

## Taskforce Concerning Treatment of Persons with Mental Health Disorders in the Criminal and Juvenile Justice System (MHDCJS)

*MHDCJS is the only statewide task force that is exclusively focused on the intersection of mental health and the criminal and juvenile justice system.*

Authorized and governed by 18-1.9-101 through 106, the task force studies issues concerning persons with mental health disorders in the criminal and juvenile justice systems in Colorado. With the research and studies of the MHDCJS, the task force is then responsible for making findings and recommendations to the statutorily created legislative oversight committee. The Legislative Oversight Committee (LOC) is appointed pursuant to 18-1.9-103 by the leadership of each respective house.

The members of the MHDCJS task force take our charge with honor and responsibility and appreciate the importance of legislative relationships to achieve it.

32 appointed members:	Task force responsibilities include:	Notable Accomplishments:
<ul style="list-style-type: none"> <li>• Prosecution and defense communities</li> <li>• Human service system</li> <li>• Law enforcement community</li> <li>• Youth services system</li> <li>• Provider community</li> <li>• Members of the public and individuals with lived experience</li> </ul>	<ul style="list-style-type: none"> <li>• Examination of and recommendations regarding best practices, policy reform, liability, safety, and cost within our scope</li> <li>• Study of issues such as, housing, medication, treatment, and awareness data collection</li> <li>• Developing relationships with other task forces, committees, and organizations to leverage efficient policy-making opportunities through collaborative efforts.</li> </ul>	<ul style="list-style-type: none"> <li>• Bills that reformed competency policies for juveniles</li> <li>• Recommendations that lead to juvenile diversion programs</li> <li>• JERP</li> <li>• Promotion of medication consistency across systems (SB17-19)</li> <li>• Continued research into best practices of housing solutions, as well as legislation to enhance resources:                             <ul style="list-style-type: none"> <li>○ SB17-021 and voucher programs</li> <li>○ Rental application reform</li> <li>○ Zoning incentives</li> </ul> </li> <li>• Recommendations to juvenile sex offender registry reform</li> <li>• CIT grants and expansion training</li> </ul>

**The need for high quality, accessible behavioral health services in Colorado is higher than ever:**

- Mental Health America’s 2021 adult state rated Colorado 48<sup>th</sup> in adult rankings and 42<sup>nd</sup> in Youth ratings, indicating that adults and youth have higher prevalence of mental illness and lower rates of access to care than the majority of states<sup>[1]</sup>
- The fifth (5<sup>th</sup>) highest suicide rate in the nation.<sup>[2]</sup>
- Despite being an ACA Medicaid expansion state, Colorado is third (3<sup>rd</sup>) highest in people needing but not receiving treatment for illicit drug use at a substance abuse treatment facility,<sup>[3]</sup>
- Fifth (5<sup>th</sup>) highest for people needing but not receiving treatment for any substance use disorder at a substance abuse treatment facility,<sup>[3]</sup>
- The filing rate (per 100,000) for felony assaults on first responders increased by 29% from 2012 to 2017;<sup>[4]</sup>
- The rate of individuals requiring competency evaluations who have assaults on first responders also dramatically increased by 577% over the past ten years.<sup>[5]</sup>
- The rate of drug crime filings also increased by 39% from 2012 to 2017<sup>[6]</sup>

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## Taskforce Process & Focus Areas

The Taskforce meets monthly as a whole to discuss current projects and initiatives. Often, monthly meetings include presentations from advocates, partners, and other entities with similar focus areas. Annually, the taskforce undergoes a recommendation crafting process which relies heavily on subcommittee work.

### Current Subcommittee Projects:

#### Mental Health Hold (MHH) Subcommittee

1. What happens after a Colorado citizen is put onto a 72-hour MHH? Does a MHH lead to effective, consistent, targeted treatment? Can we better understand the existing data out of OBH? We may rely on previously used tools (SB 19-228) to determine if MHH processes can be statutorily improved.
2. We are determined to see Colorado enhance our reliance on diversion programs, mental health courts, Assertive Community Treatment (ACT), Assisted Outpatient Treatment (AOT), and Peer Support services to reverse criminalization of people with mental illness. Funding sources must be identified.

