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A BILL FOR AN ACT

RELATING TO MENTAL HEALTH.

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

1 SECTION 1. The legislature finds that the State's mental 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, enable the State and mental 12 health providers to provide compassionate assistance to 13 individuals suffering from mental illness or substance abuse 14 when they need it the most.

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

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1	(1)	Requiring the department of health to submit annual
2		reports to the legislature on emergency
3		transportations and assisted community treatment
4		petitions and orders, based on information provided by
5		service providers;
6	(2)	Clarifying emergency transportation, examination, and
7		hospitalization procedures for individuals who may be
8		mentally ill or suffering from substance abuse and are
9		imminently dangerous to self or others;
10	(3)	Requiring treatment providers to provide relevant
11		treatment information to the department of the
12		attorney general, upon the department's request, for
13		purposes of preparing a petition for assisted
14		community treatment;
15	(4)	Amending the procedures for involuntary
16		hospitalizations and assisted community treatment
17		petitions; and
18	(5)	Clarifying the circumstances under which a subject of
19		an order for assisted community treatment can be
20		administered medication over the subject's objection.

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1	SECTION 2. Chapter 334, Hawaii Revised Statutes, is
2	amended by adding a new section to part I to be appropriately
3	designated and to read as follows:
4	" <u>§334-A</u> Annual report; emergency transportations; assisted
5	community treatment. Each provider of services involved in an
6	emergency transportation initiated by a law enforcement officer,
7	court order, or health care provider; assisted community
8	treatment petition; or assisted community treatment order
9	pursuant to part IV or VIII, and the department of the attorney
10	general, shall provide the necessary data to the department to
11	complete the report under this section. Based on this data, the
12	department shall submit an annual report to the legislature no
13	later than thirty days prior to the convening of each regular
14	session.
15	The report shall include, at a minimum, an evaluation of
16	the effectiveness of the strategies employed by each provider
17	operating pursuant to parts IV and VIII in reducing homelessness
18	and hospitalization of persons subject to emergency
19	transportation or assisted community treatment and in reducing
20	involvement with local law enforcement by persons subject to
21	assisted community treatment orders. The evaluation and report

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1	shall als	o include any other measures identified by the
2	departmen	t regarding persons subject to assisted community
3	treatment	petitions and orders and all of the following, based
4	on informa	ation that is available:
5	(1)	The number of persons brought to each of the
6		facilities operated by service providers through
7		emergency transportation;
8	(2)	The number of persons involuntarily hospitalized
9		through emergency transportation;
10	(3)	The number of persons subject to assisted community
11		treatment petitions and orders;
12	(4)	The identity of the petitioner for an assisted
13		community treatment order or, if applicable, the
14		petitioner's relationship to the person subject to the
15		assisted community treatment petition;
16	(5)	The number of persons who are represented by legal
17		counsel at all stages of assisted community treatment
18		proceedings;
19	(6)	The number of persons under assisted community
20		treatment petitions or orders in contact with local
21		law enforcement, and the extent to which local and

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1		state incarceration of persons subject to an assisted
2		community treatment order has been reduced or avoided;
3	(7)	The number of persons subject to an assisted community
4		treatment order participating in employment services
5		programs, including competitive employment;
6	(8)	The number of days of hospitalization reduced or
7		avoided for persons subject to an assisted community
8		treatment order;
9	(9)	The diagnosis and prescribed treatment for persons
10		subject to an assisted community treatment order,
11		including the type, intensity, and frequency of
12		treatment of persons subject to an assisted community
13		treatment order;
14	(10)	Adherence to prescribed treatment by persons subject
15		to an assisted community treatment order;
16	(11)	Other indicators of successful engagement, if any, by
17		persons subject to an assisted community treatment
18		order;
19	(12)	Victimization of persons subject to an assisted
20		community treatment order;

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1	(13)	Violent behavior of persons subject to an assisted
2		community treatment order;
3	(14)	Substance abuse by persons subject to an assisted
4		community treatment order;
5	(15)	Extent to which enforcement mechanisms are used
6		pursuant to an assisted community treatment order,
7		when applicable;
8	(16)	Social functioning of persons subject to an assisted
9		community treatment order;
10	(17)	Skills in independent living of persons subject to an
11		assisted community treatment order; and
12	(18)	Satisfaction with services provided pursuant to an
13		assisted community treatment order, both by the
14		persons receiving the services and, when relevant, by
15		their families."
16	SECT	ION 3. Chapter 334, Hawaii Revised Statutes, is
17	amended as	s follows:
18	1. 1	By adding a new subpart to part IV to be designated as
19	subpart A	and to read:
20		"A. Emergency Procedures

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1	§334	-B Emergency procedures. The emergency procedures in
2	this subp	part shall consist of emergency transportation,
3	emergency	v examination, and emergency hospitalization for
4	individua	als who may be mentally ill or suffering from substance
5	abuse and	d imminently dangerous to self or others.
6	§334	-C Emergency transportation initiated by a law
7	enforceme	ent officer. (a) When a law enforcement officer has a
8	reasonabl	e suspicion that an individual is imminently dangerous
9	to self c	or others and needs to be detained for emergency
10	examinati	on, the law enforcement officer shall contact a mental
11	health em	ergency worker; provided that the law enforcement
12	officer m	ay temporarily detain the individual at law enforcement
13	facilitie	s if the law enforcement officer:
14	(1)	Is unable to reach a mental health emergency worker
15		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 the
20		earliest time possible; and

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(4) Documents the reasons why the situation necessitated
 that the individual be detained.
 If the mental health emergency worker determines that the
 individual is mentally ill or suffering from substance abuse and
 is imminently dangerous to self or others, the law enforcement
 officer shall detain the individual for transportation to a
 facility for an emergency examination.

8 (b) When a crisis intervention officer has probable cause 9 to believe that an individual is mentally ill or suffering from 10 substance abuse and is imminently dangerous to self or others, 11 the crisis intervention officer shall detain the individual for 12 transportation to a facility for an emergency examination. The 13 crisis intervention officer shall contact a mental health 14 emergency worker to determine the type of facility where the 15 individual shall be transported.

