JAIL DIVERSION INITIATIVES

Program Annual Review FY2017

Virginia Department of Behavioral Health and Developmental Services

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Executive Summary

The Department of Behavioral Health and Developmental Services (hereafter referred to as Department or DBHDS) supports a variety of Jail Diversion Initiatives, all of which reside within the Office of Forensic Services. Jail Diversion Initiatives come in a variety of forms, but all essentially strive to identify individuals diagnosed with serious mental illnesses (SMI) and co-occurring disorders (early identification), divert individuals away from the criminal justice system (or from penetrating more deeply, if identified after arrest/incarceration), and connect individuals to meaningful services and treatment (as early as possible, but often during initial court appearance, during incarceration, or upon release from jail). This report summarizes the history of jail diversion efforts in Virginia, as well as the scope of the programs currently funded by the Department. Data has been collected and analyzed for Fiscal Year 2017, and the outcomes of the Jail Diversion Initiatives are included in this report.
JAIL DIVERSION INITIATIVES

A HISTORY OF JAIL DIVERSION IN VIRGINIA

In Virginia, Jail Diversion efforts began in 2007 when the Virginia General Assembly approved funding to promote the diversion of persons with mental illness from unnecessary involvement with the criminal justice system. The Department was given the responsibility for oversight of those funds, and seven (7) Community Services Boards (CSBs) were awarded funding for the purpose of Jail Diversion and forensic discharge planning from jails and forensic hospitals.

Jail Diversion gained further momentum with the 2008 signing of Executive Order 62 by Governor Timothy M. Kaine. This order established the Commonwealth Consortium for Mental Health/Criminal Justice Transformation. The Consortium was tasked with the development of a comprehensive approach to address the challenging needs of individuals with mental illness in the Commonwealth’s criminal justice system. Under the leadership of the Secretaries of Health and Human Resources and Public Safety, the Consortium hosted two statewide meetings and saw the development of multiple programs and processes for creating positive systems change.

In May 2008 the Governor’s Conference for Mental Health and Criminal Justice Transformation was convened, with a goal of assisting localities with initiating or furthering their community planning for Jail Diversion and improved services. The model soon after adopted by the Commonwealth’s Jail Diversion Initiatives was the Sequential Intercept Model. Developed in 2006 by Dr. Mark Munetz and Dr. Patricia Griffin, this model provided a conceptual framework for communities to organize targeted strategies for justice-involved individuals with serious mental illness. That same year, the General Assembly approved funding for the continuation and expansion of Jail Diversion initiatives. The Department was once again tasked with administering and overseeing these grants, which were awarded to ten (10) CSBs in late Fiscal Year 2009.

Virginia’s commitment to Jail Diversion is well established, and diversion programs have continued to expand. The Department awarded three (3) one-time Jail Diversion grants in FY2014, two (2) ongoing Jail Diversion grants in FY2016, and two (2) one-time Jail Diversion grants in FY2017 to enhance or initiate new diversion programs in the Commonwealth. The Department remains committed to pursuing strategies for the diversion of persons with serious mental illness from jail into treatment whenever appropriate.
JAIL DIVERSION PROGRAM SITES & DESCRIPTIONS

FY08 Forensic Discharge Planning/Jail Diversion Grantees

Seven (7) Community Services Boards received funding in 2007 for the purpose of establishing a forensic discharge planning position (to work with individuals at the state hospitals under forensic status as well as the jail), and for other necessary resources to provide post-booking jail diversion services to inmates in the local jails. The CSBs who receive these grants are: Arlington CSB, Fairfax-Falls Church CSB, Henrico CSB, Horizon Behavioral Health, Norfolk CSB, Richmond Behavioral Health Authority, and Virginia Beach CSB.

FY09 Jail Diversion Grantees

Ten (10) Community Services Boards received funding starting in 2008 for the purpose of jail diversion. The CSBs who receive these grants and description of their diversion programs are below:

- **Alexandria CSB (Intercepts 4, 5):** The Jail Diversion Grant supports the CORE Program (COllaboration for Recovery and ReEntry), a partnership between the Alexandria CSB and the Office of Probation and Parole. Clinicians and probation officers work closely to
connect persons with mental illness to appropriate treatment prior to release and collaborate through the duration of the probation to prevent the individual from returning to jail.

