

**Behavioral Health Sub-Committee  
Criminal Justice Policy Advisory Commission  
Criminal Justice Policy and Planning Division  
Connecticut Office of Policy and Management**

**Minutes**

**July 5, 2012 9:00 – 11:00 am (Russell Hall, CVH)**

**In attendance:** Michael Aiello, Brian Austin, Dan Bannish, Martha Brown, Linda DeConti, Erin Leavitt-Smith, Loel Meckel, Michael Norko, Colette Orszulak, Louise Pyers, Monte Radler, David Rentler, Sally Zanger

- 1. Introductions:** no new attendees
- 2. Review of minutes of April 5, 2012 -** Approved without amendment
- 3. Additions to agenda:** Louise Pyers asked to add an item regarding CIT in DOC (see #8 below)

**4. BH program updates:**

A. Forensic funds initiatives –Loel Meckel reported:

All of the additional funds that DMHAS received for SFY12 have been implemented to expand diversion, reentry, transitional housing, housing services and rental supports. JDSA is a new program that started in the Hartford courts in October 2011 and provides immediate access to residential detox and substance abuse treatment at arraignment. In the 8.5 months of operation the court diverted 65 low risk defendants who would otherwise have been incarcerated on a bond. Of the 37 defendants whose cases were disposed, 70% were never admitted to jail. Early identification of inmates with serious mental illness improves continuity of care especially for inmates with a brief stay in DOC. DMHAS Forensic Services staff met with UCHC-CMHC staff to improve communication between Jail Diversion and mental health staff in jail about inmates with SMI.

Dan Bannish noted that when individuals with substance dependency are not diverted, they often require detox in DOC and can wait for perhaps 2 months for a community bed and release through jail re-interview. If there were more community residential addiction treatment beds, more unsentenced, low bond offenders who pose little threat to public safety could be released. Sally Zanger reported that for individuals who are denied benefits after going through SOAR process, the CLRP and Legal Rights are helping them with appeals.

B. Rapid Treatment Option – no new developments.

C. Outpatient restoration – no new developments.

D. DOC SOAR Initiative - Loel Meckel reported:

The New Haven initiative, which also includes employment services, is fully implemented. The SOAR case manager has submitted 35 SSI/SSDI disability income applications and 11 have been approved, a few have been denied and are being appealed and the rest are pending. Expansion efforts are occurring in Norwich and Waterbury and agencies in Middlesex County are interested in implementing SOAR. Bridgeport agencies received a grant to implement SOAR.

E. Other:

a. Alternative to incarceration for high cost inmates: Dan Bannish reported that many individuals with significant medical needs (e.g., dialysis, chemotherapy, quadriplegia, etc) are spending more than 2-3 months in DOC post-arraignment. There are also some offenders with

serious medical conditions serving mandatory minimum sentences for DUI convictions. It is hoped that the newly legislated home confinement potential will reduce the numbers of these individuals in DOC. Cases of offenders with serious medical issues could be identified and reviewed as part of the bail commissioner's assessment. The DOC is meeting with Katie Heffernan from the Public Defenders Office to determine how medically compromised offenders who do not pose a serious threat to the community can be identified at court and diverted. This could help reduce the risk of problems associated with temporarily transferring medical care for complex medical issues. Aside from medical complications this could be a disparity issue in that offenders who can afford bond would not have to transfer their medical care. Monte Radler also noted that the PD offices could help if surveyed.

b. 17a-693 Order for examination for alcohol or drug dependency: A meeting will be held among representatives from Division of Forensic Services, CSSD, State's Attorney and Public Defender to discuss.

c. Request from Chief State's Attorney's office for guidance with people whose hoarding leads to unsafe living conditions: DFS will survey the DMHAS LMHA CEOs about their involvement. Sally Zanger reported that the CLRP gets these cases from housing agencies (approximately 1-2 per year)

**5. DOC BH updates:** Dr. Bannish reported the following:

A. DOC MH – general: The number of inmates with SMI has decreased over the last few years. As a result there has been a decrease of one mental health unit at Garner. In SFY12 DMHAS received approximately 165 referrals of discharging sentenced inmates with SMI, compared to approximately 215 in SFY11 and approximately 400 in SFY06 and SFY07. This decline is not due to a decline in identifying or reporting SMI individuals; but rather reflects a genuine decrease in the SMI population in DOC. Initiatives funded as a result of CJPAC such as CORP, CIT, ASIST, Jail Diversion, MH Bail commissioners, and MH parole and probation have provided a spectrum of services that have contributed to the reduction in numbers. Of note is that the discharging DMHAS target population now has included more SMI offenders with behaviors associated with criminogenic thinking and lifestyle.

B. Other DOC f/u reports:

1. Early release for inmates w/ SMI – Dan Bannish discussed the problems associated with a subgroup of offenders with low bonds who have multiple court appearances but who are difficult to engage in treatment. It was suggested that a different sentencing mechanism akin to transitional supervision that could be short term but allow for remand rather than court involved violation could be beneficial to engaging and managing this difficult cohort.

2. TBI prevalence – no report

3. SO community beds RFP – The January Center is now full. A SO strategic plan has been drafted and is expected to be finalized before the next meeting of the BHS

4. CJ-DATS research – no report

5. Concept paper re high-cost offenders: see 4.E.A. above

C. Discharge planning – An ASIST Home pilot has housed 15 people with SMI in Hartford. DOC will be tracking these people to see if it can be demonstrated that RAP would be cost effective. ASIST is expanding to Manchester and Willimantic/Danielson, and new sites are being examined. DOC is also setting up a housing screening tool.

D. Other – Use of methadone maintenance is expanding to York and Hartford CC prior to discharge.

DOC is developing a pilot with ValueOptions and DSS for SMI inmates on G block at Osborne who are high Medicaid utilizers in the community. The goal is for the target group of individuals to become

better consumers of health care by learning about their chronic conditions and developing the skills necessary to address those conditions.

ASIST has committed to extending housing assistance for up to 24 months for its target population in anticipation of RAP certificates even if parole or probation supervision ends during that time. Twenty-four slots are now available for 24 months.

**6. CJPAC – next meeting September 27**

**7. Interest Area updates**

A. Housing/employment – no report

B. BH Services/system barriers – no report

C. Raise the Age – Juvenile court changes – no report

**8. Other agency updates** – Louise Pyers reported that the 2013 international CIT annual convention will be meeting at the Hartford Convention Center, with 1200 attendees from all over the world. Given the extraordinary partnerships that have been developed in CT, we should think about presenting several of these for workshops. The meeting is planned for Oct 14-16, 2013.

**9. Other Items** – no report

**10. Behavioral Health Subcommittee Quarterly Meetings**

A. October 4, 2012 [9:00am – 11:00am, Russell Hall, 2<sup>nd</sup> floor, CVH Campus]

B. January 3, 2013 [9:00am – 11:00am, Russell Hall, 2<sup>nd</sup> floor, CVH Campus]

C. April 4, 2013 [9:00am – 11:00am, Russell Hall, 2<sup>nd</sup> floor, CVH Campus]

D. July 11, 2013 [9:00am – 11:00am, Russell Hall, 2<sup>nd</sup> floor, CVH Campus]

**11. CJPAC mtgs** scheduled for 10/25, 11/29, 12/27.