Behavioral and Mental Health Task Force Meeting

Thursday, December 8th, 2015 2:00 PM – 4:00 PM Buena Vista Conference Center Buck Library

Meeting Attendance

Task Force Members

Present

Co-Chair Senator Patricia Blevins Co-Chair Senator Bethany Hall-Long Susan Cycyk Susan Jennette Erin Booker, LPC Dr. Michael Barbieri Jim Lafferty

Absent

Dr. Marc Richman

Representative Debra Heffernan Brenna Welker Joshua Thomas Secretary Rita Landgraf

Present

Caitlyn Gordon Carling Ryan Tanner Polce Bryan Gordon Thomas Johnson

Email

Patricia.Blevins@state.de.us Bethany.Hall-Long@state.de.us Susan.Cycyk@state.de.us Susan Jennette@state.de.us Erin.Booker@christianacare.org Michael.Barbieri@state.de.us JLafferty@mhainde.org Marc.Richman@state.de.us

Debra.Heffernan@state.de.us Brg002@gmail.com JThomas@namide.org Rita.Landgraf@state.de.us

Task Force Staff

Email

Caitlyn.Gordon@state.de.us Carling.Ryan@state.de.us Tanner.Polce@state.de.us Bryan.Gordon@state.de.us Tom.Johnson@state.de.us

Public Attendees

Name Jen Rini

Harvey Doppelt
Neil Kaye
Bill Mason
Sarah Wootten
Drew Wilson
Linda Brittingham
Christine Schiltz

Affiliation

The News Journal DPBHS/DSCYF PSD/MSD/NAMI Meadowwood BHS House Staff

Medical Society of Delaware

CCHS

Parkowski, Guerke, & Swayze

Minutes prepared by: Caitlyn Gordon, Legislative Aide

Adam Glushakow

The meeting was called to order at 2:14 pm.

Senator Patricia Blevins, Co-Chair, opened the Task Force meeting by addressing the first item on the agenda, approval of the meeting minutes.

Approval of Meeting Minutes

Senator Blevins asked if members had changes that they would like to see made in the Meeting Minutes from November 23rd, 2015. Seeing none, Senator Blevins asked for motions to approve the November 23rd Meeting Minutes. The first motion to approve the Meeting Minutes was made by Jim Lafferty, this motion was seconded by Susan Jennette. The Meeting Minutes from November 23rd, 2015 were approved unanimously.

Suicide and Stigma Presentations and Questions

Senator Blevins introduced Jim Lafferty, Emily Vera, Jennifer Seo, and Jennifer Smolowitz, from the Mental Health Association in Delaware, who presented on suicide and stigma.

During the presentation, a video clip titled *Suicide Prevention PSA* was shown. Below is a link to the video: https://vimeo.com/139404264

Following the first presentation, Senator Bethany Hall-Long, Co-Chair, introduced Susan Cycyk and Harvey Doppelt from the Delaware Department of Children, Youth, and their Families, who presented on *Suicide Prevention*.

Open Discussion

Carling Ryan, Task Force staff, asked Mr. Doppelt about parental consent for suicide assessment screenings and how this consent is given in schools and primary care physician offices, etc. Mr. Doppelt responded that it depends on what kind of setting the screening takes place in. In many instances, if the screening is considered a customary standard operating procedure, one would not need parental consent. Additionally primary care offices are able to decide on their own based off of how they want to run their practice.

Dr. Glushakow, member of the public, asked if an individual is identified as high-risk during a screening, how the person screening them could communicate that information to another care provider who may see the patient as well. Mr. Doppelt stated that this also depends on the setting. If the patient is high-risk, HIPPA (Health Insurance Portability and Accountability Act) allows care providers to immediately communicate this information without a release. Additionally, much of what the primary care doctors do is based off of how they want their practices to run. However, crisis services will communicate this information to a provider with parental consent.

