HB 1222 CHANCERY CLERK REPORTING OF PSYCHIATRIC COMMITMENT DATA

FY24 1ST QUARTER REPORT

JULY 1 - SEPTEMBER 30, 2023

PREPARED BY THE MISSISSIPPI DEPARTMENT OF MENTAL HEALTH



Supporting a Better Tomorrow...One Person at a Time

TABLE OF CONTENTS

- HB 1222 Chancery Clerk Reporting of
 Psychiatric Commitment Data Overview
- **03** Chancery Clerk FY24 1st Quarter Data
- **05** Uniform Civil Commitment Guide
- **07** Civil Commitment Flowchart
- Diversion Strategies for State Hospital
 Commitments and Jail Placement
- **09** CSU FY24 1st Quarter Number Served
- State Hospital Admissions by CountyFY24 1st Quarter
- **12** Letters to Chancery Clerks

HB 1222 CHANCERY CLERK REPORTING OF PSYCHIATRIC COMMITMENT DATA OVERVIEW

FY24 1ST QUARTER REPORT

JULY 1 - SEPTEMBER 30, 2023

House Bill 1222, The Mississippi Collaborative Response to Mental Health Act, was signed by Governor Reeves in the 2023 legislative session. In Section 9 of this legislation, there were specific reporting requirements for Chancery Clerks, including number of acute psychiatric commitments, hearings, affidavits filed, and Crisis Stabilization Unit bed denials.

The Act requires actions from mental health partners throughout the state to provide a collaborative response to mental health. The purpose is for Mississippians to have access to the least restrictive environment possible with the goal of diverting commitments to the state hospitals and avoiding jail placements for people who have not committed a crime. This is why the Act also includes requirements for law enforcement training and court liaisons.

HB 1222 requires the following of Chancery Clerks:

• When admission to a treatment facility is ordered by the court, the chancery clerk shall make record of the admission. Each chancery clerk shall maintain a record of the number of persons ordered by the court to be admitted to a treatment facility, the number of hearings held by the court to determine whether a person should be admitted to a treatment facility and the number of affidavits filed to admit a person to a treatment facility under Section 41-21-61 etc.

• The chancery clerk shall maintain a record each time such clerk receives a denial for admission to a community mental health center crisis stabilization bed, the reason provided to the clerk for such denial, and the subsequent action taken by the clerk upon receiving the denial.

• Each chancery clerk shall provide the records required by the above paragraphs to the Department of Mental Health within thirty (30) days of the end of each calendar quarter.

Within sixty (60) days of receipt of the chancery clerk records, the Mississippi Department of Mental Health (DMH) shall provide a summary to the Chairpersons of the Appropriations, Public Health and Judiciary A and B
 Committees for the Mississippi House of Representatives and the Mississippi Senate, the Coordinator of Mental Health and the President of the Mississippi Association of Community Mental Health Centers.

1

HB 1222 CHANCERY CLERK REPORTING OF PSYCHIATRIC COMMITMENT DATA

DMH's goal is to make the reporting process as smooth as possible. In April 2023, DMH communicated with all Chancery Clerks initial information regarding HB1222. DMH followed up with more details in May June, and July 2023. DMH created a reporting tool through the agency's psychiatric bed registry that could be accessed by Chancery Clerks. The bed registry also provides Chancery Clerks updated bed availability at the four state hospitals and 13 Crisis Stabilization Units and a method to report the required data outlined in House Bill 1222.

After completing a registration form for access to the bed registry, Chancery Clerks received an e-mail providing access to the psychiatric bed registry by setting up a user identification and password. Chancery Clerks also received access to a brief training video and written instructions on how to report the data. DMH established a Helpdesk system for Chancery Clerks to utilize if they have questions or problems reporting the data.

While there were some technical issues in the beginning, and many questions regarding reporting the data, DMH received reports from 58 of the 82 counties. Three reminder e-mails were sent in September, October, and November to extend the deadline due to lack of response and technical concerns. We are hopeful all 82 counties will report for the second quarter.

