

NOTE: MEETING MINUTES ARE IN DRAFT FORMAT AND HAVE NOT BEEN APPROVED BY MEMBERS OF THE STATE COUNCIL ON MENTAL HEALTH, AS SUCH, INFORMATION IN THE MINUTES HAS NOT BEEN APPROVED FOR CONTENT AND ACCURACY.

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

Virtual Meeting via Zoom
 September 14, 2021
 9:00 a.m. – 12:00 p.m.

Members Present: **Aumer, Katherine; Beninato, Antonino; Fujii, John; Ilyavi, Heidi; Knightsbridge, Christopher; Lau-James, Eileen; Martinez, Beatrice “Kau’i”; Merriam, Kathleen; Pascual-Kestner, Rusnell “Rus”; Renfro, Jennifer; Ries, Richard; Rivera, Renee**

Members Absent: **Crozier, Charleen “Naomi”**

Members Excused: **Jackson, Richard “Rick”; Koyanagi, Dina; Reed, Tara**

Guests Present: **Tia Roberts Hartsock; Bryan Talisayan; Raven Sevilleja**

DOH Staff Present: **Haitsuka, Stacy; Nazareno, Jocelyn**

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ ACTIONS/CONCLUSIONS	PERSON(S) RESPONSIBLE	DATE DUE
I. Call to Order	Chair R. Ries called the meeting to order at 9:01 a.m. Members and guests introduced themselves. 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. For example, if only 16 of the entitled 21 members are appointed, at least	For information only.		

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	<p>9 must be present to establish a quorum. To validate a council action, of the 9 members present, an affirmative vote from at least 5 is required.”</p> <p>Quorum was established by 9:02am.</p>			
<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 17 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 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. <p>For at least through January 2022, Council members should plan to participate in Council meetings virtually.</p> <p>In the meeting handouts, a copy of Governor Ige’s Executive Order, published on Thursday, September 9, 2021, mandates COVID-19 vaccination attestation for every contractor and visitor to a state facility. He asked members to read the handout for the exact language and definitions for key words such as facility, visitor, contractor, etc. because they may not be as plainly defined as one would generally think.</p> <ul style="list-style-type: none"> • 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"> ○ Please address any comments or questions to him. ○ Members and guests may raise their “hand” virtually, type into 	<p>For information only.</p>		

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	<p>the chat box, or orally get his attention during the meeting.</p> <ul style="list-style-type: none"> ○ 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 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 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 speaker. <p>R. Ries shared the following Council membership updates:</p> <ul style="list-style-type: none"> ● The Judiciary representative has been selected by the Judiciary. That person will be submitting their application by the end of September 2021. ● There are three (3) positions that may be filled by a consumer advocate, youth/student representative, or family member. ● One (1) position may be filled by a representative for the Kauai Service Area Board. ● 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>III. Consideration and Approval of Minutes</p>	<p>The draft minutes for the August 10, 2021 regular meeting were reviewed.</p> <p>The following amendments were requested:</p>			

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<p>August 10, 2021 Minutes</p>	<ul style="list-style-type: none"> • None. <p>E. Lau-James made a motion for the meeting minutes from the August 10, 2021 regular meeting be approved as amended. K. Aumer seconded the motion.</p>	<p>Motion passed unanimously.</p>		
<p>August 29, 2021 Minutes</p>	<p>The draft minutes for the August 29, 2021 Executive Council meeting were reviewed.</p> <p>S. Haitzuka asked the Council to defer approving the minutes. The draft is incomplete. She forgot to include the comments made by A. Curtis.</p> <ul style="list-style-type: none"> • C. Knightsbridge agreed that pending for complete minutes is important. • R. Ries agreed it would be better to complete the minutes before approving to be accurate and have a way to preserve the discussion. • Overall, regarding the incomplete Mental Health Block Grant (MHBG) application, there were some Council members who were supportive and understanding and there were some who were more critical. No one was overly aggressive. 	<p>Deferred to October 12, 2021 meeting.</p>	<p>S. Haitzuka</p>	<p>10/6/21</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>No community input was shared.</p>			

