

ASSIGNING CASES TO SPECIALTY DOCKETS: GETTING IT RIGHT

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Lori M. Tyack

Abstract

An unprecedented number of people living in our prisons and jails are suffering from mental health or substance abuse issues. Some have been clinically diagnosed and are participating in court-ordered treatment programs. Others have not been as fortunate. This project examines the challenges faced by law enforcement, jails and courts as defendants are arrested and processed through the revolving door of the criminal justice system.

Ohio currently has approximately 200 specialized docket courts, each offering a therapeutic non-adversarial treatment approach for non-violent, low-level (misdemeanor) offenders. Recent legislative changes in Ohio have provided courts an opportunity for more creative sentencing. However, effectively treating those with mental health or substance abuse issues must be balanced with public safety – especially maintaining a safe working environment for law enforcement.

In Franklin County, Ohio, nearly half of the sheriff's budget or \$55.9M is allocated for operations of the county jail. Two Licensed Practical Nurses (LPN) and one Registered Nurse (RN) work part-time providing basic services to inmates, but are not equipped to address mental health or substance abuse issues. Defendants arrested and housed in the jail are typically arraigned within the first 24 hours. Those who are granted bond are not always able to pay bond, often remaining in custody until their case is disposed.

The Municipal Court in Franklin County offers a targeted population the opportunity to participate in five specialized docket programs in lieu of jail time. Drug Court, Mental Health

Court, Veteran's Court, CATCH (Human Trafficking) Court, and Opiate Court provide rehabilitative justice treatment programs. The underlying connection for all five specialized dockets is mental health and/or substance abuse issues.

Nationally recognized best practices and standards for drug courts as defined and developed by the National Association of Drug Court Professionals (NADCP) have become the core foundation for certification of specialized docket courts. In the past several years, evidence-based practices, process improvements and new ways to measure effectiveness of specialized dockets have been realized.

This project will investigate the following:

1. How can courts access and use publicly held data for pretrial release in criminal cases?
2. How can the Franklin County Municipal Clerk of Court's Office assist the Court's specialized docket and probation departments in recording and retrieving data collected?
3. How can the Franklin County Municipal Clerk of Court's Office assist the Court in determining which defendants may be best served by having their cases assigned to a Specialized Docket?

In addition, three data collection strategies were used for this project. They included: 1) in-person interviews, personal communications and a review of results from focus groups with key specialized docket stakeholders; 2) an analysis of data collected from the Franklin County Sheriff's Office, the Franklin County Court Clerk, Franklin County Municipal Court specialized docket coordinators and probation staff; and 3) a process review of data collection operations and key intercepts. Comparison charts resulting from the process review provide a unique perspective of data being collected and stored for each defendant processed through the criminal justice system.

Findings indicate that the same or similar data points are being collected by multiple agencies at four key points in time as defendants are processed through the criminal justice system. Redundant data entry and paper files are produced by each agency from the time of arrest to the final case disposition. Paper documents are routinely circulated between agencies due to the lack of electronic data sharing capabilities.

Agencies operate within individual silos and are deprived or unaware of data collected outside the scope of their responsibility. Silos also exist within agencies, making it more difficult for courts and treatment providers to make informed decisions regarding treatment successes or failure for defendants.

Two focus groups were held during this project, producing findings that were relevant and timely. Both focus groups reported that agencies operating within the Franklin County criminal justice system had shared goals for successful outcomes of defendants with undiagnosed or diagnosed mental health and/or substance abuse issues who frequent the criminal justice system. They identified cross-system communication gaps and duplication of efforts as major concerns and recognized that better data collection equates to a better definition of success. They also stated that they were willing to consider new technology that would provide the ability to share electronic data not only with one another, but also at the national level.

The Franklin County Municipal Court Specialized Docket Programs currently meet all certification requirements of the Ohio Supreme Court's Specialized Docket Division, except for one. Electronic data reporting is not possible because the data points collected are stored in Excel spreadsheets and not in a system conducive to electronic reporting. Conversely, the Ohio Supreme Court is not currently accepting electronic reporting from any of Ohio's specialized

docket courts – but are in the process of investigating the benefits of employing statistical analysis software.

The research conducted for this project supports the conclusion that multiple agencies provide the technology needs of the entire Franklin County criminal justice system. Unfortunately, the data collection and storage efforts are redundant, inefficient and burdensome. Valuable staffing, funding and technological resources are stressed to their breaking point. A few of the agencies have technology systems that are outdated, obsolete and not capable of data sharing. No one system is a good fit for all – it is time to work cooperatively to explore the possibility of a new comprehensive shared data system that would meet the goals of all agencies involved in the Franklin County criminal justice system.

Introduction

A new movement is sweeping our nation. Government officials are being asked to recognize the number of people currently in America's jails and prisons who suffer from mental health or drug abuse issues; the overwhelming costs for medical treatment and medication; and the need to take action. Nationwide, over two million people suffering from mental illness or addiction are incarcerated annually in jails and prisons (Rouan, 2015). Chief Justice David Gilbertson, from South Dakota, commented on this trend in his judiciary address before the South Dakota State Legislature, "Unless we successfully address the underlying problem instead of only the criminal charge, we accomplish nothing more than warehousing people for a period of time in jail" (The National Center for State Courts, 2015, p. 7).

Ohio Initiatives

In Ohio, more than 20 percent of the prison population have been diagnosed with a mental illness (Rouan, 2015). State and local legislative leaders are discussing the "need for relaxing Ohio's Criminal code to reduce the number of people going to prison" (Johnson, 2015, p. 1). The Ohio Criminal Justice Recodification Committee, a panel of 24 members nominated by the Ohio legislature, has been tasked with overhauling Ohio's criminal code. The most pressing issue is the cost of treatment for inmates in Ohio's jails and prisons. An estimated \$41.7 million was spent in 2014 to address mental-health care and medications for Ohio's mentally-ill inmates (Rouan, 2015). Sentencing reforms are being discussed that would eliminate flat prison sentences and empower judges to employ creative sentences focused on treatment. In a recent press conference, Senate President Keith Faber stated "This is not about being hard or soft on crime. It's about being smart on crime" (Johnson, 2015, p. 1). On the other hand, treatment of

those clinically diagnosed with mental health or substance abuse issues must be balanced by promoting public safety and maintaining safe working conditions for police officers. After the death of an Ohio police officer by a suspect with a history of mental illness in 2011, the Ohio legislature passed the “Deputy Suzanne Hopper Act” (Walsh, 2014, p. 1). The Hopper Act created a requirement for Ohio’s courts to notify law enforcement once a defendant has been ordered to undergo a mental evaluation or treatment, or if the defendant is declared incompetent to stand trial and released from custody. In response to this legislation, one of the recommendations made to the Ohio Supreme Court by a committee of law enforcement and judicial representatives was for courts to provide notice to law enforcement of an individual’s mental health history (The Ohio Supreme Court, 2014). As a result, the Ohio Supreme Court added Rule 95 to the Rules of Superintendence, requiring courts to file “Form 95 NCIC Mental Health Notice with local law enforcement pursuant to Ohio Revised Code Section 2929.44(B) and 2945.402(E)(1)” (The Ohio Supreme Court, 2014, p. 425). Law enforcement is tasked with entering the information “into the National Crime Information Center Supervised Release File through the Law Enforcement Automated Data System” which can be accessed by all law enforcement agencies (The Ohio Supreme Court, 2014, p. 425).

Franklin County Initiatives

In Franklin County, Ohio, over 60% of the county’s annual operating budget of \$397.4 million is allocated to public safety, security and justice (Marilyn Brown, 2014, p. 7). The majority of the public safety budget is attributed to the Franklin County Sheriff’s Office (Sheriff), whose annual budget for 2015 was \$121.6 Million or 30.5% of the total operating budget of Franklin County (Commissioners, 2015). The Custody/Jail Operations Program and Jail Medical Care Program budgets total \$55,914,215 or 45% of the Sheriff’s total budget

(Commissioners, 2015). On average, 688,000 inmate days were budgeted, with an average daily jail population of 1,885. In 2014, 11,036 inmates were seen for mental health-related issues by an in-house LPN or RN. This compares with 9,941 seen by medical staff in 2013; 10,290 in 2012; and 10,947 in 2011 (Franklin County Sheriff's Office, 2013, p. 39; Crowthers, 2015; Franklin County Sheriff's Office, 2012, p. 34). Franklin County Sheriff Zach Scott recognizes a new strategy is needed, "Like many jails in the U.S., our jails have served as the largest mental health facility in Franklin County and this is not acceptable" (Franklin County Board of Commissioners, 2015, p. 1). Chief Deputy James Gilbert, who served as the President of the Fraternal Order of Police in Central Ohio for six years, is well aware of the crisis:

We need to hit the reset button to develop a new process for handling the mental health crisis. The beds that are available are full. They are not in a secure location – those there can leave on their own which creates recidivism and dealing with the same person. Jails are overcrowded and inundated, the court system is having to deal with the mental health crisis. This is not a situation in which law enforcement should ever feel the only way to deal with the mental health crisis is to arrest out of it (Gilbert, 2015).

Franklin County Municipal Court

Franklin County Municipal Court (FCMC), like other courts in Ohio, has responded to the call for more creative sentences by forming specialized docket programs focused on rehabilitative justice. Currently, FCMC operates five specialized dockets: The Mental Health Program Docket (MHPD); the Alcohol and Drug Addiction Program (ADAP), which includes two classroom instruction courses (ADAP 101 and ADAP 201); the Opiate Extension Pilot

Program (ADAP-OEP); Changing Actions to Change Habits (CATCH);¹ and Veterans Court (MVSSD) (Franklin County Municipal Court, 2014). Some specialized dockets are effective in reaching those individuals who refuse or have failed mental health or alcohol/drug abuse treatment programs. Drug courts, in particular, are more successful in treating individuals because they “provide access to a continuum of alcohol, drug and other related treatment and rehabilitation services” (Bureau of Justice Assistance, 1997, p. 7). In 2014, FCMC defined the goal of the Specialized Docket Department “. . . to reduce recidivism and rehabilitate offenders, thereby protecting the public and, overall, saving the county thousands of tax payer dollars” (Franklin County Municipal Court, 2014, p. 1). In a recent budget hearing, Judge Ted Barrows, who presides over MVSSD, reported that over 200 specialized docket programs currently exist in Ohio (Barrows, 2015).

This project will explore the challenges faced by law enforcement, jails and courts for collecting, storing and accessing information and the national standards for drug and mental health courts as compared to Ohio’s specialized docket certification process. The following questions will be considered during this project:

1. How can courts access and use publicly held data for pretrial release in criminal cases?
2. How can the Franklin County Municipal Clerk of Court's Office assist the court's specialized docket and probation departments in recording and retrieving data collected?

¹ CATCH is a specialized docket program for defendants who are victims of human trafficking and who have pled guilty to “loitering, solicitation, or prostitution” (Franklin County Municipal Court, 2014, p. 56).

3. How can the Franklin County Municipal Clerk of Court's Office assist the court in determining which defendants may be best served by having their cases assigned to a specialized docket?

Literature Review

National Best Practices

Drug courts.

As a result of an epidemic of crack cocaine usage and high prison costs for low-level drug offenders, Miami-Dade, Florida implemented the first drug court in 1989 (National Association of Drug Court Professionals, 2015). The court partnered with drug treatment providers to combat drug abuse, reduce recidivism for low-level offenders, and improve public safety. The goal was to change the behavior and improve the quality of life of those who participated in the program. Based on the success of Miami-Dade's program, by 2007, over 2,147 drug courts existed nationwide (National Association of Drug Court Professionals, 2015). Until 1997, however, standardized practices and evidence-based performance measures were non-existent. Consequently, many drug courts were considered to have inconsistent practices and poorly measured outcomes.

The National Association of Drug Court Professionals (NADCP), founded in 1994, defined and developed the first drug court model. *Defining Drug Courts: The Key Components* later referred to as *Ten Key Components*, was released in 1997 and has become “the core framework not only for drug courts but for most types of problem-solving court programs” (Bureau of Justice Assistance, 1997; Adult Drug Court Best Practice Standards Committee, 2013, p. 1). *Ten Key Components* recommended optimal characteristics for drug court programs and provided guidance for daily operations. Each component contained a corresponding purpose and performance benchmark described and documented in detail. The following is a brief description of the *Ten Key Components*. These principles continue to make a profound impact on specialized docket structure and performance measurements in today's courts.

The purpose of drug courts is to “integrate alcohol and other drug treatment services with justice system case processing” as indicated by Key Component #1 (Bureau of Justice Assistance, 1997, p. 1). This may be accomplished through collaboration between justice partners such as law enforcement, judges, prosecutors, attorneys and court personnel, as well as service providers and community-based services. A “multiphased treatment process” is recommended – the “stabilization phase, an intensive treatment phase and a transitional phase” (Bureau of Justice Assistance, 1997, p. 1).

Key Component #2 advocates for defendant’s rights and encourages prosecutors and defense attorneys to work together as a team. Roles and responsibilities of the team members are clarified, including the role of the judge to “reinforce a non-adversarial atmosphere” (Bureau of Justice Assistance, 1997, p. 3).

Upon arrest, individuals with substance abuse issues are identified and assigned to a drug court program (Bureau of Justice Assistance, 1997). Key Component #3 supports identifying, screening and assessing individuals for drug court programs as quickly and efficiently as possible. Appropriate court personnel or treatment professionals may be the most qualified to provide assessment services (Bureau of Justice Assistance, 1997).

Participants in drug court programs have access to a variety of therapeutic treatment options, from primary health, mental health, social and any other necessary support services (Bureau of Justice Assistance, 1997). Key Component #4 encourages courts to consider other issues that may affect the participant’s likelihood to recidivate, including “mental illness, primary medical problems, HIV and sexually transmitted diseases, homelessness; basic educational deficits, unemployment . . . spouse and family problems” (Bureau of Justice

Assistance, 1997, p. 7). If left unresolved, these issues could potentially hinder long-term recovery.

Court-ordered alcohol and drug testing is an objective way to establish accountability, measure treatment effectiveness and determine a participant's progress in the program (Bureau of Justice Assistance, 1997). Participants are expected to abstain from drug and alcohol use according to Key Component #5. "Testing may be administered randomly or at scheduled intervals" to monitor compliance (Bureau of Justice Assistance, 1997, p. 11).

Key Component #6 suggests that "drug courts establish a coordinated strategy . . . or a common operating plan for treatment providers and other drug court personnel" to reward those who are compliant and appropriately respond to those who are non-complaint during the course of the program (Bureau of Justice Assistance, 1997, p. 14). The terms and consequences for each may be "explained verbally and in writing during their orientation" (Bureau of Justice Assistance, 1997, p. 14).

