

FY 2022 PERFORMANCE PLAN

Forensic Jail Diversion: Intercept 2		BHD	Grace Guerrero, x4846 Kelly Nieman, x4849
Program Purpose	<ul style="list-style-type: none"> Divert individuals with serious behavioral health issues, who are involved with the criminal-justice system at the magistrate and bond juncture, into treatment in lieu of continued incarceration. 		
Program Information	<ul style="list-style-type: none"> The Arlington County forensic jail diversion team works under the umbrella of the criminal-justice Sequential Intercept Model (SIM). The SIM includes six intercepts: <ul style="list-style-type: none"> Intercept 0: community services Intercept 1: law enforcement Intercept 2: initial detention/court hearings Intercept 3: jails/courts Intercept 4: re-entry Intercept 5: community corrections/probation This performance plan focuses on Intercept 2, which in Arlington encompasses the Magistrate Post-booking Project (MPBP), the Bond Diversion Program, and the Court-based Diversion Program. These programs are intended to reduce the number of days individuals with serious mental illness and/or dual diagnosis spend in jail. After an arrest, individuals are brought to the detention facility and appear before the magistrate, who determines whether the individual remains in jail or is released. If the magistrate believes that a behavioral-health intervention would be helpful, a referral is made to the forensic jail diversion team. If the individual remains in jail, a second opportunity for diversion is at the bond hearing, at which the individual and his/her attorney present an argument for release. If an attorney or other parties believe that a behavioral-health intervention would be helpful, a referral is made to the forensic jail diversion team. A third opportunity for identification and diversion occurs with the Court-based Diversion Program. The forensic jail diversion team screens individuals booked into the Arlington County Detention Facility (ACDF) five days per week through the use of the Brief Jail Mental Health Screening, prior to arraignment, for potential diversion at the bond motion. Additionally, the Forensic Jail Diversion Team is stationed in the courtroom to assist the court, the defense attorney and the commonwealth’s attorney to identify community-based mental health/substance use services for individuals on the regular docket, when appropriate. The forensic jail diversion team provides immediate access to a comprehensive program of mental health and case management services. The program receives referrals from program partners, including the Office of the Magistrate, Arlington County courts, the Sheriff’s Pre-trial Release Program, and court-appointed attorneys. Approximately 30% of those incarcerated in Arlington are Arlington residents. The program primarily serves low-level misdemeanants who are seriously mentally ill or dually diagnosed, whose illness likely contributed to the offense. 		

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	<ul style="list-style-type: none"> • Not everyone assessed will be found eligible for diversion. • The Magistrate Post-booking Project is largely funded through the Virginia Department of Behavioral Health and Developmental Services. • Jail diversion services are available seven days a week. • Staff provide intensive, time-sensitive services, and must have expertise in behavioral health treatment, emergency response, and the criminal-justice system. • Diversion programs were partially suspended in February of 2020 to begin working on the implementation of the Arlington County Behavioral Health Docket (BHD) and were fully suspended in March of 2020 in response to the COVID-19 pandemic. As a result, clinicians were unable to screen and accept new admissions to diversion programs for 2020 and much of 2021. During this period, program staff assisted with other organizational efforts, including emergency service provision, COVID-19 contact tracing, and work on the Behavioral Health Docket. Even when the courts reopened, there was a backlog of cases for them to get through which impacted program referrals in FY 2021 and FY 2022.
Service Delivery Model	<ul style="list-style-type: none"> • In FY 2022, most services were provided in-person. • In some situations, the court system opted to utilize virtual platforms for meetings. Program staff accessed those meetings remotely. • In FY 2023, it is anticipated that the program will continue to utilize the same service delivery model used in FY 2022.

PM1: How much did we do?

