



STATE OF HAWAII
DEPARTMENT OF HEALTH
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**TESTIMONY IN SUPPORT OF HB2280
RELATING TO HEALTH**

REPRESENTATIVE JOHN M. MIZUNO, CHAIR
COMMITTEE ON HEALTH AND HUMAN SERVICES

Hearing Date and Time: Friday, February 2, 2018 at 8:30 a.m. Room Number: 329

1 **Fiscal Implications:** Undetermined at this time.

2 **Department Testimony:** The Department of Health (DOH) supports this measure.

3 The Department of Health (DOH) places high priority on security at the Hawaii
4 State Hospital (HSH) and appreciates that this bill attempts to provide resources for the
5 various components of HSH Security Action Plan. We support the intent of this bill and
6 defer to the Governor's Supplemental Budget Request regarding appropriations.

7 The purpose of this bill is to appropriate funds to the DOH to implement the
8 outstanding recommendations of the HSH security corrective action plan. Specifically,
9 this bill (1) appropriates funds for the purchase of electronic ankle monitoring bracelets
10 and additional metal detector hand wands; (2) appropriate funds for the purchase and
11 installation of additional lighting and closed circuit television cameras; and (3)
12 authorizes the issuance of general obligation bonds to fund capital improvement
13 projects at the HSH campus to improve hospital security.

1 As the bill notes, many security enhancements have been completed over the
2 last couple of years, namely the erection of fences, the installation of security screens
3 on windows, the rewiring of the fire alarms system, retraining staff, modifying census
4 procedures and other enhancements are underway, including more fencing and the
5 introduction of Global Positioning System (GPS) ankle bracelets. Other enhancements
6 are in the planning stages including upgrading the closed circuit television monitoring
7 system.

8 It is mentioned in the bill that there has been over 100 escapes since 2001 from
9 HSH. Although this is true, there has been a steady decrease from 2001, when there
10 were 28 escapes alone. For the last six years, on average, there have been less than
11 two (2) a year. Our assessment is that the completed security enhancements have
12 been part of the reason for success in reducing the rate of escapes. However, it is
13 agreed that more needs to be done.

14 The HSH is proceeding with security enhancements and anticipate funding these
15 through current fiscal year resources and released restrictions. The DOH is preparing
16 an expenditure plan for the current fiscal year to pay for the hand wands and GPS ankle
17 bracelets, as noted Section 2, for additional lighting and signage mentioned in Section
18 3, for new closed circuit IV cameras which is mentioned in Section 4.

19 Capital funding has been requested for the guard shack and road relocation
20 mentioned in Section 5.1.

1 Cost estimates for rolling gate mentioned in Section 5.1 and the operating gate at
2 the entrance mentioned in Section 5.3 have not yet been developed.

3 The fence surrounding the entire campus is mentioned in Section 6, and
4 according to an estimate developed by DAGS, may cost over \$17 million. The
5 Executive Branch was requested by the City Council of Honolulu to seek funding for this
6 project. This fencing is in addition to what has already been proposed and either
7 installed or in process and may further reduce escapes from HSH.

8 The HSH is currently erecting an extensive fencing system which will encompass
9 all of the lower campus, as well as the entry areas to the Guensberg building at the
10 upper HSH campus. This initiative will also reduce the number of escapes. As
11 mentioned previously, over the past six years, the number of escapes have average
12 less than two (2) a year.

13 We thank the committee for considering our testimony and appreciate the
14 committee's support on this bill. Thank you for the opportunity to testify.

DAVID Y. IGE
GOVERNOR OF HAWAII



VIRGINIA PRESSLER, M.D.
DIRECTOR OF HEALTH

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In reply, please refer to:
File:

February 2, 2018

The Honorable John M. Mizuno, Chair
and Members
House Committee on Health and Human Services
Hawaii State Capitol
415 South Beretania Street, Room 439
Honolulu, HI 96813

Dear Chair Mizuno,

Thank you again for the opportunity to testify at this morning's hearing for HB2280 Relating to Health. The Department of Health (DOH), Adult Mental Health Division (AMHD), and the Hawaii State Hospital (HSH) are committed to improving safety and security on the HSH campus.

