JOSH GREEN, M.D. GOVERNOR KE KIA'ÃINA



GOV. MSG. NO. (32)

EXECUTIVE CHAMBERS KE KE'ENA O KE KIA'ĀINA

June 25, 2025

The Honorable Ronald D. Kouchi President of the Senate, and Members of the Senate Thirty-Third State Legislature State Capitol, Room 409 Honolulu, Hawai'i 96813 The Honorable Nadine Nakamura Speaker, and Members of the House of Representatives Thirty-Third State Legislature State Capitol, Room 431 Honolulu, Hawai'i 96813

Aloha President Kouchi, Speaker Nakamura, and Members of the Legislature:

This is to inform you that on June 25, 2025, the following bill was signed into law:

S.B. NO. 1322, S.D. 2, H.D. 2, C.D. 1 RELATING TO MENTAL HEALTH. ACT 219

Mahalo,

nh Green M.D.

Josh Green, M.D. Governor, State of Hawai'i

Approved by the Governor

on JUN 2 5 2025

THE SENATE THIRTY-THIRD LEGISLATURE, 2025 STATE OF HAWAII

A BILL FOR AN ACT

ACT 219

S.B. NO.

1322

S.D. 2

H.D. 2 C.D. 1

RELATING TO MENTAL HEALTH.

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

1 SECTION 1. The legislature finds that the State's mental 2 health laws provide the State with a variety of methods to help 3 and support individuals suffering from mental illness or 4 substance abuse. As the number of individuals in need of help 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 11 for the administration of treatment, enable the State and mental 12 health providers to provide compassionate assistance to 13 individuals suffering from mental illness or substance abuse 14 when they need it the most.

Accordingly, the purpose of this Act is to clarify, update,and revise Hawaii's mental health laws by:

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1	(1)	Requiring the department of health to submit annual
2		reports to the legislature on emergency
3		transportations and assisted community treatment
4		petitions and orders, based on information provided by
5		service providers and the department of the attorney
6		general;
7	(2)	Clarifying emergency transportation, examination, and
8		hospitalization procedures for individuals who may be
9		mentally ill or suffering from substance abuse and are
10		imminently dangerous to self or others;
11	(3)	Requiring treatment providers to provide relevant
12		treatment information to the department of the
13		attorney general, upon the department's request, for
14		purposes of preparing a petition for assisted
15		community treatment;
16	(4)	Amending the procedures for involuntary
17		hospitalizations and assisted community treatment
18		petitions;
19	(5)	Clarifying the circumstances under which a subject of

20 an order for assisted community treatment can be

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1		administered medication over the subject's objection;
2		and
3	(6)	Allowing a single psychiatrist, rather than a panel of
4		three, to provide administrative authorization for
5		medical treatment over the objection of a patient who
6		is in the custody of the director of health and in a
7		psychiatric facility.
8	SECT	ION 2. Chapter 334, Hawaii Revised Statutes, is
9	amended by	adding a new section to part I to be appropriately
10	designated	and to read as follows:
11	" <u>§334</u>	-A Annual report; emergency transportations; assisted
12	community	treatment. Each provider of services involved in an
13	emergency	transportation initiated by a law enforcement officer,
14	court orde	er, or health care provider; assisted community
15	treatment	petition; or assisted community treatment order
16	pursuant t	o part IV or VIII, and the department of the attorney
17	general, s	hall provide the necessary data to the department to
18	complete t	he report under this section. Based on this data, the
19	department	shall submit an annual report to the legislature no
20	later than	thirty days prior to the convening of each regular



1	The	report shall include, at a minimum, an evaluation of
2	the effec	ctiveness of the strategies employed by each provider
3	operating	g pursuant to parts IV and VIII in reducing
4	hospitali	zation of persons subject to emergency transportation
5	or assist	ed community treatment and in reducing involvement with
6	local law	enforcement by persons subject to assisted community
7	treatment	orders. The evaluation and report shall also include
8	any other	measures identified by the department regarding
9	individua	als subject to assisted community treatment petitions
10	and order	s and all of the following, based on information that
11	<u>is availa</u>	ble:
12	(1)	The number of individuals brought to each of the
13		facilities operated by service providers through
14		emergency transportation, and the number of those
15		individuals transported due to enforcement of an order
16		for assisted community treatment;
17	(2)	The number of individuals involuntarily hospitalized
18		through emergency transportation and emergency
19		examination;
20	<u>(3)</u>	The number of individuals subject to assisted
21		community treatment orders;



1	(4)	The petitioner's relationship to the individual
2		subject to the assisted community treatment petition;
3	(5)	The number of individuals under assisted community
4		treatment orders who become involved with the criminal
5		justice system by way of arrests, convictions,
6		probation, incarceration, or other relevant data;
7	(6)	The need for hospitalization and related length of
8		stay for individuals after they become subject to an
9		assisted community treatment order;
10	(7)	Adherence to prescribed treatment by individuals
11		subject to an assisted community treatment order; and
12	(8)	Other indicators of successful engagement, if any, by
13		individuals subject to an assisted community treatment
14		order."
15	SECT	ION 3. Chapter 334, Hawaii Revised Statutes, is
16	amended as	s follows:
17	1. I	By adding a new subpart to part IV to be designated as
18	subpart A	and to read:
19		"A. Emergency Procedures
20	§334-	-B Emergency procedures. The emergency procedures in
21	this subpa	art shall consist of emergency transportation,



1	emergency	y examination, and emergency hospitalization for	
2	individua	als who may be mentally ill or suffering from substance	
3	abuse and	d imminently dangerous to self or others.	
4	§334	-C Emergency transportation initiated by a law	
5	enforceme	ent officer. (a) When a law enforcement officer has a	
6	reasonabl	e suspicion that an individual is imminently dangerous	
7	to self or others and needs to be detained for emergency		
8	examination, the law enforcement officer shall contact a mental		
9	health emergency worker; provided that the law enforcement		
10	officer may temporarily detain the individual if the law		
11	enforceme	ent officer:	
12	(1)	Is unable to reach a mental health emergency worker	
13		telephonically after three attempts;	
14	(2)	Has reason to believe that the situation requires	
15		immediate intervention to prevent harm to the	
16		individual or others;	
17	(3)	Contacts a mental health emergency worker at the	
18		earliest time possible; and	
19	(4)	Documents the reasons why the situation necessitated	
20		that the individual be detained.	

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If the mental health emergency worker determines that the
 individual is mentally ill or suffering from substance abuse and
 is imminently dangerous to self or others, the law enforcement
 officer shall detain the individual for transportation to a
 facility for an emergency examination.

6 (b) When a crisis intervention officer has probable cause 7 to believe that an individual is mentally ill or suffering from substance abuse and is imminently dangerous to self or others, 8 9 the crisis intervention officer shall detain the individual for 10 transportation to a facility for an emergency examination. The 11 crisis intervention officer shall contact a mental health 12 emergency worker to determine the type of facility where the 13 individual shall be transported.

14 (c) Any individual detained under this section shall be 15 transported directly to a psychiatric facility or other facility 16 designated by the director, as determined by a mental health 17 emergency worker; provided that if a medical emergency occurs 18 during transport, the individual shall be transported to the 19 nearest emergency department. A law enforcement officer shall 20 make an application for the emergency examination of the individual. The application shall state in detail the 21

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(3) Directing that a law enforcement officer take the
 individual into custody and transport the individual
 directly to a psychiatric facility or other facility
 designated by the director for an emergency
 examination.

6 The person who made the application shall notify a mental
7 health emergency worker of the written or oral ex parte order
8 and, when possible, shall coordinate the transport of the
9 individual with the emergency worker.

10 If an application under subsection (a) was made (b) 11 orally, the person who made the application shall reduce the application to writing and submit it to the judge who issued the 12 ex parte order by noon of the next court day after the order was 13 14 The written application shall be made under penalty of issued. 15 law but need not be sworn to before a notary public. If the 16 judge issued an ex parte order orally, the judge shall reduce 17 the oral order to writing by the close of the next court day 18 after the order was issued. The written ex parte order shall be 19 transmitted with the individual to the psychiatric facility or 20 other facility designated by the director and be made a part of 21 the individual's clinical record.

