



Mental Health Crisis Specialist 2022-2023 Annual Report

The Embedded Mental Health Crisis Specialist role continues to create significant positive impacts within their communities. The position continues to foster a space where collaborative approaches can be effectively used when responding to mental health-related calls or when extra support is needed at the moment. Due to this collaboration, MHCS can divert individuals from the hospital and address the crisis in the community. Since implementing the role, both sites have expanded the concept of co-response, going beyond the mere act of responding together. This co-response model has been instrumental in addressing mental health crises more effectively and ensuring that individuals receive the appropriate care and support they require in moments of crisis while in the community. Within the co-response model, more communication and collaboration yield a well-rounded response to address most factors attributing to law enforcement involvement. With the increasing demand for mental health resources nationwide, Vermont State Police Troopers on the roads have quick access to MHCS' expertise to support and assist individuals in need. The MHCS is vital in connecting individuals with services and local resources to address mental health concerns and the crisis at hand. By working together, Troopers and MHCS' are better equipped to provide holistic support to individuals experiencing mental health challenges. By leveraging their respective strengths, these partnerships can create a more comprehensive and effective response to mental health crises, ultimately benefiting the communities they serve. The continued implementation and development of this role are vital in addressing the rising demand for mental health services and promoting the well-being of individuals struggling with their mental health.

MHCS's in both St. Johnsbury and Derby are utilized in many ways, especially when it comes to collaboration. "The collaboration between Mental Health Crisis Specialists (MHCS) and various Vermont State Police (VSP) specialties exemplifies the comprehensive approach to providing support in crisis situations. MHCS not only assists Troopers on scene but also actively collaborates with different VSP specialties:

- **Victim's Advocacy:** MHCS collaborates with Victim's Advocacy to offer support and resources to victims of violence or loss, ensuring that individuals affected by such incidents receive the necessary assistance during difficult times.
- **Tactical Services Unit (TSU):** MHCS has worked with TSU to serve mental health warrants in high-risk situations involving both mental health and criminal actions. This joint effort ensures a comprehensive response to address the complexities of such crises effectively.
- **Bureau of Criminal Investigation (BCI):** MHCS collaborates with BCI to provide resources and support to victims of sexual assault, recognizing the importance of offering specialized assistance to those impacted by such traumatic experiences.
- **Narcotics Investigation Unit (NIU):** MHCS provides resources to NIU for individuals struggling with substance abuse, highlighting their commitment to addressing the complex challenges posed by substance use disorders.
- **FBI Victim Specialists:** MHCS was requested to collaborate with Troopers, FBI agents, and FBI Victim Specialists. This joint effort ensured a comprehensive approach to the situation for an individual who has historically struggled with their mental health.

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By working together with these VSP specialties, MHCS ensures a more comprehensive and effective response to crises, addressing various aspects of mental health and well-being while also maintaining public safety and support for the community.

In this report, you will find the data collected by St. Johnsbury and Derby MHCS' for the June 2022 to June 2023 fiscal year.

Between the 2022-2023 fiscal year, the Embedded MHCS's located in the St. Johnsbury and Derby barracks completed a total number of 518 interventions. St Johnsbury's total was 189 and Derby's total was 329.

MONTH	# OF INTERVENTIONS
June 22	6
July 22	26
August 22	20
September 22	36
October 22	42
November 22	44
December 22	26
January 23	52
February 23	40
March 23	64
April 23	50
May 23	61
June 23	51
TOTAL	518

"Your role here at the Derby barracks has quickly become an essential, integral part of our daily operations. Since your arrival, VSP Derby has been able to provide a much better level of service to those suffering from mental health needs and has undoubtedly kept both the people we serve as well as troopers safer as a result."

-Vermont State Police Lieutenant

*It should be noted that St Johnsbury data gathering began late September when the role was staffed.

The response times varied this fiscal year. Below are the total response times for both barracks. The most frequent response time was between 4pm-8pm yielding 40.54 % of calls for the fiscal year. This was followed by 30.89% for 12p-4pm and 27.03 % for 8pm-8am. Lastly, responses for 8am-12pm yielded 1.54%.

