

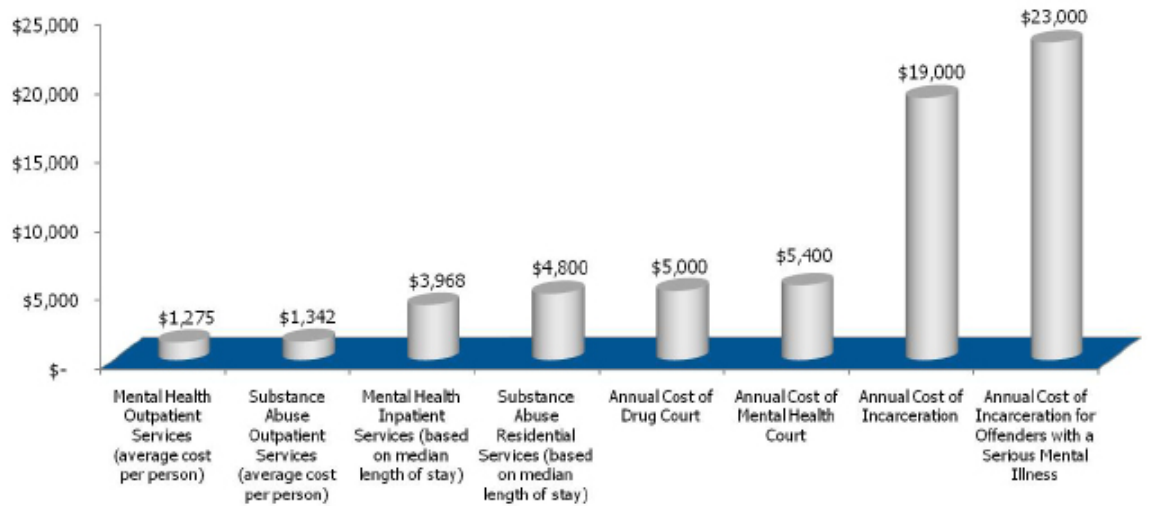
Smart on Crime: A Better Choice

The Oklahoma Department of Mental Health and Substance Abuse Services is advocating a “Smart on Crime” legislative package that targets treatment services to at-risk populations, reduces crime and incarceration rates, and saves tax dollars. Smart on Crime, endorsed by the Oklahoma Sheriff’s Association and the Oklahoma District Attorney’s Council, uses evidence-based programs in the areas of criminal justice diversion, pre-sentencing engagement, and reintegration to reduce recidivism and decrease demand for correctional beds. The department has a tremendously successful track record with the operation of these innovative programs, which makes Smart on Crime an even better investment for the people of Oklahoma. Implementation of Smart of Crime requires funding and not statutory changes.

We know that untreated mental illness and substance abuse costs our state millions of dollars every year. It costs individuals and their families (divorce, suicide, teen pregnancy and unemployment); Oklahoma businesses (absenteeism, lost productivity, higher medical expenses); along with communities and state government services (increased demand on law enforcement and local emergency rooms, juvenile delinquency, in-school disruptions and dropouts, and increased engagement of the foster care system). The greatest expense, however, related to untreated mental and addictive disorders exists in our criminal justice system.

Out of 25,000 inmates, the Oklahoma Department of Corrections estimates that nearly 12,000 have a history of – or are currently exhibiting – symptoms of severe mental illness. There are 79% of female inmates and 46% of male inmates who have been diagnosed with a mental illness. Of these individuals, 57% were incarcerated for non-violent offenses. Out of all inmates in DOC custody, 33% were imprisoned for drug and alcohol offenses and at least 50% were incarcerated for a crime related to substance abuse.

Cost of Services for Oklahoma Department of Mental Health Services versus Oklahoma Department of Corrections Stay



Putting people with mental illness or addiction behind bars is not effective in either reducing crime or helping these individuals recover from their illness. The fact is that treatment works. Non-violent offenders would be better served, economically and medically, with treatment in their communities.

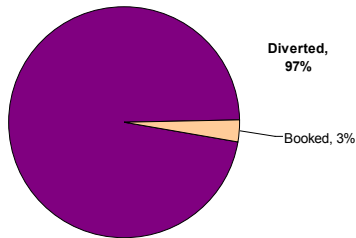
The average cost to maintain an inmate in prison is \$48 per day. For someone on a prison mental health unit, the cost jumps to approximately \$175 per day. Providing appropriate mental health services to someone in the community to keep them from entering the criminal justice system costs approximately \$25/day; and, providing appropriate substance abuse services to someone in the community to keep them from entering the criminal justice system costs less than \$15/day.

The ‘Smart on Crime’ package would include placing **non-violent offenders**, whose primary issue is an untreated mental or addictive disorder, in a closely monitored program such as drug court, mental health court, a day reporting program or a jail diversion program, or other proven programs that proactively address the problem and reduce incarceration.

The proposed cost for full implementation of the “Smart on Crime” package is estimated at \$95.6 million annually. By the third year of full implementation, it is expected that the cost of the program will be offset by cost savings, resulting in an annual net gain to the state every year after.

