



STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

House Committee on Health

S.B. 44, SD1, Relating to Mental Health

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

March 27, 2013, 10:00 a.m.

1 **Department's Position:** The Department of Health (DOH) supports the intent of this bill.

2 **Fiscal Implications:** None

3 **Purpose and Justification:** The bill changes the term "police officers" to "law enforcement officers,"
4 to be consistent with Section 710-1000 of Hawaii Revised Statutes (HRS) §334-1. The recommended
5 change improves HRS §334-59 and is an integral part of an ongoing need for individual mental health
6 supports at all levels of intervention.

7 The department supports the intent of substituting the term "law enforcement" for "police
8 officers" in Section 2 of HRS §334-59, which allows law enforcement officers to make the
9 determination that an individual who is threatening or attempting suicide, may be transported to a
10 licensed psychiatric facility for evaluation and possible emergency hospitalization without going
11 through the oral exparte process.

12 On January 28, 2013, the Senate Committees on Health and Public Safety amended the bill by
13 adding advanced practice registered nurse to the list of mental health professionals qualified to diagnose
14 mental illness under section HRS §334-59, and we will comply with the amendment should this bill be
15 enacted.

1 The DOH also supports the Department of the Attorney General’s recently proposed
2 amendments submitted to the Committee, related to providing involuntary civil mental health
3 commitment information to the National Instant Criminal History Background Check System and law
4 enforcement with respect to those with mental illness.

5 Thank you for the opportunity to testify on this bill.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
TWENTY-SEVENTH LEGISLATURE, 2013**

**ON THE FOLLOWING MEASURE:
S.B. NO. 44, S.D. 1, RELATING TO MENTAL HEALTH.**

**BEFORE THE:
HOUSE COMMITTEE ON HEALTH**

DATE: Wednesday, March 27, 2013 **TIME:** 10:00 a.m.
LOCATION: State Capitol, Room 329
TESTIFIER(S): David M. Louie, Attorney General, or
Andrea J. Armitage, Deputy Attorney General

Chair Belatti and Members of the Committee:

The Department of the Attorney General supports this bill, but strongly requests that the amendments be made as set forth in the attached proposed House Draft 1.

This measure amends chapter 334, Hawaii Revised Statutes (HRS), in two ways. First, it changes the term “police officer” to “law enforcement officer,” to allow sheriffs and others as defined in section 710-1000, HRS, to take into custody and transport to a hospital any person believed to be dangerous to self or others. It also adds advanced practice registered nurses to the list of professionals who may apply to a judge for an ex parte order to have a law enforcement officer take the person into custody and deliver the person to the nearest facility for emergency examination and treatment, or emergency hospitalization.

The Department’s proposed House Draft 1 modifies this bill by adding two amendments related to firearm safety and our State’s compliance with the National Instant Criminal Background Check System (NICS) with respect to those with mental illness. NICS is a federal database to which states are asked to contribute data, in order to identify those who are federally prohibited from possessing a firearm. If someone wants to purchase a firearm, an instant NICS check can be done to determine whether the person is federally prohibited from possessing a firearm.

As people across the nation have looked to NICS as a way to keep guns out of the hands of dangerous mentally ill patients, some states have been criticized for failing to provide sufficient information to NICS. Under the NICS Improvement Amendments Act of 2007, Pub. L. 110-180 (NIAA) (18 U.S.C. § 922(d)(4) and (g)(4)), “persons who have been adjudicated as mental defectives or have been committed to a mental institution” are prohibited from possessing

firearms or ammunition. That prohibition is extended to Hawaii law pursuant to section 134-7(a), HRS, which provides: “No person who . . . is a person prohibited from possessing firearms or ammunition under federal law shall own, possess, or control any firearm or ammunition therefor.”

Hawaii, however, does not submit civil commitment information to NICS. Pursuant to our State’s confidentiality law on mental health information and records, the State cannot submit civil commitment information to NICS, nor share it with law enforcement agencies responsible for granting firearm permits and registering firearms. One provision in our proposed H.D. 1 would amend sections 334-5 and 334-60.5, HRS, to require the courts to forward information about involuntary civil commitment orders to the Hawaii Criminal Justice Data Center, which in turn will forward the information to be included in the NICS database. It will also require the Hawaii Criminal Justice Data Center to maintain the information for disclosure to law enforcement for the purpose of firearms permitting and registration.

