funding for this grant.

There is no match required, however, in order to strengthen the grant application; the County will contribute the cost of benefits for the Case Manager.

Please contact Danielle Richler at (402) 593-4301 or myself with any questions or concerns.

October 12, 2018

cc: Dan Hoins
    Brian Hanson
    Scott Bovick
    Stu DeLaCastro
    Danielle Richler
    Deb Houghtaling

Lisa A. Haire
593-1565
lhaire@sarpy.com
October 16, 2018

Nebraska Crime Commission
301 Centennial Mall South
PO Box 94946
Lincoln, NE. 68508

The Sarpy County Board of Commissioners supports continuation funding for the Mental Health Intensive Case Management Program. There are significant challenges for individuals with untreated mental illness who are in custody or pending trial. Without intensive supervision, many clients re-offend, fail to appear in court, or continue to abuse alcohol and drugs.

With grant funding provided by the Nebraska Crime Commission, Sarpy County will continue to serve clients by providing intense supervision while offering services such as; referrals for treatment, help in locating free or reduced priced medications, organizing transportation to and from appointments, and providing assistance in locating jobs, housing, and education services.

The Sarpy County Mental Health Intensive Case Management Program is an important tool in assisting mentally ill persons involved in the criminal justice system by providing them with services to help establish independent living skills, manage their mental illness, successfully navigate through the court system, and reduce future contacts with the criminal justice system.

The Sarpy County Board of Commissioners fully supports this application and requests positive consideration from the Nebraska Crime Commission.

Sincerely,

Don Kelly
Chairman
Sarpy County Board of Commissioners
**NEBRASKA CRIME COMMISSION**  
**GRANT APPLICATION**  
Byrne/JAG  
FY2018

| **1. Applicant Name:**  
(Agency/Organization) | Name: Sarpy County  
Telephone (402) 593-1565  
Fax (402) 593-4303 |
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>The applicant must be the agency that will receive and disburse the grant funds.</td>
<td></td>
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</table>

| **2. Federal Employer ID # of Applicant:**  
The Federal Identification Number must be The nine digit number of the applicant. | 47-600-6504 |
|-----------------|------------------|

<table>
<thead>
<tr>
<th><strong>3. Applicant DUNS #:</strong></th>
<th>078008018</th>
</tr>
</thead>
</table>

| **3. Address:** | 1210 Golden Gate Drive  
Papillion, NE 68046-2839 (Please include last four digits of zip code) |
|-----------------|----------------------------------|

<table>
<thead>
<tr>
<th><strong>4. Project Title:</strong> Sarpy County Mental Health Intensive Case Management Program</th>
</tr>
</thead>
</table>

| **5. Project Director:**  
(Receives all grant correspondence) | Name: Lisa Haire  
Telephone(402)593-1565  
Fax (402)593-4303 |
<table>
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<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Email: <a href="mailto:lhaire@sarpy.com">lhaire@sarpy.com</a></td>
<td></td>
</tr>
</tbody>
</table>
| Address: 1210 Golden Gate Drive  
Papillion, NE 68046-2839 (Please include last four digits of zip code) |

| **6. Project Coordinator:**  
(Contact Person) | Name: Danielle Richler  
Telephone(402)593-4301  
Fax (402)593-2344 |
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>Email: <a href="mailto:drichler@sarpy.com">drichler@sarpy.com</a></td>
<td></td>
</tr>
</tbody>
</table>
| Address: 1210 Golden Gate Drive  
Papillion, NE 68046-2839 (Please include last four digits of zip code) |

| **7. Fiscal Officer:**  
(Cannot be Project Director) | Name: Brian Hanson  
Telephone(402)593-2349  
Fax (402)593-4303 |
<table>
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<tr>
<th></th>
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<tr>
<td>Email: <a href="mailto:bhanson@sarpy.com">bhanson@sarpy.com</a></td>
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</table>
| Address: 1210 Golden Gate Drive  
Papillion, NE 68046-2839 (Please include last four digits of zip code) |

| **8. Authorized Official:**  
(NOTE: The authorized official would include: county board chair, mayor, city administrator, state agency director, chair or vice-chair of non-Profit agency.) | Name: Don Kelly  
Telephone(402)593-4155  
Fax (402)593-4300 |
<table>
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<tr>
<th></th>
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<tbody>
<tr>
<td>Email: <a href="mailto:donkelly@sarpy.com">donkelly@sarpy.com</a></td>
<td></td>
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</tbody>
</table>
| Address: 1210 Golden Gate Drive  
Papillion, NE 68046-2839 (Please include last four digits of zip code) |

| **9. Proposed Project Period:** From: October 1, 2018 To: September 30, 2019 |
|-----------------------------|-----------------------------|


10. Previous 2-Years Commission Funding for This Project:

<table>
<thead>
<tr>
<th>Grant #:</th>
<th>Amount:</th>
<th>Area(s) Served by Project:</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-DA-0308</td>
<td>$60,442</td>
<td>All of Sarpy County, Nebraska including the cities of Bellevue, LaVista, Papillion, Springfield, Gretna and surrounding rural areas.</td>
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<tr>
<td>16-DA-0303</td>
<td>$57,028</td>
<td>All of Sarpy County, Nebraska including the cities of Bellevue, LaVista, Papillion, Springfield, Gretna and surrounding rural areas.</td>
</tr>
</tbody>
</table>

11. Area(s) Served by Project: All of Sarpy County, Nebraska including the cities of Bellevue, LaVista, Papillion, Springfield, Gretna and surrounding rural areas.

12. Type of Agency:

- [ ] State Agency
- [ ] Unit of Local Government
- [ ] Private Non-Profit
- [ ] Native American Tribe or Organization
- [ ] Technology
- [x] Other

13. If Awarded, These Funds Will:

- [ ] Create New Service/Activity
- [ ] Enhance Existing Program
- [x] Continue Existing Program
- [ ] Technology
- [ ] Other

14. Program Area

- [ ] Law Enforcement Programs
- [x] Prosecution and Court Program
- [ ] Prevention and Education Programs
- [x] Corrections and Community Corrections Programs
- [ ] Drug Treatment Programs
- [ ] Planning, Evaluation, and Technology Improvement Programs
- [ ] Crime Victim and Witness Programs (Other than compensation)
- [ ] Other

15. Sustainability Plan

Please submit a copy of your current SUSTAINABILITY PLAN

- [x] Sustainability Plan has been established

Timeframe: Established
16. **Project Summary: (150 words or less)**
In a concise statement describe major aspects of the proposed project, current use of evidence based and/or promising practices, and how your project fits into the 2016-2018 Nebraska State-wide Plan. 

The Sarpy County Mental Health Intensive Case Management Program assists some mentally ill persons involved in the criminal justice system by providing services designed to help them establish independent living skills, manage their mental illness, and reduce future contacts with the criminal justice system.

Crime attributed to untreated or undiagnosed mental illness is often rooted in complex social issues requiring a comprehensive and coordinated response. Mental Health Case Management offers a therapeutic approach to jurisprudence in which the courts use legal proceedings to promote outcomes that will improve the well-being of the accused and society as a whole.

Mental Health Case Management is based on the use of community corrections and problem solving court models. Problem solving courts are an alternative approach to handling criminal justice issues, focusing on offender treatment, victim restitution, and decreasing recidivism. The Sarpy County Mental Health Case Management program utilizes evidence based validated assessments to determine who is appropriate for the program.
NEBRASKA CRIME COMMISSION
BUDGET SUMMARY

<table>
<thead>
<tr>
<th>Category</th>
<th>Requested Amount</th>
<th>Match Share</th>
<th>Total Project Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Personnel</td>
<td>$63,915</td>
<td>$24,572</td>
<td>$88,487</td>
</tr>
<tr>
<td>B. Consultants/Contracts</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>C. Travel</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>D. Supplies/Operating Expenses</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>E. Equipment</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>F. Other Costs</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL AMOUNT</td>
<td>$63,915</td>
<td>$24,572</td>
<td>$88,487</td>
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% Contribution                  | 72%              | 28%         | 100%               |

CERTIFICATION: I hereby certify the information in this application is accurate and, as the authorized official for the project, hereby agree to comply with all provisions of the grant program and all other applicable state and federal laws.

Name of Authorized Official: Don Kelly
Title: County Board Chairman
Address: 1210 Golden Gate Drive
City, State, Zip: Papillion, NE 68046-2844
Telephone: 402-593-4155
Signature: [Signature]
Date: October 16, 2018

(* NOTE: The authorized official would include: county board chair, mayor, city administrator, state agency director, chair or vice-chair of non-profit agency.)

Proposed Project Period (month/day/year):
From October 1, 2018 To September 30, 2019
Personnel Budget Narrative- Job Descriptions must be submitted for each personnel position requested * All sources of match must be identified:

Funding is being requested for the salary and partial benefits for one Full-time Case Manager to continue providing comprehensive needs support to participants in the Sarpy County Mental Health Intensive Case Management Program. This person will be responsible for providing intensive case management services for clients including assistance with receiving appropriate mental health/substance abuse treatment, applying for benefits, establishing housing and entering education or job placement programs. Additionally, the Case Manager will help to organize participant transportation to and from appointments as needed. Please see the attached Job Description. The Case Manager works 100% of the time in the Mental Health Case Management Program.

<table>
<thead>
<tr>
<th>Regular Salary</th>
<th>$55,870</th>
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<tbody>
<tr>
<td>Retirement</td>
<td>$ 3,771</td>
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<tr>
<td>Social Security</td>
<td>$ 4,274</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$63,915</strong></td>
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TOTAL REQUEST = One Case Manager at $63,915

Sarpy County will contribute $24,572 of the Case Manager’s benefits as matching personnel funds. Salary and Benefits details provided on the Budget Narrative page.

