# The Future is Now Decriminalization of Mental Illness

Improving the Justice System
Response to Mental Illness
and Co-occurring Disorders

Transition to the
National Judicial Task Force to
Examine State Courts' Response
to Mental Illness
May 2020



## Injustice Anywhere

is a

Threat to Justice

Everywhere.

- Martin Luther King, Jr.

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# National Initiative Grant

In spring 2019, the State Justice Institute (SJI) awarded a three-year national initiative grant to the National Center for State Courts (NCSC) to support CCJ and COSCA in its commitment to improve the justice system response to those with mental illness and co-occurring disorders. A National Initiative Advisory Committee was appointed to advise and guide the work ahead. The Advisory Committee consisted of chief justices, state court administrators and trial court leaders, as well as representatives from SJI as ex-officio members. The grant recognized that state court leaders require resources, education and training, data, research, best practices, and other tools to devise solutions to the growing number of ways state courts are impacted by cases involving individuals with behavioral disorders.

In its first year, the National Initiative Advisory Committee provided exemplary leadership to improve the justice system response to mental illness and co-occurring disorders. The NCSC team gratefully acknowledges the support, wisdom, and guidance provided by the CCJ and COSCA Co-Chairs and Advisory Committee members.

### **Advisory Committee Co-Chairs**



Hon. Paul Reiber Chief Justice Vermont Supreme Court (CCJ)



Hon. Milton Mack, Jr.
State Court Administrator
Emeritus
Michigan State Court
Administrative Office
(COSCA)

### **Advisory Committee Members**

Hon. Mary Ellen Barbera Chief Judge, Maryland Court of Appeals (CCJ)

Hon. Nathan Hecht Chief Justice, Supreme Court of Texas (CCJ)

### Nancy Cozine

State Court Administrator, Oregon Office of the State Court Administrator (COSCA)

Hon. Lawrence Marks
Chief Administrative Judge, New York Office of Court
Administration (COSCA)

Hon. Steve Leifman Judge, Miami-Dade County, Florida

Hon. Paula Carey Chief Justice, Massachusetts Trial Court, President, National Association for Presiding Judges and Court

Executive Officers (NAPCO)

### Paul DeLosh

Department of Judicial Services, Supreme Court of Virginia, Past President, National Association for Court Management (NACM)

**Ex Officio Member Hon. David Brewer** Retired Justice, Oregon Supreme Court, State Justice Institute (SJI) Board member

**Ex Officio Member Jonathan Mattiello** Executive Director, SJI

### The National Initiative

Courts across the United States are adapting to the unprecedented public health crisis of COVID-19. As the nation's courts plan to return to full operations, court leaders are confronting immense challenges. And yet, we cannot lose sight of another public health crisis and its impact on the nation's courts, that of the broken mental health system.

The prevalence of mental illness and co-occurring disorders has greatly impacted our nation, each of our states, and our communities, and has had a disproportionate impact on our



nation's courts and justice system. After a series of resolutions adopted in <u>2006</u>, <u>2013</u>, and <u>2016</u>, the Conference of State Court Administrators (COSCA) published a policy paper in 2017, <u>Decriminalization of Mental Illness: Fixing a Broken System</u>, with recommendations to court leaders. The Conference of Chief Justices (CCJ) endorsed the policy paper and its recommendations in 2018. Six recommendations were adopted.

# 1. Encourage policymakers to modify mental health codes to adopt a standard based on *capacity* and not *conduct* for ordering involuntary mental health treatment similar to the standard for court-ordered treatment of other illnesses.

- 2. Expand the use of Assisted Outpatient Treatment (AOT).
- 3. Encourage law enforcement agencies to train their officers in the use of Crisis Intervention Training (CIT).
- 4. Support the adoption of the Sequential Intercept Model (SIM).
- 5. Chief justices and state court administrators should encourage and assist local judges to convene stakeholders to develop plans and protocols for their local jurisdictions.

**6 RECOMMENDATIONS** 

6. Provide information to policymakers that demonstrates how increased funding for mental health treatment can reduce jail and prison cost as has been demonstrated in Miami-Dade County.

This work culminated in Resolution 6, <u>In Support of Improving the Justice System Response to Mental Illness</u>, adopted by CCJ and COSCA at the 2018 Annual Meeting. Resolution 6 identified four areas for further action.

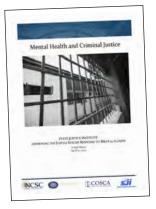
- 1. Developing resources, best practices, and recommended standards.
- 2. Improving caseflow management.
- 3. Promoting education to equip state court leaders with the knowledge, data, and resources necessary to improve responses.
- 4. Building the capacity of state and national leaders to implement reforms.

