NEIL ABERCROMBIE GOVERNOR OF HAWAII



LORETTA J. FUDDY, A.C.S.W., M.P.H DIRECTOR OF HEALTH

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In reply, please refer to: File:

House Committees on Health and Public Safety & Military Affairs

HCR192, REQUESTING THE DEPARTMENT OF HEALTH AND DEPARTMENT OF PUBLIC SAFETY TO CONVENE A TASK FORCE TO DEVELOP A PLAN FOR THE DESIGN, DEVELOPMENT, CONSTRUCTION, AND OPERATION OF A SECURE FORENSIC FACILITY

Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H. Director of Health

Friday, March 30, 2012

1 Department's Position: The Department of Health (DOH) supports this House Concurrent Resolution.

2 Fiscal Implications: Undetermined at this time.

3 **Purpose and Justification**: The purpose of the Task Force is to examine ways to address the needs of

4 individuals committed to the custody of the Director of Health who may require strict security, and

5 individuals committed to the custody of the Director of Public Safety who require intensive mental

6 health treatment, and whether the needs of these groups of individuals may be more effectively met by

7 the development of a secure forensic facility.

8 The buildings currently in use at the Hawaii State Hospital (HSH) were designed in the past to 9 serve a population of individuals very different from those who are there in the present. The facilities 10 were built in two time periods. The older section, built circa 1951, houses 40% of the patients at the 11 hospital. It was condemned in the 1990's, renovated and reopened in 2002, and has been in use years 12 longer than intended. The newer section, built in 1992, houses 60% of the patient population and was 13 designed to function as a dormitory style living arrangement for individuals who are civilly committed

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or voluntarily hospitalized for acute psychiatric problems and expected to rapidly return to the
 community.

In the last 20 years, the hospital has come to serve a totally forensic population, as virtually every patient admitted comes to the hospital by an order of a court. Forensic patients have, by definition, been charged with a crime. Most have severe and persistent mental illness and substance addiction. Some are violent. A few are very violent.

As the forensic population has expanded, the Department of Health (DOH) and the Department
of Public Safety (PSD) have worked together in new ways, as patients admitted to HSH have been in
PSD custody, and patients leaving HSH often are remanded back into PSD custody.

Also, as the population of inmates and detainees in jails and prisons has increased, so have the numbers of those in PSD custody who have severe and persistent mental illness. Many of these have significant needs for psychiatric care, including inpatient hospitalization. A number of detainees and inmates from PSD have been referred to HSH for psychiatric treatment.

Both DOH and PSD have found their current physical facilities, designed to treat the patients of the past, are in need of modernization to treat the patients of the present and prepare for the capacity to meet future needs. Many patients in the custody of DOH have a need for stricter security, and a number of patients in the custody of PSD require hospital level of care. This creates strain on the staff and programs of both facilities.

19 To address this identified gap in facilities and services, the DOH and PSD are proposing a task 20 force be convened, as resolved by the Legislature, to gather key stakeholders from the judiciary, mental 21 health, and public safety systems to plan for the creation of a suitable facility in which to provide 22 services for these groups, the mentally ill who need stricter security and the inmate/detainees who need a 23 higher level of mental health care.

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This Task Force would consider the scope of the problem, the size of the populations involved, 1 and the best model for the management of this population, and possible sites and models for building the 2 facility in the future. 3 The creation of a new facility such as this may take several, or many, years. The number of 4 individuals with mental illness involved with the legal system is increasing, and is expected to continue 5 6 to increase for the foreseeable future. This Task Force would be charged with planning to meet that 7 increasing need, and we urge the committee to approve this resolution. Thank you for the opportunity to testify. 8

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TESTIMONY ON HOUSE CONCURRENT RESOLUTION NO. 192 REQUESTING THE DEPARTMENT OF HEALTH AND DEPARTMENT OF PUBLIC SAFETY TO CONVENE A TASK FORCE TO DEVELOP A PLAN FOR THE DESIGN, DEVELOPMENT, CONSTRUCTION, AND OPERATION OF A SECURE FORENSIC FACILITY

by Jodie F. Maesaka-Hirata, Director Department of Public Safety

House Committee on Health Representative Ryan I. Yamane, Chair Representative Dee Morikawa, Vice Chair

House Committee on Public Safety and Military Affairs Representative Henry J.C. Aquino, Chair Representative Ty Cullen, Vice Chair

> Friday, March 30, 2012; 10:30 A.M. State Capitol, Room 329

Chairs Yamane and Aquino, Vice Chairs Morikawa and Cullen, and Members of the Committees:

The Department of Public Safety (PSD) supports House Concurrent Resolution (HCR) 192 that seeks to establish a Task Force to develop a plan to design, develop, construct, and operate a secured forensic facility.

PSD and the Department of Health have jointly developed HCR 192 with the hopes of planning and developing a secure forensic facility that would meet the specific safety and treatment needs of our patients. A secure forensic facility will not only improve mental health services to the patients who move between the jurisdictions of the Departments, but help alleviate many of the legal custody issues between the Hawaii State Hospital and the Public Safety Correctional System.

Thank you for the opportunity to present this testimony.