

CENTER

FOR

COURT

INNOVATION

BRONX COMMUNITY SOLUTIONS

MENTAL HEALTH INITIATIVE

FEBRUARY 2009 – PRESENT

The Bronx



• BRONX CRIMINAL COURT



How people end up at BRONX COMMUNITY SOLUTIONS

Get arrested

Go to Court

Jail

BCS

BCS Intake

Court- mandated community service and social service



Mental Health Program Inception

- In June 2008, officials in New York State/City convened a Criminal Justice panel who's focus was to recommend improvements to services for the individuals with serious mental illness.
- One such recommendation was to introduce a mental health screening in Criminal Court for individuals sentenced to community-based sanctions.
- And so in February 2009, a *Low-coersion, High- engagement* model was developed in the Bronx .

Mental Health Screening

Screen 1: TASC

- Has anyone ever told you that you have a psychiatric/mental health diagnosis?
 - If yes, what was the diagnosis?
- Have you ever been in a hospital for emotional or mental health problems?
- Are you currently taking any medication prescribed for you by a physician for any emotional or mental health problems?
- What medications have you taken in the past for psychiatric or mental health problems?
- Are you currently in psychiatric/mental health treatment now?
 - If yes, where?
- What psychiatric treatment have you received in the past?

BCS Mental Health Screening

Screen 2: Brief Jail Mental Health Screen

- Do you currently believe that someone can control your mind by putting thoughts into your head or taking thoughts out of your head?
- Do you currently feel that other people know your thoughts or can read your mind?
- Have you currently lost or gained as much as two pounds a week for several weeks without even trying?
- Have you or family or friends noticed that you are currently much more active than you usually are?
- Do you currently feel like you have to talk or move more slowly than you usually do?
- Have there currently been a few weeks when you felt like you were useless or sinful?

How many people are flagged by the MH screening questions?

Screened over 23,670 clients
Identified 4,022 individuals
who have current or past mental health issues.

Interventions:

Individual Counseling Session
MH Treatment Readiness Group:
co-facilitated by MH Peer Advocate
463 referrals to Voluntary Services

Demographics

	MHI POPULATION	GENERAL BCS
Male	68.2%	82%
Female	31.8%	18%
Race		
Black	38.4%	45%
Hispanic/Latino	52.0%	49%
White	5.0%	3%
Other	2.0%	3%
Spanish speaking only	9.0%	8%
Ever received MH svcs	58.6%	1%
Currently receiving MH svcs	48.2%	1%
Employed	13.0%	36%
Uses Substances	33.9%	15%
Currently homeless	10.4%	5%
Mean Age	38 years	31 years old

Case Completion

- Approximately 73 % of clients who flag for MHI are completing their mandates successfully. This is greater than the successful completion rate by those who do not flag on the MH screening tools (69%).
- Those clients who received an ICS were significantly more likely to complete their mandate than those who received a group intervention.
- Voluntary referrals have steadily increased each year since program inception. 95 referrals (in 2009), 163 referrals (in 2010) and 205 referrals (in 2011).

Case Study

“Rachel” a young Latina woman in her late 20's, who “flagged” on our mental health screening, was arrested for prostitution and mandated to complete eight days of social service with Bronx Community Solutions.. At the time, Rachel was facing several serious challenges in her life including mental health issues, a long-standing drug addiction, and a controlling, emotionally abusive ex-boyfriend with whom she lived.

Rachel worked with our social service staff to secure an intake appointment at a co-occurring disorder/MICA in-patient facility, Conifer Park, where she successfully enrolled and is reportedly doing well. Thanks to the combined efforts of the mental health coordinator and STARS counselor, Rachel is now receiving the services she needs to overcome her mental health and substance abuse issues, leave the lifestyle of prostitution, and start a new life away from her abusive ex-boyfriend.

NEXT STEPS

- Dr. Stephanie LaMelle, of the Psychiatric Institute at Columbia University concluded a presentation on *Essential Systems of Care: The Clinical Perspective*:
- -*'increased mental health services alone often do not translate into reduced recidivism, even for 'state of the art' services'*
- -*'strongest criminogenic factors are shared by those with and without mental illness. (antisocial crimes)*
- *'evidence-based mental health interventions target symptoms and functioning NOT criminogenic factors'*

Both must be applied and integrated in order to impact clients in the criminal justice system.

References

- Mental Health Screening: Brief Jail Mental Health Screen
<http://gainscenter.samhsa.gov/html/resources/MHscreen.asp>

Powerpoint presentation delivered on July 26th 2011 by: Stephanie Le Melle
MD

Columbia University/New York State Psychiatric Institute
Essential Systems of Care: The Clinical Perspective

Bronx Community Solutions blog
<http://changingthecourt.blogspot.com>

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