

HITTING THE MARK IN BUILDING A JAIL-BASED COMPETENCY RESTORATION PROGRAM



TERRY HANCOCK MA, LPC, NCC

CLINICAL TEAM LEAD; THE HARRISCENTER FORMENTALHEALTH AND IDD

KRYSTIN HOLMES PHD, LPC-S LMFT-S, NCC

PROGRAM DIRECTOR; THE HARRISCENTER FORMENTALHEALTH AND IDD





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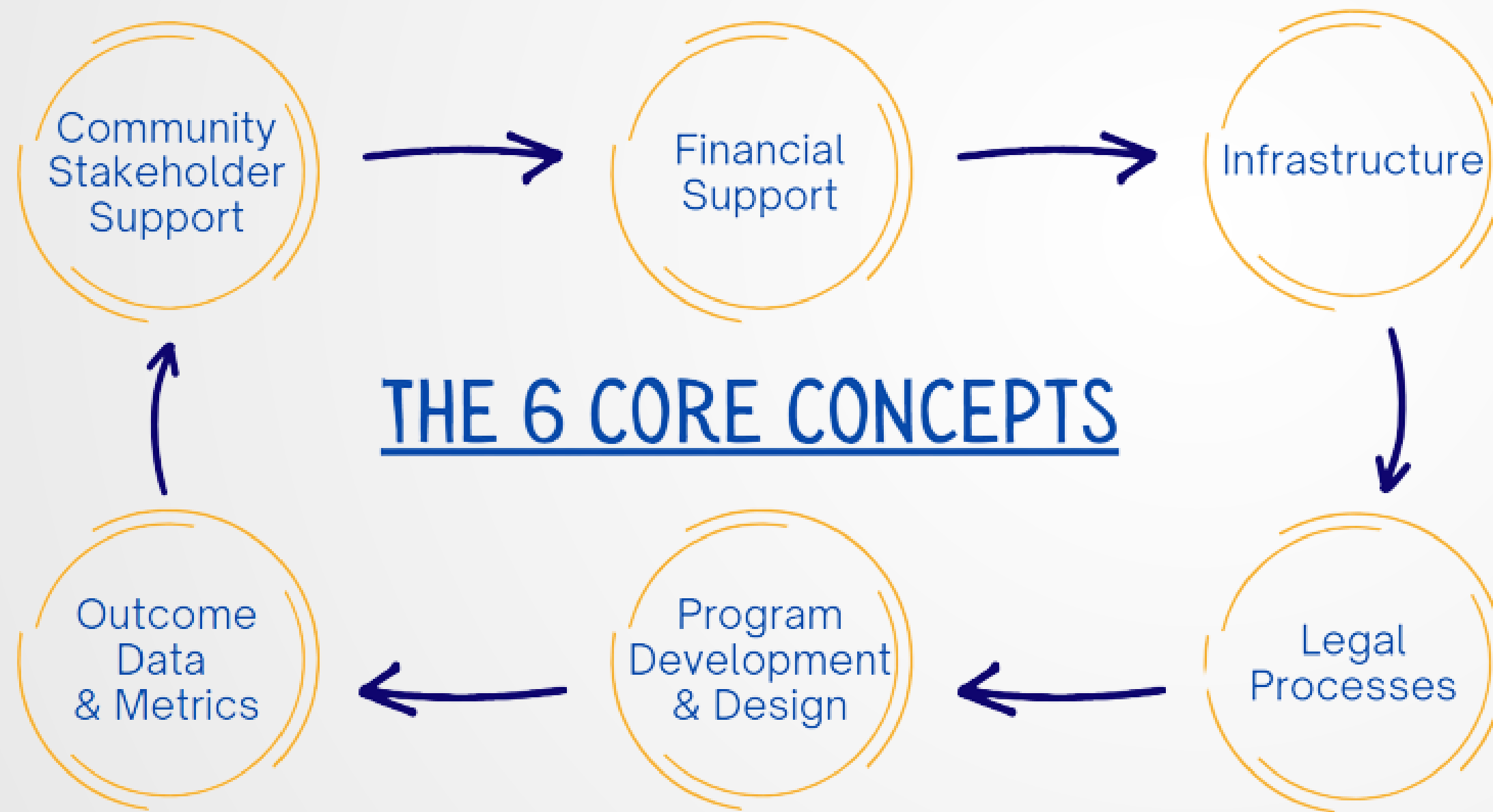
Educational Objectives



- Objective 1: Analyze the six core concepts for developing a successful JBCR program.
- Objective 2: Describe the steps for developing a JBCR tailored to one's own jail.
- Objective 3: Discuss the benefits and challenges to the development and implementation of a JBCR program.



