


MEMORANDUM

DATE	April 10, 2017
TO	Board of Psychology
FROM	 Cherise Burns Central Services Manager
SUBJECT	Agenda Item #4(b)(1)(B)(12) – AB 473 (Waldron) Mental Health: Criminal Justice: Pilot Project

Background:

This bill would require the State Department of Health Care Services, in conjunction with the California Department of Corrections and Rehabilitation, and in cooperation with the University of California Criminal Justice and Health Consortium to conduct a multiyear statewide pilot project in six counties for the purpose of assisting participating counties in creating cost-effective programming and treatment for the large population of mentally ill adults in county jail systems who have co-occurring substance use disorders, utilizing eligible funds from existing programs established to address mental illness in California communities for purposes of the pilot project activities. The consortium would be responsible for administering all aspects of the pilot project and counties would be selected pursuant to a competitive application process.

The bill also would require each pilot project to implement specified practices, including screening and diagnosis, integrated treatment, and transitional case management, as prescribed. Of concern to Board staff is the bill's language on cross-training jail-based staff to recognize and assess mental illness and substance use disorders, including potential screening and diagnosis and personalized treatment plans provided by trained jail-based staff.

Location: Assembly Committee on Public Safety

Status: 03/30/2017 From committee chair with author's amendments, amended and re-referred to Committee on Public Safety

Action Requested:

No action is required at this time. Staff will be watching AB 473 to determine if the bill would inappropriately allow unqualified individuals to perform psychological services and potentially harm those consumers with inappropriate diagnoses and treatments.



AB-473 Mental health: criminal justice: pilot project. (2017-2018)

SECTION 1. *The Legislature finds and declares as follows:*

(a) *The State of California has made it a priority to reduce recidivism among high-need populations in the criminal justice system including the mentally ill and misdemeanor arrestees who would be better served through diversion than entry into the criminal justice system. However, despite California's leadership on evidence-based criminal justice reform, an initiative has not been developed specifically for the population of adults with cooccurring mental illness and substance use disorders.*

(b) *The Vera Institute has found that 72 percent of individuals in jail with serious mental illness also have a substance use disorder and that these individuals spend more time in jail and have an elevated risk of recidivism compared to those with psychiatric disorders alone or substance use disorders alone. As California aims to reduce its criminal justice population, and reduce associated spending, it is critical to effectively treat this population.*

(c) *Strong evidence from the medical, criminological, and public health literatures show that successful interventions for the target population include the following elements:*

(1) *Jail-based screening and diagnosis to identify the population early in their involvement in the criminal justice system.*

(2) *An integrated treatment approach that begins in jail and continues into the community.*

(3) *Transitional case management that similarly extends from jail to the community.*

(d) *As with existing state-funded criminal justice reform programs, the effort to better serve this target population requires stakeholder input from across the criminal justice and health and social services landscape, as well as a robust, data-driven evaluation process.*

(e) *It is the intent of the Legislature to conduct a pilot project in various locations within the state to create cost-effective programming for the large population of mentally ill adults in county jail systems who have cooccurring substance use disorders, and to allow counties to utilize eligible funds from existing programs established to address mental illness in California communities to participate in a pilot project to create cost-effective programming for this population.*

SEC. 2. *Division 7.8 (commencing with Section 7800) is added to the Welfare and Institutions Code, to read:*

DIVISION 7.8. MENTAL HEALTH AND CRIMINAL JUSTICE PILOT PROJECT

7800. *The following definitions apply for purposes of this division:*

(a) *"Consortium" means the University of California (UC) Criminal Justice and Health Consortium, an established community of experts representing all 10 campuses of the UC system that is headquartered at the University of California, San Francisco. The consortium's purpose is to develop and disseminate evidence-based policy and to provide technical assistance to advance health-focused criminal justice reform in California.*

(b) *"Integrated treatment" means evidence-based interventions, including psychoeducation courses, cognitive behavioral therapies, and medicated assisted therapies for both substance use and mental health disorders that are administered in combination according to personalized treatment plans. These programs are intended to improve mental health and substance use outcomes as well as lead to the development of problem-solving skills and the elimination of problematic thinking patterns associated with recidivism.*

(c) (1) *"Steering committee" means a committee of representatives from relevant county agencies and community-based providers. A steering committee shall include a representative from each of the following:*

(A) *County sheriff departments.*

(i) County probation departments.

