



**Justice
Reinvestment
Initiative**
New Hampshire



Justice Center
THE COUNCIL OF STATE GOVERNMENTS

New Hampshire's Justice Reinvestment Initiative

Presentation to the Governor's Advisory Commission on
Mental Illness and the Corrections System

March 3, 2022



**Justice
Reinvestment
Initiative**
New Hampshire

Overview

- 1** Introduction
- 2** New Hampshire's Behavioral Health and Criminal Justice Trends
- 3** Justice Reinvestment Initiative in New Hampshire and Next Steps

Introduction

1

The CSG Justice Center's Core Justice Reinvestment Team in New Hampshire



Tracy Gillespie
Senior Policy Analyst



Ellen Whelan-Wuest
Program Director



Sarah Wurzburg
Program Director



Sara Bastomski
Research Manager



Mari Roberts
Data Scientist



Justice Center

THE COUNCIL OF STATE GOVERNMENTS

We are a national nonprofit, nonpartisan organization that combines the power of a membership association, serving state officials in all three branches of government, with policy and research expertise to develop strategies that increase public safety and strengthen communities.

How We Work

- We bring people together.
- We drive the criminal justice field forward with original research.
- We build momentum for policy change.
- We provide expert assistance.

Our Goals

- Break the cycle of incarceration.
- Advance health, opportunity, and equity.
- Use data to improve safety and justice.



Justice Reinvestment Initiative

A data-driven approach to improve public safety, reduce corrections and related criminal justice spending, and reinvest savings in strategies that can decrease crime and reduce recidivism

The Justice Reinvestment Initiative is funded by the U.S. Department of Justice's Bureau of Justice Assistance (BJA) and The Pew Charitable Trusts.

The Justice Reinvestment Initiative is a tailored process to help states use data to address their public safety needs.

Bipartisan and interbranch



Bipartisan leaders from all three branches of government

Stakeholder engagement



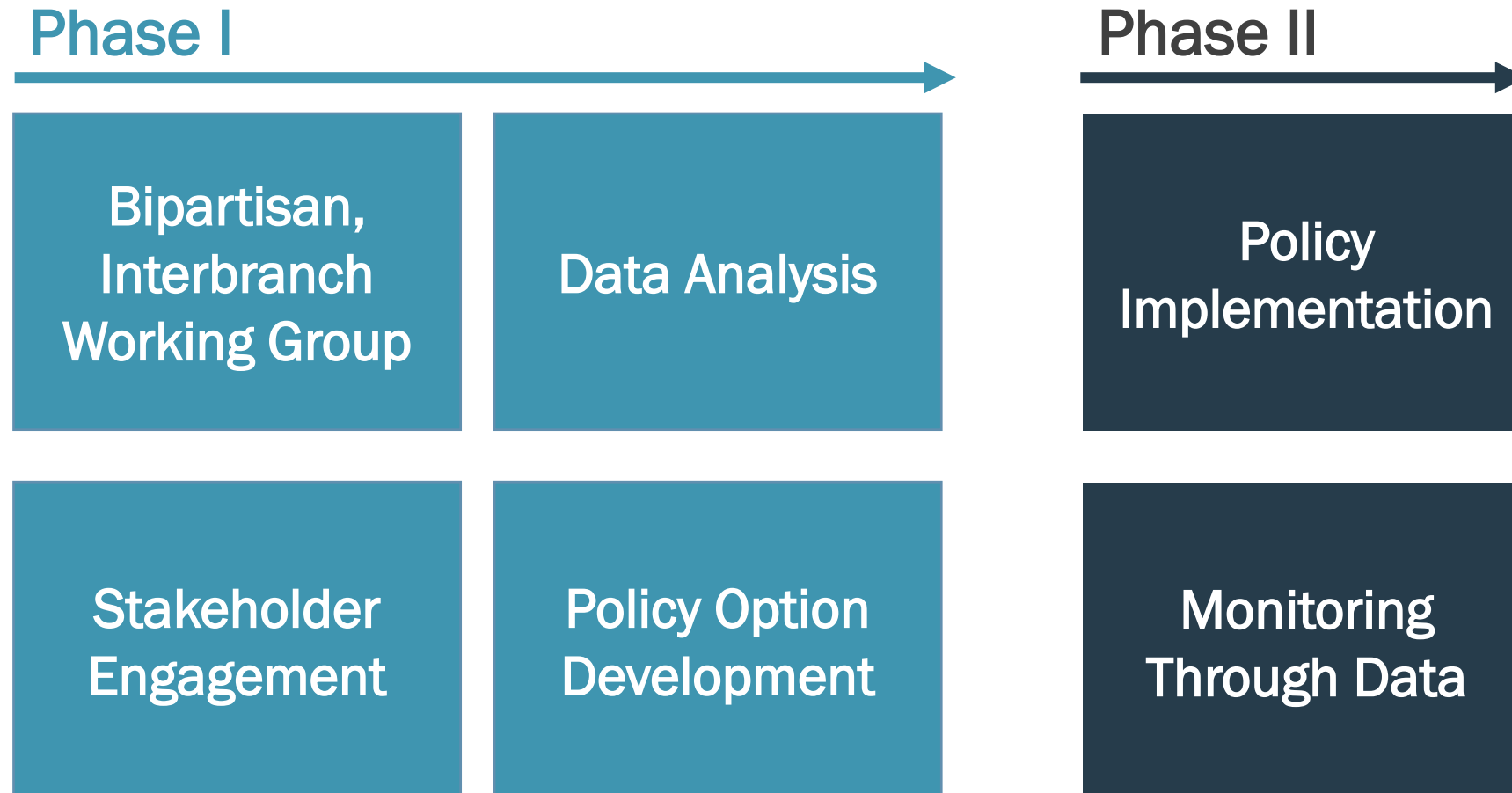
Meetings with hundreds of criminal justice practitioners, policymakers, treatment providers, victim advocates, and formerly incarcerated people

Objective analyses



Agency-spanning analyses of up to millions of individual case records from across the criminal justice system

The Justice Reinvestment Initiative is a two-part process spanning analysis, policy development, implementation, and sustainability.



