



# Mental Health Jail Diversion

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# Project Overview

- Concern about people with mental health issues being housed in the county's jails.
- Exploring mental health jail diversion
  - Site visit to Bexar County, TX
  - 2015 Budget Note
- Diverting these individuals from jail can:
  - Reduce criminal justice system costs
  - Reduce recidivism
  - More effectively treat their mental health needs

# Jail Diversion

- What is jail diversion?
  - avoiding or radically reducing jail time by referring a person to community-based services
- Pre-booking Diversion
- Post-booking Diversion
- Post-plea Diversion

# Project Steps

1. Interview stakeholders.
2. Review the literature.
3. Summarize jail data.
4. Convene a stakeholder group to review the materials and prioritize recommendations.
5. Explore cost information.

# National Data

- 15-17% of people booked into jail have symptoms of mental illness
- An estimated 80% of detainees with mental illness have co-occurring AOD abuse
- Often have chronic health conditions

# National Data (continued)

- Often charged with low-level nuisance crimes
- Violent behavior is often associated with AOD abuse
- Challenging population to engage in treatment
- High rates of recidivism

# Local Data

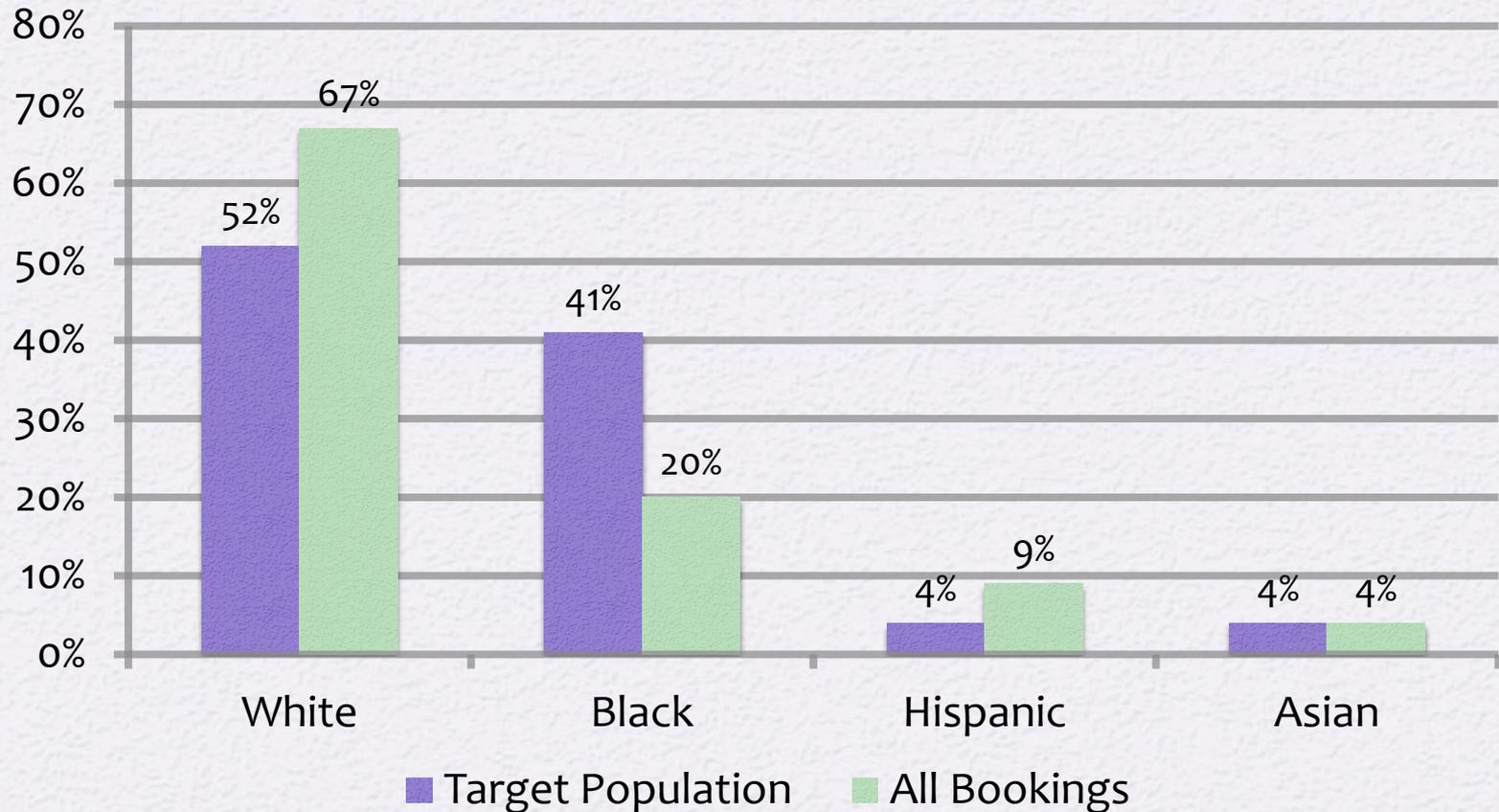
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# Target Population

