



OKLAHOMA Drug Courts

Adult drug court programs provide eligible, non-violent, felony offenders the opportunity to participate in a highly structure, court supervised treatment program in lieu of incarceration. Since the inception of the first program in 1995, Oklahoma's adult drug court programs have expanded to 73 of the 77 counties in the state.

Fact Sheet

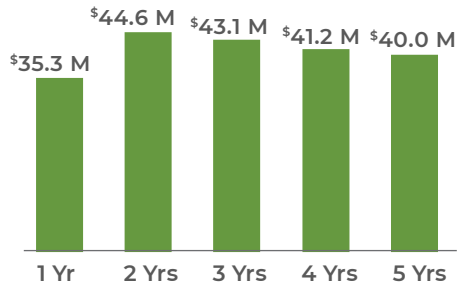
Current Program

Estimated cost of DOC incarceration per person: **\$19,000** (Yearly)

Estimated cost of Drug Court per person: **\$5,000** (Yearly)

Graduates Wages Earned

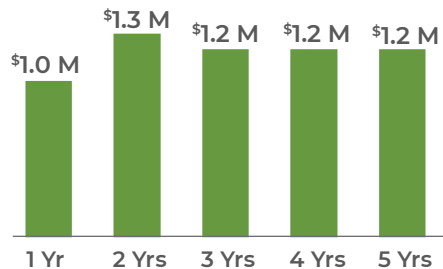
4,076 Graduates Post Admission from FY'10-FY'12



\$204 Million in Total Wages Earned

Taxes to be Paid

4,076 Graduates Post Admission from FY'10-FY'12



\$6.1 Million in Total Tax Revenue Expected

Incarceration rates among 8,545 Graduates 3 Years out since 2001:



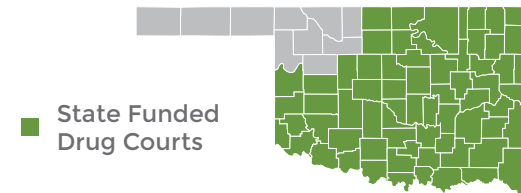
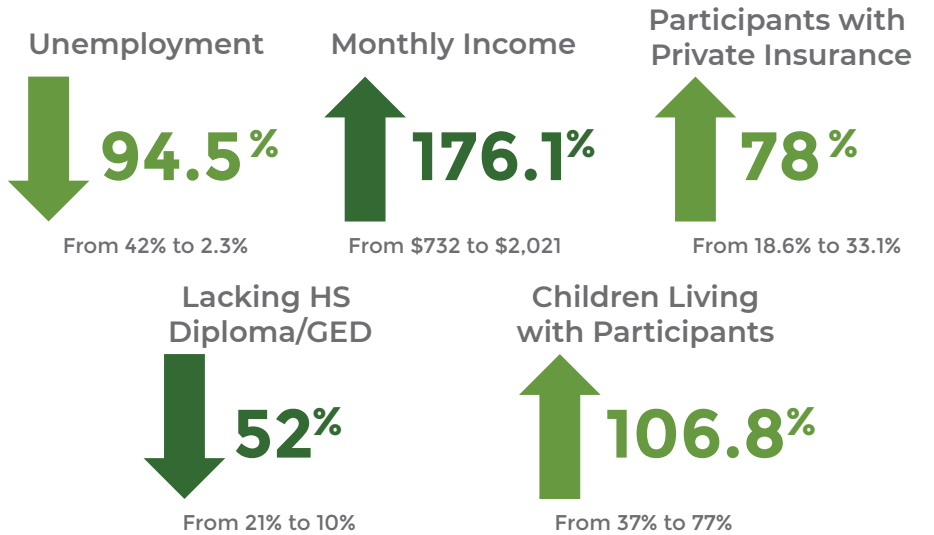
7.9%

Drug Court Graduates

23.4%

Released Inmates

Outcome Comparisons for FY'18-19 Drug Court Graduates Between Entry and Graduation.



