

CO-CHAIR, PENROSE HOLLINS
COUNCILMAN FOURTHTH DISTRICT
CO-CHAIR, LISA DILLER
COUNCILWOMAN FIFTH DISTRICT



COUNCIL

LOUIS L. REDDING CITY COUNTY BUILDING
800 N. French Street, Wilmington, DE 19801
Office: Hollins: (302) 395-8344 Diller:(302) 395-8365
E-mail: Penrose.Hollins@newcastlede.gov
Elisa.Diller@newcastlede.gov

Meeting Minutes

COMMUNITY SERVICES COMMITTEE

Tuesday, May 25, 2021

4:00 P.M.

*****VIRTUAL ZOOM WEBINAR MEETING*****

1. Call to Order

The meeting was called to order by Ms. Diller at 4:00 pm.

Councilmembers present: Mr. Bell, Mr. Carter, Mr. Cartier, Ms. Durham, Ms. Hartley-Nagle, Mr. Hollins, Ms. Kilpatrick, Mr. Sheldon, Mr. Smiley, Mr. Street, Mr. Tackett, and Mr. Woods

2. Approval of Minutes

Motion to accept the Minutes of the Community Services Meeting from April 27, 2021 was made by Mr. Smiley. The motion was seconded and unanimously approved by Council.

3. Introduction of Ordinance(s)

°21-067: AMEND THE GRANTS BUDGET: APPROPRIATE \$205,375 IN ANTICIPATED STATE OF DELAWARE GRANT-IN-AID FUNDS TO THE ABSALOM JONES SENIOR CENTER FY2021, WHICH WILL BE ADMINISTERED BY THE DEPARTMENT OF COMMUNITY SERVICES. Introduced by: Mr. Hollins, Ms. Diller (to be voted on June 8, 2021)

- Ms. Diller read the Title.
- Marcus Henry (GM Community Services) provided update.

°21-068: AMEND THE GRANTS BUDGET: APPROPRIATE \$17,450.28 IN ACTUAL PROGRAM INCOME TO THE NCC FARMER'S MARKET GRANT, WHICH IS ADMINISTERED BY THE DEPARTMENT OF COMMUNITY SERVICES. Introduced by: Mr. Hollins, Ms. Diller (to be voted on June 8, 2021)

- Ms. Diller read the Title.
- Marcus Henry (GM Community Services) provided update.

°21-069: AMEND THE GRANTS BUDGET: APPROPRIATE ACTUAL PROGRAM INCOME OF \$164,000 AND \$600,000 IN ANTICIPATED PROGRAM INCOME TO THE NEIGHBORHOOD STABILIZATION PROGRAM II GRANT, WHICH IS ADMINISTERED BY THE DEPARTMENT OF COMMUNITY SERVICES. Introduced by: Mr. Hollins, Ms. Diller (to be voted on June 8, 2021)

- Ms. Diller read the Title.
- Marcus Henry (GM Community Services) provided updates.
- Mr. Cartier made comments/question for GM Henry.

4. Presentation: Dr. Claire Wang - Crisis Intervention Services/988 Roll – Out Project

- Glenn Owens (Dept of Substance Abuse and Mental Health Crisis Intervention Services). Mr. Owens gave an overview on crisis intervention.
- Dr. Claire Wang gave presentation on Delaware 988 Planning and Implementation.
- Ms. Diller requested for agencies to become involved in 988 implementation.
- Ms. Diller requested questions/comments from Council.
- Colonel Bond made comments.
- Chief Miller made comments.

5. Other - None

6. Public Comment - None

7. Adjournment

Motion to adjourn made by Mr. Smiley. Seconded. The meeting was adjourned at 5:00 PM

**In accordance with Governor Carney's Proclamation, coupled with the Governor's Declaration of a State of Emergency, New Castle County Council held this meeting as a telephone and video conference, utilizing Zoom Webinar.*

Respectfully submitted by Marylee Murphy, Legislative Assistant to Councilwoman Lisa Diller, Co-Chair of the Community Services Committee. The meeting also was recorded. The recording is incorporated herein by reference and is available by contacting the legislative Assistant to the Land Use Committee or at the New Castle County Website, Live Video and Video Archive.
<https://nccde.org/2080/Live-Video-and-Video-Archive>

CRISIS INTERVENTION SERVICES (CIS)

