
VIII. Options for Future Consideration

This chapter outlines various options that have the potential to improve conditions within the jail and to minimize the number of Tompkins County jail beds needed in the future. As such, the chapter serves as background for creating projections in the next chapter for likely jail bed needs in the future under various scenarios, and as a prelude to recommendations at the end of the report.

The options are grouped into several broad categories: improvements within the jail; broad opportunities to reduce jail days within clusters of the jail inmate population; specific opportunities for expansion or modifications of existing ATI programs; emerging community-based options; and opportunities or challenges facing the community. These options should not necessarily be viewed as specific recommendations at this point, but rather as options for consideration, along with their implications. The specific recommendations, how they interact with each other, and the timing of potential implementation, are discussed in the final chapter.

Options for Improvements within the Jail

A number of options should be under consideration concerning services available within the jail. Nearly all of them at some point involve changing the footprint of the jail such that more space would become available for the expansion of services.

Consideration of Expanding Medical Services

One nurse currently provides medical services for the jail 40 hours a week. Two days a week have no coverage, except on a back-up, on-call basis. Physician and nurse practitioner services are also available about six hours per week. Several options have been suggested in various interviews for consideration by the County, including:

Status quo: continuing existing services, which would focus primarily on basic medical assessments at inmate admission, meeting acute medical needs of inmates, providing rudimentary oversight of inmates undergoing detox, and managing paperwork, coordination of medical records and other management functions for all inmates in the jail at any particular time. By all accounts the current nurse provides well-respected medical coverage, but there are limits as to what can be done within 40 hours, e.g., little attention is able to be provided to those with chronic medical needs, and there is little time for focus directed to ongoing mental health and substance abuse issues. Currently Correction Officers are often needed to help pass medications, even though they are not trained to do so from a medical perspective.

Creation of second nurse position: This option would involve the creation of a second nursing position, either part-time or full-time, to at least provide basic coverage on a regular basis seven days a week. Depending on whether this is a part-time position or a second 40-hour position, this could enable some overlap of time with the existing nurse and would enable greater attention to passing of medications and increased focus on inmates not now receiving much attention for ongoing medical and other issues, as referenced above.

Creation of 24/7 nursing coverage: Some have suggested that such coverage, or at least something between a second nurse and 24/7, would recognize the realities of life in an institution that has inmates with medical needs that may surface at any time. This would also provide coverage for middle-of-the-night admissions to the jail, and enable more effective medical support and oversight for inmates in various stages of withdrawal/detox.

Practical Reality: The status quo seems inadequate for the reality of the current jail facility. Office space is limited, coverage is limited, and with the expansion of opioids and heroin use in the community and finding its way into the jail, the basic coverage now provided seems inadequate to meet existing inmate needs. Any consideration of additional space for detox cells (see below) would presumably also include the need for added nursing staff. Whether expansion of nursing services will have any direct impact on the number of beds needed in the future is debatable, but better medical coverage for those in the jail would be strengthened, and could potentially help more inmates return to the community in better medical condition than is now possible.

Expanding Mental Health and Substance Abuse Services

Currently some services are available, but given the evidence suggesting that the vast majority of inmates at any given time have mental illness or substance abuse issues, or both, the current on-site coverage seems inadequate. As discussed earlier, the Mental Health Department is expanding its staff hours devoted to the jail from about six per week to 20, with additional time devoted to basic screening and assessment of needs of inmates, creating expanded group programming, and helping prepare inmates to access needed services in the community once released from the jail. Some expansion of substance abuse services is also in process through the efforts of CARS, with much of the focus also being on helping prepare inmates for the transition to needed services post-release.

Practical Reality: With data suggesting that many inmates have significant mental health and substance abuse needs, including addictions, expanded services are needed within the jail, so the recent developments in terms of expanded assessment and program services are welcome. Although such services may not in and of

themselves have an immediate impact on the number of beds needed in the jail, they may help reduce recidivism and thereby help reduce the numbers of inmates in the future. Furthermore, by providing a better level of ongoing basic screening of inmates for mental health and substance abuse issues, these initial screenings may also have the direct effect of identifying inmates who may need and profit from more extensive substance abuse assessments that can help access needed inpatient rehab facilities outside the jail (as discussed next) or the necessary mental health care.

Expanding Substance Abuse Assessments and Treatment Referrals

As discussed earlier in the report, historically about 1.3 inmates per week have received extensive substance abuse assessments for the purposes of determining needs for rehab treatment, typically in a non-jail in-patient setting. Given the data and extensive anecdotal evidence of major unmet needs within the jail for expanded rehab services, the fact that so few comprehensive assessments have been done in the past seems puzzling. Typically in the past, assessments have only been done upon referrals authorized by a judge. Expansion of referrals direct from the jail would seem appropriate, and the expanded initial screenings of inmates currently being initiated by mental health staff may provide the data needed to initiate such referrals.

Up to this point, many inmates appear to have in effect been stuck in the jail, when what they really need and would most benefit from is removal from the jail into a residential rehab facility. If the potential for such a referral is only even possible for a little over one inmate per week, the jail will continue to house people with substance abuse issues who in many cases need a level of service and treatment that the jail cannot provide.

Not only should more inmates be assessed, but how soon they are assessed, and how quickly they can be referred to and placed in a residential rehab treatment facility once the assessment is complete, will determine the ultimate impact on the jail population in the future. In the past, the assessments that have been done have taken an average of 3.5 weeks from the time of admission to be undertaken, followed by another 11 days from the completion of the evaluation until an actual formal referral to an existing bed has been initiated, and then an additional 3.5 weeks on average before the actual treatment placement occurs. Thus historically the entire period from intake to final treatment admission has taken 8 weeks while the person needing intensive treatment remains in jail.

