

FY 2024 PERFORMANCE PLAN

Jail Based Services		BHD	Bilal Nazam, x7026 Suzanne Somerville, x7340
Program Purpose	Improve the functioning and increase safety for people who are incarcerated by managing risks, helping them develop effective coping skills, and preparing them for reintegration upon release.		
Program Information	<ul style="list-style-type: none"> The team delivers Behavioral Health (BH) services to people who are detained in the Arlington County Detention Facility (ACDF) in accordance with correctional policies and the procedures of the Sheriff's office. Services focus on meeting treatment needs, teaching skills to manage symptoms, and linking clients to outpatient services as needed. The team is split into two primary areas, one part of the team provides services to the Addictions, Corrections, and Treatment (ACT) Unit which is a specified Substance Use program and the other provides services to the rest of the jail for all other BH needs. The team works in conjunction with the Arlington County Sheriff's Office and with Mediko Medical Services, the vendor that provides medical and psychiatric care to all people held in the jail. As people enter the jail, they are given a brief Jail Mental Health Screen by jail staff and are asked questions about opioid use to identify BH needs. Based on the responses to these screenings, the team assesses to determine if the person has ongoing needs. ACDF has a mental health unit (MHU) which can house 29 inmates and three crisis cells. The unit recently expanded its ability to serve male inmates, housing them in the majority of beds and females on an as needed basis. The MHU houses people who are either acutely symptomatic with the goal of stabilization, or people who have severe and persistent mental illness who will not be able to function in other units. Treatment on the MHU is focused on stabilization and crisis management. The ACT Program is a 37-week substance use treatment program that promotes hope, healing, and empowerment to prevent relapse and the criminal activities associated with substance use. The ACT Program provides services that include psychoeducation, group and individual therapy, and re-entry planning. Services are licensed by the Virginia Department of Behavioral Health and Developmental Services. In FY 2023, the Jail Based Services program increased its work around release planning for clients. Staff worked with incarcerated clients diverted to Western State Hospital and developed plans on how to help them return into the jail when they were ready for discharge. Additionally, case management services were provided to help clients reintegrate to the community upon release. Partners: <ul style="list-style-type: none"> Arlington County Sheriff's Office Arlington County Circuit Court Arlington County Office of the Commonwealth's Attorney Arlington County Public Defender's Office Department of Corrections, Probation and Parole District #10 		

