

**MINDSOURCE**  
BRAIN INJURY NETWORK



# Brain Injury and Criminal Justice

**CO Commission on Criminal and Juvenile Justice**

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**MINDSOURCE**  
BRAIN INJURY NETWORK



- Housed in the Office of Community Access and Independence within the Colorado Department of Human Services
- Manage the CO Traumatic Brain Injury Trust Fund; services, research, & education
- Build capacity across state agencies and community agencies
- Administer grant program

# Administration for Community Living Grant

Grant started June 1, 2014 and will end May 31, 2018.

Target sites:

1. Boulder County Jail (JBBS & JET Units)
2. Denver County Jail (RISE & Transition Units)
3. Larimer County Jail
4. Denver Drug Court
5. Jefferson County; Veteran, Mental Health Courts
6. Adams County Veteran Court
7. Adams Probation, sex offender and female population
8. Denver Juvenile Probation
9. Division of Youth Services (Grand Mesa, Spring Creek, Zebulon Pike, Mount View, Lookout Mtn., & Platte Valley)

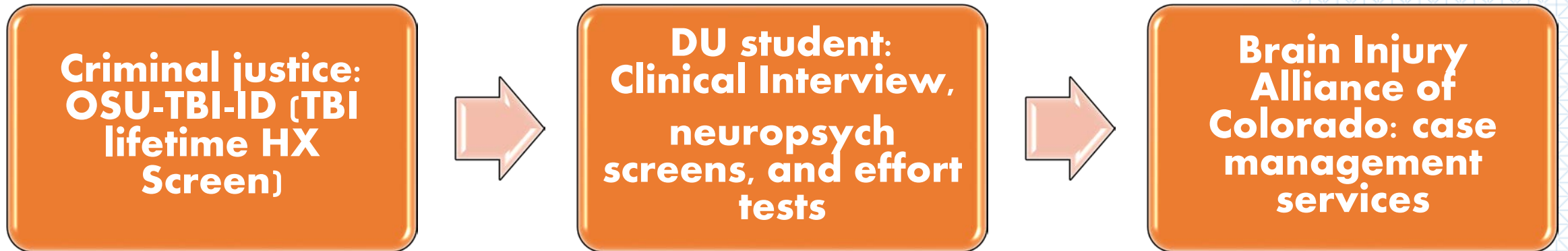


# ACL Grant

Three primary goals:

1. Screen for brain injury (both lifetime history and neuropsychological) with-in the criminal justice setting.
2. Refer individuals who are screened positive for brain injury for case management and education consultation (youth) support.
3. Build the capacity of criminal justice personnel; inmates/probationers identified with brain injury to better understand brain injury.

# Administration for Community Living (ACL)



# Screen for Lifetime History of Brain Injury

- Ohio State University Traumatic Brain Injury Identification method (OSU TBI-ID)
- Sites administer OSU TBI-ID (3-5 minutes)
- Determined positive if meet one or more of the following criteria:
  - \* Worst: moderate/severe brain injury
  - \* First: injury with loss of consciousness before age 15
  - \* Multiple: 3 or more with altered mental status or 2 injuries within a 3 month period

# Neuropsychological Screen for Impairment

- Student Clinicians supervised by Clinical Psychologist
- Automated Neuropsychological Assessment Measure (ANAM) to screen for current deficits that are consistent with brain injury.
- Effort tests, structured interview
- Positive screen when score 2 standard deviations below the mean (or clearly below average)
- Report and feedback



