



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
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Testimony in SUPPORT of H.B. 0035 H.D. 1
RELATING TO MENTAL HEALTH

REPRESENTATIVE SYLVIA LUKE, CHAIR
HOUSE COMMITTEE ON FINANCE

Hearing Date and Time: Friday, February 21, 2020 at 1:30 p.m.

Room: 308

1 **Department Position:** The Department of Health (“Department”) strongly supports this
2 measure and offers the following testimony.

3 **Department Testimony:** The subject matter of this measure intersects with the scope of the
4 Department’s Behavioral Health Administration (“BHA”) whose statutory mandate is to assure a
5 comprehensive statewide behavioral health care system by leveraging and coordinating public,
6 private and community resources. Through the BHA, the Department is committed to carrying
7 out this mandate by reducing silos, ensuring behavioral health care is readily accessible, and
8 person centered. The BHA’s Adult Mental Health Division (“AMHD”) provides the following
9 testimony on behalf of the Department.

10 The Department strongly supports the use of expenditures from the Mental Health and
11 Substance Abuse Special Fund in order to support capital improvement projects which include:
12 1) sub-acute stabilization beds, also known as crisis stabilization beds, and 2) sustaining existing
13 program operations. Sub-acute stabilization facilities have been a critical missing component of
14 the state’s continuum of care. These services are designed to assist individuals experiencing
15 behavioral health crisis and first responders, such as law enforcement, in effectively managing
16 and mitigating their impact. Individuals who live with behavioral health issues have better
17 outcomes when they receive the appropriate level of care depending on their clinical needs and
18 assist them in achieving community reintegration and long-term community tenure.

1 The Department, in collaboration with state agency partners through the task force and
2 working group of Act 90 and Act 263 Session Laws of Hawaii 2019, recognizes that the lack of
3 short-term stabilization services throughout the state creates unnecessary burdens on
4 emergency departments, law enforcement, and individuals living with behavioral health issues.
5 Long-term mental health recovery and community reintegration can be achieved through
6 appropriate clinical intervention and consistent flow through a care continuum based on clinical
7 need and level of care.

8 Short-term residential stabilization beds provide a sub-acute level of care for individuals
9 whose behavioral health issues do not meet medically necessary criteria for acute
10 hospitalization but whose presentation and current medical status are not conducive or
11 appropriate for community-based services such as low intensity residential, or outpatient
12 services.

13 Utilizing the Mental Health and Substance Abuse Special Fund to support new capital
14 improvement projects, including sub-acute stabilization services, and to sustain existing
15 program operations will enhance the state's current care continuum by helping to reduce
16 unnecessary emergency department admissions, promoting jail diversion opportunities, and
17 better assisting individuals with behavioral health issues to be appropriately triaged through a
18 statewide coordinated care continuum.

19 **Offered Amendments:** None.

20 Thank you for the opportunity to testify on this measure.

21 **Fiscal Implications:** The use of the Mental Health and Substance Abuse Special Fund for capital
22 improvement projects will allow for a reduction in the utilization of higher level services, such
23 as emergency departments and jails, by individuals who can be served appropriately through
24 sub-acute stabilization services and transitional placement units while maintaining current
25 general fund appropriation levels for the BHA. There are other measures being heard by the

1 legislature that allow the Department to use the Mental Health and Substance Abuse Special
2 Fund for the purposes described in this measure including H.B. 2022 H.D. 1, and S.B. 2506 S.D.1.
3 The Department respectfully requests that beyond legislative approval of use of the special
4 fund for these purposes that any additional appropriations made available through this
5 measure do not supplant budget priorities identified in the Governor's executive budget.

HB-35-HD-1

Submitted on: 2/19/2020 5:46:36 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Hawaii Disability Rights Center	Support	No

Comments:

We have long advocated for the need for crisis stabilization beds and other forms of treatment in the community. If this special fund can be tapped for that we think that is an excellent idea.



HB35 HD1 Special Fund for Mental Health and Substance Use Disorders

COMMITTEE ON FINANCE:

- Rep. Sylvia Luke, Chair; Rep. Ty Cullen, Vice Chair
- Thursday, Feb. 21st, 2020: 1:30 pm
- Conference Room 308

Hawaii Substance Abuse Coalition Recommends and Supports HB35 HD1:

GOOD MORNING CHAIR, VICE CHAIR 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 over 30 non-profit alcohol and drug treatment and prevention agencies.

