

NASMHPD Medical Directors Council

Minneapolis, Minnesota

Meeting Minutes

July 29, 2001

Participants:

Alan Radke, M.D. (Minnesota) - Acting Chair

Kenneth Casimir, M.D. (Wisconsin)

Al Zachik, M.D. (Maryland)

Steve Karp, M.D. (Pennsylvania)

Tom Muller, M.D. (Georgia)

Bob Glover, Ph.D. (NASMHPD)

Roy Praschil (NASMHPD)

Ted Lutterman, Ph.D. (NASMHPD Research Institute)

Noel Mazade, Ph.D. (NASMHPD Research Institute) via phone

Introduction/Announcements

Alan Radke, M.D. chaired the Medical Directors Council meeting as Tom Hester, M.D. could not attend the meeting. Dr. Hester has been named the Medical Director for Hawaii while Tom Muller, M.D. is Georgia's Interim Medical Director. Al Zachik, M.D., Director, Office of Child and Adolescent of Mental Health Services in Maryland attended the meeting for Brian Hepburn, M.D., Maryland's Medical Director.

Resource Development Committee

Bob Glover, Ph.D. gave an update on the finances that support the Medical Directors Council's activities. Each year the Council issues two technical report at a cost of \$35,000 - \$50,000 per report and hosts an annual Best Practices Symposium which costs \$20,000 - \$30,000. Thus, the Council needs \$120,000 - \$150,000 per year to cover the cost of its activities. For 2001, NASMHPD has only received a \$50,000 financial commitment from Janssen Pharmaceutica, Inc. to support the Best Practices Symposium. NASMHPD would like to obtain additional unrestricted funding from multiple companies.

Council members were invited to informally assist this process within the parameters of their states' rules. If desired, Medical Directors can advise pharmaceutical company representatives about the Council and the scope and utility of its activities.

Dr. Glover also spoke about the upcoming winter Commissioner's Meeting in Washington, D.C., December 2-4, 2001. The meeting agenda will focus on collaboration and partnerships at several levels, featuring discussions with representatives from HUD, Medicaid, Substance Abuse and advocacy organizations like NAMI. Dr. Glover indicated that the Council could present some of its collaborative work (e.g., the technical report with the Medicaid Directors on polypharmacy). NASMHPD welcomed the Council's agenda suggestions on other cross-system issues, such as treatment of and use of seclusion and restraint with individuals with MR/DD and mental illness.

Dr. Glover mentioned several other initiatives of interest to Medical Directors. As follow-up to a recent meeting of state cross cultural and deaf coordinators, a smaller group will convene in late 2001 or early 2002 to address issues relevant to those who are deaf and have mental illness, including the use of seclusion and restraint. Rupert Goetz, M.D. (Oregon) will be involved with this effort.

NASMHPD is also working with the Council of State Governments (COG) on an adult criminal justice initiative. A report will be issued in January 2002 that summarizes the findings of several work groups and provides recommendations for courts, police, corrections and the mental health system. NASMHPD is establishing a President's Task Force on Mental Illness and Justice (which will include juvenile justice). A representative from the Medical Directors Council will be asked to serve on this Task Force. Medical Directors cited several of the challenges in serving the criminal justice population, including the lack of interface between the mental health and corrections systems, the ethics and logistics of treating people with mental illness within criminal justice; the correct placement (hospital or jail) for people with conduct or borderline personality disorders; and budget issues. Ken Casimir, M.D. (Wisconsin) agreed to review and comment on the draft COG report.

Report on 2001 Medical Directors Technical Reports

Roy Praschil has requested that both technical reports be ready for distribution at the Best Practices Symposium in October. As of the July meeting, the 2001 reports had the following statuses:

Polypharmacy Technical Report. Dr. Karp relayed the report's status per his conversation with Joe Parks, M.D. (Missouri), editor of the report. Dr. Parks and other work group participants were in the process of closely reviewing the draft report. The Council's Editorial Advisory Board will see the report's next iteration.

Dr. Karp informed the Council that the report outlined principles and recommendations, including times when the use of polypharmacy should be avoided. Medical Directors urged that the report's recommendations address consideration of gender and ethnic differences. While some Medical Directors expressed interest in using and circulating the current draft report, the draft cannot be disseminated as a NASMHPD or Medical Directors Council publication until final approval by the NASMHPD Board.

Outpatient Commitment. Dr. Hepburn serves as editor for this report and Dr. Radke provided an update. The work group is reviewing a second draft of the excellent report prepared by the technical writer. The report recommends addressing the lack of engagement with consumers in their treatment and increasing concern for consumers' comprehensive health needs.

Other discussion items related to the technical reports included:

- Proposals to present at the upcoming APA Psychiatric Services Institute were submitted and approved. Dr. Radke will present on the Sexual Predators Technical Report on October 11th and Dr. Goetz will speak on the Seclusion and Restraint Technical Reports (I and II) on October 11th.

