



**Board of Commissioners of Cook County
Legislation and Intergovernmental Relations Committee**

Tuesday, October 21, 2014

10:00 AM

**Cook County Building, Board Room, Room 569
118 North Clark Street, Chicago, Illinois**

NOTICE AND AGENDA

The recessed Public Hearing of the Committee or Subcommittee of the Board of Commissioners of Cook County held on Wednesday, October 15, 2014 will reconvene on Tuesday, October 21, 2014 at the hour of 10:00 A.M. in the Board Room, Room 569, County Building, 118 North Clark Street, Chicago, Illinois to consider the following:

PUBLIC TESTIMONY

According to the Cook County Board's Rules of Organization and Procedure, Section 2-107 (dd), public testimony will be permitted at regular and special meetings of the Board and at committee meetings of the Board. Authorization as a public speaker shall only be granted to those individuals who have submitted in writing, their name, address, subject matter, and organization (if any) to the Secretary 24 hours in advance of the meeting. Duly authorized public speakers shall be called upon to deliver testimony at a time specified in the meeting agenda. Public testimony must be germane to a specific item(s) on the meeting agenda, and the testimony must not exceed three minutes; the Secretary will keep track of the time and advise when the time for public testimony has expired. Persons authorized to provide public testimony shall not use vulgar, abusive, or otherwise inappropriate language when addressing the Board; failure to act appropriately; failure to speak to an item that is germane to the meeting, or failure to adhere to the time requirements may result in expulsion from the meeting and/or disqualify the person from providing future testimony.

14-5248

Sponsored by: JOHN A. FRITCHEY, County Commissioner

PROPOSED RESOLUTION

CALLING FOR A COOK COUNTY MENTAL HEALTH PUBLIC HEARING

WHEREAS, according to the National Alliance on Mental Illness (NAMI), nearly 60 million Americans experience a mental health condition every year; regardless of race, age, religion or economic status, mental illness impacts the lives of at least one in four adults and 1 in 10 children across the United States; and

WHEREAS, deinstitutionalization, the name given to the policy of moving severely mentally ill people out of large state institutions and then closing part or all of those institutions began in 1955 with the widespread introduction of chlorpromazine, commonly known as Thorazine, the first effective antipsychotic medication, and received a major impetus 10 years later with the enactment of federal Medicaid and Medicare; and

WHEREAS, deinstitutionalization has inadvertently helped create the mental illness crisis by discharging people from public psychiatric hospitals without ensuring that they received the medication and rehabilitation services necessary for them to live successfully in the community; and

WHEREAS, this policy further exacerbated the situation as once the public psychiatric beds had been closed, they were not available for people who later became mentally ill, a situation that continues to this day; and

WHEREAS, in addition, over the past decade, states have cut billions from their mental health budgets, shuttering clinics across the country including here in Illinois and Cook County; resulting in thousands of mentally ill people funneling in and out of the nation's jails that are ill-equipped to handle them, effectively criminalizing mental illness; and

WHEREAS, according to the most recent national study conducted by the Justice Department's Bureau of Justice Statistics in 2006, more than half of all prison and jail inmates, including 56 percent of state prisoners, 45 percent of federal prisoners and 64 percent of local jail inmates, were found to have a mental health problem; and

WHEREAS, jail and prison are particularly bad places for the mentally ill as men and women with behavioral disorders and mental illness end up in stressful prison environments and many are put in seclusion for long stretches of time that further exacerbate their conditions; and

WHEREAS, according to a 2010 study by the National Sheriffs' Association and the Treatment Advocacy Center, nationwide more than three times as many mentally ill people are housed in prisons and jails as in hospitals; and

WHEREAS, in Cook County, it is estimated that up to 30% of inmates being held in the county jail have a mental illness on a given day, making the jail Illinois' and one of the nation's largest mental health facilities; and

WHEREAS, it costs \$143 per day to house an inmate at the Cook County jail that number jumps to upwards of \$200 and sometimes far more for an inmate with a mental illness, due to the costs of medication and the extra supervision and care that are required to support them; and

WHEREAS, their cases clog the courts with largely minor offenses that in turn lengthens the jail time for everyone. The average length of stay is now eight days longer than it was just a few years ago, costing county taxpayers \$10 million more every year, which doesn't include the associated court costs putting a strain on the entire criminal justice system in Cook County; and

WHEREAS, treating the mentally ill in health clinics costs a fraction of what it costs to house them in the county detention center, not to mention the human aspect of housing the mentally ill in a jail setting, where they are often preyed upon while incarcerated, or disciplined because of trouble following rules, and are much more likely than other prisoners, for example, to be injured in a fight; and

WHEREAS, the advent of the Affordable Care Act (ACA) and resulting County Care program along with State Medicaid has given the County a tool to potentially change the makeup of the jail population, decrease the burden on local taxpayers, and ensure that the most vulnerable patients have access to coordinated health-care coverage; and

WHEREAS, at present up to 9,000 people who have been incarcerated at the County Jail have signed up for health insurance under the Affordable Care Act; and

WHEREAS, the Cook County Health and Hospitals System plays an important role in providing care for the mentally ill at the jail by administering Cermak Hospital, but also can play an important role in the community at large along with its network of health-care providers and community-based organizations to service the mentally ill population in Cook County; and

WHEREAS, it is essential that this government understands the nature, scope and costs associated with the mental health crisis facing our county in order to make informed decisions to better respond to said crisis while making efficient use of our limited resources;

NOW THEREFORE BE IT RESOLVED, that the Cook County Board of Commissioners does hereby request a public hearing be held to bring together key stakeholders in order to fully understand the status of mental health in Cook County and its associated costs.

Legislative History: 9/10/14 Board of Commissioners referred to the Legislation and Intergovernmental Relations Committee


Secretary

Chairman: Suffredin
Vice-Chairman: Fritchey
Members: Committee of the Whole