Mental Health Opportunities For Youth Diversion Task Force

Meeting Minutes

May 8, 2017

10AM-12PM

Cathedral Counseling Center

50 East Washington, Suit 301, Chicago, IL 60602

ATTENDANCE

In-Person Attendees: Sharon Coleman, Bill Pieroth, Brian Conant, Rebecca Levin, Brandy Brixy, Quinn Rallins, Jen McGowan, Wendy Nussbaum, Sen. Donne Trotter, Vanessa Westley, Rachel Reichlein, Andrea Durbin, Candy Malina

Conference Call Attendees: Rep. Sara Feigenholtz, Rob Vickery, Tyler Edwards, Jennifer (for Brent Fisher)

WELCOME & BACKGROUND

Jen McGowan opened the meeting and explained that we would spend the meeting reviewing background and purpose of the task force, setting expectations for meetings and participation, selecting the steering committee, and discussing the focus and direction of the task force.

Rep. Sara Feigenholtz and Sen. Donne Trotter provided background on the Task Force and explained that they sponsored the legislation because our state needs to do a better job addressing the mental health needs of youth and we need a roadmap and process to develop recommendation for the next legislative session. We need children and their needs to be at the forefront of the budget process. But we also need to be cautious about including large structural changes and resources in our recommendations. We need to find opportunities to address problems locally.

INTRODUCTIONS

Attendees introduce themselves and shared the biggest challenges in their work for reducing the number of youth experiencing mental health conditions. These challenges included:

- Overcoming stigma in the community about mental health
- Accessing data within privacy laws
- Communication between agencies
- Equipping dispatchers and police officers with resources and tools to respond to mental health
- Current and future funding
- Wraparound services that involve families
- Trauma-informed approaches
- Continuum of services
- Poor Community health resources. Screening and assessments can be weak at recognizing issues early.
Need for more mental health providers in underserved areas
Symptoms can be difficult to spot
More counseling and medication management in communities
Transit
Educating prosecutors

REVIEW OF LEGISLATIVE CHARGE

Develop an action plan to divert youth in contact with law enforcement that require mental health treatment into mental health system instead of juvenile justice system
Review existing and potential diversion opportunities
Identify funding sources
Identify barriers to implementation
Recommend pilot programs

REVIEW OF TIMELINE

Monthly meetings thru August
Action planning September-October
November – February Action Plan drafting
January 22, 2018 – finalize action plan

REVIEW OF BEST PRACTICE GUIDE

Everyone was encouraged to review the best practice guide for themselves, which includes one-pagers on various programs locally and nationally. The common components of the programs include the following:

Screening and assessment to identify mental health symptoms and service needs
Family/parental involvement
Participation in the community-based mental health services including evidence-based mental health services, individual and family therapy, and medication management

Afterwards the Task Force members made several suggestions, including:

Group needs to operationalize terms such as “diversion”, “youth”, and other health definitions.
More involvement from providers and non-Cook County stakeholders
Include race and gender-based analysis and approach

STEERING COMMITTEE

The Steering Committee will provide leadership during task force meeting and help set the agenda. Based on appointments and volunteers, the steering committee will include:

Jen McGowan (Co-Chair)
Quinn Rallins (Co-Chair)
Sharon Coleman
Rebecca Levin
GUIDING PRINCIPLES

- Using a strengths-based model by focusing on what the state does well with youth diversion
- Consensus from stakeholders
- Ensuring there is not disparate impact on given communities
- Not creating duplicate or redundant services
- State wide, not region focused
- Intent on being action and solution focused
- Focus on areas where feasible solutions are available (can’t do everything at once)
- Engagement of family systems

For working together:

- Be respectful
- Step up and step back when appropriate
- Be understanding of differing perspectives
- No additional expectations mentioned

MEASURES OF SUCCESS

- Need to focus on 18 and under considering that’s the population that most stakeholders in the Task Force work with it, and because that’s whom most of the data covers.
- Need to be aspiration and expand the conversation around adolescent development and research that the brain is not emotionally developed until 25.
- Majority of attention should be on the initial phase of the sequential intercept model (pre-involvement to court)
  - Focus on the police station- whether there are social worker or clinicians
- Clarity on the offenses we want for diversion? (Persons living with mental illness usually have low-level offenses)
- Broad representation from throughout the State.
- Clarify wrap around support – who to include in this? Outside of usual suspects (teacher, ER Staff)
- Be clear on which recommendations rely on infrastructure (e.g. juvenile mental health courts)
- Identifying infrastructures across the state, similar and different
- Acknowledging different demographics – race, gender, etc
- Identifying and creating continuum of care
- Recidivism should be a main focus for the backend sequential intercept of our recommendations
- Need to setup accountability mechanisms for progress following action

Next Steps
• Officially appointed members: DHS will contact you about your responsibilities
• Review the Resource Guide
• Send any data or recommendations for Task Force members to co-chairs. If you have data that may be important, send it to Quinn Rallins
• June Meeting: Location TBD
• Steering committee, watch for Doodle Poll.

Public Comments

• None