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<p>V. Old Business</p> <ul style="list-style-type: none"> • Thank You Letter to Former DOH Deputy Director, Behavioral Health Administration, E. Mersereau • Timely Access to Behavioral Health Services through Hospital Emergency Departments 	<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>A copy of the Council’s letter of appreciation to former Department of Health Deputy Director, Behavioral Health Administration (DD BHA), E. Mersereau was provided as a meeting handout.</p> <p>E. Mersereau is now the Administrator for the DOH Alcohol and Drug Abuse Division, the position he held prior to being appointed DD BHA.</p> <p>R. Ries shared the acknowledgement statement from E. Mersereau: “Richard, Thank you. Please kindly thank the Council for their letter of acknowledgement. I have been honored to serve and work with the Council and other stakeholders to serve our community and the behavioral health care system of Hawaii, and look forward to other opportunities to do so. With warmest Aloha, Eddie.”</p> <p>In the meeting minutes for the Council’s August 10, 2021 meeting, starting at the bottom of page 9, the Council discussed this issue and R. Ries asked for feedback including: What types of data the Council is interested in reviewing to expand our collective knowledge about the issue of accessing psychiatric and mental health treatment through hospital emergency departments? How will the Council know if this issue affects more than one service area?</p> <p>R. Ries mentioned that it was noted that this topic was brought to the Council’s attention by a provider on Maui who was advocating as a private provider for a client who sought treatment through the emergency room but due to being turned away, the client allegedly committed a serious federal offense if a Transportation Security Administration (TSA) worker. At the end of this discussion, the Council agreed to form a hospital mental health care HMHC PIG. PIG members include: R. Ries, R. Rivera, N. Crozier,</p>			
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	<p>C. Knightsbridge, R. Jackson, and K. Merriam.</p> <p>K. Merriam was thinking she could provide information from the involuntary commitment group that has worked with NAMI Hawaii and other stakeholders; perhaps also providing information from the DOH and AMHD staff who may be working closely around this topic. Data may be available from these perspectives as well.</p> <p>R. Ries stated that the HMHC PIG was formed and a general outline of the tasks that need to be researched by the HMHC PIG to identify the scope of the issue, research and review relevant data, identify whether this is an issue that impacts more than one county service area and recommend to the Council what the next steps could be for addressing this issue.</p> <p>Council members shared the following input:</p> <ul style="list-style-type: none">• C. Knightsbridge thought it could be useful to have a committee to oversee the Council’s community action items. R. Ries said an overall committee could be considered in the future.• E. Lau-James likes short-term PIGs because they are given defined tasks by the Council and are dissolved when they accomplish their goals and objectives.• E. Lau-James stated she is interested in this HMHC PIG researching current legislation in Hawaii, researching limitations to bed space for providers, and coming up with proposed advocacy solutions with a recommendation to the Council to write a letter to DD BHA and/or the legislature.• R. Ries is interested in knowing more about inpatient beds and feedback about the patient’s experience (good/not good).• H. Ilyavi noted this information would greatly compliment the Council’s other work and work being done by other community advocacy groups to address this issue.• R. Ries suggested the HMHC PIG could recommend the Council write a compliment letter to hospitals who are doing mental health care well; recognizing their efforts to provide these essential and			
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<ul style="list-style-type: none"> • Template for Council Member Standing Agenda Reports 	<p>critical services.</p> <ul style="list-style-type: none"> • E. Lau-James has testified by sharing her story to advocate for transport to Castle Medical Center versus Queen’s Medical Center due to bed availability. There are approximately 108 inpatient mental health beds on Oahu; therefore, a lack of resources is a contributing factor. • H. Ilyavi likes the idea of getting hospital reports and sharing about their services which can help promote the Council as well. • K. Merriam is willing to join the group to help gather information. • C. Knightsbridge stated he feels patients should have the option to request their preferred hospital even though they may not end up being taken there due to bed availability. <p>R. Ries asked who would be willing to lead the HMHC PIG. E. Lau-James expressed interested in leading.</p> <p>R. Ries recalled during last month’s meeting, Council members suggested template content for standing reports. While not a one size fits all template, there are some standard report areas that are applicable to most reports. A copy of the draft template was included in the meeting handouts.</p> <p>R. Ries asked for Council member feedback based on area of representation and suggestions that would be helpful to members so that they could have a prompt when sharing their report and a useful template worksheet to jot notes related to mental health related activities between Council meetings. Council members shared the following input:</p> <ul style="list-style-type: none"> • R. Ries likes the font used for the template. • K. Aumer asked that the fields be made fillable. She likes “...in what ways could...” • C. Knightsbridge likes the sections and noted that other sections could be added as well. R. Ries suggested revising to include an “other” box. 	<p>Schedule HMHC PIG meeting.</p>	<p>E. Lau-James/ S. Haitzuka</p>	<p>10/5/21</p>
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<ul style="list-style-type: none"> • SCMH Member Orientation Materials for Fiscal Year 2022 	<p>E. Lau James made a motion to accept the template as revised. C. Knightsbridge seconded the motion.</p> <p>R. Ries announced Council members will receive an e-mail from S. Haituka with the information for how to access the Council’s online member portal. A draft copy of the online member portal table of contents was shared as a meeting handout.</p>	<p>Motion passed unanimously.</p>		
	<p>Additionally, a system generated e-mail will be sent with a link to the portal. Council members were asked to access the portal or report to S. Haituka any difficulty in accessing the portal before the next meeting.</p> <p>R. Ries noted for those wishing to have certain items printed, he suggests to first work on accessing the materials electronically through the portal. Then, after accessing the materials, use the table of contents as a list to identify what items you want to have printed. It is not reasonable, or environmentally friendly to expect 100% of everything to be printed out. Having 24/7 digital access to our files is really great.</p>	<p>Complete the initial login process for portal access.</p>	<p>Council members</p>	<p>10/12/21</p>
<ul style="list-style-type: none"> • State Council Business Cards 	<p>R. Ries provided an update on the status of approving the Council’s business card funding request. We have not yet heard back from M. Gleason, the Substance Abuse and Mental Health Services Administration (SAMHSA) Project Officer who met with us on July 27, 2021 during our Executive Council meeting. She was going to inquire with the SAMHSA Division of Grants Management to find out if business cards is an allowed expense for block grant funds. Dr. Amy Curtis, AMHD Administrator, indicated that she was supportive of using block grant funds for this purpose if federally allowed.</p> <p>In the meantime, on our behalf, S. Haituka submitted a block grant funding request noting that federal funding approval is pending. She obtained quotes from the following companies:</p> <ul style="list-style-type: none"> - Service Printers Hawaii 			

