

DEPARTMENT OF HEALTH

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The Department of Health (DOH), established under section 26-13, HRS, and specifically provided for in chapter 321, HRS, is headed by the Director of Health. The Department is the state agency responsible for the planning, execution, and coordination of public health and environmental health programs for the protection and improvement of the environmental, physical, and mental well-being of the people of Hawaii. The mission of the Department is to provide leadership to monitor, protect, and enhance the health and environment of all the people of Hawaii. It enforces the State's public health and environmental health laws and administers various programs to improve the delivery of health services and protect the public health.

Director of Health

The Director directs and coordinates activities of the Department through four administrations headed by deputy directors for: General Administration, Behavioral Health, Environmental Health, and Health Resources.

Communications Office. The function of the Communications Office is to develop, coordinate, and implement a statewide public information program for the Department. The Office is responsible for supporting the public awareness objectives in the development, organization, direction, and implementation of the Department's communication policy.

ADMINISTRATIONS

General Administration

(Deputy Director of Health)

District Health Offices

The District Health Offices on the islands of Kauai, Maui, and Hawaii represent the Department in each of the neighbor island counties. They provide coordination, administrative support, and are engaged in community organization, planning, and consensus building.

Administrative Services Office

The Administrative Services Office provides departmental management of budgets, financial matters, and capital improvements. The Office oversees the expenditures of more than 80 programs of DOH.

Health Information Systems Office

The Health Information Systems Office (HISO) oversees all information technology (IT) systems, projects, and initiatives of DOH and manages the resources to support them. HISO operates and maintains the IT communications infrastructure of the Department, which consists of over 3,000 PCs and a wide area network linking DOH health centers and offices via high speed internet connection. HISO also directs and coordinates all IT matters within DOH and between DOH and other state and county agencies, health care providers, the federal government, and commercial software and hardware vendors.

Health Status Monitoring Office

The Health Status Monitoring Office collects, processes, analyzes, and disseminates relevant, population-based data in a timely fashion in order to assess the health status of Hawaii's population and to fulfill health statistics legal requirements. The Office also provides to the Department vital statistics and demographic and health data for use in identifying state and community health trends, identifying population groups at risk for serious health problems, and evaluating program effectiveness.

Human Resources Office

The Human Resources Office is responsible for human resources management and administration. It provides services to all levels of management in attaining program objectives. Services are provided to employees to develop and maintain high morale and good employee relations. Major functional areas of performance are labor relations, position classification and compensation, recruitment and examination, training and employee relations, employee benefits/transactions, and workers' compensation and safety.

Planning, Policy and Program Development Office

The Planning, Policy and Program Development Office develops legislation and administrative rules for the Department. It is also responsible for project development, strategic planning, data gathering, and research and analysis.

Behavioral Health Administration

Adult Mental Health Division

The Adult Mental Health Division (AMHD) seeks to improve the mental health of Hawaii's people by reducing the prevalence of emotional disorders and mental illness. AMHD oversees: eight public Community Mental Health Centers statewide (four on Oahu, two on Hawaii, one on Kauai, and one on Maui); Hawaii State Hospital; the Courts and Corrections

Branch; and contracts with a variety of mental health providers for service provision. AMHD also operates a 24/7 mental health Crisis Line.

Hawaii State Hospital. Hawaii State Hospital, a specialized inpatient psychiatric facility, is located in Kaneohe, Oahu. Inpatient services are provided for persons committed by the criminal courts. The Hospital received its current three-year accreditation from the Joint Commission, effective September 2017.

Courts and Corrections Branch. The Courts and Corrections Branch provides court-ordered mental health evaluations to the state court system pursuant to chapter 704, HRS, concerning penal responsibility and fitness to proceed.

Alcohol and Drug Abuse Division

The Alcohol and Drug Abuse Division aims to reduce the severity and disability effects related to alcohol and other drug use by ensuring access to an integrated, high quality, public/private community-based system of prevention strategies and treatment services designed to empower individuals and communities to make health-enhancing choices regarding the use of alcohol and other drugs.

Child and Adolescent Mental Health Division

The Child and Adolescent Mental Health Division aims to improve the emotional well-being of children and adolescents, and to preserve and strengthen their families by ensuring early access to a child and adolescent-centered, family-focused, community-based coordinated system of care that addresses the child's and adolescent's physical, social, emotional, and other developmental needs within the least restrictive environment.

Developmental Disabilities Division

The Developmental Disabilities Division (DDD) provides services and support to eligible individuals with intellectual and developmental disabilities so that they may be part of their communities and have choices for full and meaningful lives. DDD operates the Medicaid 1915(c) Home- and Community-Based Services (HCBS) waiver for individuals with intellectual and developmental disabilities. DDD's mission is to foster and provide quality person-centered and family-focused services and supports that promote self-determination. DDD comprises four branches:

Case Management Branch (CMB). CMB develops, coordinates, monitors, and ensures the statewide delivery of individually appropriate services and supports to persons with developmental disabilities and/or intellectual disabilities through the utilization of existing resources within the community, through coordination with supports and services provided under federal, state, or county acts, and through specific funding when no other resources are available.

Community Resources Branch (CRB). CRB oversees the HCBS waiver, monitors DDD service providers to ensure that they are meeting standards of care, serves as a resource for participant housing, employment, and self-determination, and coordinates the Neurotrauma Program under chapter 321H, HRS.

Outcomes and Compliance Branch (OCB). OCB is responsible for the Division's quality assurance and improvement program statewide, which include monitoring and evaluating program services, supports, and outcomes for individuals with intellectual disabilities and developmental disabilities, and neurotrauma.