**TOTAL MATCH=** $24,572
<table>
<thead>
<tr>
<th>Position</th>
<th>*N Or *E</th>
<th>Current Annual Salary</th>
<th>% Time Devoted</th>
<th>Amount Requested</th>
<th>Match</th>
<th>Subtotal</th>
<th>Requested Fringe</th>
<th>Match Fringe</th>
<th>TOTAL COSTS</th>
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<tbody>
<tr>
<td>1 FTE Case Manager</td>
<td>E</td>
<td>$55,870</td>
<td>100%</td>
<td>$55,870</td>
<td>$0</td>
<td>$55,870</td>
<td>$8,045</td>
<td>$24,572</td>
<td>$88,487</td>
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<tr>
<td>Total Personnel Budget</td>
<td></td>
<td>$55,870</td>
<td></td>
<td>$55,870</td>
<td>$0</td>
<td>$55,870</td>
<td>$8,045</td>
<td>$24,572</td>
<td>$88,487</td>
</tr>
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*N for New; E for Existing
### ATTACH BUDGET NARRATIVE

#### Salary Schedule 10/1/18-9/30/19

<table>
<thead>
<tr>
<th>Name</th>
<th>Class Date</th>
<th>Gr</th>
<th>Stt</th>
<th>Hrly Rate</th>
<th>PPH</th>
<th>Subtotal</th>
<th>Stt</th>
<th>Hrly Rate</th>
<th>PPH</th>
<th>Subtotal</th>
<th>Stt</th>
<th>Hrly Rate</th>
<th>PPH</th>
<th>Subtotal</th>
<th>Total Salary</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 FTE Case Manager</td>
<td>1/21/2019</td>
<td>5</td>
<td></td>
<td>$ 26,040</td>
<td>640</td>
<td>$ 16,666</td>
<td></td>
<td>$ 27,030</td>
<td>920</td>
<td>$ 24,868</td>
<td></td>
<td>$ 27,570</td>
<td>520</td>
<td>$ 14,336</td>
<td>$ 55,870</td>
</tr>
</tbody>
</table>

**Total Regular Time Salary**

|                    |             |     |     |          |     |          |     |          |     |          |     |          |     |          | $ 55,870     |
|-------------------|-------------|-----|-----|----------|-----|----------|-----|----------|-----|----------|-----|----------|-----|----------|
| Retirement        | 6.75%       |     |     |          |     |          |     |          |     |          |     |          |     |          | $ 3,771      |
| Social Security   | 7.65%       |     |     |          |     |          |     |          |     |          |     |          |     |          | $ 4,274      |

**Total**

|                      |             |     |     |          |     |          |     |          |     |          |     |          |     |          | $ 63,915     |

#### Benefits

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Monthly</th>
<th># months</th>
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</thead>
<tbody>
<tr>
<td>Health Insurance Fam Oct-Dec, 2018</td>
<td>$ 1,818.61</td>
<td>3</td>
<td>$ 5,456</td>
</tr>
<tr>
<td>Health Insurance Fam Jan-Sep, 2019</td>
<td>$ 2,000.47</td>
<td>9</td>
<td>$ 18,004</td>
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<td>Dental Fam Oct 2018-Dec 2018</td>
<td>$ 61.76</td>
<td>3</td>
<td>$ 185</td>
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<tr>
<td>Dental Fam Jan 2019-Sep 2019</td>
<td>$ 64.85</td>
<td>9</td>
<td>$ 584</td>
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<tr>
<td>Life &amp; AD&amp;D</td>
<td>$ 5.10</td>
<td>12</td>
<td>$ 61</td>
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<tr>
<td>LTD .505% annual salary</td>
<td>$ 23.51</td>
<td>12</td>
<td>$ 282</td>
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**Total Insurance Benefits - Match**

|                   | $ 24,572 |

<table>
<thead>
<tr>
<th>% of Total</th>
<th>Grand Total</th>
<th>$ 88,487</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Salary, Retirement, Soc. Security</td>
<td>$ 63,915</td>
<td>72%</td>
</tr>
<tr>
<td>Total Insurance Benefits</td>
<td>$ 24,572</td>
<td>28%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>$ 88,487</td>
<td></td>
</tr>
</tbody>
</table>
**Sustainability:**

1.

Sarpy County is the fastest growing county in Nebraska with a population of 181,439. Sarpy County is located just south of the City of Omaha and is home of Bellevue, Gretna, La Vista, Papillion, and Springfield. Sarpy County is also home of Offutt Air Force Base. Sarpy County has the third largest population in the state of Nebraska behind Omaha and Lincoln.

The powers of the County as a political body are carried out by the County Board of Commissioners. The Sarpy County Board of Commissioners is an elected panel of five Officials representing the five districts of the County. The County Board oversees all County funds and County business, manages all County roads and right-of-ways, examines all accounts, receipts, and expenditures, created the Planning Commission to make, adopt, amend, extend, and implement the Comprehensive Development Plan and adopted the zoning rules and regulations, levies and collects taxes, provides suitable courthouse, jail, and other necessary County buildings, and has the power to sell, convey, exchange, or lease any real or personal estate owned by the County and is involved in all County real estate transactions.

The Sarpy County Vision Statement is to improve the quality of life in Sarpy County by providing responsive, efficient, and high quality public services that promote the self-sufficiency, well-being, and prosperity of individuals, families, businesses, and communities. The philosophy of teamwork and collaboration is anchored in the shared values of: Accountability, Professionalism, Responsiveness, Family Values, Integrity, Compassion, Commitment, and Respect for Diversity. The County Board meets every Tuesday to hear, vote on, and approve resolutions on expenditures and County related business such as: contracts, agreements, grant requests, and planning. The County Board has oversight for all County business and the Chairman of the Board is the Authorized Official for the County and has signing authority upon Board approval for all County documents.

Sarpy County employs over 600 active employees. The Sarpy County Campus includes the Courthouse Building, Administration Building, two separate Annex Buildings, the Sarpy County Law Enforcement Center, the Sarpy County Sheriff’s Office, Sarpy County Juvenile Justice Center, Sarpy County Jury and Election Offices, and the Public Works Offices.

The Criminal Justice side of Sarpy County’s services include: County and District Court, County Attorney and Child Support Enforcement, Public Defender, Sarpy County Sheriff’s Office, Sarpy County Jail Administration, Sarpy County Adult and Juvenile Diversion, Sarpy County Adult Community Corrections (formally Pre-Trial Release Services), Sarpy County Juvenile Justice Center and Reporting Center, Sarpy County Victim Witness Unit, Sarpy County CASA Program, Juvenile and Adult Community Services, Sarpy County Adult and Juvenile Drug Treatment Courts, and Sarpy County Human Services. In addition, Sarpy County is the seat for District #2 State Juvenile and Adult Probation.

The Criminal Justice Coordinating Committee (CJCC) is a large group of Sarpy County Justice Representatives who meet quarterly to discuss Sarpy County’s criminal justice problems, current trends, future justice needs, juvenile issues, adult issues, impacts of new legislation, and funding issues/opportunities. At every meeting, sub-committee updates are given and several agenda items are discussed. The Committee includes: Sarpy County Sheriff’s Office, Public Defender, Sarpy County Attorney’s Office, Sarpy County Juvenile Court Judges, Sarpy County District and County Court Judges, Sarpy County CASA, District and County Court Clerks, Community Corrections,
Community Services, District #2 Probation, Sarpy County Fiscal Administration, Sarpy County Administration, Sarpy County Commissioner, Sarpy County Information Services, Region 6, Sarpy Human Services, Sarpy County Jury Commissioner, Sarpy County Diversion Services, Sarpy County Juvenile Justice Center, Bellevue Police Department, Papillion Police Department, and LaVista Police Department.

2. Long-term sustainability plan.
Sarpy County became concerned with the increase of people coming into contact with the criminal justice system who were exhibiting mental health issues. The Criminal Justice Coordinating Committee (CJCC) began looking at ways to assist these individuals and researched programs that would adequately serve people suffering with mental health issues and/or co-occurring substance abuse problems. A Mental Health Sub-Committee was formed and began to identify funding opportunities in order to begin a Mental Health Case Management Program.

In addition to applying for and being awarded funding through the JAG grant, Sarpy County and the Sarpy County Mental Health Intensive Case Management Program have accomplished the following:

- Regular presentations to the Criminal Justice Coordinating Committee (CJCC) and the County Board of Corrections.
- Case Manager continued to serve clients in the Program. Current case load is 32 clients.
- Held monthly meetings with Mental Health Diversion to develop a continuum of care and allow eligible clients to have their cases diverted in order to avoid a criminal conviction.
- Collaborated with Mental Health Diversion to provide MHCM clients an opportunity to meet with the Case Manager at the Mental Health Diversion office.
- Conducted approximately ten training/networking events with area providers to learn about services provided and how to access those services.
- Continued working with neighboring Douglas County and Metro Community College to implement a re-entry program that will provide educational services and job training to clients in community based programs as well as currently incarcerated individuals. As a result of these efforts, a GED program was implemented in the Sarpy County jail.
- Transportation program to provide services to clients in the court system in minimal situations.
- County Commissioner Carlisle visited California to examine their unique hospital care facility for the mentally ill.
- The Director and Mental Health Diversion Manager visited the new inpatient psychiatric hospital in Fremont, NE to explore a possible partnership for service delivery.
- The Case Manager visited Campus for Hope with Mental Health Diversion Manager, Judge Wester and other Sarpy County Employees working with Mental Health and Substance Abuse populations. Campus for Hope staff discussed services available and how to refer clients to services. A tour of the facility also occurred.
- Members of law enforcement, attorneys, the Director of Community Corrections, and staff from the Bellevue Medical Center met to discuss the EPC process and how it can be improved.
- Sarpy County conducted a criminal justice system wide evaluation done by Mark
Martin.

