SB804

Measure Title: RELATING TO PALLIATIVE CARE

Report Title: Palliative Care; Culturally Competent Palliative Care Pilot Program; Department of Health; Appropriation ($)

Description: Establishes the culturally competent palliative care pilot program to promote palliative care, gather health care utilization data, and conduct bidding for at least two pilot programs for home or community based palliative care, one of which must be located in a county with less than two hundred thousand residents. Requires reports to the legislature. Establishes an advisory group to oversee implementation of the pilot program. Appropriates funds.

Companion: None

Current Referral: CPH, WAM

Introducer(s): BAKER, S. CHANG, NISHI HARA, Fevella, Moriwaki
Testimony in SUPPORT of SB804
RELATING TO PALLIATIVE CARE.

SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

Hearing Date: January 30, 2019           Room Number: 229

Fiscal Implications: General fund appropriation request of $350,000.

Department Testimony: The Department of Health supports SB804 provided that any appropriations do not displace any Executive Budget requests. The purpose of this measure is to adopt recommendations from the palliative care working group, including testing the hypotheses of recent local research on culturally competent approaches to staff and patient engagement.

Palliative care is a recent medical speciality focused on comfort care and quality of life for patients, including their family, suffering from serious health conditions. Palliative care may be employed while the patient is continuing active treatment through different phases of their life limiting condition. All hospice care is palliative in nature, but not all palliative care is hospice.

In 2018, the department convened a working group pursuant to SCR142 HD1 SLH 2018 which tasked the community to recommend strategies to expand palliative care in Hawaii. In partnership with the American Cancer Society Cancer Action Network and Kokua Mau, as well as industry partners, the top recommendations were to:

1) Increase public and health care provider education;
2) Support with public funds demonstration projects in the State; and
3) Evaluate new and existing data sources to further establish community standards of care.

Mainland-based research reveals clear disparities such that “in every ethnic subgroup studied, Asian Americans and Pacific Islanders were less likely than whites to enroll in hospice” (Ngo-
Metzger, et al. 2007). Local research from the University of Hawaii School of Nursing, “Culturally Competent Palliative and Hospice Care Training for Ethnically Diverse Staff in Long-Term Care Facilities,” (Kataoka-Yahiro, et al. 2016) suggests that culturally competent approaches to Asian Americans and Pacific Islanders improve patient and staff knowledge and satisfaction with palliative and hospice care services.

This research may have real-world implications since non-enrollment or late enrollment in palliative care, including but not limited to hospice, increases direct health care costs and like the emotional burden of patients and their families.

**Offered Amendments:** N/A.
To: The Honorable Rosalyn H. Baker, Chair
   The Honorable Stanley Chang, Vice Chair
   Members, Committee on Commerce, Consumer Protection, and Health

From: Paula Yoshida, Vice President, Government Relations and External Affairs, The Queen’s Health Systems

Date: January 29, 2019

Hrg: Senate Committee on Commerce, Consumer Protection, and Health; Wednesday, January 30, 2019 at 9:00 AM in Room 329

Re: Support for S.B. 804, Relating to Palliative Care

The Queen’s Health Systems (Queen’s) is a not-for-profit corporation that provides expanded health care capabilities to the people of Hawai‘i and the Pacific Basin. Since the founding of the first Queen’s hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai‘i. Over the years, the organization has grown to four hospitals, 66 health care centers and labs, and more than 1,600 physicians statewide. As the preeminent health care system in Hawai‘i, Queen’s strives to provide superior patient care that is constantly advancing through education and research.

Queen’s appreciates the opportunity to testify in support of S.B. 804, Relating to Palliative Care, which establishes a culturally competent palliative care pilot program. Palliative care is a proven approach that improves the quality of life of our patients and their families facing challenges associated with life-threatening illness. Through prevention and relief of suffering, palliative care address and manages the physical symptoms, as well as the emotional and spiritual hardship our patients face due to their serious, chronic, and/or terminal conditions.

