

*turning knowledge into practice*

# Jail Diversion in Bexar County, Texas: A Cost Study

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*November 6, 2007*



*RTI International is a trade name of Research Triangle Institute*

# Acknowledgements

- Work funded by Center for Health Care Services, Bexar County, Texas
  - Underwritten by AstraZeneca International
- RTI: Arnie Aldridge, Nahama Broner, and Jesse Hinde
- National Center for Behavioral Health Solutions
- Center for Health Care Services
  - Overseen by
    - Leon Evans
  - Work closely with
    - Gilbert Gonzales
    - Amy Guthrie
    - Scott Trapp
- Many individuals and agencies in Bexar County and the State of Texas

# Acknowledgements (cont'd!)

- Bexar County Adult Detention Center
- Bexar County Adult Probation
- Bexar County Clerk
- Bexar County Court System
- Bexar County District Attorney's Office
- Bexar County Information Services
- Bexar County Pre-trial Services
- Bexar County Sheriff's Office
- CHCS
- City of San Antonio San Antonio State Hospital
- Drs. Alec Miller, Laurel Copeland, and John Zeber, and Ms. Natalie Maples
- Magistrate's Community Court
- National Association for the Mentally Ill (NAMI)
- San Antonio Police Department
- Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI)
- Texas Department of Criminal Justice
- Texas Health & Human Services Commission
- University Health System
- University of Texas Health Science Center at San Antonio (UTHSCSA)

# Structure

- Background
- Two Research Questions
- Methods and Results for each
- Conclusions
- Next Steps



# Background: Jail Diversion

- Jail Diversion in Bexar County
  - Started to build the program in 2001
  - Began in earnest in 2003
  - 2005 incorporated 24/7 medical clearance
  - Now has both pre- and post-booking
    - Two types of post-booking
- For more
  - Speak with Gilbert, Leon Evans, or Aaron Diaz!

# Background: Jail Diversion

- Two types of diversion
  - Pre-booking
  - Post-booking
- Many flavors within each broad type
- Bexar County is unusual
- Has both types and two flavors of post-booking
  - Bond (early) and docket (late)

# Background: Jail Diversion

- Estimates of impact of jail diversion vary
  - Some improvements in outcomes detected
  - Depend on the specific type of diversion implemented
- Relatively few published cost analyses
  - Cowell et al. (2004)
  - Critical considerations are what the diverted are diverted from and what they are diverted to

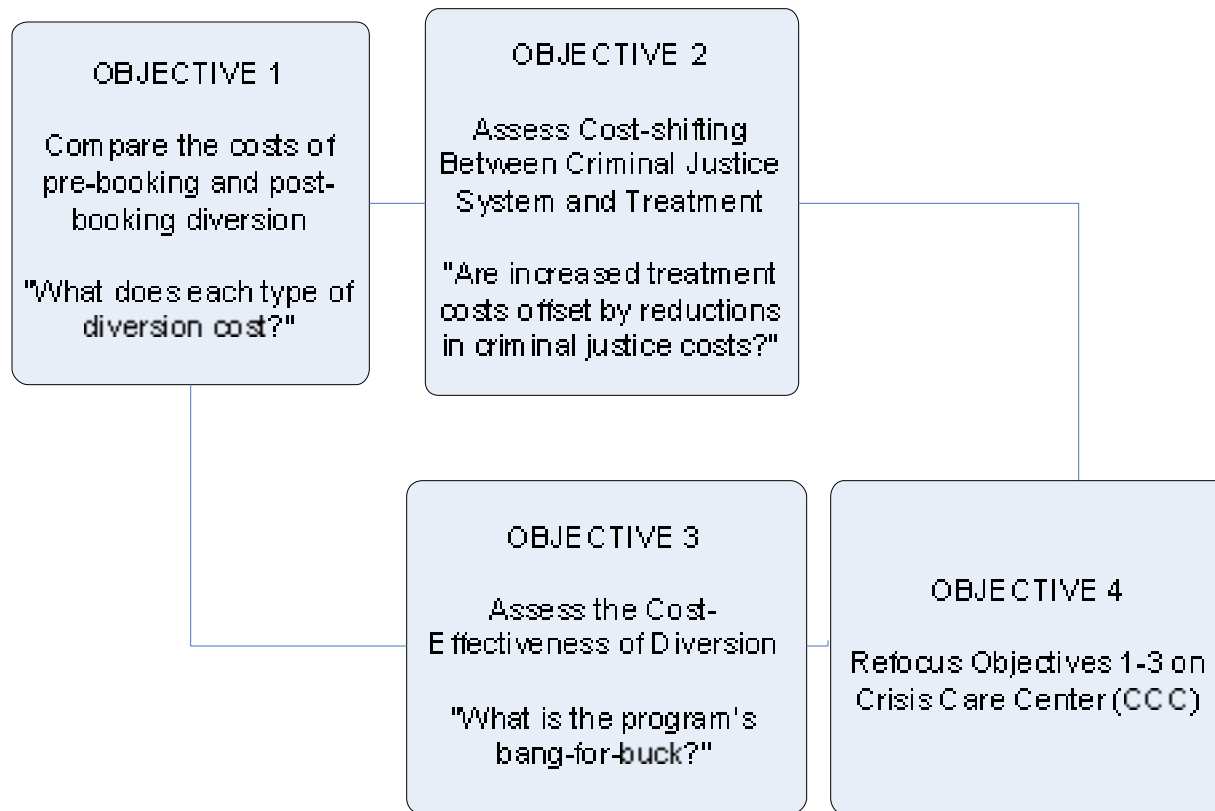
# Background: Project

- In Fall of 2005 NCBHS released RFP
  - 18 month study to conduct cost-outcome study of Bexar County Jail Diversion program
  - Competitive bid
  - Awarded to RTI International
- Began work in February 2006



