
A BILL FOR AN ACT

RELATING TO THE OFFICE OF WELLNESS AND RESILIENCE.

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

1 PART I

2 SECTION 1. Act 209, Session Laws of Hawaii 2021, is
3 amended by amending section 2 to read as follows:

4 "SECTION 2. (a) There is established within the
5 department of health for administrative purposes a trauma-
6 informed care task force. The task force shall consist of the
7 following members:

- 8 (1) The director of health, or the director's designee,
9 who shall serve as the chairperson of the task force;
- 10 (2) The director of human services, or the director's
11 designee;
- 12 (3) The superintendent of education, or the
13 superintendent's designee;
- 14 (4) The director of public safety or its successor agency,
15 or the director's designee;
- 16 (5) The director of the executive office on early
17 learning, or the director's designee;



- 1 (6) A member of the judiciary, to be appointed by the
2 chief justice of the supreme court;
- 3 (7) A faculty member from the university of Hawaii John A.
4 Burns school of medicine, to be appointed by the dean
5 of the university of Hawaii John A. Burns school of
6 medicine;
- 7 (8) The chief executive officer of Kamehameha Schools, or
8 the chief executive officer's designee, who shall be
9 invited by the chairperson;
- 10 (9) A member of the law enforcement community, who shall
11 be invited by the chairperson;
- 12 (10) A member of the non-profit sector, who shall be
13 invited by the chairperson; and
- 14 (11) A community member or non-profit representative from
15 the Compact of Free Association islander community,
16 who shall be invited by the chairperson.
- 17 (b) The task force shall develop and make recommendations
18 for trauma-informed care in the State. Specifically, the task
19 force shall:



- 1 (1) Create, develop, and adopt a statewide framework for
2 trauma-informed and responsive practice. The
3 framework shall include:
- 4 (A) A clear definition of "trauma-informed and
5 responsive practice";
- 6 (B) Principles of trauma-informed and responsive care
7 that may apply to any school, health care
8 provider, law enforcement agency, community
9 organization, state agency, or other entity that
10 has contact with children or youth;
- 11 (C) Clear examples of how individuals and
12 institutions may implement trauma-informed and
13 responsive practices across different domains,
14 including organizational leadership, workforce
15 development, policy and decision-making, and
16 evaluation;
- 17 (D) Strategies for preventing and addressing
18 secondary traumatic stress for all professionals
19 and providers working with children and youth and
20 their families who have experienced trauma;



- 1 (E) Recommendations to implement trauma-informed care
2 professional development and strategy
3 requirements in county and state contracts; and
4 (F) An implementation and sustainability plan,
5 consisting of an evaluation plan with suggested
6 metrics for assessing ongoing progress of the
7 framework;
- 8 (2) Identify best practices, including those from native
9 Hawaiian cultural practices, with respect to children
10 and youth who have experienced or are at risk of
11 experiencing trauma, and their families;
- 12 (3) Provide a trauma-informed care inventory and
13 assessment of public and private agencies and
14 departments;
- 15 (4) Identify various cultural practices that build
16 wellness and resilience in communities;
- 17 (5) Convene trauma-informed care practitioners so that
18 they may share research and strategies in helping
19 communities build wellness and resilience;
- 20 (6) Seek ways in which federal funding may be used to
21 better coordinate and improve the response to families



1 impacted by coronavirus disease 2019, substance use
2 disorders, domestic violence, poverty, and other forms
3 of trauma, including making recommendations for a
4 government position to interface with federal agencies
5 to seek and leverage federal funding with county and
6 state agencies and philanthropical organizations;
7 [and]

8 (7) Coordinate data collection and funding streams to
9 support the efforts of the [~~interagency~~] task
10 force[-]; and

11 (8) Serve as an advocacy board to the office of wellness
12 and resilience.

13 (c) The task force shall submit a report of its findings
14 and recommendations, including any proposed legislation, to the
15 legislature, no later than twenty days prior to the convening of
16 the regular [~~session~~] sessions of 2024[-] and 2025.

17 (d) The task force shall cease to exist on [~~July 1, 2024.~~]
18 June 30, 2025."

19 PART II



1 SECTION 2. Chapter 346, Hawaii Revised Statutes, is
2 amended by adding a new part to be appropriately designated and
3 to read as follows:

4 "PART . OFFICE OF WELLNESS AND RESILIENCE

5 §346-A Definitions. As used in this part, unless the
6 context otherwise requires:

7 "Board" means the wellness and resilience advocacy board.

8 "Office" means the office of wellness and resilience.

9 §346-B Office of wellness and resilience; established.

10 (a) There is established within the department for
11 administrative purposes only, the office of wellness and
12 resilience.

13 (b) The office shall be headed by an executive director,
14 who shall be appointed by the director without regard to
15 chapter 76, and who shall serve at the pleasure of the director.

16 (c) The executive director may appoint additional staff
17 for the office. Staff appointed pursuant to this subsection
18 shall be exempt from chapters 76 and 89 but shall be members of
19 the state employees' retirement system and shall be eligible to
20 receive the benefits of any state employee benefit program
21 generally applicable to officers and employees of the State.



