Response to Reports
Prepared by (1) J.K. Tebes, P.T. Amble and M.V. Baranoski and (2) E. Jones
in the Case of Williams et. al. v. Blagojevich et. al.,
Case No. 05-4673, N.D. ILL.

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University of Massachusetts Medical School
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Submitted to:
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August 18, 2008
Tebes, Amble & Baranoski Report

Premise

The study’s quest (p. 1) "to determine... whether with appropriate supports and services, residents who participated in the evaluation could live in more integrated community settings", is not in question. There is no doubt that 100% of patients in state hospitals, 100% of residents in IMD's and 100% of persons in group residences and supported housing programs could live in a situation more nominally integrated than where they are now. This was actually demonstrated in western Massachusetts under the federal court consent decree Brewster v. Dukakis.¹ This does not mean that such action actually achieves further integration, is clinically sound and safe, is in the individual’s best interest, or is fiscally responsible. It only means it’s possible.

Background

The Background section is a selective read of the literature. First, deinstitutionalization was never a “movement” (p. 4). Second, a major, if not the major focus in moving people out of federally-defined IMD’s and into community location was and is the state’s interest in shifting financial responsibility from state to federal budgets under Medicaid.² Third, patients have been writing first person accounts for well over 150 years in the USA; this is not a new phenomenon³ (p.4). Fourth, recovery-oriented care (p.5) has existed intermittently since Benjamin Franklin first opened hospital beds for “insane persons” in the late eighteenth century. Peaks of recovery-oriented services occurred in the 1850’s and the 1950’s. Fifth, there is no definition for the community. Sixth, there are no data to support the assertion that given the realities of the twenty-first century, “supervised or independent living provide a continuum of residential services in the community that can be tailored to the individual’s needs”⁴ (p. 6). Seventh, there are no data to support the assertion that “relatively few” persons “may require higher levels of care for sustained periods.” This flies in the face of the fact that the number of people in 24-hour/day supervised settings with mental illness is the same now as it was at the peak year end census of state and county hospitals in the mid-1950’s extrapolated for the increase in population.

Method

The methodology to select residents is sound, but refusers and those unable to consent to the interviews were not considered in their report. Because those individuals who are more capable tend to consent or have the ability to consent, the results of any analysis on the population would be unrepresentative without factoring in the refusers and those unable to consent. By analyzing the pertinent records of those individuals who refuse the interview or who are unable to consent.

² Geller JL: Excluding Institutions for Mental Diseases from federal reimbursement for services: Strategy or tragedy. Psychiatric Services 51:1397-1403, 2000
to said interview and by discussing their medical/psychiatric history with the facility staff, I can account for those factors and provide a more complete analysis as to all residents.

The measures used are a partial, but inadequate data set. Most problematic is that the data are essentially a point-in-time data set with no attention to longitudinal factors. The patient interview is almost exclusively about what is true now. The medical record review was limited to the current active chart (per observers of the process) with no examination of past medical/psychiatric history. A simple example: On the day John Doe was interviewed by Dr. Tebes, John was doing quite well and scored high on all measures. But, for years John has made serious suicide attempts on the anniversaries of each of his parents’ deaths, Mother’s Day and Father’s Day. Since none of these occurred in proximity to Dr. Tebes’ interview (in February or March) this does not show up as a factor for consideration.

While Dr. Amble reviewed the current chart, even relevant data found here is not reported. Significant factors not considered in the report include alcohol abuse/dependence, substance abuse/dependence, smoking, firesetting risk, history of sexual predatory behavior, among others.

It is unclear how the Yale Team managed to collect the data they report. They told each resident the interview would take about 30 minutes (Appendix A, p. 46). Per the Yale Team’s IMD Visit Schedule (p. 35) and assuming no time for introductions at the facility; no time to record anything between interviews; no time between residents; no bathroom, meal or any other breaks; and assuming Dr’s. Tebes and Baranoski were always seeing residents simultaneously, the Team spent about 47 minutes per resident. But it takes 30 minutes to just administer the BPRS to individuals the interview is not familiar with. 5

Results

The Results section is fundamentally flawed because the Yale Team makes sweeping conclusions far beyond their data without reference to any source for their comparisons. They repeatedly compare scores to “individuals living in the community” without any indication of who these people are or where the information came from. This issue appears on virtually every page in the Results section. Many times they indicate some finding may indicate something (favorable to the plaintiff’s position) when it could just have easily indicated something significantly different.