Moreover, once services are supposedly accessed, there are no guarantees that the treatment will actually be activated. Anecdotally, we heard several stories of inmates

being transported to services only to leave virtually before the transporting Correction Officer had returned to the jail. And indeed, about 40 percent of the assessments did not result, for various reasons, in treatment being activated. But in part this appears to be due to little preparation of the inmate for the rehab experience, little formal follow-up with the inmate and the rehab facility once a “match” has been made, and the fact that most of the referrals have involved rehab facilities outside the county.

Improvements are expected in each of these areas: Better preparation for the rehab experience and better linkages with rehab agencies in the future both appear to be in process now, under the current DSS nurse responsible for substance abuse assessments), and increases are expected now and over the next two years in the number of in-county rehab slots (both as a result of increased beds being developed through CARS and the increased numbers of beds expected to become available as more people cycle through shorter periods of rehab, based on new funding approaches). The combined effect of these developments is expected to help make more rehab beds available, and higher proportions of assessments and referrals to result in actual treatment being activated and successful.

If ways can be found to increase the number of assessments initially, to expedite the process at each step along the way, and to activate successful treatment in greater proportions of cases, it should be possible to remove significant numbers of people from the daily jail census who would be better served in a different type of facility.

Practical Reality: Knowledgeable estimates suggest that perhaps 10 percent or more of the inmates in an average night should be in rehab treatment – roughly 8 to 10 persons per night. By increasing the number of initial screenings, it should be possible to provide evaluations of this subset of the inmate population on an ongoing basis within a few days of their admission to the jail, rather than waiting several weeks. That is, by enabling access to assessments to bypass a judge and be activated by jail officials, assessments should be more frequent and more timely. By building close working relationships with key inpatient facilities, as the current nurse responsible for the assessments is doing, it should become possible to expedite placement in facilities. With shorter lengths of stay in residential rehab facilities resulting from changes in regulations and funding requirements, it will be possible through increased turnover and churning within facilities for more people to be admitted, thereby helping reduce the waiting time to access inpatient beds. And within the next two years, additional residential beds will be available within the county via the new CARS rehab facility, which should increase the timely access to beds in the future. All of this considered, if approval is given for more assessments to be done on an expedited basis soon after admission to the jail, **CGR believes that it is reasonable to assume within the next**

two years a reduction of 5 inmates per night through referrals to inpatient rehab facilities.

Potential for Expanding other On-Site Services

Even services currently provided within the jail are often limited in terms of how often they can be offered, not so much because of unwillingness on the part of providers to be more present, but because of the juggling of available space which is needed by jail officials to fit services into limited space constraints. Many of the programs offered once a week would be open to expanded offerings. Recreation opportunities within the jail have been curtailed as a result of converting recreation space to more cells last year. Space for nursing/medical services, along with mental health and substance abuse services, has been limited. Constant juggling of space is needed to accommodate attorneys, as well as the frequent staff from agencies such as OAR, Pre-Trial Release, re-entry programs, and others needing access to inmates for various purposes. The potential to add a secure detox capacity within or adjacent to the jail, which some have advocated (see further discussion below), would also create the need for more space. Advocates for inmates as well as for improved conditions within the jail – for both inmates and staff – continue to push for expanded services, and the space to provide them, for both individual and group sessions.

Practical Reality: Significant expansion of programs and services for individuals and groups of inmates may have limited immediate ability to reduce the number of beds needed in the jail. However, with a greater ability to provide services and inmate connections that can help improve access to services post-release, there could be a significant impact on beds needed in the future, as a result of reduced recidivism. In any event, expanded services will only be possible if increased space can be made available within the facility.

Consideration of Expanding Space

Within the existing footprint of the jail, there appears to be limited opportunity to create more space for expanded services. Some of the space that had been available was repurposed last year for seven additional cells. Additional space could of course be created via new jail construction or adding space to the existing facility. Some reconfiguration of existing space in the current facility could also be considered. The possible creation of added space for services would seem to involve one or more of the following possible options:

New jail construction: A new jail could be built by the County, incorporating more modern design and supervision techniques, and creating expanded space for services as part of the process. Such a facility would create more high-quality living space for

inmates, and a more pleasant work environment for jail staff, and eliminate some of the maintenance and related issues associated with the current older facility. It could also create staffing efficiencies not possible within the existing jail. But there appears to be little political appetite for building a new jail, and analyses conducted as part of this study do not point to the need for more beds to justify a new or expanded facility.

Expanding the current jail facility: Rather than building an entire new jail, expanding the current facility by adding a direct supervision unit could create added service capacity, create some flexibility for new cells to accommodate peak jail populations over and above the core capacity, and create space for a detox unit, should that be considered.

Conversion of existing cell space: As of now, there is little or no opportunity to create new service space from existing cell space. Should the numbers of inmates in the future be significantly reduced such that blocks of cells could be eliminated, that reality could potentially change. The potential for effecting such reductions is discussed in this chapter.

Converting Sheriff's administrative space for services: The Public Safety Building which houses the jail also houses the Sheriff's administrative offices, as well as space for the road patrol and other services having little or no relationship to the jail. Discussions have occurred as part of this study, and in preceding years, concerning the possibility of relocating those functions and staff to a different location apart from the Public Safety Building, thereby opening up considerable space for expanded services for jail inmates, including the possibility of a secure but isolated detox facility (see below).

