

Diversionary Strategies in the Recovery of Mentally III Offenders

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## **Course Description**

Summary: Evidence-based program and facility design helps counties respond to a new mental health delivery platform. In most states, while the way we provide mental health treatment in a detention environment is changing to a more evidence-based model, many counties are still challenged to deliver access to services or medications needed within facilities that are not designed for that purpose. Some states are moving away from housing the mentally ill to transitioning the inmates back into the community.

## **Course Description**

We will discuss how those changes have occurred and address how counties implementing new programs and services to address mental health treatment face a greater need to change how their buildings are working. Examples of success - based on real TreanorHL projects—include: transition centers; crisis intervention centers; community outpatient services; intensive inpatient services and stepdown programs for short term stabilization followed by outplacement.

# Learning Objectives

- 1. Articulate why a community may decide to start implementing re-entry programs and diversionary strategies.
- 2. Describe re-entry programs and diversionary strategies as models and the state of research on program.
- Identify program models other than re-entry and diversionary that have shown to improve outcomes for individuals with mental illness involved in the criminal justice system. objective here.
- 4. Identify local and state stakeholders who should help plan your re-entry and diversionary strategies.



# THE ROLE OF RE-ENTRY AND DIVERSIONARY STRATEGIES

RECOVERY OF MENTALLY ILL OFFENDERS

# THE ROLE OF RE-ENTRY AND DIVERSIONARY STRATEGIES

#### RECOVERY OF MENTALLY ILL OFFENDERS



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## The Numbers tell the story...

- CASA finds 65% of all US Inmates meet medical criteria for substance abuse addiction, only 11% receive any treatment.
- APHA finds 10% 15% of people in prison suffer from mental health illness, and an estimated 3% - 11% of the seriously mentally ill prison population are diagnosed with co-occurring substance abuse disorders, 95% of suicides within prions and jails are committed by persons with mental illness.

Source: Center on Addiction and Substance Abuse, American Public Health Association

## The Numbers tell the story...

- Women held in local jails represent the fastest growing population of incarcerated people in the US, according to a new study. The researchers found that trauma, addiction, sexual violence and mental health issues were all closely wrapped up with the swelling numbers.
- Since 1970, the number of women in US jails has increased by 14 times, far outstripping the growth in male population

Source: The Guardian

## Why Interventions...?

## Adults who spend time in custody are

- less likely to complete high school,
- less likely to find employment and
- more likely to suffer mental health problems.

## **Emerging Trends**

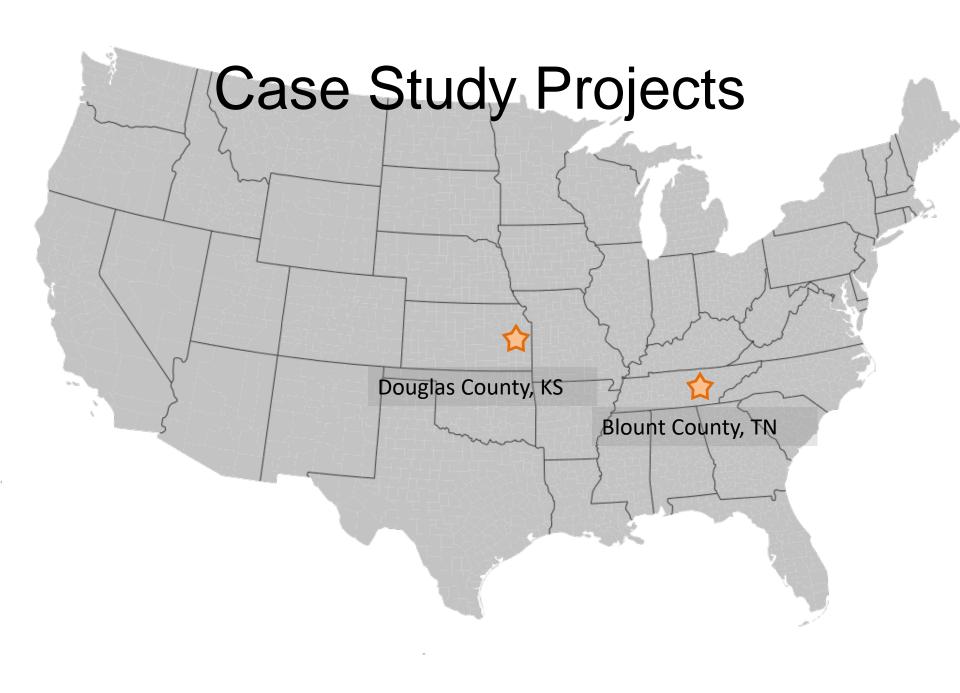
- Shortly after arrest defendant screening, brief intervention and referral to treatment.
- Diverted to community treatment under pretrial supervision conditions.
- Drug court into which offenders may be diverted prior to trial or placed on conviction.
- After sentence, treatment access may be available in jails or under probation or parole supervision.
- Treatment at any stages may be offered through local public health systems, contracted providers, usually through case mangers.

