I began working as Director of the MHJDP on December 5, 2013. I learned about the position by chance, reconnecting with Laura Cohen at a Mental Health America of Greater Houston annual event. Our professional paths had crossed over the past 15 years through her work with the juvenile justice system and Mental Health America. Laura is best known for her role as Director of the Felony Mental Health Courts, where she has integrated her passion for advocacy, as well as content and policy knowledge, into the nationally recognized program that has improved outcomes for justice-involved individuals. Laura has been a confidant, mentor and friend who has shared important lessons learned on program start up along with criminal justice system do’s and don’ts. I will be forever indebted to Laura for her guidance and support.

On August 23, 2014, the Harris County Mental Health Jail Diversion Program (MHJDP) began service with two providers: The HARRIS CENTER and Healthcare for the Homeless Houston (HHH) with their subcontractor SEARCH Homeless Services. Each of these organizations has a history of serving individuals with mental illness who are justice-involved and often homeless. It seems only fitting that we mark our first anniversary with a pause to say thank you to the many partners and stakeholders who participated in our program planning phase, and to also give a special shout out to Dr. Michael Seale and Laura Cohen, who played a significant role in these efforts. They have moved away from Harris County, but leave behind a legacy of broad interagency collaboration and genuine concern for people in need.

MHJDP represents a coordinated response to a problem observed and tracked by the Harris County Criminal Justice Coordinating Council, namely, the frequent cycling of individuals with mental illness through the county jail. The SB 1185 legislation sponsored by Senator Joan Huffman, Senator John Whitmire, and Representative Senfronia Thompson was inspired by the vision of Harris County Judge Ed Emmett. The initial groundwork for the implementation began with Dr. Bill Schnapp, who met with key stakeholders to discuss the legislation and gather ideas. Preliminary program suggestions were identified by Dr. Steven Schnee, Dr. Scott Strang, and Dr. Scott Hickey from The HARRIS CENTER.

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During my first week of employment, Dr. Schnapp arranged a visit to the Harris County Jail. I had visited several jails and juvenile detention facilities before to assess detainees and provide program consultation, however, touring the jail with Executive Director of Medical Services, Dr. Michael Seale, proved to be an eye-opening experience. Meeting Dr. Seale reinforced my respect for the role of family physicians in the field of medicine today.

Dr. Seale understands the need to treat the whole person, mind, body and spirit. As we toured the jail, the magnitude of the health problems faced by inmates as well as how policies and practices must be revised to improve treatment became extremely apparent. Dr. Seale is to be commended for his “never say die” attitude and commitment to improving patient care in a challenging environment.

The MHJDP was lucky to have had both Dr. Seale and Laura as participants in our program planning process. This was truly a collaborative effort with very busy and important people who were fully invested and willing to help make this program a reality. I want to take this opportunity to say thank you to the following individuals and apologize in advance for any oversights: Clarissa Stephens, Caprice Cosper, Ronny Velez, Hank Griffith, Jeff Jackson, Paul Wilden, Mende Snodgress, Clay Kibbert, Glenna Garcia, Kim Kornmayer, Mary Beck, Frances Isbell, Monalis Jiles, Scott Strang, Grant Kennedy, Cathy Crouch, Diane Reidy, Leonard Kincaid, Robert Henry, Asim Shah, Heather Muller, Barbara Dawson, Wendy Baimbridge, Raymie Hairell, Marshall Shelsy, Gerald Eckert, Denise Oncken, Floyd Jennings, Brian Lovins, Lori Lovins, Mary Beck, Kendra Thomas, Saira Shah, Diane Reidy, Mandy Chapman Semple, Kelly Opot, Wanda LeBlanc, Ken Minkoff, Christie Cline and Robert Simon. The work of these individuals and many more has helped implement new policies and practices that will contribute to systemic change.

Legal Corner
An Introduction to the Harris County District Attorney’s Office Mental Health Division
By Bradford Crockard

When the late Mike Anderson took over as District Attorney in 2013, one of the many great changes he made, which have been further enhanced by current District Attorney Devon Anderson, was the creation of the Mental Health Division (MHD). The MHD’s purpose is to handle the unique and complicated cases in which a defendant has significant mental health issues. Specifically, those duties include: 1. Handling all cases in which the affirmative defense of insanity is raised; 2. Handling cases in which the defendant is adjudicated incompetent to stand trial; 3. Representing the State in specialty mental health courts; 4. Assisting other prosecutors when any mental health-related issue arises in their cases. The MHD consists of eight staff members: a division chief, a district court chief, three trial prosecutors, a paralegal, an administrative assistant, and an investigator.

