Thursday, April 21, 2022, 7:30 – 9:00AM

Members present: Alexis Babaian, Mike Bellissimo, Leslie Clapp, Louise Clough, Cindy Doyle, Betsy Edge, Beth Folcarelli, Bruce Golden, Marcy Holmes, Michael Joyce, Sarah Kuh, Lewis Laskaris, Bob Laskowski, Paddy Moore, Lisa Nagy, Chantale Patterson, Dan Pesch, Susan Pratt, Kathleen Samways, Sheryl Taylor-Thompson, Lisette Williams, Mary Jane Williams, Jim Wolff, Marie Zadeh.

**Call meeting to order / Approval of March 17 meeting minutes:** Mary Jane Williams called the meeting to order at 7:30 AM. The March minutes were moved, seconded, and approved.

**Mental Health Issues and Services Discussion:** Bob Laskowski said that Claire Seguin was unable to participate in today’s meeting, but she will talk about this at the May Council meeting. He listed goals for the discussion saying that Dukes County Health Council members will:

* gain an overview of the major mental health issues of Island residents
* understand which issues that the members of the health professional community believe are most pressing
* gain insight into existing resources to address mental health issues
* understand where critical services are lacking or under resourced in the opinions of health professionals
* begin to consider how the DCHC might be helpful in supporting the health professional community and in addressing unmet mental health needs.

Beth Folcarelli, CEO of Martha’s Vineyard Community Services, gave a comprehensive presentation about the trends that Community Services has observed regarding behavioral health needs and services. *(Note that Beth’s presentation was distributed to Council members after the meeting and is considered part of the minutes.)* When she and her team looked at data in preparing for this presentation, they realized that some of the trends were related to the COVID 19 situation, and that there is sort of an unseen population on the Vineyard in terms of behavioral health needs. 50% of the patients served at MVCS’ Island Counseling Center are 25-59 years old, and 25% are 60 and over. The Counseling Center serves about 1,200 people, the highest proportion of them with anxiety/PTSD or depression. Only a small number of patients have serious or persistent mental illness, but the community probably thinks that’s who we predominately serve. In reality, they serve people with everyday problems like anxiety and depression. There is a great need for emergency behavioral health, including an uptick in suicidology, and Community Services Enhanced Urgent Care has conducted 844 visits to 399 clients since January 2021. During the same period and the Emergency Services Program did 257 emergency assessments, with nearly 50% of them needing reassessments, meaning that they boarded at MVH Emergency Department while the program looked for an inpatient behavioral health bed. That program was divested back to Bay Cove Human Services on March 22.

Telehealth has been used during the pandemic, with 52% of services provided via telehealth in the last 12 months. Also in the last 12 months, psychiatry services were provided to 304 clients, and a diverse range of recovery-oriented services were utilized for the treatment of substance use disorders. While some programs and services benefit by telehealth, group programs do not do as well on Zoom.

The Daybreak Clubhouse serves 22 residents with serious mental health challenges, and in the last year Connect to End Violence served 463 clients. Beth said that there is a sustained need for intervention and support related to domestic and sexual violence. In the last 12 months, the Island-Wide Youth Collaborative (MVCS’ Family Resource Center), served 822 clients, including 104 new families, finding that Island families need assistance with behavioral health, parenting education, parenting support, and overall resources related to social determinants of health (employment, housing, food security, transportation/off Island medical care). Newly immigrant families often reach out for assistance, knowing the Community Services does not ask for immigration status and serves all who need help.

MVCS’ Early Childhood programs see a significant number of children with developmental trauma related to parental substance use, mental illness and/or domestic violence. Housing instability is a primary destabilizing factor.

A major issue is the dramatic shortage of behavioral health professionals. The lack of affordable housing, inflation, competition for staff, and fatigued clinicians leaving the sector all play into this. We really need psychiatrists, especially child and adolescent psychiatrists. A child and adolescent nurse practitioner will be starting in the fall. Wait lists due to staffing deficits are a problem.

Bob then introduced Kathleen Samways, Chief Clinical Officer at Island Health Care,

