



North Alabama Mental Health Coalition October 10, 2023

Attendees (in person):

Daniel Adamek (Little Orange Fish)
Annie Brasseale (VOP)
Gina Cushing (Our Place)
Jennifer Geist (First Stop)
Lucy Givens (Best Life)
Tammy Goodwin (ALNG)
Zack Harris (Holder Construction)
Chaniece Hicks (First Stop)
Maria LeDe
Andrea Massey (Wellstone)
Judith Moon (NAMI)
Dan Pickens (Madison Fire)
Julie Schenck-Brown (Huntsville Police)
Randall Stanley (NACH)
Don Webster (HEMSI)

Kenny Anderson (City of Huntsville)
Darlene Burton (Salvation Army)
Woodie Deleuil (NAMI)
Carol Gentz (Community of Hope)
Kelli Glass (Wellstone)
Tennille Harkins (Downtown Rescue Mission)
Jessica Hays (Huntsville Hospital)
Kim Holder (Not One More Alabama)
Tammy Leeth (Wellstone)
Cheryl McClendon (Wellstone/WES)
Jan Neighbors (HAPC)
Mark Prescott (NAMI)
Ashley Smith (Salvation Army)
Jennifer Vandiver (Amedisys Home Health)
Mack Yates (SVDP/VOP)

Callie Bengs (UNA)
Rudolfo Chavez (SVDP)
Amy Furber (ADMH)
Zack Gilliam (HH/UAB)
Kelly Goff (ADMH)
Traci Harris (Elm Foundation)
Josaylon Henry (Wellstone)
Debbie Igou
Alexis Love (Wellstone)
Tealacy Mitchell (Thrive Alabama)
Roman Peppers (Community of Hope)
India Ramtahal (COH)
Dustin Spires (Madison Fire)
Tim Ward (Sheriff's Office)

Welcome and Introductions

Introductions are important because you need to find out who might be able to help you.

Autism Research Project – Daniel Adamek / UAH, Little Orange Fish

The Autism project is the result of a partnership that began 2 months ago with Little Orange Fish, Alabama Department of Mental Health, and UAH.

The idea was conceived several years ago to create a resource providing guidance on how to overcome mental health care hurdles in Huntsville. This project focuses on just the autism community. UAH has lots of investment in GIS (Geospatial) systems. They are trying to take advantage of data from *Google Maps*. The systems of care that support mental health are not just Wellstone, but also HEMSI, law enforcement, school systems, etc. The first step of the project is to capture all of the information regarding who's who and who provides what into a map database. Currently they are in the process of determining who's who in the autism community and what information is relevant to them. The next step is working with AI ("Artificial Intelligence") community (UAH professors) to put a chatbot in the front end so that the data can be accessed more easily. It will be a large language model (like ChatGPT) to use the data collected and enable users to converse with a chatbot. The ultimate objective is for the system to give you a playbook for whatever you ask of it: a guide to help people navigate systems of care, in this case, autism. We are in the data gathering phase right now and trying to determine the information that will be most useful.

The end result hopefully will be a chatbot that can converse in the same language as the user and help them with the services they need. They are very fortunate to have a partnership with UAH.

Mack asked if they are going to expand this into the mental health realm. Ultimately this approach should be able to be expanded to the general population and continue to evolve as tech evolves. The current project will allow them to determine what works and what doesn't.

Someone asked about the increase in the numbers of diagnoses of autism. Diagnostic ability is improving and the definition of the autism spectrum has changed. One of the tricky things about this project is trying to find services needed across the autism spectrum.

Someone also brought up the importance of the command prompts in ChatGPT and Daniel mentioned that a significant part of their research is trying to figure out what kind of interface the user needs. This is not going to be ChatGPT, but will use the same underlying technology and the user interface is still to be determined.

Daniel announced that the big fundraiser for Little Orange Fish is next Friday (October 20th) at *The Shed at Stovehouse*. The event features several artists from the community as well as music provided by Marcus Pope

and Friends. It is a free event this year and commemorates the 10-year anniversary of Little Orange Fish. This is the last of the “*Expressions*” events.

Daniel started Little Orange Fish 10 years ago after his son’s suicide. The mission of the organization is to try to help people understand the value of mental health in the community, of helping others in mental health, and how to navigate systems of care in mental health. This project is the keystone project of Little Orange Fish.

If you have any questions, email Daniel at: daniel@littleorangefish.org.

Continuum of Care – Homeless & Mental Illness Outreach – Joy Davis/City of Huntsville Development and Officer Jonathan Savage

Joy is with the City of Huntsville Department of Community Development. This department is where the federal and state fund grant money comes in to support the community. They are the lead for Continuum of Care, which is a Housing and Urban Development (“HUD”) program. Continuum of Care is a group of individuals and organizations which try to identify barriers and resolve issues surrounding homelessness. They handle prevention, outreach, shelter, case management, and all the way to housing. They take a leadership role in bringing organizations together.