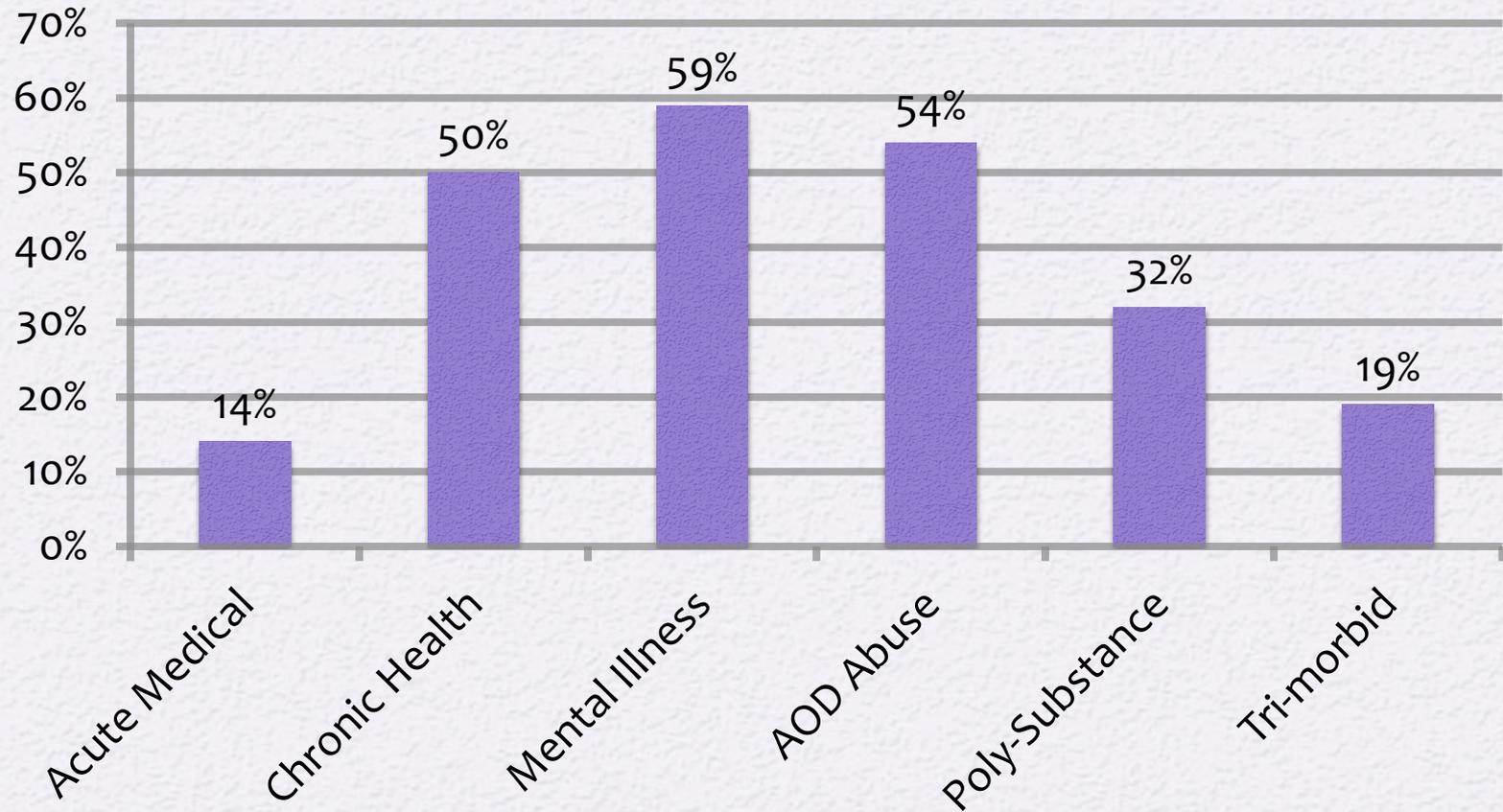
80 people who were held in jail in October 2014, including:

