Dr. Sarah Vinson:

Good evening, everyone. I'm Dr. Sarah Vinson, an Atlanta based psychiatrist, and one of the co-chairs of the Judges Psychiatry Leadership Initiative. I'm really pleased to welcome you to tonight's program for the second annual JPLI Leadership Summit. To give you a little bit about the JPLI, as leaders in their respective fields, judges and psychiatrists are in a unique position to champion initiatives that address the over-representation of people with mental illness who are involved in the criminal justice system, initiatives that would ultimately enhance people's quality of life, improve public health, increase community safety, and use public resources more effectively. The JPLI aims to stimulate, support and enhance efforts by judges and psychiatrists to improve judicial community and systemic responses to people with behavioral health needs, who are involved in the justice system.

Dr. Sarah Vinson:

I cannot be a part of any forum this week and not acknowledge the tremendous loss of life that took place in Buffalo and the many challenges that our society is currently facing. I do think it's important that we continue to forge ahead and that in the work that we do, we take a stance of critical hope, one in which we recognize and acknowledge the challenges before us, take that in, incorporate that into our responses and continue to forge ahead and work collaboratively. I can say as a co-chair of JPLI, over these past few years, when our society has faced many, many challenges, it's been a tremendous honor and pleasure to be with a group of people who are willing to tackle the hard issues, that do so with grace and humility and a tremendous amount of energy. I'm really excited to have this program tonight to honor our Judge Goss award winners, and to have this panel and discussion with the folks from JPLI.

Hallie Fader-Towe:

Thank you. I'd like to invite judge Kathy Gosselin to speak a little bit about what brings us here tonight in terms of honoring the legacy of Judge Stephen S. Goss. Thank you, Judge Gosselin.

Judge Kathy Gosselin:

Thank you, Hallie. I'm really honored to be here to do this and talk about Judge Goss briefly, and I'm so thrilled that y'all have chosen each year to have these awards. Steve Goss began the first felony mental health court in Georgia. A few years later, I started mine, but I didn't really get to know him until we were in leadership together for the Council of Superior Court Judges. He was the president and I was coming on to the leadership group, and I began to watch how he did his job, how he worked with the legislature. I can tell you that that time was the time of scarcity, and there was a lot of acrimony from legislators to judges. He handled it all beautifully.

Judge Kathy Gosselin:

I got to watch him do that. He managed to deal with judges who were irate that they weren't getting the things financially they thought they should get. He handled that beautifully. We went on to work on several legislative pieces. One, the first one was the competency legislation that was changed, and he and I both worked with legislators to change that. We also worked on the mental health court legislation, adding them to the drug court legislation. Then when we started the Council of Accountability Court Judges in 2015, when we were getting ready to start that, he was instrumental in that process as well and became the second chair.

Judge Kathy Gosselin:

He was a scholar. I was always impressed with how well he did, how he could write, how he educated everybody. As we all know, he traveled the country, educating folks on mental health issues, death penalty issues regarding mental health, but he was a scholar. He was an empathetic judge. He was a generous and thoughtful friend and mentor to many, not just to me, and then that slow Southern drawl that he had was deceptive as the keen mind and political savvy were always in play. He contributed on the national and the local level to so many efforts to bring awareness and to change things for the better in regards to mental health all over. I frequently still start to email him because when there was a question, he's the one that many of us went to. So he was a wonderful man and we all miss him. Thank you, Hallie.

Hallie Fader-Towe:

Thank you, Judge. I'd like to welcome Bill Fazekas, someone else who worked closely with Judge Goss to add his recollections, as we think about the man we're honoring tonight, as well as the leaders that we will soon be honoring. Bill?

Bill Fazekas:

Thank you. Before I begin, I just want to say that the virtual image I chose behind me is an actual picture of Judge Goss during one of his mental health court sessions many years ago. I'm Bill Fazekas, and I first met Judge Goss in 2006 when I was enrolled in his mental health court program as a participant. I was struggling with deep depression and active addictions to both crack cocaine and pain pills. Looking back now, I was so lucky to have been in Dougherty County, Georgia, where I could benefit from a man like Judge Goss. The treatment court team he had put together was filled with caring, knowledgeable people that shared his vision. My mental health and addiction issues were difficult to work with, but Judge Goss was patient, fair and often brutally honest with me when I needed it.

Bill Fazekas:

After my fourth relapse, followed by a court appearance where I outright lied to Judge Goss right to his face, he had every reason to give up on me and send me to prison, but he saw something in me that gave him hope that I could get clean and start thinking clearly, because obviously I wasn't. He had a confident faith in me that I could change things around and start living a productive crime-free life. Back then, in 2007, the Judges and Psychiatrists Leadership Initiative wasn't around yet, and their mission statement about improving judicial responses to people with behavioral health needs wasn't written yet, but Judge Goss seemed to already know the concept because he didn't send me to prison. Instead, he sent me to RSAT, a nine month treatment program. I'm eternally grateful for that decision because I successfully completed treatment and I graduated from his mental health court program in 2009.

Bill Fazekas:

I continued to stay connected with the treatment court by volunteering for many years, and then Judge Goss found a way to make me an official member of his team by hiring me as a peer support specialist. I now work as a case manager in the same mental health court that I was a participant in many years ago. Judge Goss was vital to my recovery and my 14 years clean. He was vital to the productive crime-free life I now enjoy, and he was absolutely vital to my being able to reconnect with my parents and be the son they were deeply proud of before they died. I'm just one of Judge Goss's many success stories. There are so many more participants like me whose lives were touched by a thoughtful, fair and compassionate judge and whose lives are now lived outside the justice system.

Bill Fazekas:

Finally, I try not think about his tragic death because it unsettles me, but when it happened, I really needed a therapeutic way to deal with it. So I read all the beautiful comments about Judge Goss's life that were posted online, comments about Judge Goss being a great judge, about him being one of the truly good ones. A comment that said, "Judge Goss was fair to my son," and then the comment from a mother who said because of all the things Judge Goss had done to help her daughter, she no longer had to visit her in jail or prison anymore. That comment touched my heart and reminded me how very important Judge Goss's life was not only to all the professionals in the mental health community across the United States, but also to all the wonderful people right here in Dougherty county, Georgia. Thank you for allowing me to share my thoughts on Judge Goss's impact on my life. I will truly, truly miss him.