MONTH	TIME				MONTHLY TOTALS
	8am -12pm	12pm-4pm	4pm-8pm	8pm-8am	
June 2022	0	3	2	1	6
July 2022	0	8	9	9	26
August 2022	0	9	8	3	20
Sept 2022	1	12	17	6	36
October 2022	1	10	18	13	42
November 2022	0	7	21	16	44
December 2022	0	10	11	5	26
January 2023	0	12	24	16	52
February 2023	0	10	14	16	40
March 2023	0	18	26	20	64
April 2023	1	21	16	12	50
May 2023	2	22	23	14	61
June 2023	3	18	21	9	51
TOTAL	8	160	210	140	518
	.015444	.30888	.40540	.27027	1.0
%	1.54%	30.89%	40.54%	27.03%	100%

Both MHCS's located in St. Johnsbury and Derby Barracks predominantly work a 2pm to 12am shift.

Among the 518 interventions conducted by MHCS, approximately 12.55% of the beneficiaries were aged between 0 and 17, 67.37% fell within the age group of 18 to 59, and the remaining 20.08% consisted of individuals aged 60 or above.

MONTH	AGE			TOTALS
	0-17	18-59	60 +	
June 2022	1	4	1	6
July 2022	6	15	5	26
August 2022	3	13	4	20
Sept 2022	5	24	7	36
October 2022	3	30	9	42
November 2022	6	33	5	44
December 2022	0	19	7	26
January 2023	5	32	15	52
February 2023	5	29	6	40
March 2023	10	42	12	64
April 2023	8	35	7	50
May 2023	10	34	17	61
June 2023	3	39	9	51
TOTAL	65	349	104	518
	.12548	.67374	.20077	1.0
%	12.55%	67.37%	20.08%	100%

Gender categories of the 518 individuals provided with an MHCS service comprised 50.19% male, 48.46% female, and 1.35% individuals identified as other for gender.

MONTH	GENDER				TOTALS
	Female	Male	Non-Binary	Other	
June 2022	1	5	0	0	6
July 2022	18	8	0	0	26
August 2022	12	8	0	0	20
Sept 2022	18	16	0	2	36
October 2022	19	23	0	0	42
November 2022	20	22	0	2	44
December 2022	11	15	0	0	26
January 2023	21	30	0	1	52
February 2023	19	20	0	1	40
March 2023	29	34	0	1	64
April 2023	22	28	0	0	50
May 2023	30	31	0	0	61
June 2023	31	20	0	0	51
TOTAL	251	260	0	7	518
	.48455	.50193	.00	.013513	1.0
%	48.46 %	50.19 %	0%	1.35 %	100 %

Race categories that were collected this fiscal year comprised of 84.17% of individuals identified as White, 10.23% declined to answer or race was unknown and 2.70% identified as Black or African American. The remaining data includes 1.54% of individuals identified as Other/Multi-racial, .97% identified as Asian and .39% identified as American Indian or

Alaska Native. Neither MHCS' provided interventions for individuals who identified as Native Hawaiian or Other Pacific Islander this fiscal year.

RACE	TOTALS	%
American Indian or Alaska Native	2	.39%
Asian	5	.97%
Black or African America	14	2.70%
Native Hawaiian or Other Pacific Islander	0	0%
White	436	84.17%
Other/Multi-Racial	8	1.54%
Declined to answer/Unknown	53	10.23%
TOTAL	518	100%

The MHCS extended its services to residents of 61 different towns, covering the area between the Derby and St. Johnsbury barracks.

TOWN	# OF INTERVENTIONS	TOWN	# OF INTERVENTIONS
Albany	4	Lowell	5
Barton	30	Lunenburg	4
Barnet	7	Lyndonville	26
Barre	1	Maidstone	4
Becher Falls	1	Monkton	1
Bradford	10	Morgan	4
Brighton	9	Newark	2
Brownington	18	Newbury	3
Burke	2	Newport	14
Burlington	2	Newport Center	4
Canaan	10	Newport City	28
Charleston	9	Newport Town	7
Concord	6	Orleans	8
Corinth	4	Peacham	2
Coventry	10	Ryegate	6
Craftsbury	4	Sheffield	1
Danville	16	St. Johnsbury	42
Derby	47	Sutton	4
Derby Line	7	Thetford	2
East Charleston	10	Topsham	1
Fairlee	9	Troy	12
Glover	5	Vershire	3
Greensboro	2	Victory	1
Groton	1	Walden	6
Hardwick	2	Waterford	4
Holland	3	West Burke	1

