FY 2024 PERFORMANCE PLAN

Forensic and Diversion Programs	BHD	Grace Guerrero, x4846 Kelly Nieman, x4849

Program Purpose	Divert individuals with serious behavioral health and substance-use disorders, who are involved with the criminal-justice system, into treatment in lieu of continued incarceration.

Program Information	• The Arlington County Forensic and Diversion team provides a comprehensive set of programs that seek to divert individuals from the criminal justice system into appropriate treatment modalities.
	• The programs offered include:
	  • **Recovery Court**: This program targets individuals involved with the criminal justice system with a severe substance dependence or dually diagnosed. Clients participate in a five-phase program and must demonstrate progress to move from phase to phase. Phase one is the most intensive phase, and each additional phase becomes gradually less intensive. Phase five involves connecting successful clients with outpatient services and ensuring they have community supports in place.
	  • **Behavioral Health Docket (BH_D)**: This new program, which began in FY 2021, seeks to identify individuals arrested for either a misdemeanor or felony offense who suffer from a serious mental illness, developmental disability or are dually diagnosed. The docket offers those meeting program eligibility an opportunity to voluntarily participate in a court-supervised diversion program that provides intensive treatment and support in lieu of jail. The goal of the BHD is to improve both mental health and criminal justice outcomes.
	  • **Other Forensic and Diversion Programs**: These programs involve identifying individuals at different stages of the legal process and diverting them into ongoing treatment if appropriate. These include the Magistrate Post-booking Project (MPBP), the Bond Diversion Program, and the Court-based Diversion Program. The programs primarily serve individuals who commit low-level misdemeanors who are seriously mentally ill or dually diagnosed, and whose illness likely contributed to the offense.
	• The programs receive referrals from partners including the Office of the Magistrate, Arlington County courts, the Sheriff's Pre-trial Release Program, the Office of the Commonwealth's Attorney and court-appointed attorneys. Approximately 30% of those incarcerated in Arlington are Arlington residents.
	• Not everyone assessed will be found eligible for diversion programs.
	• Forensic and diversion services are available five days a week.

Service Delivery Model	• In FY 2024, 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 2025, it is anticipated that the program will continue to utilize the same service delivery model used in FY 2024.
PM1: How much did we do?	
Staff	• 8.45 FTEs ○ 0.6 FTE Supervisor

- 0.6 FTE Assistant Supervisor
- 1.0 FTE Recovery Court Therapist
- 1.0 FTE Recovery Court Care Coordinator
- 5.25 FTE Forensic Staff

Customers and Service Data

	FY 2021	FY 2022	FY 2023	FY 2024
Total Clients Served in Forensic and Diversion Programs (unduplicated)	n/a*	201	240	152
Recovery Court: Assessment	n/a	n/a	7**	11
Recovery Court: Ongoing	32	28	22	22
Behavioral Health Docket: Assessment	n/a*	35	24	43
Behavioral Health Docket: Ongoing	n/a*	12	15	19
Other Forensic and Diversion Programs: Assessment	n/a*	115	179	79
Other Forensic and Diversion Programs: Ongoing	n/a*	11	50	16
Total Hours of Service	n/a	2,749	3,619	3,537

* 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.