The other proposed amendment to this bill is intended to address a provision of the NIAA that requires states to enact a “relief from disabilities program.” This program allows someone who is prohibited under federal law from possessing a firearm because the person was adjudicated a “mental defective” or because the person was involuntarily committed to a psychiatric institution, to obtain relief from that “federal prohibitor” once the person’s mental health issues have been addressed and the person is no longer a danger to the public. This would involve a court hearing to determine whether the person is likely to act in a manner dangerous to the public safety, and whether the grant of the relief will be in the public interest. The NIAA provides an incentive to states to pass laws providing for the relief programs. A state that enacts such a program is eligible for a federal grant to establish and upgrade information automation and identification technologies for the submission of records to NICS. Hawaii currently does not have such a program and is therefore not eligible for the funding. Furthermore, existing federal funding that the State currently receives at this time would be in jeopardy because of a penalty provision, set to be implemented in federal fiscal year 2014, for failure to implement a relief program.

We strongly urge you to pass this measure with the proposed amendments. Thank you for the opportunity to testify.

A BILL FOR AN ACT

RELATING TO MENTAL HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. Chapter 134, Hawaii Revised Statutes, is
2 amended by adding a new section to be appropriately designated
3 and to read as follows:
4 "§134- Relief from federal firearms mental health
5 prohibitor. (a) Any person who is prohibited from shipping,
6 transporting, possessing or receiving any firearm or ammunition,
7 pursuant to 18 U.S.C. § 922(d)(4) and (g)(4), having been
8 adjudicated as a mental defective or having been committed to a
9 mental institution under the laws of this State, may petition
10 the circuit court in the circuit where the adjudication or
11 commitment was made, in a civil proceeding, for relief from the
12 federal firearm prohibition based on the adjudication or
13 commitment. The attorney general shall represent the State;
14 provided that the attorney general, with the prosecuting
15 agency's consent, may designate the prosecuting attorney for the
16 county in which the petitioner seeks relief to represent the
17 State.

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- 1 (b) In the civil proceeding, the court shall consider:
- 2 (1) The circumstances regarding the adjudication or
- 3 commitment from which relief is sought, including but
- 4 not limited to the court files of the adjudication or
- 5 commitment;
- 6 (2) The petitioner's mental health and criminal history
- 7 records, if any;
- 8 (3) The petitioner's reputation in the community,
- 9 developed at a minimum through character witness
- 10 statements, testimony, or other character evidence;
- 11 and
- 12 (4) Changes in the petitioner's condition or circumstances
- 13 since the disqualifying events relevant to the relief
- 14 sought, including medical documentation that the
- 15 petitioner is no longer adversely affected by the
- 16 condition that resulted in the petitioner's
- 17 adjudication or commitment and not likely to act in a
- 18 manner dangerous to public safety.
- 19 (c) The court shall grant the petition for relief if the
- 20 petitioner proves, by clear and convincing evidence, that the
- 21 petitioner will not be likely to act in a manner dangerous to
- 22 public safety and that the granting of the relief would not be
- 23 contrary to the public interest. The court shall make written

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1 findings of facts and conclusions of law on the issues before it
2 and issue a final order.

3 (d) When a court issues an order granting or denying a
4 petition for relief, the court shall forward this information to
5 the Hawaii criminal justice data center, which in turn shall
6 forward this information to the Federal Bureau of Investigation,
7 or its successor agency, for inclusion in the national instant
8 criminal background check system database. The information
9 shall also be maintained by the Hawaii criminal justice data
10 center for disclosure to and use by law enforcement officials
11 for the purpose of firearms permitting or registration pursuant
12 to chapter 134.

13 (e) A person may file a petition for relief under this
14 section no sooner than two years after the adjudication or
15 commitment from which the relief is sought, and no more
16 frequently than once every three years thereafter.

