Forensic Interagency Task Force 3-27-2018 Meeting Narrative

Those attending the FITF meeting held in the DOC Training Academy on the above date were: Larren Armstrong (Forensic Specialist); Michelle Baxter (OMHSAS); Daniel Beauchamp (Regional Forensic Liaison); Sara Breen (PA Bureau of Community Corrections); Tory Bright (Regional MH Services Coordinator); Talia Broubalow (Northampton Co Mental Health); Ron Colbert (Scranton Counseling Ctr); Andrea Concordia (SAM, Inc CM); Stacy Condie (JRS Unit Manager); David Dinich (President FTAC); James Fouts (Dir of FSS); Heidi Fuehrer (Psych Services Specialist); Laurie Hess (FCCll); Jeffrey Hilaman (Chester Co MH/IDD); Mary Jordan (Dir. Specialized Clinical/CJ); Michael Keefer (MH Court Coordinator); David Lopes (MH Advocate); Robert Marin, MD (Psychiatrist); Ginny Mastrine (OMHSAS); Ray McManamon (Dir. Emergency & Court Serv); Teri Miller-Landon (Deputy Dir. APP); Thelma Mitchell, M.Ed, M.Div; Heather Pack (Forensic CM); Mary Penny (Statewide Housing Coordinator); William Price (CMU Admin CM); Melissa Repsher (Reentry Dev. Dir.); Megan Rice (Justice Related Services); Dennis Russo (Dir. Forensics); Kristi Schuster (BHARP); Matthew Sheaffer (Parole Agent 2); Gale Sherrid (Social Worker 2); Deborah Shoemaker (Ex. Dir. of PA Psychiatric Soc); Dave Slinger (Forensic CM); Vivian Spiese (FTAC); Jennifer Swope (Social Worker); Paul Turcotte (ASERT-PA); Llovd Wertz (FTAC); Elaine Ziegler (MH Mgr. Chester Co. Prison); and Lisa Zook (PA County MH/DS Admin Association).

Facilitator, James Fouts of Forensic Systems Solutions(FSS) and FTAC, welcomed the group and called for self-introductions. There was an announcement that tomorrow will be the inaugural meeting of the Coalition for the CommonHealth, which is dedicated to encourage increased coordination between and among Departments.

Michelle Baxter of OMHSAS announced that there is a SOAR initiative at a County Jail within the Commonwealth. This is hoped to bode well for the future for benefits applications and other areas to improve re-entry/release planning. It was also noted that the DOC is now doing Social Security applications for inmates for SSI and SSDI. Michelle Baxter strongly suggested that there be conversation with her office on this topic to help with coordination and to offer further education to those who are involved in that project. It was further encouraged that there be a person from the DOC Re-Entry Division to attend the next meeting to further edify the FITF and to offer guidance to folks within that Division as well.

The main presenters were introduced by Dave Dinich of FTAC.

The presentation was "Social Determinants of Arrest and Incarceration: Perspectives of Community and Professional Stakeholders" and offered by Robert Marin, M.D. and Thelma Mitchell, M.Ed, M.Div. Dave noted the Centers of Excellence that Bob Marin co-directs and manages who work with educating and training psychiatry Fellows in the practice of Community Psychiatry. He noted Bob's capacity to consider aspects of any social issue that might not be considered by others engaged in the system and focused on the issue.

Thelma and Bob offered some of their personal histories and what brought them to the realizations and concepts that will be shared at today's Meeting. Thelma noted that she is a therapist in a recovery-oriented program, working with folks who suffer from Serious Mental Illness(SMI). She shared her realization that the prescribing of medication is simply insufficient to address the needs of folks with whom she was dedicated to work. This led her to other aspects of her life's work. She later became a missionary in foreign, disadvantaged countries. She shared that there seemed, to her, to be more of a need for our citizens to learn from those in less advantaged environments, who seem to be happy with their lives despite the paucity of comforts afforded them in their homes. She then returned to a Mental Health position at the Western Psychiatry Institute and Clinic.

Bob offered his opinion that it is difficult for many folks to experience an appreciation for those of other cultures and races, even in our own country, and that learning of that nature is essential to move forward and address mutually impactful issues.

Bob then briefly referred to the current initiatives in which the Center for Public Service Psychiatry(CPSP) is engaged. He shared the Vision statement from the CPSP. He also listed the Objectives for today's presentation with some focus on the upcoming conference that his group hosts annually and to addressed the issues within the Correctional system in order to better serve those within it who suffer from SMI and have a historical background of Social Determinants. He then shared last year's conference "Correction Corrections: Road Map to the Mental Health of Our Communities." Bob found his preparing for that event to have been a learning experience and that suggestions toward addressing these issues, finding solutions, to be the motivating factors for pressing onward in that pursuit. He listed the Stakeholders on these topics to be:

- The BH System
- Correctional System
- Community Members and Organizations
- Community Advocates
- MH/SU Services Consumers
- Families
- MH and Correctional Peers
- Inmates with Lived Experience
- Educators
- Government and policy makers
- Law enforcement/Police
- Religious Community
- Other Social Services.

This set of stakeholders are seldom gathered together over any topic, but in this case seemed to have a common interest or a set of collective concerns in their home communities and are, thus, personally engaged in seeking their resolution.

