

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

Virtual Meeting via Zoom
January 11, 2022
9:00 a.m. – 12:00 p.m.

Members Present: **Aumer, Katherine; Beninato, Antonino; Crozier, Charleen “Naomi”; Fujii, John; Ilyavi, Heidi; Knightsbridge, Christopher; Lau-James, Eileen; Merriam, Kathleen; Ries, Richard**

Members Absent: **Renfro, Jennifer**

Members Excused: **Martinez, Beatrice “Kau’i”; Reed, Tara;**

Guests Present: **Dang, Cindi; Dias, Lea; Rice, Ray; Talisayan, Bryan**

DOH Staff Present: **Haitsuka, Stacy; Hernandez-Armstrong, Jamie; Nazareno, Jocelyn; Shimabukuro, Scott; Weygan-Hildebrand, Carolyn; Yin, Valerie**

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 is printed on the agenda: Pursuant to Act 137-18 (SB 203), 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 13 of the entitled 21 members are appointed, at least 7 must be present to establish a quorum. To validate a council action, of the 7 members present, an affirmative vote from at least 4 is required.”</p>	For information only.		

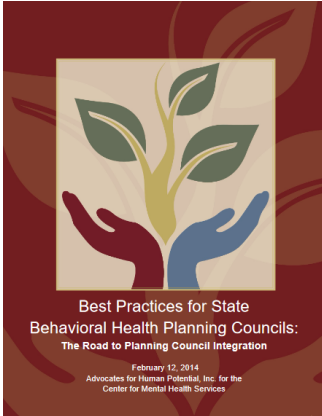
	<p>Quorum was not established by 9:12 a.m. The meeting will continue as an informational meeting until quorum is established.</p> <p>Several members requested an excused absence in advance of today’s meeting:</p> <ul style="list-style-type: none"> • C. Knightsbridge, T. Reed, K. Martinez are excused. • N. Crozier needs to leave early for another meeting. • J. Fujii may join if his other meeting ends before this meeting. 			
<p>II. Meeting Announcements</p>	<p>R. Ries shared the following announcements:</p> <ul style="list-style-type: none"> • He thanked Council members for their understanding over the past 20 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. • He noted Governor Ige and the County Mayors have relaxed travel requirements to and from Hawaii. S. Haitsuka 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. <p>For at least through March 2022, Council members should plan to participate in Council meetings virtually.</p> <ul style="list-style-type: none"> • To use our time efficiently during today’s meeting, R. Ries asked Council members and guests to follow the following basic virtual Council meeting courtesies: <ul style="list-style-type: none"> ○ Please address any comments or questions to him. ○ Members and guests may raise their “hand” virtually, type into the chat box, or orally get his attention during the meeting. ○ Waiting to be acknowledged before speaking will keep the meeting organized and audio clear for note taking purposes. • 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 	<p>For information only.</p>		

	<p>best to include and acknowledge guests when appropriate.</p> <ul style="list-style-type: none">• For Council members who take a break and step away from the meeting, please notify him before leaving as the Council needs to track of when Council members leave and return to verify quorum.• If at any time a Council member has an issue with the meeting connection, please consider closing your Internet browser or Zoom app and rejoining the meeting by re-clicking the Zoom link or joining by phone as an alternate option.• If not speaking, please place yourself on mute. This will help with the feedback noise and will allow for everyone to hear speaker.• 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.• For Council members who take a break and step away from the meeting, please notify him before leaving as the Council needs to track of when Council members leave and return to verify quorum.• If at any time a Council member has an issue with the meeting connection, please consider closing your Internet browser or Zoom app and rejoining the meeting by re-clicking the Zoom link or joining by phone as an alternate option.• If not speaking, please place yourself on mute. This will help with the feedback noise and will allow for everyone to hear speaker. <p>R. Ries shared the following Council membership updates:</p> <ul style="list-style-type: none">• The Judiciary representative was selected; however, due to a change in staff, that person will no longer be applying. The Judiciary is in the process of selecting another staff to apply for the Council.• The Department of Human Services, Division of Vocational Rehabilitation (DVR) has selected a representative. That individual is applying for Council membership, Lea Dias.• The Department of Human Services Child Welfare Services (CWS) has selected a representative and he introduced himself as a guest at our last meeting, Ray Rice.• Yesterday, R. Rivera submitted her resignation. She has taken on responsibilities that she needs to prioritize. R. Ries acknowledged R.			
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	<p>Rivera for her service as a Council member and Hawaii Service Area Board (HSAB) member and wished her all the best in everything that she is doing including completing her master’s degree program.</p> <ul style="list-style-type: none"> • There is an applicant who has been accepted by the Governor’s office and we look forward to seeing her in attendance at future Council meetings, Tara Char. • There are three (3) positions that may be filled by a consumer advocate, youth/student representative, or parent/family member. • One (1) position may be filled by a representative for the Kauai Service Area Board (KSAB), one (1) position for the Oahu Service Area Board (OSAB), and one (1) position for the HSAB. • To view the current Council membership including existing members and their area(s) of representation on the Council and vacancies that Council members could help to recruit new members to join, please refer to the Attendance Log for Fiscal Year 2022 in your meeting handouts. <p>R. Ries introduced Carolyn Weygan-Hildebrand. She is the new DOH Adult Mental Health Division (AMHD) Planner. She began working at the AMHD in December 2021. In her role, she will help to oversee AMHD’s federal grants and funding including the Mental Health Block Grant.</p> <p>C. Weygan-Hildebrand briefly introduced herself. S. Haitsuka thanked the Council for the opportunity to learn and support Council activities.</p> <p>C. Weygan-Hildebrand and S. Haitsuka have been cross training to help her transition into the role of the Council’s lead support staff. C. Weygan-Hildebrand will replace S. Haitsuka as the Council’s lead support staff effective February 2022.</p>			
<p>III. Consideration and Approval of Minutes December 14, 2021 Minutes</p>	<p>Quorum was established at 9:26 a.m.</p> <p>The draft minutes for the December 14, 2021 meeting were reviewed.</p> <p>The following amendments were requested:</p> <ul style="list-style-type: none"> • None. 			

