

**Rhode Island Council of
Community Mental Health
Organizations, Inc.**

Changing Minds

Winter 2003

Volume 1, Number 1

Welcome

The Rhode Island Council of Community Mental Health Organizations (RICCMHO) is launching this new publication to give providers, consumers and supporters of our state's mental health care system regular updates and information on legislative, training and advocacy issues. In this era of belt-tightening, it is imperative to keep those providing and receiving mental health and behavioral health services informed and educated. We chose the name, *Changing Minds*, because part of our mission is to change people's minds about mental illness by providing up-to-date information to the public. We hope to send out quarterly issues of the newsletter, distributing them at our member organizations, affiliated agencies and to the individuals in our Advocacy Database. If you are not currently registered in our database, but would like to be, contact us via e-mail at info@riccmho.org or by calling 401-273-0900 and we'll send you a registration form.

State House News: Major bills and major cuts

By Elizabeth V. Earls, President/CEO, RICCMHO

Each year, the Rhode Island Council, under the leadership of its Legislative Committee, monitors an estimated 50 pieces of legislation that are winding their way through the RI General Assembly. The Committee reviews the proposed bills, and makes recommendations to the full Board as to whether or not the Council should actively support or oppose a particular piece of legislation. If it is decided that the Council will take an active role on a given bill, we will make contact with the sponsors of the legislation and offer testimony clarifying our position when a hearing is held on the bill. The Council also develops its annual **Bill Tracker** to provide its Board and Committee members with a tool that makes it easy to follow the progress of legislation through the session. (*An excerpt of this year's Bill Tracker appears on page --.*)

Often the legislation that we work on is not specific to mental health treatment or community mental health organizations alone. For example, in the past session, numerous bills were introduced which would have made it more difficult for persons without housing to find and/or retain an apartment. Because quality, affordable housing is an issue for many of the persons served by our system, the Council worked closely with the leading housing advocates to oppose these bills. Similarly, the Council will work closely with health care advocates to monitor legislation related to health insurance coverage to ensure that the needs and positions of health care providers and recipients are represented at these hearings. A third category of legislation that we commonly monitor

is that which would expand programs offering financial assistance to persons who cannot afford their prescription medication.

Consistently, the most significant piece of legislation affecting the community mental health system in any given year is the State Budget. The budget contains the approved appropriations for each state department, including those responsible for serving persons with mental illness and/or substance disorders. In addition to funding allocations, the Articles of the Budget may also establish policies that impact upon the community mental health system.

So what did happen in the last session? Overall, the Council had a relatively successful year of advocating for legislation and funding relating to mental health care and affordable housing issues. Of the 58 bills that we monitored this session, the Council supported 17. Of those 17 bills, 4 passed. The Council opposed 10 bills; of those, 8 failed and one was vetoed. What the Tracker doesn't tell us is the progress made on respective issues as a result of public hearings and subsequent negotiations with legislators and other stakeholders. An opportunity to discuss our issues in a public forum is an opportunity to educate the public about mental illness and the importance of treatment.

As noted earlier, the most significant action occurred through this year's approved State Budget. Here is a summary of what happened:

X \$1.3 million dollars to pay for mental health treatment for children and families without health insurance was eliminated from the DCYF appropriation, leaving only \$200,000 for this purpose.

X The Department of Human Services appropriation contained a provision to save \$2 million in the Children's Intensive Services (CIS) budget by re-structuring the program. CIS is the only comprehensive mental health program that provides long-term home and community-based mental health treatment to children with serious emotional disorders and their families.

X The Department of Mental Health, Retardation and Hospitals appropriation provided level funding to the community mental health organizations.

X Article 27 of the Budget establishes a Joint Legislative Commission to Study the Implementation of a Funding Index for Private, Community-Based Providers Operating Pursuant to Contracts with the State of Rhode Island (*see article below*).

X The Neighborhood Opportunities Program was funded, supporting the development of approximately 140 new housing units.

A new index will help lawmakers understand CMHO costs

Article 27 : Relating to a Joint Legislative Commission to Study the Implementation of a Funding Index for Private Community -Based Providers Operating Pursuant to Contracts with the State of Rhode Island.

