

Monthly DMHAS Briefing Report

Mental Health Transformation State Incentive Grant
October 2006

Mental Health Transformation Initiative highlights for the month of October include:

- Completion and submission to the Substance Abuse and Mental Health Services Administration (SAMHSA) of the Comprehensive Mental Health Plan (CMHP).
- Meetings of Oversight Committee Priority Setting and Implementation Staging and Communications Sub Committees.
- Reconvening workgroup conveners to plan for the next phase of workgroup meetings.
- A first electronic Town Hall Meeting held on October 26th.

The Comprehensive Mental Health Plan (CMHP) a SAMHSA required reporting of Mental Health Transformation year one activities and a roadmap of strategies to be implemented in year two was completed and submitted to SAMHSA on October 17, 2006.

Connecticut's CMHP applied knowledge gained from a Needs Assessment and Resource Inventory (NARI) report and summaries submitted by workgroup conveners describing processes undertaken to identify workgroup recommendations and associated strategies for achieving these recommendations. In addition, the CMHP outlined Connecticut's MHT governance structure and steps taken to cull the list of 48 original recommendations down to seven initial steps to transform Connecticut's mental health system and an eighth based on SAMHSA feedback of the NARI. The initial eight steps represent the highest rated recommendations for each workgroup. In year two, workgroups will reconvene to develop strategies to implement each step. This process may require reassessing workgroup membership however maintaining active consumer and family involvement is the primary goal.

The initial steps for transforming Connecticut's mental health system are:

- Prevent suicide and increase mental health awareness through health education in schools.
- Give individuals and families a voice regarding mental health services through a universal feedback tool.
- Identify and eliminate mental health disparities through standardized data collection.
- Expand access to prevention, screening, early intervention and treatment by maximizing state and federal dollars.
- Prevent youth from becoming involved in or having repeated involvement in the juvenile justice system through the use of evidence-based practices.
- Provide Connecticut citizens with a first of its kind comprehensive mental health website to improve access to mental health information and resources.
- Expand and enhance mental health training throughout Connecticut's workforce.

- Protect and enhance the rights of persons with mental illness.

Also in October, conveners of the MHT workgroups gathered to plan for the next phase of meetings. Instrumental in this is a Yale evaluation of the workgroup's year one process, the results of which are anticipated in the next month, and the development of an implementation planning form designed to provide uniform documentation of activities to be undertaken by each workgroup in year two. Workgroups will also begin to meet in the next month. The Priority Setting and Implementation Staging sub-committee will review and provide guidance to the workgroups as they plan for implementation of the initial recommendations and will begin to create a strategy for the remaining recommendations.

To share the identified steps with a broad audience of Connecticut residents, members of the initiative's Oversight Committee in the form of the Communications sub-committee planned and hosted the State's first electronic Town Hall meeting. Partnering with the State's Community College system and the University of Connecticut Health Center, the Town Hall meeting allowed Connecticut residents to either attend in person, one of seven sites, or to attend electronically via the World Wide Web. Locations included: Northwestern Connecticut Community College, Norwalk Community College, Gateway Community College, Three Rivers Community College, Quinebaug Valley Community College, Asnuntuck Community College and the University of Connecticut Health Center. To accommodate those who were unable to attend a Town Hall Meeting location, the meeting was also offered electronically. Participants could log on to the DMHAS web page to view the meeting live and e-mail questions and comments in to the meeting site to be included in the discussion. This was a particularly exciting feature of the meeting, with community based providers and family collaboratives hosting small groups of participants at local sites all over the state. Over 125 pre-registered to attend the meeting, learn about the MHT initiative and initial steps and to contribute to a discussion aimed at shaping the vision for mental health system change.

Preliminary analysis of feedback from Town Hall meeting evaluations demonstrates the success of using technology as a practical and efficient means to create a forum for open communication between state system representatives, members of the service community, and residents of the state. While the meeting was successful in its identified goal to elicit input from Connecticut residents, a most significant accomplishment of the meeting in terms of MHT goals, is the enthusiasm with which state agencies and other key stakeholders collaborated to plan and host the event.