The report uses the terms “independent” and “independent with all necessary supports” interchangeably when they are quite different. The researchers assume that because a person says they want to do something, they actually will do it. They know full well this is not the case for any of us.

The Yale Team failed to integrate the data from resident interviews with the data from the medical record review. In fact, the medical record review contributes virtually nothing to the report except for a problematic section on transition planning (p. 26-28).

The methodology of Tebes, Amble and Baranoski, after their selection of the residents, vitiates their conclusions.

**Jones Report**

**Method**

Ms Jones spent one (1) to four (4) hours in each of the 26 Illinois IMD’s. While it’s impressive she visited all the IMD’s, it would probably have been preferable to spend more time per IMD in fewer IMD’s. It’s not clear from her report what she could actually accomplished in any given IMD.

Ms Jones’ methods of conducting her work at each IMD is the same method she used in her visits to Adult Homes in the New York State case *DAI Inc. v. Pataki*.

**Results**

Ms Jones’ findings in the Illinois IMD’s are quite similar to her findings in the NYS Adult Homes. Some paragraphs in the two reports are identical.

Ms Jones finds not a single resident who makes a single positive comment about the IMD in which he/she resides. These findings strongly contradict those of the Yale Team who found that 30% of residents did not want to move out of the IMD; 29% were fairly satisfied and 39% very satisfied (equals 68% satisfied) with the IMD as a place to live; 79% said they had choices about decorating and furnishing their room; 77% said they had choices about visitors; 50% said they had choices about locking their door.

**Community Comparison**

The plaintiff’s experts do not make comparisons to typical Illinois residential providers and their services. Rather, they make comparisons to exemplary programs recognized as national models of excellence:

- Thresholds: thresholds.org/home2.sp
- C4 or Community Counseling Center of Chicago: C4chicago.org

**Defendants’ Experts’ Plan**

1. We will identify, using the Yale Team’s methodology, residents at the same IMD’s they visited. We also over sample at each IMD in order to actually obtain 120 cases of individuals who consent. As to those individuals who refuse the interview or who are unable to consent to said interview, we will provide review and analysis of the pertinent records of those individuals as well as discuss their medical/psychiatric history with the facility staff.

2. We will obtain in advance from each IMD records of the identified IMD residents. These records shall include:
a) The first set of evaluations done upon the residents’ entry into the IMD, no matter when that was
b) The most recent set of annual assessments
c) The entire current record

We will request additional information as needed. We have ascertained that it is feasible for the IMD’s to produce the above records. We will review these records prior to the site visit to each IMD.

3. When on site at each IMD, we will
   a) Tour the facility
   b) Talk to staff and residents throughout the IMD about life in general at the IMD
   c) Interview the residents from the identified subsample who agree to participate in the interview
   d) Interview staff about the specific residents

4. We will use a number of tools, including, but not limited to
   a) Psychiatric interview of resident
   b) Nurse interview of staff
   c) LOCUS (Level of Care Utilization System for Psychiatric and Addiction Services)⁶
   d) Mini Mental Status Exam (MMSE)⁷,⁸
e) Draw-A-Clock Test⁸

5. We will integrate the level of care rating from the LOCUS with other residents and record data to create a recommended placement type for each IMD Resident.

6. We will ascertain from the results in #5 the percentage of Residents for whom the recommended placement would be various forms of “independent living” and describe the various services that would be necessary for the Residents to reside in such a setting.

⁸ http://www.char.brown.edu/MMSE_AND_CLOCK_INSTRUCITONS.PDF
CURRICULUM VITAE

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University of Massachusetts
Medical School
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Worcester, MA 01655
(508) 856-6527

CITIZENSHIP: U.S.A.

