# VERMONT MENTAL HEALTH BLOCK GRANT PLANNING COUNCIL Minutes

# May 21, 2021 1:00 PM - 3:00 PM Virtual Meeting via Microsoft Teams

Members in Attendance: Michael McAdoo, Alice Maynard, Annie Ramniceanu (DOC), Marla Simpson, Dan Towle (NAMI, PVT), Stephanie Beck (ADAP), Victoria Hudson (DCF), Cinn Smith, Danielle Bragg (DVHA), Caroline Rubin (CVOEO), Michael Hartman (LCMHS), Laurie Emerson (NAMI), Brian Smith (DMH)

**DMH Staff and Guests in Attendance**: Christina Thompson (DMH), Cheryle Wilcox (DMH), Nicole DiStasio (DMH), Stephanie Busch (VDH), Julie Tessler (VCP), Dillon Burns (VCP), Trish Singer (DMH)

# **Convene Meeting, Introductions, Vote on Public Comment:**

- Meeting convened at 1:03 PM
- Reviewed agenda, made introductions
- Annie R. moved to allow public comment throughout the meeting; Michael H. seconded. All in favor and the motion passed.

# **Review April 2021 Meeting Minutes:**

 Michael moved to approve the April meeting minutes; Stephanie Beck seconded. All in favor and the motion passed.

# **Review of COVID Priority Poll Results**

- Voting was open to MHBG Planning Council members
- 10 members responded to the poll
- Top 12 priorities in ranked order
  - 1. Reducing Emergency Departments (ED) as mental health "parking lots"
  - 2. Suicide Prevention
  - 3. DOC pre-custody mental health and screening evaluation/mental health services for people in custody
  - 4. Crisis intervention (e.g., Team 2 training)
  - 5. Funding 9-8-8 (National Suicide Prevention Lifeline)
  - o 6. Children's Respite
  - o 7. Mental Health and reducing stigma/discrimination (e.g., PSAs)
  - 8. Housing (vouchers, supported housing, rental assistance)
  - 9. Youth in transition
  - o 10. Resiliency Planning and Training
  - o 11. Peer Services
  - 12.Services for Children struggling with remote learning
- PC would like to see raw data from the polls.
  - Nicole will send poll raw data to the PC.
- Question from member of the public about who was able to vote on priorities and if workforce development was on the list.

- MHBG Planning Council members were asked to vote.
- o Workforce development was included on the list of priorities to vote on.
- PC would like to have a list of top 12 priorities.
- Next steps:
  - List top 12 priority recommendations
  - Bring list of priorities to state team
  - Request proposals from state team addressing priority recommendations and aligning with Vision 2030 goals.

# **Funding Updates**:

- CDC Suicide Prevention Grant overview from Stephanie Busch of the VT Department of Health (VDH)
- \$3.8 million over 5 years
- This grant will take a data driven approach to suicide prevention and raise awareness of suicide prevention work that is already being done.
- Focus is on comprehensive public health approach and enhancing infrastructure.
- Goals of grant:
  - Develop a coordinated statewide prevention effort with state partners and communities.
  - o Utilize data analysis to identify vulnerable populations and serve them better.
  - o Ensure access for underserved populations with a focus on health equity.
  - Expand Zero Suicide activities to rural VT counties and engage Community Health Teams.
  - Facilitate Gatekeepers trainings, which helps to ensure we are supporting LGBTQ+ community with appropriate resources, especially youth.
  - Expand recovery and peer support groups, including for first responders.
    - "Peer" in this context is being used to refer to people within the population of mental health professionals or first responders.
- How this grant is approaching the work:
  - Inventory assessment of key partnerships in the state
  - Advisory groups
  - Looking at how information is being communicated and disseminated and what are next steps.
  - o Forming an advisory group to guide this work.
  - This grant will support three positions Data and Outreach Coordinator (split with DMH), Data Analyst, and Program Coordinator
- The nine recipients of this CDC grant are:
  - o California Department of Public Health
  - Colorado Department of Public Health and Environment
  - Connecticut Department of Public Health
  - Massachusetts Department of Public Health
  - Michigan Department of Health and Human Services
  - North Carolina Department of Health and Human Services
  - Tennessee Department of Health
  - University of Pittsburgh
  - Vermont Department of Health
- Question from PC if this grant will be able to consider adults boarding in the ED, as well.

- Stephanie expects there will be capacity in this grant to address adults in the ED as well.
- Marla- grant name suggestion: VTSAFE (Vital Time: Suicide Awareness for Everyone)
- Stephanie contact info: <a href="mailto:stephanie.busch@vermont.gov">stephanie.busch@vermont.gov</a>
- Stephanie provided the following links:
  - o Injury Surveillance in VT
  - o Trends in ED Visits for Suicidal Ideation
  - o Trends in Intentional Self-Harm and Suicide

# **DOC Funding Proposal Overview**

- Annie Ramniceanu of the Department of Corrections (DOC) provided an overview of mental health/DOC proposals being discussed at the state.
- The majority of Vermonters being supervised by the DOC are in the community and not in a facility. Once ordered by the court to Probation, DOC often knows very little about their comorbidities and social determinants and works with the DA's and other community providers to address these needs.
- DOC will be rolling out evidence-based training targeted at Designated Agencies (DAs) to enhance criminal justice understanding and capability to raise awareness of intersection of mental health and criminal justice system.
  - After trainings are completed, DAs and DOC will assess how they can operationalize the trainings to improve population outcomes.
- DOC is developing a pilot program at Burlington P & P to address the needs of Complex individuals who experience difficulty regulating interpersonal relationships and who are on furlough (in the community). Outcomes will include reduction in technical violations, new charges, returns to incarceration and improvement in whole health and social determinants. They will be supported with EBP Clinical Treatment and intensive Case Management alongside with Clinical Risk Supervision. Treatment will be co-occurring, include treatment for complex trauma, and also address social determinants.
   Overarching framework being considered is FACT- Forensic Assertive Community Care Team.

#### **Vision 2030 Implementation**

- Implementation of Vision 2030 will occur through the Mental Health Integration Council
- July 2021 is the targeted kick off for the council.
  - Kathy Hentcy is lead. Reach out to <u>Kathy.Hentcy@vermont.gov</u> with questions and/or feedback.

## Follow ups and Updates:

- Nicole provided links of recordings of trainings funded by the MHBG:
  - Outright VT Provider Trainings and Resources
  - Copeland Microaggressions Trainings
    - video
    - video
    - video
- DMH received a notice of award for \$2.4 million of American Rescue Plan Act (ARPA) last week. Funds will be funneled through the MHBG.
- DMH has not received an update about if we will receive TA Supplemental funds this year.

- Nicole is working on a MHBG 101 Training general overview, funding restrictions, and onboarding orientation.
  - PC members noted that a previous training was put together by a SAMHSA representative years ago. Marla will provide a copy of the training materials to Nicole and Christina.

# Adjournment:

Alice moved to adjourn; Laurie seconded the motion. All members voted in favor of adjourning. The motion carried and the meeting adjourned at 3:00 PM.

## **Action Items:**

- ✓ Nicole will send COVID Priorities Poll raw data to MHBG Planning Council.
- ✓ Nicole and Christina will bring COVID Funding Priority Recommendations to state team and request proposals based on priority recommendations and alignment with Vision 2030.
- ✓ Marla will provide a copy of previously developed MHBG training materials to Nicole and Christina.

Conference ID: 506 092 440#

Next Meeting: June 18, 2021

Location: Microsoft Teams meeting Call-in Number: +1 802-828-7667

Click here to join the meeting