The justice system has increasingly become the default system for addressing the needs of those with mental and behavioral health issues, and jails are the largest providers of mental health services across the country. In fact, a 2017 report from the Bureau of Justice Statistics based on the National Inmate Survey noted that 44% of jail inmates and 37% of prisoners had previously been told by a mental health professional that they had a mental health disorder. Additionally, young people with serious emotional disturbances in need of treatment are seen regularly in the nation's justice system, with an estimated 70% of justice-involved youths suffering from a mental health disorder. These numbers highlight that mental illness is overrepresented among justice-involved individuals when compared to 2018 estimates of the prevalence of mental illness among the general population:

- ▶ Approximately 19% of adults are living with a mental illness in the United States.
- ▶ Approximately 4.6% of adults had SMI<sup>5</sup> in the previous year.
- → Approximately 17% of youth (6-17 years) experience a mental health disorder.

The overuse of jails, particularly for individuals living with mental illness, is a driver of over-incarceration and has spurred multiple movements to address the issue. Visit the <u>NCSC Courts and Jails</u> web page for information on efforts like the MacArthur Foundation Safety and Justice Challenge.





The <u>Mental Health and Criminal Justice</u> fact sheet produced by the NCSC team contains additional information on statistics and issues related to mental illness and the criminal justice system.

<sup>&</sup>lt;sup>1</sup> Jaeckel T, Economy C. Promising Solutions to Our Nation's Behavioral Health Crisis.; 2017. <a href="https://govlab.hks.harvard.edu/files/promising solutions">https://govlab.hks.harvard.edu/files/promising solutions to nations behavioral health crisis.pdf</a>.

<sup>&</sup>lt;sup>2</sup> Bureau of Justice Statistics. Indicators of Mental Health Problems Reported by Prisoners and Jail Inmates, 2011-2012. Washington, D.C.; 2017. <a href="https://www.bjs.gov/content/pub/pdf/imhprpji1112.pdf">https://www.bjs.gov/content/pub/pdf/imhprpji1112.pdf</a>.

<sup>&</sup>lt;sup>3</sup> Development Services Group Inc. Intersection between Mental Health and the Juvenile Justice System. Washington, D.C.; 2017. <a href="https://www.ojjdp.gov/mpg/litreviews/Intersection-Mental-Health-Juvenile-Justice.pdf">https://www.ojjdp.gov/mpg/litreviews/Intersection-Mental-Health-Juvenile-Justice.pdf</a>.

<sup>&</sup>lt;sup>4</sup> Center for Behavioral Health Statistics and Quality. Key Substance Use and Mental Health Indicators in the United States: Results from the 2018 National Survey on Drug Use and Health. Rockville, MD; 2019. <a href="https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHNationalFindingsReport2018/NSDUHNationalFindingsReport2018.pdf">https://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSDUHNationalFindingsReport2018.pdf</a>.

<sup>&</sup>lt;sup>5</sup> The Substance Abuse and Mental Health Services Administration (SAMHSA) defines Serious Mental Illness as someone over 18 having (within the past year) a diagnosable mental, behavior, or emotional disorder that causes serious functional impairment that substantially interferes with or limits one or more major life activities. Find more information at <a href="https://www.samhsa.gov/find-help/disorders">https://www.samhsa.gov/find-help/disorders</a>.

In the midst of the coronavirus pandemic, state courts are facing new and unprecedented challenges regarding how to provide access to justice, and these challenges will continue to grow. The matter of responding effectively to the needs of court-involved individuals with serious mental illness, however, remains a grave national issue and pressing concern for the state court community. The challenges will continue to be even more urgent in the days and months ahead. The challenges of the pandemic require us to develop innovative practices and procedures to meet the needs of those we serve.

"The future is now to decriminalize mental illness." During the COVID-19 pandemic and thereafter, the Co-Chair of the National Initiative urges the use of the Sequential Intercept Model (SIM) and diversion to treatment and recovery; the expanded use of telemedicine and virtual meetings; and assisted outpatient treatment (AOT) as safer alternatives to reduce the use of jails and hospitals.



The most comprehensive online learning platform on mental health, substance use, and suicide prevention topics in the world has also been developed during the pandemic. As the world faces unprecedented fear and uncertainty, the mental health community teamed up with the most credible mental health organizations to collaborate on a free resource hub to help people and systems address mental health needs during the COVID-19 pandemic.

The PyschHub™ will provide a rich resource to the Task Force moving forward.