HSAC recommends that private non-profits could operate state facilities for underused beds and could supplement state funding, including fund raising to remodel as well as accessing non-state funds to support operations.

The reasons for creating Subacute Residential Stabilization Services and Transition Placement services is that we need to help our current systems that are overwhelmed with high utilizers of expensive emergent care for people with chronic conditions of mental health and substance use disorders.

- High utilizers typically are vulnerable populations with complex problems involving high behavioral health needs and multiple chronic conditions. Due to these complicated medical needs, such patients tend to heavily rely on ER facilities and are difficult to engage in ongoing care, especially with primary care providers.¹
- The emergency department is the last-resort healthcare where 5% of patients account for 25% of the visits. These are medically and socially complex patients. The Agency for Healthcare Research and Quality (AHRQ) indicated that in 2010, the top 1% of high cost patients accounted for 21.4% of total healthcare spending at an average annual cost of \$87,570.²

Government resource expenditures for high utilizers are huge.

- Across three systems: healthcare (emergency care), criminal justice (including law enforcement, courts and corrections) and homelessness, high utilizers tax state [and city]

¹ Colonial Penn Center: Leonard Davis Institute for Health Economics (2016): Targeting High Utilizers of Health Care <https://ldi.upenn.edu/sumrblog/targeting-high-utilizers-health-care>

² ECG Management Consultants: Siemens Healthineers Company: Rethinking Care for Emergency Department Super Utilizers in a Value-Based World (2016). <https://www.ecgmc.com/thought-leadership/articles/rethinking-care-for-emergency-department-super-utilizers-in-a-value-basedworld>

mental health services yet still don't get adequate care for the severe often untreated mental illness and substance use disorders.³

- Police are overwhelmed with responding to crisis situations with homeless people who have a drug induced psychosis from being high on methamphetamine. Frequently, such homeless are recycling through emergency care.

Complex Patients need multiple levels of care to meet their individual need.

- Stabilization beds are a level of care that is needed for high end utilizers because we have high levels of care for acute emergent needs and then the only option for them is to step down to a lower more stabilized level of care when they are not yet stabilized.
- Given that the only option for people with high acuity, multiple chronic conditions is emergent care or treatment, they are often placed into higher levels of expensive, emergent care for a longer period of time or more likely, they are discharged from expensive, emergent care in a very short time and released back to the community rather than accessing treatment that requires some functionality and motivation.
- We need to implement the appropriate short term level of care to stabilize such patients until they can transition into residential or outpatient treatment services.

Patients can start with a Subacute Residential Stabilization level of care or transition down from emergent care.

- Emergency rooms are over utilized in some situations because it is the most accessible part of the system. Some patients need stabilization not emergent care.
- Other patients can transition to this care once their immediate crisis is addressed after emergent care. A post-stabilization period is often needed because their treatment goals have not been addressed in short term emergent care.

Without treatment options, the patient will not progress towards recovery but regress and end up back in the emergency department.

- This tragic cycle occurs because we have failed to stand up enough options that are accessible in the community.
- There needs to be options so that a "warm handoff" to a community setting can be made after stabilization to continue treatment and reduce the risk of recurrence of crisis acute admissions.

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

³ WHYY: PBS/NPR: High Utilizers tax state mental health services, but still don't get adequate care. <https://whyy.org/articles/high-utilizers-taxstate-mental-health-services-but-still-dont-get-adequate-care/>

HB-35-HD-1

Submitted on: 2/19/2020 10:50:17 AM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
David Deges	Hawaii Island HIV/AIDS Foundation	Support	No

Comments:

HB-35-HD-1

Submitted on: 2/19/2020 8:14:16 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Katrina Obleada	Hawaii Psychological Association	Support	No

Comments:



CATHOLIC CHARITIES HAWAI'I

TESTIMONY IN SUPPORT OF HB 35 HD1: RELATING TO MENTAL HEALTH

TO: Representative Sylvia Luke, Chair, Representative Ty J.K. Cullen, Vice Chair,
and Members, Committee on Finance
FROM: Rob Van Tassell, President and CEO, Catholic Charities Hawai'i
Hearing: Friday, 2/21/20; 1:30 PM; CR 308

Chair Luke, Vice Chair Cullen, and Members, Committee on Finance:

Thank you for the opportunity to provide testimony **in strong support of HB 35, HD1**, which authorizes expenditures from the mental health and substance abuse special fund to be used for capital improvement projects. I am Rob Van Tassell, with Catholic Charities Hawai'i. We are a member of Partners in Care. **This bill is an important part of the shared vision of all Hawai'i counties, Partners in Care and the Hawaii Interagency Council on Homelessness.**

Catholic Charities Hawai'i (CCH) is a tax exempt, non-profit agency that has been providing social services in Hawai'i for over 70 years. CCH has programs serving elders, children, families, homeless, and immigrants. Our mission is to provide services and advocacy for the most vulnerable in Hawai'i. Catholic Charities Hawai'i has a long history of working in the areas of affordable housing and homelessness.

