

**Chairman's
Jail Oversight Commission**



FINAL REPORT
April 22, 2002

Richard T. Crotty
Orange County Chairman



Orange County Board of County Commissioners

Teresa S. Jacobs
District 1

Robert B. “Bob” Sindler
District 2

Mary I. Johnson
District 3

Clarence M. Hoenstine
District 4

Ted B. Edwards
District 5

Homer L. Hartage
District 6



Letter to Chairman Crotty

May 7, 2002

Dear Chairman Crotty:

The members of the Chairman's Jail Oversight Commission ("JOC") are pleased to present their Report to you and the members of the County Commission.

Since first convening on July 26, 2001, members of the JOC have held 104 meetings, have conducted 18 site visits, have heard formal, recorded testimony from 83 individuals, and have communicated informally with countless other members of the public, Orange County Corrections, and the Jail's criminal justice and social service partners.

Throughout this process the men and women of the Jail Oversight Commission have developed a high degree of respect for the men and women of the Orange County Corrections Department. The Corrections Officers, civilians, and Jail Medical Unit personnel of Orange County Corrections risk their lives daily for the citizens of Orange County. Their job is a thankless one largely unrecognized by the community, yet with rare exception these men and women perform their duties professionally, without complaint, and with great compassion. We have been especially impressed with the apparent philosophy of Corrections, which is that by treating those inmates under their control with respect they will receive respect and cooperation in return. While we have been impressed with the men and women of Corrections, it is also apparent to us that great changes and reform must occur both within and without the County Jail if the taxpayers of Orange County are to obtain the protections of the criminal justice system and jail they have every right to expect in return for their tax dollars.

Our mandate from you was a broad one. You charged us with not only looking at the Orange County Jail, but also with looking at the entire criminal justice system and the community factors which impact the population and operations of the Jail. Thus, what follows are no less than 202 recommendations of the Chairman's Jail Oversight Commission. While we have tried to prioritize our recommendations for you and the members of the County Commission, each and every one of our recommendations is important if this County and its criminal justice partners are to make a meaningful commitment to the reform and improvement of our Jail and local criminal justice system.

There are costs attached to some of our recommendations, yet for most of our recommendations there is no quantifiable cost, only changes in policy. For those recommendations with a cost attached, we have tried, with the help of the County and Corrections Department staff, to accurately estimate such costs. However, we also believe there are great savings to be found within our recommendations. Indeed, we believe the JOC's recommendations will result in up to an estimated \$452 million of cumulative avoided costs for the taxpayers of Orange County once fully implemented.



Letter to Chairman Crotty continued....

Let us conclude by pointing out that our report only contains "recommendations". The JOC itself cannot actually implement the recommendations found within our report. As we present this to you, no less than 5 different studies of the Orange County Corrections Department sit on the shelves of the County Administration building gathering dust. Many of those studies were paid for by Orange County taxpayers, yet many of their recommendations were never implemented. It is our fervent hope that with your leadership, the leadership of our County Commissioners, and the leadership of the Jail's criminal justice partners, that our report does not join the ranks of those previous studies.

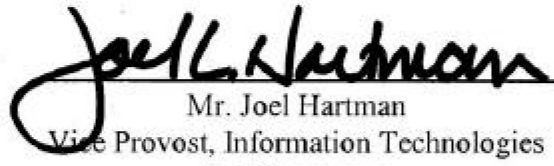
Thank you, Mr. Chairman, for entrusting us with this task. It has been a great honor and responsibility and we have done our best to fulfill the trust you have placed in us.



Bill Sublette
Attorney at Law
Law Office of William E. Sublette
Commission Chair



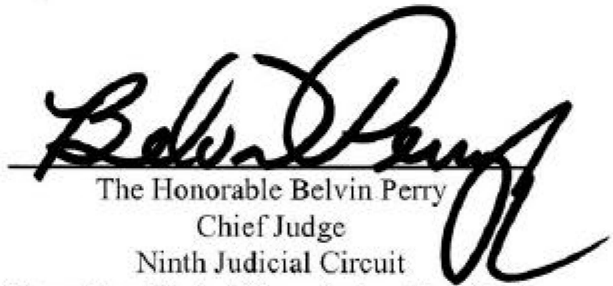
Mr. Ray Gilley
President/CEO
Metro-Orlando Economic
Development Commission
Committee Chair / Commission Vice-Chair



Mr. Joel Hartman
Vice Provost, Information Technologies
and Resources
University of Central Florida
Committee Chair / Commission Vice-Chair



Mr. Rich Morrison
Vice President
Florida Hospital
Committee Chair / Commission Vice-Chair

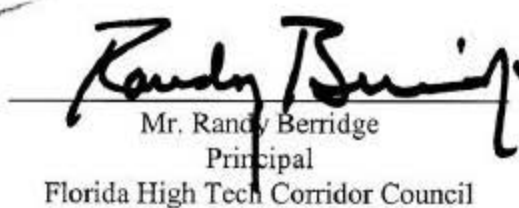


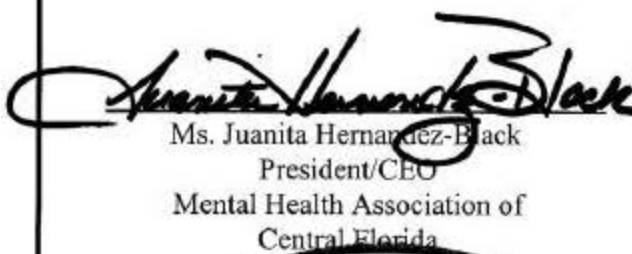
The Honorable Belvin Perry
Chief Judge
Ninth Judicial Circuit
Committee Chair / Commission Vice-Chair

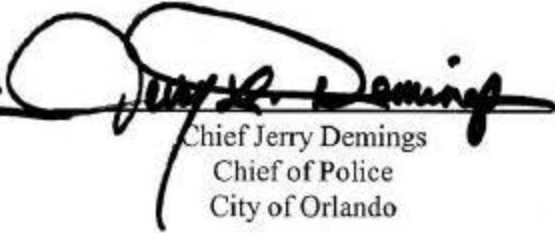


Letter to Chairman Crotty continued....

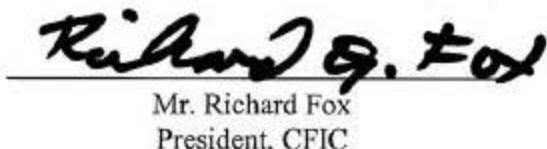

Mr. Jeff Bennett
Community Volunteer

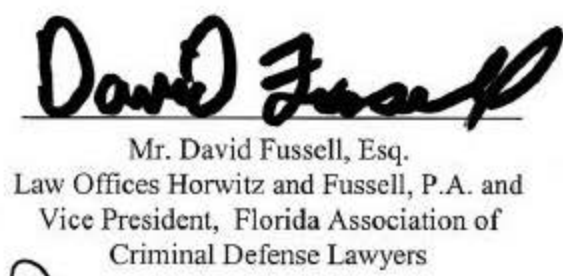

Mr. Randy Berridge
Principal
Florida High Tech Corridor Council

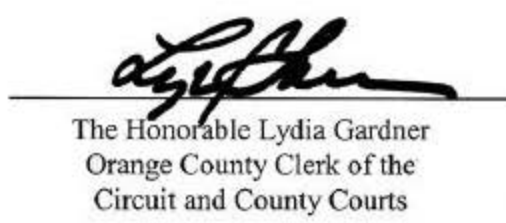

Ms. Juanita Hernandez-Black
President/CEO
Mental Health Association of
Central Florida

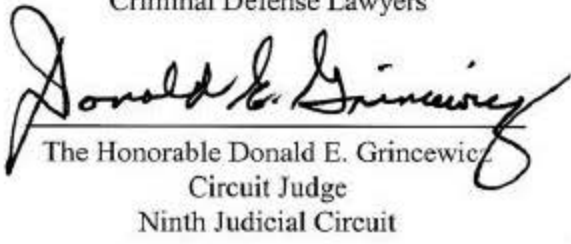

Chief Jerry Demings
Chief of Police
City of Orlando


Mr. Laudy Florentino
OrlandoBiz.NET

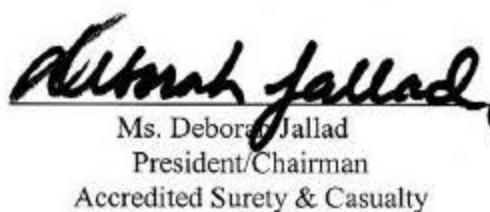

Mr. Richard Fox
President, CFIC


Mr. David Fussell, Esq.
Law Offices Horwitz and Fussell, P.A. and
Vice President, Florida Association of
Criminal Defense Lawyers


The Honorable Lydia Gardner
Orange County Clerk of the
Circuit and County Courts


The Honorable Donald E. Grincewicz
Circuit Judge
Ninth Judicial Circuit


Ms. Babette Hankey
Chief Administrative Officer
The Center for Drug Free Living


Ms. Deborah Jallad
President/Chairman
Accredited Surety & Casualty


The Honorable Layson Lamar
State Attorney
Ninth Judicial Circuit



Letter to Chairman Crotty continued....



Ms. Amy Maguire
Director of Government Relations
Orlando Regional Healthcare System



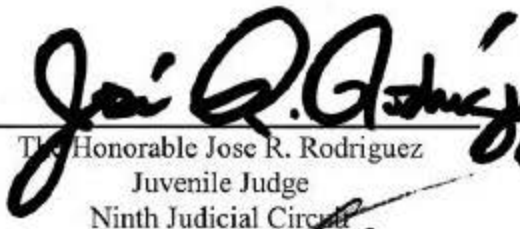
Mr. Ron McAndrew
Former Interim Director
Orange County Corrections Department



Dr. Bernard McCarthy
Chairman, Criminal Justice &
Legal Studies
University of Central Florida



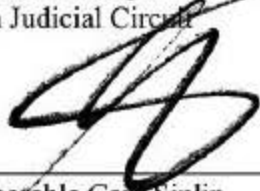
Mr. Mark NeJame
Attorney at Law
NeJame, Harrington, Barker &
Tumarkin, P.A.



The Honorable Jose R. Rodriguez
Juvenile Judge
Ninth Judicial Circuit



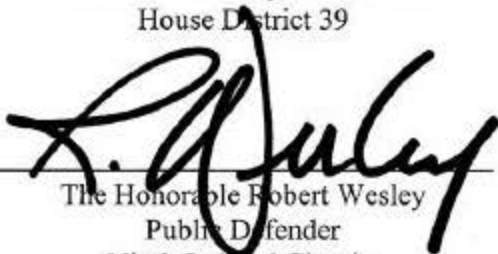
Ms. Michele Saunders, LCSW
Vice President, Community Relations
Lakeside Alternatives



The Honorable Gary Siplin
The House of Representatives
House District 39



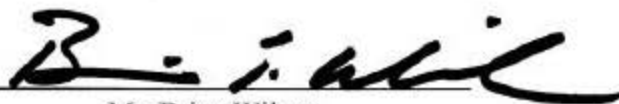
Mr. Malohe Stewart
Undersheriff
Orange County Sheriff's Office



The Honorable Robert Wesley
Public Defender
Ninth Judicial Circuit



Mr. John Williams
President
Wayne Densch, Inc.



Mr. Brian Wilson
Attorney at Law
Dellecker, Wilson & King



CHAIRMAN'S JAIL OVERSIGHT COMMISSION FINAL REPORT ADDENDUM

May 7, 2002

Dear Chairman Crotty:

At the Jail Oversight Commission's final meeting on April 22, 2002 Representative Gary Siplin filed a late amendment to the final report related to his concerns about why the percentage of blacks housed in the Orange County Jail is so much higher than the percentage of blacks in the County. After much debate, the Commission waived its rules and accepted the following amendment to the report:

The Commission recommends that the University of Central Florida be asked to conduct a study of the incarceration rate and release rate of African-Americans and Hispanics as compared to the general population in Orange County and present its finding to the Orange County Chairman.

Since this amendment was submitted after the final report was printed, it is not included in the report that you received on April 22, 2002. Therefore, this letter serves as an addendum to report and I respectfully request that the amendment be considered as an additional recommendation from the Commission.

I am also including as an addendum the attached signature pages of the introductory letter located at the beginning of the report, which have now been signed by all of the Commission members.

The final revision to the report is to the cost projection table on page 31 as it relates to the anticipated costs of the recommended information systems. A revised page is attached to reflect the revisions that have been made to fiscal years 02/03 (from 2.49 to 3.079), 03/04 (from 2.954 to 4.152) and 04/05 (from 2.787 to 1).

Sincerely,



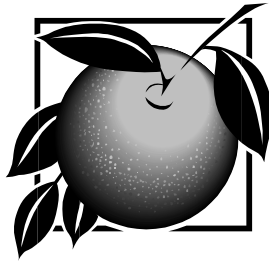
Bill Sublette
Chairman, Jail Oversight Commission

Attachments – Introductory Letter Signature Pages
Revised Page 31

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**JAIL
OVERSIGHT
COMMISSION
MEMBERS**

FINAL REPORT
April 22, 2002

Jail Oversight Commission Members

COMMISSION

Mr. Bill Sublette
Attorney at Law
Law Office of William E. Sublette
Commission Chair

Mr. Walt Gallagher
Orange County
Criminal Justice Coordinator
Commission Staff Director

Ms. René Rodon
Orange County Corrections Department
Project Coordinator
Commission Staff Coordinator

CRIMINAL JUSTICE CASE PROCESSING COMMITTEE

The Honorable Belvin Perry
Chief Judge, Ninth Judicial Circuit
Committee Chair / Commission Vice-Chair

Mr. David Fussell, Esq.
Law Offices Horwitz and Fussell, P.A. and
Vice President, Florida Association of
Criminal Defense Lawyers

Ms. Deborah Jallad
President/Chairman
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NeJame, Harrington, Barker &
Tumarkin, P.A.

The Honorable Jose R. Rodriguez
Juvenile Judge, Ninth Judicial Circuit

The Honorable Robert Wesley
Public Defender, Ninth Judicial Circuit

Mr. Ron Johnson
Orange County Criminal Justice Integrated Systems Coordinator
Committee Staff Director



***MEDICAL, MENTAL HEALTH AND
SUBSTANCE ABUSE COMMITTEE***

Mr. Rich Morrison
Vice President, Florida Hospital
Committee Chair / Commission Vice-Chair

Mr. Jeff Bennett
Community Volunteer

Ms. Juanita Hernandez-Black
President/CEO
Mental Health Association of
Central Florida

The Honorable Donald E. Grincewicz
Circuit Judge, Ninth Judicial Circuit

Ms. Babette Hankey
Chief Administrative Officer
The Center for Drug Free Living

Ms. Amy Maguire
Director of Government Relations
Orlando Regional Healthcare System

Ms. Michele Saunders, LCSW
Vice President, Community Relations
Lakeside Alternatives

Mr. John Williams
President, Wayne Densch, Inc.

Mr. Robert Pickerill
Director
Orange County Office for a Drug Free Community
Committee Staff Director

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President/CEO
Metro-Orlando Economic
Development Commission
Committee Chair / Commission Vice-Chair

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Former Interim Director
Orange County Corrections Department

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Mr. Malone Stewart
Undersheriff
Orange County Sheriff's Office

Mr. Brian Wilson, Esquire
Attorney at Law
Dellecker, Wilson & King

Mr. J. Ricardo Daye
Manager
Orange County Human Resources
Committee Staff Director



TECHNOLOGY COMMITTEE

Mr. Joel Hartman
Vice Provost, Information Technologies
and Resources
University of Central Florida
Committee Chair / Commission Vice-Chair

Mr. Randy Berridge
Principal
Florida High Tech Corridor Council

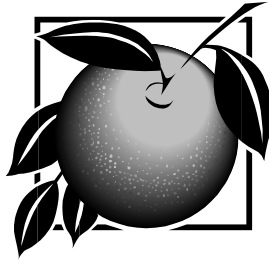
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The Honorable Lydia Gardner
Orange County Clerk of the Circuit and
County Courts

Mr. Warren Geltch
Director
Orange County Administrative Services
Committee Staff Director





**JAIL
OVERSIGHT
COMMISSION
SUPPORT STAFF**

FINAL REPORT

April 22, 2002

Jail Oversight Commission Support Staff

Richard Anderson

Captain, Special Facilities and Inmate Services
Orange County Corrections

Don Bjoring

Manager, Direct Supervision Division
Orange County Corrections Department

Dave Black

Chief
Orange County Sheriff's Office

Scott Bradstreet

Major, Main Detention Division
Orange County Corrections Department

Dr. Leonard Branch

Chief Psychologist, Mental Health Services
Orange County Health and Family Services

Carol Burkett

Assistant to the Director of Public Safety
Orange County Office of Public Safety

Oscar Charette

Corrections Officer, Main Detention
Orange County Corrections Department

Kathleen Cepregi

Manager, Human Resources
Orange County Office of Public Safety

Susan Combs

Manager, County Criminal Division
Orange County Clerk of Courts

Joyce Cooper

Chief Deputy Clerk
Orange County Clerk of Courts

Cheryl Degroff-Berry

Lieutenant
Orlando Police Department

Dr. George Ellis

Medical Director, Health Services
Orange County Health and Family Services

Kerrie Furneaux

Corrections Officer, Main Detention
Orange County Corrections Department

Dietra Green

Sr. HR Analyst
Orange County Human Resources Division

Rob Harper

Captain, Information Services Section
Orange County Sheriff's Office

Rhonda Hennessy

Sergeant, Central Booking Facility
Orange County Corrections Department

Dr. Jill Hobbs

Manager, Community Corrections Division
Orange County Corrections Department

Michelle Holloman

Sr. HR Analyst
Orange County Human Resources Division

Bob Houtman

Manager, Circuit Criminal Division
Orange County Clerk of Courts

Dennis Hughes

Assistant Manager, Corrections Health Services
Orange County Health and Family Services

Janice Knight

Chief Information Officer
Orange County Clerk of the Courts

Dave Kohler

MIS Director
State Attorney's Office



Jail Oversight Commission Support Staff

Donna Loyko

Assistant Manager, Corrections Health Services
Orange County Health and Family Services

Barbara Mills

Administrator, Human Relations
Orange County Corrections Department

Alicia Morris

HRIS Specialist
Orange County Human Resources

Orlando Portalatin

HR Administrator
Orange County Human Resources Division

Cornita Riley

Manager, Special Facilities and Inmate Services
Orange County Corrections Department

Scott Schehr

Captain, Central Booking/Horizon Division
Orange County Corrections Department

Melanie Servis

Assistant to the Deputy County Administrator
Orange County Administrator's Office

Sadie Singleton

Sr. HR Analyst
Orange County Human Resources Division

Steve Smith

Chief Information Officer
Orange County Information Systems and Services

Todd Stalbaum

Quality Manager, EMS/Disaster Health
Orange County Health and Family Services

Pam Steinke

Manager, Health Services
Orange County Health and Family Services

Cynthia Sterchele

Project Leader
Orange County Information Systems & Services

Howard Tipton

Chief Administrative Officer
Orange County Clerk of the Courts

Dennis Warren

Captain, Central Booking/Horizon Division
Orange County Corrections Department

Helene Welch

Deputy Court Administrator
Court Administration

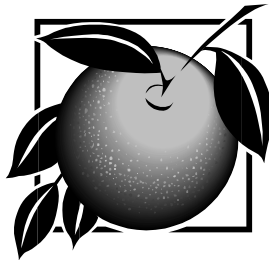
Sally Wolfe

Manager, Mental Health Division
Orange County Clerk of the Courts

Donna Wyche

Assistant Manager, Youth and Family Services
Orange County Health and Family Services





**CHAIRMAN'S
INTRODUCTION
AND
RECOMMENDATIONS**

FINAL REPORT
April 22, 2002

Chairman's Introduction and Recommendations

I. INTRODUCTION

According to the National Center for Policy Analysis, the nation's prison and jail population has grown by 3%, while crime has fallen by 10% over the same period. In Orange County, the incarceration rate has risen by 15% over the past ten years, while the crime rate has dropped by 25% over the same period. Orange County's incarceration rate is 56% higher than the rest of Florida's and 109% higher than the national average. These increases are due in part to longer sentences, reduced use of parole, increased arrests or re-arrests, and improved efficiency on the part of law enforcement in solving crimes.

The Orange County Corrections Department ("Corrections"), is charged with housing those arrested by 20 local, State and federal law enforcement agencies. Corrections operates the third largest jail in the State and 17th largest jail in the nation. With an annual budget of \$110 million, the Corrections operating and staffing budget comprises the second largest segment of the County's budget, fully 26% of the County's total annual operating and staffing budget.

The Orange County Jail last underwent a major expansion in 1994, growing to a design capacity of 3,426 inmates and an operational capacity of 3,940 inmates. Today, the average daily population of the jail is 4,239 inmates, 24% above design capacity and 8% above operational capacity. The Jail is currently in the midst of an estimated \$95 million expansion scheduled for completion in 2004. The current expansion will lift the Jail's design capacity to 4,446 beds, yet credible local academic studies conservatively project the County's inmate population to grow to at least 7,000 inmates by 2010. This will put the Orange County Jail 43% above its design capacity within only six years of completing the current expansion.

The Orange County Jail must be viewed as an integral part of the community and the community's criminal justice system. Without adequate jail capacity the community faces the threat of the release of potentially dangerous offenders who would otherwise be incarcerated, or in a worst case scenario the mandatory, court ordered release of prisoners.

II. SNAPSHOT OF THE JAIL POPULATION

The primary purpose of the Orange County Corrections Department is to protect the safety of Orange County's citizens. The jail it operates houses those arrested for a criminal offense, those awaiting the disposition of their criminal case, those awaiting transfer to a State or federal prison, and those serving a sentence of one year or less. The overwhelming majority of those inmates incarcerated in the Orange County Jail will return to the community upon their release.

Historically, the Orange County Jail housed misdemeanor offenders. However, in recent years with the growth in the County's population and a lack of adequate jail space a much



Chairman's Introduction and Recommendations continued....

Snapshot of the Jail Population continued:

different picture has emerged. When the Jail Oversight Commission ("JOC") took a recent "snapshot" of Orange County Jail population on a randomly selected day, it found that 87% of the Jail's population for the day selected was incarcerated on a felony charge, while only 17% were incarcerated on a misdemeanor charge. Of those incarcerated on misdemeanor charges, 68% had a criminal history of a felony arrest. Overall, 57% of the Jail's population had a criminal history of one or more violent felony crimes. This dispels the notion that the Orange County Jail is crowded with non-violent, minor offenders.

The Orange County Jail books approximately sixty thousand (60,000) persons annually, with bookings and releases each averaging 160 persons per day. This is accomplished in a facility designed to handle only 80 bookings per day.* In 2000, 39% of all bookings were for felony offenses and 58% of bookings were for misdemeanor offenses. When compared to the fact that 87% of the Orange County Jail's inmate population is incarcerated on felony charges, it becomes apparent that the courts, Jail administrators, and bail bond industry are doing a good job of processing out the non-violent misdemeanant offenders at the booking and Initial Appearance stage of the criminal justice process while incarcerating dangerous felony offenders.

Of the total Jail population, 11% suffers from a chronic or severe mental illness. Inmates with mental illness are typically jailed three times longer than other inmates, with homelessness more prevalent among the mentally ill. While it is disturbing that the mentally ill are jailed three times longer than the average inmate, a misperception persists in the community, that the mentally ill are jailed simply because they are mentally ill, and not because they pose a threat to society. While there is some truth to that notion as evidenced by the average stay in jail of a mentally ill inmate, an examination of mentally ill inmate histories illustrates that most inmates classified as mentally ill are incarcerated on a felony charge and, very often, on a violent offense felony charge.

For example, when the Commission examined in detail the records of those inmates classified as mentally ill in the Orange County Jail on a randomly selected day, it learned that fully 82% of the mentally ill were incarcerated on a felony charge and 37% were there on a violent felony offense charge. Additionally, 64% had a criminal history of violent felony arrest and 65% had a sufficiently dangerous criminal history to justify classifying them as "serious offenders" and a security risk. Of course, the question of whether the mentally ill would be committing violent offenses if they were properly treated in the

* "Bookings" is distinct from "incarceration", with "booking" defined as the processing of a person accused of a criminal offense into the jail, often to be released a short time later by court order, and "incarceration" referring to the actual imprisonment for a period of time of a person accused or convicted of a crime.



Chairman's Introduction and Recommendations continued....

Snapshot of the Jail Population continued:

community properly arises. The Commission does not have the answer to that question. The Commission has no doubt, however, that there is a severe shortage of assessment, treatment, and counseling services in Orange County. And while most mentally ill inmates are rightfully incarcerated in light of the serious nature of the crime they have been charged with, the Orange County Jail has nonetheless become the de facto primary mental health treatment center in the community because of the inadequate level of mental health treatment services and beds in Orange County.

The Orange County Jail has also become the primary depository for substance abusers in the community. Over the past seven years, drug charges have experienced a 60% rise in bookings, by far the largest increase of all categories of bookings. Approximately 66% of inmates entering the Jail admit drug histories. Again, however, most known substance abusers in the Orange County Jail are incarcerated on a serious criminal charge, with fully 90% of those inmates diagnosed as having a substance abuse problem incarcerated on a felony charge, and 58% having a violent criminal history.

III. COMMISSION BACKGROUND

Recognizing the critical issues facing the Orange County Jail, in July 2001, Richard Crotty, Orange County Chairman, established the Chairman's Jail Oversight Commission ("Commission") to review and evaluate the effectiveness of the Orange County Corrections Department in achieving its mission. The Commission is comprised of leaders of the Orange County Jail's criminal justice system partners, leaders of the community's primary mental health and substance abuse providers, and various experts in the criminal justice system and in the field of computer science.

Mr. Bill Sublette, local attorney and former State legislator, was named Chairman of the Commission. Judge Belvin Perry, Chief Judge of the local Ninth Judicial Circuit, was appointed Vice-Chairman of the Commission and Chair of the Criminal Justice Case Processing Committee. Mr. Ray Gilley, President/CEO of the Metro Orlando Economic Development Commission, was named Vice-Chairman of the Commission and Chair of the Staffing and Performance Committee. Mr. Joel Hartman, Vice Provost, Information Technology and Resources for the University of Central Florida, was named Vice-Chairman of the Commission and Chair of the Technology Committee, and Mr. Richard Morrison, Vice President, Florida Hospital, was named Vice-Chairman of the Commission and Chair of the Medical, Mental Health, and Substance Abuse Committee.

Initially the Commission was to be staffed by Orange County Corrections Department professionals. However, in light of the Commission's oversight role and in order to maintain the integrity and independence of the Commission, the decision was made early on by the Orange County Chairman to instead staff the Commission with professionals



Chairman's Introduction and Recommendations continued....

Commission Background continued:

from Orange County Government unaffiliated with the Corrections Department. Thus, Mr. Walt Gallagher, Orange County Criminal Justice Coordinator and former Orange County Sheriff, was named Commission Staff Director. Mr. Ron Johnson, Orange County Criminal Justice Integrated Systems Coordinator, was named Staff Director of the Criminal Justice Case Processing Committee. Mr. Bob Pickerill, Director, Orange County Office for a Drug Free Community, was named Staff Director for the Medical, Mental Health, and Substance Abuse Committee. Mr. Ricardo Daye, Manager, Orange County Human Resources, was named Staff Director for the Staffing and Performance Committee, and Mr. Warren Geltch, Director, Orange County Administrative Services Department, was named Staff Director for the Technology Committee.

Notwithstanding its independent oversight role, the Commission is indebted to the many Orange County Corrections Department professionals who, without complaint or exception, provided the Commission with the facts, expertise, and guidance necessary to address the complex issues addressed by the Commission. Ms. René Rodon, a Project Coordinator with Corrections, capably served as Commission Staff Coordinator and assisted the Commission with navigating the Corrections Department.

The Commission was charged by Chairman Crotty with taking, "a comprehensive look at Corrections Staffing and Performance Issues, Criminal Justice Case Processing, Technology, and Medical, Mental Health and Substance Abuse Issues." Put simply, the Commission was charged with examining all of the external and internal factors which impact, directly or indirectly, the Jail's population and operations. To accomplish its mission four committees were established to parallel the Commission's mandate: a Corrections Staffing and Performance committee, a Criminal Justice Case Processing committee, a Technology committee, and a Medical, Mental Health and Substance Abuse committee. The Committees were directed to document their findings and to recommend long-term regional solutions for the Jail and the citizens of Orange County.

The Committees sought to meet their mandates by gathering information through expert, public, and staff testimony, surveying large urban jails, researching area jails' and hospitals' medical, mental health, and substance abuse treatment practices and protocols, and reviewing past jail studies. Each Committee, in addition to attending full Commission meetings, toured the Jail's correctional facilities and met independently on a periodic basis to hear staff presentations, hear testimony, and to collaboratively identify major issues and formulate recommendations intended to improve jail operations, policies, procedures, morale and leadership. This information produced the work product for the Commission.

The Committees received information from a myriad of sources ranging from private citizens, to Corrections Department employees, to union representatives, to managers within Corrections, and to acknowledged experts in various fields of inquiry. Additionally,



Chairman's Introduction and Recommendations continued....

Commission Background continued:

the University of Central Florida, Department of Criminal Justice and Legal Studies, conducted several focus group studies of randomly selected Jail employees and administered an anonymous survey of all Jail staff to measure Corrections Department employee and management perspectives. Snapshots were taken of the Orange County Jail's population, services, staffing procedures and processes. The data collected spoke volumes for the need for revision, review and changes in the present system.*

It should be noted that the Commission's report is not all encompassing. Our mandate was broad and our time limited, and it was impossible for the Commission to address the limitless issues affecting the Jail's population and operations. The Commission did its best, however, to address what it viewed as the most critical and important issues

IV. CHALLENGES:

The configuration known as the Orange County Criminal Justice System is really a loose partnership of the judiciary, various Constitutional officers, local, state and federal law enforcement, and mental health, substance abuse, and social service contract providers. Each partner's mission is diverse and may at times appear counterproductive or at odds with the mission of other criminal justice system partners. In part because of this, the Jail often becomes the repository not only for those accused of violent crimes, but also for many of society's ills.

Each criminal justice partner of the Jail has developed its own internal information system, mostly without coordination with the other criminal justice agencies. Over the years the required flow of information among the agencies has increased requiring the development of an array of manual, paper-based methods for exchanging information and documents. The information systems of the Orange County Jail's partners were designed and implemented independently, therefore, the data elements used by the various agencies are inconsistent in format and meaning, which further complicates the exchange of appropriate information.

The acquisition of a new records management system at the Orange County Jail with the latest medical management tools is of primary importance. The application of a truly

* The data collected through various snapshots present information at a given moment in time. Throughout this report statistics, populations and vacancies may appear inconsistent due to when the information was captured or reported. This, however, does not affect the validity of the data, nor does it change the challenges or solutions required.



Chairman's Introduction and Recommendations continued....

Challenges continued:

integrated criminal justice system should co-occur. All strategic criminal justice partners must provide for easy accessibility and integration of data necessary for an efficient justice system.

A cultural change in the way we conduct business in our courts and in the defense and prosecution of alleged criminal conduct is also necessary if we are to bring about the necessary efficiencies and cost containment. The process by which arrestees become either defendants, inmates or released persons involves the entire court system, meaning the judiciary, Clerk of the Court, State Attorney, Public Defender, private defense counsel, and Jail administration. A rethinking of how the Court does business and how the calendar can be used to speed the process is paramount to the outcome of many critical issues. Saved jail bed days by efficiencies in the Judicial system will not only be important to the Jail, but to the taxpayers of Orange County.

A citizen should rightfully ask why increasing efficiencies within the Orange County Jail and within what the Commission calls the "case processing system" is important from a taxpayer perspective. To answer that question one must look at the projected capacity and population of the Orange County Jail over the next eight years.

As previously noted, the current "design" capacity of the Orange County jail is 3,426 inmates. It is generally accepted by both corrections professionals and the courts that an acceptable "operational" capacity is 15% over the "design" capacity of any given jail or prison. Thus, the Orange County Jail's current "operational" capacity is 3,940 inmates. Crowding above that number subjects the Jail to the possibility of a successful civil rights lawsuit seeking the court ordered mandatory release of inmates. Until very recently the average daily inmate population of the Orange County Jail was 4,239 inmates, putting it 24% above its "design" capacity and 8% above its "operational capacity" on any given day.*

The Orange County Jail's current \$95 million expansion, scheduled to be completed in 2004, will lift the Jail's "design" capacity to 4,446 beds and its "operational" capacity to 5,111 beds. Credible local academic studies, however, conservatively project the County's inmate population to grow to at least 7,000 inmates by 2010, putting the Orange County Jail 1,247 inmates above its "operational" capacity within only six years of

*Because of the work of the Commission over the past nine months and various recommendations which have already been implemented by the local courts and the Orange County Corrections Department, as of April 16, 2002 the Jail's population has already been reduced to 3,428, with an additional 167 inmates being housed in a facility of a neighboring county.



Chairman's Introduction and Recommendations continued....

Challenges continued:

completing the current expansion if current case processing practices remain unchanged. At a current construction cost of \$38,843 per bed, the County faces a difficult dilemma in only eight short years: either engage in an additional expansion costing \$2.56 million annually in capital improvement costs or change case processing practices to lower the inmate population.

The Commission's recommendations are estimated to reduce the inmate population by an estimated 2,850 inmates per day, saving taxpayers the estimated \$2.56 million annually in capital improvement costs, and an additional \$452 million in operations and staffing costs between Fiscal Year 02/03 and Fiscal Year 09/10. It is for this reason that the Commission's recommendations are imperative for the taxpayers of Orange County.

Diverting non-violent, minor offenders with mental health, medical and substance abuse issues to community treatment providers will certainly be a productive step. Placing violent, more serious offenders with mental health, medical and substance abuse issues in secure treatment settings outside of the Jail's general population will also be a productive step. Reducing the excessive length of time those accused of minor, technical violations of probation spend in the Jail will free up much needed space for those committing violent, felony crimes. These are just a few of the short-term necessary solutions that will have a long term cost savings to the citizens of Orange County.

When new construction takes place at the 33rd Street Corrections Complex, courtrooms and updated technology and information systems should be incorporated into the design. These two issues on their own will provide efficiencies that will reduce the Orange County Jail's population and costs.

Recruiting, training, retention and communication are the foundation blocks for any effective organization. When vacancies are unfilled, and when workloads are not reduced, serious consequences result. Increases in the Orange County Jail's population without proper staffing causes low morale, reduces efficiency and eventually reduces the quality of services provided.

The state of morale within the Jail presents an interesting paradox. When measured by job satisfaction and enthusiasm for their work, morale within the Orange County Corrections Department is surprisingly high. When measured by the degree of confidence and trust with which Corrections Department employees view their leadership, morale is abysmally low.

The results of the UCF survey measuring employee perceptions of the leadership abilities of Corrections senior management were disturbing. A studied review of the results of the UCF survey will make apparent to even the most casual observer that confidence has been



Chairman's Introduction and Recommendations continued....

Challenges continued:

lost in the leadership of the Department. What is most disturbing, however, is that some in senior management seem unwilling to acknowledge and confront the existence of serious, deep rooted failures of leadership and management practice. If morale and confidence in senior management and leadership is to be restored within the Orange County Corrections Department, and if public confidence in the Orange County Jail is to be restored, senior Corrections Department management must first acknowledge the validity of the perceptions held by rank and file staff and must be willing to directly confront the root causes of such perceptions.

V. CONTINUED OVERSIGHT AND MONITORING:

To ensure implementation of the recommendations outlined in this report and to foster jail and community shareholder partnerships, the Commission strongly recommends on-going oversight and monitoring of the progress made on the recommendations of the Jail Oversight Commission. Thus, the Commission recommends that:

1. Responsibility for continued oversight be given to the Public Safety Coordinating Council ("Council"). The Public Safety Coordinating Council already exists in Orange County and it is responsible for overseeing jail crowding and making necessary recommendations to effect change. The Council has many of the same members as does the Jail Oversight Commission and can effectively provide the oversight necessary to ensure timely and appropriate implementation of the Commission's recommendations. The Commission further recommends that Mr. Rich Morrison, Commission Vice-Chair and Chair of the Medical, Mental Health and Substance Abuse Committee, serve on the Council on behalf of the Commission.
2. The Orange County Chairman Crotty reconvene the Chairman's Jail Oversight Commission once per year to receive a report from Mr. Morrison and the members of the Council on the status of implementing the Commission's recommendations.
3. The Orange County Board of County Commissioners appoint a Citizens' Advisory Council, consisting of a minimum of five members who are non-governmental employees, to monitor and report on the recommendations contained in the report. The Commission further recommends that the Citizens' Advisory Council report directly to the Board of County Commissioners every six months on the status of each of the recommendations contained herein.
4. The Orange County Corrections Department institute a "Citizens Academy" program similar to that run by the Orange County Sheriff and Fire Departments and the Orlando Police and Fire Departments; and



Chairman's Introduction and Recommendations continued....

Continued Oversight and Monitoring continued:

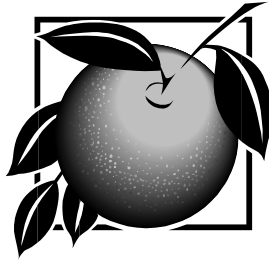
5. The Orange County Corrections Department and Information Systems and Services Department add to the County's web site a page entitled "Jail Count," which page shall be updated daily, or monthly, whichever is feasible, to reflect the Orange County Jail's average daily, or monthly, inmate population vis-à-vis the Jail's capacity.

These recommendations are in addition to the recommendations found in the Staffing and Performance Committee report at page 137, asking the Orange County Corrections Department to reinstate routine tours of its facilities with community groups, leaders and VIP's to better educate the public on the vital role of the Jail in the County's criminal justice system, and asking the incoming Jail Director and his senior management team to aggressively seek speaking opportunities before local service clubs, community groups, and political organizations.

VI. CONCLUSION:

What follows is the real substance of the Commission's work, the reports of its various committees. The Committee reports are the result of a concerted work effort of thousands of hours by innumerable individuals both on the Commission and not on the Commission. The cooperation given to the Commission by the Orange County Corrections Department and senior County leadership was noteworthy and deeply appreciated. The time and effort was given freely because all of the participants in the work of the Jail Oversight Commission believe in our community and in the importance played by the men and women of the Orange County Corrections Department in keeping our community safe. Last, but perhaps most importantly, we commend Chairman Rich Crotty and the Board of County Commissioners for having the foresight and compassion to create the Chairman's Jail Oversight Commission and for empowering the Jail Oversight Commission with the staff, resources, and mandate needed to truly make a difference.





**SUMMARY
OF
RECOMMENDATIONS**

FINAL REPORT
April 22, 2002

S ummary of Recommendations

The following is a brief summary of the recommendations contained in the Commission's report. For a detailed description of each of the recommendations, refer to the Committee Reports on pages 38 – 171:

CHAIRMAN'S RECOMMENDATIONS:

1. Assign responsibility of continued oversight and monitoring of implementation of recommendations to the Public Safety Coordinating Council.
2. Reconvene the Jail Oversight Commission annually.
3. Establish a Citizens' Advisory Council.
4. Establish a Corrections Citizen Academy.
5. Expand the Corrections web site to include a count of the average daily, or monthly, inmate population.

CRIMINAL JUSTICE CASE PROCESSING COMMITTEE RECOMMENDATIONS:

Fast Track Case Process:

6. Amend the Administrative Order to provide guidelines for fast track case discovery.
7. Issue subpoenas after fast track hearing.

Pleas at Initial Appearance (IA):

8. Dispose of non-violent/non-victim cases at IA or arraignment when appropriate.
9. Appoint the public defender at IA.
10. Assign court case number and division number at IA.
11. Ensure all parties are present at IA.
12. Conduct IA's twice a day and once a day on weekends and holidays.
13. Encourage law enforcement to provide positive identification before bringing arrestees to jail.
14. Integrate the quick print identification system with the existing facial recognition.



S ummary of Recommendations continued....

Pleas at Initial Appearance (IA) continued:

15. Complete Affidavits of Insolvency and provide them to judge prior to IA.
16. Provide the criminal history to the prosecutor prior to IA.

Pre-Trial Hearings:

17. Limit trial periods to seven (7) to ten (10) days.
18. Allow sufficient time to take pleas.
19. Establish separate times for private attorney cases.

Jail Courtrooms:

20. Build two courtrooms ready for operation and one for future expansion.

Average Times to Disposition:

21. Felony Cases:
 - Arraignment 30 days,
 - Fast Track 60 days,
 - Pre-Trial one week before trial, and
 - Trial 90 –120 days after arraignment.
22. Violation of Probation Hearings within 30 days
23. Misdemeanor Cases:
 - Arraignment 20 days and
 - Trial within 45 days from arraignment.

Recent Process Studies:

24. Establish a policy to require completion of State Department of Corrections commitment documents before sentencing hearing is finished.
25. Transfer State Department of Corrections inmates, with no holds, within seven (7) days of sentencing.

Alternatives to Confinement:

26. Continue pre-trial services release programs under jail management.



Summary of Recommendations continued....

Alternatives to Confinement continued:

27. Encourage Corrections staff to complete interview worksheets and Affidavits of Insolvency prior to IA.
28. Determine risk and needs of mentally ill and amend the Administrative Order to include pre-trial release programs for mentally ill.
29. Establish a Jail Population Coordinator position.
30. Reconvene the Bond Review Committee.
31. Encourage law enforcement agencies to expand the use of Notices to Appear.
32. Ensure bond hearing times are not changed once scheduled.
33. Set Violation of Probation bonds at the time the warrant is signed.
34. Set bond hearings within five (5) days.
35. Continue the study of conditional bonds.
36. Develop more community treatment/assistance programs.
37. Establish a Central Point of Access Facility.
38. Provide more officers with Crisis Intervention Team training.
39. Conduct a study of inmate phones at the jail.

