JOSH GREEN, M.D.
GOVERNOR



STATE OF HAWAII HAWAII CORRECTIONAL SYSTEM OVERSIGHT COMMISSION

235 S. Beretania Street, 16° Floor HONOLULU, HAWAII 96813 (808) 587-4160 MARK PATTERSON

CHRISTIN M. JOHNSON OVERSIGHT COORDINATOR

COMMISSIONERS
HON. MICHAEL A. TOWN
(ret.)
HON. RONALD IBARRA
(ret.)
TED SAKAI
MARTHA TORNEY

TO: The Honorable Donovan Dela Cruz, Chair

The Honorable Gilbert S.C. Keith-Agaran, Vice Chair

Senate Committee on Judiciary

FROM: Mark Patterson, Chair

Hawaii Correctional System Oversight Commission

SUBJECT: House Bill 1442, Senate Draft 1, Relating to Rehabilitation

Hearing: Thursday, April 6, 2023; 10:00 a.m.

State Capitol, Room 211

Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee:

The Hawaii Correctional System Oversight Commission (the Commission) **strongly supports** House Bill 1442, Senate Draft 1, Relating to Rehabilitation. Specifically, this measure addresses the seriously mentally ill offender who causes considerable disruption in the community resulting in arrest and too often are in and out of jail on minor offenses with little change in their behavior. The criminal justice system does not resolve the underlying cause of their mental illness. Senate Draft 1 is the result of collaboration between Department of the Prosecuting Attorney for the City and County of Honolulu, the Office of the Public Defender, the Department of Health, and the Judiciary to improve the criminal justice diversion program.

Nationally, jails have been overwhelmed by the challenge of the serious mentally ill offenders committed to their care. The following statement is from a recent article in *Corrections Today*, the professional membership publication of the American Correctional Association:

According to a consensus of recently convened corrections experts, a confluence of concerning trends is exacerbating a mental health crisis in correctional environments. These trends are straining already limited institutional resources. In some cases, seriously mentally ill (SMI) incarcerated persons may face longer periods of confinement than others, while they often require more staff attention and cause more disruption. And, importantly, individuals who are SMI may struggle when they return to their communities. In general terms, individuals with SMI may not fit the traditional standard of corrections, a fact that complicates the task of fully addressing their needs. [July/August 2020]

Chapter 353L, Hawaii Revised Statutes, requires that the Commission "[E]establish maximum inmate population limits for each correctional system and formulate policies and procedures to prevent the inmate population from exceeding the capacity of each correctional facility." One of

Testimony of the Hawaii Correctional System Oversight Commission House Bill 1442, Senate Draft 1 April 6, 2023; WAM Page 2

the major factors in the overcrowding in our four Community Correctional Centers (CCC) is the frequent arrest and detention of persons who are unsheltered, or have substance use disorders, or who are mentally impaired, or any combination thereof. In carrying out their duties, law enforcement officers often have no alternative but to arrest, even for low level crimes. In our view, our jails have become the default service for the chronic cases involving this group. This contributes to the ongoing overcrowding at the Oahu CCC, Hawaii CCC, Maui CCC and Kauai CCC. These facilities do not have the physical facilities or staff to provide the services required.

We applaud the efforts of the stakeholders listed. The post-booking jail diversion programs is meant to divert people away from the criminal justice system and, instead, create avenues for care that these individuals desperately need. For these reasons, we support this bill.

Should you have additional questions, Commissioner Martha Torney can be reached at 808-224-7360 or at martha.torney@hawaii.gov. Thank you for the opportunity to testify.



The Judiciary, State of Hawai'i

Testimony to the Thirty-Second State Legislature, 2023 Session

Senate Committee on Ways and Means

Senator Donovan M. Dela Cruz, Chair Senator Gilbert S.C. Keith-Agaran, Vice Chair

Thursday, April 6, 2023, 10:00 a.m. Conference Room 211 & Via Videoconference

by
Brandon Kimura
Deputy Administrative Director of the Courts

WRITTEN TESTIMONY ONLY

Bill No. and Title: House Bill No. 1442, H.D. 2, S.D. 1, Relating to Rehabilitation.