"Ongoing judicial interaction with each drug court participant is essential" according to Key Component #7 (Bureau of Justice Assistance, 1997, p. 15). Rewards for compliance may include praise from the bench when appropriate. Judges who take an active interest in program participants have an opportunity to display leadership in a positive way that reassures participants yet at the same time holds them accountable for their actions.

Program goals for management, compliance monitoring and effectiveness may be evaluated periodically for continuous improvement. Key Component #8 outlines the purpose of evaluating programs – "Evaluation is the institutional process of gathering and analyzing data to measure the accomplishment of the program's long-term goals" (Bureau of Justice Assistance,

1997, p. 17). Additionally, periodic evaluations may provide support for future program funding opportunities.

Continuing education and training requirements for drug court personnel (including judges), criminal justice partners and service providers “promotes effective drug court planning, implementation, and operations” according to Key Component #9 (Bureau of Justice Assistance, 1997, p. 21). Collaboration begins with a general understanding and a significant appreciation of the roles and responsibilities of each person involved in an event or effort. Training and educational opportunities provide multidisciplinary agencies with a “shared understanding of the values, goals, and operating procedures” of all involved and is essential for the successful coordination of drug court programs (Bureau of Justice Assistance, 1997, p. 21).

Key Component #10, one of the most significant components, encourages – “Forging partnerships among . . . public agencies, and community-based organizations [to] generate local support and enhance drug court program effectiveness” (Bureau of Justice Assistance, 1997, p. 23). This component is invaluable for a number of reasons. First, relationships forged with criminal justice partners, service agencies and community-based organizations ensure consistency in court proceedings and treatment plans. Second, constructive feedback from partners is essential for continuous improvement; and third, partners may provide support for the acquisition of local, state or federal grant funds to continue the court’s efforts of maintaining or expanding specialized docket programs.

As a follow up to *Ten Key Components*, and to assist courts in developing consistent practices and procedures, the Adult Drug Court Best Practice Standards Committee and the NADCP established best practices for ten key considerations for drug courts across the nation.

Adult Drug Court Best Practice Standards Volume I outlined best practices for the following five topics:

1. Target Population
2. Historically Disadvantaged Groups
3. Roles and Responsibilities of the Judge
4. Incentives, Sanctions, and Therapeutic Adjustments
5. Substance Abuse Treatment (Adult Drug Court Best Practice Standards Committee, 2013, p. 2).

Volume II, released in 2015, is a continuation of Volume I and defines best practices on these additional topics:

6. Complementary Treatment and Social Services
7. Drug and Alcohol Testing
8. Multidisciplinary Team
9. Census and Caseloads
10. Monitoring and Evaluation (Adult Drug Court Best Practice Standards Committee, 2015, p. 2).

Differences continue to exist between courts, but the standards and best practices first created for drug courts have since become the nationally accepted model and are still used as a basis for development of specialized docket courts today.

Mental health courts.

In the late 1990s, mental health courts began emerging across the nation as an effective means for providing treatment to individuals charged with crimes who were suffering from

mental health or substance abuse issues. Many of these specialized docket courts had unique approaches, yet shared common characteristics that were founded in the *Ten Key Components* developed for drug courts (Bureau of Justice Assistance, 1997). These characteristics included: a problem-solving approach to justice; judicial participation; specialized treatment plans; status hearings; incentives and rewards for compliance and sanctions for non-compliance; and a graduation process for those who completed the program (Council of State Governments Justice Center, 2007).

Improving Responses to People with Mental Illnesses: The Essential Elements of a Mental Health Court (hereinafter *Essential Elements*) was prepared and released by the Council of State Governments Justice Center in 2007 (Council of State Governments Justice Center, 2007). The objective was to define and identify the key principles of mental health courts and to provide best practice guidelines for daily operations. Additionally, the focus was to develop and implement intervention strategies for law enforcement. Strategies other than arrest were identified to accelerate the process of assessment and treatment for individuals with undiagnosed mental health issues.

Essential Elements describes ten objectives for the development and implementation of a mental health court program (Council of State Governments Justice Center, 2007). *Essential Elements* also incorporated best practices and standards as set forth by *Adult Drug Court Best Practice Standards Volumes I and II*, creating a more comprehensive document (Adult Drug Court Best Practice Standards Committee, 2013; Adult Drug Court Best Practice Standards Committee, 2015; Council of State Governments Justice Center, 2007). For purposes of this project, *Essential Elements* 1-3 are most relevant (Council of State Governments Justice Center, 2007).

Essential Element #1 promotes collaboration among criminal justice partners, mental health professionals and social services (Council of State Governments Justice Center, 2007). This multidisciplinary planning committee is responsible for designing all aspects of a mental health court program. The process begins as the defendant experiences their initial contact with law enforcement and ends in graduation from the program (Council of State Governments Justice Center, 2007).

Targeting specific populations for most efficient use of resources is an important factor in *Essential Element #2* (Council of State Governments Justice Center, 2007). Crisis Intervention Team (CIT) training for law enforcement officers may assist officers in determining which individuals can be taken to a treatment facility for assessment and treatment instead of jail. Eligibility for treatment programs should be based “on defendants whose mental illness is related to their current offenses” (Council of State Governments Justice Center, 2007, p. 2).

Essential Element #3 suggests that timely assessment of an individual’s needs can “accelerate their return to the community and decreases the burden on the criminal justice system” (Council of State Governments Justice Center, 2007, p. 3). Accepting referrals from multiple sources may assist the court in identifying potential participants for mental health court programs and speed up the process between arrest and treatment.

Other specialized dockets such as Human Trafficking and Veteran’s Courts have adopted best practices and standards for drug and mental health courts for their daily operations.

Ohio’s Specialized Dockets and the Certification Process

Ohio’s first drug court opened in Hamilton County in March 1995 (University of Cincinnati Center for Criminal Justice Research, 2000). The target population consisted of

individuals charged with “fourth or fifth degree offenses” with substance abuse issues and “no history of violent behavior” (University of Cincinnati Center for Criminal Justice Research, 2000, p. 5). The program was designed to provide treatment for individuals with substance abuse issues (in lieu of jail time) and to reduce recidivism. The structure of the program was based on the national model for drug courts with an emphasis on “community-based treatment services and judicial monitoring” (University of Cincinnati Center for Criminal Justice Research, 2000, p. 4). After just two years of drug court operations in Hamilton County, the Ohio Supreme Court commissioned a study to “determine the effectiveness of drug courts operating in Ohio” with the long-term goal to use the “evaluation model and data collection process” for future evaluations of Ohio’s drug courts (University of Cincinnati Center for Criminal Justice Research, 2000, p. 2). The University of Cincinnati, Division of Criminal Justice, agreed to perform the evaluation and published its final report in July 2000.

The results of the report indicated that on the surface the Hamilton County Drug Court “was effective in reducing criminality” (University of Cincinnati Center for Criminal Justice Research, 2000, p. 64). The report recommended focusing resources on targeted populations that would be more responsive to treatment. Greater success could also be realized if standardized risk and needs assessments were used to assist treatment providers in determining the best treatment for each participant.

Ten years later, with technical assistance from The National Center for State Courts (NCSC), and in partnership with the Pew Center on the States and the U.S. Department of Justice’s Bureau of Justice Assistance (BJA), “a 13-point policy framework” addressing three core objectives was presented to Ohio legislators (Justice Center, The Council for State Government, 2011, p. 1). The objectives included mandating treatment for drug offenders;

“statewide admissions criteria for community corrections programs that prioritize . . . people who would benefit most from intensive supervision and treatment;” and statewide standards for probation” (Justice Center, The Council for State Government, 2011, p. 1). The recommendations were included in Ohio House of Representatives Bill 86 (House Bill 86), passed by the 129th Assembly and signed into law by Governor Kasich in June 2011.

House Bill 86 also created new requirements for courts. New performance standards were set requiring probation officers to perform needs and risk assessments for defendants after arraignment. In an article entitled “Ohio House Bill 86: 2 years later,” *The Daily Advocate* reported:

As originally conceived, HB 86 was designed to reduce recidivism by increasing rehabilitative treatment, improving education and teaching employment skills to low-level, non-violent offenders. By emphasizing rehabilitation over punishment, the legislation attempts to advance societal understanding of treatment and prevention (Carp, 2013, p. 1).

As a result of the final report released by the University of Cincinnati, Center for Criminal Justice Research, the research performed by the NCSC, and the legislative changes, many of the standards and best practices set by the NADCP for drug court and mental health court programs were integrated into the Ohio Supreme Court standards for certification.

The certification process.

The Ohio Supreme Court defines a specialized docket as “a particular session of court that offers a therapeutically oriented judicial approach to providing court supervision and appropriate treatment to individuals. . . ” (The Ohio Supreme Court, 2014, p. 271). The Ohio Rules of Superintendence, specifically Rules 36.20 through 36.26, identify the requirements for

certification of specialized dockets (The Ohio Supreme Court, 2014, pp. 271-278). Courts are required to pass local court rules or issue administrative orders accepting “Specialized Docket Standards as set forth in Appendix I of the Ohio Rules of Superintendence” and to successfully complete a certification process (The Ohio Supreme Court, 2014, p. 520). These standards include:

1. The Planning Process with Recommended Practices and Policies
 - a. Advisory Committee
 - b. Treatment Team Members
 - c. Membership Term
 - d. Community Outreach
 - e. Sustainability Plan
2. Non-Adversarial Approach
 - a. Training for Prosecutors and Defense Attorneys
3. Legal and Clinical Eligibility and Termination
 - a. Legal Eligibility Screening
 - b. Eligibility Criteria Factors
 - c. Unsuccessful Termination and Neutral Discharge
4. Assessment and Referral
 - a. Clinical Assessments and Treatment Recommendations
5. Individualized Needs and Evidence-Based Practices
 - a. Appropriateness and Clinical Necessity of Case Plans and Services
 - b. Ancillary Services
6. Participant Monitoring

- a. Appearance at Single Court Session
- b. Sharing of Decision Making and Conflict Resolution

7. Status Review Hearings

- a. Appearances Before Specialized Docket Judge During Initial Phase
- b. Judicial Knowledge of Treatment and Programming Methods
- c. Hearings Before the Same Specialized Docket Judge

8. Substance Monitoring

9. Treatment and Other Rehabilitative Services

- a. Treatment Team Knowledge
- b. Separate Tracks for Specialized Docket participants

10. Incentives and Sanctions

- a. Adjustment in Treatment Services
- b. Revision of Time Between Status Review Hearings
- c. Incentives for Compliance
- d. Sanctions for Non-Compliance

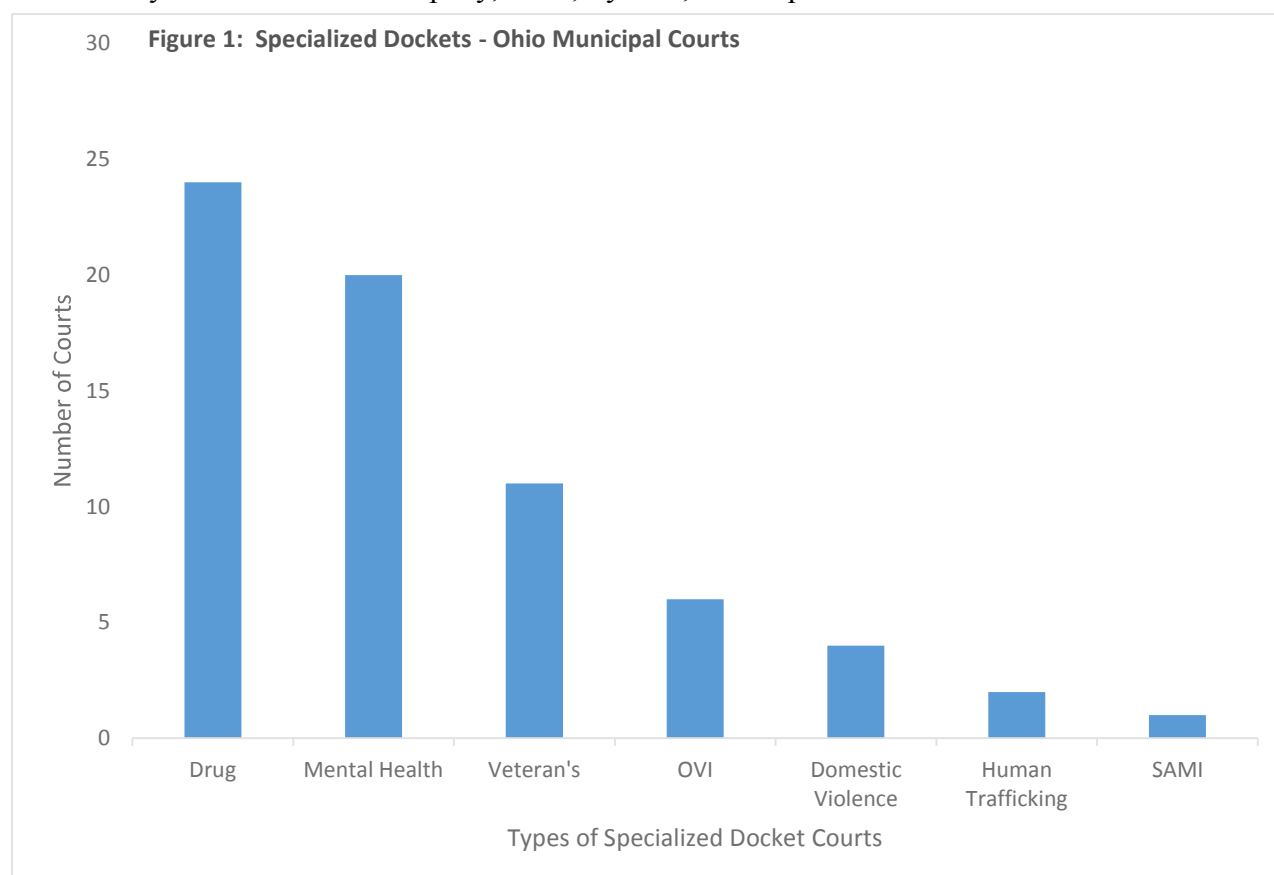
11. Professional Education

- a. Continuing Education Plan
- b. Assessments and Reviews
- c. Treatment Team Member Transition
- d. Mentor Courts
- e. Observation of Other Specialized Dockets
- f. Ohio Specialized Dockets Practitioner Network

12. Effectiveness Evaluation

a. Formal Data Collection Plan

(The Ohio Supreme Court, 2015, pp. 520-530). The Ohio Supreme Court also requires judges who preside over specialized dockets to be certified. Ohio's courts may now use the title "specialized docket" only after the judge receives initial certification (The Ohio Supreme Court, 2015, p. 1). Judges who do not abide by this rule may face ethical sanctions by the Ohio Supreme Court and/or the Ohio Ethics Commission (The Ohio Supreme Court, 2015). As of December 31, 2015, 54 municipal judges were certified to preside over 68 municipal specialized dockets in Ohio. Nine judges have multiple certifications. These dockets include: Domestic Violence, Drug, Human Trafficking, Mental Health, OVI (Operating A Vehicle While Intoxicated), SAMI (Substance Abuse Mental Illness) and Veteran's Courts. Drug courts are the most common type of specialized docket with mental health coming in at a close second (A Community First Solutions Company, 2014; System, Ohio Specialized Dockets Certification



Status Sheet, 2015; System, Active Certification Status Sheet -- Organized by Docket Type, 2015). Figure 1 is a breakdown of Ohio's municipal specialized docket courts.

