

Yakima agencies look to help mentally ill in the criminal justice system

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Carly Walker, therapist with the Central Washington Comprehensive Mental Health, checks in on one of her clients in a booking cell of the downtown Yakima County jail in Yakima, WA. Thursday, March 17, 2016 (Mason Trinca/Yakima Herald-Republic)

YAKIMA, Wash. -- Sometimes it's crystal clear, authorities say. A person — often homeless — on the street is talking to themselves. Suddenly, they start to hit their head against the wall of a nearby store.

Other times, law enforcement can't tell whether a person is angry, drunk, on drugs or has a mental illness, said Yakima County Sheriff Brian Winter.

But in those and other similar scenarios, depending on the crime, the person usually is arrested and taken to the Yakima County jail, which has a capacity of 1,102 and generally has a daily population of 770 inmates.

To alleviate a growing jail population and help those with mental illnesses avoid incarceration, a partnership of Yakima County agencies is collaborating to reform mental health services provided to those who enter the criminal justice system.

The \$1 million idea is just that — an idea, due to lack of funding. Nonetheless, proponents say once the program is funded and off the ground, it'll benefit not only the mentally ill but also taxpayers as well.

The goal is to divert people with mental illnesses away from the Yakima County jail, which through a contract with Comprehensive Mental Health provides services to more than 2,000 inmates every year, said Comprehensive Mental Health CEO Rick Weaver.

“The idea is to bring all the different pieces we’ve built together in a system.”

Rick Weaver, Comprehensive Mental Health CEO

The jail spent nearly \$400,000 on mental health costs in 2015, Weaver said in October. Most of that money was provided by Comprehensive from state funds, private donations and fundraising programs, he added.

In a study commissioned by Gov. Jay Inslee that was released in November, researchers found that directing people with mental illnesses into diversion programs rather than putting them into jail “has the potential to cut criminal costs, reduce recidivism and provide more effective treatment for offenders.”

The partnership, which includes law enforcement, government officials, attorneys, judges and Comprehensive, intends to do just that by taking steps to treat the mentally ill by replicating the successes of other cities across the nation.

“We’re taking bits and pieces of models from all over the country and bringing them together to one unified system,” Weaver said. “I think that’s going to be the uniqueness of our (plan) — is that we’re going to have many more pieces than other places have.”

In short, the policy team’s goals are:

- Expand crisis intervention training to include corrections officers
- Assign mental health professionals to assist law enforcement officers on patrol
- Provide round-the-clock mental health professionals, able to conduct mental health prescreening during booking, at the Yakima County jail
- Develop an intensive community support team designed to offer aid to individuals determined to have a mental illness.

“The idea is to bring all the different pieces we’ve built together in a system,” Weaver said. “So that no matter where they come into contact with the criminal justice system or mental health system, ideally we don’t drop anybody through the cracks.”

Recent studies show that more than 50 percent of individuals incarcerated had a psychotic disorder or mental health diagnosis such as depression, anxiety or bipolar disorder. Fifteen percent of men and 30 percent of women booked into jail have a serious mental illness, according to the National Alliance of Mental Illness.

“Generally, the vast majority of the people that end up in jail that are mentally ill are arrested for really minor crimes,” Weaver said. “Not to say that there are never people that do really serious crimes, but the vast majority are really minor crimes.”

Once a mentally ill person gets arrested, it can be months before judges and attorneys decide they are ready to come out, Weaver said.

“The length of time that a mentally ill person spends in jail is vastly greater than (what) anybody else is,” he said. “Many of these people are homeless — many of these people are arrested for minor crimes like panhandling or minor assault. They are talking to voices. They end up in jail and they can’t get out.”

The problem, he said, is that once they are in jail they have to go through competency testing, which can take several months. And there are downsides to that.

“There’s harm to the person. There’s harm to the families and there’s harm to the community and the taxpayer,” he said.

The cost of psychiatric medications is estimated at more than \$500,000 a year in Yakima County, Weaver said.

Those with mental illness are at high risk of being assaulted, Weaver said. While incarcerated, their mental health deteriorates, he added.

“You’re mixing in a very vulnerable person with mental illness in with the gang population,” Weaver said. “They are at high risk of being assaulted, beaten up. Their mental illness almost always gets worse, so then they get worse and they do stuff in the jail, which gets them in more trouble. So it’s this cascading effect. It’s very stressful. It’s agitating to people. ... There’s a lot of evidence that says when people decompensate mental illness, even when you get that restored and back into balance, they never kind of come back to the baseline again.”

Ed Campbell, Yakima County jail director, said understanding the indicators of mental illness is essential for first responders as well as those in corrections. He plans on sending 130 corrections officers through the training this year beginning in February, he said.

Crisis Intervention Team training is a national model that has been used to train officers for years, Weaver said. Developed in Memphis, Tenn., it provides officers with 40 hours of intensive training about mental health issues and how to approach people with symptoms, Weaver said.