Purpose: Amends the Criminal Justice Diversion Program including allowing examination of defendants via telehealth. Requires the Judiciary, in consultation with other stakeholders, to submit monthly and annual reports to the Legislature on the effectiveness of agreements for post-booking jail diversion programs for district and circuit court in the first circuit. Amends the allowable period of court-ordered assisted community treatment and considerations for extensions. Allows courts to require certain probation violators to undergo mental health evaluation and treatment as a condition of continued probation. Requires the Department of Health to contract with behavioral health crisis centers and to establish a statewide Hawaii Urgency Response Center. Restores funding for probation officer services for the mental health court. Effective 7/1/3023. (SDI)

Judiciary's Position:

The Judiciary strongly supports this measure, which will improve the government response to individuals suffering from mental health challenges, particularly those who may become or have become involved in the criminal justice system.

A multi-pronged approach is necessary to address the many challenges presented by the prevalence of serious mental illness in our community. This measure provides tools that



House Bill No. 1442, H.D. 2, S.D. 1, Relating to Rehabilitation Senate Committee on Ways and Means April 6, 2023 Page 2

strengthen the government's ability to respond to these challenges at different points along the continuum. It provides funding for behavioral health crisis centers where individuals can be taken for stabilization and treatment, rather than arrested, thereby avoiding unnecessary entanglement in the criminal justice system. It enhances the ability to use assisted community treatment to help those in need, facilitates telehealth examinations, and ensures that incompetent defendants charged with nonviolent petty misdemeanors will be screened for involuntary hospitalization or assisted community treatment before their cases are dismissed. It gives stakeholders the opportunity to implement recently-reached agreements on post-booking jail diversion programs, and the legislature the ability to monitor the progress made under the agreements. Finally, it clarifies that convicted defendants who violate probation can be required to undergo mental health treatment and provides funding support for mental health court.

Thank you for the opportunity to testify on this measure.

STATE OF HAWAI'I OFFICE OF THE PUBLIC DEFENDER

Testimony of the Office of the Public Defender, State of Hawai'i to the Senate Committee on Ways and Means

April 6, 2023

H.B. No. 1442 HD2 SD1: RELATING TO REHABILITATION

Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee:

The Office of the Public Defender (OPD) supports H.B. No. 1442 HD2 SD1, which provides a multi-pronged approach to address the many challenges to the criminal justice system presented by the prevalence of serious mental illness in the community. This measure will provide the tools to strengthen the government's ability to respond to these challenges, including the expansion of the criminal justice diversion program.

PART I: Telehealth, Non-Violent Petty Misdemeanor Defendants

Part I of this measure, which requires the establishment of rules and procedures for mental fitness examinations of defendants via telehealth, will make available telehealth resources feasible at state health, correctional, and judicial facilities. Part I will also provide for nonviolent petty misdemeanor defendants, whose fitness to proceed in criminal proceedings remains an outstanding issue, to be automatically screened for involuntary hospitalization or assisted community treatment.

PART II: Post-Booking Jail Diversion

The Judiciary, the Department of Health (DOH), the Department of the Prosecuting Attorney for the City and County of Honolulu, and the OPD recently established a new post-booking jail diversion program for district and circuit court in the first judicial circuit that is based on the Miami-Dade County, Florida model (Miami Model).

Miami-Dade County has implemented a successful and cost-effective post-booking jail diversion program to redirect defendants with serious mental illnesses away from the criminal justice system and into community-based treatment and support services. Since its inception in 2000, the program has expanded to serve defendants

that have been arrested for less serious felonies and other charges, as determined appropriate. Miami-Dade County has seen a significant reduction of homelessness and recidivism in the criminal justice system. Once engaged in treatment and community services, the individuals have achieved successful recovery and community integration.

In February 2023, representatives from the OPD, the Honolulu Prosecutor's Office, DOH, and the Judiciary traveled to Florida and met with the Miami Model stakeholders to determine a path forward for those with serious mental illnesses and co-occurring substance abuse disorders in the criminal justice system. The goal of the trip was to develop a program similar to the Miami Model for the first judicial circuit.

