

STATE COUNCIL ON MENTAL HEALTH (SCMH)  
Behavioral Health Administration  
Department of Health, State of Hawaii

Virtual Meeting via Zoom  
July 13, 2021  
9:00 a.m. – 11:30 a.m.

- Members Present: **Aumer, Katherine; Beninato, Antonino; Fujii, John; Ilyavi, Heidi; Knightsbridge, Christopher; Koyanagi, Dina; Lau-James, Eileen; Pascual-Kestner, Rusnell “Rus”; Reed, Tara; Renfro, Jennifer; Ries, Richard**
- Members Absent: **Crozier, Charleen “Naomi”**
- Members Excused: **Martinez, Beatrice “Kau’i”**
- Guests Present: **Botero, Adriana; Dang, Cynthia “Cindi”; Jackson, Richard “Rick”; McKinney, Lauren; Reyno Yeomans, Raelyn; Rivera, Renee**
- DOH Staff Present: **Haitsuka, Stacy; Nazareno, Jocelyn**

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ ACTIONS/CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
I. Call to Order	<p>Chair R. Ries called the meeting to order at 9:01 a.m.</p> <p>Members and guests introduced themselves.</p> <p>The following definition of quorum was added to the agenda as of the November 10, 2020 meeting: Pursuant to <a href="#">Act 137-18 (SB 203)</a>, Chapter 92, Hawaii Revised Statutes: “(f) A quorum for purposes of doing business shall consist of a majority of the members serving on the council immediately before a meeting begins. (g) if a quorum is present when a vote is taken, the affirmative vote of a majority of members present shall constitute a valid act of the council unless this chapter, part I of chapter 92, the articles of incorporation, or the bylaws require a greater number of affirmative votes.</p> <p>For example, if only 15 of the entitled 21 members are appointed, at least 8 must be present to establish a quorum. To validate a council action, of</p>	For information only.		

	<p>the 9 members present, an affirmative vote from at least 5 is required.”</p> <p>Quorum was not established by 9:02am; therefore, R. Ries skipped ahead to the Community Input agenda item noting that the Council would come back to review meeting minutes when quorum was established.</p>			
<p>II. Meeting Announcements</p>	<p>R. Ries shared the following announcements:</p> <ul style="list-style-type: none"> <li>• He thanked Council members for their understanding over the past 15 months as the Council continues to do its part to stop the spread of COVID-19 by holding its meetings virtually. Handouts are distributed electronically a week before the meeting.</li> <li>• He noted Governor Ige and the County Mayors have relaxed requirements for neighbor island travel and that S. Haituka and J. Nazareno will keep the Council posted of any travel related changes that affect Council meetings including any changes made by the Department of Health (DOH) for their facility use guidelines regarding resuming in-person meetings in DOH facilities as well as the lifting of the Governor’s suspension for state-funded travel.</li> </ul> <p>For at least the next two month, for August and September, Council member should plan to participate in Council meetings virtually.</p> <ul style="list-style-type: none"> <li>• To use our time efficiently during today’s meeting, he asked Council members and guests to follow the following basic virtual Council meeting courtesies: <ul style="list-style-type: none"> <li>○ Please address any comments or questions to him.</li> <li>○ Members and guests may raise their “hand” virtually, type into the chat box, or orally get his attention during the meeting.</li> <li>○ Waiting to be acknowledged before speaking will keep the meeting organized and audio clear for note taking purposes.</li> </ul> </li> <li>• In general, only Council members are allowed to speak during the meeting, unless speaking as a presenter or sharing information during the Community Input section of the agenda. He will do his best to include and acknowledge guests when appropriate.</li> <li>• For Council members who take a break and step away from the meeting, please notify him before leaving as the Council needs to</li> </ul>	<p>For information only.</p>		

	<p>track of when Council members leave and return to verify quorum.</p> <ul style="list-style-type: none"> <li>• If at any time a Council member has an issue with the meeting connection, please consider closing your Internet browser and rejoining the meeting by re-clicking on the Zoom link or joining by phone as an alternate option.</li> <li>• If not speaking, please place yourself on mute. This will help with the feedback noise and will allow for everyone to hear speaker.</li> </ul> <ul style="list-style-type: none"> <li>• As previously e-mailed to Council members, there was a recent change with the DOH Deputy Director (DD) for Behavioral Health Administration (BHA). Eddie Mersereau returned to his previous position as the Administrator for the Alcohol and Drug Abuse Division (ADAD). Dr. Libby Char, Director of the DOH, selected Marian Tsuji as the new DD BHA. Ms. Tsuji started her new job on June 28<sup>th</sup>. <ul style="list-style-type: none"> <li>○ Council members support writing a letter of appreciation to Mr. Mersereau to acknowledge the Council’s gratitude for his exceptional leadership. The Council noting that the leadership change was political and he was not punished for doing an amazing job even outside of behavioral health such as running the isolation and quarantine station. He was in the process of starting a new direction and leaders may disagreed.</li> <li>○ Council members support writing a letter welcoming the new DD BHA and inviting her to a future Council meeting.</li> </ul> </li> </ul> <p>R. Ries shared the following Council membership updates:</p> <ul style="list-style-type: none"> <li>• Starting this meeting, the Council welcomes new member, Jennifer Renfro. She will join the Council as the Department of Education representative. Her term will end in June 2023.</li> <li>• C. Knightsbridge has applied for a second term and is currently in a holdover position pending Governor Ige’s interim appointment and Senate hearing for a second term.</li> <li>• T. Reed has reapplied for the Maui Service Area Board representative position and her application is pending processing with the Governor’s office.</li> <li>• Two other Service Area Boards – Oahu and Hawaii Island – have</li> </ul>	<p>Draft letter for review and approval at the next meeting.</p> <p>Draft letter for review and approval at the next meeting.</p>	<p>R. Ries/ S. Haitzuka</p> <p>R. Ries/ S. Haitzuka</p>	<p>8/4/21</p> <p>8/4/21</p>
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	<p>representatives pending processing with the Governor’s office.</p> <ul style="list-style-type: none"> <li>• Letts to the Judiciary, Human Services/MedQUEST Division and the Hawaii Advisory Committee on Drug Abuse and Controlled Substances (HACDACS) were drafted and finalized for their action. The Council will follow up in a couple months if no update is received.</li> <li>• To view the current Council membership, please refer to the Attendance Log for Fiscal Year (FY) 2022 in the meeting handouts.</li> </ul>			
<p>III. Consideration and Approval of Minutes June 8, 2021 Minutes</p>	<p>Quorum was established at 9:08 a.m.</p> <p>The draft minutes for the June 8, 2021 meeting were reviewed.</p> <p>The following amendments were requested:</p> <ul style="list-style-type: none"> <li>• None.</li> </ul> <p>C. Knightsbridge made a motion for the meeting minutes from the June 13, 2021 meeting be approved as amended. K. Aumer seconded the motion.</p>	<p>Motion passed unanimously.</p>		
<p>IV. Community Input</p>	<p>Pursuant to section 92-3, Hawaii Revised Statutes, community members will have three (3) minutes to speak during this time.</p> <p>R. Rivera shared the following Hawaii Service Area Board (HSAB) updates:</p> <ul style="list-style-type: none"> <li>• The HSAB used information from its recently completed Comprehensive Integrated Service Area Plan (CISAP) to make a one page document sharing who the HSAB is, who they serve.</li> <li>• The HSAB discussed creating an unofficial HSAB Facebook page.</li> <li>• HSAB members identified every substance abuse and mental health service provider on Hawaii Island and plans to reach out to each provider to understand the services provided and to invite the provider to attend HSAB meetings. So far, responses have been great. A treatment center in Hakalau shared a presentation about their organization at a recent HSAB meeting. A presentation from Bay Clinic Ho’oponopono staff will be scheduled soon.</li> <li>• There are several individuals interested in applying for the HSAB.</li> </ul>			

