

STATE COUNCIL ON MENTAL HEALTH  
Behavioral Health Administration  
Department of Health, State of Hawaii

KALANIMOKU BUILDING  
December 10, 2013, 9:00 a.m. – 11:30 a.m.

Members Present: **Brown, Patrick; Crum, Louise; Daraban, Charlene; Durant, Mike; Foard, Susan; Holschuh, Christopher; King, Susan; Koyanagi, M.D., Chad; Minami, Theresa; Simms, Sandra; Wilcox, APRN, Noelani.**

Members Absent:

Members Excused: **Calcagno, Sheila; Mansfield, Haaheo; Lorenzo, Katrina; Shiraki, Ph.D., Steve Vorsino, Psy.D., Marie.**

Guests Present:

Staff Present: **Clarke, Judith; Freitas, Troy; Fridovich, Ph.D., Mark; Hiraga-Nuccio, Madeleine; Michels, M.D., Stanton; Nazareno, Jocelyn; Pak, Sandra; Tom, Trina; Wise, Tracey.**

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ACTIONS/ CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
1. Call To Order	Mr. Durant, Chair, called the meeting to order at 9:07 a.m.		M. Durant, Chair	
2. Review of Minutes	Minutes for August 13, 2013, September 10, 2013, October 8, 2013 and November 19, 2013 were approved as written.			
3. Community Input	<ul style="list-style-type: none"><li>• No Community Input</li></ul>			
4. Island Report Service Area Boards	<u><b>Maui</b></u> Ms. King reported on the following: <ul style="list-style-type: none"><li>• The Maui Service Area Board (MSAB) discussed and developed the Maui Comprehensive Integrated Service Area Plan for 2014.</li><li>• Ms. Tom, Maui Service Area Board Administrator, stated that the MSAB received feedback from the Maui Focus Group, financial and demographic data, and responses from electronic surveys from other community stakeholders.</li><li>• The MSAB reviewed the information and the Chair, Karin Phaneuf,</li></ul>	For information only.	Susan King	

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	<p>in collaboration with Ms. Tom outlined a process for members to determine the top priorities that should be worked on in 2014.</p> <ul style="list-style-type: none"> <li>• Members of the MSAB discussed the data and developed their plan. The final product was sent to members for review and approval.</li> <li>• The final document was also sent to the Adult Mental Health Division's Planning Office and will be shared with the Council at a later date.</li> </ul> <p><b><u>Kauai</u></b> No report</p> <p><b><u>Oahu</u></b> Mr. Brown reported on the following:</p> <ul style="list-style-type: none"> <li>• The Oahu Service Area Board (OSAB) discussed the development of the Oahu Comprehensive Integrated Service Area Plan but did not complete it.</li> <li>• The OSAB worked on prioritizing the focus of their plan for the next year.</li> <li>• The Board asked Mr. Freitas, Oahu Service Area Administrator, to inquire about the usage of the document. The Board's understanding is that the Department of Health (DOH) would consolidate the county documents into a Statewide Comprehensive Integrated Service Plan.</li> <li>• Members also discussed the OSAB attendance policy.</li> </ul> <p><b><u>Hawaii Island</u></b> No report</p>	For information only.	Patrick Brown	
5. Adult Mental Health Division (AMHD) Report – Updates on Proposed Bills for the 2014 Legislative Session	<p>Dr. Fridovich reported on the proposed bills for the 2014 Legislative Session:</p> <ul style="list-style-type: none"> <li>• The first bill is entitled “A Bill for an Act Relating to Privacy of Health Care Information.”</li> <li>• This bill repeals the current language of section 333E-6 and 334-5 of the Hawaii Revised Statutes to replace it with the confidentiality and privacy requirements of the Health Insurance Portability and Accountability Act (HIPAA). Instead of separate Hawaii Revised Statute Law pertaining to mental health confidentiality matters, the HIPAA privacy rule would apply to all entities that hold</li> </ul>	For information only.	M. Fridovich	

