

NORTHCARE NETWORK

POLICY TITLE: Jail Diversion
POLICY EFFECTIVE DATE: June 26, 2002
BOARD ADOPTED: June 26, 2002
BOARD ADOPTED REVISIONS:
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June 2, 2010

REVIEWED/REVISED:
June 16, 2004
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POLICY

NorthCare Prepaid Inpatient Health Plan is responsible to monitor the effectiveness of the Community Mental Health Service Providers in fulfilling Section 207 of the Michigan Mental Health Code (MMHC)

Each community mental health service program shall provide services designed to divert persons with serious mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate. These services shall be consistent with policy established by the department.

The MDCH Contract Attachment P.6.8.4.1 FY09 (Attachment1) is adopted as the model for the CMHSPs to incorporate into local practice.

DEFINITIONS

Jail Diversion Process: Involves identification-of Community Mental Health treatment needs among the individuals alleged to have committed misdemeanors or certain, usually non-violent, felonies and who voluntarily agree to participate in the recommended CMH services as an alternative to incarceration. Depending on the point of contact with the justice system, diversion may occur pre -booking or post- booking into jail custody. Each CMHSP will offer a jail diversion screening within 24 to 48 hours of law enforcement or jail personnel referral or conduct an emergency assessment if the situation warrants.

Jail Diversion Screening: Should diversion status be granted by the criminal justice authority in accordance with established standards and local jail diversion agreements, a face to face screening by local CMHSP staff in combination with phone consultation from NorthCare Access will determine whether the individual meets both the need and eligibility requirements for CMH services. Phone consultation with NorthCare Access is not required in those circumstances where the individual is already opened for CMH services and therefore already determined to be eligible.

PROCEDURES

A. NorthCare Responsibilities:

1. NorthCare has a regional committee composed of the CMHSP Jail Liaisons who meet regularly to review regional jail data and to develop regional jail diversion training opportunities.
2. NorthCare is responsible for the monitoring of CMHSP activities to meet their responsibilities in this area.

B. CMHSP responsibilities for Jail Diversion in a written collaborative agreement

with law enforcement:

1. Identify liaison personnel to coordinate key interactions and maintain current agreements with local law enforcement agencies.
2. Liaison staff will participate in the NorthCare Jail Diversion Regional Committee to assure consistency across the region.
3. Participate in local community corrections board meetings and/or maintain regular contact with representatives of the criminal justice system to review jail diversion procedures and local concerns.
4. Maintain open communication regarding procedures and agreements while preserving standards of confidentiality.
5. Actively promote and offer cross-training activities necessary to assure that CMHSP staff and representatives of local criminal justice agencies have a common understanding of jail diversion procedures and how individuals who may be appropriate for jail diversion in lieu of incarceration are identified and diverted to services.
6. Maintain a database that tracks key demographic information and diversion efforts throughout the region including:
 - Unique consumer ID assigned by the CMHSP.
 - Date of Diversion
 - If pre-booking –the date of police contact
 - If post-booking—the date of court diversion
 - Nature of alleged offense
 - Diagnosis

Data are submitted to NorthCare on a quarterly basis and entered into a regional report required in the Master Contract with MDCH.

REFERENCES

- ✓ Michigan Mental Health Code (Act 258 of the Public Acts of 1974 as amended) Section 207.
- ✓ Medicaid Managed Specialty Supports and Services 1915 (b)/(c) Waiver Program, Adult Jail Diversion Policy Practice Guideline, Contract Attachment P.6.8.4.1 FY09