

State of Vermont

Department of Mental Health 280 State Drive, NOB 2 North Waterbury, VT 05671-2010 http://mentalhealth.vermont.gov/ Agency of Human Services

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2/14/2022

Adult State Program Standing Committee Draft Agenda

Microsoft Teams Meeting Link

Call in Number: <u>+1 802-828-7667</u> Conference ID: 268 652 786#

12:30 - 2:00	SPSC	Standing Items
	Business	 Introductions & Review agenda
(Break as needed)		 Vote on public comment participation today
		 Vote on January minutes
		February Priority Item
		 LPSCs: Discuss August Public Comment – included on last
		page of agenda—Dillon Burns visiting, Mental Health
		Services Director, Vermont Care Partners
		 Update on Older Vermonters Working Group (Lynne)
		O Have an AMH SPSC Annual Report?
		o Process for reviewing public comments that come in over
		email to DMH to share with this committee
		 Subcommittee: AMH SPSC process for involvement in agency
		designation-(if there is an update)
2:00 2:30	Request for Proposal Structure Feedback: On Improving person-centered services in HCBS (Community Rehabilitation and Treatment) programs led by Dylan Frazer, Deputy Director of Medicaid Policy	
2:30 – 3:00	DMH Leadership Update (15 minutes each) Nick Nichols, Substance Abuse Program Manager: Suicide Prevention Update Brian Smith, Housing Update	
3:00 – 3:10 3:10 - 3:30	Public Comment March Draft Agenda	

March Draft Agenda

12:30-2:30 Opening & Committee Business

2:30-3:00 DMH Leadership Update

3:00-3:10 Public Comment

3:10-3:30 Plan April Agenda



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Potential topics:

- African music and mental health
- Virginia Peer Support Legislation

AMH SPSC Top Ten Priorities 2021

1. Housing



2. Reducing Emergency Departments as mental health "parking lots"



3. Law enforcement response during a mental health crisis



4. Suicide Prevention



5. Crisis / drop in centers



6. Normalize recovery, reduce stigma/discrimination



7. Normalize and expand peer work



8. Expand soteria model



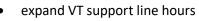
9. Reduce isolation and increase health relationships



Meeting Norms (Expectations):

- Speak kindness
- Listen to understand
- Assume positive intentions
- Be accountable
- ELMO! (Enough Let's Move On)
- Take space, leave space
- Mind the empty chair

10. Other crisis interventions:





increase crisis intervention trainings



Not Included (yet):

- Reducing coercion
- Meaningful oversight of MH system

Pubic comment from August:

Public: Standing committee membership from Vermont Care Partners- can be very challenging to find people to join the committee. Can feel almost exploitive to get people to join the groups. Wonder if there is a different model for having peer/family input into services. This format was developed before survey monkey and other things were accessible. Would be interesting to have the conversation with agencies- what would a 21st century model for voice look like? Especially for parents who are supporting youth with mental health needs- they are so focused on advocacy for their kid attending a meeting too is challenging.

SPSC members agreed that standing committee model can be unintentionally tokenizing. One alternate option could be regular listening sessions/town halls/forums



April - Review Aggregate G&A

May - Review documents for NKHS Re-designation

Current Facilitator:

Kate? (Feb-Apr 22)

Previous Facilitators:

Christopher (Nov-Jan 22)
Marla (Aug-Oct 2021)
Lynne (May-July 2021)
Marla (Feb-Apr 2021)
Kate (Nov 20-Jan 21)
Malaika (Oct 2020)
Marla (Sept 2020)
Malaika (Jun-Aug 20)
Dan (April-May 2020)
Marla (Jan-Mar 2020)
Dan (Nov-Dec 19)
Marla (Oct 19)

