DBHDS

Virginia Department of
Behavioral Health and
Developmental Services

Report on Item 315U – Community-based Jail Diversion programs

To the Chairmen of the
House Appropriations and Senate Finance Committees
and the Joint Commission on Health Care

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1220 Bank Street • P.O. Box 1797 • Richmond, Virginia 23218-1797
Phone: (804) 786-3921 • Fax: (804) 371-6638 • Web site: www.dbhds.virginia.gov

Report on Item 315U of the 2008 Appropriations Act:
Community-based Jail Diversion programs

I. Background

During the 2008 Session, the Virginia General Assembly appropriated funding to the Department of Mental Health, Mental Retardation and Substance Abuse Services (DBHDS) to promote the diversion of persons with mental illness from unnecessary involvement with the criminal justice system. The language of that appropriation, contained in Item 315U, is as follows:

Out of this appropriation, $500,000 the first year and $500,000 the second year from the general fund shall be used to expand community-based programs that divert individuals with mental illness from jails or for aftercare programs for individuals with mental illness who have been released from jail. The Department of Mental Health, Mental Retardation and Substance Abuse Services shall establish criteria, administer and evaluate the grants provided for this purpose. Beginning October 1, 2007, the Department shall report program information and outcome data annually to the Chairmen of the Senate Finance and House Appropriations Committees and the Joint Commission on Health Care.

Allocation of the funding was based upon several factors, including: consideration of the legislative basis for the development of Item 315U; the prior participation of the Community Services Boards (CSB) and Behavioral Health Authority (BHA) listed below in the original requests for pilot program funding made to the Joint Commission on Health Care in November of 2005; and the high level of activity that was already in place around the issue of developing jail diversion services in the CSB regions selected.

DBHDS continues to support the goal of the development and implementation of a comprehensive, jointly developed DBHDS/CSB/BHA Community-Based Jail Diversion program in those areas of the state that have large local or regional jails holding a high number of inmates with mental illness. In addition to the great need for increased access to mental health treatment services for inmates with mental illness in the jails of those targeted areas, the jails in these areas present a high demand for DBHDS hospital beds.

DBHDS continues to support the idea that the diversion programs developed would focus upon implementing a "post-booking" form of jail diversion, targeted toward criminal defendants with mental illness who had been incarcerated on minor, nonviolent misdemeanor charges, and who otherwise posed minimal public safety risk. Implementation of this program has also been directed at decreasing the demand for scarce jail and state hospital resources in the designated areas, while providing access to crucial mental health care for an otherwise underserved population of people with disabilites. An additional goal of this program has been to facilitate care coordination among the CSBs, the local and regional jails involved, and state hospital forensic programs, in a manner that would allow each entity to fulfill its mission expeditiously, and that would promote safe community reentry for program clientele.

II. Allocation of Funding

Jail diversion program funding from Item 315U was allocated to the following CSBs in the cited Health Planning Regions for FY 2008:

- Health Planning Region II:
    - Arlington Community Services Board

    - Fairfax-Falls Church Community Services Board
- Health Planning Region III:
    - Central Virginia Community Services Board
- Health Planning Region IV:
    - Henrico Area Mental Health and Mental Retardation Services
    - Health Planning Region IV Jail Services team
- Health Planning Region V:
    - Norfolk Community Services Board
    - Virginia Beach Department of Human Services

Six of the seven programs selected to participate in the Jail Diversion were granted a total of $75,000, with the exception of the Central Virginia CSB, which received a $30,000 grant. [See Appendix A, Program Requirements.]

III. FY 2009 Program Results

Year three of the jail diversion initiative funded by Item 315U has continued to produce positive outcomes for jail inmates with serious mental illness. At the end of FY 2009, program participants reported the following accomplishments had been attained:

- 139 individuals were enrolled in program services during FY 09.
- 119 jail inmates with mental illness were diverted to community treatment and residence, prior to their trial.
- 14 jail inmates with mental illness were released to intensive community mental health services, following completion of their sentences.
- 6 jail inmates were still incarcerated, but receiving program services at the end of FY 09.
- 5,054 hours of intensive case management were provided to jailed and diverted persons with mental illness.
- Considering the 119 inmates diverted prior to trial, and that the average hospital stay for restoration to competency (a typical reason for state hospital admission of defendants with mental illness) is 90 days, it seems reasonable that the program reduced the use of 10,710 state hospital bed days, making those facilities available to other patients who truly needed hospitalization.

