

# KANSAS MENTAL HEALTH COALITION

*Speaking with one voice to meet critical needs of people with mental illness.*

## Minutes

### August 24, 2016 Monthly Meeting

Valeo Behavioral Health Center - 330 SW Oakley, Topeka, KS - Basement Conference Room

(teleconference access 1-877-278-8686, enter 982797 use codes: \*7 mute / \*9 unmute)

Meeting room wi-fi: Guest@caccess

#### Introductions and sign-in sheet

Susan Lewis, President

Susan Crain Lewis, President

Rick Cagan, NAMI KS

Amy Campbell

Sky Westerlund, NASW, Kansas

Lynn Lemke, Cornerstones

Wes Cole, GBHSPC

Steve Christenberry, FSGC

Bill Persinger, Valeo BHC

Ken Kerle, CIT

Nick Reinecker

Dave Ranney

Mike Burgess, Disability Rights Center

Andy Brown, Headquarters

Kyle Kessler, ACMHCK

Jane Rhys

Heather Elliott, ACMHCK

Susanna Honaker

Chad Benhardt, Cenpatico

Megan Cizek, Marillac / Cornerstones of Care

#### On the phone

Steve Feinstein

Marcia Epstein

Lesla Sublett, Bleeding Kansas Advocates

Andrew McCarthy, SIDE

Carol Manning

Mary Ellen Conlee

Patricia Darland, ComCare

#### Guests

Angela DeRocha, KDADS

Andy Marso, KHI News Service

**Financial Report** Andy Brown, Treasurer Current balance is just sufficient to complete the year, thanks to the payments from the community mental health centers, but does not meet our revenue goal. The revenue goal for the current budget will still require new members, or we will need to realign the dues structure for current members. The only options for reducing expenditures are the conference calling service or the contract with our lobbyist.

Please renew your membership at [KMHC website](#). First, log in, select your membership renewal and the site will generate an invoice to pay by check. Contact Amy if you have questions.

**Minutes of the previous meeting adopted.** Motion Cagan, second Kerle.

### 9:15 a.m. Reports

**Board of Directors** - Report – Meet by teleconference to consider Kansas Health Foundation grant application.

**Advocacy Committee –Grassroots Advocacy Network** - Kansas Health Foundation grant opportunity. Committee will meet at 11:45 a.m. after the Coalition meeting.

**Governor's Behavioral Health Services Planning Council** – Wes Cole – next meeting at Dodge City. Tomorrow the Justice Involved Youth and Adults Committee meeting with the KDADS Secretary.

Governor will be issuing a Suicide Awareness Proclamation

Les Sterling runs a state of the art program for addictions and screening / Recovery Center. Hoping to change Kansas Alcohol Exclusion law, which gives insurance companies the right to deny coverage to any person who, at the time of injury, seeks medical attention under the influence of alcohol or any drug not currently prescribed to them by a physician. The National Association of Insurance Commissioners (NAIC), an organization of insurance regulations in the 50 states, adopted to Alcohol Exclusion Law as part of the Uniform Accident and Sickness Policy Provision (UPPL) model law in 1947. To date, 27 states explicitly allow Alcohol Exclusion Laws and 14 states plus the District of Columbia have prohibited the use of Alcohol Exclusion Laws.

Wes attended the Mental Health / Prevention Consolidated Block Grant in Washington D.C. There is a new focus on prevention and programs like veteran's courts. Spoke to Oklahoma representatives about tribal integration, good to be able to collaborate and learn that we are on the right track. There is a broad concern about opiates and overdosing. Oklahoma led the nation last year.

It was suggested that we touch base with Alexandra Blasi, Kansas Board of Pharmacy, about their work with the prescription drug monitoring program and challenges in getting funding each year for that program. The Coalition might be interested in engaging in that work.

