### A BILL FOR AN ACT

RELATING TO MENTAL HEALTH.

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

1 The legislature finds that the State's mental SECTION 1. 2 health laws provide the State with a variety of methods to help 3 and support individuals suffering from mental illness or 4 substance abuse. As the number of individuals in need of help 5 increases, so has the need to enhance these laws in a manner 6 that demystifies the complexities of existing procedures, 7 clarifies the circumstances under which action can be taken, and 8 bolsters available tools to best serve these individuals. Legal 9 mechanisms, such as emergency procedures, involuntary 10 hospitalization, assisted community treatment, and authorization 11 for the administration of treatment, enables the State and 12 mental health providers to provide compassionate assistance to individuals suffering from mental illness or substance abuse 13 14 when they need it the most.

15 Accordingly, the purpose of this Act is to clarify, update, 16 and revise Hawaii's mental health laws by:



1 (1) Clarifying the procedures and expanding on the 2 circumstances available from initial contact with an 3 individual suffering from mental illness or substance 4 abuse to emergency transportation, examination, and 5 hospitalization of the individual; (2) Establishing liability limits for state and local 6 7 governments and health care professionals under 8 certain circumstances arising from emergency 9 procedures; Expanding the notice requirements when an emergency 10 (3) 11 hospitalization occurs to include an individual's 12 health care surrogate, as well as clarifying when the 13 individual can waive notice to the individual's family 14 members; 15 (4) Removing the authority of the family court to appoint 16 a legal guardian or conservator in a proceeding for 17 involuntary hospitalization, thereby leaving appointments for legal guardians or conservators 18 19 subject to the requirements of chapter 560, article V, 20 Hawaii Revised Statutes;

2025-1936 SB1322 SD2 SMA.docx

Page 2

**S.B. NO.** <sup>1322</sup> S.D. 2

1	(5)	Removing the requirement that psychiatric facilities
2		wait for responses from interested parties to a notice
3		of intent to discharge a patient under involuntary
4		hospitalization before discharging the patient;
5	(6)	Clarifying the circumstances under which a subject of
6		an order for assisted community treatment can be
7		administered medication over the subject's objection;
8	(7)	Providing limits on liability for an assisted
9		community treatment provider; and
10	(8)	Modifying the requirements to obtain administrative
11		authorization of medical treatment over the objection
12		of a patient who is in the custody of the director and
13		in a psychiatric facility, so that the treatment can
14		be authorized by a single decision-maker who is a
15		psychiatrist.
16	SECT	ION 2. Chapter 334, Hawaii Revised Statutes, is
17	amended a	s follows:
18	1.	By adding a new subpart to part IV to be designated as
19	subpart A	and to read:
20		"A. Emergency Procedures

2025-1936 SB1322 SD2 SMA.docx

4

\$334-A Emergency procedures. The emergency procedures in
 this subpart shall consist of emergency transportation,
 emergency examination, and emergency hospitalization for
 individuals who may be mentally ill or suffering from substance
 abuse and imminently dangerous to self or others.

6 §334-B Emergency transportation initiated by a law 7 enforcement officer. (a) When a law enforcement officer has a 8 reasonable suspicion that an individual is imminently dangerous 9 to self or others and needs to be detained for emergency 10 examination, the law enforcement officer shall contact a mental health emergency worker; provided that the law enforcement 11 12 officer may temporarily detain the individual, if the law 13 enforcement officer:

- 14 (1) Is unable to reach a mental health emergency worker15 telephonically after three attempts;
- 16 (2) Has reason to believe that the situation requires
  17 immediate intervention to prevent harm to the
- 18 individual or others;
- 19 (3) Contacts a mental health emergency worker at the20 earliest time possible; and

2025-1936 SB1322 SD2 SMA.docx

Page 4

Page 5

1 (4) Documents the reasons why the situation necessitated 2 that the individual be detained. 3 If the mental health emergency worker determines that the individual is mentally ill or suffering from substance abuse and 4 5 is imminently dangerous to self or others, the law enforcement 6 officer shall detain the individual for transportation to an 7 emergency examination. 8 (b) When a crisis intervention officer has probable cause to believe that an individual is mentally ill or suffering from 9 10 substance abuse and is imminently dangerous to self or others, 11 the crisis intervention officer shall detain the individual for 12 transportation to an emergency examination. The crisis 13 intervention officer shall contact a mental health emergency 14 worker to determine the type of facility where the individual shall be transported. 15 16 (c) Any individual detained under this section shall be 17 transported directly to a psychiatric facility or other facility 18 designated by the director, as determined by a mental health 19 emergency worker; provided that if a medical emergency occurs 20 during transport the individual shall be transported to the 21 nearest emergency department. A law enforcement officer shall

### 2025-1936 SB1322 SD2 SMA.docx

Page 6

#### **S.B. NO.** <sup>1322</sup> S.D. 2

1 make an application for the emergency examination of the individual. The application shall state in detail the 2 3 circumstances under which and reasons that the individual was taken into custody. The application shall be transmitted with 4 the individual to the psychiatric facility or other facility 5 6 designated by the director and be made a part of the 7 individual's clinical record. 8 (d) For the purposes of this section, "crisis intervention officer" has the same meaning as defined in section 353C-1. 9 10 §334-C Emergency transportation initiated by a court 11 order. Upon written or oral application of any licensed physician, advanced practice registered nurse, psychologist, 12 attorney, member of the clergy, health or social service 13 14 professional, or any state or county employee in the course of employment, a judge may issue a written or oral ex parte order: 15 16 (1) Stating that there is probable cause that the 17 individual is: 18 Mentally ill or suffering from substance abuse; (A) 19 and 20 (B) Imminently dangerous to self or others;

2025-1936 SB1322 SD2 SMA.docx

Page 7

1	(2)	Stating the findings upon which the conclusion is
2		based; and
3	(3)	Directing that a law enforcement officer take the
4		individual into custody and transport the individual
5		directly to a psychiatric facility or other facility
6		designated by the director for an emergency
7		examination.
8	The	person who made the application shall notify a mental
9	health em	ergency worker of the written or oral ex parte order
10	and when	possible, shall coordinate the transport of the
11	individua	l with the emergency worker.
12	If a	n application was made orally, the person who made the
13	applicati	on shall reduce the application to writing and submit
14	it to the	judge who issued the ex parte order by noon of the
15	next cour	t day after the order was issued. The written

16 application shall be made under penalty of law but need not be 17 sworn before a notary public. If the judge issued an ex parte 18 order orally, the judge shall reduce the oral order to writing 19 by the close of the next court day after the order was issued. 20 The written ex parte order shall be transmitted with the 21 individual to the psychiatric facility or other facility

## 2025-1936 SB1322 SD2 SMA.docx

1 designated by the director and be made a part of the 2 individual's clinical record.

3 §334-D Emergency transportation initiated by a health care 4 provider. Any licensed physician, advanced practice registered 5 nurse, physician assistant, licensed clinical social worker, or psychologist who has examined an individual and determines that 6 7 the individual is mentally ill or suffering from substance abuse 8 and is imminently dangerous to self or others, may direct a law 9 enforcement officer to detain and transport the individual, by 10 ambulance or other suitable means, to a psychiatric facility or 11 other facility designated by the director for an emergency examination, and may administer treatment, within the examining 12 13 health care provider's scope of practice, as necessary for the 14 individual's safe transportation. The examining health care 15 provider shall provide a written statement of circumstances and 16 reasons necessitating the emergency examination. The written 17 statement shall be transmitted with the individual to the psychiatric facility or other facility designated by the 18 19 director and be made a part of the individual's clinical record. 20 The person who made the application shall notify a mental health emergency worker of the written or oral ex parte order 21

2025-1936 SB1322 SD2 SMA.docx

and when possible, shall coordinate the transport of the
 individual with the emergency worker.

3 **§334-E Emergency examination.** (a) A licensed physician, 4 medical resident under the supervision of a licensed physician, 5 or advanced practice registered nurse may conduct an initial 6 examination and screening of the patient, and administer such 7 treatment as indicated by good medical practice; provided that the patient is further examined by a qualified psychiatric 8 9 examiner. A qualified psychiatric examiner shall conduct an 10 emergency examination of a patient transported under 11 section 334-B, 334-C, or 334-D without unnecessary delay and 12 provide the patient with treatment, as is indicated by good 13 medical practice; provided that the emergency examination shall 14 include a screening to determine whether the patient meets the 15 criteria for involuntary hospitalization as provided in section 16 334-60.2.

(b) If, following an emergency examination of a patient under subsection (a), a qualified psychiatric examiner determines that the criteria for involuntary hospitalization do not exist, the patient shall be discharged expeditiously; provided that if the patient is not under an order for assisted

### 2025-1936 SB1322 SD2 SMA.docx

community treatment, a qualified psychiatric examiner shall
 conduct an examination pursuant to section 334-121.5 before the
 discharge. A patient under criminal charges shall be returned
 to the custody of a law enforcement officer.

\$334-F Emergency hospitalization. (a) If, following an
emergency examination pursuant to section 334-E(a), a qualified
psychiatric examiner determines that the criteria for
involuntary hospitalization exist, the patient shall be
hospitalized on an emergency basis or be transferred to another
psychiatric facility or other facility designated by the
director for emergency hospitalization.