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	<ul style="list-style-type: none"> - Professional Image - HONBLUE <p>The estimated cost for 16 Council members, double-sided cards, foil seal and 100 cards per member would be less than \$1,000. Even if the Council added additional Council members who join later, the budget could still be \$1,000 for this request.</p> <p>We will need to make some adjustments to the font size for the template we reviewed last month, we will also request to use the official state of Hawaii seal in gold foil, although it is unlikely the Council would be approved to use it as we are not a state agency or employees of the state.</p> <p>Council members shared the following input:</p> <ul style="list-style-type: none"> • C. Knightsbridge stressed that he wants the Council to be able to use the official State of Hawaii seal even though the Council is not a state operated entity. S. Haitsuka confirmed the Council is administratively attached to the DOH and suggested the Council consider making its own logo. <p>S. Haitsuka and J. Nazareno will follow up on the quotes and business cards for funding approval.</p>			
<p>VI. New Business</p> <ul style="list-style-type: none"> • Letter to DOH Deputy Director, Behavioral Health Administration (DD BHA), M. Tsuji Regarding Untimely Completion of the 2022-2023 	<p>R. Ries noted at the Council’s August 29, 2021 Executive Council meeting, the Council agreed to write a letter of support for the Substance Abuse and Mental Health Services Administration (SAMHSA) Mental Health Block Grant (MHBG) without any contingencies. We agreed to write a separate letter to the DD BHA, M. Tsuji expressing our concerns about the untimely completion of the 2022-2023 block grant application.</p> <p>A copy of the final MHBG application was included in the meeting handouts. The application is extremely long and Council members acknowledged there was a lot of content missing in the draft that was</p>			