■ The Council will create executive summaries of the technical reports for submission to journals and newsletters read by psychiatrists in the public sector. Participants suggested submitting articles to journals issued by the Academy of Child Psychiatry, American Academy of Community Psychiatrists and APA.

■ The Council still needs to check with Roy Praschil about the status of posting the technical reports on the web.

■ Participants were unaware of any changes in status for the members of the Editorial Advisory Board.

■ Discussion and decisions about the topics for the 2002 technical reports will occur at the Symposium in October. In addition to ideas that might emerge from the Commissioners' Meeting, previously suggested topics included: dual diagnosis (mental retardation/mental illness); utilization management of planning for services (private/public beds, levels of care); juvenile forensic issues; joint project with NASMHPD's Forensic Division; mental health courts; trauma and recovery; suicide prevention; implementation strategies for states for evidenced-based practices and telepsychiatry.

2001 Best Practices Symposium Report

The Medical Directors' Council 2001 Best Practice Symposium will occur in October 8-9, 2001 in Orlando, Florida just prior to the APA's Psychiatric Services Institute. Council members provided updates on the Symposium's sessions:

NRI's Performance Measurement System Update. Dan Luchins, M.D. (Illinois) is arranging for faculty.

Children Psychopharmacy Issues. Drs. Hepburn, Knapp and Zachik have been planning this session via conference calls. Penny Knapp, M.D. (California) will present and address psychopharmacy for children with ADHD. The planners will also contact Peter Jenssen, M.D., formerly of NIMH now with Columbia University, to discuss the evidenced-based and multi-site reviews of stimulants for ADHD sponsored by NIMH. Other suggestions for faculty members included Paul Neuhouse, M.D. (also involved with the NIMH study) and Kim Frasier, M.D., Harvard University, who is doing work on children's schizophrenia. While ADHD will be the focus diagnosis, Medical Directors also expressed interest in a broader discussion involving differential diagnosis.

Continuity of Care from the Hospital to the Community (Successes and Failures). Dr. Radke has arranged for Ron Diamond, M.D., Department of Psychiatry, University of Wisconsin to give the keynote. The session will also include a panel of three representatives from states which have full control of their public mental health systems. The panel will discuss the breakdowns in treatment due to politics and structures within communities, hospitals and the overall system.

Update on practice guidelines including changes by APA and modifications by the tri-universities. Drs. Shon and Park have planned a session that provides updates on the various guidelines in use: APA guidelines, PORT, consensus guidelines and TMAP.

State Updates

The Pennsylvania State Mental Health Commissioner will become the Director of the Substance Abuse and Mental Health Services Administration (SAMHSA). Currently, Pennsylvania is being sued by advocates for not spending enough on wraparound services at the same time HCFA is auditing the state for its high wraparound expenses.

Wisconsin has opened the San Bridge Behavioral Treatment Facility to provide ongoing treatment for offenders after their sentences have run out. Center for Medicaid and Medicaid Services (formerly HCFA) recently conducted a survey of one of the state's Institutes; the survey seemed to focus primarily on staffing and programming.

Georgia is working on changes to the Medicaid Rehabilitation option and improving Medicaid reimbursement for community programs. The state also completed its system-wide Joint Commission survey of all state hospitals and all state hospitals were accredited. The surveyors spent more time on patient units and talking to direct line staff.

Minnesota's mental health department is dealing with a budget crisis; strike risk from its union employees; and transition issues related to the process of reorganizing and simplifying state-run services.

Miscellaneous

Noel Mazade, Ph.D. and Ted Lutterman, Ph.D. of the NASMHPD Research Institute joined the Council to discuss a potential resource, (www.biospace.com). Dr. Mazade relayed that the site contained research information on 4,000 clinical trials that are in process in the United States and Europe on 450 disease targets, a number of them in psychiatry. The site is active, receiving 800,000 new visitors each month. Dr. Lutterman displayed several web pages on pharmaceuticals for schizophrenia, including information on current trial stages.

NRI Performance Measurement System (ORYX) will conduct two upcoming regional meetings to discuss user group, case mix and risk adjustment issues. The Western Regional Meeting will follow the WIPSHA meeting and occur September 9 and 10, 2001 in Park City, Utah. The Eastern Regional Meeting will be October 26 and 27, 2001 in Safety Harbor, Florida Center. Dr. Radke encouraged that representatives from each state attend the meetings

In response to a brief discussion on the challenges of attracting psychiatrists to work in state hospitals, Medical Directors suggested that a future Council meeting address strategies for recruiting psychiatrists into public psychiatry.

Next Meeting

The next Medical Directors Council Meeting will occur during the afternoon of October 9, 2001 in Orlando, Florida as the final session of the Medical Directors Council Best Practices Symposium.