

SB 480, Mental Health Law -Assisted Outpatient Treatment Programs

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Montgomery County

Position: SUPPORT

I am the Co-Owner of Help in the Home LLC. Our agency provides support to people with severe and persistent mental illness. Services range from coordinating the care outlined by various treatment providers to daily support with med monitoring, meal prep household chores etc. Treatment compliance is key to the stabilization and recovery.

AOT has been shown to improve treatment compliance: 90% of AOT recipients interviewed said AOT made them more likely to keep appointments and take medication. AOT has been shown to reduce hospitalizations, arrests, incarcerations, homelessness, violence, and victimization in states where it is practiced. Finally, AOT improves quality of life: 81% of patients in New York's program said AOT helped them to get and stay well; 75% said it helped them gain control over their lives.

I am aware of two individuals who would currently benefit from the passing of this bill. The first is a young man who has walked away from every treatment center his parents have found for him. He refuses to meet with psychiatrist therapist or participate in treatment. Currently, he is living with his girlfriend losing weight and increasing in social isolation. We are doing our best to monitor his condition for the development of physical/psychiatric conditions that meet criteria for an emergency petition. This is a painfully slow process that merely hopes we will be able to identify this BEFORE a fatal tragedy occurs.

Our only hope of getting treatment for Sam is through an emergency petition. However without the passing of this AOT bill the emergency petition will allow for little real progress as it is likely that once he is stable enough to be discharged (i.e. no longer an immediate danger to himself or others, he will be discharged to repeat the same cycle of refusing to go to appointments and decompensating until hospitalization is once again needed. With AOT Sam would be much more likely to follow up with aftercare treatment thereby increasing his prognosis for stabilization and recovery.

Barbara is the second person I know who refuses to attend follow-up treatment. She is a woman in her late 50s who has lived a life of psychiatric torment. Barbara is hospitalized on a very frequent basis for suicidality and medical issues that arise from self-neglect. Because she does not follow up with treatment after discharge, Barbara's periods of time out of the hospital grow shorter and shorter as her symptoms grow more severe with age. I believe Barbara is an example of how AOT will save the state money by decreasing the time she spends in the hospital.

Sincerely,

Rayetta Michael

Co-Owner, Help in the Home LLC