



HB1831 HD1
RELATING TO CRISIS INTERVENTION
House Committee on Consumer Protection & Commerce

February 14, 2024

2:00 PM

House Conference Room 329

The Office of Hawaiian Affairs (OHA) **SUPPORTS** HB1831 HD1, which would establish a behavioral health crisis center pilot program within the Department of Health to provide crisis intervention services at two locations; one on the island of O‘ahu and one on a neighbor island. **This crucial legislation addresses the pressing issue of individuals experiencing mental health or substance use disorder crises and their involvement with the criminal justice system.**

OHA believes that Native Hawaiians deserve access to mental health and substance use disorder crisis interventions that are culturally sensitive and community-oriented. The pilot program's emphasis on collaboration with law enforcement agencies, courts, mental health providers, and community stakeholders offers a holistic approach needed to address the root causes of these crises.

OHA has long worked to address the social determinants of health outcomes. We have worked diligently alongside our Hawaiian communities to pursue policies and investments that reverse the negative indicators that occur when social determinants of health for Hawaiians are not addressed. Native Hawaiians are the largest population of incarcerated individuals in the state.¹ Native Hawaiians are three times less likely to receive treatment regarding mental health services.² Native Hawaiians are more likely to experience substance abuse, being one of the highest users of illicit substances.³ Native Hawaiians have the highest rate of homeless services use.⁴ Native Hawaiians are overrepresented among the homeless in Hawai‘i.⁵ This pilot program holds promise to begin to address some of these unacceptable realities for Hawaiians.

¹ *Mental and behavioral health - Native Hawaiians/pacific islanders*. Office of Minority Health. (2019). <https://www.minorityhealth.hhs.gov/mental-and-behavioral-health-native-hawaiianspacific-islanders>

² *Id.*

³ Daniels, Sheri-Ann P et al. "Conceptualizing a New System of Care in Hawai‘i for Native Hawaiians and Substance Use." *Hawai‘i journal of health & social welfare* vol. 81,12 Suppl 3 (2022): 43-51.

⁴ *Id.*

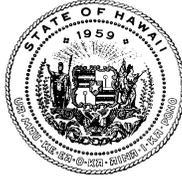
⁵ Partners In Care, *2022 Point In Time Count*, p.7.



HB1831 HD1
RELATING TO CRISIS INTERVENTION
House Committee on Consumer Protection & Commerce

The unique challenges faced by the people of Hawai'i, particularly those suffering from mental health issues, substance use disorders, or homelessness, require a compassionate and effective approach. The proposed crisis centers will hopefully show the promise of providing vital resources to redirect individuals to appropriate healthcare services, breaking the cycle of repeated arrests and court appearances. We specifically appreciate the provision ensuring services be provided regardless of the client's ability to pay as it is essential in fostering inclusivity and ensuring that everyone, regardless of financial status, can access the care they need.

OHA appreciates the opportunity to testify on HB1831 HD1 and urges the committee to **PASS** HB1831. Mahalo nui for the opportunity to testify on this important issue.



STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
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Testimony in SUPPORT of HB1831 HD1
RELATING TO CRISIS INTERVENTION

REPRESENTATIVE MARK M. NAKASHIMA, CHAIR
HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE

Wednesday, February 14, 2024 at 2:00 p.m., Room 329/VIDEO

1 **Fiscal Implications:** The Department of Health (“Department”) requests funding for this
2 measure be considered as a vehicle to expand services, including staff support, provided it does
3 not supplant the requests outlined in the Governor's executive budget request.

4 **Department Position:** The Department submits comments for the Committee’s consideration.

5 **Department Testimony:** The Adult Mental Health Division (AMHD) provides the following
6 testimony on behalf of the Department.

7 The Department supports this measure which proposes the creation of a pilot project
8 which will result in two Behavioral Health Crisis Center (BHCC) in Hawai’i. BHCCs will be
9 tremendous additions to the crisis continuum. They will have benefits to the community
10 including, but not limited to more people in crisis getting help by creating additional rapid
11 access points for care, reduction in law enforcement time dealing with people in crisis,
12 reduction in use of already over-crowded emergency departments, and cost savings for the
13 community in many areas such as reduced criminalization and reduced use of acute care
14 facilities.

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

16 **Offered Amendments:** Paragraph 2(b) should be deleted and be replaced by:

1 The pilot project shall establish two behavioral health crisis centers from which to treat
2 and direct patients pursuant to the pilot program, one to be located in Honolulu and a second
3 one to be on Oahu or on a neighbor island. The department of health shall determine the most
4 appropriate sites for the behavioral health crisis centers. The department of health may lease
5 or acquire property for the establishment of these behavioral health crisis centers.



