

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

Virtual Meeting via Zoom
August 11, 2020
9:00 a.m. – 11:30 a.m.

Members Present: **Crozier, Charleen “Naomi”; Dang, Cynthia “Cindi”; Ilyavi, Heidi; Lau-James, Eileen; Macias, Alexandra; Martinez, Beatrice “Kau’i”; Matayoshi, Carol; Nagao, Lani; Pascual-Kestner, Rusnell; Ries, Richard; Shimabukuro, Scott**

Members Absent: **Fujii, John**

Members Excused: **Knightsbridge, Christopher; Lino, Timothy; Reed, Tara**

Guests Present: **Renee Rivera (Maui Svc Area Board); Brian Talisayan (Mental Health America); and an unknown guest with the Zoom ID “Hawaii Public Policy Advocates” who did not respond to multiple chat prompts asking for the guest(s) name.**

DOH Staff Present: **Haitsuka, Stacy; Keane, Greg; Nazareno, Jocelyn; Tanaka, Jean**

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ ACTIONS/CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
I. Call to Order	Chair R. Ries called the meeting to order at 9:06 a.m. Members and guests introduced themselves. Quorum was not established by 9:11 a.m. Therefore, the meeting continued as an information only meeting.	For information only.		
II. Meeting Announcements	R. Ries shared the following announcements: <ul style="list-style-type: none">• The SCMH continues to do its part to Stop the Spread of COVID-19 by holding its meetings virtually for the time being. Handouts are distributed electronically a week before the meeting.• To use our time efficiently during today’s meeting, he asked Council members and guests to follow the following basic virtual Council meeting courtesies:	For information only.		

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	<ul style="list-style-type: none"> ○ Please address any comments or questions during the meeting to him. ○ Members and guests may raise their “hand” virtually, type into the chat box, or orally interject during the meeting to get his attention. ○ Please wait to be acknowledged before speaking. This will help to keep the meeting organized and the audio clear for minute 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 best to include and acknowledge guests when appropriate. ● For Council members who need to take a break and step away from the meeting, please notify him before leaving as the Council needs to keep 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 and rejoining the meeting by re-clicking on 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 the person speaking. <p>Today’s agenda includes a format change with reports from Council members for their respective Council representation areas.</p>			
III. Consideration and Approval of Review Minutes <ul style="list-style-type: none"> ● July 14, 2020 	<p>The draft minutes for the July 14, 2020 meeting were reviewed.</p> <p>There were no amendments.</p>	<p>Finalize minutes as drafted.</p>	<p>S. Haituka</p>	<p>8/31/20</p>

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	<p>Quorum was established at 9:15 a.m.</p> <p>E. Lau-James made a motion for the minutes from the July 14, 2020 meeting be approved. C. Matayoshi seconded the motion.</p>	Motion passed unanimously.		
IV. Community Input	[No community input was received.]			
V. New Business <ul style="list-style-type: none"> 1st Vice Chair Acceptance of Nomination and Confirmation of Willingness to Serve Letter of Support for the Mental Health Block Grant 	<p>R. Ries asked C. Matayoshi if she was willing to serve as the 1st Vice Chair of the Council. Official duties of the 1st Vice Chair are shared in the Council Bylaws.</p> <p>C. Matayoshi confirmed her willingness to serve as 1st Vice Chair.</p> <p>Council members support having Neighbor Island representation on the Council's leadership team. Council members expressed their appreciation to C. Matayoshi, a Hawaii Island resident, for her willingness to serve as 1st Vice Chair.</p> <p>R. Ries referred members to the draft Council letter and related handouts. Each year, the Council reviews the Substance Abuse and Mental Health Services Administration (SAMHSA) Block Grant information and writes a letter to SAMHSA acknowledging its review and sharing any comments.</p> <p>This year, the Council is being asked to review the proposed block grant spending for Fiscal Year (FY) 2021.</p> <p>One handout describes the direct and indirect services covered under the mental health block grant.</p> <p>The handout that did not have any green shading identifies the block grant categories, the Adult Mental Health Division (AMHD) contracted provider who provides the service, and how much funds are proposed.</p>			

