

# *Michigan Prisoner Re-Entry for the Mentally Ill Offender: Overcoming the Challenges*

## **Presenter:**

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# National Overview of ReEntry

- The United States leads the world in incarceration rates.
  - European countries (1:1,000)
  - United States (1:143)
- Almost **7 million adults** are in some form of correctional supervision in the United States today.
  - This is a marked increase from 1.8 million in 1980.
- **97%** of individuals incarcerated in state prison will be released at some point.
- Over **600,000 individuals** are released from prison each year.
  - It is estimated that roughly 1/3 of released offenders are younger than 24 years of age.



# National Mental Health Rates

- In 1998 there were 283,000 prison and jail inmates with mental health problems
- In 2006, there were 1.25 million prison and jail inmates with mental health problems
- The rate of reported mental health disorders in the state prison population is five times greater (56.2%) than in the general adult population (11%)
- The nation's jails and prisons have become *de facto* the nation's largest psychiatric hospitals

# PRISONER REENTRY IN MICHIGAN

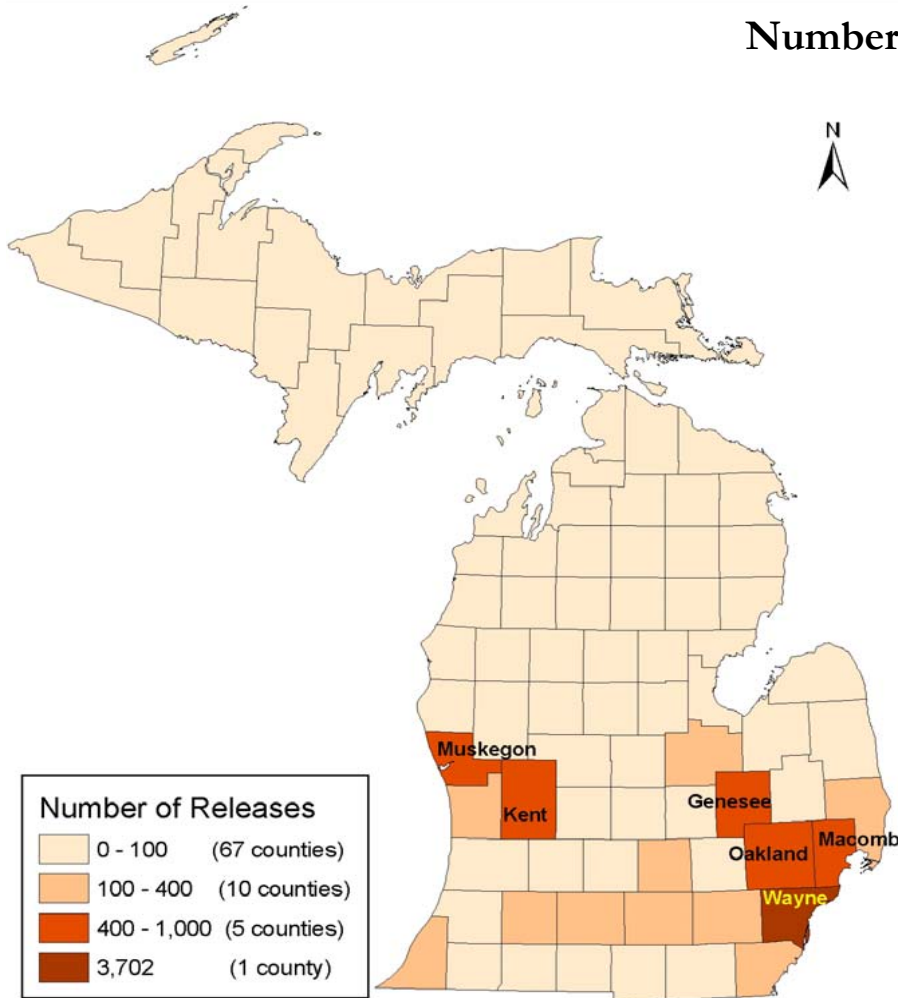
## Geographic Distribution of Released Prisoners

Number of Prisoners Released to **Parole by County** (2003)

Total releases in 2003\*: **13,045**

Total releases to parole in Michigan: **10,771** (shown on map)

- **63%** returned to the six counties labeled on the map
- **34%** (n=3,702) returned to Wayne County
- **4 to 8%** returned to Oakland, Kent, Genesee, Macomb and Muskegon Counties



Source: Michigan Department of Corrections

0 15 30 60 90 120 Miles

\*NOTE: The analysis includes only the first release from MDOC for each inmate in calendar year 2003.

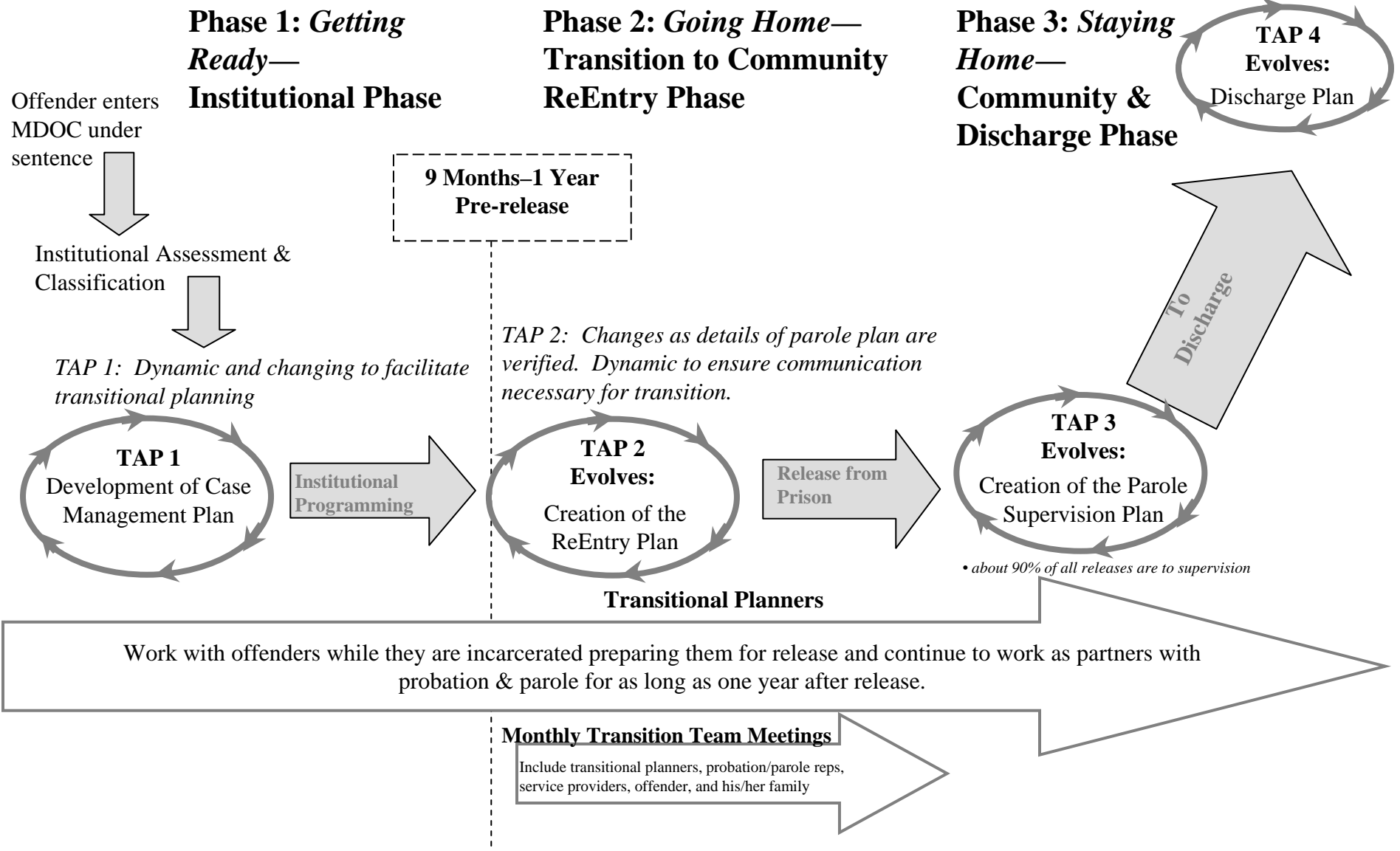
\*NOTE: The first release in 2003 may not be the first release for the commitment.



# MPRI Vision & Mission

- The **VISION** of the Michigan Prisoner ReEntry Initiative is that every inmate released from prison will have the tools needed to succeed in the community.
- The **MISSION** of the Michigan Prisoner ReEntry Initiative is to reduce crime by implementing a seamless plan of services and supervision developed with each offender—delivered through state and local collaboration—from the time of their entry to prison through their transition, reintegration, and aftercare in the community.

