

NH Union Leader – May 4, 2017

Derry police train to help people with mental illness they encounter

By ETHAN HOGAN Union Leader Correspondent

The Derry police department's entire force has undergone training and certification on mental health first aid. The Center for Life Management worked with Derry police on an eight-hour training course to better equip police officers for interactions with people who are having mental health problems. The course taught officers how to handle situations with individuals suffering from mental health episodes including suicidal thoughts, anxiety, depression and substance abuse, said Peter Reinertsen, director of Emergency Services at the Center for Life Management.

Reinertsen said that police officers are able to diffuse potentially dangerous suicide, drug use or PTSD situations using an action plan during initial interactions. Using a different tone of voice and by being more empathetic with individuals, Reinertsen said officers could reduce the risk of a situation escalating. "They still need to take care of their personal safety but in terms of interacting, we want them to use different verbiage so they are reassuring and non-judgmental," said Reinertsen. To diffuse a potentially dangerous situation, Reinertsen said that officers are trained to interact with individuals in a supportive manner. He said that routine police interactions could be too aggressive and intensify a problem. Reinertsen said that teaching the officers about mental health resources is also an important part of helping the people officers interact with. Whether an arrest is made or not, if officers know about mental health resources in the area, they can help get the people in need to those places.

Drug treatment programs such Regional Addiction Program are available and officers can talk to individuals about how to reach out to those resources. The training course also taught officers about the stigmas related to drug use and addiction, so they could better understand how to deal with those affected by the epidemic. "We reviewed many of the common drugs and there was a lengthy conversation about the opioid epidemic in our region," said Reinertsen.

The course is specially designed for police officers, first responders and other public safety professionals, to give them response options when dealing with mental health situations. "I feel that we have been better able to serve the public as a result," said Derry Police Chief Edward B. Garone in a statement. Reinertsen said that other police departments in the state have undergone mental health first aid but that Derry was the first to have every member of their force certified.

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CEO of NH Hospital resigns after state discovers Dartmouth Hitchcock in violation of staffing contract

By DAVE SOLOMON

CONCORD — Dartmouth-Hitchcock has been short two psychiatrists at New Hampshire Hospital since January and is in violation of a controversial contract approved by the Executive Council last fall, according to Jeffrey Meyers, commissioner of Health and Human Services. Meyers delivered the news to an outraged governor and Executive Council on Wednesday morning. Gov. Chris Sununu announced that he asked NHH Chief Executive Officer Robert MacLeod to resign, and has appointed Donald Shumway, former CEO and president of the Crotched Mountain Foundation, to step in on an interim basis.

Councilor Andru Volinsky, D-Concord, called for an outside evaluation of the quality of care at the state psychiatric hospital paid for by Dartmouth-Hitchcock, while Sununu ordered a review of the contract

and any other compliance issues by the attorney general. The state might seek some form of reimbursement from Dartmouth-Hitchcock, according to Sununu, who said, "We've been paying for a full staff and not getting it." Meyers said he will now monitor contract compliance on a weekly basis and will ask for medical staff schedules by name and position. "We can't go forward trusting the word of an organization that at this point isn't trustworthy," Sununu said.

In a statement released on Wednesday, Dartmouth-Hitchcock Senior Director of External Relations Rick Adams disputed the state's interpretation of the situation. "From the inception of this contract, Dartmouth-Hitchcock has provided the state, including through weekly reports, current and projected staffing levels and any projected deficiencies," he said. "Throughout the course of this contract the state agreed that the staffing levels have been appropriate and the patient care is high quality. That is why we were surprised, and deeply troubled, to receive the commissioner's letter last evening and to learn of the statements made at this morning's meeting of the Executive Council."

Vacancies in January

The two vacancies occurred in January, when two psychiatrists were appointed to management positions, and their psychiatric posts were never filled, according to Meyers. He said Dartmouth-Hitchcock has not yet responded to the letter of noncompliance he sent on Tuesday. According to Meyers, psychiatrist Alexander P. de Nesnera was named medical director on the retirement of David Folks in January; psychiatrist Gary Moak was named interim associate medical director. Neither staff position was filled, he said.

"So that's what happened," he told the governor and councilors at their twice-a-month breakfast meeting prior to the formal Executive Council session. "I take full responsibility for the fact that reports went out to you that were inaccurate." The letter of noncompliance delivered on Tuesday, just 24 hours after Meyers said he discovered the problem, requires a corrective action plan from Dartmouth-Hitchcock within five days.

Dartmouth-Hitchcock was awarded the contract last fall amid controversy surrounding the departure of several psychiatrists at the hospital who were upset about the transition in management and the refusal of the health care provider to negotiate with them on contract terms. They said at the time that Dartmouth-Hitchcock would not be able to adequately staff the facility. As an executive councilor, Sununu at one point argued that the state should re-bid the contract but was out-voted.

Seeking remedies

When asked if the state could now revoke and re-bid the staffing contract, Sununu said there are concerns about "disruption of care," but added, "We will see what legal remedies are available to us." Despite several conversations with Dartmouth-Hitchcock officials over the past two days, Meyers said they have yet to formally respond, but have told him they believe that general psychiatry is over-staffed at the state hospital and quality of care has not been compromised.

