From: David C. Rose, MD, MBA, FAAP, Chair, State Health Commissioner's Advisory Council on Health Disparity & Health Equity (ACHDHE), Virginia Department of Health (VDH) Date: July 9, 2024:

Subject: ACHDHE Recommendations for Program Enhancement:

In response to the April 9, 2024, presentation on "Virginia's Crisis System Overview" presented to the ACHDHE by **J. Curt Gleeson**, Assistant Commissioner, Department of Behavioral Health and Developmental Services, we respectfully present the following recommendations:

- The Department of Behavioral Health and Developmental Services (DBHDS) effectively inform the community about available services, including the 988-information line, foster collaborative partnerships with substance use disorder (SUD) organizations and Behavioral Health (BH) centers, as well as faith-based communities, to amplify program awareness and reach, and to mitigate the stigma of mental health in communities. Strengthen cooperation with law enforcement agencies and stakeholders to establish protocols that alleviate community apprehension during emergency responses, thereby enhancing overall public safety and well-being.
- Recognizing the potential challenges in program sustainability, especially regarding provider availability, DBHDS should prioritize adaptability to real-time crisis needs. This entails aligning with best practices and integrating trauma-informed design principles to enhance effectiveness and responsiveness to community needs.
- ACHDHE commends DBHDS for implementing national policies and frameworks and recommend continuous oversight to uphold service quality and equitable care delivery. Additionally, ACHDHE encourage DBHDS to establish robust training programs for providers to prioritize mental health in healthcare delivery.
- DBHDS develops strategies aimed at fostering meaningful engagement with the community of individuals with disabilities, alongside the need to furnish additional data pertaining to gender equity.

In response to the April 9, 2024, presentation on "Richmond Behavioral Health Authority Programs and Activities Overview" presented to the ACHDHE by **Amy Erb**, Senior Director of Region 4 Programs, Richmond Behavioral Health Authority (RBHA), we respectfully present the following recommendations:

- RBHA develop initiatives aimed at raising awareness of the 988 service, addressing stigma surrounding mental health assistance, and fostering sustained program growth to adequately serve individuals in need, including those with disabilities experiencing crises not classified under Intellectual Disabilities (ID) and Developmental Disabilities (DD). Additionally, efforts should concentrate on optimizing the delivery of behavioral and mental health services in the community to ensure universal accessibility, regardless of payment constraints.
- RBHA refine its database to delineate responses in a manner that prioritizes cultural competence, thereby ensuring alignment with the diverse mental health needs of the community. This approach should include engaging with and understanding the community's unique contexts and perspectives to effectively meet people where they are.
- RBHA establish well-defined program benchmarks and outcomes for evaluation purposes, accompanied by comprehensive training and oversight protocols. Strike a balance between standardized outcomes and quality control measures, and the customization of services tailored to individual needs and circumstances including the use of interpreters. Efforts should be made to extend services to marginalized communities, particularly those with historical mistrust of traditional service systems, through culturally sensitive and community-centered approaches.

Signed: <u>David C. Rese</u> David C. Rose, MD, MBA, FAAP, ACHDHE Chair