

Mental Health: Starting the Conversation

March 2nd 6:30 – 8:00pm

Welcoming remarks by Mayor Ruthanne Fuller

Dr. Ruth Kandel discusses mental health and the work of NAMI Newton-Wellesley

Amanda Rutherford, Senior Director of Riverside Emergency Services, discusses the services and supports offered to the community by Riverside Community Care

Question and answer session

Presenters

Dr. Ruth Kandel, Educational Director, NAMI, Newton-Wellesley

Suzi Newman, President NAMI, Newton-Wellesley

Jacki Rohan, Vice President, NAMI Newton-Wellesley

Manny Oppong, Assistant Vice President of Behavior Health Services, Riverside

Amanda Rutherford, Senior Director of Emergency Services, Riverside

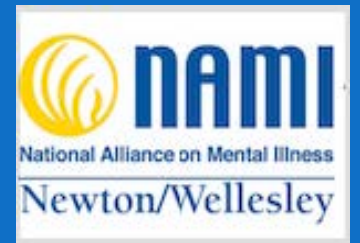
Meghan Kennedy, Director of Social Services, City of Newton Health & Human Services

***NAMI**: National Alliance on Mental Illness

MENTAL HEALTH: STARTING THE CONVERSATION

NAMI Newton-Wellesley

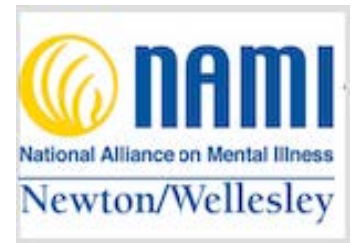
Dr. Ruth Kandel



Mental Health Conditions More Common Than You Think

- 1 in 5 U.S. adults experience mental illness each year.
- 1 in 20 U.S. adults experience serious mental illness each year.
- 75% of all lifetime mental illnesses begin by age 24.
- 44% of U.S. adults with mental illness received treatment in 2019.

