Reports and Updates: Coloradans Disentangling Mental Health and Criminal Justice

Date: Thursday, May 20, 2021

Recording Link: Click here

## **Meeting Section A: Presentation**

## Judge Jonathan Shamis, Lake County

- Recording Time Stamp: 5:55
- State recently ran a survey for all judges asking for feedback on what they need to know for their position
  - Understanding mental health was a top response
    - Trial judges encounter persons with MH needs on a daily basis
    - There is no formal education for judges surrounding MH through law school
    - Judges often will order evaluation for person, and just take whatever recommendation is presented following the evaluation- rather than take time to understand what the recommendations entail, the impact of various recommendations on the individual, or what alternatives are available
- Judges and Psychiatrists leadership organization developed program to introduce importance of mental health to area judges around CO
  - Concept was developed on how to go about improving judicial education
  - National effort developed through ncsc as well
- Supreme Court has developed committee dedicated to developing curriculum on mental health
- 4 pronged effort created to teach judges about different diagnoses and how it might effect decisions on the bench, and how to interact with persons with mental illness in an informed manner
  - What does the judge need to know about clinical diagnoses
  - What skills does the judge need to have in practice
  - Looking to judges to use their role as leaders for mental health change
  - How to deal with the legal mechanics in setting up a plan for an individual (competency, conservatorship, outpatient treatment, restoration, etc)
- Will be running monthly judicial education webinar for judges across the state
- Importance of perspective for judges around lived experience (ie. ordering medication, probation requirements)
  - Increased empathy and understanding
- Access to Justice commission of the Supreme Court recommended every judicial district to assess how to implement a court concierge
  - $\circ$   $\;$  Someone based in the court to help individuals in getting connected to services of need
    - BRIDGES liaison
    - Overwhelming caseloads has made this challenging
    - Rural communities with limited resources are also a challenge
    - Utilization of modern technologies such as a video call via computer can be helpful
    - Trying to change narrative of courthouse by incorporating available services and assistance for justice involved individuals – want courts to be seen as a place for findings solutions for people

- Court concierge can also assist with re-entry
- Working to develop comprehensive Co-Responder program protocols
  - No current process for how co-responder is supposed to interact with courts
  - Unless law enforcement decides they'd like to share information, the courts don't have access to it
    - Interactions carry lots of beneficial information for the judges determinations
- Advanced mental health directives with law enforcement
  - Accessing individuals records through information sharing
  - Utilizing persons care systems already in place working with clinicians that the person already has a rapport with
  - Communicating with family members provide supports for families
- Need to improve checks and balances
  - Developing a system that functions realistically

## Meeting Section B: Questions, Discussion, Other Updates

## Questions – Please refer to the recording for full answers to the following questions:

- Recording Time Stamp: 39:00
  - There is a need for deep investment in facilities offering services, especially in rural communities. The incoming funding from American Rescue Plan could be a realistic funding source.
    - MHC is currently working on a whitepaper/ set of recommendations for use of ARP funding, and will be sure to include crisis respite.
  - Centennial Peaks hospital has developed a crisis stabilization relationship with local law enforcement for individuals to be brought to their facility rather than an emergency department. They have seen success/opportunity with virtual IOP programming, which could be easier to implement in a jail setting.