Department of Health and Social Services

Division of Substance Abuse and Mental Health

Glenn Owens, MS, Clinical Administrator CIS

Benjamin Griffith, MA, LPCMH, CIS North Clinical Site Manager

Ericka Sample, MSW, LCSW, CIS South Clinical Administrator

CIS VISION, MISSION AND GOAL

- ▶ **Vision:** To provide a range of crisis intervention services 24 hours per day 7 days per week for adults experiencing behavioral health emergencies.
- ▶ **Mission:** To oversee an array of emergency response services to individuals who are experiencing a crisis in a supportive and safe environment with the core values of respect, dignity and professionalism.
- ▶ **Goal:** To divert individuals from the criminal justice system and psychiatric hospitalization, if applicable, and restore them to their adequate level of functioning by utilizing comprehensive screening and assessments, brief intervention, information and referral, linkages to community providers, peer support and/or wrap-around services.

WHAT IS CIS?

- ▶ Crisis Intervention Services (CIS) is offered through the Department of Substance Abuse and Mental Health (DSAMH) for individuals who are experiencing distress and functional impairment in the community.
- ▶ It is the most widely used form of brief intervention with the main focus on screening, crisis stabilization, and referral. It measures the magnitude of a crisis episode and may initiate the continuum of care for the individual.
- ▶ A crisis intervention initiates the helping process.

CORE ELEMENTS

▶ Crisis Hotline

- ▶ A toll-free statewide telephone system that individuals can utilize for emotional support, information, referrals, and access to local providers and resources.
- ▶ Hot line is staffed 24 hours per day-7 days per week.
- ▶ Responders may dispatch a crisis mobile team, if necessary, to assess the individual in crisis , identify the major issues, and develop a plan to access care.

▶ Mobile Crisis Team

- ▶ Credentialed staff respond to individuals wherever they are in the community.
- ▶ Staff identify presenting issues and stabilize individuals with behavioral health needs.
- ▶ Staff conduct an initial screening to ensure a pathway of care.
- ▶ Staff explore least restrictive alternatives to maintain individual and public safety.
- ▶ Collaborate with law enforcement and community providers to maintain individual and community safety.
- ▶ Staff may initiate a 24 hour detainment for those individuals who are clinically eligible.

CONTINUED

▶ **Walk-in Centers**

- ▶ Crisis walk in Centers are available in New Castle County and Sussex County for individuals in crisis-staffed 7 days per week-24 hours per day.
- ▶ Walk-in Centers are staffed with credentialed personnel to screen and refer individuals to appropriate resources and community providers. The individual is provided immediate attention to restore a level of functioning.
- ▶ Staff provide brief intervention with the goal of keeping the individual safe in his or her home and/or in the community.
- ▶ Staff work with law enforcement personnel to maintain individual and public safety.

▶ **Peer Support**

- ▶ Peer Recovery Specialists are available 7 days per week from 8:00 a.m. to Midnight to provide emotional support by sharing their lived experiences. Services include:
 - ▶ Linkages to community resources and providers
 - ▶ Well-being checks
 - ▶ Coordination of care with referrals and transitions
 - ▶ Recovery information
 - ▶ Outreach services

CONTINUED

► Trainings

- CIS staff provide education and training on crisis situations, de-escalation, detainment procedures, risk and protective factors and the continuum of care paradigm



**Crisis Workers and Peer Recovery Specialists meet the consumer
where he or she is at;**

assesses the level of risk;

stabilizes the crisis;

mobilizes client resources;

links the individual to the needed resource; and

improves functioning.



Crisis Intervention Offices

New Castle County

Central Avenue
New Castle, DE
800-652-2929

Kent/Sussex County

700 Main Street
Ellendale, DE
800-345-6785

Delaware 988 Planning & Implementation

Y. Claire Wang, MD, ScD

Division of Substance Abuse &
Mental Health

DHSS

May 25, 2021

New Castle County Council

Community Services Committee

What is 988?

- A direct, national, three-digit line to connect millions of Americans in emotional crisis to get the help they need.

When you've got a police, fire or rescue emergency, you call 911.

When you have an urgent mental health need, you'll call 988.

- The requirement to transition to 988 as the National Suicide Prevention Hotline will take effect on July 16, 2022.
- By July 2022, calls to 988 will be directed to the National Suicide Prevention Lifeline (1-800-273-TALK), which will remain operational during and after 988 transition.