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1	§334-E Emergency transportation initiated by a health care
2	provider. (a) Any licensed physician, advanced practice
3	registered nurse, physician assistant, licensed clinical social
4	worker, or psychologist who has examined an individual and
5	determines that the individual is mentally ill or suffering from
6	substance abuse and is imminently dangerous to self or others
7	may direct a law enforcement officer to detain and transport the
8	individual by ambulance or other suitable means to a psychiatric
9	facility or other facility designated by the director for an
10	emergency examination, and may administer treatment, within the
11	examining health care provider's scope of practice, as necessary
12	for the individual's safe transportation. The examining health
13	care provider shall provide a written statement of circumstances
14	and reasons necessitating the emergency examination. The
15	written statement shall be transmitted with the individual to
16	the psychiatric facility or other facility designated by the
17	director and be made a part of the individual's clinical record.
18	(b) Any individual who is subject to an order for assisted
19	community treatment and fails to comply with the order for
20	assisted community treatment, despite reasonable efforts made by
21	a designated assisted community treatment provider, as defined

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in section 334-122, to solicit compliance, may be transported to 1 2 a psychiatric facility or other facility designated by the director for an emergency examination if it is in the clinical 3 judgment of a licensed physician, advanced practice registered 4 nurse, physician assistant, licensed clinical social worker, or 5 psychologist that the individual may be in need of emergency 6 hospitalization pursuant to section 334-G. At the direction of 7 8 the examining health care provider, a law enforcement officer 9 may detain and transport the individual by ambulance or other 10 suitable means to a psychiatric facility or other facility 11 designated by the director. The examining health care provider 12 shall provide a written statement of circumstances and reasons 13 explaining why the individual may be in need of emergency 14 hospitalization. The written statement shall be transmitted 15 with the individual to the psychiatric facility or other 16 facility designated by the director and be made a part of the 17 individual's clinical record.

(c) Those performing the emergency transport shall
coordinate the transport of the individual with the mental
health emergency worker.



(d) The examining health care provider shall also provide
 a copy of the written statement required under this section to
 the department within five business days.

\$334-F Emergency examination. (a) A licensed physician, 4 medical resident under the supervision of a licensed physician, 5 physician assistant, psychologist, or advanced practice 6 registered nurse may conduct an initial examination and 7 screening of a patient transported under section 334-C, 334-D, 8 or 334-E to determine whether the criteria for involuntary 9 hospitalization listed in section 334.60.2 persists and 10 administer treatment as indicated by good medical practice; 11 provided that if after the examination, screening, and 12 treatment, the licensed physician, medical resident under the 13 supervision of a licensed physician, physician assistant, 14 15 psychologist, or advanced practice registered nurse determines 16 that the involuntary hospitalization criteria persists, then the 17 patient shall be further examined by a qualified psychiatric 18 examiner to diagnose the presence or absence of a mental illness 19 or substance use disorder, further assess the risk that the patient may be dangerous to self or others, and assess whether 20 21 or not the patient continues to meet the criteria for

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involuntary hospitalization as provided in section 334-60.2. 1 If no initial examination and screening of the patient is 2 conducted, a qualified psychiatric examiner shall conduct an 3 emergency examination of a patient transported under section 4 5 334-C, 334-D, or 334-E without unnecessary delay and provide the 6 patient with treatment as indicated by good medical practice; 7 provided that the emergency examination shall include a 8 determination of whether the patient meets the criteria for 9 involuntary hospitalization as provided in section 334-60.2. 10 (b) If, following an emergency examination of a patient 11 under subsection (a), a qualified psychiatric examiner 12 determines that the criteria for involuntary hospitalization do 13 not exist, the patient shall be discharged expeditiously; 14 provided that if the patient is not under an order for assisted 15 community treatment, a qualified psychiatric examiner shall 16 conduct an examination pursuant to section 334-121.5 before the 17 discharge. A patient under criminal charges shall be returned 18 to the custody of a law enforcement officer.

19 §334-G Emergency hospitalization. (a) If, following an
20 emergency examination pursuant to section 334-F(a), a qualified
21 psychiatric examiner determines that the criteria for

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hospitalization, the patient shall be discharged expeditiously;
provided that if the patient is not under an order for assisted
community treatment, a qualified psychiatric examiner shall
conduct an examination pursuant to section 334-121.5 before the
discharge. A patient under criminal charges shall be returned
to the custody of a law enforcement officer.

7 (d) The patient shall have the right, immediately upon
8 emergency hospitalization, to telephone an attorney and the
9 patient's surrogate, guardian, family member including a
10 reciprocal beneficiary, or adult friend. The patient shall be
11 allowed to confer with an attorney in private.

12 \$334-H Notice of emergency transportation, examination, and hospitalization. Notice of an individual's emergency 13 transportation, examination, and hospitalization under this 14 15 subpart may be given to at least one of the following persons in 16 the following order of priority: the individual's spouse or 17 reciprocal beneficiary, legal parents, adult children, 18 surrogate, legal guardian, or if none can be found, the closest 19 adult relative, as long as the individual:

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1	(1)	Has capacity to make health care decisions and
2		consents that notice may be given to at least one of
3		the persons listed in this section;
4	(2)	Is given the opportunity to object and does not
5		object, or the health care provider can reasonably
6		infer from the circumstances based on the exercise of
7		professional judgment that the individual does not
8		object; or
9	(3)	Is incapacitated or an emergency circumstance exists,
10		and the health care provider determines, based on the
11		exercise of professional judgment, that giving
12		notification is in the best interest of the
13		individual.
14	The staff	of the facility shall make reasonable efforts to
15	ensure that	at the patient's family, including a reciprocal
16	beneficia	ry, is notified of the emergency hospitalization,
17	unless the	e patient is an adult and waives notification."
18	2. 1	By designating section 334-60.1 as subpart B and
19	inserting	a title before section 334-60.1 to read:
20		"B. Voluntary Admission"

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1	3. By designating sections 334-60.2 through 334-60.7 as
2	subpart C and inserting a title before section 334-60.2 to read:
3	"C. Involuntary Hospitalization"
4	4. By designating sections 334-61 and 334-62 as subpart D
5	and inserting a title before section 334-61 to read:
6	"D. General Provisions"
7	SECTION 4. Chapter 334, Hawaii Revised Statutes, is
8	amended by adding a new section to part VIII to be appropriately
9	designated and to read as follows:
10	"§334-I Records and disclosure of information. (a) A
11	treatment provider who provided or is providing medical,
12	psychiatric, therapeutic, or social services treatment to an
13	individual shall provide relevant treatment information, if
14	available, to the department of the attorney general upon the
15	department's request for the purpose of preparing a petition for
16	assisted community treatment. The treatment information may
17	include a certificate issued pursuant to section 334-123(c), a
18	treatment plan prepared pursuant to section 334-126(g), records
19	related to actions or proceedings pursuant to part IV, records
20	relating to the individual's treatment history, and other
21	records deemed relevant by the individual's treatment provider.



1	(b) The petitioner of an assisted community treatment
2	order, department of the attorney general, and family court
3	shall disclose an assisted community treatment order to state
4	and county law enforcement agencies, an assisted community
5	treatment provider, or any other entity necessary to carry out
6	the terms of the assisted community treatment order."
7	SECTION 5. Section 334-1, Hawaii Revised Statutes, is
8	amended as follows:
9	1. By adding two new definitions to be appropriately
10	inserted and to read:
11	""Qualified psychiatric examiner" means a licensed
12	psychiatrist or advanced practice registered nurse with
13	prescriptive authority who holds an accredited national
14	certification in an advanced practice registered nurse
15	psychiatric specialization.
16	"Surrogate" means a person appointed under:
17	(1) A power of attorney for health care to make a health
18	care decision for the individual who made the
19	appointment; or
20	(2) Law or court order to make health care decisions for
21	an individual."