- Organized a subcommittee, chaired by the Director of Community Corrections was formed to prioritize and implement the recommendations of the study.
- The Director participated in the Sarpy County Transit Feasibility Study, which was completed in early 2017.
- The Director and the Sheriff’s office worked with Douglas County to get a contract in place to allow Sarpy County to utilize Douglas County’s Re-entry Assistance Program (RAP). The contract was finalized November 2017.
- Meetings were held with Lutheran Family Services and Centerpointe to as a step to implement programming for substance abuse and mental health within the County jail.
- The Community Corrections office moved, allowing for a more private setting for meeting with clients.
- The Director attended the NAPSA conference, which included breakout sessions on mental health.
- The Case Manager attended a seminar on transgender needs and how to appropriately work with clients that identify as transgender.
- Sarpy County Pretrial Release Services was renamed Sarpy County Community Corrections.
- The Case Manager attended a seminar on transgender needs and how to appropriately work with clients that identify as transgender.
- Community Corrections began sending reminder text messages to clients for upcoming court dates.
- A criminal justice/behavioral health group was formed with Region 6 and Sarpy County representatives to identify gaps and reduce the number of inmates with mental health issues in the jail.
- A Mental Health Leadership team was formed by Sarpy County Administrator Dan Hoins, comprised of members of law enforcement, Administration, the County Board and the County Attorney’s Office.
- Members from the County Board, Administration, Community Corrections, Law Enforcement, the County Attorney’s Office and Douglas County Mental Health travelled to San Antonio, TX to learn about their unique model for providing services to those with mental illness.
- Meetings were held with Douglas County representatives to discuss the potential for collaboration in offering services to those with mental illness.
- Sarpy County representatives observed the Douglas County Sequential Intercept Mapping (SIM) process in November, 2017. Sarpy County conducted its own SIM, along with Cass County, in August, 2018.
- Sarpy County Pretrial and Community Services became “Community Corrections” and incorporated House Arrest and Work Release to offer pre-screenings and a continuum of care for sentenced individuals.
  - The Director conducted presentations for both the County Attorney’s and the Public Defender’s Offices to explain the programs offered under Community Corrections.
- The Director served on the Re-Entry Court Planning Team. The first Re-Entry Court client was accepted into the program on August 1, 2018.
- The Director was asked to serve as a regional representative for the National Association of Pretrial Services Agencies Communication Committee.
3. Discuss the contingency plan should the project not receive funds.

Project evaluation will include a study of the cost savings aspect of a Mental Health Intensive Case Management program. This will help create documentation that continuing the program will result in a cost savings in terms of incarceration, law enforcement, and court costs that will support the redirection of resources into providing more appropriate service delivery for this population. The sustainability plan is to demonstrate the cost savings in order to establish on-going support from county and local government sources. Grant funding will be crucial in allowing the time necessary to definitively establish both the program’s positive outcomes to create a persuasive case for on-going and additional government funding of the program.

In the event that funding is not received, Sarpy County will request that the Budget Committee reconsider and approve the use of County funds to help sustain the Program. Sarpy County has successfully sustained programs which were initially awarded with start-up funding from the Nebraska Crime Commission. Some of these programs include: Sarpy County Juvenile Reporting Center, The CARE Program, and the Juvenile Justice Assessment Center.

Sarpy County has a proven record of working to implement change in the criminal justice system. Sarpy County underwent a comprehensive Justice System study which was conducted by Karen Chinn to help officials plan for future needs. One of the recommendations from the study conducted in 2004, as well as the updated study in 2013, was to expand Pretrial Release and Supervision Services to assist the jail with over-crowding due to incarcerating non-violent offenders and those that could be released under supervision if there were intensive programs available. Sarpy County’s jail population has increased and county resources need to be redirected toward more community based corrections programs such as Mental Health Case Management and other community based correctional programs.

The Sarpy County Attorney’s Office has implemented a Mental Health Diversion Program and hired a Mental Health attorney, who works closely with the Case Management Program through Community Corrections Services. County resources are also being utilized for a FT Mental Health Diversion Officer. Sarpy County Diversion and Community Corrections work together to assist individuals with mental health issues who have come into contact with the justice system. Some cases are diverted through the County Attorney’s office when deemed appropriate, allowing individuals an opportunity to by-pass court, working directly with Diversion to have their charges dismissed upon successful completion of the Mental Health Diversion Program.

Additionally, in June 2015, the Sarpy County Board of Commissioners approved the Stepping Up Initiative Resolution which was introduced by NACo (National Association of County Officials) in conjunction with the Council of State Governments (CSG) Justice Center, the American Psychiatric
Foundation (ASF), and the U.S. Justice Department’s Bureau of Justice Assistance. The goal of this Initiative is to support counties of all sizes in reducing the number of people with mental illnesses in jails. As a part of the Call to Action for the Stepping Up Initiative, NACo and the partners called on counties to pass a resolution in support of the reduction of people with mental illnesses in jails. Sarpy County fully supports this Initiative and has been proactive with regard to the reduction of people with mental illness in jail through the implementation of the Mental Health Case Management Program through Community Corrections and Mental Health Diversion services.

**Problem Statement:**

1. **Problem Statement:**
   The problem to be addressed by this grant application is: The Sarpy County criminal justice system has seen significant challenges resulting from individuals with mental illness. Incarcerated individuals in crisis as a result of untreated mental illness pose a substantial risk not only to themselves, but to other inmates and county jail personnel. Defendants with untreated mental illness that are released from custody pending trial pose a risk to the community and face challenges appearing in court and participating in the judicial process.

2. **Description of the Problem:**
   Sarpy County is requesting continuation grant funding for the Mental Health Intensive Case Management Program. This program assists some mentally ill persons involved in the criminal justice system by providing intensive case management services designed to help establish independent living skills, manage their mental illness, and reduce their future contacts with the criminal justice system.

   County jails throughout the country have become de facto mental institutions. People with mental illnesses are nine (9) times more likely to be incarcerated than hospitalized, eighteen (18) times more likely to find a bed in the criminal justice system than at a hospital. Annually, two million people with severe and persistent mental illness (SPMI) are arrested. Forty percent (40%) of all people with SPMI will come into contact with the criminal justice system at some point in their life. In a 2011 Substance Abuse and Mental Health Services Administration (SAMHSA) report, an estimated 14% of men and 24% of women in jails have a serious mental illness (SMI) such as bipolar disorder or schizophrenia. Treatment for SMI in incarcerated settings is both costly and challenging...people with mental illness may remain incarcerated longer than those without mental illness (https://www.samhsa.gov/criminal-juvenile-justice).

   Furthermore, a 2015 study from the Urban Institute cautions that mentally ill inmates who are typically jailed for trivial offenses such as trespassing, disorderly conduct, or drug use, tend to stay in jail longer than non-impaired inmates, recidivate, and return to jail more frequently, and cost local jurisdictions more to incarcerate. In a comprehensive national survey, conducted by Public Citizen and the Treatment Advocacy Center, found that 95.7% of the jails reported having some inmates with serious mental illnesses while 21.3% of all jails reported that 16% or more of their inmate population were seriously mentally ill. Three-quarters of the jails reported seeing more numbers of seriously mentally ill inmates compared to ten years ago, and one third of the jails described the recidivism rate for these inmates as higher than that of the general inmate population (www.treatmentadvocacycenter.org).

   Stress of incarceration can exacerbate symptoms and lead to mental health crises, requiring intervention measures.
A 2015 study from the Urban Institute cautions that mentally ill inmates, who are typically jailed for trivial offenses such as trespassing, disorderly conduct, or drug use, tend to stay in jail longer than non-impaired inmates, recidivate, and return to jail more frequently, and cost local jurisdiction more to incarcerate (http://www.slate.com/articles/news_and_politics/jurisprudence/2016/01/prisons_have_become_warehouses_for_the_mentally_ill.html).

The extra time and attention required by persons with mental illness in the justice system can be very costly and can interfere with a person’s ability to meet obligations to the courts or to corrections programs which result in re-arrest and violations of probation, parole, or other court orders.

These problems are apparent locally as Sarpy County continues to experience an increase of people with mental illness coming into contact with the justice system. In 2013, there were a total of 5,081 people booked into County Jail and 576 of those (11%) were treated in the Jail for some sort of mental illness. In 2014, 26 inmates were placed on Level 1 Behavioral Watch and 83 inmates were placed on Level 2 Behavioral Watch. During 2015, 28 inmates were placed on Level 1 Behavioral watch and 70 were placed on Level 2. Of the inmates booked into the Sarpy County jail with mental illness in 2015, 136 had multiple bookings. Level 1 indicates immediate danger to themselves and Level 2 indicates mental health concerns and potential self-harm issues exist. The Sarpy County Jail medical department stopped keeping track of Level 2 watches in 2016. No Level 1 data was available for 2016. In 2017, there were 26 Level 1 watches (suicide watches). Level 1 watch categories have been replaced with suicide watch.

Data and results from the Brief Jail Mental Health Screen consistently indicate a high number of people booked into the Sarpy County Jail who have, or are at risk of having, a mental health or co-occurring substance use disorder. A large majority of these individuals are charged with non-violent misdemeanor offenses. Data from the Sarpy County Jail shows that during February, 2018, the Jail had an Average Daily Population (ADP) of 160 inmates. Of the 160 inmates, 51 were diagnosed with a Mental Health Disorder (MHD), 81 with a co-occurring disorder (mental health and substance abuse), 101 were prescribed psychotropic medications, and two (2) were placed on suicide watch. In March, 2018, the Sarpy County Jail had an Average Daily Population (ADP) of 172 inmates. Of the 172 inmates, 51 were diagnosed with a mental health disorder (MHD) and 86 were diagnosed with a co-occurring disorder. There were 98 inmates prescribed psychotropic medications and five (5) inmates placed on suicide watch. Of those inmates with either a mental health disorder or co-occurring disorder in February 2018, 32 were booked into jail with misdemeanor charges. In March 2018, 30 inmates were booked into jail with misdemeanor charges.

Prior to being awarded JAG funding, there were no services or resources in Sarpy County to give clients the significant amount of attention they require in order to help them become stable and keep them from recidivating. In order to address problems associated with incarcerating people with mental health issues, Sarpy County applied for the JAG grant funding to begin the Intensive Mental Health Case Management Program and was awarded funding in November, 2013. In the initial stage of the Program, the Director of Community Corrections worked with the staff of the Sarpy County jail to implement a validated assessment tool that could be used at the time of booking to identify inmates with mental health issues. In January 2014, the jail began administering the Brief Jail Mental Health Screening tool (BJMHS). The BJMHS is administered to all inmates booked into the Sarpy County jail. Inmates answering yes to certain questions, or a
combination of questions, are referred to Community Corrections for further assessment by the LMHP and possible referral into the Mental Health Case Management Program.