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<p>SAMHSA Mental Health Block Grant Application</p>	<p>shared with us. R. Ries encouraged Council members to take time to compare what was updated and ultimately submitted as the Council was not given time to review and discuss the final draft of the application before it was submitted.</p> <p>According to the AMHD policy and procedure 60.520 for state and county service plans, the timeline notes several months of preparation that did not occur. The Council was made aware, as Dr. Curtis explained, that there is a lack of staff and key DOH BHA Division Planner position vacancies. She explained there was an administrative error that was made which included additional substance abuse sections in the MHBG application but she articulated this as being temporarily resolved for the purpose of submitting the MHBG related information. Also, the DOH including all DOH BHA Divisions have been busy with COVID-19 response efforts.</p> <p>Additionally, it was made clear to the Council by Dr. Curtis that not submitting the MHBG application with the full content and descriptions of Hawaii’s need for funding would severely jeopardize our state’s ability to secure any funding. We were told there was no deadline extension.</p> <p>The Council did its part to accommodate. We planned forward knowing we were not going to have the final draft application by the August 1st timeframe stated in the AMHD policy. We agreed to meet on August 29, 2021 for an Executive Council meeting specifically to accommodate the review of the application. We hoped we would have had a final draft of the application by Wednesday, August 18, 2021 but we did not receive it. What we did receive was a very piecemeal and still incomplete draft when the meeting announcement and meeting handouts were shared via e-mail.</p> <p>In fact, the final draft of the application was so late, I see in the application notes that there was no time for public comment which is traditionally a couple weeks of open comment period by stakeholders, service area boards, mental health advocates, partner agencies, and community organizations. R. Ries stated as far as he is aware, no other external group</p>			
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	<p>besides this Council had the opportunity to review the MHBG application and what we did review was not final.</p> <p>The purpose of the letter is not to blame any one person or fault someone or cause them to lose their job. The letter is to point out that we are disappointed in the lack of timeliness and how this lack of timeliness affected our ability as Council members to review, advise and provide input.</p> <p>We also want to convey our commitment to improving the process; with the intent of expressing our disappointment and conveying our commitment to improving the process. For example, perhaps the policy needs to be updated but we are wanting to offer recommendations and advise about how we want to be included in the state plan and be made aware of how funds are allocated (e.g., where the money is earmarked) and how funds are actually spent (e.g., where did the money actually go – what services? what amounts?).</p> <p>A copy of the draft letter is in the meeting handouts. Please look at the letter and share your feedback. We would like to edit this letter so we can have it sent to DD BHA M. Tsuji.</p> <p>Council members shared the following input:</p> <ul style="list-style-type: none">• R. Ries stated he felt like this year’s MHBG application process hit him blindsided and was really unprepared for receiving the incomplete application. His experience was different for the prior MHBG application.• K. Merriam felt Dr. Curtis did well to explain the situation and feels the Council could make the second set of bullet points clearer about her explanation. The letter could acknowledge the fact that major DOH BHA administrative infrastructure was blown apart. For example, in DOH and across all state departments, everything for the past year and a half has been about COVID-19. She would like the bullets to be more representative of the reasons that led up to			
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<ul style="list-style-type: none"> • Thank You Letter to Darlyn Chen Scovell, Hawaii Fetal Alcohol Spectrum Disorder (FASD) Action Group Member 	<p>the delay in completing the MHBG application.</p> <ul style="list-style-type: none"> • E. Lau-James noted the Council was placed in an uncomfortable position as we were faced with a pressing deadline and realized great harm could be done if we were not responsive and supportive with our feedback. We were put in a bad position and we were unable to advocate for our constituents. • C. Knightsbridge noted that he felt the Council was forced to choose between our credibility versus risking losing millions of federal MHBG dollars for the state. He suggested changing, “While A. Curtis seemed...” to, “We appreciate how sincere Dr. Curtis was in the meeting...” • K. Aumer stated that the Council could add wording about recognizing the MHBG is a significant source of federal funding for Hawaii’s mental health service system. • J. Fujii suggested using the word “duress” as a way to describe the Council’s position regarding reviewing and writing a letter of support when only given an incomplete draft of the application. <p>C. Knightsbridge made a motion to approve the letter with amendments. J. Fujii seconded the motion.</p> <p>R. Ries will work with S. Haitzuka to finalize the letter for transmittal.</p> <p>R. Ries stated at the Council’s August 10, 2021 meeting, Darlyn Chen Scovell shared her Community input with regards to bringing awareness through education about Hawaii’s Fetal Alcohol Spectrum Disorder (FASD) problem. She encouraged the Council to be educated about advocacy efforts around FASD including recent congressional activity including the introduction of the FASD Respect Act which provides funding for states to increase FASD awareness and education activities. The meeting minutes on pages five and six summarize her presentation.</p> <p>R. Ries acknowledged the Council’s efforts to be diligent about writing</p>	<p>Motion passed unanimously.</p> <p>Revise with amendments.</p>	<p>R. Ries/ S. Haitzuka</p>	<p>10/5/21</p>
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<ul style="list-style-type: none"> Public Service Announcement (PSA) PIG Strategic Plan Focus Area #1 	<p>thank you letters to guests and presenters who take time to share their concern or issue that relates to the Council’s role as advocates or relates to the Council’s Strategic Plan focus areas.</p> <p>A copy of the draft letter is in the meeting handouts. Council members shared the following input:</p> <ul style="list-style-type: none"> Letter is okay to finalize as drafted. <p>K. Merriam made a motion to approve the letter as written. C. Knightsbridge seconded the motion.</p> <p>R. Ries stated this topic was discussed at the Council’s August 10, 2021 meeting. The meeting minutes starting on the bottom of page 13 note that the Council agreed to form a Public Service Announcement PIG with A. Beninato, R. Rivera, R. Pascual-Kestner, R. Jackson, C. Knightsbridge and R. Ries as members.</p> <p>It was noted previously that this activity cannot be funded with MHBG funds because PSAs are not specific to mental health, to mental health service recipients who live with serious mental illness (SMI) or to children who live with a severe emotional disturbance (SED).</p> <p>R. Ries asked the Council to help clarify the purpose of the PSA PIG as well as to identify the PSA PIG lead. Council members shared the following input:</p> <ul style="list-style-type: none"> A. Beninato stated the purpose of the PSA PIG could be to create a PSA message quickly and concisely to be aired on local radio R. Ries commented that the purpose could also be to help get word out in the public about the Council’s activities. A. Beninato confirmed he will lead the PSA PIG. <p>R. Ries stated as part of the Council’s Strategic Plan Focus Area #1 which is titled: Improving Access to Services Existing and New, the Council</p>	<p>Motion passed unanimously.</p> <p>Schedule the PSA PIG meeting.</p>	<p>A. Beninato/ S. Haitsuka</p>	<p>10/5/21</p>
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<p>Council Discussion: Identify Existing Mental Health Services, Payors and Eligibility Criteria, Statewide, by County (State-Funded and Non-State Funded)</p>	<p>agreed this was one of the areas we could work on addressing.</p> <p>Objective 1.3 states, “By September 2021, using available resources, including stakeholders, within Council members’ area(s) of representation, Service Area Boards and community members, identify existing mental health services, payors and eligibility criteria, statewide and by County including state-funded and non-state-funded services.”</p> <p>The goal of this objective is for Council members to learn about what services are in our communities, and how to access them. R. Ries noted we are not wanting to reinvent the wheel so to speak. This activity does not require us to do more than think, research within our areas, and share/report back.</p> <p>R. Ries suggested that each Council member take two (2) minutes to jot down mental health resources that they are aware of that are within their area(s) of representation and share this information orally or type into the chat.</p> <p>He noted every Council member can contribute something to this activity because we are all connected to mental health services in some way whether it be a state agency representative who shares how clients or participants are referred for mental health resources, or if as a provider like myself, where do I refer patients who need additional mental health supports. If you are a mental health service recipient, perhaps you can share where you have looked when you needed linkage to services or where you have been referred.</p> <p>This is a snapshot. It cannot be the end all. We cannot expect to identify all resources but we can start somewhere in order for us to learn about what is available based on our knowledge and our area(s) of Council member representation.</p> <p>The goal for this activity is for each Council member to share one or two</p>			
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	<p>resources related to their area(s) of representation. Include the mental health insurer, agency or organization name, the type of service(s) provided and the website if known.</p> <p>Council members shared the following input:</p> <ul style="list-style-type: none"> • A. Beninato shared he finds personal connections are most helpful versus those found on the Internet especially in times of isolation. • K. Martinez shared that HPHA staff are aware of the Hawaii CARES 24/7 behavioral health support line. HPHA staff also help connect residents with their case manager if HPHA staff know who the assigned case manager is. HPHA staff contact K. Martinez for assistance when they are aware that a resident may need mental health support and she provides feedback and options to assist. • C. Knightsbridge shared that advisory boards and teacher training for self-care are helpful to him. He likes the information he learns as a member of the Mental Health Technology Transfer Center Network – Pacific Southwest (Health and Human Services Region 9). He also finds the Mental Health America Hawaii Finding Help Guide 2021 to be very helpful. • J. Fujii noted that the DHS MedQUEST Division oversees the state Medicaid program. Medicaid has a zero co-pay policy for members. • K. Merriam shared that she got into mental health because of her bipolar illness. She feels that peer run groups are helpful including those organized virtually and those coordinated by the National Empowerment Network. Additionally, she refers to the American Foundation for Suicide Prevention (AFSP) Hawaii Chapter, NAMI Hawaii, Mental Health America Hawaii, Ku Makani, The Institute for Human Services (IHS), Rotary Hawaii District 5000, Hawaii Health and Harm Reduction Center, and the Kailua Homeless Hub for resource information. The Kailua Homeless Hub provides food and medical wound care. She is surprised by the number of people who reportedly live in vehicles. Services are also provided by Daybreak Church through their Halawai ministry. • K. Aumer shared the crisis text line is a useful service especially for 			
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	<p>nonverbal individuals or those who rather communicate via text messaging versus telephone calls. Text ALOHA to 741741. Also, Hawaii CARES is a 24/7 statewide resource that is helpful. Other resources she uses are the Child and Family Service Domestic Violence Hotline, the Lavender Center and Clinic and the National Association of Social Workers Hawaii Chapter Find a Social Worker Directory.</p> <ul style="list-style-type: none">• R. Rivera shared that services she receives from CARE Hawaii, Bay Clinic, West Hawaii Community Health Center and input learned from the Hawaii Service Area Board are helpful in her recovery.• H. Ilyavi shared that she gets resource information from the DOH Child and Adolescent Mental Health Division (CAMHD), Hawaii Behavioral Health, West Hawaii Community Health Center, Hope Services Hawaii, Child and Family Service and Catholic Charities Hawaii. The Hawaii DOE individualized education program (IEP) is a helpful tool for service coordination for children with a disability.• E. Lau-James shared that she gets resource information from the Treatment Advocacy Center and NAMI Hawaii. She also found the information shared by Dr. Xavier Amador from his 2005 speech at the Schizophrenia Society of Nova Scotia's 17th Annual Conference to be useful for helping family members to better communicate with loved ones and to help family members understand anosognosia. She helps to manage the Facebook page for Hawaii Family Advocates for Serious Mental Illness and finds the information sharing to be a useful resource.• R. Ries shared that she uses the Hawaii Psychological Association as a resource as well as the Kokua Mau Bereavement Network of Hawaii for support and information. He also gets resource information from the University of Hawaii Manoa Counseling and Student Development Center (SCDC), the Training and Research Institute for Emotionally Focused Therapy Alliant (TRI EFT Alliant), the Hawaii Center for Emotionally Focused Therapy, Hawaii Islands Group Psychotherapy Society, and Accelerated Resolution therapy (ART).			
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- Strategic Plan Focus Area #4 Council Discussion: Form an Onboard/Re-board PIG (OnRe PIG) and Discuss Features of the Council's Onboarding and Reboarding Experience