Many state and local leaders are eager to learn more about people with behavioral health needs who frequently interact with and move through the criminal justice system, often known as “high utilizers.”

The definition of “high utilizer” can differ by system, by jurisdiction, and by the level of systems contact a person has.

In many instances, people who qualify as “high utilizers” have serious mental illnesses, substance use disorders, and other significant health and social service needs.



A key limitation in understanding the high utilizer population in any state is the lack of coordination and data analysis across public health and public safety systems.

This project will seek to learn more about people who are high utilizers of local jails (many short incarceration stays) and health systems (many visits to emergency departments, treatment services).

In recent years, states and localities have worked to overcome these data and coordination barriers.

Middlesex County, MA, conducted a county-wide assessment of frequent utilizers.

- This was the first county-wide assessment of frequent utilizers.
- Informed regional planning efforts for a new crisis diversion facility and connection to care.
- 2 percent of the population analyzed represented 13–15 percent of police contacts.
- People involved with corrections are much more likely to seek out certain types of medical care.
 - Emergency department and inpatient behavioral health services
 - More likely to have diagnoses of SUD, alcohol use disorder, and/or opioid use disorder

Initial analysis revealed an extreme number of system contacts for one individual:

1,000

Number of EMS transports over a 13-year period

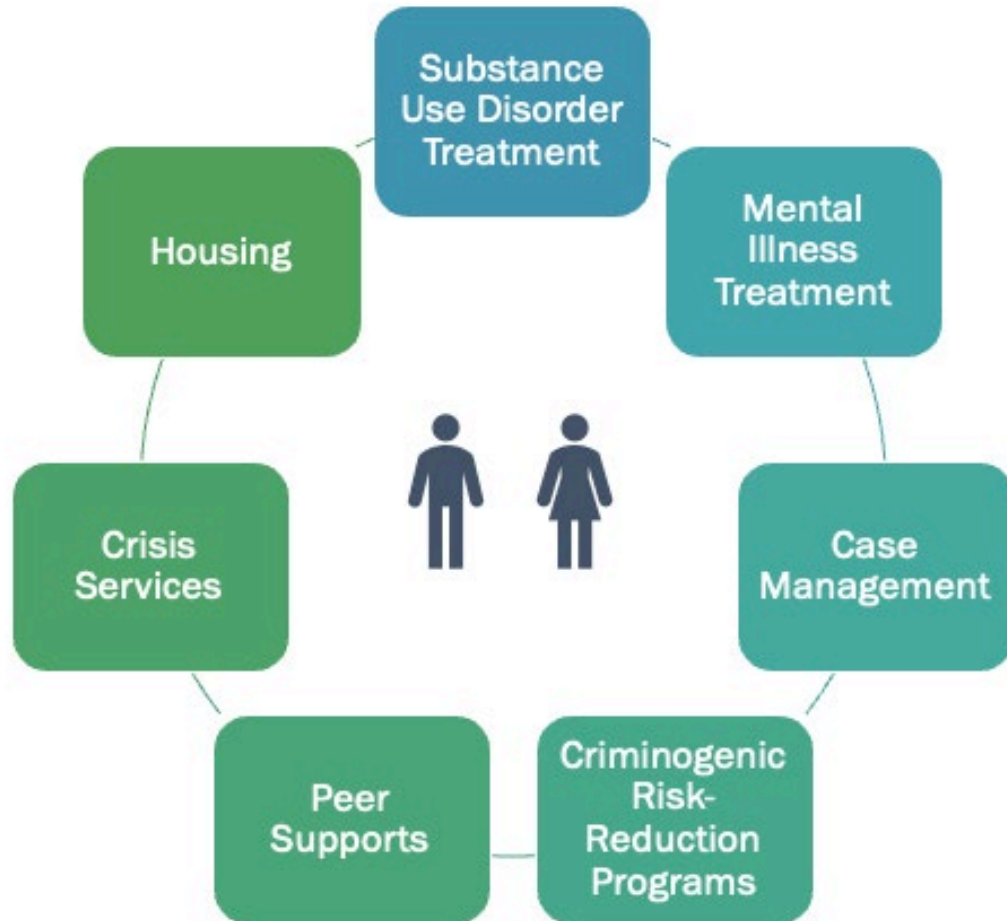
85

Number of engagements with the police experienced in Middlesex County

\$600K

Cost to Emergency Medical Services

Adequately addressing the needs of people who are high utilizers is challenging because of the nature and quantity of services they require.



Working with this population to improve health and public safety outcomes requires

- Addressing multiple complex health needs;
- Strong coordination across systems; and
- Simultaneously addressing both behavioral health and criminogenic risks.

In 2019, Governor Sununu formed this commission with the express intention of learning more about the overlap between corrections and mental health.

