



Successful Strategies for Diverting  
People With Mental Illnesses and  
Substance Use Disorders from  
Florida's Criminal  
Justice System

Prepared by  
Florida Partners in Crisis  
and  
Florida Substance Abuse & Mental Health Corporation  
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## Introduction

Over the past two decades, the growing number of individuals with mental illnesses and substance use disorders involved in Florida's criminal justice system has become a pressing policy issue. The impact of mental illnesses and substance use disorders on the criminal justice system at both the state and local levels has been enormous, clogging the courts, crowding local jails and requiring increasingly larger investments of tax dollars. Without treatment, many individuals cycle through the system for the majority of their adult lives.

The numbers are staggering. Estimates are that on any given day in Florida, there are more than 17,000 prison inmates, 15,000 local jail detainees and 40,000 individuals under community correctional supervision, who have mental illnesses. The number of Floridians with mental illnesses who are in prison has increased 36% in the past five years, adding to the pressure to build more prisons.

Drug abuse also has had a dramatic effect on Florida's prison system. Nearly a third of people admitted to Florida prisons — 11,872 in FY 2007-2008 — were incarcerated for drug-related crimes. It is estimated that approximately two-thirds of Florida's 100,000 prison inmates have significant drug and alcohol problems. Only a small fraction of those who needed substance abuse treatment received it while in prison, according to the Florida Department of Corrections.

The 2002 President's New Freedom Commission on Mental Health reported that people with serious mental illnesses who come in contact with the criminal justice system are typically poor and uninsured, are disproportionately members of minority groups, and often are homeless and have co-occurring substance abuse and mental disorders. They cycle in and out of homeless shelters, hospitals and jails, occasionally receiving mental health and substance abuse services but most likely no services at all.

In response to this crisis, communities across Florida have come together to develop effective treatment alternatives to incarceration. In a growing number of counties, leaders from local and state government, law enforcement, the courts, treatment agencies and advocacy groups have joined together to plan services and pool their resources. Borrowing from well-researched models and/or developing their own innovative approaches, they have initiated cost-effective services to divert people with mental illnesses and substance use disorders from jails, prisons and state forensic hospitals.

In general there are three types of programs: pre-booking programs which seek to avoid an arrest and divert an individual to treatment; post-booking, which screen and identify people with treatment needs who are already jailed; and re-entry, which are designed to help ex-offenders transition back to the community from jails and prisons. Although there are a number of different approaches in Florida and across the country, all of them have been shown to reduce costs over time while keeping the public safe and increasing safety for law enforcement officers and people with mental illness, according to the national Bureau of Justice Assistance.

**Pre-Booking:** The most prevalent pre-booking program is Crisis Intervention Team (CIT) training. CIT officers receive special training to respond to crisis calls involving persons with suspected mental illness. When appropriate, CIT officers transport individuals to treatment facilities, rather than make an arrest. They have proven effective in de-escalating potentially dangerous crises and reducing risks to officers and the public.

**Post-booking:** Typically, post-booking programs provide access to court-monitored mental health and substance abuse treatment in the community in lieu of continued jail time. In addition to intensive case management and treatment services, most offer a range of ancillary services, such as supportive housing, vocational and employment services. Most of these diversion programs are under the jurisdiction of specialized criminal courts. Florida has been at the forefront of the move to create these special courts that seek to divert defendants with mental illnesses or substance use disorders from jail into treatment in the community. Most are for people charged with misdemeanors or low level, nonviolent felonies. The nation's first drug court was created in 1989 in Dade County. Its success led to the creation of the country's first specialized criminal mental health court in Broward County in 1997.