Neil Kaye, speaking on behalf of Joshua Thomas, National Alliance of Mental Illness, noted that there is an insufficient amount of child psychiatrists in Delaware and that is a problem. Because of the gap of

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psychiatrists, patients are waiting months to get the help that they need. He added that the Task Force should also work on recruiting and maintaining child psychiatrists in the State.

Telepsychiatry was mentioned during discussion of Task Force members. Mr. Lafferty mentioned that a study done in British Columbia proved that kids seem to accept telepsychiatry very well. Susan Cycyk added that the Kids Department uses telepsychiatry and they have found success using it at the Stevenson House Detention Center, because the Department could not find a doctor to come in. She added that to transport the Center's patients to see a physician, they would need to shackle the patient and drive them to an off-site location.

Erin Booker noted that Mid-Atlantic has been seeing success with telepsychiatry on children and adults. Additionally, hospital systems as a whole are all looking at telepsychiatry. However, Ms. Booker added that there are many parts of telepsychiatry that need to be looked into further.

Neil Kaye mentioned some concerns that need to be resolved with telepsychiatry. He noted that there is a difference between conducting an initial assessment and follow-up care in terms of emergency backups. Dr. Kaye added that if a physician is conducting an initial assessment through telepsychiatry, and their patient mentions that he or she is suicidal and continues to take out a gun during treatment, the physician does not have a physical way to stop the patient from shooting themselves.

Dr. Barbieri referenced issues that Dr. Kaye has brought up regarding mandatory reporting. He asked members if there is a need for legislation to modify mandatory reporting. Dr. Kaye responded that he is working with a group on draft language to amend the current mandatory reporting law. He noted that they would love to see the Task Force get behind this legislation.

Jim Lafferty emphasized the importance of educating parents on the seriousness of different psychiatric disorders so they can understand their child's actions and words. Erin Booker agreed, adding that another area that needs education is summer camps and camp counselors. She added that these counselors do not realize how serious a child's remarks and actions could be. Ms. Booker stated that any individual who works with children on a consistent basis should get proper education. Ms. Cycyk highlighted that the State really does not have the capacity in this area that they need.

Senator Hall-Long noted that with the closing of the Rosenblum Center, it is important to highlight during meetings, and in the Matrix, where the gaps are following the closing. The Senator asked members if there were unlimited resources, what their dream world consist of for mental health in Delaware.

Mr. Lafferty noted that in a "dream world" he would have a kids program that was longer than 2 weeks of intensive outpatient or partial hospital. He added that it must be extremely difficult to work with kids for only two weeks and efficiently treat their problems.

Senator Hall-Long mentioned that working with reimbursement rates to get the right providers for children is also important. Dr. Barbieri added that there are many dynamics that go into working with kids like: dysfunction in the home, depression, failures in school, and easy access to drugs. He noted that a big challenge in treating kids, is treating all of these issues. Dr. Barbieri said when family support is there, it is helpful, but they do not receive the necessary family support with all of their child patients.

Senator Hall-Long stated that early intervention in a child's life would be beneficial to their future. She continued to ask Susan Cycyk if she likes the idea of middle school wellness centers. Ms. Cycyk responded saying that this would be very beneficial but the school would need to be careful of what they put in them. She added that actions to keep kids in school as long as possible is much needed, and providing that child with services to keep them in school would be extremely helpful.

Senator Hall-Long asked Task Force members if they had any recommendations that they would like to make for the Task Force.

Mr. Doppelt added that getting parents to the table to help with their children is important. He stated that parents are not as engaged as they should be.

Dr. Richman noted that the "Help is Here" website has been very helpful with DHSS (Department of Health and Social Services) around substance abuse issues. He added that although the website is extremely helpful, it does not address children's issues. Dr. Richman stated that if the State was able to have a dovetail of the "Help is Here" website, this would be a way to help children.

Senator Hall-Long asked members and the public if they had additional questions or comments. As there were none, the Task Force meeting was brought to a close at 3:30 pm.