

Forensic Interagency Task Force
September 22, 2015
Minutes

Those attending the meeting held in the DOC Training Academy on the above date were: **Carol Bamford** (Director of Emergency & Court Services); **Maureen Barden** (Project Fellow); **Michelle Baxter** (OMHSAS); **Daniel Beauchamp** (Regional Forensic Liaison); **Patricia Brader** (Community Relations Specialist); **Tory Bright** (SE Reg. MH Services Coordinator); **Margaret Chapman** (NAMI President); **Janeen Christ** (Regional Reentry Administrator); **Lance Couturier** (Lic. Psychology Director, annuitant); **Hazel Dacus** (Forensic Liaison-DOC); **David Dinich** (President FTAC); **Chris Fitz** (Executive Director, CCP); **Charles Folks** (Director of Counseling & Community Integration); **James Fouts** (Dir. Forensic System Solutions); **Heidi Fuehrer** (Psychological Services Specialist); **Jeff Geibel** (Treatment Supervisor); **Michael Gorzelic** (Case Manager); **Patricia Griffin** (National Gains Center); **Julie Holtry** (MH Director of LCBHDS); **Mary Jordan** (Director); **Alissa Kachel, M.Ed** (Community Relations Specialist); **Michael Keefer** (MH Court Coordinator); **Marirosa Lamas** (Superintendent); **R. Litzenbauer** (Social Worker 1); **David Lopes** (MH Advocate); **Lucas Malishchak** (Psychologist); **Philip Mader** (Director of Community & Hospital Operations); **Andrea Priori Meintel** (CCTM); **Kerri Miller** (SPORE Case Manager); **Deb Neifert** (Deputy Director of MH/DS Administrators); **Robert Nichols** (Prime Care); **Lynn Patrone** (DOC MH Advocate); **Brenda Penyak** (PA. Assoc. County Administrators); **Jessica Reichenbach** (MH Program Representative); **Melissa Repsher** (Director); **Luis Resto** (Acting Director PA Bureau of Community Corrections); **Leigh Richardson** (Allegheny County Justice Related Services Unit Manager); **Sandra Riggers-Vollrath** (Psychological Services Specialist); **Kelly Rodriguez** (Training Sergeant); **Emily Scordellis** (Regional MH Director); **Matthew Sheaffer** (Parole Agent 2); **Jill Shepler** (Deputy); **Deborah Shoemaker** (Executive Director); **Shirley Moore Smeal** (Executive Deputy Secretary of DOC); **Jack Sommers** (Superintendent SCI Walmart); **Vivian Spiese** (FTAC); **Joan Steinberg** (Board Member ABIN-PA); **S. Drew Taylor** (SPORE Director); **Charles Van Ravenswaay** (Forensic Specialist); **Jack Walmer** (Chief of Psychological Services); **Lloyd Wertz** (Vice President FTAC); **Justine White** (); **Jenn William** (CMP-MH/DS); **Katy Winckworth-Prejsnar** (Project Coordinator); **Chris Wysocki** (JVBDS Administrator); **Elaine Ziegler** (MH Manager)

This is the second meeting of this resumption of the Forensic Interagency Task Force (FITF) convened by FTAC with approximately 57 attendees. Superintendent Marirosa Lamas welcomed the group and shared some housekeeping information such as restroom directions.

Dave Dinich also welcomed the group and asked for introductions.

Shirley Moore Smeal Executive Deputy Secretary from the PA DOC then addressed the group in the absence of DOC Secretary Wetzels, who could not attend due to Harrisburg duties which had

to take precedence. She noted that in her over twenty years of work in the Department, she has never before seen this level of collaboration and coordination and the further dissolution of the “silos” that had been put in place over the years. She noted that she is encouraged about the attendance and work with this group and looks forward to continued efforts. She related that it is said within the DOC: “The best part of re-entry is no entry.” She also encouraged that the group sees its efforts as a “two-way highway” with give and take across the lines of responsibilities. She stated that the Secretary has, essentially, re-defined what it means to be a collaborative Department of Corrections. She thanked the group for its work now and in the future and offered her best hopes for those efforts.

Dave Dinich then said that the last meeting was two months ago, with a phone conference between meetings to determine the next steps to be taken and creating the presentation Agenda for this meeting.

He called upon Chris Wysocki, Administrator of Juniata Valley BH Services to discuss the progress from the last meeting and the furthering of collaborative efforts, especially working with those who are “maxing out” of the State Prison system. Chris noted the fact that there are occasions, albeit infrequent, when there is little notice, and thus little time to prepare for the re-entry of individuals back into their home counties. He said that there is a document to assist the inmate being released for use in this process. He also related that there is little hope that an individual who has Serious Mental Illness is be able to take full advantage of that document and the process that it outlines. He referred to the reduction of children in placement over the past several years as an example of how counties can truly collaborate with State Agencies and, in that case, the BMHCO’s in moving toward a common goal.

