



# Mentally Ill Offenders in Prison:

Using Data to Examine Issues, Improve Practices

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## Issue #1: Good Data

- Trustworthy source/definitions
- Reasonably complete
- Documented
- Accessible for analysis



## MI Data in Iowa

- Source: Psychiatric diagnosis
- Reasonably complete 
- Documented: ICON-Medical Module
- Accessible for analysis: Match medical & operations data (ICON) on offender ID



## Improved practices: Identification of Mentally Ill

- Structured formal appraisal process
- Screening tools (admission, transfers)
- More psychiatrists

...& Improved counting rules



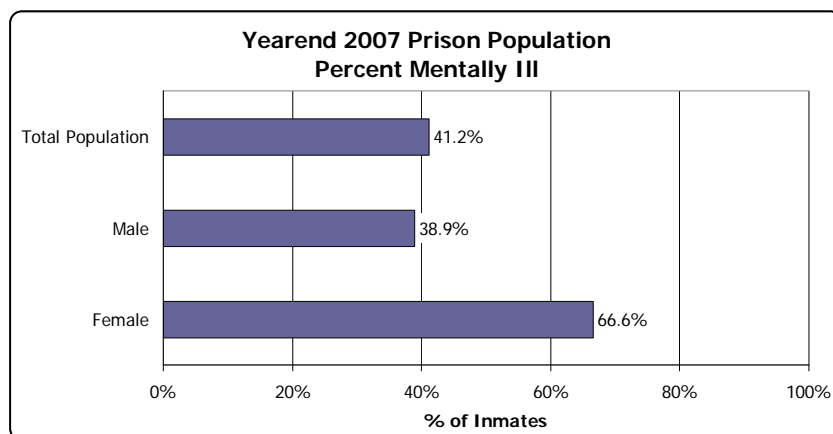
## Prevalence - Then

- About 1 in 5 prisoners in Iowa has a diagnosis of a mental illness.

-- 2004 data



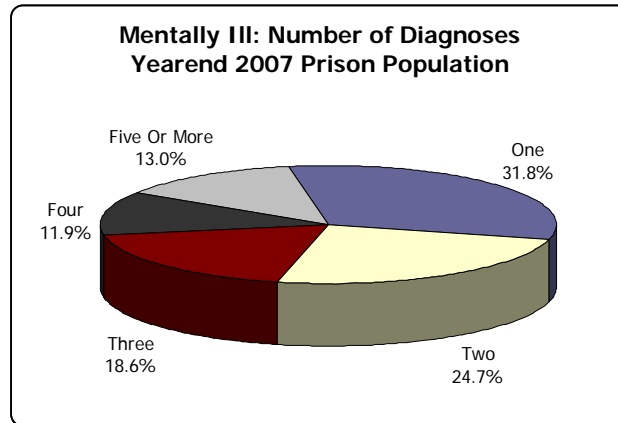
## Prevalence – Now



Source: ICON/ICON-Medical



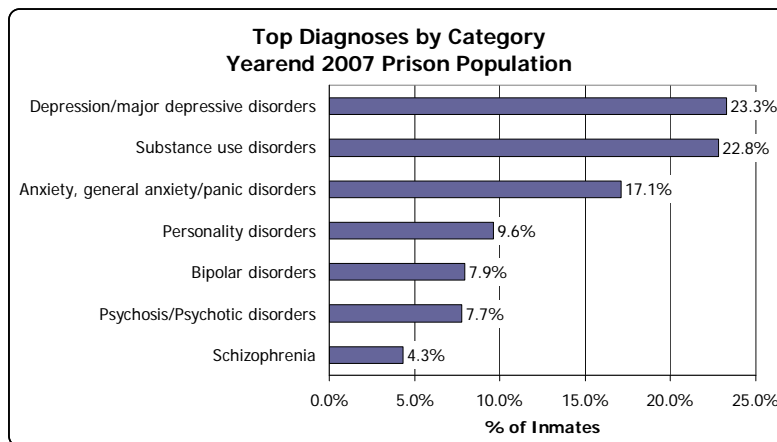
## Prevalence – Diagnoses



Source: ICON/ICON-Medical



## Prevalence – Diagnoses



Note: Offenders may have more than one diagnosis

Source: ICON/ICON-Medical

## Issue #2: Measuring Severity

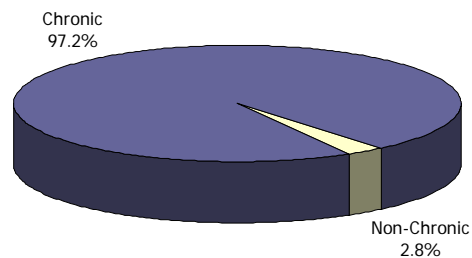


- Essential to planning a continuum of mental health care within the prison system
- Improved analyses