DISABILITY AND COMMUNICATION ACCESS BOARD

1010 Richards Street, Room 118 • Honolulu, Hawaii 96813
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February 14, 2024

TESTIMONY TO THE HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE

House Bill 1831 HD1 – Relating to Crisis Intervention

The Disability and Communication Access Board (DCAB) supports House Bill 1831 HD1 – Relating to Crisis Intervention.

This bill establishes the behavioral health crisis center pilot program. Authorizes the Department of Health to establish or contract with behavioral health crisis centers in each county.

People with mental health issues often are caught up in the criminal justice system, which is unfair to the individuals and stresses the resources of the criminal justice system. A crisis intervention program that attempts to intervene, divert, and treat these individuals is beneficial in multiple ways.

Thank you for considering our position.

Respectfully submitted,

KIRBY L. SHAW
Executive Director



The Judiciary, State of Hawai'i

Testimony to the Thirty-Second State Legislature, 2024 Regular Session

House Committee on Consumer Protection & Commerce

Representative Mark M. Nakashima, Chair

Representative Jackson D. Sayama, Vice-Chair

Wednesday, February 14, 2024 at 2:00 p.m.

Conference Room 329 and Via Videoconference

by

Rodney A. Maile

Administrative Director of the Courts

WRITTEN TESTIMONY ONLY

Bill No. and Title: House Bill No. 1831, H.D. 1, Relating to Crisis Intervention.

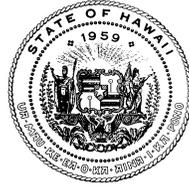
Purpose: Establishes the behavioral health crisis center pilot program. Authorizes the Department of Health to establish or contract with behavioral health crisis centers in each county. Appropriates funds for the pilot program. Effective 7/1/3000. (HD1)

Judiciary's Position:

The Judiciary supports the intent of this measure. The establishment and use of behavioral health crisis centers will improve the government response to individuals suffering from serious mental illness, particularly for those who may become, or already are, involved in the criminal justice system. Access to, and the provision of, mental health care and services is integral to diverting those individuals who, but for their mental health crisis, would not be involved with the criminal justice system. Taken together with other bills designed to address the mental health needs of individuals at other intercept points—such as HB2159, HD1 and HB2451, HD1—these bills will help to close the proverbial revolving door by building a comprehensive government response that addresses each intercept point.

Thank you for the opportunity to testify on this measure.

JOSH B. GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA
MOKU'ĀINA 'O HAWAI'I



KATHERINE AUMER, PhD
COUNCIL CHAIRPERSON
LUNA HO'OMALU O KA PAPA

LATE

STATE OF HAWAI'I
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
STATE COUNCIL ON MENTAL HEALTH
P.O. Box 3378, Room 256
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**WRITTEN
TESTIMONY
ONLY**

**STATE COUNCIL ON MENTAL HEALTH
Testimony to the House Committee on
Consumer Protection and Commerce
SUPPORTING HB 1831 HD1
RELATING TO MENTAL HEALTH**

CHAIRPERSON

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1st VICE CHAIRPERSON

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Ray Rice, MEd

Mary Pat Waterhouse

Kristin Will, MAEL, CSAC

Fern Yoshida

IMMEDIATE PAST

CHAIRPERSON:

Richard I. Ries PsyD, MSEd

EX-OFFICIO:

Marian Tsuji, Deputy Director

Behavioral Health Administration

WEBSITE:

scmh.hawaii.gov

EMAIL ADDRESS:

doh.scmhchairperson@
doh.hawaii.gov

February 14, 2024 at 2:00 p.m. in Rm 329 and via video

Chair Nakashima, Vice-Chair Sayama, and Members of the Committee:

Hawaii law, HRS §334-10, established the State Council on Mental Health (SCMH) as a 21-member body to advise on the allocation of resources, statewide needs, and programs affecting more than one county as well as to advocate for adults with serious mental illness, children with serious emotional disturbances, individuals with mental illness or emotional problems, including those with co-occurring substance abuse disorders. Members are residents from diverse backgrounds representing mental health service providers and recipients, students and youth, parents, and family members. Members include representatives of state agencies on mental health, criminal justice, housing, Medicaid, social services, vocational rehabilitation, and education. Members include representatives from the Hawaii advisory commission on drug abuse and controlled substances and county service area boards on mental health and substance abuse.

The State Council on Mental Health strongly supports the intent of HB1831 HD1. A significant gap in the continuum of care will be addressed by establishing behavioral health crisis centers. Hawaii is picking up lessons from the Arizona model in setting this up. In supporting this measure, the Council is looking for a continuum of care that can honestly respond to the treatment and recovery of those who are suffering from mental illness. It looks forward to a reduction in the emergency room cost burden and further de-stigmatization of mental illness.

Thank you for the opportunity to testify. Should you have any questions, please contact us at DOH.SCMHChairperson@doh.hawaii.gov.