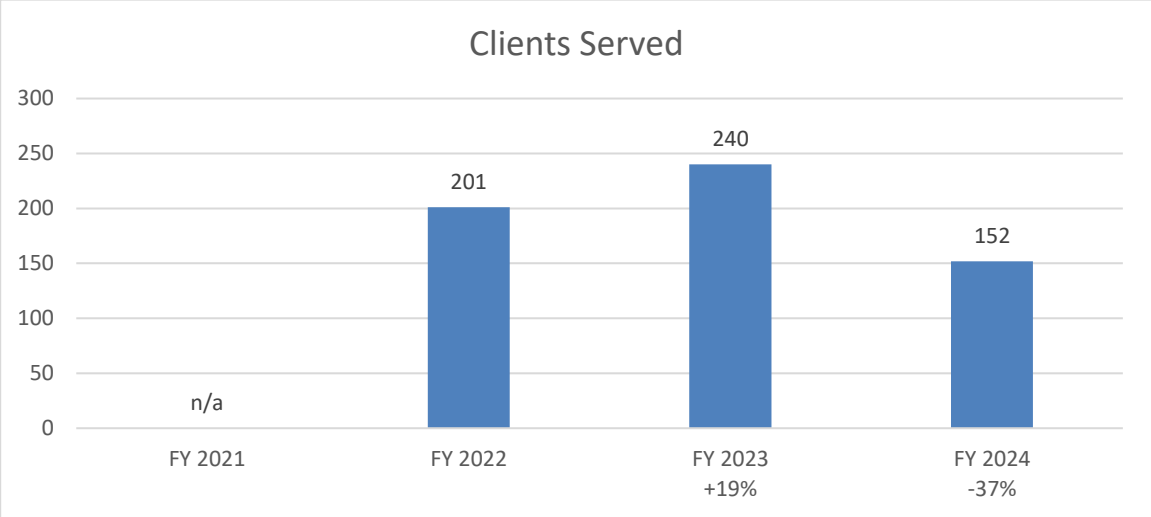
**Clients in the assessment phase of Recovery Court began being tracked in FY 2023

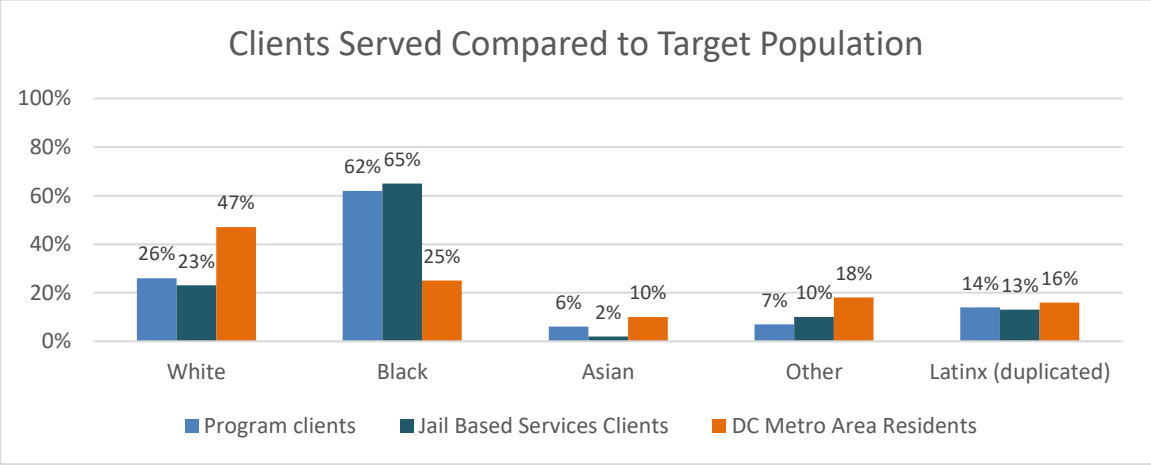
PM2: How well did we do it?	
2.1	Documentation Timeliness
PM3: Is anyone better off?	
3.1	Improvement on RNR Assessment Score
3.2	Clients who successfully complete the program
3.3	Recidivism of clients who graduated from the program
3.4	Clients connected to ongoing services

Forensic and Diversion Programs

Measure	1	Total Clients Served in Forensic and Diversion Programs (unduplicated)

Data





Data Summary

- From FY 2022 to FY 2024, the number of clients served decreased 24%.
- The selected comparison population for the racial equity analysis is residents of the Washington DC metro area. This is because the majority (approximately 70%) of the individuals incarcerated in Arlington County Detention Facility are not 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 are expected to be similar.
- Data for this measure is collected in the agency's electronic health record.
- 6% of program clients (9) are missing data on race and 9% of program clients (14) are missing data on ethnicity. They have been excluded from the race and Latinx calculations.

What is the story behind the data?