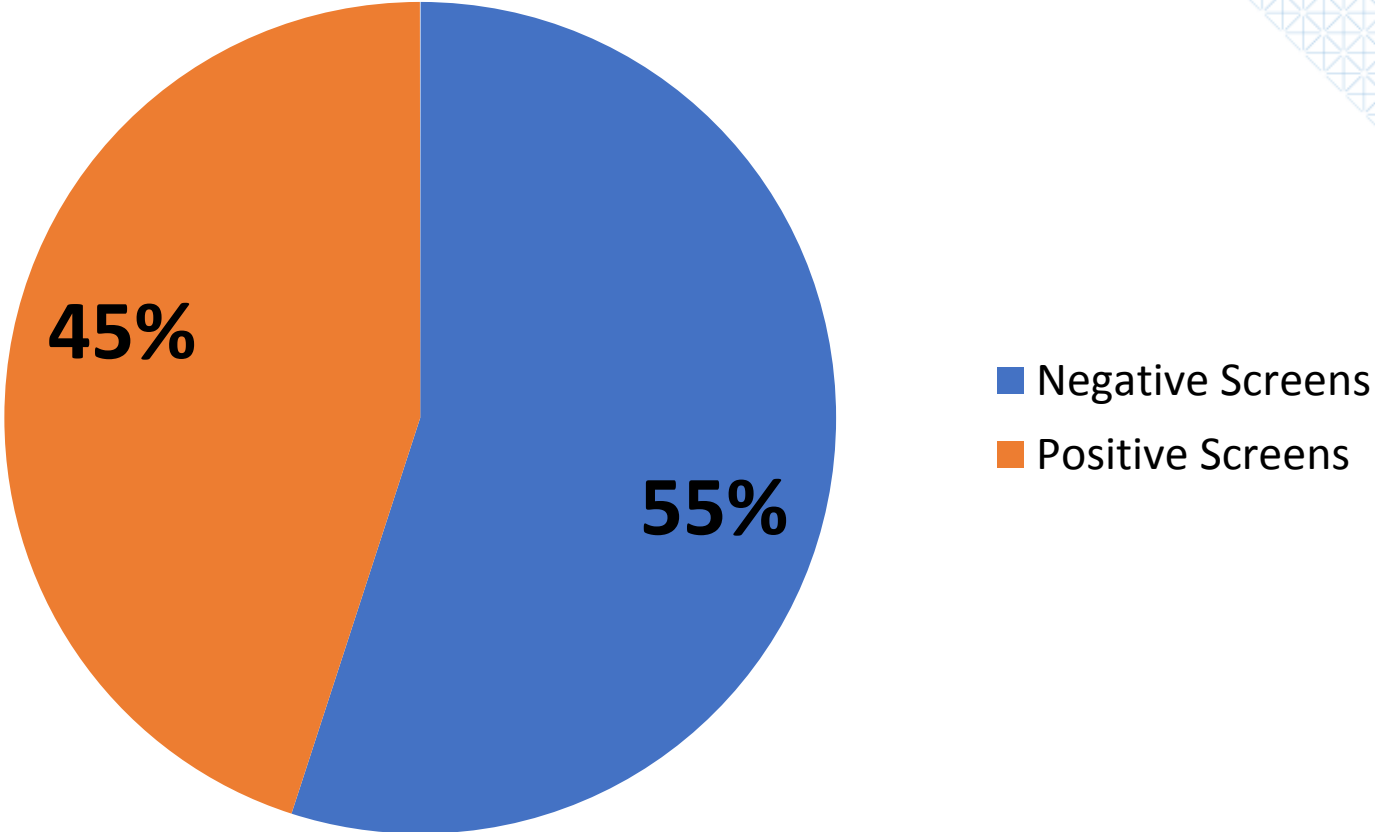
# Case Management

- When individual screens positive for lifetime history AND positive for current impairment they are referred to the Brain Injury Alliance of CO (BIAC)
- BIAC conducts intake and assesses needs
- Provides case management support to address identified needs
- Provides education consultation for youth
- Provides consultation to the criminal justice team



