JAN 2 3 2025

A BILL FOR AN ACT

RELATING TO MENTAL HEALTH.

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

- 1 SECTION 1. The legislature finds that Hawaii's mental 2 health laws provide the State with a variety of methods to help 3 and support individuals suffering from mental illness or substance abuse. As the number of individuals in need of help 4 5 increases, so has the need to enhance these laws in a manner 6 that demystifies the complexities of existing procedures, 7 clarifies the circumstances under which action can be taken, and 8 bolsters available tools to best serve these individuals. Legal 9 mechanisms, such as emergency procedures, involuntary 10 hospitalization, assisted community treatment, and authorization for the administration of treatment, enables the State and 11 12 mental health providers to provide compassionate assistance to individuals suffering from mental illness or substance abuse 13 14 when they need it the most. Accordingly, the purpose of this Act is to clarify, update, 15
- 17 (1) Clarifying the procedures and expanding on the

 18 circumstances available from initial contact with an

and revise Hawaii's mental health laws by:

1		individual suffering from mental illness or substance
2		abuse to emergency transportation, examination, and
3		hospitalization of the individual;
4	(2)	Establishing liability limits for state and local
5		governments and healthcare professionals under certain
6		circumstances arising from emergency procedures;
7	(3)	Expanding the notice requirements when an emergency
8		hospitalization occurs to include an individual's
9		healthcare surrogate, as well as clarifying when the
10		individual can waive notice to the individual's family
11		members;
12	(4)	Removing the authority of the family court to appoint
13		a legal guardian or conservator in a proceeding for
14		involuntary hospitalization, thereby leaving
15		appointments for legal guardians or conservators
16		subject to the requirements of chapter 560, article V,
17		Hawaii Revised Statutes;
18	(5)	Removing the requirement that psychiatric facilities
19		wait for responses from interested parties to a notice
20		of intent to discharge a patient under involuntary
21		hospitalization prior to discharging the patient;

1	(6)	Clarifying the circumstances under which a subject of
2		an order for assisted community treatment can be
3		administered medication over the subject's objection;
4	(7)	Providing limits on liability for an assisted
5		community treatment provider; and
6	(8)	Modifying the requirements to obtain administrative
7		authorization of medical treatment over the objection
8		of a patient who is in the custody of the director and
9		in a psychiatric facility, so that the treatment can
10		be authorized by a single decision-maker who is a
11		psychiatrist.
12	SECT	ION 2. Chapter 334, Hawaii Revised Statutes, is
13	amended a	s follows:
14	1.	By adding to part IV a new subpart to be designated as
15	subpart A	and to read:
16		"A. Emergency Procedures
17	§334	-A. Emergency procedures. The emergency procedures in
18	this subp	art shall consist of emergency transportation,
19	emergency	examination, and emergency hospitalization for
20	individua	ls who may be mentally ill or suffering from substance
21	abuse and	imminently dangerous to self or others.

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1	§334·	-B Emergency transportation initiated by a law
2	enforcemen	nt officer. (a) When a law enforcement officer has a
3	reasonable	e suspicion that an individual is imminently dangerous
4	to self o	r others and needs to be detained for emergency
5	examination	on, the law enforcement officer shall contact a mental
6	health eme	ergency worker; provided that the law enforcement
7	officer ma	ay temporarily detain the individual, if the law
8	enforcemen	nt officer:
9	(1)	Is unable to reach a mental health emergency worker
10		telephonically after three attempts;
11	(2)	Has reason to believe that the situation requires
12		immediate intervention to prevent harm to the
13		individual or others;
14	(3)	Contacts a mental health emergency worker at the
15		earliest time possible; and
16	(4)	Documents the reasons why the situation necessitated
17		that the individual be detained.
18	If th	ne mental health emergency worker determines that the
19	individua	l is mentally ill or suffering from substance abuse and
20	is immine	ntly dangerous to self or others, the law enforcement
21	officer sl	hall detain the individual for transportation to an
22	emergency	examination.

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in section 353C-1."

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1 When a crisis intervention officer has probable cause (b) 2 to believe that an individual is mentally ill or suffering from 3 substance abuse and is imminently dangerous to self or others, the crisis intervention officer shall detain the individual for 4 5 transportation to an emergency examination. The crisis 6 intervention officer shall contact a mental health emergency 7 worker to determine the type of facility where the individual 8 shall be transported. 9 Any individual detained under this section shall be 10 transported directly to a psychiatric facility or other facility designated by the director, as determined by a mental health 11 emergency worker. A law enforcement officer shall make an 12 application for the emergency examination of the individual. 13 14 The application shall state in detail the circumstances under which and reasons that the individual was taken into custody. 15 16 The application shall be transmitted with the individual to the psychiatric facility or other facility designated by the 17 18 director and be made a part of the individual's clinical record. 19 As used in this section, unless the context otherwise (d) **20** requires, "crisis intervention officer" has the same meaning as

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1	§334	-C Emergency transportation initiated by a court
2	order. U	pon written or oral application of any licensed
3	physician	, advanced practice registered nurse, psychologist,
4	attorney,	member of the clergy, health or social service
5	professio	nal, or any state or county employee in the course of
6	employmen	t, a judge may issue a written or oral ex parte order:
7	(1)	Stating that there is probable cause that the
8		individual is:
9		(A) Mentally ill or suffering from substance abuse;
10		and
11		(B) Imminently dangerous to self or others;
12	(2)	Stating the findings upon which the conclusion is
13		based; and
14	(3)	Directing that a law enforcement officer take the
15		individual into custody and transport the individual
16		directly to a psychiatric facility or other facility
17		designated by the director for an emergency
18		examination.
19	If a	n application was made orally, the person who made the
20	applicati	on shall reduce the application to writing and submit
21	it to the	judge who issued the ex parte order by noon of the
22	next cour	t day after the order was issued. The written

- 1 application shall be made under penalty of law but need not be
- 2 sworn before a notary public. If the judge issued an exparte
- 3 order orally, the judge shall reduce the oral order to writing
- 4 by the close of the next court day after the order was issued.
- 5 The written ex parte order shall be transmitted with the
- 6 individual to the psychiatric facility or other facility
- 7 designated by the director and be made a part of the
- 8 individual's clinical record.
- 9 §334-D Emergency transportation initiated by a health care
- 10 provider. Any licensed physician, advanced practice registered
- 11 nurse, physician assistant, licensed clinical social worker, or
- 12 psychologist who has examined an individual and determines that
- 13 the individual is mentally ill or suffering from substance abuse
- 14 and is imminently dangerous to self or others, may direct a law
- 15 enforcement officer to detain and transport the individual, by
- 16 ambulance or other suitable means, to a psychiatric facility or
- 17 other facility designated by the director for an emergency
- 18 examination, and may administer treatment, within the examining
- 19 health care provider's scope of practice, as necessary for the
- 20 individual's safe transportation. The examining health care
- 21 provider shall provide a written statement of circumstances and
- 22 reasons necessitating the emergency examination. The written

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1 statement shall be transmitted with the individual to the psychiatric facility or other facility designated by the 2 3 director and be made a part of the individual's clinical record. §334-E Emergency examination. (a) A licensed physician, 4 5 medical resident under the supervision of a licensed physician, or advanced practice registered nurse may conduct an initial 6 7 examination and screening of the patient, and administer such 8 treatment as indicated by good medical practice; provided that 9 the patient is further examined by a qualified psychiatric 10 examiner. A qualified psychiatric examiner shall conduct an 11 emergency examination of a patient transported under section 334-B, 334-C, or 334-D without unnecessary delay and provide the 12 patient with treatment, as is indicated by good medical 13 14 practice; provided that the emergency examination shall include a screening to determine whether the patient meets the criteria 15 16 for involuntary hospitalization as provided in section 334-60.2. If, following an emergency examination of a patient 17 18 under subsection (a), a qualified psychiatric examiner 19 determines that the criteria for involuntary hospitalization do not exist, the patient shall be discharged expeditiously; 20 provided that if the patient is not under an order for assisted 21

community treatment, a qualified psychiatric examiner shall

- 1 conduct an examination pursuant to section 334-121.5 before the
- 2 discharge. A patient under criminal charges shall be returned
- 3 to the custody of a law enforcement officer.
- 4 §334-F Emergency hospitalization. (a) If, following an
- 5 emergency examination pursuant to section 334-E(a), a qualified
- 6 psychiatric examiner determines that the criteria for
- 7 involuntary hospitalization exist, the patient shall be
- 8 hospitalized on an emergency basis or be transferred to another
- 9 psychiatric facility or other facility designated by the
- 10 director for emergency hospitalization.
- 11 (b) The patient admitted under subsection (a) shall be
- 12 released within seventy-two hours of the patient's admission to
- 13 a psychiatric facility or other facility designated by the
- 14 director, unless:
- 15 (1) The patient voluntarily agrees to further
- hospitalization, or
- 17 (2) A proceeding for court-ordered evaluation or
- hospitalization is initiated as provided in section
- 19 334-60.3. If that time expires on a Saturday, Sunday,
- or holiday, the time for initiation is extended to the
- 21 close of the next court day. Upon initiation of the