	<p>L. McKinney shared the following concerns:</p> <ul style="list-style-type: none"> <li>• She is a private practice licensed marriage and family therapist (LMFT) and a certified substance abuse counselor (CSAC) specializing in addiction treatment. She lives on Maui and sees patients statewide.</li> <li>• She is concerned about hospitalizations for mental health treatment. Emergency Department (ED) staff do not treat addiction when a patient presents in the ED with signs of addiction and overdose as well as mental illness.</li> <li>• She expressed frustration about the process, noting, “it’s like pulling teeth” to get ED staff to admit patients who need help.</li> <li>• She believes there is a need for more mental health education and training to ED staff.</li> <li>• She stated that calling the police or Hawaii CARES results in her, as a provider, not knowing the outcome of the referral. For example, if the patient she is referring meets criteria or acuity for acute care. She doesn’t know because she doesn’t receive a call back or update.</li> <li>• She has had to “coach” patients through the ED evaluation and screening process.</li> <li>• In one particular case, she provided crisis intervention and confirmed there was active suicidal ideation for a week and a suicide attempt. The patient was actively overdosing. She called 911 but the patient was not hospitalized. The patient voluntarily presented at the ED; however, ED staff said the patient was stable at the time of presentation. Therefore, no hospital admission. Unfortunately, the patient was not offered prescription medication. Instead, the patient was placed in a back hospital room for 14 hours and was released without appropriate care. The patient then hurt someone, is now facing criminal charges and has threatened suicide again.</li> <li>• Sadly, she has been hung up on by hospital staff because she has called multiple times to advocate for her patients.</li> <li>• She is appreciative of the clinicians she knows on Maui who provided assistance.</li> <li>• She wants to call attention to the failure of the system and the tremendous lack of education amongst ED staff.</li> </ul>			
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	<p>Council members responded to L. McKinney with the following comments:</p> <ul style="list-style-type: none"> <li>• T. Reed asked whether L. McKinney has the information about the client to assist in reviewing the situation to identify where the breakdowns were. T. Reed invited L. McKinney to a future Maui Service Area Board meeting to discuss this topic further.</li> <li>• R. Ries sounds like a terrible failure of the system. Knowing we have a shortage of mental health clinicians, it would be great to have funding available to provide training.</li> <li>• R. Ries suggested the Council may want to explore this topic further possibly as a future Council agenda for further discussion to identify what is in place and determine whether the Council will want to take a formal position.</li> </ul> <p>R. Reyno Yeomans shared the following concerns:</p> <ul style="list-style-type: none"> <li>• She is attending Mental Health Task Force meetings in addition to State Council on Mental Health meetings. She attends Kailua Neighborhood Board meetings to make sure she is getting the word out about task force and Council discussions and ensuring that legislators know of these issues.</li> <li>• She also posts updates to social media.</li> <li>• She is aware that patients needing a mental health related appointment are experiencing long wait times.</li> </ul> <p>R. Jackson shared the following Oahu Service Area Board (OSAB) updates:</p> <ul style="list-style-type: none"> <li>• The OSAB met last month with quorum.</li> <li>• He observes that OSAB members work well together.</li> <li>• At the last meeting, there was discussion about Crisis Intervention Teams (CIT). The focus is on linking someone who is mentally ill with timely crisis intervention. There needs to be a streamlined way to call for help and for police to be dispatched to determine the person's status. The recommendation is to have at least one police officer available each shift to assist mental health professionals on that shift. There will be training scheduled for Honolulu Police Department (HPD) officers at the HPD Training Academy in Waipahu sometime in September 2021. NAMI Hawaii has the information for</li> </ul>	<p>Add to a future Council agenda.</p>	<p>R. Ries/ S. Haitzuka</p>	<p>8/2/21</p>
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	<p>the training. Years ago, he recalls assisting HPD with officer recruit training at the academy.</p> <ul style="list-style-type: none"><li>• R. Jackson stated he will be starting his seventh four-year term at 69 years young. He joined the OSAB to improve mental health services for all in Hawaii.</li><li>• He thought Oprah and Prince Harry’s documentary “<a href="#">The Me You Can See</a>” was well produced. He recommends Council members check it out. They were produced in five (5) one-hour segments.</li></ul> <p>Council members responded to R. Jackson with the following comments:</p> <ul style="list-style-type: none"><li>• E. Lau-James commented that there is a general agreement that police need a CIT program and public awareness is needed. Council members need to be a loudspeaker about this program as well.</li><li>• T. Reed noted that she participates on Maui’s CIT via Mental Health America Hawaii.</li><li>• R. Ries thought it was a good idea for Council members to advocate for CIT but also wants Council members to advocate for the resiliency of first responders.</li><li>• C. Knightsbridge asked what are the current barriers to treatment? R. Jackson identified stigma, and some administrative processes can be barriers.</li></ul> <p>R. Reyno Yeomans added that:</p> <ul style="list-style-type: none"><li>• Anton Krucky, Executive Director of the Mayor’s Office of Housing (<a href="#">CLICK HERE</a> for website) is working on a Crisis Outreach, Response and Engagement (CORE) Program that diverts 911 calls so HPD is not involved (<a href="#">CLICK HERE</a> for Hawaii CORE article). Hawaii’s CORE Program is modeled after Denver’s Support Team Assistance Response (STAR) Program (<a href="#">CLICK HERE</a> for Denver STAR webpage).</li></ul> <p>She noted that Denver’s STAR Program diverted 748 calls in the first six (6) months with no police involvement and no arrests. Oregon’s Crisis Assistance Helping Out On The Streets (CAHOOTS) Program responded to 24,000 calls in 2019 of which only 311 calls required police backup (<a href="#">CLICK HERE</a> for Oregon CAHOOTS webpage).</p>			
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	<p>She believes the Hawaii CORE Program being rolled out in the downtown/Chinatown area on Oahu could be great to get people help without involving police.</p>			
<p>V. Old Business</p> <ul style="list-style-type: none"> <li>• Strategic Plan Review and Discussion of Focus Areas #1-7 and Accompanying Action Plan Items</li> </ul>	<p>R. Ries noted that anytime the Council has a new business agenda item that needs to be continued to the next month’s meeting, the Council will have those agenda items listed the following month as Old Business agenda items.</p> <p>As a recap, R. Ries noted several main points regarding the Council’s Strategic Plan:</p> <ul style="list-style-type: none"> <li>• The Council develops a Strategic Plan every two years.</li> <li>• This plan helps guide Council activities and is based on areas related to mental health in Hawaii that the Council feels it can address.</li> <li>• For our FY2020-2022 Strategic Plan, we got a late start due to the COVID-19 pandemic, but the Council was able to meet with Karen Oliver, Council Retreat facilitator for two sessions (November 2020 and February 2021).</li> <li>• At the Council’s March 2021 meeting, we started reviewing the initial draft to make revisions as needed.</li> <li>• At the Council’s June 2021 meeting, we made excellent headway by reviewing each of the seven Focus Areas and noting which ones needed updating and acknowledging potential Focus Areas that the Council will likely need to create a Permitted Interaction Group (PIG) to address.</li> <li>• In our meeting handouts for today, we have a revised draft of our Strategic Plan that incorporates the changes we identified as well as an accompanying draft Action Plan that will help us to accomplish each of the objectives we’ve listed on the Strategic Plan.</li> <li>• A third related handout is a one page sheet that identifies Council members who have expressed interest in joining a PIG. It is included in the meeting handouts for today’s meeting.</li> <li>• Our goal for today’s meeting is to share feedback and final edits. If possible, we would like to adopt our Strategic Plan and Action Plan as revised knowing we are using them as working documents that help guide our activities for the rest of FY2022. We will be able to</li> </ul>			



