



March 12, 2019, 8:30 a.m. to 10:00 a.m.  
Community Center, Multipurpose Room

Opening Remarks:

Sheriff James Mendrick, DuPage County Sheriff's Office began the meeting at 8:30 with opening remarks. (Scott I was outside for most of this part can you help fill it?)

After the opening remarks, Scott Kaufmann had the group take a moment for the tragic event that took place in Kane County.

Karen Ayala, Executive Director with the DuPage County Health Department, shared her views on what she sees going on in DuPage. This is not an us, but a we conversation. As the Sheriff mentioned, when you start something new you hope that it will be good. For example, what came from the Behavioral Health Collaborative was almost like magic. It is exciting to see what happens next. Thank you very much.

Bureau of Justice Assistance Grant:

Mila Tsagalis from the DuPage County Health Department presented on the BJA grant. Mila gave an overview of the grant's five key initiative areas. These initiatives include establishing a mental health planning team, a pilot program to provide a mobile response, and providing Mental Health First Aid training to local fire departments and EMS.

The BJA grant has two phases. Phase One began in January 2019, with an end date of August 2019. Highlights of Phase One include the formation of a mental health planning team, conducting a gap analysis, establishing baseline numbers and implementing a Mobile Crisis Response pilot program. Phase Two will run between September 2019 to December 2020. Highlights of Phase Two includes the training of local EMS and fire on Mental Health First Aid, expanding the Mobile Crisis Response pilot, expanding the jail re-entry program and implementing new jail screening tools.

Behavioral Health Collaborative Structure:

Scott Kaufmann from the DuPage County Health Department presented on the structure of BHC and his role within the program. Scott's role is to help with questions, connecting members to resources, and to assist in coordinating between the BJA grant and BHC.

Next Scott talked about the structure of the BHC. The BHC mission statement has not changed nor has its priority areas. We will be changing the structure of the BHC by formalizing what we already have. This will be done first by creating bylaws for the BHC. These bylaws will be developed with the feedback of BHC workgroup representatives. Additionally, we will start to use non-required and straightforward Collaborative Involvements Agreements. These agreements will be friendly and used to develop a list of actual members.

Furthermore, there was no formal committee to guide the BHC. We will establish an Executive Committee which will provide guidance and recommendations to the whole collaborative. Subcommittees will also be formed, and they will be based on already established focus areas.

### Mobile Crisis Response Pilot:

Chief James Gunther from Westmont Police Department presented on the Mobile Crisis Response Pilot. Currently, we have three towns set for a decentralized model, these towns include Lombard, Westmont, and Wheaton. These departments will be contracting with DCHD to provide mental health assessments at the incident location. There are a lot of moving parts, and we are working on the language from a data tracking perspective. We are trying to understand what phone calls fall into a mental health crisis category and how to track these calls better. There is a lot of available data, and we will be able to see new trends.

From a personal perspective, we all share the same goals, and the outreach so far has been fantastic. Everyone I have worked with is good at their work. Many people need help, and it's good that we can help.

Meeting members asked Chief Gunther a series of questions.

These questions include:

- “When is the goal date?”
  - Answer: This coming Spring.
- “Does this pilot have a connection with a similar state initiative?”
  - Answer: While there is no formal connection, there will be several parallels.
- “Who is the crisis respond team?”
  - Answer: Crisis respond teams will be made up of DCHD staff and the grant will support the expansion of up to two positions in the next two years.
- “Do you foresee any challenges with language?”
  - Answer: Language is an issue that we must deal with daily. We use technology like google translate, or a language interpreter line.

Members also discussed what a police officer should do while they wait for a crisis team. The answer for this divided among the different police departments.

### BHC Updates:

Lori Carnahan from the DuPage County Health Department gave members an update on programs the BHC is currently working on. The post-crisis response team worked with 132 individuals in

2018. DCHD will be presenting the post-crisis model at a conference in late March. Additionally, the BHC is working on identifying the meaning of the mental health codes used in the Uniform Crime Reporting Codes. Currently, mental health codes are not standardized and BHC has surveyed 29 PD to identify most frequently used codes. Furthermore, there have been 11 total CIT training in 2018 and 6 trainings in the first half of 2019.

Meeting members asked questions based on the updates presented.

These questions include:

- “Why are so many people choosing to go to the hospital over the crisis center?”
  - Discussion: This might have to do with people’s habits and a lack of knowledge about what services the Crisis Center has to offer. By law, you must take them somewhere, and you cannot take them somewhere they do not want to go. This would be kidnapping. When DCHD personal ID’s someone who needs services, it becomes a sale’s pitch. If they do not want to go to Crisis, the only other option is the hospital.
- “Is there autism training available along with the MHFA?”
  - Discussion: The MHFA training is a national training that provides several specialized skills, and Crisis staff has been receiving autism training.
- “Is DCHD training for drug abuse?”
  - Discussion: Staff has drug abuse training. The Crisis Center cannot provide a higher level of care. We are linked with TASC, and case managers have made themselves available to us. Additionally, we are working with Carol Stream and Bloomingdale PD when they are out on a call and crisis staff try to encourage individual to seek help. Furthermore, we are training police officers on what language to use for someone who might have drug abuse issues. Currently, we are low volume with only three cases; we are running into individuals not wanting or not ready to receive help.
- “What do you see as the longer-term solution for supportive housing for those with mental health issues?”
  - Discussion: Supporting housing for those with mental health issues is importance, and one of Impact DuPage Committee’s priority areas is affordable housing.

Questions & Other Community Efforts: