

NINTH EDITION




# ANNUAL EVALUATION INDIANA CRIMINAL CODE REFORM

*DECEMBER 2023*

Prepared by  
Indiana Criminal Justice Institute  
Justice Reinvestment Advisory Council

**1006**



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Guided by a Board of Trustees representing all components of Indiana's criminal and juvenile justice systems, the Indiana Criminal Justice Institute (ICJI) serves as the state's planning agency for criminal justice, juvenile justice, traffic safety, and victim services. The ICJI develops long-range strategies for the effective administration of Indiana's criminal and juvenile justice systems and administers federal and state funds to carry out these strategies. The ICJI also serves as Indiana's Statistical Analysis Center (SAC). The SAC's primary mission is compiling, analyzing, and disseminating data on a variety of criminal justice and public safety-related topics. The information produced by the SAC serves a vital role in effectively managing, planning, and creating policy for Indiana's many public service endeavors.

The purpose of the Justice Reinvestment Advisory Council (JRAC) is to review policies, promote state and local collaboration, assist local or regional advisory councils, and provide assistance for use of evidence-based practices in community-based, and a variety of other, alternatives and recidivism reduction programs.

The 2023 Annual Evaluation of the Criminal Code Reform report was prepared for Governor Eric J. Holcomb, Chief Justice Loretta H. Rush, and the Indiana General Assembly Legislative Council, and submitted on December 1, 2023.

### **Acknowledgments:**

This report would not have been possible without the contributions of the executive teams and boards of the Indiana Criminal Justice Institute and the Justice Reinvestment Advisory Council, in collaboration with Indiana Office of Court Technology, Indiana Office of Court Services, the Indiana Department of Correction, the Indiana Family and Social Services Administration, the Indiana Sheriffs' Association, the Indiana Supreme Court, and the Indiana Prosecuting Attorneys Council to obtain data and information for this report.

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## Letter from the ICJI Executive Director

On behalf of the Indiana Criminal Justice Institute, I'm pleased to present the 2023 Annual Criminal Code Reform Evaluation Report, pursuant to IC 5-2-6-24. This is the ninth edition of the evaluation of Indiana's historic criminal code reform — the fifth completed in conjunction with the Justice Reinvestment Advisory Council — and encompasses data and information for the 2023 state fiscal year.

This report, like those that came before it, focuses on many topics ranging from jail overcrowding to the impact of specialty courts in Indiana. The report also focuses on updates to programs like Recovery Works and the development of behavioral and mental health services. The report is intended to address many areas in a way that allows Indiana's policymakers and stakeholders to develop data-driven public safety policies.

To help the public better visualize trends, a series of interactive online dashboards is available to supplement this report.

While none of the issues that we face today have easy solutions, our hope is that this report will help lead to progress in making lasting positive change to Indiana's criminal justice system. I would like to commend all the individuals and organizations that contributed to this report. Their countless hours of hard work along with their passion and dedication sets Indiana apart, and ultimately is what will move the State of Indiana in the right direction.

A handwritten signature in black ink, appearing to read 'Devon McDonald', written in a cursive style.

**Devon McDonald**

Executive Director  
Indiana Criminal Justice Institute

## Letter from the JRAC Chair

The creation of the Justice Reinvestment Advisory Council (JRAC) was an integral part of Indiana's comprehensive criminal justice reform in 2015. JRAC is a state and local partnership created by statute to promote collaboration among all three branches of government and all critical partners in Indiana's justice and behavioral health systems. The legislature designed JRAC to assist communities in the use of evidence-based practices to reduce recidivism and increase community well-being. Eight years later, JRAC has grown into a powerhouse for collaboration, local resources, legislative initiatives, and cross-branch/cross-disciplinary partnerships.

These partnerships were on full display at the October Summit for Rural and Public Health Professionals in Wabash. Over 200 judges, attorneys, public health care professionals, local and county government members, and other stakeholders convened to learn about opportunities for collaboration, resources, and strategies to meet the unique needs of rural professionals. Stakeholders also learned about efforts by Indiana's law schools, the Indiana Supreme Court's Coalition for Court Access, and others to reverse the shortage of attorneys in Indiana's counties and meet the crucial need for legal services in counties with limited resources.

I am especially proud of JRAC's continued work to support Local JRACs. This critical state-local partnership allows JRAC to assess local needs and reinvest criminal justice resources where they are needed most. JRAC offered an initial round of technical assistance to address local implementation of Evidence-Based Decision Making (EBDM). The Office of Court Services contracted with the Center for Effective Public Policy to provide intensive technical assistance, limited technical assistance, and on-demand technical assistance to several Local JRACs in 2023-2024. JRAC plans to offer additional rounds of technical assistance as resources allow. To enhance this work with locals, JRAC will revisit the 2019 EBDM State Team Strategic Plan to bring EBDM back to the forefront at the state level. The Center for Effective Public Policy will work with JRAC members to review and discuss the EBDM framework and update the strategic plan.

JRAC looks forward to continuing its work with state and local partners to improve public safety and community well-being in Indiana.

### **Christopher M. Goff**

Indiana Supreme Court Justice



# EXECUTIVE SUMMARY

In 2013, the Indiana General Assembly introduced House Enrolled Act 1006, an act to amend the Indiana Code concerning criminal law and procedure. The provisions were officially codified as Public Law 158 on July 1, 2014. The Indiana Criminal Justice Institute (ICJI) and the Justice Reinvestment Advisory Council (JRAC) were tasked to annually evaluate the effects of the criminal code reform on the criminal justice system. This report represents the ninth annual evaluation of House Enrolled Act 1006.

Indiana Office of Court Technology (IOCT) and the Indiana Department of Correction (IDOC) provided the data necessary to determine the effects of the criminal code reform on courts, prisons, jails, and other community-based alternatives to incarceration. Data gathered from IOCT demonstrates new filings, abstracts of judgment (summary of a court's judgment for convicted felony offenders), and sentence placements (jail, probation, IDOC, community corrections, or some combination thereof), as well as information about probation and problem-solving courts. Data gathered from the IDOC outlines admissions and releases (including parole, probation, and the community transition program), facilities capacity, and recidivism, as well as information about jail populations and programs.

An important aspect of the criminal code reform was to redistribute funds to the local level for the rehabilitation of offenders to decrease recidivism and enhance public safety. In 2015, the Indiana General Assembly established the Forensic Treatment Grant Program through the Division of Mental Health and Addiction (DMHA). This program is commonly referred to as Recovery Works. The Recovery Works program provides vouchers to DMHA-certified mental health and addiction treatment providers in the community to treat criminal justice-involved individuals without insurance or Medicaid to reduce recidivism and encourage recovery. Since 2015, DMHA has continued to provide various resources to the general and criminal justice-involved populations who need mental health and/or substance use programming. DMHA provided information about the availability and effectiveness of mental health and substance use programs for this report.

# KEY FINDINGS

## COURTS

### New Filings

- There were 69,597 total new criminal filings for State Fiscal Year 2023 (SFY23), which is a 2.8% increase from SFY22 (67,695). 49,362 (70.9%) of the new filings in SFY23 were Level 6 felonies, also referred to as F6.
- The most common felony filings over the past five years were possession of methamphetamine, followed by syringe possession, domestic violence, and theft with prior.

### Abstracts of Judgment

- There was an increase in the number of abstracts of judgment by 1.1% from SFY22 (58,831) to SFY23 (59,519). The number of total abstracts of judgment has steadily increased in the years following COVID-19, but it has not reached the pre-COVID number of total abstracts of judgment in SFY19 of 66,390.
- In SFY23, F6s were the majority of original (new) abstracts of judgment with 73.4%.

### Placements

- Jail only and jail and probation were the most common placements in SFY23, as well as over the past five state fiscal years, followed by probation only and IDOC only placements.
- Across the past five years, between 92.7% to 95.1% of jail only felony placements were F6s or Class D felonies (FD).
- There was an increase in the percentage of IDOC placements that were F6/FD from 7.6% last year to 10.8% this year. The increase in placements to IDOC may be due to HEA 1004, which was passed in the 2022 legislative session and allowed the court to commit a person convicted of a Level 6 felony to the IDOC.

### Probation

- The number of adult offenders on probation for substance use offenses accounted for 45.5% of total new felony supervisions in SFY23.
- The most common reason for release from probation, over both SFY23 and over the last five years, was for completion of probation conditions. Between 45.6% to 49.9% of releases from probation were for completion of probation conditions over the past five years.

### Problem-Solving Courts

- There are 132 active problem-solving courts and 19 problem-solving courts in planning stages. The most common type of problem-solving courts are adult drug courts (50), followed by veterans courts (28), and family recovery courts (21).

## Overall IDOC Populations

- From July 2022 - June 2023 there was an overall decrease of 2.7% (1,000) of total offenders in the IDOC population.
- For SFY23, the monthly average for the total offender population decreased by 1.2% from the previous year.
- On average, 92% of offenders are housed in a state facility or with a third-party contractor.

## Adult Admissions and Releases

- New commitments to IDOC made up 55% of all admissions for SFY23.
- Technical violations accounted for 34% and violations resulting in new commitments made up 11%.
- The monthly average rate for admissions increased by 14.8% compared to SFY22.
- The monthly average rate for releases increased 12.3% compared to SFY22.

## Juvenile Admissions and Releases

- Overall, the monthly average admissions rate for juvenile offenders is 32 and the monthly average release rate is 28. This is a decrease from SFY22, which had an average of 35 juvenile admissions and 32 released.
- On average, 27 male juvenile offenders are admitted to IDOC monthly and 24 male juvenile offenders are released.
- On average, the female monthly admission rate is 4.8 offenders versus the 3.75 offenders release rate.

## IDOC Recidivism

- For offenders released in 2019, 29.8% were recommitted to IDOC by 2022.
- Recidivism rates for all offense levels decreased from the previous year. The average recidivism rate decreased by 1.7% from SFY22 to SFY23.

## Adult Facility Capacity - Male

- Medium-security facilities operated at an average capacity of 93% from July 2022 to June 2023, a 3% increase from last year.
- The monthly average capacity rate for maximum-security facilities increased from 96% in SFY22 to 97% in SFY23.
- Male minimum-security facilities showed a significant increase in capacity from December 2022 to January 2023. The facility capacity jumped from 63% to 78%.

## Adult Facility Capacity - Female

- The monthly average capacity rate for medium-security facilities is 80%, which is a 15% decrease from the previous year.
- Minimum-security and reentry facilities' operational capacity averaged 69% capacity per month, a 9% increase from last year.



## Juvenile Facility Capacity

- Males are housed at a much higher rate than females. On average, there is 1 female for every 15 males.
- On average, the operational capacity for males is 59%. This is a 13% increase compared to last year.
- For females, the average operational capacity per month is 71%. This is a 10% increase from last year. Female capacity rates are higher than males because there is only one facility, thus fewer beds, and accommodations for females.

## Community Corrections

- The number of felony offenders in Community Corrections averaged 11,461 offenders for SFY23.
- Electronic monitoring is the most common form of supervision (54%). 21% of all participants are involved in community service supervision, 12% are in work release, and 11% are supervised through day reporting.

## JAIL

- In 2022, 42% of county jails were at or exceeded 80% capacity, up from 37% in 2021. This is based on annual jail inspection reports, representing a snapshot of one day only, when the inspection occurred.
- 14 jails were over 100% capacity.
- The total state jail population for 2022 was 19,173, or a 77% capacity rate. This is roughly an 18% increase over the 2021 state population.
- The F6 offender population made up 11% of the total statewide jail population. This is consistent with previous years, where the F6 population comprised 9% to 12% of the jail population.

## MENTAL HEALTH AND SUBSTANCE USE PROGRAMS

- 86 of the 92 (93.5%) county jails in Indiana report having substance use programs in their facility.
- Recovery Works, which provides recovery-related services to individuals currently in the criminal justice system with a current or prior felony conviction, reported serving 4,300 new participants last year and has served 71,139 total participants since the program's inception.
- The Integrated Reentry and Correctional Support Program (IRACS), which provides resources and support to individuals in jails to navigate the criminal justice system, reported serving 2,004 participants and having a 75% success rate for reentry.<sup>1</sup>
- Indiana received nearly 4,000 calls per month to the 988 Suicide and Crisis Lifeline, with 90% of calls being answered in-state through five 988 call centers.

1. Indiana Forensic Services. (n.d.) Rethink reentry: HOPE begins at day one. Mental Health America of Indiana. Retrieved August 28, 2023, from [on.in.gov/djwr9](https://on.in.gov/djwr9)

- Jails were asked how many pretrial detainees they had at the time of the survey. The average number was 146, which is slightly higher than 2021 in which the average number given was 142. In 2021, 28 jails responded to this question, and 11 responded in 2023.
- Respondents were asked if they saw a change in the amount of F6 offenders they handled since July 1st, 2022. Jails, judges, and public defenders mostly responded that they saw an increase in F6 offenders handled by their organizations. Probation, community corrections, and prosecution mostly responded they saw no change.
- When asked if respondents have seen a change in the number of defendants or clients in need of mental health/substance use services, all organization types most frequently responded that they saw an increase.
- Organizations were asked what mental health and substance use programs were available to individuals seeking access or treatment. Among mental health programs, the most commonly available were therapy, counseling, and mental health screenings and/or assessments. The most commonly available substance use programs reported were substance use education classes, Alcoholics Anonymous or Narcotics Anonymous, and substance use counseling.
- When asked if their county had one or more problem-solving courts, judges overwhelmingly responded (96%) that their county did. The majority of judges, prosecutors, and public defenders responded that their counties had a drug court. Conversely, the majority (except prosecutors) responded that their counties did not have mental health courts.

**Based on the findings in this report and prior reports, the ICJI and JRAC recommends the following to ensure that the provisions of HEA 1006 are met:**

- enhance the criminal justice data ecosystem;
- finalize the unified victim notification system;
- continue to find solutions to reduce jail overcrowding;
- invest in forensic mental health and substance use treatment programs, as well as other programming which may mitigate risk factors to recidivating and;
- help offenders successfully reassimilate to their communities.

# INTRODUCTION

In 2013, the Indiana General Assembly introduced House Enrolled Act 1006<sup>2</sup>, an act to amend the Indiana Code concerning criminal law and procedure that had been in place since 1976. The provisions were officially set on July 1, 2014, and solidified as Public Law 158.

The legislation identified ten general purposes as listed in IC §35-32-1-1:

- 1 Secure simplicity in procedure
- 2 Ensure fairness of administration including the elimination of unjustifiable delay
- 3 Ensure the effective apprehension and trial of persons accused of offenses
- 4 Provide for the just determination of every criminal proceeding by a fair and impartial trial and adequate review;
- 5 Reduce crime by promoting the use of evidence based best practices for rehabilitation of offenders in a community setting
- 6 Keep dangerous offenders in prison by avoiding the use of scarce prison space for nonviolent offenders
- 7 Give judges maximum discretion to impose sentences based on a consideration of all the circumstances related to the offense
- 8 Maintain proportionality of penalties across the criminal code, with like sentences for like crimes
- 9 Make the lengths of sentences served by offenders more certain for victims
- 10 Preserve the public welfare and secure the fundamental rights of individuals

<sup>2</sup> House Enrolled Act 1006 may be referred to as any of the following throughout this report: the criminal code reform, 1006, and HEA 1006. Felonies may also be referred to in several ways. For example, a Felony Level 6 may be referred to as Level 6, F6, or low-level felony.

Legislative action has been taken in the years after the passing of HEA 1006 amending parts of these original attributes: Public Law 168 (2014), Public Law 179 (2015), Public Law 243 (2017), and Public Law 65 (2018). The Indiana Criminal Justice Institute (ICJI) was tasked with annually evaluating the effects of the criminal code reform on the criminal justice system per IC § 5-2-6-24. Annual reports were outsourced to the Sagamore Institute in the years 2015 and 2016. In 2017, the ICJI conducted its first evaluation. Since 2018, the ICJI has prepared the annual report in conjunction with the Justice Reinvestment Advisory Council (JRAC) as specified in IC § 33-38-9.5-2. The findings of this report are identified below.

The new felony code created in 2014 by HEA 1006 assigned offenses with levels of classification ranging from a Level 1 through 6 Felony. Murder is its own classification and did not change as a result of HEA 1006. The pre-1006 code utilized fewer classifications (4 as opposed to 6) and designated them as Classes A – D. See the tables below for class level and sentencing range. Level 1 felony is the highest-level felony, whereas a Level 6 felony (also referred to as Level 6, F6, or low-level felony) is the least severe felony. The new felony code changes are contributing, in part, to an increase in the average number of prison days offenders are required to serve, as the advisory length of sentence has increased for some felony classifications. Offenders also must generally serve a longer percentage of their sentence than before code reform changes.

**Table 1. Pre-1006 (enacted in 1976)**

Felony Class	Sentencing Range	Advisory <sup>3</sup>
Murder	45-65 yrs.	55 yrs.
A	20-50 yrs.	30 yrs.
B	6-20 yrs.	10 yrs.
C	2-8 yrs.	4 yrs.
D	6 mo-3 yrs.	1.5 yrs.

**Table 2. Post-1006**

Felony Level	Sentencing Range	Advisory
Murder	45-65 yrs.	55 yrs.
1	20-40 yrs.	30 yrs.
2	10-30 yrs.	17.5 yrs
3	3-16 yrs.	9 yrs.
4	2-12 yrs.	6 yrs.
5	1-6 yrs.	3 yrs.
6	6 mo-2.5 yrs.	1 yr.

This report represents the ninth annual evaluation of the criminal code reform. The purpose of this report is to present recent revisions to legislation about the criminal code reform and evaluate the original provisions' effects on the Indiana criminal justice system. Data and information that support the demonstrated effects in this report derive from a variety of local and state entities and will cover the most recent year of data – the state fiscal year 2023 (SFY23, July 1, 2022 – June 30, 2023). Prior reports, as well as dashboards displaying longitudinal analysis of data since the enactment of HEA 1006, are available on the [ICJI website](https://www.icji.org/).<sup>4</sup>

3. Advisory sentence is a guideline that the court may voluntarily consider when imposing a sentence.

4. [on.in.gov/1006report](https://on.in.gov/1006report)

# NEW LEGISLATION

There have been several new laws enacted that could affect criminal code reform, changing how HEA 1006 impacts the criminal justice system in Indiana. The new legislation listed below was passed during the 2023 session. Any impacts related to HEA 1006 resulting from these new laws will be addressed in future reports.

## **SEA 48 CHILD SEX OFFENSES**

Provides that a criminal prosecution of a sex offense committed against a child that is otherwise barred by that statute of limitations may nevertheless be commenced within five years from the date in which certain conditions are met.

## **SEA 71 PAROLE**

Specifies that a person placed on parole following a term of imprisonment that includes a sentence for a crime of violence may be released on parole for not more than 24 months. Provides that time served while confined to a prison or jail does not count toward time served on parole.

## **SEA 136 CONVICTION DATA**

Defines "prohibited person" as a person prohibited from possessing a firearm or carrying a handgun. Provides that the Office of Judicial Administration may establish a system to transmit certain data to assist in determining whether a person is a prohibited person.

## **SEA 158 DOMESTIC VIOLENCE**

Provides that a person arrested for certain crimes committed against a family or household member may not be released on bail for 24 hours. Provides that a charge of invasion of privacy is elevated to a Level 6 felony if the person has a prior unrelated criminal stalking conviction. Provides that certain crimes are considered a serious violent felony for the purposes of unlawful possession of a firearm by a serious violent felon.

## **SEA 161 UNLAWFUL SURVEILLANCE**

Adds a prohibition against using a tracking device to the list of conditions a court may impose when issuing a protection order. Increases the penalty for stalking to a Level 5 felony if the offense is committed by means of a tracking device. Provides that a person who knowingly or intentionally places a tracking device on an individual or the individual's property without the individual's knowledge or consent commits unlawful surveillance, a Class A misdemeanor, unless certain exceptions apply, and increases the penalty to a Level 6 felony if the person is the subject of a protective order or has certain prior convictions. Establishes a sentence enhancement if a person uses a tracking device to commit or facilitate the commission of a crime.

## **SEA 301 SEX OFFENSES**

Increases the maximum penalty for child molesting from 40 to 50 years under certain circumstances.

## **SEA 136 CONVICTION DATA**

Defines "prohibited person" as a person prohibited from possessing a firearm or carrying a handgun. Provides that the Office of Judicial Administration may establish a system to transmit certain data to assist in determining whether a person is a prohibited person.

## **SEA 343 VARIOUS CRIMINAL LAW MATTERS**

Makes organized retail theft, a Level 6 felony, for a person to exercise unauthorized control over the property of a retail merchant with the intent to directly or indirectly distribute the property for resale and increases the penalty to a Level 5 felony if certain circumstances exist. Permits a person to petition for expungement of an arrest if no charges have been filed within one year of the arrest.

## **SEA 379 DRUG SCHEDULES**

Adds specified substances to the list of controlled substances. Defines "fentanyl containing substance" and increases the penalty for dealing a drug that is a fentanyl containing substance.

## **SEA 415 JUVENILES**

Provides that a statement made by a juvenile during custodial interrogation in response to a materially false statement from a law enforcement officer is inadmissible against the juvenile unless certain exceptions apply. Requires, unless certain circumstances exist, that a law enforcement officer who arrests or takes into custody a child on school property or at a school-sponsored activity must notify or request a school administrator to notify the child's: (1) parent or guardian; or (2) emergency contact.

## **SEA 445 ELECTRONIC MONITORING STANDARDS**

Permits the Justice Reinvestment Advisory Council to develop electronic monitoring standards and to submit an annual report as to the standards. Permits the Justice Reinvestment Advisory Council to conduct a workload study of electronic monitoring and home detention, make certain findings, and submit a report to the legislative council not later than July 1, 2025. Provides that a contract employee of a supervising agency is required to notify the supervising agency of certain actions with respect to a tracked individual not later than 12 hours after the action occurs. Requires this notification to be sent within 15 minutes if the tracked individual is serving a sentence for a crime of violence or a crime of domestic or sexual violence, and additionally requires the supervising agency to notify a vulnerable victim and request law enforcement to perform a welfare check, if there is a vulnerable victim.

## **SEA 464 JURISDICTION**

Provides that an adult criminal court has jurisdiction over a person at least 21 years of age who committed an offense as a child (an adult child offender), if the offense could have been waived to adult court and provides that the juvenile court has jurisdiction over an adult child offender if the offense could not have been waived. Specifies that an adult child offender may be required to register as a sex offender in the same manner as a delinquent child and permits a court to remove the obligation for an adult child offender and a delinquent child to register after the completion of sex offender treatment. Specifies when a child commits a delinquent act. Allows a court, in sentencing an adult child offender, to consider as a mitigating factor that the person was a child at the time the person committed the offense. Provides an additional opportunity for an adult child offender to obtain sentence modification. Permits a court to suspend a sentence imposed on an adult child offender, except for murder.

## **HEA 1006 MENTAL HEALTH PROGRAMS**

Specifies the circumstances under which a person may be involuntarily committed to a facility for mental health services and specifies that these services are medically necessary when provided in accordance with generally accepted clinical care guidelines. Establishes a local mental health referral program to provide mental health treatment for certain persons who have been arrested. Repeals obsolete provisions and makes technical corrections.

## **HEA 1021 VARIOUS CRIMINAL LAW MATTERS**

Amends the definition of "emergency medical services provider" for the offense of battery to include a staff member in the emergency department of a hospital. Specifies that the enhancement for battery committed on a public safety official does not apply if the person who commits the offense is detained or committed under the involuntary commitment statute. Provides that the employee of a court or law enforcement agency who warns the subject of a warrant of the existence of the warrant with the intent to interfere with the execution of the warrant commits obstruction of justice. Adds "fondling" to the crime of sexual misconduct with a service provider.

## **HEA 1186 ENCROACHMENT ON AN INVESTIGATION**

Provides that a person who knowingly or intentionally approaches within 25 feet of a law enforcement officer after the law enforcement officer has ordered the person to stop commits a Class C misdemeanor. Specifies that "emergency incident area" may include an area 25 feet in all directions from the perimeter of an emergency incident area.

## **HEA 1228 CHILD SEDUCTION**

Provides that "solicit", for purposes of the crime of child solicitation, includes luring and enticing. Defines "coach", "workplace supervisor", and "youth sports organization", and provides that the coach of a youth sports organization or a workplace supervisor commits child seduction if the person engages in sexual activity with a child less than 18 years of age and certain other conditions are met. Reduces the age difference from five years to four years for child seduction committed by a law enforcement officer. Makes conforming amendments.

## **HEA 1186 ENCROACHMENT ON AN INVESTIGATION**

Provides that a person who knowingly or intentionally approaches within 25 feet of a law enforcement officer after the law enforcement officer has ordered the person to stop commits a Class C misdemeanor. Specifies that "emergency incident area" may include an area 25 feet in all directions from the perimeter of an emergency incident area.

## **HEA 1287 HOME DETENTION**

Allows a court to place a person convicted of certain crimes directly in a community corrections program. Provides that a violation of certain terms of a community corrections program placement constitutes escape. Repeals the offense of unauthorized absence from home detention, a Class A misdemeanor. Repeals a provision that requires the court to suspend a period of an individual's sentence if placed in a community corrections program. Provides that if a person on home detention knowingly and intentionally: (1) leaves the person's home; (2) remains outside of the person's home; or (3) travels to an unauthorized location; in violation of the home detention order and without written permission commits escape, a Level 6 felony. Provides that the court may not suspend the minimum sentence for a Level 3 felony if the person has a juvenile adjudication for certain offenses committed within three years of the commission of the Level 3 felony. Specifies that a person sentenced to work release in a community corrections program receives one day of accrued time for each day the person is confined on work release.

## **HEA 1363 CRIMINAL MISCHIEF AND CRIMINAL TRESPASS**

Provides that a person who recklessly, knowingly, or intentionally damages the property of a scientific research facility without the consent of, or with consent, which was fraudulently obtained from, the owner, possessor, or occupant of the property that is damaged commits criminal mischief, a Class A misdemeanor. Provides that a person who, not having a contractual interest in the property, knowingly or intentionally enters the real property of a scientific research facility without the permission of, or with permission which was fraudulently obtained from, the owner of the scientific research facility or an authorized person, and knowingly or intentionally engages in conduct that causes property damage to: (1) the owner of or a person having a contractual interest in the scientific research facility; (2) the operator of the scientific research facility; or (3) a person having personal property located on the property of the scientific research facility; commits criminal trespass, a Level 6 felony.

## **HEA: 1365 MACHINE GUNS**

Revises, for purposes of an enhancement and certain criminal offenses, a definition of "machine gun". Provides that particular criminal offenses concerning machine guns do not apply to certain persons, including persons possessing machine guns or other items not required to be registered in the National Firearms Registration and Transfer Record maintained by the federal Bureau of Alcohol, Tobacco, Firearms and Explosives. Makes a conforming amendment.

## **HEA 1493 ELIMINATION OF COSTS AND FEES IN JUVENILE COURT**

Provides that a parent is presumed indigent for purposes of parental payment or reimbursement for services provided by the Department of Child Services to a child adjudicated delinquent or a child in need of services. Further provides that, when the Department of Correction is awarded wardship of a child, the juvenile court may not order a parent to pay or reimburse the department unless the juvenile court makes a specific finding that the parent is able to pay. Requires the court to determine whether, when a party is charged or convicted with a crime against the person, participation in services provided by the fund poses an unreasonable risk of harm. Makes conforming changes.



# COURT DATA

This section outlines criminal felony filings, sentence modifications, shifts in where certain offenders are placed, and changes in the usage of programs like probation and problem-solving courts, as it relates to the changes under HEA 1006. It also outlines totals, subtotals, and observed patterns across these data, both within the fiscal year and across fiscal years. Indiana Office of Court Technology (IOCT) provided the data about new filings, abstracts of judgment, sentence placements, and information regarding probation and problem-solving courts. The Justice Reinvestment Advisory Council (JRAC) also provided information for the current problem-solving courts operating in the state. The Indiana Prosecuting Attorneys Council (IPAC) provided information pertaining to the top ten felony filings for 2019 through June of 2023.

## NEW FILINGS

A criminal charge brought by the prosecutor's office is commonly referred to as a new filing. Table 3 below shows the number of new felony-level filings for SFY23. A total of 69,597 new criminal felony cases were filed. F6 filings made up most felony filings at 70.9% and F5s were the second highest at 16.8%.

**Table 3. New criminal filings, SFY23**

Felony Level	New Filings	Percent
Murder	326	0.5%
F1	662	1%
F2	1,964	2.8%
F3	2,099	3%
F4	3,332	4.8%
F5	11,689	16.8%
F6	49,362	70.9%
FA-FD	163	0.2%
<b>Total</b>	<b>69,597</b>	<b>100%</b>

The total number of new filings decreased overall over five years from 75,844 in SFY19 to 69,597 in SFY23, even though there was a 2.8% increase from SFY22 (67,695) to SFY23. In Figure 1, the bar chart shows the quarterly percentages of total filings by felony level over the years. The percentage of Level 6 felonies has decreased over the years from 74.6% to 70.9% of the total. Meanwhile, the percentage of Level 5 felonies has increased slightly over the years from 14.1% in SFY19 to 16.8% in SFY23.

**Figure 1. Percent of total new case filings, SFY19 – SFY23**

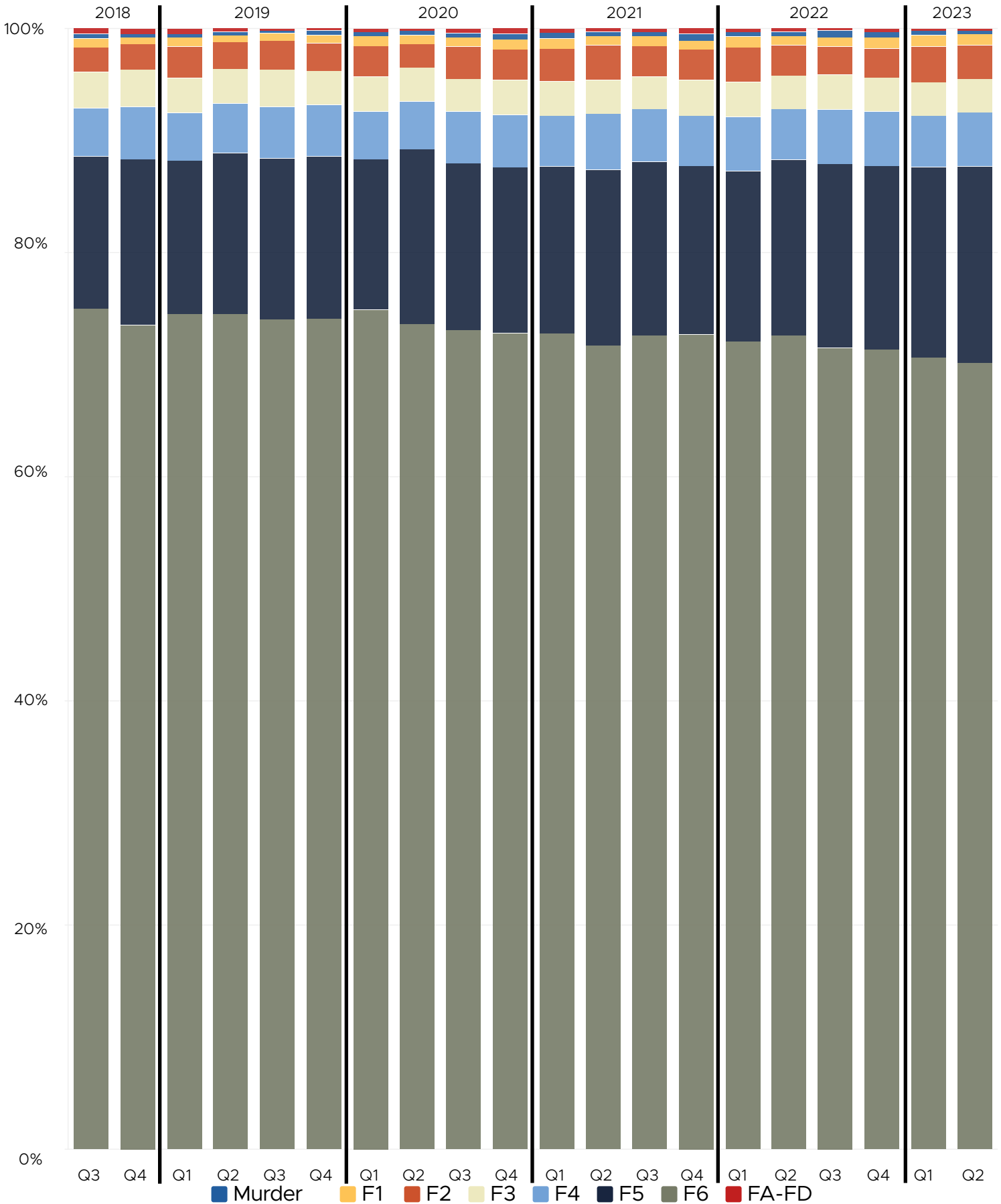


Table 4 shows the top ten most common felony filings for the past five years. Most of the top ten filings are Level 6 felonies, but some felonies can range in level classification depending on aggravating circumstances. For example, domestic battery starts as a class A misdemeanor but can be increased to a Level 2 felony depending on the harm caused, among other factors.