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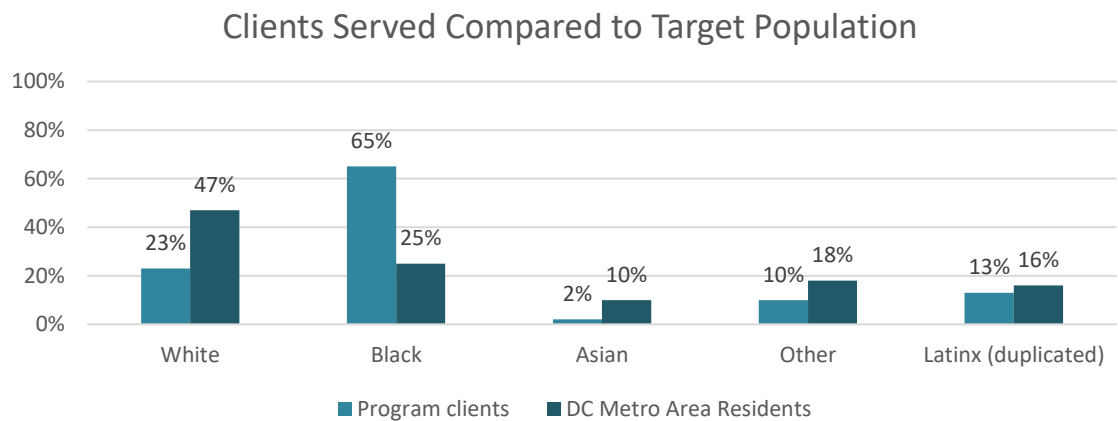
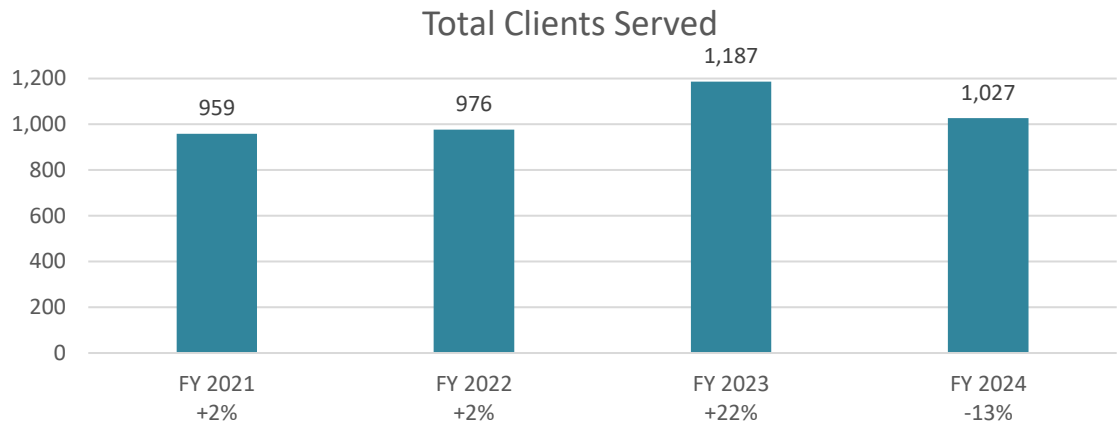
Service Delivery Model	<ul style="list-style-type: none">Services were provided in person in Arlington County Detention Facility in FY 2024. It is anticipated that this service delivery model will continue in FY 2025.In FY 2024, program staff expanded their operating hours, staying onsite at the jail for an additional eight hours on Sundays. The program transitioned to this model to continue to meet an unmet need of weekend services and did so without additional staffing support.					
PM1: How much did we do?						
Staff	16.5 FTEs <ul style="list-style-type: none">1.0 Supervisor/Program Manager2.0 Assistant Program Manager10.0 FTE Behavioral Health Therapists3.0 FTE Behavioral Health Specialist0.5 FTE Peer Recovery Specialist					
Customers and Service Data			FY 2021	FY 2022	FY 2023	FY 2024
	Unduplicated clients		959	976	1,187	1,027
	Clients served by Addictions, Corrections, and Treatment (ACT)		50	47	42	46
	Clients served on Mental Health Unit (MHU)		210	403	400	638
	Clients diverted to Western State Hospital		N/A	N/A	146	138
	Hours of service provided by clinicians		8,269	9,295	8,421	8,770
	Boxes of Narcan distributed		N/A	115	112	81
	Fentanyl test strips distributed		N/A	150	295	254
PM2: How well did we do it?						
2.1	Documentation Compliance					
2.2	Documentation Timeliness					
2.3	Client Satisfaction with Services					
PM3: Is anyone better off?						
3.1	Connection to Services and Resources					
3.2	Successful Completion of the ACT Program					
3.3	Number of Suicide Attempts					

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Measure	1	Total clients served (unduplicated)
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Data



Data Summary

- From FY 2021 to FY 2024, the number of clients served increased 7%.
- The selected comparison population for the racial equity analysis is residents of the Washington DC metro area. This is because the majority of the clients incarcerated in Arlington County Detention Facility are not normally county residents, but rather individuals who have been arrested in the jurisdiction.
- Data for this measure is collected in the agency's electronic health record.
- 5% of program clients (51) are missing data on race and 21% of program clients (212) are missing data on ethnicity. They have been excluded from the race and Latinx calculations.
- Data collection for boxes of Narcan distributed and Fentanyl test strips distributed does not contain FY 2024 Q4 data. This is because the program lost the Medication Assisted Treatment (MAT) clinician, who had previously been collecting this data. The MAT clinician role is filled as of July 1 and a data collection plan is being put in place.

What is the story behind the data?

- Clients served by the Jail Based Services program decreased in FY 2024 while clients served on the Mental Health Unit increased by 60%.

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- The decrease in clients served in the program may be due to the loss of the MAT clinician for a large portion of the year. They played a key role serving clients on the team.
- The increase in clients served in the mental health unit is likely driven by an increase in client acuity and the expanded capacity of the unit to hold clients in its newly expanded men's unit. This unit, which had held 21 male inmates in FY 2023, has been at its capacity of 29 inmates throughout the year.
- The program has experienced substantial staffing challenges throughout FY 2024. There was turnover in the MAT clinician position, three positions on the Jail ACT team, and a discharge planning position at different times throughout the year. In April, one of the program's assistant managers resigned. In addition, the program had a new manager start in November. Despite this, the program has continued to provide services to clients during expanded hours on Sunday. The program plans to increase service hours reported in FY 2025 as new staff, who continue to familiarize themselves with the program, improve at entering session notes for all completed services.
- In FY 2024, the program continued to collaborate with the non-profit, [Offender Aid and Restoration](#) (OAR), to increase access to parenting classes and restart the incarcerated parents program.
- In FY 2023, Arlington County Detention Facility brought in the National Institute of Corrections to do an audit. The institute gave several recommendations to the program, and those were consolidated into a singular Jail Based Services procedure manual that is being used going forward.
- Recommendations from the audit included expanding service hours into the nights and weekends. Program hours increased in FY 2024 to one more full weekend day, which enabled staff to see more clients. The program is currently working to return to expanded hours, serving clients into the evenings on Wednesday through Sunday, and should be able to once it is fully staffed and current staff are fully trained.
- A high proportion of program clients are Black. This is likely due to complex upstream factors that have led to more Black individuals being involved in the criminal justice system.
- In FY 2024, most (80%) program clients were male.
- Jail Based Services clients are generally young compared to the rest of the agency, with nearly two-thirds of FY 2024 clients being under the age of 40.