	<p>revise the document as we begin implementing our objectives.</p> <p>Focus Area #1: Improving Access to Mental Health Services (existing and new)</p> <ul style="list-style-type: none"> <li>• R. Ries noted we had challenges completing our annual narrative reports in the past; however, we have articulated our preference for the Council’s section of the Statewide Comprehensive Integrated Service Plan (SCISP) and annual report to the Governor/Legislature, including island/County-based highlights.</li> <li>• R. Ries recalled the Council has had practice composing a letter to the DD BHA and we look forward to being introduced to and talking story with Ms. Tsuji in future Council meetings.</li> <li>• R. Ries stated his feedback is that the two outcomes/products listed above the measurable objectives are very achievable in his opinion and the objectives clarify what we want to accomplish and by when.</li> </ul> <p>Focus Area #2: Advocate for the Emotional Well-Being of the Community</p> <ul style="list-style-type: none"> <li>• R. Ries noted the Council has a lot of opportunity with this Focus Area to promote mental health awareness in our communities and this Focus Area is a solid step for us to look at how we are connecting and sharing information.</li> <li>• R. Ries commented that forming a Wellness Brochure PIG sounds reasonable to help with researching and developing content for the brochure.</li> <li>• R. Ries mentioned the Council could address mental health of first responders and essential workers within this Focus Area.</li> </ul> <p>Focus Area #3: Identify Tools the Council is Empowered to Use</p> <ul style="list-style-type: none"> <li>• R. Ries stated that the Infographic PIG would focus their discussions around identifying tools and resources, prioritizing them and being creative with drafting a one-page infographic.</li> <li>• C. Knightsbridge asked how the Infographic PIGs information would be shared with others. R. Ries suggested it could be distributed when Council members interact with people in their communities.</li> <li>• A. Beninato noted that he is working on a personal project that involves field research and obtaining video footage for editing and</li> </ul>			
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	<p>sharing in future media posts.</p> <p>Focus Area #4: Outline an Onboarding and Annual Reboarding Experience for Council Members</p> <ul style="list-style-type: none"> <li>• R. Ries looks forward to seeing what the onboarding and reboarding PIG comes up with.</li> </ul> <p>Focus Area #5: Strengthen the Council’s Presence as Advocates to DOH Leadership, inclusive of input from Neighbor Island Stakeholders and Service Area Board Members</p> <ul style="list-style-type: none"> <li>• R. Ries commented that the Council has identified the Mental Health Task Force in the outcomes/products for this Focus Area. The link in with Measurable Objective 5.2 describes how the Council knows if it has achieved this Objective by obtaining and distributing minutes to Council members. For the Mental Health Task Force meetings, copies of agendas and meeting notes can be requested through Bryan Talisayan, Executive Director for Mental Health America or Trish Kajimura, when she has transitioned to her new career role.</li> <li>• R. Ries noted that Council meeting minutes document our efforts to advocate through our monthly standing agenda items so each Council member may report their efforts and activities related to mental health. He suggested using a template to prompt Council members to mention mental health related updates when it is our turn on the agenda. That way, we would remember to share about how we have participated in the last month relative to mental health activities. He noted it is also okay, in lieu of an oral update, to submit a written report at least 10 days prior to the Council meeting so that it can be shared as a meeting handout when S. Haitsuka e-mails us with the agenda</li> <li>• C. Knightsbridge asked if Council members could be provided with a Council business card. R. Ries expressed openness to explore this request and to ask if funding is available.</li> </ul> <p>Focus Area #6: Share Information on the Council’s Website About Existing Mental Health Services (Local/State/Federal)</p> <ul style="list-style-type: none"> <li>• R. Ries noted for this Focus Area, the current Website, Social Media,</li> </ul>			
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	<p>and Advocacy PIG will be dissolved and a new website and social media PIG will be formed as noted in Objective 6.1. He also noted the scope of the new Website and Social Media PIG (WSM PIG) is narrower which could be an advantage to help the WSM PIG be successful in completing short-term achievable tasks assigned by the Council.</p> <p>Focus Area #7: Identify, Track, and Share the Status of DOH Behavioral Health Administration (BHA) Legislative Bills including Adult Mental Health, Child Adolescent Mental Health, and Alcohol and Drug Abuse Divisions</p> <ul style="list-style-type: none"> <li>R. Ries noted the Council modified this Focus Area by re-focusing on the Council’s legislative priorities rather than specifically targeting the DOH BHA’s priorities. He feels this Focus Area is now more relatable and controllable for the Council to manage. Adding a second outcome/product stating the Council will produce its legislative priority bill list and have it shared with the DD BHA, the Mental Health Task Force and other mental health advocacy groups for whom Council members are affiliated would be a nice tie in. Related would be adding an Objective 7.5 that speaks to the Council receiving a copy of the DOH BHA’s legislative priority bills as well as a copy of the Mental Health Task Force’s legislative priority bills.</li> </ul> <p>Council members shared closing comments regarding this agenda item:</p> <ul style="list-style-type: none"> <li>E. Lau-James is excited about the Council’s Strategic Plan and wants to get members assigned to Focus Areas to start working on the Objectives.</li> <li>R. Ries noted that the Strategic Plan will be used as a working document that helps guide the Council’s activities for the rest of FY2022 and it can be updated when needed.</li> </ul> <p>E. Lau-James made a motion to accept the Council’s FY2020 – 2022 Strategic Plan as revised. C. Knightsbridge seconded the motion.</p> <p>R. Ries asked S. Haitzuka to prepare the final version of the Strategic Plan documents for Council members to keep for their reference.</p>	<p>Motion passed unanimously.</p> <p>Create final versions of the Strategic Plan</p>	<p>S. Haitzuka</p>	<p>8/4/21</p>
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<ul style="list-style-type: none"> <li>• Council Bylaw Review and Revisions</li> </ul>	<p>As a recap, R. Ries noted some main points regarding the Council Bylaws:</p> <ul style="list-style-type: none"> <li>• The Council is responsible for periodically reviewing and revising its bylaws.</li> <li>• We put this item on the agenda for the last few meetings; however, it was only at the Council’s June 2021 meeting that we were able to devote the time and attention needed to systematically review our bylaws and propose edits.</li> <li>• In today’s meeting handouts, we have a draft of our bylaws with tracked changes in red noting the content we identified as possible revisions.</li> <li>• We agreed to discuss these changes at today’s meeting.</li> <li>• Our goal for today’s meeting is to share feedback and final edits. If possible, we would like to adopt a final version of our edited bylaws.</li> </ul> <p>Bylaw header</p> <ul style="list-style-type: none"> <li>• R. Ries noted that the hyphen in bylaws was removed in the header and throughout the document and the current date was added.</li> </ul> <p>Article I: Name</p> <ul style="list-style-type: none"> <li>• R. Ries noted that “Hawaii” was inserted into this Article and was reflected in our Council name at the top header of this document on every page.</li> </ul> <p>Article II: Purpose</p> <ul style="list-style-type: none"> <li>• R. Ries pointed out that the Council revised the purpose statement to include three sub-parts. The purpose statement now articulates our commitment to: <ul style="list-style-type: none"> <li>○ Advising agencies and policy makers;</li> <li>○ Advocating for the mental health needs in each County and in partnership with the County Service Area Boards on Mental Health and Substance Abuse; and</li> <li>○ Representing mental health service recipients in our communities.</li> </ul> </li> </ul>	<p>documents and distribute.</p>		
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	<p>Article III: Responsibilities</p> <ul style="list-style-type: none"> <li>• R. Ries noted some technical revisions were made to this Article.</li> <li>• T. Reed noted she wrote in her notes about adding “advisor to the Governor and Legislature”. This is noted in the minutes on page 14. This is not included in the draft. <ul style="list-style-type: none"> <li>○ S. Haitsuka stated this statement was not added due to not having the citation stating this language is in written in law.</li> <li>○ C. Knightsbridge mentioned in the June meeting that he would send the citation to S. Haitsuka. He is currently still looking for the citation and will share it when he finds it.</li> <li>○ S. Haitsuka stated administratively, the Council is attached to the DOH. In its advisory capacity, the Council advises the Governor through the DOH.</li> </ul> </li> </ul> <p>NOTE: The DOH, through its Behavioral Health Administration (BHA) is the state mental health authority and is statutorily mandated to assure a comprehensive statewide behavioral health care system by leveraging and coordinating public, private and community resources.</p> <ul style="list-style-type: none"> <li>○ K. Aumer offered §11-175-3, Hawaii Revised Statutes. She noted in b.1. it states, “advise the department” and in b.5. it states, “prepare and submit an annual report to the Governor.”</li> <li>○ R. Ries noted historically, the Council has not had an audience directly with the Governor emphasizing that he has not tapped into the Council as an advisory body to him. Rather, the Council is meant to be a voice of the community.</li> <li>○ C. Knightsbridge states he does not want the Council to be “just an advisory board to the DOH.” R. Ries and E. Lau-James affirmed the Council is not just a pawn for the DOH.</li> <li>○ E. Lau-James emphasized that she doesn’t think a community member or legislator will look at the Council’s bylaws say it doesn’t include “the Governor”; the Council knows who we are and while the wording may be vague, it is sufficient.</li> <li>○ C. Knightsbridge stated his agreement that the bylaws are for</li> </ul>			
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	<p style="text-align: center;">the Council’s self-governance.</p> <p>Article IV: Membership</p> <ul style="list-style-type: none"> <li>• R. Ries noted several technical revisions were made to this Article. The membership description listed here now mirrors the areas of representation listed on our attendance log.</li> <li>• R. Ries noted that clarification for “holdover” and “interim” membership was added.</li> <li>• R. Ries pointed out that PIGs were added to recognize they are distinct from a committee.</li> <li>• R. Ries noted that statement 5.g under vacancies was deleted because it was redundant and exactly duplicative.</li> <li>• R. Ries mentioned that clarification under attendance was added. Immediately after the SECOND consecutive unattended and unexcused absence, a members’ term shall expire.</li> <li>• R. Ries suggested adding “contact” may be made in writing via e-mail to the Council’s e-mail address: <a href="mailto:DOH.SCMHChairperson@doh.hawaii.gov">DOH.SCMHChairperson@doh.hawaii.gov</a> or via telephone to the designated Council support staff which could change in the future but for now, our support staff are AMHD employees – S. Haitsuka and J. Nazareno.</li> </ul> <p>V: Meetings</p> <ul style="list-style-type: none"> <li>• R. Ries explained that currently, Council meetings are two and one half (2.5) hours in duration; however, it is a fact that meetings almost always go past that time. This is why the suggestion is here in this section to change the meetings to three (3) hours instead. He mentioned last month that as the Council Chairperson, he has felt there were many times when he has had to rush the Council through agenda items and rushing has made the Council less reflective in addressing agenda items.</li> <li>• R. Ries noted this section clarifies how meeting agendas are distributed as e-mail (first preference) or postal mail (secondary option if the Council member or stakeholder does not have e-mail or requests physical copies be printed and mailed).</li> <li>• R. Ries noted this section clarifies passing of motions consistent</li> </ul>			
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	<p>with current Hawaii law and noted on page one of the minutes.</p> <p>Article VI: Officers</p> <ul style="list-style-type: none"> <li>R. Ries noted that clarification was made for the nomination process as well as technical revisions.</li> </ul> <p>Article VII: Committees</p> <ul style="list-style-type: none"> <li>R. Ries noted technical revisions were made by revising the title of this Article to include PIGs and inserted PIGs throughout.</li> </ul> <p>Article VIII: Conflicts of Interest</p> <ul style="list-style-type: none"> <li>R. Ries noted there was one technical revision made on the last page to align the language with the language in previous Articles.</li> </ul> <p>Article IX: Amendment of Bylaws</p> <ul style="list-style-type: none"> <li>R. Ries noted technical revisions were made in this Article as well to align the language with language in previous Articles.</li> </ul> <p>Article X: Liabilities</p> <ul style="list-style-type: none"> <li>R. Ries noted there were no changes recommended for this Article.</li> </ul> <p>E. Lau-James made a motion to accept the Council’s Bylaws as revised. T. Reed seconded the motion.</p> <p>R. Ries asked S. Haitzuka to prepare the final version of the bylaw document for Council members to keep for their reference.</p>	<p>Ayes (11); Noes (0); Abstentions (0)</p> <p>Motion passed unanimously.</p> <p>Create final version of the bylaws documents and distribute.</p>	<p>S. Haitzuka</p>	<p>8/4/21</p>
<p>VI. New Business</p> <ul style="list-style-type: none"> <li>Action Steps for Strategic Plan Implementation</li> </ul>	<p>R. Ries asked Council members to review the Action Plan for the Council’s Strategic Plan implementation. A copy was included in today’s meeting handouts.</p> <ul style="list-style-type: none"> <li>He noted the Action Plan is also a working document. It pulls out the</li> </ul>			