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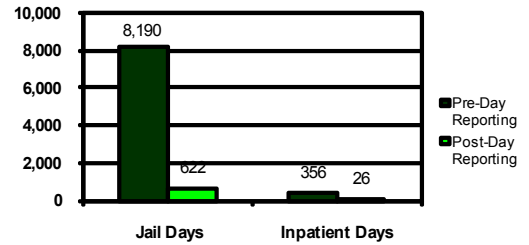
Tulsa's Jail Diversion Program



Family & Children's Services Community Outreach Psychiatric Emergency Service teams (COPES) partners with local law enforcement in a pre booking jail diversion program, which for a recent three year period has **diverted 97% of non-violent criminal offenders from incarceration**. From 2004 to 2006, the program had 4,751 contacts, with 4,623 of those diverted.

OK County Day Reporting

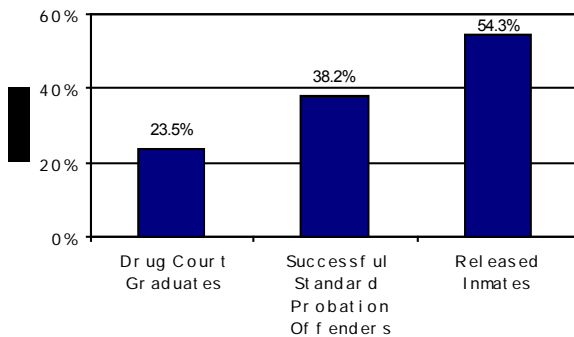
Jail & Inpatient Days Reduction



In partnership with Northcare Community Mental Health Center, day reporting is a post-booking program that keeps participants in the community while they are awaiting trial. **Jail days were decreased by 92.4% and inpatient days were reduced by 92.7%.**

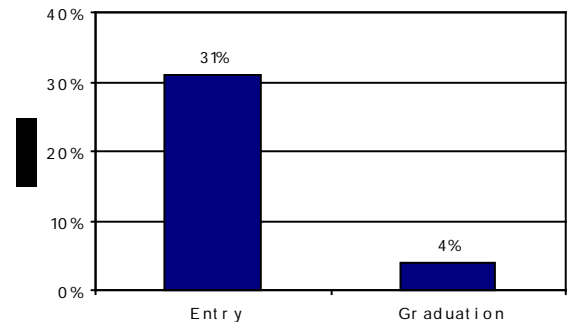
Drug Courts and Mental Health Courts

A comparison of Re-arrest Rates for Drug Court



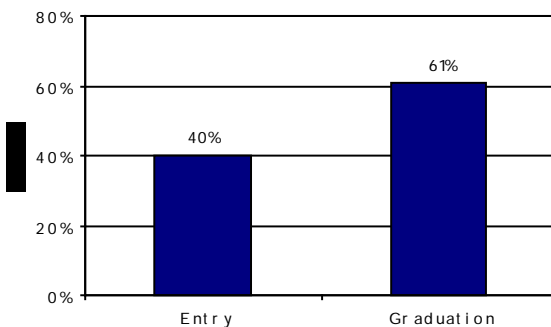
At the end of July 2009, there were 4,501 active participants in 41 adult drug and DUI courts in Oklahoma. **The annual estimated cost of DOC incarceration is \$19,000; the cost for drug court is \$85,000.** Another positive characteristic of drug court is its ability to reduce re-arrest. **The re-arrest rates for drug court graduates after four years are less than 1/2 of released inmates.**

Reduction in Unemployment for Drug Court



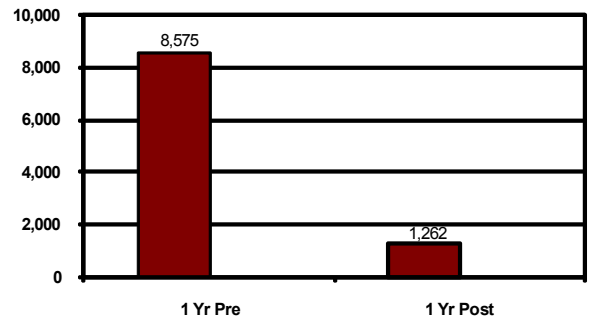
One of the aspects of Drug Court's success in Oklahoma is the support participants receive in seeking, gaining and maintaining employment. At entry, 31% of the participants were unemployed, compared to 4% at graduation. This is a **reduction in unemployment of 87.1%.**

Increase in Children Living With Their Parents for Drug Court



Another success of Drug Court is reuniting children with their parents. At entry, 40% of children of drug court participants were living with their parents compared to 61% at graduation. This is an **increase in children living with their parents of 52.5%.**

Jail Days Reduction for Mental Health Court



Mental health courts currently exist in 14 counties, including Oklahoma, Cleveland, Seminole, Hughes, Rogers, Craig, Wagoner, Cherokee, Tulsa, Pontotoc, Creek, Okfuskee, Comanche and Okmulgee counties. Effectiveness of courts can be demonstrated in the **reduction in the number of jail days, which was a 90% reduction in the past year.**