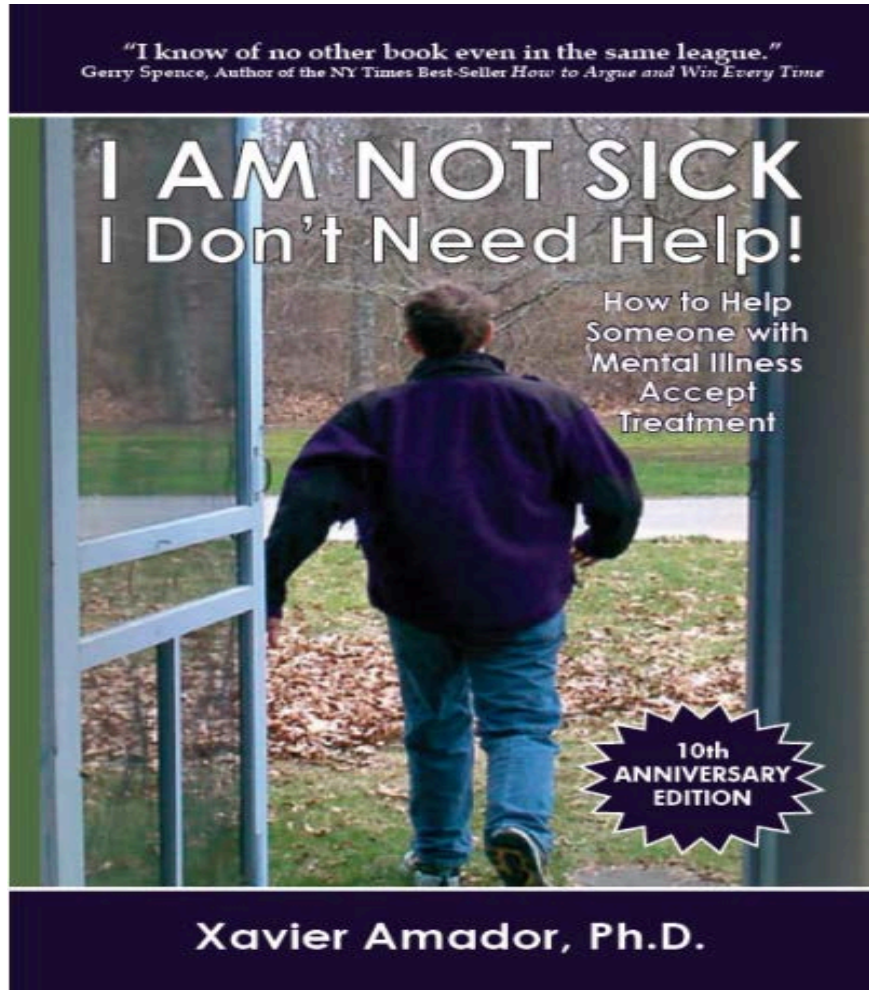
<https://bja.ojp.gov/program/pmhc>



Annual Prevalence Among U.S. Adults by Diagnosis

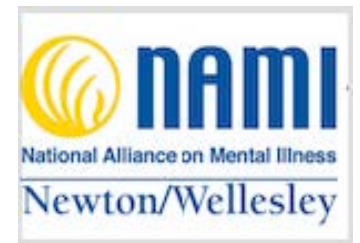
- Schizophrenia: 1% (1.5 million people)
- Borderline personality disorder: 1.4% (3.5 million people)
- Bipolar disorder: 2.8 % (7 million people)
- Posttraumatic stress disorder: 3.6% (9 million people)
- Major depression: 7.8 % (19.4 million people)
- Anxiety disorders: 19.1 % (48 million people)

Commonly Associated with Mental Illness



Anosognosia:
When someone is
unaware of their
own mental
illness.

LEAP (Listen-
Empathize-
Agree-Partner)



It's Okay to Talk About **SUICIDE**

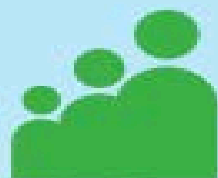
Thoughts of giving up and suicide can be frightening. Not taking these kinds of thoughts seriously can have devastating outcomes.

2nd

Suicide is the 2nd leading cause of death for people ages 10-34



The overall suicide rate has increased 35% since 1999



Suicide is the 10th leading cause of death in the U.S.

46%

of people who die by suicide have a diagnosed mental health condition

90%

of people who die by suicide have experienced symptoms of a mental health condition

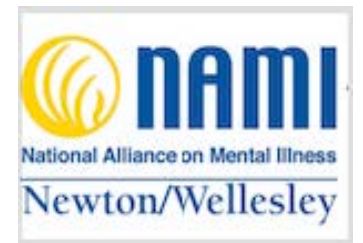
Associated with Mental Illness

- Dual Diagnosis: About 1/2 adults with severe mental illness have co-occurring mental health and addiction disorders.
- About 26 % of homeless adults staying in shelters live with serious mental illness.

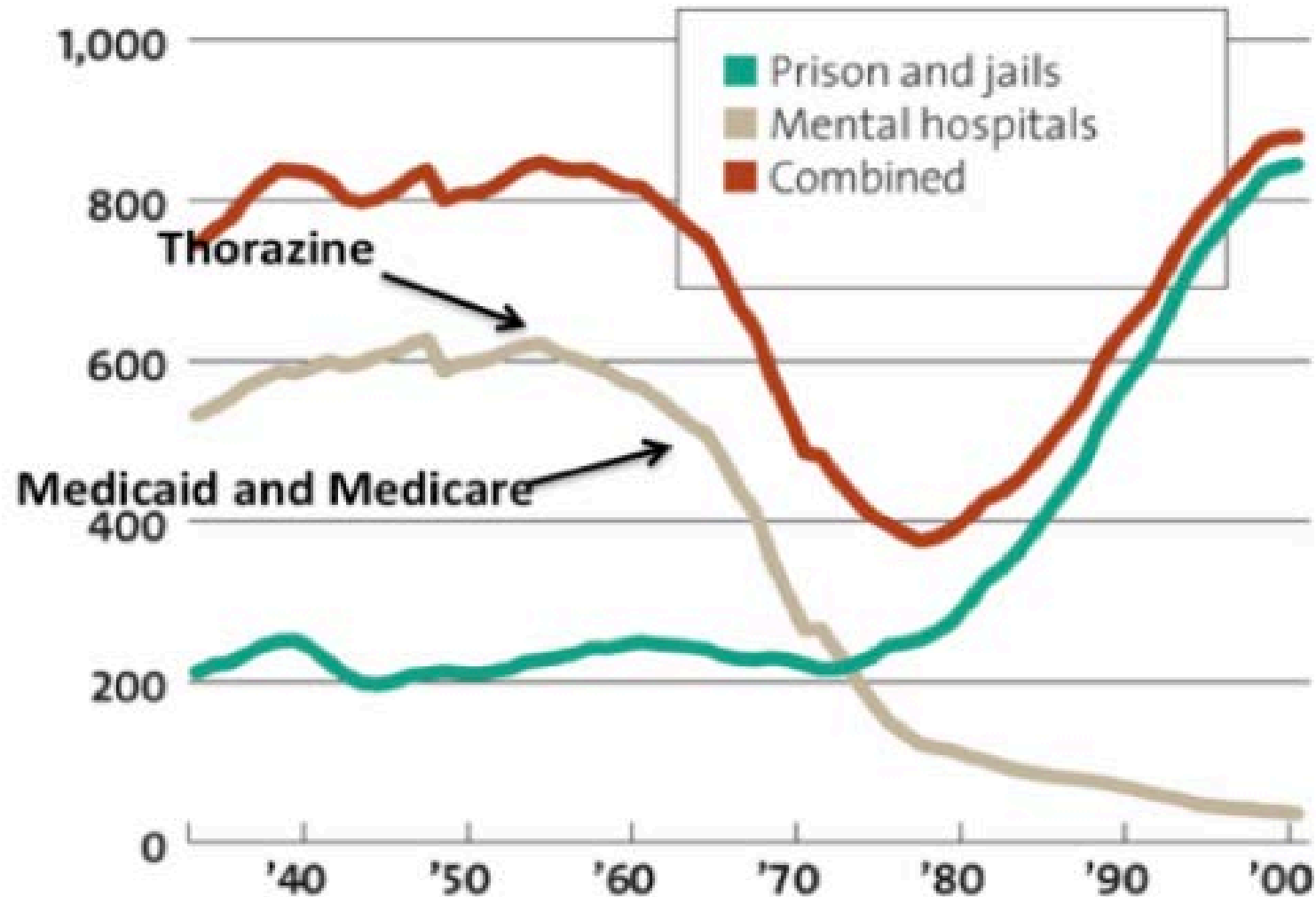
Serious Mental Illness Jails and Prisons