Thank you for your time and attention to this important issue.
SB-804
Submitted on: 1/29/2019 2:45:47 PM
Testimony for CPH on 1/30/2019 9:00:00 AM

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<th>Testifier Position</th>
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<td>Michael Robinson</td>
<td>Testifying for Hawaii Pacific Health</td>
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Comments:

Testimony in support.
Senate Committee on Commerce, Consumer Protection, and Health
Senator Rosalyn H. Baker, Chair
Senator Stanley Chang, Vice Chair

SB 804 – RELATING TO PALLIATIVE CARE
Cory Chun, Government Relations Director – Hawaii Pacific
American Cancer Society Cancer Action Network

Thank you for the opportunity to provide testimony in support of SB 804, which appropriates funds for palliative care education and establish a culturally competent palliative care pilot program.

Palliative care is specialized medical care for people with serious illness. This type of care is focused on providing patients with relief from the symptoms, pain and stress of a serious illness - from point of diagnosis onward. The goal is to improve quality of life for both the patient and the family.

SB 804 is based on research of cultural competency in palliative care conducted by the University of Hawaii in 2016. As a first step to increasing palliative care in Hawaii, people facing chronic diseases and life-threatening conditions need to know what palliative care is and how it can increase their quality of life as they go through recovery or face an end-of-life situation.

In 2018, the Legislature adopted SCR 142, HD1, which created the palliative care working group in partnership with the Department of Health, Kokua Mau, and the American Cancer Society Cancer Action Network. SB 804 is a continuation of the working group and will allow for further discussions by increasing public awareness, gathering more information, and creating a pilot program to focus on cultural competency. We are committed to continue working with the palliative care community on this important issue for cancer patients and others facing serious illnesses.

Thank you for the opportunity to provide testimony on this important matter.
HEARING DATE: January 30, 2019

TO: Senate Committee on Commerce, Consumer Protection & Health
Sen. Rosalyn Baker, Chair
Sen. Stanley Chang, Vice Chair

FROM: Eva Andrade, President

RE: Strong Support for SB 804 Relating to Palliative Care

Hawaii Family Forum is a non-profit, pro-family education organization committed to preserving and strengthening life, family and religious freedom in Hawaii. We support this bill that establishes a culturally competent palliative care pilot program to promote palliative care, gather health care utilization data, and conduct bidding for at least two pilot programs for home or community based palliative care.

When someone we love faces the fear of a terminal diagnosis—and all the emotions and decisions that come with it—more than ever, they need to know that we believe their life is worth fighting for.

The National Hospice and Palliative Care Organization describes palliative care as “patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs to facilitate patient autonomy, access to information and choices.” Palliative care focuses on treating the person, as well as the disease, and helps provide support and inclusion for family members.

Palliative care improves quality of life and survival and creates care efficiencies that curb costs. Although we believe that Hawaii leads the way in many aspects because of the hard work of groups like Hospice Hawai‘i, St. Francis Hospice, Kokua Mau, and others, there are often barriers to getting patients with serious illness access to palliative care. These include:

- Lack of knowledge and understanding about palliative care;
- Variability in access based on geographic location, physician training, and services offered;
- Inadequate workforce to meet the needs of patients and families especially in some of our local cultural groups;
- Insufficient research to guide and measure quality of care.

We strongly support activities that increase public education and the development of practices that will specifically address the cultural norms of Hawaii’s patients and families. The effort will ensure that comprehensive and accurate information about palliative care is available to the wider public, and that benefits the entire community. By passing this bill, Hawai‘i legislators will be taking a significant step towards helping our sickest patients get access to the best care for them and their families.

Let’s work together to make sure those with the most serious illnesses in our community know we’re not giving up on them. Mahalo for the opportunity to testify.
Senate Committee on Commerce, Consumer Protection, and Health
The Honorable Rosalyn H. Baker, Chair
The Honorable Stanley Chang, Vice Chair

RE: TESTIMONY IN SUPPORT OF SB 804
RELATING TO PALLIATIVE CARE
Hearing: January 30, 2019 at 9:00 a.m.