MEDICAL, MENTAL HEALTH, AND SUBSTANCE ABUSE COMMITTEE RECOMMENDATIONS:

Medical Equipment:

40. Conduct an inventory of current equipment to determine the needs of the population and ensure compliance with the general community standard.

Automated Medical Records:

41. Acquire, implement and support a medical management system.



S ummary of Recommendations continued....

Automated Medical Records continued:

42. Explore a stand alone system that has the ability to integrate with the current and future inmate management systems.
43. Explore contracting with a third-party provider as an interim solution.

Medication Dispensing Method:

44. Implement blister pack dispensation.
45. Change current cart dispensing method to a fixed site.
46. House inmates on medication together whenever possible.
47. Ensure continuous evaluation of dispensing activities.
48. Explore utilization of personal digital assistants (PDA's) to document dispensing.

Policies and Procedures Implementation:

49. Develop, disseminate and implement up-to-date protocols that meet basic community standards.
50. Develop competency measures to evaluate the understanding of policies and procedures.
51. Conduct routine audits to ensure compliance with policies and procedures.

Quality Assurance/Risk Management of Medical Services:

52. Implement a peer review/quality assurance process.

Sick Call Follow Up:

53. Provide on-going sick call education and training for security and medical staff.
54. Conduct routine audits to ensure the use of proper forms, timeliness of responses, and compliance with established processes.
55. Expand the availability of sick call.
56. Establish protocols with appropriate standards for timeliness of responses.



S ummary of Recommendations continued....

Infectious Disease Control:

57. Develop an employee health program to include on-going education, routine voluntary testing and follow up services.
58. Provide on-going evaluation of policies and procedures.
59. Provide appropriate isolation housing and establish an adequate notification process.
60. Develop a formal process with the Orange County Health Department to ensure timely communication of communicable infectious diseases in the community.

Untreated Chronic Diseases:

61. Identify medically high-risk, non-violent inmates and recommend early release when appropriate.
62. Reinstate a forensic liaison specialist position.
63. Establish a medical consultant panel.
64. Maximize the utilization of community medical resources.

Free Medical Care Access:

65. Initiate on-going discussion related to the Jail's medical services in the primary and community referral network.
66. Become a member of the Primary Care Access Network (PCAN).
67. Develop and implement a formal system to integrate medical, substance abuse, and mental health issues with community providers.
68. Consolidate, as much as possible, inmate hospital services to one institution.

Screening People with Mental Illness and/or Substance Abuse Problems:

69. Establish a Central Point of Access Facility.
70. Automate linkages for jail and mental health providers.
71. Develop multi-disciplinary teams.



S ummary of Recommendations continued....

Screening People with Mental Illness and/or Substance Abuse Problems continued:

72. Establish a formal mental health court at the Jail.
73. Identify community resources for probation/parole and develop diversion programs.
74. Develop and implement on-going education with law enforcement to identify high-risk arrestees who should be taken to community medical facilities.
75. Certify correctional officers in mental health inmate supervision.
76. Reinforce continued use of forensic beds.
77. Continuously evaluate and update emergency medical orders.
78. Create a Primary Care Access Network (PCAN) model for mental health and substance abuse.

Competency Hearings:

79. Ensure timely mental health assessments.
80. Broaden the pool of evaluators.

Medication Issues at Central Booking:

81. Ensure the timely transfer of medical/mental health information.
82. Require inmates to sign Release of Information forms during the booking process.
83. Encourage community programs to have clients sign Release of Information forms.
84. Develop a process to ensure inmates continue to receive verifiable prescribed medications.

Assessment Information Flow to the Judges/Court:

85. Develop a protocol to ensure timely communication for early/enhanced disposition of cases.
86. Expedite the disposition of inmates with mental illness to ensure placement into a more appropriate setting.



S ummary of Recommendations continued....

Follow Up on Released Inmates with Mental Health Problems:

87. Establish a database to identify mental health inmates.
88. Expand Crisis Intervention Team training.
89. Develop two formal communication systems for inmate discharge:
 - One to address when the release date is known.
 - One to address when the release is to be immediate.
90. Establish community resources for placement and monitoring.

Substance Abuse Database:

91. Establish a baseline of substances abused by inmates.
92. Evaluate the providers being used for substance abuse services.
93. Identify the number of beds available, number of beds used, types of out patient services available and what is needed.
94. Utilize the above findings to advocate for necessary resources to meet the needs of the inmate population.

Detoxification:

95. Develop a screening tool to profile/identify high-risk inmates and a process to monitor detoxification symptoms.
96. Implement a detoxification program.
97. Develop protocols for medical supervision and withdrawal, and provide a safe, monitored environment.
98. Provide detoxification of arrestees in the community.
99. Identify the number of detoxification beds available in addiction receiving facilities.
100. Prioritize the detoxification bed capacity expansion.



Summary of Recommendations continued....

Pre-Trial Services:

101. Create a position to liaison with the Court.
102. Expand the eligibility criteria for pre-trial release.

Methadone Treatment Programs:

103. Institute a policy that addresses inmates on methadone.
104. Encourage pre-trial release/bond.
105. Administer methadone on-site if an inmate must remain in jail.
106. Require one on-site methadone provider for dispensation and consultation on detoxification.
107. Ensure methadone is not initiated as a treatment option for other drug conditions.
108. Ensure detoxification from methadone only when ordered by a physician or transferred to a State correctional facility.

Inmate Substance Abuse Programs:

109. Implement compulsory, structured substance abuse treatment programs for short-term and long-term stays.
110. Establish structured programs for substance abusing probationers.

Caseloads for County Probation:

111. Establish appropriate probation caseload ratios for high-risk offenders.
112. Request funding for additional staffing.

Drug Testing Offenders in the Jail and Community Corrections Programs:

113. Review and evaluate the frequency and randomness of drug testing in the Jail.
114. Increase the frequency and randomness of drug testing within the Jail.
115. Increase the frequency of drug testing of County probationers.



S ummary of Recommendations continued....

Discharge Planning:

- 116. Conduct discharge planning of all inmates with service needs.
- 117. Involve community agency providers in discharge planning.
- 118. Develop an external case management system.
- 119. Institute appropriate and timely discharge planning for inmates with special needs.
- 120. Involve State probation and County probation in discharge planning.

Resource Development:

- 121. Partner with local human service organizations to advocate for additional resources to meet the needs of released inmates.
- 122. Conduct a needs assessment to identify missing community resources.

Law Enforcement Communication:

- 123. Establish an agreement with law enforcement agencies to require advance notification of sting operations.
- 124. Ensure Health Services and Corrections management receives advance notification.

Medicaid Benefits/Other Funding Sources:

- 125. Lobby for the extension of Medicaid benefits.
- 126. Dedicate a position to pursue outside funding.

System Training:

- 127. Develop an in-service training curriculum for members of the criminal justice system.
- 128. Provide corrections staff with modified Crisis Intervention Team training.
- 129. Communicate Commission recommendations to the judiciary.

Medical Staff Training:

- 130. Develop a medical training program for the Health Services staff.



S ummary of Recommendations continued....

Facility Constraints to Health Care:

131. Review the current layout of the Jail and the layout proposed in the expansion.
132. Create an area for a female medical unit.

Corrections Staff Training:

133. Develop medical training curriculums for Corrections staff.
134. Involve the medical/mental health team in the development of protocols for inmates with co-disorders.
135. Provide on-going training on the signs and symptoms of withdrawal.

Communication with Judiciary:

136. Provide adequate information at Initial Appearance.

Medical and Corrections Communications:

137. Develop a process for Health Services and Corrections staff to identify and resolve issues and communicate solutions.
138. Implement a formal process for Health Services and Corrections staff to communicate at shift change.
139. Establish on-going meetings between Health Services and Corrections mid-management.
140. Establish quality improvement teams.

Central Booking Resources:

141. Assign an Advanced Registered Nurse Practitioner (ARNP) to Central Booking.
142. Increase the number of Registered Nurses and Mental Health Nurses at Booking.
143. Implement a triage system.
144. Develop communication linkages with community providers.
145. Implement discharge planning in Central Booking.



Summary of Recommendations continued....

Central Booking Resources continued:

- 146. Develop a central point of intake and assessment at the Jail.
- 147. Utilize off-duty paramedics at Booking.
- 148. Assign a Mental Health professional on-site 24 hours a day, 7 days a week.

STAFFING AND PERFORMANCE COMMITTEE RECOMMENDATIONS:

Need for Accreditation:

- 149. Continue to pursue accreditation with the American Correctional Association.
- 150. Explore State of Florida accreditation.
- 151. Assign Compliance Officer positions to Corrections and Health Services operations.
- 152. Establish an Internal Affairs Unit in the Office of Public Safety.

Outdated Policies and Procedures:

- 153. Finalize proposed revisions and incorporate in the County's personnel policy manual.
- 154. Review and revise internal operating procedures.
- 155. Negotiate with unions to include new guidelines in labor agreements.

High Turnover of Medical Staff:

- 156. Establish competitive pay rates.
- 157. Request Board of County Commissioners' approval of the proposed staffing and funding model for the Medical Unit.
- 158. Provide retention bonuses to attract and retain new employees.
- 159. Address safety and security issues.

Position Vacancies:

- 160. Continue increasing the frequency of tests and employment examinations, and continue with an aggressive recruitment process.



S ummary of Recommendations continued....

Position Vacancies continued:

161. Partner with unions to develop recruitment packages and identify sources for qualified candidates.
162. Establish trainee positions with mentors.

Pay Inequity:

163. Immediately address any identified pay deficiencies within the Department.
164. Negotiate fair and competitive pay rates with unions.
165. Conduct a job analysis and a pay study of Inmate Records Management Unit.

Work Environment:

166. Further restrict public access to the Corrections complex.
167. Repair or replace air conditioning systems in the Phoenix and Genesis facilities.
168. Address slow and inefficient response to equipment repair requests.
169. Develop labor-management cooperatives to identify and address employee safety concerns.
170. Negotiate procedures and guidelines in labor agreement to ensure a safer and more secure work environment.

Employee Morale:

171. Review the UCF Personnel Survey Report Summary of Findings and compare the results with similar surveys in other Correctional agencies.
172. Continue the Quarterly Awards Ceremony and “on the spot” awards.
173. Ensure implementation of the Master Correctional Officer program.
174. Reinstate routine public tours of facilities.
175. Seek speaking opportunities to publicize positive images of the Department and staff.
176. Reassess employee morale in six (6) months and again in twelve (12) months.



Summary of Recommendations continued....

Leadership:

- 177. Expand employee communication networks within Corrections.
- 178. Assess the effectiveness of Corrections' senior management team.
- 179. Reassign or remove ineffective management team members.

Communication:

- 180. Promote strategies that keep lines of communication open and accessible.
- 181. Solicit staff's ideas and input in solving problems and improving operations.
- 182. Reassess employee satisfaction with communication initiatives in twelve (12) months.

Performance Management:

- 183. Identify employees to participate in a "pilot" of the proposed performance management process and recommend adjustments for broader application throughout the Department.

Adequacy of Training and Development Initiatives:

- 184. Increase training opportunities for current staff and new employees.
- 185. Continue to administer an annual survey to assess training needs and solicit immediate feedback from employees after training.
- 186. Develop and conduct specific training for in-house agency nurses and Health Services staff to prepare them to work in a "security setting".
- 187. Require in-house agency nurses and Health Services staff to complete "security setting" training before coming on board.
- 188. Collaborate with County Human Resources Division to enhance training opportunities.

Staffing/Excessive Use of Overtime:

- 189. Secure an objective analysis of critical posts and staffing levels.
- 190. Request funding to address identified staffing deficiencies, as well as develop strategies to meet additional staffing needs identified by the analysis.



S ummary of Recommendations continued....

Staffing/Excessive Use of Overtime continued:

191. Research options to supplement existing staff and continue to streamline recruitment process.
192. Negotiate with the union a more equitable means of assigning overtime.
193. Re-evaluate staffing patterns and the experience level of staff in facilities and on shifts.
194. Provide senior correctional staff incentives for accepting temporary assignments to less desirable shifts and facilities.

Abuse of Term Leave:

195. Clearly explain and reinforce the purpose and intent of term leave versus personal leave.
196. Require employees to obtain medical documentation as appropriate to support the reason and duration for term leave absences.
197. Research best practices regarding leave options in comparable public entities.

Lack of Special Risk Retirement Benefits for Nursing Staff:

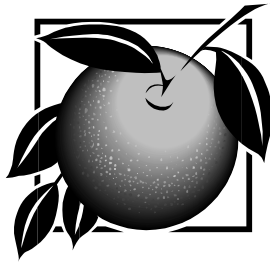
198. Provide special risk retirement as a benefit for Jail nursing staff.

TECHNOLOGY COMMITTEE RECOMMENDATIONS:

New Systems:

199. Acquire, implement and support a new inmate management system.
200. Acquire, implement and support a new medical management system.
201. Acquire, implement and support a new integrated criminal justice system.
202. Acquire, implement and support a new time and attendance system.





**SUMMARY
OF
RECOMMENDATIONS
ALREADY
IMPLEMENTED**

FINAL REPORT
April 22, 2002

Summary of Recommendations Already Implemented

The following is a summary of recommendations that have already been implemented by the Corrections Department, Health Services Division and the jail's criminal justice system partners:

Criminal Justice Case Processing Committee:

1. Reduced jail population from an average daily population of 4,239 in 2000 to a population of 3,595 on April 16, 2002 due in part to more timely case processing and transfers to the State Department of Corrections.

Medical, Mental Health, and Substance Abuse Committee:

2. Conducted inventory of medical equipment.
3. Working with Corrections administration to house inmates on medications in fewer facilities, though difficult due to security and other related issues.
4. Developed quality assurance/peer review through utilization of American Correctional Association and jail model standards.
5. Developed a protocol expanding availability of sick call.
6. Taken steps to identify medically high-risk, non-violent inmates and recommend early release.
7. Developed a consultant panel of medical specialists.
8. Initiated identification of community resources for treating chronically ill inmates.
9. The Jail Medical Director and Jail Health Care Administrator have become members of the Primary Care Access Network (PCAN).
10. Developed an interim Methadone policy.
11. In the process of developing a permanent policy on Methadone.
12. Taken steps to involve community providers in discharge planning.
13. In the process of developing a comprehensive training program for medical staff.
14. Reviewed the design layout for the Jail and made suggestions for changes to enhance service delivery.



Summary of Recommendations Already Implemented continued....

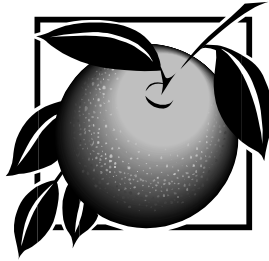
Medical, Mental Health and Substance Abuse Committee continued:

15. Assigned an Advanced Registered Nurse Practitioner to Central Booking.
16. In the process of increasing the number of Registered Nurses and Mental Health Nurses in Central Booking.
17. Addressing the development of a triage system in Central Booking.
18. Negotiating to utilize paramedics at Central Booking.

Staffing and Performance Committee:

19. Audit conducted by the American Correctional Association (ACA) and ACA will recommend national accreditation to the Commission on Accreditation for Corrections.
20. Received approval for thirty (30) additional positions in the medical unit.
21. Significantly improved recruitment efforts.
22. Significantly reduced the number of corrections officer position vacancies from eighty-nine on July 30, 2001 to five (5) on April 4, 2002
23. Significantly reduced the number of medical position vacancies from twenty-seven (27) on September 24, 2001 to thirteen (13) on March 25, 2002.
24. Hired a permanent Corrections Director.





**SUMMARY OF
COST AND
COST AVOIDANCE
PROJECTIONS**

FINAL REPORT
April 22, 2002

Summary of Cost and Cost Avoidance Projections

SUMMARY OF ISSUE

Some of the Jail Oversight Commission’s recommendations may result in additional funding requirements for the Orange County Operating and Capital Improvement budgets. However, when these recommendations are implemented, there is a high potential for future returns on investment.

SUMMARY OF COST PROJECTIONS

The Commission recommends a total of three new full-time positions (FTE) that have not already been approved and will impact future Operating Budgets, but serve to reduce jail population. Additional jail staff may be required in the Pretrial Services Unit to perform additional tasks being recommended by the Criminal Justice Case Process Committee, but that Committee is recommending further study of programs and resource requirements before appropriate manpower levels may be determined. The Commission also recommends additional funding for four (4) information systems and three (3) courtrooms that will impact the Capital Improvement Project budget, but will enhance efficiency within the jail and the criminal justice system. There will be no additional impact for manning these courtrooms, as resources will be moved from existing courthouse trial divisions. The following chart reflects additional fiscal impacts by budget year that have not already been funded:

			Fiscal Years (In Millions)						
Budget	Issue	Quantity	02/03	03/04	04/05	05/06	06/07	07-10	TOTAL
Operating Budget	FTE*	1	.035	.036	.038	.039	.041	.133	.322
Operating Budget	FTE*	2	0	.100	.104	.108	.112	.366	.790
Capital Improvement Project Budget	Courtrooms	3	0	10	0	0	0	0	10
Capital Improvement Project Budget	Information Systems	4	3.079	4.152	1	3	0	0	11.231
* Cumulative and for simplification, the average FTE salary increases at a rate of 4% per year.						GRAND TOTAL			22.343

SUMMARY OF COST AVOIDANCE PROJECTIONS

What follows is a summary of several Jail Oversight Commission (JOC) cost avoidance issues, prepared with the assistance of County and Corrections budget staff, estimating potential costs to be avoided by implementing the recommendations of the JOC’s Case Processing Committee. They are presented to illustrate the cost avoidance that can be experienced through a complete and successful implementation of the various JOC recommendations.



Summary of Cost and Cost Avoidance Projections continued....

1. Reducing the transfer time of inmates sentenced to a State corrections facility from the current average transfer time of 45 days to 7 days;
2. Savings to be realized through reducing the current average waiting time incurred by a Violation of Probation inmate before being given a meaningful hearing on his violation from the current average wait of 63 days to 30 days;
3. Savings to be realized through increasing the use of Notices to Appear for minor, misdemeanor offenders by 1,000 annually, and;
4. A summary of total cost avoidance that may be realized through implementing the JOC's case processing recommendations and those supporting recommendations of other Committees.

The JOC's Case Processing Committee's recommendations, bolstered by the Technology Committee's recommendations on the information systems necessary to implement them, have the potential of avoiding huge future costs to Orange County. A recent UCF study predicted that the inmate population would grow by approximately 69% over the current level by Fiscal Year 2004-10 if we don't make any changes to the current system. To the extent that the successful implementation of the recommendations of the JOC prevents or reduces growth in our inmate population when compared to UCF's projected inmate population, it could result in up to an estimated **\$452 million** of cumulative avoided costs between Fiscal Year 2002 and the end of Fiscal Year 2010.

ANALYSIS

Some cost avoidance may be experienced as soon as the first three recommendations listed above are implemented. Variable per diem costs, those costs related to items such as food, toothpaste, soap, inmate uniforms, and certain medical costs are avoided for every reduction in the inmate population. Corrections staff estimates the variable per diem costs at the Jail at **\$6.99 per day**. As shown in the analysis which follows, the first three recommendations listed above could result in reducing inmate days in the Jail by as many as 256,091 days per year (the equivalent of 702 beds). That reduction, when an additional **\$120,000** in Booking costs are also deducted, would lead to the avoidance of as much as **\$1.9 million per year** in variable per diem costs beginning as soon as the JOC's recommendations are implemented.

Furthermore, as previously noted, the current design capacity of the Orange County Jail system is 3,426 inmates. The Orange County Corrections Department has reported that the Jail can be safely operated at 15% above the design capacity, leading to a maximum safe operational capacity of 3,940. Crowding above that number subjects the Jail to the possibility of a successful civil rights lawsuit seeking the court ordered mandatory release of inmates. Until very recently, the average daily inmate population of the Orange County Jail was 4,239 inmates, putting it 24% above its design capacity and 9% above its maximum safe operational capacity on any given day.

The Orange County Jail's current \$95 million expansion, scheduled to be completed in 2004, will raise the Jail's design capacity to 4,446 beds and its maximum safe operational capacity to 5,113 beds. Credible local academic studies, however, conservatively project the County's inmate population to grow to as many as 7,000 inmates by 2010, putting the Jail 1,887 beds above its maximum safe operational capacity within only six years of completing the current expansion if



Summary of Cost and Cost Avoidance Projections continued....

current case processing practices remain unchanged. If the projected growth rate in the Jail's population is accurate, the Jail will exceed its maximum safe operating capacity by as early as 2005, and will be 1,887 inmates over its safe operating capacity by 2010. Thus, County government will face a difficult decision in only three years: either embark upon another costly expansion estimated to cost \$2.56 million annually in capital improvement costs at the current construction cost of \$38,843 per bed, or force a change in case processing practices. The alternative is the potential court ordered release of inmates due to overcrowding.

In summary, the complete and successful implementation of the JOC's recommendations has the potential for avoiding up to **\$452 million** in operational and capital costs over an eight-year period. It must be pointed out, however, that projections of this nature become increasingly less reliable as they project further into the future.

In terms of projecting cost avoidance, it is necessary to calculate three different figures.

1. To determine potential savings tied to relatively small reductions in the jail population, one must determine the "variable" costs that can be saved from measures which reduce the jail's actual population, but not sufficiently to close any of the existing facilities. That dollar value is relatively small, since it anticipates that the reductions would not result in closing any jails, laying off personnel, avoiding things like utilities costs, maintenance of buildings and equipment, etc. However, it does mean that the inmates removed from the population, even if only one at a time, will not eat the food, need jail uniforms, soap, toothpaste, shoes or the full range of medical services. County staff estimate those savings amount to: **\$6.99 per inmate, per day (the variable per diem cost)**.
2. The long-term, fully loaded cost per diem that includes fixed and variable costs to the County, including such things as utilities, payroll, indirect countywide costs (everything from the cost of the personnel office to maintaining the buildings) and insurance. County staff calculated the per diem cost for Fiscal Year 2000/2001 at: **\$68.73**. It should be noted that the inclusion of countywide indirect costs has not been in previous calculations of the jail's per diem, nor is it common to do so in other counties. It is included here to demonstrate the overall costs to the county. This per diem figure should not be used when making cost comparisons with other correctional facilities.
3. Finally, the cost of future construction of as-yet-unplanned jail facilities must be considered. County staff, utilizing figures currently being realized in the Phase 1 expansion, estimate that the per-bed cost of a future jail would be at least \$38,843, multiplied by the Southern Building Code Congress International estimate of construction cost inflation of 1.9% per year from today. For instance, a jail built two years from now would be priced at **\$38,843*** plus \$738 (1.9% of \$38,843), compounded once more the second year, for a total cost of **\$40,333**. Then, because the building has a projected life span of 30 years, the cost would be amortized over 30 years, yielding an annualized cost per bed of: **\$1,344.44**.

* This figure is based on Phase 1 of the Corrections Department expansion currently underway, which consists of 2-story construction and predominantly medium security dormitories. Future per-bed costs may be significantly higher if high-rise construction is required or if a greater proportion of high security beds is required in a future project than are in Phase 1 of the current project.



Summary of Cost and Cost Avoidance Projections continued....

It must be noted that all the cost avoidance calculations that follow are based on complete and successful implementation of case processing changes that fully achieve the effects intended. Those effects are to reduce inmate days served in the Orange County Jail to a rate that would preclude the necessity of building additional beds between 2002 and 2010. The longer the need for additional beds is forestalled, the higher the cost avoidance becomes. Even if additional beds are eventually needed, if the bed need is held below the bed need projected by the UCF study, significant costs may still be avoided.

The chart below addresses three specific opportunities for cost avoidance. Please note that in addition to recommending that Judges hold VOP hearings within 30 days, the Committee recommended that Judges set bonds for VOP cases. The following analysis of setting VOP bonds, indicates that further costs may be avoided:

Variable per diem Cost Avoidance of Expedited DOC Transfers	
\$6.99	Variable per diem cost
45	Average number of days to DOC transfer
7	Target number of days to DOC transfer
1,400.00	Number of inmates, without other holds, sentenced to DOC in 2001
\$440,370	Annual cost for 45 day average DOC transfer
\$68,502	Annual cost for 7 day average DOC transfer
\$371,868	Annual cost avoidance available
Variable per diem Cost Avoidance of Expedited VOP Hearings	
\$6.99	Variable per diem cost
63	Average number of days to VOP hearings in 2001
30	Target number of days to VOP hearings
5,827	Number of probation violators with no other holds in 2001
\$2,566,036	Annual cost for average 63 days to VOP hearing in 2001
\$1,221,922	Annual cost for average 30 days to VOP hearing
\$1,344,114	Annual cost avoidance available
Annual Cost Avoidance of Increased Notices to Appear	
\$120	Cost of Booking
1,000	Annual increase in NTAs
\$120,000	Annual cost avoidance of Booking costs
1,000	Annual increase in NTAs
10.6	Average days stay of misdemeanor offenders
10,600.00	Annual number of potential bed day savings
\$74,094	Annual cost avoidance tied to increase use of NTAs
\$194,094	Total annual cost avoidance from increase use of NTAs
\$1,910,076	Total annual cost avoidance from Case Processing

The University of Central Florida Phase I study on page 205 states “Almost 75% of the inmates who posted bond did so within one day of their arrest.” The study also states that, “63% of the inmates were released within 72 hours of being booked into the jail.” Using the conservative 63% of inmates making bond within 72 hours, would mean 3,671 inmates with VOP bonds would make bond within 72 hours, thereby avoiding 27 days of incarceration each.



Summary of Cost and Cost Avoidance Projections continued....

The charts on this page indicate:

- The annual operating cost utilizing the population forecast if changes are not made in case processing;
- The annual operating cost utilizing the population forecast if recommendations are fully implemented; and
- A summary of projected operating cost avoidance if recommendations are fully implemented.

ANNUAL OPERATING COST UTILIZING UCF POPULATION FORECAST IF NO CHANGES IN CASE PROCESSING ARE MADE									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Avg. Daily Population	4784	4784	5418	5735	6052	6369	6686	7000	
Fully Loaded Per Diem Operating Cost	\$74.34	\$77.31	\$80.40	\$83.62	\$86.96	\$90.44	\$94.06	\$97.82	
Annual Operating Cost	\$129,802,244	\$143,939,402	\$158,999,848	\$175,034,827	\$192,098,205	\$210,246,597	\$229,539,503	\$249,932,334	
ANNUAL OPERATING COST UTILIZING POPULATION FORECAST IF JOC CASE PROCESSING RECOMMENDATIONS ARE FULLY IMPLEMENTED									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Avg. Daily Population	4,150	4,150	4,150	4,150	4,150	4,150	4,150	4,150	
Fully Loaded Per Diem Operating Cost	\$74.34	\$77.31	\$80.40	\$86.96	\$86.96	\$90.44	\$94.06	\$97.82	
Annual Operating Cost	\$112,606,515	\$117,105,322	\$121,785,900	\$126,663,395	\$131,722,660	\$136,993,990	\$142,477,385	\$148,172,845	
SUMMARY OF PROJECTED OPERATING COST AVOIDANCE IF JOC CASE PROCESSING RECOMMENDATIONS ARE FULLY IMPLEMENTED									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Annual Operating Cost Without JOC Recommended Case Processing Changes	\$129,802,244	\$143,939,402	\$158,999,848	\$175,034,827	\$192,098,205	\$210,246,597	\$229,539,503	\$249,932,334	
Annual Operating Cost With Full Implementation of Recommended Case Processing Changes	\$112,606,515	\$117,105,322	\$121,785,900	\$126,663,395	\$131,722,660	\$136,993,990	\$142,477,385	\$148,172,845	
Annual Savings (Difference)	\$ 17,195,729	\$ 26,835,000	\$ 37,213,948	\$ 48,371,432	\$ 60,375,545	\$ 73,252,607	\$ 87,062,118	\$101,759,489	

TOTAL POTENTIAL OPERATING COST SAVINGS THROUGH 2010 = \$452,065,868



Summary of Cost and Cost Avoidance Projections continued....

The table below demonstrates the costs that are likely to be experienced in Orange County if the UCF forecast of growth through year 2010 actually occurs.

- The “Average Daily Population” is projected merely as an equal distribution of population growth projected by UCF through 2010.
- The average daily population of 4,150 is the maximum that includes the current expansion.
- The next line is the per diem projection explained earlier in this document, grown at 4% per year to account for inflation and rising operational costs.
- The “Operating Costs” are computed by multiplying the per diem by the average daily population times 365 days.
- The “Capital Costs” are based on the amortized capital costs explained above. The first capital costs begin in 2005, based on the projected need for a completed 804-bed facility then. Capital costs increase in 2008 due to the projected need for an additional 1,000-bed facility needed by that year.
- The “Grand Total” is the total of operating and capital costs for each year.
- The “Difference” is the difference between the grand total (which is computed based on the population growth forecast and includes both operating and capital costs) and the operating costs projected by not exceeding maximum capacity in the inmate population once the current construction is completed. The “difference” is the potential savings from cost avoidance.

CAPITAL COSTS UTILIZING UCF POPULATION FORECAST IF NO CHANGES IN CASE PROCESSING ARE MADE									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Avg. Daily Population	4,784	5,101	5,418	5,735	6,052	6,369	6,686	7,000	
Avg. Daily Population In FY 2000/2001	4,150	4,150	4,150	4,150	4,150	4,150	4,150	4,150	
Growth in Population	634	951	1,268	1,585	1,902	2,219	2,536	2,850	
Amortized Capital Bed Cost to House Excess Population	0	0	\$1,101,480	\$1,101,480	\$1,101,480	\$2,551,480	\$2,551,480	\$2,551,480	

TOTAL POTENTIAL CAPITAL COST SAVINGS THROUGH 2010 = \$10,958,880

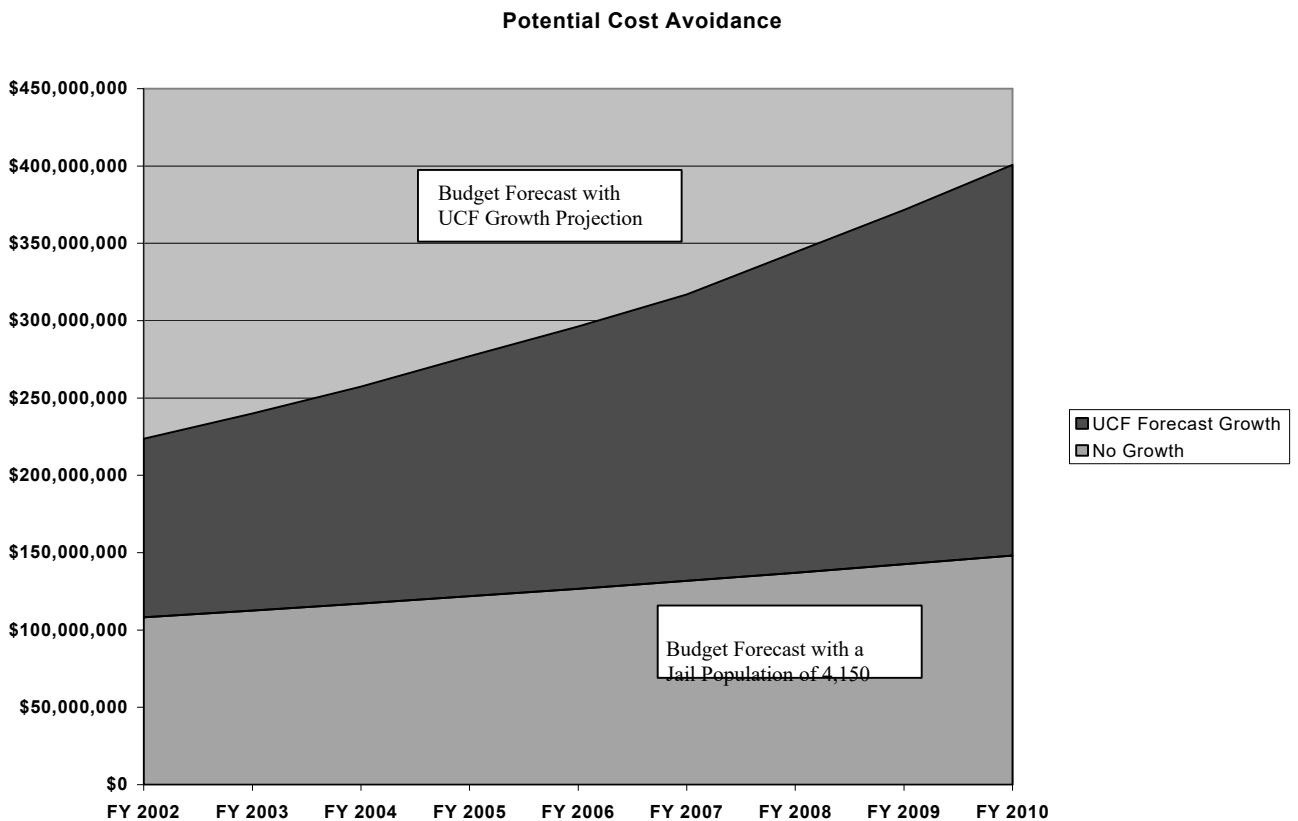


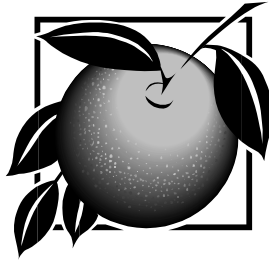
Summary of Cost and Cost Avoidance Projections continued....

Below is a graphical representation of the potential cost avoidance (shown in black) from the previous table.

It must be understood that the projected cost avoidance in the above table is based on a *total possible* cost to be avoided. The extent to which actual costs are avoided are dependent upon several variables, including:

- The extent of change in case processing actually implemented within the criminal justice system;
- The extent of change in the average length of stay in jail that is realized by the recommended changes in criminal case processing;
- The extent of change in the use of Notices to Appear in lieu of arrests in low-level misdemeanor cases;
- The extent of change in bookings in Orange County by various law enforcement agencies, and;
- The extent of change in the general population of Orange County.





COMMITTEE REPORTS

FINAL REPORT
April 22, 2002

**CRIMINAL
JUSTICE
CASE
PROCESSING
COMMITTEE**



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Mr. Ron Johnson
Orange County Criminal Justice Integrated Systems Coordinator
Committee Staff Director



Criminal Justice Case Processing Committee

I. PROCESS AND BACKGROUND INFORMATION:

The Chairman's Jail Oversight Commission Criminal Justice Case Process Committee was charged with reviewing the processing issues associated with minor offenses and the timeliness and accuracy of releases from jail, the work processes and paperwork flow issues referenced in the Central Booking and Dockets study, who is incarcerated, and the most effective means of incarceration.

The Committee met periodically over a period of seven months for open discussions on the Orange County criminal justice processes as described in Attachment 1 and internal and external issues to the Jail that affect jail population, length of inmate pre-sentence and post-sentence stays and information and paper flows. The Committee received testimony from judges from other Florida counties, The Central Florida Bondsman Association, private citizens and attorneys. Additionally, the Committee traveled to Palm Beach County to visit the county with the lowest incarceration rate per 1,000 residents of Florida's largest counties. During these visits, the Committee and staff were able to discuss and study differences in practices with Judges, prosecutors, public defenders, jail staff, Clerk of Court staff, and court staff.

In comparison to Palm Beach County, the Orange County Jail had an average population of 4,112 inmates during calendar year 2001. At 4.5 inmates per 1,000 residents, this is the highest incarceration rate of the seven largest Florida counties and exceeds the average rate of 3.4 inmates per 1,000 residents for the seven counties.

At the beginning of this Committee's study in August 2001, approximately 76% of the Jail's population was comprised of felony offenders with an average 63.1 day jail stay, 17% misdemeanor offenders with an average 11.9 day jail stay. Out of the average population of 4,100 inmates, an average of 600 inmates were incarcerated for violation of probation offenses with an average stay of 63 days, and 175 sentenced inmates were pending transfer to the Florida Department of Corrections that averaged a jail stay of 44.88 after the sentence to State Corrections had been imposed.

The Committee believes that with 65% of the jail population pending disposition of charges, in certain types of cases, alternatives to pre-trial incarceration, including bail bonds and pre-trial release programs, and earlier disposition of cases are key in controlling jail population and caseloads. However, the Committee found that in the current environment, 98-99% of the total cases plea, yet, even with an existing "Fast Track Program", approximately 50% of the total cases do not plea until the very last phase of the criminal justice process, the trial period. The Committee considered case studies that showed the timing of the negotiated plea had no bearing on the sentence imposed and in some cases pleas during trial period resulted in less severe charges and sentences. The Committee visited and studied other jurisdictions that have managed to shift the pleas for certain offenses to earlier in the process thereby saving jail bed days and reducing caseloads. These jurisdictions reported that from studying case histories,



Criminal Justice Case Processing Committee

Process and Background Information continued:

they found that certain types of cases ended with similar sentences regardless of the timing of the plea. Using experienced prosecutors and defense attorneys that are able to effect pleas at jail courtrooms, these jurisdictions are now able to dispose of about 40% of their cases by arraignment. Palm Beach County, one of these jurisdictions, is very similar to Orange County in every way except in one regard, they house approximately 50% fewer inmates than Orange County and they have the smallest rate of incarceration of the seven largest counties in Florida at approximately 2.5 inmates per 1,000 residents.

The Committee believes that having meaningful Initial Appearances and hearings at the Jail, as in the counties studied, are essential for promoting early disposition of cases and reducing inmate movement. The term “meaningful” means having counsel appointed by Initial Appearance and all parties present during proceedings. However, in the current environment, counsel is not appointed until arraignment which is most often 30 days after Initial Appearance and there are no facilities available at the Jail that would accommodate meaningful Initial Appearances or other types of court sessions.

The Committee believes that the community, law enforcement, and the Jail would be best served by having a Central Point of Access Facility for certain types of mental health and dually diagnosed individuals. The Committee also believes this facility would allow law enforcement to take individuals off the street and use this facility to re-direct the person to proper treatment, jail, or provide an order to the person to appear in court. In the current environment, law enforcement officers have two choices, take the person to jail for incarceration or leave them on the street. Also, for a variety of reasons that we cannot determine, the number of Notices to Appear has reduced substantially since 1995.

The Committee believes that how the criminal justice partners share information is also a key in being more efficient in disposing of cases. To this end, the Committee believes that the development of an Integrated Criminal Justice Information System (ICJIS) that allows criminal justice partners to efficiently share information should be a high priority for the County. However, the Committee found that in the current environment, processes are paper driven and most often linear, with the “next process” having to wait on paper before subsequent processes may continue. In this paper driven process, each agency enters data from arrest documents multiple times once it reaches their agency and this practice drains valuable resources.

The Committee believes that early identification of defendants is critical to the safety and health of the public, officers, corrections staff, officers of the court and serves to enhance efficient classification and processing of the criminal case. As importantly, accurate identification of arrested individuals is essential for public confidence in the criminal justice system, avoiding costly lawsuits by those whose identities have been improperly used and ensuring that those who are arrested on warrants are the individual who actually



Criminal Justice Case Processing Committee

Process and Background Information continued:

is accused of committing the crime. The Committee also believes that identification by fingerprint or some other form of biometric means was the most reliable method of identification. However, the Committee found that in the current environment, of the average 160 daily bookings only 40-50% of the inmates possessed any form of identification. Despite the fact that 70% of the inmates have been booked into the Orange County Jail before and there is no “quick fingerprint” method to provide positive identification.

The Chairman’s Jail Oversight Commission Criminal Case Process Committee believes that if the following recommendations are implemented, Orange County could reduce the current daily jail bed requirement by a substantial number of beds thereby saving several million dollars in the Jail’s annual operating budget and capital improvement budget by reducing the need for future jail expansions, as reported to the Committee by the cost projection summary. However, it should be noted that in order to effect these recommendations, a combined effort and change of culture of the community and the criminal justice partners must occur before the recommendations may be realized.

II. ISSUES, FINDINGS AND RECOMMENDATIONS:

1. ISSUE — FAST TRACK CASE PROCESS:

A. Findings of Fact:

Orange County has the highest incarceration rate of the seven largest counties in Florida with 4.5 inmates per thousand of population compared to 3.4 in the other counties.¹ Sixty-five (65%) of the Orange County Jail’s population is awaiting trial¹. Other jurisdictions in Florida such as Palm Beach County² and Seminole County report of disposing of up to 40% of their felony cases at arraignment³. Palm Beach County, a comparable size jurisdiction with substantially the same total number of criminal cases as Orange County, has approximately 50% less inmates in their jail.²

The Fast Track Program was created in 1996 to expedite the disposition of certain types of felony cases in an attempt to alleviate the Jail population and case loads. This program is governed by an Administrative Order⁴ that outlines the procedures and types of charges included in the program. Ninety-eight percent (98%) of felony cases in Orange County result in a guilty plea with a median number of days for disposition of 119 days⁵. Even with the Fast Track Program, forty-eight to forty-nine percent (48-49%) of Orange County cases plea during the trial period.⁵ Forty-two percent (42%) of the felony defendants remain in pre-trial custody until



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

disposition of their case.⁵ Sixty-five percent (65%) of the Jail's population or approximately 2,700 of the inmates are pending disposition of their cases.⁵

Early identification of potential plea cases may result in a cost savings in other areas. One example is in the issuance of subpoenas. During the month of May 2001 there were 21,328 subpoenas issued for the purpose of trial⁶ with 60% of this number being issued to law enforcement officers. During that same month, only sixty-eight (68) felony, misdemeanor, and criminal traffic cases were disposed by trial.⁶ During calendar year (CY) 2000, the Orange County Sheriff's Office processed 252,052 subpoenas at a cost of between \$15 to \$20 each.⁷ Based on the conservative cost of \$15 per subpoena, it cost Orange County \$3,780,780.00 during CY 2000 to process subpoenas. Other agencies are also impacted by this inefficiency: (a) during CY 2000, the Orlando Police Department spent 1.25 million dollars in salaries for witness standby⁸ (b) during CY 2000, the Orlando Fire Department spent \$48,000.00 in salaries for witness standby with no appearances in court (c) the Orange County Jail spent \$140,000.00 in salaries for witness standby with no or limited appearances of witnesses in court.