New Hampshire 10-Year Mental Health Plan

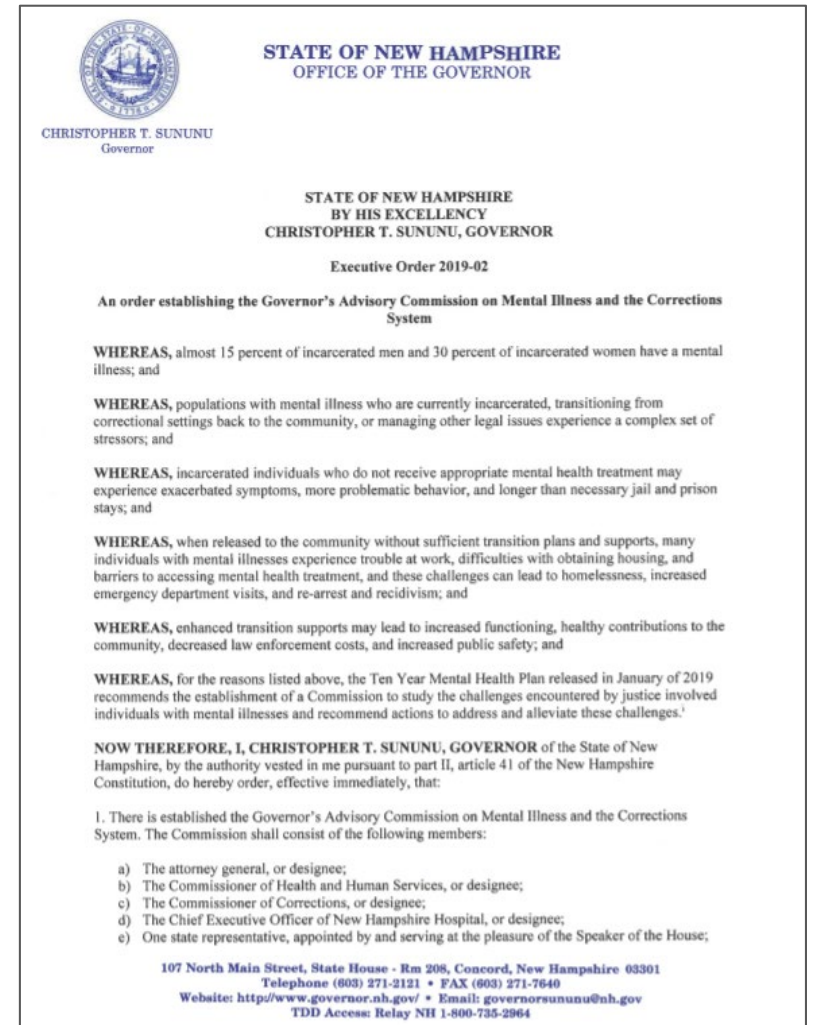


January 2019

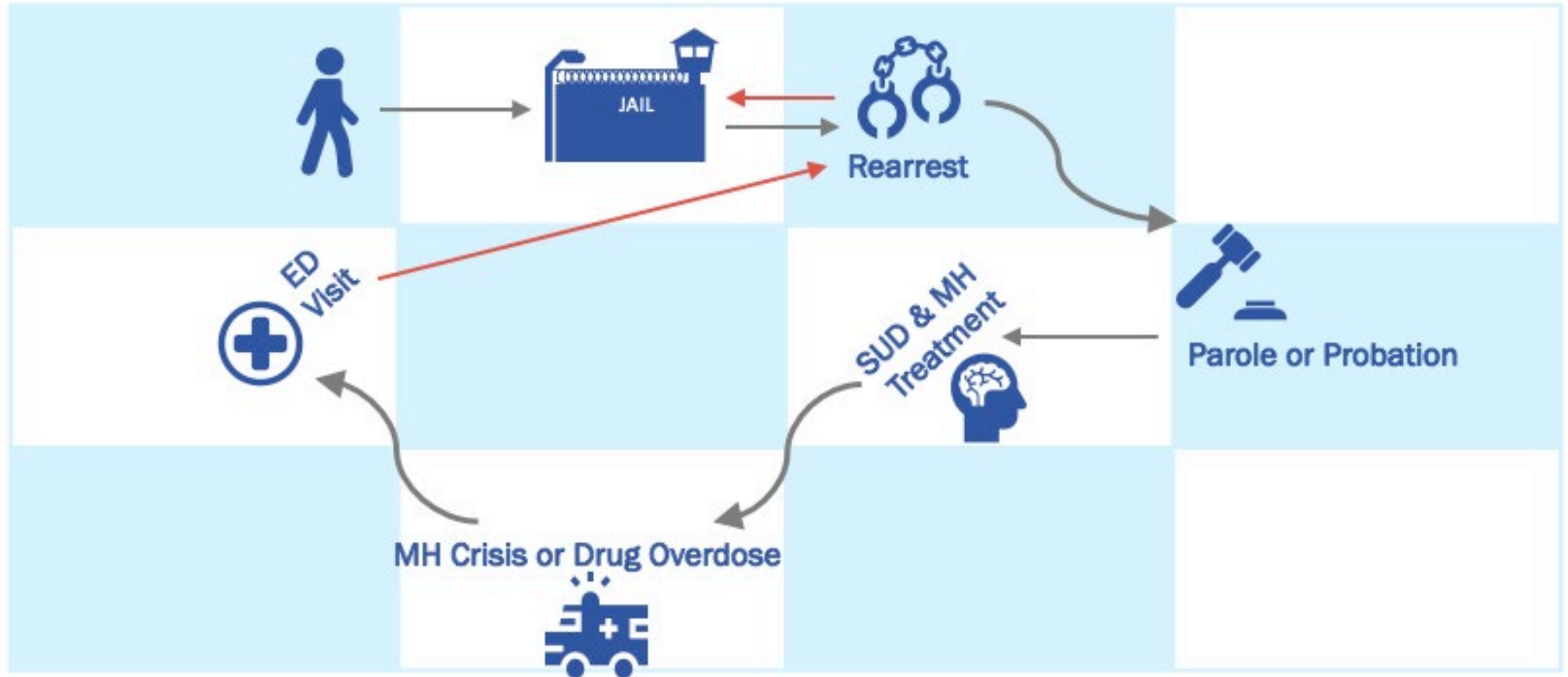
“The Commission shall examine and make recommendations on issues facing individuals with mental illness in the correction system...”

Steps that can be taken to reduce incarceration and improve mental health services for incarcerated individuals who suffer from mental illness...

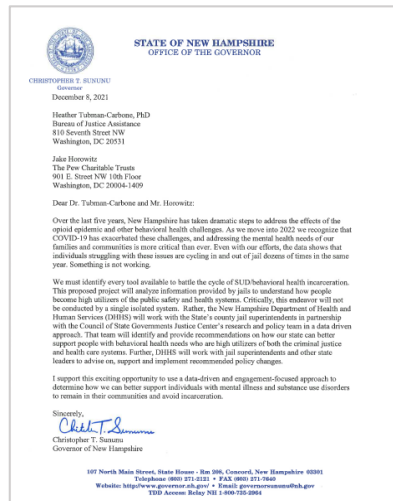
Reforms to support individuals with a mental illness who are transitioning from incarceration back into the community.”



