



Law and Justice Interim Committee
60th Montana Legislature

SENATE MEMBERS

LARRY JENT
CAROL JUNEAU
JESSE LASLOVICH
DANIEL MCGEE
GARY PERRY
JIM SHOCKLEY

HOUSE MEMBERS

SHANNON AUGARE
BOB EBINGER
EDWARD HILBERT
KRAYTON KERNS
DEBORAH KOTTEL
RON STOKER

COMMITTEE STAFF

SHERI HEFFELFINGER, Lead Staff
VALENCIA LANE, Staff Attorney
DAWN FIELD, Secretary

MINUTES

Adult Justice Working Group

January 11, 2008

Room 137, State Capitol
Helena, Montana

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WORKING GROUP MEMBERS PRESENT

SEN. JESSE LASLOVICH, Chair
SEN. DANIEL MCGEE
REP. TOM MCGILLVRAY
REP. RON STOKER

WORKING GROUP MEMBERS EXCUSED/ABSENT

SEN. LARRY JENT
REP. DEB KOTTEL

STAFF PRESENT

DAVID NISS, Staff Attorney
DAWN FIELD, Secretary

AGENDA & VISITORS' LIST

Agenda, Attachment #1
Visitors' list, Attachment #2.

CALL TO ORDER AND ROLL CALL

- 00:00:01 SEN. LASLOVICH called the meeting of the LJIC Adult Justice Working Group to order at 8:08 a.m. The secretary noted the roll, SEN. JENT and REP. KOTTEL were excused, SEN. MCGEE, REP. MCGILLVRAY, and REP. STOKER were present.
- 00:01:54 SEN. LASLOVICH reviewed the process in which the working group would conduct its work and provided a brief outline of his perspective of the work before the group. He asked the other working group members to do the same.
- 00:03:36 SEN. MCGEE said the issue of mental health is of great interest to him because of family members, friends, and community members who have suffered with mental illness. He said the question of establishing workable definitions for mental illness, particularly for the criminal justice system; how to administer and pay for programs and services without burdening tax payers too greatly; and how to best design a mental health system, are the most pressing issues.
- 00:08:56 REP. MCGILLVRAY announced that he would no longer be serving on the Law and Justice Committee. He said he is very supportive of the work done to date and that the issues are very difficult and complex to deal with.
- 00:10:47 REP. STOKER said testimony in the previous day's meeting echoes other concerns voiced during the past legislative sessions regarding HIPAA and the need for better avenues to deal with forensic patients, such as establishing forensic units in hospitals. He said the Las Vegas Police Department protocol excerpts (EXHIBIT #1) would provide good guidelines for establishing policy and procedures with which to deal with mentally ill individuals. He agreed that the costs to hospitals is a concern and noted that St. Patrick Hospital in Missoula refused a mentally ill individual, forcing the officer to transport the person to Warm Springs. REP. STOKER discussed a recent conversation with the director of Shodair Hospital about the ability of the human body to metabolize psychotropic drugs. He said he also met with the director of ACLU to learn more about certain issues and problems in the mental health area. He agreed that funding will be a major issue, no matter what decisions are made.
- 00:19:27 SEN. LASLOVICH said the issues in SJR 24 - drug offenders - is of particular concern to him. He said those with addictions have to be held accountable but it also must be recognized that these people need long term treatment. If those struggling with addictions can be kept out of the criminal justice system, costs will go down. SEN. LASLOVICH noted that 93% of offenders in prerelease centers have a substance abuse problem.
- 00:22:55 REP. MCGILLVRAY said it will come down to money and whatever is done must be done efficiently and intelligently.
- 00:23:49 SEN. MCGEE referred to page 5 of the updated work plan (EXHIBIT #2) and suggested that payment of hospital costs for "inmates" be monitored, but not identified as a top priority at this time. He read aloud the four itemized tasks identified for HJR 50 (page 4, EXHIBIT #2). He said, in his opinion, the biggest

issue in HJR 50 is to determine the amount of money spent by counties (second item) and is related to the discussion by Mr. Foster about hospital costs at the previous day's meeting because both come down to money. Regarding SJR 24, SEN. MCGEE said he believes that creative thinking must be used to address the issue of drug offenders and that California Proposition 36 may be key. He said treatment is not recovery and will not work if a person does not want to recover. A key component is whether or not a person is willing.

