



HAWAII STATE
DEPARTMENT
OF HEALTH

Recovery Guide:

The Official Consumer Handbook
of the Adult Mental Health Division

4th Edition - Online Version

This Recovery Guide belongs to:

If found, please call or e-mail:

COVID-19

Coronavirus Resources

ATTENTION

August 2020 - Governor Ige, in partnership with the County mayors and leaders from coordinating agencies, are actively monitoring COVID-19 cases across the State of Hawaii.

If necessary, restrictions may be placed on residents and visitors including, but not limited to, mandatory quarantine, wearing of face coverings, and gatherings.

The best way to keep informed is through daily news updates on the television, radio and newspaper. Internet websites and social media are other ways to stay updated.

Department of Health's Disease Outbreak Control Division
<https://health.hawaii.gov/coronavirusdisease2019/>

If you are unsure of the current COVID-19 restrictions and guidelines, please ask your case manager or contact the Aloha United Way's confidential statewide helpline.



CALL

2-1-1- or
1-877-275-6569



CHAT

Available 7:00
am to 10pm, 7
days a week



TEXT

877-275-6569
Please include
zip code



EMAIL

Response within
one business day



Hawaii State Department of Health
Adult Mental Health Division, Rm. 256
P.O. Box 3378
Honolulu, HI 96801
Phone: (808) 586-4770
<https://health.hawaii.gov/amhd/>

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and Human Services (HHS).

This Recovery Guide is for consumers of Adult Mental Health Division (AMHD) services.

The intent of this Recovery Guide is to provide information about what to expect when receiving AMHD services through the Community Mental Health Center (CMHC), Treatment Services Sections (TSS) and clinics, Rehabilitation Services Sections (known as Clubhouses), and through Purchase of Service (POS) contracted providers.

Information in this Recovery Guide is not meant to be used as a substitute for professional individualized treatment with a licensed healthcare provider.

If you have questions about this Recovery Guide, please contact the AMHD, Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

Written inquiries about this Recovery Guide may be sent to:

Hawaii State Department of Health
Adult Mental Health Division
Attn: Office of Consumer Affairs, Rm. 256
P.O. Box 3378
Honolulu, HI 96801

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NOTES

Aloha, Consumers! You are holding a copy of the 4th edition of the Recovery Guide: The Official Consumer Handbook of the Adult Mental Health Division (AMHD).

This Recovery Guide:

- Tells us about our rights when accessing and receiving services;
- Explains what types of services are provided;
- Advises us about what we should do if we have concerns or if we are not satisfied with the services we receive; and
- Explains how our private information is used.

Please read this Recovery Guide, keep it in a safe place, and review it when you have a question.

Recovery, for those who live with a mental illness, is a very personal process. We all recover differently. Good news is recovery is possible for all! Do not lose hope!

Key parts of the recovery process include learning as much as we can about our illnesses, knowing what will help us, recognizing what we should avoid, and working in partnership with our caregivers and providers.

Another big part in achieving recovery is personal responsibility. Our personal responsibilities include being honest with our providers, asking and listening to their advice, and being honest with ourselves.

One main thing about taking responsibility for our own recovery is making informed decisions. We are responsible for keeping our appointments and taking care of ourselves by addressing our medical needs, living a healthy lifestyle, and participating in activities that we enjoy and that make us feel good about ourselves.

Actively developing a Recovery Plan with our caregivers and providers is our responsibility. We need to identify our goals and what steps we will take to achieve those goals.

A Special Mahalo

In recognition of consumers who worked tirelessly to review this Recovery Guide and who provided suggestions for improving its clarity and usefulness, I would like to extend a special "Mahalo" to each consumer for their time and commitment.

Lastly, please know that the AMHD Office of Consumer Affairs is available to assist and support you in your recovery. You are welcome to contact us by phone at (808) 586-4688 during regular state business hours.

Mahalo,



Jacob "Jake" R. McPherson
Chief, Office of Consumer Affairs
Adult Mental Health Division

Statement on Statutory Responsibility

In accordance with §334-2, Hawaii Revised Statutes, the Hawaii State Department of Health is statutorily responsible for the development and implementation of a comprehensive statewide mental health system in partnership with consumers, stakeholders, government agencies and community organizations.

The Adult Mental Health Division (AMHD) is committed to providing timely and appropriate services to eligible individuals. It is AMHD's responsibility to assure individuals are knowledgeable about the services it provides.

Consumers receiving services from the AMHD may receive one (1) printed copy of this Recovery Guide for their personal use.

This Recovery Guide is available in the following formats:

Electronic copies

Available for download and viewing through the AMHD website:

<https://health.hawaii.gov/amhd/recovery-guide/>

Printed copies

Available through the AMHD while supplies last.

Printed copies - in a larger type

Available by special request.

To request a copy, please first ask your case manager.

If you are unable to receive a copy from your case manager, please call the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

Interpretive Services

If you need help understanding because your primary language is not English, are hearing-impaired or are unable to read the information as printed, including American Sign Language assistance, please call the AMHD Office of Consumer Affairs for help at (808) 586-4688, during regular state business hours.

In general, interpretive services help to:

- Answer questions in a way that you will understand;
- Describe service options; and
- Explain information shared during appointments.

Types of Interpretive Services

TTY/TDD Access (Text Telephone)

Deaf and speech impaired individuals may contact the AMHD by calling us through RelayHawaii. This service is available 24 hours a day, 7 days a week by calling 7-1-1 from any phone with text capability.

Bilingual Access Line

For those who have difficulty reading or understanding English, the Helping Hands Hawaii Bilingual Access Line (BAL) arranges for interpreters to work with you, along with your case manager, to help you understand your consumer rights, including assisting you with filing grievances (complaints). Contact (808) 526-9724 to request help.

Chinese

雙語通訊電話:

專為不能閱讀或理解英語人士，或英語會話能力有限者服務，雙語通訊翻譯員會幫助您與您的輔導主任溝通，共同了解消費者權益和如何提出投訴。尋求協助，請找您的輔導主任或您住所區內的社區精神衛生診所查詢。

(808) 526-9724

Chuukese

Awewen ekkei wokisin fan:

Fan itan io esap weweiti fosun merika, are fen kukun an weweiti fosun merika, ei leni ra wisen awewe fosun merika ra tongeni alisuk, fiti me ekkewe chon tumunu ngenuk met kopwe tufich ren. Ekkei aramas ra tongeni alisuk ren om kopwe weweiti met wisom me om pung le atoura om netipengaw me riafoun netipom. Ren ekkei alilis, kopwe kori eman ekkewe aramas ra alilis ngenuk me lon ekkei ofes, are fen feilo ngeni om kopwe chulong lon ach kewe pioingin mi ngaw mokurer.

(808) 526-9724

Ilokano

Linya nga Mamagkamang iti Dua nga Pagsasao:

Para kadagiti saan nga makabasa wenno makaawat iti English, wenno apagsasao, ti mangisarsarut iti duangapagsasao ket tulungannaka agraman ti mangimaton iti parikutmo tapno maawatam ti kalintegan dagiti agaramat wenno pagpaayan dagiti partuat wenno apit ken dadduma pay. Ken ti panangyuman iti saan nga nasayaat nga pannakataming. Tapno matulunganka, umasugka iti mangimaton iti parikut mo wenno kumamangka iti kaasitgan nga manaripato iti salun-at ti pampanunut.