Hospital and Community Dental Services Branch (HCDSB). HCDSB provides dental services for the vulnerable and underserved populations who have limited access to dental care. This includes: adult (over 20 years old) Medicaid patients who are classified as aged (over 65 years old), blind, disabled or other special needs who do not have access to dental care; individuals with severe chronic mental illness, the frail elderly, the medically fragile, and persons with intellectual and developmental disabilities; and individuals who live in Hawaii State facilities, including Hawaii State Hospital and Kalaupapa Settlement.

Environmental Health Administration

Hazard Evaluation and Emergency Response Office. The Hazard Evaluation and Emergency Response Office provides risk assessments, responds to the release of hazardous substances, and oversees the cleanup of contaminated sites. The Office responds to at least 150 incidents a year. Office activities include evaluating health effects of air and water pollutants when no standards exist.

Environmental Planning Office. The Environmental Planning Office develops strategic plans, supports land use reviews, and helps to get new programs underway. This office has been instrumental in developing the polluted runoff control program and is involved in coordinating watershed management projects.

Environmental Resources Office. The Environmental Resources Office handles many of the grants and administrative responsibilities of the Environmental Health Administration, primarily seeing to it that the administration's reorganization is fully implemented, that new positions are described and established, and maximum funding is obtained for programs from the EPA.

Compliance Assistance Office. The Compliance Assistance Office helps small businesses overcome hurdles in complying with environmental regulations.

Environmental Information Management Office. The Environmental Information Management Office is responsible for technology systems throughout the administration. This includes the design, development, implementation, and integration of data systems as well as dictating the strategic direction of information management initiatives.

Environmental Health Services Division

Food and Drug Branch. The Food and Drug Branch ensures that food, drugs, cosmetics, medical devices, and related consumer products are safe, effective (in the case of drugs and medical devices), and properly labeled; and that poisonous household substances are packaged in child-resistant containers when required by rule. The Branch also provides education and consultation for food handlers.

Vector Control Branch. The Vector Control Branch is a regulatory program that conducts investigative enforcement and control of vectors (insects, rodents, etc.) to prevent the transmission of communicable disease and health-related injuries to the people and visitors in Hawaii.

Sanitation Branch. The Sanitation Branch is responsible for the implementation and enforcement of the statutes, rules, and policies relating to environmental sanitation. The Branch regulates food and service establishments, public swimming pools, housing, milk, recreational trailer camps, tattoo artists, licensing for sanitarians, mortuaries, cemeteries, and embalmers.

Indoor and Radiological Health Branch. The Indoor and Radiological Health Branch is responsible for the implementation of diverse, statewide programs in community noise, radiation control, air-conditioning/ventilation, indoor air quality, asbestos, and lead-based paint.

Environmental Management Division

Clean Air Branch. The Clean Air Branch is responsible for the implementation of a statewide air pollution control program through services that include engineering analysis and permitting, monitoring and investigations, and enforcement of federal and state air pollution control laws and regulations.

Clean Water Branch. The Clean Water Branch administers and enforces statewide water pollution laws and rules. This is achieved through permitting of point sources, compliance monitoring, inspections, investigations of complaints, and ambient water quality monitoring.

Safe Drinking Water Branch. The Safe Drinking Water Branch administers federal and state safe drinking water regulations to the approximately 155 "public water systems" in the State to ensure that the water served by these systems meets state and federal standards. Any system that services 25 or more people a minimum of 60 days per year or has at least 15 service connections is subject to these standards and regulations. This program directly affects the drinking water quality of approximately 90-95% of the people in the State. The Branch also administers the Certification of Public Water System Operators under chapter 340F, HRS.¹

¹ See page 105.

Solid and Hazardous Waste Branch. The Solid and Hazardous Waste Branch oversees management of all solid waste generated within the State through the promotion of pollution prevention and waste minimization activities, and the development of partnerships with both generators and the regulated community. The Branch also works to prevent releases, or threats of releases, of petroleum, hazardous substances, pollutants or contaminants into the environment through aggressive enforcement of environmental laws and regulations.

Office of Solid Waste Management. The Office of Solid Waste Management, within the Solid and Hazardous Waste Branch, oversees and permits operation and closures of solid waste transfer, reclamation, and handling facilities; develops alternative solid waste management strategies for special wastes (used oil, lead acid batteries, etc.); facilitates recycling and waste diversion efforts and implements the Deposit Beverage Container Program, under chapter 342G, part VIII, HRS, that allows consumers to redeem eligible beverage containers for fees collected.

Wastewater Branch. The Wastewater Branch implements the construction of county wastewater facilities with federal and state financing by low interest loans from the State Revolving Fund, and oversees the Certification of Wastewater Treatment Personnel under chapter 340B, HRS.²

State Laboratories Division

The State Laboratories Division (SLD) administers a statewide program that conducts analytical testing services in support of environmental health and communicable disease control activities, as well as public health emergency preparedness and response efforts. SLD provides consultative and other related laboratory services to departmental programs, health care providers, institutions, and various federal, state, and county agencies, including the certification of certain types of laboratories, and the licensing of clinical laboratory personnel and medical review officers. SLD participates in environmental and public health training, research, exercises, and investigations.

Environmental Health Analytical Services Branch. The Environmental Health Analytical Services Branch provides chemical and microbiological analytical services to DOH programs and to various federal, state, and county agencies concerned with air pollution, drinking water, recreational waters, water pollution, and foods. The Branch also evaluates and certifies laboratories involved in regulatory monitoring for contaminants in drinking water and dairy products.

Medical Microbiology Branch. The Medical Microbiology Branch provides diagnostic, consultative, and reference laboratory related services to DOH and other state agency programs, private physicians, and institutions and other facilities in the State to assist in the diagnosis and control of communicable diseases, metabolic disorders, and genetic problems.

² See page 105.

Laboratory Preparedness and Response Branch. The Laboratory Preparedness and Response Branch provides rapid and effective laboratory services to the State in response to bioterrorism, chemical terrorism, infectious disease outbreaks, and other public health emergencies.

