**Mental Health Response Advisory Committee (MHRAC)**

Meeting Minutes

March 21, 2023

Via Zoom

**Board Members in Attendance**

Rachel Biggs Albuquerque Health Care for the Homeless

Cmdr. M. Dietzel Crisis Intervention Division

DC Emily Jaramillo Albuquerque Fire Rescue

Mary Perez Albuquerque Ambulance

Coty Maxwell CIU Detective

Paula Burton NAMI Representative

Wendy Linebrink-Allison New Mexico Crisis Line

David Ley New Mexico Solutions

Betty Whiton NAMI

Gilbert Ramirez Family & Community Services

**Introduction to MHRAC**

The Mental Health Response Advisory Committee (MHRAC) was created by the Court Approved Settlement Agreement (CASA). We’ve been around since day one and have a focus on three areas, resources, and resources being available to access different things within the city that APD and first responders can use as it impacts homelessness and mental health issues. We are also involved in training and policy; training is one of those things we made a tremendous impact on. As far as the training that is offered. Policies are one of those things where the MHRAC is involved with assisting in writing and approving and recommending policy as it relates again to the narrow focus; we think narrow, but sometimes it gets pretty wide-focused on how law enforcement interacts with those experiencing homelessness and those experiencing a mental health crisis.

**Roll Call, Max Kauffman**

Ten (10) Board Members were present (names listed above)

**Welcome First-Time Guests**

Tricia Baca

New ACS/MCT Clinician

Barbie Montoya

Victim's advocate at The Arc of New Mexico

The Arc is **the nation’s leading advocate** for all people with intellectual and developmental disabilities and their families and the premier provider of the support and services people want and need.

**Approval of Meeting Minutes**

1st Motion – Paula Burton

2nd Motion – Betty Whiton

Minutes from the February 2023 meeting were approved.

**Public Comment (Two minutes per person)**

David Ley

Congratulations to Emily Jaramillo on her promotion from Deputy Chief to Chief. Possibly the first Fire Chief in history.

**Nomination of New Board Members, if any, Rachel/Max**

No nominations were made this month

Rachel Biggs

We nominated a new board member last month, Mary Magnusson, from Heading Home.

If you have recommendations or know someone that would serve as a great MHRAC committee member, please reach out to me, Max, Commander Dietzel, or Brenda, and we can make sure we follow up with you and speak a little bit more in-depth about the role of MHRAC and serving on the committee.

**Fathom Meeting Summary:**

* The Mental Health Response and Advisory Committee held a meeting where they approved the minutes from the previous meeting and had a public comment period. They also acknowledged and congratulated Chief Jaramillo for becoming the first female fire chief in Albuquerque's history.
* During the meeting, updates were given on the Mental Health Response Advisory Committee (MHRAC) the ACS data, new responders graduating, and the upcoming groundbreaking for the ACS headquarters. There were also discussions on collaborating with APD and receiving referrals from the CIT unit.
* During the meeting, ACS reported on the completion of a graveyard testing and responded to questions about funding. Barbie asked about support for adults with intellectual and developmental disabilities, and Jasmine provided contact information for further discussion.
* Cristina provided updates on the Gibson Health Hub, including the closure of the men's shelter and the release of a report on the use of emergency winter beds.
* Cristina and Gilbert discussed updates on various projects, including the men's shelter ending, the women's shelter transitioning to Gateway, the progress of the sobering center, and the completion of a staffing study. The training coordinators also provided hands-on updates to officers on their duties under mental health.
* The Commander, Sergeant, and others discussed updates and initiatives related to mental health services, including increased referrals to Dr. Winograd’s study, successful cases with the threat assessment team, and efforts to improve care at Princeton Place and other treatment facilities.
* They also discussed upcoming training and briefings to address rumors and misinformation.
* The group discussed the need for collaboration between different organizations to effectively address the behavioral health needs of individuals in crisis, while also respecting confidentiality and HIPAA laws. They also talked about the importance of developing a system of care for crises that integrates different services and organizations.
* Some of the Board Members discussed updates on policies and training for the MHRAC Committee. They also mentioned the need for feedback on the behavioral health collaborative strategic plan and addressed a comment about safe spaces.