**Community-based Correctional Substance Abuse Treatment:** The Legislature funds 1,073 community drug treatment beds designed to maintain offenders in the community as an alternative to prison. The Florida Department of Corrections contracts with community substance abuse treatment providers in 20 communities across the state to deliver these services. In FY 2006-2007, 37,717 offenders were served by these programs. The programs are designed to be a final option for offenders on probation who violate the conditions of probation as a result of their continued drug use. Services offered involve two months of drug treatment followed by the individual securing a job and working in the community. Drug treatment is continued during the non-working hours. Drug screening and validation of work attendance are core components of the program. Department of Corrections data from FY 2006-2007 show that after 36 months, 93% of offenders who successfully completed substance abuse residential treatment had no recommitment to prison for any reason, and 97% of offenders who successfully completed outpatient treatment did not return to prison for any reason.

**Re-entry programs:** According to the Department of Corrections, inmates with substance use disorders who completed treatment programs had re-arrest rates 10% lower than inmates who did not receive treatment. For felony offenders who completed a substance abuse program, the recidivism rate was 56% less than that of felony offenders who did not receive substance abuse treatment. Re-entry programs — operating both inside prisons and in the community correctional settings — are designed to help ex-offenders transition back into the community and avoid re-arrest. They focus on addressing not only treatment needs, but also on teaching basic life skills and providing assistance in finding jobs or entitlement benefits, and housing.

This paper includes brief overviews of the following programs:

**Mental Health Jail Diversion:** 11th Judicial Circuit Criminal Mental Health Project; Lee County Triage Center/Low Demand Shelter; Alachua County Jail Diversion Teams; and Orange County ANCHOR Program.

**Drug Courts:** 17th Judicial Circuit - Broward County Adult Drug Court; 4<sup>th</sup> Judicial Circuit - Duval Juvenile Drug Court; and the 7th Judicial Circuit Anti-Drug Initiative Level 1 Program.

**Correctional Substance Abuse Treatment:** Reality House of Daytona Beach

**Re-Entry Programs:** Hillsborough County Looking Ahead, and the Florida Department of Corrections Community-Based Substance Abuse Transitional Re-Entry Programs.

## **Criminal Justice, Mental Health and Substance Abuse Reinvestment Grant Act**

The number and scope of the state's community-based diversion programs were enhanced by passage of Florida's Criminal Justice, Mental Health and Substance Abuse Reinvestment Grant Act in 2007. The legislation created two types of grants — planning and implementation — to help communities develop and/or expand treatment alternatives to jails, prisons and state forensic hospitals. The first grants were awarded to 23 counties in 2008.

The grants “laid the foundation for shifting the focus of care of offenders with mental health and/or co-occurring substance use disorders from the most expensive, deep end of the system to early intervention and diversion,” according to the 2008 report by the Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center at the Florida Mental Health Institute, University of South Florida.

In July 2009, a report on a series of site visits to grantee counties noted that the Reinvestment Act “has started a process that has growing momentum and is successfully treating thousands of people all around the state, people who are numbered, or might otherwise be numbered, among our nation's alarming incarceration statistics.”

### **To find out more about this report, contact:**

Ellen Piekalkiewicz, Executive Director  
Florida Substance Abuse & Mental Health Corp.  
1317 Winewood Boulevard  
Building 1, Suite 206  
Tallahassee, FL 32399  
850-410-1575  
[ellen@samhcorp.org](mailto:ellen@samhcorp.org)  
Website: [www.samhcorp.org](http://www.samhcorp.org)

Gail Cordial, Executive Director  
Florida Partners in Crisis, Inc.  
175 Marlin Drive  
Merritt Island, FL 32952  
321-453-8825  
[gailc@flpic.org](mailto:gailc@flpic.org)  
Website: [www.flpic.org](http://www.flpic.org)

## 11th Judicial Circuit Criminal Mental Health Project

The 11th Judicial Circuit Criminal Mental Health Project (CMHP) in Miami-Dade County diverts individuals with serious mental illnesses and/or co-occurring substance use disorders who have misdemeanor offenses or less serious felony charges into community-based treatment and support services. The program operates a pre-booking diversion program consisting of Crisis Intervention Team (CIT) training for law-enforcement officers and post-booking diversion for individuals who are in jail and awaiting adjudication. The program is funded in part by a Criminal Justice, Mental Health and Substance Abuse Reinvestment Act (CJMHPA) grant.

