

Testimony to the Trust Authority Board by Dorrance Collins—Sept. 6, '07

Mr. Chair, Board members,

My name is Dorrance Collins.

As stated, we are asking for the Trust Authority Board's support in the revision of grievance procedure statute AS47.30.847.

Through special laws, rules and regulations, America tends to want to protect those who can't protect themselves and spends an incredible amount of time and resources in the pursuit of fairness.

But in Alaska, the statutes that protect and assist psychiatric patients who file a grievance are inadequate and outdated and do not display best practices.

When psychiatric patients file a complaint or grievance, there should be one set of similar rules and forms governing the grievance procedures in all psychiatric facilities and units across the state. And the same rules should include those with developmental disabilities. We are merely asking Alaska to copy states with best practices.

It's often forgotten by the layman that patients in acute care facilities and units have dementia and often lack the capacity to protect themselves when filing a grievance and those with developmental disabilities face the same issues.

Patients in some Alaska acute care facilities and units are being asked to use a standard grievance procedure similar to JCAHO's. That is not enough protection for somebody with dementia or diminished capacity.

States with best practice have a grievance procedure statute specific to psychiatric patients and those with developmental disabilities, that covers all facilities and offers special protection, assistance and oversight. That is a far cry from a standard JCAHO grievance procedure.

In closing, I am asking for 3 things. A support letter to revise the grievance procedure statute AS47.30.847 and to make it broad enough to cover all psychiatric facilities and units.

Also, support to revise the policies and procedures and statute that presently require the state to investigate psychiatric patient complaints.

Third, we are asking the Trust Authority to support the passing of Senate Bill 8—psychiatric patient's choice of staff for intimate care in in-patient psychiatric facilities.

Thank you,

Dorrance Collins—929-0532

cc: Open letter Dorrance Collins

Testimony to the Trust Authority Board by Faith Myers—September 6, 2007

Mr. Chair, Board members,

My name is Faith Myers.—I've been informed that the issue of the Trust Authority Board writing a support letter supporting the revision of AS47.30.847—grievance procedure statute, would be on the agenda.

I am offering encouragement that the Trust Authority does write a letter of support.

So far, Alaska Mental Health Board, Disability Law Center, Psych/Rights, NAMI—Anchorage have all given their support in writing.

On a different issue, I ask that the Trust Authority Board support the passing of Senate Bill 8. Alaska Mental Health Board, Disability Law Center, Psych/Rights have all testified in favor of Senate Bill 8. Also, Ann F. Jennings, PhD and Aron Wolf, M.D., NAMI—Anchorage and Alaska Mental Health Computer Web have all written letters stating the importance of patients receiving gender choice of staff for intimate care to reduce traumatization and to increase the opportunities for patients to recover.

I have interviewed CEO's of hospitals in states that offer same gender staff for intimate care. They stated its not good enough; that to reduce trauma it should be gender choice and we agree.

A doctor speaking at this year's NAMI conference relayed his experience of being sexually abused as a child by a man and was crying when recalling the experience 20 years later. Between 60% and 90 % of the individuals entering a psychiatric facility have been sexually or physically abused. Individuals who have been sexually abused as children or adults do not do well in acute care facilities. Facilities don't want to spend the time or the money to provide patients with gender choice of staff for intimate care even when there are good medical reasons and a better prognosis for recovery when doing so.

Senate Bill 8 only asks facilities to make a good faith effort at providing patients with gender choice of staff for intimate care. It takes into account psychiatric emergencies and shortage of staff. When I leave here today, I can have gender choice, but if I am civilly committed—that right is taken away from me. That right should not be taken away from psychiatric patients.

In closing, we are asking for a support letter from the Board calling for the revision of AS47.30.847—patient's grievance procedure statute.

And we are also asking the Board to support the passing of Senate Bill 8 in the next legislative session.

Thank You,—

Faith Myers—929-0532

cc: Open letter

Faith Myers