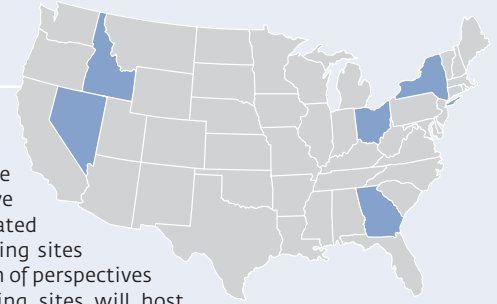


## MENTAL HEALTH COURT LEARNING SITES

**About the Mental Health Court Learning Sites.** The number of mental health courts (MHCs) in the U.S. has grown exponentially over the past decade. State and local officials who have recently launched—or are considering whether to launch—such programs in their jurisdictions often seek out more experienced MHCs for guidance and advice.

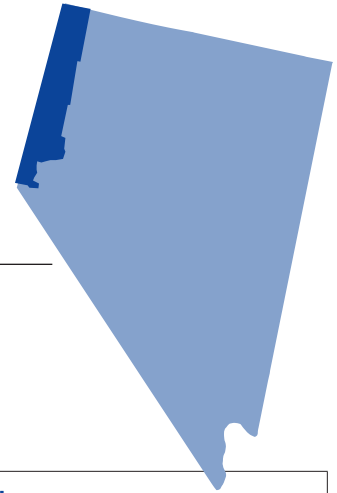
To facilitate peer-to-peer assistance among jurisdictions that have established, or are planning to establish, MHCs, the Bureau of Justice Assistance (BJA)—through its technical assistance provider, the Council

of State Governments Justice Center—has designated five MHCs as “learning sites.” Located across the country, these learning sites represent a diverse cross-section of perspectives and program examples. Learning sites will host visits to their courts and respond to telephone/email inquiries from the field.



# Washoe County, Nevada, Mental Health Court

## Program Description



### I. INTRODUCTION

The Washoe County, NV, Mental Health Court (MHC), recipient of a 2002 Bureau of Justice Assistance Mental Health Courts Program grant, was established in November 2001. Approximately two hundred participants are under MHC supervision on any given day. Eligibility is limited to individuals with misdemeanor or low-level felony charges, prior criminal histories, and either schizophrenia, schizoaffective disorder, bipolar disorder, or major depression. Most participants are persons with co-occurring substance use disorders. The MHC team consists of two part-time judges, a defense attorney, two pre-trial services officers, a state mental health liaison, and a probation officer.

Washoe County has a number of other initiatives to assist people with mental illnesses and substance abuse involved in the criminal justice system including an adult criminal drug court, a family drug court, a homelessness court, an alternative sentencing department, a post-booking diversion program, and a crisis intervention team (CIT).

MHC participants are identified during the pre-trial process by various sources including jail staff, pretrial services staff, staff of the public defender’s office, and municipal and justice court staff who

### Washoe County, Nevada, Mental Health Court

- Established in 2001
- Approximately 200 participants are under MHC supervision on any given day

The MHC is located in Reno, the Washoe County seat, where more than half the citizens of Washoe County reside (194,000 of 380,000). The city’s population is predominantly Caucasian (approximately 77 percent), with a significant Hispanic/Latino minority (approximately 19 percent). Nevada is frequently ranked last or next-to-last in terms of Medicaid expenditures per capita<sup>1</sup>—a fact that affects both the quantity and quality of mental health services in the county.

screen defendants for mental health treatment needs and investigate prior contact with the mental health system. Defendants are then referred to the pre-trial services agency, which provides services to MHC participants and non-participants alike.

Individuals who are accepted into the MHC agree to a minimum supervision period of one year. Graduation requires satisfactory progress as determined by engagement in treatment and services, and

1. As of May 2006

improvement in quality of life. On average, defendants are under court supervision for 14.4 months, and the longest period thus far has been 26 months.

## **II. PROGRAM ELEMENTS**

### **A. Planning and Administration**

A planning committee met for one year before the court began accepting participants. An advisory committee—comprising the judge, court administrator, mental health officials, staff from pretrial services, public defender, CIT members, and representatives from the jail—meets once per month and provides ongoing oversight to the MHC (e.g. this committee recently recommended that the MHC develop an aftercare program). Absent among advisory committee members is the district attorney, who has chosen to remain uninvolved in either the MHC or the drug court, but does not oppose the operation of these programs.

The MHC team has developed an operations manual, which is continually adapted as the program evolves. The manual includes the court’s mission statement, referral policy and sample forms, MHC statistics, client information form, and community resources list.

### **B. Court Team**

The MHC team includes two judges, a defense attorney, two pre-trial services officers, a state mental health liaison, and a probation officer. As mentioned above, the district attorney is not involved in the MHC. The probation and pre-trial services officers have received formal mental health/criminal justice cross training. The court began with one full-time judge but now has two part-time retired judges.

The MHC team meets before each MHC docket to discuss cases as well as treatment plans and sanctions. Probation and pretrial services officers meet in an initial case “staffing” to discuss new referrals; in a second, more-complete staffing, all other members of the team discuss problematic cases and possible sanctions and incentives. The public defender’s office is supportive of the MHC, but is not part of the court team. Instead, defense counsel is a private contract attorney selected by the MHC team to represent all participants; this individual is a significant contributor to the MHC.

### **C. Timely Participant Identification and Linkage to Services**

The MHC’s close working relationship with the local jail, the public defender’s office, municipal and justice courts, and the pretrial services agency enables early participant identification and consideration for entry into the court program. A fair number of potential MHC participants are identified at the jail, where staff screen arrestees for mental illnesses. These potential participants are referred for assessment and, if identified as needing mental health services, are provided treatment and referred to the MHC where the pre-trial services staff perform another screening to determine eligibility for the MHC.

Individuals who are accepted into the program appear in court the first Friday following acceptance, and are generally connected to services within 15 to 21 days of arrest. A participant who is not identified through the jail process is usually referred by the public defender’s office, and will generally be connected to treatment 30 to 45 days after arrest.

### **D. Target Population**

Eligibility is limited to individuals with misdemeanor or low-level felony charges and a diagnosis of schizophrenia, schizoaffective disorder, bipolar disorder, major depression or developmental disability. Participants must have had multiple prior contacts with the criminal justice system. Most participants also have a co-occurring substance abuse disorder. Anyone whose incident charge is “driving under the influence” (DUI) is automatically excluded; individuals charged with sex offenses or violent crimes are considered on a case-by-case basis. Some individuals with severe brain injuries are accepted, but the MHC is revisiting this practice, as it has not had success with these participants.

Reducing jail overcrowding and high rates of recidivism are two of the MHC’s goals, so the court targets participants with multiple offenses. This target population was identified within the context of the other ongoing criminal justice / mental health initiatives such as an adult criminal drug court, a family drug court, a homelessness court, an alternative sentencing department, a post-booking diversion program, and a crisis intervention team (CIT).

## E. Terms of Participation

MHC participants generally plead guilty and are given suspended sentences. Some, however, plead not guilty and go to trial. If these individuals are found guilty, they are given the option of serving their sentence or participating in the MHC. Participants agree to a minimum of one year of supervision and must be engaged in treatment, compliant with medications, and sober for at least six months in order to graduate. Terms of participation are explained fully by the contract attorney who represents all participants.

## F. Informed Choice

Jail staff, pretrial services officers, the judge, and representatives of various other agencies discuss the general terms of participation with MHC participants. The defense attorney explains the terms of participation in greater detail during the criminal court process, and further explanation is given by the MHC's pretrial services staff prior to the participants' first appearance in the MHC.

After accepting the terms of participation, participants receive a form with information about the MHC and their first scheduled date of appearance. Most clients face probation, at a minimum, if they do not voluntarily enter the MHC.

## G. Confidentiality

The MHC has written protocols to safeguard the confidentiality of program participants and their records. Several MHC staff members have worked in the state mental health system and are thus particularly sensitive to this issue. Only the pre-trial services officers have full access to client information.

To further protect confidentiality and reduce the stigma that can be associated with a specialty docket, no sign is posted outside the courtroom identifying that the MHC is in session.

The court is working to resolve other issues related to participants' confidentiality. For example, visitors are not required to sign a confidentiality form before listening to case staffings; furthermore, visitors are given a written summary of the court caseload with identifying information and are allowed to remove it

from the building. The layout of the pre-trial services room does not protect privacy; a lack of physical separation between waiting and screening rooms enables visitors to observe and overhear conversations between staff and MHC participants who come-in for drug tests or who wish to discuss their supervision. Similarly, a microphone used in the courtroom allows anyone present to hear the details of a participant's conversation with the judge.

## H. Treatment Supports and Services

Services are offered primarily through Northern Nevada Adult Mental Health Services (NNAMHS), a state-run agency in the vicinity of the MHC. Some participants who qualify for Nevada's General Assistance Program<sup>2</sup> may receive additional services, such as supported housing, through Washoe County Adult Social Services. As active members of the MHC team, NNAMHS staff support the MHC program and communicate with other team members regarding individual clients.

Every effort is made to link clients to appropriate services and to provide successful case management. Community services include out-patient physical and mental health care, medication prescription and management, supported housing, rehabilitation classes, vocational assistance, group therapy, and outpatient and inpatient treatment for co-occurring disorders. Individual treatment plans are developed and each case is formally reviewed every 90 days with supervision/treatment adjusted accordingly. In fact, participants' access to services may be at a level that exceeds the community standard.

MHC team members have identified several gaps in the service capacity of their jurisdiction, including peer-services and housing. Similarly, team members have identified the need to improve cultural competence in NNAMHS service provision.

## I. Monitoring Adherence to Court Requirements

Most participants are monitored by pre-trial services officers. A probation officer monitors participants whose current charges or past criminal history suggest

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<sup>2</sup> The General Assistance Program (GA) is run through Washoe County Adult Social Services ([http://www.co.washoe.nv.us/socsvr/socsvr\\_adult\\_ga.html-color=blue&text\\_version](http://www.co.washoe.nv.us/socsvr/socsvr_adult_ga.html-color=blue&text_version)). It provides cash grants to clients or vouchers to vendors to temporarily help low-income families or individuals. Generally, applicants for GA fall into one of three

categories: employable applicants, applicants pending assistance from Nevada State Welfare, and disabled applicants. Applicants must apply for assistance from State, Federal, and other community programs before requesting assistance from the County through GA.

a public safety risk, and probation is made a condition of participation in the MHC. Court appearances occur weekly to monthly depending on participant progress and/or time spent in the MHC program.

The MHC employs various sanctions, including community service, verbal reprimands in court, and increased in-person check-ins with pre-trial services staff or appointments with probation if a person needs more supervision. Jail time is used as a sanction when other sanctions have failed to yield positive results. The length of incarceration for a sanction ranges from one to three days.

### J. Sustainability

The MHC has worked closely with the Nevada state legislature to secure an ongoing funding mechanism. In 2006, the General Assembly enacted AB 175, which appropriated funds for both the Washoe County and the Clark County (Las Vegas) Mental Health Courts. The same bill provided increased funds for Northern and Southern Nevada Adult Mental Health services to develop additional community residential placements, hire additional staff, and develop a community triage center. State legislators are actively engaged in the MHC; an assemblywoman—when not in session—also happens to be the court coordinator, and other legislators have visited the court to learn about its operations.

The MHC has taken steps to train other judges on MHC procedures to ensure coverage during the absence of the sitting judges and in the event of a long-term absence. The court administrator is very supportive of the MHC. The MHC may need to train other probation officers to prepare for the possibility of losing this team member.

The court has developed a database to collect data and uses statistics to inform operational decisions. For example, when a review revealed that a number of participants completing the program had been re-arrested within a year, the court developed and implemented a post-release program to help participants transition successfully back into the community. The court hopes that this program will reduce recidivism among the participants completing the program.

The court is participating in a National Science Foundation three-year study of the voluntary nature of the court. The study involves interviewing newly enrolled court participants about their understanding of the processes, procedures, and requirements of the program, and examining their level of success one year after the interview. The study seeks to determine the factors that influence MHC participants' understanding of the program, and whether their degree of understanding predicts later success. The study will end in June/July of 2008 and results are expected approximately one year later.

To learn more about the **Washoe County's Mental Health Court**, visit: <http://consensusproject.org/mhcp/>

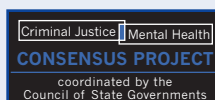
or contact:

**Julie Clements**  
Pretrial Services Officer  
Multi-jurisdictional Mental Health Court  
(775) 325-6641  
[Julie.Clements@washoecourts.us](mailto:Julie.Clements@washoecourts.us)

The Mental Health Court Learning Sites Program is supported by the Bureau of Justice Assistance (BJA). More information on BJA can be found at <http://www.ojp.usdoj.gov/BJA/>

To learn more about the Mental Health Court Learning Sites, visit <http://consensusproject.org/mhcp/> or contact:

**Lauren Almquist**  
Justice Center  
Council of State Governments  
(646) 383-5743  
[lalmquist@csg.org](mailto:lalmquist@csg.org)



To download other mental health court resources, please visit <http://consensusproject.org/mhcp/info/mhresources/pubs/>:

- *The Essential Elements of a Mental Health Court*
- *A Guide to Mental Health Court Design and Implementation*
- *A Guide to Collecting Mental Health Court Outcome Data*
- *Navigating the Mental Health Maze*

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