- **Arlington CSB (Intercepts 2, 3, 4, 5):** The Jail Diversion Grant supports the work of the Magistrate's Post-Booking Diversion Program. The program responds to requests from the Magistrate to assess and divert persons with mental illness into community treatment, and that treatment becomes a condition of the person's bond. Clinicians provide case management, assessment, diversion, and support services to clients across the Sequential Intercept Model.

- **Chesterfield CSB (Intercept 2):** The Jail Diversion Grant supports the Dual Treatment Track (DTT) – a pretrial diversion program for non-violent defendants that suffer from both a serious mental illness and substance abuse addiction. The services are delivered in a day reporting center model, which allows for a “one stop shop” where mental health, case management, substance abuse and criminal justice supervision are combined under one roof with a collaborative multi-agency staff.

- **Fairfax-Falls Church CSB (Intercepts 3, 4, 5):** The Jail Diversion Grant funds the Jail Diversion Program, which provides intensive community-based, wrap around services to mentally ill/co-occurring individuals involved with the criminal justice system. Referrals to the program come from all five Sequential Intercept points. The program provides intensive case management and targeted support services as well as peer specialist partnering. The program also provides vouchers for temporary transitional housing, transportation assistance, and emergency food/clothing needs.

- **Hampton-Newport News CSB (Intercepts 1, 3, 4):** The Jail Diversion Grant funds supervisory, clinical, case management, and peer staffing to work with individuals diverted across the Intercepts. Funds also support psychiatry in the detention center. The Program makes a distinction between Primary and Secondary Diversions - Primary Diversions are persons identified immediately at the time of arrest and Secondary Diversion is targeted at providing psychiatric care and release linkage for persons in jail.

- **Middle Peninsula-Northern Neck CSB (Intercepts 1, 3, 4):** The Jail Diversion Grant funds a Jail Diversion Counselor who provides intensive case management services aimed at intervening and establishing/reestablishing services in the community to avoid incarceration. Funding also supports Peer Support Services that are offered in the community and in the correctional facility and transitional housing.

- **New River Valley CSB (Intercepts 1, 2, 3, 4):** The Jail Diversion Grant supports the Bridge Program, which includes clinical/supervisory, case management, and peer staffing to individuals with mental illness transitioning from jail to community. The Bridge clinicians also provide individual counseling to incarcerated consumers. Additionally, grant funds
support short-term housing assistance, medications, and other emergency needs as they arise.

- **Portsmouth CSB (Intercepts 1, 3, 4):** The Jail Diversion Grant supports diversion efforts at multiple Intercepts. Funding supports one full-time Forensic Case Management position to provide pre- and post-booking services for individuals currently in jail who exhibit symptoms of mental illness, and are charged with minor, non-violent crimes.

- **Rappahannock Area CSB (Intercepts 1, 3, 4):** Jail Diversion Grant funding supports Jail Diversion Therapist and Case Management positions responsible for completing assessments and developing discharge and diversion plans in partnership with the Office of Programs and Community Corrections (pre-trial services) at the Rappahannock Regional Jail.

- **Virginia Beach CSB (Intercepts 1, 3, 4, 5):** The Jail Diversion Grant funds The Mental Health Supervision Program, which is an intervention program designed to provide an alternative to incarceration by diverting individuals with serious mental illness and substance use, who come in contact with the Criminal Justice System. Grant funds also pay for transitional housing, peer services, SOAR, discharge planning services, and WRAP Facilitation.

**FY14 One-Time Jail Diversion Grantees**

Three (3) one-time diversion grants were awarded in 2014 to promote the development or expansion of jail diversion efforts. The CSBs who were awarded these grants and description of their diversion programs are below:

- **Valley Community Services Board (Intercept 3):** One-time funding was granted to support a pilot mental health docket in that catchment area. This docket targets misdemeanor defendants with mental health issues who come before the Staunton and Augusta County General District Courts.

