



News

December 2004

Newsletter of the Hawai'i Dept. of Health's Adult Mental Health Division

AMHD Mission: We provide a comprehensive, integrated mental health system supporting the recovery of adults with severe mental illness.

volume 4, issue 12

Judge Ezra dismisses fed case against Hawaii State Hospital

Grants 18-month extension for Community Plan tasks

On Dec. 10 U.S. District Judge David Ezra dismissed a 13-year-long federal civil rights case against Hawai'i and the Hawai'i State Hospital saying, "I have every reason to believe this will be the end of the problems as we know it at the state hospital."

Judge Ezra accepted recommendations from Federal Magistrate Judge Kevin Chang, court-appointed Special Master, finding the hospital in substantial compliance with court requirements. Judge Ezra also granted an extension for compliance by the AMHD with its own Community Plan for Mental Health Services. The deadline for Community Plan compliance was extended from Jan. 23, 2005 to June 30, 2006.

"How we treat the least among us is a measure of who we are as a people," said Judge Ezra, as he described the case's progress to improve conditions for patients with mental illness at the hospital.



David Ezra, U.S. District Court judge and Kris McLoughlin, Special Monitor, toured the Hawai'i State Hospital campus Dec. 9, the day before Judge Ezra dismissed the 13-year case against the hospital. Behind are Dr. Chiyome Fukino, director of health and Mark Bennett, attorney general.

He praised the state officials and hospital staff who "worked together as a team" to make hospital improvements. "There are so many wonderful staff out there," said Judge Ezra, "we'd have to be

here all day if I mentioned them all."

Judge Ezra, federal prosecuting attorneys and state attorneys general all empha-

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Coming March 29-31: 2nd best practices conference

The AMHD's second annual best practices conference, "Tools of Empowerment! Illness Management and Self-Directed Recovery," comes to Honolulu's Hawai'i Convention Center March 29-31, 2005. The convention center space accommodates up to 400 people, twice the number of 2004's conference.

Nurses, psychiatrists, psychologists,

social workers, consumers of mental health services and family members, and other mental health service providers are all invited.

The Hawai'i Dept. of Health's Adult Mental Health Division and the Hawai'i Consortium for Continuing Medical

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Hospital: History of U.S. vs. Hawai'i State Hospital

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sized there was no comparison between the hospital before the lawsuit started and the hospital today.

"I walked through the (hospital) hallways (Dec. 9) that had once reeked with an odor that was incredible," said Judge Ezra. "Now they're spotless." The judge took a one-hour tour across the hospital campus Dec. 9, visiting patient classes in session, meeting staff and patients, seeing patient rooms and watching exercise activities in the gymnasium.

"Staff are dedicated and proud to go to work," said Judge Ezra. "If I was working there I'd be proud too."

History of the lawsuit

In 1989 the federal Dept. of Justice (DOJ) began investigating Hawaii State Hospital based on reports of violations of the Civil Rights of Institutionalized Persons Act (CRIPA).

CRIPA was passed in 1980 to safeguard the rights of people confined in public institutions. It authorized the U.S. Attorney General to investigate unlawful conditions in public residential facilities and to fix patterns or practices leading to substandard conditions.

United States vs. Hawai'i State Hospital

The 1989 DOJ investigation found substandard patient care, excessive medication, routine use of restraints, little active treatment, and a leaky and deteriorating physical plant.

Investigators found patients without necessities such as soap, toothbrushes, toothpaste and towels.

Hospital staffing levels weren't adequate to provide effective care. Some patients were seen lying unattended on concrete floors. One DOJ attorney reported seeing a patient eating paint chips and another lying in his own urine.

In March 1991 the DOJ filed a CRIPA civil rights lawsuit against Hawai'i State Hospital.

Settlement Agreement

In September 1991, the DOJ and the

Veteran staff and patients see transformation of HSH from public disgrace to public pride

Veteran staff and patients at the Hawai'i State Hospital (HSH) have witnessed the slow, sometimes frustrating progress to transform the hospital from a public disgrace to a public pride.

Once a warehouse where patients were stabilized on meds and then released, the HSH now offers therapy, life skills classes and support to patients.

"We were like custodians," said 22-year veteran Adele Johnsen, a hospital psychiatric technician, "just housing them. They were calling (HSH) the revolving door — stabilize them on meds and send them out."

But today it's different. "Now our patients have quality care," said Johnsen. "The one thing I love the most is when we get the patients out in the community — because that means we did our job."

Fellow psych tech Richard Kawelo, with 24 years on the job, backs her up. "Living conditions are a whole lot better (now)" said Kawelo. "We were overcrowded before. Staffing ratios have improved (since then)."

But it wasn't an easy transition. "The process was long and slow and frustrating at times," said Kawelo.

Yet staff agree it's been worth the struggle. "When I started, a lot of seclu-

sions and restraints were used," said Mack Kalahiki, a 16-year veteran and former psych tech who is now acute mall coordinator. "Now that's down to nil. I became less and less the 'enforcer' — I became more and more the provider, talking story with patients to figure out what we can do to change their behavior."

Patients also agree. "The hospital has come a long way," said Randall Saito, a HSH patient since 1981. "There's nothing that would make me more proud than to be part of a regime that makes this the best mental health hospital in the Pacific."

LC, a patient for six years, has also found help in the "new" HSH, including therapy, classes in math and anger management, and opportunities to share his guitar playing and singing ability with audiences both inside and outside the hospital.

"We're not stuck in a unit watching a TV, and after the meds, the TV's watching us," said LC. He credited chaplain Dave Edwards, adult literacy classes and the mall program with helping him.

Another patient, Karim, said classes in symptom management, consumer economics and computers have been helpful to him. "You can actually learn something if you apply yourself," said Karim, a patient at HSH for 10 years.

Hawai'i Dept. of Health (DOH) entered a Settlement Agreement specifying what improvements were needed.

Progress was so slow that in January 1995 Judge Ezra held HSH in contempt of his 1991 Order.

In June 1996 and February 1998 Judge Ezra added additional Stipulations and Orders spelling out what still needed to be done.

Special Monitors and Special Master

In December 1999, when compliance continued to be inadequate, Judge Ezra appointed Special Monitor Leland Chang to oversee hospital progress.

In May 2001 Judge Ezra appointed

Magistrate Judge Kevin Chang to be the Special Master, to assess and review progress, determine what changes were needed, and to devise methods to make the changes.

A Remedial Plan for Compliance was approved by Judge Ezra, specifying in greater detail what HSH had to do to improve hospital conditions.

Judge Chang appointed Kris McLoughlin the new Special Monitor and also appointed an evaluation team of mental health experts in psychiatry, psychology, nursing and hospital administration to monitor progress at HSH during

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Conference: Featuring films on recovery and memorial cemetery

From Page One

Education are joint sponsors.

Early bird registration for the full conference is \$110 before Jan. 31, 2005. The cost jumps to \$130 for registration after Jan. 31. It's also possible to register for individual days or combinations of days. Continuing education fees run \$30 for the full three-day event.

Kim Mueser, Ph.D., will deliver the keynote address, "Illness Management and Recovery for Consumers with Severe Mental Illness." Mueser is a professor at Dartmouth Medical School's Depts. of Psychiatry, and Community and Family Medicine.

Patricia Deegan, Ph.D., will open the conference's second day program with a talk on recovery, "I Don't Think It Was My Treatment Plan That Made Me Well: Self-Directed Recovery and the Role of the Mental Health Professional."

Deegan, an independent consultant on recovery and helping people diagnosed with mental illness, is affiliated with Boston University's Institute for the Study of Human Resilience, the University of Kansas' School of Social Welfare, and Advocates for Human Potential, Inc.

Deegan's 49-minute film, "Inside Outside: Building a Meaningful Life After the Hospital," will be shown during a breakout session March 29. "Inside Outside" features eight people talking about their successful transitions from psychiatric hospitals and nursing homes

to community life.

Wilma Townsend, MSW, will deliver the conference's closing address, "How a System Can Support Recovery-Oriented Cultural Competencies." Townsend, a nationally recognized expert on recovery and cultural competence, has worked as a consultant with many governmental bodies, managed care organizations, and consumer and family organizations.

The conference will also feature the world premiere of "Recovered Dignity," a 30-minute film by award-winning filmmaker Tom Vendetti, Ph.D., Maui service area administrator. The film explores the recovery movement's dramatic effect on the lives of people with mental illness.

For more information about the conference contact Jennifer Miyasaki, conference manager, at (808) 539-3939, send a fax to (808) 539-3940, or send an email to best@amhd.org. Information, including details of teleconferencing locations, is available at the conference web page, www.amhd.org/best. Conference brochures will be mailed in late December.

