

SUMMIT AGENDA - PAGE 1

1:00 – 1:20 **Welcome and Introductions** – Dr. Carlbom and Participants

1:20 – 1:30 **Overview Approach Toward the Summit's Desired Outcomes**

– Dr. Carlbom

- What is your first impression of what is going on?
- What information do you need to activate your team?
- What is the primary role of your team in caring for this individual?
- What information does your team need to make a decision?
- Who will your team call for assistance?
- What are some of the options that your team has to advance this patient's care?

1:30 – 2:00 **Scenario 1: Full group**

A local grocery store calls 911 reporting a large man yelling and trying to grab shoppers' grocery bags as they exit the store. He is ~40years old, 6'6" tall, and thin. He is yelling very loudly that his "sugar is low" and "I just need food, I'm hungry". The caller reports they think this person uses methamphetamines and they often must "shoo him out" of the store to stop him from bothering people. He has tried to steal potato chips in the past but not today. He is not wearing shirt nor shoes, and his torn pants are secured on his dirt-covered body with a rope. No obvious weapons. He occasionally is darting in front of slow-moving cars in the parking lot unsuccessfully trying to grab grocery bags.

2:00 – 2:15 **Breakout Session 1: One Scenario, Three Breakout Groups**

Twenty-five-year-old male with chronic mental illness has barricaded himself in his bedroom. He lives with his parents. No weapons in the home. He has not been taking his medications for over 2 weeks. He is extremely paranoid. He refuses to come out and parents are concerned because he has not been eating for the past 3 days. He thinks they have been poisoning his food.

2:15 – 2:45 **Debrief: Breakout Groups Debrief with Full Group**

– Facilitated by Dr. Carlbom

SUMMIT AGENDA - PAGE 2

2:45 – 3:00 Breakout Group 1-3 Workshops the Following Scenarios

Breakout Group #1	<i>Scenario 1: Seventy-two-year-old female has been making threats toward neighbors and their dogs because she thinks the dogs are harming her cats. She has five cats that are indoor outdoor cats. She hasn't been sleeping for several nights because she is afraid the dogs will come into her yard and harm the cats. She calls 911 every time she sees a dog near her yard. She told law enforcement she would buy a gun if her neighbors did not keep the dogs out of her yard. Her husband died a year ago.</i>
Breakout Group #2	<i>Scenario 2: Thirty-year old female arrives at the fire station and is afraid because she thinks the gang that kidnapped her 10 years ago is in town and wants to hurt her and her family. She wants to talk with someone and be protected.</i>
Potential Breakout Group #3	<i>Scenario 3: Fifty-eight-year-old man lives alone and drinks a fifth of whiskey most nights. One night he calls 911 because he begins to feel like bugs and spiders are crawling on him. He is also shaking and vomiting.</i>

3:00 – 3:30 Breakout Groups Debrief with Full Group on Their Scenarios

– Dr. Carlbom/ Jim Novelli

- What is your first impression of what is going on?
- What information do you need to activate your team?
- What is the primary role of your team in caring for this individual?
- What information does your team need to make a decision?
- Who will your team call for assistance?
- What are some of the team's options to advance this patient's care?

3:30 – 4:00 Summit Wrap-Up – What Comes Next – Dr. Carlbom

- Meet again? When?
- What education could be initiated?
- What communication can be initiated?
- How to solidify tenuous relationships?

SUMMIT OVERVIEW

The assessment & treatment of patients with behavioral health emergencies has always required a team approach between law enforcement, EMS, behavioral health experts, and emergency department providers. With this many teams involved, there can be lack of clarity of roles and responsibilities. This care has become ever more challenging in the setting of the pandemic and recent new changes enacted by the state legislature.

Dr. David Carlbom, the Medical Program Director for Jefferson County EMS, is responsible for supervising all the out-of-hospital medical care in East Jefferson County. He invites you to meet each other, learn of our expertise, discuss opportunities and challenges, and to develop a shared mental model of how we collaborate to provide the best care to patients suffering Behavioral Health Crisis.

This will be an action-oriented meeting where we will establish relationships, understand roles, how to best activate and communicate with different facets of the team, and what options exist within the current legal frameworks.