A number of community-based health and human service providers, including the community mental health organizations, substance abuse treatment providers, and

organizations serving folks with developmental disabilities, worked in coalition to assist legislators in passing this Budget Article.

Though the formation of an Index does not guarantee annual increases to these organizations, it does guarantee that State leaders will have available to them a methodology by which they can fully understand the costs incurred by organizations, serving thousands of Rhode Islanders in need.

Similar to a process available to Rhode Island's nursing homes, this Index will take into account not only workforce costs, but all costs related to meeting the contractual requirements set down by the State. Historically, State leaders, struggling to meet the numerous demands on Rhode Island's budget, have given small cost-of-living increases to those non-profit organizations with which the State contracts for health and human services. Often these increases have been limited to direct care staff only. Organizations have struggled on their own to meet the increases in other labor and operational costs.

The Council welcomes the formation of this very important Commission, and looks forward to participating in a process that will bring to light the real cost of providing high-quality, home and community-based mental health treatment to all Rhode Islanders in need.

1963-2003: CMHOs at 40

President Kennedy's vision turned community care into a reality

This year marks 40 years since President John F. Kennedy signed the Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963. The signing marks the beginning of a movement that, against all odds, has persevered and included many of its pioneers and visionaries -- none more distinguished than President Kennedy himself.

In February 1963, President Kennedy sent a special message to Congress calling for "a bold, new approach" to solving the twin problems of mental illness and mental retardation. It was the first time in U.S. history that a president had delivered a message on the subject of mental illness.

A report by the Joint Commission on Mental Illness and Health called for a major expansion of community-based mental health services. The report recommended that the centers provide all mental health services, from prevention and education to rehabilitation, to all members of the community. Kennedy embraced its vision of a national mental health program and ordered a myriad of government agencies and departments to develop a blueprint that he could present to Congress.

By fall, both chambers of Congress had passed the construction portion of the bill. Kennedy signed the act into law in October 1963, less than a month before his death.

Kennedy's vision and tenacity ensured that a nationwide system of community mental health centers would have a chance of becoming a reality.

Changing Minds

Winter 2003

Page 4

Bill Tracker 2003: The struggle continues

Note: This is an excerpt of the 58 bills monitored by the Council during this year's state legislative session.

<u>House (H) or Senate (S)</u> <u>Bill #</u>	<u>Title/Description</u>	<u>RICCMHO Position</u>
H5572	This act would provide interim health care to those awaiting Medicare, who have been approved for Title XVI SSI. Sponsor: Rep. Lewiss Status: Failed	Support
H5627	Non-profit Medical Service Corporations Act would mandate that the State reimburse private, non-profit organizations at a level that would allow them to pay their direct care staff at a rate equal to State employees performing similar functions. Sponsor: Rep. McNamara Status: Failed	Support
H6022	This would allow the Department of Mental Health to license a facility for a 3-year period versus the current 2 years. Sponsor: Rep. Savage Status: Failed	Support
H6057	This act would establish a community development corporation fund to supplement monies for community-based, non-profit organizations whose purpose it is to provide affordable housing. Sponsor: Rep. Dennigan Status: Failed	Support
H6097	This bill would correct a federal law prohibiting persons who have ever had a drug-related felony from receiving food stamps or public assistance. Sponsor: Rep. Almeida Status: Failed	Support
H6314	This bill would change the title of Mental Health Advocate to Behavioral Health Advocate, and expand the Advocate's responsibility to include substance abuse treatment facilities' clients. Sponsor: Rep. Watson Status: Failed	No position
S106	The Special Legislative Commission studying services to persons with mental illness, who are involved in the criminal justice system. The bill would extend the life of the Commission and expand its membership. Sponsor: Sen. Perry Status: Passed	Support
S262	This bill would prohibit discrimination in housing against persons receiving government aid. Sponsor: Sen. Perry Status: Failed	Support
S265	Allows consumers to use discounts or limited-use, free-supply offers on prescriptions purchased through 'point-of-sale' or 'mail-in coupons.' These one-time saving opportunities were previously prohibited. Sponsor: Sen. Issa Status: Passed	Support
S265/H5614	The Neighborhood Opportunities Program would continue the effort of providing state funding (\$5 million/year) for the development of affordable housing. Sponsor: Sen. Alves, Rep. Fox Status: Included in State Budget	Support
S378A	Would mandate that the State pay 15% of the cost of prescriptions for persons receiving Social Security Disability Income. Sponsor: Sen. Goodwin Status: Failed	Support
S489	This act would require that landlords provide 60 days notice before canceling a month-to-month lease, or raising rent for residential tenants. Sponsor: Sen. Pichardo Status: Passed	Support
S510	The Public Assistance Act would prohibit the State from reducing its portion of a person's monthly SSI payment. Sponsor: Sen. DaPonte Status: Failed	Support
S771	This act would authorize and direct the Department of Human Services to provide a Medicaid buy-in option for persons, ages 16-24, who would meet eligibility requirements for the SSI program but for higher income/resources. Sponsor: Sen. Tassoni Status: Failed	Support

