



South Shore Community Partners in Prevention

South Shore Community Partners in Prevention (CHNA 23)

Wednesday, March 10, 2021

8:55 A.M. to 10:00 A.M.

Zoom Meeting

Minutes

In attendance: Cristina Wilson, Associate Executive Director Old Colony YMCA Plymouth; Stephanie Cully LICSW BWH Harbor Medical; Rose Hamilton, Communications Manager, Health Imperatives; Jennifer Allison, Health Imperatives; Theresa Harmon, To the Moon & Back; Blake Dinius, Educator at Plymouth County Extension; Carrie Manne, Residential Coordinator for Cooperative Productions; Patty Reid-Howe, DDS Services, Plymouth Area Office; Rea Shqepa, Community Engagement Health Imperatives; Kathryne McNichols, Community Development Manager, Vitra Health; Kim Harrison, RN, Healthcare Supervisor for the May Institute; Jessica Gonsalves, Family Support Director, Plymouth County Family Support Inc.; Tyra Jackson, DMH, Steering Committee Member; Chris Mower-Coordinated Care Network; Jen Cantwell, Community Programs Coordinator at the Plymouth County District Attorney's Office; Jennifer Hoadley, Regional Manager, Alzheimer's Association; Karen Kintz Domestic Violence Specialist at Department of Transitional Assistance; Commissioner Brooke Doyle, DMH; Kelly Macomber, Plymouth Public Schools/PYDC; Katelyn McSweeney, High Point Treatment Center, Prevention Services; Kathleen Considine, NAMI Plymouth Area, CHNA23 Steering Committee; Sheila Flaherty - NAMI Plymouth Area, President; Susan West BID Family Education; Maureen Doherty, BID Plymouth Case Management and member of SSCPP Steering Committee; Trudy Avery, Executive Director, Cook Family Charitable Fund; Kati Mapa, UWGPC Family Center Clinical Advocate; Bobbi Martino; Liz Weiner, OCES; Deb Schopperle, BID Plymouth, Mike Jackman, Congressman Keating's Office, Kim Scotland, United Way/SSCPP Coordinator

Mike Jackman, SSCPP Chair kicked off at 8:54am.

All voted to approve the February general meeting minutes.

Mini Grant Outcomes Report: Health Imperatives Plymouth WIC Program

Jennifer Allison, VP Development & Community Relations, Health Imperatives

Rose Hamilton, Communications and Marketing Manager, Health Imperatives

- Jennifer provided a brief overview of Health Imperatives and its services. The organization provides sexual and reproductive healthcare, Women, Infants, and Children

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(WIC) services, and services for survivors of trauma. Have 7 locations across southeastern MA.

- In July, with funding from SSCPP, began an outreach campaign to raise awareness of their Plymouth WIC services.
- WIC serves low income, pregnant women or women and their children under age 5. In FY 20, the program served 2,000 individuals.
- Outreach campaign's main objective is to inform low-income families about WIC services and help more families access these services. Goals are to deliver printed materials and online promotions to families in Plymouth and surrounding communities who may not be aware of WIC services or may be interested in re-enrolling in the program AND to incorporate health literacy principles to all WIC materials, enabling WIC information to be accessible to individuals with limited literacy skills.
- Only 35% of folks eligible for WIC in SSCPP catchment area were receiving the services. Also, folks impacted by pandemic were newly eligible to enroll or to re-enroll.
- Created new materials and made materials easy to access and understand (4 flyers and fact sheets). Also shared on social media including info on program, healthy eating and breastfeeding tips. Sent out a press release, put posters on buses, and created a PSA with PACTV.
- Want info to be as accessible and easy to digest for target audience especially for folks with limited literacy skills. Phrases like "WIC can help you" are used with easy-to- identify icons such as an apple for healthy eating.
- Delivered printed materials to local pediatricians. All printed materials are in English and 4 additional languages.
- Reached a large audience on Facebook- nearly 78,000 folks so far! So far, monthly caseload has increased by 10%.
- PSA may be viewed here: <https://www.youtube.com/watch?v=krhWI-QzMKA>

Main Presentation: Mental Health Before, During, & After COVID-19

Brooke Doyle, Commissioner of the Massachusetts Department of Mental Health

- Commissioner Doyle reviewed "Roadmap for Behavioral Health Reform: Ensuring the right treatment when and where people need it" shared by the MA Executive Office of Health & Human Services. Not just a DMH initiative – working with all public agencies and stakeholders on roadmap.
- Full slides can be viewed and downloaded here: <https://www.mass.gov/doc/roadmap-for-behavioral-health-reform-ensuring-the-right-treatment-when-and-where-people-need-it/download>
- Commissioner Doyle shared that she often speaks about mental health and substance use disorder together as it is common to experience them together as a whole person rather than in silos.