# Study Objectives

- 4 Inter-connected Objectives

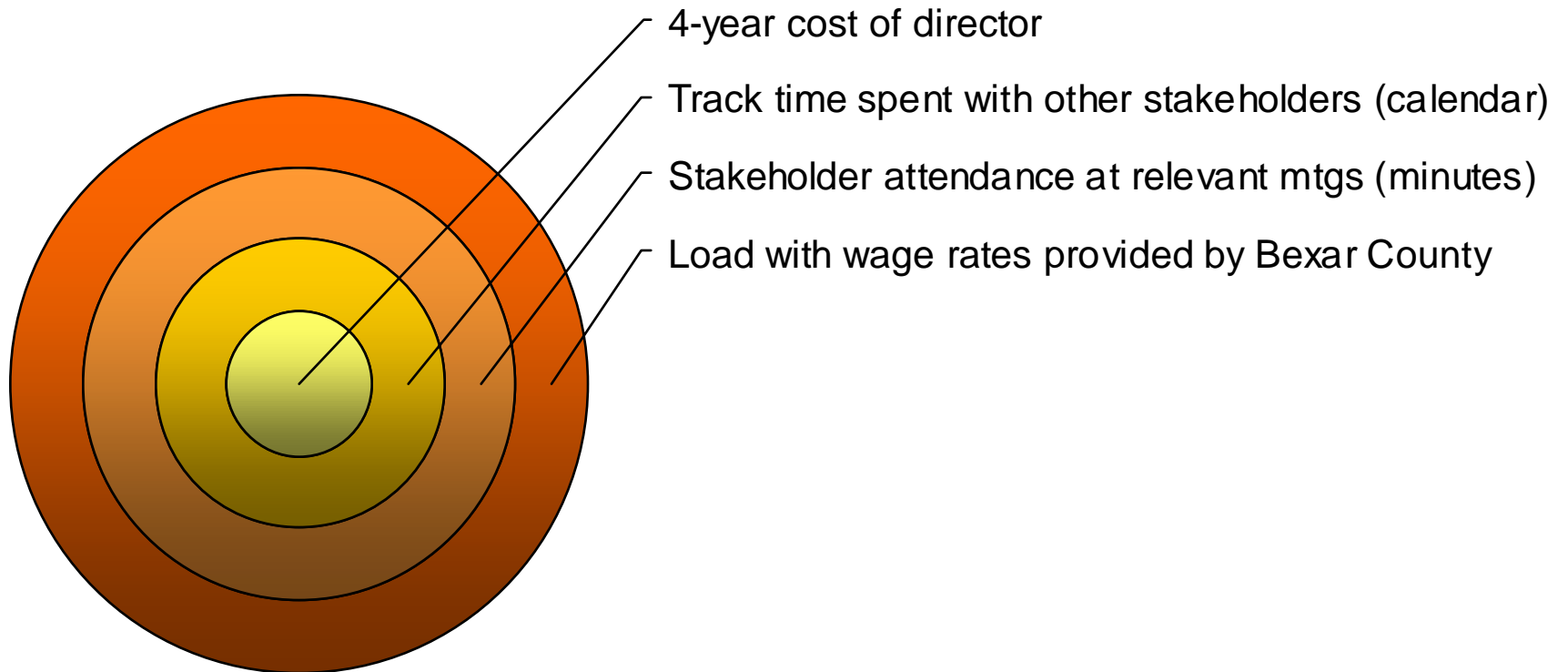


# Research Questions

- Objectives 1 and 2
  - 1a. Estimate 'Start up' costs
  - 1b. What does it typically cost to divert someone?
  - 2. How do costs shift between treatment and criminal justice agencies?
- Perspective = Bexar County and City of San Antonio