DMH appreciates the Chancery Clerks for the work they do and their dedication to our state. We appreciate our partnership and look forward to continuing our work together in 2024.

A few notes:

- Chancery Clerk data is only for psychiatric commitments and does not include data on alcohol and drug commitments.
- According to statute, if the appointed examiners certify that the person is not in need of treatment, the affidavit shall be dismissed without the need for a further hearing. In the event a person does need a commitment, court hearings may still be waived.
- Some Chancery Clerks reported they do not track CSU denials because when they receive a commitment, they immediately connect with their Community Mental Health Center who works on obtaining alternative placement.
- DMH has funded 33 court liaisons at Community Mental Health Centers to work with Chancery Clerks, law enforcement and hospitals to divert individuals from the commitment process when possible.
- DMH is including in this report the following: Civil Commitment Flowchart, Civil Commitment Guide, Diversion Strategies for State Hospitals and Jail Placement, Two Formal Letters to Chancery Clerks, FY24 1st Quarter State Hospital Admissions by County, and FY24 1st Quarter Crisis Stabilization Unit Number Served.

CHANCERY CLERK REPORT

FY24 - 1ST QUARTER DATA

Location	Affidavits Filed	Court Hearings	Court Ordered Admissions	Total CSU Denials	Too Aggressive/ Violent	Unstable Medical Condition	Substance Use is Primary	Limited CSU Staffing	No Bed (CSU at Capacity)	Requires higher level of care	Sexually Inapropriate	Location of Wait if Not CSU	Transport to ER	Jail	Home	Adm to Alt CSU	Other
Adams	19	15	15	13	7		6							8	8	1	1
Alcorn																	
Amite	6	6	6														
Attala	6	6	6	1	1									1			
Benton	2	0	2														
Bolivar	12	10	14	3		1									2		
Calhoun	9	9	8														
Carroll	7	3	2	1		1									1		
Chickasaw	8	8	7														
Choctaw																	
Claiborne	9	9	7														
Clarke																	
Clay	23	17	17	10	2				7	1				3		7	
Coahoma	30	25	30	51	10	4	6	5	9	14	3		3	3	8	14	23
Copiah	15	15	15														
Covington	9	9	9	9										9			
Desoto																	
Forrest	43	42	37														
Franklin	2	2	2														
George	11	7	5														
Greene	3	1	1														
Grenada																	
Hancock	23	16	16	9	2	1			6					9			
Harrison	46	37	48														
Hinds	58	84	72	55			1										2
Holmes																	
Humphreys	3	3	3														
Issaquena																	
Itawamba	12	0	9	1	1									1			
Jackson	48	48	23														
Jasper	19	21	21														
Jefferson	8	8	8														
Jefferson Davis																	
Jones	9	11	12	2	1		1						1				1
Kemper																	
Lafayette	7	10	7														
Lamar	15	15	15				1										
Lauderdale	29	14	22	6					3	3				3	1	1	1
Lawrence																	
Leake	0	27	13														
Lee	79	0	60	2	2									2			

CHANCERY CLERK REPORT

FY24 - 1ST QUARTER DATA

Location	Affidavits Filed	Court Hearings	Court Ordered Admissions	Total CSU Denials	Too Aggressive/ Violent	Unstable Medical Condition	Substance Use is Primary	Limited CSU Staffing	No Bed (CSU at Capacity)	Requires higher level of care	Sexually Inapropriate	Location of Wait if Not CSU	Transport to ER	Jail	Home	Adm to Alt CSU	Other
Leflore																	
Lincoln	15	15	15	4	1		3							3	1		
Lowndes	35	32	32														
Madison	10	10	5														
Marion	7	5	5														
Marshall																	
Monroe																	
Montgomery	1	1	1														
Neshoba	2	0	0														
Newton	7	2	6														
Noxubee																	
Oktibbeha	2	2	2	1	1												1
Panola																	
Pearl River	20	3	7	1		1							1				
Perry	2	2	2									-					
Pike	24	24	24														
Pontotoc	17	0	17	25		1	1			7					8	1	
Prentiss	26	0	18									-					
Quitman	9	4	4	1		1										1	
Rankin																	
Scott	20	20	19	4	2					2				2	2		
Sharkey												-					
Simpson																	
Smith												-					
Stone	1	1	1									-					
Sunflower	9	9	9									-					
Tallahatchie	2	2	2	2	2							-		1		1	
Tate	7	6	4	1					1			-					1
Tippah												-					
Tishomingo	10	0	10	8	2				6			-		8			
Tunica												-					
Union	2	0	2									-					
Walthall						<u></u>											
Warren	6	4	4	1					1							1	
Washington	23	23	23														
Wayne	10	0	10	1			1								1		
Webster	1	1	1	15	2			1	12						15		
Wilkinson																	
Winston	3	3	3														
Yalobusha	3	3	3	1			1					-		1			
Yazoo							_							-			
Totals:	844	650	741	228	36	10	20	6	45	27	3		5	54	47	27	30





