The Texas Department of Criminal Justice

Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI)

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Mission Statement

To provide a formal structure of criminal justice, health and human service and other affected organizations to communicate and coordinate on policy, legislative, and programmatic issues aff offenders with special needs*

*Special needs includes clients with serious, chronic and perve mental illness, intellectual disability, terminal or serious medice conditions, physical disabilities and those who are elderly.

State of the State

- One of the first states with a statutorily mandates coordinating body for offenders with special needs.
- The only state with Medical/Mental Health Continuity of Care (COC) legislation that does not require a release of information to be signed.



- One of few states with targeted funds for juvenile and adult clients with special needs.
- One of a few states with specialized juvenile and adult probation/parole caseloads
- The most proactive state in regulatory, statutory, procedural and programmatic practices for clients with special needs.







Role of TCOOMMI

- Mental Health TCOOMMI Services
- Medical TCOOMMI Services
 - Continuity of Care
 - Minority AIDS Initiative (HIV planning)
 - Medically Recommended Intensive Supervision



FY 2022 / 2023 Biennium Funding \$55,102,124

Legislature Strategy Funding

TDCJ/TCOOMMI

39 Local Mental Health Authorities



Role of TCOOMMI

- The Reentry and Integration Division (RID) is a division established by TDCJ.
 - RID is a combined effort of both the Reentry Program and the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) Program.
- TCOOMMI was established in 1987.
- TCOOMMI is enabled by Health and Safety Code, Chapter 614.
- TCOOMMI addresses all aspects of the criminal justice continuum:
 - Juvenile Continuity of Care;
 - Adult Continuity of Care;
 - Probation Case Management;
 - Parole Case Management;
 - Mental Health Diversion and Court Resource; and
 - Wrongfully Imprisoned Persons.

Role of TCOOMMI

- TCOOMMI provides pre-release screening and referral to aftercare treatment services for special needs inmates referred from the Correctional Institutions Division (CID), SAFPF, local jails, or other referral sources.
- TCOOMMI monitors, coordinates, and implements a continuity of care system for clients with special needs.
- Mental health and many medical continuity of care appointments are established pre-release and provided to inmates during the release process.
- Pre-Release services for benefit coordination and application
 - Veterans; and
 - Social Security Medicaid and/or Medicare.
- Post-Release coordination and collaboration with clients and community supervision officers.

Community Based Mental Health TCOOMMI Programs

Mental Health Community Services

- TCOOMMI funds a continuity of care (COC) program designed to provide a responsive system to serve justice involved individuals under community supervisor with mental health services.
- Referrals are generated through a pre-release screening and identification process and through community partners referring community-based clients to services.
- TCOOMMI contracts with all 39 Local Mental Health Authorities (LMHAs) to provide:
 - Psychiatric Services / Medication Management and Monitoring;
 - Individualized Assessment;
 - Service Coordination;
 - Team base services/treatment teams;
 - Community based contacts;
 - Psychosocial Rehabilitation services;
 - Case Management and Monitoring;
 - Outreach and engagement through wrap-around service delivery; and
 - Benefits eligibility services.

Mental Health Community Services

- Client eligibility criteria:
 - On Parole or Probation Supervision in the Community
 - Resides within the State of Texas
 - Has a Qualifying Mental Health Diagnosis:
 - Schizophrenia;
 - Schizoaffective Disorder;
 - Bipolar Disorder;
 - Major Depressive Disorder;
 - Psychotic Disorder;
 - Post Traumatic Stress Disorder (PTSD);
 - Anxiety Disorder;
 - Delusional Disorder; and/or
 - Any other mental health diagnosis that is severe or persistent in nature.
- TCOOMMI Re-Incarceration Rate
 - 15.5%