# Methods: Research Question 1a

- Estimate the value of the resources needed to start the program

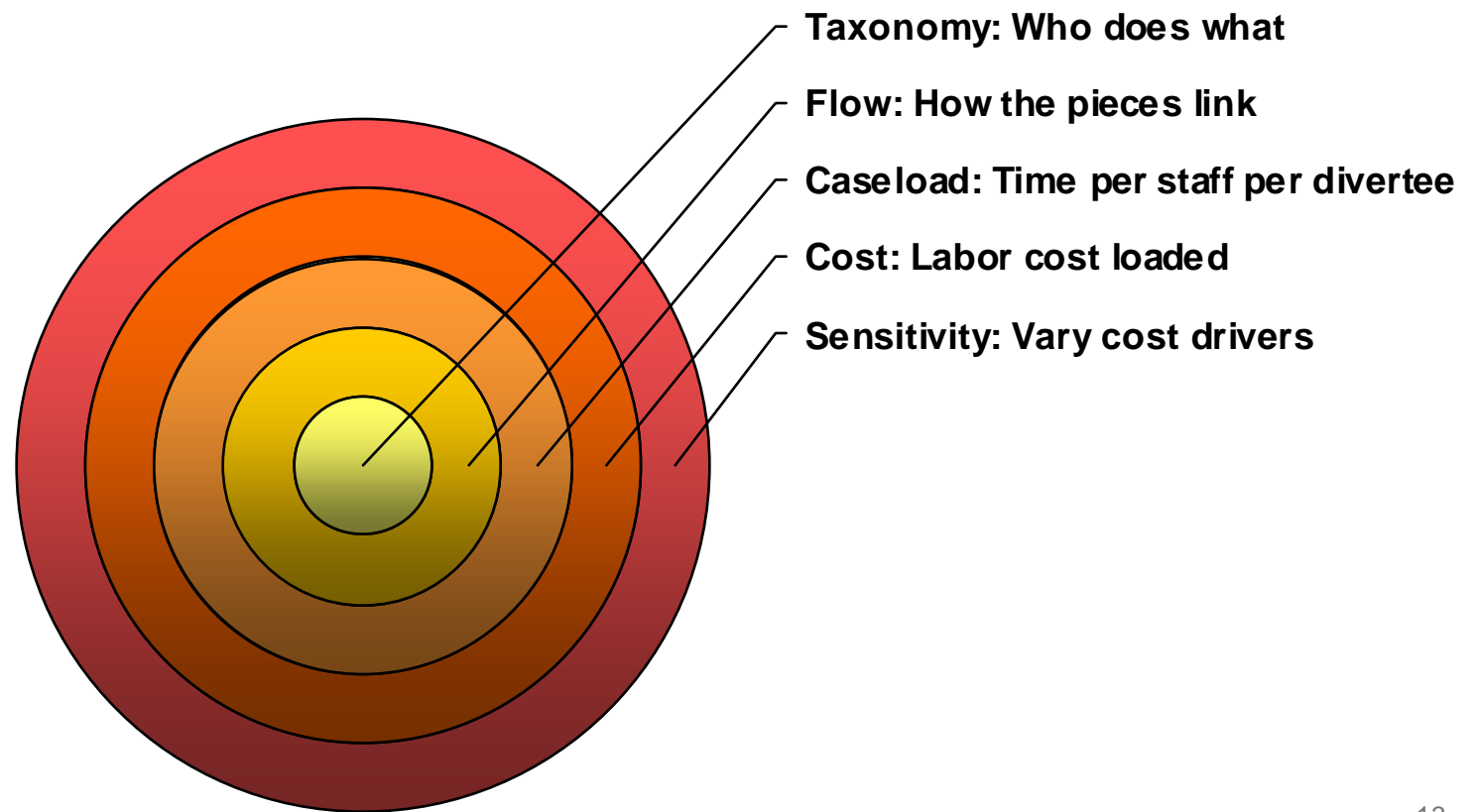


# Results: Research Question 1a

- Total Start up cost over 4 years: \$556,683.69 (\$139,159.67/year)
  - Mr. Gonzales - 77% of the cost
  - 23% of the cost from meetings with other stakeholders
    - 2% in individual or small group meetings
    - 21% in larger group and committee meetings
- Mr. Gonzales spent 515.92 hours in meetings
