

Testimony in Strong Support of SB 762

TO: Senate Committee on Judiciary FROM: Treatment Advocacy Center

HEARING: Monday March 18, 2019 at 8:00 am, Hearing Room C

Dear Chair Prozanski, Vice-Chair Thatcher, and members of the Committee on Judiciary:

The Treatment Advocacy Center is a national nonprofit dedicated to eliminating barriers to treatment for individuals with severe mental illness. We analyze the laws of each state to identify legislative changes that remove obstacles to timely and effective treatment for individuals in the appropriate and least-restrictive setting. We hear from many families in Oregon desperately trying to get help for loved ones, who are struggling against a system that seems impenetrable.

Medical professionals, practitioners and advocates will provide testimony on the need for the reforms contemplated in SB 762. I am writing to provide context on the practice of other states and the reason that extending the period of time allowed for stabilization is advisable from a policy and systemic perspective.

Each state has the right to determine what time limit to put on emergency custody before judicial review is warranted. There are multiple ways to address judicial review as well. The only limit placed upon what a legislature may do in this regard is that it is bounded by the federal and relevant state constitutions.

SB 762 authorizes a period of custody for stabilizing a person in psychiatric crisis that is well within the range of what is authorized in other states. There is likewise nothing within the federal or Oregon constitutions, or related case law, that would run afoul of either. There are states with shorter durations of initial custody and there are also states with longer durations of initial custody, as we documented in *Grading the States: An Analysis of Involuntary Psychiatric Treatment Laws* (2018).

SB 762 provides a greater ability for an individual to actually stabilize prior to release, and also gives practitioners sufficient time to plan for discharge and connect the individual with the services that will be necessary to prevent an immediate recurrence of psychiatric crisis. Ample research demonstrates that adequate stabilization and proper discharge-planning dramatically reduce the risk of suicide after discharge.

States which have extended duration have not experienced massive influxes of new admissions following adoption of a new standard. In fact, research indicates that a shorter duration of initial hospitalization is correlated with significantly higher readmission rates, as we documented in our study *Released, Relapsed, Rehospitalized: Length of Stay and Readmission Rates in State Hospitals, A Comparative State Study* (2016).

The Treatment Advocacy Center strongly supports passage of SB 762. We collect and analyze data for each state, the District of Columbia, Puerto Rico and Guam and would be happy to provide any additional information that might be helpful in your consideration of this bill.

We thank you for providing a forum for public deliberation on these important issues for Oregonians.

Sincerely,

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