

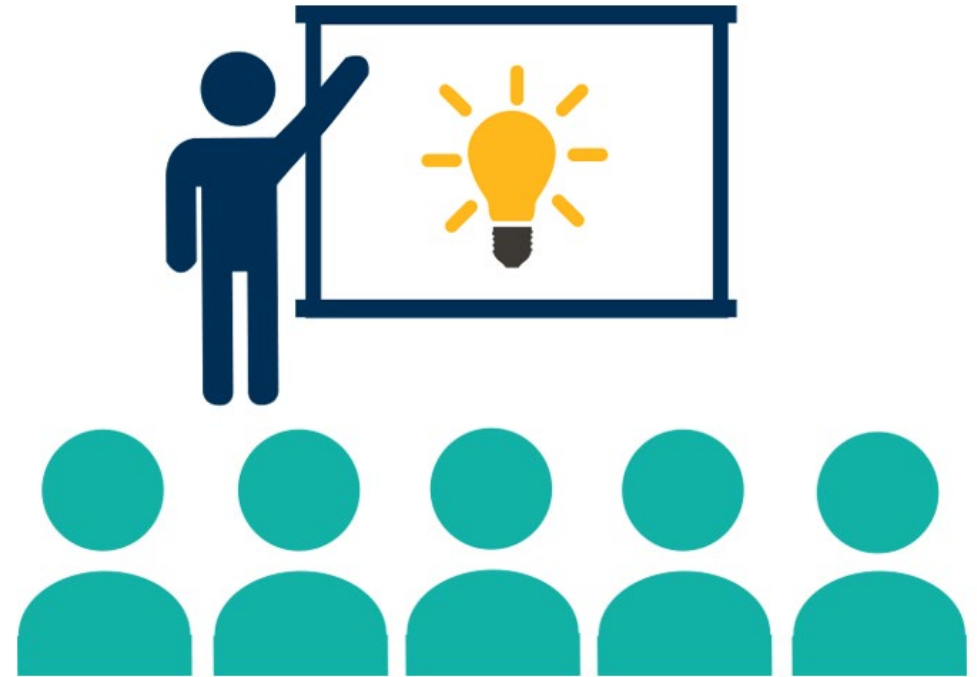


Coordinating Mental Health Response Guidelines

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Training Landscape in the Mental Health Crisis Continuum

- **988 Services:** Training focuses on crisis conversation via chat and text, including Applied Suicide Intervention Skills Training (ASIST) and Crisis Counseling.
- **Mobile Crisis Teams:** Emphasis on substance use, mental health, de-escalation, trauma-informed care, harm reduction, linkage to 988 services, and cultural competency.



Standardization in the Mental Health Crisis Continuum

- For over two years, the Department of Mental Health (DMH) has been spearheading the expansion of a Statewide Mental Health Crisis System of Care, including:
 - 988
 - Enhanced Mobile Crisis
 - Alternative to Emergency Departments (EDs)
- DMH aims to coordinate the efforts of 988, Mobile Crisis Teams, Alternatives to EDs, and First Responders through standardized training, crafted by mental health experts, to equip all responders with the knowledge and skills necessary to address mental health emergencies confidently, effectively, and compassionately.

Unified Yet Tailored Training Approach

Sample of Potential Key Training Areas for First Responders:

- Understanding mental health and substance use interfaces.
- In-depth overview of the mental health crisis system of care, including 988, mobile crisis teams, and ED alternatives.
- Trauma-Informed Care emphasizing patient engagement and personalized care strategies.
- Harm Reduction strategies, including overdose education and substance use disorder referrals.
- "Creating Safe Scenes" training for safer interventions during mental health crises.

In Summary

Benefits of Standardized Guidelines:

- Enhanced coordination across services leading to more effective crisis responses.
- Improved outcomes in the crisis continuum through integrated, knowledgeable, and sensitive care.

Recommendation:

- Recognizing the unique community roles of 988 services, mobile crisis teams, and first responders, DMH is advocating for a cohesive yet role-specific training approach. Legislative language should strive towards standardization, while also allowing for the flexibility to consider the needs of various types of providers working in the crisis continuum.

Thank you!

Emergency Medical Services (EMS) Protocol Development

- EMS protocol development is a collaborative effort
 - Guided by the state EMS physician medical director
 - Development and revisions include active engagement with EMS providers, health care systems, public safety, and others
 - Based upon national standards and evidence-based medicine
 - Revised every two to three years
- The Health Department is solely responsible for developing, maintaining, and updating statewide EMS protocols.
- More than one state entity issuing EMS protocols would create confusion and inefficiencies, leaving EMS professional to question who has clinical oversight authority.






MENTAL HEALTH SYSTEM OF CARE

Key to Provider Symbols


- BLUE: ADULTS SYSTEM OF CARE
- GREEN: CHILD, YOUTH & FAMILY SYSTEM OF CARE
- ORANGE: SERVICES IN BOTH YOUTH & ADULTS

-  Peer-run Services & Residential Care
-  Department of Mental Health
-  Designated and Specialized Services Agencies
-  Private Providers

Inpatient Hospitalization
229 total beds

<p>Children & Adolescent 1 Facility 30 Beds</p> 	<p>General Inpatient (Adult) 7 Facilities 142 Beds</p> 	<p>Level One Inpatient (Adult) 3 Facilities 57 Beds</p> 
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Secure Residential
16 total beds

<p>River Valley 1 Facility 16 Beds</p> 
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Intensive Residential & Treatment Programs
92 total beds

<p>Youth Residential (PNMI) 5 Residences 45 Beds</p> 	<p>Intensive Recovery Residential 5 Residences 42 Beds</p> 	<p>Peer-run Residential 1 Residence 5 Beds</p> 
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Crisis Supports & Response
56 total beds

<p>Children's Crisis Stabilization Program 1 Facility 6 Beds</p> 	<p>Youth Hospital Diversion Program 2 Facilities 12 Beds</p> 	<p>Mental Health Urgent Care for youth</p> 	<p>Mental Health Urgent Care for Adults</p> 	<p>Adult Crisis Beds 12 Facilities 38 Beds</p> 	<p>Crisis Assessment, Support & Referral Continuing Education & Advocacy</p> 	<p>988 Crisis Lifeline Centers & Mobile Crisis Response</p> 
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Community Mental Health
174 total beds/109 vouchers

<p>Micro-residential (HCBS) 3 Homes 9 Beds</p> 	<p>Youth Group Homes (PNMI) 4 Homes 13 Beds</p> 	<p>Group Residential Homes 19 Homes 152 Beds</p> 	<p>Shelter & Care Vouchers DMH Housing Vouchers</p> 	<ul style="list-style-type: none"> • Individual, family, and group therapy • Clinical assessment • Medical consultation and medication • Service planning and coordination • Community supports & employment services • Schools/PCP/Early care & learning ctrs (youth only) • Peer programming (adults only) • Prevention work (youth only) 
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