Assessments

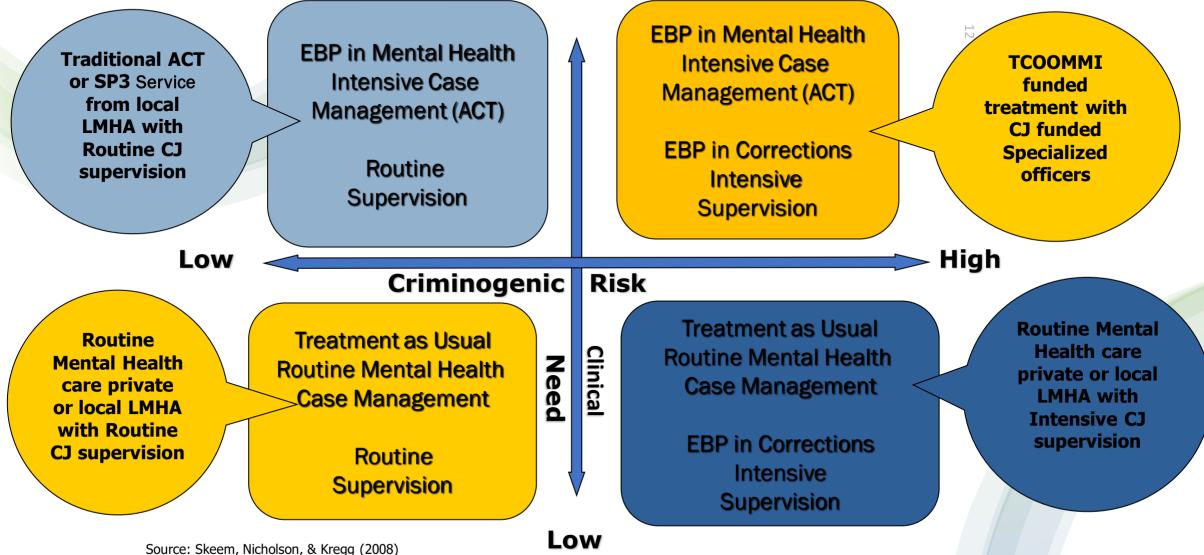
- Adult Needs and Strengths Assessment (ANSA) / Child and Adolescent Needs and Strengths (CANS)
 - Multi-Purpose Tool developed to support care planning and level of care decision-making
 - Trauma Informed
 - Facilitates Quality improvements
 - Allows for monitoring of outcomes to services

Texas Risk Assessment System (TRAS)

- Developed to assess the risk and needs of adults
- Is a system of assessment tools; administered throughout the Texas Criminal Justice continuum
- Assessment tools are predictive of recidivism for different populations being supervised in the community
- A major goal of TRAS development was to conform to the principles of effective classification.
 - Effective allocation of supervision resources
 - Structured decision-making in a manner to reduce likelihood of recidivism
- Identifies both criminogenic needs and barriers to programming