(808) 526-9724

Interpretive Services

Japanese

バイリンガル・アクセス・ライン (母国語が英語以外の方々のための言語援助機関)

英語を読んで理解することの出来ない方、又は英語力に自信のない方は、バイリンガル・アクセス・ラインの通訳がケース・マネージャー(事例主事)に伴って、貴方が消費者権利を理解し、必要な時には苦情を申し立てることの出来るようお手伝いします。通訳サービスをご利用になりたい方は、ケース・マネージャーに連絡するか、又は最寄りの地方メンタル・ヘルス・クリニック (精神上の健康維持のための相談所) をお訪ね下さい。

(808) 526-9724

Korean

2 개 국어에 접하는 라인

영어를 읽지 못하고 이해 못하는 사람들, 또는 영어표현에 한계가 있는 사람들을 위해서 2 개국어 접하는 라인의 통역인들이 여러분들과 같이 일할것입니다 (여러분의 상황 관리자와 같이) 여러분의 고객권리와 불평을 보고하는데 이해가 되도록 도와 줄것입니다. 도움을 위해서는 여러분의 상황관리인에게 연락하시거나 또는 가장가까운 지역의 정신건강 진료소를 찾으십시오.

(808) 526-9724

Marshallese

Bilingual Access Line:

Ñan ro me rejab maron in riit ak melele kajin bälle, ak ejjabwe aer jela kajin bälla, riukook ro an Bilingual Access Line naaj maroñ jermal ippam, kobalok ippān case manager eo, ñan jipañ kemeleleik eok kōn jimwe im maroñ ko an armij im kab naaj kanne peba in jakimaalok abōnōnō ko. Ñan bōk jipañ, kebake case manager eo am, ak ñe ejjab, jibadōklok community mental health clinic eo ebaake eok.

(808) 526-9724

Samoan

Tautua o le Bilingual Access Line:

Mo i latou uma e le malamalama i le Igilisi, e maua le fesoasoani mo oe e ala atu i le tautua a le ofisa o le Bilingual Access Line. O lenei ofisa, e latou te fesoasoani ia te oe, i le tau fa'amalamalamaina o ni mataupu o lo'o e tau sailia, po'o nisi tulaga e te fia malamalama lelei iai. Mo nisi fa'amatalaga, fa'amolemole fa'afesota'i lau case manager, pe asiasi atu fo'i i se fale talavai, mo ma'i e fa'asino i le mafau Fau, e lata ane i le mea o e alaala iai.

(808) 526-9724

Tongan

Bilingual Access Line:

Ko kimoutolu kotoa pe Hou'eiki mo kainga 'oku 'ikai ke mou poto he lautohi pe mahino pe 'oku nounou ho'omou si'i 'ilo 'a e lea Faka-papalagi, 'oku 'i ai 'a e tokotaha fakatonulea mei he Bilingual Access Line te nau ngaue mo tokoni kiate koe ke ke 'ilo'i ho'o totonu (rights) mo faile ho'o launga. Kapau 'oku mou fiema'u tokoni pea mou fetu'utaki ki he toko taha oku ne tokonga'i ho'o keisi (case manager) pe te mou a'u atu ki he kiliniki faingata'ia faka-atamai ofi taha kiate kimoutolu.

(808) 526-9724

Vietnamese

Những dây song ngữ:

Đành cho những người không thể nói và hiểu tiếng Anh, hay là những người có trình độ ngoại ngữ tiếng Anh yếu kém. Thông dịch viên của những dây song ngữ sẽ giúp quý vò, làm việc với nhân viên xã hội của quý vò, để giúp quý vò hiểu rõ về quyền lợi của mình và nên nhận khiếu nại. Khi cần sự giúp đỡ, xin vui lòng liên lạc với nhân viên xã hội hay nên chặn bừa bãi bệnh viện tâm thần cho gần nhất nơi quý vò ở.

(808) 526-9724

The Adult Mental Health Division (AMHD) serves, as the state mental health authority, individuals needing mental health services.

Individuals who receive services from the AMHD are referred to as Consumers.

MISSION

The AMHD provides integrated mental health services for consumers living with serious mental illness (SMI) who are uninsured or underinsured, those who are court-ordered for evaluation, care and custody to the Department of Health, and individuals in crisis.

VISION

The AMHD strives to be a national leader in providing an accessible, culturally responsive, integrated, and best practice-based system of mental health services to support consumers in their recovery.

GUIDING PRINCIPLES

The AMHD uses the following principles to guide its work:

- Mental health treatment works.
- People recover every day in Hawaii.
- AMHD supports recovery in all aspects of our work.
- Appropriate housing and employment are keys to recovery.
- We strive to treat our consumers in independent living settings.
- Behavioral health is essential to health; we partner with other healthcare professionals to provide integrated treatment.
- We strive to use technology to work smarter.
- We strive to educate ourselves and provide training to others.
- We support the use of innovative strategies to reduce involvement of individuals with mental illness in the criminal justice system.
- We strive to identify and provide best practice mental health care to our consumers.
- We strive to develop and provide best practice forensic services to integrate and collaborate with the courts, public safety authorities, and law enforcement agencies to reduce consumers' justice involvement.

Philosophy of Care

Throughout the AMHD's system of care, recovery is a philosophy that not only applies to your mental health, but to your physical, cultural, and spiritual health as well.

To understand this more, the AMHD recommends that you consider the other parts of your life that make up the whole of you, as outlined in Mary Ellen Copeland's book, "Wellness Recovery Action Plan (WRAP)" (2018, Human Potential Press, Sudbury, MA. ISBN: 978-1-948857-00-0).

Copeland's WRAP system introduces each of the following topics for your overall health:

- Developing a support system,
- Peer counseling,
- Focusing and relaxation exercises,
- Creative, fun, affirming activities,
- Journaling,
- Music,
- Diet and exercise,
- Light and sun, and
- Getting a good night's sleep.

By paying attention to your whole life, you can improve your health overall.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the federal agency within the U.S. Department of Health and Human Services (HHS) responsible for organizing public health initiatives to address behavioral health needs.

According to SAMHSA, "Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential." Recovery is a continual growth process. During this growth process, setbacks may occur. Since setbacks are a natural part of life, resilience is a critical part of the recovery process (2019).

"Hope, the belief that these challenges and conditions can be overcome, is the foundation of recovery."

- SAMHSA.gov (2019)

What is Recovery?

The four (4) dimensions identified by SAMHSA that support the recovery process include:

- **Health**
Overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being.
- **Home**
Having a stable and safe place to live.
- **Purpose**
Conducting meaningful daily activities and having the independence, income, and resources to participate in society.
- **Community**
Having relationships and social networks that provide support, friendship, love, and hope.

Confidentiality laws about your personal protected health information (PHI) limits the information that the AMHD can discuss with other individuals without your permission.

The Health Insurance Portability and Accountability Act (HIPAA) provides national standards to protect PHI from being shared without your permission.

PHI includes information in the medical records that can identify you, including your health status and diagnoses, services you are receiving, clinical documentation, and payment for those services.

PHI is used to:

- Plan your care and arrange for services;
- Communicate with providers who are coordinating your services; and
- Verify that providers are billing for services that were actually provided to you.

