

To: House Social Services Budget Committee

From: Doug Wallace, KDADS Behavioral Health Services Commission

Date: March 15, 2016

Subject: KDADS Adult Continuum of Care Committee

Chairman Carpenter and members of the Committee:

I appreciate the opportunity to present testimony on the Adult Continuum of Care (ACC) Committee, which was convened last year at the request of the Secretary of the Kansas Department for Aging and Disability Services (KDADS). A diverse group of stakeholders, some of whom you'll hear from today, was assembled to review the current behavioral health system and to make recommendations to improve the system. Specifically, the ACC Committee was charged with developing recommendations that could be implemented by the KDADS Secretary in a relatively short timeframe, within existing authorities.

The ACC was designed to build upon the work of the Governor's Mental Health Task Force and Hospital and Home Committee to review and make recommendations for transforming the behavioral health system to ensure an effective array of behavioral health services were available to promote recovery and community integration. This review included the current capacity of both state mental health hospitals as well as resources available in the communities.

The ACC Committee met five times from May 21, 2015 through July 16, 2015. KDADS staff organized the meetings and provided administrative support to the committee. Through a series of facilitated conversations, the ACC Committee examined the current behavioral health continuum of care to identify current resources, gaps, barriers, and opportunities for improvement. For the purposes of these discussions, the continuum of care system was split into the following categories; state mental health hospitals, community inpatient facilities, Nursing Facilities for Mental Health, integrated care, community based housing, and community based services. The ACC Committee split into smaller groups to discuss each category in detail. Each small group identified top barriers and recommendations in each category.

The role of KDADS was to coordinate the ACC committee meetings. KDADS provided staff to assist in facilitating the smaller group discussions, and provided clarification or additional information as requested. However, the small group discussions that led to the recommendations were driven by the committee. Additionally, the content of the report and the final recommendations are solely a product of the committee. KDADS provided only technical assistance in compiling the final report document.

The ACC Committee submitted a final report to the Secretary containing a list of recommendations for transforming the behavioral health system, which begin on page 12 of the report. Committee members will be discussing some of those recommendations. I will note one procedural recommendation, which was to reconvene members of this committee to "periodically monitor progress, revise the recommendations and provide input regarding more specific circumstances." The committee included in the report a statement that

the recommendations “. . . were developed during a short time period. With more time, a more thorough review of the continuum of care system, including the capacity of the state mental health hospitals could occur and additional recommendations could be identified.”

In light of this recommendation, the ACC Committee has been moved under the purview of the Governor's Behavioral Health Services Planning Council (GBHSPC) to carry forward continuum of care efforts. The agency works very closely with the GBHSPC on a regular basis to address numerous behavioral health issues impacting Kansans, and we are committed to this effort. Specifically, agency representatives, including Interim Secretary Tim Keck, Behavioral Health Services Commissioner Bill Rein and myself, have met with the chair of the GBHSPC to form a task force to continue the ACC Committee work. We envision this GBHSPC subset monitoring the progress of the ACC Committee recommendations, revising existing recommendations and making any additional recommendations necessary. This group could also focus on select higher priority recommendations from the ACC Committee report. We are currently formulating the charter for GBHSPC task force and hope to have the group operational very soon.

Thank you for the Committee's consideration of the ACC report. I appreciate your time and would be pleased to answer any questions you may have.