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further order of the court. 2 3 If at any time during the period of emergency 4 hospitalization a qualified psychiatric examiner determines that 5 a patient no longer meets the criteria for emergency 6 hospitalization, the patient shall be discharged expeditiously; 7 provided that if the patient is not under an order for assisted community treatment, a qualified psychiatric examiner shall 8 9 conduct an examination pursuant to section 334-121.5 before the 10 discharge. A patient under criminal charges shall be returned 11 to the custody of a law enforcement officer. 12 The patient shall have the right, immediately upon (d) **13** emergency hospitalization, to telephone an attorney and the patient's surrogate, guardian, family member including a 14 15 reciprocal beneficiary, or adult friend. The patient shall be 16 allowed to confer with an attorney in private. **17** §334-G Notice of emergency transportation, examination, 18 and hospitalization. Notice of an individual's emergency 19 transportation, examination, and hospitalization under this 20 subpart may be given to at least one of the following persons in 21 the following order of priority: the individual's spouse or 22 reciprocal beneficiary, legal parents, adult children,

proceeding the facility may detain the patient until

surrogate, legal quardian, or if none can be found, the closest 1 2 adult relative, as long as the individual: 3 Has capacity to make health care decisions and consents that notice may be given to at least one of 4 5 persons listed in this section; Is given the opportunity to object and does not 6 (2) 7 object, or the health care provider can reasonably infer from the circumstances based on the exercise of 8 9 professional judgment that the individual does not 10 object; or Is incapacitated or an emergency circumstance exists, 11 (3) 12 and the health care provider determines based on the 13 exercise of professional judgment that giving notification is in the best interest of the 14 15 individual. The staff of the facility shall make reasonable efforts to 16 17 ensure that the patient's family, including a reciprocal beneficiary, is notified of the emergency hospitalization, 18 unless the patient is an adult and waives notification. 19 §334-H Immunity from liability. The State, any county, 20 21 any private sector or nonprofit organization, and, except in 22 cases of willful misconduct, gross negligence, or recklessness,

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- 1 any state or county employee, health care provider, or mental
- 2 health professional shall not be held civilly liable, either
- 3 personally or in their official capacity, for the death of or
- 4 injury to the individual, claim for damage to or loss of
- 5 property, or other civil liability as the result of any act or
- 6 omission in the course of the employment or duties under this
- 7 subpart."
- 8 2. By designating section 334-60.1 as subpart B and
- 9 inserting a title before section 334-60.1 to read:
- 10 "B. Voluntary Admission"
- 3. By designating section 334-60.2 to 334-60.7 as subpart
- 12 C and inserting a title before section 334-60.2 to read:
- "C. Involuntary Hospitalization"
- 4. By designating section 334-61 to 334-62 as subpart D
- 15 and inserting a title before section 334-61 to read:
- "D. General Provisions"
- 17 SECTION 3. Chapter 334, Hawaii Revised Statutes, is
- 18 amended by adding to part VIII a new section to be appropriately
- 19 designated and to read as follows:
- 20 "§334- Records and disclosure of information. (a) A
- 21 treatment provider who provided or is providing medical,
- 22 psychiatric, therapeutic, or social services treatment to an

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- 1 individual shall provide relevant treatment information, if
- 2 available, to the department of the attorney general upon the
- 3 department's request for the purpose of preparing a petition for
- 4 assisted community treatment. The treatment information may
- 5 include a certificate issued pursuant to section 334-123(b), a
- 6 treatment plan prepared pursuant to section 334-126(g), records
- 7 related to actions or proceedings pursuant to part IV of this
- 8 chapter, records relating to the individual's treatment history,
- 9 and other records deemed relevant by the individual's treatment
- 10 provider.
- 11 (b) The petitioner of an assisted community treatment
- 12 order, the department of the attorney general, and the family
- 13 court shall disclose an assisted community treatment order of a
- 14 subject of the order to state and county law enforcement
- 15 agencies, assisted community treatment provider, or any other
- 16 entity necessary to carry out the terms of the subject's
- 17 assisted community treatment order."
- 18 SECTION 4. Section 334-1, Hawaii Revised Statutes, is
- 19 amended to read as follows:
- 20 1. By adding two new definitions to be appropriately
- 21 inserted and to read:

1 ""Qualified psychiatric examiner" means a licensed 2 psychiatrist or advanced practice registered nurse who has 3 prescriptive authority and who holds an accredited national 4 certification in an advanced practice registered nurse 5 psychiatric specialization. 6 "Surrogate" means a person appointed: 7 Under a power of attorney for health care to make a (1) 8 health-care decision for the individual who made the 9 appointment; or 10 (2) Under law or court order to make health-care decisions for an individual." 11 12 By amending the definition of "patient" to read: 13 ""Patient" means [a person] an individual under observation, care, or treatment at a psychiatric facility[-] or 14 15 other facility designated by the director." 16 By amending the definition of "treatment" to read: 17 ""Treatment" means the broad range of emergency, outpatient, intermediate, domiciliary, and inpatient services and 18 19 care, including diagnostic evaluation, medical, psychiatric, 20 psychological, and social service care, vocational 21 rehabilitation, psychosocial rehabilitation, career counseling,

1 and other special services [which] that may be extended to 2 [handicapped persons.] an individual with a disability." SECTION 5. Section 334-60.2, Hawaii Revised Statutes, is 3 4 amended to read as follows: 5 "§334-60.2 Involuntary hospitalization criteria. person] An individual may be committed to a psychiatric facility 6 7 for involuntary hospitalization, if the court finds: That the [person] individual is mentally ill or 8 (1) 9 suffering from substance abuse; 10 (2) That the [person] individual is imminently dangerous 11 to self or others; and That the [person] individual is in need of care or 12 (3) treatment, or both, and there is no suitable 13 14 alternative available through existing facilities and programs which would be less restrictive than 15 16 hospitalization." SECTION 6. Section 334-60.3, Hawaii Revised Statutes, is **17** 18 amended to read as follows: 19 "§334-60.3 Initiation of proceeding for involuntary 20 hospitalization. (a) Any person may file a petition alleging 21 that [a person located in the county] an individual meets the 22 criteria for commitment to a psychiatric facility [-] as provided 1

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2 where the individual resides and executed subject to the penalties of [perjury] law but need not be sworn to before a 3 4 notary public. The [attorney general, the attorney general's 5 deputy, special deputy, or appointee designated to present the 6 case] department of the attorney general shall assist the petitioner to state the substance of the petition in plain and 7 8 simple language. The petition may be accompanied by a certificate of the [licensed physician, advanced practice 9 10 registered nurse, qualified psychiatric examiner or psychologist who has examined the [person] individual within two 11 days before [submission of] the petition[$_{7}$] is filed, unless the **12** 13 [person] individual whose commitment is sought has refused to 14 submit to medical or psychological examination, in which case the fact of refusal shall be alleged in the petition. 15 certificate shall set forth the signs and symptoms relied upon **16** 17 by the [physician, advanced practice registered nurse,] qualified psychiatric examiner or psychologist to determine the 18 19 [person] individual is in need of [care or] treatment[, or 20 both, and whether the [person] individual is capable of 21 realizing and making a rational decision with respect to the 22 [person's] individual's need for treatment. If the petitioner

in section 334-60.2. The petition shall be filed in the county

- 1 believes that further [evaluation] examination is necessary
- 2 before commitment, the petitioner may request [such] the further
- 3 [evaluation.] examination.
- 4 (b) In the event the subject of the petition has been
- 5 given an examination, evaluation, or treatment in a psychiatric
- 6 facility within five days before submission of the petition, and
- 7 hospitalization is recommended by the staff of the facility, the
- 8 petition may be accompanied by the administrator's certificate
- 9 in lieu of a [physician] qualified psychiatric examiner's or
- 10 psychologist's certificate.
- 11 (c) The petition shall include the name, address, and
- 12 telephone number of at least one of the following persons in the
- 13 following order of priority: the subject of the petition's
- 14 spouse or reciprocal beneficiary, legal parents, adult children,
- 15 surrogate, and legal guardian [, if one has been appointed]. If
- 16 the subject of the petition has no living spouse or reciprocal
- 17 beneficiary, legal parent, adult [children,] child, surrogate,
- 18 or legal guardian, [or if none can be found,] notice shall be
- 19 served on at least one of the subject's closest adult relatives,
- 20 if any can be found."
- 21 SECTION 7. Section 334-60.4, Hawaii Revised Statutes, is
- 22 amended by amending subsections (a) to (c) to read as follows:

1 The court shall set a hearing on the petition and notice of the time and place of the hearing shall be served in 2 3 accordance with, and to those persons specified in, a current order of commitment. If there is no current order of 4 5 commitment, notice of the hearing shall be served personally on 6 the subject of the petition and served personally or by 7 certified or registered mail, return receipt requested, deliverable to the addressee only, on the subject's spouse or 8 9 reciprocal beneficiary, legal parents, adult children, 10 surrogate, and legal guardian[, if one has been appointed]. If 11 the subject of the petition has no living spouse or reciprocal beneficiary, legal parent, adult [children,] child, surrogate, 12 or legal guardian, or if none can be found, notice of the 13 14 hearing shall be served on at least one of the subject's closest adult relatives, if any can be found. Notice of the hearing to 15 16 the subject's spouse or reciprocal beneficiary, legal parents, 17 adult children, or closest adult relative may be waived if the 18 subject is an adult and requests that they not be notified. 19 Notice of the hearing shall also be served on the public 20 defender, attorney for the subject of the petition, or other 21 court-appointed attorney [as the case may be]. If the subject 22 of the petition is a minor, notice of the hearing shall also be

- 1 served upon the person who has had the principal care and
- 2 custody of the minor during the sixty days preceding the date of
- 3 the petition, if that person can be found within the State.
- 4 Notice shall also be given to other persons as the court may
- 5 designate.
- **6** (b) The notice shall include the following:
- 7 (1) The date, time, place of hearing, a clear statement of
 8 the purpose of the proceedings and of possible
 9 consequences to the subject[+] of the petition, and a
 10 statement of the legal standard upon which commitment
 11 is authorized;
- 12 (2) A copy of the petition;
- 13 (3) A [written notice,] statement, in plain and simple
 14 language, that the subject may waive the hearing by
 15 voluntarily agreeing to hospitalization[,] or, with
 16 the approval of the court, to some other form of
 17 treatment;
- 18 (4) A filled-out form indicating [such] the waiver;
- 19 (5) A [written notice,] statement, in plain and simple
 20 language, that the subject or the subject's surrogate,
 21 guardian, or representative may apply at any time for
 22 a hearing on the issue of the subject's need for

1		hospitalization, if the subject has previously waived
2		such a hearing;
3	(6)	[Notice] A statement that the subject is entitled to
4		the assistance of an attorney and that the public
5		defender has been notified of these proceedings; and
6	(7)	[Notice] A statement that if the subject does not want
7		to be represented by the public defender, the subject
8		may contact the subject's own attorney.[; and
9	(8)	If applicable, notice that the petitioner intends to
10		adduce evidence to show that the subject of the
11		petition is an incapacitated or protected person, or
12		both, under article V of chapter 560, and whether
13		appointment of a guardian is sought at the hearing.
14		If appointment of a guardian is to be recommended, and
15		a nominee is known at the time the petition is filed,
16		the identity of the nominee shall be disclosed.]
17	(c)	If the subject of the petition executes and files a
18	waiver of	the hearing, upon acceptance by the court following a
19	court det	ermination that the [person] subject understands the
20	[person's] <u>subject's</u> rights and is competent to waive them, the
21	court sha	ll order the subject to be committed to a facility that
22	has agree	d to admit the subject as an involuntary patient or, if

- 1 the subject is at such a facility, that the subject be retained
- 2 there."
- 3 SECTION 8. Section 334-60.5, Hawaii Revised Statutes, is
- 4 amended to read as follows:
- 5 "§334-60.5 Hearing on petition. (a) The court shall
- 6 adjourn or continue a hearing for failure to timely notify the
- 7 subject of the petition's spouse or reciprocal beneficiary,
- 8 legal [parents,] parent, adult [children,] child, surrogate,
- 9 guardian, or relative, or other person determined by the court
- 10 to be entitled to notice, or for failure by the subject to
- 11 contact an attorney as provided in section 334-60.4(b)(7) unless
- 12 the subject waived notice pursuant to section 334-60.4(a) or the
- 13 court determines that the interests of justice require that the
- 14 hearing continue without adjournment or continuance.
- 15 (b) The time and form of the procedure incident to hearing
- 16 the issues in the petition shall be provided by court rule.
- 17 Unless the hearing is waived, the judge shall hear the petition
- 18 as soon as possible and no later than ten days after the date
- 19 the petition is filed unless a reasonable delay is sought for
- 20 good cause shown by the subject of the petition, the subject's
- 21 attorney, or those persons entitled to receive notice of the
- hearing under section 334-60.4.

1 The subject of the petition shall be present at all 2 hearings unless the subject waives the right to be present, is 3 unable to attend, or creates conditions that make it impossible 4 to conduct [the] a hearing in a reasonable manner as determined by the judge. A waiver is valid only upon acceptance by the 5 6 court following a judicial determination that the subject 7 understands the subject's rights and is competent to waive them, 8 or is unable to participate. If the subject is unable to 9 participate, the judge shall appoint a guardian ad litem or a 10 temporary guardian as provided in article V of chapter 560, to 11 represent the subject throughout the proceedings. 12 Hearings may be held at any convenient place within (d) 13 the circuit. Unless the court determines personal appearance is 14 necessary, hearings may be conducted by video conferencing. The 15 subject of the petition, any interested party, or the court on 16 its own motion may request a hearing in another circuit because of convenience to the parties, witnesses, or the court or **17** 18 because of the [individual's] subject's mental or physical 19 condition. 20 The [attorney general, the attorney general's deputy, 21 special deputy, or appointee] department of the attorney general 22 shall present the case for a petitioner for hearings convened

- 1 under this chapter, unless [except that the attorney general,
- 2 the attorney general's deputy, special deputy, or appointee need
- 3 not-participate in or be present at a hearing whenever] a
- 4 petitioner [or some other appropriate person] has retained
- 5 private counsel who will be present in court and will present to
- 6 the court the case for involuntary hospitalization.
- 7 (f) Counsel for the subject of the petition shall be
- 8 allowed adequate time for investigation of the matters at issue
- 9 and for preparation $[\tau]$ and shall be permitted to present the
- 10 evidence that the counsel believes necessary to a proper
- 11 disposition of the proceedings, including evidence as to
- 12 alternatives to inpatient hospitalization.
- 13 (g) No individual may be found to require treatment in a
- 14 psychiatric facility unless at least one [physician, advanced
- 15 practice registered nurse, qualified psychiatric examiner or
- 16 psychologist who has personally examined the individual
- 17 testifies in person at the hearing. This testimony may be
- 18 waived by the subject of the petition. If the subject of the
- 19 petition [has refused] refuses to be examined by a [licensed
- 20 physician, advanced practice registered nurse,] qualified
- 21 psychiatric examiner or psychologist, the subject may be
- 22 examined by a court-appointed [licensed physician, advanced

- 1 practice registered nurse, qualified psychiatric examiner or
- 2 psychologist. If the subject refuses to be examined and there
- 3 is sufficient evidence to believe that the allegations of the
- 4 petition are true, the court may make a temporary order
- 5 committing the subject to a psychiatric facility for a period of
- 6 no more than five days for the purpose of a diagnostic
- 7 examination [and evaluation]. The subject's refusal to be
- 8 examined shall be treated as a denial that the subject is
- 9 mentally ill or suffering from substance abuse. Nothing in this
- 10 section shall limit the [individual's] subject's privilege
- 11 against self-incrimination.
- 12 (h) The subject of the petition in a hearing under this
- 13 section has the right to secure an independent [medical or
- 14 psychological evaluation examination and present evidence
- 15 thereon.
- 16 (i) If after hearing all relevant evidence, including the
- 17 result of any diagnostic examination ordered by the court, the
- 18 court finds that [an individual] a subject of a petition is not
- 19 a person requiring medical, psychiatric, psychological, or other
- 20 rehabilitative treatment or supervision, the court shall order
- 21 that the [individual] subject be discharged if the [individual]
- 22 subject has been hospitalized prior to the hearing.

1	(j) If the court finds that the criteria for involuntary
2	hospitalization under section 334-60.2(1) has been met beyond a
3	reasonable doubt and that the criteria under [sections] section
4	334-60.2(2) and $[334-60.2(3)]$ (3) have been met by clear and
5	convincing evidence, the court may issue an order to any law
6	enforcement officer to [deliver] transport the subject of the
7	order to a facility that has agreed to admit the subject as an
8	involuntary patient, or if the subject is already a patient in a
9	psychiatric facility, authorize the facility to retain the
10	patient for treatment for a period of ninety days unless sooner
11	discharged. The court may also authorize the involuntary
12	administration of medication, where the subject has an existing
13	order for assisted community treatment $[\tau]$ issued pursuant to
14	part VIII of this chapter[, relating to assisted community
15	treatment, and in accordance with the treatment prescribed by
16	that [prior] existing order. Notice of the subject's commitment
17	and the facility name and location where the subject will be
18	committed shall be provided to those persons entitled to notice
19	pursuant to section 334-60.4. An order of commitment shall
20	specify which of those persons served with notice pursuant to
21	section 334-60.4, together with such other persons as the court
22	may designate, shall be entitled to receive any subsequent