Based on the Miami Model, the OPD and the other Hawai'i stakeholders entered into agreements establishing procedures for post-booking jail diversion programs for district and circuit court in the first judicial circuit. Collectively, the agreements apply to defendants charged with non-violent misdemeanors and promoting a dangerous drug in the third degree, as approved by the prosecution, and other charges the parties agree to on a case-by-case basis. The agreements establish procedures for screening and assessing defendants for serious mental illness, determining whether defendants qualify for involuntary hospitalization, entry of defendants into diversion programs for treatment, dismissal of the charge if the defendant complies with the diversion plan, and regular meetings among stakeholders.

The OPD and the other stakeholders are committed to this post-booking diversion program. We seek to improve the assessment, referral, diversion, and care coordination among individuals with serious mental illness and possible cooccurring substance abuse disorders that are reentering the community from the criminal justice system. Our hope is that this post-booking diversion program will reduce the cycle of arrests and incarceration for people who need behavioral health treatment and community support that will promote recovery and community integration.

PART III: Assisted Community Treatment

The OPD shares the same concerns with the Department of the Attorney General in regard to the amendments to HRS § 334-133, which permit the family court to continue an existing Assisted Community Treatment (ACT) order without considering or making any finding of a previously established factor would leave these orders susceptible to legal challenge. (See HB1442 HD2 Testimony Submitted

to Senate Judiciary Committee and Health and Human Services Committee on March 17, 2023). These amendments to HRS § 334-133, found in SECTION 17 on page 18, lines 16 to 21 and on page 19, lines 4 to 8 of the current bill, contradict the ACT hearing requirements under HRS § 334-127 by allowing the family court to issue a new order without any supportive findings. This could trigger due process concerns as the new ACT order will be heavily dependent on findings that we made one or two years prior. As the Department of Attorney General indicated, any benefits that these amendments would have on expediting the ACT process would not outweigh the risk of a challenge on due process grounds or for conflict with HRS § 334-133. Thus, the OPD urges the Committee follow the Department of the Attorney General's recommendation to remove the amendments to HRS § 334-133.

Thank you for the opportunity to testify on this measure.

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



STATE OF HAWAII DEPARTMENT OF HEALTH KA 'OIHANA OLAKINO

P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of H.B. 1442, H.D. 2, S.D. 1 RELATING TO REHABILITATION

SENATOR DONOVAN M. DELA CRUZ, CHAIR SENATE COMMITTEE ON WAYS AND MEANS

Hearing Date, Time and Room: Thursday, April 6, 2023 at 10:00 a.m. in Room 211/VIDEO

- 1 Fiscal Implications: The Department of Health ("Department") respectfully requests that
- 2 funding for this measure be considered as a vehicle to expand services, including staff support,
- 3 so long as it does not supplant the priorities and requests outlined in the Governor's executive
- 4 budget request.
- 5 **Department Position:** The Department of Health ("Department") supports this measure and
- 6 offers comments.
- 7 **Department Testimony:** The Adult Mental Health Division (AMHD) provides the following
- 8 testimony on behalf of the Department.
- 9 The purpose of this measure is to 1) amend §704, Hawaii Revised Statutes and to
 10 expand the scope of the criminal justice diversion program for nonviolent petty misdemeanants
- whose fitness to proceed in criminal proceedings remains an outstanding issue while also
- establishing a mechanism for diverted defendants to be automatically screened for involuntary
- hospitalization or Assisted Community Treatment (ACT); 2) support the expansion of post-
- 14 booking criminal justice diversion; 3) lengthen the allowable period of court-ordered assisted
- 15 community treatment; 4) require the Department to establish or contract with behavioral
- 16 health crisis centers in each county of the State.

The Department supports diversion programming that provides an opportunity for individuals to link with appropriate treatment supports. We are committed to addressing the needs of individuals experiencing behavioral health challenges who interact with the justice system. For example, we continue to engage in an ongoing collaboration with the Judiciary and other partners to develop effective responses that provide "off-ramps" from the criminal justice pathway into treatment and services to enhance both the individual's recovery and public safety.