12 (b) The patient admitted under subsection (a) shall be 13 released within seventy-two hours of the patient's admission to 14 a psychiatric facility or other facility designated by the 15 director, unless:

16 (1) The patient voluntarily agrees to further

17

hospitalization; or

18 (2) A proceeding for court-ordered evaluation or
19 hospitalization is initiated as provided in section
20 334-60.3. If that time expires on a Saturday, Sunday,
21 or holiday, the time for initiation shall be extended

2025-1936 SB1322 SD2 SMA.docx

1 to the close of the next court day. Upon initiation of the proceeding the facility may detain the patient 2 until further order of the court. 3 4 (c) If at any time during the period of emergency hospitalization a qualified psychiatric examiner determines that 5 a patient no longer meets the criteria for emergency 6 7 hospitalization, the patient shall be discharged expeditiously; 8 provided that if the patient is not under an order for assisted 9 community treatment, a qualified psychiatric examiner shall 10 conduct an examination pursuant to section 334-121.5 before the discharge. A patient under criminal charges shall be returned 11 12 to the custody of a law enforcement officer. 13 The patient shall have the right, immediately upon (d) emergency hospitalization, to telephone an attorney and the 14 patient's surrogate, guardian, family member including a 15 16 reciprocal beneficiary, or adult friend. The patient shall be 17 allowed to confer with an attorney in private. 18 \$334-G Notice of emergency transportation, examination, 19 and hospitalization. Notice of an individual's emergency 20 transportation, examination, and hospitalization under this 21 subpart may be given to at least one of the following persons in

2025-1936 SB1322 SD2 SMA.docx

1	the follo	wing order of priority: the individual's spouse or
2	reciproca	l beneficiary, legal parents, adult children,
3	surrogate	, legal guardian, or if none can be found, the closest
4	adult rel	ative, as long as the individual:
5	(1)	Has capacity to make health care decisions and
6		consents that notice may be given to at least one of
7		persons listed in this section;
8	(2)	Is given the opportunity to object and does not
9		object, or the health care provider can reasonably
10		infer from the circumstances based on the exercise of
11		professional judgment that the individual does not
12		object; or
13	(3)	Is incapacitated or an emergency circumstance exists,
14		and the health care provider determines based on the
15		exercise of professional judgment that giving
16		notification is in the best interest of the
17		individual.
18	The staff	of the facility shall make reasonable efforts to
19	ensure th	at the patient's family, including a reciprocal
20	beneficia	ry, is notified of the emergency hospitalization,
21	unless the	e patient is an adult and waives notification."

2025-1936 SB1322 SD2 SMA.docx

Page 13

# **S.B. NO.** <sup>1322</sup> S.D. <sup>2</sup>

1	2. By designating section 334-60.1 as subpart B and
2	inserting a title before section 334-60.1 to read:
3	"B. Voluntary Admission"
4	3. By designating section 334-60.2 to 334-60.7 as subpart
5	C and inserting a title before section 334-60.2 to read:
6	"C. Involuntary Hospitalization"
7	4. By designating section 334-61 to 334-62 as subpart D
8	and inserting a title before section 334-61 to read:
9	"D. General Provisions"
10	SECTION 3. Chapter 334, Hawaii Revised Statutes, is
11	amended by adding a new section to part VIII to be appropriately
12	designated and to read as follows:
13	"§334- Records and disclosure of information. (a) A
14	treatment provider who provided or is providing medical,
15	psychiatric, therapeutic, or social services treatment to an
16	individual shall provide relevant treatment information, if
17	available, to the department of the attorney general upon the
18	department's request for the purpose of preparing a petition for
19	assisted community treatment. The treatment information may
20	include a certificate issued pursuant to section 334-123(b), a
21	treatment plan prepared pursuant to section 334-126(g), records



1	related to actions or proceedings pursuant to part IV of this
2	chapter, records relating to the individual's treatment history,
3	and other records deemed relevant by the individual's treatment
4	provider.
5	(b) The petitioner of an assisted community treatment
6	order, the department of the attorney general, and the family
7	court shall disclose an assisted community treatment order of a
8	subject of the order to state and county law enforcement
9	agencies, assisted community treatment provider, or any other
10	entity necessary to carry out the terms of the subject's
11	assisted community treatment order."
12	SECTION 4. Section 334-1, Hawaii Revised Statutes, is
13	amended as follows:
14	1. By adding two new definitions to be appropriately
15	inserted and to read:
16	""Qualified psychiatric examiner" means a licensed
17	psychiatrist or advanced practice registered nurse who has
18	prescriptive authority and who holds an accredited national
19	certification in an advanced practice registered nurse
20	psychiatric specialization.
21	"Surrogate" means a person appointed:

2025-1936 SB1322 SD2 SMA.docx

Page 15

1	<u>(1)</u> <u>U</u>	nder a power of attorney for health care to make a
2	<u>h</u>	ealth care decision for the individual who made the
3	a	ppointment; or
4	<u>(2)</u> <u>U</u>	nder law or court order to make health care decisions
5	f	or an individual."
6	2. By	amending the definition of "patient" to read:
7	""Pati	ent" means [ <del>a person</del> ] <u>an individual</u> under
8	observation	, care, or treatment at a psychiatric facility[ $ au$ ] or
9	other facil	ity designated by the director."
10	3. Ву	amending the definition of "treatment" to read:
11	""Trea	tment" means the broad range of emergency, out-
12	patient, in	termediate, domiciliary, and inpatient services and
13	care, inclu	ding diagnostic evaluation, medical, psychiatric,
14	psychologic	al, and social service care, vocational
15	rehabilitat	ion, psychosocial rehabilitation, career counseling,
16	and other s	pecial services [ <del>which</del> ] <u>that</u> may be extended to
17	[ <del>handicappe</del>	d persons.] an individual with a disability."
18	SECTIO	N 5. Section 334-60.2, Hawaii Revised Statutes, is
19	amended to	read as follows:

# 2025-1936 SB1322 SD2 SMA.docx

Page 16

# **S.B. NO.** $^{1322}_{S.D. 2}$

1	"§334-60.2 Involuntary hospitalization criteria. [A
2	person] An individual may be committed to a psychiatric facility
3	for involuntary hospitalization, if the court finds:
4	(1) That the [ <del>person</del> ] <u>individual</u> is mentally ill or
5	suffering from substance abuse;
6	(2) That the [ <del>person</del> ] <u>individual</u> is imminently dangerous
7	to self or others; and
8	(3) That the [ <del>person</del> ] <u>individual</u> is in need of care or
9	treatment, or both, and there is no suitable
10	alternative available through existing facilities and
11	programs which would be less restrictive than
12	hospitalization."
13	SECTION 6. Section 334-60.3, Hawaii Revised Statutes, is
14	amended to read as follows:
15	<b>%334-60.3</b> Initiation of proceeding for involuntary
16	hospitalization. (a) Any person may file a petition alleging
17	that [ <del>a person located in the county</del> ] <u>an individual</u> meets the
18	criteria for commitment to a psychiatric facility[ $\cdot$ ] as provided
19	in section 334-60.2. The petition shall be filed in the county
20	where the individual resides and executed subject to the
21	penalties of [ <del>perjury</del> ] <u>law</u> but need not be sworn to before a

2025-1936 SB1322 SD2 SMA.docx

1 notary public. The [attorney general, the attorney general's 2 deputy, special deputy, or appointee designated to present the 3 case] department of the attorney general shall assist the 4 petitioner to state the substance of the petition in plain and 5 simple language. The petition may be accompanied by a 6 certificate of the [licensed physician, advanced practice 7 registered nurse, ] qualified psychiatric examiner or 8 psychologist who has examined the [person] individual within two 9 days before [submission of] the petition  $[\tau]$  is filed, unless the 10 [person] individual whose commitment is sought has refused to 11 submit to medical or psychological examination, in which case 12 the fact of refusal shall be alleged in the petition. The 13 certificate shall set forth the signs and symptoms relied upon 14 by the [physician, advanced practice registered nurse,] 15 qualified psychiatric examiner or psychologist to determine the 16 [person] individual is in need of [care or] treatment[, or 17 both,] and whether the [person] individual is capable of 18 realizing and making a rational decision with respect to the 19 [person's] individual's need for treatment. If the petitioner 20 believes that further [evaluation] examination is necessary

2025-1936 SB1322 SD2 SMA.docx

Page 17

before commitment, the petitioner may request [such] the further
 [evaluation.] examination.

(b) In the event the subject of the petition has been
given an examination, evaluation, or treatment in a psychiatric
facility within five days before submission of the petition, and
hospitalization is recommended by the staff of the facility, the
petition may be accompanied by the administrator's certificate
in lieu of a [physician] gualified psychiatric examiner's or
psychologist's certificate.

10 (C) The petition shall include the name, address, and 11 telephone number of at least one of the following persons in the 12 following order of priority: the subject of the petition's 13 spouse or reciprocal beneficiary, legal parents, adult children, 14 surrogate, and legal guardian [--if one-has been-appointed]. If 15 the subject of the petition has no living spouse or reciprocal beneficiary, legal parent, adult [children,] child, surrogate, 16 17 or legal quardian, [or if none can be found,] notice shall be 18 served on at least one of the subject's closest adult relatives, 19 if any can be found."