	<p>Objectives and strategies to help us focus on what parts of each Focus Area need attention and some form of action.</p> <ul style="list-style-type: none"> <li>• He also noted, for the most part, he is okay with the revised version of the Action Plan and is okay with the action steps.</li> </ul> <p>He stated S. Haitsuka and J. Nazareno could help to cross check the Action Plan one more time to make sure changes based on the Strategic Plan Focus Areas are reflected.</p> <p>R. Ries asked Council members to review the Strategic Plan handout with the chart showing the Focus Areas that Council members are interested in being appointed to. A copy was included in today’s meeting handouts.</p> <p>As a recap, R. Ries noted the following comments regarding forming PIGs:</p> <ul style="list-style-type: none"> <li>• He acknowledged from the Council’s March 2021 meeting, E. Lau-James expressing strong support for creating a PIG for all seven of our Strategic Plan Focus Areas.</li> <li>• He noted that E. Lau-James, during our Council Retreat, encouraged each Council member to sign up for at least one (1) PIG of their choice. He reiterated his support for Council members signing up for at least one (1) PIG.</li> <li>• He noted it seems logical to want to create a PIG for each of the seven Focus Areas. On the one hand, creating a PIG for all seven Focus Areas could potentially allow for more time to discuss and work on the Objectives. On the other hand, it could be that we need to prioritize creating PIGs to work on Focus Areas that have specific, and short-term deliverables and defer other Focus Areas that can be addressed as a whole Council.</li> <li>• He asked the Council to take into consideration the time it takes to organize PIG meetings and staff support for these meetings. The Council has S. Haitsuka and J. Nazareno to assist but they are unfortunately not full-time staff to the Council.</li> <li>• Additionally, he noted historically, seeing the challenges of scheduling meetings for the three PIGs we have had in the past year, scheduling has been extremely challenging for Council members to (1) reply to e-mail requests for scheduling and (2) attend PIG</li> </ul>			
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meetings when scheduled.