The work to improve the justice system response to those with mental illness and co-occurring disorders is based on the following principles.

- A community by community approach, supported by statewide leadership from all three branches of government, is required to improve the justice system response to those with mental illness and co-occurring disorders.
- We support judicial leadership to implement the Sequential Intercept Model to promote early access to treatment for mental illness and co-occurring disorders and to keep individuals from continuing to penetrate the justice system.
- We develop best practices, research, and data to improve justice system responses including competency delays, civil commitment, assisted outpatient treatment practices, deflection and

- diversion, caseflow management practices involving those with mental illness and co-occurring disorders, and other strategies to improve our responses.
- 4. We promote education and training for judges and court personnel to improve our capacity to lead change in our states and communities and to understand mental illness and co-occurring disorders and their impact on court proceedings.
- We will carry forward the important work started by the CCJ-COSCA National Judicial Opioid Task Force (NJOTF).

# Early on, the Advisory Committee identified the following 2019 and 2020 National Priorities.

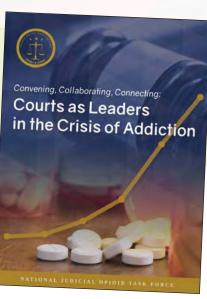


## To lead change, state by state and community by community, the National Initiative established and followed a strategic direction starting with the general principles and national priorities.



Further, the Advisory Committee embraced the principles and findings of the final National Judicial Opioid Task Force report, <u>Convening</u>, <u>Collaborating</u>, <u>Connecting</u>: <u>Courts as Leaders</u> <u>in the Crisis of Addiction</u>.

- At every intersection point, the justice system should lead the way in delivering solutions to the opioid epidemic.
- Judges should maximize their role as conveners by bringing together government agencies and community stakeholders to address the opioid epidemic and any underlying causes.
- ➤ Courts should ensure that individuals with opioid use disorders receive the treatment they need. Interventions should include a continuum of treatment strategies and support services.
- → Given the inordinate impact of the crisis on children and families, courts must focus attention on this area, with an emphasis on prevention and the expeditious placement of children in a safe, stable environment.
- ➤ Courts should objectively assess performance and support programs and practices that work through the use of robust data collection, quality-assurance practices, and data-driven decisionmaking.



lational Initiative

National Judicial Task Force to
Examine State Courts' Response
to Mental Illness
in support

Task Force to

Response

In February 2020,
the Advisory Committee
unanimously adopted a resolution
in support of establishing a national
judicial task force to examine the state courts'
response to mental illness. The Advisory Committee
recognized that moving to a high profile national
judicial task force would create greater structure,
attention, and focus to the demanding and essential

By late March 2020, both CCJ and COSCA resolved to establish the national task force (Task Force). This report is intended to describe the many accomplishments, findings, and activities from Year One of the National Initiative and to provide a solid foundation and sense of urgency for the Task Force to develop its workplan, deliverables, and timelines to implement improved responses.

work to prompt changes to state court policies and

practices that will lead to more fair and timely justice

for court-involved individuals with serious mental illness.

"For many communities, the criminal justice system has become the de facto mental health system....

It is my belief that a CCJ/COSCA mental health task force, along with NCSC's continued support, will result in a very good process being even better."

April 20, 2020 letter to Jonathan D. Mattiello from the Hon. Paul Reiber, Chief Justice, Supreme Court of Vermont

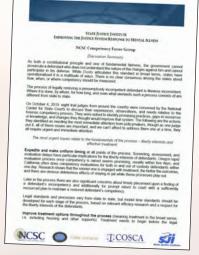
# riminal Justic

Justice

The Advisory Committee identified competency to stand trial as its number one 2019 National Priority, requiring urgent national attention. At any given time, tens of thousands of defendants

charged with misdemeanors or non-violent felonies are languishing in jail, awaiting a state hospital bed or community restoration, often waiting longer than if sentenced for the alleged crime.

Eight trial judges from Burlington, Vermont to Los Angeles, California <u>identified the myriad</u> <u>challenges, delays, and deficiencies of competency to stand trial proceedings</u>.



A special thanks

to these trial judges for their care
and commitment to transforming the
woefully inadequate systems in place.

