

Cook County Government
Behavioral Health Services Quarterly Report
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Law Office of the Cook County Public Defender
Behavioral Health Services Quarterly Report
1st & 2nd Quarter Report
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The following report is intended to provide the Cook County Board of Commissioners with the relevant information about services provided by the Law Office of the Cook County Public Defender in order to assess needs and improve quality and effectiveness of behavioral health care provided by Cook County government. This report focuses primarily on the Mental Health Resource Unit within the Public Defender's office.

General information on the population served, including how patients were identified or applied for services, a breakdown of where patients of the program(s) reside in Cook County and the number of patients served over the last 24-month cycle.

The Law Office of the Cook County Public Defender provides legal representation to indigent residents of Cook County. The office has various divisions throughout Cook County including the Central Division (George N. Leighton Criminal Court Building), 1st Municipal District (City of Chicago), 2nd Municipal District (Skokie), 3rd Municipal District (Rolling Meadows), 4th Municipal District (Maywood), 5th Municipal District (Bridgeview), 6th Municipal District (Markham), Juvenile Justice, and Civil/Child Protection. The Public Defender provides representation to clients who are not able to afford to hire an attorney in matters ranging from misdemeanors, felony cases, traffic violations, domestic violence, juvenile delinquency, child protection to postconviction matters.

The Cook County Public Defender overwhelmingly serves minorities, especially African American men from Cook County's poorest areas.¹ While African Americans represent only a quarter of Cook County's population, they constitute 76% of the Cook County Department of Corrections (CCDOC) detainees and 74% of Chicago Police Department arrests.^{2,3} More than half of CCDOC detainees are from majority black, impoverished communities on the South Side (one in three) and the West Side (one in five).⁴ The clients represented by the Cook County Public Defender struggle with poverty, numerous barriers to services and care, and often times undiagnosed and untreated mental illness.

In attempts to address the needs of our clients and provide holistic representation, the Public Defender created the Mental Health Resource Unit (MHRU) in late 2019 and it became fully operational in October 2020. Clients are referred to the MHRU by attorneys or justice partners (e.g., CCHHS Cermak staff, Justice Advisory Council, judges, etc.) who identify a need. After being referred, clients are typically assessed to identify mental health concerns/needs and, collaboratively, the MHRU team devises a plan to help improve our clients' quality of life and help them obtain the best possible legal outcome.

Within the first two quarters, the unit accepted 102 new referrals. These numbers do not accurately reflect the needs of our clients but are reflective of the limited capacity of the MHRU as they are

¹ https://www.cookcountysheriff.org/wpcontent/uploads/2021/06/CCSO_BIU_CommunicationsCCDOC_v1_2021_06_30.pdf

² Ballesteros, Carlos. "Backlog Leaves 100s in Cook County Jail for More Than Year." Injustice Watch, April 21, 2021, accessed July 5, 2021, <https://www.injusticewatch.org/news/courts/2021/cook-county-jail-courtbacklog-coronavirus/> 2021.

³ "Police Arrest Data," Chicago Police Department, accessed July 5, 2021. <https://home.chicagopolice.org/statistics-data/public-arrest-data/>

⁴ Olson, D.E., Tahier, S. (2012). Population Dynamics and the Characteristics of Inmates in the Cook County. Chicago, Illinois, Cook County Sheriff's Reentry Council, accessed July 5, 2021, https://ecommons.luc.edu/cgi/viewcontent.cgi?article=1000&context=criminaljustice_facpubs

currently operating with three staff members. Below is a breakdown of the type of referrals received within the last two quarters.⁵ Services will be explained in detail in subsequent sections.

- Number of linkage/placement referrals: 33
- Number of referrals for Psychosocial reports and treatment plan: 2
- Number of referrals for Psychological Evaluation: 5
- Number of forensic case consultation: 5
- Number of Treatment Plan and supporting memorandum: 5
- Number of general case consultations: 31
- Number of case management referrals: 31

In addition to providing services through the MHRU, **the Cook County Public Defender currently represents 164 cases in Mental Health Court program**, which aims to reduce criminal activity, improve behavioral health, and promote public safety by addressing the disproportionate involvement and specialized needs of persons with mental health disorders in the criminal justice system.⁶

Overall goals of behavioral health program(s) including goals unique to the specific population served.

