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**CLARK COUNTY
WASHINGTON**

DEPARTMENT OF COMMUNITY SERVICES

Mental Health Advisory Board Minutes
May 26, 2010

Board Members: George White, Cassandra Sellards-Reck, Armando Herrera, Kathy McNicholas, Dana Baker, *Chair*.

Members Present: Cassandra Sellards-Reck, Armando Herrera, Kathy McNicholas, Dana Baker, *Chair*.

Members Absent: George White

Staff Present: Connie Mom-Chhing, Connie Colbo, Melodie Pazolt

Guests: Don Koenig, CCS; Ken Jennings, SAAB; Pat Beckett, CC; Nancy Parker, CRMHS; James Mead; Lynn Smiley, Lifeline; Becky Hill, SWMC ADAPT; Melanie Maiorino, MHO; Phinthang Yang.

Agenda Item	Discussion	Discussion Leaders	Decisions, Actions, Assignments
1. Welcome & Introductions		All	
2. Meeting Minutes Approval for	Minutes from meeting on April 28, 2010, were approved.	Corrine	
3. Children's Center Presentation	Pat Beckett presented information on their Pathways program. This program provides mental health care for children and youth who are uninsured or underinsured. Children and families served through Pathways received quality mental health services from a child therapist with no out-of-pocket cost to the family. Since their doors have opened, they have served 56 children with 15 becoming Medicaid eligible. Types of services include case management and family therapy. They market this program to schools, juvenile justice, and other providers. Their staff consists of both paid staff and interns. Funding comes from agency reserves and fundraising. They received their start-up funds from the RSN.	Pat Beckett	
4. RSN Manager's Report	<p>DSHS Reorganization - Division of Behavioral Health and Recovery (DBHR) moved under Aging and Disability Services Administration (ADSA) on May 1. ADSA is under the oversight of Assistant Secretary Kathy Leitch.</p> <p>Last week, 39 counties spent a day with David Dickerson and Dan Murphy, Director for Strategic Planning. Focus of discussion was on healthcare reform and DSHS reorganization. The Healthcare and Sub-Healthcare Cabinet is working on issues relating to healthcare reform. Looking at policies that may needed to be changed or put in place in preparation for the healthcare reform. Discussion relating to service access, linkages and coordination is the focus of the cabinet's work. Input into healthcare reform for WA will be sought electronic.</p> <p>In terms of healthcare benefit package, we are begin to hear themes of consistent access</p>	Connie Mom-Chhing	

	<p>to services, consistent or near consistent benefit package, integration of primary care and behavioral healthcare, and predictability of payment methods.</p> <p>By 2014, RSNs have been told that Healthcare Authority will be purchasing services for 1.5 -2 million people.</p> <p>Medicaid Rate for Clark RSN – Clark is at the bottom of the rate range for all categories: children disabled and non-disabled and adult disabled and non-disabled. Shift of foster care children to disabled category provided an increase of 1.7 million in Medicaid for Clark. Yet, we have a reduction of 1 million in State fund.</p> <p>Final 2010 Budget was distributed to MHAB along with bills that passed the legislature and dead bills. Handout provided an overview of final budget for Alcohol and Substance Abuse, Mental Health, and Development Disabilities.</p> <p>Budget FY 2011 – Anticipated reduction of 3.3 billion.</p>		
5. Quality Manager's Report	<p>Connie Mom-Chhing reported on behalf of Sela Barker.</p> <p>Satisfaction Survey 2009- Final Report</p> <ul style="list-style-type: none"> Report was finalized last month after review and feedback from the Quality Management Committee in April. <p>Quality Indicator Reports for May 2010 (copies of the reports can be e-mailed)</p> <ul style="list-style-type: none"> Inpatient Admissions- report shows a meaningful decrease in admissions from FY08-FY09 Availability of Outpatient Services: For calendar year 2009, 62% received a first treatment service within 28 days of their request for services- goal is 75%. Performance improved during the last 6 months of the calendar year. Hospital Re-admission Rate: the re-admission rate increased over the past 3 quarters- was at 12.6% the last quarter of calendar year 2009, and above our goal of 10%. The Quality Management Committee is proposing a performance improvement project to address this. Employment (adults 18 and above): CCRSN has a clinical Performance Improvement Project to increase the employment rate (at a statistically significant level) - for the first quarter of calendar year 2010, the rate was 10%, which was not quite statistically significant. However, the actual number of individuals employed has steadily increased from our baseline measurement at the end of 2008 (130 individuals) to our most recent measurement for Jan-March 2010 (214 individuals). The rate increase was not statistically significant because the number of individuals in services also increased at the same time. <p>Agency Site Visits: are continuing through July.</p> <p>State Contract Compliance Review: scheduled for the end of August- preparation for this will be a focus of our work in June and July.</p>	Connie Mom-Chhing	
6. Ombuds Report	<p>Ombuds Melanie Maiorino reported on FY2009-2010 3rd quarter. She noted occurrences had decreased. Complaints were not related to mental health system. They related to "Dignity and Respect" issues and "Service Intensity, Not Available, Coordination." Resolutions by Type were "Information and Referral" and "Conciliation and Mediation." Concerns that were brought to her were calls she received from GAU consumers asking why they are not able to choose CRMHS or Lifeline or CSNW for intake creates questions about why the consumer who vocalizes MH problems to DSHS on eligibility applications are being given coupons that create even more of a barrier to</p>	Melanie Maiorino	