In summary, Focus Areas with a recommendation for forming a new PIG:

- Focus Areas #2, 3, 4, 6 and 7
- No PIG is recommended for Focus Areas #1, 5

Below is the status of Council members who are interested in being appointed to the PIGs for Focus Area #2, 3, 4, 6, and 7.

State Council on Mental Health  
Strategic Plan Focus Area - Preliminary Council Member Participation Tracking Sheet  
(XX are as noted in the July 13, 2021 Council meeting)

Council Member Name	Focus Area #1	Focus Area #2	Focus Area #3	Focus Area #4	Focus Area #5	Focus Area #6	Focus Area #7	Total # of Focus Areas per Council Member
1 Aumer, Katherine		XX					XX	2
2 Beninato, Antonino		XX						1
3 Crozier, Charleen "Naomi"								0
4 Fujii, John		XX				XX		2
5 Ilyavi, Heidi			XX			XX		2
6 Knightsbridge, Christopher		XX	XX			XX	XX	4
7 Koyanagi, Dina			XX					1
8 Lau-James, Eileen			XX	XX			XX	3
9 Martinez, Beatrice "Kau'i"				XX				1
10 Pascual-Kestner, Rusnell "Rus"						XX	XX	2
11 Reed, Tara			XX	XX			XX	3
12 Renfro, Jennifer		XX					XX	2
13 Ries, Richard		XX					XX	2

Council members shared closing comments regarding this agenda item:

- E. Lau-James is excited about the Strategic Plan and to start working on the Objectives.

VII. Permitted Interaction Group (PIG) Reports

In this section of the agenda, PIG members may briefly summarize the PIG activities since the last Council meeting including meeting dates, discussions, and recommendations on topics approved at previous Council meetings.

If PIG members would like to share a longer report, please e-mail it to Stacy no less than 10 calendar days prior to the next meeting.

- PIG for Website,

WSA-PIG members include C. Knightsbridge, H. Ilyavi and R. Pascual-Kestner. C. Knightsbridge is the WSA-PIG lead.