A question was raised during the hearing about HSH's policy concerning sexual activity between staff and patients. Attached is a copy of the HSH Policy and Procedure Number 12.310, Relationship Security: Safe and Therapeutic Staff-Patient Interactions along with a copy of the policy attachment, Therapeutic Rules – Working with Staff to Make the Most of Your Treatment.

Included in this policy is a procedure that identifies all staff are to maintain safe, professional, and therapeutic relationships with patients that are free of violations or dual relationships including, but not limited to, "engaging in romantic relationships with patients, including sexual intimacy" (Procedure A, 1, e).

I appreciate the opportunity to provide clarification on this issue. I hope you and the committee members find this information helpful. Please feel free to contact me if you would like additional information. I may be reached at (808) 247-2191.

Sincerely,


William J. May
Hawaii State Hospital Administrator

Attachments

Cc: Representative Bertrand Kobayashi, Vice Chair
Representative Della Au Belatti
Representative Lei R. Learmont
Representative Andria P.L. Tupola

HAWAII STATE HOSPITAL POLICY AND PROCEDURE <u>(LD) Leadership</u>	Number: 12.310 Effective Date: 09/10/04 History: Rev. 12/07, 04/12, 07/12, 08/15
SUBJECT: RELATIONSHIP SECURITY: SAFE & THERAPEUTIC STAFF-PATIENT INTERACTIONS	Page: 1 of 4 Approved:
<hr/> REFERENCE: Joint Commission LD.03.01.01, .03.06.01, .04.02.01	<hr/> Title: Administrator Date

PURPOSE:

The purpose of this policy is to provide guidelines to promote appropriate, safe and therapeutic staff-patient relationships.

POLICY:

All Hawaii State Hospital (HSH) employees honor professional boundaries and maintain staff-patient relationship security by having only appropriate and professional staff-patient interactions and refraining from inappropriate staff-patient interactions.

RESPONSIBILITY STATEMENT:

All HSH employees are responsible to maintain safe and therapeutic relationships with patients that are supportive of treatment and within appropriate boundaries. They report to their supervisor any concerns about questionable staff-patient interactions they observe.

PROCEDURE:

- A. Self Monitoring: All staff:
1. Maintain safe, professional, and therapeutic relationships with patients that observe, apply and reinforce appropriate limits and therapeutic boundaries, as described in the "Therapeutic Rules" attached to this policy. Safe, professional, therapeutic relationships are free of violations or dual relationships characterized by any of the following:
 - a. Close friendships.
 - b. Inappropriate or unprofessional conduct, including inappropriate gestures and/or touching and the use of unprofessional language or dialogue.

- c. Providing services, favors or assistance to hospital patients that exceed or extend outside the course of treatment, or have not been ordered or recommended by a licensed clinician, team leader or supervisor.
 - d. Engaging in reciprocal (“quid pro quo”) relationships with patients (relationships that involve payment or fees for services rendered).
 - e. Engaging in romantic relationships with patients, including sexual intimacy.
 - f. Engaging in violent, threatening or intimidating behavior.
2. Set limits on staff-patient relationships consistent with best practice standards for professional relationships in state hospital environments.
 3. Report any concerns about questionable interactions they observe to their supervisor or designee.
 4. Seek out support and discuss the reactions they are having with their supervisor, or the treatment team, when they experience difficulty in managing safe and therapeutic boundaries with a patient.
 5. Support peers in adhering to safe and therapeutic rules.
- B. Treatment Team Responsibility: The treatment team:
1. Identifies patients considered to be high risk for boundary issues based on history and clinical characteristics.
 2. Ensures that appropriate alerts and appropriate clinical information are communicated to both on-unit and off-unit staff.
 3. Ensures that the clinical issues regarding a relationship security breach or dual relationships are incorporated into the patient’s treatment/recovery plan.
- C. Supervisor/Manager Responsibilities: The supervisor/manager:
1. Ensures that all staff members have been trained in relationship security.
 2. Addresses any potential or real threat to relationship security with the employee.
 3. Consults with Risk Management as needed.
 4. Follows the hospital’s protocol for disciplinary action when appropriate.
 5. Requests patient or staff transfer as needed to minimize the possibility and/or impact of boundary violations.

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DEFINITIONS:

Relationship Security is defined as the safety and treatment potential gained from the appropriate maintenance and monitoring of therapeutic staff-patient interactions. The HSH responsibility for treatment, evaluation, and public protection must be based upon an effective Relationship Security program. The hospital's Relationship Security program is monitored by the clinical leadership and management and the Clinical Safety Coordinator.