	N. Crozier made a motion for the meeting minutes from the December 14, 2021 meeting be approved as drafted. C. Knightsbridge seconded the motion.	Motion passed unanimously.		
IV. Community Input	Pursuant to section 92-3, Hawaii Revised Statutes, community members will have three (3) minutes to speak during this time. None.			
V. Old Business • DOH Behavioral Health Administration Update, Deputy Director M. Tsuji	R. Ries noted last month, M. Tsuji presented an update to the Council for the DOH Behavioral Health Administration (BHA) updates. M. Tsuji oversees four behavioral health divisions including Adult Mental Health (AMHD), Child and Adolescent Mental Health (CAMHD), Alcohol and Drug Abuse (ADAD), and Developmental Disabilities (DDD). She took sufficient time to acknowledge the concerns we shared in our letter to her about the untimeliness of the Substance Abuse and Mental Health Services Administration (SAMHSA) Community Mental Health Block Grant (MHBG) application. She acknowledged the great efforts this Council is making to keep our communities informed of mental health services and resources, and our interest in partnering with the DOH to address mental health needs statewide. She also acknowledged the Council's interest in assuring there are opportunities for internships for people who want to live and work in Hawaii after their internship is completed. R. Ries asked if there are any final thoughts about M. Tsuji's presentation. A draft Mahalo letter was included as a handout for today's meeting. C. Knightsbridge made a motion to approve the Mahalo letter. K. Aumer seconded the motion.	Motion passed unanimously.	C. Weygan-Hildebrand	2/3/22

<ul style="list-style-type: none"> • 2022 State Council Annual Report to the Legislature 	<p>R. Ries thanked Council members for their help to finalize the annual report to the legislature. He noted he is proud of the way the report turned out because Council members built upon the existing report template to include additional sections such as the Council’s role, membership and fundings from reviewing the SAMHSA MHBG application. We fulfilled our pledge to be more County specific in recognizing the uniqueness of each Neighbor Island. There is a section in our report that highlights the County Service Area Boards (SAB). A copy of the report was shared as a handout for today’s meeting.</p> <p>In the future, R. Ries we hope to see more County SAB input and the Council will make special efforts to initiate opportunities to obtain input. The SABs will also receive a new Comprehensive Integrated Service Area Plan (CISAP) template which they may use to identify, evaluate and assess County based mental health and substance abuse services, and determine whether those services are adequate or if more support is needed.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • C. Knightsbridge is pleased with the report. The Council has come a long way to developing itself. 			
<ul style="list-style-type: none"> • State Council Business Cards 	<p>R. Ries noted that a copy of the old and revised business cards were included as a handout for today’s meeting. Unfortunately, we have not heard back to confirm the approval for use of the state seal and it is a long shot but we did request consideration. Aside from the state seal, R. Ries asked Council members if they have comments or changes to the current business card template.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • A suggestion was shared to create a logo for the Council. • C. Knightsbridge commented about the content on the card and the official designation/titles under each Council member’s name for the area(a) of representation and the contact information is specific to the Council member. • K. Aumer suggested a digital card for Council members. • E. Lau-James likes that the Council business cards are kept generic 			