In 2017, 1,309 BJMHS’s were completed; 523 indicated some form of mental illness. Twenty inmates were seen by the LMHP for further assessment. Identifying inmates with mental illness at the time of booking has been crucial not only in identifying potential MHCM clients, but in connecting inmates with mental health providers in custody. In 2016, 751 individual therapy sessions occurred and there were 743 follow up contacts based on the BJMHS results. There 724 inmates seen by the psychiatrist in 2016. In 2017, 897 inmates were seen by the LMHP (331 initial therapy sessions and 420 follow up visits) and 756 inmates were seen by the APRN (302 initial contacts and 454 follow up sessions). Sarpy County Corrections, in conjunction with Community Corrections and Mental Health Diversion, continue to research other available validated tools and surveys in order to capture more data, such as gender specific information, homelessness, and military service. Sarpy County Community Corrections will work with Dr. Weiner and the Nebraska Crime Commission to ensure that any tools implemented are reliable and validated.

The Pretrial (Community Corrections) Mental Health Case Management Program accepted its first clients in February 2014. As of December 2017, the program has been assigned 238 clients. The clients who participate in the program benefit from assistance with addressing mental health and substance abuse issues while navigating the court system. Each client assigned to the Mental Health Case Management program has overcome obstacles in regards to their mental health and substance abuse struggles. There have been triumphs and sets backs with each client assigned, however, there is one client recently who would not have been able to make the progress she made if the Mental Health Case Management Program was not been in place.

This client was booked into the Sarpy County jail on March 15, 2017 for Possess or use of Drug Paraphernalia, Possession of controlled substance and two other offenses that were not filed. The client was referred for further mental health evaluation through the Brief Jail Mental Health Screening on March 15, 2017. The client was screened for Community Corrections on March 17, 2017, however she declined to be screened for the Mental Health Case Management program. This client was placed on Pretrial Community Corrections with GPS monitoring and a curfew. The client struggled with remaining compliant. She had several curfew violations, no shows to drug testing and positive drug tests. A bond review occurred on April 24, 2017 and the client’s bond remained as set. A second bond review occurred on June 12, 2017, at which time the client’s bond was increased to $20,000/10%. The legal parties requested the client be screened for the Mental Health Case Management program.

The Further Mental Health Assessment was completed to determine the client’s appropriateness for the Mental Health Case Management program. Through the interview process, the client reported never receiving mental health services, being prescribed psychotropic medications, or receiving a mental disorder diagnosis, however the client reported, “I need help… I want help.” The client reported in the assessment she suffers from a depressed mood and anxiety and to cope with symptoms, she uses methamphetamine. The client also reported, that although she is not diagnosed, she describes herself as having PTSD. She stated the last two years of her life have been especially difficult with her father passing away in 2015 and then being a victim of a significant assault in 2016. The client reports she does not recall having any difficulties with her mental health prior to 2015. The client denied having ever attempted suicide but stated she regularly has passive suicidal ideation which is worse when under the influence of methamphetamine. The client met the criteria for the Mental Health Case Management Program.
It was apparent during the evaluation process that jail was not an appropriate place for this client and her mental health needs could be better addressed through the Mental Health Case Management program.

The client was placed on Mental Health Case Management on June 12, 2017. A bond review was scheduled on June 22, 2017 due to the client securing a treatment bed at InRoads to Recovery. The client’s bond was amended to allow for her to participate in treatment. The client was released on a treatment bond and with the condition she be released with GPS monitoring to participate in treatment at Inroads to Recovery. If the client were to leave treatment or be discharged, she was to return to the Sarpy County Jail.

The client completed treatment at InRoads to Recovery on July 26, 2017. The original discharge plan was for the client to participate in Intensive Outpatient Treatment and reside with her mother. In previous court hearings, the client’s mother had discussed with the Judge and legal parties the client’s struggles while living in her home. These concerns led the Judge to request the client seek out a sober living environment such as an Oxford House. The client secured housing at the Meadowview Oxford House and was allowed by the Judge to move in on July 26, 2017.

After completing treatment, the client started drug testing with the Sarpy County Community Corrections (formally Pretrial Release). The client submitted to 15 random drug and alcohol tests while placed on Mental Health Case Management. The client was negative for 14 of the 15 random tests. The 15th drug and alcohol test was initially positive for methamphetamine, however was returned as negative for methamphetamine by the State of Nebraska Drug testing lab.

The client’s discharge plan included participation in Intensive Outpatient Program (IOP) treatment. The client started IOP on July 31, 2017. The client completed 11 group sessions of the 18 group sessions the program consists of and two individual therapy sessions of the six required. The client was also participated in AA meetings regularly while participating in Mental Health Case Management and provided proof of attendance to the Case Manager. In addition to participating IOP, the discharge plan included the client participating in medication management, which the client agreed to participate in at Inroads to Recovery. The client was discharged with 30 days’ worth of medication and refills on July 26, 2017.

The client was diligent about meeting with the Case Manager on a weekly basis. In total the client met with the Case Manager on nine occasions. The frequent meetings allowed for the Case Manager to ensure the client was seeking out the appropriate services and to make certain the client’s mental health and substance abuse needs were being met. The client regularly sought out the Case Manager via phone frequently to discuss additional concerns. The client secured employment quickly after completing inpatient treatment at Inroads to Recovery. The client was working overnight/early morning hours at McDonald’s. The client was able to pay for her Oxford Housing fees and rent. The client’s employment, IOP treatment, Oxford House and AA home meetings were all within walking distance, which greatly helped the client as she struggled with securing transportation at times.

On September 22, 2017, the client entered a plea to Attempted Possession of a controlled substance. During the month of September the client began to struggle with following the Oxford House rules and on September 24, 2017, the client was put on a behavioral contract at the Meadowview Oxford House. The behavioral contract was put in place due to the client not working the required 32 hours a week, taking more overnights than approved, not going to all three IOP sessions a week and not attending three or more AA meetings a week. On September 24, 2017
the client refused to sign the behavioral contract. Due to her not signing the behavioral contract, the client was considered evicted from the Oxford House and in violation of her amended conditions of release set on July 26, 2017. The client was encouraged by the Case Manager to seek out a different Oxford House however the client reported she would be staying at her mother’s house. The client was given a curfew of 11 PM to 6 AM while staying at her mother’s house. The client failed to stay at her mother’s house on September 24, 2017 and September 25, 2017.

On September 26, 2017, the Judge and legal parties were informed of the client’s violations of the Order Setting Conditions of Release. The Case Manager provided a bond review report. The Judge issue a capias for the client’s arrest. The client was encouraged to turn herself in but was arrested on the warrant on October 4, 2017. The client was sentenced to two years of Probation on October 27, 2017; she was placed on the Specialize Substance Abuse Supervision program within Probation with specific conditions for the client to live in Oxford Housing. Prior to the client’s sentencing, the Case Manager and the Judge discussed what the best plan of action would be for the client in regards to sentencing. The Judge mentioned to the Case Manager that due to the client’s behavior prior to sentencing it would seem appropriate to sentence the client to jail. However, the Judge stated that knowing the client suffers from mental health concerns and she was placed on the Mental Health Case Management program for a reason, she did not believe jail would be the most appropriate action plan for the client.

The client completed 137 days on the Mental Health Case Management program. The client was considered to have successfully completed the program. The client was able to maintain sobriety after completing inpatient treatment, she participated in the recommended level of care after discharge from inpatient treatment, she participated in medication management which helped to maintain stable mental health and she maintained employment until her arrest. After the client’s sentencing, the client was offered aftercare follow up by the Case Manager. The client actively engaged in the follow up provided by the Case Manager and often sought the Case Manager out when she would come to the Probation office or after submitting to drug tests. This particular client is an exceptional example of Sarpy County providing a client with wrap around services through grant funding and community resources to adequately meet her mental health and substance abuse needs so she could become a productive member of society.

It is the intention of the Sarpy County Community Corrections Program to continue to provide assistance and support for clients in similar situations, thus promoting public safety and client well-being. This client has proven that with adequate assistance and continuous monitoring, people with mental health issues can stop the cycle of recidivism, maintain sobriety, and work toward a healthy future.
3. Statistical Documentation of the Problem:

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</tr>
</thead>
<tbody>
<tr>
<td>Number of persons that were seen by the Counselor while incarcerated</td>
<td>631</td>
<td>917</td>
<td>807</td>
<td>553</td>
<td>464</td>
<td>982</td>
<td>1,635</td>
<td>1,984</td>
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<tr>
<td>Number of individuals placed on suicide watch in the County Jail</td>
<td>18</td>
<td>34</td>
<td>27</td>
<td>32</td>
<td>26</td>
<td>28</td>
<td>--</td>
<td>26</td>
<td>+44%</td>
</tr>
<tr>
<td>Number of inmates reporting current mental health issues on intake survey</td>
<td>141</td>
<td>196</td>
<td>271</td>
<td>259</td>
<td>341</td>
<td>321</td>
<td>351</td>
<td>517</td>
<td>+266%</td>
</tr>
<tr>
<td>Percentage of persons on Community Corrections charged with substance abuse related crimes</td>
<td>36%</td>
<td>51%</td>
<td>53%</td>
<td>45%</td>
<td>49%</td>
<td>46%</td>
<td>46%</td>
<td>40%</td>
<td>+4%</td>
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<tr>
<td>Total number of persons served by the Mental Health Case Management Program</td>
<td>NA*</td>
<td>NA*</td>
<td>NA*</td>
<td>NA*</td>
<td>57</td>
<td>88</td>
<td>81</td>
<td>77</td>
<td>+35%</td>
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<tr>
<td>Total number of persons placed on Community Corrections</td>
<td>134</td>
<td>255</td>
<td>333</td>
<td>374</td>
<td>368</td>
<td>330</td>
<td>443</td>
<td>489</td>
<td>+264%</td>
</tr>
</tbody>
</table>

*First clients accepted February 2014. Data from Sarpy County Community Corrections and Jail Data Base System*

- The number of people seen by the Counselor while incarcerated increased 214% from 2010 – 2017.
- Community Corrections (Pretrial Release Services) has experienced a 264% increase from 2010 – 2017 as a way to establish Alternatives to Incarceration (ATI) programs and community correctional services that pair sanctions with therapeutic services, helping to alleviate jail overcrowding issues.
- The percentage of people placed on Community Corrections charged with substance abuse related crimes has increased 27.7% between 2010 and 2016.
- The number of inmates reporting current mental health issues on intake survey increased 266%.
- The number of persons placed on the Mental Health Case Management Program has increased 35% from 2014 to 2017 *(MHCM became operational in January 2014).*
- ***It should be noted that the Counselor was not available in the jail in January/Feb 2014.***
- **The Jail discontinued the Level 1 and Level 2 watch categories in 2016 with Suicide Watch In 2017, there were 26 inmates on Suicide Watch.**
Current Efforts:

Nebraska Legislative Bill (L.B. 1083), Nebraska Behavioral Health Services Act, passed in 2004, has ushered in a period of mental health reform across the state. L.B. 1083 addresses the lack of community based mental health treatment infrastructure in Nebraska. As a result, stakeholders in Sarpy County have worked to establish a continuum of services that address the needs of the community’s mentally ill.