#### 2025-1936 SB1322 SD2 SMA.docx

SECTION 7. Section 334-60.4, Hawaii Revised Statutes, is
 amended by amending subsections (a) through (c) to read as
 follows:

The court shall set a hearing on the petition and 4 "(a) 5 notice of the time and place of the hearing shall be served in 6 accordance with, and to those persons specified in, a current 7 order of commitment. If there is no current order of 8 commitment, notice of the hearing shall be served personally on 9 the subject of the petition and served personally or by certified or registered mail, return receipt requested, 10 11 deliverable to the addressee only, on the subject's spouse or reciprocal beneficiary, legal parents, adult children, 12 13 surrogate, and legal guardian[, if one has been appointed]. If 14 the subject of the petition has no living spouse or reciprocal 15 beneficiary, legal parent, adult [children,] child, surrogate, 16 or legal guardian, or if none can be found, notice of the 17 hearing shall be served on at least one of the subject's closest 18 adult relatives, if any can be found. Notice of the hearing to 19 the subject's spouse or reciprocal beneficiary, legal parents, adult children, or closest adult relative may be waived if the 20 21 subject is an adult and requests that they not be notified.



Page 20

## **S.B. NO.** <sup>1322</sup> S.D. <sup>2</sup>

Notice of the hearing shall also be served on the public 1 2 defender, attorney for the subject of the petition, or other 3 court-appointed attorney [as the case may be]. If the subject 4 of the petition is a minor, notice of the hearing shall also be served upon the person who has had the principal care and 5 custody of the minor during the sixty days preceding the date of 6 7 the petition, if that person can be found within the State. 8 Notice shall also be given to other persons as the court may 9 designate.

10 (b) The notice shall include the following:

11 (1) The date, time, place of hearing, a clear statement of 12 the purpose of the proceedings and of possible 13 consequences to the subject[+] of the petition, and a 14 statement of the legal standard upon which commitment 15 is authorized;

16 (2) A copy of the petition;

17 (3) A [written notice,] statement, in plain and simple
18 language, that the subject may waive the hearing by
19 voluntarily agreeing to hospitalization[7] or, with
20 the approval of the court, to some other form of
21 treatment;

2025-1936 SB1322 SD2 SMA.docx

1	(4)	A filled-out form indicating [such] the waiver;
2	(5)	A [ <del>written notice,</del> ] <u>statement,</u> in plain and simple
3		language, that the subject or the subject's surrogate,
4		guardian, or representative may apply at any time for
5		a hearing on the issue of the subject's need for
6		hospitalization, if the subject has previously waived
7		such a hearing;
8	(6)	[Notice] <u>A statement</u> that the subject is entitled to
9		the assistance of an attorney and that the public
10		defender has been notified of these proceedings; and
11	(7)	[Notice] <u>A statement</u> that if the subject does not want
12		to be represented by the public defender, the subject
13		may contact the subject's own attorney[ <del>; and</del>
14	<del>(8)</del>	If applicable, notice that the petitioner intends to
15		adduce evidence to show that the subject of the
16		petition is an incapacitated or protected person, or
17		both, under article V of chapter 560, and whether
18		appointment of a guardian is sought at the hearing.
19		If appointment of a guardian is to be recommended, and
20		a nomince is known at the time the petition is filed,
21		the identity of the nominee-shall be disclosed].

2025-1936 SB1322 SD2 SMA.docx

If the subject of the petition executes and files a 1 (C) 2 waiver of the hearing, upon acceptance by the court following a 3 court determination that the [person] subject understands the 4 [person's] subject's rights and is competent to waive them, the court shall order the subject to be committed to a facility that 5 6 has agreed to admit the subject as an involuntary patient or, if 7 the subject is at such a facility, that the subject be retained 8 there."

9 SECTION 8. Section 334-60.5, Hawaii Revised Statutes, is
10 amended to read as follows:

11 "§334-60.5 Hearing on petition. (a) The court shall 12 adjourn or continue a hearing for failure to timely notify the 13 subject of the petition's spouse or reciprocal beneficiary, 14 legal [parents, parent, adult [children,] child, surrogate, 15 guardian, or relative, or other person determined by the court 16 to be entitled to notice, or for failure by the subject to 17 contact an attorney as provided in section 334-60.4(b)(7) unless 18 the subject waived notice pursuant to section 334-60.4(a) or the 19 court determines that the interests of justice require that the 20 hearing continue without adjournment or continuance.

## 2025-1936 SB1322 SD2 SMA.docx

1 The time and form of the procedure incident to hearing (b) 2 the issues in the petition shall be provided by court rule. 3 Unless the hearing is waived, the judge shall hear the petition 4 as soon as possible and no later than ten days after the date 5 the petition is filed unless a reasonable delay is sought for 6 good cause shown by the subject of the petition, the subject's 7 attorney, or those persons entitled to receive notice of the 8 hearing under section 334-60.4.

9 (c) The subject of the petition shall be present at all 10 hearings unless the subject waives the right to be present, is 11 unable to attend, or creates conditions that make it impossible 12 to conduct [the] a hearing in a reasonable manner as determined 13 by the judge. A waiver is valid only upon acceptance by the 14 court following a judicial determination that the subject understands the subject's rights and is competent to waive them, 15 16 or is unable to participate. If the subject is unable to 17 participate, the judge shall appoint a guardian ad litem or a 18 temporary guardian as provided in article V of chapter 560, to 19 represent the subject throughout the proceedings.

20 (d) Hearings may be held at any convenient place within
21 the circuit. <u>Unless the court determines personal appearance is</u>

2025-1936 SB1322 SD2 SMA.docx 

1 <u>necessary, hearings may be conducted by video conferencing.</u> The
2 subject of the petition, any interested party, or the court on
3 its own motion may request a hearing in another circuit because
4 of convenience to the parties, witnesses, or the court or
5 because of the [individual's] subject's mental or physical
6 condition.

7 (e) The [attorney general, the attorney general's deputy, 8 special-deputy, or appointee] department of the attorney general 9 shall present the case for a petitioner for hearings convened 10 under this chapter, [except that the attorney general, the 11 attorney general's deputy, special deputy, or appointee need not 12 participate in or be present at a hearing whenever] unless a 13 petitioner [or some other appropriate person] has retained 14 private counsel who will be present in court and will present to 15 the court the case for involuntary hospitalization.

(f) Counsel for the subject of the petition shall be allowed adequate time for investigation of the matters at issue and for preparation[7] and shall be permitted to present the evidence that the counsel believes necessary to a proper disposition of the proceedings, including evidence as to alternatives to inpatient hospitalization.

## 2025-1936 SB1322 SD2 SMA.docx

Page 25

## **S.B. NO.** <sup>1322</sup> s.d. <sup>2</sup>

(g) No individual may be found to require treatment in a 1 2 psychiatric facility unless at least one [physician, advanced 3 practice registered nurse, ] qualified psychiatric examiner or 4 psychologist who has personally examined the individual testifies in person at the hearing. This testimony may be 5 waived by the subject of the petition. If the subject of the 6 petition [has refused] refuses to be examined by a [licensed] 7 8 physician, advanced practice registered nurse, ] qualified 9 psychiatric examiner or psychologist, the subject may be 10 examined by a court-appointed [licensed physician, advanced practice registered nurse, ] qualified psychiatric examiner or 11 psychologist. If the subject refuses to be examined and there 12 13 is sufficient evidence to believe that the allegations of the 14 petition are true, the court may make a temporary order 15 committing the subject to a psychiatric facility for a period of 16 no more than five days for the purpose of a diagnostic 17 examination [and evaluation]. The subject's refusal to be 18 examined shall be treated as a denial that the subject is 19 mentally ill or suffering from substance abuse. Nothing in this 20 section shall limit the [individual's] subject's privilege 21 against self-incrimination.

## 2025-1936 SB1322 SD2 SMA.docx

(h) The subject of the petition in a hearing under this
 section has the right to secure an independent [medical or
 psychological evaluation] examination and present evidence
 thereon.

(i) If after hearing all relevant evidence, including the
result of any diagnostic examination ordered by the court, the
court finds that [an individual] a subject of a petition is not
a person requiring medical, psychiatric, psychological, or other
rehabilitative treatment or supervision, the court shall order
that the [individual] subject be discharged if the [individual]
subject has been hospitalized prior to the hearing.

12 (j) If the court finds that the criteria for involuntary 13 hospitalization under section 334-60.2(1) has been met beyond a 14 reasonable doubt and that the criteria under [sections] section 15 334-60.2(2) and [334-60.2(3)] (3) have been met by clear and 16 convincing evidence, the court may issue an order to any law 17 enforcement officer to [deliver] transport the subject of the 18 order to a facility that has agreed to admit the subject as an 19 involuntary patient, or if the subject is already a patient in a 20 psychiatric facility, authorize the facility to retain the patient for treatment for a period of ninety days unless sooner 21

## 2025-1936 SB1322 SD2 SMA.docx

Page 27

#### **S.B. NO.** <sup>1322</sup> S.D. 2

1 discharged. The court may also authorize the involuntary administration of medication, where the subject has an existing 2 3 order for assisted community treatment  $[\tau]$  issued pursuant to 4 part VIII of this chapter  $\tau$  relating to assisted community 5 treatment,] and in accordance with the treatment prescribed by 6 that [prior] existing order. Notice of the subject's commitment 7 and the facility name and location where the subject will be 8 committed shall be provided to those persons entitled to notice 9 pursuant to section 334-60.4. An order of commitment shall 10 specify which of those persons served with notice pursuant to 11 section 334-60.4, together with such other persons as the court 12 may designate, shall be entitled to receive any subsequent 13 notice of intent to discharge, transfer, or recommit. The court 14 shall forward to the Hawaii criminal justice data center all 15 orders of involuntary civil commitment or information from all 16 orders of involuntary civil commitment, as requested by the 17 Hawaii criminal justice data center, which in turn shall forward 18 the information to the Federal Bureau of Investigation, or its 19 successor agency, for inclusion in the National Instant Criminal Background Check System database. The orders or information 20 21 shall also be maintained by the Hawaii criminal justice data

