



## MEMORANDUM

**TO:** Trustees

**FROM:** Julia López, Program Committee Member **BOARD ACTION REQUIRED**

**DATE:** November 14, 2025

**SUBJECT:** Approve Development of a Local Behavioral Health Care Team

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### BACKGROUND

The intent and purpose of the Missouri Dept. of Mental Health's (DMH) Behavioral Health Strike Team (BHST) is to quickly deploy trained individuals from a Community Mental Health Center (CMHC) and the state's Office of Disaster Services (ODS) and establish communications with the impacted region/county/city/facility to determine the level of trauma and develop a strategy to deliver psychological first aid to survivors and first responders. The ODS and the CMHC form the BHST and develop the most effective way to provide behavioral health support to survivors, responders, and other disaster workers. Additionally, the BHST works directly with other state agencies to coordinate other state or federal assistance if required. BHST members receive specialized training on responding to disasters and critical events.

Across the region, multiple networks currently respond to disasters—each operating within its own structure and mandates. These include the St. Louis Area Regional Response System (STARRS), the Regional Healthcare Coalition, the City's Emergency Management Agency, the Department of Health's Behavioral Health Bureau, and several other governmental, community-based, and nonprofit partners. While these entities share the same broad purpose, they are not consistently connected during activation.

### CONSULTING ENGAGEMENT DESCRIPTION

Community Development Solutions (CDS) will be engaged to develop a St. Louis Behavioral Health Care Team patterned after DMH's BHST to respond to disasters in St. Louis. The work scope will focus first on preparing and formalizing the behavioral health response network—clarifying how partners activate, communicate, and support one another—and then on aligning that network within the larger regional disaster recovery framework.

The project will be completed in two distinct but connected phases. The first phase will focus on developing the behavioral health response network, including establishing its framework, training structure, and partnership agreements. The second phase will focus on ecosystem mapping and systems alignment and will proceed only as needed once the city and the Mayor's Office determine how they plan to organize broader community and regional coordination efforts. Depending on those decisions, Phase 2 may not be necessary in its current form or may shift in focus to complement the city's approach.

This phased structure allows the work to move forward immediately, while maintaining flexibility to adapt as coordination at the city level evolves.

**Phase 1 – Behavioral Health Response Network Development and Training (Months 1–4)**

This phase focuses on building the core framework, training, and agreements necessary to prepare and activate a coordinated behavioral health response. This phase will include:

- **Activation Framework Development:** Develop a concise process flow defining how systems activate one another during a disaster, ensuring redundancy and continuity beyond individual staff.
- **Training and Community Capacity Strategy:** Identify priority audiences and potential partners for community-level preparedness and *psychological first aid* training, including nonprofit and neighborhood-based organizations.
- **Agreement and Partnership Planning:** Review comparable models to develop adaptable activation and partnership agreements suitable for local use; develop template partnership agreements or MOUs for participating agencies and organizations.
- **Stakeholder Engagement:** Conduct interviews and coordination meetings, as necessary, with key partners to inform framework design and ensure buy-in.

**Phase 2 – Ecosystem Mapping and Systems Alignment (Months 5–6)**

If necessary, CDS will identify and document all agencies, coalitions, and organizations engaged in disaster response and behavioral health recovery. The mapping process will include key contacts, roles, activation triggers, and communication pathways to create a functional directory for coordination and activation.

**Estimated Timeline (6 Months)**

Month	Key Focus	Primary Deliverables
1	<b>Project initiation, landscape review, and best practices</b>	<b>Phase 1:</b> Conduct project kickoff; review existing disaster recovery and behavioral health frameworks; identify and summarize relevant best practices; initiate stakeholder engagement
2	<b>Stakeholder engagement and synthesis of best practices</b>	<b>Phase 1:</b> Continue stakeholder interviews and coordination meetings; prepare summary of identified best practices and preliminary recommendations
3	<b>Framework development</b>	<b>Phase 1:</b> Develop draft behavioral health response framework; incorporate feedback from partners; finalize framework for validation
4	<b>Training and agreement planning</b>	<b>Phase 1:</b> Identify training needs and audiences; develop draft training approach and template agreements for activation and partnership
5	<b>Mapping and systems alignment</b>	<b>Phase 2:</b> Draft ecosystem map and inventory; identify overlaps, communication gaps, and alignment opportunities between behavioral health and regional systems
6	<b>Finalization and implementation roadmap</b>	<b>Phase 2:</b> Deliver final report, behavioral health response framework, and implementation roadmap; conduct close-out presentation with partners

**CITY OF ST. LOUIS MENTAL HEALTH BOARD OF TRUSTEES**

**APPROVE DEVELOPMENT OF A LOCAL BEHAVIORAL HEALTH CARE TEAM**

**RESOLUTION**

**WHEREAS**, the City of St. Louis, Missouri has levied taxes pursuant to the laws of the State of Missouri Sections 205.975 – 205.990 RSMo. to fund the Community Mental Health Fund (CMHF) and the Board is entrusted with administering these funds; and

**WHEREAS**, the Board desires to implement its responsibilities to ensure high quality-behavioral health services for adults ages 18 and older and children and youth from birth to age 18 residing in the City of St. Louis; and

**WHEREAS**, across the region, multiple networks currently respond to disasters—each operating within its own structure and mandates and although they share the same broad purpose, they are not consistently connected during activation; and

**WHEREAS**, MHB staff have recommended the development of local Behavioral Health Care Team, patterned after the Missouri Department of Mental Health’s Behavioral Health Strike Team, to respond to the behavioral health needs of city residents when disasters occur; and

**WHEREAS**, the development of a St. Louis Behavioral Health Care Team will focus on clarifying roles, bridging communication gaps, and establishing protocols that enable a rapid and coordinated local response—particularly where behavioral health, housing, and community stabilization intersect;

**NOW THEREFORE BE IT RESOLVED:**

The Board of Trustees directs the Executive Director to enter into a consulting agreement with Community Development Solutions in the amount of up to \$33,000 from the Community Mental Health Fund reserves, to develop a local Behavioral Health Care Team to respond to the behavioral health needs of city residents when disasters occur.

**APPROVED THIS 20<sup>th</sup> DAY OF NOVEMBER 2025:**

Board Chair/Officer Name (printed):	Signature:
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**ATTEST:**

Board Officer Name (printed):	Signature:
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