

Partnership for a Healthy Durham Mental Health Committee
1/20/2022
Minutes
Zoom 2:00pm-3:30pm

Meeting Outcomes:

- Finalize CHIP Plan

Facilitated by: Ashley Bass-Mitchell

Agenda Items	Major Discussion Points	Recommendations
Icebreaker and Announcements	<p>What is a daily self-care habit do you do each day?</p> <p>Selina Mate is the new Immigration and Refugee Coordinator with the City of Durham. She shared that UNC Wellness is the sole provider of mental health resources to the immigrant and refugee population, but this service will no longer be available. There is not funding for this program, and no one is currently in the Executive Director position.</p>	
Review Minutes from December	The minutes were approved.	
Review Assets and Challenges	<p>Christa shared her screen to show the agenda for the day.</p> <p>The group reviewed the assets and gaps this committee developed the last meeting. Participants were given the ability to add to the Padlet or make amendments to the information already there. The complete list can be found at this link: https://padlet.com/durhamparentadvocacy/t0j2368nrglzkfyf</p> <p>Assets include: community-based services, collaboratives/coalitions for early childhood mental health (Early Childhood Mental Health Taskforce, Early Childhood Action Plan), more access to non-profit organizations than many other parts in NC, lots of mental health providers compared to other communities, close to multiple large academic medical centers, action focused community, faith-based organizations (especially their work on reducing stigma), community-rooted culturally affirming programs that increase social connection, community focused supports and workers, many police officers are Crisis Intervention Team trained to connect individuals to mental health resources instead of jail, and Community Safety and Wellness Taskforce.</p> <p>Challenges and Needs include: access to services in rural parts of Durham County, not enough community resources as a result of COVID and funding cuts, safe spaces for</p>	

	youth and young adults, not enough bilingual providers, insurance coverage, stigma, no Medicaid expansion in NC, and length of access time for some services	
Develop Indicators	<p>Reviewed the committee’s results statement developed at the last meeting: <i>All people in Durham County collaborating to create accessible, affordable, and affirming integrated quality services and support.</i></p> <p>This statement will be used to create our indicators. What would it look like if we could experience these in the short term and the long term and how can we measure them?</p> <p>1) People receiving the services they need instead of going to the Emergency Department.</p> <p>Measurements:</p> <ul style="list-style-type: none"> • Track the number of calls to service providers. • Look at the number of people being re-directed from Emergency Department. • Look at EMS calls and see how many of these are mental health related. Pull from public safety? • Duke is looking at their data to see those who have been re-admitted after 7-10 days and can most likely share this data (without personal information being disclosed). • Share non-emergency numbers across networks (intervention) • # of Calls to Alliance Mobile Crisis (800) 510-9132 <p>2) People feel that the mental health resources are accessible</p> <ul style="list-style-type: none"> • Access to culturally affirming, trauma informed providers • Increase the number of bilingual or LGBTQ providers (intervention) • Accessible services that are affirming of their identity(ies) <p>3) Physical environments that are supportive of healthy mental health care</p> <ul style="list-style-type: none"> • Assess the physical spaces for characteristics of supportive, healthy mental health care environments (intervention) <ul style="list-style-type: none"> ○ Lighting ○ Colors ○ Volume and tone of people’s voices 	Use NCCARE360 data for some performance measures.

	<p>Next, the group looked at each indicator they developed and evaluated them based on communication power, proxy power, and data power. From this information, they identified the top two indicators.</p> <ul style="list-style-type: none"> • Performance measures • Alex will take one, Kimberly will take one 	
<p>Evidence-based Interventions & Next Steps</p>	<p>Bria shared her screen and explained the evidence-based strategies proposed in the 2020 Community Health Assessment and County Health Rankings. These, along with a column for new ideas were shared in a Padlet https://padlet.com/durhamparentadvocacy/cjrsjomqc69fo3kh</p> <p>Links to County Health Rankings were also provided that linked to descriptions of each intervention and their levels of proven efficacy.</p> <p>Meeting participants were able to access the link and vote if they are in favor of or against working on each of the strategies. The conversation followed the lines of SWOT analysis and discussions of efforts that are already being done by others in the community. The outcomes are below.</p> <p>2020 Community Health Assessment</p> <ul style="list-style-type: none"> • Expand Medicaid eligibility criteria to increase access to mental health services (3 for, 2 against) • Increase state funding for mental health services provided through local mental health services (3 for, 0 against) • Implement policies targeted to decrease access to lethal means (1 for, 0 against) • Improve access to social services and other supports (3 for, 0 against) • Increase programs that provide mental health services and support for LGBTQ youth (2 for, 0 against) • Increase programs that provide mental health services and support for veterans (2 for, 0 against) • Continue to support the integration of physical and mental health (3 for, 0 against) • Expand access to tele-mental health services (CHR also) (3 for, 0 against) • Create trauma informed schools with access to mental health provider (CHR also) (4 for, 0 against) 	

	<p>County Health Rankings</p> <ul style="list-style-type: none">● Mobile Health for Mental Health (3 for, 0 against)● Mental Health Benefits Legislation (2 for, 0 against)● Mental Health First Aid (3 for, 0 against)● School-based social and emotional instruction (4 for, 0 against)● Flexible scheduling (2 for, 0 against)● Community arts program (3 for, 0 against)● Tele-mental health services (2 for, 0 against)● Trauma-informed approaches to community building (2 for, 0 against)	
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- Community arts program (3 for, 0 against)
- Tele-mental health services (2 for, 0 against)
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