- 58 Operational Drug Courts
 - 45 Adult
 - 7 Juvenile
 - 6 Family
- 67 Counties (Some courts serve multiple counties)





OKLAHOMA

Crisis Intervention Teams (CIT)

Fact Sheet

The Challenge

- Approximately 1 in 20 adult Oklahomans have a serious mental illness. (NSDUH)



- Approximately 1 in 5 adult Oklahomans have experienced mental health symptoms during the past year. (NSDUH 2017-2018)



- “Deinstitutionalization” of the mentally ill combined with lacking community supports lead mental health clients to:

- Self medicate with alcohol or illegal drug use



- Become homeless



- Decompensate



- All of these issues increase the chance of involvement with law enforcement.



The Solution

Crisis Intervention Teams (CIT) are a police-based first-responder program for those in mental health crisis. The program provides a 40-hour interactive law enforcement based training for aiding individuals in a mental health crisis. In addition to learning about symptoms, medications, side effects and other issues, officers are involved in role play scenarios to aid in understanding the consumer and family side of these interactions.



1,663

 CIT officers trained statewide (Within the Past 10 Years)

1,484

Police & Sheriff's Officers



58

Medical Complex Officers



95

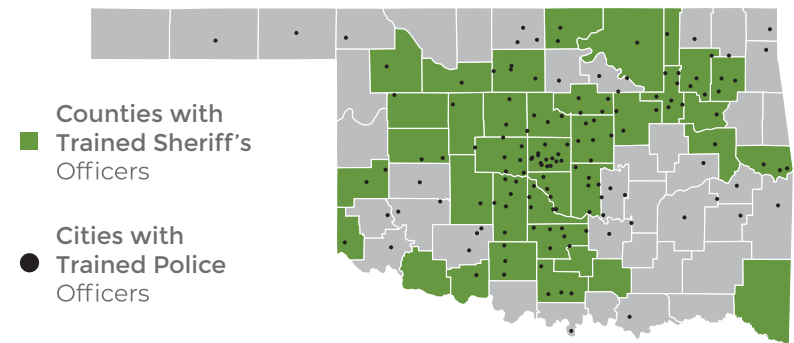
University Campus Police



26

Tribal Police

CRISIS INTERVENTION TEAMS (CIT) IN OKLAHOMA

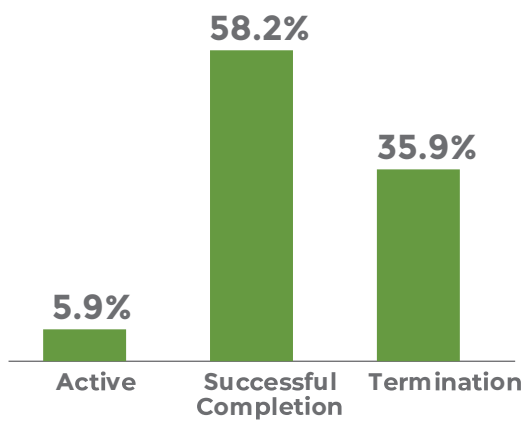




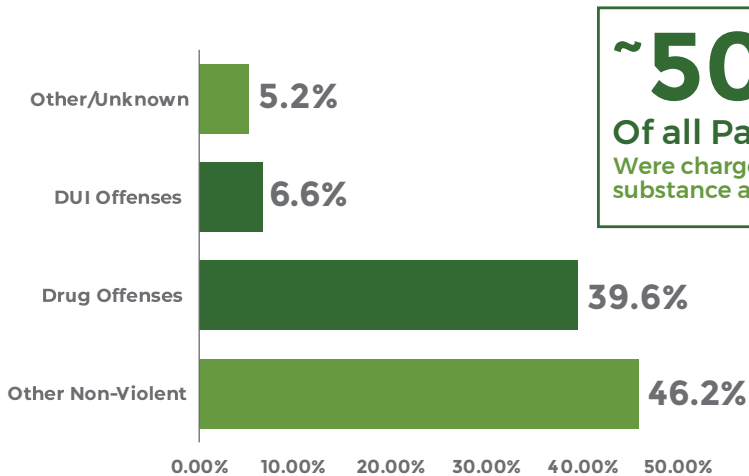
OKLAHOMA County Day Reporting Program

Fact Sheet

The **NorthCare Day Reporting Center** is a pre-trial program designed to serve seriously mentally ill persons and individuals with co-occurring mental health and addiction disorders in the custody of the Oklahoma County Sheriff and are awaiting sentencing for appropriate criminal offenses. Participants in this program live in the community rather than in jail and are required to participate in mental health treatment and make daily contacts with program supervision staff. The NorthCare Day Reporting Center is funded by the Oklahoma County Sheriff and ODMHSAS. The program has had 1,040 admissions since it opened in 2005.



