



BEHAVIORAL HEALTH CONSORTIUM OF DELAWARE

FY 2024 Policy Briefing and Accomplishments

BACKGROUND

Formed in 2017, the Behavioral Health Consortium (BHC) is an advisory and oversight body comprised of twenty-one community advocates, law enforcement, healthcare professionals, and state leaders that works towards solutions for action to address prevention, treatment, and recovery for mental health, substance use, and co-occurring disorders. The consortium continues to develop short-term and long-term strategies and initiatives to address the major addiction and mental health challenges we face in Delaware.

Behavioral Health Consortium members:

- Attorney General Kathy Jennings
- Joanna Champney, Division of Substance Abuse and Mental Health, Chair of the Addiction Action Committee
- Matthew Swanson, Delaware Center for Health Innovation
- Jennifer Smolowitz, Delaware Suicide Prevention Association
- Erin Booker, Overdose Fatality Review Commission
- Patrick Ogden, Police Chiefs Council
- Emily Vera, Mental Health Association of Delaware
- Carolyn Petrak, Ability Network of Delaware
- Ken Branner, Local Government Committee, POSDC
- Dr. Sandra Gibney, Hospital Representative
- Dr. James Ellison, Licensed Psychiatrist
- Dr. Jennifer Graber, Education Representative
- Dr. Avani Virani, Insurance Representative
- Annie Slease, Nonprofit advocate
- Dr. Debra Mason, Advocate
- Dr. Rebecca Walker, Behavioral Health Professional
- Rebecca King, Advocate
- Rev. Dr. Carol Boggerty
- Wade Jones, Advocate
- Senator Stephanie Hansen (SD 10)
- Senator Eric Buckson (SD 16)
- Rep. Mimi Minor-Brown (RD 17)
- Rep. Valerie Jones Giltner (RD 37)

OUR MISSION

The BHC's primary mission is to foster collaboration among individuals, family members, providers, advocates, governmental agencies, first responders and community members to develop measurable solutions which directly impact behavioral health outcomes in the State of Delaware.

OUR VISION

The BHC's vision is simple – to create a stronger, healthier Delaware that will meet the social and economic challenges of the future. We believe this goal demands an integrated plan of action rooted in prevention, treatment, resilience and recovery of mental health, inclusive of substance use and cooccurring disorders. Further, our plan includes a multi- year strategy, developed by the consortium, its subcommittees and with the help of local and national stakeholders committed to purpose.

OUR WORK

We believe our efforts call for a streamlined approach from our public and non-profit partners as they develop and implement scalable and measurable initiatives that are strategic and comprehensive and deliver high-quality care for the residents of Delaware. BHC members and stakeholders that makeup the subcommittees meet regularly to address grassroots issues related to combating addiction, promoting integration of services, developing a strong workforce pipeline, eliminating the stigma of behavioral health, and restoring or maintaining the behavioral health of Delawareans.

“The mental health of Delawareans is critical to our social and economic future. The BHC is working tirelessly to bring communities together, to break down silos and find solutions for our families, friends, co-workers and neighbors struggling with mental illness and substance abuse disorder. By working together, we’ll not only meet our goals, but exceed them.”



BHC Chair and Delaware Lt. Gov. Bethany Hall Long, Ph.D. R.N

The Behavioral Health Consortium has six volunteer committees. Committee membership is intentionally composed of service providers, advocates, individuals in recovery and their family members, government agencies, and first responders.

ACCESS & TREATMENT COMMITTEE

ERIN BOOKER AND DR. SANDY GIBNEY, CO-CHAIRS

Goal: To ensure adequate resources, capacity, and high-quality treatment remain a top priority for every behavioral health system across the state, while increasing access for individuals with the greatest need.

