



# Mental Wellness Workgroup Retreat

June 14, 2023 8:30am - 12:30pm

## Meeting Minutes

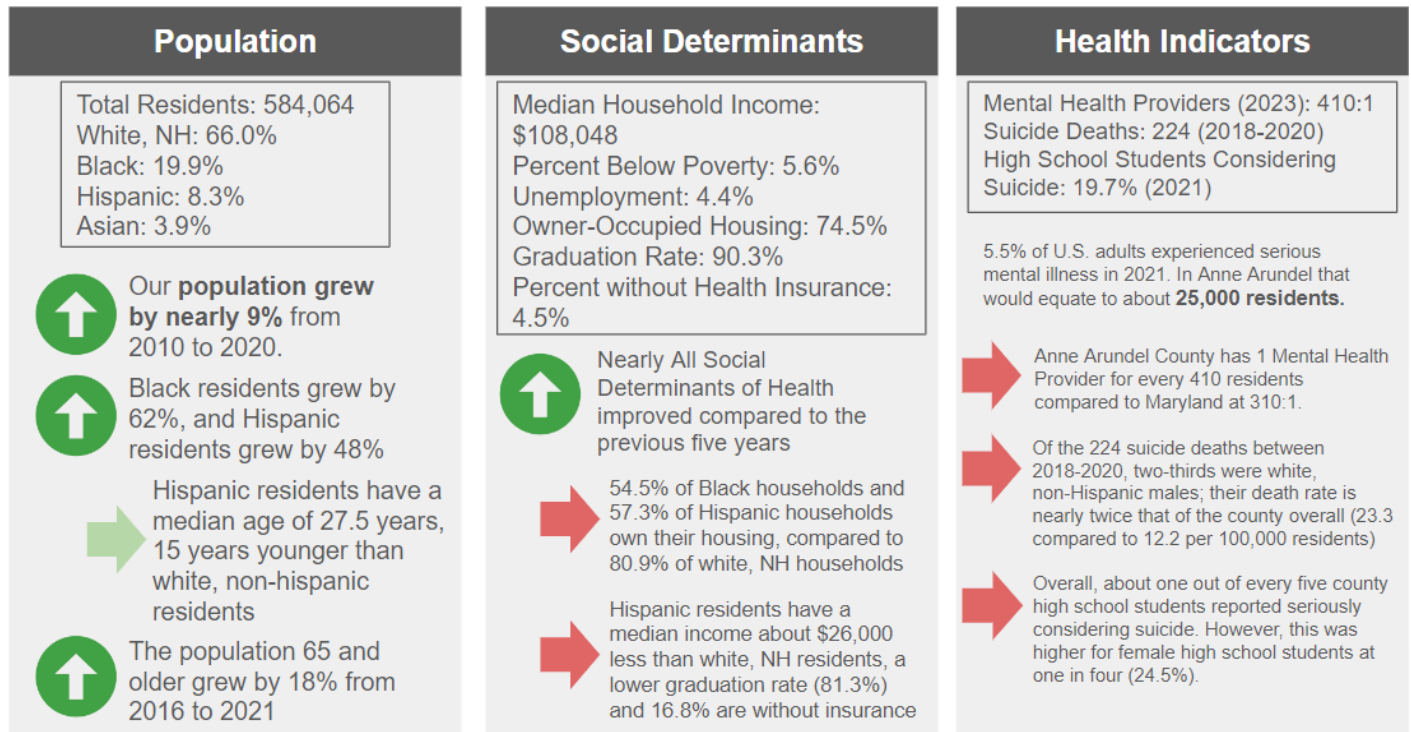
**Staff support:** Mindi Garrett, DOH; Donna Perkins, DOH

