



Illinois Mental Health Task Force Action Plan

Major Activities and Progress Report – May 23

1. Courts as Conveners and Leaders

With an estimated [70% of court-involved individuals](#) experiencing a behavioral health disorder, courts have increasingly become the default system for addressing behavioral health needs. The rate of serious mental illness is [four to six times higher](#) in jail than in the general population, and the rate of substance use disorders is seven times higher among those in jail than in the general population. As leaders of their courts and communities, judges are in a unique position to encourage local practices aimed at improving responses to individuals with mental health and co-occurring substance use disorders.

RECOMMENDATION 1.1

The Task Force recommends reviewing and working to implement the recommendations, as appropriate, of the National Judicial Task Force to Examine State Courts' Response to Mental Illness as approved by the Conference of Chief Justices and Conference of State Court Administrators through the [Resolution](#) and [Findings and Recommendations](#). The Resolution urges each member of the Conferences to lead, examine, educate, and advocate for system improvements in his or her state or territory.

As the CCJ-COSCA Illinois members, the Illinois Supreme Court and Administrative Office of the Illinois Courts are effectuating the National recommendations through various macro and micro level actions evidenced throughout this ongoing report of major activities and complementary initiatives.

RECOMMENDATION 1.2

The Task Force recommends the Illinois Supreme Court support the Statewide Behavioral Health Administrator as a resource to develop and implement the statewide action plan to improve responses to individuals with behavioral health disorders.

The Illinois Supreme Court approved the Illinois Mental Health Task Force Action Plan during its November 2022 Administrative Term. The Statewide Behavioral Health Administrator serves as the chief facilitator of the plan.

RECOMMENDATION 1.3

The Task Force recommends that with the support of the Statewide Behavioral Health Administrator, judicially chaired Regional Councils continue to meet on a quarterly basis to encourage cross system communication, resource sharing, and further development and implementation of sequential intercept strategies.

Throughout 2022, the Illinois Mental Health Task Force facilitated regular convenings of five, judicially led, multidisciplinary Regional Councils to conduct Sequential Intercept Mapping Workshops within each Illinois Department of Human Services state hospital catchment area. The Councils have chosen to remain intact but meet bi-annually moving forward.

RECOMMENDATION 1.4

The Task Force recommends the Supreme Court distribute a copy of this Action Plan, along with the [Leading Change Guide for Trial Court Leaders](#) to all Circuit Court Judges and Trial Court Administrators and encourage/empower all circuit courts to develop judicially-led [interdisciplinary teams](#) to advise and support local sequential intercept activities and strategies.

In January of 2023, the Illinois Supreme Court approved the distribution of a memo to the Illinois Chief Circuit Judges and Trial Court Administrators encouraging all 25 Circuits to engage with the Statewide Behavioral Health Administrator through the designation of a Judicial Champion of circuit-wide mental health initiatives. The memo was sent electronically and via US Mail along with copies of the Action Plan and Leading Change Guide for Trial Court Leaders.

Through April 2023, 9 Circuits have identified Judicial Champions and met with the SBHA.

RECOMMENDATION 1.5

The Task Force recommends the Supreme Court and Circuit Courts consider opportunities to improve court awareness and response to trauma, [secondary trauma](#), and [trauma-informed practices](#) for Court staff, court users, and jurors.

The State Behavioral Health Administrator met with the Judicial College Committee on Circuit Court Clerk Education (CCCE), Committee on Judicial Branch Staff Education (JBSE), and Committee on Trial Court Administrator Education (TCAE) and presented options to develop “trauma” related training.

- Focused “secondary trauma” training for Circuit Clerks and reporters is under development through the CCCE. Update: Secondary Trauma: Impacts and Considerations for Circuit Clerk Staff presentation scheduled for May 11, 2023, at the Illinois Association of Court Clerks Annual Conference.
- The Probation Services Division has completed virtual trauma trainings for Problem-Solving Court practitioners.

RECOMMENDATION 1.6

The Task Force recommends Circuit Courts utilize case filing data to identify [“revolving door”](#) offenders as this population often displays multiple psychosocial risk factors, such as mental illness, alcohol or substance use disorders, and homelessness. Once identified, courts may wish to convene a multidisciplinary Task Force to develop a more coordinated and comprehensive response to ensure treatment and break the cycle.