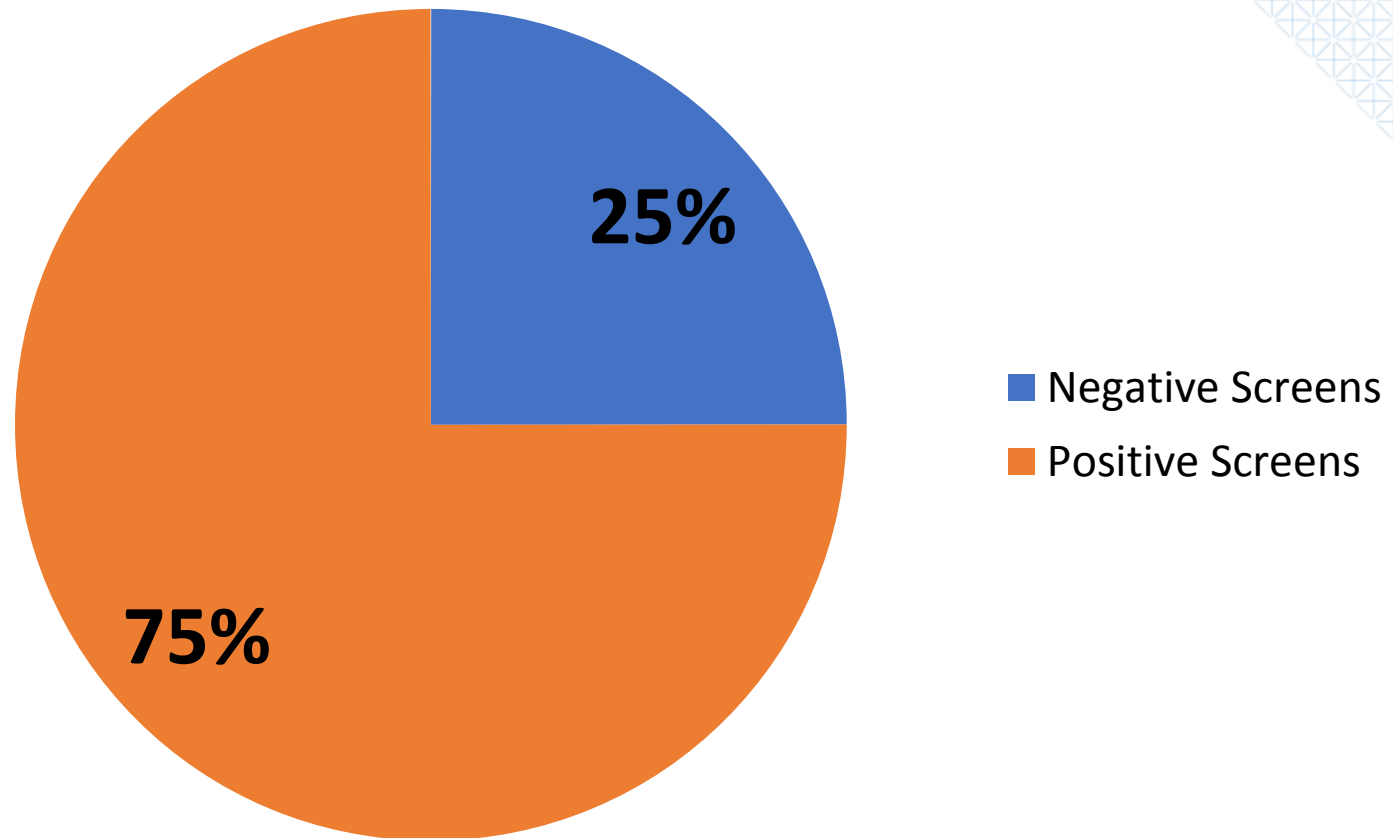
# Data

Lifetime History Screens (45% Positive)



# Data

Neuropsychological Screens (75% positive)



# Neuropsychological Screens (January 1, 2015– April 30, 2017)

- A total of 365 neuropsychological screens administered
- 275 screened positive for neuropsychological impairment
- Approximately 75.3% positive

# Severity of Injury

Studies	Mild	Moderate / Severe
Population <i>(CDC, 2003)</i>	74%	26%
County Jail <i>(Slaughter, Fann, &amp; Ehde, 2003)</i>	58%	29%
All data (2017)	67%	60%*