**Attendance:** Tameka Smith, CE; Ann Hoyt, MHA; Sandy O'Neil, DOH; Sara Schmidt, DOH; Sarah Stein, Aging; Anne Thomas, private business; Catherine Gray, MHA; Diane Benner, AACPL; Donna Phillips, Luminis Health; Eric Sullivan, Prosper App; Adrienne Mickler, MHA; Delicia Ennis, Reentry Resource Center; Caitlin Hall, DOH; Darin Ford, DOH; Ebony Shurger, Rec & Parks; Della Roderick, Private Practitioner; Kristin Coleman, DOH; Corynna Limerick, DOH; Dr. Tonii Gedin, DOH

**Prosper App Presentation- Eric Sullivan** <https://www.prosperselfcare.com/>

## Presentation of data from the County Health Assessment and the Mental Health Agency:

# Anne Arundel County Snapshot



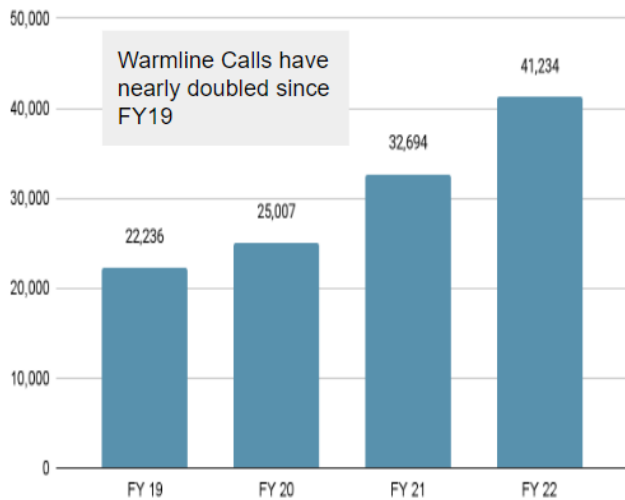
Source: U.S. Census, 2021 ACS 5-year estimates

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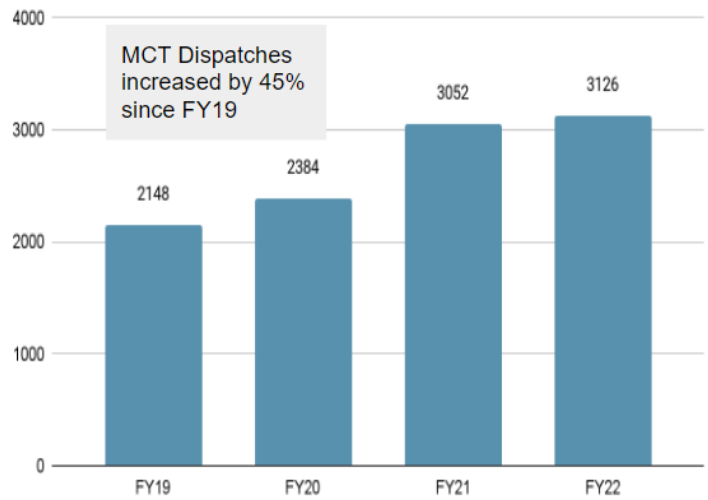
Source: 2021 Maryland BRFSS, 2021 MD Cancer Report, CDC Wonder Underlying Causes of Death

# Anne Arundel County Mental Health Agency, Inc

Warmline Calls In



Mobile Crisis Team Dispatches



**The LBHA Plan:** Using the Local Behavioral Health Plan, we focused on the priorities of Education and Prevention as a framework to identify potential roles for Healthy Anne Arundel.

**VISION**  
All people in Anne Arundel County have the resources and support they need to manage their behavioral health (substance use + mental wellness) and lead fulfilling lives.