Opportunity: Leverage Socrata Probation Services Data set.

RECOMMENDATION 1.7

The Task Force recommends Circuit Courts collaborate with system partners to share and track [data](#) to inform system level decision making and reinforce diversion and treatment programs as viable budgetary solutions. It is recommended that the AOIC establishes a desired data set for annual reporting to measure outcomes.

The AOIC sought and received federal funding through the Bureau of Justice Assistance (BJA) to identify and update a statewide Problem-Solving Court (PSC) data collection mechanism.

Through the AOIC Socrata Data Project, the Probation Services Division has completed development of uniform data set including demographic data variables such as age, race/ethnicity, gender, sexual orientation, and socio-economic status.

The AOIC Statewide Behavioral Health Administrator serves on the Statewide Unintentional Drug Overdose Reporting System (SUDORS) and Illinois Violent Death Reporting System (IVDRS) Advisory Committee and receives regular data updates that are informing probation and pretrial practices.

The Illinois Supreme Court Manual on Record Keeping requires Circuit Clerk's to collect and report on identified mental health proceedings involving hospitalization, discharge, or restoration status.

The Illinois Department of Human Services (IDHS) – Division of Mental Health Forensic Services Director hosts monthly meetings and shares data on the Census and Waitlist re: State Operated Facilities treating individuals admitted via Involuntary Admission, Unfit to Stand Trial, and NGRI.

ADR (*Automated Disposition Reporting*) code 501:

- Unfit To Stand Trial - A defendant is found to be unfit to stand trial, plea, or be sentenced pursuant to Article 104 of the Code of Criminal Procedure of 1963, 725 ILCS 5/104et.al.
- There are 6 small counties that report on paper along with Kankakee County. Cook did not start reporting criminal ADR through AOIC until 2020 and DuPage reports direct.

Per Illinois Criminal Justice Information Authority: All three branches of Illinois government recognize the need for timely justice system data and information. Consistent with this, 2021 justice system reform legislation in Illinois (Illinois HB3653) introduced multiple statutes designed to establish or strengthen statewide data collection efforts. However, it remains that in Illinois public data is predominantly available as annual totals in agency administrative reports or in agency fact sheets, with little consistency across data projects. The Bureau of Justice Assistance Justice Counts initiative is an opportunity for Illinois to create a new vision for public data collection and dissemination.

AOIC's JMIS division pulled 3 year historical data re: county-by-county methamphetamine arrests and controlled substances with possession of hypodermic needle arrests – Info has been shared with IDHS-SUPR leadership to assist with strategy development and targeted interventions.

RECOMMENDATION 1.8

The Task Force recommends courts should [examine the disproportionate impact of behavioral health conditions and associated demographics such as race, ethnicity, socio-economic status \(SES\), differential disability, and/or LGBTQIA+](#) on the overrepresentation of individuals who enter the justice system and ensure that interventions, diversions, specialized dockets, and other programming are equitably applied.

The AOIC Chief Diversity and Inclusion Officer is attending Judicial Champion meetings to present information and educational opportunities designed to enhance intercultural competencies and create awareness to offset the potentially adverse influence of race and other diverse identities and circumstances, including behavioral health disorders, in interactions and decision-making

The Illinois Supreme Court approved facilitation of a comprehensive survey to be administered to Chief Judges and all court employees, to reflect inwardly on current practices and opportunities to support diverse, productive, welcoming, and inclusive court environments.

RECOMMENDATION 1.9

The Task Force recommends that the Supreme Court and Circuit Courts advocate for a comprehensive [behavioral health care continuum](#) that includes both outpatient and inpatient services as well as recovery oriented community housing

The AOIC Statewide Behavioral Health Administrator was appointed to represent Illinois Courts on the Illinois Department of Human Services Mental Health Planning and Advisory Council, Substance Use Advisory Council, and the Illinois Governor’s Office, Chief Behavioral Health Officer “Kitchen”

2. Training Opportunities Across Intercepts

A key component to enhancing the court and community response to justice-involved individuals with mental health and co-occurring substance use disorders is providing access to continued training for professionals charged with providing community supervision, care, and support. This was not lost on the Task Force and resulted in a specific Recommendation along with opportunities for increased training.