Recommendations	Target Dates
• Review data collection practices to improve collection of Race and especially Ethnicity data.	• FY 2025 Q2
• Increase diversion efforts at the jail.	• FY 2025 Q2
• Fully restart jail-based services data collection that stopped Q4 of FY 2024 due to a change in staff.	• FY 2025 Q1
• Fully implement the jail-based restoration to competency program.	• FY 2025 Q2
• Partner with criminal justice stakeholders to see if diversion efforts can be aimed to reduce disparities in incarceration rates across racial or ethnic groups.	• Ongoing

Forecast

- In FY 2025, anticipate serving 1,100 clients

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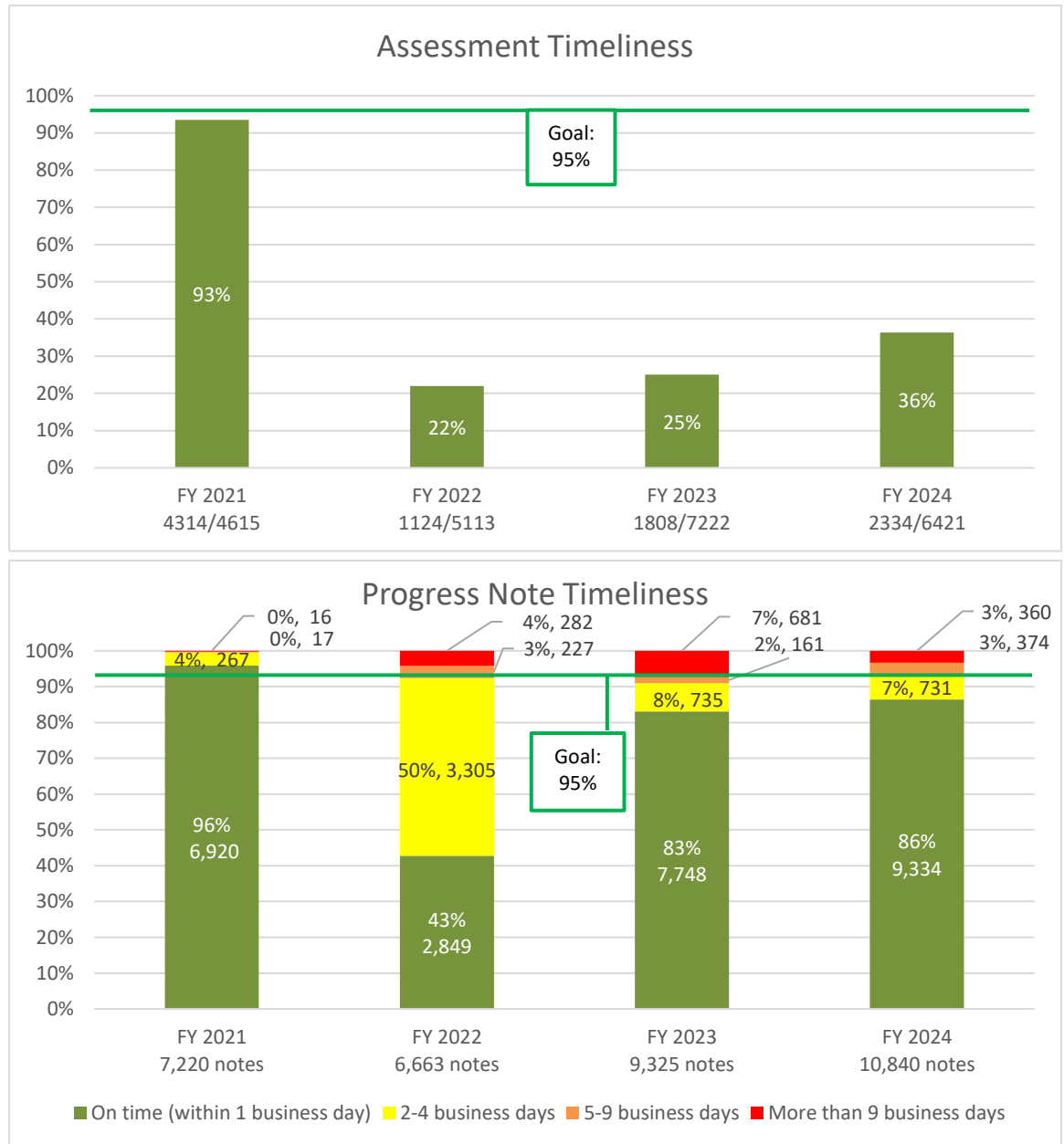
Measure	2.1	Documentation Compliance																									
Data	<div><div>Documentation Compliance</div><table><thead><tr><th>Fiscal Year</th><th>Charts Reviewed</th><th>Excellent (%)</th><th>Fair (%)</th><th>Poor (%)</th></tr></thead><tbody><tr><td>FY 2021</td><td>92</td><td>79%</td><td>17%</td><td>3%</td></tr><tr><td>FY 2022</td><td>92</td><td>85%</td><td>14%</td><td>1%</td></tr><tr><td>FY 2023</td><td>98</td><td>89%</td><td>8%</td><td>3%</td></tr><tr><td>FY 2024</td><td>131</td><td>89%</td><td>9%</td><td>2%</td></tr></tbody></table><p>Goal: 90%</p><p>■ Excellent ■ Fair ■ Poor</p></div>		Fiscal Year	Charts Reviewed	Excellent (%)	Fair (%)	Poor (%)	FY 2021	92	79%	17%	3%	FY 2022	92	85%	14%	1%	FY 2023	98	89%	8%	3%	FY 2024	131	89%	9%	2%
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Data Summary	<ul style="list-style-type: none">The Compliance Review Team (CRT) and the program manager review the same charts each month and come to consensus on scores when there is a discrepancy.Of the 131 charts reviewed, 89% were rated as “excellent,” scoring 90% or above on the criteria reviewed. The other 11% were either fair (9%) or poor (2%).																										
What is the story behind the data?																											
<ul style="list-style-type: none">Overall, chart scores remained consistent in FY 2024, despite challenges with team turnovers and a new program manager.The number of charts reviewed increased in FY 2024 due to added staff members including two Behavioral Health Specialists and an Assistant Program Manager.Areas of improvement include document completion and timeliness.In FY 2024, the new program manager continued utilizing the techniques developed by prior leadership to maintain high chart scores. These included regular consultations with both CRT and staff on identifying areas of improvement.Due to the nature of the program, many clients are only contacted once or twice before being bonded out. Because of this, each individual contact may be weighted more heavily than those in other programs, which can impact scores.																											
Recommendations		Target Dates																									
<ul style="list-style-type: none">Encourage staff to use the new dashboards and work closely with staff to monitor key indicators of chart compliance.		<ul style="list-style-type: none">FY 2025 Q2																									
Forecast																											
<ul style="list-style-type: none">In FY 2025, it is anticipated that 94% of charts will be rated “excellent” on internal reviews.																											