- In FY 2024, the programs served fewer clients over the prior years. Intensive efforts were undertaken to divert all appropriate clients assessed by the program.
- The main driver behind this decrease was the absence of the Magistrate Post-booking Project (MPBP) and the Bond Diversion Program during FY 2024. This is also reflected in the lower number of clients in Other Forensic and Diversion Programs: Assessment and Ongoing. Despite these decreases, the program was able to increase the number of assessments conducted for Recovery Court and Behavioral Health Docket.
- In FY 2024, the programs continued to deal with significant staffing challenges including the loss of a diversion programs therapist from July 2023 to June 2024. This also likely led to decreases in the number of clients served and hours of service provided. To manage staff vacancies and resignations, the supervisor adjusted team responsibilities to ensure that all programs were able to operate effectively. Staff took on increased workloads to keep everything moving smoothly.
- At the beginning of FY 2024, the program launched the Intensive Forensic Program (IFP). This is an intensive group service modeled after the Intensive Outpatient Program (IOP) and provides a structured treatment environment following modern best practices. This intensive service is helping to expand overall capacity as well as improve outcomes for Forensics clients. It is open to clients in ongoing Forensic and Diversion programs. The program is currently working to hire a part-time clinician devoted specifically to supporting IFP as well as converting a contracted peer support position to a permanent position on the team.
- The program also is undergoing other changes to improve its services including hiring a Recreation Therapist to support Recovery Court and the Behavioral Health Docket and building out the mental health component to the same programs, which have traditionally been more focused on people with substance use needs. Building out this mental health component will be a time intensive task but has already shown promise with a piloted mental health docket case from July to November of 2023 and plans to possibly hire a person to support this type of work going forward.
- In FY 2024, the program continued to help a high number of clients through the restoration to competency process. This process is provided to individuals who have been deemed incompetent to stand trial by the court, and it includes significant education on the legal system and rehabilitation services. To meet this need, staff who are normally assigned to other programs within the Forensic and Diversion umbrella were deployed to assist clients who needed restoration.
- Forensic staff also served as backup to the newly launched Mobile Outreach Support Team (MOST). MOST provides mobile services including assessment, de-escalation, suicidality screening, assessment, peer support, care coordination, and homeless outreach. Launching MOST took about nine months of FY 2024 and involved close work with initiative stakeholders including the Forensics team. During FY 2024 the MOST team served 221 people.
- A high proportion of program clients are Black. This is likely due to complex systemic factors that have led to more Black individuals being involved in the criminal justice system. The demographics of Jail Diversion and Jail Based Services clients are similar, indicating that clients are being diverted at an equitable rate.
- 80% of program clients are male, which also aligns with the demographics of individuals involved with Arlington's criminal justice system.
- 57% of clients across all programs have an identified substance use diagnosis, which may have contributed to their involvement in the criminal justice system.
- 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.

Recommendations	Target Dates
• Continue to improve Recovery Court by reviewing and changing policy and monitor and regulate services offered.	• Ongoing
• Continue to build the mental health components of Recovery Court and the Behavioral Health Docket by working to launch a Behavioral Health Docket in Circuit Court	• FY 2025 Q4
• Continue to monitor and remind staff on the importance of demographic data collection and collection strategies, such as reviewing and updating data for all clients when they come into services.	• Ongoing
• Increase Assessment and Ongoing services for Other Forensic and Diversion Programs as much as possible.	• FY 2025 Q1