**Albuquerque Community Safety Department (ACS) Update, Jasmine Desiderio**

So on our ACS data, we have a website. It's called the Transparency page. If you all want to look on there, we have our February.

The 2023 report data was posted. We've responded to over 27,000 calls for service diverting over 16,000 calls from police.

We have a steering committee meeting coming up tomorrow. If you are interested, we have a hybrid model, which you can come into the ACS office or on Zoom.

We have new responders graduating. So if you'd like to participate or see our newest responders, there are five of them that are graduating from our little ACS Academy, which is six weeks long. They will be completing that tomorrow at four o'clock at the ACS education building, on the first floor in the auditorium.

We have some new vacancy posts online. We have about 10 new responders in the queue waiting to be officially hired through the city, which means we are gearing up to hold another ACS Academy starting in late May, depending on how many positions we can hire on top of this latest push. We might end up having another training academy start in late June, which means we'll have two of them starting back-to-back and able to have additional responders out in the field in the next couple of months.

We’re going to have a big groundbreaking for our ACS headquarters off of San Mateo and Catherine which will be on Saturday, April 8th, at 11 o'clock. The mayor will be there and everyone is invited. The building is already being built. The update states that we are ahead of schedule so we are hoping to have our new headquarters building up and running in the next year and a half.

This also ties in with budget season; we are currently in the process. We've sent in our issue papers requesting additional hours of operations.

This also includes pre-positioning locations, areas that we're using for our data patients, our responders will be pre-positioned. So we're able to respond to those calls sooner and faster.

We're currently in the infancy phases of the planning for that and just more recently, we have been talking about how we're going to collaborate more with the APD CIT unit to start receiving referrals.

Paula

My son is a sergeant in the Foothills Area Command on the graveyard shift and he wanted me to pass on that you’re 24/7 helps because in the nighttime they just don’t have any other kind of resources available.

Jasmine

We have completed a graveyard testing, not a pilot, it's testing. We wanted to see what kind of calls we would be able to get and if we really needed them. That testing concluded this past Sunday and have responded to over 120 or 130 calls during that week. We’re trying to be sure that we're taking that data-driven approach to make sure that if we do go potentially 24-7, what does that look like?

Rachel Biggs

Q. What is the ask at City Council in terms of an increase?

Jasmine

A. For ACS, we're asking for about $4 million. And we do have some CIP funding coming down. For the CIP funding, we requested a million dollars. That is for alongside pre-positioning. If we're able to find locations that APD or AFR do not use anymore, like their old substations or fire stations, we might be able to renovate them and also use those as little ACS hubs across the city. We're not requiring our responders to answer a call on the west side and having to drive back towards the airport just to get to replenish their supplies; it doesn't make sense. So that's our push is requesting additional funds for possible locations across Albuquerque as well as supporting our workforce.

Gibson Health Hub, Family and Community Services, Cristina Parajon and Elizabeth Holguin

Cristina Parajon

Updates will be about the Gibson Health Hub, specifically, about Gateway and also the emergency shelter that we have been running there over the winter time.

So a few crucial updates for the men, we have both a men's side and a women's side, and the men's side will be closing by the end of March 31st and that is also the date we will stop accepting referrals

The individuals won't be asked to leave until April 21st. So we're having a little buffer there for the men so that they can work with their case managers, about 90% have case managers and those who don't are working with the Heading Home staff. Heading Home has allowed us to work with Albuquerque Opportunity Center. They're starting to make room at Albuquerque Opportunity Center so if the men do want to go over to that shelter, they have an option.

As you know, we did these emergency winter beds just because we knew the winter was going to be cold. We wanted somewhere in town that wasn't 45 minutes out where people could stay.