Under these laws, you have the right to:

- Inspect and receive a copy of records containing your PHI, unless your doctor believes that sharing the information with you may be harmful to you. If information is not shared, you have the right to submit a written appeal for the denial of your request.
- Ask the AMHD or your provider to correct information you believe is wrong. If your request is denied, you have a right to know why and to have your proposed correction included in your record.

Under these laws, you have the right to (continued):

- Know who has permission to see your records and PHI;
- Request a copy of the AMHD policy and procedure regarding your rights to confidentiality; and
- Expect that your information will not be shared without your written permission, except as explained in this section.

You need to provide written consent (permission) to the AMHD before your PHI may be shared. If a family member, friend, attorney, or advocate contacts the AMHD about you, before your PHI is shared with them, the AMHD will need your written permission.

Your case manager or the AMHD Office of Consumer Affairs can help you to obtain a copy of the PHI consent form. You may cancel or change who you authorize (give permission) to receive your PHI any time.

There are some specific instances when the AMHD does not need your permission. For example:

- In the case of an emergency;
- If there is reason to believe you will hurt yourself or someone else;
- If the court orders your information be provided;
- If there are signs of abuse or neglect;
- If the government needs to review the information to make sure the AMHD and your providers actually provided the services they say they did.

To file a complaint (grievance), you may speak to the Consumer Rights Advisor at the Community Mental Health Center (CMHC) Treatment Services Section (TSS) or clinic, or at the provider office where you receive services. You may also contact the following staff for assistance.

AMHD Consumer Advisor

By phone: (808) 586-4685
By fax: (808) 586-4745
By mail: Hawaii State Department of Health
Adult Mental Health Division
Attn: Consumer Advisor, Rm. 256
P.O. Box 3378
Honolulu, HI 96801

HIPAA Office

By phone: (808) 586-4111
By mail: Hawaii State Department of Health
HIPAA Office
P.O. Box 3378
Honolulu, HI 96801

U.S. DHHS Office for Civil Rights

By phone: (866) 627-7748
TTY/TDD: (415) 427-8311
Toll free: 1 (800) 368-1019
By mail: U.S. DHHS/Office for Civil Rights
Medical Privacy, Complaints Division
200 Independence Ave. S.W.
Washington, D.C. 20201

The AMHD strives to ensure all staff and providers uphold your rights. All AMHD consumers have these rights:

1. You have rights no matter what your situation is and regardless of your:
 - Age,
 - Race,
 - Sex,
 - Sexual orientation, gender identity, or expression,
 - Physical or mental condition,
 - National origin, religion or culture,
 - Language spoken or ability to communicate,
 - Amount of education,
 - Lifestyle, and
 - Source of payment for services.

Protected health information (PHI) includes information in the medical records that can identify you, including your health status and diagnoses, services you are receiving, clinical documentation, and payment for those services.

2. You have the right to have your PHI kept confidential and you have the right to give written consent to the AMHD to share your PHI with individuals you authorize (give your permission).
3. You have the right to expect that your PHI will be kept private according to the Health Insurance Portability and Accountability Act (HIPAA).

4. You have the right to be treated with respect and dignity, and to have your right to privacy respected.
5. You have the right to know all of your rights and responsibilities.
6. You have the right to get help from the AMHD to understand your services.
7. You are free to use your rights. Services will not be charged to you and you will not be treated differently when you use your rights.
8. You have the right to receive information and services in a timely manner.
9. You have the right to be part of all choices about your services. You have the right to have a copy of your written Recovery Plan and Crisis Plan.
10. You have the right to disagree with your treatment team and you have the right to ask for changes in your Recovery Plan and Crisis Plan.
11. You have the right to seek and obtain a second opinion when deciding on your services.

12. You have the right to know about the AMHD and services available to you including who will provide the services, their training, and their experience.
13. You have the right to know as much information about your services as you need so you can give your informed consent or refusal. This information must be told to you in a way you can understand and have your questions answered.

Except in emergency cases, this information shall include a description of the service, medical risks involved, any alternate course(s) of treatment (or no treatment), and the risks involved in each.

14. You have the right to receive emergency services within the United States when traveling outside the State of Hawaii.
15. You have the right to an honest discussion with your providers about your services, regardless of cost and benefit coverage.
16. You have the right to be advised and to give permission to a provider if they want to include you in experimental care or treatment. You have the right to refuse to be included in such research projects.

17. You have the right to complete an advance directive, living will, psychiatric advance directive (PAD), physician orders for life-sustaining treatment (POLST), medical durable power of attorney, or another directive.
18. You have the right to choose any individual to have a legal responsibility for making decisions for you regarding your mental health care. Any individual with the legal responsibility to make health care decisions for you has the same rights as you do.

You have the right to have a copy of your directive included in your record.

19. You have the right to ask for a different provider or case manager. If you want a different provider or case manager, the AMHD will assist you; however, there is no guarantee that you will be linked with a new provider or case manager right away.
20. You have the right to be informed of continuing care prior to discharge from the hospital or outpatient services.
21. You have the right to information about your medications including what the medication is used for, symptoms and side effects, and how to take the medication.

22. To the extent allowed by law, you have the right to refuse services and medications. If you refuse services and/or medications, including alternative course(s) of treatment, your refusal will be documented, and your case manager and doctor will be informed.

You are responsible for your actions if you refuse services or medications and if you do not follow your providers' advice.

23. You have the right to review and receive an explanation of any bills for non-covered services, regardless of who pays.
24. You have the right to receive emergency services when you, in acting responsibly, believe an emergency exists.
25. You have the right to receive services that are respectful to your racial and ethnic culture, including language, histories, traditions, beliefs, values, and sexual orientation or gender preference.
26. You have the right to an interpreter to assist you to communicate with AMHD staff and your providers.
27. You have the right to ask the AMHD and your providers to send you mail and call you at the address and telephone number of your choice.

28. You have the right to be free from being secluded or restrained.
29. A grievance (complaint) is any statement about something that you believe is wrong, especially unfair treatment.

The grievance is based on your belief. It includes information about the issue, in your own words, and what you feel should be done to address the issue.

You have the right to complain about the services you receive. You have the right to expect that no one will try to get back at you (retaliate) because you complained. If you complain, your services will not stop unless you want them to.

To complain (file a grievance), please contact the AMHD Consumer Advisor at (808) 586-4685 during regular state business hours.

If you have questions or concerns about your rights, you may speak to the Consumer Rights Advisor at the Community Mental Health Center (CMHC) Treatment Services Section (TSS) or clinic, or at the provider office where you receive services.

You may also contact the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

In addition to the rights described in the "Your Rights" section of this Recovery Guide, the following rights are published by the Commission on Accreditation of Rehabilitation Facilities (CARF) and are recognized by the AMHD as rights for all consumers

The Rights of Persons Served states you have the right to:

- A. Confidentiality of information
- B. Privacy
- C. Freedom from:
 - 1) Abuse.
 - 2) Financial or other exploitation.
 - 3) Retaliation.
 - 4) Humiliation.
 - 5) Neglect.
- D. Access to:
 - 1) Information pertinent to you in sufficient time to facilitate your decision making.
 - 2) Your own records.
- E. Informed consent or refusal or expression of choice regarding:
 - 1) Service delivery.
 - 2) Release of information.
 - 3) Concurrent services.
 - 4) Members of your treatment team.
 - 5) Your involvement in research projects, if applicable.