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Measure	2.2	Documentation Timeliness
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Data



Data Summary

- Jail Based Services staff are expected to complete all documentation within 24 hours of the intervention. Data is reported from the electronic health record.

What is the story behind the data?

- In FY 2024, timeliness of assessments improved. Assessment timeliness had dropped in FY 2022 due to the transition to a new electronic health record, but it has steadily improved.
- The most commonly late assessment was the risk assessment. Staff are regularly assessing clients for risk but may forget to fully complete and sign the risk assessment on time when dealing with clients at high risk.

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- In FY 2024, session note timeliness increased slightly. This higher score is thanks to continued efforts by the manager and the compliance review team to discuss session note strategies with staff and ensure that notes were completed and signed on time.
- The Jail Based Services program must enter data into both an agency and a jail record system, which can lead to timeliness challenges as staff ensures the data is entered correctly in both systems.
- It's important to recognize the achievements of the program on these measures in the face of their other everyday challenges. For instance, it can be challenging to complete documentation on time while staff are at the jail, as they may be called away to deal with client emergencies. Clients in the jail are also very fluid, coming and going rather quickly, allowing only for short periods to complete assessments and record progress notes.

Recommendations

Target Dates

- Use new data dashboards to track staff performance with assessment and/or note timeliness and coach staff to address any issues as they arise.
- Meet with the Compliance team to receive additional training and support as needed.
- Appropriately distribute staff workloads to maximize the team's ability to complete assessments in a timely fashion.