1	2. By amending the definition of "patient" to read:
2	""Patient" means [a person] <u>an individual</u> under
3	observation, care, or treatment at a psychiatric facility[\cdot] or
4	other facility designated by the director."
5	3. By amending the definition of "treatment" to read:
6	""Treatment" means the broad range of emergency, out-
7	patient, intermediate, domiciliary, and inpatient services and
8	care, including diagnostic evaluation, medical, psychiatric,
9	psychological, and social service care, vocational
10	rehabilitation, psychosocial rehabilitation, career counseling,
11	and other special services [which] <u>that</u> may be extended to
12	[handicapped persons.] an individual with a disability."
13	SECTION 6. Section 334-60.2, Hawaii Revised Statutes, is
14	amended to read as follows:
15	"\$334-60.2 Involuntary hospitalization criteria. [A
16	person] An individual may be committed to a psychiatric facility
17	for involuntary hospitalization $[\tau]$ if the court finds:
18	(1) That the [person] <u>individual</u> is mentally ill or
19	suffering from substance abuse;
20	(2) That the [person] <u>individual</u> is imminently dangerous
21	to self or others; and

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That the [person] individual is in need of care or 1 (3) treatment, or both, and there is no suitable 2 alternative available through existing facilities and 3 programs [which] that would be less restrictive than 4 5 hospitalization." SECTION 7. Section 334-60.3, Hawaii Revised Statutes, is 6 7 amended to read as follows: "§334-60.3 Initiation of proceeding for involuntary 8 hospitalization. (a) Any person may file a petition alleging 9 that [a-person located in the county] an individual meets the 10 criteria for commitment to a psychiatric facility[-] as provided 11 in section 334-60.2. The petition shall be filed in the county 12 where the individual resides and executed subject to [the] 13 penalties [of perjury] provided by law but need not be sworn to 14 15 before a notary public. The [attorney general, the attorney 16 general's deputy, special deputy, or appointee designated to 17 present the case] department of the attorney general shall assist the petitioner [to-state] in stating the substance of the 18 19 petition in plain and simple language. The petition may be 20 accompanied by a certificate of the [licensed physician; 21 advanced practice-registered nurse,] qualified psychiatric



examiner or psychologist who has examined the [person] 1 2 individual within two days before [submission of] the petition $[\tau]$ is filed, unless the [person] individual whose 3 4 commitment is sought has refused to submit to medical or 5 psychological examination, in which case the fact of refusal shall be alleged in the petition. The certificate shall set 6 7 forth the signs and symptoms relied upon by the [physician, advanced practice registered nurse,] qualified psychiatric 8 9 examiner or psychologist to determine the [person] individual is 10 in need of [care or] treatment $[-or both_{-}]$ and whether the 11 [person] individual is capable of realizing and making a 12 rational decision with respect to the [person's] individual's 13 need for treatment. If the petitioner believes that further 14 [evaluation] examination is necessary before commitment, the 15 petitioner may request [such] further [evaluation.] examination. 16 (b) In the event the subject of the petition has been 17 given an examination, evaluation, or treatment in a psychiatric 18 facility within five days before submission of the petition, and hospitalization is recommended by the staff of the facility, the 19 20 petition may be accompanied by the administrator's certificate

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in lieu of a [physician's] qualified psychiatric examiner's or
 psychologist's certificate.

The petition shall include the name, address, and 3 (c) telephone number of at least one of the following persons in the 4 following order of priority: the subject of the petition's 5 spouse or reciprocal beneficiary, legal parents, adult children, 6 7 surrogate, and legal guardian [, if one has been appointed]. If 8 the subject of the petition has no living spouse or reciprocal 9 beneficiary, legal parent, adult [children,] child, surrogate, 10 or legal guardian, or if none can be found, notice shall be 11 served on at least one of the subject's closest adult relatives, 12 if any can be found."

13 SECTION 8. Section 334-60.4, Hawaii Revised Statutes, is 14 amended by amending subsections (a) through (c) to read as 15 follows:

16 "(a) The court shall set a hearing on the petition and 17 notice of the time and place of the hearing shall be served in 18 accordance with, and to those persons specified in, a current 19 order of commitment. If there is no current order of 20 commitment, notice of the hearing shall be served personally on 21 the subject of the petition and served personally or by

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1	certified or registered mail, return receipt requested,
2	deliverable to the addressee only, on the subject's spouse or
3	reciprocal beneficiary, legal parents, adult children,
4	surrogate, and legal guardian[, if one has been appointed]. If
5	the subject of the petition has no living spouse or reciprocal
6	beneficiary, legal parent, adult [children,] <u>child, surrogate,</u>
7	or legal guardian, or if none can be found, notice of the
8	hearing shall be served on at least one of the subject's closest
9	adult relatives, if any can be found. Notice of the hearing to
10	the subject's spouse or reciprocal beneficiary, legal parents,
11	adult children, or closest adult relative may be waived if the
12	subject of the petition is an adult and requests that these
13	persons not be notified. Notice of the hearing shall also be
14	served on the public defender, attorney for the subject of the
15	petition, or other court-appointed attorney [as-the case-may
16	be]. If the subject of the petition is a minor, notice of the
17	hearing shall also be served upon the person who has had the
18	principal care and custody of the minor during the sixty days
19	preceding the date of the petition, if that person can be found
20	within the State. Notice shall also be given to other persons
21	as the court may designate.

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1	(b)	The notice shall include the following:
2	(1)	The date, time, and place of the hearing $[\tau]$; a clear
3		statement of the purpose of the proceedings and of
4		possible consequences to the subject[+] of the
5		petition; and a statement of the legal standard upon
6		which commitment is authorized;
7	(2)	A copy of the petition;
8	(3)	A [written notice,] statement, in plain and simple
9		language, that the subject may waive the hearing by
10		voluntarily agreeing to hospitalization[$_{ au}$] or $_{t}$ with
11		the approval of the court, to some other form of
12		treatment;
13	(4)	A filled-out form indicating [such] the waiver;
14	(5)	A [written notice,] statement, in plain and simple
15		language, that the subject or the subject's surrogate,
16		guardian, or representative may apply at any time for
17		a hearing on the issue of the subject's need for
18		hospitalization, if the subject has previously waived
19		such a hearing;



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1 the subject is at such a facility, that the subject be retained
2 there."

3 SECTION 9. Section 334-60.5, Hawaii Revised Statutes, is
4 amended to read as follows:

"§334-60.5 Hearing on petition. (a) The court shall 5 adjourn or continue a hearing for failure to timely notify the 6 subject of the petition's spouse or reciprocal beneficiary, 7 legal [parents,] parent, adult [children,] child, surrogate, 8 guardian, or relative, or other person determined by the court 9 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 the subject waived notice pursuant to section 334-60.4(a) or the 12 13 court determines that the interests of justice require that the 14 hearing continue without adjournment or continuance.

(b) The time and form of the procedure incident to hearing the issues in the petition shall be provided by court rule. Unless the hearing is waived, the judge shall hear the petition as soon as possible and no later than ten days after the date the petition is filed unless a reasonable delay is sought for good cause shown by the subject of the petition, the subject's

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attorney, or those persons entitled to receive notice of the
 hearing under section 334-60.4.

The subject of the petition shall be present at all 3 (C) hearings unless the subject waives the right to be present, is 4 unable to attend, or creates conditions that make it impossible 5 to conduct [the] a hearing in a reasonable manner as determined 6 by the judge. A waiver is valid only upon acceptance by the 7 court following a judicial determination that the subject 8 understands the subject's rights and is competent to waive them, 9 or is unable to participate. If the subject is unable to 10 participate, the judge shall appoint a guardian ad litem or a 11 temporary guardian as provided in article V of chapter 560, to 12 represent the subject throughout the proceedings. 13

Hearings may be held at any convenient place within 14 (d) the circuit. Hearings may be conducted by video conferencing 15 unless the court determines personal appearance is necessary. 16 The subject of the petition, any interested party, or the court 17 on its own motion may request a hearing in another circuit 18 19 because of convenience to the parties, witnesses, or the court 20 or because of the [individual's] subject's mental or physical 21 condition.

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1 The [attorney-general, the attorney general's deputy, (e) 2 special deputy, or appointee] department of the attorney general 3 shall present the case for a petitioner for hearings convened 4 under this chapter, [except that the attorney general, the 5 attorncy general's deputy, special deputy, or appointee need not 6 participate in or be present at a hearing whenever] unless a petitioner [or some other appropriate person] has retained 7 8 private counsel who will be present in court and will present to 9 the court the case for involuntary hospitalization.

