#### JOINT SELECTMEN AND SCHOOL COMMITTEE MEETING

Monday, June 18, 2018 Estabrook Hall, Cary Memorial Building 7:00 PM

#### **AGENDA**

#### ITEMS FOR INDIVIDUAL CONSIDERATION

- 1. Town and School Staff Presentation Regarding Mental Health Services (20 min.) 7:00 p.m.
  - Board Discussion (40 min.)
- 2. Public Comment Period Regarding Town and School Mental Health Services (60 8:00 p.m. min.)

#### **ADJOURN**

1. Anticipated Adjournment

9:00 p.m.

The Board of Selectmen will meet for their annual Goal Setting on Tuesday, June 19, 2018 at 8:00 a.m. in Estabrook Hall, Cary Memorial Building, 1605 Massachusetts Avenue.

The next regularly scheduled meeting of the Board of Selectmen is scheduled for Monday, June 25, 2018 at 6:30 p.m. in the Selectmen's Meeting Room, Town Office Building, 1625 Massachusetts Avenue.

Hearing Assistance Devices Available on Request All agenda time and the order of items are approximate and subject to change.



## AGENDA ITEM SUMMARY

# LEXINGTON JOINT BOARD OF SELECTMEN AND SCHOOL COMMITTEE MEETING AGENDA ITEM TITLE:

Town and School Staff Presentation Regarding Mental Health Services (20 min.)

PRESENTER:

Carl F. Valente, Town Manager;

Municipal and School Staff

I.1

## **SUMMARY:**

No vote is requested for this agenda item.

Staff will presents its recommendations for enhancing the municipal and school mental health services and programs.

#### **SUGGESTED MOTION:**

NA

## **FOLLOW-UP:**

The time of implementing the recommendations will depend on future staff resources, some of which will be addressed during the annual budget process.

## **DATE AND APPROXIMATE TIME ON AGENDA:**

6/18/2018 7:00 p.m.

## **ATTACHMENTS:**

Description Type

□ Staff Recommendations for Consideration Presentation



# **Mental Health Summit**

Staff Recommendations to the Board of Selectmen & School Committee

Monday, June 18, 2018

Presented by Town of Lexington Municipal and School Staff:

Carl Valente, Ian Dailey, Charlotte Rodgers, Val Viscosi, Julie Fenn, Melissa Interess, Jill Gasperini, Anthony Serio

# **Integrated Approach to Mental Health for the Lexington Community**

# Intervention =

crisis stabilization; referral; short-term assistance to address immediate needs

# proactively identify concerns; monitor for progress; refer to other

Identification =

resources

## Postvention =

crisis resolution; ongoing monitoring through identification & prevention activities; emotional support



educate before concern is present; build healthy culture; provide alternate activities/options, emotional support

# What is the Role of Town Government in Providing Mental Health Services?



- 1. Provide a 24/7 response for community members of all ages.
- 2. Provide ongoing/<u>sustainable</u> mental health services and programs using municipal and school staff and mental health partners.

# To do this we:

- Collaborate
- Provide information and referral, crisis intervention, case management, short term counseling, prevention services, education and training
- Assess needs
- Identify barriers
- Align with changing demographics and needs of the community
- Welcome other community groups and organizations to share mission; discuss community needs

# What is the Role of Town Government in Providing Mental Health Services?



# **Definitions of Important Concepts:**

- 1. Safety Net Lexington provides 24/7 emergency response (Police, Fire, and Human Services staff) working together to stabilize crisis situations. Community-based services include identification, prevention, intervention, and postvention which involve staff from multiple departments including Police, Fire, Human Services, Health, Library, Recreation & Community Programs, and Lexington Public Schools.
- 2. Short Term Counseling Solution-focused counseling to address situational problems such as relationships, parenting, stress management, communication and interpersonal conflicts, mental health, and substance use. Counseling services include crisis intervention, assessment, case management.
- **3. Resource Referral** Connect to programs, services, and supports that will help maintain the individual or family successfully in the community.
- **4. Education and Training** Providing quality, evidence based mental health programs to the community.