A limited number of scholarships are available for consumers of mental health services, family members and students.

For information about consumer and family member scholarships, call Bill Lennox at the AMHD's Office of Consumer Affairs at (808) 586-4688.

To apply for student scholarships download an application form, available as a PDF, from the conference web site at www.amhd.org/best.

United Self-Help gets new 3-year fed grant to help services continue

United Self-Help (USH), a Honolulu-based consumer support and advocacy organization since 1985, has gotten a new three-year \$210,000 federal grant to support its many programs for people with mental illness in Hawai'i. USH serves more than 400 people with mental illness every month.

"Without the money we'd have to shut down some things," said Bud Bowles, USH executive director. "Now we don't have to. (The grant) enables us to grow and expand."

The grant follows on the heels of a previous three-year grant for \$180,000. The Substance Abuse and Mental Health Services Administration (SAMHSA), part of the federal Dept. of Health and Human Services, gave both grants.

The money supports USH's 21 support groups, its 3,000 circulation monthly newsletter, a "warm" line telephone referral service (On O'ahu call 926-0466, neighbor islands call toll-free 1-(866) 866-4357), BRIDGES classes, peer mentoring and other services.

Abilities 2005 art show submission deadline Feb. 25

Abilities 2005, an art show for people whose lives have been touched by mental illness, is now accepting submissions. The event is open to all visual art forms, including drawing, painting, photography or mixed media.

Deadline for submission is February 25, 2005.

For more information or to request an entry form contact Lauren Prepose at lprepose@hawaii.edu or call (808) 539-3939.

Hospital: history of the 13-year fed court case

From Page Two

periodic visits.

From January 2002 to November 2004 Special Master Chang filed eight reports with the U.S. District Court.

Judge Chang also required preparation of a Plan for Community Mental Health Services, which complements the final

HSH Remedial Plan. Those two plans, collectively referred to in the lawsuit as the "omnibus plan," are intended to integrate Hawai'i's public mental health system, including community-based and hospital-based services, to meet the clinical and social needs of persons with severe mental illness.

History compiled by David E. Sobmer, Hawai'i State Hospital staff.

'Monk' excels at detecting despite OCD

Support group members laugh with him, appreciate mostly positive portrayal

Lone wolf detectives have long been a mainstay of American television — characters like Mannix, Longstreet, Cannon, Tenafly, Harry O, Rockford, Magnum PI and Columbo. While they always had their flaws and weaknesses, mental illness was never one of them.

But in 2002, cable channel USA Network reinvented the lone wolf detective in the person of "Monk," a man with obsessive-compulsive disorder (OCD).

A former San Francisco police detective, Adrian Monk loses control of his illness after his wife dies in a mysterious car bombing. In the aftermath his symptoms worsen, eventually forcing him to leave his job.

Lebanese-American Tony Shalhoub, an Emmy-winner for his role as Monk, now free-lances for the SFPD on the tough cases only he seems able to solve. He gets help along the way from sidekick, nursemaid and mother figure, Sharona Fleming, played by Bitty Schram.

It's Monk's laser-like attention to detail and relentless imagining of possible scenarios that always, in the end, leads him to the truth. These "obsessive" characteristics, supposedly part of his illness, are also his strongest investigatory tools. He's Sherlock Holmes on a couch.

Though a Honolulu OCD support group member said, "OCD in real life isn't funny, it's more scary," support group members said Monk's character is mostly positive, representing a person with mental illness who has something positive to contribute to society.

"He has to notice things no one else can notice," said Ginny Klein, OCD support group member. "It's supposed to be part of his OCD. It's his strength and weakness at the same time."

Along the way the audience watches Monk perform meaningless rituals characteristic of OCD — rearranging pillows on a sofa, trimming a bunch of roses so all will match, or touching parking meters while



Actor Tony Shalhoub plays Adrian Monk, a former San Francisco Police Dept. detective who free-lance for the department on tough cases only he seems able to solve.

walking down a San Francisco sidewalk. "You can laugh with Monk, not at him," said Klein, "you're saying to yourself, 'Oh yeah, I know that one.'"

The National Alliance for the Mentally Ill (NAMI) web site's stigma-busting section also finds the Monk portrayal generally positive.

"His portrayal of OCD is realistic and respectful," reads part of the site. "One NAMI member reported: 'My son has been struggling with OCD for over 10 years and he found it funny. He got to see someone struggling with some of the same symptoms and somehow it helped to see that it was okay. It also showed the kindness of other people when dealing with a disorder and that this detective was still able to do a good job.'"

But Honolulu OCD support group members also had criticisms: Monk seems to be independently wealthy and never has money problems, unlike many people with OCD who may have trouble keeping a job. He seems more accepted by others than seems true to reality. He doesn't take medications to help control his illness. His psychotherapy sessions aren't realistic, especially given that cognitive behavioral therapy isn't part of his treatment.

Of course Monk is a TV show. It's supposed to entertain, not bust stereotypes or educate. "(The show producers') goal isn't a documentary," said Klein. "It's a comedy/drama."

Yet support group members empathize with Monk's constant emotional turmoil. Klein cited an on-screen therapy session where Monk says to his psychiatrist, "I'm tired of being me."

Another member amplifies the point, referring to the person with OCD's "tension about getting things right...you're stuck, you're really stuck."

According to NAMI's web site, the National Institute of Mental Health estimates more than 2 percent of the U.S. population, or nearly one in 40, will suffer from OCD at some point in their lives. The disorder is two to three times more common than schizophrenia or bipolar disorder.

OCD is characterized by a combination of obsessions and compulsions.

Obsessions are intrusive, irrational thoughts — unwanted ideas or impulses that come up over and over in a person's mind. Examples of obsessive thoughts associated with OCD are: "My hands must be contaminated; I must wash them"; "I may have left the gas stove on"; "I am going to injure my child."

Compulsions are repetitive rituals such as hand washing, counting, checking, hoarding, or arranging. People with OCD repeat these actions, maybe feeling some relief, but without satisfaction or a sense of completion. People with OCD may feel they must repeat these rituals compulsively or something bad will happen.

While most people experience obsessive thoughts or compulsive behaviors at some time in their lives, experts suggest it's serious when a person experiences such thoughts more than an hour every day, especially if such behavior interferes with their life.

This is clearly the case with Monk.

However, when in one episode Monk's psychiatrist convinces him to try medication, his symptoms vanish and his personality changes dramatically. He also loses his detecting expertise. By the end of the episode Monk has given up the meds, become his old self and regains his detective's eagle eye.

Yet in spite of that episode, and other missteps, support group members see in

Please see Monk, Page 7

UH mental health seminars bring students together

Since Aug. 27 a community mental health seminar series has brought together grad students from across the University of Hawai'i at Manoa's caregiver spectrum.

The Friday afternoon noncredit series offers a monthly two-hour seminar through the Fall 2004 and Spring 2005 semesters. Students in psychology, social work, nursing and psychiatry are invited.

Organizers hope the series will enable cross-discipline communication that will reduce and eliminate misperception or misunderstanding of each discipline by those in other disciplines.

Interdisciplinary teams offering integrated care aren't just the future of community mental health care, they produce better collaborative care for consumers.

It's hoped that bringing future caregivers together while they're students, will lead to better working relationships among them when they're professionals together out in the working world.

Previous topics included an introduction to public sector mental health, mental health team building, culture and mental health, evidence-based practices and forensic mental health.

Upcoming topics include:

- **Mental Health Recovery**
Jan. 28, facilitated by John Steffen and others/Psychology
- **Consumer and Family Member Panel**
Feb. 25, facilitated by Charlotte Trotter/Nursing and Paula Morelli /Social Work
- **Mental Health Law**
March 18, facilitated by Darryl Matthews
- **Co-occurring Substance Related and Mental Disorders**
April 29, facilitated by TBN /Psychiatry

Lectures are held in Business Administration D-102, Fridays, from 2:30 to 4:30 p.m. For more information call John Steffen at (808) 539-3961.

Twentieth consumer conference coming Dec. 28 on O'ahu

The 20th annual conference for Hawai'i consumers of mental health services comes to Honolulu Dec. 28 at Kapi'olani Community College from 8 a.m. to 4 p.m.

Conference fees are \$2 for consumers and \$5 for non-consumers.

The all-day conference, "Empowerment Through Awareness," will offer information and resources in support of full body health, including a focus on the interconnection between physical and mental health.