In stakeholder meetings, examples were provided of people who cycled through New Hampshire's jails and health care systems.



Building on these efforts, in late 2021, New Hampshire leaders requested a second Justice Reinvestment effort, focusing on people with behavioral health needs and multiple incarcerations in county jails.



Requesting Signatories:

- Chris Sununu, Governor
- Tina Nadeau, Chief Justice, New Hampshire Superior Court
- Helen Hanks, Commissioner, New Hampshire Department of Corrections
- Lori Shibinette, Commissioner, New Hampshire Department of Health and Human Services
- David A. Berry Jr., Superintendent, Sullivan County Department of Corrections, on behalf of New Hampshire Association of Counties Affiliate—County Corrections

Supporting Signatories:

- Thomas Sherman, Senator

“We are eager to employ the data-driven and engagement-focused approach of the Justice Reinvestment Initiative...to identify how we may better support people who are high utilizers of the jail and health care systems in New Hampshire and ensure that they are able to safely remain in their communities and avoid jail incarceration.”

New Hampshire Behavioral Health and Criminal Justice Trends

2

Mental illness and substance use disorder needs in New Hampshire are immense, but treatment and recovery support service providers are limited in their ability to meet these needs.

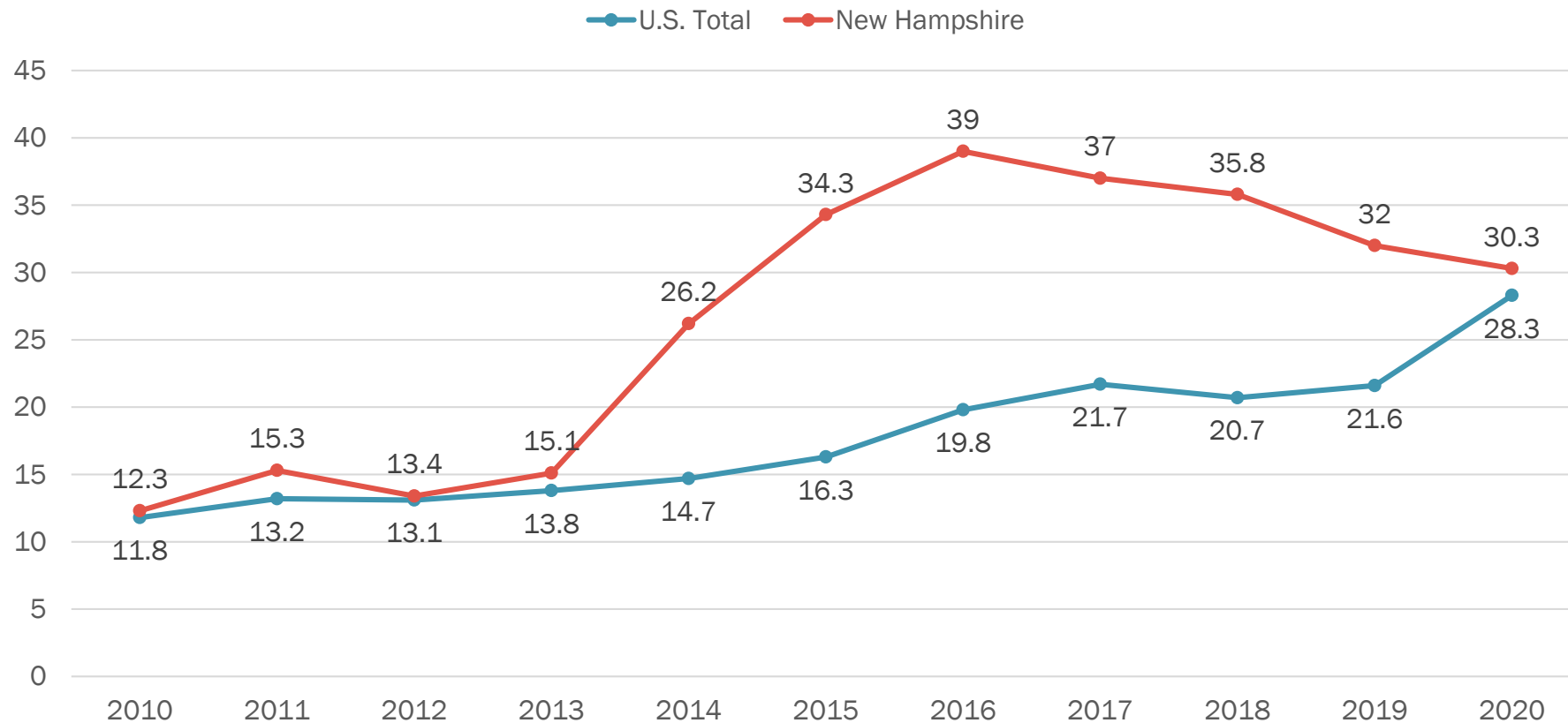
In 2017 and 2018, an estimated **20.6 percent of adults** in New Hampshire had a diagnosable mental, behavioral, or emotional condition and **5.3 percent** had a serious mental illness each year.

In 2017 and 2018, an estimated **9 percent of adults** in New Hampshire needed substance use treatment but did not receive it, **the seventh-highest rate in the nation.**

Between 2015 and 2017, **1.4 percent** of people aged 12 or older in New Hampshire had opioid use disorder in the previous year, **nearly twice the national average** (0.8 percent).

Between 2014 and 2020, New Hampshire's drug overdose death rate was far above the national rate.

Drug Overdose Deaths per 100,000 Residents



2010 to 2020
percent change

+246%

+240%

In 2020, the New Hampshire rate continued to exceed the national rate, even with nationwide increases in overdose deaths.

*Age-adjusted rates.