Council of State Governments

In October 2013, Franklin County leaders contacted the Council of State Governments Justice Center (CSG) for assistance to develop strategies to better serve those challenged with mental illness who frequent the criminal justice system. During a one-year-period, CSG gathered data from “multiple data systems and brought together information related to mental health need, risk of reoffending, and the risk of failure to appear in court” (The Council of State Governments, Justice Center, 2015, p. 1). Additionally, 20 focus groups and over 50 interviews were held with stakeholders of the criminal justice and health systems. The Franklin County Criminal Justice and Community Corrections Planning Board, a committee consisting of Commissioners, elected officials, law enforcement, community leaders and members of local mental health agencies provided input and oversight.

CSG released their report (Report) in early 2015. The study focused on mentally ill defendants housed over a one-year period in the Franklin County jail. Unfortunately, information gathered at the time of booking was limited as identified in the Report:

Due to the lack of systematic screening, assessment, and electronic documentation of the risk and needs of the Franklin County jail population, the CSG Justice Center was unable to capture prevalence rates of serious mental health and alcohol or other drug abuse disorders solely using the data from Franklin County Jail (The Council of State Governments, Justice Center, 2015, p. 4).

The Report was, however, able to determine that the average stay for an adult inmate was 17 days, “while those with a mental illness languish for nearly double that, 32 days” (Franklin

County Board of Commissioners, 2015, p. 1). In addition, over “60 percent of those with a serious mental illness returned to the Franklin County jail within three years, compared with 51 percent of those who are not mentally ill” (Rouan, 2015, p. 1). Commissioner Marilyn Brown stated her concerns regarding prolonged jail stays, saying “One day in jail could do a lifetime of damage to someone with a mental illness, let alone 30 days” (Franklin County Board of Commissioners, 2015, p. 1). She also commented that “The costs are high – to public safety, to the budget and to the lives of our residents – and we are committed to connecting people with mental illness to care and treatment instead of needless incarceration” (Franklin County Board of Commissioners, 2015, p. 1).

The Report contained eight recommendations for reducing the jail population of those suffering from mental health or substance abuse. The recommendations ranged from encouraging law enforcement to take individuals to a treatment facility, not arresting, providing intensive treatment options while housed in the jail, and/or creating a long-term treatment plan upon release from the jail (Rouan, 2015).

Recommendation 2 suggests that law enforcement receive CIT training. Law enforcement is typically the first to encounter individuals with mental health issues or their family members. The objective of CIT training is to assist officers in recognizing the characteristics of mental illness and substance abuse; to effectively communicate; to “evaluate and de-escalate potentially volatile situations and as necessary transport individuals to community-based facilities for evaluation” or to jail when appropriate (Eleventh Judicial Circuit of Florida, 2010, p. 1). The Alcohol, Drug and Mental Health Board of Franklin County (ADAMH) has taken a proactive approach by partnering with the Columbus Division of Police (CPD), Mental Health America of Franklin County, National Alliance on Mental Illness (NAMI)

Franklin County, Netcare Access and 21 local police departments to provide CIT training to enforcement officers in Franklin County (ADAMH of Franklin County, 2015). The benefits of CIT training, according to Chief Deputy James Gilbert with the Franklin County Sheriff's Office, is a reduced risk of injury to everyone involved in a situation and an improved ability to understand the signs of mental health or addiction issues (Gilbert, 2015).

As a result of this training, families often have a sense of encouragement based on the way things are handled by the officer (Gilbert, 2015). Once a 9-1-1 call is received and a CIT trained officer is requested, officers can appropriately “respond to individuals with mental illness and . . . get them safely to an appropriate care facility” (ADAMH of Franklin County, 2015). According to Gilbert, from 2003 to 2016, 550 officers in Franklin County received CIT training (Gilbert, 2015).

Based on the recommendations made in the Report, a resolution was passed by the Commissioners on May 19, 2015 to:

- a. Develop a plan for 2016-2020, consistent with the CSG Justice Center report and recommendations, with measurable outcomes, that draws on the jail assessment data, the inventory of available treatment and service capacity, and policy and funding barriers;
- b. Implement research-based approaches that advance the plan;
- c. Encourage public private partnerships that promote awareness and enhance community safety through education, outreach and destigmatization; and
- d. Assign accountable staff and create processes to track progress using data and information systems, and to report on successes.

(Franklin County Board of Commissioners, 2015, pp. 3-4).

The resolution also included a directive that the Franklin County Criminal Justice and Community Corrections Planning Board (Board) adopt the recommendations of the Report and revise the Franklin County Comprehensive Strategic Justice Plan for 2016-2020 by “develop[ing] comprehensive strategies that focus on the priorities outlined in “a” through “d” above” (Franklin County Board of Commissioners, 2015, p. 4). The Board was instructed to submit a revised plan to the commissioners within a six-month period. In order to accomplish this task, a few members of the Board plan to attend training, and make recommendations for the development and implementation of a customized Sequential Intercept Model (SIM) for Justice and Mental Health Collaboration. SIM is a tool that can be used to identify current processes and provide guidance for appropriate diversion of individuals “with mental and substance use disorders from the criminal justice system” (Administration, 2015). SIM begins with a customized flow chart (map) of the current criminal justice process, from the time of arrest to the release of the individual into the community. Five intercept points are identified as possible intervention sites for individuals to be diverted from the criminal justice system.

- Intercept 1: Law Enforcement (CIT training);
- Intercept 2: Initial detention/first court appearance (Municipal Court);
- Intercept 3: Jails/courts (Mental Health Assessments);
- Intercept 4: Reentry from detention into the community; and
- Intercept 5: Community corrections, probation and parole (Substance Abuse and Mental Health Services Administration, 2015, p. 1).

The Board recently contacted ADAMH to discuss SIM training for applicable partners involved in the Franklin County criminal justice system. Training is currently scheduled for April 2016.

Franklin County Municipal Court

NCSC defines a municipal court as “a court of limited jurisdiction . . . with legal authority over very specific subject matter, cases, or persons for the imposition of limited jail times or limited financial sanctions. . . .” (Administration, 2015, p. 1). These cases include traffic and local ordinance violations, small claims, environmental and criminal misdemeanor offenses and arraignment proceedings for felony cases (Administration, 2015). According to a recent report from the Substance Abuse and Mental Health Services Administration (SAMHSA), “the optimal diversion strategies that are most often overlooked and involve municipal courts are at first appearance (See Intercept 2)” (Substance Abuse and Mental Health Services Administration, 2015, p. 1). Most defendants appearing in municipal court are charged with low-level, non-violent crimes and have underlying mental health and/or substance abuse issues. As a result, defendants who appear in municipal court may have more opportunities for diversion and treatment.

The Franklin County Municipal Court (FCMC) was created in 1916 by the General Assembly of the State of Ohio. It was originally named the Columbus Municipal Court. Prior to 1916, the court operated under the Justice of the Peace system. On July 5, 1955, the Columbus Municipal Court was given county-wide jurisdiction and, in 1968, the state legislature changed the name of the court to Franklin County Municipal Court. The jurisdiction of the court is Franklin County, but includes parts of Fairfield and Delaware counties which were annexed by the City of Columbus. The Franklin County Municipal Court operates under state statute with 14 judges in the General Division and one judge in the Environmental Division. According to FCMC’s 2014 Annual Report:

Judges preside over civil, criminal and traffic cases and conduct both jury and non-jury court trials. Judges also conduct criminal arraignments and preliminary hearings on felony cases; set bond on criminal charges . . . and impose a sentence when a defendant is found guilty of a traffic or criminal charge (Franklin County Municipal Court, 2014, p. 49).

Arraignment of misdemeanor and felony criminal cases occurs six days per week for those in custody and five days per week for those out of custody. From 2010 to 2014, the total average number of cases filed annually for violations of environmental, criminal and traffic laws was 137,668 (Franklin County Municipal Court, 2014). The average of civil cases filed annually over the same time period were approximately 47,368 (Franklin County Municipal Court, 2014).

FCCM originally used “specialized probation officers” to focus appropriate treatment resources in cases where defendants were identified as having a history of “drug usage or chemical dependency, sexually deviant behavior, or mental health issues” (Franklin County Municipal Court, 2004, p. 49). It also reflected in its Annual Reports from 2004 through 2009 that “intensive/specialized probation supervision programs, with a smaller number of offenders assigned to a probation officer specialist” were effective for providing valuable services to defendants without the cost of incarceration (Franklin County Municipal Court, 2005, p. 49).

In 2004, Judge Scott Van Der Karr created the first mental health docket in Franklin County to address repeat offenders who were clinically diagnosed with mental health issues. Defendants accepted into the program were clinically diagnosed as having moderate to severe mental health issues along with a history of non-compliance or refusal to accept treatment (Franklin County Municipal Court, 2014).

Based on the successful outcomes of those who participated in the mental health program, FCMC decided to expand its specialized dockets. Currently, four judges preside over five specialized dockets on specific days of the week in addition to managing their daily dockets. Judge Ted Barrows, who presides over the Veteran's Court, summarized the goal of all specialized docket programs – "From my point of view if I have put the person in a place where they can access services, that is a success" (Barrows, 2015). As of December 2014, 330 defendants were actively participating in FCMC's specialized docket programs (Franklin County Municipal Court, 2014).

A recent graduate of the Mental Health Court stated "Your life doesn't get better with chance, your life gets better by changing your life and that is not always easy -- so I have learned that it takes work and perseverance and a good support system including these great people behind me" (Court, 2015). As these dockets continue to expand to meet the increasing needs of defendants, valuable resources such as staffing, funding and community/mental health services are stretched to their limits.

The four judges of FCMC's specialized docket programs and the ADAP-OEP Pilot have received certification by the Ohio Supreme Court. These programs have been uniquely crafted by judges, court personnel and service providers to meet the needs of the target population. Judges who preside over specialized docket programs have outlined specific objectives and goals to provide maximum opportunity for healing, successful treatment and re-establishment into the community. Each judge also has his or her own unique way of determining whether defendants might benefit from treatment. Judge Paul M. Herbert, who presides over the CATCH Court, has developed a few basic questions that he believes helps to identify defendants who may be victims of human trafficking:

1. Does a defendant have a history of sexual abuse and trauma?
2. Have they been required or pressured to perform sex acts for food, drugs, shelter or anything else of value?
3. Are they ready to change, get treatment, and follow the recommended treatment program? (P. M. Herbert, personal communication, August 14, 2015).

A Specialized Dockets Advisory Committee was established in 2014 to satisfy the requirement of the Ohio Supreme Court and serves as the “policy-making authority” for all five dockets (Court, Changing Actions To Change Habits (CATCH), 2014). Program descriptions along with written policies and procedures were submitted by FCMC as part of the certification process. Target populations, program entry requirements, detailed case flow information and the roles and responsibilities of treatment team members are also included in the program descriptions. Due to the increasing size of the dockets, FCMC recently combined the five specialized dockets to create a specialized docket department. In March 2015, FCMC hired Paige Allen to serve as the first Franklin County Municipal Court Specialized Docket Manager.

Ms. Allen, who has performed program evaluations for several non-profit organizations, identified service gaps and the effects on those individuals with service or treatment needs that were not met. She found that when gaps occur, people find their own way, sometimes ending up in jail and the criminal justice system. The common themes for individuals who end up in the criminal justice system include issues with housing, transportation, underlying mental health concerns, unemployment and difficulty maintaining relationships with family or friends (Allen, 2015).

Several years ago, Ms. Allen became aware of specialized dockets when a number of her clients, who were in residential treatment programs, became participants. She found that

specialized dockets were addressing individuals who were considered to have a high risk for reoffending and a serious need for multiple treatment services in an effective way -- by mandating compliance as a consequence to criminal charges. The benefit of dealing with these cases in municipal court is that the individuals “. . . still have families and support networks in place – it is more difficult to put the pieces together once the situation becomes too severe and the person becomes dysfunctional in all areas of their lives” (Allen, 2015). But she still found a great deal of resistance from the criminal justice system. The focus of the criminal justice system was to be tough on crime, but at the same time there was a large gap in public awareness regarding the true issues of addictive illness. The opiate epidemic has raised public awareness by crossing all socio-economic boundaries and changing the associated stigma of addictive illness. As a result, the public and the criminal justice system have become more focused on “. . . mobilizing public awareness – we are all safer if our approach to helping people with acute, chronic and underlying issues is to help them get better” (Allen, 2015).

Ms. Allen recently discussed with leadership at the Supreme Court of Ohio the benefits of a shared database across the agencies collaborating on the specialized docket team. Her vision is to create a “database that captures all the court and specialized docket information in a fashion that does not require specialized docket staff to constantly input the detailed data” (Allen, 2015). The priority of the court, however, is to determine the data elements that will be most conducive for analysis and tracking of defendants through specialized docket processes and to measure outcomes and assess performance of treatment programs. Recently, Ms. Allen was advised that the Ohio Supreme Court plans to purchase a statistical analysis program (SPSS) to assist those courts in Ohio that conduct specialty courts. Currently, FCMC is using Excel spreadsheets to capture data points and has not employed a case management system for this purpose.

Other Studies/Reports

An evaluation study of a criminal justice reform specialty court – CATCH court.

Franklin County Municipal Court operates one of the few specialized dockets in Ohio for victims of human trafficking. CATCH Court was recently evaluated for its effectiveness in treating victims of human trafficking and preventing recidivism. “Five goals and objectives were formulated” for the study (Miner-Romanoff, 2015, p. 2). The study was conducted through surveys and group settings of in-person interviews. The challenges of the study were driven by a lack of data and an unwillingness for participants of the program to meet individually with the researcher. Most of the participants suffered from trust issues because of their history of trauma. Participants were referred to the program by attorneys, judges, law enforcement, other courts, and former participants. Recommendations for the program included “more frequent and discrete data collection by the court, larger sample sizes, and individual participant in-depth interviews” (Miner-Romanoff, 2015, p. 3).