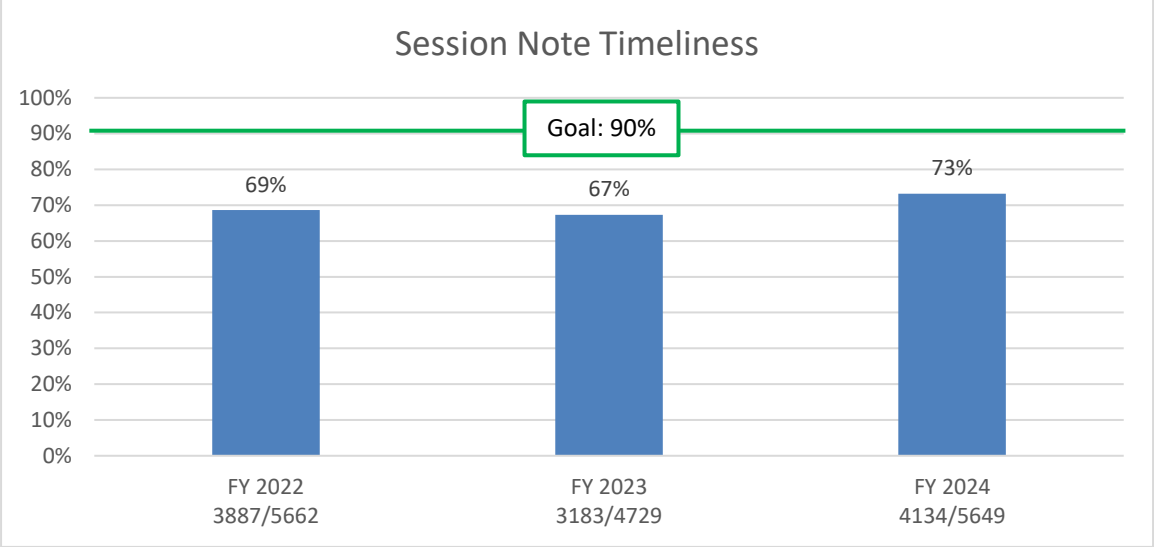
Forecast

- In FY 2025, the program anticipates serving 240 clients, due to the addition of new programs and initiatives.

Forensic and Diversion Programs

Measure	2.1	Documentation Timeliness

Data



Data Summary

- Timeliness of progress-note entry was 73% in FY 2024, an increase from the prior year.
- All session notes are due within one business day of the service.
- Data is reported from the electronic health record.

What is the story behind the data?

- In FY 2024, session note timeliness increased 9% compared to FY 2023 but remained below the goal of 90% due to staffing challenges. As staff worked to cover the many Forensic and Diversion programs offered, session notes were occasionally completed late.
- Over 20% of Forensic and Diversion services were provided in-person and in the community in FY 2024. Providing services in the community requires significant preparation and travel time, which can interfere with timely note completion.
- In FY 2024, program managers continued documentation office hours. This gives staff a scheduled time that they can come in and ask questions or seek assistance.
- Each Forensic and Diversion program has its own documentation requirements. Learning these requirements can be tricky for staff. For the new staff members in FY 2024, documentation took additional time as they had to make sure they were completing it correctly.

Recommendations	Target Dates
• At team meetings, encourage staff to document services as soon as possible to ensure timely completion of session notes.	• Ongoing
• Continue hosting documentation office hours to give staff a forum to ask documentation questions.	• Ongoing
• Have experienced staff to support new staff timely note completion through partnership and mentoring.	• FY 2025 Q1

• Continue to use document cheat sheets for each program to help new and established staff learn and follow various programs' documentation requirements.	• Ongoing

