Hawai‘i State Hospital Decompression & 704 Remedies

Presentation to the Hawai‘i State Senate Committee on Health and Human Services

October 20, 2025

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Factors Contributing to Hawai‘i State Hospital Census

Factors Contributing to High Census

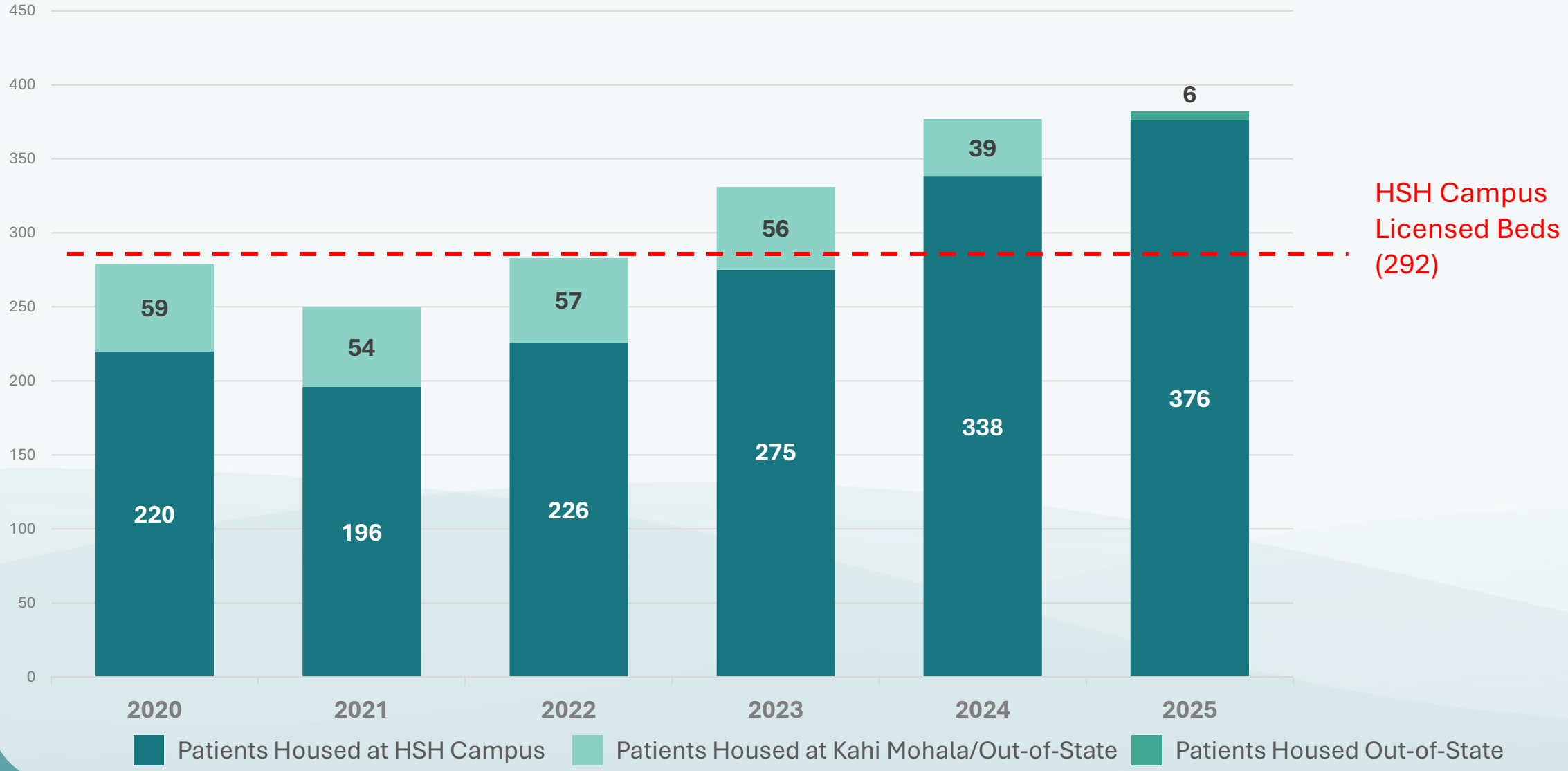
Increased Admissions

Discharge Barriers