# MPRI Process



# Performance Measures

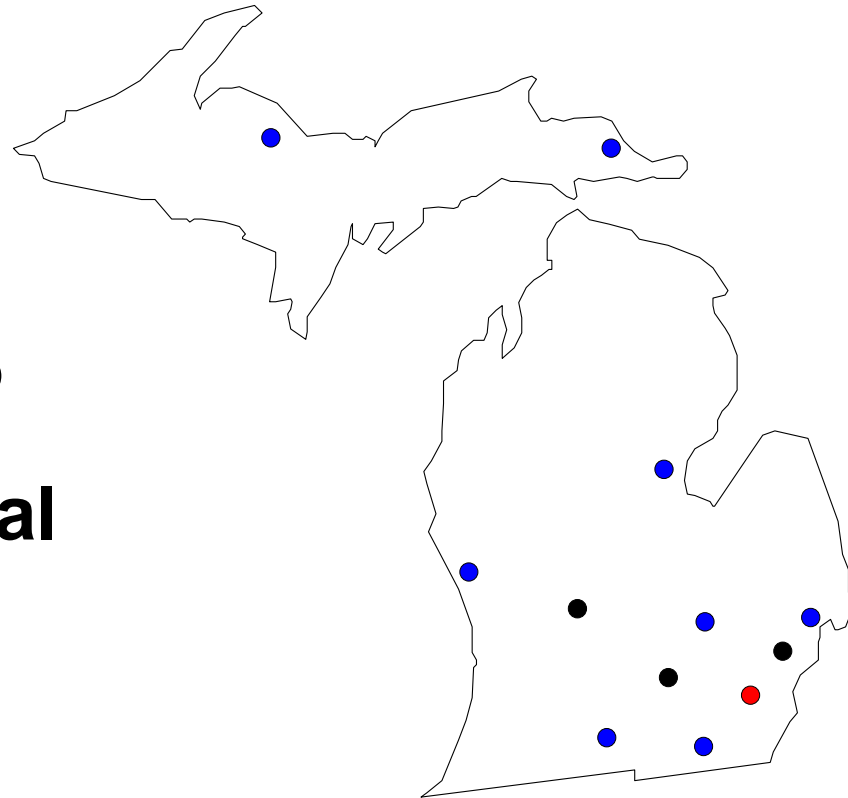
| Goal  | Strategy  | Success Measures   | Monitoring Measures   |
|---|---|--|---|
| <p><b>Reduce crime by improving prisoner re-entry into Michigan's communities</b></p> | <p><b>Implement Prisoner ReEntry Pilot Sites</b></p>        | <ul style="list-style-type: none"> <li>. Parolees Commit Fewer Crimes</li> <li>. Fewer Technical Violators Return to Prison               <ul style="list-style-type: none"> <li>. Time Before Return to Prison is Increased</li> </ul> </li> <li>. Prison Bed Run Out Date is Postpone</li> </ul> | <ul style="list-style-type: none"> <li>. Technical Violation Return Rate               <ul style="list-style-type: none"> <li>. PV New Sentence Rate</li> </ul> </li> <li>. Length of time, return to prison</li> <li>. Impact on run-out-of-beds date</li> </ul> |
|   | <p><b>Implement Intensive ReEntry Prison Units</b></p>      |  |   |
|   | <p><b>Implement Mentally III Inmate ReEntry Program</b></p> |  |   |



## **MPRI Mental Health ReEntry**

# Michigan Department of Community Health Corrections Mental Health Program

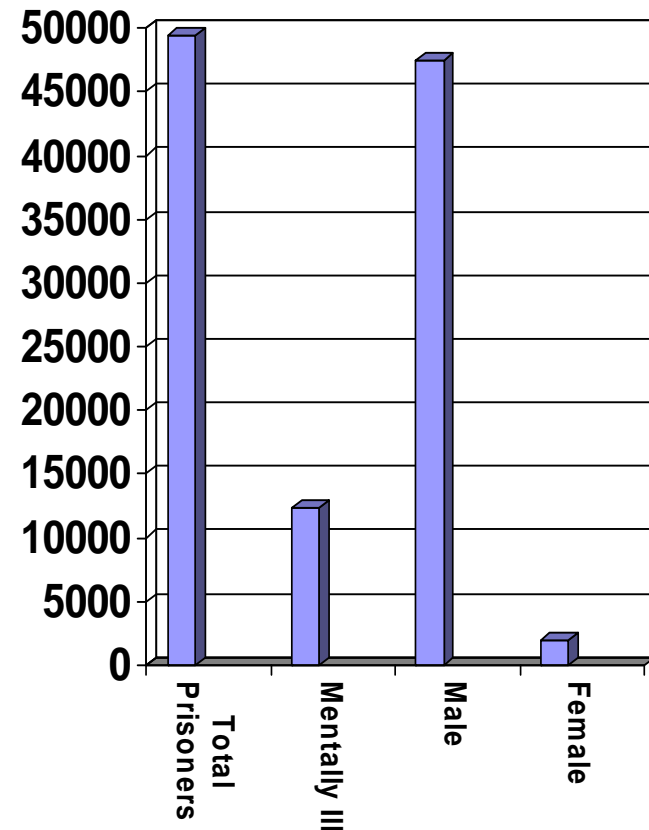
- In 1994, DOC entered into an agreement with DCH, for the CMHP to provide treatment services to prisoners statewide diagnosed with mental health disorders.
- Where are they?



