Road Tested Strategies for Public Safety

Department of Indigent Defense Services

SUSTAINABLE SYSTEMS

The Department of Indigent Defense was created in 2019 to assist Nevada's rural counties to create more effective and sustainable indigent defense systems.

In re-imagining the indigent defense delivery infrastructure in rural communities, one of our top priorities is the development of a Holistic Resource Center.

The Center will provide rural communities with access to mental health and other extra-judicial resources that are more readily available in urban settings.



Underlying Causes

Almost a century of legal, criminological, and sociological research* shows legal challenges are often entwined with:

- poverty
- health
- domestic violence
- substance abuse
- residential instability
- unemployment
- lack of social support

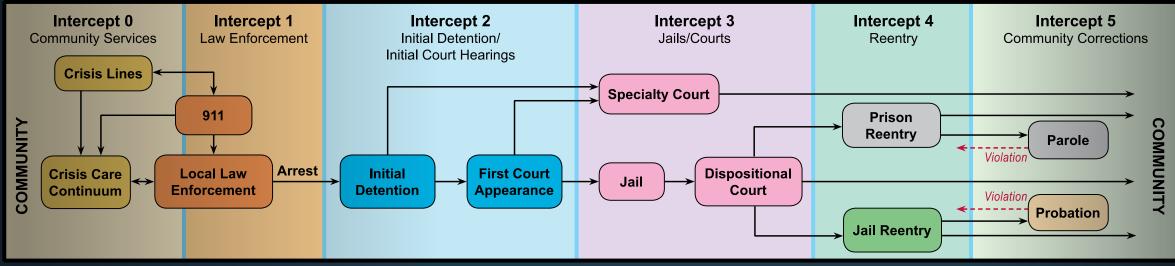
*[Harris, H., Criminal Justice Policy Review, 2020, Vol. 31(6) 800-832]

AVAILABLE Solution

- The piece of the puzzle that is too often missing is public defense.
- A defender is the first point of contact for most people entering the system.
- Defenders have unique tools: proximity, trust, and information.



The Sequential Intercept Model



Key Issues at Each Intercept

Intercept 0

Mobile crisis outreach teams and co-responders. Behavioral health practitioners who can respond to people experiencing a mental or substance use crisis or co-respond to a police encounter.

Emergency department diversion. Emergency departments (EDs) can provide triage with behavioral health providers, embedded mobile crisis staff, and/or peer specialist staff to provide support to people in crisis.

Police-behavioral health collaborations. Police officers can build partnerships with behavioral health agencies along with the community and learn how to interact with individuals experiencing a crisis.

Intercept 1

Dispatcher training. Dispatchers can identify mental or substance use crisis situations and pass that information along so that Crisis Intervention Team officers can respond to the call.

Specialized police responses, Police officers can learn how to interact with individuals experiencing a crisis in ways that promote engagement in treatment and build partnerships between law enforcement and the community.

Intervening with frequent utilizers and providing follow-up after the crisis. Police officers, crisis services. and hospitals can reduce frequent utilizers of 911 and ED services through specialized responses.

Intercept 2

Screening for mental and substance use disorders. Brief screens can be administered universally by non-clinical staff at jail booking, police holding cells, court lock ups, and prior to the first court appearance.

Data-matching initiatives between the jail and community-based behavioral health providers.

Pretrial supervision and diversion services to reduce episodes of incarceration. Risk-based pre-trial services can reduce incarceration of defendants with low risk of criminal behavior or failure to appear in court.

Intercept 3

Treatment courts for high-risk/highneed individuals. Treatment courts or specialized dockets can be developed, examples of which include adult drug courts, mental health courts, and Veterans treatment courts.

Jail-based programming and health care services. Jail health care providers are constitutionally required to provide behavioral health and medical services to detainees needing treatment, including providing access to medication-assisted treatment (MAT) for individuals with substance use disorders.

Collaboration with the Veterans Justice Outreach specialist from the Veterans Health Administration.