<ul style="list-style-type: none"> • What are State Behavioral Health Councils and Should Hawaii Form One? Draft Letter to SAMHSA and Community Input 	<p>and if the Council member would like to include their personal contact information, they can handwrite it onto the card before giving it to the person they want to share it with.</p> <p>Based on our Council discussion in November and December 2021, and with input from Deputy Director M. Tsuji, R. Ries noted that the Council has support to move forward to research this topic further.</p> <p>He noted the importance of obtaining feedback from other community members, service area boards, and stakeholders. He mentioned that S. Haitsuka is working on an online survey that Council members can distribute. A handout with more information will be shared at next month’s meeting to preview the online form.</p> <p>R. Ries noted that there is a handout for today’s meeting that includes information about what behavioral health councils are and examples with links to other states who have already formed a behavioral health council.</p> <p>Additionally, R. Ries noted another handout for today’s meeting was previously shared during the Council’s Strategic Planning Retreat. The handout was recommended by the Retreat facilitator. It is the manual for best practices for state behavioral health councils. R. Ries encouraged Council members to review this document where some of the Council’s basic questions are answered. CLICK HERE to view the document.</p> 			
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<ul style="list-style-type: none"> • Strategic Plan Focus Area #1 Council Discussion: Identifying Existing Mental Health Services, Payors, and Eligible Criteria, Statewide, by County, (State-funded and non-State-funded) 	<p>will look for the handout.</p> <ul style="list-style-type: none"> • A. Beninato mentioned that peer support for first responders could help them to cope with the stressors of their job. <p>R. Ries stated this agenda item will remain on the agenda for further discussion.</p> <p>R. Ries noted the Council has worked hard on this Strategic Plan Focus Area over the last few months. Council members identified existing resources that they were personally aware of. Council members also reviewed existing services provided by the adult and child and adolescent mental health divisions as outlined in our annual report to the legislature.</p> <p>Last month, Council members agreed to send our resource grid to the Service Area Boards (SABs) for their input. R. Ries stated that the Council will give the SABs a couple months to place this on their agendas and get feedback to us.</p> <p>R. Ries noted that Council members also discussed incorporating more electronic surveys to help us gather information from other individuals and groups who may not attend meetings but who may be willing to share their experience as it relates to mental health services.</p> <p>In the resource handout for today’s meeting, we discussed linking the SAMHSA eight dimensions of wellness and providing the graphic with the colored circles as a framework for the handout. It was noted that the color scheme used by SAMHSA was not so great but it was verified that those are their selected colors for the graphic. A revised draft of our resource document is included in today’s meeting handouts. The draft includes a disclaimer statement noting that the Council is not endorsing or vouching for the services that are included in the handout.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • Overall, the document looks great and includes feedback from Council members. • Feedback from the SABs will help to identify Neighbor Island 	<p>Obtain SAB input.</p>	<p>C. Weygan-Hildebrand</p>	<p>4/29/22</p>
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<ul style="list-style-type: none"> • Strategic Plan Focus Area #1 Council Discussion: Identify Feasible Ways to Improve Access to Existing Mental Health Services Including Input from Stakeholders within Council Members' Area(s) of Council Representation, SABs and Community Members 	<p>resources.</p> <p>R. Ries noted the Council has made progress with this Focus Area objective in a couple ways. Through Council meeting discussions and presenters, we have identified potential areas where mental health support is needed; sometimes called service gaps.</p> <p>He stated that the Council is in a position where it is able to advocate for services and resources that go beyond what is currently funded by the state. He emphasized the Council's role is larger than state-funded services; where we are able to look into our communities to see where there is a need and take a look at that need to see if it affects two or more service areas (Counties). This is one of our Council roles and this one significant way we are able to advise the Department of Health.</p> <p>In the Council's recent annual legislative report, Table 4 identifies several of these needs. There's always more that we can do.</p> <p>He encouraged Council members to continue to be inclusive and routinely check in with stakeholders and with service area board (SAB) members. He explained that even though the Council may not have all four SAB representatives presently, the Council is able to send notification and requests to the SABs through the service area administrator who helps to coordinate SAB meetings. This person is also the Branch Chief for the County based Community Mental Health Center (CMHC) Branch.</p> <p>R. Ries recommended that information in Table 4 be shared with the SAB to request the SABs assessment and to obtain their input to identify, from their County level perspective, whether they are seeing a need for these services.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • We are working on recruitment for the Council's SAB positions. • Looking forward to receiving their input. <p>Next step is to request this item be placed on the SAB agendas for</p>	<p>Obtain SAB input.</p>	<p>C. Weygan-</p>	<p>4/29/22</p>
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<ul style="list-style-type: none"> • Strategic Plan Focus Area #2 Council Discussion: Identify Ways the Council Will Advocate for the Well-Being of the Community Including Evidence-Based Practices, Peer Reviewed Publications and Other Widely Recognized Local/State/National Resources 	<p>discussion about Table 4 from our recent annual legislature report to obtain their assessment and County level perspective about services needed within their service area (County).</p> <p>R. Ries noted that this Old Business agenda item was assigned to the Infographic PIG (InfoG PIG). This focus area can be combined with their efforts to create an infographic of the tools that the Council is empowered to use to carry out its role.</p> <p>He expressed how this type of infographic can be informational for Council members noting that sometimes we may feel powerless or wanting to help but are overwhelmed by the larger processes and governmental restrictions. There are so many ways we can advocate and it does not have to be a very long or very time consuming activity. We may just need some help to organize ourselves with these helpful infographics and orientation topics.</p> <p>This infographic, once approved by the Council could then be packaged with the efforts of the Onboarding and Reboarding PIG (OnRe PIG) because they are helping us to streamline our orientation (onboarding), re-orientation (reboarding) and exit (offboarding) processes.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • None 		Hildebrand	
<p>VI. New Business</p> <ul style="list-style-type: none"> • State Council Officers for Calendar Year 2022 	<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 under Old Business.</p> <p>R. Ries stated it's that time of year for Council members to nominate and vote for the Council's Executive Officers who will serve through the end of December 2022. Council bylaws provide reference for this annual officer appointment process as well as the roles of each officer – Chairperson, 1st Vice Chairperson, 2nd Vice Chairperson, and Secretary. A description of these positions is provided in the Council's online member portal.</p>			

