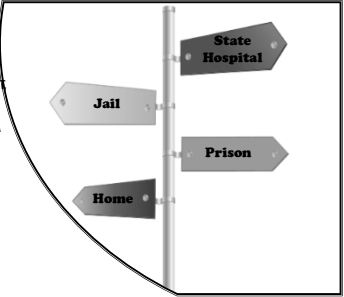


FORENSIC PATIENTS IN STATE HOSPITALS: COMMITMENTS, TRENDS AND THE SOCIAL WORKER'S ROLE

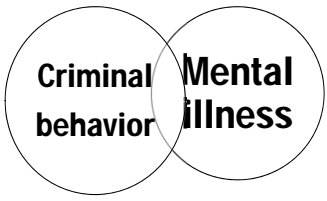
VERONICA KAUFMAN, LCSW

OBJECTIVES:

- UNDERSTAND THE COMMITMENT CRITERIA FOR ISM AND NGI COMMITMENTS.
- LEARN WHEN AN INMATE CAN BE COMMITTED TO A STATE HOSPITAL.
- IDENTIFY CURRENT TRENDS AND CHALLENGES FACING SOCIAL WORKERS WORKING WITH FORENSIC PSYCHIATRIC PATIENTS



FORENSIC PATIENTS



Criminal behavior **Mental illness**

CA DEPARTMENT OF STATE HOSPITALS

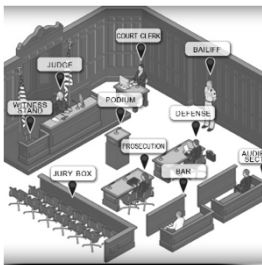


- NAPA, COALING, ATASCADERO, PATTON AND, METROPOLITAN.
- EMPLOYS ABOUT 11,000 STAFF
- SERVES APPROXIMATELY 10,000 PATIENTS ANNUALLY

INCOMPETENT TO STAND TRIAL

- DUSKY VS. US (1960)
 - RATIONAL AS WELL AS FACTUAL UNDERSTANDING OF THE PROCEEDINGS AGAINST HIM/HER.
 - SUFFICIENT PRESENT ABILITY TO CONSULT WITH HIS LAWYER WITH A REASONABLE DEGREE OF RATIONAL UNDERSTANDING"
- MOST COMMON FORENSIC COMMITMENT
 - ESTIMATED 60,000 ANNUALLY

GOAL OF HOSPITALIZATION



- RESTORE COMPETENCE
- RETURN TO COURT AS COMPETENT AND MALINGERING.
- RETURN TO COURT WITH RECOMMENDATION THAT COMPETENCE CANNOT BE RESTORED IN THE FORESEEABLE FUTURE.

NOT GUILTY BY REASON OF INSANITY

- DEFENDANT NOT RESPONSIBLE BECAUSE OF A MENTAL ILLNESS
- VOLUNTARY PLEA
- BURDEN OF PROOF IS ON THE DEFENDANT.

GOAL OF HOSPITALIZATION

- THE GOAL FOR AN NGRI PATIENT IS "RESTORATION OF SANITY," (NO LONGER A DANGER BY REASONS OF MENTAL DISEASE, DEFECT OR DISORDER.)
- THE GOAL OF TREATMENT IS TO IDENTIFY THE CAUSE(S) FOR THE DANGEROUSNESS (MENTAL DISORDER, SUBSTANCE ABUSE, PERSONALITY DISORDER, INTERNAL RESOURCES, ENVIRONMENTAL SUPPORTS, ETC.)
- RELEASE WHEN REACH MAXIMUM COMMITMENT OR WHEN PATIENT CAN BE SAFELY AND EFFECTIVELY TREATED IN THE COMMUNITY

INCOMPETENCY VS INSANITY

A constitutional protection	An available legal option
An involuntary commitment	A voluntary plea
"Bona Fide Doubt"	Mental state
Mental illness	Mental illness
Focus of Evaluation	Focus of Evaluation
Length of Commitment	Length of Commitment