Select Accomplishments To Date

- Care of community members with medical complexity, inclusive of wound care and amputee support.
- Activate telehealth linkages for behavioral health.
- Reimbursement for therapy and counseling.
- Capacity increases for SUD treatment centers.
- Mental health first aid training.
- Evidence based outpatient services for behavioral health.
- Ensure all students have access to state-supported mental health services.
- Explore options for adolescent exclusive detox.
- Ensure behavioral health supports for people with disabilities.
- Examine and study harm reduction measures, including safe consumption sites.
- Evaluate opportunities to ensure treatment information is available through cellphone, hotline or other technology, to give family and consumers quicker access to care.
- Piloted dual fentanyl and xylazine testing strip for preventing overdoses.

CHANGING PERCEPTION & STIGMA COMMITTEE

DR. VALERIE EARNSHAW AND BETH JEKER, CO-CHAIRS

Goal: To reduce the barrier that stigma creates for individuals and alter perceptions on behavioral health. Provide information and insight to the communities that have not been touched.

Select Accomplishments To Date

- Assess current outreach efforts and recommend ways to track gaps in information outreach. Help inform the development of an outreach and awareness tracking approach.
- Increase awareness and training on Legislative Process for advocates and providers.
- Establish Continuing Education Units (CEU) credit for Cultural Humility learning requirement across disciplines.
- Educate public officials and community leaders on the stigma associated with behavioral health, to better influence policy making.
- Cultivate relationships with the business community for job employment for individuals. Evaluate hiring policies in workplaces regarding the need to disclose behavioral health history.
- Offer basic behavioral health training to professional groups across the state.
- Behavioral health training for construction and food services industries.
- Built relationships with institutions of higher education in Delaware to discuss ways to support the collegiate recovery community and the behavioral health needs of students.
- Assessed the level of engagement of individuals with lived experience in BHC efforts.

CORRECTIONS & LAW ENFORCEMENT COMMITTEE

DR. DEBRA MASON AND CHARLES SAWCHENKO, CO-CHAIRS

Goal: To produce recommendations and collaborate with stakeholders to promote a quality, sustainable, and efficient corrections and law enforcement system that meets the needs of the individual experiencing behavioral health issues.

Select Accomplishments To Date

- Law enforcement drug diversion programs embedded in several state agencies throughout the state.
- Assessed the current availability of BH/MH wraparound services for those leaving incarceration, to identify assets and gaps.
- Accomplished Medicaid suspension rather than loss of Medicaid while incarcerated which allows for Medicaid to be reinstated upon release.
- Promoted and achieved Medication Assistance Treatment (MAT) Expansion within Department of Corrections (DOC).
- Promoted Mental Health Association Peer Support Specialists in 3 DOC facilities.
- Examined the “drug diversion program” and the sentencing for individuals with behavioral health diagnoses to explore treatment vs. prison time. Several programs within law enforcement are underway inclusive of behavioral health workers joining law enforcement teams.
- Supported Crisis intervention Training and other community interventions that first responders to effectively respond to and support those experiencing mental health crises, promoting safety and appropriate referrals.
- Examined crisis response initiatives and advocating for a more inclusive system to address individuals who are in crisis and in need of specialty supports.
- Standardize post-prison discharge treatment and wraparound services as a bridge to society, including transitional housing.
- Supported Executive Order 27 (Governor) Established the Delaware Correctional Reentry Commission.

DATA & POLICY COMMITTEE

CAROLYN PETRAK AND DR. MEGHAN WALLS, CO-CHAIRS

Goal: To oversee any legislative action, promote data sharing among entities, and ensure all other Committees are receiving any data requested related to behavioral health.

Select Accomplishments To Date

- HB 220 Addiction Action Committee, formerly the Prescription Drug Advisory Committee. [Bill Detail - Delaware General Assembly](#).
- HS 1 for HB 440 Overdose System of Care. Delaware was the first in the nation to do this. Assigned under BHC Access & Treatment Committee. [Bill Detail - Delaware General Assembly](#).
- SB 230 Mental Health Parity Act. Worked closely with Patrick Kennedy and the Kennedy Forum to accomplish this. Requires annual reporting by insurance carriers on coverage for serious mental illness and drug and alcohol dependencies. Assigned under BHC Access & Treatment Committee. [Bill Detail - Delaware General Assembly](#).
- HB 368 Green Alert Program. An alert system for at-risk active-duty military or veterans who have gone missing, similar to the Gold alert. Assigned under BHC Education and Prevention Committee. [Legislation Document \(delaware.gov\)](#).