<p>Social Media, and Advocacy (WSA)</p>	<p>The WSA-PIG did not meet last month but as a recap, they provided the Council with two recommendations which we voted and approved. The recommendations related to the posting of the resources and behavioral health related activities to the State Council website and being able to add resources and activities without Council approval if the primary purpose of the resource item or monthly activity is related to behavioral health/mental health/substance abuse.</p> <p>R. Ries noted that S. Haituka is coordinating the website changes and will update the Council when content has been added.</p> <p>At this time, R. Ries recommended that the Council support its Strategic Plan Focus Area #6, Measurable Objective 6.5 and dissolve the current WSA-PIG today and form a new Website and Social Media PIG (WSM PIG).</p> <p>C. Knightsbridge motioned to dissolve the WSA-PIG as of today. E. Lau-James seconded the motion.</p> <p>The new WSM PIG will be responsible for coordinating the sharing of information on the Council’s website about existing mental health services (local/state/federal).</p> <p>According to the Strategic Plan handout with the chart showing the Focus Areas that Council members are interested in being appointed to, there are four (4) Council members interested in joining the new WSA PIG.</p> <ul style="list-style-type: none"> <li>J. Fujii, R. Pascual-Kestner, H. Ilyavi and C. Knightsbridge</li> </ul> <p>E. Lau-James made a motion to create a new WSA PIG and to appoint J. . Fujii, R. Pascual-Kestner, H. Ilyavi and C. Knightsbridge to the WSA PIG. T. Reed seconded the motion.</p> <p>R. Ries stated the Council can discuss short-term tasks that this new WSA PIG will work on at the next Council meeting.</p>	<p>Motion passed unanimously.</p>	<p>Motion passed unanimously.</p>		
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<p>VIII. Island Representative Reports</p> <ul style="list-style-type: none"> <li>Maui Service Area Board (MSAB)</li> </ul>	<p>In this section of the agenda, Council members who are representing their respective Service Area Board may briefly summarize their board meetings and when applicable, share updates on requested items identified at previous Council meetings.</p> <p>If members would like to share a longer Service Area Board report, please e-mail it to Stacy no less than 10 calendar days prior to the next meeting.</p> <p>T. Reed shared the following updates:</p> <ul style="list-style-type: none"> <li>Maui prosecutor’s office is creating a community court program. This program is a collaboration with the Hawaii State Judiciary and will offer amnesty for people that turn themselves in voluntarily.</li> </ul>	<p>For information only.</p>		
<p>VII. State Agency Representative Reports</p> <ul style="list-style-type: none"> <li>Hawaii Public Housing Authority (HPHA)</li> <li>Department of Human Services (DHS) MedQUEST (MQD) Division Medicaid Program</li> </ul>	<p>In this section of the agenda, Council members who are representing their respective state agency may briefly summarize agency data, agency information related to behavioral health and when applicable, share updates on requested items identified at previous Council meetings.</p> <p>If members would like to share a longer state agency report, please e-mail it to Stacy no less than 10 calendar days prior to the next meeting.</p> <p>K. Martinez shared the following updates:</p> <ul style="list-style-type: none"> <li>None provided.</li> </ul> <p>J. Fujii shared the following updates:</p> <ul style="list-style-type: none"> <li>DHS MQD has a 1.25% profit margin for their health insurers/contractors.</li> <li>Medicaid was a fee-for-service (FFS) plan until 1994. As a result, Medicaid is provided at no cost to members. If Hawaii were to go back to a Medicaid FFS model, services would be paid out-of-pocket (like paying to a veterinarian for animal care services) versus how payment are now spread out with a co-pay and health insurance coverage options.</li> <li>All policies for admission/non-admission criteria are set by Medical</li> </ul>	<p>For information only.</p>		

<ul style="list-style-type: none"> <li>Department of Human Services (DHS) Child Welfare Services (CWS)</li> </ul>	<p>Directors and clinicians. For DHS MQD, Dr. Chad Koyanagi is the physician who reviews and approves the policy.</p> <ul style="list-style-type: none"> <li>DHS MQD is making comparisons between physical and mental health care and services in a matrix for behavioral health parity. For example, if there is a 10 day limit on physical health, in the comparable service for mental health, is the day limit the same, more or less? Goal is to create a level playing field. Reports are submitted to federal regulators.</li> <li>Medicaid is the payor of last resort. The federal/state match is about 53-54% for federal and 46-47% for the Hawaii cost-share.</li> <li>There are issues around service delivery and quality. Looking at prior authorizations ensures services are available based on need.</li> <li>If the Medicaid fee is increased, there could be more funds available to pay for services. This could result in a boost in availability of services but it also means an increase in costs.</li> </ul> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> <li>R. Ries stated that he doesn't think the intent is to slice off or get rid of Medicaid as it exists now, but the interest is in prioritizing access to quality mental health services.</li> <li>R. Ries is interested in seeing the report showing parity comparison for various services.</li> <li>E. Lau-James asked how DHS MQD is addressing shortages of providers. J. Fujii noted that while flying members over to Oahu from Neighbor Islands to receive services is expensive it is not a long-term solution. Regarding shortage of providers and services, DHS MQD recognizes there is a shortage especially for mental health professionals on Neighbor Islands.</li> </ul> <p>D. Koyanagi shared the following updates:</p> <ul style="list-style-type: none"> <li>CWS is experiencing a shift in management due to staff retirements.</li> <li>She has observed adolescents with mental health challenges needing to access services. CWS has flown youth from Neighbor Islands to Oahu so they can access crisis services at the Waipahu crisis shelter facility.</li> </ul>			
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<ul style="list-style-type: none"> <li>• Department of Human Services (DHS) Division of Vocational Rehabilitation (DVR)</li> </ul>	<p>R. Pascual-Kestner shared the following updates:</p> <ul style="list-style-type: none"> <li>• He’s been asked by the DHS Administrator to look at creating a formal agreement with DOH for mutual service participants.</li> <li>• He is looking to form a task force to partner with Neighbor Islands to assess gaps in resources.</li> <li>• He has a concern about working on a contract and being a Council member. He is not sure if there is a conflict.</li> </ul>			
<ul style="list-style-type: none"> <li>• Department of Education (DOE) Student Services Branch (SSB)</li> </ul>	<p>J. Renfro shared the following updates:</p> <ul style="list-style-type: none"> <li>• She introduced herself and shared about her background. <ul style="list-style-type: none"> <li>○ She is the Administrator in the Student Support Section (SSS) within the Office of Student Support Services (OSSS).</li> <li>○ The SSS coordinates the DOE’s services for school-based behavioral health, counseling, 13 federal programs mainly focusing on vulnerable populations such as homeless and English Language (ESL).</li> <li>○ The SSS works closely with the Exceptional Students Branch which coordinates special education and 504 services.</li> <li>○ She has been in Hawaii for five (5) years and is excited and honored to serve on the Council. She is from the Southeast area of Texas, about 30 miles from the Louisiana border.</li> <li>○ In the last five (5) years, the DOE OSSS has shifted, and the COVID-19 pandemic has fast forwarded, its prioritization of student whole wellbeing inclusive of mental health and social-emotional learning (SEL). HIDOE is not just about math, reading and writing.</li> <li>○ HIDOE used to provide services under a HNTSS support model focusing on prevention, intervention and postvention. In hindsight, in order to create a full array of support, they realized they need to promote mental health support as well.</li> </ul> </li> <li>• Regarding substance abuse and going into the Emergency Department (ED) for admission. Her understanding is that to be admitted with a high level of alcohol, the ED does not provide detox but, for admission, if patient indicates their alcohol abuse is paired with suicidal ideation, the ED will consider admission under risk criteria “hard to self.” She recognizes there is a huge discrepancy</li> </ul>			

