

**HUMAN RIGHTS COMMISSION MEETING**

**MONDAY, May 10, 2021 - 6:00P.M.**

**MINUTES**

BOARD MEMBERS PRESENT

Glenn Morgan  
Patricia Osborne  
Carrie Louer  
John Papagiannakis  
Jenny Rosado  
Gary White  
Rayshma Ali

BOARD MEMBERS ABSENT

The Regular Meeting of the Human Rights Commission was held at the Municipal Building Council Chambers, One Main Street.

The meeting was called to order at 6:04 p.m. by Chairman Glenn Morgan.

**OLD BUSINESS**

Minutes from the previous meeting on April 12, 2021 were discussed and motioned for adoption by Chairman Morgan. Vice Chair Osborne motioned and Rayshma Ali seconded. All members present voted to adopt the minutes.

**NEW BUSINESS**

Chairman Morgan introduces mental health sub committee chair, Rayshma Ali. Dr. Ali introduces Dr. Bonnie Nolan who has a background in Addiction Services and began work in 2016 on the Opioid Epidemic in Woodbridge Township.

Dr. Nolan begins her presentation on the new behavior health program as well as everything the addiction services division offers to the public. (Dr. Nolan's presentation can be seen in Appendix A).

**PUBLIC**

Chairman Morgan opens the floor for public questions.

Ms. Bertsch asks how much of the police force received crisis intervention training. She also asked if police officers are training on how to administer Narcan. Dr. Nolan responds that every Woodbridge police officer is trained to administer Narcan. In regards to

intervention training, Dr. Nolan said that because it is a more extensive training, not all officers are certified, however, Detective Molina at Middlesex Prosecutor's Office said that Woodbridge Township is among the highest in Middlesex County. WPD's goals is to eventually have 100% of the force trained.

Carrie Louer asks about covid trends and Dr. Nolan replies there has been a large bump in deaths since last May since Fentanyl increase and a lot of relapse. There has also been many new alcohol use disorders because of the pandemic according to Dr. Nolan. Carrie Louer follows up by asking Dr. Nolan what she would like the public to know and what they can do to help. Dr. Nolan encourages people to be aware that addiction services exist and they want to destigmatize opioid health. Dr. Nolan says not to turn your back on people and that in any situation people can get help.

Dr. Ali also asks about the level of success and the short and long-term goals of addiction services. Dr. Nolan explains their goal is to connect more with hospitals and medical centers throughout Middlesex County to increase exposure and awareness.

Chairman Morgan concludes Dr. Nolan's presentation at 7:13pm. He asks Carrie to make a statement on Genova Burns, to which she responds that they are in the process of making suggestions to PD, the Mayor, our community and others.

### **ADJOURN**

Chairman Morgan called for a motion to adjourn at 7:20pm. Carrie Louer motions and Gary White seconded.

# Appendix A

## Woodbridge Township Behavioral Health Referral Program

- A cooperative effort between LE, HD-AS, and SCMOS to ensure residents with behavioral health needs get access to help
  - Bonnie Nolan, PhD, CADC
  - Addiction Services Coordinator

# The Problem:

Law enforcement officers are called to >50 “mental health” calls per month

Some officers have formal CIT, many do not.