Integrated criminal justice information system needs assessment.

In late 2010, the Franklin County Board of Commissioners and the Franklin County Criminal Justice and Corrections Planning Boards commissioned an Integrated Criminal Justice Information System Needs Assessment to identify and provide support for a multi-agency shared electronically-maintained justice database system (Agile Technologies, 2010). Eleven agencies participated in the study:

- Common Pleas General Division Clerk of Courts
- Columbus Division of Police;
- Common Pleas – Appeals Division;

- Common Pleas – Domestic and Juvenile;
- Common Pleas – General Division;
- Franklin County Municipal Court;
- Municipal Clerk of Court;
- Franklin County Prosecuting Attorney;
- Franklin County Public Defender;
- Franklin County Sheriff's Office; and
- Franklin County Probate Court.

The study examined the technology systems of 11 participating agencies and their ability/inability to interface with other agencies for information sharing. Objectives included:

- Determine the probability of an integrated criminal justice information system that allows participating agencies to compile and share electronically maintained criminal justice data;
- Allow participating agencies to modify and enhance individual systems as necessary to accommodate changing needs;
- To incorporate federal and state data standards (promoting data sharing with federal and state agencies);
- Improve accuracy and timeliness of information flow using electronic data systems to reduce the reliance on paper (Agile Technologies, 2010, p. 5).

The findings of the study concluded:

Franklin County's criminal justice information system is comprised of an array of disparate databases with little interoperability. Information silos exist not just among the various criminal justice agencies, but also within them, as some

agencies have disparate databases in concurrent use. Franklin County's criminal justice processes are largely paper driven, with personnel at each agency involved in large amounts of redundant data entry. There are several opportunities for improvement, including improvement of data management systems [and] automation of data exchanges. These improvements will reduce wasted time, errors and reliance on voluminous paper copies. (Agile Technologies, 2010, p. 6).

The research performed during this project will assist in answering the following questions:

1. How can courts access and use publicly held data for pretrial release in criminal cases?
2. How can the Franklin County Municipal Clerk of Court's Office assist the court's specialized docket and probation departments in recording and retrieving data collected?
3. How can the Franklin County Municipal Clerk of Court's Office assist the court in determining which defendants may be best served by having their cases assigned to a specialized docket?

Methodology

The methodology used to gather information and data for this project consisted of three approaches. The first was a literature review of nationally accepted standards and best practices for drug and mental health courts. A brief history of the first specialized courts in Ohio provided the background for this project and the foundation for the Ohio Supreme Court Specialized Docket Certification process. The literature review also included examination of two professionally written reports produced by a respected research professor from Franklin University and a reputable technology firm.

Second, a series of in-person interviews, personal communications and telephone calls were performed with criminal justice partners and community agencies. Appendix A is a list of individuals interviewed who either regularly participate in one of the five specialized docket courts in Franklin County Municipal Court or who serve on the Franklin County Criminal Justice and Community Corrections Planning Board. Two focus groups, consisting of members of the Franklin County Criminal Justice and Community Corrections Planning Board, were held in 2015. They were tasked by the Franklin County Commissioners to revise the 2016-2020 Franklin County Strategic Justice Plan and the 2016-2020 Franklin County Comprehensive Strategic Plan (Reentry Coalition). Their findings were relevant to this project.

Third, data analysis was performed by comparing the data collected by the Franklin County Sheriff (Jail); the FCMC's Probation Department; the FCMC record via the FCMC Clerk of Court; the FCMC Specialized Docket Coordinators; and the Minimum Data Reporting Requirements of the Ohio Supreme Court Specialized Docket Department.

Review of National Standards and Best Practices

The literature review consisted of an in-depth study of the national standards and best practices as published by the NADCP, the CSG Justice Center, the NCSC, and the U. S. Department of Justice, Office of Justice Programs, BJA. These standards and best practices were adopted by the Ohio Supreme Court and incorporated into the Specialized Docket Certification Program standards for Ohio's courts.

A comparative review of the policy and procedure manuals for each of the five specialized dockets in FCMC were performed to identify process consistency. The specialized Opiate Court program guide and description were combined with that of Drug Court. As of the time of the project, standards and best practices for Human Trafficking Courts had not been adopted. The Ohio Supreme Court's certification process includes 12 standards, which mirror the national standards.

Interview Summary

In-person interviews, personal communications and telephone calls were conducted with court personnel, deputy clerks, judges, probation officers, specialized docket staff and sheriff's deputies (See Appendix A).

Two in-person interviews and several personal communications were conducted over a six-month period with Paige Allen, FCMC's Specialized Docket Manager (See Appendix B).

An interview was conducted with Judge Ted Barrows on August 5, 2015. Judge Barrows has presided over municipal court cases for the past eleven years and has a special interest in the veteran's courts. He currently manages and presides over the MVSSD (Veteran's Court) (See Appendix C).

Four FCMC judges (Judge Scott Van Der Karr, Judge David B. Tyack, Judge Ted Barrows and Judge Paul Herbert) were contacted by personal communication (August 4, 2015) and asked two questions related to their specialized dockets. Of the four, only two judges responded (See Appendix D).

Judge Paul M. Herbert, who has served on the bench for eleven years, conducted a continuing legal education (CLE) class on the topic of human trafficking in December 2015. Judge Scott Van Der Karr, a 20-year veteran of the bench, presided over one of the first mental health courts in Ohio, and started a drug court in 2009. Judge Van Der Karr made a guest appearance at the CLE class (See Appendix E).

Judge David B. Tyack² has served on the municipal court since 2007. He presides over ADAP (drug court) and assumed responsibility for the Mental Health Docket Program in 2015 when Judge Scott VanDerKarr retired from the court.

Chief Deputy James Gilbert, with the Franklin County Sheriff's Office, has 23 years of experience in law enforcement. He also served as the elected President of the Fraternal Order of Police, Capital City Lodge 9, representing 28 agencies in Central Ohio for six years. An in-person interview was conducted on November 30, 2015 (See Appendix F).

Chief Deputy Geoffrey Stobart, second in command at the Franklin County Sheriff's Office, is responsible for managing more than 850 defendants in Franklin County's main jail. Two questions were posed via personal communication on November 19, 2015 (See Appendix G).

Shanon Crowthers, Director of IT for the Franklin County Sheriff's Office, was interviewed by telephone on December 8, 2015. Annual reports for the Sheriff's Office were

² Judge David B. Tyack is a cousin by marriage.

available on the Sheriff's website, but only included years 2011-2013. Additional data regarding the number of jail inmates who were seen for mental health issues was needed for this project (See Appendix H).

Several personal communications took place with Molly Gauntner, Chief Probation Officer for FCMC. Ms. Gauntner regarding the structure of FCMC's probation and specialized docket departments (See Appendix I).

Challenges

Two of four judges presiding over FCMC's specialized dockets were interviewed for this project. Two had busy schedules and were unavailable for comment. The original plan to conduct a focus group consisting of court professionals and judges was not possible due to scheduling conflicts. However, two focus groups were conducted by the Franklin County Criminal Justice Planning Board, consisting of judges, prosecutors, law enforcement, public defenders, probation officers and health care providers. The results of the focus groups were relevant and used in place of the originally planned focus group.

Data Collection and Comparison

The Franklin County Sheriff's Office provided data regarding the number of defendants in custody who were seen by a LPN or RN for mental health and/or substance abuse issues from 2011-2014. Slate cards or paper records containing data gathered at the time of booking into the jail were obtained to compare data points to those collected by the clerk's office, FCMC specialized docket coordinators and probation (See Appendix J).

A new bail interview process for defendants in custody was implemented by FCMC's probation department on January 11, 2016. FCMC recently received a Probation Improvement

and Incentive Grant from the Ohio Department of Rehabilitation and Correction. The purpose of the grant was to improve best practices in the criminal justice system. A pilot project is currently being conducted by FCMC's probation department for "in-custody, bail investigations targeting the criminal misdemeanors population (with the exception of minor misdemeanors and domestic violence) and OVI offenses" (Molly Gauntner, personal communication, February 9, 2016). A current copy of probation's interview form was obtained and data points were compared to data points on the slate card, information collected by the clerk of courts, specialized docket coordinators and the reporting requirements of the Ohio Supreme Court (See Appendix K).

The current flow chart of the Franklin County criminal justice system may be found in Figure 2 (See Appendix L). Descriptions of the process are included in the findings section of this paper. The clerk of court's office is responsible for keeping an accurate copy of the record of the court and routinely collects and stores data points related to the same. A random sampling of defendants whose cases were transferred post-arraignment to specialized dockets during a nine-month period from January 1, 2015 to September 29, 2015 were selected to identify and analyze data points collected and stored in the clerk's office case management system. An electronic query was performed to determine qualifying defendants' cases. These cases included 39 defendants total:

- 10 of 49 defendants filed for admission into the MHPD;
- 10 of 166 defendants filed for admission into the ADAP;
- 10 of 29 defendants filed for admission into the CATCH; and
- 9 of 10 defendants filed for admission into the MVSSD (one defendant had two cases)

Paper files were then pulled from file room shelves of the FCMC clerk's office on September 29, 2015 and comparisons were made to the equivalent record(s) available in the

electronic database. Most of the 39 defendants participating in specialized dockets had multiple cases. A total of 114 cases were analyzed for this research, which were derived from the sample of 39 defendants. Appendix M identifies data points used to analyze the court's records. Appendix N through Q represent data point tracking for cases accepted in each specialized docket.

Kathy Crandall, currently serves as the Director of Homeland Security for Franklin County. She also serves on the Franklin County Criminal Justice and Community Corrections Planning Board and is responsible for conducting focus groups for the Stepping-Up Initiative. Several in-person interviews were conducted. Personal communication was used as a primary source of communication between August 1, 2015 and January 25, 2016 (See Appendix R).

Focus Group 2 participants were members of the Franklin County Reentry Coalition. Dr. Kilty, Professor Emeritus from the Ohio State University College of Social Work, conducted the meeting. A Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis was completed by the group. Their findings were relevant to this project (See Appendix S).

Excel spreadsheets used by the Franklin County Specialized Docket Coordinators were too large and cumbersome to provide in the Appendices, but were reviewed for this project. Paige Allen, Specialized Docket Manager for the Franklin County Municipal Court, reported that the specialized docket coordinators do not collect the same data or use the same format (Allen, 2015). Instead of providing copies of the numerous spreadsheets, she identified common data points listed (See Appendix T).

A copy of the Ohio Supreme Court Specialized Docket Department's data reporting requirements were provided by Ms. Allen. In an interview conducted on July 11, 2015, Ms. Allen indicated that the Ohio Supreme Court requests basic data such as age, sex, date of birth,

type of charge, drug of choice, diagnosis, type of specialized docket, successful completion, and unsuccessful completion (an administrative discharge or a neutral discharge) (Allen, 2015) (See Appendix U). As of late 2015, the Ohio Supreme Court has not published a preferred reporting format, and are not currently collecting data from Ohio's specialized docket courts (Allen, , 2015).

Challenges

The Franklin County Sheriff's Office does not currently identify individuals with mental health and substance abuse issues and is currently in the process of implementing a new assessment procedure to screen for these issues. Data available was limited to the number of inmates per year who voluntarily requested mental health care from the LPN or RN on staff in the jail.

In September 2015, FCMC's probation department received a Probation Improvement and Incentive Grant to implement a new bail interview process for defendants who are in custody for the 2016 and 2017 fiscal years. Differences in opinion between the Franklin County Public Defender's Office (public defender) and FCMC's probation department delayed the project's implementation until early 2016. Representatives of these agencies expressed concerns regarding the defendant's right to have an attorney present when discussing issues of an incriminating nature (i.e., drug/alcohol abuse). Interview forms were not available until early January 2016, causing a delay for data point comparison.

The electronic query of the database was not difficult to run, but locating and maintaining the paper files for comparison was difficult. The selected files remained open during the time of

review which meant that some files were checked out (e.g., a few of the defendants had warrants filed, which led to probation retrieving the files).

Findings

Finding 1: Various Agencies Are Collecting Data on Each Defendant at Four Key Points in the Criminal Justice System and Stored in Agency-Specific Formats in Independent Technology Systems.

Personal information is collected at four key points in the Franklin County criminal justice system and stored in multiple independent systems. Data is collected and stored in both electronic and paper formats at all four points. See Appendix L for a flow chart of the current criminal justice system in Franklin County, Ohio. Blue stars represent data collection points of the four separate agencies working independently:

1. Arrest – Law enforcement and clerk’s office;
2. Correction Center 1/Jackson Pike Correctional Facility – Sheriff’s office;
3. FCMC Probation; and
4. FCMC Specialized Dockets – Coordinators.

The first key data collection point occurs at the arrest of an individual. Law enforcement officers present the defendant (in custody) along with a written complaint to the clerk of court’s office for filing. Complaints contain the name and address of the individual being charged and general information such as height, weight, hair and eye color, driver’s license number or social security number. State or local criminal statutes allegedly violated are recorded as well as the level of the crime – misdemeanor or felony, the date of offense and if the individual was arrested or summonsed to court. If the individual received a summons, a court date and time are recorded on the document and the summons serves as notice of a hearing. This information is then entered into the case management system (CourtView) administered by the clerk of court’s office and a

case number is assigned and recorded on the original complaint form. The individual is then taken to the jail for processing.

The clerk's office is responsible for maintaining and updating CourtView using predetermined data points contained in the court's record. The clerk's database contains court records from 1972 to the present. Access is provided to over 400 internal clerk and court staff as well as 400 external users (i.e., law enforcement, public defenders, common pleas court staff, prosecutors and the adult parole authority). Fifty-one security profiles exist within CourtView, regulating a user's ability to view, insert, update, delete and print certain information. Profiles may be tailored based on six modules: Case Management, Judicial Management, Financial Management, Accounts Receivable, Adult Probation and Systems Administration.

The second key point for data collection takes place as the individual is processed and accepted into the jail. The sheriff's office assigns a slate number to each defendant. Data contained on the complaint form is compiled and entered into a DOS-based jail system managed by the sheriff's office. A slate card is then generated, a copy of which is provided to the clerk's office. The slate card contains the assigned slate number, basic personal information, prior charge/case history, medical and psychological-related information, holders filed by other jurisdictions (ICE, other counties or states), name of arresting officer and miscellaneous other law enforcement information. The clerk's office then compares the data points on the slate card to the data in CourtView. Medical/physical conditions are not redacted by the sheriff's office, but are protected by HIPAA laws. The clerk's office does not include this information in its database. The slate card does not become part of the official court record, but is used by bondsmen, attorneys and the court as a comprehensive report of the defendant's personal and case history (See Appendix J).