Hyde Park	1	Westfield	5
Irasburg	12	Westmore	3
Island Pond	12	Wheelock	7
Jay	4	Unknown/ Transient	30
Johnson	1	Out of State	18
Lemington	1	TOTAL	518

Each response to which MHCS's are attached to are unique in nature. The majority of interventions, accounting for 56.76%, were conducted over the phone, while 42.66% were addressed in face-to-face meetings. The remaining 0.58% were completed through alternative methods, such as telehealth.

TYPE OF CONTACT				
MONTH	Face To Face	Telehealth	Phone	
June 2022	2	0	4	6
July 2022	10	0	16	26
August 2022	5	0	15	20
Sept 2022	14	0	22	36
October 2022	16	0	26	42
November 2022	17	0	27	44
December 2022	11	0	15	26
January 2023	19	0	33	52
February 2023	23	1	16	40
March 2023	36	1	27	64
April 2023	17	0	33	50
May 2023	33	0	28	61
June 2023	18	1	32	51
TOTAL	221	3	294	518
	.42664	.00579	.59756	1.0
%	42.66 %	.58 %	56.76 %	100 %

Most of the Law Enforcement responses were followed up on by MHCS by outreach to individual who may be struggling.

Both MHCS's are embedded within each respective barracks which continues to encourage a well-organized and well-rounded response to address the mental health aspect of calls that are reported to Vermont State Police. While MHCS and Troopers strive for a co response as a first step, MHCS are also able to gather more collateral information, in order to attempt minimal law enforcement presence if possible. Among the 518 interventions this year 44.40% prompted a co-response, 48.26% were addressed by MHCS and 7.34% had a law enforcement only response.

	RESPONSE			
	LAW ENFORCEMENT	MHCS	CO-RESPONSE	TOTAL
June 2022	3	1	2	6
July 2022	2	15	9	26
August 2022	5	8	7	20
Sept 2022	3	20	13	36
October 2022	1	19	22	42
November 2022	1	21	22	44
December 2022	3	13	10	26
January 2023	2	26	24	52
February 2023	1	16	23	40
March 2023	5	22	37	64
April 2023	5	29	16	50
May 2023	6	26	29	61
June 2023	1	34	16	51
TOTAL	38	250	230	518
	.07335	.48262	.44401	1.0
%	7.34%	48.26%	44.40%	100%

MHCS' travelled a total of 77 hours and 6 minutes, whether traveling with law enforcement or utilizing their personal vehicles.

	TRAVEL TIME	
	HH:MM	:MM
June 2022	00	00
July 2022	9 HR 45 MIN	585 MIN
August 2022	2 HR 35 MIN	155 MIN
Sept 2022	7 HR 10 MIN	430 MIN
October 2022	3 HR 20 MIN	200 MIN
November 2022	3 HR 25 MIN	205 MIN
December 2022	6 HR 29 MIN	389 MIN
January 2023	4 HR 27 MM	267 MIN
February 2023	5 HR 6 MIN	306 MIN
March 2023	12 HR 8 MIN	728 MIN
April 2023	5 HR 38 MIN	338 MIN
May 2023	7 HR 48 MIN	468 MIN
June 2023	9 HR 15 MIN	555 MIN
TOTAL	77 HR 6 MIN	4626 MIN

"Now having the embedded worker directly in the barracks for so long, I think not having the role/position would definitely be disadvantageous. It's so convenient for the position to be right at the barracks as far as ease of communication and for us as a group to be familiar with each other and that its not a stranger or a new face at every other call."

-Vermont State Police Sergeant

During this fiscal year, MHCS services were readily available in various locations, most frequently at clients' homes. The second most common location was in the community, and the third most frequent was at the barracks.