Across the past five years, the most common felony has been possession of methamphetamine, followed by syringe possession and domestic battery. Each year, the number of possession of methamphetamine filings has been more than twice as high as the next highest number of felony filings. Four of the top ten filings across all years have been related to substance use (possession of methamphetamine, syringe possession, narcotics possession, and operating while intoxicated). Additionally, domestic battery and strangulation are among the top ten filings in all the past five years and these crimes may also involve substance-related issues. These statistics, and the consistency in the types of most common felonies across the past five years, stress the importance of having substance use programs and resources available for felony offenders.

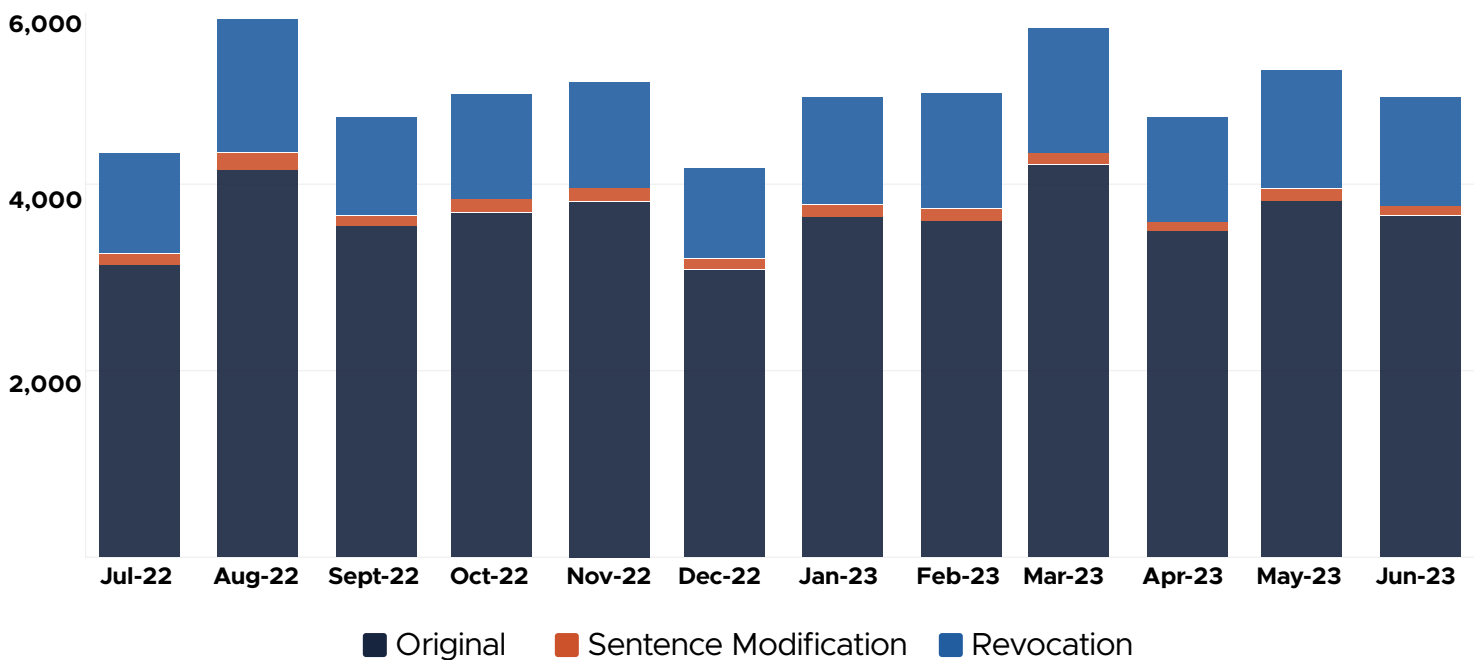
**Table 4. Top 10 felony filings, 2019 through June of 2023**

	<b>2019 Annual</b>	<b>2020 Annual</b>	<b>2021 Annual</b>	<b>2022 Annual</b>	<b>2023 (January-June)</b>
<b>1</b>	Possession of Methamphetamine 13,526	Possession of Methamphetamine 11,681	Possession of Methamphetamine 13,115	Possession of Methamphetamine 11,674	Possession of Methamphetamine 5,951
<b>2</b>	Syringe Possession 8,709	Syringe Possession 8,296	Syringe Possession 7,349	Syringe Possession 5,086	Domestic Battery 2,496
<b>3</b>	Theft With Prior 5,631	Domestic Battery 4,538	Domestic Battery 4,516	Domestic Battery 4,729	Syringe Possession 2,161
<b>4</b>	Possession of Narcotic Drug 4,555	Theft With Prior 4,397	Possession of Narcotic Drug 4,259	Possession of Narcotic Drug 2,543	Theft 1,863
<b>5</b>	Domestic Battery 4,554	Possession of Narcotic Drug 4,328	Theft with Prior 3,385	Theft 3,600	Possession of Narcotic Drug 1,801
<b>6</b>	Theft 3,852	Theft 3,282	Strangulation 2,936	Theft With Prior 3,517	Theft With Prior 1,801
<b>7</b>	Strangulation 2,898	Strangulation 3,005	Operating While Intoxicated 2,785	Strangulation 2,905	Strangulation 1,510
<b>8</b>	Auto Theft 2,642	Auto Theft 2,663	Theft 2,752	Operating While Intoxicated 1,743	Operating While Intoxicated 1,407
<b>9</b>	Common Nuisance 2,627	Operating While Intoxicated 2,567	Auto Theft 2,700	Resisting Law Enforcement 2,408	Resisting Law Enforcement 1,200
<b>10</b>	Operating While Intoxicated 2,225	Residential Entry 2,290	Resisting Law Enforcement 2,657	Auto Theft 2,134	Auto Theft 1,165

## ABSTRACTS OF JUDGMENT

An abstract of judgment is a living document completed for offenders convicted of a felony that involves a sentence to the IDOC; this also includes F6s sentenced to jail. Figure 2 shows the total number of abstracts monthly in SFY23. Total abstracts fluctuated from month to month, with the lowest number of abstracts in December 2022, and the highest number of abstracts in August 2022 and March 2023, respectively. The largest single-month declines occurred from August to September 2022 and from November to December 2022, each with about an 18% decrease in abstracts from month to month. The largest month to month increase occurred from July to August 2022 with an increase of 33%. Original abstracts account for 73.7% of all abstracts, revocations account for 23.6%, sentence modifications account for 2.6%, and appeals account for the remaining 0.03% (16 cases).

**Figure 2. Monthly Abstracts of Judgment, SFY23**



COVID-19 disrupted and delayed many processes within the criminal justice system for a significant amount of time, including the number of abstracts of judgment completed each month. This is reflected in Figure 3, which shows the number of total abstracts of judgment monthly across five years. The largest impacts of COVID-19 can be seen beginning in March through June of 2020 with the lowest numbers of abstracts; however, for more than a year after the beginning of the pandemic, the number of abstracts remained low. The duration of decreased abstracts of judgment over this time contributes to the lingering cases and backlogs in courts that remain months and years after the pandemic.

**Figure 3. Total Abstracts of Judgment SFY19 – SFY 23**

2018										5,949	5,541	4,550
2019	5,631	5,614	5,560	6,378	5,746	5,223	5,709	5,890	5,261	6,375	5,008	4,875
2020	5,820	5,365	4,516	2,137	2,341	3,805	4,275	4,275	4,315	4,531	3,755	3,656
2021	3,819	3,733	4,818	4,593	4,486	4,935	4,679	5,430	4,734	4,929	4,959	4,401
2022	4,533	4,535	5,722	4,773	5,040	5,096	4,326	5,763	4,718	4,969	5,092	4,171
2023	4,929	4,979	5,672	4,726	5,220	4,939						
	January	February	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.

Table 5 shows the number and percentage of total abstracts by abstract type. The total number of abstracts across all categories has fluctuated over the years with the lowest number of original abstracts in SFY20 and '21, which were the years most affected by COVID-19. The numbers across all categories have increased since SFY21, but have not returned to pre-COVID levels. The percentage of total abstracts for sentence modifications, revocations, and appeals have all decreased gradually over time, except for a slight increase in the percentage for sentence modifications and appeals in SFY20.

**Table 5. Breakdown by Abstract Type, SFY 2019 – SFY 2023**

State Fiscal Year	Original		Sentence Modification		Revocation		Appeal	
	Count	%	Count	%	Count	%	Count	%
2019	46,900	70.66%	2,001	3.01%	17,447	26.28%	30	0.05%
2020	40,291	70.56%	1,967	3.44%	14,812	25.94%	32	0.06%
2021	37,152	72.58%	1,594	3.11%	12,425	24.27%	20	0.04%
2022	43,456	73.87%	1,625	2.76%	13,727	23.33%	23	0.04%
2023	43,869	73.72%	1,566	2.63%	14,053	23.62%	16	0.03%

Table 6 shows the total number of original abstracts for SFY23. F6s constitute over 73% of all abstracts or convictions. F5s are the second most common felony level at 15%.

**Table 6. Original Abstracts by Felony-Level, SFY23**

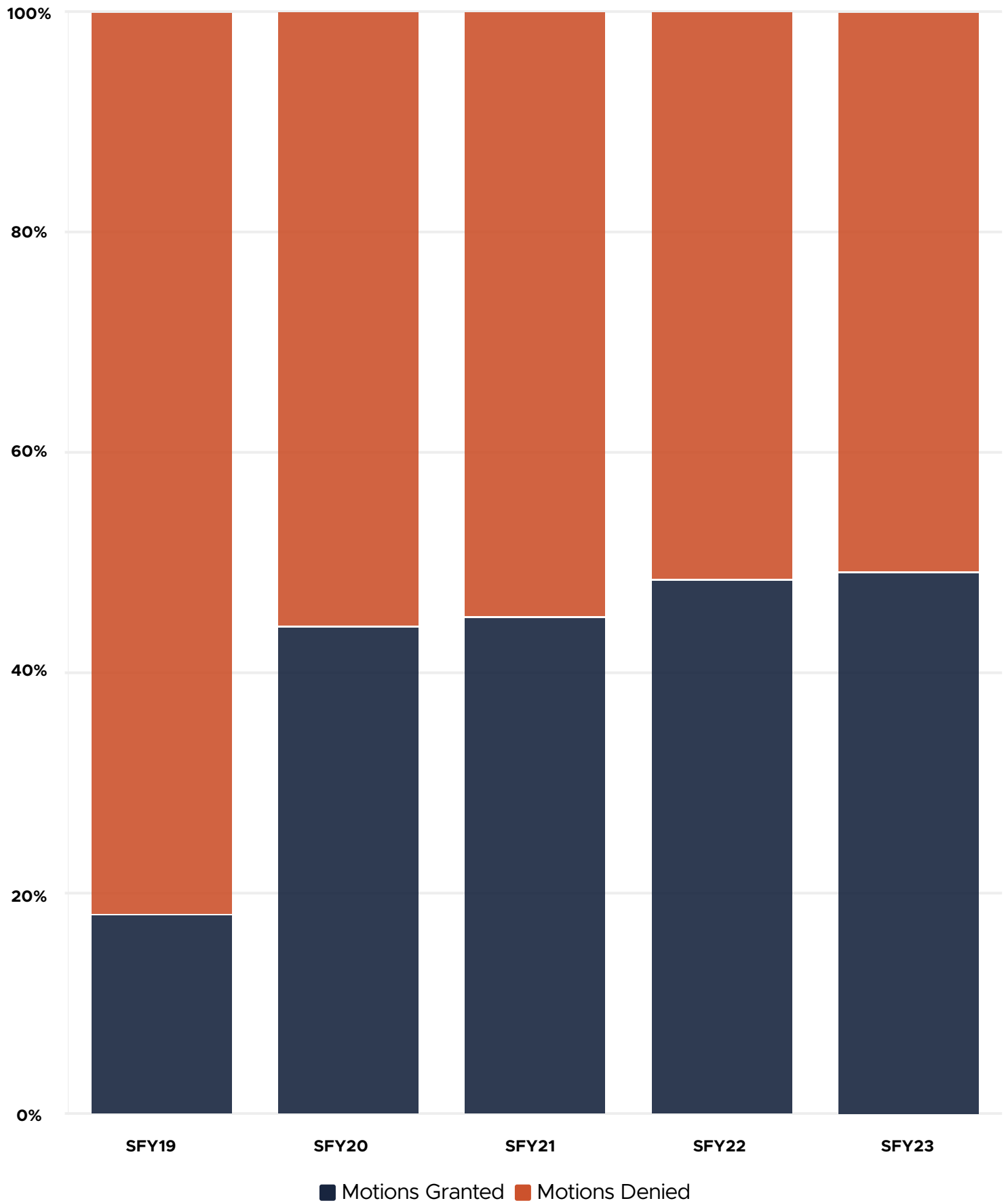
<b>Felony Level</b>	<b>Count</b>	<b>Percent</b>
Murder	182	0.4%
F1	211	0.5%
F2	653	1.5%
F3	1,360	3.1%
F4	2,424	5.5%
F5	6,630	15.1%
F6	32,209	73.4%
FA	29	0.1%
FB	22	0.1%
FC	46	0.1%
FD	86	0.2%
No Charge*	17	0.0%
<b>Total</b>	<b>43,869</b>	<b>100%</b>

\* Note: No Charge\* refers to sentence enhancements, such as Habitual Offender.

A sentence modification motion is a request to the court to suspend or reduce the sentence of a felony conviction, or a request to change the placement or terms imposed by the court during the issuance of the sentence. Offenders may request a sentence modification at any point while serving their sentence. IC § 35-38-1-17 specifies the eligibility and requirements to request a sentence modification. During SFY23, 3,613 sentence modifications were filed. Of those, 26.7% were denied, 25.7% were granted, and the remaining 47.6% are still pending. Requests for sentence modification increased slightly (0.6%) in SFY23 compared to the previous year. The percentage of both requests being denied, and requests being granted decreased from last year by 8.4% and 5.8% respectively, meaning that the percentage of sentence modifications requests that are pending has increased by 10.6% compared to SFY22.

Figure 4 shows the percentage of motions denied compared to the percentage of motions granted per SFY for the last five years. After a large increase from SFY19 to SFY20, the percentage granted has been gradually rising each year from 44.2% granted in SFY20 to 49.1% granted in SFY23.

Figure 4. Percent of Motions Granted and Denied



## PLACEMENT

Placement refers to the type of sentence (jail, probation, IDOC, or community corrections) an offender received following conviction. Table 7 shows that a combination of jail and probation is the most frequently ordered sentence at 23.2%, followed by jail only at 20.3%, and probation only at 18%. Overall, 75.4% of the sentences did not include an IDOC placement. This is a decrease from 79.6% in SFY22 and 80.4% in SFY21.

**Table 7. Placement Type Monthly, SFY23**

Month	Jail and Prob	Jail	Prob	IDOC	DOC and Prob	CC only	CC and Prob	Jail, CC, and Prob	Jail and CC	DOC, CC, and Prob	DOC and CC	No Placement	Total
Jul-22	901	924	803	623	263	375	236	68	45	52	26	11	3,426
Aug-22	1,300	1,346	1,081	809	364	429	226	76	54	36	31	13	4,465
Sep-22	1,112	970	913	701	342	304	192	49	50	45	29	13	3,608
Oct-22	1,151	1,062	924	750	397	342	176	53	35	41	24	15	3,819
Nov-22	1,219	1,037	913	791	373	337	213	67	39	48	34	21	3,873
Dec-22	1,061	821	720	659	317	278	150	43	38	33	34	19	3,112
Jan-23	1,181	1,025	935	731	387	308	205	39	51	48	18	7	3,754
Feb-23	1,186	1,008	848	784	389	358	210	55	45	45	34	15	3,791
Mar-23	1,339	1,087	1,029	962	444	386	239	48	47	43	39	16	4,340
Apr-23	1,155	888	845	807	336	282	206	58	60	49	27	10	3,568
May-23	1,185	1,039	867	865	333	385	265	73	91	66	25	27	4,036
Jun-23	1,023	875	814	930	324	399	310	49	80	69	46	18	3,914
<b>Total</b>	<b>13,813</b>	<b>12,082</b>	<b>10,692</b>	<b>9,412</b>	<b>4,269</b>	<b>4,183</b>	<b>2,628</b>	<b>678</b>	<b>635</b>	<b>575</b>	<b>367</b>	<b>185</b>	<b>45,706</b>

Before the enactment of HEA 1006, FDs were commonly sentenced to IDOC. Now, F6s (the equivalent of FD under the new code) are only sentenced to IDOC in limited circumstances. FDs and F6s make up 71.5% of the placements and are most often sentenced to jail, jail and probation, or just probation. Out of all the placements for SFY23, FDs and F6s constitute 92.7% of the jail only placements. Table 8 shows where FDs and F6s were placed during SFY23. These data demonstrate that 26.3% of FDs and F6s were placed in jail, 28.1% in jail and probation, 21.0% in probation only, and 7.4% in community corrections. About 10.8% of these offenders received a placement that included an IDOC facility, which is higher than the 7.6% that received a placement that included an IDOC facility in SFY22. The increase in placements in IDOC may be due to HEA 1004, which passed in the 2022 legislative session. HEA 1004 provides that a court may commit a person convicted of a Level 6 felony for an offense committed after June 30, 2022, to the IDOC.<sup>5</sup>

5. HEA 1004 is codified in IC 35-38-3-3.



**Table 8. Placement Type for F6s and FDs, SFY23**

Placement Type	Count
Jail and Probation	11,963
Jail	11,194
Probation	8,952
IDOC	3,841
Community Corrections	3,166
Community Corrections and Probation	1,433
IDOC and Probation	685
Jail and Community Corrections	562
Jail, Community Corrections and Probation	528
No Placement	137
IDOC and Community Corrections	52
IDOC, Community Corrections and Probation	23
<b>Total</b>	<b>42,536</b>

Table 9 shows the number of placements per state fiscal year for each facility type and includes all felony levels combined. Across all five years, jail only, and jail and probation were the most common placements overall, as well as for Level 6 and Class D felonies. The next three most common placements overall in descending order were probation only, IDOC only, and community corrections only.

**Table 9. Highlighted Table of Placements for All Felony Levels, SFY19-SFY23**

Placement Type	SFY19	SFY20	SFY21	SFY22	SFY23
Jail	14,840	13,379	10,961	12,729	12,082
Jail and Probation	13,247	11,606	11,228	12,600	13,813
Probation	8,602	7,541	8,064	9,813	10,692
IDOC	9,416	7,658	6,539	7,842	9,412
Community Corrections	7,054	5,633	5,215	5,473	4,183
Community Corrections and Probation	4,678	3,735	3,775	4,096	2,628
IDOC and Probation	3,407	2,896	2,598	3,040	4,269
Jail, Community Corrections and Probation	1,005	819	989	1,042	678
Jail and Community Corrections	940	780	795	878	635
IDOC, Community Corrections and Probation	616	572	558	703	575
IDOC and Community Corrections	391	345	332	435	367
No Placement	138	139	145	194	185

Level 6 felonies are the level with the greatest number of placements each year. Table 10 shows the percent of total placements that were Level 6 felony or a Class D felony, the percent of jail only placements that were F6 or FD, and the percent of placements that included IDOC placements that were F6 or FD<sup>6</sup>. Between 73% and 75.8% of all placements each year are for Level 6 or Class D felonies, most of which are placed in jail, jail and probation, or probation only. Of the jail only placements, between 92.7% and 95% were Level 6 or Class D felonies each year from SFY19 to SFY23.

There has been a slight variation in the percentage of placements that include an IDOC facility for F6/FD over the years, but the range across all years was between 7.3% to 10.8%. The increase in this percentage of placements in IDOC for SFY23 may be due to HEA 1004, which passed last year. This was intended, in part, to both ease the overcrowding in jails and to provide individuals with better access to resources at an IDOC facility rather than a county jail.

**Table 10. Placements of Level 6 Felonies from SFY19 to SFY23**

Placements	SFY19	SFY20	SFY21	SFY22	SFY23
Percent of total placements that are F6/FD	75.8%	75.1%	74%	73%	71.5%
Percent of Jail only placements that are F6/FD	95%	95.1%	95.3%	93.4%	92.7%
Percent of IDOC* placements that are F6/FD	9.1%	7.8%	7.3%	7.6%	10.8%

*\*Note: IDOC\* includes all placements with IDOC only and IDOC in combination with other placements. The total placements in row one shows the percentage of all placements that are F6s/FDs. The percentage of jail only placements in row two shows the percentage of just jail only placements that are F6s/FDs. The percentage of IDOC placements in row three shows the percentage of all placements that include IDOC that are F6s/FDs.*

## PROBATION

Probation is a court-imposed sentence that releases a convicted person into the community, subject to certain conditions. As shown in Table 11, the total number of adult offenders on probation fluctuated over SFY23, with the highest number of offenders on probation in quarter four of 2022 and the lowest number of offenders in quarter two of 2023. The number of new felony supervisions received saw a decrease throughout SFY23 with an overall decrease of 11.9% over the fiscal year, but a slight increase of 6.9% compared to SFY22. For new felony supervisions, substance use offenses made up 45.5% of offenders on probation.

6. The number of class D felonies decreases every year as the class A-D system is phased out. Class D felonies are included with Level 6 felonies in these comparisons because both are the least severe felony levels.

**Table 11. Adult Felony Supervisions, Quarterly SFY23**

	Quarter Supervision Received			
	2022 Q3	2022 Q4	2023 Q1	2023 Q2
Total Current Supervisions	56,411	57,435	53,952	50,682
Total Felony Supervisions Received	10,001	9,676	9,384	8,814
Felony Supervisions Received, Substance Use	4,264	4,680	4,614	3,690

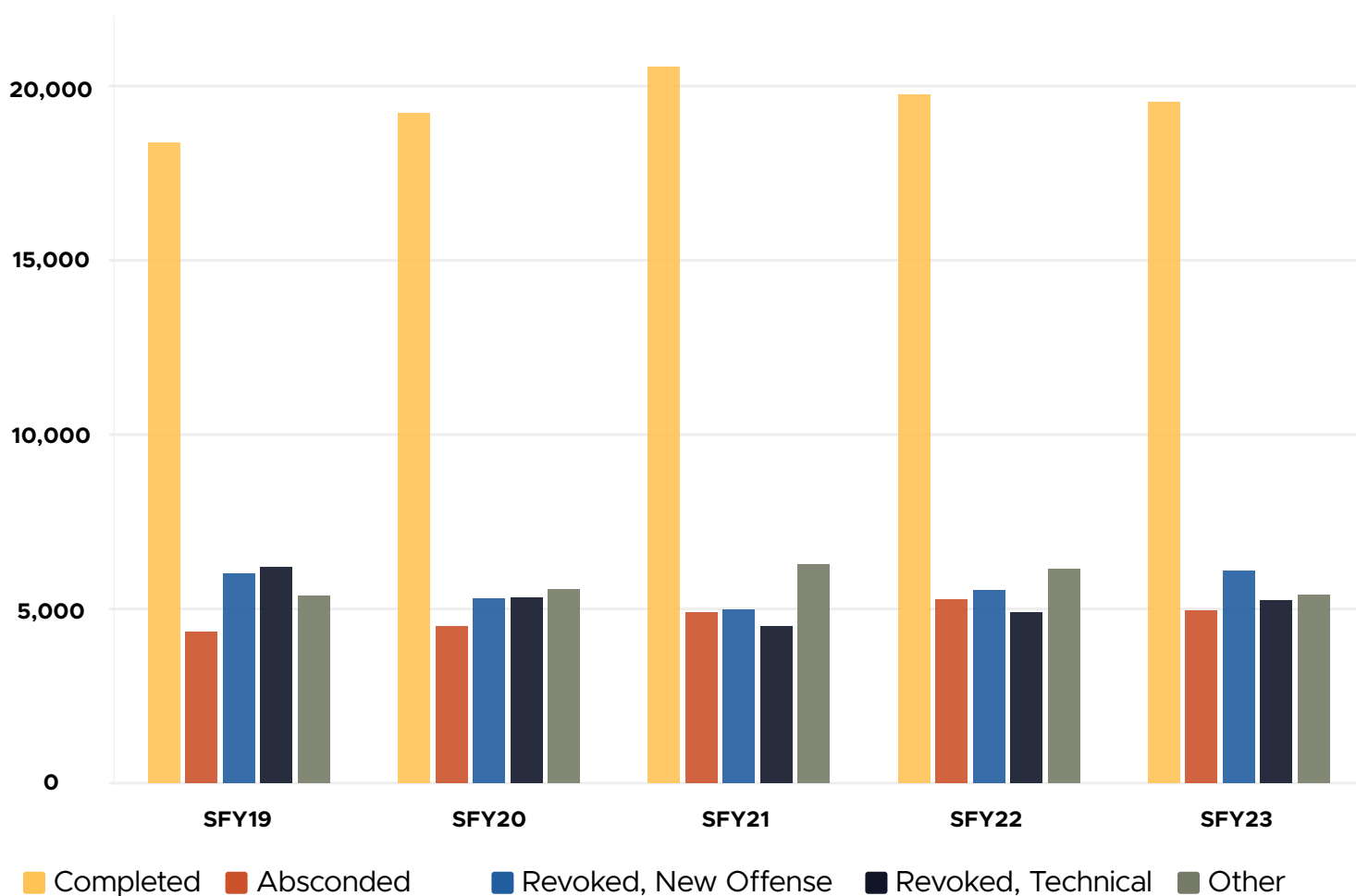
There are different methods of release from probation, including discharged (completed probation), revoked for a new offense, revoked for a technical violation (e.g., repeated failure to report to probation officials), absconded (whereabouts are currently unknown), and other. As shown in Table 12, 47.4% of offenders released from probation during SFY23 completed their probation sentence. Nearly 15% of probationers had their sentence revoked due to committing a new offense prior to completing their probation sentence, and 12.7% had their probation revoked due to a technical violation. Of the remaining probationers, 12% absconded prior to probation completion, and 13.1% of offenders were discharged for other reasons.

**Table 12. Adult Felony Offenders Released from Probation by Type Quarterly SFY23**

	Quarter Supervision Received				Total
	2022 Q3	2022 Q4	2023 Q1	2023 Q2	
Completed	5,180	4,549	5,440	4,373	19,542
Revoked, New Offense	1,467	1,432	1,660	1,532	6,091
Revoked, Technical	1,397	1,151	1,417	1,286	5,251
Absconded	1,282	1,137	1,337	1,203	4,959
Other	1,471	1,607	1,217	1,092	5,387
<b>Total</b>	<b>10,797</b>	<b>9,876</b>	<b>11,071</b>	<b>9,486</b>	<b>41,230</b>

Over the years, the most common reason by far for release from probation supervision is completion of probation conditions (Figure 5). Revocations for both technical violations and new offenses are close in number, but revocations for new offenses have become more common over the last three state fiscal years. Releases for “Other” reasons were more common in SFY20 through SFY22, which may be due in part to COVID-19. Finally, absconding from probation was typically the least common reason for “release” from probation, except for when it exceeded revocations for technical violations in SFY21 and SFY22.

**Figure 5. Released from Probation, SFY19 – SFY23**



## PROBLEM-SOLVING COURTS

Many counties implemented problem-solving courts to not only help with increased caseloads and resolution of cases but also to provide alternative sentencing options to offenders. Problem-solving courts address specific offenses or needs and often, upon successful completion, the offender will have the conviction dropped to a misdemeanor or dismissed. Research conducted by the National Institute of Justice (NIJ) has shown that offenders who complete a problem-solving court program often have a lower rate of recidivism, a reduction in drug relapse, and report less criminal activity. Additionally, NIJ’s research found that drug courts are most effective when serving offenders who are assessed as high-risk to re-offend and in high need of services.<sup>7</sup>

7. Haskins, Paul A. (2019, September). *Problem-solving court: Fighting crime by treating the offender*. National Institute of Justice. Retrieved from [on.in.gov/4an1x](https://on.in.gov/4an1x)

**Table 13. Total Problem-Solving Courts**

Type of Problem-Solving Court	Total	Planning Stages
Adult Drug Court	50	0
Veterans Court	29	2
Family Recovery Court	21	2
Reentry Court	11	0
Mental Health Court	10	9
Juvenile Drug Court	2	1
Juvenile Problem-Solving Court	2	1
Operating While Intoxicated Court	2	0
Domestic Violence Court	2	1
Adult Problem-Solving Court	1	0
Truancy Court	1	1
Juvenile Mental Health Court	1	2
<b>Total</b>	<b>132</b>	<b>19</b>

In Indiana, 37.8% of all certified problem-solving courts are adult drug courts. However, many problem-solving courts also address substance use concerns because problem-solving courts address the needs of the individual, including needs involving drug abuse and mental illness.<sup>8</sup> Of the problem-solving courts in the planning stages, 58% are adult or juvenile mental health courts. As of October 2023, there are 132 active problem-solving courts and 19 problem-solving courts in planning stages in 59 counties. The problem-solving courts reported serving 4,339 participants, and 31% of these participants had Level 6 felony cases. Table 13 shows the total number of each type of problem-solving court in the state.