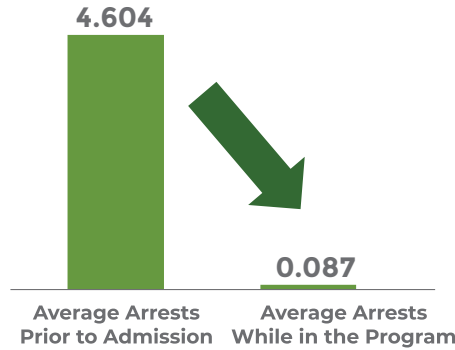
64.1%
Retention Rate
Among Day Reporting
program participants



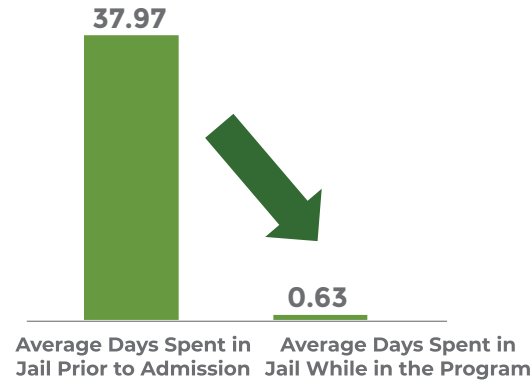
~50%
Of all Participants
Were charged with a
substance abuse offense

10 Local Officers

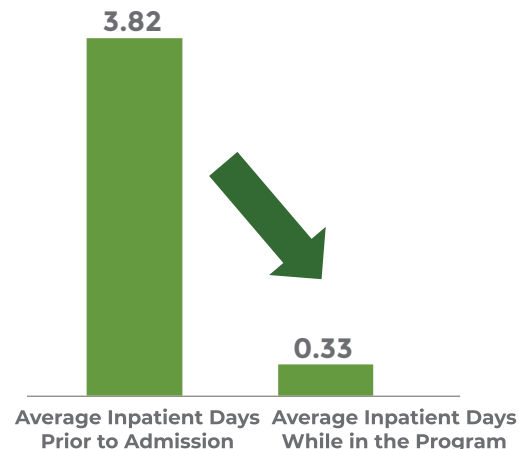
Savings from participants not awaiting sentencing in Jail (**\$8,111,203**) equates to adding about 10 more officers to local law enforcement agencies each year that the program has operated.



98.1%
Decrease in
Arrests



98.3%
Decrease in
Jail Days



91.4%
Decrease in
Inpatient Days





OKLAHOMA Mental Health Courts

Mental health court programs provide eligible offenders the opportunity to participate in a highly structure, court supervised treatment program in lieu of incarceration.

Fact Sheet

Justification

- Oklahoma consistently has one of the nations highest percentages of persons with mental illness (National Survey on Drug Use & Health)

- The Department of Corrections indicates that 55% (14,625) of all offenders have a mental health need.



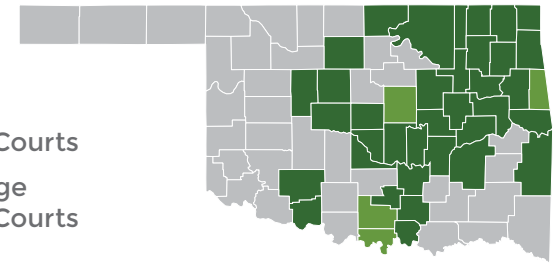
- 55% of inmates diagnosed with a mental illness were incarcerated for non-violent offenses