The Department supports this measure which enhances the Act 26 (Session Laws of Hawaii 2020) diversion program providing options for outpatient facilities/release on conditions, extending the timeline for reporting requirements, and incorporating ACT procedures. We respectfully defer to the Judiciary on items in this bill that impact judicial proceedings and defer to the Department of the Attorney General for legal matters.

Lastly, we recognize that behavioral health crisis centers are a critical component of the health care continuum that provides an opportunity for diversion from the justice system. The primary goals of a behavioral health crisis center are to provide necessary interventions and supports to support crisis stabilization, reduce the demand on and utilization of hospital emergency departments, and to divert individuals from the criminal justice pathway when appropriate. We support the development of this crisis care capacity in each county through the Department's establishment of, or contracting for, the needed services. The Department believes that a behavioral health crisis center will provide a positive and immediate, albeit temporary, crisis response option for individuals. Site locations and contracted service providers will be identified by the Department.

If expansion of the scope of the criminal justice diversion program is supported by this Committee, the Department estimates that the cost to establish and operate a behavioral health crisis center is \$10 million annually. We also ask for consideration of staff to support expansion efforts directly related to assisting individuals identified under HRS 704-421. We

- 1 estimate needing an appropriation of \$665,000 annually for five FTE court-based clinicians, and
- 2 \$250,000 annually for one FTE coordinator and one FTE specialist with paralegal experience
- 3 who will assist with related data and reporting.
- We appreciate the Senate Judiciary and Senate Health and Human Services Committees
- 5 for their acknowledgement of our appropriation requests as noted in their committee report
- 6 following the March 17, 2023 joint committee hearing.
- 7 Thank you for the opportunity to testify on this measure.
- 8 Offered Amendments: We offer the following amendments that align with our testimony.
- 9 Page 29, SECTION 23 and SECTION 24
- Strike both sections completely.
- 11 Page 30, SECTION 25.
- There is appropriated out of the general revenues of the State of Hawaii the sum of \$
- or so much thereof as may be necessary for fiscal year 2023—2024 and the same sum or so
- much thereof as may be necessary for fiscal year 2024—2025 for:
- (I) Five full-time equivalent (5.0 FTE) court-based clinicians;
- (2) One full-time equivalent (1.0 FTE) coordinator position; and
- (3) One full-time equivalent (1.0 FTE) paralegal specialist position,
- to staff and operate expanded statewide post-booking criminal justice diversion
- 19 programs including services related to HRS704-421. The sums appropriated shall be expended
- 20 by the department of health for the purposes of this part.
- 21 Description (last page), we offer the following proposed change to align bill language with the
- 22 bill description:

- 1 Report Title: Mental Health Treatment Diversion; Probation Violators; Behavioral Health Crisis
- 2 Centers; Appropriations Description: Amends the Criminal Justice Diversion Program including
- 3 (allowing examination of defendants via telehealth. Requires the Judiciary, in consultation with
- 4 other stakeholders, to submit monthly and annual reports to the Legislature on the
- 5 effectiveness of agreements for post—booking jail diversion programs for district and circuit
- 6 court in the first circuit. Amends the allowable period of court—ordered assisted community
- 7 treatment and considerations for extensions. Allows courts to require certain probation
- 8 violators to undergo mental health evaluation and treatment as a condition of continued
- 9 probation. Requires the Department of Health to contract with behavioral health crisis centers
- and to expand statewide post-booking criminal justice diversion programs. Restores funding for
- probation officer services for the mental health court. Effective 7/1/3023. (Proposed SD2)





CITY AND COUNTY OF HONOLUL

ALII PLACE
1060 RICHARDS STREET • HONOLULU, HAWAII 96813
PHONE: (808) 768-7400 • FAX: (808) 768-7515

STEVEN S. ALM PROSECUTING ATTORNEY



THOMAS J. BRADY FIRST DEPUTY PROSECUTING ATTORNEY

THE HONORABLE DONOVAN DELA CRUZ, CHAIR SENATE COMMITTEE ON WAYS AND MEANS

Thirty-Second State Legislature Regular Session of 2023 State of Hawai`i

April 6, 2023

RE: H.B. 1442, H.D. 2, S.D. 1; RELATING TO REHABILITATION.