The scope and number of problem-solving courts have increased over the past two decades. Over that time, the most common type of problem-solving court has been and continues to be Adult Drug Courts. Family Recovery Courts have also been one of the most common types of problem-solving courts and have increased in number steadily over the years. Family Recovery Courts are courts that target cases of abuse or neglect in which the parent or caregiver suffers from substance use disorder. Veterans problem-solving courts have increased in prevalence and surpassed Family Recovery Courts in number over the past decade. Mental Health Courts and Reentry Courts have also increased in number across the state over the past 10 years, though not as much as the previous three types of problem-solving courts. Finally, there are a few problem-solving courts throughout the state for Juveniles (Problem-Solving, Drug, and Mental Health), Operating a Vehicle While Intoxicated (OVWI), Domestic Violence, and Truancy.



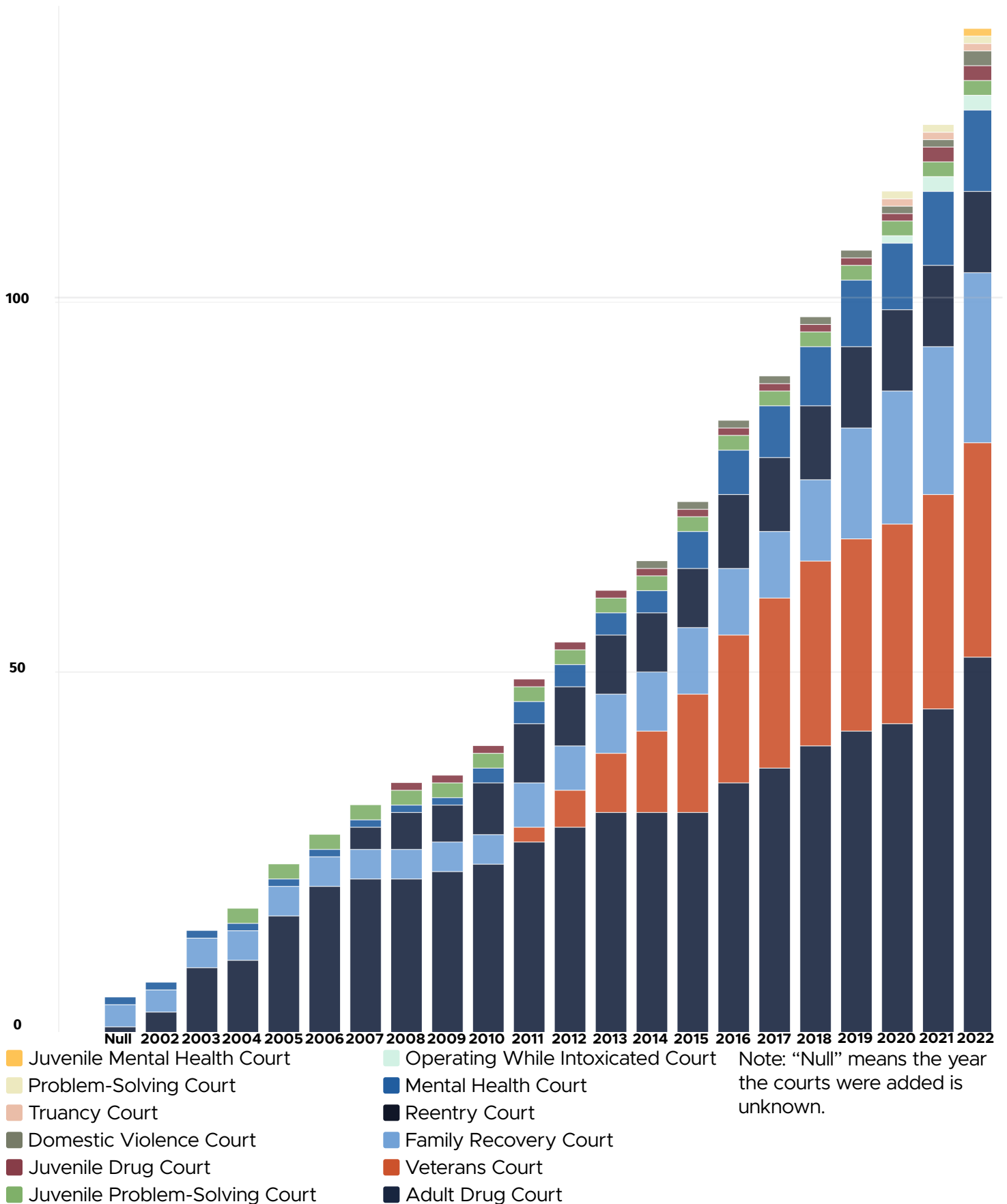
To see more about the types of problem-solving courts available in different counties throughout Indiana, see the interactive dashboard on the ICJI website.



[on.in.gov/1006report](https://on.in.gov/1006report)

8. Office of Court Services. (n.d.). Problem-solving courts. Retrieved from [on.in.gov/PSCourts](https://on.in.gov/PSCourts)

**Figure 6. Total Problem-Solving Courts per Year**



# DEPARTMENT OF CORRECTION & COMMUNITY CORRECTIONS DATA

In 2014, HEA 1006 impacted the IDOC offender population by changing the law to state that a person convicted of a Level 6 felony may not be committed to the IDOC unless:

- the offender has been committed due to violating a condition of probation, parole, or community corrections by committing a new offense;
- the offender is convicted of a F6 and that sentence is ordered to be served consecutively to the sentence for another felony;
- the offender is convicted of a F6 that is enhanced by an additional fixed term or has received an enhanced sentence;
- the offender's earliest release date is greater than 365 days; or
- the commitment is due to an agreement made between the sheriff and the IDOC.

However, in the 2022 legislative session, HEA 1004, which states that a person convicted of a Level 6 felony is eligible for placement into an IDOC facility, was signed into law. While HEA 1006 succeeded in reducing the state's prison population and allowing offenders to serve their time closer to their homes and families, the drawbacks to the 2014 decision included the sudden overcrowding of county jails, exploding sheriff's budgets, and offenders' lack of access to necessary services and programs that are only offered at the state level. HEA 1004 is intended to both ease the overcrowding in jails and to provide individuals with more access to resources at an IDOC facility rather than a county jail. It will take time to see what effects this new law will have on both jail and prison populations.

The above conditions are still in place for offenses committed before July 1, 2022. Generally, F6 offenders will serve 50% of their sentence when accounting for the possibility of education/program credits and likely will serve that time in jail, although an increase in prison placements has already been noticed. F1 – F5 offenders will serve at least 75% of their sentence and will most likely be placed in prison to serve their sentence. During the 2020 legislative session, HEA 1120 expanded the types of programs that are available to offenders in the IDOC to earn good time credit.<sup>9</sup> Programs are completed for educational credit time and good behavior is awarded by good time credit. This expansion helps reduce recidivism and decrease the prison population.

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*9. Good time credit means a reduction in a person's term of imprisonment or confinement awarded for the person's good behavior while imprisoned or confined.*

# TOTAL ADULT OFFENDER POPULATION

The total adult offender population is the average number of adult offenders under any commitment to the IDOC, which includes the IDOC facilities, jail IDOC contracts (offenders committed to IDOC that are awaiting transfer), and F6 jail diversions. F6 jail diversions are offenders convicted of a Level 6 felony serving time in a county jail. The monthly average IDOC population for SFY23 is 25,332 offenders. Prior HEA 1006 reports published by the ICJI show that after HEA 1006 was enacted in 2014, the facility offender population continually decreased until the first half of 2017. From 2017 to 2020 offender population increased by 1,526 offenders. Since 2020 the offender population has decreased. As of SFY23, the offender population has decreased by 3,944.

The monthly average for the total population saw a 1.2% decrease from last year's monthly average total of 25,641. Since 2020, the monthly average population has decreased. On average, 92% (23,311) of offenders are housed in a state facility or with a third-party contractor that falls under state discretion. The remaining 2,005 offenders include F6 jail diversions. In SFY23 (2,021 offenders), F6 jail diversions increased by 9.8% compared to SFY22 (1,840 offenders).

Figure 7 shows a month-by-month total for IDOC offender populations. From July 2022- June 2023 there was an overall decrease of 2.7% (1,000) of total offenders in the IDOC population.

**Figure 7. Total IDOC Offender Population, SFY23**

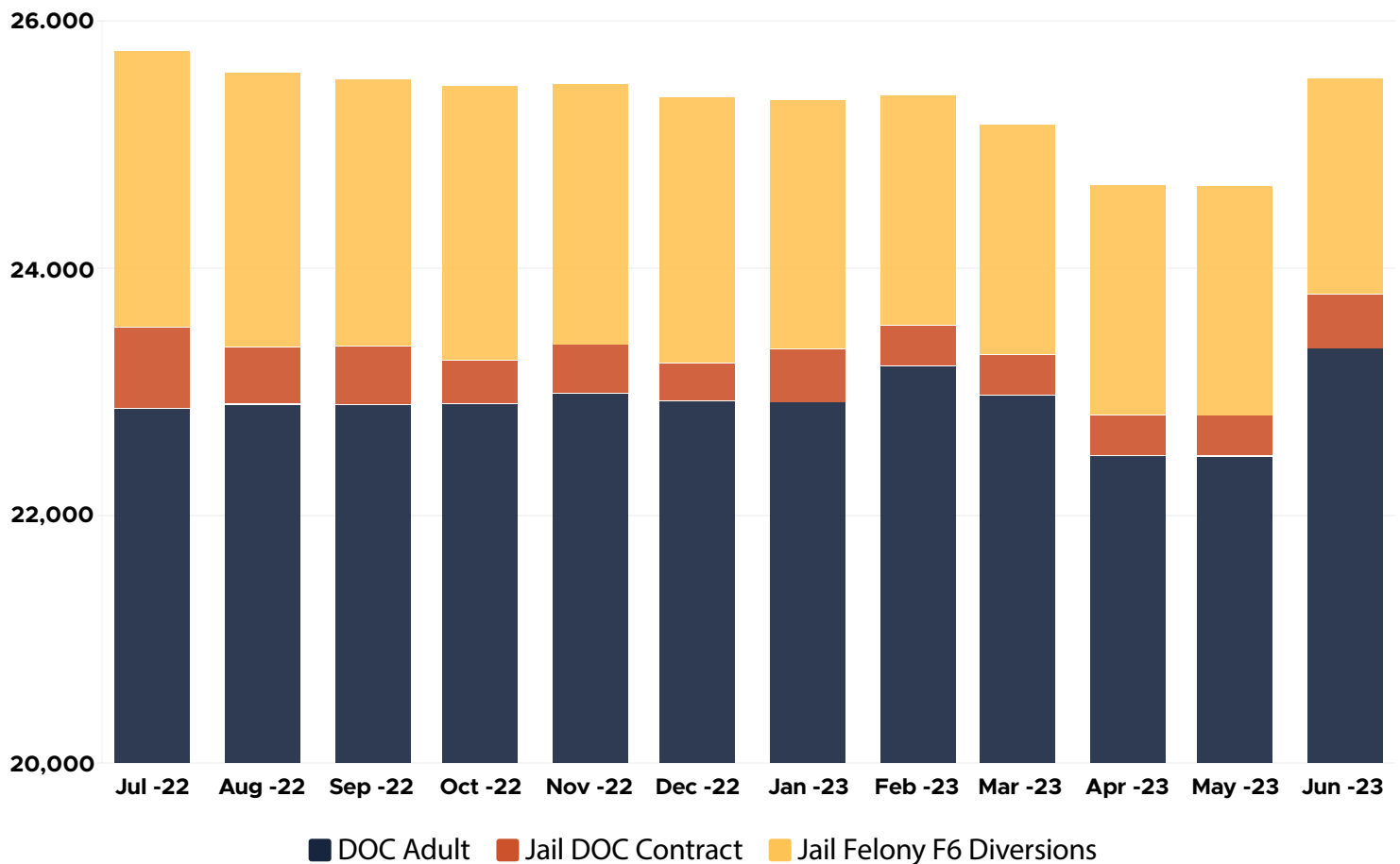
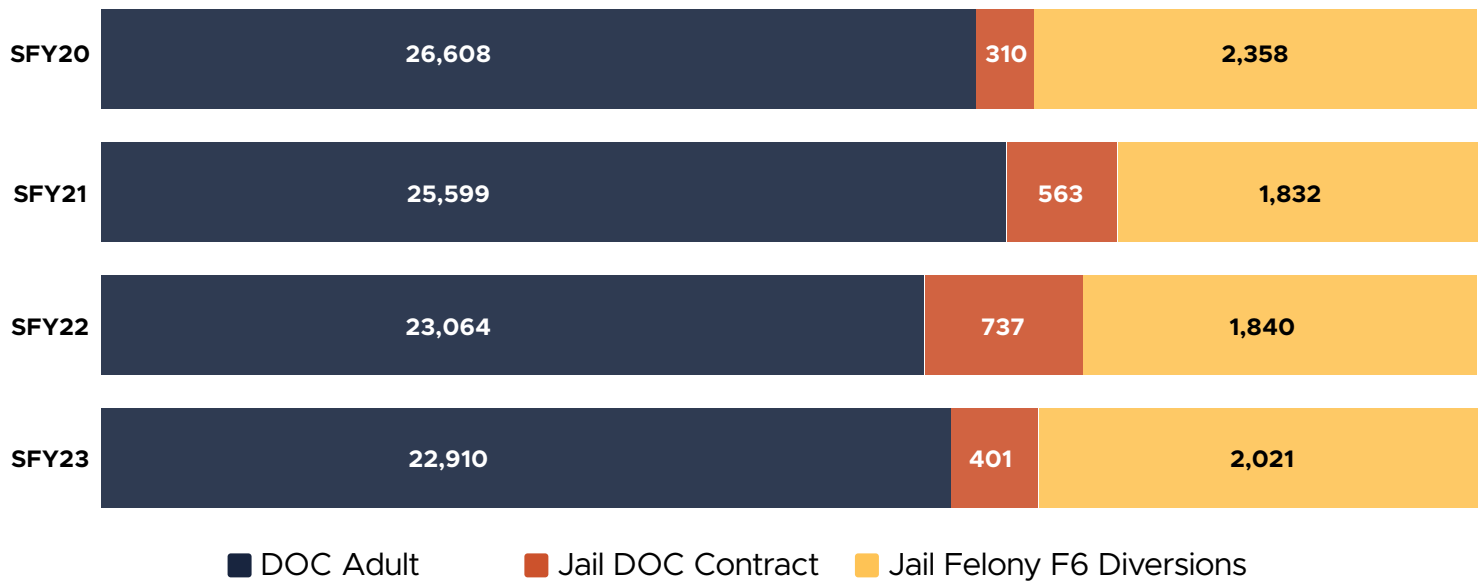




Figure 8 shows an average yearly total for IDOC offender populations. From SFY20 through SFY23, the IDOC offender population decreased each year. The largest decrease in the total offender population (which includes jail DOC contract and jail felony F6 diversions) occurred from SFY21 to SFY22. The population decreased by 2,353 offenders. The most noticeable category is jail DOC contract offenders. In SFY22, an average of 737 offenders were held in county jails under a DOC contract. That number continually increased from SFY20, but SFY23 shows a significant decrease (336 offenders) of jail DOC contract offenders from the previous year. Lastly, the data shows that F6 jail diversions begin to increase in SFY21 and continue to increase into SFY23. Over two years, the F6 jail diversions offender population increased by 189 offenders.

**Figure 8. Average, Total IDOC Offender Population, SFY20-SFY23**



## ADULT ADMISSIONS AND RELEASES

Figure 9 illustrates monthly admission and release rates for adult offenders in prisons and IDOC contracted facilities. An admission is when an offender enters the custody or jurisdiction of the IDOC. A release is when an offender leaves the custody or jurisdiction of the IDOC. The average monthly rate for admissions is 735 offenders, an increase of 14.8% in monthly admissions relative to last year's rates. The average monthly rate for releases is 845 offenders, an increase of 12.3% in monthly releases compared to last year's rates.

**Figure 9. Average, Monthly Admissions & Releases, SFY23**

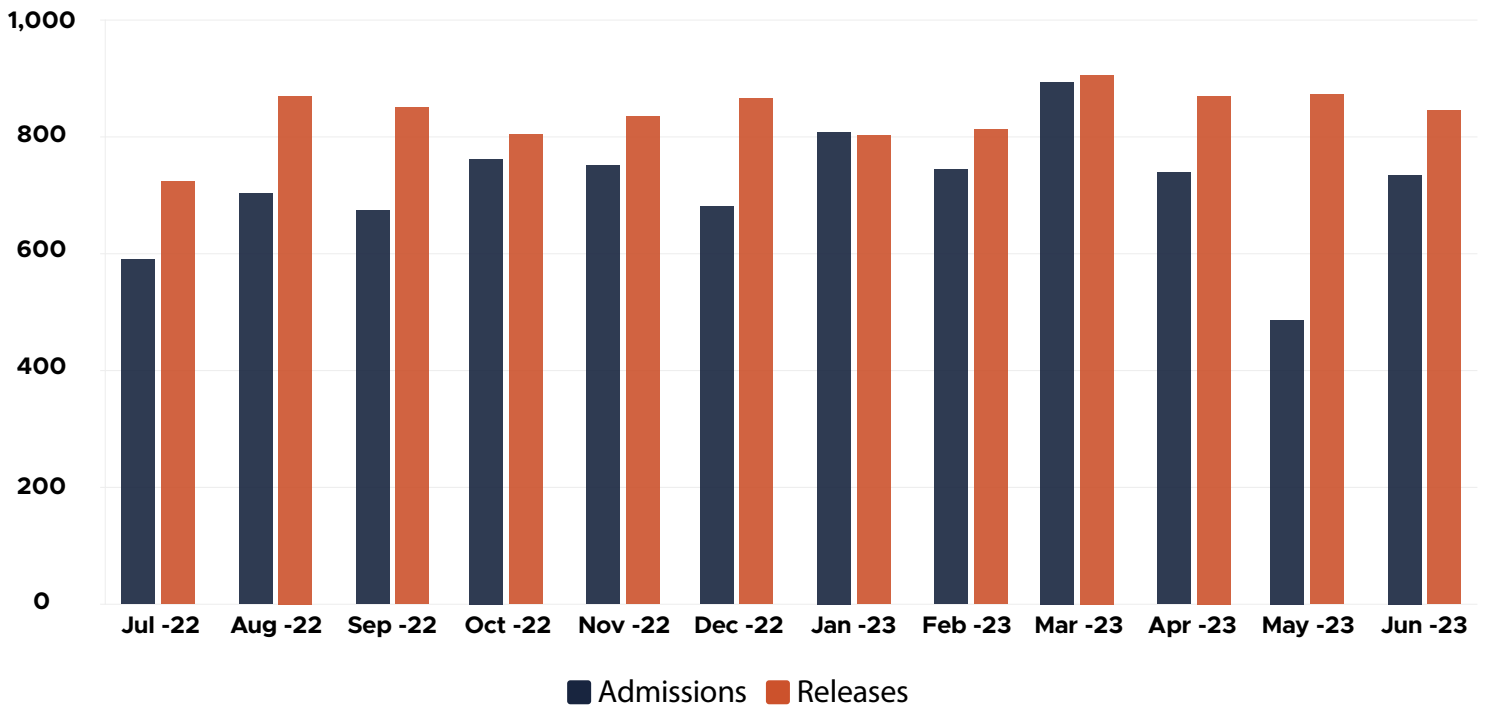


Figure 10 is a 4-year analysis of average monthly admissions and releases from SFY20-SFY23. SFY20 shows the largest number of admissions and releases. SFY21 data shows the largest gap between admissions and releases by a difference of 239 offenders. The other years averaged a difference of 136 offenders.

**Figure 10. Average, Monthly Admissions & Releases, SFY20-SFY23**

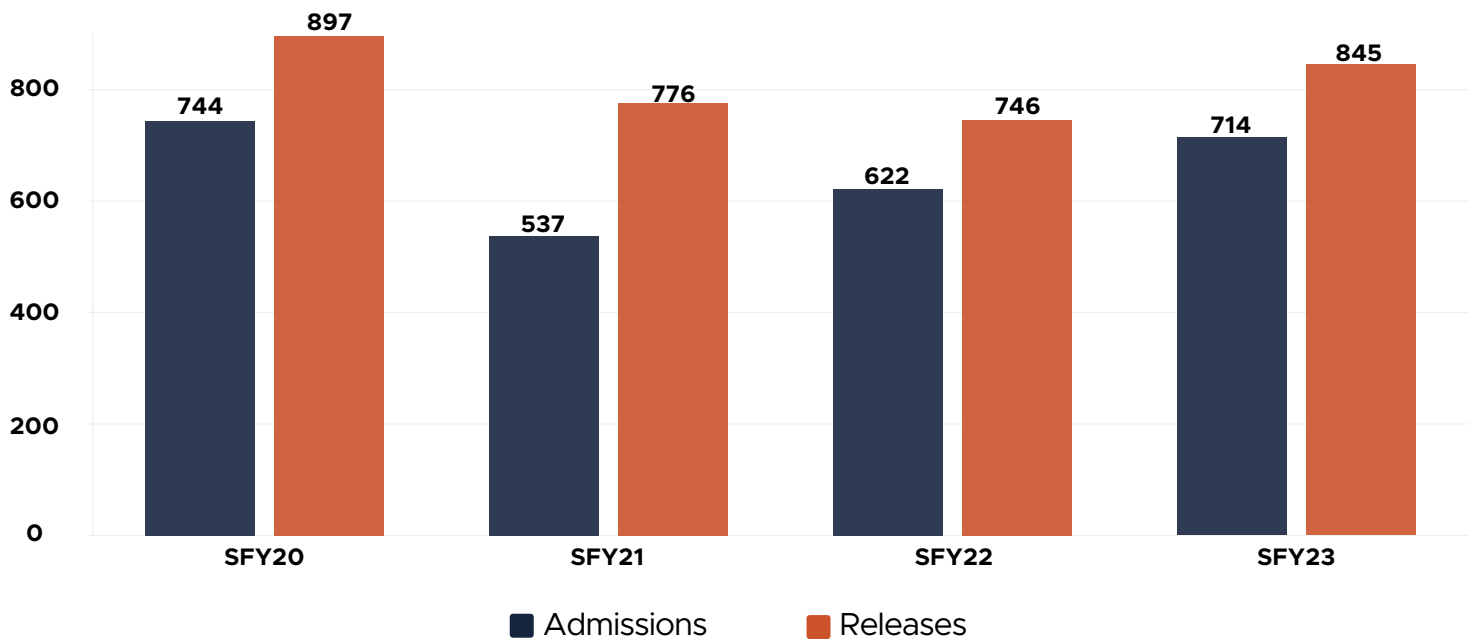
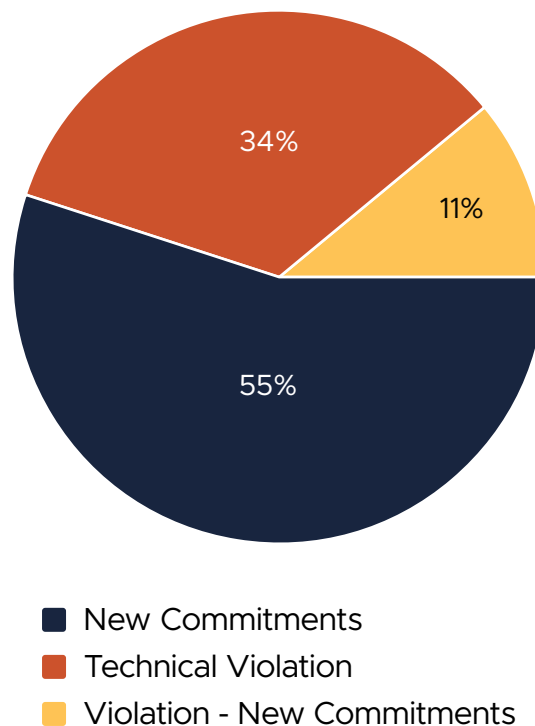


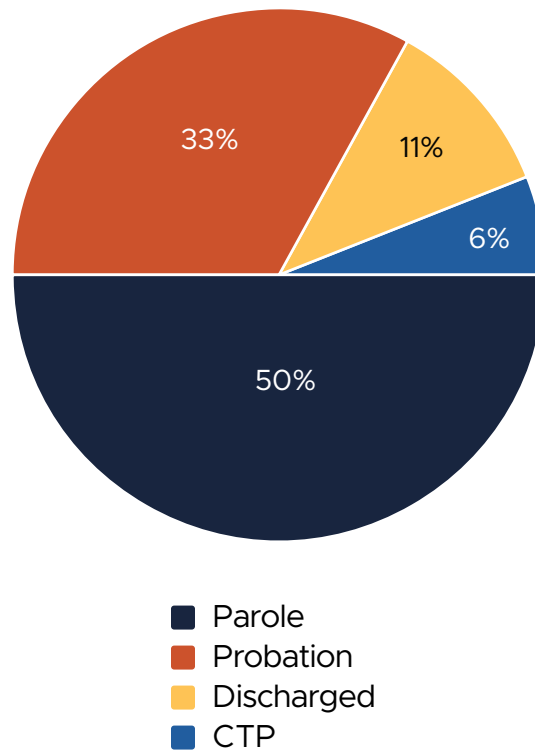
Figure 11 shows admissions by type of commitment. New commitments are offenders who are being committed to the IDOC on a new sentence. Violation-new commitments are those offenders who were under community supervision including probation, parole, and the community transition program (CTP), and violated the terms of their community supervision by committing a new offense. These individuals are returning to the IDOC to serve a new sentence and may also have concurrent and/or consecutive sentences to serve. Technical violations show offenders who were returned to the IDOC for violating the terms of community supervision, including probation, parole, or CTP. New commitments were the most common type of admission and made up 55% of all admissions for a total of 4,704 offenders, an increase of 26% compared to last year. Technical violations make up 34% of admission types, and the number of offenders increased by 15% from the previous year. Violation – new commitments made up 11% of all admissions. The number of offenders decreased from 1,109 offenders in SFY22 to 902 offenders in SFY23, which shows a decrease of 19%. Each of the commitment types combined for a total of 8,555 individual admissions, which is 1,131 more than last year, indicating a 15% increase in total admissions.

Releases by type are shown in Figure 12. The discharged category represents offenders released from the IDOC without any further commitment or supervision on any sentence. The parole, probation, and CTP categories represent offenders who are being released from an IDOC facility to community supervision as part of their release agreement. The total number of released offenders decreased by 408 (-4.6%) offenders compared to last year. The number of offenders released in 2022 was 8,856 and in 2023, the releases totaled 8,448.

**Figure 11. Average Admissions by Commitment Type, SFY23**



**Figure 12. Release by Type, SFY23**



The number of offenders released on parole increased by 10% from 3,836 offenders last year to 4,221 this year. The number of offenders released on probation decreased by 8.9% from 3,110 offenders last year to 2,832 offenders this year. The number of offenders discharged dropped by 10.1% from 992 offenders last year to 892 offenders this year. The number of offenders released on a community transition program (CTP) dropped from 918 last year to 503 this year.

Figure 13 shows average admissions by type (new commitments, violation-new commitments, and technical violation) from SFY19-SFY23. The data appears to be relatively consistent over the years. Overall, the largest increase in admission type, new commitments, comes from SFY22 to SFY23 where there was a 5% increase. The previous years in new commitments show a 1% increase each year. The data shows a 5% decrease from SFY22 to SFY23 in violation-new commitments.

**Figure 13. Admissions by Type, SFY19-SFY23**

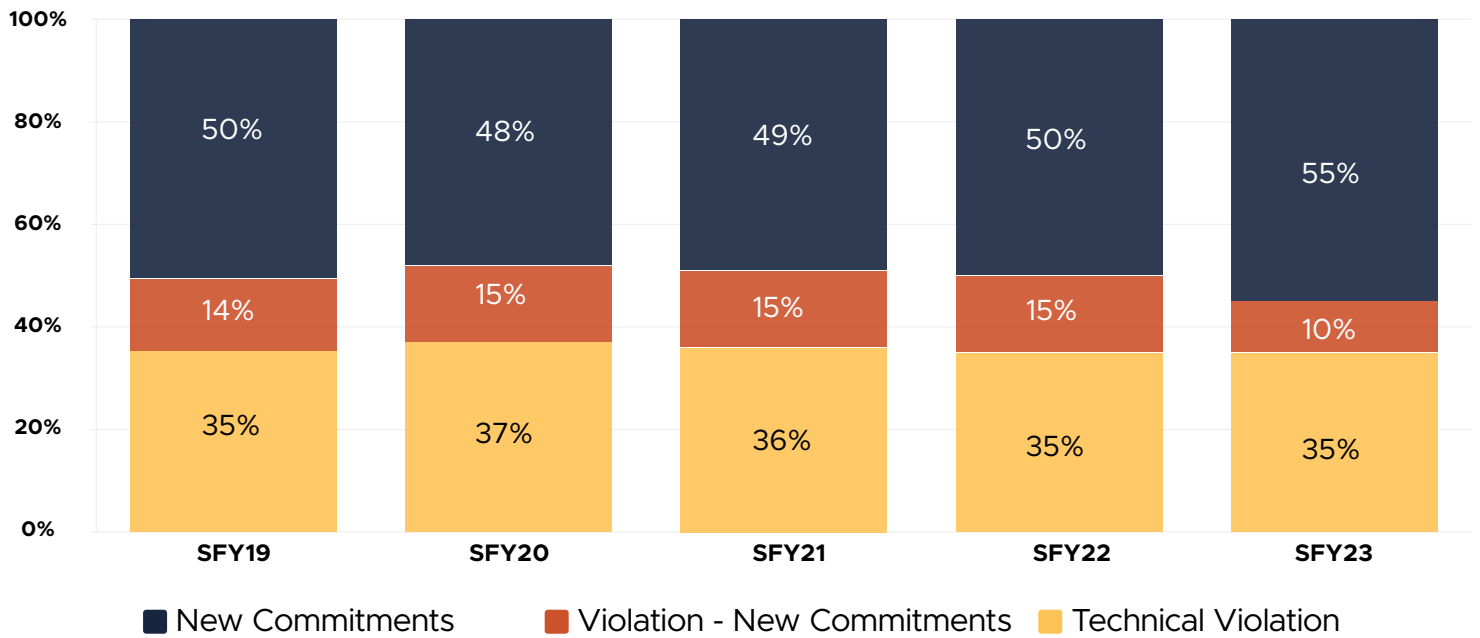
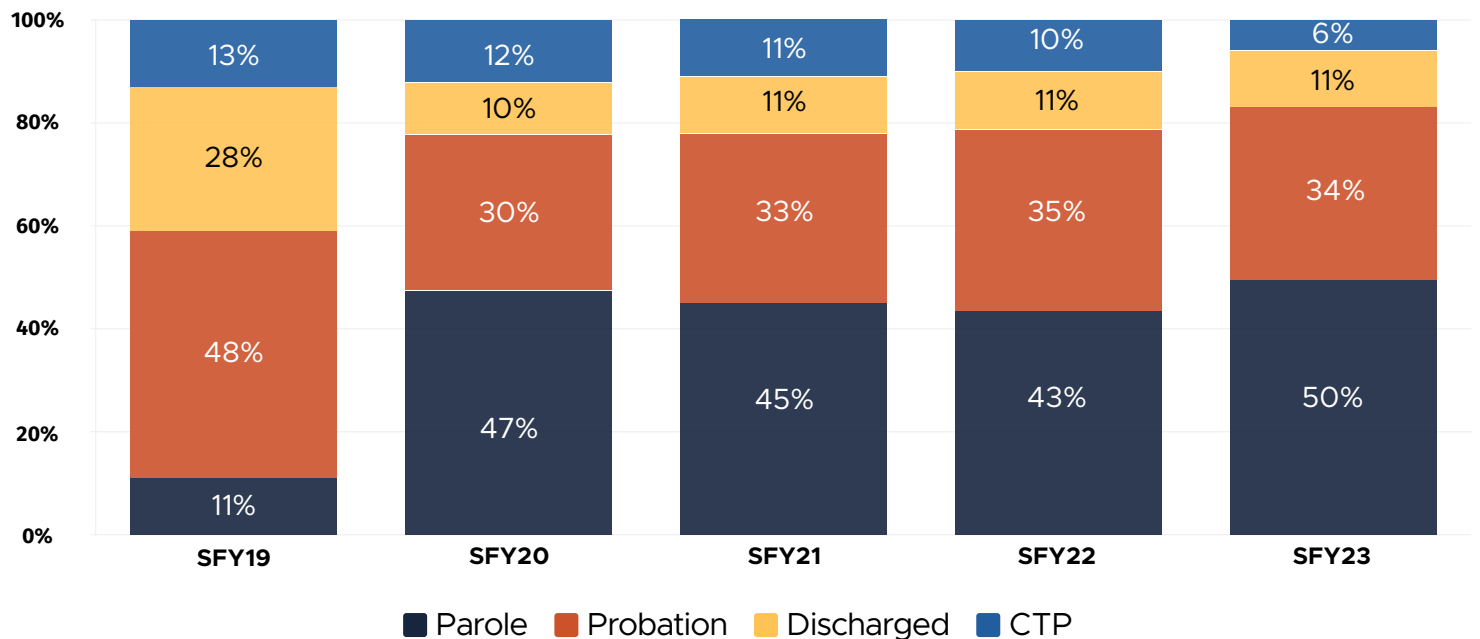


Figure 14 shows average releases by type (parole, probation, discharged, and CTP) from SFY19-SFY23. SFY19 data shows vastly different percentages compared to the other years, except for the CTP category. It is unclear why parole, probation, and discharged release types are significantly different. Overall, the data appears to show consistency over the years. The most notable increase takes place from SFY22 to SFY23, where parole released 7% more offenders. Another notable change is from SFY22 to SFY23, when the number of CTP releases decreased by 4%.

