Texas Commission on Jail Standards SB 1849 Survey Major Findings Summary

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Background

Senate Bill (SB) 1849, referred to as “The Sandra Bland Act” (SBA) in this report, requires Texas county jails to make changes to minimum jail standards as of September 1, 2017. To address sections of the bill that specifically pertain to the provision of mental health services for individuals who may have a mental health diagnosis or are experiencing a mental health crisis upon booking, the Texas Commission on Jail Standards (TCJS) collected and assessed information from county jails across the state of Texas on their current capability to provide tele-medicine and tele-mental health services, magistrate notification within 12-hours if a defendant is identified as having a mental illness, diversion services for individuals requiring mental health and substance abuse treatment, and continuity of medications. TCJS asked the Meadows Mental Health Policy Institute (MMHPI) to help TCJS assess jail readiness. MMHPI took the lead in developing a questionnaire based on the requirements of the Sandra Bland Act and administering it, through collaboration with TCJS, to all jail administrators throughout Texas.

Methodology

In partnership with TCJS, MMHPI developed a comprehensive survey requesting information to assist TCJS in assessing each county jail’s readiness to implement the Sandra Bland Act across areas such as medical and mental health care, transportation, tele-health/tele-psychiatry services, and partnerships with treatment facilities. The survey was provided in two formats: online through Survey Monkey and in a portable document format (PDF) for jails who preferred a non-electronic response format. The survey was disseminated to jail staff on July 31, 2017, and responses were accepted through September 25, 2017. TCJS provided follow-up via email and phone calls to jails that had not responded by specified submission deadlines, and all PDF survey responses were either mailed or emailed to TCJS, who then forwarded them to MMHPI. All responses consist of self-reported information from the county jail staff.

This report provides a summary of survey responses received from 233 county jails (all but one of the 234 currently operating county jails across the state1) that submitted responses either online or in the PDF format. This summary includes only questions that pertain to compliance with the standards set within SB 1849, and provides a general summary of major issues. The information provided in this report is not intended as a comprehensive analysis of all survey findings, nor should it be considered to be an assessment of any specific county jail’s readiness to implement the Sandra Bland Act.

1 This total does not include three city jails or 19 county jails that are currently closed. Matagorda County Jail did not submit a response to the survey, and while Sterling County Jail submitted a completed survey, the responses were not included in this summary because the jail is now closed. For counties that submitted more than one complete response, the second submitted response was used in the development of this document.
Some respondents did not complete the full survey, and some questions in the survey were not pertinent to all respondents (e.g., if a respondent reported not having tele-health equipment, they were instructed to skip the next question about the use of tele-health equipment). Therefore, some of the response summaries will show a total response less than 233. Please refer to Appendix A for a list of county jails that submitted a complete response to the survey. Appendix B lists county jails that submitted an incomplete response to the survey.

Survey Results Summary
24-Hour On-Site Medical Care

The Sandra Bland Act (SBA), amends the Government Code to require the Commission on Jail Standards, no later than September 1, 2018, to give prisoners the ability to access a mental health professional at the jail or through a tele-mental health service 24 hours a day, and to give prisoners the ability to access a health professional at the jail or through a tele-health service 24 hours a day. One hundred and eighty-one (181) out of the 232 jails that responded to this question currently do not provide 24-hour on-site medical care in the jails.

“Do you have 24-hour medical care on-site in the jail?” (n=232)²

² One respondent skipped this question.
Access to Transportation to Medical Facility

The SBA amends the Government Code to require the Commission on Jail Standards, no later than September 1, 2018, to provide for a prisoner to be transported to access a health professional if a health professional is unavailable at the jail or through a tele-health service. Nearly all of the 232 jails that submitted responses to this question indicated they provide immediate access for transportation to a medical facility.

“Do you have immediate access for transportation to a medical facility for services?” (n=232)

Access to Inmate Medical Information

For respondents indicating that medical services are provided to county jail inmates through a contract with a private vendor, approximately 78% (87 respondents) reported that jail staff have access through the private vendor to medical information for inmates under their supervision.

Do jail staff have access through the private vendor to medical information for inmates they supervise? (n=112)³

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³ This question pertains only to jails that reported they contract with a private vendor for medical services.
Availability of Tele-Health Equipment
The Sandra Bland Act (SBA) amends the Government Code to require the Commission on Jail Standards, no later than September 1, 2018, to give prisoners the ability to access a health professional at the jail or through or tele-health service 24-hours a day, or, if a health professional is unavailable at the jail or through a tele-health service, provide for a prisoner to be transported to access a health professional. The chart below indicates that 180 out of the 231 county jails that submitted a response to this question (about 78%) do not have tele-health equipment to provide 24-hour care to inmates.