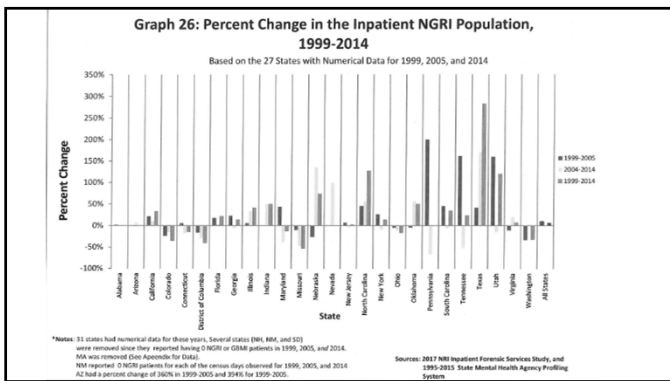
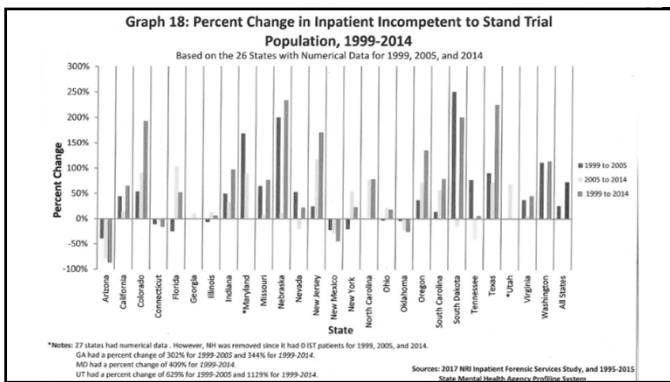
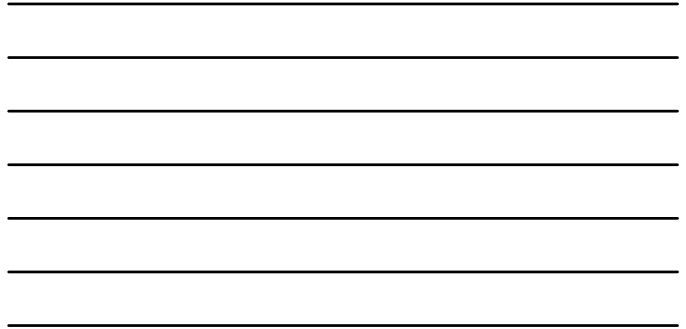
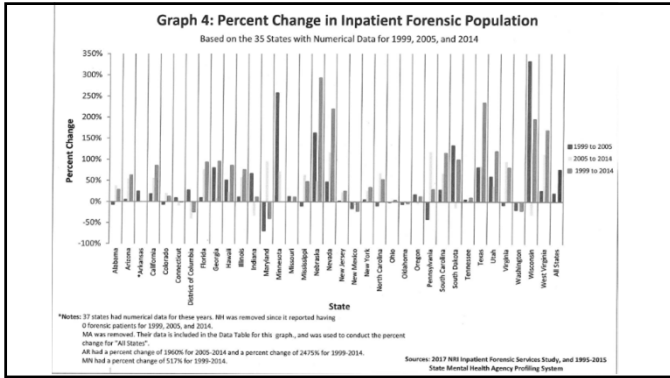
ADDITIONAL COMMITMENTS:

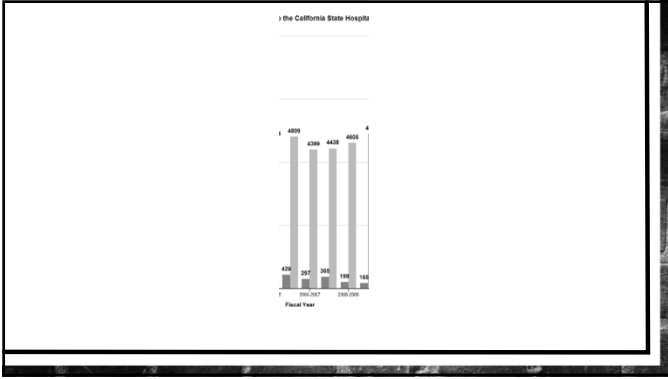
- MENTALLY DISORDERED OFFENDERS
- SEXUALLY VIOLENT PREDATORS
- PRISON TRANSFERS
- LPS