HB1831 HD1 Crisis Intervention Centers Pilot with DOH

COMMITTEE ON CONSUMER PROTECTION & COMMERCE

Rep. Mark M. Nakashima, Chair

Rep. Jackson D. Sayama, Vice Chair

Wednesday, Feb 14, 2024: 2:00 : Room 329 Videoconference

Hawaii Substance Abuse Coalition supports HB1831 HD1:

ALOHA CHAIRS, VICE CHAIRS, AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization for substance use disorder and co-occurring mental health disorder treatment and prevention agencies and recovery-oriented services.

HSAC agrees that many people who suffer from drugs, alcohol or mental illness are cited or arrested when it would be **better to provide crisis services for stabilization and then refer or help them to start treatment so they can recover from their illness.**

HSAC applauds the amendment to have the DOH contract to start behavioral crisis centers in every county.

Since the efforts of mental health providers working with law enforcement to support a crisis intervention program on Oahu has been successful, a pilot program for a behavioral health **crisis center operated by the Department of Health is a great plan:**

1. To redirect persons with mental health issues or substance abuse issues to a healthcare center system
2. To provide treatment – **hopefully treatment is using evidence-based therapies, which is much more than stabilization, given that stabilization is a good first step to then provide or refer to an evidence-based treatment program.**
3. To acquire or lease one on Oahu and one on a neighbor island.
4. To screen, assess, admit for stabilization and redirect a person to the most appropriate and least restrictive setting available regardless of the person's ability to pay.
5. Meet all the criteria for a crisis drop off center.

Since this idea has strong evidential support across the nation:

- **HSAC recommends this pilot project be extended past December, 2026.**

We appreciate the opportunity to provide testimony.



THE QUEEN'S HEALTH SYSTEM

To: The Honorable Mark M. Nakashima, Chair
The Honorable Jackson D. Sayama, Vice Chair
Members, House Committee on Consumer Protection & Commerce

From: Jace Mikulanec, Director, Government Relations, The Queen's Health System

Date: February 14, 2024

Re: Support for HB1831 HD1: Relating to Crisis Intervention

The Queen's Health System (Queen's) is a nonprofit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, and more than 10,000 affiliated physicians, caregivers, and dedicated medical staff statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to provide testimony in support of HB1831 HD1, relating to crisis intervention. The bill seeks to establish the behavioral health crisis center pilot program and requires the program to cease on December 31, 2026. We applaud the Committee and the House Majority Caucus for taking the bold step toward addressing this critical part of the mental/behavioral health crisis facing our state. This bill would enable and fund the Department's plan for establishing crisis centers on in all counties and thus, help provide a diversion program to stabilize and evaluate those experiencing a mental health crisis. We see this as a critical and important step in helping to alleviate pressure on our hospital's emergency departments and, importantly, directing those suffering from acute mental illness to the appropriate venue for future care (whether that be further stabilization, assisted community treatment, or in-patient long-term treatment).

We look forward to working with the Department and other stakeholders to support these efforts and urge the Legislature to also invest in the broader continuum of care – including growth in the healthcare workforce, expanded access to assisted community treatment programs and facilities, and refining and improving the coordination of care for patients throughout their stabilization and treatment process.

Thank you for the opportunity to testify in support of this measure.

The mission of The Queen's Health System is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.

Opportunity Youth Action Hawai‘i

February 13, 2024

House Committee on Consumer Protection & Commerce

Hearing Time: 2:00 PM

Location: State Capitol Conference Room 329

Re: HB1831 HD1, RELATING TO CRISIS INTERVENTION

Aloha e Chair Nakashima, Vice Chair Sayama, and members of the Committee:

On behalf of the Opportunity Youth Action Hawai‘i hui, we are writing in **strong support** of HB1831 HD1, relating to crisis intervention. This bill establishes the behavioral health crisis center pilot program. This bill also authorizes the Department of Health to establish or contract with behavioral health crisis centers in each county and appropriates funds for the pilot program

Establishing behavioral health crisis centers can streamline the care for those with mental health issues and give them the opportunity to avoid harmful bench warrants, which in turn will reduce the burden on the State's resources. By providing a range of mental health services, crisis centers can help individuals recover and maintain their mental health, preventing costly and traumatic experiences.

Opportunity Youth Action Hawai‘i is a collaboration of organizations and individuals committed to reducing the harmful effects of a punitive incarceration system for youth; promoting equity in the justice system; and improving and increasing resources to address adolescent and young adult mental health needs. We seek to improve the continuity of programs and services for youth and young adults transitioning from minor to adult status; eliminate youth homelessness and housing market discrimination against young adults; and promote and fund more holistic and culturally informed approaches among public/private agencies serving youth.

Please support HB1831 HD1.