The community programs funded through Item 315 U have had notable beneficial impact upon a growing number of mental health services consumers who have come under criminal justice aegis in the localities where these programs are in place. It is anticipated that this funding, in conjunction with other local and state resources that are currently being devoted to improving access to mental health services for those with criminal justice system involvement, will produce long-term benefits by reducing unnecessary incarceration of persons with mental illness, and sparing the jails and courts the challenges and expense of prosecuting and confining individuals who are mainly in need of mental health treatment.

APPENDIX A

Program Requirements

The funding and contractual management of the Jail Diversion program has been conducted through the provisions of the Community Services Performance Contract maintained by DBHDS with each CSB/BHA. The general goals and requirements of each program were as follows (Contract requirements with the Central Virginia CSB included planning for programmatic implementation, rather than implementation, *per se*; all other requirements for that program were identical to the others.):

Exhibit D: Individual Board Performance Measures for Jail Diversion Services

The _____Board, herein after referred to as the Board, agrees to comply with the following conditions for its receipt of mental health state general funds from the Department.

1. The Board agrees to provide or expand community-based services to divert individuals with mental illness from local jails and to provide aftercare programs for individuals with mental illness who have been released from jails. The Board's jail diversion program shall include active consumer participation in all relevant aspects of assessment and treatment planning and implementation.

2. The Board in conjunction with the Department will develop criteria, or use existing diagnostic criteria for assessing individuals in jails to determine the presence of mental illness. Those individuals who are determined to be mentally ill shall be the population that receives Jail Diversion Services.

3. The Board will collaborate with the Department's Jail Diversion Program in developing statewide training activities and related initiatives.

4. The Board, in conjunction with the Department, will develop a Memorandum of Agreement between the Community Criminal Justice Board (CCJB) to allow for planning, implementation, and evaluation of the Jail Diversion Service. In the event that the CCJB cannot serve this purpose for the Board and locality, the Board shall implement a multi-agency jail diversion stakeholders work group for planning and program development collaboration.

5. The Board shall jointly develop and implement a "postbooking"/prerelease jail diversion program in its jurisdiction, in conjunction with the courts, the local pretrial/probation services agency, the Commonwealth's Attorney, the local indigent defense bar, the local/regional jail(s), and other stakeholder agencies.

6. The Board shall designate a Jail Diversion Coordinator, as part of the jail diversion program.

7. A comprehensive individual Jail Diversion Services Plan, which shall include risk assessment results and pertinent demographic information, shall be developed and

implemented for and with each diverted jail inmate. Copies of these plans shall be provided to the Department's Division of Forensic Services for outcomes assessment. The Board will provide intensive case management services to those individuals who are provided Jail Diversion Services. Those consumers served and the service units provided will be included in the CSB information system so it can be extracted through the Community Consumer Submission (CCS 2) and reported in the Community Automated Reporting System (CARS). For those individuals who are currently in jail, Data Element 23 in CCS 2 will be local jail or correctional facility. For those individuals who have been released from jail, Data Element 15 will be local correctional facility. Both of these elements will be used to identify consumers appropriate for Jail Diversion Services.

8. The Board will identify those jail inmates in the Jail Diversion Program who are Medicaid eligible but not enrolled in Medicaid and provide assistance to complete Medicaid enrollment.

9. The Board shall report to the Department on a quarterly basis. The Board shall provide information regarding the number of individuals screened who are currently in jail receiving or not receiving treatment, the number screened who have been released from jail, and the number of screened individuals who are accepted in Jail Diversion Services. (This information can be included in CSB information systems so it can be extracted using CCS 2 and reported in CARS to the Department.) The Board shall also provide outcome data as feasible, including: legal case dispositions; the numbers of jail days spared each client by diversion, days in the community post-diversion, and re-arrest and trial/sentencing information; and any additional outcome measures are jointly developed and agreed to by the Department and the Board.

10. For the balance of this fiscal year, the Board will be asked to provide the information in sections 7 and 9, along with the required CCS 2 data elements on Jail Diversion Project consumers, on a hard copy report, to be developed in conjunction with the Department's Division of Forensic Services.