## 2025-1936 SB1322 SD2 SMA.docx

## **S.B. NO.** $^{1322}_{S.D. 2}$

center for disclosure to and use by law enforcement officials 1 for the purpose of firearms permitting, licensing, or 2 registration pursuant to chapter 134. This subsection shall 3 4 apply to all involuntary civil commitments without regard to the date of the involuntary civil commitment. 5 6 [(k) - The court may find that the subject of the petition is an incapacitated or protected person, or both, under article 7 V-of chapter 560, and may appoint a guardian or conservator, or 8 9 both, for-the subject under the terms and conditions as the 10 court-shall-determine. 11 (1) (k) Persons entitled to notice [are] pursuant to this section shall be also entitled to be present in the courtroom 12 for the hearing and to receive a copy of the hearing transcript 13 or recording, unless the court determines that the interests of 14 15 justice require otherwise." SECTION 9. Section 334-60.7, Hawaii Revised Statutes, is 16 17 amended to read as follows: 18 "§334-60.7 Notice of intent to discharge. (a) When the administrator, the administrator's deputy, or the attending 19 20 physician of a psychiatric facility contemplates discharge of an 21 involuntary patient because of expiration of the court order for

### 2025-1936 SB1322 SD2 SMA.docx

Page 29

# S.B. NO. $^{1322}_{S.D. 2}$

1	commitment or because the patient is no longer a proper subject
2	for commitment, as determined by the criteria for involuntary
3	hospitalization in section 334-60.2, the administrator, the
4	administrator's deputy, or the attending physician shall provide
5	notice of intent to discharge, or if the patient voluntarily
6	agrees to further hospitalization, the administrator, the
7	administrator's deputy, or the attending physician shall provide
8	notice of the patient's admission to voluntary inpatient
9	treatment. The following requirements and procedures shall
10	apply:
11	(1) The notice and a certificate of service shall be filed
12	with the family court and served on those persons whom
13	the order of commitment specifies as entitled to
14	receive notice, by mail at the person's last known
15	address. [Notice] If the commitment resulted directly
16	from legal proceedings under chapter 704 or 706,
17	notice shall also be sent to the prosecuting attorney
18	of the county from which the person was originally
19	committed, by facsimile or electronically, for the
20	sole purpose of victim notification; and

2025-1936 SB1322 SD2 SMA.docx

1	(2)	Any person specified as entitled to receive notice may
2		waive this right in writing with the psychiatric
3		facility[ <del>;</del>
4	<del>(3)</del>	If no objection is filed within five calendar days of
5		mailing the notice, the administrator or attending
6		physician of the psychiatric facility shall discharge
7		the patient or accept the patient for voluntary
8		inpatient treatment;
9	<del>(4)</del>	If any person-specified as entitled to receive notice
10		files a written objection, with a certificate of
11		service, to the discharge or to the patient's
12		admission to voluntary inpatient treatment on the
13		grounds that the patient is a proper subject for
14		commitment, the family court shall conduct a hearing
15		as soon as possible, prior to the termination of the
16		current commitment order, to determine if the patient
17		still meets the criteria for involuntary
18		hospitalization in section 334-60.2. The person
19		filing the objection shall also notify the psychiatric
20		facility by telephone on the date the objection is
21		filed;

2025-1936 SB1322 SD2 SMA.docx

Page 31

1	<del>(5)</del> -	If the family court finds that the patient does not
2		meet the criteria for involuntary hospitalization in
3		section 334-60.2, the court shall issue an order of
4		discharge from the commitment; and
5	<del>(6)</del>	If the family court finds that the patient does meet
6		the criteria for involuntary hospitalization in
7		section 334-60.2, the court shall issue an order
8		denying discharge from the commitment].
9	(b)	For civil commitments that do not result directly from
10	legal pro	ceedings under [ <del>chapters</del> ] <u>chapter</u> 704 [ <del>and</del> ] <u>or</u> 706,
11	when the	administrator, the administrator's deputy, or the
12	attending	physician of a psychiatric facility contemplates
13	discharge	of an involuntary patient, the administrator, the
14	administr	ator's deputy, or the attending physician [may] shall
15	assess wh	ether an assisted community treatment plan is indicated
16	pursuant	to section 334-123 and, if so indicated, may
17	communica	te with an aftercare provider as part of discharge
18	planning,	as appropriate."
19	SECT	ION 10. Section 334-76, Hawaii Revised Statutes, is
20	amended t	o read as follows:

2025-1936 SB1322 SD2 SMA.docx

Page 32

1	"§33	4-76 Discharge from custody. (a) Subject to any
2	special r	equirements of law as provided in sections 704-406,
3	704-411,	and 706-607 or elsewhere, with respect to patients
4	committed	on court order from a criminal proceeding, the
5	administr	ator of a psychiatric facility, the administrator's
6	deputy, o	r the attending physician, pursuant to section
7	334-60.7,	shall:
8	(1)	Send a notice of intent to discharge or notice of the
9		patient's admission to voluntary inpatient treatment
10		to those persons specified in the order of commitment
11		as entitled to receive notice of intent to discharge,
12		by mail at their last known address; and
13	(2)	Send a notice of intent to discharge or notice of the
14		patient's admission to voluntary inpatient treatment
15		to the prosecuting attorney of the county from which
16		the person was originally committed, by facsimile or
17		electronically $[-]$ ; provided that the commitment
18		directly resulted from legal proceedings under
19		chapter 704 or 706.
20	(b)	The administrator $[or]_{,}$ the <u>administrator's</u> deputy_ or
21	the physi	cian assuming medical responsibility for the patient

2025-1936 SB1322 SD2 SMA.docx 

Page 33

1 shall discharge an involuntary patient when the patient is no 2 longer a proper subject for commitment, as determined by the 3 criteria for involuntary hospitalization in section 334-60.2. 4 (c) Nothing in this section shall preclude a psychiatric 5 facility from accepting for voluntary inpatient treatment, in 6 accordance with the procedures in section 334-60.1, a patient 7 for whom the facility contemplates discharge pursuant to section 8 334-60.7 and who voluntarily agrees to further hospitalization 9 after the period of commitment has expired or where the patient 10 is no longer a proper subject for commitment." 11 SECTION 11. Section 334-121, Hawaii Revised Statutes, is amended to read as follows: 12 13 "§334-121 Criteria for assisted community treatment. A 14 person] An individual may be ordered to obtain assisted 15 community treatment if the family court finds, based on the 16 professional opinion of a [psychiatrist or advanced practice 17 registered nurse with prescriptive authority and who holds an 18 accredited national certification in an advanced practice 19 registered nurse psychiatric specialization, ] qualified 20 psychiatric examiner, that:

2025-1936 SB1322 SD2 SMA.docx

# **S.B. NO.** $^{1322}_{S.D. 2}$

1	(1)	The [ <del>person</del> ] <u>individual</u> is mentally ill or suffering
2		<pre>from substance abuse;</pre>
3	(2)	The [ <del>person</del> ] <u>individual</u> is unlikely to live safely in
4		the community without available supervision, is now in
5		need of treatment in order to prevent a relapse or
6		deterioration that would predictably result in the
7		[ <del>person</del> ] <u>individual</u> becoming imminently dangerous to
8		self or others, and the [ <del>person's</del> ] <u>individual's</u>
9		current mental status or the nature of the [ <del>person's</del> ]
10		individual's disorder limits or negates the [person's]
11		individual's ability to make an informed decision to
12		voluntarily seek or comply with recommended treatment;
13	(3)	The [ <del>person</del> ] individual has a:
14		(A) Mental illness that has caused that [ <del>person</del> ]
15		individual to refuse needed and appropriate
16		mental health services in the community; or
17		(B) History of lack of adherence to treatment for
18		mental illness or substance abuse that resulted
19		in the [ <del>person</del> ] <u>individual</u> becoming dangerous to
20		self or others and that now would predictably

2025-1936 SB1322 SD2 SMA.docx

1	result in the [ <del>person</del> ] <u>individual</u> becoming
2	imminently dangerous to self or others; and
3	(4) Considering less intrusive alternatives, assisted
4	community treatment is essential to prevent the danger
5	posed by the [ <del>person,</del> ] <u>individual,</u> is medically
6	appropriate, and is in the [ <del>person's</del> ] <u>individual's</u>
7	medical interests."
8	SECTION 12. Section 334-121.5, Hawaii Revised Statutes, is
9	amended to read as follows:
10	"\$334-121.5 Examination for assisted community treatment
11	indication. A [licensed psychiatrist or advanced practice
12	registered nurse with prescriptive authority and who holds an
13	accredited national certification in an advanced practice
14	registered nurse psychiatric specialization] qualified
15	psychiatric examiner associated with the [licensed] psychiatric
16	facility where [a person] a patient is located who was committed
17	to involuntary hospitalization, delivered for emergency
18	examination or emergency hospitalization, or voluntarily
19	admitted to inpatient treatment at a psychiatric facility
20	pursuant to part IV shall, before the [person's] patient's
21	discharge, examine the [ <del>person</del> ] <u>patient</u> to determine whether an

2025-1936 SB1322 SD2 SMA.docx

Page 36

#### **S.B. NO.** <sup>1322</sup> S.D. 2

assisted community treatment plan is indicated pursuant to this 1 2 part. If a plan is indicated, the [psychiatrist or advanced 3 practice registered nurse] qualified psychiatric examiner shall prepare the certificate specified by section 334-123. The 4 5 department of the attorney general shall assist with the 6 preparation and filing of any petition brought pursuant to 7 section 334-123 and with the presentation of the case at any 8 related court proceedings; provided that, if the petitioner is a private provider or other private individual, the petitioner may 9 10 decline the assistance. The psychiatric facility may notify 11 another mental health program for assistance with the coordination of care in the community for the person. Nothing 12 13 in this section shall delay the appropriate discharge of a [person] patient from the psychiatric facility after the 14 15 examination for assisted community treatment indication has been 16 completed."

