Courts, Corrections and Justice Committee

New Mexico’s County Jails
An Overview

Presented by Grace Philips, General Counsel

May 27, 2016
New Mexico Association of Counties

Data as of: May 2016
Arrest and Booking Rates
Per 100,000

Crime and Jail Rates per 100,000

The number of unconvicted people in jail has more than doubled since 1990.

What else has increased?

The use of cash bail.
Why Do We Care?

Increase in 2-Year Recidivism Low-Risk Defendants*

NM County Detention Data

Length of Stay is Increasing

- From 2003 to 2010 median length of stay increased 31% for inmates who spent their entire stay in an unsentenced status (from 112 days in 2003 to 147 days in 2010)
- 80 days median length of stay for misdemeanor arrestees
- 70 days median length of stay unsentenced for probation violators
- 114 days median length of stay unsentenced for those booked on warrants

Reasons for Incarceration

- 62% New Charge (20.1% DWI, 16.2% Property)
- 36% “Failure to Comply” (18.1% Probation Violation, 17.1% Warrants, 0.8% Parole)

Jails are De Facto Mental Health Hospitals

Number in NM County Jails on prescribed psychotropic medication:

   Estimate 35% (more than 2,557) on any given day

Total number of psychiatric beds in hospitals statewide:

   491 in eleven cities

NM Behavioral Health Institute average populations:

   80 individuals in the adult psychiatric unit (121 licensed and 96 operational)
   40 in the forensic unit (116 licensed 64 operational)

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1 Data taken from the following New Mexico Sentencing Commission Reports: New Mexico Prison Population Forecast: FY 2015-2024, June 2014; Length of Stay in Detention Facilities: A Profile of Seven New Mexico Counties, August 2012; Effect of Mental Health Diagnoses on Length of Stay in Two New Mexico Detention Facilities, April 2013; and Effect of Competency and Diagnostic Evaluation on Length of Stay in a Sample of New Mexico Detention Facilities, April 2013.

2 Annual cost to counties to hold probation violators supervised by NM Corrections Department Adult Probation Parole Division: $35 million.
Characteristics of Inmates with Serious Mental Illness

- 89% Pretrial
- 33% charged with Misdemeanor
- 25% charged with non-violent Felony
- 42% charged with violent Felony
- 62% competency raised

Mental Health Diagnosis Effects Length of Stay

- Receiving mental health services increases length of stay by 36 days
- Psychotic diagnosis increased length of stay by 121 days

Competency Effects Length of Stay

- 1.8% (91 individuals) had a mental health competency proceeding
- 27.4% found incompetent to stand trial
- Going through competency process increased length of stay by 278%
- 332 days (11 months) median length of stay for those found competent
- 537 days (18 months) median length of stay for those found incompetent

Bail System Effects Length of Stay

- 39% of county jail population is bondable but has not posted bond
  - 35% of Bernalillo bondable population has bond amount of less than $500
  - 11% of Bernalillo bondable population has bond amount of less than $100

Counties Hold and Process More Inmates than NMCD

June 30, 2013 Population Comparison

6,043 NMCD Confined Male Inmates   652 High NMCD Confined Female Inmates
7,030 County Male Population   1,405 County Female Population
House Joint Memorial 17 (2011)
Task Force Recommendations

System Improvements
Develop flexible funding streams and payment mechanisms to compensate providers for the critical services described.

Regional Crisis Triage Centers
Fund regional crisis triage sites to conduct mental health evaluations and provide up to 23 hours of diversion.

Respite Services
Develop and fund respite care locations throughout the state to serve as a non-clinical alternative to reduce need for hospitalization or incarceration.

Training
Establish peer training programs and training for family members, natural supports, teachers, students and first responders.

Call Centers
Establish a centralized, statewide call center with a single telephone number that is connected to local authorities and behavioral health agencies throughout the state.

Warm Lines
Expand warm line services stateside that are client-run or client-staffed to provide telephone-based peer support.

Community Crisis System Planning
Develop broad community coalitions in all communities or counties of the state to enhance and integrate local capacity to respond to mental health crises.

Peer Services
Use peer services whenever possible to provide and enhance services.

Criminal Laws
Review criminal statues to determine whether there are sensible changes that can be made which would reduce costly and often unnecessary, lengthy, and ineffective incarceration of individuals with mental illness.
Senate Joint Memorial 4 (2015)
Task Force Recommendations

- Identify the relevant inmate population and assess their risks and needs.
- Inventory available community resources and gaps in needed resources.
- Provide for release from detention supported by wrap around services.
- Provide for release from detention with services that include housing.
- Create secure clinical facilities to serve “gap” population (as defined)
- Educate stakeholders regarding benefits of supportive treatment for individuals living with serious mental illness and available tools for release.

House Joint Memorial 17 Task Force
2011 Guiding Principles

- Peer and peer driven services are critical to any effective and humane statewide mental health system.
- Services should employ the least restrictive environment and maximize client choice.
- A crisis system must serve both individuals with mental illness who have insight into their condition and those who do not.
- Mental health services must be trauma informed, gender specific, age appropriate, culturally sensitive, language appropriate, and accessible to anyone regardless of literacy level.
- These recommendations are for services that would be available to all persons with serious mental illness, their families, and their natural supports regardless of age, socio-economic or insured status.