EDUCATION AND TRAINING

UNDERGRADUATE

September 1966-
June 1970
B.A. 1970
Psychology
Williams College
Williamstown, MA

January 1969-
June 1969
Exchange Student
Vassar College
Poughkeepsie, NY

GRADUATE

September 1970-
December 1973
M.D. 1973
University of Pennsylvania
School of Medicine
Philadelphia, PA
Rotation at the Austen Riggs Center
Stockbridge, MA, June, 1971-August, 1971
Rotation at Kaimosi Friends Hospital,

September 1976-
June 1978
M.P.H. 1978
Harvard School of Public Health
Boston, MA

POST GRADUATE

January 1974-
June 1974
Internship
Philadelphia General Hospital
Philadelphia, PA

July 1974-
June 1977
Psychiatric Residency
Beth Israel Hospital
Boston, MA

July 1977-
June 1978
N.I.M.H. Fellowship
Psychiatry in Primary Care Medicine

1
ACADEMIC APPOINTMENTS

1974-1978   Fellow
Harvard Medical School
Boston, MA

1979-1983   Assistant Professor
University of Massachusetts Medical School
Worcester, MA

1982-1984   Clinical Assistant Professor
Smith School for Social Work
Northampton, MA

1983-1984   Assistant Professor
Harvard Medical School
Cambridge, MA

1984, 1987, 1989   Adjunct Winter Study Faculty
Williams College
Williamstown, MA

1984-1986   Assistant Professor
University of Pittsburgh, School of Medicine
Pittsburgh, PA

1986-1991   Associate Professor
University of Massachusetts Medical School
Worcester, MA

1991-      Professor
University of Massachusetts Medical School
Worcester, MA

1993-1994   Robert Wood Johnson Health Policy Fellow

1995-      Adjunct Faculty, Professor
Smith College School for Social Work
Northampton, MA

9/01-12/01   Visiting Professor
Psychology Department
Williams College
Williamstown, MA

2/10/03-2/14/03   Visiting Professor
Department of Psychiatry
University of Hawaii School of Medicine
Honolulu, HI

ACADEMIC CLINICAL AND ADMINISTRATIVE POSITIONS

Beth Israel Hospital
Boston, MA
1979-1983  
Director  
Psychiatric Regional Resource Unit  
Northampton, MA

1983-1984  
Medical Director  
Westfield Community Support Services  
Westfield, MA

1984-1986  
Law and Psychiatry Program  
Western Psychiatric Institute and Clinic  
Pittsburgh, PA  
Associate Director, 1986

1986-  
Director of Public Sector Psychiatry  
Department of Psychiatry  
University of Massachusetts Medical School  
Worcester, MA

1986-  
Westfield Area Mental Health Clinic  
Westfield, MA  
Interim Medical Director, 1987-1988

1988-1989  
Interim Director, Continuing Treatment Service  
Worcester State Hospital  
Worcester, MA

1990-1992  
Director, Open Units Service  
Worcester State Hospital  
Worcester, MA

1990-1998  
Medical Director  
Department of Mental Health Central Massachusetts Area  
Worcester, MA

CERTIFICATION AND LICENSURE

SPECIALTY CERTIFICATION

1981  
Diplomate, American Board of Psychiatry and Neurology

MEDICAL LICENSURE

1974-  
Massachusetts, Board of Registration of Medicine

1984-  
Pennsylvania, Bureau of Professional and Occupational Affairs

MEMBERSHIPS IN PROFESSIONAL AND SCIENTIFIC SOCIETIES

1974-  
American Psychiatric Association

1974-1984, 1986-  
Massachusetts Psychiatric Society

1980-1984  
Western Massachusetts Psychiatric Society

1984-1988, 2004-  
American Academy of Psychiatry and the Law
1984-1986  Pennsylvania Psychiatric Society
1984-  American Association for the History of Medicine
1984-  American Association of Community Psychiatrists
1987-  American Association for Social Psychiatry
1988-  American Association of Psychiatric Administrators
1988-  Group for the Advancement of Psychiatry

