2016 Forensic Forum Group Discussion April 27, 2016

Day 2 Group Discussion:

A. Forensic Expertise and Collaborative Relationships

Question 1: In last year's forum, it was identified that forensic expertise is a necessity for effective management of forensic cases. What would be the necessary steps to take to develop this expertise in your regional center?

- From Porterville Developmental Center's (PDC's) perspective: The specialist needs to know how to write correct and consistent court recommendations
- SDRC/ARCA: Cross training from existing forensic specialist to other case managers in case the existing specialist isn't there
- RCEB: In house forensic specialist important for familiarity with RCs and Lanterman Act
- Tri-Counties: Vendored forensic specialist for improved easier funding source
- The forensic specialist should have a legal background and familiarity with the courts
- Fund a forensic expertise position in regional centers approach the task force
- There is a need for RCs to have at least one forensic specialist
- Need for forensic psychologist –created position and/or formally identified as a forensic position
- Forensic testing and competency. Often assessments are farmed out to vendors. Some RCs use staff psychologists
- Need follow up/bridge between court liaisons and forensic specialists and RC psychologists
- Experienced SCs often go to court or will shadow new SCs unfamiliar with court-especially during the first visit. Forensic specialist reviewed all documents
- Expedite building relationships with court officials
- General counsel or attorney or retainer can provide training
- Development of legal team
- Experienced forensic specialists can provide training
- Request documents and share info amongst RCs
- Know what the qualifications are: job descriptions from RCs; creating statewide standards; i.e., MA or BA but haven't sit for BAR but understands RC
- Question: Do we promote CSCs or hire those with court experience?
- Training: Per NLACRC there are programs developed by local California State University systems
- Use forensic specialist to cross train and sit on taskforces, etc., need to be heard by RC leadership- the input from the "doers"
- Stakeholder input what the position might need: DA/PD; RCs case management
- Group's discussion with PD and DA (Jonathan Petrak and Matthew Byrne) question posed: What qualifications would you recommend for forensic specialists to have?
 - Familiarity or willingness to access, understand and interpret laws
 - Someone who can be comfortable being vocal
 - Any background is fine but can withstand the pressure and able to develop a "shell"
 - o Can empathize but able to remain fair, impartial and unbiased

- Knowledge of the regional center system is important
- Interested in learning
- Able to develop trust
- Take ownership as necessary
- Able to keep balance between DA/PD, consumer, and public safety
- Adapt to culture as appropriate
- Identify in-house the person with the most applicable experience. Hire someone from the outside with education/experience in this area
- Make it an official position at the RC, ensure that is the only role the person fulfills, don't make that position wear "many hats"
- RCs need to support the position to direct the SCs who have an official staffing that involves the forensic specialist
- RCs need to operate the same and have the forensic position do the same thing across the RCs
- Provide tablet/laptop to the forensic position to be able to complete work while waiting at court
- Forensic position to provide trainings to other SCs
- Executive Director of RC should be educated on the forensic cases and what the forensic specialist does
- Support training/education for the forensic specialist
- For the forensic forum to continue and be ongoing
- For DDS to acknowledge that forensic consumers need support and training/education on these issues
- RCs should have the statistics on how many consumers are forensically involved.
- Commitment from RC Executive Directors to have a forensic position
- Waive CMS regulations for forensic cases
- Better funding of the RC system
- RC managers/supervisors need to be educated on the court system and forensic issues
- Forensic specialists carry serious cases at ELARC
- SGPRC forensic specialist does not carry cases; goes to court; trains court; tracks cases; and staff the Forensic Consultation Committee
- Training for vendors
- Forensic coordinator from each team
- RCOC Psychologist writes/reviews reports
- LRC: Track what arrested for/who's arrested; reports are reviewed by the legal team
- IRC: Forensic psychologists; Legal department has forensic case managers
- Difficulty getting into jails for assessments; IPP meetings
- All participants in the group discussion have some form of forensic specialist position at their respective RCs
- All RCs need a forensic specialist, ideally a team
- Each RC needs to determine how many
- The forensic specialist could have a specialized caseload with very limited number of consumers. The specialist will also act as consultant to other social workers
- There needs to be a separate person for DC liaison- enhanced case management

- TCRC: Need to have forensic specialist at the RC; have someone write the reports; prepare or be prepared for court; committee method works; have a training; establish policies/procedures; have one point of contact to advocate buddy program- assign newer person to a person who has more knowledge; best thing is to go to court and gain the knowledge
- RCRC: Contracted with someone who developed a forensic toolkit for each coordinator; send report prior to the court date; talk to them (courts) all they can say is "no"; bring form information but also have a plan; layer additional services

Question 2: For those regional centers that already have the above resource, do you feel that it is sufficient or are there still additional things that could be done differently to support the demands? What do you think is the best model for managing forensically involved cases? Consultant based (i.e., POS or OPS)? Or Case carrying (service coordinator, forensic specialist?) Please elaborate.