- R. Pascual-Kestner shared the [U.S. Department of Labor's American Job Centers](#) provide several options for training, career counseling, job and employment placement, and employment-related support. There are 14 mandatory partners to ensure a "one stop" center. He also refers to the [Hawaii Workforce Development Council which is part of the Department of Labor and Industrial Relations \(DLIR\)](#). The [Oahu 2020 Homeless Help Card](#) has good information. The state is mandated to pay into the job center program which supports not just the state plan but also addresses barriers to job placement.

R. Ries asked S. Haitzuka to take Council members' input and place it into a resource grid. Council members can add to this grid.

R. Ries asked Council members to look at the current PIG tracking sheet. It is a busy chart that initially listed all Strategic Plan Focus Areas and the names of Council members who signed up for each Focus Area that indicated a PIG would be formed. Now this chart has been expanded to include non-Strategic Plan Focus Area PIGs.

State Council on Mental Health
Permitted Interaction Group (PIG) Tracking Sheet
Last Updated: 9/2/21

Council Member Name	Strategic Plan					Timely Access to BH Svcs via Hospital ED	Public Svc Announcement	Total # of Focus Areas per Council Member
	Focus Area #2	Focus Area #3	Focus Area #4	Focus Area #6	Focus Area #7			
	Wellness Brochure	Infographic	Onboard/Reboard	Website/Social Media	Legislation			
	WB-PIG	InfoG-PIG	OnRe-PIG	WSM-PIG	LEG-PIG	BHED-PIG	PSA-PIG	
1 Aumer, Katherine	XX				XX			2
2 Beninato, Antonino	XX						XX	2
3 Crozier, Charleen "Naomi"								0
4 Fujii, John	XX			XX				2
5 Ilyavi, Heidi		XX		XX				2
6 Jackson, Richard "Rick"						XX		1
7 Knightsbridge, Christopher	XX	XX		XX	XX	XX	XX	6
8 Koyanagi, Dina		XX						1
9 Lau-James, Eileen		XX	XX		XX	XX		4
10 Martinez, Beatrice "Kau'i"			XX					1
11 Merriam, Kathleen								NEW MEMBER!
12 Pascual-Kestner, Rusnell "Rus"				XX	XX		XX	3
13 Reed, Tara		XX	XX		XX			3
14 Renfro, Jennifer	XX				XX			2
15 Ries, Richard	XX				XX	XX	XX	4
16 Rivera, Renee						XX	XX	2

Create draft of resource grid.