HONORS

1969  Phi Beta Kappa, Williams College
1970  Summa Cum Laude, Williams College
1970  Sigma Xi Science Honor Society
1989  Fellow, American Psychiatric Association
1990  Walter E. Barton Award
      The American College of Mental Health Administration
1992  Exemplary Psychiatrist Award
      National Alliance for the Mentally Ill
1993-1994  Robert Wood Johnson Health Policy Fellow
1994  Effective Legislative Fellow Award
      National Alliance for the Mentally Ill
1994  Board of Directors' Award
      Community Healthlink Inc.
1996  The Myers Center Award for the Study of Human Rights in North America
1997  Rothstein Award
      Massachusetts Alliance for the Mentally Ill
1999  President's Award for Public Service
      University of Massachusetts
2002  Distinguished Fellow, American Psychiatric Association
2003  Arnold L. van Ameringen Award for Psychosocial Rehabilitation
      American Psychiatric Association
2005  Torrey Advocacy Commendation Award
      Treatment Advocacy Center

SERVICE

NATIONAL AND REGIONAL COMMITTEE ASSIGNMENTS:
1977-1978  Co-chairperson of Professional Advisory Board to
Plaintiff's Legal Council, Brewster v. Dukakis

1978  Member, Harvard University Primary Care Delegation to the People's
Republic of China

1979-1984  Member, Department of Mental Health Region I Research Review
Committee, Commonwealth of Massachusetts

1980-1981  Member, Massachusetts Mental Health Committee, Clinical Committee

1981-1983  Member, City of Northampton Task Force on Deinstitutionalization

1984-1988  American Academy of Law and Psychiatry: Public Service Committee

1985-1996  American Psychiatric Association: Committee on International Abuse of
Psychiatry and Psychiatrists
Member 1985-1991
Vice Chairman, 1989-1991
Corresponding Member, 1991-1996

1985-1987  American Psychiatric Association: DSM III R Advisory Committee on
Impulse Disorders Not Elsewhere Classified

Institute on Hospital and Community Psychiatry

1987-1989  Massachusetts Psychiatric Society: Public Sector Committee

1988-1994  American Psychiatric Association: DSM IV Advisory Committee on Impulse
Disorders Not Elsewhere Classified

1990-1995  American Psychiatric Association: Committee on Psychiatric Services
Resource Center
Vice Chairman, 1991-1995

Consultant, 1991-1995
Assembly Liaison, 1995-1998
Member, 1997-2000
Vice Chairman, 1997-1998
Chairman, 1999-2000

Territories
Chairman, 1993-1996

1993-2001  Massachusetts Psychiatric Society: District Branch Assembly Representative
Lead Representative, 1996-2001

1993-  APA Assembly Committee on Public and Community Psychiatry
Chairman, 2004-

1993-1996  National Advisory Board of Pew Charitable Trust State Hospital Closing
Project
1994-  
American Psychiatric Association Assembly Committee on Public Psychiatry

1996-1998  
American Psychiatric Association History and Library Committee  
Corresponding Member, 1996-1998

1998-2003  
National Mental Health Association, Partners in CARE National Advisory Council

1999-2000  
Co-Chair, Scientific Program Committee of the Second Sino-American Conference on Psychiatry, Beijing, China, April 6-10, 2000

2000-2002  
American Psychiatric Association: Commission on Global Psychiatry

2001-2006  
American Psychiatric Association: Assembly  
Deputy Area I Rep 2001-2002  
Area I Rep 2002-2006  
Assembly Executive Committee 2002-2006  
Assembly Committee on Planning 2003-2006

2001-  
American Psychiatric Association: Council on Social Issues and Public Policy

2003-  
American Psychiatric Association: Intracouncil Workgroup on Inpatient Capacity

2004-2005  
CMHS Acute Care Subcommittee

2004-  
CMHS National Advisory Council  
Secretary, 2004-

2004-  
American Psychiatric Association: Medicaid Advisory Group

2006-  
American Psychiatric Association: Board of Trustees

2006-  
American Psychiatric Association: Area 1 Trustee

MEDICAL SCHOOL COMMITTEE ASSIGNMENTS:

University of Massachusetts:

1980-1983  
Utilization Review Committee, Northampton State Hospital

1980-1983  
Executive Council, Department of Mental Health Region I

1981-1982  
Search Committee, Psychiatry Chair of University of Massachusetts Medical Center

