

SENATE HUMAN SERVICES COMMITTEE

Senator Judy Lee, Chair

March 29, 2021

North Dakota Department of Corrections and Rehabilitation

Lisa Peterson, PhD, Clinical Director

Presented Testimony in Favor of HB 1470

This bill authorizes a study of the behavioral health needs of incarcerated adults. The intention of this study is to specifically examine access, availability, and delivery of services to people incarcerated at the local level in county jails. As you know, the Department of Corrections and Rehabilitation (DOCR) was studied during the previous interim. The North Dakota Behavioral Health Division also partnered with Human Services Research Institute to study the behavioral health system overall and the final report was released in 2018. That work continues now through North Dakota Behavioral Health Vision 20/20, which identifies 140 strategic goals to enhance all aspects of the behavioral health system in the years to come. Several of those goals related to criminal justice system strategy and one recommends reviewing behavioral health screening, assessment, and treatment capacity in jails and creating a plan to fill gaps. Studying jail resources in this way is key because at this point, we do not have enough information to know the extent of new services that must be developed or where we have opportunities to improve coordination of existing services. Jail-based resources and county-level alternatives to incarceration have not been specifically examined in either of the two previous studies I mentioned.

In 2017, the DOCR was given authority to enact an inmate prioritization plan to acknowledge that correctional resources are finite and must be reserved for those who pose a true risk to public safety. As part of the work leading up to this reform, the Council of State Governments Justice Center surveyed North Dakota judges and found that 70 percent stated

they had sentenced someone to prison whom they did not view as a public safety risk in order for that person to access necessary behavioral healthcare. This study will help inform the creation and coordination of recovery supports at the local level. North Dakota's county governments were given the same authority DOCR was given in 2017 to enact inmate prioritization plans and divert funds to alternatives to incarceration. Cass County has made some progress in this area by creating a community-based case management and supervision service to support people who would otherwise have been incarcerated to live independently, go back to work, and care for their families. Outside of Cass County, I am not aware of any other counties who have taken significant steps to increase community supports and reduce their jail populations. This study will provide the necessary data, recommendations, training, and technical assistance local governments need to create plans to enact justice reinvestment strategies in their communities.

An earlier version of this bill also included a provision that would have required the public behavioral health system to continue serving clients on their caseload should those clients become incarcerated. The idea was to improve continuity of care and access to behavioral health resources in jails in a way that would minimize fiscal impact. The DOCR stood in support of that section, which was ultimately removed before the bill passed the House Human Services Committee and the North Dakota House of Representatives.

As of January 25, 2021, there were 1,407 people in North Dakota's county jails who could benefit from improved access to behavioral healthcare designed to help them address the factors leading to their commission of crimes or cope with incarceration. Identifying the opportunities that exist to further invest in recidivism reducing interventions not only has potential to help those involved with the criminal justice system, but sets us on a path to continue to improve the health of our communities and the safety of our state.