Source: National Center for Biotechnology Information

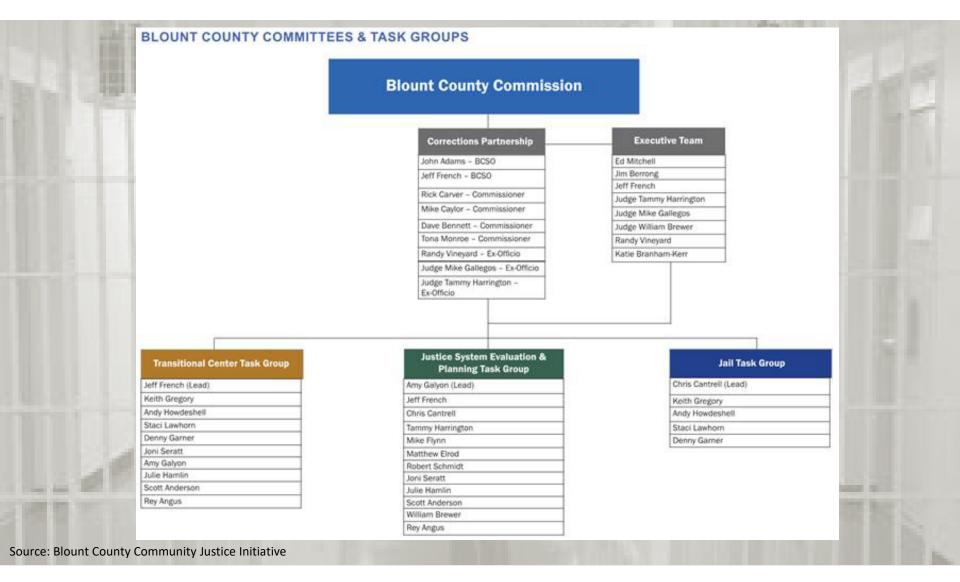
## Options & the Continuum of Care

- Outpatient, intensive outpatient, residential, and medication assisted treatment.
- State prisons, typical residential treatment in a modified therapeutic community (TC).
- TC's are less common in jails because inmates are usually incarcerated for brief periods of time.
- TC's provide an intensive, highly structured pro-social environment in which treatment staff and peers interact to influence attitudes, perceptions and behavior.
- Nonresidential or outpatient treatment in correctional settings is less intensive and usually involves a combination of individual and group counseling per week.

Source: National Center for Biotechnology Information







#### **MISSION STATEMENT:**

- "How do we help people back into the community?
- "How do we as planners and architects help Blount County repair and **heal** incarcerated people, while addressing a myriad of issues related to overcrowding and community safety?
- The Design Team goal became clear:
- "We have all failed if the project is merely a bed capacity expansion of the existing jail....the solution begins with the **proper balance** of transitional opportunities, enhancements to non-custody alternatives and improvements to the jail."

#### **SURVEY RESULTS:**

- 92% of respondents have significant knowledge of the Blount County Justice System.
- Over three-quarters know someone who has been affected by the opioid epidemic.
- Most respondents believe that violent pre-trial and sentenced offenders should be incarcerated, and pre-trial non-violent alleged offenders should be in non-custody alternatives.
- All agreed with the statements "Most inmates should have access to rehabilitative programs"; and "Restorative Programs leading to changed behaviors benefit offenders & the community."

#### **PROJECT GOALS:**

- Enhance Public Safety
- Help our Community
- Help People Recover from Addictions
- Keep Violent and Repeat Offenders Incarcerated
- Use Jail primarily for Serious Violations of the Law
- Expand Rehabilitative Non-Custody Alternatives
- Develop Strategies & Environments that Promote Change & Reduce Recidivism
- Reduce Jail Overcrowding through expansion of Alternatives
- Employ Cost-Efficient Solutions

#### **OUTCOMES:**

- Transition Center on New Site
- 24% of Bed Needs Accommodated at Transition Center
- Transition Center Master Planned for in Custody & Non Custody Recovery and Supervision Programs
- Therapeutic residential environment

#### **DETENTION / BEHAVIOR MODIFICATION**



#### **BED NEEDS:**

Inmate Category	Expanded Jail		Transition Center			G	Grand Total		
Illinate Category	М	F	Total	М	F	Total	М	F	Total
Classification	36	20	56			0	36	20	56
Segregation	24	12	36			0	24	12	36
Protective Custody	16	8	24			0	16	8	24
Mental Health & Medical Step Down	32	32	64			0	32	32	64
Maximum Security	96	24	120			0	96	24	120
Medium Security	270	56	326			0	270	56	326
Minimum Security	36	8	44			0	36	8	44
Recovery Court Stabilization Phase	0	0	0	24	10	34	24	10	34
Recovery Court Phase 1	0	0	0	24	12	36	24	12	36
Other In-Custody Treatment Program(s)	0	0	0	24	12	36	24	12	36
Sentenced Inmates Last 60 Days	16	0	16	36	15	51	52	15	67
Inmate Workers	36	16	52	24	12	36	60	28	88
Work Releasees	0	0	0	24	12	36	24	12	36
Total Beds in Bed Plan	562	176	738	156	73	229	718	249	967

