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RECOVERY TIMES

Healthy People, Healthy Communities. Let's Make It Happen!
State of Connecticut Department of Mental Health and Addiction Services
Thomas A. Kirk, Jr., Ph.D., Commissioner

Emphasis On: Innovative Services/Approaches for Individuals Involved with the Criminal Justice System

CT DIVERSION/TRAUMA RECOVERY PROGRAM FOR VETERANS

DMHAS was awarded a five-year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to develop a comprehensive continuum of trauma-integrated diversion programming for veterans with PTSD/trauma-related disorders who are involved in the criminal justice system. DMHAS' Southeastern Mental Health Authority (SMHA) was selected as the pilot site for this program. Both local and statewide advisory committees have been established to support development of a strategic plan. The goal is to develop the expertise and infrastructure to sustain the CT Diversion/Trauma Recovery Program in Eastern CT (Local Pilot), in addition to document and generate evidence to support its replication across all 20 Jail Diversion programs in CT.

The target population includes veterans with PTSD and trauma-related disorders. Veterans from OEF (Afghanistan war) and OIF (Iraq war) will be given priority. Recruitment efforts for the pilot will focus on veterans in Eastern CT at several possible contact points within the legal system. Working with the Crisis Intervention Team (CIT) trained officers and social workers, referrals to the CT Diversion/Trauma Recovery Program will be offered at point of initial police contact (pre-booking). At time of arraignment Jail Diversion staff will offer services for veterans who were arrested for traffic, misdemeanors and low-level felonies (post-booking). During incarceration, contacts will be offered through Jail Re-Interview services and CT Offender Re-entry Program. Post-adjudication contacts will be made with Adult Probation Officers for veterans at risk of probation violation.

Services will be coordinated and facilitated with the CT Department of Veteran Affairs, VA CT Healthcare System, local Vet Center, network providers, and SMHA. Our mission is to assist veterans in receiving the services to which they are entitled, to give veterans choices for treatment, to assist in providing comprehensive services (including housing, employment, benefits, substance abuse counseling,

ABI/TBI screening, and trauma-integrated treatment). Specialized Trauma Recovery and Empowerment Model for Veterans (Vet-TREM) treatment will be provided. In providing these services simultaneously the goal is to help prevent arrest, re-arrest, relapse and to promote long-term recovery for veterans with PTSD/trauma-related disorders.

For more information, contact Mark.Gould@po.state.ct.us or 860-859-4749.

CT OFFENDER REENTRY PROGRAM (CORP) AT WESTERN CT MENTAL HEALTH NETWORK (WCMHN)

Mission of the CORP program is to assist individuals with serious mental health or co-occurring serious mental health and substance use disorders who are completing their DOC sentence and planning their transition back to the community. Six to ten months prior to an individual's release, CORP clinicians assess these individuals within the Correctional facility, explain the program to them and seek their voluntary inclusion in it. Once admitted to CORP, individuals participate in twice weekly Coping/Re-entry skill groups held at the Correctional facility. At the same time that CORP clinicians are teaching these skills, they are also working collaboratively with DOC Discharge Planners to facilitate appropriate treatment discharge plans and assure linkage to outpatient services within their respective communities. At end of sentence CORP clinicians provide individuals with case management services in the community until they have fully engaged with their respective treatment team. CORP began in 2004 in Hartford, Bridgeport and New Haven and has been highly successful in decreasing recidivism (rearrest) with individuals who have participated. It has now been expanded to cover Waterbury and New London. Currently WCMHN CORP clinicians are working with individuals in Garner, Osborn and York correctional facilities.

For more information on the above, contact <u>Gail.Emmerson@po.state.ct.us</u> or 203-805-6402. For

more information on WCMHN, contact Colette.Anderson@po.state.ct.us or 203-805-6400.

COLLABORATING WITH POLICE AGENCIES TO PREVENT TOBACCO SALES TO YOUTH

Preventing merchants from selling tobacco products to Connecticut youth has been the primary goal of the Tobacco Prevention & Enforcement Program (TPEP) since its inception in 1996. To insure the success of this goal, in 2001 TPEP implemented the Police Partnership Program in local communities. The Police Partnership Program, which is executed through a DMHAS memorandum of agreement (MOA) with cities and towns, allows for TPEP investigators to do unannounced tobacco compliance inspections in concert with municipal police agencies.

The MOA provides guidelines for conducting joint inspections and permits enforcement officers to immediately distribute merchant education materials to the individuals found in violation of the law. This collaborative effort bolsters enforcement of criminal violations for the sale of tobacco products to individuals under 18 years of age as outlined in CT General Statutes §53-344(b). Currently, almost 100 municipalities participate in the program.

In late October 2007, the Department of Public Safety (DPS) joined the Police Partnership Program. The DMHAS MOA with DPS enables TPEP investigators to do joint unannounced tobacco compliance inspections with State Police Troopers in jurisdictions not having a municipal police department. This collaboration with DPS State Police has augmented the areas throughout the state where criminal action can be taken against individuals that sell tobacco products to minors.

The overall effectiveness of the Police Partnership Program is evident by a lower retailer violation rate of 15.4% in federal fiscal year 2008 in comparison to non partnership inspections culminating in a retailer violation rate of 18%.

For more information, contact Gregory. Carver@po.state.ct.us or 860-418-6702.