Practical Reality: The need for expanded space for services is real, and it is immediate and urgent. While it may be possible to reduce the number of jail cells/beds needed on an ongoing basis, there are no guarantees and, even if options suggested for consideration in this chapter are implemented and have the anticipated impact, some of that will take time for the effects to be fully realized in the jail. Thus even if it becomes possible to reduce the number of jail cells in the future, that is likely to take at least a couple years before that becomes feasible, and before any reductions have sufficiently withstood the test of time to justify eliminating jail cells and beds, and repurposing the space. Thus the most practical option for creating more space to expand internal services in the jail on a relatively quick basis may involve moving the Sheriff and road patrol operations to a different location and reconfiguring that space for other uses related to the jail.

Aspirational Options for Jail Day Reductions

Before examining specific opportunities to modify or expand programs to reduce the jail population, this section notes some broad aspirational opportunities to effect jail day reductions within various subsets of people currently populating the jail. How some of these potential reductions could occur follows in the subsequent section in the discussion of specific program-related potential reductions.

Potential to Reduce Recidivism

Our analyses of the 2016 admissions to the jail indicated that 54 percent of them had previously been admitted at least once, including 39 percent with multiple previous bookings. These previous jail admissions represented more than 47,500 jail days over the years. Reducing the revolving-door prospects of individuals – by improving access to services upon release from jail, by helping them obtain jobs and housing, by getting them the mental health and substance abuse treatment they need – could have a significant impact on these numbers, and more importantly on the lives of the individuals affected. What if community initiatives designed to reduce recidivism could be implemented such that roughly one-third of those days could be prevented? From an aspirational goal perspective, if 15,000 of these previous days could be eliminated, this would represent the equivalent of 41 fewer jail beds on an annual basis, presumably spread over a number of years. Expanded effective re-entry services, along with other new initiatives and improvements to current services outlined below could go a long way toward making such reductions possible.

Potential to Reduce Unsentenced Jail Days

About 46 percent of unsentenced admissions wind up in jail for more than a week before being released prior to disposition of their cases. At almost 700 unsentenced admissions per year, if all those who get released at some point anyway could be released within a week, this could have the practical effect of saving an average of almost 16 occupied beds each night throughout the year. Again, options discussed below could help begin to make such reductions possible.

Potential to Reduce Sentenced Misdemeanor Jail Days

Changes in sentencing practices that would keep numbers of misdemeanor jail sentences at their 2016 level, compared to the average of the previous six years, would mean about 50 fewer jail sentences a year. At an average sentence for misdemeanors of 25 days, this could result in a savings of about 1,250 jail days a year, or a little over 3 beds per night compared to previous averages. Expanded use of selected ATIs could help make this possible.

Presumption of Non-Financial Release

The presumption of non-financial release for misdemeanors and even some less serious, non-violent felony offenses – as being promulgated by the new District Attorney and as advocated in the 2016 report on municipal courts – is likely to have a substantial impact in reducing the future numbers of unsentenced inmates admitted to the jail. At this point it is too early to calculate what effect this will have on future jail census numbers, but it seems likely to have had some effect already in the reduction of the jail's average occupied beds per month in the second half of 2016 and the first five months of 2017. To a great extent, the practical impact of this policy change should be reflected in some of the specific projected impacts of other options outlined in this chapter.

Practical Reality: As an early suggestion of at least part of what impact a non-financial release policy could have on the jail, analyses reported earlier indicated that releasing all inmates with bails of \$1,000 or less without financial conditions at or prior to jail admission would save the equivalent of an average of 4.6 occupied jail beds avoided per night. We are not counting those as unique beds avoided in our cumulative totals, assuming that they are covered as part of other jail days saved under specific options discussed below.

Potential to Continue to Limit Board-Outs

The recent substantial reductions in the number of boarded-out inmates should have a continued positive effect on the jail census numbers in the future. The numbers of board-outs, and their average stay in a non-Tompkins jail facility, were both significantly lower last year than in any recent year, and the numbers continue to be down this year to date – from an average of 8 board-outs per day between 2012-2015 to an average of 2 in the second half of 2016 and an average of 1 per day thus far in 2017. While some board-outs may continue to be needed in the future, given classification requirements and occasional potential peak nights, it seems reasonable to assume that average board-out numbers should remain much closer to the numbers of the past 10 months than to the averages over the preceding years.

Potential to Reduce Parole Impact on Jail

An average of 45 NYS parole violators are admitted to the County jail each year, strictly on parole violations with no local charges or retainers, and they stay for an average of almost two months. They account for an average of about 5 inmates per night, and as many as an average of 6 early in 2017. The County has no direct control over these inmates, but what would happen if Tompkins, perhaps in conjunction with other counties, were to lobby the state to reduce the number of parole violators

residing in county jails, or at least to reduce the amount of time they spend there before being “reclaimed” by the state? This may be a futile effort, but if in the future the number of parole inmates, and/or their average length of stay, could be reduced by half, this would save the County jail an average of 2 or 3 beds each night. It should also be noted that some defense attorneys advocate to keep their clients in the local jail as long as possible to remain close to family and community connections.

Potential to Reduce the Number of Black Inmates

Many factors within both the larger community and the law enforcement and criminal justice systems contribute to the disproportionate number of African-American/black inmates, and particularly African-American/black males, in the County jail. The large majority of inmates in the jail are white, but about 22-23 percent of all inmates in recent years have been black (including 24 percent of all male inmates), compared to their 4 percent representation within the larger community (or about 5.5 percent when those of mixed races are factored in). A wide range of broader societal issues related to race, poverty, housing, education, employment and transportation all contribute to the jail profile at any given time. Issues within the criminal justice system related to arrest and charging patterns, bail decisions and sentencing decisions – and how they are affected by these larger community issues – all are beyond the scope of this study to resolve, but all of these criminal justice and community issues need further attention by the Tompkins County community. The community and the systems that send people into the jail, or to other options, need to be aware of these disparities and disproportions, and consider the types of actions that need to be taken as part of an aspiration to reduce these disproportions in the future.