- F. Access or referral to:
 - 1) Legal entities for appropriate representation.
 - 2) Self-help support services.
 - 3) Advocacy support services.
- G. Adherence to research guidelines and ethics when you are involved, if applicable.
- H. Investigation and resolution of alleged infringement of your rights.
- I. Other legal rights.

More information about the CARF organization may be found on their website at <http://www.carf.org/home/>

Your Responsibilities

Your help is needed so you receive the best possible services. You can help by being responsible for the following actions:

1. Make sure you keep your scheduled appointments. If you know you will miss an appointment, call the provider's office at least 24 hours before or as soon as possible to ask for a new appointment time.
2. Answer all questions about yourself in an honest way. This is important to get the best possible care.
3. Take an active part in your recovery planning.
4. Follow your doctor's instructions about how to take your medications. If you have any problems with your medications, or if you need a refill, tell your doctor or case manager right away.
5. Ask questions when you do not understand what you are told or something about your services.
6. Inform the AMHD, your case manager, providers, and health insurer of changes such as a new home address, mailing address, contact phone number, doctor (for your physical health), emergency contact(s), and any other changes.
7. Always take your medication and do not share it with anyone.

We ask that you please:

8. Treat all people with respect, always.
9. Make sure that you are the only one that uses your health insurance card.
10. Bring your health insurance card with you to your appointments and show it to the provider, especially if you have a new card or if the information on the card has changed.
11. Let your health insurer know if your health insurance card was lost or stolen.
12. Let your case manager and your providers know if you have health insurance with another company.
13. Remember that any other health insurance must pay for care BEFORE payment from the AMHD is requested.
14. If there are ever any changes in your life that will affect how you receive services, including changes in your family situation, notify your case manager and providers right away.

Remember, to the extent allowed by law, you have the right to refuse services and medications.

You have other rights and responsibilities if a judge orders you to receive services from the AMHD.

If you are ordered by the court to receive AMHD services, you must participate in those services.

If you have questions about your legal rights, please contact your case manager, doctor, legal guardian, lawyer, or the Office of the Public Defender.

Office of the Public Defender

- Kauai (808) 241-7128
- Maui (808) 984-5018
- Molokai (808) 553-1100
- Oahu (808) 586-2200
- Hilo (808) 974-4571
- Kona (808) 322-1945

The AMHD coordinates services statewide through the Community Mental Health Center (CMHC) Treatment Services Sections (TSS) and clinics, Rehabilitation Services Sections (known as Clubhouses), and through Purchase of Service (POS) contracted providers.

You must meet the eligibility criteria for the services you participate in. Periodic review of your participation may result in a change in the services you receive.

Listed below is a summary of the types of AMHD services that are provided, by County.

Included in this section is a list of AMHD services by County.

For a description of each services, please refer to the AMHD website or ask your case manager for more information.

Statewide 24/7 telephonic behavioral health support for substance use disorder (SUD), mental health, and crisis intervention services.



Hawaii CARES

832-3100 on Oahu

1 (800) 753-6879 from the Neighbor Islands

Statewide 24/7 National Suicide Prevention Lifeline



1 (800) 273-TALK (8255)

What Services Does AMHD Provide?

Kauai County

- Case management
- Clubhouse
- Crisis Mobile Outreach and Crisis Support Management
- Forensic Services Coordination
- Hawaii Certified Peer Specialists
- Homeless Outreach
- Housing (Semi-Independent, 8-16hr, 24hr group home)
- Inpatient hospitalization
- Representative payee
- Peer Coach
- Post-booking jail diversion
- Shelter Plus Care for the homeless
- Supported employment
- Supported housing

Maui County

- Case Management
- Clubhouse
- Crisis Mobile Outreach and Crisis Support Management
- Day Treatment
- Forensic Services Coordination
- Hawaii Certified Peer Specialists
- Homeless Outreach
- Housing (Semi-Independent, 8-16hr, 24hr group home)
- Inpatient hospitalization
- Licensed Crisis Residential Services
- Peer Coach
- Post-booking jail diversion

Maui County (continued)

- Representative payee
- Shelter Plus Care for the homeless
- Specialized Residential Services Program
- Supported employment
- Supported housing
- Transitional housing

County of Hawaii

- Case Management
- Clubhouse
- Crisis Mobile Outreach and Crisis Support Management
- Forensic Services Coordination
- Hawaii Certified Peer Specialists
- Homeless Outreach
- Housing (Semi-Independent, 8-16hr, 24hr group home)
- Inpatient hospitalization
- Licensed Crisis Residential Services
- Peer Coach
- Post-booking jail diversion
- Representative payee
- Shelter Plus Care for the homeless
- Supported employment
- Supported housing
- Transitional housing

What Services Does AMHD Provide?

Honolulu City and County

- Case Management
- Clubhouse
- Crisis Mobile Outreach and Crisis Support Management
- Day Treatment
- Expanded Adult Residential Care Home
- Forensic Services Coordination
- Hawaii Certified Peer Specialists
- Inpatient hospitalization
- Intensive Case Management Plus - High Utilizer
- Intensive Case Management Plus - Homeless
- Homeless Outreach
- Housing (Semi-Independent, 8-16hr, 24hr group home)
- Licensed Crisis Residential Services
- Peer Coach
- Pre-booking jail diversion
- Representative payee
- Shelter Plus Care for the homeless
- Specialized Residential Treatment Program
- Supported employment
- Supported housing
- Therapeutic Living Program
- Transitional housing

Care outside of Hawaii and the U.S. is not covered by the AMHD. If you need a service not provided by the AMHD, please contact your case manager who, as appropriate, can work with your health insurer and others, to arrange for services you need.

General Eligibility for AMHD Services

Individuals who receive services from the AMHD are adults:

- At least 18 years old and live in Hawaii.
- Diagnosed with a serious mental illness (SMI).
- Court-ordered to treatment under Conditional Release, Released on Conditions, Mental Health Court, or Jail Diversion.
- Uninsured or underinsured.
- Who are victims of natural disasters and terrorism.
- In a state of crisis and need help for a short time.

There are four (4) ways to access AMHD services.

1. **Hawaii CARES.** To speak with a professionally trained local behavioral health specialist, please call 832-3100 on Oahu or 1 (800) 753-6879 from Neighbor Islands. Telephonic support, including crisis assistance, is available 24 hours per day, 7 days a week.
2. **Court order.** If the court orders you to receive services from the AMHD, services are provided by an inpatient (hospital) or outpatient (community-based) provider.
3. **Eligibility appointment by phone.** For questions about eligibility for AMHD services, please call the AMHD Assessment unit at 643-2643 during regular state business hours.
4. **Eligibility appointment in person.** Walk-in eligibility appointments may be available through the Community Mental Health Center (CMHC) Treatment Services Sections (TSS) or clinics during regular state business hours. A list of CMHC TSS and clinic locations are provided in Appendix B of this Recovery Guide.

Determining Eligibility for AMHD Services

In general, the process for determining eligibility for AMHD services includes the following steps:

1. Confirm and attend your eligibility appointment.
2. During the appointment, an Assessor will ask questions about your mental health history, family information, medical and psychiatric history, and other personal questions.
3. If eligible for AMHD services, a case manager may be assigned to assist you with coordinating your services.