30
Percent

The percent the suicide rate
has climbed since 1999

1 in 5


people above the age of 12
has a mental health condition

316

For every one person that
dies by suicide annually,
316 people seriously
consider suicide

History & Significance

- Mental health and suicide prevention advocates seeking a national, easy to remember 3-digit number for individuals in crisis took their idea to their state leaders and Members of Congress.
- Aug 2019: FCC Commission report to Congress recommending 988 for Americans in crisis to connect with suicide prevention and mental health counselors.
- Dec 2019: FCC initiates rulemaking to designate 988.
- Jul 2020 FCC adopted rules designating 988 with a July 2022 deadline for telecom providers to direct all 988 calls to the existing National Suicide Prevention Lifeline.

To learn more, visit: <https://www.fcc.gov/suicide-prevention-hotline>

How will 988 increase crisis call volume?

Baseline

- Assumed moderate steady growth rate of 7%.
- Based on historical lifeline volume patterns.

Diverted Volume

- Assumed growth rate of 1% first year, increased to 20% in year 5.
- Assumed diversion rate 23-30% from current helplines in Y1 to 69-90% in Y5. Diversion from 911 from 1-2% in Y1 to 10-30% in Y5.
- Based on historical patterns and assumptions and literature.

New Volume

- Driven by marketing and awareness.
- Assumed growth rate of 2-5% first year, increased to 5-15% in year 5.
- Based on estimated share of serviceable population not historically served, and experience from similar service rollouts in Australia and the UK.

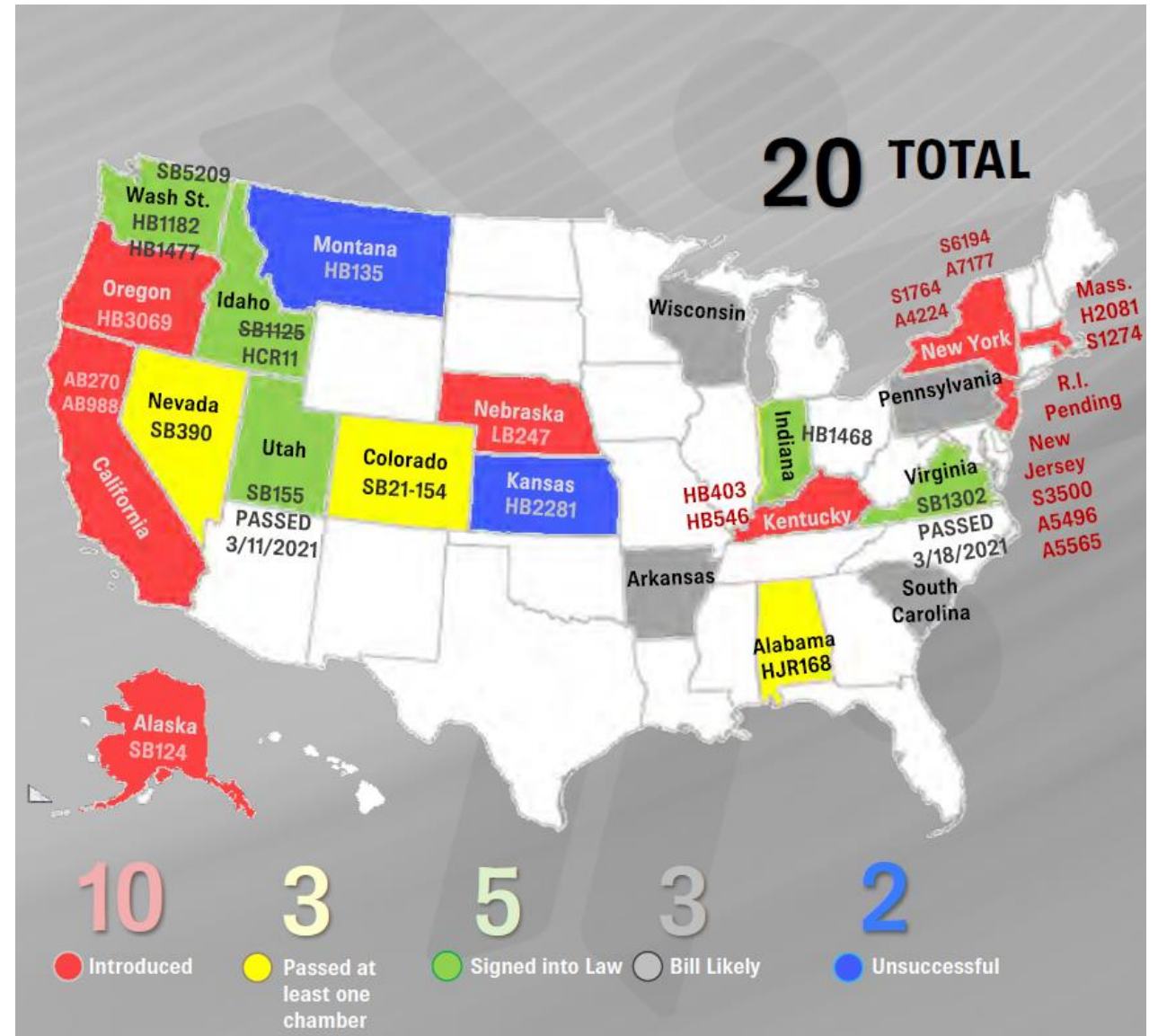
Legislative activities across the country