(f) Counsel for the subject of the petition shall be
allowed adequate time for investigation of the matters at issue
and for preparation[7] and shall be permitted to present the
evidence that the counsel believes necessary to a proper
disposition of the proceedings, including evidence as to
alternatives to inpatient hospitalization.

16 (g) No individual may be found to require treatment in a 17 psychiatric facility unless at least one [physician, advanced 18 practice registered nurse,] qualified psychiatric examiner or 19 psychologist who has personally examined the individual 20 testifies in person at the hearing. This testimony may be 21 waived by the subject of the petition. If the subject of the



petition [has refused] refuses to be examined by a [licensed 1 2 physician, advanced practice registered nurse,] qualified 3 psychiatric examiner or psychologist, the subject may be 4 examined by a court-appointed [licensed physician, advanced 5 practice registered nurse,] qualified psychiatric examiner or 6 psychologist. If the subject refuses to be examined and there 7 is sufficient evidence to believe that the allegations of the 8 petition are true, the court may make a temporary order 9 committing the subject to a psychiatric facility for a period of 10 no more than five days for the purpose of a diagnostic 11 examination [and evaluation]. The subject's refusal to be 12 examined shall be treated as a denial that the subject is 13 mentally ill or suffering from substance abuse. Nothing in this 14 section shall limit the [individual's] subject's privilege 15 against self-incrimination.

16 (h) The subject of the petition in a hearing under this 17 section has the right to secure an independent [medical or 18 psychological evaluation] examination and present evidence 19 thereon.

20 (i) If after hearing all relevant evidence, including the21 result of any diagnostic examination ordered by the court, the

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1 court finds that [an individual] a subject of a petition is not 2 a person requiring medical, psychiatric, psychological, or other 3 rehabilitative treatment or supervision, the court shall order 4 that the [individual] subject be discharged if the [individual] 5 subject has been hospitalized [prior to] before the hearing.

6 If the court finds that the criteria for involuntary (i) 7 hospitalization under section 334-60.2(1) has been met beyond a reasonable doubt and that the criteria under [sections] section 8 9 334-60.2(2) and $[\frac{334-60.2(3)}{3}]$ (3) have been met by clear and 10 convincing evidence, the court may issue an order to any law 11 enforcement officer to [deliver] transport the subject of the 12 order to a facility that has agreed to admit the subject as an 13 involuntary patient, or if the subject is already a patient in a psychiatric facility, authorize the facility to retain the 14 15 patient for treatment for a period of ninety days unless sooner 16 discharged. The court may also authorize the involuntary 17 administration of medication, where the subject has an existing 18 order for assisted community treatment $[\tau]$ issued pursuant to 19 part VIII of this chapter [, relating to assisted community 20 treatment,] and in accordance with the treatment prescribed by 21 that [prior] existing order. Notice of the subject's commitment



and the facility name and location where the subject will be 1 2 committed shall be provided to those persons entitled to notice pursuant to section 334-60.4. An order of commitment shall 3 specify which of those persons served with notice pursuant to 4 section 334-60.4, together with such other persons as the court 5 may designate, shall be entitled to receive any subsequent 6 notice of intent to discharge, transfer, or recommit. The court 7 shall forward to the Hawaii criminal justice data center all 8 orders of involuntary civil commitment or information from all 9 10 orders of involuntary civil commitment, as requested by the 11 Hawaii criminal justice data center, which in turn shall forward 12 the information to the Federal Bureau of Investigation, or its successor agency, for inclusion in the National Instant Criminal 13 14 Background Check System database. The orders or information 15 shall also be maintained by the Hawaii criminal justice data 16 center for disclosure to and use by law enforcement officials 17 for the purpose of firearms permitting, licensing, or 18 registration pursuant to chapter 134. This subsection shall 19 apply to all involuntary civil commitments without regard to the 20 date of the involuntary civil commitment.



1 [(k) The court may find that the subject of the petition 2 is an incapacitated or protected person, or both, under article 3 V-of chapter 560, and may appoint a guardian or conservator, or 4 both, for the subject under the terms and conditions as the 5 court-shall determine. 6 (1) (k) Persons entitled to notice [are] pursuant to this 7 section shall also be entitled to be present in the courtroom 8 for the hearing and to receive a copy of the hearing transcript 9 or recording, unless the court determines that the interests of 10 justice require otherwise." 11 SECTION 10. Section 334-60.7, Hawaii Revised Statutes, is 12 amended to read as follows: 13 "\$334-60.7 Notice of intent to discharge. (a) When the 14 administrator, the administrator's deputy, or the attending 15 physician of a psychiatric facility contemplates discharge of an 16 involuntary patient because of expiration of the court order for 17 commitment or because the patient is no longer a proper subject 18 for commitment, as determined by the criteria for involuntary 19 hospitalization in section 334-60.2, the administrator, the 20 administrator's deputy, or the attending physician shall provide 21 notice of intent to discharge, or if the patient voluntarily

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1 agrees to further hospitalization, the administrator, the administrator's deputy, or the attending physician shall provide 2 notice of the patient's admission to voluntary inpatient 3 treatment. The following requirements and procedures shall 4 5 apply: (1) The notice and a certificate of service shall be filed 6 with the family court and served on those persons whom 7 8 the order of commitment specifies as entitled to 9 receive notice, by mail at the person's last known 10 address. [Notice] If the commitment resulted directly from legal proceedings under chapter 704 or 706, 11 12 notice shall also be sent to the prosecuting attorney 13 of the county from which the person was originally 14 committed, by facsimile or electronically, for the 15 sole purpose of victim notification; and Any person specified as entitled to receive notice may 16 (2) 17 waive this right in writing with the psychiatric 18 facility[+ 19 (3) If no objection is filed within five calendar days of 20 mailing the notice, the administrator or attending 21 physician of the psychiatric facility shall discharge

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1		the patient or accept the patient for voluntary
2		inpatient treatment;
3	(4)	If any person specified as entitled to receive notice
4		files a written objection, with a certificate of
5		service, to the discharge or to the patient's
6		admission to voluntary inpatient treatment on the
7		grounds that the patient is a proper subject for
8		commitment, the family-court shall conduct a hearing
9		as soon as possible, prior to the termination of the
10		current commitment order, to determine if the patient
11		still meets the criteria for involuntary
12		hospitalization in section-334-60.2. The person
13		filing the objection shall also notify the psychiatric
14		facility by telephone on the date the objection is
15		filed;
16	-(5) -	If the family court finds that the patient does not
17		meet the criteria for-involuntary hospitalization in
18		section 334-60.2, the court shall issue an order of
19		discharge from the commitment; and
20	(6)	If the family court finds that the patient does meet
21		the criteria for involuntary hospitalization in

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1	section 334-60.2, the court shall issue an order
2	denying discharge from the commitment].
3	(b) For civil commitments that do not result directly from
4	legal proceedings under [chapters] <u>chapter</u> 704 [and] <u>or</u> 706,
5	when the administrator, the administrator's deputy, or the
6	attending physician of a psychiatric facility contemplates
7	discharge of an involuntary patient, the administrator, the
8	administrator's deputy, or the attending physician [may] shall
9	assess whether an assisted community treatment plan is indicated
10	pursuant to section 334-123 and, if so indicated, may
11	communicate with an aftercare provider as part of discharge
12	planning, as appropriate."
13	SECTION 11. Section 334-76, Hawaii Revised Statutes, is
14	amended to read as follows:
15	"§334-76 Discharge from custody. (a) Subject to any
16	special requirements of law as provided in sections 704-406,
17	704-411, and 706-607 or elsewhere, with respect to patients
18	committed on court order from a criminal proceeding, the
19	administrator of a psychiatric facility, the administrator's
20	deputy, or the attending physician, pursuant to section
21	334-60.7, shall:


1	(1)	Send a notice of intent to discharge or notice of the
2		patient's admission to voluntary inpatient treatment
3		to those persons specified in the order of commitment
4		as entitled to receive notice of intent to discharge,
5		by mail at their last known address; and
6	(2)	[Send] In cases where the commitment directly resulted
7		from legal proceedings under chapter 704 or 706, send
8		a notice of intent to discharge or notice of the
9		patient's admission to voluntary inpatient treatment
10		to the prosecuting attorney of the county from which
11		the person was originally committed, by facsimile or
12		electronically.
13	(b)	The administrator [or], the <u>administrator's</u> deputy, or
14	the physic	cian assuming medical responsibility for the patient
15	shall dis	charge an involuntary patient when the patient is no
16	longer a j	proper subject for commitment, as determined by the

17 criteria for involuntary hospitalization in section 334-60.2.

