

Jail Diversion and Crisis Intervention

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Department of Correctional Services

February 19, 2024

The background features a dark blue and black color scheme with abstract geometric patterns. A white line graph with four data points is visible on the left side. The data points are connected by a white line, and the points themselves are white circles with a yellow-orange center. The overall aesthetic is modern and technical.

Intensive Pretrial Jail Diversion & Mental Health Re-Entry Program

6th Judicial District Department of Corrections

Objectives



History



Design



Purpose



Outcomes

History

- In response to the number of individuals with unmet mental health needs in the criminal justice system, the Intensive Pretrial Jail Diversion & Mental Health Re-Entry Program was implemented.
- The purpose of the program is to break the cycle of defendants who are arrested, jailed, and released, only to reoffend, due to unmet brain health needs. The program was developed as a joint effort with staff from Mental Health and Disability Services, Department of Corrections, the Judiciary, the County Attorney's office, the Sheriff's Department, and other collaborative agencies in Linn County.
- Our program began providing correctional supervision and services in Linn County in 2004, identifying and working with the individuals to break the cycle and provide enhanced safety to the community.
- In 2015, our program expanded into Benton, Bremer, Buchanan, Delaware, and Dubuque and Jones Counties. In 2023 our program expanded to Johnson and Iowa Counties.

What we know

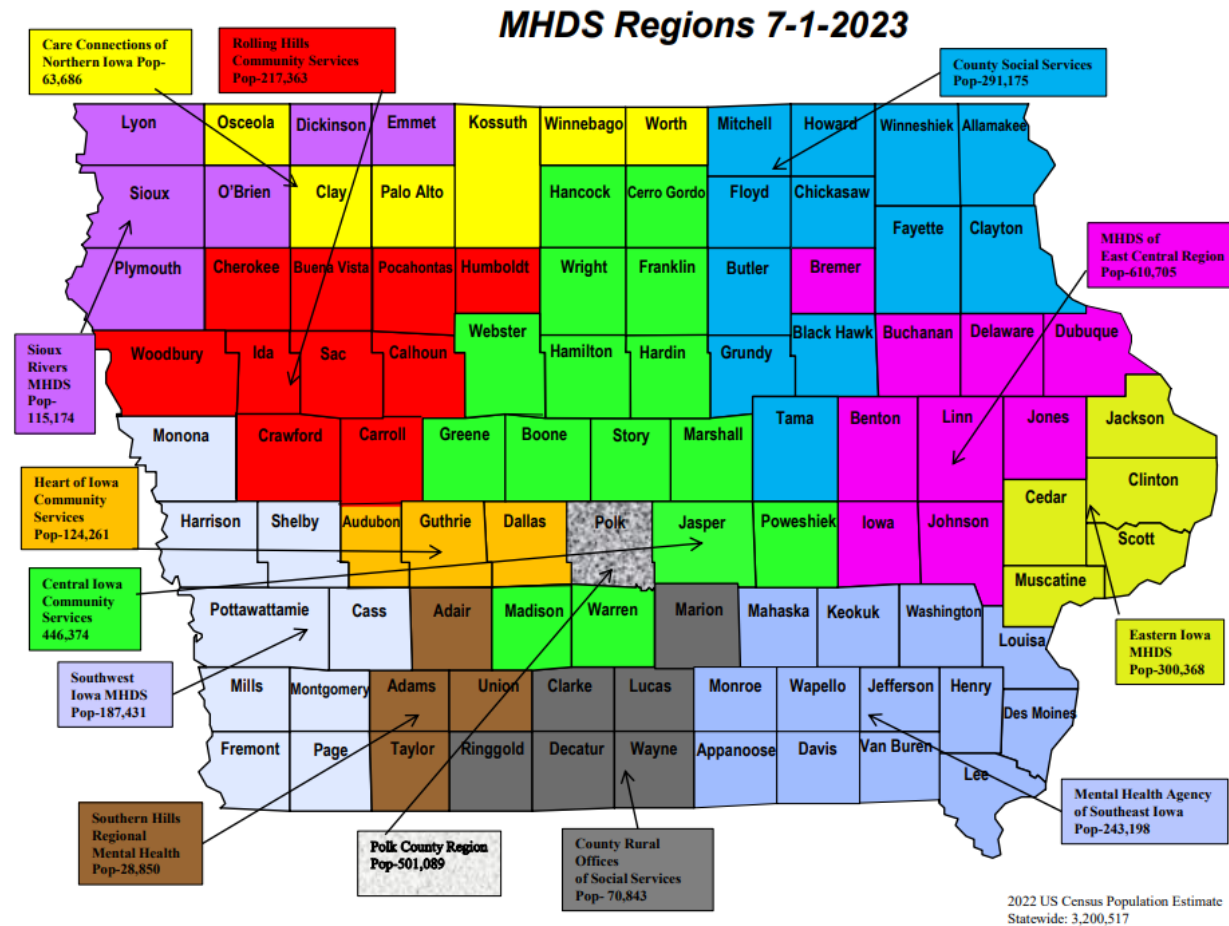
- *“....75 percent of females and 63 percent of male inmates in jails, will experience a mental health problem requiring mental health services in any given year.”* (Health Affairs, April 2014)
- Jails were never intended to be used as alternative mental health facilities. *“Correctional facilities have become our de facto mental health hospitals. Thus, while prison reform is often considered a criminal justice issue, the data indicate an unresolved public health problem as well”.* (Harvard Political Review March 2020)
- Across all nine Iowa correctional facilities, 63% of individuals incarcerated have a mental illness. In the Iowa Correctional Institute for Women, it's 80%. (KCCI October 2019)