Thelma then took the microphone to share her perspective and learning. She shared the Goals of SMART, standing for

- Specific
- Measurable

- Attainable
- Realistic
- Timely

She shared that her experience as a therapist that she seems to have a far greater number of her clientele who are females, almost none of whom are males. She shared that many of those females in treatment are living in fear of how the system in which they live have manipulated their lives. This has resulted in many of these women as seeing folks in the legal/forensic system as being their allies, versus the history of their seeing them as the enemy. There is often a hope on their parts that invoking the legal system might help them regain control of their families/loved ones. How to leverage that existing reality to effect real change in the community was one of the questions that she posed to the group. She further shared her perspective is that NO Community is safe or insulated from the negative effects of criminal behavior. She did note that there should be mutual benefits as the motivating factor of working together to solve these issues for our own selfinterest.

An attendee asked about how much benefit is gained through the employment and use of peers in the processes that are being discussed. The response was that these resources are important and frequently brought to bear on these situations. Thelma shared her perspective that there seems to be attitudinal problems that have developed, unintentionally, within the Peer community who may have been mistrained and thereby misrepresent itself. That training needs to be addressed, created, and administered in the community.

Bob also shared the concept of Trialogues—a group discussion among the Police Department(s), the Social Service providers and the interested/engaged Community Members who have committed to meet and share on a regular basis. He noted that this is a doable type of event to get started in a community, and also offered guidance if there is some needed. The concept of Family Peer Specialists and the plans for these folks being trained over the next several months and recognized by OMHSAS and its BMHCO's for service provision in the community were also discussed by an OMHSAS staff member in attendance today. Bob also referred to "Amachi" in Pittsburgh as being intended to understand and serve those who are children of folks who will be going to serve time in Prison. AMACHI uses one-on-one mentoring as the basis for its implementation. He also referred to the need to develop "Community Informed Care" in a similar context as that which is currently addressed with programs such as Trauma Informed Care. Thelma added that there needs to be more engagement between the communities and its law enforcement personnel in order to help the folks who live in those communities and who can partner with them to form collaboration efforts and, perhaps, to view each other as very human, and not demonized with an expected view that generates from their families and/or peer groups.

Thelma then asked the attendees about "What are your greatest challenges in our work?" The first response was that there needs to be more, and consistent psychiatrists in the community. Perhaps other ways to provide psychiatric services might be important as well. This could and should include the practice of Nurse Practitioner. It was shared that this group is hard to recruit into the Corrections system. This shortage extends into the community as well and needs address in order to prevent those who tend to reoffend without consistent medical care including that of psychiatry. This was accompanied by an impression that there is a need to recognize that there need to be long term care beds in the community or in the State Hospital setting for certain reasons which can, perhaps, never be remediated.

The need for vocational training and jobs has to be addressed if these efforts are to be effective going forward. It was further suggested that the criminal choices to secure a sustainable vocation in their communities have, at their base, an economic motivation. Therefore, in order to address those motives, there need to be alternatives created for those folks as they return to their communities to make those alternatives more attractive than what they had been doing.

The need to train therapists in working with former or current inmates and who exhibit criminogenic behaviors was highlighted as well. It was noted that Criminal Justice has become a more popular educational curriculum than Social Services. It was suggested that these curriculums do not seem to provide the reality experiences of what to expect in the field to the surprise of those who graduate and end up working in a Corrections setting.

One attendee shared some history of confining youth in a "Developmental Center" and trying to address issues that are actually self-replicating in their home communities

There was another comment on the topic of creating interest and increasing public advocacy in our home communities, Harrisburg, and Washington, DC. It was shared that there needs to be training in these areas to motivate and engage those in the community to take on the role of advocate and taking these issues to the policy makers who are involved. There needs to be outreach into the community to try to cause those in the political system to realize the value of prevention in the community and to fund it proactively.

There was an observation that we remain "siloed" in working within our own areas of concern and service with individuals who have needs that extend beyond and across those lines of concern and service. More time, less caseload, more competent staff, more peers, and, essentially, more people to walk side-by-side with the folks who live in the community with forensic backgrounds and mental health histories. The question of "What holds us back?" was posed. Our own vulnerabilities

It was further agreed that housing must remain high on the list of aspects that need to be brought to bear.

Bob Marin then suggested that a discussion and sharing of strengths that are going on in the community or within our individual selves could be helpful at this time. The microphone was passed to ask the attendees to share their personal strengths. Many folks participated and noted how they have positively impacted their perspective on life and their work. These included:

- understanding others,
- balancing data or knowledge with relationships or wisdom,
- integrate your personal experiences and sense of identity with your work,
- understanding ideas/concepts and arrange them into an institutional planning process.

- grasping relationships with other departments/professionals and capitalizing on them,
- Challenging history of practice and creating new/improved methods of operation.

Bob then called for a summary of the today's discussion and a focus on a "What Next?" process. The potential of a Correction Collective to take the leadership in addressing these issues going forward, perhaps represented by some of the folks in this room. There was recognition that there are capacities that can be marshalled toward this end.

The Meeting adjourned at this time.

The next meeting of the FITF is scheduled for May 22, 2018 at 10:00 AM on the DOC Training Academy campus.

Respectfully submitted,

Lloyd G. Wertz, FSS/FTAC