Staff	<ul style="list-style-type: none"> • 0.8 FTEs <ul style="list-style-type: none"> ○ 0.6 FTE clinical staff, including a forensic recovery specialist (20% of 3.0 FTEs working across all five intercepts) ○ 0.2 FTE supervisor (20% of 1.0 FTE, who supervises staff across all five intercepts)
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Customers and Service Data		FY 2019	FY 2020	FY 2021*	FY 2022
	Post-booking				
	Number of Assessments	59	34	n/a	2
	Number of Diversions	26	13	n/a	0
	Bond diversion				
	Number of Assessments	89	54	n/a	88
	Number of Diversions	16	12	n/a	10
	Court-based diversion				
	Number of Assessments	84	61	n/a	25
	Number of Diversions	10	4	n/a	1
<p>* In FY 2021, data tracking issues led to under-reporting of clients served, as program staff recorded the number of diversion sessions rather than the individuals served during those sessions. This data issue was rectified for FY 2022.</p>					

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PM2: How well did we do it?

2.1	Individuals whose level of service matched assessment tool recommendation (Risk Needs Responsivity simulator tool)
2.2	Documentation compliance

PM3: Is anyone better off?

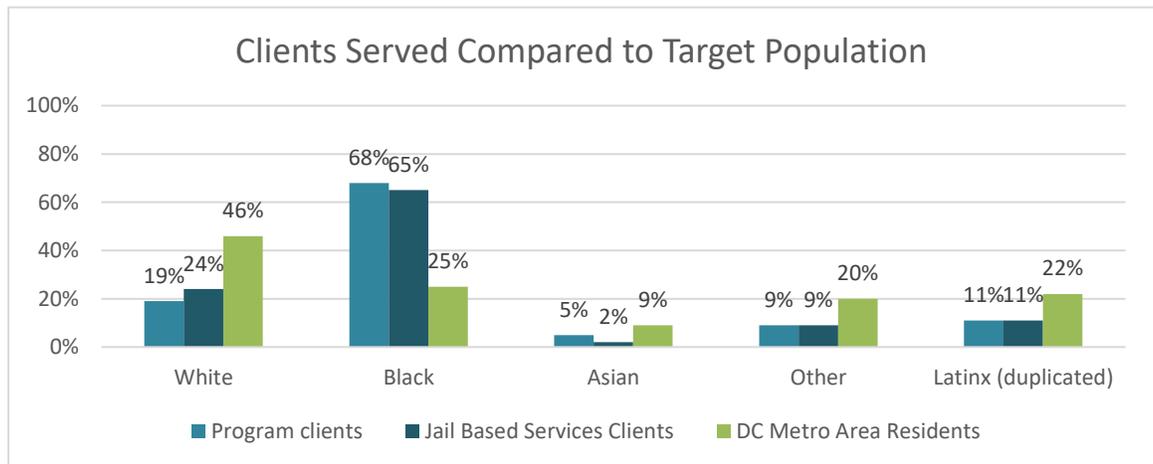
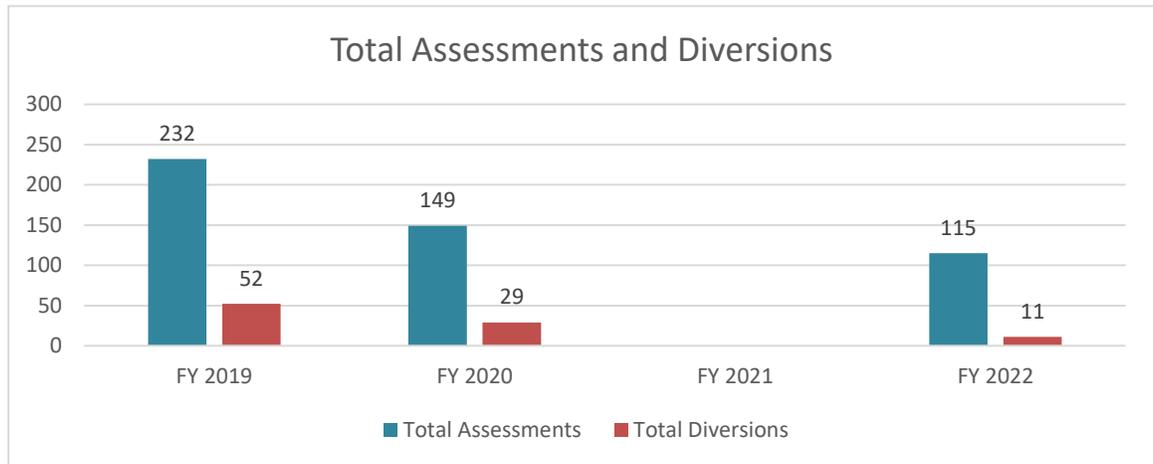
3.1	Individuals diverted from jail who are still engaged in treatment 30 days after diversion
3.2	Individuals diverted from jail who have not been re-arrested 30 days after diversion
3.3	Individuals connected at closure to ongoing services