Insanity is an affirmative defense to prosecution, meaning that the defense has the burden at trial to prove that upon commission of a crime, the defendant, due to severe mental disease, did not know that his conduct was wrong. Normally, this issue will come up when a forensic examiner, such as one employed with The HARRIS CENTER’s Forensic Unit, finds that a defendant meets the criteria for the insanity defense and defense counsel notifies the State that he or she intends to raise this defense at trial. At that point, an MHD prosecutor will review the file and make a recommendation regarding the validity of the defense argument. Decisions must be made such as whether to take the case to trial and rebut the defense’s argument that the defendant was insane, whether to agree and stipulate that the defendant was insane, or whether to ask the court to conduct an independent expert to conduct an evaluation of the defendant. The case will be tried in front of a judge or jury if the parties cannot agree. If all parties agree that the defendant meets the criteria for insanity, there can be a stipulation, saving the time and expense of a trial. This is basically a plea to the court in which the defendant admits that he committed the crime while the prosecution admits that the defendant was mentally ill to the point that he did not know his conduct was wrong.

At trial, if a jury decides that the defendant committed the crime and was not insane at the time, it will sentence the non-convicted defendant accordingly. However, if the jury finds the defendant was insane, or if the parties agree to insanity, the case will remain under the court’s jurisdiction even though the defendant is considered acquitted of the crime, or not guilty by reason of insanity (NGRI). After such an acquittal, the MHD continues to handle these cases, which normally remain open for years, working closely with The HARRIS CENTER as well as with the specialized probation officers to make sure that during the pendency of these cases the patient is able to get treatment in the least-restrictive environment while ensuring the safety of the public. Each case is formally reviewed annually in addition to periodic status checks. The MHD’s current NGRI caseload consists of approximately 150 cases.

The MHD handles all felony cases in which the defendant is adjudicated incompetent to stand trial. Basically, a defendant will be found incompetent if he cannot rationally understand his predicament and aid his attorney in making decisions such as whether to take a plea deal or testify at trial. When this happens, the case is transferred to the 351st District Court and placed on the Competency Restoration Docket, which is treated as a separate court in a separate courtroom.
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If the defendant is indigent, he will be appointed an attorney in the 351st District Court which has expertise in defending clients with mental illness. Also present in court are The HARRIS CENTER personnel, who do excellent work in updating the parties on how patients are doing while in custody and linking defendants to community services.

After the adjudication of incompetency, MHD prosecutors will handle the case until resolution. Initially, all incompetent defendants are committed to a state hospital for treatment toward competency restoration. After this, each case takes a different path. Some defendants will be restored to competency and returned to Harris County to face their charges. If the defendant can be safely treated in the community, the prosecutor may recommend community supervision to the court. Otherwise, MHD prosecutors will continue to handle the case until it is resolved by plea or trial.

Unfortunately, not every defendant can be restored to competency. When this happens, the state hospital will either recommend an extended commitment or discharge to the community. If an extended commitment is necessary, MHD prosecutors will handle the commitment hearings, which are generally conducted remotely because the defendants are hospitalized outside of the county.

If the hospital recommends that the defendant be treated on an outpatient basis, MHD prosecutors evaluate the case with a focus on community safety. When incompetent defendants are allowed to receive treatment on an outpatient basis, prosecutors work with defense counsel, The HARRIS CENTER caseworkers, and Harris County’s Pretrial Services to ensure that such defendants will be successful and safe in the community. There are normally between 300-400 open competency restoration cases on the MHD docket.

In addition to the competency restoration docket, there are four separate specialized mental health courts in Harris County. Two, the 337th and 351st Mental Health Courts, exist to help special needs probationers avoid a prison sentence by linking them to highly intensive treatment and supervision. The 178th and 338th Felony Mental Health Courts serve defendants who suffer from mental illness, substance abuse problems, or both, by offering highly structured probations with access to a team of dedicated treatment professionals. In each of these courts, MHD prosecutors start by screening each case to determine that the person’s acceptance into the courts will be a just result for everyone involved, including crime victims and the community as a whole. MHD prosecutors remain on each case throughout the probation, attending weekly or monthly staffing meetings and dockets. The goal is to allow each person to be treated and supervised in the least-restrictive manner as long as it can be done so safely. The MHD is currently handling 150-200 of these specialized probations.