Not Eligible for AMHD Services

If you are not eligible for AMHD services, you will be provided with instructions, including information about filing an appeal. You will also be provided with referrals, as applicable, to other agencies that may be able to assist you.

If you disagree with the eligibility determination, you have the right to submit an appeal letter to the AMHD. When received, the AMHD will review information from your eligibility appointment and will take into consideration any additional information you provide with your appeal letter.

For assistance with writing an appeal letter, please contact the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

Moving to Another Island within Hawaii

If you plan to move to another island within the State of Hawaii, please notify your case manager and your health insurer as soon as possible. Your case manager needs time to coordinate and transfer your services to the island you are moving to.

Moving Away from Hawaii

If you plan to move out of the State of Hawaii, please notify your case manager as far in advance as possible so they may assist you with coordinating and transferring your services ahead of your planned move date.

Moving Tips

- Sometimes having paper copies of your health records is helpful so you can share the information with your new providers.
- Don't forget to pack enough medications until you can see your new doctor for a new prescription.
- **Probation Officer and Court Notification**
If you have a probation officer or if you have a court obligation, you must notify them before you move.
- **New Mailing Address**
To continue to receive postal mail after you move, you need to fill out the U.S. Postal Service address change form.

When Can I Change My AMHD Services?

Sometimes, it is necessary to change your services.

In general, changes happen if you need:

- Fewer services;
- More services;
- Different types/level of services; or
- Different providers.

To request changes to the services you receive, please ask your case manager. You may want to discuss changes with your treatment team before you make them.

The AMHD may consult with your treatment team and may recommend changes to your services, as appropriate.

Before changes take place, your case manager will notify you.

If you disagree with these changes, you have the right to submit an appeal letter. When received, the AMHD will review your record and will take into consideration any additional information you provide with your appeal letter.

For assistance with writing an appeal letter, please contact the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

Please let your case manager know which AMHD services you want to stop.

To the extent allowed by law, you have the right to refuse services and medications. If you refuse services and/or medications, including alternative course(s) of treatment, your refusal will be documented, and your case manager and doctor will be informed.

You are responsible for your actions if you refuse services or medications and if you do not follow your providers' advice.

Additionally, AMHD services may stop if you:

- Move outside the State of Hawaii;
- Are in prison or jail; or
- No longer meet eligibility criteria.

What Does My Case Manager Do for Me?

The AMHD may assign you a case manager (CM). The CM is responsible for assisting you by coordinating services, health insurance, and other supports.

Your CM will help you to locate services you need. For example, as appropriate, they will help link you to a psychiatrist, primary care physician (PCP), psychologist, forensic coordinator, housing, psychosocial rehabilitation and day program activities, peer support, and more!

Sharing personal information with a new CM is sometimes uncomfortable. You are encouraged to get to know your CM by having a conversation with them about things that are important to you. You may want to let them know your preferred name, what days and times are best to meet you, and what transportation or communication challenges you have. If you have a cell phone or electronic device that you can use to meet your CM and treatment team virtually, let your CM know.

You may want to ask your CM questions to find out what their preference is for working with you, how often they plan to see you, and paperwork they ask you to review and sign.

If you are in the hospital, your CM can work with the hospital staff on a discharge plan. The discharge plan may include recommended services and appointments you will need after you leave the hospital.

A grievance is any statement about something that you believe is wrong. A complaint is also known as a grievance.

The grievance is based on your belief. It includes information about the issue, in your own words, and what you feel should be done to address the issue.

Some examples of grievances include:

- Not being satisfied with services you are receiving;
- Wanting services you are receiving to be changed;
- Being treated unfairly; and
- Having your rights disrespected.

The grievance process is available to all consumers receiving AMHD services. Grievances may be submitted against the:

- AMHD;
- Hawaii State Hospital;
- Community Mental Health Center (CMHC) Treatment Services Sections (TSS), clinics and Rehabilitation Services Sections (known as Clubhouse); and
- Any Purchase of Service (POS) provider that AMHD contracts with for services.

Grievances should be submitted without fear of facing retaliation. If you think someone may retaliate (get back at you) for filing a grievance, please call the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

When and How Do I Submit a Grievance?

You may submit a grievance when you believe something is wrong, especially unfair treatment, when you believe your rights were not respected, or you are not satisfied with service(s) you are receiving.

For information or to receive help with submitting a grievance, you may speak to the Consumer Rights Advisor at the Community Mental Health Center (CMHC) Treatment Services Section (TSS) or clinic, or at the provider office where you receive services.

You may also call the AMHD Consumer Advisor at (808) 586-4685 during regular state business hours.

Grievances submitted to the AMHD Consumer Advisor generally includes the following information:

- Your name, mailing address and phone number;
- Your date of birth;
- A summary of the complaint or dissatisfaction;
- A statement that explains what you want to have done to address the complaint or dissatisfaction; and
- Any documentation related to the grievance that you want to attach to your grievance letter.

You may submit your grievance paperwork in writing to:

Hawaii State Department of Health
Adult Mental Health Division
Attn: Consumer Advisor, Rm. 256
P.O. Box 3378
Honolulu, HI 96801

The AMHD Consumer Advisor will receive your grievance and will assist you with addressing your complaint or dissatisfaction. If necessary, an investigation will be conducted.

You will be informed about what was done to address your complaint or dissatisfaction.

It is reasonable to expect that your grievance will be addressed within thirty (30) calendar days after it is submitted; however:

- If additional time is needed at any point in the grievance process, you may ask the AMHD for an extension of fourteen (14) calendar days.
- The AMHD may request an extension of fourteen (14) calendar days if more time is needed to review, process, and address your grievance. If the AMHD needs an extension of fourteen (14) calendar days, a letter will be mailed to you explaining the reason additional time is needed.

If you have questions or want to check on the status your grievance, please call the AMHD Consumer Advisor at (808) 586-4685 during regular state business hours.

What is an Appeal?

An appeal is a disagreement or objection about a decision that was made that affects your AMHD services.

Some reasons appeals are submitted include:

- An AMHD authorization was reduced or stopped, but you believe you should continue receiving the service.
- An AMHD authorization was denied, but you believe you are eligible for the service.

NOTE: Your services will continue throughout the appeal process and until a final decision has been made.

There are two types of appeals that you may submit:

- Standard Appeal
- Expedited Appeal

Standard Appeals

In general, the time frame for submitting a standard appeal is thirty (30) calendar days. For example, you have thirty (30) calendar days after you receive notification that an AMHD authorization for a service was reduced, stopped or denied to submit an appeal letter.

Expedited Appeals

You may submit an expedited appeal if you or your doctor believes that waiting thirty (30) calendar days to receive a response will result in serious and/or additional health problems. An example would be a situation that puts you or others at risk for serious danger.

Label your appeal letter with the words "Expedited Initial Appeal" so it is clear a review is needed as soon as possible.

The AMHD Office of Consumer Affairs and a doctor who was not part of the original decision to reduce, stop or deny the service will review your initial expedited appeal within two (2) state business days.

You and your doctor will receive a telephone call from the AMHD Office of Consumer Affairs to inform you of the decision. A decision letter will be mailed to you.

When and How Do I Submit an Initial Appeal?