#### Youth Subcommittee

1. Focus on data and potential legislation to help mitigate/address the school to prison pipeline
2. Monitoring legislative ideas on this topic
3. Working collaboratively with the Office of Behavioral Health to address outstanding competency issues including the following:
  - a. Statutes do not lay out a clear process for the Courts or the Department to follow when competency is raised or after a finding of incompetency is made
  - b. Statutes do not clearly define terminology. This leads to confusion about what restoration providers do, what records they generate (attendance, topics covered, etc.), and what forensic evaluators do (opine on competency)
  - c. There is no waiver of privilege statute
  - d. Statutes do not discuss re-evaluations, contents of competency evaluations, or second-opinion evaluations (which may or may not be something the Department is concerned with)
  - e. Specify location of services to be in Colorado. Clarification on services at detention centers and who is responsible for these services- OBH or DYS and best practice guidelines.
  - f. Restoration process timelines
  - g. No specific services for significant concerns
  - h. Definition around restorability

#### Data & Information Sharing Subcommittee

1. Developed High Potency THC White Paper
2. Facilitated SB20-037 Trusted Interoperability Platform Advisory Committee Strategic Plan development
3. Implemented Bureau of Justice Assistance (BJA) Justice Reinvestment Initiative Grant to connect pilot jails site to the Colorado
4. Implemented BJA Justice Mental Health Collaborations Program Planning grant to develop specialized responses to 911 calls involving behavioral health crises
5. Submitted a BJA Connect and Protect: Law Enforcement Behavioral Health Responses proposal to attempt to find funding to implement planning process tools and training to develop and implement region specific specialized responses
6. Added new focus areas that include defining co-responder program guidelines and exploring the availability of vocational rehabilitation services for justice-involved individuals

#### Housing Subcommittee

1. Presented a formal paper with research and recommendations to Governor Polis' Behavioral Health Task Force

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2. Researched and made recommendations for amendments to:
  - a. SB21-137 (asking for mental health and dual diagnosis, not just substance disorders),
  - b. SB21-146 (Sections 3-6 that the parole plan should specifically have a discharge plan that provides appropriate housing for this high-needs population), and
  - c. SB21-242 (Recommending more guard rails and support for justice-individuals with behavioral health and dual diagnosis for next step supportive housing and addressing zoning ordinances that limit hotel motel stays and/or supportive housing)
3. Obtained stakeholder input and submitted a position paper to Health Management Associates (HMA) who were gathering information for Colorado's Behavioral Health Administration (BHA)
4. Held individual stakeholder meetings with HCPF, DOH DOLA, and OBH in response to the announcement of the American Recovery Act (ARPA) dollars and SB19-222
5. Continued collaboration with Mental Health Colorado, NAMI, and other entities for possible bills for the next two years
6. Ability to align efforts with the new Housing Panel, which will be giving recommendations for the use of ARPA dollars, since one of the subcommittee members sits on the panel
7. Drafting a formal letter to the Housing Panel with supporting research

### Strategic Planning Through the COVID-19 Pandemic

During the 2020 session, the MHDCJS taskforce and oversight committee were not allotted resources to maintain regular operations. The Taskforce decided to continue meeting regardless via virtual monthly meetings. This time allowed our subcommittees the flexibility to work on a number of high-value non legislative projects such as grant funded initiatives on 911 call responses to decrease criminal justice outcomes and connecting pilot jail sites to the Colorado Criminal Justice Information Sharing System for continuity of care, developing a high potency THC white paper, identifying and researching youth competency evaluation needs and solutions, monitoring and providing input on other housing legislation, and convening the advisory committee established under SB20-037. Additionally, the Taskforce underwent a strategic planning process with support from EPIC at the Department of Criminal Justice. A [full report](#) was crafted, and several future focus areas were identified as opportunities for future study, including:

- Affordable housing options w/ wrap around services for releases from DOC/ jails (social impact bonds, investors, subsidized funding, support services)
- Enhanced diversion programs for minor and direct charges so they are immediately diverted to treatment.
- Defining Co-Responder Models, the standards for each model, and state-wide expected outcomes and creating policies to incentivize programs that meet these standards and contribute to the outcomes.
- Vocational Rehabilitation services - are individuals with behavioral health/co-occurring disorders eligible who are leaving jails/prison. How is eligibility determined, can it occur prior to release? M
- Develop and implement a plan to implement evidence-based practices regarding juvenile justice system prevention and Colorado committee/initiatives engaging in prevention efforts and prepare a report to present to the Task Force by Sept 2021.
- Collaboration with Latino Coalition and the WAGEES grant (Work and Gain Employment and Education Skills Program) with a focus on the MHDCJS population.

