Mental Health Diversion Facility Overview

Miami-Dade County is home to the largest percentage of people with serious mental illnesses (e.g., schizophrenia spectrum disorders, bipolar disorder, and major depression) of any urban community in the United States. Rates of serious mental illnesses among county residents are nearly three times the national average, yet for years state funding for treatment in the community has ranked among the lowest in the country. Overall, 9.1% of the population in Miami-Dade County (175,000 adults and 50,000 children) experience serious mental illnesses, yet only about 1% of adults (24,000) and less than 3% of children (15,000) receive treatment in the state funded community mental health treatment system.

The Miami-Dade County jail currently serves as the largest psychiatric institution in Florida, containing nearly half as many beds for individuals with mental illnesses as all state civil and forensic mental health treatment facilities combined. Each year, it is estimated there are nearly 20,000 bookings into the jail involving people with mental illnesses who require treatment while incarcerated. On any given day, the jail houses approximately 1,200 individuals receiving psychiatric medications and costs Miami-Dade County taxpayers nearly $77 million annually, or $210,000 per day.

A recent analysis by the Louis de la Parte Florida Mental Health Institute at the University of South Florida found that over a five year period 97 individuals with serious mental illnesses in Miami-Dade County identified as “heavy users” of acute care and institutional services accounted for 2,200 bookings into the jail, 27,000 days in jail, and 13,000 days in crisis units, state hospitals, and emergency rooms. On average, each individual was booked into the county jail between four and five times per year and spent nearly a quarter of their time incarcerated or in other institutional settings. The cost to taxpayers for these services is conservatively estimated at $13 million with little impact on reducing recidivism and virtually no return on investment.

Because of associated difficulties such as substance abuse, homelessness, and crime, untreated serious mental illnesses affect nearly every member of the community either directly or indirectly. This results from the devastation of families and individual lives, wasteful spending of taxpayers’ dollars on policies and strategies that do little more than help ensure the continuing cycles of recidivism and despair, and compromised public health and public safety for residents and visitors. While the community has made significant strides in reducing the number of chronically homeless individuals living on the streets in Miami-Dade County, a disproportionate number of those who remain, particularly in the downtown area, experience serious mental illnesses. Furthermore, it is estimated that at least 50% of these individuals have histories of involvement in the criminal justice system.

The Mental Health Diversion Facility was approved by voters in November 2004 as part of the Building Better Communities General Obligation Bond Program, and was created “to free up jail space and provide an effective and cost-efficient alternative facility to house [people with mental illnesses] as they await a trial date.” The project was placed in Judicial Administration to build on the successful work of the Eleventh Judicial Circuit Criminal Mental Health Project which operates pre-booking and post booking jail diversion programs serving individuals with serious mental illnesses involved in or at risk of becoming involved in the criminal justice system.
With a budget of $22.1 million for capital investments, the mental health diversion facility will be housed in a former state forensic hospital that is being renovated to house a variety of treatment and support services. These services include crisis stabilization, short-term residential, transitional housing, outpatient treatment services, employment and vocational services, and entitlement benefits programs such as Social Security and Medicaid that provide a full continuum of care and are designed to assist individuals with community re-entry and reduce the likelihood of recidivism to the justice system, crisis settings, and homelessness in the future. In addition to community based treatment and support services, the task force recommendations included incorporation of a courtroom and space for court personnel to conduct hearings on site as well.

The mental health diversion facility will result in significant savings for Miami-Dade County by moving people with serious mental illnesses, who do not pose significant public safety concerns, from the county jail into state and federally funded non-custodial residential treatment programs. This will allow the county to free up jail space, while providing more effective and appropriate services to county residents with serious mental illnesses and saving local taxpayer dollars.

The vision for the mental health diversion facility and expansion of the CMHP’s diversion programs is to create a centralized, coordinated, and seamless continuum of care for individuals who are diverted from the criminal justice system either pre-booking or post-booking. By housing a comprehensive array of services and supports in one location, it is anticipated that many of the barriers and obstacles to navigating traditional community mental health and social services will be removed, and individuals who are currently recycling through the criminal justice system will be more likely to engage treatment and recovery services. Creation of this facility will also allow for the movement of individuals currently spending extended amounts of time in the county jail into state and federally funded residential treatment programs and supervised outpatient services. On February 4, 2014, the Board of County Commissioners unanimously passed a resolution directing the Mayor’s Office to expeditiously fund all capital costs to open the mental health diversion facility. It is anticipated that the facility will begin limited operations in 2017, with full operations to begin by 2018.