



North Alabama Mental Health Coalition

June 14, 2022

Attendees (in person):

Daniel Adamak (Little Orange Fish)	Jessica Alford (Ross)	Erica Bradberry (ADMH)
Annie Brasseale (VOP)	Richard Browning (CID)	Laura Burdeshaw (Decatur Morgan Hospital)
Melissa Caldwell (Wellstone)	Selena Carter (Huntsville Hospital)	Aubin Cawthon (Ross)
Tiffani Chandler (Rehab Alabama)	Blake Cruttenden (Bradford Health)	Woodie Deleuil (NAMI)
Tracy Delgado (NACH)	Lucy Douglas (Sereno Ridge)	Laura Edwards (Part. for Drug Free Comm.)
Jennifer Geist (First Stop)	Amy Gillott (Decatur West)	Kelly Goff (ADMH)
Chaniece Hicks (First Stop)	Kim Holder (Not One More Alabama)	Rickie Irvin (Therapist)
Courtney Jeffreys (Amedisys Hospice)	Travis Jones (Thrive Alabama)	Alexis Love (Wellstone)
Pat Mayfield (Wellstone)	Heather McCaulley (VA)	Diane McCrary (NACC)
Eric McCrary	Cathy Miller (United Way)	Pamela Millwood (Salvation Army)
Janelle Morgan (Phoenix)	Krista Moulton (Therapist / NAMI)	Letricia Ogutu (Huntsville Schools)
Karen Petersen (Wellstone)	Adina Peyton (GRAMI)	Diane Pierson
Ashley Smith (Salvation Army)	Randall Stanley (NACH)	Paula Steele (Wellstone Emer. Services)
Don Webster (HEMSI)	Mack Yates (SVDP/VOP)	

Welcome and Introductions

Priorities Revisited – From your Perspective

Mack suggested that we tackle priorities. The top priority was pediatric beds, but thanks to Amy Gillott, we no longer have that as a top priority. Mack wanted to look at the top priorities that can be accomplished within the next year or so. We don't want to ignore long term priorities like Medicaid expansion, but we need to focus on solving problems that need resolution right away. It may take two meetings to get the priorities together. We need to have leaders who will step up and help manage a priority issue. Mack will be glad to work with you to help solve problems.

Don Webster feels like the first thing is to get help to people out on the street. We still need to continue with CIT and grow the program to keep people from going to jail or to the hospital. Increase CIT mitigation to get people that need help off the streets (not just the homeless) and into a treatment program.

Johnny Hollingsworth (through an email) said it is a priority to start a mobile crisis team of mental health workers that will take over once a scene is safe. He feels like if there is less law enforcement present then there will be less trauma. Don said we have become a CIT community; however, not everyone has bought into it.

Wellstone does have co-responders that go out on police calls that involve a mental health crisis. This program just got started and there are 3 or 4 co-responders.

Adina said it is about publicity and keeping the conversation going. There needs to be greater visibility with mental health. Make sure that we are keeping mental health issues in the forefront and that people continue to talk about them.

Jennifer says many people don't see the homeless. It is like "out of sight/ out of mind". Adina said it is important to get the truth out and remind people that there is a problem.

Someone mentioned that the current issue of gun control has become damaging to the mental health community. We can't blame all gun-related problems on mental illness. How can we, as a community unlink these two ideas?

Jennifer listed a priority to combat misconceptions by sharing more of the real statistics.

Mack feels like media coverage needs to be ongoing and should not just spotlight exceptional problems.

They have proven that using mental health peers helps. There are people that have "lived experience" and have been certified by the state to be mental health peers. How can we implement using mental health peers? Make use of peers and getting more peers a priority.

We need to make our efforts more consistent.

We need a grass roots mental health campaign. It is a public health issue. Get the word out through posters and other low cost publicity. Try to get the word out from people with lived experiences and show how they got help. Daniel is working on getting the word out.

Get a committee together to get the word out about mental health resources.

Selena feels like there needs to be oversight of agencies which receive funds to help with mental health issues. What is being done with those funds? There needs to be oversight for funding provided for the homeless.

Jennifer noted that there is a lot of accountability for federal money provided for the homeless.

Don asked about local money for the homeless and who oversees how it is spent. We need some transparency. Someone suggested a media podcast. Adina said she would take the lead on that.

United Way is serious about accountability with their partners and makes sure that they are accountable for the money they receive. They defund people who don't comply.

A situation was described regarding the homeless and how, even though the shelters such as the Downtown Rescue Mission exist, the homeless still need more assistance than our community is providing for them.