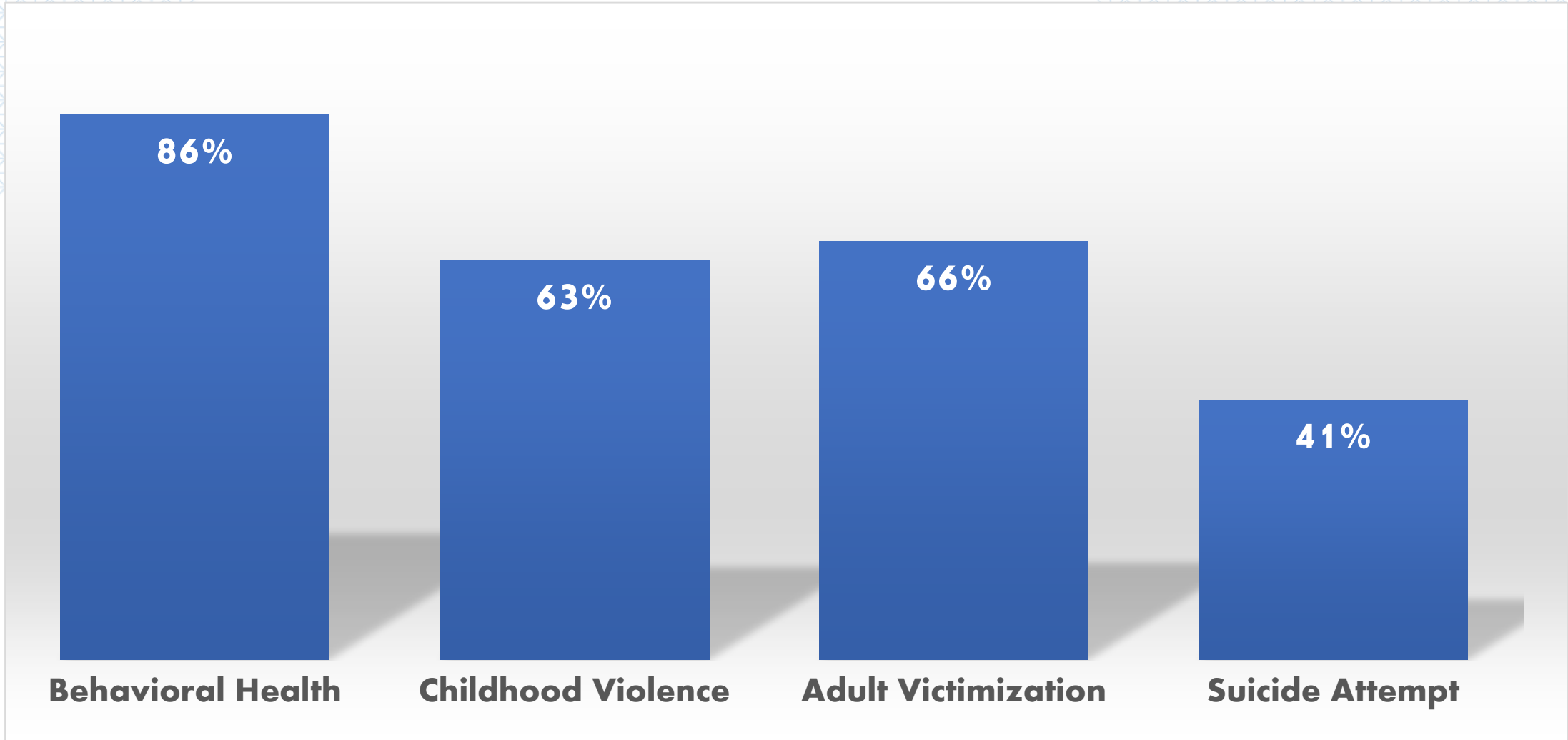
\*80% of injuries reported required hospitalization at the time