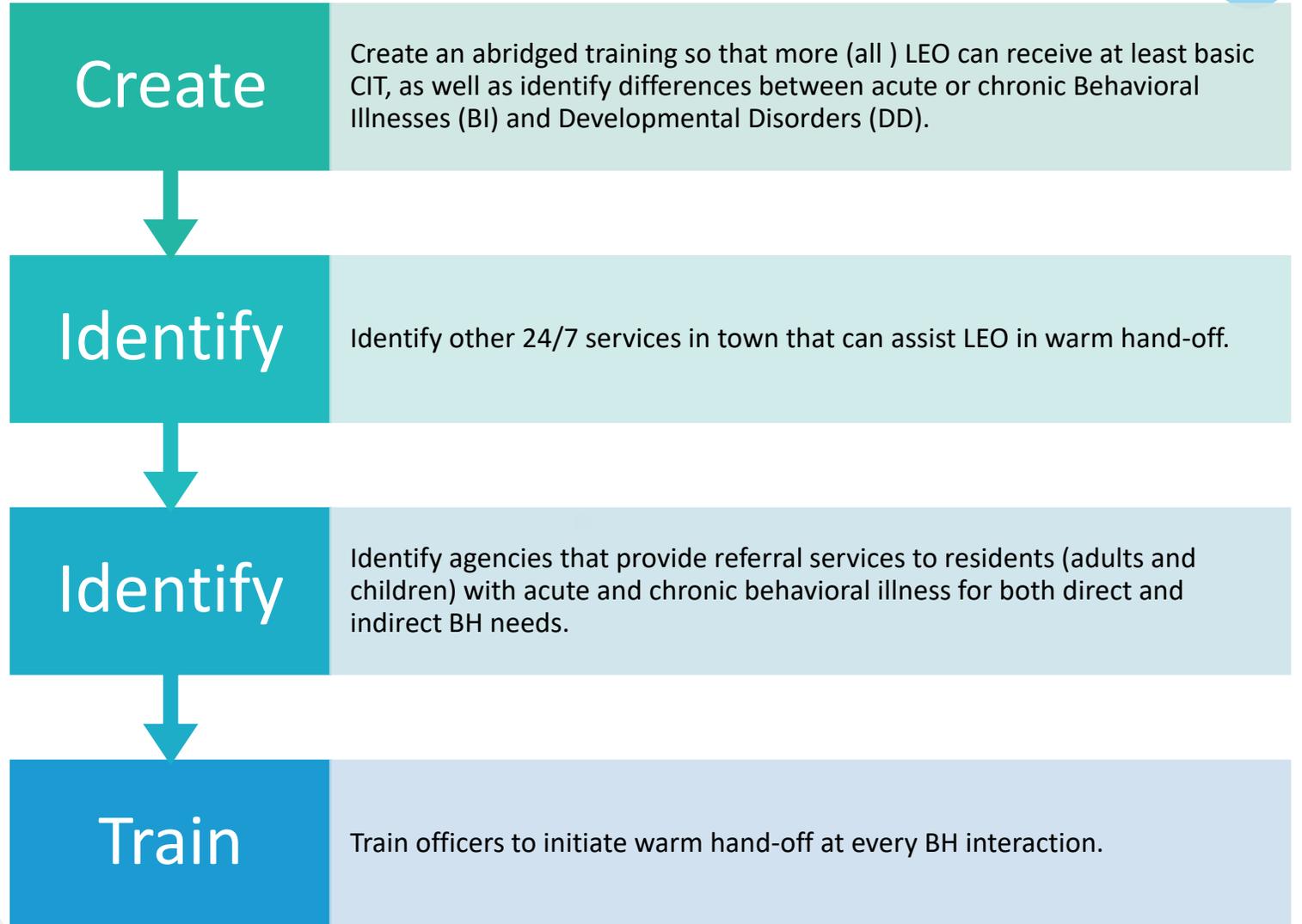
Many calls come in after hours.

Behavioral issues vary in severity – transport to hospital may not be necessary.

Even when transport occurs, follow-up was rare (resources/training/knowledge of services).

When transport does not occur, there was no system for “warm hand-off.”

# Solutions



# Create an abridged training

Created by the Middlesex County Prosecutor's Office with assistance from Mental Health Experts (Jessica Oppenheim, Rutgers)

LEO can receive at least basic CIT, as well as identify differences between acute or chronic Behavioral Illnesses (BI) and Developmental Disorders (DD).

Woodbridge has implemented this training and most officers have completed it.

Officers still contact EISS (Early Intervention Services, Crisis Management or RBMC) in cases where there may be imminent danger to anyone. Involved person is still screened and transported when appropriate.



Identify  
24/7  
services in  
town that  
can assist  
LEO in  
warm  
hand-off:

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Woodbridge Township Addiction Services, created in 2016 to respond to Naloxone reversals within one hour, employs approximately 25 Peer Recovery Coaches, who are on call 24/7.

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Coaches are not law enforcement personnel, but are accustomed to responding to LE calls and acting, 100% of the time. Extremely rare “misses.” Built in back-ups.

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Coaches do not interact with residents unless there is explicitly a substance use issue; coaches take contact information and refer all mental health cases, regardless of immediate outcome, to Specialized Case Management Outreach Services (SCMOS.)

Identify agencies that provide referral services to residents (adults and children) with acute and chronic behavioral illness for both direct and indirect BH needs.

SCMOS serves as a “Hub” to mental health and supportive services. We refer all behavioral health calls directly to SCMOS, and provide contact information so that residents in need can be contacted.

Treatment: Inpatient, outpatient, MAT for all age groups and behavioral illnesses.

Medical services: holistic

Social services: Food stamps, housing assistance

Peer services: Center for Respite, Mental Health Association NJ, NAMI (National Alliance on Mental Illness.)

# Train officers to initiate warm hand-off at every BH interaction:

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Repeated same system used when training officers to call peer coaches after Narcan reversal: attend every “muster” over two days (where teams transition) so that virtually every officer on patrol receives first-hand information from Addiction Services Coordinator.

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Deputy Director Nisky issues mandate that all mental health calls, regardless of severity, will be referred to coaches on call to ensure warm hand-off. Deputy Director Nisky follows up with ASC on each case to ensure information has been communicated.

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Coaches are trained to email information directly to Addiction services Coordinator, who then sends the information to SCMOS.

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Bi-weekly phone calls with SCMOS provide overview of performance.

