

This meeting was not recorded. Five members are needed for a quorum.

8/14/2023

Adult State Program Standing Committee Minutes

DRAFT

Present Members: Bruce Wilson Marla Simpson (she/they) Dan Towle (he/him) (excu) Lynne Cardozo Zach Hughes (he/him)
 Christopher Rotsettis (he/him) Ann Cooper (she/her) Michael McAdoo

DMH/State Staff: Eva Dayon (they/them) Lauren Welch (she/her) Trish Singer Katie Smith (she/her) Chris Allen Karen Barber

Public: Jessica Kantatan (she/her) Anne Donahue

Agenda

- 12:30 SPSC Business: Introductions and Review Agenda, Statement on public comment, Vote on minutes
- 12:45 Leadership Update: Admin Rules with Karen Barber
- 1:15 Leadership Update: 988 and Strategic Plan with Chris Allen
- 2:00 BREAK
- 2:10 Public Comment
- 2:15 Closing meeting business and planning next meeting agenda.

Agenda Item	Discussion (follow up items in yellow) Facilitator: Timekeeper: n/a
Opening	Meeting convened at 12:35pm. Quorum was not met.
Leadership Update: Admin Rules Update	Karen Barber, DMH General Counsel <ul style="list-style-type: none">• Act 27: Requires DMH to amend rules (written in 1999) for involuntary medical procedures to be given at a forensic in-patient facility. Governs when and how DMH can use non-emergency involuntary meds when under a court order.• Updates include new language (DDMHS - DMH, they/them), adds a forensic facility to the list of places where involuntary meds can be given (in addition to designated hospitals and correctional facilities)• No changes have been made to the rule that were not ordered by the legislature. No procedural rights were changed.• September 1st deadline to meet legislative requirements. Give until Friday, August 18 to give comments. Send comments to karen.barber@vermont.gov• Sent reminder to the committee with a deadline to give to me to summarize before Friday.

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<p>AMH SPSC Business</p>	<ul style="list-style-type: none"> • Discuss: Should there be an annual report? <ul style="list-style-type: none"> ○ Seems like a lot of work to make it a quality project. ○ Redundant to the meeting minutes. ○ Members present did not support an annual report but may support a one-or-two-page summary of the fiscal year meetings to include for recruitment. • Notice: Listening sessions for Home and Community Based Services Conflict Free Case Management <ul style="list-style-type: none"> ○ Past: <ul style="list-style-type: none"> ▪ August 11: COI Options and Public Comment Forms posted to vermonthcbs.org ▪ August 14, 1-2pm: Webinar: Exploring the COI Options and Providing Feedback ○ Upcoming: <ul style="list-style-type: none"> ▪ August 11 – September 15: Public Input period ▪ September 11-13: Town Hall Forums (in-person, hybrid)
<p>Leadership Update: 988 and Strategic Plan</p>	<p>Chris Allen, DMH Director of Suicide Prevention</p> <ul style="list-style-type: none"> • Check which age groups were most effected by suicide in the past years? <ul style="list-style-type: none"> ○ Injury Data Vermont Department of Health (healthvermont.gov) • Request that age group and more current data be included in future versions of this presentation. <ul style="list-style-type: none"> ○ Potentially ask Caitlin Quinn from VDH to attend and share more nuanced data and report on data linkage project • While we know that natural disasters affect mental health, we do not have an easy way to access real-time data on causes of suicide. There isn't an easy way to measure the collective grief experienced by communities affected by flooding. <ul style="list-style-type: none"> ○ 988 call volume data for July 2023 is still pending, but there was a slight increase in calls following Commissioner Hawes's promotion of 988 during the Governor's press conference on the flooding. ○ Note that the Vermont Support warmline, offered by Pathways, is an additional 24/7 resource • As of August 4th, Vermont has 24/7 instate coverage for 988 calls, texts, and chats • Vermont maintains 80% answer rate for calls to 988 <ul style="list-style-type: none"> ○ Remaining 20% rolls over to national answering centers with a 100% response rate. ○ Calls answered out-of-state sometimes get a warm handoff back to Vermont when possible to seek local resources • How do people hear about 988? <ul style="list-style-type: none"> ○ Promotional campaigns, such as the holiday campaign ○ DMH has access to some interaction data such as number of times certain ads are shown via Front Porch Forum and Google Display ads