Crisis stabilization beds are urgently needed but are not available in Hawai'i. There is a gap in services for homeless folks who are in crisis but who do not need acute hospitalization due to mental illness or substance abuse. Yet lower level community treatment programs are not sufficient. Unfortunately, these vulnerable homeless people often return to the streets and then suffer from a cycle of relapse and decompensation. The Oahu homeless Point in Time count reported that 36.4% of homeless single adults suffer from some type of mental illness. The intersection of homelessness and behavioral health conditions contributes to Hawaii having the second highest rate of per capita homelessness in the nation. The task force/working group created last year by the legislature to review the behavioral system of care, has highlighted the need in Hawaii for a coordinated network of stabilization beds for those struggling with substance abuse, mental health conditions and homelessness.

The funding in the bill would enable capital improvements in existing state facilities that have underutilized bed space to create this missing inventory of crisis stabilization beds. What a win-win solution: invest to provide a much needed resource to bridge this gap in services and end the repeated cycle of relapse for many of these vulnerable homeless.

While housed in these transitional placements, these individuals can receive outreach, housing navigation and other services from the homeless continuum. HB 35 would provide for the facility development that would enhance coordination between the behavioral health continuum and homeless services continuum to better serve these very vulnerable homeless people.

We urge your support for HB 35, HD1. Please contact our Legislative Liaison, Betty Lou Larson at (808) 373-0356 if you have any questions.



HB-35-HD-1

Submitted on: 2/19/2020 10:58:51 AM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Patrick F. Hurney	Habitat for Humanity Hawaii Island, Inc.	Support	No

Comments:

Aloha from Hawaii Island,

I strongly support HB 35. We need more funding for mental health and substance abuse facilities. It would provide more opportunities for individuals to get off the streets and end the homeless issues that we deal with every day.

Please pass HB 35

Mahalo

Patrick Hurney

TESTIMONY IN SUPPORT OF HB 35: RELATING TO MENTAL HEALTH

TO: Committee Chair, Vice-Chair and Committee Members
 FROM: Brandee Menino, CEO, Hope Services Hawaii, Inc.
 Hearing: Friday 2/21/20, 1:30pm, Room 308

Thank you for the opportunity to **suggest an amendment to HB 35**, which, in its current form, would allow the Department of Health to invest in existing state facilities that have underutilized bed space to create an inventory of crisis stabilization beds, and would authorize the mental health and substance abuse fund to be used for capital improvements. **I strongly encourage you to add county facilities to those eligible to receive this funding, so stabilization beds may be funded at Keolahou, a county-owned emergency homeless shelter and assessment center. If only state facilities are granted this opportunity, our county would not be able to create desperately needed stabilization beds at Keolahou, which is located less than half a mile from Hilo Medical Center.**

Crisis stabilization beds are a desperately needed resource for those who are chronically homeless, and chronic overutilizers of emergency services. We see this time and time again with our clients who battle severe mental illness. They frequently experience psychotic episodes so severe they are unable to take care of themselves. They often refuse treatment, and even if they do not, they have to jump through an unreasonable number of hoops in order to get the help they need.

Angela Kalani, who works at our Hilo men’s shelter, shared the story of a former resident named “Josiah”. Josiah was a “level 5,” which means he suffered from the most severe level of mental illness. Clients who are at level 5 cannot be referred to the 24-hour residential services at Mental Health Kokua, because they are considered too psychotic. In fact, there is nowhere on Hawai‘i Island that patients like Josiah can be referred for residential psychiatric treatment.

Josiah was just about to move into permanent housing, when he had a psychotic episode and attempted suicide. “He went ballistic and broke the windows” says Angela. “This man was violently beating himself up because he believed if he punched his guts, they would explode and he would die.” Josiah was taken to Hilo Medical Center, but Angela knew that, because he was a danger to other shelter residents, if he was discharged before his new home was ready he’d be back out on the streets. “I went to Hilo Medical Center and advocated for them to keep him until he got into housing. I tried to get him a psychiatric bed, but they were full. Luckily he had a hand injury so they could take him on medical level—if he hadn’t had that injury he would not have been able to stay in the hospital.”

