

## 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 - \$347,615*

*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 were two motor vehicle violations by conditionally released acquittee(s). There were no escapes from custody at Connecticut Valley Hospital. One acquittee was arrested for a misdemeanor while utilizing his temporary leave, and three acquittees residing in the hospital were arrested on various charges.

During 2004-2005, 177 persons were under the Board's jurisdiction. This fiscal year, five persons were committed to the Board by the Superior Court, and 15 acquittees' commitment terms were extended. Nine persons have been removed from the Board's jurisdiction: three acquittees' commitment terms expired; four acquittees were discharged by the Superior Court and two acquittees died.

In 2004-2005, the Board held 176 hearings and 24 case conferences resulting in 184 orders being issued. There was a three and one half-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, 2005 is as follows: 27-percent confined in maximum-security at Connecticut Valley Hospital, 58-percent confined in a non-maximum security setting at Connecticut Valley Hospital, 14-percent on conditional release, and one-percent in custody of the Commissioner of Mental Retardation. Of the 98 acquittees confined in a non-maximum security setting at Connecticut Valley Hospital, 31 acquittees have temporary leave. The number of acquittees housed in maximum-security has decreased for the past three consecutive years. Over the past year, the number of acquittees on temporary leave has increased by 25-percent from last fiscal year.

### **Improvements/Achievements 2004-2005**

- Maintained quarterly treatment team meetings with community service providers and DMHAS regarding all conditionally released acquirtees.
- Drafted a Conditional Release Procedure Manual in collaboration with the Department of Mental Health & Addiction Services, to be used as a resource by community service providers.
- Revised PSRB training for community providers to reflect recovery-oriented principles.
- Maintained zero percent recidivism of conditional release population, as reflected by no arrests.
- Implemented a pilot program for quarterly reporting on selected conditionally released acquirtees.
- Successfully defended the constitutionality of the Board's statute governing the matter of continued commitment.
- Revised Connecticut General Statutes governing the Board in the matter of eligibility for appointment of certain Board members.
- Increased collaboration with DMHAS regarding a variety of system and communication issues.

### **Reducing Waste**

- Maintained spending at allocated levels.
- Complied with Executive Order Number 30 through the posting of the hearing agenda on the Board's website, thus eliminating the need for hard copies and associated mailing costs.
- Accessed statewide contract for court reporting services, realizing a fifteen-percent savings.

### **Strategic Planning/Business Planning**

The Board's strategic plan includes:

- Working with Department of Information Technology and Department of Public Safety to implement Psychiatric Security Review Board no contact orders on the statewide registry for restraining, protective and no contact orders.
- Increasing outreach to community providers responsible for the delivery of treatment services to acquirtees.
- Upgrading telecommunication system.
- Upgrading office computers and printers in collaboration with information system personnel.
- In collaboration with the Office of Attorney General, defend Connecticut General Statutes and Regulations of Connecticut State Agencies that govern the Board in the matter of the placement of acquirtees in maximum-security.

The Board's strategic planning process also includes a collaborative process with the Department of Mental Health and Addiction Services to address service system issues for this acquirtee population. The goals and objectives include:

- Enhancing integration of risk management practices into treatment plans for acquirtees.
- Streamlining procedures for the submission of conditional release and temporary leave applications.
- Fostering the quality of information and testimony presented to the Board.

### **Information Reported as Required by State Statute**

*The Board members for 2004-2005 were Robert Berger, Esq., Julia Ramos Grenier, Ph.D., John Ryan, Sylvia Cancela and Susan Blair. The position of psychiatrist is currently vacant.*

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.