**Examples of Assessment Tools**

All assessment tolls should be evaluated on the basis of whether they have been adapted and standardized for use with the IDD/MH population and the degree of relevancy.

**Initial Screens**

*Hayes Ability Screening Inventory* (HASI): Easily administered by police or CJS officials; used for the purpose of recognizing offenders who may have an IDD/MH that can be referred on for full diagnostic assessment; has adequate reliability and validity.

*Kaufman Brief Intelligence Test* (KBIT): Measures verbal and non-verbal intelligence quickly; adequate reliability, validity, and culture fairness; easy to administer and score.

*Shipley Institute of Living Scale Revised* (SILS-R): Provide quick estimate of cognitive functioning and impairment. Brief and easily administered to individuals or groups; revised and re-standardized in 2009 with new nationally representative norms; compared favorably to the Kaufman on forensic sample and poorer readers.

*Mini Mental Status Exam-2* (MMSE-2): Used to screen for cognitive impairment and to follow individuals’ progress over time; can be administered by anyone who has been trained to test individuals with cognitive impairments; brief and expanded versions.

*911 Dispatcher(s):* Dispatcher ask questions to caller, in order to gain insight if there may be and IDD/MH to report to the responding first responders.

**Court Competencies:**

*Gudjonnson Suggestibility Scale GSS-1, GSS-2*: Indicates voluntariness of Miranda consent as well as false confessions; uses complex narrative paragraph containing at least 40 ideas or facts that are asked to be retrieved at designated minute intervals; author cautions test may not be appropriate for less than 70 IQ and may actually be measuring memory and reading ability more than anything else.

*Competency to Stand Trial-MR CAST-MR:* Standardized instrument to assess the competence of ID defendants to stand trial based on criteria in the case of *Dusky vs. United States;* has separate sections for basic legal concepts, skills to assists defense, and understanding case events; reliability estimates around .90.

*McArthur Competency Assessment Adjudication* (MacCAT-CA): Estimates competency status of defendants, specifically capacity to assist counsel, make legal decisions, and understands and appreciate case facts; has good reliability and validity when used in forensic impatient settings but may not be as valid with defendants having significant cognitive impairments or culturally diverse backgrounds.

**Risk Management**

*Violence Risk Assessment Guide* (VRAG-1): Determines risk of violence and recidivism by analyzing static variable; has adequate reliability/validity coefficients based on seven-, ten-, and fifteen-year periods: main criticism is that it doesn’t take into account *dynamic* variables.

*Historical, Clinical, Risk Management-20* (HCR-20): Using structured interview format, measures *static,* unchangeable demographics together with treatment indicators and expected outcomes; offers companion guide with specific risk management strategies: not intended to be a stand-alone measure but rather, intended to supplement fuller batteries: not validated on IDD/MH population.

*Psychopathic Checklist revised* (PCL-R): Uses a structured interview categorizing offenses as antisocial versus interpersonal (relations) disturbances; adds *qualitative* dimension to analysis but should not be used by trained disability or CJS personnel.

*Offender Profile Risk Assessment* (OPRA): Structured actuarial risk assessment broken down into five sections (basic factors, historical factors, current warning signs, preparation warning signs, and a final risk quotient): considers static and a range of acute and stable dynamic variables: gives probabilistic estimate of offenses but doesn’t identify type and severity: has not proven effective in identifying high-risk LD offenders.

*Risk Assessment Management and Audit Systems* (RAMA): Used for planning for individuals posing risks to self or others; multiagency interdisciplinary approach; standardized on MH, not ID.

*Correctional Offender Management Profiling for Alternative Sanctions* (COMPAS): Statistically based risk and needs assessment for adult and youth correctional populations; can be used to assist CJS personnel in making decisions regarding placement, supervision, and case management.

**Psychiatric**

*Test of Memory Malingering* (TOOM): Fifty-item test intended to discern malingering from true disability; test; norms include population with cognitive deficiencies (reliability .67); however, there is a little evidence of malingering in IDD/MH population.

*The Minnesota Multiphasic Personality Inventory-2* (MMPI-2): One of the most widely used self-report assessment profiles in existence; contains 567 true-false items (abbreviated version consists of the first 370 items); requires sixth-grade reading ability, which may be too advanced for many IDIs: also there are reliability concerns when any self-report measure is used with the IDD /ID population.