Beginning in late 2011, the Sarpy County Criminal Justice Committee (CJCC) began discussions on the mental health issues in the County Jail and how to alleviate problems associated mentally ill persons who are incarcerated. In March 2013, the CJCC voted to form a sub-committee in order to specifically address the ongoing problems associated with mentally ill individuals coming into contact with the justice system. This sub-committee meets quarterly, working toward the goal of establishing alternatives to incarceration (ATI) programs and community correctional services that pair sanctions with therapeutic services. Discussions in meetings center around a common theme of getting people with mental illness the help they need to avoid future contacts with the justice system and alleviate over-crowding in the County Jail with non-violent offenders.

The County Attorney’s Office has implemented a Mental Health Diversion program. Community Corrections and Mental Health Diversion conduct regular meetings to determine if Case Management clients may be eligible for Diversion at some point. The sub-committee has offered training/networking events to county employees at which providers from the community presented on the services and how to access these services. Numerous meetings have occurred between CJCC members and various providers in the area to learn about available services and how to access them.

Nebraska Legislative Bill 605 passed in 2015, changing the way criminal cases are adjudicated. In addition to reclassifying numerous offenses, LB 605 mandated that all defendants sentenced to a period of incarceration for one year or less serve their sentences in the County jail, as opposed to the Department of Corrections. This legislation placed an additional burden on already overcrowded County jails. Programs like the Sarpy County Community Corrections Program and Mental Health Case Management are essential in assisting jails in relieving overcrowding and maintaining compliance with Nebraska Jail Standards.

Sarpy County has a contract with Heartland Family Services, ASAP program to provide onsite assessments for inmates in mental health crisis. In 2015, ASAP staff responded to the jail on 101 occasions (up from 67 in 2014) to offer assessments on inmates in crisis; three inmates were put in emergency protective custody (EPC) as a result. In 2016, ASAP conducted 84 face to face interventions (1 resulted in an EPC) at the Sarpy County Jail, and in 2017, there were 79 interventions with 1 resulting in an EPC All of these new interventions, along with the Mental Case Management Program, help to create a continuum of services designed to improve outcomes for those mentally ill individuals who enter the criminal justice system in Sarpy County.

The Stepping Up Initiative was passed by the Sarpy County Board of Commissioners in June 2015. The goal of this Initiative is to reduce the number of persons with mental health issues in jails across the country. The Stepping Up Initiative is a partnership between county governments, state governments, the Bureau of Justice Assistance, and the American Psychiatric Foundation (AFP). Additionally, during 2014-2015, County officials and department’s began to partner more with Region 6 to assist mentally ill persons with services. Sarpy County applied to attend the Stepping
Up Initiative Conference in 2016. Although our application was not accepted, Sarpy County is working on gathering data from various departments to support a future application.

Legislative Bill 259 passed this year in an effort to reform bail practices and reduce the number of people incarcerated due to poverty. Many of the participants on the Mental Health Case Management program have minimal income, this bill will allow clients who are unable to pay fines and costs to avoid jail by having their fines waived by the Court, or by performing community service ran through the Community Corrections office. The bill aims to utilize release on recognizance or conditions of bond such as Re0Entry Assistance and the Mental Health Case management Program.

In an effort to better serve those with mental health needs, Sarpy County is planning for a Special Management Unit to be built at the Sarpy County Jail. This unit will allow for safer, specialized care increasing the likelihood of mental health stabilization. In May, 2018, a Leadership Team was formed to include; two Commissioners, the County Administrator, Region 6, the County Attorney, Sheriff’s Office, and Corrections. The Sarpy County Sheriff’s Office has dedicated one FT Deputy to coordinate a team of law enforcement officers from each of the three city police departments to develop a plan to train all law enforcement officers in Sarpy County and the cities in Sarpy County with CIT and Mental Health CIT. The FT Deputy will also compile a list of area service providers for law enforcement officers to access during crisis calls.

Additionally, Sarpy County applied for a Mental Health Collaboration and Planning grant through the Bureau of Justice Assistance (BJA). On September 26, 2018, Sarpy County was notified of approval of the grant. This grant will fund a Social Worker who will assist a Sheriff’s Office Deputy with locating services for people in mental health crisis. The grant will help to divert people from being booked into the jail by offering assistance during the initial contact with law enforcement.

In August 2018, Sarpy County collaborated with Region 6 to conduct a Sequential Intercept Mapping (SIM) exercise. The SIM will be an important tool in identifying additional gaps in service for people with mental health issues in Sarpy County.

The criminal justice system plays an important role in mental health reform. This project provides an opportunity to partner with community providers at a time when they are developing their capacity to provide more care options. Continuation of the Mental Health Case Management Program is a crucial component in reducing unnecessary incarceration and recidivism among those clients who are mentally ill.

**Project Operation:**

Sarpy County is requesting grant funds to continue the Mental Health Intensive Case Management Program to assist some mentally ill persons who are arrested and in the criminal justice system by providing intensive case management services designed to help them establish independent living skills, manage their mental illness, abstain from drugs and alcohol, and reduce their future contacts with the criminal justice system.

The goals of the Sarpy County Intensive Mental Health Case Management project are to:

- Promote public safety by providing resources and case management to persons with mental illness and monitor compliance with treatment plans and Court orders
• Provide courts, counsel and providers with compliance reports and progress updates regarding clients’ treatment plans and Court ordered conditions of release
• Promote communication and collaboration between community stakeholders, treatment providers, law enforcement, corrections personnel and the Courts. Improve communication between professionals and individuals with mental illness and families of those with mental illness.
• Reduce the number of incarcerations for people with mental illness
• Reduce recidivism among individuals with mental illness.

According to the Treatment Advocacy Center’s recommendations from a recent study, the following interventions are needed to help county jails in diverting individuals with mental illnesses:

• **Diversion programs that prevent the entry of mentally ill individuals into the criminal justice system by providing extensive training for on how to recognize offenders with mental illnesses and refer them to treatment.**
• **Within jail diversion, programs that identify and direct mentally ill offenders to treatment and services.**
• **Widespread assisted outpatient treatment programs that permit courts to order certain individuals with serious mental illnesses to comply with treatment while living in the community.**
• **A careful intake screening for individuals with serious mental illnesses in jails in order to identify and transfer them to a mental health care dormitory for further evaluation or treatment.**
• **Proper mental health treatment for seriously mentally ill inmates inside jails.**
• **Community-based pre-trial psychiatric competency evaluation and competency restoration treatment for qualifying mentally ill inmates.**
• **The restoration of a sufficient number of inpatient psychiatric beds to meet the need for inpatient care for mentally ill individuals prior to arrest and when in need of care while incarcerated.**
• **Mandatory jail pre-release planning for seriously mentally ill inmates to ensure their transition to proper treatment after release (www.treatmentadvocacycenter.org).**

**Bold indicate interventions Sarpy County’s Mental Health Case Management has worked to implement and address)**

With grant funding, Sarpy County will continue a post-booking Mental Health Intensive Case Management program through Community Corrections (formally Pretrial Release). A post-booking program is one that identifies and works with mentally ill persons after they have been arrested and booked into jail. Each person who is booked into jail will be screened for mental illness. Any person who is identified through the initial screening process as mentally ill will be referred to Community Corrections who will then assess them for further treatment options and acceptance into the program as a condition of their bond. This assessment includes an interview of the candidate and a review of the candidate’s mental and physical health as well as collateral information obtained from relatives, employers and providers. Based on the analysis, the screener makes a recommendation to the Judge and counsel for admission to the program.

Appropriate candidates are those who would most likely not be in contact with the criminal justice system were it not for their mental illness and those who exhibit an ability and willingness to seek care and receive assistance from the program. In making a decision as to participation in the program, the Court will consider the assessment provided by the screener as well as the candidate’s criminal history and where the interest of the community is best served.
The participant is assigned to the Case Manager. The Case Manager works with each participant to ensure that they receive all the necessary support services. The Case Manager assists the participants with securing appropriate mental and physical health services, substance abuse treatment, housing, applying for assistance programs, clothing, food, education/training, and employment options. The Case Manager has frequent contact with participants at the beginning of the program to ensure they stick with treatment requirements, maintain medication compliance as recommended, trouble shoot problems and work toward long-term goals. The goal of the program is to help each participant establish basic resources including mental health treatment that can be maintained independently following their completion of the program.

The Screener assesses candidates at the county jail facilities. The Case Manager is housed in the Community Corrections Department (formally Pretrial Release Services). Sarpy County works with service providers to assist with ongoing treatment plans. Clients exit the program at the conclusion of his/her court case. Generally, this will be at the time of sentencing. However, a client may be released from the program if a violation occurs, the case is dismissed, or at any time at the Court’s discretion. Length of program will vary from person to person depending on Court orders and willingness of the client to fully participate in programming options. Although the program is a collaborative one, with many participating partners, Sarpy County Community Corrections will serve as the leader. Program partners include representatives from the major criminal justice departments in the county including: County Attorney’s Office, District Court, County Court, Public Defender’s Office, Human Services, State Probation, Community Services, Office of Veteran’s Affairs, the Sarpy County Sheriff’s Office/Law Enforcement Center, and various service providers in the area.

