



# Mental Health and Disability Services Redesign 2011

## Judicial-DHS Workgroup Report Summary

Source: Judicial-DHS Workgroup / DHS

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### Charge

Judicial-DHS workgroup was charged with continuing its work on improving the involuntary commitment process for chronic substance abuse and for serious mental illness. The workgroup was given nine specific areas on which to focus and provide recommendations.

### Recommendations on the current provision of transportation by the county sheriff:

- Transportation should be provided for Court Committal process.
- Regions should designate a transportation coordinator.
- Revise reimbursement model to cover all costs.

### Recommendations on civil commitment prescreens:

- Provide a provision in Chapter 229 that allows for a pre-commitment screening process prior to the initial filing.
- Pre-commitment screening services for involuntary commitments should be a core service.
- There should be a pre-commitment screening service, fulfilled by either the CMHC or designated facility contracted by the region, for involuntary commitments.

### Recommendations on court authorization to order an involuntary hold of a patient under Chapter 229.10 for not more than 23 hours who was not initially taken into custody, but declined to be examined pursuant to a previous order:

- Make a change in Chapter 229.22 to allow for the 48-hour hold to be available 24 hours a day. This would necessitate a change in section 602.6405, subsection 1, concerning limitations on non-lawyer magistrates.

### Recommendations on revising requirements for mental health professionals involved in court committal process:

- Remove from Chapter 229 the title and definition of Qualified Mental Health Professional and any reference to it.

- Support the provision that only a physician is to examine the patient and provide a report to the court during committal process.
- Support the provisions that a Psychiatric Advanced Registered Nurse Practitioner may provide the annual report to the court for an outpatient committal.

**Recommendations on the role, supervision and funding of mental health and substance-related disorder advocates:**

- Amend section 229.19 to change legal settlement to residency.
- Implement statewide mental health advocates job description adopted by the Judicial Council.
- Single point of accountability, that is independent and autonomous, should be applied for all mental health advocates.
- Implement single point of accountability, such as the Child Advocacy Board, public defenders office or the Court Appointed Special Advocate Structure, that oversees policy, training, supervision, and audits of the advocate.
- Advocates should be appointed to individual cases based on where the individual resides or at the discretion of the state authority overseeing mental health advocates.
- The funding should be moved from the county to the state with consistent reimbursement standards developed.
- An advocate may be assigned in cases of dual commitment (chapter 125 and 229).

**Recommendations on implementation of jail diversion programs:**

- Create a comprehensive jail diversion program that is a core service.
- Mandate specialty training for those such as law enforcement and corrections personnel similar to the Crisis Intervention Training (CIT) or Mental Health First Aid.
- Iowa should implement a Mental Health Court that includes both Diversion and Condition of Sentencing models.

**Recommendations on comprehensive training of law enforcement in dealing with persons in crisis:**

- Officers should receive additional training in mental health each three year period similar to that provided in CIT and Mental Health First Aid.
- Consumers should be part of officer training.

**Recommendation on educating judicial magistrates and advocates on ways to enhance the consistency of services for individuals who are court ordered to a residential care facility:**

- Placement to a residential care facility should occur only after notification and acceptance by the facility.

**Recommendation on mental health courts and promising reforms related to mental health and the criminal justice system:**

- Recommendations are included under recommendation 6 above.