LOCATIONS	# OF INTERVENTIONS		%
Home	248	.47876	47.88%
Community	182	.35135	35.14%
Court	1	.00193	.19%
Office	1	.00193	.19%
ED	19	.03667	3.67%
School	5	.00965	.97%
PCP Office	0	0	0%
Crisis Bed	0	0	0%
PIP Bed	0	0	0%
Barracks	62	.11969	11.97%
TOTAL	518	1.0	100%

Interventions that took place at the barracks comprise of detox requests and providing support to person while they are in custody and/or meeting with Trooper(s).

MHCS's and law enforcement collaborate frequently to effectively address mental health concerns reported to Vermont State Police. Since the position is co-located within the barracks, there are many opportunities to collaborate. Some examples include, when call is initially assigned (identify response level, safety risks, relevant history), traveling (within the cruiser briefing on who will lead and when, debriefing on the travel from scene) and Barracks meetings (discussing individuals who have yielded frequent concern from the community, updates in Vermont State Police Policies in which sometimes guide mental health related calls to service). Collaboration also happens outside of calls, through consults, requests to outreach as well as continued rapport and trust building while on shift. This year, MHCS's collaborated for a total of 199 hours and 31 minutes.

COLLABORATION TIME

MONTH	HH:MM	:MM
June 2022	1 HR 30 MIN	90 MIN
July 2022	7 HR 28 MIN	448 MIN
August 2022	17 HR 10 MIN	1030 MIN
Sept 2022	12 HR 5 MIN	725 MIN
October 2022	14 HR 59 MIN	899 MIN
November 2022	22 HR 32 MIN	1352 MIN
December 2022	6 HR 59 MIN	419 MIN
January 2023	17 HR 35 MIN	1055 MIN
February 2023	13 HR 51 MIN	831 MIN
March 2023	26 HR 35 MIN	1595 MIN
April 2023	17 HR 13 MIN	1033 MIN
May 2023	20 HR 6 MIN	1206 MIN
June 2023	21 HR 28 MIN	1288 MIN
TOTAL	199 HR 31 MIN	11, 971 MIN

"This position is tremendously valuable and fills a huge gap that previously existed in public safety. I can't see it not being a permanent part of the future of VT law enforcement. Not only does it take a substantial workload off of troopers not intended to provide that service in the first place, but more importantly ensures the ever-increasing demographic with mental health challenges that we deal with are receiving the appropriate response."

-Vermont State Police Sergeant

For the 2022-2023 fiscal year, MHCS' were on scene for a total of 220 hours and 58 minutes. Time captured begins at response time or when MHCS' are requested while Troopers are out on scene.

	MHCS TIME ON SCENE	
MONTH	HH:MM	MM
June 2022	3 HR 20 MIN	200 MIN
July 2022	7 HR 59 MIN	479 MIN
August 2022	3 HR 5 MIN	185 MIN
Sept 2022	13 HR 32 MIN	812 MIN
October 2022	19 HR 20 MIN	1160 MIN
November 2022	27 HR 42 MIN	1662 MIN
December 2022	12 HR 9 MIN	729 MIN
January 2023	20 HR 32 MIN	1232 MIN
February 2023	21 HR 34 MIN	1294 MIN
March 2023	33 HR 1 MIN	1981 MIN
April 2023	17 HR 45 MIN	1065 MIN
May 2023	19 HR 44 MIN	1184 MIN
June 2023	21 HR 15 MIN	1275 MIN
TOTAL	220 HR 58 MIN	13,258 MIN

A total of 984 individuals were impacted by the services MHCS' provide to the community.

TOTAL	IMPACTED	INDIVIDUALS
MONTH	ADULTS	CHILDREN
June 2022	7	2
July 2022	46	33
August 2022	30	11
Sept 2022	85	10
October 2022	105	11
November 2022	72	25
December 2022	46	12
January 2023	86	23
February 2023	39	14
March 2023	73	38
April 2023	72	7
May 2023	57	7
June 2023	57	16
TOTAL	775	209

775 of those individuals were adults and 209 were children.

