

PROGRAM INFORMATION:

Program Title:	Behavioral Health Courts/Coordinator Services	Provider:	Superior Court of California, County of Fresno
Program Description:	The Juvenile and Adult Mental Health Courts (i.e., Behavioral Health Courts or BHC) and the Adult Criminal Drug Court utilize a collaborative, coordinated approach to organize treatment, supportive services, case management, and supervision for participants. The collaborative teams include the judge, the coordinators, and representatives from prosecution, defense, probation, and treatment providers. The teams work together to remove barriers to recovery and wellness.	MHP Work Plan:	1–Behavioral Health Integrated Access 2-Wellness, recovery, and resiliency support Choose an item.
Age Group Served 1:	ADULT	Dates Of Operation:	Since 1998
Age Group Served 2:	CHILDREN	Reporting Period:	July 1, 2016 - June 30, 2017
Funding Source 1:	Com Services & Supports (MHSA)	Funding Source 3:	Choose an item.
Funding Source 2:	Choose an item.	Other Funding:	Click here to enter text.

FISCAL INFORMATION:

Program Budget Amount:	\$70,000.00	Program Actual Amount:	\$35,296.25
Number of Unique Clients Served During Time Period:	981		
Number of Services Rendered During Time Period:	The number of services vary by the specific court program. The adult and juvenile mental health courts coordinate an average of 12 services per month for each of the 104 participants in FY 2016-17, and the Adult Criminal Drug Court organizes an average of eight services per month for each of the 877 participants in the year. Services include mental health therapy; substance use treatment and education; self-help groups such as NA and AA; case management; drug screens; transportation assistance; and monitored referrals to housing, education, safe shelter, legal services, public benefits, license reinstatement, and legal record clearance. Based on the court service averages and the total number of participants served in each court in the 12-month reporting period, the total units of services is calculated to exceed 99,000 for the one-year reporting period.		
Actual Cost Per Client:	\$35.98		

CONTRACT INFORMATION:

Program Type: Contract-Operated
Contract Term: July 1, 2015 – June 30, 2018

Type of Program: Other, please specify below
For Other: Service coordination
Renewal Date: July 1, 2018

Level of Care Information Age 18 & Over:

Level of Care Information Age 0- 17:

The levels of care shown above do not apply. This program provides court service coordination.

TARGET POPULATION INFORMATION:

Target Population: The target populations are seriously emotionally disturbed youth offenders for the Juvenile Mental Health Court; severely mentally ill adult offenders for the Adult Mental Health Court; and substance-using adult offenders for the Drug Court.

CORE CONCEPTS:

- **Community collaboration:** individuals, families, agencies, and businesses work together to accomplish a shared vision.
- **Cultural competence:** adopting behaviors, attitudes and policies that enable providers to work effectively in cross-cultural situations.
- **Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services:** adult clients and families of children and youth identify needs and preferences that result in the most effective services and supports.
- **Access to underserved communities:** Historically unserved and underserved communities are those groups that either have documented low levels of access and/or use of mental health services, face barriers to participation in the policy making process in public mental health, have low rates of insurance coverage for mental health care, and/or have been identified as priorities for mental health services.
- **Integrated service experiences:** services for clients and families are seamless. Clients and families do not have to negotiate with multiple agencies and funding sources to meet their needs.

Please select core concepts embedded in services/ program:

(May select more than one)

Community collaboration

Please describe how the selected concept (s) embedded :

Cultural Competency

Individual/Family-Driven, Wellness/Recovery/Resiliency-Focused Services

Integrated service experiences

Multiple agencies partner to provide assessment, mental health and/or substance use treatment, probation supervision, educational support, and family support to rehabilitate participants and help them avoid future criminal activity. As a team, all aspects of the progress are discussed and consensus reached on next steps. Cultural and language needs are considered in arranging treatment and services, which are organized and centralized as much as possible for the convenience of the participants and their families.