CONSUMER ADVOCATES

Bridges, A Community Support System, Inc. was the recipient of a Mental Health Transformation Grant for their Jail Diversion Program in June of 2008. With the help of this funding from DMHAS, they have enhanced their ability to build a recovery-oriented system of care by helping individuals with stabilized mental illness and/or substance use disorders who have a rehabilitated criminal history to become "Consumer Advocates". After a four-month training program, these Consumer

Advocates are assisting Bridges with a public awareness campaign that focuses on the increasing number of individuals who are being prosecuted and/or incarcerated in lieu of being provided with opportunities for recovery. They are educating members of the community about acute psychiatric and addictionrelated symptoms, which when combined with daily stresses may contribute to this rising number. Target audiences have included professionals who have an interest in this growing social problem, such as police and probation officers, bail commissioners, attorneys prosecutors and prison personnel. thoughtfully planned speaking events are providing an arena for the advocates to engage in a crucial dialogue with key decision-makers by telling their uniquely personal stories, shedding a light on the challenges of living with mental illness and addiction as well as exposing the dual stigma that is associated with a criminal history and a disability.

For more information, contact Barbara DiMauro, Bridges, at 203-878-6365.

EMPLOYMENT STRATEGIES FOR PERSONS INVOLVED IN THE CRIMINAL JUSTICE SYSTEM

While criminal records pose real barriers to employment, DMHAS providers have been successful at helping individuals in the system find and keep work. Almost 75% of ex-offenders rate employment as their top post-release problem. Studies show that an unemployed offender is three times more likely to return to prison than an offender who has a job. Those leaving prison with post-release employment in place return to criminal activity half as often as those without plans. Several strategies have proven to be helpful in preparation for work:

- 1. Employers in Connecticut have a right to ask about an applicant's criminal record during an interview or job application and it is important to deal with the issue honestly. The employer can access information about criminal arrests, charges and convictions that have not been erased. Many exoffenders apply to have their records erased, in which case the employer cannot refuse to hire and cannot discriminate or fire them solely because of a the criminal record.
- 2. It is critical that job seekers prepare to answer questions appropriately about their records. They must provide truthful answers to all questions on written applications but should not provide more information than is asked. Most job seekers benefit from practicing their interview "spiel", offering a brief explanation of the crime and taking full

responsibility for it. It is important that the individual explain how s/he has since been rehabilitated (e.g., used their time in prison to get a GED, matured and want a better life for themselves and their family, tutored inmates during their time in prison) and have set higher goals for themselves.

- 3. References from trusted colleagues and former employers can speak to the individual's character and how s/he is prepared to make a contribution to society.
- 4. Where criminal histories are directly related to the job sought (e.g., drug dealing for an individual who is looking to reinstate his/her nursing license, child molestation for a day care license, criminal justice jobs), individuals may be disqualified from certain jobs or licenses. There is an appeals process but it often is more productive to explore other fields where the record will have less impact.
- 5. Many individuals who have been released from prison have difficulty adjusting to workplace culture after living in the prison culture. Staff can offer assistance in such areas as time management, self-direction and respecting authority.
- 6. For some a temporary part-time job is a good place to start their community reentry. Individuals can earn money while they practice workplace skills. It helps them rebuild a resume and make contacts that might provide recommendations for more substantial positions.

For more information, contact Ruth.Howell@po.state.ct.us or 860-418-6821.

POLICE/EMERGENCY FIRST RESPONDER TRAININGS

Over the past 6 months (since September), DMHAS' Division of Safety Services has conducted:

- Basic level MISA training for 96 municipal and 62 state police recruit officers.
- Hearing Voices that are Distressing for approximately 40 Crisis Intervention Team (CIT) police officers.
- Hearing Voices that are Distressing for 23 Hamden Fire Department firemen.
- Responding to Situations Involving People with Mental Illness/Substance Abuse for 51 certified police officers. This training day also includes the Hearing Voices that are Distressing course. It has been well received with classes at full capacity.

For more information, contact Marcia. Alekunes@po.state.ct.us or 860-262-5387.

SUPERVISED DIVERSIONARY PROGRAM (SDP)

Although not a DMHAS-funded program, DMHAS plays a role in this innovative program for individuals with psychiatric disabilities who are involved with the criminal justice system. Informally known in the courts as 'Mental Health AR" (Accelerated Rehabilitation) this program began on October 1, 2008 when Public Act 08-1 created a diversionary program that combines mental health treatment with probation supervision for defendants with psychiatric disabilities. The purpose of the act was to reduce the number of individuals with psychiatric disabilities incarcerated or insufficiently served. To be eligible for SDP, an individual must have a psychiatric disability that would benefit from treatment, be amenable to treatment, and not have previously used SDP.

Certain charges exclude one from being granted SDP but in fact the charges that are included are much broader than for Jail Diversion. The Judicial Branch— Support Services Division Court (CSSD) Intake/Assessment/Referral (IAR) Unit determines whether an individual meets all eligibility criteria except that of psychiatric disability. The determination of psychiatric disability in the smaller courts is made by the Jail Diversion clinician, along with a recommended treatment plan. In the larger courts only individuals meeting DMHAS target population diagnoses are assessed by the Jail Diversion clinician. Others applying for SDP are assessed by CSSD's contracted providers. If it is determined that an individual meets all eligibility criteria, the judge decides whether to grant SDP. If granted, the individual must continue in treatment and work with their Probation Officer while not getting rearrested for the length of time stipulated by the court. If they do so, at the end of the time period stipulated by the judge, their record is expunged of the charge. For many individuals we serve this can mean the difference between being homeless or housed given the Housing Authorities' exclusions of certain charges.

There is a wide range of response to this program across the 3 courts in WCMHN's area. Bantam Court almost immediately began using it and has already had multiple SDP applications and many individuals have been diverted through it. Waterbury Superior Court and Danbury Court are just beginning to take applications.

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