

**COMMUNITY LINKAGE PROGRAM:
A PARTNERSHIP BETWEEN THE OHIO DEPARTMENT
OF MENTAL HEALTH AND THE OHIO DEPARTMENT OF
REHABILITATION AND CORRECTION***

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This is the eighteenth article from the Supreme Court of Ohio Advisory Committee on Mentally Ill in the Courts about effectively dealing with offenders with mental illness. Many times judges see an offender on their docket who has recently been released from prison and who needs mental health treatment and/or medications to be able to function. This article highlights a joint program through the Ohio Department of Rehabilitation and Correction and the Ohio Department of Mental Health to address such an offender.

Although this is a prison release program, the Advisory Committee urges judges to consider this program's linkage function as it can also be easily adapted to those offenders released on community control. If the mental health needs of an offender are not met, the likelihood of failure of community control is great. The linkage program provides a way to connect the offender to community mental health services to ensure a successful transition back to society.

I. HISTORY OF THE LINKAGE PROGRAM

The Ohio Department of Mental Health (ODMH) in partnership with the Ohio Department of Rehabilitation and Correction (ODRC) developed the Community Linkage Program in 1995 to provide continuity of care for mentally ill offenders entering and leaving ODRC correctional facilities. An interagency agreement is in place and is renewed every two years. Prior to 1995, the Department of Mental Health provided mental health services to offenders in Ohio's prison system. As a result of the *Dunn v. Voinovich* consent decree (a class action challenging the treatment of offenders with mental illness) effective July 1, 1995, ODRC assumed the responsibility for the provision of these services. The Community Linkage Program is the last service on the continuum of mental health services in prison and bridges the gaps between prison care and local mental health services.

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ODRC's mental health services in prison have received national recognition for the improvements made since 1995. In a prison system of 33 institutions serving close to 45,000 offenders, about 7,500 are receiving mental health services from over 550 clinical staff including psychiatrists, social workers, psychiatric nurses, psychology staff, and activity therapy staff. Services include screening and evaluation of mental health needs, crisis stabilization, hospitalization, residential treatment and general outpatient services, including medications. The mission of the Ohio correctional mental health system is to ensure access to quality care that eliminates needless suffering, improves functioning of offenders and increases safety for offenders, correctional staff, and the public.

Of the 25,635 offenders released in 2002, about 2,300 were seen by the Community Linkage Program staff. Initial community mental health appointments were made for 1679 offenders and the follow up data indicates that 62% made their initial appointments.

II. OPERATION OF THE PROGRAM

The Community Linkage Program is administered by the Office of Forensic Services (OFS) of ODMH, and consists of a program manager, three regional community linkage coordinators, and ten linkage social workers that cover designated ODRC facilities.

The program goals include providing continuity of mental health care, reducing recidivism, easing the transition for mentally ill persons from prison into the community, or from the community into prison, and increasing both individual and public safety by providing uninterrupted mental health services.

All offenders entering the prison system receive a medical and mental health assessment by ODRC staff within the first 24 hours of their admission to the system. If the offender reports prior mental health treatment, the linkage social workers request past treatment information from community treatment providers, with permission from the offender. The prison staff can utilize this information as they complete their assessments and develop a treatment plan when mental health services are indicated.

III. PRE-RELEASE ACTIONS

Prior to release from prison, a community linkage social worker (CLSW) interviews the offender, reviews their mental health record, and works with the ODRC mental health staff to develop a community mental health release plan. Based on the area in which the offender will be residing, the social worker initiates linkage for community-based services with the appropriate contact of the Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board or Community Mental Health (CMH) Board. The CLSW sets up an initial mental health appointment for the offender upon release. The social worker completes a referral packet that

provides mental health related information, including the diagnosis and immediate treatment needs. This information is sent to the Board or designated community mental health agency prior to the offender's release. The linkage social worker provides, in writing to the offender, information regarding their initial treatment appointment when they are ready to leave the prison and ODRC provides two weeks of discharge medications.

IV. POST-RELEASE ACTIONS

When an offender is released on parole, the same process identified above occurs. In addition, the community linkage social worker works with the ODRC Adult Parole Authority (APA) and Offender Services Network to coordinate continuity of care for those offenders required to undergo APA community supervision. Once the offender has been released, the parole officer and the community mental health agency are encouraged to work together to maintain the individual in the community.

An offender may require inpatient psychiatric services at the time of their release from prison. The social worker, including the community linkage coordinator, will coordinate with the local ADAMHS or CMH Board or the designated agency to arrange admission to community hospitalization, if the offender meets the criteria for admission. The intent is that the appropriate level of care be provided without interruption of services to the individual.

Quarterly meetings are held between ODMH and ODRC staff to collaboratively work out any problems that arise in managing the program. Periodic meetings with community contacts are also held. For more information on this program, please contact the Office of Forensic Services at 614-466-1099. For information on other ODRC prison mental health services, contact the Bureau of Mental Health Services at 614-728-1988.