PROGRAM OUTCOME & GOALS

- **Must include each of these areas/domains:** (1) Effectiveness, (2) Efficiency, (3) Access, (4) Satisfaction & Feedback Of Persons Served & Stakeholder
- **Include the following components for documenting each goal:** (1) Indicator, (2) Who Applied, (3) Time of Measure, (4) Data Source, (5) Target Goal Expectancy

1. Effectiveness: The success of the treatment courts is best illustrated by the high numbers of participants who voluntarily enter these programs annually and by the success rates. As collected from the court’s Odyssey case management system, in FY 2016-17 a total of 981 adults and youth entered the three treatment courts supported by this funding from the Department of Behavioral Health. Of those, 305 participants—nearly one-third—successfully completed their programs to have their charges dismissed. Not only do these participants reap the benefits of recovery, having their legal charges dismissed paves the way to achieving better long-term outcomes for employment, housing, family and social relationships, and other life factors. The court and its treatment court partners calculate that collectively more than 99,000 units of services were provided to the 981 participants in this reporting period. This was calculated using the average number of services coordinated by the three treatment courts funded by the Department in FY 2016-17. The Department-funded coordinators were an integral part of these outcomes.

2. Efficiency: For the Adult Criminal Drug Court, this starts with immediate contact with Department of Behavioral Health Substance Abuse Specialists who do brief assessments at the courthouse and speak to defendants before their arraignments about the benefits of engaging in recovery services. For the adult and juvenile BHCs, centralization and streamlining extends to the full service partnerships that enable treatment providers to deliver services directly or arrange closely monitored referrals. Participants’ attorneys—mostly public defenders—and the court coordinators also assist the court teams in understanding participants’ statuses and needs as well as responding appropriately. These professionals are central to collaborative case management and other joint decision-making. The coordinators, who are funded by the Department of Behavioral Health, are onsite at the courthouses to help participants reduce barriers to recovery and life stabilization. Treatment courts also expedite reports from a variety of sources on participants’ statuses in order to respond more quickly, thus increasing the effectiveness of interventions. In the traditional court setting, obtaining assessment findings and other reports about defendants can take to several weeks, thus delaying the onset of recovery. Treatment court participants routinely express gratitude and satisfaction to the judge, Probation Officers, attorneys, and the coordinators for the wide array of services, and for the efficiency, support, collaborative approach that the court teams utilize. The team staffing meetings also provide the partners the ability to provide feedback on operations and to discuss programmatic improvements continuously. This was the case within this reporting period in all three courts. The adult BHC developed an “Avoid Termination” process to keep high-need participants in the program who were at risk for being terminated. That court also restructured its staffing so that routine cases are now

discussed by a treatment-centered team in advance, providing more time for the full court team that includes the judge and attorneys to discuss complex cases on hearing days. The adult drug court continued looking for ways of reducing the high rate of failures to appear (in court) by working with the Fresno Police Department to reduce the period between the citation and the initial court appearance. That court team is also discussing reminder calls to participants prior to hearings. The juvenile BHC made efforts to educate new judicial officers and justice partner staff on the court process and services for frequent and successful referrals from other courtrooms.

3. Access: The goal of treatment courts is to coordinate effective treatment and services for justice-involved adults and minors affected by substance use, mental health disorders or co-occurring disorders. The treatment courts organize assessment/screening, case management, supervision, and services for efficiency, timeliness, and to increase access to these services for participants.

4. Satisfaction & Feedback of Persons Served and Stakeholder: Based on this success, in FY 2017-18, the Department has approved to stretch the existing funding to cover part-time hours for the contracted Family Dependency Treatment Court (FDTC) coordinator. The FDTC works with addicted parents who are facing the termination of parental rights as a result of their addictions rather than criminal charges. Coordination in the FDTC will maintain progress and enable the court to consider a capacity expansion in the year to come. The court appreciates the support from the Department in providing coordination services for the four treatment courts.

* Fresno Superior Court will collect data to demonstrate their ability to meet the five components of the four service domains for future Outcomes Reports.