

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



STATE OF HAWAII | KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF PUBLIC SAFETY
Ka 'Oihana Ho'opalekana Lehulehu
1177 Alakea Street
Honolulu, Hawaii 96813

TOMMY JOHNSON
DIRECTOR

Melanie Martin
Deputy Director
Administration

Sanna Muñoz
Deputy Director
Corrections

Mark Hanohano
Deputy Director
Law Enforcement

No. _____

September 7, 2023

The Honorable Josh Green, M.D., Governor
Office of the Governor
Executive Chambers
State Capitol, Fifth Floor
415 S. Beretania Street
Honolulu, Hawai'i 96813

Dear Governor Green:

Pursuant to Act 234, SLH 2019 (HB 336, HD2, SD2), PSD provides the mandated "reporting of a death" as follows:

Forty-eight (48) hours reporting.

NAME	MAHUKA-MCSHANE, Chazaray
EMPLOYEE OR INMATE	Inmate
GENDER	Male
AGE	30-40 age range
STATE EITHER FACILITY OR HOSPITAL FOR LOCATION OF DEATH/INJURY THAT CAUSED DEATH	Queens Medical Center, Honolulu Hawai'i
UNOFFICIAL OR PRONOUNCED DATE, AND TIME AS REPORTED BY EMS, HOSPITAL OR HOSPICE, J	Wednesday, September 6, 2023 at approximately 17:24 hours
CAUSE OF DEATH AS REPORTED BY EMS, HOSPITAL OR HOSPICE	Cause of death was not indicated.
ANY INDICATION OF SEXUAL ASSAULT LEADING TO DEATH	None.

PSD'S DISCLOSURE OF PROTECTED HEALTH INFORMATION INCLUDED IN THIS REPORT IS LIMITED TO THE INDIVIDUALS SPECIFIED BY HRS 353C-8.5 (ACT 234). REDISCLOSURE OF PROTECTED HEALTH INFORMATION MAY BE PROHIBITED UNDER THE HAWAI'I CONSTITUTION, STATE AND/OR FEDERAL LAWS.

Thirty (30) day reporting (date).

WAS A CLINICAL MORTALITY REVIEW CONDUCTED?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
ANY CORRECTIVE ACTION BASED ON CMR?	

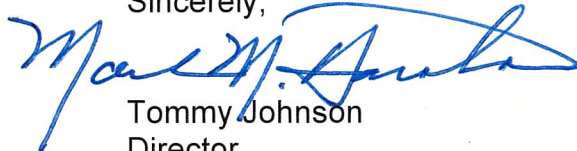
Report Upon Receipt.

MEDICAL EXAMINER REPORT RECEIVED, DATE AND THE OFFICIAL CAUSE OF DEATH	PSD received on _____, the report as determined by the Department of the Medical Examiner, STATE INFO.
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According to Act 234, SLH 2019, the PSD Director has the discretion to withhold the disclosure of any information protected from disclosure by state or federal laws.

If you require additional information, please do not hesitate to contact my office at 587-1350.

Sincerely,



Tommy Johnson
Director

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No. 2023-1618

August 30, 2023

MEMORANDUM:

TO: The Honorable Josh Green, M.D.
Governor of the State of Hawai'i

FROM: Tommy Johnson, Director
Department of Public Safety

SUBJECT: Delegation of Authority during my Absence September 6-10, 2023

I will be out of the office from September 6, 2023 through September 10, 2023 to provide a facility tour at the Saguaro Correctional Center in Phoenix, Arizona. I will be on hand to answer any questions raised by the Legislators during this tour.

During my absence, September 6-10, 2023, Deputy Director of Law Enforcement Mark Hanohano is authorized to sign all documents on my behalf.

Please continue to route all documents requiring my signature to our office during this time.

APPROVED DISAPPROVED

for _____
Josh Green, M.D.
Governor of Hawai'i

SEP 01 2023
_____ Date

c: Brooke Wilson, Governor's Chief of Staff
Mark Hanohano, DEP-E