

STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES

P. O. Box 339  
Honolulu, Hawaii 96809-0339

March 14, 2018

TO: The Honorable Senator Josh Green, Chair  
Senate Committee on Human Services

The Honorable Senator Rosalyn H. Baker, Chair  
Senate Committee on Commerce, Consumer Protection, and Health

FROM: Pankaj Bhanot, Director

SUBJECT: **HB 2021 HD2 – RELATING TO HOMELESS INDIVIDUALS WITH SEVERE MENTAL ILLNESS**

Hearing: Wednesday, March 14, 2018, 2:45 p.m.  
Conference Room 016, State Capitol

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) appreciates the intent of this bill and offers comments.

**PURPOSE:** The purpose of this bill requires the Department of Human Services, in consultation with the Department of Health, to establish a pilot project to operate a facility to provide shelter and mental health treatment for homeless individuals with severe mental illness who are subject to court-ordered involuntary hospitalization to a psychiatric facility. Appropriates funds.

We agree there is a gap in services for mentally or severely mentally ill (SMI) individuals who are homeless. Based on preliminary research, other similar proposals utilize a Housing First approach with extensive wrap around services for those with severe mental illness. U.S. Department of Housing & Urban Development has published reports on these types of programs and other jurisdictions have successfully established similar programs (see <http://brilliantcorners.org/brilliant-solutions/housing-services/> for a program established in

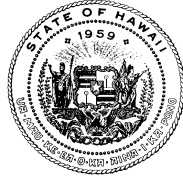
San Francisco). Also, <https://www.huduser.gov/portal/publications/hsgfirst.pdf> lists essential components for a successful program including but not limited to: direct placement into housing; mental health case management services in the community; provision of housing and treatment services separately; and careful monitoring of outcomes.

Per section 346-378, HRS, the state's Housing First program has been in operation on O'ahu for over four years (and recently expanded to neighbor islands), and has provided supportive housing to 115 chronically homeless, highly vulnerable individuals, and family members during this period. Housing retention rate of the state's Housing First program is approximately 97% – that is 97% remain housed – which far exceeds the national average of 80%.

However, to address the needs of individuals with SMI or those who are court-ordered involuntarily to treatment as proposed will require a very different skill set and expertise than the way the state's Housing First program which is voluntary, and wraps services and places individuals and families in permanent housing in private rentals throughout the community. This proposal will require DHS, DOH, and the community enough time and resources to further study the successful models highlighted above and to develop the best plan.

DHS also requests that should this measure move forward, that appropriations do not supplant budget priorities identified in the Governor's supplemental budget. As evidenced by the 2017 Point In Time Count's finding of the first *decrease* in the number of homeless counted in eight years, the coordinated homeless services system has made tremendous progress in the last four years, and requires the legislature's focus and support to maintain this momentum.

Thank you for the opportunity to testify on this bill.



**STATE OF HAWAII**  
**DEPARTMENT OF HEALTH**  
P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**TESTIMONY COMMENTING ON HB2021 HD2  
RELATING TO HEALTH**

**SENATOR JOSH GREEN, CHAIR  
SENATE COMMITTEE ON HUMAN SERVICES**

**SENATOR ROSALYN H. BAKER, CHAIR  
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH**

Hearing Date and Time: Wednesday, March 14, 2018 at 2:45 p.m. Room Number: 016

1           The Department of Health (DOH) acknowledges that homelessness is one of the  
2 State's most significant and challenging social concerns. The DOH and the Adult  
3 Mental Health Division (AMHD) partner with other state agencies and with both AMHD  
4 contracted and non-AMHD contracted community programs to address the mental  
5 health needs of individuals experiencing homelessness. Key partners include the  
6 Governor's Coordinator on Homelessness (GCH), Department of Human Services  
7 (DHS), Department of Transportation (DOT), Department of Public Safety (PSD), the  
8 City and County of Honolulu, law enforcement, and community based health and human  
9 service programs.

10           The purpose of this bill is to require the DHS, in consultation with the DOH, to  
11 establish a pilot project to operate a facility to provide shelter and mental health  
12 treatment for homeless individuals with severe mental illness who are subject to court-  
13 ordered involuntary hospitalization to a psychiatric facility pursuant to part IV of chapter

1 334, Hawaii Revised Statutes, with the goal of enabling these individuals to find  
2 permanent housing through housing first programs.

3 The AMHD appreciates the intent of this bill and offers the following comments.

4 AMHD Homeless Outreach Services

5 The AMHD continues its commitment to increasing and strengthening linkages to  
6 housing and community based referrals that support recovery. The AMHD continues to  
7 work with Projects for Assistance in Transition from Homelessness (PATH) Formula  
8 Grant Homeless Outreach providers to link homeless individuals to case management  
9 and recovery support services so that the realization of recovery may reduce the barrier  
10 of discrimination and the stigma of mental illness.

11 AMHD Homeless Outreach providers focus their outreach efforts on locating  
12 individuals who live with Serious Mental Illness (SMI), who are chronically homeless,  
13 and who meet AMHD's eligibility criteria for AMHD funded services.