Health Resources Administration

Chronic Disease Prevention and Health Promotion Division

The Chronic Disease Prevention and Health Promotion Division (CDPHPD), also known as the Tobacco Settlement Project, strives to promote wellness and improve the quality and years of life for Hawaii's people through effective prevention, detection, and management of chronic diseases. CDPHPD fosters an integrative and coordinated approach through the building of a shared vision, strategies, partnerships, and resources. It comprises the following programs: Asthma, Bilingual Health Services, Cancer, Diabetes, Heart Disease and Stroke, Physical Activity and Nutrition (Healthy Hawaii Initiative), and Tobacco Control. It oversees the Chronic Disease Management and Control Branch and Primary Prevention Branch.

Communicable Disease and Public Health Nursing Division

The Communicable Disease and Public Health Nursing Division monitors the number of cases of tuberculosis and Hansen's disease, and other transmittable diseases.

Tuberculosis Control Branch. The Tuberculosis Control Branch coordinates and provides screening for active TB disease and latent TB infection. Public health nurses, physicians, pharmacists, and outreach workers evaluate, treat, and monitor patient compliance with treatment protocols, as well as track and manage contacts of active TB cases.

Harm Reduction Services Branch. The Harm Reduction Services Branch provides surveillance, prevention, and treatment in conjunction with community partners to reduce the spread of STD and HIV infection and screen those who are most at risk. The STD Clinic, located at Diamond Head Health Center, offers free examination, treatment, counseling, health education services, and anonymous HIV testing.

Hansen's Disease Branch. The Hansen's Disease Branch prevents the spread of Hansen's disease through case management, treatment, and epidemiological follow-up of new cases. They also provide long-term care to Hansen's disease patients who have been disabled directly from pathological effects of the disease or psychologically or socially from the effects of prolonged institutionalization. The Branch manages medical and facility operations at Kalaupapa and at Hale Mohalu Hospital at Leahi in Honolulu.

Public Health Nursing Branch. The Public Health Nursing Branch collaborates with a myriad of public and private agencies and programs to ensure a system of services that are accessible, coordinated, and integrated and in partnerships with individuals and families. The

Branch provides generalized clinical nursing intervention services as responders to disasters and public health outbreaks; communicable disease source and contact investigations; immunization services; care coordination services for targeted at-risk populations and families having difficulties accessing the health care system; and school-based health services in the public schools.

Disease Outbreak Control Division

The Disease Outbreak Control Division (DOCD) comprises the Disease Investigation Branch and Immunization Branch. These programs work together to monitor, investigate, prevent, and control infectious diseases in Hawaii, especially those preventable through immunizations, and to ensure Hawaii's ability to respond to emergencies that threaten the public's health. Toward these goals, DOCD works to strengthen the relationships between the Department of Health and other partners including laboratories, hospitals, schools, emergency response agencies, private organizations, and the military.

Disease Investigation Branch. The Disease Investigation Branch (DIB) conducts investigation, surveillance, prevention, and control of general communicable diseases of public health importance. DIB staff monitors incoming disease reports for occurrence of unusual or rare diseases, disease clusters, and outbreaks in the community.

Immunization Branch. The Immunization Branch works to protect Hawaii's people from vaccine-preventable diseases (VPDs) through immunization. The main activities of this Branch are to: promote immunizations in accordance with Centers for Disease Control and Prevention (CDC) recommendations; manage the Vaccines for Children program, which provides federally purchased vaccines for administration to eligible children without cost; conduct investigations and surveillance of VPDs in Hawaii; oversee the Hawaii Immunization Registry, a secure web-based state-wide immunization information system capable of establishing and maintaining lifespan vaccination records for Hawaii's population; monitor compliance with State immunization requirements for public and private school attendance; assess immunization coverage levels in the community; and develop collaborations and partnerships to reach under-immunized populations.

Office of Public Health Preparedness. The Office of Public Health Preparedness (OPHP) is tasked with preparing for, responding to, and assisting in recovery from natural and human-caused public health incidents and threats. Along with its broader health emergency preparedness responsibilities, OPHP also coordinates Hawaii's smallpox vaccination program administers the Strategic National Stockpile for distribution of emergency pharmaceuticals in case of public health emergencies, and collaborates with the Hawaii Emergency Management Agency, Hawaii Healthcare Emergency Management, county emergency management and civil defense agencies, and other stakeholders in the development and implementation of state and county response plans for bioterrorism and other public health emergencies.

Family Health Services Division

The Division's function is to promote and provide services statewide for women of childbearing age, infants, and children. These services are carried out by the administrative and consultant staff at the Division office and through three Branches:

Maternal and Child Health Branch. The Maternal and Child Health provides leadership to ensure healthy outcomes for the women, children and families of Hawaii. The services include: Child Wellness, Adolescent Wellness, Violence Prevention, Sexual Assault Prevention, Child Death Review, Federal Title X Family Planning, Perinatal Support, Enhanced Perinatal Care, Early Childhood Comprehensive Systems Planning, Prevention of Child Abuse and Neglect, Baby S.A.F.E. (Substance Abuse Free Environment), Family Strengthening and Support, and Hawaii Children's Trust Fund.

Children with Special Health Needs Branch. The Children with Special Health Needs Branch works to ensure that all children and youth with special health care needs will reach optimal health, growth, and development by improving access to a coordinated system of family-centered healthcare services and improving outcomes through systems development, assessment, assurance, education, collaborative partnerships, and family support. Programs include: Early Intervention, Genomics (Genetics, Birth Defects, Newborn Metabolic Screening, Newborn Hearing Screening), Healthy Child Care Hawaii, and Childhood Lead Poisoning Prevention.