17 SECTION 13. Section 334-122, Hawaii Revised Statutes, is 18 amended as follows:

19 1. By adding two new definitions to be appropriately20 inserted and to read:

2025-1936 SB1322 SD2 SMA.docx

**S.B. NO.** <sup>1322</sup> S.D. 2

1	""Assisted community treatment provider" means a mental
2	health provider, which may include a qualified psychiatric
3	examiner or a mental health program, that is or will be
4	responsible, in accordance with an assisted community treatment
5	order, for the coordination, management, or administration of a
6	subject of the order's treatment.
7	"Mental health program" means a hospital, psychiatric
8	facility, clinic, or other facility providing mental health
9	treatment to individuals suffering from mental illness or
10	substance abuse."
11	2. By amending the definition of "assisted community
12	treatment" to read:
13	""Assisted community treatment" includes medication
14	specifically authorized by court order; individual or group
15	therapy; day or partial day programming activities; services and
16	training, including educational and vocational activities;
17	supervision of living arrangements; and any other services
18	prescribed to either alleviate the [ <del>person's</del> ] <u>subject of the</u>
19	order's disorder or disability, maintain or maximize
20	semi-independent functioning, or prevent further deterioration
21	that may reasonably be predicted to result in the need for

2025-1936 SB1322 SD2 SMA.docx

Page 37

hospitalization or more intensive or restrictive levels of care 1 in the community or incarceration for criminal behavior." 2 3. By amending the definition of "subject of the order" to 3 4 read: 5 ""Subject of the order" means [a person] an individual who 6 has been ordered by the court to obtain assisted community 7 treatment." 8 4. By amending the definition of "subject of the petition" 9 to read: 10 ""Subject of the petition" means the [person] individual who, under a petition filed under section 334-123, is alleged to 11 12 meet the criteria for assisted community treatment." 13 5. By repealing the definition of "advanced practice 14 registered nurse". [""Advanced practice registered nurse" means a registered 15 16 nurse licensed to practice in this State who: 17 (1) Has met the qualifications set forth in chapter 457 18 and this part; 19 (2) Because of advanced education and specialized clinical 20 training, is authorized to assess, screen, diagnose,

2025-1936 SB1322 SD2 SMA.docx

1		order, utilize, or perform medical, therapeutic,	
2		preventive, or corrective measures;	
3	<del>(3)</del>	Holds an accredited national certification in an	
4		advanced-practice registered nurse psychiatric	
5		specialization; and	
6	-(4)-	Holds prescriptive authority pursuant to section 457-	
7		<del>8.6.</del> "]	
8	6.	By repealing the definition of "treating psychiatrist".	
9	[" <u>"</u> T	reating psychiatrist" means the psychiatrist who is	
10	responsible for the management and supervision of a person's		
11	treatment under order of the court."]		
12	SECT	ION 14. Section 334-123, Hawaii Revised Statutes, is	
13	amended b	y amending subsections (c) and (d) to read as follows:	
14	"(c)	The petition may be accompanied by a certificate of a	
15	[ <del>licensed</del>	-psychiatrist or advanced practice registered nurse	
16	with prescriptive-authority and who holds an accredited national		
17	certification-in-an-advanced practice registered nurse		
18	<del>psychiatr</del>	ic specialization] qualified psychiatric examiner who	
19	has exami	ned the subject of the petition in person within twenty	
20	calendar	days before the filing of the petition. For purposes	
21	of the pe	tition, an examination shall be considered valid so	



#### **S.B. NO.** <sup>1322</sup> S.D. 2

1 long as the [licensed psychiatrist or advanced practice 2 registered nurse with prescriptive authority and who holds an 3 accredited national certification in an advanced practice 4 registered nurse psychiatric specialization] qualified 5 psychiatric examiner has obtained enough information from the subject of the petition and has had face-to-face contact to 6 7 reach a diagnosis of the subject of the petition, and to express 8 a professional opinion concerning the same, even if the subject 9 of the petition is not fully cooperative. If the petitioner 10 believes that further [evaluation] examination is necessary before treatment, the petitioner may request further 11 12 [evaluation.] examination. 13 The petition shall include the name, address, and (d) telephone number of at least one of the following persons in the 14 15 following order of priority: the subject of the petition's spouse or reciprocal beneficiary, legal parents, adult children, 16 [and] surrogate, or legal guardian[, if-one has been appointed]. 17 If the subject of the petition has no living spouse or 18 19 reciprocal beneficiary, legal parent, adult [children,] child, 20 surrogate, or legal guardian, or if none can be found, the 21 petition shall include the name, address, and telephone number

### 2025-1936 SB1322 SD2 SMA.docx

**S.B. NO.**  $^{1322}_{S.D. 2}$ 

1	of at least one of the subject's closest adult relatives, if any	
2	can be found. The petition shall also include the name of a	
3	proposed assisted community treatment provider."	
4	SECTION 15. Section 334-124, Hawaii Revised Statutes, is	
5	amended to read as follows:	
6	"\$334-124 Hearing date. The family court shall set a	
7	hearing date on a petition, and any subsequent hearing dates for	
8	the petition, as soon as possible[ $\cdot$ ] but no later than ten days	
9	after the filing of the petition. A hearing on the petition may	
10	be continued pending further examination of the subject of the	
11	petition, for the appointment of a guardian ad litem, or for	
12	good cause."	
13	SECTION 16. Section 334-125, Hawaii Revised Statutes, is	
14	amended to read as follows:	
15	1. By amending subsection (a) to read:	
16	"(a) Notice of the hearing <u>under this part</u> shall be:	
17	(1) Served personally on the subject of the petition	
18	pursuant to family court rules;	
19	(2) Served personally or by certified or registered mail,	
20	return receipt requested, deliverable to the addressee	
21	only, to as many as are known to the petitioner of the	

2025-1936 SB1322 SD2 SMA.docx

1		subject's spouse or reciprocal beneficiary, legal
2		[parents,] parent, adult [children,] child, surrogate,
3		and legal guardian[ <del>, if one has been appointed</del> ]. If
4		the subject of the petition has no living spouse or
5		reciprocal beneficiary, legal parent, adult
6		[ <del>children,</del> ] <u>child, surrogate,</u> or legal guardian, or if
7		none can be found, notice of the hearing shall be
8		served on at least one of the subject's closest adult
9		relatives, if any can be found;
10	(3)	Served on the guardian ad litem appointed for the
11		subject of the petition [ <del>or the subject's existing</del>
12		guardian, if the court determines the existence of
13		one;] as provided in section 334-123.5;
14	(4)	Served on the attorney for the subject of the
15		petition, if applicable; [ <del>and</del> ]
16	(5)	Served on the assisted community treatment provider
17		proposed in the petition, unless the petitioner is
18		also the proposed assisted community treatment
19		provider; and
20	[ <del>(5)</del> ]	(6) Given to other persons as the court may
21		designate."

2025-1936 SB1322 SD2 SMA.docx

1	2. By amending subsection (c) to read:
2	"(c) Notice [ <del>of all subsequent hearings shall be served in</del>
3	accordance with subsections (a) and (b), and in accordance with
4	all applicable family court rules relating to service of notice,
5	including-that-service need not be made on parties in default
6	for failure to appear.] to the subject of the petition's spouse
7	or reciprocal beneficiary, legal parents, adult children, or
8	closest adult relative may be waived if the subject is an adult
9	and requests that they not be notified."
10	SECTION 17. Section 334-126, Hawaii Revised Statutes, is
11	amended by amending subsection (g) to read as follows:
12	"(g) No subject of the petition shall be ordered to
13	receive assisted community treatment unless at least one
14	[psychiatrist or advanced practice registered nurse with
15	prescriptive authority and who holds an accredited national
16	certification in an advanced practice registered nurse
17	psychiatric specialization testifies in person at the hearing]
18	qualified psychiatric examiner who has personally [assessed]
19	$\operatorname{\underline{examined}}$ the subject[ $_{m{ au}}$ ] within a reasonable time before the
20	filing of the petition [ <del>up to the time when the psychiatrist or</del>
21	advanced practice registered nurse with prescriptive authority



#### **S.B. NO.** <sup>1322</sup> S.D. 2

1 and who holds an accredited national certification in an 2 advanced practice registered nurse psychiatric specialization] 3 provides oral testimony at [court.] the hearing. The [testimony 4 of the psychiatrist or advanced practice registered nurse with 5 prescriptive authority and who holds an accredited national 6 certification in an advanced practice registered nurse 7 psychiatric specialization] qualified psychiatric examiner shall [state] provide the facts [which] that support the allegation 8 9 that the subject meets all the criteria for assisted community 10 treatment, provide a written treatment plan, which shall include 11 non-mental health treatment if appropriate, provide the 12 rationale for the recommended treatment, and identify the 13 [designated mental health program responsible for the 14 coordination of care.] assisted community treatment provider. 15 If the recommended assisted community treatment includes 16 medication, the testimony [of] provided by the [psychiatrist or 17 advanced practice registered nurse with prescriptive authority 18 and who holds an accredited national certification in an 19 advanced practice registered nurse psychiatric specialization] 20 qualified psychiatric examiner shall describe the types or 21 classes of medication [which] that should be authorized, and