14 Linkage to health care services, Social Security benefits, entitlements, workforce  
15 development, job training opportunities, emergency shelters, transitional housing,  
16 clothing, mental health treatment, substance use treatment, service coordination,  
17 collateral contacts, advocacy on their behalf, and/or assistance with finding individuals  
18 with a home in the private marketplace are examples of tasks that Homeless Outreach  
19 providers assist with. Homeless Outreach case managers help to complete

1 Supplemental Security Income (SSI)/Social Security Disability Insurance (SSDI)  
2 applications using the SSI/SSDI Outreach, Access, and Recovery (SOAR) model.

3 In 2017, AMHD provided homeless outreach services to 2,817 consumers  
4 identified as homeless on the islands of Kauai, Oahu, Maui, and Hawaii. Homeless  
5 Outreach services are accessed in a variety of ways including homeless shelters and by  
6 contacting Homeless Outreach providers directly to request assistance.

7 In addition to Homeless Outreach services, AMHD provides specialized  
8 treatment and group home housing for approximately 808 individuals, including those  
9 who living in 24 hour, 8-16 hour, and semi-independent group homes. There are over  
10 100 eligible individuals who receive supported housing/bridge subsidy through the  
11 AMHD. These individuals live with a serious mental illness (SMI) and have the option to  
12 live independently in housing of their choice with services that support their movement  
13 towards assuming the role of a neighbor or tenant. AMHD Crisis Mobile Outreach  
14 (CMO) services are available to adults in an active state of crisis.

15 Court-Ordered Involuntary Hospitalization to a Psychiatric Facility

16 In addition, Section 2, Part (a) of HB2021 HD1 states that the DHS and DOH,  
17 “shall establish a pilot project to operate a facility to provide shelter and mental health  
18 treatment for homeless individuals with severe mental illness **who are subject to**  
19 **court-ordered involuntary hospitalization to a psychiatric facility.**”

1           As defined in §334-1, Hawaii Revised Statutes, a “psychiatric facility” means a  
2 public or private hospital or part thereof which provides inpatient or outpatient care,  
3 custody, diagnosis, treatment, or rehabilitation services for mentally ill persons or for  
4 persons habituated to the excessive use of drugs or alcohol for intoxicated persons.

5           Our comments are focused on the following language in the bill: “who are subject  
6 to court-ordered involuntary hospitalization to a psychiatric facility.” If an individual has  
7 been involuntarily committed to a psychiatric facility, the individual would not be housed  
8 in the proposed pilot project’s facility, unless it is a hospital.

9           We thank the Legislature for introducing a variety of measures that aim to  
10 address the issue of homelessness in Hawaii. Respectfully, the AMHD asks for the  
11 Legislature’s support of the Governor’s Executive Budget request, SB2065/HB1900,  
12 which includes appropriations to the DHS and DOH for \$3 million for Housing First, \$3  
13 million for Rapid Rehousing, \$1.75 million for homeless outreach, and \$800,000 for  
14 outreach and counseling services for chronically homeless persons with severe  
15 substance use disorders.

16           The AMHD defers to the DHS for their preferred use of a suitable unused state  
17 facility. The DOH will be available for consultation with DHS and the Governor’s  
18 Coordinator on Homeless to coordinate services, to help design new programs, and to  
19 work with other stakeholders on this pressing social issue.

20           We thank the committee for considering our testimony.



**EXECUTIVE CHAMBERS**  
HONOLULU

**DAVID Y. IGE**  
GOVERNOR

February 23, 2018

TO: The Honorable Senator Josh Green, Chair  
Senate Committee on Human Services

The Honorable Senator Rosalyn H. Baker, Chair  
Senate Committee on Commerce, Consumer Protection, and Health

FROM: Scott Morishige, MSW, Governor's Coordinator on Homelessness

SUBJECT: **HB 2021 HD1 – RELATING TO HOMELESS INDIVIDUALS WITH SEVERE MENTAL ILLNESS**

Hearing: Wednesday, March 14, 2018, 2:45 p.m.  
Conference Room 016, State Capitol

**POSITION:** The Governor's Coordinator on Homelessness appreciates the intent of this measure, and offers comments.

**PURPOSE:** The purpose of the bill is to require DHS, in consultation with DOH, to establish a pilot project to operate a facility to provide shelter and mental health treatment for homeless individuals with serious mental illness who are subject to court-ordered involuntary hospitalization to a psychiatric facility pursuant to part IV of chapter 334, Hawaii Revised Statutes. In addition, the bill appropriates an unspecified amount for fiscal year 2018-2019 to be expended by DHS for the purposes of the pilot project, including administrative expenses and any necessary renovations to the facility.

Homelessness remains one of the most pressing challenges facing Hawaii, and the State has adopted a comprehensive framework to address homelessness that focuses on three primary leverage points – affordable housing, health and human services, and public safety. The Coordinator has worked closely with both DHS and DOH to implement this framework through the expansion of homeless outreach and other homeless programs, including services specifically targeting homeless individuals with serious mental illness and/or substance use

disorders. The coordinated efforts to implement the State's framework to address homelessness have made progress in reducing the number of homeless individuals statewide. In 2017, the statewide Point in Time (PIT) count found that the number of homeless people in Hawaii had *decreased* for the first time in eight years – a decrease of 701 people between 2016 and 2017.