We will be releasing a report about how those beds were used over the course. We've had 150 unique individuals who use those beds over the course of the winter. About 30% of the individuals who stayed at the shelter had jobs. A high percentage, 90 or 98%, of the individuals, had case managers also in town so that facilitated their access then to accessing services that are closer in town and you don't have to be out there on the West side. And then 95% of people also stayed consecutively; so a lot of people stayed for multiple weeks, which is a great retention rate for us in providing that service.

An update on the women's side, we have about 22 individuals who are there; they will transition to Gateway when it opens. We're expecting that Gateway will open sometime in May. We're still waiting for a few things to ship in from construction, so we might have to delay that a little bit.

But Gateway services, which are the housing case management, the case managers, peer support workers, and all the programming aspects of Gateway will be starting on April 21st as we had originally aimed to open the shelter. So that looks like programming for individuals to start meeting, to get on voucher lists, and to work with case managers to see what individuals need. And crucially, what we've done for the winter beds is to enter everybody into HMIS, the Homeless Information Management System, and to also do a VISBA data evaluation with everyone who came through and that information has also been recorded. Once you've done the VISBA data, you're in that system then for vouchers, for Section 8, for housing, so that was one step. And now we're really excited on April 21st to then take it further with actual house case management that will be in-house at Gateway.

Gilbert Ramirez

A brief update on the sobering center; the permitting was submitted. I think we're down to planning textiles and design. Last-minute implementation once permits are approved. I think we will be getting construction by the end of this month. Hopefully, we will be open by the end of the fall or the beginning of the fall.

We will be prepared probably an RFP to select the provider(s) of interest for the services there. So all of that is being drafted and kind of prepared as we're moving forward.

We've had some additional funding for the project through our federal earmarks, so we appreciate our federal delegates were able to contribute to that. And so as far as funding for the project, at least for construction and startup, I think we're in a really good position to bring medical sobering online here in the city.

Rachel Biggs

Q. The part about pulling out the services from the shelter; the services can start before the shelters are up and running so people will have office hours and maybe people can be directed to the space to meet with the case managers, is that how you’re going to have it, it'll be going to day services, is that what you're envisioning?

Cristina Parajon

A. Yes, this is a, will be a separate area from the shelter so individuals will be sleeping inside the building and then we also have another building that's not part of the main building and that has a series of offices as well as a living space area so individuals will be able to access that space during the day. And we'll be meeting with case managers in those in those offices.

**CIU, APD, and BSS Report and update, Commander Dietzel**

Our staffing study which has been seemingly a four-year process is coming to a close. Dr. Winograd was whom we contracted with, whom some of you may know from his time previous with APD and pretty much in all things data at the city. The draft is being distributed internally right now. I expect before the next meeting I'll be able to do a presentation on it or maybe Dr. Winograd can be here. He looked at a lot of things; he looked at every single sign of the house, MCT, home visits, coordinators, clinicians, and the number of supervisors.

He did some work with ACS, and he did some work looking at some of the officer-involved shootings over the last couple of years. This was pretty exhaustive stuff. I'll give you guys an update next month because I'm sure it'll be out of draft form by then.

The only other big update I have is our training coordinators are going to every single area command, every single shift, and every single briefing over the next few months, just to give the officers kind of a hands-on update, it's been about a year since the last time we had any classroom instructional time with the officers specific to things like certificates for evaluation (C for E) and our duties under mental health.

It's going to be a quick presentation that I believe was sent out to MHRAC for review on the 8th. And then it'll be a Q&A session. For those of you that don't work for APD, the field is a very interesting animal in that rumors pop up of how you're supposed to do something that isn’t always accurate. And so the rumor mill kind of runs and runs and runs until somebody comes along and corrects it. So really what this is about trying to get ahead of those, “this is how you do things that might not be right.” And so it's a question and answer with the officers directly with us so we can fix anything that kind of is lingering out there.

In addition to that, we have our yearly or every two-year training coming up with the academy specific to mental health.