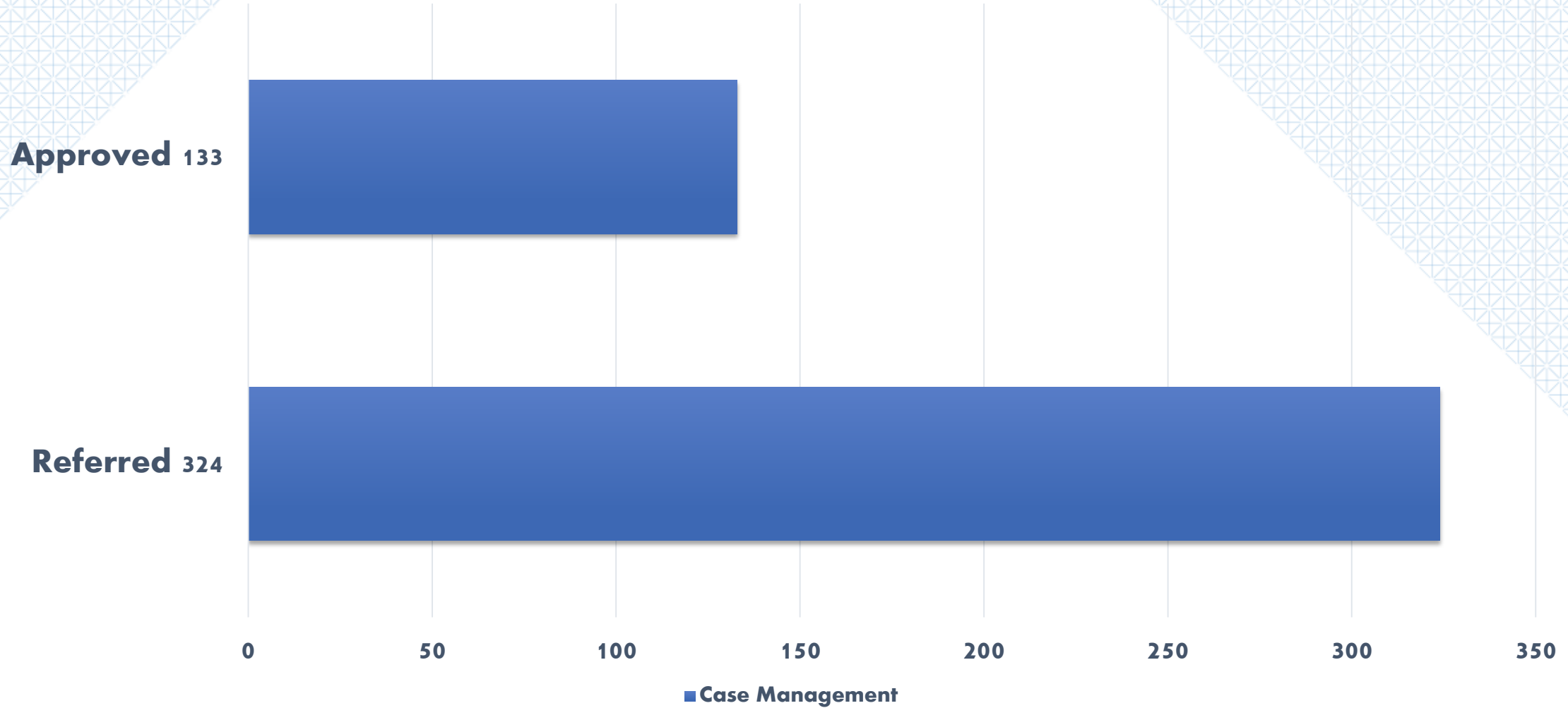
# Comorbid Conditions

	Bureau of Justice Statistics (2006)	DCJ Pilot Study	All data (2017)
<b>Mental illness</b>	64%	93%	77%
<b>Substance abuse</b>	53%	93%	96%
<b>Substance abuse with mental illness and TBI</b>	n/a	92%	86%

# Comorbidity for Target Sites



# BIAC Case Management



# Capacity Building

- Brain injury track at CCJC
- Site training on brain injury and OSU TBI-ID
- Psycho-social curriculum
- Toolkit for criminal justice personnel
- Neuropsychological Screening





Benefits

# Criminal Justice Staff

## Lifetime History Screen

- Clearer indications about the reasons behind the behavior
- Can begin to make needed accommodations in appointments

## Neuropsychological Screen

- Communicate with treatment and other providers about needed accommodations
- Communicate with court about needed accommodations

## BIAC case management

- Engage with ongoing community supports, e.g. housing, employment, medical, DVR, behavioral health
- Engage with probation

# Justice Involved Individuals

“You being here [visiting me in jail] brings me back to life. It reminds me that there’s hope for me”

“You’re my lifeline. In all the times I have been in and out of jail no one has ever taken a call from me”

"Life gets complicated at times, but its people like you that remind me that there's still hope."

"You guys [BIAC and Drug Court probation] saved my life."



# Justice Involved Individuals

"You have been my light to help me out of the darkness."

"You have reinstated my faith in professionals"

"Thank you for everything you've done for me. You and the Brain Injury Alliance have really been there for me. It's awesome".