Options for Strengthening ATI Programs

Earlier in the report we provided summaries of the current Alternatives-to-Incarceration programs operating within the County. Most of them offer opportunities to expand or be modified in ways that have the potential to reduce the number of jail beds likely to be needed in the future. To some extent, the ability to maximize projected impacts of these options may depend on parallel efforts to educate judges, other court officials, attorneys, Probation Officers, and community-based agencies and advocates concerning the value and appropriate use of these and related options going forward.

Potential to Reduce Violation Rates within Probation

As noted earlier, the proportion of probation cases with violations filed in Tompkins County consistently exceeded the non-NYC statewide proportion of violations filed by almost half from 2012 through 2015, before closing the gap in 2016 – in part due to

high rates of sanctions being imposed through the two adult Drug Courts in the County. Many of these violations resulted in jail re-sentences.

Practical Reality: Although the Probation Department has a comprehensive process in place to review internal sanctions and possible violations that may have jail implications before they are referred to a court, there may be opportunities to make greater use of ATI options such as Electronic Monitoring, Day Reporting and other options more frequently in the future, in an effort to avoid some of the jail sanctions that have resulted from violations in the past.

Potential for Expanded Use of PSIs to Reduce Jail Sentences

Probation has considerable effect on the sentences imposed upon conviction, based on the Pre-Sentence Investigations they are often requested to provide the court. Despite Probation policy of avoiding jail sanctions wherever possible, consistent with community safety considerations, in recent years the PSIs have recommended probation and related alternatives less often than judges have pronounced actual probation sentences, and conversely judges imposed fewer jail sentences than were recommended by the PSIs.

Practical Reality: The data suggest that if PSI recommendations were in the future to emphasize greater use of probation sentences – perhaps combined with combinations of ATIs and other community-based services – they might have a greater effect in shaping increased future proportions of non-incarceration sentences than has been the case in recent years. By combining straight probation recommendations with the possibility of probation plus ATI options in some cases in which a jail recommendation might previously have been made, there might be opportunities for PSI report writers to challenge judges to expand their use of non-jail sentences in the future. There are no data on which to base potential impact of such changes in recommendation patterns, but CGR estimates that these could result in two to three fewer inmates in jail per night. We believe these saved beds are reflected in the program-specific reductions suggested below.

Potential to Increase Pre-Trial Release Impact on Jail

The Pre-Trial Release program is deemed universally by those in the criminal justice system to be a respected provider of useful objective information that helps shape pretrial judicial decisions. However, our analyses suggest that the program could have significantly more impact than it currently does. Data suggest that more unsentenced inmates could be interviewed, as suggested earlier, including revisiting cases that remain in jail several days after admission. Data also indicate that PTR recommendations have often been more conservative than other pre-trial release organizations in other communities, having advocated continuation of some level of

bail in almost two-thirds of the cases. There appears to be a significant opportunity for this program to become even more valuable in the future in helping to minimize the daily jail population.

Practical Reality: CGR believes that County Probation and PTR officials have a realistic and valuable opportunity to expand and modify this program in a way that could have the potential to further reduce the number of inmates in jail each night. We believe it is realistic to expect that it could at least double the number of PTR interviews completed per day – up from the current average of about one interview per day – including revisiting cases not released within a few days of admission to the jail, particularly those remaining on low bail amounts. And that it is also realistic, consistent with community safety, to increase the proportion of non-financial release recommendations from the current 35 percent to 60 percent, combined with expanded use of monitored release conditions where appropriate. Even this suggested expanded proportion of non-financial release recommendations is more conservative than other pre-trial release organizations in other communities. And this direction would be more consistent with the expanded community focus on an increased presumption in favor of non-financial release.

Consideration could be given to testing the necessary changes in the process on a pilot basis and monitoring the impact on outcomes and staffing implications before making any final determinations as to the value of implementing any changes on a permanent basis.

With an addition of 175 to 200 additional interviews over the course of a year – roughly one additional interview per day – and a more aggressive recommendation policy, we calculate the following potential impact on the jail: 200 interviews times 60 percent non-financial release recommendations, with an estimated 18 released days saved that would otherwise have been spent in jail per case equals the potential for reduction of an estimated 2,160 fewer days in jail – **an average of about 6 fewer beds per night.**

Potential to Expand Use of Electronic Monitoring

Most of those we spoke with about ATI options were highly enthusiastic about the potential for expanding the relatively limited previous use of EM devices as alternatives to jail sentences or sanctions, and as possible additional conditions of release to help expand the numbers of unsentenced inmates who may otherwise remain in jail unable to meet bail. With 16 units already in place, it is believed that sufficient numbers exist to enable substantial increased use of this option. There is potential for expanded use of this option with limited budget impact, as in every recent year, actual expenditures for the option have fallen considerably short of the budgeted amount.

Practical Reality: There seems to be little argument about the potential for expansion of the use of this option as a cost-effective alternative to jail time. Simply at one level, it has been estimated by a reliable official that EM could help prevent re-sentencing to jail in as many as 20 percent of all Probation revocations. This would mean about 10 cases per year in which significant numbers of jail days could be saved by using this option as part of revocation proceedings.

As noted earlier, CGR has documented elsewhere that an EM program in place in another county was directly responsible for a reduction in the daily jail population by an average of almost 15 inmates per day. Given the expressed support for this option, its versatility in its ability to be used at various points in the criminal justice system, and its limited cost, we believe a reasonable estimate is that expanded use of EM could result in **jail census reduction of 10 inmates per day**. As Probation officials correctly point out, use of EM is not appropriate in many cases, but used judiciously in appropriate cases throughout the criminal justice system (e.g., as a condition of release, as a sentencing option, as an alternative to jail sanctions), evidence suggests that it can have a significant impact on the jail population, “depending on how and when it is used.”