- Represents multiple treatment types
- Represents OPT Only
- Represents Acute Care

# MPRI Mental Health ReEntry

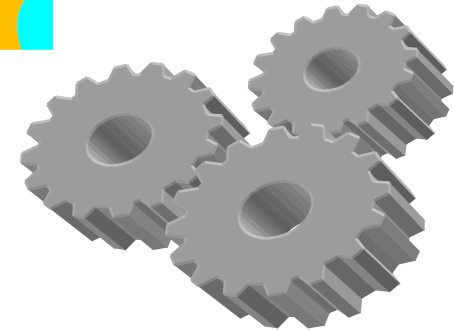
- As of July, 2006: 49,377\* prisoners in Michigan's Prisons.
- Approximately 96% (47,401) are male - 4% (1,976) are female.
- Approximately 25% (12,344) have a history of mental health issues.
- Diagnoses range from mild depression to serious and persistent mental illness.



\*Source of Data: July 2006 MPRI Legislative Report

# MPRI Mental Health ReEntry

- **25% (1/4<sup>th</sup>) of the prison population identified as having mental health disorders.**
- **MDOC, approached the legislature for funding to support a specialized ReEntry program targeting the mentally ill prisoner.**





# **MPRI Mental Health ReEntry Process**

- **The Parole Board reviews cases active with CMHP and designates them a D-47 (Deferred Parole).**
- **The offender is then moved to a specialized Mental Health ReEntry facility.**
- **A Needs Assessment is completed by the treatment team and a clinical packet is sent to LifeWays/PCS.**
- **LifeWays/PCS then coordinates with returning county to develop an appropriate, individualized Aftercare Plan that addresses mental health, substance abuse, medical issues, employment and housing needs.**
- **This Aftercare Plan is returned to the treatment team for review and approval and further negotiations occur, if necessary. At the same time, the potential placement is being investigated by a field officer.**