Participants may choose from 18 workshops, including, housing, homelessness, consumer advocacy, peer specialists, dual diagnosis clinical research — a mental health collage, consumer rights, the clubhouse movement in Hawai'i, the Native Hawaiian Health Scholarship program, supportive education, new medications, self-esteem, mental health advance directives, healthy living for everyone, the promise of recovery, taking a stand for your recovery, the AMHD consumer grievance and appeals process, the O'ahu Service Area Board and the Brain-Mind: The Role Of

AMHD gets mission, vision statements

The AMHD has adopted new mission and vision statements defining the goals of its collaboration between staff, private providers and consumers.

The statements were approved Dec. 1 by the AMHD's Executive Oversight Team (EOT) after they were presented by a task team led by Linda Appel, O'ahu service area administrator, Bill Lennox, consumer affairs chief and Martie Drinan, planning/compliance director.

The team reviewed mission and vision statements on the AMHD web site, Hawai'i Dept. of Health mission and vision statements, the Community Plan and the President's New Freedom Commission on Mental Health's report.

Team recommendations were reviewed and revised by the EOT, and then presented to county service area boards and to consumers at a Chief's

Conscious Recovery.

Continental breakfast, lunch, three workshops from the above choices and a conference-closing dance for participants are included. Lunchtime entertainment will feature Ho'onani O Ko'olau, the consumer-staff hula troupe, a kata exhibition and the comedy of Frank DeLima.

Mission Statement:

"We provide a comprehensive, integrated mental health system supporting the recovery of adults with severe mental illness."

Vision Statement:

"Everyone has access to effective treatment and supports essential for living, working, learning and participating fully in the community."

Roundtable meeting. After final review and revision by the EOT, the new statements, and accompanying lists of Core Values and Guiding Principles, were approved.

All the approved statements will be posted on the AMHD web site at www.amhd.org.

For more information call Arnie at the Ko'olau Clubhouse at (808) 233-3778.

To register, send an email to arnoldtellez@hotmail.com, a fax to (808) 233-3790 or mail registration forms to Arnold Tellez, Ko'olau Clubhouse, 46-016 Alaloa St., Kaneohe, HI 96744.

Happy Holidays and mahalo for all your hard work

From the Chief...

As some of you may remember, I became Chief of the Adult Mental Health Division in June 2002 after serving from



Tom Hester, M.D.

August 2001 as Medical Director prior to Dr. Linda Fox's retirement.

This is the third full year that I have had the opportunity to reflect on mental health activities at the AMHD

and in the state of Hawai'i.

While thinking of Linda, I'd like to send her and her family best wishes this holiday season. Many of the things I am thankful for have been years in the making. I know Linda would be as proud of our accomplishments as I am grateful to those of you who have helped to make our collective visions reality.

Perhaps one of the most important things Linda did was to hire Paul Guggenheim to provide strong stable leadership at Hawai'i State Hospital. Although Paul is quick to acknowledge that it was his staff's efforts which lead to the dismissal of the 13-year-old U.S. Dept. of Justice court case this month, I believe that HSH hospital staff will agree with me in recognizing his contributions.

Certainly the most significant story reported in the AMHD News this past year is this issue's story of that court dismissal. However, I'd like to reflect on other equally important activities from the past year.

Two of the most visible AMHD activities were our conferences. The First Annual AMHD Best Practices conference, *Innovations in Dual Diagnosis*, was held in May. In February, the AMHD helped facilitate the Winter Meeting of the American Association of Community Psychiatrists by organizing the conference, *A Comprehensive, Integrated Public Mental Health System - From Vision to Reality*. Both were informative and successful.

CMHC positions to be filled statewide in fiscal year 2004 (12/7/04)	Statewide Total	
	Hired	Goal
Case Management Coordinator	6	8
Case Management Team Leader	6	10
Case Management Specialist	2	3
Clubhouse - PSR Coordinator	5	6
Clubhouse Specialist	9	14
Forensic Coordinator	5	8
Jail Diversion Coordinator	2	3
Jail Diversion Specialist	3	4
MI/SA Coordinator	6	8
Clinical Social Worker (LSW)	1	8
APRN Prescriptive Authority	4	5
Total Positions	49	77

Many other less visible but equally valuable activities occurred during the year. The February AMHD News focused on the AMHD housing program and I've been pleased to witness consistent growth in the number of housing options available during the year.