00:32:49 REP. MCGILLVRAY said he serves on the Billings drug court steering committee and that the professionals on the drug court have clearly articulated that when an offender has completed the 30-day program, they are at the worst point in the process. He said diversion is the right first step but needs to be continued through followup care and support for that person. He said that in a cursory look at Proposition 36, it does appear it would have an impact on Montana's prison populations.

00:37:57 REP. STOKER said another struggle will be with definitions for mental health and suggested for the work group's purposes, using "mental health" as a general term to cover all issues at this point. He asked for a schematic of facilities in state of both mental health and chemical dependency treatment centers. He said these facilities need to be networked so they can communicate and work together, which would improve the diversion process. REP. STOKER discussed his visit to the Billings Drug Court and various incentives used by the judge. He said persons who had a good week were given small rewards and that they seemed to be very excited about the opportunity to be able to provide a treat or surprise for their children and families. He also discussed the WATCH program, saying that the success rate is quite high.

00:44:42 SEN. MCGEE asked how many active drug courts there are in Montana. **Lois Menzies, Court Administrator**, said there are 12 active drug courts total, with four juvenile, four family, and four adult drug courts. She said they are in both limited jurisdiction and District Courts and she noted that the 2007 Legislature appropriated \$1.4 million dollars to drug courts. SEN. MCGEE asked where the courts are located. Ms. Menzies said Billings has a family and an adult drug court, Miles City has a family drug court, Sidney has a juvenile drug court and just set up an adult drug court, Great Falls has a juvenile and an adult drug court, Mineral County has a juvenile and an adult drug court. Missoula has a juvenile drug court, Butte has a family drug court, and Bozeman has an adult drug court.

00:47:19 REP. STOKER asked how family drug courts differ from adult or juvenile courts. Ms. Menzies said the family drug court deal with families whose children are at risk of being removed and placed in foster care. Ms. Menzies said the locations of the courts have been driven by the fact that drug courts have been established on an ad hoc basis by judges who had a desire to implement them. Because of this, there is little uniformity in where they have been placed. She said judges in Kalispell and in Teton County are also interested in creating a drug court.

00:50:59 SEN. MCGEE asked if there are District Court judges who are not interested in the idea of drug courts. Ms. Menzies said she is not aware of any reluctance but

said that if reluctance does exist, it is likely because of the time-intensive nature of a drug court. The work load is significant and requires plentiful staff. SEN. MCGEE asked if there are data on the recidivism rate for drug courts, as opposed to a regular court process. Ms. Menzies said data is starting to come in from drug courts but that there is no control group from which to make a solid comparison. She said she hopes to have enough data collected to make a report to the 2009 Legislature. SEN. MCGEE asked Ms. Menzies if she could gather data on drug court recidivism rates and success rates for the work group's next meeting. Ms. Menzies said she could gather statistics on a court-by-court basis and would have the information for the next meeting.

00:54:58 REP. STOKER asked if the Montana Judge's Association has defined a structure for a drug court. Ms. Menzies said the Montana Judges Association has a subcommittee comprised of drug court judges who meet on regular basis and act as a resource to other judges, but that the Association has not taken an official position. She said Montana drug courts are modeled after the federal model and also have local components also.

00:56:50 REP. STOKER said it is apparent that everyone involved in the process, from legislators to law enforcement to judges, needs more education. He asked if the working group could have a copy of the federal model and also suggested that the information also be provided to all entities involved, so that everyone is operating from the same knowledge base.

01:01:45 REP. MCGILLVRAY said from his perspective as a drug court steering committee member, it is quite evident that drug courts are successful. He said the reason more people can't be served in drug court is the lack of treatment facilities. He said in reading Proposition 36, it appears that the number of treatment facilities increased dramatically, but that data shows that for every dollar spent for treatment, \$2.50 in incarceration costs was saved.