WIC Services Branch. WIC (Special Supplemental Nutrition Program for Women, Infants, and Children) is a federally-funded program that provides Hawaii residents with nourishing supplemental foods, nutrition education, breastfeeding promotion, and health and social service referrals. The participants of WIC are pregnant, breastfeeding, or postpartum women, and infants and children under age five who meet income guidelines and are at medical or nutritional risk.

Emergency Medical Services and Injury Prevention System Branch

The mission of the Emergency Medical Services and Injury Prevention System is to administer, maintain, and operate the State Comprehensive Emergency Medical Services System, established under chapter 321, part XVIII, HRS, to minimize death, injury, and disability through a fully integrated network of personnel, equipment, and facilities for the effective and coordinated delivery of quality emergency medical care and injury prevention statewide.

Office of Health Care Assurance

The Office of Health Care Assurance (OHCA) performs all state licensing activities on healthcare facilities, agencies and organizations in Hawaii. This includes conducting all on-site state licensing surveys (inspections) and Medicare certification surveys (inspections) on behalf of the U.S. Centers for Medicare and Medicaid Services (CMS).

COUNTY OF KALAWAO

The County of Kalawao consists of that portion of the island of Molokai known as Kalaupapa, Kalawao, and Waikolu, commonly known as the Kalaupapa Settlement. As a county, it has only the powers especially conferred by sections 326-34 to 326-38, HRS. None of the provisions of the Hawaii Revised Statutes regarding counties are applicable to Kalawao.

The County of Kalawao is under the jurisdiction of the Department of Health. It is governed by the laws and rules relating to the Department and the care and treatment of persons with Hansen's disease.

Sheriff. The Sheriff is the only county officer of Kalawao. The Sheriff is generally a resident of the County appointed by the Department of Health.

ATTACHED FOR ADMINISTRATIVE PURPOSES

State Health Planning and Development Agency

The State Health Planning and Development Agency (SHPDA), established under section 323D-11, HRS, administers the state health planning and cost containment activities as required by law. Its principal function is to promote accessibility for all the people of the State to quality health care services at reasonable cost. It conducts studies and investigations as necessary as to the causes of health care costs including inflation. SHPDA promotes the sharing of facilities or services by health care providers whenever possible to achieve economies and restricts unusual or unusually costly services to individual facilities or providers where appropriate. The Agency serves as staff to and provides technical assistance and advice to the Statewide Health Coordinating Council (Statewide Council) and the subarea health planning councils (subarea councils) in the preparation, review, and revision of the State Health Services and Facilities Plan (HSFP). It conducts the health planning activities of the State in coordination with the subarea councils, implements the HSFP, and determines the health needs of the State after consulting with the Statewide Council. SHPDA also administers the state Certificate of Need (CON) Program pursuant to chapter 323D, part V, HRS.

Statewide Health Coordinating Council. The Statewide Health Coordinating Council (Statewide Council), established under section 323D-13, HRS, is advisory to SHPDA, and its membership does not exceed twenty. Members are appointed to four-year terms by the Governor with the advice and consent of the Senate. An ex officio, nonvoting member who is the representative of the U.S. Department of Veterans Affairs is designated by that Department. The members are broadly representative of the age, sex, ethnic, income, and other groups that make up the population of the State and include representation from the subarea councils, business, labor, and health care providers. A majority but not more than eleven of the members are consumers of health care who are not also providers of health care. A Chairperson is selected by the Council from among its members. The Council prepares and revises as necessary the HSFP; advises SHPDA on health planning and development actions under section 323D-12, HRS; appoints the review panel for CONs pursuant to section 323D-42, HRS; and reviews and comments upon the

following actions by SHPDA before they are made final: (a) making findings as to CON applications; and (b) making findings as to the appropriateness of those institutional and noninstitutional health services offered in the State.

Subarea Health Planning Councils. Subarea Health Planning Councils (Subarea Councils) are established under section 323D-21, HRS, for geographical areas designated by SHPDA in consultation with the Statewide Council. Each county has at least one Subarea Council. Members of Subarea Councils are appointed to four-year terms by the Governor with the advice and consent of the Senate. Nominations for appointment are solicited from health-related and other interested organizations and agencies, including health planning councils, providers of health care within the appropriate subarea, and other interested persons. Each Subarea Council reviews, seeks public input, and makes recommendations relating to health planning for the geographical subarea it serves. Each Subarea Council recommends for gubernatorial appointment at least one person from its membership to be on the Statewide Council.

Hawaii Health Systems Corporation

The Hawaii Health Systems Corporation (HHSC), established under section 323F-2, HRS, and governed by chapter 323F, HRS, is divided into five regional systems:

Region I: Oahu;

Region II: Kauai;

Region III: Maui;

Region IV: East Hawaii, comprising Puna, North Hilo, South Hilo, Hamakua, and Kau; and

Region V: West Hawaii, comprising North Kohala, South Kohala, North Kona, and South Kona.

Facilities in each region are as follows:

Oahu: Leahi Hospital and Maluhia;

Kauai: West Kauai Medical Center (Kauai Veterans Memorial Hospital and Medical Clinics) and Samuel Mahelona Memorial Hospital;

Maui: Maui Memorial Medical Center, Kula Hospital, and Lanai Community Hospital;

East Hawaii: Hilo Medical Center, Hale Hoola Hamakua, Kau Hospital, and Yukio Okutsu State Veterans Home; and

West Hawaii: Kona Community Hospital and Kohala Hospital.