- 18 screened by DCJ's Pretrial Services Program (PSP)
- 44 screened by the MCSO's Close Street Supervision Program (CSS)
- 18 individuals on community supervision who had been placed on a jail hold by officers of DCJ's Mentally Ill Offender (MIO) Unit

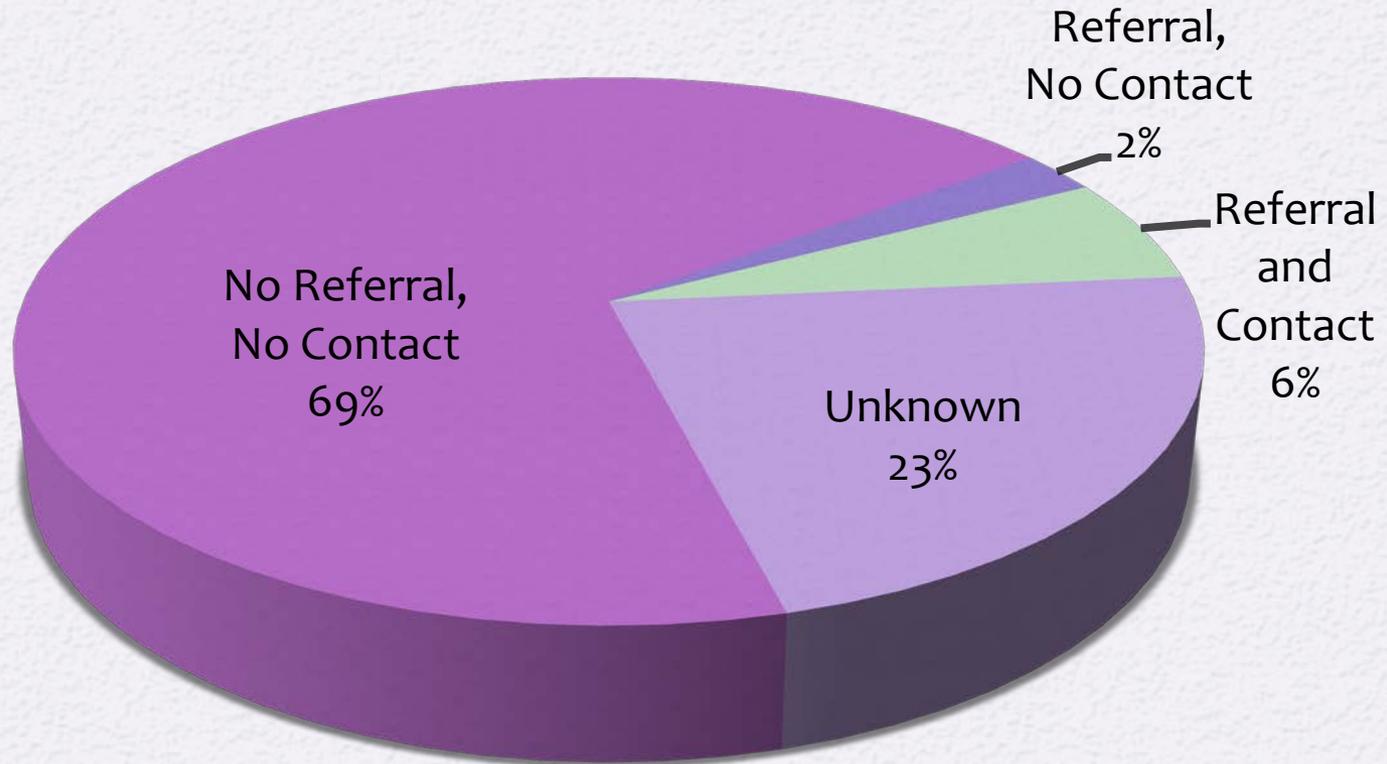
# Target Population: Race



# Target Population: Diagnoses

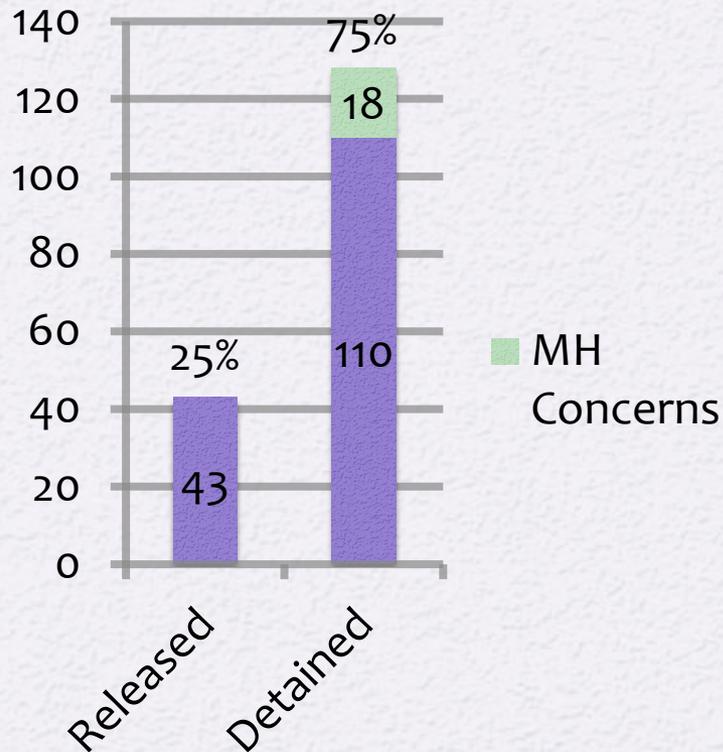


# Referrals & Service Encounters



# Pretrial Services Program

**PSP Referrals (N=171)**



| Primary Charges        | #         |
|------------------------|-----------|
| Poss. of Cocaine/Meth  | 5         |
| Rest. Ord Violation    | 3         |
| DV-related charges     | 3         |
| Indecent Exposure      | 2         |
| Robbery II             | 1         |
| Theft I                | 1         |
| Assault of an Officer  | 1         |
| Resisting Arrest       | 1         |
| Failure to reg as a SO | 1         |
| <b>Total</b>           | <b>18</b> |

# Close Street (CSS)

- 44 detainees screened & denied
- Denial Reasons:
  - Lack ties/stability (20)
  - Danger to self or others (9)

| Top Primary Charges               | #  |
|-----------------------------------|----|
| Robbery I, II, & III              | 12 |
| Assault II, III, & IV (mostly DV) | 10 |
| Burglary I                        | 4  |
| Coercion                          | 2  |
| Kidnap I                          | 2  |
| Rape I and Rape-DV                | 2  |
| Sex Abuse I                       | 2  |
| Sodomy I                          | 2  |
| Other                             | 8  |
| Total                             | 44 |

