Psychiatric Security Review Board

At a Glance

ROBERT B. BERGER, ESQ., Chairman

Established – 1985

Statutory Authority – Conn. Gen. Stat.

Sec. 17a-581

Central Office – 505 Hudson Street, First Floor,

Hartford, Connecticut 06106

Number of Employees – 4

Recurring Operating Expenses - \$314,742

Organizational Structure – One Administrative Unit

Mission

To protect the safety of Connecticut citizens and certain individuals by ordering appropriate treatment, confinement or conditional release of persons accused of crimes but found not guilty by reason of mental disease or mental defect.

Statutory Responsibility

The Board, through an administrative hearing process, determines the level of supervision and treatment for an acquittee deemed necessary to protect society. The Board, based on its legal findings on the danger that an acquittee poses, due to his/her mental condition, orders confinement in a maximum-security facility, orders confinement at a psychiatric hospital, approves temporary leave for a confined acquittee, orders placement in the custody of the Commissioner of Mental Retardation or grants conditional release. In addition, the Board makes recommendations on the issue of discharge or continued commitment to the Superior Court.

Public Service

The general public is the beneficiary of the agency's work. Effectiveness of the agency's work is measured by the recidivism rate of this criminal population. During this fiscal year, there was one motor vehicle violation by a conditionally released acquittee, and one acquittee escaped from custody at Connecticut Valley Hospital, resulting in a felony conviction by the Superior Court. This fiscal year, there were no felony or misdemeanor arrests of acquittees on conditional release.

During 2002-2003, 174 persons were under the Board's jurisdiction. This fiscal year, eight persons were committed to the Board by the Superior Court. In addition, the Superior Court extended a total of ten acquittees' commitment terms a total of 12 times. Eight persons have been removed from the Board's jurisdiction; six acquittees' commitment terms expired and two acquittees were discharged by the Superior Court.

In 2002-2003, the Board held 160 hearings and 37 case conferences resulting in 164 orders being issued. There was a eight-percent denial by the Board of applications for a change in placement or status of an acquittee. The status of the persons under the jurisdiction of the Board as of June 30, 2003 is as follows: 34 percent confined in maximum security at Connecticut Valley Hospital, 49 percent confined in a non-maximum security setting at Connecticut Valley Hospital, 16 percent on conditional release, and one percent in custody of the Commissioner of Mental Retardation. Of the 85 acquittees confined in a non-maximum security setting at Connecticut Valley Hospital, 27 percent have some access to the community via temporary leave. The distribution of the acquittee population between the various placement settings has again remained steady; however, the number of acquittees on temporary leave has dropped by four percent.

Improvements/Achievements 2002-2003

- Hosted focus groups with community service providers, direct staff and administrators, to identify systems issues to improve effectiveness and efficiency of the conditional release program.
- Held a series of workshops for community service providers and their supervisors to educate and assist in
 their ability to understand legal issues of the Board, including submitting applications to the Board, the
 Board hearing process and testifying and reporting to the Board.
- Drafted a conditional release procedure manual in collaboration with the Department of Mental Health & Addiction Services, to be used as a resource manual by community service providers.
- In collaboration with the Department of Mental Health & Addiction Services, examined the community service system and inpatient services for acquittees and proposed methods to establish a comprehensive inpatient and outpatient system that meets both the clinical and public safety requirements for the management of acquittees.
- Developed and implemented questions to obtain necessary information from Connecticut Valley Hospital
 and community service providers used by the Board to prepare reports to court on the matters of continued
 commitment and discharge.
- Achieved zero percent recidivism of conditional release population, as reflected by no arrests.

Reducing Waste

• Kept spending at allocated levels by streamlining procedures.

Strategic Planning/Business Planning

The Board's strategic plan includes:

- To work, in conjunction with the Office of the Attorney General, to provide improved data to the Superior Court that would protect the interests of society and the acquittees before the court.
- To implement Psychiatric Security Review Board no contact orders on the statewide registry for restraining, protective and no contact orders.
- To facilitate improved Board communication with Department of Mental Health & Addiction Services facilities.

The Board's strategic planning process also includes a collaborative process with the Department of Mental Health and Addiction Services to improve its forensic services to this acquittee population. The goals and objectives include:

- In collaboration with the Department of Mental Health & Addiction Services, to enhance the integration of risk management into treatment plans for acquittees.
- In collaboration with the Department of Mental Health & Addiction Services, to foster the quality of information presented to the Board in order to promote community safety and to reduce recidivism.
- In collaboration with the Department of Mental Health & Addiction Services, to review current monthly PSRB-DMHAS training to identify and streamline the training to provide the community service providers with the most relevant, useful and pertinent information needed to fulfill their responsibilities to the Board and DMHAS.

Information Reported as Required by State Statute

The Board members for 2002-2003 were Robert Berger, Esq., Janet Williams, M.D., Julia Ramos Grenier, Ph.D., John Ryan, Sylvia Cancela and Susan Blair.

The Board is assisted by the Department of Mental Health and Addiction Services in meeting the Affirmative Action requirements of the statute and follows such regulations of the Department of Mental Health and Addiction Services.