Board of Directors. Under section 323F-3, HRS, HHSC is governed by an eighteen-member Board of Directors who are appointed as follows: (1) the Director of Health as an ex officio, voting member; (2) the five regional chief executive officers as ex officio, nonvoting members; (3) three members who reside on Maui, two of whom are appointed by the Maui Regional System Board and one of whom is appointed by the Governor, all of whom are voting members; (4) two members who reside in East Hawaii, one of whom is appointed by the East Hawaii Regional System Board and one of whom is appointed by the Governor, both of whom are voting members; (5) two members who reside in West Hawaii, one of whom is appointed by the West Hawaii Regional System Board and one of whom is appointed by the Governor, both of whom are voting members; (6) two members who reside on Kauai, one of whom is appointed by the Kauai Regional System Board and one of whom is appointed by the Governor, both of whom are voting members; (7) two members who reside on Oahu, one of whom is appointed by the Oahu Regional System Board and one of whom is appointed by the Governor, both of whom are voting members; and (8) one member appointed by the Governor who serves as an at-large voting member. Appointed county members serve four-year terms, and the at-large member serves a two-year term. The Board elects its Chair from among its members. The selection, appointment, and confirmation of any nominee is based on ensuring that board members have diverse and beneficial perspectives and experiences and that they include, to the extent possible, representatives of the medical, business, management, law, finance, and health sectors, and patients or consumers.

Regional System Boards. Under section 323F-3.5, HRS, a regional system board of directors is established to govern each of the five regional systems. Each Board consisted initially of twelve members appointed by the Governor: four (two each) by the President of the Senate and the Speaker of the House of Representatives; four from nominees submitted by the Regional Public Health Facility Management Advisory Committee, established under section 323F-10, HRS; three physicians from nominees submitted by the medical staff of the public health facilities in the regional system; and the HHSC Board Chairperson, or designee, who serves as an ex officio, nonvoting member of each Regional System Board. After initial terms of two or three years, all members appointed thereafter are appointed to three-year terms. New board members are selected by a two-thirds affirmative vote of the existing board members. Each Board consists of not less than seven and not more than fifteen members, as determined by the Board, and elects its own Chair. Except for ex officio members, all other board members are residents of the region.

Executive Office on Aging

The Executive Office on Aging (EOA), established under section 349-2, HRS, is the lead state agency in the coordination of a statewide system of aging and family caregiver support services. EOA's primary mission is the well-being of the State's approximately 277,000 older adults (sixty years and older) and their family caregivers. It provides leadership in programs for older adults, helps formulate aging policy, serves as a clearinghouse for information, and partners with the Aging Network to provide home- and community-based care for frail, vulnerable seniors.

Policy Advisory Board for Elder Affairs. The Policy Advisory Board for Elder Affairs, established under section 349-4, HRS, consists of not less than fifteen nor more than twenty-one members, a majority of whom are over sixty years of age and who are selected on the basis of their

interests and knowledge in and their ability to make contributions to the solution of problems relating to aging. The Board includes at least one member each from the counties of Hawaii, Maui, Kauai, and Honolulu. Members are appointed to four-year terms by the Governor with the advice and consent of the Senate. There may be up to ten members who serve as ex officio, nonvoting members and may consist of the heads of the following agencies that provide services or programs affecting elders: Health, Human Services, Education, Labor and Industrial Relations, Commerce and Consumer Affairs, University of Hawaii, Transportation, State Retirement System, or their designees, and by invitation, the Hawaii representatives of the U.S. Department of Health and Human Services and the Social Security Administration. The Chairperson is elected annually from the nongovernmental members of the Board. The Board advises the Director of EOA in the following areas: the identification of issues and alternative approaches to solutions; the development of position statements and papers; advocacy and legislative actions; and program development and operations.

Office of Environmental Quality Control

The Office of Environmental Quality Control (OEQC), established under section 341-3, HRS, and headed by the Director of Environmental Quality Control, reviews environmental assessments and impact statements, to ensure compliance with chapter 343, HRS, and Title 11, chapter 200, HAR, and informs the public of the availability of documents through the semi-monthly OEQC Bulletin to facilitate the required public review. OEQC works to assist in restoring, protecting, and enhancing the natural physical environment of the State by stimulating, expanding, and coordinating efforts of government agencies, industrial groups, and citizens.

Environmental Council. The Environmental Council, also established under section 341-3, HRS, consists of fifteen members who are appointed to four-year terms by the Governor with the advice and consent of the Senate. The Director of Environmental Quality Control (Director) serves as an ex officio, voting member. The Chairperson is elected by the Council from among its members. Members are appointed to ensure a broad representation of educational, business, and environmentally pertinent disciplines and professions. Pursuant to section 341-6, HRS, the Council serves as a liaison between the Director and the public on matters concerning ecology and environmental quality.

State Council on Developmental Disabilities

The State Council on Developmental Disabilities, is established under the federal Developmental Disabilities Assistance and Bill of Rights Act of 2000³ and section 333E-3, HRS. Pursuant to section 333E-4, HRS, the Council consists of voting members as described in federal law. Members are residents of the State. The Council includes in its membership six representatives from the neighbor islands with a minimum of one representative from Hawaii, Kauai, and Maui counties and representatives of the following, unless these programs no longer exist in the State: state entities that administer funds provided under federal law relating to

³ See P.L. 106-402; 42 U.S.C. 15001 et seq.

individuals with disabilities, including the Rehabilitation Act of 1973,⁴ Individuals with Disabilities Education Act of 2004,⁵ Older Americans Act of 1965,⁶ and Titles V (Maternal and Child Health Services Block Grant)⁷ and XIX (Grants to States for Medical Assistance Programs)⁸ of the Social Security Act;⁹ university centers for excellence in developmental disabilities education, research, and service; the state protection and advocacy system; and local and nongovernmental agencies and private nonprofit groups concerned with services for individuals with developmental disabilities in this State. Sixty percent of the membership consists of individuals with developmental disabilities, or immediate relatives or guardians. The Chairperson is elected by the voting members from among the appointed members.