- Jails and prisons are now often called "the new asylums."
- Riker's Island (NYC), Cook County (Chicago), or Los Angeles County jails hold more mentally ill inmates than any remaining psychiatric hospital in the U.S.
- Overall, 20% of inmates in jails and 15% in state prisons are estimated to have serious mental illness.

<https://www.treatmentadvocacycenter.org/evidence-and-research/learn-more-about/3695>



Rates of institutionalization, per 100,000 adults



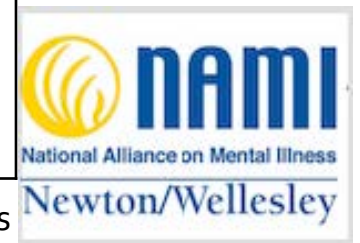
Reducing Mass Incarceration: Lessons from the Deinstitutionalization of Mental Hospitals in the 1960s BE Harcourt *Ohio State Journal of Criminal Law* 2011

The tragic collapse of America's public mental health system, in one map. By German Lopez Vox May 7, 2016

Warning Signs of Mental Illness

Sleep or appetite changes or decline in personal care	Apathy
Mood changes	Feeling disconnected
Withdrawal	Illogical thinking
Drop in functioning	Nervousness
Problems thinking	Unusual behavior
Increased sensitivity	

American Psychiatric Association <https://www.psychiatry.org/patients-families/warning-signs-of-mental-illness>



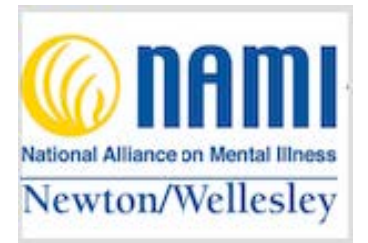
Mental Illness

- Is no one's fault.
- Many don't recognize that these are biological conditions.
- Prejudice and discrimination are often caused by misunderstanding.

Fighting Stigma

- Talk openly about mental health
- Educate yourself and others
- Be conscious of language
- Encourage equality between physical and mental illness
- Show compassion
- Choose empowerment over shame
- Let the media know when they're being stigmatizing
- Don't harbor self-stigma

<https://www.nami.org/blogs/nami-blog/october-2017/9-ways-to-fight-mental-health-stigma>

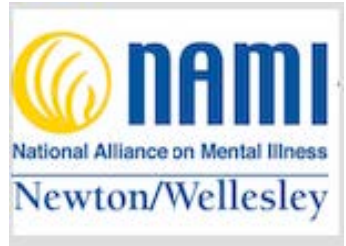




Grading the States

An Analysis of U.S. Psychiatric Treatment Laws

EXECUTIVE SUMMARY



A	A+	Minnesota (97)
	A	Wisconsin (96), Michigan (95), West Virginia (94)
	A-	North Dakota (92), Vermont (92), Arkansas (91), Hawaii (91), Louisiana (90), Wyoming (90)
B	B+	Indiana (89), South Carolina (88), Mississippi (87), Washington (87)
	B	Missouri (86), Ohio (86), Idaho (85), Nevada (84), Oregon (84), Arizona (83)
	B-	Georgia (82), Illinois (82), Virginia (82), Iowa (80), North Carolina (80)
C	C+	Kentucky (79), Oklahoma (79), Pennsylvania (79), Maine (77), Texas (77)
	C	New York (76), New Mexico (75), Kansas (73), Utah (73)
	C-	South Dakota (72), Colorado (71), New Hampshire (71)
D	D+	New Jersey (67)
	D	Florida (66), Alaska (65), Nebraska (63)
	D-	Alabama (60), California (60)
F	F	Montana (59), Tennessee (57), Rhode Island (57), District of Columbia (56), Connecticut (41), Massachusetts (33), Delaware (30), Maryland (18)