Under the existing program, Fast Track cases are set for hearings 45 days after arraignment.⁴ Reducing the Fast Track Hearing date to thirty (30) days from arraignment, as recommended, would reduce the average disposition from the current 119 days⁵ for the average fast track felony case **by 59 days.**

B. Recommendations:

1. The Committee recommends that the Administrative Order governing the Fast Track Program be amended to provide guidelines for discovery before pleas are entered.
2. The Committee recommends that trial subpoenas not be issued until after the Fast Track hearing.

C. Estimated Cost or Savings:

See Attachment 3 – Fiscal Impact Statement



Issues, Findings and Recommendations continued:

2. ISSUE — PLEAS AT INITIAL APPEARANCE:

A. Findings of Fact:

The earliest possible positive identification of the defendant ensures the proper and complete criminal history is being considered by the Court, ensures the proper medical history is being considered, and enhances the safety of law enforcement and corrections officers. Currently, approximately 40-50% of defendants arrive at the Jail with no form of identification. A “quick print” Fingerprint Identification System of the 70% of repeat offenders would allow an expeditious identification of a defendant at the Jail or other remote locations. Early identification of the defendant and assignment of the court case number are two cornerstones of the development of an integrated criminal justice information system.⁹ It is possible that the Orange County Sheriff’s Digital Photo Facial Recognition System could be used to enhance the identification of repeat offenders as well. Fiscal impacts of this recommendation are documented in the Technology Committee’s report to the Commission.

Initial Appearances are currently held once a day at 1:30 p.m. via video conferencing between the courthouse and the Jail. The Public Defender or private attorneys are not currently present in most cases for this hearing. The judge, clerk, and assistant state attorney are located at the courthouse and the defendant is located at the Jail. The brief hearing is currently only being used to establish probable cause and set bond amounts. Most of these hearings are conducted without the judge having the benefit of the defendant’s criminal history.

A defendant must be determined to be indigent in order to be represented by the Public Defender. Currently, Affidavits of Insolvency (Attachment 4) used to make a determination of indigency are completed in the trial courtrooms at arraignment 30 days after the date of the offense. Completion of this paperwork in the courtroom is a time consuming process that robs valuable time from the trial courts. Affidavits of Insolvency are needed at Initial Appearance in order for the judge to appoint the Public Defender at the beginning of the case¹⁰. Historically, 75% of defendants in Orange County are represented by the Public Defender. Early representation by a seasoned defense attorney at Initial Appearance may foster pleas at the earliest stage of the criminal justice process thereby potentially benefiting the defendant, public and the criminal justice system. A snapshot during the month of November 2001¹¹ shows that of the 702 cases disposed during the month, 185 cases plead at Initial Appearance and 401 cases were disposed at arraignment.



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

A criminal history of the defendant is needed at Initial Appearance in order for the Judge to make an informed decision regarding incarceration, eligibility for programs and conditions of release. The Palm Beach County Pre-trial Services Office completes Affidavits of Insolvency (Attachment 4), interview forms (Attachment 5), and criminal histories prior to Initial Appearances.

B. Recommendations:

1. In situations where a criminal history is available and release does not present a danger to the public, the Committee recommends that certain types of non-violent and non-victim Misdemeanor and City Ordinance cases be disposed of at Initial Appearance or at arraignment provided that (a) the defendant's rights are not violated, (b) adequate counsel is provided, (c) public safety is considered, and (d) the provisions of the United States and Florida Constitution are met. Especially in these types of cases, it is highly recommended that the Office of the State Attorney and Public Defender meet and try to exchange plea offers as early as possible.
2. The Committee recommends that the Public Defender be appointed as soon as feasible after arrest or at Initial Appearance.
3. The Committee recommends that the division and court case number be assigned as early as possible in the case process but no later than the conclusion of the Initial Appearance Hearing.
4. The Committee recommends that Jail staff be charged with the completion of the Affidavit of Insolvency and providing it to the Judge prior to Initial Appearances.
5. The Committee recommends that law enforcement provide positive identification via a fingerprint, retina scan, or facial recognition technologies, or any other accurate technology.
6. The Committee recommends that prior to operation of the new jail intake facility a single local Automated Fingerprint System be developed for the 70% of the incarcerations that are repeat offenders and that this system be integrated with the Sheriff's Facial Recognition System.
7. The Committee recommends that Corrections staff be charged with providing the inmate's criminal history to the prosecutor assigned to the case.



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

8. The Committee recommends that Initial Appearances be staffed by opposing counsel, clerk, pre-trial services staff, and probation staff.
9. The Committee recommends that once procedures are changed and space is available so that all parties may be present, that there be two Initial Appearance hearings Monday through Friday and one hearing on Saturday, Sunday, and Holidays.
10. The Committee recommends that the city prosecutor be present at Initial Appearances.
11. The Committee recommends that two attorney positions be created to provide continuity for the Initial Appearance Judge. These full time employees would be budgeted in the Court Administration's budget and work for the Chief Judge.

C. Estimated Cost or Savings:

See Attachment 3 – Fiscal Impact Statement

3. ISSUE — PRE-TRIAL HEARINGS/CONFERENCES:

A. Findings of Fact:

Some divisions of court currently have trial periods as long as three weeks. Longer trial periods increase the number of cases called and in turn require longer standby subpoena periods for witnesses, law enforcement officers, fire fighters, and corrections officers.

B. Recommendations:

1. The Committee recommends reducing the numbers of cases for each trial period by having trial periods that are no longer than 7-10 days.
2. The Committee recommends that a designated time at pre-trial hearings be set aside to take pleas.



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

3. The Committee recommends that cases represented by private attorney be set separately for pre-trial hearings/conferences.

C. Estimated Cost or Savings:

See Attachment 3 – Fiscal Impact Statement

4. ISSUE — JAIL COURTROOMS:

A. Findings of Fact:

Palm Beach County, a comparable size jurisdiction as Orange County, has two fully functional courtrooms supported with sufficient office space and staff for two full time Judges, Clerk of Court, State Attorney, Public Defender, County and State Probation, Pre-trial Services, Court Deputies, and Court Reporters.² The judges and other justice agencies in Palm Beach County contribute lower jail population partially due to having courtrooms at the jail. The Palm Beach County jail population is about one half of Orange County's with an inmate population of about 2,300 inmates.² The Palm Beach County judges have built a working relationship with all the court participants, both in and out of the courtroom, which allows them to make operational adjustments very efficiently.

Conducting meaningful Initial Appearances by having all parties present at jail courtrooms allows the judge to make early assessments regarding the defendant's mental and physical condition and request appropriate testing if deemed appropriate.

During the month of May 2001, 4,730 inmates were transported to the Orange County Courthouse.¹² As previously stated, during the same month, only sixty-eight (68) felony, misdemeanor, and criminal traffic cases were disposed by trial.⁶ In CY 2001, 57,779 inmate moves were made from the Jail to the Orange County Courthouse at an annual cost of \$671,591.00.¹²

B. Recommendation:

The Committee recommends that the new intake facility being built at the Jail include three courtrooms; two built, furnished and equipped for immediate operation and one built, but not furnished or equipped for future expansion.



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

C. Estimated Cost or Savings:

See Attachment 3 – Fiscal Impact Statement

5. ISSUE — AVERAGE TIMES TO DISPOSITION:

A. Findings of Fact:

By rule of court and by statute, when defendants are incarcerated in the Orange County Jail, they appear before a judge within 24 hours of incarceration and the State Attorney must file a criminal information with the Orange County Clerk of Court within 33 days for the defendant to remain in custody. Regarding case process, the only other statutory requirement is that a defendant be tried within 90 days if a misdemeanor and 175 days if a felony unless a defendant waives the right to speedy trial. The timeliness of all other case related hearings are determined by agreements of judges and attorneys.

The Committee acknowledged that the average number of days for currently setting hearings in felony cases is: (a) Arraignment - 47 days after arrest (b) Fast Track cases - 45 days following arraignment (c) Pre-trial Hearing – 111 days from arraignment (d) Trial - 157 days from arrest to conviction.⁵

The Committee acknowledged that the average number of days for currently setting Violation of Probation hearings is 63 days after incarceration.¹

The Committee acknowledged that the average number of days for currently setting hearings in misdemeanor cases is: (a) Arraignment – 36 days from arrest (b) Trial – 80 days from arrest to conviction.¹¹

B. Recommendations:

1. The Committee recommended the following average times be established when setting hearings in felony cases: (a) Arraignment - 30 days after arrest (b) Fast Track cases - 30 days following arraignment (c) Pre-trial Hearing - one week before trial (d) Trial - 90-120 days after arraignment.
2. The Committee recommends that Violation of Probation (VOP) hearings be held within 20-30 days of incarceration. However, VOP cases based on additional substantive charge should be continued until the new charge date.



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

3. The Committee recommends that arraignments be set within 20 days of arrest and trial within 45 days of arraignment in misdemeanor cases.

C. Estimated Cost or Savings:

See Attachment 3 – Fiscal Impact Statement

6. ISSUE — TRANSFERS TO THE STATE DEPARTMENT OF CORRECTIONS AND RECENT PROCESS RELATED STUDIES:

A. Findings of Fact:

At the time of the formation of this Committee, there were approximately 175 inmates in the Orange County Jail awaiting transfer to the State Department of Corrections (DOC).¹ Most of these inmates could not be transferred to DOC because of the Jail waiting on legal documents referred to as Commitment Packets. These legal documents are completed by the State Attorney and Clerk of Court. An average of approximately 25 inmates are being sentenced to DOC each week and approximately 15 more of these DOC sentenced inmates are on hold for various reasons. Transferring inmates with no holds to DOC within 7 days would reduce the current number of inmates pending transfer to about 40. It should be noted that due to a dedicated effort by the Judiciary, State Attorney and Clerk of Court staff since the beginning of this Commission the paperwork backlog has been eliminated and at the writing of this report there are only about 40 inmates currently pending transfer to DOC.

With approximately 45 Violation of Probation (VOP) arrests per week, there are approximately 600 inmates in the Orange County Jail who are awaiting VOP hearings.¹ Inmates currently wait an average of 63 days for VOP hearings.¹ Historically, only 20% of VOP inmates are remanded to serve their DOC jail sentence. Scheduling VOP hearings in 20-30 days would reduce the number of inmates pending hearings by approximately 174,000 jail bed days per year.

The Committee acknowledges the work and recommendations of its consultants who have prepared analyses for our consideration. The report by the Voorhis group¹³ and Dr. Bernard McCarthy of the University of Central Florida have been useful in framing the issues that helped form the Committee's recommendations.



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

B. Recommendations

1. The Committee recommends that the transfer of inmates from the County Jail to State prison be accomplished much more quickly at considerable cost savings to the County by ensuring that all paperwork necessary for an inmate's transfer be completed at the time and date the inmate's case is resolved in court. It is recommended that each circuit judge establish a policy by which all required paperwork is completed prior to the prosecutor and deputy clerk being allowed to leave the court for the particular court session. It is recommended that the courts be mindful of the fact that this paperwork must be completed and allow the clerks and prosecutor sufficient time to complete this paperwork during the applicable court session. The Judge, attorneys and court clerks should work together to accomplish the completion of this paperwork before the prosecutor and attorneys leave the courtroom for that session of court.
2. The Committee recommends that inmates sentenced to the Department of Corrections, and have no holds, be transferred within one week of sentencing.

C. Estimated Cost or Savings:

See Attachment 3 – Fiscal Impact Statement

7. ISSUE — ALTERNATIVES TO CONFINEMENT:

A. Findings of Fact:

In the current environment, regardless of the offender's offense, social status, physical or mental status, law enforcement officers currently have three choices: (a) take the person to jail, (b) issue a Notice to Appear in Court, or (c) take the person to the hospital in the case of a critical medical condition. In the case of most serious felony and violent offenders, not having a serious medical condition, public safety is the primary concern and offenders should be taken to jail regardless of their status. However, for less serious offenses, where offenders are suffering from mental illness, drug addiction, or are homeless, an additional alternative should be available to law enforcement agencies and the Orange County Jail.

As mentioned, ordering the offender to appear in court is one alternative available to law enforcement officers for minor offenses cited in the Administrative Order¹⁴ governing Notices to Appear. In CY 1995, there were 2,722 Notices to Appear



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

(NTA) issued and there were 51,913 booking that year. In CY 2000, there were only 1,782 NTAs issued and there were 58,476 bookings in that year.¹ Increasing NTAs by 1,000 to the 1995 levels would reduce bookings by 1,000 per year.

For minor offenders suffering because of social, mental or drug related conditions, the Jail, community and offender would be best served by having an alternate location where law enforcement officers could take offenders for evaluation before the person was incarcerated, released, or referred to treatment. This facility (or alternative) would be called the “Central Point of Access” and is further defined in the Medical, Mental Health and Substance Abuse Committee’s report to the Jail Oversight Commission.

A program that already exists in the County, the Crisis Intervention Program, is used to train officers in distinguishing persons with mental illnesses which allows them to defer offenders to community based programs. This program has been very successful but is limited by the number of law enforcement officers that have been trained. Training additional law enforcement officers would increase the opportunities for diversion.

The Orange County Jail has existing programs¹⁵ governed by Administrative Order¹⁶ that are aimed at providing alternatives to confinement. Other jurisdictions throughout Florida and the United States use these and other types of programs to impact jail populations and recidivism. In some jurisdictions, the court manages the Pre-trial Services Department and this proposition has been addressed by this Committee.

In the current environment, other than the charging forms, the judges presiding over Initial Appearances (IA) have limited information before them to make determinations regarding criminal history or indigency. These documents are not normally available now until the case reaches the trial courts. Preparation or generation of these documents are needed at IA so that judges can make informed decisions regarding appointment of counsel and pre-trial release of inmates.

B. Recommendations

1. The Committee recommends that the Orange County Corrections Department continue to manage Pre-trial Services and that the program and services be further evaluated to examine the development of more alternatives to confinement.
2. The Committee recommends that Corrections staff prepare an approved Jail



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

Interview Worksheet (Attachment 5 as an example) and for inmates requesting appointed counsel, Affidavits of Insolvency (Attachment 4) prior to Initial Appearance.

3. The Committee recommends that the Pre-trial Service Unit determine risk and needs of a new inmate and that the Administrative Order governing pre-trial release programs be amended to include the mentally ill.
4. The Committee recommends that, in accordance with the Rules of Judicial Administration which requires the Chief Judge to monitor jail populations, a Jail Population Coordinator position be created to monitor and report cases to the Chief Judge that are incarcerated beyond normal standards. Further, that this person shall report to the Criminal Justice Coordinator.
5. The Committee recommends that the Bond Review Committee reconvene and update the standard bond schedule based on recommendations of the Jail Oversight Commission.
6. The Committee recommends that local law enforcement agencies encourage the issuance of Notices to Appear for cases allowed by Administrative Order.
7. The Committee recommends that, within the purview of section 3.131 (d) of the Rules of Criminal Procedure, the Chief Judge amend the Administrative Order regarding Bond Hearings (in felony cases where an information is filed and jurisdiction is divested of the county court) to provide that bond hearings will be conducted by an appropriate judicial officer at the same date and time set by the judicial officer who previously had jurisdiction of a felony case, so long as notice is served on the prosecutor at least 24 hours prior to the scheduled hearing.
8. The Committee recommends that judges of the Ninth Judicial Circuit for Orange County be asked to set Violation of Probation bonds in felony and misdemeanor cases at the time the warrant was signed.
9. The Committee recommends that more community based social service treatment/assistance programs be developed and that law enforcement officers have the option of taking a defendant to these organizations in lieu of jail.
10. The Committee recommends that a Central Point of Access Facility be established.



Criminal Justice Case Processing Committee

Issues, Findings and Recommendations continued:

11. The Committee recommends expansion of the Crisis Intervention Training Program by training additional law enforcement officers.
12. The Committee recommends that bond hearings before a Circuit Court Judge at the time of signing a warrant will be set and heard within five working days of the filing and serving of the motion.
13. The Committee recommends that the issue of free phones for access to bail bondsman and defense attorneys be studied.
14. The Committee recommends that the County continue to study the issue of conditional bonds in partnership with the judiciary, Corrections staff and the private surety bail industry.

C. Estimated Cost Savings:

See Attachment 3 – Fiscal Impact Statement

III. RECOMMENDATIONS THAT HAVE ALREADY BEEN IMPLEMENTED:

Reduced jail population from an average daily population of 4,239 in 2000 to a population of 3,595 on April 16, 2002 due in part to more timely case processing and transfers to the State Department of Corrections.

IV. ATTACHMENTS:

1. *Attachment 1* – Definitions
2. *Attachment 2* – Criminal Case Process Flow
3. *Attachment 3* – Fiscal Impact Statement
4. *Attachment 4* – Affidavit of Insolvency
5. *Attachment 5* – Palm Beach County Interview Forms



ATTACHMENT 1

Definitions

Accused – The name for the defendant in a criminal case.

Adjudication – Giving or pronouncing a judgment or decree, or the rendering of a decision on a matter before a court.

Affidavit – A written and sworn statement witnessed by a notary public or another official possessing the authority to administer oaths.

Arraignment - Procedure whereby the accused pleads to the criminal charge against him in the indictment or information, and the trial date or future proceedings are scheduled.

Arrest – To deprive a person of his liberty by legal authority.

Bail – In criminal cases, a sum of money posted by or on behalf of a defendant to guarantee his appearance in court after being released from jail.

Bail bond – An obligation signed by the defendant, with sureties, to secure his/her presence in court.

Bail bondsman – A person who posts bail in exchange for a fee, usually 10 percent of the total bail.

Charge – The statement accusing a person of committing a particular crime. Also the judge's instructions to jury on its duties, on the law involved in the case and on how the law in the case must be applied. The charge is always given just before jury deliberations.

Clerk of the Court – Court official who keeps court record, files pleadings, motions, and judgment, and administers the oath to juror and witnesses.

Conditional release – A release from custody, which imposes regulations on the activities and associations of the defendant. If a defendant fails to meet the conditions, the release is revoked.

Continuance – A court order postponing proceedings.



Criminal Justice Case Processing Committee

Attachment 1 – Definitions continued:

Conviction – In a criminal case, a finding that the defendant is guilty.

Costs – An allowance for expenses in prosecuting or defending a suit. Ordinarily this does not include attorney fees.

Criminal case – A case brought by the government against a person accused of committing a crime.

Criminal summons – An order commanding an accused to appear in court.

Custody – The care and control of a thing or person.

Defendant – The accused in a criminal case.

Discovery – The process through which parties to an action are allowed to obtain relevant information known to other parties or nonparties before trial.

Disposition – The order of a juvenile court determining what is to be done with a minor already adjudged to be within the court’s jurisdiction. In criminal cases, the settlement of a case.

Docket – The brief entry or the book containing such entries of any proceeding in court.

Fast track – A procedure which permits an early plea in nonviolent non-victim defendants.

Felony – A crime punishable by death or imprisonment for a term of not less than one year, and the crime is of a more serious nature than a misdemeanor.

Guilty – Formal admission in court as to guilt of having committed the criminal act charged which a defendant may make if he or she does so intelligently and voluntarily; i.e., accused can only make such plea after he or she has been fully advised of rights and the court has determined that the accused understands such rights and is making the plea voluntarily.

Incarceration – Imprisonment; confinement in a jail or penitentiary.

Indigent – In a general sense, one who is needy and poor, or one who has not sufficient property to furnish him a living nor anyone able to support him to whom he is entitled to look for support. Term commonly used to refer to one’s financial ability, and ordinarily indicates one who is destitute of means of comfortable subsistence so as to be in want. Indigency is



Criminal Justice Case Processing Committee

Attachment 1 – Definitions continued:

now determined according to the Federal Poverty Guidelines.

Information – The formal charging document filed by a prosecutor.

Jurisdiction – The legal authority of a crime to hear a case or conduct other proceedings; power of the court over persons involved in a case and the subject matter of the case.

Misdemeanor – Offenses lower than felonies and those punishable by fine, penalty, forfeiture or imprisonment in the county jail.

Offender – Commonly used in statutes to indicate person implicated in the commission of a crime.

Plea – The defendant’s formal response to a criminal charge (guilty, not guilty, nolo contendere, not guilty by reason of insanity, and guilty and mentally ill).

Plea bargaining — A process whereby the prosecutor and defense attorney negotiate a mutually satisfactory disposition of the case. The court and the defendant must approve of any settlements.

Pleading – The formal allegation by the parties to a law suit with the intended purpose being to provide notice of what is to be expected at trial.

Pre-trial conference (hearing) — A court proceeding to determine the progress and status of a case for plea or trial purposes, usually held one to two weeks prior to the scheduled trial date.

Probable cause – Evidence that tends to prove that a crime was committed and that a certain person committed that crime.

Public Defender – A constitutional officer elected to represent indigent Defendants in criminal matters.

Restraint – Confinement, abridgment, or limitation. Prohibition of action; holding or pressing back from action.

Subpoena – A subpoena is a command to appear at a certain time and place to give testimony upon a certain matter.



Criminal Justice Case Processing Committee

Attachment 1 – Definitions continued:

Warrant — A written order issued and signed by a judge or magistrate which allows the police to search a place and seize specified items found there (search warrant), or to arrest or detain a specified person (arrest warrant).



ATTACHMENT 2

CRIMINAL CASE PROGRESS FLOW

1. **Arrest or charging affidavit** with probable cause order.
2. **Initial appearance.** This is held within 24 hours of defendant's arrest. Defendant is advised of bond amount and temporarily appointed a public defender for bond purposes. Probable cause for the arrest is determined by the judge at this proceeding.
3. **Prosecution.** The case remains open until the State Attorney's Office makes a decision on the prosecution of the case. This is done by the filing of:
 - a. an Information - the formal charging document.
 - b. an Indictment by the grand jury or
 - c. a No Information notice - the State dropping or refusing prosecution of the case.
4. **Arraignment.** Once an information or indictment is filed, the case is set for arraignment. At arraignment future court dates are given and defense counsel is determined. (Determination of Counsel, Determination of New Trial Date or Endorsed Bonds are also set on the arraignment dockets.)
5. **Fast track plea (FTP).** Some felony cases are given fast track plea dates. The State indicates on the information if the case qualifies as a fast track plea. Generally, the charges in these cases are grand theft, worthless check, possession of drugs and most 3rd degree felony cases. FTP cases are set 30 days prior to the trial period and 45 days from the arraignment date. The State does not issue trial subpoenas or send drugs for testing until after the FTP date. On the day the FTP is scheduled, the defendant has the option of accepting an early plea offer or "opting out" of the fast track program. If the defendant opts out, he/she will move onto the next court dates.
6. **Pre-trial Hearing.** Status of case/preparedness for trial is determined.
7. **Trial.** When called for trial, the case will be disposed of by either a jury/non-jury trial or plea. Sentencing may be set off for a specific amount of time to be determined by the judge. Without a waiver by defense, a case must be tried within 180 days from arrest.

Please note: If the defendant fails to appear for the above referenced court appearances numbered 4-7, the case progress begins over again, beginning with the arraignment.



ATTACHMENT 3
FISCAL IMPACT STATEMENT

What follows is a summary of several Jail Oversight Commission (JOC) cost avoidance issues, prepared with the assistance of County and Corrections budget staff, estimating potential savings to be gained by implementing the recommendations of the JOC's Case Processing Committee. They are presented to illustrate the cost avoidance that can be experienced through a complete and successful implementation of the various JOC recommendations.

1. Reducing the transfer time of inmates sentenced to a State corrections facility from the current average transfer time of 45 days to 7 days;
2. Savings to be realized through reducing the current average waiting time incurred by a Violation of Probation inmate before being given a meaningful hearing on his violation from the current average wait of 63 days to 30 days;
3. Savings to be realized through increasing the use of Notices to Appear for minor, misdemeanor offenders by 1,000 annually, and;
4. A summary of total cost avoidance that may be realized through implementing the JOC's case processing recommendations and those supporting recommendations of other sub-committees.

The JOC's Case Processing Committee's recommendations, bolstered by the Technology Committee's recommendations on the information systems necessary to implement them, have the potential of avoiding huge future costs to Orange County. A recent UCF study predicted that the inmate population would grow by approximately 69% over the current level by fiscal year 2004-10 if we don't make any changes to the current system. To the extent that the successful implementation of the recommendations of the JOC prevents or reduces growth in our inmate population when compared to UCF's projected inmate population, it could result in up to an estimated **\$452 million** of cumulative avoided costs between fiscal year 2002 and the end of fiscal year 2010.

ANALYSIS

Some cost avoidance may be experienced as soon as the first three recommendations listed above are implemented. Variable per diem costs, those costs related to items such as food, toothpaste, soap, inmate uniforms, and certain medical costs are avoided for every reduction in the inmate population. Corrections staff estimates the variable per diem costs at the jail at **\$6.99 per day**. As shown in the analysis which follows, the first three recommendations listed above could result in reducing inmate days in the Jail by as many as 256,091 days per year (the equivalent of 702 beds). That reduction, when an additional **\$120,000** in Booking costs are also deducted, would lead to the avoidance of as much as **\$1.9 million per year** in variable per diem costs beginning as soon as the JOC's recommendations are implemented.



Criminal Justice Case Processing Committee

Attachment 3 – Fiscal Impact Statement continued:

Furthermore, as previously noted, the current design capacity of the Orange County Jail system is 3,426 inmates. The Orange County Corrections Department has reported that the Jail can be safely operated at 15% above the design capacity, leading to a maximum safe operational capacity of 3,940. Crowding above that number subjects the jail to the possibility of a successful civil rights lawsuit seeking the court ordered mandatory release of inmates. Until very recently, the average daily inmate population of the Orange County Jail was 4,239 inmates, putting it 24% above its design capacity and 9% above its maximum safe operational capacity on any given day.

The Orange County Jail's current \$95 million expansion, scheduled to be completed in 2004, will raise the Jail's design capacity to 4,446 beds and its maximum safe operational capacity to 5,113 beds. Credible local academic studies, however, conservatively project the County's inmate population to grow to as many as 7,000 inmates by 2010, putting the Jail 1,887 beds above its maximum safe operational capacity within only six years of completing the current expansion if current case processing practices remain unchanged. If the projected growth rate in the Jail's population is accurate, the Jail will exceed its maximum safe operating capacity by as early as 2005, and will be 1,887 inmates over its safe operating capacity by 2010. Thus, County government will face a difficult decision in only three years: either embark upon another costly expansion estimated to cost \$2.56 million annually in capital improvement costs at the current construction cost of \$38,843 per bed, or force a change in case processing practices. The alternative is the potential court ordered release of inmates due to overcrowding.

In summary, the complete and successful implementation of the JOC's recommendations has the potential for avoiding up to **\$452 million** in operational and capital costs over a eight-year period. It must be pointed out, however, that projections of this nature become increasingly less reliable as they project further into the future.

In terms of projecting cost avoidance, it is necessary to calculate three different figures.

1. To determine potential savings tied to relatively small reductions in the jail population, one must determine the "variable" costs that can be saved from measures which reduce the jail's actual population, but not sufficiently to close any of the existing facilities. That dollar value is relatively small, since it anticipates that the reductions would not result in closing any jails, laying off personnel, avoiding things like utilities costs, maintenance of buildings and equipment, etc. However, it does mean that the inmates removed from the population, even if only one at a time, will not eat the food, need jail uniforms, soap, toothpaste, shoes or the full range of medical services. County staff estimate those savings amount to: **\$6.99 per inmate, per day (the variable per diem cost).**
2. The long-term, fully loaded cost per diem that includes fixed and variable costs to the County, including such things as utilities, payroll, indirect countywide costs (everything from the cost



Criminal Justice Case Processing Committee

Attachment 3 – Fiscal Impact Statement continued:

of the personnel office to maintaining the buildings) and insurance. County staff calculated the per diem cost for Fiscal Year 2000/2001 at: **\$68.73**. It should be noted that the inclusion of countywide indirect costs has not been in previous calculations of the jail's per diem, nor is it common to do so in other counties. It is included here to demonstrate the overall costs to the county. This per diem figure should not be used when making cost comparisons with other correctional facilities.

3. Finally, the cost of future construction of as-yet-unplanned jail facilities must be considered. County staff, utilizing figures currently being realized in the Phase 1 expansion, estimate that the per-bed cost of a future jail would be at least \$38,843, multiplied by the Southern Building Code Congress International estimate of construction cost inflation of 1.9% per year from today. For instance, a jail built two years from now would be priced at **\$38,843*** plus \$738 (1.9% of \$38,843), compounded once more the second year, for a total cost of **\$40,333**. Then, because the building has a projected life span of 30 years, the cost would be amortized over 30 years, yielding an annualized cost per bed of: **\$1,344.44**.

It must be noted that all the cost avoidance calculations that follow are based on complete and successful implementation of case processing changes that fully achieve the effects intended. Those effects are to reduce inmate days served in the Orange County Jail to a rate that would preclude the necessity of building additional beds between 2002 and 2010. The longer the need for additional beds is forestalled, the higher the cost avoidance becomes. Even if additional beds are eventually needed, if the bed need is held below the bed need projected by the UCF study, significant costs may still be avoided.

The chart on the following page addresses three specific opportunities for cost avoidance. Please note that in addition to recommending that Judges hold VOP hearings within 30 days, the committee recommended that Judges set bonds for VOP cases. The following analysis of setting VOP bonds, indicates that further costs may be avoided:

The University of Central Florida Phase I study on page 205 states "Almost 75% of the inmates who posted bond did so within one day of their arrest." The study also states that, "63% of the inmates were released within 72 hours of being booked into the jail." Using the conservative 63% of inmates making bond within 72 hours, would mean 3,671 inmates with VOP bonds would make bond within 72 hours, thereby avoiding 27 days of incarceration each.

* This figure is based on Phase 1 of the Corrections Department expansion currently underway, which consists of 2-story construction and predominantly medium security dormitories. Future per-bed costs may be significantly higher if high-rise construction is required or if a greater proportion of high security beds is required in a future project than are in Phase 1 of the current project.



Criminal Justice Case Processing Committee

Attachment 3 – Fiscal Impact Statement continued:

Variable per diem Cost Avoidance of Expedited DOC Transfers	
\$6.99	Variable per diem cost
45	Average number of days to DOC transfer
7	Target number of days to DOC transfer
1,400.00	Number of inmates, without other holds, sentenced to DOC in 2001
\$440,370	Annual cost for 45 day average DOC transfer
\$68,502	Annual cost for 7 day average DOC transfer
\$371,868	Annual cost avoidance available
Variable per diem Cost Avoidance of Expedited VOP Hearings	
\$6.99	Variable per diem cost
63	Average number of days to VOP hearings in 2001
30	Target number of days to VOP hearings
5,827	Number of probation violators with no other holds in 2001
\$2,566,036	Annual cost for average 63 days to VOP hearing in 2001
\$1,221,922	Annual cost for average 30 days to VOP hearing
\$1,344,114	Annual cost avoidance available
Annual Cost Avoidance of Increased Notices to Appear	
\$120	Cost of Booking
1,000	Annual increase in NTAs
\$120,000	Annual cost avoidance of Booking costs
1,000	Annual increase in NTAs
10.6	Average days stay of misdemeanor offenders
10,600.00	Annual number of potential bed day savings
\$74,094	Annual cost avoidance tied to increase use of NTAs
\$194,094	Total annual cost avoidance from increase use of NTAs
\$1,910,076	Total annual cost avoidance from Case Processing



Attachment 3 – Fiscal Impact Statement continued:

The charts on this page indicate:

- The annual operating cost utilizing the population forecast if changes are not made in case processing;
- The annual operating cost utilizing the population forecast if recommendations are fully implemented; and
- A summary of projected operating cost avoidance if recommendations are fully implemented.

ANNUAL OPERATING COST UTILIZING UCF POPULATION FORECAST IF NO CHANGES IN CASE PROCESSING ARE MADE									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Avg. Daily Population	4784	4784	5418	5735	6052	6369	6686	7000	
Fully Loaded Per Diem Operating Cost	74.34	\$77.31	\$80.40	\$83.62	\$86.96	90.44	94.06	97.82	
Annual Operating Cost	\$129,802,244	\$143,939,402	\$158,999,848	\$175,034,827	\$192,098,205	\$210,246,597	\$229,539,503	\$249,932,334	

ANNUAL OPERATING COST UTILIZING POPULATION FORECAST IF CASE PROCESSING RECOMMENDATIONS ARE FULLY IMPLEMENTED									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Avg. Daily Population	4,150	4,150	4,150	4,150	4,150	4,150	4,150	4,150	
Fully Loaded Per Diem Operating Cost	74.34	\$77.31	\$80.40	\$86.96	\$86.96	90.44	94.06	97.82	
Annual Operating Cost	\$112,606,515	\$117,105,322	\$121,785,900	\$126,663,395	\$131,722,660	\$136,993,990	\$142,477,385	\$148,172,845	

SUMMARY OF PROJECTED OPERATING COST AVOIDANCE IF CASE PROCESSING RECOMMENDATIONS ARE FULLY IMPLEMENTED									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Annual Operating Cost Without JOC Recommended Case Processing Changes	\$129,802,244	\$143,939,402	\$158,999,848	\$175,034,827	\$192,098,205	\$210,246,597	\$229,539,503	\$249,932,334	
Annual Operating Cost With Full Implementation of Recommended Case Processing Changes	\$112,606,515	\$117,105,322	\$121,785,900	\$126,663,395	\$131,722,660	\$136,993,990	\$142,477,385	\$148,172,845	
Annual Savings (Difference)	\$ 17,195,729	\$ 26,835,000	\$ 37,213,948	\$ 48,371,432	\$ 60,375,545	\$ 73,252,607	\$ 87,062,118	\$ 101,759,489	

TOTAL POTENTIAL OPERATING COST SAVINGS THROUGH 2010 = \$452,065,868



Attachment 3 – Fiscal Impact Statement continued:

The table above demonstrates the costs that are likely to be experienced in Orange County if the UCF forecast of growth through year 2010 actually occurs.

- The “Average Daily Population” is projected merely as an equal distribution of population growth projected by UCF through 2010.
- The average daily population of 4,150 is the maximum that includes the current expansion.
- The next line is the per diem projection explained earlier in this document, grown at 4% per year to account for inflation and rising operational costs.
- The “Operating Costs” are computed by multiplying the per diem by the average daily population times 365 days.
- The “Capital Costs” are based on the amortized capital costs explained above. The first capital costs begin in 2005, based on the projected need for a completed 804-bed facility then. Capital costs increase in 2008 due to the projected need for an additional 1,000-bed facility needed by that year.
- The “Grand Total” is the total of operating and capital costs for each year.
- The “Difference” is the difference between the grand total (which is computed based on the population growth forecast and includes both operating and capital costs) and the operating costs projected by not exceeding maximum capacity in the inmate population once the current construction is completed. The “difference” is the potential savings from cost avoidance.

CAPITAL COSTS UTILIZING UCF POPULATION FORECAST IF NO CHANGES IN CASE PROCESSING ARE MADE									
	02/03	03/04	04/05	05/06	06/07	07/08	08/09	09/10	
Avg. Daily Population	4,784	5,101	5,418	5,735	6,052	6,369	6,686	7,000	
Avg. Daily Population in FY 2000/2001	4,150	4,150	4,150	4,150	4,150	4,150	4,150	4,150	
Growth in Population	634	951	1,268	1,585	1,902	2,219	2,536	2,850	
Amortized Capital Bed Cost to House Excess Population	0	0	\$1,101,480	1,101,480	1,101,480	\$2,551,480	\$2,551,480	\$2,551,480	

TOTAL POTENTIAL CAPITAL COST SAVINGS THROUGH 2010 = \$10,958,880



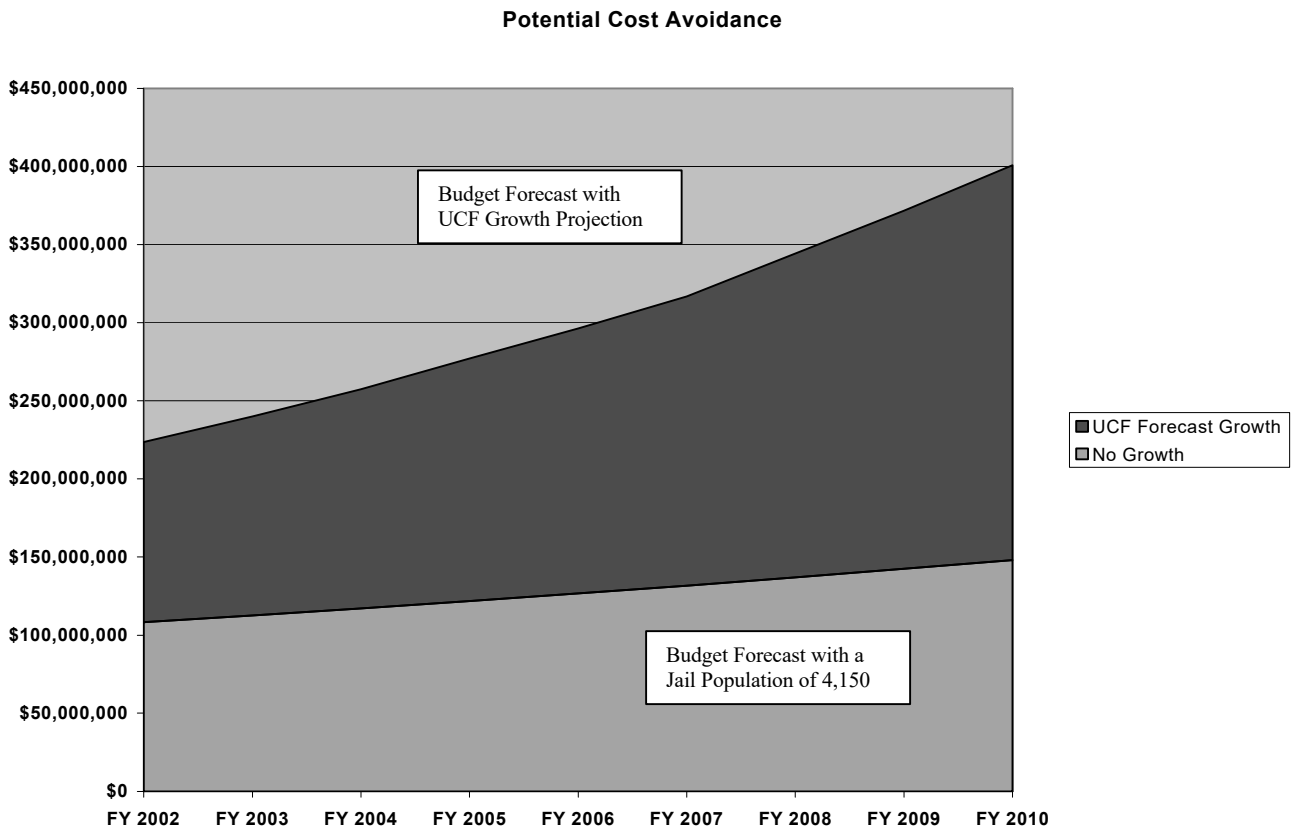
Criminal Justice Case Processing Committee

Attachment 3 – Fiscal Impact Statement continued:

Below is a graphical representation of the potential cost avoidance (shown in black) from the previous table.

It must be understood that the projected cost avoidance in the above table is based on a *total possible* cost to be avoided. The extent to which actual costs are avoided are dependent upon several variables, including:

- The extent of change in case processing actually implemented within the criminal justice system;
- The extent of change in the average length of stay in jail that is realized by the recommended changes in criminal case processing;
- The extent of change in the use of Notices to Appear in lieu of arrests in low-level misdemeanor cases;
- The extent of change in bookings in Orange County by various law enforcement agencies, and;
- The extent of change in the general population of Orange County.



Criminal Justice Case Processing Committee

ATTACHMENT 4

STATE OF FLORIDA
Plaintiff,
vs.

IN THE CIRCUIT/COUNTY COURT IN AND FOR
ORANGE COUNTY, FLORIDA
CASE NO. _____

Defendant.

AFFIDAVIT OF INSOLVENCY

(Promulgated by Attorney General pursuant to Florida Statute 27.52)

STATE OF FLORIDA
COUNTY OF ORANGE

I, _____, being first duly sworn, depose and make under oath the following statement regarding my age, marital status, dependants, bail and financial status.

I. Age _____ Marital Status _____ Married _____ Single _____ Divorced _____ Separated

If Minor, Names and address of parents:

Name _____ Address _____

Name _____ Address _____

Number of dependants, if any: _____ List all dependants (if additional space is needed, use back of form)

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

II. Release on bail? Yes _____ No _____ Amount of Bail \$ _____

III. Financial status:

(1) Gross income either per week \$ _____ or bi-weekly \$ _____ or monthly \$ _____

(2) Amount of cash that I own \$ _____

(3) Value of real estate (home, lot, etc) which I own, have an equity in or have expectancy of an interest in: \$ _____

(4) Value of Personal Property, tangible or intangible (automobile, motorcycle, boat, stocks, bonds, notes, etc which I own, have equity in, or have the expectancy of an interest in \$ _____

(5) Amount of debts presently owed by me \$ _____

(6) Amount of debts that might be incurred because of illness or misfortune within my family \$ _____

IV. I understand that if I am found guilty or plead guilty or nolo contendere, a hearing will be held at the time of sentencing during which the Court will determine the value of the appointed attorney's fees and costs. (not to exceed the maximum amount set by law); that I will be given an opportunity to be heard on this matter, that my appointed attorney will not represent me in this matter; and that if the Court finds I will be able to pay the fee and costs in the future, the Court will order me to pay them and also enter a final judgment which will create a lien on any property I might acquire until I have paid them in full, or for 20 years whichever shall occur first.