Finally, MHD prosecutors serve as consultants for other assistant district attorneys in the office. Mental illness plays a massive role in our criminal justice system and comes up daily in each court. Sometimes, a defendant’s mental health history is a mitigating factor for a jury to consider in determining punishment for a convicted criminal. Other times, the proper resolution to a case is a treatment-oriented one in which offenders may avoid incarceration as long as they remain compliant and safe. MHD prosecutors help by suggesting alternative sentencing options, such as a specialty court, or by evaluating a defense based on mental health issues. The goal of the MHD remains to balance the interests of providing mentally ill offenders with access to treatment while protecting the public.

SPOTLIGHT

A Profile of Excellence

By Joel Carr, Ph.D.

Kanika D. Anglin, M.Ed., LPC-S, CCHP, a native of Alexandria, Louisiana, is a Clinical Team Leader at The HARRIS CENTER Forensic Division, Jail Based Unit, Specialty Units. Ms. Anglin earned her Bachelor of Science degree in criminal justice in 2004 from the University of Louisiana at Lafayette, and she earned her Master of Arts degree in student personnel services-counseling in 2007 from Northwestern State University in Natchitoches, Louisiana.

Ms. Anglin completed her practicum at Westside Habilitation Center for dually diagnosed adult patients with Primary Intellectual and Developmental Disability (IDD) diagnoses and secondary mental health diagnoses. Upon completing her internship at Crossroads Psychiatric Hospital for acute adolescents, adults, and geriatric patients, and at Westside Habilitation Center leading to her Licensed Professional Counselor (LPC) credential, Ms. Anglin secured her LPC credential in 2010. Additionally in 2010, she earned her certification as a National Certified Counselor (NCC) from the National Board of Certified Counselors, and in 2015 she earned her certification as a Certified Correctional Health Care Professional (CCHP) from the National Commission on Correctional Health Care.

Ms. Anglin began working with The HARRIS CENTER juvenile justice programs as a Rehabilitation Clinician in 2008. She was quickly promoted to an Licensed Professional of the Healing Arts position, and then to a Clinical Team Leader (CTL). After five successful years in that position, Ms. Anglin transferred to a CTL position within The Jail Based Unit, Outpatient Services in 2014. In August 2015, Ms. Anglin assumed the position as CTL over the Jail Based Unit’s Specialty Units.
Since working at The HARRIS CENTER Ms. Anglin has achieved Board Approved Supervisor status with the Texas State Board of Examiners of Professional Counselors. Ms. Anglin’s expertise is in integrative psychotherapy, person-centered therapy, and cognitive-behavioral therapy. Ms. Anglin strives to provide the best mental health care services to her patients on a daily basis — a goal we should all subscribe to.

On a personal note, Ms. Anglin enjoys running, reading, shopping, and watching movies as much as possible. Indeed Ms. Anglin is a good example to all the consummate professionals working for The HARRIS CENTER Forensic Division. Ms. Anglin is located in the Harris County Jail at 1200 Baker Street, Houston, Texas 77002, and she may be reached at (713) 755-7496 or at Kanika.Anglin@mhmraharris.org.

After 40 Years

After 40 years of service with The HARRIS CENTER, Assistant Deputy Director of Juvenile Justice Services, Patricia (Pat) Sibley said farewell. Through the years, Pat made a valuable impact on the mental health services in Harris County, as well as Juvenile Justice Services.

Changes

Saying farewell to Pat meant finding someone with a vast knowledge of juvenile justice and mental health services. After an extensive search, Monalisas Jiles announced Betty Adams as the new Assistant Deputy Director for Juvenile Justice Services.

Marcus Guice, MD, was named Interim Executive Director of the Health Services Division for the Harris County Jail. The Executive Director Position has been vacant since Michael Seale, MD, left in September 2015.

Kiki Teal, RN, was named Medical Administrator for the Health Services Division of the Harris County Jail. She fills the position vacated by Bobby Davis earlier in 2015.

Jeannette Kolarik, LCSW has been named Program Director for the Harris County Felony Mental Health Court. She fills a void left when Laura Cohen, LCSW left her position in September 2015.

Melanie Suhr, MD transitioned from the Lead Psychiatrist for the Competency and Sanity Unit to the Assistant Medical Director for The HARRIS CENTER.

With the Lead Psychiatrist position, The HARRIS CENTER took the opportunity to restructure the Competency and Sanity Unit by creating a lead psychologist position to lead this unit. Steven Coats, PhD, was named the Lead Psychologist.