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**WRITTEN TESTIMONY IN SUPPORT OF HB537 WITH AMENDMENTS:  
Mental Health Law - Petitions for Emergency Evaluations - Procedures**

**Health and Government Operations Committee - February 16, 2021**

Thank you Madam Chair Pendergrass, Vice Chair Pena-Melnyk, and committee members for all of the hard work you've done and are doing to improve the availability of healthcare services for Marylanders of all ages. My name is Michelle Livshin and I am representing On Our Own of Maryland. We are the oldest and largest statewide behavioral health (BH) peer training and advocacy organization in the nation. Our network consists of 23 affiliated community-based peer centers throughout the state that offer immediate, voluntary, recovery support services to those with BH challenges. Many of our members have experienced the Emergency Petition (EP) process and received treatment in state and/or private psychiatric hospitals and community-based programs.

On Our Own of Maryland is writing to provide our **support of HB0537 with strong encouragement that the body consider including *amendments that would require an annual education and training requirement to inform clinicians and law enforcement officers of these updates to the protocols and responsibilities associated with the Emergency Petition process.*** Such amendments will help ensure this change to the statute results in the real and positive impact it hopes to achieve.

As a community of people with lived experience of BH challenges, we applaud initiatives that help to decriminalize BH crises and minimize interactions with law enforcement - especially with officers who have not received Crisis Intervention Training - to the greatest extent possible. By removing the absolute requirement that law enforcement be involved in every EP by default, and instead allowing clinicians to use their professional training and judgement when determining the best option for transporting an individual for psychiatric evaluation, we believe this bill could significantly reduce the potential for further trauma and harm during an already difficult BH crisis situation.

In order for this bill to be truly effective in clearing the pathway for individuals to access emergency psychiatric care in the most timely, supportive, and safe manner, it must also prevent confusion and misinformation related to this shift in EP procedures. A lack of clarity about roles and responsibilities between clinical and law enforcement teams could lead to disastrous delays in connecting individuals in crisis to appropriate evaluation and treatment services. We believe it is necessary to amend the bill to assign clear responsibility for effectively disseminating proper informational resources and to provide education and training to the relevant professionals who take part in the updated EP process.

HB 537 has the potential to be a live-saving bill by providing an alternative approach to engaging with a crisis situation that increases the dignity and safety of individuals in crisis, and paves the way for the expansion of mobile crisis and community response teams. **We urge you to work with stakeholders to amend and approve House Bill 537.**