The Council develops the State Plan for Individuals with Developmental Disabilities, which guides the development and delivery of all services to those individuals; encourages efficient and coordinated use of federal, state, and private resources in the provision of services; monitors, evaluates, and comments upon implementation plans of the various public and private agencies for individuals with developmental disabilities; advocates for the needs of individuals with developmental disabilities before the Legislature and the public and to the Governor; acts in an advisory capacity to the Governor, the Legislature, and all concerned department heads on all issues affecting individuals with developmental disabilities; and supports and conducts outreach activities to identify individuals with developmental disabilities and their families to obtain services, individualized support, and other forms of assistance, including access to special adaptation of generic community services or specialized services.

Disability and Communication Access Board

The Disability and Communication Access Board (DCAB), established under section 348F-2, HRS, is composed of seventeen members who are appointed to four-year terms by the Governor with the advice and consent of the Senate, including at least nine persons with various types of disabilities, or their parents or guardians, and at least one resident from each of the counties of Honolulu, Hawaii, Maui, and Kauai. Among its functions, the Board establishes guidelines and reviews plans for the construction of state and county buildings and facilities, under section 103-50, HRS; establishes guidelines for communication access services, including determining the qualifications of interpreters and credentialing sign language interpreters who do not possess national certification; administers the statewide program for parking for persons with disabilities; serves as public advocate of persons with disabilities; serves as the state coordinator for compliance with the Americans with Disabilities Act of 1990;¹⁰ and advises the State and counties on meeting the requirements for state, federal, and county laws providing for access for persons with disabilities.

⁴ See P.L. 93-112; 29 U.S.C. 701 et seq.

⁵ See P.L. 108-446; 20 U.S.C. 1400 et seq.

⁶ See P.L. 89-73; 42 U.S.C. 3001 et seq.

⁷ See P.L. 97-35, Title XXI, section 2192(a), 95 Stat. 818; 42 U.S.C. 701 et seq.

⁸ See P.L. 89-97, Title I, section 121(a); 42 U.S.C. 1396 et seq.

⁹ See P.L. 74-271; 42 U.S.C. 301 et seq.

¹⁰ See P.L. 101-336; 42 U.S.C. 12101 et seq.

Hawaii Early Intervention Coordinating Council

The Hawaii Early Intervention Coordinating Council, established under section 321-353, HRS, consists of twenty-five members who are appointed to three-year terms by the Governor without the necessity of the advice and consent of the Senate. Members are selected from the following: (1) at least twenty percent of the members are parents of infants or toddlers with special needs, or children with special needs aged twelve years or younger, with knowledge of, or experience with, programs for infants and toddlers with special needs; provided that at least one parent is a parent of an infant or toddler with special needs or of a child with special needs aged six years or younger; (2) at least twenty percent of the members are public or private providers of early intervention services; (3) two members are from the Legislature, of which one member is selected by the President of the Senate and one member by the Speaker of the House of Representatives; (4) one member is involved in personnel preparation; (5) one member is from the Department of Health program involved in the provision of, or payment for, early intervention services to infants and toddlers with special needs and their families and who has sufficient authority to engage in policy planning and implementation on behalf of the program; (6) one member is from the Department of Health program responsible for children's mental health; (7) one member is from the Department of Education program responsible for preschool services to children with disabilities who has sufficient authority to engage in policy planning and implementation on behalf of the program; (8) one member is from the Department of Education program responsible for the coordination of education of homeless children and youths; (9) one member is from the Department of Human Services program responsible for the state Medicaid program; (10) one member is from the Department of Human Services program responsible for child care; (11) one member is from the Department of Human Services program responsible for foster care; (12) one member is from the Department of Commerce and Consumer Affairs program responsible for state regulation of health insurance; (13) one member is from a Head Start or Early Head Start agency or program in the State; and (14) other members who are involved in or interested in services to infants and toddlers with special needs and their families and who are selected by the Governor. The Council elects its officers.

The Council advises and assists the Director of Health in the identification of the sources of fiscal and other support for services for early intervention programs, assignment of financial responsibility to the appropriate agency, and the promotion of the interagency agreements; advises and assists the Department of Health in the preparation of applications and amendments thereto; advises and assists the Department of Education regarding the transition of toddlers with special needs to preschool and other appropriate services; and prepares and submits an annual report to the Governor on the status of early intervention programs for infants and toddlers with special needs and their families within the State.

Hawaii State Emergency Response Commission

The Hawaii State Emergency Response Commission, established under section 128E-2, HRS, consists of the following members who are appointed to four-year terms by the Governor with the advice and consent of the Senate: (1) Director of Health; (2) Chairperson of the Board of Agriculture; (3) Adjutant General; (4) Director of Labor and Industrial Relations;

(5) Chairperson of the Board of Land and Natural Resources; (6) Director of the Office of Environmental Quality Control; (7) Director of Business, Economic Development and Tourism; (8) Director of Transportation; (9) Dean of the University of Hawaii School of Public Health or Dean of the University of Hawaii School of Medicine, as determined by the Governor; (10) Director of the Environmental Center of the University of Hawaii; (11) one representative from each committee designated by the mayor of each respective county; and (12) other persons appointed by the Governor to meet the minimum requirements of the federal Emergency Planning and Community Right-to-Know Act of 1986.¹¹ The Director of Health is the Chairperson of the Commission.

Among its functions, the Committee carries out the duties and responsibilities of a state emergency response commission as specified in the Emergency Planning and Community Right-to-Know Act of 1986; develops state contingency plans relating to the implementation of chapter 128E, HRS; and develops a public information, education, and participation program for the public and facility owners covering the requirements of chapter 128E, HRS, the interpretation of the chemical information collected, and the risks that these chemicals pose to the public health and environment.

