NAMI NH Conference 2021
Town Hall

Copyright NAMI NH, 2017. Do not use printed or web version of this document for other than personal use without permission from NAMI NH.
Town Hall Agenda

- COVID 19 Update – Susan Stearns Deputy Director
- Impact of pandemic on Mental Health
- Emergency Department Boarding
- Mental Health Crisis Care
  - Mobile crisis response
  - 988
  - Law Enforcement training
    - Officer involved shootings
- Legislative/budget update
- NAMI NH updates
- Questions (submit via chat)
Thank You NAMI NH Volunteers
You are beacons of hope!
You are pandemic busters!
You are our inspiration!
Figure 1

Average Share of Adults Reporting Symptoms of Anxiety Disorder and/or Depressive Disorder, January-June 2019 vs. January 2021

NOTES: Percentages are based on responses to the GAD-2 and PHQ-2 scales. Pulse findings (shown here for January 6 – 18, 2021) have been stable overall since data collection began in April 2020.

MH Impacts by Age

Figure 3

Share of Adults Reporting Symptoms of Anxiety and/or Depressive Disorder During the COVID-19 Pandemic, by Age

- Adults Ages 18-24: 56.2%
- Adults Ages 25-49: 48.9%
- Adults Ages 50-64: 39.1%
- Adults Ages 65+: 29.3%

NOTES: *Indicates a statistically significant difference between adults ages 18-24. Data shown includes adults, ages 18+, with symptoms of anxiety and/or depressive disorder that generally occur more than half the days or nearly every day. Data shown is for December 9 – 21, 2020.

Figure 7
Share of Adults Reporting Symptoms of Anxiety and/or Depressive Disorder During the COVID-19 Pandemic, by Race/Ethnicity

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Non-Hispanic</td>
<td>48.9%*</td>
</tr>
<tr>
<td>Non-Hispanic Black</td>
<td>48.0%*</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>46.3%*</td>
</tr>
<tr>
<td>All Adults</td>
<td>42.4%</td>
</tr>
<tr>
<td>Non-Hispanic White</td>
<td>40.9%</td>
</tr>
<tr>
<td>Non-Hispanic Asian</td>
<td>33.1%*</td>
</tr>
</tbody>
</table>

NOTES: *Indicates a statistically significant difference relative to Non-Hispanic White adults at the p<0.05 level. These adults (ages 18+) report symptoms of anxiety and/or depressive disorder generally occurring more than half the days or nearly every day. "Other Non-Hispanic" includes people of other races and multiple races. Data shown are for December 9 – 21, 2020.
Economic Disparity

Figure 5

Percent of Adults Who Say Worry or Stress Related to the Coronavirus Has Had a Negative Impact on Their Mental Health, by Household Income

<table>
<thead>
<tr>
<th>Income Level</th>
<th>Major negative impact</th>
<th>Minor negative impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than $40K</td>
<td>35%</td>
<td>21%</td>
</tr>
<tr>
<td>$40K-$89K</td>
<td>21%*</td>
<td>30%*</td>
</tr>
<tr>
<td>$90K+</td>
<td>17%*</td>
<td>31%*</td>
</tr>
</tbody>
</table>

NOTES: *Indicates a statistically significant difference between those earning less than $40K at the p<0.05 level.
SOURCE: KFF Health Tracking Poll (conducted November 30 – December 8, 2020).
### Gender MH Disparity

Figure 3

**Nearly Seven In Ten Women Under Age 30 Report A Negative Mental Health Impact From Pandemic; Fewer Older Adults Say The Same**

Percent who say they feel that worry or stress related to coronavirus has had a negative impact on their mental health:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>55%</td>
<td>38%</td>
</tr>
<tr>
<td>18-29 year olds</td>
<td>69%</td>
<td>54%</td>
</tr>
<tr>
<td>30-49 year olds</td>
<td>61%</td>
<td>40%</td>
</tr>
<tr>
<td>50-64 year olds</td>
<td>54%</td>
<td>32%</td>
</tr>
<tr>
<td>65 and older year olds</td>
<td>36%</td>
<td>27%</td>
</tr>
</tbody>
</table>

NOTE: See topline for full question wording.

SOURCE: KFF COVID-19 Vaccine Monitor (March 15-22, 2021) • Download PNG
Gender Disparity in Accessing Care

Nearly Three In Ten Mothers Say They Needed And Were Unable To Get Mental Health Services In The Past Year

Percent who say, in the past 12 months, there was time they thought they may need mental health services or medication, but did not get them:

- Mothers: 46%
- Black adults: 42%
- 30-49 year olds: 40%
- Hispanic adults: 37%
- 18-29 year olds: 36%
- Women: 35%
- HH income $40K-$89.9K: 35%
- Total: 32%
- HH income <$40K: 30%
- HH income $90K+: 29%
- White adults: 28%
- 50-64 year olds: 26%
- Men: 25%
- 65 years and older: 14%

Percentage among total population:
- 27%
- 20%
- 20%
- 16%
- 22%
- 19%
- 19%
- 15%
- 14%
- 13%
- 14%
- 11%
- 10%
- 5%
### Difficulty Accessing Services

#### Figure 8

**Not Being Able To Find Provider, Cost, Are Top Barriers For Those Seeking Mental Health Treatment**

What is the **main** reason you didn’t get mental health services?