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Forensic Jail Diversion: Intercept 2

Measure 1 Total clients served (unduplicated)

Data



Data Summary

- From FY 2019 to FY 2022, the number of clients assessed decreased 50% and the number diverted decreased 79%.
- The selected comparison population for the racial equity analysis is residents of the Washington DC metro area. This is because the majority of the clients incarcerated in Arlington County Detention Facility are not normally county residents, but rather individuals who have been arrested in the jurisdiction.
- Additionally, the Jail Based Services client demographics are charted above for comparison. Since both programs are CSB programs that serve justice system-involved clients, their demographics should be similar.
- Data for this measure is collected in the agency’s electronic health record.
- 19% of program clients (19) are missing data on race and 29% of program clients (29) are missing data on ethnicity. They have been excluded from the race and Latinx calculations.

What is the story behind the data?

- In FY 2022, the program was able to capture the number of assessments and diversions after data issues prevented this the previous year. There were significantly fewer diversions at the post-booking level due to new staff both in the Jail Diversion program and at the

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court. These staff members needed to build a relationship and establish processes for diversion to occur. Relationships were strongly established by the end of the year, and it is believed that more clients will be diverted upstream at the post-booking level in FY 2023.

- In FY 2022, many clients who were charged with low misdemeanors were released on summons rather than being brought to the jail. Low misdemeanor clients are the ones most likely to be diverted at the post-booking level, while clients with more significant charges are more likely to be diverted at later levels. Essentially, many low misdemeanor clients were diverted from jail before they could have been served by the Jail Diversion team.
- A high proportion of program clients are Black. This is likely due to complex upstream factors that have led to more Black individuals being involved in the criminal justice system.
- 85% of program clients are male, which also likely has a lot to do with the demographics of Arlington’s criminal justice system. The demographics of Jail Diversion and Jail Based Services clients are similar.
- When working with each client, the program looks for natural supports when available to help the individual through their journey. These can include family members as well as local community and faith-based leaders. When looking for supports, the program considers the client’s background and demographic identities. The program takes a trauma-informed approach to client care, which includes considering systemic-based traumas like structural racism.
- 54% of clients have an identified substance use issue, which may have contributed to their involvement in the criminal justice system.
- In FY 2022, a new staff member came onboard. This staff member outreached all of the program stakeholders and quickly began assessing clients to determine if they were appropriate for diversion.
- Multiple teams across the CSB took on diversion responsibilities, such as the Jail Based Services program, in FY 2022. The Jail Diversion team worked closely with them to help develop these programs and ensure their success.

