

# Mental Health Advisory Committee

Final Minutes – June 4, 2020

| Members Present          | Members Absent      | Ex-Officio and Staff Present | Ex-Officio and Staff Absent | Guests            |
|--------------------------|---------------------|------------------------------|-----------------------------|-------------------|
| Ziva Azhdam              | Jeannette Bjorklund | Whitney Mardosa              |                             | Jessica Kronstadt |
|                          |                     | Meredith Peace               | Teresa Bennett              | Samikshya Sapkota |
| Michelle Grigsby-Hackett |                     |                              |                             | Allison Palladino |
| Jennifer Grinnell        | Jennifer Jones      |                              |                             | Lt Shanks         |
| Jamie Gu                 | Elizabeth Rathbone  |                              |                             |                   |
| Helga Luest              | Amy Sutter          |                              |                             |                   |
| Garrett Mannchen         |                     |                              |                             |                   |
| Tami Mark                |                     |                              |                             |                   |
| Libby Nealis             |                     |                              |                             |                   |
| Celia Serkin             |                     |                              |                             |                   |
| Susan Smith              |                     |                              |                             |                   |
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- I. Welcome - The meeting came to order at 7:05 p.m. Members were asked to announce themselves and put their microphones on mute unless speaking.
- II. Speaker Allison Palladino, Director and her partner Lt. Shanks- **Baltimore Crisis center** to provide an overview of the model, some data on the number of calls, hospital diversions, connections to treatment, etc., and lessons learned.
  - a. An overview of the Baltimore Crisis center. The Crisis center is a one stop shop and houses many services which include a warmline, Crisis hotline, Urgent care – which is a 12 hour a day assessment for Mental health, they can provide psychiatrists, transportation vouchers, in-home intervention teams, Short term therapeutic intervention services, assistance with short term food and shelter services, Stabilization program for children in foster care, Kinship care and or family placement to avoid disruption in current placement, CIT training for Police department.
  - b. All staff are trained to diffuse community emergencies and traumatic events.
  - c. The Mobile crisis team has three team shifts that cover an entire 24- hour day and each team is staffed with a police officer who is trained in dealing with Mental Health crisis situations. Officers are there to protect the clinicians. They go into the situation first to secure the premises so that the clinician can come into the room. Police who work with these teams are screened for Mental health, language skills and college degrees majoring in communications, psychology, or related majors. The police have a competitive hiring process for the mobile crisis teams. Sometimes the police will handcuff clients, but they try their hardest to avoid that situation and only use when necessary.
  - d. Police have a hostage negotiating team that works directly with the crisis center clinicians to divert people from the criminal justice system. They have a 65-70 percent diversion rate.
  - e. Police write a report for every situation they are involved with so that if another situation arises with the same people, they can access that information and can tailor their response accordingly.
  - f. They have an I hit team which is available to assess any population and can meet clients in their home or in the community.
  - g. They do not have statistics for undocumented immigrants
  - h. They average about 240 calls a month.
  - i. Financing comes from many different sources which include, State, County and Federal.
- II. Old Business – May meeting minutes were voted on and unanimously approved
- III. New Business
  - a. Spring Forum – Diane reported that she had met with the Spring forum committee and that the Spring Forum was going to be held virtually sometime in October. The date has not been set yet but will let Committee members know as soon as she can when the date is settled.
  - b. Celia reported that the Local Behavioral Health Authority had met with County providers to discuss a Crisis now proposal. Providers were asked to submit any suggestions by June 19<sup>th</sup>. Bill HB1092 is a three-year grant to increase the Crisis services in the County.
- IV. Updates on how the Covid Virus is affecting different Mental Health services.

- a. Jennifer Grinnell, Representative EveryMind – Jennifer reported that EveryMind has have been continuing to double volunteers on Hotline shifts. The calls into the hotline have stabilized. Their Homeless services have been providing street outreach and food distribution. EveryMind has been providing phone calls instead of home visits to all their friendly visitor clients – this is a program for the elderly. Jennifer stated that the anxiety level for the elderly is very high, and staff have made sure that each of their clients have food and medication. Staff and volunteers have had hard time connecting with the elderly because they have difficulty with technology and so they have been contacting them several times a day by phone. Volunteers are still not comfortable in doing home visits with the elderly. Jennifer is sitting on many committees that are working to open Montgomery County safely, this is especially difficult with the homeless community.
  - b. Meredith Peace, Representative Crisis Center – Mobile Crisis teams are now able to go into the shelters to respond to critical incidents. There has been an uptick in calls regarding suicide, overdoses, and accidents on the road. The calls regarding suicide is the same number they had last April. There has not been an uptick in Adults and Youth completing suicide. In Phase II, the Crisis center will open their residential services which are short term. Helga asked Meredith for statistics regarding suicide as the Suicide Prevention committee needs to have that information.
  - c. Michelle Grigsby, Affiliated Sante – Outpatient Clinic PRP program services are using telehealth. Nurse are still giving injections for medications for clients. Services are constantly re-evaluating what they can and cannot do.
  - d. Susan Smith, Homeless services representative – HOC got funds from HUD to receive additional vouchers for housing. There is a waitlist and if you are 18 years old and over you should apply for a voucher if you are homeless.
  - e. Teresa Bennett – Outpatient Mental Health is using telehealth for seeing clients. Behavioral Health and Crisis services are working to re-open services safely.
- V. Subcommittee updates
- a. Mental Health Parity – Jeannette sent out an email with updates.
  - b. Mobile Crisis team subcommittee – Meredith reported that the Crisis center now has enough PPE and are reusing N95 masks when necessary.
  - c. Suicide Prevention subcommittee – Helga reported that the subcommittee met, and a letter was drafted up regarding concerns about suicide and the elderly. This is a letter that will be signed off on jointly by the Commission on Aging and the MHAC. The subcommittee is reviewing the letter and will finalize at their next meeting. They will then forward to Commission on Aging. This letter will be sent to the County Executive and the County Council. Helga discussed that the MHAC should be drafting a press release regarding the recent racial tensions which would include resources for people to have in case they need them. Diane stated that she would contact the appropriate people to find out if that would be possible and how to make it happen. Diane will let Garrett and Helga know as soon as possible as this is a timely matter.
- VI. Announcements from the Members or the Public – Samikshya Sapkota, Asian Health initiative reported that they had recently done several PSA's on mental health for the Asian community- she will email Diane and Diane will forward to the MHAC
- VII. Meeting adjourned at 8pm.