FILED IN OPEN COURT

this _____ day of _____, 19 _____

DEPUTY CLERK OF COURT

AFFIANT

Sworn to and subscribed before me this _____

of _____, 19 _____

CORRECTIONS OFFICER or NOTARY PUBLIC/DEPUTY CLERK

ORDER APPOINTING COUNSEL

Based on the foregoing, defendant is adjudged insolvent and _____ Public Defender, I North Orange Avenue, Suite 500, Orlando, Florida, 32801 - Phone(407) 836-2162; _____ Member of Orange County Bar Association

Address: _____ Florida, _____ telephone, is appointed to represent the defendant in these proceedings. If on bond, defendant shall phone the attorney's office within three (3) working days for an appointment if one has not already been made. If defendant is in jail, a representative of the attorney's office shall visit defendant within a reasonable time.

DONE AND ORDERED this _____ day of _____, 19 _____

28-16(5/92) cc: Defendant, Appointed Attorney,

JUDGE



Criminal Justice Case Processing Committee

Attachment 4 - Affidavit of Insolvency continued:

CIRCUIT COURT NINTH JUDICIAL
CIRCUIT ORANGE COUNTY, FLORIDA
JUVENILE DIVISION _____
CASE NO. JU _____

IN THE INTEREST OF:

a child.

APPLICATION FOR APPOINTED LEGAL COUNSEL, AFFIDAVIT AND ORDER

The named child, being first duly sworn, says:

1. I understand that a delinquency complaint has been filed against me, and, being advised of my right to be represented by an attorney, I now request that the Court appoint an attorney to represent me.
2. I do not have sufficient money, property or assets of any kind with which to hire an attorney.
3. I have been informed that if I am found guilty of an act of delinquency, a lien for the value of the legal services rendered to me by the Public Defender or other Court appointed attorney may be imposed by law against any property I now or may hereafter have in this State, not to exceed the amount provided by law, and that I may be ordered to pay such lien as a condition of a Community Control (probation) program.

Sworn to and subscribed before me
this _____ day of _____, 19____.

Deputy Clerk

Child

The undersigned parent(s) of the named child are unable to or refuse to hire an attorney to represent the child and have been informed that a lien may be imposed against our/my property for the value of the attorney's legal services and investigative costs not to exceed the amount by law.

Parent

Parent

ORDER

The Court finds that the named child is indigent, as defined by law, and is desirous of legal counsel; it is therefore

ORDERED as follows:

1. The child is hereby adjudged to be indigent.
2. (a) The Public Defender of the 9th Judicial Circuit, 2000 E. Michigan Avenue, Suite 400, Orlando, Florida 32806, telephone 836-7580 is hereby appointed to represent said child.
- (b) _____, Attorney, _____

_____, telephone _____, is hereby appointed to represent the child. If child is not in detention, parent(s) shall, on the third working day after entry of this order, telephone said attorney's office for an appointment.

3. Parent(s) and child are hereby notified that if child is found guilty of an act of delinquency, a hearing will be held at the time of disposition to determine and assess attorney's fees and investigative costs.

DONE AND ORDERED this _____ day of _____, 19____.

Copies to: Parent(s)/Child
Public Defender
Court Appointed Attorney

CIRCUIT JUDGE

25-48 (6/92)

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Criminal Justice Case Processing Committee

ATTACHMENT 5

PALM BEACH COUNTY PRETRIAL SERVICES INTERVIEW

Name: _____ Counselor: _____ Date: _____ Time: _____
 Aliases: _____ Pending Chgs.: _____
 Age: _____ DOB: _____ POB: _____ Race: _____ Sex: _____ S.S.N.: _____

RESIDENCE AND FAMILY INFORMATION

		VERIFIED YES	NO
Current Address: _____	Alternate Address: _____		
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____		
Length: _____ Phone: _____	Length: _____ Phone: _____		
Resides with: _____ Relation: _____	No Phone Contact: _____		
Continuous county resident Last 5 Years? Yes No If no, explain: _____			
Prior Address: _____ Length: _____			
W H Contact with: _____ Relation: _____			
Marital: S M D Sep W Cl # of Children: _____ Live with: _____			

EMPLOYMENT AND EDUCATION INFORMATION

Current Employer: _____ Position: _____
 Length: _____ FT PT Seasonal Means of Support: _____
 Prior Employer: _____ Length: _____ Last Date Worked: _____
 Last Grade Completed: _____ If current student, specify: _____

PHYSICAL/MENTAL HEALTH INFORMATION

Currently Treated? Yes No If yes, where? _____ For: _____
 Frequency: _____ Treated Since: _____ Case Manager: _____

REFERENCES

Name	Address	Relation	Daytime Phone	In Court?	Ver?
1) _____					
2) _____					
3) _____					

Verified By: _____ Date: _____ Time: _____ Notes: _____

LOCAL CRIMINAL HISTORY (Per Clerk's System)

Felony Convictions: _____ # Misdemeanor Convictions: _____ # DUI Convictions: _____ # FTA's Listed: _____
 On Probation or Parole? Yes No If yes, specify: _____

SELF-REPORTED NEEDS (circle all applicable)

Drug Tx Alcohol Tx Employment Assistance Educational Assistance Financial Management
 Domestic Counseling Health (specify): _____

PRETRIAL SERVICES ELIGIBILITY

_____ Eligible for Straight O.R. Bond _____ Not Eligible Due to: _____

COMMENTS



Criminal Justice Case Processing Committee

Attachment 5 – West Palm Beach Interview Forms continued:

STATE ATTORNEY'S OFFICE - DOVE UNIT CONFIDENTIAL WORK PRODUCT - VICTIM INPUT

DEFENDANT: _____ BOOKING NO.: _____
Date of 1st appearance: _____

VICTIM INFORMATION:

NAME: _____ RELATIONSHIP _____
ADDRESS: _____
PHONE: HOME: _____ WORK: _____
ALT. PHONE NO.: _____

VICTIM WANTS:

1. CONTACT BY PHONE ONLY
2. NO CONTACT; L.E.O. PRESENT WHEN DEFENDANT GETS BELONGINGS
3. 3rd PARTY FOR CHILD VISITATION
4. CONTACT - NO VIOLENT CONTACT - WANTS DEF. RELEASED

WERE THERE CHILDREN PRESENT OR IN HOME AT TIME OF OFFENSE? YES NO
HOW MANY? _____ D.O.B. & SEX _____

DEFENDANT'S PRIOR DOMESTIC HISTORY:

ARREST NON-ARREST CURRENT R/O EXPIRED R/O

DEFENDANT HAS PROBLEMS WITH:

ALCOHOL ANGER DRUGS MENTAL HEALTH ISSUES

OTHER IMPORTANT INFORMATION VICTIM GAVE TO VICTIM/WITNESS COORDINATOR UPON FIRST CONTACT:

THE ASA AT FIRST APPEARANCE MUST COMPLETE SECTION BELOW:

DID THE VICTIM APPEAR OR TESTIFY AT FIRST APPEARANCE? YES NO

VICTIM'S TESTIMONY AT 1ST APPEARANCE: _____

1st appearance results _____

Referral to _____ DCF _____ School _____ Vic Svs _____ Probation _____ Fel/Barbers _____ SAAP _____
Page 1 of 2 dvicinp.wpd



**MEDICAL,
MENTAL
HEALTH, AND
SUBSTANCE
ABUSE
COMMITTEE**



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Medical, Mental Health and Substance Abuse Committee

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COMMITTEE MEMBERS

Mr. Rich Morrison
Vice President, Florida Hospital
Committee Chair / Commission Vice-Chair

Mr. Jeff Bennett
Community Volunteer

Ms. Juanita Hernandez-Black
President/CEO
Mental Health Association of
Central Florida

The Honorable Donald E. Grincewicz
Circuit Judge, Ninth Judicial Circuit

Ms. Babette Hankey
Chief Administrative Officer
The Center for Drug Free Living

Ms. Amy Maguire
Director of Government Relations
Orlando Regional Healthcare System

Ms. Michele Saunders, LCSW
Vice President, Community Relations
Lakeside Alternatives

Mr. John Williams
President, Wayne Densch, Inc.

Mr. Robert Pickerill
Director
Orange County Office for a Drug Free Community
Committee Staff Director



I. PROCESS AND BACKGROUND INFORMATION:

Summary of Major Findings

Over the last several months the Medical, Mental Health, and Substance Abuse Committee has reviewed the functioning of these services at the Orange County Jail. Through a review of data, public testimony, on-site experience, and interviews, a comprehensive view of the Jail was obtained. Several major items are evident: the current services at the Jail lack an integrated system of care between medical, mental health and substance abuse. Health services at the Jail cannot be divorced from the community. The services at the Jail impact the community – the services in the community impact the Jail.

The health care services are understaffed in both number and qualifications. There has not been sufficient human resources allocated to the health care function in the Jail to meet the increasingly complex demands. The illnesses being seen in the Jail grow more demanding. Yet, over the last several years, the qualifications to be a nurse in the Jail have diminished. This has occurred, at least in part, by the shortage of nurses generally. Until very recently however, there seemed to be no concerted effort to increase the skill-level of those nurses who were hired at the Jail. It is unreasonable to assume that a “green” nurse is capable of coping with the high stress and complex nature of jail nursing without intensive training and mentoring from experienced nurses. The Jail also relies heavily upon agency nurses. With the specialized nature of the nursing required at the Jail, an agency nurse may almost be counter-productive to the operation of the health care services at the Jail. An agency nurse does not know the routines or protocols, and does not have experience with the special demands placed upon health care personnel by the inmate population. Nurses working at the Jail should have critical care or emergency room experience, to include the agency nurses.

There is a misallocation of resources currently available at the Orange County Jail. For example, a critical point in the jail process from the aspect of health, mental health, and substance abuse is Central Booking. There are simply not enough personnel or expertise assigned to this area, particularly at high volume times. Too much time passes from when a person is booked, to the time they have a health assessment. There does not appear to be a formalized system of triage beyond the most glaring cases that are self-evident to the Corrections Officers (i.e. severe alcohol intoxication, drug intoxication or injury with bleeding). A review of one day’s medical assessment log revealed several instances of individuals with stated problems, such as injury upon arrest, heroin withdrawal, asthma, and diabetes, not being assessed for long periods of time.

There is inadequate coverage for inmates with mental health problems. A mental health professional is on-call, but many of the assessments are done over the phone, which is totally inadequate. There needs to be a mental health professional on-site 24-hours-a-day. The Jail is the single largest mental health facility in the County and it is the least staffed.



Medical, Mental Health and Substance Abuse Committee

Process and Background Information continued

The staffing of the Medical Unit does not recognize the two distinct natures of the population being seen. While the average census of the Jail is 4,000 inmates, the static population is much less. Some 58% of all inmates stay three days or less and 67% stay seven days or less. Only 28% stay two weeks or longer. The staffing of the Medical Unit must reflect this high turnover rate and the increasing acuity of the inmate population. It cannot be based upon an average daily census. The result will in fact require more staffing than that which would be indicated by strictly using average census.

There is a clear conflict between the expectation of law enforcement and the Jail when it comes to health related issues. Law enforcement desires to hand-off their arrested individuals as quickly as possible and get back on the street. The Jail Medical Unit staff wishes to determine if they can medically care for a particular arrested individual. This tension can, and does, result in either care being delayed for a person who has an immediate or urgent need, or in a person being released so that the law enforcement officer will not have to be tied-up in an emergency room, or both. A resolution to this conflict will be the establishment of a central assessment center that can do medical and mental health screening away from Central Booking.

The University of Central Florida survey confirmed the observations made by the Committee and the given testimony that there is a gulf between Correctional Officers and Medical Unit personnel. There is not a team environment. Medical Unit personnel are not viewed as a true part of Corrections and Correctional Officers question the attitude and competency of the Medical Unit staff. This contributes significantly to the problems experienced at the Jail. Responses in the survey indicate that 38% disagreed with the statement that Medical staff are adequately trained, 42% disagreed with the statement Medical staff are concerned about inmate conditions, 39% disagreed that Medical staff responded to inmate medical needs in a timely fashion, and 74% disagreed that line staff is informed of inmate infectious diseases.

Orange County Chairman Richard Crotty and his administrators are to be commended for taking steps in the middle of the Oversight process to make some important changes in the leadership of the Medical Unit at the Jail. Dr. George Ellis, now Medical Director for the Jail, and Pam Steinke, Administrator for the Health Services Division, have come in and made great strides in implementing many of the recommendations this Committee had been formulating over the previous four months.

It would be grossly unfair to put the responsibility on Dr. Ellis and Ms. Steinke, and their current staff, to turn the whole system around in terms of implementing our recommendations. They must have, as this Committee has noted, significantly more help in terms of staff, cooperation, and patience in expectations of completion of said tasks.



Medical, Mental Health and Substance Abuse Committee

Process and Background Information continued

It is also important to note that while changes need to be made, the public has been led to believe by media coverage that the Jail is alone in this matter. In reality, the Jail is a part of the bigger problem. When one considers the recidivism rates, the lack of community resources, and the lack of teamwork within the “system”, one cannot expect great changes in a short period of time.

Oversight Committee Role

The Committee members feel very strongly that the oversight provided to the Jail and those identified in the final report as having responsibility to implement various portions of the recommendations is as critical to the process as that which has transpired over the past several months. Our feeling is that absent a long-term effective process of monitoring implementation of recommendations our work will have been for naught. We feel just as strongly that a liaison position with compliance focused responsibilities and reporting directly to the County Chairman must be established.

Orange County Jail’s Medical Unit

The Jail’s Medical Unit is comprised of clinics throughout the Jail complex, including two dental clinics and a Special Medical Care Unit. The Medical Unit conducts medical screenings for 160 inmates per day, 1,700 physical assessments per month and 3,800 sick calls per month. On an average daily basis, 35% (1,450) of inmates are on medication; of these 1,450 inmates, 48% (691) are on psychotropic drugs.

The Jail provides hospital security utilizing Corrections Officers working overtime to provide security for each hospitalized offender. For Fiscal Year 00-01, there were 315 hospital admissions totaling 1,770 days and over 800 emergency room visits. A typical day in the hospital costs \$1,000 per day. The Medical Unit oversees treatment for inmates with conditions as varied as mental illness, substance abuse, hypertension, seizures, asthma, HIV/AIDS, tuberculosis, and pregnancy.

The Dental Clinics are comprised of one and one half dentists, which provide limited dental services. Approximately 270 inmates are seen per month. The Special Medical Care Unit is a 30-bed facility which is operational 24 hours per day. This Unit is not designed for female inmates.

Pharmacy services are provided by the Diamond Pharmacy. On average, 1,450 inmates are on medications every day, 691 of them are on psychotropic drugs. Of the 1,450 inmates on medications, each one receives an average of 2.7 prescriptions (3969 medications per day).



Medical, Mental Health and Substance Abuse Committee

Process and Background Information continued

The cost of medications continues to increase, with expenditures estimated to reach \$1.3 million annually in the current fiscal year. Approximately \$51,000 is currently spent per month on psychotropic drugs, \$22,000 per month on HIV/AIDS drugs, and \$36,000 per month on other medications.

Over 54,000 medical records are handled manually by 17 Medical Records Clerks. The dispersed housing of inmates, as well as the constant movement of the inmates and the decentralized medical care system, is not conducive to manual records, and compromises continuity of care, accurate review of medical records and a proactive discharge plan.

Of the total jail population, 11% have a mental illness. The profile of the inmate with a mental illness is one in which 60% are in the mental health system, 60% are substance abusers, and 80% have been previously arrested. Inmates with mental health problems are typically jailed three times longer than other inmates, with homelessness being more prevalent among those with mental illnesses.

Approximately 66% of inmates entering the Jail admit to having a drug history. Less than 15% of inmates indicating a drug history have received treatment. Of the inmate population, 32% had a jail program recommendation for a substance abuse, intensive alcohol, or intensive drug program.

Co-occurring Disorders

A high number of inmates have co-occurring substance abuse and mental health disorders. The numbers require a more comprehensive approach to serving this population. No longer can inmates be seen as only having one or the other and be effectively assessed and treated.

Philosophical Changes

The Medical Unit at the Orange County Jail has faced a number of problems and challenges over the years. In order to improve the level and quality of healthcare provided to all inmates, a number of philosophical solutions will demand that:

1. A fundamental shift in the relationships among Jail management, the Jail Medical Unit, and Corrections Officers takes place.
2. A clear understanding of the role and responsibility of the Jail Medical Unit in the overall context of the Jail's functioning be effectively communicated to all personnel.



Medical, Mental Health and Substance Abuse Committee

Process and Background Information continued

3. Agreements and commitments be obtained by the judicial and law enforcement communities to implement new approaches to dealing with mental health and substance abuse offenders, i.e., Crisis Intervention Teams (CIT).
4. Ongoing oversight and commitment by all parties to a continuous quality improvement process.
5. Policies, procedures, and protocols are clearly articulated and trained to all Jail personnel.
6. A community understanding of how the treatment process in the Jail relates to the treatment processes in the community must be established.

Statement of Principles

The Medical/Mental Health/Substance Abuse Committee developed a set of principles that are of philosophical importance to providing quality and timely health services within the Jail:

1. Individuals who are under care for health, mental health and substance abuse disorders/problems are entitled to a continuity of medication prescribed by a physician for a diagnosed disorder or condition irrespective of their status of being an inmate of the Orange County Jail.
2. Inmates who become ill during their stay at the Jail are entitled to a level of care that will relieve pain and prevent the development of a life-threatening condition.
3. Inmates are not entitled to elective care.
4. Staff and visitors, including legal counsel, are entitled to a reasonable expectation that they are being protected from communicable diseases.
5. Inmates are entitled to a reasonable expectation that they are being protected from communicable diseases.
6. The Jail is not the most appropriate setting for long-term mental health or drug abuse treatment.
7. The care and treatment of non-violent and violent offenders will require distinctively separate approaches on process.
8. The care and treatment of inmates will require close integration and coordination with the existing public and private providers of care.



Process and Background Information continued

9. Orange County taxpayers have a reasonable expectation that the State or Federal Government will pay their share of inmate healthcare costs for those individuals who are eligible for Medicaid or Medicare were they not incarcerated.
10. The care and treatment of inmates for medical, mental health or other illness while in the Jail is to be pursued in the most cost-effective manner possible.

II. ISSUES, FINDINGS AND RECOMMENDATIONS:

SECTION 1 — MEDICAL

There are several general medical issues facing the Medical Unit staff that must be addressed and solutions implemented to effectively and adequately provide medical services to the 4,200 inmates who reside at the Orange County Jail.

1. ISSUE—MEDICAL EQUIPMENT AVAILABILITY AND APPROPRIATENESS:

A. Finding of Fact:

Some of the equipment in the Medical Unit/clinic areas is in need of repair or replacement, such as examining tables, lamps, and wheelchairs. Newer equipment or modern types are needed to enhance the services delivered to the inmates. The high number of inmates served daily provides a great deal of wear and tear on the current equipment and supplies. There is other equipment which cannot be used because of space limitations, such as an X-ray machine. Some areas did not have enough equipment or it was old equipment.¹⁷

B. Recommendations:

The Jail Health Care Administrator should conduct an inventory of current equipment to determine what is needed for the population being served and to ensure that the equipment meets the general community standard.

C. Estimated Cost:

Insufficient data available to determine cost or savings.



Medical Issues, Findings and Recommendations continued:

2. ISSUE — MEDICAL RECORDS NOT COMPUTERIZED/INTEGRATED WITH JAIL:

A. Findings of Fact:

All medical records are kept on paper. There is no automated system currently used to track medical records. Medical records are kept in one location and have to be retrieved when medical information is required on a current inmate. In some cases, when an inmate is brought into Central Booking and has been previously incarcerated, their medical records are retrieved for review of the inmate's medical needs. Currently, the Medical Unit staff conduct medical screenings for 160 inmates per day, and 1,700 physical assessments per month. There are 3,000 sick calls per month. Seventeen (17) Medical Records Clerks are responsible for manually maintaining 54,000 records each year. Staff is utilized to retrieve and relocate files every couple of hours. The constant movement of the inmates, the dispersed housing of inmates and the decentralized medical care system is not conducive to manual records. It compromises continuity of care, accurate review of medical records, and a proactive discharge plan.¹⁸

B. Recommendations:

1. The feasibility of installing a stand alone computerized medical records system should be fully explored by the County's Information Services and Systems (ISS) Department working with the ISS office of an existing hospital.
2. The stand alone system must have the ability to integrate with JailTrac and future systems, and must comply with Health Insurance Portability and Accountability Act requirements. It could take up to four years for a medical component to be installed with any general ISS system being selected by the Jail. This is simply too long to wait for such a vital component in health care.
3. The stand alone system and the permanent system should be capable of networking or interfacing with community based systems in order to effect continuity of care.
4. As recommended by the Technology Committee, the County should contract directly with a third-party provider that already has a medical system in place, such as a hospital or medical facility.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



Medical Issues, Findings and Recommendations continued:

3. ISSUE — MEDICATION DISPENSING METHOD:

A. Findings of Fact:

Dispensation of medication is done manually through the clinic or through the movement of a medication cart by Medical Unit staff throughout the Jail complex. The purpose of providing the most effective distribution of medication is to ensure that:

1. The appropriate medication is available,
2. The dosage is correct, and
3. The correct inmate is getting the right medication.

The current system of manually dispensing medication is cumbersome, has a high potential for error, and is very personnel intensive. The current policy at the Jail requires Medical staff be accompanied by Corrections staff when providing medical assistance to an inmate. Testimony indicates this policy is not always followed which places Medical staff in unsafe conditions.¹⁹

B. Recommendations:

1. The Jail Health Care Administrator should implement a blister pack method of medication dispensing.
2. It is recommended that the Jail Health Care Administrator in conjunction with the Jail Director move to implement a system of dispensing such medication from a fixed site versus the current method of using carts.
3. Where possible the inmates who are on medication should be housed together to ensure better control.
4. There needs to be continuous evaluation of security surrounding medication dispensing activities to protect the Medical personnel and to prevent the loss or theft of medications by other inmates.
5. A study should be conducted by Information Services and Systems to determine the feasibility of utilizing personal digital assistants (PDAs) to document the dispensing of medication.



Medical Issues, Findings and Recommendations continued:

C. Estimated Cost:

\$206,000 for start-up (incurred already as implemented during Committee deliberation). Additional on going cost is undetermined at this time.

4. ISSUE — POLICIES & PROCEDURES IMPLEMENTATION:

A. Findings of Fact:

High turnover in the Medical Unit has compounded the difficulty of management to adequately and properly train staff. Because of the heavy use of agency nursing or medical staff, staff knowledge of all policies and procedures relative to medical services at the Jail has been seriously compromised. A high percentage of staff interviewed by UCF felt that Corrections staff is not adequately informed of inmate infectious diseases. Of those surveyed, 38% disagreed with the statement that Medical staff was adequately trained while 45% were uncertain.²⁰

B. Recommendations:

1. The Jail Medical Director should develop and appropriately disseminate protocols that can be implemented by all Medical staff and that reflect current medical practices, administratively and clinically. They should meet basic community medical standards where appropriate and, at a minimum, comply with the jail medical standards of the American Correctional Association.
2. The Jail Medical Director should establish competency measures of understanding regarding policy and procedures.
3. A routine audit on compliance to policy and procedures should be incorporated in the protocol.

C. Estimated Cost:

None.



Medical Issues, Findings and Recommendations continued:

5. ISSUE — QUALITY ASSURANCE/RISK MANAGEMENT OF MEDICAL SERVICES:

A. Findings of Fact:

The assurance of quality medical practice by a solid, recurring quality assurance/peer review process is extremely important to a medical delivery system in the Jail. Until professional practices are continually monitored by peers, and as appropriate, corrected by education and counseling, there will be allegations of poor or absence of health care. This was the finding of the Moore report issued in 2000. A Quality Assurance/Risk Management Program was begun by the previous Medical Unit manager but needs further development. It is extremely important to a service delivery system to have safeguards built in to ensure risks associated with medical tasks be minimized.³⁹

B. Recommendations:

The Jail Health Care Administrator should establish a complete and formal process of quality assurance/peer review of care in the Jail utilizing health professionals from other jails and the community.

C. Estimated Cost:

None.

6. ISSUE — SICK CALL FOLLOW-UP:

A. Findings of Fact:

Due to the specificity of process, a shortage of staff, and a lack of a medical management system, follow-up with inmates becomes very difficult. Sick call is offered five days a week. The inmate initiates sick call by communicating with the Correctional Officers in their facility. A snapshot of July 2001 revealed that 3,800 sick calls were completed during that month. Inmates may be moved numerous times between facilities, increasing the difficulty in providing initial contact and subsequent follow-up when needed. This dilemma is compounded with the manual records management system currently in place.²¹



Medical Issues, Findings and Recommendations continued:

B. Recommendations:

1. The Jail Director in conjunction with the Jail Health Care Administrator should provide ongoing education and training for Correctional Officers and Medical Unit staff for how sick call needs to occur, both procedurally and consistent with good medical practice.
2. A routine audit to ensure that current forms and processes for sick call are being used should be developed and implemented, including the requirement that Corrections staff sign and date medical request forms from inmates to verify receipt.
3. A protocol that expands the availability of sick call within security limitations and extends it to other shifts should be established.
4. All protocols should establish appropriate standards for timeliness of responses.

C. Estimated Cost:

None.

7. ISSUE — INFECTIOUS DISEASE CONTROL:

A. Findings of Fact:

Thirty (30) inmates had Tuberculosis and 45 had HIV/AIDS at the time of the presentation in August 2001 to the Jail Oversight Commission. The inmate population is extremely high risk of carrying or contracting infectious diseases, and without timely follow-up inmates can and do represent a significant health risk to the community. Currently, there is inadequate notice on many impending releases of inmates with infectious diseases to both the Medical Unit and the County Health Department to allow for referral or linkage with community agencies to provide follow-up.²²

B. Recommendations:

1. Orange County Human Resources should establish employee health programs for staff distinct from inmate medical services, including ongoing education and routine regular voluntary testing for infectious diseases. They should ensure case follow-up through employee health services and the County Health Department.



Medical Issues, Findings and Recommendations continued:

2. The Jail Medical Director should provide an ongoing evaluation of infection control policies and procedures and the implementation of benchmarks beyond those established by the County Health Department.
3. The Jail Health Care Administrator, in conjunction with the Jail Director, should provide appropriate housing for isolation patients within the Jail facilities.
4. The Jail Health Care Administrator, in conjunction with the Jail Director, should establish a process for adequate notification of those who will come in contact with infectious patients and develop a formal mechanism with the County Health Department and the Jail for identification of communicable infectious diseases that are showing up in the community.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

8. ISSUE — UNTREATED CHRONIC DISEASES:

A. Findings of Fact:

The Jail Medical Unit operates seven (7) clinics throughout the Jail. Twenty-eight percent (28%) of the jail population is treated for chronic illness in one of the Jail's clinics. The clinics are staffed by the Medical Unit physicians and nurse practitioners. An average of 500 inmates per day are diagnosed with mental illness, 350 with substance abuse problems, 132 with hypertension, 72 with seizures, 67 with asthma, 45 with HIV/AIDS, 30 with TB, and there are 12 pregnant females on any given day. These are the types of illnesses and numbers of inmates that may be seen in the clinics, in addition to other medical needs demonstrated by the inmates through the sick call process.²³

B. Recommendations:

1. Subject to applicable privacy regulations and privileges, the Jail Medical Director and Jail Director should identify medically high-risk, non-violent inmates and recommend early release to the Judge, State Attorney and Defense Counsel.



Medical Issues, Findings and Recommendations continued:

2. The Jail Director should reinstate the Forensic Case Specialist position to liaison with the Judge, State Attorney and Defense Counsel to facilitate early release of legally qualified non-violent inmates with chronic diseases.
3. The Jail Medical Director should develop a consultant panel made up of appropriate local medical specialist for chronic diseases.
4. The Jail Medical Director should identify community resources for the treatment of chronic diseases and articulate standards of care for chronic diseases within the Jail.

C. Estimated Cost:

Recommendation #1 — None.

Recommendation #2 — One FTE @ \$60,971

Recommendation #3 — \$50 to \$100 per visit.

Recommendation #4 — None.

9. ISSUE — FREE MEDICAL CARE ACCESS:

A. Findings of Fact:

The Jail is the one entity that the most at risk population with the preponderance of medical, mental health or substance abuse related issues could go to and receive medical services. While the method of receiving these services requires an arrest, inmates are given a free medical screening, and hospital care if needed, once incarcerated. Five percent (5%) of the jail population or 40 inmates per month are sent directly to hospitals because of medical conditions that require intense medical attention. It should be noted that the cost for such care in a hospital is \$1,000 per day or an annual cost of not less than \$480,000, and \$1.3 million per year is spent for medications, including psychotropic drugs for inmates. A majority of the inmates are released within the first three days, preventing the completion of the full assessment process which generally takes fourteen days. Many inmates are returned or released to the community with medical conditions that may require follow-up or continued care. ²³



Medical Issues, Findings and Recommendations continued:

B. Recommendations:

1. The Jail Health Care Administrator should initiate ongoing discussion regarding Jail medical services in the primary and community referral network.
2. The Jail Health Care Administrator should develop and implement a formal mechanism to integrate the medical, substance abuse and mental health issues with the community providers.
3. The Jail Health Care Administrator should also establish the Jail as a member of Primary Care Access Network (PCAN).
4. Hospital services for inmates should be consolidated as much as possible to one institution.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

SECTION 2 — MENTAL HEALTH

Mental health issues confronting Jail and Medical staff present a unique challenge in that on any given day between 450 and 500 inmates, 11% of the population, has some documented history of a severe and persistent mental health condition. Homelessness among people with mental illness is prevalent, many are incarcerated for violent offenses, 60% are substance abusers, and 80% have prior arrests.

1. ISSUE — SCREENING PEOPLE WITH MENTAL ILLNESSES AND/OR SUBSTANCE ABUSE PROBLEMS:

A. Findings of Fact:

Insufficient communications and linkage between the Jail and the community result in high rates of recidivism. Inmates with a mental illness have average lengths of stay three times longer than other inmates. Sixty percent (60%) of the inmates with a mental illness have a substance abuse problem and 60% have been in community programs. Eighty percent (80%) of the inmates with mental illnesses have been arrested before.²⁴



Mental Health Issues, Findings and Recommendations continued:

B. Recommendations:

1. Orange County Government should take the lead in the establishment and implementation of a Central Point of Access Facility (Attachment 1). This will be a community-based central triage center to assess mental health problems, substance abuse problems and provide medical screening for people under the Baker Act, the Marchman Act, and those who are charged with non-violent offenses. This would be enacted with local, State (Department of Children and Families) and private funds.
2. Orange County Information Services and Systems should develop an enhanced, computerized information system to provide linkage between community mental health and substance abuse providers and the Jail to ensure continuity of care.
3. The Jail Health Care Administrator and Jail Director should develop multidisciplinary teams within the Jail to work with community mental health and substance abuse providers to deal with inmate treatment, complex cases, and discharge planning prior to inmate release. This team should provide strong assessment and development of an intervention or discharge plan during the first 48 hours an inmate is incarcerated.
4. The Circuit Court Chief Judge should establish a formal Mental Health Court located at the Jail. (Attachment 2)
5. The Jail Director with involvement from the mental health community should review community resources as they relate to probation and parole with the goal of working towards the development of diversion programs. Regular meetings should be conducted between the Jail Director, Jail Health Care Administrator, and community mental health and substance abuse providers.
6. The Jail Director and community mental health and substance abuse providers should develop and implement ongoing education with law enforcement to help identify high-risk arrestees who should be taken to community medical facilities with greater medical resources available than are available at the Jail, i.e. Central Point of Access Facility.
7. The Jail Director should provide for Correctional Officer certification in mental health inmate supervision with appropriate compensation and incentives



Mental Health Issues, Findings and Recommendations continued:

8. The Jail Director and judiciary should reinforce the continued use of forensic beds inside and outside the Jail for the management of inmates who are deteriorating and/or awaiting court hearings.
9. The Jail Medical Director should continuously evaluate and update specific inmate Emergency Medical Orders.
10. Orange County Government should create a Primary Care Access Network (PCAN) model for mental health and substance abuse with an independent community governance and policy board. This board would be responsible for interagency planning, priority setting and funding endorsement and would work cooperatively with the Department of Children and Families, Orange County Government and the area providers.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

2. ISSUE — COMPETENCY HEARINGS:

A. Findings of Fact:

Currently it can take from two to three months to get a competency evaluation completed on an inmate identified as needing competency services through the Jail and court system. Mental deterioration is a concern to those working with the inmate, and the impact the delay has on treating the condition of the inmate. As recommended by the Criminal Justice Case Processing Committee, the Chief Judge of the Ninth Judicial Circuit, in conjunction with the Office of the State Attorney, should ensure appointment of the Public Defender at Initial Appearance for qualified defendants. ²⁵

B. Recommendations:

1. The Chief Judge should take steps to facilitate timely mental health assessments and completion of Reports of Competency.
2. The court system should broaden the pool of evaluators qualified to do assessments so that assessments are done in 20 days as in accordance with



Mental Health Issues, Findings and Recommendations continued:

the rules of procedure. The Department of Children and Families should work with the judiciary to ensure that the elements of the evaluation are consistent with the needs of the Court.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

3. ISSUE — MEDICATION ISSUES AT CENTRAL BOOKING:

A. Findings of Fact:

Of the inmates being presented at the Central Booking Facility, 38% to 40% report being on medication at time of assessment. Fifty percent (50%) of that number report being on psychotropic medications. Some will not know the type or name of the medication, some may have not taken the medication as prescribed, and some do know the name and may even have the medication on their person at time of booking. However, Medical staff needs to verify medication and details associated with prescription before allowing continuation of dosage by the inmate. Medical staff has enormous difficulty verifying medications with physicians, psychiatrists and pharmacies, especially during after hours. Arranging for release of information forms in order to comply with confidentiality laws, to be signed and forwarded to the appropriate medication information authority is often very lengthy in terms of time and more importantly the absence of continued medication for the inmate.²⁵

B. Recommendations:

1. The Jail Health Care Administrator should develop and initiate a Memorandum of Agreement between the Jail and mental health providers to ensure the timely transfer of medical/mental health information from community facilities or providers to the Jail.
2. The Jail Health Care Administrator should have Release of Information forms signed at the proposed Central Point of Access Facility and at the Central Booking Facility.



Mental Health Issues, Findings and Recommendations continued

3. Orange County Government should encourage community programs to have Release of Information forms completed by their clientele as a part of program participation for use if the client is subsequently arrested.
4. The Jail Health Care Administrator should develop a process for inmates receiving verifiable prescribed medications prior to arrest, including atypical psychotropic medications to continue on the same medications in a clinically appropriate and timely manner.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

**4. ISSUE — ASSESSMENT INFORMATION FLOW TO THE JUDGES/
COURT**

A. Findings of Fact:

Oftentimes the Court is provided very little information relative to the assessment of an inmate before the Court, thus inhibiting the ability of the Court to make a full and informed decision, resulting in extended lengths of stay. Inmates with mental illnesses tend to stay three times longer, 60% have substance abuse problems, and 80% have been previously arrested. Accessing community information on those known is lengthy and delays timely and effective treatment, based on history and current or past treatment efforts. However, this information is privileged and confidential and cannot be disclosed to the Court, Prosecutor or any other party unless such disclosure is consistent with applicable privacy regulations and privileges.

Oftentimes an inmate's medical conditions or needs may not be conveyed to the Court at the time of disposition or even at the time of initial appearance for the reasons other than patient confidentiality discussed above. Judges might utilize pretrial release if afforded the current information on the inmate.²⁶

B. Recommendations:

1. The Jail Director should develop a protocol to ensure timely communication to the Judge, State Attorney and Defense Counsel from the Jail for early and/or enhanced disposition of cases.



Mental Health Issues, Findings and Recommendations continued:

2. The Jail Director, in conjunction with the Jail Health Care Administrator, should identify mechanisms to expedite the disposition of inmates with mental illness, resulting in their release from the Jail into a more appropriate setting.

C. Estimated Cost:

None.

5. ISSUE — FOLLOW-UP ON RELEASED INMATES WITH MENTAL HEALTH PROBLEMS

A. Findings of Fact:

Eleven percent (11%) of the jail population has a severe and persistent mental illness, 40% are not known to an agency in the community, 67% are homeless and 80% have been in jail before. Some of the inmates, 18%, are charged with a misdemeanor and may be eligible for pretrial release. This alternative to incarceration program is a collaborative effort between the Jail and Lakeside Alternatives.

Unfortunately, there is no system in place to identify those inmates who do not qualify for pretrial release. Oftentimes there is no space available and they are released back to the community which many return to a homeless status as before. There is no database to connect those inmates with community mental health providers to ensure some method of follow-up. Case management services are limited and often restrictive excluding some people who need the follow-up services.²⁵

Orange County law enforcement agencies are taking a proactive step by providing their officers with crisis intervention training. These officers, though limited in number, can be called upon to respond to calls for service where the situation is involving a person with mental illness. The training provides the officer with skills and expertise in appropriately responding to what could be an explosive situation and turns it into one where under other circumstances the person may have been arrested and booked, but were able to be diverted from the Jail. Currently, there are 120 officers trained in crisis intervention in Orange County. There were 298 crisis interventions in year 2001. Of those interventions, 18% were jail diversions as reported by the



Mental Health Issues, Findings and Recommendations continued:

Crisis Intervention Team trained officer. They stated they would have made an arrest had they not been so trained. The Crisis Intervention Team training program is being continued by law enforcement.²⁷

Fifty-six percent (56%) of the inmates are released within the first three days of being booked into the jail. This does not lend itself to allowing sufficient time to plan for the release of those with special needs and to ensure follow-up arrangements are made.²⁸

B. Recommendations:

1. The Department of Children and Families and the Jail Director should initiate with community mental health providers the development of a database to identify mental health inmates, who are re-arrested, Baker Acted or taken to emergency rooms within 48–72 hours of release from the Jail.
2. The law enforcement chief administrators should continue and support the expansion of Crisis Intervention Team training, pretrial release and pre-bookings diversion programs.
3. The Jail Director should develop two formal communication systems with community mental health and substance abuse providers for inmate discharge:
 - a. One system should address when the release date is known and anticipated discharge planning has taken place. The community mental health and substance abuse providers should be involved in the development of that plan and all efforts should be made to ensure timely linkage with the inmate upon release by the provider agency for effective service follow-up.
 - b. The other system should address when notification that release is to be immediate. A case management group or discharge planning team should be established to work with those potentially anticipated short notification releases. Community mental health and substance abuse providers should facilitate the most expeditious plan of service that is possible to avoid losing the inmate upon release.



Mental Health Issues, Findings and Recommendations continued:

4. The Department of Children and Families working with community mental health provider agencies, advocates, and governmental entities should establish more community resources available for the placement and monitoring of persons with mental illness.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

SECTION 3 — SUBSTANCE ABUSE

While serious crime rates have fallen, the number of people incarcerated has grown, steadily in recent years. The reason for this anomaly is that more and more offenders are being sentenced on drug charges. Drug offenses have accounted for more than one-third of the increase in incarcerations since the early 1970's. The substance abuse factors that impact the jail are as follows:

- High inmate turnover – 75% of the inmates stay 14 days or less making the identification of inmates with substance abuse problems very difficult.
- 70-80% of the inmate population has a substance abuse problem; the Jail does not have an information system capable of identifying specifically what substances the inmates' abuse.
- There are up to 20 inmates on methadone on any given day.

1. ISSUE — SUBSTANCE ABUSE DATABASE:

A. Findings of Fact:

Currently, the Jail system does not track the inmates with drug problems or those drugs that are the primary drug of choice of the inmates because addiction information is privileged and confidential. In order to more effectively serve the inmate population and develop programs and treatment services within the Jail, more data is needed if the inmates choose to participate and disclose the requested information for dissemination to third parties. Jail staff must have a much stronger relationship with the treatment



Substance Abuse Issues, Findings and Recommendations continued:

providers in the community. Discharge planning seldom occurs and thus many inmates leave the Jail without a real plan for services.³⁴

B. Recommendations:

1. The Jail Health Care Administrator in conjunction with Orange County Information Services and Systems should develop a system to establish a baseline of substances abused by inmates prior to incarceration in the Jail.
2. The Jail Health Care Administrator in conjunction with the Department of Children and Families should review the qualifications and capabilities of the substance abuse providers currently providing services in the Jail.
3. The Jail Health Care Administrator and Department of Children and Families should identify the number of beds available, number of beds used, types of outpatient services available, and what is needed.
4. The Jail Health Care Administrator should utilize the findings to advocate for the resources necessary to meet the needs of the inmate population.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

2. ISSUE — DETOXIFICATION:

A. Findings of Fact:

During the first eight months of 2001, 2,757 inmates were identified for detoxification. The detoxification process for inmates, other than methadone cases, includes monitoring the inmates throughout the stages of withdrawal and administering appropriate treatment for withdrawal symptoms.

Currently, there are only 40 Marchman Act beds at addiction receiving facilities in Orange County and they serve a tri-county area. Addiction receiving facilities are established and funded by the State Department of Children and Families for those persons who are substance abuse impaired,



Substance Abuse Issues, Findings and Recommendations continued:

and meet involuntary or voluntary criteria for admission. Generally, voluntary admissions occupy a majority of the beds.

Forty-one percent (41%) of those inmates incarcerated for more than three days have had a Substance Abuse and Life Circumstance Evaluation administered at assessment. Seventy-six percent (76%) of that number had a substance abuse program recommendation. This number under represents the real profile of those presented at the Jail as only those staying longer than 72 hours are administered the test. It is believed that many, many more of the inmates would be identified as needing substance abuse programs or services were time allowed for administering the above referenced assessment.