18 (c) Nothing in this section shall preclude a <u>psychiatric</u>
19 facility from accepting for voluntary inpatient treatment, in
20 accordance with the procedures in section 334-60.1, a patient
21 for whom the facility contemplates discharge pursuant to section

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1	334-60.7	and who voluntarily agrees to further hospitalization
2	after the	e period of commitment has expired or where the patient
3	is no lor	nger a proper subject for commitment."
4	SECI	TION 12. Section 334-121, Hawaii Revised Statutes, is
5	amended t	o read as follows:
6	"§33	4-121 Criteria for assisted community treatment. [A
7	person] A	an individual may be ordered to obtain assisted
8	community	r treatment if the family court finds, based on the
9	professio	nal opinion of a [psychiatrist or advanced practice
10	registere	d nurse with prescriptive authority and who holds an
11	accredite	d national certification in an advanced practice
12	registere	d-nurse-psychiatric specialization,] gualified
13	psychiatr	ic examiner, that:
14	(1)	The [person] <u>individual</u> is mentally ill or suffering
15		from substance abuse;
16	(2)	The [person] <u>individual</u> is unlikely to live safely in
17		the community without available supervision, is now in
18		need of treatment in order to prevent a relapse or
19		deterioration that would predictably result in the
20		[person] individual becoming imminently dangerous to
21		self or others, and the [person's] <u>individual's</u>



1		current mental status or the nature of the [person's]
2		<u>individual's</u> disorder limits or negates the [person's]
3		individual's ability to make an informed decision to
4		voluntarily seek or comply with recommended treatment;
5	(3)	The [person] individual has a:
6		(A) Mental illness that has caused that [person]
7		individual to refuse needed and appropriate
8		mental health services in the community; or
9		(B) History of lack of adherence to treatment for
10		mental illness or substance abuse that resulted
11		in the [person] individual becoming dangerous to
12		self or others and that now would predictably
13		result in the [person] individual becoming
14		imminently dangerous to self or others; and
15	(4)	Considering less intrusive alternatives, assisted
16	(- <i>)</i>	community treatment is essential to prevent the danger
17		posed by the [person,] individual, is medically
18		appropriate, and is in the [person's] individual's
10		medical interests."
	SECT.	
20 21		ION 13. Section 334-121.5, Hawaii Revised Statutes, is
21	amended to	o read as follows:

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1	"\$334-121.5 Examination for assisted community treatment
2	indication. A [licensed psychiatrist or advanced practice
3	registered nurse with prescriptive authority and who holds an
4	accredited national certification in an advanced practice
5	registered nurse psychiatric specialization] qualified
6	psychiatric examiner associated with the [licensed] psychiatric
7	facility where a [person] patient is located who was committed
8	to involuntary hospitalization, delivered for emergency
9	examination or emergency hospitalization, or voluntarily
10	admitted to inpatient treatment at a psychiatric facility
11	pursuant to part IV shall, before the [person's] <u>patient's</u>
12	discharge, examine the [person] patient to determine whether an
13	assisted community treatment plan is indicated pursuant to this
14	part. If a plan is indicated, the [psychiatrist or advanced
15	practice registered nurse] qualified psychiatric examiner shall
16	prepare the certificate specified by section 334-123. The
17	department of the attorney general shall assist with the
18	preparation and filing of any petition brought pursuant to
19	section 334-123 and with the presentation of the case at any
20	related court proceedings; provided that, if the petitioner is a
21	private provider or other private individual, the petitioner may

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1	decline the assistance. The psychiatric facility may notify
2	another mental health program for assistance with the
3	coordination of care in the community for the person. Nothing
4	in this section shall delay the appropriate discharge of a
5	[person] patient from the psychiatric facility after the
6	examination for assisted community treatment indication has been
7	completed."
8	SECTION 14. Section 334-122, Hawaii Revised Statutes, is
9	amended as follows:
10	1. By adding two new definitions to be appropriately
11	inserted and to read:
12	""Assisted community treatment provider" means a mental
13	health provider, which may include a qualified psychiatric
14	examiner or a mental health program, that is or will be
15	responsible, in accordance with an assisted community treatment
16	order, for the coordination, management, or administration of a
17	subject of the order's treatment.
18	"Mental health program" means a hospital, psychiatric
19	facility, clinic, or other facility providing mental health
20	treatment to individuals suffering from mental illness or
21	substance abuse."

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2. By amending the definition of "assisted community
 treatment" to read:

""Assisted community treatment" includes medication 3 4 specifically authorized by court order; individual or group therapy; day or partial day programming activities; services and 5 6 training, including educational and vocational activities; 7 supervision of living arrangements; and any other services 8 prescribed to either alleviate the [person's] subject of the 9 order's disorder or disability, maintain or maximize 10 semi-independent functioning, or prevent further deterioration that may reasonably be predicted to result in the need for 11 12 hospitalization or more intensive or restrictive levels of care 13 in the community or incarceration for criminal behavior."

14 3. By amending the definitions of "subject of the order"15 and "subject of the petition" to read:

16 ""Subject of the order" means [a person] an individual who 17 has been ordered by the court to obtain assisted community 18 treatment.

19 "Subject of the petition" means the [person] individual
20 who, under a petition filed under section 334-123, is alleged to
21 meet the criteria for assisted community treatment."

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1	 By deleting the definition of "advanced practice
2	registered nurse".
3	[""Advanced practice registered nurse" means a registered
4	nurse licensed to practice in this State who:
5	(1) Has met the qualifications set forth in chapter 457
6	and this part;
7	(2) Because of advanced education and specialized clinical
8	training, is authorized to assess, screen, diagnose,
9	order, utilize, or perform medical, therapeutic,
10	preventive, or corrective measures;
11	(3) Holds an accredited national certification in an
12	advanced practice registered nurse psychiatric
13	specialization; and
14	(4) Holds prescriptive authority pursuant to section 457-
15	8.6. "]
16	5. By deleting the definition of "treating psychiatrist".
17	[" "Treating-psychiatrist"-means the psychiatrist who-is
18	responsible for the management and supervision of a person's
19	treatment-under order of the court."]
20	SECTION 15. Section 334-123, Hawaii Revised Statutes, is
21	amended by amending subsections (c) and (d) to read as follows:

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1	"(c) The petition may be accompanied by a certificate of a
2	[licensed-psychiatrist-or-advanced-practice-registered-nurse
3	with prescriptive authority and who holds an accredited national
4	certification-in an advanced practice registered nurse
5	psychiatric specialization] qualified psychiatric examiner who
6	has examined the subject of the petition <u>in person</u> within twenty
7	calendar days before the filing of the petition. For purposes
8	of the petition, an examination shall be considered valid so
9	long as the [licensed psychiatrist or advanced practice
10	registered nurse with prescriptive authority and who holds an
11	accredited national certification in an advanced practice
12	registered nurse psychiatric specialization] qualified
13	psychiatric examiner has obtained enough information from the
14	subject of the petition and has had face-to-face contact to
15	reach a diagnosis of the subject of the petition, and to express
16	a professional opinion concerning the same, even if the subject
17	of the petition is not fully cooperative. If the petitioner
18	believes that further [evaluation] <u>examination</u> is necessary
19	before treatment, the petitioner may request further
20	[evaluation.] examination.