The MHRU supports the office's mission towards providing a holistic defense by identifying and addressing clients' mental health needs that impact their legal cases and ultimate outcome. The overall goal is to accurately assess clients' mental health needs and diagnostic presentations in order to provide recommendations/consultation on how to best address the clients' needs and provide them with representation. Staff develop intervention plans based on the client's needs and link them directly to services utilizing a warm handoff approach. Furthermore, MHRU staff seeks to provide education on psychiatric and related issues to attorneys and the courts to ensure that clients are receiving quality representation and that statutory requirements are being met.

Information on the providers, managers, and/or operators of the behavioral health care program, activity or service and any overlap in funding, to the extent it is known.

The MHRU is led by Dr. Brittany Wells, Licensed Clinical Psychologist. Dr. Wells is responsible for developing and implementing the MHRU, managing all administrative duties, and providing clinical supervision to Master's-level clinicians. She also provides consultation on forensic psychological matters and conducts psychological evaluations. The MHRU team also includes Master's-level Mental Health Clinicians. Current staff members are Andrea Castillo, Licensed Professional Counselor; Laura Lord, Licensed Clinical Social Worker; Peter McInerney, Licensed Clinical Social Worker and Certified Alcohol and Drug Counselor; and Jada Williams, Licensed Social Worker. The Mental Health Clinicians are responsible for conducting mental health screenings and needs assessments. They devise treatment plans and psychosocial reports for mitigation purposes and provide direct linkage to services.

⁵ The statistics provided do not equate to the total number of new referrals as referrals can include multiple services/work products.

⁶ <https://www.cookcountycourt.org/division/problem-solving-courts/mental-health-treatment-court-program>.

The MHRU has three Mental Health Clinician vacancies which are currently posted on the County's Taleo career website.

Key performance indicators measuring the results of the program.

Success of the MHRU would be indicated by the number of clients served across the various divisions of the office and the number of favorable outcomes (legally and within the community) due to the MHRU. Given that the unit was recently conceived and is still being developed, key performance indicators are still being identified. The MHRU currently tracks the following information:

- The number of Forensic Psychological Case Consultations referrals.
- The number of Clinical Case Consultation (i.e., general mental health concerns) referrals.
- The number Mitigation/Mitigation Support referrals.
- The number of Juvenile Justice Division referrals.
- The number of Family Defense Division referrals.
- The number of mental health screenings (includes clinical interviews with the client, record reviews, and collateral interviews) completed.
- The number of referrals that have been accepted for full, in-house Psychological Evaluations (includes the administration of psychological assessment measures, clinical interviews, collateral interviews, record reviews, diagnostics, recommendations, and a written report).
- The number of referrals accepted for Psychosocial Evaluations (includes clinical interviews, collateral interviews, record reviews, and brief written report).
- The number of cases referred to outside experts following the recommendation of the Mental Health Resource Unit staff.
- The number of Forensic Psychological cases where outside experts were deemed inappropriate/unnecessary and consequential cost-savings.
- The number of successful referrals and placement with community agencies to assist with successful re-entry into the community.
- Cases with favorable outcomes (i.e. reduced or diverted sentences) due to the involvement of the Mental Health Resource Unit.

Quality measures or expectations for contracts involved in the program, where applicable.

There are currently no contracts involved in the operation of the MHRU.

Information on how the care being provided in this program serves the best interests of the patient/recipient of care as well as the communities where the patient/recipient of care or services resides.

The services provided by the MHRU serve the best interests of our clients by assessing their unique needs and providing tailored recommendations that adequately address those needs and assist counsel in their representation. The MHRU is not a treatment provider and therefore does not provide clients with the identified care that they need. However, following assessment, we provide direct linkage to

treatment providers and other social services. We work closely with providers within the legal system and the community to achieve this goal.