(c) Any individual detained under this section shall be transported directly to a psychiatric facility or other facility designated by the director, as determined by a mental health emergency worker; provided that if a medical emergency occurs during transport, the individual shall be transported to the nearest emergency department. A law enforcement officer shall

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1	make an application for the emergency examination of the
2	individual. The application shall state in detail the
3	circumstances under which and reasons why the individual was
4	taken into custody. The application shall be transmitted with
5	the individual to the psychiatric facility or other facility
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
9	officer" has the same meaning as defined in section 353C-1.
10	§334-D Emergency transportation initiated by a court
11	order. (a) Upon written or oral application of any licensed
11 12	order . (a) Upon written or oral application of any licensed physician, advanced practice registered nurse, psychologist,
12	physician, advanced practice registered nurse, psychologist,
12 13	physician, advanced practice registered nurse, psychologist, attorney, member of the clergy, health or social service
12 13 14	physician, advanced practice registered nurse, psychologist, attorney, member of the clergy, health or social service professional, or any state or county employee in the course of
12 13 14 15	physician, advanced practice registered nurse, psychologist, attorney, member of the clergy, health or social service professional, or any state or county employee in the course of employment, a judge may issue a written or oral ex parte order:
12 13 14 15 16	<pre>physician, advanced practice registered nurse, psychologist, attorney, member of the clergy, health or social service professional, or any state or county employee in the course of employment, a judge may issue a written or oral ex parte order: (1) Stating that there is probable cause that the</pre>
12 13 14 15 16 17	<pre>physician, advanced practice registered nurse, psychologist, attorney, member of the clergy, health or social service professional, or any state or county employee in the course of employment, a judge may issue a written or oral ex parte order: (1) Stating that there is probable cause that the individual is:</pre>

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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 health emergency worker of the written or oral ex parte order 9 10 and, when possible, shall coordinate the transport of the 11 individual with the emergency worker. 12 (b) If an application under subsection (a) was made 13 orally, the person who made the application shall reduce the 14 application to writing and submit it to the judge who issued the 15 ex parte order by noon of the next court day after the order was 16 issued. The written application shall be made under penalty of 17 law but need not be sworn to before a notary public. If the 18 judge issued an ex parte order orally, the judge shall reduce 19 the oral order to writing by the close of the next court day 20 after the order was issued. The written ex parte order shall be 21 transmitted with the individual to the psychiatric facility or

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

3 §334-E Emergency transportation initiated by a health care provider. (a) Any licensed physician, advanced practice 4 5 registered nurse, physician assistant, licensed clinical social 6 worker, or psychologist who has examined an individual and 7 determines that the individual is mentally ill or suffering from substance abuse and is imminently dangerous to self or others 8 9 shall contact a mental health emergency worker. Upon 10 confirmation by the mental health emergency worker that the 11 individual is imminently dangerous to self or others, the 12 individual shall be transported by ambulance, law enforcement, 13 or other suitable means as identified by the examining health 14 care provider, to a licensed psychiatric facility or other 15 facility designated by the director for an emergency 16 examination. The licensed physician, advance practice 17 registered nurse, physician assistant, licensed clinical social 18 worker, or psychologist shall provide a written statement of 19 circumstances and reasons necessitating the emergency 20 examination. The written statement shall be transmitted with the individual to the psychiatric facility or other facility 21

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

3 (b) Any individual who is subject to an order for assisted 4 community treatment and fails to comply with the order for 5 assisted community treatment, despite reasonable efforts made by 6 a designated assisted community treatment provider, as defined 7 in section 334-122, to solicit compliance, may be transported to 8 a psychiatric facility or other facility designated by the 9 director for an emergency examination if it is in the clinical judgment of a licensed physician, advanced practice registered 10 11 nurse, physician assistant, licensed clinical social worker, or 12 psychologist that the individual may be in need of emergency 13 hospitalization pursuant to section 334-G. At the direction of 14 the examining health care provider, a law enforcement officer 15 may detain and transport the individual by ambulance or other 16 suitable means to a psychiatric facility or other facility 17 designated by the director. The examining health care provider 18 shall provide a written statement of circumstances and reasons 19 explaining why the individual may be in need of emergency 20 hospitalization. The written statement shall be transmitted 21 with the individual to the psychiatric facility or other

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

3 (c) The health care provider, when possible, shall
4 coordinate the transport of the individual with the mental
5 health emergency worker.

6 (d) The examining health care provider shall also provide
7 a copy of the written statement required under this section to
8 the department within five business days.

9 **§334-F Emergency examination.** (a) A licensed physician, 10 medical resident under the supervision of a licensed physician, 11 or advanced practice registered nurse may conduct an initial 12 examination and screening of the patient, and administer 13 treatment as indicated by good medical practice; provided that 14 the patient is further examined by a qualified psychiatric 15 examiner. A qualified psychiatric examiner shall conduct an 16 emergency examination of a patient transported under 17 section 334-C, 334-D, or 334-E without unnecessary delay and 18 provide the patient with treatment as indicated by good medical 19 practice; provided that the emergency examination shall include 20 a screening to determine whether the patient meets the criteria 21 for involuntary hospitalization as provided in section 334-60.2.



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1 (b) If, following an emergency examination of a patient 2 under subsection (a), a qualified psychiatric examiner 3 determines that the criteria for involuntary hospitalization do 4 not exist, the patient shall be discharged expeditiously; 5 provided that if the patient is not under an order for assisted community treatment, a qualified psychiatric examiner shall 6 7 conduct an examination pursuant to section 334-121.5 before the 8 discharge. A patient under criminal charges shall be returned 9 to the custody of a law enforcement officer.

10 \$334-G Emergency hospitalization. (a) If, following an
11 emergency examination pursuant to section 334-F(a), a qualified
12 psychiatric examiner determines that the criteria for
13 involuntary hospitalization exist, the patient shall be
14 hospitalized on an emergency basis or transferred to another
15 psychiatric facility or other facility designated by the
16 director for emergency hospitalization.

17 (b) The patient admitted under subsection (a) shall be 18 released within seventy-two hours of the patient's admission to 19 a psychiatric facility or other facility designated by the 20 director, unless:

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1 The patient voluntarily agrees to further (1)2 hospitalization; or 3 (2) A proceeding for court-ordered evaluation or hospitalization is initiated as provided in section 4 5 334-60.3. 6 If the seventy-two-hour time period expires on a Saturday, 7 Sunday, or holiday, the time for initiation shall be extended to 8 the close of the next court day. Upon initiation of the 9 proceeding, the facility may detain the patient until further 10 order of the court. 11 If at any time during the period of emergency (C) 12 hospitalization a qualified psychiatric examiner determines that 13 a patient no longer meets the criteria for emergency 14 hospitalization, the patient shall be discharged expeditiously; 15 provided that if the patient is not under an order for assisted 16 community treatment, a qualified psychiatric examiner shall 17 conduct an examination pursuant to section 334-121.5 before the 18 discharge. A patient under criminal charges shall be returned 19 to the custody of a law enforcement officer.

