STATE COUNCIL ON MENTAL HEALTH

Behavioral Health Administration Department of Health, State of Hawaii

Kinau Hale Board Room, 1st Floor March 10, 2015 9:00 a.m. – 11:30 a.m.

Members Present: Arensdorf, M.D., Alfred; Crum, Louise; Daraban, Charlene; Durant, Mike; Koyanagi, M.D., Chad; Lyons, Frances;

Mansfield, Haaheo; Minami, Theresa; Park, Benjamin; Shiraki, Ph.D., Steve; Simms, Sandra; Vorsino, Psy.D.,

Marie; Wilcox, APRN, Noelani

Members Absent:

Members Excused: Calcagno, Sheila

Guests Present: Brandt, Ken; Collesano, Robert; Keir, Ph.D., Scott; Nakamura, Ph.D., Brad

Staff Present: Clarke, Judith; Cooper, Rei; Nazareno, Jocelyn; Pak, Sandra; Tom, Trina; Wise, Tracey

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ ACTIONS/CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
1. Call To Order	Ms. Mansfield, Chair, called the meeting to order at 9:13 a.m. Quorum was established.		H. Mansfield, Chair	
2. Review of Minutes	 Minutes for December 9, 2014 and February 10, 2015 were reviewed. Corrections to the minutes: Mr. Benjamin Park's last name does not have an "s". Mr. Durant motioned to approve both sets of minutes with the correction noted; Mr. Park seconded. 	Action: With no objections, a motion to approve both sets of minutes was carried unanimously.	State Council members	
3. Community Input	Mr. Collesano, Chair of the Maui Service Area Board (MSAB), reported that a parent of a homeless veteran attended the last board meeting and expressed dissatisfaction with getting appropriate mental health services for his son. The son has been living on the streets of Maui for several years.			

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4. Help Your Keiki Website - Child and Adolescent Mental Health Division (CAMHD	 Brad Nakamura, Ph.D., presented information on the CAMHD "Help Your Keiki Website." He noted that the website was developed by the CAMHD Evidence-Based Services Committee. Highlights of Dr. Nakamura's presentation: The website is overseen by an interdisciplinary committee, which involves Hawaii Families As Allies, Parent Partners, and individuals from the Special Parent Information Network (SPIN). The website was designed to provide parents with reliable and valid information about children's mental health. The website is structured into four (4) sections: Common problems: Parents are better able to identify their child's needs for mental services. What Works: Increases parents' knowledge of, and demand for, Evidence-Based Practices (EBPs). 			DATE DUE
	 Resources: Parents can find reliable information. Finding Help: Refers parents to find appropriate services to assist their child. Dr. Nakamura asked Council members for suggestions/recommendations to get the word out and to better advertise the website. 			
	 Council members offered the following ideas/suggestions: Contact Ms. Taba of the Hawaii Medical Association of Pediatrics; Provide information for sites, such as: Pre-school and after school programs at the YMCA/YWCA The National Alliance on Mental Illness (NAMI) and Mental Health America's web links The Public Housing Authority website Develop Public Service Announcements through Olelo for the public and private school system. Setup tables at Health Fairs; Apply for Grant funding; 			

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	 Utilize the County Service Area Boards and State Council members to spread the word; Utilize the State Suicide Prevention Task Force members; Share information with the Department of Health's Warm Lines; and, Ms. Foard, of the Department of Human Services Division of 			
	Vocational Rehabilitation, volunteered to distribute the "Help Your Keiki Website" brochure to her staff to get the word out to parents, community members, and other interested parties.			
5. Ohio Scales Presentation (CAMHD)	 Marie Vorsino, Psy.D., from the CAMHD Family Court Liaison Branch and member of the State Council, presented the Parent and Youth Assessment Forms of the Ohio Scales. She explained the reasons that the CAMHD chose these scales: Approximately 3-1/2 years ago, the CAMHD Outcome Assessment Work Group convened and reviewed several assessments that placed importance on the parent and child's voice. The CAMHD has been using the Child and Adolescent Functioning Assessment Scale (CAFAS) where care coordinators and therapists complete a Monthly Treatment Summary on the child. Prior to the final selection of the Ohio Scale, CAMHD piloted the scale within the Family Guidance Centers, and held focus group meetings with community members to share results of the pilots and to share validity comparisons between the Ohio and the CAFAS scales. CAMHD chose the Ohio Scale because it was quick and easy. Further, the Ohio Scale assesses problem severity, such as, the internalizing and externalizing behaviors, as well as, focusing on the positive functioning behaviors that the child exhibits. The scale was reduced from 48 to 24 items after the initial implementation. CAMHD encouraged care coordinators to read the scale to both the child and the parent when implementing the Ohio Scale for the first time. This was to encourage a dialog between the child, the parent, and the care coordinator. 	For information only.	M. Vorsino, Psy.D.	

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	Scott Keir, Ph.D. elaborated on the Youth and the Parent forms of the Ohio Scale and the Report Scenario. Dr. Keir explained that the use of the scale assists the coordinators to have discussion points when meeting with the child and parent, and he explained the significance of each form:	For information only.	S. Keir, Ph.D.	
	 The Ohio Scale Youth Form: If the child is above the green line (border line sample), this means the child is doing very well. If the child is in the red line (clinical sample), this means the child is getting close to the danger zone. Data results show that the number of problems exhibited by the child means the child is getting closer to the red line. 			
	The Ohio Scale Parent Form data shows what the parent thinks about the progress of the child.			
	Dr. Keir reiterated that the scales provoke good discussion on what's going well and what isn't working well for the child. The scales focus on moving the family toward solutions; looks at improvements, and the data shows progress or lack of progress based on the lines on the Report Scenario.			
	Dr. Keir noted that CAMHD's goal for 2015 is for the care coordinators to meet with each parent and child once per month to complete the assessment.			
6. Motion on Developing Testimony in Support of the AMHD 2015 Legislative Bills	 Motion on Developing Testimony in Support of the AMHD 2015 Legislative Bills. Chair Mansfield asked for permission from the Council to approve her, in partnership with Ms. Clarke, to develop testimony and submit to the legislative body either for, or against, any bills that concerns the Council. Ms. Simms moved that the Chair be authorized to provide testimony on behalf of the State Council on Mental Health for AMHD Legislative Bills. Ms. Wilcox seconded. 	Action: With no objections, the motion was carried unanimously.	H. Mansfield, Chair	

