

**Maryland Crisis Hotline Operations Workgroup Charter Document**  
**Revised March 10, 2017**

**Name of the Working Group:** Maryland Crisis Hotline Operations Workgroup

**Background Information/Context for Group Formation:** In early 2015, the Behavioral Health Administration (BHA) made a philosophical decision to align Substance Related Disorder (SRD) calls for help with other “crisis calls” currently being provided by the Maryland Crisis Hotline (MCH). Individuals or family members calling 1-800-422-0009 24/7 would receive information and support in accessing SRD services, in addition to the current mental health and suicide prevention crisis services historically provided by this hotline. BHA requested that the Maryland Crisis Hotline (MCH) provide an enhanced level of service to SRD callers by providing brief screening, engagement and warm hand-off to either the local Health Department or to a private health insurance provider, for assessment and placement into appropriate treatment/recovery services. The five main crisis hotlines agreed to these enhanced services, which were added to existing Conditions of Award through the Core Service Agencies. These hotlines requested and received training in order to have the knowledge required to provide hotline services to individuals experiencing SRD crises.

MCH Call Specialists were provided the following five trainings during June, 2015: University of Maryland webinar, Substances of Abuse; BHA webinar, Addiction 101 for Behavioral Health Crisis Hotline Operators; BHA webinar, Treatment and Recovery Support Services System; BHA webinar, Process and Procedure (for Hotline Operators); and the University of Maryland webinar, Motivational Interviewing. These webinars are all available on the BHA website under MCH Provider Training. In addition, call specialists have been provided information on local resources, including information about naloxone, recovery support, Veteran’s and family services as available/appropriate in the caller’s local area.

As part of the enhanced process, MCH Call Specialists were requested to offer to stay on the line to facilitate direct connection to either the caller's local Health Department, or to a private health insurance provider. Call Specialists were also asked to make follow up calls to callers who were not able to be directly connected to these entities in instances in which calls were received after regular business hours. Callers to 1-800-422-0009 are automatically routed to one of five designated MD Crisis Hotline (MCH) Centers throughout Maryland, depending on the origination of the call. See chart below for detail.

<b>Crisis Call centers</b>	<b>Counties covered</b>
1. Baltimore Crisis Response, Inc.	Baltimore City
2. Community Crisis Services, Inc.	Montgomery, Prince Georges, Charles, St. Mary’s and Calvert & out of state calls
3. Mental Health Association of Frederick County.	Garrett , Allegany, Washington and Frederick
4. Life Crisis Center, Inc.	Kent, Queen Anne’s, Talbot, Caroline, Dorchester, Wicomico, Somerset, Worchester and Cecil
5. Grassroots Intervention Center	Howard, Harford, Carroll, Baltimore and Anne Arundel

**Purpose of the Working Group:** The Workgroup is being created to develop recommendations regarding the purpose of the crisis hotline, what services it should provide, how it should be structured, and how it should function. These recommendations will be put forward to the Deputy Secretary of BHA and used to inform decisions regarding BHA’s crisis hotline.

**Specific tasks for the Working Group:**

1. Overview of MCH procedures, practices and current model;
2. Review of current best practice for crisis hotline services;
3. Develop recommendation for service delivery model, staffing, and ideal functions for hotline;
4. Develop recommendations for relationship/connection to related functions such as family navigator or peer services, mobile crisis team, potential crisis or behavioral health treatment bed registries.
5. Develop technology and data collection recommendations.

**Intended Outcomes:** Development of recommendations for a best practice crisis hotline, to include: function; model; services to be delivered; staffing; technology; data to be collected, budget; training; and timeline considerations.

**Benefits of this Process to Key Stakeholders/Stakeholder Groups:** Maryland Crisis Hotline services will be beneficial to service recipients and result in improved access to life saving information, intervention, and connection to appropriate community resources for suicide prevention, substance use and mental health disorders services.

**Workgroup Process Plan/Phases of Work:**

Work Timeline	Task/Activity
Kickoff Meeting- March 28, 2017	<ul style="list-style-type: none"> <li>• Introduce members;</li> <li>• Review Charter Document: tasks, timeline and meeting schedule;</li> <li>• Determine mechanisms for group communication between meetings;</li> <li>• Review of current MCH procedures and practices;</li> <li>• Review best practices information;</li> <li>• Assign tasks for next meetings.</li> </ul>
April 25, 2017	<ul style="list-style-type: none"> <li>• Develop recommendations for objectives, service delivery model, staffing and ideal functions for hotline.</li> </ul>
May 23, 2017	<ul style="list-style-type: none"> <li>• Develop recommendations for relationship to related functions such as mobile crisis team, family or peer services, crisis or behavioral health treatment bed registries, and for technology and data collection.</li> </ul>
June 27, 2017	<ul style="list-style-type: none"> <li>• Discuss practical considerations such as training, timeline, connections, increase awareness/use, &amp; budget considerations for recommended model.</li> </ul>

**Workgroup Member Roles and Responsibilities:**

- Attend meetings (Substitutes can be asked to attend in instances when the invited member has a scheduling conflict.)