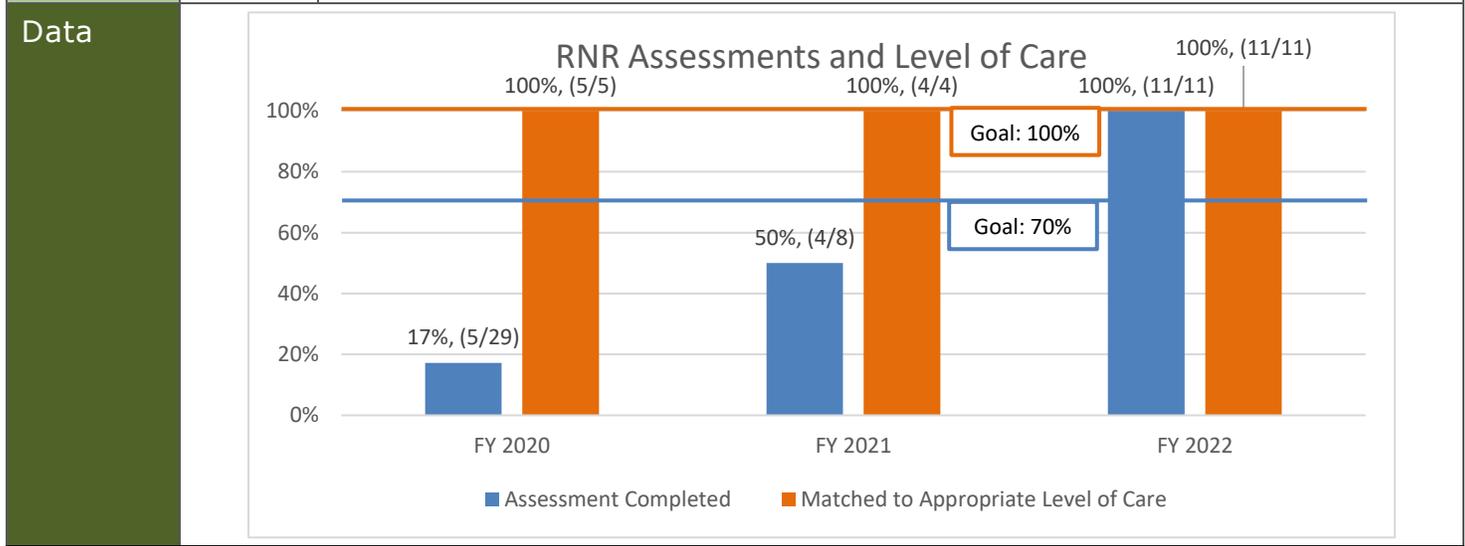
Recommendations	Target Dates
<ul style="list-style-type: none"> • Reconfigure this performance measurement plan to cover all of the forensic diversion intercepts. 	<ul style="list-style-type: none"> • FY 2023 Q2

Forecast
<ul style="list-style-type: none"> • In FY 2023, anticipate completing 175 assessments and diverting 30 clients.

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Forensic Jail Diversion: Intercept 2

Measure	2.1	Individuals whose level of service matched assessment tool recommendation
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Data Summary	<ul style="list-style-type: none"> • Risk Need Responsivity (RNR) simulator tool is an evidence-based, online assessment tool that tracks risk of recidivism and proper service levels to reduce the risk of reincarceration. • Individual’s scores on RNR simulator tool were matched with his/her level of service reported from the electronic health record. • In FY 2022, all eleven diverted individuals were administered the RNR assessment. Each of the eleven individuals were matched to the appropriate level of care.
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What is the story behind the data?

- In FY 2022, the program successfully ensured that all clients were administered the RNR Assessment as soon as clinically appropriate. The program underwent additional training on the tool which helped aid program processes and ensure that the tool was administered.
- Risk Needs Responsivity scores indicate that the program is successful at aligning clients with the proper level of care, as it has successfully matched all clients to the correct level of care each of the past three years.

Recommendations	Target Dates
<ul style="list-style-type: none"> • Continue ensuring that RNR assessments are completed as soon as appropriate. 	<ul style="list-style-type: none"> • Ongoing