If law enforcement takes an individual into custody and that individual meets the criteria for admission to an addictions receiving facility and that facility has no available beds, the officer then takes that individual to the Central Booking Facility for booking and admission into the Jail, and subsequently detoxification.²⁸

B. Recommendations:

1. The Jail Medical Director should develop a screening tool to profile and identify high-risk inmates and develop a process for monitoring for detoxification symptoms.
2. The Jail Medical Director should develop a detoxification program, comparable to community standard, for inmates on illegal drugs and other drugs of abuse.
3. The Jail Medical Director should develop protocols for medical supervision and withdrawal in a safe, monitored environment, and in a specific area of the Jail.
4. The Department of Children and Families (DCF) should, whenever appropriate, provide for detoxification of arrestees in the community versus the jail.
5. The Department of Children and Families should work with providers to identify the number of involuntary versus voluntary beds in the current addiction receiving facilities.



Substance Abuse Issues, Findings and Recommendations continued:

6. The Department of Children and Families should also prioritize capacity expansion in this area.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

3. ISSUE — PRE-TRIAL SERVICES:

A. Findings of Fact:

The Corrections Department currently operates a program to divert low level mentally ill offenders from the Jail to services in the community. The Ninth Judicial Circuit operates a Drug Court for felony drug offenders ensuring their participation in community-based treatment. A recent snapshot of the inmate population reveals:

- 33% of the Jail's inmates on a given day are awaiting either trial or sentencing.
- 28% of the Jail's inmates are in jail on a substance abuse related charge.
- 49% of those inmates are awaiting trial or sentencing.
- 34% of the Jail's inmates have a recommendation for substance abuse, intensive alcohol, or intensive drug program based on a self-report instrument, which is given only to a sub-population of inmates.

There is no specific program that addresses the need for linking substance abusing inmates to services in the community while they are awaiting case disposition.²⁹

B. Recommendations:

1. The Jail Director should establish a position to liaison with the Judge, State Attorney and Defense Counsel and Jail to facilitate appropriate placement of the inmate in a pre-trial release substance abuse program integrated with the existing mental health pre-trial release program.



Substance Abuse Issues, Findings and Recommendations continued:

2. The Chief Judge should expand the pre-trial release eligibility criteria to allow more non-violent inmates to qualify for this program.

C. Estimated Cost:

Approximately \$60,971 based on the rate of one full-time employee

4. ISSUE — METHADONE TREATMENT PROGRAMS:

A. Findings of Fact:

There is an interim policy that allows for inmates on methadone to be taken to the methadone clinic if they were a client for dosage. Security issues and daily transportation lends itself to potential problems. Some inmates may be using methadone, but not as a prescribed method of treatment, and the general procedure is to detox them. Jail staff is currently developing a policy for methadone detoxification.³⁰

B. Recommendations:

1. The Jail Medical Director should institute a policy that addresses inmates on methadone. Such policy should provide that if an inmate is in a methadone treatment program at time of arrest:
 - a. A pre-trial release/bond with specific recommendations for bond conditions should be encouraged where judicial criteria are met, or
 - b. If the inmate must remain in jail, methadone should be administered on-site.
2. The policy should require one on-site methadone provider dispensing methadone and for consultation on detoxification.
3. The policy should include that methadone treatment will not be initiated as a treatment option in the Jail for other drug conditions.



Substance Abuse Issues, Findings and Recommendations continued:

4. The policy should state that inmates will not be detoxed from methadone unless ordered by a physician or being transferred to a State correctional facility.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

5. ISSUE — INMATE SUBSTANCE ABUSE PROGRAMS:

A. Findings of Fact:

Currently, the Jail has a limited number of programs for inmates with substance abuse problems. Depending on the inmate, length of stay, and history they may or may not be permitted, or if space is not available, to participate in an appropriate program. The Jail has alternative programs to incarceration that are used for those with mental illness, but not for substance abusers. Drug Court is used for those on the “front end of the system”, or for felony violation of probation cases. They do not currently serve those being released from the Jail on court ordered probation.

Lack of finances on the part of the released inmate or the offender who is under community supervision (probation) may be a barrier to obtaining a substance abuse evaluation and/or treatment. It should be understood that the majority of offenders who are released from jail are not court ordered to probation. If they are court ordered to probation, they will obtain an evaluation and/or treatment only if ordered to do so by the judge. ³¹

B. Recommendations:

1. The Jail Director, working with the Department of Children and Families and community substance abuse provider agencies, should develop compulsory, structured substance abuse treatment programs for inmates with both short-term and long-term stays in jail as ordered by a judge, to include self help groups (i.e. AA, NA, 12-step, etc.).



Substance Abuse Issues, Findings and Recommendations continued:

2. County and State probation administrators should, in conjunction with community substance abuse providers and the Department of Children and Families, develop structured programs and supervision for released substance abusing inmates

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

6. ISSUE — CASELOADS FOR COUNTY PROBATION:

A. Findings of Fact:

Currently Orange County Probation has high caseloads that adversely affect their ability to supervise specialized caseloads, including substance abuse caseloads. They report having caseloads of 200 per officer when the ratios should be much lower. As a comparison, the Florida Department of Corrections felony caseload to officer ratio is 90 to 1 for regular offenders and 50 to 1 for sex and drug offenders. While County Probation supervises misdemeanor caseloads, the reality is that all probationers have similar needs for supervision/monitoring and treatment. It should also be noted that many misdemeanor offenders have significant criminal histories including felony convictions.³²

B. Recommendations:

1. The Jail Director should establish appropriate probation caseload ratios for high-risk offenders after reviewing comparable high-risk offender ratios and caseloads utilized in other communities comparable to Orange County.
2. The Jail Director should take immediate steps to request funding from the Board of County Commissioners to provide additional staffing to meet the appropriate ratios and caseload sizes.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



Substance Abuse Issues, Findings and Recommendations continued:

7. ISSUE — DRUG TESTING OF OFFENDERS IN THE JAIL AND COMMUNITY CORRECTIONS PROGRAMS:

A. Findings of Fact:

Increased drug testing among probationers in 2001 resulted in an increase in positive tests initially, but later provided fewer positive tests as the probationers found the probation system more involved in and monitoring their behaviors. The Probation Office determined that probationers were held more accountable for their behavior and that increased testing was a vital tool in changing behaviors, ultimately enhancing success with the probationers.

Currently the frequency of drug testing of inmates is limited to random testing of 5% of the total general inmate population, with work release inmates being tested weekly. The inmates tested have a 3.5% positive test result rate, The open campus and attempts by visitors to smuggle contraband, sometimes illegal substances, in to inmates is an ongoing security issue impacting the drug test results rates.³¹

B. Recommendations:

1. The Jail Director should review and evaluate the frequency and randomness of drug testing within the Jail.
2. The Jail Director should expand such testing to the most effective level as established by research and best practices at other jails.
3. The Jail Director should also increase the frequency of drug testing of county probationers to a level consistent with best practices among probation service providers.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



SECTION 4 – GENERAL RECOMMENDATIONS:

1. ISSUE — DISCHARGE PLANNING:

A. Findings of Fact:

Case management services for mental health clients are limited and restrictive excluding some individuals that could benefit from the support and linkage thus reducing recidivism. ³³

B. Recommendations:

1. The Jail Director and Jail Health Care Administrator should establish protocols for the discharge planning of all inmates with service needs, medically, mentally, or for those with substance abuse problems.
2. The Jail Director and Jail Medical Director should take the initiative to involve appropriate community agency providers in the discharge planning process to enhance timely planning and service linkage.
3. Orange County Government and the Department of Children and Families should expand the mental health and forensic case management system for discharged inmates who require medication clinic and other mental health services.
4. Orange County Government and the Department of Children and Families should develop additional case management services for discharged inmates with substance abuse issues or health conditions that require medication and other services. They should work together to institute appropriate and timely discharge plans for those inmates with special needs. The case management system should include coordination among community treatment providers, courts and probation.
5. The Jail Director and Jail Health Care Administrator should initiate protocols to involve State Probation and County Probation in discharge planning for any inmate being placed on either county or state probation.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



General Issues, Findings and Recommendations continued:

2. ISSUE — RESOURCE DEVELOPMENT:

A. Findings of Fact:

The inmate population represents a very high-risk group, with unique and many times unmet needs. They are not involved or inclined to seek assistance from community resources. It is incumbent upon the Jail's program staff to link with the community organizations and share the profile and identified need of the inmate population to facilitate better linkages between the Jail and the community.³⁴

B. Recommendations:

1. The Jail Director should join with local human service organizations to advocate for additional resources to meet the unmet needs of the inmate population being released back to the community.
2. Orange County Government should conduct a needs assessment of the inmate population to determine the extent of the missing resources in the community which serve the inmate population. The results should be utilized in planning for the Central Point of Access.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

3. ISSUE — LAW ENFORCEMENT COMMUNICATION:

A. Findings of Fact:

Law enforcement agencies may conduct "stings" as a part of their responsibility in arresting law violators. These efforts may result in numerous individuals taken into custody in groups and subsequently delivered to the Jail for booking. Such numbers of individuals being presented at "one time" can create "log jams" and security risks for staff at Booking, as well as delay officers from returning to their duty area. Prior notice to allow for staff preparation in terms of numbers on duty to handle the additional workload as well as other administrative preparations can result in smoother processing. It is also determined that



General Issues, Findings and Recommendations continued:

management does not always advise the Medical Unit of such notice resulting in Correctional Officers being prepared, but not Medical staff. The Medical staff has to be as prepared as the Corrections side.³⁵

B. Recommendations:

1. The Jail Director should enter into a Memorandum of Agreement with all law enforcement agencies to require enough advance notification prior to sting operations to allow the Jail time to have additional and adequate staff on duty in order to meet the needs of inmates at Central Booking.
2. The Jail Director should ensure that both Medical and Corrections management is made aware internally of such “stings” so that both may have adequate staff on duty and on standby.

C. Estimated Cost:

None.

4. ISSUE — MEDICAID BENEFITS / OTHER FUNDING SOURCES:

A. Findings of Fact:

Inmates in jail lose access to Medicaid benefits if they are in jail beyond 30 days. How communities handle the issue Medicaid benefits is dependent upon the state. The federal guidelines of the Social Security Act exclude federal financial participation for medical care provided to inmates of a public institution, except when an inmate becomes an inpatient in a hospital for a temporary period. However, the specific eligibility procedures for jail detainees rest with the state. Even when the Federal Financial Participation is no longer available, the individual may still retain Medicaid eligibility status. It is up to the state to suspend Medicaid benefits or drop the individual entirely.³⁶

The cost to Orange County government for medication is 1.3 million dollars for one year. Costs for hospital stays is expected to be no less than \$480,000 for one year.²³



General Issues, Findings and Recommendations continued:

B. Recommendations:

1. The County should lobby for the extension of Medicaid benefits for inmates with particular medical, mental health substance abuse needs.
2. The County should identify a dedicated position to pursue outside funding sources such as grants and other means of funding access to offset costs to the Jail and ultimately the County. Funds would be utilized to provide reimbursement to the county for costs incurred for medical expenses.

C. Estimated Cost:

None.

5. ISSUE — SYSTEM TRAINING:

A. Findings of Fact:

Currently the different entities within the criminal justice system may touch on the role of other entities of the criminal justice system in their training. It should be noted that the complexities and critical issues within the jail system including such issues as those noted in this report are not given adequate attention. The system's recidivism rates will not be reduced nor will the needs of the inmates or community be met until there is a more efficient and effective relationship with all entities. Training is crucial to making this happen.²⁸

B. Recommendations:

1. Training should be developed and implemented by the criminal justice system's constitutional officers for purposes of training members of the criminal justice system that impact admission or release of inmates. Law enforcement protocol training related to arrested individuals with medical problems, including substance abuse should be incorporated in the curriculum.
2. The Jail Director should require Corrections staff to be trained in modified Crisis Intervention Team training to identify, refer and manage inmates with mental illness on an ongoing basis



General Issues, Findings and Recommendations continued:

3. The Chief Judge should develop a process for communicating Committee recommendations to the judiciary.

C. Estimated Cost:

None.

6. ISSUE — MEDICAL STAFF TRAINING:

A. Findings of Fact:

While the staff of the Medical Unit is medically trained, there are unique and distinct issues related to medical care in a jail setting. Such training is not a routine part of any overall medical curriculum. The high-risk propensity for medical or infectious disease issues at the Jail calls for ongoing continuing education for the Medical Unit.³⁷

B. Recommendations:

The Jail Health Care Administrator should develop and implement a consistent and comprehensive training program for Medical Unit staff. Training should include infectious disease, security training before working on the floor, crisis intervention, substance abuse, and mental health according to community standards, as well as addressing issues such as sensitivity training for inmate relations.

C. Estimated Cost or Savings:

Insufficient data is available to determine cost or savings.

7. ISSUE — FACILITY CONSTRAINTS TO HEALTH CARE:

A. Findings of Fact:

Currently the Medical Unit and inmates with needs are spread out over eight facilities, with Central Booking being the busiest. The Booking facility was built for an anticipated 80 bookings per 24 hour period, while now the



General Issues, Findings and Recommendations continued:

number is more than double that. The delivery of effective and efficient health care could be compromised by facility design and limited resources. ²³

B. Recommendations:

1. The Jail Health Care Administrator and Orange County Construction staff should review the current layout of the Jail and the layout proposed in the current expansion of the Jail to make appropriate changes that will increase efficiencies and adequacy of the facility and improve service delivery within current and future facilities.
2. The Jail Health Care Administrator and the Jail Director should immediately create an area for a female Medical Unit within existing facilities.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

8. ISSUE — CORRECTIONS STAFF TRAINING:

A. Finding of Fact:

Jail training of Correctional Officers is limited to CPR, first aid, and infectious diseases. Correctional Officers are first responders to inmates with mental health issues/needs. Inappropriate response can exacerbate the situation. They are also not trained to recognize substance abuse related symptoms, e.g. withdrawal or other symptoms that may call for medical attention. A very high number of inmates go through withdrawal while in the Jail. During the first eight months of 2001, 2,757 inmates were identified for detoxification. ²¹

B. Recommendations:

1. The Jail Director and the Jail Health Care Administrator should develop training curriculums for Corrections staff as a part of in-service training that address accepted protocols for substance abuse and mental health



General Issues, Findings and Recommendations continued:

issues and other medical subjects that would enhance the ability of the Correctional Officer to identify or recognize symptoms that call for medical attention. In addition, sensitivity training and inmate relations training should be incorporated in the curriculum.

2. The Medical/Mental Health team needs to be actively involved with protocol development and implementation because of the relationship to inmates with co-disorders.
3. On-going training on signs and symptoms of withdrawal should be provided to Correctional Officers.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

9. ISSUE — COMMUNICATION WITH JUDICIARY:

A. Findings of Fact:

The high turnover of inmates within the first three days, limited staff, and the length of time to conduct assessments (up to 14 days), delays in many instances conveying important information to the judiciary, which in many cases could result in earlier releases of inmates and placement into more appropriate settings or programs. There is no position or agency, such as the Public Defender's Office who currently isn't appointed until arraignment, that is generally advocating for release or alternatives to incarceration.²⁵

B. Recommendations:

Subject to applicable privacy regulations and privileges, the Jail Director should develop a process for providing the Judge, State Attorney and Defense Counsel with as much information as possible at Initial Appearances including mental health, medical and substance abuse issues. This process should include mechanisms to facilitate immediate appropriate community referrals.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



General Issues, Findings and Recommendations continued:

10. ISSUE – MEDICAL AND CORRECTIONS COMMUNICATIONS:

A. Findings of Fact:

Effective and regular communication does not exist between Corrections staff and Medical Unit staff. Oftentimes, security issues may be seen as more critical than medical issues. An effective medical program must depend on good communication with the line staff.³⁸

B. Recommendations:

1. Members from both the Medical Unit and Corrections staff should develop mechanisms for line employees in both units to communicate and identify and solve problems within the jail community.
2. The Jail Director and Jail Health Care Administrator should establish a formal process for communication between Corrections and Medical staff at shift change.
3. Corrections and Medical mid-management teams should have regular, formal meetings.
4. The Jail Director and Jail Health Care Administrator should establish a quality improvement team that includes Medical Unit and Corrections staff.

C. Estimated Cost:

None.

11. ISSUE – CENTRAL BOOKING RESOURCES:

A. Findings of Fact:

Central Booking is overcrowded and extremely busy, but is a vitally important facility to the medical needs of the inmates. The facility was staffed for 80 bookings per day but averaged about 160 per day in the year



General Issues, Findings and Recommendations continued:

2000. Medical screenings are conducted as arrested individuals are brought in for booking. Many of the inmates have medical problems, some of who are carriers of an infectious disease. Eleven percent (11%) has a mental illness, and over 70% has a substance abuse problem. Many are glad to be brought to the Jail as they have medical problems they cannot attend to in the community due to the lack of medical insurance or other coverage.²⁴

B. Recommendations:

The Jail Health Care Administrator should take the following steps to provide maximum assessment and medical coverage at Central Booking:

1. Assign an Advanced Registered Nurse Practitioner (ARNP) to Central Booking,
2. Increase the number of Registered Nurses and Mental Health Nurses in Central Booking,
3. Develop a triage system to target inmates that are not going to be released,
4. Develop communication linkages with community providers,
5. Establish the initiation of discharge planning in Central Booking,
6. Develop a central point of intake and assessment at the Jail for continuity of care and discharge planning,
7. Explore utilization of off-duty paramedics to do screenings at Central Booking, and
8. Have a mental health professional on-site 24 hours per day, 7 days per week.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



III. RECOMMENDATIONS THAT HAVE BEEN IMPLEMENTED:

The Jail Health Care Administrator and staff have taken steps to address the following issues and recommendations:

1. Conducted an inventory of medical equipment.
2. Working with Corrections Administration to house inmates on medications in fewer facilities, though difficult due to security and other related issues.
3. Developed quality assurance/peer review through utilization of American Correctional Association and jail model standards.
4. Developed a protocol expanding availability of sick call.
5. Taken steps to identify medically high-risk, non-violent inmates and recommend early release when appropriate.
6. Developed a consultant panel of medical specialists.
7. Initiated identification of community resources for treating chronically ill inmates.
8. The Jail Medical Director and Jail Health Care Administrator have become members of the Primary Care Access Network (PCAN).
9. Developed an interim Methadone policy.
10. In the process of developing a policy on Methadone.
11. Taken steps to involve community providers in discharge planning.
12. In the process of developing a comprehensive training program for Medical staff.
13. Reviewed the design layout for the Jail and made suggestions for changes to enhance service delivery.
14. Assigned an Advanced Registered Nurse Practitioner to Central Booking.
15. In the process of increasing the number of Registered Nurses and Mental Health Nurses in Central Booking.



16. Addressing the development of a triage system in Central Booking.
17. Negotiating to utilize paramedics at Central Booking.

IV. ATTACHMENTS:

Attachment 1 — Orange County Central Point of Access

Attachment 2 — The Orange County Mental Health Court



ATTACHMENT 1

**ORANGE COUNTY CENTRAL POINT OF ACCESS
Ad Hoc Committee Report**

**Written by Donna Wyche, MS, CAP, Assistant Manager
Orange County Youth and Family Services**

Contributing members:

- Sally Wolfe, BA, MS, CPM, Orange Co. Clerk of the Courts, Division Manager, Mental Health
- Helene Welch, BA, ICM, Orange Co. Court Administration
- Dick Jacobs, MS, LMFT, CAP, The Center for Drug Free Living, Chief Operations Officer
- Jill Hobbs, Ph.D., Manager, Orange County Corrections, Mental Health Services
- Nancy Roberts, RNC, Operations Manager, Behavioral Health, Orlando Regional Healthcare
- Debbie Lattimer- Spielman, Florida Hospital Center for Behavioral Health, Director of Business Development
- Carolann Duncan, MS, Director of Mental Health, Office of Alcohol, Drug Abuse and Mental Health, State of Florida, Department of Children and Families
- Mary McKinnon, RN, BSN, MBA, Corporate Administrator, Behavioral Health Services, Orlando Regional Healthcare
- Dennis Hughes, Assistant Manager, Orange County Corrections Division
- Vicki Garner, LMHC, Lakeside Alternatives, Executive VP, Operations
- Michele Saunders, LCSW, Lakeside Alternatives, VP - Community Relations
- Bob Morin, District Administrator, Department of Children and Families, District 7
- Susan Becker, Deputy District Administrator, Department of Children and Families, District 7

In the fall of 2001 Richard Morrison first requested Orange County staff to work on the concept of a central point of access for the community. The principle reason being to lessen the impact to the booking unit of the jail but also to look at the issues of the individuals presenting with mental health issues and substance use disorders being taken to emergency departments of local hospitals creating a backlog and long waiting times. This is a system issue in Orange County that needs to be alleviated by a treatment system redesign. After many meetings with the Department of Children and Families and County staff Chief Judge Belvin Perry and Deputy County Administrator Tom Weinberg formalized the process and brought providers, hospitals and DCF to the table for planning, led by County staff. After



Medical, Mental Health and Substance Abuse Committee

Attachment 1 continued:

many meetings the following are key principles that the ad hoc committee agree to and are presently in the planning stages. This process will not be quickly completed and the meetings and planning are on going. A complete budget will not be realized until all information from each of the committees is completed.

- ◆ The Committee recognizes that the county jail has become the treatment center of last resort and that the jail is not the most appropriate place for individuals with chronic substance use disorders and mental disorders.
- ◆ The Committee supports a Central Point of Access that will co-locate mental health assessment and short term treatment, substance abuse assessment and short term treatment, and medical clearance for all non-voluntary Baker Acts and non- voluntary Marchman Act admissions in Orange County. It will also be the first stop for all assessment services and short-term treatment while awaiting placement at the appropriate modality.
 - ◆ 10 mental health beds
 - ◆ 10 substance abuse beds
 - ◆ Medical Clearance
- ◆ The Central Point of Access center is a partnership between the Department of Children and Families, Orange County, hospitals and the provider community. It supports a co-location of services, triage and comprehensive assessment, which would be accepted by all disciplines. This eliminates the duplication of service. This would also ensure a seamless system of care for the client and families.
- ◆ The partnership will maximize existing resources as well as generate additional resources needed in a phased plan.
- ◆ The Committee supports expansion of the Crisis Intervention Team training to ensure that law enforcement officers are able to appropriately handle the large number of mentally ill and substance abusers they encounter.
- ◆ The committee supports the County assigning the Administrative Service Organization (ASO), which could provide the contracts for the Central Point of Access, hold all agencies accountable to the mission, set policy and oversee daily operations. There is also some discussion in regards to Orange County being the actual ASO due to the level of trust the local providers and hospitals have for the County. The County along with the ASO, could



Attachment 1 continued:

appoint the Governing Board, representative of the community, providers, DCF, hospitals, Law enforcement, and the county. Each agency would continue to maintain their licenses with the current funders, or Orange County or the ASO could contract with additional agencies or provide additional funding to the current providers. This agent would ensure that there are measurable and meaningful outcome measures to verify the efficiency of the central point.

- ◆ The committee supports the need for additional resources to begin the Central Point of Access. The resources needed are additional Baker Act beds (10), Marchman Beds (10), and staffing resources to be shared between the two. The possible funding amount for these resources could be approximately \$3,000,000. There are two initiatives presently to acquire federal funding for consensus building, which would help with the implementation of the Central Point of Access, and another that would assist with the funding of additional detox beds. There is also a need for blending funding from various sources, i.e., the private hospitals, Orange County, DCF, and with hopes of local law enforcement as well as the City of Orlando being a funder.
- ◆ The location being considered at this juncture is the Princeton Hospital location, which is already licensed and is operational. It would require little CIP money for improvements to ensure security and to bring the emergency department to an acceptable level for implementation of medical clearance services.
- ◆ There would be memorandum of agreements in placed to ensure that a fair rotation of indigent patients and managed care patients are shared by the private hospitals.
- ◆ Realizing the entire project may not be funded in whole October of 2002, there will be a need to phase in other services over time. We plan to continue to work with DCF to bring more funding to this area, with HUD to provide for future housing, and federal and private grants to support ancillary service initiatives. The Committee supports the initiative to design with the Department of Children and Families' and the community, a comprehensive continuum of care so that adequate community resources (multidisciplinary staffing teams, intensive case management, housing, medication clinics, etc.) are in place to reduce/prevent jail recidivism.

As the committee continues to meet more details on budget, issues of transportation, etc., will become available. We plan for an initial start date of Oct. 1, 2002, with necessary funding and licensing in place. For additional information please feel free to contact Donna Wyche at 407-836-7608 or Sally Wolfe at 407-836-2074.



ATTACHMENT 2

THE ORANGE COUNTY MENTAL HEALTH COURT

Prepared by Judge Deb Blechman

In Orange County, one judge in misdemeanor court sets one afternoon each month for criminal cases involving mentally ill defendants. It allows the judge, mental health case managers, prosecutor, and defense attorney to discuss and implement treatment alternatives and chart case management progress for mentally ill defendants. The opportunity came about when Orange County began funding a jail diversion program through Lakeside Treatment Alternatives.

Prior to the advent of the County funded case program, there were insufficient linkages between the criminal justice system and treatment providers. Mentally ill defendants were held in jail for 120 days (on average) for misdemeanor cases pending the filing of charges, court processes and psychiatric reports. Without treatment, the defendant would often decompensate. He might have been in a padded cell unable to communicate with anyone. When the court processes finally resulted in the defendant being declared incompetent, he would be ordered to participate in treatment through Florida's Department of Children and Family Services. However, defendants were often unable to obtain the court ordered services, and there was insufficient follow up or reports regarding the defendants' compliance with court orders.

Too often, the judge and prosecutor agreed to dismiss the charges, because the defendant was incompetent to enter a plea or be brought to trial, and services were not available. The defendant would be released to the street, in whatever state of mind he had been able to achieve while in jail, and with no support or after care to help him avoid re-arrest for again wandering aimlessly and acting insane (disorderly) on the public streets. This process is often referred to as the "revolving door." It was expensive, ineffective and inhumane.

With the advent of Orange County funded treatment, a whole range of options now exists which have helped many defendants and their families keep the defendant from being re-arrested.

Mental Health Pre-Trial Release Program (MHPTR):

When an arrested person is identified by jail staff as being mentally ill, the person can be evaluated and reviewed for treatment through the Mental Health Pre-Trial Release Program (MHPTR). An eligible defendant is someone charged with a misdemeanor, who has a diagnosis of a major mental disorder and who has a non-violent history. A treatment plan is developed by jail staff and Lakeside Alternatives staff. A MHPTR Order is proposed by jail staff, or by the first appearance judge, or by a public defender. If the defendant qualifies, the defendant is released from jail and supervised by



Attachment 2 continued:

Lakeside and Corrections staff while awaiting arraignment and trial. Lakeside Alternatives can provide residential treatment in some cases. In most cases, the defendant returns home with weekly monitoring, monthly psychiatric appointments, case management and medication requirements. Lakeside may help the defendant apply for SSI benefits. Some mentally ill defendants can begin job training programs or part time jobs while awaiting trial, due to their progress with medication and treatment. If a defendant does not comply with the Pre-Trial Release requirements, the judge is immediately notified, and the defendant's release can be revoked and the defendant returned to jail.

Mental Health Court:

When services through MHPTR became available, County Judge Deb Blechman began to docket one afternoon each month for misdemeanor cases involving mentally ill defendants. She started setting mental health cases at one time so that the jail and MHPTR case managers could be present to give their recommendations, and so the public defenders and prosecutors could become familiar with the legal and psychiatric issues. The defendants and their families can be heard in a court proceeding that is not as adversarial as traditional court.

Judge Blechman's Mental Health docket is not a formally adopted Mental Health Court, nor does Judge Blechman hear all the mental health cases in misdemeanor or felony court. She simply grouped all of her cases involving mental health issues onto one docket. Other judges refer cases to this docket on an informal and non-regular basis. Experience with the Mental Health Docket for the first year shows that families and defendants are grateful for the MHPTR services which can help them handle the defendant's mental illness. Families are aided by the fact that a judge can order the defendant to take medications and stick with counseling. With this help, many of the mental health defendants have not returned to the criminal justice system, (although there is currently no process to track these defendants after their cases are resolved). The following "composite" examples of defendants from the first year of experience will help explain the process and the promise of Mental Health Court.

If the Defendant is Competent:

By the time a defendant has been in treatment for two to three months, competency may have been restored. Remarkable recovery may be possible, with the administration of the latest medications, which have fewer side effects than older drugs. One defendant was a nineteen year old prostitute, we'll call Ann. She told the Mental Health judge at first appearances that she had been in every program and that treatment was BS—. She was angry, hostile, and unrepentant. Two months later she was optimistic. Her caseworker and medications had helped her gain a road map to a more productive future. Another defendant we'll call Albert, had been arrested for walking into traffic on Orange Avenue and pounding on car windshields yelling



Attachment 2 continued:

obscurities. At his first appearance he was drooling and incomprehensible. Five weeks later he was oriented and articulate. He too had gained just enough structure with counseling with a caseworker, to become a potentially productive person.

At this point, the defendant who has become competent may enter a plea of No Contest or Guilty to accept probation with continued mental health treatment, if such treatment and supervision is recommended by the treatment professionals and accepted by the defendant. If he has progressed well enough to “graduate”, he may be released without probation. If he would be facing jail time due to a persistent criminal record, the defendant and his lawyer may take the case through traditional trial processes.

If the Defendant is Incompetent:

Incompetent defendants may need to be re-set for mental health review periodically to determine if they can obtain competency through treatment. The court can retain jurisdiction and monitor the Defendant’s treatment progress for one year in misdemeanor cases. If the defendant regains competency through treatment prior to one year, then the case will be reviewed for final disposition, which will be fashioned to help the defendant remain stable and avoid re-arrest. The total sentence or incompetency supervision cannot last more than one year in misdemeanor cases.

Defendants Who Were Insane at the Time of their Crime:

A finding of Insanity is based on psychiatric reports showing that at the time of the crime, the defendant did not have the capacity to know right from wrong. As with a finding of incompetency, a misdemeanor judge may retain jurisdiction to supervise treatment for up to a year. Felony judges have longer jurisdiction for treatment orders.

Mary Margaret Ray, the woman who stalked David Letterman, might have been helped by a Mental Health Court. When she first came to court she was shackled from head to toe because she would bite and spit at the corrections officers. She was sent to a state hospital, only through the legal fiction of filing her case as a felony so that she could be referred there. After treatment at the state hospital, she was stable and personable. If she had come back to a Mental Health Court, all the participants would have understood that she needed aftercare or she would descend back into her former state. Instead, she was offered a “time-served” sentence. Four months later, she sat on a rail road track and committed suicide. Restoring her to competency and then leaving her to degenerate was ineffective. A Mental Health Court and case management treatment might have helped her find a way to live with her mental illness.

Defendants With Violent or Lengthy Criminal Records:

In rare cases, the court may have no treatment alternatives available for a defendant who remains incompetent, but has a significant or violent criminal history. One



Attachment 2 continued:

defendant we will call Anthony, is incompetent by reason of retardation as well as mental illness. He could not benefit from Mental Health Court or case managers through the Department of Children and Family Services. He is incurable and he doesn't want help. Anthony is back in jail now on two allegations of child molesting, and recently was charged with a new crime of battery on another inmate. Another defendant had a history of batteries on law enforcement officers and was re-arrested for resisting and making severe threats of violence against officers. He is psychotic and drug addicted. His crimes are getting more violent with time. He needs a more secure placement than case management.

We have a need for long term secure placement of the criminally mentally ill with significant criminal or violent propensities. Currently, there are no secure long term placements for misdemeanor defendants and the State hospitals will only hold felony defendants for short periods of time. For some of these defendants, jail may be the 'least restrictive' placement available at this time.

Expanded Mental Health Court:

If Mental Health Court is to be expanded and formalized, it may eventually identify a greater need for Lakeside MHPTR services which are funded by Orange County. It will identify people who need long term, secure placements. It may impact on court resources, due to long term court supervision of defendants. However, fewer jail beds would be used by the mentally ill as they will be processed out of jail more quickly and arrested less often. It is a more effective and humane process than the old system of treating people and releasing them without supervision.

Role of Defense Counsel:

Nothing in this attachment changes or otherwise disrupts the constitutional and ethical obligations of defense counsel to seek acquittal or dismissal whenever possible and to advocate for the least restrictive sanction for any client.



**STAFFING
AND
PERFORMANCE
COMMITTEE**



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Mr. J. Ricardo Daye
Manager
Orange County Human Resources
Committee Staff Director



I. PROCESS AND BACKGROUND INFORMATION:

The Staffing and Performance Committee met periodically to hear public and staff testimony, to review past jail studies and to evaluate current County policies and Corrections Department operational processes and procedures. The Committee also examined the Department's organizational structure, staffing models, overtime, staff retention and turnover, recruitment initiatives, employee performance, pay and promotional opportunities. Committee members researched national and State of Florida accreditation criteria to determine the feasibility of establishing and achieving the required standards of operation. Additionally, this Committee, along with other JOC Committees, partnered with the University of Central Florida, Department of Criminal Justice and Legal Studies, to solicit and analyze employee feedback via focus groups of randomly selected employees and a survey of all Department employees to determine their overall job satisfaction.

The Department's Health Services unit became a focal point for the Committee as a result of its high rate of medical staff turnover and the difficulty in filling these critical positions. This staffing challenge was due primarily to the national shortage of nurses and Corrections' competition for the limited pool of qualified personnel within area hospitals and medical facilities that often provide lucrative pay incentives and more attractive working environments. A considerable amount of the Committee's effort was spent with management and staff of this unit to explore alternatives for the staffing and operational dilemmas.

Summary of Key Focus Areas

- 1) Current policies and procedures and comparison of existing protocols to national standards
- 2) Recruitment, retention and job performance of certified Corrections Officers and Medical staff
- 3) Various issues that may be hindering the performance of Corrections staff. Examples include hiring, retention, salary, work culture, training and labor-management relations.



II. ISSUES, FINDINGS, AND RECOMMENDATIONS:

1. ISSUE — NEED FOR ACCREDITATION:

A. Findings of Fact:

There are 3,300 Correctional institutions in the United States, 100 of which are nationally accredited. These institutions have consistently provided above average quality of service to their communities and the offenders in their custody by achieving industry recognized standards of accreditation. Research also shows that accredited agencies benefit from reduced liability insurance costs, greater defense against lawsuits, and safer environments for staff and offenders. Ten (10) of the one hundred (100) jails in Florida are accredited.⁴⁰ Orange County Corrections, while once nationally accredited by the American Correctional Association (ACA), lost its accreditation in August 1998. The Department, currently in a candidate status for re-accreditation with the ACA, needs to satisfactorily address issues that do not meet standards. Two outstanding issues that needed to be addressed were the need to appoint a permanent Director for the Department and the need to expand the facility to address inmate overcrowding. Chairman Crotty and the Board of County Commissioners (BCC) recently appointed Timothy Ryan as Chief of Corrections and construction on the Corrections Expansion Project has begun.

B. Recommendations:

1. It is recommended that Orange County Corrections continue to pursue the ACA accreditation and explore the option of also attaining State of Florida accreditation. An ACA audit is tentatively scheduled for April 8, 2002.
2. It is also suggested that Compliance Officer positions be assigned from existing staff to conduct process auditing and to maintain quality controls for Corrections and Health Services operations. This staff should report to the respective Deputy County Administrators for Corrections and Health Services.
3. An Orange County Corrections Internal Affairs Unit should also be established within the County's Public Safety Office to more thoroughly investigate and monitor compliance with County policy and Statutory mandates. Such an Internal Affairs Unit should report directly to the County's Public Safety Director and must be independent of the Orange County Corrections Department's management.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



Issues, Findings and Recommendations continued:

2. ISSUE — OUTDATED COUNTY PERSONNEL POLICIES AND PROCEDURES:

A. Findings of Fact:

While the County Personnel Policy Manual sets general guidelines for employee and management practice countywide, Corrections, as well as other departments, establish standard operating procedures (SOP's) that comply with policy, and more specifically address operational needs. However, many countywide policy guidelines have become outdated and restrict Corrections' ability to adjust its own procedures to address changing operational needs. A team of employees, representing all departments including Corrections, participated in a comprehensive review of the Policy Manual and proposed revisions in 2000. Some of the proposals were submitted to and approved by the BCC over the past year.

In addition to the Personnel Policies and SOP's, the Department's certified Correctional staff (over 800) are governed by a collective bargaining agreement.⁴¹ This agreement is negotiated between Corrections management and representatives of the Fraternal Order of Police (FOP), Charles E. Brookfield Lodge #86. The agreement outlines the terms and conditions of employment, pay structure and pay levels for bargaining unit employees. The County and the union are in the second of a three (3) year agreement. Similarly, the American Federation of State, County and Municipal Employees (AFSCME), is currently negotiating an agreement with the County on behalf of approximately eighty-five (85) Health Services employees.

The JOC partnered with the University of Central Florida (UCF) Department of Criminal Justice and Legal Studies to facilitate a series of employee focus group discussions and an employee survey to collect information from employees about their perception of their working environment.⁴² Employees who participated in the UCF survey responded to six items designed to measure their views on organizational policies and procedures. More than sixty percent (60%) of the respondents indicated that they feel policies and procedures are neither consistently applied nor enforced. Additionally, more than half of employees surveyed did not think policies are clear or fair.

B. Recommendations:

1. It is recommended that the team's remaining revisions be reviewed and incorporated into the proposed changes to the Countywide Personnel Policy Manual.
2. It is further recommended that Corrections, upon Personnel Policy approval,



Issues, Findings and Recommendations continued:

review and revise its internal operating procedures and administrative guidelines as necessary to address current and anticipated operational needs and ensure compliance with the American Correctional Association standards.

3. Corrections and Health Services management should ensure that those guidelines, procedures and pay initiatives that best address the Department's operational needs are negotiated into new collective bargaining agreements.

C. Estimated Cost:

None.

3. ISSUE — HIGH TURNOVER RATES FOR MEDICAL STAFF:

A. Findings of Fact:

The Bureau of National Affairs reports turnover for municipalities at 1.3% per month or approximately 15.6% annually.⁴³ For organizations comparable in size to Orange County, the rate varies from 1.2% - 1.3% monthly. The current rate of turnover for Orange County Correctional Officers is 11.2%. This is considered average turnover and is in line with the County's average. On the other hand, turnover rates for the healthcare industry range from 1.1% - 5.3% per month or 13% - 64% annually. Corrections nurses' annual turnover rates have averaged between 38% to 56% annually. These rates place Corrections' nurses in the upper half of this range.

These positions, specifically Licensed Practical Nurses (LPNs), are among the most critical and among the most difficult to attract and retain.⁴⁴ As a result of the higher than average turnover rates and difficulty filling vacant positions, Health Services has become heavily dependent on agency provided temporary nurses. This alternative staffing method often provides a short-term solution, but falls short of meeting the organization's needs and management's expectations. Health Services proposes a staffing model that minimizes the use of LPNs and agency nurses but establishes more full-time Registered Nurse (RN) positions.

The UCF report indicates that a little over seventy percent (70%) of the respondents agreed that their jobs are dangerous and nearly the same number agree that a person stands a good chance of getting hurt on the job.⁴⁵ While the survey report does not segregate the specific responses of the correctional staff from medical staff, it is assumed that all employees would mutually benefit from



Staffing and Performance Committee

Issues, Findings and Recommendations continued:

management's attention to these work environment issues. Corrections may also benefit by retaining more of the medical staff that might otherwise leave to practice their professions in safer, more secure medical facilities.

B. Recommendations:

1. It is recommended that the Orange County Board of County Commissioners approves Health Services' proposed staffing model and funding for additionally requested positions (30) to replace temporary agency nurses. Health Services is encouraged to recruit the best of the agency nurses into the newly allocated RN positions because of their knowledge of the facility and familiarity with its patients. Management intends to establish pay rates that are competitive with other employers in the local market and offer retention bonuses to attract and retain these new employees.
2. It is also recommended that County Administration and Corrections management address the danger, safety and security issues identified and reported in the UCF survey. Management should involve correctional and medical staff in developing and implementing strategies to make the work environment safer, more secure and less dangerous.

C. Estimated Cost:

It will cost approximately \$1,488,492 annually to fund 30 additional positions. This includes salaries and benefits.

4. ISSUE — POSITION VACANCIES:

A. Findings of Fact:

Medical staff, including Licensed Practical Nurses (LPNs), Medical Clerks and Registered Nurses (RN's), are all significant to the operations of the Health Services Unit of the Department. They provide critical healthcare services to their inmate patients on a daily basis. Of the 4000+ inmates at Corrections, many suffer from a variety of illnesses that require constant medical care and attention. Approximately 1,600 inmates are prescribed and given medication to control their medical conditions.⁴⁶

As of October 2001, there were more than thirty (30) Medical staff position vacancies out of one hundred ten (110) allocated positions. It is a general perception that these



Staffing and Performance Committee

Issues, Findings and Recommendations continued:

positions were vacant due to competition for the limited number of nurses in the labor market, negative work environment, and the lack of meaningful pay incentives. In October 2001, seventy-six (76) certified Correctional positions were vacant out of eight hundred twenty-eight (828) authorized Correctional positions. Recruiters were challenged to find alternative methods of staffing key positions.⁴⁷

Since the Health and Family Services Department assumed management of the Health Services staff in September 2001, thirty-six (36) positions have been filled. A full-time Psychiatrist and a Director of Nursing have been hired. Nurse Supervisors have been hired on two (2) shifts, as well as a Nurse Recruiter and a Supervisor of Medical Records.