As with PTR, a pilot project could be undertaken to test the value of expanding the use of EM with appropriate use and safeguards before making any final determinations about its ultimate expanded use.

Possible Expansion of Day Reporting

Our earlier discussion suggested that this option may have already maximized its potential for limiting the number of inmates in jail, due in part to the fact that it seems to be operating currently at close to its ideal capacity. We suggested that further impact on the jail population would only be likely if there were to be significant changes in the numbers or makeup of the Day Reporting program in the future, and that we see little evidence that such changes are likely.

Practical Reality: In general, it remains true that we do not project any future change in the number of jail cells likely to be impacted by this program in the foreseeable future. However, it should be noted that there have been recent discussions in which the idea has been raised of using DR in lieu of short jail sentences and/or in combination with reduced jail sentences. The DR facility could also be used to enable re-entry services to be provided to affected inmates returning to the community. It remains to be seen to what extent such approaches would be employed, but the ideas have appeal. For future planning purposes, we maintain our conservative estimate of **no further impact of DR on future daily jail census counts**, but County officials

should monitor the potential for expanded use of this option, and may find that some limited additional jail days can be avoided in the future via this option.

Likely Limited Potential Added Impact of Greatest Risk Supervision

There is evidence that this enhanced supervision option has an impact in reducing the jail population, as well as helping keep some out of state prisons. The question is whether any additional impact over and above its current value is likely in the future.

Practical Reality: The Greatest Risk program may have reached a saturation point. Thus we would not suggest at this point any increase in the number of referrals to the program, out of a concern that increases could compromise the ability of existing staff to provide the levels of intense supervision expected of the program. Moreover, a focused evaluation of program outcomes and impact would be important before deciding to expand the staff needed to justify any future expansion. In the meantime, our overall assessment is that the County should consider leaving the program as is, with **no likely change in the foreseeable future in its impact on the jail census.**

Limited SWAP Jail Impact without Significant Changes

The data available on this Service Work Alternative Program is unclear as to how much impact it has in reducing the local jail population. It may have some impact as an alternative to jail sentences for felony DWI cases. Beyond that, to the extent that it operates in lieu of jail, it may be in the context of providing an alternative to a probation or drug court violation or sanction that might otherwise have involved jail.

Practical Reality: As currently used, it seems unlikely that SWAP can be expected to have any realistic role in further reducing the numbers of people in jail. This could change if SWAP were to be emphasized more often in PSI recommendations, and if concerted efforts were made to educate and orient judges across the system to become more aware of the program's potential value as a viable option in lieu of imposing a relatively short jail sentence or sanction. Both should be done. But even such efforts seem likely to have, at best, the ability to reduce the jail population by an average of a bed or less per night. So, based on use of the program in recent years, it seems most reasonable to conclude that **SWAP will likely have little enhanced future impact on the jail population over and above what it has today.**

Potential Expanded Impact of Misdemeanor Drug Court

If the Ithaca Community Treatment Court (misdemeanor drug court) were to continue as is, with approximately the same size program, similar patterns of referrals and of jail time avoided, offset in part by jail sanctions, it is likely that we would see no

particular changes in the impact on the jail population already attributable to the DC operation.

Practical Reality: The counter argument is that, with some necessary changes, the program can continue to be an even more positive force, and that there are reasons to support expansion of the program. CGR believes there is sufficient need and demand for the program to justify expansion, particularly if more referrals can be enticed from the justice courts, and if the use of jail sanctions for some relatively minor “misdeeds” by program participants can be replaced by other non-jail sanctions.

If an additional 10 people were added to the Drug Court program per year, at an average jail time saved of five months per person (150 days), and an assumption of a 50 percent reduction in jail sanction days per person (five days each), this would represent a total savings of 155 days per person in the 10-person expansion cohort. That in turn would equate to a total of about 1,550 jail days saved during the course of the year, **an average of about 4.2 beds saved per day.**

This could be tested on a pilot basis to see if such an expansion could be absorbed by existing staff, or if new positions may be needed in the future if the expansion proves justified over time.

Limited Expansion of Felony Drug Court Jail Impact

The primary impact of the Felony Drug Court appears from available data to be on state prison incarceration. It has considerably less impact on the local jail population than does the Misdemeanor DC, and in some cases jail sanctions imposed on Felony DC participants actually add days to the local jail census.

Practical Reality: From the perspective of impact on the local jail, not factoring in other non-jail implications of the Felony DC, there appear to be no compelling reasons to consider major changes to the program. CGR concludes that this is a time to maintain the status quo, leaving the program essentially operating as is for the foreseeable future, with **no expected change in impact on the local jail population.**

Considerations for Future of Bail Fund

The Bail Fund operated by OAR has been an important community player in helping to reduce the impact of financial considerations in keeping people in jail. Over the years it has helped effect the release of numerous people by helping them make bail of \$2,500 or less (\$2,000 more recently with changes in state regulations). But in recent years its impact has begun to dwindle, with only 20 inmates released in 2016, compared to 67 just four years earlier.

Practical Reality: The Bail Fund may continue to enable a limited number of inmates to be released in the future, but it is not likely to have any increased effect over and above the past. And in fact, with the presumption of non-financial release increasingly a factor in setting bail and effecting release, the Bail Fund may continue to have less effect on releases than it has in the past. These funds may only be needed for use on a judicious targeted basis where other forms of release have not proved possible for a particular individual after a particular period of time.

