



PROSECUTION AND MENTAL ILLNESS

THE TREATMENT V. PUBLIC SAFETY DANCE





YOLO COUNTY MENTAL HEALTH COURT TEAM



FIRE DANCING

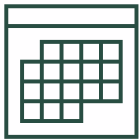


RE-ENVISIONING



-
- **Re-envisioning** how the criminal justice system addresses those who commit crimes and who live with mental illness and/or substance use disorders
 - Prioritize **Treatment** with accountability, not punishment
 - State prison or **something different?**
 - **Public safety, public safety, public safety**

2001 VS. 2021



Wes

Sabrina

Rayshawn

Alejandro

THE INGREDIENTS TO SUCCESS



A dream team

Trust

Management Buy-in

A Champion Judge

Evolution of DDAs and PDs

Enlightening Charging/Intake team

Relationships

- NAMI
- Probation and LEAs (Sheriff)
- Behavioral Health and Public Guardian
- Your Judge
- The PD



DA AND PD



DANGER TO OTHERS VS. SCARY TO OTHERS



5150

422

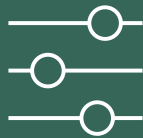
69 & 148

459 1st

314.1

451/452

OPTIONS AND PROGRAMS



-
- Mental Health (Addiction Intervention) Court
 - DSH Grant
 - PC 1001.36
 - Funding

MENTAL HEALTH COURT



A treatment approach

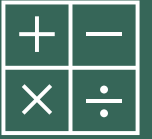
Not one size fits all

Public safety first

Thinking long term – Recidivism

Helping people get better and become
successful

CALCULATED RISK



YOLO COUNTY'S MENTAL HEALTH COURT



- Collaboration
- District Attorney and Public Defender
- A dedicated judge
- Dedicated staff at probation and HHSA supervising, providing services, and supporting participants



TEAM COLLABORATION



YOLO COUNTY'S MENTAL HEALTH COURT



1. Cases we should identify
2. When referrals are made
3. Mechanics of a referral
4. Eligibility
5. DHS grant
6. Common reasons for unsuitability
7. Post assessment
8. The program
9. Unsuccessful outcome
10. MHC Outcome Measures
11. Options for those with less severe mental illness

WHAT CASES SHOULD WE IDENTIFY



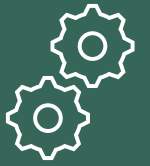
- Felony Conduct
- Serious Mental Illness – SMI (schizophrenia, schizo-affective, or bipolar) **and/or**
- Substance use disorder – SUD
- Information revealed in police report
- Interactions defense counsel with their client

MECHANICS FOR A REFERRAL



-
- Pending assessment, individuals often remain in custody
 - Easier for treatment team to go to jail to assess
 - Individual may be clean from drugs and stabilize in jail
 - Often, if individual is out and in the community, it's not a good situation

MECHANICS FOR A REFERRAL – THE SHERIFF



- Involuntary medication Orders and true implementation

MENTAL HEALTH COURT (MHC/DSH) & ADDICTION INTERVENTIO N COURT (AIC) ELIGIBILITY



18 or older

US Citizen

Yolo County resident

Charged/Convicted of one or more misdemeanors or felonies or currently be on Probation

Participant must agree to join MHC/AIC and follow the guidelines

Participant must have the necessary insight and motivation to be successful in the program

MHC/AIC Teams must all agree on participant's acceptance

MENTAL HEALTH COURT (MHC/DSH) & ADDICTION INTERVENTION COURT (AIC) ELIGIBILITY

MHC/DSH



AIC

- Diagnosed with a Serious Mental Illness (SMI)
- Mental State at the time of Offense (MSO) – Participants' SMI must be cause or aggravating factor in the commission of their crime

- Diagnosed with a Substance Use Disorder (SUD)
- Their SUD was the cause or aggravating factor in the commission of their crime(s)

DSH GRANT



- JBCT and Department of State Hospitals
- Criteria
 - Must be a diversion worthy case (less serious cases than MHC/AIC)
 - IST or at risk for IST