Hallie Fader-Towe:

Bill, Judge Gosselin, thank you both so much for sharing with us your memories of judge Stephen S. Goss, as we come together tonight to honor his memory, as well as to honor other judges and psychiatrists who are stepping up to show leadership on this critical issue. We'd like to today, during Mental Health Awareness Month, just take a moment of silence to reflect, as Dr. Vinson said, that we have a lot to think about this week, so we'll take a moment. We also, of course, encourage anyone who has concerns, there is help out there. So we'll take a moment and then I'll welcome Dr. Michael Champion. Thank you all so much. It is really exciting to be here tonight to recognize the new winners of the Judge Stephen S. Goss Leadership Award. I'd first like to welcome Dr. Michael Champion, one of the co-chairs of the Judges and Psychiatrist Leadership Initiative to introduce our first winner.

Dr. Michael Champion:

Thank you, and good evening, everyone. Thank you for joining us. My name is Michael Champion. I'm a psychiatrist based in Honolulu, Hawaii, and one of the co-chairs of the JPLI, and I have the real privilege of being able to introduce tonight someone who exemplifies excellent psychiatric leadership and improving the outcome for people with behavioral health needs. So a bit about Dr. Elizabeth Ford. She spent much of her 20 year career in direct care and also leadership positions, so in the trenches and also leading the folks in the trenches, working to improve treatment options for people with serious mental illness in and upon leaving the New York city jail system and particularly impacting and being among Black and Hispanic populations. She was the director of forensic psychiatry at New York city Health and Hospital's Bellevue Hospital, and then their chief of psychiatry for correctional health services until 2020. She currently serves as their Office of Behavioral Health's medical director for justice of persons.

Dr. Michael Champion:

While at Correctional Health Services, Dr. Ford oversaw psychiatric services at Rikers Island, and during her leadership, the jail experienced its lowest suicide and drug overdose rates, becoming a national model for providing comprehensive mental health treatment and reentry services. Dr. Ford is also director of mental health and criminal justice initiatives at the New York State Psychiatric Institute, Columbia University Department of Psychiatry and author of a book that I highly recommend. Its title is Sometimes Amazing Things Happen: Heartbreak and Hope on the Bellevue Hospital Psychiatric Prison Ward. So in these challenging times that we face both personal life, but also our workspaces, I highly recommend this memoir.

Dr. Michael Champion:

I just had a personal note. I've known Dr. Ford for the past 17 years as our professional pasts have unfolded and worked with her closely in the American Psychiatric Association's Council on Psychiatry and the Law. Can say in closing that she has a wonderful ability to navigate very complicated waters that we sail in in this criminal justice mental interface. She's able to do it while developing consensus, and it's all done with a really good dose of humor and just exemplifying being grounded in the midst of it all. So with that, I'll turn it over to Dr. Elizabeth Ford. Congratulations.

Dr. Elizabeth Ford:

Thank you very much, Michael. I hope that you all can hear and maybe see me. I'm not sure. It's a little unnerving staring at my picture on this screen. I am just really humbled and honored and grateful, and I mean, frankly, a little shocked to be this award winner. Just thank you so much, Michael. I'm aware of the folks who nominated me and just want to thank the three amazing women who have helped and nurtured me along my career, Carol Bernstein, who is my residency training director, Danielle Kushner, who was a forensic psychiatry fellow when I was the training director at NYU and is now devoting her career to the care of people who are incarcerated, and my current boss, Lisa Dixon at the New York State Psychiatric Institute, who is a powerhouse in her own right, and to primarily though thank the patients with whom I have grown as a doctor and just am grateful for their trust in me. As a healthcare provider, they have collectively shared with me parts of their lives that I don't know they share with anyone else.

Dr. Elizabeth Ford:

I'm humbled and privileged to learn from them and to hear their fears and their hopes, and to try in systems of care, at least in New York City, that if not intentionally, continue to dash those hopes pretty regularly. So I'm speechless, even though I've had, I think, two weeks to prepare something to say, but I do just want to thank you so much. Also, just to highlight, my career so far, and it's 20 years in, so hopefully I have another at least 20 to go, but has really tracked with the patients that I've cared for. So I learned how to take care of people who were in police custody in emergency rooms, and then from there learned about the jail system in New York City and then moved to the hospital units at Bellevue where men in jail were hospitalized.

Dr. Elizabeth Ford:

From there, learned from my patients about the trauma and the chaos, frankly, at that time, that was in the jail system, clearly contributing to the psychiatric distress that I was seeing in the hospital. So I moved over into the jail system. This was all pre-COVID, and then in the jail system, as things started to improve, they didn't ever become good in my opinion, but as things started to get better, I was increasingly hearing from patients in the jail that they struggled more in the community in terms of accessing care and feeling supported, which then prompted a move in my part, out into the community nonprofit world where I took care of people on parole and probation returning to the community from jails and prisons. So it's allowed me, as I sort of look back on it, to have the perspective of at least working in the spaces throughout the criminal justice continuum, where people with mental health needs spend time sometimes hours, sometimes years.

Dr. Elizabeth Ford:

I'm grateful for that because I think it's also allowed me in my current position and positions to try to really work on some of the deeply entrenched and complex problems that I think entwine both the mental health and the criminal justice systems, at least in New York City. So things like siloed and

fractured care, communication that if it exists, is pretty tenuous amongst clinical care providers in and out of the correctional institutions. Recognizing just the enormous power that psychiatrists have in this world, in this field and how important it is to use that power responsibly and humbly and respectfully to identify shared goals because there are shared goals. I mean, I didn't think that it existed, frankly. When I went into the jail system, I was like, I don't know that I have anything in common with some of the other people that I work with in this space, but it turns out that we do, and I think in any situation you can find shared goals and things to respect in each other.

Dr. Elizabeth Ford:

I think that sort of consensus building and working together for a particular mission or vision is really critical. Probably the deepest issue, not probably, certainly the deepest issue to tackle stems from just the profound impact of trauma and fear on the way people behave in situations. We have evidence of that every day in this country and have for centuries. So I don't know the exact path forward in terms of that, but I'm just grateful to be in the space and to be working with real public health warriors and legal advocates and also colleagues who have lived through the criminal justice system and to try to push the needle in the right direction. So thank you so much. Thank you.

Hallie Fader-Towe:

Thank you so much, Dr. Ford and congratulations. Tonight's winners, as Dr. Ford mentioned, came through a national nominating process and a national selection committee. So if you are listening and inspired to nominate someone you work with, we will be welcoming nominations in March of next year. I would like to now turn it to another of the JPLI co-chairs, Judge Steve Leifman, to present the next awards.

Judge Steve Leifman:

Thank you, Hallie. Just real quick, I wanted to echo Dr. Champion's thoughts and congratulations to Dr. Ford. I've had the pleasure and honor to do some work with her recently, and she is so well deserving. I want to add my congratulations. It really gives me great pleasure to be able to present this next award to Judge Coffey. Judge Gosselin, in her introduction of Steve Goss, which was very moving and was so on target, mentioned something that I felt when I reviewed the applications that Judge Coffey has in common with Judge Goss, and that is that in the application, someone said that she was extraordinary and humble, which was Steve Goss to a T. It really touched me when I read her application because it made me realize that it was just such a perfect fit.