1986-  
Executive Committee, Department of Psychiatry

1986-1992  
Residency Education Committee

1987-1993  
Planning Committee, Psychiatric Treatment and Research Center

1987-1993  
Planning Committee, Worcester Psychiatric Rehabilitation Center

1990-1994  
Review Committee for Public Service Endowment Grants

1990-1991  
Search Committee, Psychiatry Chair of the Medical Center of Central
1991-1992  Co-Director, Salute to Science
1991-1993  Medical School Library Committee
1993-1994  Review Committee for James P. Healey Awards
1993-1994  Search Committee, Psychiatry Chair of St. Vincent Hospital, Worcester, Massachusetts
1994-1998  Pappas Commission on Medical Services at Framingham MCI
1999-2001  Strategic Planning Committee: Community Benefits

University of Pittsburgh:
1984-1986  Utilization Review Committee, Western Psychiatric Institute and Clinic
1984-1986  Ethics and Human Rights Committee, Presbyterian University Hospital

COMMUNITY BOARDS:
1991-  Genesis Club (Fountainhouse Clubhouse)
2003-2004  Sapling Project

EDITORIAL BOARDS AND JOURNAL REFEREE:

1978-  Referee, American Journal of Psychiatry
1986-  Referee, Psychiatric Services (formerly Hospital and Community Psychiatry)
1987-  Referee, Community Mental Health Journal
1988-  Referee, American Psychiatric Press
1991-  Referee, Journal of Nervous and Mental Disease
1991-  Referee, Behavioral Sciences and the Law
1992-2000  Editorial Board, Psychiatric Services
1994-  Column Editor, Psychiatric Services
1995-  Book Review Editor, Psychiatric Services
2001-  Referee, Lancet
2006-  Referee, Journal of Behavioral Health Services & Research
2007-  Referee, Israel Journal of Psychiatry
2007-  Referee, Psychology, Public Policy & Law

TEACHING
1976-1977  Taught Introduction to Clinical Medicine, Harvard Medical School
1976-1978  Supervisor for Medical Students on clinical rotation in psychiatry, Harvard Medical School
1977-1978  Instructed and supervised primary care residents and primary care staff on psychiatric care, Harvard Medical School and Beth Israel Ambulatory Care Center
1979-1983  Directed required psychiatry rotation for third and fourth year medical
students of U. Mass Medical School at Northampton State Hospital

1979-1983
Coordinator of Psychiatric Grand Rounds, U. Mass Medical School, Northampton State Hospital

1979-1983
Developed and taught patient interviewing utilizing video equipment, U. Mass Medical School at Northampton State Hospital

1981-1983
Co-Developed a Psychology Internship Program at Northampton State Hospital

1981-1984
Supervisor for Smith School for Social Work Students on placement at Northampton State Hospital

1984-1986
Supervision of Psychiatric Residents at Western Psychiatric Institute and Clinic for Psychotherapy and Community Psychiatry

1984-1986
Coordinate Law and Psychiatry rotation for psychiatric residents at Western Psychiatric Institute and Clinic

1984-1986
Coordinate medical student elective in Law and Psychiatry at U. of Pittsburgh School of Medicine

1984-1986
Teach medical students in required rotations and in clinical ethics at U. of Pittsburgh School of Medicine

1986-1989
Teach second year medical student course in Behavioral Science at U. Mass Medical School

1986-
Supervision of psychiatric residents at U. Mass Medical School in Psychotherapy and in Public Sector Psychiatry

1986-1992
Co-teach with Aaron Lazare, M.D., and Paul Barreira, M.D., seminar for PGY II residents in ongoing psychotherapy

1986-
Developed and direct fellowship in Public Sector Psychiatry

1987-1994
Develop and direct didactic component of Public Sector Community Psychiatry rotation for PGY III & IV residents

1990-1992
Co-developed and supervise, with Paul Barreira, M.D., the "Adopt-A-Resident" Program

1998-2001
Responsible for Schizophrenia Module in PGY 1/2 Core Didactic Series

1998-
Coordinator of Clinical Case Conference Series at Quincy Mental Health Center, Quincy, MA

