



## Quarterly Membership Meeting

June 12, 2015

9:00 to 11:00 am

### Introductions

Based on the number of people attending the meetings now, we need a larger space. Alice asks for suggestions.

### Crisis Intervention Team Training

At the request of Marjorie Matthew and Donna Stamper, we are discussing if/how PHC can promote increased CIT training for law enforcement officials in our region. This falls under our priority of "increasing a caring response to people with behavioral health needs." An overview of CIT training was provided with the agenda.

Lt. Matthew Isham, of Lebanon PD, joined us to discuss his work providing this training: two trainings in past couple of years, 17 officers trained, 50% of Lebanon officers trained. He works with WCBH, Pathways, WISE, VA, Halls of Hope, and others to help in training. Training is 40 hours and is best done all together across one week.

Training focuses on identification of a mental health crisis, de-escalation, and diversion to an appropriate resource. Purpose is to get people treatment, rather than into criminal justice system. Ideally any PD would have 25% to 30% of force trained.

Challenges include the need to pay overtime to cover officers in training; the fact that we have one trainer in the region who has other duties.

Case to bring departments on board can include impact on use of force and officer injury reports.

Chief Dennis of Hanover, Chief Kasten of Hartford, and Dep. Chief Roberts of Hartford attended and support the training program.

Peter Wright (Valley Regional Hospital) suggested connecting with NH DHHS on 1115 Transformation Waiver as potential source of funds for program. Alice to contact.

Group suggested we take a systemic view for the larger region:

- If smaller towns cannot send officers to training, what can be done to share the resource/knowledge with them?
- Begin looking for data in terms of costs, outcomes, ED admissions, and PD reports to build the case.
- Could retired officers become trainers?

Alice to continue working with Marjorie and Donna to move this forward.

*Health Effects of Climate Change Plan Development (CHIP Topic)*

Goal of discussion is to select vulnerable population and health outcome priorities for our region as part of developing a regional plan to address the health effects of severe weather events. This is a brainstorming session, which the team developing this plan will use to focus our work. That team includes: Greg Norman, Nate Miller, Mike McCrory, Wes Miller, Ann Duncan Cooley, and Alice Ely.

Vulnerable Populations:

- Older Adults (>85 and/or homebound)
- People living in large apartment buildings
- People living in group quarters
- Youth (at home without parental supervision, “latch-key”)
- Heating for lower-income populations (wood heat, safety of systems)
- Geographic vulnerability (wells, septic systems, especially in flood plains)
- People with daily health regimens like medications, oxygen, dialysis.

Health Outcomes:

- Injury
- Air Quality
- Isolation
- Asthma
- safety and air quality
- water quality
  - from contamination (bacteria, chemical, Rx medication)
  - infant formula preparation

Other Thoughts/Comments:

- Do we have data for larger city events for people with severe mental illness and associated negative outcomes?
- Generator sharing programs;
- Disaster preparedness team meetings to improve inter-agency, inter-group collaboration (EPA grant pending for UVLSRPC);
- Flood insurance issues/recovery barriers (people without flood insurance because they do not live in flood plains)
- Power outages: every year someone dies from having a generator indoors.

*Continuum of Care (Aurora Drew): Recovery Supports*

Aurora is hosting two focus groups on June 18 and 19. She welcomes more participants.

Lisa shares story of path to recovery and the kinds of services that helped her. Mark Helijas, Secondwind Foundation, discussed Turning Point, the recovery community center that has developed in WRJ, and spread to communities across Vermont. Turning Point is an inexpensive, peer-to-peer model. They also run Willow Grove, a transitional housing facility for women.

The goal is recovery, not simply treatment, and needed services often include housing, family and relationship recovery work, employment support, financial counseling, etc.

Challenges include: finding more “recovery-friendly employers and dual diagnosed populations.  
Data Briefs (Emma Hartswick and Alice)

*Suicide Data Brief Draft:*

Group reviewed draft provided with agenda. Feedback included:

- Headrest runs crisis hotline and will have data to share.
- Can we include an “ask,” what we want people to do with this information? When we have a CHIP for suicide prevention, this can go on the back with an “ask.”
- Can post this on ALLTogether website and link to resources and activities with hyperlinks in the document.
- Try to add some charts or graphs to make it more visually engaging; look for data outliers to find good data to show.

*Falls Data Brief Draft:*

- Similar comments as above.

Next Meeting

August 21<sup>st</sup>, 9 to 11 am. Need new location. Chief Kasten offered training room at Hartford PD; Alice to check on availability.

September 18<sup>th</sup> meeting will be a 3-hour meeting to allow us to review CHIP work prior to September 30<sup>th</sup> deadline.