## Chronic Mental Illness Managing illness vs. curing people



Mentally Ill: Chronic vs. Non-Chronic  
Yearend 2007 Prison Population

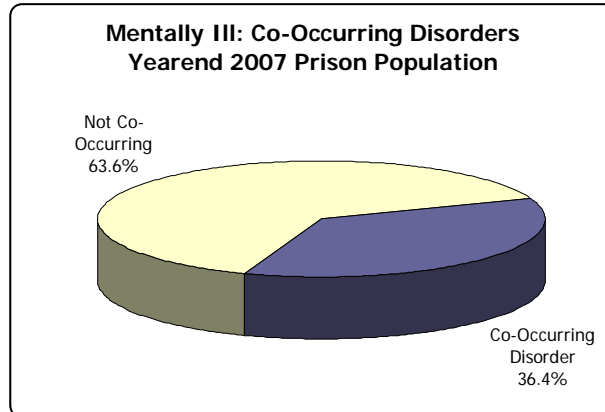


Source: ICON/ICON-Medical



## Co-Occurring Disorders

### The need for dual diagnosis treatment



Note: Co-occurring = substance use disorder + another MI diagnosis

Source: ICON/ICON-Medical

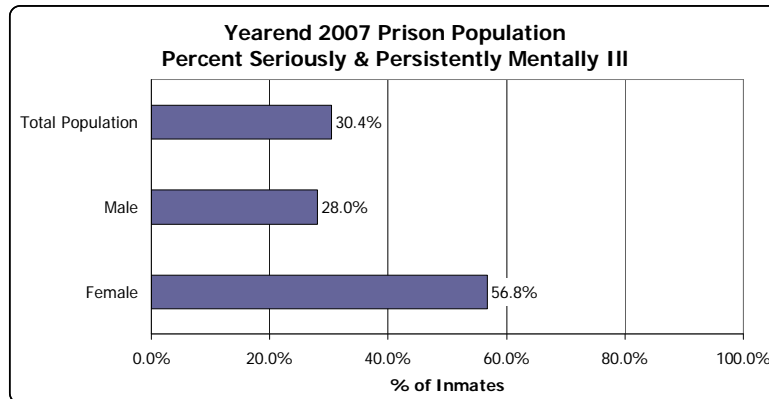


## How sick are they?

### Seriously & Persistently Mentally Ill

- Bipolar disorders
- Civil commitment
- Dementia/organic disorders
- Depression/major depressive disorders
- Psychosis/psychotic disorders
- Schizophrenia

## Seriously & Persistently MI



Source: ICON/ICON-Medical

## Beyond Diagnosis: Acuity Based on Multiple Factors



- Mental Health Observations
- Suicide/Self-Injurious Behavior Protocol
- Practitioner visits
- Psychologist visits
- Placements in Administrative Segregation



## Acute Group Defined

- 5+ MHO placements in one year; OR
- 3+ SSIP placements in one year; OR
- 7+ ADSEG placements in one year; OR
- 14+ practitioner visits in one year; OR
- 42+ psychologist visits in one year

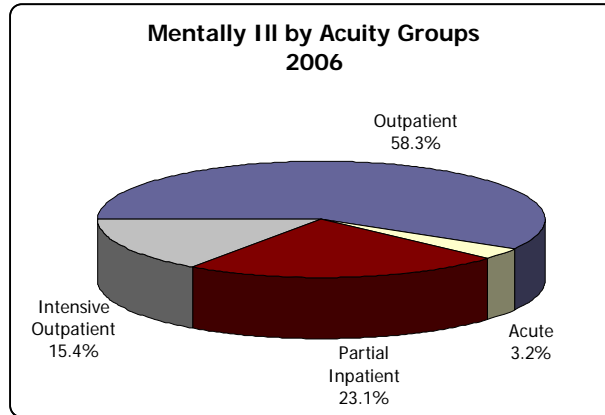


## Acute Group Characteristics

- In the past year, had an average of:
  - 2 MHO placements
  - 2 SSIP placements
  - 4 ADSEG placements
  - 1,005 DD hours (about 41.9 days)
  - 73 nurse visits
  - 13 practitioner visits
  - 26 psychologist visits



## Improved Practices: Classification for type of care



Source: ICON/ICON-Medical



## Issue #3: Pharmacy costs

- Pharmaceutical costs increased by about 86% or \$3.985 million over the past two years (FY2006-07).