2002-
Responsible for Public Sector Didactic Series in PGY III/IV Core

CONSULTANT

1981-1984
Franklin/Hampshire Community Mental Health Center

1982-1983
Center for Human Resources, Northampton, MA
1985-1989  U.S. Attorney, Western District of Pennsylvania
1985-2000  U.S. Dept. of Justice, Civil Rights Division
1985-1990  New York State Office of Mental Health
1987-1989  Buffalo Psychiatric Center
1987-       Massachusetts Board of Registration in Medicine
1991-1993  Massachusetts Rehabilitation Commission
1991-       Geneva Initiative
1993-1994, 1996-2003 Commonwealth of Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services
1998-2001  Vermont Protection and Advocacy
2000-2005  New Jersey: Greystone Park Psychiatric Center
2001-2007  Tennessee Attorney General/Tennessee Department of Mental Health and Developmental Disabilities
2001-       North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services and Attorney General’s Office
2005-       New York State Attorney General
2005-       Vermont Department of Health/Vermont State Hospital
2005-2006  New Hampshire Department of Health and Human Services
2006-       Connecticut Department of Mental Health and Substance Abuse Services
2006-       Oregon State Hospital and Attorney General’s Office
2007-       Georgia State Attorney General’s Office and Division of Mental Health, Developmental Disabilities and Addictive Diseases

PUBLICATIONS

REFEREED ARTICLES


Geller JL: "The Muddied Path Between the Criminal Court and the State Hospital." Journal of Psychiatry and Law


Geller JL, Lidz CW: "When the Subjects are Hospital Staff, is it Ethical (or Possible) to Get Informed Consent?" IRB 9:4-5, 1987.


BOOKS


VIDEOTAPES


BOOK CHAPTERS AND MONOGRAPHS


INVITED PUBLISHED PAPERS AND OTHER PUBLICATIONS


Geller JL. In reply (Ltr to edit). Hospital and Community Psychiatry 44:691, 1993.


Geller JL: A Hospital by Any Other Name... Hospital and Community Psychiatry 44:1125, 1993


Geller JL: Book Reviews "Crazy All the Time", "Under Observation" and "9 Highland Road." Psychiatric Services


Geller JL: Book Review: Three women speak again about experiences with illness. Psychiatric Services 53:1338-


**SYMPOSIUM AND PANEL PARTICIPATION**


Speaker: "Involuntary Community Treatment and Its Derivatives." 38th Institute on Hospital and Community Psychiatry, San Diego, CA, October 29, 1986.


Speaker: "Involuntary Community Treatment: Panacea or Problem?" Veterans Administration Northeast Regional Medical Education Center Decentralized On-site Program, Boston, MA, February 25, 1987.

Conference Director: "Family and Community Treatment of Severe Mental Illness." Public Sector Division of University of Massachusetts Department of Psychiatry, Worcester, MA, May 1, 1987.

Speaker: "Diagnosing the Mentally Ill." Western Massachusetts Alliance for Mentally Ill Citizens, Holyoke, MA, June 8, 1987.


Speaker: "Involuntary Outpatient Commitment." Mental Health Division, Department of Human Resources, Salem, OR, October 30, 1987.


Keynote Speaker: "Outpatient Commitment." Nebraska Department of Public Institutions, Omaha, NB, April 11, 1988.

Conference Director: "Meeting the Needs of the Chronic Mentally Ill: Patients, Families, and Practitioners in Partnership." Public Sector Division of the University of Massachusetts Department of Psychiatry, Shrewsbury, MA, April 29, 1988.

Co-Speaker: with Marilyn Schmidt: "Involuntary Community Treatment in Western Massachusetts: Two Models. Public Sector Division of the University of Massachusetts Department of Psychiatry, Shrewsbury, MA, April 29, 1988.

Speaker: "Involuntary Community Treatment and Its Benefit to the State Hospital." Westborough State Hospital Grand Rounds, Westborough, MA, October 3, 1988.


Speaker: "Firesetting and Servicing the Mentally Ill in the Community. Mt. Tom Institute, Holyoke, MA, March 6, 1989.


Speaker: "State Hospital Recidivism and the CMHC" Center for Adults and Families, Westfield, MA, April 26, 1989.

Conference Director: "The State Hospital and Its Alternatives: Myths and Realities." Fifth Annual Public Sector Psychiatry Conference, Department of Psychiatry, University of Massachusetts Medical School, Worcester, MA, April 28, 1989.


Conference Director: "The Asylum: Redirection or Misdirection" Public Sector Division, University of Massachusetts Medical School, Department of Psychiatry, Worcester, MA, June 1, 1990.