A year and a half ago there was an acute situation with the homeless and they had to address it. They gathered all of the stake holders (police, shelters, case workers, etc.) together and worked together on addressing the issues. They discovered that they needed additional expertise on the law enforcement side. They proposed having a dedicated unit to work with all of the stake holders to help resolve issues with the homeless.

Jon Savage has been a police officer for 11 years and his first arrest was a homeless man. He is now part of a special unit that deals with this population. Much of the reason he decided to be a part of this unit is because of Joy and Community Development’s leadership role in helping to fix the problems they encounter. They have streamlined the services and are helping people learn how to navigate the system as well as taking the services to the people. They go out to the camps every week. For the first time, the unsheltered population has finally been reduced. Rather than taking a leadership role, the police are assisting others. They are trying to help everyone involved: sometimes in a humanitarian way and sometimes in a law enforcement way. You have to be careful.

Joy goes to the camp to ensure that people have the information they need. She goes out with the officers and talks about the programs that exist (and gives them a handout). The two major barriers in homelessness are mental health and substance abuse disorder. The City of Huntsville is trying to bring everyone together in partnership to get the assistance to the homeless that they need.

Someone asked Joy to present an overview of what homeless camps in Huntsville look like. Currently there is only one homeless camp on city property – probably about 40 people. There are lots of transient people and people inform the city of where the homeless can be found. They go to the homeless and try to help them with services, but explain that they can’t stay here indefinitely; they need to be off the streets. They give them time to get off the streets, but if they don’t accept help, they have to call in the law enforcement. By the time that law enforcement becomes involved, they have had multiple opportunities for help. The police have partnered with Judge Cleveland to develop an unsheltered court program which links the homeless with case management so their needs can be identified and attempts can be made to resolve their issues. If they complete the program, there is no financial consequence and no jail time.

As of July, the unofficial count of the unsheltered is 230 and the sheltered count is 315. They determine an official count in January which must be reported to HUD.

Jennifer mentioned that the numbers might seem low. We know the count isn’t accurate and there are people that they miss.

The numbers are for three counties (Morgan, Limestone, and Madison) that make up the COC, but the majority resides in the City of Huntsville.

Jennifer mentioned how much they appreciate the leadership of Community Development and HPD in dealing with the homeless.

Joy mentioned again that although they are not experts, law enforcement officers are all mental health officers and have taken CIT.

Someone asked who would be a first contact number to get help for the homeless. Joy suggested contacting her or First Stop.

Don brought up that sometimes people want to help the homeless, but don't go about it through proper channels and sometimes make things worse. He suggested that when people want to make a donation, they should contact a legitimate nonprofit organization so that their donation will not be wasted.

Mack complimented the Continuum of Care by saying how important it is to bring together the whole community to work to resolve problems.

WES (Wellstone Emergency Services) Admissions Criteria – Cheryl McClendon / Wellstone

WES is the crisis center for North Alabama for anyone with a mental health or substance abuse crisis. You have to be in crisis to be admitted. Crisis includes suicidal thoughts, delusions, depression, anxiety, etc. They can also provide medical detox for alcohol, opioids, fentanyl and benzos abuse. To stay, you must be able to perform ADLs (“Activities of Daily Living”) such as being able to brush your teeth and dress yourself. They accept people in crisis from age 18 to 65. There is no financial burden, no insurance requirement, and no ID is required. It is only for emergencies.

They are located next door to Wellstone and their phone number is **(256)705-6444**. They are open 24/7.

A question was asked about how difficult or time consuming it is to figure out if a person is in crisis or not. The triage therapist will assess them and make a determination. Sometimes people just want to feel heard, but most people that come in have a true crisis.

There is a temporary observation unit for up to 23 hours. After that a therapist and a provider will see the client to determine if he/ she is stable enough to be dismissed. If not, the client can stay up to 7 days.

A question was asked about what the clients can do for long term treatment. Cheryl explained that when you leave the Crisis Center, you have a follow-up appointment to see a therapist at Wellstone (or you can go to your own therapist). Cheryl does recovery support and helps people with prescriptions and finding treatment.

The Adolescent/Child Crisis Center should be open by summer or fall of next year.

If there is a true medical crisis (such as a seizure), then they must go to the ER. After the client does intake, he/ she meets with a nurse and if there are any medical problems, the client then goes to hospital and must then be cleared to come back to WES.

*Next Meeting
Tuesday November 14, 2023
11:00 am at Wellstone*