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	<p>This handout only shows AMHD’s proposal for block grant funding.</p> <p>The third handout with the green shading identifies the total spending for both the AMHD and the Child and Adolescent Mental Health Division (CAMHD) by type of activity (direct or indirect service). Estimated combined funding from the Block Grant, Medicaid and other federal funds and state funds are noted on this handout.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • This is the second half of the Block Grant year. • Last year the Council sent a letter of support. • C. Dang noted in the past, Council members volunteered to read the Block Grant information and share feedback based on their areas of representation or knowledge. • H. Ilyavi stated she supports approving the draft letter now with the Council scheduling a future presentation about the mental health block grant. <p>J. Tanaka, AMHD Planning Specialist, joined today’s meeting to address any questions from Council members. She noted that the maintenance of effort process includes SAMHSA allowing Hawaii to request a waiver for funding. She can review the process more thoroughly when she returns to present about the Block Grant at a future Council meeting.</p> <p>C. Matayoshi made a motion to approve the letter with non-substantive technical edits. H. Ilyavi seconded the motion.</p> <p>**A. Macias left the meeting at approximately 9:36 a.m.**</p>	<p>Ayes (9); Noes (0); Abstentions (0)</p> <p>Motion passed unanimously.</p>		

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<ul style="list-style-type: none"> • PIG for Website, Social Media, and Advocacy • PIG for Legislation 	<p>sending them to the other PIG members for review.</p> <p>E. Lau-James made a motion to approve the letter with the addition of bullet points. H. Ilyavi seconded the motion.</p> <p>R. Ries noted that other members of this PIG were not present to provide an update. He shared that he would like to step down from this PIG at this time.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • C. Dang and C. Matayoshi expressed support for R. Ries stepping down. <p>E. Lau-James provided an update. She noted that this PIG has not met and noted that the regular 2020 Legislative Session has ended. She would like this PIG to be dissolved at the time to allow for a short break. Prior to the 2021 Legislative Session, a new PIG can be formed. Council members shared the following comments:</p> <ul style="list-style-type: none"> • C. Dang noted that DOH does its legislative planning now. • R. Ries suggested as an alternative to dissolving this PIG, to consider leaving the PIG active, but if no report, so state. • C. Dang stated she is interested in joining this PIG. • E. Lau-James stated she joined this PIG to learn more about the legislative process with the expertise of a previous Council member. • C. Dang stated she is willing to invite legislative staff to a future Council meeting to provide an overview of the legislative process. She is willing to contact legislators for their availability. <p>S. Haitsuka shared, as the Legislative Liaison for the AMHD, the DOH will likely not be ramping up any legislative activities until later this</p>	<p>Ayes (9); Noes (0); Abstentions (0)</p> <p>Motion passed unanimously.</p> <p>Members of this PIG are: C. Knightsbridge, C. Dang, R. Ries, T. Reed, and C. Matayoshi.</p> <p>Members of this PIG are: C. Knightsbridge, E. Lau-James, T. Reed, and R. Ries.</p>		

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<ul style="list-style-type: none"> • PIG for the SCMH Retreat 	<p>year. The soonest the Council could expect to receive a DOH legislative update would be in December.</p> <p>E. Lau-James made a motion for C. Dang to join this PIG. N. Crozier and C. Matayoshi seconded the motion.</p> <p>The following updates were provided by E. Lau-James.</p> <ul style="list-style-type: none"> • There is a six (6) week paperwork processing time; therefore, the current Retreat dates are pushed to October/November. • Hopefully the paperwork will get processed in time for October. • The facilitator provided her background information with her experience as a virtual meeting facilitator as requested at last month's meeting. E. Lau-James read the facilitator's bio statement so all Council members could learn more about her. • Facilitator recommended that attendees complete pre-work ahead of Part I of the retreat and give more work that can be done between Part I and Part II. • A draft agenda was shared as a handout and reviewed. If the facilitator recommends changes to the agenda, she will let everyone know. <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • C. Dang thanks E. Lau-James for sharing about the facilitator's background and experience with virtual meetings. • R. Ries suggested to save time, forego a guest speaker for Part I of the retreat but possibly consider a guest speaker for Part II of the retreat, such as Lt. Governor Josh Green. • C. Dang thought that 30 minutes is a long time to speak. She suggested asking Lt. Governor Josh Green to speak for 15 minutes and asking Deputy Director Edward Mersereau to speak for 15 minutes. 	<p>Ayes (9); Noes (0); Abstentions (0)</p> <p>Motion passed unanimously.</p> <p>Members of this PIG are: Eileen Lau-James and C. Knightsbridge</p>		