Dear Chair Baker and Members of the Committee,

Thank you for the opportunity to provide testimony in support of SB 804 that establishes the culturally competent palliative care pilot program to promote palliative care. I am grateful for Senator Baker’s introduction of this bill, along with each supporter – recognizing the importance of palliative care as a vital healthcare issue, and the need for expansion of palliative care services statewide.

Studies have shown that, across a range of serious illnesses (cancer, dementia, end-stage renal disease, cardiopulmonary failure), palliative care services improve patients’ symptoms and the quality of end of life care, allow patients to avoid hospitalization and to remain safely and adequately cared for at home, lead to better patient and family satisfaction, and significantly reduce prolonged grief and post-traumatic stress disorder among bereaved family members.

With 35 years serving the palliative, hospice, and bereavement needs of East Hawai‘i, we can attest to the power of palliative care through the example of our community-based palliative care program started in 2016. As the Nation and the state of Hawai‘i look at population health, healthcare reform and physician payment reform for high-cost high need individuals – we at Hawai‘i Care Choices can confirm that the models and cost-savings found in palliative care are the solutions for the future.

SB 804 goals are an essential step to providing more comprehensive care for the communities we serve, and we are in complete support of this initiative.

Again, mahalo for the opportunity to express my support for SB 804 relating to Palliative Care.

Respectfully submitted,

Brenda S. Ho, MS, RN
Chief Executive Officer
January 28, 2019

Testimony in Support of SB 804

Dear Senator Baker, and other members of the committee,

With this testimony for SB804, I would like to express my support for this bill to strengthen and expand Palliative Care in Hawaii. This bill from recommendations from the Palliative Care Task Force, created last year by resolution, and provides next steps in increasing palliative care awareness and usage in Hawaii.

I currently serve as Executive Director of Kōkua Mau, which is the Hospice and Palliative Care Organization for Hawaii. As a network of organizations and individuals around the state, we are committed to increasing palliative care as it is seen as best practice for caring well for people with serious illness, including those as the end of life. This support includes hospice care, which is a type of palliative care for those at the very end of life. Kōkua Mau is committed to creating a continuum of care for those with serious illness, including their loved ones and those who care for them, and is very encouraged by the increase interest in the opportunities that palliative care offers.

We support the main points of the bill, which include:

1. Education for the public and professionals
2. Pilot studies to show the efficacy of palliative care
3. Establish data points to best determine standards of care and determine unmet need

I am sorry I am not able to appear in person today. Please let me know if you have any further questions.

Best wishes,

Jeannette G. Koijane, MPH
Executive Director
Kōkua Mau
jkoijane@kokuamau.org
O`ahu County Committee on Legislative Priorities (OCCLP)

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Roselyn H. Baker, Chair
Senator Stanley Change, Vice Chair

DATE: Wednesday, January 30, 2019
TIME: 9:00 a.m.
PLACE: Conference Room 229 State Capitol

RE: SB 804 Relating to Palliative Care

Aloha mai kakou Members of the Senate Committee on Commerce, Consumer Protection, and Health:

The O`ahu County Committee on Legislative Priorities (OCCLP) of the Democratic Party of Hawai`i (DPH) hereby submits its testimony in SUPPORT of SB 804 relating to the Palliative Care.

SB 804 establishes a culturally competent palliative care pilot program to promote palliative care, gather health care utilization data, and conduct bidding for at least two pilot programs for home or community based palliative care, one of which must be located in a county with less than two hundred thousand residents. SB 804 requires reports to the legislature and establishes an advisory group to oversee implementation of the pilot program. It further, appropriates funds.

Hawai`i faces a long-term care crisis that prevents too many seniors and people with disabilities from being able to live with dignity at home or in their communities. The vast majority of people who are aging or living with a disability want to do so at home, but face challenges finding and affording the support they need to do so. Programs that emphasize independence rather than institutionalization must be better structured to support them. DPH will take steps to strengthen and expand the home care workforce, give seniors and people with disabilities access to quality, affordable long-term care, services, and supports, and ensure that all of these resources are readily available at home or in the community. Democratic Party of Hawai`i Platform (2018), p. 12, ln. 44-50.
DPH believes that we must accelerate the pace of medical progress, ensuring that we invest more in our scientists and give them the resources they need to invigorate our fundamental studies in the life sciences in a growing, stable and predictable way. We must make progress against the full range of diseases, including diabetes, obesity, Alzheimer’s, HIV and AIDS, cancer, and other diseases, especially chronic ones. Democratic Party of Hawai‘i Platform (2018), p. 11, ln. 52-23, p. 12, ln. 1-2.