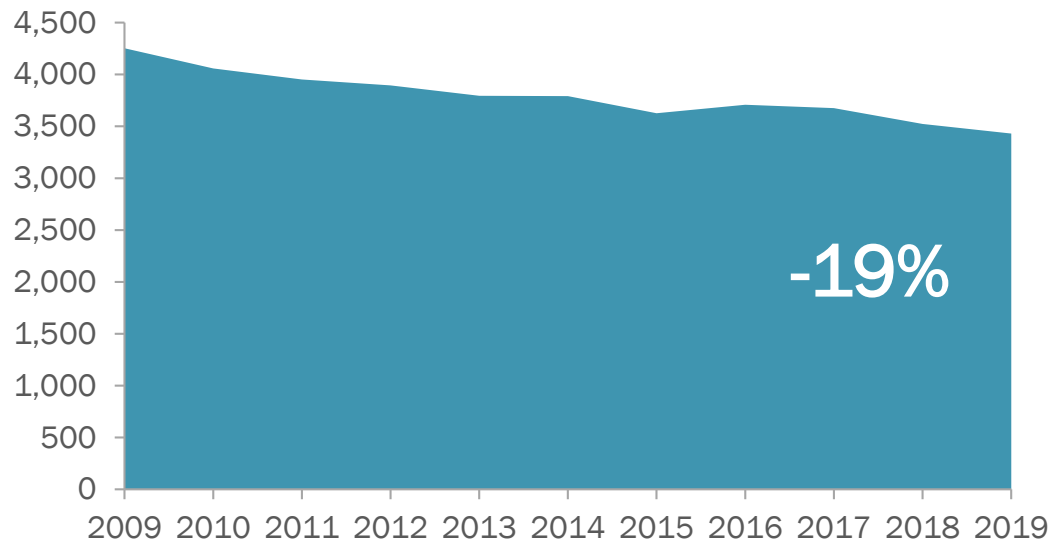
Research shows that opioid use is significantly correlated with criminal justice system involvement.



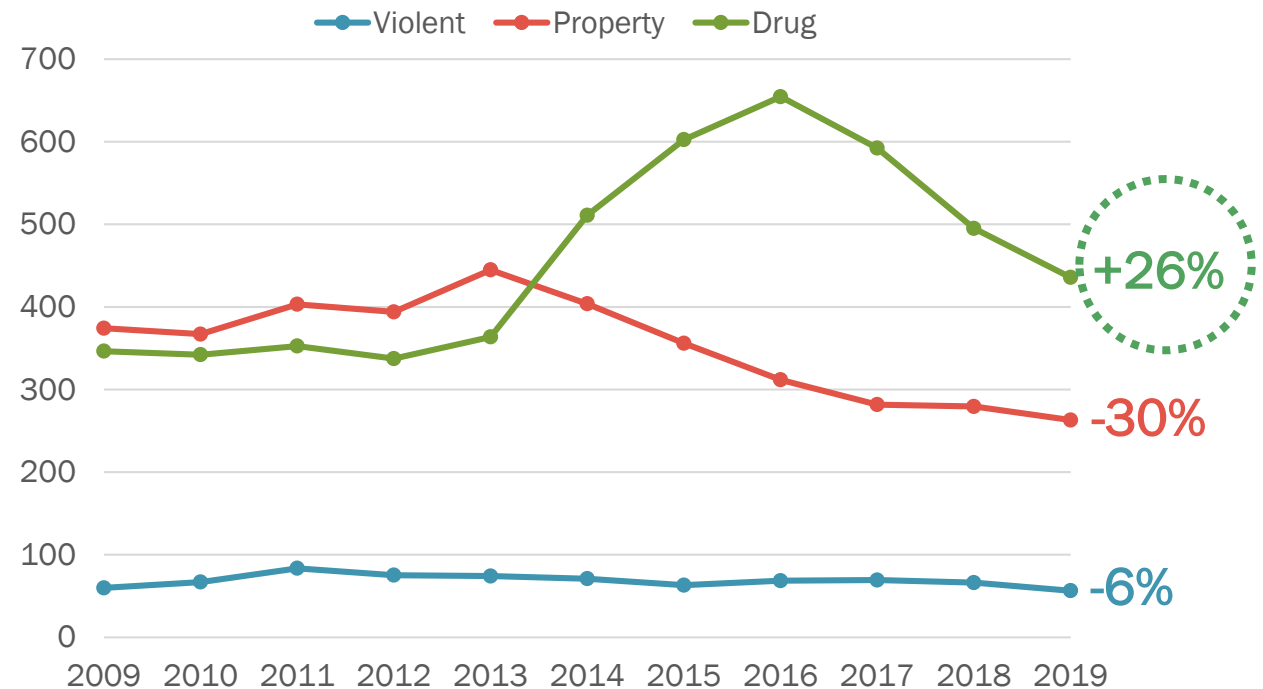
- Any level of opioid use is associated with recent involvement in the CJ system.
- Involvement in the criminal justice system increases with intensity of opioid use.
- People who report opioid use are more likely to report physical, mental health, and co-occurring substance use disorders.
- People in the justice system have a higher likelihood of dying of an opioid overdose than the general public.

While the arrest rate for violent and property offenses decreased in New Hampshire between 2009 and 2019, the arrest rate for drug offenses increased during this period.