Kathleen agreed with Beth about the challenges both organizations face. She said that anxiety and depression are the largest share of mental health diagnoses at Island Health Care. She talked about the need for psychiatrists, psychologists, neuro-psychs – to help with diagnosis. Island Health providers can help many of these clients once there is a diagnosis, but they are unable to diagnose. They do have telehealth support for psychiatry through another community health center. Bob asked whether primary care practitioners were doing things like depression screening, and Kathleen said they do depression screening using the PHQ-9) and also screen for the social determinants of health. Jim Wollf talked about training primary care practitioners to take over patients who may have been treated by a psychiatrist, for example making them comfortable with prescribing psychiatric drugs. He also said that the number one problem is housing – you cannot bring psychiatrists and other clinicians to the Vineyard because their salaries would not be enough to pay for housing. Dan Pesch said that the hospital has hired a psychiatrist and an advanced practice nurse, and there caseloads are full – therefore it falls on the primary care practitioners to manage many of the patients with mental health service needs Dan asked Beth what percentage of Community Services Emergency programs end up needing and emergency department evaluation and subsequent hospitalization. Beth said the number is extremely low, and resources seem to be used efficiently. Lisa Nagy commented that the medical causes of psychiatric illnesses need to be identified and addressed. Paddy Moore said that she feels and hears that the safety net we’ve depended on no longer exists. She asked Beth about waiting lists and waiting times, and would like to see that all the organizations are meeting together and working toward an approach that is commensurate to the need. Marcy Holmes said that the Electronic Health Record includes regular depression screening and said that the primary care practitioners are very good at treating mild to moderate anxiety and depression. The problems are when needing to diagnosis psychosis, manic-depression – where would we go? Susan Pratt asked about Beth’s comment on questionable landlords and Beth said it was probable to rents being charged. Dan Pesch said that if someone comes to the Emergency Department with a heart attack they can be put on a helicopter to another hospital to get the care they need. We don’t’ have that for people who need psychiatric hospitalization – patients have spent 17 days in the ED waiting for a bed to be available.

**Rural Scholars Request:** Dan said that he doesn’t have a date yet from UMass but expects to have an opportunity for medical students and graduate nursing students to come to the Vineyard this fall to do a public health project. He will need to put in a proposal by July and asks if any Council members have a project to suggest he just needs a paragraph in the next month describing the project, who the team is and what the objectives would be. Proposals will be followed up by his Rural Scholars team.

**PFAS in the Proposed MVRHS Playing Fields:** Mary Jane Williams started with some background and referred to the letter she wrote that was distributed to Council members earlier in the week. She said that Connecticut has banned artificial turf playing fields and wants the Vineyard to do that too. Bob commented that there has been a lot of discussion and disagreement about this here on the Vineyard and said that the Council’s Coordinating Committee talks about what should the Council do? Bob wondered if we should get involved with this as a Council, or recommend that individual members support it or not. Lisa said that her friend Linda Birnbaum is an expert on this, and if you read her work you will understand how dangerous PFAS are. Mike Bellissimo said he knows the towns are working on this, and in West Tisbury PFAS water testing is available for residents. He suggested that the Council reach out to all the towns and (based on the success of the Housing Bank becoming an Island-wide endeavor). Paddy said that although she is concerned about PFAS and guesses that 90% of the Council members are too, she thinks that other organizations are already looking at water quality, starting with the Health Agents. She does not think that the Health Council should put energy into this as it is not as important as other issues including the mental health services issue. Cindy Doyle said she wanted to propose that we do put some energy into this, and that the Council could sign Mary Jane’s letter. She suggested that we take a vote on this and send the letter to the Oak Bluffs planning board. Kathleen suggested that we look at the Martha’s Commission report on the playing field. Mary Jane said that she thought they did not oppose the artificial turf. Marcy said that she wanted to second Cindy’s motion to take a vote on this then gave an anecdote about her daughter’s experience on an artificial turf playing field. She said it was beautiful, but when she walked up to it a smell came off it and the girls said that the smell was making them sick and the playing field gave off so much heat that is affected their ability to play. Dan suggested a very general statement about the dangers of PFAS be sent to the OB planning board. Cindy said that she liked Dan’s suggestion. Bob said a letter could talk about the Council being concerned about all health issues, including environmental issues. We know that PFAS have been identified as having health concerns and are concerned about unintentional potential effects on the aquifer. Mary Jane and Bob will write a letter and get it approved by the Coordinating Committee, then send it to the Oak Bluffs planning board.

**Brief Member Updates:**

* Mike Bellissimo – the Council’s Health Information Committee will have an intern again this summer and at the next Council meeting the Committee will be able to present its social media strategy. He also said that there will be a Bike Rodeo at the High School on May 22, a family-friendly event. He will get the information out to Council members.
* Lissette Williams said the ACE MV will be presenting a program on the Science of Climate Change from 5:30 – 7:00 PM. She will send the Zoom link to Louise after the meeting for distribution to Council members.
* Sheryl Taylor – reminded members that the Vaccine Bus will be back on the Island on May 1. She said that at our next meeting she would be able to share some information about vaccines administered and especially about the language support provided

**The next regular Health Council meeting will be held via zoom on May 19, 2022.**

Respectfully submitted, Louise Clough, secretary