01:02:51 SEN. LASLOVICH asked if the DOC could help provide recidivism rate information. He said the drug offender analysis prepared by Ms. Heffelfinger was good but that he would like to compare that data with drug court data. He estimated that the recidivism rate for drug courts would be much lower than in regular courts.

01:03:57 REP. STOKER asked that ideas and suggestions be recorded on wall charts as they are discussed by the work group.

01:05:43 **Pam Bunke, Adult Community Corrections, DOC**, clarified that the work group wants data on recidivism rates for drug offenders in the DOC system, both for sanctioned programs and secure facilities. SEN. LASLOVICH that was correct and said the work group would like the information for the February meeting.

01:06:54 SEN. MCGEE asked if there is a protocol for the different types drug courts that could be implemented statewide. Ms. Menzies said the federal model is available as a guide and has been tried and tested nationwide.

- 01:08:05 REP. STOKER asked that a separate chart be created for education and that the following categories be listed: the working group, the court system, law enforcement agencies, county attorneys, and all of the independent, nonprofit diversion facilities - both state funded and private.
- 01:10:42 SEN. MCGEE asked Ms. Menzies if there are existing protocols and if not, if it would be in her purview to establish a statewide, standardized protocol. Ms. Menzies said there are federal protocols but that there is not a state protocol. She said it is not the responsibility of her office to impose uniformity but said the Court Administrator's Office would provide support to that end. Existing drug courts were developed on an ad hoc basis and each obtained federal money on its own. SEN. MCGEE asked, if the legislature created standards, if the Court Administrator's Office could be the tool to administer those standards and facilitate the process. Ms. Menzies said it could be done, and added that when the \$1.4 million of state funding was distributed, each court was required to certify that it met the federal standards.
- 01:16:35 REP. STOKER said that when the public defender office was created, a requirement was put in place that it had to report annually to the Legislature. He said he would like to see the same degree of accountability put in place, if drug courts are implemented.
- 01:18:01 SEN. MCGEE asked **Bill Kennedy, Yellowstone County Commissioner**, to discuss a state-wide approach versus a county approach to creating drug courts. Mr. Kennedy said there is a wide range of approaches across the country and that factors, such as the level of uniformity, available resources, and funding sources, all have to be considered. California made the decision to fund its drug courts through a sales tax, but one approach isn't necessarily better than another. Resources and funding are the biggest pieces in any approach and are what counties have been struggling with for years. Even with diversion programs, jails still have fixed costs and require a certain level of funding.
- 01:25:30 SEN. MCGEE asked Mr. Kennedy to explain how the Billings Crisis Center is funded and operated. Mr. Kennedy said the Crisis Center was set up through a collaboration with Deaconess and St. Vincent hospitals, the City/County Health Department, and the Mental Health Center. It is funded mainly by the hospitals and is staffed by the Health Department and the Mental Health Center. It is a community-wide program and requires cooperation from local law enforcement, so crisis intervention training is provided for officers. The purpose of the program is to divert individuals from the hospitals' emergency rooms who could be helped through other avenues. Mr. Kennedy explained that, once an individual is brought to the Crisis Center, he can be held up to 23 hours and 59 minutes for evaluation. The person may then be referred to other programs or services for appropriate treatment. The goal is to build community resources that will ensure that each individual is placed in the correct facility or program. He said this has also decreased the number of people being referred to the Montana State Hospital. Mr. Kennedy said funding is the key and that there is a need for additional capacity. SEN. LASLOVICH asked if the Crisis Center is the only one in Montana. Mr. Kennedy said at this time, it is.

01:31:27 In response to a question from REP. STOKER, Mr. Kennedy said the 72-hour presumptive eligibility is being implemented through four pilot projects and would be used in the Billings Crisis Center, not the hospitals. The program is very new and has only been in operation since January 1, 2008. Mr. Kennedy explained the history of the 72-hour presumptive eligibility. He said he hopes to have enough data in 2009 to convince the Legislature of the effectiveness of the program and to support expansion of the project. Mr. Kennedy said he would like to eventually have that 23 hour and 59 minute hold time period expanded to allow the Center to hold patients for longer periods of time.