- notice of intent to discharge, transfer, or recommit. The court 1 2 shall forward to the Hawaii criminal justice data center all orders of involuntary civil commitment or information from all 3 orders of involuntary civil commitment, as requested by the 4 Hawaii criminal justice data center, which in turn shall forward 5 6 the information to the Federal Bureau of Investigation, or its successor agency, for inclusion in the National Instant Criminal 7 8 Background Check System database. The orders or information 9 shall also be maintained by the Hawaii criminal justice data 10 center for disclosure to and use by law enforcement officials for the purpose of firearms permitting, licensing, or 11 registration pursuant to chapter 134. This subsection shall 12 13 apply to all involuntary civil commitments without regard to the 14 date of the involuntary civil commitment. 15 [(k) The court may find that the subject of the petition is an incapacitated or protected person, or both, under article **16 17** V of chapter 560, and may appoint a guardian or conservator, or both, for the subject under the terms and conditions as the 18 19 court shall determine.
- 20 (1) (k) Persons entitled to notice [are] pursuant to this
 21 section shall be also entitled to be present in the courtroom
 22 for the hearing and to receive a copy of the hearing transcript

1 or recording, unless the court determines that the interests of 2 justice require otherwise." 3 SECTION 9. Section 334-60.7, Hawaii Revised Statutes, is 4 amended to read as follows: 5 "§334-60.7 Notice of intent to discharge. (a) When the 6 administrator, the administrator's deputy, or the attending 7 physician of a psychiatric facility contemplates discharge of an 8 involuntary patient because of expiration of the court order for 9 commitment or because the patient is no longer a proper subject 10 for commitment, as determined by the criteria for involuntary 11 hospitalization in section 334-60.2, the administrator, the 12 administrator's deputy, or the attending physician shall provide 13 notice of intent to discharge, or if the patient voluntarily 14 agrees to further hospitalization, the administrator, the administrator's deputy, or the attending physician shall provide 15 16 notice of the patient's admission to voluntary inpatient 17 treatment. The following requirements and procedures shall 18 apply: 19 The notice and a certificate of service shall be filed 20 with the family court and served on those persons whom 21 the order of commitment specifies as entitled to 22 receive notice, by mail at the person's last known

1		address. [Notice] If the commitment resulted directly
2		from legal proceedings under chapter 704 or 706,
3		<u>notice</u> shall also be sent to the prosecuting attorney
4		of the county from which the person was originally
5		committed, by facsimile or electronically, for the
6		sole purpose of victim notification; and
7	(2)	Any person specified as entitled to receive notice may
8		waive this right in writing with the psychiatric
9		facility[+
10	(3)	If no objection is filed within five calendar days of
11		mailing the notice, the administrator or attending
12		physician of the psychiatric facility shall discharge
13		the patient or accept the patient for voluntary
14		inpatient treatment;
15	(4)	If any person specified as entitled to receive notice
16		files a written objection, with a certificate of
17		service, to the discharge or to the patient's
18		admission to voluntary inpatient treatment on the
19		grounds that the patient is a proper subject for
20		commitment, the family court shall conduct a hearing
21		as soon as possible, prior to the termination of the
22		current commitment order, to determine if the patient

1		still meets the criteria for involuntary
2		hospitalization in section 334-60.2. The person
3		filing the objection shall also notify the psychiatric
4		facility by telephone on the date the objection is
5		filed;
6	(5)	If the family court finds that the patient does not
7		meet the criteria for involuntary hospitalization in
8		section 334-60.2, the court shall issue an order of
9		discharge from the commitment; and
10	(6)	If the family court finds that the patient does meet
11		the criteria for involuntary hospitalization in
12		section 334 60.2, the court shall issue an order
13		denying discharge from the commitment].
14	(b)	For civil commitments that do not result directly from
15	legal pro	ceedings under [chapters] <u>chapter</u> 704 [and] <u>or</u> 706,
16	when the	administrator, the administrator's deputy, or the
17	attending	physician of a psychiatric facility contemplates
18	discharge	of an involuntary patient, the administrator, the
19	administra	ator's deputy, or the attending physician [may] shall
20	assess who	ether an assisted community treatment plan is indicated
21	pursuant	to section 334-123 and, if so indicated, may

1 communicate with an aftercare provider as part of discharge planning, as appropriate." 2 SECTION 10. Section 334-76, Hawaii Revised Statutes, is 3 4 amended to read as follows: 5 "§334-76 Discharge from custody. (a) Subject to any special requirements of law as provided in sections 704-406, 6 7 704-411, and 706-607 or elsewhere, with respect to patients 8 committed on court order from a criminal proceeding, the 9 administrator of a psychiatric facility, the administrator's 10 deputy, or the attending physician, pursuant to section 334-11 60.7, shall: 12 Send a notice of intent to discharge or notice of the (1) 13 patient's admission to voluntary inpatient treatment 14 to those persons specified in the order of commitment 15 as entitled to receive notice of intent to discharge, 16 by mail at their last known address; and **17** Send a notice of intent to discharge or notice of the (2) 18 patient's admission to voluntary inpatient treatment 19 to the prosecuting attorney of the county from which 20 the person was originally committed, by facsimile or 21 electronically [-], when the commitment directly

1	resulted from legal proceedings under chapter 704 or
2	706.
3	(b) The administrator $[\Theta r]_{\underline{i}}$ the <u>administrator's</u> deputy or
4	the physician assuming medical responsibility for the patient
5	shall discharge an involuntary patient when the patient is no
6	longer a proper subject for commitment, as determined by the
7	criteria for involuntary hospitalization in section 334-60.2.
8	(c) Nothing in this section shall preclude a psychiatric
9	facility from accepting for voluntary inpatient treatment, in
10	accordance with the procedures in section 334-60.1, a patient
11	for whom the facility contemplates discharge pursuant to section
12	334-60.7 and who voluntarily agrees to further hospitalization
13	after the period of commitment has expired or where the patient
14	is no longer a proper subject for commitment."
15	SECTION 11. Section 334-121, Hawaii Revised Statutes, is
16	amended to read as follows:
17	"§334-121 Criteria for assisted community treatment. [A
18	person] An individual may be ordered to obtain assisted
19	community treatment if the family court finds, based on the
20	professional opinion of a [psychiatrist or advanced practice
21	registered nurse with prescriptive authority and who holds an
22	accredited national certification in an advanced practice

1	registere	a nurse psychiatric specialization, qualified
2	psychiatr	ic examiner, that:
3	(1)	The [person] individual is mentally ill or suffering
4		from substance abuse;
5	(2)	The [person] individual is unlikely to live safely in
6		the community without available supervision, is now in
7		need of treatment in order to prevent a relapse or
8		deterioration that would predictably result in the
9		[person] individual becoming imminently dangerous to
10		self or others, and the [person's] individual's
11		current mental status or the nature of the [person's]
12		individual's disorder limits or negates the [person's]
13		individual's ability to make an informed decision to
14		voluntarily seek or comply with recommended treatment;
15	(3)	The [person] individual has a:
16		(A) Mental illness that has caused that [person]
17		individual to refuse needed and appropriate
18		mental health services in the community; or
19		(B) History of lack of adherence to treatment for
20		mental illness or substance abuse that resulted
21		in the [person] individual becoming dangerous to
22		self or others and that now would predictably

1	result in the [person] individual becoming
2	imminently dangerous to self or others; and
3	(4) Considering less intrusive alternatives, assisted
4	community treatment is essential to prevent the danger
5	posed by the [person,] individual, is medically
6	appropriate, and is in the [person's] individual's
7	medical interests."
8	SECTION 12. Section 334-121.5, Hawaii Revised Statutes, is
9	amended to read as follows:
10	"§334-121.5 Examination for assisted community treatment
11	indication. A [licensed psychiatrist or advanced practice
12	registered nurse with prescriptive authority and who holds an
13	accredited national certification in an advanced practice
14	registered nurse psychiatric specialization] qualified
15	psychiatric examiner associated with the [licensed] psychiatric
16	facility where [a person] a patient is located who was committed
17	to involuntary hospitalization, delivered for emergency
18	examination or emergency hospitalization, or voluntarily
19	admitted to inpatient treatment at a psychiatric facility
20	pursuant to part IV shall, before the [person's] patient's
21	discharge, examine the [person] patient to determine whether an
22	assisted community treatment plan is indicated pursuant to this

- 1 part. If a plan is indicated, the [psychiatrist or advanced
- 2 practice registered nurse] qualified psychiatric examiner shall
- 3 prepare the certificate specified by section 334-123. The
- 4 department of the attorney general shall assist with the
- 5 preparation and filing of any petition brought pursuant to
- 6 section 334-123 and with the presentation of the case at any
- 7 related court proceedings; provided that, if the petitioner is a
- 8 private provider or other private individual, the petitioner may
- 9 decline the assistance. The psychiatric facility may notify
- 10 another mental health program for assistance with the
- 11 coordination of care in the community for the person. Nothing
- 12 in this section shall delay the appropriate discharge of a
- 13 [person] patient from the psychiatric facility after the
- 14 examination for assisted community treatment indication has been
- 15 completed."
- 16 SECTION 13. Section 334-122, Hawaii Revised Statutes, is
- 17 amended to be read as follows:
- 18 1. By adding two new definitions to be appropriately
- 19 inserted and to read:
- 20 ""Assisted community treatment provider" means a mental
- 21 health provider, which may include a qualified psychiatric
- 22 examiner or a mental health program, that is or will be