Judge Steve Leifman:

Judge Coffey has done remarkable work in Boston. She's from Boston. She's a community judge in the best sense, and she's used her talents and her position to really help Boston address issues of mental health. Not only did she help start one of the first mental health court sessions in West Roxbury of the Boston Municipal Court, she also helped set up other mental health court sessions all around Boston. It is clear from reading about her that she also understands the necessity of using evidence best and based practices to set up these courts. She has become a great convener of the sequential intercept mapping process, which is to me always one of the best ways to help communities understand where the gaps are in their system and so that they can tackle and take on these issues appropriately. She's also used a great moral authority of her position to reach out to all the other traditional and non-traditional stakeholders in her community, such as the law enforcement community, the homeless community, and has done great work with the Pine Street Inn, which is a phenomenal shelter in Boston.

Judge Steve Leifman:

She just continues to use the court to help people and understanding that a jail for most of the individuals who come into contact with our system is the wrong place and treatment is the preferred process for all of us, and which I believe probably led her to also work on setting up the homeless court. So I'm just thrilled to have this opportunity. I now want to congratulate and thank Judge Coffey for her phenomenal efforts and turn the mic over to her for comments and congratulations, Judge Coffey, and thank you so much for everything you've done.

Judge Kathleen Coffey:

Thank you, Judge Leifman, for your very kind and generous remarks. Good evening, everyone. I am truly delighted and honored to receive this very prestigious leadership award in memory of Justice Stephen Goss, a true champion and advocate for court involved individuals suffering from a mental health condition. Most certainly his life's work was filled with purpose, with innovation and courage, and these certainly are qualities that we all hope to emulate in our work and private lives. I also want to express my sincere gratitude to his family and to the selection committee for the confidence that they have placed in me. When I was growing up, my father often told me that if you want something done and you want it done right, ask a busy person. There are three women in the Massachusetts trial courts who I turn to for my many projects and endeavors, especially when they require boundless energy and creative ideas.

Judge Kathleen Coffey:

I want to recognize them and thank them this evening. Marisa [Hebel 00:26:42], who is the community justice project manager for the trial court, Sheila Casey, the director of specialty courts, and also Jessica [Fix 00:26:52], who is the director of grants. Thank you ladies, for your support and your steadfast commitment to the growth and development of mental health and substance disorder initiatives in the Commonwealth of Massachusetts. I also want to recognize and thank my support team. My husband, Joe. It's his birthday today, and our three children, Joseph, Jacqueline, and Patricia. They are my love. They fill me with encouragement, and in the words of Bette Midler, they are the wind beneath my wings. Thank you.

Judge Kathleen Coffey:

It has been my good fortune to serve as a member of the judiciary in the Commonwealth of Massachusetts since 1993. During my tenure as a city judge, a Boston municipal court judge, I have witnessed significant changes, improvements, progress, but before I delve into those, I think it's important that we talk about constants, legal principles that are worthy of mentioning, principles that do not change, that are rock steady.

Judge Kathleen Coffey:

The judiciary remains committed to the rule of law and the constitutional principles of fairness, due process, equity and impartiality in the administration of justice. As judges, our primary responsibility includes the protection of fundamental rights and civil liberties for all individuals who come before us, and especially for those who are vulnerable or marginalized. As judges, we continue to seek concrete solutions and answers for problems and controversies often rooted in substance disorders, mental health conditions and trauma histories. As judges, we continue to wrestle with the age old question, how do I change this person's behaviors? How do I reset the person's attitude so that the cycle of arrest, detention, jail, release, hospitalization, rearrest, further detention is not played out time and time

again? In other words, how do I stop the revolving door? Sadly for many people with a serious mental illness, that revolving door occurs all too frequently, blocking futures and impairing, impacting personal liberties.

Judge Kathleen Coffey:

The development and growth of specialty courts, and in particular, mental health courts, have provided a meaningful alternative to the traditional trajectory in the Commonwealth of Massachusetts, and through educational trainings and conferences and other initiatives such as the sequential intercept mappings and community meetings, judges have gained an acute understanding, a greater awareness of the needs and often overwhelming challenges faced by individuals who have a mental health condition. The change that I have witnessed through the years is a broadening of the lens by judges to include mental health treatment, long-term recovery supports to assist in the development of lifelong skills, thereby furthering the likelihood that revolving door is stopped. It's also important in our work that we are mindful of the impact of stigma. Stigma can act as a barrier and obstacle further resulting in isolation and depression.

Judge Kathleen Coffey:

It was my good fortune back in 2007 to work closely with a gentleman by the name of Judge Maurice Richardson. He was known by Mo, Mo Richardson. Judge Richardson was a visionary. He was wise, he was politically savvy, and back in 2007, with his assistance, we were able to secure a grant from the Sidney Baer Foundation. That gave us the seed money to start the first mental health court in the Commonwealth. It was started in Boston. It grew, the success was phenomenal, and we were able to expand to two additional mental health courts within the city of Boston. Courts throughout the Commonwealth have also adopted this model, and I'm very proud to report that in the Commonwealth of Massachusetts, we have 10 very active mental health courts.

Judge Kathleen Coffey:

Now, one of the challenges faced by the courts in the Commonwealth is that Massachusetts is one of three states within the country that does not endorse assisted outpatient treatment. Connecticut and Maryland are the two other states. So consequently, the criminal courts are often relied upon by family members as the mechanism for access to mental health treatment and services. In 2020, before the onset of COVID, I applied for a SAMHSA grant and we called it the BOAT Initiative. It stands for Boston Outpatient Assisted Treatment. Fortunately, we were granted funds through this grant, and although we lack an official AOT law, this program is operated through the criminal courts as a pretrial diversion initiative and a post-plea resource. It has provided the city of Boston with a panoply of resources, housing, employment experts, job training, a psychiatrist, social worker, recovery coach, and all of this is possible because this grant is a partnership with Boston Medical Center.

Judge Kathleen Coffey:

Without question, our alliance and close working relationship with Boston Medical Center has improved the court's delivery of justice. We are more accessible, responsive, and accountable to the needs of those suffering from a serious mental illness. I really want to emphasize that the courts cannot do this important work on our own. The issues are too complex and the solutions are not easily identified with existing resources, and we limit our strength and our breadth of solutions when we have a myopic systems vision. The courts need justice partners, especially within the behavioral health system.

Communication, collaboration, cooperation, encourage the four Cs must be our mantra and our guidepost.