JOIN OUR COMMUNITY



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Stories like Josiah’s are far too common, and investing in facilities we already have is a no-brainer solution. We’ve seen this model succeed with Ohana Zones, and we are likely to see an improvement in mental health and permanent housing rates, as well as a decrease in utilization of emergency services by passing this bill.

When we choose to lift up our most vulnerable residents, to help them face their challenges, we create a better Hawai’i for all of us. I urge you to join us in that effort by **supporting HB 35 with amendments to include county facilities.**

Mahalo nui for your consideration,

Brandee Menino
Chief Executive Officer

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Brandee Menino



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Founder

Brian Peddle
General

Kenneth Hodder
Territorial Commander

Jeff Martin
Eloisa Martin
Divisional Leaders

Melanie Boehm
Executive Director

The Salvation Army

Addiction Treatment Services and Family Treatment Services

2-19-20

HB35 HD1 Special Fund for Mental Health and Substance Use Disorders

COMMITTEE ON FINANCE:

- Rep. Sylvia Luke, Chair; Rep. Ty Cullen, Vice Chair
- Thursday, Feb. 21st, 2020: 1:30 pm
- Conference Room 308

The Salvation Army Addiction Treatment Services and Family Treatment Services Recommends and Supports HB35 HD1:

The reasons for creating Subacute Residential Stabilization Services and Transition Placement services are:

We need to help our current systems that are overwhelmed with high utilizers of expensive emergent care for people with chronic conditions of mental health and substance use disorders.

- High utilizers typically are vulnerable populations with complex problems involving high behavioral health needs and multiple chronic conditions. Due to these complicated medical needs, such patients tend to heavily rely on ER facilities and are difficult to engage in ongoing care, especially with primary care providers.¹
- The emergency department is the last-resort healthcare where 5% of patients account for 25% of the visits. These are medically and socially complex patients. The Agency for Healthcare Research and Quality (AHRQ) indicated that in 2010, the top 1% of high cost patients accounted for 21.4% of total healthcare spending at an average annual cost of \$87,570.²

Government resource expenditures for high utilizers are huge.

- Across three systems: healthcare (emergency care), criminal justice (including law enforcement, courts and corrections) and homelessness, high utilizers tax state [and city] mental health services yet still don't receive adequate care for the severe, often untreated, mental illness and substance use disorders.³
- Police are overwhelmed with responding to crisis situations with homeless people who have a drug induced psychosis from being high on

¹ Colonial Penn Center: Leonard Davis Institute for Health Economics (2016): Targeting High Utilizers of Health Care <https://ldi.upenn.edu/sumrblog/targeting-high-utilizers-health-care>

² ECG Management Consultants: Siemens Healthineers Company: Rethinking Care for Emergency Department Super Utilizers in a Value-Based World (2016). <https://www.ecgmc.com/thought-leadership/articles/rethinking-care-for-emergency-department-super-utilizers-in-a-value-basedworld>

³ WHY? PBS/NPR: High Utilizers tax state mental health services, but still don't get adequate care. <https://whyy.org/articles/high-utilizers-taxstate-mental-health-services-but-still-dont-get-adequate-care/>
Addiction Treatment Services

3624 Waokanaka Street ♦ Honolulu, Hawai'i 96817 ♦Tel: (808) 595-6371 ♦Fax: (808) 595-8250
Family Treatment Services

845 22nd Avenue ♦ Honolulu, Hawai'i 96816 ♦Tel: (808) 732-2802 ♦Fax: (808) 734-7470

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Divisional Leaders

Melanie Boehm
Executive Director

The Salvation Army

Addiction Treatment Services and Family Treatment Services

methamphetamine. Frequently, such homeless are recycling through emergency care.

Complex Patients need multiple levels of care to meet their individual need.

- Stabilization beds are a level of care that is needed for high end utilizers because we have high levels of care for acute emergent needs. But, then the only option for them is to step down to a lower more stabilized level of care when they are not yet stabilized.
- Given that the only option for people with high acuity, multiple chronic conditions is emergent care or treatment, they are often placed into higher levels of expensive, emergent care for a longer period of time or, more likely, they are discharged from expensive, emergent care in a very short time and released back to the community rather than accessing treatment that requires some functionality and motivation.
- We need to implement the appropriate short-term level of care to stabilize such patients until they can transition into residential or outpatient treatment services.