20 (d) The patient shall have the right, immediately upon21 emergency hospitalization, to telephone an attorney and the

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patient's surrogate, guardian, family member including a
 reciprocal beneficiary, or adult friend. The patient shall be
 allowed to confer with an attorney in private.

4 \$334-H Notice of emergency transportation, examination, 5 and hospitalization. Notice of an individual's emergency 6 transportation, examination, and hospitalization under this 7 subpart may be given to at least one of the following persons in 8 the following order of priority: the individual's spouse or 9 reciprocal beneficiary, legal parents, adult children, 10 surrogate, legal guardian, or if none can be found, the closest 11 adult relative, as long as the individual: 12 (1) Has capacity to make health care decisions and

12 (1) has capacity to make health care decisions and
13 consents that notice may be given to at least one of
14 the persons listed in this section;

15 (2) Is given the opportunity to object and does not
16 object, or the health care provider can reasonably
17 infer from the circumstances based on the exercise of
18 professional judgment that the individual does not
19 object; or

20 (3) Is incapacitated or an emergency circumstance exists,21 and the health care provider determines, based on the



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1	exercise of professional judgment, that giving
2	notification is in the best interest of the
3	individual.
4	The staff of the facility shall make reasonable efforts to
5	ensure that the patient's family, including a reciprocal
6	beneficiary, is notified of the emergency hospitalization,
7	unless the patient is an adult and waives notification."
8	2. By designating section 334-60.1 as subpart B and
9	inserting a title before section 334-60.1 to read:
10	"B. Voluntary Admission"
11	3. By designating sections 334-60.2 to 334-60.7 as subpart
12	C and inserting a title before section 334-60.2 to read:
13	"C. Involuntary Hospitalization"
14	4. By designating sections 334-61 and 334-62 as subpart D
15	and inserting a title before section 334-61 to read:
16	"D. General Provisions"
17	SECTION 4. Chapter 334, Hawaii Revised Statutes, is
18	amended by adding a new section to part VIII to be appropriately
19	designated and to read as follows:
20	" <u>\$334-I</u> Records and disclosure of information. (a) A
21	treatment provider who provided or is providing medical,



1	psychiatric, therapeutic, or social services treatment to an
2	individual shall provide relevant treatment information, if
3	available, to the department of the attorney general upon the
4	department's request for the purpose of preparing a petition for
5	assisted community treatment. The treatment information may
6	include a certificate issued pursuant to section 334-123(c), a
7	treatment plan prepared pursuant to section 334-126(g), records
8	related to actions or proceedings pursuant to part IV, records
9	relating to the individual's treatment history, and other
10	records deemed relevant by the individual's treatment provider.
11	(b) The petitioner of an assisted community treatment
12	order, department of the attorney general, and family court
13	shall disclose an assisted community treatment order to state
14	and county law enforcement agencies, an assisted community
15	treatment provider, or any other entity necessary to carry out
16	
	the terms of the assisted community treatment order."
17	the terms of the assisted community treatment order." SECTION 5. Section 334-1, Hawaii Revised Statutes, is
17 18	
	SECTION 5. Section 334-1, Hawaii Revised Statutes, is

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1	""Qualified psychiatric examiner" means a licensed
2	psychiatrist or advanced practice registered nurse with
3	prescriptive authority who holds an accredited national
4	certification in an advanced practice registered nurse
5	psychiatric specialization.
6	"Surrogate" means a person appointed under:
7	(1) A power of attorney for health care to make a health
8	care decision for the individual who made the
9	appointment; or
10	(2) Law or court order to make health care decisions for
11	an individual."
12	2. By amending the definition of "patient" to read:
13	""Patient" means [a person] <u>an individual</u> under
14	observation, care, or treatment at a psychiatric facility[\cdot] or
15	other facility designated by the director."
16	3. By amending the definition of "treatment" to read:
17	""Treatment" means the broad range of emergency, out-
18	patient, intermediate, domiciliary, and inpatient services and
19	care, including diagnostic evaluation, medical, psychiatric,
20	psychological, and social service care, vocational
21	rehabilitation, psychosocial rehabilitation, career counseling,

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1	and other special services [which] <u>that</u> may be extended to
2	[handicapped persons.] an individual with a disability."
3	SECTION 6. Section 334-60.2, Hawaii Revised Statutes, is
4	amended to read as follows:
5	"§334-60.2 Involuntary hospitalization criteria. [A
6	person] An individual may be committed to a psychiatric facility
7	for involuntary hospitalization[$_{ au}$] if the court finds:
8	(1) That the [person] <u>individual</u> is mentally ill or
9	suffering from substance abuse;
10	(2) That the [person] <u>individual</u> is imminently dangerous
11	to self or others; and
12	(3) That the [person] <u>individual</u> is in need of care or
13	treatment, or both, and there is no suitable
14	alternative available through existing facilities and
15	programs [which] <u>that</u> would be less restrictive than
16	hospitalization."
17	SECTION 7. Section 334-60.3, Hawaii Revised Statutes, is
18	amended to read as follows:
19	"\$334-60.3 Initiation of proceeding for involuntary
20	hospitalization. (a) Any person may file a petition alleging
21	that [a person located in the county] <u>an individual</u> meets the



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1	criteria for commitment to a psychiatric facility[-] as provided
2	in section 334-60.2. The petition shall be filed in the county
3	where the individual resides and executed subject to [the]
4	penalties [of perjury] provided by law but need not be sworn to
5	before a notary public. The [attorney general, the attorney
6	general's deputy, special deputy, or appointee designated to
7	present the case] department of the attorney general shall
8	assist the petitioner [to state] in stating the substance of the
9	petition in plain and simple language. The petition may be
10	accompanied by a certificate of the [licensed physician,
11	advanced practice registered nurse,] qualified psychiatric
12	examiner or psychologist who has examined the [person]
13	individual within two days before [submission of] the
14	petition[$_{ au}$] is filed, unless the [person] individual whose
15	commitment is sought has refused to submit to medical or
16	psychological examination, in which case the fact of refusal
17	shall be alleged in the petition. The certificate shall set
18	forth the signs and symptoms relied upon by the [physician,
19	advanced practice registered nurse,] qualified psychiatric
20	examiner or psychologist to determine the [person] individual is
21	in need of [care or] treatment[, or both,] and whether the

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[person] individual is capable of realizing and making a
 rational decision with respect to the [person's] individual's
 need for treatment. If the petitioner believes that further
 [evaluation] examination is necessary before commitment, the
 petitioner may request [such] further [evaluation.] examination.