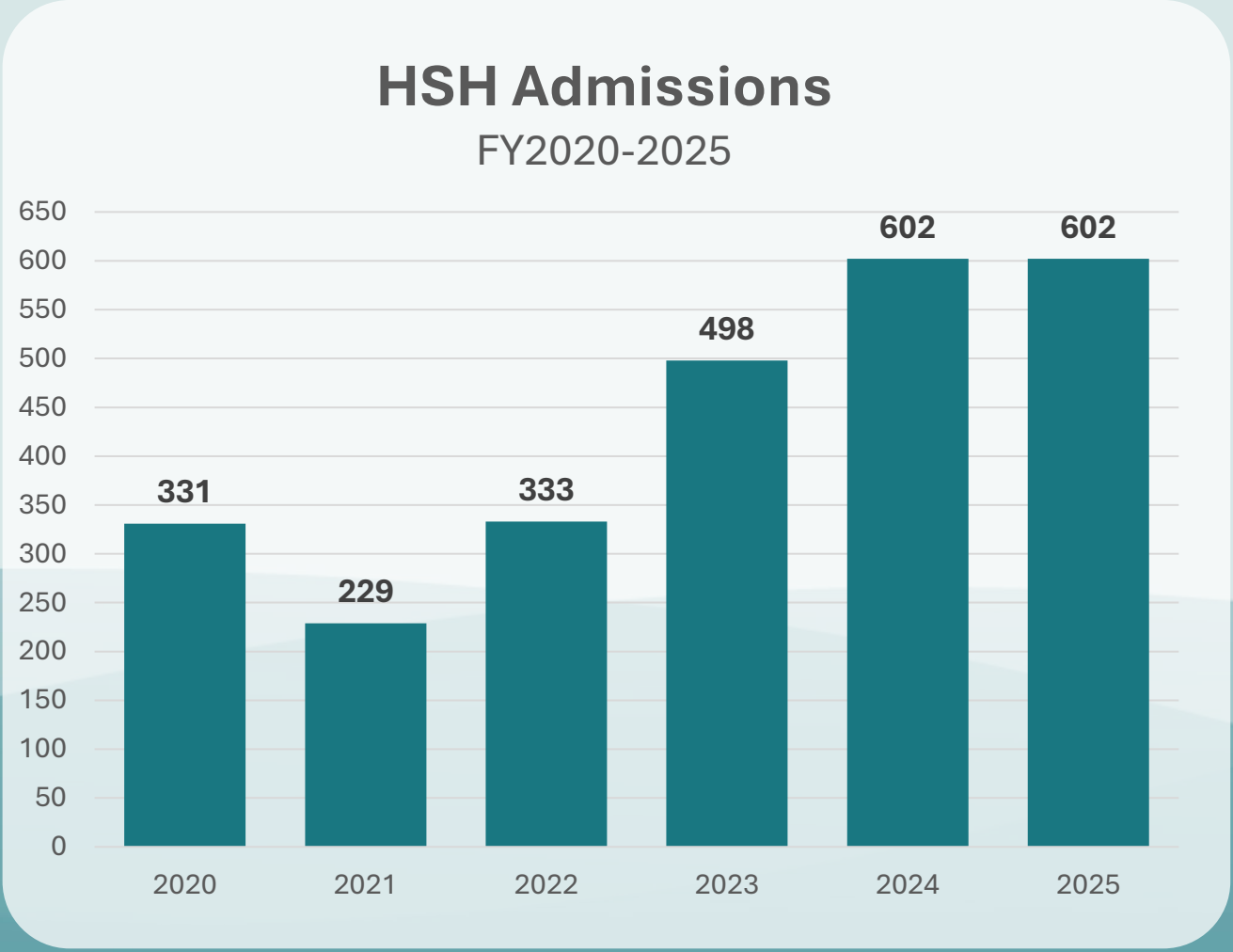
3

HSH Average Daily Census

FY2020-2025



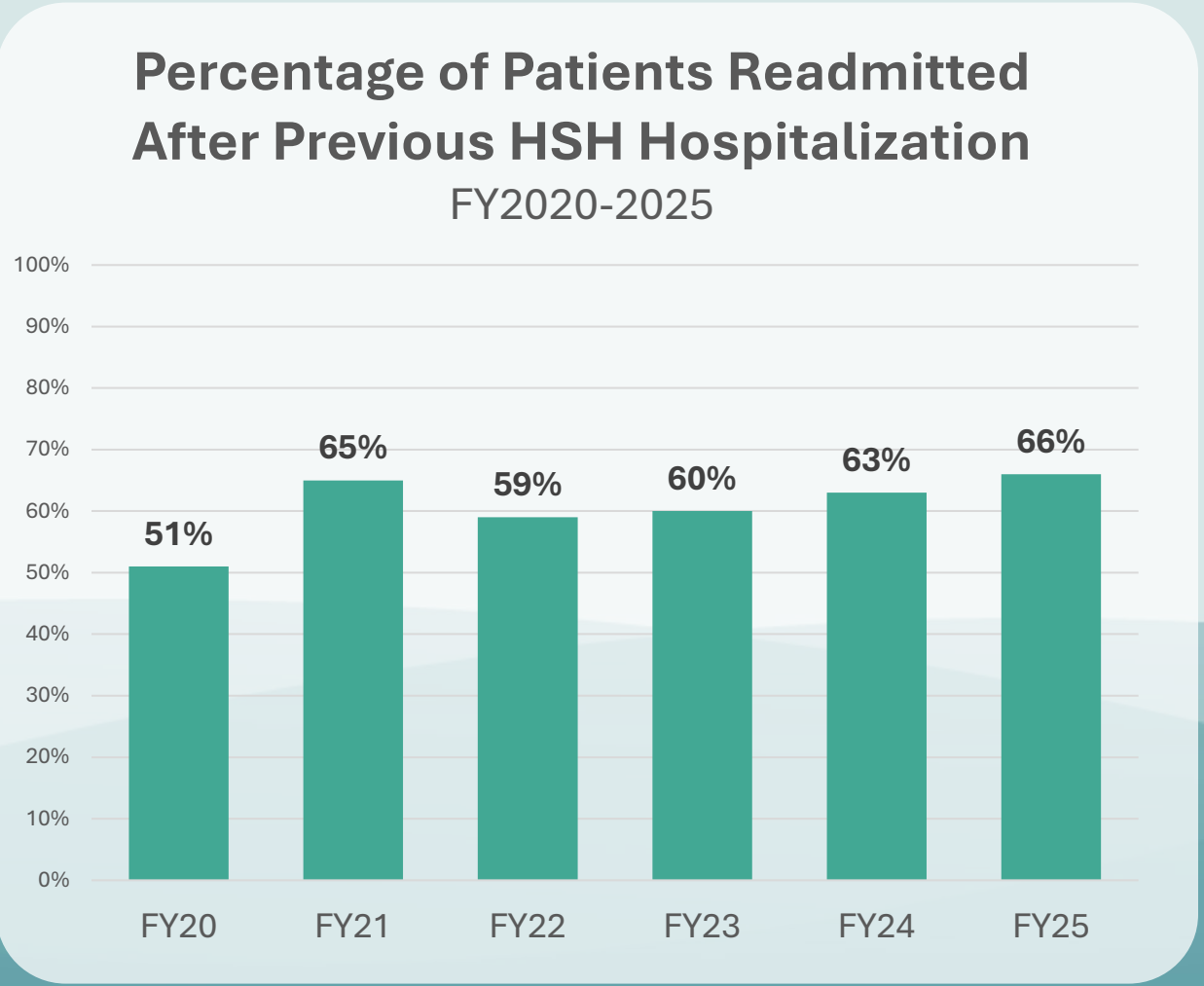
Admissions Trends

