Improving Reintegration Through Collaborative Jail-Community Partnerships

Maricopa County Correctional Health Services
CYCLE OF RECIDIVISM

JAIL

ARREST

COURT

RELEASE

PROBATION

JUSTICE INVOLVED INDIVIDUAL
What can be done to reduce recidivism for patients with Mental Illness?
COLLABORATION!
Smart Justice

- The aim of Smart Justice is to promote the application of evidenced-based principles and practices to improve public safety outcomes.

- Correctional Health Services (CHS) is a member of the Smart Justice committee which is composed of various Maricopa County justice agency partners and representation from Mercy Maricopa Integrated Care.

- Smart Justice has adopted working goals to reduce recidivism back to the criminal justice system for individuals with moderate to high risk to recidivate and to reduce length of stay in jail for low risk individuals booked into jail.

- Previous research conducted by Maricopa County Justice Systems Planning and Information (JSPI) showed the harmful impact (escalating recidivism risk) of incarceration beyond 72 hours for low risk offenders.

- Smart Justice goals specifically address these aims for the Serious Mental Illness designated population.
Stepping up Proclamation (SMI)

Maricopa County Board of Supervisors signed the 'Stepping Up' Proclamation on May 4, 2015. 'Stepping Up' is a NACo (National Association of Counties) initiative in which counties across the nation commit to reduce the number of individuals with SMI in the jails. The focus of the initiative is to build partnership across various justice and community agencies to positively impact legislation, policies and practices in order to improve public safety, reduce recidivism and promote a stronger community. The proclamation demonstrates the commitment Maricopa County leadership has made to address these goals.
Diversion Programs

Maricopa County Attorney’s Office Diversion Programs offer an alternative to traditional case processing so certain individuals accused of committing a crime may participate in a community-based education or treatment program that addresses behavioral change, so the individual may become a productive citizen. The Deputy County Attorney carefully evaluates cases for offense eligibility and offender suitability for each diversion program. Ultimately, reducing recidivism while preserving limited prosecutorial resources is the primary goal of diversion.

Pursuant to A.R.S. § 11-361 et seq., the County Attorney has sole discretion to divert or defer the prosecution of a person accused of committing a crime to an authorized diversion program. County Attorney Bill Montgomery has authorized the following diversion programs:
Drug Diversion Programs

Drug Diversion
The program began in 1989 as an education and treatment program for individuals meeting eligibility criteria and suspected or charged with crimes involving possession of controlled substances. The program is available as a charging alternative (pre-file) and after charging, as an alternative to prosecution (post-file). Participants who successfully complete the program can avoid criminal charges being filed against them or can have filed charges dismissed with prejudice to avoid a felony conviction.

Opioid Court (Pilot Project)
The City of Phoenix is creating a diversion program specific to individuals with an opioid use/misuse history. Criteria, eligibility and processes are currently being developed. The working goal is to offer different ways to use the criminal justice system to address the opioid crisis.
Drug Diversion Programs continued

Felony Pretrial Intervention Program (FPIP)

The program began in 2015 as a cognitive-behavioral treatment program for individuals charged with specific Class 4, 5 and 6 felony offenses. Along with other prescribed eligibility criteria, individuals must have a minimal criminal history and are low risk to reoffend. The program is available as a post-charging alternative. Participants who successfully complete the program can have filed charges dismissed to avoid a felony conviction.

The Felony Pretrial Intervention Program is an alternative to traditional court prosecution. The main goal of the program is to reduce recidivism by requiring defendants to complete treatment programs that are targeted to their individual needs. Participation in this program can produce better outcomes for our community while also managing taxpayer funds more efficiently.

Public safety is paramount. For that reason, violent offenders and others who pose a substantial risk to reoffend will not be allowed to participate in this program.

Crime victims will receive restitution faster than with traditional court prosecution.

Defendants will be selected based on numerous factors, including the current charges, their overall criminal history, the amount of loss they caused in the current crime, the input and views of the crime victims, and evidence-based risk assessment tools.

The “Thinking For a Change” Program which is used by criminal justice organizations around the country - including the Maricopa County Probation Department and the Maricopa County Jails - will be the core curriculum for the cognitive treatment component of this program.

This program will be “user-funded,” which means that individuals who will get the most benefit from the treatment program - the defendants - will bear the costs of the program. Research has demonstrated that people are more successful in treatment programs if they have a financial stake in their treatment.

The program will be assessed and evaluated on a regular basis to ensure that the primary goal of reducing recidivism is being achieved and that justice is being done in individual cases.
FPIP: Felony Pre-trial Intervention Program

- **Who is Eligible to Participate?**

Eligibility is determined on a case-by-case, defendant-by-defendant basis. This program is intended for offenders with minimal criminal history who are willing to do the hard work necessary to get back on track and become productive members of our community. To participate, an offender must admit to their criminal conduct, agree to make full restitution to all victims, and agree to the timely completion of all treatment programs as directed by their case manager.

