Task Force on Behavioral Health Working Groups

- Goal: produce actionable public policy items
- ***** October 1, 2014- Present collective recommendations
- Team leaders: facilitate discussions, organize meeting times and locations, produce a summary of each meeting, and report back to the larger task force

1. Gaps Analysis

Deliverables:

- This group's primary purpose will be to work with the University of New Mexico Center for Education Policy Research to complete a long-term inventory of gaps within the behavioral health system. UNM/CEPR will delineate community needs and inventory of services among other matters stipulated in the contract.
- provide list by levels of care
- What is the capacity gap of these services
- Identifying and reviewing procedures and requirements for access to services
- Identifying current or potential funding sources
- macro look at behavioral health continuum to identify major gaps/ duplications in services in the N.M. Health system

1. Team Leader: Jay Crowe

- 2. Marsha McMurray-Avila
- 3. Wayne Lindstrom
- 4. Beth Dehler
- 5. Tom Gagliano
- 6. David Ley
- 7. Fr. Rusty Smith Designee, Maureen Rule
- 8. Jim Ogle (NAMI)
 - Ané Romero- Senator Heinrich

Resource Representative: Rodney McNease, UNMH

2. Crisis Encounters/ Intervention

Deliverables:

- Evaluate procedures, resources, and instances where a citizen with mental illness reaches an acute or crisis level. This group will map typical scenarios for both law enforcement and non-law enforcement referrals
- Describe current practices and provide a canvas of best practices throughout the U.S.
- List stop-gap services
- Identify current resources for acute or crisis intervention in the metropolitan area
- Review current methods of dealing with crisis situations; incarceration models, referrals to UNM Behavioral Health network, emergency room referrals, etc.

1. Team Leader: Lt. Glenn St. Onge

- 2. Lt. Chad Kim
- 3. Sergeant Patrick Burk
- 4. Anita Briscoe
- 5. Maureen Kolomeir
- 6. Jessica Perseo
- 7. Caroline Bonham
 - Ané Romero- Senator Heinrich

Resource Representative: Katrina Hotrum

3. Interaction with Court Systems/ Assisted Outpatient Treatment (AOT)

Deliverables:

- Review justice system and the healthcare network collaborative; where is there room for improvement?
- Discuss crisis management
- Review of options available to Judges
- How can we identify and solve flaws within system? (Ex: competency issues and the relationship to misdemeanor dismissals)
- Categorize interactions between persons with mental illness and the court system in NM.
- Highlight the types of specialized courts that address mental illness in the criminal justice system and the role of probation and parole that can be enhances to reduce recidivism and re-direction to therapeutic models of treatment
- Assisted Outpatient Treatment (Options; Legislation at State and City)

1. Team Leader: Jean Klein

- 2. Kelly Bradford
- 3. Representative Rick Miera
- 4. Art Marshall
- 5. Nils Rosenbaum

- 6. Nancy Koenigsberg
- 7. Eric Peterson

Resource Representative: Andy Vallejos

4. Housing

Deliverables:

- Pinpoint housing issues related to person with mental illness in the Albuquerque metro area
- Determine what housing resources are available in the metro area such as supportive housing, group housing and shelters
- Enumerate information about the requirements for eligibility for housing, barriers to eligibility, and ways to improve
- List alternatives to current system
- Provide supportive housing/ workforce reintegration options

1. Team Leader: Paula Harper

- 2. Bob Maxwell
- 3. Lisa Simpson
- 4. Fr. Rusty Smith—Designee, Maureen Rule
- 5. Michele Franowsky

Resource Representative: Michael Robertson

5. Long-Term Maintenance and Access to Services

Deliverables:

- Target resources for long-term support for persons with mental issues, support services and where such resources could be improved
- Review of options available to medical professionals and evaluate to what extent they are aware of these options
- Review Kendra's Law, assisted outpatient treatment, treatment guardians, etc.

1. Team Leader: Miriam Komaromy

- 2. Jill Marshall
- 3. Harris Silver, MD
- 4. Douglas Fraser

<u>Resource Representatives</u>: Katrina Hotrum and Jessica Gonzales

6. Case Management

Deliverables:

- What is the history of case management? Provide a gap analysis
- Deliberate methods of coordinating services for person with mental illness. By utilizing current model (UNM pathways program) or by creating a new model that can assist citizen in obtaining social services (Medicaid, veteran's assistance, social security, income support, etc.)
- Review programs such as Pathways, Project Echo- what works and where can we improve?
- Provide framework for case management

1. Team Leader: David Ley

- 2. Adan Carriaga
- 3. Bill Wagner
- 4. Tom Gagliano

Resource Representative: Rodney McNease

*Updated 8/8/2014