RECOMMENDATION 2.1

The Task Force recommends the AOIC continuously engage with criminal justice professionals and partners to develop training programs that enhance court and community responses to justice-involved individuals with behavioral health disorders.

The AOIC Statewide Behavioral Health Administrator is actively advocating for the Illinois Credentialing Board to include “court and justice system training” within the Illinois Certified Recovery Support Specialist Certification curriculum.

Illinois Mental Health Task Force members drafted “Illinois Across the Sequential Intercepts” as a training presentation that can be offered to multidisciplinary audiences.

RECOMMENDATION 2.2

The Task Force recommends that training in [implicit bias, microaggression, and other DEIA-appropriate courses](#) be developed to increase judicial and justice professionals' cultural respectfulness and proficiency.

In 2022, the Illinois Supreme Court charged the Judicial College with implementing its order that all judges complete at least three hours of DEI education each two-year reporting period.

The Illinois Supreme Court Committee on Equality is actively identifying and recommending the development of courses designed to address and impact implicit bias, including microaggressions and person-centered language.

RECOMMENDATION 2.3

The Task Force recommends that training on behavioral health signs and symptoms, court interventions, and trauma-informed courtrooms be developed by the AOIC Judicial Education Division and made available to Court Professionals (i.e., judges, attorneys, probation officers, clerks, bailiffs, etc.)

- AOIC: [How Being Trauma-Informed Improves Criminal Justice System Responses](#) (New Train-the-Trainer opportunity coming to Illinois in 2022/2023) ([Existing Facilitators](#))
- [AOIC: Problem-Solving Court Series](#) (Coming to Illinois in 2022/2023)
- Illinois Mental Health Task Force: Civil Mental Health Proceedings Training Series under Development: Orders of Detention and Examination, Involuntary Inpatient and Outpatient Treatment, Power of Healthcare Attorney and Mental Health Declarations
- [Judges and Psychiatrists Leaderships Initiative](#): Train the Trainer Program
- Future topics: Harm Reduction, Mental Health First Aid for Public Safety, others as identified
- [NCSC Behavioral Health and the State Courts Education](#)

A 6-part Civil Mental Health Proceedings Training Series approved by Judicial College is scheduled to begin in April 2023: 1) Intro to the MHDD Code 2) Petition and Certification 3) Orders of Detention and Examination 4) Involuntary Commitment 5) Involuntary Inpatient and Outpatient Treatment 6) Power of Healthcare Attorney and Mental Health Declarations

The AOIC was awarded a SAMHSA "How Being Trauma-Informed Improves Criminal Justice System Responses" Train-the-Trainer Grant resulting in the development of 20 new facilitators. Regular trainings are scheduled to begin in March of 2023.

Task Force members have engaged the Council of State Governments Justice Center to explore a Judges and Psychiatrists Leadership Initiative behavioral health education program during the 2024 Judicial Education Conferences. One judge and one psychiatrist from Illinois have been trained through this initiative in conjunction with the National Task Force.

3. Awareness Across Intercepts

Public awareness of the prevalence and impact of behavioral health disorders on the justice system is key to enhancing partnerships and responses.

RECOMMENDATION 3.1

The Task Force recommends the Supreme Court and Circuit Courts conduct outreach and education of local, regional, and statewide stakeholders regarding behavioral health and justice intercepts as an ongoing priority.

The Statewide Behavioral Health Administrator serves on the Illinois Department of Human Services 988/Community Emergency Services and Support Act Advisory Committee, and the Forensic Advisory Committee, as well as the Illinois State Bar Association Mental Health Law Section Council.

Task Force engaged the Access to Justice: Community Trust Committee which has a charge to foster community trust and engagement by cultivating communication and coordination between the courts, non-traditional court stakeholders, justice partners, and the public.

RECOMMENDATION 3.2

The Task Force recommends courts should actively [collect and review race and ethnicity data to identify inequitable practices and to monitor progress in achieving equity](#). This analysis should extend to diversion to treatment, related placements, mental health evaluation referrals, and diagnostic outcomes.

The AOIC Chief Diversity and Inclusion Officer is working with Southern Illinois University, Applied Research Consultants, to complete a multi-scope data research project to review court processes, procedures, climates, decision-making, outcomes, and demographics, through a DEI lens.