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- Early in pandemic, folks were staying home and not going out to seek additional help- a big drop in help seeking activity at this time. Thus, providers pivoted to telehealth services for access as much as possible. Telehealth became a lifeline for a lot of people. It was not the right modality for some people and some could not access telehealth. Learned that behavioral health, at least in some measure, needs to be in person to be sure we are reaching all people.
- After a couple months of isolation, many folks went to emergency departments for BH intervention. In some hospitals, social distancing protocols created fewer beds available. Outbreaks in hospitals for COVID caused admission to be limited. Contributed to wait times being very long. Are working with hospitals that have the capacity to increase. MA has done quite a bit to invest in BH services during the pandemic.
- Walked through the roadmap for BH reform slide deck linked above. Reform is based on listening sessions with feedback from nearly 700 people. Heard folks often do not know where to start to get help.
- The pandemic has only heightened the urgency for mental health services. Providers saw about a 90% conversion to telehealth. Found that people over 75 and young men tended to not lean into telehealth.
- Planning to create a centralized front door so folks know where to start that is easy to access. Will create a call center to get I&R, triage, and navigation functions that leads caller to a new provider type called a Community Behavioral Health Center. Centers will have urgent care, same day access, and crisis care. They will be dotted throughout commonwealth and also added as expansion services to existing providers such as integrated into primary care.
- Will advance health equity to meet diverse needs, encourage providers to accept insurance, and broaden insurance coverage. Envision crisis beds for youth and adults. Envision public expenditures will increase by over \$200 million. Important piece about front door is that it needs to be accessible and will be in multiple languages. Will not be an immediate change.
- Will move behavioral health out of a fee-for-service payment schedule and instead a value-based service.
- Q&A session coming up on March 15th.

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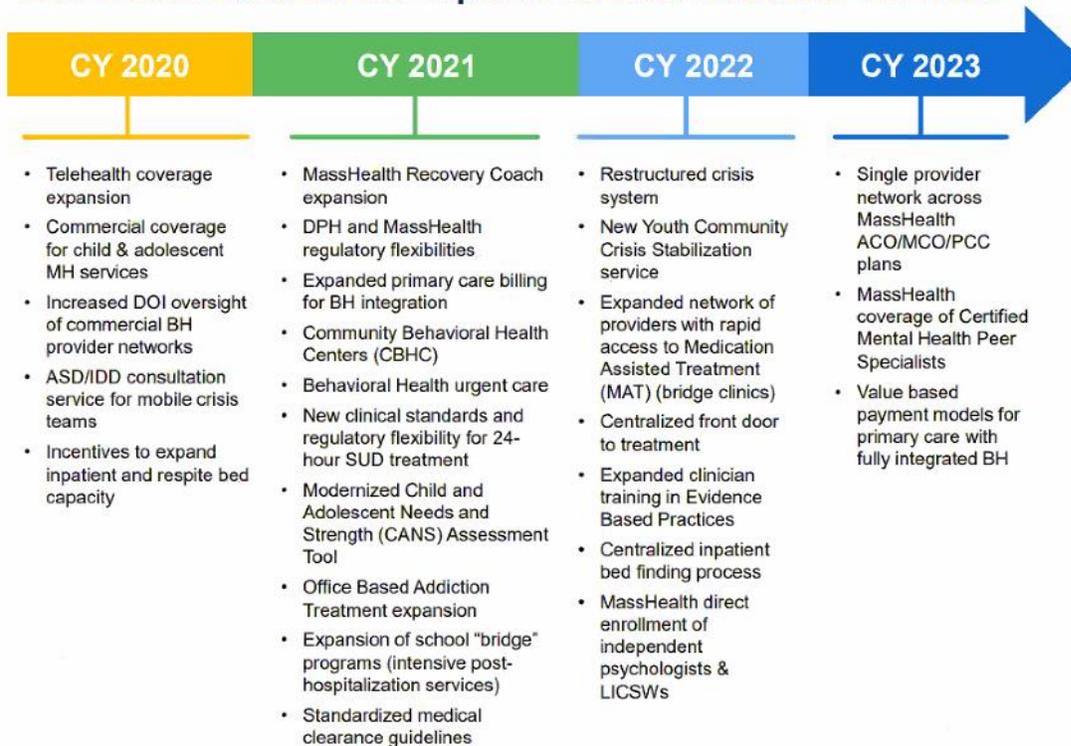
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Behavioral Health Roadmap and Related Initiatives Timeline



Resource for providers: MassSupport operated through Riverside's Trauma Center. State-wide resource: <http://riversidetraumacenter.org/our-services/masssupport/>

Blake, Dinius, Plymouth County Extension Tick-borne Disease Survey Request: Blake shared information on a project he is working with Cornell University on. The study will look at the impact tick education has had on changing behavior. He is looking to distribute to Plymouth County to collect baseline data for what folks know on tick-borne diseases. Survey takes about 15 minutes to complete. Will then follow-up with new programming and post-test focus groups. Looking for results through March 20th. Survey link: https://qfreeaccountssjc1.az1.qualtrics.com/jfe/form/SV_bmfz9jJtLoeRu0

SSCPP Health Literacy Awards: We have opened the call for nominations for our third annual SSCPP Health Literacy Award which will be announced at a ceremony in June. Nominations for health literacy leaders in our community are due by April 30th. More info and award form can be found on our website: <https://chna23.org/latest-news/>

Opened floor for member announcements. Next Meeting: April 14th

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