STATE COUNCIL ON MENTAL HEALTH

Behavioral Health Administration Department of Health, State of Hawaii Lanakila Health Center November 18, 2008 9:30 a.m. – 12:00 p.m.

Members Present: Buffenstein, M.D, Alan; Cabatbat, Arthur; Cattaneo, Liesje; Durant, Mike; Gonzalez, Peter; Hack, Randolph;

Hansen, Donna; Kaneaiakala, Alva; Kiliona, Ku'ulei; Morelli, Ph.D., Paula; Sandal, Candace; Shiraki, Ph.D.,

Steven; Tsark, Amy; Watters, Maile; Wilcox, Noelani; Young, Carol.

Members Absent:

Members Excused: Miyoshi, Sandra.

Guests Present: Eum, Sarah; Grambs, Marya; Namahoe, Kapua; Nishimura, Kristy; Tenn, Jolyn; Thompson, Laurie; Wilson, Lisa.

Staff Present: Awai, Ellen; Clarke, Judith; Crockett, Judy; Medina, Carol; Nazareno, Jocelyn; Pak, Sandra; Sturgis, Anne;

Vendetti, Ph.D., Thomas; Wylie, Ph.D., Mike.

AGENDA ITEM		RECOMMENDATIONS/ACTIONS/ CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
1. Call To Order	The meeting called to order at 9:37 a.m. Quorum was established.		N. Wilcox	
2. Review of Minutes	Corrections to the October minutes were: Page 1, place of meeting, should be "Lanakila Health Center", instead of "Kalihi-Palama Mental Health Center." Page 2, under comments from SCMH, should read: <u>Dr.</u> Edward Suarez, instead of Mr. Edward Suarez. Change "a micro-enterprise" to "micro-enterprise."		SCMH Members	11-14-08
	Page 8, first paragraph, cross out the third sentence and insert "Formerly each center was known as a CMHC. Now the whole system is responsible for achieving accreditation." Page 11, under CAMHD, first bullet, after the word. "Utilized", insert the sentence: "The Chapter 60 work group used emotional disability instead of emotional disturbance. The Board of Education (BOE) recommended using emotional disturbance." Delete sentence, "The Board of Education is moving"			

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	Mr. Hack moved to approve the October minutes with corrections. Dr. Steven Shiraki seconded the motion.	The motion was carried. Minutes for October were approved with corrections.	SCMH Members	
3. Hawaii Certified Peer Specialist Program	 Dr. Wylie and Ms. Awai provided a report on AMHD's Hawaii Certified Peer Specialist Program. Analysis of annual and quarterly reports on the status of Certified Peer Specialists, including the number of those employed, resulted in identification of two problem areas: Maintenance of Contact: Although surveys were sent out to Peer Specialists, it was very difficult to maintain these connections resulting in difficulty obtaining accurate information. Number of Responders: Although, the number of responders in a recent survey of the status of Certified Peer Specialists was not large, it was determined that approximately 75% of those certified were employed. To improve the Certified Peer Specialist Program, Dr. Wylie and Ms. Awai developed the following actions: A Peer Specialist Steering Committee was formed with representatives from the Neighbor Islands and AMHD staff. A Peer Specialist support line was developed and is open each Tuesday, to respond to complaints. Peer Specialist trainings are being conducted on the Neighbor Islands in which the expectations for the Peer Specialists and probable outcomes are described. Informational sessions are held prior to the training to clarify to consumers that the program objective is for consumers to gain employment after certification. A website was developed with a registry of consumers who are interested in employment and for providers to list job openings. A job fair is being held at the end of each of the trainings. Regarding the most recent Peer Specialist Training, of forty persons who began the training, 33 completed it and 20 graduated as Certified Peer Specialists. Ms. Awai has been working under the supervision of Dr. Wylie, 		Dr. M. Wylie/ Ellen Awai	
	MHSRET, and will now be moving back to the Office of Consumer			