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	<ul style="list-style-type: none"> E. Lau-James concurred that 15 minutes is a reasonable amount of time. R. Ries asked for clarification on the times listed on the agenda. Usually, Council meetings start at 9:00 a.m. He is okay with a start time of either 9:00 a.m. or 10:00 a.m. Majority of Council members requested that the agenda be revised to start at 9:00 a.m. which is their preferred start time. <p>N. Crozier made a motion to accept the retreat agenda with amendments to the time (change to 9:00 a.m.) and to add two (2) 15-minute speakers to Part II of the agenda. C. Matayoshi seconded the motion.</p>	<p>Ayes (9); Noes (0); Abstentions (0)</p> <p>Motion passed unanimously.</p>		
<p>VII. Island Reports</p> <ul style="list-style-type: none"> Kauai Service Area Board (KSAB) 	<p>R. Ries explained that 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>He asked that oral summaries be brief and 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 Council meeting.</p> <p>The following updates were provided by L. Nagao.</p> <ul style="list-style-type: none"> There are three (3) KSAB members all of whom have ended their terms and are in the process of renewing. There has been discussion about the absence of detox facilities on Kauai that are dedicated to substance use detox. She has over 11 years of experience working in addiction treatment with individuals who were diagnosed with a co-occurring disorders and She has learned a lot about all the systems including getting help for people who do not want help. It's important to support families who want to get help for loved ones but also respect autonomy for individual choice. A report provided by Wilcox hospital's Emergency Department 	<p>For information only.</p> <p>L. Nagao represents the KSAB on the SCMH.</p>		

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<ul style="list-style-type: none"> Maui Service Area Board (MSAB) Oahu Service Area Board (OSAB) 	<p>showed an influx of young patients with alcohol poisoning and other substances over the past two (2) months.</p> <ul style="list-style-type: none"> Samuel Mahelona is looking at a future vision to implement a detox facility. An adolescent center has been physically created on Kauai but it needs an operator. <p>No update was provided.</p> <p>The following updates were provided by C. Dang.</p> <ul style="list-style-type: none"> The OSAB met in July with quorum. They are working on the CISAP and have identified two emerging issues. One emerging issue is access to mental health mobile kiosks especially in rural communities. The legislature talked about mobile vans during the 2020 Legislative Session and how these van can be used in the community on specific dates to increase access to services. The second emerging issue is addressing mental health crises in the community. It's important to partner with the Honolulu Police Department (HPD) for officer training. The OSAB is still looking for a school representative/youth to join the board. <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> R. Ries noted that the OSAB may want to inquire with T. Lino and S. Shimabukuro regarding resources for board membership of a youth. 	<p>T. Reed represents the MSAB on the SCMH.</p> <p>MSAB meets monthly on the 1st Monday from 2-3 p.m.</p> <p>C. Dang represents the OSAB on the SCMH.</p> <p>OSAB meets monthly on the 3rd Wednesday from 9-10 a.m.</p>		