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### References

- [1] Mental Health America (2021). The state of mental health in America. Alexandria, VA: Author. <https://mhanational.org/issues/2021/ranking-states>
- [2] CDC (2019). Suicide Mortality by State. Author. <https://www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm>
- [3] SAMHSA. 2016-2017 National survey on drug use and health: Model-based prevalence estimates (50 states and the District of Columbia). Rockville, MD: Substance Abuse and Mental Health Services Administration, U.S. Department of Health & Human Services.
- [4] Data extracted from the Colorado Judicial Branch's information management system (ICON) via the Colorado Justice Analytics Support System (CJASS) and analyzed by the Division of Criminal Justice. Note these figures represent cases, not individuals.
- [5] Colorado Office of Behavioral Health data analysis provided to Peggy Heil on 12-28-18
- [6] Colorado NIBRS data, analyzed by the Colorado Division of Criminal Justice, Office of Research and Statistics.

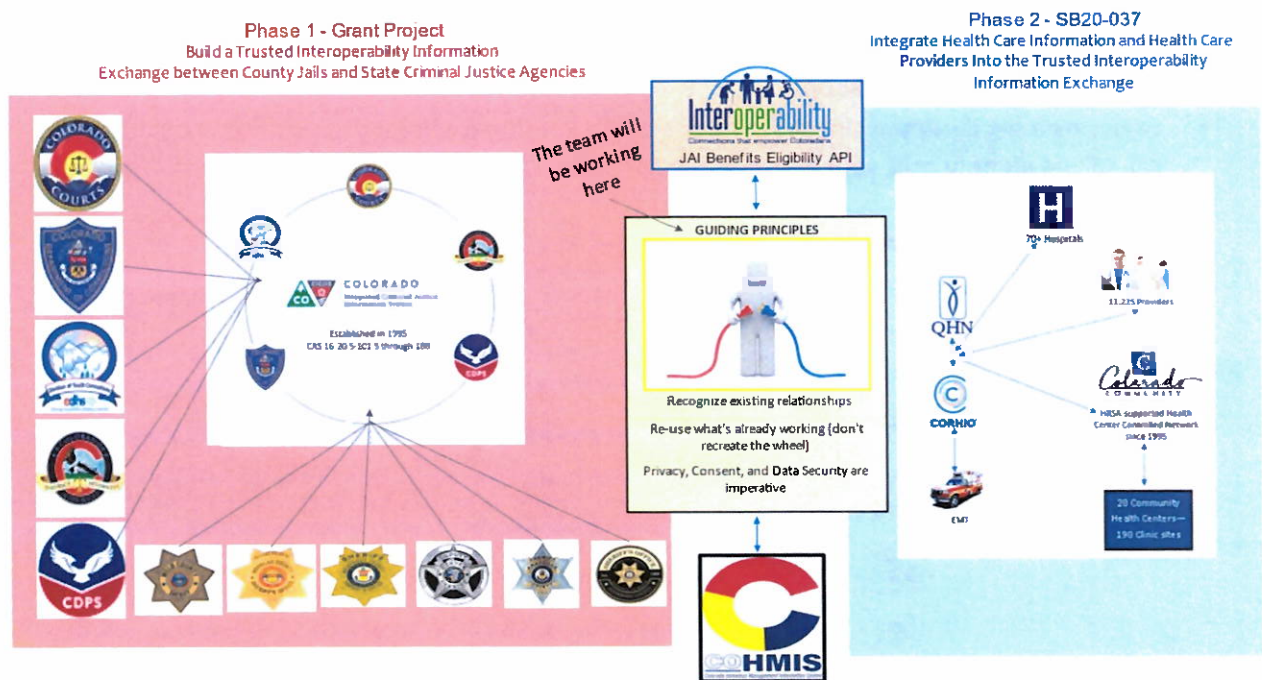
## Data Sharing Subcommittee Update for the MHDCJS Task Force Meeting on 6-17-21