6 (b) In the event the subject of the petition has been 7 given an examination, evaluation, or treatment in a psychiatric 8 facility within five days before submission of the petition, and 9 hospitalization is recommended by the staff of the facility, the 10 petition may be accompanied by the administrator's certificate 11 in lieu of a [physician's] gualified psychiatric examiner's or 12 psychologist's certificate.

13 (C) The petition shall include the name, address, and 14 telephone number of at least one of the following persons in the 15 following order of priority: the subject of the petition's 16 spouse or reciprocal beneficiary, legal parents, adult children, 17 surrogate, and legal guardian [, if one has been appointed]. If 18 the subject of the petition has no living spouse or reciprocal 19 beneficiary, legal parent, adult [children,] child, surrogate, 20 or legal guardian, or if none can be found, notice shall be

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served on at least one of the subject's closest adult relatives,
 if any can be found."

3 SECTION 8. Section 334-60.4, Hawaii Revised Statutes, is 4 amended by amending subsections (a) to (c) to read as follows: 5 "(a) The court shall set a hearing on the petition and 6 notice of the time and place of the hearing shall be served in 7 accordance with, and to those persons specified in, a current 8 order of commitment. If there is no current order of 9 commitment, notice of the hearing shall be served personally on 10 the subject of the petition and served personally or by 11 certified or registered mail, return receipt requested, 12 deliverable to the addressee only, on the subject's spouse or 13 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 16 beneficiary, legal parent, adult [children,] child, surrogate, 17 or legal guardian, or if none can be found, notice of the 18 hearing shall be served on at least one of the subject's closest 19 adult relatives, if any can be found. Notice of the hearing to 20 the subject of the petition's spouse or reciprocal beneficiary, 21 legal parents, adult children, or closest adult relative may be

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1	waived if	the subject of the petition is an adult and requests	
2	that thes	e persons not be notified. Notice of the hearing shall	
3	also be s	erved on the public defender, attorney for the subject	
4	of the pe	tition, or other court-appointed attorney [as the case	
5	may be].	If the subject of the petition is a minor, notice of	
6	the hearing shall also be served upon the person who has had the		
7	principal	care and custody of the minor during the sixty days	
8	preceding	the date of the petition, if that person can be found	
9	within th	e State. Notice shall also be given to other persons	
10	as the court may designate.		
11	(b)	The notice shall include the following:	
12	(1)	The date, time, and place of the hearing $[\tau]_i$ a clear	
13		statement of the purpose of the proceedings and of	
14		possible consequences to the subject[\dot{r}] of the	
15		petition; and a statement of the legal standard upon	
16		which commitment is authorized;	
17	(2)	A copy of the petition;	
18	(3)	A [written_notice,] statement, in plain and simple	
19		language, that the subject may waive the hearing by	
20			

20 voluntarily agreeing to hospitalization[τ] or $_{\underline{\prime}}$ with

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

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1 a nominee is known at the time the petition is filed, 2 the identity of the nominee shall be disclosed]. 3 (c) If the subject of the petition executes and files a 4 waiver of the hearing, upon acceptance by the court following a 5 court determination that the [person] subject understands the [person's] subject's rights and is competent to waive them, the 6 7 court shall order the subject to be committed to a facility that 8 has agreed to admit the subject as an involuntary patient or, if the subject is at such a facility, that the subject be retained 9 10 there." 11 SECTION 9. Section 334-60.5, Hawaii Revised Statutes, is 12 amended to read as follows: 13 "\$334-60.5 Hearing on petition. (a) The court shall 14 adjourn or continue a hearing for failure to timely notify the subject of the petition's spouse or reciprocal beneficiary, 15 legal [parents, parent, adult [children,] child, surrogate, 16 17 guardian, or relative, or other person determined by the court 18 to be entitled to notice, or for failure by the subject to 19 contact an attorney as provided in section 334-60.4(b)(7) unless

20 the subject waived notice pursuant to section 334-60.4(a) or the

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court determines that the interests of justice require that the
 hearing continue without adjournment or continuance.

3 (b) The time and form of the procedure incident to hearing 4 the issues in the petition shall be provided by court rule. 5 Unless the hearing is waived, the judge shall hear the petition 6 as soon as possible and no later than ten days after the date 7 the petition is filed unless a reasonable delay is sought for 8 good cause shown by the subject of the petition, the subject's 9 attorney, or those persons entitled to receive notice of the 10 hearing under section 334-60.4.

11 The subject of the petition shall be present at all (C)12 hearings unless the subject waives the right to be present, is 13 unable to attend, or creates conditions that make it impossible 14 to conduct [the] a hearing in a reasonable manner as determined 15 by the judge. A waiver is valid only upon acceptance by the 16 court following a judicial determination that the subject 17 understands the subject's rights and is competent to waive them, 18 or is unable to participate. If the subject is unable to 19 participate, the judge shall appoint a quardian ad litem or a 20 temporary guardian as provided in article V of chapter 560, to 21 represent the subject throughout the proceedings.

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1 (d) Hearings may be held at any convenient place within 2 the circuit. Hearings may be conducted by video conferencing 3 unless the court determines personal appearance is necessary. The subject of the petition, any interested party, or the court 4 on its own motion may request a hearing in another circuit 5 6 because of convenience to the parties, witnesses, or the court 7 or because of the [individual's] subject's mental or physical 8 condition. 9 The [attorney general, the attorney general's deputy, (e) 10 special deputy, or appointee] department of the attorney general 11 shall present the case for a petitioner for hearings convened 12 under this chapter, [except that the attorney general, the 13 attorney general's deputy, special deputy, or appointee need not participate in or be present at a hearing whenever] unless a 14 15 petitioner [or some other appropriate person] has retained 16 private counsel who will be present in court and will present to 17 the court the case for involuntary hospitalization. 18 (f) Counsel for the subject of the petition shall be 19 allowed adequate time for investigation of the matters at issue and for preparation $[\tau]$ and shall be permitted to present the 20

21 evidence that the counsel believes necessary to a proper

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disposition of the proceedings, including evidence as to
 alternatives to inpatient hospitalization.