"The people who were against this contract predicted this would happen," said Councilor David Wheeler, R-Milford. "We gave Dartmouth-Hitchcock the benefit of the doubt, and here we are in the same place. It's very disturbing." Because of the staffing concerns, Dartmouth-Hitchcock has been required to submit weekly reports to demonstrate that staffing is being kept at contracted levels. At an Executive Council meeting two weeks ago, Councilor Chris Pappas, D-Manchester, asked Meyers if those

reports were still forthcoming, which triggered Wednesday's revelations. "The lack of compliance is concerning," said Sununu, "but the misrepresentation of the information ... that's the thing that really gets to me."

Regarding the governor's plan to seek some form of reimbursement, the statement from Adams suggests Dartmouth-Hitchcock will contest any such attempt. "In light of questions raised regarding compensation for Dartmouth-Hitchcock, it is critically important to note that the agreement with the state is a fixed-price contract, and D-H has only been paid by the state through January of this year," he wrote. "Any suggestion that Dartmouth-Hitchcock has not been completely forthcoming with the state is factually incorrect and reflects a misunderstanding that requires clarification. Consequently, we have requested a meeting with Gov. Sununu and Commissioner Meyers to discuss our mutual concerns and to forge a path forward."

Warnings recalled

Sean List, an attorney who represented the Concerned Psychiatric Professionals of New Hampshire Hospital, says some of his clients' worst fears have been realized. "All I can say is we warned the state over and over again that this is what would happen. My clients said multiple times that there wouldn't be enough staffing for the state hospital," he said. "This goes to show that the individual care providers who are dedicated to fighting the issue of mental illness in this state should be listened to and acknowledged when they have significant concerns."

Concord Monitor – May 4, 2017

Report: \$19M for mental health bed bill

Measure looks to increase state's treatment capacity, boost oversight at DCYF

By ELLA NILSEN

A bill tasked with overhauling New Hampshire's mental health system and child protective services now has a price tag attached to it. The Office of Legislative Budget Assistant estimates it will cost \$9.27 million in state general funds in fiscal year 2018 and another \$10.19 million the following year to add 68 mental health beds around New Hampshire and beef up oversight and staff for the state's embattled Division for Children, Youth and Families.

The bill was unanimously passed with amendment by the Senate Health and Human Services Committee on Tuesday. It was recently introduced by Republican lawmakers in response to a lack of mental health beds across the state and problems at DCYF. These have proved to be significant issues for the state's Department of Health and Human Services; a lack of community mental health beds and limited space at New Hampshire Hospital has created a backlog of patients who are waiting in emergency rooms for a bed to open up. Meanwhile, DCYF has come under fire from advocates and state lawmakers after two toddlers were killed by parents whom the agency had investigated for abuse.

"Amending this legislation to provide additional mental health beds across the state and establishing greater oversight at DCYF is a great start to address two pressing issues at the Department of Health and Human Services," Senate Majority Leader Jeb Bradley, a Wolfeboro Republican, said in a statement. The largest chunk of money lawmakers are requesting is for 68 new beds for mental health patients. Lawmakers and state officials are also looking for ways to free up more beds at the state psychiatric hospital.

An updated version of the bill also calls on Health and Human Services Commissioner Jeffrey Meyers to create a plan to remove 24 children from New Hampshire Hospital and move them elsewhere as they continue receiving care. “These youths are widely varying in ages, so it’s inappropriate to put two in the same room,” Bradley said. “If the youths were able to be moved successfully, it would free 24 beds, so there would be 48 beds for adults.”

Meyers is tasked with creating the plan by November and has already started talking to outside groups about housing and care for the children. “I’m talking to a number of providers,” Meyers said. “Those conversations are continuing.” Last week, Meyers said he plans to seek \$3 million to start planning and drawing up designs for a new children’s unit at New Hampshire Hospital. The commissioner said Tuesday that the plan is still in the works. “There really are no other options to expand capacity at New Hampshire Hospital,” he said.

Meyers said he was happy to see the bill pass committee and head to the full Senate. “There’s obviously a significant issue in New Hampshire,” he said. “All of the mental health measures in the bill will address some of the gaps.” The bill’s passage in committee won praise from New Hampshire Hospital Association President Steve Ahnen, who commended Senate leaders, Meyers and Gov. Chris Sununu for their commitment to reform. “Hospitals remain committed to working collaboratively with stakeholders across the state to address this issue from a systems perspective,” Ahnen said.

The bill also contains significant reforms to DCYF, adding a new office of child advocate and transferring the DCYF legal director to the state Department of Justice, rather than the Department of Health and Human Services. The Office of the Child Advocate would provide outside oversight of DCYF, with access to some of the agency’s records and the ability to subpoena witnesses. DCYF would be required to immediately report any child death to the office, which would submit an annual report on the agency to lawmakers.

The bill would also create an oversight commission tasked with analyzing the effectiveness of DCYF’s programs. It would make the head of DCYF an assistant health commissioner who must be approved by the Executive Council for a four-year term. Senate President Chuck Morse called the legislation “long overdue.” “It is imperative that we live within our means, but protecting children and those suffering from mental illness must always be a top priority,” Morse said.