Violence, Mental Illness, Substance Use, Trauma, Society 10 Policy Considerations for BH Leaders (in no particular order)

National Dialogues on Behavioral Health
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Disclosures

 In addition to her NASMHPD role, Dr. Pinals serves as Adjunct Clinical Professor of Psychiatry, University of Michigan and Medical Director, Behavioral Health and Forensic Programs, Michigan Department of Health and Human Services, and psychiatric expert in litigation related to systems and consults to jurisdictions, organizations and federal entities

Dr. Pinals has no conflicts related to this presentation

LEADERSHIP AT TIMES OF ADVERSITY

Responding to a High-Profile Tragic Incident Involving a Person with a Serious Mental Illness

A Toolkit for State Mental Health Commissioners

orkplace Violence attle, Too Laton Army Tragedy Strikes College Campus Att Health System Order Center Attendance of the NASMHPD

DO NOT BE AFRAID TO ASK HARD QUESTIONS TO IMPROVE

Man convicted in murder of group home worker

By Akilah Johnson and John R. Ellement Globe Staff, October 28, 2013, 3:07 p.m.















(()) LISTEN LIVE: BBC Newshour



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Report Raises Questions About Mass. Mental Health System

December 10, 2013

By Deborah Becker





This article is more than 9 years old.

The Massachusetts mental health community gathers Tuesday for the second annual symposium on the safety of the state's mental health workers — an event organized in

BE AT THE POLICY TABLE TO EDUCATE

Being at the Table

- Education about the role of mental illness and other factors
- The limits of what mental health professionals can do
 - Which policies should BH take on
 - Which policies should BH not take on
- The importance of multidisciplinary teams and multidisciplinary educational efforts

UPLIFT THE WORKFORCE TO DO THE BEST IT CAN

Uplifting the Workforce

- Training
- Support
- Continuous quality improvement

UNDERSTAND EXPECTATIONS

Understand Expectations

- Statutes
- Rules
- Policies
- Outside entities
 - OSHA
 - Joint Commission/CARF
 - OIG reviews

BE TRAUMA INFORMED

Be Trauma-Informed

- For persons served
- For staff

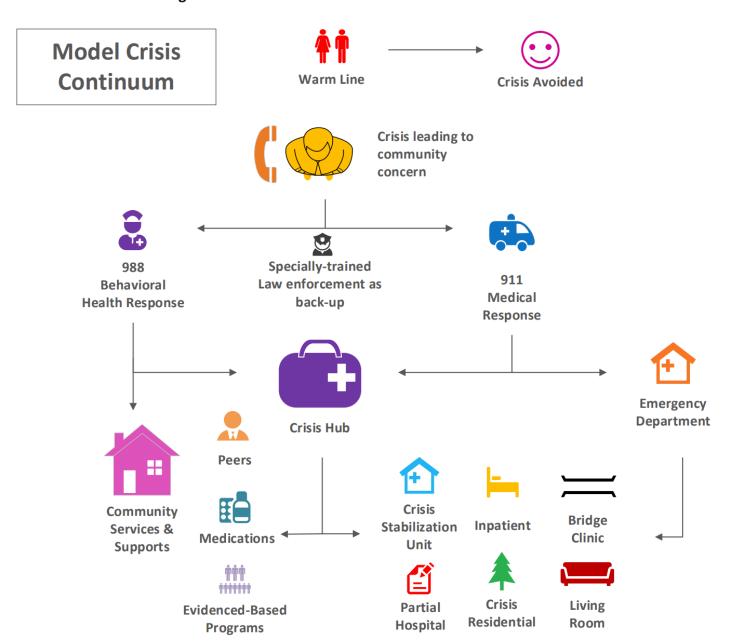
RELY UPON EXPERTS AND OTHERS

Rely Upon Experts and Others

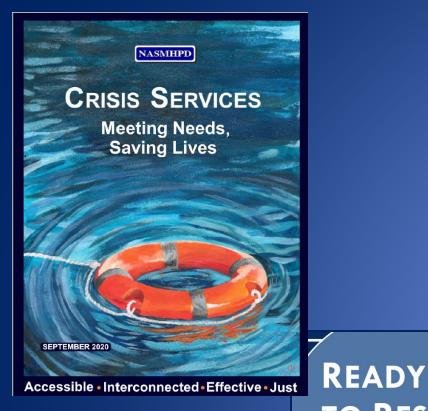
- Never worry alone
- It takes a village

PREPARE YOUR SERVICES TO PROVIDE PROPER TRIAGE, ASSESSMENT, AND CARE SINCE ISSUES OF VIOLENCE CAN EMERGE IN ANY SETTING

Figure 2: Flow of an Interconnected Model Crisis Continuum

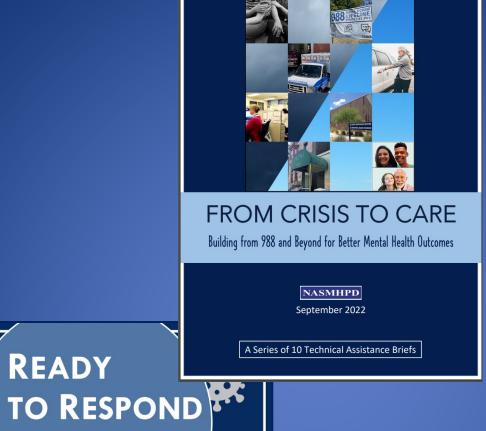


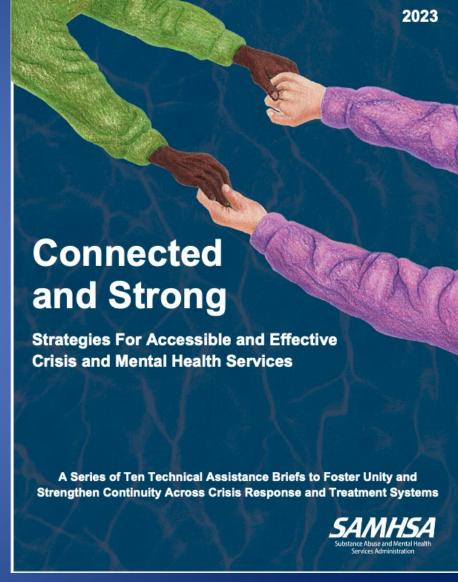
Pinals DA. Crisis Services: Meeting Needs, Saving Lives. NASMHPD 2020 https://www.nasmhpd.org/ sites/default/files/2020pap er1.pdf



MENTAL HEALTH BEYOND CRISIS AND COVID-19

> Reimagining a Sustainable and Robust Continuum of Psychiatric Care





FOSTER PARTNERSHIPS

Criminal Justice System

- Law recognizes some individuals may not be responsible even if they committed
 a criminal act (e.g., seizure-related assault).
- When a person with mental illness engages in criminal behavior, it may be for the same reasons as a non-mentally ill person ("criminogenic factors")
- Important to consider options available and basis for both violent and nonviolent offenses

Harm Reduction: Building Safety Networks

- Individual
- Family/Friends
- Peer supports
- Community at Large
- Spiritual connections
- Mental health providers
- Criminal justice partners

PRIORITIZE SELF-CARE

Prioritize Self-Care

- Holding hope is hard
- Crises Pass but the next hurdle will need to be surmounted



Conclusions

- Behavioral Health leaders have an important role to play, but cannot solve the problem of societal violence alone
- Partnerships, patience, constant quality review and improvements will be key



Thank you!

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