**Marijuana White Paper** update – HB21-1317 Regulating Marijuana Concentrates passed with amendments (Libby)

### **SB20-037 Trusted Interoperability Platform Advisory Committee update –**

This bill forms an advisory committee to develop a strategic plan for a trusted interoperability platform to improve continuity of care for justice involved individuals with behavioral health disorders and data for resource needs identification and system evaluation. The goal is to develop the infrastructure to permit information exchange between the Colorado Integrated Criminal Justice Information System (CICJIS), the Health Information Exchanges, the Joint Agencies Interoperability (JAI) benefits domain, and the Homeless Management Information System (HMIS). The Governor's Office of Information Technology has been providing support to the advisory committee and recently assigned OIT's Colorado Digital Services to help finalize the first draft of the strategic plan. DCJ and OIT staff are currently working on the first draft of the strategic plan. The plan will be reviewed and revised by:

- Send to TIP Advisory committee for review on June 25<sup>th</sup>
- Send to OIT Director for review on July 26<sup>th</sup>
- Meet with TIP advisory committee to review final strategic plan draft on August 8<sup>th</sup>
- Send draft to the legislature on September 1<sup>st</sup>

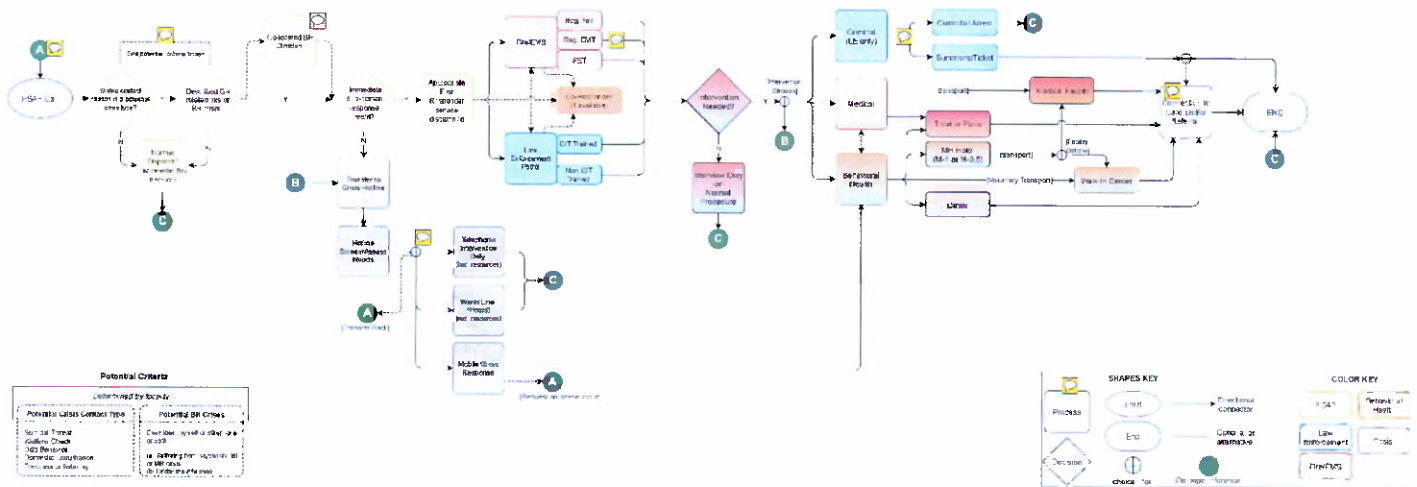


**BJA Justice Reinvestment Initiative Grant** focused on connecting jails management systems to the criminal justice information exchange to improve continuity of care and evaluate system needs and effectiveness.

- Connecting six pilot jail sites to the criminal justice exchange. This is the first step in building a broader trusted interoperability platform.
- Convening a multiagency group to develop common needs codes that can be used across systems to increase continuity of care and decrease gaps in services as justice involved individuals with behavioral health needs transfer to different systems.

**BJA Justice Mental Health Collaboration Program Grant** focused on 911 calls involving behavioral health crises update –

- Planned pilot programs in Denver and Englewood to triage and transfer appropriate 911 behavioral health crisis calls to the Colorado Crisis Line.
- Planning three tools:
  - A web-based interactive PSAP planning process for specialized responses to calls involving behavioral health crises,
  - A web-based interactive decision tree to identify jurisdiction specific specialized responses to these calls and links to funding and training resources to implement them, and
  - A web-based specialized emergency response services registry and map of specialized response resources and programs in each county.
- Identifying relevant training for call takers and emergency responders
- Exploring a voluntary protected disability registration process that can only be used for emergency response situations.
- Exploring a big data/machine learning project to see if there are indicators that would help 911 call takers identify calls with behavioral health crises to dispatch specialized emergency responders.
- Project decision tree created by Emily Richardson at OBH



There are two new BJA Justice Mental Health Collaborations Program (JMHC) implementation grants due in July. We are considering applying for both grant solicitations to carry out the plans and progress developed in the current JMHC planning grant. It will be helpful to have a letter of support from the task force. Based on input from current stakeholders, technical assistance from JMHC grant, and needs of Colorado we have two options to consider.