CMHP has provided CIT training to more than 2,500 law enforcement officers throughout the county. During the first six months of 2009, CIT-trained officers from the City of Miami Police Department responded to a total of 2,040 mental health crisis calls, resulting in 940 diversions to crisis stabilization units and one arrest. During the three-month period from March through May 2009, CIT-trained officers from the Miami-Dade Police Department responded to a total of 740 mental health crisis calls, with only three instances of use of force.

Through CMHP's post-booking program, defendants in acute psychiatric distress are diverted from the jail to community mental health facilities for appropriate treatment within 24-48 hours of their arrest. Once their illness is stabilized, an individualized case plan outlining appropriate follow-up services is developed and sent to the court for approval. Upon release from jail, the Court Mental Health staff monitors each participant to ensure they are linked with case management services and other supports including supportive housing, supported employment, assertive community treatment and illness self-management and recovery. When clients are stabilized, legal charges may be dismissed or modified as appropriate. The post-booking program serves approximately 300 individuals annually but is expected to increase to 500 a year. The 12-month recidivism rate to the justice system, which had been in excess of 70 percent, has been reduced to 22 percent for program participants. *Contact:* Cindy Schwartz, Project Director, [cischwartz@jud11.flcourts.org](mailto:cischwartz@jud11.flcourts.org).

## Lee County Triage Center/Low Demand Shelter

This voluntary, pre-arrest diversion program offers an alternative to jail for individuals experiencing a behavioral health crisis and at risk of being charged with low-level offenses. The Triage Center provides intake services, plus a nursing and psychosocial assessment. The Low Demand Shelter, co-located in the same facility, provides a safe haven for impaired individuals while attempts are made to engage them in treatment or services. The triage center is staffed by professionals from participating local treatment providers and the shelter is operated by the Salvation Army. The majority of those assessed at the center are admitted to the shelter for an average length of stay of 12 days. Individuals coming into the center who meet Baker Act or Marchman Act criteria or require medical care are referred to the appropriate treatment facilities.

There have been 492 admissions to the facility during its first year in operation. Seventy percent of clients had a prior arrest history in Lee County. The re-arrest rate for *all* Triage Center clients was reduced by 32%, resulting in a cost avoidance of \$189,460 to the jail. Those who *successfully* completed the program experienced a 48% drop in recidivism. Of the law enforcement officers surveyed, 84% said they waited less than five minutes for the individual in custody to be admitted to the Triage Center. The estimated cost of the program is \$2,145 per client, including the value of some treatment services. The program is funded by a CJMHPA Grant and local matching dollars. *Contact:* Ann Arnall, Director of Lee County Human Services Department at [arnallam@leegov.com](mailto:arnallam@leegov.com).

## **Alachua County Jail Diversion Teams**

In 2008, Alachua County expanded its existing jail diversion initiative by adding a Forensic Diversion Team supported by a Criminal Justice, Mental Health, and Substance Abuse Reinvestment Act grant. The team is operated by Meridian Behavioral Health, working in partnership with the Alachua County Sheriff's Office, the courts, the Department of Children and Families, the Office of Court Services and the local Housing Authority. The program serves difficult-to-treat individuals who have serious mental illnesses or substance use disorders or both, coupled with a history of recidivism. The team has adopted features of the Assertive Community Treatment (ACT) team model, emphasizing engaging clients, an integrated team approach, and intensive service delivery, including on-call staff. The majority of individuals served have been charged with felonies. The team brokers and coordinates services, including psychiatric treatment, vocational services, benefits coordination and housing assistance to enhance participants' chances for recovery and an appropriate judicial disposition.