- 1 responsible, in accordance with an assisted community treatment
- 2 order, for the coordination, management, or administration of a
- 3 subject of the order's treatment.
- 4 "Mental health program" means a hospital, psychiatric
- 5 facility, clinic, or other facility providing mental health
- 6 treatment to individuals suffering from mental illness or
- 7 substance abuse."
- 8 2. By amending the definition of "assisted community
- 9 treatment" to read:
- 10 ""Assisted community treatment" includes medication
- 11 specifically authorized by court order; individual or group
- 12 therapy; day or partial day programming activities; services and
- 13 training, including educational and vocational activities;
- 14 supervision of living arrangements; and any other services
- 15 prescribed to either alleviate the [person's] subject of the
- 16 order's disorder or disability, maintain or maximize semi-
- 17 independent functioning, or prevent further deterioration that
- 18 may reasonably be predicted to result in the need for
- 19 hospitalization or more intensive or restrictive levels of care
- 20 in the community or incarceration for criminal behavior."
- 21 3. By amending the definition of "subject of the order" to
- **22** read:

1	""Subject of the order" means (a person) an individual who
2	has been ordered by the court to obtain assisted community
3	treatment."
4	4. By amending the definition of "subject of the petition"
5	to read:
6	""Subject of the petition" means the [person] individual
7	who, under a petition filed under section 334-123, is alleged to
8	meet the criteria for assisted community treatment."
9	5. By repealing the definition of "advanced practice
10	registered nurse".
11	[" "Advanced practice registered nurse" means a registered
12	nurse licensed to practice in this State who:
13	(1) Has met the qualifications set forth in chapter 457
14	and this part;
15	(2) Because of advanced education and specialized clinical
16	training, is authorized to assess, screen, diagnose,
17	order, utilize, or perform medical, therapeutic,
18	preventive, or corrective measures;
19	(3) Holds an accredited national certification in an
20	advanced practice registered nurse psychiatric
21	specialization; and

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(4) Holds prescriptive authority pursuant to section 457-
1
              8.6."]
2
         6. By repealing the definition of "treating psychiatrist".
3
         [""Treating psychiatrist" means the psychiatrist who is
4
    responsible for the management and supervision of a person's
5
6
    treatment under order of the court."]
         SECTION 14. Section 334-123, Hawaii Revised Statutes, is
7
8
    amended by amending subsections (c) and (d) to read as follows:
9
               The petition may be accompanied by a certificate of a
10
    [licensed psychiatrist or advanced practice registered nurse
    with prescriptive authority and who holds an accredited national
11
12
    certification in an advanced practice registered nurse
13
    psychiatric specialization] qualified psychiatric examiner who
    has examined the subject of the petition within twenty calendar
14
    days before the filing of the petition. For purposes of the
15
    petition, an examination shall be considered valid so long as
16
    the [licensed psychiatrist or advanced practice registered nurse
17
18
    with prescriptive authority and who holds an accredited national
19
    certification in an advanced practice registered nurse
    psychiatric specialization] qualified psychiatric examiner has
20
21
    obtained enough information from the subject of the petition to
22
    reach a diagnosis of the subject of the petition, and to express
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- 1 a professional opinion concerning the same, even if the subject
- 2 of the petition is not fully cooperative. If the petitioner
- 3 believes that further [evaluation] examination is necessary
- 4 before treatment, the petitioner may request further
- 5 [evaluation.] examination.
- 6 (d) The petition shall include the name, address, and
- 7 telephone number of at least one of the following persons in the
- 8 following order of priority: the subject of the petition's
- 9 spouse or reciprocal beneficiary, legal parents, adult children,
- 10 [and] surrogate, or legal guardian[, if one has been
- 11 appointed]. If the subject of the petition has no living spouse
- 12 or reciprocal beneficiary, legal parent, adult [children,]
- 13 child, surrogate, or legal guardian, or if none can be found,
- 14 the petition shall include the name, address, and telephone
- 15 number of at least one of the subject's closest adult relatives,
- 16 if any can be found. The petition shall also include the name
- 17 of a proposed assisted community treatment provider."
- 18 SECTION 15. Section 334-124, Hawaii Revised Statutes, is
- 19 amended to read as follows:
- 20 "§334-124 Hearing date. The family court shall set a
- 21 hearing date on a petition, and any subsequent hearing dates for
- 22 the petition, as soon as possible [-] but no later than ten days

- 1 after the filing of the petition. A hearing on the petition may
- 2 be continued pending further examination of the subject of the
- 3 petition, for the appointment of a guardian ad litem, or for
- 4 good cause."
- 5 SECTION 16. Section 334-125, Hawaii Revised Statutes, is
- 6 amended to read as follows:
- 7 1. By amending subsection (a) to read:
- 8 "(a) Notice of the hearing under this part shall be:
- 9 (1) Served personally on the subject of the petition10 pursuant to family court rules;
- 11 (2) Served personally or by certified or registered mail,
 12 return receipt requested, deliverable to the addressee
 13 only, to as many as are known to the petitioner of the
 14 subject's spouse or reciprocal beneficiary, legal
 15 parents, adult children, surrogate, and legal

16 guardian[, if one has been appointed]. If the subject

of the petition has no living spouse or reciprocal

18 beneficiary, legal parent, adult [children,] child,

19 surrogate, or legal guardian, or if none can be found,

20 notice of the hearing shall be served on at least one

of the subject's closest adult relatives, if any can

22 be found;

17

1	(3)	Served on the guardian ad litem appointed for the
2		subject of the petition [or the subject's existing
3		guardian, if the court determines the existence of
4		one; as provided in section 334-123.5;
5	(4)	Served on the attorney for the subject of the
6		petition, if applicable; [and]
7	(5)	Served on the assisted community treatment provider
8		proposed in the petition, unless the petitioner is
9		also the proposed assisted community treatment
10		provider; and
11	[(5)]	(6) Given to other persons as the court may
12		designate."
13	2.	By amending subsection (c) to read:
14	"(c)	Notice [of all subsequent hearings shall be served in
15	accordance	e with subsections (a) and (b), and in accordance with
16	all appli	cable family court rules relating to service of notice,
17	including	that service need not be made on parties in default
18	for-failu	re to appear.] to the subject of the petition's spouse
19	or recipro	ocal beneficiary, legal parents, adult children, or
20	closest a	dult relative may be waived if the subject is an adult
21	and reque	sts that they not be notified."

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1	SECTION 17. Section 334-126, Hawaii Revised Statutes, is
2	amended by amending subsection (g) to read as follows:
3	"(g) No subject of the petition shall be ordered to
4	receive assisted community treatment unless at least one
5	[psychiatrist or advanced practice registered nurse with
6	prescriptive authority and who holds an accredited national
7	certification in an advanced practice registered nurse
8	psychiatric specialization testifies in person at the hearing]
9	qualified psychiatric examiner who has personally [assessed]
10	$\underline{\text{examined}}$ the subject[τ] within a reasonable time before the
11	filing of the petition [up to the time when the psychiatrist or
12	advanced practice registered nurse with prescriptive authority
13	and who holds an accredited national certification in an
14	advanced practice registered nurse psychiatric specialization]
15	provides oral testimony at [court.] the hearing. The [testimony
16	of the psychiatrist or advanced practice registered nurse with
17	prescriptive authority and who holds an accredited national
18	certification in an advanced practice registered nurse
19	psychiatric specialization] qualified psychiatric examiner shall
20	[state] provide the facts [which] that support the allegation
21	that the subject meets all the criteria for assisted community
22	treatment, provide a written treatment plan, which shall include

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1 non-mental health treatment if appropriate, provide the 2 rationale for the recommended treatment, and identify the 3 [designated mental health program responsible for the 4 coordination of care.] assisted community treatment provider. 5 If the recommended assisted community treatment includes 6 medication, the testimony [of] provided by the [psychiatrist or 7 advanced practice registered nurse with prescriptive authority and who holds an accredited national certification in an 8 9 advanced practice registered nurse psychiatric specialization] 10 qualified psychiatric examiner shall describe the types or 11 classes of medication [which] that should be authorized, and 12 describe the physical and mental beneficial and detrimental 13 effects of [such] the medication." 14 SECTION 18. Section 334-127, Hawaii Revised Statutes, is 15 amended to read as follows: "§334-127 Disposition. (a) If, after [hearing] 16 considering all relevant evidence, including the results of any **17** 18 diagnostic examination ordered by the family court, the family 19 court finds that the subject of the petition does not meet the

criteria for assisted community treatment, the family court

shall dismiss the petition. Notice of the dismissal shall be

- 1 provided to those persons entitled to notice pursuant to section
- **2** 334-125.
- 3 (b) If, after hearing all relevant evidence, including the
- 4 results of any diagnostic examination ordered by the family
- 5 court, the family court finds that the criteria for assisted
- 6 community treatment under section 334-121(1) have been met
- 7 beyond a reasonable doubt and that the criteria under section
- 8 334-121(2) to (4) have been met by clear and convincing
- 9 evidence, the family court shall order the subject to obtain
- 10 assisted community treatment for a period of no more than two
- 11 years. The written treatment plan submitted pursuant to section
- 12 334-126(g) shall be attached to the order and made a part of the
- 13 order.
- 14 If the family court finds by clear and convincing evidence
- 15 that the beneficial mental and physical effects of recommended
- 16 medication outweigh the detrimental mental and physical effects,
- 17 if any, the order may authorize types or classes of medication
- 18 to be included in treatment at the discretion of the [treating
- 19 psychiatrist or advanced practice registered nurse with
- 20 prescriptive authority and who holds an accredited national
- 21 certification in an advanced practice registered nurse

