STATE COUNCIL ON MENTAL HEALTH

Behavioral Health Administration Department of Health, State of Hawaii

Kinau Hale Board Room, 1st Floor March 8, 2016, 9:00 a.m. – 11:30 a.m.

Members Present: Calcagno, Sheila; Crum, Louise; Dang, Cynthia; Durant, Mike; Foard, Susan; Kaneshiro, Iris; Lyons, Frances; Minami,

Theresa; Rocchio, Christopher; Shimabukuro, Ph.D., Scott; Vorsino, Psy.D., Marie.

Members Absent:

Members Excused: Arensdorf, M.D. Alfred; Daraban, Charlene; Mansfield, Haaheo; Koyanagi, M.D., Chad; Simms, Sandra; Wilcox,

Wilcox, APRN, Noelani.

Guests Present: Christopher, Ph.D., Michael; Collesano, Robert; Filibeck, Karla, Shannessy, Mitchell.

Clarke, Judith; Cooper, Rei; Fallin, Lynn; Mark; Hiraga-Nuccio, Madeleine; Michels, M.D., Stan; Nazareno, Jocelyn;

Staff Present: Subica, Crystal; Tom, Trina.

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ACTIONS /CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
1. Call To Order	Dr. Marie Vorsino, 1st Vice Chair, called the meeting to order at 9:14 am.		M. Vorsino, 1 st Vice Chair	
	Three new Council members who were appointed by the Governor and			
	 confirmed by the Senate were introduced: Ms. Iris Kaneshiro – Hawaii Certified Peer Specialist 			
	Mr. Christopher Rocchio – Social Worker			
	 Dr. Scott Shimabukuro – Child and Adolescent Mental Health Division (CAMHD) 			
2. Review of Minutes	The minutes for February 9, 2016 were reviewed and approved by Council members. Mr. Durant moved to approve the minutes and Ms. Susan Foard seconded.	Action: With no objections, a motion to approve the February minutes was carried unanimously.		
3. Community Input	 Deputy Director Lynn Fallin updated the Council on the Department of Health (DOH) Behavioral Administration's activities. Currently before the Legislature is a \$160.5 million dollars in the administration budget for a new Hawaii State Hospital (HSH). The DOH is partnering with Avalon Healthcare Inc. to develop a long term facility on the grounds of HSH. 	For information only.	L. Fallin	

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	 The focus is on revitalizing community-based systems: Make sure the Community Mental Health Centers (CMHCs) are fully staffed. The CMHCs are undergoing re-organization. A Request for Proposal (RFP) was issued for a secure diversion program. The DOH is researching ways to decrease the census at HSH such as placing more individuals in community-based settings. 			
4. Child and Adolescent Mental Health Division (CAMHD) Report	 Dr. Stan Michels reported on the following CAMHD activities: CAMHD initiated a bill this legislative session that lowers the age of consent for minors who are seeking mental health services without parental consent. The age of consent was changed from 12 years of age to 14 to be consistent with the statutes relating to substance abuse treatment and birth control. A major initiative for CAMHD is receiving federal monies to upgrade the data systems between Medicaid and providers. The goals of the project are to: Replace the process with streamlined electronic processes to increase efficiency and decrease errors and delays. Improve data management and usage across programs. Increase reliance on data for clinical, program and financial decision-making. Develop a more collaborative effort to view patient records across programs and agencies. Analyze current workflows and streamline those for consistency throughout the systems. CAMHD has almost completed a comprehensive business process analysis for this initiative. Share data, outcomes and dispositions with CAMHD and MedQUEST for better documentation of care and clinical decision-making. As a result of this system, CAMHD's services will be more robust for auditing purposes, and audits will be less labor intensive. This will also strengthen CAMHD's role as the carve-out provider for high-end services for the Medicaid population. CAMHD's yearly review of their data systems showed: Decreased length of stay for youth due to better clinical management and oversight; 	For information only.	S. Michels	

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	 Served more youth and adolescents compared to two (2) years ago and for the same amount of money; and. Acquired more youth and adolescents faster through the court system, as a result of more conscientious clinical oversight than a few years ago. CAMHD plans to focus on provider reimbursements during the next legislative session. 			
5. Progress Report on SB2007 (State Council) and SB2008 (Service Area Boards)	Ms. Clarke provided an update on SB2007 and SB2008. She noted that the Senate Ways and Means Committee passed bills passed with the added language from Senator Ihara: "Notwithstanding part 1 of Chapter 92, the number of members of the council/board shall be the number of members in office immediately before a meeting begins." Both bills are now crossing over to the House Committees.	For information only.	J. Clarke	
6. Update on Setting Up a Table at the 13 th International Hawaii Summit IVAT (Institute on Violence, Abuse and Trauma) Conference, March 30-31 for Recruitment	 Dr. Vorsino discussed the logistical issues that arose in setting up a table at the IVAT Conference. Issues: The submission for a request to setup a table at the conference is due tomorrow (3/9/16). Cost per table and one chair is \$150.00 for the entire conference. The table needs to be staffed at all times with current brochures/handouts. Paperwork that must be submitted to the Comptroller, via procurement, will not make the deadline. Suggestions: Prepare for the 2017 IVAT Conference, which will allow for careful planning. Update the State Council brochure and handouts to share dynamic products. Update the Council's Strategic Plan to share with the community. Develop an annual calendar with a list of conferences/workshops in the State that focuses on mental health. This will allow Council members to decide on participation. Mr. Durant motioned that the Council will update the Strategic Plan and	Action: Council passed a motion to update the Strategic Plan and participate in local conferences.	M. Vorsino, 1 st Vice Chair M. Vorsino, 1 st Vice Chair	4/12/16