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

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section shall limit the [individual's] subject's privilege
 against self-incrimination.

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

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



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

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

20 "\$334-60.7 Notice of intent to discharge. (a) When the
21 administrator, the administrator's deputy, or the attending

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

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

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

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1 SECTION 11. Section 334-76, Hawaii Revised Statutes, is 2 amended to read as follows: 3 "\$334-76 Discharge from custody. (a) Subject to any 4 special requirements of law as provided in sections 704-406, 5 704-411, and 706-607 or elsewhere, with respect to patients 6 committed on court order from a criminal proceeding, the 7 administrator of a psychiatric facility, the administrator's 8 deputy, or the attending physician, pursuant to section 9 334-60.7, shall: 10 (1)Send a notice of intent to discharge or notice of the 11 patient's admission to voluntary inpatient treatment 12 to those persons specified in the order of commitment as entitled to receive notice of intent to discharge, 13 14 by mail at their last known address; and 15 (2) [Send] In cases where the commitment directly resulted 16 from legal proceedings under chapter 704 or 706, send 17 a notice of intent to discharge or notice of the 18 patient's admission to voluntary inpatient treatment 19 to the prosecuting attorney of the county from which 20 the person was originally committed, by facsimile or 21 electronically.



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

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

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1	self or others and that now would predictably
2	result in the [person] individual becoming
3	imminently dangerous to self or others; and
4	(4) Considering less intrusive alternatives, assisted
5	community treatment is essential to prevent the danger
6	posed by the [person,] individual, is medically
7	appropriate, and is in the [person's] <u>individual's</u>
8	medical interests."
9	SECTION 13. Section 334-121.5, Hawaii Revised Statutes, is
10	amended to read as follows:
11	"§334-121.5 Examination for assisted community treatment
12	indication. A [licensed psychiatrist or advanced practice
13	registered nurse with prescriptive authority and who holds an
14	provedited notional contification in an advanced succession
	accredited national certification in an advanced practice
15	registered nurse-psychiatric specialization] qualified
15 16	
	registered nurse psychiatric specialization] qualified
16	registered nurse psychiatric specialization] qualified psychiatric examiner associated with the [licensed] psychiatric
16 17	registered nurse psychiatric specialization] <u>qualified</u> psychiatric examiner associated with the [licensed] psychiatric facility where a [person] <u>patient</u> is located who was committed
16 17 18	registered nurse-psychiatric specialization] <u>qualified</u> <u>psychiatric examiner</u> associated with the [licensed] psychiatric facility where a [person] <u>patient</u> is located who was committed to involuntary hospitalization, delivered for emergency

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1 discharge, examine the [person] patient to determine whether an 2 assisted community treatment plan is indicated pursuant to this 3 part. If a plan is indicated, the [psychiatrist or advanced 4 practice registered nurse] qualified psychiatric examiner shall 5 prepare the certificate specified by section 334-123. The 6 department of the attorney general shall assist with the 7 preparation and filing of any petition brought pursuant to section 334-123 and with the presentation of the case at any 8 9 related court proceedings; provided that, if the petitioner is a 10 private provider or other private individual, the petitioner may 11 decline the assistance. The psychiatric facility may notify 12 another mental health program for assistance with the 13 coordination of care in the community for the person. Nothing 14 in this section shall delay the appropriate discharge of a 15 [person] patient from the psychiatric facility after the 16 examination for assisted community treatment indication has been 17 completed."

18 SECTION 14. Section 334-122, Hawaii Revised Statutes, is 19 amended as follows:

20 1. By adding two new definitions to be appropriately21 inserted and to read:

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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 [person's] subject of the
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

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

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1 (3) Holds an accredited national certification in an 2 advanced practice registered nurse psychiatric 3 specialization; and 4 (4) Holds prescriptive authority pursuant to section 457-8.6."] 5 5. By deleting the definition of "treating psychiatrist". 6 7 [""Treating psychiatrist" means the psychiatrist who is 8 responsible for the management and supervision of a person's 9 treatment under order of the court."1 10 SECTION 15. Section 334-123, Hawaii Revised Statutes, is 11 amended by amending subsections (c) and (d) to read as follows: 12 "(C) The petition may be accompanied by a certificate of a 13 [licensed psychiatrist or advanced practice registered nurse 14 with prescriptive authority and who holds an accredited national 15 certification in an advanced practice registered nurse 16 psychiatric specialization] qualified psychiatric examiner who 17 has examined the subject of the petition in person within twenty 18 calendar days before the filing of the petition. For purposes 19 of the petition, an examination shall be considered valid so 20 long as the [licensed psychiatrist or advanced practice 21 registered nurse with prescriptive authority and who holds an





1	accredited national certification in an advanced practice
2	registered nurse psychiatric specialization] qualified
3	psychiatric examiner has obtained enough information from the
4	subject of the petition and has had face-to-face contact to
5	reach a diagnosis of the subject of the petition, and to express
6	a professional opinion concerning the same, even if the subject
7	of the petition is not fully cooperative. If the petitioner
8	believes that further [evaluation] examination is necessary
9	before treatment, the petitioner may request further
10	[evaluation.] examination.
11	(d) The petition shall include the name of a proposed
11 12	(d) The petition shall include the name of a proposed assisted community treatment provider and the name, address, and
12	assisted community treatment provider and the name, address, and
12 13	assisted community treatment provider and the name, address, and telephone number of at least one of the following persons in the
12 13 14	assisted community treatment provider and the name, address, and telephone number of at least one of the following persons in the following order of priority: the subject of the petition's
12 13 14 15	assisted community treatment provider and the name, address, and telephone number of at least one of the following persons in the following order of priority: the subject of the petition's spouse or reciprocal beneficiary, legal parents, adult children,
12 13 14 15 16	assisted community treatment provider and the name, address, and telephone number of at least one of the following persons in the following order of priority: the subject of the petition's spouse or reciprocal beneficiary, legal parents, adult children, [and] surrogate, or legal guardian[, if one has been appointed].
12 13 14 15 16 17	assisted community treatment provider and the name, address, and telephone number of at least one of the following persons in the following order of priority: the subject of the petition's spouse or reciprocal beneficiary, legal parents, adult children, [and] surrogate, or legal guardian[, if one has been appointed]. If the subject of the petition has no living spouse or

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



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

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



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

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1 describe the physical and mental beneficial and detrimental 2 effects of [such] the medication." SECTION 19. Section 334-127, Hawaii Revised Statutes, is 3 4 amended to read as follows: 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 If, after hearing all relevant evidence, including the (b) 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 assisted community treatment for a period of no more than two 20 21 years. The written treatment plan submitted pursuant to

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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 to be included in treatment at the discretion of the [treating 7 8 psychiatrist or advanced practice registered nurse with 9 prescriptive authority and who holds an accredited national 10 certification in an advanced practice registered nurse 11 psychiatric specialization.] assisted community treatment 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.