# How are we doing?

- System formally implemented March 10, after all LEO were addressed at musters.
- Law enforcement response has been excellent: no mental health calls appear to have been missed (per Deputy Director reports.) Law enforcement informs residents of the process where possible.
- We have made about 90 referrals.
- Measurement of performance:

Stephanie Evans of SCMOS reports: every person referred receives a phone call. Some respond, some do not. Calls are repeated by a trained case worker. Contact information is provided in all cases. Preliminary measurements:

Calls to referrals: close to 100%

Referrals to case manager contact (SCMOS reports) 100%.



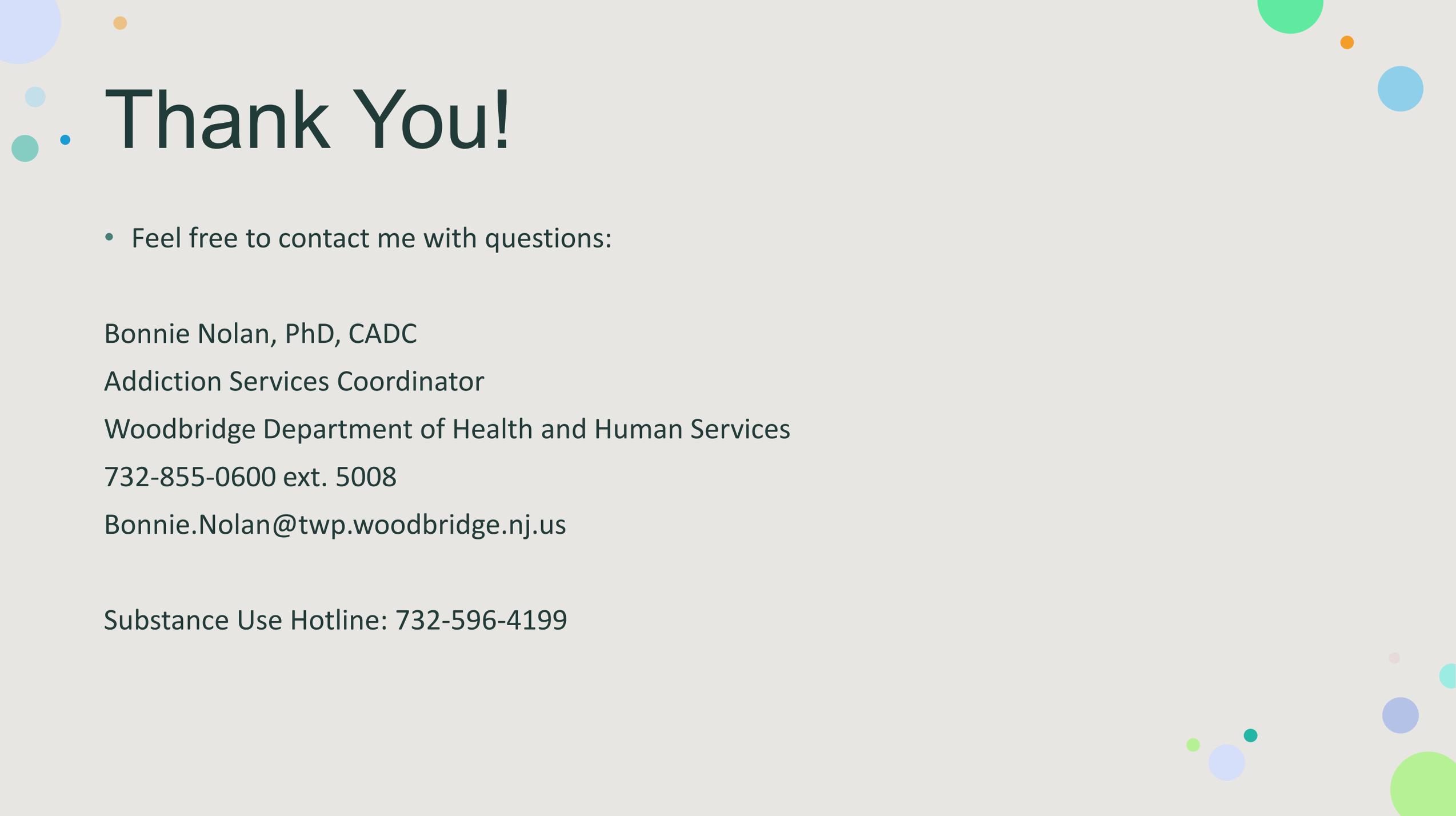
# Goals:

Improve measurement of outcomes: Using HIPAA compliant methods, work with SCMOS to determine whether residents receive services, what are the barriers to services, and whether system improves the lives of residents with behavioral illness and reduces the number of BH interactions with law enforcement.

Continually increase the number of LEO with full CIT.

Educate municipal prosecutors, defense attorneys and judges about BH, DD, and diversion programs. These have been extremely successful in SUD. (June 9 training)

Improve community awareness of Behavioral Health resources in Middlesex County.

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# Thank You!

- Feel free to contact me with questions:

Bonnie Nolan, PhD, CADC

Addiction Services Coordinator

Woodbridge Department of Health and Human Services

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