A BILL FOR AN ACT

RELATING TO HEALTH.

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

- 1 SECTION 1. The legislature finds that a comprehensive mental health response crisis system is needed to serve the dual 2 purposes of supporting individuals suffering from a behavioral 3 health crisis and maintaining public safety. The legislature 4 further finds that the mental health crisis response system has 5 multiple steps for mental health crisis intervention, including 6 initial contact by first responders, determining need and basis 7 for involuntary transport for evaluation, and determination for 8 disposition once an individual has been taken into custody 9 pursuant to section 334-59(a), Hawaii Revised Statutes. 10
- health, along with a wide range of stakeholder partners, including the legislature, has been actively evaluating and restructuring the mental health crisis response system through the task force and working group established by Act 90 and Act 263, Session Laws of Hawaii 2019.

The legislature further finds that the department of

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1	The purpose of this Act is to support the efforts of the
2	mental health task force and working group by amending chapter
3	334, Hawaii Revised Statutes, to further define and guide the
4	process that occurs when an individual has been transported to
5	an emergency room or behavioral health crisis center pursuant to
6	section 334-59(a), Hawaii Revised Statutes, order for evaluation
7	and the disposition of the individual once the evaluation has
8	been completed.
9	SECTION 2. Section 334-1, Hawaii Revised Statutes, is
10	amended by adding a new definition to be appropriately inserted
11	and to read as follows:
12	"Behavioral health crisis center" means a facility that is
13	specifically designed and staffed to provide care, diagnosis, or
14	treatment for persons who are experiencing a mental illness or
15	substance use disorder crisis."
16	SECTION 3. Section 334-59, Hawaii Revised Statutes, is
17	amended by amending subsections (b) to (e) to read as follows:
18	"(b) Emergency examination. A patient who is delivered
19	for emergency examination and treatment to a psychiatric
20	facility [designated by the director] or a behavioral health

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crisis center shall be [examined] provided an examination, which 1 shall include a screening to determine whether the criteria for 2 involuntary hospitalization listed in section 334-60.2 persists, 3 by a licensed physician, medical resident under the supervision 4 of a licensed physician, or advanced practice registered nurse 5 without unnecessary delay, and [may] shall be [given] provided 6 such treatment as is indicated by good medical practice. [A]7 If, after the examination, screening, and treatment, the 8 licensed physician, medical resident under the supervision of a 9 10 licensed physician, or advanced practice registered nurse determines that the involuntary hospitalization criteria 11 persist, then a psychiatrist[7] or advanced practice registered 12 nurse[, or psychologist may] who has prescriptive authority and 13 who holds an accredited national certification in an advanced 14 practice registered nurse psychiatric specialization shall 15 further examine the patient to diagnose the presence or absence 16 of a mental illness or substance use disorder, further assess 17 the risk that the patient may be dangerous to self or others, 18 and assess whether or not the patient needs to be hospitalized.

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

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

registered nurse psychiatric specialization who performs the

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- 1 emergency admission but the patient's family, including a
- 2 reciprocal beneficiary, need not be notified if the patient is
- 3 an adult and requests that there be no notification. The
- 4 patient shall be allowed to confer with an attorney in private.
- 5 (e) Release from emergency hospitalization. If at any
- 6 time during the period of emergency hospitalization the
- 7 [responsible] treating physician [concludes] determines that the
- 8 patient no longer meets the criteria for emergency
- 9 hospitalization and the examination pursuant to section
- 10 334-121.5 has been completed, the physician shall expediently
- 11 discharge the patient. If the patient is under criminal
- 12 charges, the patient shall be returned to the custody of a law
- 13 enforcement officer. In any event, the patient [must] shall be
- 14 released within forty-eight hours of the patient's admission $[\tau]$
- 15 to a psychiatric facility, unless the patient voluntarily agrees
- 16 to 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 proceedings, the facility shall be authorized to detain the
- patient until further order of the court."
- 3 SECTION 4. This Act does not affect rights and duties that
- 4 matured, penalties that were incurred, and proceedings that were
- 5 begun before its effective date.
- 6 SECTION 5. Statutory material to be repealed is bracketed
- 7 and stricken. New statutory material is underscored.
- 8 SECTION 6. This Act shall take effect on July 1, 2020.

Report Title:

Emergency Examinations; Emergency Hospitalizations; Behavioral Health Crisis

Description:

Amends criteria for emergency examination, release from emergency examination, emergency hospitalization, and release from emergency hospitalization for individuals suffering from a behavioral health crisis. (SD2)

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