Hon. James N. Bianco Judge, Superior Court of California, County of Los Angeles

Hon. Matthew J. D'Emic Judge, Kings County Supreme Court – Criminal Term, New York

Hon. Brian Grearson Chief Superior Judge, Vermont Judiciary

Hon. Michael D. Hintze Judge, Phoenix Municipal Court, Arizona

Hon. George Lipman Senior Judge, Maryland Judiciary

Hon. Jonathan Shamis Judge, 5th Judicial District, Colorado

Hon. Mark D. Stoner Judge, Marion Superior Court, Indiana

Hon. Nan G. Waller Judge, Multnomah County Circuit Court, Oregon

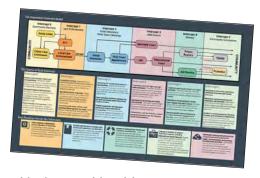


The heartbreak and challenges of the broken systems are described in a 2019 article in The Atlantic, *When Mental Illness Becomes a Jail Sentence*.



State courts alone cannot solve the delays and deficiencies of the competency to stand trial system, but state courts must be part of the solution. The interim report, <u>Competence to Stand Trial</u> identifies the challenges, compiles the data and information about the extent of the problem, and sets forth possible directions for the Task Force.

Another 2019 National Priority identified by the Advisory Committee was using the <u>Sequential Intercept Model (SIM)</u> to inform community-based responses regarding the involvement of people with mental health and substance use disorders in the criminal justice system. The SIM is a widely accepted conceptual



framework that identifies key points within the criminal justice and behavioral health systems to "intercept" individuals before they penetrate deeper into the system.

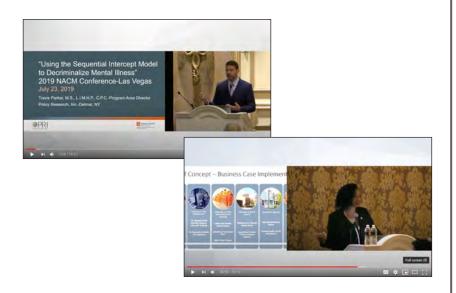


Building on the SIM, the NCSC team convened judges, court administrators, and other experts to develop a court-based model addressing not only the criminal justice system but also civil and other court interventions and needs. The developed guide, <u>Leading Change: Improving the Court and Community's Response to Mental Health and Co-Occurring Disorders</u> (Leading Change Guide) has been published. The Leading Change Guide expands upon the SIM and identifies additional elements to improve court responses such as

judicial leadership, physical and behavioral health, pre-crisis community services, family and public outreach, civil justice interventions, and data and information sharing.

sloped early on. The test practices recommended on this website build the foundation for improving the court	a unique position to con	were stakeholders and to lead so	ourts, and judges in particular, are with a group to consensus and action
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The NCSC team developed <u>Coordinated</u> <u>Court and Community</u> <u>Responses</u>, a companion website to the <u>Leading</u> <u>Change Guide</u>, to identify promising and best practices for courts and communities.

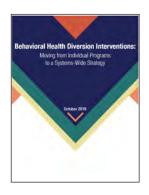


The team also produced videos with the National Association for Court Management (NACM) describing the SIM (Travis Parker, Policy Research Associates, Inc.) and the use of the Leading Change Guide (Yolanda Lewis, former Court Administrator, Fulton County, Georgia).



The <u>Safety + Justice Challenge (SJC)</u> provides support to local leaders from across the country

as they rethink jails with strategies that safely reduce jail populations and eliminate ineffective, inefficient, and unfair practices. As a Strategic Ally to the Challenge, the NCSC team works with state court leaders and national judicial organizations to build awareness of this initiative by providing courts with resources and strategies they can use to improve the effective use of jails and to promote the need for jail reform. It is anticipated that the Task Force can build upon the important behavioral health work underway through the SJC.



Diversion to What? One of the most pressing problems identified by the Advisory Committee is the lack of post-arrest behavioral health treatment alternatives available to trial judges. In November 2019, the Council of State Governments Justice Center outlined system strategies to provide additional behavioral health diversion alternatives for judges and communities. Behavioral Health Diversion Interventions: Moving from Individual Programs to a Systems-Wide Strategy can provide a starting place for the Task Force.



<u>Timely caseflow management</u> of cases involving defendants with behavioral health needs is of critical importance whether to reduce the number of those with mental illness in jails and/or to improve outcomes. Building on years of caseflow management research, the NCSC team has developed plans to integrate caseflow management strategies with behavioral health screening and assessment information and diversion alternatives.

Expanding and strengthening the support for mental health courts was identified by the Advisory Committee as a 2020 National Priority. Plans and strategies need to be developed as part of the Task Force workplan.

While the <u>National Drug Court Resource Center</u> identified 449 mental health courts nationwide as of June 2018, research and best practice standards need to be updated and leadership strengthened so mental health courts serve as a strong element of the continuum of effective court responses.