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	<p>developmental disabilities and mental health records i.e. all public and private providers including the Hawaii State Hospital (HSH).</p> <ul style="list-style-type: none"> <li>• The second proposed bill is the Special Action Team Bill – This bill was introduced last Legislative Session; however, it failed. There are two parts of this bill; the first part is called, “A Bill for an Act Relating to Records for Forensic Examinations.”</li> <li>• This bill is to rectify forensic evaluations. This will facilitate the timely completion of forensic evaluations for individuals at the HSH.</li> <li>• Part two of the bill is called, “A Bill for an Act Relating to Forensic Mental Health.” This bill establishes time limits for individuals that are on conditional release (CR) if charged with a misdemeanor, petty misdemeanor, or violation, not involving violence or attempted violence. This bill also clarifies under what circumstances the one-year conditional release status is revoked.</li> </ul> <p><u>Questions and Answers for Dr. Fridovich:</u></p> <ul style="list-style-type: none"> <li>• Mr. Holschuh requested a written report on the proposed legislative bills. He also asked if AMHD is investigating the rate of recidivism for individuals on CR for misdemeanors and petty misdemeanors. Dr. Fridovich responded that a written report on the bills would be submitted to the Council. He acknowledged that the second part of the question was very good; however, he was not aware of any evidence that suggests the rate of recidivism for this group is in fact different than individuals who were guilty of misdemeanors or equivalent charges.</li> </ul> <p>Mr. Durant commented that the Judiciary Permitted Interaction (PI) Group would review the proposed bills and perhaps submit testimony in support them.</p>			
6. Child and Adolescent Mental Health Division (CAMHD) Report	<p>Ms. Pak and Dr. Michels reported on the following:</p> <ul style="list-style-type: none"> <li>• The Primary Care Pilot Programs are funded by the Substance Abuse and Mental Health Services Administration’s (SAMHSA) Mental Health Block Grant funds.</li> <li>• CAMHD is funding two projects, one with Hawaii Primary Care Association (HPCA) and the other with the Department of Psychiatry of the John A. Burns School of Medicine (JABSOM). Both projects are in progress.</li> </ul>	For information only.	S. Pak/S. Michels	

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	<ul style="list-style-type: none"> <li>• The HPCA has two sites, Kona Federally Qualified Health Center on Hawaii Island and Kokua Kalihi Valley Clinics on Oahu. The JABSOM project has not made much progress, but the Residents will be providing more clinical consultations directly to the health centers.</li> <li>• CAMHD resubmitted their reorganization concept to the Director of Health. The reorganization is designed to put CAMHD in an operational structure that will best suit them for the next few years given health care reform.</li> <li>• Dr. Michels explained that all exempt positions will be converted to civil service. However, he noted that this is problematic for CAMHD in terms of retaining the upper level administrators' and clinicians' positions.</li> <li>• Dr. Michels stated that in recruiting for these positions, he will be competing with high salaries in comparable positions in the private sector. He acknowledged the challenge, but noted CAMHD plans to appeal for a smaller special project for these positions. He requested that the Council support this initiative.</li> </ul> <p><u>Questions and Answers for Dr. Michels:</u></p> <ul style="list-style-type: none"> <li>• Ms. Simms asked if CAMHD is only working with students from the University of Hawaii or also students from other states for the Primary Care Programs. Dr. Michels responded that students are recruited nationally.</li> <li>• Ms. Wilcox asked about CAMHD's plans to maintain the skill sets for these professional positions in light of the constant changes in technology. Dr. Michels responded that CAMHD will write job descriptions to account for these skill sets.</li> </ul>			
7. Maui Crisis Intervention Team Presentation	<p>Ms. Tom presented on the Maui Crisis Intervention Team (CIT) Project. Highlights of the presentation:</p> <ul style="list-style-type: none"> <li>• The Maui CIT project is in its third (3<sup>rd</sup>) year and is funded by the SAMHSA Mental Health Block Grant. The goal of the project is to train first responders to identify individuals living with mental illness and learn how to respond to them in a crisis.</li> <li>• First year – Participants were educated on crisis intervention.</li> </ul>	For information only.		

