

Lake County Mental Health Coalition



Lake County Board Chairman Aaron Lawlor, Co-Chair
Honorable Susan Garrett, Co-Chair



Lake County Mental Health Coalition

Overview

Our nation and our local communities, including Lake County, are facing a mental health crisis. Mental health challenges impact each and every one of our communities and creates a crisis situation that affects the individual, as well as families, friends, neighbors, veterans, employers, schools, hospitals, the criminal justice system, and so much more.

What We Know

- 1 in 5 adults (43.8 million) in the U.S. lives with a mental condition.
- One-half of all chronic mental illness begins by the age of 14; three-quarters by the age of 24
- 11% of the youth in the U.S. have a mood disorder
- Approximately 10.2 million adults have co-occurring mental health and addiction disorders
- Approximately 26% of homeless adults staying in shelters live with serious mental illness
- 90% of those who die by suicide have an underlying mental illness
- Nearly 60% of adults with a mental illness didn't receive mental health services in the previous year
- Persons living with serious mental illness face an increased risk of having chronic medical conditions
- Adults in the U.S. living with serious mental illness die an average 25 years earlier than others, largely due to treatable medical conditions
- 17% of adults in Northern Lake County reported mental illness in the past year

What We Don't Know

- What is the prevalence of mental illness in Lake County?
- How many citizens with mental illness receive long-term care?
- Are they able to access all the services they need? If not, why?
- What are the barriers to accessing care?
- Can we reduce or remove those barriers?
- How many persons are on waiting lists to receive care?
- Is the service available in our community aligned with the needs of those needing care?
- Are we investing our limited resources on the right mix of services?

Coalition Participation

The Lake County Mental Health Coalition will convene in 2016 and include a diverse group of stakeholders, including:

- Hospitals
- Lake County Health Department
- Housing/homeless assistance
- Veterans
- Law enforcement
- Justice and others

Through this collaborative effort, these partners can work together, leverage resources, and maximize the impact.

There are many strong programs and providers in Lake County, but there are tremendous opportunities to enhance and strengthen services from sharing data and creating linkages.



Community Based Coalition

Lake County Board Chairman Aaron Lawlor and the Honorable Susan Garrett (former IL Senator, 29th District) are leading on a community-based initiative focusing on data-sharing and evidence-based practices to address the gaps and develop a connected sustainable continuum of care for this vulnerable population.

Lawlor and Garrett will serve as co-chairs and will identify and recruit stakeholders to actively participate and advance the identified outcomes of the Lake County Mental Health Coalition.

Studies reveal there is a greater chance of success when different groups collaboratively organize around outcomes, especially when tackling social issues. While we know there are many programs in Lake County, they are too often doing this good work in silos. We simply don't know everything we need to about these varying levels of services and need to take the time to learn and understand. Real change will require collaboration between groups and people perhaps unused to working together. We must explore and identify the common goals and mutual benefits for all stakeholders (government, hospitals, police, community partners, and more).

What We Have in Lake County

There are many existing businesses, non-profits, agencies, and governments currently investing in Mental, Emotional, and Behavioral (MEB) health services in Lake County. These groups are currently providing programming, treatment and services to this population. They have conducted studies, identified gaps and made recommendations. Today, many are working to address these findings and implement study recommendations. How will the work of this Coalition be different from all of the existing boards and coalitions?

The focus of this Coalition will be to share and connect the many pieces. As with a puzzle, it is difficult to see the picture clearly until all of the pieces are connected. The solutions to the challenges related to MEB health care will take even more system wide data sharing, coordination, collaboration, and strategies to affect community level change. The Lake County Mental Health Coalition membership will be high level policy makers from the many stakeholder groups that are capable of long term, systemic, community level change. Much of the data, evidence based practices, gaps, need assessments, program recommendations will come from the great work that exists through the efforts of the individual initiatives. The Coalition seeks to connect and build upon these excellent efforts.

Objectives

The ultimate objective of this coalition is to prevent and reduce mental, emotional, and behavioral health (MEB) illness, including substance use disorders among adults and youth through data-sharing and researched-based best practices designed specifically for Lake County to form stronger prevention, build capacity, address gaps, and enhance services.

Mental, emotional and behavior illness is preventable and treatable.



The group will work to address the factors in a community that increase or contribute to the risk of these illnesses, promote the factors that minimize the risk, support, expand, and enhance preventative strategies.

To accomplish this, they will actively collect and review the various disparate data sets to understand the prevalence of mental illness, and breadth of existing services and programs in Lake County.