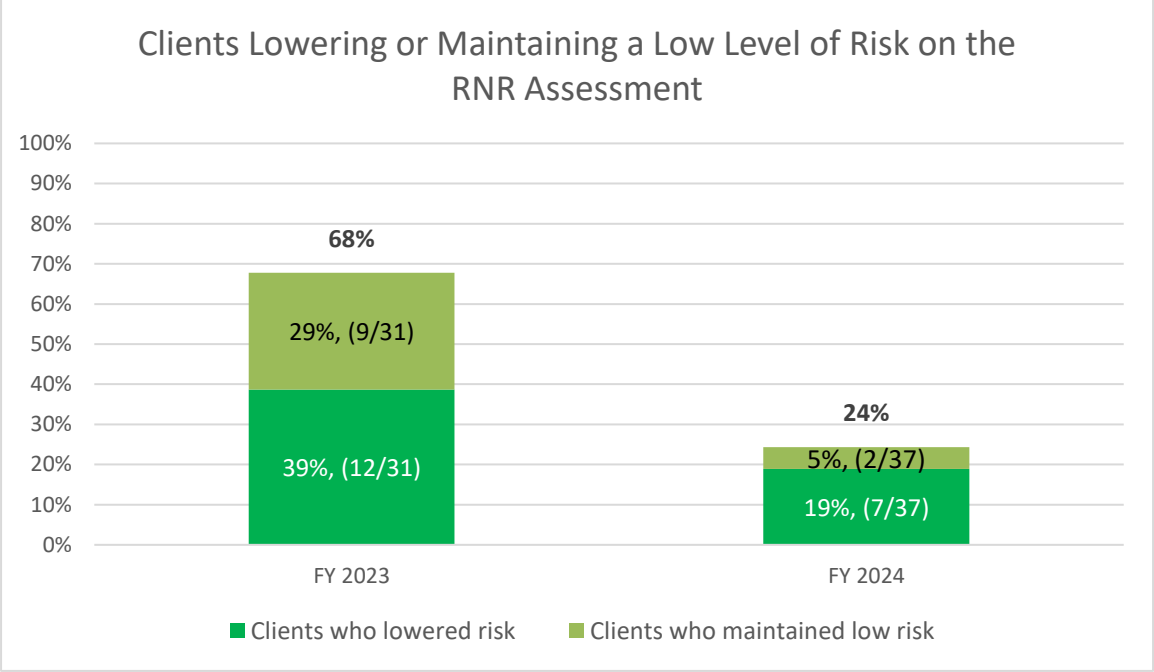
Forecast

- In FY 2025, the program anticipates the timeliness rate increasing to 76%.

Forensic and Diversion Programs

Measure	3.1	Improvement on RNR Assessment Score

Data



Data Summary

- Data is gathered from the Risk Needs Responsivity (RNR) tool from George Mason University's Center for Advancing Correctional Excellence. It measures the criminal justice, behavioral health, and criminogenic needs of individuals to achieve positive results.
- The Risk Needs Responsibility tool is intended to be administered to all clients every six months in specific ongoing programs, including Recovery Court and the Behavioral Health Docket.
- This measure reflects ongoing clients who were assessed with the RNR tool at least twice during the fiscal year. As clients progress through their program, their estimated success rate calculated by the tool should increase.
- In FY 2024, 24% of clients lowered or maintained their risk on the RNR tool.

What is the story behind the data?

- In FY 2024, 19% of clients lowered their risk for recidivism (7/37) and 5% kept it at a low level (2/37).
- 29% of the clients who were assessed at high risk of recidivism at the beginning of the year lowered their risk by the end of the year.
- Fewer clients maintained low risk in FY 2024 because the program accepted primarily high-risk clients at entry this year. In FY 2024 the Magistrate, Court-Based, and Bond Diversion programs, which accept low risk clients, were not running.
- In addition, in FY 2024, there were a greater share of clients in the earlier phases of the program (phases one and two), and this may have resulted in fewer clients decreasing their risk level than in the prior year. Phase one and two clients have more intensive needs and have been in treatment less time than those in later phases of the program. They're expected to progress less quickly than those in later phases of the program who have more of their needs addressed.

- Multiple initiatives operated for their first full year in FY 2024 helped clients progress in their respective programs. The Intensive Forensic Program provided a highly structured group service to clients who were diverted from the jails. The Recovery Court program offered mental health treatment as well as substance use treatment to provide comprehensive care to clients who were dually diagnosed. In addition, recreation therapy services and a peer support specialist started supporting the program again. This allowed the program to provide more responsive treatment to clients.
- An additional five clients received one RNR tool but had not been in the program long enough to receive a second one by the end of the fiscal year.

Recommendations	Target Dates
• Continue providing the RNR assessment to clients twice a year and track their progress through the year.	• Ongoing