# **Community Feedback**











- How can we reduce the Stigma around Mental Illness?
- Need to address All Ages
- Need to address Lexington's diversity and outreach to All Subgroups
- Need to provide improved access to Mental Health Resources
- Need to improve Municipal and School web based information
- Need to reduce isolation and loneliness
- Need to provide "safe" places for teens
- Need for more community mental health & wellness Education and Training
- Need to improve Communication and Collaboration with Municipal/Schools/Community Organizations

# Strengthening Mental Health Programs Recommendation #1



# **Interdepartmental Communication & Collaboration**

# Municipal/School Leadership Team for Mental Health Programs and Services

- Create a sustainable internal structure by formalizing the Mental Health and Wellness Task Force with leadership reporting to the Town Manager and the School Superintendent
- Membership includes representatives of School Guidance & Counseling, School Nursing, Human Services, Health, Police, and Fire Departments
- Develop and align protocols, policy and procedures between Municipal and School Departments
- Engage community stakeholders by establishing clear communication and role expectations

# Strengthening Mental Health Programs Recommendation #2



# **Mental Health Services**

# Ensure that Mental Health Resources are accessible to Lexington residents of all ages

- Provide information about the mental health services offered through the Town (Municipal and School) with improved marketing, using web based tools, social media, forums, and public events
- Develop multi-year plan that will strengthen mental health programs and services (staffing and programming)
- Recognize the diverse needs of the Lexington community and provide specific outreach and services to subgroups

# Strengthening Mental Health Programs Recommendation #3



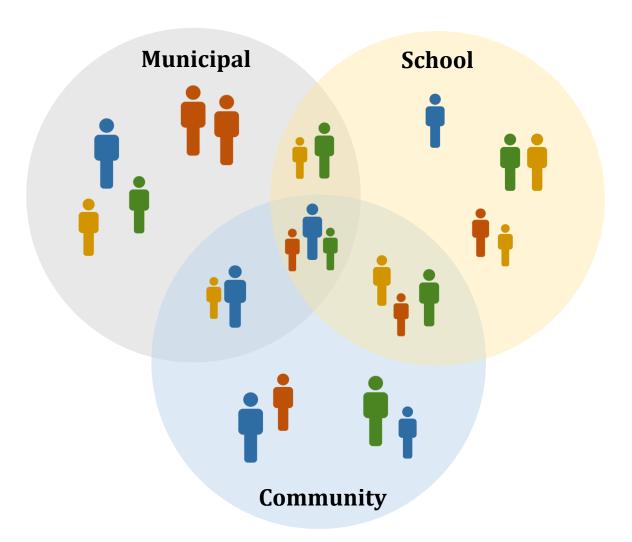
# **Education and Training**

# **Reduce Stigma around Mental Illness**

- Implement internal education and training for Municipal and School Staff
- Develop coordinated community trainings to improve early identification and prevention of mental health issues, substance use/abuse, and suicide through evidence-based practices (QPR, Mental Health First Aid, Signs of Suicide, SBIRT, Preventure)
- Provide resource "hubs" that maximize access to mental health and wellness information (Town Offices, Schools, Community Center, Library)
- Improve opportunities to reduce isolation and provide support systems
- Ongoing evaluation of education and training programs

# Sustainable Communication, Collaboration & Coordination





# Role of Board of Selectmen and School Committee



Adopt and support recommendations for multi-year plan to strengthen mental health programs and services.

Support recommendations and advocate for required resources.

## **AGENDA ITEM SUMMARY**

# LEXINGTON JOINT BOARD OF SELECTMEN AND SCHOOL COMMITTEE MEETING AGENDA ITEM TITLE:

Public Comment Period Regarding Town and School Mental Health Services (60 min.)

PRESENTER:

Wendy Rundle, Facilitator

I.2

## **SUMMARY:**

No vote is requested for this agenda item.

The Selectmen and School Committee will take public comments on the Town's mental health programs and services and staff recommendations for future enhancements.

## **SUGGESTED MOTION:**

NA

## **FOLLOW-UP:**

## DATE AND APPROXIMATE TIME ON AGENDA:

6/18/2018 8:00 p.m.