The concept of intensive mental health case management is based on the Problem-Solving Court model. Problem-Solving Courts are an alternative approach to handling criminal justice issues that are designed to focus on offender treatment, victim restitution, and decreasing recidivism. Problem solving courts have often developed around issues where the traditional court system has not been able to adequately address the issue. Specialty problem areas such as drug related crime and domestic violence are often rooted in complex social issues that require comprehensive and coordinated responses. Many jurisdictions have begun applying this practice to the problem of the mentally ill. Mental health case management programs offer a therapeutic driven approach to jurisprudence, focusing on the extent to which the courts can use the opportunity of legal proceedings to promote an outcome that will improve the wellbeing of the accused and of society.

According to the National Center for Justice Planning, Byrne JAG funds have been used in Tennessee to provide mental health services to inmates and those on a post-booking program. Case Managers assist offenders with issues including accessing benefits and continuing treatment upon release. Funds help facilitate and coordinate services for offenders with mental illness or co-occurring disorders, with a primary emphasis on diverting offenders into community services, support and care. The grant has provided funding for support services for offenders returning to the community. The goal is to reduce the number of individuals with mental illness and substance abuse disorders involved in the criminal justice system (http://www.ncjp.org/byrne-jag/one-pagers).

In Florida, JAG funding supports the Pinellas County Jail Diversion Expansion, a one year grant for assessments, treatment and case management for the Pinellas County Mentally Ill Jail Diversion program. The program engages ex-offenders who have mental health and/or co-
occurring mental health and substance use disorders and provides treatment and case management assistance to them immediately upon release from jail or at the end of their prison sentence (http://www.ncjp.org/byrne-jag/one-pagers).

In Virginia, Byrne JAG funds are used to support the development of the Pretrial Initiative on Mental Illness (PIMI) at the Middle River Regional Jail. PIMI is a post-booking, pretrial jail diversion effort targeting recently arrested defendants with serious mental health issues or co-occurring mental illness with substance abuse disorders. Using evidence-based methods, this initiative identifies eligible participants and provides transition services to community-based treatment services (http://www.ncjp.org/byrne-jag/one-pagers).

In Ohio, Byrne JAG funded 13 specialty courts in 2013 and 12 in 2014 including veteran treatment, drug, mental health, and juvenile and domestic violence courts. In Wisconsin, Byrne JAG funds support the implementation and expansion of specialty courts throughout the state. In 2013 and 2014, Byrne JAG supported nine specialty court expansion grants including Adult Drug Courts, DUI Courts, a Mental Health Court, and a Veterans Court (http://www.ncjp.org/byrne-jag/one-pagers).

In Iowa, Byrne/JAG funds support a mental health court which provides oversight, correctional supervision, and coordinated treatment services for mentally ill offenders that may face more frequent/lengthy periods of incarceration without significant help. In Colorado, Byrne funds support a Pretrial project that helps defendants spend less time in jail and more time in the community under professional pretrial supervision. The project demonstrated that new practices for bail/bond administration and pretrial services are more effective and sustainable (www.ncjp.org/). The First Judicial District in Waterloo, Iowa received JAG funding to implement a dual-diagnosis program which is a comprehensive approach to providing mental health and co-occurring substance abuse treatment for offenders. The program was established to identify, educate, and treat offenders. It brought together the three professions – mental health, substance abuse, and corrections. The program expects offenders to comply with supervision requirements, medication management, participation in services, and other programming. This program was a JAG Showcase Program for FY2007 (www.ncjp.org/policy_practice/practice/jag_showcase).

Locally, Douglas County, Nebraska implemented a similar post-booking mental health diversion program that has been very successful. Case Managers work with participants to ensure they receive all the necessary support to achieve independent living. In 2017 Douglas County worked with 41 individuals in the Mental Health Diversion Program with a successful completion rate of 67% for those individuals worked with in 2017. Overall the program has a 73% successful completion rate for those individuals who have participated in program since the start of the program in 2006.
### Activity/Timeline:

<table>
<thead>
<tr>
<th>Position</th>
<th>Activity Responsible For</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Corrections Specialist/Case Manager</td>
<td>Perform initial screening at the time of booking to refer potential clients to Pretrial Release Mental Health Case Management Program.</td>
</tr>
<tr>
<td>Community Corrections Specialist</td>
<td>Conduct evaluation and assessment on those individuals that meet initial eligibility criteria at initial booking.</td>
</tr>
<tr>
<td>Community Corrections Specialist/Case Manger</td>
<td>Make recommendations to the Court for placement into the program after evaluation and assessments are complete. Recommend conditions of bond to the Court; ex: electronic monitoring, evaluation(s), programming, etc...</td>
</tr>
<tr>
<td>Case Manager</td>
<td>Manage and monitor individuals in the Program; includes frequent contact, assistance with navigating the court process, community based services and appointments on a regular basis.</td>
</tr>
<tr>
<td>Case Manager/Community Corrections Specialist</td>
<td>Conduct drug and alcohol testing and report compliance with electronic monitoring, communicate with service providers and Supervision Specialist.</td>
</tr>
<tr>
<td>Case Manager</td>
<td>Evaluate individual progress on a regular basis and report to Director.</td>
</tr>
<tr>
<td>Case Manager</td>
<td>Participate in team meetings with providers and other stakeholders to discuss progress and compliance of clients.</td>
</tr>
<tr>
<td>Case Manager</td>
<td>Accurately report compliance and progress to the Court upon request.</td>
</tr>
<tr>
<td>Case Manager/Director/Grant Coordinator</td>
<td>Complete Quarterly Performance Reports.</td>
</tr>
<tr>
<td>Case Manager/Director/Community Corrections Specialist/Grant Coordinator</td>
<td>Work with County officials on future funding options/write grant for additional funding and possible expansion of the Program based on gathered statistics.</td>
</tr>
</tbody>
</table>
### Objectives/Performance Measures:

<table>
<thead>
<tr>
<th>Goal, Objectives &amp; Performance Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal: Employ Personnel</strong></td>
</tr>
<tr>
<td><strong>Objective #1 Full-time Case Manager paid for by JAG Funds</strong></td>
</tr>
<tr>
<td>Performance Indicators:</td>
</tr>
<tr>
<td>Increased contact with offenders</td>
</tr>
<tr>
<td>Baseline Statistics</td>
</tr>
<tr>
<td>591 meetings in 2017</td>
</tr>
<tr>
<td>Projected Results (Outcomes)</td>
</tr>
<tr>
<td>600 meetings projected for 2018</td>
</tr>
<tr>
<td>Reduce number of inmates in custody with mental health issues program</td>
</tr>
<tr>
<td>Baseline Statistics</td>
</tr>
<tr>
<td>523</td>
</tr>
<tr>
<td>Projected Results (Outcomes)</td>
</tr>
<tr>
<td>550</td>
</tr>
<tr>
<td>Increase number of participants placed on the program</td>
</tr>
<tr>
<td>Baseline Statistics</td>
</tr>
<tr>
<td>Total PTD in 2017 = 238</td>
</tr>
<tr>
<td>Projected Results (Outcomes)</td>
</tr>
<tr>
<td>300 clients placed on PTD in 2018</td>
</tr>
<tr>
<td>Reduce Recidivism</td>
</tr>
<tr>
<td>Baseline Statistics</td>
</tr>
<tr>
<td>30% of clients place in 2017 received new charges.</td>
</tr>
<tr>
<td>Projected Results (Outcomes)</td>
</tr>
<tr>
<td>25% for 2018</td>
</tr>
</tbody>
</table>

| Goal: Reduce Offender Drug Use            |
| Objective #1 Purchase drug testing kits   |
| Performance Indicators:                   |
| Increase accountability with offenders     |
| Baseline Statistics                       |
| 721 in 2017                               |
| Projected Results (Outcomes)              |
| 800 in 2018                               |
| Reduce drug use in offenders              |
| Baseline Statistics                       |
| 92 positives in 2017                      |
| Projected Results (Outcomes)              |
| 80 positives in 2018                      |
| Reduce recidivism with offenders          |
| Baseline Statistics                       |
| 30% in 2017                               |
| Projected Results (Outcomes)              |
| 25% for 2018                              |
| Reduce dependency of offenders related to untreated mental illness |
| Baseline Statistics                       |
| 59 remain sober in 2017                   |
| Projected Results (Outcomes)              |
| 60 remain sober                           |

| Goal: Increase awareness of agency’s ability to solve problems and/or modify policies and practices. |
| Objective #1 Conduct Pre Program Surveys |
| Performance Indicators:                   |
| Baseline Statistics                       |
| Projected Results (Outcomes)              |

24
<table>
<thead>
<tr>
<th>Goal: Offer Services to Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective #1 Assist clients in meeting basic needs/transportation services</td>
</tr>
<tr>
<td>Performance Indicators: Provide transportation services when needed</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Assist clients in finding jobs, housing, and other services to meet basic living needs.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objective #2 Refer Clients for evaluation/treatment/medication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Indicators: Assist clients in locating service providers for evaluations, treatment, and free/low cost medication if needed.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Use JAG funding or other funding sources to help clients if meet financial guidelines.</td>
</tr>
</tbody>
</table>
**Applicant Disclosure of Pending Applications:**

Applicants are to disclose whether they have pending applications for federally and or state funded grants that include requests for funding to support the same project being proposed under this solicitation and will cover the identical cost items outlined in the budget in the application under this solicitation. **Please mark none if you have no pending applications.**

<table>
<thead>
<tr>
<th>Federal or State Funding Agency</th>
<th>Solicitation Name/Project Name</th>
<th>Name/Phone/E-mail for Point of Contact at Funding Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
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<td></td>
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<td></td>
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</tr>
</tbody>
</table>
Continuation Information:

1. Describe the most recent (past year) funded grant project’s accomplishments and milestones.
Last year was the fifth year of operating the MHCM program. In regards to accomplishments in 2017, the number of client’s who remained sober while placed on MHCM increased to 59 sober (51 in 2016). The number of positive drug test remained the same as 2016 with 92 positive test occurring in 2017, however, more clients remained sober while placed on MHCM then previous years. The program continues to grow and the number of clients placed on the program remains consistent. In 2017, 49 new clients were placed on the program, bringing the total number of clients placed on the program to 238. A milestone the program hit in the past year was the two hundredth (200th) client being placed on the program which occurred at the end of March 2017.