He referred to the inability of counties to force the taking of psycho-active medication once release to the community occurs. He posited that there might be ways in which the release of individuals, before “maxing out” could involve stipulations in the release documents which might provide assistance in this matter of medication compliance. He also suggested that there could be a group created and tasked to address this issue in a manner that would add more structure to the functions that currently exist.

Dave Dinich continued the discussion of creating a group of this nature. After consideration by the DOC, Counties, and perhaps the Parole and Probation Department, he asked Marirosa to comment on the issue. She noted that there are relatively few inmates who max out of the DOC System and a smaller number of those who are seriously mentally ill. One participant offered that there is a group which works out of the Waymart facility which seems to be addressing this type of circumstance and has been meeting some level of success. This is believed to be operational for about 10 years with a relatively low number of released individuals involved each year.

Dave Dinich then opened the door to the group for discussion and asked for suggestions. He asked if there has ever been a situation in which the involved counties have been invited into the discussion upon the initiation of the sentence. It was noted that this has occurred as much as two years prior to the scheduled release. One participant stated that, in her opinion, any release of an individual with serious mental illness should be arranged to occur in the manner that has been piloted at the SCI Waymart. If that can be arranged for anyone, and not just the hardest to place, it would be beneficial for all involved. For example, six months of information about the individual might be necessary for any providers to accept the referral for serving the inmate. It was shared that there are teams of institutional staff, a parole office, and a supervisor with clerks to assist in the preparation of documents and info for the Parole Board to consider when application might be made in the case of the SCI Waymart program.

It was also added that the process at SCI Waymart is available for other institutions throughout the Commonwealth. A county representative also noted that there is information within counties that can and should be shared with the DOC. The sharing of that information seems to be present possibilities. It was suggested that the information be shared with the county that has been designated as the one to which the inmate is set to return. This should involve consistent contact and re-evaluation of the plan for release until the time that it occurs. Developing plans which include not only MH planning, but also SU and others as dictated by the needs of the inmate would be important prior to and upon release. It was added that, in addition to the County and State Officials, there should be providers of service at the table to discuss the expectations and to increase the chances of success at the actual time of release. This was further supported by a county representative, noting that this provider involvement is essential.

Marirosa suggested that a set of stakeholders from the FITF could be assembled into a Focus Group to come with a set of protocols for this purpose. Another suggestion was to make it a Planning Group, rather than Focus Group so that there are a limited set of participants who have deep and broad experience who can establish workable plans to be presented to the FITF. Rather than determine availability of grant monies at this time, it was suggested that the Planning Group would be best able to make that type of suggestion. There was also a recommendation that there should be a rural focus on these plans. Marirosa suggested that the FITF establish a Planning Group now and asked for volunteers. It was agreed that participation from the DHS is needed to be part of the Group.

A participant noted that we might actually be discussing two separate initiatives. One might address the individuals who have needs which have demonstrated SMI early in her/his prison term. Another could be directed toward the establishment of what the models of re-entry can be identified and shared until the Committee can reach agreement. It was further suggested that these might be parallel processes which can be developed conjointly so that the full light of their development can be shared to better encourage collaboration and positive implementation. One participant asked if there could there be an overall plan developed which is then customized for operation in individual counties. There was recognition of variables that exist across the

Commonwealth that each have strengths and weaknesses that are specific. The creation of a process that is most likely to meet success might be the best goal to pursue at this time.

There was a suggestion about having the Center of Excellence in a position of leadership. The response was that this is possible, but would require further discussion. The participants might be County Commissioners' Assn, Providers Assn, DOC, Board of Probation and Parole, DHS, County Jail Administrators. Tory Bright agreed to serve as Chair, and Co-Chairs will be Chris Wysocki and Marirosa Lamas. Additional members of this "Committee on Re-entry" are James Fouts, Brinda Carroll Penyak, Matt Sheaffer, Leigh Richardson, MA, Mary Jo Dickson, Melissa Repsher, William Folks, LCSW, Michelle Baxter, Lloyd Wertz, Michael Gorzelei and Luis Resto.

Patty Griffin of the PA Mental Health and Justice Center of Excellence was next to make a presentation. There was a description of the Center of Excellence distributed to attendees for review and learning about the effort. She then went on to note the efforts to have "Mapping" projects in 43 counties with two more scheduled in 2015. There has also been a Follow-Up Technical Assistance Mapping in six counties. The learning from these projects has been extensive.