You may file your initial appeal by telephone, but a written initial appeal letter must follow.

Initial appeals submitted to the AMHD Office of Consumer Affairs generally include the following information:

- Your name, mailing address and phone number;
- Your date of birth;
- A statement identifying the service that was reduced, stopped, or denied; and
- Any documentation related to the initial appeal that you want to attach to the initial appeal letter.

If you would like assistance with writing the initial appeal letter, please contact the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours. A copy of the draft initial appeal letter will be mailed to you to review and sign.

You may also ask someone else to assist you with writing your initial appeal letter including your case manager, doctor, legal guardian, or someone you gave written permission to.

You may submit your initial appeal paperwork in writing to:

Hawaii State Department of Health
Adult Mental Health Division
Attn: Office of Consumer Affairs, Rm. 256
P.O. Box 3378
Honolulu, HI 96801

The AMHD Office of Consumer Affairs will receive your initial appeal and will assist you with addressing your objection. You will be informed about what was done to address your objection.

It is reasonable to expect that your initial appeal will be addressed within thirty (30) calendar days after it is submitted; however,

- If additional time is needed at any point in the initial appeal process, you may ask the AMHD for an extension of fourteen (14) calendar days.
- The AMHD may request an extension of fourteen (14) calendar days if more time is needed to review, process, and address your initial appeal. If the AMHD needs an extension of fourteen (14) calendar days, a letter will be mailed to you explaining the reason additional time is needed.

When the initial appeal has been addressed, an initial appeal decision letter will be mailed to you explaining what was done to address your objection.

If you have questions or want to check on the status your initial appeal, please call the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

What is a Second Level Appeal?

A second level appeal is submitted if you are not satisfied with the result of your initial appeal. You have thirty (30) days from the date of the initial appeal decision letter to submit a second level appeal in writing.

Label your second level appeal letter with the words "Second Level Appeal" or, if you need it to be expedited, label your second level appeal with the words "Expedited Second Level Appeal" so it is clear a review is needed as soon as possible.

The AMHD Administrator and a doctor who was not part of the original decision to reduce, stop or deny the service will review your second level expedited appeal within two (2) state business days.

You and your doctor will receive a telephone call from the AMHD Administrator to inform you of the decision. A second level appeal decision letter will be mailed to you.

Second level appeals submitted to the AMHD Administrator generally include the following information:

- Your name, mailing address and phone number;
- Your date of birth;
- A statement identifying the service that was reduced, stopped, or denied; and
- Any additional documentation not included in the initial appeal that you want to attach to the second level appeal letter.

If you would like assistance with writing the second level appeal letter, please contact the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours. A copy of the draft second level appeal letter will be mailed to you to review and sign.

You may also ask someone else to assist you with writing your second level appeal letter including your case manager, doctor, legal guardian, or someone you gave written permission to.

You may submit your second level appeal paperwork in writing to:

Hawaii State Department of Health
Adult Mental Health Division
Attn: AMHD Administrator, Rm. 256
P.O. Box 3378
Honolulu, HI 96801

What Happens After I Submit My Second Level Appeal?

The AMHD Administrator will receive your second level appeal and will assist you with addressing your objection.

You will be informed about what was done to address your objection.

It is reasonable to expect that your second level appeal will be addressed within thirty (30) calendar days after it is submitted; however,

- If additional time is needed at any point in the second level appeal process, you may ask the AMHD for an extension of fourteen (14) calendar days.
- The AMHD may request an extension of fourteen (14) calendar days if more time is needed to review, process, and address your second level appeal. If the AMHD needs an extension of fourteen (14) calendar days, a letter will be mailed to you explaining the reason additional time is needed.

When the second level appeal has been addressed, a second level appeal decision letter will be mailed to you explaining what was done to address your objection.

If you have questions or want to check on the status your second level appeal, please call the AMHD Administrator at (808) 586-4770 during regular state business hours.

If you submitted both an initial and a second level appeal and you are not satisfied with the decision, you may appeal using the Hawaii State Department of Health's Administrative Appeal process.

For more information about the Administrative Appeal process, please contact the Office of the Director of Health at (808) 586-4410 during regular state business hours.

You may also contact the Hawaii State Department of Health's Affirmative Action Office at (808) 586-4616 during regular state business hours.

What is Fraud?

Some examples of fraud include:

- Giving your health insurance card to someone else so they can get health services;
- Giving or selling any medications or supplies to someone else that were prescribed by your doctor for you; and
- Providers billing the AMHD for services that were not provided to you.

Any type of fraud by AMHD consumers, staff and providers is not allowed and will be reported to the proper authorities.

If you think a consumer or provider is committing fraud, please call the AMHD Resource Management Office at (808) 586-4687 during regular state business hours.

If you think AMHD staff is committing fraud, please call the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

Developing a Recovery Plan (RP) is an essential part of the recovery process.

You should develop an initial RP with your case manager when you begin case management services and update your RP every six (6) months thereafter.

The RP you create should, at minimum, include your basic health information, case manager's contact information, and the following sections, written in your own words:

- Identify your **STRENGTHS**
Areas in your life you feel you do an excellent job with.
- Identify your **GOALS**
Small steps (short-term goals) you agree to work on to achieve larger goals (long-term goals).

Goals should be specific to your needs, identify who will assist you with each small step, and what the time frame is for each goal.

You should be allowed to review your RP, sign and date that you reviewed it, and receive a printed copy for your reference. If you have a legal guardian, that person will sign and date on your behalf.

After you or your legal guardian have signed and dated your RP, your case manager and members of your treatment team should also sign and date.

Examples of areas in your life that you may want to include in your RP as strengths or goals include:

- Basic needs, such as food, clothing and housing.
- Education.
- Entitlements, benefits, financial planning, and budgeting.
- Employment.
- Faith-based supports.
- Family supports.
- Justice involvement, court orders, and probation.
- Meaningful daily activities/routines.
- Medication adherence.
- Obtaining personal documents such as a current picture identification card, birth certificate, health insurance card, etc.
- Outpatient treatment services.
- Pre-crisis and crisis management.
- Risk for and history of suicidal and homicidal ideation.
- Risk of re-arrest, re-incarceration, and re-hospitalization.
- Social supports (not including your providers).
- Substance use, including alcohol and tobacco use.
- Volunteer and community service opportunities.

A Crisis Plan is an essential part of the recovery process.

You should develop an initial Crisis Plan with your case manager when you start receiving case management services and update it every six (6) months thereafter.

The Crisis Plan you create should, at minimum, include the following sections, written in your own words:

- **Warning signs and triggers**
Stressful events, challenges with particular activities, or when you are at risk for not behaving appropriately.
- **Coping skills**
Strategies you agree to use when you are feeling discomfort such as relaxation techniques, rest, music, meditation, reading, writing, or talking to someone.
- **Emergency contacts**
People who will support you when you call them.
Family, friends, sponsor, mentor, etc.

You should be allowed to review your Crisis Plan, sign and date that you reviewed it, and receive a printed copy for your reference. If you have a legal guardian, that person will sign and date on your behalf.

After you or your legal guardian have signed and dated your Crisis Plan, your case manager and members of your treatment team should also sign and date.

