

Monadnock Ledger-Transcript – May 8, 2017

Former Crotched Mountain president appointed as interim leader at NH hospital after staff shakeup **By ABBY KESSLER - Monadnock Ledger-Transcript**

The former CEO and president of the Crotched Mountain Foundation has been appointed to take over on an interim basis at Dartmouth Hitchcock's state-run psychiatric hospital. Donald Shumway, who retired from the foundation in 2015, was appointed to the position by Gov. Chris Sununu after Sununu asked New Hampshire Hospital Chief Executive Officer Robert MacLeod to resign.

The staffing shuffle came after a member of the state's executive council discovered the facility has been short two psychiatrists since January, which is in violation of an agreement with the state, according to multiple news organizations. Shumway led Crotched Mountain for 13 years before announcing his resignation, according to a press release sent out in September 2015. Prior to his tenure at Crotched, Shumway served as the commissioner of the state's Department of Health and Human Services, a position appointed by then Gov. Jeanne Shaheen in 1999. "He made it his life's work to transform the care, and assure the well-being, of New Hampshire's vulnerable citizens," the release says.

It says Shumway stepped away from the position in order to devote more time to his family. Jim Varnum, who has been on the Crotched Mountain Foundation board of trustees for more than 10 years, said he has known Shumway for a long time and worked closely with him during his tenure as president. Varnum said Shumway's experience at Crotched makes him a good candidate to lead the hospital out of this turbulent time. "He has worked with very difficult human interactions and experiences whether that be at Crotched Mountain or during his time at Health and Human Services where he worked for years," Varnum said "...He's extremely service oriented and committed to working with families — children and families — in very difficult situations. I think his background is very strong to deal with whatever needs to be done."

David Johnson, director of marketing and communications, said on Monday afternoon that Shumway oversaw the completion of its accessible hiking trails, the skills center, and the wood chip power plant. He said Shumway hasn't had an active presence at Crotched since he departed from the post.

NH Public Radio – May 8, 2017

Latest Plan to Bolster State's Mental Health System Missing Key Fix **By Todd Bookman**

In New Hampshire, it's not all that often that a sitting governor shows up and testifies before lawmakers, making the case for why a pending bill should or shouldn't be passed. Governor Chris Sununu, though, did just that recently in support of an amendment to House Bill 400, a measure that seeks to bolster the state's failing mental health system. "It's absolutely unacceptable, and it is unconscionable that we have let it go on this long," Sununu told members of the Senate Health and Human Services Committee.

"To be blunt about it, these problems could have and should have been addressed long ago. And I can't speak for previous administrations, but I can tell you in my first 100 days here, it has come to stark new light, to me, just how problematic, how much in disarray, our mental health system truly is." Disarray

wasn't always the norm. In the 1980s and 90s, New Hampshire had one of the top-rated systems in the country. But underfunding, chronic staffing shortages and growing need have stretched resources thin.

The number of inpatient psychiatric beds across the state has fallen, including at state-run New Hampshire Hospital, forcing patients--adults and children--to be held in emergency rooms and hospital hallways for days until space becomes available. The wait-list for low income residents to see an outpatient counselor runs hundreds of people deep in some areas of the state. Justin Looser works in the behavioral health unit at Portsmouth Regional Hospital, where despite a recent decision to add more psychiatric beds, patients in need of care often languish in the emergency room due to high demand

"It is the hardest thing--I think any of our clinicians will say this--to meet a patient, assess a patient and then tell their family, and the patient, that they have to sit and wait, there are no beds available to them," he says. "It is a problem that is unique to any other medical diagnosis. We would never withhold that for anything else." That disparity in care led to a major lawsuit against the state filed on behalf of patients. In 2014, the suit was settled, with New Hampshire pledging to invest more in community-level treatment.

While that money continues to flow, it still isn't meeting the demand. This new plan, backed by Gov. Sununu and top Republicans in the GOP-majority Senate, would spend an estimated \$10 million more in state money. It funds 20 additional hospital beds aimed at treating the sickest of the sick. There's also money for 40 community beds, such as apartments or group homes for people who don't need hospital-level care, but aren't ready to be on their own.

And third, it provides money for more mobile crisis units. "In clinical terms, we do what's called a lethality assessment. In normal layman's terms, it's, we're asking questions about safety," explains Megan Parnell, who helps manage the mobile crisis unit for Riverbend Community Mental Health Clinic in Concord, the first such unit to launch in the state. Riverbend's 24-psychiatric crisis line takes in calls from people in distress or their loved ones. The phones never stop ringing. "So in February of 2017, we got 317."