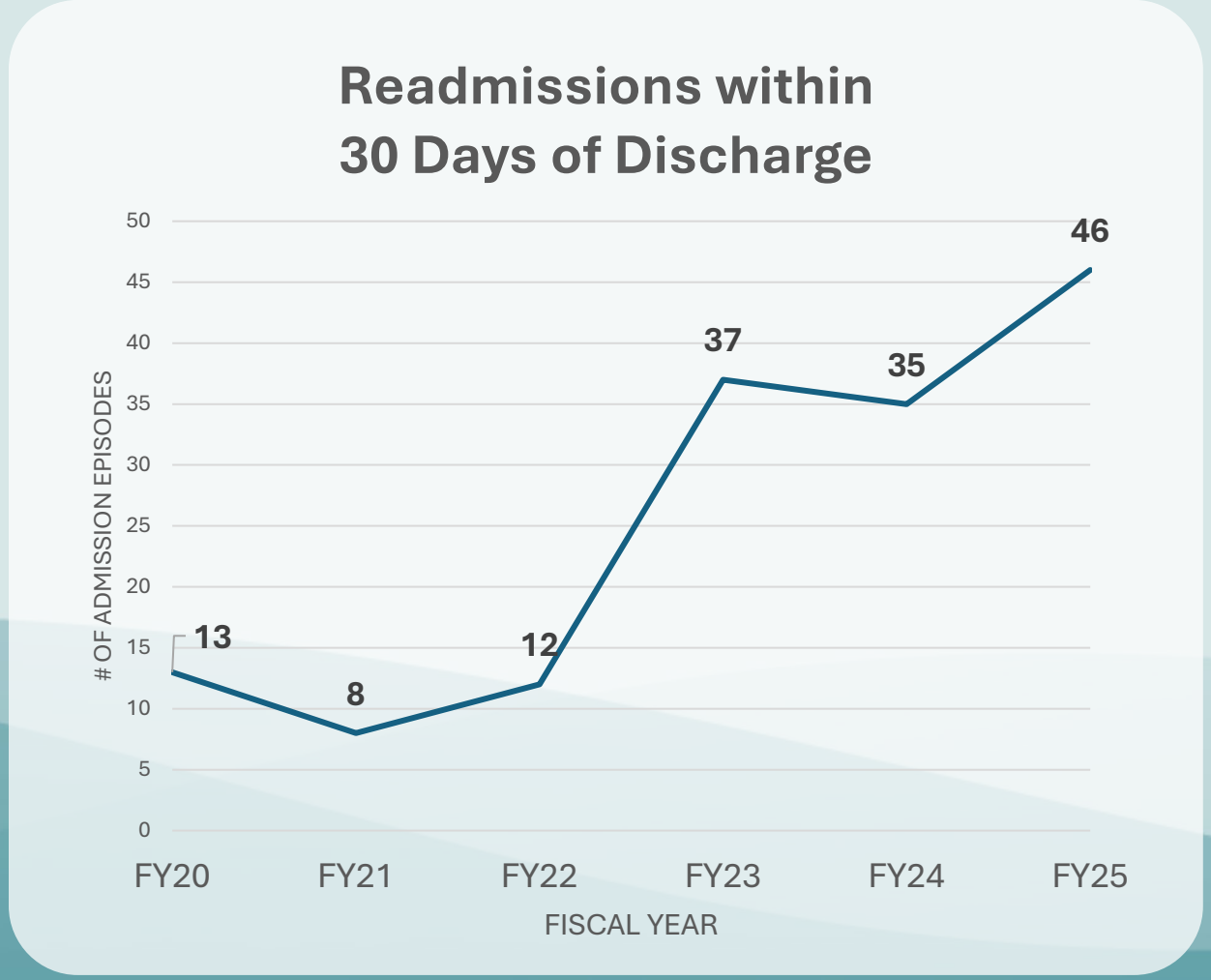


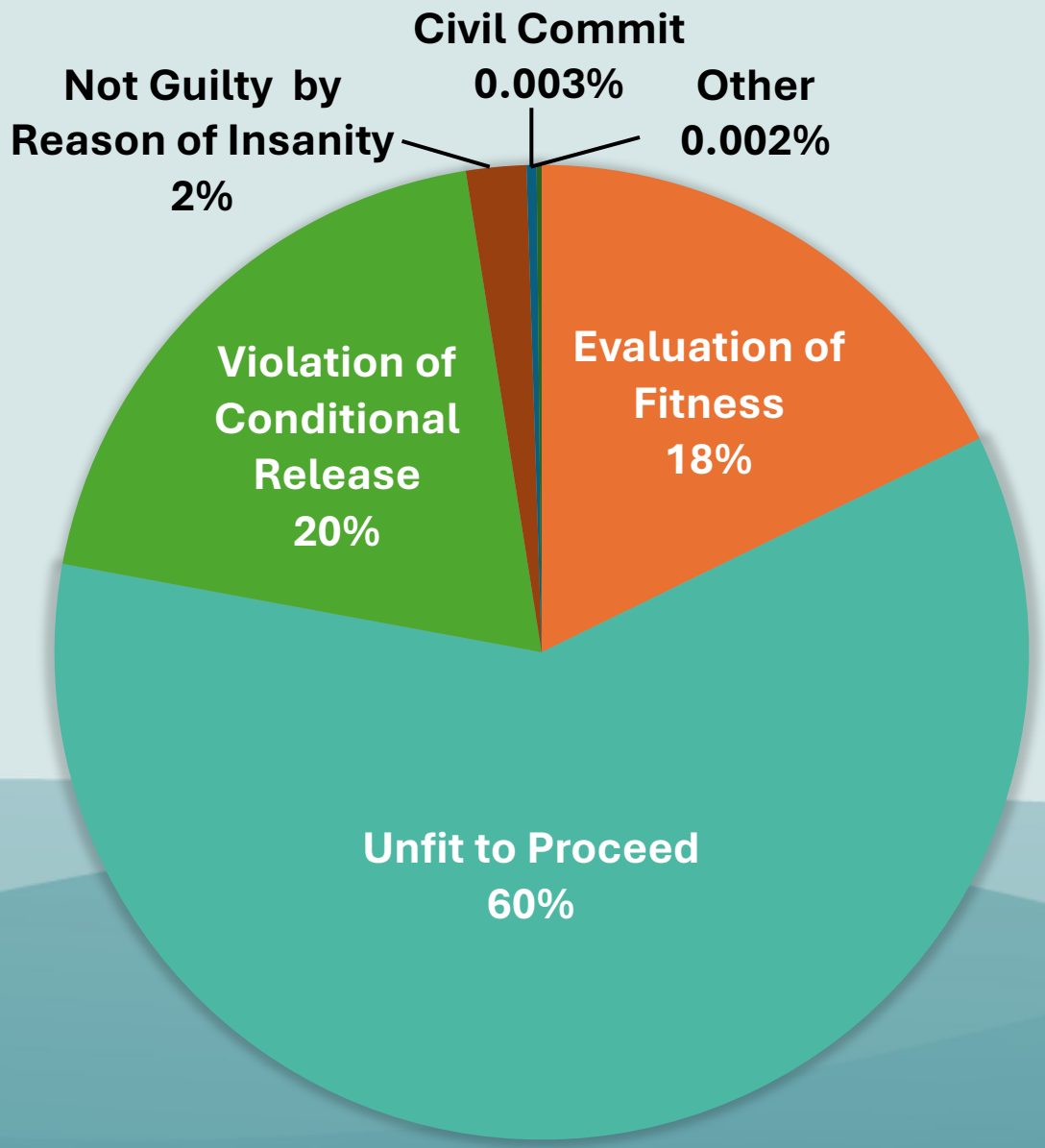
Among individuals who were admitted:

- 66% were previously hospitalized at HSH
- 22% were unhoused prior to admission

Rehospitalization Status of Admissions







Patients by Legal Status

FY2025

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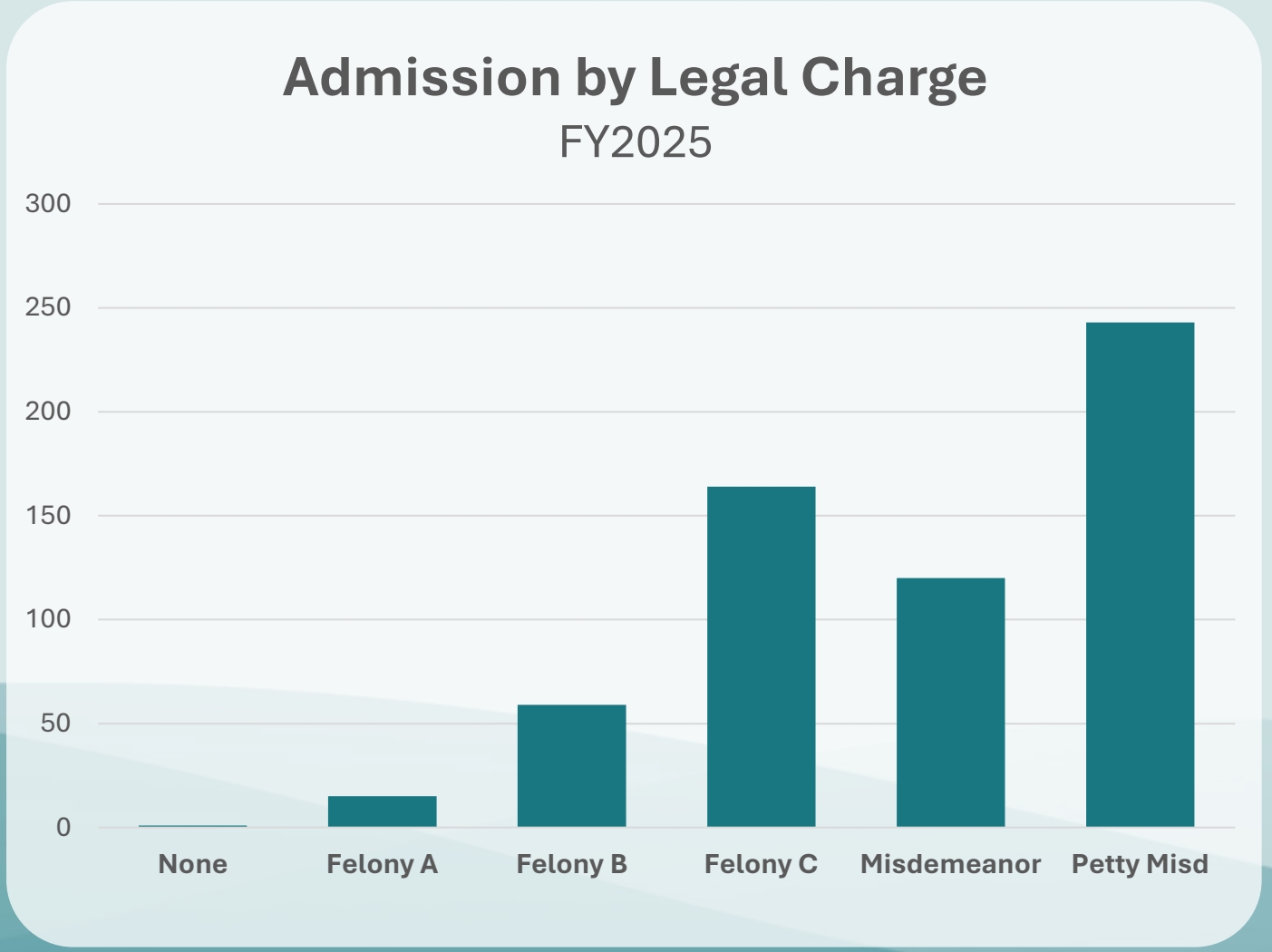
Seriousness of Charges

Most charges involved:

- Petty misdemeanors
- Misdemeanors, or
- Class C felonies (the least serious of felony crimes, such as theft, and property destruction)



Hawai‘i State Hospital Decompression Plan

HSH Census Decompression

HSH has developed a strategy to decompress its census by 100 patients based on placing patients in the most appropriate setting based upon their clinical/medical needs. We have categorized the following patient level of care to placement and movement:

Type of HSH patient	Frail, elderly, and/or unable to do one or more activity of daily living	No longer needs inpatient psychiatric care & meets criteria for conditional release	Frequent utilizer because of non-violent petty misdemeanor offenses	Neighbor island residents who are stable but need continued inpatient psychiatric treatment	Longterm NGRI (10+ years)	Does not require inpatient psychiatric treatment
More appropriate placement type	Skilled Nursing Facilities	Conditional Release to Community-Based Care	Diversion to Community Facility	Return to Home Island for Inpatient Care	Out-of-State Facility for Inpatient Care	Return to DCR Facility

Opportunities for Collaborative Solutions

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- Addressing increased number of admissions
  - Resume early screening, brief intervention, referral/provider engagement at cell block
  - Revive pre-booking diversion program (e.g., LEAD – law enforcement assisted diversion/letting everyone advance with dignity)
  - Explore viability of Dismissal Upon Civil Commit
  - Consider other suitable facilities for placement and evaluation
- Addressing readmissions
  - Engage with outpatient providers prior to discharge and partner in petitioning for Assisted Community Treatment orders
  - Facilitate linkage to Medicaid Community Care Services (CCS) prior to discharge
- Addressing discharge barriers
  - Increase capacity for difficult-to-place population
- Providing education
  - AOT (assisted outpatient treatment/assisted community treatment) training conference in 2026

Mahalo!

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