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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

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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 20. 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

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1	medications, if specifically authorized by [the] a court order,
2	and treatment that is consistent with accepted medical standards
3	and the [family] 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 or while committed
15	for involuntary hospitalization under part IV, subpart C.
16	(c) A subject of the order may be transported to [a
17	designated mental health program, or a hospital emergency
18	department, a psychiatric facility or other facility designated
19	by the director for failure to comply with an order for assisted
20	community treatment via the following methods:

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1	(1)	By an interested party with the consent of the subject
2		of the order; or
3	(2)	In accordance with section $[334-59.]$ <u>334-E(b)</u> .
4	(d)	The [designated mental health program's treating
5	psychiatr	ist or advanced practice registered nurse with
6	prescript	ive authority and who holds an accredited national
7	certifica	tion in an advanced practice registered nurse
8	psychiatr	ic specialization or designee of the psychiatrist or
9	advanced	practice registered nurse with prescriptive authority
10	and who h	olds an accredited national certification in an
11	advanced	practice registered nurse psychiatric specialization]
12	assisted	community treatment provider shall make [all]
13	reasonabl	e efforts to solicit the subject's compliance with the
14	prescribe	d treatment. If the subject fails or refuses to comply
15	after the	efforts to solicit compliance, the [treating
16	psychiatr	ist or advanced practice registered nurse with
17	prescript	ive authority and who holds an accredited national
18	certifica	tion in an advanced practice registered nurse
19	psychiatr	ic specialization] assisted community treatment
20	provider	shall [assess whether the subject of the order meets
21	criteria	for involuntary hospitalization under part IV of this



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1	chapter, and] proceed [with the admission pursuant to section
2	[334-59(a)(2) or (3);] pursuant to section 334-D or 334-E;
3	provided that the refusal of treatment shall not, by itself,
4	constitute a basis for involuntary hospitalization.
5	(e) Notice of any transport or [admission] hospitalization
6	under this section shall be provided pursuant to
7	section [334-59.5.] <u>334-H.</u> "
8	SECTION 21. Section 334-130, Hawaii Revised Statutes, is
9	amended to read as follows:
10	"§334-130 Period of assisted community treatment. (a)
11	[The] Unless a family court orders otherwise, the assisted
12	community treatment order shall continue to apply to the
13	
15	subject, for the duration specified in the order, regardless of
13	subject, for the duration specified in the order, regardless of whether the treatment setting changes.
14	whether the treatment setting changes.
14 15	whether the treatment setting changes. (b) A subject of [assisted community treatment is] the
14 15 16	<pre>whether the treatment setting changes. (b) A subject of [assisted community treatment is] the order shall be automatically and fully discharged at the end of</pre>
14 15 16 17	<pre>whether the treatment setting changes. (b) A subject of [assisted community treatment is] the order shall be automatically and fully discharged at the end of the family [court ordered] court-ordered period of treatment[7]</pre>
14 15 16 17 18	<pre>whether the treatment setting changes. (b) A subject of [assisted community treatment is] the order shall be automatically and fully discharged at the end of the family [court ordered] court-ordered period of treatment[r] pursuant to an assisted community treatment order, a period of</pre>

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1 (c) Nothing in this section shall preclude the subject's 2 stipulation to the continuance [+]of[+] an existing court 3 order." 4 SECTION 22. Section 334-131, Hawaii Revised Statutes, is 5 amended by amending subsection (a) to read as follows: 6 "(a) 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 order because of the imminent expiration of the court order or 11 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 holds an accredited national certification in an advanced 16 17 practice registered nurse psychiatric specialization] assisted 18 community treatment provider shall provide notice of intent to 19 discharge." 20 SECTION 23. Section 334-162, Hawaii Revised Statutes, is

21 amended by amending subsection (a) to read as follows:

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1 "(a) A patient who is in the custody of the director and 2 in a psychiatric facility may be ordered to receive medical 3 treatment over the patient's objection through an administrative 4 authorization process that includes the following due process 5 safequards: 6 The facility shall give notice to the patient of the (1)7 authorization process and the reasons for initiating 8 the process; 9 The administrative panel [shall consist], consisting (2)10 of three members with relevant clinical training and 11 experience, and who are not involved with the current 12 treatment of the patient[;], shall, after considering 13 all relevant evidence, determine whether the criteria 14 under section 334-161 are met; 15 (3) The patient shall have the right to attend the 16 hearing, receive assistance from an advisor, cross examine witnesses, and present testimony, exhibits, 17 18 and witnesses; and 19 (4)The patient shall have the right to appeal the 20 decision of the administrative panel."

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1	SECI	ION 24. Section 334E-2, Hawaii Revised Statutes, is
2	amended b	by amending subsection (a) to read as follows:
3	"(a)	Any patient in a psychiatric facility shall be
4	afforded	rights, and any psychiatric facility shall provide the
5	rights to	all patients; provided that when a patient is not able
6	to exerci	se the patient's rights, the patient's legal guardian
7	or legal	representative shall have the authority to exercise the
8	same on b	ehalf of the patient. The rights shall include but not
9	be limite	d to the following:
10	(1)	Access to written rules and regulations with which the
11		patient is expected to comply;
12	(2)	Access to the facility's grievance procedure or to the
13		department of health as provided in section 334-3;
14	(3)	Freedom from reprisal;
15	(4)	Privacy, respect, and personal dignity;
16	(5)	A humane environment;
17	(6)	Freedom from discriminatory treatment based on race,
18		color, creed, national origin, age, and sex;
19	(7)	A written treatment plan based on the individual
20		<pre>patient;</pre>