In the last decade, state courts have built consensus for the need for change to <u>Advancing Pretrial Justice in the States</u>. While challenges continue, the Task Force is urged to provide specific attention to pretrial justice for those with serious mental illness.

# Legal Processes

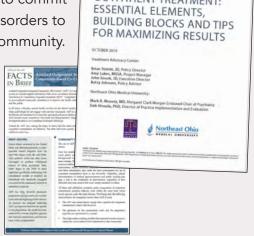
Model legal processes to support clinical intervention for persons in a mental health crisis are being developed by a distinguished workgroup of psychiatrists, law professors, judges and others, including the Hon. Milton Mack, COSCA Co-Chair, Advisory Committee, and Advisory Committee member Judge Steve Leifman. The workgroup is being convened and work product developed by The Equitas Project, a national initiative of Mental Health Colorado focused on disentangling mental health and criminal justice. The model processes are designed to set the gold standard for the least restrictive involuntary treatment (inpatient and outpatient) and for civil and criminal approaches to optimize individual health outcomes while protecting civil liberties and preserving public safety. This work was identified as a 2019 National Priority, and the NCSC team acknowledges the time and expertise of the Equitas Model Legal Processes Workgroup. It is anticipated the Task Force will receive the workgroup's recommendations in 2020.

### **Workgroup Members**

Hon. Steve Leifman, Miami-Dade County, Florida Ron Honberg (Ret.), National Alliance on Mental Illness Vincent Atchity, PhD, President and CEO, Mental Health Colorado Dr. Margie Balfour, Connections Health Solutions, Arizona Prof. Richard Bonnie, University of Virginia Dr. Michael Champion, Medical Director, Adult Mental Health, Hawai'i Judith Harris, President, Matthew Harris Ornstein Memorial Foundation Dr. Steven K. Hoge, Columbia-Cornell Forensic Psychiatry Elizabeth Kelley, JD, Mental Health Criminal Defense Attorney Dr. Jeffrey Lieberman, Columbia University Medical Center Hon. Milton L. Mack, Jr., State Court Administrator Emeritus, Michigan Dr. Kenneth Minkoff, Harvard University Medical School Dr. Debra Pinals, Michigan Department of Health and Human Services Prof. Brian Shannon, Texas Tech Prof. Christopher Slobogin, Vanderbilt University Dr. Kenneth Sonnenfeld, Ballard Spahr LLP Gwendolyn West, Equitas Project Manager, Mental Health Colorado Patricia Tobias, Principle Court Management Consultant, NCSC Richard Schwermer, JD, Workgroup Reporter, NCSC

Assisted Outpatient Treatment (AOT) is becoming an essential element of the court response to mental illness. AOT is a form of civil commitment that authorizes a judicial officer to commit eligible individuals with severe psychiatric disorders to mental health interventions in the community.

While the role of the judge and the nature of the legal process require further study in 2020-2021, <u>Assisted Outpatient Treatment</u> (AOT): Community-Based Civil Commitment by the NCSC team and Implementing Assisted Outpatient Treatment: Essential Elements, <u>Building Blocks and Tips for Maximizing Results</u> published by the Treatment Advocacy Center in October 2019 provide a foundation for the Task Force in its further work.



SMIAdviser

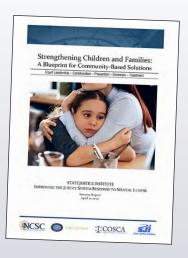
IMPLEMENTING ASSISTED

**OUTPATIENT TREATMENT:** 

Building on the use of the SIM, the <u>Leading Change Guide</u>, and the companion website <u>Coordinated</u> <u>Court and Community Responses</u> are equally important in improving court responses in civil and probate cases. Civil interventions including guardianships, civil commitment practices, and AOT orders are essential elements of a continuum of effective practices. The Task Force will be able to strengthen these processes and expand and tailor effective behavioral health practices to child welfare, juvenile delinquency, and family law proceedings in 2020-2021.

The Task Force will also look at <u>strengthening caseflow management practices</u>, and integrating behavioral health screening and assessments in civil, probate, child welfare, juvenile delinquency, and family law cases in 2020-2021.

Strengthening access to mental health treatment for children and families was identified as a National Priority for 2020. The NCSC team has begun conceptualizing and planning the pilot testing of <u>Strengthening Children and Families: A Blueprint for Community-Based Solutions</u>. To ensure healthy and safe communities, community-based solutions and the child welfare system must be strengthened. Coupled with state court leadership, local courts are in an ideal position to lead these efforts to support the vision of a community-based approach that is focused on keeping children safely with their families and out of foster care. Outlining the key issues at each point of



prevention and intervention, this blueprint provides a recommended approach for 2020- 2021 and will evolve based on the information and lessons learned from upcoming pilot testing.