<ul style="list-style-type: none"> Office of Information Practices Sunshine Law Amendments for Remote Meetings Effective January 2022 	<p>R. Ries stated Council members may place their nominations in the chat or share them verbally. If you place names into the chat, please include the position you are nominating that member for so we accurately record the nominations.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> R. Ries noted this is an opportunity for Council members who want to take a leadership role and be able to cite this on their professional resume. H. Ilyavi strongly recommends keeping the same officers in place from 2021 to continue through 2022. C. Knightsbridge supports R. Ries continuing as Chairperson and K. Aumer continuing as Vice Chairperson. He is also willing to serve if no one else wants to. E. Lau-James has enjoyed being the Council Secretary. She is willing to continue for 2022. <p>R. Ries noted there are several members excused from today’s meeting. Therefore, he recommended Council members only do nominations today. He stated that it may make sense to voting on this agenda item until the March Council meeting. If there are any additional nominations we can also accept those when we meet next month.</p> <p>R. Ries pointed Council members to the two handouts for this agenda item. One handout is from the Office of Information Practices. The other handout is the Governor’s Emergency Proclamation. Last legislative session, the Council was made aware of bills that were being drafted to address remote or virtual meetings. As a result of the COVID-19 pandemic, many government procedures required modification including the requirements for holding meetings.</p> <p>On July 8, 2021, Act 220 was signed into law as a result of the work that was done to draft and finalize Senate Bill 1034. This bill added the option to allow boards to hold remote meetings and amended the option for boards to host meetings at physical locations where the public is invited to attend.</p>			
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	<p>This new law took effect as of January 1, 2022 with the intent to have the option for continuing remote meetings with at least one physical location; however, due to the ongoing COVID-19 pandemic and concerns for community spread, the Governor issued an emergency proclamation suspending the requirement for hosting one physical location for each meeting. This emergency proclamation will sunset or expire as of February 28, 2022 unless the Governor extends it. Please read the meeting handout that discusses the Sunshine Law changes and review the Emergency Proclamation handout.</p> <p>R. Ries stated the Council will want to check with the Service Area Boards as well to make sure they have these handouts. He noted there was a small change on the Council’s meeting notice on the 1st page before our meeting agenda. Instructions were added to explain how someone could submit testimony for Council meetings. This information was previously not a required statement but Act 220 includes this requirement for all public meetings. He noted it was great to see our Council staff are on top of these technical requirements and proactively making sure the Council remains in compliance with the Sunshine Law.</p> <p>Council members may CLICK HERE for additional training on Act 220.</p> <p>He thanked S. Haitzuka, C. Weygan-Hildebrand, and J. Nazareno for their outstanding Council support!</p>			
<p>VII. Presentation/ Guest Speaker</p> <ul style="list-style-type: none"> • DOH Child Adolescent Mental Health Update 	<p>R. Ries introduced today’s guest speaker.</p> <p>Dr. Jamie Hernandez-Armstrong is the Acting Chief Psychologist in the Clinical Services Office at the Child and Adolescent Mental Health Division (CAMHD). She is based out of the Hilo Family Guidance Center office and provides supervision to trainees in conducting eligibility assessments and providing therapy. She received her Ph.D. from the University of Montana and completed her undergraduate work at Lewis and Clark College. Prior to working at CAMHD, she worked for the Department of Education (DOE) as a clinical psychologist.</p>			

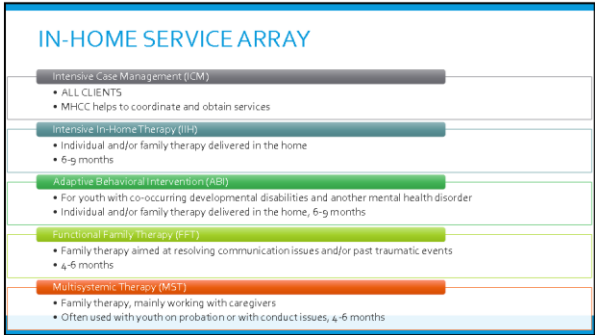
Dr. Scott Shimabukuro, Acting CAMHD Administrator is also attending today and is available to assist with the presentation and any questions Council members may have.

R. Ries noted the Council is particularly interested in knowing:

- How CAMHD is addressing access to services. We have been aware for some time now that there are children who wait for services and parents who are struggling to maintain supports for their behaviorally and emotionally challenged keiki.
- How CAMHD addresses its workforce needs, particularly for how CAMHD utilizes interns or other trainees who need to complete their service hours under supervision and who intend to live and work in Hawaii once they are licensed.
- What are some CAMHD legislative updates and federal grant updates, including CAMHD’s Mental Health Block Grant funds.

J. Jamie Hernandez-Armstrong shared several points of interest including topics such as:

- CAMHD applications for services. How the application volume has changed prior to and during the COVID-19 pandemic. There are four main sources of referrals: Department of Human Services (DHS) Child Welfare Services (CWS), DOE, Parents and parent organizations. Parents have double the referral volume than other sources in Fiscal Years (FY) 2019 and 2020, and Calendar Year (CY) 2021 through July.
- CAMHD data for youth served indicate highest participation in FY2016 at 2496 youth and lowest in FY2021 at 1689 youth.
- CAMHD has in in-home and out-of-home service array.



Transitional Family Home (TFH)

- 6-9 month out of home placement with a therapeutically trained family

Community-Based Residential (CBR)

- 9-12 month specialized treatment
- Current programs include:
 - Treatment for Sex Trafficking Victims and those at risk for Trafficking
 - Boys 12-17
 - Substance Abuse Treatment
 - Residential treatment for girls and boys
 - Treatment for Sexually Reactive Boys (2 programs)

Hospital-Based Residential (HBR)

- 4-6 week treatment at Kahi Mohala (Oahu)
- Highest level of care

OUT-OF-HOME SERVICE ARRAY

- CAMHD also provides crisis services and additional support services

CRISIS SERVICES

Crisis Mobile Outreach (CMO)

- 24/7 response to Crisis Calls from the Hawaii Cares Line

Therapeutic Crisis Home (TCH)

- 3-5 day out of home stay with a therapeutically trained family during a brief crisis

Residential Crisis Stabilization Program (RCSP)

- 30-day program on Oahu for stabilization and transition to different levels of care

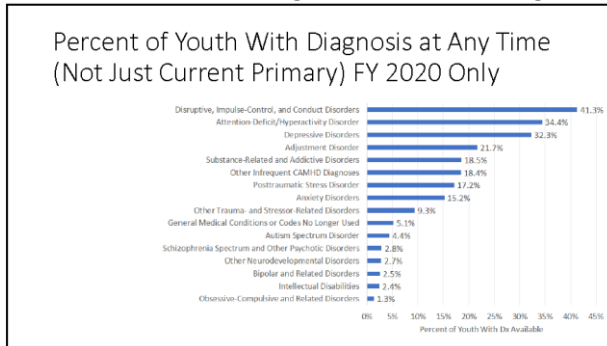
ADDITIONAL SUPPORT WITH CAMHD

<p>Medication Management</p> <ul style="list-style-type: none"> • Youth must have another caregiver in place to have medication management 	<p>Clinical Lead/Student Therapist</p> <ul style="list-style-type: none"> • Individual and family therapy • Get also see siblings and/or caregivers of CAMHD youth • Outreach level of supports: 1 time per week 	<p>Kealahou Services</p> <ul style="list-style-type: none"> • For youth who identify as female with a history of trauma • Works to improve engagement in treatment • Trauma Focused Cognitive Behavioral Therapy (TF-CBT) 	<p>Parent Partner</p> <ul style="list-style-type: none"> • Support in the community: navigate services with CAMHD and other state agencies
<p>Youth Partner</p> <ul style="list-style-type: none"> • Support for youth to navigate services with CAMHD and other state agencies 	<p>Telehealth groups</p> <ul style="list-style-type: none"> • Dialectical Behavioral Therapy (DBT) skills group • Grouping skills group 	<p>Paraprofessional</p> <ul style="list-style-type: none"> • Works for the youth's therapist to meet more frequently with the youth and learn to apply skills learned in therapy 	<p>One-to-one support</p> <ul style="list-style-type: none"> • For youth who need additional support to maintain their current placement

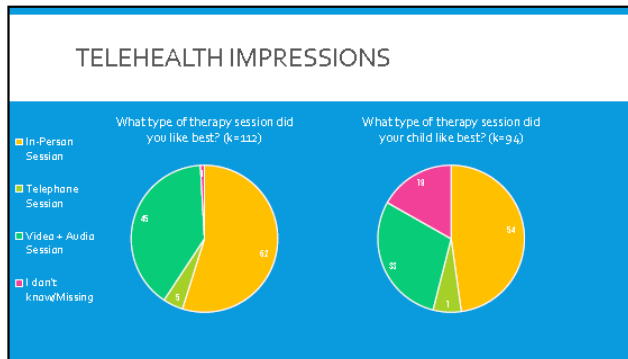
- The average age of youth receiving services has increased since FY2019 (pre-pandemic).
 - FY2018, the average age was 13.2 years
 - FY2019, the average age was 13.4 years

- FY202, the average age was 13.6 years

- In FY2020, the percentage of youth with diagnosis at any time was:



- CAMHD has provide telehealth services where/when applicable. In general, parents who participated in telehealth appointments and who responded to the post-telehealth appointment survey were satisfied with the delivery of services via telehealth.



- CAMHD has several grant funded projects including:
 - SAMHSA Community Mental Health Block Grant (MHBG) where CAMHD uses funds for First Episode Psychosis (FEP) and Crisis care services.
 - Data-to-Wisdom Grant (D2W) which helps to address improvements to CAMHD’s in-home services, electronic reporting systems, collaborations with university partners for training and internships, enhancing the youth voice within the