- Read preparation materials in advance of the planning meetings and complete assignments as requested.
- Provide subject matter expertise to inform DHMH decision making process. Final decisions are determined by the Department.

**Suggested Workgroup Membership:**

Behavioral Health Administration (BHA)	Kathleen Rebbert-Franklin, Chair	<a href="mailto:kathleen.rebbert-franklin@maryland.gov">kathleen.rebbert-franklin@maryland.gov</a>
BHA Health Promotion and Prevention	Laura Burns-Heffner, Staff	<a href="mailto:laura.burns-heffner@maryland.gov">laura.burns-heffner@maryland.gov</a>
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BHA Consumer Affairs	Adelaide Weber	<a href="mailto:adelaide.weber@maryland.gov">adelaide.weber@maryland.gov</a>
Department of Health and Mental Hygiene (DHMH)	Chris Garrett	<a href="mailto:christopher.garrett@maryland.gov">christopher.garrett@maryland.gov</a>
Baltimore Crisis Response, Inc. (current hotline provider)	Linda Fauntleroy	<a href="mailto:lfauntleroy@bcresponse.org">lfauntleroy@bcresponse.org</a>
Behavioral Health Systems Baltimore, BHSB	Adrienne Breidenstine	<a href="mailto:adrienne.breidenstine@bhsbaltimore.org">adrienne.breidenstine@bhsbaltimore.org</a>
Community Behavioral Health Association of Maryland (CBH)	Shannon Hall	<a href="mailto:Shannon@mdcbh.org">Shannon@mdcbh.org</a>
Community Crisis Services (current hotline provider)	Timothy Jansen	<a href="mailto:Timj@ccsimd.org">Timj@ccsimd.org</a>
Community member	Patricia Miedusiewski	<a href="mailto:pmiedusiewski@aol.com">pmiedusiewski@aol.com</a>
Every Mind (former MHA of MC, current MD chat provider)	Rachel Larkin	<a href="mailto:RLarkin@every-mind.org">RLarkin@every-mind.org</a>
Grassroots, Inc. (current hotline provider)	Seth Knobel, or Ayesha Bajwa Holmes	<a href="mailto:seth@grassrootscrisis.org">seth@grassrootscrisis.org</a>
Life Crisis Center, Inc. (current hotline provider)	Jennifer Kelley Dail, or designee	<a href="mailto:jkelley@lifecrisiscenter.org">jkelley@lifecrisiscenter.org</a>
Maryland Addiction Directors Council (MADC)	MADC designee Kim Wireman	<a href="mailto:kwireman@powellrecovery.com">kwireman@powellrecovery.com</a>
Maryland Association of County Health Officers (MACHO)	Jinlene Chan	<a href="mailto:Hdchan22@aacounty.org">Hdchan22@aacounty.org</a>
Maryland Association of Behavioral Health Authorities (MABHA)	Holly Ireland Robert Pitcher	<a href="mailto:hireland@midshorebehavioralhealth.org">hireland@midshorebehavioralhealth.org</a> <a href="mailto:rap@mhma.net">rap@mhma.net</a>
Maryland Coalition for Families (MCF)	MCF designee Trish Todd	<a href="mailto:ttodd@mdcoalition.org">ttodd@mdcoalition.org</a>
MCF Family Peer Support Specialist & family members	Beth Schmidt & Carin Miller	<a href="mailto:bschmidt@mdcoalition.org">bschmidt@mdcoalition.org</a> <a href="mailto:cmiller@mdcoalition.org">cmiller@mdcoalition.org</a>

Mental Health Association of Frederick County (current hotline provider)	Suzi Borg	<a href="mailto:sborg@fcmha.org">sborg@fcmha.org</a>
Mental Health Association of Maryland (MHAMD)	Dan Martin	<a href="mailto:dmartin@mhamd.org">dmartin@mhamd.org</a>
The National Alliance on Mental Illness (NAMI)	Kate Farinholt	<a href="mailto:kfarinholt@namimd.org">kfarinholt@namimd.org</a>
National Council on Alcoholism and Drug Dependence of Maryland (NCADD-Maryland)	Nancy Rosen-Cohen, or designee	<a href="mailto:nancy@ncaddmaryland.org">nancy@ncaddmaryland.org</a>

Note: Anyone interested in attending the meetings is welcome; however, comments should be submitted in writing to: Laura [Burns-Heffner@maryland.gov](mailto:Burns-Heffner@maryland.gov)