Key data collection point #3 involves FCMC's Probation Department. On January 11, 2016, probation began a new project, interviewing newly arrested defendants as part of a pretrial bail pilot project. The Pretrial Bail Interview form is used to collect basic information as well as the mental health and physical health of the defendant. The purpose is to provide information to the court at the time of arraignment to appropriately:

- Assess a person's risk of failure to appear in court;
- Assess a person's risk of violating pretrial release with a new offense; and
- Reduce the overall length of stay for Pretrial Detainees (with special attention to the severely mentally ill) (Gauntner, Chief Probation Officer, Franklin County Municipal Court, 2016).

Originally the pilot project included plans to assist in the identification of defendants with mental health/substance abuse issues (to improve treatment opportunities) but due to concerns expressed by the public defender, it has been put on hold. This initiative is in line with *Key Component 3*, which suggests that the most opportune time to identify whether the defendant has mental health or drug/alcohol issues is immediately following arrest. Swift and speedy action also promotes public confidence and trust in the criminal justice system (Bureau of Justice Assistance, 1997). Defendants appearing in arraignment court who have participated in the pretrial bail interview process may be provided a fast track into the specialized dockets because the judge is able to access readily available information (See Appendix K).

Specialized docket courts are the fourth key point for data collection. Defendants identified with mental health and/or substance abuse issues must be referred by a judge, attorney, probation officer, law enforcement officer, or prosecutor in order for their case to be transferred to one of five specialized dockets. Once the court determines the defendant is qualified for a

specialized docket, FCMC's specialized docket coordinators meet with the defendant to collect additional data.

This four-step process of duplicative data collection in the Franklin County criminal justice system is redundant, inefficient and is a heavy burden on agencies whose valuable resources such as staffing, funding and technology are already at their breaking point.

Finding 2: Agencies Who Collect Data at Four Key Points Work in Silos and Are Deprived and/or Unaware of Information Collected Outside Their Scope. Inter-Agency Policies Are Not Currently in Place for Data Sharing.

In 2009, the Franklin County Criminal Justice and Corrections Planning Boards (with support from the Franklin County Commissioners) and the Franklin County Data Center contracted with Agile Technologies (Agile) for an "Integrated Criminal Justice Information System Needs Assessment" (Agile Technologies, 2010, p. 5). Eleven agencies were identified as "critical for implementing an integrated criminal justice information system" (Agile Technologies, 2010, p. 6). Goals outlined in the final report contained the following:

- Facilitate Data Sharing – automatic data push/pull to specific agencies;
- Streamline Processes – capture data one time at the point of origin;
- Establish Standards – standardize names and formats for data elements, forms, coding;
- Improve Accuracy and Timeliness – improve information flow and accuracy, eliminate redundant entry; and
- Ensure Security and Control – ensure data integrity and privacy of records (Agile Technologies, 2010, pp. 5-6).

Agile met with representatives of all eleven agencies. They also collected and analyzed “relevant documents and screen shots” to gain an understanding of the agency’s role, their data system and business processes (Agile Technologies, 2010, p. 7).

The report concluded that “Franklin County’s criminal justice system is comprised of an array of disparate databases with almost no interoperability. These information silos exist not just among the various criminal justice agencies, but within them. . . ” (Agile Technologies, 2010, p. 6). Additionally, findings indicated that the processes were paper driven with each agency performing redundant data entry. Opportunities for improvement were suggested by Agile, however, no action was taken by any of the eleven agencies who participated in the study.

In 2015, the Franklin County Criminal Justice and Community Corrections Planning Board sponsored two focus groups consisting of public defenders, prosecutors, law enforcement officers, jail personnel, probation staff, the municipal clerk of court, commissioners, behavioral health service providers and community leaders. Kathy Crandall, the Director of Homeland Security and Justice Programs for Franklin County, moderated Focus Group 1. The purpose of the first focus group was to develop and recommend strategies to address the findings of the recently released Center for State Courts Report (CSG Report) (The Council of State Governments, Justice Center, 2015). The report outlined challenges faced by individuals who suffer from mental health or drug/alcohol abuse issues and frequent the criminal justice system. Three priorities were identified:

1. Data
 - a. Identify data elements
 - b. Identify Data Repository and Process
 - c. Develop Information Sharing Protocols

2. Develop Bridge Teams

- a. Define Team Composition
- b. Develop Coordinated Training
- c. Build Capacity from Triage to Community Release (Jail)
- d. Identify Clients

3. Expand CIT Training, Bed Capacity, Guardians and Psychiatrists (Crandall, personal communication, December 5, 2015).

Interestingly, out of the eleven agencies who originally participated in the Agile study, five agencies sent representatives to attend the focus group meeting. Six years later, the issues identified were similar if not identical. Agencies remain uncertain as to the data points being collected and by whom at each stage of the criminal justice system. A shared data repository has not been implemented. Data sharing protocols have not been established.

The results of the second focus group were more comprehensive. It was facilitated by Dr. Kilty, Professor Emeritus from the Ohio State University College of Social Work. Dr. Kilty used a Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis to develop the recommendations of the second focus group (K. A. Palmore, personal communication, January 25, 2016).

The focus group identified shared goals and outcomes as a strength, but identified poor and infrequent communication between agencies as a weakness. Ineffective communication between agencies may cause redundant and inconsistent data collection triggering a lack of credible data to support outcomes. The focus group indicated that they were in support of new technology for improved data collection and tracking as well as participating in a national information sharing system.

Table 1 below is a summary of relevant strengths, weaknesses, opportunities and threats (SWOT) as defined by the Franklin County Reentry Coalition (See Appendix Q for the complete SWOT analysis). The strengths, as identified by the focus group, indicate the group's willingness to see beyond individual agency responsibilities and understand the needs of others. The theme of the weaknesses section is a lack of communication between agencies – one reason is because they are physically too spread out. Franklin County is in the process of designing a new jail facility. The proposed jail will consist of multiple components to house agencies such as mental health or substance abuse service providers, probation, classrooms for training or group meetings, an arraignment courtroom and an area for the clerk of court to accept bond payments. The “one-stop-shop” reference supports the need to have these agencies in one convenient location.

The opportunities portion of Table 1 supports the need for advancements in technology to improve processes and to substantiate the success of agencies' programs. The threats section also suggests new technology is needed, however, concerns were expressed that if the legislature amends laws to reduce the incarceration requirements of certain misdemeanors, the societal impact or humiliation of having a mental illness or substance abuse issue will be lessened, thereby causing courts to be overwhelmed with new cases. See Appendix S for the complete SWOT analysis report.

Table 1: The Franklin County Reentry Coalition Focus Group SWOT

Strengths	Weaknesses	Opportunities	Threats
Shared goals and outcomes	Cross system communication-gaps & duplication of efforts	One-stop-shop, create smartphone app to track usage	Lack of credible data collection to demonstrate outcomes
Council of State Government initiative & findings	No centralized database for services-lack of data collection	Better data collection-better definition of success	Sustainability of efforts
Respect for each other's realities and challenges	Lack of one-stop-shop services; coordination is needed	New technologies embraced and available	Sentencing reform could overwhelm local capacities
Funding attainments		Sharing of information at a national level	Stigma (incarceration & mental health)

Individual interviews conducted for this project included representatives of agencies who actively collect data at one of the four key points mentioned in Finding 1:

- Franklin County Sheriff's Office (Chief Deputy Geoffrey Stobart);
- FCMC Clerk's Office;
- FCMC Specialized Docket Department (Paige Allen, Manager); and
- FCMC Probation Department (Molly Gauntner, Chief)

Representatives provided insight into the roles and responsibilities of each agency involved in the Franklin County criminal justice system. One of the most consistent comments from those interviewed was that improved technology and information sharing could enhance treatment and recovery opportunities for defendants.

Paige Allen described the data being collected by the specialized docket coordinators as simple and basic. She stated that the objective is to ensure that the data is valid and reliable. The

data should be valid, meaning that it is measuring what the court wants it to measure – that the right questions are being asked. And it should be reliable, meaning that it measures the same thing consistently. The data elements identified are: age; sex; date of birth; type of charge; drug of choice; diagnosis; specialized docket; successful/unsuccessful completion; or if they received an administrative or neutral discharge. Neutral discharge designates a defendant passed away or had a medical condition that prohibited their participation. She commented that a lot of information is being eliminated because there are more important things to track (Allen, 2015).

Ms. Allen also reported that currently, FCMC's specialized docket department does not have access to data collected and stored by FCMC's probation department. She indicated that access to this information could improve treatment decisions made at weekly multi-disciplinary team meetings (Allen, 2015). For example, providing access to the number of meetings participants attend, drug screens performed and test results could lead to modifications in treatment programs, thus increasing the likelihood of a participant's success. Currently, no inter-agency policies for data sharing exist between court departments.

The FCMC Probation Department was asked if it would be possible for the specialized docket coordinators to have access to probation files in the CourtView case management system (and if it was not possible, to please provide an explanation). The response was that it depended upon the specialized docket court's structure:

Some courts have structured specialized dockets that fall under the probation department. In this scenario, the specialized docket coordinators and specialized docket probation officers report to probation management. All materials would be made available to specialized docket staff and shared with the court as appropriate. FCMC's structure is indirect and somewhat convoluted. The

specialized docket manager reports to the court administrator and the specialized docket coordinators report to the specialized docket manager and the judges. The specialized docket probation officers report to probation officer supervisors. It is the responsibility of the specialized docket probation officers to share information with the specialized docket coordinators upon request; it is not readily available through CourtView (Gauntner, personal communication, February 8, 2016).

A number of data points requested by FCMC's Specialized Docket Department, however, are contained within FCMC's probation module supported by CourtView. The clerk's office manages the CourtView database for probation and the court, but the specialized docket coordinators do not have access to the probation module or employ the case management system to store the data they collect. Instead, they use individual Excel spreadsheets to organize and store data. The reasons cited are provided below. The current case management system:

- a. Does not have a valid and reliable specialized docket component;
- b. Does not include a HIPAA compliant portal for treatment providers to input progress reports;
- c. Lacks a bridge to American Court Services to include drug/alcohol test results;
- d. Does not include confidential client identifiers to collect interval data to track progress in areas of global functioning;
- e. Does not include a client satisfaction survey; and
- f. Does not provide ability to create reports and graphs. (Allen, personal communication, February 9, 2016).

Security, however, was not listed as a factor. All agencies involved are privy to information protected by HIPAA. The CourtView case management system currently provides

opportunities for multiple levels of security through the internal creation of specific profiles. Over 51 profiles currently exist in the case management system, but secure access for data entry outside the court building is not available. For this reason alone, CourtView's case management system is not a good choice to capture and store relevant data points for all agencies in the Franklin County criminal justice system.

Finding 3: Franklin County Municipal Court's Specialized Docket Court Programs Meet All Ohio Supreme Court Specialized Docket Certification Requirements Except for Electronic Data Reporting.

FCMC's specialized dockets have individual program goals and objectives that appear consistent with national standards applicable to each docket. Data points were originally established by the Specialized Dockets Advisory Committee as required for certification by the Ohio Supreme Court Specialized Docket Division and may be reviewed annually. The Specialized Dockets Advisory Committee has only existed since January 2014.

Specialized docket coordinators have been collecting and storing data for less than two years. Specialized docket coordinators perform searches using the clerk and sheriff's database. Information is entered and stored in Excel spreadsheets. Qualitative data collected for each defendant may be inconsistent because data collected is not standardized, and may be limited in scope based on the discretion of the judge. For example, certain data such as whether the defendant served our country as a veteran may be only relevant in the MVSSD specialized docket program, but historical data is significant for all courts. This variation in data points makes the process of collecting and storing data more complex and redundant because information is being manually researched in one system and manually entered into a second system.

Quantitative data collected and stored by the clerk and sheriff's office is limited to case-related data and typically used to calculate recidivism. Electronic reports are generated by the clerk's office technology staff and provide information for FCMC's annual reports which date back to 2004. Annual reports generally include the number of participants accepted into specialized docket programs, but data points do not exist in CourtView that would confirm the number of participants who dropped out or graduated during a one-year period.

The clerk's office uses CourtView to routinely transmit electronic data for reporting requirements of state agencies such as the Bureau of Motor Vehicles, the Ohio Court Network and the Ohio Bureau of Investigation. However, since the specialized docket coordinators do not enter data into CourtView, electronic transfer of data to the Ohio Supreme Court on behalf of the specialized docket programs is not possible.

The Ohio Supreme Court's Specialized Docket Certification requires reporting from all specialized docket courts in Ohio to maintain certification. Two data points specific to required reporting are primary drug of choice and secondary drug of choice – both of which are only being collected by the specialized docket coordinators.

The Ohio Supreme Court has not discussed a statewide case management system to address the needs of specialized docket courts, but is currently exploring the cost of a statistical analysis system. FCMC, like many other Ohio courts with specialized dockets, does not have a complete case management solution for specialized dockets. The reporting requirement has not been activated due to the limitations of electronic reporting of Ohio's courts, but if it were, FCMC would not be able to comply with the requirement.

Conclusions and Recommendations

The research presented in this project supports the findings that multiple agencies provide the technology needs of the Franklin County criminal justice system. These agencies collect and store similar data regarding defendants who progress through the criminal justice system. FCMC's specialized docket programs serve a target population of individuals charged with non-violent misdemeanor offenses who may be diagnosed/undiagnosed with mental health and / or substance abuse issues. The specialized docket coordinators collect data relevant to the success of their specific program, however, they may not be aware or do not have access to data collected by other agencies pertinent to the scope of these programs.

Conclusion 1: Data Information Silos Exist on Multiple Levels. The Independent Collection and Storage of Data by Four Separate Agencies Is Redundant, Inefficient and Causes Strain on Valuable Resources.

Four separate agencies of the Franklin County criminal justice system are collecting and storing similar or identical data points. The Franklin County Sheriff's Office collects the most comprehensive list of data points, which if made electronically available to the other agencies could reduce a significant amount of redundant data collection and manual entry. However, the sheriff's system is a DOS-based system, outdated and obsolete. Other agencies also have outdated systems that are incompatible or unable to integrate with other systems.

Multiple Franklin County agencies such as the Sheriff's Office, clerk's office, FCMC probation and health care service providers collect and store data in separate complex electronic and/or paper information systems. A recent report provided by Agile Technologies identified this issue six years ago. Agile's report encouraged data sharing across systems, but explicitly stated

that some of them were outdated. New technological advancements make the integration and data-sharing plan more costly than replacing all the systems with one major system. The criminal justice partners, who participated in focus group 2 (i.e., representatives from the prosecutor, probation, court personnel, public defender, sheriff's office and health care agencies), indicated in the SWOT analysis they were aware new technologies exist – and willing to explore the possibilities.

