

**GOVERNOR'S ADVISORY COMMISSION ON MENTAL ILLNESS AND
THE CORRECTIONS SYSTEM**

MINUTES

**February 21, 2020
10:00 a.m.**

**DEPARTMENT OF CORRECTIONS CONFERENCE ROOM
COMMISSIONER'S OFFICE
105 PLEASANT STREET
CONCORD, NH**

Commissioner Helen E. Hanks called the Commission meeting to order at 10:00 am.

Participants:

Helen E. Hanks, Commissioner NH Department of Corrections, Chairperson
Heather Moquin, Chief Executive Officer, New Hampshire Hospital
Dean Christon, Executive Director, New Hampshire Housing Finance Authority
Senator Thomas Sherman, NH Senate
Robert Steigmeyer, CEO & President Concord Hospital
Kenneth Norton, Executive Director, NAMI
Representative Renny Cushing, NH House
Alex Casale, Statewide Drug Court Coordinator– attending for Justice Nadeau.
Lois Monette, Administrative Assistant, Commissioner's Office

This Commission was formed to examine and make recommendations on issues facing individuals with mental illnesses in the corrections system. Executive Order 2019-02

Commissioner Hanks welcomed everyone and asked if anyone had any comments on the minutes because quite a few are missing,

Action Item: Lois will send the January minutes out to the committee one more time.

Handouts of draft data points from NAMI and competency data available through the NH Office of Forensic Examiners.

Commissioner Hanks reviewed the competency data with the commission.

Discussion on the data points in the NAMI list:

Community Health Center data:

- The number of people who are justice- involved that are served at a community health center is not tracked as the DOC doesn't have mechanism to gather the data.
- On the question of how many people are receiving psychotropic medication, and who prescribes them, data from individuals on probation or parole is not available as there is no community-based data set,

- For the individuals incarcerated, data is available.

Housing and recidivism:

- Merrimack County Drug Court did a snap shot of their program for a year and the people who struggled the most, had the most court violations, are people who are homeless or had insufficient housing, which correlates with failure to meet obligations of the program.
- Is there data on what portion of the homeless also have mental illness and/or substance abuse disorder?
- What is the definition of insufficient housing?
- DOC and Plymouth State University are working on data sharing. A deep analysis of people who are out on supervision and what helps them stay successful. In addition, what we can learn from those that are not successful as well.

How many people have active Medicaid status when they are released from prison?

- Have not been successful in receiving reports from Medicaid because of unanticipated obstacles. Reports on how many justice involved people have applied for Medicaid upon release, what services are they accessing, are those services helping them be successful, and who has been denied.
- Timing of the application process is critical. Historically DOC has applied to Medicaid 30 days prior to the anticipated release date and it has been moved to 90 days prior to release.

How many individuals under DOC supervision have previously been at the Sununu Youth Center?

- Commissioner Hanks has one data set from when she was the Assistant Commissioner; she will check if that crosswalk was saved. It will be a snap shot since that information isn't available in general.

Action Item: Commissioner Hanks to look to see if the data was saved, and if so will send out to the Committee.

How many individuals meet state eligibility criteria for major mental illness upon entering the prison?

Action Item: Commissioner Hanks to see if DOC is tracking this.

Action Item: Commissioner Hanks to provide to the committee the template for the questions that are asked at the initial screening of entry into the prison,.

Under DOC supervision, how many are newly diagnosed with a major mental illness?

- We do not have a way to validate a data set like this.
- In November a review of mental health diagnoses and opioid use disorder was done, we had 978 men with a mental health diagnosis and 47percent of those men had an opioid use disorder. Women was around 178 diagnosed with a mental health disorder and 115 of those women had an opioid use disorder.

Action Item: Commissioner Hanks to share this data with the committee.

House of Corrections County level participation:

- Subcommittee to create a survey to gather data at the county level?

Action Item: Committee to think about what questions they want to ask the county jails, send them to Lois and she will compile them into a draft survey.

- Reach out to HOC designee with meeting schedule and ask for a designee if they are unable to attend.

How many individuals are civilly committed to New Hampshire Hospital or other mental health treatment?

Action Item: Commissioner Hanks can pull the numbers from DOC SPU.

Action Item: Heather Moquin to see if she can pull that information from New Hampshire Hospital’s data.

How many people who have been determined Not Guilty by Reason of Insanity are under the care of DOC?

Action Item: Commissioner Hanks to provide that information.

What is the recidivism rate for people with a mental illness diagnosis compared to the general population?

- No specific information on recidivism for people with mental illness for New Hampshire.

Action Item: Commissioner Hanks to send out the overall recidivism rate to the Committee.

How can we intervene specifically around mental illness and substance abuse disorders?

- Crisis Intervention Teams and ACT Teams trained specific to justice-involved individuals.
- Police officers and probation officers trained to deescalate and divert CIT model).
- Need places to divert individuals to Increase Telehealth resources. Reduce wait times for appointments.
- Open Access, a Seacoast Mental Health program just started last fall. When people call, the wait time can be as short as the same day, longest wait time is 5 days. Open Access is offered two days a week at each office so the wait time has been reduced significantly.
- Figure out the variabilities across the Community Mental Health Centers.
Action Item: Create a survey on processes at CMC’s.
- Create a statewide mental health resource list.
- Engage housing authorities and providers.
- Transitional housing – i.e. Sullivan County’s program.
- Medicaid dollars to support housing.
- Outcomes are better when families are engaged.
- Examine opportunities for efficiency across all community collaborators.

The meeting adjourned at 11:15 a.m.

Respectfully submitted, Lois Monette

2020 meeting dates: usually every third Friday of the month.

All meeting are at 10:00am

January 13	April 17	July 17	October 16
February 21	May 15	August 21	November 2
March 20	June 19	September 18	December 18