Judge Kathleen Coffey:

I am ever mindful of the words of President Reagan, president Ronald Reagan. He believed that you can accomplish most anything in life if you are not concerned about who gets the credit. This philosophy has resonated and marked our partnership, our collaboration with Boston Medical Center and other area hospitals and medical institutions. I remain grateful for their support and their confidence in our shared vision. I want to end tonight with a success story. You know, as a judge, and we are very conscious of data and outcomes and measuring outcomes, but very frequently, I am asked, "Well, Judge Coffey, how do you know you're making a difference? You talk about recidivism rates, you talk about numbers, you have over a hundred people in your boat program. In your mental health courts, you have close to 200, but how do you know? How do you know you're actually making a difference in the lives of the people who come before you?"

Judge Kathleen Coffey:

Well, I want to share with you a story. It's our practice in Recover with Justice, and that's the name of the mental health court that I run in West Roxbury Court every Tuesday, it's our practice that when someone graduates, we make it a special occasion. My clerk bakes cupcakes, and the graduate gets to decide whether they want vanilla frosting or chocolate frosting, and we invite their family, social workers, their support system to the ceremony. The lawyers come, they sing their praises, the clinician and the probation officer, and the whole point is that we want to validate the efforts of the individual and give them hope as they leave the program. On one particular day, a graduate came in and he was wearing a tee-shirt. Now most people, for the day, because it is special, they wear a button down shirt and a lot of folks even wear a tie, but this particular gentleman, he was there wearing a tee-shirt. The tee-shirt had lettering on it that said, "No days off."

Judge Kathleen Coffey:

Well, those of few who are new England Patriots fans know that was the war cry, so to speak, of Bill Belichick, the coach for the New England Patriots. No days off. So when I saw this shirt, I asked him, I said, "Ah, you are a Patriots fan. Is that why you wore that shirt? Is that your special shirt for graduation?" He turned to me and he said, "No, Judge. That's not why I wore the shirt. I wore the shirt Judge, because I have come to realize and accept that going forward I have no days off. My mental health needs are constant. I carry them with me, and every day I must remember to address them, and this program has helped me to accept that reality, and it's given me the courage to continue."

Judge Kathleen Coffey:

That's a success story. So I would urge all of us to remain committed to our work, to remain constant in our efforts, to address the unique and often overwhelming needs of individuals who become court involved and who do suffer from a mental health condition. Like the new England Patriots, we also, no days off. Again, I thank you for the opportunity to speak with all of you this evening, and I thank you as well for this honor.

Judge Steve Leifman:

Thank you, Judge Coffey, for your thoughtful comments and for mentioning my old good friend Mo Richardson, and we, again, congratulate you for everything you've done and continue to do, and so

appreciate you and all the amazing work and help that you've given to so many people who are so deserving and in need of your services. So thank you and congratulations again.

Hallie Fader-Towe:

I'd like to stay with Judge Leifman actually, if you're ready, Judge.

Judge Steve Leifman:

I'm ready. I didn't know if you were going to make another introduction or not, but thank you. It also gives me great pleasure to introduce our next awardee, our Lifetime Achievement winner, Judge Milton Mack. I've had the pleasure of knowing and working with Judge Mack now for several years. Our mutual wonderful friend, Patti Tobias, who's with the National Center of State Courts and who you will hear from later introduced us several years ago, I think at a conference in Arizona. I was immediately struck by the commitment and passion and dedication that Judge Mack has shown for decades in this arena. He has served in many capacities, both as a probate judge in Michigan, but more recently as the state court administrator, and he's done an amazing job of using his position of first learning about these issues and taking that phenomenal knowledge and working with the Michigan legislature to make some of the most significant and what I believe to be positive changes to the laws in Michigan surrounding people with serious mental health issues.

Judge Steve Leifman:

Not only has he worked with good people in the state of Michigan, but he has been generous with his time to assist us nationally with many of our initiatives to help educate all of us on issues, given his personal experiences as a judge, in dealing with so many of these cases. I think he understood early on through the probate division that if we did a better job in the civil world, we could significantly limit the number of people with mental illnesses coming through the criminal justice world. I don't know anybody better or more deserving of this recognition. I want to thank Judge Mack not only for everything he's done for our cause, but also for everything he's done for me and helping me and educating me and really opening my eyes to the whole civil world and what changes we could make.

Judge Steve Leifman:

I'm also involved in a couple other initiatives that Judge Mack has been working on. He is a significant contributor to those initiative and has been tireless in helping us develop new strategies, new model laws, new ideas, and new approaches to really help this population, and he certainly has gone beyond the call of duty, not just working in his own arena, but so unselfishly giving of his time and commitment to us around the country to really help us address these issues. When we look back in 10 years and we see a significant change in our system and the criminal justice system no longer being the primary gateway for people with mental illnesses, it's going to be people like Judge Mack who helped us change the infrastructure, helped us change the structure and helped us put us on a path to truly carry out the goals and visions of the Judges and Psychiatric Leadership Initiative. So without any further ado, I'd like to introduce Judge Mack, congratulate him and thank him so much for his significant contributions. Congratulations, Judge Mack.

Judge Milton Mack:

Thank you, Judge Leifman for those rather kind comments. I want to thank the Judges and Psychiatrist Leadership Initiative as well. It's humbling, and I am truly honored to receive this award named after Judge Stephen Goss, who is one of the judicial pioneers in seeking ways to rethink the way judges

handle cases for persons with serious mental illness, so I can really identify with him. My own journey began with hearing civil mental commitments as a probate judge, and it didn't take me long to conclude that something was not right. It made no sense for me to wait for crisis before acting. Serving on Michigan's Mental Health Commission in 2004 reinforced my thinking. If we are in the recovery era and the success of recovery relies heavily on early intervention, then why do we wait? I saw our mental health code as an inpatient model in an outpatient world.

Judge Milton Mack:

So I did work hard to change Michigan's mental health code, but I had a lot of help. People say I'm persistent, even to the point of irritating sometimes, but just like a grain of sand in an oyster, I hope to be a Pearl someday. So while it is nice to have a [inaudible 00:46:10] framework that encourages earlier intervention and reliance on outpatient care, it will not work unless the community works collaboratively to make it work. So my work with the Council state court administrators led to the formation of the national taskforce, where I had the opportunity to work with brilliant leaders across the country, Judge Leifman, of course, but also Dr. Champion, Dr. Minkoff and of course irrepressible Patti Tobias, and so now the Judges and Psychiatric Leadership Initiative. This work is so important. Our work will improve the lives of those suffering from serious mental illness, people who are too often ignored or overlooked.