01:38:14 REP. MCGILLVRAY said he would like to know if a faith-based approach could be integrated into a model program. He referenced the nationally used *Celebrate Recovery* program specifically, and said while he wasn't sure how it would fit in, he would like it to be discussed as a possibility.

01:40:25 SEN. LASLOVICH encouraged everyone in attendance to bring forth their ideas and share them with the members.

BREAK

PUBLIC COMMENT

02:10:04 **Tracy Velazquez, Executive Director, Montana Mental Health Association**, in response to remarks made earlier in the meeting about the importance of a person being willing to accept treatment, said research indicates that treatment is effective even for those who resist it. Regarding drug courts, she said there is a growing body of evidence on what works and what doesn't. She said it is important that courts use evidence-based practices in order to create uniform and effective treatment. She also said that addiction should be approached as a chronic disease in which relapses will occur and should be expected as a part of the process; and that mental health courts should use an integrated treatment approach in order to effectively deal with those who have both addiction and mental health issues.

02:13:50 **Jim Smith, Montana Sheriff and Peace Officers Association, Montana County Attorney Association**, said both organizations he represents are willing to serve as resources to the work group and full Committee. He discussed several points of interest and said:

- regarding creation of a drug court system, it is important that both state and local governments be involved at all levels;
- he agreed the Billings Crisis Center is a very effective program and works well in conjunction with the HUB, which is part of the Community Mental Health Center; and
- he would like to know how the \$15 million appropriation to the Addictive and Mental Disorders Division (AMDD) of DPHHS, made explicitly to build community resources, has been spent. He suggested that the Committee request that it be updated on a regular basis by AMDD/DPHHS.

02:19:28 SEN. LASLOVICH asked how many Community Mental Health Centers there are in the State. Mr. Smith said there are four and that because funding is so short, satellite offices in smaller communities have been closed or services have been

eliminated. He said part of the \$15 million appropriation was intended to rebuild those services, which hasn't happened.

02:24:15 SEN. MCGEE asked what types of services are provided at a Community Mental Health Center. Mr. Smith said services cover a spectrum of treatments. He said that the Mental Health Center in Billings, for example, provides staff for the Crisis Center, operates the drop-in HUB center, operates a group home, and provides transportation for mentally ill people so they can get to their therapy programs, doctor appointments, and pharmacies for medication.

02:27:13 SEN. MCGEE asked how the HUB center differs from a rescue mission. Mr. Smith said the HUB in Billings is not very different from a rescue mission, with the exception of offering referrals for services, for which an eligibility requirement must be met.

02:28:04 SEN. LASLOVICH asked Mr. Smith to prepare a brief summary of each Mental Health Center. Mr. Smith said he would do that and noted that Dr. Harr would be another good resource.

02:28:42 **Dr. Donald Harr, Psychiatrist, Billings**, said he has been actively involved in mental health and substance abuse issues in Yellowstone County for many years. Dr. Harr asked to clarify the differences between the HUB center and the rescue mission. He said the HUB center is not open for overnight visits, as a rescue mission is; nor is food available. He said the HUB does serve lunch and is open Monday through Friday. He said, regarding previous discussion of the hold time limit at the Billings Crisis Center, that additional licensing requirements would have to be met in order for the Center to go over the 24-hour hold limit.

02:31:06 SEN. MCGEE asked Dr. Harr if he would agree that a 24-hour time period may not be long enough to help a person and if he thought the licensing issue should be addressed to allow the Crisis Center to hold people for up to 72 hours. Dr. Harr agreed that an extended hold time period would be beneficial.

02:32:20 REP. STOKER asked if hospitals would object if the Crisis Center was allowed to hold patients longer than 24 hours. He said it would likely decrease the workload of the hospital. Dr. Harr said he could not speak for hospitals. He asked to discuss the terminology of "alcohol and drugs", saying that from a scientific and medical standpoint, alcohol is a drug. He said it is important to differentiate because of the legality of alcohol and the illegality of drugs but that the term, "alcohol and other drugs" would be more correct. Dr. Harr also discussed the availability of services and said there are two major factors in access to services: the availability of professional mental health care providers and transportation barriers that prevent many from getting the treatment and care they need. Finally, Dr. Harr said he supports the idea of providing incentives for treatment and said he agrees with Ms. Velazquez' statement that treatment can be effective even when the patient isn't willing.