In Memphis, the training helped drastically reduce the number of “mental disturbance calls” and improved officer safety, according to a study by the Substance Abuse and Mental Health Services Administration.

Training opportunities for officers are provided through Comprehensive Mental Health.

Crisis Intervention Training “provides a better way for the officer to communicate with the mental health person,” Campbell said. “It gives them strategies to diffuse their behavior, anger.”

For example, one of the most important tools deputies or officers have is not their weapons but rather being able to talk to people, Winter said. “That’s where the training helps us discern that this person is going through a mental health crisis,” he added.

“Is this something where we can act right away or do we need to go get them some help?” Winter said, adding that the training has helped deputies make split-second decisions when dealing with distressed individuals. “We get there and there are people fighting. We get there and somebody is getting ready to do something either violent or catastrophic. So, more knowledge, more training is useful. Sometimes the decisions we have to make are pretty quick.”

The training helps law enforcement understand how they should deal with people on the street, Weaver said.

“The officers who have had the training, divert (from jail). The officers who haven’t had the training, don’t,” he said.

Having mental health professionals ride along with law enforcement in patrol cars is another aim of the group. The mental health workers would be able to assess individuals at the time of an arrest. The policy team’s plan is to have two mental health professionals available as go-to experts for deputies — and Yakima and Union Gap police officers.

“One of the challenges for us is when we arrive on scene, ... we don’t always have someone to tell us that reason that the person is acting that way is that they have mental health issues,” Winter said.

Having a mental health professional available is not only beneficial to the suspect but also is good for police, the courts and the taxpayer, Weaver said.

Contracted out by Comprehensive Mental Health, the professional would become indispensable to law enforcement, Winter said.

Even if the mental health professional cannot ride along, a deputy could just describe the person's behavior and the expert could "talk us through what this person is going through," so the deputy can get the person to relax and calm down, Winter said.

Once a suspect is determined to be possibly suffering from mental illness, he or she could then be diverted to the Yakima crisis triage center, which is open 24 hours a day, for stabilization and treatment, Weaver said.

That's a model the policy team borrowed from Bexar County, Texas, which trains emergency responders to take those in mental distress to crisis and triage centers as an alternative to jail and court, Weaver said.

The highly successful program, which began about 16 years ago, has become a national model for cities looking to revamp their mental health services and has resulted in a savings of nearly \$100 million to San Antonio, according to a December report by the Boston Globe.

Establishing an intensive mental health team in the community that could work with individuals who are on diversion tracks, such as the mental health court or the pre-trial release program, in the criminal justice system is another goal the team would like to achieve, Weaver said.

The problem the policy team faces is obtaining funding. To overhaul the mental health services in the criminal justice system, the team estimates needing more than \$1 million to get started, said Harold Delia, Yakima County courts administrator.

That would pay for about 10 mental health professionals and additional staff for the triage center and mental health court, including a probation officer and a commissioner, Delia said. It also would cover the cost of overtime pay for police officers to go through the crisis intervention training, he said.

In the landmark Washington state Trueblood case filed against the Department of Social and Health Services in 2014, the plaintiffs argued the state was taking too long to order competency evaluations for those with disabilities, traumatic brain injuries and mental illnesses, Weaver said.

Last year, the U.S. District Court Western District of Washington held the department in contempt after it failed to comply with the court's ruling to meet the required seven-day minimum for competency services, according to court documents. That action resulted in the court levying daily fines against the agency, which continues to not be in compliance.

Parties representing the plaintiffs, including the American Civil Liberties Union and Disabilities Rights Washington, created a diversion workgroup to plan on how to use funds from the fines to help reduce the amount of time those with mental illnesses spend in jail, according to a 2017 Trueblood Jail Diversion Request for Proposals and Application Requirements documents. The workgroup also wanted to reduce recidivism rates.

The Trueblood diversion funds — estimated in the millions — are available for those applicants fitting the requirements for approved diversion models. Applicants, such as Yakima County, could receive an estimated \$1 million per proposal.

Kayley Bebber and Kim Mosolf, attorneys with Disability Rights Washington and parties in the Trueblood case, wouldn't comment on the allocation of the diversion funds but said the Yakima County Jail had developed a positive relationship with Disability Rights Washington after reports last year said the jail had violated the rights of inmates with disabilities.

Yakima County is a contender for the funds but won't know whether it has been awarded the grant until the end of the month, Weaver said. Regardless, the policy team is pursuing other ways to fund the project and there's evidence to show that they have been laying the groundwork for getting non-violent offenders, including those with mental illness, out of jail.

The pretrial release program has a 95 percent success rate, while 86 percent of offenders are not arrested for a new offense while on pretrial supervision, Delia said. The program has a mental health professional to catch those who may have a mental illness.

“Jail is not going to be a deterrent effect for someone who is mentally ill. Their mental illness is what is going to drive these crimes,” Weaver said. “Not that they are criminals trying to do bad things. They hear voices and those kinds of things, so putting them in jail isn't going to stop it from doing it the next time.”