They will work to build connections through improved data-sharing among fragmented and siloed services in order to align the services with the needs, at the appropriate level, and the optimal time.

Long before you need the service, the opportunity for health begins in our families, neighborhoods, schools, and jobs.

Coalition members will strive to answer these questions: how to elevate throughout the community that MEB illness is preventable and treatable; how to enhance programs to prevent MEB illness; how persons intercept with systems and make connections between the different services; how persons access to the 'right' service regardless of where they enter the system; how to enhance the network of services to improve the continuum of care for MEB; and, how to connect the multiple systems to provide better care.

Outcomes

- Collect and share data on local mental health, including current services/programs and demand/need for service
- Build upon existing bodies of research regarding best practices and evaluate them for their applicability in Lake County
- Develop a framework and systems to more effectively share data across the community
- Use data to identify needs and gaps in service and then align and prioritize that list
- Effect the policy, connections, and practices necessary to build capacity, address gaps, and enhance services

Housing & Homelessness

What We Know

Access to affordable independent and supportive housing is essential to maintaining MEB health.

What We Don't Know

- How many and what type of housing units are needed, and when and where are they needed?
- Which housing types have the greatest gap?
- Is our mix of housing types aligned with the consumers' needs?





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Homelessness - Veterans

What We Know

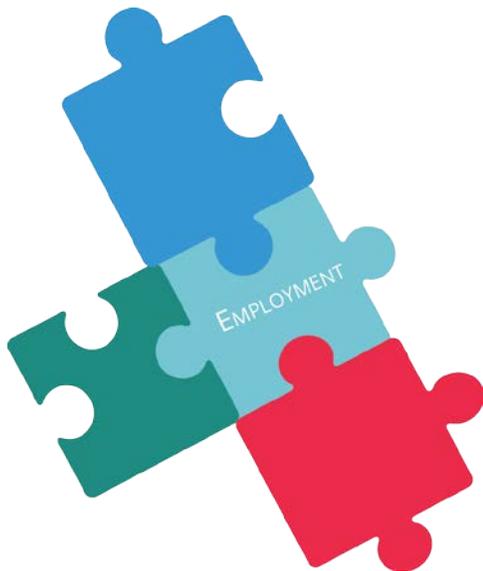
Specific challenges with reintegration or transitioning back into civilian life for veterans include:

- Disproportionate mental health needs
- Higher rates of homelessness
- Disproportionate unemployment (ages 18 to 24 years old)



What We Don't Know

- How many veterans need housing?
- How many veterans are chronically homeless?
- What the barriers are for receiving veterans MEB health services?



Employment

What We Know

- Employment is essential to recovery and adults with mental illness face challenges accessing opportunities for employment, the necessary support to maintain employment, as well as lost earnings and benefits.

Fast Facts

Emergency Shelters:

- 150 beds at 5 facilities
- 1 motel voucher program w flexible capacity
- Rotating site of seasonal beds
- 155 on Point in Time County

Transitional Housing:

- 7 projects with 186 beds

Permanent Supportive Housing:

- 246 beds, mostly scattered sites

Veterans:

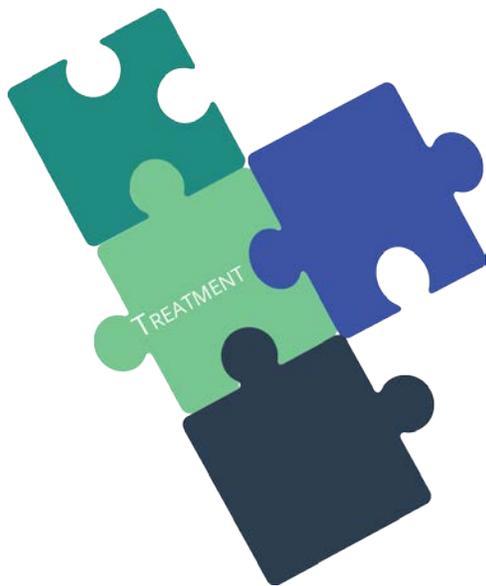
- In 2015, 47,725 homeless veterans were counted in America 1
- Illinois Counted 1,226 homeless veterans

- The U.S. Department of Veterans Affairs estimates that 18 veterans die each day from suicide in the U.S.



What We Don't Know

- What is the need for supportive employment for persons with mental illness in Lake County?
- What systems assist with supportive employment for persons with mental illness in Lake County?
- What is the current Lake County state of employment for persons with mental illness?
- How can the Lake County Mental Health Coalition contribute to the need for supportive employment?