RECOMMENDATION 3.3

The Task Force recommends AOIC Staff and Circuit Court professionals participate on relevant multidisciplinary [committees, councils, task forces](#), etc. to provide a court-focused voice across systems, as the court system is the largest source of referrals to the behavioral health system.

Statewide Behavioral Health Officer Intergovernmental Committee Appointments

- Illinois Department of Human Services:
 - Mental Health Planning and Advisory Council
 - Substance Use/Overdose Action Plan Advisory Committee
 - 988/Community Emergency Services and Support Act Advisory Committee
 - Forensic Advisory Committee
- Illinois Governor's Office Chief Behavioral Health Officer "Kitchen" Cabinet.
- Illinois SUDORS/VDRS Advisory Committee

Statewide Behavioral Health Administrator Supreme Court Commission and Committee Work

- Special Advisory Committee for Justice and Mental Health Planning
- Elder Law Commission
- Disability Access Committee
- Juvenile Courts Committee
- Community Trust Committee

RECOMMENDATION 3.4

The Task Force recommends utilizing the [Task Force webpage](#) as a transparent and central outlet of relevant resources so court and criminal justice professionals can easily obtain supporting information.

The Task Force website was redesigned and updated to emphasize the Action Plan (January 2023)

Opportunity: Consider adding Trauma Resources and relevant Fact Sheets

4. Intercepts Zero and One – Community Services and Law Enforcement

Court professionals' knowledge of current behavioral health resources, trends, systemic issues, and ongoing advocacy of best practices is vital to providing justice-involved individuals with an optimal opportunity to live stable and healthy lifestyles within the community.

RECOMMENDATION 4.1

The Task Force recommends that information about helplines such as [988](#), [Call4Calm](#), and the [Opioid and Other Substance Helpline](#) be made available to the public at all court facilities..

Task Force Members serve on the IDHS: 988/Community Emergency Services and Support Act (CESSA) Expert Consultant Advisory Committee.

IDHS is provided 988 and Helpline palm cards and posters for the courts and materials will be made available at IPCSA and ILPSC Conferences.

Opioid and Other Substance Helpline and MAR Now information provided to Probation Chief Managing Officers.

RECOMMENDATION 4.2

The Task Force recommends the Supreme Court and Circuit Courts advocate for ongoing development of [Certified Community Behavioral Health Clinics](#) and increased access to [Forensic Assertive Community Treatment](#).

Task Force introductory communications requesting court/justice system involvement in planning and implementation activities sent to ten emerging CCBHCs.

- Hosted and facilitated a meeting to connect Cook County Circuit Court, Cook County Sheriff's Office, and Human Resources
- Hosted and facilitated a meeting to connect the 16th Circuit Court to Ecker Center

The Behavioral Health, the Bench and Beyond (October 22) Newsletter highlighted CCBHCs and identified 13 Circuits with CCBHCs in operation or development stages.

RECOMMENDATION 4.3

The Task Force recommends the Supreme Court and Circuit Courts advocate for ongoing development of supported treatment housing.

The Task Force organized a 2023 Illinois Association of Problem-Solving Court (ILAPSC) Conference Panel Session on housing options including the IDHS SUPR Director of Housing Services, the Supportive Housing Providers Association, and Thresholds Residential Director.

RECOMMENDATION 4.4

The Task Force recommends continued expansion and inclusion of [Peer Support](#) Specialists and/or individuals with lived experience in early intercept strategies.

Through the Justice and Mental Health Collaboration Program grant, the Second Circuit/Take Action Today, Inc. implementation of the AOIC Justice and Mental Health Collaboration Program Pilot Project

Justice System/Peer Support is a primary topic of discussion within the Governor’s Office Chief Behavioral Health Officer “Kitchen” Cabinet.

The Supreme Court Special Advisory Committee for Justice and Mental Health Planning is actively researching the role of “peers” in problem-solving courts as this may impact the certification standards.

RECOMMENDATION 4.5

The Task Force recommends Court and Criminal Justice support of strategies identified within the [State Overdose Action Plan](#).

The Supreme Court/AOIC Anti-Opioid Program and Administration Standards (updated 2022) and were distributed to all Probation CMOs.