2. List the results of the project’s measurable outcomes achieved.
The Mental Health Case Management program had several measurable outcomes in 2017 (previous year’s baseline statistics are in parentheses). One of the main objectives of the Mental Health Case Management Program is supervision through frequent contact. The Case Manager conducted 591 meetings with clients in 2017 (616 in 2016). The number of meetings decreased from the previous year due to the number of clients placed in 2017 decreasing. However, a lower caseload allowed for more time spent with each client, which helped to improve the accountability of each client. The increased accountability with clients is also reflected in the measurable outcome of reducing the dependency of clients released to untreated mental illness. In 2017 the number of clients who remained sober increased to 59 (51 in 2016). There were 721 urinalysis tests conducted in 2017 (778 in 2016), with 92 positive tests (92 in 2016). In the last three years the number of client who have remained sober while on MHCM has increased, in 2015 40 clients remained sober, in 2016 51 clients, and as stated above 59 client remain sober in 2017 while placed on the MHCM program.

Since the program’s inception in 2014, 238 clients have been assigned to the MHCM program. The number of participants has increased steadily since the inception of the program in 2014. The Case Manager continued to make referrals to agencies to assist clients in meeting basic needs, such as housing, employment and other types of assistance; 41 referrals were made in 2017 (34 in 2016). The Case Manager sent 50 referrals (55 in 2016) to service providers for evaluations, treatment and medication assistance. During 2017, the number of new clients assigned to Mental Health Case Management declined, resulting in less referrals being made to meet client’s basic needs than previous years. Overall the decrease in the number of clients assigned in 2017 seem to benefit the program as more attention and one and one time was devoted to those assigned which directly correlates to the increase in the number of client who remained sober while placed on MHCM during 2017. Another goal of the MHCM program is to reduce recidivism which in 2016 the recidivism rate was reduced to 18% however, in 2017 the recidivism rate increased to 30%. There are many contributing factors to the increase in recidivism in 2017, the number of client’s served in 2017 (77) was lower than in 2016 (82) and the number of client’s who were directly committed to the MHCM program increased from previous years. A direct commit to the MHCM program occurs when a client is placed on the program directly from court by the Judge. In 2017, 46 of the 77 (60%) clients served by MHCM were direct commits to the program. In 2016, 32 of the 82 (39%) clients served by MHCM were direct commits to the program.
3. **Explain any problems, barriers or challenges during the previously funded grant project. Discuss how these were addressed and the end results.**

Barriers the Mental Health Case Management Program has faced during the last year have been the increase in recidivism and the number of clients directly committed to the program by Judges. The increase in recidivism directly correlates with the number of client who were direct commits to the program. In 2017 the number of clients who were direct commits to the MHCM program was 46 of the 77 (60%) clients assigned. The number of clients who received new charges or arrests in 2017 was 23 of the 77 and of those 23 clients 14 (61%) of them were direct commits to the MHCM program. The challenge is the clients who have been directly committed to the program by the Judge are not participating in the program voluntarily to receive help with setting up services to assist with meeting their mental health and substance abuse needs. The clients who are screened through the *Further Mental Health Assessment* appear to be seeking out help and have more reasons to want to do well in the program. Of the 14 direct commit clients, seven of those clients did not fully participate or did not participate at all in MHCM. Another barrier and trend that was observed in 2017 with direct commits also was clients denying screening for the Mental Health Case Management program at the time of the Pretrial Screening. Once in court for a bond review, the Judge will directly commit the clients to the MHCM program without a *Further Mental Health Assessment* completed. This trend was also observed in the number of *Further Mental Health Assessment* completed in 2017. The Pretrial Screening does include a few brief questions about mental health but the *Further Mental Health Assessment* is more in-depth in assessing the client’s mental health and substance abuse needs to allow for the most appropriate recommendations to the court in regards to placement on the MHCM program.

A systems approach has been utilized to start addressing this issue in the last year and into 2018 through conversations with Judges, County Attorneys and Public Defenders who want to place clients on MHCM without first at least having the Pretrial Screening completed. The Pretrial Screening greatly helps to identify if the client is in need of the *Further Mental Health Assessment* and also if the client is appropriate for the program. In the last year the LMHP, who completes the *Further Mental Health Assessments* along with Pretrial Screening, has worked diligently to identify the most appropriate clients and those client who would benefit from participation in the program. However, this barrier may remain as assignment to the program is ultimately up the Judges.

4. **Clearly state how continuation funding is vital to the ongoing success of the program.**

Ongoing funding of the Mental Health Case Management Program is crucial in order to keep the program operational. The program gives the Courts a community based alternative to incarceration. Without this option, many clients who have participated in MHCM would have remained in jail during the trial phase of their cases. Clients do not receive the necessary services to treat mental illness while in custody, thus perpetuating the cycle. The Case Manager’s position, for which funding, is being requested has allowed Community Corrections to provide intensive case management services, which traditional Supervision Officers cannot do. This program has gained the support of the courts, counsel, law enforcement and the Sarpy County jail staff. Sarpy County agencies work very closely together. In particular, the jail, MHCM and Mental Health Diversion have developed a close relationship to provide a continuum of care. The MHCM program is essential in keeping the relationship and procedures that have been developed in place.
REQUIRED FORMS- All Applicants

The following forms are to be completed and signed by the appropriate individual as part of the grant application.

*PLEASE SUBMIT a minimum of (3) and maximum of (5) letters of support.

(NOTE: The authorized official would include: county board chair, mayor, city administrator, chair or vice-chair of non-profit agency.)
CERTIFIED ASSURANCES

1. The applicant assures that federal block grant funds made available under the Byrne Memorial Drug Control and System Improvement Formula Grant Program will not be used to supplant existing funds, but will be used to enhance or expand drug and violent crime control activities as stated in this application.

2. The applicant assures that fund accounting, auditing, monitoring, and such evaluation procedures as may be necessary to keep such records as the Nebraska Commission on Law Enforcement and Criminal Justice shall prescribe will be provided to assure fiscal control, proper management, and efficient disbursement of funds received under the Act.

3. The applicant assures that it shall maintain such data and information and submit such reports, in such form, at such times, and containing such information as the Nebraska Commission on Law Enforcement and Criminal Justice may require.

4. The applicant certifies that the proposed project fulfills all program requirements; that all the information is correct; that there has been and will be throughout the life of the grant, appropriate coordination with affected agencies; and, that the applicant will comply with all provisions of the Drug Control and System Improvement Formula Grant Program as well as all other applicable federal laws.

5. The Sub grantee will comply, and all its contractors will comply, with the nondiscrimination requirements of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, 42 USC3789(d), or Victims of Crime Act (as appropriate); Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; Subtitle A, Title II of the Americans With Disabilities Act (ADA) (1990); Title IX of the Education Amendments of 1972; the Age Discrimination Act of 1975; Department of Justice Non-Discrimination Regulations, 28 CFR Part 42, Subparts C, D, E, and G; and Department of Justice regulations on disability discrimination.

6. The applicant assures that in the event a federal or state court, or federal or state administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office of Civil Rights Compliance (OCRC) of the Office of Justice Programs.

7. The applicant assures that, if required, it will formulate an equal employment opportunity program (EEOP) in accordance with 28 CFR 42.301 et. seq., and submit a certification to the state that it has a current EEOP on file which meets the requirements therein.

8. The sub grantee assures that it and its contractors will comply with the provisions of the Office of Justice Programs "Financial and Administrative Guide for Grants," M 7100.01.

9. Pursuant to the Office of Management and Budget (OMB) Circular A-133, non-Federal entities expending $500,000 or more a year from all federal sources shall have a single organization-wide audit conducted in accordance with the provisions of OMB Circular A-133. Non-federal entities that expend less than $500,000 a year in Federal dollars from all sources are exempt from Federal audit requirements for that year. However, financial records must be maintained in an acceptable accounting system and be available for review or audit by appropriate officials of Federal, state or local agencies.
CERTIFIED ASSURANCES - Continued

10. **Confidentiality:** No recipient of monies or any personnel involved in the program under the Drug Control and System Improvement Formula Grant Program shall use or reveal any information received from the program for any purpose other than the purpose for which such information was obtained.

11. The applicant agrees to submit required reports to the Crime Commission in a timely manner.

12. The applicant agrees to establish and maintain a Drug Free Workplace Policy.

13. The applicant agrees to attend training as required by the Nebraska Crime Commission.

14. The applicant will comply, and all its contractors will comply with the Equal Treatment for Faith Based Organizations Title 28 C.F.R. part 38.

CERTIFICATION

I hereby certify that I have read and reviewed the above assurances; that the applicant will comply with all provisions of the Anti Drug Abuse Act and all other applicable federal and state laws; and, the applicant will implement the project as written if approved by the Crime Commission.

October 16, 2018

Don Kelly
Chairman, County Board of Commissioners

1210 Golden Gate Drive, Papillion, NE 68046

402-593-4155
CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTER; AND DRUG-FREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered transaction, grant, or cooperative agreement.

1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over $100,000, as defined at 28 CFR Part 69, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form – I.L.L., "Disclosure of Lobbying Activities," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTER (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transaction, as defined at 28 CFR Part 67, Section 67.510-

A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State of Federal court, or voluntarily excluded from covered transactions by any Federal department of agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

The applicant certifies that it will or will continue to provide a drug-free workplace by:

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A. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition:

B. Establishing an ongoing drug-free awareness program to inform employees about—

(a) The dangers of drug abuse in the workplace;
(b) The grantee's policy of maintaining a drug-free workplace;
(c) Any available drug counseling, rehabilitation, and employee assistance programs; and
(d) The penalties that may be imposed upon employees for drug abuse violation occurring in the workplace;

C. Notifying the employee in the statement that the employee will:

(a) Abide by the terms of the statement; and
(b) Notify the employer in writing of his or her conviction of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

The sub grantee shall notify the Crime Commission in writing of any conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

The sub grantee certifies that it will take one or more of the following actions within 30 calendar days of receiving notice of the conviction:

A. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
B. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purpose by a Federal, State or local health, law enforcement, or other appropriate agency;

The sub grantee certifies that it will make a good faith effort to continue to maintain a drug-free workplace.