#### S.B. NO. <sup>1322</sup> S.D. 2

1 describe the physical and mental beneficial and detrimental 2 effects of [such] the medication." 3 SECTION 18. Section 334-127, Hawaii Revised Statutes, is amended to read as follows: 4 5 "\$334-127 Disposition. (a) If, after [hearing] 6 considering all relevant evidence, including the results of any 7 diagnostic examination ordered by the family court, the family 8 court finds that the subject of the petition does not meet the 9 criteria for assisted community treatment, the family court 10 shall dismiss the petition. Notice of the dismissal shall be 11 provided to those persons entitled to notice pursuant to section 12 334-125. 13 (b)

If, after hearing all relevant evidence, including the 14 results of any diagnostic examination ordered by the family 15 court, the family court finds that the criteria for assisted 16 community treatment under section 334-121(1) have been met 17 beyond a reasonable doubt and that the criteria under section 18 334-121(2) to (4) have been met by clear and convincing 19 evidence, the family court shall order the subject to obtain 20 assisted community treatment for a period of no more than two 21 years. The written treatment plan submitted pursuant to

### 2025-1936 SB1322 SD2 SMA.docx

#### **S.B. NO.** <sup>1322</sup> S.D. 2

section 334-126(g) shall be attached to the order and made a
 part of the order.

3 If the family court finds by clear and convincing evidence 4 that the beneficial mental and physical effects of recommended 5 medication outweigh the detrimental mental and physical effects, 6 if any, the order may authorize types or classes of medication 7 to be included in treatment at the discretion of the [treating psychiatrist or advanced practice registered nurse with 8 9 prescriptive authority and who holds an accredited national 10 certification in an advanced practice registered nurse psychiatric specialization.] assisted community treatment 11 12 provider. 13 The court order shall [also] state who should receive 14 notice of intent to discharge early in the event that the 15 [treating psychiatrist or advanced practice registered nurse

16 with prescriptive authority and who holds an accredited national

17 certification in an advanced practice registered nurse

18 psychiatric specialization] assisted community treatment

19 provider determines, before the end of the court ordered period

20 of treatment, that the subject should be discharged early from

21 assisted community treatment.



# **S.B. NO.** $^{1322}_{S.D. 2}$

1	Notice of the order shall be provided to the director, the
2	[interested party who filed the petition,] petitioner, and those
3	persons entitled to notice pursuant to section 334-125.
4	(c) The family court shall also designate on the order the
5	[treating psychiatrist or advanced practice registered nurse
6	with prescriptive authority and who holds an accredited national
7	certification in an advanced practice registered nurse
8	psychiatric specialization who is to be responsible for the
9	management and supervision of the subject's treatment, or shall
10	assign an administrator of a designated mental health program
11	to, in turn, designate the treating psychiatrist or advanced
12	practice registered nurse with prescriptive authority and who
13	holds an accredited national certification in an advanced
14	practice registered nurse psychiatric specialization during the
15	treatment-period without court approval, and may designate
16	either a publicly employed psychiatrist or advanced practice
17	registered nurse with prescriptive authority and who holds an
18	accredited national certification in an advanced practice
19	registered nurse psychiatric specialization, or a private
20	psychiatrist or advanced practice registered nurse with
21	prescriptive authority and who holds an accredited national



# **S.B. NO.** $^{1322}_{S.D. 2}$

1	certification in an advanced practice registered nurse
2	psychiatric specialization; provided that the private
3	psychiatrist or advanced practice registered nurse with
4	prescriptive authority and who holds an accredited national
5	certification in an advanced practice registered nurse
6	psychiatric specialization shall agree to the designation. The
7	order for assisted community treatment shall be subject to the
8	Health Care Privacy Harmonization Act, chapter 323B.] assisted
9	community treatment provider.
10	(d) Nothing in this section shall preclude the subject's
11	stipulation to the continuance $[+]of[+]$ an existing court
12	order."
13	SECTION 19. Section 334-129, Hawaii Revised Statutes, is
14	amended to read as follows:
15	"§334-129 Failure to comply with assisted community
16	treatment. (a) A [treating psychiatrist or advanced practice
17	registered nurse with prescriptive authority and who holds an
18	accredited national certification in an advanced practice
19	registered nurse psychiatric specialization] qualified
20	psychiatric examiner may prescribe or administer to the subject
21	of the order reasonable and appropriate medication or

### 2025-1936 SB1322 SD2 SMA.docx

### **S.B. NO.** $^{1322}_{S.D. 2}$

1	medications, if specifically authorized by $[\pm he]$ <u>a</u> court order,
2	and treatment that is consistent with accepted medical standards
3	and the [ <del>family</del> ] court order, including the written treatment
4	plan submitted pursuant to section $334-126(g)[-], and in$
5	accordance with the procedures described in subsection (b).
6	(b) [No subject of the order shall be physically forced to
7	take medication under a family court order for assisted
8	community treatment unless the subject is within an emergency
9	department or admitted to a hospital, subsequent to the date of
10	the current assisted community treatment order.] A qualified
11	psychiatric examiner may administer medication or medications
12	specifically authorized by a court order to a subject of the
13	order over objection of the subject during emergency examination
14	or hospitalization under part IV, subpart A, of this chapter, or
15	while committed for involuntary hospitalization under part IV,
16	subpart C, of this chapter.
17	(c) A subject of the order may be transported to $[\frac{1}{2}]$
18	designated mental health program, or a hospital emergency
19	department,] a psychiatric facility or other facility designated
20	by the director for failure to comply with an order for assisted
21	community treatment via the following methods:



1	(1)	By an interested party with the consent of the subject
2		of the order; or
3	(2)	In accordance with section [ <del>334-59.</del> ] <u>334-B, 334-C, or</u>
4		<u>334-D.</u>
5	(d)	The [designated mental health program's treating
6	<del>psychiatr</del>	ist or advanced practice registered nurse with
7	prescript	ive authority and who holds an accredited national
8	<del>certifica</del>	tion in an advanced practice registered nurse
9	<del>psychiatr</del>	ic specialization or designee of the psychiatrist or
10	advanced	practice registered nurse with prescriptive authority
11	and who h	olds an accredited national certification in an
12	advanced	practice-registered-nurse-psychiatric-specialization]
13	assisted	community treatment provider shall make all reasonable
14	efforts t	o solicit the subject's compliance with the prescribed
15	treatment	. If the subject fails or refuses to comply after the
16	efforts t	o solicit compliance, the [ <del>treating psychiatrist or</del>
17	advanced-	practice registered nurse with prescriptive authority
18	<del>and who h</del>	olds an accredited national certification in an
19	advanced	practice registered nurse psychiatric specialization]
20	assisted	community treatment provider shall [assess whether the
21	<del>subject o</del>	f the order meets criteria for involuntary



#### **S.B. NO.** <sup>1322</sup> S.D. 2

1	hospitalization under part IV of this chapter, and] proceed with
2	[the admission] emergency transportation pursuant to section
3	[ <del>334-59(a)(2) or (3); provided that the refusal of treatment</del>
4	shall not, by itself, constitute a basis for involuntary
5	hospitalization.] 334-C or 334-D.
6	(e) Notice of any transport or [admission] hospitalization
7	under this section shall be provided pursuant to
8	section [ <del>334-59.5.</del> ] <u>334-G.</u> "
9	SECTION 20. Section 334-130, Hawaii Revised Statutes, is
10	amended to read as follows:
11	"\$334-130 Period of assisted community treatment. (a)
12	[ <del>The</del> ] <u>Unless a family court orders otherwise, the</u> assisted
13	community treatment order shall continue to apply to the
14	subject, for the duration specified in the order, regardless of
15	whether the treatment setting changes.
16	(b) A subject of [ <del>assisted community treatment is</del> ] <u>the</u>
17	order shall be automatically and fully discharged at the end of
18	the family court ordered period of treatment[ $_{ au}$ ] pursuant to an
19	assisted community treatment order, a period of no more than two
20	and a second for the second readers have abtained for
	years, unless a new family court order has been obtained [ <del>as</del>



1 Nothing in this section shall preclude the subject's (C) 2 stipulation to the continuance [+]of[+] an existing court 3 order." 4 SECTION 21. Section 334-131, Hawaii Revised Statutes, is 5 amended by amending subsection (a) to read as follows: "(a) 6 When the [treating psychiatrist or advanced practice 7 registered nurse with prescriptive authority and who holds an 8 accredited national certification in an advanced practice 9 registered nurse psychiatric specialization] assisted community 10 treatment provider contemplates discharge for a subject of the 11 order because of the imminent expiration of the court order or 12 because the subject of the order is no longer a proper subject 13 for assisted community treatment, as determined by the criteria 14 in section 334-121, the [treating psychiatrist or advanced 15 practice registered nurse with prescriptive authority and who 16 holds an accredited national certification in an advanced 17 practice registered nurse psychiatric specialization] assisted 18 community treatment provider shall provide notice of intent to 19 discharge." 20 SECTION 22. Section 334-161, Hawaii Revised Statutes, is 21 amended by amending subsection (a) to read as follows:

2025-1936 SB1322 SD2 SMA.docx 

## **S.B. NO.** <sup>1322</sup> S.D. 2

1	"(a) A patient who has been committed to a psychiatric
2	facility for involuntary hospitalization or who is in the
3	custody of the director and residing in a psychiatric facility
4	may be ordered to receive treatment over the patient's
5	objection, including the taking or application of medication, if
6	the court, or administrative [panel] decision-maker through the
7	administrative authorization process established pursuant to
8	section 334-162, finds that:
9	(1) The patient suffers from a physical or mental disease,
10	disorder, or defect;
11	(2) The patient is imminently dangerous to self or others;
12	(3) The proposed treatment is medically appropriate; and
13	(4) After considering less intrusive alternatives,
14	treatment is necessary to forestall the danger posed
15	by the patient."
16	SECTION 23. Section 334-162, Hawaii Revised Statutes, is
17	amended by amending subsection (a) to read as follows:
18	"(a) A patient who is in the custody of the director and
19	in a psychiatric facility may be ordered to receive medical
20	treatment over the patient's objection through an administrative

### 2025-1936 SB1322 SD2 SMA.docx

1 authorization process that includes the following due process 2 safequards: The facility shall give notice to the patient of the 3 (1) authorization process and the reasons for initiating 4 5 the process; The administrative [panel shall consist of three 6 (2) 7 members] decision-maker who is a psychiatrist with relevant clinical training and experience, and who 8 9 [are] is not involved with the current treatment of 10 the patient[;], shall, after considering all relevant 11 evidence, determine whether the criteria under 12 section 334-161 are met; 13 The patient shall have the right to attend the (3) 14 hearing, receive assistance from an advisor, cross 15 examine witnesses, and present testimony, exhibits, 16 and witnesses; and 17 The patient shall have the right to appeal the (4) decision of the administrative [panel.] 18 19 decision-maker." SECTION 24. Section 334E-2, Hawaii Revised Statutes, is 20 21 amended by amending subsection (a) to read as follows:

#### 2025-1936 SB1322 SD2 SMA.docx

## S.B. NO. $^{1322}_{S.D.2}$

1	"(a)	Any patient in a psychiatric facility shall be	
2	afforded	rights, and any psychiatric facility shall provide the	
3	rights to	all patients; provided that when a patient is not able	
4	to exerci	se the patient's rights, the patient's legal guardian	
5	or legal	representative shall have the authority to exercise the	
6	same on b	ehalf of the patient. The rights shall include but not	
7	be limited to the following:		
8	(1)	Access to written rules and regulations with which the	
9		patient is expected to comply;	
10	(2)	Access to the facility's grievance procedure or to the	
11		department of health as provided in section 334-3;	
12	(3)	Freedom from reprisal;	
13	(4)	Privacy, respect, and personal dignity;	
14	(5)	A humane environment;	
15	(6)	Freedom from discriminatory treatment based on race,	
16		color, creed, national origin, age, and sex;	
17	(7)	A written treatment plan based on the individual	
18		patient;	
19	(8)	Participation in the planning of the patient's	
20		treatment plan;	

2025-1936 SB1322 SD2 SMA.docx

#### **S.B. NO.** <sup>1322</sup> S.D. 2

1	(9)	Refusal of treatment except in emergency situations or
2		when a court order or an administrative order pursuant
3		to chapter 334, part <u>VIII or</u> X, has been issued;
4	(10)	Refusal to participate in experimentation;
5	(11)	The choice of physician if the physician chosen
6		agrees;
7	(12)	A qualified, competent staff;
8	(13)	A medical examination before initiation of non-
9		emergency treatment;
10	(14)	Confidentiality of the patient's records;
11	(15)	Access to the patient's records;
12	(16)	Knowledge of rights withheld or removed by a court or
13		by law;
14	(17)	Physical exercise and recreation;
15	(18)	Adequate diet;
16	(19)	Knowledge of the names and titles of staff members
17		with whom the patient has frequent contact;
18	(20)	The right to work at the facility and fair
19		compensation for work done; provided that work is
20		available and is part of the patient's treatment plan;

2025-1936 SB1322 SD2 SMA.docx

1	(21)	Visitation rights, unless the patient poses a danger
2		to self or others; provided that where visitation is
3		prohibited, the legal guardian or legal representative
4		shall be allowed to visit the patient upon request;
5	(22)	Uncensored communication;
6	(23)	Notice of and reasons for an impending transfer;
7	(24)	Freedom from seclusion or restraint, except:
8		(A) When necessary to prevent injury to self or
9		others;
10		(B) When part of the treatment plan; or
11		(C) When necessary to preserve the rights of other
12		patients or staff;
13	(25)	Disclosure to a court, at an involuntary civil
14		commitment hearing, of all treatment procedures which
15		have been administered prior to the hearing; and
16	(26)	Receipt by the patient and the patient's guardian or
17		legal guardian, if the patient has one, of this
18		enunciation of rights at the time of admission."
19	SECT	ION 25. Section 586-5.5, Hawaii Revised Statutes, is
20	amended b	y amending subsection (a) to read as follows:

### 2025-1936 SB1322 SD2 SMA.docx

#### **S.B. NO.** <sup>1322</sup> S.D. 2

1 "(a) If, after hearing all relevant evidence, the court 2 finds that the respondent has failed to show cause why the order 3 should not be continued and that a protective order is necessary 4 to prevent domestic abuse or a recurrence of abuse, the court 5 may order that a protective order be issued for a further fixed 6 reasonable period as the court deems appropriate, including, in 7 the case where a protective order restrains any party from contacting, threatening, or physically abusing a minor, a fixed 8 9 reasonable period extending to a date after the minor has 10 reached eighteen years of age.

The protective order may include all orders stated in the 11 12 temporary restraining order and may provide for further relief 13 as the court deems necessary to prevent domestic abuse or a 14 recurrence of abuse, including orders establishing temporary 15 visitation and custody with regard to minor children of the 16 parties and orders to either or both parties to participate in 17 domestic violence intervention services. If the court finds 18 that the party meets the requirements under 19 section  $[\frac{334-59(a)(2)}{7}]$  334-C, the court further may order that 20 the party be taken to the nearest facility for emergency

21 examination and treatment."



SECTION 26. Section 334-59, Hawaii Revised Statutes, is
 repealed.

3 ["\$334-59 Emergency examination and hospitalization. (a)
4 Initiation of proceedings. An emergency admission may be
5 initiated as follows:

6	<del>(1)</del>	If a law enforcement officer has reason to believe
7		that a person is imminently dangerous to self or
8		others, the officer shall call for assistance from a
9		mental health emergency worker designated by the
10		director; provided that if a law enforcement officer
11		is unable to reach a mental health emergency worker
12		telephonically or has reason to believe the situation
13		to be unstable to a degree that a delay of greater
14		than two minutes would result in serious harm to the
15		individual, others, or property, the law enforcement
16		officer may act to gain control of the individual.
17		Once the law enforcement officer has gained control of
18		the individual, the law enforcement officer shall call
19		for assistance from a mental health emergency worker
20		designated by the director; provided that the law
21		enforcement officer shall document why the situation



## **S.B. NO.** <sup>1322</sup> S.D. <sup>2</sup>

1	necessitated that the law enforcement officer gain
2	control of the individual. Upon determination by the
3	mental health emergency worker that the person is
4	imminently dangerous to self or others, the person
5	shall be transported by ambulance or other suitable
6	means to a licensed psychiatric facility or other
7	facility designated by the director for further
8	evaluation and possible emergency hospitalization. If
9	a crisis intervention officer has probable cause to
10	believe that a person is imminently dangerous to self
11	or others, the crisis intervention officer shall call
12	a mental health emergency worker to determine if the
13	person shall be transported by ambulance or other
14	suitable means to a behavioral health crisis center
15	designated by the director-as determined by a mental
16	health emergency worker. A law enforcement officer
17	may also take into custody and transport to any
18	facility designated by the director any person
19	threatening or attempting suicide. The law
20	enforcement officer shall make application for the
21	examination, observation, and diagnosis of the person



1		in custody. The application shall state or shall be
2		accompanied by a statement of the circumstances under
3		which the person was taken into custody and the
4		reasons therefor, which shall be transmitted with the
5		person to a physician, advanced practice registered
6		nurse, or psychologist at the facility.
7		As used in this paragraph, "crisis intervention
8		officer" has the same meaning as defined in section
9		<del>353C-1;</del>
10	<del>(2)</del>	Upon written or oral application of any licensed
11		physician, advanced practice registered nurse,
12		psychologist, attorney, member of the clergy, health
13		or social service professional, or any state or county
14		employee in the course of employment, a judge-may
15		issue an ex parte order orally, but shall reduce the
16		order to writing by the close of the next court day
17		following the application, stating that there is
18		probable cause to believe the person is mentally ill
19		or suffering from substance abuse, is imminently
20		dangerous to self or others and in need of care or
21		treatment, or-both, giving the findings upon which the



