

	<h1 style="text-align: center;">Mental Health Advisory Committee</h1> <h2 style="text-align: center;">Minutes – June 7, 2018</h2>
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Members Present	Members Absent	Ex-Officio and Staff Present	Ex-Officio and Staff Absent	Guests
Jeannette Bjorklund	Kevin Bryant		Raymond Crowel	Marla Cararano
Jennifer Jones	Scott Davis	Meredith Peace	Scott Green	Alice Zic
Garrett Mannchen	Michelle Grigsby-Hackett	Deborah Phillips		Paula Puglisi
Celia Serkin	Daphne Klein			Ziva Azhdam
Susan Smith	Kiki Li			Frankie Berger
Amy Sutter	Tami Mark			Rita Deng
	David Myles			Roger Peele
	Karishma Sheth			

## I. Introductions

**Speaker:** Frankie Berger, Director of Advocacy Treatment Center– to speak on Assisted Outpatient Therapy. Frankie Berger is the director of advocacy for the Treatment Advocacy Center. Frankie leads the organization’s advocacy agenda and works with the federal government, state legislatures and advocates across the country to improve civil commitment laws, increase access to psychiatric beds, and decriminalize mental illness. She has helped secure millions of dollars in federal funding for innovative treatment programs including assisted outpatient treatment, advocated to maintain provisions to help people with serious mental illness in major mental health and criminal justice reform bills, and has helped states strengthen their laws and policies around mental illness. Prior to her

role at the Treatment Advocacy Center, Frankie directed state and local government relations for Habitat for Humanity International and worked as a policy aide on Capitol Hill.

- Assisted Outpatient Therapy (AOT) – Maryland is one of three States in the United States that does not have legislation enacting it.
- Assisted Outpatient Treatment (AOT) is not an alternative to voluntary treatment. It is a way to get services to those who refuse voluntary treatment.
- AOT can only be used for a family member to petition the courts on behalf of a severely mentally ill person who is not compliance with treatment and is presenting a danger to the community. The person petitioning must have a great deal of documentation proving that the client is severely mentally ill and is a danger to the community. Several Doctors need to provide documentation that client is mentally ill and a danger to community.
- ACT teams provide wraparound services to an individual after they are released from the hospital.
- Question was asked, “What happens if a person does not follow thru with the courts order – Frankie states that AOT is not punitive and usually clients are in compliance because of the black robe effect, i.e. the Judge is giving the order. If clients do not follow thru there is nothing done by the court and they are not ordered to jail.
- Community providers are responsible to go to the court when a client is not following thru with treatment but again no punitive actions are taken
- Baltimore was designated as an AOT pilot program and were given over a million dollars to enact the program. The Baltimore program has been acutely unsuccessful due to the lack of buy in by State employees. Program has had 3-4 participants and have to volunteer to be part of the program.
- Compliance rates are 85-90% of clients – they want the help and are willing to do what is necessary to be compliant with treatment.
- Often AOT is used as a stepdown program
- AOT is not done quickly as court has to be petitioned and several pieces of evidence need to be provided – it cannot be used to have someone hospitalized.
- A person cannot falsely petition the court
- Dr. Roger Peele Chief Psychiatrists for Behavioral Health and Crisis Services came to also discuss AOT. Dr. Peele was involved with AOT since 1952 and was part of St. Elizabeth’s hospital in DC.

II. **Meeting Minutes** from April cannot be voted on as there is no quorum

III. **Chair Report** – Jennifer Jones

- Spring Forum- Diane reported that there were 93 people in attendance at the Spring Forum in May. Spring forum committee having teleconference in two weeks to discuss how event went and any feedback for next years event
- Nomination Committee – Diane reported that we are about to get resumes of interested persons to be on the Mental Health advisory committee in the next few weeks. Asked for volunteers to do interviews, Amy Sutter, Susan Smith, Jennifer Jones and Garrett Mannchen all agreed to do interviews
- County Council – Jennifer reported that she along with Celia Serkin, Amy Sutter and Garrett Mannchen all met with HHS committee of the Council. Craig Rice stated STEER was already funded. Sydney Katz is in favor of a Restoration center and his chief of staff visited a Restoration Center in Texas
- July meeting – it was discussed that Commissioners would like to have Dr. Crowel come and speak about upcoming budget issues for BHCS. This will assist the Council in coming up with their budget priorities this September in time

for the Fall meeting with the Health and Human Services committee of the County Council. Diane will contact Dr. Crowel

- No meeting in August

**IV. Subcommittee reports –**

- AOT committee's report was the presentation from Frankie Berger.
- Access to Care committee – Chair Kevin Bryant not in attendance
- Legislative committee – Both Co-chairs Kiki Li and Tami Mark not in attendance

**V. Springfield Hospital –** Debbie Phillips reported hospital is filled to capacity. They have a lot of patients with dementia

**VI. Announcements –** Rita Deng, Healthy Montgomery reported there will be two presentations on Envisioning equity in Montgomery County. One is in September and the 2<sup>nd</sup> one is in October. Rita will send Diane an email and it will be forwarded to the Council

**VII. Meeting Adjourned 9pm**