Chair Dela Cruz, Vice-Chair Keith-Agaran, and members of the Senate Committee on Ways and Means, the Department of the Prosecuting Attorney of the City and County of Honolulu ("Department") submits the **comments** regarding H.B. 1442, H.D. 2, S.D. 1, with **suggested amendments** (attached).

The Department thanks the prior committee, and all of the partnering stakeholders, for working with the Department to address most of our prior concerns with this bill. The current language of H.B. 1442, H.D. 2, S.D. 1, addresses nearly all of our concerns—by strengthening Act 26 (section 704-421, Hawaii Revised Statutes ("HRS"))—without expanding that particular diversion program to misdemeanor or felony offenses. Thus, <u>our only remaining concern with this bill is the proposed amendments to Escape in the second degree ("Escape2") (see p. 10, lns. 9-14).</u>

The Department understands the concern about Act 26 participants—who enter the program only with "non-violent petty misdemeanors" and mental health issues—potentially walking away from community-based facilities (where they could now be held for up to 14-days for mental health assessment, in lieu of being held at Hawaii State Hospital), and potentially being charged thereafter with the class C felony offense of Escape2. That said, the Department respectfully asks that additional conditions be added, before the potential Escape2 charge against Act 26 participants is automatically downgraded to a petty misdemeanor for these individuals:

• Because there is still a possibility that the Act 26 program could be expanded to misdemeanor or felony offenses in the future—and a possibility that everyone involved could forget that Escape2 is also impacted—the Department asks that the downgrade to petty misdemeanor Escape2 only be limited to Act 26 participants who part of the program for a non-violent petty misdemeanor; and

• If the Act 26 participant is arrested for a new felony offense, either in the course of the escape or during the pendency of the escape, then Escape2 will remain a class C felony.

Please see our proposed language, attached below.

In the event the Act 26 participant commits a violent misdemeanor or petty misdemeanor offense in the course of the escape or during the pendency of the escape, those could still be charged separately, and would not qualify for the Act 26 program. Moreover, if the Act 26 participant "intentionally employs physical force, the threat of physical force, or a dangerous instrument against the person of another in escaping...from custody," that would no longer be an Escape2 charge, and could be charged as Escape in the first degree instead.

As often stated, the Department is generally in strong support of any mechanism or strategy that effectively provides mental health treatment and/or substance abuse treatment to those who need it, especially if those individuals have had recurring contacts with the criminal justice system. Part II of H.B. 1442, H.D. 2, S.D. 1, succinctly describes recent efforts by the Department and partnering stakeholders, to develop a post-booking jail diversion pilot project (modeled after a long-standing program in Miami-Dade County, Florida). If successful, this pilot project will help to provide effective treatment for individuals with mental health issues, when these individuals are charged solely with non-violent misdemeanors or Promoting a dangerous drug in the third degree.

As an additional suggestion for this bill, the Department strongly suggests that Hawaii's assisted community treatment program ("A.C.T." see HRS §334-121 through §334-134) be expanded to allow petitions to be filed at any District Court. One of the key components of the "Miami model" mentioned above, is a robust and accessible program that provides community-based mental health treatment to those who need it, somewhat akin to A.C.T. While we understand A.C.T. has been limited to Family Court since at least 1984, the Department believes that Hawaii's need and desire for this program—and need for accessibility to this program—have increased tremendously since 1984. As entry points to mental health treatment in Hawaii continue to grow and expand, we believe it only makes sense to provide increased accessibility for any interested parties who wish to file petitions, so long as the same safeguards and due process protections are maintained.

Thank you for the opportunity to submit our **comments** and **suggested amendments** on this matter.