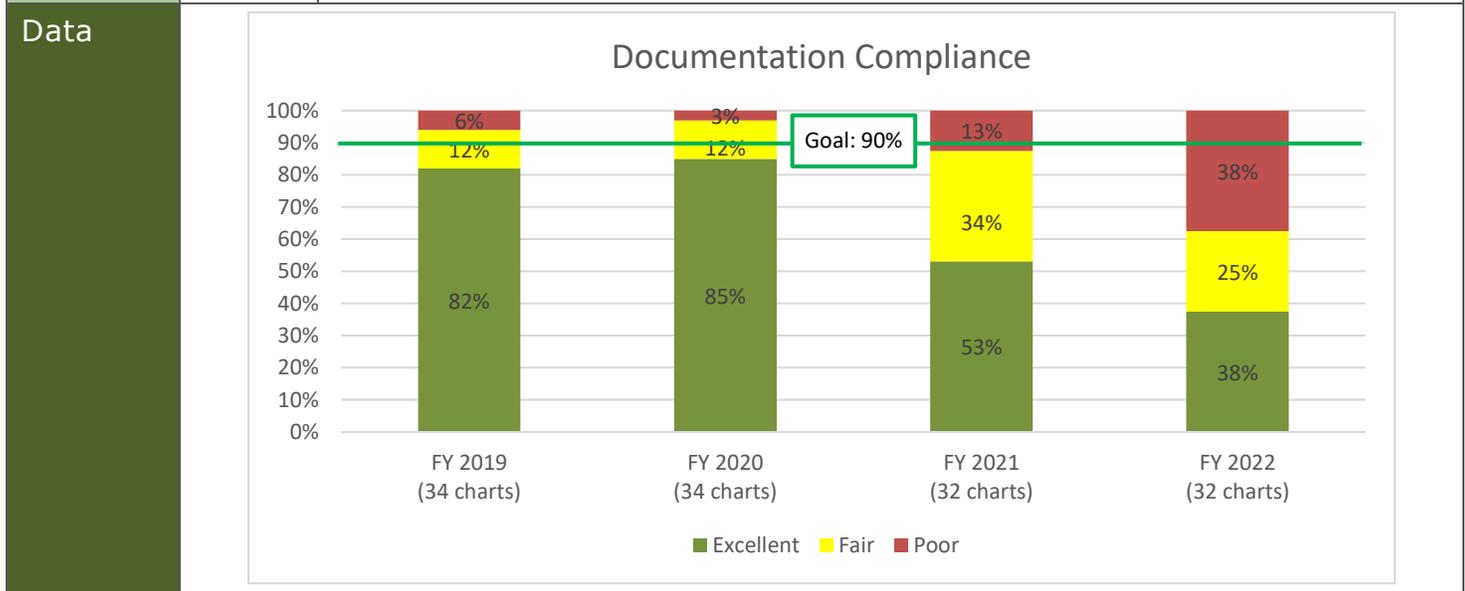
Forecast

- In FY 2023, the Risk Needs Responsivity tool will be administered to 100% of diversion clients, with 100% of clients receiving a level of service matching the assessed level.

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Forensic Jail Diversion: Intercept 2

Measure	2.2	Documentation compliance
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Data Summary	<ul style="list-style-type: none"> In FY 2022, the Compliance Review Team (CRT) and the supervisor reviewed charts each month and came to a consensus on scores when there was a discrepancy. Of the 32 charts reviewed, 12 (38%) were rated as "excellent," scoring 90% or above on the criteria reviewed.
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What is the story behind the data?

- In FY 2022, a new electronic health record was implemented agency wide. It took time for staff to learn how to do documentation in the new system, and more documentation was completed late. This led to a decrease in chart audit scores.
- Some specific elements of Jail Diversion documentation are still being configured in the new Electronic Health record, which has impacted chart scores.
- The COVID-19 pandemic increased the complexity of diversion work, as helping clients access resources involved navigating through health and safety protocols established by each entity that Jail Diversion staff worked with. These protocols changed frequently throughout the year in response to changes in the epidemic. Other partner entities were closed, so the program had to find other agencies to work with to meet client needs. Meeting clients' pandemic-related needs was the top priority for staff.

Recommendations	Target Dates
<ul style="list-style-type: none"> Continue to spend time in weekly team meetings to reinforce timeliness expectations and documentation standards. 	<ul style="list-style-type: none"> Ongoing
<ul style="list-style-type: none"> Continue to review strategies with the staff in individual supervision to accurately document according to the identified documentation standards. 	<ul style="list-style-type: none"> Ongoing