New Hampshire Total Arrest Rate, 2009-2019



New Hampshire Arrest Rates, 2009-2019
Select Offense Categories*



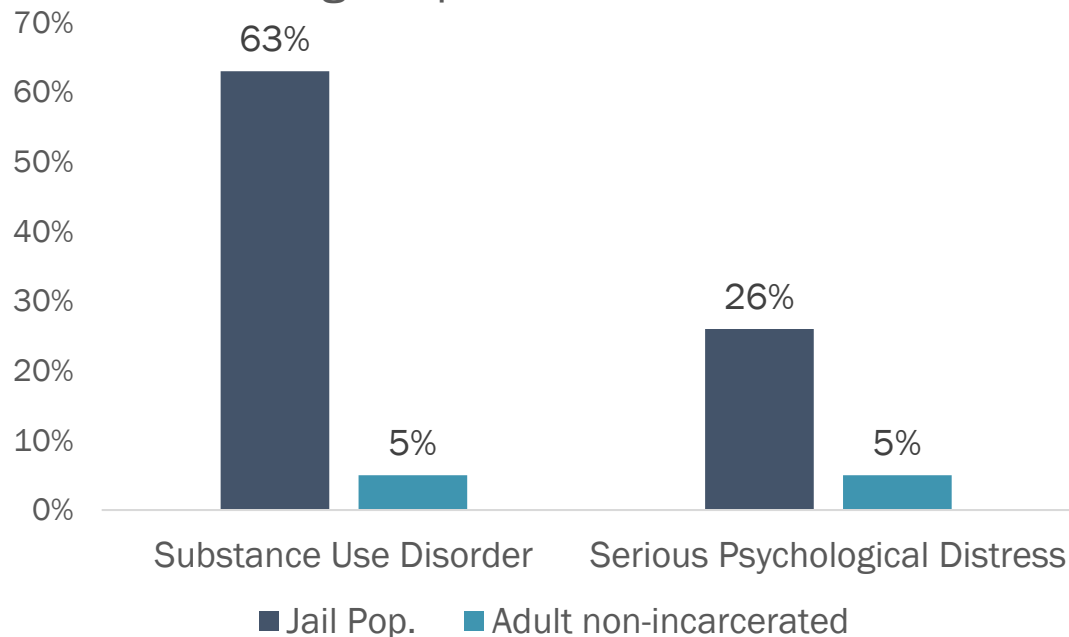
*Violent index offenses are homicide, rape, robbery, and aggravated assault. Property index offenses are burglary, theft, and motor vehicle theft. Rates are per 100,000 residents.

Federal Bureau of Investigation, *Crime in the United States, 2009-2019* (Washington, DC: United States Department of Justice, 2010-2020).

The Rockingham County Department of Corrections reported that over half of people booked in the county jail during 2018 were identified as “repeat offenders.”

Rates of mental illness and substance use disorders among jail populations are higher compared to the general population, both nationally and in New Hampshire.

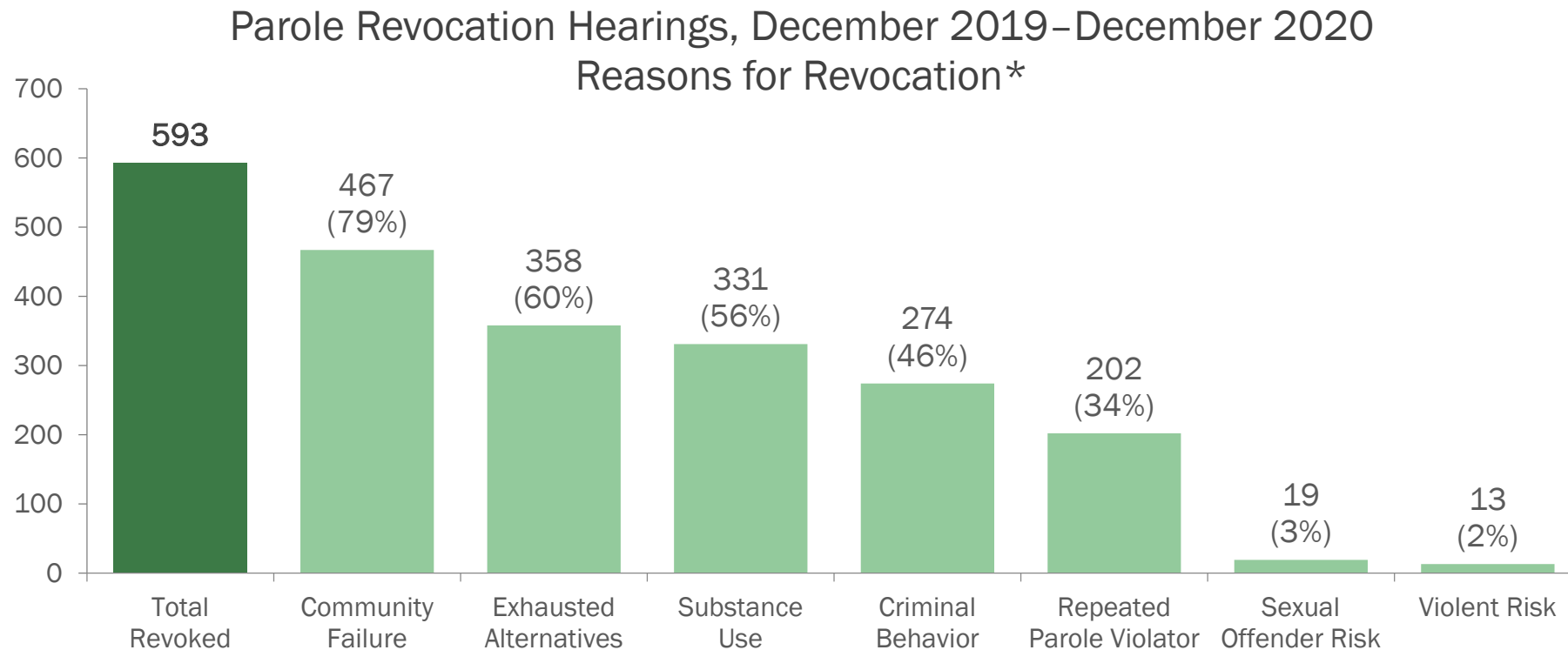
National Findings on Drug Use and Mental Illness
Among People in Jail and Prison



- Sullivan County jail found a **76 percent** overlap between people in the **county jail and the community mental health center**.
- In Cheshire County, **84 percent** of people in jail who received a mental health assessment met the criteria for a **substance use disorder**, and **64 percent** had **co-occurring disorders**.
- The Coös County Department of Corrections estimated that in 2019, about **a quarter** of people incarcerated in their jail had an **opioid use problem**.