After completing each of those 317 assessments, the team determines if someone needs emergency room care, or, if the mobile crisis unit is able to successfully divert--keep a patient in psychiatric distress safe outside of a hospital setting, saving the system money and being more humane in the process. The legislation would fund up to two more mobile crisis units in the state, and along with the new inpatient and community beds, may seem like a large investment. But advocates caution it's not enough. "There's no magic bullet. It's all just part of a bigger puzzle," says Jay Couture, CEO of Seacoast Mental Health.

She praises the bill, but says the state isn't addressing one of the biggest issues plaguing the system: an outdated Medicaid reimbursement rate. That's the money the state pays mental health providers for routine counseling and case management work for certain low-income patients. The reimbursement rate hasn't been increased since 2006. Without adequate funding for this basic care, counseling wait lists will continue to grow, and patients who could have been treated with less intensive therapies are put at risk of spiraling. Couture says there's still hope lawmakers will address that issue in the next budget. But until then, this legislation, for mental health advocates, is seen as a good start.

Concord Monitor – May 8, 2017

My Turn: State budget must address our most critical needs

By MARY JANE WALLNER

A two-year state budget is more than a bunch of numbers; it is a strategic vision for key investments in our priorities. What problems the Legislature and governor choose to address with these prioritized investments tells us a lot about what we value. New Hampshire would be well-served by a budget that offers solutions for both our immediate problems as well as our long-term issues. When asked what New Hampshire's biggest crisis is, Granite Staters cite our epidemic of heroin and opioid use. With more than one person dying from an overdose every day, a new and deadly opioid on the streets and the problem spread all across our communities, the public clearly gets it. The House budget, which did not pass last month, failed to adequately address this No. 1 crisis.

We've had a funding mechanism in place for over a quarter-century to pay for substance abuse treatment services by allocating a fixed percentage of alcohol sales profits. Nearly always underfunded by millions off a 5 percent requirement, last term the Republicans actually lowered the percentage to 1.7 percent. The treatment community and the Department of Health and Human Services have advocated to restore it to 5 percent this year. At three recent public hearings across the state, members of the public joined the chorus, asking for restoration of 5 percent of alcohol profits to be used to improve access to drug abuse treatment. But for some reason, House Republicans decided to keep the funding flat for the next two years and not raise the percentage of alcohol profits that go to funding prevention and treatment services. They decided to underfund drug and alcohol abuse services by almost \$7 million over the biennium despite the fact that Granite Staters tell us this issue is New Hampshire's most pressing problem.

Not content to turn their backs on desperate people seeking substance abuse treatment, the House budget also underfunded the critical problem of community mental health treatment and, in fact, reduced the funding for services from the governor's recommended level. We hear almost every day that dozens of individuals, in a mental health crisis, are forced to wait for days or weeks in an emergency department because there is no room at the state hospital. The department requested additional funds beyond the governor's budget to improve community mental health treatment, preventing some of the need for emergency inpatient treatment. The House budget, however, would have left people in psychiatric crisis waiting longer. This is cruel and inhumane. It is also not necessary.

Along with ignoring our most urgent problem, the Republican majority in the House also decided not to take steps toward addressing New Hampshire's most important long-term problem: our aging population. Our future prosperity absolutely requires that we attract young people to stay here, or to move here, and raise families. Welcoming young families requires a multi-faceted approach, but two immediate problems in the failed House budget stood out. Both focused on education, very important to families.

There is significant public support for expanding access to full-day kindergarten. Some communities have already done so, but state education aid only pays for half-day kindergarten. The burden in these towns falls on local property taxes and, therefore, families. With our declining enrollments as the state's population ages, most of the money to expand full-day kindergarten is already available in the education trust fund. Sadly, the Republican House majority turned its backs on New Hampshire's 6-year-olds and removed full-day kindergarten funding from the proposed budget.

Public higher education is more expensive in New Hampshire than in just about any other state. For many of our high school graduates, going to college out of state is a more affordable option, and a significant percentage of these young people will not return. The House budget funds public colleges and universities at the current level, thus guaranteeing that tuition will continue to rise. The budget essentially drives young people away from New Hampshire to pursue their dreams of a college degree, just when we need them to stay here, work and raise families. A state budget is more than a funding document; it is a prioritized vision for strategic investments in our prosperity. The House Republican budget failed to adequately address our most pressing current and future needs. Let's hope Republicans and Democrats in the Senate can do better for the citizens of New Hampshire.

Rep. Mary Jane Wallner of Concord is serving her 19th term in the New Hampshire House of Representatives, representing Merrimack District 10. She is the ranking Democrat on the House Finance Committee.