#### **ATTACHMENTS:**

	Description	Type
	Previously Submitted Public Comments	Backup Material
D	Notice for Public Comments	Backup Material
D	Comment - Helene Mayer	Backup Material
D	Comment - Overton	Backup Material
D	Comment - Applegate	Backup Material

# Board of Selectmen, School Committee and Human Services Committee Written Public Comments

#### Wednesday, September 27, 2017 -Community Center; Room 237

Again fantastic discussion tonight. So glad to see the issues of mental health being addressed.

I think going forward any groups or input you seek or put together should include those people who you seek to serve. It will empower them and create buy in. The best information is from people living it. The kids when appropriate should have a voice. Seniors as well.

Is the "coalition" lacking staff from all the necessary departments to identify gaps in service?

It was my understanding the "coalition" was for that very purpose?

There is pressure on Town staff, and budget process.

Is there not an idea to leverage community as part of the "human infrastructure"?

Is that what the "coalition" is being utilized for as an address to the pressures?

See Betsy Weiss' summons from peer community research (they were shared with Sandro last May/June).

Is there a difference in the way adults deal with depression, etc. and kids? I believe there are many adults who are silently screaming in their heads. And perhaps kids do the same – yes/no – if yes, then how do you deal with this?

Please stop using the term "sides". Focus on the community as a whole (comment).

What is the coalition? Who are representing the adults/seniors?

Regarding the Community Coalition, I agree that it has the <u>potential</u> to be an important vehicle relative to concerns addressed tonight but <u>not</u> in its current form. It looks clear authority, is cumbersome in its structure and perhaps a tad over-ambitious while at the same time too easily distracted or broad in its purview.

A concern is degree of "dosing" of messages being communicated to kids in the schools. Are we talking about "stress" too much? Is conversations about stress perpetuating it in kids' minds and parental concern? Could we be more effective applying a more in direct approach:

- Asset-based approach?
- Model "health" as the adults in the community.
- Be more thoughtful about what we "rewards" and celebrate.

Community/school spirit

Be kinder to one another in our public discourse.

Filling in gaps to explain the numbers by going to teachers and staff –

Also need to go to parents, students and advocates because they don't always feel safe to go to staff. Both in school and in town, disenfranchised people (especially low-income, homeless and disabled) are not well represented in the data and community/avid municipal/school organizations. Need to be more active in seeking those experiences.

Suicidality – is not just due to mental illness, but also (and sometimes primarily) due to despair resulting from harassment/bullying. It does these students a disservice to attribute suicidality to mental illness alone. Filling in stories behind the numbers – <u>many</u> parents, students and advocates have stories to provide stories and explanations of why and how students feel this way.

How do people (of any age) know where to go to get help?

Need to know that services exist <u>and</u> that they will be safe and respected when they seek help. Many "marginalized" people don't know whether they will be safe and respected. They are also less likely to know about or have access to services. Need to reach out to civic, cultural and advocacy groups to

foster connections and trust – and hire staff who reflect all types of diversity. Asking students about awareness of services and what they would like. Also need to ask whether they feel safe and confident that they will be understood and respected.

In addition to town and school staff and LYFS, please ask for input from cultural and advocacy groups whose perspectives might not be represented by staff and LYFS.

\* Parents are not well served by town or school services unless they are completely

\* Parent focus groups are essential/survey.

\* The School Comm. says that they have looked at other town models but this isn't for all populations in the town. There is a need for more information <u>social service</u> delivery.

First this is a great 1<sup>st</sup> start. Having this discussion is important and I'm inspired that it's taking place.

What I'm curious about and what I haven't heard is how to address the love from which these issues and concerns arise. Take for example academic stress and how it relates to suicide. You can put programs in place to mitigate mental health issues, but you aren't going to affect the root cause. I suppose what I'm trying to say is if you set out to treat the symptoms but don't seek the effect the cause I don't believe you'll make significant progress. Just my two cents.