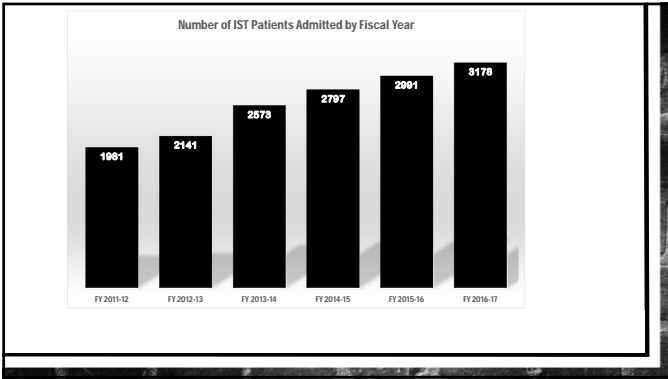
TRENDS AND CHALLENGES

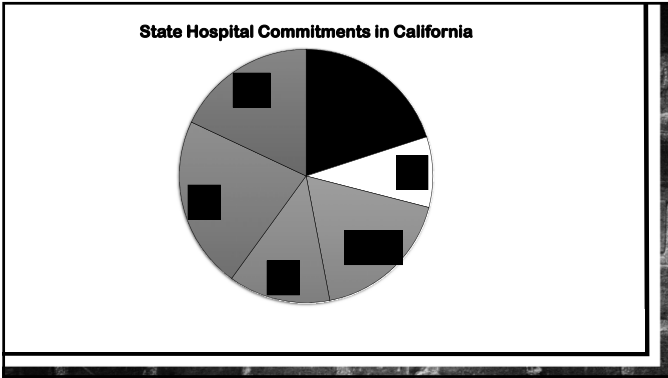
- INCREASE IN FORENSIC PATIENTS
- VIOLENCE
- PATIENT PROFILE

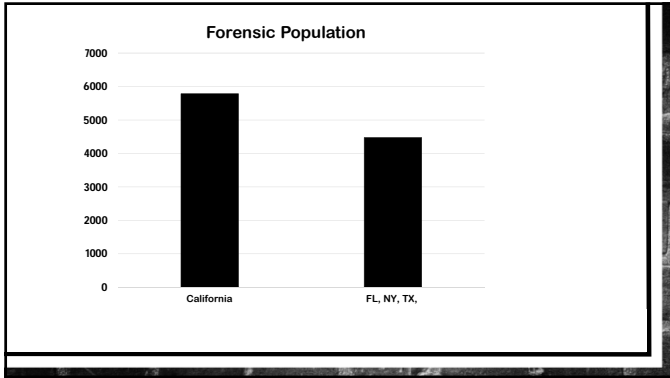
INCREASE IN FORENSIC POPULATION











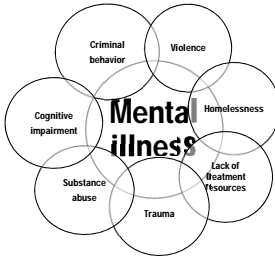
VIOLENCE IN STATE HOSPITALS

VIOLENCE IN STATE HOSPITALS

- DAILY ATTACKS COMMON AT THE OREGON STATE HOSPITAL, SOME SAY. OREGON 4/18/13.
- TOO DANGEROUS FOR PSYCH HOSPITAL? MAN ACQUITTED FOR INSANITY NOW IN PRISON AFTER VIOLENT ASSAULTS. HARTFORD COURANT. 9/23/14. CONNECTICUT.
- ASSAULTS ON STAFF AT WESTERN STATE HOSPITAL COSTING MILLIONS. SEATTLE TIMES. 11/27/15
- PATIENT VIOLENCE, LACK OF SECURITY CHECKS PRODUCED A 'PERFECT STORM'. KANSAS HEALTH INSTITUTE. 7/27/16
- MAN PLEADS GUILTY TO ASSAULTING NURSE AT MONTANA STATE HOSPITAL MONTANA STANDARD. 8/11/16
- MAN CHARGED WITH KILLING SNORING ROOMMATE AT UTAH STATE HOSPITAL. DAILY HERALD. 9/18/16.

FORENSIC PATIENT PROFILE

PATIENT DEMOGRAPHICS



THE SOCIAL WORKER'S ROLE

- ASSESSMENT
- INTERVENTION
- TREATMENT
- DISCHARGE PLANNING**