Patients can start with a Subacute Residential Stabilization level of care or transition down from emergent care.

- Emergency rooms are over utilized in some situations because it is the most accessible part of the system. Some patients need stabilization not emergent care.
- Other patients can transition to this care once their immediate crisis is addressed after emergent care. A post-stabilization period is often needed because patients' treatment goals have not been addressed in short term emergent care.

Without treatment options, the patient will not progress towards recovery but regress and end up back in the emergency department.

- This tragic cycle occurs because we have failed to stand up enough options that are accessible in the community.
- There needs to be options so that a "warm handoff" to a community setting can be made after stabilization to continue treatment and reduce the risk of recurrence of acute crisis admissions.

We appreciate the opportunity to provide testimony.

Sincerely,

Melanie T. Boehm MA, LMHC, CSAC
Executive Director ATS-FTS

Participating Agency



Aloha United Way

Addiction Treatment Services

3624 Waokanaka Street ♦ Honolulu, Hawai'i 96817 ♦Tel: (808) 595-6371 ♦Fax: (808) 595-8250

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HB-35-HD-1

Submitted on: 2/19/2020 2:43:50 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Shirley David	St. Michael the Archangel Catholic Church, Kailua Kona	Support	No

Comments:

At St. Michael the Archangel the Catholic Church we look for legislation that would give a hand up to the most vulnerable individuals in our community. Those who have mental health issues often end up homeless and living on the street. We definitely need more beds so that the mental health professionals can provide them the care that they need so they can come to terms with their illnesses and get appropriate treatment and support. This bill addresses this issue.

HB-35-HD-1

Submitted on: 2/19/2020 5:01:58 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Paul Normann	Neighborhood Place of Puna	Support	No

Comments:

Please support HB35.

Hawaii continues to face a housing and homelessness crisis. While mental health and substance abuse are not the only causes of homelessness, we know that individuals dealing with severe mental illness or addiction often struggle to get the help they need and can end up homeless. While homeless providers are very capable, they are not trained to handle and help these higher needs individuals. We need specialized beds, facilities, and trained staff to help these higher needs folks. HB35 is one part of the solution. Please support HB35.

Paul Normann

HB-35-HD-1

Submitted on: 2/19/2020 6:00:18 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jud Cunningham	Aloha House, Inc.	Support	No

Comments:



February 20, 2020

RE: HB35 HDI RELATING TO MENTAL HEALTH

Dear Representative Luke and the Committee on Finance,

The Kona-Kohala Chamber of Commerce supports HB35 HDI RELATING TO MENTAL HEALTH that authorizes expenditures from the mental health and substance abuse special fund to be used for capital improvement projects.

The Kona-Kohala Chamber of Commerce recognizes homelessness as a multi-faceted, complex problem that takes a coordinated effort to solve. We encourage stabilization services including drug, alcohol and mental health treatment to address the needs of those living on the street. We also support Hawai'i State Department of Health in converting the old Kona courthouse in Kealahou next to Kona Community Hospital into a treatment facility for drug addiction, mental illness and stabilization services for the homeless population and those in need.

The Kona-Kohala Chamber of Commerce is a 501(c)(6) non-profit organization with nearly 500 member businesses that represent a wide range of industries in the private, non-profit and public sectors in the Kona and Kohala districts on the West side of the island of Hawai'i. Our members range in size from small businesses with less than 10 employees to large corporations with over 1000 employees. The result of our work is a community of choice as reflected in our quality of life, business and individual opportunity, and respect for our cultural and natural resources.

Sincerely,

A handwritten signature in black ink that reads "Wendy J. Laros". The signature is written in a cursive style with a loop at the end of the last name.

Wendy J. Laros
Executive Director, Kona-Kohala Chamber of Commerce



02/20/2020

Re: In Support of HB35 HD1 – Mental Health and Substance Abuse Special Fund; Capital Improvement Projects

Aloha

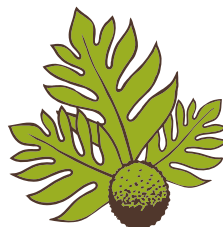
I, Mattson C. Davis, Support Bill HB35 HD1

We need funds to create a facility that will have stabilization beds to treat the mentally ill and those with substance abuse problems. Right now, here in west Hawaii there is no where to bring those with substance abuse issues. The financial burden of flying our loved ones to neighbor islands and the mainland is a hardship. It is nearly impossible to get anyone mental health and substance abuse treatment if they live in West Hawaii. If this bill is passed, we can bring much needed support and increase the quality of life for the citizens who live here in West Hawaii.