Treatment/Support What We Know

Without supportive treatment, individuals with a mental illness suffer impairment of emotional or behavioral functioning that interferes with their ability to live in the community. With treatment, they can achieve optimal physical and mental health and social and emotional wellbeing.⁷ Most people who die by suicide have a mental or emotional disorder and there is a need for a strong system for suicide prevention and a coordinated crisis intervention system.

What We Don't Know

- What are all of the programs focused on suicide prevention and what data is available to measure the effectiveness of the programs? How can we enhance or expand suicide preventative education that can reduce suicide in Lake County?

Medical/Hospitals

What We Know

For more than a decade, there has been a national shortage of psychiatric professionals. Persons with MEB illness are more likely to have other serious health conditions that go untreated such as heart disease, diabetes, and high blood pressure.

Fast Facts:

- 6 out of 10 persons with mental illness can succeed in working with appropriate support.
- Nationally, only 1.7 % of people served in state mental health systems received supported employment services in 2012.
- Mental health wellness is impacted by interruption of treatment in the cycle of employment with benefits, unemployment, benefit loss, and, access to Medicaid.
- One in five Illinois residents experiences a diagnosable mental disorder every year
- In the past 8 years, between 60 and 70 persons have committed suicide each year in Lake County.



Fast Facts:

According to the Illinois Health Facilities and Services Review Board, Illinois Department of Health in 2013, two hospitals (Highland Park and Vista):

- Provided 59 psychiatric beds
- Reported 2,113 admissions
- Admissions resulted in 12,801 patient days
- Lake County needs an additional 24 psychiatric beds (Estimated based on the number of psychiatric bed days).
- The number of full-time sworn Lake County Officers certified in crisis intervention team training doubled from 6% to 13% in 2016.
- The Lake County Sheriff's Office has committed to raise the number of Lake County trained officers to 20% by the end of 2016.

What We Don't Know

- How many patients received psychiatric care across all systems in Lake County?
- How many persons receive care from multiple providers and how do those services intersect?
- What and what type of gap exists between the need for psychiatric care and the resources available? What is the delay in service?
- Are persons attaining care to address both their MEB needs and their physical health needs?



Justice/Law Enforcement



What We Know

- Incarceration is not effective treatment and is a very expensive option. Community crisis intervention can reduce the number of Serious Mental Illness (SMI) persons in the jail through effective community based response and care. This stabilizes individuals and reduce the impacts on families, neighbors, and communities.

What We Don't Know

- Data on how many persons in the jail have mental illness?
- What, when, and if justice involved persons have received prior treatment or services?
- How many low level offenders could be diverted out of the jail and into programs and services?



Education

What We Know

- Mental illness encompasses a spectrum of disorders affecting millions of people.
 - There is both conscious and unconscious bias related to mental illness in our communities, schools, employers, and families.
 - This makes early identification and conversation about mental illness difficult. Therefore, young people go untreated for years prior to diagnosis.
 - 1 in 5 adults (43.8 million) in the U.S. lives with a mental condition.
 - One-half of all chronic mental illness begins by the age of 14; three-quarters by the age of 24.
- Nearly 60% of adults with a mental illness didn't receive mental health services in the previous year
 - Persons living with serious mental illness face an increased risk of having chronic medical conditions and are less likely to seek assistance in managing their personal health.
 - Adults in the U.S. living with serious mental illness die an average 25 years earlier than others, largely due to treatable medical conditions.

What We Don't Know

- How to develop an effective education campaign to aid communities in conversations about mental illness?
- How to eliminate the negative stigma related to mental illness?
- How to successfully support early detection so that people can treat and manage their illness?

What Can You Do?

Stakeholders and leaders:

- Actively participate in this Coalition to work toward systemic outcome-oriented approaches that result in stronger prevention, capacity growth, closing gaps, and enhancing services.
- Leverage the positive and excellent work of Lake County organizations.
- Can encourage organizations to explore and develop integrated access to services to meet the complex needs of the individuals.
- Can collect, review and integrate policies and systems for better coordination.
- Can encourage organizations to track and report progress on key measures for ongoing evaluation of their programs' impact

Existing Partner Organizations and Service Providers:

- All partners can share their data including, services, service gaps and/or barriers, policies, program evaluations and results, and opportunities to strengthen warm handoffs and linkages

Lake County Mental Health Coalition



- Offer and support systemic solutions for challenges to core factors of health.
- All partners can share data and strengthen sustainable evidence-based practices across the continuum of care for individuals with mental illness.
- Connect the pieces of the puzzle to foster comprehensive coordination of mental, emotional, and behavioral health services in Lake County.