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TOP STORY

CRIMINALIZING MENTAL ILLNESS

Forty percent of county jail inmates mentally ill

‘These people don’t belong in jail,’ says sheriff

By Kirsten Fiscus, Star Staff Writer, kfiscus@annistonstar.com Oct 15, 2017



Calhoun County Sheriff Matthew Wade is shown in March of this year as he gives a tour of the county jail.

Photo by Stephen Gross / The Anniston Star

A year ago Joy Howell, Melanie Trantham, and Melanie Hurst died after an Ohatchee man, being treated for a mental illness, left the hospital, stole a pickup truck and crashed it into the vehicle carrying those victims.

The defendant, Jordan Stewart Baker, remained in the Calhoun County Jail this week on three murder charges, reckless driving, attempting to elude and first-degree theft, according to court records.

“If he’d been taken care of properly from the beginning this might not have happened,” Calhoun County Sheriff Matthew Wade said earlier this month.

Cases like Baker's, in which offenders suffering from mental illness harm others, are becoming an all-too-familiar narrative for law enforcement officials, Sheriff's Office Chief Deputy Jon Garlick said earlier this month. Garlick is the county's mental health officer, but he doesn't have as much power to commit patients as he feels he needs.

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"Something's got to change," he said.

Options are fewer

About 200 of the Calhoun County Jail's 500 inmates have a diagnosable mental illness, including drug addiction, and about 10 percent of those have a severe personality disorder, Garlick said.

The chief deputy, however, said those people should be in the care of mental health professionals who can give them individualized attention and medical care, unlike jail staff who attend to about 500 people on a daily average.

"The state has successfully criminalized mental illness," he said on Thursday.

Garlick has had enough and he said the state needs to "suck it up and spend the money to build more beds." Mental health professionals, however, say there also needs to be better preventive care for patients.

Locally, Garlick has few options of where to take patients in a crisis, he said. Regional Medical Center stopped taking patients without a court order about two years ago, the chief deputy said, and it can be difficult to get patients to the state-funded Highland Health Systems in Alexandria outside of regular business hours.

Many people who don't receive the treatment they need end up committing crimes, and their care falls on the medical staff at the Calhoun County Jail, Wade said.

"These people don't belong in jail," Wade said. "They have a disease and they can't help that."

In 2015, nearly half of Alabamians suffering from mental illness received no mental health services, according to a report by the Substance Abuse and Mental Health Services Administration, an agency under the U.S. Department of Health and Human Services.

Garlick said it's that percentage without services that often commit crimes.

As the mental health officer, Garlick helps patients or families of patients find mental health resources. He also used to be able to respond to someone in a crisis and get them into a treatment facility for a 72-hour hold, but that's no longer the case, he said.

Until 2015, Garlick could take a patient in crisis to RMC, where that person would be medically cleared of any other illnesses or conditions in the emergency room before being given a bed and treated by a mental health professional, the chief deputy said. But according to state law, the patient must be taken to a "designated mental health facility."

BY THE NUMBERS:

Mental health problems in adults in America

1.1 percent with schizophrenia

2.6 percent with bipolar disorder

6.9 percent with major depression

18.1 percent with an anxiety disorder

Mental health problems in U.S. prisons and jails

20 percent of state prisoners have a recent history of mental illness

21 percent of local jail inmates have a recent history of mental illness

15 percent of men booked into jails have a mental illness

30 percent of women booked into jails have a mental illness

Source: National Alliance on Mental Illness

“RMC is not designated,” Garlick said. “They were technically within their rights to refuse our 72-hour holds.”

Joe Weaver, CEO of Stringfellow Memorial Hospital in Anniston, which RMC operates, said by phone on Friday that he’d not been included in any conversations about the 72-hour holds.

“That’s more of a clinical issue,” he said.

Designated facilities

According to state law, the Department of Mental Health decides which facilities become designated, and the facilities that do so must adhere to standards written by the department. Designated mental health facilities have been the Mental Health Department’s answer to the closing of its psychiatric hospitals in recent years.

Weaver said he was unaware of any discussions “in a formal setting” about becoming designated. Dr. Andrea Thomas, director of the psychiatry department at RMC, said she’d like RMC to become designated.