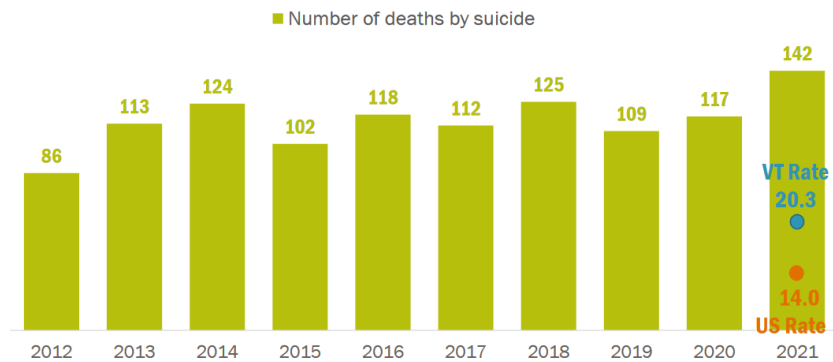
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	<ul style="list-style-type: none">○ Developing a communications plan to continue promoting 988○ Comment from committee member that hospitals, colleges, libraries, local public radio should be leveraged as places for advertisement○ Developing recognizable branding and slogan? How can Vermont make 988 cool? “You’re not alone. It’s ok to not be ok.” Thank you, Noah Kahan<ul style="list-style-type: none">▪ Include people with lived experience in addition to graphic design and accessibility when developing the branding● Act 56: asks DMH to develop a strategic plan for suicide prevention. The plan will be finalized by July 1, 2024.● Participate: upcoming State Coalition meeting on Thursday, September 7, 2023.
Public Comment	No members of the public attended
Closing Meeting Business	Agenda for next meeting (Sept 11, 2023) Meeting adjourned 2:03PM.

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Welcome!

Chris Allen, LICSW



Rates are age adjusted to the 2000 population
*Vermont's rate in 2021 is significantly higher than the US.
Source: Vermont Vital Statistics, 2005-2021. ^2021 data are preliminary.

Vermont Department of Health

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988 Vision

988 offers 24/7 access to trained crisis counselors who can help people experiencing mental health-related distress, thoughts of suicide, mental health or substance use crisis, or any other kind of emotion distress.

People can call or text 988 or chat at 988lifeline.org for themselves or if they are worried about a loved one.

The long-term vision for 988 is to build a robust crisis care response system across the country that links callers to community-based providers who can deliver a full range of crisis care services.

988 Suicide & Crisis Lifeline

- + Vermont has built 24/7 instate coverage for 988 call, text, and chat response
- + Two Lifeline Centers (NCSS and NKHS, Headrest is the backup center)
- + Since the launch (July 2022, Vermont has seen a significant increase in call volume, and maintained an answer rate over 80%.



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988 by the Numbers

988

	April 2023			May 2023			June 2023		
	Calls	Chats	Texts	Calls	Chats	Texts	Calls	Chats	Texts
RECEIVED	710	4	4	825	27	38	651	262	54
ANSWERED	530	4	3	638	7	6	520	47	11
ANSWER RATE	75%	100%	75%	77%	26%	16%	80%	18%	20%

Comprehensive Suicide Prevention (CSP) Grant: Overview

- 5-year Grant from Center for Disease Control and Prevention: September 2020 – August 2025
- Support 10% decrease in morbidity and mortality among Vermonters Ages 15 – 64
- Expand prevention to focus populations
LGBTQ+, Rural, Men, Living with Disabilities
- Support suicide prevention broadly across community programs, employers, healthcare, and the general public
- Improve public awareness and access to suicide prevention resources
- Co-managed by the Departments of Health and Mental Health

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CSP Grant Outcomes: 2022

- Active Partnerships with over **80 private and public organizations**
- **100 % of Hospital ED's** Engaged in Suicide Prevention Quality Improvement
281 Hospital ED staff trained in Counseling on Access to Lethal Means
- **212 Professionals trained** in Suicide Awareness and Support
Farmers, First Responders, Pharmacists, Librarians, Community Action, Attorney General
- **1,878,383 clicks, views and engagements** of Facing Suicide Social Media
- **7,565 new visitors** to Facing Suicide VT Website
- **416 Views** of Facing Suicide "Real Stories" of Vermonters Affected by Suicide
- Completion of **Postvention Statewide Assessment and Plan**
- Establishment of **5 Regional Peer Networks for First Responders**
Recruitment and training of 61 First Responder Peers
- **265 MH Clinicians** trained in suicide treatment via telehealth

Vermont Department of Health

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Garrett Lee Smith (GLS) Youth Suicide Prevention Grant

- 5-year Grant from Substance Abuse and Mental Health Services Administration: September 2022 – August 2027
- Reduce suicide deaths and attempts among Vermont youth Ages 10 – 24
- Expand prevention to focus populations
LGBTQA Youth, BIPOC Youth, Child welfare and justice-involved youth
- Support suicide prevention broadly across schools, youth programs (afterschool), mental health and healthcare, child welfare and juvenile justice
- Promote youth mental health and wellness
- Improve supports for Families
- Led by Department of Health in coordination with Department of Mental Health

Vermont Department of Health

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Minutes respectfully submitted by Lauren Welch, DMH Quality Management Coordinator

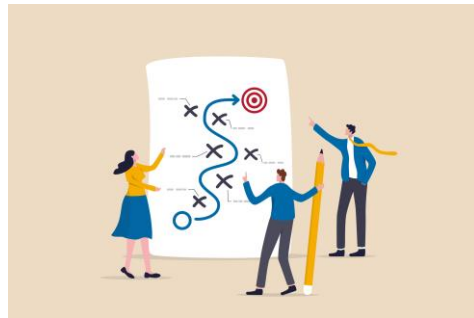
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GLS Grant Activity Updates

- + Zero Suicide Academy and Community of Practice
- + Umatter for Schools series, the first will take place in October. These are open to all schools but promotion for them will be particularly targeted for schools in the four target counties (Chittenden, Bennington, Rutland, and Windham).
- + Youth Mental Health First Aid trainings are continuing to happen across the state
- + Funding new individuals to become trainers for both Youth Mental Health First Aid and Teen Mental Health First Aid.