This measure provides for a pilot program on palliative care which would assist those who suffer from chronic pain but want to age-in-place at home rather than be institutionalized.

For the foregoing reasons, OCCLP supports SB 804 and urges its passage out of the Committee on Commerce, Consumer Protection and Health.

Mahalo nui loa
Me ka `oia`i`o

/s/ Melodie Aduja
Melodie Aduja
Chair, O‘ahu County Committee on Legislative Priorities of the Democratic Party of Hawai‘i
Ph. (808) 258-8889
Email: legislativepriorities@gmail.com
Dear Chair Baker, Vice Chair Chang, and Honorable Members of the Senate Committee on Commerce, Consumer Protection, and Health:

I am Gary Simon, Director of Corporate Affairs and Advocacy for St. Francis Healthcare System.

St. Francis Healthcare System wholeheartedly supports SB 804.

Our St. Francis Palliative Care Program has demonstrated positive results in assisting patients with managing their pain and symptoms as well as assisting patients and their families with psychosocial and spiritual support. Furthermore, our Palliative Care Program has been effective in helping patients and their families with the burdensome details in their daily lives, e.g. coordinating transitions of care from hospitals and care facilities to their homes; navigating the healthcare system; advocating for patients and their families; educating caregivers; assisting with health insurance, including Medicaid; securing transportation; etc.

St. Francis Healthcare System is pleased that the Legislature is developing a policy and program to expand palliative care and enhance access to palliative care for those facing serious illness and their loved ones to reduce their unnecessary suffering and to find the support and care they need.

We urge you to support SB 804 and to recommend its passage, and we thank you for seriously considering the Bill.

Very sincerely,

Gary Simon, Director of Corporate Affairs and Advocacy, St. Francis Healthcare System
Written Testimony Presented Before the
Senate Committee on Commerce, Consumer Protection, and Health
Hearing: January 30, 2019, 9:00 AM

By Members of

American Nurses Association
in Hawaii

SB 804 RELATING TO PALLIATIVE CARE

Chair Baker, Vice Chair Chang, and members of the Senate Committee on Commerce, Consumer Protection, and Health, thank you for this opportunity to provide testimony in strong support for SB804, Relating to Palliative Care, with a suggested addition.

We are members of the American Nurses Association in Hawaii, who are registered professional nurses practicing in this state.

This bill endeavors in part to establish two pilot programs to be established for home and community based palliative care that is responsive to our unique cultural considerations in Hawaii. This measure is in keeping with our mission as a group of professional healthcare providers to advocate for vulnerable populations in our community. As nurses practicing in Hawaii, we are well aware of the effectiveness of support and management services to maintain and improve quality of life for the seriously ill and their families. The argument laid out in this Bill is well supported with research and data from the current literature, providing evidence that early engagement of the patient and family with a palliative care team is effective. Palliative care training of ethnically diverse, culturally competent staff has also been shown to improve satisfaction with palliative care services such as discussions about patient and family goals of care, advance care planning, pain relief, and relationship negotiations.

To this end, and due to the fact that most care provided in palliative care home and community settings is managed by professional nurses, we would suggest that the addition of a registered nurse (RN) or advanced practice RN with experience in providing such care in the particular target county be included in the proposed advisory groups. We believe this inclusion would benefit the process significantly by bringing face-to-face perspective to the table.

We respectfully request that SB 804 pass out of this committee. Thank you for your continued support for measures that address the needs of the seriously ill in our community, with an eye not only on reducing costs for preventable complications but improving the quality of life for these patients and their families.

Contact information:

Dr. Linda Beechinor, APRN-Rx, FNP-BC  phone (808) 779-3001
500 Lunalilo Home Road, #27-E  e-mail: L.Beechinor@hawaiiantel.net
Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Uri Martos, and I am writing to express my support for SB804, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii’s patients and families.