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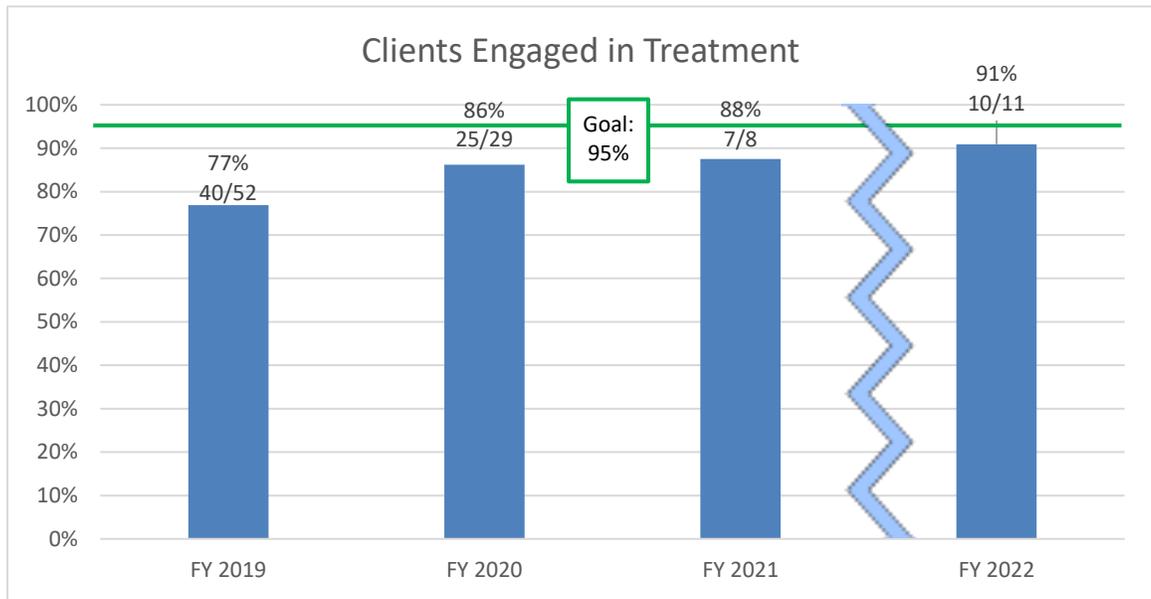
<ul style="list-style-type: none">• Continue monitoring staff documentation in the new electronic health record system to determine if additional training or guidance are needed.	<ul style="list-style-type: none">• Ongoing
<ul style="list-style-type: none">• Collaborate with other agency teams, such as Intake and the other diversion programs across the agency, to address documentation issues and ensure treatment plans are transferred appropriately.	<ul style="list-style-type: none">• FY 2023 Q2
Forecast	
<ul style="list-style-type: none">• In FY 2023, the program forecasts that 65% of charts will be marked as excellent, as staff continue learning the new electronic health record system.	

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Measure	3.1	Individuals diverted from jail who are still engaged in treatment 30 days after diversion
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Data



Data Summary

- In FY 2022, engagement increased to 91%.
- Data is obtained from electronic health record reports.
- Beginning in FY 2022, clients are considered engaged in services if they remain open to any CSB service. In prior years, clients were considered engaged only if they remained open to the Jail Diversion team.

What is the story behind the data?

- The percentage of individuals engaged in treatment for over 30 days in FY 2022 increased from prior levels. Seven clients remained with the Jail Diversion program for 30 or more days, while an additional three clients transitioned to ongoing services with other CSB teams. Only one client absconded from the program.
- The Jail Diversion team regularly meets to make sure that staff members are up to date on current clients, allowing multiple team members to provide coordinated services to meet each client's needs.
- One of the goals of a diversion program is to ensure that individuals are able to take advantage of community resources to reduce recidivism. The forensic jail diversion team makes it a point to include community resources and stakeholders for this reason.
- The Re-entry Programming Unit (RPU) has continued to increase the forensic jail diversion team's ability to divert individuals from the jail who do not have a stable residence and to match individuals with the appropriate level of prosocial programming within the community.
- Continued collaboration with existing outpatient providers at the CSB has also contributed to the high engagement rate.
- Regular staffings with the Sheriff's Pretrial Program as well as The Office of the Public Defender have improved collaborative efforts to increase treatment compliance and avoid unnecessary violation reports submitted to the court, which can result in clients being removed from diversion programming.