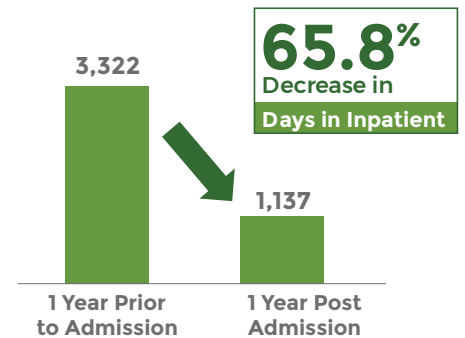
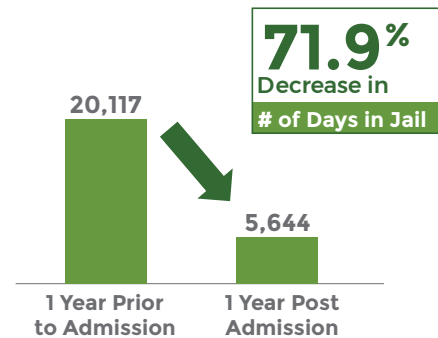
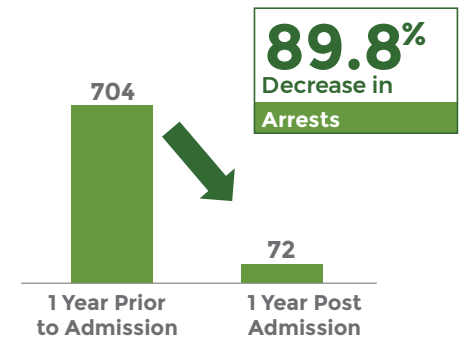
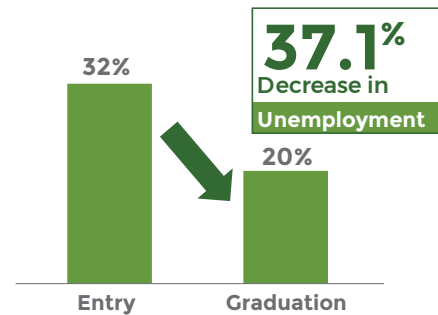
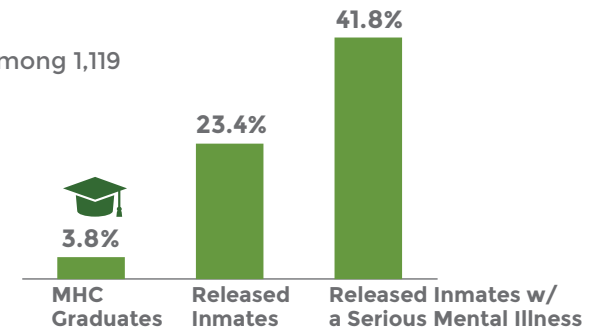
- The Oklahoma County Jail has as many as 400 persons with a mental illness at any one time.



- The Tulsa County Jail has 500-600 inmates that are on some form of psychotropic drug.



- Low incarceration rate among 1,119 graduates out 3 years.





OKLAHOMA

Misdemeanor Diversion

Fact Sheet

What is Misdemeanor Diversion?

Misdemeanor diversion partners criminal justice accountability with evidence-based substance abuse and mental health treatment services to decrease future involvement with the criminal justice system.

Misdemeanor Diversion has several models:

- **Pretrial Diversion** programs occur after arrest but prior to a formal charge being filed. Provides structure and services as the participant awaits further case processing. Successful participation may lead to the DA declining to file the charge.



- **Deferred Adjudication Treatment** programs provide diversion strategies, such as deferred prosecution agreements, as the legal mechanism for participation. The participant receives individualized treatment services provided by certified treatment agencies with or without the supervision of the court. Treatment providers report to a designated Court Liaison when a participant is non-compliant with services.



- **Misdemeanor Treatment Court** programs are highly structured programs. They include, but are not limited to, regular court appearances, case management, supervision and individualized treatment services by certified treatment agencies.



All diversion models provide legal incentives for participation such as dismissal of charges or avoidance of county jail sentences when successful.

Fundamental priorities for all models include early identification of eligible defendants; quick access to individualized evidence-based services; incentives for participation and data collection.

Does Oklahoma Currently Have Misdemeanor Diversion?

Yes, The Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) has developed misdemeanor diversion models that give individual jurisdictions the flexibility to divert defendants charged with misdemeanors into treatment services.