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2 provider. 3 The court order shall [also] state who should receive notice of intent to discharge early in the event that the 4 5 [treating psychiatrist or advanced practice registered nurse with prescriptive authority and who holds an accredited national 6 7 certification in an advanced practice registered nurse 8 psychiatric specialization] assisted community treatment 9 provider determines, before the end of the court ordered period 10 of treatment, that the subject should be discharged early from 11 assisted community treatment. 12 Notice of the order shall be provided to the director, the **13** [interested party who filed the petition,] petitioner, and those 14 persons entitled to notice pursuant to section 334-125. 15 The family court shall also designate on the order the **16** [treating psychiatrist or advanced practice registered nurse **17** with prescriptive authority and who holds an accredited national 18 certification in an advanced practice registered nurse 19 psychiatric specialization who is to be responsible for the 20 management and supervision of the subject's treatment, or shall 21 assign an administrator of a designated mental health program 22 to, in turn, designate the treating psychiatrist or advanced

psychiatric specialization.] assisted community treatment

1 practice registered nurse with prescriptive authority and who 2 holds an accredited national certification in an advanced 3 practice registered nurse-psychiatric specialization during the 4 treatment period without court approval, and may designate 5 either a publicly employed psychiatrist or advanced practice 6 registered nurse with prescriptive authority and who holds an 7 accredited national certification in an advanced practice 8 registered nurse psychiatric specialization, or a private 9 psychiatrist or advanced practice registered nurse with 10 prescriptive authority and who holds an accredited national 11 certification in an advanced practice registered nurse 12 psychiatric specialization; provided that the private **13** psychiatrist or advanced practice registered nurse with 14 prescriptive authority and who holds an accredited national 15 certification in an advanced practice registered nurse 16 psychiatric specialization shall agree to the designation. The 17 order for assisted community treatment shall be subject to the 18 Health Care Privacy Harmonization Act, chapter 323B.] assisted 19 community treatment provider. Nothing in this section shall preclude the subject's 20 stipulation to the continuance [f]of[f] an existing court 21 22 order."

1 SECTION 19. Section 334-129, Hawaii Revised Statutes, is 2 amended to read as follows: 3 "§334-129 Failure to comply with assisted community 4 treatment. (a) A [treating psychiatrist or advanced practice 5 registered nurse with prescriptive authority and who holds an 6 accredited national certification in an advanced practice 7 registered nurse psychiatric specialization] qualified 8 psychiatric examiner may prescribe or administer to the subject 9 of the order reasonable and appropriate medication or medications, if specifically authorized by [the] a court order, 10 11 and treatment that is consistent with accepted medical standards 12 and the [family] court order, including the written treatment plan submitted pursuant to section 334-126(q)[-], and in 13 accordance with the procedures described in subsection (b). 14 15 [No subject of the order shall be physically forced to (b) take medication under a family court order for assisted 16 **17** community treatment unless the subject is within an emergency 18 department or admitted to a hospital, subsequent to the date of 19 the current assisted community treatment order.] A qualified 20 psychiatric examiner may administer medication or medications 21 specifically authorized by a court order to a subject of the 22 order over objection of the subject during emergency examination

1 or hospitalization under part IV, subpart A, of this chapter, or 2 while committed for involuntary hospitalization under part IV, 3 subpart C, of this chapter. (c) A subject of the order may be transported to [a 4 5 designated mental health program, or a hospital emergency department, a psychiatric facility or other facility designated 6 7 by the director for failure to comply with an order for assisted 8 community treatment via the following methods: By an interested party with the consent of the subject 9 (1) 10 of the order; or In accordance with section [334-59.] 334-B, 334-C, or 11 (2) 12 334-D. 13 The [designated mental health program's treating (d) psychiatrist or advanced practice registered nurse with 14 15 prescriptive authority and who holds an accredited national certification in an advanced practice registered nurse 16 17 psychiatric specialization or designee of the psychiatrist or 18 advanced practice registered nurse with prescriptive authority and who holds an accredited national certification in an 19 20 advanced practice registered nurse psychiatric specialization] 21 assisted community treatment provider shall make all reasonable efforts to solicit the subject's compliance with the prescribed 22

- 1 treatment. If the subject fails or refuses to comply after the
- 2 efforts to solicit compliance, the [treating psychiatrist or
- 3 advanced practice registered nurse with prescriptive authority
- 4 and who holds an accredited national certification in an
- 5 advanced practice registered nurse psychiatric specialization]
- 6 assisted community treatment provider shall assess whether the
- 7 subject of the order meets criteria for involuntary
- 8 hospitalization under part IV, subpart C, of this chapter, and
- 9 proceed with emergency transportation pursuant to section [334-
- 10 $\frac{59(a)(2) \text{ or } (3)}{334-C}$ or 334-D.
- 11 (e) Notice of any transport or [admission] hospitalization
- 12 under this section shall be provided pursuant to section [334-
- 13 59.5.] 334-G.
- 14 (f) Except in cases of willful misconduct, gross
- 15 negligence, or recklessness, the assisted community treatment
- 16 provider shall not be held civilly liable, either personally or
- 17 in the assisted community treatment provider's official
- 18 capacity, for the death of or injury to the subject of the
- 19 order, claim for damage to or loss of property, or other civil
- 20 liability as the result of any act or omission in the course of
- 21 the employment or duties under this part."

1 SECTION 20. Section 334-130, Hawaii Revised Statutes, is 2 amended to read as follows: 3 "§334-130 Period of assisted community treatment. [The] Unless a family court orders otherwise, the assisted 4 5 community treatment order shall continue to apply to the 6 subject, for the duration specified in the order, regardless of 7 whether the treatment setting changes. 8 The subject of [assisted community treatment is] the 9 order shall be automatically and fully discharged at the end of 10 the family court ordered period of treatment $[\tau]$ pursuant to an assisted community treatment order, a period of no more than two 11 years, unless a new family court order has been obtained [as 12 13 provided hereinbelow]. Nothing in this section shall preclude the subject's 14 stipulation to the continuance [+]of[+] an existing court 15 16 order." 17 SECTION 21. Section 334-131, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows: 18 19 When the [treating psychiatrist or advanced practice registered nurse with prescriptive authority and who holds an 20 21 accredited national certification in an advanced practice 22 registered nurse psychiatric specialization] assisted community

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treatment provider contemplates discharge for a subject of the 2 order because of the imminent expiration of the court order or because the subject of the order is no longer a proper subject 3 for assisted community treatment, as determined by the criteria 4 5 in section 334-121, the [treating psychiatrist or advanced 6 practice registered nurse with prescriptive authority and who 7 holds an accredited national certification in an advanced 8 practice registered nurse psychiatric specialization] assisted 9 community treatment provider shall provide notice of intent to 10 discharge." 11 SECTION 22. Section 334-161, Hawaii Revised Statutes, is 12 amended by amending subsection (a) to read as follows: 13 "(a) A patient who has been committed to a psychiatric 14 facility for involuntary hospitalization or who is in the 15 custody of the director and residing in a psychiatric facility 16 may be ordered to receive treatment over the patient's **17** objection, including the taking or application of medication, if 18 the court, or administrative [panel] decision-maker through the 19 administrative authorization process established pursuant to 20 section 334-162, finds that: 21 The patient suffers from a physical or mental disease, 22 disorder, or defect;

1	(2)	The patient is imminently dangerous to self or others;	
2	(3)	The proposed treatment is medically appropriate; and	
3	(4)	After considering less intrusive alternatives,	
4		treatment is necessary to forestall the danger posed	
5		by the patient."	
6	SECT	ION 23. Section 334-162, Hawaii Revised Statutes, is	
7	amended b	y amending subsection (a) to read as follows:	
8	"(a)	A patient who is in the custody of the director and	
9	in a psyc	hiatric facility may be ordered to receive medical	
10	treatment	over the patient's objection through an administrative	
11	authoriza	tion process that includes the following due process	
12	safeguards:		
13	(1)	The facility shall give notice to the patient of the	
14		authorization process and the reasons for initiating	
15		the process;	
16	(2)	The administrative [panel shall consist of three	
17		members] decision-maker who is a psychiatrist with	
18		relevant clinical training and experience, and who	
19		[are] is not involved with the current treatment of	
20		the patient[+], shall, after considering all relevant	
21		evidence, determine whether the criteria under section	
22		334-162 are met;	