**Figure 14. Releases by Type, SFY19-SFY23**



## JUVENILE ADMISSIONS AND RELEASES

The figures below illustrate monthly admission and release rates for juvenile offenders in detention facilities. The monthly average rate for admissions is 32 juvenile offenders. The monthly average rate for releases is 28 offenders. The data shows males comprise the majority of the monthly average.

Figure 15 shows the monthly admission and release rates for male juvenile offenders. March and April 2023 had the most admissions at 35, whereas June 2023 had the least admissions at 21. Overall, there are commonly more admissions each month than there are releases. Over the 12 months, there are five months where more juvenile offenders were released than were admitted: July 2022, October 2022, January 2023, February 2023, and June 2023. On average, the monthly admission rate for male, juvenile offenders is 27 offenders and the release rate is 24 for male, juvenile offenders.

**Figure 15. Male, Monthly Admissions and Releases, SFY23**

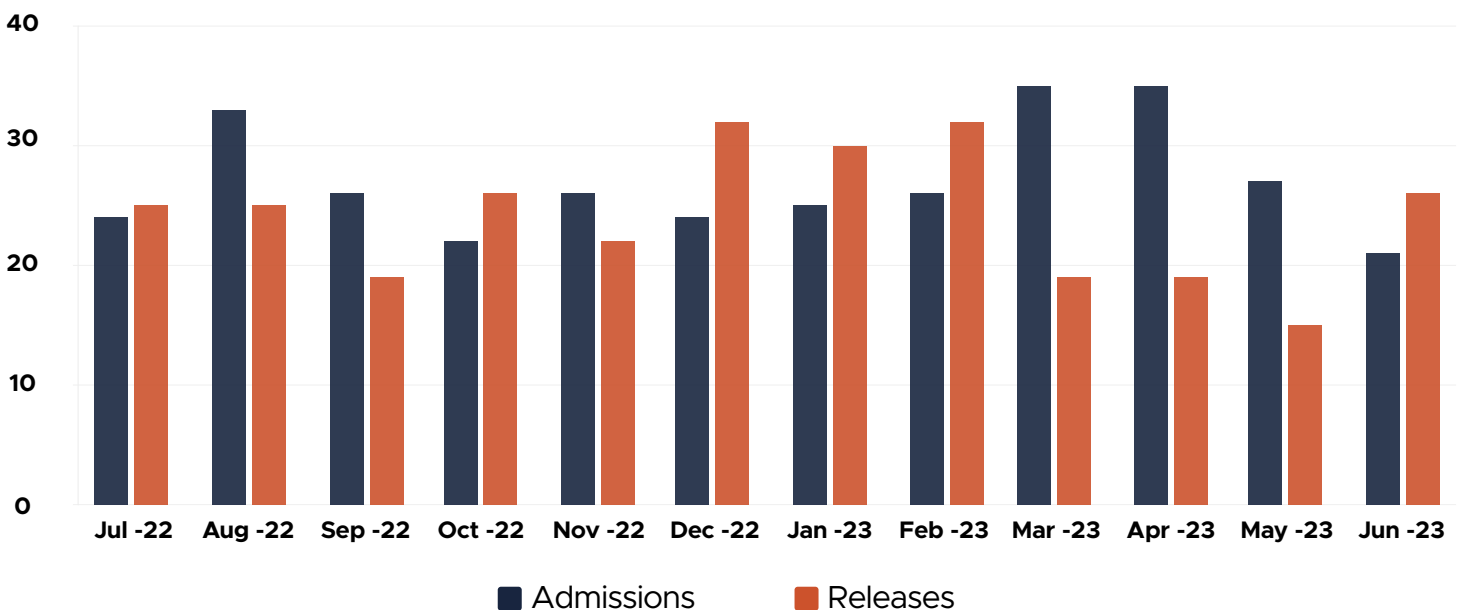
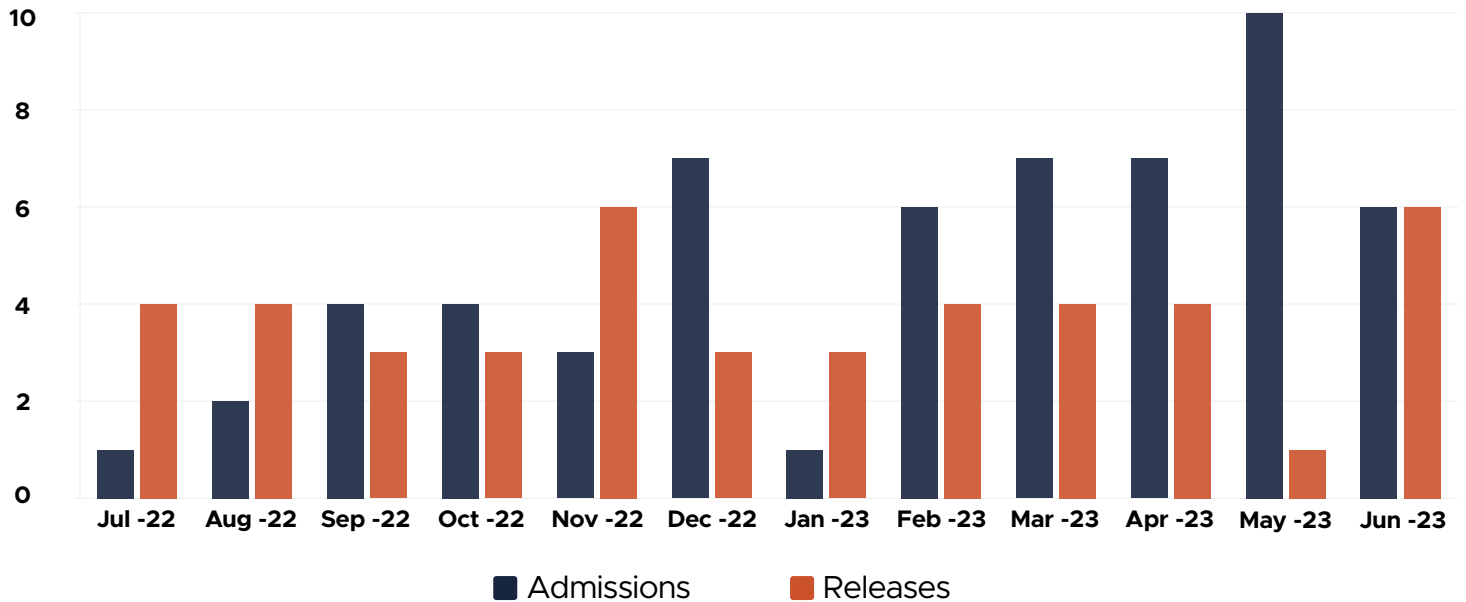


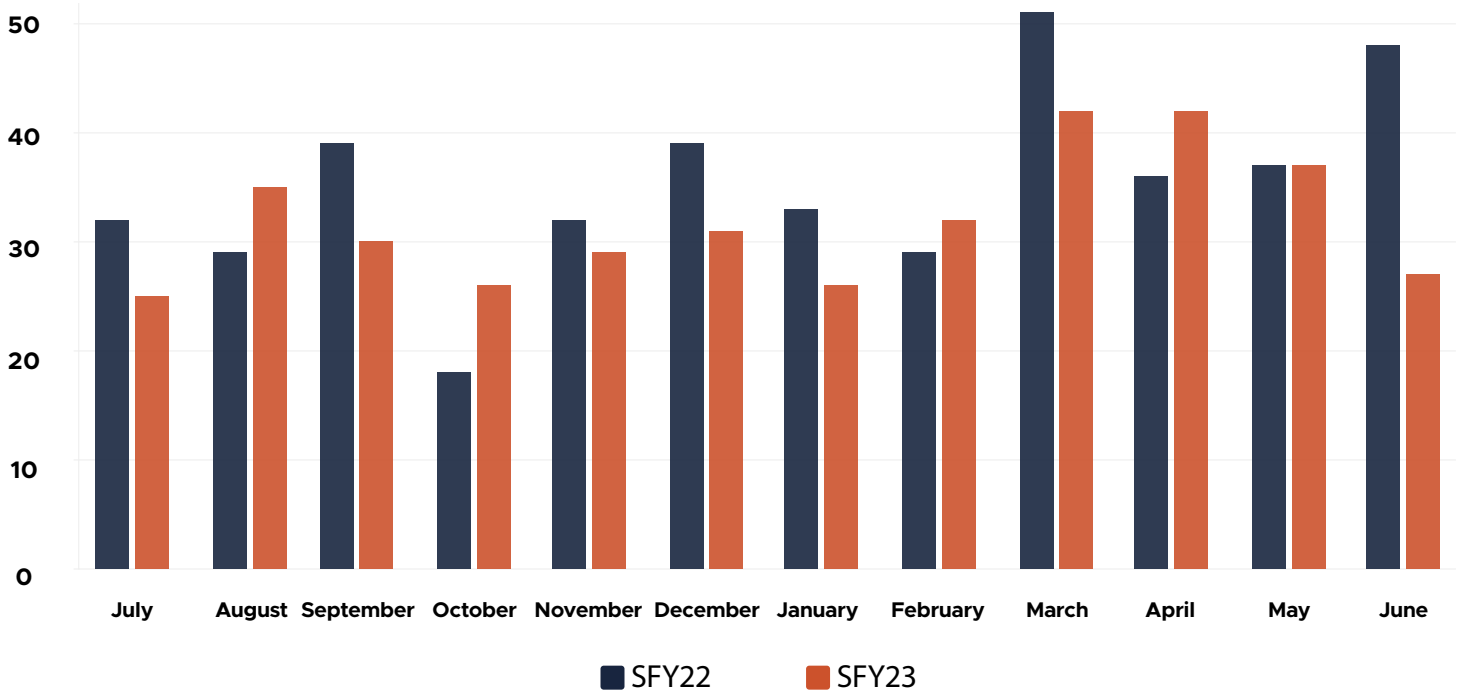
Figure 16 illustrates the monthly admission and release rates of female juvenile offenders. Much like the male juvenile data, the admission rate is higher than the release rate. However, the data shows females, on average, are released at a higher rate than males. The following months had more releases than admissions: July 2022, August 2022, November 2022, and January 2023. June 2023 had the same number of admissions and releases. Figure 16 shows the highest recorded admissions occurred in May 2023, with 10 females admitted to a juvenile facility. On average, the female monthly admission rate is 4.8 offenders versus the 3.75 offenders release rate.

**Figure 16. Female, Monthly Admissions and Releases, SFY23**



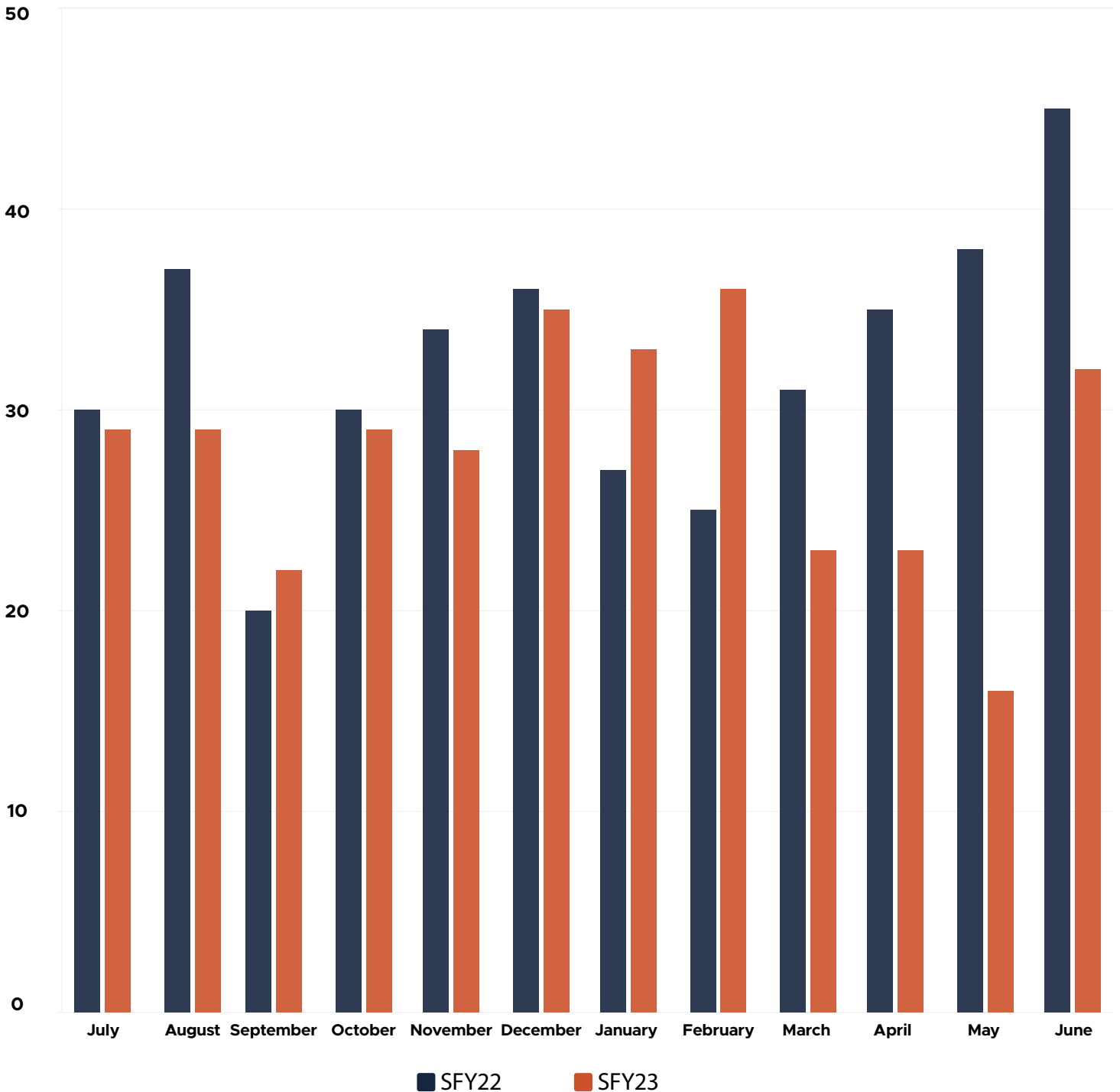
Figures 17 and 18 show the total number of male and female juveniles' monthly admissions and releases for SFY22 and SFY23. In Figure 17, the most notable months are March and June. March of 2022 shows the highest number of admissions, with 51 juveniles. The month of June shows the largest decrease in admissions. Admissions in June of 2023 decreased by 21 juveniles from the previous year.

**Figure 17. Juvenile Monthly Admissions, SFY22-SFY23**



In Figure 18, the month that stands out the most is June of 2022. Forty-five juveniles were released, which is the highest number of juveniles released in a single month over a two-year period. The month of May is notable as well. In May of 2022, 38 juveniles were released, whereas a year later only 16 juveniles were released. That is almost a 60% decrease in releases in one year. Notably, SFY23 had more monthly releases than admissions of juveniles. In SFY23, the following months had more releases than admissions: July, October, January, February, May, and June. In SFY22, August, October, and November had more releases than admissions. In October, more juveniles were released than were admitted in SFY22 and SFY23.

**Figure 18. Juvenile Monthly Releases, SFY22-SFY23**





## RECIDIVISM

The IDOC defines recidivism as any offender who returns to IDOC custody within three years of release from an IDOC facility.<sup>10</sup> Table 14 shows recidivism for offenders released in 2019 that were reincarcerated by 2022. According to the IDOC, adult recidivism rates for 2022 (offenders released in 2019) show that approximately 30% were recommitted to IDOC for either a new conviction or a violation of post-release supervision. Of the 30%, approximately 35% returned to IDOC for a new offense and 65% returned due to a technical rule violation. IDOC reports the younger the offender is at the time of release the more likely they are to return to IDOC. Lastly, it is reported that offenders serving less than five years represent nearly 62% of all recidivists.<sup>11</sup>

Overall, recidivism rates for all offense levels decreased from the previous year. The average recidivism rate decreased by 1.7% from SFY22 to SFY23. The most notable change falls under the Misdemeanor offense category. The previous year showed a 25% recidivism rate. In 2023, the rate of recidivism decreased to 16.7%. This is the second year in a row the recidivism rate for Misdemeanor offenses has decreased. Following closely behind Misdemeanors is Felony D. In SFY23, of the 279 offenders that were released, 17.2% ended up back in prison within three years. Within a year, the recidivism rate for Felony D dropped 8% from the previous year. Felony 5 shows the most released offenders. Of those 3,269 offenders, 919 (28.1%) re-offended.

**Table 14. Recidivism by Offense Level, SFY23**

Offense Level	Number Released	Number of Recidivists	Recidivism Rate
Murder	62	13	20.97%
FA	451	116	25.72%
FB	2,427	906	37.33%
FC	887	283	31.91%
FD	279	48	17.20%
F1	1	0	0%
F2	129	27	20.93%
F3	570	178	31.23%
F4	1,098	298	27.14%
F5	3,269	919	28.11%
F6	1,302	334	25.65%
Misdemeanor	6	1	16.67%
<b>Total</b>	<b>10,481</b>	<b>3,123</b>	<b>23.57%</b>

Table 15 shows data for recidivism rates by offense level from SFY20-SFY23. Felony 4 decreased in recidivism from 2021 to 2023. Another category that stands out is Felony 1 in 2021. Out of the four years listed, 2021 is the only year that released two Felony 1 offenders. Within three years, one offender returned to IDOC, which means the recidivism rate for 2021 was 50%. Misdemeanors have the highest average recidivism rate at 41.7%. However, in 2021, four misdemeanor offenders were released and within three years they were committed back to IDOC, showing a 100% recidivism rate. If this outlier is removed from the equation, the average recidivism rate for misdemeanors is 22.2%. Lastly, 2021 shows the highest recidivism rate total at 38.2%. Overall, the data showed a relatively consistent recidivism rate.

10. IDOC. (2023, October 23). Annual reports. IDOC. [on.in.gov/hkjw6](https://www.in.gov/hkjw6)

11. IDOC. (2023, October 23). Annual reports. IDOC. [on.in.gov/hkjw6](https://www.in.gov/hkjw6)

**Table 15. Recidivism by Offense Level, SFY20-SFY23**

Offense Level	2020	2021	2022	2023
Murder	25%	11.9%	25%	21%
FA	26.3%	27.9%	26.3%	25.7%
FB	40.5%	43.7%	40.5%	37.3%
FC	36.6%	42%	36.6%	31.9%
FD	25.3%	27.7%	25.3%	17.2%
F1	0%	50%	0%	0%
F2	21.6%	22.4%	22%	20.9%
F3	37.3%	36.1%	37%	31.2%
F4	32.9%	36.6%	33%	27.1%
F5	31%	36.8%	31%	28.1%
F6	27.4%	31.9%	27.4%	25.7%
Misdemeanor	25%	100%	25%	16.7%
<b>Total</b>	<b>33.8%</b>	<b>38.2%</b>	<b>25.3%</b>	<b>23.6%</b>

## FACILITY CAPACITY

Male medium-security facilities operated at an average capacity of 93% from July 2022 to June 2023, a 3% increase from last year. Male maximum-security facilities operated just below full capacity, fluctuating between 96-98%. The monthly average capacity rate for maximum-security facilities increased from 96% in SFY22 to 97%. In December 2022, male minimum-security facilities jumped from 63% to 78%. In January 2023, reentry/work release displayed the same fluctuation patterns as minimum-security facility capacity. However, in April 2023, facility capacity decreased dramatically from 71% to 46% in May 2023. The following month the facility capacity increased to 75%.

**Figure 19. IDOC Adult Male Facility Operational Capacity by Month and Security Level, SFY23**

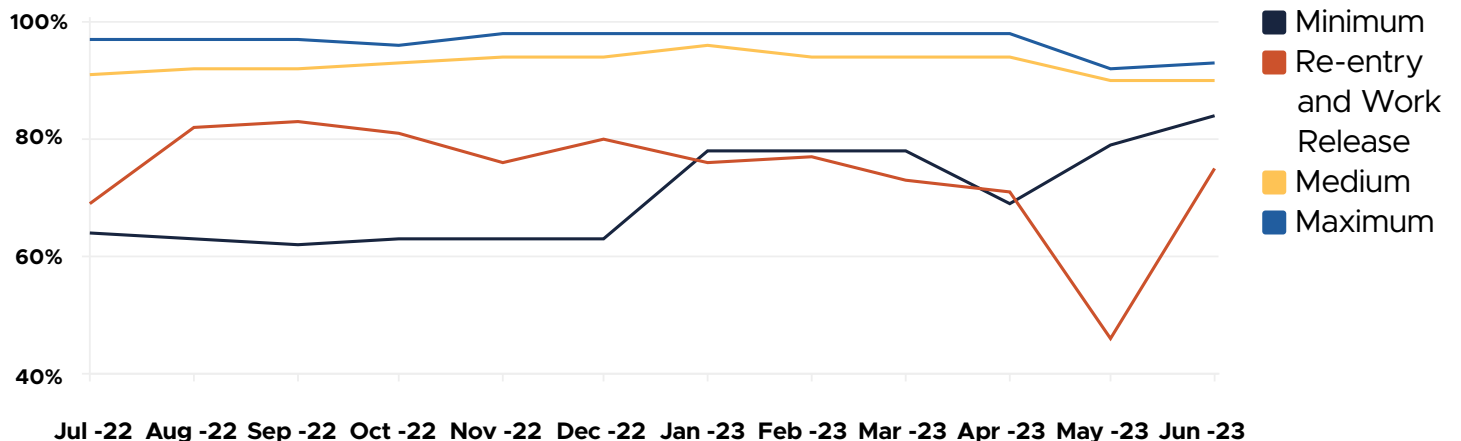


Figure 20 shows the operational capacity for adult female IDOC facilities by month from July 2022 to June 2023. The monthly average capacity rate for medium-security facilities is 80%, which is a 15% decrease from the previous year. Minimum-security and reentry facilities' operational capacity averaged 69% capacity per month. This figure shows a 9% increase from the previous year. Maximum-security facility capacity began trending upward from November 2022 to June 2023. However, from January 2023 to May 2023, facility capacity was at 91% for five continuous months. Minimum and reentry facility capacity reached its peak in March 2023 at 77%.

**Figure 20. IDOC Adult Female Facility Operational Capacity by Month and Security Level, SFY23**

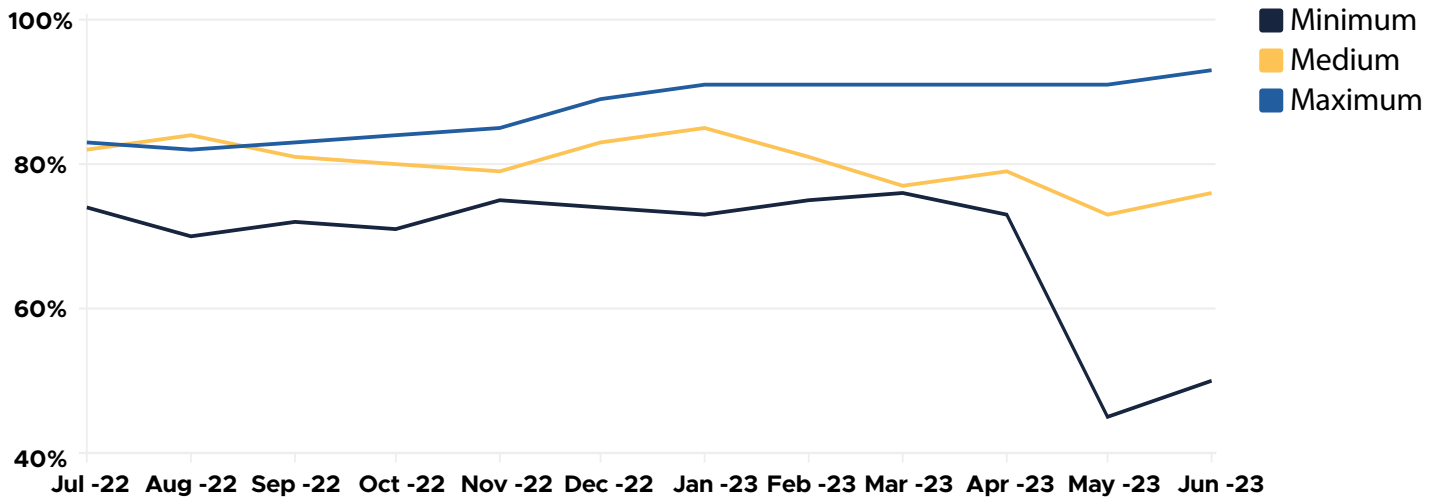


Figure 21 is a five-year analysis of the operational capacity in adult male facilities. Data for each year was collected using the monthly average operational capacity. Maximum-security, on average, has maintained the highest operational capacity rate at 97%, whereas reentry and work release has maintained the lowest rate of capacity at 70%. Maximum and medium security appear to be steady over the years, with minor fluctuations. For both categories, the percent change was between 1-3%. The most notable change was the decrease in capacity for minimum-security from SFY19 to SFY20. In SFY19, operational capacity was at 92% and dropped to 75%. Since then, minimum-security facilities have maintained an operational capacity below 75%.

**Figure 21. IDOC Adult Male Facility Operational Capacity, SFY19-SFY23**

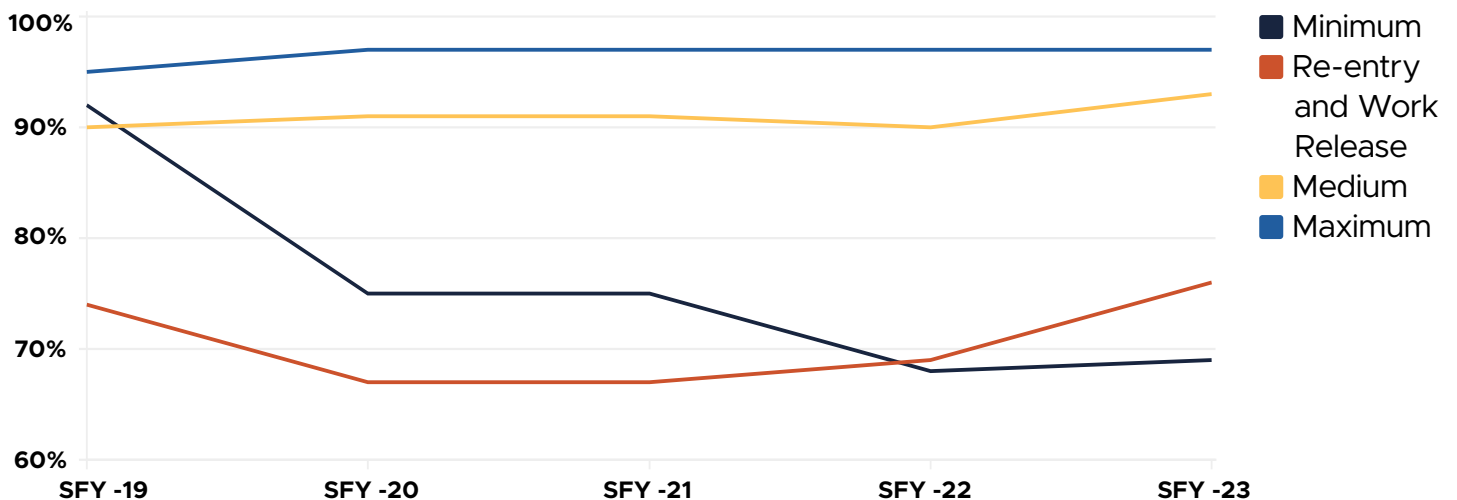
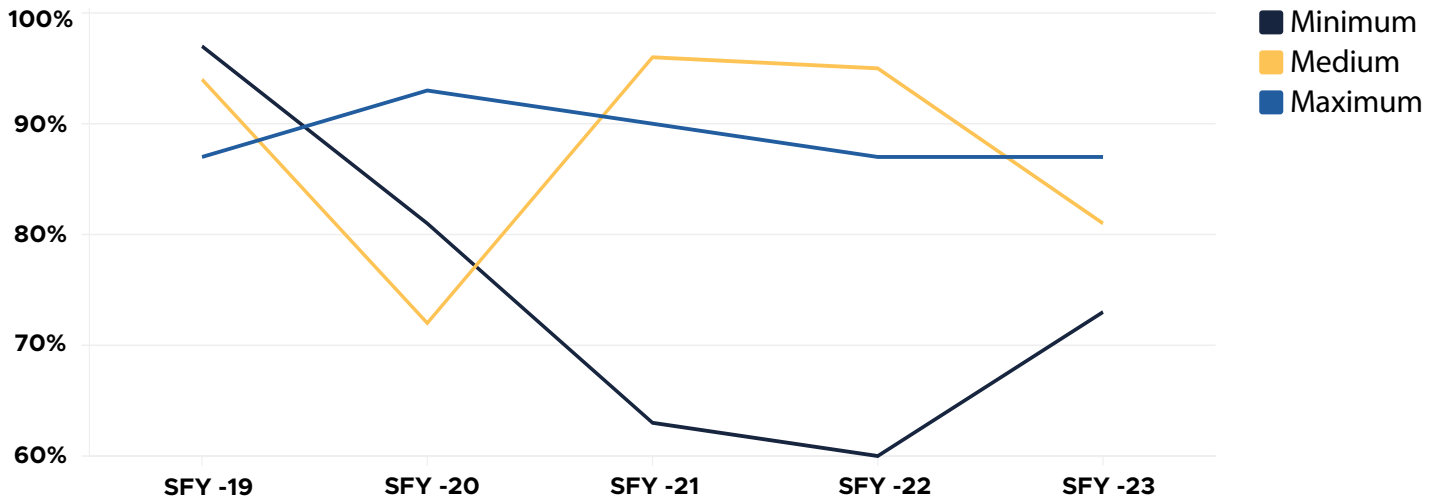


Figure 22 is a five-year analysis of the operational capacity in adult female facilities. Data for each year was collected using the monthly average operational capacity. Beginning in 2019, each facility operated between 87-97%. From SFY19 to SFY21, the minimum/reentry capacity rate decreased dramatically. The capacity rate went from 97% in SFY19 to 60% in SFY21. The medium-security capacity rate increased significantly from SFY20 to SFY21. In SFY20, the capacity rate was 72% and increased to 96% in SFY21.