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>They could not find a provider</td>
<td>24%</td>
</tr>
<tr>
<td>They could not afford the cost</td>
<td>23%</td>
</tr>
<tr>
<td>They were too busy or could not get time off work</td>
<td>18%</td>
</tr>
<tr>
<td>Their insurance did not cover it</td>
<td>10%</td>
</tr>
<tr>
<td>They were afraid or embarrassed to seek care</td>
<td>5%</td>
</tr>
</tbody>
</table>

**NOTE:** Among those who thought they needed mental health services but did not get them. See topline for full question wording.  
**SOURCE:** KFF COVID-19 Vaccine Monitor (March 15-22, 2021)  
[Download PNG](https://www.kff.org/coronavirus-dashboard/download/png)
NHH Waiting List

April 14, 2015 - March 31, 2021
Data Compiled by NAMI NH
NHH Waiting List

New Hampshire Hospital Admission Waiting List Count
Compiled by NAMI New Hampshire

Dates with the greatest number of adults waiting for beds at NHH

1. Aug 21, 2017 - 71
2. Oct 4, 2017 - 70
3. Sep 24, 2017 - 70

Adult daily wait list count from the most recently completed quarter compared to the prior quarter

Greatest number of adults waiting at one time for beds at NHH
Aug 21, 2017 - 71

Greatest total number of individuals (adults & children) waiting at one time for beds at NHH
Mar 22, 2021 - 89

## Average Daily Waitlist Count by Quarter

<table>
<thead>
<tr>
<th></th>
<th>Row Labels</th>
<th>Average of Adults - Initial/AM</th>
<th>Average of Children - Initial/AM</th>
<th>Average of Total - Initial/AM</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>Qtr2</td>
<td>14</td>
<td>6</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Qtr3</td>
<td>17</td>
<td>2</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Qtr4</td>
<td>20</td>
<td>6</td>
<td>26</td>
</tr>
<tr>
<td>2016</td>
<td>Qtr1</td>
<td>27</td>
<td>5</td>
<td>32</td>
</tr>
<tr>
<td></td>
<td>Qtr2</td>
<td>30</td>
<td>7</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>Qtr3</td>
<td>31</td>
<td>3</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Qtr4</td>
<td>35</td>
<td>4</td>
<td>40</td>
</tr>
<tr>
<td>2017</td>
<td>Qtr1</td>
<td>43</td>
<td>5</td>
<td>48</td>
</tr>
<tr>
<td></td>
<td>Qtr2</td>
<td>30</td>
<td>7</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>Qtr3</td>
<td>53</td>
<td>2</td>
<td>55</td>
</tr>
<tr>
<td></td>
<td>Qtr4</td>
<td>42</td>
<td>3</td>
<td>45</td>
</tr>
<tr>
<td>2018</td>
<td>Qtr1</td>
<td>44</td>
<td>3</td>
<td>47</td>
</tr>
<tr>
<td></td>
<td>Qtr2</td>
<td>46</td>
<td>5</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>Qtr3</td>
<td>49</td>
<td>2</td>
<td>51</td>
</tr>
<tr>
<td></td>
<td>Qtr4</td>
<td>36</td>
<td>4</td>
<td>39</td>
</tr>
<tr>
<td>2019</td>
<td>Qtr1</td>
<td>36</td>
<td>4</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Qtr2</td>
<td>25</td>
<td>5</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>Qtr3</td>
<td>29</td>
<td>2</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Qtr4</td>
<td>30</td>
<td>6</td>
<td>35</td>
</tr>
<tr>
<td>2020</td>
<td>Qtr1</td>
<td>29</td>
<td>6</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>Qtr2</td>
<td>17</td>
<td>7</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Qtr3</td>
<td>40</td>
<td>10</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>Qtr4</td>
<td>37</td>
<td>16</td>
<td>54</td>
</tr>
<tr>
<td>2021</td>
<td>Qtr1</td>
<td>46</td>
<td>18</td>
<td>64</td>
</tr>
<tr>
<td></td>
<td>Grand Total</td>
<td>34</td>
<td>5</td>
<td>39</td>
</tr>
</tbody>
</table>
March ED Boarding Snapshot