MISSISSIPPI UNIFORM CIVIL COMMITMENT GUIDE

Mississippi Department of Mental Health Behavioral Health Program Admission Process

STEPS FOR CIVIL COMMITMENT



File an affidavit for civil commitment in the chancery clerk's office where the person resides or is currently located. Pay a filing fee up to \$150, including all fees and assessments, to commence the proceeding.* Under Mississippi state law, no attorney is required for this process.



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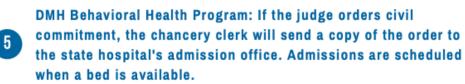
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A writ is issued for the sheriff to take into custody the person alleged to be in need of mental health treatment and take the person for a Pre-Evaluation Screening and treatment by staff at a local Community Mental Health Center.

If further examination is recommended, two doctors, or one doctor and one other healthcare professional, appointed by the court will examine the person within 48 hours. If the appointed examiners find no need for treatment, the case will be dismissed without a need for a hearing.

A hearing must be within 7-10 days. The judge will decide based on the examiners certificates' and other evidence presented whether treatment in a state behavioral health program or outpatient program is necessary.



A person can also be referred to a Crisis Stabilization Unit bed in his or her area.

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Transportation to the DMH Behavioral Health Program or Crisis Stabilization Unit will be provided by local law enforcement. Admission involves medical record review, general information questions, and an inventory of the person's possessions.

- When the person is admitted, he or she will be oriented to the environment by staff who review program schedules, activities, rights, and responsibilities.
- A plan for discharge is created upon admission to help the person return to his or her community, and the facilitation to services in his or her community is started.
- 9 A treatment plan is developed that includes goals, activities, and other prescribed treatments.
- 10 The person will be discharged when he or she no longer meets commitment criteria and can return to live in the community with adequate support services.
- Upon discharge, most people continue treatment at a local Community Mental Health Center or local programs with the goal of living independently in their communities.
 - The court will maintain jurisdiction over persons committed to both inpatient and outpatient programs for one year after their completion of the treatment program.

*The chancery clerk may charge a total filing fee for all services equal to the amount set out in Section 25-7-9(o), and the appropriate state and county assessments as required by law which include, but are not limited to, assessments for the Judicial Operation Fund (Section 25-7-9 (3)(b)); the Electronic Court System Fund (Section 25-7-9 (3)(a)); the Civil Legal Assistance Fund (Section 25-7-9 (1)(k)); the Court Education and Training Fund (Section 37-26-3); State Court Constituent's Fund (Section 37-26-9 (4)); and a reasonable court reporter's fee. Costs incidental to court proceedings as set forth in Section 41-21-79 may not be included as assessments.

The chancery clerk's office can provide specific eligibility requirements and instructions to file a Pauper's Oath if you are unable to pay the filing fee.

A person with a serious mental health condition, through an outpatient commitment order, can be courtmandated to follow a specific treatment plan, usually requiring medication and sometimes directing where the person can live and what his or her daily activities must include.

HOW TO GET HELP

12

Before filing an affidavit for commitment to a DMH Behavioral Health Program with the chancery clerk's office, we strongly encourage you to contact your local Community Mental Health Center to learn about services, supports, and alternatives to the commitment process such as Mobile Crisis Response Teams, Crisis Stabilization Beds, and more.