**Figure 22. IDOC Adult Female Facility Operational Capacity, SFY19-SFY23**



## JUVENILE FACILITY CAPACITY

Operational capacity considers the following factors: the number of inmates that can safely be held at one time, the design of the institution, the number of staff, and programs offered.<sup>12</sup> Figure 23 shows the operational capacity for male and female juvenile detention facilities from July 2022 to June 2023.

There are two juvenile detention facilities in the state of Indiana that house males: North Central Juvenile Correctional Facility and Pendleton Juvenile Correctional Facility. These facilities have between 535-547<sup>13</sup> beds. Males are housed at a much higher rate than females. The data shows, on average, for every 1 female, 15 males are housed in a juvenile facility. On average, the operational capacity for males is 59%. This is a 13% increase compared to last year. In June 2023, operational capacity for males peaked at 78%. Operational capacity increased by 18% from April 2023 to June 2023, before slowly decreasing until February 2023, when capacity increased to 60%. May and June showed the highest capacity rates at 77% and 78%.

12. IDOC. (2023, July 5). Indiana Department of Corrections. IDOC. [www.in.gov/idoc](http://www.in.gov/idoc)

13. Division of Youth Services. (2023, July 12). Juvenile detention centers. [on.in.gov/a3v15](http://on.in.gov/a3v15)

There is one female juvenile detention facility in the state of Indiana, LaPorte Juvenile Correctional Facility. This facility can house between 62<sup>14</sup> offenders before reaching facility capacity. Figure 23 shows the capacity rate for females is much higher than for males. However, compared to male facilities, there are fewer beds, number of facilities, and accommodations because females are detained at a significantly lower rate than males. The average operational capacity per month is 71%. This is a 10% increase from last year. Beginning February 2023, the operational capacity continued to increase throughout April 2023, before decreasing into June 2023. In April of 2023, operational capacity reached its peak at 80%.

**Figure 23. Juvenile Detention Facility Operational Capacity by Month, SFY23**

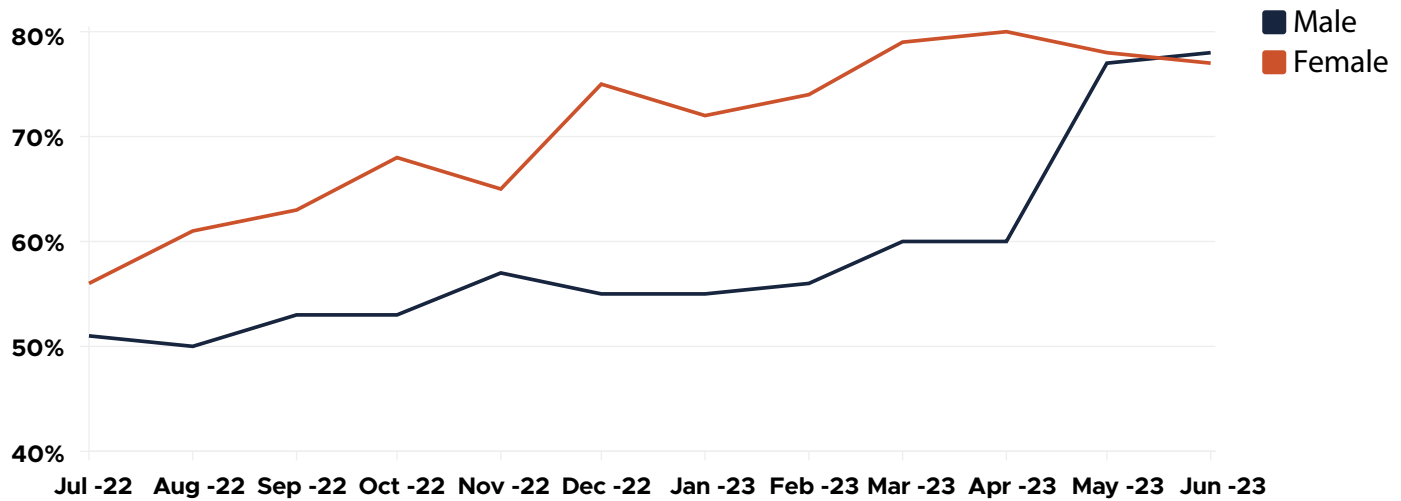
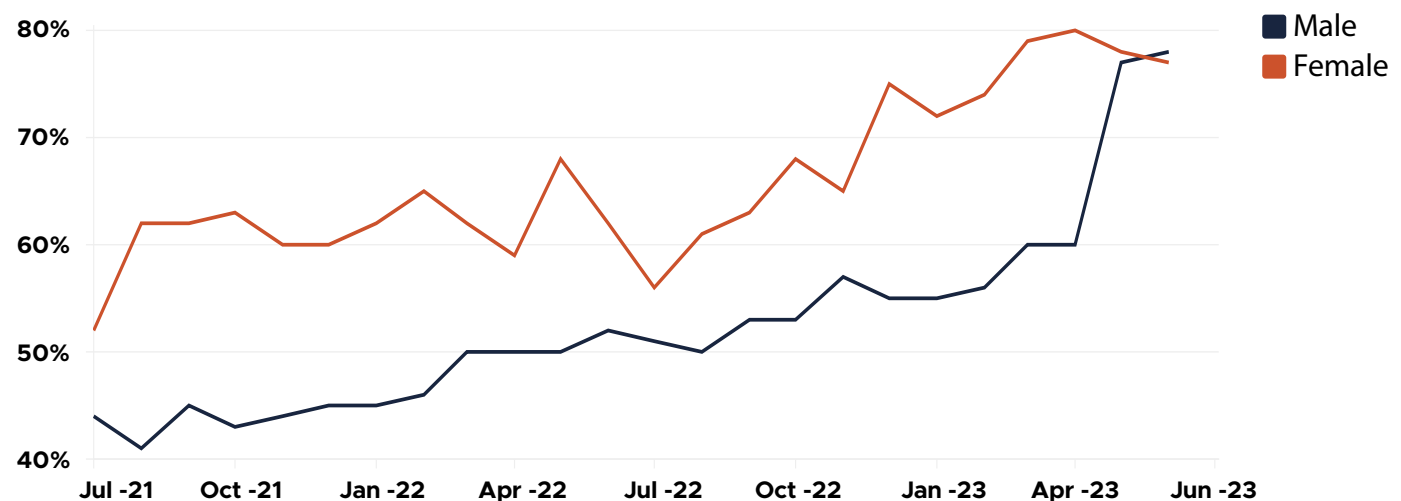


Figure 24 is a two-year analysis of facility capacity for juveniles. The two-year analysis shows data from SFY22 and SFY23. Beginning in July 2022, operational capacity trends upward before reaching its peak in April 2023. For females, there is a 12% decrease in capacity beginning in May 2022 until July 2022. For male facilities, data appears to trend upward beginning in February 2022. The lowest capacity rate for males is observed in August 2021 at 41%. The capacity rate for males reaches its peak at 78% in June 2023.

**Figure 24. Juvenile Detention Facility Operational Capacity, SFY22-23**



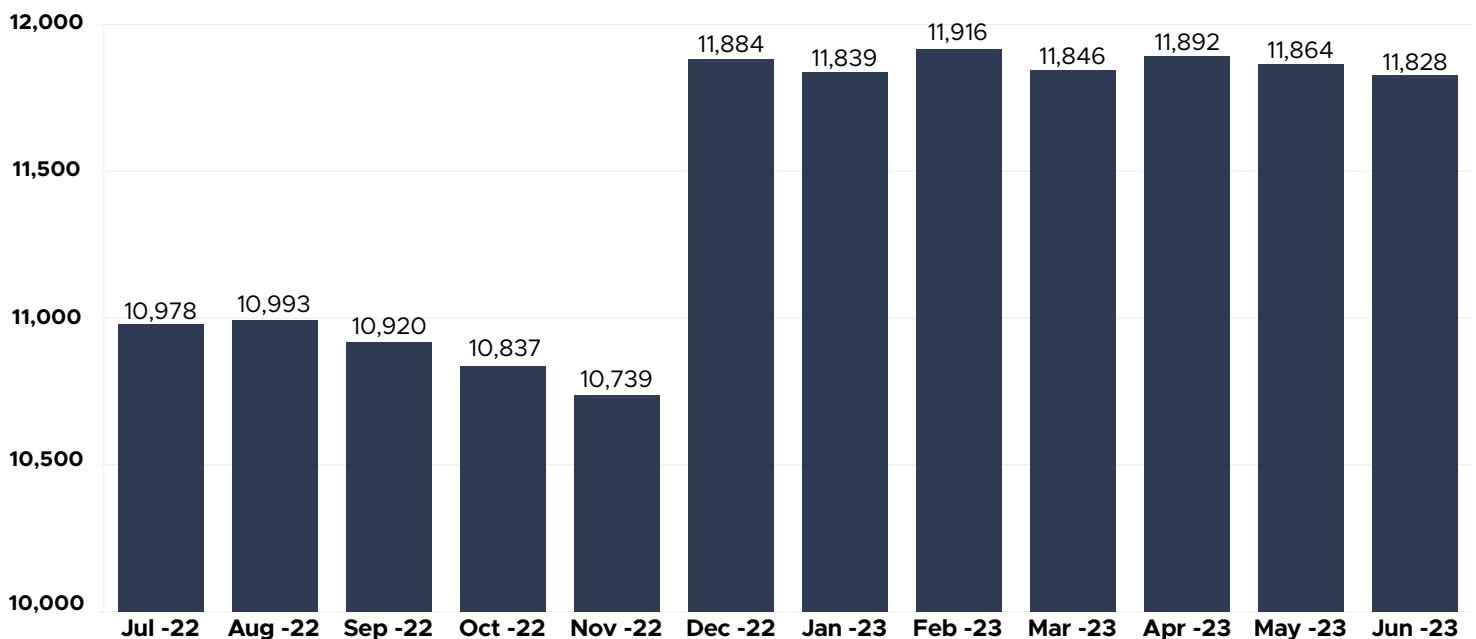
14. Division of Youth Services. (2023, July 12). Juvenile detention centers. [on.in.gov/a3v15](https://on.in.gov/a3v15)

## COMMUNITY CORRECTIONS

The Community Corrections Division is a unit under the IDOC that was established in 1979. The Community Corrections Division provides state aid through the Community Corrections and Justice Reinvestment Funding and administers the Community Transition Program. The division assists the IDOC by establishing and operating community corrections programs by partnering with state and local criminal justice agencies and Community Corrections Advisory Boards. Community Corrections programs are community-based programs that provide preventive services to divert offenders from IDOC and provide services to sentenced offenders and/or persons ordered to participate in community corrections as a condition of probation or as a direct placement per IC § 35-38-2. There are 77 community corrections agencies at the local level, serving all counties except for Benton, Franklin, and Newton. Each agency is governed by a local or regional Community Corrections Advisory Board which establishes and approves a Community Corrections Plan to prioritize the needs and services applicable to their communities.

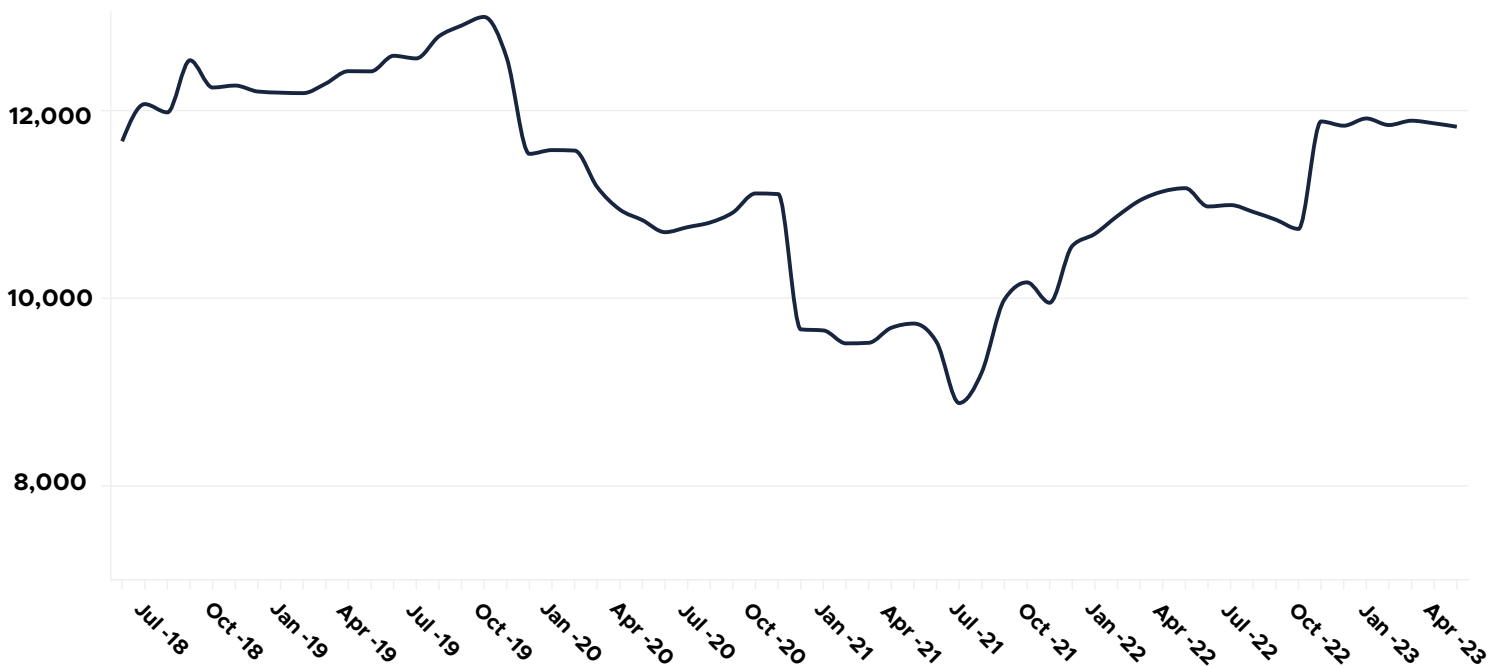
The community corrections population is composed of offenders with felony and misdemeanor convictions, in addition to individuals who are under pretrial supervision. Pretrial individuals have yet to be convicted or sentenced for the crime for which they are being supervised. Individuals are placed into a community corrections program as an alternative to incarceration, as a condition of a probation sentence, as a condition of parole, through the Community Transition Program (CTP), or through IDOC's work release program. Levels of supervision provided by community corrections programs vary by county and may include community service, day reporting, electronic monitoring, forensic diversion, problem-solving courts, and work release. Figure 25 illustrates the monthly number of self-reported felony offenders in community corrections for all levels of supervision. As of January 2023, all pretrial participants have been transferred from Marion County Probation to Marion County Community Corrections for supervision, resulting in a significant increase in the population. Much of the population increase is reflected in the Dec-22 numbers in the figures below. Due to this, it is difficult to provide an analysis for the year. However, prior to transfers in Marion County, the felony offender population in community corrections was decreasing slightly. From December 2022 through June 2023, the population changed little.

**Figure 25. Community Corrections Monthly Felony Offender Population, SFY23**



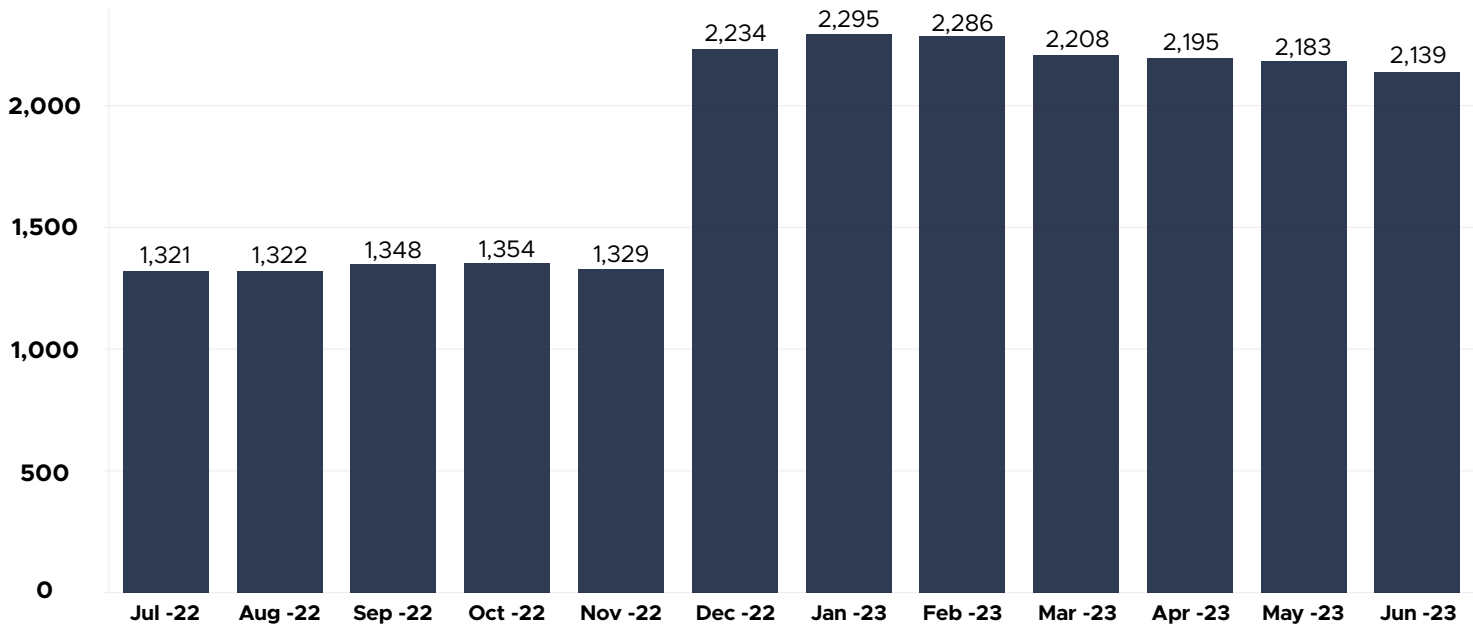
The community corrections felony offender population has fluctuated over the past five years but started SFY19 with 11,673 offenders and ended SFY23 with 11,828 offenders. SFY19 saw the highest overall number of felony offenders and averaged 12,207 for the year, compared to 11,461 for SFY23. The highest number of offenders (12,998) was recorded in November 2019. Many of the noticeable changes in the population can be attributed to COVID-19 and Marion County. During March 2020, as COVID-19 began affecting the criminal justice system, the community corrections felony population began to decrease throughout the year. Then, in January 2021, Marion County Community Corrections transferred approximately 2,000 individuals to Marion County Probation, which resulted in the most dramatic decrease of the five-year period. The lowest number of offenders was recorded in August 2021 with 8,883 individuals. As of January 2023, Marion County pretrial participants were transferred back to Marion County Community Corrections, accounting for a large increase in the total population.

**Figure 26. Community Corrections Monthly Felony Offender Population, SFY19-23**



Once again, an analysis of the entire year is not feasible due to the large increase of pretrial participants from Marion County. From July 2022 to November 2022, the pretrial population remained consistent with very few changes over the months. The pretrial population in community corrections fluctuated slightly from December 2022 through June 2023.

**Figure 27. Community Corrections Monthly Pretrial Population, SFY23**



The pretrial population under community corrections supervision varied throughout the past five years and saw an overall 34.4% decrease in participants from July 2018 to June 2023. The pretrial population began to steadily decrease in the months leading up to COVID-19. From November 2019 to February 2020, there was a 17% decrease in the number of participants. Throughout COVID-19 the number of individuals on pretrial supervision steadily increased from March 2020 through December 2020, peaking at 3,554 participants.

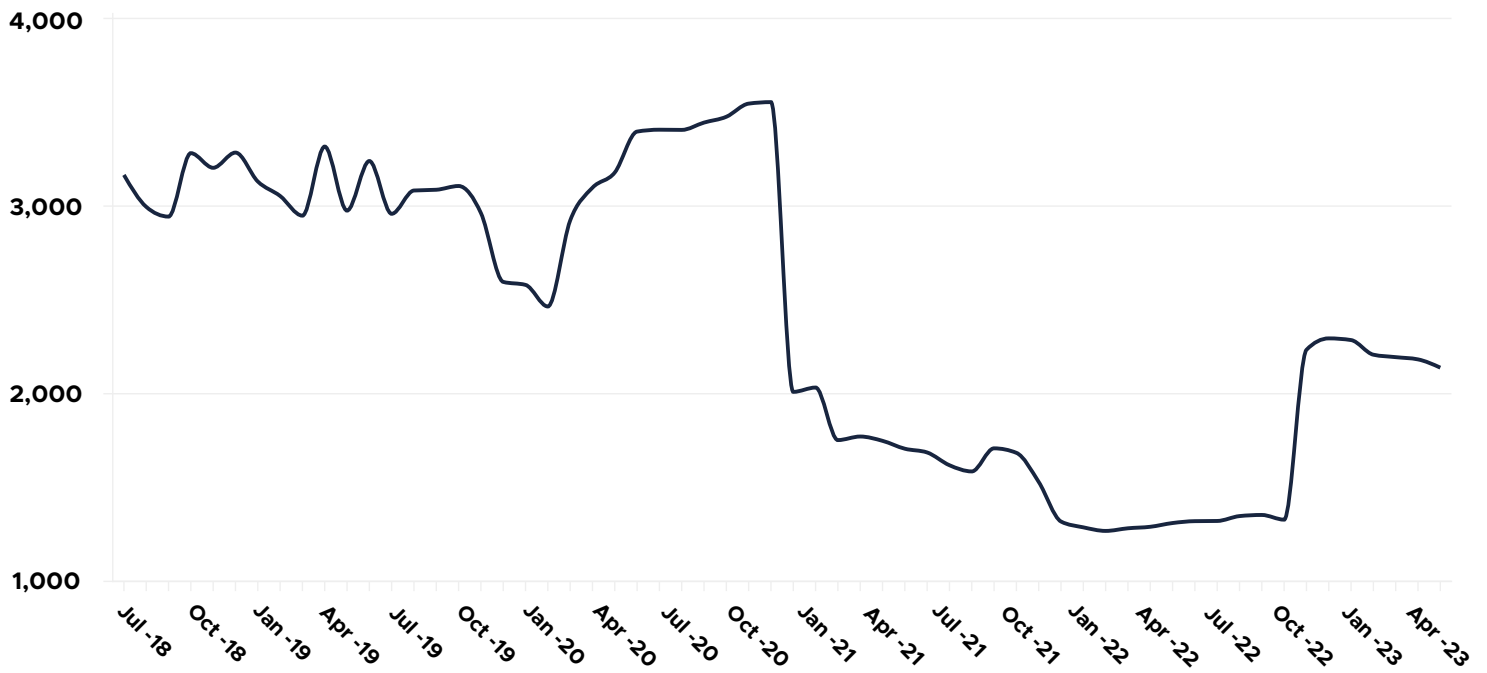
This could be due in part to the passage of Indiana Criminal Rule 26<sup>15</sup>, which went into effect on January 1, 2020. The rule was intended to improve pretrial practices in the state by encouraging trial court judges to use the results of an evidence-based risk assessment, or other relevant information, to determine if an individual presented as a flight risk, a danger to themselves, or a danger to the public. If individuals met the established criteria, they could be granted pretrial release, which in some cases included supervision by community corrections programs. The increase in participants could also be due to COVID-19 and the desire to keep the jail populations low to avoid spreading the virus.

By January 2021, Marion County Community Corrections transferred their pretrial clients to Marion County Probation, which accounts for the noticeable decrease in the population. In the following months, the pretrial population in community corrections mostly decreased, seeing a 34% decrease from January 2021 to November 2022. By January 2023, Marion County Probation transferred the pretrial population back to Marion County Community Corrections, as noted in the December 2022 numbers. Since January 2023, the pretrial population has been declining.

<sup>15</sup> [on.in.gov/gzvuz](https://on.in.gov/gzvuz)



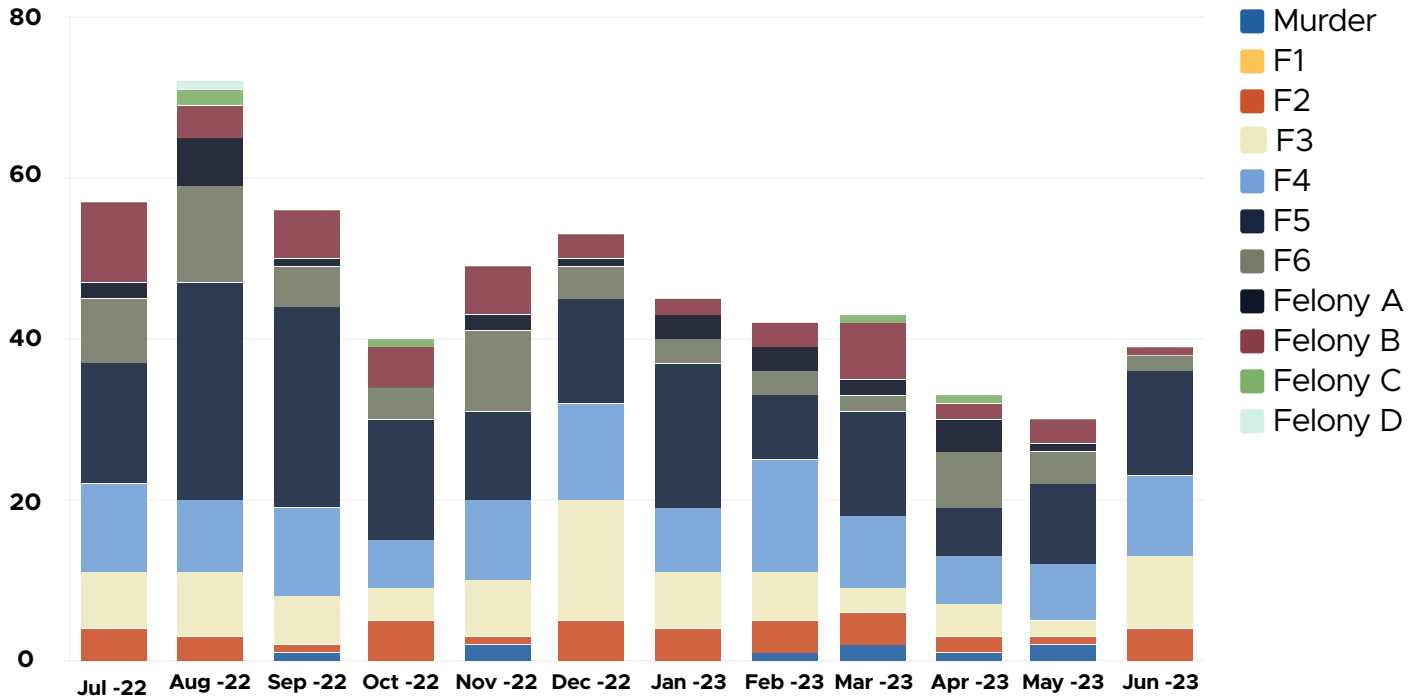
**Figure 28. Community Corrections Monthly Pretrial Population, SFY19-23**



The IDOC Community Corrections Division administers the Community Transition Program (CTP). CTP allows offenders committed to the IDOC, and nearing the end of their prison sentence, to serve their remaining time through their county's community corrections program, probation, or a court program. This allows offenders to transition back into the community while receiving case management services and links to available resources to assist with their return. Levels of supervision are determined by the county programs but generally include work release or home detention/electronic monitoring. Eligibility for CTP is determined by statute, and whether an offender is released to CTP is determined by the sentencing court. The length of supervision ranges from 60 to 180 days and is based on the most serious offense the individual was convicted of. Once the offender completes CTP, they will be released to parole or probation, or be discharged based on the terms of the original sentence.

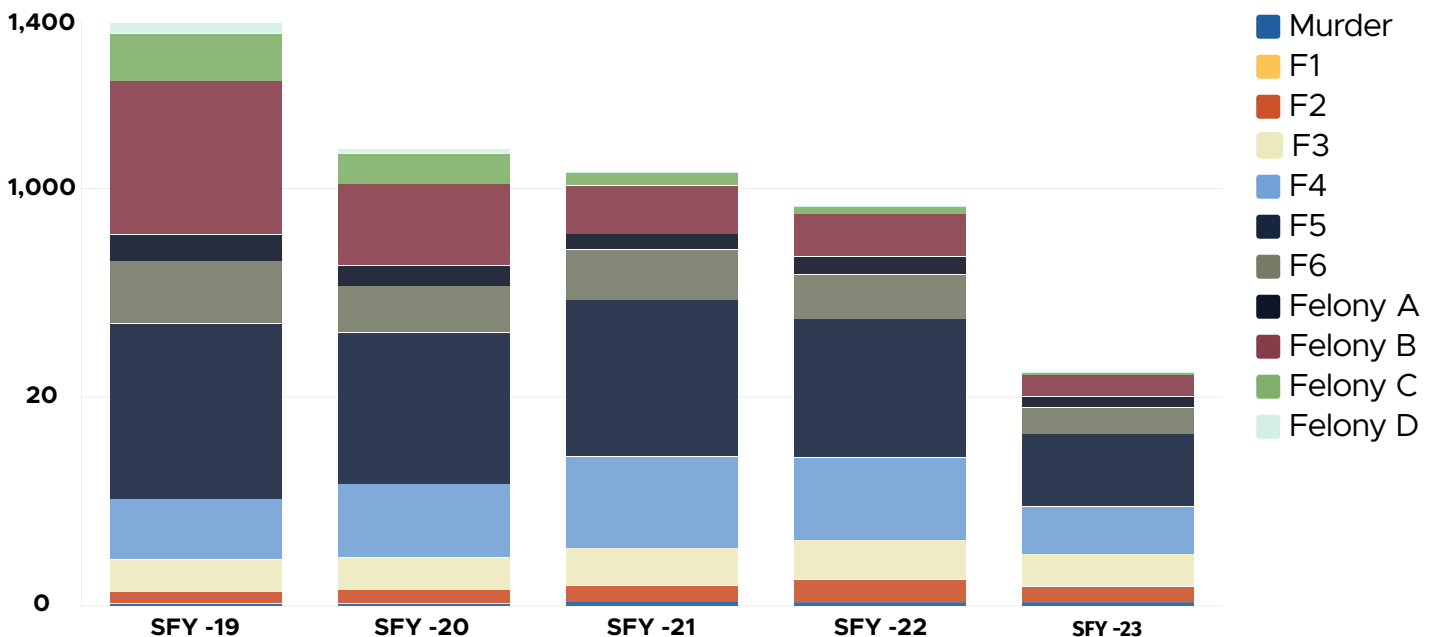
Figure 29 shows CTP utilization by offense level from July 2022 to June 2023. The top three offense levels that utilize CTP were Level 5, 4, and 3 felonies. From highest to lowest, Felony 5 offenders made up 31% of the total CTP utilizations, Felony 4 offenders comprised 20%, and Felony 3 offenders made up 14% of the total. The two offense levels with the lowest CTP utilization were Felony D offenders (1 out of 559), and those convicted of murder (9 out of 559). No one with a Felony 1 utilized CTP during the timeframe of this report.

