**ESP Meeting Minutes**

**September 25, 2023 11 a.m.**

**Present:** Stephanie Busch, Mark McDonough, Ollie Neith, Trevor Whipple, James Gulley, Prescott Nadeau, Len Howard, Clarke Collins, Ashley Happy, Loretta Stalnaker, Matthew Engels, Donna Jacob (notetaker)

**Welcome and check-in**

Stephanie reviewed the agenda and asked Trevor to track the status of a quorum. It was noted that as the meeting started, the group was 2 members shy of a quorum.

**July Minutes**

July 24, 2023 meeting minutes review – 1 shy of a quorum so may need to vote by email. Stephanie will send out the minutes for an email vote, or they can be reviewed and approved at the next meeting.

Stephanie produced a list of current members and asked if each individual could update their information (organization, title, contact info). The legislation was written that terms varied from 1, 2 or 3 years, thereby assuring continuity for the commission. The first term members have expired but unless the agency picks a different person, their term is automatically extended.

**Member Updates**

**DMH Conference 2023: Reshaping Mental Health Systems through Integration—a Statewide Symposium on Advancing the Mental Health System (Samantha Sweet)** – DMH is having a conference 10/19/23 at the Killington Grant Resort Hotel in Killington. Theme is Integration. Three tracks: Forensics, Wellness (Burnout/Exhaustion), and Medical/MH Integration. <https://mentalhealth.vermont.gov/dmh-conference-october-19th-registration-now-open>

**Mobile Crisis Unit Update (Samantha Sweet) –**

Following the 3-pronged SAMHSA model: Someone to Talk to, Someone to Respond, and Somewhere to Go.

* Someone to Talk to: 988 will connect to 2 lifeline centers
* Somewhere to Go: Alternatives to EDs are sprinkled through the state. The list is still being developed and contracts are still being signed.
* Someone to Respond: Statewide mobile crisis unit.

Currently MH is contracted with HCRS in Windsor County. HCRS will be sub-contracting with 9 other agencies to provide mobile response. Response is currently varied county to county. In the future, the response will involve a 2-person team. One of those may be virtual. One of those 2 is recommended to be a PEER or a case manager, and the other needs to be a professional. This service is reimbursable for a community response or a walk-in but are not reimbursable if responding to the ED. This is a strong attempt to increase community response and decrease ED visits. Still working out the bugs.

Hoping 988 will be the way to activate the mobile crisis team. The other way to activate is to contact the contracted agency directly. On 2/1/24, cards will be ready that will say to call 988. Anyone can call…public, patient or fire/EMS/LE. The 2/1/24 launch is very tentative at this point.

Len asked about a dispatch protocol. Samantha explained the hope is to simply make a 988 call – mobile crisis needed. From there, a screening process will be in place that will involve only one statewide dispatch point, so it’ll be easier to keep track. This will be completely different in the current system, which is to call the contracted agency. In the future, dispatch will have all of the contracted agencies to work with vs. just the agency in that geographical area.

Marketing/advertising efforts are being developed now. Stay tuned.

**Vermont EMS Statewide Protocols Being Revised (Stephanie)** –

The VT EMS office is beginning the review and edits to the statewide EMS protocols and are currently flagging any protocol what will touch patients in MH crisis. Input to that process will need to be considered.

**Vermont Emergency Management Conference (Prescott Nadeau) –** Attended the Emergency Management Conference in Burke and sat in on the American Red Cross presentation. A big component of their mass care protocol is related to emotional response, disaster recovery, etc. They have folks who are trained specifically for emotional response, and they embed them in shelters, etc. Before the shelter shuts down, they offer the chance for folks to sit and chat. And they also offer this as a first responder resource. He’s reached out for more information from them to share for a future meting or to open a line of communication with them. <https://www.redcross.org/get-help/disaster-relief-and-recovery-services/recovering-emotionally.html>

**DMH Crisis Counseling Programs through FEMA (Samantha) –**

With the floods and the disaster declaration, DMH applied for crisis counseling programs through FEMA and has contracted with 7 agencies in 9 counties to provide counseling. They can do group or individual sessions, can go into town halls or crisis centers, or other venues. The goal is to get people connected to resources. The service is completely anonymous. Just held a training 2 weeks ago.

Vermont 211 has the information. Ask for the crisis counseling program.

**Vermont Suicide Prevention Symposium (Stephanie) –**

Happening this Wednesday, September 27th. Traditionally this is geared toward clinicians, but one of the keynote speakers is Sonny Provetto, who is a licensed social worker and the founder of the Vermont Center for Responder Wellness. <https://vermontsuicidepreventionsymposium.org/lessons/a-constructivist-view-of-suicide-how-does-one-make-meaning/>

**First Responder Wellness Conference in Castleton July 2023 (Mark McDonough) –**

With the conference rescheduled due to flooding, I could not attend, but attendees said they were happy they went. A group review has occurred, and we’ve identified strengths and weaknesses. Planning is already underway for next year’s conference. Initially over 100 registered, but numbers dropped significantly due to flooding and rescheduling. Our planned keynote speaker could not attend either. Also looking to alter the date so it’s not right in the middle of summer…perhaps early to mid-June. Stephanie: I felt it was really good. Great mix of topics and networking.

