

Staff Spotlight: John Barber

Tell us about your dual role at DMH

My roles as the DMH Western Massachusetts Area Forensic Director (AFD) and the Statewide Coordinator of Crisis Intervention Team-Training and Technical Assistance Center (CIT-TTAC) Programs are quite varied and distinct. Every day is excitingly different with new questions and challenges to puzzle through in forensic services and the court. As the Western Mass AFD, I am involved in the multiple intercept points described in the [Sequential Intercept Model](#). I screen forensic referrals from the court clinic and local jails for potential hospitalization at DMH and Bridgewater State Hospital. Sometimes a forensic hospitalization is someone's first contact with our system and first step towards getting better. To the best of my ability, I track forensic patients through their hospitalization, alert Site Offices and inform on the need for DMH services. I work very closely with the Area around risk concerns and public safety matters involving DMH clients. I am the court clinic contract manager. I also serve as the Mentally Ill/Problematic Sexual Behavior (MI/PSB) coordinator for Western Mass. I supervise the Forensic Transition Team Supervisor in Western Mass, and meet regularly with the Area's specialty court clinicians involved with the Mental Health, Veterans, and Drug Courts.



John Barber pictured with NAMI WM President Bishop Neal Boyd. John was presented with an Appreciation Award for his work in Jail Diversion at the National Alliance on Mental Illness (NAMI) Western Mass Annual Banquet in Chicopee.

I have both statewide and local roles in DMH's Jail Diversion Program (JDP). As the Statewide Coordinator of CIT-TTACs, I ensure that a level of curriculum standardization and uniformity occurs, so that police trained throughout the state receive similar CIT or Mental Health First Aid for Public Safety trainings. Part of my responsibility is to work with the TTACs to make sure police departments across the state have access to the various CIT and related trainings they need to respond to crises in a skillful and safe fashion. I work with the TTACs to prioritize the further development and implementation of CIT in their region's police departments – having policies and procedures, a CIT coordinator, close mental health and behavioral health partnerships and regular stakeholder meetings. In Western Mass, I am the DMH JDP grant manager and regularly coordinate and facilitate three county-based mental health-law enforcement collaborative meetings.

Each year I am the point person for assembling and emceeing the Mental Health and Law Enforcement conference, a true labor of love. Throughout the year, I facilitate multiple trainings including area-based forensic overviews, trainings at CIT, and training for court personnel. The truth about training is it can have a powerful impact, the impact is far reaching and exponential, even though you as a facilitator may never realize it.

Unlike many of my colleagues who have some linkage to forensic services through family or past work experience, I worked in community services for a DMH vendor for 17 years prior to entering into forensic services. I was intrigued because many of my clients had justice involvement, and I was meeting more and more of them in both forensic hospitals and jails. I started working for DMH over 12 years ago as the (Forensic Transition Team (FTT) Supervisor, and was promoted to AFD a couple of years later when my supervisor retired.

What do you enjoy most about your work?

I enjoy the many aspects of my job. Helping police departments understand how CIT works and how to help someone in crisis;; working with a great cohort of court clinicians in Western Mass; training DMH Adult Community Clinical Services (ACCS) staff to work effectively with a client that is justice involved and with other justice partners; working collaboratively with fabulous colleagues in forensic services and the Area Office; facilitating trainings; and seeing how DMH makes a difference in people's lives to name a few.

Have you had any inspiring moments?

My most inspiring moments are hearing about veterans of the justice and mental health systems who seemed like "hopeless cases" – who recover, stay healthy and well, and go on to inspire others. A local woman's story here in Western Mass particularly moved me. She told us that she had been incarcerated around fifty times. She had never received outpatient or inpatient treatment before being placed from a local jail to a DMH hospital. This began her formal mental health treatment, her involvement with DMH services, and more importantly, her flight into recovery away from bipolar disorder and trauma struggles, along with any justice system involvement. When she spoke at the DMH Western Mass legislative breakfast, she was doing very well. Seeing the complete recovery occur was inspirational! Also, being witness to police departments becoming committed to figuring out how to best work collaboratively with our system and effectively with people in crisis to help them is also very inspiring.

Do you have any hobbies or interests?

My favorite things to do to decompress are to play music (guitar/mandolin), run, hike or backpack. I am section hiking the Appalachian Trail, and recently completed most of the Cohos Trail in NH. I have five children, and am soon to have a fifth grandchild!