**Figure 29. CTP Utilization by Offense Level, SFY23**



CTP utilization has been decreasing over the past five years. The yearly average number of CTP participants decreased by 60% from SFY19 to SFY23. From SFY22 to SFY23, CTP utilization was down 42%, the largest year-to-year decline. Over the five-year period, Felony 5 offenders accounted for the highest percent of utilization at 33%. Felony 4 made up the second highest number of offenders at 16.8% followed closely by Class B Felony at 16.5%. Only one Felony 1 offender utilized CTP during the five-year period.

**Figure 30. CTP Utilization by Offense Level, SFY19-SFY23**



Community Corrections uses many methods to supervise offenders. Figure 31 shows the average percentage of participants enrolled in each supervision type for SFY23. Electronic monitoring is the most common form of supervision (54%). 21% of all participants are involved in community service supervision, 12% are in work release, and 11% are supervised through day reporting.

**Figure 31. Community Correction by Supervision Type, SFY23**

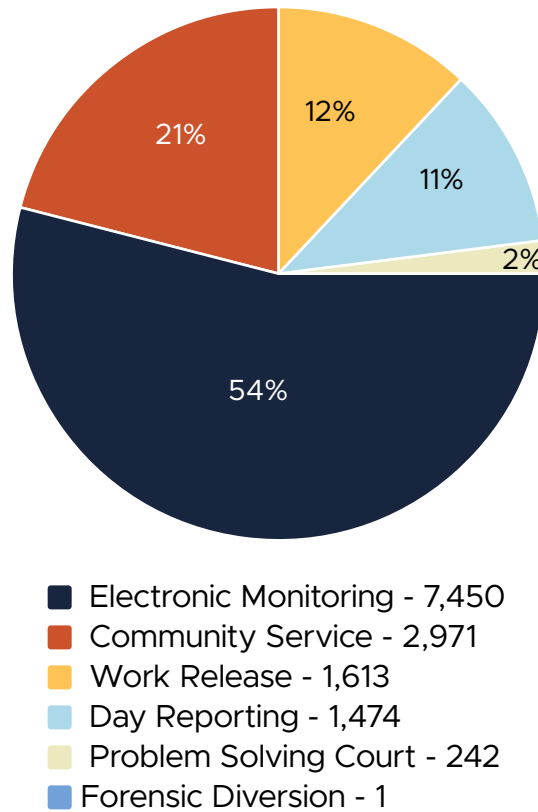
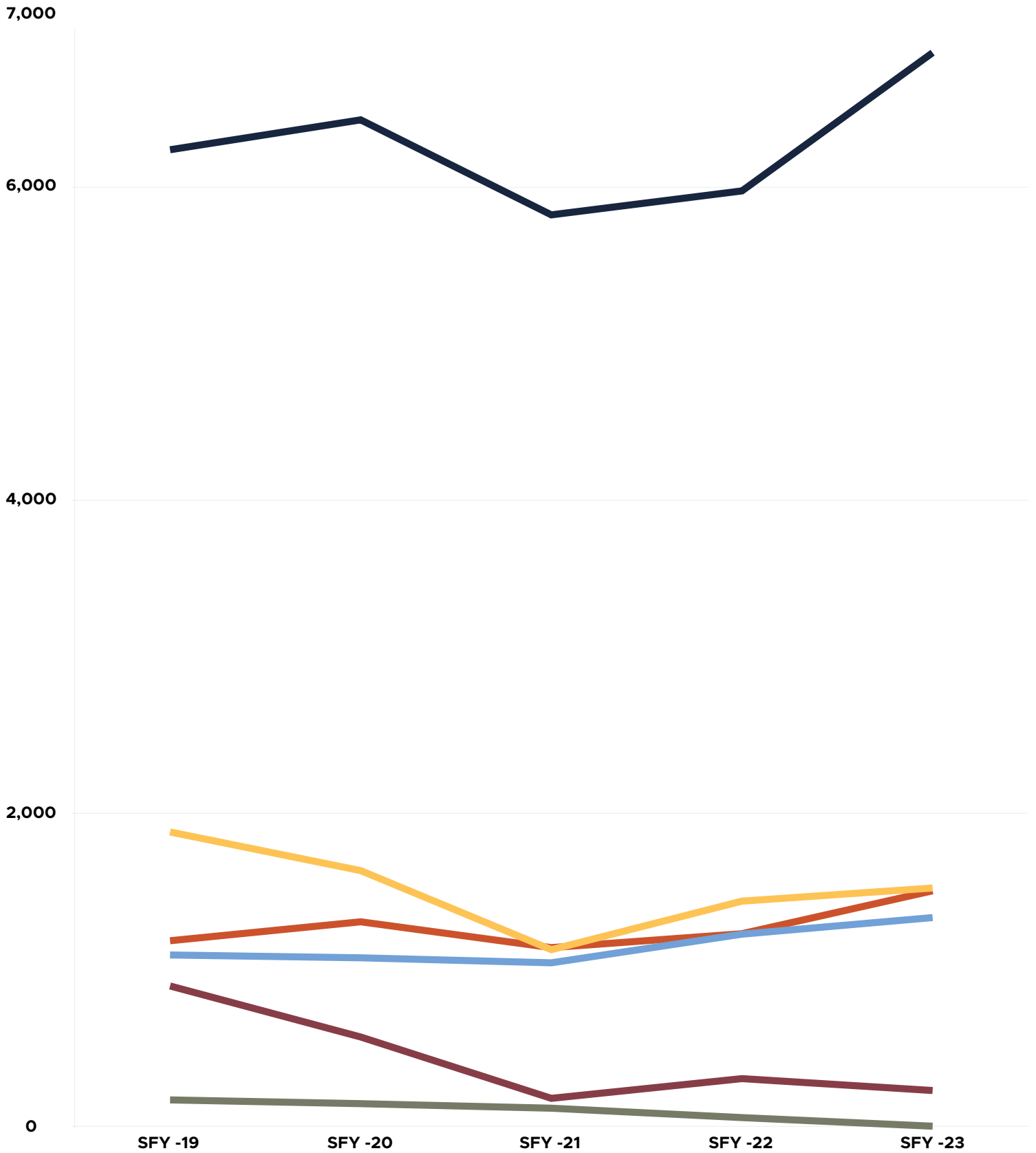


Figure 32 shows that the makeup of the types of supervisions has remained consistent over the previous five years. The use of electronic monitoring saw the highest growth, increasing by 10% from SFY19 to SFY23. SFY21 saw decreases in levels of supervision due to COVID-19 and the shifting of clients between Marion County Community Corrections and Marion County Probation. Problem-solving courts also saw a decline in numbers due to the way data is collected. Beginning in January 2020, most problem-solving courts previously funded under community corrections were funded separately and are no longer included in the community corrections monthly snapshot. Excluding problem-solving courts, work release participants saw the largest decrease at 19% during the five years.

**Figure 32. Community Correction Supervision Type yearly average, SFY19- SFY23**



- Electronic Monitoring
- Community Service
- Work Release
- Day Reporting
- Problem Solving Court
- Forensic Diversion

# JAIL DATA

Jails in Indiana use several different jail management systems. A centralized statewide system to collect jail data is in process, but not yet complete; thus, it is not possible to extract real-time data from jails for this report.<sup>16</sup> To analyze jail capacity and inmate populations, it is necessary to use other means of data collection.

To gauge the capacity of county jails and the effect HEA 1006 has had on the jail population, the ICJI received a summary of data from jail inspection reports conducted during 2022. There are 91 jails; Ohio County does not have a jail and will send offenders to other counties for housing. The IDOC County Jail Operations Division conducts annual jail inspections for each jail. The inspection includes the number of operational beds, the inmate population count on the day of the inspection, the number of inmates being held for and/or transferred to IDOC, the number of inmates being held for the federal government, demographic information, adequate staffing levels, and services provided such as GED and substance use counseling.

From the summary data, the ICJI was able to determine the rate of capacity for each jail. It should be noted that jail inspection reports capture the number of incarcerated individuals on the day of the inspection only; it does not give an average daily population or a range. The number of people admitted to jail and the length of stay may cause the jail population to fluctuate from being over capacity to under capacity multiple times throughout the year.

Jails are labeled as overcrowded or near capacity if they exceed 80% of their available bed capacity. In the Sheriff's Guide to Effective Jail Operations, The National Institute of Corrections defines crowding as "when the jail population consistently exceeds design, or rated, capacity. However, symptoms of crowding may be apparent much earlier once the jail reaches approximately 80% of rated capacity. At that level, properly housing and managing the diverse jail population begins to become much more difficult because compromises in the jail's classification system occur. Compromising the jail's classification capabilities is likely to lead to increases in violence, tension, and the availability of contraband... these conditions increase the jail's liability exposure and jeopardize the safety and well-being of both inmates and staff."<sup>17</sup>

The IDOC County Jail Operations Division recommends that a jail should not exceed 80% of its available bed capacity to effectively allow for changes in inmate demographics and characteristics. Jails that exceed 80% of rated capacity could face liability issues and may be classified as non-compliant with Indiana jail standards. Jails that exceed 100% of their available bed capacity are considered over operational capacity.

Table 16 provides a summary profile of county jails for 2018 - 2022 based on data from the jail inspection reports. The total state jail population for 2022 was 19,173 for an equivalent of a 77% capacity rate. This is roughly an 18% increase over the 2021 state jail population, but a 5% decrease from 2018. The 2022 jail inspection reports show that several jails were either near capacity or over capacity. A total of 38 jails exceeded 80% of capacity on the day of jail inspection, with 14 being over 100% capacity. The capacity rate ranged from a low of 14% to a high of 147%. The number of jails at or nearing capacity peaked in 2019 and has since declined. This is largely due to many counties renovating jails to add more bed space. Since 2018, the number of operational beds throughout the state has increased by more than 3,000, or 14%.

The jail inspection report also identifies the number of F6 offenders. In 2022, Statewide, F6 offenders made up 11% of the total jail population. This is consistent with previous years, ranging from 9% to 12%. However, 2022 saw the highest number of F6 inmates.

<sup>16</sup>. IDOC has contracted Moser Consulting, Inc. to develop a new statewide victim notification system, which will allow for real-time jail population data to be extracted via various interfaces.

<sup>17</sup>. Martin, M., & Katsampes, P. (2007, January). *Sheriff's guide to effective jail operations* (NIC Accession Number 021925), p.23. Washington, DC: U.S. Department of Justice, National Institute of Corrections. Retrieved from [on.in.gov/qwm3c](https://on.in.gov/qwm3c)

**Table 16. Summary Profile of County Jails based on Jail Inspection Reports**

Capacity	2018		2019		2020		2021		2022	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Near Capacity (80%-99.9%)	31	34%	27	29%	20	22%	21	22%	24	26%
Over 100% Capacity	32	35%	37	40%	14	16%	13	14%	14	15%
Total over 80% Capacity	63	68%	64	70%	34	37%	34	37%	38	42%
Total Inmate Population and Capacity Rate	20,101	92%	20,098	92%	16,153	71%	16,294	71%	19,173	77%

	2018		2019		2020		2021		2022	
	Low	High	Low	High	Low	High	Low	High	Low	High
Capacity Rate Lowest to Highest	37%	197%	30%	160%	17%	125%	17%	125%	14%	147%

	2018		2019		2020		2021		2022	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total F6 Population and Percent of Total Jail Population	1,848	9%	N/A	N/A	1,677	10%	1,998	12%	2,091	11%

While the jail inspection report provides useful data to help identify the number of inmates and jail capacity, it shows only a snapshot of one day. Other available data regarding the jail population should be analyzed as well to get a more complete picture of the jail population. IDOC tracks the number of individuals held in county jails that are sentenced offenders waiting to transfer to IDOC. These individuals are identified as Jail DOC Contract in the following table. IDOC also tracks the number of Level 6 offenders who are serving their time in the county jail. These are referred to as Jail Felony Level 6 Diversions.

Data from the IDOC shows that the total Jail DOC Contract and Jail Felony Level 6 Diversions population has mostly decreased throughout the year, with a 15% decrease from July 2022 to June 2023. However, when looked at monthly, Jail DOC Contract and Level 6 Diversions' populations fluctuated throughout the year. Jail DOC Contract and Jail Felony Level 6 Diversions were at their lowest in March 2023 with 2,069 offenders and peaked in July 2022 with 2,884 offenders. Since March 2023, the population has been gradually increasing. Without data on the other jail inmate populations, it is difficult to determine if the overall jail population will continue to rise. It is also not yet known how the legislation allowing F6s to serve time in IDOC, instead of jail, will affect the overall jail population.

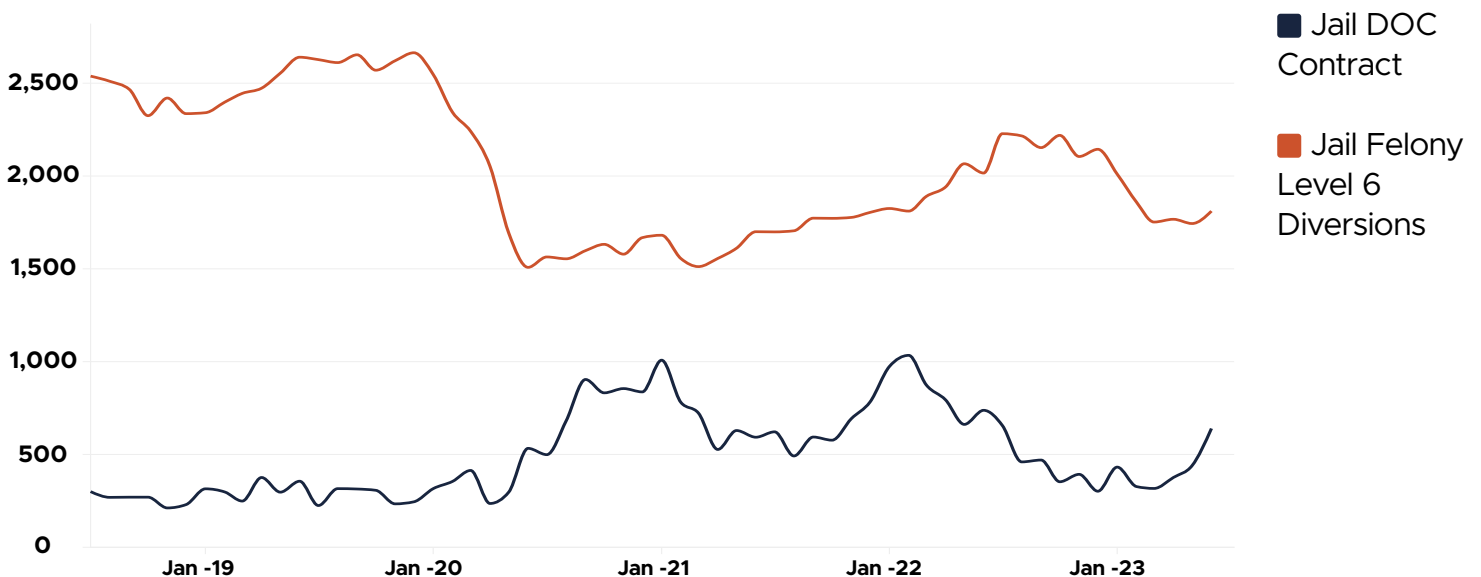
**Table 17. Jail DOC Contract and Level 6 Felony Diversions Population, SFY23**

Snapshot Date	Jail DOC Contract	Jail Felony Level 6 Diversions	Totals
7/1/2022	656	2,228	2,884
8/1/2022	460	2,216	2,676
9/1/2022	470	2,153	2,623
10/1/2022	353	2,219	2,572
11/1/2022	393	2,105	2,498
12/1/2022	302	2,144	2,446
1/1/2023	432	2,010	2,442
2/1/2023	327	1,859	2,186
3/1/2023	317	1,752	2,069
4/1/2023	376	1,767	2,143
5/1/2023	440	1,744	2,184
6/1/2023	640	1,811	2,451

When looking at the Jail DOC Contract and Jail Felony Level 6 Diversion population over a five-year period, some trends begin to emerge. The Jail Felony Level 6 Diversions were at the highest levels in 2018 -2019, with the highest number reported in December 2019. Then, likely due to COVID-19, the Jail Felony Level 6 Diversions decreased to the lowest level in June 2020. Throughout 2020 and 2022, the inmate populations fluctuated, peaking in July 2022. Populations are still below pre-COVID levels.

The Jail DOC Contract inmate population stayed below 400 from July 2018 through February 2020. With the onset of COVID-19, the number of inmates waiting for transfer to IDOC grew. This could be because prisons were being more restrictive with admissions at that time. February 2022 saw the highest number of IDOC Contracts being held in the jails. Since then, the population has gone up and down.

**Figure 33. Jail Population, SFY18-SFY23**



# JUSTICE REINVESTMENT ADVISORY COUNCIL (JRAC)

The Indiana General Assembly established the Justice Reinvestment Advisory Council (JRAC) during the 2015 legislative session. The JRAC organizational model consists of twenty statutory members and a chairperson designated by the chief justice. The council consists of leadership from both the executive and judicial branches of state and local government. The purpose of JRAC is to conduct a state-level review and evaluation of (1) local corrections programs, including community corrections, county jails, and probation services, and (2) the processes used by the Department of Correction and the Division of Mental Health and Addiction (DMHA) in awarding grants. The goal of JRAC is to develop incarceration alternatives and recidivism reduction programs at the county and community levels. This is done by promoting the development of probation services; problem-solving courts; mental health treatment; substance abuse treatment; community corrections; evidence-based recidivism reduction programs for currently incarcerated persons; and programs providing for court supervision, probation, or pretrial diversion.

## JRAC UPDATE

The Justice Reinvestment Advisory Council met seven times between December 2022 and November 2023. Meeting highlights included a presentation on the National Alliance on Mental Illness Indiana's no-cost training on the Sequential Intercept Model, a review of Indiana's Evidence-Based Decision Making Initiative (EBDM) and Indiana's 2019 EBDM Strategic Plan, review of IDOC community supervision grant awards, approval of local JRAC technical assistance applications, discussions on the new HEA 1006-2023 emergency detention process, a presentation on the University of Cincinnati's re-validation study on the Indiana Risk Assessment System and the Indiana Youth Assessment System, and information on the Supreme Court's Summit for Rural Justice and Public Health Professionals. JRAC voted to revisit the 2019 EBDM State Team Strategic Plan to bring this work back to the forefront. The Center for Effective Public Policy (CEPP) will work with JRAC to educate members on the EBDM framework and update Indiana's EBDM strategic plan. JRAC plans to schedule longer meetings with structured conversations once the EBDM plan is in place.



Learn more about JRAC at [www.in.gov/justice/](http://www.in.gov/justice/)





## RACIAL EQUITY WORKGROUP

The JRAC Racial Equity Workgroup, chaired by Indiana Public Defender Council Executive Director Bernice Corley and Indiana Sheriffs' Association Executive Director Steve Luce, continued work on a research project with Dr. Evan Lowder of George Mason University to study racial equity in criminal justice decision-making. The project includes two studies. Study 1 will provide a baseline understanding of racial disparities across various stages of criminal justice processing by identifying a list of racial equity metrics and reporting on these metrics by race across four local jurisdictions (Dearborn/Ohio, Marion, Porter, Vigo). The workgroup selected the counties for the pilot based on participation in statewide data systems (e.g., Odyssey, Indiana State Police NIBRS reporting), racial composition in the residential population, and a balance of both urban, suburban, and rural representation. Dr. Lowder conducted a test run for data collection in July and continues to work with the project counties.

Study 2 is a prospective study of the drivers of racial disparities in the criminal justice system. The research team developed and validated a 12-item "Relative Disadvantage Tool" measuring four domains: Early Family Relationships, Early Criminal Justice System Exposure, Systemic Barriers, and Well-Being and worked with three local jails (Marion, Porter, and Vigo) to develop site-specific plans for prospective data collection. The research team will track outcomes for individuals over a multi-year period using administrative data by following a cohort of individuals from the time of jail admission through case processing, sentencing, and corrections.

## LOCAL JRAC WORKGROUP

The Local JRAC Workgroup, chaired by Justice Christopher Goff, developed the second Local JRAC annual report with a focus on Local JRAC functioning to inform the need for technical assistance. Based on Local JRACs' report responses, the Workgroup partnered with CEPP to provide opportunities for intensive technical assistance, online workspace access with limited technical assistance, and limited on-demand technical assistance on a specific topic. The Workgroup invited all Local JRACs to submit applications for technical assistance and received nine applications; JRAC approved all nine counties for technical assistance (Daviess, Dearborn, Henry, Jasper, Jennings, Lake, Owen, Tippecanoe, and Wayne). The counties will work with representatives from CEPP to develop plans to move forward with the assistance. JRAC will provide technical assistance to additional counties upon request and as resources permit.

## JRAC REPORTS WORKGROUP

The JRAC Reports Workgroup, also chaired by Justice Goff, created a sub-committee to work on quarterly electronic monitoring reporting requirements as required under SEA 9-2022. The sub-committee developed data elements for the report and the content of the quarterly reporting form. Community supervision agencies submitted the Q1 and Q2 reports to their Local JRACs, and the Local JRACs submitted the reports to the State JRAC in late May and late August, respectively. The review and receipt of Q3 reports are currently in process. The sub-committee continues to work with the Indiana Office of Court Services and the Indiana Office of Court Technology on the reporting instructions and questions from agencies. Based on this work, the sub-committee updated the supervising agency instructions to incorporate clarifications and tips for compiling the reports. JRAC discussed the need to study electronic monitoring as a supervision strategy alongside other evidence-based practices and noted that the recent legislation did not include funding for a study.

## INDIANA DEPARTMENT OF CORRECTION COMMUNITY CORRECTIONS GRANTS & JUSTICE REINVESTMENT GRANTS

The JRAC continued its oversight of the IDOC community supervision grant awards and the DMHA Recovery Works program.

IDOC awarded \$72.5M in community supervision grants for CY24. Funding was awarded to 78 community corrections agencies (\$58.6M), 51 problem-solving courts/court recidivism reduction programs (\$6M), 33 probation departments (\$3.6M), 16 pretrial services programs (\$2.1M), 20 jail treatment programs (\$1.7M), and 6 prosecutor's diversion programs (\$495K). The grant awards cover 204 programs.

**Table 18. Community Corrections & Justice Reinvestment Grants**

CY2024 Funding Request Summary				
Group	Entity	CY2023 Award	CY2024 Request	CY2024 Reccommendations
Community Corrections	Residential/Work Release	\$23.9M	\$27.1M	\$23.4M
	Community Supervision	\$35.5M	\$42.2M	\$35.2M
Justice Reinvestment Entities	Probation	\$3.7M	\$4.6M	\$3.6M
	Pretrial Services	\$2.4M	\$3.0M	\$2.1M
	Jail Treatment	\$2.0M	\$2.5M	\$1.7M
	Prosecutor's Diversion	\$580K	\$649K	\$495K
Court Programs	Court Recidivism Reduction Programs	\$6.3M	\$7.6M	\$6.1M
<b>Total</b>		<b>\$74.4M</b>	<b>\$87.4M</b>	<b>\$72.5M</b>

# MENTAL HEALTH AND SUBSTANCE USE PROGRAMS

This section of the report highlights some of the mental health and substance use programs that are currently ongoing or have recently been completed, as well as projects that are being planned for individuals within jails and prisons and individuals at risk of becoming involved in the criminal justice system.

The Recovery Works subsection highlights mental health and substance use programs and contracts funded through the Division of Mental Health and Addiction for incarcerated individuals. The subsection on jails provides information from the jail inspection reports on the number of jails with substance use services, as well as an update on one of the jail pilot programs that has been recently completed. The prison subsection discusses some substance use demographics in the IDOC population, as well as some programs offered in Indiana prisons. Finally, the remainder of this section provides an overview of various mental health and substance use services offered throughout the state for those at risk of becoming involved in the justice system due to mental health or substance use crises.

Overall, positive steps are being taken in Indiana to improve substance use and mental health infrastructure. These steps include continued additions of programs in correctional facilities, new legislation and budgeting allocations towards mental health services, and long-term improvement plans for the 988 Crisis Hotline.

## RECOVERY WORKS

The Indiana Family and Social Services Administration's (FSSA) Division of Mental Health and Addiction (DMHA) Recovery Works program provides vouchers to DMHA-certified mental health and addiction treatment providers in the community to treat criminal justice-involved individuals without insurance or Medicaid to reduce recidivism and encourage recovery. To qualify for the program, participants must not have used previous Recovery Works services, be active in the criminal justice system with a current or prior felony conviction, be at least 18 years old, be a resident of Indiana, and have a total household income that does not exceed 200% of the federal income poverty line.

Two Misdemeanor Pilot Programs running through Recovery Works that were introduced in December 2020. Pilot Program 1, which ended in early 2023, had 25+ treatment and recovery-providing agencies in 38 counties throughout the state. Under this program, qualified participants had access to \$1,500 for community-based treatment at qualifying approved facilities and \$2,500 for recovery-based housing for designated Misdemeanor Pilot Program agencies.<sup>18</sup> Feedback from Recovery Works on this program is currently pending. Pilot Program 2, which is still ongoing, assists misdemeanor participants with completing eight-hour (one course) or sixteen-hour (two courses) educational courses.

<sup>18</sup>. Family and Social Services Administration (FSSA). (2021). *Recovery Works misdemeanor pilot program. Recovery Works*. Retrieved from [on.in.gov/t48rr](https://on.in.gov/t48rr)

In SFY23, 4,300 new participants were enrolled in Recovery Works, bringing the total number of participants since the program began to 71,139. DMHA reported \$24,753,161 in Recovery Works expenditures in the past fiscal year.<sup>19</sup> Recovery Works has also expanded its recovery-related services and peer support infrastructure with contracts totaling over \$10 million through the following programs and organizations highlighted in Table 19<sup>20</sup>:

**Table 19. Recovery Works Service Contracts**

<b>Program/Organization</b>	<b>Contract Amount</b>	<b>Program Description</b>
Unite Indy	\$407,574	Provides transportation services and second chance employment for justice-involved individuals.
Integrated Reentry and Correctional Support (IRACS)	\$5.2M	Program provides sustainable peer-driven, Sequential Intercept Model (SIM) interventions and supports for incarcerated individuals, whose justice involvement is being impacted by substance use disorder (SUD) and/or mental health.
We Bloom/Recovery Café	\$3M	<ul style="list-style-type: none"> <li>Provides the necessary infrastructure support to assist in linking participants to mental health and addiction support in “desert areas” where traditional provider services are not readily available, while also administering member assistance funding to support participants who are in recovery.</li> <li>The overall mission of the program is to keep participants active in the recovery community, while also addressing barriers to sustaining recovery.</li> <li>Recovery Works began this pilot last year in one café but has expanded over the last year, and services are now available in all Recovery Cafés across the state of Indiana.</li> </ul>
Public Allies for Community Reentry (PACE)	\$10M	PACE created the infrastructure needed to administer Recovery Works referrals more equitably, while also collecting necessary data for future Recovery Works programmatic funding decisions.
Faith-Based Recovery Support Pilot	\$300,000	Through the creation of a pilot program, Recovery Works has collaborated with faith-based organizations to provide supportive services to individuals involved in the criminal justice system who seek faith-based support.

In addition to these contracts, Recovery Works allocated funding towards the Competency Restoration Program. There are two programs designed to provide inpatient care to those deemed incompetent to stand trial to attempt to restore competency: the Jail-Based Competency Restoration (JBR) program and Project CREATE (COVID-Related Emergency Access to Therapeutic Environments). The JBR programs are located in Vanderburgh County and Tippecanoe County, and Project CREATE operates through Wellstone Regional Hospital (Clark County), Valle Vista Health System (Johnson County), and Hendricks Behavioral Health (Hendricks County). DMHA continues to work with professionals to evaluate the overall effectiveness of the Recovery Works program as well as the impact the vendors have on the overall success of Recovery Works.

<sup>19</sup> Prestly, C., DMHA Director of Recovery Works (personal communications, October 20, 2023) provided updated participant totals.

<sup>20</sup> Prestly, C., DMHA Director of Recovery Works, (personal communications, October 13, 2023) provided updates on DMHA projects, Recovery Works, and a Legislative Reporting Requirements memo listing program/organizations, contract amounts, and program descriptions.

**Table 20. Jail-Based Competency Restoration and Project CREATE**

	SFY 23	Total To Date	Avg. Length of Stay
Jail-Based Competency Restoration			
Vanderburgh County Jail	10	30	88.1 days
Tippecanoe County Jail	4	7	
Project CREATE			
Wellstone Regional Hospital	34	53	80.9 days
Valle vista Health Systems	40	68	
Hendricks Behavioral Health	39	54	

## JAIL

According to the 2022 jail inspection reports, 86 (93.5%) county jails offer substance use services. This is one more additional jail with substance use services than last year and three more than in 2020. One of the services offered in five jails in 2022 and 2023 was a mental health and substance use pilot program that was also supported by Recovery Works through the DMHA, the Integrated Reentry and Correctional Support (IRACS) program.

The Integrated Reentry and Correctional Support (IRACS) program is a pilot program that was launched in 2022 and ended in June 2023. Thus far, IRACS and Recovery Works have not yet published the outcomes or plans for continuing or expanding this program, but this may be temporary while the program is being reviewed since it is a pilot program. The goal of this program is to support incarcerated individuals impacted by substance use disorder or mental health challenges through peer-driven, Sequential Intercept Model interventions.

The Sequential Intercept Model refers to the paths through which “individuals with mental and substance use disorders come into contact with and move through the criminal justice system”.<sup>21</sup> The intercepts are points of contact with the justice system, such as calling 911 at Intercept 1, initial detention in Intercept 2, jails and courts at Intercept 3, etc. Using the Sequential Intercept Model helps to identify the resources, services, and gaps for an individual’s path through contacts with the justice system to plan how best to assist them.