Judge Milton Mack:

That work is critical because it impacts so many aspects of society. The courts, hospitals, emergency departments, law enforcement, families, and mental health workers are all impacted by a system that fails to deliver. An improved civil system, as Judge Leifman mentioned, I believe is the most effective and impactful method of diverting people from the criminal justice system, diverts them before they involve the criminal justice system. So for example, in Michigan, we have over 200 problem solving courts, and while they serve about 7,000 people per year, they reject about 3,800 and our jails and prisons still have too many people with serious mental illness. For example, for at least the last three years, the number one reason for visiting Michigan's emergency departments was psychiatric care, including during COVID and pre-COVID. Last year, there were nearly 166,000 emergency room visits.

Judge Milton Mack:

This resulted in 18,000 petitions for treatment, but only 40% made it to the hearing. The revolving door was in place. We found that less than 1% of the persons who are petitioned in Wayne County accounted for 36% of all petitions filed, and I suspect that number is similar across the state and may well be similar across the nation. So if we took a look at the people who had at least 10 petitions, 51% of those persons had been booked into the jail, 53% had a guardian. Well last year they spent over 10,000 days in jail at a cost of \$1.6 million. Another person had 45 emergency room department visits at cost of \$600,000. No one was on an outpatient treatment order. Now, at what point in time do you say this isn't working and we should try something different such as outpatient treatment? I would submit that these numbers aren't unique to Michigan.

Judge Milton Mack:

I also believe that if we can effectively treat people in the community, we can reduce the number of people going to emergency departments, as well as reducing contact with law enforcement, reducing homelessness, reducing reliance on guardianships and helping people be the best they can be. We are now making a major effort in Michigan to expand the use of assisted outpatient treatment, including

providing a method to bypass hospitals altogether and file petitions for outpatient treatment only as well as making mediation a part of the process to encourage engagement with treatment. We have a long way to go, but the early efforts are encouraging. We are seeing dramatic drops in hospitalization and emergency department visits in counties that are implementing assisted outpatient treatment, as well as dramatic reductions in persons on AOT and being incarcerated. In Genesee county, they have about 300 people on AOT being managed right now.

Judge Milton Mack:

Over the course of last year, in any given month, the maximum number of their persons in jail are 12, and that's less than 1%, a vast improvement otherwise. So I really am optimistic that we have momentum on our side. So again, I want to thank the Judges and Psychiatrists Leadership Initiative. I really do appreciate this. Although this award does make me feel like a Pearl, I know I am not there yet, so I just have to go on irritating until we have a mental health system that works for everyone. Thank you very much.

Judge Steve Leifman:

Thank you, Judge Mack. You're clearly a pearl to us and we appreciate you being with us today. Again, congratulations for all your amazing work. I'll turn it back over to Hallie and we'll continue the program. Thank you.

Hallie Fader-Towe:

Thank you all, and congratulations again to our winners. Tonight is really a night about collaboration. My name is Hallie Fader-Towe. I'm with the Council of State Government's Justice Center. We, along with the American Psychiatric Association Foundation are the staff for the Judges and Psychiatrist Leadership Initiative and are thrilled to be partnering tonight with the National Center for State Courts, on our policy discussion, really building on the work of Judge Mack's paper. Tonight, we're going to have a conversation about the National Judicial Taskforce to examine the state court's response to mental illness and the exciting work underway nationally, as well as in the states.

Hallie Fader-Towe:

In order to introduce this task force, I have the pleasure of introducing Chief Justice Loretta Rush from the Supreme Court of Indiana. Chief Justice Rush is the president's elect of the Board of Directors for the Conference of Chief Justices. She's with us today in her capacity as a member of the Executive Committee for the National Judicial Taskforce. Chief Justice Rush, thank you so much for being with us. Oh, and I do believe you're on mute, Chief Justice.

Chief Justice Loretta Rush:

Oh, you know what you always say you're not going to have that happen. Well, thank you. Thank you for having us. The awards comments were fantastic. Very inspirational. I bring greetings from the Conference of Chief Justices and the Conference of Court Administrators. Let me just give you a little bit of perspective of who we are. Every state has a chief justice whereby the constitution of each state, we're responsible for the entire judicial branch, and one of the things we do as chief justices and head court administrators, we set the educational curriculum. We are responsible, not only for the cases we hear, but for the administration of justice in these courts. That's what brings us to the behavioral health issues of the cases that come before us. About 98% of the cases in the country are in the state courts.

Chief Justice Loretta Rush:

We have about 30,000 trial court judges, millions of cases. Just for an example, we have 1.4 million cases filed each year in Indiana, and I know Milton Mack just spoke, I think they have three to four million cases filed each year up in Michigan. So there's a lot. What we've learned is that so many of the cases coming before our courts have issues dealing with mental health. It's not just the criminal justice system. It's a civil system, child welfare system, domestic relations, family violence, guardianship cases, eviction, collection cases. So we take a landscape of the cases we come before us. The National Center for State Courts and the Conference of Chief Justices, the Conference of Court Administrators, we look at these issues that affect the courts, and we say what can we do? What tools can we bring? What leadership can we bring? What collaborations do we need to do a better job on how we're handling them?

Chief Justice Loretta Rush:

Because I will be the first to say the courts have not done a good job handling those that come before our benches with significant mental health issues. So we created a taskforce to deal with mental health and how can we develop tools, resources, best practices, policy recommendations for the conference. We'll be meeting with all the chief justices this summer. We will have a resolution to adopt the deliverables, the tools and resources. We have psychiatrists. We have many of your colleagues on the call today are helping us. We go to law school, we don't get trained on the behavioral health needs of those that come before us, and when you go to medical school, you don't get trained on the criminal justice system. So it really is a beautiful collaboration, and we both need to learn from each other. I love what Judge Coffey talked about when she talked about justice partners.

Chief Justice Loretta Rush:

So we are developing tools. We're having summits around the country, and we're sending teams, cross-system teams from our state. We sent a summit to the Midwest. We had a Senator. It's always important to have all branches of government because when you look at systemic change, sometimes it requires legislation. We are rule making bodies and courts who can require rulemaking, and we're having states look at having summits in their states. Indiana will be having one this fall. Every county's going to send a team of our justice partners, which will include a mental health professional or prosecutor, public defender, local government, the probation officers teams of at least nine of these justice partners to come together, looking at the sequential intercept model, mapping out the resources we have in our community and seeing all the off ramps we can create using the tools that this national taskforce is doing to do a better job for those who come before us.

