## STATE COUNCIL ON MENTAL HEALTH

Behavioral Health Administration Department of Health, State of Hawaii Keoni Ana Building, Conference Room 302 March 8, 2011 9:00 a.m. – 11:30 a.m.

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

Hansen, Donna; Harris, J.T.; Mansfield, Haaheo; Miyoshi, Sandra; Sandal, Candace; Shiraki, Ph.D., Steven; Wilcox,

APRN, Noelani; Young, Carol.

Members Absent: Kiliona, Ku'ulei

Members Excused: Boots, Jazmin; Kaneaiakala, Alva; Watters, Maile.

Guests Present: Yokote; Sharon

Staff Present: Clarke, Judith; Freitas, Troy; Granda, M.D, Chia; Hiraga-Nuccio, Madeleine; Nazareno, Jocelyn; Pak, Sandra;

Sheehan, M.D., William P.; Wise, Tracey

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ACTIONS/ CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
1. Call To Order	Chair called the meeting to order at 9:15 a.m. and quorum was established.		Carol Young	
2. Review of Minutes	The minutes for February 8, 2011 were reviewed. Mr. Durant motioned to approve the minutes with corrections noted. The motion was seconded by Ms. Mansfield.	Action Minutes approved with corrections.	SCMH Members	
	• In the Employment section of the AMHD Clubhouse Report, on page 2, Supportive Employment to read, <u>Supported</u> Employment.			
3. Community Input	Ms. Yokote commented that in order to obtain community input, agenda items should be more detailed so that community members can better respond. She stated that she will be sharing her concerns with the Office of Information Practices and the Attorney General.			
4. CAMHD Report	<ul> <li>Ms. Daraban reported on the Annual Youth Conference:</li> <li>170 individuals attended, which included youth and families from the Neighbor Islands.</li> <li>The youth had their own breakout session – Of note, there was a breakout session on Slam Poetry which impacted many families emotionally.</li> </ul>	For information only.		

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	• Key note speaker was a Principal from Windward side of Oahu, who shared her experiences and challenges of not being able to read and how she overcame her challenges.	Action Chair requested CAMHD submit a monthly report in writing.	Dr. Michels	4/12/11
5. AMHD Report	<ul> <li>Dr. Sheehan, AMHD Chief, reported on the following:</li> <li>Mr. Greg Payton was named the new Deputy Director of Health for the Behavioral Health Administration.</li> <li>Ms. Deliana Fuddy is the Interim Director of Health.</li> <li>Legislative Session: Bills continue to make their way through the committees of the Legislature which affects the Adult Mental Health Division.</li> <li>The Administration package includes several bills designed to help consumers spend less time in the custody of the Department and less time under the legal jurisdiction of the courts.</li> <li>The goal to post the RFP for Community Based Case Management on February 28, 2011 was not met; however, AMHD continues to work on getting the RFP posted as soon as possible.</li> <li>Patient Satisfaction Report for Fiscal Year 2010 was distributed – No comments from Council.</li> <li>A series of Community Forums on the changes in the AMHD system over the last 3 years will occur throughout the State for public input. Schedule is as follows:</li> <li>Oahu – March 9, 2011, 9:30 a.m. to 11:00 a.m. at the Keoni Ana Bldg. and another is being arranged for Oahu.</li> <li>Kaua'i – March 16, 2011</li> <li>Maui – April 8, 2011</li> <li>Kona – April 13, 2011</li> <li>Kona – April 15, 2011.</li> <li>Council members posed questions as well as made comments in response to the AMHD Report.</li> </ul>	For information only.		
	<ul> <li>What is CORE?</li> <li>Have you heard about SB597, which allows qualified psychologists limited authority to prescribe psychotropic medications?</li> <li>AMHD needs to look at rural housing first, and evaluate how case</li> </ul>			
	<ul> <li>management is operationalized.</li> <li>The challenge for AMHD has been on living within its means and evaluating the integration of services while getting good value.</li> </ul>			

