



TNT Working Group: Clinical Services Expansion Subgroup

Meeting 3: 2/13/2024

2/8/2024



Agenda

1. **Introductions & review meeting norms** [5 min]
2. **Timeline** of the Clinical Services Expansion Subgroup [5 min]
3. **Check in & Update from Last Meeting** [5 min]
4. **Quick OBM Highlights** [5 min]
5. **Deeper Dig on Scope:** Discussion [40 min]
6. **Feedback & Next steps:** action items and meeting dates [5 min]

Guiding Principles for our Meetings

- Intent vs. Impact
- It's okay to disagree; differences make us stronger
- Step Up, Step Back
- Be Present
- Never Say Never
- Honor confidentiality: what's said here stays here; what's learned here leaves here
- Always feel free to ask questions
- **Any new additions since our last meeting?**



Goals for this meeting

- 
- Clarify where we are now
 - Update on Alternate Response and Community Engagement
 - Expand and further define Clinical Services Expansion scope
 - *Budget-reviewed 1/9 [Jamboard](#)*
 - *Geography-reviewed 1/9 [Jamboard](#)*
 - **Staffing**
 - **Capital/Facilities**
 - Who else do we need to hear from?



TNT Working Group Overview



Mayor Johnson's Vision

How We Deliver a Better, Stronger, Safer Future for Chicago

Vision

A better, stronger, safer future is one where **our youth and our communities** have access to the **tools and resources they need to thrive**.

Mission

In partnership with all Chicagoans and informed by data, we aim to correct systems and practices that have created inequities for too long. We aim to repair past harms that have contributed to purposeful disinvestment and exclusion. We **aim to usher in a new era of inclusive, effective governance** that creates a better, stronger, safer Chicago.

Overview of the TNT Working Group Ordinance

	Ordinance Requirements
Working Group Goal	Develop a suggested framework and roadmap for the City to <u>expand mental health clinical services, non-police response for behavioral and mental health crises, and community awareness</u> of available mental health resources
Working Group Deliverable	A report delivered to the Mayor by May 31, 2024 that includes: <ul style="list-style-type: none"> • budget expansion; • capital and facility needs; • staffing, recruitment, and retention strategies; • community input; • state and federal legal and regulatory parameters; • and metrics to guide implementation and success.
Working Group Members	Representatives from the Chicago Departments of Public Health; Fire; Assets, Information, and Services; Human Resources; the Mayor’s Office; the Office of Budget and Management; and the Office of Emergency Management and Communications.
Community involvement	Consult at least 10 community members when determining recommendations
Meeting requirements	Meet at least 3 times before May 1, 2024

★ Working Group Structure

10 required
community
consults

Steering Committee

Members: Chair Rossana Rodriguez-Sanchez, Deputy Mayor Jen Johnson, Deputy Mayor Garien Gatewood, Chief of Policy Umi Grigsby, Deputy Budget Director Jacob Nudelman

MO Staff: Noureen Hashim (Policy), Allie Lichterman (MOCS), Nancy Cao (EDYHS; currently on leave)

Provide senior leadership guidance on direction of Working Group and Subgroups, monitor Working Groups outputs, and join at least one Working Group meeting.

Working Group

Members: CDPH, CFD, 2FM, DHR, OBM, OEMC

MO Staff: Noureen Hashim, Policy

Defines scope of final report, review relevant focus topics for subgroups, and plan and review inputs from public meetings. Meet 3 times.