“Every other hospital I’ve worked at in the state is designated,” she said. “That’s something we’re looking at.”

Thomas said she had conversations with RMC officials about the benefits and downsides of becoming designated.

“Being designated gives you more flexibility,” she said, explaining that committed patients who are waiting on beds at a state hospital are in stable condition, they can be released.



On the downside, becoming designated opens up the hospital to more patients, some of whom can be violent, Thomas said.

“For the most part though, I don’t see a downside to becoming designated,” she said.

Since 2012, the state has closed Searcy Hospital in Mount Vernon, Greil Montgomery Psychiatric Hospital and North Alabama Regional Hospital in Decatur. Only the Tuscaloosa-based facilities Bryce Hospital, Mary Starke Harper Geriatric Psychiatry Center and the Taylor Hardin Secure Medical Facility for the criminally mentally ill remain.

The smaller facilities, spread around the state, are designed to save the state money and provide more localized mental health care. Efforts to reach the commissioner of the department were unsuccessful.

Highland Health Systems, which operates a 16-bed facility in Alexandria, is one of those designated mental health facilities. The facility, however, is often full of court-ordered commitments, and when there is an open bed the patient can only be committed after being medically cleared, Garlick said.

“During business hours they can check them there but outside of those hours they don’t have the personnel to do a physical,” he said. “And those that do get a physical can be denied a bed for just having high blood pressure.”

Efforts to reach Mickey Turner, director of Highland Health, were unsuccessful.

Without those 72-hour holds, families of those suffering from mental illness are often left with no options, the chief deputy said.

“If they are financially able, family members can get patients into another private facility but even then, the patient can deny services and without a court order the facility has to respect that,” Garlick said. “That’s when patients often end up committing crimes.”

Click to read the second story in our three-part series on mental illness and criminal justice.

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https://www.annistonstar.com/news/court-program-aims-at-healing-for-defendants-with-mental-illness/article_9b20a0a2-b2b5-11e7-ada3-7342d6d74541.html

TOP STORY

CRIMINALIZING MENTAL ILLNESS

Court program aims at healing for defendants with mental illness

Judge says stigmatization of mental health trouble should end: 'They are just like any of us.'

By Kirsten Fiscus, Star Staff Writer, kfiscus@annistonstar.com Oct 16, 2017



The Calhoun County Courthouse. (Trent Penny/The Anniston Star/file)

Jordan Stewart Baker has a documented history of mental illness stretching years into his past and up to the day before he left Regional Medical Center, stole a truck and wrecked it, killing three women on Sept. 27, 2016.

Baker, charged with three counts of murder, reckless driving, attempting to elude and first-degree theft, has remained in the Calhoun County Jail since Oct. 20, when he was discharged from UAB Hospital in Birmingham.

Baker's attorney, Shaun Quinlan, filed a motion for a mental evaluation in April and as of Monday there was no indication in court records if his client had seen a doctor for it.

The average stay for a Calhoun County Jail inmate is less than a year, but those who suffer from mental illness often remain longer, unable to aid in their own defense or awaiting an evaluation at a state facility, officials said.

According to the Treatment Advocacy Center, a Virginia-based nonprofit that studies mental health policy nationwide, an estimated 383,000 people with mental illnesses were incarcerated in jails and prisons across the United States in 2014.

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In Alabama, inmates with pending criminal charges cannot be committed to the Department of Mental Health, Calhoun County Sheriff Matthew Wade said this month. Those inmates must then rely on mental health services through the medical agency the county contracts with for the Calhoun County Jail, the sheriff said.

“Any services outside of what our on-site nurse or assigned doctor can do are additional costs,” he said. “If we have to take someone to the ER because they’ve hurt themselves, that’s an additional cost. If we need a mental health professional, that’s an additional cost.”

Last month, the Calhoun County Commission approved a \$730,000 budget for county jail inmate medical care, about \$210,000 more than last year.

A tailored solution

Chief Deputy Jon Garlick with the Sheriff’s Office said one option for mentally ill inmates charged with misdemeanors is to participate in Calhoun County’s mental health court. Those with felony charges however, are harder to take care of.