17 (f) For purposes of this section, the terms "adjudicated
18 as a mental defective," "committed to a mental institution," and
19 "mental institution" shall be construed in accordance with 18
20 U.S.C. § 922, 27 C.F.R. § 478.11, and judicial interpretations
21 of those provisions.

22 (g) Any relief granted pursuant to this section shall not
23 constitute relief from any other federal prohibitors or from any

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1 state prohibition pursuant to chapter 134. The State, its
2 officers, and its employees shall not be liable for any damages,
3 attorneys' fees, or costs related to this relief process.

4 (h) The petitioner may appeal a denial of relief, and the
5 standard of review on appeal shall be de novo."

6 SECTION 2. Section 334-1, Hawaii Revised Statutes, is
7 amended by adding a new definition to be appropriately inserted
8 and to read as follows:

9 "Law enforcement officer" has the same meaning as in
10 section 710-1000."

11 SECTION 3. Section 334-2.5, Hawaii Revised Statutes, is
12 amended by amending subsection (b) to read as follows:

13 "(b) The department may operate or contract for a secure
14 psychiatric rehabilitation program for individuals who require
15 intensive therapeutic treatment and rehabilitation in a secure
16 setting. The services authorized by this section shall be for
17 persons:

18 (1) Involuntarily hospitalized under this chapter for whom
19 the services cannot be reimbursed, covered, or
20 provided by an insurer, plan, or other person;

21 (2) Committed to the custody of the director under chapter
22 704; and

23 (3) Appropriately hospitalized under chapter 704 or 706.

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1 The director shall be responsible for the appropriate
2 placement of all persons placed in facilities or services
3 contracted for or operated by the director under paragraphs (1)
4 through (3).

5 Any such person placed in a facility or services contracted
6 for or operated by the director who leaves or remains away from
7 the facility or services, without permission, may be apprehended
8 and returned to the facility or services by any employee of the
9 department or by any ~~[police]~~ law enforcement officer without
10 any warrant or further proceeding."

11 SECTION 4. Section 334-5, Hawaii Revised Statutes, is
12 amended to read as follows:

13 "§334-5 Confidentiality of records. All certificates,
14 applications, records, and reports made for the purposes of this
15 chapter and directly or indirectly identifying a person subject
16 hereto shall be kept confidential and shall not be disclosed by
17 any person except so far as:

18 (1) The person identified, or the person's legal guardian,
19 consents;

20 (2) Disclosure may be deemed necessary by the director of
21 health or by the administrator of a private
22 psychiatric or special treatment facility to carry out
23 this chapter;

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- 1 (3) A court may direct upon its determination that
2 disclosure is necessary for the conduct of proceedings
3 before it and that failure to make the disclosure
4 would be contrary to the public interest;
- 5 (4) Disclosure may be deemed necessary under the federal
6 Protection and Advocacy for Mentally Ill Individuals
7 Act of 1986, Public Law 99-319, to protect and
8 advocate the rights of persons with mental illness who
9 reside in facilities providing treatment or care;
- 10 (5) Disclosure of a person's treatment summary from a
11 previous five-year period from one health care
12 provider to another may be deemed necessary for the
13 purpose of continued care and treatment of the person,
14 or for health care operations; provided that the
15 health care provider seeking disclosure makes
16 reasonable efforts to obtain advance consent from the
17 person; [e~~r~~]
- 18 (6) Disclosures are made between the person's health care
19 provider and payor to obtain reimbursement for
20 services rendered to the person; provided that
21 disclosure shall be made only if the provider informs
22 the person that a reimbursement claim will be made to
23 the person's payor, the person is afforded an

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1 opportunity to pay the reimbursement directly, and the
2 person does not pay[-]; or

3 (7) Disclosures made by the court or the Hawaii criminal
4 justice data center, of any order of commitment issued
5 pursuant to section 334-60.5 or 706-607 or chapter
6 704, which may also be maintained by the Hawaii
7 criminal justice data center for disclosure to and use
8 by law enforcement officials for the purpose of
9 firearms permitting or registration pursuant to
10 chapter 134.

