

## STATE COUNCIL ON MENTAL HEALTH (SCMH) MEETING

November 14, 9:00 a.m. – 12:00 p.m.

Hybrid meeting via Zoom and  
in-person at Hale F Conference Room, 2201 Waimano Home Road, Pearl City 96782

### DRAFT MINUTES

*Members Present:* Katherine Aumer, John Betlach, Naomi Crozier, Lea Dias, Jon Fujii, Jackie Jackson, Eileen Lau-James, Kathleen Merriam, Ray Rice, Richard Ries, Mary Pat Waterhouse, and Kristin Will.

*Members Absent:* Antonino Beninato

*Members Excused:* Heidi Ilyavi, Jean Okuda, Kauai Seguancia

*Staff Present:* Jocelyn Nazareno, Carolyn Weygan-Hildebrand, Courtenay Matsu, Madeleine Hiraga-Nuccio, Marian Tsuji

*Guests:* Raelyn Reyno Yeomans, Greg Uwono, Savy Makalena

#### I. Call to Order

Katherine Aumer, chairperson, called the meeting to order at 9:04 am and quorum was established at time.

#### II. Announcements

K. Aumer warmly welcomed members and guests.

##### *Meeting protocol:*

- In case of a communication technology-related interruption that could not be restored in 30 minutes, the meeting will automatically be terminated and resume on November 21<sup>st</sup>. at 9 am using the same zoom links used of this meeting.
- Community input will be received in the designated part of the agenda as well as throughout the meeting.

##### *Membership Update:*

- If you know of anyone who is interested in serving on the Council and suitable for the any of the vacant positions, please encourage them to apply.
- 

##### *Events and resources:*

- Caregiver presentation
- Link to the 2022 National Survey on Drug Use and Health (NSDUH) Report See [2022 NSDUH Detailed Tables | CBHSQ Data \(samhsa.gov\)](#)
- A brief news release was sent to SCMh members about the November 13 tragedy at the Hawaii State Hospital (HSH). DOH Behavioral Health Administrator Deputy Director, Marian Tsuji, reported about the tragic event at HSH. The patient was discharged back in August and was placed in the State-Operated Special Residential Program (SOSRP) program, which is a transitional program for those discharged from the HSH to learn how to take care of themselves and develop their network out in the community. This group home living is located on the grounds of the (HSH)

From all appearances, there was no indication that anything like this would happen. Dr. Luke and his team arrived on site and went to all the housing areas and talked with the staff. Dr. Matsu is working on getting other kinds of counseling resources available. Dr. Tsuji said, 'We have reached out to the family and they're just devastated. We are basically doing a safety stand down for the next few days. We will be reviewing all our protocols and look at what could we have done better. The bottom line is this is a system, and you can't just fix the hospital and look at what's available in the community to support people moving out of the hospital. So, we've been in touch with our legislators. Dr. Fink has been in touch with the Governor and is very much aware of what's going on. We hope that we can learn from this and move forward.'

*Questions and Answers.*

Q. Is the family okay and the other staff, okay?

A. It was really challenging because there were four other staff on duty at the time who were within the vicinity or witnessed what happened. While it was very traumatizing for the staff it was not possible for us to go and give them a hug and ask what we can do. It was an active investigation and police protocol needed to be followed so the staff were separated 50 feet away from each other. The perpetrator has been arrested.

Q. Did the person have a caseworker? Or was the person transitioning well?

A. He had a caseworker. Generally, folks are given two to three months to transition, go out in the community and find housing. But the frustration with this system is we don't have enough housing available. So, it is frustrating if you're looking for housing, and every time you call, you get rejected.

Q. So, toward the end of their program was the housing, that whole stress piece was a big player.

A. I'm sure that there was not any one thing. I'm sure that there was multiple. I think that what this incident really underscores is the fact that we are a system. And when we just focus on the hospital, and saying, we need more beds, we need a secure facility, that's one component of the system. We've got to prevent people from going into the hospital, and then on the back end, we've got to make sure that people are supported in the community so that they don't come back.

Q. Pending a mental health evaluation, there's a great likelihood that this person is going to end up right back at the hospital?

A. Very likely.

Q. So he was a resident at one of these cottages?

A. Yes. Technically he is discharged from the hospital. He is on unconditional release.

Dr. Matsu shared that they are putting together and making available certain individuals, including (SCMH member, DOH staff) Kathleen Merriam, to provide grief counseling for staff as well as residents at that placement area.