In addition, several initiatives are being considered to enhance the quality of medical services. Among them are proposals to strengthen the role of RN's in managing the medical care strategies of the Department and the establishment of a well-defined nursing chain-of-command under their leadership.⁴⁸ Health Services will request the Board of County Commissioners to approve its proposed staffing model and provide the additional funding to support it in the FY '02 budget.

As for the Correctional Officer vacancies, there have been significant improvements over the past several months. From July 2001 through October 2001, nine (9) Correctional Officers and thirty-two (32) Correctional Officer Trainees were hired. Since that time eighteen (18) additional certified Officers and sixty-nine (69) Trainees have been hired. The Public Safety/Corrections Human Relations Section significantly increased the frequency of tests, interviews, polygraphs and psychological examinations in order to streamline the hiring process and achieve its goal of having three (3) Criminal Justice Academies to start prior to January 2002. This would allow up to sixty-seven (67) employees to become certified by April 2002. Their goal was met by December 18, 2001. As of April 4, 2002, only five (5) Correctional Officer vacancies remain.

Presently, Orange County Corrections has 38 employees in the Deferred Retirement Option Program (DROP); 33 are certified staff, 3 are Nurses and 2 are support staff. Although this doesn't seem like a large number, all other agencies under the Florida Retirement System are also being impacted by this. For example, the Orange County Sheriff's Office has approximately 75 employees in DROP. It is anticipated that other neighboring county agencies in Osceola, Seminole and Lake counties as well as the Florida Department of Corrections will also be significantly impacted. This creates a domino effect, especially for corrections, because many employees use corrections employment as a stepping stone to law enforcement. Therefore, Orange County Corrections will have to remain



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aggressive in their recruitment efforts in order to stay ahead. Retention will also be a critical issue in order to provide existing staff incentives to remain here instead of pursuing careers in law enforcement or other corrections agencies.

B. Recommendations:

1. Corrections should continue to increase the frequency of testing, interviews, polygraphs, and psychological examinations and constantly revisit and enhance its recruitment and retention strategies.
2. Recruitment packages should be developed based on input from Correctional Officers.
3. Management and bargaining units should form partnerships to jointly target sources for well-qualified employment candidates.
4. Where skill deficiencies exist, Corrections should consider establishing trainee positions (with mentors) to allow inexperienced or unskilled employees to learn from experienced staff.
5. The Department should also continue to provide enough staffing for an aggressive recruitment process, especially as 38 employees under the Florida Retirement System (FRS) Deferred Retirement Option Program (DROP) begin to enter retirement in 2003-2004.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

5. ISSUE — PAY INEQUITY:

A. Findings of Fact:

In the UCF survey, sixty (60) percent of the respondents felt the within rank pay structure is inequitable. A clear majority, seventy-two (72) percent, of employees reported that they do not think the pay step structure is satisfactory. More than sixty (60) percent of the respondents did not feel that there are ample incentive programs available.⁴⁹

Most Corrections employees are represented by one of three (3) bargaining units that



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negotiate contracts with the County on behalf of these employees. Pay rates are negotiated as part of these contracts. Laborers' International Union of North America (LIUNA), Local #517, represents only a few employees and is in the last year of its current contract with the County.⁵⁰ The bargaining unit representing the largest number of Corrections employees, FOP, is in the second of a three (3) year contract with the County. Pay rates for these employees were competitive with the local employment market at the initiation of the contract and were set for the remainder of the contract period.⁵¹ A separate group of employees who provide health services to Corrections inmates are covered by AFSCME, the third (3rd) bargaining unit. The AFSCME union representative and a number of AFSCME employees provided public testimony on several issues of concern. Pay inequity was among their concerns.⁵²

Additionally, the Committee heard testimony about pay inequity from several employees, as well as the Manager and Captain of the Inmate Records Section. These employees perform the critical function of managing and tracking inmate records and staffing incoming phone calls. They interact with bail bondsmen, handle large sums of cash and facilitate the release of inmates. While these employees are not certified (and not represented by a bargaining unit), they perform some of the most critical functions and are among the lowest paid.⁵³

However, the pay issues identified with employees who provide health services to Corrections inmates demand the most immediate attention. These employees have the highest rate of turnover and are among the most difficult to recruit. County Administration recently reorganized the health services unit and reassigned it to the Health and Family Services Department. Several initiatives are underway to establish the most effective and efficient means of classifying and assigning positions and staff resources to provide quality health services for inmates. Additionally, County Administration has performed market pay studies to determine appropriate pay levels for these employees.⁵⁴

B. Recommendations:

1. It is recommended that County Administration immediately address any pay deficiencies and develop a compensation strategy to attract the best employees and to ensure the successful negotiation of fair and competitive pay rates in the contract with AFSCME.
2. It is further recommended that the FOP and the County, in the next bargaining agreement negotiations, collaboratively seek to establish a pay structure that provides fair and competitive wages that will ensure Corrections' ability to retain and attract the most qualified Correctional staff.



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3. The Master Correctional Officer program, modeled after a similar program in the City of Orlando Police Department and the Orange County Sheriff's Office, was negotiated in the current bargaining unit agreement and was approved by the BCC in March 2002. The program will be implemented in June and will provide additional pay incentives for those Officers who have met the appropriate requirements.
4. A job analysis and pay study should be conducted with the staff of Inmate Records. Each of the classifications represented in this section should be adjusted to be competitive with current market rates of positions similarly situated in the Corrections industry.

C. Estimated Cost:

Insufficient data is available to determine the cost of the AFSCME Pay Proposal. Union negotiations still underway and cost will be provided by the Health Care Administrator once negotiations are finalized.

It will cost approximately \$30,000 to implement the Master Correctional Officer Program.

6. ISSUE — WORK ENVIRONMENT:

A. Findings of Fact:

One of the key areas covered in the employee survey was safety and security of the work environment. Thirteen (13) items were devoted to measuring employees' perceptions about security and safety-related matters. Over seventy-five percent (75%) of all respondents indicated that Corrections Officers do not work in a safe environment. Additionally, over sixty-two percent (62%) of respondents felt inmate privacy rights threaten their safety. Over half of the respondents suggest that employee/inmate fraternization has created control and safety problems. The survey results further suggest problems with a lack of control of civilian access to Corrections and a lack of strict control over contraband entering the facility. Over half the respondents state that they believe scanning and monitoring devices are inadequate.

Employees reported on the survey as well as in meetings with JOC members that air conditioning systems do not operate properly in several facilities and often



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requested maintenance and repairs on critical equipment, such as cell doors, are delayed and contribute to the safety and efficient operation of the work environment.

While the perception of staff indicates a concern for their safety and security, the Department's Safety Index Report indicates a decrease in both batteries on staff and staff injuries over the last two years.⁵⁶

The Corrections Facility Expansion Project is underway and is expected to provide enough additional space and beds to reduce overcrowding and eliminate most public access and vehicle traffic within the site.⁵⁷

B. Recommendations:

1. It is anticipated that many of the work environment issues may be resolved when several of the recommendations proposed throughout this report are fully implemented. As position vacancies are filled, fewer employees should be required to work overtime. From a staffing perspective, facilities should be operated much more safely when shifts are fully staffed with well-trained, more alert employees who are no longer required to work extended hours and additional shifts. Once the expansion project is completed, there will be less overcrowding and less public access into secured areas.
2. It is recommended that continued efforts be made to further restrict public access into the Corrections compound.
3. Corrections should immediately repair or replace, as appropriate, the air conditioning systems in the Phoenix and Genesis Facilities.
4. Also, the Department should address the need for more efficient and expedient service and response to requests for maintenance and repair of equipment within all facilities of the Department.
5. It is also recommended that Corrections seek to develop labor-management cooperatives to identify and address issues regarding employee safety and incorporate the resulting solutions into contract negotiations as appropriate. These initiatives should assist in ending the problems with fraternization and other safety/security issues where employees' actions influence or control outcomes.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



Issues, Findings and Recommendations continued:

7. ISSUE — EMPLOYEE MORALE:

A. Findings of Fact:

Successful organizations periodically assess employee perceptions and opinions to more effectively address important workplace issues and concerns. Corrections has not formally solicited such input from its employees for some time. The employee focus group discussions and employee survey collected information from employees about their perception of their working environment and indicate how it affects morale.⁵⁸

Seven (7) focus group meetings were conducted at the Corrections facility over a ten (10) day period. Forty-eight (48) employees were randomly selected and participated in this process. Information from the focus groups was used to create organizational dimensions for a written self-report survey questionnaire.

The survey was administered on-site at Corrections facilities over a five (5) day period. All Corrections Department employees were given an opportunity to participate in the anonymous survey. One thousand sixty-two (1,062) employees participated in the survey; a seventy percent (70%) participation rate.

Survey respondents provided feedback in two subject matter areas related to employee happiness: Job Satisfaction and Morale.

With regard to Job Satisfaction, the responses were positive and reflected employee happiness with the day to day duties of the respondents' occupation. Specifically, more than sixty percent (60%) of the respondents stated they like their job better than the average correctional officer does. Fifty-eight percent (58%) are seldom bored in their job. Fifty-seven percent (57%) report they are enthusiastic about their jobs on most days. Fifty-nine percent (59%) report they are satisfied with their job, and nearly half find real enjoyment in their jobs. Thus, as measured by Job Satisfaction, morale in the Corrections Department is pleasantly high.

When measured by employees' perceptions of their workplace, however, morale is clearly low.

Almost eighty percent (80%) of the respondents reported that there is not enough cohesiveness and trust in the workplace. Additionally, over half the responses suggested that employees believe they are not respected by their co-workers.



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B. Recommendations:

1. The Commission believes Corrections is blessed with a workforce which, on the whole, enjoys their jobs and are Corrections professionals by choice, not by necessity. More clearly needs to be done, however, to build a sense of cohesiveness, trust and respect in the workplace. Corrections should review the results of employee surveys similar to that conducted by UCF, but conducted in other Corrections agencies, in order to compare findings and identify best practices within the industry that might point to feasible solutions in Orange County.
2. Corrections should continue the quarterly Awards Ceremony to recognize employees for years of service, promotions, community service, outstanding service, meritorious service, etc.
3. Supervisors should continue to use “On the Spot” awards for informal recognition of staff.
4. The Master Correctional Officer program was approved by the BCC in March and will be implemented in June. It will reward more tenured employees who do not wish to pursue a supervisory role but assume higher levels of responsibility due to their years of experience.
5. The Department should reinstate routine tours of its facilities with community groups, leaders and VIPs to better educate the public about Corrections and increase the morale of employees by providing them opportunities to portray a positive image of their position and its value to the community.
6. The incoming Director and his senior management team should also aggressively seek speaking opportunities before local service clubs, community groups, and political organizations, to address the important role Corrections plays in public safety and to publicize all that the men and women of corrections do right.
7. It is recommended that the Department formally re-assess employee morale in six (6) months and again in twelve (12) months.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



Issues, Findings and Recommendations continued:

8. ISSUE — LEADERSHIP:

A. Findings of Fact:

Over the past five years Corrections has been lead by no less than four different Directors. Each Directors' priorities and agendas have differed, leading to an absence of consistent direction and leadership. As a result rank and file employees have gradually lost confidence in the leadership of the Corrections Department. It is clear, however, that this cannot be laid at the feet of the current Director. The Commission believes Director McAndrew has done more in 7 months to restore confidence in leadership and to build morale than was done in the 5 years preceding his tenure. He has not had the time, nor the leadership team, to reverse years of deteriorating morale that resulted from inconsistent leadership and direction.

The Commission's belief that rank and file employees have lost confidence in the leadership of the Department is not simply a "perception" of the Commission. Rather, it is a view validated by the results of the UCF survey measuring employee perceptions of the Department senior management and leadership, results which are cause for major concern:

Fifty-six percent (56%) of respondents believe leadership direction is inadequate;

Thirty-eight percent (38%) believe senior level officers do not support junior officer floor decisions, while only thirty-three percent (33%) believe they do support junior officer floor decisions;

Sixty-four percent (64%) believe their supervisors lack adequate floor experience;

Sixty-two percent (62%) believe upper management is unresponsive to "in-house" problems;

Sixty-two percent (62%) believe management fails to be proactive and fails to address day-to-day problems;

Sixty-four percent (64%) believe management is not unified at the Jail;

Seventy percent (70%) believe management does not support line staff decisions;

Fifty-seven percent (57%) believe supervisors fail to support staff in their jobs;

Forty-two percent (42%) believe administration unduly interferes with inmate



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disciplinary actions, while only twenty-one percent (21%) believe administrators do not interfere. A nearly identical percentage of staff believe administrators do not support correctional officer disciplinary actions; and,

One half of the employees surveyed believe senior staff does not respect them. While there is not a benchmark for the views of line staff on management and the survey does not measure a trend, management should be concerned that the negative views appear to be extensive.

Corrections Department employees have low confidence in their leadership and believe senior management is unconcerned with issues affecting them. This perception is borne out by the survey, as well as by innumerable testimonials from employees, both publicly before the Commission and privately during Commission tours of the various facilities and shifts. These employees shared their experiences as they relate to being denied opportunities to voice their opinions and instances when management was made aware of specific issues involving the work environment or operations, but were reluctant to initiate any actions to follow up on the employees' concerns. Overall, these employees expressed great dissatisfaction with the competence, availability, support, and leadership of their supervisors above the rank of sergeant. While those who gave testimony do not necessarily reflect the views of others, there were enough of these comments to raise concern with the Commission. Hence, the Commission initiated its survey.

Members of the Commission were particularly disturbed that some in senior Corrections management seem to be unwilling to directly acknowledge and confront what are perceived as serious, deep-rooted, failures with its leadership and management practices. "Senior Corrections management" is referred to as those of the rank of Lieutenant and above within the Department. There is a perception among Commission members that senior Corrections management, when confronted with findings, whether from the UCF survey or from employee testimony, that their own leadership practices may contribute to low employee morale, often refuse to acknowledge ownership of the problem. In many cases they seek instead to blame management failures and/or problems on either the media or on mere employee disgruntlement, a common response of organizations subject to intense media or public criticism. This must change if employee morale is to be raised within the Department, and as important, if public confidence in Orange County Corrections is to be restored.

B. Recommendations:

1. Director McAndrew has made great strides in improving working relationships



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with and among employees. However, as an interim Director he has simply not had the time to completely reverse a situation created by years of poor management practice. More needs to be done to address the issues and perceptions reported by employees on the survey and in their communications with the JOC. The new Department Director will have a unique, one-time window of opportunity to address these leadership issues and perceptions. He should expand employee communication networks, involve employees in improving the work environment and partner with County Administration and his management team to develop and implement strategies that stimulate employee morale.

2. The new Department Director should also take advantage of the unique opportunity afforded him as an incoming Director to perform a top to bottom review and evaluation of his senior management/leadership team.
3. In so doing he should ask UCF to perform further detailed analysis for him of its survey results to pinpoint by facility and shift where there may be serious failures of management and leadership. He must not be reluctant to reassign or to remove senior managers of the Department who are failing to effectively lead their charges or who do not have clearly defined roles and responsibilities in the management structure of the Department.
4. Senior County management and the County's political leaders should give the new Director free rein to install his own leadership team free of political interference and without concern for how such actions may reflect upon County Government or former administrators of the Corrections Department.

C. Estimated Cost:

None.

9. ISSUE — COMMUNICATION:

A. Findings of Fact:

The UCF survey featured seven (7) items that measured the extent to which employees perceived lines of communication to be open and available.⁵⁹ Almost sixty percent (60%) of all respondents felt the computer information management system is accessible. However, about the same number of employees reported that information is not readily passed down the chain-of-command. Additionally, over half the respondents indicated that meetings are inadequate for communication. Over sixty percent (60%) of



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employees indicated that directors and senior staff do not frequently attend staff meetings, and nearly the same number felt senior management does not respond to line staff suggestions.

The survey also sought to determine how employees feel about the extent to which job information is formally transmitted from the employer to the employee (from top down). There were five items used to measure this dimension. Over eighty percent (80%) of the respondents were informed to some degree about what is to be done on the job. About the same number were informed to some degree on what's most important about the job. Similarly, a little over eighty percent (80%) felt they were to some degree informed about how equipment is used and also about rules and regulations. Ninety percent (90%) of the respondents felt that they were to some degree informed about what they need to do the job correctly.

B. Recommendations:

1. Corrections management should focus more directly on keeping lines of communication with employees open and accessible.
2. It appears that some improvement in the areas of using meetings effectively and vertically sharing information in the chain-of-command may also prove beneficial in strengthening relationships and enhancing overall communications.
3. Based upon this feedback, management should initiate more opportunities to get staff involved in decision making where appropriate and implement their ideas and suggestions as they relate to improving their job and work environment.
4. It is recommended that Corrections formally re-assess employee satisfaction with communication initiatives in twelve (12) months.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

10. ISSUE — PERFORMANCE MANAGEMENT:

A. Findings of Fact:

In order to accomplish its desired goals and objectives, it is critical that Corrections establish and communicate clear performance expectations with its employees. Equally



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important is the degree to which the department measures employee performance and provides meaningful and periodic feedback.⁶⁰ The Committee reviewed and assessed Corrections' performance management instrument and process.

The present performance management plan has been in place since 1997. It was initiated as a Countywide plan but has since been abandoned by several departments who have established alternative methods of establishing performance plans and evaluating employee performance.

A 1999 survey of Corrections supervisors indicated that sixty-nine percent (69%) of them felt the evaluation process was not easy to use or understand.⁶¹ They also indicated that the process provides little opportunity to assess team performance, an important dimension in providing the kind of services performed at Corrections. Fifty-eight percent (58%) of the survey respondents disagreed with the performance plan's adaptability. They felt it did not encourage dialogue between supervisors and employees.

The Human Resources Division, along with a countywide team (including representatives from Corrections), has been researching best performance management practices and will be proposing an alternative plan option to County Administration in mid 2002.

There are various types of employee awards and recognition. An Awards Ceremony is conducted each quarter. However, seldom are the rewards related to job performance for non-certified staff. A very few employees (four (4) or five (5) annually) ever receive such low ratings that they forfeit their annual salary adjustment. In these very few instances, the employees have the ability to bring their performance up to "on target" within the following quarter, at which time they would receive their annual salary adjustment.

Management and FOP have negotiated a Master Correctional Officer program that would reward more tenured employees who do not wish to pursue a supervisory role.⁶² This was modeled after a similar program in the City of Orlando Police Department and the Orange County Sheriff's Office. The Orange County Board of County Commissioners' approved this program on March 12, 2002.

Some other recommendations to be considered for recognizing employee performance are:

- Award additional day off for no call-ins or sick days used



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- Award bonuses for employee referrals of new employees
- Provide a variety of additional incentives

The strict adherence to standards and policies has resulted in approximately sixty (60) terminations since 1999 and sixteen (16) resignations pending the completion of an internal investigation or disciplinary action. The Corrections Department is committed to having a work force with the highest ethical and moral standards dedicated to public safety and worthy of the public's trust. In order to ensure consistent disciplinary action, the Department's Public Safety/Human Relations (PS/HR) staff attends disciplinary hearings and provides feedback to the managers on previous disciplinary actions for similar offenses. In the case of certified staff, PS/HR staff provides to management the appropriate agency actions based on Florida Department of Law Enforcement (F.D.L.E.) guidelines. The PS/HR staff offers suggestions on resources available to assist the employee in avoiding recurrences of infractions and improving performance.

All employees must adhere to Orange County and Department policies and standards and guidelines of the ACA and the Florida Department of Law Enforcement (FDLE). All infractions of these policies by certified staff that fall under the Disciplinary Standards of FDLE's Criminal Justice Standards and Training Commission (CJSTC), must be reported to that agency.⁶³ Whether an employee receives discipline or resigns prior to the completion of an investigation or pre-determination hearing, Public Safety/Corrections HR sends the entire case to FDLE. CJSTC will review the case to ensure that the agency has taken significant action according to their guidelines. To further ensure that all staff understands FDLE guidelines, the Commission's Professional Bulletin is posted on the Departmental Bulletin Board quarterly and filed in a public folder.

B. Recommendations:

It is recommended that a representative group of employees be involved to initially "pilot" the new performance management process and recommend adjustments for broader application throughout the Department.

C. Estimated Cost:

None.



Issues, Findings and Recommendations continued:

11. ISSUE — ADEQUACY OF TRAINING AND DEVELOPMENT INITIATIVES:

A. Findings of Fact:

Training and development of Corrections staff is essential to their ability to retain requisite certification and to accomplish the Department's goals and objectives. The Committee reviewed and assessed the quality of training courses and employees' access to important training opportunities.⁶⁴

Each year, the Training and Staff Development Section conducts a Department-wide training survey, giving each employee, along with supervisors and managers, the opportunity to have input into the training plan for the following year.

The Training and Staff Development Section has recently implemented a new structure for training certified staff members that will impact the manner in which all staff members are trained. In the past, the Training Section offered a mandatory 40-hour block of training to all certified staff members. This course was taught 30-35 times each year, becoming the primary focus of the Training Section. Beginning in January 2002, the mandatory training for certified officers consists of twenty-four (24) hours of mandatory training and sixteen (16) hours of elective classes. By compressing the mandatory block, the Training Section will be able to:

- Teach all mandatory blocks in 16-20 weeks, creating more time for additional elective training for other staff.
- Allow staff members to select their training from a menu of electives along with training available from a variety of other sources rather than forcing all staff members to attend the same training.
- Allow supervisors the opportunity to customize their staff's training programs based on performance issues.
- Allow flexibility to teach more elective classes based on staff and departmental need.

The Training and Staff Development Section has begun operating on Saturdays, allowing supervisors more flexibility in scheduling staff members around their days off during training weeks. More staff will now be able to keep the same days off and still attend training.

The Training and Staff Development Section has also been offering a mandatory training program for supervisors since January 2000. This program allows all



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supervisors to receive the same training; thereby creating more consistency in the way business is conducted. This program recently won the 2001 Award of Excellence for Innovative Approaches to Training from the International Association of Corrections Training Personnel.

In January 2001, the Training and Staff Development Section began to offer 16-hour blocks of training to civilian staff to assist in completing their annual training requirements. Previously, staff members had to attend several different classes spread throughout the year, or attend training offsite to complete their requirements. The two-day, 16-hour blocks included all mandatory requirements for civilian staff (bloodborne pathogens, TB, hazardous materials) as well as courses on ethics, jail security, and computer software.

With the opening of the new Orange County Sheriff's Range, all certified staff members now complete their firearms training at a state-of-the-art, easily accessible facility located on Weewahootee Road. Corrections has two (2) fulltime staff assigned to this facility.

All staff have access to training. Training opportunities are posted on the County Intranet, in the public folders section of the e-mail system, and are often sent out directly to staff members via e-mail. This includes training provided through the County's Human Resources Division.

Corrections' training staff also coordinate and oversee the Field Training Officer (FTO) program for newly hired Correctional Officers and are preparing to begin another FTO program for Detention Service Officers.

One recognized area of need is consistently providing employees with a developmental plan and a formalized mentoring program. These have been in place previously, but have not been used over the past few years. It is anticipated that the new Corrections Director will continue to support training initiatives.

B. Recommendations:

1. As workloads continue to increase, so should training for current staff and new employees.
2. It is recommended that the Training and Staff Development Section continue to identify training needs with an annual survey and collect feedback after training to determine ways to improve the programs for greatest future benefit.
3. It is recommended that specific training be developed and conducted with in-house



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and agency nurses and medical staff, orienting and preparing them for working in a “security setting”. This training should emphasize certain practices that apply more specifically to their professional functions as they are performed in a correctional rather than a medical facility. An example might include the appropriate storage, maintenance and disposal of sharp medical instruments or equipment.

4. It is further recommended that agency nurses complete this training before being allowed into secure areas of the Jail.
5. Corrections management should also determine ways to increase the collaboration between Corrections and the Human Resources Division to enhance training opportunities and the dissemination of updated training information.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

12. ISSUE – STAFFING/EXCESSIVE USE OF OVERTIME:

A. Findings of Fact:

Corrections has been unsuccessful in securing an objective staffing analysis to ensure appropriate staffing levels. However, management considers the current authorization of positions to be inadequate due to the impact of needing to staff new security-critical Correctional posts. Additionally, there appears to be a critical need to provide sufficient additional staff in the Inmate Records Unit to accommodate a seven (7) day, twenty-four (24) hour operation. These positions were not previously budgeted.

According to the UCF survey, seventy-five percent (75%) of the respondents feel the officer-to-inmate ratio is not satisfactory. Additionally, fifty-seven percent (57%) felt the relief ratio is not adequate and over half indicate that over the past few years, the hiring cycle has been much too lengthy.⁶⁵

In Fiscal Year 2000, an average of 153 hours of overtime was worked per Correctional Officer. During this period, 116,307 overtime hours were logged and paid with a cost estimate of over \$3 million. An additional \$285,000 was paid in nursing overtime and agency supplemental staffing due to nursing shortages.⁶⁶ The abuse of Term Leave as addressed in Issue 13 also contributes to the excessive use of overtime as it requires employees to cover additional shifts for absent coworkers.



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Reducing the number of overtime hours worked by Corrections employees would obviously yield significant cost savings to the County, and potentially satisfy a number of employees who have grown weary of working excessive hours of overtime. Several employees testified that the imposition of mandatory overtime by the inverse seniority method, as negotiated in the current bargaining unit contract, is unfair. On the other hand, several employees testified that they would personally lose valuable additional income, and subsequently, the more enhanced standards of living they have grown accustomed to based upon their reliance on overtime wages.⁶⁷

The current staffing philosophy, which was negotiated as part of the bargaining unit contract with the FOP, allows more tenured Officers to choose their preferred shift assignments. Unfortunately, this staffing method appears to result in certain facilities, such as Horizon, having shifts being primarily staffed by the least experienced Officers overseeing some of the most aggressive inmates.

B. Recommendations:

1. Corrections should secure an objective analysis of critical posts and the appropriate staffing levels throughout the Department.
2. The Corrections Director should request funding to immediately address previously identified staffing deficiencies throughout the Department, as well as develop strategies to meet additional staffing needs identified by the analysis.
3. Corrections should also research options available to supplement existing staff and continue to streamline new officer recruitment, background screening and training processes to bring new staff onboard as quickly as possible. Corrections anticipates filling all current vacant positions by May 31, 2002.
4. It is recommended that Corrections negotiate with FOP a more equitable means of assigning overtime than the current method.
5. The Department should also re-evaluate staffing patterns regarding the experience level of staff relative to facility and shift assignments.
6. In order to provide the appropriate balance of experience, it is recommended that senior officers be offered incentives for accepting temporary assignments to less desirable shifts and facilities.



Issues, Findings and Recommendations continued:

C. Estimated Cost:

Insufficient data is available to determine cost or savings.

13. ISSUE — ABUSE OF TERM LEAVE:

A. Findings of Fact:

Term Leave is a Countywide benefit intended to provide paid leave for employees experiencing a long-term illness or short-term disability.⁶⁸ All regular employees earn .0231 hours of Term Leave for each paid scheduled hour of work. This equates to a little over 6 days per year for an employee working a 40-hour workweek. After forty (40) consecutive hours of absence due to a medical incapacity, all associated hours convert to Term Leave. All regular employees also earn a minimum of 5.54 hours of Personal Leave each pay period. This equates to 18 days per year for an employee working a 40-hour workweek, and who has less than 5 years of County service. Personal Leave is intended for use as a periodic vacation; and to provide a paid leave of absence when an employee is ill or needs to attend to personal matters.

Employees who separate from County employment are paid out all accrued but unused Personal Leave. On the other hand, employees separating from employment are only paid twenty-five percent (25%) of their unused Term Leave balance, if they have completed ten (10) years of service with the County. This restricted access to Term Leave often results in employees, especially those with higher Term balances, using it whenever possible in order to get the paid time off, and still preserve their Personal Leave balance. It is management's perception that employees who would otherwise report back to work within a day or two after a minor illness, stay out the additional days in order to be able to use Term Leave. This practice also contributes to the overtime issue by requiring employees to cover additional shifts for absent coworkers.

B. Recommendations:

1. It is recommended that the Department reinforce management's responsibility to clearly explain the purpose and intent of Term Leave versus Personal Leave.
2. Management should also exercise their right to require appropriate medical documentation to support the reason and duration of the Term Leave absence.
3. The Public Safety/Corrections Human Relations Section along with the



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County's Human Resources Division should further research best practices regarding Leave options in comparable public entities to determine potential solutions to the inappropriate use of Term Leave.

C. Estimated Cost:

None.

14. ISSUE — LACK OF SPECIAL RISK RETIREMENT BENEFITS FOR NURSING STAFF:

A. Findings:

The average tenure of nurses in Health Services is 4.3 years (as of February 2002). Service credit that is earned as a member of the Florida Retirement System (FRS) is valued according to the percentage value provided by the class or plan the employee is under at the time of service. Employees in the "Regular Class" earn service credits at 1.6% (up to age 62 or 30 years) for each year of creditable service in a covered position with an FRS employer.⁷⁰ However, employees in the "Special Risk Class" earn service credits at 3% (for service earned on or after 1/1/93).⁷⁰

Last year legislation was passed to make nurses employed by State of Florida Correctional institutions eligible for Special Risk retirement. When considering the work environment within a correctional facility, becoming eligible for Special Risk retirement would be an added incentive to attract and retain nursing staff at Corrections.

B. Recommendations:

It is recommended that lobbying efforts take place to include Special Risk retirement as a benefit for County Facility nursing staff. The County should be aware that this would increase the amount paid into the retirement fund for these employees.

C. Estimated Cost:

Insufficient data is available to determine cost or savings.



III. RECOMMENDATIONS THAT HAVE ALREADY BEEN IMPLEMENTED:

1. Audit conducted by the American Correctional Association (ACA) and ACA will recommend national accreditation to the Commission on Accreditation for Corrections.
2. Received approval for thirty (30) additional positions in the medical unit.
3. Significantly improved recruitment efforts.
4. Significantly reduced the number of corrections officers position vacancies from eighty-nine on July 30, 2001 to five (5) on April 4, 2002
5. Significantly reduced the number of medical position vacancies from twenty-seven (27) on September 24, 2001 to thirteen (13) on March 25, 2002.
6. Hired a permanent Corrections Director.



TECHNOLOGY COMMITTEE



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I. PROCESS AND BACKGROUND INFORMATION:

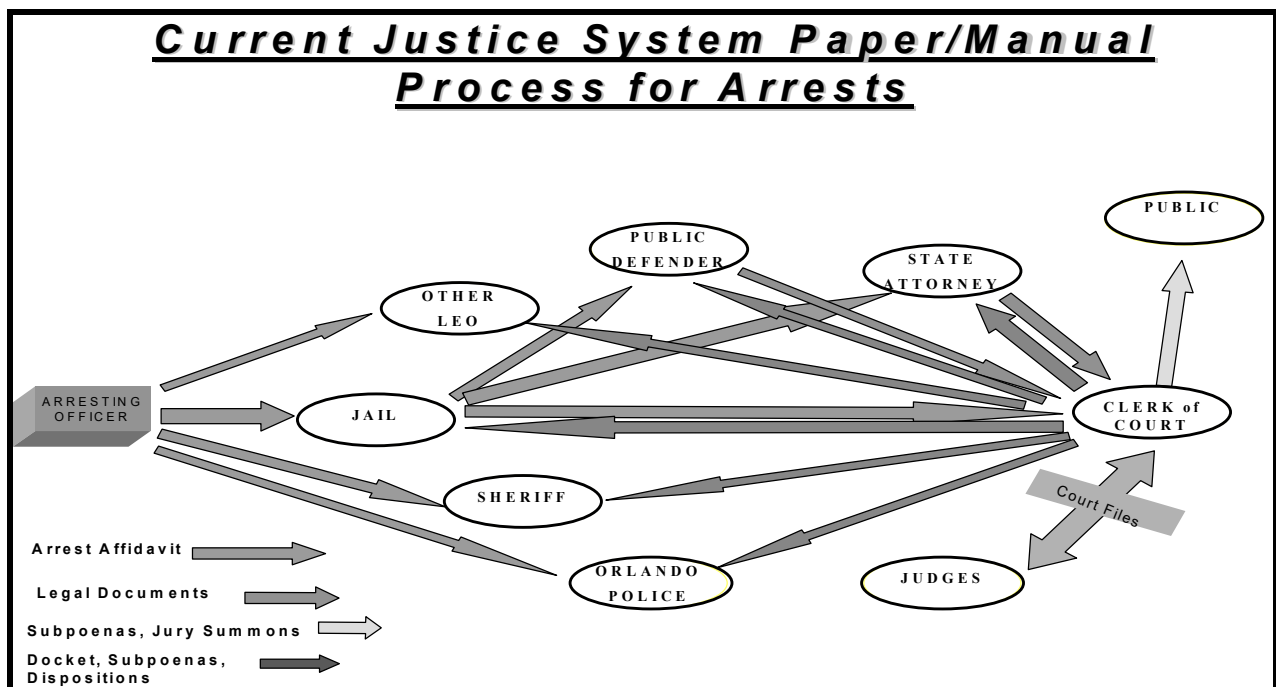
The Technology Committee is pleased to submit its report to the Jail Oversight Commission. The Committee gratefully acknowledges the contributions of Warren Geltch, Committee Staff Director, and other staff from local criminal justice agencies who provided significant support to the Committee and the preparation of this report.

The Orange County criminal justice system consists of seven independent agencies—Orange County Sheriff, Orlando Police, the Jail, the Public Defender’s Office, the State Attorney’s Office, the Clerk of the Court, and the Judiciary. Each agency has a defined mission and independent leadership. Other than their similar missions, the only unifying forces making the agencies interdependent are their common source of funding and their reliance on one another for timely and accurate information.

Each agency has developed its own internal information systems largely independent of other agencies. At the same time, the required flow of information among the agencies has increased, requiring the development of an array of manual, paper-based methods for exchanging information and documents.

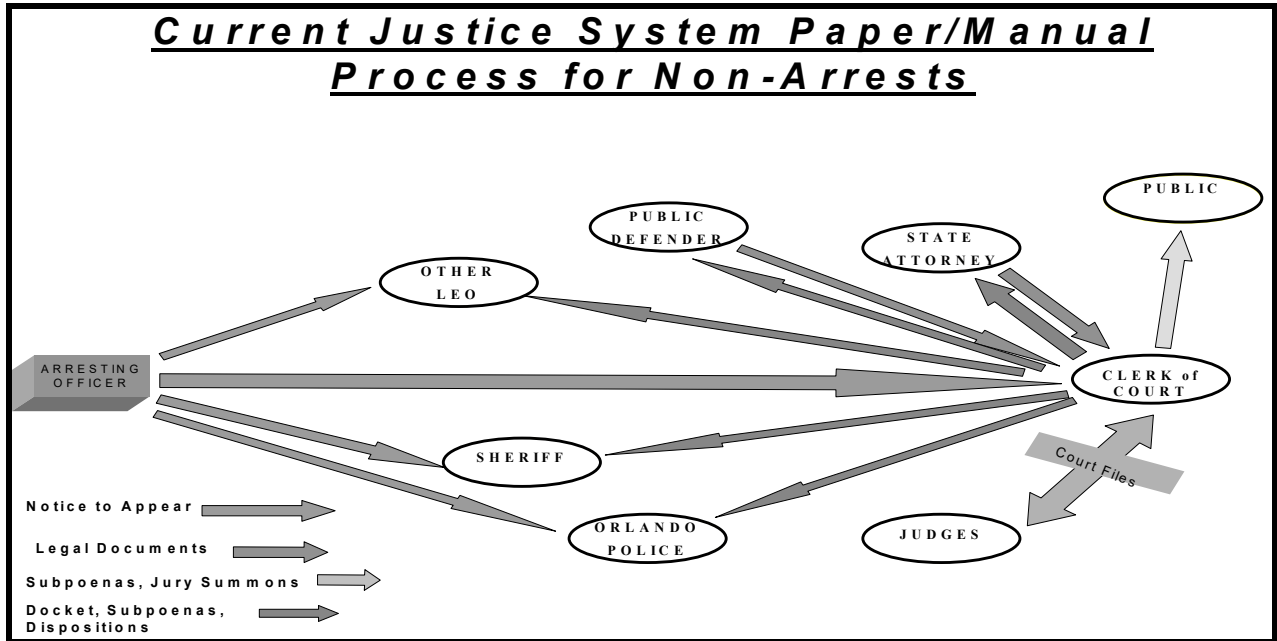
Figures 1 and 2 illustrate the current information flows between the seven agencies, as well as outside law enforcement agencies and the public. The arrows represent the direction of information flow, and their relative width indicates the volume of information passed between the respective agencies.

Figure 1



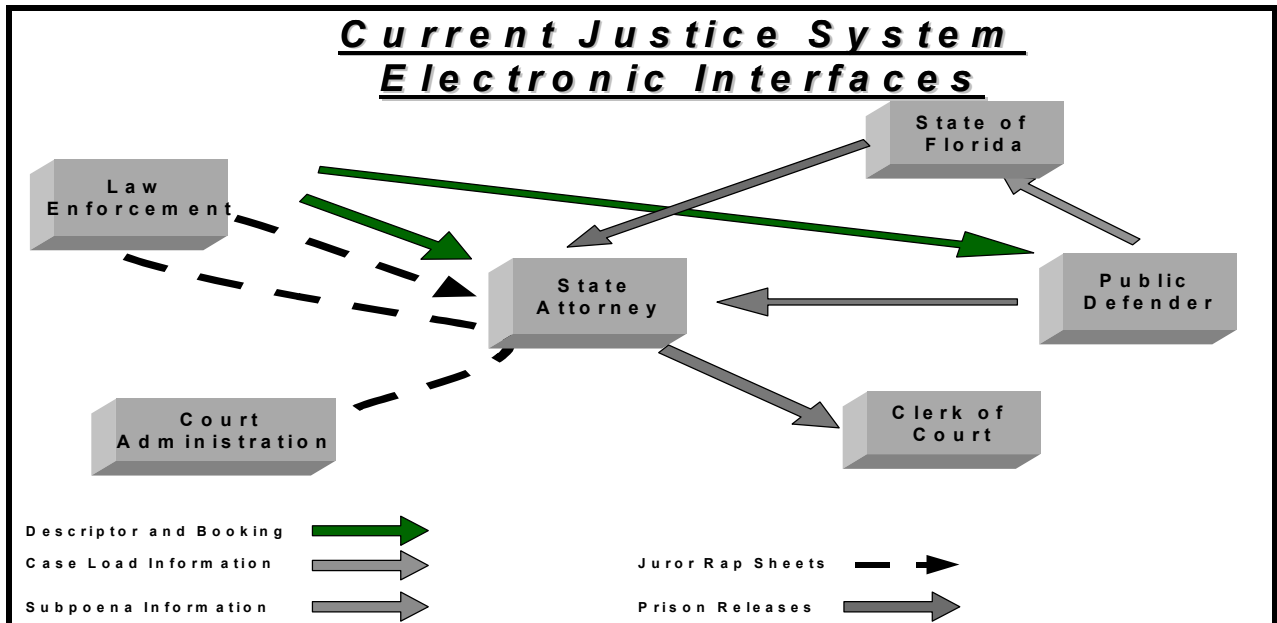
Process and Background Information continued:

Figure 2



It is significant to note that at the present time nearly all information exchanges between these agencies are manual, paper-based process. Figures 3 illustrates current interagency electronic exchanges of information are minimal communications of limited data. As a consequence, the movement of information among the agencies is slow, costly, labor-intensive, duplicative, and error prone. Data are produced on paper by one agency, delivered to other agencies by fax or courier, and must be re-keyed into the others' information systems.

Figure 3



Technology Committee

Process and Background Information continued:

Because the information systems of the seven agencies were designed and implemented independently, data elements used by the various agencies are not consistent in format and definition, further complicating the exchange of meaningful information.

Recognizing these issues, technical and managerial personnel from the seven agencies began meeting in 1994 under the structure of the Justice Information Team (JIT), consisting of a Technical Committee and a JIT Management Committee, to foster improved information flows among the agencies, and to design an architecture for an Integrated Criminal Justice Information System (ICJIS) that would serve as an information exchange between the agencies. The JIT Management Committee is chaired by a representative of the Orange County Clerk of the Courts.

Although this Committee has the term “technology” in its title, the primary focus of the committee is on information. In this regard, the Technology Committee established five goals to guide its work and shape its recommendations. They are:

1. Provide accurate and timely information where, when, and in the format needed
2. Eliminate information bottlenecks
3. Reduce to a minimum paper-based manual processes
4. Reduce to a minimum redundant data entry
5. Foster ongoing information systems cooperation and planning among all Orange County criminal justice agencies to work toward these goals in a spirit of continuous process improvement

II. ISSUES, FINDINGS, AND RECOMMENDATIONS:

1. ISSUE – INMATE MANAGEMENT SYSTEM:

A. Findings of Fact:

Background and Need

The Orange County Corrections Department and the Information Systems and Services Division (ISS) published a Request for Qualifications (RFQ) on March 19, 2001, for the replacement of the existing jail database, known as “JailTrac”⁷¹. Currently, the process has reduced the number of potential vendors to five (5) and site visits at jails utilizing the various vendors’ products have begun. Site visits will be completed during March 2002 and the authorized procurement committee of Orange County will make a final recommendation to the Board of County Commissioners in May 2002.