- From PDCs perspective: The forensic specialist should have excellent writing skills
- RCEB: provide ongoing training
- PDC: they find that changes in RCs with a forensic specialist the consumers get into PDC faster because the orders are done well
- NLACRC: Formalize what the forensic specialist does in court
- FNRC: RCs should have more than one forensic specialist ad a forensic manager and specialist for CPT/PDC
- PDC mentioned a problem: What happens when a PDC client picks up a new case while at PDC in Tulare County? Tulare County Court usually doesn't send court orders to the RC; the responsibility of the diversion orders goes to PDC and not the RC case manager; oftentimes, the case manager does not know the new case occurred
- TCRC/SDRC/ARCA: Training sessions online and shared knowledge base from other forensic specialists
- FNRC asked: Who provides training to staff?
- SDRC/ARCA: ARCA can bring ideas re: training to different RCs
- SDRC/ARCA on best model for managing cases: Don't use the POS because there might be labor law problems. "If it looks like a duck, is it a duck? "
- FNRC: All Forensic Specialists represent the RC director
- NLACRC: Use CPP funds for the Forensic Specialist position
- FNRC: Deflection & Crisis Service Specialist vs. "Forensic Specialist"
- NLACRC: some RCs don't have the ability to have a forensic specialist therefore case carrying
 case managers can have the knowledge base to do the forensic specialist job if needed –
 provide training
- Training for a forensic specialist not a service coordinator who is not well versed in the court system. Train for knowledge of court culture. Practical experience & shadowing is very helpful
- RCs that already have a forensic specialist recommend to those that don't to add the position so that courts have a familiar person from RCs
- Have court liaisons that are paid under POS funds/vendor system where cases are contracted out as needed for those expertise
- More training for upper management & regular updates with court cases

- Re-training of SCs about the court process & legal guidelines. SCs are often afraid when in court
- Some RCs need multiple forensic specialists because of the size of their geographic area
- RCs to work together to help develop forensic specialist's roles expectations
- Need clear roles between duties of case management and outside consultants/specialists
- Some courts feel they should provide their own court attorney
- RCs should have a good data tracking system. Some RCs track data more than others. Data could support the need for forensic specialists. Sandis is not accurate
- One point person is essential
- A team is preferred for multiple cases and in case specialist leaves a team member can be promoted
- No caseload
- Risk assessment for individuals at intake with continued involvement
- Someone connected to existing courts- having one is not enough
- Familiar with or past experience with RCs
- Additional training or knowledge of court processes, i.e., BCBA + CSC, CPP/Forensic Unit
- As far as the best model for managing cases: it depends on what resources are available
- Best is to have Forensic team, with SPC, CSCs with caseload; Clinical
- Trainings to be ongoing
- Case review to assist CSCs that do not have forensic expertise
- Well funded
- Recommend a blended model: Consultant under POS, i.e., Attorney; and CSC/in-house specialist to do routine tasks. NLACRC uses PD/DA for consultation
- Proper funding, funding!
- More collaboration with other agencies like MAAB
- MAAB conducts targeted case reviews in a multidisciplinary panel
- More placement options; dually diagnosed facilities with the secured perimeter, delayed egress
- Waiver of CMS regulations for services/placements for forensically involved consumers
- Funding for RC resource developer to develop forensic services
 - Best model for handling forensic cases is to have a consultant and an in-house forensic specialist, and case carrying SCs that maintain the case, but is supported by the forensic specialist. Forensic specialist should not carry a case load. Case carrying SCs and the respective supervisor would consult with the forensic specialist and RC ED/agency would support the recommendations of the forensic specialist.
- Forensic specialist staffing in-house and on an ongoing basis
- RCs need statistics on how many forensically involved consumers are being served
- Model for case management funding of case management to come from OPS budget this is the preferred method; vendor a psychologist
- Possibly having a forensic specialist to serve mental health and a different forensic specialist to serve criminal courts
- For Southern California regional centers to have 1 forensic specialist to represent cases
- Cross training between court and RCs
- Rural RCs having a point person in each satellite offices
- Depending on the size of RC, may need to develop a forensic department