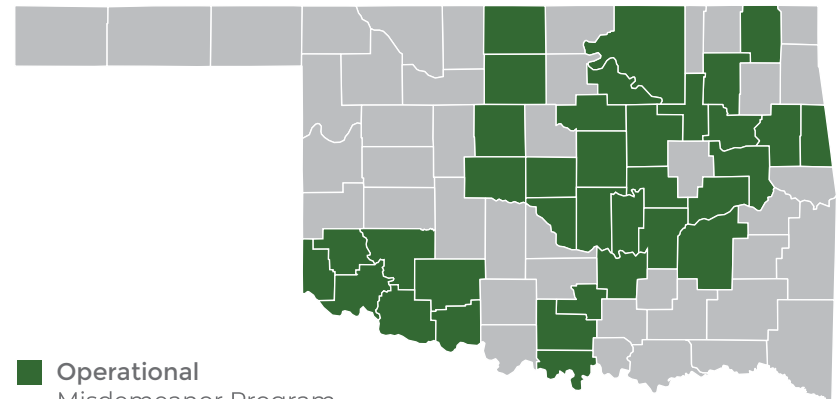
- **Misdemeanor Treatment Court** programs take approximately 12 months (or less) to complete with an annual participant cost of \$5,000.

\$5,000 (~12 Months)

- **Deferred Adjudication Treatment** programs take approximately 6-9 months to complete with an annual participant cost of \$4,100.

\$4,100 (6-9 Months)

Early Diversion in Oklahoma



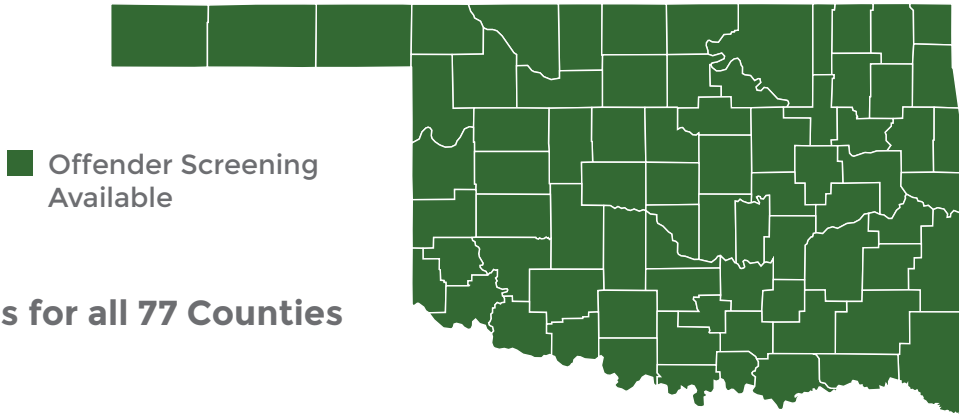
Misdemeanor diversion programs are operational in 35 counties.

Over 1,500 participants are receiving treatment and/or case management services to date.



OKLAHOMA Offender Screening

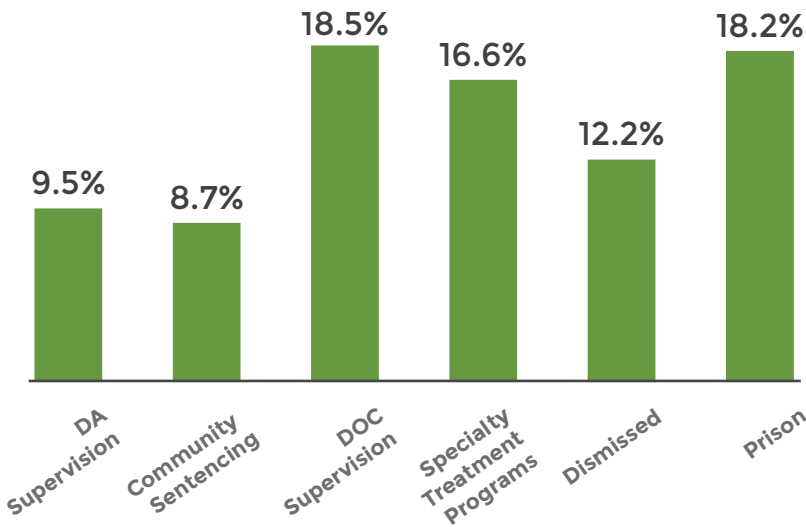
As authorized by 43A O.S. 3-704, Offender Screenings are conducted by The Oklahoma Department of Mental Health and Substances Abuse Services' certified treatment providers to determine felony offenders' risk to reoffend as well as identify substance use and mental health treatment needs. Using validated screening instruments, referral recommendations are made for prison-alternative sentences that best meet the offenders needs and increase the likelihood of successful prison diversion.