Chief Justice Loretta Rush:

We know that the people in jail are there many times suffering from significant mental health. The majority have some type of substance abuse, mental health or co-occurring mental health disorder. To know that people are sitting in jail because they're waiting for a competency restoration hearing, it's not okay. So we are using, I call it, I hate to say the word bully, but I call judges super conveners. For some reason when we call a meeting, people show up. So how can you galvanize the tools that we're doing, that we're sort of going to get from the chief justices, our court administrators down to the trial courts, and again, we have so many trial courts, just as what you heard about today, that are already doing this excellent work, but we want to standardize it throughout our court system that it's not just for individuals in the mental health courts, which I love. We are growing those in Indiana, but dealing with a

better behavioral health response for everyone that comes before us. Our taskforce are set up for civil, probate, child and family, criminal.

Chief Justice Loretta Rush:

I don't know where I just went. I hope I'm still on. So we find it very important that we cover all of those entities. So I used to be a juvenile court judge. I've done tens of thousands of cases with regard to families in crisis, seen firsthand, the toll that a improper criminal justice response can have on the life of somebody. So we're grateful for the opportunity because we need you badly. We are developing a model for medical legal partnerships here in Indiana. When somebody goes in for medical care or behavioral healthcare, how we can partner with regard to legal service and legal aid attorneys to get them the help and resources they need. So we are thrilled about the opportunity to work with you and the work of the taskforce. It's an opportunity to highlight some of the collaborative efforts.

Chief Justice Loretta Rush:

We really are looking forward a long ... what is that line from Casa Blanca? We're looking forward to a long and healthy relationship with you so we can implement these, that this can be the standard, that you will help us do a better job with regard to making life decisions for those that stand before us, because as you know, the court system is a primary referral source to get people to treatment, but we have to do that correctly. So thank you for your time, and I'd like this time, I think I'm turning over to Patti Tobias, who again is our feckless, fearless, energetic leader. Patti.

Patti Tobias:

Thank you so much, Chief Justice Rush. That was a wonderful description of all of the important work underway and the collaboration with the taskforce and the Judges and Psychiatrists Leadership Initiative. It's my privilege to be part of a National Center for State court team that's supporting the outstanding work of the national taskforce. I want to thank the Judges and Psychiatrists Leadership Initiative for this opportunity to highlight some of the outstanding work of the taskforce, but first I want to ask each of the four panelists to briefly introduce themself. Just say your position, your name and your position, and one thing that you're excited about for the taskforce and I'll go to you first, Justice Goff.

Justice Christopher Goff:

Hey, thanks Patti. Hello everyone. It's really a pleasure to be with you tonight. Congratulations to all the winners. My name is Chris Goff. I serve as an associate justice on the Indiana Supreme Court. I work closely with Chief Justice Rush on many of her key administrative initiatives. I've been a member of the taskforce since 2020 and had the opportunity to attend one of the Midwest, or the summit that was put on by the National Center in the Midwest in Deadwood back in 2019. I was a trial judge for 12 years before I became a member of our Supreme Court, and I served in a community so small, there were only two judges and our kids married each other. I really am excited about the work of the taskforce because it makes the very best deliverables that are available in our nation, our population centers in Boston and Miami, available to places like the communities that I served in. I'm just terribly excited about that. I'm terribly excited about the opportunities that we have to partner with each other, and I'm just so very grateful to be with you tonight.

Patti Tobias:

Thank you. Justice Goff. Dr. Sarah Vinson, will you share one thing that you're excited about?

Dr. Sarah Vinson:

I am excited about the learning experience that has been the past few years and the way that it has caused us to rethink all the things that we have done, just because that's the way we've always done it, and for the opportunity that presents to us to make our systems closer to their stated purpose of rehabilitation and public safety.

Patti Tobias:

Thank you Dr. Vinson. Walter Thompson.

Walter Thompson:

How you doing? I'm Walter Thompson. I've been with the National Center of State Courts on this taskforce for the last two years. I'm a peer support specialist for 11th Circuit Court. I actually worked for judge Steve Leifman here. I'm very excited about being on this taskforce because I'm now allowed to put the perspective of what a peer sees as far as goes on in a court proceeding and what goes on in the mental health court. So I'm excited about that and I'm excited about the laws that's coming out of this and what the taskforce is finding, and I'm just happy to be a part of it.

Patti Tobias:

Thank you. Thank you, Walter. Dr. Champion, will you introduce yourself please?

Dr. Michael Champion:

Hi, Michael champion from Honolulu, Hawaii. I'm a co-chair of the JPLI and also a member of the National Judicial Taskforce. Outside of that, working day to day, I serve as the medical director for Hawaii's Department of Health in the adult mental health system here in Hawaii, and also serve as chair of the forensic division of the National Association of State Mental Health Program Directors. I think that what I would say I'm excited about is change has been needed in this space for a very long time, and I think different jurisdictions and folks within them have really been turning the wheels to make change, and the taskforce now gives an opportunity to really scale that up, to achieve an entire see change, to bring up all the boats and eliminate best practices.

Patti Tobias:

Thank you, Dr. Champion. Thank you for those introductions. I'm most excited about and want to have a conversation about our shared work with the Judges and Psychiatrists Leadership Initiative. Some of the areas that we have worked so closely together on, competency to stay in trial systems, educating all state trial judges on serious mental illness and co-occurring disorders, facilitating these three remaining regional summits where we're addressing over 28 states over these next few months, the Conference of Chief Justices and the Conference of State Court Administrators coming together on those regional summits, prompting changes state by state and community by community, and the importance of the voice of those with lived experience and including those with lived experience on all of our work going forward.

Patti Tobias:

So I just want to kick off a quick discussion by asking each of our members a question, and then we can add on if we want. I'm mindful of the time, so we'll keep it moving. Justice Goff, I know that you and Chief Justice Rush traveled throughout the state of Indiana and you met with and listened to all of your

trial judges. What did you hear about Indiana's competency to stand trial system and what are some of the recommendations from the taskforce and from the Judges and Psychiatrists Leadership Initiative that might be productive to think about for Indiana going forward?

Justice Christopher Goff:

Yeah, sure. Thanks Patti. So two weeks, 600 trial court judges and to a person in communities big and small, they struggle with bottlenecks in their competency restoration, competency examination systems. One of the first really big undertakings of the taskforce was to develop a deliverable that's available online, the leading reform competence to stand trial systems guide and makes 10 recommendations that I just will tick through very fast. One is that we need to divert cases from the criminal justice system. Most communities have no other alternative or response besides criminal justice, and so we're excited at the taskforce that implementation of the national 988 suicide prevention hotline will in time provide an alternative response and build out an alternative infrastructure to arrest and jail for persons who are in crisis.

