

STAND. COM. REP. NO.

2130

Honolulu, Hawaii

APR 17

, 2025

RE: S.C.R. No. 16
S.D. 1

Honorable Nadine K. Nakamura
Speaker, House of Representatives
Thirty-Third State Legislature
Regular Session of 2025
State of Hawaii

Madame:

Your Committee on Finance, to which was referred S.C.R. No. 16, S.D. 1, entitled:

"SENATE CONCURRENT RESOLUTION REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A TASK FORCE TO IDENTIFY AND DEVELOP MINIMUM PROFESSIONAL STANDARDS FOR COMMUNITY HEALTH WORKER TRAINING PROGRAMS,"

begs leave to report as follows:

The purpose of this measure is to request the Department of Health to convene a task force to identify and develop minimum professional standards for community health worker training programs.

As affirmed by the record of votes of the members of your Committee on Finance that is attached to this report, your Committee concurs with the intent and purpose of S.C.R. No. 16, S.D. 1, and recommends its adoption.

SCR16 SD1 HSCR FIN



Respectfully submitted on
behalf of the members of the
Committee on Finance,


KYLE T. YAMASHITA, Chair



MSR 2130

Bill/Resolution No.: SCR IV, SDI		Committee Referral: HLT, FIN		Date: 4/16/2025
<input checked="" type="checkbox"/> The committee is reconsidering its previous decision on the measure.				
The recommendation is to:				
<input checked="" type="checkbox"/> Pass, unamended (as is) <input type="checkbox"/> Pass, with amendments (HD) <input type="checkbox"/> Hold <input type="checkbox"/> Pass short form bill with HD to recommit for future public hearing (recommit)				
FIN Members		Ayes	Ayes (WR)	Nays
Excused				
1. YAMASHITA, Kyle T. (C)		/		
2. TAKENOUCHI, Jenna (VC)		/		
3. GRANDINETTI, Tina Nakada		/		
4. HOLT, Daniel		/		
5. HUSSEY, Ikaika		/		
6. KEOHOKAPU-LEE LOY, Sue L.		/		
7. KITAGAWA, Lisa		/		
8. KUSCH, Matthias		/		
9. LAMOSAO, Rachele F.		/		
10. LEE, Mike		/		
11. MIYAKE, Tyson K.		/		
12. MORIKAWA, Dee		/		
13. TEMPLO, Shirley Ann		/		
14. ALCOS III, David		/		
15. REYES ODA, Julie		/		
TOTAL (15)		14		1
The recommendation is: <input checked="" type="radio"/> Adopted <input type="radio"/> Not Adopted				
If joint referral, _____ did not support recommendation. committee acronym(s)				
Vice Chair's or designee's signature: _____				
Distribution: Original (White) – Committee Duplicate (Yellow) – Chief Clerk's Office Duplicate (Pink) – HMSO				