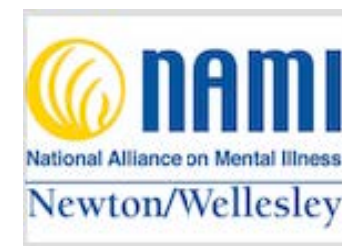


An Analysis of Involuntary Psychiatry Treatment Laws

- MA is one of four states requiring risk of unreasonably severe harm as basis for civil commitment.
- MA is one of only three states that do not authorize involuntary treatment in the community, called assisted outpatient treatment (AOT). which is a less restrictive alternative to involuntary hospitalization.

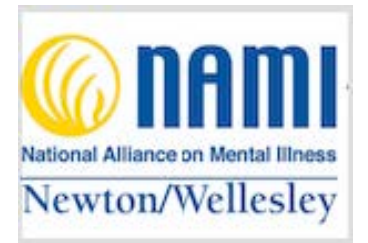
NAVIGATING a mental health CRISIS

A NAMI resource guide for those experiencing
a mental health emergency



NAMI Criminal Justice Diversion Project

- Prevent unnecessary arrests and detention of people with mental health conditions.
- Build partnerships between local police, providers, community members.
- Crisis Intervention Team
 - Significant part of training program is to educate officers on recognizing mental illness, de-escalating the crisis situation, navigating people toward resources.
- Mental health courts



Techniques to Help De-escalate a Crisis

Keep voice calm

Listen

Avoid overreacting

Express support and concern

Avoid continuous eye contact

Ask how you can help

Keep stimulation level low

Move slowly

Offer options vs taking control

Avoid touching person unless you ask permission

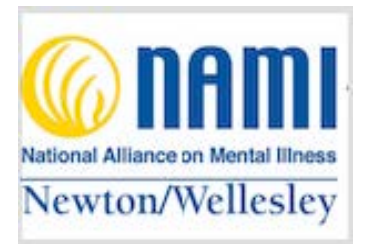
Be patient

Gently announce actions first

Give them space

Don't make judgmental comments

Don't argue



Techniques to Help De-escalate a Crisis

- If you can't de-escalate, seek help.
- If not in immediate danger, call a professional.
- If life-threatening, call for immediate help. If calling 911, explain it is a mental health crisis.
- If you don't feel safe at any time, leave immediately.

NAMI Mass Compass Helpline

Available Monday through Friday, 9 am – 5 pm (excluding
holidays).

Call [617-704-6264](tel:617-704-6264) or [1-800-370-9085](tel:1-800-370-9085), or email

compass@namimass.org.



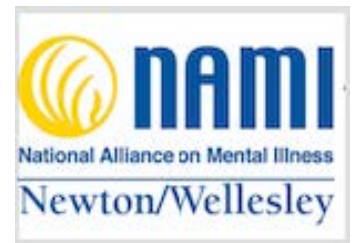
If you or someone you know
is in crisis, please contact the

National Suicide Prevention Lifeline



1-800-273-TALK (8255)

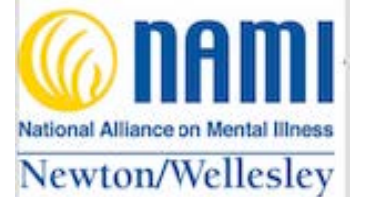
www.suicidepreventionlifeline.org



YOU ARE
NOT
ALONE

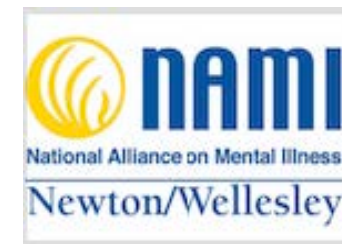
#NotAlone

nami.org/mentalhealthmonth



NAMI MA Supports

- Support groups
 - Peer-led for adults living with mental illness
 - Peer-led group for adult family members, caregivers, loved ones of people living with mental illness
- Family- to-Family
 - Free, 8 week educational program for family members, friends or caregivers



Don't Face a Crisis Alone Emergency Services Program (ESP)

To get the Toll-Free Number for your local ESP:

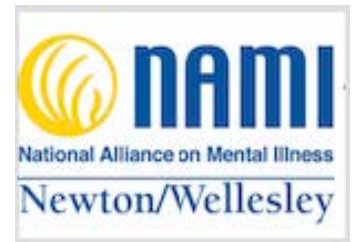
See the list on the back of this page
or call the

**Statewide ESP Toll-Free Number
1-877-382-1609**

Call this number and enter your zip code
to get the toll-free number for your local ESP.