At a hearing earlier this month, participants in the mental health court filled the pews of a courtroom. Some were white, some were black, and they were young and old.

“There is a stigma around mental health that needs to end,” Calhoun County Circuit Judge Brian Howell said earlier this month. “They are just like any of us.”

Howell said he started the mental health court, a type of diversion program, in 2012 after it became apparent there were many people involved with the legal system who needed help.

“A lot of these people are dual-diagnosis and their circumstances weren’t right for our drug court,” Howell said on Tuesday.

Howell explained that participants in drug court, a similar program for defendants charged with low-level drug offenses, must be completely substance-free during their time in the program.

“We still drug test those in mental health court but we might be checking to make sure they test positive for certain drugs,” he said. “Many of those people are on medications to manage their mental illness and we want to make sure they continue to take those medications.”

During the meeting, Howell congratulated some who were compliant in taking their medicines, and chided others who’d decided they didn’t need to anymore.

To participate in mental health court, inmates agree to plead guilty to the charge and instead of serving time in jail or prison are granted the opportunity to attend outpatient mental health treatment programs through Highland Health Systems, Howell said.

“We have a few that are inpatient at other facilities, but those are special cases,” the judge said.

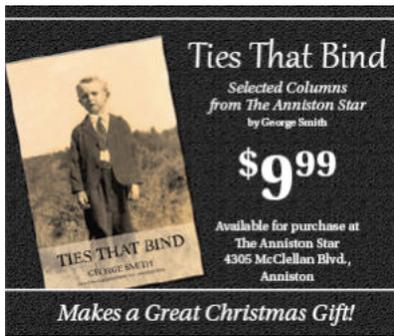
Amanda Young, Howell’s law clerk, said there were 68 people in the mental health court last week. Typically, participants spend two years in the program, she said. Each year about eight to 10 people graduate from the program, Young said. During the monthly meeting, two men graduated, one who had participated for more than four years and another for three, Howell said.

“You’ve got your family and you’ve got your sobriety carrying y’all through,” Howell said to the two as those in the audience clapped and cheered.

‘The only options’



Calhoun County Circuit Judge Brian Howell (Kirsten Fiscus/The Anniston Star/file)
Kirsten Fiscus



Howell said the program, which has grown to be the biggest in the state, is a compromise for now.

“We’d love to have more beds available,” Howell said. “But right now the only options for these people is often prison, where they’d be underserved, or this program.”

Young said the program is often an opportunity for participants to feel proud of their accomplishments.

“Some people who have been compliant come to the once-a-month hearing and we dismiss them immediately,” she said. “Others we call up because they want to be told they’re doing a good job. This court is often the first time the justice system has treated them fairly.”

Inmates charged with violent crimes, who Howell usually does not accept into mental health court, often sit in the county jail awaiting trial, Garlick said.

“A lot of times an attorney will request a mental evaluation be done but the inmate has to go to Taylor Hardin for that and they have a nine-month waiting list,” the chief deputy said, referring to a state-run facility.

So inmates with mental health needs, like Baker, must wait for at least nine months for a resolution in their case. That period of time can be stressful, and behavioral problems can begin to manifest for inmates struggling with mental illness, Garlick said, which can lead to new charges.

Click to read the final story in our three-part series on mental illness and criminal justice.



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Officials say more should be done to prevent lives being lost to mental illness

By Kirsten Fiscus, Star Staff Writer, kfiscus@annistonstar.com Oct 16, 2017



The outside of the emergency department at Regional Medical Center in Anniston. (Trent Penny/The Anniston Star/file)

'It's got to stop'

Chief Deputy Jon Garlick of the Calhoun County Sheriff's Office estimates that about six people have died since 2015 because he could not get someone having a mental health crisis into a treatment facility for a 72-hour hold.

According to the Substance Abuse and Mental Health Services Administration, about 10 percent of homicides in the country involve an offender with a serious mental illness.

Jordan Stewart Baker, charged with three counts of murder, had been diagnosed with depression, and prescribed medications commonly used to treat schizophrenia and bipolar disorder, according to court records. On the day he stole a truck, fled from a deputy and wrecked the vehicle killing three women in September 2016, Baker had checked himself out of Regional Medical Center "against medical advice," according to those records.

