Mental Health Courts and Diversion Programs: Guidelines
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Acknowledgments:

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About CADTH: CADTH is an independent, not-for-profit organization responsible for providing Canada’s health care decision-makers with objective evidence to help make informed decisions about the optimal use of drugs, medical devices, diagnostics, and procedures in our health care system.

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Research Question

What are the evidence-based guidelines regarding the use of mental health courts or diversion programs for adults with mental health concerns who have become implicated in the criminal justice system?

Key Findings

One evidence-based guideline was identified regarding the use of mental health courts or diversion programs for adults with mental health concerns who have become implicated in the criminal justice system.

Methods

A limited literature search was conducted on key resources including PubMed, PsycINFO via Ovid, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2012 and July 11, 2017. Internet links were provided, where available.

Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

| Population | Adults (≥ 18 years old) with mental illness (e.g., psychotic, personality, mood, or anxiety disorders, including schizophrenia and bipolar disorder) or fetal alcohol spectrum disorder, who are involved in the criminal justice system; Adults with substance use disorders, Indigenous persons, or other vulnerable populations |
| Interventions | Mental health courts used either concurrently or non-concurrently with diversion programs and associated treatment programs (e.g., mental health and social supports, behaviour and substance use treatment programs), not including drug courts or programs specializing in gang-related crime |
| Comparator | No comparator |
| Outcomes | Evidence-based guidelines and recommendations |
| Study Designs | Health technology assessments, systematic reviews, meta-analyses, evidence-based guidelines |
Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Normally, health technology assessment reports, systematic reviews, and meta-analyses are presented first; however, the aforementioned evidence types are presented in the appendix in reports where guidelines are primarily sought.

One evidence-based guideline was identified regarding the use of mental health courts or diversion programs for adults with mental health concerns who have become implicated in the criminal justice system.

Additional references of potential interest are provided in the appendix.

Overall Summary of Findings

One evidence-based guideline\(^1\) published by The National Institute for Health and Care Excellence (NICE) in 2017 was identified regarding adults with mental health disorders who are in contact with the justice system. The guideline sought to answer what are the most effective care plans for the assessment and management of this population.\(^1\)

NICE recommends that the nature and severity of the individual’s mental health problem be taken into account, as well as the nature of any co-existing substance use disorders. All information about the individual must be collected and evaluated during assessment and treatment of this population, including information from family member or caregivers.\(^1\)

When an individual is brought into custody, NICE recommends that they have a health assessment as well as a risk assessment performed on them to screen for potential mental health disorders, so that the appropriate action can be taken.\(^1\)

They recommend providers of criminal justice services should support diversion and liaison programs to aid in increasing the accessibility of mental health services. NICE also recommends that providers should have joint working arrangements with other members of both the criminal justice system and the healthcare system.\(^1\) This includes joint training and agreed joint protocols for the management of this population.\(^1\)

NICE also recommends that all people with a severe or complex mental health issues have a designated care coordinator and that all mental health assessments and work be carried out in a safe, non-judgmental way, and in a suitable, private environment.\(^1\)

References Summarized

Guidelines and Recommendations

See: Sections 7.2 and 7.3
Appendix — Further Information

Systematic Reviews and Meta-analyses


Adults with Substance Use Disorders


Alternate Population – Youth and Juveniles


Clinical Practice Guidelines – Unknown Methodology


Non-Randomized Studies

Recidivism


Risk of Violence


Review Articles


Substance Use Disorders


Additional References