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<ul style="list-style-type: none"> Hawaii Service Area Board (HSAB) 	<ul style="list-style-type: none"> S. Shimabukuro noted that the Crisis Intervention Team (CIT) contract was awarded. There were two CIT trainings so far. R. Ries mentioned that the Council could consider asking a representative from HPD to present at a future Council meeting. <p>The following updates were provided by C. Matayoshi.</p> <ul style="list-style-type: none"> H. Ilyavi will join the HSAB. CAMHD reported less missed appointments as a result of offering telehealth services. On August 3, 2020 Hawaii Island Clubhouses re-opened on a limited basis. The Hawaii Island District Health Office received a large shipment of personal protective equipment (PPE). The HSAB is working on the CISAP with input from stakeholders. They invited service providers, including Mental Health Kokua (MHK) and Big Island Substance Abuse Council (BISAC) to HSAB meetings to share information. <p><u>Comprehensive Integrated Service Area Plans (CISAP)</u> The Council will review CISAPs which are island/County-based plans that includes information and data about current and future mental health services. With this CISAP information, the Council may then review and consider what is presented and use that information for Council discussions.</p> <p>Reviewing the CISAP is a covered activity under the SAB and State Council Bylaws. Each island SAB representative is responsible for obtaining a copy of the most recently completed CISAP.</p>	<p>C. Matayoshi represents the HSAB on the SCMH.</p> <p>HSAB meets monthly on the 4th Tuesday at 9:30 a.m.</p>		
BREAK	<p>A break was scheduled from 10:15 a.m. to 10:25 a.m.</p> <p>However, in lieu of a formal break, R. Ries stated at the beginning of the meeting that members who need to take a break during the meeting should notify him before leaving and when they return to assure</p>	For information only.		

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	Council meeting quorum is monitored.			
<p>VIII. State Agency Representative Reports</p> <ul style="list-style-type: none"> Department of Education (DOE) Hawaii Public Housing Authority (HPHA) 	<p>R. Ries explained that 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>He asked that oral summaries be brief and 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 Council meeting.</p> <p>T. Lino was not present to provide a report but shared information that describes ways the DOE provides behavioral health supports to students. On his behalf, S. Haitsuka shared the information.</p> <ul style="list-style-type: none"> Speak Now HIDOE Anti-Bullying app allows reporting in real time about bullying incidents on campus. School officials receive tips (reports) which can be submitted anonymously. The app stores the user's prior tips and users can submit updates if available. HIDOE Ho'oha'aheo February 2020 Newsletter highlights the Office of Student Support Services (OSSS) where T. Lino works. His supervisor, Heidi Armstrong is featured in the newsletter and the OSSS services are described in the newsletter article. HIDOE Office of Student Support Services (OSSS) informational handout provides a more comprehensive description of the OSSS including details about crisis and suicide prevention, support for students in unstable housing, social and emotional learning (SEL), positive behavior intervention support (PBIS), and more! HIDOE Return to Learn website is the DOE's official statewide school reopening plan website that includes guidance and updates and an archive of previous communication. <p>The following updates were provided by K. Martinez.</p> <ul style="list-style-type: none"> The Hawaii Public Housing Authority (HPHA) is committed to promoting adequate and affordable housing, economic opportunity, and a suitable living environment, for low-income 	<p>For information only.</p> <p>T. Lino represents the DOE on the SCM.</p> <p>K. Martinez represents HPHA on the SCM.</p>		

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	<p>families and individuals, free from discrimination.</p> <ul style="list-style-type: none"> • Of the 3,300 public housing authorities (PHAs) nationwide, the HPHA is one of the top 20 largest PHAs and one of only three PHAs statewide. • Eligibility for federal public housing includes, in part: <ul style="list-style-type: none"> ○ Meeting U.S. Citizenship or eligible immigrant status. ○ Must be 18 years old or older, single, or a family of two or more individuals who intend to live together as a family unit and whose income and resources are available to meet their needs. ○ Income is within limits set forth by the U.S. Housing and Urban Development (HUD) office. Yearly gross income means \$99K (median family income); \$96,400 (low income; 80% for a family of 4); or \$60,250 (very low income; 50% for a family of 4). • Eligibility for state public housing, includes, in part: <ul style="list-style-type: none"> ○ Meeting State of Hawaii residency criteria. ○ Income limits of \$96,400 (low income; 70% for a family of 4); \$60,250 (very low-income; 50% for a family of 4); or \$36,150 (extremely low-income; 30% for a family of 4). ○ Qualify as a family or elderly/disabled individual. ○ Have no assets exceeding the applicable limit. • HPHA housing programs include: <ul style="list-style-type: none"> ○ Housing Choice Voucher Program (aka Section 8) ○ Federal and State Rental Subsidies ○ Section 8 Family Self-Sufficiency ○ State Rent Supplement Program <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • N. Crozier asked how long someone can get rent supplement? K. Martinez noted that rent supplement is only as long as state funds are available. • N. Crozier asked if the rent supplement includes Maui? K. Martinez confirmed that it is only available on Oahu. 			