11 Nothing in this section shall preclude the application of more
12 restrictive rules of confidentiality set forth for records
13 covered by Title 42, Part 2, Code of Federal Regulations,
14 relating to the confidentiality of alcohol and drug abuse
15 patient records. For the purposes of this section, "facilities"
16 shall include but not be limited to hospitals, nursing homes,
17 community facilities for mentally ill individuals, boarding
18 homes, and care homes.

19 Nothing in this section shall preclude disclosure, upon
20 proper inquiry, of any information relating to a particular
21 patient and not clearly adverse to the interests of the patient,
22 to the patient, the patient's family, legal guardian, or
23 relatives, nor, except as provided above, affect the application

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1 of any other rule or statute of confidentiality. The use of the
2 information disclosed shall be limited to the purpose for which
3 the information was furnished."

4 SECTION 5. Section 334-59, Hawaii Revised Statutes, is
5 amended by amending subsection (a) to read as follows:

6 "(a) Initiation of proceedings. An emergency admission may be
7 initiated as follows:

8 (1) If a [~~police~~] law enforcement officer has reason to
9 believe that a person is imminently dangerous to self
10 or others, or is gravely disabled, or is obviously
11 ill, the officer shall call for assistance from the
12 mental health emergency workers designated by the
13 director. Upon determination by the mental health
14 emergency workers that the person is imminently
15 dangerous to self or others, or is gravely disabled,
16 or is obviously ill, the person shall be transported
17 by ambulance or other suitable means, to a licensed
18 psychiatric facility for further evaluation and
19 possible emergency hospitalization. A [~~police~~] law
20 enforcement officer may also take into custody and
21 transport to any facility designated by the director
22 any person threatening or attempting suicide. The
23 officer shall make application for the examination,

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1 observation, and diagnosis of the person in custody.

2 The application shall state or shall be accompanied by
3 a statement of the circumstances under which the
4 person was taken into custody and the reasons therefor
5 which shall be transmitted with the person to a
6 physician or psychologist at the facility.

- 7 (2) Upon written or oral application of any licensed
8 physician, advanced practice registered nurse,
9 psychologist, attorney, member of the clergy, health
10 or social service professional, or any state or county
11 employee in the course of employment, a judge may
12 issue an ex parte order orally, but shall reduce the
13 order to writing by the close of the next court day
14 following the application, stating that there is
15 probable cause to believe the person is mentally ill
16 or suffering from substance abuse, is imminently
17 dangerous to self or others, or is gravely disabled,
18 or is obviously ill, and in need of care or treatment,
19 or both, giving the findings on which the conclusion
20 is based, and directing that a [~~police~~] law
21 enforcement officer or other suitable individual take
22 the person into custody and deliver the person to the
23 nearest facility designated by the director for

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1 emergency examination and treatment. The ex parte
2 order shall be made a part of the patient's clinical
3 record. If the application is oral, the person making
4 the application shall reduce the application to
5 writing and shall submit the same by noon of the next
6 court day to the judge who issued the oral ex parte
7 order. The written application shall be executed
8 subject to the penalties of perjury but need not be
9 sworn to before a notary public.

10 (3) Any licensed physician, advanced practice registered
11 nurse, physician assistant, or psychologist who has
12 examined a person and has reason to believe the person
13 is:

- 14 (A) Mentally ill or suffering from substance abuse;
15 (B) Imminently dangerous to self or others, or is
16 gravely disabled, or is obviously ill; and
17 (C) In need of care or treatment;

18 may direct transportation, by ambulance or other suitable
19 means, to a licensed psychiatric facility for further
20 evaluation and possible emergency hospitalization. A
21 licensed physician or physician assistant may administer
22 treatment as is medically necessary, for the person's safe

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1 transportation. A licensed psychologist may administer
2 treatment as is psychologically necessary."