	<p>regarding this advocacy and ED admission criteria. Unless the person indicates they are harming themselves in a lethal way, presenting with only substance use or alcohol abuse, it's difficult to get admitted for treatment.</p> <ul style="list-style-type: none"> <li>• DOE is aware and is mindful of its responsibility to assist children and their 'ohana with trauma-informed practices and strategies. Trauma-informed grant funding via the Hawaii Department of Education (HI DOE) for \$5M will be used for students to get assessed for needing therapeutic services and referring students who need services to a provider. The DOE is in the process of contracting for this direct care service.</li> <li>• DOE recognizes there is a need to empower school staff to know how to help support students. This is being addressed via trauma-informed staff development through a statewide vendor list for trainers. This statewide vendor list may be helpful because the DOE will not need to go through the entire procurement process which is sometimes seen as a barrier to acquiring state contracted services.</li> <li>• DOE is working on integrating school counselors for behavioral health, SEL, and support for whole-child mental health.</li> <li>• The Hawaii Keiki Hotline is a partnership with the University of Hawaii and the DOH. Through the hotline, callers can be screened and if there is a need for mental health support, the hotline staff can contact the DOE complex school-based behavioral health staff. <a href="#">CLICK HERE</a> for more information.</li> <li>• DOE expanded positions statewide to reach out to the Micronesian and Pacific Island populations to address trauma and mental health needs and concerns related to their transition to Hawaii. DOE will arrange for native language speakers to arrange for state-level interpreters to help with the DOE School Based Behavioral Health (SBBH) Program and homeless outreach coordinators.</li> <li>• She emphasizes that the DOE cannot do everything and doesn't have everything exactly perfect. DOE recognizes they need to partner with other agencies and it's important to not work in silos.</li> </ul> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> <li>• C. Knightsbridge asked if there is a support program for teachers.</li> </ul>			
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	<p>J. Renfro acknowledged that all state employees have access to the REACH Program (<a href="#">CLICK HERE</a> for more information). She noted with HI DOE Title IX services, HI DOE has had to provide information about teachers regarding harassment and arranged for direct intervention and support. Trauma-informed care is not limited to students or to a single episode. It has to do with the resiliency of the person and events can affect people differently. The HI DOE has had conversations about how to address trauma supports for faculty.</p> <ul style="list-style-type: none"> <li>• R. Ries commented about the need to support educators as they may be experiencing trauma and stress related to the COVID-19 pandemic and school related changes.</li> </ul>			
<p>IX. Specialty Area Representative Reports</p> <ul style="list-style-type: none"> <li>• Hawaii Advisory Committee on Drug Abuse and Controlled Substances (HACDACS)</li> <li>• Mental Health Providers</li> </ul>	<p>In this section of the agenda, Council members who are representing their respective specialty area may briefly summarize specialty area activities related to behavioral health and when applicable, share updates on requested items identified at previous Council meetings.</p> <p>If members would like to share a longer state agency report, please e-mail it to Stacy no less than 10 calendar days prior to the next meeting.</p> <p>J. Fujii shared the following updates:</p> <ul style="list-style-type: none"> <li>• HACDACS heard from speakers advocating for legislation related to legalizing recreational cannabis.</li> <li>• One area that HACDACS is looking into is the Hawaii CARES program and access to substance abuse, mental health and crisis services.</li> <li>• Minutes from recent HACDACS meetings were shared in today’s meeting handouts.</li> </ul> <p>R. Ries shared the following updates:</p> <ul style="list-style-type: none"> <li>• He continues to see as many patients as he can, often working extra long day/evening and weekend hours to accommodate new patients who are in need of support and sometimes does not finish his workday until after 10:00 p.m.</li> <li>• He has had to decline referrals from insurance companies because</li> </ul>	<p>For information only.</p>		