  - 136.63 large meeting hours, averaging \$853.93/hour
  - 374.8 small meeting hours, averaging \$35.03/hour



# Methods: Research Question 1b



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# Methods: Research Question 1

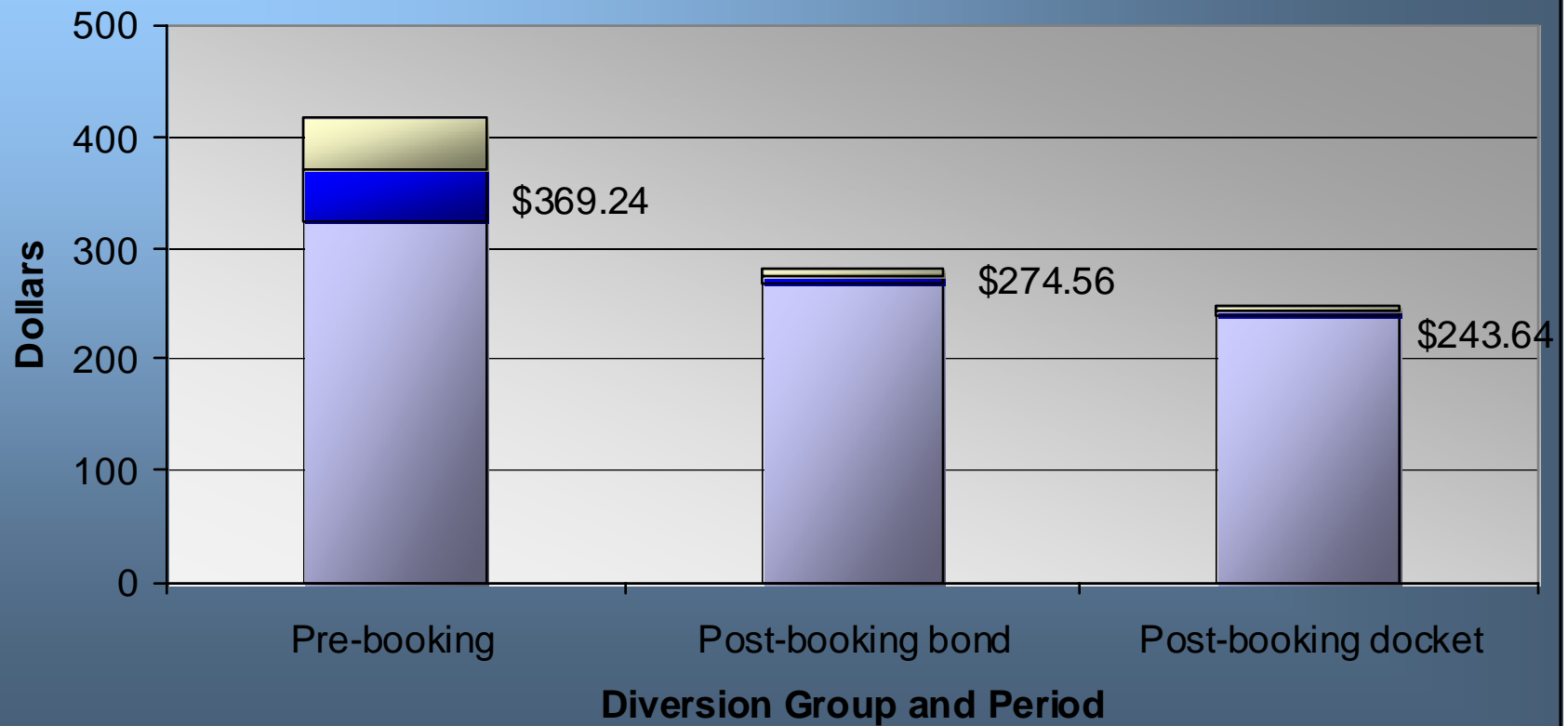
- Time per staff person per divertee is the critical component
  - Semi-structured interviews with stake-holders
- Sensitivity analyses important
  - A number of assumptions made
  - Results presented as low, medium, high