Recommendation 1: The Franklin County Criminal Justice System Consists of Multiple Agencies with Numerous Technology Systems, But No One System Is a Good Fit for All. New Data and Information System Sharing Opportunities Should Be Explored and Implemented.

The multidisciplinary agencies operating in Franklin County should work cooperatively to explore the possibility of a comprehensive shared data system that would meet all the needs of the criminal justice partners. Requirements of a new comprehensive system would begin with a careful and complete analysis of data points currently collected. Additionally, data points should be compared to the national standards and best practices set forth by the National Association of Drug Court Professionals.

Conclusion 2: Data Collected by Specialized Docket Coordinators Is Inconsistent.

A Specialized Dockets Advisory Committee was created in 2013 to meet the requirements of the Ohio Supreme Court's Specialized Docket Division's certification deadline of January 2014. Members of the Specialized Dockets Advisory Committee established by FCMC are required to meet annually, but have only met a few times. The committee's purpose is to identify certain data points (see Finding 2) for tracking defendants' progress and to measure the overall effectiveness of each program. Other data points are collected per the request of one

or two individuals involved in the process. Specialized docket coordinators perform searches using other data systems (CourtView and the jail system), then enter information into individualized Excel spreadsheets, creating a tedious, redundant manual process. As a result, inconsistent data gathering may sometimes occur, making it difficult to provide credible data to measure outcomes.

Recommendation 2: An Evidence-Based Approach to Data Collection Will Enhance Performance Measurements of Specialized Dockets.

The Adult Drug Court Best Practice Standards Volume I and II provide extensive examples for monitoring and evaluating drug courts and most specialized docket courts (Adult Drug Court Best Practice Standards Committee, 2013; Adult Drug Court Best Practice Standards Committee, 2015). The Specialized Docket Advisory Committee should examine data collected over the last two years and compare its findings to the standards and performance measurements identified by the NADCP. The scope of data collected by specialized docket coordinators may need to be expanded based on limitations of the data collected over the last two years. Additionally, the court should investigate the possibility of a secure case management system specifically designed for specialized docket courts with the capability to electronically transfer/share data.

Conclusion 3: Communication Between Agencies in Franklin County Is Infrequent.

Agencies operating as part of the criminal justice system in Franklin County do not communicate frequently enough. Focus group 2's SWOT analysis identified gaps in cross-agency communication as a weakness in the current system. Agencies working in silos often do not have adequate opportunities to work cooperatively for the greater good. However, the members of the Franklin County Criminal Justice and Community Corrections Planning Board represent most, if not all, agencies in the criminal justice system. They meet several times per year to carry out the mission of the Board. Currently, the Board has been given an additional task by the Franklin County Commissioners – to create a strategic plan to implement suggestions made in a report recently released by CSG. The CSG report focuses on defendants who have diagnosed/undiagnosed mental health or substance abuse issues and who frequent the criminal justice system. Each agency has participated in several focus group meetings to discuss this initiative.

There is a venue for improving communication between agencies – at the table of the Franklin County Criminal Justice and Community Corrections Planning Board meetings.

Recommendation 3: Franklin County Agencies Should Work Cooperatively to Meet the Needs of Defendants.

The Franklin County Commissioners should expand the mission of the Franklin County Criminal Justice and Community Corrections Planning Board from “system-wide planning and oversight” to “system-wide *continuous process improvement*, planning and oversight” to encourage cooperative improvement efforts of all agencies involved in the criminal justice system (Programs, 2010-2012, p. 1). Ongoing legislative changes and new requirements by the Ohio Supreme Court create the need to continually update and improve processes and

procedures. Communication between agencies typically occurs only when there is a need. Agencies may be slow to make adjustments or standardize processes unless it is warranted. Cooperative efforts and relationship building are an essential component of building trust. The members of the Board have proven that they can work together to achieve common goals. Many of the members have served for several years and have developed long-lasting, productive relationships. The Franklin County Commissioners should expand the Board's charge to include a careful and complete examination of the entire criminal justice process; to recommend improvements and suggest solutions that would benefit everyone involved.

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Appendices

Appendix A: List of Interviewees

<u>Interviewee</u>	<u>Title/Position</u>	<u>Type of Contact</u>
Marilyn Brown	Commissioner, Franklin County President of Criminal Justice Planning Board	In-Person Interview Focus Group 1
Ted Barrows	Judge, Franklin County Municipal Court MVSSD Specialized Docket; Criminal Justice Planning Board Member	In-Person Interview Personal communications
Paul M. Herbert	Judge, Franklin County Municipal Court CATCH Specialized Docket	Personal communications
David B. Tyack ³	Judge, Franklin County Municipal Court MHPD Specialized Docket	Personal communications
Scott VanDerKarr	Judge, Franklin County Municipal Court ADAP Specialized Docket	Personal communications In-Person Interview
Holly Gleason	Assistant Court Administrator Franklin County Municipal Court Magistrate	Personal communications In-Person Interview
Paige Allen	Specialized Docket Manager Franklin County Municipal Court	Personal communications In-Person Interview
Molly Gauntner	Chief Probation Officer Franklin County Municipal Court Criminal Justice Planning Board Member	Personal communications In-Person Interview Focus Group 1 Focus Group 2
Kathy Crandall	Director, Office of Homeland Security & Justice Programs Franklin County, Ohio Criminal Justice Planning Board Member	Personal communications In-Person Interview Focus Group 1

³ Judge David B. Tyack is a cousin by marriage.

<u>Interviewee</u>	<u>Title/Position</u>	<u>Type of Contact</u>
Geoff Stobart	Chief Deputy, Jail Administration, Franklin County Sheriff's Office Criminal Justice Planning Board Member	Personal communications Focus Group 2
James Gilbert	Chief Deputy, Franklin County Sheriff's Office	Personal communications In-Person Interview
Shanon Crowthers	Director of Information Technology, Franklin County Sheriff's Office	Telephone Conference Personal communications
Kysten Palmore, JD, MSW, MA	Franklin County Office of Homeland Security & Justice Programs Franklin County Reentry Coalition Reentry Coalition Coordinator	Focus Group 2
Bradley Laver	Deputy Director, Office of Information Services, Franklin County Municipal Court Clerk's Office CourtView ⁴ Case Management Specialist	

⁴ CourtView is the current case management system used by the Franklin County Municipal Court Clerk's Office.

Appendix B: Interviews with Paige Allen

An in-person interview was conducted on July 1, 2015 and August 11, 2015 with Paige Allen, Specialized Docket Manager of Franklin County Municipal Court. The following were questions presented.

1. What is your title?
2. What are your credentials?
3. What do you hope to accomplish as the manager of the specialized dockets?
4. What is the preferred format for submitting data to the Ohio Supreme Court?
5. Once a defendant is charged with a criminal offense, he/she appears in arraignment court for the purpose of entering a plea. Is entering a “guilty,” or “no contest” plea a requirement for a defendant to be considered for your program?
6. Are these probation people – when you say the staff?
7. When are defendants accepted into specialized docket programs?
8. Are they referred to probation? How is probation involved in the process?
9. Upon acceptance of a “guilty” or “no contest” plea the Court orders a case to be randomly assigned or considered for a specialty docket. If defendant is to be considered for a specialty docket program, what is the next step? (Defendant is referred to the Probation Department for assessment; if Defendant is incarcerated, bond is set; if Defendant is incarcerated, Court orders defendant to be returned to jail to be held until an assessment can be performed; Defendant is sentenced by arraignment judge to probation; or other?)
10. In your opinion, what do you think of the current process for evaluating a defendant? Is it efficient? Do you have enough information to make a decision?

11. Who is involved in each step for referral and admittance, and what are their roles? Who can make a referral to the docket?

12. What data are currently being gathered during this process?

<input type="checkbox"/> Basic information (Name, DOB, SSN)	<input type="checkbox"/> Development Issues
<input type="checkbox"/> Case Number(s)	<input type="checkbox"/> Sexual History/Issues
<input type="checkbox"/> Charge(s)	<input type="checkbox"/> Education History
<input type="checkbox"/> Criminal History	<input type="checkbox"/> Special Communication Needs
<input type="checkbox"/> Living Arrangements (Rent/Own Home)	<input type="checkbox"/> Employment History
<input type="checkbox"/> Family History	<input type="checkbox"/> Employment Skills/Interests
<input type="checkbox"/> Mental Health (Treatment history/Issues)	<input type="checkbox"/> Military History (Active/Status)
<input type="checkbox"/> Physical Health Issues/Limitations	<input type="checkbox"/> Substance Abuse/Other Issues
<input type="checkbox"/> Religion/Spirituality	<input type="checkbox"/> Guardianship Issues
<input type="checkbox"/> Cultural/Ethnic Issues/Concerns	<input type="checkbox"/> Child Support/Custody Issues
<input type="checkbox"/> Civil Proceedings	<input type="checkbox"/> Juvenile History
<input type="checkbox"/> Environmental Support Preference	<input type="checkbox"/> Physicians/Treatment Provider
<input type="checkbox"/> Diagnosis (and date of most recent trauma history)	
<input type="checkbox"/> Risk/Needs	<input type="checkbox"/> Other _____

13. How are the data being collected and stored by the Court? What format are you using to store documents? When did you begin scanning?

14. How satisfied are you with the current method for capturing or retrieving data gathered during this process? Do you have any suggested solutions?

15. What data do you need to do your job with the specialized dockets?

16. Are there any data elements that you do not have permission to access?

17. If the data were accessible electronically, would it facilitate the decision making process.

18. Are you familiar with smart forms? What are the benefits and/or drawbacks to implementing an electronic smart form to capture data for storage in a searchable database?

19. Would you be willing use data in this format? Why or why not?

20. Are there time constraints for assigning a defendant's case to a specialty docket program?
If yes, what are they?
21. House Bill 86, passed by the 129th Assembly in 2011 requires the court to follow specific guidelines to properly determine a risk assessment for defendants. Since House Bill 86 passed, what changes has the court implemented to meet the new standards for risk assessments?
22. Do docket coordinators administer the Compass? Do they administer the Soqic form (a risk needs assessment tool)?
23. Are threshold criteria applied to the Soqic form that are used to determine admission decisions? If so, are you familiar with the threshold? If yes, what is that threshold?
24. Does your docket have clinical eligibility requirements for admission based on a clinical diagnosis? (e.g., for mental health do you use the DSM-IV or DSM-V?)
25. For Veterans does the court require PTSD?
26. For drug court do you require a clinical diagnosis for alcohol or drug addiction/dependence?)
27. Do docket coordinators conduct any additional screening or assessment tools to identify other eligibility criteria (e.g., trauma assessments)?
28. Do the specialized docket programs have legal eligibility requirements for admission? (i.e., do only certain charges qualify the defendant for consideration into the specialty docket) If yes, what are those criteria?
29. Who can make referrals for a defendant to be considered for a specialty docket program?

☐ Attorney
☐ Mental Health Specialist
☐ Nurse at the Jail or other Jail Staff
☐ Law Enforcement

- ☐ Judge
- ☐ Prosecutor (legal eligibility)
- ☐ Public Defender
- ☐ Probation Officer/Staff
- ☐ Other - Family

30. Are admission criteria in place to consider when there is a victim? If the answer is yes, then what is the criteria? Is consent of the victim a requirement for consideration? If restitution is owed?
31. How long does a specialty docket track a defendant's progress? Is there post-program tracking? What is tracked? And how do you define each (e.g., is recidivism based on arrests, charges, convictions and is it tracked for a specific time frame such as 1 year post-program)?
32. What outside databases hold data that may be helpful for making admission decisions?
- ☐ Ohio Court's Network
 - ☐ Ohio Bureau of Motor Vehicles
 - ☐ LEADS
 - ☐ Franklin County Sheriff's Slate Cards
 - ☐ Ohio Bureau of Identification
 - ☐ Other
33. What agencies hold information that could be used to ensure health, human services or other related benefits are available to defendants?
- ☐ Veterans Administration (No MOU on file – can send release for information)
 - ☐ Social Security Administration
 - ☐ Disability
 - ☐ Medicaid
 - ☐ Medicare
 - ☐ Food Stamps
 - ☐ Other

34. Does the Court have a policy and procedure manual for specialized dockets? If yes, may I have a copy of it?
35. What data would be valuable to provide to the Ohio Supreme Court in determining certification or re-certification?
36. If a database was constructed for the four (4) specialty docket programs, do you know of any governmental agencies who could partner with the Court for the purpose of information sharing?
37. If the defendant being considered for inclusion into a specialty docket program is incarcerated (arrested prior to arraignment), does the Franklin County Sheriff's Office play a role in collecting relevant data for this process?
38. If the Franklin County Sheriff's Office collects data, do they make it available to the Court?
39. Why are the specialized docket coordinators using Excel spreadsheets to capture data instead of the CourtView case management system?
40. If additional data points could be added and special access provided in CourtView, (limited to specialized docket staff only) would the specialized docket staff utilize the system?
41. What is the timeline for reporting specialized docket data to the Ohio Supreme Court? Potentially, what could happen to the court (judges) if reporting requirements are not met?

Appendix C: Interview with Judge Ted Barrows

An in-person interview was conducted on August 5, 2015 with Judge Ted Barrows, who presides over the MVSSD Docket in Franklin County Municipal Court. The following were questions presented.

1. When a defendant appears before you in arraignment court, what do you look for when considering them for a specialized docket?
2. Are defendants required to make a plea of “guilty”?
3. How do you measure the success of these programs?
4. How does your staff monitor recidivism?
5. Are you accessing the Ohio Court Network database? Is it useful?
6. Are there technological tools that would help you in administering the specialized dockets?
7. In your opinion, could our current case management system, CourtView, be expanded to assist the specialized dockets in data collection and reporting?

Appendix D: Questions for Personal Communications with Judges

On Tuesday, August 4, 2015, the following questions were send by personal communication to Judges Scott Van Der Karr, David Tyack, Ted Barrows and Paul Herbert, who preside over the specialized dockets in Franklin County Municipal Court.

1. Could you provide three to five criteria used when accepting defendants into your program?
2. What technological tools would assist you in performing your duties?

Appendix E: Statement of Judge Scott Van Der Karr

Judge Scott Van Der Karr made a guest appearance during a CLE training class on December 1, 2015. Judge Paul Herbert presented the training class entitled, “The Impact of Human Trafficking on the Criminal Justice System.” Judge Van Der Karr’s statement is as follows:

You can’t just look at a client and a single case, no matter what specialty docket you are talking about, there is a possibility that they might spend more time on that single case. But if you look at recidivism, and you stop them from coming back into the system. If not, they are going to do time and time and time again --- that can add up to years in the Franklin County Jail – it can be stopped by successful programs like this. Don’t ever look at just one case in a specialty docket – look at a lifetime. Because a lifetime is what the difference is – instead of spending years in the Franklin County jail.