● Providers for all 77 Counties

● 66,510 Offenders Screened

Final Disposition



● 60,246 Final Dispositions Recorded

● 82% of individuals screened have received a case disposition other than prison.

Visit our website:
oklahoma.gov/odmhsas



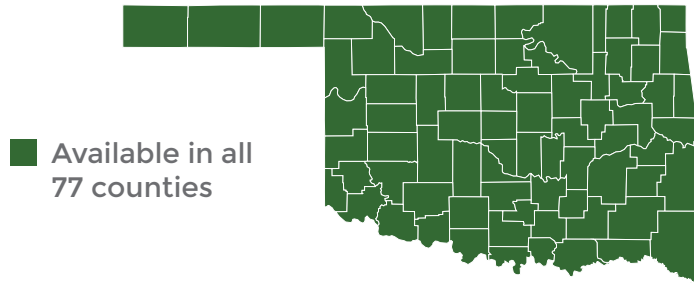
Search Keyword:
**Offender
Screening Page**



OKLAHOMA

Offender Screening

Fact Sheet



The Offender Screening Program began in 2013 with 37 counties and is now available in all 77 counties in Oklahoma with over 65,000 defendants screened as of February 2023.

65K
Defendants Screened
as of Feb. 2023

Offender Screenings have been shown to:



Expedite dockets



Reduce costs



Connect defendants with needed treatment

- Nationally supported, evidence-based sentencing strategy.
- Utilizes scientifically validated tools.
- The best long term results happen by matching defendants to the right level of supervision and services.
- Three things considered: criminogenic risk (likelihood of reoffending without intervention), substance abuse treatment need, and mental health treatment need.

The Process



Felony Arrest



Screening by ODMHSAS Approved Screener



Results Provided to Judge, District Attorney & Defense Attorney



Court Makes Final Decision

3 Key Points



Screenings are voluntary



Defendants will not be asked about the facts of their current case



There is no cost to the defendants for the screening

There will never be a recommendation for prison. Screenings should be interpreted as “if community-based supervision is an option, here are the available services that would result in the best outcome for the defendant and the public.”

Statewide Trends and Benefits

- Offender screening (OS) has reduced the average time an offender spends awaiting sentencing by 57 days, resulting in \$15.5 million dollars in jail cost savings. (This is based on time between arrest and final disposition in FY13, pre OS and FY16, post OS and on the number of offenders screened in FY16).
- OS provides an opportunity to match defendants to all local available services and diversions to reduce further criminal justice involvement
- Veterans who are screened are also referred for appropriate local veteran services.
- The appropriate use of the OS program after initial arrest should provide more appropriate service referral recommendations, thus leading to better overall diversion program outcomes.



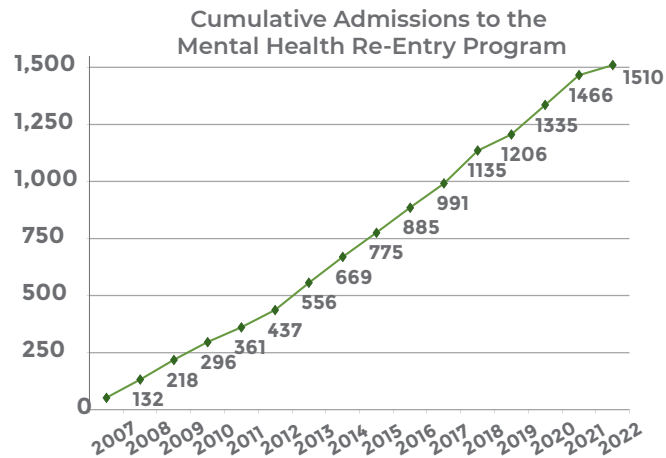
Fact Sheet

The Oklahoma Department of Mental Health & Substance Abuse Services (ODMHSAS) and the Oklahoma Department of Corrections (ODOC)

What is the Mental Health Re-Entry Program (MHRP)?