(ii) County mental health services.

(iii) County substance abuse treatment programs.

(iv) A former offender who is or has been a client of a mental health or substance abuse treatment facility, or both.

(v) At least ____ representatives from public or community-based agencies, or both, that provide mental health, substance abuse, housing, and employment support services.

(B) A steering committee representative on the steering committee shall serve as the dedicated point person for his or her organization, to facilitate relations among the different systems, and to identify needed changes to support a comprehensive system of care from jail to the community for the target population.

(d) "Transitional case management" means the assignment of a community-based case manager to eligible persons still in jail for case management that continues through the transitional reentry into the community to provide support, coordination of care, and continuity of services. Case management programs shall coordinate mental health services, substance use treatment, health care, housing, transportation, employment, social relationships, and community participation

7801. (a) The State Department of Health Care Services, in conjunction with the Department of Corrections and Rehabilitation, and in cooperation with the consortium, shall conduct a ____-year statewide pilot project as described in this section. The pilot project shall be administered by the consortium. The purpose of the pilot project shall be to assist participating counties in creating cost-effective programming for the large population of mentally ill adults in county jail systems who have cooccurring substance use disorders.

(b) The pilot project shall be conducted in six counties throughout the state pursuant to a competitive application process. Participating counties may utilize eligible funds from existing programs established to address mental illness in California communities for purposes of pilot project activities.

(c) The consortium shall administer all aspects of the pilot project, including application and implementation, and providing technical assistance to participants, and facilitating program evaluations by independent UC researchers. The consortium shall confer on a regular basis with the State Department of Health Care Services and the Department of Corrections and Rehabilitation regarding the progress of the pilot projects and the departments shall relevant provide information and technical assistance as necessary to support the consortium's activities.

(d) Each pilot project location shall include all of the following, in accordance with Section 7802:

(1) A screening and diagnostic strategy for identifying the target population early in their jail detention.

(2) An integrated treatment program that begins in jail and continues through the transition to the community.

(3) A transitional case management program that provides ongoing support for participants' engagement in care and distance from criminal behavior.

(4) A steering committee of representatives from relevant county agencies and community-based providers. In addition to administering and evaluating the pilot project program, the consortium will provide participants with jail-based clinical training and policy review technical assistance to ensure the development of evidence-based integrated treatment and case management programs.

(e) It is the intent of the Legislature that pilot projects will be awarded to urban and rural counties in equal proportion to ensure that the pilot project produces models of care that are readily adaptable to all communities in the state.

7802. (a) Screening and diagnosis provided pursuant to the pilot project may be accomplished by cross-training jail-based staff to recognize and assess mental illness and substance use disorders. Clinical training shall be supported by updated jail intake and health screening policies and procedures. Validated diagnostic tools that assess the need for both substance use disorder and mental health treatment shall subsequently lead to personalized treatment plans.

(b) Integrated treatment provided pursuant to the pilot project shall include simultaneous treatment of both mental health and substance use disorders by a single multidisciplinary clinical team with specialized training and qualifications in treating the target population. Jail-based integrated treatment programs should include a variety of evidence-based interventions, including psychoeducation courses, cognitive behavioral therapies, and

medicated assisted therapies for both substance use and mental health disorders that in combination can improve mental health and substance use outcomes as well as lead to the development of problem-solving skills and the elimination of problematic thinking patterns associated with recidivism.

(c) Transitional case management provided pursuant to the pilot project shall be employed when an individual moves from one setting to another, such as from incarceration to the community, to establish support, coordination of care, and continuity of services. Models such as forensic assertive community treatment, which employs the same multidisciplinary, team-based approach as integrated treatment, have been shown to reduce recidivism for individuals with serious mental illness leaving the criminal justice system by focusing on preventing future incarceration, rather than hospitalization, and directly collaborating with criminal justice authorities, including, but not limited to, probation departments. Case managers shall coordinate mental health services and substance use treatment with health care, housing, transportation, employment, social relationships, and community participation.

7803. *This division shall remain in effect only until _____, and as of that date is repealed.*