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	<ul> <li>Dr. Sheehan responded that CORE (Center for Operational and Regulatory Excellence) was tied to CAMHD, AMHD and ADAD. The Governor and Director Fuddy are re-evaluating the project. The Third Party Administrator (TPA) contract has been cancelled, and monies allotted to the TPA to correct billing and claims challenges in AMHD will go to AMHD to fix the problem internally through its information system.</li> <li>In response to SB597, Dr. Sheehan stated that he is aware of the bill, but DOH has not submitted testimony.</li> <li>Dr. Sheehan shared insights on the type of case management people believe AMHD should have. He noted that some individuals believe case management should be linkage, referral, monitoring and follow up, while others think that case management should be rehabilitation, where the emphasis is on life skills, problem solving, things people need in order to get rehabilitated. He continued that in the past, AMHD focused on rehabilitative services with an amount of variability, but experienced difficulty controlling the quantity and quality. Currently, AMHD will remain with implementing the rehabilitative model of case management.</li> <li>AMHD is also evaluating the possibility of including an acuity scale (a modified Denver acuity scale) in the new RFP.</li> <li>There's a 10% vacancy rate for AMHD's housing inventory due to consumers not wanting to live where the houses are located, or they don't want to follow housing rules.</li> </ul>			
6. Insurance Issues with Private Providers	<ul> <li>Mr. Gonzalez discussed his handout to the Council regarding the treatment by his former Psychiatrist. He asked for suggestions on how to prevent other consumers with private insurance from experiencing a similar situation.</li> <li>Council members made suggestions and comments: <ul> <li>There was a confidentiality breach (HIPAA) when the psychiatrist left a message on Mr. Gonzalez' home phone.</li> <li>Physician should be taken to the Board of Medicine for malpractice.</li> <li>A grievance can be filed with the Regulated Consumers Affair (RCO) and a letter written to the Hawaii Psychiatric Medical Association for the complaint.</li> <li>It was suggested that Mr. Gonzalez call NAMI and discuss the specifics of his case with the Executive Director.</li> <li>Mr. Gonzalez was also encouraged to contact the American Board of Psychiatry or the Hawai'i Disability Rights Center for assistance.</li> </ul> </li></ul>	For information only.		

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	Council Chair noted that a letter could not be written on Mr. Gonzalez' behalf because the Council cannot get involved in the specifics of his case, but could only investigate the broader issue.			
7. Island Reports	Oahu No report			
	Hawaii  No report			
	<ul> <li>Maui</li> <li>Mr. Gonzalez reported on the Maui SAB meeting:</li> <li>The Service Area Administrator facilitated an orientation for members on the SAB Bylaws, Sunshine Law and the Robert Rules of Order.</li> <li>Members discussed the changes in Med-Quest insurance regarding Aloha Care and HMSA.</li> <li>Members discussed recruiting strategies to attract new members.</li> </ul>	For information only.		
	<ul> <li>Kaua'i</li> <li>Ms. Sandal reported:</li> <li>Staff from Mental Health Kokua, Care Hawaii, and Steadfast Housing shared information with members of the Board.</li> <li>St. Michael's Rep-Payee contract will end March 31<sup>st</sup>. Approximately 30 consumers use this program and there are no options on Kauai to take over this program.</li> <li>Ms. Sandal commented that many consumers are highly qualified to oversee this program. She noted that they just need support and encouragement.</li> <li>It was shared that with the new Trauma Informed Care Grant, Peer Specialists will be trained and could be considered to run the program.</li> <li>Ms. Wilcox commented that there is a possibility to get a consumer-supported business through the Micro Enterprise program which Dr. Suarez of AMHD oversees.</li> </ul>	For information only.		
8. State Council Vision Statement	Ms. Haaheo Mansfield read the various Vision Statements suggested by the Permitted Interaction Group.  • One suggestion was to add the word "advocate" to Suggestion 'C.'  • Another suggestion was to add "of all ages" to Suggestion 'A'			