“Do you have tele-health equipment?” (n=231)

Use of Tele-Health Equipment
Of the county jails indicating they have tele-health equipment at their facilities, about 86% (49 out of 57 respondents) reported that the equipment is currently in use.

Is the tele-health equipment currently in use? (n=57) ⁴

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⁴ While this question pertains only to the 51 jails that reported having tele-health equipment, four respondents who reported not having tele-health equipment (at which point the survey should have redirected them to skip this question) responded that tele-health equipment is currently in use at the jail. Two respondents who reported tele-health equipment is available at their facilities did not respond to this question.
Observation of Inmates “At Risk” for Suicide or Self-Harm
If funding is available from the prisoner safety fund established under the SBA provisions, on and after September 1, 2020, county jails are required to install automated electronic sensors or cameras to ensure accurate and timely in-person checks of cells or groups of cells that confine at-risk individuals. The chart below shows that over two-thirds of the jails surveyed (about 69%) currently have cameras installed.

“Does your facility have cameras in cell areas where inmates classified as ‘at risk’ for suicide or self-harm are confined?” (n=231)

Electronic Jail Check System for Inmates Classified as “At Risk”
As noted above, the SBA requires jails to install automated electronic sensors on and after September 1, 2020, to ensure accurate and timely in-person checks of individuals classified as “at-risk,” if funding is available from the bill’s prisoner safety fund. The chart below shows that only approximately 37% of jails surveyed (86 out of 230) currently provide electronic jail check systems.

“Does your facility have an electronic jail check system (e.g., sensors or wand/scanner system) in cell areas where inmates classified as ‘at risk’ for suicide or self-harm are confined?” (n=230)
24-Hour On-Site Mental Health Care
The Sandra Bland Act (SBA) requires jails to provide inmates with access to mental health services 24 hours a day no later than September 1, 2018. Only 18 out of the 231 jails that submitted responses to this question (about 8%) provide on-site, 24-hours-a-day mental health care.

“Do you have 24-hour mental health care on-site at the jail?” (n=231)

Tele-Psychiatry Equipment
The SBA states that, no later than September 1, 2018, jails are required to provide inmates with access to mental health services 24 hours a day via tele-psychiatry if these services are not provided on-site by the jail. Only 91 out of the 231 jails that submitted responses to this question (approximately 39%) have tele-psychiatry equipment to provide access to care.

“Do you have tele-psychiatry equipment?” (n=231)
Use of Tele-Psychiatry Equipment

Eighty-two out of the 93 jails (about 88%) that reported having tele-psychiatry equipment (as noted in the preceding chart) reported they are currently using the equipment.

“Is the tele-psychiatry equipment currently in use?” (n=93)

- Yes (82)
- No (11)

Non-Network Pharmacies

The SBA requires jails to adopt reasonable rules and procedures no later than January 1, 2018, that establish minimum standards regarding the continuity of prescription medication for the care and treatment of inmates, which may entail contracting with non-network pharmacies. Only 85 out of the 228 respondents to this question (about 37%) are members of a non-network pharmacy.

“Are you a member of a non-network pharmacy?” (n=228)

- Yes (85)
- No (143)

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5 While this question pertains only to the 91 jails that reported having tele-psychiatry equipment, totals for this question are slightly skewed: two respondents who reported not having tele-psychiatry equipment (at which point the survey should have redirected them to skip this question on use of equipment) responded “No” here.
Pharmacy Services
The SBA requires jails to adopt reasonable rules and procedures no later than January 1, 2018, to establish minimum standards regarding the continuity of prescription medication for the care and treatment of inmates. One hundred (100) out of the 227 jails that responded to this question (approximately 44%) contract for pharmacy services.\(^6\)

“Do you contract for pharmacy services?” (n=227)

![Pie chart showing 100 (Yes) and 127 (No) responses.]

Memorandum of Understanding (MOU) with Local Mental Health Authorities (LMHAs)
About 58% of respondents reported that their county jail has a Memorandum of Understanding (MOU) with the local mental health authority (LMHA) in their region for the provision of mental health services and supports to inmates.

“Do you have a Memorandum of Understanding (MOU) with the local mental health authority (LMHA) for mental health services and support provided to inmates?” (n=228)

![Pie chart showing 132 (Yes) and 96 (No) responses.]

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\(^6\) One respondent submitted a response of “N/A” to this question, and was not included in this graph.
Collaboration and Coordination with LMHAs
When asked about departmental participation in collaboration and coordination activities (e.g., task forces, committees) with the LMHA in the jail’s jurisdiction, just under half of respondents (about 46%) reported that they participate in such activities.