<ul style="list-style-type: none"> <li>Parents and Family Members of Mental Health Service Recipients</li> </ul>	<p>he is full but they consistently contact him to inquire about additional referrals.</p> <ul style="list-style-type: none"> <li>He has heard from colleagues that they are feeling burnt out and he is also trying not to get burnt out. Mental health self-care is important for everyone!</li> <li>He is concerned about the impacts of opening Hawaii’s economy. There is good news for businesses but sometimes there’s negative health effects that are not always readily observed.</li> </ul> <p>H. Ilyavi shared the following updates:</p> <ul style="list-style-type: none"> <li>Hawaii Island continues to see services delayed due to long waitlists for youth services. There is a great need for immediate access to services. The response time is too long.</li> <li>She noted there are many parents who are still seeking services for their children.</li> <li>She is aware of children who are going to the hospital and are waiting for telepsychiatry services. Sometimes, they have to stay overnight and wait until services are available.</li> </ul> <p>E. Lau-James shared the following updates:</p> <ul style="list-style-type: none"> <li>She attended NAMI Hawaii meetings with other family members.</li> <li>She speak with L. McKinney who spoke to the Council today. Family members want to participate in the system and help their loved ones. She encourages family members to write letters and join meetings to advocate for loved ones.</li> <li>One soundbite she mentions to people is that she sees the Council and sees family members as part of government action as advisors to government.</li> <li>Hospitalizing someone with mental illness is challenging. It’s critical to emphasize in our advocacy that mental health care should be prioritized and heightened as there is a community risk if mental health is not treated in a timely and appropriate manner.</li> <li>She mentioned her son needing to go to the emergency room and he would not have received appropriate treatment if she did not push for further treatment prior to her son being sent home.</li> </ul>			
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<ul style="list-style-type: none"> <li>• Student/ Youth and Consumer Advocates</li> </ul>	<ul style="list-style-type: none"> <li>• She mentioned her family member has also had to wait to get services and he was having a medical emergency.</li> <li>• As a cat veterinarian, she is accountable to the payor (cat owner) just as the healthcare system is accountable to the insurance company/insurer (not the patient). She doesn't have to ask permission from an insurance company. She can order the necessary treatment and testing that she deems is appropriate for the cat's situation. It's horrific to know that the doctors' hands are bound by these rules that do not allow them to make decisions about what they can and cannot authorize and under what circumstances they can order treatment and testing.</li> </ul> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> <li>• J. Fujii acknowledge that regarding poor medical treatment, family members sometimes have to advocate for their loved one's care. He has had a family member recently need emergency medical care and he has had to advocate for their care with the clinicians.</li> <li>• J. Fujii noted that sometimes care is offered/provided inappropriately or sometimes people go without care. Both of these scenarios are unacceptable.</li> </ul> <p>K. Aumer shared the following updates:</p> <ul style="list-style-type: none"> <li>• She is concerned about people who are coming out of isolation. During the COVID-19 pandemic there has been an increase in isolation. People have been resourceful in obtaining information, sometimes going online or hearing information from various media sources. Sometimes, people were getting a lot of information that informed their decisions in ways that were not so positive.</li> <li>• There is a need to be aware of times of isolation. When looking to connect with other people or resources, there is a potential for negative health outcomes, such as misinformation.</li> </ul> <p>A. Beninato shared the following updates:</p> <ul style="list-style-type: none"> <li>• He sees a disconnect between what services say they will do and what services they actually provide.</li> <li>• He speaks to members in his community and specifically in the</li> </ul>			
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	<p>Native Hawaiian community. One person he spoke with expressed frustration that government is ineffective and there is a concern that there is a generalized lack of accountability.</p> <ul style="list-style-type: none"> <li>• Important to recognize personal responsibility and choices. It is the person’s responsibility to make choices that are positive and it’s not up to the government to force the person to decide.</li> </ul> <p>C. Knightsbridge shared the following updates:</p> <ul style="list-style-type: none"> <li>• None provided.</li> </ul> <p>N. Crozier shared the following updates:</p> <ul style="list-style-type: none"> <li>• None provided.</li> </ul> <p>T. Reed shared the following updates:</p> <ul style="list-style-type: none"> <li>• None provided.</li> </ul>			
X. Presentation/ Guest Speaker	None scheduled.			
XI. Closing Announcements	<p>Council members shared the following announcements:</p> <ul style="list-style-type: none"> <li>• R. Ries reminded Council members of the upcoming Council Executive Meeting scheduled for Tuesday, July 27, 2021 from 10:00 a.m. to 12:30 p.m. via Zoom. Meeting information can be found on page two (2) of today’s meeting agenda.</li> </ul>	For information only.		
XII. Meeting Evaluation / Future Agenda Items	<p>R. Ries encouraged members to share their feedback about how today’s Council meeting went either by sharing them verbally or typing their feedback in the chat.</p> <ul style="list-style-type: none"> <li>• R. Ries thanked Council members for doing a final review and adopting the Council’s Strategic Plan Focus Areas and bylaws.</li> </ul> <p>The next Council meeting is scheduled for August 10, 2021 from 9:00 a.m. to 12:00 p.m. via Zoom. Note the Council’s need meeting end time..</p>	For information only.		
VI. Adjournment	The meeting was adjourned at 11:28 a.m.	For information only.		

Electronic Mail Outs	<p>The following handouts were e-mailed to SCMH members and individuals on the SCMH e-mail distribution list:</p> <p>E-mail (1 of 3) with handouts (total of 8 handouts)</p> <ol style="list-style-type: none"> <li>1. July 2021 Meeting – Agenda</li> <li>2. June 2021 Meeting – Draft Minutes</li> <li>3. July 2021 Meeting – Template FY22 Attendance Log</li> <li>4. June 2021 Meeting – Final FY21 Attendance Log</li> <li>5. July 2021 Meeting – Old Business Strategic Plan, Revised Draft Focus Areas</li> <li>6. July 2021 Meeting – Old Business Bylaws, Revised Draft Bylaws</li> <li>7. July 2021 Meeting – New Business Strategic Plan, Revised Draft Action Plan</li> <li>8. July 2021 Meeting – New Business Strategic Plan, Volunteers by Focus Area as of 6/8/21</li> </ol> <p>E-mail (2 of 3) with handouts (total of 8 handouts)</p> <ol style="list-style-type: none"> <li>1. June 2021 Meeting – Final Thank you Letter, AMHD</li> <li>2. June 2021 Meeting – Final Council Membership Recruitment Letter, Judiciary</li> <li>3. June 2021 Meeting – Final Council Membership Recruitment Letter, DHS MQD</li> <li>4. June 2021 Meeting – Final Council Membership Recruitment Letter, HACDACS</li> <li>5. June 2021 Meeting – Mental Health Service Recipient/Consumer Advocate Report, Workforce Handout</li> <li>6. July 2021 Meeting – HACDACS Minutes, 2/23/21</li> <li>7. July 2021 Meeting – HACDACS Minutes, 3/23/21</li> <li>8. July 2021 Meeting – HACDACS Minutes, 4/27/21</li> </ol> <p>E-mail (3 of 3) with handouts (total of 9 handouts)</p> <ol style="list-style-type: none"> <li>1. July 2021 Meeting – KSAB Minutes, 1/28/21</li> <li>2. July 2021 Meeting – KSAB Minutes, 2/25/21</li> <li>3. July 2021 Meeting – KSAB Minutes, 3/25/21</li> <li>4. July 2021 Meeting – KSAB Minutes, 4/29/21</li> <li>5. July 2021 Meeting – KSAB Minutes, 10/29/20</li> </ol>	For information only.		
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	<ul style="list-style-type: none"><li>6. July 2021 Meeting – KSAB Minutes, 12/3/20</li><li>7. July 2021 Meeting – MSAB Minutes, 4/5/21</li><li>8. July 2021 Meeting – HSAB Minutes, 4/27/21</li><li>9. July 2021 Meeting – HSAB Minutes, 5/25/21</li></ul>			
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