Clinical Services Subgroup

Members: CDPH, AIS, DHR, Community Engagement, EDYHS, OBM

MO Staff: Noureen Hashim, Policy; Nancy Cao, EDYHS, Mariana Osoria, EDYHS

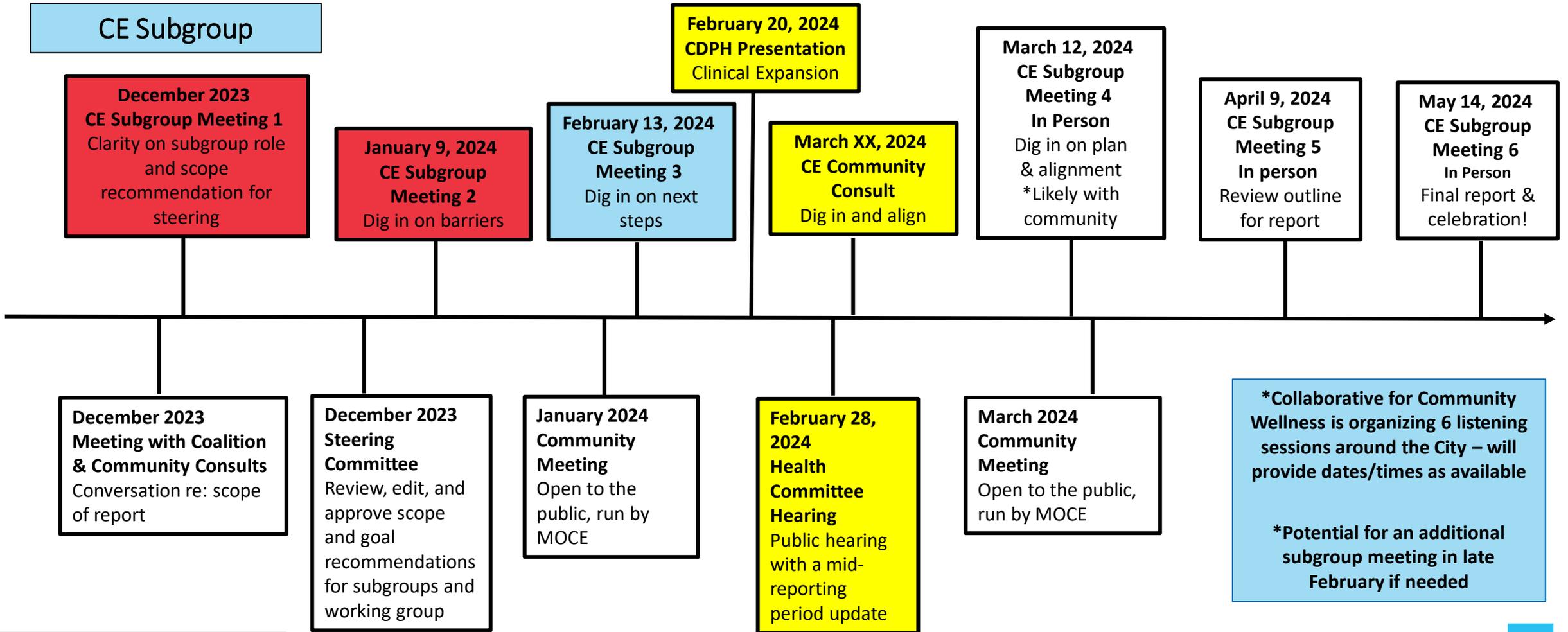
Alternate Response Subgroup

Members: CDPH, CFD, OEMC, AIS, DHR, Community Engagement, MOCS, OBM

MO Staff: Allie Lichterman, MOCS

Supply data and analyses for the report and formulate detailed recommendations. Meet 6 times.

★ Clinical Expansion Subgroup [DRAFT] Timeline





Discussion: Scope



Draft Scope [*pending steering committee approval*]

The TNT Clinical Services subgroup recommends the City of Chicago move forward with **increased access to direct clinical services as well as improve coordination and communication** of those services. The clinical care provided should be **culturally affirming, trauma informed, holistic, and rooted in the needs and experiences of its users, their families, and communities**. Clinical services should be **multifaceted** to include direct 1:1 services, **provided by a clinician as well as alternate supports that could include peer support, health promoters, and the utilization of varying modalities**. This report provides a vision for increased city-wide clinical services and community engagement so city residents understand and can utilize the resources available.

Preliminary Timeline (current-2027)

Fields Specified by TNT Ordinance

	Q1 (Jan-Mar)	Q2 (Apr-Jun)
Define Scope	Determine type of services offered + populations most in need	
Budget + Revenue Sources	Gain clarification from OBM if ARPA positions can be extended to '26	Draft budget to OBM Explore funding from fed, state, and Medicaid reimbursement
Geographic Expansion	Site review for 2 clinics in 2024	Analysis + recommendations for 3 remaining sites
Capital + Facility Needs	Index types of expenses at existing clinics	Assess site upgrades/rehab needed
Staffing, Recruitment + Retention	Determine type of staff needed for new sites Gain clearance to utilize Agile platform	Devise marketing strategy Secure 2nd recruiter from DHR Develop professional trajectory plan
Community Input	CCW Listening sessions, invite to subgroup	Mutual Reporting
Policy Compliance	Conduct scan of existing + potential '24 policy	Monitor policy in pipeline + scope-in as needed
Metrics to Guide Implementation	Create metrics that guide TNT program development	



Values

Values	Areas to dig into and define what this looks like?
Accessibility	Transportation, hours, modality physical accessibility, cost, city department utilization
Equity	Staffing, Culturally affirming, language access, locations, need
Trauma Informed	Warm touch by people in all aspects of service delivery, community led and designed, wrap around services, MH ecosystem
Community education	Destigmatize MH care, peer to peer support, marketing, public education
Reduction of Barriers (hiring)	Hire from the community served, expedite hiring, understand the workforce and skills needed, engage with departments to support hiring
Coordinated	Coordination with non-police first responders, data, partner coordination (CBOs, schools, youth services etc.), Community health workers, reduce silos

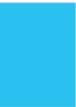


Deepening Discussion: Digging into Parameters & Scope

Parameters set by the Mayor and City Council

- *Focused on increased access to and community awareness of clinical services*
- *Reduce barriers to access*
- *Building towards city-wide*
- *Report includes budget, capital and facility needs, staffing, metrics for success*
- *Takes into account community input and regulatory parameters*

Jamboard



Feedback: What do YOU need to contribute to this group and ensure we are a success?

Jamboard

- What elements of this meeting did you find helpful?
- What elements of this meeting could have been improved and how?
- What tools/resources/information do you need to best contribute to this subgroup?

CDPH Presentation

- Tentative-Tuesday 2/20
- 10:30 AM



Next Steps

- Continue to collect and synthesize scope recommendations from alternate response subgroup and community consults
- Sharing all feedback with steering committee (Ald. Rossana Rodriguez-Sanchez, DM Jen Johnson, DM Garien Gatewood, Deputy Budget Director Jacob Nudelman)
- **Next Clinical Subgroup Meeting: Tuesday 3/12/2024**
 - **CDPH Clinical Services Expansion Presentation: Tuesday 2/20/24 @ 10:30 AM**
 - **Subject Matter Hearing: Friday 2/28/2024**
 - **Community Consult: March-exact date TBD**