



UNIVERSITY OF HAWAI'I SYSTEM

TESTIMONY

SCR 126

Requesting the Adult Mental Health Division and the University of Hawaii School of Medicine, Department of Psychiatry, reestablish the psychiatric residency stipend program to meet the mental health care needs of underserved areas and populations.

Testimony Presented Before the
SENATE COMMITTEE ON HIGHER EDUCATION AND COMMITTEE ON HEALTH

March 31, 2005

by

T. Samuel Shomaker, MD, JD
Acting Dean
John A. Burns School of Medicine
University of Hawaii at Manoa

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State Capitol, Conference Room 212, 1:15 p.m.

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Chairs Hee and Baker, Vice Chairs Inouye and Chun Oakland and Committee members.

Senate Concurrent Resolution No. 126 is worthy and much appreciated attempt to recognize a previously successful program, called The Public Psychiatry Residency Recruitment Stipend, used to recruit community psychiatrists to serve in rural and isolated areas throughout Hawai'i. This program was one component of the larger State-University Collaboration Program between the State Department of Health's Behavioral Health Administration (DOH) and the University of Hawaii, John A. Burns School of Medicine, Department of Psychiatry (UH-JABSOM). The other components of the State-University Collaboration included: a) building a cadre of joint-appointed state-university faculty psychiatrists to serve at the Hawaii State Hospital, and designated community mental health centers/clinics throughout the State; b) establishing a statewide training network for medical students and psychiatry residents (in General Psychiatry and Child and Adolescent psychiatry) in these community settings; and c) a smaller telepsychiatry program for the Big Island Ka'u and North Kohala region.

A major draw of the Public Psychiatry Residency Recruitment Program was that it was competitive (i.e., only residents who met criteria for a career in academia were seriously considered), and it virtually guaranteed a career in academic medicine as a professor of Psychiatry. The State-University Collaboration Program brought the UH-JABSOM into rural community throughout the State of Hawaii. However, due to shrinking state funds, bureaucratic delays, and inability for the UH-JABSOM to meet the salary requirements set by the American Association of Medical Colleges (AAMC), which the DOH was able to do, the State-University Collaboration Program was dismantled in 2001, and re-designed to become an Academic Affiliation between the DOH and UH-JABSOM, which focused primarily on training medical students and residents with a few (4.5FTE) designated specialty joint-appointed faculty positions. The remaining DOH psychiatry positions converted back to DOH-employed physicians with uncompensated UH adjunct faculty appointments.

To re-institute the recruitment stipend, thorough financial and program due diligence would need to be led and completed by leaders with the DOH's Behavioral Health Administration, to examine whether or not such a recruitment stipend for residents would make sense for their vision of the Community Mental Health system. In addition, planners in the AMHD will need to examine whether or not they could provide residents with the same kind of career opportunities that the original program offered, e.g., a full academic appointment in a rural setting. JABSOM and its Dept of Psychiatry will work closely with Dr. Fukino and Ms. Michelle Hill (Deputy Director of Behavioral Health) and their Division directors to assist when needed in terms of assessing the feasibility of such a recruitment program.

Thank you for this opportunity to testify.