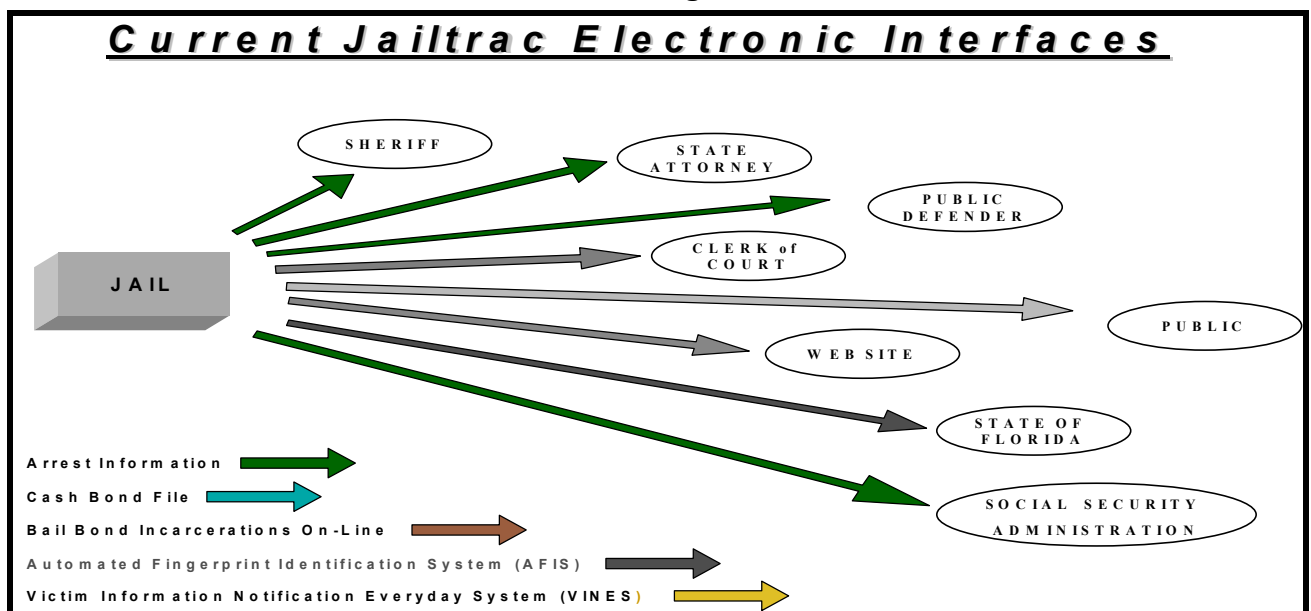
Issues, Findings and Recommendations continued:

The existing JailTrac system is a legacy IBM mainframe system that was developed in 1989 and implemented in Orange County in July 1992. In 1989, Corrections' management required that the JailTrac design closely adhere to the exact booking, tracking, and release process to the point that hard-copy forms were transformed into computer data screens. The original design included specialized medical, property, incident reporting and redundant inmate release protection functions. It was later determined by Corrections management that the medical, property and incident reporting functions were too difficult and cumbersome to use. The complexity and difficulty of these functions were the result of a strict JailTrac design adherence to the manual booking, tracking, and release processes of the time. As a result, these functions were omitted from the system during the implementation of the future releases of the software.

Many subsequent modifications have been made to the JailTrac system to improve functionality for the Corrections Department. A core part of the application remains in the exclusive domain of INSLAW (the vendor) and cannot be modified by the customer. With that exception, all other support is handled by a three (3) person group of technical staff at the County's Information Systems and Services Division (ISS).⁷² As Figure 4 indicates, external electronic communications to other agencies are one-way and limited to the following interfaced files:

- Partial arrestee information - Orange County Sheriff's Office, Orange County State Attorney, Public Defender, and Social Security Administration
- Cash bond file - Orange County Clerk of Court
- AFIS (Automated Fingerprint Identification) - State of Florida
- Bail bond information - Orange County web site
- VINES (Victim Identification Notification)

Figure 4



Issues, Findings and Recommendations continued:

JailTrac is used to produce several informational and statistical reports for internal use. Examples of such reports include:

- Facility head-count
- Cell occupancy
- Inmates scheduled for release
- Capital felon inmates
- Total bookings and releases by month
- Account transactions (deposits, withdrawals, commissary sales)
- Indigent inmate list
- Visitation log

These reports are limited in nature and do not lend themselves to extensive analysis, comparisons or management reporting. For example, in August 1999, the Board of County Commissioners asked Corrections to provide information about inmates at the Jail, such as the types of crimes, seriousness of crimes, number of drug offenders with a violent history, and length of stay. This information was not directly obtainable from JailTrac. Staff was able to respond to the Board only after several weeks of manual extraction from the JailTrac system using reports generated in COBOL.

Replacement of the existing system is critical to the implementation of an effective Integrated Criminal Justice Information System (ICJIS).⁷³ JailTrac is not flexible, cannot easily be enhanced, and does not provide the types of accessible data from which to generate full-scale management reports. The current JailTrac system is so complex that the available user-defined report generator, Crystal Reports, is frequently incapable of producing the required report. This results in the need for a COBOL programmer to develop the more complicated reports, significantly increasing the cost and time for the production of the reports. Additionally, JailTrac is one of the final three applications still running on the County's mainframe system that ISS is seeking to retire within the next three to five years.

Expected Outcomes, Impacts, and Benefits:

Replacement of the existing system will significantly enhance the quality of data available to the Corrections Department and the local criminal justice system. The new system will be a user friendly and flexible system to allow multiple users to obtain information for management reporting. The system will conform to JIT requirements with standard elements to ensure data consistency. A browser-based system will provide ease of access and consistency with other JIT systems currently in place or to be implemented in the future. The system will provide real time data,



Issues, Findings and Recommendations continued:

easy access to statistical information, and standard on-line reports to reduce paperwork.

The system will allow the community to access inmate information, location, and status. Accessible inmate information will provide efficiencies within Corrections and will provide technical assistance in reducing the amount of time between arrest and adjudication. Consistent and timely data will allow for improved management practices within the Jail and other agencies that interface with the Corrections' system. The system should be able to grow as the County grows. A flexible system will allow for implementation of system enhancements as processes change or new requirements are instituted.

Implementation of the new system will result in a significant enhancement to the general quality of data available to the Corrections Department and the local criminal justice system. There will be a much greater utilization of the IMS than is currently experienced due to the level of complexity the current database presents to the average user. Reporting capability will also be significantly enhanced.

The benefits of the above outcomes include:

- Reduce the reliance on manual data input by Corrections Department staff. The magnitude of this reduction is not yet known, but should, at least, mitigate the need for additional data entry staff as the number of bookings grows.
- Expedite the booking process through electronic transmission of arrest information at or before the receipt of the inmate, thus allowing for the other processes, potentially including release, to take place more quickly.
- Significantly reduce inconsistencies in data regarding a single individual in multiple criminal justice databases, thereby lessening the probability of serious errors due to those inconsistencies. In the past, data inconsistencies have resulted in misidentification leading to wrongful arrests or releases, releases at times other than those ordered by the courts and the failure to recognize an offender has outstanding arrest warrants.
- Increase the ability to redirect resources quickly to areas of increased growth or complexity discovered in ongoing trend analysis.
- Identify the following trends in the Jail: levels of violence in particular areas, numbers of inmate grievances from certain areas or classes of inmates, changes in the levels of contraband in various areas, and changing levels of gang activity within the facilities. All are examples of operationally important trends the Corrections Department cannot currently analyze.



Issues, Findings and Recommendations continued:

Resources Required:

ISS and Corrections will provide co-project managers for this project. The Corrections project manager will represent the business side, while the ISS project manager will represent the technical side. The Corrections project manager will assure appropriate staff involvement from Corrections, schedule training and testing, and communicate Corrections' needs to the ISS project manager. The ISS project manager will represent the entire ISS Division staff and consulting skills needed to build a successful IT system. Further, the ISS project manager will: schedule, coordinate, and plan for the effective use of IT staff and resources when needed. ISS will be required to allocate at least a dozen staff to work at various times with databases, software programming, hardware installation, infrastructure support, and maintenance. The Corrections Department will need to allocate a like number of individuals representing various areas within Corrections to assure the system meets all of their data needs. Additional technical personnel will be required in order to support both IMS implementation and normal ISS and Corrections operations. Of course, the selected vendor will have an important role in the implementation process.

A steering committee of upper management from Corrections, ISS and the Administrative Services Department will provide general oversight of the project with input from the project managers and key personnel. The steering committee will make policy decisions to help keep the project on schedule, and will assure coordination of the project with other County departments. Project status reports will be presented to the JIT Management Committee to assure awareness of the project status and obtain any assistance needed from other agencies.

Testing and training for the implementation of the above recommendation will entail a significant amount of time. Most vendors of large systems offer a "train-the-trainers" method of accomplishing the transfer of system knowledge to their customer organizations. Due to the need to staff most posts continuously, overtime will be necessary to accomplish initial staff training. The amount of training and expense is difficult to anticipate prior to completing at least a full definition of the final system. No additional staff are anticipated for the training necessary prior to implementation; however, the Corrections Department must annually budget the cost of ongoing training within their annual operating budget.

B. Recommendations:

The Technology Committee recommends the County acquire, implement, and support an inmate management system (IMS) to replace the existing "JailTrac"



Issues, Findings and Recommendations continued:

system. The Corrections Department requires system implementation prior to the opening of the new Intake and Release Facility planned for late 2004. Therefore, implementation of the new IMS system must begin by the fall of 2002.

C. Estimated Cost and Timetable to Implement:

In 1999, the County approved the expenditure of \$3,000,000 for the replacement of JailTrac. However, that figure was calculated solely as the cost of application licenses.⁷⁴

In conjunction with this report, the ISS Division has prepared a more comprehensive analysis of both the resources required and corresponding total systems costs to implement this system. Their cost estimate prepared February 13, 2002 follows:

• Software	\$4,000,000
• Hardware	550,000
• Modifications/Interfaces	400,000
• Data Conversion	200,000
• Licenses and Maintenance Support	600,000
• Consulting and Training Services	200,000
• Staff Training	50,000
• Total	<u>\$6,000,000</u>

Thus, implementation of a new system requires an additional allocation of \$3,000,000 above the current budget. Full project implementation will take approximately 24 months from the date of contract signing.

2. ISSUE — MEDICAL MANAGEMENT SYSTEM (MMS):

A. Findings of Fact:

Background and Need:

The current medical records and all scheduling and tracking activities of the Health Services Division are completely manual.⁷⁵

Paper medical charts are frequently not available to the medical practitioner seeing an inmate because medical records are centralized in the Jail's Main Facility, yet inmates are housed in all seven (7) of the jail facilities at the 33rd Street Corrections Complex.



Issues, Findings and Recommendations continued:

The Health Services Division must have access to identification, criminal offense and inmate location data. These data are available electronically through the existing JailTrac database and will continue to be available in the IMS planned replacement for JailTrac. The Division does not have data entry clerks to re-enter the data into a stand-alone database, increasing the need for integration of the IMS and the MMS.

Expected Outcomes, Impacts and Benefits:

The new MMS will allow for identification and history for inmate health assessment and treatment. It is critical that early identification of any illnesses or diseases that inmates may have be identified as soon as possible to provide alerts and warnings to the Jail medical staff. Such identification will assist Corrections staff and officers in determining the best methods of incarceration of inmates with acute medical needs and to assure maximum disease protection for the officers.

The outcomes of implementing the above recommendations include:

- The ability to access automated medical charts of the 4,000+ inmates from the expected 18 different locations where medical treatment will be provided, once the current jail expansion is completed
- The utilization of automated personnel and event scheduling to better allocate resources to meet the ever shifting demands for service
- The utilization of automated reporting for tracking a large number of variables affecting trends in areas such as frequencies of various diagnoses, requests for treatment by facility, rates of medication usage, times from requests for treatment to delivery of treatment and compliance with standards of treatment in individual inmates' care

Benefits to be realized from the outcomes listed above include:

- Better protection of the health of staff and inmates at the Jail.
- Faster and more reliable charting by medical staff, as well as more reliable access to vital medical information in individual cases
- More efficient and effective utilization of staff through the ability to anticipate shifting workloads through trend analysis
- Better control of medication costs through trend analysis that will enable the utilization of "just-in-time" medication purchasing practices, reducing on-site inventory requirements
- Better response to changing medical trends in the population by closer monitoring, such as the following examples:



Technology Committee

Issues, Findings and Recommendations continued:

- Detoxification procedures for drugs not previously seen in recreational use
- Increased level of one or more varieties of infectious disease within the population
- Effectiveness of drug treatment of various mental illnesses through the use of newly developed medications
- Effective and efficient management of the inventory of drugs at the Jail

Resources Required:

As with the IMS, the MMS will require co-project managers. One project manager will be needed from ISS (technical side) and one from Health and Family Services (business side) since it currently operates the medical unit at the Jail. At least six staff from each department will lend support for the implementation of this application. The Corrections staff, perhaps another six personnel, will also play an important role, particularly with interfaces of the various systems and with identification of the data needed by Corrections staff such as Corrections Officers. The selected vendor will provide the software and modifications as required. The organizational structure, including a steering committee, for implementing this system will mirror that of the IMS system.

Responsibility for implementation of the system will be divided among three organizations:

- The Information Systems and Services (ISS) Division, based on previous experience in the implementation of large systems in Orange County Government will be the lead agency regarding technology.
- The Corrections Department's Information Services Unit will assist in the implementation, especially in the areas of interfaces between the IMS system and the MMS system.
- The Health Services Division of the Health and Family Services Department will be the primary customer and responsible for the development of much of the requirements document. Health Services will also be responsible for ensuring that training and on-going utilization of the MMS are accomplished.

Additional human resources are not expected to be required for the implementation of the above recommendation, however, the reallocation of some Corrections resources may be necessary, e.g., the change in duties and perhaps job classification of some clerical staff to accomplish the large data input anticipated for implementation. After implementation, there is a strong possibility of reducing the number of staff in the record-keeping area; however, this may be offset by the possibility of having to increase staff in the IT area for day-to-day maintenance, report writing and general system administration.



Technology Committee

Issues, Findings and Recommendations continued:

Training for the implementation of the above recommendation will entail a significant amount of time. Most vendors of large systems offer a “train-the-trainers” method of accomplishing the transfer of system knowledge to their customer organizations. Some overtime or expanded utilization of temporary agency nursing staff may be necessary to accomplish initial staff training within the Health Services Division. The amount of training and expense is difficult to anticipate in advance of a systematic evaluation of vendor proposals.

B. Recommendation:

The Technology Committee recommends the County acquire, implement and support a Medical Management System (MMS). The solution must include integrating the MMS with the new Inmate Management System (IMS) recommended in the previous section.

Note: The Technology Committee does not recommend the County acquire and implement an interim electronic MMS software application. The Committee recognizes that most of the same human resources will be needed to accomplish all recommendations included in the Committee report. Additionally, the time and resources involved to select an interim system and vendor, assign resources to implement the system, input data, train staff, and fully implement the new system could take more than two years. This would still not result in total integration and exchange of information between the interim medical system and the new IMS system. Integration of the IMS and MMS systems to permit sharing critical data, such as inmate infectious diseases and substance abuse information, is mandatory.

One alternate interim solution may be to contract directly with a third-party provider that already has a medical system in place, such as a hospital or medical facility. This provider would begin compiling medical records database on inmates starting from a single point in time, and maintain the database with some minimal, but sufficient interface with the current JailTrac system to assure proper inmate identification and records. The time required to proceed through the procurement system to acquire a third-party provider should be taken into consideration when determining whether this solution should be adopted. Insufficient data is available to determine the cost of this alternative at the current time.

C. Estimated Cost and Timetable to Implement:

No funds have been approved or allocated to for this project at the current time. A



Issues, Findings and Recommendations continued:

projected cost estimate by ISS dated February 13, 2002 follows:

• Software	\$1,500,000
• Hardware	550,000
• Modifications/Interfaces	400,000
• Data Conversion	50,000
• License and Maintenance Support	290,000
• Consulting Services	350,000
• Training	<u>35,000</u>
• Total	\$3,175,000

Once a formal allocation of funds has occurred, the procurement process, from development of a requirements document and Request for Proposals (RFP) through Board of County Commissioners approval of a contract, will take up to ten months. Post contract award implementation of a system of the size will be approximately 24 months.

3. ISSUE — INTEGRATED CRIMINAL JUSTICE INFORMATION SYSTEM (ICJIS)

A. Findings of Fact:

Background and Need:

As noted in the introduction, virtually all information exchange among Orange County criminal justice agencies is conducted by means of manual, paper-based processes. Such processes are slow, labor-intensive, duplicative, and prone to errors. A means must be found for the agencies to exchange information in electronic format rapidly and accurately.

Justice Information Teams (JIT), composed of Executive, Management and Technical members from all the Orange County justice agencies and State Department of Corrections, have worked on the ICJIS initiative for seven years and have established the organizational structure necessary to develop and maintain the ICJIS.⁷⁵ The Technical, Management and Executive Committees of the Justice Information Teams (JIT), are currently structured appropriately to govern the ICJIS.⁷⁶

The ICJIS partners are currently working with the National Center of State Courts in developing a Request for Proposal for the selection of a vendor to implement Phase I of the project. The Constitutional Officers and Justice Agencies within Orange County have committed to developing an Integrated Criminal Justice Information System (ICJIS) through the JIT.⁷⁷



Technology Committee

Issues, Findings and Recommendations continued:

The current plans for implementation of ICJIS are:

- Hire an outside project manager or firm to provide in house technical project implementation management.
- Manage the ICJIS implementation and provide supervision of the Implementation Technical Project Implementation Manager or vendor through the Criminal Justice Coordinator's Office.
- Assign a project team, composed of Functional Project Leaders from major agencies, to the project full time until the project is completed.
- House the ICJIS hardware and software in the Regional Computing Center (RCC) so that the County's Information, Systems and Services (ISS) Division can provide 24 hour/seven day per week support to the hardware, operating system, and software.
- Upon selection of a vendor and definitive ICJIS solution, develop a Service Level Agreement (SLA) between ISS and JIT to will identify and detail resource requirements for continued maintenance of the ICJIS system.

The Committee proposes the project be implemented in three phases:

- Phase I includes the following: creating a Master Person Index (MPI), establishing Enterprise Application Interfaces (EAI) between all agencies and the ICJIS hub, mapping the ICJIS agency data needs with a standard format, and enabling the sharing of arrest affidavit data.
- Phase II will enable the electronic dissemination of court documents and schedules.
- Phase III will provide for imaging and electronic signatures among the criminal justice partners.

The Board of Orange County Commissioners supports the development of an ICJIS, and has approved at least partial Capital Investment funding for the system as many other jurisdictions are doing.⁷⁸

The JIT worked with a major corporation, possessing subject matter knowledge, in developing an ICJIS Strategic Plan.⁹ The Jail Oversight Commission Criminal Justice Case Processing Sub-committee has reviewed the ICJIS Strategic Plan and determined that the design has the potential of performing both the routing and translation functions that are needed in sharing justice information.

A national study conducted by the Department of Justice and State Chief Information Officers recommends capturing data on the street and sharing it throughout all justice agencies as proposed in the Orange County ICJIS design.⁷⁹



Issues, Findings and Recommendations continued:

Expected Outcomes, Impacts and Benefits:

The following benefits and outcomes will result from implementing ICJIS:

- Fluid information flow between the respective agencies in an effective and efficient manner
- Mechanized Charging Affidavit
- Positive Identification early in the process
- Data available via Internet browser
- Common source of data
- Common identifier for person data element for all users
- Reduced data entry
- Reduced paper exchange
- Information available faster to all agencies
- Information available earlier in the arrest process for Corrections and Judges
- Improved data visibility
- Easier access to statistics and reports
- Improved alerts and warnings
- Incomplete or missing data may be identified to responsible party sooner
- Ability to bring together the Automated Finger Print Identification System (AFIS) I.D., mug shot image and criminal history in one place
- Future development must include a single local AFIS and database. A local AFIS will enhance safety and expedite jail bookings and classifications by allowing expeditious remote identification of offenders. Further plans are to create arrest affidavits in electronic form before the inmate is incarcerated.

ICJIS implementation will result in the more efficient use of building space. This has been programmed into the design for the new Intake Facility by the architect; however, to realize these efficiencies, Phase 1 of ICJIS must be in place before operations of that facility begin.⁸⁰

Resources Required:

Participation from each agency's staff will be needed to complete this project successfully. As indicated above, these agencies have been working together on this project since 1995 and plan to hire a project manager from project funds to take the lead on the business side of the project. ISS will provide the technical project manager. Several IT staff from each agency and ISS will provide technical assistance. The JIT will serve as the steering committee to assure timely project completion, coordination of all agencies, and decision-making on major policy



Technology Committee

Issues, Findings and Recommendations continued:

issues. The JIT will provide continuing and ongoing review and monitoring of the ICJIS application after implementation to assure maximum benefit for all agencies using the ICJIS database. Should major modifications be needed in the future, the project management responsibilities will be the same as outlined above. Smaller changes and revisions will likely be made by ISS upon request by the JIT.

B. Recommendations:

The Technology Committee recommends the County acquire, develop, implement and support an Integrated Criminal Justice System (ICJIS).

C. Estimated Cost and Timetable to Implement:

The Board of County Commissioners approved \$2 million for each of the first two phases of ICJIS. Phase III of ICJIS will provide for imaging and electronic signatures among the criminal justice partners. The estimate for this effort is \$3 million. The business case for further funding is expected to be presented to the Board of County Commissioners for approval during the next County budget cycle. If the JOC Criminal Justice Case Processing Committee recommendations are approved, additional funding will be required for Phases I and II for the following:

- Early “quick” ID at point of arrest (Sheriff)
- Local AFIS database (Sheriff)
- Software and hardware for Courtrooms at the Jail (Clerk)
- Court case number at the beginning of the process (Clerk).

These enhancements will cost an additional \$1 million. Operational costs for the ICJIS system are currently estimated at \$100,000 annually. All dollars are estimates and would need to be verified based upon requirements and vendor quotes; however, the following is the capital cost estimate for the entire ICJIS project:

• Phase I	\$2,000,000
• Phase II	2,000,000
• Enhancements for Phases I and II	1,000,000
• Phase III	<u>3,000,000</u>
• Total	\$8,000,000

The following is the projected timetable for completion of the ICJIS project:

- RFP for Phase I issued in August 2002
- Contract award May 2003



Issues, Findings and Recommendations continued:

- Phase I implementation completed February 2004
- RFP for Phase II issued in March 2004
- Contract award November 2004
- Phase II implementation completed May 2005
- Phase III implementation completed May 2005

4. ISSUE — TIME AND LABOR REPORTING INFORMATION

A. Findings of Fact:

Background and Need:

Currently, management of time and attendance for the nearly 1,600 Corrections Department employees is an entirely manual process.⁸¹

Corrections' employees work three different shifts, seven days per week, and report to eight different physical locations to perform their work. This results in a fragmented system of recording and monitoring time and attendance.⁸³

In several divisions, employees report to a work site where there is no on-duty supervisor to verify their presence or the time they arrived and leave work, a situation that has potential for fraud.⁸³

At the present time, supervisors maintain paper calendars on employees in order to track absences and have a variety of manual systems to track employee leave balances, including type of leave used (e.g., family and medical leave).⁸⁴ This results in inaccurate reporting, duplication of effort, and extensive manual processing.

Employees are completing paper time sheets, which are subsequently entered manually by clerical staff onto transmittal sheets that are then physically transported to Payroll.⁸⁵

Expected Outcomes, Impacts and Benefits:

Implementation of an automated attendance and leave management system in the Corrections Department will:

- Reduce manual processes
- Increase accuracy of payroll and leave information



Technology Committee

Issues, Findings and Recommendations continued:

- Save time for supervisory and support staff
- Reduce the possibility of fraud regarding time, attendance and leave management.⁸⁶

An electronic time and labor reporting system will accomplish the following:

- Permit staff to sign in and out via time clock, computer or palm scan
- Compile the employee's time for the week
- Allow supervisors to monitor types of leave and leave balances. In the future it is anticipated that this system will allow for electronic transmission of payroll information as well.⁸⁷

The Corrections Department estimates that implementation of an automated time and labor system could result in labor savings of approximately seven (7) full time equivalent (FTE) support staff whose efforts could be reallocated to other tasks.⁸⁸

Resources Required:

This project will be handled by ISS and the Corrections Department in the same manner as the implementation of the IMS system with essentially the same personnel. Since additional human resources may be required to successfully undertake all of the projects outlined by the Technology Committee simultaneously, the County must be vigilant in assessing the availability of its resources and documenting personnel needs to avoid attempting to manage critical projects with insufficient resources or by taxing existing resources. This will entail prioritizing projects and project phases as well as developing accurate scheduling of project milestones.

B. Recommendations:

The Technology Committee recommends the County acquire, implement and support a system for time accruals, attendance and leave management for the Corrections Department.

C. Estimated Cost and Timetable to Implement:

Currently, there are no funds approved for this project. The most recent cost estimate provided by ISS places the total project cost at \$1,055,500 as follows:



Technology Committee

Issues, Findings and Recommendations continued:

• Software	\$530,000
• Hardware	200,000
• Modifications/Interfaces	50,000
• Data Conversion	50,000
• License and Maintenance Support	75,000
• Consulting Services	120,000
• Training	<u>30,500</u>
• Total	\$1,055,500



REFERENCES/ NOTES



CHAIRMAN'S JAIL OVERSIGHT COMMISSION

REFERENCES

1. Orange County Corrections Department Inmate Statistics Report dated October 10, 2001.
2. Palm Beach County Visit Summary
3. October 22, 2001 Testimony by the Honorable O.H. Eaton, 18th Judicial Circuit
4. Ninth Judicial Circuit Administrative Order Number 07-96-08, Administrative Order Governing the Fast-Track Case Management Program in Orange County, dated September 16, 1996
5. Ninth Judicial Circuit Court Case Processing Statistics, July 1998 and January 1999 Sample of Felony Defendant Cases, date July 27, 2001
6. May 2001 Snapshot of Case Process Work
7. Report from the Orange County Sheriff's Office
8. Orlando City Records and Budget
9. Orange County Integrated Criminal Justice Information System Strategic Plan
10. Letter from the Public Defender to the Chief Judge, dated August 28, 2001
11. Misdemeanor cases disposed for the month of November 2001, as reported by the State Attorney's Case Management System
12. Report by the jail staff, May 2001 on inmate transport
13. Orange County, Florida, Booking and Dockets Processing Study, Voorhis, July 2001
14. Ninth Judicial Circuit Administrative Order Number 07-99-32-1, order governing Notices to Appear, dated December 14, 2000
15. Presentation on Nov 14, 2001, to the JOC on Community Corrections Pretrial Services
16. Ninth Judicial Circuit Administrative Order Number 07-93-58, governing Community Corrections Programs in Orange County, dated May 19, 1994



R ferences/Notes continued.....

17. Corrections Department Personnel Survey Report, by University of Central Florida, February 2002; Personal observations of Medical Committee Chair; and Public testimony on October 18, 2001
18. Jail Study, June 200, Audit of Health Care Services – Corrections Department, by Moore and Associates; Testimony of Pam Steinke, Administrator, Health Services Division; Jail tours; and observations of Committee members
19. Medical Committee Presentation, September 20, 2001
20. Corrections Department Personnel Survey Report, by University of Central Florida, February 2002
21. Medical Committee Public testimony, October 18, 2001
22. Medical Committee Public testimony, October 18, & 29 2001; Letter from Orange County Health Department Administrator on 8-28-01
23. JOC Power Point Presentation, August 22, 2001, Corrections Medical/Mental Health Division, by Dennis Hughes, Assistant Manager, Corrections Health Services
24. JOC Power Point Presentation, August 22, 2001, Corrections Medical/Mental Health Division, by Dennis Hughes, Assistant Manager, Corrections Health Services and Medical Committee Testimony, December 6, 2001
25. Medical Committee Testimony, November 8, 2001 & January 9, 2002
26. Medical Committee Presentation by Judge Deb Blechman, November 8, 2001
27. CIT Community Roundtable White Paper
28. JOC Power Point Presentation, October 10, 2001, Inmate Statistics, by Don Bjoring, Manager, Corrections Department Direct Supervision
29. JOC Power Point Presentation, October 17, 2001, Community Corrections/Alternatives to Incarceration, by Don Bjoring, Manager, Corrections Department Direct Supervision
30. Jail protocol/procedure X300.69
31. Medical Committee Presentation, December 6, 2001
32. Medical Committee Presentation, County probation caseload report, Mr. Don Pittman, Chief Probation Officer, Community Corrections Division, March 7, 2002



R ferences/Notes continued.....

33. Medical Committee Public Testimony, October 29, 2001
34. Presentation on December 6, & 13th 2001
35. Medical Committee Public Testimony, March 7, 2002
36. GAINS, Summer 1999 Article
37. Corrections Department Personnel Survey Report, by University of Central Florida, February 2002 and Medical Committee Presentation, February 7, 2002
38. Medical Committee Public testimony on October 18, 2001
39. Main Division Standard Operating Procedure, I.O. 20-01, Inmate Housing Unit
40. JOC Staffing and Performance Sub-Committee Meeting (11/30/01), Accreditation Notes, American Correctional Association (ACA) Accreditation Standards, Lieutenant Cheryl DeGroff-Berry, City of Orlando Police Department
41. Fraternal Order of Police (FOP), Charles E. Brookfield Lodge #86, Collective Bargaining Unit Agreement
42. Orange County Corrections Department Personnel Survey Report, December 2001
43. Bureau of National Affairs (BNA), Bulletin to Management, June 2001
44. JOC Presentation (9/19/01), Corrections Department Human Resources, Kathi Cepregi, Public Safety HR Manager
45. Orange County Corrections Department Personnel Survey Report, December 2001, Table 5
46. JOC Presentation, (2/13/02), Health Services Reorganization and Future Strategy, Pam Steinke, Manager, Health Services Division
47. Public Safety/Corrections Human Relations Summary Data, Kathi Cepregi, Public Safety HR Manager/Barbara Mills, Corrections HR Coordinator
48. JOC Presentation, (2/13/02), Health Services Reorganization and Future Strategy, Pam Steinke, Manager, Health Services Division



R ferences/Notes continued.....

49. Orange County Corrections Department Personnel Survey Report, December 2001, Table 21
50. Laborers' International Union of North America, Local # 517, Collective Bargaining Agreement
51. Charles E. Brookfield, Lodge #86, (FOP), Collective Bargaining Agreement, Appendices, pp. 55-69.
52. Staffing and Performance Committee Public Testimony, (10/3/01), Pay Disparity, Brad Gonzales, AFSCME Representative
53. Staffing and Performance Committee Presentation, (2/22/02), Inmate Records Overview/Issues, Cornita Riley, Manager, Special Facilities and Inmate Services
54. Health & Family Services Department, (date) Salary Analysis of Medical Services Staff, Cindy Froling, HR Coordinator
55. Orange County Corrections Department Personnel Survey Report, Table 22
56. Orange County Corrections Safety Index Report, FY '99-'00 through FY '00-'01.
57. JOC Presentation (8/15/01), Corrections Expansion Project Update, Tony Aguerrevere, Manager, Capital Improvements
58. Orange County Corrections Department Personnel Survey Report, December 2001
59. Orange County Corrections Department Personnel Survey Report, December 2001, Tables 7 & 8
60. OC Performance Management Forms/Manual
61. Corrections Supervisory Survey on Performance Management, 1999
62. Master Correctional Officer Program Guidelines
63. Florida Department of Law Enforcement/ (FDLE) Guidelines for Significant Agency Action/Disciplinary Standards
64. Corrections Training and Staff Development Section Training Schedule
65. Orange County Corrections Department Personnel Survey Report, Table 23
66. Overtime Expenditure Trends, FY '98 – FY '02
67. Corrections Staff Salary Ranges, 2001-2002



R ferences/Notes continued.....

68. OC Personnel Policy Manual – Section 4 – Employee Benefits, Term Leave, pp. 8-9
69. Florida Retirement System (FRS), Retirement Guide for the Regular Class, 1999
70. Florida Retirement System (FRS), Retirement Guide for the Special Risk Class, 1999
71. Request for Qualifications (RFQ) for the replacement of the existing inmate management system, with follow-up documentation to vendors
72. JOC Presentation by Steve Smith, Chief Information Officer of Orange County, September 12, 2001
73. Statement by various staff members during meetings of the Technology Committee.
74. Technology Presentation by Don Bjoring, Manager of Direct Supervision, Corrections Department, October 8, 2001
75. Comments to the Technology Committee by various Corrections Department and Health Services staff
76. ICJIS Organization Chart
77. Letter from Constitutional Officers and Jail Director addressed to Mr. Joel Hartman, Chair of the Jail Oversight Commission Technology Sub-committee, dated October 10 2001
78. To Catch a Thief, CIO Magazine, July 1, 2001
79. Justice National Information Architecture, Toward National Sharing of Governmental Information, NASIRE
80. Orange County Corrections Expansion – Phase II, Facility Design Program, Section II – Architectural Space Program (pg 136)
81. through 85. Comments by Corrections Division Managers in staff meetings
86. through 87. CIP Executive Committee Presentation by Jill Hobbs, Community Corrections Manager to CIP on 4/25/01
88. Based on estimates by Corrections Managers
89. JOC Power Point Presentation, August 15, 2001, Analysis of the Crowding Situation at the Jail, by Dr. Bernard McCarthy, Dr. Ray Surette, and Dr. Brandon Applegate, University of Central Florida



R ferences/Notes continued.....

90. JOC Power Point Presentation, August 15, 2001, Corrections Capital Improvement Project, by Tony Aguerrevere, Manager, Orange County Capital Projects and Don Bjoring, Manager, Corrections Department, Direct Supervision
91. JOC Power Point Presentation, August 22, 2001, Corrections Medical/Mental Health Division, by Dennis Hughes, Assistant Manager, Corrections Health Services
92. JOC Power Point Presentation, September 12, 2001, Inmate Booking Process, Captain Dennis Warren, Central Booking Facility
93. JOC Power Point Presentation, September 12, 2001, Integrated Criminal Justice Information System, Janice Knight, Chief Information Officer, Orange County Clerk of the Courts
94. JOC Power Point Presentation, September 12, 2001, Corrections Inmate Management System, Steve Smith, Chief Information Officer, Orange County Information Systems and Services
95. JOC Power Point Presentation, September 19, 2001, Corrections Human Relations, Kathi Cepregi, Manager, Corrections Human Relations
96. JOC Power Point Presentation, October 10, 2001, Inmate Statistics, by Don Bjoring, Manager, Corrections Department Direct Supervision
97. JOC Power Point Presentation, October 17, 2001, Community Corrections/Alternatives to Incarceration, by Don Bjoring, Manager, Corrections Department Direct Supervision
98. JOC Power Point Presentation, November 14, 2001, Inmate Programs, by Wilbert Danner, Supervisor, Corrections Department Programs
99. JOC Power Point Presentation, November 14, 2001, Inmate Classification System, by Paula Hoisington, Supervisor, Corrections Department, Special Facilities / Inmate Services
100. JOC Power Point Presentation, December 12, 2001, Accreditation, by Lt. Cheryl Degroff-Berry, Orlando Police Department, JOC Staffing and Performance Committee
101. JOC Power Point Presentation, February 13, 2002, Corrections Budget, by Larry Taylor, Corrections Chief Fiscal Officer
102. JOC Power Point Presentation, February 13, 2002, Health Services Update, by Pam Steinke, Medical Director, Health Services



R ferences/Notes continued.....

103. JOC Power Point Presentation, February 13, 2002, Inmate Telephones, by Captain Dennis Warren, Corrections Department Central Booking/Horizon
104. Jail Study, July 2001, Central Booking and Dockets Study, by Voorhis/Robertson Justice Services
105. Jail Study, June 2001, Analysis of Crowding Situation at the Jail – Phase 1, Dr. Bernard McCarthy, Dr. Brandon Applegate, and Dr. Ray Surette, University of Central Florida
106. Jail Study, June 200, Audit of Health Care Services – Corrections Department, by Moore and Associates
107. Jail Study, April 1997, Jail Evaluation Project, by Dr. Bernard McCarthy, Dr. Ray Surette, and Dr. Brandon Applegate, University of Central Florida
108. Jail Study, July 1995, Evaluation of Criminal Justice Reform in Orange County Florida, by Alan Kalmanoff, Executive Director, Institute of Law and Policy Planning (ILPP)



PUBLIC TESTIMONY INFORMATION



Public Testimony Information

CRIMINAL JUSTICE CASE PROCESSING PUBLIC TESTIMONY

1. **Ronald Johnson**, Orange County Criminal Justice Integrated Systems Coordinator, August 28, 2001, Case Process/Work Flow
2. **Honorable O.H. Eaton, Jr.**, 18th Judicial Circuit, Sanford, Florida, October 22, 2001 Seminole County's Criminal Division operations and policies on case processing
- 3.-4. **John Von Achon**, President of the Tri-county Bail Bonding Association and **Bruce Moncrief**, bondsman, November 13, 2001, Slide presentation of the Commercial Surety Bail Industry
5. **Honorable Zack**, Brevard County, November 13, 2001, Addressed case processing committee on Broward County setting bonds on violations of probation.
6. **Mr. Michael Cycmanick**, Criminal Defense Attorney, County and Circuit Judge for 21 years November 13, 2001, Judges should consider a violation of probation release. Judges feel that a violation of probation is a no bond situation. The probation officers generally do not see the judge; if the probation officer could see the judge and relay conditions of release, the judge should exercise discretion.
7. **Mr. Cory Goodman**, Bondsman, November 13, 2001, Supports eliminating collect calls. Inmates should have free access to a telephone. Supports having violation of probation bonds
8. **Mr. Hal Uhrig**, Criminal Defense Attorney, The discretion of bond should be done earlier so that defendants can be released from jail earlier. The defendants cannot get a hold of their attorneys because of the collect call policy. There should be technology available for defense attorneys to be called directly.
9. **Mr. Bryant Prescott**, November 13, 2001, After bond is paid, people should be released
10. **Mr. Bob Wesley**, Public Defender, November 13, 2001, After Mr. Wesley gave notice to the media about the meeting of November 13, 2001, he received a couple of phone calls. One caller complained about the Seminole County conditions. Another call was from a Mrs. Williams who complained about a very high bond for a charge of driving while license suspended, habitual offender. A \$10,000 bond was imposed. Mrs. Williams is of the opinion that the bond amount was punishment, and wanted to be heard on that matter.
11. **Dr. Jill Hobbs**, Manager, Community Corrections Division, December 17, 2001, Gave a presentation on the pre-trial services program at the Orange County Jail
12. **Mr. Peter Antonacci**, Esquire, Counsel to Accredited Surety and Casualty, February 18, 2002 Gave a presentation regarding the role of the bail community in solving some of the issues that have been presented to the subcommittee.



Public Testimony Information continued.....

MEDICAL, MENTAL HEALTH, AND SUBSTANCE ABUSE COMMITTEE **PUBLIC TESTIMONY**

1. **Phil Emenheiser**, State Methadone Authority, Department of Children & Family Services, August 28, 2001, Overview of methadone issues and treatment.
2. **Dr. Steven Hale**, Orange County Public Health Unit, September 13, 2001, Information on tuberculosis and other infectious disease issues.
3. **Sgt. Rhonda Hennessy**, Orange County Corrections Department, September 20, 2001, Data on tuberculosis cases reported with inmates.
4. **Mike Hick**, Orange County Capital Projects Office **and Jim Strollo**, Stroll Architects, Inc. September 20, 2001, Overview of Orange County Corrections Department Medical Facility to be constructed.

OCTOBER 18, 2001:

All testifying work at the Orange County Corrections Department:

5. **Mr. Larry Rivera**, LPN from the Medical Unit in the Main Facility Orange County Corrections Jail spoke on detoxification training needed for nursing staff and alcohol toxicity.
6. **Mr. Andre Austin**, Licensed Clinical Social Worker spoke on on-call issues for mental health assessors over worked, crisis in terms of budgeted positions.
7. **Ms. Carolyn Douglas**, works at Central Booking spoke on staff competencies and outdated equipment, and the effects of stings on workloads.
8. **Ms. Fay Thomas**, Advanced Registered Nurse Practitioner in Psychiatry, delay in starting inmates on medications, difficulty in securing verification from community providers, release of information, new formulary restrictions/limitations.
9. **Thelma Jones**, LPN and works at Central Booking (C-Shift), poor communication between staff and administration, equipment and medication distribution.
10. **Dr. Lillian Vargas**, Physician. Needs a quality improvement program, need peer review, mental health is crisis intervention, need administrator for discharge planning, infrequent monitoring of tuberculosis patients, disorganization.
11. **Ms. Renee Blunt**, background in Pediatric Oncology Nurse. Need more staffing, untimely verification of medications for inmates. Critical need for automated medical records.



Public Testimony Information continued.....

October 18, 2001 continued:

12. **Ms. Anna Gonzalez** has been with the Mental Health Unit. Has past several months has been in Whitcomb and Central Booking. Has staffing needs for the mental health unit, groups for females, security, absence of Correctional Officers to provide security when conducting interviews.
13. **Ms. Connie Golembeski**- works for Medical Records. Need records all paper, and the pay issue.
14. **Ms. Petronell Tookes**- works in the medical records at Whitcomb Facility pay compression and workload.

OCTOBER 29, 2001:

15. **Alan Villaverde**, Vice President of Peabody Hotel, spoke on need for adequate treatment, and availability of Lisa Merlin House to help serve female inmates.
16. **Ms. Pat Robertson**, Registered Nurse, and Executive Director of a Methadone Program in Orange County spoke on methadone needs of inmates and viability of methadone as treatment for opiate dependency.
17. **William Lowry**, Executive Director of Central Care Missions, advocated for methadone as a means of detoxification rather than maintenance.
18. **Ms. Bonnie Shumacher**, Registered Nurse, advocating for timely continuation of medications for mental health inmates and continuation of same medications inmate was taking prior to incarceration.
19. **Commissioner Mary I. Johnson**, County Commissioner District #3, spoke on behalf of the mentally ill in Orange County and the jail, and the need for increased pretrial diversion programs, community housing for the mentally ill, effective programs in the jail for those who cannot be released to alternative incarceration programs.
20. **Dennis Hughes**, Assistant Manager, Orange County Corrections Department Medical Unit, spoke on triage assessments at booking/intake.
21. **Mr. Jeff Clausen**, representing methadone patients of the community, advocating for methadone maintenance.
22. **Mr. Brad Gonzalez**, Regional AFSCME Union Representative, opposing the issue of privatization.



