

March 7, 2024

Chair Clippinger, Vice Chair Bartlett, and distinguished members of the Judiciary Committee,

NAMI Maryland and our 11 local affiliates across the state represent a network of more than 58,000 families, individuals, community-based organizations, and service providers. NAMI Maryland is a 501(c)(3) non-profit dedicated to providing education, support, and advocacy for people living with mental illnesses, their families, and the wider community.

NAMI MD applauds the sponsors of this bill that alters reporting requirements for correctional units related to restrictive housing, and offers concise definitions for administrative segregation, restrictive housing, and disciplinary segregation. The bill also requires hearing officers and personnel in the supervision and care of individuals placed in restrictive housing to undergo certain training.

NAMI MD believes that education about serious mental illness at all levels of judicial and legal systems is crucial and that personnel should be required to complete a minimum of 20 hours of training.

Additionally, we appreciate the increased reporting for vulnerable individuals with serious mental illnesses placed in restrictive housing and the requirement to report steps taken to improve the conditions of confinement by allowing opportunities for out of cell time, congregate activities, daily outdoor recreation time, and the requirement to create de-escalation spaces and residential rehabilitation units (separate units for therapy/treatment and rehabilitative programming).

Compared with other prisoners, prisoners with mental illness have higher rates of restrictive housing. NAMI MD calls upon state and other correctional authorities to provide mental health care alternatives to solitary confinement that include enhanced mental health treatment, services and programs, crisis intervention training for correctional officers and mental health step-down units. States that have adopted such proactive efforts to eliminate solitary confinement have documented highly positive results that include reduced psychiatric symptoms, less violence, and significant cost savings.

Overall, this bill, if enacted, would result in a huge improvement to the current system of restrictive housing in State correctional facilities.

However, we request that Sec. 10-1003 (D) be amended to include notification of a designated family member or attorney of the enumerated information regarding the individual's placement in restrictive housing. Family members are a central resource in the treatment of juveniles and adults living with serious mental illnesses. In some instances, individuals with serious mental illness may lack capacity to understand the facts and circumstances that led to the individual placement in restrictive housing. In these instances, the designated family member or attorney should be notified.

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Additionally, (E) and (F) should be amended to include a designated family member or attorney as well. We need to protect patients with serious mental illnesses that lack the capacity to contest their placement in restrictive housing on their own volition. By including a designated family member or attorney in these sections, we are offering further protection for individuals with serious mental illnesses that aren't competent at the time of their placement.

For these reasons, we urge a favorable report but do request consideration of the aforementioned amendments.

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