As a recent breast cancer survivor, I can tell you firsthand how important palliative care is. SB804 will make palliative care more available to people like me who need this special care to help them through their health conditions.

Palliative care was essential to my success in completing treatment with a more positive state of mind. The special care that I received made such a difference and I want all cancer & those suffering chronic illnesses to also have this special care.

Please support SB804 and help others in our community receive this same care. The pilot program formed under SB804 would aim toward allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with end-of-life conversations.

I urge you to support SB804. Thank you for the consideration of my testimony.

Mahalo,
Uri Martos
Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Gary Tanimitsu, and I am writing to express my support for SB 804. I believe this bill and the pilot program it supports is one big step in allowing the general public and those touched by a chronic or terminal disease to learn more about palliative care, regardless of their socio-economic status or ethnicity.

I am reminded of my uncle, my father’s oldest brother, who successfully lived with cancer in the 1980’s and 1990’s. When he got older he eventually needed to be hospitalized and languished in Queen’s Medical Center, suffering painfully every day. When my father and I went to visit him, he spoke to my father and said “Shinitai”, which is Japanese for “I want to die.”

As soon as a bed opened up at a Skilled Nursing Facility, he was transferred and remained there until he finally and mercifully passed away.

SB 804 is a step in the right direction in ensuring that any patient, regardless of their ethnicity, knows that palliative care is an option that they can pursue in the course of their treatment. In my uncle’s case, a conversation about palliative care could have been made with cultural competency taking into account his Japanese American ancestry.

There is also a personal stake in this for me. I’m a Boomer, a member of the largest demographic group in the United States. I’m no longer the bullet proof, invincible young man who thought he would outrun pain and suffering to live forever. I'm older now and facing my mortality with a sober realization that I, too, could have an experience similar to that of my uncle.

SB 804 is a step in the right direction for many reasons. We all deserve to have our need for balanced, compassionate care addressed, but for too many individuals, palliative care is a foreign concept that they may be unfamiliar with. With this bill, we can move forward in promoting education around palliative care in our communities.

Sincerely,
Gary Tanimitsu
Dear Chair Baker and Members of the Committee,

My name is Natalie Nimmer, and I strongly support SB804, which would establish a culturally competent palliative care pilot program to promote palliative care, gather health care utilization data, and conduct bidding for at least two pilot programs for home or community based palliative care. All cancer patients—regardless of financial status, age, or any other factor—should have access to palliative care; this pilot project could lead greater awareness and access.

When we rang in the new year in 2015, I was a 36-year-old vegan marathon runner. Then in March, I was diagnosed with Stage 3 breast cancer. In addition to pointing out the shock of the news, just about everyone around me said that I needed to get used to a “new normal.”

I endured 7 different chemo drugs over two separate multi-month periods of treatment, as well as 1 minor and 2 major surgeries, and 33 rounds of radiation. In the midst of this, I suffered from debilitating nausea, extreme fatigue, and neutropenic fever (a condition sparked by a compromised immune system in when everything goes wrong—rash from head to toe, high fever, and a range of other maladies). There were many days during the year and a half of treatment when I could not stay awake for more than 2 hours a day and could not walk without assistance to the bathroom.

But I was self-employed and a doctoral candidate at UH-Mānoa, so I did not have the option to drop out of life for 18 months. My nurse practitioner Christa Braun-Ingles and oncologist Keola Beale, performed magic through the use of palliative care treatments. I was able to continue working and attend classes on my good days—even if it meant bringing a pillow and blanket to camp out on the floor when I didn’t have the energy to sit up. In fact, I completed the Hibiscus Half-Marathon between my 3rd and 4th rounds of chemo and presented my graduate research at a conference in the Marshall Islands 2 weeks after my 6th round of chemo. I was bald and weak, but I was still living life. Without palliative care treatments, none of this would have been possible. It was a “new normal”, but could still easily be classified as “normal.”

