

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

September 1, 2022
10:00 – 11:00 am
(via TEAMS)

Minutes

In attendance: Christopher Burke, Thomas Burr, Judy Dowd, Gail Hardy, Kirk Lowry, Michael Norko, Monte Radler, David Rentler

1. Minutes of the July 7, 2022 meeting were approved without additions or corrections.
2. Discussion of resuming criminal justice operations, inter-agency communications and preparation.

DMHAS report from Michael Norko and Chris Burke:

Competency to stand trial evaluations have been keeping pace with requests, although with some delays in Bridgeport. A new social work position has been hired for that office to help deal with the high volume of evaluation orders. Evaluations being conducted in the community offices and DOC facilities through telehealth and in-person evaluations. Telehealth evaluations are now being successfully completed on a consistent basis, with significant assistance from Dr. Burns. There will be a meeting September 2 with DOC to discuss future use of telehealth for competence evaluations. There was a surge in admissions to Whiting for competency restoration a couple months ago, but that was managed successfully without going over census.

The Enhanced Forensic Respite Bed (EFRB) pilot program in Bridgeport has now admitted 13 clients so far. In none of these cases was a competency to stand trial evaluation ordered after referral to the respite bed program. We are thus meeting the primary goal of this program, which was to reduce the use of the competency process for defendants with only misdemeanor charges. The legislature funded an expansion from 3 beds in Bridgeport to a total of 15 in 3 programs. We are working to expand the Bridgeport program and create programs in New Britain and New Haven, other courts with high volumes of misdemeanor defendants. The DMHAS Research Unit is conducting an outcome analysis of the pilot and has already been interviewing clients. The analysis will include clinical, housing, and legal outcomes (disposition of charges, re-arrest) as well as client satisfaction. We hope to open the 15 beds in FY23, which should provide sufficient data to assess the utility and efficiency of this diversion process for defendants who need treatment (but for whom the state has limited interest in prosecution).

Pretrial Intervention Program (PTIP) referrals have now leveled off at a pace that the providers are able to manage. As of April 1, we are transitioning to the new 12-session programs, with previous clients continuing to complete the 10- and 15-session programs. We are preparing a new RFP for contracts anticipated to begin in July 2023 that will only need to include 12-session programs, as the clients assigned prior to April 1 will have completed their programs by then.

An ABH Case Manager has been hired to work with PSRB clients who are on TL and CR. Ayana Smith is located at CVH and has been providing additional support to four clients so far, 3 on CR and 1 on TL. Referrals come from the community providers who identify clients who can use additional support.

The new re-entry program (funded through a TTI-NASMHPD grant) with Alliance for Living, Safe Futures, and York Correctional Institution (YCI) is doing education and trauma work. The program is going well, and the partners have requested that we fund the program after the grant ends December 2022. We are making efforts to do so.

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A diversion program funded through a TTI-NASMHPD grant provides clinical support for six police departments along the shoreline during overnight hours via face-to-face or telehealth contact with a clinician. The program seems to be going well; we will need to assess the value and possibility of sustaining the program once the grant expires.

The DMHAS Division of Forensic Services has posted positions for two social workers to re-establish the Conditional Release Services Unit (CRSU). The CRSU will resume responsibility for attending all-provider meetings for insanity acquittees, completing six-month reports to the PSRB, and testifying at hearings. This will relieve the Offices of Forensic Evaluation of these responsibilities, so they can focus on competency evaluations, reports, and testimony.

Division of Criminal Justice report from Gail Hardy:

The new court term started August 30, 2022. Chief State's Attorney Pat Griffin met with the states' attorneys to review the backlog of cases and efforts to work through them. In Hartford alone, there are 100 pending homicide cases; five judges have been assigned to work through the cases. There are also significant backlogs in Milford, Stamford, and Waterbury to be addressed.

Parole report from David Rentler:

Rhianna Gingras was appointed as Director in mid-August. The most active project at this time is the 1115 waiver transition. Parole has nearly completed a contract with Connecticut Renaissance, Inc. for a new 10-bed male residential substance program in Waterbury with APT. Parole is closely monitoring third party reviews that are part of the 1115 waiver to assess needs around other levels of care.

CLRP report from Kirk Lowry:

CLRP represents DMHAS patients in all inpatient facilities in the state. Whiting is doing a good job with competency to stand trial restorations, such that CT compares favorably to other states in this activity. One concern is that it sometimes takes too long for someone to be found not competent and not restorable under 54-56d(m) when there are indications that such will be the conclusion. CLRP engaged in significant advocacy work on SB 450 this past legislative session (now PA 22-45). They have also filed a complaint with the US Department of Justice raising concerns that the integration requirements of the Americans with Disabilities Act conflict with processes articulated in state statute for community reintegration of insanity acquittees. CLRP is pleased that DOC transfers to Whiting and CVH are now occurring according to the requirements articulated in *Vitek v Jones*, 445 US 480 (1980). CLRP continues to be interested in the use of Track II (54-56d(h)(1)), especially for misdemeanor defendants. Michael Norko noted that the Bridgeport EFRB was designed to address this concern, and was stimulated by the 2020 [Just and Well](#) report and CT judicial data showing that in CY 2019 43% of defendants referred for competency to stand trial evaluation had only misdemeanor charges.

NAMI-CT report from Thomas Burr

NAMI-CT is preparing their legislative agenda for 2023. Thomas noted how helpful Kathy Flaherty, Executive Director of the CLRP, is to him when they have questions. Thomas informed the group about their Annual Education Conference to be held Oct 21 virtually on the theme of "Building Partnerships for Better Mental Health." He invited members of the group to email him for more info or to be added to the NAMI-CT listserv.

Public Defender's office report from Monte Radler:

Monte plans to have his successor attend the next meeting of the group. He asked about progress toward naming the members of the PSRB Working Group, as directed in PA 22-45, Sec. 6. Michael

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Norko replied that the members are being recruited and letters from Commissioner Navarretta are likely to be sent to the individuals within the next month.

OPM: No updates to report.

- 3. Other agency updates: none

- 4. CJPAC: Next meeting September 29, 2022

- 5. Scheduled meetings of the Behavioral Health Subcommittee:
 - November 10, 2022
 - January 12, 2023
 - March 9, 2023
 - May 11, 2023