

Jail - Huber - Minutes
April 15, 2013 Meeting

1) Introduction of and presentation by DOC regional chief Neil Thorson

Mr. Thorson's comments/subsequent discussion included:

- “Dosage-based” sanctions project is the current big initiative/change in practices; it represents a change toward calibrated sanctions for violations of supervision conditions and a move away from automatic, sometimes overly punitive and costly, re-incarceration sanctions. Consultant Mimi Carter, who is working w/ the CJC’s EBDM initiative, is assisting with this.
- The number of revocations has been reduced and use of lesser sanctions has increased.
- “Compass” risk-assessment tool has been useful for focusing resources.
- A two-year “norming” study is in progress for further validation of the risk-assessment tool.
- Risk Assessment is used at the decision point on whether to revoke or use “ATR” (alternative to revocation).
- Question asked whether there is “CQI” analysis in place (Continuous Quality Improvement) to ensure that desired policies and practices are actually implemented consistently in the field. Response was that this is part of the plan but still at an early stage of training and implementation.
- Mike Williams noted that MSDF population #s are up last 5 years, but that VOP holds have gone down, from 700 at one point, to 538 in 2009, and recently at “around 500”.
- Question asked about the “VOP” numbers of those held in Milwaukee County’s facilities (CJF and HOC) as opposed to MSDF. Response that County has 181 “VOP only” (violation of probation or parole/ES as the reason for incarceration, distinguished from those designated as VOP but with a possible new charge/new offense) at most recent count.
- Obviously other populations (e.g. housing overflow from prisons) are up at MSDF. DOC population still going up, so MSDF space is used for overflow.
- Sheriff is reimbursed for VOP sanction beds - \$51.46 per day for holding sanction people.
- Tom Reed commented that Jail-Huber committee could review data regarding the VOP population. For example, how many are being held on non-violent vs. public safety concerns?
- Question asked as to what are the trends or recent observations in the revocation population. Response that EDBM emphasizes early screening and intervention – with a focus on who can be treated as diversion-appropriate for treatment, eligible for programs for veterans, etc.. Follow up question as to early intervention options, including whether DRC could be an option for ATRs. Data platform being constructed for looking at all custody/population sets.
- Tom Reed stressed that we have to move from anecdotes to data – to look at issues like whether we are “over- ‘conditioning’” supervision.

- Jeff Altenburg noted the need for a person to be designated as liaison between DA and DOC, to identify for ATRs and DPAs.
- Recent audit of Sheriff's department indicated that data capacity is underutilized. The Sheriff has heretofore not used available data and has denied access to other groups to use the data. It would be very costly to have to reconstruct a data system that parallels what the Sheriff has withheld.

Related Discussion continued:

- DOTS program is on hold, because of Sheriff's litigation re HOC management.
- DOTS operated on an assumption of a group progressing through a 6 week program – not a rolling admission/graduation. There is no new/current cohort of DOTS participants.
- Tom Reed stressed the importance of data of any and all programs within the EDBM approach. Without measurement we don't know what works, what to replicate and what to eliminate or reduce.
- We currently can create a "scorecard" but we can't drill down to identify trends (addiction, mental health/municipal violation overlap, e.g.). Small project data is useful, but without combined data, we lack the capacity to make well grounded statements about the system as a whole.

2) May 10th Meeting for Briefing on EDBM /Universal Screening

- NIC data gathering is now complete & the presentation being reviewed in preparation for May 10th meeting of system stakeholders. The courthouse will be closed May 10th to allow judicial officers and prosecutors and defenders to attend.
- There have also been interviews of stakeholders for anecdotal evidence and perceptions of relative success of "Praxis".
- The May 10th meeting will present data and interpretation from 16 months of Universal Screening.
- The meeting will also try to address stakeholders' expressed concerns (DAs, Judges & commissioners primarily have raised concerns).
- The analysts will try to explain how certain practices are supported or not supported by data.
- Seating is limited: slots were reserved for representatives of key agencies. Holly is working on firming up that list this week and next.
- Early returns on data "look good," in relation to national averages.
- We don't know what baseline for Milwaukee was before universal screening, because there was no good data. So we can't definitively say we're better or worse. As a result, there has been the expected phenomenon that anecdotal information and particular individual cases are unduly focused upon. Suggested that the "best approach" will be to look at national averages. Going forward, we can tweak and compare to our own data and experience.
- One result that will be presented is that our FTA/"failure to appear" (i.e. for subsequent court events) based on "re-offense" is good, in relation to national averages.

- But there is a concern that some FTA subgroups (e.g. some misdemeanor defendants) have higher FTA rates than we'd like.
- Question was raised whether comparing Milwaukee to national averages considers housing and poverty demographics. We have higher poverty, more housing issues than other cities.
- New grant has been applied for on the issue of assessing risk without regard to personal interviews.
- Domestic Violence is one area that does not appear to have a risk assessment tool.
- Another area of concern is people who enter the criminal justice system w/ a mental health profile.
- Mental health piece of EBDM is still developing. Tom Reed elaborated on the "critical care" model that we hope becomes the standard for dealing with individuals with mental health issues. One prime example is the importance of the "22 day time frame": because people lose important government benefits at the point of 22 days in custody. We also need stronger connection between the criminal justice stakeholders and mental health treatment/service/advocacy community. Tom noted that we have looked Houston TX model for CIT (Crisis Intervention). Houston has, with notable success, addressed the high resource use by small % of offenders (the overlap between jail and mental health populations).
- Tom explained that Houston's approach has resulted in saving money and better work with the mental health population.
- Tom invited interaction between other stakeholders and DOC in regard to mental health and noted that BHD has been actively interested in working collaboratively on this.

3.) Sheriff's Department Changes and Related Problems:

- Issue: people granted Huber privileges but whose start of their sentence is stayed (e.g. where lawyer requests that client starts sentence in 1 week). A problem has arisen where the Sheriff has done AODA screen in advance and revokes Huber on their first day of the sentence (i.e. suspends Huber before they even start). Judge Kremers' position is that the rules aren't in place until they are in the program, so that they cannot be revoked at the time of entry: the Sheriff has no authority essentially to revoke bail.
- Question: whether that AODA screen info is useful to judge. Yes – Judge can take position to cancel Huber if either no show or positive screen.

Next Meeting: Monday, May 20, 2013. Courthouse 609.