**Subcommittee Reports** – Rick Cagan co-chairs the Justice Involved Youth and Adults Subcommittee. The group will meet with the Secretary to discuss their report and especially to promote one of their recommendations to create a position at KDADS that focuses on the connection

between corrections and mental health. That discussion has broadened because the Veterans Subcommittee brought a similar recommendation. The idea is to bring together the work statewide on CIT – Crisis Intervention Training and other related programs such as mental health courts. Would like to see practices standardized and policy issues established as the need arises. The State has a nominal investment of \$25,000 in training for law enforcement – hosts three events each calendar year primarily for rural departments. Topeka, Lawrence, Kansas City, Wichita and Salina organize their own training locally. Right now every department is collecting data on their own, but we are unable to show data on the impact of these programs statewide. There is interest in establishing more local CIT organizations, and a leadership post would be helpful. KDADS also supports an online training version through KU, it is not as extensive. Annual CIT summit will be held in Wichita on September 30.

Sky Westerlund shared a story of an individual near her home who was clearly in his own world and a psychiatric condition. He was approached gently by an officer who was able to engage with him and deescalate the situation. Suddenly, two more police cars showed up and disturbed the equilibrium. The officer had to begin again. It was fortunate that he was able to handle it, but would have been better if the others had been aware of what was happening.

Rick mentioned that these kinds of situations should be brought to the local CIT council in order to evaluate the occurrence and consider how best to handle such a case in the future.

**Psychiatric Advance Directives Committee** - Mike Burgess – Committee hopes to model the Virginia law and reach out to legislative revisors to develop some language.

**Alliance for a Healthy Kansas** - Amy Campbell

[Pittsburg, Kansas Community Forum](#)

**When:** August 31, 2016, 6:30pm

**Where:** Homer Cole Community Center, 3003 N. Joplin St.

[Leavenworth Community Forum](#)

**When:** September 1, 2016, 6:30pm

**Where:** Leavenworth Riverfront Community Center, 123 N. Esplanade St.

[Holton Community Forum](#)

**When:** September 6, 2016, 6:30pm

**Where:** Holton First Baptist Church, 404 Juniper Dr, Holton, KS 66436

[Kansas City, Kansas Community Forum](#)

**When:** September 8, 2016, 6:30pm

**Where:** Donnelly College, 608 N. 18th St

[Atchison Community Forum](#)

**When:** October 5, 2016, 6:30pm

**Where:** Trinity Lutheran Church, 603 N. 8th Street, Atchison, KS 66002

**9:30 a.m. Update on CMHC programs -Mental Health 2020** Kyle Kessler, ACMHCK – The effects of the Medicaid reimbursement cuts, elimination of health homes and mental health screening policy changes have reduced CMHC funding significantly.

The Association of Community Mental Health Centers of Kansas is promoting Mental Health 2020 – a plan to revise state mental health policy:

Expand the number of residency slots at KU Med in order to have graduating residents work at CMHCs or State Hospitals for a few years after graduation. At this point, our graduates are mostly leaving the state to fill desirable positions in other states. Have met with Dr. Gabrielli – chair of the Department of Psychiatry at KU – about how it might work.

Replicate the Rainbow Service Inc. model in three additional locations. The crisis program in Wichita is matching or even exceeding outcomes set by RSI in Wyandotte County. We need to secure future funding for RSI and Wichita to guarantee their long term fiscal viability, as well. When we are able to measure our successes, we are also able to measure our shortcomings.

Kessler stated that we have the ability in Kansas to have one of the best mental health systems in the country, but we have faltered in recent years.

Recognizes that this program may not go far enough for some and too far for others, but hope that it opens a strong conversation in the Legislature.

Cagan – asked what program improvements might accompany this infusion of needed funding, in particular evidence based practices.

Kessler – talked about the discussion at the Kancare Oversight Committee and the conversation relating to integrated health care, impacts on physical health. Talked about the issues with the implementation of Kancare's health homes program – idea that Kansas started with such a broad program, it was taking longer to see the outcomes that had occurred in Missouri (a more focused program) but that he believes they were occurring. Also discussed performance measures. When you couple services and case management, you see improved outcomes. Effective case management works, but it is hard work and requires personnel.