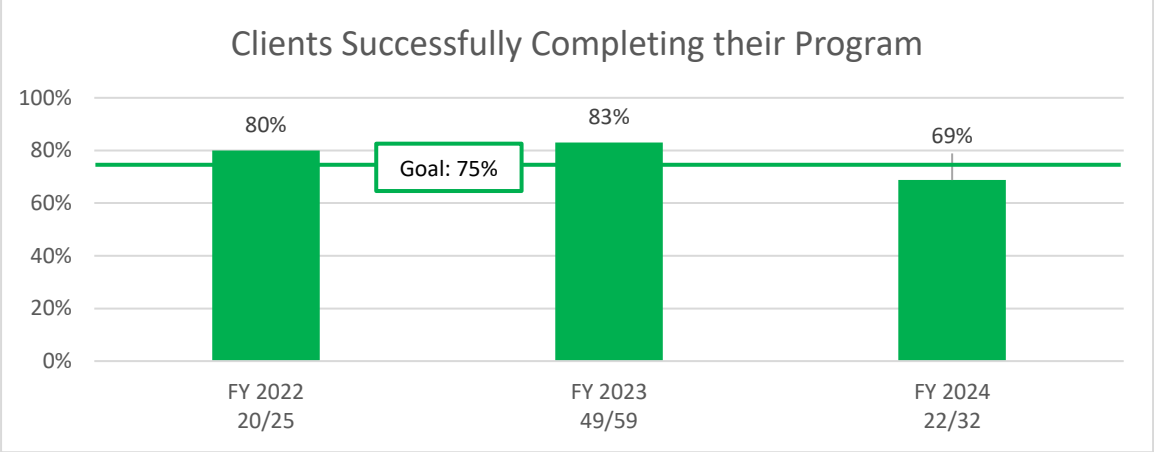
Forecast

- In FY 2025, 97% of clients are expected to maintain low risk or lower their risk of recidivism.

Forensic and Diversion Programs

Measure	3.2	Clients who successfully complete their program

Data



Data Summary

- In FY 2024, 69% of client enrollments (22/32) resulted in successful completion of their program.
- Data for this measure is collected from discharge reasons entered into the electronic health record. Only clients who are discharged from an ongoing program during the current fiscal year are included.

What is the story behind the data?

- In FY 2024, most clients (69%, 22/32) who discharged from ongoing treatment were able to successfully complete it. The majority of clients not completing treatment were those no longer with the program due to re-incarceration or unsuccessful discharge due to court termination for non-compliance.
- The program utilizes graduation ceremonies to celebrate client program completions. Clients report that these celebrations help motivate them as they work through treatment programs that are often long, intensive, and challenging.
- Throughout FY 2024, the Recovery Court handbook was updated. This document outlines program guidelines with an aim to be as client focused as possible. For example, it includes best practices and innovations in Medications for Addiction Treatment (MAT) that ensure each client's specific needs are honored and addressed. This has helped staff improve the quality of the program and focus more on care rather than on supervision.

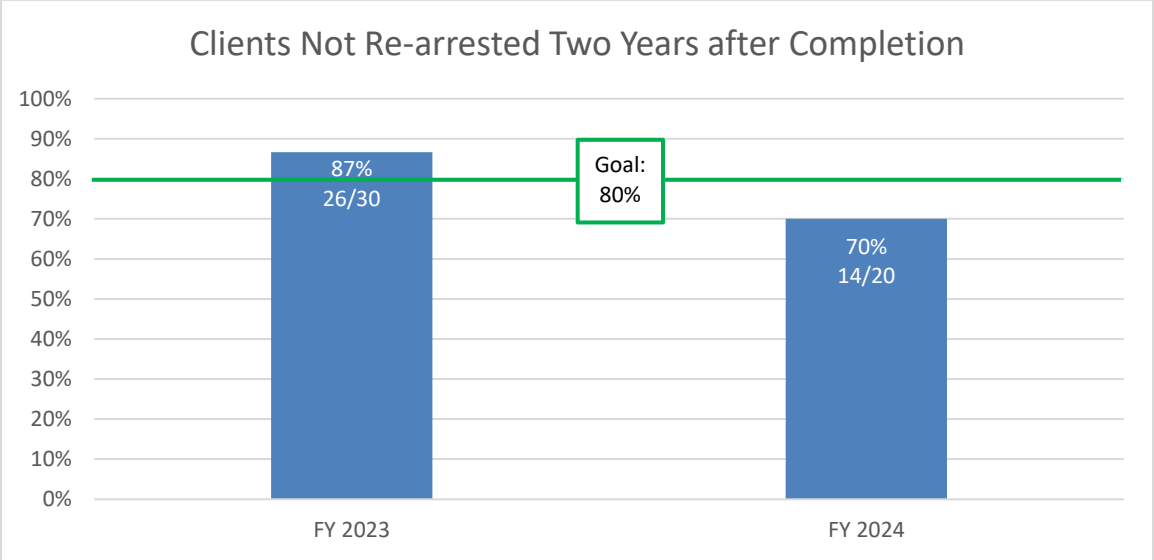
Recommendations	Target Dates
• Ensure that completion data is accurately entered into the electronic health record.	• FY 2025 Q1
• Continue to consistently review standards for recovery court and update the program's handbook.	• Ongoing