The Salvation Army offers two different types of help including a dinner hall that is open as a cooling station. The shelter does have rules and sometimes people will not come in even if asked. How do you encourage someone to come in if they don't want to?

Mack received an email from Southern Health Partners that run the medical facility at the jail. 300 of 1100 inmates need treatment. Only one lady can prescribe and she can only get 8 hours a week. The head of the jail indicated that the jail needs help more than 8 hours per week. If someone needs meds, they have to take them to the ER. Mack has left messages at the Sheriff's office for a call back, but no reply.

One of the problems the Salvation Army faces is that people without a State ID cannot get into treatment. They dislike the rule, but they can't get around it. If we can look them up and see they are not sex offenders, they will be allowed in. They have to have some proof that they are who they say they are.

They come to the door and can't get in because they don't have an ID. At the Salvation Army shelter they will get one night and then the next day, they work with the person to get them an ID. First Stop will help them to get a government ID.

Someone will send information about how to get a government ID and Annie will send out the information. This information probably needs to be available to 2-1-1.

Jennifer suggested that the Salvation Army could waive the sex offender caveat if you don't keep children in the shelter. The problem is that the shelter also houses women, so the sex offender stipulation protects women as well. No agency will take sex offenders.

How can we spread mental health news more broadly? How do we extend it beyond our organization? How can we engage more people that can help like the city council? We need something bigger.

Courtney said in her organization if someone from the news media calls, they take them on. No matter how small the article, it helps to get your name out there. Get a media person (an anchor perhaps) to champion the cause. The media goes to the city council meetings and will press the council for answers. She suggested that Mack talk to anyone no matter how short the time. He will be seen as the expert, so they will always go to him for comments. Courtney volunteered to help with the media access. If anyone knows the anchors, please let her know. If you don't know anyone, it is difficult to get in.

That should be a priority to spread the word in the media. We need to develop a coherent communications plan with priorities - Information operations (what they call it in the army).

Chief Brooks at the jail said another problem is long term treatment. Wellstar provides around 30 days of treatment but very few problems can be cured/ managed in 30 days or less, so patients return to the streets and end up in jail. There is no long term treatment facility that Brooks is aware of. A priority should be for a long term treatment facility.

Kristen mentioned that there is a Club house model of treatment where people can get housed, get long term support and there is even a vocational arm to get people jobs. If people don't have meaning and purpose in their lives, they won't stay well. A club house is a good option.

Selena asked if anyone knows about Madison County being a new beta testing site for the intellectual disability waiver. There was a legacy waiver where they were trying to keep people at home. There are no more spots. Now if Grandma was the caregiver and she dies, then there is no one continuing her care for the disabled. They do not have a place to go and end up on the streets. There is a coordinating board called 310, but they are still trying to figure it out themselves.

Don said that the issue of adolescents has been a problem, but it is getting better. Amy is his hero for getting beds in Decatur for adolescents. Wellstone Crisis Center will open in August or September; however the pediatric part will not open until next year. Having more beds available at Decatur West has been wonderful and we are making headway. Amy said they have 54 beds, but they are not currently staffed to handle all of them; however, progress is being made. We should have a "Success" board.

Someone mentioned that a priority should be to inform parents on how to navigate the mental system. We need a roadmap to help parents. Daniel Adamak is working on this.

Selena said that one of the problems is that there are not consistent outpatient services for adolescents. There is more emphasis placed on adult mental health than on children's. Finding long term mental health care for children is a big problem and should also be a priority. One of the problems is that the health care workers are not paid enough.

Krista mentioned that one solution is having private practitioners handle some of the cases; however you need a larger staff or a cover of something like Wellstone to handle the Medicaid issues. Other states are moving to a more decentralized model. A priority would be to push the state to contract out the mental health services to private practitioners. Give the funding to private groups instead of just Wellstone. Most of the people need more than just therapy; they need case management as well. It would really help to have Wellstone as a partner. DHR has started doing contracting.

Unfortunately with Medicaid it is easier to get inpatient services than outpatient and also there are so many families that don't help children to follow-up with their treatment.

Huntsville City Schools do collaborate with Wellstone. Children are in the program because their parents can't get them to treatment. In the summer, however, the kids don't have help. How do we bridge that gap in treatment?

Mack said we will continue this next time.

Please send Mack/Annie an email if you would like to tackle any of these problems. Please write it up and let him know you are volunteering and he will meet with you.

Next Meeting
Tuesday July 12 , 2022
11:00 am at Wellstone