From June 2022 to June 2023, the most frequent presenting concern was General Mental Health, yielding a 47.49%, followed by Danger to Self and Other at 21.43%. Lastly, Danger to others accounted for 9.65 %. The majority of MHCS’s work during this fiscal year was towards addressing General Mental Health concerns in the community.

MONTH	PRESENTING CONCERN		OTHER	TOTALS
	DANGER TO SELF	DANGER TO OTHERS		
June 2022	2	0	2	6
July 2022	5	0	14	26
August 2022	6	3	9	20
Sept 2022	10	1	19	34
October 2022	6	5	21	42
November 2022	15	2	19	44
December 2022	6	3	13	26
January 2023	11	7	21	52
February 2023	9	7	13	40
March 2023	13	5	31	64
April 2023	11	9	19	50
May 2023	7	4	32	61
June 2023	10	4	33	51
TOTAL	111	50	246	518
	.21428	.09652	.47490	1.0
%	21.43 %	9.65 %	47.49 %	100 %

Presenting concern is based on initial information reported to dispatch.

The most frequent outcome of MHCS’s interventions was Home with a total of 155 (29.92%) followed by Community with a total of 129 (24.90%). The third most frequent was Follow up Appointment at Designated Agency comprised a total of 61 (11.78%). The following descend in frequency; Phone Check In totaled 44 (8.49%), Substance Use Disorder Treatment Recommended but Declined comprised of 38 (7.34%), No Referral totaled 29 (5.60%), ED tallied 19 (3.67%), Voluntary Inpatient Hospitalization calculated to 16 (3.09%), Involuntary Inpatient Hospitalization comprised of 13 (2.51%), Substance Use Disorder Treatment totaled 7 (1.35%), Waiting within Emergency Department was calculated to 6 (1.16%) and Shelter comprised of 1 (.19%). The least frequent were crisis bed/diversion, IOP and IRR with 0.

OUTCOME	June 22	July 22	Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	Jan 23	Feb 23	Mar 23	April 23	May 23	June 23	Total	%
ED	1	0	0	0	1	3	0	2	4	3	2	2	1	19	3.67%
SUD Treatment	0	0	0	0	1	1	0	0	1	0	0	2	2	7	1.35%
Crisis Bed/Diversion	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%
Voluntary inpatient	0	0	1	3	1	1	2	0	3	3	1	0	1	16	3.09%

Involuntary Inpatient	0	1	1	5	1	0	2	1	1	1	0	0	0	13	2.51%
IOP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%
Shelter	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0.19%
IRR	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%
Follow up appointment at DA	0	2	1	0	7	7	1	8	3	12	6	8	6	61	11.78%
Community	0	0	10	9	6	9	7	14	12	12	21	16	13	129	24.90%
Home	1	14	4	14	14	15	9	13	10	16	11	20	14	155	29.92%
Phone Check in	0	5	3	2	5	1	2	7	1	1	4	3	10	44	8.49%
Waiting in ED	0	0	0	1	0	0	0	1	1	1	1	0	1	6	1.16%
Hospitalization Recommended and Declined	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%
SUD Treatment Recommended and Declined	2	0	0	2	3	6	3	5	3	4	3	6	1	38	7.34%
No Referral	2	4	0	0	3	1	0	1	1	11	1	3	2	29	5.60%
Total	6	26	20	36	42	44	26	52	40	64	50	61	51	518	100%

While MHCS' attempt to address the concern within the community, not all calls can be diverted from the ED. Some examples that account for ED outcomes include, individual was transported to ED for medical reasons, EMS was transporting by the time Trooper and MHCS was enroute, welfare check for individuals who were at the ED and ER staff that requested police due to an individual who was located at ED.

Out of the total 518 interventions conducted by MHCS, approximately 29.34% were related to substance use.

SUBSTANCE USE INVOLVED		
MONTH	YES	NO
June 2022	4	2
July 2022	2	24
August 2022	5	15
Sept 2022	13	23
October 2022	13	29
November 2022	14	30
December 2022	10	16
January 2023	13	39
February 2023	15	25
March 2023	15	49
April 2023	13	37
May 2023	20	41
June 2023	15	36
TOTAL	152	366
	.29343	.70656
%	29.34%	70.66%