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	Affairs (OCA) under the supervision of Mr. William Lennox and Ms. Karen Krahn.			
	 Ms. Awai provided information on handouts: "Code of Ethics": Of most concern are dual relationships. Consumers should not be employed by the agency that is providing services to them. "Job Descriptions and Responsibility": Hawaii's Peer Specialist program adopted the job description and responsibilities from the State of Georgia's Peer Specialist Program. Training Schedule: The Peer Specialist training is strenuous and is held over a two week period from 8:00 a.m. to 5:00 p.m. Speakers include AMHD (ACCESS, Evidence Based Practices, Cultural Competency and Housing). Also included are representatives from the Social Security Administration, the Hawaii Disability Rights Center, Employment - Steadfast Housing Development Corporation's Supported Employment Program, the Department of Vocational Rehabilitation or Clubhouse. 			
	 The role and functions of the Certified Peer Specialist includes: Use their personal experience of mental illness and mental health recovery to assist peers. Help consumers to identify their recovery goals and dreams in a culturally competent way. Assist consumers to explain to the recovery team what consumers themselves have difficulty putting into words. Use the Mary Ellen Copeland Wellness Recovery Action Plan tool to help consumers during their various stages of recovery. Assist peers to cope with problems and gain control over their own life. Provide peers with direct support services. Promote the mental health system to move toward self-directed recovery. 			
	Ms. Awai reported the Hawaii's first training started in 2003 and was held in Georgia. In February 2006, the first training was done in Hawaii by Hawaii staff. Trainings have been provided in Hilo and on Oahu, and			

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	for the Veterans Administration. Training could not be accomplished on Maui because sufficient interest was not evident in comparison to the interest on the Big Island. The next training is scheduled for late spring of 2009.			
	Ms. Tsark asked: 1) How many have been trained and certified as Peer Specialists; 2) Is there any re-certification program for them; and 3) Are there any stipends for Peer Specialists?			
	Ms. Awai replied that 150 persons have been trained and 130 certified. There is no re-certification required or stipend available at this time. United Self-Help provides the Bridges Education Group and other support groups for consumers. Participation may be of assistance for continuing education purposes. Ms. Awai continued that it is also recommended that consumers become certified as a psychiatric rehabilitation practitioner with the U.S. Psychiatric Rehabilitation Association (USPRA), which they may use in other states. USPRA also provides Continuing Education Credits for attendance at USPRA meetings.			
	Ms. Lori Thompson reported that she participated in the most recent Peer Specialist training and did not pass. Ms. Thompson asked why she was not able to obtain the results of the test. She reported she was concerned that many consumers who passed the test did not have jobs and those that failed the test had a job but needed the certificate for their jobs. She expressed that the training atmosphere was not a conducive learning experience for her.			
	Ms. Awai replied that in many of the certifications, only a pass or fail result is provided. The scores are not provided nor are participants told of their specific areas of failure.			
	Mr. Gonzalez encouraged Ms. Thompson not to give up and to take the test again.			
	Ms. Sandal added that some of the Certified Peer Specialists on the Neighbor Islands are not working. Consumers on Kauai need these services and someone in authority should make sure that Certified Peer			

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	Specialists on each island are employed. Ms. Sandal also stated that since there is a position for a Certified Peer Specialist in each clinic, if that position is open, then another peer specialist should be hired. It should also be mandatory that the clinics refer consumers to Ms. Awai.			
	Dr. Wylie suggested that Ms. Sandal use the support line to voice her concerns.			
	Mr. Gonzalez commented that State Council members could go into the community and introduce people to the Certified Peer Specialist Program.			
	Ms. Donna Hansen asked how many Certified Peer Specialists are on Maui and how many are employed? Ms. Awai replied that there are seven on Maui and all are employed.			
	Ms. Hansen commented that the Maui Service Area Board was not notified about the last training. When she requested such information at the State Council meeting, she received it too late. Ms. Hansen indicated she would like to have the Maui Service Area Board notified in advance of the training in order that applications may be turned in on time.			
	Ms. Awai replied that the new way of registering for the training is through the AMHD website under "Consumers".			
	Ms. Tsark commented that we all believe the mental health system is a partnership between the Centers, administration, consumers and the Council. The Centers have the responsibility to inform consumers because it is part of the recovery process. Would the Council recommend setting up a process for wide distribution of information on the training? All of us need to encourage and welcome the consumers to participate.			
	Ms. Watters commented that she works as a youth peer specialist at Kahi Mohala; however, she has not taken the Peer Specialist training because she fears the curriculum might not be appropriate for her IQ level. She asked if support would be provided so that she could participate in the training.			