*California Psychological Inventory* (CPI): Self-report inventory similar to the MMPI sharing 184 items but less clinical and focusing more on everyday maladjustment than on clinical diagnosis.

*Back Depression Inventory (*BDI, BDI-II): Twenty-one question multiple-choice self-report inventory, one of the most widely used instruments for measuring the severity of depression and intrusive thoughts; geared to individuals with a developmental age of thirteen and older.

*Hare Psychopathy Checklist* (HPC-R): Twenty-item psycho diagnostic test that uses file information and semi-structured interview (both having appeal for use with the IDD/ID population); useful for assessing antisocial personality disorder and criminality (e.g./ reactive anger, impulsive violence, failure to accept responsibility); based on four factor model of psychopathy construct (i.e., interpersonal, affective, lifestyle, and overt antisocial features).

*Clinical Analysis Questionnaire* (CAQ): Self-report inventory measuring twenty-eight normal and abnormal personality traits designed as shortened version of the *Sixteen Personality Factor Questionnaire.* As mentioned, IDIs typically have problems with self-report measures, so reliability is questionable.

**Psychological Adjustment**

*Measures of Psychosocial Development* (MPD): Based on Erikson’s eight developmental stages; offers eight positive and eight negative scales as well as overall psychosocial adjustment; geared to ages thirteen and older.

*Behavior Rating Scale of the Emotional Problems:* Evaluates personal strengths and competencies (e.g., interpersonal, intrapersonal, affective career) as well as behavior from three perspectives (youth, care giver, teacher); based on youths ages five through eighteen with normal intelligence but may be useful with IDD/ID population, at least in the area of treatment planning.

*Criminal Sentiments Scale-Modified* (CSS-M): Forty-one item self-report measure of antisocial attitudes, values, and beliefs related to criminal activity; composed of five subscales (attitudes toward the law, court, police, tolerance for law violations, identifications with criminal others); has established validity and reliability for adults and juveniles but has not validated for IDD/ID/MH populations.

**Social/Interpersonal**

*Social Avoidance and Distress Scale:*  Twenty-eight-item, forced choice, self-related scale used to measure various aspects of social anxiety, including distress, discomfort, fear, anxiety, and avoidance of social situations.

*Relationship Scales Questionnaire:* Shows general orientations to close relationship; has fair to good internal consistency and validity but needs further study for the forensic LD/IDD/ID population; self-rating scale (1-5).

*Personal Sentence Completion Inventory* (PSCI): Flexible paper and pencil inventory using open-ended questions; covers variables known to be directly related to sexual offending; also assesses relationship and intimacy deficits, and gives insight into deviant sexual fantasies and preoccupations.

*Victim Empathy Distortion Scale* (QVSE): Adaptation of four self-report assessments for IDD/ID/LD sexual offenders; provides useful information on distorted attitudes and perceptions; adapted form appears to be valid and reliable assessment for offenders with special needs.

**Anger**

*State-Trait Anger Expression Inventory* (STAXI): Fifty-seven-item inventory measuring intensity of anger as an emotional state (i.e., state anger) and the disposition to experience anger as a personality trait (i.e., trait anger); assesse relatively independent anger-related traits (expression of anger toward other persons or objects, holding in or suppressing angry feelings, controlling anger via prevention of over-expression or cooling off response).

*Novaco Anger Scale and Provocation Inventory* (NAS-PI): Self-report questionnaire assesses cognitive, physiological, and situational antecedents to anger as well as propensity to engage (i.e., anger reactivity, anger suppression, and changeability).

**Behavior and Skill Focused**

*Vineland Adaptive Behavior Scales-II* (VABS-II): Survey Interview and Parent/Caregiver Rating; measures seven adaptive skill area for estimation intellectual functioning and classification; additional test items have been added at the lower and upper age ranges. (Note: Most classification systems for IDD/ID/MH require at least three out of seven deficient adaptive skill areas in addition to IQ measures.)

*Challenging Behavior Inventory:* Assesses presence of five challenging behaviors with measures of severity, frequency, and duration; also provides estimate of supervision needs and label of interventions or accommodations required.

*Reiss Screen for Maladaptive Behaviors*: Screens for mental health problems in IDD/ID population using information supplied by caretakers and observers; specifically notes presence of thirty-six carefully defined symptoms of psychiatric disorder; noted to be quick and accurate.

*AAMR Adaptive Behavior Scale:* Assesses the manner in which individuals cope with the natural and social demands of their environment; used exclusively with IDD/ID populations with lessening reliability when used with individuals in independent living.