The IRACS program intends to increase peer and community support, reduce overdoses and recidivism, and decrease addiction and mental health stigma for inmates awaiting sentencing or release. To achieve these goals, IRACS teams, which include certified coordinators, peer professionals, health navigators, and correctional care providers, partner with community organizations, corrections, law enforcement, medical and addiction providers, and other local support partners. This pilot program was implemented in five county jails in Blackford, Daviess, Dearborn, Delaware, and Scott County, and each jail received \$500,000 to implement the program’s infrastructure and personnel.<sup>22</sup>

<sup>21</sup> SAMHSA. (September 27, 2022). *The Sequential Intercept Model (SIM)*. Retrieved November 2, 2023, from [on.in.gov/f4qum](https://www.samhsa.gov/f4qum)

<sup>22</sup> Downard, W. (August 11, 2022). *FSSA launches pilot mental health program in jails*. Indiana Capital Chronicle. Retrieved August 28, 2023 from [on.in.gov/ahh74](https://www.in.gov/ahh74)

As of August 2023, the website for IRACS reports that the program has been provided to 2,004 participants, provided 13,788 engagements with IRACS participants, and participants of the program have a 75% success rate for reentry.<sup>23</sup> The DMHA reports that an expansion of services is expected at two or three new locations in SFY24.<sup>24</sup>

## PRISON

Due to changes in data management systems, IDOC and ICJI were not able to compare the data in the same way as in previous years for mental health and substance use program utilization by incarcerated individuals.

In the most recent fact cards<sup>25</sup> on the demographics of the IDOC population in January 2023, 28.9% of the adult population in the IDOC had one or more drug offenses, and in July 2023, 27.1% of the adult population in the IDOC had one or more drug offenses. This is roughly the same prevalence as in July of 2022 (28.5%) and a decrease from the 42.5% reported in 2021.

Upon entry into the IDOC, an offender is given an accountability plan that lays out which programs would aid in that individual's successful reentry into the community. There are a variety of substance use, mental health, cognitive, and social programs (among others) that may be encouraged.<sup>26</sup> Moreover, the "Recovery While Incarcerated" (RWI) treatment programs continue to help offenders develop a continuum of care throughout their incarceration and provide a recovery-based environment and individualized treatment curriculums for those committed to the IDOC with a history of substance use.<sup>27</sup> Additionally, mental health treatment is made available to all offenders as part of the IDOC's medical contract and can be requested by the offender or a staff member if they notice aberrant behavior.<sup>28</sup>

As of July 2022, HEA 1004 allows judicial discretion to sentence Level 6 felony offenders to prisons rather than jails. Ideally, this change will allow incarcerated individuals sentenced for Level 6 felonies, such as drug offenses for substances like methamphetamines, to gain better access to other substance use resources and recovery programs that are available in prison that they may not have access to in local jails.

23. Indiana Forensic Services. (n.d.) Rethink reentry: HOPE begins at day one. Mental Health America of Indiana. Retrieved August 28, 2023 from [on.in.gov/cynt7](https://on.in.gov/cynt7)

24. L. Schairbaum, & A. Duke, DMHA from the Recovery Works Legislative Reporting Requirements memo (personal communications, October 13, 2023).

25. Indiana Department of Corrections. (November 2023). IDOC: FACT cards. Retrieved November 17, 2023, from [on.in.gov/nufgd](https://on.in.gov/nufgd)

26. Indiana Department of Corrections. (n.d.). Appendix 3: Programs component [PDF]. Retrieved October 23, 2023, from [on.in.gov/7bry7](https://on.in.gov/7bry7)

27. Reid, J.D., Harvey, J.C., & Hubert, L. (2021, October). Recovery While Incarcerated: Transforming the delivery of addiction recovery services in IDOC facilities [PowerPoint slides]. [on.in.gov/sbalb](https://on.in.gov/sbalb)

28. Indiana Department of Corrections. (n.d.). Mental health. Retrieved from [on.in.gov/cuy8o](https://on.in.gov/cuy8o)

## SURVEY RESPONSES TO MENTAL HEALTH AND SUBSTANCE USE PROGRAMS' EFFECTIVENESS

Among the respondents to our HEA 1006 survey (discussed more in the survey section of this report below), opinions were divided regarding the effectiveness of mental health and substance use treatment programs for reducing recidivism. The most common response (41) of the ninety-six (96) responses to this question either had a neutral response or thought that the programs were both ineffective and effective. Essentially, they said that 'it depends' on a variety of factors whether mental health and substance use programs were effective at reducing recidivism. Respondents said that the effectiveness of these programs varies depending on the clients' willingness to put in the effort to change and to continue working on it after the program or their incarceration has been completed. Respondents also said that success depends on the resources available at the facility or the service providers, specifically their client capacity and staffing, both of which were frequently noted to be limited. Similarly, another fifteen (15) respondents felt that the programs can be effective, if or when certain criteria are met, such as if: the client successfully completes the program, evidence-based models are used, staffing needs are met, and clients can access the services.

Aside from neutral and conditional responses, about 25 respondents felt these programs were effective, or at least "much more effective than incarceration or standard probation terms." Another explained, "They are effective in that it is a percentages thing. If we are able to help 10% of the people stay out of the system, that is a win and worth the costs." On the other hand, another 15 respondents felt that the programs were categorically ineffective as they currently exist because they are not long enough, there is not enough follow-through after program completion, spaces are too limited, or the services are inaccessible to clients.

## UPDATE ON INDIANA BEHAVIORAL HEALTH COMMISSION REPORT & CCBHC'S

Last year the Indiana Behavioral Health Commission (INBHC) released a report detailing the state's behavioral health services and the steps needed to meet the state's increasing needs. They discussed several recommendations, including increasing overall behavioral health funding by at least 60% over four years, investing in 988 infrastructure, and utilizing Medicaid waivers for mental healthcare, among other suggestions.

They also highlighted the importance of the shift from Indiana's Community Mental Health Center (CMHC) system to the Certified Community Behavioral Health Clinic (CCBHC) model. The main difference between the service provider systems is that CMHC is funded by the state and the financial structure "does not allow behavioral health providers to cover their costs for providing evidence-based, integrated, and whole person care".<sup>29</sup> Meanwhile, the CCBHC model is federally funded and does allow providers to cover the costs of these mental healthcare treatments.

<sup>29</sup> Indiana Behavioral Health Commission. (2022, September 28). Final report. (p.11). Retrieved from [on.in.gov/dmbdz](https://on.in.gov/dmbdz)

In addition to addressing some of the concerns raised by the Indiana Behavioral Health Commission, House Enrolled Act 1222 passed in 2022 tasked the DMHA with establishing a plan to expand CCBHCs in Indiana.<sup>30</sup> In November 2022, the DMHA released a plan for expanding the use of CCBHCs in the state.<sup>31</sup> According to their timeline, the next step after establishing goals and stakeholders is to apply for the CCBHC Demonstration, which is a longer-term funding source for CCBHCs than grants.<sup>32</sup> Increasing access to behavioral healthcare at CCBHC's is an important step for helping individuals at-risk of becoming involved in the criminal justice system to seek treatment for mental health issues and substance use disorders.

## 988 SUICIDE & CRISIS HOTLINE

The 988 Suicide and Crisis Lifeline launched nationwide in July of 2022. Nationally, 988 has reportedly received almost 5 million contacts (calls, texts, ad and online chats), nearly 1 million of which were to the Veterans Crisis Line.<sup>33</sup> Indiana alone receives nearly 4,000 calls per month and leads the nation for most calls answered in-state, with more than 90% of calls answered in-state since November 2022.<sup>34</sup> Since last year, Indiana has increased the number of call centers by two, bringing the total 988 call centers in Indiana to five: Crisis Center Inc., A Better Way, Mental Health America Wabash Valley Region, Mental Health America of Indiana-Indianapolis, and RemedyLIVE.<sup>35</sup>

The FSSA's DMHA<sup>36</sup> website explains that they plan to continue expanding and developing the 988 and mental health infrastructure over several years by further developing the 988 system, establishing mobile crisis teams, and improving community support and crisis networks. Funding for these projects comes from a variety of sources, such as the Community Catalyst Grants, as well as from financial support in the biennial budget and additional funds designated by Senate Enrolled Act 1, which will provide over \$100 million toward mental health services in state fiscal years 2024 and 2025.<sup>37 38</sup> The funding will go towards the continued development of the state's crisis system and the expansion of the Certified Community Behavioral Health Clinics. The launch of 988, mobile crisis teams, and other community resources to assist people experiencing mental health and substance use crises are, in part, intended to divert people away from the criminal justice system and towards resources that can better assist them.

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## MOBILE CRISIS TEAMS

Last year, four organizations were selected to provide Mobile Crisis Services for the FSSA-DMHA Mobile Crisis pilot program: Anthony Wayne Rehabilitation Center, Choices Coordinated Care Solutions, Four County Comprehensive Mental Health Center (also known as 4C Health), and Porter-Starke Services.

These organizations serve an estimated 18 counties (roughly 20% of the state): Carroll, Cass, Clinton, DeKalb, Fulton, Howard, La Porte, Lagrange, Lake, Marshall, Miami, Porter, Pulaski, Starke, Steuben, Tipton, Wabash, White, and other (non-specific counties). The service area is primarily in the North and North Central regions of the state. At least one of the organizations offers virtual or hybrid services, and another organization, Choices Coordinated Care Solutions, does not specify service areas but offers services across Indiana and other states for youth.

It is unclear if the service areas described by these organizations are being served by the mobile crisis teams or if the service area is across all services from these organizations because few statistics are available at this time on only the mobile crisis teams. The only statistics that are publicly available as of fall 2023 are from the 4C Health's Annual Report from 2022, which cites 2,349 mobile crisis deployments, 1,141 crisis risk assessments completed, 425 inpatient psychiatric admissions (2,418 bed days), and 164 crisis stabilization unit admissions.<sup>39</sup>

The purpose of Mobile Crisis Services is to better serve people in a mental health or substance use crisis while also diverting them away from jails and hospitals, when appropriate. The mobile crisis teams consist of several multidiscipline members of varying specialties, such as a social worker, law enforcement officer, medical professional, and behavioral health professional who are monitored by an experienced psychiatrist or specialist medical professional. The team self-deploys and can provide a variety of services depending on the individual's need, such as triaging/screening, assessments, counseling, case management or care coordination, crisis intervention, follow-up stabilization services, safety planning, peer recovery support, and medication management.

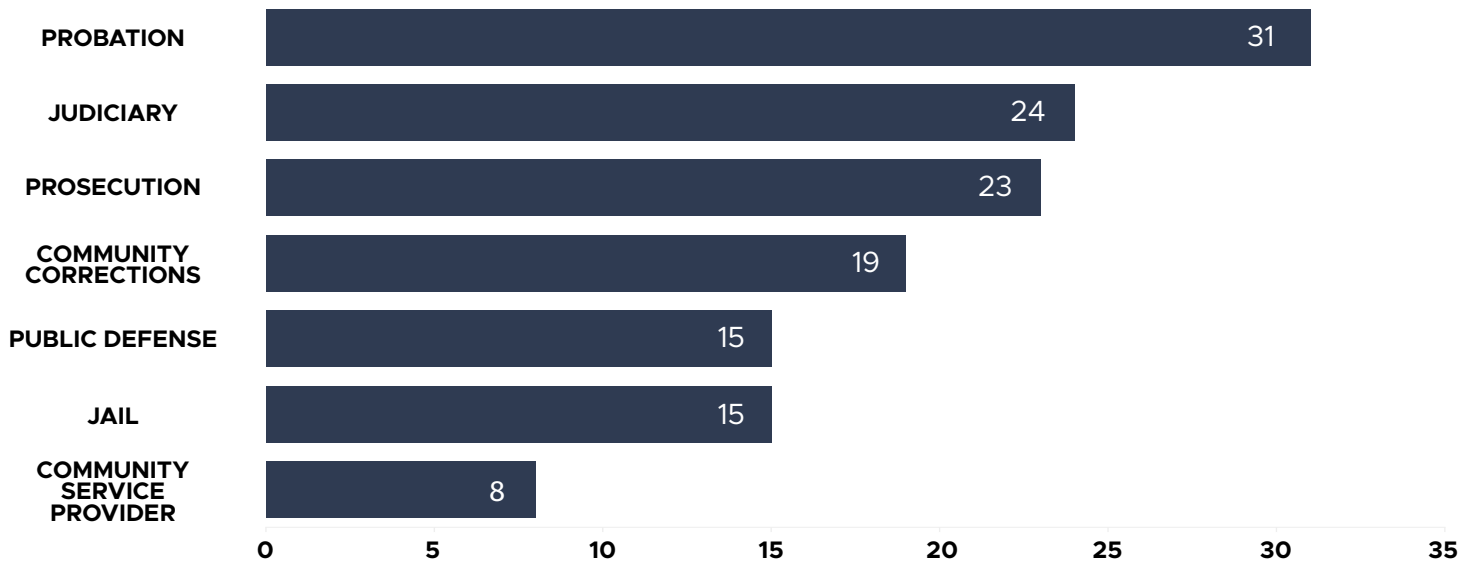
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# SURVEY

The ICJI disseminated an online survey to assess the perceptions and opinions on the effects of HEA 1006 at the county level for jails, judiciary, probation, community corrections, courts, prosecution, public defense, and community service providers. Of the 587 survey invitations, there were 135 responses collected and analyzed. This represents a 23% response rate. Responses came from agencies representing 65% (60) of Indiana's counties. Probation represented the highest number of respondents (23%), followed by judiciary (18%), prosecution (17%), community corrections (14%), jails (11%), public defense (11%), and community service providers (6%). Figure 34 is a count of responses received from each agency type.

**Figure 34. Response Rate by Agency Type**



Each agency type had a unique question set; therefore, a direct comparison between agency types cannot be made. However, some questions applied to multiple agencies, and analysis will be focused primarily on these overlapping questions and topics.

## IMPACT OF PRETRIAL DEFENDANTS

Research shows that low-risk defendants who are detained pretrial are more likely to commit new crimes, not only while their cases are pending, but also years later. Indeed, low-risk defendants held for just two to three days in pretrial detention are about “40 percent more likely to commit new crimes before trial than equivalent defendants held no more than 24 hours.” The impact of pretrial detention is also reflected in the surge in jail populations and the accompanying expenses of providing health care, meals, and other costs of incarceration.<sup>40</sup>

To better understand the impact in Indiana, jails were asked to report the number of pretrial detainees in their facilities. Eleven (79%) of the jails responded to the question. A summary of their answers is provided in Table 21 and counts from the previous survey in 2021 are included for comparison. In 2021, 28 jails responded to this question.

**Table 21. Reported Pretrial Detainees in Jails**

Number of Pretrial Detainees	2021 Count	2023 Count
Total	3,975	1,606
Average	142	146
Minimum	23	31
Maximum	547	381
Median	79	136

Probation agencies were asked if their department offers pretrial release services. Of the 24 that responded, 88% (21) stated they do, while the remainder stated they do not offer pretrial services. This is a slight increase from 2021 where 83% (19) stated they do have pretrial services. When asked if pretrial release services impact a probation officer’s caseload, 41% (9) stated it has no effect, 32% (7) stated it increases their caseloads, and 9% (2) stated it decreases their caseloads. In 2021, 56% (10) of respondents stated that pretrial services had no effect on caseloads, 28% (5) stated it increased caseloads, and 18% (4) responded they did not know if pretrial services influenced their caseloads.

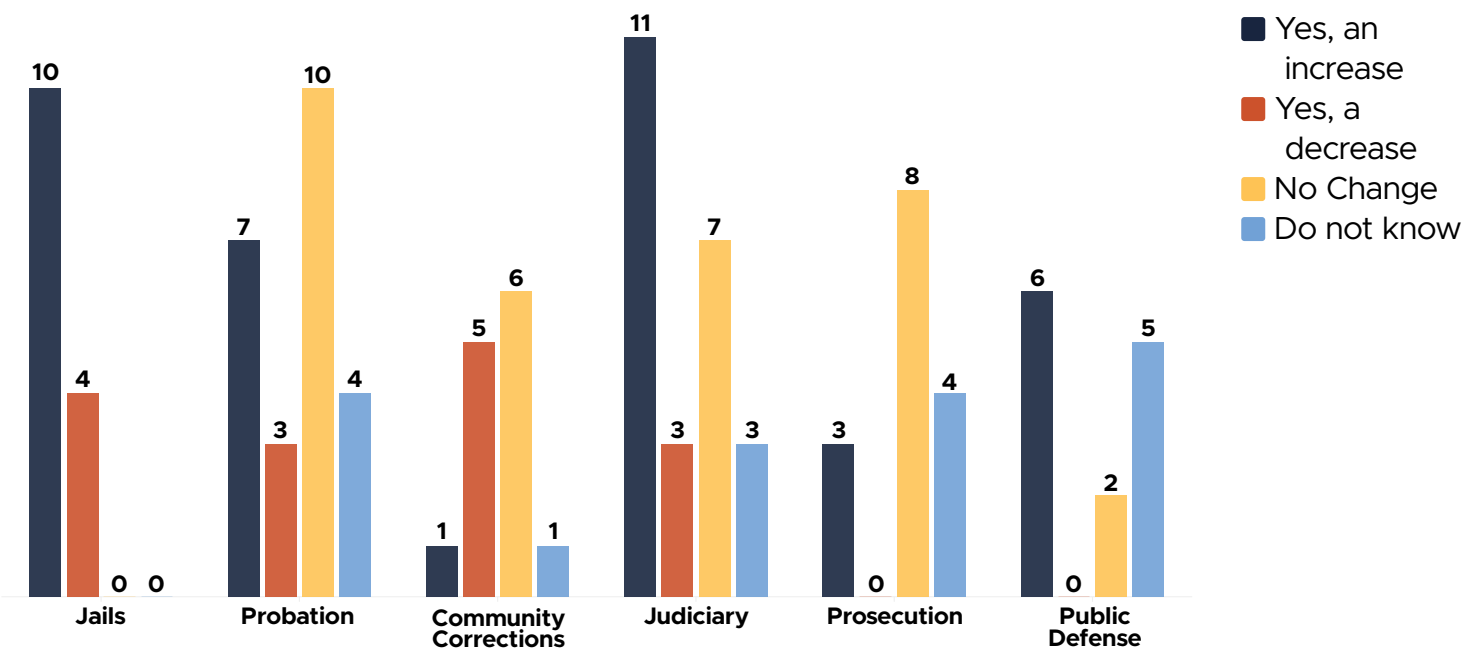
40. Pilnik, L. (2017, February). *A Framework for Pretrial Justice: Essential Elements of an Effective Pretrial System and Agency*. National Institute of Corrections. [on.in.gov/gaady](https://on.in.gov/gaady)

## IMPACT OF LEVEL 6 FELONS ON THE JUSTICE SYSTEM

To better understand the impact of the criminal code reform, agencies were asked about individuals with Level 6 felonies and their effect on caseloads. The jails reported the total number of individuals convicted of Level 6 felonies. Of the 12 jails that responded to this question, the average number of individuals convicted of Level 6 felonies housed in county jails was 26. The total number reported was 316 individuals. In 2021, there were 30 responses to this question, the average number was 23, and the total reported individuals was 677. When asked if their jail has experienced a change in the number of individuals serving time for Level 6 felonies, 14 jails responded. Seventy-one percent (10) stated they have seen an increase, and 29% (4) stated they have seen a decrease.

All agency types, excluding community service providers, were asked if they have seen a change in the number of Level 6 felony offenders handled by their office. Of the jails that responded, 71% (10) stated they saw an increase, and 29% (4) stated they saw a decrease. Twenty-nine percent (7) of probation departments stated they saw an increase, 13% (3) saw a decrease, and 42% (10) saw no change. Of the community corrections organizations that responded, 8% (1) stated they saw an increase, 38% (5) saw a decrease, and 46% (6) saw no change. Of the judicial respondents, 46% (11) stated they saw an increase, 13% (3) saw a decrease, and 29% (7) saw no change. Twenty percent (3) of prosecutors stated they saw an increase, and 53% (8) saw no change. Of the public defense agencies, 46% (6) stated they saw an increase, and 15% (2) saw no change. Figure 35 displays the responses from all agency types asked if they saw a change in the number of level 6 felony offenders handled by their office.

**Figure 35. Changes in the Number of Level 6 Felony Offenders**

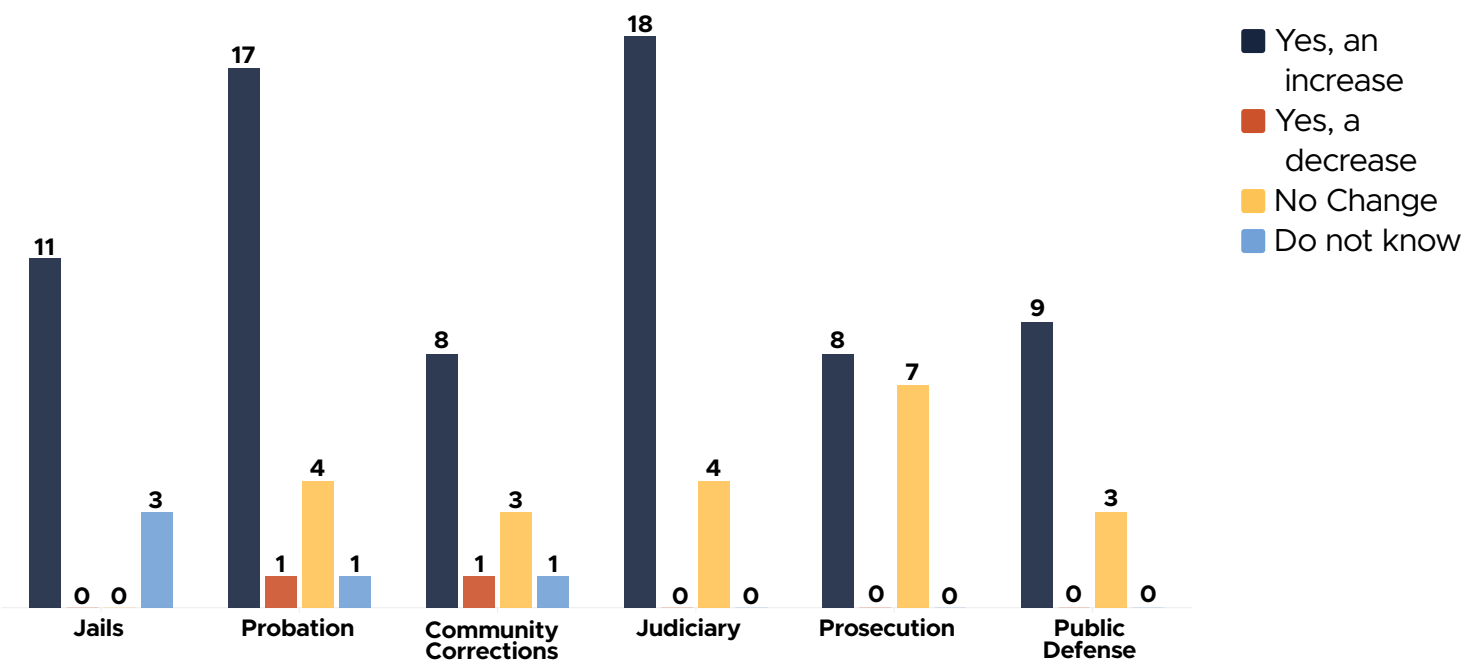


Additionally, probation departments, community corrections, prosecutors, and public defenders were asked what percent of their caseload they attributed to Level 6 felony offenders. Of the responding probation departments (24), the average percentage of Level 6 felony offenders they attributed to their caseload was 44%. Of the responding community corrections organizations (13), the average percentage of Level 6 felony offenders they attributed to their caseload was 50%. Of the prosecutors that responded (15) the average percentage of Level 6 felony offenders they attributed to their caseload was 45%. Of the public defenders (13) that responded, the average percentage of Level 6 felony offenders they attributed to their caseload was 46%.

## SUBSTANCE USE AND MENTAL HEALTH SERVICES

Organizations were asked if there has been a change in the past year in the number of defendants who require services, such as substance use and/or mental health treatment. Universally, organizations reported an increase in the number of individuals who require services. Eighty-one percent (18) of judiciary respondents, 79% (11) of jails, 74% (17) of probation, 75% (9) of public defenders, 62% (8) of community corrections, and 53% (8) of prosecutors reported an increase in individuals in need of services in the past year. Figure 36 displays additional information on the responses.

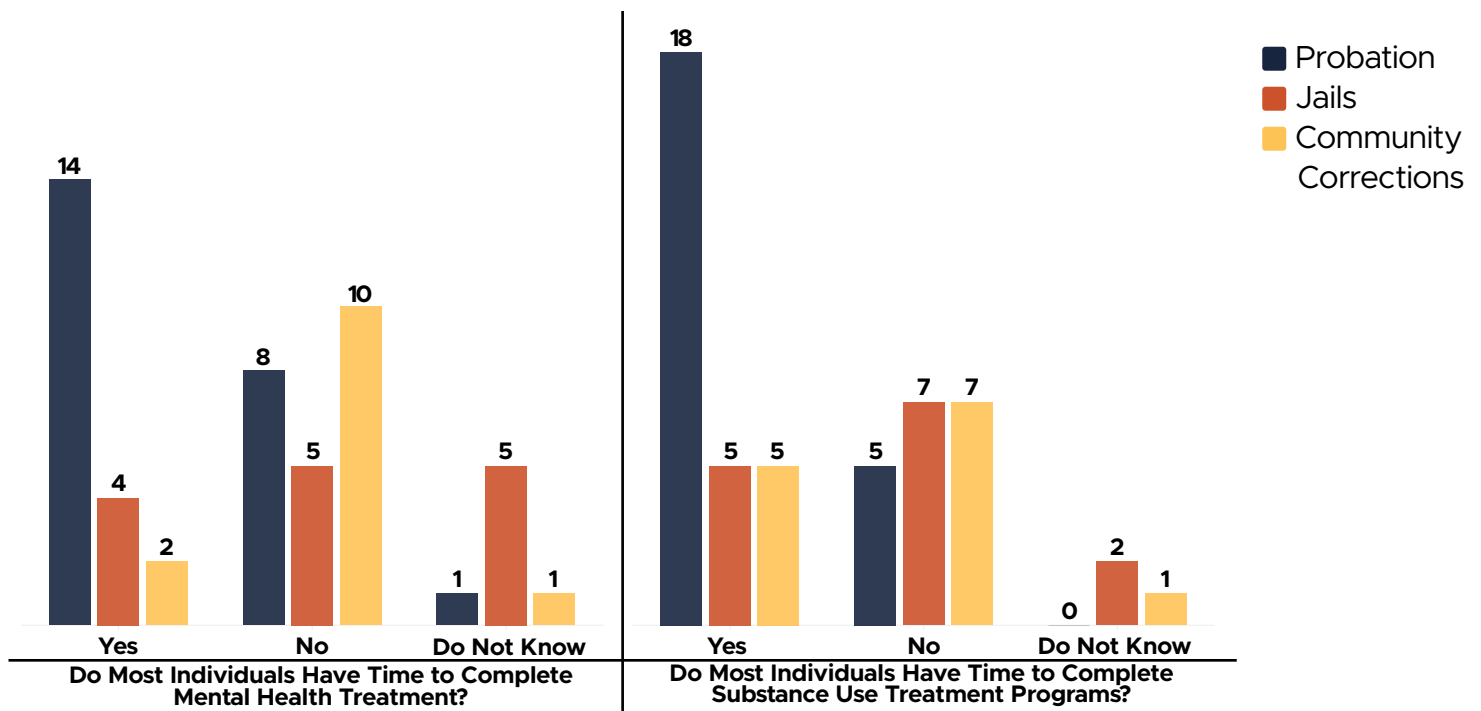
**Figure 36. Change in Number of Defendants Requiring Substance Use or Mental Health Services**



Mental health and substance use continue to be significant factors that justice-involved organizations face when ensuring the needs of defendants and inmates are met. Justice-involved organizations report that these needs often struggle to be fully met given constraints on time and resources. Of the 13 jails that responded, an average of 49% of all inmates were reported to have mental health issues. Eleven jails responded to an additional question and stated that only about 22% of all inmates enroll in mental health treatment programs, and only about 27% enroll in substance use treatment programs.

Organizations were also asked whether most individuals have time to complete mental health and substance use treatment programs while involved with their organization. Jails generally indicated they did not feel inmates had enough time to finish treatment programs. Of the jails that responded, 29% (4) stated that inmates did have enough time to complete mental health treatment, and 36% (5) stated inmates had enough time to complete substance use treatment. However, 36% (5) of jails stated inmates did not have enough time to complete mental health treatment, and 50% (7) stated inmates did not have enough time to complete substance use treatment. Probation departments had differing responses that indicated probation generally had better rates of individuals completing treatment options. Of those who responded, 61% (14) stated individuals did have enough time to complete mental health treatment, and 79% (18) stated individuals had enough time to complete substance abuse treatment. Community corrections organizations had the most responses indicating they did not believe individuals had time to complete treatment for mental health or substance use. Of those who responded, 77% (10) stated that individuals did not have time to complete mental health treatment, and 54% (7) stated individuals did not have time to complete substance use programs. Additional response information for these questions is shown in Figure 37.

**Figure 37. Time to Complete Treatment Programs**



Additionally, organizations were asked what mental health and substance use programs or services they provided or were available in their county. Of the jails that responded, 93% (13) stated that mental health screenings or assessments were provided, and 79% (11) stated they offered counseling. These were the two most common services provided by jails respectively. For the top substance use programs or services, 65% (9) of jails responded that substance use counseling was provided, and 57% (8) responded that Alcoholics Anonymous (AA) or Narcotics Anonymous (NA) was provided. Probation departments also provided responses on mental health and substance use services they offered, and 100% (23) of responding probation departments stated that they offered counseling. Ninety-six percent responded they offered mental health screenings or assessments. These were the top mental health programs offered by probation departments respectively. Of substance use programs offered, 96% (22) of responding probation departments stated they provided substance use counseling and AA or NA. When asked what mental health programs were available in their county, 67% (8) of public defenders responded that mental health screenings were available, and 50% (6) responded that therapy was the second most commonly available. Responding to what substance use programs were available, 83% (10) of public defenders stated AA/NA and substance use education classes were most common. Seventy-five percent (9) responded that substance use counseling was the second most common. Of prosecutors who responded to what mental health programs were available, 100% (15) stated that counseling was provided, making it the most common. Ninety-three percent (14) of prosecutors stated that mental health screenings or assessments were available, making it second most common. One hundred percent (14) of prosecutors stated that substance use counseling was the most commonly available substance use program, and 93% (13) stated that substance use education classes were second most common. One hundred percent of judges stated that mental health screenings or assessments and counseling were the most common programs available in their county. Ninety-one percent (20) stated that therapy was provided, making it the second most common. Lastly, community corrections organizations responded to what programs or services they offered for mental health or substance use treatment. Ninety-two percent (12) responded that both counseling and therapy were offered, making these the most common services provided for mental health treatment by community corrections. For substance use treatment, 85% (11) responded that they provided substance use counseling, AA or NA, and substance use education classes. Figure 38 shows commonly available mental health programs for all organization types.