SUDORS data was obtained to identify “high risk” counties and promote Probation Office participation in the IDHS Access Narcan Program.

The AOIC Problem-Solving Court Manager joined a multidisciplinary committee working to develop standardized practices to conduct Overdose Fatality Review teams (Lead by IDPH)

See Recommendation 6.6 for IDHS-SUPR: Jail-Based Medication Assisted Recovery Learning Collaborative.

5. Intercept Two: Initial Detention and Court Hearings

Intercept 2 involves people with mental health and co-occurring substance use disorders who have been arrested and are going through intake, booking, and an initial hearing with a judge. At Intercept 2 there are many opportunities for early identification and diversion from further penetration into the criminal justice system.

RECOMMENDATION 5.1

The Task Force recommends the Supreme Court and Circuit Courts promote [Collaborative Case Flow Management](#) as a critical strategy of a collaborative court and community effort to promote person-centered justice for individuals with behavioral health needs.

The AOIC requested the National Task Force to host a Courageous Conversation on Collaborative Case Flow Management. Request under consideration.

RECOMMENDATION 5.2

The Task Force recommends county jail implementation of [Jail Data Link](#) to identify individuals with mental health disorders who have previously been involved in Illinois Department of Human Services, Division of Mental Health services.

The Madison County/Third Circuit is implementing a pilot through the AOIC Justice and Mental Health Collaboration Pilot Project including Jail Data Link.

RECOMMENDATION 5.3

The Task Force recommends developing and strengthening partnerships between Circuit Courts, the [Office of Statewide Pretrial Services](#), and Health and Human Services to enhance pretrial supervision practices and outcomes through [alternative pathways to diversion and treatment](#).

The Office of Statewide Pretrial Services (OSPS) Chief of Social Services added to the Task Force.

Generated and distributed to OSPS leadership, a Circuit by Circuit list of all IDHS licensed treatment providers with a suggestion and offer to help facilitate a virtual meet and greet event. Under OSPS consideration.

RECOMMENDATION 5.4

The Task Force recommends consideration of embedding [Recovery Support](#) Navigators/ Community Behavioral Health Liaisons into circuit courts to meet with individuals who display indications of behavioral health needs.

The AOIC Justice and Mental Health Collaboration Program Pilots in the Fourth Circuit and Seventeenth Circuit are providing recovery support navigators.

6. Intercept Three: Jails/Courts

Intercept 3 involves people with behavioral health disorders who are held in jail before and during their trials and includes court-based diversion programs that allow the criminal charge to be resolved while taking care of the defendant's behavioral health needs in the community and/or providing services that prevent the worsening of a person's mental or substance use symptoms during their incarceration.

RECOMMENDATION 6.1

The Task Force recommends State Court partnership with the Illinois Department of Human Services, Division of Mental Health, Forensic Services Director to further develop alternative [competency to stand trial](#) strategies to eliminate practices of warehousing individuals in jails while awaiting competency restoration.

The Supreme Court Advisory Committee for Justice and Mental Health Planning – reconvened the Competency Subcommittee. The AOIC was awarded State Justice Institute Grant titled “Technical Assistance for Leading Change in Competency to Stand Trial Systems”

Public Act 102-0913: Mental Health Inpatient Facilities Act requires IDHS to “reimagine” the state forensic system. IDHS contracted with University of Illinois Center for Healthcare Design and the AOIC Statewide Behavioral Health Administrator and Michelle O’Brien (NCSC) are participating on the Work Group.

AOIC Statewide Behavioral Health Administrator developed and distributed a Memo and FAQ regarding Public Act 102-1118. (725 ILCS 5/104-17) (from Ch. 38, par. 104-17) Sec. 104-17. Commitment for treatment; treatment plan.

RECOMMENDATION 6.2

The Task Force recommends increasing utilization of [assisted outpatient treatment](#) (AOT) as a form of civil commitment that authorizes the judicial system to commit eligible individuals with severe psychiatric disorders to mental health intervention in the community.

The AOIC Justice and Mental Health Collaboration Program is piloting a Cook County Civil Division program which provides assisted outpatient treatment support.

Task Force members are Co-Chairing a multidisciplinary Cook County Coalition seeking to increase the use of Agreed Ordered Treatment and Involuntary Outpatient Commitment.