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7. Maui Crisis Intervention Team Presentation (cont'd)	<ul style="list-style-type: none"> <li>• Developed the curriculum for the project.</li> <li>• Maui Police Officers were trained in Memphis, Tennessee which is the model that the Maui team adopted.</li> <li>• In addition to his regular work schedule, Dr. Rampersad, Maui Forensic Coordinator, is on stand-by to receive calls after hours.</li> <li>• Second year – Maui Police Department (MPD), Maui Fire Department, Maui Community Mental Health Center (MCMHC) staff, and individuals at the Maui hospitals were trained. <ul style="list-style-type: none"> <li>• The ground work was developed and implemented.</li> <li>• Consumer panels were added to the trainings. Police officers were able to learn how to effectively work with consumers in crisis and consumers were able to explain to officers what it is like to have a mental illness including what works and what doesn't work when interacting with consumers.</li> </ul> </li> <li>• Third year – The main goal for the third year was to transition the CIT project to MPD for oversight. <ul style="list-style-type: none"> <li>• The MPD is committed to take over the CIT Project after the grant period ends September 2014.</li> <li>• MPD will then take the lead in funding, planning, and providing subsequent training for other first responders.</li> <li>• iPads will be purchased and placed in police stations on the islands of Maui, Molokai and Lanai. These iPads will be used as a communication tool between police officers and the clinical staff at the MCMHC at all hours of the day.</li> </ul> </li> </ul> <p>Benefits of this project to date:</p> <ul style="list-style-type: none"> <li>• Recidivism of call backs have dropped.</li> <li>• The project has saved money for the mental health system – cuts down on expenses.</li> <li>• Program is well-known throughout the community.</li> <li>• Key element that makes this project successful: The on-call clinical staff responds quickly during a crisis to assist police officers.</li> <li>• Dr. Rampersad is being asked to train the on-call physicians at the MCMHC and to assist first responders in a crisis with consumers.</li> </ul>			

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7. Maui Crisis Intervention Team Presentation (cont'd)	<p><u>Questions and Answers for Ms. Tom:</u></p> <ul style="list-style-type: none"> <li>Mr. Durant – Are the members of the CIT group members of the police department? Do they have a psychiatrist or psychologist that they can consult with? Will the iPads be used for consultations if they are in a rural area? How many police officers and firefighters have been through the training?</li> </ul> <p>Ms. Tom – The initial group trained was only police officers; however, the last training class included firefighters. The person who is on-call and stand-by is Dr. Rampersad, a clinical psychologist, who is the MCMHC Forensic Coordinator. He provides clinical consultation with the officers. The iPads wouldn't just be used for police officers on Maui, Molokai and Lanai, but they will also be used for regular field work where the CIT needs general information. Approximately 1/3 of Maui's police force has been trained and plans are to include more firefighters.</p> <ul style="list-style-type: none"> <li>Ms. Wilcox – Does Memphis certify the instructors and do they look at fidelity?</li> </ul> <p>Ms. Tom – Due to budget restrictions on travel, the Memphis group hasn't been able to visit the Maui CIT group. However, the Memphis group has stayed in contact with the Maui CIT group to ensure that the CIT stays true to the Memphis model. Both groups have met and networked at the CIT International Conferences.</p> <ul style="list-style-type: none"> <li>Mr. Durant – Is there a CIT program on Hawaii Island? Chair Durant then asked Ms. Wise to present information about the crisis teams on Hawaii Island.</li> </ul>	<p><u>Action:</u> Ms. Wise, Hawaii Island Service Area Administrator to present on the Hawaii Island crisis team activities at the next State Council meeting.</p>	<p>T. Tom</p> <p>T. Wise</p>	<p>1/14/14</p>
8. Discuss and Decide on SCMH Main Meeting Site	<p>Main site for State Council Meeting</p> <ul style="list-style-type: none"> <li>The Council decided to keep the Kalanimoku site for the Council meetings.</li> </ul>	For information only.		
9. Decision-Making on Outstanding Agenda Items.	<p>Letter to Representative Brower</p> <ul style="list-style-type: none"> <li>Ms. Simms moved that the Council send the letter to Representative Brower. Ms. Crum seconded. Members unanimously approved the motion.</li> </ul>	<p><u>Action:</u> Ms. Clarke to correct grammatical errors and then mail the letter to Representative Brower.</p>	J. Clarke	12/11/13