Proposed amendments to H.B. 1442, H.D. 2, S.D. 1, from the Honolulu Department of the Prosecuting Attorney:

SECTION 5. Section 710-1021, Hawaii Revised Statutes, is amended by amending subsection (2) to read as follows:

- "(2) Escape in the second degree is a class C felony.
- (3) Notwithstanding subsection (2) above, if the offense was committed by a person under the custody of the director of health pursuant to section 704-421(1) for a petty misdemeanor not involving violence or attempted violence, it shall be a petty misdemeanor; provided that if the person is arrested for a new felony offense in the course of the escape or during the pendency of the escape, this subsection shall not apply."

POLICE DEPARTMENT

CITY AND COUNTY OF HONOLULU

801 SOUTH BERETANIA STREET · HONOLULU, HAWAII 96813 TELEPHONE: (808) 529-3111 · INTERNET: www.honolulupd.org

RICK BLANGIARDI MAYOR





OUR REFERENCE MH-SK

April 6, 2023

The Honorable Donovan M. Dela Cruz, Chair and Members
Committee on Ways and Means
State Senate
415 South Beretania Street, Room 211
Honolulu, Hawaii 96813

Dear Chair Dela Cruz and Members:

Subject: House Bill No. 1442, H.D. 2, S.D. 1, Relating to Rehabilitation

I am Manuel Hernandez, Major of the Training Division of the Honolulu Police Department (HPD), City and County of Honolulu.

The HPD supports House Bill No. 1442, H.D. 2, S.D. 1, Relating to Rehabilitation, to expand diversion programs for nonviolent offenders who are found not fit to stand trial due to issues such as mental health or disease.

The HPD recognizes the importance of the proper diagnosis, treatment, and rehabilitation of those undergoing mental health or disease issues and the importance of reducing the recidivism rates of those individuals on release.

The HPD supports, when found applicable by the courts, the diversion of such individuals to treatment programs to include the commitment to the custody of the director of health for detention, assessment, care, and treatment. For the community, of which these individuals are members, this is a much more positive outcome than a release from custody without treatment only to possibly re-offend shortly thereafter.

The Honorable Donovan M. Dela Cruz, Chair and Members Page 2 April 6, 2023

Furthermore, the HPD supports court-mandated conditions of release for individuals subject to treatment programs, furthering the accountability of these individuals in addition to their treatment and rehabilitation.

The HPD urges you to support House Bill No. 1442, H.D. 2, S.D. 1, Relating to Rehabilitation.

Thank you for the opportunity to testify.

Sincerely,

Manuel Hernandez, Major

Training Division

APPROVED:

Chief of Police

<u>HB-1442-SD-1</u> Submitted on: 4/4/2023 6:45:25 PM

Testimony for WAM on 4/6/2023 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Cards Pintor	Individual	Support	Written Testimony Only

Comments:

Aloha,

I support this bill.

Mahalo nui,

Cards Pintor

<u>HB-1442-SD-1</u> Submitted on: 4/5/2023 8:22:51 AM

Testimony for WAM on 4/6/2023 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Simone Kamaunu	Individual	Support	Written Testimony Only

Comments:

I supprt this.





HB1442 HD2 SD1 Diversion and ACT

COMMITTEE ON WAYS AND MEANS Senator Donovan M. Dela Cruz, Chair Senator Gilbert S.C. Keith-Agaran, Vice Chair Thursday Apr 6, 2023, 10:00 Room 211

Hawaii Substance Abuse Coalition Strongly Supports HB1442 HD2 SD1:

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

A comprehensive program that includes diversion to treatment and reentry to community services produces better outcomes and is more cost-effective.

HSAC strongly supports diversion alternatives for people subject to exclusion from charges or for violating their probation due to their mental health disease. It's time for Hawaii to expand our criminal justice diversion programs. The diversions include screening and evaluations for involuntary hospitalization or assisted community treatment. We also need more behavioral health crisis centers so that more diversions can happen in our justice systems.