- **Restitution**

To participate in the program, a defendant must agree to pay full restitution to all victims. To ensure that full restitution can be paid before the program is completed, restitution must be easy to determine and cannot exceed certain amounts. Participants in the program must agree to pay at least 50% of the total restitution within their first month in the program. Victims will receive restitution much faster under this program than they would with traditional court prosecution.

- **Successful completion of the treatment program results in a dismissal of the case.**

- **The program should be completed in one year or less in most cases.**
What happens if someone is not successful?

This program is challenging, and defendants will be required to apply themselves and fully embrace this unique opportunity. The service provider will monitor each defendant’s progress in the program and, if an individual is not actively participating in their treatment plan, prosecution will be resumed. If convicted, the defendant will face the full range of consequences provided by law for their crime which can include probation, jail time, fines, and prison.
Diversion Opportunities at Intake

Diversion opportunities at Intake apply to two broad categories of individuals:

- SMI Active and Inactive
- General Mental Health with Active AHCCCS
Criminal Justice Engagement Team (CJET)

CHS in collaboration with the Adult Probation - Pre-Trail Services, Maricopa County Superior Court and City of Phoenix court, Southwest Behavioral Health (and others) have implemented the following early diversion program for low risk individuals that have a mental illness.

The CJET program is designed to help individuals who frequent the legal system and/or are transition from the jail.
CJET Team: Who are they?

Criminal Justice Engagement Team members are peers who work with people who have been diagnosed with a serious mental illness and end up in jail. They provide necessary support to navigate through the justice system and/or address barriers to success, such as transportation, housing, and access to treatment.

Beginning September of 2017, one full-time CJET staff member became embedded the Maricopa County jail system at Intake. CJET Staff are fully badged and able to work independent from CHS Mental Health Staff.

Currently, there are three CJET staff members covering Intake and more to come. 😊

Future goal: CJET staff will expand to other jails (Durango, LBJ and Estrella).
CJET Services

This program is a specialty program working with adult individuals who frequent the legal system and/or are transitioning within or from jail or prison systems. The program provides an appropriate level of service to individuals to complete a successful transition from jail, reduce recidivism, reduce the frequency of incarceration, and increase support systems available to the client.

Other goals to include the following:

a. Work as part of a multi-disciplinary team with City, Police, Jail/Prison Systems, Prosecutors, Court System, PNO Case managers, and Program Liaisons
b. Responsible for taking the lead in coordination and facilitation of Jail/Prison transition
c. Plan, coordinate, and assist the client with immediate and basics needs for release.
d. Make referrals to appropriate services in cooperation with PNO clinical teams, and monitor client participation & compliance.
e. Work to provide and or facilitate the prescribed treatment planned accordingly
f. Work with persons to reestablish benefits
g. Provide screenings and ongoing assessments.
h. Provides crisis intervention, de-escalation, and Behavioral Health interventions.
i. Assist in facilitating needs to help individuals be successful in the program.
j. Limited housing
k. Transportation to court
CJET Benefits:

- In June of 2018, CJET provided data (January through May 2018) to the Justice System Planning and Information (JSPI) division for evaluation. Preliminary results demonstrate success addressing the needs of individuals with mental illness who have become involved in the criminal justice system.

  - **Ongoing goals:**
    - Reduce the harm of incarceration
    - Reduce amount of time in jail
    - And to reduce recidivism by engaging low risk individuals at the earliest opportunity (booking and intake) and by creating safe and effective community release plans.

- CJET expansion plan includes providing services to General Mental Health patients who receive AHCCCS.
General Process

Maricopa County Jail

Pre-Intake 4th Ave

Receiving Screening

Medical Clinic MH

ID & Court

Hospital

CJET

Release Stay

Release to CJET
Community Transition Planning

- Connecting justice-involved individuals to community resources with navigators to assist them in their transition to the community
- These ‘warm transfers’ into the community allow for more individualized assistance navigating the often complicated community resources, as well as an opportunity to build a relationship with a peer who has knowledge and experience
- The Community Transition Team assures provision of needed information to community agency navigation staff and responds to the needs and concerns they have in locating their clients, negotiating jail visits, arranging courtesy releases and receiving necessary health/needs information to effect the warm transfer and to continue care.
Stepping Up to Reduce Jail involvement for the Seriously Mentally Ill with Warm Transfers

Correctional Health Services (CHS) addresses potential for over incarceration of seriously mentally ill (SMI) individuals by screening, electronic health record (eHR) flagging, continuation of medications, mental health (MH) treatment while in custody, and community transition planning. Reporting ability in the eHR was developed to capture baseline data. However, many SMI continued to be rearrested, usually for low level offenses. CHS identified the risk of SMI over representation and higher recidivism rate, compared to overall population, and developed an action plan: a navigation program (NP) with “warm hand offs” (community staff reach in to create pre-release connections) to promote effective community transition. CHS MH staff identify individuals for referral according to recidivism risk and MH needs. Jail detention staff facilitate a courtesy release process so that community staff meet the person exiting jail, assuring service connection at a time of heightened vulnerability. Maricopa County signed a Stepping Up Proclamation in 2015 as part of its “Smart Justice” cross agency collaboration. Justice Systems Planning and Information (JSPI) developed SMI baseline data and provides analysis to demonstrate program efficacy.
State Targeted Response (STR)
State Opioid Response (SOR)

AHCCCS State Targeted Opioid Response Grant (CHS - STR Navigator Program)
This was developed as part of the Arizona Opioid State Targeted Response Grant received by AHCCCS. This grant funds community MAT (Medication Assisted Treatment) programs to have dedicated staff to provide reach in services to the opioid involved population in the jail.