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<ul style="list-style-type: none"> Department of Health Child Adolescent Mental Health Division (DOH CAMHD) 	<ul style="list-style-type: none"> K. Martinez added that while the public housing waitlist on Oahu is closed, the waitlist is open for all other islands. For example, there are a lot of openings on Molokai and Maui County is advertising within the County for these rent supplement funds. N. Crozier asked where the application can be accessed. K. Martinez stated that the application is available through the HPHA website at www.hpha.hawaii.gov and if anyone has questions related to COVID-19, they can visit the HPHA COVID-19 website at www.hphaishereforyou.org. K. Martinez shared that renters are able to pay online versus having to physically completing the transaction in person. R. Ries asked if there is a similar housing authority within the city? K. Martinez confirmed that the city has affordable housing such as those offered through the Hawaii Housing Finance and Development Corporation (HHFDC). K. Martinez emphasized that the foundation for eligibility is income after factors are reviewed, which then can determine the amount of rent and housing options that someone qualifies for. <p>**K. Martinez left the meeting around 10:54 a.m.**</p> <p>**The Council lost quorum; therefore, the meeting in now an informational meeting.**</p> <p>The following updates were provided by S. Shimabukuro.</p> <ul style="list-style-type: none"> CAMHD is the state’s largest Medicaid-service behavioral health agency. CAMHD provides mental health services statewide free of charge to eligible youth with severe emotional and/or behavioral challenges through an array of services including assessment, case management, and therapeutic supports in the home, community or in temporary out-of-home placements. CAMHD was recently awarded a four-year, \$11.8M system of care expansion grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). 	<p>S. Shimabukuro represents DOH CAMHD on the SCM.</p>		

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<ul style="list-style-type: none"> Department of Human Services (DHS) MedQUEST (MQD) Division Medicaid Program Department of Human Services (DHS) Division of Vocational 	<p>The grant focuses on enhancing services to approximately 2,400 youth (ages 3-21) with serious emotional disturbance (SED) per year statewide. For example, by improving youth outcomes through strengthening the state’s data-driven decision making infrastructure; increasing coordination across child-serving agencies; improving adherence to CAMHD principles; and bolstering in-home treatments that strengthen families.</p> <p>Grant partners include DHS Social Services and MQD Divisions, Office of Youth Services Network, EPIC Ohana, Inc., Child and Family Service, Kinai ‘Eha, UH Department of Psychology, University of Pennsylvania, Palo Alto Veterans Institute for Research, and PracticeWise, LLC.</p> <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> C. Dang asked if CAMHD has seen an increase or a decrease in the number of adolescents seeking services since March 2020. S. Shimabukuro shared that for new enrollments, CAMHD saw a large drop in April 2020 and a slow increase since then and through the summer. <p>No report was provided.</p> <p>The following updates were provided by R. Pascual-Kestner.</p> <ul style="list-style-type: none"> DVR provides services to persons with disabilities, whether physical or mental, deaf, or blind. DVR staff help individuals to prepare for, obtain, maintain and advance employment. DVR also helps students with disabilities. DVR sets aside 15% of 	<p>J. Fujii represents DHS MQD Medicaid Program on the SCMH.</p> <p>R. Pascual-Kestner represents DHS DVR on the SCMH.</p>		