# Partnerships

Working with other partners has been a major 2019 National Priority for the National Initiative. While there are too many to name individually, a special thank you is extended to The Council of State Governments Justice Center (CSG-JC), the Judges and Psychiatrists Leadership Initiative (JPLI), the Treatment Advocacy Center (TAC), and Policy Research Associates Inc. (PRA). *Possible Strategic Partners* provides the Task Force with a useful listing of those in the court community, national organizations, foundations, and others who are concerned about court-involved individuals with mental illness and co-occurring disorders.

The first of five CCJ-COSCA Regional Summits to Improve the Court and Community Response to Mental Illness and Co-Occurring Disorders was held in May 2019 in Sun Valley, Idaho for the Western Region, followed by the second summit for the Mid-West Region in Deadwood, South Dakota in October 2019. Twenty-two state teams and

more than 190 participants, guests, and speakers attended the summits which were both extraordinarily successful and featured outstanding national and regional speakers and an opportunity for multidisciplinary state teams to identify state priorities for change.

Western Region Summit

<u>Agenda</u>

<u>State team priorities</u>

Summit evaluations

Mid-West Region Summit

<u>Agenda</u>

<u>State team priorities</u>

<u>Summit evaluations</u>

In 2020-2021, the Southern Region Summit will be hosted in Austin Texas, the Mid-Atlantic Region Summit will be in Brooklyn, New York, and the New England Summit will be in Vermont.



The Illinois State Court Team L to R: Marcia Meis, Director, Administrative Office of the Illinois Courts; Chris Stallings, Senior Director, Rosecrance Inc.; Hon. Kathryn Zenoff, Justice, Second District Appellate Court of Illinois; Hon. Anne Burke, Chief Justice, Illinois Supreme Court; Hon. Sharon Sullivan, Presiding Judge, Circuit Court of Cook County, Illinois; Stephanie Frank, Deputy Director of Planning, Performance Assessment and Federal Projects, Illinois Department of Human Services, Division of Substance Use Prevention and Recovery (DHS/SUPR); Kelly Gallivan-Ilarraza, Problem Solving Court Coordinator, Administrative Office of the Illinois Courts; Michelle O'Brien, Principal Court Management Consultant, National Center for State Courts; Joan Lodge, Administrator Adult Mental Health Services, Rosecrance Ware Center



To accomplish the state team priorities identified at the CCJ-COSCA regional summits, *State Technical Assistance* requests were submitted to the State Justice Institute and approved by the Advisory Committee. Hawai'i Chief Justice Mark E. Recktenwald is pictured making opening remarks at the

Hawai'i state summit planned with the technical assistance funded by the State Justice Institute and provided by the NCSC. Governor David Y. Ige also made opening remarks.

In addition to facilitating highly successful state summits, the technical assistance is providing support for collaborative state task forces and commissions, stakeholder interviews, facilitated discussions, state surveys and guidance on specific issues requested. To date, the following states in the CCJ-COSCA Western and Midwestern regions have been awarded technical assistance.

STATE	CHIEF JUSTICE	STATE COURT ADMINISTRATOR	
Alaska	Hon. Joel H. Bolger	Stacey Marz	
Arizona	Hon. Robert M. Brutinel	David K. Byers	
Guam	Hon. F. Philip Carbullido	Kristina L. Baird	
Hawai'i	Hon. Mark E. Recktenwald	Rodney A. Maile	
Idaho	Hon. Roger S. Burdick	Sara B. Thomas	
Illinois	Hon. Anne M. Burke	Marcia M. Meis	
Indiana	Hon. Loretta H. Rush	Justin P. Forkner	
Iowa	Hon. Susan Christensen	Todd Nuccio	
Minnesota	Hon. Lorie S. Gildea	Jeff Shorba	
Missouri	Hon. George W. Draper III	Kathy S. Lloyd	
New Mexico	Hon. Judith K. Nakamura	Arthur W. Pepin	
North Dakota	Hon. Jon J. Jensen	Sally Holewa	
Utah	Hon. Matthew B. Durrant	Hon. Mary T. Noonan	
Washington	Hon. Debra L. Stephens	Dawn Marie Rubio	



We promote education and training for judges and court personnel to improve our capacity to lead change in our communities and to understand mental illness and co-occurring disorders and its impact on court proceedings.