- Often people who have severe substance use disorders, or who are mentally impaired that are frequently arrested are unsheltered homeless.
- It requires a lot of time of police officers who have to arrest them even if the crimes are misdemeanors. This is how jails become overcrowded because of this population.
- The alternative is a danger to public safety when criminal defendants, who could qualify for commitment due to severe mental health issues, are released back into the community.

Expanding the qualifying offenses will allow more people to be diverted and requiring screening or a mental health evaluation and treatment with enable a faster resolution of their cases and a sooner realized benefit from treatment and support for their mental health. Such treatment can reduce or eliminate their involvement with the criminal justice system.

By focusing on people who are reoccurring in the justice system, HSAC strongly supports diversion strategies to help people receive effective mental health treatment and/or substance abuse treatment. Providing treatment and supports will help people with mental health issues to better access housing, employment and possibly get off the street entirely. This is a clear path to help end homelessness.

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



TESTIMONY IN <u>SUPPORT</u> OF H.B. 1442 HD2 SD1 – RELATING TO REHABILITATION

Senator Donavan M. Dela Cruz, Chair Senator Gilbert S.C Keith-Aragan, Vice Chair Senate Committee on Ways and Means

April 6, 2023, 10 a.m., Conference Room 211

Dear Chair Dela Cruz, Vice Chair Keith-Aragan, and Members of the Committee,

I would like to thank the Committee for the opportunity to testify in <u>SUPPORT</u> of H.B. 1442 HD2 SD1, relating to rehabilitation. The bill addresses the need for telehealth appointments for evaluation and assessment regarding mental illness and fitness of determination to proceed. Second, amends the court-ordered assisted community treatment period and considerations for extensions for substance abuse and mental health services. Additionally, allows the courts to require mental health evaluations for violations of probation permitting mental health evaluation and treatment as a condition of continuity. Finally, creates a partnership contract between behavioral health crisis centers and the Department of Health to operate a statewide Hawai'i urgency response behavioral health crisis centers for individuals experiencing behavioral health crises.

I am currently an MSW, Behavioral Mental Health student at the University of Hawai'i at Mānoa, Myron B. Thompson School of Social Work. The impact of criminalizing mental illness within the criminal justice system in a few ways has resulted in correctional facilities overcrowding, and overburdened with mental health rehabilitation. For some individuals, the goal is not rehabilitation but appropriate care for management. Correctional facilities in many ways have become the "new institutions" for the mentally ill with the task of providing the intensive inpatient psychiatric care inmates need. "Hawai'i incarcerates more individuals with severe mental illness than it hospitalizes" (Treatment Advocacy Center, 2010). The cycle of incarceration and recidivism for individuals with unmet mental health needs begins outside of correctional facilities and persists during and after release. Diversion efforts are a crucial way to support mental health management and rehabilitation.

Since the COVID-19 pandemic, telehealth has only increased access to necessary mental health services. Adequate funding and staffing for mental health programs remain an issue. Telehealth appointments meet both providers' and clients' needs. Reduced rates for recidivism, management, and rehabilitation regarding mental health issues require continuity of care before and after the criminal justice system. Diversion from future engagements means not all mental health crises can be rehabilitated or managed within two years. The petition for an extension of continued assisted community treatment for up to two years after discharge allows the socioeconomic burdens often experienced by individuals with criminal charges incarcerated or on probation, such as unemployment, homelessness, and caught in cycles of violence, continuity of care accessing necessary mental health services while navigating community reintegration. This is a crucial step in maintaining managed and rehabilitated mental health status. Finally, urgency

response behavioral health crisis center lessens often what can be traumatic and unnecessary interactions with the criminal justice system by providing around-the-clock access to behavioral health crisis providers and services. This takes the pressure off of emergency rooms, hospitals, police force, and first responders handling an individual who may need more support than is able to be offered. The appropriated funds to employ full-time psychiatric practitioners, nurses, and licensed clinicians also lessen the burden on community-based mental health centers already experiencing a waitlist.

Accordingly, I <u>SUPPORT</u> H.B. 1442 HD2 SD1. I respectfully urge your Committee to <u>PASS</u> this important bill. Thank you for the opportunity to provide testimony.

Sincerely, Miranda Gallegos