There *are* alternatives to hospital emergency departments!

Please go to <https://www.masspartnership.com/member/ESP.aspx> for more details
and an electronic version of this flyer.



Familiar Faces of Mental Illness



mentaldisordersppt-120215103211-phpapp01



EMERGENCY SERVICES / MOBILE CRISIS INTERVENTION

Riverside Community Care – Emergency Services

What is Emergency Services?

ESP Video:

<https://vimeo.com/473975546/49a5bd33d9>



What is Emergency Services?

- The Emergency Services Program (ESP) provides psychiatric evaluations, intervention, and stabilization for any perceived crisis.
- The Commonwealth has 20 different ESP catchment areas.
- The ESP provides 24-hour support, 365 days a year
- Support can be provided face to face or through a telehealth platform.
- The Riverside Community Care Emergency Services Program geographically covers the Southern Worcester County area and South & West Suburban area.
- The ESP can assist individuals and families by making connections to community-based supports, as well as higher levels of care
- **The ESP will respond to requests from individuals, families, police, community providers, schools, residential programs and hospitals.**

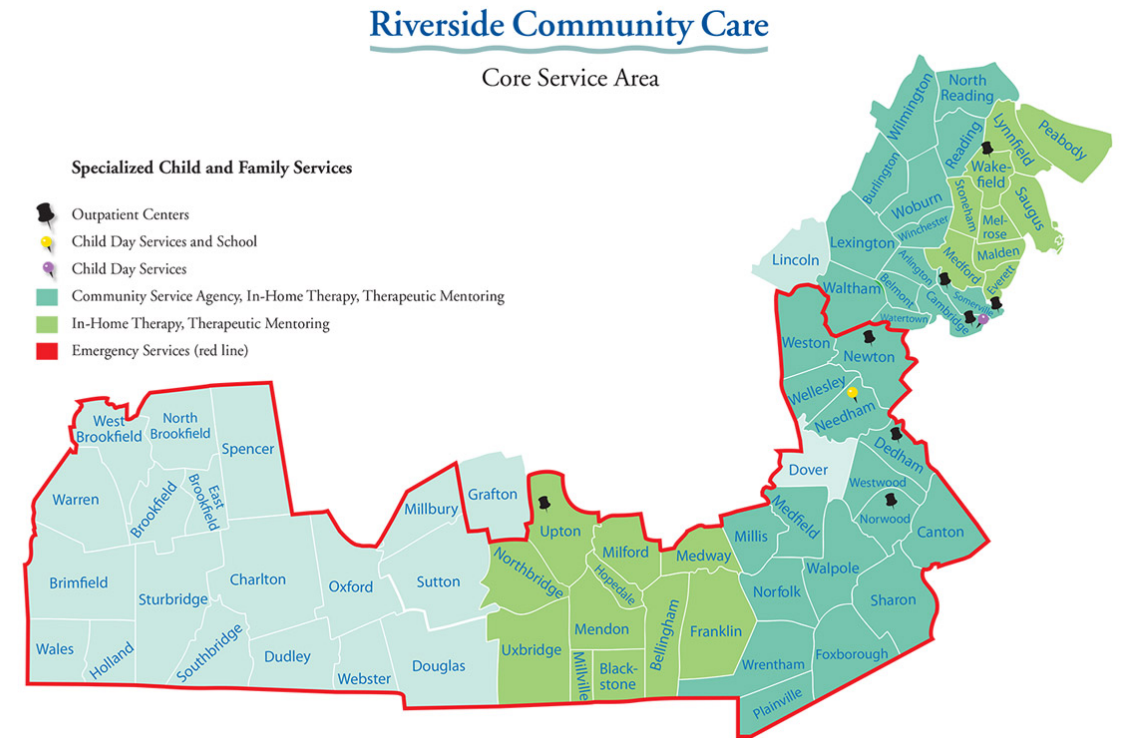
What is Mobile Crisis Intervention?

- Mobile Crisis Intervention (MCI) is the youth component of an ESP.
- Any person under the age of 21 with a MassHealth (Medicaid) insurance product qualifies to receive support through MCI .
- MCI utilizes a team approach to providing crisis intervention and stabilization.
- Our MCI team consists of a child trained clinician and a Family Partner.
- A family Partner is someone that has first hand experience navigating the mental health system on behalf of their own family.
- The MCI team can help to stabilize a crisis by working with a family for up to 7 days.