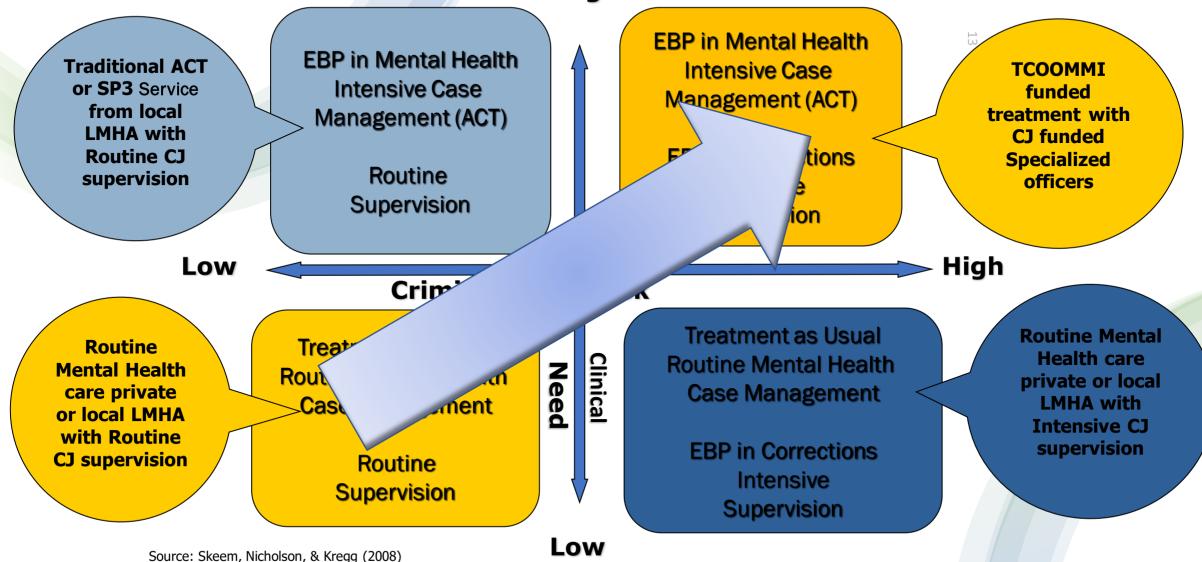
Evidence Based Practice Model

High



Evidence Based Practice Model

High



TCOOMMI Model

Risk RECIDIVISM Needs Reduction

Responsivity

"Over serving low risk offenders can lead to treatment failure, poor compliance with supervision and recidivism" – J. Skeem

Mental Health Levels of Service

• Continuity of Care (COC)

- Up to 90 days of services
- ANSA authorized level of care indicates minimal services are appropriate
- TRAS level is low or low-moderate
- Intensive Case Management (ICM) and Rural Intensive Case Management (RICM)
 - Up to 2 years of services
 - ANSA authorized level of care indicates intensive services are appropriate
 - TRAS level is moderate, moderate-high, high

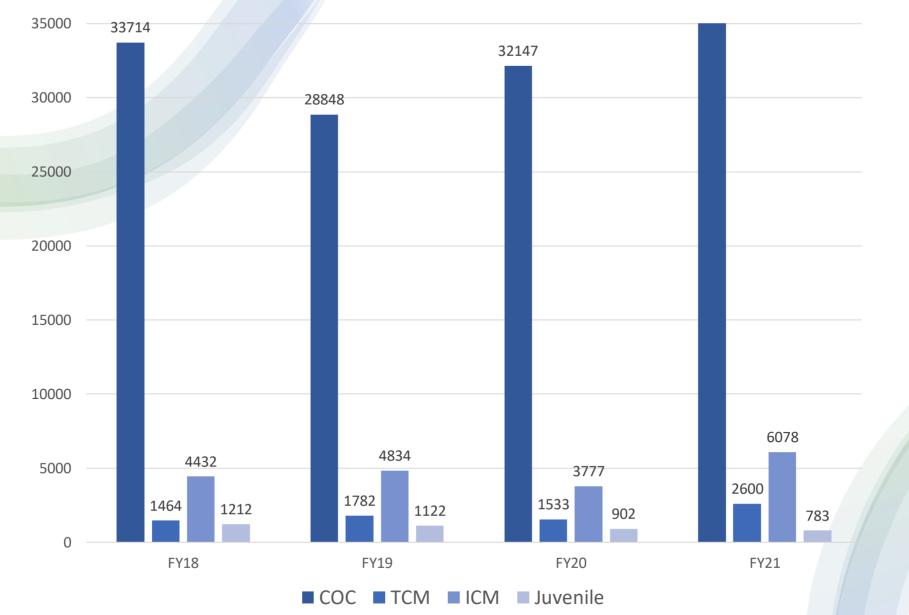
• Transitional Case Management (TCM)

- Up to 1 year of services
- ANSA authorized level of care indicates transitional services are appropriate
- TRAS level is low-moderate, moderate or moderate-high

Juvenile Case Management

- Up to completion of supervision
- CANS authorized level of care indicates intensive team services are appropriate
- Criminogenic risk level directs contact hours

Community Based Mental Health Services



Medical TCOOMMI Programs



Medical Coordination Services

- TCOOMMI funds a continuity of care (COC) program designed to provide a responsive system to serve justice involved individuals under community supervisor with mental health services.
- Referrals are generated through a pre-release screening and identification process.
 - Collaborative efforts utilizing ICD 10 codes and the PEARL-Electronic Health Record "crystal reports" help identify clients for potential eligibility.
- Inmates, family members and other concerned individuals or agency partners may also make a direct referrals for potential medical coordination services.

Medical Coordination Services

- TCOOMMI Human Service Specialists and Reentry Special Needs Case Managers work together to provide:
 - Pre and Post-Release medically appropriate residence planning services/linkages;
 - Pre and Post-Release benefits application assistance, submission and tracking;
 - Veterans Coordination;
 - Linkages to appropriate community support services (e.g. home health agencies, home modification resources, community assistance programs for medications or funding);
 - Nursing, assisted and skilled living facility coordination and criminal justice liaison; and
 - A criminal justice liaison for community resources, community supervision and parole offices; providing technical assistance to medical service providers caring for clients in the community.