- FY 2025 Q2
- Ongoing
- Ongoing

Forecast

- In FY 2025, timeliness of assessment completion is expected to increase to 38% and session notes to 88%.

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Measure	2.3	Client Satisfaction with Services															
Data	<div><p>Percent Satisfied with Services</p><table><thead><tr><th>Fiscal Year</th><th>Percent Satisfied</th><th>Count (Satisfied/Total)</th></tr></thead><tbody><tr><td>FY 2021</td><td>88%</td><td>(29/33)</td></tr><tr><td>FY 2022</td><td>88%</td><td>(37/42)</td></tr><tr><td>FY 2023</td><td>91%</td><td>(53/58)</td></tr><tr><td>FY 2024</td><td>76%</td><td>(25/33)</td></tr></tbody></table></div>		Fiscal Year	Percent Satisfied	Count (Satisfied/Total)	FY 2021	88%	(29/33)	FY 2022	88%	(37/42)	FY 2023	91%	(53/58)	FY 2024	76%	(25/33)
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FY 2023	91%	(53/58)															
FY 2024	76%	(25/33)															
Data Summary	<ul style="list-style-type: none">Results are obtained from the consumer satisfaction survey administered annually over a two-week period. Respondents choose from a four-point scale ranging from “very satisfied” to “quite dissatisfied.” Responses of “very satisfied” and “mostly satisfied” are reported here.Data is based on responses to “Overall, I was satisfied with the treatment I received, in the ACT program” or “I am satisfied with the DHS services I received” depending on the client’s program.																
What is the story behind the data?																	
<ul style="list-style-type: none">Satisfaction levels decreased in FY 2024 to 76%.One the reasons for a decrease in satisfaction may be the loss of a key role on the team; the assistant manager, who left the team shortly before surveys were administered.Other possible reasons for decreases in satisfaction include additional staff transitions and space sharing. The space where classes were offered was combined into a space shared with other programming, which limited the privacy and quality of classroom support.In FY 2024, clients reported that especially helpful parts of the program included having time with counselors, having a space to share about their own experiences, and learning about themselves and resources to help themselves.The most common idea for improvement shared by clients was to have more personal discussion groups, indicating the value that clients see in connecting with each other and the ACT team.																	
Recommendations		Target Dates															
<ul style="list-style-type: none">Focus on stabilizing the team through more recruitment efforts and improving the workplace experience for staff. Having a stable team and coverage is key to improving the client experience.		<ul style="list-style-type: none">FY 2025 Q2															

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<ul style="list-style-type: none">Continue ongoing conversation with jail security staff to move ACT meetings to their own space.	<ul style="list-style-type: none">Ongoing
<ul style="list-style-type: none">Explore ways to improve the survey response rate.	<ul style="list-style-type: none">FY 2025 Q2
Forecast	
<ul style="list-style-type: none">In FY 2025, anticipate that clients will report 88% satisfaction with services.	

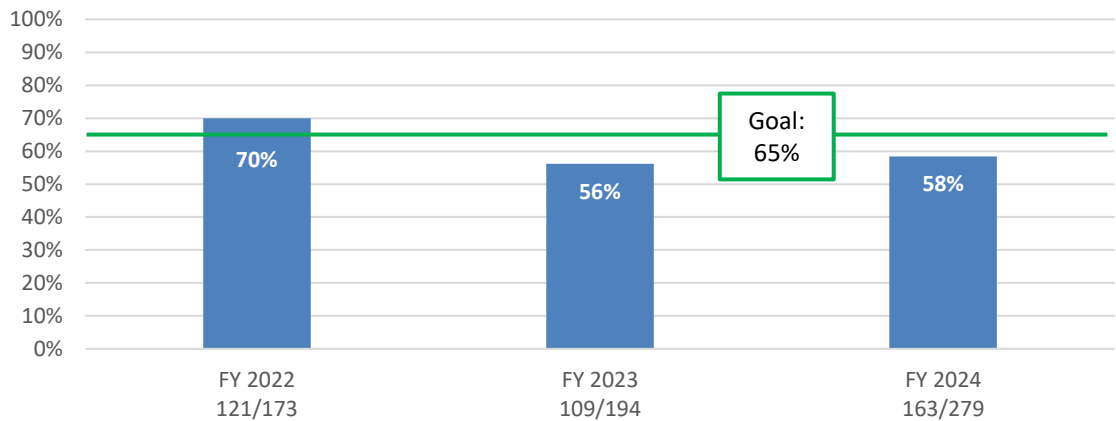
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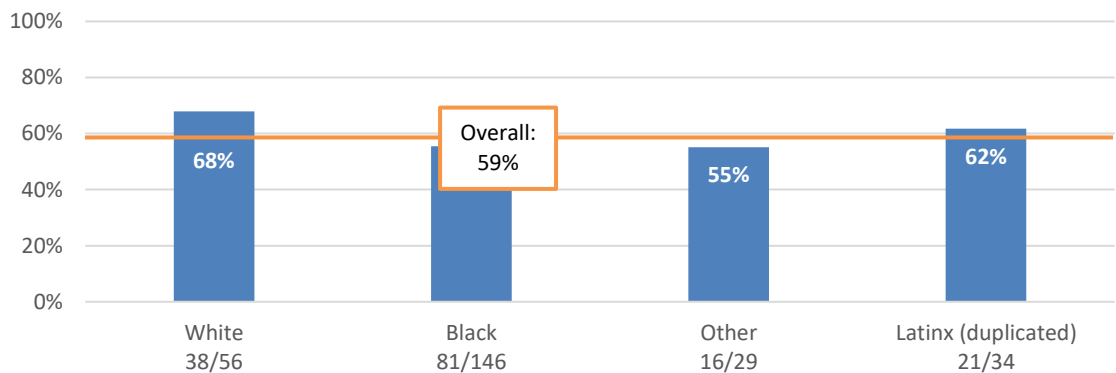
Measure **3.1** **Connection to Services and Resources**