FY2012 "Smart on Crime" Budget Request

Diversions Points	Current	Goal	Statewide Comprehensive System Cost
Prevention/ Pre-booking	Oklahoma has trained 521 police officers and sheriff deputies in Crisis Intervention Training. These officers are trained in identifying mental illness, the de-escalation of crisis, and how to access mental health professionals. \$90,000	Police responders in every community trained in the identification of substance abuse and mental health symptoms and treatment and medication services for officers to divert individuals.	\$500,000
	Oklahoma currently has limited mental health emergency responders to help law enforcement when they encounter situations where individuals have mental illness. These responders assist officers with accessing treatment to divert arrests when appropriate. \$750,000	Psychiatric and substance abuse emergency responders throughout the state to respond to the scene when officers need assistance and/or emergency evaluations and treatment and medication services for officers to divert individuals.	\$5,000,000
	Oklahoma has a waiting list of over 600 people in need of residential substance abuse treatment, including methamphetamine, and serve as alternatives to incarceration. \$12,650,000	Substance abuse residential treatment services to meet the needs statewide for addiction, including programs specializing in methamphetamine.	\$14,000,000
	Oklahoma has Systems of Care Programs to intervene with youth and families with mental health and substance abuse issues who are at high risk of entering the criminal justice system in only half of the counties. \$4,000,000	Statewide Systems of Care Services for youth and families who are at-risk of entering the criminal justice system.	\$8,000,000
Initial Detention/ At Booking	Oklahoma currently has limited resources to identify persons being brought to or being held in jails that could be diverted into alternative treatment services. \$230,000	Mental health and substance abuse jail screening services for each county with treatment and medication programs to divert offenders.	\$5,250,000
Post-Booking/ Initial Hearing	Oklahoma County has a Day Reporting Program where individuals with mental illness report for treatment daily while waiting for a disposition of their case as an alternative to jail incarceration. This team makes recommendations to the court for alternatives to incarceration. \$80,000	Day Reporting programs designed to provide substance abuse and/or mental health treatment and evaluation for those waiting for disposition with recommendations for alternatives to incarceration.	\$2,000,000
	Oklahoma has limited treatment for individuals on probation/parole who are high risk for incarceration due to technical violations related to mental illness and/or methamphetamine and other substance abuse dependence. \$200,000	Treatment for individuals on probation/parole at-risk for re-incarceration due to mental illness and/or other substance abuse dependence.	\$6,000,000
At Disposition or Sentencing	Oklahoma is a model state for drug courts based on outcomes. \$21,000,000	The historic expansion of drug courts over the last five years is the model upon which this request is based, to replicate their success at all diversion points.	\$5,000,000
	Oklahoma has funding for only 13 mental health courts to divert eligible, non-violent offenders from incarceration. \$1,680,000	Expand Mental Health Courts statewide to divert eligible, non-violent offenders from incarceration.	\$9,240,000
	Oklahoma has only 8 juvenile drug courts to divert eligible youth from the criminal justice system. \$450,000 Oklahoma has limited resources in the OJA system for youth who have mental health and substance abuse issues. \$146,000	Expand Juvenile Drug Courts statewide to divert eligible youth from the criminal justice system. Provide substance abuse and mental health treatment for youth in the OJA system to prevent further involvement with the criminal justice system.	\$5,000,000 \$2,000,000
While Incarcerated	Oklahoma has three co-occurring therapists and limited substance abuse treatment within the Department of Corrections system; however it is insufficient to fund the staggering needs.	Meet the mental health and substance abuse needs of those incarcerated.	
Reintegration	Oklahoma has just 3 specialists located in the prison setting to assist with the development of discharge plans for those with mental health needs. \$120,000	Ten additional discharge specialists to individuals being discharged from DOC with linkage to treatment to help this population from recidivating.	\$2,000,000
	Oklahoma has only 4 Intensive Care teams to assist those with mental health needs who are leaving prisons and re-entering the community. These teams assist with linkage to housing, employment, treatment, and medications to keep individuals from recidivating. \$780,000	Intensive Care teams statewide to assist with re-entry from DOC incarceration for those with mental health, substance abuse, or co-occurring needs and housing, employment, treatment, and medications to keep this population from recidivating.	\$6,120,000
	Oklahoma does not have a Program of Assertive Community Treatment (PACT) which specializes in the forensic population. \$0	Two Forensic PACT Teams (OKC and Tulsa) designed specifically to provide services to those released from jails and prisons and at risk for incarceration.	\$2,000,000
	Oklahoma has few resources to assist with employment and housing for those reintegrating from and at high risk for involvement with the criminal justice system. \$1,375,000	Statewide assistance with housing and employment for those re-integrating from or at high risk for involvement with the criminal justice system.	\$6,000,000
	Oklahoma has limited services for individuals who began substance abuse treatment while incarcerated, but need these services to continue upon release, such as the Tulsa's Women in Recovery Program. \$629,000	Individuals at-risk for re-entering the criminal justice system without continued substance abuse treatment will receive treatment upon release from incarceration.	\$17,500,000
		TOTAL	95,610,000