Considerations for Future of Re-Entry Programs

As discussed in some detail earlier, there have been significant startup, evolution, communication and coordination problems with and between the two official re-entry programs in the county (URO and Cooperative Extension), including linkages with an informal but significant re-entry partner of long standing, OAR. Other agencies also have roles to play in the re-entry process, such as Probation through its employment coordinator, DSS through the role it should be playing concerning facilitation of expedited eligibility for various financial support programs upon release from jail, mental health and substance abuse providers concerning service access upon community re-entry, community housing supports, and other agencies that play varying roles. Currently, the coordination and communication between these parties tend to be fractured, limited and all too often confrontational or suspicious and lacking mutual trust. Over time, some of these relationships seem to be beginning to repair themselves, and there are signs of improvement that hopefully will continue and lead to strengthened re-entry services in the future.

Among many issues and options for consideration concerning the future of the re-entry initiatives in the County are the following:

- How should the key intent of helping connect people in jail with post-jail services be best accomplished in the future? Is it realistic to have representatives from Cooperative Extension, URO and OAR all providing various connections in the jail? If so, what should distinguish the roles of each? Should there be a single re-entry coordinator in the jail, assuming space can be provided, to ensure the most effective use of resources and to ensure that individual inmates receive the services and coordination they need?
- How should the ongoing efforts of the jail nurse, the substance abuse assessments done by the DSS nurse assigned to the assessment process at the jail, and the emerging mental health assessments of all inmates be built into the assessment process that the re-entry programs are attempting to develop, implement and coordinate?

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- How should re-entry efforts best take advantage of the fact that the mental health system has case managers within clinics, and numerous health home care managers, all of whom can potentially help ex-inmates connect with a range of services once individuals are referred initially to them? What implications do the existence of such services have for existing re-entry staff and how they remain connected with inmates once they return to the community? What are the implications for the URO mentors and how they function?
 - Would extended use of existing systems help free up more time of the re-entry staff to cultivate the initial inmate connections within the jail, and prepare them for discharge with the appropriate tools to proceed, with less need for focus on post-release connections? Should the primary focus of re-entry staff going forward be on identifying individual needs of inmates and preparing them for re-entering the community and the connections they need to make, as well as the preparation of service providers for particular issues they are likely to need to address as they work with ex-inmates?
 - Who needs to be working with community agencies to ensure the development of culturally sensitive communications skills in working with individuals from varied backgrounds coming out of the jail?
 - Should the existing re-entry programs merge, or at least develop a clear structure with clear roles assigned to each? Should there be a single overall Re-entry Coordinator who holds all staff and functions accountable for clearly-defined goals? How do these programs coordinate with the Criminal Justice ATI board? Who at the County level is responsible for broad oversight of the overall re-entry efforts, beyond just the two basic programs, to ensure that overall systemic goals are being articulated and met?
 - Who is responsible for ensuring that people leave the jail with clear plans and actions in place, and connections identified to address assessed needs? The idea of having discharge plans developed and discussed with at least the inmates with the highest likelihood of recidivating following release seems to make sense, particularly if they can be developed in conjunction and building on expanded in-jail services.
 - Is the initial Reentry Subcommittee report's recommendation of creating two full-time Re-entry Coordinator/ Discharge Planner positions still viable, or are other models preferable? There seems to be a logic, based on what has been learned to date by the re-entry initiatives, to having designated people with specific responsibilities for developing discharge plans and helping make the initial handoffs to community organizations which in turn are charged to follow up with the inmates once they return to the community.
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- What should be the role of mentors going forward? How should such resources be most effectively used? Are they best used to develop connections in the jail, or would they be more effective based in the community as resources available to help returning inmates make sure that they are able to access the services they need? Are changes needed in the allocation of the mentors and how those resources are best deployed to meet the needs of inmates re-entering the community?
- Is there value to having a central place for returning inmates to coordinate with post-release services in the community? Is there value to having a central office or location prominently featured in the community as a place where returning inmates can go to obtain support in accessing services? Is there value to using a location like the Day Reporting center for such purposes, or at least for access to employment/career counseling, given the Day Reporting staff person located there with an employment focus?
- How will the success of the re-entry efforts be measured in the future? What are the reasonable expectations of success, what are the best metrics to assess progress against those expectations, what are the best criteria to use in determining who gets primary attention in the re-entry process, and how will the community and funders know that the efforts are being successful in reducing recidivism and providing help and hope for those returning from the jail to the community?

Practical Reality: There are obviously many questions that need resolution related to the future of the re-entry initiative. It is critical that these issues get satisfactorily resolved, because the future ability to reduce recidivism and help keep many community members productively engaged in the community and outside the criminal justice system largely depends on it. When these issues are resolved and an efficiently-functioning re-entry system is fully in place, we believe that it is reasonable to anticipate that these efforts to limit the number of future “jail repeaters” will have a significant impact in reducing the future daily jail census. There is little quantitative basis for estimating what that impact will be, but we think it reasonable to **assume a reduction of 3 to 5 beds a night could result within two to three years of full re-entry implementation.** However, given that this initiative is still new and the outcomes not yet clear, **we have chosen to be conservative and not to include this estimate in our composite total days of potential impact on the jail population.**

Emerging Community-Based Options

In addition to the existing ATI options discussed above, other options are in various stages of planning and development within the community, each with potential

impacts on minimizing the jail population in the future. They are briefly summarized below:

Re-Entry Transitional Housing Support

OAR has received funding support to underwrite the purchase and development of this home, Endeavor House, in Ithaca. It is designed to provide stable transition housing for four or five former inmates returning to the community. From this support base, it is anticipated that the housemates will be able to work on other re-entry issues such as employment, mental health and substance abuse and other issues pertinent to each individual.