FOR MORE INFORMATION OR TO LOCATE YOUR LOCAL COMMUNITY MENTAL HEALTH CENTER:

Mississippi Department of Mental Health 601.359.1288 dmh.ms.gov 24-Hour Helpline 1-877-210-8513



CIVIL COMMITMENT FLOWCHART

"Interested Person" files an affidavit for commitment. 41-21-61(e), 41-21-65 No attorney shall be required. 41-21-65(5)

A form affidavit shall be provided by the Chancery Clerk if needed by affiant. 41-21-65(2) Affiant may only be charged no more than \$150 total fee if able to pay. 41-21-65(6), 25-7-9(o) Chancellor may transfer case to county of residence or hear it in county where found. 41-21-65(5)

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Writ is issued for Sheriff to take the patient for a pre-evaluation screening by community mental health center. 41-21-67(1) Doctors/professionals immediately appointed for exams 41-21-67(2) and an Attorney is appointed for patient 41-21-67(3)

Evaluation by two doctors, or one doctor and professional designated by law within 48 hours (not including weekends), with a possible 8 hour extension. 41-21-67(2) Each appointed examiner must make a full inquiry into the physical and mental health 41-21-69

> Chancellor or Chancery Clerk shall <u>dismiss</u> without need for hearing if appointed examiners find no treatment needed. 41-21-71

Patient may be released or confined pending the commitment hearing. Hearing must be held within 7 days, or 10 days if patient agrees.

Patient may be committed to inpatient care, voluntary or court-ordered outpatient commitment for Tx, day or night Tx in hospital, placement in custody of a friend or relative, home health services or dismissed. 41-21-71, 41-21-73

All costs are borne by the county of residence, though the patient may be charged up to \$400.00 if financially able to pay. 41-21-79, 41-21-73(4)&(9) Affiant/interested person may not be charged any fee other than original filing fee, other than criminal fines or contempt fees. 41-21-65(4)

Patient may be held in a local facility pending transfer to a state facility. 41-21-73(4), 41-21-77 Chancellor may order peace officer or other person to transport person to facility or suitable location. 41-21-67(4)

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Director of local public or private facility may discharge patient with same authority as director of a state facility. 41-21-87

Patient discharged when no longer meets commitment criteria, or can be served in less restrictive environment, or services/facilities unavailable. 41-21-87

Commitment and Jail Diversion Strategies in Mississippi



Increase Awareness 🛏	
of 988 and Mobile	20% increase in calls to 988 to reach a trained counselor 24/7
Crisis Response Teams	Enhanced funding to Mobile Crisis Response Teams
Chisis Response Teams	9,877 calls to Mobile Crisis Response Teams
	 21% of calls required a face-to-face response
Maximize Utilization of ⊢	· 21% of calls required a face-to-face response
Crisis Stabilization Beds	▶ 180 CSU beds statewide
Chisis Stabilization Beas	 CSU in every Community Mental Health Center (CMHC) region
	 CSU enhancement funding provided to treat patients with a
	higher level of need
	Additional 60 beds coming in 2024
	Bed Registry open to Chancery Clerks to see bed availability
	statewide
	92% diversion rate to state hospitals
	Served 3,402 in FY23
Maximize Utilization ⊢ of Court Liaisons	Funded 33 Court Liaisons statewide
of Court Eldisons	Employed by CMHC and works closely with Chancery Clerk,
	law enforcement and local hospitals
	Goals of the Court Liaison program are:
	- Reduce number of involuntary commitments to state hospitals
	 Reduce time and exposure people have with law enforcement and the criminal justice system
	-Increase knowledge and usage of community-based services
	- Increase collaboration with families, courts, law enforcement,
	and hospitals on behalf of CMHCs and the people they serve
Maximize Utilization of H	
Intensive Community	Designed for people with multiple hospitalizations and are
Support Services	monitored to fidelity
ouppoir our rices	Served 796 in Programs of Assertive Community
	Treatment Teams with 7% readmitted to a state hospital
	Served 638 in Intensive Community Outreach and Recovery Teams with 8% readmitted to a state hospital
	 Served 781 in Intensive Community Support Services with
	15% readmitted to a state hospital
Decrease Same Level ⊢	
of Care Transfers	 Enhance communication with hospitals that provide acute psychiatric services to encourage treatment and discharge and
	decrease transfers to the state hospitals
	39% of all state hospital admissions in FY23 were from a
	same level of care
	1
Decreased Avera	ge Length of Wait for a State Hospital Bed by 55% in FY23