States can levy fee on mobile and IP enabled services to be used for 988 crisis centers and related services.

State has authority to issue fees and should evaluate telecommunications surcharge parameters, parity and cost arguments, and implementation dates.

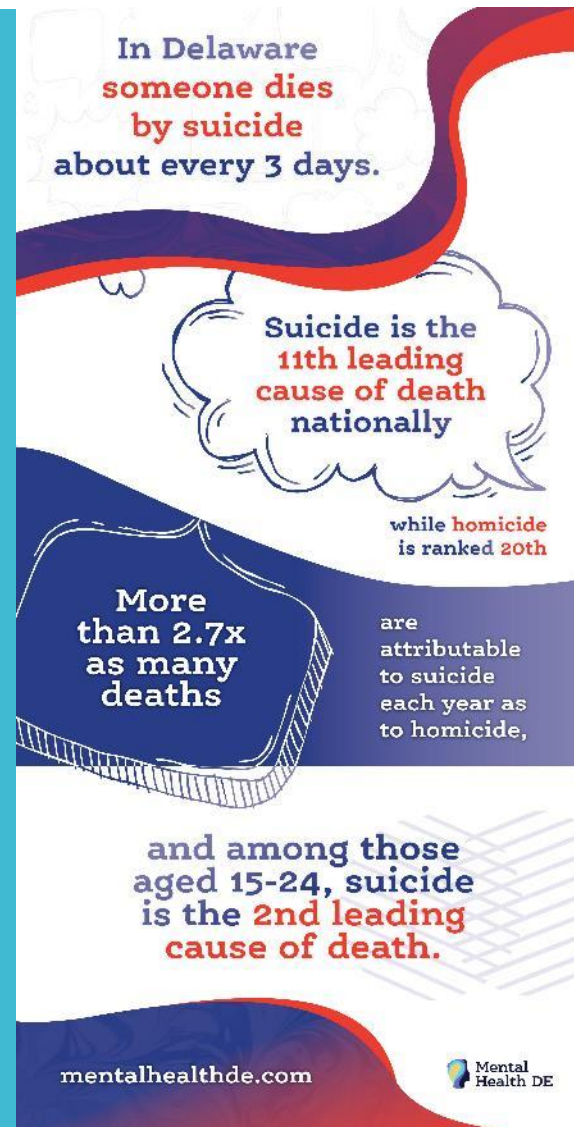
Many states have been introducing 9-8-8 legislation.

- See [NAMI 988 legislation tracker](#)



Source: Presentation on May 12, 2021 to the 988 Crisis Services Learning Community by Laura Evans (Vibrant) & Angela Kimball (NAMI) .

What is Delaware's Suicide and Mental Health Crisis Response System like?