Practical Reality: With the home scheduled to open later this year, it will obviously be a while before its impact can be determined. Given its goal and working premise, it seems reasonable to assume that over time, working with people with a history of incarceration, having an opportunity to help stabilize their lives could have the practical effect of reducing future recidivism. We estimate a cumulative effect across all residents of the **equivalent of 1 bed per night avoided** during the course of a year. Because this is conjecture at this point, with no base of experience, **this is not counted in the expected total impact of options on the jail population of the future.**

Expanded Rehab Residential Treatment Facility

In addition to the rehab facility already operated by Cayuga Addiction Recovery Services (CARS), a new 25-bed rehab facility is being developed, with particular focus on women. The facility is targeted for a late 2019 opening.

Practical Reality: Because of its ability to reach out to women who have been historically delayed in being able to access rehab inpatient services, and because it adds local beds to the residential treatment options available to local residents, this new facility should help residents reduce the time from assessment to admission to treatment, without having to wait long periods to access a facility in other parts of the state. We are estimating, perhaps conservatively, that this option, by expediting access to treatment services for several women per year, will result in a **cumulative avoidance of a bed or more each night of the year on average.** This would be over and above the estimated five bed nights saved via the expanded substance abuse assessment and placement initiative discussed earlier in the chapter. This savings would of course not kick in until around 2019-20 when the facility is up and running.

Options for New Detox Facilities

There appears to be universal acknowledgement that too many people are admitted to the jail on a regular basis with serious alcohol or substance abuse overdose issues in need of detoxification. They are admitted to the jail in the absence of other options. The local hospital will provide some basic short-term detox in its emergency room, but without an overlapping additional medical issue, the hospital is unlikely to admit the person for continuing oversight. Ideally detox should be overseen in the context of a medical model, but with that option only partially available now in the community, admission to the jail has, ironically, become the only viable alternative for the several-day detox process to run its course, albeit with little medical oversight.

In response, the Tompkins County community has recognized the need for a non-incarceration option to providing detox services, and two models are currently under consideration:

Voluntary Detox/Stabilization Center. A proposal from the Alcohol and Drug Council, in conjunction with Cayuga Medical Center has received a half million dollar initial grant toward the development of a 20- to 24-bed voluntary residential detox facility that would combine an anticipated three to five days of detox followed by up to 14 days of stabilization. This in turn would be followed as needed with additional rehab time to be provided in the CARS residential facility. This detox center is expected to help relieve demands on both the local medical community and the jail.

Secure Short-term Detox Facility Linked to the Jail. Under this option, those needing detox, at least those who surface within the criminal justice system, would be referred as now to the jail, but to a detached detox unit. Rather than being integrated with the rest of the inmate population, those experiencing various phases of the detox experience would be isolated in a separate detox unit with appropriate oversight and medical support not now routinely available within the jail. Proponents of this option typically also support the voluntary detox option, but fear that without a secure option to which a person needing detox could be referred under court order, individuals could leave the voluntary facility prior to having received the full array of detox services and support. Once the initial detox has occurred under this secure option, it is possible that the person could then be transferred to the voluntary facility for stabilization and possible rehab follow-up. For a detox unit to be linked with the jail, it would presumably need to be either part of an addition built onto the current jail facility, or space would need to be cleared by reconfiguring the current Public Safety Building space by moving Sheriff and road patrol functions to a different location.

Practical Reality: It is possible that the community could go from no local full-service detox program to as many as two within a relatively short period of time. One option

could also be to try the voluntary model by itself on a pilot basis and see how well it does in retaining those who would otherwise have been referred to the jail for the detox period, and based on the trial period, then determine to what extent an additional secure experience in a separate unit may or may not be needed at the front end of the process.

Either way, whether with a single facility or a combination, criminal justice officials anticipate a major impact on the current jail facility. Informed estimates are that as many as 10 and some suggest more inmates per night are dealing with immediate drug/substance abuse or addiction issues at various stages of the detox process – inmates who would, under detox proposals, be removed from the main jail and its limited medical resources and placed in a separate detox unit with full medical oversight and treatment protocols. For planning purposes, we believe a realistic estimate would be to assume that the existence of the voluntary detox facility already in development, perhaps subsequently supplemented as needed by a front-end secure detox unit adjacent to the jail, would **remove an average of 8 inmates per night from the current jail facility**. The voluntary detox facility appears to be on track for startup within the next year. We anticipate that the projected reduction of occupied beds in the jail could begin as early as late 2018 or in 2019.

Proposed LEAD Program

The proposed Law Enforcement Assisted Diversion Program relies on law enforcement officers to divert individuals at the point of arrest or field contact to a community-based intervention, as part of an effort to divert them from, or minimize, their involvement in the early stages of the criminal justice system. The intent of LEAD is to refer individuals to services designed to address the individual's underlying lifestyle, medical or behavioral health or substance use needs, with the goal of helping get the person's life on track and avoid future recidivism within the criminal justice system. To the extent that officers are already issuing appearance tickets, the addition of an accompanying diversion/service referral may be seen by some as a logical extension of current efforts, as long as a person is available to follow through on the referral. A case manager is typically part of such a program, as the person accepting the handoffs from law enforcement and helping to effect the referrals and followup with service and treatment providers. All of this concept seems to have support within Tompkins County at this point, but no case manager position exists, and implementation has yet to begin.

Practical Reality: The ability of this proposed program to succeed is dependent of course on the cooperation of the local law enforcement community, and equally on the effectiveness of a case manager to make appropriate referrals to community

agencies, and to ensure that needed services result from the referrals. It seems reasonable that any decision about the case manager position should be made in the context of discussions about the re-entry program. For example, could a position that is part of the re-entry structure moving forward also double as the point person/case manager for LEAD referrals? Or could there be a linkage with a care manager in the health home network within the behavioral health/mental health system? Such efficiencies would seem worth exploring before final decisions are made.