However, the Coordinator is concerned about the adverse impact that an appropriation for this measure may have on priorities in the Governor's supplemental budget request for existing homeless services. Collectively, the homeless programs administered by DHS and other State agencies represent an array of financial and other resources designed to provide one-time crisis assistance, as well as medium term (3-24 months) and longer-term support. This mix of short-, medium-, and long-term assistance is designed to transition at-risk and homeless individuals and families into stable housing, and is also designed to prevent homelessness by assisting formerly homeless individuals with maintaining housing over time. Accordingly, the Coordinator respectfully requests the Legislature's support of the Governor's Executive Budget request, which includes over \$15 million for homeless services administered by DHS and DOH.

The Coordinator notes that part IV of chapter 334, Hawaii Revised Statutes (HRS), outlines a process for individuals to be involuntarily hospitalized at a psychiatric facility. As defined in HRS §334-1, a "psychiatric facility" is "a public or private hospital or part thereof which provides inpatient or outpatient care, custody, diagnosis, treatment or rehabilitation services for emotionally distressed persons, mentally ill persons or persons suffering from substance abuse." The unused residential facility, which is identified in the measure as the potential site of the proposed pilot project, does not meet this definition. In addition, the administration and oversight of a psychiatric hospital facility requires specialized skills and expertise that is beyond the current capacity of DHS, and there is substantial difference between the administration of a homeless shelter and a hospital facility.

The Coordinator further notes that HRS §334-60.6 establishes that a psychiatric facility may detain a subject for a period of no more than ninety days. As currently drafted, it is unclear whether this same ninety day period applies to the pilot program facility, or whether



the pilot program facility is intended to be a location where homeless individuals who are involuntarily hospitalized may be discharged to following the stay in a psychiatric facility.

If this measure moves forward, the Coordinator suggests clarifying whether the pilot project facility is intended to have a different definition from “psychiatric facility” as defined by HRS §334-1. In addition, the Coordinator suggests clarifying whether the pilot program is intended to serve homeless individuals during their stay in a psychiatric facility, or following their stay in a psychiatric facility.

Thank you for the opportunity to testify on this bill.



**TESTIMONY OF  
THE DEPARTMENT OF THE ATTORNEY GENERAL  
TWENTY-NINTH LEGISLATURE, 2018**

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**ON THE FOLLOWING MEASURE:**

H.B. NO. 2021, H.D. 2, RELATING TO HOMELESS INDIVIDUALS WITH SEVERE MENTAL ILLNESS.

**BEFORE THE:**

SENATE COMMITTEES ON HUMAN SERVICES AND  
COMMERCE, CONSUMER PROTECTION, AND HEALTH

**DATE:** Wednesday, March 14, 2018      **TIME:** 2:45 p.m.

**LOCATION:** State Capitol, Room 016

**TESTIFIER(S):** Russell A. Suzuki, Acting Attorney General, or  
Andrea J. Armitage, Deputy Attorney General

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Chairs Green and Baker and Members of the Committees:

The Department of the Attorney General provides these comments.

The purpose of this measure is to require the Department of Human Services, in consultation with the Department of Health, to establish a pilot project to operate a facility to provide shelter and mental health services to homeless individuals who suffer from severe mental illness, and who are subject to court-ordered involuntary hospitalization pursuant to part IV of chapter 334, Hawaii Revised Statutes (HRS). The Department of Human Services shall use a suitable unused state facility for this purpose. The pilot project shall last for an unspecified period of time. The bill appropriates an unspecified amount for fiscal year 2018 – 2019 to establish the pilot project, to be expended by the Department of Human Services.

This measure aims to create an alternative placement for the involuntary civil commitment of homeless persons who have a severe mental illness. There is one legal problem with this approach. Section 334-60.5(j), HRS, requires that persons subject to an involuntary civil commitment order be "hospitalized" in a "psychiatric facility." Section 334-60.5(j) provides:

If the court finds that the criteria for involuntary hospitalization under section 334-60.2(1) has been met beyond a reasonable doubt and that the criteria under sections 334-60.2(2) and 334-60.2(3) have been met by clear and convincing evidence, the court may issue an order to any

law enforcement officer to deliver the subject to a facility that has agreed to admit the subject as an involuntary patient, or if the subject is already a patient in a **psychiatric facility**, authorize the facility to retain the patient for treatment for a period of ninety days unless sooner discharged.  
[Emphasis added.]

Section 334-1, HRS, defines "psychiatric facility" as "a public or private **hospital** or part thereof which provides inpatient or outpatient care, custody, diagnosis, treatment or rehabilitation services for mentally ill persons or for persons habituated to the excessive use of drugs or alcohol or for intoxicated persons." [Emphasis added.] The facility envisioned by this bill does not appear to be a hospital as required by the definition of psychiatric facility in section 334-1, HRS. It would have to be a facility that is licensed by the Department of Health pursuant to section 334-21, HRS ("licensing of psychiatric facilities"), and chapter 11-93, Hawaii Administrative Rules ("broad service hospitals").