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Rehabilitation (DVR)	<p>their grant to help students prepare for pre-employment transition services which is a big national push for VR programs. While students are not VR participants, they are eligible participants and DVR recognizes them in their annual report.</p> <ul style="list-style-type: none"> • DVR is a program authorized under the Workforce Innovation and Opportunity Act (WIOA) which took effect in July of 2014. • DVR is one of four core (4) partners. The three (3) other core partners include: <ul style="list-style-type: none"> ○ Title I = WIOA; Adult, Dislocated Worker and Youth formula programs administered by the Department of Labor (DOL); ○ Title II = Adult Education and Literacy Act programs administered by the Department of Education (DOE) ○ Title III = Wagner-Peyser Act employment services administered by the DOL. • Since COVID-19 stay-at-home orders began in March 2020, DVR staff have been teleworking and helping with unemployment claim filing as well as staying on top of workforce needs including watching labor market conditions. • Staff received training on how to use secure and private virtual training platforms. • There has been a noticeable decrease in applications compared to pre-COVID-19 applications and during COVID-19 started. DVR is lifting their waitlist of approximately 400 individuals and hopes to work with those individuals to provide DVR services. 			
IX. Specialty Area Representative Reports	<p>R. Ries explained that 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>He asked that oral summaries be brief and 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 Council meeting.</p>	For information only.		

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<ul style="list-style-type: none"> Hawaii Advisory Committee on Drug Abuse and Controlled Mental Health Providers 	<p>No report was provided.</p> <p>The following updates were provided by R. Ries.</p> <ul style="list-style-type: none"> He is a clinical psychologist. He participates with other organizations and interfaces about topics related to behavioral health. He is a member of the Hawaii Psychological Association (HPA) as a clinical representative. He is a founding member of the Hawaii Group Therapy Association (HGTA). HGTA members meet monthly. Just before COVID-19 began, he ended his last group for people who live with social anxiety. He is a member of the American Psychological Association. He is a member of the Hawaii Bereavement Network and has observed many members with behavioral health and mental health backgrounds in this network as well as therapists, psychologists, nurses and case managers as well as members who are associated with memorial arrangements and mortuary arrangements. He co-hosts a weekly radio show called Subliminal Peaks and he speaks live to community callers. He is the Resiliency and Behavioral Health Subject Matter Expert on the City and Council of Honolulu's Public Health and Medical Advisory Board. This board meets weekly to inform Mayor Caldwell about issues related to COVID-19 and public health at the city level. The group discusses ways to expand support and to preserve resources and serves as a thinktank around COVID-19 issues such as the opening and closing of parks and hiking trails and other city services. The board also shares input on contact tracing and talk about community related issues. Other group 	<p>J. Fujii represents HACDACS on the SCMH.</p> <p>R. Ries represents mental health providers on the SCMH.</p>		

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<ul style="list-style-type: none"> Parents and Family Members of Mental Health 	<p>members have a background in or are working as epidemiologists, infectious disease doctors, emergency medical services, behavioral health, and other city agency representatives.</p> <ul style="list-style-type: none"> Regarding referrals during the COVID-19 pandemic, he is aware of many providers who are in private practice who have been inundated with referrals and have been overburdened. He has opened his services one hour earlier and closing an hour later to accommodate clients. He continues to get referrals weekly. His observation is that some clients do not feel comfortable with telehealth just yet. Not providing services is not an option but at the same time telehealth is not optimal. Due to COVID-19 concerns and deciding that it is best not to provide in-person appointments to any client, he has taken on at least seven (7) clients pro bono because insurance policies and criteria for provider claims payment does not fit the client's needs. Providing services pro bono has affected his ability to continue his business. Responding to crises has also affected his business. He has had to take emergency calls and provide crisis intervention more often after hours and during the day which sometimes requires emergent schedule changes. He assesses that there are not enough psychiatrists, advance practice nurses with prescriptive authority (APRN-Rx), and psychologists with prescriptive authority. Clients who need psychiatric services do not have many options. While he is not an advocate personally for psychologists with prescriptive authority, he does feel that more needs to be done to keep psychiatrists who want to live in Hawaii to stay in Hawaii. <p>The following updates were provided by H. Ilyavi.</p> <ul style="list-style-type: none"> She works with parents who have youth/adolescents who receive services from the CAMHD. They are very concerned about how COVID-19 is affecting their child's school situation. For example, a 	<p>H. Ilyavi, E. Lau-James and A. Macias represent parents and family members of mental</p>		