*Wechsler Adult Intelligence WAIS-III*: Is a standardized intelligence test measuring fifteen distinct aspects of cognition with three scoring scales (Verbal, Performance, and Full Scale); also offers four additional measures by analyzing verbal comprehension, performance organization, working memory, and processing speed known as Index Scores.

*Wechsler Memory Scale*: Abbreviated test measuring auditory and visual memory abilities; designed to provide global estimate of an examinee’s general memory functioning.

**Motivational/treatability focused** (based on stages of readiness for change I Prochaska, J. O., DiClementi, C.C., &Norcross, J.C. (1992). In search of how people change: Applications to addictive behavior. *American Psychologist, 47*, 1102-1114. I).

*Readiness to Change Questionnaire* (RTCQ): Fifteen-item questionnaire assessing current stage of change mode (e.g., precontemplation, contemplation, and action stages); easily administered; compliments *Readiness for Mental Health Treatment* (RMHT).

*Treatment Motivation Questionnaire* (TMQ): Twenty-six item test measuring internal and external motivation regarding entering treatment, genuine desire for seeking help, and commitment to making behavior change.

**Reliability Measures**

*Balanced Inventory for Desirable Reporting* (BIDR): One of the most widely used social desirability scales; has adequate reliability on most but not all scales (e.g./self-deception).

*Validity Indicator Profile*: Seventy-two-item test helps assess whether the results of cognitive, neuropsychological or other types of testing should be considered representative of an individual’s overall capacities; assess the probability of malingering and other deceptive presentations.

**Resources**

Note: Website and names subject to change:

**ADA Information Line,** (800) 514-0301(<http://www.usdoj.gov/crt/ada/adahom1.htm>)

Offers a free video called *Response to People with Disabilities, Eight Part Series* that answers questions about the ADA; available by email and fa through the Information Line; may also be viewed or downloaded at it website (<http://www.ada.gov/policevideo/policebroadbandgallery.htm>) ADA is under the U.S. Department of Justice.

***Joint Position Statement of AAIDD and The Arc*** (<http://aaidd.org/content_158.cfm?navID=31> )

Position statement to effect right to justice and fair treatment in all areas of the criminal justice system, including reasonable accommodations as necessary. Adopted: Board of Directors, AAIDD, August 18, 2008; Board of Directors, The Arc of the United States, August 4, 2008; Congress of Delegates, The Arc of the United States, November 8, 2008.

***Temple University’s Institute on Disabilities*** (<http://www.temple.edu/institueondisabilites>)

Publications for sale: *A Curriculum for Law Enforcement Officers* with Trainer’s Guide; provides basic understanding of IDD/ID both as victims and suspects and its impact on LE and CJS involvement; *Unequal Justice:* *The Case for Johnny Lee Wilson,* a documentary about an IDI who unknowingly waived his right to an attorney, eventually confessing to the crime and spent nine years in prison for a crime he did not commit; *Under Arrest: Understanding the Criminal Justice Process in Pennsylvania,* intended as a book for disabled offenders, it goes through the entire CJS process from arrest through incarceration.

***Texas Appleseed and Houston Endowment,*** Deborah Fowler, Senior Attorney, 512 E. Riverside, St. 212, Austin, Texas 78701, (512) 804-1633 x105 (<http://www.texasappleseed.net/pdf/hbook_MR_attorney_Opening.pdf>)

Two publications: *Opening the Door: Justice for Defendants with Mental Retardation* **(NOTE: In 2017, President Obama signed into law a bill eliminating the use of the phrase “mentally retarded” from federal law. The law is named Rosa’s Law. The law amends several prominent pieces of legislation affecting people with special needs, including the Elementary and Secondary Education Act, the Rehabilitation act, and the Individuals with Disability Act (IDEA), striking the work “mental retardation” and replacing it with “intellectual disabilities”. It also prohibits federal agencies from using “mental retardation” when creating regulations to enforce these laws.**

***National Arc*** (<http://www.thearc.org>)

officials, clinicians and interviewers and a seventy-two minute training *Victims with Disabilities: Collaborative, Multidisciplinary First Response* (2009); both videos spell out effective techniques for first responders.

***Quality Mall: Justice and Victimization*** (<http://www.qualitymall.org/directory/dept1.asp?deptid-45> )

Website contains resources (e.g., books, reports, and media), projects, services, programs, and supports that assist persons with developmental disabilities who are victims, witnesses, or suspects within the CJS.