1 (d) Department heads may assign additional employees from
2 existing positions within those departments to the office;
3 provided that the employees shall represent their respective
4 department's needs and shall have direct communication with the
5 respective department's leadership during the course of their
6 assignment with the office.

7 **§346-C Functions.** The office shall:

- 8 (1) Address issues identified and implement solutions
9 recommended by the board through a
10 cross-representation of state departments and the
11 private sector, including private donors;
- 12 (2) Identify common issues, unmet needs, and challenges
13 encountered by departments and work to solve those
14 issues through a cross-representation of state
15 departments and the private sector, including private
16 donors;
- 17 (3) Seek funding solutions using moneys that each
18 department has access to, including federal, state,
19 and private sources, and work with philanthropic
20 organizations and other entities from the private
21 sector to re-evaluate the State's funding priorities



- 1 and find funding solutions to implement
2 interdepartmental programming;
- 3 (4) Establish a procurement team that has cross-agency
4 representation to streamline existing department grant
5 and funding management and meet existing fiduciary
6 obligations and other state requirements;
- 7 (5) Interact with community agencies, organizations, and
8 other stakeholders to ensure the office is meeting the
9 needs and wellness requirements of communities
10 throughout the State; and
- 11 (6) Create a social determinants of health electronic
12 dashboard that identifies a baseline of needs and
13 concerns that impede high quality-of-life outcomes.

14 **§346-D Annual report.** The office shall submit an annual
15 report to the legislature no later than twenty days prior to the
16 convening of each regular session that contains a summary of its
17 activities during the preceding year, including:

- 18 (1) Actions taken to address issues, unmet needs, and
19 challenges relating to wellness and resilience;



- 1 (2) Funds received pursuant to the activities of the
- 2 office from federal, state, private, and philanthropic
- 3 sources;
- 4 (3) The office's engagement with community entities and
- 5 other stakeholders; and
- 6 (4) Any other findings and recommendations, including any
- 7 proposed legislation.

8 **§346-E Wellness and resilience advocacy board;**

9 **establishment; members; roles.** (a) There is established within
10 the department for administrative purposes only, a wellness and
11 resilience advocacy board to advocate for wellness and
12 resilience through trauma informed care and advise the office in
13 implementing this part. The board shall consist of the
14 following members:

- 15 (1) The director of health, or the director's designee,
- 16 who shall serve as the chairperson of the advocacy
- 17 board;
- 18 (2) The director of human services, or the director's
- 19 designee;
- 20 (3) The superintendent of education, or the
- 21 superintendent's designee;



- 1 (4) The director of public safety or its successor agency,
2 or the director's designee;
- 3 (5) The director of the executive office on early
4 learning, or the director's designee;
- 5 (6) A member of the judiciary, to be appointed by the
6 chief justice of the supreme court; and
- 7 (7) A faculty member from the University of Hawaii John A.
8 Burns school of medicine, to be appointed by the dean
9 of the University of Hawaii John A. Burns school of
10 medicine.
- 11 (b) The chairperson shall also invite the following
12 persons to serve as members of the board:
- 13 (1) The chief executive officer of Kamehameha Schools, or
14 the chief executive officer's designee;
- 15 (2) A member of the law enforcement community;
- 16 (3) A member of the non-profit sector; and
- 17 (4) A community member or non-profit representative from
18 the Compact of Free Association islander community.
- 19 (c) The wellness and resiliency advocacy board shall
20 advocate for wellness and resilience through trauma-informed
21 care in the State. Specifically, the advocacy board shall:



- 1 (1) Create, develop, and adopt a statewide framework for
2 trauma-informed and responsive practice. The
3 framework shall include:
- 4 (A) A clear definition of "trauma-informed and
5 responsive practice";
 - 6 (B) Principles of trauma-informed and responsive care
7 that may apply to any school, health care
8 provider, law enforcement agency, community
9 organization, state agency, or other entity that
10 has contact with children or youth;
 - 11 (C) Clear examples of how individuals and
12 institutions may implement trauma-informed and
13 responsive practices across different domains,
14 including organizational leadership, workforce
15 development, policy and decision-making, and
16 evaluation;
 - 17 (D) Strategies for preventing and addressing
18 secondary traumatic stress for all professionals
19 and providers working with children and youth and
20 their families who have experienced trauma;



- 1 (E) Recommendations to implement trauma-informed care
- 2 professional development and strategy
- 3 requirements in county and state contracts; and
- 4 (F) An implementation and sustainability plan,
- 5 consisting of an evaluation plan with suggested
- 6 metrics for assessing ongoing progress of the
- 7 framework;
- 8 (2) Identify best practices, including those from Native
- 9 Hawaiian cultural practices, with respect to children
- 10 and youth who have experienced or are at risk of
- 11 experiencing trauma, and their families;
- 12 (3) Provide a trauma-informed care inventory and
- 13 assessment of public and private agencies and
- 14 departments;
- 15 (4) Identify various cultural practices that build
- 16 wellness and resilience in communities;
- 17 (5) Convene trauma-informed care practitioners so that
- 18 they may share research and strategies in helping
- 19 communities build wellness and resilience;
- 20 (6) Seek ways in which federal funding may be used to
- 21 better coordinate and improve the response to families