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1	(d) The petition shall include the name of a proposed
2	assisted community treatment provider and the name, address, and
3	telephone number of at least one of the following persons in the
4	following order of priority: the subject of the petition's
5	spouse or reciprocal beneficiary, legal parents, adult children,
6	[and] surrogate, or legal guardian[, if one has been appointed].
7	If the subject of the petition has no living spouse or
8	reciprocal beneficiary, legal parent, adult [children,] <u>child,</u>
9 .	surrogate, or legal guardian, or if none can be found, the
10	petition shall include the name, address, and telephone number
11	of at least one of the subject's closest adult relatives, if any
12	can be found."
13	SECTION 16. Section 334-124, Hawaii Revised Statutes, is
14	amended to read as follows:
15	"§334-124 Hearing date. The family court shall set a
16	hearing date on a petition, and any subsequent hearing dates for
17	the petition, as soon as possible[\pm] but no later than ten days
18	after the filing of the petition. A hearing on the petition may
19	be continued pending further examination of the subject of the
20	petition, for the appointment of a guardian ad litem, or for
21	good cause."

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1	SECT	ION 17. Section 334-125, Hawaii Revised Statutes, is
2	amended a	s follows:
3	1.	By amending subsection (a) to read:
4	"(a)	Notice of the hearing <u>under this part</u> shall be:
5	(1)	Served personally on the subject of the petition
6		pursuant to family court rules;
7	(2)	Served personally or by certified or registered mail,
8		return receipt requested, deliverable to the addressee
9		only, to as many as are known to the petitioner of the
10		subject's spouse or reciprocal beneficiary, legal
11		[parents,] parent, adult [children,] <u>child, surrogate,</u>
12		and legal guardian[, if one has been appointed]. If
13		the subject of the petition has no living spouse or
14		reciprocal beneficiary, legal parent, adult
15		[children,] child, surrogate, or legal guardian, or if
16		none can be found, notice of the hearing shall be
17		served on at least one of the subject's closest adult
18		relatives, if any can be found;
19	(3)	Served on the guardian ad litem appointed for the
20		subject of the petition [or the subject's existing



1		guardian, if the court determines the existence of
2		one;] as provided in section 334-123.5;
3	(4)	Served on the attorney for the subject of the
4		petition, if applicable; [and]
5	(5)	Served on the assisted community treatment provider
6		proposed in the petition, unless the petitioner is
7		also the proposed assisted community treatment
8		provider; and
9	[(5)]	(6) Given to other persons as the court may
10		designate."
11	2.	By amending subsection (c) to read:
12	"(C)	Notice [of all subsequent hearings shall be served in
13	accordance	e-with subsections (a) and (b), and in accordance with
14	all appli d	cable family court rules relating to service of notice,
15	including	that service need not be made on parties in default
16	for-failu :	re to appear.] to the subject of the petition's spouse
17	or recipro	ocal beneficiary, legal parent, adult child, or closest
18	adult rela	ative may be waived if the subject is an adult and
19	requests 1	that these persons not be notified."
20	SECT	ION 18. Section 334-126, Hawaii Revised Statutes, is
21	amended by	y amending subsection (g) to read as follows:



1	"(g) No subject of the petition shall be ordered to
2	receive assisted community treatment unless at least one
3	[psychiatrist or advanced practice registered nurse with
4	prescriptive authority and who holds an accredited national
5	certification in an advanced practice registered nurse
6	psychiatric specialization testifies in person at the hearing]
7	qualified psychiatric examiner who has personally [assessed]
8	<u>examined</u> the subject $[\tau]$ within a reasonable time before the
9	filing of the petition [up to the time when the psychiatrist or
10	advanced-practice-registered nurse-with-prescriptive authority
11	and who holds an accredited national certification in an
12	advanced practice registered nurse psychiatric specialization]
13	provides oral testimony at [court.] <u>the hearing.</u> The [testimony
14	of the psychiatrist or advanced practice registered nurse with
15	prescriptive authority and who holds an accredited national
16	certification in an advanced practice registered nurse
17	psychiatric specialization] qualified psychiatric examiner shall
18	[state] <u>provide</u> the facts [which] <u>that</u> support the allegation
19	that the subject meets all the criteria for assisted community
20	treatment, provide a written treatment plan, which shall include
21	non-mental health treatment if appropriate, provide the

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

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provided to those persons entitled to notice pursuant to section
 334-125.

If, after hearing all relevant evidence, including the 3 (b) results of any diagnostic examination ordered by the family 4 5 court, the family court finds that the criteria for assisted community treatment under section 334-121(1) have been met 6 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 12 section 334-126(g) shall be attached to the order and made a 13 part of the 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



psychiatric specialization.] assisted community treatment 1 2 provider. The court order shall [also] state who should receive 3 4 notice of intent to discharge early in the event that the 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 (c) 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

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1	to, in turn, designate the treating psychiatrist or advanced
2	practice registered nurse with prescriptive authority and who
3	holds an accredited national certification in an advanced
4	practice registered-nurse psychiatric specialization during the
5	treatment-period without court approval, and may designate
6	either a publicly employed psychiatrist or advanced practice
7	registered nurse with prescriptive authority and who holds an
8	accredited national certification in an advanced practice
9	registered nurse psychiatric specialization, or a private
10	psychiatrist or advanced practice registered nurse with
11	prescriptive authority and who holds an accredited national
12	certification in an advanced practice registered nurse
13	psychiatric specialization; provided that the private
14	psychiatrist or advanced practice registered nurse with
15	prescriptive authority and who holds an accredited national
16	certification in an advanced practice registered nurse
17	psychiatric specialization shall agree to the designation. The
18	order for assisted community treatment shall be subject to the
19	Health Care Privacy Harmonization Act, chapter 323B.] assisted
20	community treatment provider.

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(d) Nothing in this section shall preclude the subject's 1 stipulation to the continuance [+]of[+] an existing court 2 3 order." 4 SECTION 20. Section 334-129, Hawaii Revised Statutes, is amended to read as follows: 5 "§334-129 Failure to comply with assisted community 6 treatment. (a) A [treating psychiatrist or advanced practice 7 registered nurse with prescriptive authority and who holds an 8 9 accredited national certification in an advanced practice registered nurse psychiatric specialization] qualified 10 psychiatric examiner may prescribe or administer to the subject 11 12 of the order reasonable and appropriate medication or medications, if specifically authorized by [the] a court order, 13 14 and treatment that is consistent with accepted medical standards 15 and the [family] court order, including the written treatment 16 plan submitted pursuant to section 334-126(g)[-], in accordance with the procedures described in subsection (b). 17 18 (b) [No subject of the order shall be physically forced to 19 take medication under a family court order for assisted 20 community treatment unless the subject is within an emergency 21 department or admitted to a hospital, subsequent to the date of

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1	the current assisted community treatment order.] A qualified
2	psychiatric examiner may administer medication or medications
3	specifically authorized by a court order to a subject of the
4	order over objection of the subject during emergency examination
5	or hospitalization under part IV, subpart A or while committed
6	for involuntary hospitalization under part IV, subpart C.
7	(c) A subject <u>of the order</u> may be transported to [a
8	designated mental health program, or a hospital emergency
9	department,] a psychiatric facility or other facility designated
10	by the director for failure to comply with an order for assisted
11	community treatment via the following methods:
12	(1) By an interested party with the consent of the subject
13	of the order; or
14	(2) In accordance with section $[334-59.]$ 334-E(b).
15	(d) The [designated-mental-health-program's treating
16	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 or designee of the psychiatrist or
20	advanced practice registered nurse with prescriptive authority
21	and who holds an accredited national certification in an



1	advanced practice registered nurse psychiatric specialization]				
2	assisted community treatment provider shall make [all]				
3	reasonable efforts to solicit the subject's compliance with the				
4	prescribed treatment. If the subject fails or refuses to comply				
5	after the efforts to solicit compliance, the [treating				
6	psychiatrist or advanced practice registered nurse with				
7	prescriptive authority and who holds an accredited national				
8	certification in advanced practice registered nurse				
9	psychiatric specialization] assisted community treatment				
10	provider shall [assess whether the subject of the order meets				
11	criteria for involuntary-hospitalization under part IV of this				
12	chapter, and] proceed [with the admission pursuant to section				
13	[334-59(a)(2) or (3);] pursuant to section 334-D or 334-E;				
14	provided that the refusal of treatment shall not, by itself,				
15	constitute a basis for involuntary hospitalization.				
16	(e) Notice of any transport or [admission] hospitalization				
17	under this section shall be provided pursuant to				
18	section [334-59.5.] <u>334-H.</u> "				
19	SECTION 21. Section 334-130, Hawaii Revised Statutes, is				
20	amended to read as follows:				