	<p>child-serving system of care, strengthening the Hawaii Interagency State Youth Network of Care (HISYNC) and trauma-informed care task force activities.</p> <ul style="list-style-type: none">• CAMHD staffing updates noted:<ul style="list-style-type: none">○ 36 staff vacancies○ 8 staff positions filled in Q4 CY2021○ Positions cut due to COVID-19 are needed○ Hiring freezes in the past have created hiring challenges○ Increasing pay is difficult due to collective bargaining rules. Pay is also a contributing factor to reduced staff retention rates.• CAMHD has identified the following key takeaways and recommendations for service monitoring:<ul style="list-style-type: none">○ Continue to monitor referral and enrollment; consider expanding outreach efforts○ Despite changes made during the COVID-19 pandemic, CAMHD continues to see improvements in and initial acuity of CAMHD youth relative to prior years.○ Consider ways to maximize telehealth services including appropriate format and under what conditions.○ Continuous quality improvement goals for current monitoring of programs and increased youth programming○ More funding for youth crisis services○ More support for finding providers where services are needed○ Partner with media to increase awareness of CAMHD services, general mental health issues in the community, and improving relationships with community partners. <p>Council members shared the following comments:</p> <ul style="list-style-type: none">• E. Lau-James asked a question about the D2W grants. J. Hernandez-Armstrong explained this specific grant provides funding to improve data systems to inform decision making for services including evidence-based services, trainings, and outcomes. CLICK HERE to learn more about the D2W grant.• K. Merriam asked about mental health awareness month coming up in May 2022. She asked what are some of the activities that CAMHD will be planning for mental health awareness month? J. Hernandez-			
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	<p>Armstrong noted that CAMHD does social media posts, virtual sign waving and media outreach with various local news stations. There were also proclamations signed by the Governor and mayors. Depending on how things are with COVID-19 in 2022, there may possibly be in-person mental health awareness events in May.</p> <ul style="list-style-type: none">• K. Aumer mentioned about telehealth and the satisfaction rates. She wondered about the effectiveness of telehealth. J. Hernandez-Armstrong clarified that while the satisfaction rate was not 100%, CAMHD is aware that there are specific populations that benefit more from in-person services. S. Shimabukuro noted that effectiveness has been documented nationally. In one example from the American Psychological Association (APA), if significant progress is not being made via telehealth, a switch to in-person is warranted.• K. Aumer asked whether audio-only or if audio and video together are more effective. Her concern is that services can be effectively provided via telehealth and not drain the system of resources. J. Hernandez-Armstrong noted that satisfaction survey responses indicated respondents were satisfied with the audio and video options provided for their telehealth appointment.• K. Aumer asked if CAMHD practicums and internships are pair. J. Hernandez-Armstrong clarified that internships are paid and practicums are not paid.• C. Knightsbridge is interested in knowing how he can get an internship based on his now defunct school's status. He wants to complete his internship hours, obtain licensure and continue to live and work in Hawaii with his family. J. Hernandez-Armstrong noted that the Hawaii Psychology Internships Consortium (HI-PIC) partners with the Western Interstate Commission for Higher Education (WICHE). CLICK HERE for HI-PIC's website and to review a copy of the 2022-2023 HI-PIC internship brochure. CLICK HERE for WICHE's website for more information about how their Behavioral Health Program (BHP) administers the HI-PIC and other Professional Student Exchange Program (PSEP) opportunities.• K. Aumer noted the "gap year" for post-doc period for internships. She wonders if CAMHD pays for this "gap year" for interns. J. Hernandez-Armstrong confirmed that CAMHD does pay interns			
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	<p>during this “gap year.”</p> <ul style="list-style-type: none">• H. Ilyavi noted that while the APA data may mention satisfaction with telehealth, she wonders if the APA data is broken down by County. Her experience on Hawaii Island is the opposite of what was summarized for this APA data with the exception of young children. Her background is in database design with mental health. She wants to know if there are broken down numbers vs high level numbers. J. Hernandez-Armstrong acknowledged that in-person services created challenges for some parents and children so telehealth services opened the opportunity for them to receive services without needing to attend in-person. J. Hernandez-Armstrong and S. Shimabukuro noted they were not sure if the data was broken down by County.• H. Ilyavi noted that Hawaii Island as with other Neighbor Islands need to be looked at differently when it comes to services and areas where services may not be readily available in traditional ways (i.e. Puna). She encourages CAMHD to look at data from the unique view of each Neighbor Island so data can be informative and accurately collected/reported by County. S. Shimabukuro noted that CAMHD is currently working with the Palo Alto Veterans Institute for Research (PAVIR). He acknowledged the need for data integrity and appreciated H. Ilyavi’s comments regarding data that is informative.• S. Shimabukuro noted one of the trade offs for telehealth vs in-person during the COVID-19 pandemic is to look at it from the perspective of: is it better to see someone’s face on a screen than to see their face behind a mask in-person.• K. Aumer emphasized that what people say what they want and what they actually get is not necessarily always in alignment. She mentioned the behavioral health dashboard. S. Shimabukuro noted that CAMHD was part of the dashboard development but the responsibility for dashboard maintenance has shifted and it may no longer be managed/updated. CAMHD is creating their own data dashboards and much of the data is coming from the D2W grant. There are timelines built into contracts and those deliverables so data will be available accordingly.			
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<p>VIII. Strategic Plan Focus Areas and Action Plan: Permitted Interaction Group (PIG) Reports</p> <ul style="list-style-type: none"> • PIG for Public Service Announcement (PSA) • PIG for Onboarding and Reboarding (OnRe) 	<p>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.</p> <p>If PIG members would like to share a longer report, please e-mail it to S. Haitsuka no less than 10 calendar days prior to the next meeting.</p> <p>The PSA PIG was formed at the Council’s August 10, 2021 meeting. PSA PIG members include: K. Aumer, A. Beninato, C. Knightsbridge, and R. Ries. A. Beninato is the PSA PIG lead.</p> <p>R. Ries noted that last month, the Council finalized and voted for the four PSA scripts. S. Haitsuka provided the final scripts to A. Beninato. Several Council members were willing to lend their voices for the PSAs including A. Beninato, K. Merriam, C. Knightsbridge, and J. Renfro.</p> <p>R. Ries noted this PSA PIG will remain active until the PSA recordings are completed and the Council is aware of when the PSAs will air on KTUH.</p> <p>A. Beninato stated that the current status is pending the audio clip recordings and KTUH radio station approval for the PSAs to air.</p> <p>R. Ries stated the next step is for the Council to lend their voices for PSA recording, obtain airtime approval from KTUH and share the recording files (place in the Council’s online member portal for archive).</p> <p>The OnRe PIG was formed at the Council’s September 14,2021 meeting. OnRe PIG members include C. Knightsbridge, E. Lau-James, K. Martinez and T. Reed. C. Knightsbridge is the OnRe PIG lead.</p> <p>This PIG was formed to address objectives in our Strategic Plan Focus Area #4 which is Council focused and addresses our need to develop a standard process for welcoming to new members, providing support to existing members and recognizing members when they term out.</p>	<p>Share recording files.</p>	<p>A. Beninato</p>	<p>When available</p>
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<ul style="list-style-type: none"> • PIG for Legislation (LEG) • PIG for Hospital Mental Health Care (HMHC) • Infographic PIG (InfoG PIG) 	<p>Updates were not shared.</p> <p>The LEG PIG was formed at the Council’s September 14, 2021 meeting. LEG PIG members include K. Aumer, C. Knightsbridge, E. Lau-James, T. Reed, J. Renfro and R. Ries. C. Knightsbridge is the LEG PIG lead.</p> <p>Updates were not shared.</p> <p>The HMHC PIG was formed at the Council’s September 14, 2021 meeting. HMHC PIG members include: R. Ries, N. Crozier, C. Knightsbridge, and K. Merriam. E. Lau-James is the HMHC PIG lead.</p> <p>E. Lau-James stated the HMHC PIG did not meet. The next step for this HMHC PIG is to schedule a meeting to continue working on the follow up items listed in the meeting notes.</p> <p>The InfoG PIG was formed at the Council’s November 9, 2021 meeting. InfoG PIG members include: H. Ilyavi, C. Knightsbridge, and T. Reed. T. Reed is the InfoG PIG lead.</p> <p>This PIG is tasked with taking the Council’s feedback from our Strategic Plan Focus Area #3 discussion last month regarding tools the Council is familiar with and helping to create an infographic that we can use for our internal reference as well as one we can share to educate the community about who we are and what we do as part of our branding.</p> <p>Updates were not shared.</p>	<p>Schedule next OnRe PIG meeting</p> <p>Schedule next LEG PIG meeting</p> <p>Schedule next HMHC PIG meeting</p> <p>Schedule first InfoG PIG meeting</p>	<p>C. Knightsbridge S. Haitsuka</p> <p>C. Knightsbridge S. Haitsuka</p> <p>E. Lau-James/ S. Haitsuka</p> <p>T. Reed/ S. Haitsuka</p>	<p>1/4/22</p> <p>1/4/22</p> <p>1/4/22</p> <p>1/4/22</p>
<p>A. Island Representative Reports</p>	<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 S. Haitsuka no less than 10 calendar days prior to the next</p>	<p>For information only.</p>		