Cagan – want to see more of the strengths based case management which has shown such strong outcomes through the KU Research program.

## 10:00 a.m. Adult Continuum of Care Committee

Randy Callstrom, Wyandot, Inc, and Amy Campbell, KMHC, are co-chairing the Adult Continuum of Care Committee that was re-convened this summer by the Secretary of KDADS under the auspices of the Governor's Behavioral Health Services Planning Council. Amy is asking KMHC members to share their ideas/recommendations based on the 2015 Adult Continuum of Care Report – posted on the KMHC website – to assure there is broad input.

**Purpose:** The ACC Task Force will serve under the auspices of the Governor's Behavioral Health Council (GBHSPC) in an advisory role to the Secretary of the Kansas Department for Aging and Disability Services (KDADS). The ACC Task Force will develop specific plans for the implementation of the recommendations from the Adult Continuum of Care Committee Report.

**Background / History:** At the request of the Secretary of the Kansas Department for Aging and Disability Services (KDADS), a diverse group of stakeholders was convened to review the current behavioral health system and make recommendations for how to transform this system. Building upon the work of the Governor's Mental Health Task Force and Hospital and Home Committee, the Adult Continuum of Care Committee reviewed and made recommendations for transforming the behavioral health system to ensure that an effective array of behavioral health services were available to promote recovery and community integration. This review included the current capacity of both state mental health hospitals as well as resources available in the communities.

The Adult Continuum of Care Committee met five times from May 21, 2015 through July 16, 2015. Staff from the Kansas Department for Aging and Disability Services facilitated the meetings and provided support to the committee. Through a series of facilitated discussions, the Adult Continuum of Care Committee examined the current behavioral health continuum of care, identified current resources, gaps, barriers, and opportunities for improvement. The Adult Continuum of Care Committee submitted a final report to the Secretary containing a list of recommendations for transforming the behavioral health system, including a recommendation to reconvene member of this committee to "periodically monitor progress, revise the recommendations and provide input regarding more specific circumstances".

**Adult Continuum of Care Task Force Charge:** The ACC Task Force will take a focused look at the KDADS' Adult Continuum of Care Committee's past recommendations as prioritized by the Secretary of KDADS in consultation with the Chair of the GBHSPC and develop advisory recommendations and action steps for implementation. As part of this effort, the ACC Task Force will also review products of previous workgroups and committees that were used by the Adult Continuum of Care Committee to develop recommendations for transforming the behavioral health system. With the support of KDADS, the ACC Task Force will review current state data, review the behavioral health continuum in Kansas and in other states and other pertinent, available data.

**Timeline:** The ACC Task Force has been appointed by the Chairperson of the Governor's Behavioral Health Services Planning Council with approval of the council. The ACC Task Force will meet on a regular basis as determined by the co-chairs to carry out the Charge.

Shared some of the handouts with data gathered for the ACC regarding hospital admissions, wait times, and agency budget history. Will scan later to share with members on the phone.

The group is examining the situation at the hospitals in detail and may have recommendations for the hospitals themselves – but also reviewing the overall system and the gaps in our current continuum of care. The Secretary is interested in specific recommendations that can be pursued in the short term in the initial report. The Co-Chairs are hoping to have an initial report (building on and prioritizing the 2015 ACC report) by the end of November. Members have been meeting every two weeks to meet that goal.

Residential care is an essential part of the continuum – the view is mostly toward transitional settings where active treatment can be engaged. Valeo closed one of those facilities here in Topeka recently. That philosophy remains important and centers are ready to do more, but everyone needs to agree that active treatment in these settings is important. The group has expressed interest in some model of peer respite and enhanced peer services throughout the continuum. Have not been able to get specific information about the expected impact of the Federal IMD Rule change in Kansas, except that we expect it will aid in the availability of beds, and certainly help with the financial issues at our state hospitals (Larned first, and then whatever beds at OSH are recertified).