We recommend that the Committees omit the requirement that in order to qualify for this project the person must be involuntarily hospitalized pursuant to part IV of chapter 334, HRS. Specifically, we recommend deleting the phrase, "who are subject to court-ordered involuntary hospitalization pursuant to part IV of chapter 334, Hawaii Revised Statutes" in section 1, on page 2, lines 8 – 10, and deleting the phrase, "who are subject to court-ordered involuntary hospitalization to a psychiatric facility, pursuant to part IV of chapter 334, Hawaii Revised Statutes" in section 2, on page 2, lines 15 – 17.

We respectfully request that the Committee consider our comments.

**HB-2021-HD-2**

Submitted on: 3/12/2018 4:34:13 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Corey Arakaki	Testifying for NAMI Hawaii	Comments	No

Comments:

**The main problem, the Attorney General says, is that there must be a hospitalization in a psychiatric facility licensed by the Department of Health. Please change the language of the bill and require the Department of Health to administer this much needed pilot project. Why?**

**1) Because there obviously many, many more persons in Hawaii, many on the street, who need this type of long term care in such a facility, but never get the opportunity to get treatment/humane assistance due to the very cumbersome civil legal commitment process, including the outpatient assistance law which is currently underperforming.**

**2) The vision for the State Hospital expansion shamefully fails to include non-forensic court-ordered involuntary commitment in its plans/budget.**

**I strongly urge passage now. Also, I strongly recommend not only an audit of its performance, but a task force to study the entire civil commitment program, to include housing and services for individuals subject to non-forensic court-ordered involuntary commitment, including the outpatient assistance law which is currently underperforming ..**

**Thank you for passing this bill.**



# **Hawai'i Psychological Association**

*For a Healthy Hawai'i*

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P.O. Box 833  
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Phone: (808) 521-8995

**SENATE COMMITTEE ON HUMAN SERVICES**  
**Senator Josh Green, Chair**  
**Senator Stanley Chang, Vice Chair**

**SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND  
HEALTH**  
**Senator Rosalyn H. Baker, Chair**  
**Senator Jill N. Tokuda, Vice Chair**

**Testimony in Support of HB 2021\_HD2**  
Wednesday, March 14, 2018, 2:45 pm  
Conference Room 016

The Hawai'i Psychological Association (HPA) supports House Bill 2021\_HD2 which requires the Department of Human Services, in consultation with the Department of Health, to establish a pilot project to operate a facility to provide shelter and mental health treatment for homeless individuals with severe mental illness who are subject to court-ordered involuntary hospitalization to a psychiatric facility.

Severe mental illness is significantly more prevalent among the homeless than the general population. According to the 2017 Hawai'i statewide homeless point-in-time conducted in January 2017, there are 7,220 homeless individuals in the state of Hawai'i, the highest per capita rate of homelessness in the nation. In fiscal years 2014 and 2015, the Queen's Medical Center reported treating 3,441 patients who were homeless.

HB 2021\_HD2 would create a structured format for providing shelter and treatment to the members of the community with the greatest need and the fewest resources. Doing so could ultimately lead to significant cost savings for the community and its health care system.

For these reasons, we respectfully urge you to support HB 2021\_HD2.

Respectfully submitted,

Julie Y. Takishima-Lacasa, PhD  
Chair, Legislative Action Committee  
Hawai'i Psychological Association

**HB-2021-HD-2**

Submitted on: 3/13/2018 11:51:03 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Connie Mitchell	Testifying for IHS, The Institute for Human Services	Support	Yes

Comments:

IHS supports strongly with suggested amendments.

We believe the bill should be focused on supporting the stabilization of homeless persons with severe illness or substance abuse that are subject of an Assisted Community Treatment order or guardianship instead of or in addition to involuntary commitment. Involuntary commitment needs to take place in a hospital. Assisted Community Treatment could take place in a community based setting. Such an order follows them wherever they go.

We also believe the State should contract services instead of running the program/shelter themselves at a State facility. Allows more flexibility to the implementation. Thank you.

**HB-2021-HD-2**

Submitted on: 3/13/2018 2:40:11 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	Testifying for OCC Legislative Priorities Committee, Democratic Party of Hawai'i	Support	No

Comments:

To the Honorable Josh Green, Chair; the Honorable Stanley Chang, Vice Chair, and Members of the Senate Committee on Human Services:

To the Honorable Rosalyn H. Baker, Chair; the Honorable Jill N. Tokuda, Vice Chair, and Members of the Senate Committee on Consumer Protection and Health:

Good afternoon. My name is Melodie Aduja. I serve as Chair of the Oahu County Committee ("OCC") Legislative Priorities Committee of the Democratic Party of Hawaii ("DPH"). Thank you for the opportunity to provide written testimony on **HB2021 HD2** relating to Individuals with Severe Mental Illness; Homeless; Facility; Appropriation; Department of Human Services; and the Department of Health.