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

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1	(20)	The right to work at the facility and fair
2		compensation for work done; provided that work is
3		available and is part of the patient's treatment plan;
4	(21)	Visitation rights, unless the patient poses a danger
5		to self or others; provided that where visitation is
6		prohibited, the legal guardian or legal representative
7		shall be allowed to visit the patient upon request;
8	(22)	Uncensored communication;
9	(23)	Notice of and reasons for an impending transfer;
10	(24)	Freedom from seclusion or restraint, except:
11		(A) When necessary to prevent injury to self or
12		others;
13		(B) When part of the treatment plan; or
14		(C) When necessary to preserve the rights of other
15		patients or staff;
16	(25)	Disclosure to a court, at an involuntary civil
17		commitment hearing, of all treatment procedures
18		[which] that have been administered [prior to] before
19		the hearing; and

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1 (26) Receipt by the patient and the patient's guardian or 2 legal guardian, if the patient has one, of this 3 enunciation of rights at the time of admission." 4 SECTION 25. Section 586-5.5, Hawaii Revised Statutes, is 5 amended by amending subsection (a) to read as follows: 6 "(a) If, after hearing all relevant evidence, the court 7 finds that the respondent has failed to show cause why the order 8 should not be continued and that a protective order is necessary 9 to prevent domestic abuse or a recurrence of abuse, the court 10 may order that a protective order be issued for a further fixed 11 reasonable period as the court deems appropriate, including, in 12 the case where a protective order restrains any party from 13 contacting, threatening, or physically abusing a minor, a fixed 14 reasonable period extending to a date after the minor has 15 reached eighteen years of age. 16 The protective order may include all orders stated in the 17 temporary restraining order and may provide for further relief 18 as the court deems necessary to prevent domestic abuse or a recurrence of abuse, including orders establishing temporary 19

visitation and custody with regard to minor children of the 21 parties and orders to either or both parties to participate in

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20

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1 domestic violence intervention services. If the court finds 2 that the party meets the requirements under section $[334-59(a)(2)_{T}]$ 334-D, the court [further] may further 3 order that the party be taken to the nearest facility for 4 5 emergency examination and treatment." 6 SECTION 26. Section 334-59, Hawaii Revised Statutes, is 7 repealed. 8 ["\$334-59 Emergency examination and hospitalization. (a) 9 Initiation of proceedings. An emergency admission may be 10 initiated as follows: 11 (1) If a law enforcement officer has reason to believe 12 that a person is imminently dangerous to self or 13 others, the officer shall call for assistance from a 14 mental health emergency worker designated by the 15 director; provided that if a law enforcement officer 16 is unable to reach a mental health emergency worker 17 telephonically or has reason to believe the situation 18 to be unstable to a degree that a delay of greater 19 than two minutes would result in serious harm to the 20 individual, others, or property, the law enforcement 21 officer may act to gain control of the individual.

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1	Once the law enforcement officer has gained control of
2	the individual, the law enforcement officer shall call
3	for assistance from a mental health emergency worker
4	designated by the director; provided that the law
5	enforcement officer shall document why the situation
6	necessitated that the law enforcement officer gain
7	control of the individual. Upon determination by the
8	mental health emergency worker that the person is
9	imminently dangerous to self or others, the person
10	shall be transported by ambulance or other suitable
11	means to a licensed psychiatric facility or other
12	facility designated by the director for further
13	evaluation and possible emergency hospitalization. If
14	a crisis intervention officer has probable cause to
15	believe that a person is imminently dangerous to self
16	or others, the crisis intervention officer shall call
17	a mental health emergency worker to determine if the
18	person shall be transported by ambulance or other
19	suitable-means-to a behavioral health crisis center
20	designated by the director as determined by a mental
21	health emergency worker. A law enforcement officer

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1		may also take into custody and transport to any
2		facility designated by the director any person
3		threatening or attempting suicide. The law
4		enforcement officer shall make application for the
5		examination, observation, and diagnosis of the person
6		in custody. The application shall state or shall be
7		accompanied by a statement of the circumstances under
8		which the person was taken into custody and the
9		reasons therefor, which shall be transmitted with the
10		person to a physician, advanced practice registered
11		nurse, or psychologist at the facility.
12		As used in this paragraph, "crisis intervention
13		officer" has the same meaning as defined in section
14		353C-1;
15	(2)	Upon written or oral application of any licensed
16		physician, advanced practice registered nurse,
17		psychologist, attorney, member of the clergy, health
18		or social service professional, or any state or county
19		employee in the course of employment, a judge may
20		issue an ex parte order orally, but shall reduce the
21		order to writing by the close of the next court day

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1	following the application, stating that there is
2	probable cause to believe the person is mentally ill
3	or suffering from substance abuse, is imminently
4	dangerous to self or others and in need of care or
5	treatment, or both, giving the findings upon which the
6	conclusion is based. The order shall direct that a
7	law enforcement officer or other suitable individual
8	take the person into custody and deliver the person to
9	a designated mental health program, if subject to an
10	assisted community treatment order issued pursuant to
11	part VIII, or to the nearest facility designated by
12	the director for emergency examination and treatment,
13	or both. The ex parte order shall be made a part of
14	the patient's clinical record. If the application is
15	oral, the person making the application shall reduce
16	the application to writing and shall submit the same
17	by noon of the next court day to the judge who issued
18	the oral ex parte order. The written application
19	shall be executed subject to the penalties of perjury
20	but need not be sworn to before a notary public; or

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1	(3)	Any licensed physician, advanced practice registered
2		nurse, physician assistant, or psychologist who has
3		examined a person and has reason to believe the person
4		is:
5		(A) Mentally ill or suffering from substance abuse;
6		(B) Imminently dangerous to self or others; and
7		(C) In need of care or treatment,
8		may direct transportation, by ambulance or other
9		suitable means, to a licensed psychiatric facility or
10		other facility designated by the director for further
11		evaluation and possible emergency hospitalization. A
12		licensed physician, an advanced practice registered
13		nurse, or a physician assistant may administer
14		treatment as is medically necessary, for the person's
15		safe transportation. A licensed psychologist may
16		administer treatment as is psychologically necessary.
17	- (b)	Emergency examination. A patient who is delivered for
18	emergency	-examination and treatment to a psychiatric facility or
19	a behavio	ral health crisis center shall be provided an
20	examinati	on, which shall include a screening to determine
21	whether t	he criteria for involuntary hospitalization listed in