(Judge Scott Van Der Karr, December 1, 2015.)

Appendix F: Interview with Chief Deputy James Gilbert

Chief Deputy James Gilbert was interviewed on November 30, 2015. He has served in law enforcement for 23 years and is currently with the Franklin County Sheriff's Office in the Community Affairs Division. He formerly served as the President of the Central Ohio Fraternal Order of Police from 2006-2012 and is familiar with all law enforcement agencies in Franklin County. The following questions were asked during an in-person interview:

1. What is CIT training?
2. Do you know how many officers have been trained in Franklin County?
3. How does law enforcement handle an individual with a reported Form 95 on file?
4. Does law enforcement have the discretion to take an individual to NetCare instead
5. Does law enforcement file charges against the individual when they drop them off to NetCare?
6. Do the dispatchers that take the calls have access to information that would indicate whether the individual has a mental health issue?
7. Have any agencies stepped forward to voluntarily house the information?
8. Do you believe that the CIT training is a benefit for law enforcement based on your last ten years of experience?

Appendix G: Interview with Chief Deputy Geoff Stobart

Chief Deputy Geoff Stobart is second in command in the Franklin County Sheriff's Office. He is also responsible for managing the main jail in Franklin County. A personal communication requesting an interview was submitted on November 19, 2015. The following questions were asked in the personal communication:

1. How has CIT training impacted Sheriff's deputies in the field?
2. How does the jail determine whether a defendant has a mental health or a substance abuse issue?

Appendix H: Telephone Interview with Shanon Crowthers

Shanon Crowthers, Director of IT for the Franklin County Sheriff's Office was interviewed by telephone on December 8, 2015. Annual Reports listing the number of defendants treated by LPNs or RNs were only available through 2013. The following questions were asked during the telephone interview:

1. Would you please provide information regarding medical health services provided to inmates during 2014?
2. Does the Franklin County Sheriff's Office currently provide data to the Ohio Courts Network? If so, what data is being submitted?
3. How does the Sheriff's Office track defendants through the criminal justice system? Is there a method to identify repeat offenders who frequent the jail?
4. When does the Sheriff's Office expect to implement a new jail system?

Appendix I: Interview with Molly Gauntner, Chief Probation Officer

On November 18, 2015, questions were emailed to Molly Gaunter, Chief Probation Officer of the Franklin County Municipal Court. Follow up personal communications and in-person interviews were also held. The following questions were presented.

1. Does probation plan to perform bail investigation interviews for defendants in custody prior to arraignment? Do you have an estimated start date?
2. Do you know if the jail performs mental health assessments?
3. Recently the legislature mandated that the court provide law enforcement with Form 95 for defendants clinically diagnosed with mental health issues. Could you define the process and the Bill it was written under?
4. Could you provide an example of a form probation plans to use when visiting defendants (in custody) who have been identified as a potential participant in the specialized docket program? What process will you follow?
5. Is it possible for the specialized docket coordinators to have access to probation files in CourtView (case management system)? If not, could you please explain why?
6. Is the issue regarding #5 court-specific or is it related to HIPPA, Sunshine Laws or the Ohio Rules of Superintendence?

Appendix J: Jail Slate Cards

FRANKLIN COUNTY SHERIFF'S OFFICE
COLUMBUS, OHIO

PRISONER
INFORMATION

Slate :
Officer :
Unique ID:
Name :
Alias(es):

Status : A
Detainers : Y

Address :
Employed :

Sex :
Race :
DOB :

Height :
Weight :
SSN :

Hair :
Eyes :
Religion :

Cell :
Ill :

Bin :
Med :

Assignment:
Cash :

ARREST DATA

Arrest :
Officer :
Convey :
Vehicle :

On-View : N

Disposition-

CHARGE DATA

Charge 1 : ORC 2913.02A1F THEFT - \$300 TO \$5000
Disposition: 1-14-2016 PROBATION GRANTED
Sentenced : to

Charge 2 : CPD 2329.01 LITTERING; UNAUTHORIZED USE O 73956(CI)-15
Disposition: 1-26-2016 TIME SERVED
Sentenced : to 1-26-2016

COURT DATA

Court-Charge 1: C SN 1-14-2016 9:00

Court-Charge 2: M 4D 1-26-2016 9:00 ARRAIGNMENT MUNI

DETAINEES

ID HOLD

RELEASE FROM M

SEE MEDICAL PRIOR TO RELEASE

****HOLD FOR CBCF****

RELEASE DATA

Tentative Release:

Actual Release :

Officer : - FCSO

Appendix K: Pretrial/Bail Investigation Interview Form

Franklin County Municipal Court Department of Probation Services Pretrial Services

Bail Investigation Interview

Defendant: 4D Judge:

Alias: Case Number:

Social Security Number: D.O.B.:

Sex: Race:

Defendant Address:

Telephone:

Emergency Contact Name: Relation:

Emergency Contact Telephone:

Is English your primary language? ☐ Yes ☐ No

If no, what is your primary language?

Do you need an interpreter? ☐ Yes ☐ No
ASL

☐

Date Report Submitted: Investigator:

Investigator Telephone:

Current Case Information

Charge(s): Slate #:

Arresting Agency: Arresting Officer:

Incident Date: Arrest Date:

Details of Charge:

Prior Record and Criminal Justice Information

BCI:

FBI#:

Defendant's age at first arrest:

What was the charge?

Is the Defendant currently on Probation, Parole or Court Supervision?

☐ Yes ☐ No

If yes, where:

Officer's Name:

Does the defendant have Pending Cases in another Court? ☐ Yes ☐ No

Comments:

Does the Defendant have any Wants/Warrants/Detainers? ☐ Yes ☐ No

Comments:

Has the defendant ever received a warrant for Failure to Appear as an adult?

☐ Yes ☐ No

If yes, how many times?

How many times in the last two years?

Has the defendant ever been incarcerated as the result of a conviction?

☐ Yes ☐ No

If yes, how many times?

Has the defendant ever been to prison? ☐ Yes ☐ No

If yes, how many times?

Does the Defendant have a Carrying Concealed Weapons permit and/or access to weapons, as determined by records review? ☐ Yes ☐ NoAlleged Victim Information:

Victim Name:

Relation:

Proximity to Defendant:

Stay Away Order/TPO/CPO? Yes ☐ No ☐ Type:Social History:

Do you have a place to live if released on bail? Yes ☐ No ☐ Comments:

Address:

Phone Numbers(s):

With:

Relation:

Verified: Yes ☐ No ☐

Do you own or rent?

How long have you lived at this address?

If less than six months – reason for the move:

How long have you lived in Franklin County/Columbus Area?

Family Information:

Current marital status:

Do you have any children? Yes ☐ No ☐ Do they live with you? Yes ☐ No ☐

Employment / Source of Income:

Name:

Location:

Date Hired:

Occupation:

If employed, how many hours a week do you work?

Wage:

Is it ☐ temporary, ☐ seasonal, or ☐ permanent?

Were you employed at the time of arrest? Yes ☒ No ☐

Verified? Yes ☐ No ☐

☐ Retirement Benefits ☐ Unemployment ☐ Workers Comp

☐ SSI/SSD; Reason:

Payee? Yes ☐ No ☐

Physical Health:

Are you currently under a doctor's care? Yes ☐ No ☐

Doctor's Name:

Location:

Do you have a serious medical condition that would require the Court's attention?

Yes ☐ No ☐

If yes, explain:

Are you in need of any medication? Yes ☐ No ☐ List:

Do you have means to access this medication? Yes ☐ No ☐

Mental Health:

Have you ever received services for a mental health issue/condition?

Yes ☐ No ☐

If yes, explain:

Do you currently have, or have you ever had, a mental health or other case worker?

Yes ☐ No ☐

Are you currently taking or have you been prescribed in the last five years, any medications for a mental health issue? Yes ☐ No ☐ List:

Do you have any mental health concerns? Yes ☐ No ☐

If yes, explain:

Additional Information:

Substance Abuse

Have you ever had a problem with drugs or alcohol? Yes ☐ No ☐

If yes, explain:

What is your drug of choice?

How often, on average, do you use?

Have you ever been in treatment for drugs or alcohol? Yes ☐ No ☐

Where: Type: When:

Do you feel you could benefit from treatment now? Yes ☐ No ☐

If yes, explain:

Education:

Highest grade completed: Where:

Do you have your GED? Yes ☐ No ☐

Are you presently enrolled in school or training? Yes ☐ No ☐

Name of School: Schedule:

Military History:

Were you ever in the armed services? Yes ☐ No ☐

In what branch did you serve?

Did you see combat in a combat line unit? Yes ☐ No ☐

When were you discharged?

What type of discharge did you receive?

How much total time did you serve in the armed forces?

Do you have access to the necessary supporting documentation? Yes ☐ No ☐

Do you have any current needs or issues that would impact your ability to appear for court hearings or avoid any new arrests (e.g. transportation, child care, lack of family support, physical/mental health needs, etc.)?

Yes ☐ No ☐

If yes, explain:

CHARGE SUMMARY

ADULT CRIMINAL:

DATE

CHARGE/OFFENSE

DISPOSITION

TRAFFIC OFFENSES SUMMARY:RISK LEVEL:

RECOMMENDATION: (PLEASE NOTE THAT ALL RELEASE ETNRIES SHOULD CLEARLY INDICATE WHETHER THE DEFENDANT IS BEING PLACED UNDER PRETRIAL SUPERVISION AS A CONDITION OF THE BAIL)

☐ ROR with no Pretrial Supervision (Low Risk)

☐ ROR with Pretrial Supervision with Standard Pretrial Release Conditions

(Mod - High Risk)

☐ ROR with Pretrial Supervision Standard Release Conditions and Specific Release Conditions as recommended below (Mod – High Risk)

Recommended Release Conditions:

☐ Refer for further drug and alcohol assessment and follow recommendations

☐ Refer for further mental health assessment and follow recommendations

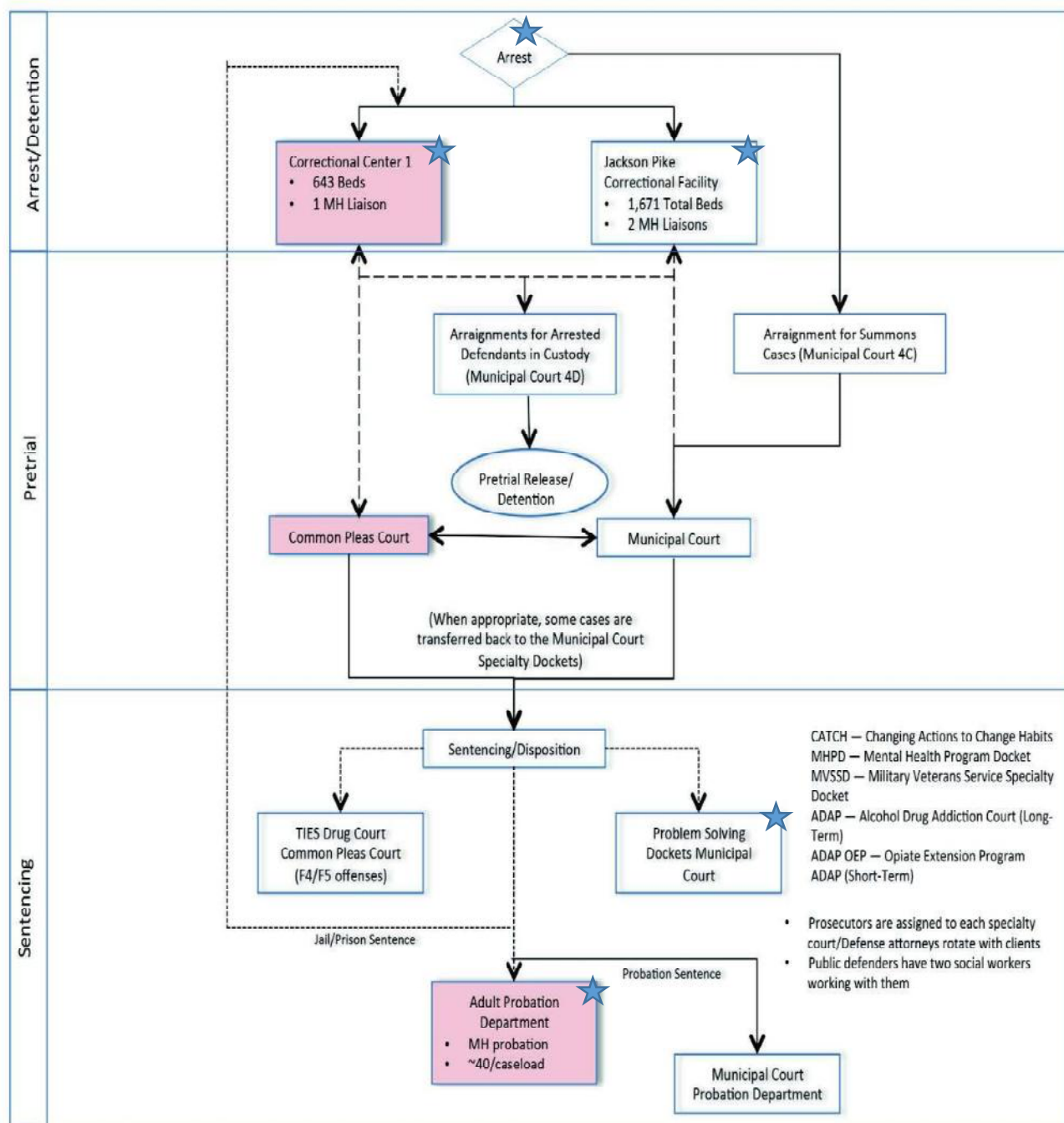
☐ No Recommendation, defer to the Court

☐ Case Specific Factors (Explain)

☐ Risk Level (Explain)

Appendix L: Franklin County Criminal Justice Flow Chart

Figure 2: Franklin County Criminal Justice Flow Chart⁵



(The Council of State Governments, Justice Center, 2015, p. 3).

⁵ ★ Represents each data collection point of the Franklin County criminal justice system.