S. Haitzuka

10/7/21

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	<p>R. Ries noted that the Council will want to be selection in its creation of PIGs. He recognized the Council may come up with topics that can be explored more by creating a PIG and there's nothing wrong with having that strategy. He asked Council members to be mindful of the work it takes to schedul and attend PIG meetings and also the pre-work that is assigned for PIG members to come to meetings with information that will help move the PIG along towards meeting the goals and tasks that were assigned to the PIG by the Council.</p> <p>R. Ries acknowledged that as a Council, we have to accept that we cannot do too much all at once because if we are too ambitious, we may end up biting off more than can be chewed so to speak, which likely means the Council will have a lot of unfinished business at the end of the term, incomplete deadlines, and will be at risk for not being thorough in developing our contributions which also could mean missing Strategic Plan deadlines.</p> <p>That said, R. Ries noted the creation of the onboard and reboard (OnRe) PIG. The OnRe PIG is tasks with identifying the features of the Council's onboarding and reboarding experiences and providing a draft checklist of the process for Council approval. It may also be that this PIG may need to discuss the implementation and facilitation pieces of the onboarding and reboarding experiences such as recommending who initiates the process or who facilitates and during what meeting/what month, etc. There is room for creativity with this PIG.</p> <p>R. Ries suggested that a recommendation from the OnRe PIG to the Council could be a Standard Operating Procedure (SOP) that can be refered to at the start of every term.</p> <p>Members of the OnRe PIG include R. Jackson, C. Knightsbridge, E. Lau-James, K. Martinez, and T. Reed. C. Knightsbridge offered to take the leadership role for the OnRe PIG.</p>			
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<ul style="list-style-type: none"> • Strategic Plan Focus Area #7: Form a Legislation PIG (LEG PIG) 	<p>E. Lau-James made a motion to officially form the OnRe PIG with the above members. C. Knightsbridge seconded the motion.</p> <p>R. Ries stated the Council’s Strategic Plan Focus Area #7, Objective 7.5 states, “By November/December 2021, the LEG PIG is tasked with arranging legislative training for Council members.” The Council received training through the Legislative Reference Bureau last year and anticipates receiving a similar training this year.</p> <p>LEG PIG members include K. Aumer, C. Knightsbridge, E. Lau-James, R. Pascual-Kestner, T. Reed, J. Renfro and R. Ries. C. Knightsbridge stated he would be the lead for the LEG PIG.</p> <p>C. Knightsbridge made a motion to create the LEG PIG for the 2022 legislative session with the above members. E. Lau-James seconded the motion.</p>	<p>Motion passed unanimously.</p> <p>Schedule the PSA PIG meeting.</p> <p>Motion passed unanimously.</p> <p>Schedule the LEG PIG meeting.</p>	<p>C. Knightsbridge /S. Haitsuka</p> <p>C. Knightsbridge /S. Haitsuka</p>	<p>10/5/21</p> <p>10/5/21</p>
<p>B. Permitted Interaction Group (PIG) Reports</p> <ul style="list-style-type: none"> • PIG for Website and Social Media (WSM) 	<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 Stacy no less than 10 calendar days prior to the next meeting.</p> <p>R. Ries noted the WSM PIG was formed at the Council’s July 13, 2021 meeting. WSM PIG members include C. Knightsbridge, J. Fujii, H. Ilyavi and R. Pascual-Kestner. C. Knightsbridge is the WSM PIG lead.</p> <p>R. Ries noted the WSM PIG did not meet last month. He re-summarized the</p>			

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<ul style="list-style-type: none"> • PIG for Onboarding and Reboarding (OnRe) • PIG for Legislation (LEG) 	<p>short-term tasks assigned to the WSM PIG which include:</p> <ul style="list-style-type: none"> • Researching and providing recommendations for Council discussion and decision making regarding the Council’s website and unofficial social media account. • Increasing unofficial social media postings for local mental health, behavioral health and substance abuse topics to at least four postings per month could be a goal. These postings could include events, meetings, and re-postings as appropriate. <p>R. Ries recommended the WSM-PIG plan to meet during this next month and maybe do an initial assessment of the Council’s current website and social media and identify at least a few ways the Council could increase its website and social media promotion of Hawaii mental health, SMI and SED topics.</p> <p>R. Ries stated the OnRe PIG was just formed at today’s meeting and the Council looks forward to receiving a report at next month’s meeting.</p> <p>R. Ries stated the LEG PIG was just formed at today’s meeting and the Council looks forward to receiving a report at next month’s meeting.</p>	<p>Schedule WSM-PIG meeting.</p>	<p>C. Knightsbridge /S. Haitsuka</p>	<p>10/5/21</p>
<p>C. Island Representative Reports</p> <ul style="list-style-type: none"> • Maui Service 	<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>	<p>For information only.</p>		

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<p>Area Board (MSAB)</p> <ul style="list-style-type: none"> Oahu Service Area Board (OSAB) Hawaii Service Area Board (HSAB) 	<ul style="list-style-type: none"> None provided. <p>R. Jackson shared the following updates:</p> <ul style="list-style-type: none"> None provided. <p>R. Rivera shared the following updates:</p> <ul style="list-style-type: none"> HSAB is working on a mental health and substance abuse resource list for Hawaii Island. Someone from Hilo Medical Center’s mental health section attended a recent HSAB meeting. They shared that Hilo Medical Center added four beds for mental health and COVID-19 positive patients. She is willing to attend HSAB meetings regularly. One concern is that there are a lot of homeless individuals presenting at the Hilo Medical Center emergency department. Having additional beds available is helpful for providing treatment. She is aware that there are people staying in hotels in Hilo who may need mental health services. R. Rivera remembered from a previous Council meeting about the experience of the provider from Maui who was unable to admit their patient for mental health treatment through the emergency room. She shared this Community Input. HSAB is working on the HSAB flyer to spread the word about HSAB’s activities. 			
<p>IV. State Agency Representative Reports</p>	<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>For information only.</p>		