02:40:21 Deb Matteucci discussed a packet of maps (EXHIBIT #3) and asked to clarify that the maps have keys that explain what services each facility offers. She

thanked the LJIC for its work, saying that the issues are huge and that agencies have been struggling to work with them for years. She said care must be taken to make certain that changes are thoughtful and will actually improve the situation, and not complicate it further. She encouraged the members to review the challenges and issues at each intercept level, as discussed at previous meetings, in order to accurately identify areas to address. She asked that consideration be given to the recommendations formulated by the Mental Health Advisory Council (EXHIBIT #4) and the Corrections Advisory Council (EXHIBIT #5), and said that both sets of recommendations were provided in the meeting materials packet. Ms. Matteucci said data is a critical piece to creating effective diversion programs and Montana's lack of data collection is a stumbling block. She noted that both Texas and Washington made the choice to fund FTEs for data collection. In response to Mr. Smith's request for information on the \$15 million appropriation to AMDD for Community Mental Health Centers, Ms. Matteucci said she would provide an update before the end of the meeting.

02:48:15 SEN. LASLOVICH said committee staff would also follow up on the issue raised by Mr. Smith and would report back to the members.

02:48:50 SEN. MCGEE asked Dr. Harr to examine the mental health definitions in code (provided by Ms. Matteucci at the full Committee meeting on the previous day) and prepare an analysis, specifically how they pertain to the criminal justice system definitions. He asked Dr. Harr to counsel the working group from his perspective as a mental health professional. SEN. LASLOVICH asked Dr. Harr to include examples of what he thought a good definition would be. Dr. Harr said he is pleased to be of service to the working group and would also discuss this with the Montana Psychiatric Association.

02:51:18 **Dennis McCave, Captain, Yellowstone County Sheriff's Department, President of Montana Sheriff's and Peace Officers Association, and Chair of the Jail Commanders Subcommittee**, said the Subcommittee recently revised and updated Montana Jail Standards, which now mirror the American Corrections Association (ACA) standards. The revised standards were published in 2007 and approved by sheriffs across the state. The 2008 project will be to begin a review process of the standards. and particular attention will be given to the standards dealing with mental health. Captain McCave said at this point, compliance with the standards is voluntary but that discussion will be taking place on whether to codify them. He said the biggest obstacle to implementing standards state-wide is the lack of community resources.

Captain McCave said the Sheriff's and Peace Officer's Association is encouraging compliance and that the Jail Commanders Subcommittee plans to create inspection teams to inspect and review local facilities to see if they are in compliance. If a facility is not, the team will make recommendations and offer advice and/or help that will assist the facility in meeting the standards.

Captain McCave said the Sheriff's and Peace Officer's Association is very anxious to find solutions to the mental health issues facing local facilities and emphasized that the lack of appropriate community resources is the key factor.

He said he has personally experienced great difficulty in finding mental health professionals willing to come to jails. He discussed the situation in Yellowstone County and said it is a much better situation than most counties have, due to willing volunteers and the cooperation of the local hospitals.

Captain McCave discussed Mr. Niss' third recommendation regarding data collection and said the Yellowstone County Jail received a small grant through the Montana Board of Crime Control (MBCC) to begin that process. He said it is in the very early stages and that he hopes to get more grant money to expand the system to other local facilities, eventually having a statewide data collection system in place that will gather profiles of all inmates. He said substance abuse and mental health will be a focus of the collection system and that the MBCC would monitor the data and eventually be able to identify the types of cases being dealt with all across the state.