Jail Diversion Concepts

- Nationwide response to the growing number of persons with unmet brain health and other mental health needs in our criminal justice system – specifically our jails.
- A process that diverts individuals with brain health and other co-occurring disorders, intellectual disabilities, brain injuries, etc. from a jail setting
- Jail and Community Based
- People receiving the proper community treatment for their brain health needs have a low likelihood to commit crimes.
- Pre-Booking vs Post-Booking (combination of the two)



Mental Health Regions of Iowa



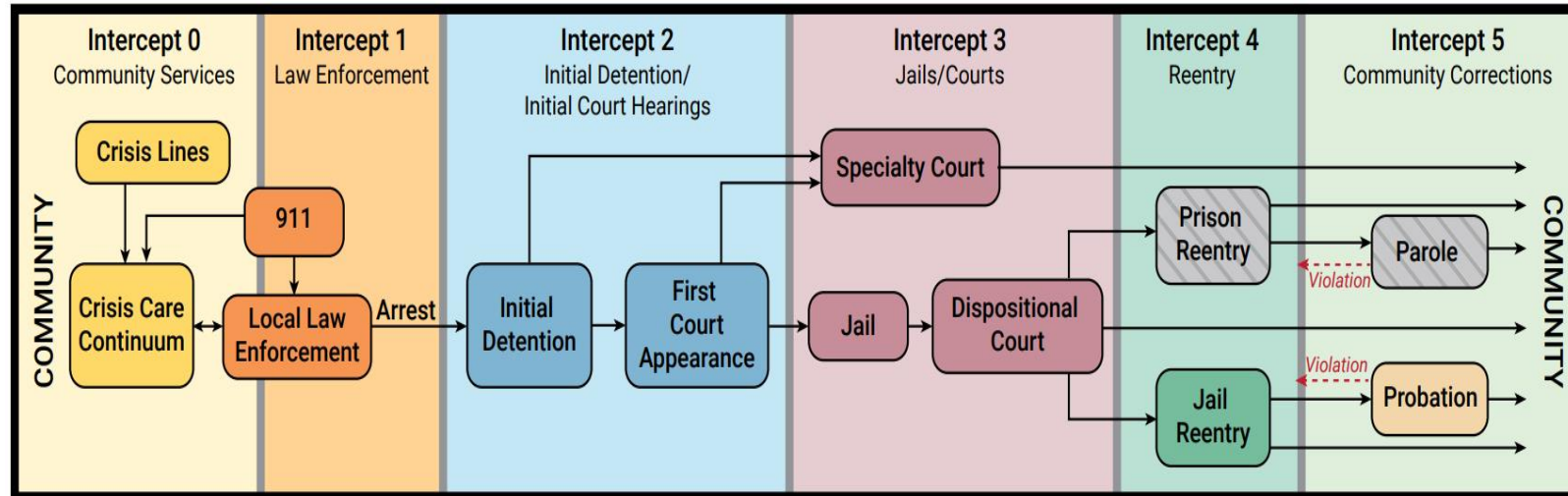
- The Mental Health and Disability Services for the East Central Region (ECR) is comprised of 9 counties. Three Jail Diversion Programs have been established for over a decade - Linn (2004), Johnson (2007), and Dubuque (2010). In 2015 ECR expanded Jail Diversion to serve all 9 counties.