<ul style="list-style-type: none"> Maui Service Area Board (MSAB) 	<p>meeting.</p> <p>T. Reed shared the following updates:</p> <ul style="list-style-type: none"> None provided. 			
<p>IV. State Agency Representative Reports</p> <ul style="list-style-type: none"> Department of Health (DOH) Adult Mental Health Division 	<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 S. Haituka no less than 10 calendar days prior to the next meeting.</p> <p>K. Merriam shared the following updates:</p> <ul style="list-style-type: none"> She asked the Council how they would like to get updates from her and what updates would be useful. She mentioned Eddie Mersereau, Alcohol and Drug Abuse Division (ADAD) Administrator is on leave. She was introduced to John Valera who is the Acting ADAD Administrator. She looks forward to getting to know him more and receiving ADAD updates from him. <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> R. Ries suggested she could share about Behavioral Health Administration (BHA) updates and updates from the BHA Division including AMHD, CAMHD and ADAD. He suggested updates on peer specialist employment and general supported employment options. R. Ries noted that the Council has received updates on federal grants and funding awards. Updates on services and data like CAMHD provided in J. Hernandez-Armstrong’s update showing population served, demographics, and effectiveness of services would be helpful to see from AMHD and ADAD. Maybe updates on consumers and consumer advocates and how they are being included in BHA service planning would be helpful to know. R. Ries mentioned staffing updates and internship options. Basic data to start would be great: 	<p>For information only.</p>		

<ul style="list-style-type: none"> • Department of Human Services (DHS) Hawaii Public Housing Authority (HPHA) • Department of Human Services (DHS) MedQUEST (MQD) Division Medicaid Program • Department of Education (DOE) Student Services Branch (SSB) 	<ul style="list-style-type: none"> ○ # of staff by County ○ # service recipients by County/by service ○ # of residential beds/average length of stay for treatment ○ # crisis interactions by County/by service • R. Ries explained that basic data shared by BHA and Divisions could be used by the Council to help determine whether services are adequate, if there’s still more need and whether there are gaps in more than one service area (County) which is part of the Council’s responsibility for planning. <p>K. Martinez shared the following updates:</p> <ul style="list-style-type: none"> • None provided. <p>J. Fujii shared the following updates:</p> <ul style="list-style-type: none"> • None provided. <p>J. Renfro shared the following updates:</p> <ul style="list-style-type: none"> • None provided. 			
<p>V. Specialty Area Representative Reports</p>	<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>For information only.</p>		