Decreased Average Length of Wait for a State Hospital Bed by 55% in FY23 Increased State Hospital Bed Capacity by 18% in FY23

8

FY24 1st Quarter Number Served

CRISIS STABILIZATION UNITS

Region	Unduplicated Served	# of Beds
Region 2 (Batesville)	115	16
Region 3 (Tupelo)	41	8
Region 4 (Corinth)	100	16
Region 6 (Grenada)	90	16
Region 6 (Cleveland)	106	16
Region 7 (West Point)	34	8
Region 8 (Brookhaven)	93	16
Region 9 (Jackson)	142	16
Region 10 (Newton)	109	16
Region 12 (Laurel)	54	16
Region 12 (Gulfport)	71	16
Region 14 (Gautier)	44	8
Region 15 (Natchez)	46	12
Total	1045	180

STATE HOSPITAL ADMISSIONS BY CMHC REGION AND COUNTY

FY24 - 1ST QUARTER

CMHC Region	County	MSH	EMSH	SMSH	NMSH	Total (BY COUNTY REGION)
	Calhoun	0	0	0	5	5
	Lafayette	0	0	0	7	7
2	Marshall	0	1	0	3	4
-	Panola	1	1	0	9	11
	Tate	0	0	0	0	0
	Yalobusha	0	0	0	2	2
	TOTAL	1	2	0	26	29
	Benton	0	0	0	2	2
	Chickasaw	0	1	0	8	9
	Itawamba	1	0	0	5	6
3	Lee	1	2	0	16	19
	Monroe	0	0	0	5	5
	Pontotoc	0	0	0	3	3
	Union	0	0	0	1	1
	TOTAL	2	3	0	40	45
	Alcorn	0	0	0	9	9
	Desoto	0	7	0	23	30
4	Prentiss	0	0	0	4	4
	Tippah	0	0	0	2	2
	Tishomingo	0	0	0	10	10
	TOTAL	0	7	0	48	55
	Attala	2	0	0	0	2
	Bolivar	6	0	0	0	6
	Coahoma	12	0	0	0	12
	Carroll	0	0	0	0	0
	Grenada	6	0	0	0	6
	Holmes	4	0	0	0	4
	Humphreys	0	0	0	0	0
6	Issaquena	0	0	0	0	0
0	Leflore	5	0	0	0	5
	Montgomery	2	0	0	0	2
	Quitman	1	0	0	0	1
	Sharkey	2	0	0	0	2
	Sunflower	5	0	0	0	5
	Tallahatchie	1	0	0	0	1
	Tunica	1	0	0	0	1
	Washington	4	0	0	0	4
	TOTAL	51	0	0	0	51
	Choctaw	1	2	0	0	3
	Clay	0	9	0	1	10
	Lowndes	0	19	0	0	19
7	Noxubee	0	5	0	0	5
	Oktibbeha	0	3	0	0	3
	Webster	0	1	0	0	1
	Winston	0	4	0	0	4
	TOTAL	1	43	0	1	45