- 02:59:57 SEN. MCGEE asked what steps are being taken at detention facilities to be aware of mental health issues and what additional steps are taken, once an inmate is identified as having mental health issues, to get that person help. Captain McCave said he could speak only for his facility but that most jails have screening tools. He said the Yellowstone County jail has a checklist and if further services are indicated, his facility has the luxury of having medical staff available 24 hours a day. He noted that no other local government jail facility has this available and that mental health care is very rare in rural areas. He said it is up to the local jail to decide how best to address the needs of the person and that it frequently results in loading the person in a patrol car and finding a facility that will treat him.
- 03:08:04 SEN. MCGEE read Mr. Niss' first recommendation (mental health treatment for inmates - EXHIBIT #6) and asked if the revised jail standards addressed this. Captain McCave said not specifically.
- 03:09:16 SEN. MCGEE read the second recommendation (concerns stemming from the Final Report to the Court, *Montana v. Walker*, EXHIBIT #7) and asked if it would apply to a local detention facility. **David Niss, Staff Attorney, LSD**, said constitutional standards are very similar and that jurisdiction does not matter.
- 03:11:32 Mr. Niss discussed the *Estelle V. Ruiz* case as an example of constitutional requirements regarding mental health treatment and suicide prevention programs, and said this particular case does apply to both state and county detention facilities. SEN. MCGEE asked Warden Mahoney to comment. **Mike Mahoney, Warden, Montana State Prison (MSP)**, said MSP has a written protocol for suicide prevention consisting of six criteria and he read them aloud. Warden Mahoney said two experts worked on-site at DOC to assist with compliance measures and said the only question remaining is related to an American Disabilities Act issue, which is currently being addressed in court.
- 03:16:25 SEN. MCGEE asked Captain McCave if local detention facilities have universally applied statewide, written protocols for suicide prevention. Captain McCave said there is not a written protocol at each jail, but that the Montana Jail Standards

state the each jail must have a suicide prevention plan. He said it is up to each jurisdiction to develop its own plan, and the comprehensiveness of the plan depends on the resources available in that jurisdiction. He said sheriffs want to be in compliance and that the revised standards are intended to help with that.

03:18:16 SEN. MCGEE said he is hearing that, while constitutional standards have been identified by the courts, what is being done at the state and local level may not always meet those standards. He said at some point, someone has to review what is happening at each level in order to determine if legislative action is needed. He said he would like Mr. Niss to meet with Diana Koch, Chief Legal Counsel, DOC, to review protocols to see if issues have been addressed and if further action is needed. He asked Captain McCave if his association has legal staff available for a similar review. Captain McCave said legal counsel is not available at this time and oversight of his association is a discussion topic at an upcoming Association meeting. He said he feels the Association has taken a proactive course of action on the issue of suicide prevention. SEN. MCGEE asked Captain McCave to report back to Mr. Niss on the progress the Jail Commanders Subcommittee is making on this issue.

03:25:47 Warden Mahoney said state standards are different than county standards and that while counties can promulgate standards, each county is different and its protocol will have to be based on the resources available in that particular county. SEN. MCGEE said he did not expect all counties to adopt the exact same standards but that there needs to be some degree of uniformity. He said a key issue is to make sure that standards are developed, particularly in jails that have not done so. Warden Mahoney said "deliberate indifference" is an important standard to address. SEN. MCGEE said that is precisely the issue.

03:28:04 Mr. Niss said he did not feel comfortable acting as an arbiter on constitutional compliance by the jails or the Department. He explained his rationale and said he represents and presents the Committee's view and could not act as judge of whether or not the state or counties have met their constitutional obligations. He said his recommendations reflect his legal opinion that constitutional requirements are still not being met, due to the continuing instances of suicide attempts at MSP.

Warden Mahoney asked to address the working group, saying he was compelled to respond to Mr. Niss' comments. He said he has spent 28 years at MSP and that no matter what safeguards are put in place, suicide attempts will be made.

03:39:39 **Carl Rossten, Suicide Prevention Officer, DPHHS**, said he was just recently hired as the state's suicide prevention officer and that his duties include oversight of suicide prevention for all ages in the entire state. SEN. MCGEE asked what Mr. Rossten sees as a long-range perspective. Mr. Rossten said the ultimate goal is to get Montana out of the top ten states for suicide through the use of public awareness campaigns and evidence-based practices, and building community support programs. Mr. Rossten added that he agrees with Warden Mahoney that even the best suicide prevention programs will not stop attempted suicides.