3 SECTION 6. Section 334-60.5, Hawaii Revised Statutes, is
4 amended by amending subsection (i) to read as follows:

5 "(i) If after hearing all relevant evidence, including the
6 result of any diagnostic examination ordered by the court, the
7 court finds that an individual is not a person requiring
8 medical, psychiatric, psychological, or other rehabilitative
9 treatment or supervision, the court shall order that the
10 individual be discharged if the individual has been hospitalized
11 prior to the hearing. If the court finds that the criteria for
12 involuntary hospitalization under section 334-60.2(1) has been
13 met beyond a reasonable doubt and that the criteria under
14 sections 334-60.2(2) and 334-60.2(3) have been met by clear and
15 convincing evidence, the court may issue an order to any
16 [~~police~~] law enforcement officer to deliver the subject to a
17 facility that has agreed to admit the subject as an involuntary
18 patient, or if the subject is already a patient in a psychiatric
19 facility, authorize the facility to retain the patient for
20 treatment for a period of ninety days unless sooner discharged.
21 An order of commitment shall specify which of those persons
22 served with notice pursuant to section 334-60.4, together with
23 such other persons as the court may designate, shall be entitled

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1 to receive any subsequent notice of intent to discharge,
2 transfer, or recommit. The court shall forward the order-of-
3 commitment information to the Hawaii criminal justice data
4 center, which in turn shall forward the information to the
5 Federal Bureau of Investigation, or its successor agency, for
6 inclusion in the national instant criminal background check
7 system database. The information shall also be maintained by
8 the Hawaii criminal justice data center for disclosure to and
9 use by law enforcement officials for the purpose of firearms
10 permitting or registration pursuant to chapter 134."

11 SECTION 7. Statutory material to be repealed is bracketed
12 and stricken. New statutory material is underscored.

13 SECTION 8. This Act shall take effect upon its approval.

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Report Title:

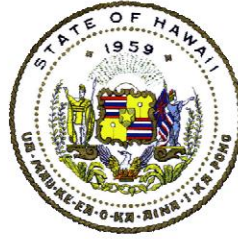
Mental Health; Gun Control

Description:

Provides for a court-based relief program for person federally prohibited from owning a firearm based on a finding of mental illness. Adds definition of "law enforcement officer". Amends references from "police officer" to "law enforcement officer" in the Hawaii Revised Statutes sections relating to emergency admission and involuntary hospitalization. Authorizes advanced practice registered nurses to assess whether there is probable cause to believe a person is mentally ill or suffering from substance abuse or is otherwise in need of care, treatment, or both. Requires the courts to provide information relating to civil commitments to the Hawaii criminal justice data center to disclose to the national criminal history background check database and to law enforcement for gun control purposes.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

NEIL ABERCROMBIE
GOVERNOR



STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

919 Ala Moana Blvd. 4th Floor
Honolulu, Hawaii 96813

TED SAKAI
DIRECTOR

Martha Torney
Deputy Director
Administration

Max Otani
Deputy Director
Corrections

Keith Kamita
Deputy Director
Law Enforcement

No. _____

TESTIMONY ON SENATE BILL (SB) 44, SENATE DRAFT (SD) 1
A BILL FOR AN ACT RELATING TO MENTAL HEALTH

By

Ted Sakai, Director
Department of Public Safety

House Committee on Health
Representative Della Au Belatti, Chair
Representative Dee Morikawa, Vice Chair

Wednesday, March 27, 2013, 10:00 AM
State Capitol, Room 329

Chair Au Belatti, Vice Chair Morikawa, and Members of the Committees:

The Department of Public Safety (PSD) **supports** SB 44, SD1, which expands Section 334, Hawaii Revised Statutes, relating to mental health, mental illness, drug addiction, and alcoholism, to apply to all law enforcement officers as defined under Section 710-1000, which includes any public servant, whether employed by the State or subdivisions thereof, or by the United States, vested by law with a duty to maintain public order, or to make arrests for offenses, or to enforce the criminal laws, whether that duty extends to all offenses or is limited to a specific class of offenses. Currently, Section 334 applies only to the county police, and this amendment would allow all law enforcement officers and not just county police are able to utilize Section 334-59. This section presently allows the police to contact the mental health emergency workers designated by the Director of Health to make a professional determination if an individual may be a danger to self or others, or is gravely disabled, or is obviously ill, and to authorize the transport of this person to a licensed psychiatric facility for further evaluation and possible emergency hospitalization.

Thank you for the opportunity to testify on this matter.