What is Emergency Services & MCI?

ESP/MCI Services provide the following:







- Onsite or home-based face-to-face crisis intervention, including short-term solution-focused counseling.
- Referrals and linkages to all medically necessary **behavioral health services and supports, including access to appropriate services along the behavioral health continuum of care**
- **Crisis Plans are developed in collaboration with behavioral health providers and/or natural supports to expedite a person-centered disposition based on the experience gained from past treatment interventions**

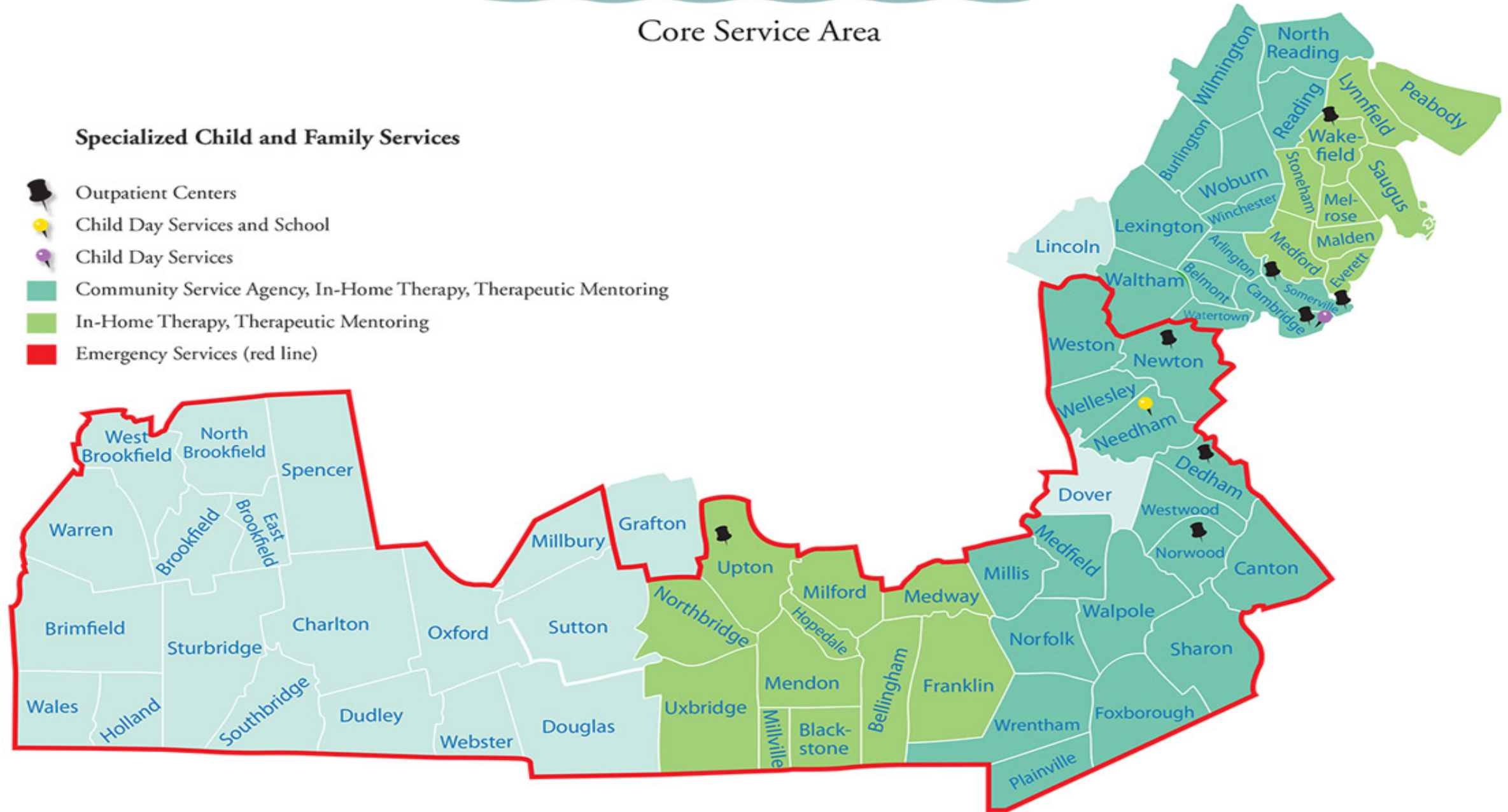


Riverside Community Care

Core Service Area

Specialized Child and Family Services

-  Outpatient Centers
-  Child Day Services and School
-  Child Day Services
-  Community Service Agency, In-Home Therapy, Therapeutic Mentoring
-  In-Home Therapy, Therapeutic Mentoring
-  Emergency Services (red line)