- HB 74 Take Care Delaware program. A partnership between law enforcement and schools to adopt a trauma-informed approach to children who have been identified at the scene of a traumatic event, and act in concert with police and schools. Bill allows an exception to existing law to share student information with the school. [Bill Detail - Delaware General Assembly](#).
- SB 34 Opioid Impact Fee. Paid by pharmaceutical manufacturer. The BHC actively supported the development of the Opioid Impact Fund (OIF) and the Settlement Fund and is responsible for its functioning. The OIF will ensure that settlement money is used to remediate and abate the opioid crisis. It is not diverted to other purposes. As part of the Behavioral Health Consortium the OIF ensures that decisions on how to spend funds are reached through consensus processes that consider the views and experience of affected communities. The Behavioral Health Consortium will distribute money received by the Settlement Fund and the Prescription Opioid Impact Fund (Impact Fund), enacted by Senate Bill No. 34 of the 150th General Assembly, according to the recommendations of the Commission. The engages the public and relevant stakeholders for guidance on disbursement for greatest impact. [Legislation Document \(delaware.gov\)](#).
- HB 372 Banning Powdered Alcohol. Assigned under BHC Data and Policy Committee. [Bill Detail - Delaware General Assembly](#).
- HS 1 for HB 160 Behavioral Health Workforce Crisis. Identify data sources and link to workforce development needs. Law enforcement drug diversion programs embedded in several state agencies throughout the state. [Bill Detail – Delaware General Assembly](#).

EDUCATION & PREVENTION COMMITTEE

REBECCA KING AND SANDI SYGLOWSKI CO-CHAIRS

Goal: To provide education, prevention, and early intervention materials on behavioral health that is simplified and accurate for all stakeholders.

Select Accomplishments To Date

- Conducted surveys in industries where substance use is high, to engage and educate industry employers.
- Identified and assessed mental health resources for children and adolescents in the state, looked for alignment among agencies and identify gaps in the state that should be filled.
- Recommend potential agency alignment and gaps to address.
- Conducted School Survey and Pediatric Care Survey.
- Address SUD concerns of restaurant and construction industries.
- Supporting the Addiction Action Committee in the formation of a new group to develop formal education/prevention outreach and messaging in terms of marijuana and today's THC levels.
- Promoted the 1 Pill can Kill campaign statewide.
- Promoted National Fentanyl Awareness Day, with the goal of encouraging parents to speak to their children, aiming to reduce overdoses.
- Promoted nonpharmacological treatments for pain management resources to prevent opioid and substance use.

FAMILY & COMMUNITY READINESS COMMITTEE

WADE JONES, CO-CHAIR

Goal: To support, educate, and fight stigma for families and communities that are experiencing any behavioral health issues, to promote quality services.

Select Accomplishments To Date

- Worked on age-related mental health risks and barriers.
- Reviewed and advocated to align the DSAMH Aging Recommendations and the DSAAPD Aging Plan.
- Focus on expansion of services for elderly and young patients with Dementia and Alzheimer's Disease.
- Support DSAAPD in developing dementia services.
- Develop opportunities and services for families with autism while supporting collaboration among related agencies to identify services.
- Supported development of legislation on Advancing Psychiatric Advance Directives: Strategies that protect a person's autonomy to direct their own care while experiencing a mental health crisis.
- Enhancing access to housing and promoting housing stability.
- Engaged housing agencies that serve the behavioral health community from around the state to understand their services, needs and to inform recommendations to address housing needs.