# Methods: Research Question 1

- Includes only those costs associated with diversion
  - Narrowly defined cost
- Means the following examples would be excluded
  1. Pre-booking case in need of major medical clearance
    - Officer time spent in ER accompanying client
    - EMS
  2. Post-booking docket/bond
    - Jail resources used to incarcerate individual
    - Court appearances not designed to assess for diversion

# Results

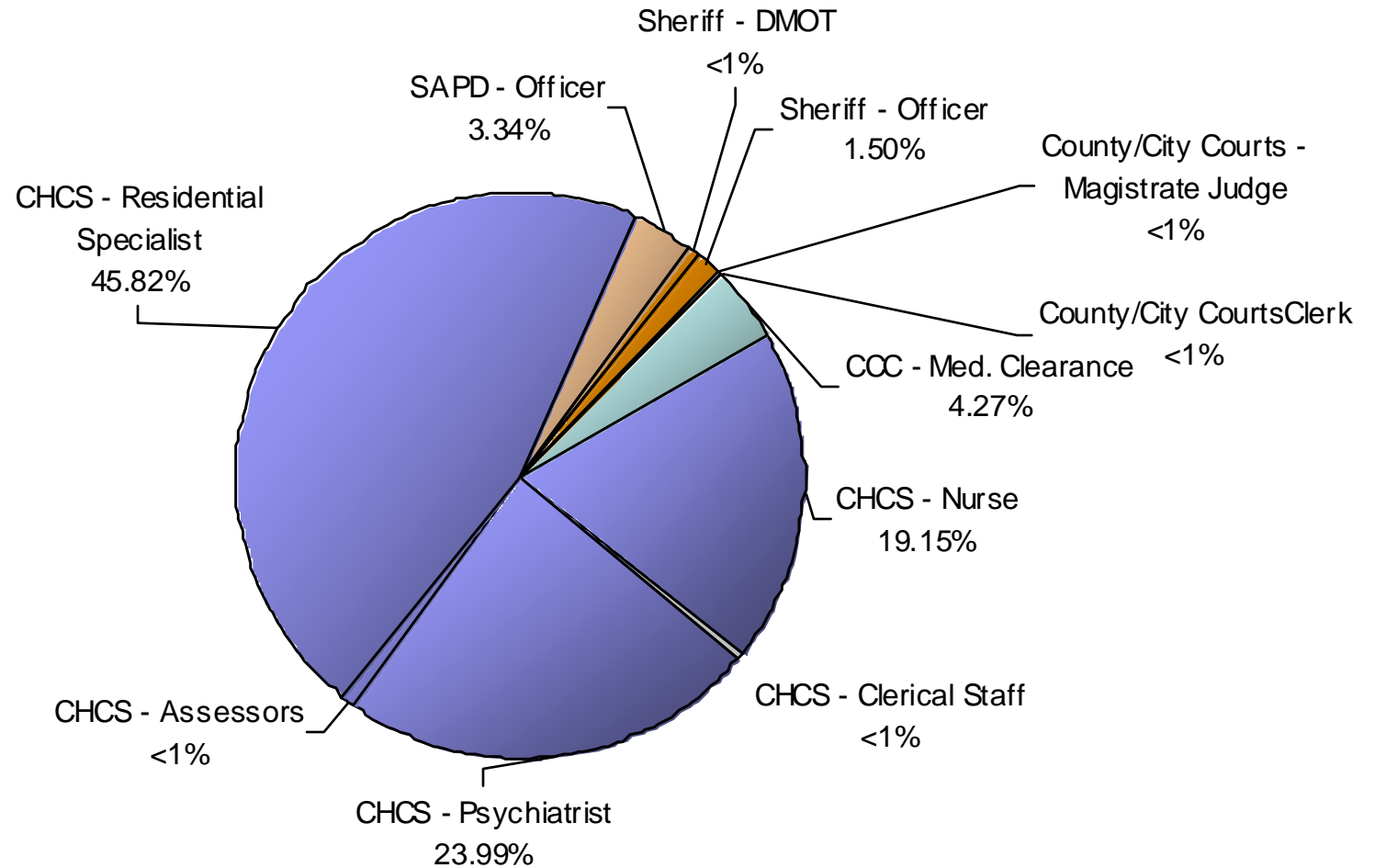
## Typical Per Person Diversion Costs



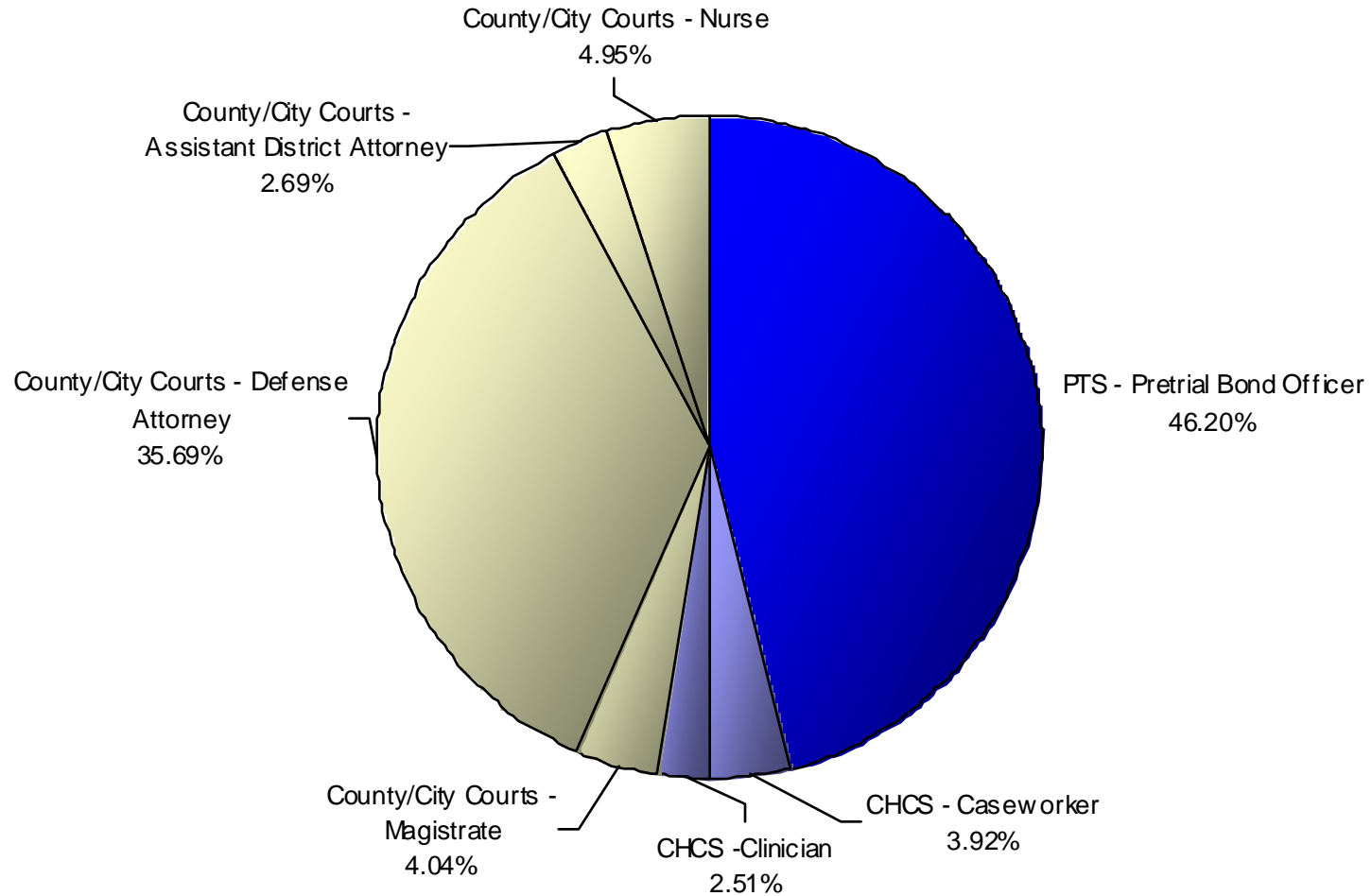
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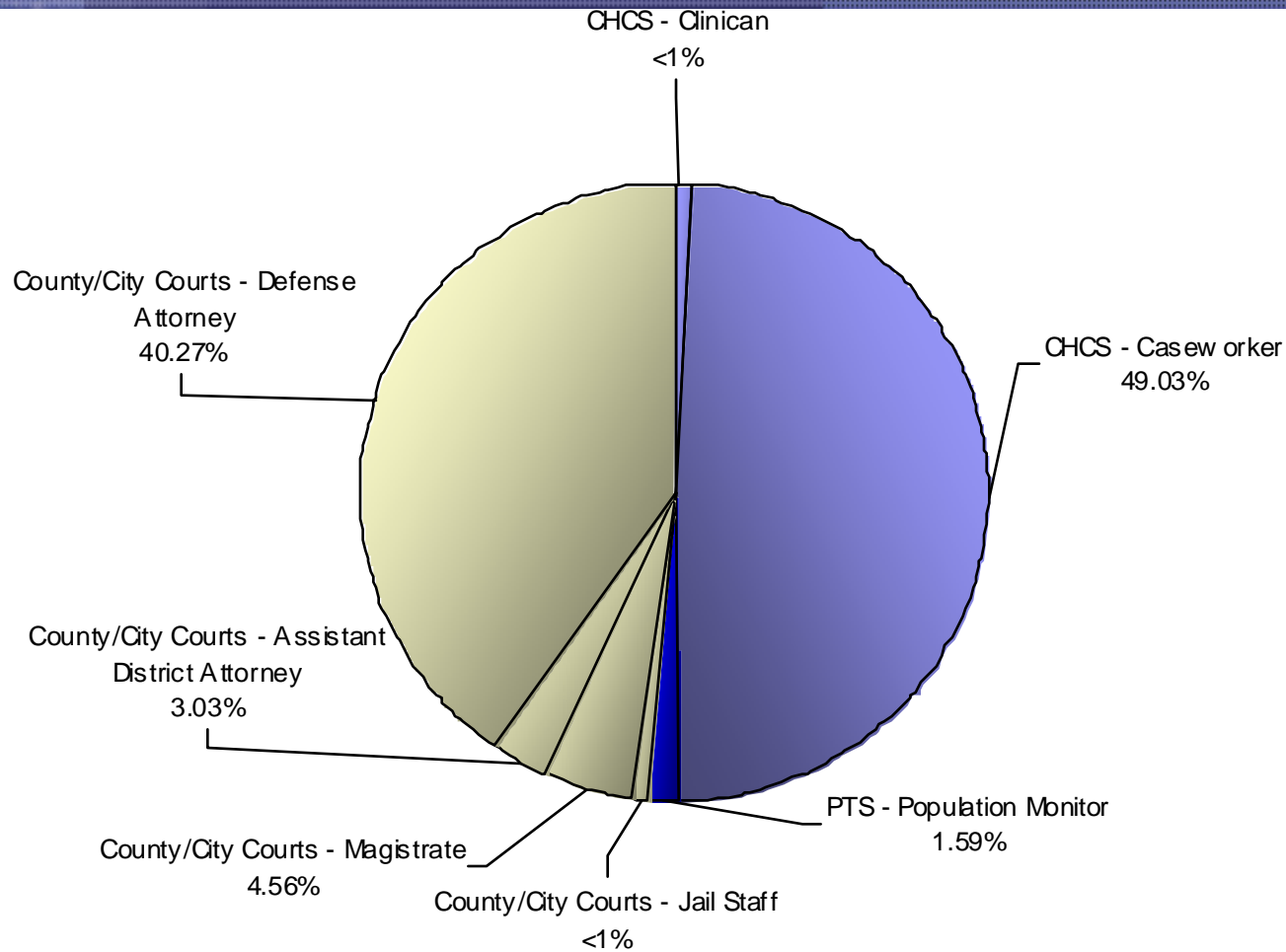
# Pre-booking: Who Pays What Share