Speaker: "Firesetters and Treatment." 42nd Institute on Hospital and Community Psychiatry, Denver, CO, October 10, 1990.

Speaker: "Any Place But the State Hospital: Examining the Assumptions of Admissions Diversion." Grand Rounds, Northampton State Hospital, Northampton, MA, November 1, 1990.


Speaker: "From 'Asylum' to 'Loony Bin': American Women's Perspectives on Entering the Psychiatric Institution." 43rd Institute on Hospital and Community Psychiatry, Los Angeles, CA, October 22, 1991.


Speaker: "Use of Coercion to Keep People Out of Hospital: Paradigm or a Problem." Grand Rounds, Nassau County Medical Center, East Meadow, NY, April 24, 1992.


Conference Director: "Right-Sizing Massachusetts' State Hospitals." Public Sector Division, University of Massachusetts Medical School, Department of Psychiatry, Worcester, MA, May 15, 1992.


Speaker: "Clinical coercion in Post-Totalitarian Romania--Ethical Quagmire?" First International Conference of the Romanian Free Psychiatrists' Association, Bucharest, Romania, October 2, 1992.


Conference Director: Affective Disorders as Chronic Mental Illness. Public Sector Division, University of Massachusetts Medical Center, Worcester, MA, April 30, 1993.

Speaker: "Pathological Firesetting and the State Hospital." Norwich State Hospital Grand Rounds, Norwich, CT, May 13, 1993.


Speaker: "Is Managed Care Changing Administrative Psychiatry?" 146th Annual Meeting of the American


Symposium Organizer and Moderator: Medicaid Managed Care for Mental Health/Substance Abuse Services. 45th Institute on Hospital and Community Psychiatry, Baltimore, MD, October 10, 1993.


Symposium Presenter: Ethical Issues in Community Psychiatry. 46th Institute on Hospital and Community Psychiatry, San Diego, CA, October 1, 1994.


Speaker: National Mental Health Reform: To Be Or Not To Be. Grand Rounds at The Institute of Living/Hartford Hospital, Hartford, CT, January 25, 1995.


Co-Speaker: with Laurie Flynn. Keynote Address: The Future of Public Psychiatry. The Ohio Institute on Community Psychiatry, Department of Psychiatry CWRU and Ohio Department of Mental Health, Cleveland, OH, March 24, 1995.


Speaker: Revolution or Revision? Massachusetts' Lessons in Public Managed Care of Mental Illness. The Center for Psychiatric Medicine at St. Francis' Conference: Privatizing Public Mental Health Service Delivery: Promise or Peril, Pittsburgh, PA, April 22, 1995.

Conference Director: In Search of Parity: Mental Illness Care and Mental Illness Coverage. Public Sector Division, University of Massachusetts Medical Center, Worcester, MA, April 28, 1995.


Speaker: Who's committed to Involuntary Outpatient Treatment: The Psychiatrist or the Patient?" Grand Rounds, U. of South Dakota School of Medicine, Sioux Falls, SD, June 9, 1995.


Co-Speaker: with Oleg Nasynnik, M.D. Issues in Compulsory Treatment in Forensic Psychiatry. Third Meeting of Reformers of Psychiatry, Prague, Czech Republic, September 1, 1995.

Speaker: Revolution in American Psychiatry: Managed Mental Health Care. Third Meeting of Reformers in Psychiatry, Prague, Czech Republic, September 2, 1995.


Conference Director: Pathological Firesetters: Who; Why; What's to be Done? Public Sector Division, University of Massachusetts Medical Center, Springfield, MA, November 13, 1995.


Speaker: Managed and Unmanaged Behavioral Health Care. University of South Dakota Medical School, Department of Psychiatry Grand Rounds, Sioux Falls, SD, January 12, 1996.


Conference Director: Treating the Dual Disorders: Mental Illness and Substance Abuse. Public Sector Division, University of Massachusetts Medical Center, Worcester, MA, April 27, 1996.

Co-Speaker: with Maureen Slade, R.N., M.S. and Glen Lawrence, M.A. Continuum: Comprehension, Compliance, Coercion. 73rd Annual Meeting of the American Orthopsychiatric Association, Boston, MA, May 1, 1996.