1 The patient shall have the right to attend the (3) 2 hearing, receive assistance from an advisor, cross 3 examine witnesses, and present testimony, exhibits, 4 and witnesses; and 5 (4)The patient shall have the right to appeal the 6 decision of the administrative [panel.] decision-7 maker." SECTION 24. Section 334E-2, Hawaii Revised Statutes, is 8 9 amended by amending subsection (a) to read as follows: **10** "(a) Any patient in a psychiatric facility shall be 11 afforded rights, and any psychiatric facility shall provide the **12** rights to all patients; provided that when a patient is not able to exercise the patient's rights, the patient's legal quardian 13 14 or legal representative shall have the authority to exercise the 15 same on behalf of the patient. The rights shall include but not be limited to the following: 16 17 (1) Access to written rules and regulations with which the 18 patient is expected to comply; 19 Access to the facility's grievance procedure or to the (2) 20 department of health as provided in section 334-3; 21 (3) Freedom from reprisal; 22 Privacy, respect, and personal dignity; (4)

1 (5) A humane environment; 2 (6) Freedom from discriminatory treatment based on race, 3 color, creed, national origin, age, and sex; 4 A written treatment plan based on the individual (7) 5 patient; Participation in the planning of the patient's 6 (8) 7 treatment plan; Refusal of treatment except in emergency situations or 8 (9) when a court order or an administrative order pursuant 9 10 to chapter 334, part VIII or X, has been issued; 11 Refusal to participate in experimentation; (10)The choice of physician if the physician chosen 12 (11)13 agrees; 14 A qualified, competent staff; (12) 15 A medical examination before initiation of non-(13) 16 emergency treatment; 17 (14)Confidentiality of the patient's records; Access to the patient's records; 18 (15) Knowledge of rights withheld or removed by a court or 19 (16)20 by law; 21 (17)Physical exercise and recreation; 22 Adequate diet; (18)

1	(19)	Knowledge of the names and titles of staff members	
2		with whom the patient has frequent contact;	
3	(20)	The right to work at the facility and fair	
4		compensation for work done; provided that work is	
5		available and is part of the patient's treatment plan;	
6	(21)	Visitation rights, unless the patient poses a danger	
7		to self or others; provided that where visitation is	
8		prohibited, the legal guardian or legal representative	
9		shall be allowed to visit the patient upon request;	
10	(22)	Uncensored communication;	
11	(23)	Notice of and reasons for an impending transfer;	
12	(24)	Freedom from seclusion or restraint, except:	
13		(A) When necessary to prevent injury to self or	
14		others;	
15		(B) When part of the treatment plan; or	
16		(C) When necessary to preserve the rights of other	
17		patients or staff;	
18	(25)	Disclosure to a court, at an involuntary civil	
19		commitment hearing, of all treatment procedures which	
20		have been administered prior to the hearing; and	

1	(26) Receipt by the patient and the patient's guardian or
2	legal guardian, if the patient has one, of this
3	enunciation of rights at the time of admission."
4	SECTION 25. Section 586-5.5, Hawaii Revised Statutes, is
5	amended by amending subsection (a) to read as follows:
6	"(a) If, after hearing all relevant evidence, the court
7	finds that the respondent has failed to show cause why the order
8	should not be continued and that a protective order is necessary
9	to prevent domestic abuse or a recurrence of abuse, the court
10	may order that a protective order be issued for a further fixed
11	reasonable period as the court deems appropriate, including, in
12	the case where a protective order restrains any party from
13	contacting, threatening, or physically abusing a minor, a fixed
14	reasonable period extending to a date after the minor has
15	reached eighteen years of age.
16	The protective order may include all orders stated in the
17	temporary restraining order and may provide for further relief
18	as the court deems necessary to prevent domestic abuse or a
19	recurrence of abuse, including orders establishing temporary
20	visitation and custody with regard to minor children of the
21	parties and orders to either or both parties to participate in
22	domestic violence intervention services. If the court finds

1 that the party meets the requirements under section [334-59(a)(2), 334-C, the court further may order that the party be 2 3 taken to the nearest facility for emergency examination and treatment." 4 5 SECTION 26. Section 334-59, Hawaii Revised Statutes, is 6 repealed: ["\$334-59 Emergency examination and hospitalization. 7 8 (a) Initiation of proceedings. An emergency admission may be 9 initiated as follows: (1) If a law enforcement officer has reason to believe 10 11 that a person is imminently dangerous to self or 12 others, the officer shall call for assistance from 13 a mental health emergency worker designated by the 14 director; provided that if a law enforcement officer 15 is unable to reach a mental health emergency worker 16 telephonically or has reason to believe the situation 17 to be unstable to a degree that a delay of greater 18 than two minutes would result in serious harm to the individual, others, or property, the law enforcement 19 20 officer may act to gain control of the individual. Once the law enforcement officer has gained control of 21 22 the individual, the law enforcement officer shall call

1	for assistance from a mental health emergency worker
2	designated by the director; provided that the law
3	enforcement officer shall document why the situation
4	necessitated that the law enforcement officer gain
5	control of the individual. Upon determination by the
6	mental health emergency worker that the person is
7	imminently dangerous to self or others, the person
8	shall be transported by ambulance or other suitable
9	means to a licensed psychiatric facility or other
10	facility designated by the director for further
11	evaluation and possible emergency hospitalization. If
12	a crisis intervention officer has probable cause to
13	believe that a person is imminently dangerous to self
14	or others, the crisis intervention officer shall call
15	a mental health emergency worker to determine if the
16	person shall be transported by ambulance or other
17	suitable means to a behavioral health crisis center
18	designated by the director as determined by a mental
19	health emergency worker. A law enforcement officer
20	may also take into custody and transport to any
21	facility designated by the director any person
22	threatening or attempting suicide. The law

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1 enforcement officer shall make application for the examination, observation, and diagnosis of the person 2 in custody. The application shall state or shall be 3 4 accompanied by a statement of the circumstances under which the person was taken into custody and the 5 reasons therefor, which shall be transmitted with the 6 7 person to a physician, advanced practice registered 8 nurse, or psychologist at the facility. As used in this paragraph, "crisis intervention 9 10 officer" has the same meaning as defined in section 11 353C-1; 12 (2) Upon written or oral application of any licensed 13 physician, advanced practice registered nurse, 14 psychologist, attorney, member of the clergy, health or social service professional, or any state or county 15 16 employee in the course of employment, a judge may 17 issue an ex parte order orally, but shall reduce the order to writing by the close of the next court day 18 19 following the application, stating that there is 20 probable cause to believe the person is mentally ill 21 or suffering from substance abuse, is imminently 22 dangerous to self or others and in need of care or

1		treatment, or both, giving the findings upon which the
2		conclusion is based. The order shall direct that a
3		law enforcement officer or other suitable individual
4		take the person into custody and deliver the person to
5		a designated mental health program, if subject to an
6		assisted community treatment order issued pursuant to
7		part VIII, or to the nearest facility designated by
8		the director for emergency examination and treatment,
9		or both. The ex parte order shall be made a part of
10		the patient's clinical record. If the application is
11		oral, the person making the application shall reduce
12		the application to writing and shall submit the same
13		by noon of the next court day to the judge who issued
14		the oral ex parte order. The written application
15		shall be executed subject to the penalties of perjury
16		but need not be sworn to before a notary public; or
17	(3)	Any licensed physician, advanced practice registered
18		nurse, physician assistant, or psychologist who has
19		examined a person and has reason to believe the person
20		is:
21		(A) Mentally ill or suffering from substance abuse;
22		(B) Imminently dangerous to self or others; and

1	(C) In need of care or treatment,
2	may direct transportation, by ambulance or other
3	suitable means, to a licensed psychiatric facility or
4	other facility designated by the director for further
5	evaluation and possible emergency hospitalization. A
6	licensed physician, an advanced practice registered
7	nurse, or a physician assistant may administer
8	treatment as is medically necessary, for the person's
9	safe transportation. A licensed psychologist may
10	administer treatment as is psychologically necessary.
11	(b) Emergency examination. A patient who is delivered for
12	emergency examination and treatment to a psychiatric facility or
13	a behavioral health crisis center shall be provided an
14	examination, which shall include a screening to determine
15	whether the criteria for involuntary hospitalization listed in
16	section 334-60.2 persists, by a licensed physician, medical
17	resident under the supervision of a licensed physician, or
18	advanced practice registered nurse without unnecessary delay,
19	and shall be provided such treatment as is indicated by good
20	medical practice. If, after the examination, screening, and
21	treatment, the licensed physician, medical resident under the
22	supervision of a licensed physician, or advanced practice