Q. As a Windward resident, was this person part of the step down? Were they allowed to be in the community also?

A. Yes. The whole point is for the person to start developing the connections in the community, they've got their meds and they start looking for a job. They get housing, so that they're not just out there, and then trying to figure it out things.

Q. How long will the investigation is likely take? Or do you have an estimate currently?

A. For us, we're doing an internal safety investigation. The Honolulu Police Department (HPD) will take whatever time they need, and they still need to get a search warrant to go through the perpetrators personal belongings. So that whole housing area was emptied out last night.

Q. Dr. Luke presented last month and said that about 50% of the folks in HSH are probably ready for a transition. There doesn't seem to be an intermediate step-down program with short steps between someone who's in full state hospital care versus independent living that is robust. Why is this person in this transitional house? Wouldn't someone like that be under some type of conservatorship?

There's not as robust conservatorship system available in Hawaii because when you have a conservatorship, you're required to be able to monitor people, which means having community type residential living, that's monitored. Was this person under any type of conservatorship? Or is it just you're discharged, even though you're in this transitional housing, you're in charge yourself?

A. No, he had a case manager. And there were staff that monitor what goes on. It's like a gradual release of monitoring. There are four cottages with a communal kitchen, living room, dining room and then individual bedrooms. It's kind of the internal transition, so that they can start putting their foot out into the community. But as I mentioned, this is a system and if there are not enough community beds available for them to further transition, it can get frustrating This also backs up the state hospital.

Q. Dr. Luke had mentioned staffing issues. Was there a staffing issue in these cottages?

A. The cottages were fully staffed last night. Staffing is always an issue. Between the agency staff and overtime, it's a lot and a huge budget. We've been able to get more staff on board. But it's a huge civil service system that is very challenging. It takes a long time to get a list of applicants.

Q. Can you go into more detail about the setup of these cottages? There are case managers. Do they have nurses and what's the supervision or management like?

A. The cottages are close to each other. There are two nurses and three psychiatric technicians on staff 24/7. The case management, which are contracted out, is available Monday through Friday during business hours.

### **III. Consideration and Approval of Meeting Minutes – October 10, 2023**

Eileen Lau-James moved to approve the minutes. Richard Ries seconded. The minutes was approved unanimously.

### **IV. Community Input**

Raelyn Reno-Yeomans requested that the State Council's recorded meetings are made available to the public. She has emailed Carolyn and the Chairperson regarding this request. There's an issue with the communication specialist's position not being filled with Department of Health. So, requests for media requests are delayed or unavailable. If you look at the Hawaii Public Safety Oversight Commission website, they have links to YouTube uploads of every one of their meetings, as well as the State Legislature. So, it's something easy.

The Council will look into this. K. Aumer will work offline with staff to see if that's possible.

### **V. Old Business**

A. October "Meeting and Greet" and Presentation Dr. Ken Luke Thank you letter

E. Lau-James motion to approve the Thank you letter to Dr. Ken Luke. M. Waterhouse seconded. Thank you letter was approved unanimously.

**B. 2024 Legislation Updates and Discussion –**

Mary Pat Waterhouse summarized that at the last meeting the Council created two groups. The first was a permitted interaction group to investigate the creation of new legislative bills and the other an Ad Hoc Committee for the 2024 legislative session. She highlighted the difference between the PIG and the AdHoc.

The Investigative Permitted Interaction Group:

- 1) Allows member to meet and investigate freely. These meetings do not need to be public meetings.
- 2) Have 3 meetings required by the Sunshine Law. First meeting to establish the PIG, second meeting to report findings and recommendations with no action, and third meeting for Council to decide what to do about the recommendations.

The Ad Hoc committee meetings have to follow Sunshine Law protocol for public notice of its meetings. M. P. Waterhouse gave some information regarding legislative bills. For the State of Hawaii, there is called a biennium for legislative bills. The first year was 2023 and second year is 2024 of the biennium. All the bills that were introduced in 2023 are still alive in going into 2024 for bills that did not pass. A legislator can go and pull out any of those bills and have them reintroduced again. So those are kinds of things that the Council should be looking at this coming legislature session.

Discussion:

There were suggestions to get bills through:

- Get to know the legislators
- Pair up with other groups such as social work groups, psychology groups, and the Mental Health Task Force.
- Get feedback from government agency representatives on the Council

**VI. New Business**

**A. Hawaii 2024 State Council on Mental Health Report Preparation and Discussion**

Based on past practice, the internal DOH deadline for this report is December 20, 2023. K. Aumer opened the discussion on how the Council want the report done this year and should it be like last year's?