Sgt. Lowry

I want to let everybody know that Dorian Dixon is going to be moved to a coordinator position. We do have three complete MCTs right now with Miss Tricia Baca (clinician) joining our team.

We have almost completed all of the PRT teams citywide and then we'll be hitting the rest of the shifts.

Matt Tinney

I want to point out or reiterate what Jasmine said about Dr. Winograd’s study. He actually pointed out or asked me why I wasn't sending more referrals to ACS if they used to go to COAST and we don't have the number of employees. So the month of February, I received a referral and sent it out. A lot of times there's a community engagement team, ACS, or Intel division, so there were 21 that I sent out. And then just in this month with all the changes, I've sent out 77; so they're getting a lot more.

We also were very fortunate to be part of a threat assessment threat management team and so we're meeting with a lot of local and all the federal partners and so we're taking cases from them and just recently we had two referrals one from the ATF and the other from the FBI. It was nice because the detectives and the clinicians were able to go and do a threat assessment and look for ways to get them into services and not into federal custody. So they were able to go out there, conduct those assessments, look for the best resources to link them to, to hopefully prevent a future tragedy, but also keep them in the community and safe from it.

I want to give a shout-out to Sgt. Erica Lowry. Some of you may be familiar with Princeton Place; last month they wrote 19 Certificates for Evaluation and in the last three months they had over 60 calls for service. Some officers said they felt like the patients there were getting mistreated. It wasn't in their best interest. So Sergeant Lowry was able to set up a meeting. We met with them and talked about other ways that they could provide a little bit better care and not use the police for treatment options when it goes to a transporting facility Chief Ortiz, AFR Battalion Chief, he's our EMS Division Chief and was able to provide us some great insight on a different ambulance service that we could also let some of these treatment homes know about.But they also, and the doc was there, brought up some other issues with some other local senior citizens, our senior facilities that are misusing certificates for evaluation, and ways that we could maybe work together as a community and all these organizations to get the best course of their treatment.

David Ley

I would be interested in kind of trying to collaborate with them about how they can more effectively address the behavioral health needs of folks in their care.Presbyterian has previously asked me to train and engage there and I was never very effective. So if they're doing C of E’s like that and calling the police, it says that they're in some kind of crisis and need and it may not be me, but there are behavioral health providers in this city that could partner with them to try to meet those needs in a person-centered kind of way.

Matt Tinney

Q. I know we have a few different meetings with different organizations where we kind of staff cases. Now and then we have cases where we're kind of not sure what to do. And I don't know if you guys think MHRAC is a good place for us to ask.

Rachel Biggs

A. Yes, I think there are many members here to do that with, or I can make sure we can connect with the right people, or we could put it out to the committee. I think that's a great idea and I think that's exactly why we have an MHRAC.

**Sub-Committees Report and Updates**

Commander Dietzel – Infoshare Sub-committee

* We did not have any new policies
* The LEAD policy was just edited
* We’re getting close to the main policies for Crisis Response of APD so we are about to enter our busy section of the year
* I talked to Policy & Procedure this month and we went over the list of policies that go to MHRAC; there is a lot, but they are all kind of current pending revisions.

David Ley – Training Sub-committee

* We are meeting this month, Monday, March 27th. Is there anything any of you want to flag ahead of time?
* We have a number of items on the agenda; policies and training curricula have been shared with us. All of them look good, and I appreciate the opportunity for us to give input.

**MHRAC Final Discussion (5 minutes)**

* Community Input Requested – BHC FY24 Strategic Plan
* We had an input request for the Behavioral Health Collaborative Strategic Plan sent to you via email. Please look at that strategic plan and provide input.
* This is a great group of people to be looking at that and providing input either to that survey or to a community input session.
* If you have questions, we can always bring the representative to come in and talk to us about that.
* It's a consulting firm that's helping with that plan right now and looking for feedback. Please take a minute to look it over and provide some feedback from all of your perspectives.
* It is not just for the committee members, but for everyone, that's on the call today.

**Transcribed by Fathom**

**Next meeting: April 18, 2023**