Speaker: Public Sector Psychiatric Services at the End of the Millennium: Repetition Compulsionsion. 3rd Annual Conference for Mental Health Policy Services and Clinical Research of the Connecticut MHC and Department of Psychiatry of Yale University School of Medicine, New Haven, CT, May 30, 1996.

Speaker: Involuntary Outpatient Treatment. Department of Mental Health Western Massachusetts Area, Pittsfield, MA, June 19, 1996.


Speaker: Compulsory Outpatient Treatment. IV Meeting of Reformers in Psychiatry, Madrid, Spain. August 30, 1996.

Speaker: Video Workshop: The History of Psychiatry. 48th Institute on Psychiatric Services, Chicago, IL, October 18, 1996.


Speaker: Make ‘Em Do It! Me? Yeah, You! Nineteenth Annual Inservice Training Conference, Association of Ohio Forensic Psychiatric Center Directors, Columbus, OH, June 20, 1997.


Speaker: Involuntary Outpatient Treatment: Been There, Done That, or Not? Massillon Psychiatric Center and Northeastern Ohio Universities College of Medicine, Canton, OH, May 4, 1998.
Conference Director: Treatment and Mistreatment of Women with Chronic Mental Illness. Public Sector Division, University of Massachusetts Medical School, Worcester, MA, May 8, 1998.


Conference Co-Chair: Long-Term Care. National Alliance for the Mentally Ill, Bethesda, MD, September 15, 1998.


Conference Director: Care and Treatment of “Mentally Ill” Sexual Perpetrators. Public Sector Division, University of Massachusetts Medical School, Worcester, MA, April 30, 1999.

Speaker: The Place of Treatment for Individuals with Chronic, Serious Mental Illness. Grand Rounds, UMDNJ-New Jersey Medical School, Newark, NJ, October 20, 1999.


Co-Chair: with Zou Yizhuang, M.D., Scientific Program Committee of the Second Sino-American Conference on Psychiatry, Beijing, China, April 6-10, 2000.


Debate Participant: Resolved: Outpatient Commitment is Likely to Do More Harm than Good in Facilitating Effective Treatment of Persons with Serious Mental Illness. 52nd Institute on Psychiatric Services, Philadelphia, PA, October 27, 2000.


Speaker: From Right to Treatment to Needs Based Discharge Planning. Association of Public Developmental


Conference Director: Responding to Parasuicidal Behaviors, Suicide Threats, Suicide Attempts and Suicide. Public Sector Division, University of Massachusetts Medical School, Worcester, MA, April 26, 2002.


Speaker: Advocating for Patients and Psychiatrists. 54th Institute on Psychiatric Services, Chicago, IL, October 11, 2002.

Conference Director: Addressing the Clinical Issues of Persons with Mental Illness and/or Mental Retardation and Co-occurring Disordered Sexual Behaviors. Public Sector Division, University of Massachusetts Medical School, Worcester, MA, May 9, 2003.

Speaker: Treatment: Rights and Wrongs. Grand Rounds, University of Massachusetts Medical School, June 26, 2003


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Co-Speaker, with Debra Pinals, M.D. Police and Mental Health Professionals: Learning From Each Other. 56th Institute on Psychiatric Services, Atlanta, GA, October 10, 2004.


Speaker and Panelist: Enhancing Personal Liberty for Persons with Serious Mental Illness: Legal and Clinical Perspectives. University of Vermont Department of Psychiatry and Vermont State Hospital, Montpelier, VT, December 9, 2004.

Speaker: Clinical Criteria for Involuntary, Coercive and Pseudo-Voluntary Treatment. 5th Annual International Association of Forensic Mental Health Services, Melbourne, Australia, April 19, 2005

Conference Director: Making It In the Community: Best Practices. Public Sector Division, University of Massachusetts Medical School, Worcester, MA, June 28, 2005.

Speaker: Involuntary Outpatient Treatment in the USA: Conundrum or Quagmire. 29th International Congress on Law and Mental Health, Paris, France, July 8, 2005.


Speaker: Hearing Their Voices: A Resident’s First Psychotherapy Case Three Decades Later. University of Vermont College of Medicine, Department of Psychiatry Grand Rounds, January 19, 2007.


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