Discussion:

There were suggestions to include the following:

- Visit to HSH, the need for beds and emphasis on preventive methods.
- Support for first responders
- Workforce development in the mental health community
- Maui wildfires. Emphasize the long-term effects on Maui and working with families that are re-entering the impact zone.
- Highlight from the different agencies that are on the Council.
- A draft can be offered at the December 12 meeting for voting.

E. Lau-James motioned to create a negotiating Permitted Interaction Group for the 2024 Report. N. Crozier seconded. Motion unanimously passes. If the Council approves the first draft on December 12, there is a need to review the final version that will be submitted. The PIG members will be R. Ries and K. Aumer.

- B. Informational Presentation: National Family Caregivers Month Resources by Savy Makalena
- K. Aumer welcomed S. Makalena and thanked her for coming on such a short notice. S. Makalena is the CEO and founder of Give Me A Break Hawaii, a nonprofit whose main purpose is care of caregivers. She has a seat on the Hawaii Family Caregiver Coalition, where she helped to advocate for caregivers. Her presentation included the following highlights:

Statistic:

- In the State of Hawaii, there are 157,000 Plus caregivers, family caregivers, and through the United States alone there 65 point 7 million.
- 66% of those caregivers, are reporting that they have at least one adverse mental or behavioral health symptom.
- Nationwide 50% of all caregivers will pass before the one they're caring for.
- If you're over the age of 70, and you're caring for someone, that percentage goes up to 70%.
- 20% of our caregivers are suffering from some sort of depression.
- 100% of caregiver, are frustrated, exhausted, and they need our support and resources.

*Give Me a Break is a public nonprofit organization (gab808.org)*

- Its mission is to care for the emotional, physical, and give caregivers that break, as well as resources and support for their continued wellness.
- GAB does outreach, we teach self-care and wellness.
- Organized four years ago, GAB came from understanding that caregivers need support, t resources, community, and advocacy as well.

What the organization have done to help caregivers:

- Pamper sessions – Held at the Hope Lodge. The pamper sessions include massage aromatherapy, education about self-care and wellness.
- Yearly retreats – All free of charge to caregivers
- Workshops. Teach caregivers to learn how to practice wellness within everything they do in their life, and tailor all of that. Every October, GAB holds workshops about telling your story and putting a happy ending to your journey as a caregiver.
- Weekly support sessions. Online every Tuesday evening at 8pm.
- Caregivers guide magazine online. Subscription to the magazine and raises revenues to pay for what GAB does.
- YouTube channel where caregivers can go for those outreach presentations.
- The Caring Caregiver live show and podcast to connect caregivers with resources.
- In November is the National Caregivers Family Caregiver Month to create awareness of other caregivers out there and connect community.

*Goal:*

-A global reach and have a Give Me a Break in every neighborhood so that every caregiver can find support, can be connected to a community, and not feel alone and isolated. This certainly fights depression that many experience and not have to feel guilty over practicing wellness and self-care.

## **VII. Information Reports**

### **A. Island Representative Reports**

*Oahu Service Area Board (OSAB)*. No updates

### **B. *Hawaii Service Area Board (HSAB)*. No updates**

### **C. State Agency Representative Reports**

1. *Behavioral Health, Department of Health (DOH)*. See Appendix for Kathleen Merriam written report. On Maui the One Stop Clinic idea is growing rapidly. There are over 300 clients that are engaged. The Keiki-to- Kupuna Project is also growing.
2. *Vocational Rehabilitation, Department of Human Services (VocRehab)*. This report is part of the meeting packet.
3. *Judiciary*. Kristin Will reported that the Judiciary's Mental Unit has hired all the probation officers it needed. There will be a new judge transitioning in the beginning of 2024 for the special courts- mental health, veterans' treatment, and drug court. There is also a new judge for conditional release, Judge Johnson.
4. *Social Services*. Ray Rice reported APS
  - APS is continuing to work on finding trainings for community mental health resources.
  - We had a presentation by NAMI and was well received by everyone at APS. There have been discussions of collaborating further with NAMI on putting together CIT trainings specifically for APS workers.

Carolyn reported back that K. Seguancia emailed to explain why she could no longer make it to Council meetings - 5 people from her branch has resigned in the last three months. Carolyn will notify the Governor of this official vacancy.

