

Testimony - Jennifer Pepin

Senate Health Committee – Monday, May 18, 2015

Support of HB 2948 and 2023

Hello Chair Monnes-Anderson and Vice Chair Kruse, esteemed members of the committee... My name is Jennifer Pepin. I am, myself, diagnosed with bipolar but today I'm here as the loved one involved in my fiancé's hospitalization after a suicide attempt this past summer. I urge you to pass House Bills 2948 and 2023 because I believe they will help people like us.

When Chris was brought by ambulance to the emergency room he said "when I go home, I am just going to do it again until I am dead." Although this was said through the many pills he had swallowed and he may not even recall making that statement, I believe had it not been for proper treatment and planned out aftercare, it would have become our reality.

Immediately with my arrival to the hospital I was faced with having to advocate for Chris. He was left in a room in emergency with no clear plan of what steps were going to be taken. He was in no state to ask for assistance himself and I couldn't get anyone to explain things to me, even though he had signed a release. After about 17 hours and my persistent inquiries, they finally told me they arranged for him to be transferred to an inpatient program.

Not in his right mind, Chris wanted to come home immediately. He was on a hold and had no choice but to stay. However, once that was lifted (without notice to me), he said he was packed and ready for me to pick him up. At this point, he was not stable, had not been through any proper diagnosis, treatment, or therapy.

I never spoke to a Dr. nor was I included into the discharge plan and I began to panic at the thought of Chris coming home. My questions were, will he try again to end his life? What are the next steps? Is he just supposed to go home and fall into old routines that led him here in the first place?

I told him that I would not let him come home unless there was a schedule mapped out including all appropriate after care. It was only because of a friend and mental health advocate that I even had the strength or knowledge to say those things. I was wishing there was someone on the other end at the hospital who would be telling Chris the same thing. But I had no idea what was being told to him.

Fortunately, after an adverse reaction to new medication Chris agreed to stay longer at the hospital. This gave us time to come up with something on our own for aftercare. Without me speaking to his dr, we wrote out the days of the week and I made chris outline what his daily recovery would look like including dr appointments and activities.

I had nobody at the hospital guiding me if this was the right plan. Even when they eventually had a discharge plan, I was not a part of that process, even though Chris had signed a release to involve me. I did not know what his discharge or after care plan included. Because of the lack of my involvement I was quite anxious about Chris' return. I had absolutely no idea whether he would follow my plan or if there was further information from the dr. I didn't know about. It would have been more appropriate for us to knowingly be giving Chris the same message. And remember, I myself live with bipolar disorder – this lack of communication and coordinated planning was not healthy for either of us.

I am so grateful that 10 months later Chris is doing very well. I believe that although the plan he followed was created on my own, it was following this regimented recovery plan that has made the difference for him. It would have made everyone involved feel much safer to have had an opportunity to work directly with the medically informed Dr's. who would have known more than I did.

When faced with that situation, it is incredibly difficult to think straight and had it not been for my friend's help I would not have known what to ask or plan for. It is so important that there is a set standard to guide both Dr's and families to accommodate the release of a patient from the hospital.

Thank your time and attention.