The OCC Legislative Priorities Committee is in support of **HB2021 HD2** and is in favor of its passage.

**HB2021 HD2** is in accord with the Platform of the Democratic Party of Hawai'i ("DPH"), 2016, as it requires the Department of Human Services, in consultation with the Department of Health, to establish a pilot project to operate a facility to provide shelter and mental health treatment for homeless individuals with severe mental illness who are subject to court-ordered involuntary hospitalization to a psychiatric facility and it appropriates funds.

Specifically, the DPH Platform provides that "[w]e also support the establishment of adequate mental health and statewide drug rehabilitation programs set up in conjunction with policing policies aimed at enabling all that seek assistance to obtain whatever support assistance is needed to allow them to remain free of drug dependence." (Platform of the DPH, P. 7, Lines 386-387 (2016)).

Given that **HB2021 HD2** requires the Department of Human Services, in consultation with the Department of Health, to establish a pilot project to operate a facility to provide shelter and mental health treatment for homeless individuals with severe mental illness who are subject to court-ordered involuntary hospitalization to a psychiatric facility and it appropriates funds, it is the position of the OCC Legislative Priorities Committee to support this measure.

Thank you very much for your kind consideration.

Sincerely yours,

/s/ Melodie Aduja

Melodie Aduja, Chair, OCC Legislative Priorities Committee  
Email: [legislativepriorities@gmail.com](mailto:legislativepriorities@gmail.com), Text/Tel.: (808) 258-8889



**HB-2021-HD-2**

Submitted on: 3/12/2018 12:53:45 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Erich Wida	Testifying for Kailua Laundromat	Support	No

Comments:

The same handful of insane individuals have been roaming our streets for years. Screaming at and threatening people and tourists. Affecting my business in many negative ways. Please finally DO SOMETHING!

**HB-2021-HD-2**

Submitted on: 3/12/2018 7:49:01 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Steven P. Katz	Testifying for NAMI Hawaii	Support	No

Comments:

My name is Steven Katz. I testify both personally and as the First Vice President of the Hawaii Chapter of The National Alliance on Mental Illness. I also testify as a Licensed Marriage and Family Therapist practicing in Kailua and Hawaii Kai. I further testify as the parent of a son with a severe mental illness. Simply put, this bill will save lives. Every year people with severe mental illness die in Hawaii because there is no where they can stay where they get help. I lost a patient to suicide last year. He could not stay in a facility because he was "smart enough" to tell people he was not thinking of suicide. He obviously needed help. There was no where for him to live where he would get that help. My son lived in a tent in the Pali rain forest because he refused help. Every month as the Windward Support Group facilitator I hear stories from the loved ones of people with schizophrenia, schizoaffective disorder, chronic depression, bipolar disorder share heart-wrenching stories of their family members who are lost somewhere in the community wandering around without getting help. Just yesterday I witnessed a confrontation between a Honolulu Police officer and someone in a state of florid delusions. The officer was faced with the no-win situation of arresting this person for trespassing in the Home Depot parking lot when she refused to leave. Arrest would have continued the cycle of spending countless thousands of dollars in taking the person to Queens Hospital, where she would be kept for 72 hours and then released because she was not deemed a threat to herself or others. After release, she would get arrested again. It is about time we tried something different. I urge you to pass this bill.  
Steven Katz, LMFT, Kailua, HI

Committee on Human Services  
Senator Joss Green, Chair

Committee on Commerce, Consumer Protection and Health  
Senator Rosalyn Baker

Wednesday, March 14, 2018  
Conference Rm 016

**From:** C. Malina Kaulukukui

**Submitted on:** March 12, 2018

**Re:** HB2021HD2: Relating to Homeless Individuals with Severe Mental Illness

**Position:** Support, with comments

Aloha, Chairs Green and Baker and members of the committees. I am testifying as an individual, although I am a member of a Kailua citizens group organized under the auspices of the Kailua Neighborhood Board to address the growing issues of homelessness in the Windward area. I support the objective of this bill to integrate housing with mental health services to a population that may benefit from extended treatment.

As a psychiatric social worker who formerly worked in the Adult Mental Health Division of the Department of Health (DOH), I am concerned that the bill's language of involuntary hospitalization triggers subsequent requirements that will be difficult to meet. Hopefully, this bill can be amended to comport with statutory requirements and still establish a much-needed level of mental health care. This is a long-range proposal that can have great benefits to our homeless citizens with severe mental illness. It has the potential to be a well-developed, thoughtful endeavor.