It may be a good idea for you to:

- Share your Crisis Plan with your emergency contacts so they know how you would like them to help you when you contact them.
- Keep a copy of your Crisis Plan in your wallet and another copy in a place you have regular access to so you may review the information when you needed it.
- Inform your case manager about any individuals you do not want to have involved with your care during a crisis. These individuals may not understand your needs or may be hurtful to you during a crisis.

A mental health crisis does not happen the same way for every individual. Your level of support, use of coping skills, and your mental and physical health status can affect how you address the situation.

Examples of behaviors that may indicate you are experiencing a mental health crisis include:

- Feeling out of control;
- Posing a threat to the safety of other individuals;
- Seeing, hearing, and behaving in a manner that can be dangerous and that may result in physical injury; and
- Talking about suicide.

Early warning signs to watch for include:

- Changes in sleeping, eating or social activities;
- Increased feelings of isolation;
- Feeling agitated, increased hostility or suspicion;
- Not taking medications as prescribed;
- Overspending; and
- Racing thoughts or recurring thoughts.

What do I do in a mental health crisis or if I recognize early warning signs that signal a possible problem?

- Call your doctor, case manager, or emergency contacts.
- Use the coping skills you listed on your Crisis Plan.
- Call Hawaii CARES to speak to a professionally trained local behavioral health specialist at no cost to you. Call 832-3100 on Oahu or 1 (800) 753-6879 toll free from the Neighbor Islands 24 hours a day, 7 days a week.

An emergency is a sudden and unexpected problem that threatens your life. Some kinds of problems that require emergency medical care include:

- Convulsions or seizures;
- Drug overdose;
- Injuries from accidents that need medical attention right away;
- Loss of consciousness;
- Poisoning;
- Severe allergic reactions; and
- Severe breathing problems.

What do I need to do in a medical emergency?

- Call 9-1-1 or go to the nearest emergency room.
- If you have an emergency when traveling out of state, call 9-1-1 or go to the nearest emergency room.
- You do not need to ask for prior approval to get emergency medical care.

Statewide or Islandwide Disaster Preparedness

According to the Ready.gov website, every individual should take steps to be informed and prepared for emergencies.

In Hawaii, common hazards include, but are not limited to:

- Earthquakes and tsunamis;
- Flash floods, heavy rain, landslides and debris flow;
- Hurricanes and strong and gusty winds; and
- Volcanic eruptions.

Local or Personal Disaster Preparedness

Personal emergency situations include, but are not limited to, events that occur where you live, work or regularly visit.

Whether the emergency is natural or man-made, your safety is the most important. Recognize when you are in danger and quickly identify where you can go to be safe.

Be Prepared and Stay Informed

Consider removing yourself from the location that is unsafe. Contact your case manager or emergency contacts for help.

Tips for being prepared and staying informed:

- Keep your personal documents and medications where you can easily access them.
- Stay alert with information prior to, during and after a disaster through your television, radio or Internet.
- Seek alternative shelter and support, if necessary. Disaster relief organizations may open community shelters and offer support for a limited time.

Tips for being prepared and staying informed (continued):

- Be knowledgeable about the disaster preparedness and evacuation policies for your current residence.

If you live in a home where staff are regularly present, you may want to ask about emergency evacuation instructions and other policies about disaster preparedness. If there is a map or other instructions, take time to review the information.

If you are a renter and have a landlord or property management company, inquire about their policies so you are aware of them.

- Remain calm, as best you can.
 - Be aware of your environment.
 - Use your coping skills.
 - Ask for help.

An Advanced Health Care Directive (AHCD), also known as an Advanced Directive or living will, is a document with information about your decisions for:

- The type of health treatment you want or don't want;
- Your wishes for comfort care; and
- The individual you want to make decisions for you when you are unable to do so (your "Agent").

The Uniform Health Care Decisions Act of 1999 states the AHCD form includes two (2) parts:

- Part I - Individual instructions for health care
- Part II - Health Care Power of Attorney (your "Agent")

You may obtain a copy of the AHCD form from the Kokuu Mau website: <https://kokuuamau.org/advance-directives>

For help with completing the AHCD forms, contact:

- Kauai
Seniors Law Program (808) 246-0573
- Maui, Molokai, Lanai
Legal Aid Society (Wailuku) (808) 242-0724
Legal Aid Society (Kaunakakai) (808) 329-8331
Legal Aid Society (Lanai) (808) 565-6089
- Oahu
Hawaii Disability Rights Center (808) 949-2922
- Hawaii Island
Legal Aid Society (Hilo) (808) 934-0678
Legal Aid Society (Kona) (808) 329-8331

A Psychiatric Advanced Directive (PAD), also known as an Advanced Mental Health Care Directive (AMHCD), is a legal document about your future mental health treatment.

Hawaii Revised Statutes (HRS), Chapter 327G, states the PAD (or AMHCD) includes four (4) parts:

- Part I - List options for mental health care/treatment
- Part II - States your Power of Attorney (your "Agent")
- Part III - Specifies your preferences for mental health care/treatment including when to start, hold, and stop medications and treatment.
- Part IV - Signatures with dates to activate your PAD.

You may obtain a copy of the PAD form from the National Resource Center on Psychiatric Advance Directives website:
<https://www.nrc-pad.org/images/stories/PDFs/hawaiiipadform.pdf>

More information about PADs is available on the Substance Abuse and Mental Health Services Administration (SAMHSA) website:
https://www.samhsa.gov/sites/default/files/a_practical_guide_to_psychiatric_advance_directives.pdf

Hawaii State Legislature, HRS Chapter 327G webpage:
https://www.capitol.hawaii.gov/hrscurrent/Vol06_Ch0321-0344/HRS0327G/HRS_0327G-.htm

Physician Orders for Life-Sustaining Treatment (POLST) is a legal medical order giving you more control over your end-of-life care by identifying the types of treatment you wish to receive and communicating your wishes to all providers, including first responders and emergency medical services (EMS) personnel.

Hawaii law, Act 186, Session 2009, and Act 154, Session 2014, states the POLST form should be printed double-sided on lime green paper and includes four (4) sections:

- Section A - Cardiopulmonary resuscitation (CPR)
- Section B - Medical interventions
- Section C - Artificially administered nutrition
- Section D - Medical condition and signatures

You may obtain a copy of the POLST form from the Kokua Mau website: <https://kokuamau.org/for-professionals/polst/>

To complete the POLST form, you need to meet with a physician, Advanced Practice Registered Nurse (APRN), or another health care provider who must explain the form to you or to your legal guardian and explain the difference between the POLST form and the AHCD form.

While any physician, including your psychiatrist, APRN or other health care provider may help you or your legal guardian to fill out the POLST form, it must be signed by the physician or APRN with whom you have a professional relationship.

A Hawaii Certified Peer Specialist (HCPS) is a peer who successfully completed the AMHD HCPS training and certification course.

HCPSs promote self-determination, personal responsibility, and community integration for consumers of mental health services. HCPSs instill hope in others by serving as role models and champions of recovery.

A HCPS uses his or her own story of recovery from mental illness to demonstrate that hope of recovery is open to us all, regardless of circumstances. By building on our strengths and educating ourselves about how to live fuller lives, those of us with mental health challenges can and do recover and lead successful lives of our choosing.

A HCPS is trained to help their peers identify their own strengths and their own tools for living successfully. A HCPS wants to assist their peers to reach for goals of their choosing and lead a life full of meaning and hope.