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	plan for involvement in community activities. Ms. Crum seconded the motion and all members voted in favor. Motion approved.			
7. Advocacy Efforts in Working with Emergency Rooms in Honolulu	Michael Christopher, Ph.D., Honolulu Police Department (HPD) Psychologist, presented the following information: Dr. Christopher briefly summarized the Honolulu Emergency Psychological Services and Jail Diversion Program (HEPSJDP). He stated that the focus of the program is on training police officers to recognize, respond, and de-escalate different types of situations where individuals may have a mental health challenge. Police officers are trained to broaden their definitions of what crisis means to better address individuals who are experiencing a crisis situation. Policy psychologists received 3,000 calls last year, and they assisted approximately 7,000 individuals who have mental illness and were arrested. Dr. Vorsino asked, "Is there anything that the Council could do to advocate for, or support, the efforts that the HEPSJDP is trying to accomplish in working with emergency personnel in Honolulu?" Dr. Christopher responded that a bill was submitted this legislative session to amend the law for police officers to hold a person for 48-hours if that person is imminently a harm to themselves or others. The amendment to the law would have removed the word "imminently" and would have changed the criteria to be more in line with the rest of the nation. This amendment would also have given police officers more flexibility in assisting these individuals. Additionally, if the bill had passed: (1) it would have made it easier to get a person admitted into the hospital, and (2) it would have raised the standard for hospitals to treat individuals with mental illness before they are released from the hospital. In responding to how the Council could be more involved, Dr. Christopher disclosed that the information he shared is his own, and not recommendations from HPD. He stated the following: • There is a need for a mental health crisis center similar to the Queen's Medical Center's (QMC) Living Room Model which is being developed. The crisis center is a place for individuals who have mental health challenges to walk	For information only.	M. Christopher, Ph.D.	

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	 substance abuse challenges. There is a need for beds for individuals who are waiting for outpatient treatment services. For individuals living with schizophrenia, there is no public hospital to go to for mental health services; the only way to get into the HSH is to commit a crime. As a result, QMC is educating emergency department physicians on psychiatric symptoms, agitation and stress as part of the medical symptomology. There is a need for a better evaluation system which would prevent someone from committing suicide or preventing someone from committing a crime once they are released from the hospital. 			
8. Island Reports	<u>Hawaii Island</u> – no report	For information only.		
	Oahu – Ms. Dang reported that the Oahu Service Area Board (SAB) will hold an informational Open House on March 21, 2016 for recruitment purposes.		C. Dang	
	 Maui – Mr. Robert Collesano, Chair of the Maui SAB, reported on behalf of Dr. Arensdorf: Six names were submitted for possible membership. The SAB is assisting candidates to complete their applications on-line. A Suicide Prevention Workshop was held in February. There will be a weeklong Crisis Intervention Training for Police Officers starting Monday, March 7, 2016. Mental Health America recently held a training for new police recruits which included a Mental Health First Aid training. A training on Trauma will be held on April 1, 2016. 		R. Collesano	
	Mr. Collesano stated that he will be able to send a list of trainings for Maui County for the Council's calendar. Kauai – Ms. Calcagno reported that the Kauai SAB submitted a list of five (5) names for consideration for membership. Ms. Hiraga-Nuccio gave a report on the number of vacancies that the Kauai Family Guidance is recruiting to fill.		S. Calcagno	

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9. Announcements	Dr. Vorsino requested that the Council's Strategic Plan be placed on the agenda as a monthly or every other month standing agenda item, so that members can see the progress and discuss items in the plan.	Action: Staff to place the Strategic Plan on the monthly agenda.	Staff	4/12/16
10. Future Agenda Items	 Transition of Youth to Adult Mental Health Services. Insurance Commissioner will attend in April to discuss Parity and the Impact on Mental Health. The Maui Crisis Intervention Team (CIT) presentation in May 2016. Invite an Alcohol and Drug Abuse Division representative to speak on substance abuse initiatives in the community. Invite a representative from the YO Project to discuss housing issues for youth and adolescents. 			
11. Adjournment	The State Council on Mental Health meeting adjourned at 11:23 a.m.			
Electronic Mail Sent to Members	 State Council on Mental Health Agenda for March 8, 2016. State Council Attendance Log'16. State Council Draft Minutes for February 9, 2016. Child and Adolescent Mental Health Report. Hawaii Advisory Commission on Drug Abuse and Controlled Substances Agenda for February 23, 2016, and Draft Minutes for November 24, 2015, October 27, 2015 and September 22, 2015. 			

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