**MISSION**  
To ensure a coordinated system of behavioral health care that meets the unique needs of individuals of all ages and stages from education and prevention through treatment and recovery

**STANDARD OF CARE**

- Accessible to all and meets people where they are across the lifespan
- Responsive - to a person's unique identity, culture, language, and trauma
- Evidence-based and open to innovation
- Comprehensive - including prevention, management, and treatment
- Family- and person-centered
- Collaborative - with warm handoffs/seamless transitions among agencies and providers

## Collective Agenda for Behavioral Health in Anne Arundel County FY24 - FY26 As of 4/25/23

**RESULTS**

- Communities embrace behavioral health and mental wellness as a key component of overall wellness
- Individuals and families have the support they need to prevent and manage behavioral health issues
- All people are physically, mentally, and emotionally healthy

**PRIORITIES + STRATEGIES**

1 EDUCATION & PREVENTION	2 QUALITY	3 EQUITY	4 ACCESS
<p>Increase behavioral health programs that promote mental well-being, reduce trauma and stress, and prevent substance misuse, suicide, and other risky behaviors.</p>	<p>Provide quality care through increased use of proven and promising practices, workforce development and training, and quality management, monitoring and improvement.</p>	<p>Increase equity in behavioral health services through people, policies, practices, and programs that recognize and value all individuals and families.</p>	<p>Increase access to behavioral health care through a state and local, integrated health and human services system, enhanced care coordination, and expanded use of technology.</p>

**CROSS-CUTTING STRATEGIES**

1) Identify the most important behavioral health issues to focus on including depression, suicide, and substance use 2) Address social determinants of health 3) Create social model that recognizes the whole family across the medical model 4) Build political will at the state-level (BHA) to support the Collective Agenda

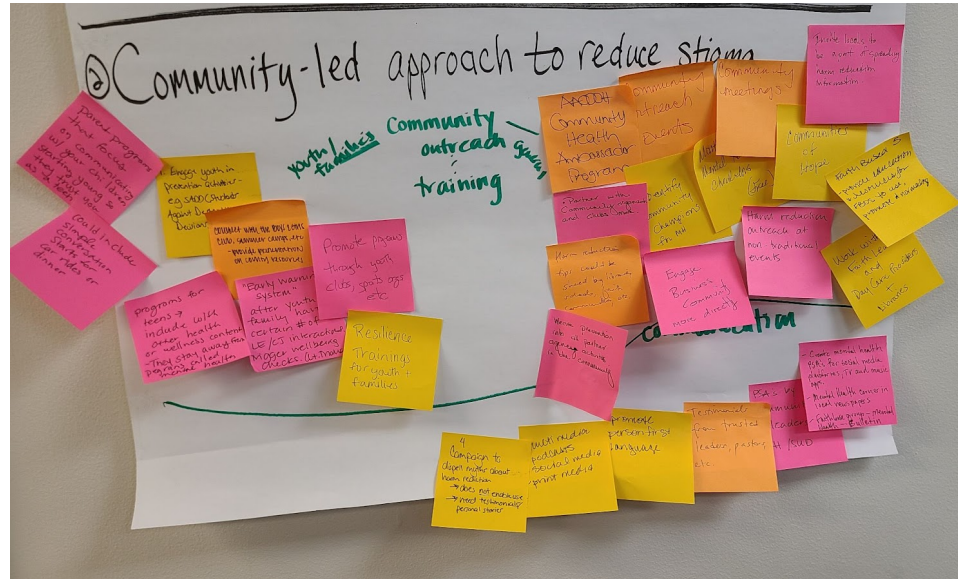
<ul style="list-style-type: none"> <li>• Reach youth and families earlier, before issues occur</li> <li>• Community-led approach to reduce stigma of behavioral health, identify stressors and triggers (e.g., sleep) to promote resiliency, and elevate awareness of available resources</li> <li>• Collaborate across systems (school, healthcare), agencies, and task forces on related issues to address root causes, barriers, gaps in resources, and transition care</li> <li>• Educate community on harm-reduction strategies and how to advocate and navigate support for themselves</li> <li>• Engage nontraditional public and private partners to focus on primary prevention</li> </ul>	<ul style="list-style-type: none"> <li>• Promote, monitor, and report on impact of a standard of care</li> <li>• Increase access to and frequency of trainings for practitioners on standard of care</li> <li>• Elevate behavioral health as a profession and foster communities of practice, including specialized care</li> <li>• Leverage the skills of seasoned professionals with paraprofessionals to balance caseloads and share knowledge and experience</li> <li>• Create data agenda and shared measurement system for data tracking</li> <li>• Improve technology and technical support to monitor quality standards</li> </ul>	<ul style="list-style-type: none"> <li>• Engage Communities of Hope and Community Schools in identifying gaps and barriers to accessing services</li> <li>• Improve racial and cultural competency of providers</li> <li>• Mobilize grassroots support for a policy agenda to create incentives/equitable pay scale and remove barriers for behavioral health professionals</li> <li>• Offer services and support in multiple languages</li> <li>• Review funding allocations and make shifts to increase equity</li> <li>• Focus on intersections among age, race, and gender</li> <li>• Connect services to social and structural conditions that impact underserved communities</li> </ul>	<ul style="list-style-type: none"> <li>• Map gaps in the continuum of care</li> <li>• Increase funding and leverage the work of partners to address gaps</li> <li>• Emphasize wellness and improve the environmental conditions that affect behavioral health</li> <li>• Further involve parents/families in the behavioral health care of their children</li> <li>• Support people in advocating for themselves and navigating support</li> <li>• Use more community spaces for behavioral health care</li> <li>• Ensure availability of providers and services for treatment and ongoing management/recovery</li> <li>• Work with higher education and workforce development to build the future workforce for behavioral health</li> </ul>
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**PROGRESS INDICATORS**