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Written Testimony Presented Before the
House Committee on Health
Wednesday, March 27, 2013, 10:00 A.M.

by

Mary G. Boland, DrPH, RN, FAAN
Dean and Professor
School of Nursing & Dental Hygiene
University of Hawai'i at Mānoa

SB 44 SD1 – RELATING TO MENTAL HEALTH

Chair Belatti, Vice Chair Morikawa and Members of the Committee on Health,

The UH Mānoa Nursing supports Senate Bill 44, SD1, to allow Section 334, relating to mental health, mental illness, drug addiction, and alcoholism, to apply to all law enforcement officers as defined under Section 710-1000, which includes any public servant, whether employed by the State or subdivisions thereof, or by the United States, vested by law with a duty to maintain public order, or to make arrests for offenses, or to enforce the criminal laws, whether that duty extends to all offenses or is limited to a specific class of offenses.

The UH Mānoa Nursing appreciates your continuing support of nursing and health in Hawai'i. Thank you for the opportunity to testify on SB 44, SD1.

morikawa2 - Shaun

From: mailinglist@capitol.hawaii.gov
Sent: Friday, March 22, 2013 9:10 PM
To: HLTtestimony
Cc: wailua@aya.yale.edu
Subject: Submitted testimony for SB44 on Mar 27, 2013 10:00AM

SB44

Submitted on: 3/22/2013

Testimony for HLT on Mar 27, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Wailua Brandman APRN-Rx BC FAANP	Hawai`i Association of Professional Nurses (HAPN)	Support	No

Comments: Aloha Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to testify in STRONG support of SB44 SD1, relating to Mental Health, on behalf of the Hawai`i Association of Professional Nurses (HAPN). APRNs are fully qualified to determine a persons safety and mental status. I would like to propose further amendment of this bill to include APRNs in Section 3 (a) (1) as providers who may receive the patient and the paperwork at the facility receiving the patient. In section 3 (a) (2) APRNs were inadvertently left out of the providers who may administer treatment, when SD1 was written up in the Senate Health Committee. Please include them. The past 3 sessions of this Legislative body have passed bills enabling APRNs to practice independently to the full scope of their education and ability. These services are paramount to health care consumers' access to care, and the outdated statute this bill addresses remains a barrier to APRN practice. This statute is one instance in the midst of many currently outdated statutes that will hopefully be addressed in the immediate future. In this time of changing health care, Hawai`i needs to stand ready to meet the changing needs of the public, by providing ready access to their health care needs. Thank you for your enduring care and protection for/of the people of Hawai`i. Warmest Aloha, Wailua Brandman APRN-Rx BC FAANP HAPN
Legislative Committee Chair

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morikawa2 - Shaun

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 25, 2013 11:08 AM
To: HLTtestimony
Cc: lenora@hawaii.edu
Subject: Submitted testimony for SB44 on Mar 27, 2013 10:00AM

SB44

Submitted on: 3/25/2013

Testimony for HLT on Mar 27, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Dr. Lenora Lorenzo, APRN	American Association of Nurse Practitioners	Comments Only	No

Comments: Aloha Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to testify in STRONG support of SB44 SD1, relating to Mental Health, on behalf of the Hawai'i Association of Professional Nurses (HAPN). APRNs are fully qualified to determine a persons safety and mental status. I would like to propose further amendment of this bill to include APRNs in Section 3 (a) (1) as providers who may receive the patient and the paperwork at the facility receiving the patient. In section 3 (a) (2) APRNs were inadvertently left out of the providers who may administer treatment, when SD1 was written up in the Senate Health Committee. Please include them. These services are paramount to health care consumers' access to care, and the outdated statute this bill addresses remains a barrier to APRN practice. Thank you for your enduring care and protection for the people of Hawai'i.

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Hawai'i State Center for Nursing

Written Testimony Presented Before the
House Committee on Health
March 27, 2013, 10:00 AM

By

Deborah B. Gardner, PhD, RN, FNAP, FAAN
Executive Director
Hawai'i State Center for Nursing

SB 44, SD1, RELATING TO MENTAL HEALTH

Chair Belatti, Vice Chair Morikawa and Members of the Committee on Health.