NH Designated Receiving Facility Waitlist
March 2021 Snapshot

**Unique Visits**: 446  **Age Range**: 4-86 years  **Days on Waitlist**: Min: <1  Max: 29  Mean: 5.6  Median: 4

### Average Days on Waitlist by Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Days on Waitlist</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;16</td>
<td>185</td>
</tr>
<tr>
<td>18-64</td>
<td>244</td>
</tr>
<tr>
<td>65+</td>
<td>12</td>
</tr>
</tbody>
</table>

### Age Group as % of Total

- <16: 4.26%
- 18-64: 41.09%
- 65+: 54.71%

### Sex as % of Total

- Female: 45.96%
- Male: 53.81%
- MTF: 0.22%

### Primary Insurance as % of Total

- Commercial: 11.66%
- Medicaid: 1.35%
- Medicare: 0.22%
- Self Pay: 32.18%
- Tricare: 37.00%
- VA: 9.59%

Source: NHH ED Waitlist Referral reports for March 2021

Metrics may not reflect discharge dates on weekends and holidays

* Unique combinations of initiation date, source of referral, age, sex, and insurance. HDC data not included
Legal Challenges - Update

- John Doe – Federal District Court
- Jane Doe – NH Supreme Court
# NH Leading Causes of Death: 2015-2019

<table>
<thead>
<tr>
<th>Rank</th>
<th>&lt;1</th>
<th>1-4</th>
<th>5-9</th>
<th>10-14</th>
<th>15-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
<th>All Ages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Short Gestation 33</td>
<td>Unintentional Injury 10</td>
<td>Malignant Neoplasms 11</td>
<td>Malignant Neoplasms 866</td>
<td>Heart Disease 1,395</td>
<td>Malignant Neoplasms 13,938</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Congenital Anomalies 29</td>
<td>Congenital Anomalies 15</td>
<td>Unintentional Injury 11</td>
<td>Suicide 152</td>
<td>Malignant Neoplasms 211</td>
<td>Heart Disease 608</td>
<td>Malignant Neoplasms 10,137</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Maternal Pregnancy Comp. 15</td>
<td>Homicide 3</td>
<td>Homicide 6</td>
<td>Unintentional Injury 20</td>
<td>Malignant Neoplasms 62</td>
<td>Suicide 195</td>
<td>Heart Disease 577</td>
<td>Chronic Low. Respiratory Disease 3,136</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Placenta Cord Membranes 15</td>
<td>Influenza &amp; Pneumonia 17</td>
<td>Benign Neoplasms 18</td>
<td>Congenital Anomalies 16</td>
<td>Heart Disease 49</td>
<td>Heart Disease 118</td>
<td>Suicide 272</td>
<td>Alzheimer's Disease 2,267</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Respiratory Distress 10</td>
<td>Malignant Neoplasms 11</td>
<td>Congenital Anomalies 16</td>
<td>Benign Neoplasms 19</td>
<td>Homicide 14</td>
<td>Liver Disease 15</td>
<td>Liver Disease 68</td>
<td>Chronic Low. Respiratory Disease 3,641</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Circulatory System Disease 10</td>
<td>Diabetes Mellitus 15</td>
<td>Heart Disease 5</td>
<td>Chronic Low. Respiratory Disease 31</td>
<td>Homicide 13</td>
<td>Diabetes Mellitus 101</td>
<td>Liver Disease 277</td>
<td>Unintentional Injury 1,566</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Intrauterine Hypoxia 10</td>
<td>Heart Disease 16</td>
<td>Acute Bronchitis 11</td>
<td>Influenza &amp; Pneumonia 10</td>
<td>Congenital Anomalies 11</td>
<td>Homicide 25</td>
<td>Chronic Low. Respiratory Disease 81</td>
<td>Alzheimer's Disease 2,296</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Bacterial Sepsis 10</td>
<td>Diseases Of Appendix 10</td>
<td>Nephritis 17</td>
<td>Cerebro-vascular 17</td>
<td>Cerebro-vascular 73</td>
<td>Cerebro-vascular 175</td>
<td>Influenza &amp; Pneumonia 1,070</td>
<td>Diabetes Mellitus 1,226</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Unintentional Injury 10</td>
<td>Unintentional Injury 10</td>
<td>Pneumonitis 10</td>
<td>Diabetes Mellitus 24</td>
<td>Diabetes Mellitus 24</td>
<td>Septicemia 36</td>
<td>Nephritis 84</td>
<td>Nephritis 810</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>SIDS 10</td>
<td>...</td>
<td>...</td>
<td>Congenital Anomalies 11</td>
<td>Congenital Anomalies 11</td>
<td>Septicemia 83</td>
<td>Parkinson's Disease 786</td>
<td>Nephritis 926</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: CDC WISQARS, 2014-2018
State Suicide Prevention Council (SPC) – Legislatively established in 2008