Medical Programs

Medical Continuity of Care

• Minority AID Initiative (HIV Planning)

Medically Recommended Intensive Supervision (MRIS)



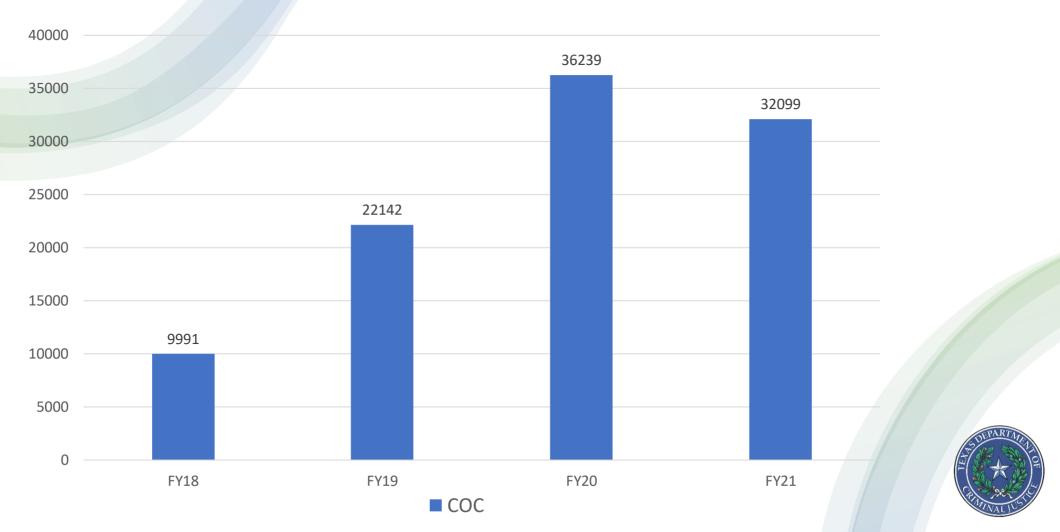
Medical Continuity of Care

- Inmate population eligible for services:
 - Significant or Serious Medical Condition;
 - Terminal Illness;
 - Physical Disabilities; and/or
 - Elderly.
- Must be releasing from custody, typically planning begins approximately 3-months prior to release.
 - Parole Approved;
 - Flat Discharge;
 - ISF; or
 - SAFPF.
- Electronic Health Record demonstrates a medical condition that is impacting daily living functions in 3 or more areas.

Minority AIDS Initiative (HIV Planning)

- Inmate population eligible for services:
 - HIV +.
- Must be releasing from custody, typically planning begins approximately 3-months prior to release:
 - Parole Approved;
 - Flat Discharge;
 - ISF; or
 - SAFPF.
- TCOOMMI Human Service Specialists work directly with unit medical for medication certification, enrollment into the Texas HIV Medication Program (THMP) and AIDS Drug Assistance Program (ADAP) along with registration into the national AIDS Regional Information and Evaluation System (ARIES) for care coordination and program reporting upon community return.

Medical Continuity of Care (to include HIV Planning)



MRIS

- The MRIS program (Texas Government Code 508.146) provides for the early parole review and release of certain categories of inmates who are:
 - Elderly (65 years and older);
 - Intellectually Disabled;
 - Long Term Care;
 - Mentally III;
 - Physically Handicapped; and/or
 - Terminally III.
- The Purpose of MRIS is to release inmates, who pose minimal public safety risk, from incarceration to more cost-effective alternatives.
- Based upon the inmate's medical needs and disease progression, he or she will be placed in a medically appropriate community setting to include, but not limited to, nursing facility, group home, hospice center, long term acute care center or family residence.