**HB-2021-HD-2**

Submitted on: 3/11/2018 10:27:13 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Judy Fujimoto	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/11/2018 11:13:45 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Raelyn Reyno Yeomans	Individual	Comments	No

Comments:

I am submitting testimony to the Committee On Human Services and Committee on Commerce, Consumer Protection, and Health in opposition to HB2021 HD2 as the bill is unclear as to whether the proposed pilot project is to be a voluntary or involuntary facility. As pointed out by much of the written testimony on file, involuntary treatment should be within a hospital type setting (psychiatric hospital). This makes sense if an individual is to be held against their will and forced to take psychiatric treatment. The nature of involuntary psychiatric treatment would require a locked facility so maybe this bill is the wrong vehicle to meet the requirements of our state laws for involuntary treatment. Otherwise, I am aware and supportive of the need for more mental health facilities in general. Please look to states like California which have "private" locked psychiatric facilities with contracted state beds for individuals needing involuntary psychiatric treatment in a structured "medical" type setting that also addresses the need for social and emotional treatment. ( Example - Riverside Behavioral Healthcare Center, an approximately 120 bed nursing type facility in Riverside, California). Hawaii would be greatly served by facilities such as this as well as a network of regulated and Licensed "Board and Cares" for the mentally ill.

Thank you-

Raelyn Reyno Yeomans

**HB-2021-HD-2**

Submitted on: 3/12/2018 7:01:25 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Barbara Pence	Individual	Support	No

Comments:

I support this bill involving treatment for the mentally ill homeless, and encourage your passing this bill. Mahalo.

**HB-2021-HD-2**

Submitted on: 3/12/2018 7:08:35 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
ANSON REGO	Individual	Support	No

Comments:

This bill has the support of the mental health community and recognizes a tragic and substantial problem in our States mental health care. to wit: "The State of Hawaii has always authorized the involuntary commitment of individuals to mental health services. However, no mental health service providers in Hawaii currently provide housing and services for individuals subject to non-forensic court-ordered involuntary commitment. By establishing a pilot project to provide housing and mental health treatment for homeless individuals with severe mental illness, the State can directly place these individuals into housing and provide mental health care services in a timely and impactful manner."

**The main problem, the Attorney General says, is that there must be a hospitalization in a psychiatric facility licensed by the Department of Health. Please change the language of the bill to require the Department of Health to administer this much needed pilot project.**

**Why?**

**1) Because there obviously many, many more persons in Hawaii, many on the street, who need this type of long term care in such a facility, but never get the opportunity to get treatment/humane assistance due to the very cumbersome civil legal commitment process, including the outpatient assistance law which is currently underperforming.**

**2) The present vision for the State Hospital expansion shamefully fails to include non-forensic court-ordered involuntary commitment in its plans/budget.**

**I strongly urge passage now. Also I strongly recommend not only an audit of its performance, but a task force to study the entire civil commitment program, to include housing and services for individuals subject to non-forensic court-ordered involuntary commitment, including the outpatient assistance law which is currently underperforming .**

**Thank you for passing this bill.**

**Anson Rego**

**Nami Member, Waianae Attorney**



**HB-2021-HD-2**

Submitted on: 3/12/2018 8:28:40 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Paul Topalian	Individual	Support	No

Comments:

Full supportive of HB2021 and the legislative efforts tied to it by Representative Cynthia Thielen

**HB-2021-HD-2**

Submitted on: 3/12/2018 8:57:01 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
jillian	Individual	Support	No

Comments:

As a facilitating member of the Kailua Neighborhood Board's subcommittee on homelessness, my personal research has found that homeless with mental health issues do not currently have an infrastructure that allows them to benefit from assistance that can truly help them to rejoin society. This bill will help these members of our community to get the treatment that they need and help shine the spotlight on our nation's limited resources for those suffering from severe mental health issues.

**HB-2021-HD-2**

Submitted on: 3/12/2018 11:30:51 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Gay Mc Phail	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/12/2018 11:31:56 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Catherine Sato	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/12/2018 12:06:32 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Marty Gaucher	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/12/2018 12:12:59 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
phuong matsuura	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/12/2018 12:30:20 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Thuy Martines	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/12/2018 12:57:31 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Marisel Arquette	Individual	Support	No

Comments:



**HB-2021-HD-2**

Submitted on: 3/12/2018 1:22:50 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Patti Kountz	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/12/2018 1:34:03 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Pressie Tolentino	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/12/2018 1:55:00 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Donlei Darnell	Individual	Support	No

Comments:

Help is needed before there is an avoidable event.....when proper care can prevent a possible tragedy. Something that could be a lose-lose situation!

**HB-2021-HD-2**

Submitted on: 3/12/2018 2:00:45 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Judith A Mick	Individual	Support	No

Comments:

I ask that you support HB2021 as a way for us to provide help for our mentally ill homeless. It is not enough that we just move them from one area to another - such as away from the Lanihuli apartments in Kailua where elderly residents are afraid to go outside do to past conflicts with aggressive homeless- but we must have a facility where we can help them and they can become productive community members. They deserve our help. Mahalo. Judy Mick, Kailua

**HB-2021-HD-2**

Submitted on: 3/12/2018 3:12:34 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Brenda Smith	Individual	Support	No

Comments:

Please help give the homeless needed mental health treatment AND keep our beaches and neighborhoods safer! Thank you.