	<p>their accessing MH services. Another concern is from parents of over 13 years of age consumers become upset when told the “child” has the right to direct their mental health treatment and the “child” can accept or reject any treatment as well as have mental health information kept from the parent/caregiver. She informs them that this is a state law. Some of her outreach activities during this quarter included a presentation to nursing students at Washington State University Vancouver; partnered with RSN to present Walking in Recovery video during May Mental Health Month; and participating in the Mental Health Month Quiz Show.</p>		
<p>7. MHAB Subcommittee Reports</p>	<p>QRT Committee—Armando reported: Eric Johnson gave a presentation at Youth House Options regarding QRT. Health Minds, Healthy Bodies, Happy Hearts Forum in February offered a unique and effective style for gathering feedback from either consumers or providers in the mental health system. Station 2 and their staff were honorably mentioned helping homeless and others with drug issues. NAMI Walk was announced. The RSN liaison report indicated a decrease in state dollars and reserves are now being used. These funds come from Medicaid, state, federal block grants, and local tax dollars with the largest coming from Medicaid. May 1, the Mental Health Division is being reorganized. Medicaid has moved to Health Care Authority and mental health is now under Aging and Disability Services Division. May was Mental Health Month. There are currently two openings on the QRT. A speak-out at the Clubhouse was talked about. Times are being set. SAAB—Armando reported: The jail transition program was discussed. Mental health issues needed to qualify regardless of whether substance abuse is involved. Incarceration was also a requirement. Services last 90 days starting from release date from jail. Teens Care 2 (TC2) conference at Clark College was discussed. It was hosted by CMAT, PREVENT, and Clark College. 130 youth participated. It was a 7.5-hour event with various workshops, art, and other intervention options available. Gas Town USA was honored for the removal of alcohol and tobacco ads in their stores. It was mentioned that SAAB connect with MHAB so the boards could get to understand co-occurring disorder costing options. Cleve Thompson talked about Medicaid eligibility, GAX, TANF, and the different factors involved causing Clark County to lose \$2.5 million a year. Annual statewide meeting of all SAAB boards (39 counties) in the state with October 9 suggested. Annual recovery forum at the Lords Gym was discussed. The monetary impact on substance abuse clients and clients with the mental health issues was discussed. Drug and alcohol support was losing \$1.5 million. Membership Committee—Armando reported: The motion was made to approve seven new member nominations to the Board. The motion was seconded. The Board unanimously approved the following seven candidates</p>	<p>Board</p>	

	<p>for membership to the Board. The candidates are: James Mead, Nahid Razzaghy, Phintang Yeang, Christie Kratovil, Veronica Mo, Rinna Rem, and Chrystina Hengstler. The nominees' information will now be forwarded to the Board of County Commissioners for approval and appointment to the Board.</p> <p>Diversity Training—Dana informed the Board that Clark County Board of County Commissioners is requiring all boards/committees to participate in Diversity Training. The Board will also be scheduling a retreat in September.</p>		
8. Community Input	There was no input at this time.		
9. Adjourn - Next Meeting	The next meeting is Wednesday, June 30, 5:30 p.m. to 7:00 p.m. Clark County Center For Community Health, 1601 E. Fourth Plain Blvd., Conference Room C210-B & C.		