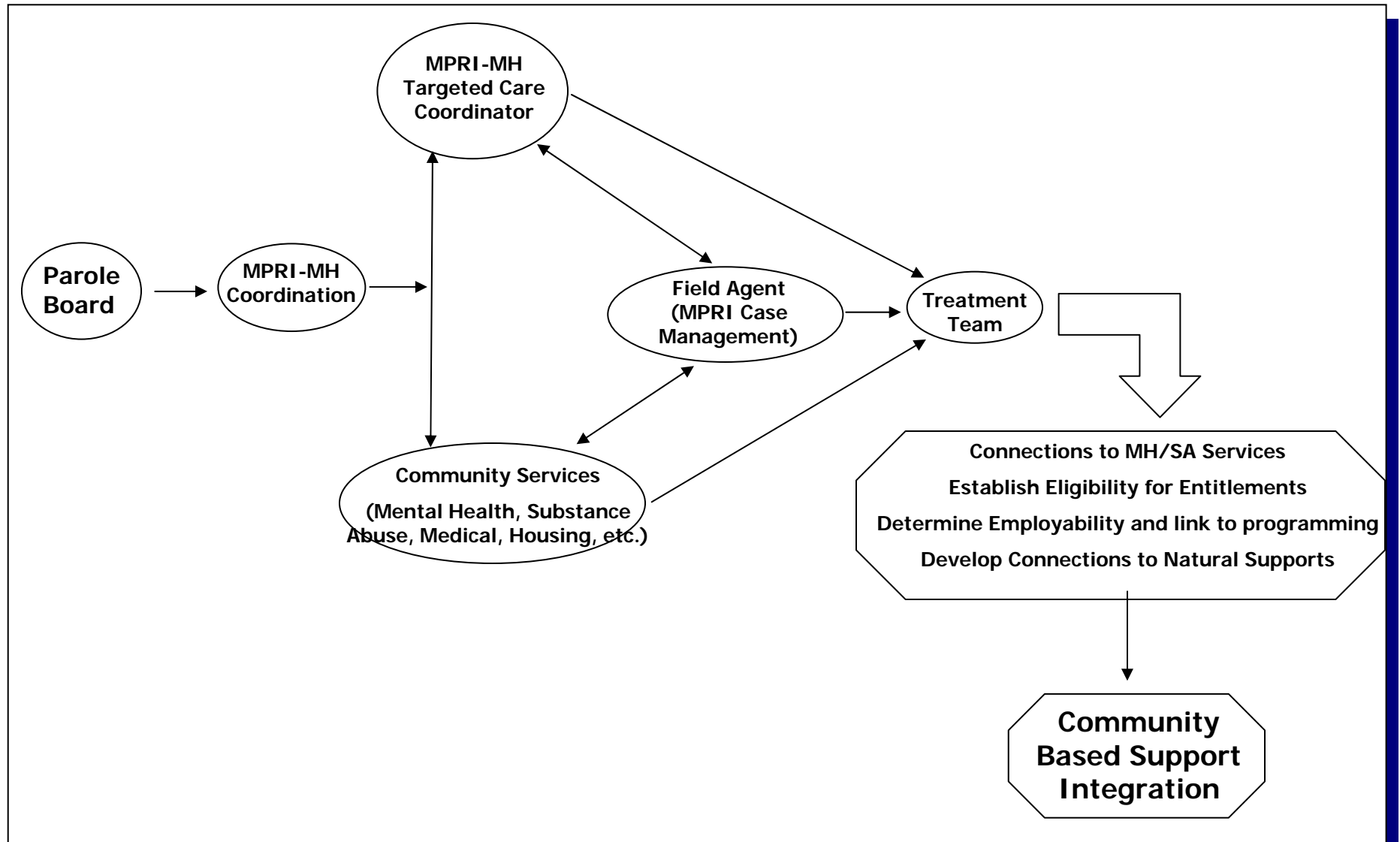


## **MPRI Mental Health ReEntry Process (Cont.)**

- **The Aftercare Plan is then forwarded to the Parole Board for review and a final determination regarding parole is made.**
- **If parole is granted, a release date is generally given within 30-40 days**
- **LifeWays/PCS provides door-to-door transport on the day of release and oversees and coordinates delivery of Aftercare Plan for 6-12 months through regional care coordination**
- **A funding stream follows the individual to assist in the payment of services, medications, housing and transportation.**
- **From program entry to release generally takes 150 days.**

# MPRI Mental Health Transition Continuum

## Prison to Community







# MPRI Mental Health ReEntry

## Additional Populations Served:

- **Max outs** – Individuals active with CMHP that have completed their full sentence and are released under no supervision. These are referred by the treatment teams within the facilities.
- **Community Referrals** – Individuals released without being referred to the project, that, once released, begin to demonstrate mental health issues that impact their success. These are generally referred by the parole officer.



# MPRI Mental Health ReEntry

## Things to Consider/ Ongoing Barriers:

- **Entitlements** – Implement effective plan to have benefits “in hand” at the time of release. Included in this is obtainment of vital records
- **Probating Process** – Multitude of dynamics related to those meeting criteria to be released on a court order for treatment (outpatient orders and direct admits to psychiatric settings)
- **Inconsistencies across the state related to CMH eligibility** – Each Community Mental Health Authority has it’s own intake process and eligibility criteria.
- **Max outs** – Difficult population with no built in sanctions. We have encouraged MDOC to parole whenever possible to give some additional oversight.
- **Medical Fragility** – Must have infrastructure in place to address medical issues
- **Co-Occurring Disorders** – Development of effective treatment to address mental health and substance abuse issues in the community.

# MPRI Mental Health ReEntry

## Program Statistics through 10/31/07

- **1,001 participants referred:**
  - 55 have been removed by the Parole Board prior to release
  - 615 have been released into the community
  - 331 awaiting release
- **Of the 615 that have been released into the community:**
  - 309 D-47's (10 have been returned to prison on a TRV)
  - 115 Max outs (1 has been returned to prison for a new crime)
  - 191 Community Referrals (16 have been returned to prison)
- **5% recidivism rate for all participants (recidivism=return to prison)**
- **195 Days – Average time in community without re-offending**
- **43 participants have successfully completed the program**
- **90% remain in stable housing**