- 03:42:31 **Tom Daubert, Helena, Citizens for Responsible Crime Policy**, said he is pleased that the direction of the working group seems to be leaning toward viewing drug possession and use more as a health issue than a criminal issue. He agreed with a previous comment that even coerced treatment can be as effective as voluntary treatment. Regarding infrastructure to develop diversion programs, Mr. Daubert said it is a matter of spending existing money in different ways, rather than allocating new funding. He said it is still unknown what the cost would be, where the gaps are, and what infrastructure is needed. He agreed that data collection is a very important component, in order to assess and evaluate what level of spending is needed. Mr. Daubert said he sent a letter reiterating his comments at the Butte meeting and urged the members to press the DOC for data regarding drug offenders. He said the working group may want to consider requiring departments to record data in new ways in order to analyze and assess information more easily.
- Mr. Daubert discussed his attendance at a recent drug reform conference and said attendees were from around the world, including Dan Abrahamson, author of California's Proposition 36, who addressed the LJIC by teleconference at the Butte meeting. He said Mr. Abrahamson has indicated that he is willing to travel, at his own expense, to Montana to meet with the LJIC.
- 03:49:32 REP. MCGILLVRAY said, referring to comments made by Mr. Daubert, that even if prison numbers decrease due to diversion programs, it may not result in major savings because fixed costs still exist. He asked if California has truly spent less on corrections costs due to Proposition 36. Mr. Dauber said he did not know and would find out.
- 03:51:46 REP. MCGILLVRAY, referring to comments made earlier in the meeting about the decriminalization of marijuana, asked to have his objection to this on record. He said alcohol and drug abuse has done more damage to families, to children, to parents, and to society, than any thing else known in human kind.
- 03:53:10 REP. STOKER complimented the DOC on its recent administrative rule prohibiting the use of medical marijuana by probationers and parolees.
- 03:55:47 Warden Mahoney said his top requests for the work group to consider are prevention, intervention, and training. He discussed each:
- Prevention--drug courts and mental health courts would prevent a fair number of individuals from entering the corrections system, particularly if appropriate treatment is available;
 - Intervention--more services and resources for the mentally ill;
 - Training--develop a range of standards for law enforcement officers, corrections officer, and perhaps even District Courts; and
 - the STEP program --there will always be criminal and mentally ill people, no matter how much prevention and intervention is done and programs, such as the STEP program, may be an effective program to deal with this population.

- 03:57:55 **Patti Jacques**, said she agrees with Warden Mahoney's suggestion for training for law enforcement and corrections officers. She suggested providing training for Parole and Probation Board members also. Regarding Mr. Niss' third recommendation (EXHIBIT #6), Ms. Jacques said she strongly supports the collection of data.
- 04:00:41 **Deb Sanchez, AMDD, DPHHS**, distributed copies of an article that explains HIPAA standards and requirements (EXHIBIT #8)
- 04:01:23 **Scott Crichton, Executive Director, American Civil Liberties Union (ACLU)**, discussed a Legislative Audit Division audit of treatment programs in secure facilities. He encouraged the working group members to read pages 23 and 24 where recidivism rates are addressed. He said that rates went up substantially after treatment was discontinued because of funding cuts. He also discussed the DOC's Advisory Council's seventh recommendation (EXHIBIT #5), recommendation 7. Mr. Crichton said there is no doubt that drug courts are very successful but that they treat only a very small number of people in the system. He said drug courts do not offer a systemic, statewide solution and that existing courts depend on federal dollars, which are quickly disappearing. He said one must be realistic in assessing how much of the problem drug courts alone can address. He said serious consideration must be given to other alternatives, such as the Proposition 36 model. He said it offers treatment in order to change behaviors, but also literacy tools and job skills and a way to help people become productive members of society.
- 04:08:19 SEN. LASLOVICH asked for a copy of Proposition 36. Ms. Matteucci provided a copy (EXHIBIT #9).
- 04:08:49 SEN. LASLOVICH adjourned the working group at 12:15 p.m. CI0429 8050dfxa