The Hawai'i State Center for Nursing (Center for Nursing) supports Senate Bill 44, SD1, to amend Section 334-59, Hawai'i Revised Statutes, relating to mental health, mental illness, drug addiction, and alcoholism, to apply to Advanced Practice Registered Nurses (APRNs). The amendments recognize APRNs as qualified healthcare professionals competent to assess whether there is probable cause to believe a person is mentally ill, imminently dangerous to self or others, gravely disabled, suffering from substance abuse, or is otherwise in need of care, treatment, or both. Additionally, APRNs will have authority to direct law enforcement officers to take the person into custody in order to deliver the person to an appropriate facility for further assessment, treatment and/or care.

Thank you for the opportunity to testify on this matter.



SB44 SD1 Relating to Mental Health Emergency Admission; Involuntary Hospitalization; Law Enforcement; Advanced Practice Registered Nurses.

- COMMITTEE ON HEALTH: Representative Belatti, Chair; Representative Morikawa, Vice Chair
- Wednesday, Mar. 27, 2013; 10:00 a.m. Room 329

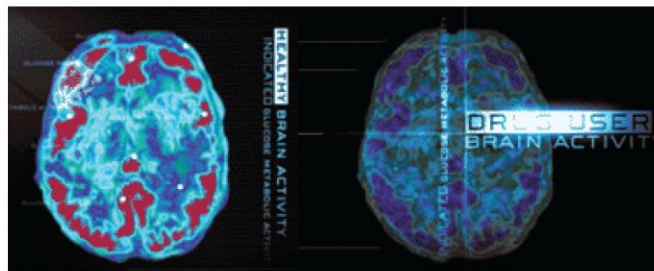
Hawaii Substance Abuse Coalition Supports SB44 SD1

Good Morning Chair Belatti, Vice Chair Morikawa and Distinguished Committee Member. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide hui of more than twenty non-profit treatment and prevention agencies.

If we are to provide quality care with meaningful outcomes, we must change and adapt our systems to facilitate appropriate care. Professional interventions are often necessary to help those individuals that may be a danger to self or others, or is gravely disabled, or is obviously ill such that they are appropriate for licensed psychiatric or APRN evaluation and possible emergency hospitalization.

Here are some reasons why this makes sense:

- *Addiction is a brain disease that results in a compulsive and obsessive action to seek and use alcohol and drugs despite negative consequences. Overwhelming cravings drive behaviors until those cravings can be stopped.*



- *The brain undergoes dramatic changes in the prefrontal cortex – this part of the brain is not functioning adequately to properly assess situations, make sound decisions, and keep emotions and desires under control.*
- *Brains under the addictive influence of drugs have abnormal messages in their nerve network that produces a greatly amplified message, disrupting communication channels. These cravings are not like a normal whispering, they are abnormally like someone shouting into a microphone into their ear.*

- *Long-term drug abuse impairs brain functioning. The brain adjusts to overwhelming surges in dopamine by producing less. The result is that the abuser feels flat, lifeless and depressed and is unable to enjoy normal pleasures.*



- *The profound changes in the brain compromise long-term health, impair cognitive functioning, disorient memory systems and make adaptations in habit.*

TREATMENT AND RECOVERY

- *Addiction can be treated successfully. Recent scientific discoveries have led to advances in treatment.*
- *The integration of substance use disorder treatment and mental health services has become a major initiative.*
- *Integrated treatment, in various settings such as residential and outpatient, include engagement, stabilization, primary treatment and continuing care.*
- *Individuals and their families can and do have meaningful lives following proper treatment and ongoing care.*

We appreciate the opportunity to provide testimony and are available for questions.



Community Alliance *for* Mental Health

Board of Directors

Anne Chipchase
President

Robert Scott Wall
Vice President

Crystal Aguinaldo
Secretary

William Lennox
Treasurer

Sunny Algosó

Jessica Carroll

Randolph Hack

Gina Hungerford

Susan King

To: The Hawai'i State House of Representatives Committee on Health
Re: SB 44, SD 1

To: The Honorable Representative Belatti and the members of the committee.