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

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order because of the imminent expiration of the court order or 1 2 because the subject of the order is no longer a proper subject for assisted community treatment, as determined by the criteria 3 4 in section 334-121, the [treating psychiatrist or advanced 5 practice registered nurse with prescriptive authority and who 6 holds an accredited national certification in an advanced 7 practice registered nurse psychiatric specialization] assisted 8 community treatment provider shall provide notice of intent to 9 discharge." 10 SECTION 23. Section 334-161, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows: 11 12 "(a) A patient who has been committed to a psychiatric 13 facility for involuntary hospitalization or who is in the 14 custody of the director and residing in a psychiatric facility 15 may be ordered to receive treatment over the patient's 16 objection, including the taking or application of medication, if 17 the court, or administrative [panel] decision-maker through the 18 administrative authorization process established pursuant to section 334-162, finds that: 19 20 (1) The patient suffers from a physical or mental disease,

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disorder, or defect;

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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 by the
5	patient."	
6	SECT	ION 24. Section 334-162, Hawaii Revised Statutes, is
7	am ended 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	safeguard	s:
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 shall be a psychiatrist
18		with relevant clinical training and experience, and
19		who $[are]$ is not involved with the current treatment
20		of the patient[+], shall, after considering all

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1		relevant evidence, determine whether the criteria		
2		under section 334-161 are met;		
3	(3)	The patient shall have the right to attend the		
4		hearing, receive assistance from an advisor, cross		
5		examine witnesses, and present testimony, exhibits,		
6		and witnesses; and		
7	(4)	The patient shall have the right to appeal the		
8		decision of the administrative [panel.]		
9		decision-maker."		
10	SECT	ION 25. Section 334E-2, Hawaii Revised Statutes, is		
11	amended b	y amending subsection (a) to read as follows:		
12	"(a) Any patient in a psychiatric facility shall be			
13	afforded rights, and any psychiatric facility shall provide the			
14	rights to all patients; provided that when a patient is not able			
15	to exerci	se the patient's rights, the patient's legal guardian		
16	or legal	representative shall have the authority to exercise the		
17	same on b	ehalf of the patient. The rights shall include but not		
18	be limite	d to the following:		
19	(1)	Access to written rules and regulations with which the		
20		patient is expected to comply;		

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1	(2)	Access to the facility's grievance procedure or to the
2		department of health as provided in section 334-3;
3	(3)	Freedom from reprisal;
4	(4)	Privacy, respect, and personal dignity;
5	(5)	A humane environment;
6	(6)	Freedom from discriminatory treatment based on race,
7		color, creed, national origin, age, and sex;
8	(7)	A written treatment plan based on the individual
9		patient;
10	(8)	Participation in the planning of the patient's
11		treatment plan;
12	(9)	Refusal of treatment except in emergency situations or
13		when a court order or an administrative order pursuant
14		to chapter 334, part <u>VIII or</u> X, has been issued;
15	(10)	Refusal to participate in experimentation;
16	(11)	The choice of physician if the physician chosen
17		agrees;
18	(12)	A qualified, competent staff;
19	(13)	A medical examination before initiation of
20		non-emergency treatment;
21	(14)	Confidentiality of the patient's records;

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1	(15)	Access to the patient's records;
2	(16)	Knowledge of rights withheld or removed by a court or
3		by law;
4	(17)	Physical exercise and recreation;
5	(18)	Adequate diet;
6	(19)	Knowledge of the names and titles of staff members
7		with whom the patient has frequent contact;
8	(20)	The right to work at the facility and fair
9		compensation for work done; provided that work is
10		available and is part of the patient's treatment plan;
11	(21)	Visitation rights, unless the patient poses a danger
12		to self or others; provided that where visitation is
13		prohibited, the legal guardian or legal representative
14		shall be allowed to visit the patient upon request;
15	(22)	Uncensored communication;
16	(23)	Notice of and reasons for an impending transfer;
17	(24)	Freedom from seclusion or restraint, except:
18		(A) When necessary to prevent injury to self or
19		others;
20		(B) When part of the treatment plan; or



1		(C)	When necessary to preserve the rights of other
2			patients or staff;
3	(25)	Disc	losure to a court, at an involuntary civil
4		comm	itment hearing, of all treatment procedures
5		[whi	ch] <u>that</u> have been administered [prior to] <u>before</u>
6		the	hearing; and
7	(26)	Rece	ipt by the patient and the patient's guardian or
8		lega	l guardian, if the patient has one, of this
9		enun	ciation of rights at the time of admission."
10	SECT	ION 2	6. Section 586-5.5, Hawaii Revised Statutes, is
11	amended by	y ame:	nding subsection (a) to read as follows:
12	"(a)	If,	after hearing all relevant evidence, the court
13	finds that	t the	respondent has failed to show cause why the order
14	should no	t be	continued and that a protective order is necessary
15	to preven	t dom	estic abuse or a recurrence of abuse, the court
16	may order	that	a protective order be issued for a further fixed
17	reasonable	e per	iod as the court deems appropriate, including, in
18	the case w	where	a protective order restrains any party from
19	contacting	g, th:	reatening, or physically abusing a minor, a fixed
20	reasonable	e per:	iod extending to a date after the minor has
21	reached e:	ightee	en years of age.



1	The protective order may include all orders stated in the		
2	temporary restraining order and may provide for further relief		
3	as the court deems necessary to prevent domestic abuse or a		
4	recurrence of abuse, including orders establishing temporary		
5	visitation and custody with regard to minor children of the		
6	parties and orders to either or both parties to participate in		
7	domestic violence intervention services. If the court finds		
8	that the party meets the requirements under		
9	section [334-59(a)(2),] <u>334-D,</u> the court [further] may <u>further</u>		
10	order that the party be taken to the nearest facility for		
11	emergency examination and treatment."		
12	SECTION 27. Section 334-59, Hawaii Revised Statutes, is		
13	repealed.		
14	[" \$334-59 Emergency examination and hospitalization. (a)		
15	Initiation of proceedings. An emergency admission may be		
16	initiated as follows:		
17	(1) If-a law enforcement officer has reason to believe		
18	that a person is imminently dangerous to self or		
19	others, the officer shall call for assistance from a		
20	mental health emergency worker designated by the		
21	director; provided that if a law enforcement officer		

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1	is unable to reach a mental health emergency worker
2	telephonically or has reason to believe the situation
3	to be unstable to a degree that a delay of greater
4	than two minutes would-result-in-serious harm-to the
5	individual, others, or property, the law enforcement
6	officer may act to gain control of the individual.
7	Once the law enforcement officer has gained control of
8	the individual, the law enforcement officer shall call
9	for assistance from a mental health emergency worker
10	designated by the director; provided that the law
11	enforcement officer shall document why the situation
12	necessitated that the law enforcement officer gain
13	control of the individual. Upon determination by the
14	mental health emergency worker that the person is
15	imminently dangerous to self or others, the person
16	shall be transported by ambulance or other suitable
17	means to a licensed psychiatric facility or other
18	facility designated by-the director for further
19	evaluation and possible emergency hospitalization. If
20	a crisis intervention officer has probable cause to
21	believe-that a person is imminently dangerous to self

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1	or others, the crisis intervention officer shall call
2	a mental health-emergency worker to determine if the
3	person shall be transported by ambulance or other
4	suitable means to a behavioral health crisis center
5	designated by the director as determined by a mental
6	health-emergency worker A-law-enforcement officer
7	may-also take into custody and transport to any
8	facility designated by the director any person
9	threatening or attempting suicide. The law
10	enforcement-officer-shall-make-application for the
11	examination, observation, and diagnosis of the person
12	in custody. The application shall state or shall be
13	accompanied by a statement of the circumstances under
14	which the person was taken into custody and the
15	reasons-therefor, which shall be transmitted with the
16	person-to-a physician, advanced practice registered
17	nurse, or psychologist at the facility.
18	As-used in this paragraph,"crisis intervention
19	officer" has the same meaning as defined in section
20	353C-1;