Jennifer Bronson, et al., *Drug Use, Dependence and Abuse Among State Prisoners and Jail Inmates, 2007–2009*, (Washington, DC: Bureau of Justice Statistics, 2017); Jennifer Bronson and Marcus Berzofsky, *Indicators Of Mental Health Problems Reported By Prisoners And Jail Inmates, 2011–2012* (Washington, DC: Bureau of Justice Statistics, 2017); Meeting between The Council of State Governments Justice Center and Sullivan County, Department of Corrections on November 18, 2020. County of Cheshire, *Report of the County Commissioners County Treasurer and Other Officers of Cheshire County New Hampshire for the Year Ending December 31, 2019* (Keene, NH: County of Cheshire, 2020). Of the 1,610 people booked in calendar year 2019, 280 received a mental health evaluation. Information on mental health in jails was not available for all counties. County of Coös, *Annual Report of Coös County for the Year Ending December 31, 2019* (Lancaster, NH: County of Coös, 2020). Information on substance use in jails was not available for all counties.

As of 2019, more than 50 percent of people incarcerated in NHDOC prisons had an opioid use disorder, and in one year over half of parole revocations were due to substance use disorders.



*Revocation hearings may have multiple reasons for revocation; therefore, the sum of categories will be greater than the total revoked.

New Hampshire Department of Corrections, *NH DOC Monthly Parole Hearings Summary Report* (Concord, NH: New Hampshire Department of Corrections, 2020). Numbers are for December 1, 2019, to December 1, 2020.

**Justice
Reinvestment
Initiative in New
Hampshire and
Next Steps**

3

This project will focus on the prevalence of people with behavioral health needs moving through local county jails and the availability and impact of existing services and supports for this population statewide.

New Hampshire's Justice Reinvestment Initiative Goals:

Goal 1: Improve criminal justice and public health outcomes for people with behavioral health conditions who are high utilizers of the health and jail systems.



Goal 2: Reduce gaps in the state's data systems and information sharing capacity by working with agencies and staff to build data collection and analysis capacities.

JRI in New Hampshire will rely on analyzing data and assessing policy and practice across the health and public safety systems.

The scope of work for this JRI effort includes the following:

- Facilitating cross-system data match to analyze county jail and Medicaid claims data
- Analyzing jail data on high utilizers with behavioral health needs
- Analyzing racial disproportionalities in jail incarceration
- Conducting focus groups with providers, stakeholders, and jail staff
- Assessing behavioral health needs, demographic characteristics, and available resources
- Assessing the collaboration between behavioral health and criminal justice agencies
- Identifying gaps in data systems to support improved data collection and analysis capacities
- Identifying alternatives to incarceration programs to provide an overview of local available services



Matching data from all 10 counties' jails with data from the Department of Health and Human Services (DHHS) would distinguish New Hampshire as the first state in the country to conduct a statewide jail to Medicaid data analysis.

Data Analysis Plan and Progress

PART 1: JAIL SYSTEM

ADMINISTRATIVE DATA
(e.g., charges, bookings,
releases)

BEHAVIORAL HEALTH
IDENTIFICATION DATA
(e.g., screenings,
assessments, medications)

PROGRAM/TREATMENT
DATA
(e.g., program/treatment
referrals, services
delivered, program/
treatment completions)

PART 2: DHHS

JAIL & MATCHED
MEDICAID DATA
(e.g., Medicaid status,
Medicaid
claims/services)

COMPLETED ACTIVITIES

- Data analysis plan finalized
- Data use agreements (DUAs) finalized and awaiting partner signatures
- Data submission templates shared with jail partners

UPCOMING ACTIVITIES

- Data submission workshop for jail partners
- Execute DUAs
- Securely transfer data
- Begin quantitative analysis

Qualitative Analysis Plan

PART 1: Stakeholder engagement

Presentations to and meetings with criminal justice and behavioral health stakeholders to introduce the project and gather information

- Judges
- County attorneys
- Defense attorneys
- Community supervision officers
- Law enforcement
- Hospital associations
- Community foundations
- Reform advocates
- Victim advocates

PART 2: Detailed policy analysis and assessments

Detailed assessments and meetings with jail administrators and staff, as well as community service providers to learn about the type and availability of behavioral health services and supports

Analysis of all relevant funding streams, governing statutes, and administrative policies that impact high utilizer populations and the agencies that work with them

COMPLETED ACTIVITIES

- Initial introductions to key stakeholders

UPCOMING ACTIVITIES

- Meetings and presentations to stakeholders statewide (March–July 2022)
- Jail and community services assessments (likely June–August 2022)
- Statutory, budget and policy reviews (March–November 2022)

The JRI Phase I timeline hinges on timely data sharing and analysis and comprehensive engagement across the state.

Qualitative Analyses

- Identify stakeholders for focus groups, surveys, and interviews.
- Assess behavioral health local landscape and continue stakeholder engagement.
- Conduct qualitative assessments for participating jails (virtual or on-site).
- Compile, review, and explore qualitative data.
- Review opportunities for additional funding.
- Deliver policy recommendations for administrative consideration and enactment.

MAR



NOV

Data Analyses

- Assess data availability.
- Execute data sharing agreements.
- DHHS and CSG Justice Center receive and compile jail datasets.
- CSG Justice Center conducts initial analysis of jail datasets.
- DHHS conducts jail-Medicaid data match.
- Conduct initial analysis of jail and matched datasets.
- Review initial findings with jails and DHHS.
- Conduct further analysis and prepare final findings.
- Deliver policy recommendations for administrative consideration and enactment.

Justice Reinvestment will seek to answer key questions related to New Hampshire's high utilizer jail population.

1. Jail admissions:

- How many people are booked into New Hampshire jails annually?
- What are the most common jail admission and release types?
- What is the average length of incarceration in jail?
- How are protective custody holds factored into the jail population?

2. High utilizers in jails:

- What percent of annual jail bookings are for people identified as high utilizers?
- Is this percentage different for protective custody bookings?
- What percent of the daily jail population do high utilizers account for?