**Qualified Clinician Definition (Mark) –**

The July meeting minutes looked like it included a description of clinicians appropriate for treating first responders. Any movement? Stephanie – no, that was just an introduction to the topic. Hoped Christina and Bill would be on today. We chatted about getting a group to do some research and report back.

**Legislative report**

Stephanie reviewed the [2022 report](https://legislature.vermont.gov/assets/Legislative-Reports/2022-ESP-Wellness-Report_-final.pdf) submitted to the Legislature. This year, the report is due 12/15/23. The final report needs to be submitted by 11/1/23 so the policy folks can review it in time for the 12/15 submission. Originally the legal staff indicated they needed the report by 10/10/23, but agreed to push the deadline to 11/1/23.

She suggested reviewing the overall report and talking through recommendations and future activities, updates, and what should be added for 2023. Given no argument, Stephanie pulled up the 2022 report to review with the members.

When asked about the timing of the November meeting, Stephanie indicated the plan had been to hold the November meeting toward the end of the month. However, in view of the timeline, she suggested that a group take the lead, set up October meetings, and then be able to bring it back to this group at the end of October to review and make edits. Mark pointed out that of the 4 goals, the group has made solid progress on 3 of the 4 goals. Currently working on defining a qualified clinician, and we have a stronger list of clinicians identified. Held an annual conference. Update coming on the PTSD workers comp legislation.

Len Howard echoed what Mark said and asked about legislative funding. Stephanie asked if anyone had strengths in obtaining funds from the legislature. Mark – thought is to get buy-in from the agencies that represent our branches of first responders. To increase programs and training, we need the Commissioners of Corrections, training and Public Safety to come to a consensus that creating a mandated training on mental health and wellness is needed. Ashley - PSAPs and dispatch centers couldn’t mandate it but could offer it. Stephanie – anyone have thoughts on how to build up a training for dispatchers? And Sam, if you’re working with 911 PSAPs, what conversation has there been around regional dispatch? (Sam had stepped away.) Ashley said she just put on a training, and 988 was represented. They’ve been talking about municipal contacts and local agencies. She believes there will be movement on that soon.

Mark – we need the commissioners of the agencies to agree that this is needed, but we can also lean on folks on this commission that can pressure those commissioners toward making the right decision. PFFV, trooper’s union, VT Ambulance Association, and other lobbyist groups could apply pressure to legislators.

Stephanie – in thinking about mandated training, is there an interest in requiring 1 – 2 hours for all first responders? Mark – we’d talked about that when we reviewed the NH training, and we’d thought about requiring a 1-hour course/refresher. We need to find out how they confirm that members have done the training. If it’s a fire department, once a year the chief submits a report saying that each of their members has attended the training necessary. SB - At the very least, take this training. Mark – ideally the training is overall educational in nature and fresh every year. The training will give you tools in your toolbox but also provide updated resources, so folks know what is available. We’ve yet to do a good job reaching our rural communities.

Trevor – agrees with Mark. Police did the same as fire with attestations about minimum CE completions. The governor has been clear that there will be no new taxes. Not going to raise revenues via taxes. But is there a way to work with the commissioners and pool resources. We’re more accepting of remote training or on-demand training. There has been a lot of work in the area of “it’s oikay to not be okay.” And that needs to be a new, annual training and a fresh reminder each year that help is there.

Len Howard – maybe we can get the fire academy, Vermont EMS, etc. (Skaza, Moran, etc.) to make a video of our own folks with information about the available resources. Chris Dubie (PFFV rep) could also be a resource in getting to the legislature.

Prescott – leveraging….great idea. Talking points would be helpful. We need to drag these down to the one-sentence bullet points. Maybe in the October meeting we can create bullet points. Also, if any of the folks on this commission have a grant person, let’s tap that already overworked person as grant funds may be one of the only avenues.

Mark – can’t forecast the cost but can’t imagine it will be terribly expensive. The tools and the trainings already exist…like the Ag department having the ability to put out great videos in a short time. Stephanie – with EMS, she spoke to Courtney, the new training person. EMS has some funding that might be tapable. It will just take weeding through agencies and tapping the folks who can best assist us.

Let’s identify a tentative October date…and see who might be interested in digging more into the legislative report.

Volunteers for the Legislative Report Workgroup:

* Mark McDonough
* Ollie Neith
* Trevor Whipple
* Ashley Happy
* Prescott Nadeau

For the legislative report team, Stephanie will send out a doodle poll and also invite any of the other commission members to participate. She’ll also put out a poll about an October commission meeting.

**PTSD Workman’s Compensation Legislation Update (Stephanie) –**

Stephanie read a brief overview from the legal team that reviewed VT’s legislation vs. that of other states. The overall conclusion was that VT’s legislation is more comprehensive in favor of first responders, but that the definition of first responder needs to be reviewed and expanded. The commission agreed to build that request into the 2023 legislative report.

Trevor – costs need to be considered. Often, early intervention is less expensive, both monetarily and based on life impact.

The group adjourned at 12:30 p.m.