

# Mental Health Case Management Pilot Project

Judicial-CSSD Agency Update  
CJPAC Meeting

June 10, 2010

# Project Need

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- ▶ Research has shown that people with serious mental illness are over-represented in the CJ system.
- ▶ In Connecticut:
  - ▶ 1,514 offenders were released from DOC custody in 2005 with a mental health score of 4 or 5 and over 40% were resentenced to prison within 36 months following release (OPM, 2010)
  - ▶ 24% of jail intakes had undetected affective disorders (Ford, Trestman, Wiesbrock, & Zhang, 2009)
  - ▶ 23% of probationers have a serious mental illness (Fulton, 1996)
- ▶ Offenders with SMI also have other significant needs including poverty, homelessness, unemployment, and stable mental health and/or substance abuse treatment.



# CSSD's Response

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- ▶ Piloted the Mental Health Case Management Project (MHCM) in March of 2007
- ▶ Project goal was to decrease recidivism with intensive supervision. This would allow for more in-depth assessments, more appropriate service referrals, and more positive contacts with clients and service providers
- ▶ Consisted of 10 MHOs spread over 8 offices (Bridgeport, Hartford, Middletown, New Britain, New Haven, New London, Norwich, and Waterbury)
- ▶ MHOs had caseloads no higher than 35 clients
- ▶ MHOs had specialized training relevant to this population
- ▶ High contact standards
  - ▶ 3 face-to-face contacts per month with 1 in-home contact
  - ▶ At least 1 collateral contact per month with service providers



# Evaluation Summary and Results

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- ▶ Evaluation studied 710 mental health probationers from March 2007 through September 2008 and followed them for one year
- ▶ Created a comparison group of similar probationers who did not participate in the MHCM project
  
- ▶ Mental Health clients were older (70% were over 30), single (5% were married), under-educated (58% did not have a high school diploma), unemployed (only 12% had jobs), and habitually criminal (they averaged 14 arrests and only 5% were first time offenders)
- ▶ 27% of the clients were female
  
- ▶ Arrests were significantly reduced by the MHCM project
  - ▶ 30% of the MHCM group were rearrested versus 41% of the comparison group
- ▶ There were no differences in technical violation rates
  - ▶ 10% of MHCM group versus 8% of the comparison group



# Conclusions

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## Conclusions

- ▶ Project targeted the appropriate probationers
- ▶ MHO caseloads were at or near capacity throughout the study period
- ▶ Arrest rates were significantly lower for MHCM clients than the comparison group
- ▶ MHOs attributed success to low caseloads, specialized training, and supervisory support
- ▶ MHOs exhibited therapeutic supervision styles

## Recommendations

- ▶ More dual diagnosis and inpatient service options
- ▶ The availability of clinical advice for MHPOs to consult with when they had questions or concerns about specific clients
- ▶ CSSD should consider expanding this project to all probation offices