Data

MAT Clients Receiving Resources or Service Connections at Discharge



MAT Clients Receiving Resources or Service Connections at Discharge by Race/Ethnicity



Data Summary

- The program manager maintains a spreadsheet documenting how many clients were connected to services and/or resources at discharge.
- Services connected to include Assertive Community Treatment, Outpatient, and out of county programs. The most common resources, from most to least utilized, include bed-to-bed, Narcan, and Medication Assisted Treatment (MAT) bags.
- The goal for this measure is 65%, as some MAT clients will enter and exit services before they can be attended to by program staff, and some will be relocated to another jurisdiction.
- Clients who refuse offered resources or who are transferred to another facility are excluded from this measure.
- Race and ethnicity data is missing for 17% of clients who were counted in this measure. The overall line was recalculated after removing these clients, which explains why it is higher than the full FY 2024 percentage.

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- Data collection for service and or resources connections for MAT clients does not contain FY 2024 Q4 data. The MAT clinician who had previously collected that data resigned. The MAT clinician role is now filled as of July 1 and data collection is restarting.

What is the story behind the data?

- Beginning in FY 2022 and continuing into FY 2024, the Jail Based Services team provided MAT. MAT is focused on getting clients access to medications and treatment that reduce the harms of substance use. This support covers a continuum of services, from distributing Narcan to cabbing clients to a medical appointment.
- More clients are presenting to the jail with opioid usage diagnoses than ever before. The Jail Based Services team has one clinician who provides MAT services, and covering all of these clients is challenging as each connection to resources requires hours of calling different community organizations and collecting documentation.
- The MAT clinician works closely with Mediko medical staff to provide comprehensive treatment services to clients. There were changes to the Mediko staff force in FY 2023, which significantly impacted programming and communication in FY 2024.
- Clients who transfer to another jail are excluded from this measure, as they are not discharged from Arlington County Detention Facility. However, the MAT staff member still spends extensive time with these clients, preparing them for discharge and lining up resources. Staff will often not know about a transfer or discharge until it occurs.
- To help clients connect with services and supports following incarceration, one of the discharge planners coordinated a reentry fair which brought in outside resources for clients in FY 2024.
- In FY 2023, an external organization provided consultation on the MAT program. This organization gave guidance on program improvements and best practices that will be implemented in FY 2025.
- An equity analysis of the program identified that clients who identified as White were more likely to receive services or connections at discharge compared to other races or ethnicities.

Recommendations	Target Dates
<ul style="list-style-type: none"> • Partner with Sheriff and Mediko to implement policies and procedures for the MAT program that are in line with the consultant's recommendations. 	<ul style="list-style-type: none"> • FY 2025 Q2
<ul style="list-style-type: none"> • Consider breaking out Arlington clients from non-Arlington clients in future years, to determine if outcomes are different dependent on a client's initial jurisdiction 	<ul style="list-style-type: none"> • FY 2025 Q4
<ul style="list-style-type: none"> • Fully restart service and resource connections data collection that stopped Q4 of FY 2024 due to a change in staff. 	<ul style="list-style-type: none"> • FY 2025 Q2
<ul style="list-style-type: none"> • Have new staff fully implement previous procedure to hand out packs containing Narcan, test strips, and information on resources on hours when staff are not in the facility. 	<ul style="list-style-type: none"> • FY 2025 Q2
<ul style="list-style-type: none"> • Work closely with Mediko medical staff to strengthen lines of communication and continue strong client advocacy so that clients receive comprehensive treatment services. 	<ul style="list-style-type: none"> • Ongoing

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- Review FY 2024 resource and connection equity data to understand trends and determine if additional action steps need to be taken to support clients who do not identify as White.