1) Increase in use of mental health and substance use helplines 2) Increase in people accessing mental health services 3) Reduction in suicide 4) Reduction in opioid use (all data disaggregated by age, race, ethnicity, gender) 1

**Group exercise:** Participants wrote their ideas for the 5 Education and Prevention topics on sticky notes, then we grouped the suggestions into similar categories to discuss them in greater detail.

LBHA Plan: Education & Prevention
1. Reach youth and families before issues occur.
2. Community-led approach to reduce stigma
3. Collaborate across systems to address root causes, barriers, gaps
4. Educate community on harm reduction strategies
5. Engage non-traditional partners on primary prevention



LBHA Plan Focus: Education and Prevention	Suggested Actions
1. Reach youth and families before issues occur.	<ul style="list-style-type: none"> <li>● Mental health education in the school curriculum.</li> <li>● Mental health risk screening, intervention for students.</li> <li>● Sleep education.</li> <li>● Prosper App: promote mental health tools.</li> <li>● Have a presence during youth sporting events.</li> <li>● “Fifth Quarter” activities for students to enjoy after sporting events.</li> </ul>
2. Community-led approach to reduce stigma.	<ul style="list-style-type: none"> <li>● Dispel myths to reduce stigma. Build this into all communication using person-first language.</li> </ul>
3. Collaborate across systems to address root causes, barriers, gaps.	<ul style="list-style-type: none"> <li>● Organizations attend and present at each other's meetings.</li> </ul>
4. Educate the community on harm reduction strategies.	<ul style="list-style-type: none"> <li>● Promote mental health resources: NOC/ Be Well AA.</li> <li>● Mental Health Awareness Month 2024.</li> <li>● Encourage community organizations to support and participate in harm reduction efforts.</li> </ul>
5. Engage non-traditional partners on primary prevention.	<ul style="list-style-type: none"> <li>● Expand Partnerships: HAAC serves as a match-maker for organizations with aligning goals.</li> </ul>

Additional needs were acknowledged during this brainstorming activity:

- Communication and outreach: As a group, we would like to better communicate with each other what programs and activities we are working on. We can all be more productive by supporting each other’s programs, rather than working for similar objectives separately. The proposed resolution:

- Having a central location for information about community events and resources
- Vendor Resource Menu: Create a list of vendors and resources who participate in community events (such as those who offer vendor tables)
- Crisis response Warmline: Develop an info card, training, or PSA to help alleviate fear and anxiety that prevents people from calling.
  - Add this training to employee orientation
  - Encourage small businesses to offer this in orientation
- Employee Assistance Program needs to be available/ accessible to all county employees.
- Policy monitoring: Track and communicate about mental health-related legislation.