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TESTIMONY IN SUPPORT OF HB 1831, HD 1

TO: Chair Nakashima, Vice Chair Sayama & CPC Committee Members

FROM: Nikos Leverenz
Grants & Advancement Manager

DATE: February 14, 2024 (2:00 PM)

Hawai'i Health & Harm Reduction Center (HHRC) **strongly supports** HB 1831, HD 1, which establishes a behavioral health crisis center pilot program and authorizes the Department of Health to establish or contract with behavioral health crisis centers in each county.

HHRC is a member of [Partners in Care](#), a planning, coordinating, and advocacy alliance that develops recommendations for programs and services to fill needs for within O'ahu's continuum of care for homeless persons. To the extent that this will provide those experiencing a mental health crisis, including those who are unsheltered, with an alternative to engagement in the criminal legal system this bill will provide a pre-arrest alternative that can more adequately meet their acute and longer term health needs.

Last month, HHRC released a [report on Hawai'i's Sequential Intercept Model](#) to identify and opportunities for for improving diversion away from the criminal legal system and into more appropriate community settings. "Drop off" centers were among the needs identified.

HHRC's mission is to reduce harm, promote health, create wellness, and fight stigma in Hawai'i and the Pacific. We work with many individuals impacted by poverty, housing instability, and other social determinants of health. Many have behavioral health problems, including those related to substance use and mental health conditions, and have also been deeply impacted by trauma related to histories of physical, sexual, and psychological abuse.

Mahalo for the opportunity to provide testimony.

LATE

HB-1831-HD-1

Submitted on: 2/13/2024 7:00:29 PM

Testimony for CPC on 2/14/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Gabrielle Dudoit	Individual	Support	Written Testimony Only

Comments:

My name is Gabrielle Dudoit. I am a Masters in Social Work Student as well as a Homeless Intensive Case Manager who works with our most vulnerable populations. As a concerned citizen and advocate for mental health awareness, I wholeheartedly support HB 1831 HD 1, which establishes the behavioral health crisis center pilot program. This crucial legislation addresses a pressing need within our communities by providing much-needed resources and support for individuals experiencing behavioral health crises. This bill eliminates barriers for individuals which has shown time and time again to be effective in the long term.

One of the most significant challenges in addressing mental health crises is the lack of accessible and appropriate services for those in need. Far too often, individuals facing mental health crises are left without adequate support, leading to unnecessary suffering and even tragic outcomes. The establishment of behavioral health crisis centers in each county, as outlined in HB 1831 HD 1, represents a critical step towards addressing this gap in care.

By authorizing the Department of Health to establish or contract with behavioral health crisis centers, this legislation ensures that individuals in crisis have a dedicated and accessible place to turn to for immediate assistance and intervention. These centers will provide a range of services, including crisis intervention, counseling, referral to appropriate resources, and follow-up support, tailored to meet the unique needs of each individual.

Furthermore, the appropriation of funds for the pilot program demonstrates a commitment to investing in the well-being of our communities and addressing mental health challenges head-on. By allocating resources to support the implementation and operation of behavioral health crisis centers, we can ensure that individuals in crisis receive the timely and effective care they deserve. Moreover, this bill underscores a commitment to investing in mental health care infrastructure. By allocating resources to support the establishment and operation of these centers, policymakers demonstrate recognition of the importance of addressing mental health crises proactively.

The answer is NOT criminalization and incarceration of individuals who are experiencing mental health issues. This bill would help to eliminate the need for these individuals to be involved with the criminal justice system to receive appropriate care.

In conclusion, HB 1831 HD 1 represents a significant step forward in our efforts to improve mental health care and support individuals experiencing behavioral health crises. I urge

lawmakers to support this vital legislation and take decisive action to establish behavioral health crisis centers in our communities. Together, we can make a meaningful difference in the lives of those struggling with mental health challenges and ensure that everyone has access to the care and support they need to thrive.

This legislation is a significant step forward in addressing the critical gaps in mental health crisis intervention services within our communities.

HB-1831-HD-1

Submitted on: 2/14/2024 7:57:05 AM

Testimony for CPC on 2/14/2024 2:00:00 PM



Submitted By	Organization	Testifier Position	Testify
Tiana Klask	Individual	Support	Written Testimony Only

Comments:

As an individual who works directly with those experiencing homelessness, who also live with severe and persistent mental illness and/or substance use, I fully support HB1831. This bill would help to work towards solving the underlying issues that these individuals may be living with, and work to filling the gap that our state has when dealing with mental health crises. When individuals experiencing a mental health crises are met with law enforcement, and are entered in the jail/court system, they begin a harsh and difficult cycle of court dates, bench warrants, and citations. Those with SPMI's and SUD's may not have the capacity to fully comprehend what needs to be done in order to satisfy judicial requirements. By establishing these behavioral health crisis centers, our fellow neighbors and community members may finally get the assistance and support they need, while avoiding the penal system.