

REPORT TO THE TWENTY-EIGHTH LEGISLATURE
STATE OF HAWAII
2015

PURSUANT TO SECTION 334-10(e), HAWAII REVISED STATUTES,
REQUIRING THE STATE COUNCIL ON MENTAL HEALTH TO SUBMIT AN ANNUAL
REPORT TO THE GOVERNOR AND THE LEGISLATURE ON
IMPLEMENTATION OF THE STATE PLAN

PREPARED BY:
STATE OF HAWAII
DEPARTMENT OF HEALTH
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HAWAII STATE COUNCIL ON MENTAL HEALTH ANNUAL REPORT TO THE GOVERNOR AND LEGISLATURE

The role of the State Council on Mental Health (“Council”) is to advise, monitor, review and evaluate the provision of mental health services in the state. The Council is an active advocate that provides a voice for children, youth, adults, and their families on behavioral health issues. It’s membership is comprised of twenty-one dedicated volunteers representing consumers, family members, community members and state employees who give their time, energy, expertise and experience to improve and advocate for a system of care that provides quality mental health service to the people of Hawaii.

The Council’s mission is to advocate for a Hawaii where all persons affected by mental illness can access treatment and support necessary to live a full life in the community of their choice. The Council’s vision is for a Hawaii where people of all ages with mental health challenges can enjoy recovery in the community of their choice. Further, the Council’s directives include:

- Serving as an advocate for adults diagnosed with a severe mental illness, for children and youth diagnosed with serious emotional disturbance;
- Advising the state mental health authority on issues of concern, policies and programs;
- Providing guidance to the mental health authority in the development and implementation of the state mental health systems;
- Monitoring, reviewing and evaluating the allocation and adequacy of mental health services within the state.

The Council is legislatively mandated to provide an annual report to the Governor and the Legislature on the implementation of the statewide comprehensive integrated services plan (“Plan”). Section 334-10 (3), Hawaii Revised Statutes (HRS) states that, “The Council shall prepare and submit an annual report to the governor and the legislature on implementation of the statewide comprehensive integrated service plan (SCISP). The report presented to the legislature shall be submitted at least twenty days prior to the convening of each regular session.”

This report provides brief highlights on the review and implementation of the SCISP while collaborating with the Child and Adolescent Mental Health Division (CAMHD) and the Adult Mental Health Division (AMHD) to provide quality mental health services to individuals living with a mental illness.

Comments to the SCISP Review:

An Ad Hoc Permitted Interaction Group reviewed and commented on the Community Mental Health Block Grant (MHBG) Application. The group comments are listed below:

- The SCISP should be strategic in nature. It should outline plans and goals and strategies that are central and important to the overall missions of both organizations. The plans, goals and strategies, if successfully accomplished, should result in significant measurable improvement affecting core products or services for consumers. This criterion was not identified in the SCISP reported by both divisions.

- Throughout the Plan, there are mentions of challenges with staffing levels for the CAMHD, however, aside from CAMHD's administrative section, numbers of authorized positions and numbers of vacancies are not given. There are several sections where this information would be appropriate.
- The CAMHD's four priorities, goals, strategies and indicators do not meet the criterion for effective strategic goals, and do not create a framework for evaluating, a year from now, whether CAMHD's allocation of resources and organizational effectiveness reflect improved products or services to children and adolescents.
- More information could have been cited in the Plan about AMHD's housing issues. For example, not having enough bed space or appropriate placement in the community not only increases homelessness, but impacts the re-entry process of incarceration to community and hospitalization to community. This also lengthens stays at the Hawaii State Hospital and the Oahu Community Correctional Center.
- Two strategic goals that should be in the AMHD's plan that addresses current and continuing critical needs are 1) a plan to systematically reduce the census of the HSH to its budgeted number of beds, perhaps over three years; and 2) a plan to complete the AMHD reorganization and to fill a certain number or percentage of vacancies by a year from now.

The Council continues to collaborate and advise the CAMHD and the AMHD through committee work, presentations from both administrators and involvement in the strategic planning effort of both Divisions, which focused on maximizing federal dollars, integration of health information, while continuing to improve quality of care.

The Council's monthly agenda allowed time for networking and sharing ideas with each Division while listening to Division-wide updates. Monthly updates on the implementation of the SCISP at the county-level were presented by each Service Area Board's representative who sits on the Council. Unfortunately, the implementation at two of the Service Area Boards has stalled due to a lack of quorum. With this in mind, through strong recruiting efforts via word-of-mouth and newspaper advertisements, several community members are awaiting Senate confirmation to participate on these Boards.

To improve communications among Council members and the community at large, an ad hoc committee researched and selected a vendor to develop a user-friendly website for information dissemination, communication flow, and facilitation of input from the community. Implementation of this website is slated for 2015. Additionally, the Council increased the use video-conferencing which increased community participation at the meetings while decreasing travel costs.

During the 2014 Hawaii Legislative Session, the Council was involved in closely monitoring legislative mental health initiatives. The bills were:

- SB2851/HB2301 – Forensic Mental Health
- SB2868/HB2318 – Records for Forensic Examinations
- SB2869/HB2319 – Privacy of Health Care Information

For the CAMHD, bills monitored were:

- SB2449 – Project Kealahou
- SB3033/HB2490 – Juvenile Justice

The Council supported and provided testimony on the Juvenile Justice bill and was very pleased that the bill passed. Other bills for both children and adults were monitored and both Divisions provided status updates on these bills.

With the transition of approximately 2,000 consumers from the AMHD to their QUEST Expanded Health Plans in September 2013, the Council carefully monitored the implementation of this transition. Several presentations were initiated by the AMHD and the Department of Human Services to assure the Council that safeguards were put in place for a smooth transition. To date, the Council considers the transition a success.

For FY2014, the Council also focused on improving community education about mental health with special emphasis on the implementation of the Assisted Community Treatment (ACT) Program and the Crisis Intervention Teams statewide. An advocate for the ACT program not only educated the Council on the new law, but also encouraged the Council to advocate for its implementation and monitor the impact on the community. Further, the Council worked to promote and better understand crisis interventions statewide for youth and adults. Presentations from each crisis team on each island including law enforcement involvement with these teams helped the Council assess improvements and identify service gaps.

Future Plans:

In conclusion, the Council continues to work on monitoring the services for individuals living with mental illness. For 2015, the Council plans to expand its outreach to the rural areas allowing for increased input from consumers and family members. For example, the Council will facilitate getting more consumers, who are in recovery, to participate on the Council and brainstorm how to attract more consumers in advocacy work.

The Council will also look to establishing our website, increasing access to information about the Council and its advocacy for families and consumers. The website will also serve as a portal for the public to give direct input, inform policy discussions and learn about what's going on in child and adult mental health in our state and in the nation.

We look forward to the coming year and to the 2015 legislative season. Our overall goal is to continue our advocacy efforts on behalf of those who struggle to balance their mental health with the demands of daily living. We celebrate their courage and the courage of those who continue to stand by them.