We are seeking your favorable consideration and approval for releasing these funds that will greatly benefit our island's overall mental health & substance abuse epidemic.

Sincerely,

Mattson C. Davis
President



HB-35-HD-1

Submitted on: 2/20/2020 12:13:34 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jacqui Hoover	Hawaii Island Economic Development Board	Support	No

Comments:

The Hawaii Island Economic Development Board supports this measure that would allow special funds for CIP projects including the conversion of the former Kealahou Courthouse into a mental health and substance abuse facility which is needed in Kona to address serious issues with broad implications and potential positive impact on the socio-economic landscape on Hawaii island including and not limited to, reducing crime and homelessness.

HB-35-HD-1

Submitted on: 2/20/2020 12:17:42 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jacqui Hoover	Hawaii Leeward Planning Conference	Support	No

Comments:

Hawaii Leeward Planning Conference strongly advocates for funding for CIP use to convert the former Kealahou courthouse into facilities to address mental health and substance abuse issues.

HB-35-HD-1

Submitted on: 2/20/2020 1:49:08 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jen Johansen	Cyanotech Corporation	Support	No

Comments:

- We would like to see Hawai'i State Department of Health convert the old Kona courthouse in Kealahou next to Kona Community Hospital into a treatment facility for drug addiction, mental illness and stabilization services for the homeless population and those in need.

HB-35-HD-1

Submitted on: 2/20/2020 3:29:14 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Leo Dodier	Individual	Support	No

Comments:

- Homelessness is a multi-faceted, complex problem that takes a coordinated effort to solve.
- We need stabilization services including drug, alcohol and mental health treatment to address the needs of those living on the street.
- We would like to see Hawai'i State Department of Health convert the old Kona courthouse in Kealahou next to KonaCommunity Hospital into a treatment facility for drug addiction, mental illness and stabilization services for the homeless population and those in need.

HB-35-HD-1

Submitted on: 2/20/2020 3:12:34 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
dennis boyd	Individual	Support	No

Comments:

HB-35-HD-1

Submitted on: 2/20/2020 2:51:47 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Cecilia Royale	Individual	Support	No

Comments:

HB-35-HD-1

Submitted on: 2/19/2020 10:51:55 AM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jeffrey Byron Werle	Individual	Support	No

Comments:

We are all aware of this crisis in our backyard, now it's time to create solutions,
PLEASE!

JBW*

HB-35-HD-1

Submitted on: 2/19/2020 12:49:00 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Colleen Fox	Individual	Support	No

Comments:

I support funding for Subacute Residential Crisis Beds to help those with mental health disorders and substance use disorders. Too many people are slipping through the cracks and need support.

Colleen Fox, PhD

Makiki

HB-35-HD-1

Submitted on: 2/19/2020 7:48:01 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Royelen Lee Boykie	Individual	Support	No

Comments:

Thank you for allowing me to testify on HB 35 regarding crisis beds for psychiatric and mental health patients. I urge you to support the bill and amend it.

As a resident of Hilo, my concern is great for my neighbors and my community.

The current situation is critical there are not enough beds for people needing acute psychiatric care and there are no beds for patients at level five. They must go to Oahu.

This bill begins to help alleviate that situation. It would be advisable to amend the bill so that county property could be used as well.

You are well aware of the circumstances we are facing with mental illness, homelessness, drug abuse. Thank you for being an advocate for change in our community. Vote for HB 35 and amend to include the capacity to use county facilities

HB-35-HD-1

Submitted on: 2/19/2020 8:26:16 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Kristen Alice Apruzzese	Individual	Support	No

Comments:

Aloha Committee Chair, Vice Chair, and Committee members,

My name is Kristen Alice Apruzzese, and I am writing in **support of HB 35, but would like to encourage you to amend it to allow county facilities to be eligible for this funding.** I work for a homeless services nonprofit organization, and I am writing in my personal capacity.

There is a shortage of crisis stabilization beds, which are a critical service for people experiencing severe, chronic mental health and substance abuse issues on Hawai'i Island. As a consequence, people who should be in those beds are denied critical, life-saving services, and turned away from the support they need.