## 10:30 a.m. Legislative Update - Amy Campbell

Report on the Legislature's Special Session and Legislative Interim Committees - Public Health Boards and Step Therapy topics  
Kancare Oversight

SPECIAL INTERIM LEGISLATIVE COMMITTEES APPROVED JULY 22: Schedule not published

### Organization of Public Health Boards - Combining Certain Health Boards

- Consider the combination of the Board of Nursing and the Board of Healing Arts under one administrative entity for the purpose of potential reduction of administrative costs and increased efficiency over time.

### Patient Protections for Step Therapy - Study Patient Protections in Commercial Health Insurance

- Consider patient protections for Step Therapy to be used in commercial health insurance in the State of Kansas.

### Foster Care Adequacy - Review Issues Pertaining to Foster Care Adequacy

The study would include the following:

- Review the level of oversight and supervision by the Department for Children and Families (DCF) over foster care contractors;

- Evaluate whether a working group consisting of attorneys in the area of family law, judges, foster parents, and parents with reintegrated children would aid in addressing foster care concerns;
- Study the proper selection of foster parents and the qualifications of foster parents; and
- Review the duties of those individuals responsible for foster children, the connection between DCF and foster care contractors, and the grandparents rights law regarding custody, KSA 2015 Supp. 38-2286.

#### **Larned and Osawatomie State Hospitals - Study Various Issues Regarding Larned State Hospital and Osawatomie State Hospital**

The study would include the following:

- Monitor the patient populations and review the study the activities and plans of the treatment programs and correlation to patient outcomes;
- Tour each state psychiatric hospital, considering and evaluating facility issues relating to plan management and safety;
- Review and study the Kansas Department for Aging and Disability Services' (KDADS') policies relating to each state psychiatric hospital;
- Review and study KDADS responsiveness and efforts in identifying and resolving issues relating to facility, staff, and patients;
- Review and study KDADS staffing and policies relating to staffing, recruitment, retention, employee morale, and employee relations issues;
- Review and identify patient and employee safety concerns; and
- Review and study any other issues brought to the attention of the Committee concerning state psychiatric hospital oversight.

**Legislative Mental Health Symposium** – held August 17<sup>th</sup> at the Statehouse.

**Mental Health Medications Advisory Committee** - August 9 - meeting postponed because there is no pharmacist for the program.

**2016 Elections Information** - What do you need to do? Reach out to the candidates in your area and tell them that you care about mental health programs in Kansas. Ask them where they stand on issues like mental health funding and Medicaid Expansion (or other mental health related issues). Support candidates who support mental health! Put up signs, attend forums, give contributions, or even volunteer to stuff envelopes or walk districts. The candidates list is posted on the KMHC website.

#### **ELECTIONS**

The new funding crisis for mental health in Kansas has been created by multiple policy decisions including the 4% Medicaid reimbursement cut, the elimination of health homes, and changes in screening for inpatient care. The result is significantly reduced funding for mental health centers and approximately 200 employee layoffs across the state.

The work of the Kansas Mental Health Coalition depends on collaboration and support from many groups across the mental health system, and this collaboration has been very successful in the past. We must continue to educate legislators and public about the importance of mental health and wellness – and the dangers of further limiting access to care.

**Participating in local elections is key to the success of this movement. We must communicate with and support candidates in order to elevate mental health as a priority for policymakers.**

Six Senate incumbents and nine House incumbents lost their seats in the August 2 primary. Combined with eight Senators retiring and nineteen Representatives retiring – the House and Senate will look very different next session.