<ul style="list-style-type: none"> • Hawaii Advisory Committee on Drug Abuse and Controlled Substances (HACDACS) • Mental Health Providers • Parents and Family Members of Mental Health Service Recipients 	<p>If members would like to share a longer state agency report, please e-mail it to S. Haitzuka 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"> • None provided. <p>R. Ries shared the following updates:</p> <ul style="list-style-type: none"> • There is a need for public service announcements (PSA) and other media health promotion around self-care in general. • There’s also a need to publicly acknowledge and show appreciation for healthcare workers especially as we continue to see the COVID-19 waves and new variants. It would be great to see how we might be able to address this area through our strategic plan. <p>H. Ilyavi shared the following updates:</p> <ul style="list-style-type: none"> • She is finding that everyone, especially those who work in the medical field, including mental health, would benefit from self-care and other support services for their own well-being. • Many people continue to be affected in some way for mental health and the COVID-19 omicron variant is not helping. People in general are overwhelmed with addressing their mental health needs, others’ needs and not getting exposed or testing positive for COVID-19. • In her organization, they are operating on a “skeleton crew” with little support for staff due to COVID-19 related staff coverage issues. • She has had to work overtime hours to support other staff when they are out due to COVID-19 close contact or positive test result. • She noted that the coverage for crisis line calls is problematic. Not enough staff available to answer incoming crisis calls. • Increasing support for healthcare workers in the field is something she supports. Working with the community to support education 			
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<ul style="list-style-type: none"> • Student/ Youth and Consumer Advocates 	<p>and support those who want to live and work in Hawaii would be great including those who are contracted to stay for a longer period of time (maybe five+ years) and being paying higher wages for temporary workers (maybe three months) would be okay.</p> <p>E. Lau-James shared the following updates:</p> <ul style="list-style-type: none"> • As a family member, she feels the effectiveness of telehealth for her husband has been life changing. She and her husband have recently experienced difficult months of mental health care recently but with the help of telehealth services and support, her husband was able to get linked to therapy. The option for telehealth was less threatening to him and it broadened his access to services. It is difficult to get him out of the house. She is so grateful for the telehealth option. <p>K. Aumer shared the following updates:</p> <ul style="list-style-type: none"> • She is interested in endorsing and supporting bills that are related to telehealth access. She is particularly interested in bills that support infrastructure for telehealth services. • She emphasized that there is a need all around for compassion. Many feel overwhelmed and schools are especially challenged. <p>A. Beninato shared the following updates:</p> <ul style="list-style-type: none"> • He acknowledged there are a lot of discussion around COVID-19 and the omicron variant. There's a lot of politics regarding the pandemic and COVID-19 vaccines. <p>N. Crozier shared the following updates:</p> <ul style="list-style-type: none"> • None provided. <p>C. Knightsbridge shared the following updates:</p> <ul style="list-style-type: none"> • None provided. <p>T. Reed shared the following updates:</p> <ul style="list-style-type: none"> • None provided. 			
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<p>VI. Closing Announcements</p>	<p>Council members shared the following announcements:</p> <ul style="list-style-type: none"> • K. Merriam noted that May is Mental Health Month. • K. Merriam mentioned she will be at the Honolulu Police Department (HPD) training the week of January 24th. There will be a cohort of 15 officers. They will be receiving Crisis Intervention Team (CIT) training. She will be assisting with this training. CLICK HERE for an article about the CIT training. • S. Shimabukuro noted that he will also be participating in the CIT training to assist with the youth and Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) section of the agenda. 	<p>For information only.</p>		
<p>VII. Meeting Evaluation / Future Agenda Items</p>	<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"> • R. Ries thanked Council members for their participation. <p>The next regular Council meeting is scheduled for February 8, 2022 from 9:00 a.m. to 12:00 p.m. via Zoom.</p> <p>Pending speaker availability/confirmation for a future meeting presentation:</p> <ul style="list-style-type: none"> • Major Mike Lambert from the Honolulu Police Department (HPD) to speak about HPD’s efforts to ramp up crisis intervention and divergence training for HPD officers and to seek Council feedback (February/March 2022). • Arranging for someone from Maui to speak about Wailuku, Maui’s Community Clean and Safe Program that provides opportunities for homeless individuals to become employed (March/April 2022) • Honolulu City and County CORE (March/April 2022) • Substance Abuse and Mental Health Service Administration (SAMHSA)/Behavioral Health Councils (Apr/May 2022). 	<p>For information only.</p>		
<p>XIV. Adjournment</p>	<p>The meeting was adjourned at 11:43 a.m.</p>	<p>For information only.</p>		
<p>Electronic Mail Outs</p>	<p>The following handouts were e-mailed to SCMh members and individuals on the SCMh e-mail distribution list:</p>	<p>For information only.</p>		

	<p>E-mail (1 of 2) with handouts (total of 9 handouts)</p> <ol style="list-style-type: none"> 1. January 2022 Meeting – Agenda 2. December 2021 Meeting – Draft Minutes 3. December 2021 Meeting – FY22 Attendance Log 4. January 2022 Meeting – Old Business, Thank you letter, M. Tsuji DRAFT 5. January 2022 Meeting – Old Business, 2022 SCMH Report to Governor and Legislature FINAL 6. January 2022 Meeting – Old Business, Business Card DRAFT 7. January 2022 Meeting – Old Business, SAMHSA Behavioral Health Planning Council letter, K. Forde DRAFT 8. January 2022 Meeting – Old Business, State Behavioral Health Planning Councils Information Sheet 9. January 2022 Meeting – Old Business, Behavioral Health Planning Council Best Practices Manual 2014 <p>E-mail (2 of 2) with handouts (total of 8 handouts)</p> <ol style="list-style-type: none"> 10. January 2022 Meeting – Old Business, Strategic Plan Res Grid 11. January 2022 Meeting – New Business, OIP Sunshine Law Amended, Remote Meetings Effective January 2022 12. January 2022 Meeting – New Business, OIP Sunshine Law Amended, Remote Meetings Governor Emergency Proclamation 13. January 2022 Meeting – PIG List 14. January 2022 Meeting – PIG Onboard Reboard Ess Element List 15. January 2022 Meeting – PIG Legislation Meeting Notes, 12/23/21 16. January 2022 Meeting – PIG Legislation Participation Guidelines Current Working Document 17. January 2022 Meeting – Thank you letter, A. Curtis FINAL 			
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