**Blueprints and Strategic Planning Tools**

***SAMHSA’S Blueprint for Change*** (<http://www.mentalhealth.samhsa.gov/publications/allpubs/sma04-3870/default.asp>)

Provides a list of targets and mainstream resources.

***United Nations Office of Drugs and Crime*** (<http://www.unodc.org>)

*Alternatives to Incarceration Custodial and Non-Custodial Measures* (2006) available at <http://www.unodc.org/documents/justice-and-prision-reform/cjat_eng/3_Alternatives_Incarceration.pdf>)

***Criminal Justice/Mental Health Consensus Project*** (<http://consensusproject.org/assessment>)

Provides a useful checklist in monitoring steps in creating and maintaining successful collaboration endeavors; also provides assessment tools and worksheets to track collaborative strategies.

***National Consumer Supporter Technical Assistance Center*** (NCSTAC) (<http://www.ncstac.org>)

Presents a system for communities to access services and to determine service gaps that can be alleviated by possibly consolidating services.

***Blueprint for Change: Ending Chronic Homelessness*** (<http://www.mentalhealth.samhsa.gov/pubications/allpubs/sma04-3870/default.asp>)

For persons with serious mental illnesses or co-occurring SA disorders.

***Tools and Techniques for Achieving Consensus*** (<http://www.resolvecollaboration.com>)

Resolve Collaboration Services is a for-profit organization that assists organizations attempting to resolve common obstacles in running collaborations.

***EffectiveMeetings.com*** (<http://www.effectivemeetings.com/>)

Offers practical advice for establishing procedures and running effective meetings.

**Funding**

***Foundation Center*** (<http://foundationcenter.org/findfunders>)

Identifies private foundations, public charities, and other nonprofits that offer funding sources such as grants; can search by name, state, or zip code.

***U.S. Department of Justice, Bureau of Justice Assistance*** (BJA) (<http://www.bja.gov/funding.aspx>)

List potential funding resource opportunities.

***SAMHSA’S GAINS Center for Behavioral Health and Justice Transformation*** (<http://gainscenter.samhsa.gov/cms-assets/documents/95335-724522.blending-funds.pdf>)

Offers fact sheet on blended funding for JD programs.

**Research**

***University of Maryland, Center for Behavioral Health, Justice, and Public Policy***

Published *Building Bridges between Mental Health and Criminal Justice: Strategies for Community Partnerships.* Available at <http://www.umaryland.edu/behavioraljustice/issues/jaildiverson/building.html>

***Psychiatric Services*** (journal)

The December 1999 issue of this journal has a special section on mentally ill offenders that contains two nationally recognized articles explaining research outcomes; the first article is “A SAMHSA Research Initiative Assessing the Effectiveness of Jail Diversion Programs for Mentally Ill Persons.” The latter article (“The SAMHSA Jail Diversion Initiative”) summarizes a SAMHSA-funded three year grant initiated in 1997 and coordinated by the Research Triangle Institute in Raleigh, NC, with the overall goal of establishing a knowledge base and evidenced-based practices. Available at <http://journals.psychiatryonline.org/article.aspx?articleid=83788>

***National Institute on Disability and Rehabilitation Research (NIDRR)*** ([http://www2.ed.gov/about/offices/list/osers**/**nidrr/indez.html](http://www2.ed.gov/about/offices/list/osers/nidrr/indez.html))

A component of the U.S. Department of Education’s Office of Special Education and Rehabilitative Services (OSHERS), supporting research, training, and development to improve the lives of individuals with disabilities. It provides an array of grants and other funding opportunities to serve individuals with disabilities and their families.

***Intellectual and Developmental Disabilities*** (journal)

The December 2007 issue of the journal contains an article (Community Management of Sex Offenders with Intellectual Disabilities: Characteristics, Services, and Outcomes of a Statewide Program) that discusses the Vermont project of deinstitutionalization and recidivism. Available at <http://nasddls.org/pdf/AAIDD-Management-of-Offenders.pdf>