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8. State Council Vision Statement (cont'd)	<ul> <li>Majority of members liked Suggestion 'A.'</li> <li>Dr. Buffenstein moved that the Council adopt Suggestion 'A' as its Vision Statement. Mr. Hack restated Dr. Buffenstein's motion that the State Council adopt Suggestion 'A' and that a quorum approve the Vision Statement. Mr. Durant seconded the motion.</li> <li>Suggestion A: The Vision of the State Council on Mental Health is for a Hawai'i where people of all ages with mental health challenges can enjoy recovery in the community of their choice.</li> <li>Results were: Kaua'i – yes, Moloka'i – yes, Maui – no answer, Oahu – 10 yes.</li> <li>Ms. Hansen expressed her dissatisfaction with the fact that she was not included in the voting due to technical difficulties with the Maui videoconference connection.</li> <li>Council Chair apologized on behalf of the Council.</li> </ul>	Action Motion passed.		
9. Continuity of Care Challenges for Consumers Transitioning to Providers in the Community	<ul> <li>Ms. Sandal reported on behalf of this Permitted Interaction Group:</li> <li>The group discussed the topic on February 28<sup>th</sup> via teleconference. Members were: Rick DeTucci, Troy Freitas, Trina Tom, Carol Young, Noe Wilcox, Judith Clarke and Candace Sandal.</li> <li>The discussion centered on transition planning to ensure the consumer is successful in the community after leaving the Community Mental Health Center. The group acknowledged that there is a shortage of psychiatrists statewide.</li> <li>A few comments were:         <ul> <li>Broaden the pool of providers that can work on mental health and physical health.</li> <li>Need to look at developing other resources in the community such as license therapeutic personnel, e.g. LCSW, APRN.</li> <li>Consumers need to have confidence in the providers they choose.</li> <li>Consumers are looking for choices in selecting their providers not necessarily the type of plan.</li> <li>Explore shared resources between the Federal Qualified Community Health Centers and the Community Mental Health Centers for AMHD eligible consumers who are already receiving their medical care at the</li> </ul> </li> </ul>			

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	Community Mental Health Centers (CMHC) on Maui and Kauai County. The CMHC would provide psychiatric care and community clinics would provide the medical care.			
	<ul> <li>Ms. Sandal clarified that the problem is not QUEST, but appears to be a consumer not being able to find a psychiatrist due to the shortage of these professionals.</li> <li>Ms. Young noted that she hopes the Council will approve the exploration of developing a pilot project on Maui and Kauai because the transition needs of the consumer and the provider needs; seem to be overwhelming on the Neighbor Islands.</li> <li>Ms. Sandal moved that the Permitted Interaction Group be allowed to explore shared resources between the Federal Qualified Community Health Care Centers and the Community Mental Health Centers for AMHD eligible consumers who are already receiving their medical care at the CMHC on Maui and Kauai County. Mr. Gonzalez seconded the motion.</li> </ul>			
	<ul> <li>Results were: Maui – yes; Moloka`i – yes; Kaua`i – yes; O`ahu – 10 yes.</li> <li>Dr. Buffenstein did not vote because he did not understand the implications of the motion.</li> <li>The Permitted Interaction Group will meet again and return to the Council</li> </ul>	Action Motion passed.		
	with their progress.			
10. Discussion on State Council Priorities for 2011	<ul> <li>Discussion on State Council Priorities for 2011</li> <li>State Council Retreat suggestions:</li> <li>Retreat is valuable and should be held once a year.</li> <li>Bring in local staff to facilitate the retreat. Utilize what we have here locally.</li> <li>As a follow-up to the last retreat, we should try to maximize the federally funded opportunities for the State Council. The Council should utilize all opportunities for the enrichment that may be national in scope.</li> <li>Retreat to be held June 14-15, 2011.</li> <li>Ms. Young will write to the Center for Mental Health Services (Washington, D.C.) to request the NAMHPAC's staff return.</li> </ul>	For information only.		

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11. Announcement	<ul> <li>NAMI is having a program on March 26, 2011 at the Mission Memorial Auditorium. Ms. Clarke to email Council the announcement. Must RSVP by Friday, March 11, 2011.</li> <li>The MHT-SIG is co-sponsoring, Mental Health Awareness Day at the Capitol on March 30, 2011 from 11:00 a.m. to 1:30 p.m. Vendor Participation Forms are available if anyone is interested in reserving a</li> </ul>	For information only.		
	<ul> <li>display table.</li> <li>The 2011 Pacific Rim International Conference (PACRIM) on Disabilities is having a forum for mental health consumers on Tuesday, April 19, 2011, from 12:00 p.m. to 4:00 at the Hawaii Convention Center.</li> </ul>			
12. Future Agenda Items	<ul> <li>Trauma Informed Care Initiative Program</li> <li>Hawaii State Hosptial</li> <li>Community Re-Entry Program</li> <li>Transition from Youth to Adult</li> </ul>			
13. Adjournment	The meeting adjourned at 11:20 a.m.			
Mail Outs	<ul> <li>SCMH March 8, 2011 Agenda</li> <li>Draft SCMH February 8, 2011 Minutes</li> <li>SCMH Attendance Log</li> <li>AMHD Update for State Council on Mental Health</li> <li>Draft SCMH Vision Suggestions</li> <li>Insurance Issues with Private Provider</li> <li>Kaua`i Service Area Board January 27, 2011 Agenda and Minutes</li> </ul>			

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