# Post-booking Bond: Who Pays What Share



# Post-booking Docket: Who Pays What Share



# Conclusion – Research Question 1

- Pre-booking costs are highest at \$369.24 (medium)
- Both types of post-booking lower, at \$274.56 and \$243.64
- Important (and deliberate) exclusions
  - E.g. Jail time for the post-booking



# Conclusion – Research Question 1

- 90 cents of the pre-booking dollar is paid by local mental health provider
- Of the post-booking bond dollar, 48 cents is paid by the courts and 46 cents by PTS
- Of the post-booking docket dollar, 48 cents is paid by the courts and 48 cents is paid by the mental health provider

# Methods: Research Question 2

- Samples
  - Two diverted groups – pre- and post-booking from 9/03 until 5/06
  - Two comparison groups
    - Pre-booking comparison – historical comparison = those who would have been diverted during the period March – September, 2001
    - Post-booking comparison – refusers

# Methods

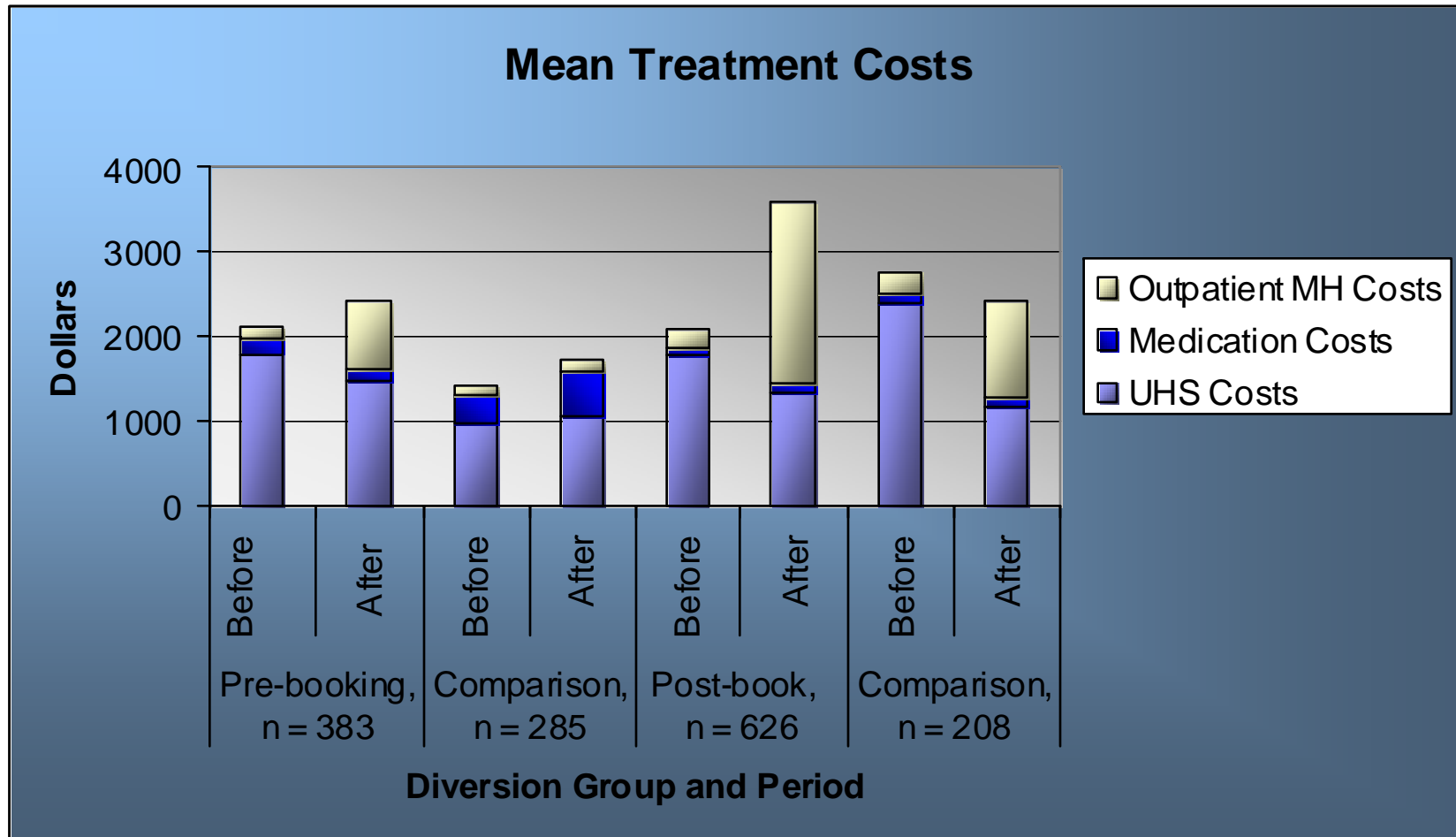
- Two periods to compare –
  - 12 months before point of diversion
  - 12 months after point of diversion
- Two sets of groups to compare –
  - Pre-booking and a comparison
  - Post-booking and a comparison

# Methods

- Descriptive means
  
- Multivariate models
  - Two part model
    1. Probability of an event (binary dependent variable)
    2. Cost conditional on the event occurring (regression on natural log of dependent variable)
  - Effect identified by interaction between indicator for diversion status and indicator for before/after period



# Results: Treatment



# Preliminary Multivariate Results: Treatment

- Part 1 of two-part model: Probability of a healthcare visit or day in hospital → log odds & (p-value)

	Pre-booking	Post-booking
Outpatient MH	25% higher odds (p=0.46)	<b>34% higher odds (p=0.04)</b>
Medication	<b>31% lower odds (p=0.07)</b>	<b>38% higher odds (p=0.04)</b>
Uni. Hospital System	<b>32% lower odds (p=0.05)</b>	<b>50% higher odds (p=0.01)</b>

# Preliminary Multivariate Results: Treatment

- Part 1 of two-part model: Probability of a healthcare visit or day in hospital → log odds & (p-value)

	Pre-booking	Post-booking
Any Treatment	22% lower odds (p=0.52)	<b>45% higher odds</b> <b>(p=0.00)</b>

# Preliminary Multivariate Results: Treatment

- Part 2 of two-part model: Regression on log conditional cost
- Bold indicates at or close to standard statistical significance
- \* indicates this interpretation is very approximate

	Pre-booking	Post-booking
Outpatient MH	<b>5 fold increase*</b> <b>(p=0.00)</b>	<b>2.5 fold increase*</b> <b>(p=0.00)</b>
Medication	<b>92% increase</b> <b>(p=0.01)</b>	29% increase (p=0.14)
Uni. Hospital System	9% increase (p=0.73)	23% increase (p=0.26)