State Strategic Plan for Suicide Prevention

- + [Act 56 language](#): create a strategic plan for suicide prevention, training, education, and postvention
 - additional asks to develop model protocols for schools and health care settings



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Purpose of a Strategic Plan

- + Coordinate suicide prevention efforts across the state
- + Set the path forward for suicide prevention priorities
- + Aligning goals with strategies and interventions
- + Evaluate the impact over a period
- + Many states have one



How to get involved?

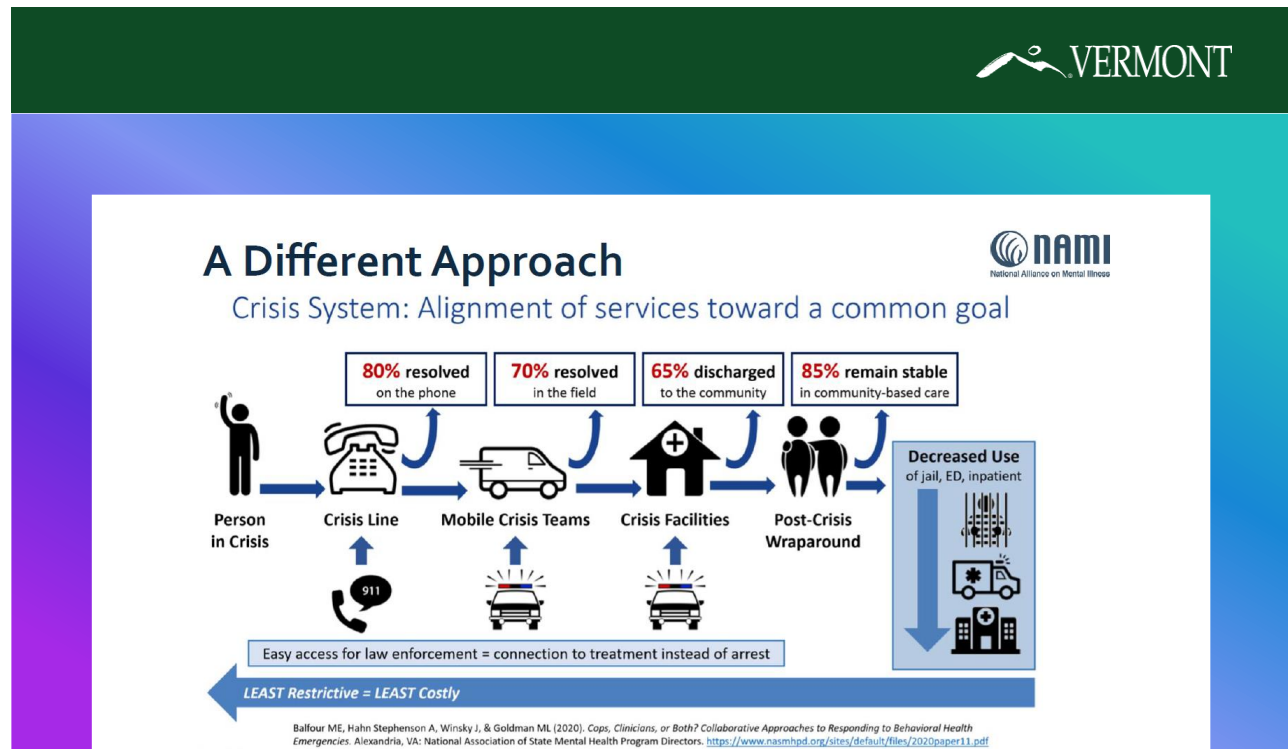
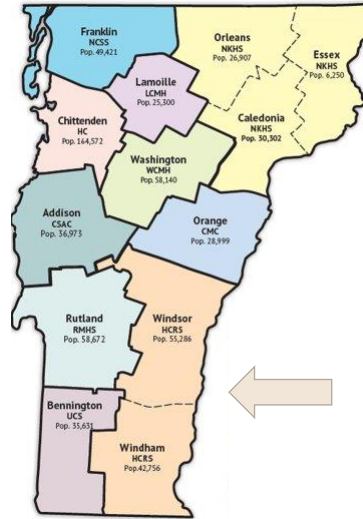
Reach out to
Chris Allen

Participate in
the state
coalition
meetings

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Mobile Crisis Response: Providers

- Contract was awarded to Health Care & Rehabilitation Services (HCRS).
- HCRS will serve as lead agency, subcontracting with all 9 additional Designated Agencies to provide unified statewide community mobile crisis.
- The kickoff meeting occurred on Friday, March 24th, and the team will be meeting weekly to support implementation.
- The Department is currently working with HCRS to finalize the contract.



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How to reach me?

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