- Suicide was the 11th leading cause of death in Delaware overall in 2019, but among top 5 for people younger than 55. 48.4% of firearm deaths were suicides.
- Three main MH crisis hotline/response services in Delaware:
 - ContactLifeline, Inc. (1-800-273-TALK)
 - Adult Crisis Response (DSAMH):
 - 1-800-652-2929 for Northern Delaware
 - 1-800-345-6785 for Southern Delaware
 - Youth Crisis Response (Guidance/DPBHS):
 - 1-800-969-HELP
- Other resources:
 - Veterans Affairs/Military
 - Behavioral health providers
 - 911

Key Elements of 988 Planning Grant



8 Core 988 Planning & Implementation Principles

- 24/7 coverage (calls, chats and text)
- Financial stability
- Capacity building
- Operational, clinical and performance standards
- Multi-stakeholder coalition
- Linkage to local crisis services
- Follow-up services
- Alignment in public messaging

Community of Practice and Technical Assistance

Planning for 988 Implementation in Delaware

- 988 Planning & Implementation Coalition
 - 10-month planning grant from Vibrant
 - Leveraging cross-agency partnerships, incl. Delaware Suicide Prevention Coalition
 - Monthly meetings
 - Workgroups
- Phased approach

Analysis & engagement

Exploration & envisioning

Strategizing & action

A Cross-sectoral Partnership



988 Workgroups

Technology & Routing

- What technology infrastructure is required to route 988 calls, text, and chats? What is the logistics of serving special populations?
- How will 911 calls and law enforcement activities be integrated?
- How would a request to dispatch mobile crisis teams be directed?
- What are the data and performance metrics?
- What is the staffing need and costs?

Care Operation & Logistics

- What are the standard procedures for mobile crisis dispatch?
- Where should clients who need additional services be directed?
- How can follow-up care be coordinated?
- What is the staffing need and costs?

Funding & Legislative Needs

- What are existing and new funding streams to support 988 implementation and sustainability?
- What is the feasibility of implementing 988 fees and how will it work?
- Are there legal and contractual issues that need to be addressed regarding licensing, privacy protection, and data sharing?

Communications

- How to disseminate information in alignment with national 988 campaigns.
- Who are the key partners and channels for public messaging and engagement?
- Should there be specific campaigns targeted at specific populations?
- How do we evaluate marketing campaigns?
- What is the staffing need and costs?

This is the moment: Coordinated Crisis Care Continuum



Someone to
Talk to

Someone to
Respond

Somewhere to
Go

Thank you

- Claire Wang (claire.wang@delaware.gov)



Delaware 988 Planning Coalition

As of 5/20/2021

ORGANIZATION	REPRESENTATIVE
ContactLifeline, Inc. - Delaware's NSPL call center	Dr. Jackie Cousin, Executive Director
National Alliance on Mental Illness (NAMI)	Dr. Josh Thomas, Executive Director; Annie Slease, Director of Advocacy
9-1-1 – Delaware State Police & Department of Corrections	Joseph Mulford, Assistant Chief of Communications; Vanessa Bennifield & Michael Records, DOC Bureau of Healthcare, Substance Abuse and Mental Health Services
Mental Health Association of Delaware (MHA)	Jennifer Seo, Deputy Director; Jennifer Smolowitz, Suicide Prevention Coalition Coordinator
Recovery Innovations International (RI)	Natascha Hughes, State of Delaware Director
Community Advocates	Elizabeth Booth, Community Legal Aid; Barbara Antlitz, Camp Rehoboth; Lydia Deleon, Westside Family Healthcare; Dr. Jon Cooper, Colonial School District; Pamela Ann, Community Advocate; LaVaida Owens White, Faith Community; Elisa Dillar, Elected Official
Lt. Governor's Office	Sydney Garlick, Behavioral Health Coordinator
Military & VA Partners	Lauren Unrath & Christine Kubik, Delaware National Guard; Kent Johnson & Matthew Jacobs, Department of Veteran Affairs; Craig Gilbert, Dover Air Force Base
TA Provider	Linda Langford, EDC, Grant Manager; Kat Olbrich, American Foundation for Suicide Prevention
Delaware Department of Health and Social Services (DHSS)	-Division of Substance Abuse and Mental Health: Claire Wang, Associate Deputy Director; Glenn Owens, Administrator of Crisis Services; Nuno Martins, Behavioral Health Administrator; Joe Aronson, Chief of Governmental and Interagency Relations; Lisa Johnson, Senior Advisor Informatics; Samantha Parker, Contractor -Division of Public Health: Amanda Bundek, Epidemiologist II -Division of Management Services: Amy Herb, Planner IV;
Delaware Department of Services for Children, Youth and their Families (DSCYF)	Division of Prevention and Behavioral Health Services: Aileen Fink, Director; Jandy Albury, Mental Health Program Administrator II; Malia Boone, MRSS Youth Crisis Services Program Manager-contractor