### **D. Specialty Area Representative Reports**

#### **1. *Providers*. R. Ries –**

- There's been some trends amongst providers to transition from the work of psychotherapy towards other things like neurofeedback, ketamine treatment, and TMS or trans magnetic stimulation for financial reasons. There's a bit of worry for psychotherapy providers because there's no reduction in the demand for people that want talk therapy.
- There is a very notable trend towards telehealth only services, also for the financial reasons of not having the expense of an outside of home office. The demand for in person sessions by recipients of care is not diminishing.
- We're seeing an increase across the board in referrals for frontline responders, such as those in law enforcement and EMS.
- If anyone knows of psychologists or social workers, with offices on the Big Island that have a particular expertise or interest in working with law enforcement personnel, Hawaii island is trying to a list to help with this.
- Providers have been requested to delegate some hours in their work week, for availability for services to people impacted by the Maui wildfires. That request has come through both, like the Hawaii Psychological Association and similar associations, as well as through the insurance agencies themselves.

- There was an announcement by an insurance agency that psychologists for psychotherapy encounter will be reimbursed at a rate equivalent to that of a psychiatrist between, \$11 and \$15 increase as an hourly.
- There are people hopeful for the help and are gearing up for HELP or Healthcare Education Loan Repayment program process, put forth by the governor.

## 2. *Family members.*

- E. Lau James wanted to echo the presenter's sentiments on caregivers. She agreed that it was essential for everyone to reiterate that over 65 million caregivers in this country are doing the equivalent of a full-time job for free. She echoed that everywhere, a caregiver deserves to be acknowledged and supported. She urged the Council to support all efforts to help family members financially and legislation this year.
- M.P. Waterhouse added that, typically, people think of caregivers as helping those who are age, physically disabled, or have Alzheimer's. She said that E. Lau-James brought up a good point that Council members have family members or friends who have mental illness, and caregiving is huge. She shared that sometimes in her life, it has been challenging because she was taking care of her brother, who had a mental illness, and his wife, who also had a mental illness, and their young child. So, one becomes the primary caretaker for that whole family unit. We are caregivers.
- N. Crozier agreed and wished they (GAB) had been around when she cared for her mom years ago. I listened to the presentation; caregivers are so much needed and appreciated. N. Crozier apologized for missing past meetings and said she has taken a different position and is trying to get back into the swing of things.

## 3. *Youth.*

Antonino Beninato more than three meetings without requesting to be excused. R. Ries reminded me that A. Beninato submitted a resignation when he was still the chairperson. Despite that, C. Weygan-Hildebrand encouraged him to stay and he did continue attending and actively contributed to the Council. It seems to be time to accept his wish to step down.

## **VIII. Meeting Evaluation/Recommended Future Agenda Items/Closing Announcements**

-none-

## **IX. Adjournment**

The meeting was adjourned at 11:03 a.m.

## **Handouts**

1. Public Notice and Agenda November 14, 2023 Meeting
2. Attendance Log October 10, 2023 Meeting
3. Draft Minutes of October 10, 2023 Meeting
4. Draft Thank you letter for Dr. K. Luke
5. Outline and Notes 2024 Report to the Governor
6. DVR VRA Report 110823



# **State Mental Health Council**

## **DOH Report – 11/14/2023**

### Adult Mental Health Division

- Hawaii State Hospital (HSH) update was provided in October 2023. A thorough AMHD update will be provided in December 2023.

### Alcohol & Drug Abuse Division

- Released two RFPs (Requests for Proposals) for a systems integrator and project validation services.
- Opioid Settlement Projects starting to ramp up, two of three positions filled.
- Executing a contract to provide prevention events for impacted residents at West Maui hotels.
- New prevention branch manager started – Trevor Lee.

### Child & Adolescent Mental Health Division

- CAMHD is about to start its 2<sup>nd</sup> series of Trauma Focused Cognitive Behavioral Therapy (TF-CBT) Training for CAMHD providers.
- Using SAMHSA MH Block Grant Supplemental Bi-Partisan Safer Community Act (BSCA) funds an MOA is being finalized with UH-KCC to include Resilience Training into EMT and Paramedic new trainees and continuing education curriculum. UH-KCC certifies all EMT and paramedics statewide.
- DOH EMSIPB (Emergency Medical Services & Injury Prevention Branch) contributed and linked us to UH-KCC to provide Resilience Training to EMT and paramedic trainee and continuing education curriculum. This initiative is a joint AMHD & CAMHD effort.

### Developmental Disabilities Division

- Update will be provided for December meeting.