RECOMMENDATION 6.3

The Task Force recommends courts, providers, and advocates encourage the use of [psychiatric advance directives](#) (PAD) and incorporate the provisions of an individual’s PAD into relevant court orders.

The Judicial College approved Civil Mental Health Proceedings Training Series – Part 6: Power of Healthcare Attorneys and Mental Health Declarations is scheduled for September 2023.

Opportunity: Guardianship and Advocacy Commission, NAMI Illinois and Thresholds discussing Advance Directive Workshops.

RECOMMENDATION 6.4

The Task Force recommends continued implementation and assurance of problem-solving court best practices through the [Supreme Court of Illinois Problem-Solving Court Standards and Certification](#) process.

The Justice and Mental Health Committee of the Supreme Court and the AOIC provide training, guidance, and oversight for the problem-solving courts. The AOIC has a BJA grant to enhance training, ensure best practices, and improve data. NCSC is providing consultation as part of this grant.

RECOMMENDATION 6.5

The Task Force recommends Circuit Courts recognize [telebehavioral health](#) interventions and best practices as an approach to expanding access and capacity for treatment of behavioral health disorders.

Part of the training for problem-solving courts is to provide accessible and timely services to participants and training encourages telebehavioral health interventions and treatment.

RECOMMENDATION 6.6

The Task Force recommends local engagement in the Illinois Department of Human Services, Division of Substance Use Prevention and Recovery, Health Management Associates (HMA) [Learning Collaborative](#) for county teams interested in standing up or expanding medication-assisted recovery (MAR) programs in their jails and to support continued recovery support in the community post-release.

Task Force Members promoted awareness of the Collaborative: participating counties include Boone, Bureau, DuPage, Ford, Grundy, Iroquois, Kane, Kankakee, Kendall, Lake, LaSalle, Lee, Richland, Sangamon, and Will. McHenry County and St. Clair County under consideration.

7. Intercept Four: Reentry

At Intercept 4, people plan for and transition from jail or prison back into the community which demands strong partnerships in place to provide seamless access to medication, treatment, housing, health care coverage, and services from planning for release, the moment of release, and throughout their reentry.

RECOMMENDATION 7.1

The Task Force recommends enhancement of cross-sector partnerships and communication to strengthen support and resources for people who are being released from incarceration and often need care for behavioral health, housing, transportation, and other supportive services to reduce the impact of social and environmental factors that affect an individual or entire community's health status. ([Social Determinants of Health \(SDOH\)](#)).

IDHS SUPR Division is focused on "Reentry Strategies."

RECOMMENDATION 7.2

The Task Force recommends inclusion of [Peer Support services](#) to help people plan for reentry from local jails and state prisons through identification of safe housing, resource linkage, and learn about triggers that could lead back to the justice system.

IDHS SUPR Division is focused on "Reentry Strategies."

RECOMMENDATION 7.3

The Task Force recommends increased [jail in-reach](#) programs to identify, engage, and support individuals at the highest risk of returning to homelessness, overdose, and perhaps reincarceration post discharge.

The AOIC Justice and Mental Health Collaboration Program Pilot in Madison County/Third Circuit is providing jail in-reach.

8. Intercept 5: Community Corrections

People under correctional supervision are on probation or parole and require support from criminal justice agencies and community-based behavioral health, mental health, or social service programs. Throughout the Regional Council and Resource Mapping Workshops, access to safe and affordable housing was referenced as the resource most needed to support public health and safety goals.

RECOMMENDATION 8.1

The Task Force recommends [community supervision](#) providers utilize screening and assessment tools to determine how to respond to violations most effectively to influence positive behavioral change.

Opportunity: See AOIC Probation Services Division: Core Correctional Practices Training

RECOMMENDATION 8.2

The Task Force recommends the use of smaller and [specialized behavioral health disorder caseloads](#) to provide support that keeps their clients on the path to recovery, increases connections to services and appointments, and reduces the chance of violations and jail stays.

Opportunity: Several counties have informal probation specialized behavioral health disorder caseloads which could be expanded across the state. Conduct an inventory of current programs.

RECOMMENDATION 8.3

The Task Force recommends Circuit Courts explore opportunities to increase [community housing options](#) for individuals under corrections supervision.