

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

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

Minutes

In attendance: Michael Aiello, Christopher Burke, Thomas Burr, Gail Hardy, Kirk Lowry, Michael Norko, Bill O'Connor, Monte Radler

1. Minutes of the September 1, 2022 meeting were distributed but not reviewed; they will be reviewed and approved at the next meeting.
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 occurring at a pre-pandemic pace. We are making progress on reducing delays in Bridgeport with the addition of a new social worker to that team. Evaluations are being conducted in the community offices and DOC facilities (the latter about half telehealth and half in-person evaluations). There was a meeting with DOC, which confirmed their commitment to future use of telehealth for competence evaluations. The new increased pace has led to a several week increase in admissions to Whiting for competency restoration, which is keeping the competency units full.

The Enhanced Forensic Respite Bed (EFRB) pilot program in Bridgeport will expand from 3 beds to 8 beds this fiscal year. Programs in New Britain and New Haven will also be developed this FY, bringing the total to 15 beds in the state. We are also discussing use of these beds for outpatient restoration, and transfer from inpatient to outpatient restoration for appropriate clients.

Pretrial Intervention Program (PTIP) referrals continue, and are being managed by the providers. 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. We are monitoring the funds transferred from Judicial, which have been decreasing for the last several months. It is not clear at this point whether that is because there are more fees being waived, or fewer clients being referred, some combination of both.

The ABH Case Manager, Ayana Smith, continues to work with PSRB clients who are on TL and CR. 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 hope to be able to do so.

The DMHAS Division of Forensic Services has hired two social workers to re-establish the Conditional Release Services Unit (CRSU), who have start dates later this month. 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. The CRSU has assisted in at least two recent cases of acquittees on CR who were having some difficulties for whom additional community-based services were provided and re-

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hospitalization at Whiting was avoided. This is the kind of work we hope to continue and expand with the CRSU.

In some areas, jail diversion numbers are decreased. Mike Aiello noted that the clients seen by CSSD are different now, with higher bonds, higher charges. In multiple ways, the lower level cases are being moved out of the CJS. This may be consistent with decreased jail diversion cases.

Division of Criminal Justice report from Gail Hardy:

Trials are increasing across the state, including in Hartford, where additional judges have been assigned to work on the backlog of cases. Chief State's Attorney Pat Griffin is interested in expanding the Early Screening and Intervention Program (ESI) from the current 6 courts to all 13 jurisdictions. He will be meeting with Chief Public Defender TaShun Bowden-Lewis to discuss. Monte Radler noted some historic reservations about ESI from public defenders for some clients in the past. Further discussion ensued about the interplay of the Treatment Pathways Program (TPP), ESI, Supervised Diversion Program (SDP), ASIST, and Jail diversion. Mike Aiello noted an opportunity for us to better coordinate these efforts among the various agencies.

CSSD report from Michael Aiello:

CSSD is proposing to use unspent ARPA dollars to expand their housing efforts to the pre-trial population, which has the greatest current need among all the disciplines of CSSD. They will be establishing twelve 2-bedroom apartments to house 24 clients for up to 4-6 months at a time, with appropriate more permanent housing referrals to follow. They would have enough resources to fund this program for two years, which would allow them to assess its outcomes.

CLRP report from Kirk Lowry:

Kirk noted four current concerns on the CLRP agenda: 1) a recent client found not competent and not restorable (CGS 54-56d(m)), whom the superior court sent back to Whiting despite their report that the client should be released. This resulted in a probate court hearing, after which the client was released, with some significant discussion about the burden of this unnecessary additional hospitalization and process. 2) They are glad to see that Whiting is planning to use the new statute effective 10/1/22 (PA 22-45, Sec. 8) that allows them to transfer PSRB patients to Dutcher without PSRB hearing/approval. They will be monitoring how this proceeds and how the PSRB responds to these transfers. 3) Concern about access to religious services at WFH, with only the MOA with CVH to share the chapel and chaplains (but only one current chaplain at CVH). They are pleased that Whiting is pursuing hiring their own chaplain. On the same subject of religious services, CLRP is concerned about a recent PSRB decision to deny a curfew extension for the purpose of attending religious services for an acquittee on conditional release. 4) They continue to address ADA and Rehab Act community reintegration work. A complaint with the DOJ is under DOJ review. They are assessing a class of acquittees in Dutcher related to reintegration. For example, they are concerned about acquittees with full Level 4 privileges who are waiting for Temporary Leave applications/approvals.

NAMI-CT report from Thomas Burr

NAMI-CT has three major policy goals in its work: improving care, intervening early, and diversion from the criminal justice system. Thomas expressed appreciation for the work that is being done by this group to address these areas. He also noted the willingness of NAMI-CT to offer political support for new initiatives in these directions.

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Public Defender's office report from Monte Radler:

Bill O'Connor will be taking over the representation of insanity acquittees as Monte has retired. Monte is looking forward to the meetings of the PSRB Working Group, as directed in PA 22-45, Sec. 6. Michael Norko noted that the first meeting will be November 22, 2022. Monte also noted recent increases in calls from civil patients who were found not competent and not restorable under 54-56d(m). Many of them are asking why they are still in the hospital and do not understand the process that led to their current situation. There are 40 new public defenders who will be attending a training next month that Bill O'Connor will be providing on mental health.

Other agency updates: none

3. CJPAC: Next meeting early December, 2022 (date TBD)

4. Michael Norko observed that our discussions today went beyond the one hour assigned. These were useful and seem to reflect the increased amount of work that is occurring as our systems return to more normal operations as we begin to emerge from pandemic restrictions. We decided to schedule future meetings for 90 minutes, from 9:30 to 11:00 on the dates listed below.

Scheduled meetings of the Behavioral Health Subcommittee:

- January 12, 2023
- March 9, 2023
- May 11, 2023
- July 13, 2023
- September 14, 2023
- November 9, 2023