STATE OF HAWAII **DEPARTMENT OF HEALTH** P. O. BOX 3378

HONOLULU, HI 96801-3378

In reply, please refer to:

January 2, 2018

The Honorable Ronald D. Kouchi, President and Members of the Senate Twenty-Ninth State Legislature State Capitol, Room 409 Honolulu, Hawaii 96813

The Honorable Scott K. Saiki, Speaker and Members of the House of Representatives Twenty-Ninth State Legislature State Capitol, Room 431 Honolulu, Hawaii 96813

Dear President Kouchi, Speaker Saiki, and Members of the Legislature:

For your information and consideration, I am transmitting a copy of the

State Council on Mental Health Annual Report on Implementation of the State Plan §334-10e, Hawaii Revised Statutes(HRS). In accordance with Section 93-16, HRS, I am also informing you that the report may be viewed electronically at:

http://health.hawaii.gov/opppd/department-of-health-reports-to-2018-legislature/

Sincerely,

VIRGINIA PRESSLER

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Director of Health

Enc.

Senate C:

House

Legislative Reference Bureau SOH Library System (7 copies)

University of Hawaii

REPORT TO THE TWENTY-NINTH LEGISLATURE STATE OF HAWAII 2018

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 DECEMBER 2017

HAWAII STATE COUNCIL ON MENTAL HEALTH ANNUAL REPORT TO THE GOVERNOR AND LEGISLATURE

The State Council on Mental Health ("Council") is an active, advocacy group providing a voice for children, youth, adults, and their families on behavioral health issues. Its membership is comprised of twenty-one dedicated volunteers representing consumers, family members, providers, 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 mission of the Council 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 vision of the Council is for a Hawaii where people of all ages with mental health challenges can enjoy recovery in the community of their choice. Further, as defined by both state and federal law, the purpose of the Council is to:

- Serve as an advocate for adults diagnosed with a severe mental illness, for children and youth diagnosed with serious emotional disturbance;
- Advise the state mental health authority on issues of concern, policies, and programs;
- Provide guidance to the state mental health authority on the development and implementation of the state mental health system's plans; and
- Monitor, review, and evaluate the allocations and adequacy of mental health services within the state on an ongoing basis.

The mission and vision of the Council guides its evaluation of Hawaii's mental health care through presentations from key community stakeholders, and reports from the Child and Adolescent Mental Health Division (CAMHD) and the Adult Mental Health Division (AMHD).

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. The report presented to the legislature shall be submitted at least twenty days prior to the convening of each regular session."

The Council's Response to Review the FY 2017 State Plan

The State Council on Mental Health members reviewed the FY2017 Behavioral Health Report (Statewide Comprehensive Integrated Service Plan) for the CAMHD and AMHD. In general, the layout of the report was user friendly and provided concise updates for each performance indicator with progress updates provided. Both divisions indicated achievement for several of the progress indicators and stated the reasons for the indicators that were not achieved. The progress indicators that were not achieved

were either based on lack of funding, or feasibility of the specific activity during the fiscal year.

In addition, we have the following more specific comments about the report as follows:

- The First Episode Psychosis Program has been able to lay a strong foundation in the community in treating young people who are experiencing first episode psychosis symptoms. They are operating as a clinic, and plans for 2018 include incorporating group therapy and primary care coordination for side effect management in their already full provision of service types. This level of intervention is critical for young people and families who are experiencing the challenges associated with early onset psychosis during adolescence which can reduce the negative impact of symptoms on daily functioning.
- Training staff and contracted providers is critical to the delivery of services to families and children in our community. The CAMHD achieved their goal of providing an annual training to staff this fiscal year. It would be helpful to know the topics of trainings that were provided to service providers.
- The AMHD made great strides in increasing rate of employment for persons with the serious mentally ill individuals this fiscal year. At this rate, it appears they will be on track to achieve their goal of 61.6% by 2020.
- It is vital to the health of our state to assure that individuals with mental health issues receive the mental health care that they need. With the change in the population of consumers that AMHD serves uninsured, underinsured, court-ordered the transition and decrease in the population definitely had an impact on mental health care for persons eighteen years and older. This transition of populations served was not well communicated to communities so that alternate methods of care could be accessed. As the target to increase the number of individuals living with mental illness to become eligible for mental health services is no longer feasible with the current populations served, an indicator to replace that may be to educate the community on where to access mental health care.
- Hawaii's population of homeless persons struggle with a variety of issues –
 substance use, mental illness, domestic violence, and debilitating physical health
 problems it is promising to note the strides that have been made in delivery of
 care to the consumers who are forced to live on the streets. Continued
 collaboration is essential at every level of state government, providers, the faithbased community, etc. to ensure the eventual elimination of homelessness in the
 State of Hawaii.

Council Activities for FY 2017-FY 2018

During fiscal year 2017-2018, the Council accomplished several activities under the strategic plan target areas developed in 2016. Additionally, we updated the Council's strategic plan for FY 2018-2019 to reflect initiatives that we believe are important to address as advocates for consumers with mental illness.

During 2016 and 2017, we were able to accomplish the following initiatives identified in our strategic plan:

- Gathered more information about the criminalization of mental illness in Hawaii by inviting the Honolulu Police Psychologist, Maui Crisis Team, various service providers, and CAMHD to discuss their perspective on this problem area in our community.
- Gathered more information about the Parity Laws in our state.
- Presented bills to 2016 and 2017 Legislative Sessions to adjust the definition of quorum for the Council to increase the number of opportunities that we achieve quorum.
- Gathered information and started the process to develop a SCMH website.
- Wrote a letter to the editor in reaction to a story in the Honolulu Advertiser that stigmatized mental illness and made a strong correlative and inaccurate connection between criminal activity and mental illness.

Recently we updated our strategic plan and will work to complete activities related to the following areas:

- Develop a fully functional State Council on Mental Health website;
- Develop a process to identify, review, and respond to legislative bills related to mental illness and substance use so that we can advocate for consumer rights more effectively.
- Recruit and retain State Council and Service Area Board members to become fully staffed.
- Invite experts in the field of sex trafficking to increase our knowledge related to this critical issue.
- Continue to work to de-stigmatize mental illness and access to services in our state.

We appreciate the opportunity to review this year's Statewide Comprehensive Integrated Service Plan report. It was informative, educational, and promising in the achievement of several critical issues that are essential to the functioning of persons with mental illness, services provided at the community level, and the ultimate goal of eliminating homelessness in the State of Hawaii.