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Since 2015 in Calhoun County, attorneys in three murder cases and one capital murder case have requested mental evaluations for their clients. Last month, a woman suffering from mental illness shot and killed her two daughters, then shot and killed herself. Days later, a Pell City man who suffered from mental illness was shot and killed by a Calhoun County sheriff's deputy after the two got into a struggle and the man pulled a weapon from the deputy's belt.

"It's got to stop," Calhoun County Sheriff Matthew Wade said. "If mental illness was treated properly up front, law enforcement wouldn't have to be as involved as we are."

'Different level of care'

Garlick said that when mentally ill people are shot and killed by law enforcement, often the criticism is on the agency involved.

"When these shootings happen, criticizing law enforcement is shifting the focus from where it needs to be," he said. "The criticism should be on helping these people before they're in a crisis. By the time they end up with a gun or a knife it's usually too late."

Dr. Andrea Thomas, director of the psychiatry department at RMC, agreed that there needs to be better funding and resources for preventive measures.

"I would like for there to be a different level of care available, get to people before they get really sick," she said. "I think there should be better access to a partial hospital program where someone comes in part of the day to do intensive therapy, before they get to the point they can't function."

Thomas said she'd also like to see more counselors in schools talking about

mental health.

"There should be work to expand school-based mental health intervention," she said. "You can intervene quicker in kids lives than by the time they're addicted to drugs or have a serious mental illness."

Power to help

Garlick said that if he and other local law enforcement are to continue to be the decision makers for patients' mental health, he'd like to be able to order patients held for 72 hours.

"Georgia is one state that is a shining example of how the laws should be," Garlick said. "Any law enforcement official can take a person in crisis to the ER and they have to accept them."

Chief Deputy Jon Garlick of the Calhoun County Sheriff's Office. (Kirsten Fiscus/The Anniston Star/file)

According to the Department of Behavioral Health and Developmental Disabilities in Georgia, police officers and sheriff's deputies can call a crisis number, and the operator will direct the official to the nearest crisis center with an availability. There are 23 facilities across Georgia that can take patients in crisis.

Thomas, however, said that while getting patients in Georgia to facilities is easy, it's keeping them there that's hard.

"To keep you in the hospital in Georgia, you have to try to hurt yourself or someone else," she said. "Alabama's interpretation of dangerousness is a lot broader. If we decide you can't get yourself to the pharmacy for your medicine, you're deemed a danger to yourself in Alabama."

Garlick said that in Florida people diagnosed with mental illness can be issued an identification bracelet, much like someone might have an allergy identification bracelet.



"Those have been fairly successful," he said.

Thomas, who has also practiced in Kentucky, praised some aspects of that state's mental health system.

"They had state hospitals that were designated," she said. "People on petition would be taken to those hospitals and there would be a hearing held there."

Overall, though, Thomas said Alabama's system is not the worst.

"I think Alabama has a pretty decent system in place," she said. "I think Alabama does a better job with the outpatient commitment. If patients get better, they have outpatient commitment for 150 days. They have a case manager, and are required by law to see a psychiatrist."

Thomas, however, said that each state has good and bad things in their systems, and that none are perfect.

More beds, more care

While Garlick recognizes the need for some legislative changes, he said the more immediate need is more beds and better access to them.

Last month, RMC petitioned the State Health Planning and Development Agency for permission to add 20 psychiatric beds at its main Anniston campus and five more at RMC Jacksonville. Earlier this month, the agency gave an initial approval to add those beds, but it could take up to nine months for final approval and possibly years before all beds are available, officials told The Star.

Garlick said he'd been invited to work with RMC to get the beds. Wade, however, wants to strike a deal before lending his chief deputy to RMC for support of the petition.

“They need to accept our 72-hour holds again,” Wade said. “I’ve told him not to agree to anything until they agree to do that.”

Garlick said the meeting was productive but RMC officials had not said definitively if they’d accept his hold orders.

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Tags

Jon Garlick Psychiatry Law Pharmacology Mental Illness Hospital Medicine Georgia Andrea Thomas
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