- District 11 one-term Sen. Jeff Melcher, R-Leawood, lost to John Skubal, R-Overland Park.
- District 14 one-term Sen. Forrest Knox, R-Altoona, lost to Bruce Givens, R-El Dorado.
- District 21 one-term Sen. Greg Smith, R-Overland Park, lost to Dinah H. Sykes, R-Lenexa.
- District 24 one-term Sen. Tom Arpke, R-Salina, lost to Randall Hardy, in a 3 way race.
- District 34 three-term and current Senate Majority Leader Terry Bruce, R-Nickerson, lost to Edward E. Berger, R-Hutchinson. Bruce had been planning to challenge Wagle for Senate President.
- District 39 one-term Sen. Larry Powell, R-Garden City, lost to Rep. John Doll, R-Garden City.
- District 8 two-term Rep. Craig McPherson, R-Overland Park, lost to Patty Markley, R-Overland Park.
- District 17 two-term Rep. Brett Hildabrand, R-Shawnee, lost to Tom Cox, R-Shawnee.
- District 20 three-term Rep. Rob Bruchman, R-Overland Park, lost to Jan H. Kessinger, R-Overland Park.
- District 28 two-term Rep. Jerry Lunn, R-Overland Park, lost to Joy Koesten, R-Leawood.
- District 39 two-term Rep. Charles Macheers, R-Shawnee, lost to Shelee Brim, R-Shawnee in 3 way race.
- District 42 four-term Rep. Connie O'Brien, R-Tonganoxie, to Jim Karleskint, R-Tonganoxie.

- Democrats had just one House incumbent, Rep. Ben Scott, D-Topeka, who took office at the start of the 2016 legislative session, ousted, in a District 58 three-way primary to former Rep. Vic Miller, D-Topeka, and Brett Kell, D-Topeka.

Many expect to see further defeats in the General Election in November. Please share information with us regarding the races in your area, and we will continue to share information with our members and the grassroots advocacy network about the elections. An updated list of candidates for the General Election will be emailed to our members this week.

**11:00 a.m. KDADS Update** – Susan Fout, Commissioner of Behavioral Health Services, and Kelli Ludlum

Kelli Ludlum - Document from Kancare Oversight Committee – ask Kelli to email it.

Talks about work at Osawatomie State Hospital to prepare for recertification with CMS. Ready August 30.

Concerned about whether or not CMS inspection will be expecting the same hospital they saw before. Believe the hospital is much improved, treatment is more interactive and individualized. Treatment improvements have also been made in the “licensed side”.

There will be differences in the physical aspects according to CMS requirements. The agency doesn't necessarily agree that all of the physical requirements are necessary but want to meet and exceed the expectations.

Very happy with Bill Rein as superintendent at Larned State Hospital and in particular have seen great improvements in the employee morale there. Continued work there in employee policies to be sure that they feel valued. Overtime hours are down and no longer being mandated on a regular basis. Yesterday, had only 7 open positions during the shift, which is a strong improvement. Still need more staff and especially skilled professionals.

Susan Fout – She and John have scheduled visits to each CMHC. Participating in the NFMH Task Force, and plan to visit those. CMHC contracts were extended through end of September – more work to be done there.

For SUD, awarded 17 community coalition grants for planning – looking at youth and underage drinking and marijuana use. Total \$583,000. Supposed to look at sustainability.

Valeo and Wyandotte received the Early Intervention Grants.

Bill – appreciate that the staff went to Dodge City to meet with the mental health center directors. Glad to see that the State is in a phase of planning. We have been addressing problems for years. Glad that the Adult Continuum of Care Committee was extended. Would like to see something established for children. We have a chance to restore Kansas to one of the best public mental health systems again by doing real planning around public safety. We have taken steps and want to see a good comprehensive plan. Everything is here right now.

**11:25 a.m. Announcements**

**11:30 a.m. Adjourn**

**2016 KMHC Meetings: 9 a.m.–11:30 a.m.** Jan 27, Feb. 24, Mar. 23, April 27, May 25, June 22, July 27, Aug 24, Sept. 28, Oct. 26, Nov 16, Dec.

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For more information, contact: Kansas Mental Health Coalition

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