

Mental Health Docket Fact Sheet

What are Mental Health Dockets?

- Mental Health Dockets are specialized problem-solving court dockets designed to quickly identify and treat individuals with mental illness who are charged with criminal offenses.
- They function within the existing structure of the criminal court system but, rather than following the traditional criminal court process, they work to address underlying mental health problems that may have contributed to the criminal behavior.
- A defendant's participation in the docket is voluntary but with it comes expectations about their participation in court-supervised treatment and services as well as abstinence from drug or alcohol use.
- Regular court appearances are typically required of the defendant to assess progress with court-ordered conditions, often more frequent at the beginning and tapering off as the defendant nears completion of the process.
- There is generally an agreement about the outcome of the defendant's criminal charges or sentence following successful completion of the docket conditions, as well as sanctions for non-compliance.

Why are Mental Health Dockets created?

- Research has shown that people with mental illness are arrested and incarcerated at higher rates, spend longer in jail and prison, have more limited access to healthcare, and higher rates of recidivism than individuals without mental illness.
- In Virginia a 2014 survey found that **13.95%** of the local and regional jail inmate population was mentally ill and **53.76%** of the mentally ill population had been diagnosed as having a ***serious mental illness***¹.
- Mental Health Dockets are often created with the following goals in mind:
 - Increased public safety – by linking to necessary treatment, the likelihood of reoffending is reduced
 - Increased treatment engagement by participants – by providing positive reinforcement for participation in treatment and services the likelihood of long-term engagement increases
 - Improved quality of life for participants – by providing comprehensive treatment and supports, long-term recovery is more likely
 - Reduced costs – by providing treatment in the community and decreasing the need for crisis services, communities should see savings

What does the research tell us?

- Research on the effectiveness of Mental Health Dockets is difficult given the variability in models – differences in eligibility criteria and procedures make comparison challenging. More research is needed to determine effectiveness of Mental Health Dockets. However, the following are some general initial findings:

Impact on Crime^{2 3 4 5 6 7}:

- New Charges – Participants in MH Courts are less likely to receive new charges post participation
- Length of Time to New Charges – For those MH Court participants who did re-offend they did so much later than those who had not participated
- Rate of Arrest – Persons who participated in MH Court had significant decrease in rate of arrest compared to their rate of arrest prior to participation
- Jail Days – MH Court participants had fewer jail days post enrollment than matched controls
- Reduced recidivism rates for MH Courts was greater than decrease in recidivism for drug courts- Drug Courts report recidivism rate of 25%; MH Courts report recidivism rates of 10-15%

Impact on MH Treatment Engagement^{8 9 10 11}:

- MH Court participants accessed treatment more quickly and were more likely to continue for longer periods of time
- Treatment received by MH Court participants was more intensive
- MH Court participants experienced less crisis episodes and increased satisfaction post-participation
- No relationship between type of treatment and recidivism
- Factors which reduce recidivism not identified but hypothesized to be related to intensive monitoring and strong therapeutic relationships

Impact on Cost Savings to a Community^{12 13}:

- Results are mixed. Some single site studies have reported overall savings (generally realized in 2nd or 3rd year of operation), but meta-analyses did not find consistent savings
- Mixed results may be related to eligibility – some MH Courts accept those with most severe illnesses and in need of more intensive services

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- ⁸ Keator, K. J., Callahan, L., Steadman, H. J., & Vesselinov, R. (2013). The Impact of Treatment on the Public Safety Outcomes of Mental Health Court Participants. *American Behavioral Scientist*, 57(2), 231-243.
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- ¹³ Lindberg, A. J. (2009). *Examining the Program Costs and Outcomes of San Francisco's Behavioral Health Court: Predicting Success*. San Francisco, CA: Prepared for the Office of Collaborative Justice Programs of the Supreme Court of California. Available at: <http://www.sfsuperiorcourt.org/sites/default/files/pdfs/2417%20Examine%20Program%20Costs%20and%20Outcomes.pdf>