**HB-2021-HD-2**

Submitted on: 3/12/2018 5:05:50 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Levani	Individual	Support	No

Comments:

I am submitting testimony in support of HB2021 HD2. I hope that this bill will be amended to ensure that chronically homeless persons who have serious mental illness and are subject to court ordered treatment be afforded an appropriate place to be treated and stabilized so that they might be reintegrated into the community with much lower risk of being arrested or requiring hospitalization.

We know that the plight of the homeless is a serious issue affecting communities all over our islands. We also know that many citizens are living in fear. This community based treatment could help reduce criminalization of chronically mentally ill as well as help reduce the cost of repeated emergency visits to the emergency room.

Thank you for the opportunity to submit testimony.

/Levani Lipton/

**HB-2021-HD-2**

Submitted on: 3/12/2018 5:15:04 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Lisa Lange	Individual	Support	No

Comments:

It has gotten out of hand. We need to make changes. Thank you.

**HB-2021-HD-2**

Submitted on: 3/12/2018 11:42:51 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Dana K. Anderson	Individual	Support	No

Comments:

There is a criticaal need for treatment and housing and infrastructure to support those with severe mental illness and who are homeless. NOW is the time to act, please.



H.B 2021 HD2 - RELATING TO HOMELESS INDIVIDUALS WITH SEVERE MENTAL  
ILLNESS.

Hawaii Senate Committee on Human Services,  
Senate Committee on Commerce, Consumer Protection, and Health  
MARCH 14, 2018 - 2:45PM  
CONFERENCE ROOM 016

Dear Chair Green and Baker, and Members of the Committee,

My name is Jennifer Hsu and I first would like to thank the Committee for the opportunity to testify in **support** on House Bill No. 2021 HD2. In 2014, the Assisted Community Treatment Act (ACT) was passed. While the intention behind the ACT was good, the lack of available shelters and funding debilitated the ACT. Since its passing date in 2014, there were only 2 cases of individuals being enrolled into ACT so there are no information on the success rate of the program.

Because being enrolled into ACT requires a court order and analysis of their condition, volunteers struggle with finding people who are willing to do it free of charge. Volunteer Services of Hawaii is the one agency helping homeless on the street. They struggle with getting attorneys to accept cases pro bono as hiring an attorney is expensive, and a luxury many of those on the street, or with family members on the street, cannot afford. In addition, ACT cannot function without adequate mental health services. With the current administration looking at cutting the funding for social services, this will only negatively impact homeless individuals who suffer from dual diagnosis. The State itself is seeing an overcrowded problem within its own hospitals and is in need of more resources.

By establishing a pilot project to provide housing and mental health services for homeless individuals, the State can begin covering the gaps within the system.

I have some concerns regarding Section 2 B:

- While I understand it is a pilot program, I believe that the number of beds made available should also remain flexible. A facility has yet to be found, and by leaving it flexible, it can allow the program to admit more patients if they have the space.

I respectfully ask for your support of House Bill 2021 HD2: Relating to homeless individuals with severe mental illness. Thank you for this opportunity to provide testimony.

Sincerely,  
Jennifer Hsu

**HB-2021-HD-2**

Submitted on: 3/13/2018 10:20:58 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
maile akita	Individual	Support	No

Comments:

**HB-2021-HD-2**

Submitted on: 3/13/2018 10:02:05 AM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Scott Fleming	Individual	Support	No

Comments:

This is, sadly, a very necessary adjunct to any strategy to solve the large problem of homelessness.

Date: March 13, 2018

To: Senate Committee on Human Services  
Senate Committee on Commerce, Consumer Protection and Health

From: Mike Durant

Subject: Testimony in support of HB2021 HD2

I strongly support this bill. When people with a severe mental illness are released from the hospital they must have a place to go to continue their recovery. Releasing them onto the streets only insures they will return to the hospital soon. I had a son who suffered from schizophrenia and I know how important follow up treatment is. I am a member NAMI (National Alliance on Mental Illness) Hawaii.

Sincerely, Mike Durant

**HB-2021-HD-2**

Submitted on: 3/13/2018 12:34:19 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Al Smith	Individual	Support	Yes

Comments:

I am writing in strong support of HB2021 HD2.

While I happen serve on the Kailua Neighborhood Board and serve also on the KNB Subcommittee on Homelessness, I want to be clear that I speak only for myself in this matter.

The reason behind my support is entirely personal. You see, my very own brother who by even conventional standards is a superb genius, struggled with mental health issues that lead to drug abuse and eventual homelessness. Meanwhile, I, his brother, an Investment Banker with a depth of contacts and personal resources sufficient for what I considered almost any personal challenge, found myself unable to pull him out of his downward spiral. I was willing to commit every last thing I had to pulling him out of his poverty and growing societal alienation, but alas nothing in my reach could help him.

I last saw my brother at that time as a 6'3" heroin addict who was 120 lbs maximum (previously a highschool athlete who weighed 200 lbs + his entire adult life) after chasing him into a - for lack of a better term - 'crack house' - and begging him in front of drugged-out zombies to come with me. In his diminished mental state I'm not sure he even knew who I was. I uttered that night what I believed to be my last good-bye to my brother. My older brother. My hero. The guy everyone had wanted so badly to be around - or be. The guy who could pick up a guitar and perfectly play Jimi Hendrix riffs after hearing them twice. The guy who was a Lacrosse Star and who tested at levels that would have put him in Mensa (had he been interested.) He was going to die and there was nothing that I, our brothers and sisters, our parents, or our friends could do about it.

