

MIGNON WATERMAN - Vice-Chr MHOAC, 530 Hazelgreen, Helena, Mt 442-8648

First of all, I just have to tell you how impressed I am by Joyce DeCunzo. In one year, she has pulls the AMDD staff together into a team that has met with and listened to consumers, family members, providers, developed a strategic plan that will have measurable targets. The enthusiasm and energy at all levels is contagious. We are excited about the future and with your help with some key funding initiatives, I believe we will have a mental health system in Montana that we can all be proud of.

On behalf of the MHOAC , we would like to go on record in support of the 5 field staff positions for AMDD. We believe those positions are vital to develop the recovery based community services that we believe are necessary for clients with serious mental illnesses.

Although I understand that the funding for these positions is confusing with the HIFA waiver and the MHSP funding, it is our understanding that the field staff will not decrease the number of individuals served by the MHSP.

I know the entire alphabet soup of the mental health system is confusing but I would like to share my understanding of how the system works:

The MHOAC reviews the federal block grant and monitor the entire mental health service system for the state - if you will, they lay out the vision for the system.

I am also a member of the Central Service Area Authority. The SAA advocates for funding and service priorities within the region. Lou Thompson likens it to a boat - the SAA steers and AMDD staff rows.

That is where the 5 field staff will be vital. At the local level, they will work with local mental health councils, providers and consumers to develop needed services.

When you hear the Children's Mental Health Budget next week in Chuck Hunter's division, I think you will have a better understanding of the role of field staff. As one of the Oversight Council members who serves of a Kid's Management Authority related yesterday - before the field staff was hired, after every meeting, someone would have to call Helena to arrange for services but now there is someone with authority in the field.

As Joyce DeCunzo mentioned yesterday, this is the only division that does not have field staff and I have to believe that is a major reason why this division has struggled over the years.

I would also like to speak as a member of our local advisory council. We understand that, as a community, we have a responsibility to help provide crisis stabilization services for individuals with mental illness. With a small seed grant from AMDD, we found a Crisis Intervention

Training program for law enforcement and by fall we will train over 30 police and sheriff deputies to de-escalate and respond to crisis calls. However, we need to create a crisis stabilization facility in Helena so that our officers will have a local facility where they can take individuals in crisis. With proper training and a local facility, other communities with Crisis Intervention Training programs have been able to significantly reduce the time officers spend on crisis calls, reduce injury rates for officers and clients and divert between 25 and 50 % of individuals who are charged and enter the criminal system.

We believe to be viable, there needs to be a partnership with local mental health providers, the county, our local hospital, consumers and their families and the state. It is critical that you provide some funding for crisis stabilization facilities if we are to divert individuals from Montana State Hospital.