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9. Decision-Making on Outstanding Agenda Items (cont'd).	<ul style="list-style-type: none"> <li>• Create a PI Group to Investigate the Transition of Consumers to the Community, post incarceration.               <ul style="list-style-type: none"> <li>• Mr. Brown suggested creating a new PI group to look into this matter.</li> <li>• Ms. Crum asked for clarification on what is the purpose of the investigation and what the Council expects to accomplish.</li> <li>• She noted that there is nothing new because the mental health community is aware of the road blocks consumers face after discharge – no treatment programs and housing, loss of benefits, and a lack of money.</li> <li>• Ms. Clarke commented that at the last Council meeting, members suggested inviting Mr. Ted Sakai of the Department of Public Safety (PSD) to address the barriers that prevent positive transitions for consumers leaving jails and/or prisons.</li> <li>• Ms. Wise commented that since there are a few re-integration programs on Hawaii Island, perhaps she could present information to the Council, which will create discussion. Council members could then decide on next steps.</li> <li>• Council members agreed to invite Dr. Mark Mitchell from the PSD to present information on post discharge of consumers.</li> </ul> </li> <li>• Select Representative(s) to Participate in the Adult Mental Health Division's Strategic Planning Process.               <ul style="list-style-type: none"> <li>• Chair Durant explained that Ms. Mansfield is interested in being a representative and wishes to participate.</li> <li>• Ms. Crum stated that she was also interested in being a representative.</li> <li>• Mr. Brown reiterated that he is willing to participate as a community stakeholder and not as a Council representative.</li> </ul> </li> <li>• Ms. Simms motioned that Ms. Mansfield and Ms. Crum should be the two (2) State Council representatives. Ms. Minami seconded.</li> <li>• Select a PI Group to look into the Feasibility of a Warm Line.               <ul style="list-style-type: none"> <li>• Chair Durant agreed with the rest of the membership that the Public Education PI Group should be assigned to work on this.</li> </ul> </li> </ul>	<p>For information only.</p> <p><u>Action:</u> J. Clarke to invite Dr. Mitchell to the next SCMH meeting.</p> <p><u>Action:</u> Motion passed to appoint Ms. Mansfield and Ms. Crum to participate in AMHD's Strategic Planning Process.</p> <p><u>Conclusion:</u> The Public Education PI Group is assigned to work on the Feasibility of a Warm Line.</p>	J. Clarke	1/14/14





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10. Permitted Interaction (PI) Group and Other Activities	No Reports			
11. Announcements	Starting January 2014, Council members agreed to “go green” in receiving agendas, minutes and other documents.			
12. Future Agenda Items	<ul style="list-style-type: none"> <li>• Public Housing and Eviction – Consumers with Mental Illness</li> <li>• Transition from Youth Services to Adult Mental Health Services</li> <li>• AMHD Emergency Psychological Services</li> </ul>			
13. Adjournment	The SCMh meeting adjourned at 11:25 a.m.			
Mail Outs	<ul style="list-style-type: none"> <li>• SCMh November 19, 2013 Agenda and draft SCMh minutes for August 13, 2013, September 10, 2013 and October 8, 2013.</li> <li>• SCMh Attendance Log</li> <li>• Child and Adolescent Mental Health Division Report</li> <li>• Hawaii Service Area Board on Mental Health and Substance Abuse, October 21, 2013, Agenda and Minutes</li> <li>• Oahu Service Area Board on Mental Health and Substance Abuse, October 31, 2013, Agenda and Minutes</li> <li>• Maui Service Area Board on Mental Health and Substance Abuse, November 4, 2013, Agenda and Minutes</li> </ul>			