LEAD would appear to be a promising opportunity with the potential both to divert individuals in the short run from the jail, as well as to have an even greater longer-term impact on reducing recidivism. Without knowing how this initiative may evolve, and how extensively it may or may not be implemented, **it is premature at this time to estimate any jail day savings resulting from this proposed approach.**

Additional Options for Consideration

In addition to the options outlined above, that either already exist or are in various stages of planning and implementation, various other initiatives from other communities seem worthy of community consideration. Some have been tested and evaluated in other communities, while others are more in the conceptual stages of development. Some of the more promising of such options are briefly summarized in an Appendix to this report.

Opportunities/Challenges Facing the Community

Beyond issues discussed above, a variety of broad issues or challenges face the Tompkins County community that impact on the overall quality of life in the community and, at varying levels, on the numbers and makeup of the current and future jail population. These are issues which go far beyond the scope of what CGR was asked to do in this study, and in many respects are part of ongoing community conversations. They are briefly mentioned here only in passing, more as reminders of community-wide issues that may not bear directly or immediately on the jail population, but which certainly have an effect on the community environment which can impact the jail population of the future. We believe each of these is worthy of further consideration by the community. We comment in more detail on some of these and related issues in the context of the recommendations made in the final chapter. These types of issues include, but are not necessarily limited to:

- Need for expanded affordable quality housing, expanded employment opportunities, transportation that can meet needs of rural residents and residents

working in off hours – needs that affect those returning from jail as well as the broad community. Expanded attention to these issues can also have a preventive effect in helping reduce motives to enter into criminal behavior.

- Perceptions of racism in the community and within the criminal justice system, and related issues of inclusion or lack thereof in discussions about solutions to community issues. These perceptions are heightened by data reflecting disproportionate concentrations of people of color in the criminal justice system.
- A related issue has to do with the perception among many that there needs to be increased focus on cultural competence across public and community-based agencies that are integral parts of many of the options raised above for community consideration. As agencies deal with diverse residents in the community, and are asked to work with growing numbers of individuals from diverse backgrounds returning from the jail, it will be increasingly important that the internal culture of these agencies is sensitive to different cultural backgrounds and that staff are comfortable working with, and sensitive to, people coming to their agencies with increasingly diverse backgrounds and expectations.
- Restorative justice concepts and approaches have been raised during our community conversations as potential new ways of resolving issues more typically addressed in confrontational modes within the criminal justice system and other segments of the community. The potential for developing community leadership around such issues has been discussed, and this is addressed further in the final chapter of the report.
- With community residents between the ages of 16 and 24 making up the largest segment of the adult population in the county, and the proportions of those ages beginning to decline in the jail, there appears to be an opportunity to build on and reinforce those trends by providing expanded services targeted to young adults in their crime-prone years, with more focus on employment readiness, training and job opportunities, and on expanded GED, college readiness and non-college track educational opportunities for those outside the local college and university settings – all designed to provide options that will help prevent engagement in the criminal justice system among young adults in the future.

Summary Impact of Potential Jail-Reduction Strategies

Based on the options discussed above, Table 45 summarizes what we believe to be realistic estimates of jail bed days that could be saved/avoided per night if the following strategies were to be implemented by Tompkins County:

Table 45

Proposed Inmate-Reduction Strategies and Estimated Bed Days Saved

Strategy/Opportunity	Average Beds Saved per Night
Expanded substance abuse assessments and expedited access to residential rehab treatment	5
Increased Pre-Trial Release impact	6
Expanded use of Electronic Monitoring	10
Misdemeanor Drug Court expansion	5
Creation of medical detox apart from current jail	8
Total projected impact of beds saved per night every year	34 beds
Total beds saved after applying 15% correction factor	29 beds

CGR believes these to be realistic estimates of jail days that could be avoided or saved each night during the year, once these strategies are fully implemented. We believe that each of the potential approaches could be in place within a year, assuming the detox center is up and running that soon. We anticipate that with time factored in to enable the proposed strategies to be fully implemented and tested, the full jail-cell-reduction impact would be apparent within the next two to three years.

The table reflects the fact that we prefer to be conservative in our estimates, so we have applied a correction factor to our estimates of 34 beds saved per night. Based on the assumption that there could be some overlap in the above estimates (e.g., assume use of an EM device may help make possible a pre-trial release under supervision), we have assumed that there could be as much as a 15 percent overlap in these numbers. We have therefore applied a .85 correction factor to the total of 34. Thus for planning purposes, we are assuming that **full implementation of these options would result in a reduction in the average jail census per night of 29 beds** below current census counts, and below future projections of occupied beds, as outlined in the next chapter.

The actual number of potential reductions in occupied jail beds could be even higher in the future. We have not included in these estimates the following additional potential savings that we believe to be reasonable in the future:

- Re-entry services once fully implemented: 3-5 bed days saved per night
- Transitional housing support once fully implemented: 1 day
- New CARS rehab facility once fully implemented: 1 day
- Changes in PSI recommendations: 2-3 days

- Parole if can obtain state support: 2-3 days
- Days saved by releasing all those with bail of less than \$1,000: 5 days (we have not counted this separately on the assumption that these days are covered in other strategies, but it is possible that at least one or two of these days would not be covered elsewhere).

Thus we believe it is completely realistic to plan for a reduction within two to three years of 29 beds per night, assuming these strategies are fully implemented. We also think it is not unreasonable to consider that this could be a conservative estimate, and that actual reductions could wind up closer to 35 beds per night over the next few years as other longer-term approaches/strategies are implemented.