



**Middlesex County Restoration Center
Tuesday, February 4, 2020
400 Mystic Ave., 4th Fl.
Medford, MA**

MINUTES

Attendees: Sheriff Peter J. Koutoujian, co-chair; Danna Mauch, Massachusetts Association for Mental Health, co-chair; Senator Cindy Friedman; Representative Kenneth Gordon; Judge Rosemary Minehan; Chief Robert Bongiorno; Scott Taberner, MassHealth; Nancy Connolly, Department of Mental Health; Jennifer Barrelle, Department of Public Health; Mandy Gilman, Association for Behavioral Health; Brenda Miele Soares, Advocates; Opal Stone, Advocates; Beth Lacey, Advocates; Marisa Hebble, MA Trial Court; David Ryan, Middlesex Sheriff's Office; Sonya Khan, Middlesex Sheriff's Office; Catia Sharp, Middlesex Sheriff's Office; Lisa Lana, Committee for Public Counsel Services; Kristen Dame, Committee for Public Counsel Services.

10:00 AM: WELCOME AND INTRODUCTION

Sheriff Koutoujian called the meeting to order and welcomed representatives from Advocates, the planning grant awardee for the Commission. Danna Mauch invited a round of introductions from those present at the meeting.

Sheriff Koutoujian asked Committee for Public Counsel Services (CPCS) representatives what sparked their interest in the Commission.

Lisa Lana responded that they are interested to see what the service model will look like, and are in favor of pre-arrest diversion. She noted that CPCS will not be working with people who are diverted pre-arrest.

Representative Gordon added that he has heard of interest in the model from other defense counsellors as well.

10:05 AM: CONSULTING WORK PLAN

Sheriff Koutoujian introduced Brenda Miele Soares from Advocates to begin a presentation on the work plan for planning grant services.

Brenda provided an organizational overview of Advocates, including a review of the services they provide that are relevant to the Commission's work.

Sheriff Koutoujian added that Advocates is also working with the Middlesex Sheriff's Office through the MassHealth Behavioral Health – Justice Involved (BH – JI) community support program demonstration.

Brenda presented the structure of Advocates' work plan, which divides the work into work streams for data, services, location, and transportation.

Brenda turned the floor over to Opal Stone from Advocates to present on the data work. Opal discussed Advocates' review of data provided by the Commission, additional data sources that Advocates is pursuing, and the timeline for this work.

Scott Taberner asked for what percent of Middlesex County communities does Advocates provide ESP services?

Opal responded that Advocates' ESP service area includes 31 towns total, and includes about one third of Middlesex County cities and towns running from Winchester to Framingham/Marlborough. She added that there are three ESP providers in Middlesex County.

Sheriff Koutoujian noted that there are lots of services in the MetroWest area where Advocates operates.

Scott Taberner noted that Advocates has asked for data from the Massachusetts Behavioral Health Partnership (MBHP) on ESP services provided in Middlesex County. He added that the list was generated last night and will be ready to share shortly.

Danna Mauch asked if the data would be by town.

Opal responded that Advocates expects the data to be by ESP. She added that some geographies are well-defined, like the Lowell area, while others are less clearly delineated, like Woburn and the southeast portion of the county. Opal thanked Scott for his help in getting access to this data.

Judge Minehan asked who gets ESP services – is it for a 12(a); voluntary treatment; etc.?

Brenda Miele Soares replied that ESPs serve people in all of these areas: individuals can call an ESP directly, as can police, schools, parents, etc. She added that Advocates is also insurance-blind, and serves people with a range of insurance or no insurance coverage.

Senator Friedman clarified that this does not necessarily mean that Advocates is insurance “blind,” but rather that Advocates will serve some clients without reimbursement from insurance at a loss.

Scott Taberner added that MassHealth is pivoting to look at ESPs in a different way to use clinicians more in the field. This model will work nicely together with a Restoration Center.

Brenda Miele Soares presented Advocates’ work looking at services. She noted that they are thinking about billable vs non-billable services, and looking at what is already available in each geography and what’s needed in a center in each geography.

Senator Friedman recommended that Advocates attempt to capture any barriers to implementation – for example, regulatory/licensing barriers that exist.

Brenda responded that licensing is definitely a challenge. For example, under current licensing standards, you need two different waiting rooms for outpatient and crisis services.

Mandy Gilman noted that the Association for Behavioral Health is working with the Department of Public Health on this – the goal is to improve how all of the regulations and licenses work together.

Jennifer Barrelle added that DPH is looking at the regulations already, so the Commission could get involved in that process. Jenn offered to circulate draft language for updated regulations with the working group.

Mandy Gilman asked where is the line between billable and non-billable services?

Brenda replied that they are looking at that question, and it ties closely to licensing.

Senator Friedman noted that it is important for the Commission to know these details and distinctions so that we might relieve some of the regulatory or financial restrictions to make the Restoration Center work.

Beth Lacey presented Advocates' work on finding a suitable location for a Restoration Center. She noted that they are looking at three rough geographical areas with the perspective of cost/availability of space, as well as availability of services to address social determinants of health.

Sheriff Koutoujian added that they should also be thinking about how far people will travel to use the service. He noted his experience taking "safe keeps" (individuals who have been arrested by local police departments but not yet arraigned whose custody is transferred to the Billerica Jail for a variety of reasons, including the provision of health and behavioral health care services that are often unavailable in municipal police lock-up). 30 communities have signed up for the program, some of whom are willing to travel significant distances to transfer custody of detainees.

Judge Minehan asked whether this program is pre- or post-arrest.

Sheriff Koutoujian responded that the safe keep program is post-arrest/pre-arraignment, but the Restoration Center will be pre-arrest.

Chief Bongiorno added that police/EMS/fire community concerns should also be considered for the community that would ultimately host the Restoration Center.

Beth Lacy presented Advocates' work on transportation. She talked about not only getting people to the Restoration Center, but identifying transportation models for aftercare services and returning home (wherever home is).

Senator Friedman noted that police already do a lot of the transportation for this population, so they should be included in these conversations.

Beth added that Chief Bongiorno has been included in conversations on transportation.

Chief Bongiorno noted that aftercare is critical, and asked how specifically the center would be getting people home.

Danna Mauch thanked Advocates at the conclusion of their presentation for their work.

Scott Taberner added that the proposal they submitted for the procurement was very good.

Sheriff Koutoujian asked Chief Bongiorno to talk about an ongoing conversation about the use of a Restoration Center to do involuntary treatment.

Chief Bongiorno reiterated the mandate of the Commission to divert people from emergency department utilization because the emergency department is a revolving door currently. He wanted to raise a point that, in his view, the Restoration Center would need to be taking Section 12 involuntary holds to effectively achieve this mandate.

Mandy Gilman asked a clarifying question as to whether most emergency department transports by police are Section 12 or voluntary.

Chief Bongiorno said yes, most ED transports are Section 12 because most people don't want to go to the hospital.

Danna Mauch said that police use Section 12(a) to get people evaluated at the ED; the revolving door is mostly from people who aren't in need of an inpatient level of care (which would require a 12(b) petition by a doctor at the ED allowing for a 72-hour involuntary hold for treatment purposes after the 12(a) evaluation of need has been performed). Those who don't meet the level of need for the 72-hour hold are evaluated and released, and they are the people who cause the frustration for police.

Brenda Miele Soares expressed the opinion that a Restoration Center should not be another ED. It should take people who don't meet the inpatient commitment standard. If a Restoration Center did involuntary treatment, then people would not want to voluntarily use the Restoration Center.

Senator Friedman added that police should not be deciding who goes where (ED or Restoration Center). The Restoration Center will have to section people using a 12(b) to send them to inpatient levels of care if that level of care is required.

Brenda Miele Soares agreed with this point. She said the Restoration Center will need to send people to inpatient treatment if that level of care is required based on an evaluation.

Beth Lacey added that, for this reason, transportation is a key question.

Brenda Miele Soares said that new regulations from the Department of Public Health allow ambulance transports for this purpose.

Jennifer Barrelle said she would check on the status of those regulations.

Scott Taberner said that the Restoration Center should be connected into a network of care, and that having the ESP coordinate with this would greatly expand the promise of the center.

Beth Lacey said that the difference here is between needing a Section 12(a) to do transportation to a Restoration Center versus the person being involuntarily held when they arrive under a Section 12(b). Getting people to the center is important and how we get people there is important, but this isn't an inpatient unit.

Sheriff Koutoujian said that public safety personnel are concerned with transportation because their vehicles were made for involuntary, as opposed to voluntary, transportation.

Judge Minehan added that if Section 12 can't hold people (which is a potential outcome of a case currently before the Supreme Judicial Court), then the police will have to charge people with crimes to make sure they are safe.

Danna Mauch noted that the SJC case is about when the 72 hour hold starts, and whether it starts in the ED (where a person is not getting treatment) or whether it starts when the patient is evaluated and ordered to inpatient unit admission.

Judge Minehan said that if the case outcome is that the 72-hour hold includes ED time, then people will be discharged without ever getting actual inpatient treatment. The Restoration Center is going to be a huge asset to solve this problem. Police will be able to convince people to go to the Restoration Center instead of involuntary hospitalization or arrest.

Sheriff Koutoujian added that people should want to go to the Restoration Center voluntarily.

Chief Bongiorno asked to confirm that Advocates doesn't think a Restoration Center should be intake.

Beth Lacey responded that they don't think it should be involuntary intake, because the center should not have an inpatient unit. The Restoration Center should provide services to people who do not rise to the level of need to commit them to an inpatient unit, and it should send people who do need that level of care to an appropriate psychiatric facility.

Chief Bongiorno said that in his experience, people are not staying in the ED for 72 hours, and asked why the Restoration Center can't be the place that keeps people for that length of time.

Senator Friedman replied that the ED is not required to have the services available for behavioral health in order to keep people for that length of time. She added that the purpose of the Restoration Center would be to act as a door to treatment. She said that people are more likely to stay for longer if someone at the center sits down, talks to them, finds out what's going on, and gets you in front of the right provider. Currently, people are sitting in EDs because no one at the ED is doing anything like this with them.