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<ul style="list-style-type: none"> Hawaii Public Housing Authority (HPHA) 	<p>K. Martinez shared the following updates:</p> <ul style="list-style-type: none"> There are no HMHA meetings that were mental health related this month. There were no mental health related events for HPHA this month but there are public housing outreach activities that are ongoing and these activities could discover potential mental health related issues. COVID-19 vaccination and testing opportunities are coordinated with community partners. HPHA works with organizations to host popup vaccination and testing on HPHA property when needed so it is convenient for families to access these services. HPHA continues to provide PPE and cleaning and sanitation supplies to HPHA residents to help address the spread of COVID-19. HPHA is currently working to implement Governor Ige’s newest Executive Order for contractors and guests accessing state facilities. 			
<ul style="list-style-type: none"> Department of Health (DOH) Adult Mental Health Division (AMHD) 	<p>K. Merriam shared the following updates:</p> <ul style="list-style-type: none"> She is interested in the Council’s feedback for AMHD, CAMHD, ADAD and Developmental Disabilities Division (DDD) information. Right now, a main activities for the DOH BHA is to address practices and priorities around COVID-19. DOH BHA Divisions are currently working to implement Governor Ige’s newest Executive Order for contractors and guests accessing state facilities which includes state operated community health centers and mental health clinics. Establishing new protocols for visitors is being done now. Suicide prevention and awareness activities are being done now because this is suicide prevention and awareness month. DOH shared a press release with information from the Emergency Medical Services and Injury Prevention System Branch (EMSIPSB) as well as AMHD, CAMHD and ADAD. 			
<ul style="list-style-type: none"> Department of Human Services (DHS) 	<p>J. Fujii shared the following updates:</p> <ul style="list-style-type: none"> DHS MQD is working with the four DOH BHA Divisions and the External Quality Review Organization (EQRO) Performance 			

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<p>MedQUEST (MQD) Division Medicaid Program</p> <p>• Department of Human Services (DHS) Child Welfare Services (CWS)</p>	<p>Improvement Project targeting coordination when Quality Improvement (QI) plans and various DOH BHA Divisions deliver services to the same consumers/clients/participants/members.</p> <ul style="list-style-type: none"> • The Medicaid Innovative Collaborative includes five Medicaid programs and uses technology to better engage and deliver services to meet the behavioral health, mental health and substance abuse needs of Native Hawaiians, pregnant women and new mothers (up to a year post-delivery). A secondary focus is to expand the criteria for Native Hawaiians and other Pacific Islanders – especially for Micronesians, Palauans, and Marshallese. • The new Screening, Brief Intervention and Referral to Treatment (SBIRT) memorandum QI-1612 revision expands coverage from OB/GYN services to now include all professional services, including mental health screenings. <p>Council members shared the following comments:</p> <ul style="list-style-type: none"> • E. Lau-James expressed appreciation for this SBIRT change. She loves that mental health screenings will now be routine. <p>D. Koyanagi shared the following updates in a written report:</p> <ul style="list-style-type: none"> • CWS has been partnering with CAMHD for a number of years to address mutual coordination of care issues. Hawaii’s children’s mental health (CAMHD), substance abuse (ADAD), child welfare (CWS) and youth services (Office of Youth Services) agencies partnered together to form a consortium to address services for youth experiencing crisis. There have been recent situations where one or more state agencies experienced major difficulty finding a safe way to care for and stabilize youth. This partnership helped to develop the Request for Proposal (RFP) which jointly funded the Residential Crisis Stabilization Program (RCSP). • The RSCP provides short-term crisis stabilization in a safe, structured setting for youth with urgent/emergent mental health needs and includes observation/supervision for youth who do not require intensive clinical treatment in a psychiatric setting. The 			
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<ul style="list-style-type: none"> • Department of Human Services (DHS) Division of Vocational Rehabilitation (DVR) • Department of Education (DOE) Student Services Branch (SSB) 	<p>primary objective of this service is to provide crisis intervention services necessary to stabilize and restore the youth’s functioning and return them to their natural setting. The RSCP has eight beds. Criteria includes youth aged individuals who may pose a danger to self or others, currently expressing some suicidal ideation or is engaging in some self-destructive or self-injurious behaviors, or youth who evidence lack of judgment, impulse control, or cognitive/perceptual abilities.</p> <p>R. Pascual-Kestner shared the following updates:</p> <ul style="list-style-type: none"> • DVR continues to look at strategies to include people with disabilities in remote workplace structures by exploring topics areas such as how people find jobs and how people stay/remain in jobs. • Also looking to identify quality issues for contractors and service delivery so see where issues are and how to address those issues. <p>J. Renfro shared the following updates:</p> <ul style="list-style-type: none"> • None provided. 			
<p>V. Specialty Area Representative Reports</p> <ul style="list-style-type: none"> • Hawaii Advisory Committee on 	<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"> • HACDACS is reviewing recommendations to the Legislature in the December 2021 report including the Hawaii CARES line, Wellbriety (providing culturally relevant practices regarding substance use 	<p>For information only.</p>		