## Pharm Costs & Mentally III



### Top Prescribed Drugs (Data for 5 Prisons)

Drug	Used for...	Rx count	Total quantity
Ibuprofen	pain reliever	5,360	324,185
Quetiapine	bipolar, schizophrenia	2,351	152,864
Citalopram	depression, mood disorder, anxiety	2,143	185,646
Hydroxyzine	antihistamine	1,532	128,814
Fluoxetine	depression, panic disorder, obsessive compulsive	1,508	378,158
Trazodone	depression	1,372	125,549

Source: ICON-Pharmacy

## Pharm Costs & Mentally III



### Top Drugs by Total Cost (Data for 5 Prisons)

Drug	Used for...	Rx count	Total cost
Hydroxyzine	antihistamine	1,532	\$1,237,726
Quetiapine	bipolar, schizophrenia	2,351	\$ 889,044
Risperidone	psychosis/psychotic disorder	887	\$ 391,965
Atorvastatin	high cholesterol	758	\$ 266,049
Gabapentin	epilepsy	718	\$ 36,290
Mirtazapine	depression	1,228	\$ 31,520

Compiled from a list of the top 20 drugs

Source: ICON-Pharmacy



## Issue #4: Placement/Housing

### Iowa Prison Population December 31, 2007: Seriously & Persistently Mentally Ill by Facility (Top 5)

Facility	Total Inmates	Total SPMI	% SPMI
Clinical Care Unit	192	177	92.2%
Psychiatric Hospital	18	14	77.8%
Mount Pleasant Women's Unit	92	66	71.7%
Correctional Inst for Women	580	321	55.3%
Clarinda Correctional Facility	882	344	39.0%

Source: ICON/ICON-Medical



## Facility Transfer Analysis

- Transfers of mentally ill/developmentally disabled offenders occur at a disproportionate rate, compared to their representation within the total inmate population.
  - 48% of transfers in 2006 were of inmates with MI/DD.
  - 40.5% of the prison population had MI/DD diagnoses (yearend 2006).

Source: ICON/ICON-Medical



## Facility Transfer Analysis

- MI/DD offenders make up the majority of offenders transferred 4+ times in 1 year.
  - Only 1.7% of offenders transferred were moved 4+ times during the year.
  - However, of those, 77.5% had MI/DD diagnoses.

Source: ICON/ICON-Medical



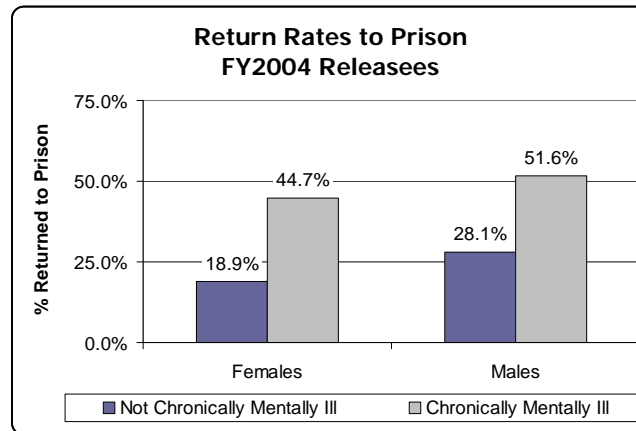
## Facility Transfer Analysis

- MI/DD offenders were no more likely to be transferred to a facility with a higher custody level than offenders with no such diagnoses.
  - 24.3% of transfers of MI/DD offenders involved movement to a facility with a higher custody level, compared to 24.6% of transfers of offenders with no such diagnoses.

Source: ICON/ICON-Medical



## Reentry Issue: Recidivism



Source: ICON/ICON-Medical



## Research Issue: Determining Effectiveness of Mental Health Treatment

- Challenges include:
  - Identifying comparison groups
  - Confidentiality of records  
(private community service providers)
  - Defining success