She offered a "Laundry List" of things to be considered:

- The issue of re-entry from State Prisons is a relatively small number, compared to those coming out of local jails.
- The issues that are lifted from the County perspective are those of need for collaboration.
- There are concerns about inconsistencies between and among the various DOC facilities; sometimes those inconsistencies exist even within one facility. This can relate to communication, timing of sharing information, and others.
- The Caseload List from the DOC which is distributed to the County Programs presents concerns about predictability as to timing. At times this timing seems to be random. Some counties do not understand the information which is sent. Perhaps a cover letter could be added to help describe what is in the listing, what it means, and as to its use.
- The recent changes by DOH of the MH criteria used to determine what inmates are listed on the document are not well understood in Counties and needs to be communicated.
- There are concerns from counties about the appearance of inmates on the list from the DOC who have been added very close to her/his date of scheduled release. While it was agreed that this could happen based on the clinician's judgment, it was noted that there is no intentional process directing this to occur.
- Medical Assistance enrollment is extremely important and needs to be addressed as it is the primary method of payment for services. While this seems to have been improved for folks needing SUD services, it has not advanced into the Mental Health arena.
- The Social Security Disability benefits application process needs to be viewed as an effort which can assist the released inmate

- Prescription and supply of Aftercare medications are other areas of concern. The DOC seems to be able to consistently supply aftercare medications at the 30 or 60 days levels for chronic care meds. Counties seem to offer very little in comparison—an average of 4.79 days.
- Housing is a very important/major issue which needs to be addressed. This particularly affects the inmate in the DOC system, as those inmates are at higher risk of losing existing housing due to the longer period of incarceration.

Ms. Griffin noted a recent Technical Assistance Mapping Follow-up Project in a Western county during which she encountered a funded project which has been able to treat individuals. This is referred to as an invitation to bid with funding from DOC in contra directly with providers. Some come from the Probation rolls and others from a Community Corrections Center. This provides follow-up for medication, counseling and other services. This has existed for less than one year and might be of interest for other counties to pursue.

Concern was expressed that these resources are, essentially, being redirected from what could have been community MH services in collaboration with providers who might not already exist in the given county. The consequences of this process might need to be addressed before continuation or expansion should be considered. It was clarified that there might be something to be gained with further understanding and collaboration. The integration of these services into the existing county system also needs to be addressed.

There are three more Mapping Workshops scheduled this year. The inclusion of DOC and Probation and Parole officials present:

- October 8 in Blair County for one day
- November 5 and 6 in Dauphin County
- November 18 and 19 in Berks County

In response to an earlier question raised in the Meeting, Marirosa offered that there were 231 SMI "Max Out" releases from the State System over the past year.

Tory Bright was next on the Agenda. She noted that a process for getting community services information into the hands of the DOC upon the DOC facility entry of a person with SMI should also be considered. Effecting this exchange of information may result in much shorter terms of incarceration and surely much better background upon entry. This might be termed a "Pre-Entry" process that could be studied and assessed as to its feasibility and potential to be helpful. This might include—what county served the individual, what services has s/he received, what medications have been tried and what was their efficacy. Is there a way to pilot an effort such as this? It was also suggested that awareness of informal and family supports can be shared at this point of the individual's incarceration. Another person suggested that a

profile could be developed which might further include a Wellness Recovery Action Plan (WRAP) for an individual with serious mental illness.

Ms. Bright noted that we certainly effect this type of prepared information exchange for individuals who enter a State Mental Hospital, why would we not consider this for those entering other state institutional settings, e.g. the DOC facility. It was noted that the recent increase of Social Worker Staff into the DOC Facilities might be very helpful if this type of information can be exchanged. Another Attendee noted that the Carbon-Monroe-Pike Program does this type of information exchange with their local prisons and would very much like to effect a similar process with DOC Institutions. The possibility of making this type of information exchange a part of the Re-Entry Planning Committee was introduced. Another topic was added as to the timing of information to the counties.

Charley Folks added an observation about the very first meeting of the FITF approximately 20 years ago. He noted that there were about 8 participants with little interest in treating folks with serious mental illness upon re-entry. He suggested that we have “Come along way” with now the question being how to collaborate or work together with the resources that are, indeed available.

Lynn Patrone noted that there is a process in Berks County in which the services of a Community Corrections Center are actually being offered by the County MH Center.

Names and email addresses were requested from those who wish to serve on the Re-Entry Practice Committee and the meeting concluded.

The next meeting is scheduled for Tuesday, November 24, 2015 from 10:00 to 12:00 at the DOC Training Academy in Elizabethtown.

Respectfully Submitted,

Lloyd G. Wertz, FTAC/FSS.