My colleague Cristina Pineda told me the story of Donald, a middle-aged, formerly homeless veteran, who suffers from mental illness, and frequently experiences mental health crises. Donald repeatedly asked for help, but because of his chronic overuse of emergency services, he was denied. People like Donald use inappropriate resources because the proper support is not available. Instead of exacerbating the problem, a crisis stabilization bed would offer someone in Donald's situation the opportunity to heal, rather than to spiral downward.

In addition to creating the resources to support Donald, passing this bill would reduce the chronic misuse of emergency services by people experiencing mental health and substance abuse crises.

Please also consider amending this bill to allow county facilities to gain access to this funding. Without this amendment, facilities like Keolahou Emergency Shelter in Hilo (down the street from Hilo Medical Center) would not have access to this desperately needed funding.

Thank you in advance for joining us in this effort to bring appropriate services to help members of our 'ohana like Donald.

Mahalo for the opportunity to **support HB 35 with amendments.**

Kristen Alice Apruzzese

Sweet Samantha P. Santos
98-209 Kanuku Street
Aiea, Hawaii 96701

February 19, 2020

Support
HB35

Title: Relating to Mental Health

My name is Samantha Santos and I am representing myself. I am a current social work student with a focus in behavior mental health at the University of Hawai'i at Mānoa.

We must understand that narcotic addiction is a complex multi-faceted problem which has not responded to traditional rehabilitation approaches. There appears to be a need, consequently, for establishment of a variety of research programs geared to answer the outstanding questions, and for the coordinated efforts of community agencies to sustain the addict in the community by offering him a spectrum of services on a number of levels—to my mind—along the lines of the comprehensive community mental health center described earlier. We need to undertake socio-cultural studies to understand the addict in his own “tribal culture,” his outlook and private goals, resistances to abstinence and the “square” culture. An epidemiological, public health, and community psychiatry approach also appears indicated in order to study the etiology, manner of spread, prevention and control of narcotic addiction and the optimal points of intervention.

We are finally realizing that the problem of narcotic addiction has been over sensationalized rather than subjected to objective study and research. We are only now beginning to see it in better perspective as part of the far more pervasive and serious problem of drug abuse, which probably affects a much larger part of our population, including the middle class, than does the addiction to opiates and their derivatives. The concept of drug abuse implies that the use of a drug is dangerous or harmful to the user or to society, and that formal mechanisms of social control are justified. Although research and social evidence show that barbiturate and amphetamine use are harmful, we have been far more tolerant of them and quite irrational on the subject of narcotic use. The historic development of our national stereotypes and attitudes would in itself constitute a most worthwhile subject for study and undoubtedly shed light on the workings of our larger society.

Thank you,
Samantha Santos, MSW Candidate

HB-35-HD-1

Submitted on: 2/19/2020 8:35:59 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
LaVerne Tolmie	Individual	Support	No

Comments:

I support this bill, but please amend it so that county facilities such as Keolahou (the emergency men's shelter in Hilo) will also receive funding. Thank you.

LaVerne Tolmie

HB-35-HD-1

Submitted on: 2/20/2020 8:17:18 AM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Alysa Lavoie	Individual	Support	No

Comments:

Strongly support. Much needed in our rural, resource deficit areas like West Hawai`i

HB-35-HD-1

Submitted on: 2/20/2020 10:12:49 AM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Ross Wilson Jr.	Individual	Support	No

Comments:

We are supporting converting the former Kealahou Courthouse in Kona into a mental health and substance abuse treatment facility and using special funds for CIP projects will move the project forward quickly.

Mahalo for your support!

HB-35-HD-1

Submitted on: 2/20/2020 10:47:03 AM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Diane Logan	Individual	Support	No

Comments:

As a practicing psychologist with expertise in substance use disorders, the lack of resources on Hawaii Island is concerning on a personal and professional level. Waiting weeks to help patients get connected with residential and/or detox services on Oahu is NOT quality care and is putting our community at further risk. Please support this opportunity to provide basic medical care in our community.

Diane Logan, PhD, CSAC

HB-35-HD-1

Submitted on: 2/20/2020 12:04:12 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Naomi Bikle	Individual	Support	No

Comments:

HB-35-HD-1

Submitted on: 2/20/2020 1:03:48 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Kehau Gomes	Individual	Support	No

Comments:

I am in support of this bill as it would allow the special funds to be used for CIP projects including converting the former Kealahou Courthouse into a mental health and substance abuse facility to fill a pressing need in Kona.