Public Testimony Information continued.....

October 29, 2001 continued:

- 23.-24. **Ms. Lisa Hedrick**, and **Ms. Belinda Brice**, Registered Nurses, and representing Professional Case Management Consultants promoting training of current staff and instituting case management.
25. **Ms. Peggy Symons**, Consumer Advocate with the National Alliance with the Mentally Ill Greater Orlando presented concerns about older psychotropic drugs on formulary list and side effects.
26. **Ms. Pam Steinke**, Manager, Orange County Corrections Department Medical Program, Orange County Corrections Department, introduction of herself and plans to work toward hiring qualified staff immediately.
- 27.-28. **Dr. Roger Peters and Dr Randy Otto**, Florida Mental Health Institute, November 15, 2001, Presentation on best practices for substance abuse treatment in jails.
29. **Don Pittman**, Chief Probation Officer for Orange County Corrections Department, December 6, 2001, Information on probation caseloads/services/specialized caseloads
30. **Rick McEntire**, Department of Children and Family Services, Alcohol, Drugs & Mental Health Office, December 6, 200, Information on Marchman Act and resources
31. **Rosby Jones**, Orange County Corrections Department, Drug Coordinator, December 6, 2001, Information on drug testing and interdiction at the jail.
- 32.-33. **Ms. Cornita Riley and Ms. Paula Hoisington**, Orange County Corrections Department, December 6, 2001, Information on substance abuse services at the jail.
34. **Joe Hatem**, Regional Director, Department of Corrections, State of Florida, December 13, 2001, Presentation on probation caseloads, drug testing, and substance abuse services for state probationers.
- 35.-36. **Donna Wyche**, Assistant Manager, Health and Family Services, and **Bob Spivey**, Manager for Code Enforcement, January 9, 2001, Presentation on Central Point of Access ad hoc committee work.
37. **Judge Deb Blechman**, January 17, 2002, Presentation on issues relative to Mental Health Court and needs of many inmates with mental illness.



Public Testimony Information continued.....

STAFFING AND PERFORMANCE PUBLIC TESTIMONY

SEPTEMBER 25, 2001:

1. **Charles Viohl**, former inmate at Orange County Jail, Experiences as former Inmate
2. **Brad Gonzales**, AFSCME Representative, Labor Relations
- 3.-9. **Melody Mitchell, Dr. Frank Peretta, Joanne Green, Barbara Ossa, Bernadine West, Tricia Subt, Larry Rivera**, Orange County Corrections Department, Health Services Employees, Experiences as employees
- 10.-11. **George Wynn and Kenneth Demmo**, Correctional Officers, Orange County Corrections Department, Experiences as employees

OCTOBER 29, 2001:

12. **Sherry Grace**, Founder, Mothers of Incarcerated Sons, Mental health area and lack of officer professionalism
13. **Walt Miller**, Correctional Officer, Orange County Corrections Department, Failure to follow policy, procedures, SOPs, disciplinary actions/issue, and Safety/liability issues
14. **Isidro Iglesias**, Correctional Officer, Orange County Corrections Department, Positive feedback on work experiences and pay issues
15. **Dennis Moonsammy**, Correctional Corporal, Orange County Corrections Department, Pay issues
16. **Brad Gonzales**, AFSCME Representative, AFSCME issues
17. **Nancy Deferrari**, Correctional Lieutenant, Orange County Corrections Department, Recruitment/retention and Hindrances to performance of staff

STAFFING AND PERFORMANCE WRITTEN TESTIMONY

18. **Monica King**, Consultant and Former Orange County Corrections Department employee, Suggested technology, September 3, 2001
19. **Mark Lacienski**, Correctional Lieutenant, Orange County Corrections Department, Central Booking Supervisor Suggested tour of the "perimeter shack" (small building used to house



Public Testimony Information continued.....

the officer assigned to the perimeter post for the Main Facility, September 6, 2001

Written Testimony continued:

20. **Joseph Szirotnyak**, Corrections Officer, Orange County Corrections Department, Importance of having employee testimony, September 22, 2001
21. **Walt Miller**, Correctional Officer, Orange County Corrections Department, Miscellaneous issues, Undated

FULL JAIL OVERSIGHT COMMISSION PUBLIC TESTIMONY

DECEMBER 12, 2001:

1. **Pamela Butler-Howard**, Employee, Orange County Corrections Department, Inmate Records Management
2. **Bruce Moncrief**, Moncrief Bail Bonds, Inc.
3. **Loretta Solis**, Advocate for Mentally Ill and Former Nurse at Central Florida Reception Center (CFRC)
4. **James Key**, Father of formerly Incarcerated Inmate
5. **Walt Miller**, Correctional Officer, Orange County Corrections Department, Courthouse
6. **Elmo Ramos**, Father of formerly Incarcerated Inmate
7. **Dennis Quintana**, Attorney for formerly incarcerated inmate

JANUARY 9, 2002:

8. **Tom Lynch**, Advocate for Chemically Dependant
9. **Gretchen Chateau**, Testified on behalf of Bob Pigaty
10. **John Kennedy**, Former Inmate
11. **Dr. Charles White**, Former Orange County Corrections Department Employee, Topic: Mental Health Inmates



Public Testimony Information continued.....

January 9, 2002 continued:

12. Marty Schoen, Former Nurse with Orange County Corrections Department

13. Walt Miller, Correctional Officer, Orange County Corrections Department, Courthouse

APRIL 10, 2002:

14. Mr. Clay Parker, Local attorney representing family of Karen Johnson

15. Mr. David Martin, Community Corrections Officer, Orange County Corrections Department

16. Mr. Tom Lynch, Advocate for Chemically Dependant

17. Mr. Walt Miller, Correctional Officer, Orange County Corrections Department, Courthouse

18. Debra Crawford, Classification Officer, Orange County Corrections Department



**Chairman's
Jail Oversight Commission**

APPENDICES

FINAL REPORT
April 22, 2002

APPENDICES

APPENDIX 1 – Full Jail Oversight Commission Meeting Agendas

APPENDIX 2 – Inmate Statistics, October 10, 2001

APPENDIX 3 – Personnel Survey Results, February 15, 2002

APPENDIX 4 – Personnel Survey Addendum Report, March 18, 2002

APPENDIX 5 – August 28, 2001 Letter from Robert Wesley, Public Defender

APPENDIX 6 – Article—First Appearance: So Much To Do, So Little Time



APPENDIX 1

Full Jail Oversight Commission Meeting Agendas



**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
August 10, 2001
3:00 – 5:00 p.m.
Orange County Board of County Commission Chambers**

Agenda

- Welcome & Introduction Chairman Crotty

- Commission Structure Bill Sublette, Chairman

- Introduction of Commission Members Bill Sublette, Chairman

- Sunshine Laws Presentation Tom Wilkes,
County Attorney

- Adjourn Bill Sublette, Chairman

**Next Commission Meeting
August 15, 12:00 – 2:30 p.m.
Orange County Jail – Horizon Training Center
See Attached Map**



**Chairman’s Jail Oversight Commission Meeting
Bill Sublette, Chairman
August 15, 2001
12:00 – 2:30 p.m.
Orange County Jail – Horizon Training Center**

Agenda

- **Welcome & Introduction of Educational Work Session** Bill Sublette, Chairman
- **Working Lunch** Pickles Deli
- **Educational Work Session**
 - UCF Jail Overcrowding Study – “Analysis of the Crowding Situation at the Jail” Dr. Bernard McCarthy
Dr. Ray Surette
Dr. Brandon Applegate
 - Corrections CIP Presentation Tony Aguerrevere,
Manager, Capital Projects
Don Bjoring, Manager,
Direct Supervision
 - Medical/Mental Health Presentation Dennis Hughes, Assistant
Manager, Health Services
- **Adjourn** Bill Sublette, Chairman
- ***Jail Tour**
 - Main Facility Interim Director Ron McAndrew
 - Mental Health Unit/Medical Clinic Major Scott Bradstreet
Dennis Hughes

**Next Commission Meeting
August 22, 12:00 – 2:30 p.m.
Orange County Jail – Horizon Training Center
See Attached Map**



**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
August 22, 2001
12:00 – 2:30 p.m.
Orange County Jail – Horizon Training Center**

Agenda

- **Welcome & Introduction of Educational Work Session** Bill Sublette, Chairman
- **Working Lunch** Pickles Deli
- **Educational Work Session**
 - Medical/Mental Health Presentation Dennis Hughes, Assistant Manager, Corrections Health Services
 -
 - Inmate Booking Process Presentation Captain Dennis Warren, Central Booking Facility
- **Adjourn** Bill Sublette, Chairman
- * **Jail Tour** Interim Director Ron McAndrew
Central Booking Major Bob Slavin
Dockets Major Cornita Riley

**Next Commission Meeting
September 12, 2001 -- 2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**



**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
September 12, 2001
2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**

Agenda

- **Welcome & Introduction of Educational Work Session** Bill Sublette, Chairman
- **Educational Work Session**
 - Inmate Booking Process Presentation Captain Dennis Warren, Central Booking Facility
 - Integrated Criminal Justice Info. System Presentation Janice Knight, CIO Clerk of the Courts
 - Corrections Inmate Management System Presentation Steve Smith, CIO Information Systems and Services
- **Adjourn** Bill Sublette, Chairman
- * **Jail Tour** Interim Director Ron McAndrew
Horizon Facility, Major Bob Slavin
Whitcomb Facility Major Cornita Riley
Phoenix Facility Don Bjoring

**Next Commission Meeting
September 19, 2001 --- 2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**



**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
September 19, 2001
2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**

Agenda

- **Welcome & Introduction of Educational Work Session** Bill Sublette, Chairman

- **Educational Work Session**
 - Jail Perspective on Human Resources Kathi Cepregi, Manager, Corrections HR

 - Community Corrections/Alternatives to Incarceration Presentation Dr. Jill Hobbs, Manager Community Corrections

 - Inmate Programs Wilbert Danner, Supervisor, Corrections Programs

- **Adjourn** Bill Sublette, Chairman

**Next Commission Meeting
October 10, 2001 --- 2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**



**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
October 10, 2001
2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**

Agenda

- **Welcome & Introduction of Educational Work Session** Bill Sublette, Chairman

- **Educational Work Session**
 - Corrections Department Presentation Don Bjoring, Manager, Direct Supervision

 - Community Corrections/Alternatives to Incarceration Presentation Don Bjoring, Manager, Direct Supervision

 - Inmate Programs Wilbert Danner, Supervisor, Corrections Programs

- **Adjourn** Bill Sublette, Chairman

**Next Commission Meeting
October 17, 2001 --- 2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**



**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
October 17, 2001
2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**

Agenda

- **Welcome & Introduction of Educational Work Session** Bill Sublette, Chairman

- **Educational Work Session**
 - Community Corrections/Alternatives to Incarceration Presentation Don Bjoring, Manager, Direct Supervision

- **Sub-Committee Principles, Issues, Questions and Recommendations** Bill Sublette, Chairman

- **Adjourn** Bill Sublette, Chairman

**Next Commission Meeting
November 14, 2001 --- 2:00–4:00 p.m.
Orange County Jail – Horizon Training Center**



Appendix 1 — Full Commission Meeting Agendas

**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
November 14, 2001
2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**

AGENDA

- **Welcome & Introduction of Educational Work Session** Bill Sublette, Chairman
- **Educational Work Session**
 - Inmate Programs Wilbert Danner, Supervisor
Corrections Programs
 - Inmate Classification System Paula Hoisington,
Supervisor, Special Facilities
and Inmate Services
- **Adjourn** Bill Sublette, Chairman

**Next Commission Meeting
December 12, 2001 --- 2:00 – 4:00 p.m.
Orange County Jail – Horizon Training Center**

PROJECTED TIMELINE

December 12 th	Full JOC Meeting	Public Testimony
December 31 st	UCF Report Due	UCF Report Due
January 9 th	Full JOC Meeting	Public Testimony Overflow
January 31 st	Sub-Committee Draft Reports Due	Sub-Committee Draft Reports Due
February 13 th	Full JOC Meeting CANCELLED	Meeting CANCELLED
February 27 th	Full JOC Meeting (NEW)	Preliminary Draft Report Presentation
March 13 th	Full JOC Meeting (NEW)	Public/Commission Comment and Report Amendments
March 27 th	Full JOC Meeting (NEW)	Final Vote on Report



Appendix 1 — Full Commission Meeting Agendas

**Chairman’s Jail Oversight Commission Meeting
 Bill Sublette, Chairman
 December 12, 2001
 2:00 – 4:00 p.m.
 Orange County Jail – Horizon Training Center**

AGENDA

- **Welcome and Opening Remarks** Bill Sublette, Chairman

- **Presentation**
 - Accreditation Ray Gilley, Vice Chair
Staffing & Performance

- **Public Testimony**

- **Adjournment** Bill Sublette, Chairman

**Next Commission Meeting
 January 9, 2001 --- 2:00 – 4:00 p.m.
 Orange County Administration Center
 Commission Chambers
 201 S. Rosalind Avenue
 Orlando, FL 32801**

PROJECTED TIMELINE

December 12 th	Full JOC Meeting	Public Testimony
December 31 st	UCF Report Due	UCF Report Due
January 9 th	Full JOC Meeting	Public Testimony Overflow
January 31 st	Sub-Committee Draft Reports Due	Sub-Committee Draft Reports Due
February 13 th	Full JOC Meeting CANCELLED	Meeting CANCELLED
February 27 th	Full JOC Meeting (NEW)	Preliminary Draft Report Presentation
March 13 th	Full JOC Meeting (NEW)	Public/Commission Comment and Report Amendments
March 27 th	Full JOC Meeting (NEW)	Final Vote on Report



Appendix 1 — Full Commission Meeting Agendas

**Chairman’s Jail Oversight Commission Meeting
 Bill Sublette, Chairman
 January 9, 2002
 2:00 – 4:00 p.m.
 County Administration Center Commission Chambers**

AGENDA

- **Welcome and Opening Remarks** Bill Sublette, Chairman
- **Public Testimony**
- **Adjournment** Bill Sublette, Chairman

**Next Commission Meeting
 February 13, 2002 --- 2:00 p.m. – 4:00 p.m.
 Orange County Administration Center
 Commission Chambers
 201 S. Rosalind Avenue
 Orlando, FL 32801**

PROJECTED TIMELINE

January 7 th -9 th	UCF Survey Administered to all Corrections Staff	UCF Survey
February 13 th	Full JOC Meeting (NEW)	Meeting—Presentation from Volusia County Council
February 15 th	UCF Report Due	UCF Report Due
February 25 th	Staff Directors Review of Draft Reports	Draft Report Review
February 27 th	Full JOC Meeting (CANCELLED)	Meeting CANCELLED
March 8 th	Sub-Committee Draft Reports Due	Sub-Committee Draft Reports Due
March 13 th	Full JOC Meeting (CANCELLED)	Meeting CANCELLED
March 27 th	Full JOC Meeting	Preliminary Draft Report Presentation
April 10 th	Full JOC Meeting (NEW)	Public/Commission Comment and Report Amendments
April 24 th	Full JOC Meeting (NEW)	Final Vote on Report



Appendix 1 — Full Commission Meeting Agendas

Chairman’s Jail Oversight Commission Meeting
Bill Sublette, Chairman
February 13, 2002 ** 2:00 p.m. – 4:00 p.m.**
County Administration Center Commission Chambers

AGENDA

- **Welcome and Opening Remarks** Bill Sublette, Chairman
- **Presentations:**
 - **Corrections Budget** Larry Taylor, Corrections Chief
Fiscal Officer
 - **Health Services Update** Pam Steinke, Medical Director
 - **Inmate Telephones** Dennis Warren, Captain,
Central Booking/Horizon
- **Adjournment** Bill Sublette, Chairman

Next Commission Meeting
March 27, 2002 ** 9:00 a.m. – 11:00 a.m.**
Orange County Administration Center Commission Chambers
201 S. Rosalind Avenue
Orlando, FL 32801

PROJECTED TIMELINE

February 15 th	UCF Report Due	UCF Report Due
February 25 th	Staff Directors Review of Draft Reports	Draft Report Review
March 8 th	Sub-Committee Draft Reports Due	Sub-Committee Draft Reports Due
March 27 th	Full JOC Meeting (NEW TIME) (9:00 a.m. – 11:00 a.m.)	Preliminary Draft Report Presentation
April 10 th	Full JOC Meeting (2:00 p.m. – 4:00 p.m.)	Public/Commission Comment and Report Amendments
April 22 nd	Full JOC Meeting (NEW DATE/TIME) (5:00 p.m. – 7:00 p.m.)	Final Vote on Report



Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
March 27, 2002
9:00 a.m. – 11:00 a.m.
County Administration Center Commission Chambers

AGENDA

- **Welcome and Opening Remarks** Bill Sublette, Chairman
- **Presentation of Commission Draft Report** Commission Chair and Vice Chairs
 - Introduction Bill Sublette, Chairman
 - Case Processing Committee Chief Judge Belvin Perry
 - Medical Committee Rich Morrison
 - Staffing and Performance Committee Ray Gilley
 - Technology Committee Joel Hartman
- **Adjournment** Bill Sublette, Chairman

Next Commission Meeting

April 10, 2002

****** 2:00 p.m. – 4:00 p.m. ******

Orange County Administration Center Commission Chambers
201 S. Rosalind Avenue
Orlando, FL 32801

PROJECT TIMELINE

April 10 th	Full JOC Meeting (2:00 p.m. – 4:00 p.m.)	Public/Commission Comment and Report Amendments
April 22 nd	Full JOC Meeting (5:00 p.m. – 7:00 p.m.)	Final Vote on Report



Appendix 1 — Full Commission Meeting Agendas

**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
April 10, 2002
2:00 p.m. – 4:00 p.m.
County Administration Center Commission Chambers**

AGENDA

- **Welcome and Opening Remarks** Bill Sublette, Chairman
- **Presentation of Report Amendments** Commission Members
- **Public Comment on Report**
- **Adjournment** Bill Sublette, Chairman

**Final Commission Meeting
April 22, 2002
**** 5:00 p.m. – 7:00 p.m. ****
Orange County Administration Center Commission Chambers
201 S. Rosalind Avenue
Orlando, FL 32801**

PROJECT TIMELINE

April 22 nd	Full JOC Meeting (5:00 p.m. – 7:00 p.m.)	Final Vote on Report
May 7 th	Presentation to Board of County Commissioners (9:00 a.m. at Commission Chambers)	



**Chairman's Jail Oversight Commission Meeting
Bill Sublette, Chairman
April 22, 2002
5:00 p.m. – 7:00 p.m.
County Administration Center Commission Chambers**

AGENDA

- **Welcome and Opening Remarks** Bill Sublette, Chairman

- **Presentation of Commission Final Report** Commission Chair and Vice Chairs
 - **Introduction** Bill Sublette, Chairman
 - **Case Processing Committee** Chief Judge Belvin Perry
 - **Medical Committee** Rich Morrison
 - **Staffing and Performance Committee** Ray Gilley
 - **Technology Committee** Joel Hartman

- **Final Vote on Report** Commission Members

- Adjournment** Bill Sublette, Chairman

Presentation to Board of County Commissioners

**May 7, 2002
**** 9:00 a.m. ****
Orange County Administration Center Commission Chambers
201 S. Rosalind Avenue
Orlando, FL 32801**



APPENDIX 2

*Orange County Corrections Department
Inmate Statistics Report
October 10, 2001*



APPENDIX 3

*Orange County Corrections Department
Personnel Survey
Prepared by the
University of Central Florida
February 15, 2002*



APPENDIX 4

*Orange County Corrections Department
Personnel Survey Addendum Report
Prepared by the
University of Central Florida
March 18, 2002*



APPENDIX 5

*Letter to The Honorable Belvin Perry, Jr., Chief Judge
from Robert Wesley, Public Defender
Dated August 28, 2001*



Appendix 5 — Letter to Chief Judge



OFFICE OF
PUBLIC DEFENDER
NINTH JUDICIAL CIRCUIT
POST OFFICE BOX 4911
435 NORTH ORANGE AVENUE
ORLANDO, FLORIDA 32803-4911

ROBERT WESLEY
PUBLIC DEFENDER

TELEPHONE (407) 876-4806
FAX (407) 839-4619
E-MAIL: WESLEY@CIRCUIT9.ORG

August 28, 2001

Honorable Balva Perry, Jr.
Chief Judge of the Ninth Circuit
425 North Orange Avenue
Orlando, FL 32801

Your Honor:

I ask for your assistance so that we may proceed with all deliberate speed to make essential changes in the process of appointment of the Public Defender in Orange County cases. I promised to advocate these changes during my campaign and have discussed them repeatedly since my election. I believe that these simple changes will have no adverse fiscal impact but will result in better service to our clients, with greater economy and efficiency for our entire County Criminal Justice System.

The first and primary request is that the Public Defender be appointed at the time of first appearance hearing. I am very concerned that the appointment of counsel process in Orange County does not comply with Rule 3.111(a) and that these immediate steps are necessary. Presently, we are appointed at the time of arraignment which may be a month or more from the time of arrest. To my knowledge Orange County is one of the few counties in which the appointment of counsel takes place this late. In Seminole County, Judge Eaton boasts that about 40% of their cases are resolved by arraignment. As discussed, here the Public Defender is just appointed at that stage.

The Orange County Corrections Disposition Study reports no difference in the time for disposition of in-custody client cases based upon offense severity. In short, I believe that means that the majority of Orange County cases are not addressed until the pretrial conference. I believe that our earlier involvement will result in earlier disposition of many cases - especially the less severe and less complicated ones. Of course, this will permit us to focus our attention on the more serious cases and have a positive impact on the jail population.



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ROBERT WESLEY
PUBLIC DEFENDER

Honorable Belvin Perry, Jr.
August 28, 2001
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The only anticipated impact which would be associated with this change is my expectation that first appearance hearings would be more intensive and require more time. However, the in jail arraignment process would be virtually eliminated because in most cases our lawyers would simply file written motions of not guilty and waivers of arraignment once the charging documents were filed.

The second change is the assignment, by the Clerk, of cases to specific court divisions at or near the time that the case number is assigned. Currently, division assignments are not made until formal charges are filed. This happens at or near the time of arraignment and delays the assignment of the case to the actual Assistant Public Defender who will be responsible for the file. We do not have staffing to create an Intake Division and see greater efficiency in getting the files to the client's lawyer as soon as possible. Our recent meetings with the Clerk's personnel indicate that this change can be accomplished easily and immediately. Besides having the ability to assign the case immediately to the lawyer responsible, the case will also be then assigned to the division in which disposition will take place. This will allow the Judge with ultimate case responsibility to make pretrial release and bond decisions on that particular case.

Finally, we ask that an arraignment date be set at time of arrest. This will be a safeguard to assure that we comply with Rule 3.134. That rule requires that formal charges be filed within 30 days of arrest. By setting the arraignment date for 30 days from the time of arrest, the Court will have control to assure that these timetables are being met.

In summary, my requests are:

- (1) Immediate change to appoint the Public Defender much sooner;
- (2) Assignment of the court division number at the time the Court file number is assigned; and
- (3) Scheduled arraignment dates at time of initial appearance to assure timetables are met.



Appendix 5 — Letter to Chief Judge

ROBERT WESLEY
PUBLIC DEFENDER

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Honorable Belvin Perry, Jr.
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As stated, I request your assistance to help us make these changes which will result in better service to our clients and to the citizens of Orange County.

Sincerely,



Robert Wesley

RWjdv

Chairman Richard Crotty
Committee Chair Bill Sublette
Honorable Jose Rodriguez
Honorable Lawson Lamar
Honorable Lydia Gardner
David Fussell, Esquire
Ms. Dabbie Jallad
Mark NoJame, Esquire
Dr. Bernard McCarthy



APPENDIX 6

Article Entitled
“First Appearance: So Much To Do, So Little Time”
By Mark F. Lewis
The Florida Bar Journal/October 2000



Criminal Law

First Appearance: So Much To Do, So Little Time

by Mark F. Lewis

It is a scene often viewed on the evening news. A person who has been recently arrested is shown standing in his jail uniform while a judge informs him of the reasons for which he has been arrested and advises him of the amount of his bond. If any, it's all over in a few seconds.

For the vast majority of the cases, that's all first appearance is about. The general rule as set forth in Fla. R. Crim. P. 3.130(a) provides that "[e]xcept when previously released in a lawful manner, every arrested person shall be taken before a judicial officer . . . within 24 hours of arrest . . . At the defendant's first appearance the magistrate shall immediately inform the defendant of the charge and provide the defendant with a copy of the complaint." A defendant is entitled to a prompt first appearance when he or she is arrested for violation of probation as well as on new substantive charges. *Hull v. State*, 739 So. 2d 634 (Fla. 4th DCA 1999). And even if this rule is not followed, there are no real consequences. A confession that would otherwise be admissible is not subject to suppression merely because the defendant was deprived of a prompt first appearance. "When a defendant has been advised of his rights and makes an otherwise voluntary statement, the delay in following the substance of the rule must be shown to have induced the confession." *Keen v. State*, 504 So. 2d 896, 400 (Fla. 1987). See also *Williams v. State*, 466 So. 2d 1246 (Fla. 1st DCA 1985); *Johnson v. State*, 660

First appearances need to be taken seriously and properly prepared in order to ensure that justice prevails.

So 2d 848 (Fla. 1995).

If it's all an example, then why the need for this article? The answer is that first appearances can be far more significant than they seem at first, and what happens at these hearings can have some serious consequences for later stages of the criminal proceeding. This article will briefly explore the law regarding first appearances, and hopefully will better prepare all counsel who are called upon to be present at these hearings.

Appointment of Counsel

Fla. R. Crim. P. 3.111(c) states that a person is entitled to appointment of counsel when he is formally charged, as soon as feasible after custodial restraint, or at the first

appearance before a committing magistrate, whichever occurs earlier." (Emphasis supplied.) Assuming that first appearance is the first such opportunity, Fla. R. Crim. P. 3.190 states that if the magistrate "determines that the defendant is entitled to court-appointed counsel and desires counsel, the magistrate shall immediately appoint counsel." In many jurisdictions, the presiding judge appoints the public defender's office to represent anyone who is without counsel without going through the formal inquiry process required by Florida law.¹ Although this practice undoubtedly persists, the Third District Court of Appeal has stated that such a procedure is not proper. *Office of the Public Defender v. State*, 714 So. 2d 1083 (Fla. 3d DCA 1998).

Not only shouldn't the public defender's office be appointed "across the board," the defendant must affirmatively request such representation. In *Smith v. State*, 629 So. 2d 623 (Fla. 1997), an assistant public defender volunteered and was appointed to represent Smith after he had been indicted on multiple charges, including first degree murder. This appointment occurred before Smith was arrested and without his request. At a later date the defendant tried to suppress his confession on the grounds that it had been obtained in violation of his right to counsel. In rejecting this argument, the Florida Supreme Court held, "The mere appointment of an attorney at the attorney's request is not enough to invoke the right; the accused must invoke the

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Appendix 6 — First Appearances Article

right." *Id.* at 635.

Perhaps this point can be best understood when another facet of the appointment of counsel procedure is examined—the fact that such appointments are offense-specific. In other words, when counsel is appointed at first appearance, that appointment applies only to the offense for which the defendant is in court at that particular time. Law enforcement officers have the right to question the defendant on an unrelated offense even though he has been previously appointed counsel on another charge. *Queen v. State*, 590 So. 2d 885 (Fla. 1992), *rev'd*, 633 So. 2d 339 (1992); *McNeil v. Wisconsin*, 331 U.S. Ct. 2204 (1981). The new offense, however, must be truly unrelated. It is not proper to question a defendant after he has been appointed counsel if the subsequent questions relate to an offense that is "inextricably intertwined" with the previous offense. In *Taylor v. State*, 726 So. 2d 843 (Fla. 1st DCA 1999), the First District Court of Appeal held that the trial court should have suppressed statements obtained by detectives who questioned Taylor about a residential burglary after he had been to court and been appointed counsel on a charge of dealing in stolen property, the property in question having been taken in the burglary.

The "offense-specific" nature of the appointed counsel-client relationship also prohibits the defendant from making a blanket assertion of his Miranda rights. In *Sapp v. State*, 890 So. 2d 381 (Fla. 1997), the defendant, in jail on a robbery charge, had signed a claim of rights form at the time of his first appearance, indicating that he had consulted the public defender, and did not want to be interviewed by law enforcement. A week later, the police interrogated him about an unrelated murder charge to which he confessed. The Florida Supreme Court ruled that this confession was admissible. It agreed with the First District Court's opinion that "Sapp's attempt to invoke his Fifth Amendment right to counsel through the claim of rights form was not effective

because custodial interrogation had not begun when he signed the form, nor was it imminent at the time." *Id.* at 583.

In addition to barring further questioning, the appointment of counsel at first appearance also prohibits the state from taking further one-sided actions that could bolster its case against a particular defendant. The state cannot compel the defendant to appear in a lineup unless it obtains a court order after proper notice has been given to his counsel. *Roberts v. State*, 462 So. 2d 1172 (Fla. 4th DCA 1984); *per se*, *den.*, 469 So. 2d 750 (Fla. 1985). In addition, the prosecution cannot use statements made by the defendant to a person whom the state set up as a jailhouse informant after the defendant's right to counsel has attached. *Proctor v. State*, 812 So. 2d 655 (Fla. 1993); *Brooks v. State*, 726 So. 2d 1164 (Fla. 2d DCA 1998).

Pretrial Release

After informing the defendant of the charges and appointing counsel, the next task on the crowded agenda of first appearance court is the setting of conditions of pretrial release. Fla. R. Crim. P. 3.130(d). This process applies to those persons who have been arrested for charges other than capital or life offenses in which the proof of guilt is evident or the

presumption is great,⁷ or when the state has sought an order of pretrial detention (to be discussed below). Defendants usually come into first appearance court with a bond set either from a standard bond schedule or by a judge who has signed a warrant for that person's arrest.

In the latter situation, when bond has been set by a fellow judge, there is currently a split of authority on the issue of whether the first appearance magistrate can make an independent inquiry and set bond accordingly. According to the Third District Court of Appeal, the magistrate can consider appropriate conditions for release of a defendant who has been arrested on a warrant signed by another judge, and in fact has the duty to do so, "so long as that judge does not specifically preclude him from doing so." *McCoy v. State*, 702 So. 2d 293 (Fla. 3d DCA 1997). Two other district courts, however, have taken a different approach. In *Norms v. State*, 737 So. 2d 1240 (Fla. 5th DCA 1999), *rev'd*, 1999 Fla. LK 2844, the Fifth District Court stated granting such strictures on the magistrate "deprives the defendant of a meaningful bail determination at first appearance." Similarly in *Foote v. State*, 145 So. 2d 898 (Fla. 1st DCA 1998), the court ordered that the policy of Leon County magistrates of refusing to



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modify bail amounts set by other judges must be discontinued.

A similar split of authority, although not among the same district courts, exists regarding the question of whether the magistrate is allowed to set a bond for a defendant who has been arrested after violating a condition of his pretrial release. The Fourth District Court has clearly held that such a person is entitled to a new bond in these situations. In *Parr v. Jenne*, 728 So. 2d 1187 (Fla. 4th DCA 1999), the defendant's initial bond was revoked when he was arrested on new felony charges. The Fourth District Court ruled that although the defendant did forfeit his right to remain at liberty on the original bond, denying him a new bond was equivalent to unlawful pretrial detention. The same court ruled that a trial court can order pretrial detention of a defendant who has breached a condition of his bond only "if it finds a substantial probability that the defendant poses a threat of harm to the community." *Parr v. Jenne*, 728 So. 2d 827 (Fla. 4th DCA 1998).¹ However, the Fourth District Court has made an exception in the case in which a defendant willfully failed to appear at a court hearing, and the trial court had ruled that "no conditions of pretrial release would reasonably assure the defendant's presence." *Brodshaw v. Jenne*, 754 So. 2d 309 (Fla. 4th DCA 2000). See also *Thurmer v. Jenne*, 26 Fla. L. Weekly D790 (Fla. 4th DCA March 29, 2000). In contrast to these rulings is the Third District's holding in the case of *Houser v. Morning*, 719 So. 2d 307 (Fla. 3d DCA 1998), in which the court ruled that the granting of any future bond after there has been a violation of a previous bond's conditions rests in the sound discretion of the trial court.

This conflict has been partially resolved by the recently enacted F.S. §903.0471 (2000) which states that "a court may, on its own motion, revoke pretrial release and order pretrial detention if the court finds probable cause to believe that the defendant has committed a new crime while on pretrial release."

2000 Fla. Laws Ch. 173. A defendant who violates some other condition of pretrial release can now be subject to pretrial detention upon motion by the state and a hearing. 2000 Fla. Laws Ch. 229.

Domestic violence cases provide a somewhat unique framework for the granting of bond at first appearance. F.S. §741.28(1)(3) (1999) provides that "When a defendant is arrested for an act of domestic violence, the defendant shall be held in custody until brought before the court for admittance to bail in accordance with chapter 903." It seems clear from the wording of this statute that, once again barring a petition for pretrial release, the magistrate must then set a bond and impose whatever conditions will help ensure "the safety of the victim, the victim's children, and any other person who may be in danger if the defendant is released." *Id.* See *Galiardo v. Crow*, 4 Fla. L. Weekly Supp. 351110th Cir. (Oct. 29, 1996).

If the defendant is entitled to bond, the first appearance magistrate is empowered to set bond in a monetary amount and with whatever other conditions are justified. The factors to be considered are set forth in Fla. R. Crim. P. 3.131(b)(3).² Case law in the area is anecdotal, and is beyond the scope of this article. One factor, however, does need to be mentioned. In addition to whatever evidence there is about the defendant's past, the nature of the crime, and ties with the community, "evidence of financial resources of the defendant must be heard and taken into consideration before bond is set." *Martin v. Jenne*, 745 So. 2d 412 (Fla. 4th DCA 1999). In this opinion, the court reminds committing magistrates that the setting of excessive bond is tantamount to granting no bond at all.

From the state's perspective, the magistrate at first appearance must be very careful when setting the amount of bond. Once it has been set, it can only be increased if there is a "change of circumstances or information [that was] not made known to the first appearance judge." *Keene v. Cochran*, 614 So. 2d

1188 (Fla. 4th DCA 1993). In *Keene*, a court's increasing of the defendant's bond to a DCF-related offense solely because of his prior DCF record was reversed. Similarly, a court can't increase a bond based on the judge's viewing of pictures of the victim's injury. *Mingemery v. Jenne*, 744 So. 2d 1148 (Fla. 4th DCA 1999), because the committing magistrate erred in his reading of the bond schedule. *Bouyer v. Jenne*, 710 So. 2d 651 (Fla. 4th DCA 1998), or because a successor judge was concerned about threats made to the victim, a fact that was known to the committing magistrate. *Minickowski v. Jenne*, 25 Fla. L. Weekly D816 (Fla. 4th DCA January 14, 2000). This rule also prohibits a successor judge from revoking bond of a defendant who had been granted bond on a life felony without a showing of changed circumstances. *Cassano v. Jenne*, 717 So. 2d 699 (Fla. 4th DCA 1998); *Blount v. Sperry*, 25 Fla. L. Weekly D1421 (Fla. 3d DCA June 14, 2000).

The possibility of a court ordering pretrial detention and denying bond for a defendant charged with an otherwise bondable offense has been mentioned above, and can only be briefly discussed here. The requirements for pretrial detention are found in F.S. §907.041 (1999) which has been substantially amended by 2000 Fla. Laws Ch. 229. In order to give the state the initial opportunity of detaining a defendant that they feel qualifies for pretrial detention, Fla. R. Crim. P. 3.132 allows the prosecutor to file a motion at first appearance. This motion must set forth with particularity the grounds and facts in support of this request, and the petitioner must certify that he has received testimony under oath that supports the motion. If the motion is facially sufficient and the judicial officer finds probable cause exists that the defendant committed the offense, the defendant may be detained pending a final hearing, which must be scheduled within five days of the date that the motion was filed or on which the defendant was taken into custody as a result of the motion, whichever is



Appendix 6 — First Appearances Article

later Fla. R. Crim. P. 3.133(c).¹

Probable Cause

Another often unseen function of the first appearance magistrate is to make a determination that probable cause exists to hold the defendant in custody. This job should not be confused with the procedure for an adversary preliminary hearing, which is applicable when the state has failed to file an information within 21 days of the defendant's arrest.² Instead, Fla. R. Crim. P. 3.133-a(1) provides that, when a defendant is in custody, "a nonadversary probable cause determination shall be held before a magistrate within 48 hours from the time of the defendant's arrest." The standard to be used is that for the issuance of an arrest warrant, and this finding may be based on "sworn complaints, affidavits, deposition, under oath, or, if necessary, testimony under oath properly recorded." Fla. R. Crim. P. 3.133(b). In general practice, this function is accomplished by the magistrate reading the contents of the affidavit on which the defendant has been arrested. In most cases, that document alone will be sufficient to satisfy the probable cause burden.³

In those rare cases when probable cause does not readily appear on the face of the affidavit, the state has 24 hours to present additional evidence to the court, which can also be in affidavit form. Fla. R. Crim. P. 3.133(d). If the state is still unable to establish sufficient probable cause, the defendant is released on his own recognizance. *Vigoreaux v. State*, 714 So. 2d 610 (Fla. 3d DCA 1998). The court is not authorized to dismiss a charge based on its finding of lack of probable cause. *State v. Rollins*, 422 So. 2d 900 (Fla. 2d DCA 1982); *State v. Diaz*, 3 Fla. 1, Weekly Supp. 48 111th Cir., January, 1999.

Plea at First Appearance

The last job of the first appearance magistrate is to accept pleas of guilty to misdemeanor charges and sentence the defendant accordingly.⁴ This often helps to clear the

jud of persons who are being held on offense such as disorderly intoxication or trespass. The peril, from the prosecution point of view, lies in the fact that there are offenses that the state may wish to enhance, such as second or third time petty theft or DUIs when there have been prior convictions.⁵ Another danger lies in offenses such as driving while license suspended, when, if the suspension was due to the defendant's status as a habitual traffic offender, the offense is a felony, even though the officer may have erroneously indicated that it was a misdemeanor.⁶ Often the prosecutor does not have sufficient information to know whether an enhancement is either possible or desired. From the state's point of view, it is often the best practice to object to the court taking plea in all but minor victimless crimes.⁷

Conclusion

While first appearance hearings appear to be mainly routine, the potential exists for many decisions to be made which could have serious effects on future proceedings. Like any other facet of the criminal justice system, first appearances need to be taken seriously and properly prepared for in order to ensure that justice prevails, even when time is often of the essence. \square

¹ See Fla. Stat. § 37.531(a) for the procedure to be used for appointing the public defender.

² See Fla. R. Crim. P. 3.133(a). The state's burden in these situations is "a higher one than that of guilt to the exclusion of all reasonable doubt required for a criminal conviction." *Kirkland v. Morris*, 681 So. 2d 896 (Fla. 1st DCA 1996). Even if this burden is met, the court can still, in its discretion, set a bond. *Nixon v. Arthur*, 880 So. 2d 737 (Fla. 1995).

³ The Florida Supreme Court has granted review in both the Paul and Rex cases.

⁴ These factors include the nature and circumstances of the crime charged, the possible penalty, the weight of the evidence, the defendant's tie to the community, prior criminal record, previous failure to appear, the danger posed to the community, and "any other facts the court considers relevant."

⁵ 2000 Fla. Laws Ch. 176 added §406 to Fla. Stat. §807.041. This section states: "No person charged with a dangerous crime shall be granted nonadversary pretrial release at a first appearance hearing. However, the court shall retain the discretion to release an accused on electronic monitoring or on recognizance bond if the findings on the record of 804 and circumstantial warrant such a release."

⁶ See Fla. R. Crim. P. 3.133(b).

⁷ "Probable cause to arrest exists when the totality of the facts and circumstances within the officer's knowledge would cause a reasonable person to believe that an offense has been committed and that the defendant is the one who committed it. . . . The facts constituting probable cause need not meet the standard of conclusiveness and probability required of the circumstantial facts upon which a conviction must be based." *State v. Carter*, 706 So. 2d 676 (Fla. 3d DCA 1998).

⁸ It is interesting to note that the rule makes no provision for solo continuance plea.

⁹ See Fla. Stat. §419.014(3)(c) and §11999; Fla. Stat. §518.160(4)(b)(1999).

¹⁰ Fla. Stat. §322.54(5)(1999).

¹¹ In his study of first appearance courts, Judge Grube came to the conclusion that these courts needed to shorten advice given to defendants about the ramifications of plea. That the collections were less thorough, and that defendants who suffered from physical and mental disabilities were often likely to plea at first appearance. *Orlando Chronicle Plus: Finding of Florida's Hurdled First Appearance Hearings: Weekend Justice or Weekend Journal*, 21 Supreme L. Rev. 329 (1991). Since this article was written, the courts have made clear that, while first appearance court can be held via videoconferencing, a defendant's attorney still had to be physically present alongside the defendant in order for a plea to be valid. *Scott v. State*, 418 So. 2d 1866 (Fla. 3d D.C.A. 1992). It is unclear whether this will have an effect on Judge Grube's findings.

Mark F. Lewis has been an assistant state attorney for the 13th Judicial Circuit for 17 years. He received his B.A. cum laude from the State University of New York at Stony Brook (1988), and his J.D., cum honoris, from the University of Florida (1976). Mr. Lewis served as chair of the Florida Bar Journal and News Editorial Board in 1991.

This column is submitted on behalf of the Criminal Law Section, Nancy J. Sepler, chair, and Randy E. Merrill, editor.

Chairman's Jail Oversight Commission