Locations and Contact Info

1. **South County**

32 Hamilton Ave. Milford, MA

800-294-4665 or 508-634-3420

Bellingham, Blackstone, Brimfield, Brookfield, Charlton, Douglas, Dudley, East Brookfield, Franklin, Holland, Hopedale, Medway, Mendon, Milford, Millville, Northbridge, North Brookfield, Oxford, Southbridge, Sturbridge, Sutton, Upton, Uxbridge, Wales, Warren, Webster, and West Brookfield

2. **South and West Suburban**

190 Lenox St, Norwood MA

800-529-5077 or 781-769-8674

Canton, Dedham, Dover, Foxboro, Medfield, Millis, Needham, Newton, Norfolk, Norwood, Plainville, Sharon, Walpole, Wellesley, Weston, Westwood, Wrentham

When Requesting an Evaluation

- **Call the 800 # or the local number associated with your town to request support 24 hours a day**
- **Our staff will request demographic, insurance, and background information to determine an appropriate response.**
- **Clinician will provide solution-focused counseling and support with a goal to help avoid unnecessary trips to the ER by trying to utilize and/or connect the person / family served to community resources**
- **Through MCI, the person served and their family can receive ongoing/daily support for (typically) up to 7 days**

Who Can Be Involved / Request an Evaluation?

- Police / Courts
- School
- DCF/DMH
- CBHI Supports
- ACCS or PACT Team
- Family
- Behavioral Health Providers
- Primary Care providers
- Providers/schools are involved with verbal consent from the Guardian
- ESP clinician will evaluate with a Family Partner or Certified Peer Specialist (when available)
- MCI will utilize 7-day follow up in order to connect everyone involved (this could be longer or shorter, based on need)

Potential Outcomes

- Community-Based Dispositions
 - Individual outpatient therapy
 - Outpatient Psychiatry
 - In-Home Therapy
 - Intensive Care Coordination
 - Partial Hospitalization Program (PHP)
 - Structured Outpatient Addiction Program

Connections with resources including:

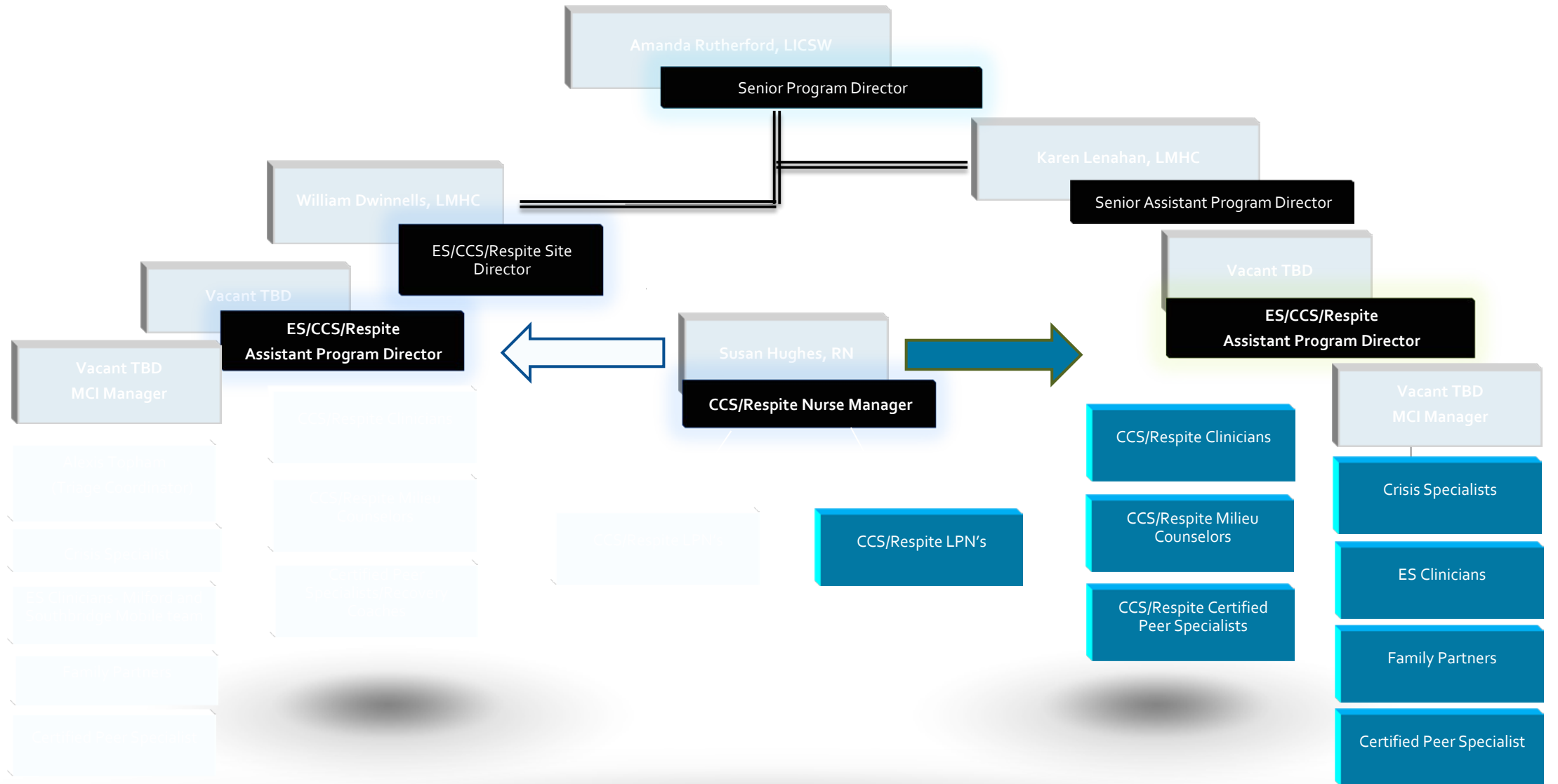
- Self help groups
 - Peer supports
 - Recovery Learning communities
 - Clubhouses
-
- 24-hour Levels of Care
 - Community-Based Acute Treatment (CBAT/ICBAT)
 - Inpatient Hospital
 - Community Crisis Stabilization (CCS)
 - Inpatient Detox