3. Demographics of the high utilizer population:

- How does the high utilizer jail population compare to others in jail in terms of gender, race, and ethnicity?
- What other indicators exist among the high utilizer population in jail including their Medicaid enrollment status or Medicaid eligibility, their housing status, and indicators of substance use and/or mental illness?

Justice Reinvestment will seek to answer key questions related to New Hampshire's high utilizer jail population (continued).

4. Behavioral health services among people who are high utilizers in the jail population:

- How do jails identify and support people with behavioral health needs in their custody?
- What treatment, programming, or services do people with behavioral health needs receive while incarcerated in jail?

5. Community-based behavioral health services used by people who are high utilizers in the jail population:

- What treatment, programming, or services do high utilizers receive in the community (via Medicaid) before and after incarceration in jail?
- Are people receiving treatment in the community? Do people have recent hospital stays? What other services are common among the high utilizer population?

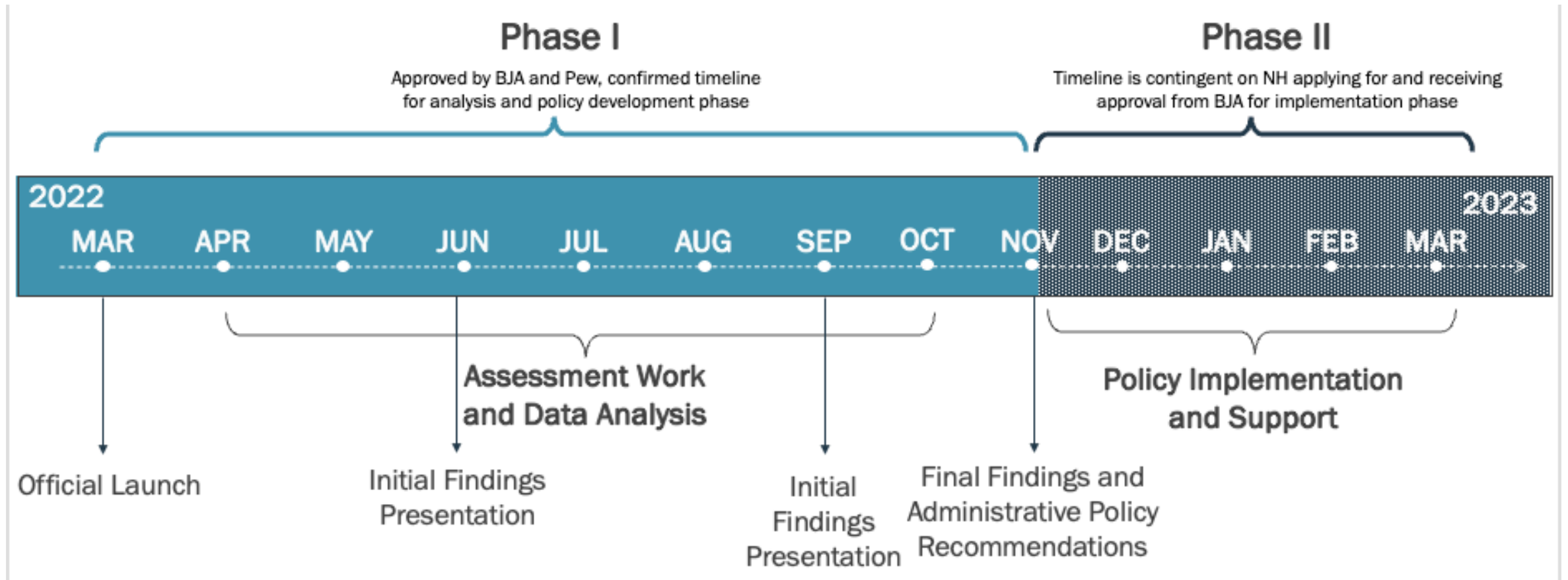
The Advisory Commission on Mental Illness and the Corrections System will serve as the oversight committee or working group for the Justice Reinvestment Initiative in New Hampshire.



In this role, the Advisory Commission will

- Review the findings and conclusions presented by the CSG Justice Center over the coming months;
- Connect the CSG Justice Center team to key stakeholders and experts across the state;
- Advise on key stakeholders and experts for the quantitative analysis; and
- Review and develop final administrative policy recommendations with the CSG Justice Center upon the completion of all quantitative and qualitative analyses.

Justice Reinvestment will continue in New Hampshire through March 2023, depending on policy adoption and implementation needs.



Next Steps

- Negotiate and sign data sharing agreements with the Department of Health and Human Services (DHHS) and New Hampshire county corrections.
- Facilitate and support the data sharing process between jails, DHHS, and the CSG Justice Center.
- Regularly meet with jail and DHHS staff to understand jail data elements and ensure analysis is conducted properly.
- Begin meeting with local mental health and substance use stakeholders.
- Continue stakeholder engagement.
- Schedule jail assessment visits (either virtually or on-site) and other pertinent stakeholder meetings.
- Provide regular project updates to the Advisory Commission and local stakeholders.

What else should we consider as we begin to look at people who are high utilizers of the jails and health systems?

- How can New Hampshire's prior efforts to understand more about people with behavioral health needs in the justice system inform this project?
- What groups or stakeholders have we not yet mentioned that you see as critical to understanding the overlap of health and county jails?
- What are key questions you have that remain unanswered about the high utilizer population in NH?
- How can we remain connected to you as members of this commission and experts on this topic throughout the project, outside of the regular presentations to the commission we plan to deliver?



Thank You!

Join our distribution list to receive updates and announcements:

<https://csgjusticecenter.org/resources/newsletters/>

For more information, please contact Madeleine Dardeau at
mdardeau@csg.org

This project was supported by Grant No. 2019-ZB-BX-K002 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the SMART Office. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice. To learn more about the Bureau of Justice Assistance, please visit bja.gov.

© 2022 The Council of State Governments Justice Center

Cover photo credit: Wikimedia Commons