**Examples of Successful Jail Diversion and Alternative Solutions**

***Arc of New Jersey’s Criminal Justice Advocacy Program*** (CJAP) (<http://www.arcnj.org>)

985 Livingston Ave., North Brunswick, NJ 08902, (732) 246-2525

Provides alternatives to incarceration using a combination of intervention, advocacy, intensive case management, education, and training; services as liaison between the CJS and human service agencies, assists in transition moves from one system to another ensuring proper linkages exits; develops and presents courts with *personalized justice plans* (PJPs) on behalf of IDD/ID suspects and offenders that include suggestion for sentencing and diversion options while specifying terms of ongoing monitoring, serves as a clearinghouse for information about offenders with IDD/ID/DD and offers such training to CJS; provides technical assistances to attorneys who represent IDD/ID/DD defendants, ensuring they understand the disadvantages faced by this population, the need for special protections, and the need to address their habilitative needs; monitors and ensures accountability for individual’s behavior while balancing the needs of the community; actively advocates for and supports legislation promoting the development of specialized programs and services; works directly with IDD/ID/DDs living in the community, educating them about citizenship and the law; distributes informational packets about IDD/ID/DD offenders to service providers and the public, emphasizing the need to be accountable for their criminal behavior preferably *before* CJS involvement.

***Victim-Offender Conferencing*** (VOC) (<http://lavorp.org/ccpprograms/vocprogram.html>)

Discusses program of ninety-five volunteers who work with the DA’s office and defense attorneys assisting defendants who have non-serious victim crimes; also runs *Circle of Support and Accountability Program* for sexual offenders.

***Pueblo DD/MH Consortium***

The article in the NADD Bulletin (*Diversion Creative Sentencing and Behavioral/Psychological Programming in a Model Program Addressing the Special Needs of Dually Diagnosed/Developmentally Disabled Offenders Living in Community Based Services in Pueblo, CO)* describes one of the first *model* programs of its type- a tailored-made diversion program for dually diagnosed MI/IDD/DD/IDOs. State agencies assisted private nonprofit agencies in creatively utilizing resources to develop a plan to be submitted to the judge and, when agreeable, the DA; also developed Project A.S.S.I.S.T. (Assault, Safety, and Social Intervention System Training), a centralized identification and tracking system for IDD/DD/ID offenders. Available at [http://thenadd.org/,odal/bulletins/v4n6a*~*.htm](http://thenadd.org/,odal/bulletins/v4n6a~.htm)

***Jail Diversion Program***(JDP) (<http://www.advocatesinc.org/Services-JailDiversionProgram>)

In April 2003, Advocates, Inc. started coordinating intervention by Framingham (MA) Police Department (FPD) as well as by Advocates’ own Psychiatric Emergency Services (PES) program. Directed by the Framingham PD, funding was attained from the Metro West Community Health Care, Carlisle, and Poitras Foundations, and the United Way of Tri-County. The Concept of Therapeutic Jurisprudence allows this to be a social-worker ride-along model that is backed up by PES during hours when clinical responders are not available.

***Community Crisis Intervention Team*** (CCIT) <http://ccittauntonma.weebly.com>

The Traunton Jail Diversion Program (JDP), an outgrowth of the CCIT, predates the nationally acclaimed Sequential Intercept Model (SIM). It consists of several components that allow for multiple points of entry. The program offers the following: Three day training focused on adult issues; Two day training focused on youth issues; One day training on elder affairs; “Train the Trainers” training including Instructor and Training Manuals; Consultation and technical assistances in organizing community coalitions and trainings. CCIT Case Conferences have proven to be an effective method of conducting pre-crisis and diversion planning, probation coordination, and re-entry planning. Core Team of community members meet monthly for inter-agency collaboration as well as providing clinical, law enforcement, and criminal justice staffing to the case conferences.

**MH Advocacy Groups**

***The National Alliance on Mental Illness*** (NAMI) (<http://www.nami.org>)

NAMI and its local chapters offer support groups for individuals with mental illness and their families as well as providing research, advocacy, and public events; advocate for access to services, treatment, supports, and research.

***Criminal Justice/Mental Health Consensus Project*** (<http://consensusproject.org/programs_start>)

Provides an online, nationwide database of criminal justice/mental health programs; database is searchable by state, issue, or keyword. (Formerly known as Criminal Justice/Mental Health Information Network, or InfoNet).

***Mental Health America*** (<http://www.mentalhealthamerica.net>)

Nonprofit dedicated to helping all people live mentally healthier lives.