SB804 would raise awareness about palliative care and increase access to these options. Palliative care is about dignity, but it is also about ensuring that anyone with serious, chronic, or terminal conditions can still live while they are on this earth. Please support this “new normal” for Hawai‘i, by supporting SB804.

Thank you for considering my testimony.

Mahalo,
Natalie Nimmer
Senate Committee on Commerce, Consumer Protection and Health
Senator Rosalyn Baker, Chair
Senator Stanley Chang, Vice-Chair

RE: SB804, RELATING TO PALLIATIVE CARE

Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Misty Figuera, and I am writing to express my support for SB804, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

As a young twenty one year old student who has a chronic disease and has been caregiver for the father figure in my life who has cancer, I see the benefits of Palliative care clearly.

Life doesn’t stop when cancer and chronic illness comes knocking on the door. Bills still need to be paid, children still have volleyball games that need to be attended, and term papers still need to be written by a due date. Life is stressful in the first place – being sick only makes it worse. For those of us with busy schedules struggling to make it financially, being sick is just not the icing of the top of stress made cake; Suddenly, your schedule becomes filled by trying to find the write doctors, paying to see the wrong ones, and being exhausted physically and mentally. This is why palliative care is so important.

Palliative care is about improving life for cancer patients and those who live with chronic illnesses. When you are given the news that you are very sick, your life changes. Life becomes harder – for you AND especially your loved ones – after all, they are the ones who watch over you and take care of you. It becomes easy to give up to want to die, because that would be easier.

Palliative care is not only needed and extremely beneficial, but it is NECESSARY. It makes life easier, better, and makes it enjoyable again. What makes Hawaii a great state is the aloha we share – through our daily interactions, through giving our time, and through palliative care. The pilot program formed under SB804 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I urge you to support SB804. Thank you for the consideration of my testimony.

Mahalo,
Misty Figuera
Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Jenny Hausler, and I am writing to express my support for SB804, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

My sister Lucy was diagnosed with Stage 4 breast cancer at 58 and passed away at age 63. During the course of her disease she suffered much pain and stress and at the end of her life, especially fear. Had coordinated palliative care been available at the time, her cancer journey and passing would have been eased so much.

Her one wish would be that no one would ever have to go through the pain and suffering she did. This is one of the main reasons I support SB804.

The pilot program formed under SB804 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I urge you to support SB804. Thank you for the consideration of my testimony.

Mahalo,
Jenny Hausler
RE: SB804, RELATING TO PALLIATIVE CARE

Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Molly Pierce, and I serve as a volunteer for the American Cancer Society, Cancer Action Network. I would like to submit my testimony in support of SB804, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

Palliative care involves treating the whole patient, not just their disease. Ensuring that someone's mental health is as closely monitored as their physical health or treating pain conditions that arise from the treatment of chronic illness can make all the difference in quality of life. It is not solely reserved for those who are at the end of their lives. Palliative care can improve health outcomes for all patients fighting life threatening or chronic illnesses.

Having seen many family members go through cancer treatments, I can attest that those who were fortunate enough to have doctors who fought for them to receive palliative care were far better prepared to fight their cancer battle. Treating the cancer alone didn't treat the pain, the shortness of breath, or the fragility of mental health that come along with facing a life threatening illness. Access to holistic palliative care helped give my mother the strength and piece of mind I truly believe allowed her to survive. Treating her lack of appetite, helping her regain physical strength, and caring for her mental state instead of just focusing on killing her cancer helped give her the motivation to fight.

Please pass SB804, which would aim toward allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. Give Hawaii the chance to improve quality of life for our loved ones fighting life threatening or chronic illnesses.

Mahalo,
Molly Pierce
RE: SB804, RELATING TO PALLIATIVE CARE

Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Gay Okada, and I am writing to express my support for SB804, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

Living in Kona, on the island of Hawaii, health care and palliative care is at the none existence level in some areas.

To form a palliative care work group would help my friends with rheumatoid arthritis and bone cancer. One friend with rheumatoid arthritis (severe) had moved to Kentucky to live with her brother and passed away already. We desperately need your help with this situation.

I urge you to support SB804. Thank you for the consideration of my testimony.