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Recommendations	Target Dates
• Continue with efforts to engage clients in ongoing services.	• Ongoing
• Continue to use the RPU, when appropriate, for individuals being considered for diversion.	• Ongoing
Forecast	
• In FY 2023, it is expected that at least 90% of clients will remain engaged in treatment 30 days after initial diversion.	

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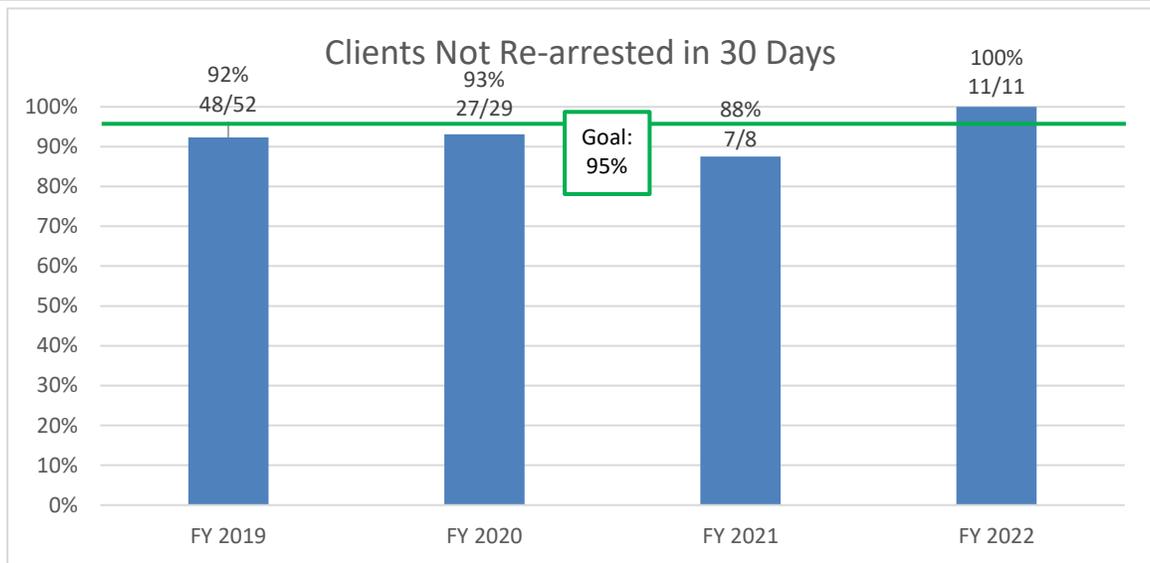
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Measure

3.2

Individuals diverted from jail who have not been re-arrested 30 days after diversion

Data



Data Summary

- The percentage of individuals not re-arrested has remained high over the past four fiscal years. The rate increased to 100% in FY 2022.
- The presence of a mental health diagnosis is significantly linked to recidivism rates. A study of 20,112 inmates by [Wilson et al. \(2003\)](#) found much higher recidivism rates for individuals with behavioral health challenges, with 54% of seriously mentally ill inmates re-arrested. A study of 200,889 inmates completed by [Bales et al. \(2017\)](#) found that those with a mental health diagnosis were 14.2% more likely to re-offend than those individuals without a mental health diagnosis. Additionally, the likelihood that individuals would re-offend with a diagnosis of a serious mental illness was 4% higher than those with a non-serious mental health diagnosis.

What is the story behind the data?

- In FY 2022, no clients were rearrested.
- Rearrests have remained low over the years. This is due to a community approach involving stakeholders such as the criminal-justice system, community partners, and the CSB.
- The intensity of the model of service used also contributes to low rates of recidivism. Individuals receive intensive case management and supportive services as they are transitioning out of the jail and are linked to community providers on an expedited basis.
- Increased collaboration with existing treatment providers at the CSB has contributed to the low recidivism rate as well as increased collaboration with criminal justice partners.
- Continued meetings with the Community Corrections Unit, pretrial services and the Office of the Public Defender has continued to improve collaborative discussions regarding treatment compliance to reduce violations of probation or pretrial conditions.
- The RPU has provided a structured daily regimen for individuals to facilitate diversion to the community.