“Does your department participate in collaboration and coordination activities with your LMHA such as task forces, committees, or other regularly scheduled meetings to discuss care and continuity of care for inmates?” (n=228)

Notification to Magistrate of Inmate with Behavioral Health Needs
The Code of Criminal Procedure Article 16.22 requires the sheriff to provide notice to a magistrate if there is reasonable cause to believe a defendant has a mental illness or an intellectual or developmental disability. All 227 jails that submitted a response to this question currently provide this notice to a magistrate.7

“Do you provide notice to a magistrate as required by CCP Art. 16.22 when an inmate is booked into your jail demonstrating a need for mental health care?” (n=227)

7 One respondent did not respond “Yes” or “No”; rather this respondent indicated that its inmates are booked in by one of two other counties in the same region. These counties also send notice to the magistrate.
Existing Capability to Notify Magistrate of Inmate with Behavioral Health Needs

The SBA amends the Code of Criminal Procedure to shorten the deadline by which a sheriff is required to provide notice to a magistrate if there is reasonable cause to believe the defendant has a mental illness or an intellectual or developmental disability. The SBA amendment shortens this deadline from no later than 72 hours to no later than 12 hours after receiving this information about defendants. Currently, 216 out of the 226 jails that submitted a response to this question (approximately 96%) reported that they can provide notice within 12 hours of receiving this information.

“Do you have existing capability to send the notice within 12 hours of booking?” (n=226)\(^8\)

Plan to Notify Magistrate of Inmate with Behavioral Health Needs

In response to the question asking if the jail has a plan to send notice to a magistrate within 12 hours of booking, 142 out of the 227 jails (about 62%) indicated that they have a plan to do so, meeting the amended Code of Criminal Procedure Article 16.22.

“Do you have a plan to send the notice within 12 hours of booking?” (n=226)\(^9\)

\(^8\) One respondent responded “N/A” to this question. Inmates for one respondent are booked in by one of two other counties.

\(^9\) One respondent responded “N/A” to this question. Inmates for one respondent are booked in by one of two other counties.
Substance Use Treatment Facilities
The SBA amends the Government Code by requiring law enforcement agencies to make a good faith effort to divert people with substance use issues to a proper treatment center in the agency’s jurisdiction, if it is reasonable to divert them. One hundred and eighty (180) out of the 227 jails that responded to this question (about 79%) reported they do not have treatment facilities available within their jurisdiction for diverting individuals with substance use issues. About 16% of respondents reported they do not know if such a facility is available.

“Is there a substance use treatment facility within your jurisdiction which will accept persons in police custody for diversion?” (n=227)

MOU with Substance Use Treatment Facilities
Just under half (about 45%) of the county jails with a local substance use treatment facility in their jurisdiction have an MOU with the facility.

“Does your department have a Memorandum of Understanding (MOU) or contract with the substance use treatment facility?” (n=18)\(^\text{10}\)

\(^{10}\) While this question pertains only to the 11 jails that reported having a substance use treatment facility in their jurisdiction, totals for this question are slightly skewed: three respondents that reported there is not a facility in their jurisdiction, and four that reported they did not know if there is such a facility, responded with “No” to this question.
Mental Health Treatment Facilities
The SBA requires each law enforcement agency to make a good faith effort to divert people experiencing a mental health crisis to an appropriate inpatient mental health facility in the agency’s jurisdiction, if it is reasonable to divert them. One hundred and fifty-six out of the 228 jails that responded to this question (about 68%) do not have an inpatient mental health treatment facility available for diversion in their jurisdiction. Twenty-two respondents (about 10%) did not know if such a facility is available in their area.

“Is there an inpatient mental health treatment facility within your jurisdiction which will accept persons in police custody for diversion?” (n=228)

MOU with Mental Health Treatment Facilities
When asked if the county jail has an MOU or contract with an inpatient mental health treatment facility in their jurisdiction, three-quarters of respondents (about 75%) reported they do not have an MOU with the facility.

“Does your department have an MOU or contract with the mental health treatment facility?” (n=53)\(^\text{11}\)

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\(^{11}\) While this question pertains only to the 50 jails that reported having an inpatient mental health facility in their jurisdiction, totals for this question are slightly skewed: two respondents that stated there is not a facility in their jurisdiction.
County Hospital District
Over half of the respondents (approximately 56%) reported that there is a county hospital district available within the jurisdiction of the county jail.

“Is there a county hospital district in your jurisdiction?” (n=227)

Yes (127)
No (100)

jurisdiction, and two that reported they did not know if there is such a facility, responded “No” to this question. One respondent that stated there is a facility in their jurisdiction skipped this question.
Appendix A: List of County Jails with Completed Survey Response

<table>
<thead>
<tr>
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Appendix B: List of County Jails with Incomplete Survey Response

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