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7. Plans/Goals for 2015	Establish Permitted Interaction Group to Work on a State Council Website to Go Live within the next three (3) months of 2015. • This motion was tabled until the Governor's new information technology staff can approve the development of the website. Establish Permitted Interaction Group to Develop a Family Handbook, "What to Do, When I've Already Done Everything I Know to Do?" Council suggestions: • Invite Dr. Fridovich to a State Council meeting to give more information on what is being done about mental health crisis across the nation; • Invite the Honolulu Police Department's Psychologist, Michael Christopher, Ph.D., to provide information on crisis interventions and what is used nationally as far as best practice; • Invite the Maui Crisis Intervention Team (CIT) program to give a presentation; • Invite Steve Balcom to present on the AMHD Crisis Services; • Invite AMHD Providers who provide Crisis Mobile Outreach, to share data and provide information on crisis services. • Invite other counties to give presentations on how they handle mental health crisis in each county.	For information only.	H. Mansfield, Chair	
	 Questions posed: What kind of resources are there when it comes to mental health crisis? What are other states are doing? How is Hawaii different in comparison to the other states, not only resources but with active laws? How do other states address issues regarding mental health crises? 	Action: Council members to send additional questions for the presenters' response when they do their presentations. Members to send questions to J. Clarke.	SCMH members	

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	 Discussion on Setting Goals for 2015. Council members' recommended the following: Hold a State Council Retreat on big topics that the Council wants to accomplish, such as, goals. Request technical assistance from the Substance Abuse and Mental Health Services Administration (SAMHSA). After the information is gathered on mental health crises, the Council should develop next steps on what the Council hopes to accomplish. If there are financial constraints, the Council should set goals on the information gathered. 	For information only.		
8. Island Reports	 Hawaii Frances Lyons reported on the Hawaii Service Area Board's (SAB) activities: Tabled the updates on the Hawaii County Comprehensive Integrated Service Area Plan (CISAP) due to no quorum. Mr. Steve Balcom presented updates on the AMHD ACCESS Line. The Suicide Prevention Conference will be held in Kona at the Waikoloa Hotel, on April 30, 2015. The Big Island Substance Abuse Council Services have started for the past two months in Kona and are doing well. The Lokahi Treatment Services, with the Domestic Violence Program, are now drug testing for participants entering the domestic violence program. 	For information only.	F. Lyons	
	 Maui Dr. Arensdorf reported on issues that the Maui SAB entertained but with no formal actions taken due to a lack of quorum: Status of Hospital and loss of acute service for the Molokini Unit. Privatization of Maui Memorial Medical Center. Unique situations that are problematic statewide; for example, the situation regarding a parent of a homeless veteran expressing his concerns about his inability to get services for his veteran son who has been out on the streets for a number of years. 	For information only.	A. Arensdorf, M.D.	

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	 The Maui SAB continues to have informational meetings with public input. Several potential members have applied for membership; however, the MSAB is waiting for the Governor's approval of these individuals. 			
	 Oahu Cynthia Dang reported on the following: Due to a breakdown in communication, the Oahu SAB has been having difficulty organizing a meeting. The Oahu SAB planned to work on the following goals: Stigma connected with mental illness; How to better organize the Oahu CISAP; Look at sustainability skills – how to help consumers build a set of skills that help them stabilize and move forward once they are receiving services; and Increase services on the Leeward Coast, so the population in this area will have better access to mental health services. 	For information only.	C. Dang	
	 Kauai Rei Cooper, Branch Chief of the Kauai Community Mental Health Center, reported on behalf of S. Calcagno: Kauai SAB continues to have membership challenges similar to the other SABs, although they still hold informational meetings. Ms. Cooper requested guidance from the Council on how to get additional members to serve on the board. 	For information only.	R. Cooper	
9. Announcements	 The Suicide Prevention Conference is scheduled for April 30, 2015 in Kona at the Waikoloa Hotel. Two Mental Health First Aid Trainings will be held at the Suicide Prevention Conference in Kona. The Mental Health Awards is scheduled for May 12, 2015 at the Ala Moana Hotel. Tickets are available. 	For information only.		

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10. Future Agenda Items	 Develop a Permitted Interactive Group to research and propose a Bill to change the definition of "quorum." Updates on the AMHD ACCESS Line 			
11. Adjournment	The Council meeting adjourned at 11:20 a.m.			
Mail Outs	 State Council on Mental Health (SCMH) Agenda, March 10, 2015 SCMH Draft Minutes, December 9, 2014 and February 10, 2015 SCMH Attendance Log Help Your Keiki Website PowerPoint Handout – Brochure, Structure, Resources Ohio Mental Health Consumer Outcomes System: Youth Problem and Wellness Scales Ohio Mental Health Consumer Outcomes System: Youth Problem and Hopefulness Scales Hawaii Service Area Board Agenda and Minutes, December 23, 2014 Hawaii Advisory Commission on Drug Abuse and Controlled Substances February 24, 2015 Agenda and draft January 27, 2015 Minutes. 			

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