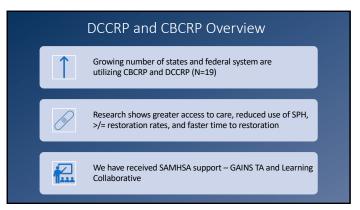
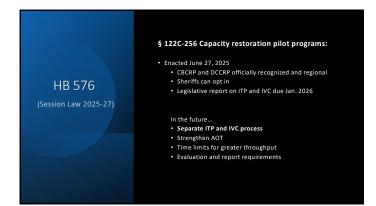






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Goals 1. Quicker access to care. 2. Resolve cases more quickly. 3. Reduce SPH admissions and wait times. 4. Reduce cost. 5. Reduce the number of ITP defendants in jails.

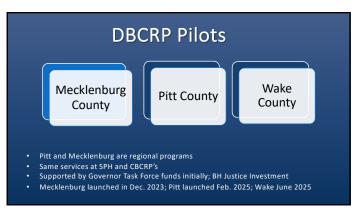
Restoration Treatment – SPH's

- Unit based and/or "treatment mall"
- Individualized Treatment Plans
- Typical interventions:
 - Psychoeducation group using revised Florida CompKit; individual if indicated
 - Psychiatric medication, as needed
 - Psychotherapy and substance use treatment, as indicated
 - · Milieu recreational and social activities
- National inpatient restoration rate = \sim 80% within 90-120 days

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Pilot Outcomes

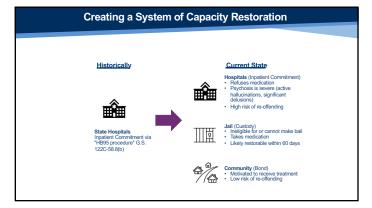
Mecklenburg DCCRP

- 60+ individuals served to date
- 80% of participants restored
- Avg time to restoration = 55 days (180+ at SPH)
- 60% reduction in Meck SPH waitlist
- Expanded to 25 beds and regional

• CBCRP's

- 16 individuals served to date
- Reduced jail time
- Engagement with services postadjudication
- Consumer and stakeholder surveys

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Referral Process DCCRP: Those on waiting list for SPH are screened for eligibility Courts can order assessment for eligibility (e.g., do not meet IVC) Attorneys and court are notified. Def remains on waitlist and can still go to SPH if needed. CBCRP: LCFE/CRH makes recommendation If Def is eligible for bond, Court can order Def into the program Jo-day updates are provided If/when restored, independent evaluation

Contact Information Dr. Robert Cochrane, Statewide Director of Forensic Services, DHHS robert.cochrane@dhhs.nc.gov DCCRP Provider: • NC RISE: Dr. Anna Abate, aabate@recoverysolutions.us. CBCRP Providers: • Cumberland County (CommuniCare): Sarah Hallock, shallock@cccommunicare.org • Wake County (Elwin Adult Behavioral Health Services): Brooke McLaughlin, brooke mcLaughlin@elwyn.org • Mecklenburg County (Atrium Behavioral Health): Yolonda Tindal,