HB-35-HD-1

Submitted on: 2/20/2020 1:10:01 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Katy Gorman	Individual	Support	No

Comments:

Strongly support, this resource is needed in rural, resource-deficit areas like West Hawai'i.

HB-35-HD-1

Submitted on: 2/20/2020 1:10:16 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jane Clement	Individual	Support	No

Comments:

HB-35-HD-1

Submitted on: 2/20/2020 1:19:16 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Marisa Bankston	Individual	Support	No

Comments:

- Homelessness is as a multi-faceted, complex problem that takes a coordinated effort to solve.
- We need stabilization services including drug, alcohol and mental health treatment to address the needs of those living on the street.
- Possible community solution: We would like to see Hawai'i State Department of Health convert the old Kona courthouse in Kealahou next to Kona Community Hospital into a treatment facility for drug addiction, mental illness and stabilization services for the homeless population and those in need.

HB-35-HD-1

Submitted on: 2/20/2020 1:23:55 PM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Tanya Power	Individual	Support	No

Comments:

- We would like to see Hawai'i State Department of Health convert the old Kona courthouse in Kealahou next to Kona Community Hospital into a treatment facility for drug addiction, mental illness and stabilization services for the homeless population and those in need.

HB-35-HD-1

Submitted on: 2/20/2020 1:24:59 PM

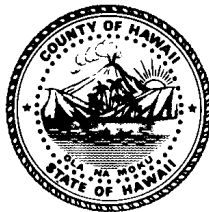
Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Hobbs Lowson	Individual	Support	No

Comments:

- Homelessness is as a multi-faceted, complex problem that takes a coordinated effort to solve.
- We need stabilization services including drug, alcohol and mental health treatment to address the needs of those living on the street.
- We would like to see Hawai'i State Department of Health convert the old Kona courthouse in Kealahou next to Kona Community Hospital into a treatment facility for drug addiction, mental illness and stabilization services for the homeless population and those in need.

REBECCA VILLEGAS
Council Member
District 7, Central Kona



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FAX: (808) 323-4786
EMAIL: Rebecca.villegas@hawaiicounty.gov

HAWAI'I COUNTY COUNCIL

West Hawai'i Civic Center, Bldg. A
74-5044 Ane Keohokalole Hwy.
Kailua-Kona, Hawai'i 96740

LATE

February 22, 2020

TESTIMONY OF REBECCA VILLEGAS
COUNCIL MEMBER, HAWAI'I COUNTY COUNCIL
ON HB 35 HD1, RELATING TO MENTAL HEALTH

Committee on Finance
Friday, February 21, 2020
1:30 p.m.
Conference Room 308

Aloha Chair Luke, and Members of the Committee:

I thank you for the opportunity to testify in support of HB 35 HD 1, relating to mental health. My testimony is submitted in my individual capacity as a member of the Hawai'i County Council, and Chair of the Hawai'i County Council Public Safety Committee.

The purpose of this measure to address an unmet need in the state for high acuity and high cost patients with chronic substance abuse and mental health disorders. Subacute residential stabilization services will bridge the gap for individuals in crisis whom acute inpatient hospitalization is unnecessary and lower level residential and community treatment models are insufficient. Hawai'i's treatment resources do not currently include crisis stabilization beds. The Department of Health proposes to invest in existing state facilities to create space to include crisis stabilization beds. Allowing authorization to utilize the Mental Health and Substance Abuse Special fund to be used for capital improvement projects would expedite the process and will allow services to start addressing this gap of services that are not currently available. The fund can sustain both existing program operations and new capital improvements related to crisis stabilization beds.

For the reasons stated above I urge the Committee on Finance to support this measure as well. Should you have any questions, please feel free to contact me at (808) 323-4267.

Mahalo for your consideration

Rebecca Villegas
Council Member, Hawai'i County Council

LATE

HB-35-HD-1

Submitted on: 2/21/2020 2:05:58 AM
Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Porter DeVries	Individual	Support	No

Comments:

In-patient treatment and long-term care facilities are desperately needed in West Hawaii. Such facilities would serve the interests of not only the mentally ill but also society at large. Issues like homelessness, drug abuse, and crime could be better managed with the proper facilities to treat and care for those with mental illnesses. The Department of Health should convert the old Kona courthouse in Kealahou into a treatment facility for drug addiction, mental illness, and stabilization services for the homeless.

LATE

HB-35-HD-1

Submitted on: 2/21/2020 10:24:12 AM

Testimony for FIN on 2/21/2020 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Kristy Lungo	Individual	Support	No

Comments: