



**Middlesex County Restoration Center  
Thursday, October 25, 2018  
Medford, MA**

**MINUTES**

**Attendees:** Sheriff Koutoujian (co-chair), Middlesex Sheriff's Office; Danna Mauch (co-chair), Massachusetts Association for Mental Health; Senator Cindy Friedman; Judge Rosemary Minehan (ret.); June Binney, J.D., National Alliance on Mental Illness; Mandy Gilman, Association for Behavioral Healthcare; Nancy Connolly, Psy. D., Department of Mental Health; Rebecca Tsopelas, Arlington Police Department; David Ryan, Middlesex Sheriff's Office; Kathleen Skarin, Middlesex Sheriff's Office; David Swanson, Senate office of Cindy Friedman; Marisa Hebble, MA Trial Courts; Sonya Khan, Middlesex Sheriff's Office; Catia Sharp, Middlesex Sheriff's Office; Emilia Dunham, MassHealth; Courtney DeWolfe, MassHealth; Tisha Wiley, National Institute on Drug Abuse

**2:00 PM: INTRODUCTION**

Sheriff Koutoujian called the meeting to order.

Danna Mauch introduced a special guest, Tisha Wiley, from the National Institute on Drug Abuse.

Tisha talked briefly about a new \$150,000,000 grant program for evaluations of MAT programs in corrections that she is designing.

**2:15 PM: LEGISLATIVE UPDATE**

Senator Friedman provided a legislative update. The Senator noted that the PAC with the funding for the Commission had passed the legislature and been signed by the Governor.

2:20 PM: PRESENTATION BY MANDY GILLMAN ON THE COMMUNITY-BASED BEHAVIORAL HEALTH CONTINUUM OF CARE

Mandy Gillman from the Association for Behavioral Healthcare, a membership organization of behavioral health providers, gave a presentation on the community-based behavioral health service continuum of care, and on Emergency Service Providers (ESP's). Mandy offered to share a video with further information about ESP's with the Commission as a follow up to the meeting.

Senator Friedman asked for confirmation that ESP's are 24/7.

June Binney noted that ESP's differ; some are better at criminal justice diversion than others.

Marisa Hebble added that community centers are for primary mental health diagnoses, and that people with co-occurring disorders with the primary diagnosis being substance use can't use these centers, so they often show up at the center and are turned away.

Danna Mauch suggested that the Commission consider ESP's to be a "parking lot item" to come back to at a later time. She also suggested that the Commission come back to urgent care demonstrations under MassHealth at a later time as well.

June Binney shared that there are coordination of care problems with people who are simultaneously eligible for MassHealth, DMH, and DPH services. She noted that people should be in private hospitals with care paid for by MassHealth instead of at Bridgewater State Hospital. She expressed concern that Massachusetts is one of few states that civilly commits mental health patients to a Department of Corrections facility.

2:40 PM PRESENTATION BY SONYA KHAN ON DATA-DRIVEN JUSTICE INITIATIVE

Sonya Khan from the Middlesex Sheriff's Office gave a presentation on a Laura and John Arnold Foundation grant she manages under their Data-Driven Justice Initiative. The grant allows the Middlesex Sheriff's Office to create a regional data-sharing program among police departments, the Sheriff's Office, and healthcare and emergency service providers to identify and better service high-frequency users of criminal justice and emergency health services.

Sonya presented data from the Cambridge Police Department on two individuals who are high-frequency users of their services. The data presented included

calendars showing police involvement, involuntary hospitalizations, and incarcerations.

Marisa Hebble asked what the numbers in some of the calendar boxes meant. Sonya explained that the numbers represented the number of ED transports in a day, and that the individuals shown had between one and three transports in the days where they had transports.

Mandy Gillman asked if the civil commitments were Section 35's (substance use commitments brought through a court proceeding typically by a family member, but often transported by police) or Section 12's (police- or clinician-initiated short-term involuntary hold). Sonya responded that she believes that this includes both.

Senator Friedman asked whether clinicians who have been hired by Middlesex County police departments are funded through state or federal dollars. Nancy Connolly from DMH responded that these are state dollars from her agency.

Senator Friedman commented that the slide presented with barriers to treatment is the most important slide the Commission has yet seen.

June Binney agreed. She added that a Restoration Center should be a place that is welcoming to people who have been kicked out of and disparaged by every other service provider in the state. She said that this is all about engagement and meeting people where they are.

Mandy Gillman mentioned that some members of the Commission had met earlier that day to discuss MassHealth reforms and barriers to service. She said that the group had talked about how long it can take to engage people in treatment.

June Binney added that language is important. She said that many providers will say that a person is "too acute" or "too violent" for their beds, and that often results in criminalization.

Danna Mauch noted that police often don't have options for people because of this. She said she thought return on investment for a Restoration Center would not be hard to show, and that we need to see more data like that Sonya is collecting.

Sonya mentioned privacy laws that can be barriers to data sharing, which in turn becomes a barrier to care.

Sheriff Koutoujian noted that HIPPA doesn't necessarily preclude this kind of data sharing, and that the Laura and John Arnold Foundation is investing in legal analysis on this issue.

June Binney offered a NAMI powerpoint on data sharing between law enforcement and health care providers.

Senator Friedman asked the group if her understanding was correct that it is harder to share substance use information than other medical and health information.

Courtney DeWolfe confirmed the Senator's understanding. She shared that substance abuse information is covered by a privacy regime under 42 CFR Part 2 that is more stringent than HIPPA. She noted that there are a lot of legal teams trying to do their best to help patients through data sharing, but that there is room to do better.

June Binney shared that there are people who have figured out how to do this, like a police-health care partnership in Maryland. She said that the Commission would not need to reinvent the wheel.

Danna Mauch noted that Rhode Island's Department of Corrections has also made progress on data sharing.

Senator Friedman noted that DMH would need to be involved in any data sharing, because they seem to have significant problems sharing data on their patients.

Nancy Connolly agreed that there is room for improvement at DMH around data sharing to improve patient care coordination. She shared that she struggles to get criminal information about clients through the CORI system.

Danna suggested that the barrier at DMH is interpretation of the law and willingness to find solutions that protect patient privacy while also helping to coordinate their cases; that the problem is not necessarily the law.

Emilia Dunham noted that data sharing can also be a barrier at MassHealth.

Sheriff Koutoujian suggested that a memo be put together on data sharing.

Mandy Gillman noted that because of the data sharing issue, many emergency departments are joining pre-manage, a system presented at the prior meeting by the Massachusetts Health and Hospital Association.

Senator Friedman asked Sonya if the Data-Driven Justice Initiative is gathering emergency department data. Sonya said yes, they are trying to get as much health system data as possible. They are attempting to get emergency department data, EMS data, and anything else that would help to show the high-frequency users of the system. She mentioned that they are going for efficiency, trying to get the highest impact for the data they gather compared to the relative difficulty of obtaining the data.

June Binney offered that Katherine Record from Leahy is an expert on this.

Danna Mauch was supportive of trying to get as much data as possible from as many sources as possible in order to create a better continuum of care for high-frequency users of emergency services.

June noted that this cause can create real impact. She highlighted that New York City is planning to close the Rikers Island jail system in part due to their ability to better serve 400 high-need individuals in the community instead of in jails.

Senator Friedman suggested that data sharing ought to also go in the Commission's "parking lot" of barriers to care. She also noted that the purpose of the pilot in the second year was to collect data.

3:15 PM      PRESENTATION FROM REBECCA TSOPELAS ON CASE STUDIES FROM HER CO-RESPONSE WORK

Rebecca Tsopelas, Jail Diversion Clinician at the Arlington Police Department, explained two handouts that were provided to the Commission. The first showed statistics from her co-response work, and the other showed narratives on case studies of individuals who she has worked with that highlight the barriers to treatment from her perspective.

Senator Friedman thought that this was the most important presentation the Commission had received so far, and requested that the presentation and discussion be saved for the following Commission meeting because there was not enough time to adequately discuss it at the present meeting. The Commission agreed.

3:30 PM      UPDATE ON HIRING CONSULTANT AND SCHEDULING SITE VISITS, CATIA SHARP

Catia Sharp updated the Commission that the final scope of work had been shared with the Commission, and that quotes for consulting work would be solicited from a statewide contract.

Senator Friedman suggested that the scope of work was too broad because it included review of the barriers to treatment for individuals in the court system and in the jail system, and she intended for this Commission to focus on pre-trial diversion.

June Binney shared that she had comments on the scope of work to share. She also suggested that the consultant contract be held by the Trial Court so that it would be more closely related to the Sequential Intercept Mapping that is happening at the Trial Court.

Marisa Hebble stated that the scope of work for the consultant was more in depth and also narrower in scope than the scope of her work doing Sequential Intercept Mapping.

Senator Friedman agreed that the consultant report would be limited to pre-arrest diversion, which is only a portion of the Sequential Intercept Map.

June Binney added that the concept of criminal justice diversion would need to include all Intercepts because high-frequency users of the criminal justice and health systems cycle through those systems and appear at all intercepts, not only Intercept 1.

Catia Sharp suggested that the consultant report would build off of the SIM mappings that have been done in Middlesex County and that will be performed in January. She added that SIM mappings fail to provide an assessment of the number of beds and the waitlist for those beds.

Senator Friedman and Danna Mauch agreed with the need to document the number of beds and the gap between bed availability and need.

Mandy Gillman asked whether it would be possible to get a regular schedule on the calendar for Commission meetings, given that Vic DiGravio had missed several meetings due to scheduling conflicts.

Catia shared that staff are working to schedule site visits to out-of-state crisis stabilization centers in Bexar County, TX and Miami-Dade County, FL and in-state sites in Springfield and Worcester. She noted that staff were hoping to carve out time during those site visits to also have monthly Commission meetings to be more efficient with Commission members' time.

3:45 PM      CLOSING AND NEXT STEPS

Sheriff Koutoujian adjourned the meeting.