- FY 2025 Q2

Forecast

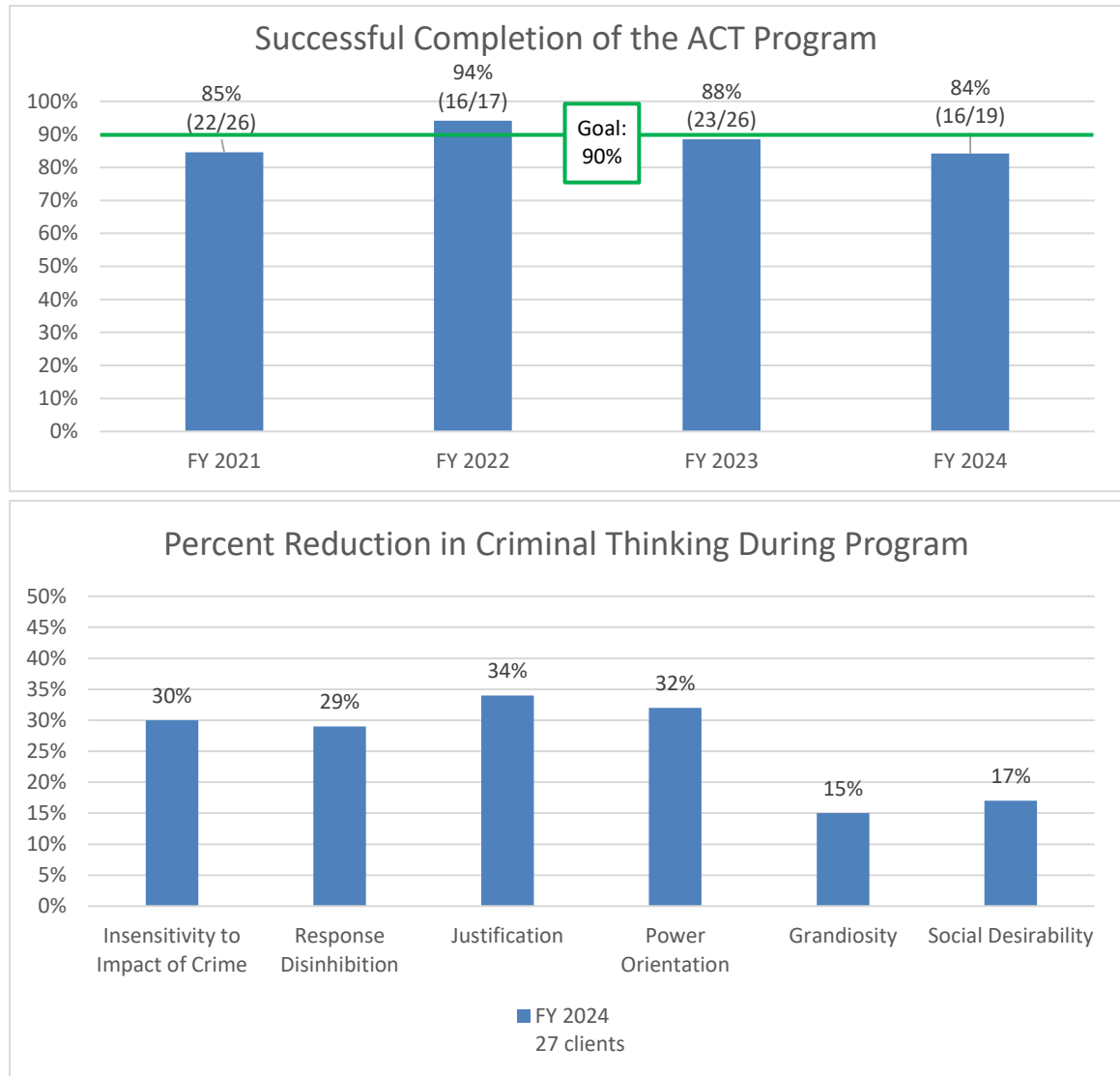
- In FY 2025, it is anticipated that 60% of clients will be connected to at least one resource.

