

Testimony to Alaska Mental Health Trust Authority by Faith Myers—May 30, '07

Mr. Chair, Board members.

My name is Faith Myers. Being an advocate is not easy. Only about 60% of our calls are returned because people know when we call we are asking them to change systems and people don't want to change systems even if psychiatric patients are being denied fair rights.

It has always been recognized that psychiatric patients need special protection from psychiatric facilities seeking shortcuts or acting indifferent to patient rights; this state is falling far short of its obligation, an obligation that is outlined in regulations and common sense.

State statute 47.30.660 states that the department (DHSS) shall investigate complaints made by a psychiatric patient or an interested party on behalf of the patient. It is a duty of the department.

We called DHSS and here is roughly how it goes. A psychiatric patient with a complaint contacts the State Office of Advocacy. They write up the complaint, but since the office has no state authority to investigate, they have to pass it on to the State Office of Licensing. And the Office of Licensing has only limited authority to go into a psychiatric facility and investigate, so they send complaints to the Seattle branch of Medicaid/ Medicare, who has more authority. The Seattle branch of Medicaid/ Medicare then calls the Office of Licensing back and authorizes the Office of Licensing to investigate or not, depending on their decision.

I have personally been through that system of filing a complaint and it takes a patient from 1 to 2 months to get an answer as to whether or not the state's Office of Licensing will even investigate a complaint.

In some other states, the Office of Advocacy is granted the authority to go into any psychiatric facility and investigate any complaint. More authority has to be granted to an organization like the Office of Advocacy in Alaska, so that they can go into any psychiatric facility and investigate a patient's complaint and can keep state-wide statistics. Psychiatric patients in non-state psychiatric facilities can't call the State ombudsman for help.

The Trust Authority is part of a system creating and funding new programs and should also be part of the solution in protecting patient rights.

(con.)

Our main project is to change the state statute concerning psychiatric patient's grievance procedure and how psychiatric patients are assisted and protected by the State when filing grievances . And in that we need your help.

Six months ago we asked the Trust Authority Board to discuss giving us a support letter calling for the change in AS47.30.847—psychiatric patient's grievance procedure. We have not had an answer yet. AS47.30.847 is vague and has no due process and has fostered some of the worst grievance procedures in the nation.

We ask that the Trust Authority Board give us an answer if they would give us a support letter and we are still asking.

Will the Trust Authority give us a support letter to change AS47.30.847 and will the Trust Authority add its weight and support to see to it that the State (DHSS) fulfills its obligation to investigate psychiatric complaints as per State statute 47.30.660.

Thank you,

Faith Myers
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Faith Myers

*Cc: William Doolittle, MD
Chair - Trust Authority Board
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