Intercept 4

Transition planning by the jail or inreach providers. Transition planning improves reentry outcomes by organizing services around an individual's needs in advance of release

Medication and prescription access upon release from jail or prison. Inmates should be provided with a minimum of 30 days' medication at release and have prescriptions in hand upon release, including MAT medications prescribed for substance use disorders.

Warm hand-offs from corrections to providers increase engagement in services. Case managers that pick an individual up and transport them directly to services will increase positive outcomes.

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Intercept 5

Specialized community supervision caseloads of people with mental disorders.

MAT for substance use disorders. MAT approaches can reduce relapse episodes and overdoses among individuals returning from detention.

Access to recovery supports, benefits, housing, and competitive employment. Housing and employment are as important to justice-involved individuals as access to mental and substance use treatment services. Removing criminal justice-specific barriers to access is critical

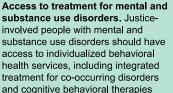
Best Practices Across the Intercepts

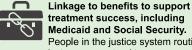


Cross-systems collaboration and coordination of initiatives. Coordinating bodies serve as an accountability mechanism and improve outcomes by fostering community buy-in, developing priorities, and identifying funding streams.

Routine identification of people with mental and substance use disorders. Individuals with mental and substance use disorders should be identified through routine administration of validated, brief screening assessments and follow-up assessment as warranted

addressing criminogenic risk factors.





treatment success, including Medicaid and Social Security. People in the justice system routinely lack access to health care coverage. Practices such as jail Medicaid suspension (vs. termination) and benefits specialists can reduce

disabilities may qualify for limited

income support from Social Security.

treatment gaps. People with



Information sharing and performance measurement among behavioral health, criminal justice, and housing/homelessness service providers. Information-sharing practices can assist communities in identifying frequent utilizers, provide an understanding of the population and its specific needs, and identify gaps in the system.

COST-EFFECTIVE PUBLIC SAFETY STRATEGY

- Data shows the holistic model leads to cost-avoidance while increasing public safety.*
- The HRC is mission-aligned with the goals of the ACAJ to develop more cost-effective public safety strategies.
- The HRC is an appropriate recipient for re-investment funding, with a 1:3 ROI.
- Request that DIDS/HRC be included in NSC recommendations for reinvestment funding.

* Source: Partners for Justice



Made for Nevada

The DIDS Holistic Resource Center is designed after three models – the Bronx Defenders, Kentucky's ASW system, and the Partners for Justice Advocates -- to create a system that will be effective for rural Nevada communities.





PROVEN RESULTS

A decade-long study by the Rand Corporations of the Bronx Defenders* system shows that the model:

 reduced the likelihood of a custodial sentence by 16%

reduced sentence length by 24%

- averted 1.1 million days of custodial punishment
 - saved taxpayers \$160 million
 - without increasing future crime

*James M. Anderson, Maya Buenaventura & Paul Heaton, The Effects of Holistic Defense on Criminal Justice Outcomes, Vol. 132 Harv. L. Rev. 819, January 2019.

KENTUCKY'S ALTERNATIVE SENTENCING WORKERS

- ASWs craft alternative sentencing plans built around a broader assessment of needs than other alternative sentencing options.
- Clients play an active role in creating a plan with the ASW. Results show these plans make it less likely clients will fall back into the system.



Proof of Concept

For fiscal year 2015, the Kentucky ASW Program reported the following success factors:

88.9% of the clients were referred to substance abuse treatment.

28.2% were referred for mental health treatment.

Over a 12 month period, ASW clients only served 21,243 days incarcerated out of the possible 105,143 days – a reduction of 80%.

Fiscal ROI : For every dollar spent on the ASW Program, there was a \$3.76 return on investment from incarceration costs that were avoided due to interventions.

PARTNERS FOR JUSTICE MODEL

PFJ is a holistic system operating in 20 urban and rural areas.

• Incarceration has a significant negative impact on economic stability.

• Over 60% of those who spend time in local jails struggle with mental illness or substance use disorder.

• *Each additional year in prison* can take 2 years off life expectancy.