<u>Developing a national education and training curriculum</u> for judges and court professionals on mental illness, substance use disorders, and co-occurring disorders is a 2020 National Priority. Setting forth a

proposed pathway for the Task Force to accomplish this goal, the curriculum development is based on the general principle: "We promote education and training for judges and court personnel to improve our capacity to lead change in our communities and to understand mental illness and co-occurring disorders and its impact on court proceedings." The resources and status of the proposals and opportunities to work with other partners will need to be refreshed before embarking upon the necessary steps forward and seeking funding to accomplish the objectives.

In 2020, PBS published the documentary,

The Definition of Insanity about the successful

Miami-Dade County, Florida jail diversion project and
their new Mental Health Facility
spearheaded by Judge Steve Leifman.



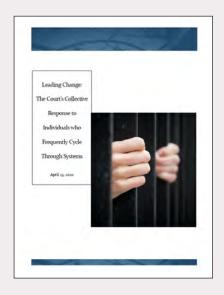


In 2019 and 2020, there was strong interest in the *Miami Model: Decriminalization of Mental Illness Workshop*. Two workshops offered in November 2019 and March 2020 were attended by close to 50 participants from 12 states. The NCSC team acknowledges Judge Steve Leifman and the amazing team of professionals in Miami-Dade County for hosting the event. Additional workshops are contemplated for fall 2020 in Miami-Dade County, Florida.

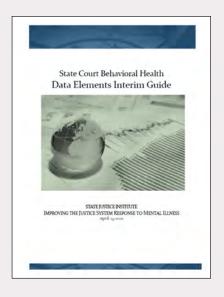
A companion *Miami Model: Decriminalization of Mental Illness Guide* will be published to provide the history, challenges, and essential elements of the Miami-Dade County Criminal Court Mental Health Project.

Another workshop is planned for 2020 in Pima County, Arizona. The court's leadership coupled with extensive county and city supports and community crisis services and other innovations will be featured in this Tuscon Workshop.

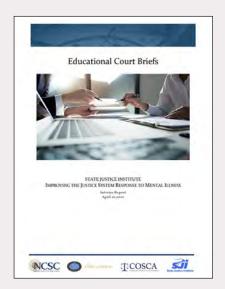
A November 2020 date is anticipated.



Court leaders are in a unique position to be advocates of change and leaders capable of gathering stakeholders and convening changes across systems. Leading Change: The Court's Collective Response to Individuals who Frequently Cycle through Systems addresses those individuals with mental illness and co-occurring disorders who cycle through jails, hospitals, behavioral health facilities, and other social service programs at a startlingly high rate. Sometimes these individuals are called "frequent utilizers." This guide is intended to provide court leaders with tools to work with community leaders and identify those individuals cycling through multiple systems so that together the court and community can improve outcomes and save costs.



The <u>State Court Behavioral Health Data Elements</u> <u>Interim Guide</u> provides a starting place for courts to consider when reviewing or enhancing key behavioral health and caseflow management data elements. These elements will enable state court leaders to exploit data as one of its most valuable assets by informing decision-making regarding justice-impacted persons with mental health, substance use, or co-occurring disorders. As the work progresses, it is anticipated that the guide and essential data will be refined and expanded.



Two sets of <u>Educational Court Briefs</u> are under development to inform the national court community. The first set of briefs, Mental Health Facts in Brief, are designed to orient judges and court professionals to common mental health issues that come before the courts.



The briefs are presented from a clinical and research perspective with a focus on significant psychiatric issues and how they relate to the courts.

- → The Psychiatric Care Continuum
- **▶** Assisted Outpatient Treatment (AOT) Community-Based Civil Commitment
- **▶** Co-Occurring Mental Illness and Substance Use Disorders (CODs)
- >> Trauma and Its Implication for Justice Systems

The second set of briefs, Court Behavioral Health Briefs, are designed to orient judges and court professionals on important topics, collaboration models, and resources which will enable courts to better respond to persons with mental illness and co-occurring disorders. Court Behavioral Health Briefs are presented from a court administrative or legal perspective.

While there is a wealth of data, research, and other resources related to the intersection of behavioral health and the courts, nowhere are those resources curated in one place on an ongoing basis. An online newsletter was created to address this need.

Behavioral Health Alerts is published on approximately the first and fifteenth of each month and is archived on the <u>NCSC website</u>. The Advisory Committee asked that these alerts include National Initiative updates, curated resources and reports, and relevant news from the states.