THE SEQUENTIAL INTERCEPT MODEL

Advancing Community-Based Solutions for Justice-Involved People
with Mental and Substance Use Disorders



The Sequential Intercept Model



Pre-Booking Jail Diversion

- These strategies generally focus on law enforcement and emergency medical services (EMS) who are often the first point of contact with persons experience a mental health crisis or other brain health issue.
- Examples:
 - *Training to recognize indicators*
 - Mental Health First Aid and Crisis Intervention Training (CIT)
 - *Deployment of a Mobile Crisis Response team*
 - *Transportation to crisis stabilization beds, mental health access centers, sobering units, in lieu of jail*
 - *Law Enforcement Liaisons (Co-Responder Model)*
 - *Peer Support Specialists who provide support to people in crisis*

Arrest Prevention



Post Booking Jail Diversion

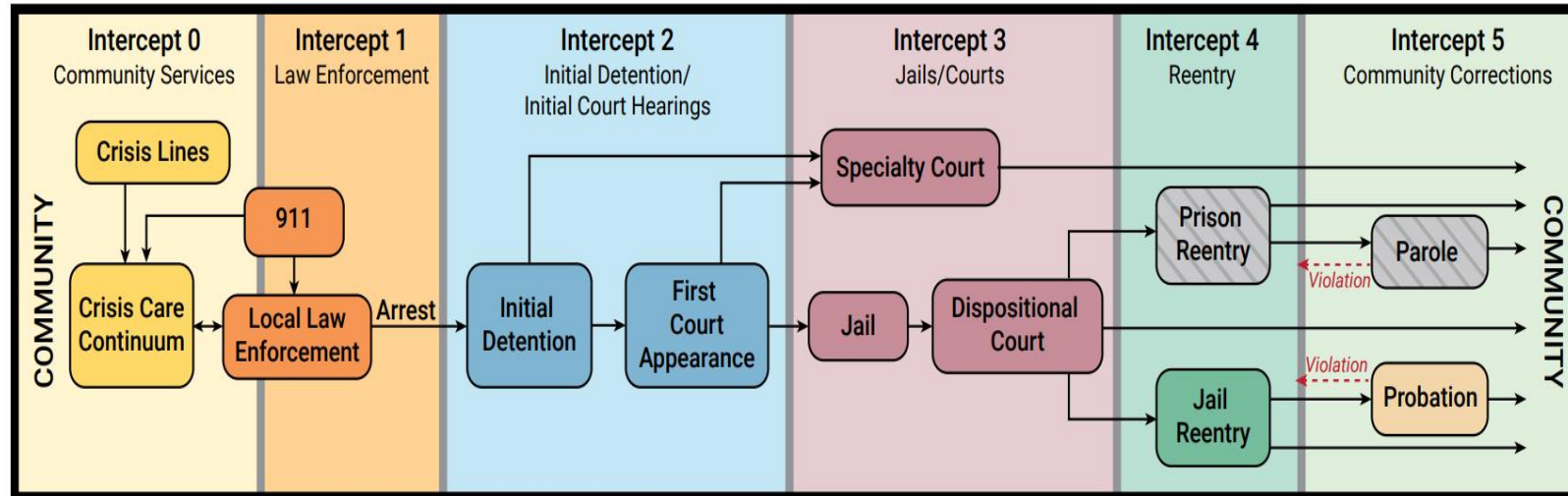
- Tend to be more common across the country and are utilized after arrest and formal charges have been filed. This is the structure of our program.
- Each person who is booked into the county jails completes a brief mental health jail screen. If the screen flags the person as someone who may be eligible for the program we interview them for further evaluation.
- Outside Referrals are accepted and often come through our providers/attorneys/courts via email.
- Once a diagnosis is confirmed we move forward with re-entry planning (for those who are still incarcerated), case planning, and referrals to appropriate services.
- Once the services from the community are set, our program monitors progress and reports the progress to the court.

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After Arrest

Jail Assessment



Jail Diversion
Community Treatment



RSW/IHH Service
Authorization for
Community Placement



Referrals for Jail
Diversion Community
Treatment



Telehealth or In-person
Psychiatric Assessment



Medication
Management in Jail



Purpose

- Enhance public safety by reducing likelihood of future arrests
- Assist those with brain/mental health issues access necessary services to improve quality of life.
- Free up jail space for more violent offenders
- Reduce costs to all community stakeholders.



Outcomes

- Reduced time law enforcement officers spend repeatedly arresting the same individuals struggling with brain health issues.
- Long and short-term reduction of jail population
- Improved jail safety for both inmates and jail staff
- Reduced hospitalizations
- Strengthened connections with community providers
- Reducing costs to providers, county, state, and taxpayers.



Referral and Contact information:

Andrew Elam
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Lanette Bloem
Community Treatment Coordinator
Johnson, Iowa Counties
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Lauren Cramer
Community Program Monitor
Linn County
319-361-9923
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Referral/Criteria

- New Pending Charge
- Cannot be on Supervised Probation/Parole/Work Release
- Send an email to Andrew Elam and Lauren Cramer (Linn, Benton, Jones) or Lanette Bloem (Johnson and Iowa) and include as much of the following information that you are able to:
 - *Full name and DOB*
 - *Pending charges*
 - *Any helpful additional information – background, family support, contact information, known providers they are working with, current or past mental health commitments, etc.*

QUESTIONS?