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	Ms. Awai replied that taking the training would helpful.			
	Ms. Wilcox thanked Ms. Awai and Dr. Wylie for their presentation which will allow the Council to think about ways to support this needed program. Ms. Wilcox suggested that Ms. Awai consider the Council as a source of support and a facilitator of partnerships.			
4. Quest Expanded Access Program	Ms. Lisa Wilson presented the Quest Expanded Access Program to the Board. The Quest Expanded Access Program, to begin in February 2009, is a new Medicaid Program for those who are 65 years old or older and for those who have a disability. The goal is to control medical costs while providing health care for clients, so that they can maintain a healthier life style and live longer.		Lisa Wilson/ Jolyn Tenn	
	 Quest Expanded Access (QEXA) offers the following: Coordinates care for clients and ensures clients are receiving all the services they require. Has a provider network list. Provides clients with a primary care physician (PCP) and a service coordinator to assist clients to obtain needed services. Reaches out to clients to perform an assessment. Has a 24-hour hotline. Offers a disease management program, e.g., diabetes, heart disease and obesity. Provides more home and community based services. Two Plans are available: Evercare and Ohana. Evercare will have a special program on substance abuse and Ohana will have a special program on depression, although both providers provide both services. Each Plan has its own website and provider list. Clients will have the same coverage under either plan. Will not impact Medicare services if a client has dual eligibility. Evercare plan is not available on Lanai and Molokai. The difference between the Evercare and Ohana Plans is the provider list and special programs (substance abuse and depression) that are offered. Populations that are excluded are: SHOTT participants (State of 			

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	 Hawaii organ and tissue transplant program) and PACE, Maui. There are some services that are not covered by the Plans. The same services will continue to be provided for clients receiving them from the Department of Health, AMHD. Clients will be are able to change providers. The deadline for enrollment is December 1, 2008. 			
5. Implementation Report and SCMH Letter to CMHS	Ms. Judith Clarke provided an overview of the FY 2008 Draft Implementation Report with a PowerPoint handout. The report is a response to the FY 2008 State Plan including results of the Performance Indicators. SCMH members were sent the report by e-mail on November 17 th . Ms. Sandra Pak also provided an overview of CAMHD's section of the Implementation Report.	Ms. Clarke will mail hard copies of the Report to Neighbor Island SCMH members. Council members to review the Implementation Report and provide comments to Ms. Wilcox by November 25, 2008.	J. Clarke SCMH Members	11-18-08 11-25-08
		Ms. Wilcox will write letter to CMHS on behalf of the Council by November 28, 2008. Plan is due in Washington D.C. by December 1, 2008.	N. Wilcox	11-28-08
9. Announcements	None.			
10. Agenda Items for Next Meeting	 Presentation by Attorney General Recruitment of SCMH Membership 			
11. Community Input	None.			
12. Adjournment	The meeting adjourned at 12:05 P.M.			
Mail Outs	 SCMH November Agenda and October Minutes QEXA Hawai'i Brochures CAMHD Task Force Meeting Minutes HACDACS Agenda of October 28 and May, June, July, August Minutes, and Annual Report. Hawaii SAB November Agenda and September Minutes Maui SAB June, July, August Minutes Kauai SAB October Agenda and September Minutes. 			

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Handouts	 AMHD Peer Specialist Handouts (PowerPoint Handout, Code of Ethics, Job Description, and Schedule). Draft FT 2008 Implementation Report PowerPoint Overview of the FY 2008 Implementation Report QEXA Brochures 			