Anecdotal (what I've heard kids say)

- "I'm carrying my parents stress".
- "I'm constantly comparing myself to my peers".
- "Friends at school may not help one another tried because of competition".
- "There's so much talk about "stress" I am stressed if I am not stressed".
- "My parents gave up so much to be here. I owe it to them to succeed".
- "College applications or process is stressful".
- "It's not enough to be a good student, you also have to be a good athlete, first choir violinist, community service star, etc.".
- "I don't know if I can/should go to a school counselor if I'm struggling because I need them to write my college recommendations. I don't want them to think I can't handle it".

Re: Teen Center

To Chair of BOS and School Committee, thanks for the joint meeting. I was on the Committee which endorsed the concept of the Community Center with clear recommendations for specific programming for a Senior Center and Teen Center. A number of Selectmen and the Town Manager have an eye on the Carriage House – as recommended for future consideration. I would very much appreciate the BOS raise the Teen Center/Carriage House concept to be reviewed in their goal setting/budget setting process. Members of our original recommending committee are still very active in town and would happily discuss their recommendations with the BOS.

Timothy F. Dugan, MD

14 White Plains Lane

O: 781-861-1463

C: 617-851-9492

#### February 7, 2018 - Estabrook Hall

- How often is Youth Mental Health 1<sup>st</sup> Aid offered?
- Has the Town developed a Logic Model related to the mental health outcomes it seeks?
- Do we know the reason for the recent teen suicides? Was there anything we could have changed as a Town to prevent these?
- Families seem stressed parents working and commuting many hours, rushing to get home, make dinner, help kids, etc. Families who have kids involved in sports or other activities run to and from continually on the go.

I don't think the Town can change those scenarios, but I wonder if we might foster a stronger sense of community. Some neighborhoods form tight bonds, other don't. Some people seem isolated and don't know neighbors who can assist with carpooling, dinner help, babysitting, "mother's helpers", etc. Could we coordinate a network of neighborhoods – to know other teens, seniors, parents better??

- Are the schools exploring the stress/workload? New homework policy has not changed amount
  of daily homework, it seems. Also the extra-curricular programs (Russian Math, Kumon, etc.)
  seem to be having an impact with perhaps some students feeling they can never match-up with
  kids who are in these extra programs. I am not sure how we explore that while honoring family
  choices.
- Back to coordinating neighborhood connections, could we promote National Night Out and
  encourage block parties as a start to this? The dynamic of a community/neighborhood can
  influence a wide array of things..... it can encourage outdoor play and community gatherings;
  employing teens for yard work, shoveling, babysitting, etc.; assisting each other; people with
  strong connections tend to be less stressed.
- What parent support groups exist? There is an informal LHS parents group, but they meet during hours in which many working parents are unavailable.
- Talking with students, it sounds that many do not take the Risk Survey seriously. How do you determine accurate data?
- Have we found a way to just survey families on what they need regarding mental health stress reduction, supports, etc.?

#### March 22, 2018 - Estabrook Hall

- 1. One major concern about addressing mental health needs in Lexington is working with diverse demographics, including various racial/ethnic groups, faiths, national origins, and gender and sexual identities, and dis/abilities. Cultural competence/sensitivity is essential, as is experience with LGBJQ+ populations. This does not appear to be on the forefront of the agenda and handouts or the personnel and service areas in the community and external agencies. Their websites/materials and presenters appear to represent primarily a white cisgender heterosexual, able, Judeo-Christian demographic. How do the Boards intend to address more diverse needs?
- Local, regional and state suicide prevention coalitions do not appear to reflect community demographics. It would be helpful to see resources better reflect demographics – all demographics, including LGBTQ+ and others that might not feel comfortable reaching out to straight-appearing resources.
  - It's helpful to acknowledge gaps in resources. Saying that we have a lot of resources doesn't make clear that some demographics do not have appropriate services.
- 3. Another reason for refusal to seek services is the perception that resources are not knowledgeable about or sensitive to their cultures or identities. I know LGBTQ+ seniors who go back into the closet for assisted living or other services because of lack of support --- and then don't get their mental health needs met.
- 4. It would be very helpful for the Town \* Schools to have a diagram of services available and a decision tree or similar tool to work out where to go and when.
- 5. Before getting into prioritization or designing programs, it's important to hear from the public. We need to hear from a greater diversity of people.