And then about a week later it happened. He was involuntarily incarcerated. Unlike the purpose of this bill, his incarceration was not to address his mental struggles and attempt to end his poverty, but an arrest for being the buyer in a drug sting operation.

His public defender counseled me that he would end up receiving no jail time as he was buying a single dose and that I could bail him out immediately for \$600.

That led to the single hardest decision of my life...

I had to tell my siblings, my parents, and our friends that should anyone bail my brother out that I would at best never speak to them again. Many compassionate voices begged me to reconsider.

"He'll never survive 3 or 4 months in a Baltimore jail."

"How on Earth could you do that to him? He's your brother for goodness sakes?"

I held firm and my brother awaited trial for those long months inside of a prison. Meanwhile the rest of us still had to live our lives. But how can you enjoy a single moment or go about your day when you know that your closest blood relative is suffering and that you hold the key to release him of his suffering at any moment and yet do nothing?

I hated those months.

But I also knew that breaking the cycle and getting him institutionalized was the only way to truly save his life.

After his release he was set to be homeless again as all bridges had been burned. But with a sober mind (and needed medication) he was now trying to take care of himself. He checked into a Mission and after many months finally left, met the girl of his dreams, and has earned his real estate license and is careful to always be sure to be on top of his medication.

I truly believe my brother would not be alive today without that involuntary hold. I wish desperately that it had not been prison. What he needed was help. The scars from his prison experience will never truly go away.

I have to live with that. But what I can do is work towards seeing that the system is modified to allow for a more humane way to assist those with mental health issues to build a more sustainable future for themselves - even if it requires a dramatic new beginning.

I thank you for your time and consideration.

Alexander W. Smith

Kailua, HI

[alexanderwilliamsmith@yahoo.com](mailto:alexanderwilliamsmith@yahoo.com)

301.606.3355



**HB-2021-HD-2**

Submitted on: 3/13/2018 1:18:34 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Gaudy Amaya	Individual	Support	Yes

Comments:

HB2021 HD2

Relating to Homeless Individuals with Severe Mental Illness

March 14, 2018 -2:45PM

Conference Room 016

Good Afternoon Senator Green and Senator Baker, and other distinguished Committee Members, I want to thank you for this opportunity to address HB 2021 HD2.

My name is Gaudy Amaya and I'm testifying in support of House Bill 2021 HD1, relating to Homeless individual with severe mental illness.

It's no secret that Hawaii is facing a homelessness crisis, we see it in every corner of this beautiful state. Even though Hawaii has made an effort to eradicate the prevalent widespread of homelessness, its efforts have been futile.

I believe the pilot program, would be beneficial, because individuals would have access to supportive housing and treatment services. It would be a step forward to overcome this problem, in conjunction of other great pilots, such as the Senate Bill 2374, which targets high-risk, frequent 911 callers, many of whom are homeless, to connect them with primary care or mental health services.

I have some concerns regarding Section 2 C:

My concern is, what is considered to be a suitable state facility, because I have visited some homeless facilities and I didn't find them to be suitable.

I respectfully ask for your support of House Bill 2021 HD2: Relating to homeless individuals with severe mental illness. Thank you for this opportunity to provide testimony.

Respectfully,

Gaudy Amaya



**HB-2021-HD-2**

Submitted on: 3/13/2018 2:33:55 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Janine Tully	Individual	Support	No

Comments:

In strong support.

I have personally witnessed the pain that such a condition and situation brings to families.

Thank you,

Janine Tully

(808) 282-5914

**HB-2021-HD-2**

Submitted on: 3/13/2018 5:35:42 PM

Testimony for HMS on 3/14/2018 2:45:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Marianne	Individual	Support	No

Comments:



HAWAII SUBSTANCE ABUSE COALITION

## **HB2021 HD2 Homeless Pilot for Facility for SMI**

COMMITTEE ON HUMAN SERVICES

- Senator Josh Green, Chair; Senator Stanley Chang, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

- Senator Rosalyn Baker, Chair; Senator Jill Tokuda, Vice Chair
- Wednesday, March 14, 2018: 2:45 pm.
- Conference Room 016

### **Hawaii Substance Abuse Coalition (HSAC) Supports HB2021 HD2:**

*GOOD MORNING CHAIRS, VICE CHAIRS AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization of almost 40 non-profit alcohol and drug treatment and prevention agencies.*

HSAC recommends adding language to include substance use disorders. Given the data, there is a very high probability that substance abuse or addiction is prevalent with the population. Including such treatment will greatly increase the potential for positive outcomes.

HSAC supports non-forensic court-ordered involuntary commitment for people with severe mental illness. Housing and treatment are essential. We need such programs to help us “bend” the cost curve by helping people who are high end users of emergent and frequent care.

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