In November, a related story on the Bridge housing program reported that over 330 current consumers are being helped by AMHD subsidies and over 200 more have moved into federally subsidized housing. We've also made good progress toward our goal of having consumers involved at all levels of the AMHD as reported in my May 2004 column.

As an example, in September 2004 the AMHD News reported growth from 21 to 46 in the number of certified peer specialists in Hawai'i. In March 2003 we reported that over 90 percent of AMHD consumers said they were satisfied with services as measured during the 2003 annual consumer satisfaction survey.

There has been consistent growth in the number of jobs that consumers are getting. For example, this month 20 percent of consumers receiving services at CMHCs reported being employed.

In June 2002 this number was 17 percent and the supported employment program reported 149 job placements. This has grown to 894, as reported in the Employment Update on Page Eight.

Clubhouse programs also report

impressive employment figures each month. It is this day-to-day progress, requiring unrecognized commitment and dedication, that I am particularly thankful for this holiday season. All too often this nose-to-the-grindstone work goes unrecognized. I've come to appreciate how much effort it takes to make positive changes in our system of care and am grateful for all of the effort contributed by everyone associated with mental health in Hawai'i.

I hope and expect that we will see continuing progress during the new year.

I will focus my attention on continuing implementation of the *Community Plan for Mental Health Services* and the Medicaid Rehabilitation Option. We're also looking forward to the Second Annual AMHD Best Practices Conference on *Illness Management and Self-Directed Recovery* to be held May 29-31, 2005.

It's particularly important to demonstrate Community Plan progress. Because much of the work is difficult and time-consuming we have received an extension to June 2006 to fully implement the plan.

The table above shows 49 of 77 CMHC positions filled as required by the Plan, up from 34 in August, 39 in September, and 46 in October.

We can continue to make significant progress as a system if we work together, respect each other, and help consumers find what they need to lead a fulfilling life in the community.

Finally, we need to acknowledge our family of POS providers. We have entrusted them with the most important part of our system, namely our consumers and they have executed this trust in a diligent and caring manner.

Let's enjoy the holiday season, take pause to reflect and be thankful, and recharge our batteries!

Spotlight on...



Paul Guggenheim, Hawaii State Hospital administrator

When Paul Guggenheim joined the Hawai'i State Hospital in 2001, it was the tenth year of a federal civil rights lawsuit brought to improve hospital services and conditions. Because Guggenheim was the sixth new administrator in as many years, his biggest challenge coming in was convincing staff he was going to stay for the long haul.

"What Paul brought was the belief that he was going to be around for a while," said nine-year veteran, Bill Elliott, the hospital's associate administrator. "He was sincere in his commitment to be here. That went a long way toward a structure (staff and patients) could believe in."

This month Judge David Ezra closed the now 13-year-long Dept. of Justice case, finding the HSH in substantial compliance with the court-ordered Remedial Plan.

While Guggenheim, 56, takes pride in leading the hospital through the final stretch of its 13-year improvement marathon, he gives credit for that accomplishment to HSH staff.

"People here care about the patients," said Guggenheim. "That's the golden thread that runs through everything we do. This was a total hospital effort involving everybody coming together toward a common focus: Compliance with the Remedial Plan — and we defined that as good patient care."

Guggenheim brought to Hawai'i more than 30 years experience in behavioral health care, all of it in Ohio.

An Ohio homeboy raised in Stow, Guggenheim also got his education there, a B.S. at Kent State University, a M.Ed. in counseling at the University of Toledo and a M.S. in health administration/planning at the University of Cincinnati. He and his wife, Lynda, a former kindergarten teacher, raised a daughter, Laura, now working on her Ph.D. in literature.

By May 2001, three months into Guggenheim's tenure, the state of Hawai'i had twice been found in contempt of court for failing to improve hospital conditions. HSH was facing its final option; meet Remedial Plan goals, or be



Paul Guggenheim, Hawai'i State Hospital's administrator, brought 30 years experience in behavioral health care to his work leading the hospital's efforts to achieve compliance with the court-ordered Remedial Plan. "People here care about the patients," said Guggenheim. "That's the golden thread that runs through everything we do."

taken over by the federal government.

While he knew going in the job would be tough, "it was bigger than I thought," said Guggenheim. He said it was the talents, skills and caring of HSH staff that made it possible to sharpen the hospital's clinical focus and reach compliance.

