

HOUSE JOINT RESOLUTION NO. 25

INTRODUCED BY D. ZOLNIKOV

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30

A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF MONTANA REQUESTING AN INTERIM STUDY ON THE REVOLVING DOOR AND COSTS ASSOCIATED WITH HOMELESSNESS, MENTAL ILLNESS, SUBSTANCE USE, HOSPITALIZATION, AND INCARCERATION IN MONTANA.

WHEREAS, many Montana prisoners have drug or alcohol addiction issues, mental health issues, medical needs, or developmental disabilities; and

WHEREAS, our county jails are housing repeat low-level offenders with documented mental illness and co-occurring substance use issues; and

WHEREAS, county jails serve as psychiatric hospitals, emergency rooms, and drug rehabilitation clinics all in one, but do not provide the resources to address any of these issues; and

WHEREAS, jails are not suited alone to address the core issues of homelessness, such as sleep deprivation, addictive disorders, mental health challenges, job training and placement, life skills, dental care, and primary medical care. Because these issues of homelessness are not addressed effectively, homeless individuals are cycling through jails, emergency rooms, and the streets; and

WHEREAS, nearly a quarter of both state prisoners and jail inmates who had a mental health problem, compared to a fifth of those without, had served three or more prior incarcerations; and

WHEREAS, the Montana Department of Corrections and the Board of Pardons and Parole currently release sex offenders and other offenders on probation and parole directly into homelessness, ensuring increased recidivism; and

WHEREAS, the Department of Public Health and Human Services' Montana State Hospital at Warm Springs, as well as regional hospitals in Billings and Missoula, discharges mentally ill patients committed to their care directly into homelessness, ensuring lack of stability and recommitment for further treatment; and

WHEREAS, the length of time between the initial discharge and subsequent readmission to the state hospital last year was as follows:

- (1) 36 of the 279 patients discharged, or 13%, were readmitted within 30 days of discharge;
- (2) 28 of the 279 patients discharged, or 10%, were readmitted anywhere from 31 to 90 days after

1 discharge;

2 (3) 81 of the 279 patients discharged, or 29%, were readmitted three months to a year after discharge;

3 and

4 (4) 134 of the 279 patients discharged, or 48%, had been discharged at least a year earlier. Half of them
5 were sent back within a year; and

6 WHEREAS, state prisoners who had a mental health problem were twice as likely as those without to
7 have been homeless in the year before their arrest (13% compared to 6%); and

8 WHEREAS, people with co-occurring disorders have a risk of reincarceration that was over 40% higher
9 than that of individuals with no diagnosis; and

10 WHEREAS, of the more than 3,700 documented chronically homeless individuals in Montana, nearly 1
11 out of every 5 of them has been hospitalized for mental health reasons; and

12 WHEREAS, veterans make up 13% of Montana's adult male population, yet veterans also represent 23%
13 of Montana's homeless population; and

14 WHEREAS, the costs to taxpayers, small business owners, county law enforcement, and uncompensated
15 care in local hospitals continue to rise due to the revolving door of mental illness, substance abuse, and
16 homelessness in the State of Montana and there is no one single state agency responsible.

17

18 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE
19 STATE OF MONTANA:

20 That the Legislative Council be requested to designate an appropriate interim committee, pursuant to
21 section 5-5-217, MCA, or direct sufficient staff resources to examine the revolving door of homelessness, mental
22 illness, substance use, hospitalization, and incarceration in Montana.

23 BE IT FURTHER RESOLVED, that the study review the nexus between:

24 (1) the populations served by each facility, including state-operated institutions, county jails, local
25 hospitals, homeless shelters, drop-in centers, and community mental health centers;

26 (2) the services provided at each facility for treatment of homelessness, mental illness, intellectual
27 disabilities, and chemical dependency;

28 (3) the degree to which treatment needs are unmet or underserved at each facility;

29 (4) the cost of operating each facility, including the costs of providing treatment of mental illness,
30 intellectual disabilities, and chemical dependency;

- 1 (5) barriers to providing necessary treatment at the facilities and in communities;
2 (6) barriers to finding appropriate housing on release to the community from a state-operated facility or
3 county jail;
4 (7) the ways in which the facilities collaborate to meet treatment and housing needs of the target
5 populations, including devising treatment and housing plans for people who will be released to communities;
6 (8) the projected long-term needs for populations served by the facilities;
7 (9) alternative procedures to providing the services that may improve the quality of care and increase
8 access to additional funding streams; and
9 (10) other items as identified by the interim committee.

10 BE IT FURTHER RESOLVED, that the study involve the participation of the Department of Corrections,
11 the Department of Public Health and Human Services, the Board of Pardons and Parole, county officials,
12 community service providers, individuals who have received services or been placed in state-operated facilities
13 or local jails and their family members, and representatives of law enforcement, health care providers, health
14 advocacy organizations, downtown business associations, and other interested parties.

15 BE IT FURTHER RESOLVED, that if the study is assigned to staff, any findings or conclusions be
16 presented to and reviewed by an appropriate committee designated by the Legislative Council.

17 BE IT FURTHER RESOLVED, that all aspects of the study, including presentation and review
18 requirements, be concluded prior to September 15, 2016.

19 BE IT FURTHER RESOLVED, that the final results of the study, including any findings, conclusions,
20 comments, or recommendations of the appropriate committee, be reported to the 65th Legislature.

21 - END -