The MHRU is uniquely positioned to provide support to our clients while they are incarcerated and within the community. Using a wrap-around approach, we provide ongoing support to our clients as they reintegrate into the community and get established with service providers. Our goal is to help our clients to overcome various psychosocial barriers to successful reentry and reduce the likelihood of recidivism, which benefits clients and the community alike.

The MHRU also provides services (e.g., Psychosocial Evaluations, Psychological Evaluations, and Treatment Plans) to help mitigate sentences, thus ensuring that our clients receive quality representation and get the best possible legal outcome. Additionally, the MHRU provides consultation to assist attorneys in addressing clients' psychiatric issues when they rise to a level of interfering with their legal case (i.e., fitness to stand trial, NGRI, fitness to waive Miranda rights, etc.). This helps to ensure that our clients are represented in a fair and ethical manner.

Information on how the continuum of care may be addressed through this program.

The MHRU provides linkage to clients who are referred to the unit and in need of care. We work with clients while they are incarcerated and maintain contact with them should they be released to the community. We are able to support clients' continuity of care by following up with them in the community and identifying barriers to their care. If there are barriers to care, the MHRU staff will work with the client to identify providers and other resources needed (e.g., shelter, medical coverage, etc.) to ensure they receive continued treatment.

Information on the best practices in this type of programming.

In developing the MHRU, research was conducted on best practices for running a specialized mental health program within a public defender office. There are several Public Defender offices across the nation who also strive to provide holistic defense by including mental health or similar units such as Harris County, Knox County, Los Angeles County, Miami-Dade County, San Francisco County, Travis County, and The Public Defender Service for DC.

In addition to identifying best practices established through other public defender offices, the MHRU standards of practice related to assessment/evaluations, record keeping, and social work are consistent with industry standards, ethical guidelines, and bylaws outlined by state regulatory boards. Our practice emphasizes client-centered, trauma-informed approaches that focus on each client's individual needs.

Information detailing meetings and coordination on patient identification, programs and goals with other Cook County agencies, City of Chicago or other partners or entities on this program, where applicable.

The MHRU conducts weekly staff meetings to discuss individual cases and review case assignments. The team also meets bi-weekly for Case Conferences in which staff members focus on one case and

share ideas related to diagnostics, methods of assessment, and recommendations. The MHRU staff relies on peer consultation to ensure that our clients' needs are accurately identified and adequately addressed.

The MHRU does not currently have any formal partnerships with other Cook County agencies. However, we work collaboratively and have frequent communication with the Cook County Health and Hospital Systems (CCHHS) Cermak staff to execute linkage/placement plans developed by the MHRU staff. We also refer any clients to them who need immediate assessment, psychiatric evaluation, or mental health follow-up while in the Cook County Department of Corrections (CCDOC). The MHRU administrator meets monthly with administrators from CCHHS and Cook County Sheriff's Office (CCSO) to identify opportunities for collaboration, advocate for client needs, and develop policies/procedures to eliminate barriers imposed on PD clients.

The MHRU also works closely with the Justice Advisory Council (JAC), who currently places individuals who remain in custody at CCDOC in spite of being ordered on CCSO's Electronic monitoring with No Place to Stay (NPTS). MHRU staff meets with the JAC weekly to review the individuals on the NPTS list. MHRU staff then completes an assessment of identified clients and provides recommendations to the JAC on the client's level of care needs and appropriate facilities to provide that care.

The MHRU frequently hosts presentations from community providers to increase staff's knowledge and service utilization. We have also supported various initiatives by Cook County entities such as the Frequently Impacted Strategy project with the Safety and Justice Challenge in the past. We hope to continue fostering working relationships with other Cook County agencies to help serve our clients.

An evaluation of the program and an overview of any overlap in outreach, communities served, and programs with other Cook County and City of Chicago Agencies, and an evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access.