# Town of Lexington

# Town Manager's Office

Tel: (781) 698-4540

Fax: (781) 861-2921

Carl F. Valente, Town Manager Kelly E. Axtell, Assistant Town Manager

May 17, 2018

Dear Lexington Resident:

We are writing to solicit your input regarding mental health services provided by the Town.

Since September 2017, the Lexington Board of Selectmen and the Lexington School Committee have held four joint meetings with municipal and school staff along with the Town's Human Services Committee and outside providers to discuss the topic of Mental Health Services in Lexington and, in particular, to look at the question: "What is the role of Municipal and School Departments and the community in providing mental health services to the Lexington community?"

The meetings to date have been recorded by LexMedia and are available for viewing. To view the meetings, go to the on demand section of the LexMedia website <a href="www.lexmedia.org">www.lexmedia.org</a> and then to the Board of Selectmen playlist. The dates of the meetings were: 9/27/17, 2/7/18, 3/22/18 and 5/2/18.

On Wednesday, May 23, 2018 at 7:00 p.m. in Estabrook Hall (lower level) of the Cary Memorial Building, 1605 Massachusetts Avenue, the Board of Selectmen and School Committee will hold a joint meeting to hear the recommendations of Municipal and School staff on the topic of Mental Health Services in Lexington and will also take public comment on the issue. The public is invited to attend.

Should you be unable to attend the meeting on May 23<sup>rd</sup> but would like to comment you can do so by:

Written comments can be directed to the Board of Selectmen and the School Committee until Thursday, June 14, 2018 at noon:

- By email: selectmen@lexingtonma.gov, school-com@lexingtonma.org
- By mail: Lexington Board of Selectmen, 1625 Massachusetts Avenue, Lexington, MA 02420; Lexington School Committee, 146 Maple Street, Lexington, MA 02420

Following the meeting on May 23rd, the two Boards will meet again on Monday, June 18, 2018 at 7:00 p.m. in Estabrook Hall to discuss recommendations presented and receive further public comment. The public is invited to attend this meeting as well.

Suzanne Barry, Chairman Lexington Board of Selectmen Eileen Jay, Chairman Lexington School Committee Carl F. Valente, Town Manager Dr. Mary Czajkowski, School Superintendent From: Helene Mayer
To: selectmen"s

Subject: "What is the role of Municipal and School Departments and the community in providing mental health services to

the Lexington community?"

**Date:** Friday, June 1, 2018 2:01:09 PM

#### Hi.

I was unable to attend the meeting but read the article in the Minuteman. I have a lot to say, so bear with me.

It's been more than a year since Ilana's suicide. I've been advocating for change in the system since the day she died. As a therapist with a rather extensive experience in crisis work (including 2 1/2 years on the Crisis Team for this area prior to the closing of our State Mental Health Hospitals).

An implementation plan which takes four years (one year has already passed) is years too long. In the meantime, something needs to be in place which consolidates all of the services in town. That will cost money. Spend it. If one life is lost because of a delay in implementation, I will consider that to be the responsibility of those who are in the position to take action and fail to do so. I hope I'm being emphatic enough.

When there was a crisis team, we were on call 24/7 to evaluate people in crisis. We hospitalized people with serious mental health issues on the spot. We made referrals. We followed up the very next day. We saw teens who were cutting, who were suicidal, psychotic. I know that we saved lives. Lucky for everyone that we were State-funded. But that funding went away with the demise of State facilities and, since that time, services have become more and more fractured. I know the history because I lived it. We need to do better. And, we need to do better immediately, not in three years.

Education and coordination takes time. Hire a company which is expert in setting up a system which is accessible to every citizen in town, while the town in working to set up it's own system. Or, use another agency for crisis intervention and referral - one with experience.

We do a lot of talking in town; we have a lot of discussion. We do a lot of "planning", which takes a very long time. Generally, that planning piece takes much longer than people anticipate and the implementation takes even longer.

