

1 S.197

2 Introduced by Senator Lyons

3 Referred to Committee on Health and Welfare

4 Date: January 5, 2022

5 Subject: Health; mental health; crisis response

6 Statement of purpose of bill as introduced: This bill proposes to establish the

7 Coordinated Mental Health Crisis Response Working Group.

8 ~~An act relating to the Coordinated Mental Health Crisis Response Working~~
9 ~~Group~~

An act relating to the provision of mental health supports

10 It is hereby enacted by the General Assembly of the State of Vermont:

11 ~~Sec. 1. COORDINATED MENTAL HEALTH CRISIS RESPONSE~~

12 ~~WORKING GROUP~~

13 ~~(a) Creation. There is created the Coordinated Mental Health Crisis~~
14 ~~Response Working Group for the purpose of developing and articulating a~~
15 ~~predictable and coordinated system of response to mental health crises among~~
16 ~~law enforcement, emergency medical service providers, emergency~~
17 ~~departments, health care providers, and community mental health service~~
18 ~~providers.~~

19 ~~(b) Membership. The Working Group shall be composed of the following~~
20 ~~members.~~

1 ~~(1) the Commissioner of Mental Health or designee, who shall serve as~~

2 Chair;

3 ~~(2) the Commissioner of Public Safety or designee;~~

4 ~~(3) the Director of the Office of Emergency Medical Services or~~

5 designee;

6 ~~(4) the Chief Superior Judge;~~

7 ~~(5) a representative of hospital emergency departments, appointed by~~

8 the Vermont Association of Hospitals and Health Systems;

9 ~~(6) a representative of designated and specialized service agencies,~~

10 appointed by Vermont Care Partners;

11 ~~(7) an individual who has previously experienced a mental health crisis,~~

12 appointed by Vermont Psychiatric Survivors; and

13 ~~(8) the family member of an individual who has previously experienced~~

14 a mental health crisis, appointed by the Vermont chapter of the National

15 Alliance on Mental Illness.

16 ~~(c) Powers and duties. The Working Group shall explore the existing~~

17 response to mental health crises in Vermont and develop a predictable,

18 coordinated response plan across public safety and health care sectors. The

19 Working Group shall determine a process for:

20 ~~(1) educating individuals who respond to mental health crises about the~~

21 plan developed pursuant to this subsection,

1 ~~(2) communicating with the public regarding the best way to access~~
2 ~~mental health crisis services; and~~

3 ~~(3) ensuring individuals experiencing a mental health crisis are~~
4 ~~connected to therapeutic services in a safe environment once the initial~~
5 ~~response has concluded.~~

6 ~~(d) Assistance. The Working Group shall have the administrative,~~
7 ~~technical, and legal assistance of the Department of Mental Health.~~

8 ~~(e) Report. On or before December 1, 2022, the Working Group shall~~
9 ~~submit a written report to the House Committee on Health Care and the Senate~~
10 ~~Committee on Health and Welfare with its findings and any recommendations~~
11 ~~for legislative action.~~

12 ~~(f) Meetings.~~

13 ~~(1) The Commissioner of Mental Health or designee shall call the first~~
14 ~~meeting of the Working Group to occur on or before August 1, 2022.~~

15 ~~(2) A majority of the membership shall constitute a quorum.~~

16 ~~(3) The Working Group shall cease to exist on December 1, 2022.~~

17 ~~(g) Compensation and reimbursement. Members of the Working Group~~
18 ~~shall be entitled to per diem compensation and reimbursement of expenses as~~
19 ~~permitted under 32 V.S.A. § 1010 for not more than four meetings. These~~
20 ~~payments shall be made from monies appropriated to the Department of~~
21 ~~Mental Health~~

1 ~~Sec. 2. EFFECTIVE DATE~~

2 ~~This act shall take effect on July 1, 2022.~~

** * * Mental Health Crisis Response Inventory * * **

Sec. 1. INVENTORY OF MENTAL HEALTH CRISIS RESPONSE PROGRAMS

On or before January 15, 2023, the Department of Mental Health, in consultation with the Agencies of Education and of Human Services and the Department of Public Safety, shall submit the Mobile Crisis Needs Assessment report required by the Department's federally-funded mobile crisis state planning grant, including the stakeholder engagement summary and the mobile crisis benefit implementation plan, to the House Committee on Health Care and to the Senate Committee on Health and Welfare.