Appropriate staff-patient interactions are those interactions that are based upon and purposefully support the patient's treatment plan. They are one-way helping interactions for the patient's benefit. The parameters for determining whether or not an interaction with a patient is appropriate are defined by the patient's treatment plan, the employee's duty statement, professional role and work assignment, as well as ethical considerations and the law.

Inappropriate staff-patient interactions exist on a continuum from careless or ill-informed boundary inattention to exploitive dual relationships where the employee is using his or her position and the patient's condition or confinement for personal gain. Dual relationships, typically the end point of a progression of boundary crossings over time, are unethical, compromise a patient's treatment plan, and/or deviate significantly from an employee's professional role. Examples of dual relationships include (but are not limited to): romantic/sexual involvement, contraband or drug exchange, business relationships, religious counseling by non-clergy staff, and physical and/or psychological abuse of any kind. Overly social interactions, in which the staff member is deriving personal gratification and/or is meeting personal needs for admiration, social support, condolence, or friendship through interactions with patients, also fall in the category of dual relationships. The hospital expressly forbids and does not tolerate staff engaging in dual relationships with patients.

Therapeutic Rules define the parameters of helping relationships and distinguish helping relationships from other types of relationships. Each staff member who works directly with patients is familiar with the "Therapeutic Rules" discussed in the attachment to this policy. The attachment may be used as a resource for teaching patients about safe and therapeutic staff-patient relationships.

ATTACHMENT(S):

"Therapeutic Rules – Working with Staff to Make the Most of Your Treatment"

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POLICY AND PROCEDURE**

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RELATED POLICIES AND PROCEDURES:

- Code of Conduct
- 14.503 Hawaii State Hospital Clinical Lines of Authority
- 14.005 Patient Abuse and Neglect by Staff
- 14.038 Resolution of Conflict

HEC 8/15

Therapeutic Rules - Working With Staff to Make the Most of Your Treatment

The Hawaii State Hospital (HSH) is designed to treat persons with mental illness. It is different from a prison in many ways.

One important way is that staff and patients work together as part of treatment.

Boundaries are Important to Our Success at HSH

- Staff will talk with patients about “**boundaries**” and “**appropriate**” behavior.
- It is very important for patients and staff to be able to tell the difference between what is “**OK**” and “**Not OK**” in terms of what is said and done, personal feelings, respect for the personal space of others, and the ability to maintain a treatment relationship with the staff.
- The ability to learn about appropriate interactions with others and respect therapeutic boundaries is an important skill for patients and staff to master.

Staff-Patient Relationships are One-Way Helping Relationships

- Staff-patient relationships here at HSH are different from other kinds of relationships.
- They are “helping” relationships.
- Staff will encourage patients to talk about personal issues and help patients solve problems.
- Staff will expect patients to work with them on their problems, but patients not expected to help staff with their issues.

What does behavior look like that is ‘OK’ (appropriate) or ‘Not OK’?

- OK**
- Talking to staff about treatment and discharge goals
 - Telling the treatment team if a patient feels a staff member has crossed professional boundaries
 - Actively participating in your treatment and learning
 - Maintaining therapeutic interactions with staff
 - Treating staff with courtesy & respect

- Not OK**
- Touching staff, staring
 - Asking staff personal questions
 - Commenting on staff’s appearance
 - Flirting with staff or making sexual comments
 - Expecting staff to keep your secrets
 - Expecting staff to bend rules for you
 - Expecting special favors from staff
 - Doing special favors for staff
 - Giving gifts to staff
 - Romantic or business relationships

‘Helping’ Relationships are Different from Friendships

Sometimes, when you begin to share your problems with staff you may feel like you are talking to a friend. It is even possible that you may find yourself attracted to a staff member or think you have loving feelings for a staff member. These feelings of attraction are not uncommon for people receiving therapy. It is important not to act on these feelings.

Remember:

- Staff are not here to share their personal information with you.
- Staff are not here to ask you for help with their problems.
- It is against hospital rules for staff to become romantically involved with you.
- It is against hospital rules for staff to provide you with special favors.
- If you begin to have strong feelings for a particular staff you should discuss this with your treatment team.