The Law Office of the Cook County Public Defender serves the county's indigent population that is involved with the criminal justice system. Our clientele is predominantly minorities and individuals facing a number of psychosocial stressors (e.g., racism/discrimination, barriers to care, unemployment, housing instability, etc.). By employing mental health staff, the Law Office of the Cook County Public Defender is able to adequately identify clients' psychiatric and social service needs and have become an integral part of devising and executing plans to address those needs. We are not only representing and assisting the clients, but we are able to provide them with the support needed to reduce the likelihood of reoffending.

We have seen success not only in linking and appropriately placing clients, but in favorable case outcomes due to the involvement of a mental health professional. There is some overlap in efforts with other Cook County agencies, CCHHS Cermak for example. However, we make every effort to work collaboratively with them and are mindful of their roles and obligations. The MHRU staff are a part of our clients' defense teams, and we differ from other behavioral health programs within Cook County

because we are directly involved in our clients' legal cases and are invested in their case outcome. We advocate for our clients from that perspective, and focus on their mental health, social, and legal needs.

Information with the costs associated with the program(s) and funding source(s).

The operation of the MHRU is covered by the Law Office of the Cook County Public Defender's budget.

Any additional information which may facilitate the Committee's understanding of the program, initiative, or activity.

In addition to the services/mission described above, it is important to note that the MHRU is an internal resource that supports attorneys in litigating cases for clients who have significant psychiatric issues. Below are examples of some of the consultative, clinical, and case management services provided by the MHRU:

- Consultation is provided when clients present with significant psychiatric issues and require a forensic psychological evaluation (i.e., fitness to stand trial, NGRI, fitness to waive Miranda rights). Consultation includes, but is not limited to, the following:
 - Conducting brief clinical assessments to help identify and expedite appropriate forensic psychological cases.
 - Reviewing forensic psychological evaluations, test data, and testimony to help defense prepare for cross examination.
 - Identifying the need for contracting expert witnesses, assist in identifying the type of witness most suited for the case, and recommend potential experts.
 - Reviewing records and assist attorneys in understanding diagnoses, medication, and treatment history as it relates to the client's functioning.
 - Providing attorneys with research on best practices and other treatise to support cross examination when applicable.
 - Providing education on various assessment tools commonly used in forensic psychological evaluations.
- Clinical services include the following:
 - Conducting Mental Health Screenings and evaluations to identify client's psychiatric history, symptom presentation, and current mental status/functioning to provide recommendations on appropriate treatment interventions to effectively meet clients' needs and reduce the likelihood of recidivism. Screenings and evaluations are also used to provide recommendations to attorneys on potential legal action or sentencing alternatives.
 - Completing Psychosocial Evaluations and written reports to outline significant mental health, substance abuse, and trauma histories to support mitigation. Reports include information related to evidence-based practices, current research, and applicable tools such as ACEs (Adverse Childhood Experiences Questionnaire) when appropriate.

- Completing thorough Treatment Plans with treatment goals, objectives, proposed treatment providers, and information related to prognosis.
- Conducting Psychological Evaluations to support mitigation and address pretrial or sentencing issues.
- Case Management services include, but is not limited to, the following:
 - Assessing clients' social service needs.
 - Providing direct linkage to mental health and social services within the community to address client's needs and help mitigate, reduce, or divert sentences. Staff utilizes a warm hand-off approach to increase the likelihood of success within the community.
 - Assisting clients with linkage to placement/housing when in need.
 - Monitoring clients' progress once linked to services to ensure adequacy of services provided.
 - Linking clients to job placement and other specialized programs (e.g., literacy programs, skills training, etc.) when possible.
 - Assisting clients with registration for Medicaid so that they can receive needed services.
 - Assisting attorneys by assessing clients' presentation and providing them with education and tools to improve their communication and the attorney-client relationship.

Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government entity's behavioral health care programs.

The MHRU has made changes to its tracking and data collection protocol to better assess areas of strength and need. Linkage and case management referrals continue to account for a large portion of MHRU referrals/client needs. There may be unmet client needs in these areas that could benefit from internal case workers in the MHRU and throughout the Public Defender's office. The MHRU will continue to monitor statistics and devise a plan for filling this gap if indicated.