Forecast

- In FY 2024, it is anticipated that 75% of clients will successfully complete their program.

Forensic and Diversion Programs		
Measure	3.3	Recidivism of clients who graduated from the program

Data



Data Summary	
	• The percentage of individuals not re-arrested two years after completion was 70% (14/20) of clients who completed the program in FY 2022 avoiding rearrest in FY 2023 and 2024.

What is the story behind the data?

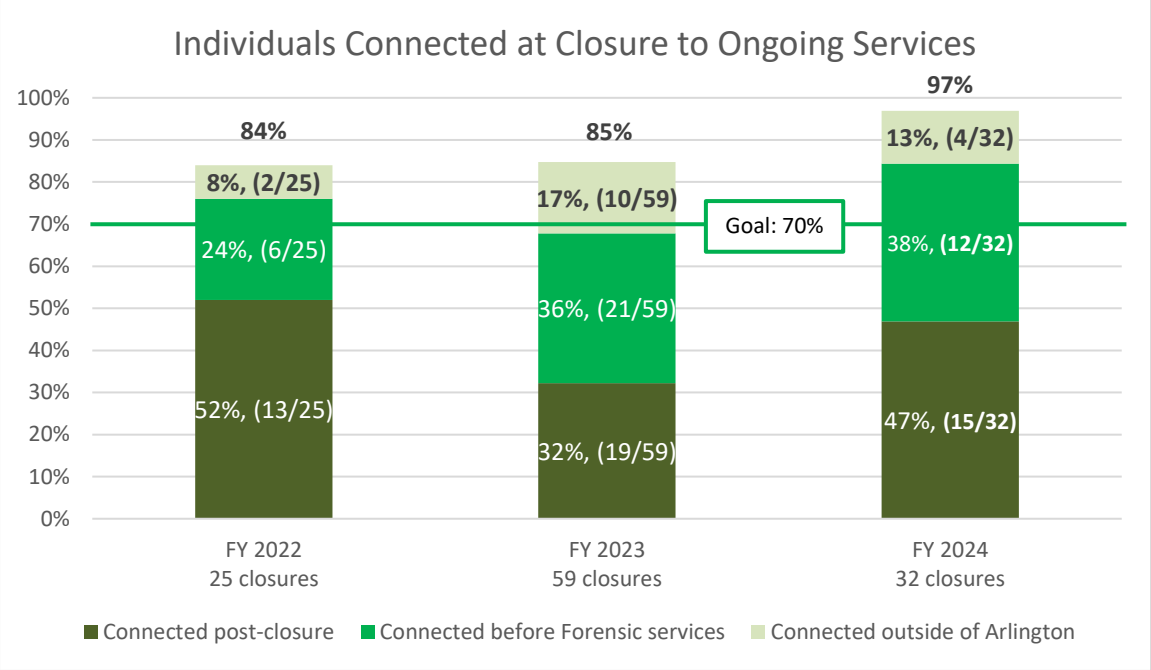
- In FY 2024, the vast majority of clients who completed their program in FY 2022 (14/20) were not rearrested in Arlington in FY 2023 or 2024.
- When analyzing the clients who were rearrested after completing the program in FY 2022, the program determined that the majority of those clients were in programs with a lower intensity of court services.
- 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.
- 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.
- Continued meetings with criminal justice partners has continued to improve collaborative discussions regarding treatment compliance to reduce violations of probation or pretrial conditions.