COMMON REASONS FOR UNSUITABILITY



- Not SMI
- No causal link between the SUD/SMI and the crime
- Individual no longer wants the program
- Individual will not engage
- Individual is too ill or has little to no insight
- Approximately 2/3 found unsuitable
- Each team member must agree
 - Origin of this rule
 - Defense counsel never disagrees
- Almost always a consensus once the treatment team makes a recommendation
 - DA has only exercised a veto once out of hundreds of referrals

POST ASSESSMENT



Re-referral is ok

Plead either outright or DEJ

AB 1950 impact

- Program is 18-24 months and supervision is necessary for 3 years
- For most cases, to have 3 years probation it's necessary for the individual to be placed on SOR after the plea and for sentencing to be delayed 1 year

THE PROGRAM - HHSA



Small case load - 10:1

Intense frequency and duration – 4x week or 2 hours per week

Wrap around services (mental health, substance use, housing, vocational/school, physical health, etc.)

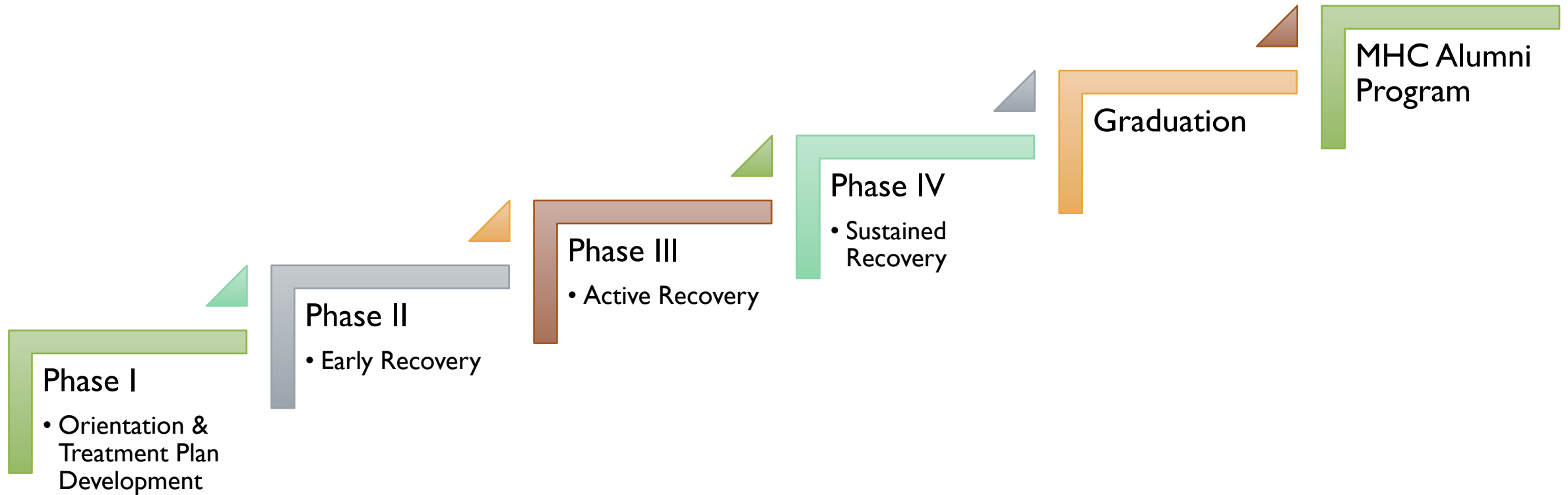
THE PROGRAM - PROBATION



- Case Load- 30:1
- Assessments of new referrals
- Intense frequency and duration- Court & case by case basis
- Works closely with clients regarding compliance with terms and conditions (i.e., drug testing, community supervision, restitution, etc.).
- Community involvement- transports, meetings in field, participate in groups alongside clients
- Networking- community based organizations, treatment providers, etc.
- Makes recommendations for rewards and sanctions