- Southern California RCs have Bobby Vargas who is housed in county jail- very valuable- really feel the need to have another "Bobby" as a backup, maybe another RC fund this position
- As far as best model for managing cases: Not a consultant based model- we need to know the client
- It is highly recommended for RCs to have a forensic psychologist
- Some RCs have been asked to do competency evaluations –other RCs report that court always does their own evaluations
- For rural RCs, it is not always fiscally possible to have a forensic specialist
- The decision on the structure of case management or the best model to implement, that decision depends upon the RC should consider the size of the regional center population and geographic areas served- rural /urban
- Sometimes Developmental Center Liaisons (DCLs) act as forensic liaisons which works for some RCs
- Some RCs are planning on developing "crisis teams" or "enhanced case management" in anticipation of de-institutionalization
- Sometimes it should be a specialized caseload; determine threshold of specialist working with coordinator- so they are consulting unless it is really involved
- Burnout can happen with someone who solely has a forensic caseload; forensic specialist acts like a consultant; have CPP team be the forensic specialists
- As DCs close, caseloads will filter to regular caseload coordinators- consult with the forensic specialist
- Have to have reliable vendors; make sure everything is in the Individual Service Plan (ISP)

Question 3: How do you establish or strengthen interagency collaboration?

- SDRC/ARCA: Assign a liaison to different agencies; conduct training
- FNRC: Be sure to call people back when you make a connection
- RCEB: Allow forensic specialist to attend training
- Reach out and connect with agencies
- Establish meet and greet activities
- Booklets/brochures for court staff, tailored to the courts; distribution of contact information for collaborative agencies
- PD/DA continuing education units/credits
- Cross-training between RCs
- Strengthen relationships in M.H. courts
- Dedicated court liaisons
- Serve as the main point of contact on all cases
- Set up shared cases: collaboration and training
- Be on time and professional, show up
- Patiently build relationships
- Go with the flow of the system
- Training between agencies (judges, attorneys, mental health) learning about the different systems (what works and what doesn't)

- Learn the language of each other's systems (numbers, letters, acronyms)
- Integrated health Project has been very helpful for some areas especially when RCs are relatively close together
- Meetings with all agencies involved
- Ongoing meetings with counsel at DDS
- Periodic trainings with SCs
- DC liaisons meeting quarterly
- Communication you have to talk! When players change, how do "we" re-engage and retrain the new individuals involved?
- Multi-agency taskforce
- Invite players to continue, etc.
- Have multi-agency taskforce reach out to stakeholders unfamiliar with RC system; start macro
 → micro
- Establish a point of contact at each RC to take ownership/responsibility of needed communication
- RC staff need to be competent, knowledge about the consumer, the RC system and services
- Willingness to collaborate. Need to have the right amount of resources
- RCs need the stats on how many forensic consumers are in the system
- Ongoing interagency RC task force for the forensic positions for all RCs. Maybe quarterly meetings.
- Move away from only focusing on our own RCs
- Need to do outreach to other resources/agencies
- Provide training
 - Quarterly statewide contact with forensic specialists
- So important to be in the court- consistent face to face interactions
- Develop relationships
- A lot of community outreach
- Making appropriate recommendations
- Training, training and more training
- Update MOUs
 - Re-establish case conferences, quarterly meetings across system
 - Create source of funding that defines the cross-system meetings
- Review MOUs every year to encourage collaboration
 - Conduct forums; make phone calls; go to Mental Health Advisory boards
- Win over the DA makes it so much easier
- Do trainings with EVERYONE
- Have consistent point people
- Have DAs and PDs come to RC to train staff
- Train what RC is and what they do

Question 4: What steps can be taken to establish cross trainings between the regional centers and community agencies?