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Service Recipients	<p>concern is how their child's Individual Service Plan (ISP), 504 plans, and special education (SPED) services will be accommodated by the schools.</p> <ul style="list-style-type: none"> • The schools are busy trying to create a schedule and open the schools. • Another big issue for parents is how do they get support for their child at home. For example, having enough devices, reliable Internet service, quiet space, keeping the child focused with learning on a computer when the child has behavioral issues or attention deficit issues. • When parents go back to work, how will school at home get worked out. Parents are not particularly fond of being teachers in the home. • Lots of uncertainty and fear about their jobs, sending their child to school and COVID-19 exposure risk. There are concerns about socialization and tactile exposure for children who need engagement in the school setting and need to be able to touch and feel things to learn. • There is a lack of services right now. All services she knows about are currently wait listed including MST, in home therapy, TFH homes, and Just Coffee, and programs funded by CAMHD. Parents who were excited to hear from their child's care coordinator about new services were disappointed to learn that the services were cut are being shifted back to the former program. There seems to not be enough resources. Parents are struggling. <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • S. Shimabukuro shared the website www.pandemic-parent.org as a resource. <p>The following updates were provided by E. Lau-James.</p> <ul style="list-style-type: none"> • She is a wife of someone diagnosed with schizoaffective disorder. • She is a veterinarian by trade and recently opened A Feline 	health service recipients on the SCM.		

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	<p>Experience in Kapahulu.</p> <ul style="list-style-type: none"> • She recently started a Facebook page and group called Hawaii Advocates for Serious Mental Illness (SMI). It's a group for family members of someone who lives with SMI because, even though you don't have the illness yourself, it's very difficult to find support in the community. It can be a very isolating experience to be a family member in this situation and the experience can be very similar to domestic violence situations. There is a lot of shame and stigma associated with both situations and guilt associated with seeking resources. Sometimes there are legal ramifications to consider. It can be very difficult to find resources on island for family members. • When she needed help as a family member, she reached out to the crisis line but services for family members is limited. Family members are told to call 911. She had to call 911 twelve (12) times before she was able to get her husband into treatment. The only other resource she had was to press charges and/or get a restraining order. Both options feel like you're giving up on your family member. • There are a lack of psychiatric inpatient beds. The wait time to get an appointment with a psychiatrist was three months out. • Crisis situations are a main topic of concern for the public. With mass shootings, the Diamond Head shooting, there are limited options for family members to assist their loved one to get treatment. • The law sets the bar so high for "imminent threat" that it is extremely difficult to get help for your loved one. Basically, someone must be actively murdering someone or actively committing suicide in order for the police to step in and help. • Early treatment is key but when the laws are so prohibitive that it takes a crisis to get your loved one 48 hours of minimal treatment, obviously there's a lot of improvement that can happen. 			

