GOVERNOR’S ADVISORY COMMISSION ON MENTAL ILLNESS AND THE CORRECTIONS SYSTEM

MINUTES

January 17, 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
Sarah Blodgett, Executive Director, Judicial Council
Julianne Carbine, Department of Mental Health Services, DHHS
Dean Christon, Executive Director, New Hampshire Housing Finance Authority
Renny Cushing, Representative NH House
Emily Rice, Esq.  City of Manchester
Henry Lipman, Director, NH Medicaid
Robert Lynn, Chief Justice, NH Supreme Court (Retired)
Kenneth Norton, Executive Director, NAMI
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

Commission Hanks welcomed everyone and asked if anyone had feedback to the draft December meeting minutes that have been sent out for their review. The December meeting minutes were approved by the attending members.

Commissioner Hanks mentioned that the finalized committee minutes and the final report to the Governor are now published on the Department of Corrections website on the Commissioner’s page.

Commissioner Hanks reported that CEO Robert Steigmeyer is unable to make this meeting but sent his comments on prioritizing the short term and long-term items. His comments/observations are as follows:

Page 5, comments on I.) Education: This is an ongoing effort which is near and long term. It is also covered by the System of Care Bill – SB14 which is in effect this year.

Page 5, comments on II.) Prevention: This is ongoing. If we fund the Ten Year Mental Health Plan appropriately this will happen. It is also covered in other recommendations i.e. III, IV, and V.
Priorities:
A. Page 5 – II.) Prevention, Restoration of the Community Behavioral Health System: This is the most urgent need. It covers all community activities which build a system that creates alternatives to incarceration. It is covered in the RFI for mobile crisis and the IDN integrated care build but much more investment needed in more beds & funding to continue IDN’s.

B. Page 7 – IV.) Diversion: This is a longer-term issue due to complexity of the legal changes needed, BUT if IMD exclusion was dropped, community agencies could bill for MM/SUD services in jail. This would be a game changer. Would need to focus on this ASAP as it is a long process.

C. Page 6 – IV.) Diversion: This is less of a priority as it recommends further study. Diversion is important. There are many examples of success in drug court/MM Court and sequential intercept model already in the State.

D. Page 8 – Transition/Reintegration: There are pockets of this happening now (IDN projects). This is a very broad list and some are short term – MOUs with community partners and some are dependent on other actions – Medicaid rates for increased access, payment for peers, etc. This has a very large price tag.

E. Page 9 – Financial Analysis: State DOC & DHHS will have to provide a fiscal note for new services. I put this last, as it will be determined after the service array is agreed upon.

Commissioner Hanks opened the feedback up to the committee.

Justice Reinvestment Project:
- Refresh and expand its reach.
- The report is over 10 years old but is still relevant.
- Provide access to treatment for people with mental illness before they commit a felony/have contact with the justice system.
- Opportunity for collaborators from Washington to engage?
- Brainstorm on alternative intermediate sanctions. Intermediate residential treatment program in a refurbished underutilized state or municipal building. Collaborate with Health and Human Services, Substance Use Disorder treatment services, effective interventions, Medicaid and other beneficiaries to help support that relationship.

Alternative Courts:
- Decline in incarcerated population likely because of the implementation of alternative courts, i.e. drug, mental health and veteran and other community interventions.
- NHDOC data indicates a reduction in new crime and probation admissions, parole violation rates static, primarily related to relapse around substance abuse.

LEAD (Law Enforcement Assisted Diversion):
- Brendan Cox, spokesperson for LEAD will be presenting on February 10 at the ICJJC meeting.
- Diversion and deflection program for low –level misdemeanors and violations.
- Implemented in Farmington and Dover.
- Think outside of the box, what other collaborators can be brought in to help law enforcement.
Good training for crisis intervention teams.

**Housing:**
- Are we placing people in existing housing or creating housing specifically for justice-involved individuals?
- What kind of specific support services? i.e. behavioral health issues, recovering from substance abuse issues.
- Disconnection exits between the resources for long term support services and housing.
- Success with people with serious mental illness has happened by integrating them into housing opportunities instead of building a specific property for that population.
- Housing Systems are decentralized system, with many decision makers, entities like public housing authorities and many private property owners that receives some kind of federal benefit.
- Successful program at the Department of Veterans Administration called VASH (Veterans Administration Supported Housing). It is a housing subsidy for veterans who generally have behavioral health related issues and are being placed in the community with wrap around support services coming from the V.A.
- A Housing methodology of integration would be ideal rather than creating felony based community housing.
- Community-based services need to be available and consistent. That will help in supporting concerns of property owners and hopefully get them to take a chance on a particular client.
- Other jurisdictions (i.e. Kentucky) have the concept of master leasing, where an entity leases a group of apartments and takes responsibility for dealing with the tenant based issues. The property owner is relieved from having to be the front line in dealing with concerns.
- Short-term housing with support services with protocol that says it is only for a certain amount of time and then you move on to more integrated housing or independent housing. Concept to vet.

**Community Health Centers and MOU’s:**
- Identify gaps.
- Funding challenges.
- More diverse level of needs for this population.

**Parole/probation, statistics:**
- Is data about technical violations from committed crimes aggregated?
- Substance use disorder is the overarching driver for return to incarceration. Also non-compliance to mental health treatment.

**Discussion on the impact of judge vacancies and the effect on the Drug Courts and Mental Health Courts.**
Juvenile and foster care systems:

- How many people in corrections were ever in our juvenile and foster care systems.

**Action Item:** Commissioner Hanks to check to see if an older report is still available.

Implementation of some recommendations:

1. Small scale demonstration project that aligns to report recommendations.
2. Based on the data for those that are successful and didn’t return to incarceration, what bundle of services kept them stable?
3. Wider ACT response that deals with employment and other issues.
4. Some kind of consistent source of funding of programs for the property owners. Incentivize.

Remove the exclusion in Medicaid for correctional facilities:

- Currently denies people who are incarcerated the benefit. Only covers inpatient eligible stays.
- Would establish one unified platform for delivery of care and a financial share instead of using primarily General Fund monies.
- Currently Congresswomen Kuster’s bill named Humane Corrections works to do this.

**Action Item:** The committee members to send their wish list of data points they would like to see created to Lois Monette. She will compile the lists into one document.

The meeting adjourned at 11:00 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 |