Major aspects of Guggenheim's efforts to lead the hospital to compliance with the Remedial Plan included:

- Stabilizing hospital management,
- Focusing the hospital's mission on the Remedial Plan,
- Shifting the hospital toward a recovery model,
- Integrating contract employees into the hospital's departmental structure, and
- Bringing the hospital more fully into the AMHD's system of care.

On top of all this, Guggenheim also had to prepare the hospital for an early reaccreditation by the Joint Commission

on Accreditation of Healthcare Organizations (JCAHO). News of HSH troubles reached the JCAHO, which decided to do a full survey one year ahead of schedule.

Guggenheim's goals for a post-Remedial Plan hospital include:

- Refining a strategic plan to sustain hospital improvements,
- Developing a 10-year plan for improving hospital buildings,
- Reorganizing the hospital's employee organizational structure,
- Continuing to hire and retain quality staff, and
- Preparing for another full JCAHO accreditation survey in 2005.

Along the way, Guggenheim hopes to spend time on Kaua'i and Moloka'i, neighbor islands he's not yet visited.

Guggenheim enjoys Hawai'i's year-round golfing and its cultural blend, as well as its diverse cuisine.

Monk: Despite illness he helps society

From Page Four

the show, they feel having Monk out in the world of pop culture is a good thing for people with OCD and other severe and persistent mental illnesses.

"It's well written and well acted and it shows someone with mental illness who's intelligent and educated, a valuable person who's an asset to society," said Diana, who preferred not to give her sur-

name. "Monk fosters awareness and even acceptance of people with mental illness."

The Obsessive Compulsive Foundation, main advocate for people living with OCD, can be found at www.ocfoundation.org.

NAMI's OCD page can be found by going to www.nami.org and typing OCD in the "Find" box in the upper left corner of the page.

RFP Update...

The following is RFP (Request For Proposal) update information:

There are no new RFPs this month. RFPs released last month are now in the procurement phase.

To be added to the RFP notification list call Betty at (808) 586-4688.

Editor says goodbye

I regret to announce I'll be leaving AMHD News after this issue. I've accepted a job as senior writer with Children's Hospital and Research Center in Oakland, Calif. I'll be starting there later this month.

Producing AMHD News for the last year has given me an appreciation for the hard work and rewards of community mental health. I've been welcomed into a wonderful 'ohana of AMHD staff, con-

sumers, family members and private providers.

I've enjoyed being eyes and ears for all of you, and been pleased to hear from readers who enjoyed the content and design of AMHD News. I hope my replacement has as much fun here as I have.

Mahalo for your support and aloha nui loa.

— Tom Levy

tomlevy@earthlink.net

Employment Update...

New Look: *The clubhouse coalition decided the following information would more accurately represent their employment efforts. We hope the additional detail is helpful.*

Employment Information: November 2004

	Friendship House (Kaua'i)	Hale O Honolulu (O'ahu)	Hale 'Oluea (Big Island)	Hale O Lanakila (Maui)	Hui Hana Pono (O'ahu)	Ko'olau Clubhouse (O'ahu)	Waipahu Aloha Clubhouse (O'ahu)	Total
Transitional (part-time)	11	8	10	1	N/A	10	0	40
Supported	7	6	12	3	N/A	7	10	45
Independent	8	9	3	5	N/A	7	3	35
Total Wages Earned	\$13,675	\$6,910	\$11,400	unknown	N/A	\$9,932	\$5,152	\$47,069
Average Hourly Wage Earned	\$8.90	\$6.70	\$7.76	unknown	N/A	\$7.44	\$6.91	\$7.54
Members in Supported Education	2	8	9	0	N/A	3	20	42
Active Members	62	164	96	40	N/A	113	147	622
Average Daily Attendance	35	46	38	21	N/A	29	67	236
Outreach Contacts	20	6	47	189	N/A	21	30	313
Evening/Weekend/Holiday Hours	32	30	80	14	N/A	45	16	217
New Member Referrals	3	5	8	0	N/A	15	2	33

Supported Employment Program

Good news! The Steadfast Supported Employment Program found 24 more jobs for consumers in October, for a total of 894 job placements and 979 referrals made since January 2001.

Consumer Employment Survey

As of Nov. 1, 2004, 1,891 consumers completed a Quality of Life Interview within the previous seven months at state-operated community mental health centers. Of the 1,842 consumers who responded to the employment question, 382 (20%) reported being employed (144 full-time and 238 part-time).

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