Behavioral Health Alerts

April 16, 2020

National Initiative Updates

The Future is Now to Devisionable Mental Biless Forms Michigan State Conf.
April 16, 2020

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The Future is

All court leaders are encouraged to <u>sign up</u> <u>for the newsletter</u> on the *NCSC website*.



As state courts improve their responses to mental illness and co-occurring disorders, impressive State Court Innovations will be highlighted on the NCSC Mental Health web pages. See Arizona highlights <u>AZCourtCare</u> and <u>Mental Health: It's</u>

on Everyone's Mind. In addition to State Court Innovations, an Interactive Web-Based Assessment is under development to allow courts to "self-assess" their strengths, gaps, and opportunities along the continuum of improved justice system responses to mental illness and co-occurring disorders.

Court-based train-the-trainer
mapping workshops were
developed and offered in 2019.
More than 65 participants
from four states attended two
workshops to learn about the
Leading Change framework, how
to map court and community



resources, to identify gaps and opportunities, and strategies to improve the court response to individuals with mental illness and co-occurring disorders. It is contemplated that additional workshops will be scheduled in 2020-2021.

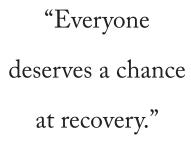
Leading Change – Mapping Resources Community by Communi Little America Hotel, Flagstaff, Arizona Flagstaff Room August 5-6, 2019			
Agenda			
	Day 1		
8:00-8:30	Gathering - Continental Breakfast		
8:30-9:00	Welcome & Overview Introduction of the workshop, faculty and participants.	All	
9:00-10:15	Unit 1: The National Initiative and Judicial Leadership Why should the judicial branch take the lead?	Patti Tobias	
10:15-10:30	Break		
10:30+12:00	Unit 2: Developing a Coordinated Court & Community Response Overview of the Leading Change Model.	Marisa Hebble	
12:00-1:00	Lunch		
1:00-2:30	Unit 3: Community Stakeholders Identifying and involving key members from the court and community.	Don Jacobson	
2:30-2:45	Break		
2:45-4:15	Unit 4: Court and Community Resource Mapping Creating your resource map. Community assets Intercept 0 Intercept 1	Marisa Hebble	



Trends in State Courts is an annual, peer-reviewed publication that highlights innovative practices in critical areas that are of interest to courts, and often serves as a guide for developing new initiatives and programs and informing and supporting policy decisions.

Trends in State Courts is the only publication of its kind and enjoys a wide circulation among the state court community.

The article, "State court's responsibility to convene, collaborate and identify individuals across systems" has been accepted for the 2020 Trends in State Courts.



- Justin Volpe Jail Diversion Peer Liaison CRPS-A

# Gammy Momentum

"Court leaders can, and must, address the impact of the broken mental health system on the nation's courts— especially in partnership with behavioral health systems. The broken system too often negatively impacts court cases involving those with mental illness, especially in competency proceedings, criminal and juvenile cases, civil commitment cases, guardianship proceedings for adults and juveniles, and oftentimes family law cases."

On behalf of CCJ and COSCA, the National Judicial Task Force to Examine State Courts' Response to Mental Illness is urged to initiate a thorough examination of the mental health crisis, heightened during this COVID-19 pandemic, and develop the tools, resources, and policies required to improve the court system response to those with mental illness and co-occurring disorders and its impact on fair justice.

The NCSC team envisions that this transition report and the work completed to date will provide the way forward for your urgent attention.

<sup>&</sup>lt;sup>1</sup> Conference of State Court Administrators, Decriminalization of Mental Illness: Fixing a Broken System, 2017, <a href="https://cosca.ncsc.org/~/">https://cosca.ncsc.org/~/</a> media/Microsites/Files/COSCA/Policy%20Papers/2016-2017-Decriminalization-of-Mentaal-Illness-Fixing-a-Broken-System.ashx.

# **Notes**



Judge Steve Leifman of Miami-Dade County, Florida at Hawai'i state summit.



The Idaho team working with Patti Tobias, NCSC Court Consultant, at the Leading Change Workshop in Arizona to Improve Court and Community Responses for Persons with Mental Health and Co-Occurring Disorders. Mapping Resources Community by Community.



Hawai'i Chief Justice Mark E. Recktenwald and Governor David Y. Ige at the Hawai'i state summit.

**2019 NCSC National Initiative Team** Jacquelyn Gilbreath Court Research Analyst Beverly Hanson Business Analyst Susanne Mitchell Court Research Associate Michelle O'Brien Principal Court Management Consultant Richard Schwermer Consultant Patricia Tobias Principal Court Management Consultant Nicole L. Waters Director of Research Services