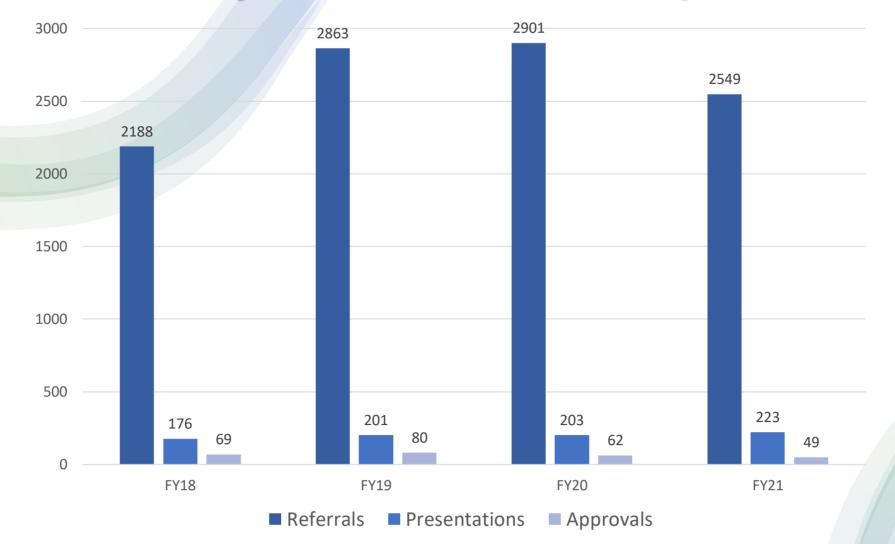
MRIS

- MRIS excludes the following categories of inmates:
 - Death Row;
 - Inmates sentenced to Life without Parole;
 - Inmates who are already Parole Approved;
 - Inmates who are not US Citizens (unless directly taken into ICE custody upon release);
 - SAFPF inmates; or
 - ISF inmates.
- MRIS eligible inmates:
 - All other inmates not previously excluded;
 - Inmates with a "3G" offense must meet criteria for Long Term Care or Terminally III; and
 - Sex Offenders must be "in a persistent vegetative state or being a person with an organic brain syndrome with significant to total mobility impairment".

MRIS

- After referral for the MRIS program, eligible inmates are presented to the Board of Pardons and Paroles or the sentencing State Jail Judge:
 - If approved,
 - TCOOMMI notifies the inmate, unit medical staff and the referral source; and
 - Continuity of Care release planning is started.
 - If denied, the inmate remains in custody and may be eligible for review again under MRIS if their condition changes.

Medically Recommended Intensive Supervision



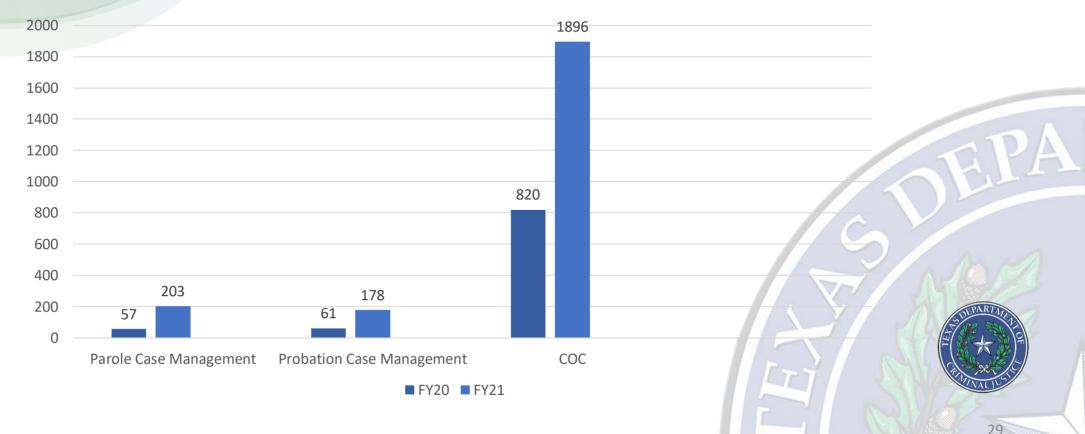


Legislative Sessions



86th Legislative Session Update:

- Outcomes from expansion into Rural communities with case management
 - 20 caseloads added with 38 counties served
 - Colocation with supervision partners



87th Legislative Session:

- Senate Bill 1, Rider 38
 - Language added: "TDCJ shall refer qualifying elderly offenders for MRIS consideration to the Board of Pardons and Paroles, or sentencing judges, in accordance with Government Code, Section 508.146. Such referrals may be made in absence of mother medical or mental health conditions."
 - Worth Noting:
 - House Bill 4 Expansion of Telehealth and Telemedicine options