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Measure	3.2	Successful Completion of the ACT Program
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Data



Data Summary

- The successful completion rate decreased slightly from 88% in FY 2023 to 84% in FY 2024. Data is from the electronic health record.
- Program participants are administered the Texas Christian University Criminal Thinking Scale (TCU CTS) 3 before starting the program and at regular intervals throughout their participation in Moral Reconciliation Therapy to determine possible increases in knowledge of recovery skills.
- FY 2024 was the first year participants completed the refined version 3 of the original TCU CTS, which was administered in years prior. Version 3 of the TCU CTS contains different scale names and items from the original version that was administered in prior years.

What is the story behind the data?

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- Successful completion of the ACT Program reflects progression through established levels that includes psychoeducation, therapy, relapse prevention, building coping skills and developing a recovery plan for after release.
- Upon successful completion, clients are awarded a certificate of completion, and their court letter is distributed to the courts, the attorneys, and the probation/parole officer. All Arlington residents are referred for further services as needed.
- In FY 2024 the program expanded the use of Sublocade in the jail, along with an injectable option. This Medication Assisted Treatment (MAT) allows for more effective medication administration and adherence while also preventing misuse and abuse of other treatment medications. While costly and resource intensive to set-up, this provides a substantial boost to the likelihood that clients will successfully complete the program.
- While every effort is made to assist clients with being successful in completing the ACT Program, there are situations where a client may not be successful. The main reason for an unsuccessful discharge from the program is behavioral, such as threats and acts of violence. Graduated sanctions are used as appropriate, but some actions call for immediate discharge from the program, as was the case in FY 2024.
- The use of the TCU CTS 3 allows staff to see individuals' baseline and any changes in thinking.
- The program showed positive changes in all criminal thinking domains in FY 2024.
- Some of the areas where criminal thinking decreased most significantly included justifying criminal behavior and maintaining power over others by reacting to disrespect from them.

Recommendations

Target Dates

- Continue to incorporate interventions to prevent an unsuccessful discharge, including individual sessions to assist clients with behavioral difficulties, and temporary suspensions that allow the client to return and complete the program.
- Examine ACT program and identify potential gaps in services provided

- Ongoing
- FY 2025 Q4

Forecast

- In FY 2025, ACT program completion is expected to increase to 86%.

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Measure	3.3	Number of Suicide Attempts			
Data		FY 2021	FY 2022	FY 2023	FY 2024
	Total Inmates	4,572	4,677	5,042	5,538
	Attempts	8	6	12	5
	Completed	0	0	0	0
	Crisis Cell Placements	117	149	268	364

Data Summary	<ul style="list-style-type: none"> In FY 2024, there were five suicide attempts. Self-injurious behavior not intended to commit suicide is not included. Total inmates who were at Arlington County Detention Facility are also reported to help provide context to the number of suicide attempts.
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What is the story behind the data?

- Pre-pandemic, there were usually 1-3 criminal Temporary Detention Orders (TDOs) requiring clients to receive mental health hospitalization. In FY 2024 there were seven, a decrease of 53% from the prior year. Staff continue to advocate for clients to be placed in the most appropriate environment and receive the treatment they need.
- There is a high risk of suicide attempts in jails during the first 72 hours, especially if the individual is using drugs or alcohol. The Jail Based Services team works closely with the medical contractor and security staff to manage people who come into the jail, especially if they are detained while under the influence.
- Many clients express suicidal thoughts while incarcerated, and the Jail Based Services team takes quick action to get them housed in a secure environment. In FY 2024, there were 364 crisis cell placements for clients with suicidal ideations, plans or attempts, an increase of 36% from the prior year.
- The high number of crisis cell placements is likely related to a combination of high client acuity and staff appropriately identifying risk and intervening when a client is at risk of suicide. Suicide attempts decreased by more than half, suggesting crisis cell placements may be an effective means of reducing suicide risk.
- The Jail Based Services team continues to provide quarterly training to the sheriff's staff on suicide prevention. They are taught the common symptoms and what to watch for. If they notice any symptoms, the security staff contacts the team to assess for safety.

Recommendations	Target Dates
<ul style="list-style-type: none"> Continue administering the Columbia Suicide Severity Rating Scale to help identify clients at risk of suicide. 	<ul style="list-style-type: none"> Ongoing
<ul style="list-style-type: none"> The jail will continue using the brief jail mental health screen in the booking process to identify clients with behavioral health needs. 	<ul style="list-style-type: none"> Ongoing
<ul style="list-style-type: none"> Continue daily follow-up for clients with an active Risk Assessment Management Plan. 	<ul style="list-style-type: none"> Ongoing

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Forecast

- In FY 2025, anticipate that suicide attempts will be 5.