**IDD/ID/DD Advocacy and Service Organizations**

***American Association on Intellectual and Developmental Disabilities*** (AAIDD) (<http://aamr.org/>)

Organization aims to provide innovative ways for people to connect, learn, and collaborate on issues pertaining to IDD/DD/ID individuals*;* major clearinghouse of important information and resources; supports Criminal Justice Action Group

***National Arc*** (<http://thearc.org>)

Contact: Leigh Ann Davis, 1010 Wayne Ave., Suite 650, Silver Spring, MD 20910, (817)227-2236

(Leigh Ann Davis is the Director of CJ Initiatives for The Arc and oversees The Arc’s National Center on Criminal Justice and Disability (NCCJD).

Provides technical assistance to families and other advocates relating to CJS and IDD/ID/DD; promotes policies, research, and effective practices; advocates for universal human rights for IDD/DD/IDs; provides information such as 57-minute DVD (NCJ 212894) called *Understanding MR: Training for Law Enforcement Victim Services,* offering guidelines for law enforcement, court officials, advocates, clinicians, and interviewers; also offers a 72-minute training (NCJ 223940)

***National Association of Dually Diagnosed*** (NAAD) (<http://thenadd.org>)

Provides educational services and training materials aimed at promoting community-based policies, programs, and opportunities; coordinates international conferences. In 2007, NADD, in association with the American Psychiatric Association (PA), published *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV-TR)* to aid in diagnosing individuals with MI and IDD/DD/IDD.

***National Association of State Directors of Developmental Disabilities Services***(NASSDS) (<http://www.nasddds.org>)

Provides a list of publications for dually diagnosed IDD/DD (ID/MI/SA) individuals. Available at <http://www.nasdds.org/Resources/SexOffenderTreatment.shtml>

***The Arc of the Capital Area*** (<http://www.arcofthecapitalarea.org/juvenile-justice.php>)

2818 San Gabriel, Austin, TX 78075, (512) 476-7044

Provides juvenile justice services for special education students in the CJS; provides case management and attends court hearings.

**Legal**

**Mental Health Law**

***Minnesota Judicial Branch***

The Minnesota Judicial Accommodation Electronic Request form could serve as an example for other court systems. Available at <http://www.mncourts.gov/district/0?page=4692>

***Bazelon Center for Mental Health Law*** ([www.bazelon.org](http://www.bazelon.org))

1101 15th St. NW, Suite 1212, Washington, DC 20005, (202) 467-5730

Seeks to promote federal legislation and regulation, policy analysis and research, and technical assistance to state and local advocates.

***American Bar Association Commission on Disability Rights*** (<http://www.abanet.org/disability/home.html>)

1800 M. St. NW, Washington, DC 20036 (202) 331-2240

ABA compiles a list of lawyers practicing disability law throughout the country; available at <http://www.abanet.org/disability/disabilitydirectory/home>

***The State Bar Disability Entities Directory***

Published by the ABA to help lawyers find information about disability rights and disability law. Available at <http://www.americanbar.org/groups/disabilityrights/resources/state_bar_disability_entities.html>

***ABA’s Criminal Justice Section Standards***

Called *Mental Health and Criminal Justice: General Professional Obligations,* the publication is one of the most comprehensive and authoritative sources on how the LE, CJS, corrections, and outside professionals should regard their roles and responsibility. Available at <http://www.americanbar.org/publications/criminal_justice_section_archive/crimjust_standards_mentalhealth_blk.html>

***Representing the Cognitively Disabled Client in a Criminal Case***

Excellent paper by Jeanice Dagher-Margosian representing the Michigan Bar Assocation on essential facts and legal process for lawyers to use in representing ID/IDD/DD defendants. Available at <http://www.michbar.org/programs/EAI/pdfs/disabledclient0905.pdf>

**Disability Rights**

***Americans with Disabilities Act*** (ADA) (<http://www.ada.gov>)

***The Leadership Conference,*** 202-466-3111(<http://www.civilrights.org.disability/>)

Publishes a number of materials related to the legal representation and rights of people with varying disabilities, including cognitive disabilities.