State Emergency Medical Services Advisory Committee

The State Emergency Medical Services Advisory Committee, established under section 321-225, HRS, consists of twenty members as follows: three ex officio, nonvoting members, who are the Director of Transportation, Adjutant General, and Administrator of the State Health Planning and Development Agency, or designees, and seventeen members representing all counties who are appointed to four-year terms by the Governor with the advice and consent of the Senate as follows: (1) five members who are physicians experienced in the conduct and delivery of emergency medical services, of whom at least two are engaged in the practice of emergency medicine and are board-eligible or board-certified by the American Board of Emergency Medicine, and at least one physician is engaged in the practice of pediatrics and be board-eligible or board-certified by the American Board of Pediatrics; (2) four members who are consumers of health care and who have no connection with or relationship to the health care system of the State and who are representative of all counties; (3) four members of allied health professions related to emergency medical services; and (4) four members, one from each county, who are mobile intensive care technicians or emergency medical technicians engaged in the practice of pre-hospital emergency medical service. The Chairperson is elected by the Committee from among its members. The Committee sits in an advisory capacity to the Department of Health on all matters relating to the state comprehensive pre-hospital emergency medical services system.

Hawaii Advisory Commission on Drug Abuse and Controlled Substances

The Hawaii Advisory Commission on Drug Abuse and Controlled Substances, established under section 329-2, HRS, consists of not more than fifteen nor less than nine members who are

¹¹ See P.L. 99-499, Title III, 100 Stat. 1728; 42 U.S.C. 11001 et seq.

appointed to four-year terms by the Governor with the advice and consent of the Senate. Members are selected on the basis of their ability to contribute to the solution of problems arising from the abuse of controlled substances and, to the extent possible, represent the pharmacological, medical, community and business affairs, youth action, educational, legal defense, enforcement, and corrections segments of the community. One appointed member is a member of the State Council on Mental Health established by section 334-10, HRS, and is knowledgeable about the community and the relationships between mental health, mental illness, and substance abuse. The Department of Health appoints an ex officio, nonvoting representative to the Commission who regularly attends meetings of both the Commission and the State Council on Mental Health and makes regular reports to both bodies. The Commission elects a Chairperson from among its members.

The Commission assists the Department of Health in coordinating all action programs of community agencies (state, county, military, or private) specifically focused on the problem of drug abuse; assists the Department in carrying out educational programs designed to prevent and deter abuse of controlled substances; creates public awareness and understanding of the problems of drug abuse; sits in an advisory capacity to the Governor and other state departments as may be appropriate on matters relating to the Commission's work; and acts in an advisory capacity to the Director of Health in substance abuse matters under section 321-194, HRS.

State Council on Mental Health

The State Council on Mental Health, established under section 334-10, HRS, consists of twenty-one members who are appointed to four-year terms by the Governor with the advice and consent of the Senate. In making appointments to the Council, the Governor ensures that: all service area boards of the State are represented; a majority of the members are nonproviders of mental health or other health services; and a majority of the members are not state employees. The number of parents of children with serious emotional disturbances must be sufficient to provide adequate representation of such children in the deliberations of the Council. The Council is composed of residents of the State, including individuals representing: (1) the principal state agencies with respect to mental health, education, vocational rehabilitation, criminal justice, housing, Medicaid, and social services; (2) public and private entities concerned with the need, planning, operation, funding, and use of mental health services and related support services; (3) adults with serious mental illnesses who are receiving, or have received, mental health services; (4) the families of such adults or families of children with serious emotional disturbances; and (5) the Hawaii Advisory Commission on Drug Abuse and Controlled Substances who is a person knowledgeable about the community and the relationships between mental health, mental illness, and substance abuse. The Council elects a Chairperson from among its members.

The Council advises the Department of Health on allocation of resources, statewide needs, and programs affecting two or more service areas; reviews and comments on the statewide comprehensive integrated service plan; and serves as an advocate for adults with serious mental illness, children with serious emotional disturbances, other individuals with mental illnesses or emotional problems, and individuals with combined mental illness substance abuse disorders.

Service Area Boards on Mental Health and Substance Abuse

Service Area Boards are established under section 334-11, HRS. One of the functions of the Department of Health in mental health, under section 334-3(c)(3), HRS, is to appoint a Service Area Administrator in each county who is responsible for the development, delivery, and coordination of services in that area. A Service Area Board is established to advise each Service Area Administrator. Each Board consists of nine members, appointed by the Governor, who serve for terms determined by the Governor. After the initial appointees, the Governor fills each vacancy by appointing a member from a list of four persons submitted by that Board. Members of the Board are service area residents who are consumers or nonproviders of mental health services and service area providers with a majority being non-state employees and nonproviders of mental health or other health services. Each Board elects a Chairperson from among its members.

Each Service Area Administrator and Board, in consultation with public and private providers, participates in the development of comprehensive integrated service area plans and budgets. Each Board advises the Service Area Administrator about service area needs to prevent and treat mental or emotional disorders, combined mental illness substance abuse disorders, and persons afflicted by these disorders; and provides advice, guidance, and recommendations to both the Advisory Commission on Drug Abuse and Controlled Substances and the State Council on Mental Health, as it deems appropriate.

Office of Language Access

The purpose of the Office of Language Access (OLA), established under section 321C-6, HRS, is to address the language access needs of limited English proficient persons and ensure meaningful access to services, programs, and activities offered by the executive, legislative, and judicial branches of state government, including departments, offices, commissions, boards, or other agencies, and all covered entities,¹² for limited English proficient persons.