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<p>Drug Abuse and Controlled Substances (HACDACS)</p> <ul style="list-style-type: none"> Mental Health Providers Parents and Family Members of Mental Health Service Recipients 	<p>disorder treatment), marijuana legalization and conflicts between federal and state laws.</p> <ul style="list-style-type: none"> HACDACS is also looking at peer specialist programs and infrastructure supports. <p>R. Ries shared the following updates:</p> <ul style="list-style-type: none"> He is aware one insurance company increased their rates and this information was sent to currently participating providers. Unfortunately, non-current participating providers did not receive this mailed information. This information is important to share with all providers. Regarding COVID-19 vaccination and people who are for or against vaccination, he feels there are some people who are vocal and these are people who want to be accepted and want to be heard. <p>H. Ilyavi shared the following updates:</p> <ul style="list-style-type: none"> There continues to be a significant delay in linkage to services on Hawaii Island. There have been protests on Hawaii Island regarding COVID-19 vaccination. An organization in Kona goes out to speak to people about vaccination concerns and they bring the vaccines to them. <p>E. Lau-James shared the following updates:</p> <ul style="list-style-type: none"> There have been protests in her community regarding COVID-19 vaccination. She has observed that there is vaccine hesitancy and a lot of information being shared that can confuse people who may not have access to data and facts. As a veterinarian, she has seen many pet owners who are hesitant about COVID-19 vaccination but sees the issue from the view of a decision making process. For example, if the pet owner has no choice but to vaccinate their pet before the pet can be boarded, they will do it because there is no other choice. If the pet doesn't need to be boarded, they may not want to get the required vaccinations. It is 			
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<ul style="list-style-type: none"> Student/ Youth and Consumer Advocates 	<p>a decision making process and if required, the pet owner does agree to vaccinate in order to get their pet into the boarding facility.</p> <p>K. Aumer shared the following updates:</p> <ul style="list-style-type: none"> Tablets for Kupuna for Internet access are available to those in rural areas. There is a need for more Neighbor Island and rural infrastructure for telecommunication including providing high speed Internet connections for residents in these communities. She is working on a study addressing COVID-19 vaccine hesitancy. She will keep the Council updated on this study. <p>A. Beninato shared the following updates:</p> <ul style="list-style-type: none"> The University of Hawaii is enforcing weekly COVID-19 testing on its campuses. He observes a lot of COVID-19 antivaccination conversations and recognizes there are interesting issues related to the vaccination supporters' views and cultural norms. He has noticed a lot of vaccination hesitancy and reluctance. <p>C. Knightsbridge shared the following updates:</p> <ul style="list-style-type: none"> He noticed there is legitimate anger towards the COVID-19 vaccine mandates. He also noticed there is a lack of compassion for unvaccinated people right now. He feels there is no recourse for COVID-19 vaccine reactions and there is no healthy discussion, no established middle ground. <p>T. Reed, N. Crozier, R. Rivera, R. Jackson shared the following updates:</p> <ul style="list-style-type: none"> None provided. 			
<p>VI. Presentation/ Guest Speaker</p>	<p>None scheduled.</p>			
<p>VII. Closing Announcements</p>	<p>Council members shared the following announcements:</p> <ul style="list-style-type: none"> R. Ries stated DOH DD BHA M. Tsuji received our welcome letter and was provided with the November, December and January Council 	<p>For information only.</p>		

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	<p>meeting dates. We anticipate her attendance confirmation soon.</p> <ul style="list-style-type: none"> • R. Ries noted that Council members are encouraged to attend Mental Health Task Force (MHTF) meetings. Please note the following dates. Meeting times is 1:30 p.m. to 2:45 p.m. Fridays: October 29, 2021 / December 9, 2021 • R. Pascual-Kestner shared a handout regarding resilience training for first responders. This topic will be discussed at a future Council meeting. Thank you, Rus for providing this information. • K. Merriam shared a flyer for the NAMI Hawaii fundraiser on Oahu. • R. Ries acknowledged that the Council did not recognize National Suicide Prevention Day which was last week Friday but perhaps there was sharing done on social media to promote awareness. This month is dedicated to suicide prevention and awareness. J. Renfro mentioned last month about how the DOE has taken on the Here to Help Movement to raise student and family awareness of school-based behavioral health supports. Maybe next month as a recap, others can share how they have addressed suicide prevention and awareness within their areas of representation. • K. Merriam announced that there is still time to register for Saturday's, September 18, 2021, American Foundation for Suicide Prevention Hawaii Chapter virtual walk. Go to https://afsp.org/chapter/hawaii for the sign up information. You do not need to give money to participate! 			
<p>VIII. 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. • E. Lau-James stated that she, "loves that we are de-siloing information" <p>The next regular Council meeting is scheduled for October 12, 2021 from 9:00 a.m. to 12:00 p.m. via Zoom.</p>	<p>For information only.</p>		

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XIV. Adjournment	The meeting was adjourned at 12:05 p.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 2) with handouts (total of 7 handouts)</p> <ol style="list-style-type: none"> 1. September 2021 Meeting – Agenda 2. August 2021 Regular Meeting – Draft Minutes 3. August 2021 Executive Meeting – Draft Minutes 4. August 2021 Regular and Executive Mtg – FY22 Attendance Log 5. September 2021 Meeting – Old Business, Thank You Letter, E. Mersereau FINAL 6. September 2021 Meeting – Old Business, Standing Agenda Report Template DRAFT 7. September 2021 Meeting – Old Business, SAMHSA MHBG Application Submission FINAL <p>E-mail (2 of 2) with handouts (total of 8 handouts)</p> <ol style="list-style-type: none"> 8. September 2021 Meeting – New Business, SAMHSA MHBG Council Letter of Support FINAL 9. September 2021 Meeting – New Business, SAMHSA MHBG Letter to DD BHA M. Tsuji DRAFT 10. September 2021 Meeting – New Business, Thank you Letter to D. Chen Scovell DRAFT 11. September 2021 Meeting – New Business, SCMH List of Permitted Interaction Groups 12. September 2021 Meeting – Welcome Letter DD BHA M. Tsuji FINAL 13. September 2021 Meeting – Announcement, IVAT-HI CAI Resilience Training for First Responders Presentation Slides 14. September 2021 Meeting – Announcement, NAMI Hawaii Oahu Fundraiser Flyer 15. September 2021 Meeting – Announcement, State of Hawaii Governor Ige Executive Order 21-07, COVID-19 Attestation/Testing for Contractors/Guests 	For information only.		