- **Norfolk Community Services Board (Intercepts 3, 4):** One-time funding was granted to provide for temporary housing assistance and other short-term interventions for individuals that are enrolled in the Norfolk Mental Health Court and Norfolk Mental Health Docket who are homeless or in unstable housing.

- **Crossroads Community Services Board (Intercepts 1, 4):** One-time funding was granted to support several initiatives in that area, including the initiation of CIT training, implementation of Mental Health First Aid training for criminal justice personnel,
expansion of discharge planning staff hours, and the development of a stakeholder group designed to identify individuals at risk and increase awareness and collaboration.

**FY16 Jail Diversion Grantees**

Two (2) Community Services Boards received funding starting in FY2016 for the purpose of jail diversion. The CSBs who received these grants and description of their diversion programs are below:

- **Henrico Area Mental Health & Developmental Services (Intercept 2):** The Jail Diversion Grant funded the development of an Intercept 2 Post-Booking Diversion Program. The funds pay for clinical and case management positions with the jail at the booking/initial court hearing stage to identify individuals who are appropriate for diversion. Diversion/release plans are crafted that are presented to the court for approval at an expedited hearing. This allows for release from jail and entry into mental health services at a much earlier juncture.

- **Prince William CSB (Intercept 3):** The Jail Diversion Grant funded the enhancement of the Prince William DIVERT Docket, a specialty therapeutic docket designed to more quickly identify defendants with mental illness, divert from jail when appropriate, and ensure timely linkage to community mental health and support services while under the monitoring of the court. The funding supported the hiring of one full-time therapist to provide direct oversight, coordination, and supervision of docket staff and peer specialists. A second therapist was funded to provide assessments, case planning, and community-based mental health case management. This position links and monitors progress with treatment for the docket.

**FY17 One-Time Jail Diversion Grantees**

Two (2) Community Services Boards received one-time funding in FY2017 for the purpose of jail diversion. The CSBs who received these grants and a description of their diversion programs are below:

- **Region Ten CSB (Intercept 3):** The Jail Diversion Grant funded the planning and initial implementation of a local Mental Health Docket. Funds were used to obtain training on mental health dockets for all members of the Mental Health Docket team, and materials needed to develop and print policy/procedures manuals and docket forms. Funds also went towards a part-time mental health clinician and probation officer staff position.
responsible for implementing the docket following the completion of the planning phase.

- **Alleghany-Highlands CSB (Intercept 3):** The Jail Diversion Grant funded a part-time LPC resident staff position and one additional day per month of psychiatric services in the jail. Funds were also used to obtain Moral Reconciliation Training (MRT) for an LPC resident and supervisor, and MRT curriculum workbooks. MRT was implemented within the jail as a result of grant-funded training and staff time.

**FY17 Mental Health Docket Pilot Projects**

Two (2) Community Services Boards received two-year funding to support the expansion of their existing mental health dockets. These grants were partially funded with Bureau of Justice Assistance funds, along with jail diversion funding from DBHDS. The CSBs who received these funds and a description of their programs are below:

- **Blue Ridge Behavioral Healthcare (Intercept 3):** The diversion funding supported the hiring of a full-time, licensed therapist to serve as a Docket Coordinator – to manage the day-to-day scheduling, communication, and participant services for the mental health docket. Funding also includes travel expenses, training, assessment/screening tools, therapeutic group workbooks and facilitator guides for evidence-based services, and emergency funding for re-entry supplies such as bus passes, housing deposits, medication, identification cards, etc. As a result of the funding, the existing mental health docket has expanded its reach and served more participants.

- **Valley CSB (Intercept 3):** The diversion funding supported the hiring of a part-time Docket Clinician responsible for performing the initial assessment to qualify individuals for the therapeutic docket, coordinate mental health referrals, and to coordinate and facilitate weekly cognitive behavioral group therapy sessions available to all docket participants. Funding also allowed for the hiring of a Docket Coordinator, which is a full-time position housed at Blue Ridge Court Services responsible for preparing the bi-weekly dockets and maintaining the therapeutic docket database. The Coordinator serves as the liaison for the therapeutic docket. Finally, funding supported short-term transitional housing assistance for therapeutic docket participants.