Justice Christopher Goff:

Two, we need to restrict which cases are referred for competency evaluations in the first place. We need to stop referring so many folks with minor offenses to the competency restoration process. I'm really thankful for Judge Mack's contribution to this important discussion, but we really need to look at ways to get folks diverted into other responses. The criminal justice system is not appropriate when a less restrictive alternative is available. Three, we need to develop alternative evaluation sites. We don't need to send everybody to state hospitals when they go through a competency restoration process. Those alternative sites really depend on what your community looks like, might take place at the courthouse, might take place at a community mental health center, but we need to have alternatives to state hospitals.

Justice Christopher Goff:

Four, we need to develop alternative restoration sites. I was really excited to hear Judge Coffey talk about the boat program in Boston. We need more programs like that. So we are relying less on folks having to linger in state hospitals.

Justice Christopher Goff:

Five, we need to revise restoration protocols. When I was down in Miami and I met with Walter and Judge Leifman, we really learned about how so much time is wasted when we're educating folks on court proceedings. It really doesn't get to the heart of why they're in the criminal justice system in the first place. So we really need to look at those protocols. Six, we need to develop and impose rational timelines. When someone becomes justice involved and they go into the competency restoration process, there's kind of a sweet spot that judges can think about. Maybe 45 days or so, they start talking about having a status hearing with all the players involved. How's this person doing? Where are they at in the process? When can we get them back here. Judges and their partners in the justice system, whether they're in the mental health treatment community, they need to [inaudible 01:07:47] the timelines, and they need to speak with each other when folks get into this process.

Justice Christopher Goff:

Seven, we need to address operational inefficiencies. I won't touch on that, but there's just many ways that you need to look at through the sequential intercept model. How do you do what you do and what

can you do better? Eight, we need to address training recruitment and retention of staff. Nine, we need to coordinate and use data better. This is a big ask, but just by talking about the way we collect data, what we would like to have that we don't have can actually help smooth out the process and make it faster and better. Finally, we need to develop robust community based treatment and supports for diversion and reentry. So those are just 10 recommendations that the taskforce comes up with when we're looking at this problem that's everywhere, certainly everywhere in Indiana, about competence to stand trial. Thank you, Patti.

Patti Tobias:

Oh, thank you, Justice Goss. That was an excellent summary of some key areas that we all need to move forward on. Again, in the interest of time, I think I'll just keep moving on. I was going to ask Dr. Vinson, I'm so grateful. Where are you? There you are. I'm so grateful that you're joining us on the three regional summits sponsored by the Conference of Chief Justices and the Conference of State Court Administrators and the National Taskforce. Can you share your impressions of the first Southern region summit that we just held last month, and what are you sharing? What are you sharing with the attendees? What are you hoping that we come away with understanding?

Dr. Sarah Vinson:

Well, I'll say the conference was energizing for me as a mental health professional to see all these judges and court administrators talking about trauma informed and mental illness and diversion and development. It was really great to see and I think an indicator of how things are moving in the right direction. Of course, we wanted things fixed yesterday, but I left really encouraged about the way things are trending. Part of what we shared was the idea that everything that people do, their behaviors, their diagnoses are all influenced by these larger environmental and systemic factors, whether you're talking about family systems or societal systems, and that it's really important that as we are developing these programs, as we're improving the ones we already have in place, that we are always mindful of these contextual factors and considering them both in our interventions, but also in the current way that we go about doing business.

Patti Tobias:

Thank you, Dr. Vinson, and thank you again for sharing your time with us and all that you're doing on behalf of not only the Judges and Psychiatrists Leadership Initiative, but on the taskforce. So thank you again. So Walter, I want to ask you the question. Thank you so much for your ongoing service on the taskforce. You are such a contributor in all of the criminal justice work group meetings. Tell us about the important role of peer support specialists and how we can always listen to those with the voice of lived experience. Tell us how we need to do that.

Walter Thompson:

Okay. Well, thanks Patti. I hope I can do a good job on this. One thing I want to say before I go, when you guys was here in March, I was so glad to see you guys and actually hear you guys and go through everything. I was just very excited for that. As a peer, coming to this taskforce is we're now able to show you guys what goes on with the person with serious mental illness. Whoever comes inside that court is we're now able to go out to talk to them, to give the judges and give everybody another eyesight on what goes on with these clients. I mean, with participants and how they are. What's going on? How they doing? How they living? Seeing something out there they can be familiar with.

Walter Thompson:

When we get that familiarity there with them, they're now able to speak more freely. We're able to find out more stuff about them and how we can about it in the court and getting them treatment. So when they see someone that has actually went through everything with them, they start opening up more and you start seeing more success right there. That means is they're starting to trust you, they're starting to trust the system and they're starting to understand the system more. By us going out, actually sitting with them doing just everyday thing, going through classes, and then they see our recovery, they see that what they got going on, they can do better themself. So I get excited every time that I see this. I get excited every time that I'm in court and someone finally gets it and it gets them charges out, that we ain't just got to keep flooding the jails, that we can start getting treatment and people can have a better successful life.

Walter Thompson:

That's what the peers are there to do. So we're there to be a part of the team to help the court out, to understand what's going on with this participant. Whether it's criminal, whether it's mental illness, we are the ones that go through to try to help them through the separation because everybody needs help. That's what we are here for and that's what we're doing. I'm just very excited that I can actually add something to it, for people to see that, and they can understand people when they come to court. So that's it for me.

Patti Tobias:

Thank you, Walter. That was excellent. Thank you for being with us on the taskforce and thank you for sharing those thoughts today. All right, Dr. Champion, your next up. I fondly remember being in Hawaii with you, Dr. Champion, with Chief Justice Recktenwald, with state court administrator [Malie 01:14:06] and Judge Leifman. You were teaching all of the judges all about the serious mental illness in the courtroom and what judges could do better. Can you please share with us the joint training plans that we have underway, how the Judges and Psychiatrists Leadership Initiative curriculum will be updated working with the taskforce and what we're going to be able to do across the nation with those 30,000 trial judges that Chief Justice Rush mention.

Dr. Michael Champion:

Great. Thank you. I'm, I'm happy to. Just riffing off of what you mentioned, Patti, what you mentioned about being a chief justice here in Hawaii and state court administrator and our team is an example of what happens with the taskforce in a regional summit. So after the Western summit, we held a statewide summit in Hawaii, and many states are following the regional summit by having a statewide summit, bringing together all the stakeholders to really think, contemplate, plan about how to make progress [inaudible 01:15:25] look at best practices.

Dr. Michael Champion:

In conjunction with the summit here in Hawaii, we held a two day training for all of the judges in the state, or a two day education period on judges and psychiatrists partnering at this interface. So just a couple comments that are really at the heart of JPLI and also the work we're doing in the taskforce is that judges and psychiatrists are leaders in their profession and are really in the position to collaboratively work with stakeholders in a state and in a county and in a local jurisdiction to impact the system of justice, but also the system of care and how to work on decriminalizing mental illness.