- **1st grant proposal** – BJA Justice and Mental Health Collaboration Program (O-BJA-2021-95004)
  - To provide consultation to local jurisdiction on the web-based interactive:
    - Process Planning guide,
    - Decision Making tool, and
    - Statewide PSAP and Behavioral Health Resource.
  - To implement the planning grant tools in a rural community to develop a model specialized response pilot program.
  - To implement a pilot program for co-locating a Peer Specialist in a PSAP. The role of the peer specialist is verbally supporting a person in crisis between the time that the 911 call taker dispatches an emergency responder and the time that the dispatched responder arrives. The goal is to help keep the individual calm, prepare them for what to expect, determine what helps the person get through a crisis, provide hope, and communicate information that can help the emergency responder be more effective. This pilot may also include training for PSAP on role of Peer Specialist and data gathering of calls benefiting from Peer support services.
  - Peer Specialist navigators for post-crisis connection to support services.
- **2nd grant proposal** – Connect and Protect: Law Enforcement Behavioral Health Responses (O-BJA-2021-12001)
  - Increase the availability of behavioral health, suicide prevention, de-escalation, and resiliency training for 911 Public Safety Answering Point call takers and emergency responders.
  - Create statewide peer learning sites program to provide consultation to jurisdictions that want to implement specialized emergency responses to 911 calls involving behavioral health crises.
  - Create a protected voluntary disability registration system and provide education about the option.
  - Establish funds to help jurisdictions add BH/CIT qualifiers to their CAD system nature codes.
  - Conduct further data analysis on 911 calls involving behavioral health crises and promising practices for emergency interventions by piloting use of data collection in multiple pilot jurisdictions with focus on replicability.





## Housing Subcommittee work:

### Bills Passed:

1. SB17-021 and SB18-016: Community corrections reversion dollars to fund housing for individuals released from corrections and jails. These bills were then the building platform and expansion that led to the passage of HB19-1009

2. 2019- 2020 Housing subcommittee's research and proposed tenants rights in apartment applications was found by Legislative council to be beyond scope off MHDCJS. Subcommittee collaboration with Colorado Center on Law and Policy for passage of the bill through other sponsorship.

3. HB20-1035 for Development of Housing Supportive Services in rural, frontier, and underserved communities. Died in appropriations with twenty some other bills due to COVID.

4. During COVID housing subcommittee did the following: 2020-2021

a. Presented a formal paper and research with presentation to Governor Polis' Behavioral health Task Force with specific recommendations for Housing for the cross section of individuals with behavioral health and justice involved issues

b. Researched and made recommendations for amendments to the following bills

1) SB21-137: asking for mental health and dual diagnosis not just substance disorders with a certain amount targeted for those serving this population

2) SB21-146: Specifically Sections 3-6 that the parole plan should specifically have a discharge plan that provides appropriate housing for this high needs population

Bill was void of any supportive housing.

3) SB21-242: supporting but asking for more guard rails and support for individuals with behavioral health dual diagnosis justice involved for next step supportive housing and addressing zoning ordinances that limit hotel motel stays and/or supportive housing.

5. Housing subcommittee also had stakeholder input and a position paper to Health Management Associates (HMA) who were gathering information for Colorado's Behavioral Health Administration (BHA)

6. Since the announcement of the American Recovery Act (ARPA) dollars and SB19-222 the housing subcommittee as had individual stakeholder meetings with HCPF, DOH DOLA, and OBH

7. Collaboration with Mental health Colorado, NAMI, and other entities for possible bills for the next two years

8. A Housing subcommittee members also sit on the new Housing Panel, which will be giving recommendations for the use of ARPA dollars

9. Housing subcommittee is in the process of drafting a formal letter to the Housing Panel with supporting research.

10 Proposed bills: