# **INFORMATION**

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# ...foundation for good policy

# The Department of Mental Health and Addiction Services A Healthcare Service Agency

John G. Rowland, Governor

#### **Jail Diversion**

Thomas A. Kirk Jr., Ph.D., Commissioner

Approximately 114,000 persons are arraigned each year in Connecticut for various legal offenses. An estimated 10%-12% have a significant psychiatric disability that requires treatment and that was likely to contribute to the occurrence of the offense. Many of these individuals are charged with low-level, non-violent offenses, for which incarceration would not be necessary if adequate community services, including treatment were available to them. In response to this need, the Department of Mental Health and Addiction Services is expanding its ability to provide rapid assessment, triage and clinical services for persons with psychiatric disabilities who become involved with the criminal justice system. In many cases, DMHAS is able to develop a clinical plan that is acceptable to the person and the court that provides an alternative to incarceration. These "jail diversion" programs:

- ✓ Increase access to needed community mental health services
- Expand sentencing options for judges, including alternatives to incarceration
- ✓ Enhance public safety by freeing up prison beds for more serious offenders
- ✓ Improve the way that state resources are used for treatment and for incarceration
- ✓ Intensify collaboration between mental health and criminal justice professionals

**Program Design** - Jail diversion services are being expanded to include all of Connecticut's 22 Geographical Area Courts. Services will be provided directly through current, experienced care providers and will be monitored by a statewide project director. This program design has many advantages:

- Direct care takes place in the local community.
- Adherence to uniform standards is monitored.
- Service utilization is tracked.
- Specialized training is provided.
- Clinical plans provide data to guide quality improvement.

# **Protecting Connecticut Resources**



Average cost per person for hospitalization plus incarceration in the first 90 days following arraignment. ("The Costs and Effectiveness of Jail Diversion" February 1, 2000)

Jail Diversion encourages creative clinical interventions that interrupt the cycle of arrest, help the person stay connected to the treatment community, and reduce the likelihood of further criminal justice involvement. This initiative is an excellent example of innovation and collaboration in planning, support and service delivery among the legislative, judicial and executive branches of government.