Dr. Michael Champion:

So both judges and psychiatrists benefit from having ongoing education about a number of things to support decriminalizing mental illness and responding appropriately to matters that come before the bench, and that is behavioral health conditions and how they present. What are the current challenges when people present before the bench at this time in both the mental health system, but also the justice system? What our current best practice solutions and trainings, education that we have been providing within JPLI is outlining some of those best practices, which have been mentioned already here, but I'll repeat briefly and add developing adequate crisis services to help people stabilize in the community, revising and reforming the competency assessment and restoration process, diversion opportunities for both petty misdemeanor and misdemeanor felony charges where appropriate, and the use of peer specialists. So a variety of best practices are being identified by the taskforce and brought forward and codified in a material that could be provided to both judges and psychiatrists.

Dr. Michael Champion:

So the JPLI has been active for over 10 years at bringing this information to judges and taught by a team of judges and psychiatrists, and has gone across the country in one-offs to states and other jurisdictions to provide that training. Now the taskforce gives us an opportunity to really scale up that training, not only in the content and revising the content so that it can be both comprehensive introduction, but it can also be more limited or in the basket of updates about particular topics that can be rolled out either in person or online. So from my vantage point, and I think the co-chairs at JPLI share this vantage point, that the gratitude at being asked to participate in the taskforce activity and also partner moving forward in this sharing of best practices and training and education.

Dr. Michael Champion:

So just to end and wrap that up, we have developed collaboratively a plan to do a train the trainer set of endeavors, and our plan is to identify a judge and a psychiatrist in every state and territory to be trained as a trainer, to take it back to their state or territory, and be a resource for the state, for the judiciary and the mental health system on these principles, but also to develop further trainers across the state who can roll this out in a consistent way. So it's very exciting. It feels like what I started with, about what I was excited about the taskforce is the opportunity to really scale up these efforts to bring forward a big wave of change.

Patti Tobias:

Thank you again, Dr. Champion. I'm looking fondly, thinking fondly of coming back to Hawaii whenever possible. So I hope you all appreciate all of the collaboration that we have underway between the taskforce and the Judges and Psychiatrists Leadership Initiative. Thank you so much for this opportunity to highlight just a few of those areas of collaboration, and there are many more. The night would go on for hours and hours if we took the time to share all of them, but please stay tuned for further developments and other opportunities to share the good work of both the JPLI and the National Taskforce. Again, thank you for this opportunity. Thank you to the award winners, and thank each and every one of you for all that you're doing to improve the court and community response to those with mental illness. Together, we can make a difference and we can really make this happen. It might take 10 years, like Judge Leifman always says, but I'm hoping we can do it before then. So with that, I'll turn it over to the good Judge Leifeman to close us out.

Judge Steve Leifman:

Thank you, Patti, and thank all of our panelists for that really thoughtful and inspiring discussion. I was looking at the chat, and we had some wonderful comments and judges and others looking for more information on how they can help their community move forward. So you all did an amazing job, and I'm so appreciative. I also want to thank my co-chairs for all the work that they do all year round. This is a voluntary gig, and on top of our day jobs, and I know how much work it takes for all of you to do what you do. So, unfortunately, Justice Zenoff couldn't be with us today, but I want to particularly thank Justice Zenoff from the Illinois court for all of her wonderful work, and of course, Dr. Champion and Dr. Vinson, our psychiatric co-chairs. It's a wonderful and lovely group of individuals, and I think what helps us all do it so well is that we get along so well and are also focused on the mission.

Judge Steve Leifman:

I know that Justice Stratton was on earlier and hopefully she still is, and I want to thank her. She was our original co-chair when we started JPLI several years ago, and was the Judge Goss award winner last year and appreciate all the work she did and continues to do in Ohio. I want to thank Chief Justice Rush for her comments today, and for her phenomenal leadership with the CCJ-COSCA taskforce, and really helping us make a C change. Patti, when you asked everybody what they're most excited about, I mean, just seeing this incredible national initiative take off with the hope and opportunity that we can make this a phenomenal change is inspiring for me and I think everybody else. Walter, I think you did not tell exactly the truth. I work for you, it's not the other way around, but I do appreciate you so much and the amazing work that you and the other peers do in our circuit and around the country.

Judge Steve Leifman:

What's so special about the peers I believe is that they help people reestablish relationships and they incentivize people to want to get better. I don't think any of us can do that better than the peers. I always say they are the secret sauce of our recipe in Miami Dade, and I marvel at the work they do every day. So Walter, actually the Honorable Walter Thompson, he was elected as vice mayor of Florida City in South Florida, and appreciate him very, very much and everything he's doing. Not to mention, he's also a vet. So thank you, Vice Mayor. I also want to thank our award winners again, Dr. Ford and Judge Coffey and Judge Mack, for all of your wonderful contributions. I want to thank Judge Gosselin and Bill Fazekas for really their kind and warm comments about Judge Goss.

Judge Steve Leifman:

I miss him every day. It's just such a tragic loss for all of us personally and professionally, and I'm just thrilled that we have an opportunity to honor him and his memory through this event every year. Of course, none of this could happen or go on without the amazing, amazing commitment from the teams at the Council of State Government Justice Center and the American Psychiatric Association Foundation. I want to particularly thank Hallie Fader-Towe, Ethan Kelly and [Deirdra 01:25:12] for the work they do with us all year round, not just this event. We are a small but mighty group of people that get a lot of work done and we could not get it done without our team from CSG and APAF. So I also want to thank Chris [Sealy 01:25:33], [Lila Coffin 01:25:34] and Joy Lloyd Montgomery, who we work with throughout the year as well and today to put on this phenomenal event.

Judge Steve Leifman:

So if you want to learn more about the JPLI, the Judges and Psychiatric Leadership Initiative, you can go to the Council of State Government Justice Center website, or you can go to the American Psychiatric Association Foundation website, and there's probably even a link on the CCJ-COSCA website, and you

can learn more and get involved. We produce a validated, thank you very much, you guys are so good. We produce validated trainings for judges around the country with our psychiatric team, and it's really starting to pay dividends. No longer do we have to go explain to people there's a problem. Now we just are working with communities to help them fix the problem. So with that, I'm going to wrap up and I want to thank everybody. Patti, thank you again for moderating the panel. You did a phenomenal job. Thank you all. I wish you good health and look forward to next year. I think I may not have mentioned Chief Justice Bogg Georgia who's been a steadfast supporter of our work as well, and want to thank him for all of his support and help.

Judge Steve Leifman:

So I want to wish you all a good night. Thank you all and have a wonderful evening.