Riverside Community Care Community Crisis Stabilization (CCS)

- Two Locations:
 - 15 Beacon Ave, Norwood, MA
 - 32 Hamilton Ave, Milford, MA
- A local alternative to inpatient treatment
- Total of 9 CCS beds between 2 locations- Milford and Norwood
- Provides stabilization and referral to treatment
- Consists of a multidisciplinary treatment team which includes:
 - NP, RN Nurse Manager, LPN's, Master's level Clinicians, Certified Peer Specialists and Milieu Counselors.

Covid-19 Related Info

- Screening questions will be asked by the person triaging the phone request
- We provide the option of meeting:
 - Via Telehealth using Zoom
 - In person at the place of your choosing
 - Onsite at one of our community-based locations
- Staff will be wearing PPE and practicing COVID-19 safety precautions.
- We ask that individuals requesting services also wear PPE and follow safety precautions.





Mental Health Staff

Elementary Schools & Preschool

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Distance Learning Academy

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Mental Health Staff Middle & High Schools

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Day

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Brown

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Oak Hill

Jannon McKenna: mckennaj@newton.k12.ma.us

Newton South High School

Dan Rubin: rubind@newton.k12.ma.us

Additional Resources

[Emergency Services - Riverside Community Care \(around-the-clock, 24 /7 mental health evaluations\)](#)

800-529-5077

[Samaritans \(If you need to talk to someone about how you're feeling, grieve the loss of a loved one to suicide, or learn how to help others\)](#)

877-870-4673 (Call or text)

[NAMI Massachusetts \(Navigating a mental health crisis\)](#)

800-950-6264 or text 741741

[Samaritans, Inc. :: Anonymous Mental Health Screening](#)

[Home \(handholdma.org\)](#)

877-382-1609

[Substance Use Treatment | Newton-Wellesley Hospital \(nwh.org\)](#)

617-243-6062

[William James INTERFACE Referral Service](#)

888-244-6843

[Riverside Outpatient Therapy \(Adults\)](#)

617-969-4925

[Riverside Outpatient Therapy \(Children & Families\)](#)

617-969-4925

Managing Substance Use During COVID-19

Insights and Practical Strategies to Promote Healthy Living

Alcohol and other substance use is increasing as people stay home and cope with anxiety, depression, isolation, and in some cases, job losses and financial hardship amid the COVID-19 pandemic. Join us for a conversation with community members who learned how to manage their own substance use issues followed by a panel discussion and Q&A with Newton-Wellesley Hospital experts and clinicians in the fields of addiction medicine, primary care, psychiatry, spiritual care and preventive health.



Wednesday, March 3

7 – 8:30 p.m.

Free, virtual event

[Register Now](#)

Hosted by the NWH Substance Use Services Council.



**NEWTON-WELLESLEY
HOSPITAL**

The Newton-Wellesley Collaborative for
**Healthy Families
and Communities**

