

**Criminal Justice/Forensics Committee**  
**Meeting Summary**  
**February 20, 2024**

**Attendees:** Amelia Tibbett, Annie C. Olle, Bevin Merles, Dan Morhaim, Darren McGregor, Denise Dickerson, The Hon. George Lipman, Gray Barton, Greta Carter, Holly C. Young, Holly C. Young, Jordan Fisher, Kim Wireman, Lynda Bonieskie, The Hon. Marina Sabett, Michael Gray, Mona Figueroa, Morgan Mills, Natasha Herbert, Phyllis McCann, Taliesha Abeokuto

**PRESENTATION: POTOMAC CENTER/SECURE EVALUATION & THERAPEUTIC TREATMENT (SETT), MARYLAND DEPARTMENT OF HEALTH (MDH)**

Dr. Holly Young, Chief Executive Officer, Potomac Center/SETT, Maryland Department of Health

\*A copy of the entire presentation is available upon request\*

**Key Points:**

**Potomac Center/SETT**

- **Mission-** to provide quality, person-centered, and therapeutic interventions to individuals with intellectual disabilities in order for them to develop the skills for successful community living.
- **Vision-** That individuals with intellectual disabilities lead meaningful and active lives in the community.

**Potomac Center**

- Intermediate Care Facility; State Residential Center
- Current Census: 41; Budgeted Beds: 45; Avg. Length of Stay: ~2-3 years

**SETT**

- Forensic Residential Center
- Current Census: 27; Budgeted Beds: 29; Avg. Length of Stay: ~9-10 months

**Services Provided**

- Residential
- Vocational
- Psychology
- Social Work
- Occupational Therapy
- Primary Care and Specialists

**Types of Programming**

- Health Education
- Social Skills
- Leisure Exploration
- Coping Skills
- Life Skills (ADL and IADL)
- Community Reintegration

### **Discussion Points from the presentation:**

- Judge Lipman discussed treatment for individuals with dual diagnoses.
- Dr. Young confirmed MDH's acceptance of such cases.
- Judge Lipman noted delayed admissions, particularly for individuals with developmental disabilities transitioning to the Potomac Center.
- Dr. Young affirmed this and highlighted the Potomac Center and SETT program's focus on intellectual disabilities.
- Judge Lipman raised concerns about individuals with incompetency stemming from non-psychiatric limitations.
- Dr. Young clarified MDH's admissions criteria, emphasizing psychiatric stability and legal categorization of incompetence.
- Judge Lipman raised concerns about individuals initially placed in the SET program but later deemed not restorable.
- Dr. Young explained the transition of such individuals to civil commitment at Potomac Center for further treatment.
- Various types of admissions and discharges at Potomac Center were discussed, focusing on community reintegration goals.
- Questions about security and privileges at Potomac Center versus the SET program were addressed by Dr. Young.
- George Lipman inquired about handling more serious cases and community support for discharged individuals.
- Dr. Dan Morhaim highlighted challenges in emergency rooms during commitment evaluations, emphasizing the importance of early referral for comprehensive assessment and treatment planning.

### **HB 1346:**

- Judge Lipman expressed concerns about HB 1346, extending placement time from 10 to 30 days and allowing competency restoration in correctional facilities.
  - He discussed historical context and efforts to place individuals in suitable treatment facilities.
  - He questioned the implications of reversing the previous policy.
- Annie C. Olle from MDH mentioned ongoing internal review of the bill and refrained from commenting on their position.
- Judge Lipman mentioned that he provided old materials from 2017 for reference and encouraged further group discussion.

### **FORENSICS CAPACITY IN MARYLAND**

#### **Competency Commitment Numbers:**

Ami Tibbett, Deputy Director, Office of Court Ordered Evaluations and Placements  
Maryland Department of Health (MDH) gave an update (as of 2-20-24) on The competency commitment numbers.

\*A copy of the entire presentation is available upon request\*

Key Points:

### **Evaluation and Competency Orders**

- Calendar year evaluation orders
  - 2024: 343 orders; 2023: 3,139 orders
- **MDH Commitment Orders**
  - 2024: 78 orders; 2023: 1,126 orders

### **MDH Court-Ordered Hospital Waitlist Status**

- There are **175 individuals** waiting for placement at a MDH adult psychiatric facility, including an additional 5 hospital warrants
- Current cycle time is approximately 47 business days

### **MDH Healthcare System - Psychiatric Bed Capacity**

- Adult Psychiatric Capacity: 1,056
- IST waiting for placement at MDH psychiatric facility: 174; 16.5% of system capacity
- Adult Psychiatric Census: 1,039; 98.4% of system capacity
- Clinically ready to discharge awaiting placement: 152; 14.4% of system capacity

### **8-505 and 8-507-Individuals Served**

- 8-505 Orders Received 2024: 53
- 8-505 Evals Submitted 2024: 40
- 8-507 Placements 2024: 30

## **COMMUNITY PROVIDER CAPACITY IN MARYLAND**

- Mona Figueroa from BHA discussed initiatives for expanding housing options (permanent supported housing) and assertive community treatment (ACT) teams to offer more choices for individuals transitioning out of hospitals.
  - Plans for a dashboard to automate monitoring of community hospital openings and placements were mentioned, aiming to streamline the transition process.

## **Member Discussion**

- Judge Lipman posed the question as to what do we need to do to get them even better, in terms of the people that are clinically ready for discharge and into the community placements?
  - **Phyllis McCann**- stressed the significance of educating and ongoing communication between hospital and community staff to enhance placements in real time.
  - **Judge Lipman**- had concerns about the financial aspects of providing mental health services post-COVID and the importance of ensuring access to appropriate treatment.
  - **Judge Sabett**- pointed out the challenges to accept forensically involved individuals into Residential Rehabilitation Programs (RRPs). She acknowledges

the efforts of the MDH in identifying placements but notes the difficulty in finding appropriate programs for severely ill individuals who may not fit well into existing programs. Despite the challenges, Judge Sabett stated that collaboration among stakeholders and education are crucial for improving placements.

- **Kim Wireman-** highlighted the success of residential treatment programs and the 8-507 program and its role in facilitating successful outcomes for individuals transitioning from substance use disorder treatment facilities back into the community. She mentioned the importance of collaboration with 8-507 providers to ensure appropriate care levels for clients, with an acknowledgment of the declining referrals to the program in recent years. Innovative approaches to withdrawal management, included the use of cannabinoids for fentanyl withdrawal, and immediate psychiatric evaluation for clients in need. Also, Kim Wireman discussed plans to conduct in-depth surveys with clients to evaluate outcomes and identify areas for improvement. The surveys will focus on withdrawal management, client preferences for comfort medication, and program effectiveness at different stages of treatment. These efforts aim to enhance the quality of care and better understand the needs of individuals receiving services in RRP.
- **Dr. Bevin Merles-** discussed challenges in placement from correctional facilities and underscored the need for solutions at the front end. Despite efforts to place individuals in 8-507 and Residential Rehabilitation Program (RRP) placements, there are ongoing struggles, particularly in securing placements for individuals transitioning out of correctional facilities. The focus should be on addressing challenges at the front end of the process to improve outcomes for individuals reentering society.

### **Wrap Up:**

It was mentioned that the committee should discuss emergency evaluations at a future meeting.

**The next Criminal Justice/Forensic Committee meeting is March 19, 2024, at 11:00am (virtual).**