Data tracked by Meridian indicate that the Forensic Specialist Team (FST) and the newer Forensic Diversion Team (FDT) appear to be effective in reducing arrests and incarcerations, the severity of charges and time served in jail by participants. For the period from July 2007 to June 2008, individuals successfully served by the FST alone averaged from 60.5 to 89.47 fewer days in jail 12 months after admission, depending on the level of services received. Extrapolated to the 500 clients served annually by the FST, this translated to a cost avoidance of from \$1.5 million based on the regular jail per diem of \$67 or as much as \$2.8 million, using an enhanced psychiatric rate estimate from Miami-Dade County. Initial data from the FDT indicate it is also reducing time in jail and discharging a significant number of clients to independent living. *Contact:* Margarita Labarta, Ph.D., Meridian Behavioral Health President/CEO, at [maggie\\_labarta@mbhci.org](mailto:maggie_labarta@mbhci.org)

## **Orange County ANCHOR Transitional Housing Program**

Orange County's ANCHOR program helps fill a gap in services offered by the county's Central Receiving Center (CRC), a triage center for people with acute mental illness or substance use disorders referred by local enforcement and hospital ER staff. ANCHOR was opened in October 2008 to provide the housing and supports that are key to the recovery of people with mental illnesses and/or substance use disorders who are homeless. Goals of the program are compliance with treatment and successful transition into permanent housing, as well as fewer hospitalizations, incarcerations and admissions to community mental health and detoxification services. Along with transitional housing, the program provides case management, medical and dental services, medication management, a range of supportive services, and aftercare treatment. The average length of stay is four to six months.

At an average cost of \$57.08 per bed, the program is a less costly alternative than such community treatment options as \$182.24 for a Residential Level II bed or \$224.43 for a substance abuse detox facility bed. First-year outcomes indicate ANCHOR is effective in reducing CRC admissions and re-arrest rates, as well as reducing the cost of emergency care in the community. The program served 141 individuals from October 1, 2008 to September 30, 2009. Thirty days following successful discharge from ANCHOR, 89% of successfully discharged clients were not arrested; 75% had reduced their use of the CRC; 100% did not use emergency room services and 100% showed a reduction in the severity level of their substance abuse. The program is funded by a Criminal Justice, Mental Health and Substance Abuse Reinvestment Act grant and county matching funds. *Contact:* Donna Wyche, Orange County Health and Family Service Department, at [Donna.Wyche@ocfl.net](mailto:Donna.Wyche@ocfl.net).

## **Seventeenth Circuit - Broward County Adult Drug Court**

The Broward County Adult Drug Court was created in 1991 and is the third oldest and the second largest drug court in the nation. The court's goal is to actively intervene to break the cycle of substance abuse, addiction, and crime. The circuit has dedicated a single division of its felony court to handle large numbers of drug court cases and offers pre-trial diversion, post adjudicatory (post-plea), and drug court monitoring cases. Most drug court participants have been charged with purchase or possession of a controlled substance, tampering with evidence, obtaining a prescription by fraud, and solicitation for purchase. They must have no prior felony convictions.

The drug court is voluntary. Defendants are screened in jail and referred to the drug court, if appropriate. They typically enter a not guilty plea, waive their right to a speedy trial and agree to enter a four-phase treatment for a minimum of 12 months. Upon completing treatment, charges are dismissed. Treatment is provided by the Broward Sheriff's Office which has its own treatment center. Those participants who require residential treatment are referred to local or out-of-state providers.

As of February 1, 2009, the court had 1,600 open adult cases. In 2008, it had more than 839 pre-trial and post-plea graduates, and has had more than 10,295 graduates since its inception. Graduates of the drug court average about a 15% re-arrest rate after two years, including both misdemeanors and felonies. The rate has been as low as 10% and as high as 19% during the past five years. The average annual treatment cost per drug court participant in outpatient treatment ranges from \$2,500 to \$4,000— with participant fees contributing a substantial amount of this expense. The cost per day in outpatient treatment through the program is \$11.31 compared to \$114.95 per day in jail.