1	(2)	Upon written or oral application of any licensed
2		physician, advanced practice registered nurse,
3		psychologist, attorney, member of the clergy, health
4		or social service professional, or any state or county
5		employee in the course of employment, a judge may
6		issue an ex parte order orally, but shall reduce the
7		order to writing by the close of the next court day
8		following the application, stating that there is
9		probable cause to believe the person is mentally ill
10		or-suffering from substance-abuse, is imminently
11		dangerous to self or others and in need of care or
12		treatment, or both, giving the findings upon which the
13		conclusion is based. The order shall direct that a
14		law enforcement officer or other suitable individual
15		take the person into custody and deliver the person to
16		a designated mental health program, if subject to an
17		assisted community treatment order issued pursuant to
18		part-VIII, or to the nearest facility designated by
19		the director for emergency examination and treatment,
20		or both. The ex-parte order shall be made a part of
21		the patient's clinical-recordIf the application is



1		oral, the person making the application shall reduce
2		the application to writing and shall submit the same
3		by noon of the next court day to the judge who-issued
4		the oral ex-parte order. The written application
5		shall be executed subject to the penalties of perjury
6		but need not be sworn to before a notary public; or
7	(3)	Any licensed physician, advanced practice registered
8		nurse, physician assistant, or psychologist who has
9		examined a person and has reason to believe the person
10		is:
11		(A) Mentally ill or suffering from substance abuse;
12		(B) Imminently dangerous to self or others; and
13		(C) In need of-care or treatment,
14		may direct transportation, by ambulance or other
15		suitable means, to a licensed psychiatric facility or
16		other facility designated by the director for further
17		evaluation and possible emergency hospitalization. A
18		licensed physician, an advanced practice registered
19		nurse, or a physician assistant may administer
20		treatment as is medically necessary, for the person's

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1	safe transportation. A-licensed psychologist may
2	administer-treatment as is psychologically necessary.
3	(b) Emergency examination A patient who is delivered for
4	emergency examination and treatment to a psychiatric facility or
5	a behavioral health crisis center shall be provided an
6	examination, which shall-include a screening to determine
7	whether the criteria for involuntary hospitalization listed in
8	section 334-60.2 persists, by a licensed physician, medical
9	resident under the supervision of a licensed physician, or
10	advanced-practice-registered-nurse-without-unnecessary-delay,
11	and shall be provided such treatment as is indicated by good
12	medical practice. If, after the examination, screening, and
13	treatment, the licensed physician, medical resident under the
14	supervision of a licensed physician, or advanced practice
15	registered nurse determines that the involuntary hospitalization
16	criteria persist, then a psychiatrist or advanced practice
17	registered nurse who has prescriptive authority and who holds an
18	accredited national certification in an advanced practice
19	registered nurse psychiatric specialization shall further
20	examine the patient to diagnose the presence or absence of a
21	mental-illness or substance-use disorder, further-assess-the

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

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1	who performs the emergency examination has reason to believe
2	that the patient is:
3	(1) Mentally ill or suffering from substance abuse;
4	(2) Imminently-dangerous-to-self-or-others; and
5	(3) In need of care or treatment, or both,
6	the psychiatrist or advanced practice registered nurse with
7	prescriptive authority and who holds an accredited national
8	certification-in an advanced practice registered nurse
9	psychiatric specialization shall direct that the patient be
10	hospitalized on an emergency basis or cause the patient to be
11	transferred to another psychiatric facility or other facility
12	designated by the director for emergency hospitalization, or
13	both. The-patient shall have the right immediately upon
14	admission to telephone the patient's guardian or a family member
15	including-a reciprocal beneficiary, or an adult-friend and an
16	attorney. If the patient declines to exercise that right, the
17	staff of the facility shall inform the adult patient of the
18	right to-waive notification to the-family, including a
19	reciprocal beneficiary, and shall make reasonable efforts to
20	ensure that the patient's guardian or family, including a
21	reciprocal beneficiary, is notified of the emergency admission



1	but the patient's family, including a reciprocal beneficiary,
2	need not be notified if the patient is an adult and requests
3	that there be no notification. The patient shall be allowed to
4	confer with an attorney in private.
5	(c) Release-from emergency hospitalization. If at any
6	time during the period of emergency hospitalization the treating
7	physician-determines that the patient no longer-meets the
8	criteria for emergency hospitalization and the examination
9	pursuant to section 334-121.5 has been completed, the physician
10	shall expediently discharge the patient. If the patient is
11	under criminal charges, the patient shall be returned to the
12	custody of a law enforcement-officer. In any event, the patient
13	shall be released within forty-eight hours of the patient's
14	admission to a psychiatric facility or other facility designated
15	by the director, unless the patient voluntarily agrees to
16	further hospitalization, or a proceeding for court-ordered
17	evaluation or hospitalization, or both, is initiated as provided
18	in section 334-60.3. If that time expires on a Saturday,
19	Sunday, or holiday, the time for initiation is extended to the
20	close of the next court day. Upon initiation of the

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1	proceeding	gs, the facility shall be authorized to detain the
2	patient u	ntil further order-of the court."]
3	SECT	ION 28. Section 334-59.5, Hawaii Revised Statutes, is
4	repealed.	
5	[" {\$ 3	334-59.5 Notice of emergency transportation,
6	examinati	ons, and hospitalizations. Notice of an-individual's
7	emergency-	admission, examination, and hospitalization under this
8	chapter ma	ay be given to at least one of the following persons in
9	the follow	ing order of priority: the individual's spouse or
10	reciprocal	beneficiary, legal parents, adult children, legal
11	guardian,	if one has been appointed, or if none can be found,
12	the closes	st adult relative, as long as the individual:
13	(1)	Has capacity to-make health care decisions and agrees;
14	(2)	Is given the opportunity to object and does not
15		object, or the health care provider can reasonably
16		infer from the circumstances based on the exercise of
17		professional judgment that the individual does not
18		object; or
19	(3)	Is incapacitated or an emergency circumstance exists
20		and the health care provider determines based on the



1	exercise of professional judgment that doing so is in
2	the best-interest of the individual."]
3	SECTION 29. This Act does not affect rights and duties
4	that matured, penalties that were incurred, and proceedings that
5	were begun before its effective date.
6	SECTION 30. If any provision of this Act or the
7	application thereof to any person or circumstance is held
8	invalid, the invalidity does not affect other provisions or
9	applications of the Act that can be given effect without the
10	invalid provision or application, and to this end the provisions
11	of this Act are severable.
12	SECTION 31. In codifying the new sections added by
13	sections 2, 3, and 4 of this Act, the revisor of statutes shall
14	substitute appropriate section numbers for the letters used in
15	designating the new sections in this Act.
16	SECTION 32. Statutory material to be repealed is bracketed
17	and stricken. New statutory material is underscored.
18	SECTION 33. This Act shall take effect upon its approval.

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APPROVED this 25th day of June , 2025

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GOVERNOR OF THE STATE OF HAWAI'I

S.B. No. 1322, S.D. 2, H.D. 2, C.D. 1

THE SENATE OF THE STATE OF HAWAI'I

Date: April 30, 2025 Honolulu, Hawai'i 96813

We hereby certify that the foregoing Bill this day passed Final Reading in the Senate

of the Thirty-Third Legislature of the State of Hawai'i, Regular Session of 2025.

President of the Senate

amother

Clerk of the Senate

THE HOUSE OF REPRESENTATIVES OF THE STATE OF HAWAII

Date: April 30, 2025 Honolulu, Hawaii

We hereby certify that the above-referenced Bill on this day passed Final Reading in the

House of Representatives of the Thirty-Third Legislature of the State of Hawaii, Regular Session

of 2025.

Madri K. Mahn

Nadine K. Nakamura Speaker House of Representatives

Mi L. Ilte

Brian L. Takeshita Chief Clerk House of Representatives