"I'm graduating [from Drug Court] and I need something like this [BIAC Case Management] to help me and keep me clean"



# Significant Findings

- Prevalence rates of TBI in the criminal justice setting are much higher than that of the general population
- Many of these individuals have sustained moderate to severe brain injury
- Co-occurring TBI and behavioral health conditions is much higher than in general population for individuals with TBI
- Lack of capacity of community providers to conduct neuropsychological screen
- Helpful to have specialty case managers assigned to criminal justice population

# Outcomes

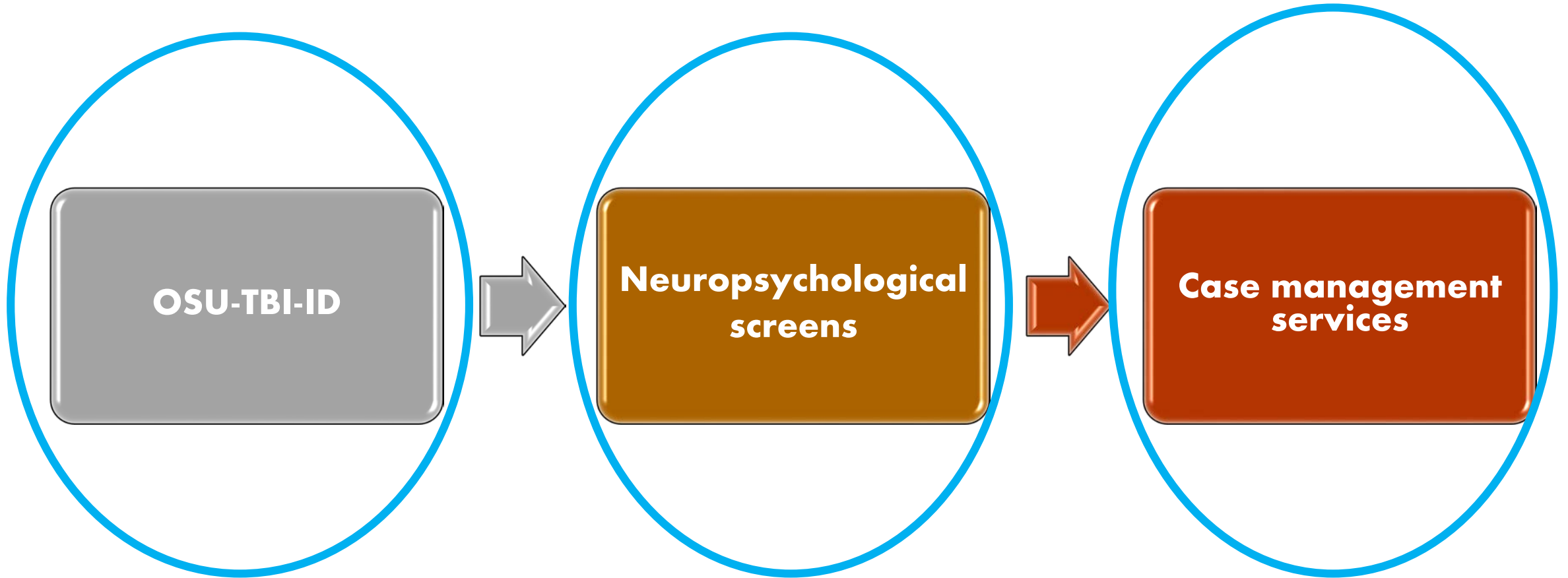
*Increase successful outcomes for justice involved individuals with brain injury through:*

1. Increased identification of brain injury in criminal justice setting
2. Increase understanding brain injury for both the justice involved individual and criminal justice staff
3. Decrease revocations
4. Increase service utilization and successful treatment
5. Decrease recidivism

# Sustainability



# Sustainability of each stage



# How Can CCJJ Help

- Overall ask: Collaborate with CCJJ to address how criminal justice agencies can identify and accommodate TBI for justice involved individuals
  - Train CJ agencies to administer OSU-TBI-ID
  - Train mental health providers to administer neuropsychological Screens
  - Create funding streams to support neuropsychological screens
  - Policy and training recommendations to accommodate for TBI as best practice
  - Create funding streams to support case management services
  - Discuss need and utilization for a specific brain injury /criminal justice specialist