**Jail Diversion Programs Across the Intercepts**

Jail Diversion Grantees provide services across the entire spectrum of the criminal justice process. The graphic below depicts all of the Intercepts where the programs are able to provide diversion services. Only the twelve (12) DBHDS-funded Jail Diversion programs are
included in the graphic below – many other CSBs are providing diversion work beyond those funded by DBHDS but are not included in this report.

* Programs may appear in multiple Intercepts, the primary Intercept where each program performs the majority of their interventions is underlined.
Jail Diversion Funding

The following graph depicts the award year, amount, and duration of funding for each of the Jail Diversion programs monitored by the Department of Behavioral Health and Developmental Services:

<table>
<thead>
<tr>
<th>Jail Diversion Program</th>
<th>Annual Funding Started FY08</th>
<th>Annual Funding Black = Started FY09</th>
<th>Annual Funding Green = Started FY16</th>
<th>Annual Funding Blue = Started FY17</th>
<th>One-Time Funding FY14</th>
<th>One-Time Funding FY17</th>
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<tr>
<td>Alleghany-Highlands</td>
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<td>$107,968</td>
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Jail Diversion Data FY2017

Beginning in FY10, DBHDS began receiving regular quarterly data reports from the ten (10) diversion programs funded in late FY09 through the Office of Forensic Services. In FY16 two new sights were added. One of those sites involves the collection of different data elements, so the data below is a snapshot of the services the eleven (11) programs provided and the people who have benefited from the services during Fiscal Year 2017.

Who have we served?

Individuals Screened and Enrolled in JD Services by Fiscal Year

FY17 Participant Age
### FY17 Participant Gender

- Male, 66.7%
- Female, 33.1%

### FY17 Participant Race

- Caucasian: 61%
- African American/Black: 32%
- Other (i.e., Asian, American Indian, Mixed Race): 7%

### FY17 Participant Ethnicity

- Non-Hispanic: 94%
- Hispanic/Latino: 2%
- Unknown: 4%
FY17 Participant Military Status

- **Active/Family Member/History of Military**: 4%
- **No Military History**: 84%
- **Unknown**: 12%

FY17 Participant Primary Diagnoses

- **Mood Disorder** = Bipolar Disorder, Major Depression, etc.
- **Psychotic Disorder** = Schizophrenia, Schizoaffective, Delusional Disorder, etc.
- **Substance Abuse Disorder** = Substance Abuse or Dependence
- **Anxiety Disorder** = Post-Traumatic Stress Disorder, Generalized Anxiety, etc.
- **Other Diagnoses** = Adjustment Disorder, ADHD, Impulse Control, etc.
**FY17 Participant Charges**

<table>
<thead>
<tr>
<th>Type</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Felony</td>
<td>68.7%</td>
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<tr>
<td>Misdemeanor</td>
<td>19.7%</td>
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<tr>
<td>Ticket/Infraction</td>
<td>9.0%</td>
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<tr>
<td>Violation</td>
<td>4.6%</td>
</tr>
<tr>
<td>Not Charged/Police Diversion</td>
<td>1.0%</td>
</tr>
<tr>
<td>Unknown</td>
<td>5.9%</td>
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</tbody>
</table>

**FY17 Participant Offense Type**

- **Property**: 22.3%
- **Drug**: 21.3%
- **Minor**: 19.7%
- **Violent**: 17.8%
- **Other (i.e., potentially violent, sex)**: 12.9%
- **Not Charged/Police Diversion**: 1.0%
- **Unknown**: 5.0%
FY17 Condition of Diversion

- Condition of Bail, 8.2%
- Condition of Probation, 6.2%
- Deferred Sentence, 0.4%
- Deferred Prosecution, 0.3%
- Charges Dropped, 0.2%
- Charges Not Filed (CIT), 1.7%
- Not Diverted but Linked, 2.5%
- Participation is not a legal condition, 80.6%

FY2017 Cost Breakdown

Total funding provided to all 11 Jail Diversion Programs reporting the above data in FY17: **$2,012,050**. That equates to **$1,188 per individual**. There may be various uses of these funds depending on the focus of the program, but the following is an illustration of the many ways jail diversion funding is used at the individual level.

