Exploring the Stanislaus County Criminal Justice/Mental Health Intersection

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The problem....

- The criminal justice system has become the de facto mental health system
- Persons with mental illnesses are disproportionately coming into contact with the criminal justice system
- Many in both the behavioral health and the criminal justice systems don’t see it as their job or responsibility to intervene
A little history...

- 1773- first psychiatric hospital opened
- Dorothea Dix (1802-1887)
- The era of hospital confinement for the mentally ill would last for 150 years
- 1952 – Development of Thorazine
- 1960’s Civil Rights Movement
- 1963 Community Mental Health Centers Construction Act (incentives to states to deinstitutionalization)
- 1972 LPS Act of California went into full effect
LPS Act

- Set the precedent for modern mental health care in the United States
- LPS was intended to correct the abuses of the system—neglectful treatment, indeterminate commitments, and the possible abuse of commitment procedures
However...

• Some believe the pendulum swung too far

• Set too restrictive a standard for commitment, requiring people to pose a grave danger before they could get treatment

• The result was rising homelessness and criminalization of the mentally ill
Before arrest

- Outreach & Engagement
- Crisis Intervention Team training
- Respite Center
- Restorative Policing
- FSP/ACT programs
  - Integrated Forensic Team
  - Stanislaus Homeless Outreach Program
Outreach & Engagement

• Individuals dedicated to the downtown, parks & county wide outreach efforts to our homeless population

• Focus is to form a rapport, assess needs/wants, and direct to services
  – “People don’t care how much you know until they know how much you care” credit unknown
Crisis Intervention Team

- Originated with the Memphis Tennessee Police Department in 1988
- Nationally recognized curriculum for law enforcement
- 2005 – First CIT Academy in Stanislaus County
- September 2016 – completed our 18th Academy in Stanislaus County
How it works

- 40-hours; 8-5; Monday-Friday; Twice a year
- Open to all LEA in Stanislaus County
- 30 - 35 experienced officers participate
- 10 presenters; 3 (paid) private providers
- 9 role play actors- BHRS staff
- 6 family/consumer panel members
- 5 drivers (for site visits) – BHRS staff
How it works

• Emotional Disturbances in Children & Adolescents
• Mental Illness and Recovery
• Panel Discussion with Family & Consumer members
• Suicide Risk Assessment
• Suicide-By-Cop
• The Criminal Justice System and the Mentally Ill

• Mental Health History
• Mental Health Law
• Major Mental Disorders
• Alzheimer’s Disease
• Developmental Disabilities
• Mental Health Medications
• Dual Disorders
• Crisis Intervention Skills
• Site Visits
CIT-Why it works

• Commitment from all agencies to have CIT in our community

• Our first and main presenter is an individual in the community who has credibility with both clinical staff and law enforcement

• Q & A at the end of every day and a willingness to ask and take the tough questions
CIT-Why it works

• Site visits
• Role Play Exercises
  – Ability to practice techniques you’ve been taught all week
  – Reviews have always been very good
• Family/Consumer Panel
  – Personal stories are powerful!
  – Feedback from officers, “All we get to see is the ugliness of the illness. The panel provides us with another perspective.”
Respite Center

- Staffed 24/7
- Staff are paraprofessionals
  - Experience in support services
- Supervise & link to community resources
- Average length of stay – 3 days.
- Capacity – 5 individuals at any time
- Wheelchair accessible
- Lock boxes for belongings and medications
Restorative Policing

- Meeting/partnership with Modesto Police Department & BHRS
- Meets monthly
- Interdisciplinary team - law enforcement, Doctors Behavioral Health Center, District Attorney, Pt. Rights, Adult Protective Services, BHRS
- LE identifies individuals that are discussed
- Allows all to collaborate to develop interventions
Integrated Forensic Team & Stanislaus Homeless Outreach Team

• Mental Health Service Act Programs
• IFT has a probation officer as part of the team
• 24/7 – on-call staff
• Small caseloads - client/staff ratio 12/1
• Flexible funding and housing options
• Both teams collaborate with law enforcement
After Arrest

• Brief MH Screening at booking
  – California Forensic Medical Group

• Mental Health Detention Program
  – 3 mental health deputies
  – 3 mental health clinicians
  – Offer screening/assessment
  – Offer individual & group therapy
  – Assist CFMG with release planning
  – Can offer a warm handoff to community programs
After arrest...

- Programs available in-custody
- Day Reporting Center also has programming, mental health services and substance use services
- IFT/SHOP
- Mental Health Court
- Limited housing assistance, but available
- Community Based Organizations
In/out of Custody Groups

- Mental Health treatment
- Substance Use Disorder treatment
- Moral Recognition Therapy
- Anger Management
- Domestic Violence counseling
- Cognitive Behavioral Therapy
- Thinking for a Change
- HSE Certificate
- Principles and Values
- Seeking Safety
- Work Maturity/Life Skills
- Breaking Barriers
- Successfully Transition into the Community

- NAMI Peer to Peer
- Housing assistance
- Adverse Childhood Experience Overcomers
- Celebrate Recovery
- Spiritual, Marriage Counseling
- Good Life Values
- Victim Restitution
Partners

- BHRS
- Sierra Education and Counseling Services
- Probation Department
- Learning Quest
- Youth for Christ
- Friends Outside
- Nirvana
- NAMI
- Teen Challenge
- Gospel Mission
- Multiple churches
- SO Chaplin
- El Concilio
- Narcotics Anonymous
- Alcohol Anonymous
- District Attorney Office
DRC- Community Corrections

- Program funded through the Community Corrections Partnership/Safety Realignment
- Provide mental health & substance use treatment to local detention and adults under the jurisdiction of County Probation
- Co-located at the new Day Reporting Center
- Staffing designed similar to IFT
Mental Health Court

• Collaborative Court
• Round table discussion with all partners prior to Court
• IFT provides the treatment

• The most important element of the court is it allows the opportunity:
  – To engage with the participants
  – To encourage them to participate in mental health treatment
  – To discuss the idea of HOPE and
  – To suggest that Recovery is possible
Final thoughts...

• The intersection between Behavioral Health and the criminal justice system is complex, frustrating and full of heartbreak; Multiple areas should and need to be addressed.

• It is also full of inspiring stories of success and what’s working

• Working together is the only way we are all going to accomplish our goals – promoting recovery of those with mental illness

• Today is a necessary step in the direction of continued collaboration.
• “Unity is strength... when there is teamwork and collaboration, wonderful things can be achieved.” Mattie Stepanek, Poet
• “Hope can be a powerful force. Maybe there's no actual magic in it, but when you know what you hope for most and hold it like a light within you, you can make things happen, almost like magic.”
— Laini Taylor, author