Transition Task Force
Date: January 7, 2009 2:30 – 5:00pm

Attendees:
Germaine Miera (Facilitator)
Paul Herman (Facilitator)
Christine Adams (DCJ)
Carol Peeples (CCJRC)
Greg Kildow (ICCS)
Lou Archuleta (DOC)
Brian Gomez (DOC)(
Louise Boris (Colo. Comm. For the Homeless)
Greg Mauro (Community Corrections)
Dean Condor (Chair of Juvenile Parole Board)
Bridget Klauber (CCDB)
Mike Biggio (Free Coalition)
Geneva Biggio (Free Coalition)
Doyal Forrestal (Colorado Behavioral Healthcare Council)
Don Quick (Adams County District Attorney)

Absent:
Regis Groff (Chair)
Regi Heurter (Denver County, Public Safety)
Reo Leslie (Private therapist)
Charlie Smith (CDHC)
Sean McDermott (CCDB)
Keith Penry (Douglas County Sherriff)

Issue/Topic:

Task Force Timeline

Action:

Discussion:

- Need to be on OSPB's timeline for budgetary purposes.
- A lot was accomplished last year, but if we want to be given the credit we deserve we have to meet the requirements of the groups that make big decisions.
- Need to decide what our priorities are for this phase → what do we want to focus in on?

- Other issues (beyond the two to be discussed today) may be kicked back in the future – but for now we have to decide how we want to proceed.

Issue/Topic:

BP 44

Action:

- Need three people to dig into this: judicial, DOC, comcor → need expert from each (not necessarily people on TF). Brian (will bring someone who does juvenile), Don (will bring someone from his JD), Greg K., Carol
- Conversations need to happen in between TF meetings – we don't have time to have full conversations at these meetings. Presentations can happen at these meetings.
- Kim English should be included because she knows the CARAS so well.
- Bring a draft ("cliff notes") of each of these pieces. Preliminary draft to TF by March.
- Carol is willing to meet with Leslie Wagner to get parole board point of view.

Discussion:

- What assessment process takes place and how does that result in a case plan? What are the resources needed to achieve the plan?
  - Assessments done at intake include the LSI.
  - Working groups created to discuss how this can and should be handled better.
    - DOC only receives about 25% of the PSIRs created.
  - Going to see a tug of war between agencies for resources.
  - If DOC can work with comcor and a web-based referral process they should also be able to do so with judicial.
  - Goal is to provide more information quickly from DOC to Comcor board. Would ideally be able to attach information (e.g., PSIR, LSI).
  - Need to assess before they are released so that the information is up to date.

- Paul – need to determine what actually is happening vs. what they want to see happen.
- Paul – need to break into smaller groups to work on pieces. Won't get through all of it as a big group like this.

- What is the assessment process → there is none.
  - *Need to know what we have
  - *Need to know what we need – what is the difference between the two.
  - There is a case management plan – but don't necessarily have assessments done for this. May use the assessments done upon entry into the system.
  - Wrapped up in the release plan. This is based on behavior and some prior assessments.
  - Release plan is really just a referral – just information. Not an actual plan of release.
  - Do receive mitimus' electronically, but PSIR is never attached.
  - Mixing up LSI and diagnostic report
    - These may go together, but are not utilized holistically for the release referral.

- Need to sort out the "inmate's file" and individual documents within said file.
  - Need to determine what is already there and how it can be used more effectively.
  - What are the gaps between what is going on now and what we want it to be. Can we make the existing information work more efficiently? What is doable now?
    - The ideal might be less than what is being done already, if we think creatively we may be able to make it less work.

- Part 2 of BP44 is services at release → determine what is needed and available.

Issue/Topic:

BP-48

Action:

- Get your DOC “ducks” in a row so it can be discussed further in February.

Discussion:

- Singular, but complex, issue.
- What do we want to accomplish?
- What’s happening now?
- How do we fill in the gaps?

Issue/Topic:

PSIR

Action:

- Have someone from Judicial come to February meeting.

Discussion:

- There will always be cases where there isn't a PSIR.
- For those that do exist, they aren't always getting from the courts to DOC.
- Pilot program (the web-based idea) has nothing to do with this lack of communication.
- Need state court administrators here to provide info on how the PSIR is handled.
- Not all counties/JDs are electronic – may be electronic to different degrees.

Issue/Topic:

Support Systems

Action:

- Take BP 52 and decide what does this really mean (since ED not happening right now)
- Bring back to Feb. meeting
    - Carol, Mike B., Nancy Peters (Homeless coalition), Nancy Writer
- Doyal, Greg K., Bridget, Geneva → Volunteers to get together figure out how to address these support system needs.
    - As a group they need to get together and write out what their task is, to discuss further at Feb meeting.

Discussion:

- How can you approach, as a group, what is already in place, what we'd like to see happen, and how we get there?
    - What can you set in place six months prior to release that will keep them from becoming homeless?
- Suggested that to extend the pro-social effects of the physical exercise they get in prison once they're released, need to get resources to open up. Research shows how beneficial this exercise is for body, mind, and spirit.
- Employment rates are so low – offenders feel there is no other option other than crime.
- Have had a lot of success keeping seriously mentally ill pro-social with clubhouses.
    - Helps them to interact pro-socially, but also helps to get people jobs.
    - Might want to take the MH model to see what needs to be done with this other high risk/need population.
    - Safe place, one stop shop. High intensity day reporting programs.
    - Can we get a white paper on these models to see what's out there?
    - It's a great program, but not everyone is willing to accept public mental health.
- These individuals also have to be accepted by the program, the judge has to approve them, and they have to have a serious mental illness.
    - Target populations → need to be clear on who we're talking about.
- [Across the country] corrections has very little expertise in this area. Need to look at other disciplines to see how they are handling other high risk populations.
- In Colorado we'd like to put these EB models into play, but we have the resources to this.
    - Need to distinguish treatment programs from social support programs.
- Paul → the LSI has pro-social and attitude scores, but we're doing hardly anything with this information.
    - What can we do with this information, with these needs?
- Corrections has 1000s of volunteers that come into the prison system. How can we connect the inmates to these same resources on the outside?
    - May require policy changes to allow offenders to "hang out" with each other on the outside.
    - Family support is great, but how often is the family support enabling.
    - Not always easy to get the volunteers on the outside.
- We can probably learn a lot from the juvenile sides – we have not been as successful with adults.
- What about the specialty court model?
    - A relationship develops between the authority and the individual. Face to face contact often.

Issue/Topic:	Discussion:

Announcements
 	
Action:
	• Doyal – Mentally Ill TF
	  o 4 pieces of legislation – 2 might be interesting to this group
	  o Mobil ID
	  o Reauthorization of that TF → these types of groups should be working together
	  o Housing for CJ individuals (contact, not necessarily transition) with MH/SA → provides counties with ability to rezone for transitional housing.
	  ▪ Gives incentive to county, does not force anyone.