1 impacted by coronavirus disease 2019 (COVID-19),
2 substance use disorders, domestic violence, poverty,
3 and other forms of trauma; and make recommendations,
4 as necessary, for a government position to communicate
5 with federal agencies to seek and leverage federal
6 funding with county and state agencies and
7 philanthropical organizations; and

8 (7) Coordinate data collection and funding streams to
9 support the efforts of the board.

10 (d) The nongovernmental members of the wellness and
11 resiliency advocacy board shall serve without compensation but
12 shall be reimbursed for expenses, including travel expenses,
13 necessary for the performance of their duties."

14 SECTION 3. All rights, powers, functions, and duties of
15 the office of the governor relating to the office of wellness
16 and resilience are transferred to the department of human
17 services.

18 All employees who occupy civil service positions and whose
19 functions are transferred to the department of human services by
20 this Act shall retain their civil service status, whether
21 permanent or temporary. Employees shall be transferred without



1 loss of salary, seniority (except as prescribed by applicable
2 collective bargaining agreements), retention points, prior
3 service credit, any vacation and sick leave credits previously
4 earned, and other rights, benefits, and privileges, in
5 accordance with state personnel laws and this Act; provided that
6 the employees possess the minimum qualifications and public
7 employment requirements for the class or position to which
8 transferred or appointed, as applicable; provided further that
9 subsequent changes in status may be made pursuant to applicable
10 civil service and compensation laws.

11 Any employee who, prior to this Act, is exempt from civil
12 service and is transferred as a consequence of this Act may
13 retain the employee's exempt status, but shall not be appointed
14 to a civil service position as a consequence of this Act. An
15 exempt employee who is transferred by this Act shall not suffer
16 any loss of prior service credit, vacation or sick leave credits
17 previously earned, or other employee benefits or privileges as a
18 consequence of this Act; provided that the employees possess
19 legal and public employment requirements for the position to
20 which transferred or appointed, as applicable; provided further
21 that subsequent changes in status may be made pursuant to



1 applicable employment and compensation laws. The executive
2 director of the office of wellness and resilience may prescribe
3 the duties and qualifications of these employees and fix their
4 salaries without regard to chapter 76, Hawaii Revised Statutes.

5 SECTION 4. All rules, policies, procedures, guidelines,
6 and other material adopted or developed by the office of the
7 governor to implement provisions of the Hawaii Revised Statutes
8 that are reenacted or made applicable to the department of human
9 services by this Act shall remain in full force and effect until
10 amended or repealed by the department of human services pursuant
11 to chapter 91, Hawaii Revised Statutes. In the interim, every
12 reference to the office of the governor or governor in those
13 rules, policies, procedures, guidelines, and other material is
14 amended to refer to the department of human services or director
15 of human services, as appropriate.

16 SECTION 5. All deeds, leases, contracts, loans,
17 agreements, permits, or other documents executed or entered into
18 by or on behalf of the office of the governor pursuant to the
19 provisions of the Hawaii Revised Statutes, which are reenacted
20 or made applicable to the department of human services by this
21 Act, shall remain in full force and effect. Upon the effective



1 date of this section, every reference to the office of the
2 governor or governor therein shall be construed as a reference
3 to the department of human services or director of human
4 services, as appropriate.

5 SECTION 6. All appropriations, records, equipment,
6 machines, files, supplies, contracts, books, papers, documents,
7 maps, and other personal property heretofore made, used,
8 acquired, or held by the office of the governor relating to the
9 functions of the office of wellness and resilience transferred
10 to the department of human services shall be transferred with
11 the functions to which they relate.

12 SECTION 7. Chapter 27, part IX, Hawaii Revised Statutes,
13 is repealed.

14 PART III

15 SECTION 8. Statutory material to be repealed is bracketed
16 and stricken. New statutory material is underscored.

17 SECTION 9. This Act shall take effect on July 1, 2112;
18 provided that:

19 (1) Sections 2 through 6 of this Act shall take effect on
20 July 1, 2025; and



1 (2) Section 7 of this Act shall take effect on June 30,
2 2025.



Report Title:

Office of Wellness and Resilience; Advocacy Board;
Trauma-Informed Care Task Force; Office of the Governor; DHS

Description:

Transfers the office of wellness and resilience from the office of the governor to the department of human services on 7/1/2025. Extends the trauma-informed care task force dissolution date to 6/30/2025 and establishes the task force as an advocacy board to the office of wellness and resilience until its dissolution. Reconstitutes the membership of the trauma-informed care task force into a permanent advocacy board to the office of wellness and resilience to be called the wellness and resilience advocacy board. Effective 7/1/2112. (HD1)

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

