

Eichenberger_HB 576 _Support

Testimony for Emergency Evaluation and Involuntary Admission Procedures and Assisted Outpatient Treatment Programs

Date: 2/12/2024

From: Marianne Eichenberger, Howard County

Position: SUPPORT

I am an advanced practice mental health nurse of 40 years living in Howard County. I support the bill for Emergency Evaluation and Involuntary Admission Procedures and Assisted Outpatient Treatment Programs. I have worked with many seriously mentally ill clients that due to their illness (delusions and /or hallucinations) have refused treatment and ended up homeless or worse arrested for a criminal behavior and hospitalized in a forensic mental health facility. It is critical to get these individuals whose judgment, reasoning and/or inability to control their behaviors into treatment so they can make informed decisions regarding their future treatment.

The evidence shows that severely mentally ill clients that do not receive treatment in earlier stages of their illness or that have had to have multiple re-stabilization have a poorer response to future treatment and poorer long-term outcomes.

I have worked with a client that due to severe paranoia and delusions that she was being poisoned remained on the streets homeless, awake, fearful, and begging for food every night because the individual had been raped in a shelter. She would be taken by the police or crisis team via emergency petition for evaluation and admitted for short-term treatment. The client was admitted numerous times to short stay admissions and consistently re-discharged to the shelter as she refused voluntary outpatient treatment. This client finally ended up in the forensic system where they were able to get treatment. I began treating this client in the outpatient setting after the forensic hospitalization and the client was on SSDI, living in a group home and beginning to start the process to work again. During my time treating her, she was able to live independently, work part-time, continue in treatment, and get her first pet. It took the client 8 years to get to this point. An Assisted Outpatient Treatment Program would have begun the treatment process at a time when the client's judgment and ability to reason were seriously impaired. It would have been much more cost effective, safer for the client, and much more humane.

I ask all members to support this bill, the families/significant others and the seriously mentally ill.

I appreciate the time you have taken to consider this vital issue.

Marianne Eichenberger, RN, PhD