- Southwest Behavioral Health Services (SBHS-leveraging CJET)
- Community Bridges (CBI-leveraging Hand in Hand, “crisis” navigators)
- Valle del Sol (crisis navigators)
- National Council on Alcohol and Drug Disorders (NCADD-females only-Justice Involved Women’s Initiative)
- Community Medical Services (CMS) also provides navigation and MAT services through different funding.

Grant goal: Increase awareness and connection to Medication Assisted Treatment-MAT
Emphasis on navigators with lived experience
AHCCCS Complete Care (ACC) Reach IN

Care 1st

Our United Culture. The way forward.
- Integrity
- Compassion
- Relationships
- Innovation
- Performance
AHCCCS Application Assistance

AHCCCS has partnered with state and county governments to improve coordination within the criminal justice system. Our shared goals include creating a more cost effective and efficient way to provide access to critical healthcare for people released from incarceration. Participating departments (CHS, APD) submit pre-release applications approximately 30 days before detainees are released from jail. If additional information is required, these applications are submitted to special units at AHCCCS and the Department of Economic Security (DES) for review and processing.
SSI/SSDI Outreach, Access and Recovery

- SOAR stands for SSI/SSDI Outreach, Access and Recovery
- For people who are experiencing or at-risk of homelessness
- A model for assisting individuals to apply for Social Security disability benefits
- Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA) in collaboration with SSA since 2005
- All 50 states currently participate
Mosaic

Helping individuals put the pieces back together
* Evidence based, intensive 7-week substance use program
* Referrals through: CHSMosaic@Maricopa.gov
  Response within 10 days
* Medium to high proxy scores
* High AUDIT and DAST scores
* Six 7-week cycles, 500 individuals to be placed
* 92-95% retention
* Emphasis on community connection
Mission:
To work hand in hand with supportive services, housing providers, physical and mental health services, jails, and policy makers to serve justice-involved homeless individuals and families; by connecting them with necessary supports and housing.
Granted 2018 National Association of Counties (NACo) Achievement Award

- **Hand-in-Hand - A Collaborative Initiative for Justice Involved Homeless Households**

Representatives from Maricopa County Human Services Department (HSD), Correctional Health Services, (CHS), Justice Systems Planning & Information (JSPI), Housing Authority of Maricopa County (HAMC), and other community-based partners have created a partnership to reduce recidivism, and connect people experiencing homelessness, and are justice engaged, to appropriate housing, and supportive services. The collaborative works hand in hand with supportive services, housing providers, physical and mental health services, jails, and policy makers to serve justice-involved homeless individuals and families; connecting participants to necessary supports and housing; through the development of a sophisticated, and person-centered continuum of services.
Naloxone Harm Reduction Strategy
This is an effort to reduce overdose deaths and educate the justice involved opioid using population about naloxone

- Spring 2017 Haley Coles of Sonoran Prevention Works approached CHS to consider releasing detainees with naloxone
- SPW helped educate staff on delivering patient education on nasal naloxone use for overdose
- MCSO approved CHS to distribute the kits at release
- July 2017 CHS began distributing naloxone at release
- Patients are educated by RN’s at their COWS assessments
- Flags are set in our system indicating patient education completed
- LPN’s place nasal sprays in patient property to have at release
- Officers give the kit to the patient with their property
SBIRT - Screening, Brief Intervention Referral to Treatment

SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders.

Primary care centers, hospital emergency rooms, trauma centers, and other community settings provide opportunities for early intervention with at-risk substance users before more severe consequences occur.
The SBIRT (Screening, Brief Intervention, Referral to Treatment) model, utilized in medical clinics, hospitals and other community settings, is an effective process for jails to identify individuals at risk with evidence-based screening tools, to provide educational interventions by trained health staff, and to make treatment referrals. By modifying an existing electronic health record system to add screening tools and to capture interventions and referrals, a jail healthcare team can capture data to identify and treat the substance abusing population as well as to provide valuable reporting data on substance misuse prevalence and trends over time at very little cost. Collaboration among county departments to provide SBIRT training model raises health care provider awareness and skill to incorporate substance use assessment and treatment into existing health care, again at little cost due to cross departmental collaboration.
COMMUNITY TRANSITION SERVICE PROVIDERS
Do we know the missing pieces to reducing recidivism?
Questions?