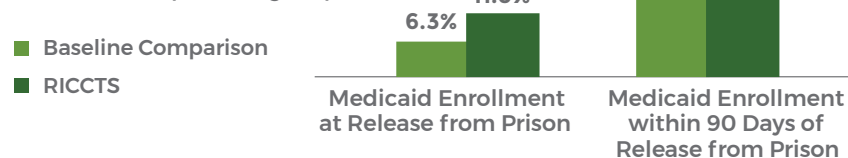
The ODOC and the ODMHSAS have worked to improve the transition of incarcerated offenders with a serious mental illness (SMI) into community-based mental health services.

Beginning April 2007, the newly hired “Integrated Services Discharge Managers” (ISDM), who are ODMHSAS employees, function at offices located in the mental health units of three prisons. The ISDM, as part of the ODOC treatment team, coordinate mental health services for discharge planning. Re-Entry Intensive Care Coordination Teams (RICCTS) provide treatment services in the community to persons discharged from prison. The ultimate goal of the MHRP is recovery.

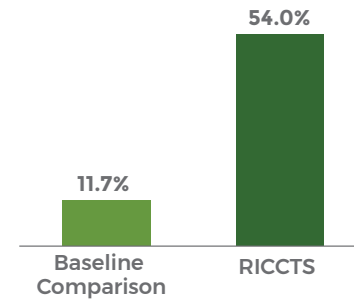


Offenders Enrolled in Medicaid

RICCT offenders were about 2 times more likely to be enrolled in Medicaid at prison release than the baseline comparison group.

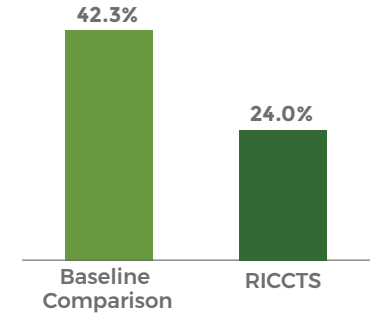


Rate of Engagement Offenders Receiving 4 Services Within 44 Days of Release from DOC



Service engagement rates for RICCT offenders were over 4 times more than the baseline comparison group.

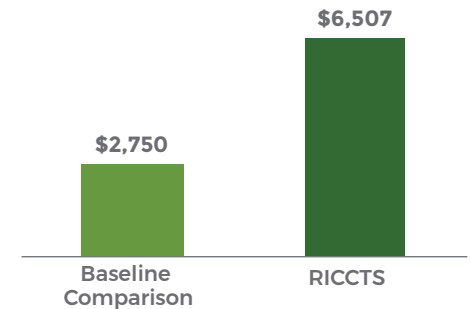
Offenders Returning to Prison Within 36 Months



Returns to prison for RICCT offenders were 43% lower than the baseline comparison group.

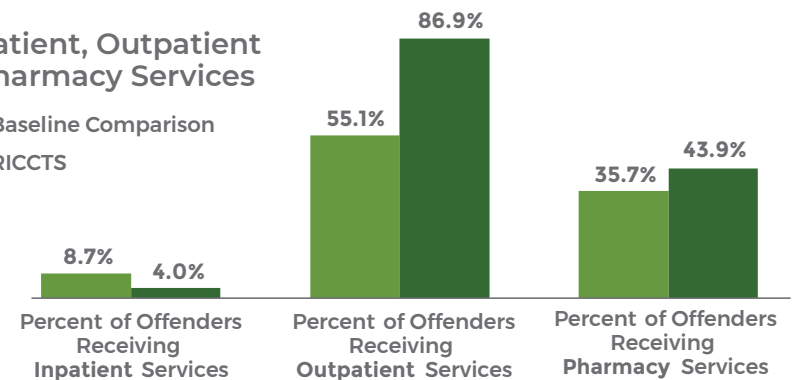
Average Annual Wage During 5 Yrs after Release from Prison

RICCT offenders had a higher annual income during 5 years after release, averaging nearly \$4,000 (or 137%) more than the baseline comparison group.



Inpatient, Outpatient & Pharmacy Services

■ Baseline Comparison
■ RICCTS



RICCTS offenders showed 54% less inpatient admissions than the baseline comparison group.

RICCT offenders received over 50% more outpatient services than the baseline comparison group.