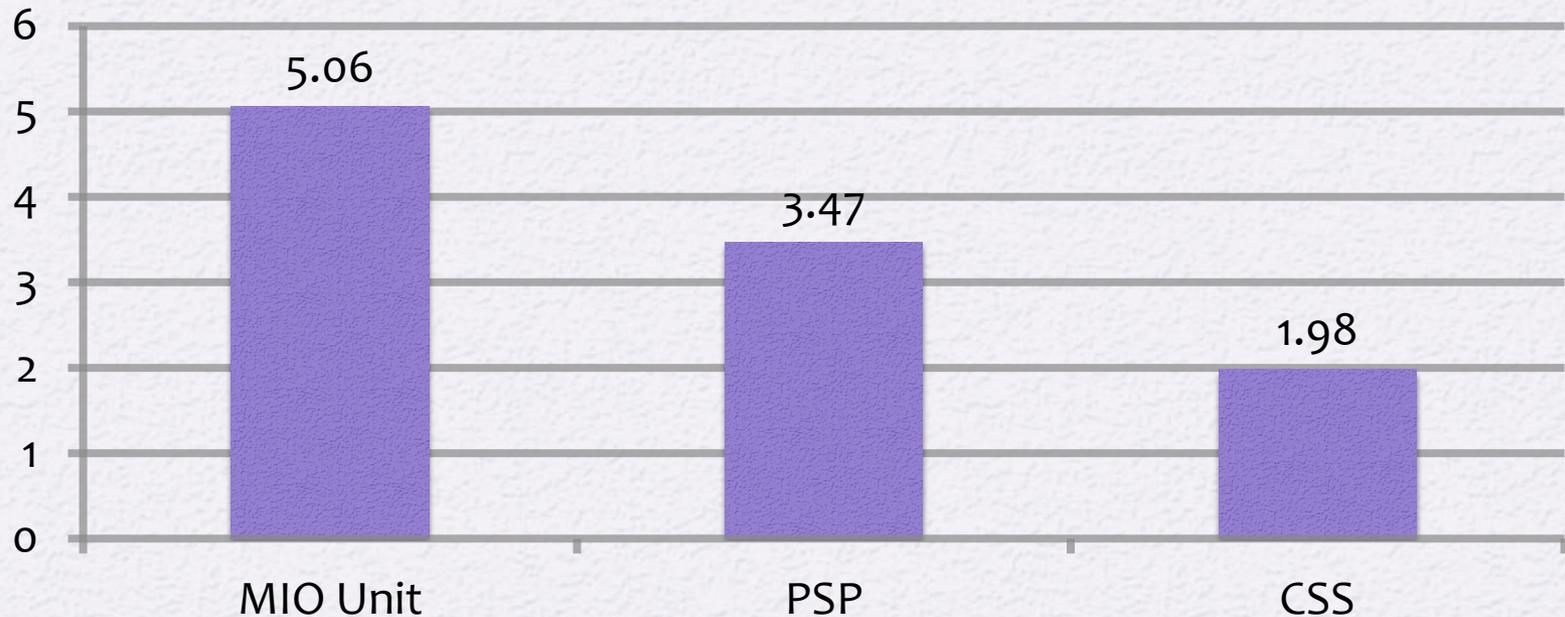
# MIOU

- 18 individuals on DCJ holds
- 7 (39%) were good candidates for diversion
- 7 (39%) warrants for non report
- 4 (22%) not good candidates for diversion

| Primary Charges                | #  |
|--------------------------------|----|
| Parole Violation               | 11 |
| DUII                           | 1  |
| Indecent Exposure              | 1  |
| Unlawful Possession of Meth    | 1  |
| Robbery III                    | 1  |
| Theft of Services              | 1  |
| Unlawful Delivery of Marijuana | 1  |
| US Marshal Hold                | 1  |
| Total                          | 18 |

# Booking Frequency

**Average Number of Bookings Per Person  
(Target Population)  
11/2013 – 10/2014**



# Jail Utilization

- Represents 1,352 days (4%) of jail bed day utilization in October
- Average of 19.27 days per detainee in October (ALOS=13.51)
- Housed in multiple units at both Inverness and the Detention Center

| MCDC Unit                    | # of Stays |
|------------------------------|------------|
| Close Custody & Discipline   | 32         |
| Gen Pop                      | 29         |
| Transitional                 | 17         |
| Acute & Mental Close Custody | 16         |
| Psych Infirmary              | 13         |
| Suicide Watch                | 10         |

# *System Strengths and Opportunities*

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# Interviews: Strengths

- Good relationships and cooperation across the system
- Improvements in communication & support of elected officials
- Recently enhanced range of services and focus on transition services

# Interviews: Opportunities

- Coordination across systems
- Information sharing
  - Confidentiality
  - Electronic data
- Detainees
  - Identifying defendants at booking
  - Engaging while detained
- Timelines/wait times
- Staffing and training
- Court/pretrial processes

# Diversion Components-Present

- ✓ Urgent mental health walk-in clinic