Mahalo,
Gay Okada
RE: SB804, RELATING TO PALLIATIVE CARE

Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Alberto Rodriguez, and I am writing to express my support for SB804, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

I have witnessed a loved one's fight against cancer and I want to make sure that others that go through this fight are able to access the holistic care provided by palliative care.

My aunty passed away from cancer and lacked access to palliative care services that would have allowed for a higher level of care for both herself and our family. I now want to make sure that we do everything we can to promote awareness about palliative care services in our state.

In 2014, my aunt was diagnosed with kidney cancer. At the time, she wasn’t sure where to turn to and who we could talk to about the services and care as her disease progressed. We often were forced to travel two hours to see a doctor. The appointment was on a first-come/first-served basis. Long lines outside the doctor’s office starting at 4 o’clock in the morning, waiting for the secretary to open the door at 8 o’clock and waiting for the doctor to arrive at 12 o’clock or later.

My aunt’s health deteriorated quickly and we were a prisoner of the process and health access. She passed away in less than 6 months after diagnosis.

The pilot program formed under SB804 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I urge you to support SB804. Thank you for the consideration of my testimony.

Mahalo,
Alberto Rodriguez
Dear Chair Baker, Vice-Chair Chang and Other Members of this Committee,

My name is Kyle Loui, and I am writing to express my support for SB804, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii’s patients and families.

My family has been personally been affected by cancer and I wish that we could do more palliative care. My mother has been personally been affected by breast cancer. I personally witnessed her go through chemotherapy, and felt her pain as she struggled to go about doing day to day tasks.

All the Doctors were allowed to do was give her pain relief drugs and advice on what to do. Which was insufficient to help her get through the tough process of chemotherapy. I feel she could have benefited from palliative care when going through Chemotherapy. Besides looking up what other people are helping people through those time. She went through a near-death situation, was going through continuous pain, and was extremely depressed.

The pilot program formed under SB804 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I want this bill to achieve a more personal and effective type of care. It would help to focus palliative care coverage on chronic diseases, hopefully, we can incorporate new stakeholders on this important issue.

Mahalo,
Kyle Loui
Thank you for the opportunity to provide testimony in support of SB 804 that establishes the culturally competent palliative care pilot program to promote palliative care. I am grateful for Senator Baker’s introduction of this bill, along with each supporter – recognizing the importance of palliative care as a vital healthcare issue, and the need for expansion of palliative care services statewide.

Studies have shown that, across a range of serious illnesses (cancer, dementia, end-stage renal disease, cardiopulmonary failure), palliative care services improve patients’ symptoms and the quality of end of life care, allow patients to avoid hospitalization and to remain safely and adequately cared for at home, lead to better patient and family satisfaction, and significantly reduce prolonged grief and post-traumatic stress disorder among bereaved family members.

With 35 years serving the palliative, hospice, and bereavement needs of East Hawai‘i, we can attest to the power of palliative care through the example of our community-based palliative care program started in 2016. As the Nation and the state of Hawai‘i look at population health, healthcare reform and physician payment reform for high-cost high need individuals – we at Hawai‘i Care Choices can confirm that the models and cost-savings found in palliative care are the solutions for the future.

SB 804 goals are an essential step to providing more comprehensive care for the communities we serve, and we are in complete support of this initiative.

Again, mahalo for the opportunity to express my support for SB 804 relating to Palliative Care.
Testimony in Support of SB 804
RELATING TO PALLIATIVE CARE

Establishes the culturally competent palliative care pilot program to promote palliative care, gather health care utilization data, and conduct bidding for at least two pilot programs for home or community based palliative care, one of which must be located in a county with less than two hundred thousand residents. Requires reports to the legislature. Establishes an advisory group to oversee implementation of the pilot program. Appropriates funds.

From : Christine Takahashi Registered Nurse

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Again, mahalo for the opportunity to express my support for SB 804 relating to Palliative Care.
SB-804
Submitted on: 1/29/2019 2:44:33 PM
Testimony for CPH on 1/30/2019 9:00:00 AM

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Submitted on: 1/29/2019 3:44:31 PM
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