

Alaska Criminal Justice Commission
Behavioral Health Standing Committee

Meeting Summary

January 30, 2018

Alaska Mental Health Trust + Teleconference

Commissioners: Steve Williams, Stephanie Rhoades, Dean Williams, Brenda Stanfill, Sean Case

Participants: Rob Henderson, Araceli Valle, Emma Pokon, Mary Geddes, Ben Urban, Morgan Jaco, Laura Brooks, Gennifer Moreau-Johnson, Chad Holt, Teri Tibbet, Pam Cravaz,

Staff: Barbara Dunham

Announcements and Agenda

Steve Williams called the meeting to order. There was no objection to the agenda. For the summary of the last meeting, Rob Henderson noted that Emma Pokon was present. Judge Rhoades noted two typos. There was no objection to approving the summary as amended.

Overview of Current Criminal Justice Reform/Reinvestment-Related Efforts

Steve referred to the handout describing the various criminal justice reform efforts on behavioral health and noted that it was the product of last meeting's discussion. A Venn diagram proved unworkable, so he settled for a set of tables which identify four major efforts and where they overlap in terms of membership and focus. The four efforts were this group, the Public Safety Action Plan (PSAP), the Criminal Justice Working Group (CJWG) Title 12 Competency Subcommittee, and the CJWG Therapeutic Courts Subcommittee.

Judge Rhoades asked where the centralized competency calendar and the Trust's disability justice initiative would fall. Steve said that the competency calendar was hanging out between this group and the CJWG subcommittee, and the disability justice initiative's efforts were captured in each of the four groups. Judge Rhoades said it was important to be comprehensive as this document could help save time for the various members.

Teri Tibbet wondered if it should also include the Mental Health Board and Advisory Board on Alcoholism and Drug Abuse, as those groups have also identified criminal justice reform as a priority. Steve said he wanted to focus on the groups whose main focus was criminal justice reform.

DOC Updates – Diversion Planner

Dean Williams explained that Mary Geddes had been hired to be DOC's diversion planner. He would like her to look for ways to divert those who would not be suitable for drug court or mental health courts, and was envisioning a larger scale of diversion than those models. He was

interested in seeing what's done in other states and he believed there was room in the budget to take a small team on a site visit if one model looked particularly promising.

He was interested in all types of diversion, and particularly diversion for those addicted to opioids (and/or other drugs) who would not have committed a crime but for their addiction. He would like a thorough process set up to reach all potential participants, not just a piecemeal program to be done on a case-by-case basis. He was interested in giving defendants a "door 2" option as soon as possible to give them a way to reduce their charges substantially or participate in a civil process instead.

Steve said it was understandable to want to concentrate on those addicted to opioid, but thought it was also important to remember that people with mental illness – or who had mental illness co-occurring with a substance use disorder – were overrepresented in the incarcerated population and driving up bed usage at DOC. This is the population that is also challenging for community mental health treatment providers. He also thought that the diversion didn't necessarily need to be pretrial.

Judge Rhoades noted that she her entire career had focused on ways to divert those with severe mental illness from the criminal justice system. She agreed that the number of people with severe mental illness and co-occurring disorders was a big driver of the inmate population, and this group of people can be treated using less resources.

Brenda Stanfill seconded Judge Rhoades' thoughts and added that in a recent listening session the Commission had learned that opioids are often not abused alone but in conjunction with other substances, and thought it was important to address this.

Rob said it was necessary to look at the available resources, and that to his mind there were three main groups that typically come up in the diversion conversation: the low-level offenders, the opioid/substance abusers, and those with mental health problems. The diversion program should not target the low-level offenders as they do not need heavy-handed intervention. He thought focusing on the mental health population might give the most bang for the buck.

Sean Case said that to his mind, the focus should be on diverting people to alternatives as quickly as possible, before they even get to the corrections system so they can avoid the negative consequences of incarceration, and get their underlying conditions addressed. He thought it was best to take a holistic approach, as many of these issues all occur together.

Steve said that it sounded like everyone agreed that substance use disorders can often co-occur with mental health disorders, and that it was important not to lose focus on any one group. Dean agreed, and noted that people have overlapping concerns. He thought the charge for Mary was to find the easiest bite at the apple. He thought if there was anything that was simply a process issue that didn't require funding, that should be done first, and then DOC can work outward from there. His primary goal was just to get to first base.

DOC Updates – Sequential Intercept Model Technical Assistance

Steve said this led into the discussion on the Sequential Intercept Model (SIM). At the last meeting it was decided it would be helpful to revisit this group's work on the SIM in 2016 as a way to identify some low-cost process reforms. He explained that DOC had received a grant for technical assistance in this area.

Morgen Jaco explained that DOC was in the preliminary stages of planning for the grant. Right now they were looking at a 1.5 day workshop in April to look at intercepts 4 and 5, focused on Anchorage. The technical assistance (TA) would help with resource mapping, crisis intervention training, and help refocus and realign reentry efforts. It may become the foundation for another second chance grant. The workshop would be open to 50 participants (and others may listen in if they wish). Nothing was yet set in stone; they were tentatively looking at April 12 or 13, or alternatively in May.