$1,188 per person =

- Medications
- Clothing
- Toiletries
- Temporary and Permanent Housing
- Mental Health Treatment Services
- Medical and Dental Services
- Employment and Education
FY 2017 Outcomes

Based upon data collected through the quarterly reports, the outcomes of jail diversion programming for individuals served in FY2017 (N=1693) are below:

- **Average length of incarceration of individuals incarcerated at the time of enrollment** in jail diversion services in FY17 = **141 days**

- **Average length of time between program enrollment and jail release** for participants incarcerated at the time of enrollment = **53 days**

- From FY15-FY17, on average, individuals who were enrolled in diversion services while still incarcerated (N = 575) served **35.2% fewer jail days** than those who were had served the entirety of their incarceration prior to enrollment, indicating that jail diversion programming may have a modest impact on length of jail stay.

- **Completion Rates**: In FY17, **35.3% successful completion** of JD program; **48.6% no longer eligible** (i.e., moved, transferred to another facility, no longer met diagnostic criteria); **15.3% noncompliant or voluntarily withdrew**

- **Housing**: In FY17, **68.6% of individuals maintained stable housing or showed moderate to significant improvements in their housing status** by the time of their discharge from the diversion program

- **Insurance**: In FY17 **41.3% of individuals maintained or showed improvements in their insurance coverage** by the time of their discharge from the diversion program

- **Benefits (SSI/SSDI)**: In FY17 **32.4% of individuals maintained or showed improvement in their benefits status** by the time of their discharge from the diversion program
- **Engagement in Diversion Services**: In FY17, 60% of individuals maintained or showed improvements in their level of engagement in diversion services by the time of their discharge from the diversion program.

- **Mental Health Stability**: In FY17, 41.6% of individuals maintained or showed improvement in their level of mental health stability by the time of their discharge from the diversion program.

- **Linkage to Outpatient Services**: In FY17, 42.3% of individuals maintained linkage or became linked to outpatient mental health services by the time of their discharge from the diversion program.

- **Impact of Diversion Programs on Utilization of Crisis vs. Office-Based Services**: For individuals served by Jail Diversion programs between FY16 and FY17, there was a 28% decrease in utilization of emergency/crisis services 180 days post-discharge as compared to 180 days pre-enrollment. Additionally, there was an increase in utilization of non-crisis office-based treatment services of 91% compared to the 6 months prior to diversion services. Data also showed an increased utilization of case management (13% increase) and PACT services (55% increase).
CONCLUSIONS AND NEXT STEPS

In looking at the data from FY2015 and FY2017 combined, promising trends have begun to emerge. Participation in jail diversion programming does appear to have a modest impact on length of jail stay, engagement in services, and mental health stability for those served. There continues to be room for improvement in the securing of housing, insurance, and disability benefits during program participation, however given that programs are transitional in nature and the average length of time in program is just over 3 months, progress in these areas might be hard to accomplish in a short time frame. Despite this, programs do report that more people are leaving their jail diversion services with connections to treatment providers who will follow up on these social service needs beyond their time enrolled in the diversion program.

With the development of a centralized Data Warehouse at DBHDS, the Office of Forensic Services was able to look at the pre- and post-diversion clinical service utilization of participants. This enabled a more reliable and consistent examination of clinical outcomes for participants of these programs. The results are very encouraging – participants demonstrated reductions in use of crisis services and even greater increases in the use of office-based non-crisis services in the community.

DBHDS plans to continue to collect and analyze data from the current jail diversion programs, as trends will likely become more evident with larger quantities of complete and accurate data. Finally, the Office of Forensic Services has been working to incorporate data on local and regional jail inmates from the Local Inmate Data System (LIDS) into the Data Warehouse as well. With access to this data, the Office of Forensic Services will be able to look at pre- and post-diversion program incarceration rates, jail days, charge types, and other criminal justice outcomes.

DBHDS plans to continue to pursue additional funding opportunities at the state and federal level, in order to continue to be able to fund current programs and provide assistance to new localities that wish to develop jail diversion options.