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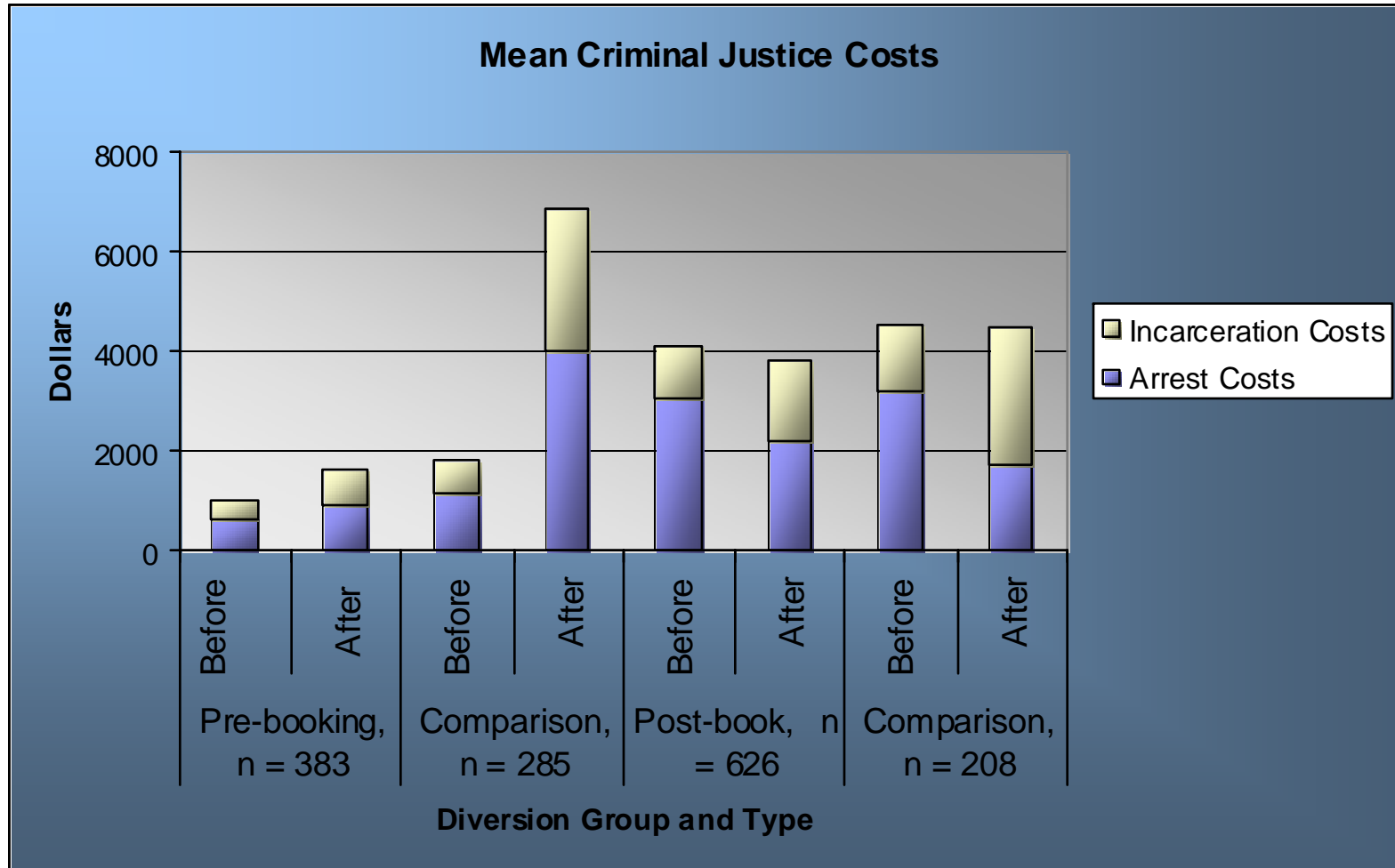


# Preliminary Multivariate Results: Treatment

- Part 2 of two-part model: Regression on log conditional cost

	Pre-booking	Post-booking
All Treatment Modalities	27% decrease (p=0.18)	<b>37% increase</b> <b>(p=0.07)</b>

# Results: CJ



# Preliminary Multivariate Results: CJ

- Part 1 of two-part model: Probability of an arrest event → log odds & (p-value)
- All comparisons have a night in jail after point of diversion
  - Probability of a night in jail and probability of any criminal justice event cannot be estimated

	Pre-booking	Post-booking
Arrest	57% higher odds (p=0.15)	<b>21 fold increase in odds</b> <b>(p=0.00)</b>

# Preliminary Multivariate Results: CJ

- Part 2 of two-part model: Regression on log conditional cost → coefficient estimate & (p-value)

	Pre-booking	Post-booking
Arrest Cost	5% increase (p=0.57)	<b>14% increase (p=0.06)</b>
Jail Cost	19% decrease (p=0.42)	24% decrease (p=0.12)
Total Criminal Justice Cost	<b>57% decrease* (p=0.00)</b>	16% increase (p=0.34)

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# Preliminary Multivariate Results: Bonus CJ Analyses

- Arrests: negative binomial regression
  - Percentage change in rate of arrest
- Nights in jail: regression on logarithm of nights
  - No direct interpretation

	Pre-booking	Post-booking
Number of arrests	31% increase in rate ( $p=0.17$ )	<b>3.9 fold increase in rate (<math>p=0.00</math>)</b>
Nights in jail	19% decrease ( $p=0.42$ )	24% decrease ( $p=0.12$ )

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# Preliminary Multivariate Results: All Costs (Treatment + CJ)

- Reminder, these multivariate models control for
  - Differences between groups that do not change over time
  - Number of days in jail before entered study
  - Time at risk during the study
- Interpretation of magnitude of effect is very approximate

	Pre-booking	Post-booking
Costs across all domains	<b>71% decrease*</b> <b>(p=0.00)</b>	<b>77% increase*</b> <b>(p=0.00)</b>

# Conclusions: Bottom-line

- Preliminary findings
- Pre-booking diversion associated with net reductions in county and/or city costs
- Post-booking diversion associated with net increases in county and/or city costs

# Conclusions: Treatment

- For treatment, diversion
  - Associated with improved access to treatment services for mental health needs
  - Does not seem to be associated with access to the broader hospital system



# Conclusions: CJ

- Pre-booking:
  - No reliable evidence it is associated with odds of arrest
  - Some evidence that CJ costs (conditional on arrest) are reduced
- Post-booking:
  - Associated with large increased odds of arrest
    - Could be “supervision effect”
  - Conditional on arrest, little evidence of increased CJ costs

# Next Steps

- Research Question 1
  - Further sensitivity analyses
- Research Question 2
  - Include cost of diversion (RQ 1)
  - Monthly analysis
  - Control for other potential confounds
  - Investigate possible supervision effect
  - Change period of analysis from “year-before: year-after”

# Next Steps

- Objective 3: Cost-effectiveness
  - Cost-effectiveness ratio =  $\frac{\Delta C}{\Delta E}$
  - Use RQ 1 estimates for C
  - Use re-arrest for E
- Objective 4: Focus on CCC