CALIFORNIA PSYCHIATRIC ASSOCIATION

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To: Members of the Legislature

From: Randall Hagar, Director of Government Affairs

Re: Corrections Budget Reduction Concerns – Alternative Custody Options – Possible Impacts on people with a severe mental illness among those proposed to be released.

The California Psychiatric Association (CPA) is very concerned about one component of the CDCR Prison Population and Budget Reduction Package that proposes to achieve $1.2 billion in budget reductions per the recent unallocated budget cut in that amount. The Alternative Custody Option for Lower-Risk Offenders, which is meant to include 1) Inmates with 12 months or less remaining in custody; 2) Elderly inmates; and 3) Medically infirm inmates, we believe, needs further attention. This proposal which would be fully implemented in the 2009-2010 budget year, estimates a reduction to the prison population by 6,300 inmates..

The chief concern of the CPA is that it sees little evidence of effective planning for the release of prisoners with severe and persistent mental illnesses (SPMI) into the community. If the planned released is to be effective in ensuring the safety of the community and the health and safety of those with mental illness who will be released, there are two minimum requirements:

ASSESSMENTS: Comprehensive assessments leading to a comprehensive discharge plan from the prison environment; and,

COMMUNITY SERVICES: Adequate psychiatric treatment as well as social supports and services in the community pursuant to a comprehensive treatment plan.

In addition, the most effective planning will need to take into account the following:

1) Numbers of released inmates with SPMI;
2) Diagnostic profile of released inmates with SPMI;

3) Level of care needs assessment of released inmates with SPMI;
4) A specific inpatient/crisis/emergency plan for released patients;
5) Specific allocation of state hospital beds for the most ill;
6) Collaborative agreements with counties to effect conservatorships for some parolees;
7) Determination of a safe and sustainable rate of release;
8) Specific delineation of the obligation of the Department to pay for necessary community treatments, services and supports for inmates with parolee legal status;
9) Clarification whether or not the Department intends to sever the legal status of any current parolees or released prisoners (end parole status);
10) Specific delineation regarding the Department's obligation to meet the costs of treatment for parole violators remanded to local jails and needing mental health care;
11) Providing integrated substance abuse and mental health programs for the large number of individual who suffer from both disorders who may be released;
12) Provisions for adequate Corrections pharmacy budgets to meet possible increased caseloads at parole outpatient clinics;
13) Ensure the timely availability of Correctional treatment records to health and mental health providers in the community.

Many of these items represent issues for which the Department has historically come under intense criticism. The state of California has a history of hasty and inadequately planned and inadequately resourced releases from institutional care. The consequence is that some of our state's most vulnerable citizens have suffered the consequences and have paid a huge price.

The CPA urges the legislature to fully discuss each of these issues; to seek further information and satisfactory clarifications from the Department; and, not to succumb to pressures to hastily reach convenient solutions at the expense of more sober and thoughtful deliberation. People with mental illnesses, their families and their communities are depending on you.