Chief Bongiorno asked why the Restoration Center wouldn't want to take such individuals.

Beth Lacey responded that the Restoration Center does want to take these people.

Senator Friedman added that someone who tried suicide would still be a Section 12 and needs hospitalization. This means that the police will have to make some decisions about where to take people in crisis. The Restoration Center is going to help people navigate to the right level of care.

Chief Bongiorno asked for additional clarification on whether the Restoration Center is voluntary or not.

Beth Lacey said that the Living Room is a good example of what Advocates is talking about – it's a place where people go voluntarily that's more welcoming and therapeutic than a hospital.

Mandy Gilman added that Advocates has strong peer services.

Senator Friedman noted that the Commission will need to create a clear set of criteria for police to use in making decisions about bringing someone to the Restoration Center.

11:30 AM: LEGISLATIVE UPDATE

Senator Friedman updated the Commission on the budget process for the year. She noted that the expectation would be to include \$250,000 in the budget for the Restoration Center for next year for implementation. If staff and Advocates identify a need for more than that, they should include a proposal in their report to the legislature.

She added that she is very interested in the barriers to implementation of a Restoration Center because the Senate is hearing a set of bills on the scope of practice for behavioral health, telemedicine, ED boarding, and others related to behavioral health. If there are bills that would be needed to enhance/enable a Restoration Center, the time to do them would be in the next 5 months along with these other packages in order to get them done this session.

Sheriff Koutoujian noted that there have been conversations with Advocates about security that could be provided at a Restoration Center. He added that we want to make sure it is done the right way, and if it is provided by the Sheriff's Office, then there would need to be funding to do it because it would require a specially trained unit. He highlighted the value of training by noting that the Billerica Jail and House of Corrections almost never uses restraints anymore because officers are getting better at de-escalation.

Chief Bongiorno added that discussions had included the idea of a "kindler, gentler uniform" for security.

Jennifer Barrelle noted that the Commission has discussed Section 12 a lot; what will the Commission do to manage people who are in withdrawal at a Restoration Center.

Brenda Miele Soares replied that Advocates is looking at sobering units and comfort meds for this purpose.

Sheriff Koutoujian added that the staff at the Billerica Jail and House of Corrections do a good job medically managing withdrawal for people who are detained.

Senator Friedman added that the Restoration Center should also be initiating MAT.

Mandy Gilman offered to set up a call with Advocates and Commission staff to discuss legislative items to address the barriers to implementation for a Restoration Center.

Scott Taberner noted that the Governor included funding in the budget for the trial court to expand the reentry program for justice-involved behavioral health clients (BH-JI) statewide to all counties, the Department of Correction, probation and parole.

Senator Friedman expressed a preference for the Commission to focus on the restoration center discussions, because she is afraid talking too much about related programs would make people think a restoration center is not needed.

Representative Gordon said that he is supporting the important bills filed by Senator Friedman.

11:45 AM: UPDATE ON COMMISSION WORK PLAN; REST OF YEAR TWO

Danna Mauch asked Catia Sharp to update the Commission on progress on the work plan and preview the rest of year two.

Catia Sharp discussed the work that has already happened this fiscal year, including: three Commission meetings; a planning grant procurement; a response to the Executive Office of Health and Human Services Ambulatory Care Redesign Request for Information; and a data request submitted to MassHealth to match to MSO data.

She then discussed the plan for the rest of year two. There is a planning grant progress report due on February 26, which will feed into a presentation to the Commission meeting on March 3. Many Commission members will be participating in a site visit to Tucson on February 27-28. Then, there will be a Commission meeting in April (specific date to be determined) and the Advocates report will be due in April as well. These are both in preparation for the legislative reporting deadline on April 13th.

Danna Mauch added that the April timeline is ok for budget purposes but might be tight if there is a need to promote changes to licensure to enable a restoration center. She also apologized to Chief Bongiorno for not understanding his concern earlier in the meeting with regard to Section 12. She appreciated his raising the issue and the importance of clarifying the question.

Catia Sharp suggested convening police departments at some point in this process to clarify the role of the restoration center in a diversionary continuum of care.

Chief Bongiorno agreed.

11:55 AM: EOHHS REQUEST FOR INFORMATION COMMISSION RESPONSE

Danna shared that staff and participating Commission members drafted and submitted a Commission response to the EOHHS Request for Information (RFI) on Ambulatory Care Redesign. She asked Scott Taberner what the status of the RFI is.

Scott Taberner said that the larger redesign of the behavioral health system is ongoing at EOHHS.

Danna noted that we haven't seen anything like this process before, and commended the work being done.

Senator Friedman agreed that the EOHHS process shares the goal of preventing justice involvement among people with behavioral health needs with the Restoration Center Commission, and commended them for their work.

11:58 AM: APPROVAL OF MINUTES FROM LAST MEETING

Mandy Gilman moved to approve the minutes from the February Commission meeting.

The vote was unanimous in favor of approval.

12:00 PM: NEXT STEPS AND CLOSING

Sheriff Koutoujian and Danna Mauch adjourned the meeting.