Appendix M: Clerk's Data Point Key

The following data elements were tracked and recorded on an Excel spreadsheets for each of the four specialized dockets above and are presented in Appendices M through P:

- Def – Defendant
- M –Male
- F- Female
- W – White
- B – Black
- O – Other
- ORC – Ohio Revised Code or Local Charge Codes
- Charges – Charges
- M – Misdemeanor
- F- Felony
- GP – Guilty Plea entered
- NGP – Not Guilty Plea entered
- CD – Case dismissed
- A – Defendant arrested
- S – Defendant summonsed to court (Notice of hearing is provided
in lieu of arrest for non-violent offenses – per the discretion of law enforcement)
- P - Defendant sentenced to probation for compliance and monitoring of
sentencing conditions as outlined by the judge.

- NP – Defendant not sentenced to probation
- PR – Defendant violated probation. New case filed.
- Entry – Judge signs Entry of Court to Dismiss Case and Expunge Record (Being used by two judges immediately upon completion of specialized docket program.)
- PV/CD - Defendant violated probation – Probation violations are typically filed as a new charge or under a new case number. Judge Herbert with CATCH Court is an exception to the rule. The judge signs an entry stating that the probation violation is not to be considered a new case and dismisses the case after holding a probation violation hearing.
- Agree - Request to Participate and/or Agreement signed by Defendant
- Jail - Jail Time Served (while waiting to be accepted into program or as a result of a probation violation)
- Assess - Defendant receive a mental health assessment
- AR to AC - The number of days between arraignment of the defendant and acceptance into the respective programs. Based on research provided in Appendix L - O, the time between arraignment and acceptance into the specialized docket program exceeds “the length of sentence defendant would have received had he or she pursued the traditional court process” (Council of State Governments Justice Center, 2007, p. 3).

Appendix N: ADAP Data

Def	M	F	W	B	O	ORC	Charges	M	F	GP	NGP	CD	A	S	P	NP	PR	Entry	PV/CD	Agree	Jail	Assess	AR to AC
Def 1		x	x																				
						2925.37(A)	Possession of Counterfeit drug	5		x			x		x		x				8		22
Def 2	x		x																				
						2925.37(A)	Counterfeit Controlled Substance	1		x					x					x	20		30
						2921.36E	Illegal Conveyance of Prohibited Item	1		x											10		
						2141.11(A)	Driving Under Suspension	1		x													
						2135.07(A)	Tag Violations	M				x											
						2141.11(A)	Driving Under Suspension	1		x													
						2131.14(A)	Failure to Signal	M				x											
						2133.03(A)	ACDA	M		x													
Def 3	x			x																			
						2925.37(A)	Possession of Cocaine		5	x			x		x						2		3
						4511.19(A)	OVI-Impaired	1		x			x								3		6
						4511.19(A)	OVI - Low Level Breath	1				x											
						4511.21(A)	Speed	M				x											
Def 4	x		x																				
						2925.37(A)	Offenses involving Counterfeit Contr	1		x			x							x	2		54
						2925.37(A)	Offenses involving Counterfeit Contr	1		x													
						2917.11(B)	Disorderly Conduct	4				x											
Def 5	x		x																				
						2925.37(A)	Offenses Involving Counterfeit Contr	1		x			x				x			x	3		56
						2913.02	Theft	1		x										x	3		
Def 6	x		x																				
						2171.06(B)	Pedestrian Solicitation from Roadway	3		x			x				x			x	29		258
						2171.06(B)	Pedestrian Solicitation from Roadway	M					x										
						2171.06(B)	Pedestrian Solicitation from Roadway	3		x										x	21		
Def 7		x	x																				
						2913.02	Theft	1		x					x					x			23
Def 8	x		x																				
						2925.37(A)	Offenses Involving Counterfeit Contro	1		x					x		x			x			136
						2325.62(B3)	Open Container	M				x											
Def 9	x		x																				
						2925.37(A)	Offenses Involving Counterfeit Contr	1		x			x		x		x			x	10		91
						2925.11(A)	Felony Drug Possession-Abuse		5			x											
Def 10	x		x																				
						2913.02(A1)	Theft	1		x					x		x				40		505
						2913.02(A1)	Theft	1		x					x		x						
						GRC545.05	Petty Theft	1		x					x		x						
						2925.37(A)	Offenses Involving Counterfeit Contr	1		x					x		x						
						2913.02(A)	Theft	1		x					x		x						
						2913.02	Theft	1		x					x		x				2		
						2913.02	Theft	1		x					x		x						

Appendix R: Interview with Kathy Crandall, Director of Homeland Security

With Focus Group 1 Notes

Below are three priorities identified by the Behavioral Health Focus Group held November 30, 2015.

- 1.) Data
 - A. Identify data elements
 - B. Identify Data Repository and Process
 - C. Develop Information Sharing Protocols

- 2.) Develop Bridge Teams
 - A. Define Team Composition
 - B. Develop Coordinated Training
 - C. Build Capacity from Triage to Community Release
 - D. Identify Clients

- 3.) Expand CIT Training, Bed Capacity, Guardians, Psychiatrists

Issues needing additional research and Discussion are:

- 1.) Guardianships – Attorneys vs. Family Members
- 2.) Probate Court Information Sharing
- 3.) Inner medial Bed Capacity (Wait time for Assessment due to AOD)
- 4.) Clear Hospital Guidelines for Pink Slip Process
- 5.) Communications to Public Safety when patient is released into community from confinement (Corrections, Probate, ER, Hospital, etc.)
- 6.) Coordinated Hospital Diversion Plan
- 7.) Telemedicine
- 8.) Common Definitions and Standardized Protocols for public/private partner

Appendix S: Focus Group 2 Notes

PHASE ONE: FRANKLIN COUNTY REENTRY COALITION STRATEGIC PLAN

INTRODUCTION

On Friday, November 13, 2015, select members of the Franklin County Reentry Coalition (FCRC) came together for a strategic planning retreat. The purpose for the retreat was threefold. First, fulfill our commitment to the Board of Commissioners by initiating the first step in revising a comprehensive reentry strategic plan. Second, create a draft outline of areas to consider for inclusion in the strategic plan in which to complement and align with the recommendations of the Council of State Government (CSG). Finally, engage in an examination of the Coalition's progress and define the future pathways to success.

At the beginning of the session, the facilitator, Dr. Kilty, Professor Emeritus from the Ohio State University College of Social Work asked each person to choose a seat at one of four tables, with the caveat no one was to sit at the same table with a fellow co-worker. The facilitator wanted to ensure that each table obtained a fresh perspective on the questions and issues presented and not succumb to co-worker think (more aptly known as group-think).

The facilitator began the planning session with a fun exercise to see how many members could state the mission of the Franklin County Reentry Coalition (FCRC). When it was clear to the facilitator that no one was able to state the entire mission statement, the facilitator asked the group to state keywords that might be included in the mission statement. Here are the keywords that most of the group recalled: recidivism, productive, reintegration, community, and ex-offender. This exercise ended in a thoughtful review and modification of our mission statement that accurately reflects the purpose and intent of the Coalition. The revised mission statement of the FCRC is as follows:

The Mission of the Franklin County Reentry Coalition is to effectively and efficiently integrate justice-involved individuals into the community to lead crime-free, productive lives; by promoting and supporting community services {and programs}. {}[indicates words or phrases that may not be representative of the agreed upon statement]

PROCESS

The first question posed:

What do ownership, commitment, and accountability mean to you and to the organization you represent?

- Inclusive
- Measurable impact
- Top down ownership
- Action oriented
- Re-defined roles
- Active & participatory

- Transparency
- Ethical
- Education of the community
- Pre-release
- Relationships
- Education of restored residents
- Recidivism & tracking of outcomes and services
- Research & data driven
- Cost effective & efficient (outside of our own silo)
- Cross system financing
- Duplication addressed
- Role clarity, coordination & collaboration
- Demonstrate return on investment, value of efforts & public safety results
- Cross training
- Mindset
- Expansion of evidence based practices
- Judicial accountability
- Must have multi-agency buy-in
- Leadership and long-term commitment to the mission
- Law-enforcement buy-in and education
- Importance of “Champions”
- Methods of communication How-When-Who
- Dashboard of metrics to keep people informed & committed to the initiative

The facilitator began SWOT analysis by posing the second question.

What are the Strengths of the coalition? (What can members control?)

- Ripe with collaboration across systems training
- Shared goals and outcomes
- ODRC & community organization support
- Breaking down of barriers
- Council of State Government initiative & findings
- Healthy risk taking (organizational risk)
- Respect for each other’s realities & challenges
- Flexibility & momentum in housing
- Funding attainments

What are the Weaknesses of the coalition? (What can members control?)

- Housing options (some would argue coalition members have very little control)
- Young Adult Housing (18-24 year olds) - gap in options and supportive services for high risk who need housing (This population is not appealing to landlords, lack of lived experience, need for transitional housing, opportunity for person based housing vouchers versus program based)

- Cross system communication-gaps & duplication of efforts & services (different court systems)
- No centralized database for services-lack of data collection
- Lack of availability of transitional housing
- Stay in jail longer/waiting on bed
- Capacity issues in programming/detox overly adult focused
- Missing the family component
- Proactive in identifying barriers
- Workforce shortage in Behavioral Health
- Lack of one-stop-shop services-coordination is needed

What are the Opportunities available to the Coalition? THINK Big Harry Audacious Goals (BHAG)

- What if our community...? What if our Coalition...? What would it look like?

- One-stop-shop (Walmart of services) In addition create smartphone app to track usage. We track which services are being accessed (i.e., clicked on) and how frequently to determine where demand lies and what services may be most needed. **-12 votes**
- Better data collection-better definition of success – **8 votes**
- **Full judicial & legislative buy-in – **5 votes**
- Academic partnership **-3 votes**
- Better demonstration of return on investment and cost savings **-3 votes**
- New technologies embraced and available **-3 votes**
- Stabilizing staffing of behavioral health providers **-2 votes**
- Raising awareness & changing the lens “returning citizens” are viewed
- Overarching, definitively measurable goals
- Package opportunities (Stepping up)
- Bi-partisan support & current momentum
- Ground breaking programming
- Lessons learned
- Sharing of information at a National level
- Legislative movement & reforms
- New jail and options for programming
- Tracking of services by participants
- Jail management system

The above list includes big picture goals that participants were to rank as the most desirable on a wish list of opportunities. The top ranked big picture goals were the beginning of a SMART (Specific, Measurable, Attainable, Realistic, and Timely) discussion. Due to time restrictions, the group was unable to complete the SMART goal discussion. However, the group began preliminary discussion on specifying the goals for clarification and mutually agreeable definitions. Notes on this discussion are included in a separate document “SMART discussion.”

What are the Threats as it relates to the coalition's current position, as it relates to the movement of the coalition-where the coalition is going? This discussion included all threats-internal and external.

- Lack of creditable data collection to demonstrate outcomes
- Remaining stagnant because we can't prove what we are doing works
- Lack of money
- Lack of buy-in at the ground level (police, probation)
- Push back from victims' rights organizations
- Leadership changes – legislative, corrections, local, state, federal
- Changes in public priorities “flavor of month” syndrome
- Major devastating incident & resulting in reactionary responses & diversion resources
- Impatience for results
- Legislative accountability & cohesiveness with local efforts
- Clear goals & roles of committees
- Medicaid roll back
- Sustainability of efforts
- Sentencing reform could overwhelm local capacities
- Re-investment of the savings back into sustainment of efforts
- Complete reliance on evidence based practices could stifle proactive approaches to current needs & emerging program/practice trends
- Overwhelming amount of need in general, i.e. 2400 on CMHA waiting list
- Proactive response to resistance
- Stigma (incarceration & mental health)

NEXT STEPS

Convene a series of strategic planning meetings and sessions after the New Year (2016) to:

- ✓ develop an action plan to identify steps, deadlines and responsible parties
- ✓ continue the SMART goal discussion
- ✓ devise and incorporate a sustainability plan
- ✓ incorporation of CSG recommendations and the work of the Recidivism Reduction Sub-committee
- ✓ incorporation of a comprehensive Sequential Intercept Model

Appendix T: Multi-Agency Data Collection Comparison

Table 2: Multi-Agency Data Collection Comparison

Data Points	Slate Cards (Jail)	Pretrial Bail Interview Form (Probation)	Court Record (Franklin County Municipal)	Excel Spreadsheets (FCMC Specialized Dockets)	Min. Data Reporting (Ohio Supreme Court)
Basic Info (i.e., DOB, SSN, Address, Sex, Race, Phone No., Alias)	√	√	√	√	√
Language/Interpreter Needed		√			
Current Date Investigator Info	√	√	√		
Charges	√	√	√	√	
Arresting Agency	√	√	√		
Transported from another jail	√				
Incident Date	√	√	√		
Details of Charge	√	√	√		
Judge/Hearing Date and Time	√		√	√	
Date of Docket Closure/Disposition	√		√	√	√
Release from Jail Date	√		√		
Age at first arrest		√	√		
Charge	√	√	√	√	
Probation, Parole or Court Supervision	√	√	√		
Pending Cases	√	√	√		
Warrants	√	√	√		
Detainer Info	√				
Prison History		√			
Victim info – if applicable		√			
Social History – place to live		√		√	
Own/Rent Home		√		√	
Family Information		√		√	

Marital Status		√	√	√	
Children		√		√	
Employment	√	√		√	
Retired, Unemployed, Worker's Comp		√		√	
Physical Health – Medical Condition	√	√		√	
Mediation Required	√	√			
Mental Health – services received		√		√	
Placed on Safety Watch for Mental Health	√			√	
Medications	√	√		√	
Mental Health or Drug/Alcohol Diagnosis or Treatment	√	√		√	√
Education – level completed		√		√	
Military History		√	√	√	
Branch		√	√		
Combat		√			
Discharge/Type		√		√	
Primary Drug of Choice				√	√
Secondary Drug of Choice				√	√

Appendix U: Ohio Supreme Court Reporting

Specialized Docket Department Minimum Data Set

This list incorporates Supreme Court of Ohio request for minimum data set.

Identifier Number (Confidential identifier)

Name

- Last
- First
- Middle

Case Number

Date of Birth

- Month
- Day
- Year

Gender

- Male
- Female
- Unidentified

Race

- African American
- Caucasian
- Hispanic
- Mixed Race

Primary Drug of Choice (use list of substances below)

Secondary Drug of Choice

- Alcohol
- Hallucinogens
- Cocaine
- Amphetamine or other stimulant
- Prescription Opiates
- Heroin
- Inhalants
- Cannabis
- Caffeine
- Nicotine, Tobacco

- Sedative, Hypnotic, or Anxiolytic

Medically Assisted Treatment (Yes/No)

Type of MAT

- Vivitrol
- Methadone
- Suboxone/Subutex

Diagnosis (Source Condition/ DSM-5 Code)

Diagnosis (Condition of Treatment/DSM-5 Code)

Date of Docket Entry

Date of Docket Closure

Disposition

- Successful
- Unsuccessful
- Neutral