# April 4, 2013 9:00 – 11:00 am (Russell Hall, 2<sup>nd</sup> Floor Conf Rm, CVH)

### <u>Minutes</u>

**In attendance:** Michael Aiello, Martha Brown, Jessica Cabanillas, Ed Mattison, Loel Meckel, Michael Norko, Louise Pyers, Monte Radler, Sally Zanger, Dan Bannish

- 1. Introductions no new members/attendees
- 2. Review of minutes of January 3, 2013 meeting: approved, with edits offered by Louise Pyers
- 3. Additions to agenda:
- 4. BH program updates

A. Forensic funds initiatives: Loel Meckel reported that a clinician was hired for the New Haven CIT program. DMHAS is awaiting a decision on the SFY14 budget to determine effects on programming.

Michael Aiello reported that following the loss of the ASIST clinician in New Haven, CSSD issued an RFP, received proposals, and expects to select a new ASIST provider soon for New Haven.

- B. SOAR Initiative: no updates
- C. Other
- a. Alternative to incarceration for high cost inmates: Dan Bannish reported that the nursing home being established by DMHAS and DOC is proceeding and expects to begin admitting patients soon. Patients must be medically compromised to be eligible for admission as with any nursing home and will be carefully screened to minimize risk to the community and other nursing home residents.
- b. 17a-693 Order for examination for alcohol or drug dependency: Michael Norko reported that the new DSM V, to be issued in May, has eliminated the diagnosis and concept of substance dependence. Substance use disorders will be conceived as on a continuum of severity and classified as mild, moderate, or severe. This change raises two issues relevant to this committee. One is the issue of a person's physiological and psychological relationship to substances of abuse as a mitigating factor for culpability for their offense. The second issue is that CGS 17a-691 17a-701make eligible for diversion from prosecution or incarceration certain defendants if, based on an evaluation by the DMHAS Office of Forensic Evaluations, the court find them to be alcohol or drug "dependent" as defined in the DSM. DMHAS provided testimony to the Legislative Public Health Committee recommending statutory changes to define "dependent" as meeting DSM criteria for "moderate to severe" substance use disorder.

- c. Consideration of MAT/methadone in jails for short term prisoners: Several members reported that DOC plans to implement methadone provision for accused prisoners who are expected to remain incarcerated for a short time to reduce the risk of relapse on opiates following release from custody. The New Haven Correctional Center pilot is delayed because of licensing issues. DOC will follow up on this with DPH.
- d. Request from Chief State's Attorney's office for guidance with people whose hoarding leads to unsafe living conditions: nothing new to report

### 5. DOC BH updates:

### A. General

DOC is working with the Public Defenders office to identify offenders with serious medical conditions for diversion. There have been several occasions where offenders have required hospitalization for medical issues or transfer of specialty care (eg cardiac, oncology, etc) upon entry to DOC. Alternatives to incarceration for those with low bonds are being considered.

## B. Discharge planning

It has become clear that inmates with psychiatric disabilities who are being discharged have greater needs for more coordinated housing/MH/supervision services than in the past. This is good news in the sense that there are fewer inmates whose offenses were primarily psychiatrically related and those incarcerated tend now to have stronger characterological (Axis 2) features requiring more attention to criminogenic factors.

### 6. CJPAC: 2013 schedule TBD

### 7. Interest Area updates

- A. BH Services/system barriers -
- 1) Updates re ROI Al Bidorini, DMHAS, who led this effort is retiring. A replacement to continue this effort has not been identified.
  - 2) Rx for d/c'd inmates/detainees: nothing new
- B. Raise the Age Juvenile court changes: A recent court case required a competency to stand trial evaluation for an 18 y/o in Juvenile Court. These evaluations will be provided by CSSD contractors per the new juvenile competency to stand trial statute.
- 8. Other agency updates Louise Pyers reported that CABLE, Inc. is reviewing the police department CIT policy template with the assistance of an attorney.

#### 9. Other Items

Michael Norko reported that a gun violence bill was passed yesterday in the state legislature and is expected to be signed by the Governor. Provisions of the bill related to mental health include 1) extension from 12 months to 5 years for the prohibition of gun ownership or purchase of ammunition by persons committed to a psychiatric hospital by probate court, 2) prohibition for 6 months of gun ownership or

purchase of ammunition by persons voluntarily admitted to a psychiatric hospital (but not if only for alcohol/drug dependency reasons), 3) establishment of a task force to study the provision of behavioral health services in the state and analyze and make recommendations on a variety of topics including employing the use of assisted outpatient behavioral health services and involuntary outpatient commitment as treatment options and requiring disclosure of communications by mental health professionals concerning persons who present a clear and present danger to the health or safety of themselves or other persons. The task force is to submit a report on its findings and recommendations by 2/1/14. Persons who are committed to a psychiatric hospital by a Physicians Emergency Certificate were not included in the prohibition, possibly because a federal circuit court determined that a this process does not include due process which is needed to seized firearms. The attached 4-5-13 DMHAS Legislative Update has more detail on the mental health issues in the gun violence bill.

Loel Meckel reported that since the firearm search and seizure statute, CGS 29-38c, became effective 10/1/99, the Judicial Branch has forwarded copies of the warrants to DMHAS. A court hearing is held within 2 weeks following the seizure to determine if the firearms should be returned. Jail Diversion staff can be present at the hearing to evaluate the subject of the seizure for imminent risk as required by the statute. DMHAS is aware of approximately 700 warrants that have been executed to date the rate at which they have been issued has increased significantly since early Fall 2012. The vast majority of seizures involve subjects who are a risk to themselves rather than others and very few of all subjects appear to have a serious mental illness. Louise Pyers will ask her contacts in police department for their practices in identifying gun possession and using the Firearm Search and Seizure Warrants.

10. Quarterly Behavioral Health Subcommittee Meetings:

Next Meeting
January \_\_\_\_, 2014 9:00am – 11:00am, Russell Hall, 2<sup>nd</sup> floor, CVH Campus