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1	section 334-60.2 persists, by a licensed physician, medical
2	resident under the supervision of a licensed physician, or
3	advanced practice registered nurse without unnecessary delay,
4	and shall be provided such treatment as is indicated by good
5	medical practice. If, after the examination, screening, and
6	treatment, the licensed physician, medical resident under the
7	supervision of a licensed physician, or advanced practice
8	registered nurse determines that the involuntary hospitalization
9	criteria persist, then a psychiatrist or advanced practice
10	registered nurse who has prescriptive authority and who holds an
11	accredited national certification in an advanced practice
12	registered nurse psychiatric specialization shall further
13	examine the patient to diagnose the presence or absence of a
14	mental illness or substance use disorder, further assess the
15	risk that the patient may be dangerous to self or others, and
16	assess whether or not the patient needs to be hospitalized. If
17	it is determined that hospitalization is not needed, an
18	examination pursuant to section 334-121.5 shall be completed.
19	(c) Release from emergency examination. If, after
20	examination, the licensed physician, psychiatrist, or advanced
21	practice registered nurse with prescriptive authority and who





1	holds an accredited national certification in an advanced
2	practice registered nurse psychiatric specialization determines
3	that the involuntary hospitalization criteria set forth in
4	section 334-60.2 are not met or do not persist and the
5	examination pursuant to section 334-121.5, where required, has
6	been completed, the patient shall be discharged expediently,
7	unless the patient is under criminal charges, in which case the
8	patient shall be returned to the custody of a law enforcement
9	officer.
10	(d) Emergency hospitalization. If the psychiatrist or
11	advanced practice registered nurse with prescriptive authority
12	and who holds an accredited national certification in an
13	advanced practice registered nurse psychiatric specialization
14	who performs the emergency examination has reason to believe
15	that the patient is:
16	(1) Mentally ill or suffering from substance abuse;
17	(2) Imminently dangerous to self or others; and
18	(3) In need of care or treatment, or both,
19	the psychiatrist or advanced practice registered nurse with
20	prescriptive authority and who holds an accredited national
21	certification in an advanced practice registered nurse



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1	psychiatric specialization shall direct that the patient be
2	hospitalized on an emergency basis or cause the patient to be
3	transferred to another psychiatric facility or other facility
4	designated by the director for emergency hospitalization, or
5	both. The patient shall have the right immediately upon
6	admission to telephone the patient's guardian or a family member
7	including a reciprocal beneficiary, or an adult friend and an
8	attorney. If the patient declines to exercise that right, the
9	staff of the facility shall inform the adult patient of the
10	right to waive notification to the family, including a
11	reciprocal beneficiary, and shall make reasonable efforts to
12	ensure that the patient's guardian or family, including a
13	reciprocal beneficiary, is notified of the emergency admission
14	but the patient's family, including a reciprocal beneficiary,
15	need not be notified if the patient is an adult and requests
16	that there be no notification. The patient shall be allowed to
17	confer with an attorney in private.
18	(e) Release from emergency hospitalization. If at any
19	time during the period of emergency hospitalization the treating
20	physician determines that the patient no longer meets the
21	criteria for emergency hospitalization and the examination



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1	pursuant to section 334-121.5 has been completed, the physician
2	shall expediently discharge the patient. If the patient is
3	under criminal charges, the patient shall be returned to the
4	custody of a law enforcement officer. In any event, the patient
5	shall be released within forty-eight hours of the patient's
6	admission to a psychiatric facility or other facility designated
7	by the director, unless the patient voluntarily agrees to
8	further hospitalization, or a proceeding for court-ordered
9	evaluation or hospitalization, or both, is initiated as provided
10	in section 334-60.3. If that time expires on a Saturday,
11	Sunday, or holiday, the time for initiation is extended to the
12	close of the next court day. Upon initiation of the
13	proceedings, the facility shall be authorized to detain the
14	patient until further order of the court."]
15	SECTION 27. Section 334-59.5, Hawaii Revised Statutes, is
16	repealed.
17	[" [§334-59.5 Notice of emergency transportation,
18	examinations, and hospitalizations. Notice of an individual's
19	emergency admission, examination, and hospitalization under this
20	chapter may be given to at least one of the following persons in
21	the following order of priority: the individual's spouse or



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1	reciproca	l beneficiary, legal parents, adult children, legal
2	guardian,	if one has been appointed, or if none can be found,
3	the close	st adult relative, as long as the individual:
4	(1)	Has capacity to make health care decisions and agrees;
5	- (2) -	Is given the opportunity to object and does not
6		object, or the health care provider can reasonably
7		infer from the circumstances based on the exercise of
8		professional judgment that the individual does not
9		object; or
10	-(3) -	Is incapacitated or an emergency circumstance exists
11		and the health care provider determines based on the
12		exercise of professional judgment that doing so is in
13		the best interest of the individual."]
14	SECT	ION 28. This Act does not affect rights and duties
15	that matured, penalties that were incurred, and proceedings that	
16	were begun before its effective date.	
17	SECTION 29. If any provision of this Act or the	
18	application thereof to any person or circumstance is held	
19	invalid, the invalidity does not affect other provisions or	
20	applications of the Act that can be given effect without the	

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invalid provision or application, and to this end the provisions 1 2 of this Act are severable. SECTION 30. In codifying the new sections added by 3 4 sections 2, 3, and 4 of this Act, the revisor of statutes shall 5 substitute appropriate section numbers for the letters used in designating the new sections in this Act. 6 7 SECTION 31. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored. 8 9 SECTION 32. This Act shall take effect on December 31,

10 2050.



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Report Title:

DOH; Mental Health; Admission to Psychiatric Facility; Emergency Procedures; Involuntary Hospitalization; Assisted Community Treatment; Administration of Treatment Over Objection

Description:

Requires the Department of Health to submit annual reports to the Legislature on emergency transportations and assisted community treatment petitions and orders, based on information provided by service providers. Clarifies the procedures for emergency transportation, examination, and hospitalization for individuals who may be mentally ill or suffering from substance abuse who are imminently dangerous to self or others. Requires treatment providers to provide relevant information to the Attorney General for purposes of preparing an assisted community treatment petition. Amends the procedures for involuntary hospitalizations and assisted community treatment petitions. Clarifies the circumstances under which a subject of an assisted community treatment order can be administered medication over objection. Effective 12/31/2050. (HD2)

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

