

# KANSAS MENTAL HEALTH COALITION

.....*Speaking with one voice to meet the critical needs of people with mental illness*

## Mental Health and Criminal Justice Issues

**Position:** The Kansas Legislature must adopt a three-fold public policy objective that focuses on: (1) Mental health diversion programs to keep individuals with serious mental illnesses out of the criminal justice system and to connect them with mental health treatment resources; (2) Therapeutic care for offenders in the justice system who are living with mental illness; and (3) Effective discharge planning to ensure that individuals with serious mental illnesses are linked to community-based services upon release from correctional facilities.

**The Problem:** Significant numbers of individuals living with serious mental illness have encounters with law enforcement agencies and find themselves in the criminal justice system where the recognition and treatment of mental illness is not the primary mission. KDOC reports a 126 percent increase among inmates diagnosed with a mental illness.<sup>1</sup> This is exacerbated by reductions in community-based treatment and support. Increases in routine encounters with law enforcement lead to unnecessary arrests and detentions as well as occasional tragic outcomes for communities. There is a lack of continuity in mental health treatment between corrections facilities and community-based treatment venues. There is inconsistency state wide in the care of individuals with mental illnesses in county jails.

*Repeated detentions and hospitalizations for offenders who are released from the criminal justice system result in increased costs to state and local agencies.*

**Why this matters:** Repeated detentions and hospitalizations for offenders who are released from the criminal justice system result in increased costs to the Department of Corrections, local jails, Medicaid and the public mental health system. Persons with mental illness in county jails may have to wait weeks or months for admission to the Larned State Security Program (LSSP) for the purpose of being evaluated or for competency treatment. This continued waiting period is of significant concern to the courts, county jails, KDADS, and mental health advocates.

**The bottom line:** Only a limited number of Kansas communities have taken steps to reduce the criminalization of people living with mental illness through pre-arrest and post-arrest diversion programs. More action is needed to develop alternatives to incarceration, including support for Crisis Intervention Teams (CIT), establishing diversion programs by prosecutors, mental health specialty courts, and post-release programs designed to reduce recidivism.

**Need more information?** Drill deeper into this issue on the back of this page.

## The rest of the story about mental health and criminal justice issues

**The mental health system is part of our public safety infrastructure:** A successful policy that aims to reduce the number of incarcerations among people with mental illness includes many of the programs listed below. Introducing or expanding these programs will greatly benefit Kansas communities.

- **Crisis Intervention Teams.** CIT programs establish law enforcement protocols for handling crisis situations and provide training for law enforcement officers. Over 1,400 law enforcement and criminal justice professionals have been trained. CIT programs are in place in Ford, Johnson, Leavenworth, Lyon, Reno, Sedgwick, Shawnee, and Wyandotte counties. The legislature appropriated \$25,000 in 2013 for the Kansas Law Enforcement Training Center to provide CIT training to stimulate the expansion of these programs.
- **Crisis Stabilization Treatment Centers.** A network of crisis stabilization treatment centers is needed to provide a destination for persons in crisis short of being admitted to regional or state hospitals. These centers would offer resources to assist with persons in crisis who have contact with law enforcement.
- **Mental Health Diversion Programs.** Diversion programs, such as the one in Johnson County, are designed to assist persons with severe mental illness and to receive case management services and follow a specific treatment plan for a specified period. Charges for non-violent offenses are dismissed upon completion of the diversion.
- **Mental Health Courts.** Mental health courts seek to prevent incarceration by making connections to mental health resources, then developing and assuring adherence to a treatment plan. The City of Wichita has the state's only mental health court.
- **Community Based Competency Evaluations.** Funding is needed to increase the number of competency evaluations completed in the community or in local jails. This reduces the cost of hospital-based evaluations, the often long stays in county jails waiting for an available bed at Larned State Hospital, and the cost of transportation.
- **Expand Services at the State Security Hospital.** The State Security Hospital (Larned) evaluates, treats, and cares for individuals living with serious mental illnesses who are committed or ordered by courts of criminal jurisdiction, and/or transferred from the Department of Corrections. The Larned unit is full and Sheriffs continue to report delays from 60-90 days to get an inmate re-located there.
- **Improve Access to Treatment for Offenders.** Mental health pods in county jails such as those developed by Shawnee and Sedgwick counties provide more humane treatment of offenders living with serious mental illness. KDOC needs additional specialized beds for inmates with serious mental illness. See reference to KDOC annual report below.

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<sup>1</sup> KDOC's 2013 annual report (<http://www.doc.ks.gov/publications/kdoc-annual-reports/2013>) cites 38% of inmates have a mental illness while 26% meet the criteria for SMI (serious mental illness). KDOC lacks adequate specialized beds for treatment of mental illness. County jail data is similar although not well documented.