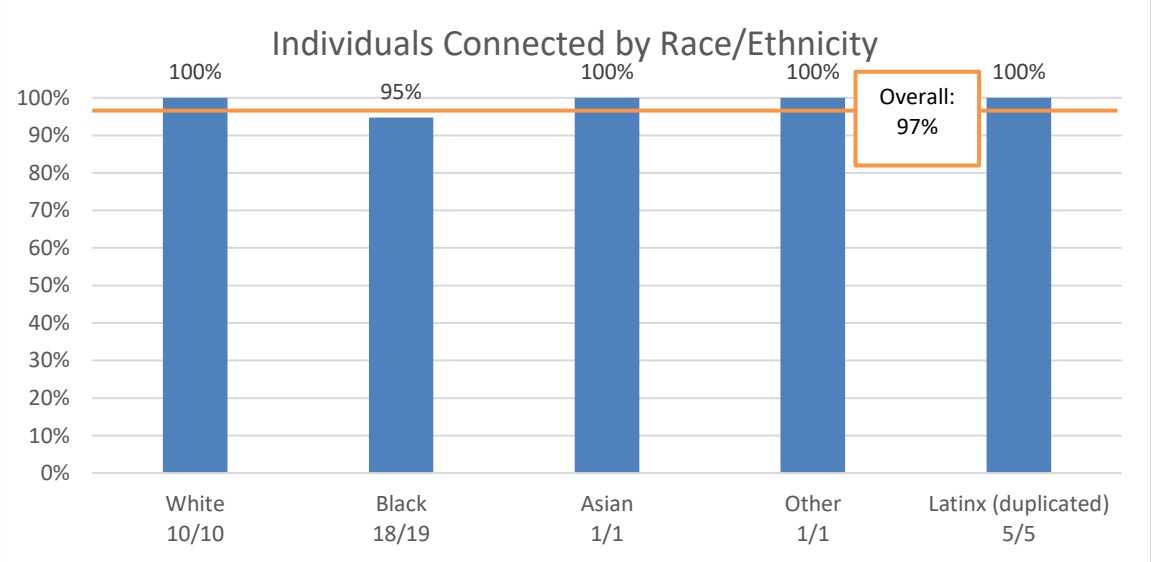
Recommendations	Target Dates
• Continue to effectively collaborate with stakeholders and the CSB to foster communication and appropriate therapeutic outcomes.	• Ongoing
• Review available data to determine if a national benchmark exists for the recidivism timeframe.	• FY 2025 Q3
Forecast	
• In FY 2025, it is estimated that re-arrest rates will remain low and that 85% of individuals will not be re-arrested two years after completion.	

Forensic and Diversion Programs

Measure	3.4	Individuals connected to ongoing services

Data





Data Summary

- In FY 2024, 97% of individuals were connected to ongoing services at discharge, a higher percentage compared to those connected the prior year.
- 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. Only clients who are discharged from an ongoing program during the current fiscal year are included.
- Race and ethnicity data was missing for 3% (1/32) clients. That client is excluded from the race equity chart.

What is the story behind the data?

- Connections to ongoing services continued to exceed program goals in FY 2024 and increased over prior years.
- One possible reason for the increase in connections may be that more clients included in this measure were in the Behavioral Health Docket Program than in the past. The docket program requires that all clients are connected to services at program closure unlike the other programs.
- Clients connected to treatment in Arlington County are paired with the treatment team best equipped to meet their needs. In FY 2024, clients were connected to several services including the mental health outpatient team, the substance use outpatient team, and Assertive Community Treatment.
- Some clients come to the program from outside of Arlington. In FY 2024, the program was able to connect clients to public and private providers in Washington D.C., Alexandria, and Richmond.
- An equity analysis conducted in FY 2024 did not reveal any major disparities in connection to treatment across the racial or ethnic categories defined above.

Recommendations	Target Dates
• Continue reviewing ongoing service connection rates by race and ethnicity, to determine if there are ongoing trends.	• FY 2025 Q1

Forecast

- In FY 2025, it is anticipated that 95% of clients will be connected to ongoing services.