1		conclusion is based. The order shall direct that a
2		law enforcement officer or other suitable individual
3		take the person into custody and deliver the person to
4		a designated mental health program, if subject to an
5		assisted community treatment order issued pursuant to
6		part VIII, or to the nearest facility designated by
7		the director for cmergency examination and treatment,
8		or both. The ex parte order shall be made a part of
9		the patient's clinical record. If the application is
10		oral, the person making the application shall reduce
11		the application to writing and shall submit the same
12		by noon of the next court day to the judge who issued
13		the oral ex parte order. The written application
14		shall be executed subject to the penalties of perjury
15		but need not be sworn to before a notary public; or
16	<del>-(3)-</del>	Any licensed physician, advanced practice registered
17		nurse, physician assistant, or psychologist who has
18		examined a person and has reason to believe the person
19		<del>is:</del>
20		(A) Mentally ill or suffering from substance abuse;
21		(B) Imminently dangerous to self or others; and

2025-1936 SB1322 SD2 SMA.docx

## **S.B. NO.** <sup>1322</sup> S.D. <sup>2</sup>

1	(C) In need of care or treatment,
2	may-direct-transportation, by ambulance or other
3	suitable means, to a licensed psychiatric facility or
4	other facility designated by the director for further
5	evaluation and possible emergency hospitalization. A
6	licensed physician, an advanced practice registered
7	nurse, or a physician assistant may administer
8	treatment as is medically necessary, for the person's
9	safe transportation. A licensed psychologist may
10	administer treatment as is psychologically necessary.
11	(b) Emergency examination. A patient who is delivered for
12	emergency examination and treatment to a psychiatric facility or
13	a behavioral health crisis center shall be provided an
14	examination, which shall include a screening to-determine
15	whether the criteria for involuntary hospitalization listed in
16	section 334-60.2 persists, by a licensed physician, medical
17	resident under the supervision of a licensed physician, or
18	advanced practice registered nurse without unnecessary delay,
19	and shall be provided such treatment as is indicated by good
20	medical practice If, after the examination, screening, and
21	treatment, the licensed physician, medical resident under the

### 2025-1936 SB1322 SD2 SMA.docx

#### S.B. NO. <sup>1322</sup> S.D. 2

1	supervision of a licensed physician, or advanced practice
2	registered nurse determines that the involuntary hospitalization
3	criteria persist, then a psychiatrist or advanced practice
4	registered nurse who has prescriptive authority and who holds an
5	accredited national certification in an advanced practice
6	registered nurse psychiatric specialization shall further
7	examine the patient to diagnose the presence or absence of a
8	mental illness or substance use disorder, further assess the
9	risk that the patient may be dangerous to self or others, and
10	assess whether or not the patient needs to be hospitalized. If
11	it is determined that hospitalization is not needed, an
12	examination pursuant to section 334-121.5 shall be completed.
13	(c) Release from emergency examination. If, after
14	examination, the licensed physician, psychiatrist, or advanced
15	practice registered nurse with prescriptive authority and who
16	holds an accredited national certification in an advanced
17	practice registered nurse psychiatric specialization determines
18	that the involuntary hospitalization criteria set forth in
19	section 334-60.2 are not met or do not persist and the
20	examination pursuant to section 334-121.5, where required, has
21	been completed, the patient shall be discharged expediently,

### 2025-1936 SB1322 SD2 SMA.docx

# **S.B. NO.** <sup>1322</sup> S.D. 2

1	unless the patient is under criminal charges, in which case the
2	patient shall be returned to the custody of a law enforcement
3	officer.
4	(d) Emergency hospitalization. If the psychiatrist or
5	advanced practice registered nurse with prescriptive authority
6	and who holds an accredited national certification in an
7	advanced-practice registered nurse psychiatric specialization
8	who performs the emergency examination has reason to believe
9	that the patient is:
10	(1) Mentally ill or suffering from substance abuse;
11	(2) Imminently-dangerous to self or others; and
12	(3) In need of care or treatment, or both,
13	the psychiatrist or advanced practice registered nurse with
14	prescriptive authority and who holds an accredited national
15	certification in an advanced practice registered nurse
16	psychiatric specialization shall direct that the patient be
17	hospitalized on an emergency basis or cause the patient to be
18	transferred to another psychiatric facility or other facility
19	designated by the director for emergency hospitalization, or
20	both. The patient shall have the right immediately upon
21	admission to telephone the patient's guardian or a family member

### 2025-1936 SB1322 SD2 SMA.docx

## **S.B. NO.** <sup>1322</sup> S.D. 2

1	including a reciprocal beneficiary, or an adult friend and an
2	attorney. If the patient declines to exercise that right, the
3	staff of the facility shall inform the adult patient of the
4	right-to waive notification to the family, including a
5	reciprocal beneficiary, and shall make reasonable efforts to
6	ensure that the patient's guardian or family, including a
7	reciprocal beneficiary, is notified of the emergency admission
8	but the patient's family, including a reciprocal beneficiary,
9	need not be notified if the patient is an adult and requests
10	that there be no notification. The patient shall be allowed to
11	confer with an attorney in private.
12	(c) Release from emergency hospitalization. If at any
13	time-during the-period of emergency hospitalization the treating
14	physician determines that the patient no longer meets the
15	criteria for emergency hospitalization and the examination
16	pursuant to section 334-121.5 has been completed, the physician
17	shall expediently discharge the patient. If the patient is
18	under-criminal charges, the patient shall be returned to the
19	custody of a law enforcement officer. In any event, the patient
20	shall be released within forty-eight hours of the patient's
21	admission-to a psychiatric facility or other facility designated

### 2025-1936 SB1322 SD2 SMA.docx

### S.B. NO. $^{1322}_{S.D.2}$

1	by the director, unless the patient voluntarily agrees to
2	further hospitalization, or a proceeding for court-ordered
3	evaluation or hospitalization, or both, is initiated as provided
4	in section 334-60.3. If that time expires on a Saturday,
5	Sunday, or holiday, the time for initiation is extended to the
6	close of the next court day. Upon initiation of the
7	proceedings, the facility shall be authorized to detain the
8	patient until further order of the court."]
9	SECTION 27. Section 334-59.5, Hawaii Revised Statutes, is
10	repealed.
11	[" <del>[\$334-59.5 Notice of emergency transportation,</del>
12	examinations, and hospitalizations. Notice of an individual's
12 13	examinations, and hospitalizations. Notice of an individual's emergency admission, examination, and hospitalization under this
13	emergency admission, examination, and hospitalization under this
13 14	emergency admission, examination, and hospitalization under this chapter may be given to at least one of the following persons in
13 14 15	emergency admission, examination, and hospitalization under this chapter may be given to at least one of the following persons in the following order of priority: the individual's spouse or
13 14 15 16	emergency admission, examination, and hospitalization under this chapter may be given to at least one of the following persons in the following order of priority: the individual's spouse or reciprocal beneficiary, legal-parents, adult children, legal
13 14 15 16 17	emergency admission, examination, and hospitalization under this chapter may be given to at least one of the following persons in the following order of priority: the individual's spouse or reciprocal beneficiary, legal-parents, adult children, legal guardian, if one has been appointed, or if none can be found,
13 14 15 16 17 18	emergency admission, examination, and hospitalization under this chapter may be given to at least one of the following persons in the following order of priority: the individual's spouse or reciprocal beneficiary, legal-parents, adult children, legal guardian, if one has been appointed, or if none can be found, the closest adult relative, as long as the individual:



#### **S.B. NO.** <sup>1322</sup> S.D. 2

1	infer from the circumstances based on the exercise of
2	professional judgment that the individual does not
3	<del>object; or</del>
4	(3) Is incapacitated or an emergency circumstance exists
5	and the health care provider determines based on the
6	exercise of professional judgment that doing so is in
7	the best interest of the individual."]
8	SECTION 28. This Act does not affect rights and duties
9	that matured, penalties that were incurred, and proceedings that
10	were begun before its effective date.
11	SECTION 29. If any provision of this Act or the
12	application thereof to any person or circumstance is held
13	invalid, the invalidity does not affect other provisions or
14	applications of the Act that can be given effect without the
15	invalid provision or application, and to this end the provisions
16	of this Act are severable.
17	SECTION 30. In codifying the new sections added by
18	section 2 and referenced in sections 2, 19, and 25 of this Act,
19	the revisor of statutes shall substitute appropriate section
20	numbers for the letters used in designating the new sections in
21	this Act.

# 2025-1936 SB1322 SD2 SMA.docx

SECTION 31. Statutory material to be repealed is bracketed
 and stricken. New statutory material is underscored.

3 SECTION 32. This Act shall take effect on December 31,

**4** 2050.



#### Report Title:

Mental Health; Admission to Psychiatric Facility; Emergency Transportation; Emergency Examination; Emergency Hospitalization; Involuntary Hospitalization; Assisted Community Treatment; Administration of Treatment Over the Patient's Objection; Limited Liability; Confidentiality

#### Description:

Clarifies and expands the circumstances and procedures available for emergency transportation, examination, and hospitalization under chapter 334. Provides limits on liability for state and local governments and professionals during mental health emergency procedures while performing their duties in the course of employment. Expands the notice requirements for an emergency hospitalization to include an individual's health care surrogate and clarifies when notice to family members can be waived. Removes the authority of the family court to appoint a legal guardian in a proceeding for involuntary hospitalization. Removes the requirement that psychiatric facilities wait for a response on a notice of intent to discharge an involuntary hospitalization patient prior to discharge. Clarifies the circumstances under which a subject of an order for assisted community treatment can be administered medication over the subject's objection. Provides limits on liability for an assisted community treatment provider. Modifies the administrative authorization of medical treatment over the patient's objection to be reviewed by a single decision-maker who is a psychiatrist. Effective 12/31/2050. (SD2)

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