**Figure 38. Top Three Most Commonly Available Mental Health Programs**

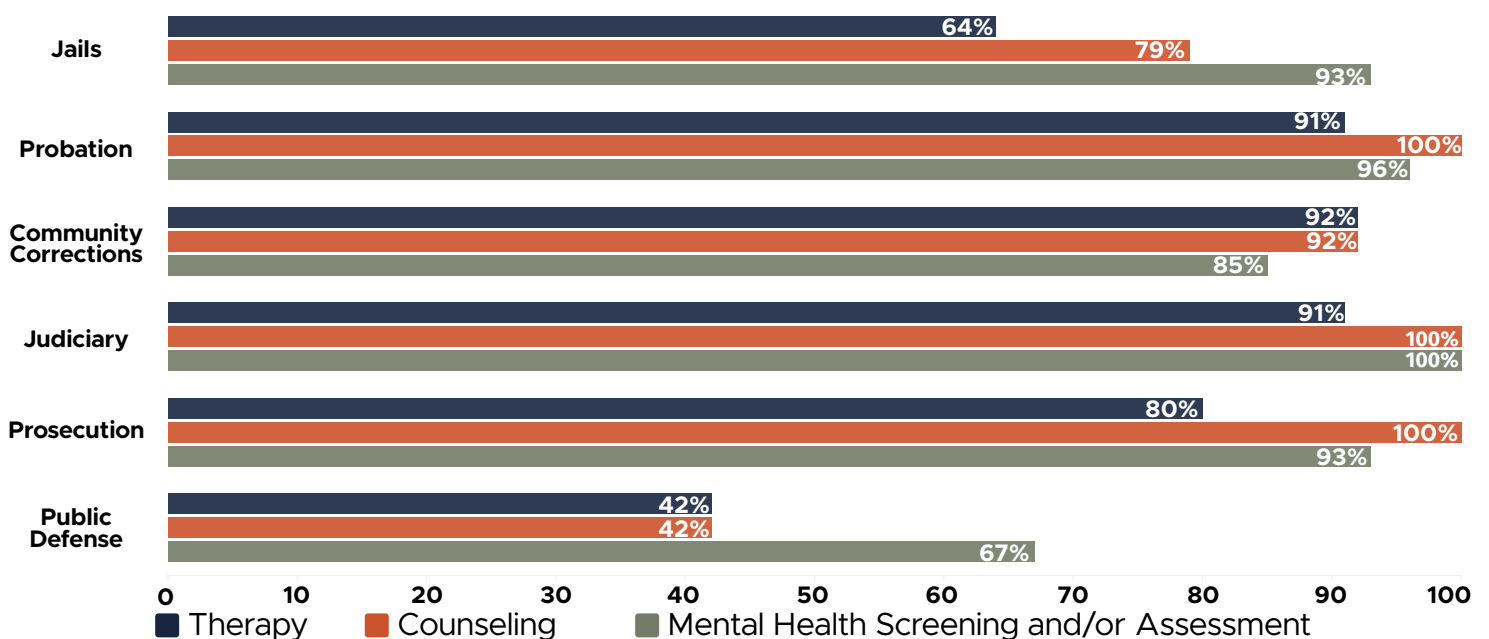
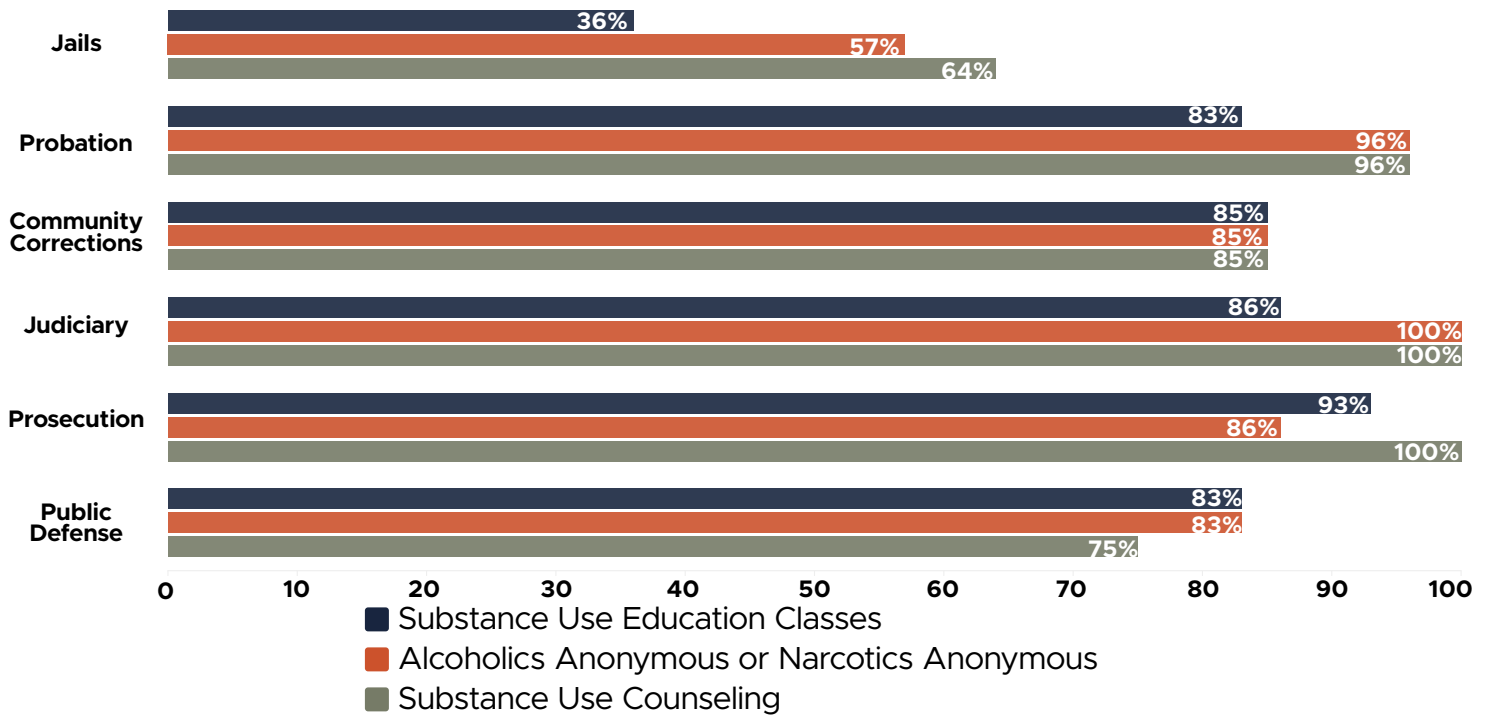


Figure 39 shows commonly available substance use programs for all organization types.

**Figure 39. Top Three Most Commonly Available Substance Use Programs**



Organizations were then asked what kind of feedback they received from individuals who participated in substance use or mental health programs. They responded that individuals most commonly gave feedback indicating they found services for mental health or substance use treatment at least somewhat helpful. Of jails that responded, 43% (6) stated individuals found the mental health treatment programs somewhat helpful, and 50% (7) said individuals found the substance use treatment programs somewhat helpful. Of probation departments that responded, 57% (13) stated individuals found the mental health treatment programs somewhat helpful, and 53% (12) said individuals found the substance use treatment programs somewhat helpful. Thirty-one percent (4) of community corrections organizations responded that individuals provided feedback indicating they found mental health programs offered extremely helpful, and 31% (4) also found substance use programs extremely helpful.

Responses to questions relating to mental health and substance use indicate that justice-involved organizations perceive an increase in inmates, defendants, and clients in need of services. These needs, however, are not being met due to a variety of factors. Even though there are significant numbers of individuals in need of services, not all of these individuals are seeking treatment or services while in contact with various justice-involved organizations. Moreover, even those who do seek services often do not have time to complete treatment due to the length of programming being longer than the individual's incarceration, probation, or contact with the justice system. Despite issues with individuals completing treatment programs or services, they have provided feedback to organizations that they usually find the treatment at least somewhat helpful.



## COMMUNITY SERVICE PROVIDERS

Community service providers were asked a series of questions about their organization's ability to meet the needs of clients. Fifty-seven percent (4) said their organization has forensic programming that specifically addresses the needs of criminal justice-involved clients. Twenty-nine percent (2) said they do not have specific forensic programming. When asked how the organization funds its forensic programs, 75% (3) responded "other," specifying such things as fundraising and private scholarships. Fifty percent (2) said client's public or private insurance, Recovery Works, and local funds. Twenty-five percent (1) said client out-of-pocket fees and Department of Child Services funding. One hundred percent (4) said funding has not been sufficient to carry out the mission of their organizations' forensic programming over the last year, and when asked if the organization has enough staff to meet the needs of the criminal justice-involved clients, 57% (4) said yes and 43% (3) said no. In terms of the intensity of services, three (43%) reported an increase in the overall intensity (e.g., the level of need, frequency of contact, and number of services required to meet the needs of the client) of services for criminal justice-involved clients. Three (43%) said there has been no change and one (14%) said they did not know.

Community service providers offer a wide range of substance use, mental health, and social services. The table below reports the types of services directly offered, with substance use treatment (86%) and mental health treatment (86%) tied for the most common service. These were followed by life skills curriculums (57%) and linkages to community resources (57%), which tied for the second most common service.

**Table 22. Types of Services Offered**

Service	Count	Percent
Substance Use Treatment	6	86%
Mental Health Treatment	6	86%
Life Skills Curriculum (Thinking for a Change, Anger Management)	4	57%
Linkages to Community Resources (Non-Agency)	4	57%
Employment Assistance/Job Skills Training	2	29%
Transportation Assistance	2	29%
Housing/Homelessness Services	2	29%
Reentry Services	1	14%
Food and Clothing Assistance	1	14%
Medical Services	1	14%
Education	0	0%
None	0	0%
Other (please specify)	0	0%

When asked which services justice-involved clients have difficulty obtaining due to lack of availability or affordability, multiple services are tied for the most common with 57% (4) of respondents stating clients have difficulty accessing substance use treatment, mental health treatment, transportation assistance, and housing/homelessness services. Multiple services also tied for the second most common service which clients have difficulty accessing due to funding or availability. Twenty-nine percent (2) of respondents stated clients have difficulty accessing employment assistance/job skills training, education, food and clothing assistance, medical services, and linkages to community resources.

**Table 23. Services Difficult to Obtain**

Service	Count	Percent
Substance Use Treatment	4	57%
Mental Health Treatment	4	57%
Transportation Assistance	4	57%
Housing/Homelessness Services	4	57%
Employment Assistance/ Job Skills Training	2	29%
Education	2	29%
Food and Clothing Assistance	2	29%
Medical Services	2	29%
Linkages to Community Resources (Non-Agency)	2	29%
Life Skills Curriculum (e.g. Thinking for a Change, Anger Management)	1	14%
None	1	14%
Do not know	0	0%
Other (please specify)	0	0%

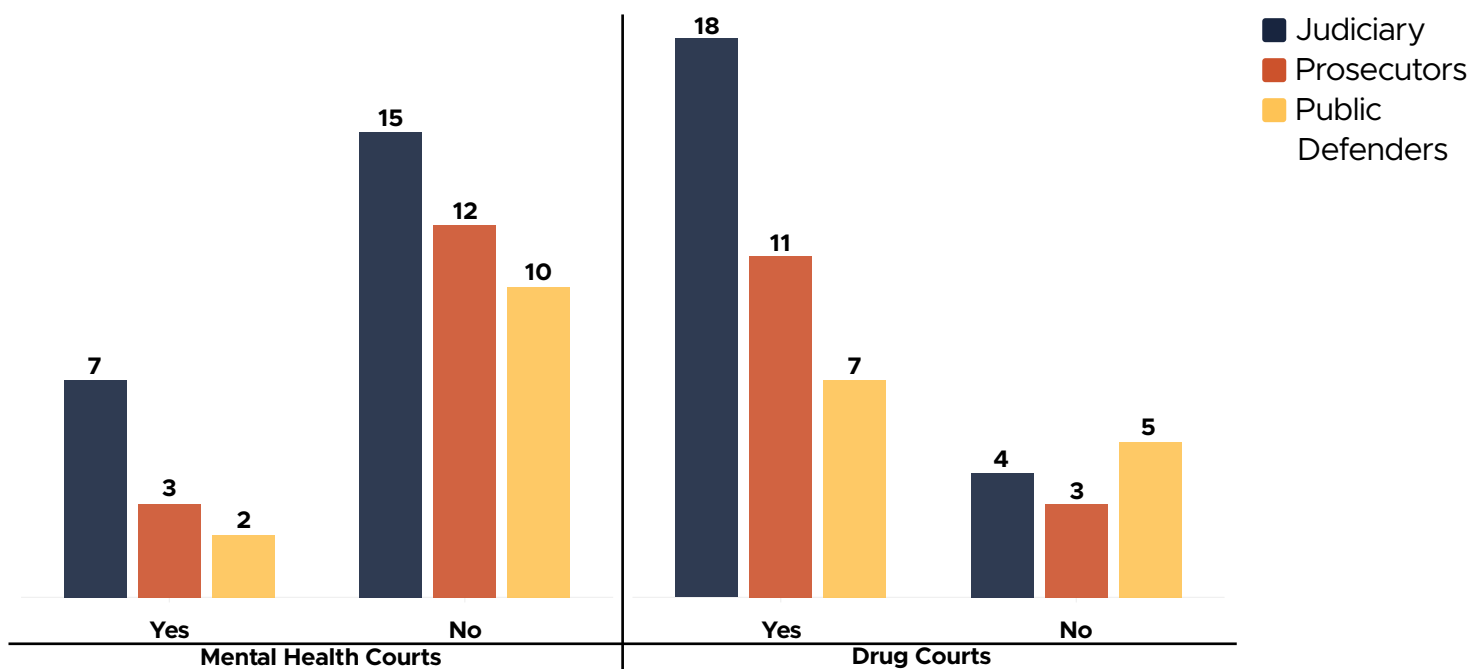
## PROBLEM-SOLVING COURTS

Organizations were asked if they had alternatives to traditional courts, such as problem-solving courts, mental health courts, and drug courts. Such courts are similar to traditional courts, but defendants are often referred to as clients and the judge has more involvement and discretion with clients. These courts often serve to expedite case processing and reduce caseload to increase trial capacity for more serious crimes, and they allow for therapeutic jurisprudence to reduce criminal offending through interdisciplinary approaches. They aim to provide a more holistic and rehabilitative approach to criminal justice. Judges can place clients into treatment programs, assess their progress, and order them into jail while in treatment if they deem it necessary.<sup>41</sup>

41. National Institute of Justice (NIJ). (2020). *Problem-Solving Courts*. Retrieved October 23, 2023, retrieved from [on.in.gov/99fxf](https://on.in.gov/99fxf)

Judges responded to whether their county had one or more problem-solving courts, and 96% (23) said yes. Four percent (1) said no. As to whether their county has mental health courts, 68% (15) of judges said no, and 32% (7) said yes. Of prosecutors that responded, 80% (12) said no, and 20% (3) said yes. Eighty-three percent (10) of public defenders responded no, and 17% (2) responded yes. On whether their county had a drug court, 82% (18) of judges said yes, and 18% (4) said no. Of prosecutors that responded, 79% (11) said yes, and 21% (3) said no. Fifty-eight percent (7) of public defenders responded yes, and 42% (5) said no.

**Figure 40. Problem-Solving Courts**



Organizations that stated their county had a drug court were also asked how long, on average, it takes to complete. All judges (18) that indicated their county had a drug court responded to this question, and they stated that it takes individuals an average of 21 months to complete the requirements of the drug court. Eighty-one percent (9) of prosecutors that stated their county had a drug court responded and said it takes an average of 23 months for individuals to complete the requirements of drug court. All public defenders (7) with a drug court responded and stated it takes individuals an average of 23 months to complete drug court.

## OPEN-ENDED QUESTIONS

Lastly, respondents were asked two open-ended questions related to the effectiveness of mental health and substance use treatment programs at reducing recidivism and whether they had any additional information they wished to share about how the criminal code reform has impacted their community.

On how effective mental health or substance use treatment programs are at reducing recidivism, there were 96 responses. Twenty-five percent (24) of respondents stated that such programs are effective, with responses mentioning that these programs help stabilize individuals and are more effective at reducing recidivism than incarceration or probation alone. Sixteen percent (15) stated these programs were effective under certain circumstances, such as when programs are fully funded and staffed, individuals are cooperative and motivated to engage with programming, clients have access, or the programs are carried out with fidelity and the collaboration of appropriate stakeholders. Forty-three percent (41) of respondents provided more neutral responses indicating such programming is both effective and ineffective at reducing recidivism. Responses included information indicating they felt these programs were sometimes effective, but program structure, funding, and client motivation are major factors. They stated that these programs alone are often not enough to meet the needs of clients and additional system change is needed. Sixteen percent (15) stated that such programs are not effective at reducing recidivism, providing responses that mention funding difficulties, lack of ability to follow-up with clients that are released, clients not having long enough to complete treatment before release, and lack of client motivation.

One response indicating that mental health or substance use treatment was, under the right circumstances, effective at reducing recidivism stated, “They are very effective when performed in conjunction with other services involving social determinants of health. Without a comprehensive and integrated approach, many (if not most) efforts fail.” Another respondent provided a more neutral response and stated, “Mental health programs are effective when combined with accountability provided by the criminal justice system. Rarely will an individual decide on their own to seek mental health treatment and such services are hard to obtain because they are put on a wait list.” The same respondent, however, went on to say, “The manner in which we address these issues is counterintuitive and makes mental health issues and criminal thinking harder to address.” And “...all the legal reforms have only made it hard to effect change, not easier.”

On whether respondents had any additional information the survey did not address that they wished to share about the impacts of the criminal code reform on their community, there were 59 responses. 14% (8) of responses were miscellaneous, with responses pointing out things such as the fact the survey mentions Level 6 felonies but not higher-level felonies which require more intensive work, or referencing wider problems outside the scope of the survey like the war on drugs. Thirty-two percent (19) stated they did not have any additional information to provide. Fifty-four percent (32) of respondents provided information or suggestions on items that they felt were not addressed in the survey. Such responses include information like lack of mental health resources and staff, increases in violent crimes, unique struggles in rural areas accessing services, and that the criminal code reform caused increases in jail populations.

One respondent who provided information on what they felt was not addressed in the survey stated, “There is so much gun violence and violent crime, we are literally treading water. It was a huge mistake to remove minimum mandatory sentences and to lower the penalties for drug dealing cases.” Another respondent went on to say, “The 2014 reform had a significant negative impact on the community. The jails were overcrowded with level 6 felons, which led to increased jail violence and an inability to maintain corrections officers.”



For a full list of responses, visit [on.in.gov/eezp4](https://on.in.gov/eezp4)



[on.in.gov/eezp4](https://on.in.gov/eezp4)

# CONCLUSION

Although some case and population numbers are trending towards pre-COVID levels, strides are being taken throughout criminal justice systems to decrease the number of offenders in state and local facilities. This has been accomplished by investing in and utilizing a wide array of community-based alternatives to incarceration, as well as making mental health, substance use, and other restorative justice programs a priority for offenders.

Over the past few years, many improvements have been made to enhance the accessibility of treatment to the entire criminal justice population; however, problems with program staffing, limited capacities, and lack of follow-up resources after program completion should be addressed. Methods to reduce jail overcrowding should continue to be explored and practiced, and the effects of recent changes allowing F6s to be placed in IDOC facilities again should be monitored for adverse effects. There should be an increased focus on reentry services, and the increased attention on mental health and substance use needs of all Hoosiers at risk of becoming involved in the criminal justice system should continue.

## RECOMMENDATIONS

The ICJI and JRAC make the following recommendations:

### **Improve the Criminal Justice Data Ecosystem**

As mentioned throughout this and previous reports, there is a need to continue improving and collecting data from every aspect of the criminal justice system. The ICJI has continuously had to work with multiple organizations to obtain the available data needed to draft this and other reports. Both in requesting and receiving the data needed to complete this report, it was apparent the methods by which Indiana tracks criminal justice-related information are fragmented and often duplicative. A primary focus needs to be on enhancing, gathering, and defining jail data; developing a cohesive criminal justice data repository; scaling back the number of data systems utilized such as jail management systems; enhancing the sharing of data across agencies; and improving the evaluation of the available data produced by each system stakeholder.

### **Reduce Jail Overcrowding**

Jail populations are beginning to increase following declines due to the COVID-19 pandemic. Changes to local policies and implementation of evidence-based practices, such as citation in lieu of arrest for non-violent offenders, bail reform, and strategies to prevent failures to appear led to decreases in some jails during the pandemic. These practices should continue to be supported and implemented statewide. JRAC recommends continued support for the recommendations outlined in the Jail Overcrowding Task Force Report and the JRAC Pretrial and Bail Reform Report.<sup>42</sup> Additionally, research on bail reform and pretrial release strategies should continue to determine best practices for types of supervision and release that are most effective for varying types of risk for reoffending.

42. *Jail Overcrowding Task Force 2019 Report* [on.in.gov/5nq1e](https://on.in.gov/5nq1e) & *Report on Bail Reform and Pretrial Issues* [on.in.gov/f5n7a](https://on.in.gov/f5n7a)

## **Continue to Support Forensic Mental Health and Substance Use Programs During and Post-Incarceration**

Many criminal justice-involved individuals have mental health and/or substance use disorders. Therefore, it is necessary to continue efforts to enhance the accessibility of community-based mental health and substance use treatment programs that support the full range of needs for the criminal justice population, including recovery residences, medication-assisted treatment, and psychiatric services. It is recommended that these services be offered during and after incarceration, as both impact recidivism. Based on our survey of criminal justice stakeholders, prioritizing program capacity, staffing, and follow-up services would be most beneficial for substance use and mental health programs to increase program accessibility and success. Recent budgetary and legislative actions, as well as the long-term plans to improve mental health and substance use infrastructure in the state, are all steps in the right direction. However, continued attention, funding, and evaluation of existing mental health and substance use programs is needed to provide these services to individuals currently, formerly, and at risk of being involved in the justice system.

## **Increase Focus on Reentry Services for Restorative Justice**

With the progress of programs like Recovery Works, the reentry of offenders back into society is improving. However, reentry continues to be an area needing enhancement in Indiana. Additional and/or improved reentry programs are needed in areas such as employment, housing, transportation, life skills training after incarceration and reintegration, and improving staffing issues and participant capacity limitations for existing programs. The Integrated Reentry and Correctional Support program provides adaptive support for individuals in the criminal justice system for reentry, and the IDOC has implemented job and life skills training for some offenders, but more work is needed, especially at the local level. Steady and gainful employment combined with secure housing and transportation are key factors that will impact Indiana's recidivism rates. Another aspect of reentry that should be an area of focus in the future is looking at other social determinants of health both prior to and following reentry. Areas of focus should include but may not be limited to familial involvement, continued education (if applicable), employment, housing, access to food, and routine medical care.

## **Support Local JRAC**

The Local JRAC Statute (Ind. Code § 33-38-9.5-4) provides the framework for local stakeholders to convene regular meetings and review systemic practices to implement needed improvements within the local criminal justice system. Therefore, it is necessary to support efforts to enhance technical assistance and funding opportunities for Local JRACs. The Local JRAC review process is critical to comprehensively address issues facing the criminal justice system, including jail data and jail overcrowding, mental health crisis responses, community supervision, and reentry. This process allows Local JRACs to work with JRAC and the General Assembly to inform state policy.

# GLOSSARY

## **Abstract of Judgment**

Also referred to as abstract in this report; a living electronic document, completed by the court, associated with an offender sentenced with a felony who has received a commitment to the Indiana Department of Correction (IDOC).

The document must include, but is not limited to:

1. each offense the person is convicted of;
2. the sentence, including whether the sentence includes a suspended sentence, probation, or direct commitment to community corrections;
3. whether the person is a credit restricted felon; and,
4. specific reasons for revocation resulting commitment to the IDOC if probation, parole, or a community corrections placement has been revoked, if applicable (IC § 35-38-1-31).

## **Community Corrections Program**

A community-based program that provides preventive services, services to offenders, services to persons charged with a crime or an act of delinquency, services to persons diverted from the criminal or delinquency process, services to persons sentenced to imprisonment, or services to victims of crime or delinquency, and is operated under a community corrections plan of a county and funded at least in part by the state subsidy (IC §11-12-1). Community corrections operate in every Indiana County in some capacity, except Benton, Franklin, and Newton counties.

## **Community Transition Program (CTP)**

This program is intended to give an incarcerated offender a head start to reentry. Offenders committed to the IDOC may be assigned to their county community corrections program, probation, or court program for a period of time prior to their release date; the period is determined by the offender's offense level (IC § 11-8-1-5.6).

## **Credit Time**

The sum of a person's accrued time, good time credit, and educational credit (IC § 35-50-6-.05).

## **Day Reporting**

A form of supervision in which a person is required to report to a supervising agency at a designated time. Other conditions may apply, including a curfew and home confinement.

## **Discharge**

Termination of commitment to the IDOC (IC § 11-8-1-8).

## **Disposition**

When a case comes to a close through one of many possible methods.

## **Education Credit**

Reduction in the term of imprisonment or confinement awarded for participation in an educational, vocational, rehabilitative, or other program. The term includes an individualized case management plan (IC § 35-50-6-0.5).

## **Electronic Monitoring**

Community supervision using an electronic monitoring device (IC § 35-38-2.5-3).

## **Failure to Appear (FTA)**

A person who, having been released from lawful detention on condition that the person appear at a specified time and place in connection with a charge of a crime, intentionally fails to appear at that time and place. (IC § 35-44.1-2-9).

## **Family and Social Services Administration (FSSA), Department of Mental Health and Addictions (DMHA)**

The division of FSSA that is responsible for setting the standards of care for mental health and addictions services in Indiana. DMHA is responsible for certifying all community mental health centers and addictions treatment providers in the state. The division also operates the state's six long-term psychiatric hospitals and provides funding support for mental health and addictions programs throughout Indiana.<sup>43</sup>

## **Forensic Diversion**

A program designed to provide an adult an opportunity to receive community treatment addressing mental health and addiction and other services instead of or in addition to incarceration (IC § 11-12-3.7-4).

## **Guilty Plea/Admission**

Cases in which the defendant pleads guilty to an offense.

## **Habitual Offender (HO)**

A person who has previously been convicted of the required number (usually 2 or more) of unrelated felonies in accordance with IC § 35-50-2-8 and results in an enhanced sentence.

## **Indiana Department of Correction (IDOC)**

State agency created, organized, and operationalized by Indiana Code Title 11; responsible for serving the best interests of its committed offenders and society (IC § 11-8-4-1). Per statute, the IDOC is responsible for managing a substantial amount of programs and services, including the Indiana sex and violent offender registry. The IDOC is also responsible for inspecting county jails annually to ensure jails are in compliance with jail operations standards.

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<sup>43</sup> For more information about FSSA DMHA, please go to [on.in.gov/a2rll](http://on.in.gov/a2rll)



## **Jail Inspection Report**

The report produced following an on-site visit to a jail by an inspector serving as an agent of the commissioner of Sheriff and Jail Operations under the Operations division of the IDOC. The report contents are based on the statewide jail standards for county jails (210 IAC 3).

## **Jail**

A place for confinement of people arrested or convicted of a crime. In Indiana, there are 91 county jails; Ohio County does not have a jail. Indiana jails are used primarily to:

- detain arrestees;
- hold individuals who have not yet been sentenced;
- house misdemeanants and felony level 6 diversion offenders who, per statute, may not go to the IDOC except under limited circumstances.

## **Judiciary**

Also known as the judicial system or the court system.

## **Misdemeanor**

A violation of a statute for which a person may be imprisoned for no more than one year and is classified by levels A through D (IC § 33-23-1-9).

## **New Commitment**

A new criminal conviction resulting in a new sentence to be carried out at least in part with the IDOC.

## **New Filing**

A new criminal case filed with the court.

## **Operational Capacity**

The total bed capacity of an IDOC facility. The capacity of a facility is the number of beds authorized for the safe and efficient operation of the facility.

## **Parole**

The conditional release of a person convicted of a crime prior to the expiration of that person's term of imprisonment, subject to both the supervision of the correctional authorities during the remainder of the term and a resumption of the imprisonment upon violation of the conditions imposed.

## **Pretrial Release**

An arrestee who has been released from jail prior to trial or sentencing. Release generally includes some type of pretrial supervision requirement.

## Probation

The process by which a criminal sentence is suspended, and the defendant is released into the community subject to conditions ordered by the court.

## Problem-Solving Court

Started in 1990, these courts work with offenders that have specific needs and problems, which are not adequately addressed in traditional courts. They seek to benefit the offender, as well as the victim and society. Each court is developed to meet the needs of the locality it serves, and these courts can focus on—but are not limited to—drug use, mental illness, domestic violence, and veterans.<sup>44</sup>

## Prosecutor

An elected official or deputy of one who is vested with the authority to institute legal proceedings against a person who has allegedly violated Indiana law within their respective jurisdictions. Prosecutors are elected by county. Dearborn and Ohio counties share a Prosecutor.<sup>45</sup>

## Public Defender

An attorney engaged in the legal defense of an indigent defendant.

## Recidivism

In this report, recidivism data was only discussed in the section about the IDOC. The IDOC defines recidivism as an offender's return to IDOC incarceration within three years of release from a state correctional institution.<sup>46</sup>

## Recovery Works

Provides vouchers to the DMHA program that certifies mental health and substance abuse providers in the community to treat individuals involved in the criminal justice system. The voucher program was designed to cover mental health and/or substance abuse treatment costs for participants without insurance or Medicaid. Participants must be over the age of 18, be a resident of Indiana, have a total household income equal to or less than 200% of the federal income poverty line, and have entered the criminal justice system with a current or prior felony conviction.<sup>47</sup>

## Release

For the purposes of this report, this is when an offender leaves a correctional facility, not including a temporary absence.

## Revocation

Termination of probation supervision, community corrections supervision, or parole supervision as a result of a violation of the supervision conditions.

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44. For more information about Indiana's problem-solving courts, please go to [on.in.gov/pk959](https://on.in.gov/pk959)

45. For more information about Indiana Prosecutors, please go to [on.in.gov/3vlls](https://on.in.gov/3vlls)

46. For more information about the IDOC's recidivism rates, visit [on.in.gov/y4nm7](https://on.in.gov/y4nm7)

47. For more information about Recovery Works, please visit [on.in.gov/13s9g](https://on.in.gov/13s9g)

## **Sentence Modification**

A process by which the court may change the sentencing placement; reduce or suspend a defendant's sentence and impose any sentence that the court could have given the defendant at the time of the original sentencing. Plea agreements cannot be modified without the consent of the prosecuting attorney. A defendant may only make one modification request per year and a total of two modification requests during the entire sentence (IC § 35-38-1-17).

## **Service Provider**

A non-criminal justice agency that provides mental health and/or addiction services to justice-involved individuals.

## **Technical Violation**

A violation of a condition of probation. (IC § 35-38-2-3)

## **Violation-New Commitment**

Violating the terms of community supervision by obtaining a new criminal conviction resulting in a new sentence to be carried out at least in part with the IDOC.

## **Work Release**

An offender placement where the individual lives in a facility and is permitted to leave the facility to work, seek employment, attend school, and receive medical attention. The offender may also earn passes to visit with family or may be granted other passes for special circumstances. These facilities typically offer a number of programs in-house to aid in offender rehabilitation and reentry.