You may obtain a copy of the application form from the AMHD website:

<https://health.hawaii.gov/amhd/consumer/hcps> or by calling the AMHD Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

The AMHD monitors its service providers, including the Community Mental Health Center (CMHC) Treatment Service Sections (TSS) and clinics, Rehabilitation Service Sections (known as Clubhouses), and Purchase of Service (POS) contracted providers.

The AMHD wants to hear from you about your experience with your service providers.

Annually, the AMHD surveys a sample of consumers who received services in the past year. The purpose of surveying consumers is to receive feedback to improve services.

It takes approximately ten (10) to twenty (20) minutes to complete the entire survey. Completing the survey is optional. If you choose to not complete the survey, services will be provided to you without interruption.

The AMHD combines all consumer survey responses into a report without identifying consumers individually. When the report is completed, a copy will be made available on the AMHD website.

If you want more information about the survey, please contact the Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

The Quality of Life Interview (QOLI) is a tool used by the AMHD to collect data about consumers who receive services through its service providers, including the Community Mental Health Center (CMHC) Treatment Service Sections (TSS) and clinics, Rehabilitation Service Sections (known as Clubhouses), and Purchase of Service (POS) contracted providers.

All CMHC TSS and clinics, and POS contracted providers are required to offer the QOLI to all consumers who receive AMHD case management services.

The QOLI is usually completed:

- When you begin case management (admission),
- Every six (6) months after admission, and
- When you are discharged from case management.

It takes approximately five (5) to ten (10) minutes to complete the entire QOLI. Completing the survey is optional. If you choose to not complete the survey, services will be provided to you without interruption.

The AMHD combines all QOLI responses into a report without identifying consumers individually and submits it to agencies who provide funding for your services.

If you want more information about the QOLI, please contact the Office of Consumer Affairs at (808) 586-4688 during regular state business hours.

Below is contact information for the Adult Mental Health Division (AMHD) administration.

Physical Address (main office):

Hawaii State Department of Health
Adult Mental Health Division
1250 Punchbowl St., Rm. 256
Honolulu, HI 96813

Mailing Address

Hawaii State Department of Health
Adult Mental Health Division, Rm. 256
P.O. Box 3378
Honolulu, HI 96801

Main Office Phone: (808) 586-4686

Main Office Fax: (808) 586-4745

AMHD Administrator

Phone: (808) 586-4770

AMHD Office of Consumer Affairs

Phone: (808) 586-4688

AMHD Consumer Advisor

Phone: (808) 586-4685

AMHD Communications

Phone: (808) 586-8272

Below is contact information for the Community Mental Health Center (CMHC) Treatment Services Sections (TSS) and clinics.

Kauai County

Kauai CMHC Branch
4370 Kukui Grove St., Ste. 3-211
Lihue, HI 96766
Phone: (808) 274-3190

Maui County

Maui CMHC
121 Mahalani St.
Wailuku, HI 96793
Phone: (808) 984-2150

Molokai Service Section
65 Makaena St., #107
Kaunakakai, HI 96748
Phone: (808) 553-7889

Lanai Service Section
730 Lanai Ave., #113 and #115
Lanai City, HI 96763
Phone: (808) 565-6189

Below is contact information for the Community Mental Health Center (CMHC) Treatment Services Sections (TSS) and clinics (continued).

County of Hawaii (East Hawaii)

East Hawaii Mental Health Clinic Section

37 Kekaulike St.

Hilo, HI 96720

Phone: (808) 974-4300

Puna Clinic

15-2866 Pahoia Village Rd.

Pahoia, HI 96778

Phone: (808) 965-2240

Honokaa Clinic

45-3380 Mamane St.

Honokaa, HI 96727

Phone: (808) 775-8835

Kamuela (Waimea) Clinic

67-5189 Kamamalu St.

Kamuela, HI 96743

Phone: (808) 885-1220

Below is contact information for the Community Mental Health Center (CMHC) Treatment Services Sections (TSS) and clinics (continued).

County of Hawaii (West Hawaii)

West Hawaii Mental Health Clinic Section

79-1020 Haukapila St.

Kealahou, HI 96750

Phone: (808) 322-4818

Kau Clinic

219-B Kaalaiki Rd.

Naalehu, HI 96772

Phone: (808) 939-2406

Honolulu City and County

East Honolulu TSS

3627 Kilauea Ave., Rm. 408

Honolulu, HI 96816

Phone: (808) 733-9260

West Honolulu TSS

1700 Lanakila Ave.

Honolulu, HI 96817

Phone: (808) 832-5800

Windward Oahu TSS

45-691 Keaahala Rd.

Kaneohe, HI 96744

Phone: (808) 233-3775

Below is contact information for the Community Mental Health Center (CMHC) Treatment Services Sections (TSS) and clinics (continued).

Honolulu City and County (continued)

Central-Leeward Oahu TSS

860 Fourth St.

Pearl City, HI 96782

Phone: (808) 453-5953

Wahiawa Clinic

910 California Ave.

Wahiawa, HI 96786

Phone: (808) 621-8425

Makaha Clinic

84-1170 Farrington Hwy.

Waianae, HI 96792

Phone: (808) 695-7924

Appendix C: Clubhouse Contact Information

Below is contact information for the Community Mental Health Center (CMHC) Rehabilitation Services Sections (known as Clubhouses).

Kauai County

Friendship House Clubhouse
4-1751 Kuhio Hwy.
Kapaa, HI 96746
Phone: (808) 821-4480

Maui County

Hale O Lanakila Clubhouse
1977 Main St.
Wailuku, HI 96793
Phone: (808) 984-2156

Hawaii County

Hale Oluea Clubhouse
1045 B Kilauea Ave.
Hilo, HI 96720
Phone: (808) 974-4320

The Kona Paradise Clubhouse
77-6435 Kuakini Hwy.
Kailua-Kona, HI 96740
Phone: (808) 327-9530

Below is contact information for the Community Mental Health Center (CMHC) Rehabilitation Services Sections (known as Clubhouses) (continued).

City and County of Honolulu

Diamond Head Clubhouse
3627 Kilauea Ave., Rm. 410
Honolulu, HI 96816
Phone: (808) 733-9188

Hale O Honolulu Clubhouse
1700 Lanakila Ave.
Honolulu, HI 96817
Phone: (808) 984-2156

Koolau Clubhouse
46-016 Alaloa St.
Kaneohe, HI 96744
Phone: (808) 233-3778

Waipahu Aloha Clubhouse
94-091 Waipahu Point Access Rd.
Waipahu, HI 96797
Phone: (808) 675-0093

Kauhale Lahilahi Clubhouse
84-1170 Farrington Hwy.
Waianae, HI 96792
Phone: (808) 695-7920

This image shows a full page of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

This image shows a single page of white paper with horizontal blue lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

This image shows a full page of blank handwriting practice paper. It features approximately 28 evenly spaced horizontal blue lines across the entire page, providing a guide for letter height and placement. The background is plain white, and there are no margins, text, or other markings present.

This image shows a full page of blank, lined paper. It features approximately 28 horizontal blue or grey lines spaced evenly apart, typical of notebook paper. The lines extend across the entire width of the page, leaving small margins at the top and bottom. There are no vertical lines, text, or other markings on the page.

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