Partners in this collaborative effort are the Broward County Commission, Court Administration, State Attorney's Office, the Public Defender's Office, the Clerk's Office, the Judiciary, the Department of Children & Families and the Florida Department of Corrections. *Contact:* Gary Hilko, Drug Court Coordinator, at [Ghilko@17th.flcourts.org](mailto:Ghilko@17th.flcourts.org).

## **4<sup>th</sup> Judicial Circuit - Duval Juvenile Drug Court**

Begun in 1997 at the urging of the 4<sup>th</sup> Judicial Circuit State Attorney's Office, this program is for youthful offenders charged with non-violent drug-related offenses who are deemed appropriate for treatment. About eight youths a month are admitted into the four-phase program; most are admitted prior to trial. Potential participants are assessed by River Region Human Services of Jacksonville, which also provides the outpatient treatment. The approximately 10% who require residential treatment are referred to Gateway Community Services, where the typical length of stay is from four to six months. Most youths enter at the intensive outpatient phase and progress to less frequent treatment sessions, depending on individual need. Individual and in-home family counseling is also available. To assist with treatment compliance and attendance, the program provides two vans that pick up participants from their schools and bring them to River Region for treatment sessions. Clients can complete the program in 90 days or take as long as a year to graduate.

During 2008, 66 youths participated in the drug court, and 28 graduated. The most recent re-arrest data was reported cumulatively for the three-year period from January 2005 through December 2007. During that time period, there were 112 graduates from the drug court. Of these, there was a 3.6% recidivism rate for felony convictions and 25.9% recidivism rate for misdemeanors. *Contact:* Kelly Zarle, Drug Court Coordinator, at [kzarle@coj.net](mailto:kzarle@coj.net).

## **7th Judicial Circuit Anti-Drug Initiative Level 1 Program**

The Anti-Drug Initiative (ADI) Level 1 Program in the four-county 7th Judicial Circuit offers research-based substance abuse treatment for non-violent first and second time drug offenders. A total of 9,812 people were served by the program since its inception in November 1999. The brief intervention treatment approach developed by Stewart-Marchman-Act Behavioral Healthcare consists of two individual counseling sessions and four group sessions over a six-week period coupled with random drug testing. Successful completion results in no filing on the referring charge by the State Attorney's Office. Failure to attend a scheduled session or any continued drug use results in removal from diversion status. The client pre-pays the \$400 cost of the service. An online version of the program was begun in February 2009. Clients participate in an online intake session followed by six online treatment sessions monitored by a program staff member. Random urinalysis is also required. The cost of this service to the client is \$300.

Data collected on client participation and outcomes over more than seven years demonstrate the effectiveness of the ADI Level 1 intervention. Completion rates are very high, with approximately 90% of those discharged completing the program. One year re-arrest data based on a sample of 7,874 individuals discharged through June 2008 showed that only 25% of those who successfully completed the program were re-arrested in the year following treatment, while 39.69% of those who did not complete the program were re-arrested. *Contact:* Chet Bell, CEO, Stewart-Marchman Behavioral Health Center at [cbell@smabehavioral.org](mailto:cbell@smabehavioral.org)

## **Reality House: Inmate Substance Abuse Treatment Outside of Prison Walls**

Reality House of Daytona Beach is a freestanding, 85-bed correctional residential substance abuse treatment facility operated by Stewart-Marchman-Act Behavioral Health Services and the Florida Department of Corrections (DOC). It is the only therapeutic community in Florida housing inmates outside the walls of a prison. To be eligible, clients must have a substance abuse or related disorder, be classified by DOC as Level One or Community Custody, and have at least nine months remaining on their sentence. In 2008, 190 clients were served at Reality House. The Therapeutic Community four-phase program, focused on behavioral change, provides clinical services seven days per week, for a minimum of 78 hours of weekly structured programming. Clients advance through the phases based on achievement of the goals and objectives in their individualized service plan. Clients remain in the residential phase of the program from 9 – 12 months.