STATE HOSPITAL ADMISSIONS BY CMHC REGION AND COUNTY

FY24 - 1ST QUARTER

CMHC Region	County	MSH	EMSH	SMSH	NMSH	Total (BY COUNTY REGION)
	Copiah	5	0	0	0	5
	Madison	5	0	0	0	5
8	Rankin	17	0	0	0	17
	Lincoln	4	0	0	0	4
	Simpson	2	0	0	0	2
	Total	33	0	0	0	33
9	Hinds	46	0	0	0	46
	Total	46	0	0	0	46
	Clarke	1	4	0	0	5
	Jasper	2	9	0	0	11
	Kemper	0	0	0	0	0
	Lauderale	1	18	0	0	19
10	Leake	2	4	0	0	6
10	Neshoba	0	0	0	0	0
	Newton	0	5	0	0	5
	Scott	0	8	0	0	8
	Smith	1	7	0	0	8
	Total	7	55	0	0	62
	Amite	4	0	0	0	4
	Covington	0	1	4	0	5
	Forrest	1	0	15	0	16
	Franklin	0	0	0	0	0
	Greene	0	0	1	0	1
	Hancock	0	0	3	0	3
	Harrison	6	0	18	0	24
	Jeff Davis	0	0	2	0	2
12	Jones	2	0	4	0	6
	Lamar	0	0	7	0	7
	Lawrence	8	0	0	0	8
	Marion	2	0	3	0	5
	Pearl River	2	1	5	0	8
	Perry	1	0	1	0	2
	Pike	11	0	0	0	11
	Stone	0	0	2	0	2
	Walthall	2	0	0	0	2
	Wayne	0	0	1	0	1
	Total	39	2	66	0	107
14	George	0	0	2	0	2
14	Jackson	4	0	10	0	14
	Total	4	0	12	0	16
	Adams	4	0	0	0	4
	Claiborne	3	0	0	0	3
	Jefferson	4	0	0	0	4
15	Warren	7	0	0	0	7
	Wilkinson	7	0	0	0	7
	Yazoo	2	0	0	0	2
	Total	27	0	0	0	27
TOTAL Mont	hly State					
Hospital Adr		211	112	78	115	516

11

CHANCERY CLERK LETTER

APRIL 2023

DEPARTMENT OF MENTAL HEALTH

State of Mississippi

239 North Lamar Street 1101 Robert E. Lee Building Jackson, Mississippi 39201



601-359-1288 FAX 601-359-6295 TDD 601-359-6230

Wendy D. Bailey - Executive Director

April 5, 2023

Dear Chancery Clerk:

On behalf of the Mississippi Department of Mental Health (DMH), I would like to thank you for your service to our state and express appreciation for the role you play in assisting people in your county who reach out in need of mental health and substance use treatment. As you may know, a priority for the State is to decrease the number of Mississippians who are court committed for acute psychiatric care by providing intensive services in the community and utilizing strategies to help people remain in their communities. Over the last two years, services and supports have been increasing, and you will see additional expansion in 2023.

A partnership with your county-operated Community Mental Health Center (CMHC) is vital. Your CMHC provides Intensive Community Supports that are community-based services for adults with severe and persistent mental illness that focus on the preventing the need for a higher level of services. Each county in Mississippi now has access to at least one of three types of intensive community support through Programs of Assertive Community Treatment, Intensive Community Outreach and Recovery Teams, or Intensive Community Support Services. These services are designed to be a key part of the continuum of mental health services and supports for people with mental illness. There are now Intensive Community Support Specialists in every CMHC.

We have also worked with several CMHCs to pilot court liaison programs to connect people with community-based services to decrease the number of commitments to inpatient acute psychiatric services. These specialist services aim to intervene early in the commitment process by working with the person and/or loved ones who are seeking a commitment or at risk for institutionalization and linking with treatment. The liaisons will work directly with the individuals to ensure people receive appropriate evaluations and needed mental health services. The liaison is responsible for facilitating communication and collaboration between judicial, law enforcement and behavioral health systems. There are plans in 2023 to add approximately 25 – 30 additional court liaisons around the State through the CMHCs. You will receive more information soon if a court liaison will be working with your county.

As you may know, in the 2023 legislation session House Bill 1222 was signed by the Governor. In Section 9 of this legislation, there are new specific reporting requirements for Chancery Clerks, including number of commitments, hearings, affidavits filed, and Crisis Stabilization Unit bed denials. Next month, you will receive notification from Cyndi Eubank, DMH General Counsel, with more details on how to report this information quarterly to DMH as required by the legislation.

