

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

PROGRAM TITLE: Behavioral Health Court (BHC) **PROVIDER:** Department of Behavioral Health

PROGRAM DESCRIPTION: Mental health clinicians, a dedicated probation officer, and case manager serve on a multi-agency treatment team to serve eligible and suitable adults in the justice system. The BHC team consists of the judge, defense and prosecuting attorneys, probation officer, FSP Personal Service Coordinators and other FSP representatives, sometimes a jail liaison, the BHC Coordinator, and occasionally clinicians/interns conducting psychiatric assessments.

This adult problem-solving collaborative court first began in the fall 2008 and slowly added participants the first two years. Its first graduate was in 2011 from the original 2008 group of three participants. As of December 31, 2012, a total of 48 were referred, 45 accepted, and 18 exited. It is now at over-maximum capacity with 25 active cases, meeting one afternoon every other week. This is the first report to the Mental Health Board. A person with an SMI who has pled guilty or nolo contendere to an eligible felony who wishes to voluntarily participate is eligible (no sexual violence assault, serious personal injury to others, sales of drugs, or gang involvement conviction is eligible). Designed to be an 18 month program with four stages, the average time for completion by graduates to date is about 2 years, 2 months. Participants are about 85% co-occurring mental health and substance abuse disorders. The goals are to improve public safety, reduce recidivism, and improve mental health access and treatment for those in the justice system.

AGES SERVED:

- | | |
|--|---|
| <input type="checkbox"/> Children <input checked="" type="checkbox"/> Adult | <input checked="" type="checkbox"/> TAY <input type="checkbox"/> Older Adult |
|--|---|

DATES OF OPERATION: September 2008 - present

DATES OF DATA REPORTING PERIOD: Jan-Dec 2012

| <u>OUTCOME GOAL</u> | <u>OUTCOME DATA</u> |
|---|---|
| <ul style="list-style-type: none"> • 40% of participants exiting each year will successfully graduate.¹ <p style="margin-top: 10px;">Participants complete four phases that include: 1) Orientation and Beginning of Treatment (approximately 60 days but often longer to</p> | <ul style="list-style-type: none"> • 7 of 9 clients (78%) that separated from the program in 2012 successfully graduated. The other two were discharged for non-compliance. <p style="margin-top: 10px;">1 of 3 clients (33%) that separated in 2011</p> |

¹ This is an arbitrary goal developed with information gathered from a very small number of responding California mental health courts to our survey. National research indicates measuring a graduation rate can be misleading and not the best measurement of success. Research shows recidivism is positively impacted by involvement in a mental health court. Such courts are becoming an evidence-based practice.

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

allow for substance abuse treatment); 2) Life Skills Building (minimum 90 days); 3) Maintain Wellness and Recovery (minimum 180 days); and 4) After-care and Independence (minimum 180 days). There are numerous activities within each area that are included in order to move to the next phase, such as drug abstinence, progress in medication compliance, progress in wellness and recovery action plan development and implementation, housing stability, and stabilization of the psychiatric condition.

- Reduce recidivism of program graduates.

from the program successfully graduated. One separation was due to conserving the client to a higher level of care, while the other was voluntarily chose to no longer participate.

Of the remaining 6 separations prior to 2011, 3 were conserved and three discharged from BHC for non-compliance.

The cumulative graduation rate from inception is 8 of 18 separations from BHC or 44%. (Note this is not statistically valid with such a small sample size.)

- The 2011 graduate has had no recidivism the past two years.

Of the seven 2012 graduates, one re-offended. All have had at least 12 months post-graduation to date.

The total two year graduate recidivism rate is 12.5%.

Prior to BHC entry, the seven 2012 graduates had 16 convicted arrests among them for the year of their entry, pled to 12, and served a total of 840 actual days in jail or an average of 120 actual days each. Post-graduation to date (with the one re-offender yet unsentenced), the number is 1 convicted arrest with 0 jail days to date.

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

| | |
|--|---|
| <ul style="list-style-type: none">• Improvement in coping skills, behavior, and productive use of time | <p>Prior to BHC entry, the one 2011 graduate had 3 convicted arrests and served 86 actual days in jail. Post-graduation, he has had no convicted arrests and no jail time.</p> <ul style="list-style-type: none">• In order to graduate, participants must regularly attend therapy, learn new coping tools, show consistent improvement in behavior skills and increase their productive use of time. 100% of the graduates showed such improvement. |
|--|---|

Success Stories:

C1 came to court as a result of stabbing his neighbor with a fork resulting in superficial injury, believing a light in the neighbor's home was a bomb. The police were familiar with C1 and his mental health issues from prior interactions, but this was his first felony. After spending 5 days in a hospital and 132 days in jail, he began the BHC program the beginning of 2010. His inconsistently monitored medical condition of diabetes exacerbated his bi-polar disorder that included psychotic symptoms. His severe denial that he had any illnesses, medical or mental health related, impeded the management of both, and two months into the program violated his probation by not taking his medication and destroying property at the room and board property where he lived. After another 37 days in jail, he was released to Ruby's Sober Living. He credited the staff there with helping him learn about the importance of managing his diabetes, how to manage his own insulin injections, monitor his eating habits, and begin walking for exercise. He also attended anger management classes and AA. He later moved to a lower level of board and care home, got involved with Blue Sky and began to visit his family regularly. Two years from entering BHC, he graduated in 2012. He is now at a lower level of treatment, is living independently, got his driver's license and is driving regularly from his more rural-area home to participate in activities in Fresno. He has had no further arrests or involvement with the justice system.

C2 had four felony and five misdemeanor convictions in his record related to theft here and in other cities, with two of them deeming him mentally incompetent for a period of time. His diagnoses were schizophrenia and poly-substance

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

abuse. He began the program reluctant to participate in anything more than was required and inconsistently attended therapy or other appointments. His difficulty with budgeting led to the use of a payee for more than a year and his Personal Service Coordinator worked with him to stop pan-handling. After about six months, he began volunteering at a nearby thrift store that continues to this day, and later added other volunteer activities. He attended AA meetings, attended groups at Blue Sky, and began looking for a studio apartment to live on his own instead of a board and care. He learned to be responsible for his medications, taking them consistently, and all his drug tests were negative. He added an art class, began to look for work, and attended games and classes at Fresno State. He now lives independently, manages his funds without a payee, and moved down to a lower level of intensive case management. He has had no interaction with the justice system since his graduation in early 2012, which occurred two years after his entry.

DEPARTMENT RECOMMENDATION(S): Based on outcome and contract measurements reported, the Department recommends continuing MHSA funding for this program for FY 2013-14.