

Mental Health Response Advisory Committee Meeting Summary
Tuesday, October 10, 2017
ADAMHS Board of Cuyahoga County

Present: Co-Chair: Captain James Purcell, Cleveland Division of Police

Committee Members: **Carole Ballard**, ADAMHS Board; **Gabriella Celeste**, Case Western Reserve University; **Dr. Rick Cirillo**, Board of Developmental Disabilities; **Rosemary Creeden**, Frontline Services; **Mike Evanovich**, Department of Justice; **Dr. John Garrity**, ADAMHS Board; **Rev. Ben Gohlstin**, ADAMHS Board of Directors; **Yolanda Gordon**, Cleveland Municipal Court; **Larry Heller**, Greater Cleveland Congregations; **Christina Kalnicki**, Care Source; **Karen Kearny**, MHAC; **Susan Neth**, Frontline Services; **Scott Osiecki**, ADAMHS Board; **Ellen Riehm**, NAMI Greater Cleveland; **Carolyn Szweda**, Cleveland VA, and **Rosie Palfy**, Advocate

MHRAC Members on the phone: **Dr. Randy Dupont**, Monitor
Mike Woody, CIT International

Cleveland Police Commission: **Dr. Kathleen Clegg**

Guest: **Allsious K. Snodgrass**, Greater Cleveland Congregation

Captain James Purcell opened the meeting with introductions at 9:01 a.m. The MHRAC members reviewed and approved the minutes from September 11, 2017.

Discussion:

City of Cleveland Federal Grant Co-responder Team Site Visit: November 30, 2017:

Members of the MHRAC will be invited to participate in the Justice and Mental Health Collaboration Grant Technical Assistance Site-visit of the City of Cleveland CIT Co-Responder Team on Thursday, November 30. More information to follow.

It was reported that the Co-responder Team met with officers from the 1st and 2nd District to talk about the program. The Team received some referrals for follow-up from the officers. Co-responder Team is following-up on high utilizers in order to reduce the number of people going to the hospital and is making referrals to community providers.

Sub-committee Reports:

- **Training: 40-hour Training:** Dr. Richard Cirillo, subcommittee chair stated that the committee is continuing to work on the 40-hour outline. The committee received written feedback from Dr. Dupont on the draft outline on October 9th and has submitted a revised draft to get a general agreement on the content. The training will provide more direction and expand on the scenario-based exercises. The scenario-based exercises will escalate in complexity throughout the training. Hopefully there will be a draft outline to share with MHRAC during the November meeting.

Eight hour training: Captain Purcell and C. Ballard reported that only 200 officers are remaining to be trained and should be complete by the end of November. Captain Purcell stated that the resource cards are out to the districts and that posters are going up in the districts. It was made clear to the group that the resource cards are for the officers' use and not for the public.

2018 8-hour Training: Captain Purcell indicated that he would send out a survey to officers for topics to be covered in the 2018 8-hour training. There will be some topics listed on the survey with space for the officers to add topics. He mentioned that he is also open to suggestions from MHRAC members. The training will not be focused on any one subject, but may focus on several topics throughout the 8 hours. G. Celeste mentioned that the data collected from the recent Prevention Resource Center At-risk Youth Survey of youth in our area - indicated that suicide attempts were twice as high in Cleveland vs. other areas in the county and that youth were able to access a gun more quickly. She suggested that this data should be part of the CIT training.

Training for Office of Professional Standards (OPS): Carole Ballard and Captain Purcell provided a four hour training to the OPS staff. Purpose of OPS is to take citizen complaints on police behavior. OPS had a concern about the number of mental health clients coming in to make complaints and making threats towards the investigators. Staff is composed of people from different backgrounds and some from police. Staff indicated that they did not know how to handle people living with mental illness and did not feel comfortable with calling police. Captain Purcell recommended to the staff to de-escalate first and handle the complaint last. Training consisted of a brief overview of signs and symptoms, verbal de-escalation and problem solving. The group requested an explanation of the OPS process and it was mentioned that OPS has had a backlog of complaints, but has taken steps to improve the process including hiring four additional staff. It was clarified that the CDP does not have a direct relationship with the OPS.

Dr. Dupont stated that the training with OPS was not directly related to the consent decree and he knew it was greatly appreciated. He explained that OPS heard about the work being down on the 8-hour training and requested a similar training.

- **Community Engagement:** Karen Kearny, sub-committee co-chair, talked about the development and training of the Speakers Bureau. The subcommittee meeting is scheduled for October 13 to discuss the development of a training on when to call 911 and CIT officers. A member stated that Community Engagement Committee needs to engage the faith-based community and Allosious Snodgrass was introduced as a new staff member of the Greater Cleveland Congregations. Rev. Gohlstin stated the ADAMHS Board is in dialogue with the Greater Cleveland Congregations regarding development of two drop-off centers. He added that no funding from the ADAMHS Board budget should be used to build or renovate buildings and/or sites that may be selected for these centers.
- **Diversion:** Sue Neth, subcommittee chair stated that a meeting is scheduled with the ADAMHS Board on Monday, October 16 to follow up of the Pilot Project of using the Crisis Stabilization Unit as a diversion point. Further discussion will follow regarding potential meeting dates for the Diversion subcommittee.
- **Quality Improvement:** Gabriella Celeste, sub-committee co-chair, stated that there is a need for good integrated data. There has been a spike in completed CIT forms since implementing the 8-hour Training; however, we need more data to make decisions and develop conclusions regarding high utilizers and the follow-up process. A key component of this committee is to look at the mental health system and how to improve the process of assisting high utilizers; where are the calls coming from; doing outreach for a reduction in inappropriate calls. The next meeting is set for Thursday, October 26. Hopefully there will be a series of recommendations to present at the November MHRAC meeting, including the final set of data points and how would they be monitored.

Electronic CIT Stat Sheet: Captain Purcell updated the group on the transition to all electronic reporting in the CDP – including the incorporation of the CIT Stat Sheet. He indicated that not every zone car is yet equipped with computers and is not sure of the timeline. He did know that training on the entire electronic reporting system is being conducted on a shift by shift basis.

MHRAC Committee Membership: Scott Osiecki stated he sent out a message to all MHRAC members regarding continued membership and received a few responses from members who have not attended in a while and wish to remain on the committee, as well as a recommendation for a new member. Those who have not replied or participated in meetings this year will be removed from the MHRAC. If anyone has a recommendation for a new MHRAC member should contact Scott. He also mentioned that we are looking to increase representation on the QI committee, especially with providers and clinicians.

A member asked about the status of the Department of Justice Civil Rights Division. A response was provided that nothing has changed.

Meeting adjourned at 10:26 a.m.