Smarter Solutions for Crime Reduction: The Illinois Criminal Justice Information Authority Strategic Planning Initiative

SMARTER SOLUTION SNAPSHOT: WINNEBAGO COUNTY THERAPEUTIC INTERVENTION PROGRAM

he Winnebago County Therapeutic Intervention Program (TIP), or mental health court, was developed to reduce the number of arrests of people with mental illness, increase access to mental health treatment, reduce the number of days of incarceration in the jail for people with mental illness, provide for safe and supervised community alternatives to incarceration, and reduce recidivism.

TIP provides a continuum of care with providing intensive and specialized training to law enforcement, deflecting people into treatment, and reducing the number of arrests. The TIP Court has established assessment and treatment planning for individuals with mental illness who are arrested and link them to treatment. The TIP Court attempts to reduce the number of days individuals with mental illness are incarcerated and this reduces the risk within the Winnebago County Jail.

The TIP Court targets individuals with serious mental illness who have committed misdemeanors or low level felonies. The defendant must have been diagnosed with a serious mental illness and that mental illness must have some causal connection with the commission of the crime. The defendant must also be willing to cooperate with the court and follow all rules of the program.

1. How did you know you had a problem?

In 2003 the CEO of our community outpatient mental health center came to the Chief Judge to express his concerns about how many people we had in the jail and the criminal justice system who had mental illnesses. Based on his concerns and discussions, we did a snapshot study of those people in our jail with a known serious mental illness. This snapshot from 2004 revealed that 14% of the Winnebago County Jail population had a serious mental illness. These individuals were noted to have cycled in and out of jail 8.4 times over a two-year period and spent a total of 231 days in jail. At an approximate cost of \$50.00 a day, the total cost was substantial at \$11,550.00 per person. Nationally, studies also showed a disproportionate number of persons with mental illness being incarcerated at around 16%.

2. What was the problem you needed to address?

As funding for community-based treatment programs has decreased since the late 1950s and early 1960, and most state-run psychiatric hospitals have closed, the jails have become our new mental health institutions. We needed to address the appropriate way to treat persons with serious mental illnesses in our jails by working with mental health treatment and the criminal justice system.

3. Who was the leader in addressing the problem? Has that changed through the life of the strategy?

The Chief Judge has been the driving force behind addressing this issue. Although the Chief Judge for the 17th Judicial Circuit has changed, the desire to address this problem has remained strong and consistent with the Chief Judge.

4. How did you determine your strategy (policy, program, or practice) for addressing the problem?

In 2003, Chief Judge Kathryn Zenoff convened a Mental Health Task Force to look at these issues. Approximately 80 community partners/members were a part of the task force. The task force met for 18 months prior to advent of the mental health court. We developed three committees: protocol, current issues and court. We identified the issues we were having, looked at other existing courts, determined our resources, developed a procedure for the court including process and legal issues, and investigated funding sources.

5. What are the core components of your strategy that make it effective?

One of the most important components was collaboration. Working through the entire process of developing the court with 80 community partners/members created community support.

6. Who are the key partners?

The key partners of our TIP are the judge, state's attorney, public defender/private attorney, probation officers, case managers, dual disorder therapist, trauma therapist, nurse, family psycho educational advocate, assessor and specialty courts administrator.

7. How much did it cost?

The treatment side of the Therapeutic Intervention Program costs \$545,000 annually. Winnebago County has a 1% criminal justice tax of which \$192,424 annually goes to pay Janet Wattles for their participation in the Therapeutic Intervention Program. Winnebago County is also a recipient of an ICJIA/BJA ARRA grant. Of the total cost of the program, \$166,667 annually pays for the dual disorder therapist, the trauma therapist, the nurse and the psychoeducational advocate for the Therapeutic Intervention Program. The money for the two probation officers and the time dedicated for the state's attorney, public defender, judge and specialty courts administrator is assumed by the county.

8. What type of reorganization of existing resources did you undertake?

The cases were already pending in the criminal justice system, so, upon selection for participation, they were reallocated to a specific court time following out-of-court pre-court staffings. Within probation, two officers were specifically assigned to the TIP Court participants and personnel from the community-based treatment provider were similarly reallocated and assigned to the participants. Since the inception of the TIP Court, the justice and mental health

team members have engaged in retreats and in service cross trainings and education sessions in order to facilitate court responses that promote recovery and hold participants accountable.

9. How did you garner public support for your strategy?

The community support truly began with the task force and the planning of the court.

10. In retrospect, what would you have done differently to plan for, develop, and implement your strategy?

After our program began, we noticed a significant need for dual disorder treatment— mental health and substance abuse. Both mental health and substance abuse providers were called to the table to discuss how this could be accomplished. A dual program with a substance abuse agency and mental health provider was created but it still left the patients with two treatment plans and two funding sources. The other piece that was missing was the trauma treatment. After receiving our expansion grant, we were able to have on staff persons to address all three issues, mental illness, substance abuse, and trauma, all at the same time, thereby addressing the whole person at once. We believe that this integrated approach must be addressed at the planning and development pieces as it is extremely important in the functioning of the court and getting the best outcomes for the individuals receiving treatment.

11. How do you know your strategy is working?

We keep statistics regarding the success of our program including new arrests, jail days and hospital days. For all participants, even those who have not successfully completed TIP Court, the statistics reflect a significant reduction in days spent in jail when compared with their pre-TIP Court incarceration history. We also keep track of referrals to our program and the outcomes of each referral. In addition, we track service referrals and the type of services the individual is receiving. But the most significant way we know our strategy is working is by seeing the lives that we change every day, the paths of recovery for our participants and personal accounts that they tell us about how their lives have improved.

For more information about the Therapeutic Intervention Program model, contact:

Michelle R. Rock Specialty Courts Administrator/Special Projects 17th Judicial Circuit Court 400 W. State Street, Suite 215 Rockford, IL 61101 (815) 319-4805 FAX (815) 963-2755

Email: MRock@WinCoIl.us

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