While we have all experienced great challenges over the last several years, DMH is dedicated to partnering to improve our State. If you have not developed a partnership with your CMHC, I encourage you to reach out. If you have any questions or need help connecting with your local CMHC, please feel free to contact me at 601-359-1288 or wendy.bailey@dmh.ms.gov or Katie Storr, DMH Chief of Staff, at 601-359-6395 or katie.storr@dmh.ms.gov.

I have enclosed additional information including availability of Intensive Community Supports by county, a map of the Community Mental Health Centers with contact information, a map of the Crisis Stabilization Units with contact information, and details about 988, the behavioral health crisis line. Again, I appreciate your dedication and service to our state. Please do not hesitate to reach out if we can provide assistance.

Sincerely,

Wendy D. Bailey Executive Director 12

CHANCERY CLERK LETTER

HB 1222

MAY 2023

DEPARTMENT OF MENTAL HEALTH State of Mississippi

239 North Lamar Street 1101 Robert E. Lee Building Jackson, Mississippi 39201



601-359-1288 FAX 601-359-6295 TDD 601-359-6230

Wendy D. Bailey - Executive Director

May 30, 2023

Dear Chancery Clerk:

House Bill 1222, The Mississippi Collaborative Response to Mental Health Act, was signed by the Governor in the 2023 legislative session. In Section 9 of this legislation, there are new specific reporting requirements for Chancery Clerks, including number of acute psychiatric commitments, hearings, affidavits filed, and Crisis Stabilization Unit bed denials.

The Act requires actions from mental health partners throughout the state to provide a collaborative response to mental health. The purpose is for Mississippians to have access to the least restrictive environment possible with the goal of diverting commitments to the state hospitals and avoiding jail placements for people who have not committed a crime. This is why the Act also includes requirements for law enforcement training and court liaisons. The legislation requires the following of Chancery Clerks:

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- The chancery clerk shall maintain a record each time such clerk receives a denial for admission to a community mental health center crisis stabilization bed, the reason provided to the clerk for such denial, and the subsequent action taken by the clerk upon receiving the denial.
- Each chancery clerk shall provide the records required by paragraphs (a) and (b) of this subsection (2) to the Department of Mental Health within thirty (30) days of the end of each calendar quarter. Within sixty (60) days of receipt of the chancery clerk records, the Department of Mental Health shall provide a summary to the Chairpersons of the Appropriations, Public Health and Judiciary A and B Committees for the Mississippi House of Representatives and the Mississippi Senate, the Coordinator of Mental Health and the President of the Mississippi Association of Community Mental Health Centers.

Our goal is to make the reporting process as smooth as possible. The Department of Mental Health is creating a reporting tool through our psychiatric bed registry that can be accessed by Chancery Clerks. The bed registry will also provide you updated bed availability at the four state hospitals and 13 Crisis Stabilization Units and a method to report the required data outlined in House Bill 1222.

To be provided access to the psychiatric bed registry, we will need some information. Please use this link https://forms.office.com/g/ccF52qL312 or the enclosed QR code to complete a form with the required information no later than Thursday, June 15. After completing the form, you will receive an e-mail providing you access to the psychiatric bed registry, a brief training video and written instructions on how to report the data. DMH will also have a Helpdesk system to send an e-mail if you have any questions or problems reporting the data.

Thank you for the work that you do and dedication to our state. I appreciate our partnership and look forward to continuing our work together. Please do not hesitate to reach out if I can provide assistance. I can be reached at <u>wendy.bailey@dmh.ms.gov</u> or 601-359-1288.

Sincerely, 1

Wendy Bailey Executive Director

HB 1222 CHANCERY CLERK REPORTING OF PSYCHIATRIC COMMITMENT DATA

FY24 1ST QUARTER REPORT

JULY 1 - SEPTEMBER 30, 2023

PREPARED BY THE MISSISSIPPI DEPARTMENT OF MENTAL HEALTH



Supporting a Better Tomorrow...One Person at a Time