Organization Name and Address: Sarpy County, 1210 Golden Gate Drive, Papillion, NE 68046

Don Kelly, Chairman, Board of Commissioners

Typed Name and Title of Authorized Representative

[Signature] 10/16/18

[Organization Name and Address]
GENERAL PURPOSE

Under the direction of the Pre-Trial/Community Services Director, perform a variety of skilled technical and administrative work requiring moderate independent judgment, and supervise and provide case management services to clients in the Mental Health Division of Pretrial Services.

ESSENTIAL FUNCTIONS

Establish and maintain effective working relationships with clients, Officials, supervisors, employees, attorneys, judges, law enforcement staff, other health care professionals, other agencies, and the general public.

Consult and collaborate with other mental health professionals in order to develop an individual treatment plan.

Plan, develop, and provide intensive case management services with clients.

Review and discuss individualized treatment plan.

Engage client in areas such as symptom identification and education, relapse prevention, coping skills, activities of daily living, and health management.

Coordinate and consult with social service agencies, community groups, private practitioners, clergy, and law enforcement agencies regarding client’s needs.

Work with families and the community to assist clients in planning for future needs and goals.

Create and maintain accurate records and reports of client contact and activities.

Administer drug and alcohol tests.

Report to work with regular, predictable, and consistent attendance.

Peripheral Duties

Provide transportation for clients as needed.

Serve as member of various committees, as assigned.

Perform other duties as assigned.

MINIMUM QUALIFICATIONS

Education and Experience

Bachelor’s degree* in Social Work, Human Services, Psychology, or Sociology.

Two (2) years’ experience in performing case management in the Mental Health field.

Current experience with electronic monitoring preferred.
JOB DESCRIPTION

*Approved education beyond the minimum required may be substituted for up to two (2) years of stated experience.

Special Requirements

Must have and maintain throughout employment a valid Drivers’ License, as well as meet eligibility requirements of “acceptable driver standards” as defined by the County.

Must obtain and maintain certification in Preliminary Breath Testing (PBT).

Necessary Knowledge, Skills, and Abilities:

Working knowledge of mental illness and psychiatric treatment
Working knowledge of social work/counseling methods, techniques, and applications
Working knowledge of the criminal justice system, including law enforcement and corrections, with an emphasis on court proceedings
Working knowledge of behavior associated with psychiatric disorders, psychiatric terminology, and the effects and adverse reactions of psychotropic medications
Working knowledge of the environmental and cultural factors inherent in social work, treatment, and counseling
Working knowledge of, and ability to use, computers, and Microsoft Office software
Working knowledge of current office practices and procedures
Skill in the use of professional interviewing techniques to obtain basic information
Ability to deal with individuals of diverse cultural and socio-economic backgrounds
Ability to navigate effectively in stressful and/or emotionally-charged situations
Ability to accurately prepare and maintain various records, reports, correspondence, and other departmental documents
Ability to organize and prioritize tasks
Ability to exercise sound, objective judgment while working independently with strict adherence to established departmental policies and procedures
Ability to carry out assignments to completion within time constraints
Ability to communicate effectively, in English, both verbally and in writing
Ability to manage confidential and sensitive information
Ability to use drug testing and electronic monitoring equipment
Ability to operate standard office equipment including, but not limited to, multiline phone, computer, printer, 10-key calculator, scanner, fax, copier, tape recorder, personal electronic devices, monitoring equipment, and drug testing tools
PHYSICAL DEMANDS AND WORK ENVIRONMENT

The physical demands and work environment described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is frequently required to sit/remain stationary, and operate/manipulate equipment (e.g. use hands to finger, handle, or feel objects, tools, or controls). The employee is occasionally required to walk/move about, stand/remain upright, as well as reach, bend, and stoop. The employee must be able to frequently lift and/or maneuver up to 10 pounds, and occasionally lift and/or maneuver up to 50 pounds. The employee must have the physical ability to protect oneself and control combative or disruptive persons.

Required sensory abilities include vision, smell, hearing and touch. Visual abilities, correctable to normal ranges, include close, distance, and color vision as well as the ability to adjust focus. Communication abilities include the ability to talk (verbal exchange) and hear within normal ranges.

While performing the duties of this job, the employee occasionally will be exposed to outside weather conditions, temperature variations, and wet and/or humid conditions. The noise level in the work environment is usually moderately quiet in the office, and moderate to loud in the field. Due to the nature of the department, the employee must be available days, nights, weekends, and holidays.

SELECTION GUIDELINES

Formal application, rating of education and experience, interview, reference checks, successful completion of a national criminal background check, successful completion of a pre-employment drug screen, and other job related tests or checks as may be required.

DISCLAIMER

The job description is current as of the date signed. Any omission of specific statements does not exclude them from the position if they are similar, related, or a logical assignment to the position.

The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.

Department Head: Date: 7/25/13

Human Resources Director: Date: 7/25/13
September 24, 2018

Nebraska Crime Commission
301 Centennial Mall South
Lincoln, NE 68508

RE: Sarpy County Mental Health Case Management Program

To Whom It May Concern:

This letter is a privilege to write because I truly believe the Sarpy County Mental Health Case Management Program has become an essential part of our justice system in Sarpy County. I have worked for the Public Defender’s Office for five years and it is undeniable that mental health issues have become more prevalent amongst our clientele. The Mental Health Case Management Program has been an excellent and effective resource.

While an accused awaits trial, Judges weigh that individual’s liberty against public safety and decide whether to release him/her from jail. In my experience, jails are overcrowded and not equipped to handle mental health needs. Therefore, the Mental Health Case Management Program has become the go-to alternative to incarceration for individuals battling mental health issues.

The Mental Health Case Management Program provides invaluable short term and long term benefits. A short term benefit is that our clients are allowed to reside in the community, are held accountable to the Court and are offered assistance/ideas how to address their mental health needs. This program has helped my clients help themselves by assisting them in navigating community resources such as finding affordable evaluations, therapy, treatment, housing, transportation, and more. The long term benefit is that our clients learn how to navigate resources on their own and connect to community supports that can outlast their time in the criminal justice system which makes them less likely to reoffend.

It is my hope, for the sake of my clients and our justice system, that continued funding is granted to the Sarpy County Mental Health Case Management Program. Please do not hesitate to contact me if further information is needed.

Sincerely,

Colleen Dostal
Deputy Public Defender
Sarpy County Public Defender’s Office
September 27, 2018

To Whom It May Concern:

Please accept this letter of support for the Sarpy County Mental Health Case Management Program.

Ashleigh Weisbrodt, the mental health case manager at Community Corrections, works collaboratively with Sarpy County Human Services. Ms. Weisbrodt and I meet regularly to discuss services offered to clients such as medication, therapy and housing needs. With Ms. Weisbrodt’s guidance and support, clients in the program are given the opportunity to turn their lives around. This leads to reduced recidivism and public safety, not to mention a better life for those with a mental illness.

I look forward to building upon the relationship with the Community Corrections Office, with hopes that you will consider funding the grant for a much-needed program. Please do not hesitate to contact me if further information is needed.

Sincerely,

Sharon Boehmer
Director, Sarpy County Human Services
September 18, 2018

Nebraska Crime Commission
301 Centennial Mall South
Lincoln, NE 68508

RE: Sarpy County Mental Health Case Management Program

To Whom It May Concern:

Please accept this letter in support of the Sarpy County Mental Health Case Management Program.

Across the board, the Public Defender’s office serves a population that has struggled accessing services to address their mental health needs. I have worked in the Sarpy County Public Defender’s office for three years, and have seen the effects of the Mental Health Case Management program firsthand. As the Social Worker working with clients with mental health disorders, I am able to work collaboratively with the case manager to identify clients who are being considered for pretrial release and would benefit from the Mental Health Case Management program.

The existence of the Mental Health Case Management program has proven to be invaluable. The intense supervision our clients receive in this program provides an opportunity for our clients to be released from jail to establish care while ensuring their whereabouts and compliance are monitored. The Case Manager has played a critical role in the success of our clients receiving mental health services and making it through the court process successfully.

It is my hope that this program receives continued grant funding so they may keep providing vital case management services in Sarpy County. Please don’t hesitate to contact me with questions. Thank you for your time and consideration.

Sincerely,

[Signature]

Ashley Berg, LCSW
Social Worker
Sarpy County Public Defender’s Office
September 24, 2018

Nebraska Crime Commission
301 Centennial Mall South
PO Box 94946
Lincoln, NE. 68508

RE: Sarpy County Mental Health Case Management Grant

To whom it may concern:

Please accept this letter of support for the Mental Health Intensive Case Management Program. I ask that you give every consideration to this program for continued grant funding.

The continued collaboration between Sarpy Mental Health Diversion and Mental Health Case Management has proven to be an invaluable asset to Sarpy County and the clients that we serve. The Mental Health Case Manager is the frontline to mentally ill persons in our system and is instrumental in getting clients on the right track for their mental health. Because of that, more clients than ever are able to transition to MH Diversion and ultimately have their charges reduced or dismissed.

Mental Health Diversion and Mental Health Case Management have been meeting monthly, for the past 5 years to collaborate and discuss clients who likely would do well in MH Diversion. That meeting has been expanded in recent months to include specific prosecutors and members of the Public Defender’s Office. These additions have added depth and continuity, making recommendations as a group to Prosecution to refer individuals to MH Diversion.

I appreciate your time and consideration, and ask that you continue to fund this valuable asset in Sarpy County.

Sincerely,

Dean Loftus
Sarpy County MHD Manager