

## TESTIMONY IN SUPPORT OF S.B. 994

My name is Vanessa Brooks. I am a constituent in Baltimore County, Maryland, and the parent of an adult child with a mental health diagnosis.

I am writing in support of the bill S.B. 994 --  
Public Health -Mental Health Advance Directives-Awareness and Statewide Database

I am in favor of the bill for the following reasons:

- 1) Advance directives are part of current law to deal with future health care issues, but their use is neither widely promoted nor encouraged, particularly for mental health care patients. The public campaign for the use of advance directives in the case of mental health crises will better serve patients, providers and first responders who may not know how to address an individual's needs when incapacitated during a mental health crisis.
- 2) The bill allows for patients in the mental healthcare system to voluntarily elect to provide directives on their mental healthcare status, medications and/or other information that can be accessed through a database by healthcare professionals, first responders and a limited number of other public officers.
- 3) A database with the information provided by mental healthcare patients will enable mental health care professionals and first responders to provide immediately the necessary emergency care to patients based on the directive on file when the patient is in crisis or otherwise unable to articulate their mental health needs. This is especially important when such patients are a danger to themselves or to others.
- 4) A directive could have the effect of keeping an individual within the boundaries of the mental healthcare system and out of the criminal justice system if their mental health needs are known in advance of an intervention by the police or their information is accessible when first responders first engage a mental health patient in crisis.
- 5) Such a directive on file will better assist mental health care providers, public officers or first responders who may access to that individual's information on mental health care status, diagnosis, medications when notified by unrelated persons witnessing a mental healthcare patient in crisis.

I am the parent of an individual with mental healthcare needs that requires therapy, medications, as well as consistent attention to her mental healthcare needs. She has several diagnoses including autism. This legislation would benefit her in the future and clearly could have benefitted her in past circumstances. Because she is in the mental health care system, I have witnessed several incidents where access to her mental healthcare information by first responders or mental healthcare professionals could have better served her immediate needs if a directive had been accessible. I will give just one example.

In one instance my daughter was restrained by security in a public community college setting in a manner that triggered her PTSD and a mental health crisis. She was the victim of bullying

resulting in her being held by the security at a community college because of her mental distress and an outburst where her words suggested she may be suicidal. While in “custody” of college security she began to knit to calm herself down. Because she refused to comply with the security guards’ request for her to put away her knitting, her coping mechanism when distressed, the security guards held her over a table and handcuffed her behind her back. By handcuffing her the security guards triggered a fight and flight response. They called the County police who ultimately elected not to take her into custody as they determined that her reaction was reasonable based on her ability to explain how the physical handling by the security guards triggered her memory of a traumatic event, a previous assault. This could have gone very differently if she had not been able to articulate the triggering response to being handcuffed and restrained. With access to an advanced directive in an accessible database, the police could have immediately understood what type of intervention may trigger her PTSD. Under the same circumstances a less articulate or more distressed individual may have unnecessarily ended in police custody or worse, the criminal justice system.

My daughter has friends who are patients in the mental healthcare system and have telephoned my daughter when in crisis. I have on occasion had to intervene. In doing so, I have been able to provide useful information to first responders because I knew these individuals, their mental healthcare status, and circumstances. Without that knowledge I am not certain that the friend in crisis would have received the same treatment from first responders. An advance directive in a database could have the additional benefit to such individuals by enabling providers in the emergency setting to administer the appropriate medications or treatment options immediately.

Finally, a public campaign is necessary to promote and encourage mental health care patients to prepare advance directives. Such a campaign would have to emphasize that HIPAA compliance and privacy protections would apply to advance directives in a database that was limited in access and inaccessible to the public, insurance companies, or other private entities that presently require the patient’s approval for disclosure of health status and other medical information.

In conclusion, I encourage passage of S.B.994 by the Senate as the next step in improving the mental health care system for Marylanders. Accessibility of the information in the database would require protection and privacy for many people to willingly disclose the information necessary to make the database an effective tool.

Respectfully submitted,

Vanessa Brooks  
14104 Woodens Ln  
Reisterstown, MD