FY 19/20 State budget $250k funding to DHHS
  – March 2021 DHHS hired a Suicide Prevention Coordinator position for SPC and DHHS internal SP team
  – Additional $200k for Headrest in Lebanon – NH’s certified crisis call center for National Suicide Prevention Lifeline

$750k per year Garret Lee Smith Youth Suicide Prevention Grant to NAMI NH from SAMHSA – 4 years remaining
National Suicide Prevention Hotline Act 2020


Signed by President Trump in October of 2020

Goes live nationwide July 2022

Anticipated change from Suicide Prevention Lifeline to mental health crisis line

Bill contains provisions for state’s raising funds to support implementation via surcharge/fee on telephone bills

- Currently in NH $0.75 fee for 911 about $14 million per year
988
Mental Health Crisis Care Video
https://www.youtube.com/watch?v=M6BPxH09tqU
• Anticipated significant increase in call volume
• States need to maintain in state answer rates > 80%
• Expected to dovetail with other state mental health crisis response services
  – 911
  – 211/Doorway
  – Crisis Call Center (SB 14) RFP currently being scored by DHHS
  – Mobile Crisis response teams (anticipated statewide expansion under SB 14 for summer 2021)
Our partners at DHHS BMHS and CBHS have been busy

• RFP for Mental Health Crisis Call Center
• Contracting underway w/CMHC’s for additional Mobile Crisis response in 7 regions
• RFP Adolescent Psychiatric Residential Treatment Facility
• Governor’s Budget Critical Time Intervention (CTI)
• Step up/Step Down – Respite with 4 Peer Support Agencies
• Additional Transitional Housing beds
• RFP Family Mutual Support Services
• RFP Children’s Technical Assistance Center/FE
• 10 year plan report
Fusion/Living Room Model

https://www.youtube.com/watch?v=fGVuB1Z6xcU
Additional 988 Resources ($)

- Federal mental health block grant 5% required set aside for MH Crisis care FY 2021 (administered by DHHS BMHS)
- $129,000 nine month grant awarded to NH to begin planning for implementation of 988 (grant funds were privately raised)
  - Grant runs 2/1/2021 – 9/30/2021
  - Part time coordinator at DHHS to help organize planning
  - Advisory comm. to include 911, 211 (GUW), Headrest, Suicide Prev. Council, NAMI NH, Hospital Association Governors Office*
- Not directly related to 988 but December Stimulus package increased funding for MH and SUD by $4.25 billion – includes likely doubling of MH block grants
• Recognition of need for new national models for response to people in a MH crisis
• 45% Per NH AG report 45% of Officer involved shootings in NH are people with known mental illness
• 988 combined with mobile crisis give people alternatives to calling 911 or going to the Emergency Department
• Police need more effective mental health crisis intervention training (CIT) – MH First Aid – Public Safety other training – LSR 0996; Governor’s budget
• Ongoing need for LE/first responder peer support
NAMI NH Legislation Priorities

- HB 578 Standards for Mental Health Courts
- HB 91 death benefits for first responders who die by suicide
- SB 70 Relative to insurance coverage for emergency behavioral health services for children and young adults.
- SB 59 Collaborative Care Model
- SB 134 CIT $   HB 96 LEACT recommendations
- HB 503 Commission on homelessness
- HB 602 (oppose) telehealth bill
- HB 68 Relative to the definition of Child Abuse
- HB 540 Relative to supported decision-making as an alternative to guardianship
- HB 103 Dental benefit
- Budget update
American Rescue Plan

- $1.5B for block grants to states for mental health services
- $80M for mental health and SUD training for mental and behavioral health professionals and public safety officers
- $20M for education and awareness to encourage use of mental health and SUD services by health care professionals
- $40M for evidence-informed programs to promote mental health among providers including FQHCs
- $100M for behavioral health workforce education and training
- $420M for expansion grants for community behavioral health clinics
- $80M for pediatric mental health care access
- $30M for local, community-based SUD services (SAMSA grants to support community-based overdose prevention,
- $50M for local, community-based behavioral health needs (SAMSA grants for promoting care coordination; training; expanding evidence-based integrated models of care; addressing surge capacity needs; providing services to those with mental health needs including co-occurring SUDs, utilizing telehealth services; and supporting, enhancing, or expanding preventive and crisis intervention services)
- $30M for Project Aware
- $20M for youth suicide prevention
- State option to provide qualifying community-based mobile crisis intervention services - includes $15M for state planning grants to develop waiver or plan amendment
• 50 Employees!
• Peer Support/Expanded Programs
• Strategic Planning
• Diversity Equity and Inclusion
• Annual Meeting/Awards June 17th 5:30pm
• 2021 Virtual Walk October 9th
Hope for the Future
https://www.youtube.com/watch?v=fGVuB1Z6xcU

Magnify Voices May 20, 2021