FOUR PHASES

4





AIC GRADUATIONS





MHC GRADUATIONS



UNSUCCESSFUL OUTCOME IN MHC/AIC/DSH



-
- Terminated from the program
 - Stays with MHC/AIC judge
 - DEJ entered
 - Individual sentenced
 - For DSH, prosecution or state hospital

FISCAL YEAR 2019-20



- Jail bed days decreased by 37.7 % 12 months post-MHC
- **Arrests decreased by 86.6% 12 months post-MHC**
- Local Hospital Bed Days decreased by 31.3% 12 months post-MHC
- State Hospital Bed Days decreased by 100% 12 months post-MHC



OPTIONS FOR LESS SEVERE MENTAL ILLNESS AND LESS SERIOUS CRIMES

“PC 1001.36”

PC 1001.36 ELIGIBILITY CRITERIA



- “Diagnosed Mental Disorder from the most recent edition of the DSM by
- “*qualified mental health expert*”
- The Court “is satisfied” that the defendant’s mental disorder was a “significant factor” in the commission of the charged offense.
- In the opinion of a mental health expert *Symptoms of the mental disorder motivating the criminal behavior* would respond to mental health treatment.

PC 1001.36 ELIGIBILITY CRITERIA



-
- Defendant consents to diversion
AND
 - Waives speedy trial right OR
 - Defendant agrees to comply with treatment as a condition of diversion.
 - Defendant will not pose an unreasonable risk of danger to public safety as defined in PC 1170.18 if treated in the community.

PC 1001.36 – WHY NOT?

Offender too ill

Crime too serious for diversion

Offender too dangerous

Watch out for judicial activism

- Judicial diversion
- Giving unsuitable individuals 1001.36 Defendant consents to diversion

PC 1001.36 – WHY NOT?

From: De De Scrivner-Bosuego <dedeatvallejotogether@gmail.com>

Date: May, 19, 2020 at 11:00:26 PM PDT

To: Lindsey Hall <Lindsey.Hall@yolocounty.org>

Subject: You killed Maria Guevara

We told you she needed in patient mental health program!!!!!!!!!!!!!!!!!!!!!!

She was a danger to herself and others!!!!!!!!!!!!!!!!!!!!!!

The mental health system is broken and Maria is dead!!!!!!!!!!!!!!!!!!!!!!

PC 1001.36 – DO WE LIKE IT?

- Yolo County Mental Health Diversion program modeled after MHC

HOW DO WE STAFF THIS? -FUNDING

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Self-funded

Grants

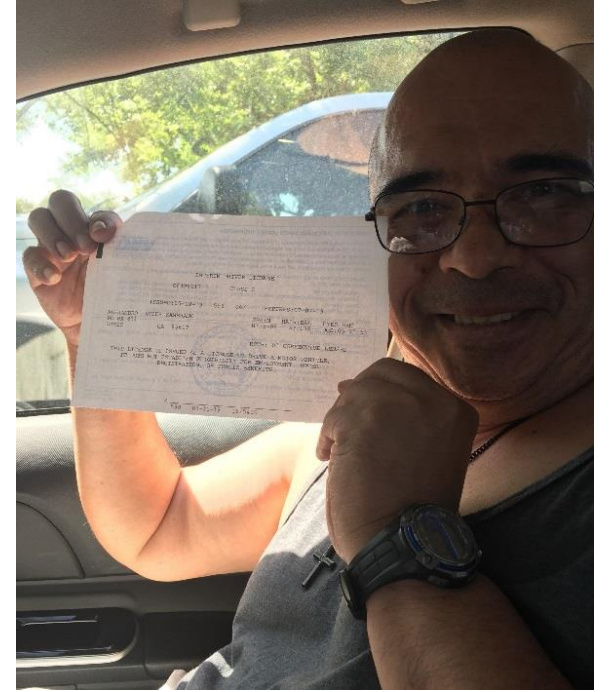
CCP

MHSA

Media

WHO'D HAVE THUNK IT?





RAYSHAWN AND ALEJANDRO

QUESTIONS



Thank you