- RCEB: Make the phone calls and ask to join community groups
- PDC: Build rapport with other agencies
- FNRC: don't stretch yourself too thin
- NLACRC: look for staff who are interested in forensics
- Different managers of SCs work with different aspects of court and SCs can be disconnected from the process
- Time management of training can be challenging
- Need for training coordinator in RCs
- Having a consultant/resource specialist might be more effective than regular training because court issues don't occur often enough on a particular caseload
- Have appointed SCs or one person from each department to be the primary contact
- Templates for report and initial letters. Some courts report that the report looks too much alike
- Establish MOUs for all counties and community agencies
- Attendance at committee meetings
- Continuance of forensic forum
- Cross training between agencies
- Outreach to find out who is who and create a forum for interagency meetings
- Create a forensic resource developer who can participate in interagency meetings and other
- Cross system collaborations needed
- Hard to cross train with RCs because there are different cultures
- Dropbox where all RCs could add all their internal "cheat sheets" so that other RCs could use
- More training with police
- RCs need to reach out to other agencies
- There should be agreements between agencies, this should be part of the MOU
- Attend committees, offer trainings
- Use Community Services staff or RC consultants to provide the training
- Operationalize training in Community C.S., or other department and make it an objective for training of other systems-regular update, ongoing to address, staff turnover- required via MOUs

B. Mental Health (MH) Courts

Question 1: How can you establish or strengthen your regional center's relationship with the Mental Health Court system?

- Work with Collaborative Courts; In Department 95 they are only working with RC cases and competency cases
- To start a behavioral court, start with the presiding judge; or supervising judge; it's a timely process
- CONREP gives reports for mental illness-RC for DD; RC to Department 95 has a panel of doctors that do competency evaluations; RC then makes the placement recommendations

- If the doubt is declared before the preliminary hearing, the case is transferred to Dept. 95
- If the doubt is declared after the preliminary hearing, the case stays with that court and is not transferred to Dept. 95
- Make sure that all clients are RC before they are ordered a 1370.1
- Court departments are different from each county so it can be challenging
- Restructuring within RCs so there is access to different court locations
- Building trust with court
- Teach RC staff to respect and learn the court system
- Having one person (forensic specialist) to represent the regional center
- MAAB to provide trainings to court in LA
- Make an employee available to attend
 - Multi-agency- clinical/stakeholder meetings
 - Utilize CPP deflection/placement plan to establish a percent of funding for forensic support
 - Create a one person representative to the courts-Forensic
 - One person for the mental health court
 - Court reports are comprehensive and are relevant to the issues
 - Develop a list of standard information that should be in the court report
 - Remain unbiased
 - LA RCs have great relationship with their MH court
 - Some counties have no MH Courts so work with the county courts
 - Would like to have Mental Health courts everywhere since some don't have them
 - How do we advocate to get one? How do we check if there are MH courts in certain areas?
 Answer: talk to the head of the D.A., or P.D. & offer training; some places may not have enough volume to have a MH court
 - From Matthew Byrne-LA County DA: Need to get consent for both PD and DA; make it a requirement to talk to either
 - Need to understand more about consents and confidentiality

Question 2: What steps are necessary to establish or strengthen the infrastructure for shared cases (RCs, MHCs, PD, DA, Probation and County Mental Health)?

- PDC: Have a point person
- NLACRC: Find out who you need to contact to get something done
- FNRC: Make sure you know the right person and right orders to get the job done
- TCRC: Join the interagency or inter-county collaborative to make recommendations; include the DA, PD, Probation, RC, Police. Establish a separate collaborative group for juveniles "Natural allies"
- SDRC/ARCA: "FAST" teams
- FNRC: Problem judges that flood counties with 6500 requests; lots of nuisance clients; revolving door clients are different from mental health; LPS conservatorship; judges become concerned; more juvenile cases
- SDRC/ARCA: has had good experience with their San Diego judges and lots of positive experience with juvenile judges
- Collaboration
- Relationship building

- Regular contacts like forensic specialists. Have a "face" for the regional center
- Have a regular contact with the court or mental health system
- Contact person is a strong networker and makes their presence known
- CONREP's role with courts. For regional centers, the process is sometimes confusing. RCs need more knowledge of CONREP (conditional release program), what is their role, if any, with DD population? How would this model work for RCs?
- It is important to share background information on shared cases
- Separate MH liaisons to work with agencies (DMH)
- Quarterly collaborative meetings
- Have MOUs to define roles with all not just some agencies
- Must follow thru with the MOU
- Ongoing joint meeting to discuss shared cases
- PD/DA suggestion: Use high level management to establish collaboration, use as introduction
- Communication; trust, being truthful
- Integrity; being unbiased
- Collaboration and following through
- Need access to IMDs
- Clients go to jail, who visits them? Create a system to ensure regular visitation and follow up
- Need to provide more training
- Communication
- Buy in from the entities
- Get to know each other
- Work on things together
- Have a RC forensic website