

Mental Health Taskforce

Hello Sublette County and LaBarge, this is Albert Sommers reporting from interim work of the 67th Legislature. The Mental Health and Vulnerable Adult Taskforce met on May 12 in Cheyenne and July 18-19 in Lander. This Taskforce includes legislators, Wyoming Department of Health, Wyoming Department of Family Services, Wyoming Corrections, and the Wyoming Supreme Court. Mental health challenges have become increasingly prevalent in our courts, schools and society in general. In 2021, Wyoming had the highest suicide rate in the nation, and has retained one of the worst suicide rates for several years. I advocated for the creation of this Taskforce, and I am a member.

At the May meeting in Cheyenne, the Taskforce decided it would concentrate on four main issues: diversion, vulnerable adults, K12 mental health services, and adolescents with high behavioral needs. These four issues seem to create the greatest challenges and needs in Wyoming. As a result of this meeting, subcommittees were created to dig deeper into each of these topics.

In Lander on July 18-19, the Taskforce listened to testimony and ideas from each of the four subcommittees. Earlier in the year a delegation of Wyoming legislators, department personnel, and members of the court system toured a diversion program in Miami-Dade County, Florida. The Miami-Dade Mental Health Project was established in 2000 to divert individuals with serious mental illnesses away from the criminal justice system and into comprehensive community-based treatment and support services. Individuals in this successful program had serious mental illness, and reoccurring histories in the court system prior to implementation of the program.

The subcommittee on diversion reported that a Three Branch Mental Health Diversion Pilot Project had been created in Campbell County to test the Miami-Dade model. Will this pilot

project reduce the cost of repeat offenders, while improving their lives through better mental health services? Time will tell.

The subcommittee on vulnerable adults met and reported back to the Taskforce with the following: A Vulnerable Adult, by law, is any person eighteen years of age or older who is unable to manage and take care of himself or his money, assets or property without assistance as a result of advanced age or physical or mental disability. Wyoming lacks a comprehensive and coordinated response to addressing the needs of a rapidly increasing older adult population, including the population of vulnerable adults. Between 2020 and 2030, the 65+ population in Wyoming will increase by 30,000 people. Approximately 1 in 10 Americans aged 60+ have experienced some form of elder abuse. Social isolation and mental impairment (such as dementia or Alzheimer's disease) are two factors that make an older adult vulnerable to abuse.

The current system that supports vulnerable adults is fragmented in funding, organizational oversight, and service delivery and lacks definitions around inter-agency collaboration, communication, and jurisdiction. The subcommittee suggested creation of a time-limited inter-agency council that will meet to bring recommendations back to the Legislature on how to reduce fragmentation in the supports network, as well as where and which resources need to be applied to the existing support system for vulnerable adults.

The subcommittee on K12 mental health services came back with a recommendation that a consultant be hired to conduct a recalibration or study of the Wyoming's K12 funding model, specifically regarding the issue of K-12 mental health services. The recalibration or study should be done by 2025/2026. The study should address "What is the role of school districts and the State regarding K-12 mental health services?" The subcommittee will continue to meet and refine its recommendations.

The subcommittee on adolescents with high behavioral needs gave its report. In Wyoming, there are usually 15-20 adolescents whose behavioral needs are so high, it is difficult to find placement for them in-state, or even appropriate shelter until a final placement is found. These are young people who may each require one or two caregivers.

The subcommittee recommended and the Taskforce agreed that the State should release a Request for Information (RFI) to assess interest from Wyoming providers who can serve a portion or all of this population. It is possible that the Wyoming Life Resource Center would have housing to satisfy a portion of this population, but who should handle the staffing? The Taskforce believes this population is best served by private providers close to the child's home. The Taskforce will await the outcome from the release of the RFI.

The Taskforce continues to work these mental health challenges, and hopefully will find some good solutions along the way. I have been a strong advocate for state support of mental health services. You only have to ask those who do this hard work in our local communities to realize how fragile the system is, and the great need that exists for such services.

Being worst in the nation for suicide rates is unacceptable. Nearly the entire House Freedom Caucus voted against HB65, HB34, and HB140. These bills were designed to provide solutions to our citizens' mental health challenges. These Legislators believe mental health services should only be provided by churches, and the state should have no role. It is certainly true that churches can provide part of the solution, but these challenges really take a broad spectrum of the community to solve, with help from the state. We have to do better to solve Wyoming's mental health crisis.