** * * Integrating Mental Health for Educators and Students * * **

Sec. 2. PROVISION OF MENTAL HEALTH AND WELL-BEING SUPPORTS FOR EDUCATORS

In fiscal year 2023, the Agency of Education, in consultation with the Department of Mental Health, shall contract with one or more organizations to provide statewide COVID-19 recovery supports for educators and school staff. The supports shall be provided by mental health clinicians and focused on COVID-19 recovery, including wellness and trauma-responsive school practice supports on a statewide, regional, or supervisory union or supervisory district-specific level as needed.

Sec. 3. GRANTS TO EXPAND MENTAL HEALTH AND WELL-BEING SERVICES TO YOUTH

(a) In fiscal year 2023, the Agency of Education shall work collaboratively with the Department of Mental Health to establish and administer a two-year program utilizing a tiered-support approach to ensure continuous support to children and youth in a variety of settings, including supervisory union and district-wide, in-school, community technical education centers, and afterschool, by providing grants to:

(1) expand existing school-based counseling services in underserved districts of the State; or

(2) develop either school-based or community-based afterschool programs, operating in a variety of settings outside the school day and over the summer, including before and after school, in-service days, and school

vacation week, that support the mental health and wellness needs of students, families, and staff.

(b) The Agency shall adopt policies, procedures, and guidelines necessary for implementation of the program described in subsection (a) of this section.

(c) The Agency shall issue grants to in-school counseling programs and afterschool programs in geographically diverse regions when the applicant meets all of the eligibility criteria listed in subdivision (1) of this subsection and at least one eligibility criterion listed in subdivision (2) of this subsection:

(1) Mandatory eligibility criteria.

(A) The applicant uses evidence-based strategies to address students' social, emotional, mental health, and wellness needs. As used in this subdivision, "evidence-based" means the same as in the Elementary and Secondary Education Act of 1965, 20 U.S.C. § 8101.

(B) The applicant collects data to demonstrate the effectiveness of the mental health and wellness supports and interventions utilized in the program.

(C) The applicant meets student needs by incorporating multitiered systems of supports, trauma-informed and responsive approaches, and approaches such as the Whole Child, Whole School, Whole Community model or the Strengthening Families curriculum's Youth Thrive program.

(2) Additional eligibility criterion.

(A) The applicant works in close partnership with classroom teachers and school guidance counselors to coordinate supports, communication, and strategies.

(B) The applicant uses specially trained staff to provide one-on-one and small group supports and resilience sessions for children and youth, including addressing specific needs, such as suicide prevention, social isolation, anxiety, and substance use.

(C) The applicant provides participating families with assistance in navigating behavioral health resources in their communities.

(D) The applicant provides opportunities for children and youth to participate in activities that heal and prevent social isolation, such as outdoor activities, art therapy, recreation, and time in nature.

(E) The applicant consults with local pediatricians to provide referrals for support.

(F) The applicant provides staff training on Youth Mental Health First Aid and other evidence-based techniques and approaches to crisis

prevention and intervention, such as trauma-responsive practices, adolescent brain development, and how to build a culture of connection.

(d) On or before January 15, 2025, the Agency, in collaboration with the Department, shall submit a report to the House Committees on Education and on Human Services and to the Senate Committees on Education and on Health and Welfare summarizing the programs to which grants were awarded and recommending a model for the integration of mental health and in-school and afterschool programming that provides consistency and reliability to children and youth, is fiscally sustainable, and does not create further workforce capacity challenges for afterschool organizations, schools, community technical education centers, the Agency, or the Department.

Sec. 4. ALLOCATION OF UNEXPENDED ESSER III FUNDS

In fiscal year 2023, ESSER III funds appropriated pursuant to 2021 Acts and Resolves No. 74, Sec. E.501.3 shall be used as follows:

(1) \$500,000.00 for statewide COVID-19 recovery supports for educators and school staff pursuant to Sec. 2 of this act; and

(2) \$2,500,000.00 for grants to expand mental health and well-being services for children and youth pursuant to Sec. 3 of this act.

** * * Interagency Youth Afterschool Task Force * * **

Sec. 5. VERMONT INTERAGENCY AFTERSCHOOL YOUTH TASK FORCE; REPORTING

The Vermont Interagency Afterschool Youth Task Force established pursuant to Executive Order No. 08-21 shall submit to the House Committees on Education and on Human Services and to the Senate Committees on Education and on Health and Welfare copies of its bimonthly progress reports on achieving expanded universal afterschool and summer programming. The Task Force shall also provide advice and recommendations to the General Assembly upon request.

** * * Effective Date * * **

Sec. 6. EFFECTIVE DATE

This act shall take effect on July 1, 2022.