**Information Sharing**

***Health Insurance Portability and Accountability Act*** (HIPPA) (<http://www.hhs.gov/ocr/privacy/>)

Full discussion of privacy issues per regulations

***Information Sharing in Criminal Justice-Mental Health Collaborations***

Discussion on privacy rules exceptions for CJS and LE. Available at <http://csgjusticecenter.org/cp/publications/information-sharing-in-criminal-justice-mental-health-collaborations/>

***Dispelling the Myths about Information Sharing between the Mental Health and Criminal Justice Systems***

Excellent article by a renowned legal expert aimed at clearing up confusion regarding HIPPA and LE/CJS. Available at <http://www.ncdhhs.gov/mhddsas/providers/NCjaildiversion/ncjaildiv-in-fosharingmyths1-08.pdf>

**Assistance**

***CHS Housing Solutions*** (<http://www.csh.org>)

Offers funding strategies for housing; conducts research evaluating supportive housing via *Federal Agencies Centers for Medicare and Medicaid Services* [www.cms.gov](http://www.cms.gov)

***Disability.gov*** (<https://www.disability.gov/housing>)

Provides information on federal affordable housing programs.

***Federal Interagency Reentry Council***

Provides excellent source (*Reentry MythBusters)* dispelling myths of eligibility for federal housing for people who have been incarcerated. Available at <http://www.nationalreetnryresourcecenter.org?documents/0000/1090?REENTRY_MYTHBUSTERS.pdf>

***U.S. Department of Housing and Urban Development*** (<https://www.hud.gov>)

Provides grants, aids in preventing homelessness, housing discrimination, information for people with disabilities, and research.

***SAMHSA’s SSI/SSDI Outreach, Access, and Recovery Technical Assistance (SOAR TA) Center*** (<http://www.prainc.com/soar/>)

Provides information on linking people who are homeless and have a mental illness or co-occurring substance use disorder with benefits administered by the Social Security Administration (<http://www.ssa.gov>), including Social Security Disability and Supplemental Security Income.

**Treatment**

***SAMHSA’s GAINS Center for Behavioral Health and Justice Transformation***

Provides information on evidence-based practices in MH treatment and JD services and is an excellent updated accounting of what works and why in treating individuals with MH issues. Available at <http://gainscenter.samhsa.gov/topical_resources/ebps.asp>

***Substance Abuse and Mental Health Services Administration (SAMHSA)*** (<http://www.samhsa.gov>)

Administers a combination of block grant programs and data collection activities; the *Center for Mental Health Services (CMHS)* focuses on the prevention and treatment of mental health disorders; the *Center for Substance Abuse Prevention (CSAP)* seeks to prevent and reduce the abuse of illegal drugs, alcohol, and tobacco; the *Center Substance Abuse Treatment (CSAT)* supports the provision of effective SA treatments and recovery services; the *Center for Behavioral Health Statistics and Quality (CBSHSQ)* has primary responsibility for the collection, analysis, and dissemination of behavioral health data.

***SAMHSA’s National Center on Substance Abuse and Child Welfare*** (<http://www.ncsacw.samhsa.gov/>)

Provides information about and samples of screening and assessment tools for substance use disorders. Available at <http://www.ncsacw.samhsa.gov/files/SAFERR_AppendixD.pdf>

***National Association of State Directors of Developmental Disabilities*** (NASDDS)

Offers a comprehensive list of noteworthy articles on treatment of IDD/DD/ID sex offenders, which, are the most probable standard of treatment for all IDOs. Available at <http://www.nasdds.org/Resource/SexOffenderTreatment.shtml>

***Forensic Issues in Intellectual Disability*** (journal article)

Sondenaa, E., Rasmussen, K., Nottestad, J.A. (2008). *Current Opinion in Psychiatry, 21*(5), 449-453. Available at <http://www.medscape.com/viewarticle/581737>

***Cognitive-Behavior Therapy for People with Learning Disabilities*** (book edited by B. Stenfert Kroese, D.Dagnan, & K. Loumidis)

Compilation of well-known and highly experienced practitioners and researchers who discuss theoretical and clinical aspects of CBT for IDD/ID population on pertinent treatment components, such as anger management, emotional regulation, social problem solving, and anxiety management. Available through Amazon at <http://www.amazon/Cognitive-Behaviour-Therapy-People-Learning-Disabilities/dp/0415127513>

**List of Relevant Federal Agencies and National Associations** (Use sites below for specific searches)

*Centers for Medicare and Medicaid Services* (<http://www.cms.org>)

*National Association of State Mental Health Program Directors* (<http://www.nasmhpd.org>)

*National Institute of Corrections* (<http://www.nicic,org>)

*Social Security Administration* (<http://www.ssa.gov>)

*Substance Abuse and Mental Health Services Administration* (<http://ww.samhsa.gov>)

*U.S. Department of Health and Human Services* (<http://www.hhs.gov>)

*U.S. Department of Justice* (<http://www.justice.gov>)