S881	The Workplace Violence Prevention Act would require all licensed health care facilities to develop plans to track the rate and incidence of violence, the training of employees in the reduction and prevention of violence; and, as much as is feasible, to minimize the risks to patients, visitors and staff. Sponsor: Sen. Roberts Status: Failed	No position
S479	This act would state that tenants are responsible for the actions of others who might engage in violent or illegal behavior while in the tenant's apartment, whether the tenant was aware of the behavior or not. Sponsor: Sen. McCaffrey Status: Failed	Opposed
S469	The Residential Landlord/Tenant Act would simplify the eviction process. Sponsor: Sen. McCaffrey Status: Passed	Opposed

Training tools equip providers to empower their clients

By Susan Turner, Training Director, RICCMHO

Since its inception, RICCMHO has demonstrated its commitment to helping meet the training and staff development needs of the behavioral health care community. Each year, from September through mid-June, we provide training programs to our members and, to a limited extent, to other service providers in the system. These providers serve adults, children, and families across the full spectrum of mental health, and substance abuse treatment issues. Some of our ongoing training activities include: Community Support Professional (CSP) certification, Supported Employment Professionals (SEP) certification, Service Coordination Training, Critical Incident Stress workshops, and coordination of the Community Mental Health Organizations' Statewide Training Calendar.

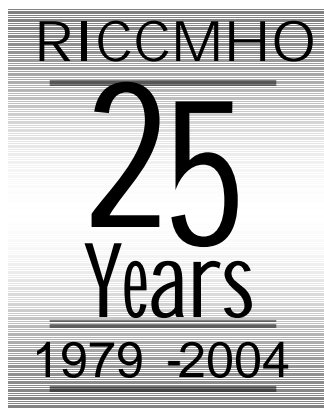
If you are a provider and would like more information on these programs, contact your supervisor or Human Resources Director.

Tips from the trainers

“When responding to critical incidents and trauma in the community, it is essential for the caretakers to take care of themselves and each other.” –**Gerald W. Lewis, PhD.**, Director of COMPASS, and author of *Critical Incident Stress and Trauma in the Workplace*, and co-author of *Workplace Hostility: Myth and Reality*

“Recovery is work! Having a meaningful job supports the process and often it begins with the encouragement of staff.” –**Vicki Ferrara, M.A.**, Employment Coordinator, Paul V. Sherlock Center on Disabilities, Rhode Island College

“It's all about relationships. Clients do better when they have need-fulfilling relationships in their lives.” –**James G. Thomas, M.A.**, Director of Clinical Services, Riverwood Mental Health Services



RICCMHO to celebrate 25 years of service

The Council will mark its 25th anniversary in 2004. The planned spring celebration will look back at the expansion of the state's community mental health organizations and look forward to the challenges facing our system. Watch for details in the next issue of *Changing Minds*.

RICCMHO Members:

Community Counseling Center, Inc.

East Bay Mental Health Center, Inc.

The Kent Center

**Mental Health Services of Cranston,
Johnston, and Northwestern Rhode
Island, Inc.**

**Newport County Community Mental
Health Center, Inc.**

**NRI Community
Services, Inc.**

The Providence Center

Riverwood Mental Health Services, Inc.

South Shore Mental Health Center, Inc.

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The Rhode Island Council of Community Mental Health Organizations is a non-profit association of the state's community mental health organizations.

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