The Six Core Concepts in Building a Jail Based Competency Restoration Program



(Holmes, 2024)



Core Concept 1:



Community Stakeholder Support



Identifying stakeholder support will be the first step in the development of a JBCR program.



Who is your “Champion Supporter”?



This will be someone who has a vested interest and can be a: Judge, Sheriff, District Attorney, Public Defender, County Commissioner, or County Judge



Developing and Maintaining a Collaborative Approach

01

Identify

Strategic Identification:
Who has a vested
interest?

02

Recognize

Recognize that
everyone has an
interest.

03

Facilitate

Be the common
denominator: Host the
party.

04

Maintain

Must maintain the trust
of your stakeholders.

Identify a problem, bring a solution

What Impacts are being felt?



Wait times for the State Hospital are a major driver in the number of days an individual will spend incarcerated.



What costs can be avoided by lowering the number of days an individual spends incarcerated and who is paying for it?



How long is the process? Identify the amount of time from client's arrest to disposition of case if competency is brought into question.

Develop a Winning Lineup



Champion Stakeholder

Tier 1



Sheriff



Local Mental
Health Authority



District
Attorney



Public
Defender



District &
Criminal Courts

Tier 2



Local Defense
Attorneys



County
Judge



County
Commissioner(s)



County
Officials



HHSC

(Holmes, 2024)

Core Concept 2:



Financial Support



Where is the funding going to come from?



JBCR programs require sustainable funding. These can come from multiple sources, including from the local, state or federal level



While JBCR programs can be easily scaled to meet the individual's programmatic needs, there are key positions that must be filled.



Key Positions for Consideration



Assessor

This individual is a licensed clinician who will complete assessments to determine an individual's appropriateness for JBCR or if they would be best served at the State Hospital.



Educator

This is a scalable position that can be filled by either a licensed clinician or bachelor's level care coordinator.



Psychologist

Once the client has completed JBCR a Competency Evaluation will need to be completed. This position can either be contracted or internal to the program.



Prescriber

Depending on location and contract, this position can either be filled by a Mid-level prescriber or Psychiatrist.

Core Concept 3:



Infrastructure



Physical location and logistics play a major role in the success of a program.



Security of staff and clients is the top priority highlighting the importance of collaboration between jail and mental health staff.



Infrastructure Considerations

Where is programming going to take place?



Contractual Obligations: Are the participants required to be kept separate from the general population?



Location: Is programming going to take place on the unit, or will participants be brought to a central location?



Individual: Will programming be brought to clients who are not able to participate in a group setting?



Core Concept 4:



Legal Processes



Creating a smooth workflow is integral to a program's success. This requires working with the court, county clerk's, district attorney's, and public defender's offices.



When collaborating, it is important to identify what the process for assessment, admission, and discharge from the program will be. These will need to be identified before treatment begins.



Legal Workflow Considerations

What is the process?



Assessment: Allows the program to make the determination if they are equipped to treat the client or if they would be better served at the State Hospital.



Admission: Both party agreement for admission into the program.



Discharge: Administrative filing removing the client from the program to allow for the next client to be admitted.

Core Concept 5:



Program Development & Design



Programmatic development and design will vary depending on the needs of each jail and county.



How the services will be delivered and what the modalities used will be determined by the size, budget, and location of your program.



Holistic Forensic Model

holistic adjective

ho • lis • tic

- 1: a multidimensional approach to wellness that considers the whole person, including their physical, mental, emotional, social, intellectual, and spiritual aspects

forensic noun

f ə • 'ren • sik

- 1: the application of knowledge to legal problems; corrections or detentions
- 2: forensic science, criminal elements



Holistic Forensic Model

holistic adjective + **forensic** noun

ho • lis • tic

fə • 'ren • sik

- 1: a multidimensional approach to correctional wellness that considers the whole person, including their physical, mental, emotional, social, intellectual, spiritual and legal aspects
- 2: a method of applying forensic science to justice-involved persons that considers the person in relation to their individual factors including past and present trauma
- 3: Related: *Trauma Informed Approach*



Holistic Forensic Model



Physical & Medical

Attending to physical wellness needs



Mental & Emotional

Attending to psychiatric wellness and emotional needs



Social & Spiritual

Attending social interaction and spiritual needs



Educational & Intellectual

Attending to the educational, developmental, and intellectual needs



Justice-Involved

Attending to social interaction and spiritual needs



Programmatic Considerations

01

Court Ed.