Language Access Advisory Council. The Language Access Advisory Council, established under section 321C-7, HRS, consists of seventeen members who are appointed to four-year terms by the Governor with the advice and consent of the Senate as follows: (1) one representative from the state government; (2) one representative from a covered entity; (3) one bilingual worker who is or has been employed by a state-funded immigrant service agency or program; (4) one representative of an advocacy organization that provides services to limited English proficient persons; (5) one member from the limited English proficient population who has an interest in the provision of oral language services; (6) one representative from an accredited institution of higher learning who provides professional training in interpretation and translation; (7) one representative of a Hawaiian language advocacy organization; (8) one representative of a professional interpreter's organization; (9) one representative of a bilingual referral service or program; (10) one representative residing in the County of Hawaii who has shown interest in

¹² "Covered entity" means a person or organization receiving state financial assistance, including grants, purchase-of-service contracts, or any other arrangement by which the State provides or otherwise makes available assistance in the form of funds to the person or organization for the purpose of rendering services to the public, with certain exceptions. See section 321C-2, HRS.

language access; (11) one representative residing in the County of Kauai who has shown interest in language access; (12) one representative residing in the County of Maui who has shown interest in language access; (13) one representative residing in the City and County of Honolulu who has shown interest in language access; (14) one member at large; (15) the Executive Director of the Hawaii Civil Rights Commission or authorized representative, as an ex officio member; (16) one representative from the Disability and Communication Access Board, as an ex officio member; and (17) the Executive Director of OLA, as an ex officio member. The Council selects one of its members to serve as Chair.

The Council serves in an advisory capacity to the Executive Director of OLA, providing input on: implementation and compliance with chapter 321C, HRS; the quality of oral and written language services provided under chapter 321C, HRS; and the adequacy of a state agency or covered entity's dissemination and training of its employees likely to have contact with limited English proficient persons, its policies and procedures for language services, its competency in working effectively with in-person and telephone interpreters, and its understanding of the dynamics of interpretation between clients, providers, and interpreters.

Tobacco Prevention and Control Advisory Board

The Tobacco Prevention and Control Advisory Board, established under section 328L-6, HRS, consists of eleven members: (1) one member of the Governor's staff, appointed by the Governor; (2) one member appointed by the Governor from a list of two names submitted by the President of the Senate; (3) one member appointed by the Governor from a list of two names submitted by the Speaker of the House of Representatives; (4) the Director of Health or designee; (5) the Superintendent of Education or designee; (6) three members having demonstrated interest in and having backgrounds beneficial to controlling and preventing the use of tobacco, appointed by the Director of Health; and (7) three members representing populations at risk for tobacco use, appointed by the Governor. Members serve three-year terms.

The Board, in collaboration with the Department of Health, develops a strategic plan for tobacco prevention and control, including: (1) developing and implementing effective and cost efficient programs, including health promotion and disease prevention; (2) developing adequate standards and benchmarks by which measures of program success may be appropriately evaluated; and (3) assessing the effectiveness of programs engaged in health promotion and disease prevention.

Radiologic Technology Board

The Radiologic Technology Board, established under section 466J-2, HRS, consists of ten members who are appointed to four-year terms by the Governor with the advice and consent of the Senate. The membership consists of: (1) two persons licensed to practice medicine or osteopathic medicine pursuant to chapter 453, HRS, and certified by the American Board of Radiology; (2) four persons, each with at least five years' experience and certified in the practice of radiography, two of whom are engaged in the hospital practice of radiography; (3) one person with at least five

years' experience who is certified and engaged in the practice of radiation therapy technology; (4) one person with at least five years' experience, who is certified and engaged in the practice of nuclear medicine technology; (5) one person from the general public; and (6) the Director of Health, or designee, is the tenth, ex officio, voting member. The Board selects its Chairperson from among its members.

Among its duties, the Board determines minimum standards for and approves educational institutions that provide a course of instruction in radiologic technology that meets the requirements of chapter 466J, HRS; withdraws or denies approval of educational institutions for failure to meet prescribed standards; examines qualified applicants; grants, denies, suspends, or revokes licenses; imposes administrative remedies that are authorized by chapter 466J, HRS; and imposes such conditions as may be necessary in connection with the granting, denial, suspension, or revocation of licenses.

Board of Certification of Public Water System Operators

A Board of Certification of Public Water System Operators, established under section 340F-4, HRS, consists of five members who are appointed to four-year terms by the Governor. Four members are duly qualified in the fields of sanitary engineering or public water system operation, and one is from the state agency responsible for the State's safe drinking water program. The Board elects one of its members to serve as Chairperson.

Among its duties under section 340F-11, HRS, the Board revokes, suspends, or refuses to renew any certificate of any individual, following a hearing before the Board, when it is determined that: the individual has practiced fraud or deception; reasonable care, judgment, or the application of the individual's knowledge or ability was not used in the performance of the individual's duties; or the individual is incompetent or unable to properly perform the individual's duties. The Board also establishes and collects fees for applications, conducts examinations, issues or renews certificates as are necessary for the support of chapter 340F, HRS, and oversees the development and implementation of a continuous training program if necessary.

Board of Certification of Wastewater Treatment Personnel

A Board of Certification of Wastewater Treatment Personnel, established under section 340B-4, HRS, consists of nine members appointed to four-year terms by the Governor: (1) four individuals employed in a wastewater treatment plant either as a certified operator or certified supervisor of a wastewater treatment plant, three of whom are employed in the neighbor island counties, one each from the counties of Hawaii, Kauai, and Maui; (2) one individual who is an active member of the Hawaii water pollution control association; (3) one individual who is a professional engineer in private practice, preferably specializing in sanitary engineering; (4) one individual who is a member of the engineering (environmental or sanitary) faculty of a university or college in the State; (5) one individual from the state agency responsible for the State's water quality program; and (6) one individual from the private sector interested in the field of water pollution control. The Board elects one of its members to serve as Chairperson.

Among its duties under section 340B-11, HRS, the Board revokes, suspends, or refuses to renew any certificate of any individual, following a hearing before the Board, when it is determined that: the individual has practiced fraud or deception; reasonable care, judgment, or the application of the individual's knowledge or ability was not used in the performance of the individual's duties; or the individual is incompetent or unable to properly perform the individual's duties. The Board also establishes and collects fees for applications, conducts examinations, issues or renews certificates as are necessary for the support of chapter 340B, HRS, and oversees the development and implementation of a continuous training program if necessary.

DEPARTMENT OF HEALTH