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<ul style="list-style-type: none"> Consumer Advocates 	<ul style="list-style-type: none"> She is attempting to reach out to more local mental health groups to provide the Council with a broader perspective of the pulse of family members of consumers. <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> R. Ries acknowledges that the Council may have a role in trying to get police officers better situated to address mental health crises. R. Ries agreed that having to wait three months to see a psychiatrist is definitely an issue that needs to be addressed. <p>A. Macias was not present to share an update.</p> <p>The following updates were provided by N. Crozier.</p> <ul style="list-style-type: none"> She has worked at Mental Health Kokua for 10 years. She is a Hawaii Certified Peer Specialist and a Hawaii Certified Benefits Planner. She uses her certifications, knowledge and skills to assist consumers with getting back to work and obtaining benefits and entitlements. Her husband passed away at the age of 38 from Crones Disease. After he passed, she experienced addiction for about a year before seeking treatment for her addiction problem. In her post-addiction recovery, she worked at Aloha House before joining Mental Health Kokua. At Mental Health Kokua, she was previously a case manager working with consumers and landlords for housing referrals and placements. She provided support to consumers and helped them to understand how to live in a rental unit and how to be a good tenant. Her current job at Mental Health Kokua is Supported Housing Case Manager. She observes that Maui has a lot of homeless individuals sheltering in place but public restrooms are closed. As a result, they are forced to defecate on sidewalks, plant/grass areas and trash cans. 	<p>N. Crozier, C. Knightsbridge and T. Reed are consumer advocates on the SCMH.</p>		

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	<ul style="list-style-type: none"> • COVID-19 has made it more challenging to interface with consumers. • Maui does need more behavioral health services. Housing is so important! There's not much inventory for individuals who can afford • She loves her work and loves helping consumers! Her way of working with consumers is to meet them where they are in their recovery. Fortunately, she has been able to get help from the community and the hospitality industry. Generous donations of towels, blankets, and toiletries have been greatly appreciated by everyone who receives them. <p>**N. Crozier left the meeting at approximately 11:27 a.m.**</p> <p>C. Knightsbridge and T. Reed were not present to share an update.</p>			
X. Presentation/ Guest Speaker	There were no presentations or guest speakers scheduled.			
XI. Old Business	There were no old business agenda items.			
X. Closing Announcements/ Meeting Evaluation	<p>There were no closing announcements shared.</p> <p>R. Ries invited members to share their feedback about today's meeting including what they felt was good about the meeting, constructive criticism about what could be improved, and offer suggestions for improvements.</p> <ul style="list-style-type: none"> • C. Dang shared that she felt that today's meeting agenda format was great! She felt this meeting agenda was comprehensive and informative. She felt the meeting was like attending a team building session as far as learning and understanding better how Council members are contributing. • E. Lau-James shared that she felt the meeting format was fantastic and was so informative. She felt this was the best meeting to date. 	For information only.		

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	The next SCMH meeting is scheduled for Tuesday, September 8, 2020 via Zoom from 9-11:30 a.m.			
IX. Future Agenda Items	R. Ries encouraged Council members to share any future presenters or new agenda items if they think of any.	For information, only.		
X. Adjournment	The meeting was adjourned at 11:31 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 with Handout Set 1 of 3 (total of 7 handouts)</p> <ol style="list-style-type: none"> 1. SCMH Agenda – August 11, 2020 Meeting 2. SCMH Minutes – July 11, 2020 Meeting (DRAFT) 3. SCMH Attendance Log for FY21 4. SCMH Member Orientation Binder Itemized List of Contents 5. SCMH PIG Letter to DOH Deputy Director, Behavioral Health Regarding the Impact of Services on Recipients of Mental Health Services (DRAFT) 6. SCMH PIG Retreat Facilitator Proposal 7. OIP Sunshine Law Presentation from the March 2020 SCMH Meeting <p>E-mail with Handout Set 2 of 3 (total of 6 handouts)</p> <ol style="list-style-type: none"> 8. Hawaii SAB January 2020 Meeting Minutes 9. Hawaii SAB February 2020 Meeting Minutes 10. Hawaii SAB March 2020 Meeting Minutes 11. Hawaii SAB May 2020 SCMH Member Report 12. Maui SAB June 2020 Meeting Minutes 13. Oahu SAB February 2020 Meeting Minutes <p>E-mail with Handout Set 3 of 3 (total of 4 handouts)</p> <ol style="list-style-type: none"> 14. SCMH Letter of Support for the Mental Health Block Grant (DRAFT) 	For information only.		

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	15. Mental Health Block Grant Categories 16. Mental Health Block Grant Activities and Expenditures 17. Mental Health Block Grant Federal Fiscal Year 2021 Allocation of Funds			