1	registered nurse determines that the involuntary hospitalization
2	criteria persist, then a psychiatrist or advanced practice
3	registered nurse who has prescriptive authority and who holds an
4	accredited national certification in an advanced practice
5	registered nurse psychiatric specialization shall further
6	examine the patient to diagnose the presence or absence of a
7	mental illness or substance use disorder, further assess the
8	risk that the patient may be dangerous to self or others, and
9	assess whether or not the patient needs to be hospitalized. If
10	it is determined that hospitalization is not needed, an
11	examination pursuant to section 334 121.5 shall be completed.
12	(c) Release from emergency examination. If, after
13	examination, the licensed physician, psychiatrist, or advanced
14	practice registered nurse with prescriptive authority and who
15	holds an accredited national certification in an advanced
16	practice registered nurse psychiatric specialization determines
17	that the involuntary hospitalization criteria set forth in
18	section 334-60.2 are not met or do not persist and the
19	examination pursuant to section 334-121.5, where required, has
20	been completed, the patient shall be discharged expediently,
21	unless the patient is under criminal charges, in which case the

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patient shall be returned to the custody of a law enforcement
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    officer.
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         (d) Emergency hospitalization. If the psychiatrist or
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    advanced practice registered nurse with prescriptive authority
5
    and who holds an accredited national certification in an
6
    advanced practice registered nurse psychiatric specialization
7
    who performs the emergency examination has reason to believe
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    that the patient is:
9
         (1) Mentally ill or suffering from substance abuse;
10
              Imminently dangerous to self or others; and
         \frac{(2)}{}
11
         (3) In need of care or treatment, or both,
12
    the psychiatrist or advanced practice registered nurse with
13
    prescriptive authority and who holds an accredited national
14
    certification in an advanced practice registered nurse
    psychiatric specialization shall direct that the patient be
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16
    hospitalized on an emergency basis or cause the patient to be
    transferred to another psychiatric facility or other facility
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18
    designated by the director for emergency hospitalization, or
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    both. The patient shall have the right immediately upon
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    admission to telephone the patient's guardian or a family member
    including a reciprocal beneficiary, or an adult friend and an
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    attorney. If the patient declines to exercise that right, the
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1	staff of the facility shall inform the adult patient of the
2	right to waive notification to the family, including a
3	reciprocal beneficiary, and shall make reasonable efforts to
4	ensure that the patient's guardian or family, including a
5	reciprocal beneficiary, is notified of the emergency admission
6	but the patient's family, including a reciprocal beneficiary,
7	need not be notified if the patient is an adult and requests
8	that there be no notification. The patient shall be allowed to
9	confer with an attorney in private.
10	(e) Release from emergency hospitalization. If at any
11	time during the period of emergency hospitalization the treating
12	physician determines that the patient no longer meets the
13	criteria for emergency hospitalization and the examination
14	pursuant to section 334-121.5 has been completed, the physician
15	shall expediently discharge the patient. If the patient is
16	under criminal charges, the patient shall be returned to the
17	custody of a law enforcement officer. In any event, the patient
18	shall be released within forty-eight hours of the patient's
19	admission to a psychiatric facility or other facility designated
20	by the director, unless the patient voluntarily agrees to
21	further hospitalization, or a proceeding for court-ordered
22	evaluation or hospitalization, or both, is initiated as provided

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    in section 334-60.3. If that time expires on-a Saturday,
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    Sunday, or holiday, the time for initiation is extended to the
    close of the next court day. Upon initiation of the
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    proceedings, the facility shall be authorized to detain the
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    patient until further order of the court."]
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         SECTION 27. Section 334-59.5, Hawaii Revised Statutes, is
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    repealed:
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         ["[§334-59.5] Notice of emergency transportation,
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    examinations, and hospitalizations. Notice of an individual's
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    emergency admission, examination, and hospitalization under this
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    chapter may be given to at least one of the following persons in
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    the following order of priority: the individual's spouse or
    reciprocal beneficiary, legal parents, adult children, legal
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14
    quardian, if one has been appointed, or if none can be found,
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    the closest adult relative, as long as the individual:
         (1) Has capacity to make health care decisions and agrees;
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         (2) Is given the opportunity to object and does not
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              object, or the health care provider can reasonably
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              infer from the circumstances based on the exercise of
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              professional judgment that the individual does not
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              object; or
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1	(3) Is incapacitated or an emergency circumstance exists
2	and the health care provider determines based on the
3	exercise of professional judgment that doing so is in
4	the best interest of the individual."]
5	SECTION 28. This Act does not affect rights and duties
6	that matured, penalties that were incurred, and proceedings that
7	were begun before its effective date.
8	SECTION 29. If any provision of this Act or the
9	application thereof to any person or circumstance is held
10	invalid, the invalidity does not affect other provisions or
11	applications of the Act that can be given effect without the
12	invalid provision or application, and to this end the provisions
13	of this Act are severable.
14	SECTION 30. In codifying the new sections added by section
15	2 and referenced in sections 2, 19, and 25 of this Act, the
16	revisor of statutes shall substitute appropriate section numbers
17	for the letters used in designating the new sections in this
18	Act.
19	SECTION 31. Statutory material to be repealed is bracketed
20	and stricken. New statutory material is underscored.

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1	SECTION 32.	This Act shall take effect upon its approval.	
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3		INTRODUCED BY: MMM.M	
4		BY REQUEST	

Report Title:

Mental Health; Admission to Psychiatric Facility; Emergency Transportation; Emergency Examination; Emergency Hospitalization; Involuntary Hospitalization; Assisted Community Treatment; Administration of Treatment Over the Patient's Objection; Limited Liability; Confidentiality

Description:

Clarifies and expands the circumstances and procedures available for emergency transportation, examination, and hospitalization under chapter 334. Provides limits on liability for state and local governments and professionals during mental health emergency procedures while performing their duties in the course of employment. Expands the notice requirements for an emergency hospitalization to include an individual's health-care surrogate and clarifies when notice to family members can be waived. Removes the authority of the family court to appoint a legal quardian in a proceeding for involuntary hospitalization. Removes the requirement that psychiatric facilities wait for a response on a notice of intent to discharge an involuntary hospitalization patient prior to discharge. Clarifies the circumstances under which a subject of an order for assisted community treatment can be administered medication over the subject's objection. Provides limits on liability for an assisted community treatment provider. Modifies the administrative authorization of medical treatment over the patient's objection to be reviewed by a single decision-maker who is a psychiatrist.

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

JUSTIFICATION SHEET SB. NO. 1322

DEPARTMENT:

Attorney General

TITLE:

A BILL FOR AN ACT RELATING TO MENTAL HEALTH.

PURPOSE:

To clarify, update, and revise Hawaii's mental health laws by:

- (1) Clarifying the procedures and expanding on the circumstances available from initial contact with an individual suffering from mental illness or substance abuse to emergency transportation, examination, and hospitalization of the individual;
- (2) Establishing liability limits for state and local governments and health care professionals under certain circumstances arising from emergency procedures;
- (3) Expanding the notice requirements when an emergency hospitalization occurs to include an individual's healthcare surrogate, as well as clarifying when the individual can waive notice to the individual's family members;
- (4) Removing the authority of the family court to appoint a legal guardian or conservator in a proceeding for involuntary hospitalization, thereby leaving appointments for legal guardians or conservators subject to the requirements of chapter 560, article V, Hawaii Revised Statutes (HRS);
- (5) Removing the requirement that psychiatric facilities wait for responses from interested parties to a notice of intent to discharge a patient under involuntary hospitalization prior to discharging the patient;
- (6) Clarifying the circumstances under which a subject of an order for assisted community treatment can be administered medication over the subject's objection;

- (7) Providing limits on liability for an assisted community treatment provider; and
- (8) Modifying the requirements to obtain administrative authorization of medical treatment over the objection of a patient who is in the custody of the director and in a psychiatric facility, so that the treatment can be authorized by a single decision-maker who is a psychiatrist.

MEANS:

Add a new subpart to part IV and a new section to part VIII of chapter 334, HRS; form subparts out of part IV of chapter 334, HRS. Amend sections 334-1, 334-60.2, 334-60.3, 334-60.4, 334-60.5, 334-60.7, 334-76, 334-121, 334-122, 334-123(c) and (d), 334-124, 334-125(a) and (c), 334-126(g), 334-127, 334-129, 334-130, 334-131(a), 334-161(a), 334-162(a), 334E-2(a), and 586-5.5(a), HRS. Repeal sections 334-59 and 334-59.5, HRS.

JUSTIFICATION:

The Department was tasked with revising Hawaii's mental health laws to provide greater clarity for stakeholders and the public, as well as updating legal mechanisms to better help individuals suffering from mental illness or substance abuse. Improvements in these laws combined with medical advancements for mental health treatment and care are needed to optimize the State's ability to ensure the welfare of all its citizens.

Impact on the public: The bill will improve public welfare and safety and clarify available interventions for individuals suffering from mental illness or substance abuse.

Impact on the department and other agencies: The bill aims to enable the Department of Health to direct its resources towards the areas of greatest need and prioritize

providing better care to more patients in

need.

GENERAL FUND:

None.

OTHER FUNDS:

None.

PPBS PROGRAM

DESIGNATION:

None.

OTHER AFFECTED

AGENCIES:

Judiciary; Department of Health; County Law

Enforcement Agencies; County Emergency

Medical Services.

EFFECTIVE DATE:

Upon approval.