

Testimony for HB576 Mental Health - Emergency Evaluation and Involuntary Admission
Procedures and Assisted Outpatient Treatment Programs
House Health and Government Operations Committee
Date: February 14, 2024
From: Terry Fitzpatrick, Bel Air, Harford County, MD
Position: SUPPORT

My son (Josh) was diagnosed in 2004 at age 18 with schizoaffective disorder. He has had 17 hospitalizations in 11 years. This includes two separate admissions of three months each in New York and NJ because hospitals in Maryland would never keep him until he was stable. The system has failed over and over at providing the long-term care he needs.

Trying to find outpatient treatment that he "qualifies for" has been hard. My son had taken himself to the hospital saying he felt extremely depressed and wanted help. He was evaluated at the hospital VOLUNTARILY only to be told, "You seem okay and don't meet the requirements for the day hospital."

After being discharged from a structured inpatient environment, my son starts to go downhill from not having the structure he needs. When he becomes less organized in his thinking, he misses appointments and then a therapist or psychiatrist will decide to "discharge him from care." This results in more deterioration and the frustration of trying to find a new doctor or therapist. With his frustration, anxiety and depression he will start self-medicating with alcohol and marijuana. This behavior completes the downward spiral, and he once again ends up in the emergency room.

Instead of the "revolving door" of short stay hospitalizations and unsupervised outpatient care, my son would benefit from longer inpatient treatment followed by **Assisted Outpatient Treatment** and if possible, housing.

Patients with other complex care needs, like those on kidney dialysis have elaborate and extensive outpatient plans put into place before discharge to the community to avoid deterioration and re-hospitalization. Those with serious mental illness require the same attention to detail. It is truly a "revolving door" of insanity for the patient and the family.

Targeted mandatory **Assisted Outpatient Treatment** for people like my son could help him succeed in his treatment and prevent the suffering that has been a part of his life of these last 18 years.

Please support HB576. I need the support it could bring to my son and my family. We need Assisted Outpatient Treatment available state-wide.