PFJ 3 STRATEGIC AREAS OF INTERVENTION

1. Income

Poverty and income inequality are primary indicators of crime, violence, and recidivism.*

2. Housing

Safe & stable housing reduces the risk of criminal legal involvement and reduces recidivism post-release.**

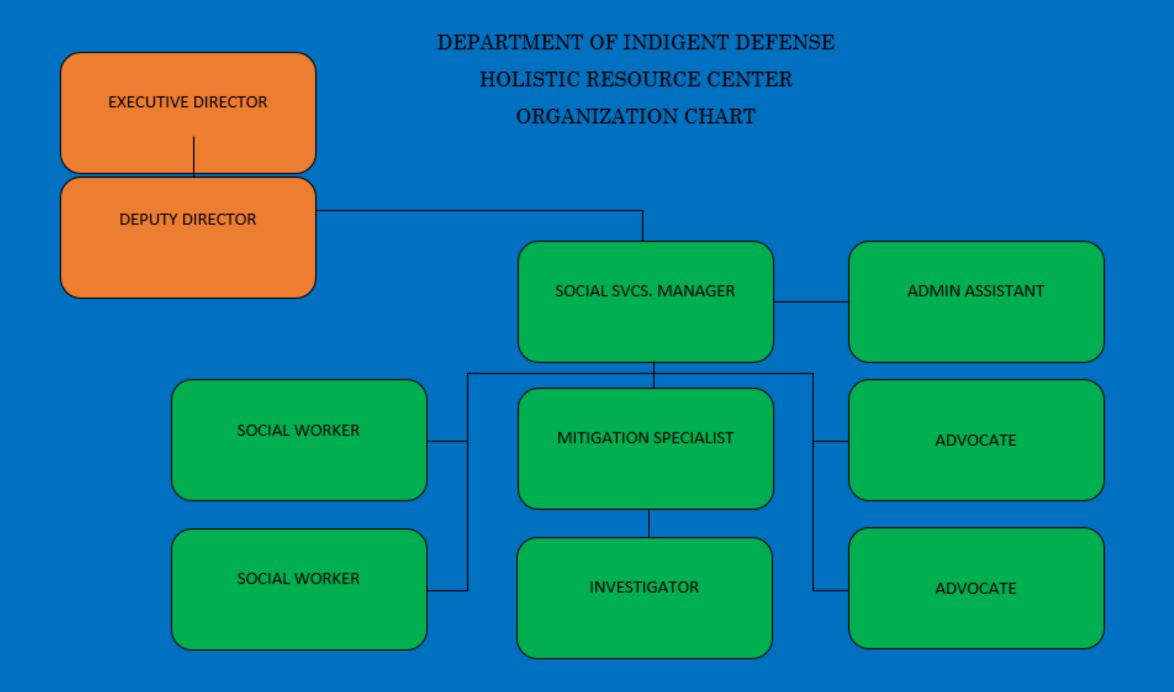
3. Access to Care

•16% of men and 31% of women in jail have a serious psychiatric condition (compare to 5% in the general population)

• at least 50% of people in jail experience problems related to drug or alcohol use.

*(Machin, S. & Meghir, C. (2004). Crime and Economic Incentives. The Journal of Human Resources, 39(4): 958-979.)

**(Jacobs, L. A. & Gottlieb, A.. (2020). The Effect of Housing Circumstances on Recidivism. Criminal Justice Behavior, 47(9): 1097-1115; Couloute, Lucius. (2018). Nowhere to Go: Homelessness among formerly incarcerated people. Prison Policy Initiative.)





CONCLUSIONS

- The Holistic Resource Center is designed from 3 proven models to create a system that will be effective for rural Nevada.
- Data shows these holistic models have led to cost avoidance and increased public safety, with a 3:1 ROI.
- The HRC can be a data partner w/ NSC to prove cost-avoidances and value of reinvestment.
- We respectfully request that DIDS and the HRC be included in the recommendations for appropriate reinvestment funding.



THANK YOU



The Department of Indigent Defense Services

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