Program goals include obtaining a GED, or other appropriate educational achievement; developing a supportive network, including an AA/NA sponsor, where appropriate; suitable housing arrangements and an aftercare plan. Two years after their release, 89% of those who completed the Reality House program had not returned to prison or supervision for a new offense. The contracted per diem rate at Reality House is \$51.89, compared to the per diem cost of \$55.09 for all inmates in DOC custody. *Contact:* Chet Bell, CEO, Stewart-Marchman Behavioral Health Center at [cbell@smabehavioral.org](mailto:cbell@smabehavioral.org)

## **Hillsborough County Looking Ahead Re-entry Program**

Looking Ahead, financed in part by a Criminal Justice, Mental Health and Substance Abuse Reinvestment Act grant, serves ex-offenders with mental illnesses or substance use disorders who are returning to Hillsborough County from jail or prison. Looking Ahead builds on Hillsborough County's extensive jail diversion program, which includes both pre and post-booking interventions. Looking Ahead is voluntary and offers varying levels of services and assistance. Provider staff are located at the Criminal Registration Unit where all ex-offenders being discharged to Hillsborough County are required to register within 48 hours. This helps assure early identification of behavioral health needs and timely provision of support and services to those ex-offenders who require it. Services range from time-limited referral and linkage to services to clinical Intensive clinical case management of up to 90 days. A voucher system provides timely access to treatment, medication and tangible goods such as eyeglasses that will enhance recovery.

Of approximately 7,200 registrants from February to August 2009, 713 were referred for behavioral health follow-up, with an average of about 50 individuals per month served by Looking Ahead. About half receive some sort of services at a cost of roughly \$820 per person, not including the cost of case management. This compares to the estimated \$2,800 cost of prosecuting someone who is re-arrested. Initial data collected by staff indicate the program is meeting its goal of reducing recidivism rates. During February through July 2009, only 7 (14%) individuals of the monthly caseload of 50 clients were re-arrested. A related analysis suggested that those receiving more intensive levels of service were less like to be re-arrested. *Contact:* Jan McLeod, Hillsborough County Criminal Justice Liaison, at [macleodj@hillsboroughcounty.org](mailto:macleodj@hillsboroughcounty.org).

## **Florida Department of Corrections Community-Based Substance Abuse Transitional Re-Entry Programs**

In addition to prison-based transitional programs, the Department of Corrections (DOC) currently operates five community-based inmate substance abuse transitional re-entry programs. These programs are aimed at reducing recidivism by preparing inmates for successful reintegration into society after their release from prison. Two of the programs are designated for women: Hollywood Work Release Center and the Bradenton Transitional Center. The three male centers include Pompano Transitional Center, Orlando Transitional Center, and The Transition House in Kissimmee. Hollywood Work Release Center is the only site DOC provides all security functions and a contracted provider delivers programming. The other programs are operated by contracted community providers. The facilities range in size from 120 to 212 beds, for a total of 744 beds statewide.

The facilities use a modified "Therapeutic Community" model, and each inmate has an individualized day-long schedule of structured program activities. The programs offer a range of substance abuse services including prevention, outpatient, and aftercare services as well as education/vocational services. The focus is on teaching, developing and practicing reentry/transitional skills necessary for a successful drug-free re-entry into the community. Along with appropriate treatment, inmates participate in groups focusing on such issues as family development, anger management, domestic violence, and victim awareness. Inmates who successfully complete the initial intensive programming component (9-12 months) are eligible to move into in a work release component. While on work release status, they continue to participate in program activities compatible with their individual needs and work schedules.

During FY 2008-2009, a total of 1,188 people were served by these facilities. FY 2006-2007 recommitment data reflected that two years after their release from prison, 88% of those who completed a community-based inmate substance abuse transitional re-entry program had not returned to prison or supervision for a new offense. *Contact:* Pam Denmark, DOC Deputy Assistant Secretary of Re-Entry at [denmark.pam@mail.dc.state.fl.us](mailto:denmark.pam@mail.dc.state.fl.us).