[
Aloha,

The Community Alliance for Mental Health along with United Self Help support SB 44, SD 1. We feel that this measure offers clarity in an already complex issue.

Mahalo,
Robert Scott Wall
Vice-President]

morikawa2 - Shaun

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 25, 2013 11:09 AM
To: HLTtestimony
Cc: lenora@hawaii.edu
Subject: Submitted testimony for SB44 on Mar 27, 2013 10:00AM

SB44

Submitted on: 3/25/2013

Testimony for HLT on Mar 27, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Dr. Lenora Lorenzo, APRN	Individual	Support	No

Comments: Aloha Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to testify in STRONG support of SB44 SD1, relating to Mental Health. APRNs are fully qualified to determine a persons safety and mental status. I would like to propose further amendment of this bill to include APRNs in Section 3 (a) (1) as providers who may receive the patient and the paperwork at the facility receiving the patient. In section 3 (a) (2) APRNs were inadvertently left out of the providers who may administer treatment, when SD1 was written up in the Senate Health Committee. Please include them. These services are paramount to health care consumers' access to care, and the outdated statute this bill addresses remains a barrier to APRN practice. Thank you for your enduring care and protection for the people of Hawai`i.

Please note that testimony submitted less than 24 hours prior to the hearing , improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Written Testimony Presented Before the
House Committee on Health
March 27, 2013, 10:00 AM
By
Glenda Tali, RN, APRN, MSN

SB 44, SD1, RELATING TO MENTAL HEALTH

Chair Belatti, Vice Chair Morikawa and Members of the Committee on Health. I support Senate Bill 44, SD1, to amend Section 334-59, Hawai'i Revised Statutes, relating to mental health, mental illness, drug addiction, and alcoholism, to apply to Advanced Practice Registered Nurses (APRNs). The amendments recognize APRNs as qualified healthcare professionals competent to assess whether there is probable cause to believe a person is mentally ill, imminently dangerous to self or others, gravely disabled, suffering from substance abuse, or is otherwise in need of care, treatment, or both. Additionally, APRNs will have authority to direct law enforcement officers to take the person into custody in order to deliver the person to an appropriate facility for further assessment, treatment and/or care.

Thank you for the opportunity to testify on this matter.

Hawai'i State Center for Nursing – Biomedical Sciences Building C105, Honolulu, HI 96822
Phone: (808) 956-5211 Fax: (808) 956-0547 E-mail: hscfn@hawaii.edu Website: www.hawaii-center-for-nursing.org

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Written Testimony Presented Before the
House Committee on Health
March 27, 2013, 10:00 AM
Submitted by
Barbara Molina Kooker, DrPH, APRN, NEA-BC
Vice Chair, Hawai`i State Center for Nursing

SB 44, SD1, RELATING TO MENTAL HEALTH

Chair Belatti, Vice Chair Morikawa and Members of the Committee on Health.
The Hawai`i State Center for Nursing (Center for Nursing) supports Senate Bill 44, SD1, to amend Section 334-59, Hawai`i Revised Statutes, relating to mental health, mental illness, drug addiction, and alcoholism, to apply to Advanced Practice Registered Nurses (APRNs). The amendments recognize APRNs as qualified healthcare professionals competent to assess whether there is probable cause to believe a person is mentally ill, imminently dangerous to self or others, gravely disabled, suffering from substance abuse, or is otherwise in need of care, treatment, or both. Additionally, APRNs will have authority to direct law enforcement officers to take the person into custody in order to deliver the person to an appropriate facility for further assessment, treatment and/or care.

Thank you for the opportunity to testify on this matter.

morikawa2 - Shaun

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 25, 2013 6:49 PM
To: HLTtestimony
Cc: bishopmattj@gmail.com
Subject: Submitted testimony for SB44 on Mar 27, 2013 10:00AM

SB44

Submitted on: 3/25/2013

Testimony for HLT on Mar 27, 2013 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Matt Bishop	Individual	Support	No

Comments: I am in support of this measure. This will enable APRN's to continue to act in the best interest of the patients under their care. This will also help to provide a valuable service to protect the people of the state of Hawaii.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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