Court education can be offered in both group and individual formats. The decision will be based on the client's progress and access to that individual.

02

Psychosocial Rehab

An essential service in providing comprehensive support, combining therapeutic interventions and resource facilitation to promote recovery and reintegration into society.

03

COPSD

Emphasizes the importance of integrated care, addressing both mental health and addiction issues simultaneously for better outcomes.

04

Medication Management

A critical component to JBCR and the success of the individual. Ensures treatment is specific to their needs.

JAIL BASED COMPETENCY RESTORATION

JBCR

 The
HARRIS
CENTER for
Mental Health and IDD

HARRIS COUNTY
HCSO
SHERIFF'S OFFICE
The Women's Empowerment Center
1307 Baker Str

HARRIS COUNTY
HCSO
SHERIFF'S OFFICE
SHERIFF ED GONZALEZ

Core Concept 6:



Outcome Data and Metrics



Most important piece of the program



Accurate program data highlighting programmatic success allows for the continuation of the programmatic cycle feeding back to key stakeholders to secure sustainable funding, allowing for program expansion and growth.



Data and Metrics Considerations

What are you going to track?



Granular Level: Data tracked on the individual and micro-level. Captures day-to-day operations and is the foundation for developing Key Performance Indicators (KPIs).



Aggregate Level: Data gathered over program lifespan. Provides information for Monthly and year-to-date reports to stakeholders for programmatic accountability.



Targeted Level: Programmatic data used to support a specific objective in the form of: presentations, Fiscal Year status reports, One-pagers, multi-media posts, and Case Studies.

Granular Data

Viewed at the lowest level

Individual view

When gathering granular data on the individual level, this will include the individual's:

- Demographics
- Booking number,
- Type of charge,
- Security level and bond status.

Programmatic view

Granular data from the programmatic view can be developed by taking a client from admission to disposition. Key considerations for tracking are:

- Admission date
- Dates related to statute and treatment
- Programmatic updates, extensions and evaluations



Aggregate Data

Viewed over programmatic year or lifespan

Programmatic view

Aggregate data can be used to create stakeholder and internal reports covering any parameter from monthly, fiscal year-to-date, or program lifetime.

When used in a JBCR setting this would be tracking:

- Referrals and Outcomes
- Restoration rate
- Admissions and Discharges
- Average length of stay
- Demographics of clients served
- Percentage with court ordered medication



Targeted Data

Application and Implementation of information



Critical Data Points

Cost-Analysis

- Jail Cost = Per Resident/Per day
 - General Population, Administrative Separation, Mental Health
- Program Cost = Per Patient/Per day
 - Program Contract Amt/365/Program Capacity = Provider Daily Cost
 - Provider Daily Cost + Jail Cost = JBCR per patient/per day
 - Harris County JBCR = \$343.70
- State Hospital Cost = Per Patient/Per Day
 - Texas Average = 766.10



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PROGRAM DEVELOPMENT WORKSHEET



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Community Stakeholder Support

- ☐ HCSO
- ☐ Harris County
- ☐ Harris County Criminal
Courts
- ☐ State of Texas (HHSC)

Financial Support

- ☐ State of Texas (HHSC)
- ☐ Harris County
- ☐ Federal Grant*

Infrastructure

- ☐ Harris County Jail
- ☐ HCSO
- ☐ Harris Center

PROGRAM DEVELOPMENT WORKSHEET

Legal Processes

- ☐ Docket Judge
- ☐ Court staff
- ☐ Harris County ADAs
- ☐ Public Defenders Office
- ☐ Defense Attorneys

Program Development & Design

- ☐ Trauma Informed Care
- ☐ Court education
- ☐ Psychosocial Rehab
- ☐ COPSD
- ☐ Medication Management
- ☐ Movement Therapy

Outcome Data & Metrics

- ☐ Granular Data
- ☐ Aggregate Data
- ☐ Targeted Data
- ☐ Stakeholder Reports
- ☐ FY Status Reports

References



Reference 1

Murrie DC, Gowensmith WN, Kois LE, Packer IK. Evaluations of competence to stand trial are evolving amid a national "competency crisis". Behav Sci Law. 2023 Sep-Oct;41(5):310-325. doi: 10.1002/bsl.2620. Epub 2023 Apr 13. PMID: 37056195.



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Reference 3

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Our Contact Information

TERRY HANCOCK MA, LPC, NCC

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PROGRAM DIRECTOR; THE HARRIS CENTER FOR MENTAL HEALTH AND IDD



terry.hancock@theharriscenter.org



krystin.holmes@theharriscenter.org