Bottom line is this: People with mental health issues who are in crisis can't wait for us to figure things out. We need to do something which can start up within months. That will give us time to "discuss" and "plan" and "implement" our own system.

In my opinion, failing to act is irresponsible. I say this as a mother, a citizen of Lexington, a therapist and a humanitarian. I'm glad to meet with anyone interested to discuss ideas. I know that there are others in town who feel similarly.

We should not be the town which allows people with serious mental health issues to fall through the cracks when they need us the most. Students, older individuals, families all need to know where to go for mental health services and they need to be able to access them quickly and efficiently. If we can't do that by the end of summer with the current plan, we need to find a way.

We've already taken too long.

Helene Mayer

Lexington, MA 02421

From: Valerie Overton

To:

Subject: Lexington mental health needs

Date: Friday, March 23, 2018 11:19:17 AM

Dear Selectmen and School Committee members,

First, I'd like to thank you again for holding a series of joint meetings between your boards to understand and address our community's mental health needs. I am grateful to see your commitment to this important topic.

During last night's meeting, several presenters discussed existing services and their perceptions of gaps and challenges. I'd like to point out a major gap/challenge that was not addressed last night: the dearth of experienced mental health providers, resources, and good practices for addressing the needs of the various demographic groups in our town. Unfortunately, current services and presenters (and their materials, handouts, and websites) appear to represent white judeo-christian cisgender heterosexual people. This is one important reason (among other reasons) why many people in our town hesitate to reach out for help when they need it.

For example, I have personally heard from Chinese, Korean, and Black individuals in our town, who have told me that they do not feel confident that available services will understand them and their needs from a cultural perspective, so they have not reached out. Similarly, individuals in town who are LGBTQ+ have told me that they have trouble finding (or cannot find at all) mental health resources that have experience with LGBTQ+ issues. Furthermore, some youth and seniors struggle with safety issues in the family, schools, faith institutions, community, and assisted living or other care institutions for seniors — and they need resources that address those issues. Sadly, we have youth in Lexington who are abused or outright rejected by their families for being LGBTQ+ and we have seniors who have felt the need to go back into the closet in order to feel safe receiving care. I have tried to help, but these are systemic issues that need a system response. Additionally, I know that some people with disabilities or learning differences have found it difficult to find appropriate mental health care.

I strongly believe that your boards need to hear from a more representative cross-section of our community in order to effectively plan next steps for mental health structures in our town. I thank Deepika Sawhney for mentioning this at the end of the meeting last night, and to Eileen Jay for adding her comment as well.

Sincerely, Valerie Overton From: Meredith Applegate

To:

Cc: Meredith Applegate

Subject: mental health collaboration across municipal, school dept, and community organizations

**Date:** Tuesday, May 22, 2018 11:43:38 AM

#### Dear Board of Selectmen and School Committee,

I wholeheartedly agree that a collaboration across Municipal Depts, School Depts and other Community Organizations (much like the conversations initiated by the Youth Coalition) is needed to address mental health issues across all ages within our community.

- \* I have seen the collaboration between the Town / Municipal and School Depts as they related to school construction projects and thought it was extremely successful and efficient.
- \* Just as some students may not want to seek counseling/help at school due to confidentiality issues, other residents who may need help seeking counseling may not be in school and a broader system needs to be in place.
- \* Often times someone needs to feel that help surrounds them in all facets of life (vs. just one) before someone feels comfortable seeking it.
- \* As has been discussed in many Coalition meetings/discussions, the stigma associated with mental health is a big issue and yet we read daily about the increase among mental health issues among people of all ages in our schools and at home.
- \* I do not think most parents/students understand resources available to them in school and in the community and it can be difficult to navigate for someone who has lived here for decades -- let alone someone new to the community who may need it the most.
- \* I applaud the idea of a task force and examining neighboring towns as far as what work has been done (just as was done with Community Center, etc.) to provide an integrated mental health plan/program across the community/town/schools.

As with many of our greatest societal/community issues, there is no "easy" solution and will involve work by many people and groups. Thank you to the Board of Selectmen and School Committee for coming together to engage the community, gather input and start a task force around mental health.

Respectfully, Meredith Applegate,