Steve asked to clarify: would the TA help the workshop walk through the whole SIM but focus on intercepts 4 and 5? Morgen confirmed this and said the TA provider they were working with was Mathew Robbins. Steve said it sounded like the Committee could also participate in the workshop, and wondered if the Committee could reach out to the TA provider about extending the length of the workshop (perhaps with funds from the Trust) to work on the earlier intercepts with the Committee. He thought it would be helpful to have the TA provider walk through what the Committee has already done and offer any insights.

Morgen clarified that though DOC applied for the TA grant, it was intended to benefit the whole community and anyone could participate. The 50 slots in the workshop were intended for policymakers and community providers from all over. She thought DOC could work with the Committee on developing the workshop to also suit the Committee's needs.

Rob said he appreciated the opportunity to learn more about the SIM and would appreciate learning more about the earlier intercepts. He noted the Commissioners had expressed interest in moving up intervention as much as possible. The PSAP also included looking into Washington State's law enforcement diversion program.

Sean agreed and said that he had also looked into those models. The problem with implementing them was that they seemed to be getting people who aren't going to reoffend anyway—the lowest-level offenders. So the trick was to implement a program that would get those resources to the population that needs a lot of intervention, where it will have more impact.

Judge Rhoades noted that each intercept is an opportunity to remove people from the criminal justice system to community resources. The earlier that happens, the less expensive the programming will be. The first intercept is the best place to do this, because the second intercept involves more players – DAs, PDs, DOC, the courts, etc. This is why it is important to use the SIM to focus resources and use this Committee to find commitments at each intercept from the various system participants.

Steve said he thought everyone was in favor of walking through the SIM—the question is whether they wanted to take the option to tag onto DOC's TA effort or work independently. Judge

Rhoades moved to leverage Trust funding to get DOC's TA provider to assist the Committee in looking at intercepts 1-3 in particular. Sean seconded the motion. The Commissioners present unanimously agreed, and the motion passed. Steve said he would work with Morgen to implement this idea. Judge Rhoades asked to be involved as well.

Alaska SUD Prevention and Treatment Overview

Steve said that he had collected several documents from DHSS that explain the various levels of treatment, how treatment is funded, and what programs exist where in Alaska. The latter was shown in a series of maps; Steve noted that these maps revealed that most of the state has adequate capacity for the lower levels of care, but this capacity diminishes as the intensity of care increases.

Arrest and Intoxication Update

Steve said that also tied into the next agenda item, the Commission's efforts on the arrested/intoxicated population. This had been the subject of a separate subcommittee chaired by Sean Case, but they had agreed to fold that group into this one.

Sean explained that this topic concerned the population of people who are not intoxicated enough for Title 47 but are nonetheless too intoxicated to be safely released once arrested. SB 54's bail fix helped with this somewhat, but that measure was just a band-aid; once this population is assessed and released, there is no help for them. There needed to be a step between jail and the street, and a way to start addressing the arrestee's underlying issues.

Rob summarized: they were talking about people who are not so highly intoxicated as to be Title 47 holds, but are intoxicated, have been cited, and need a place to go. Sean confirmed this. They are going to DOC now, per the new bail schedule, but jail is really not the right place for them.

Steve noted that Barbara had spoken with a representative at the Anchorage Safety Center (ASC), and had found that ASC's population was not the same as the arrested/intoxicated population. ASC took Title 47 holds. This other population is comprised of people who have been contacted and should not be left alone; there needed to be a way to get that population into services.

Rob asked how this related to the population in intercept 1. Sean said there was a good deal of overlap; the two populations may end up using the same road map.

Judge Rhoades asked what the effect was of the new bail schedule after SB 54. Sean said that if they arrest someone who is normally an OR release, but has a BRAC of more than .08 they can take them to jail. It is a band-aid, not a permanent solution. Rob agreed.

Laura Brooks explained they have instituted a process for this population as follows: they BRAC these offenders upon remand, then continue to monitor their BRAC until they reach a .08. Those under at Title 47 hold are not included in the new bail schedule provision. This is a problem because Title 47 only allows a 12-hour hold and there is no way to hold those brought in under Title 47 past the 12 hour mark, even if they are still above a .08.

Prioritizing Tasks and Meeting Dates

Steve noted that the Commission's chair had asked each subcommittee to identify their priorities for the year and their meeting schedule. For priorities, he suggested:

- Secure technical assistance to walk through the Sequential Intercept Model to focus on intercepts 0-3, identifying solutions for Alaska,
- Work with Mary/ DOC on diversion coordinating, and
- Arrest + Intoxication population: solutions for early intervention with this population.

He also noted that the group had previously talked about legal competency capacity issues and revisiting the UNLV report recommendations in light of new developments post-SB 91.

Judge Rhoades said she thought the group had agreed last time not to work on the UNLV report as a whole package but to use it as a resource to consult in walking through the SIM. She also noted that Karen Forrest had said DHSS could work on implementing the standardized Release Of Information and thought that should be kept on the group's radar. She also recalled the Commission had been talking about treatment capacity and thought that would come up as the group walked through the SIM. Steve agreed.

As to timing, Steve wondered if it would be beneficial to meet before the TA provider arrived. Dean Williams said it would be nice to find some low-hanging fruit on the diversion front sooner rather than later. Rob suggested getting an overview from Mary on diversion options at some point before the TA process. Steve agreed and said he would schedule a meeting accordingly once the TA piece was scheduled.

Public Comment

There was an opportunity for public comment but none was offered.