#### **BEDS BY GENDER:**

	In the Jail	In the TC	Total
Percentage of beds for females:	24%	32%	26%
Percentage of beds for males:	76%	68%	74%

#### **BED BY FACILITY:**

Percentage of all beds that are in TC:	24%
Percentage of all beds that are in the Jail:	76%

3237			100		11120			
E	Blount County Community Justice Initiative							
JAIL	Blount County Transition Facility							
JAIL								
DDC CD 111	Cost Summary by Department				2018 Dollars	s		
PROGRAM:	Program Name	Square Footage	Average \$/SF	Low Sub-Total	High Tota	Sub-	N. P. E.	
	CONSTRUCTION (HARR) COSTS	rootage	Ş/3F	Sub-Total	1016	11		
	CONSTRUCTION (HARD) COSTS							
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	14 New Housing Units - 336 Male & Female Beds	42,059	\$ -	\$ -	\$			
Market 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Medical Clinic	5,306	\$ -	\$ -	\$			
	Medical Infirmary	-	\$ -	\$ -	\$			
	Food Service	3,096	\$ -	\$ -	\$	-		
	Laundry	828	\$ -	\$ -	\$			
CHICAGO I I I I I I I I I I I I I I I I I I I	Intake & Work Program Processing	6,240	\$ -	\$ -	\$	-		
	Detention Administration	2,503	\$ -	\$ -	\$	-		
	Resident Programs & Support	14,301	\$ -	\$ -	\$	-		
	Staff Support	4,176	\$ -	\$ -	\$	-		
	Building Support	6,300	\$ -	\$ -	\$	-		
	Sub Total	78,338						
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	Areas Shared by All Non-Custody Programs	18,803	\$ -	\$ -	\$	- 30		
CHARLEST TO A CONTROL OF	Public Lobby & Video Visitation	5,625	\$ -	\$ -	\$			
	Recovery & Veterans Courts	3,840	\$ -	\$ -	\$	-		
	County Probation	4,733	\$ -	\$ -	\$	-		
1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	State Probation & Parole	-	\$ -	\$ -	\$	- 100		
100 100 100 100 100 100 100 100 100 100	Community Corrections	-	\$ -	\$ -	\$	- 100		
1 St. C. 40 St. L. 10 St.	Administration for Transition Center	2,220	\$ -	\$ -	\$	- 600		
The second second	Sub Total	35,220						
	SUB-TOTAL	113,558		\$ -	\$			
	TOTAL CONSTRUCTION BUDGET			\$ -	\$			
Source: Blount County Community Justice Initiative			Avg \$/SF	\$ -	\$ .			
Jource. Blount Country Community Justice miliative								

JAIL EXPANSION PROGRAM:

Blount County Community Justice Initia	tive			
Blount County Jail Expansion and Renovation				
Cost Summary by Department				2018 Dollars
Program Name	Square Footage	Average \$/SF	Low Sub-Total	High Sub-Total
CONSTRUCTION (HARD) COSTS				
New Housing Units - 192 Male Beds	-	\$ -	\$ -	\$ -
New Housing Units - 384 Male Beds	64,449	\$ -	\$ -	\$ -
Medical Clinic & Infirmary	9,187	\$ -	\$ -	\$ -
Medical/Mental Health Unit - 32 Male Beds	7,647	\$ -	\$ -	\$ -
Medical/Mental Health Unit - 32 Female Beds	7,647	\$ -	\$ -	\$ -
New Food Service	5,894	; ; -	\$ -	\$ -
New Laundry	1,981	\$ -	\$ -	\$ -
Inmate Support	4,540	\$ -	\$ -	\$ -
Staff Support	1,833	\$ -	\$ -	\$ -
Building Support	2,075	\$ -	\$ -	\$ -
Intake & Court Transfer	5,472	\$ -	\$ -	\$ -
Detention Administration	2,580	\$ -	\$ -	\$ -
Jail Lobby	2,526	\$ -	\$ -	\$ -
SUB-TOTAL	115,829		\$ -	\$ -
TOTAL CONSTRUCTION BUDGET			\$ -	\$ -
		Avg \$/SF	\$ -	\$ -



**EXISTING COURTS & JAIL SITE** 

















EXISTING CHARACTER



**JAIL EXPANSION SITE** 



**HOUSING & SUPPORT** 



TRANSITION CENTER SITE



#### **OUT OF CUSTODY PROGRAMS**



IN CUSTODY PROGRAMS

