**Challenges and Recommendations in Disaster Mental/Behavioral Health**

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**Challenges for BH/MH Departments**

1. **Lack of** **funding** and dedicated and trained Emergency Management **staff** and Disaster MH/BH expertise.
2. **Integration** of BH staff into the Med/Health Branch, Public Health and Health plans, and into exercises and drills
3. “Psychological Casualty” numbers are **not included in drills** and exercises = no opportunity for BH Departments to practice!
4. ***Need for statewide facilitation to help develop:***
   * DMH/BH tools for disaster planning and response
   * Consensus on “required” training – including specific training for BH roles in different types of disasters
   * Implement CA Public Health & Medical BH Resource Typing Tools
   * Evidence-Informed BH Intervention Standards
   * **California (Methadone) Clinic Plan**

**What the CALBHB/C can do to help:**

1. **Assess the level of Disaster Response Preparedness for your County’s Disaster Behavioral Health response:**
   1. How is Mental/Behavioral Health integrated, staffed, funded and supported in your County? On par with Public Health and Health in your jurisdiction? If not, why not?
   2. Professional Emergency Management staff dedicated full time to disaster response planning? Does your county have a Disaster MH/BH Subject Matter Expert?
   3. Current, written disaster plans? Integrated?
   4. Disaster Department Operations Center?
      1. Staff identified for NIMS Roles? Trained? Equipment?
      2. DOC Activation for minor as well as major disasters? When?
   5. What are the Disaster BH Intervention Standards for those who are least impacted to most impacted? (Beyond PFA and “debriefing”)
   6. What is your BH Department’s Disaster Mission?
   7. What is the working relationship like with American Red Cross - Disaster Mental Health Services in your County?
   8. What are the BH plans for County staff disaster mental health? (Employee Health and Well Being Unit Leader selected and trained?)
2. **Weigh in on proposed legislation: *AB2333*** *–* ***Counties would greatly benefit from having a dedicated Disaster Mental/Behavioral Health Director*** *in the appropriate state agency tasked with Public Health, Medical response, or Emergency Management to facilitate statewide BH disaster response planning and to help with the development and implementation of BH Guidance (EOM and Resource Typing), Tools, Training, and integration with the Public Health and Medical disaster response systems.*