- ✓ 24-hour 911 triage with crisis hotline
- ✓ 24-hour mental health crisis hotline
- ✓ 24-hour mobile mental health outreach teams
- ✓ Police officer Crisis Intervention Training (CIT) and Enhanced CIT
- ✓ Portland Police BHU
- ✓ Combined police/mental health clinician teams
- ✓ Detox/sobering station
- ✓ Hospital commitment (acute care)
- ✓ Pretrial supervision
- ✓ Specialty courts
- ✓ Forensic diversion
- ✓ Contracted forensic mental health treatment services
- ✓ Specialty mental health outpatient
- ✓ Limited culturally specific services
- ✓ Co-located medical & behavioral health services

# Diversion Components-Lacking

- 24-hour crisis drop-off center
- Psychiatric emergency room
- Release on commercial bond with mental health conditions
- Co-located mental health services at arraignment
- Supported housing
- Drop-in day center
- Peer-based program options

# *Recommendations*

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# Recommendations

- **Recommendation A:** *Implement high-priority enhancement opportunities identified by stakeholders.*
  - A1. Improve information sharing (including confidentiality restrictions).
  - A2. Coordinate better across systems.
  - A3. Identify defendants with mental illness at booking and engage them while in jail.

# Recommendations

- **Recommendation B:** *Collect and analyze data to better understand the actual costs of housing people with mental illness in the jail.*
- **Recommendation C:** *Explore apparent racial disparities in the detention of people with mental illness.*
- **Recommendation D:** *Evaluate the availability of culturally specific services.*

# Recommendations

- **Recommendation E:** *Fill prominent system gaps*
  - 24-hour crisis drop-off center
  - Dual-diagnosis treatment
  - Residential dual-diagnosis treatment for women
  - Outreach and engagement
  - Adequate supplies of appropriate housing

# Discussion



Photo: [Tom](#) on Flickr