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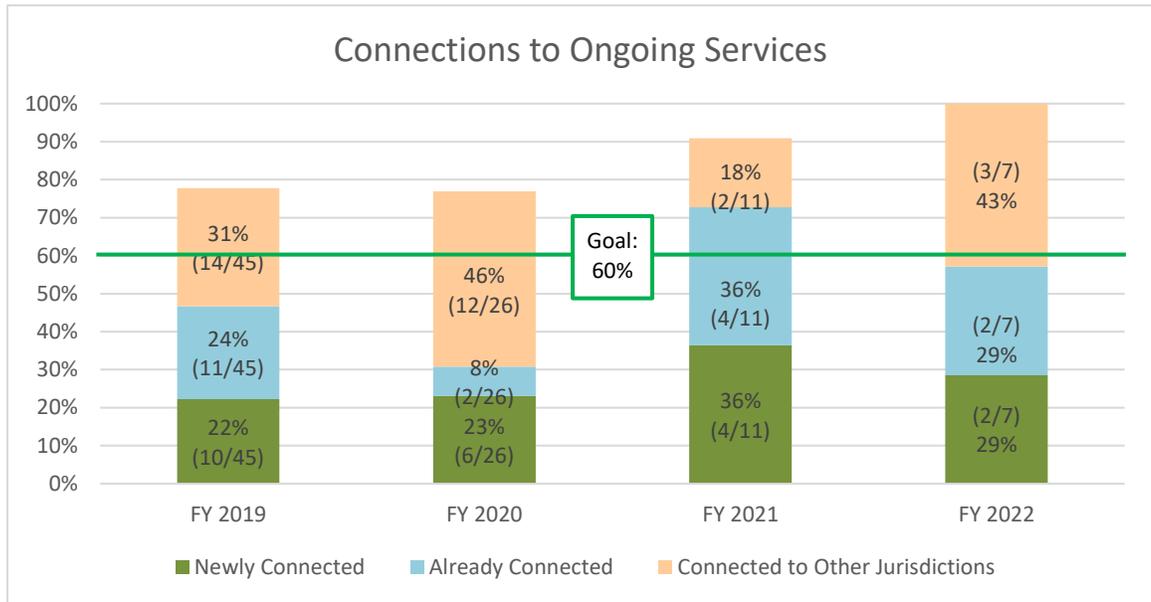
Recommendations	Target Dates
• Continue to effectively collaborate with stakeholders and the CSB to foster communication and appropriate therapeutic outcomes.	• Ongoing
• Continue using the RNR simulator tool to reduce the risk of recidivism.	• Ongoing
Forecast	
• In FY 2023, it is estimated that re-arrest rates will remain low and that 95% of individuals will not be re-arrested at 30 days.	

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Measure 3.3 Individuals connected at closure to ongoing services

Data



Data Summary

- Individuals were connected to ongoing services at discharge for 78% of diversions in FY 2019, 77% of diversions in FY 2020, 90% in FY 2021, and 100% in FY 2022.
- This measure is based on individuals closed in each fiscal year, regardless of the year initial diversion occurred.
- Data is compiled from the electronic health record and by program staff.

What is the story behind the data?

- Connections to ongoing services continued to increase in FY 2022, with 100% of clients connected to Arlington County services or their home jurisdiction. This is a testament to ongoing program efforts to connect each client to a service where they will succeed.
- Clients connected to treatment in Arlington County are paired with the treatment team best equipped to meet their needs. In FY 2022, clients were connected to the mental health outpatient team, the substance use outpatient team, and the program for assertive community treatment.

Recommendations

- Continue working with the behavioral health docket program to continue the diversion of appropriate individuals.

Target Dates

- Ongoing

Forecast

- In FY 2023, anticipate that 95% of clients will be connected to ongoing services.