

Recommendation for Simplifying Section 12 Donahue Amendment 1.2 of S.287

Taken together, the recommendations replace all of Section 12

Put into a letter:

- (1) A request for the information the committee would like reported on a monthly basis during adjournment
- (2) Ask that the department's annual report due January 15, 2015 specifically address certain items in each category:

Bold items are required annually under current law. Only categories with specific requests are listed. Bullets are specific requests that would fit under each category.

Utilization of services across the continuum of mental health services

- Include some measure of the degree to which a decentralized system has allowed patients to be served closer to home
- Include hospital admissions, length of stay, and readmissions

Adequacy of the capacity at each level of care across the continuum of mental health services:

- Include patients waiting in emergency departments and use of law enforcement

Add to annual report:

§ 7256. REPORTING REQUIREMENTS

Notwithstanding 2 V.S.A. § 20(d), the department of mental health shall report annually on or before January 15 to the senate committee on health and welfare and the house committee on human services regarding the extent to which individuals with mental health conditions receive care in the most integrated and least restrictive setting available. The report shall address:

(6) a review of the ways in which patient autonomy and self-determination are maximized within the context of involuntary treatment and medication;

(7) outcome measures and other data on individuals for whom petitions for involuntary medication are filed; and

(8) progress on alternative treatment options across the system of care for individuals seeking to avoid or reduce reliance on medications, including supported withdrawal from medications.

Replace section (c) with an amendment to §7624(c):

The petition shall include a certification from the treating physician, executed under penalty of perjury, that includes the following information:

(1) The nature of the person's mental illness;

(2) That the person is refusing the medication proposed by the physician;

~~(2) (3) The necessity for involuntary medication, including the person's competency to decide to accept or refuse medication~~ That the person lacks the competence to decide to accept or refuse medication and appreciate the consequences

(4) The necessity for involuntary medication

RENUMBER FROM HERE

Anne - Keep (d) /Jill - Eliminate (d)

Keep (e)

Cut (f)

Revise "Ulysses clause" such when a patient with a Ulysses clause that consents to hospitalization and medication over objections, who is now hospitalized and refusing medication, shall on motion on patient or department be reviewed by family court prior to implementation.

Staff Injuries Issue

Amend 18 VSA 7527 such that

Designated Hospitals shall report to the department of mental health any staff injuries on inpatient psychiatric units that they are required to report to the department of labor and their workers compensation insurance carrier.

Form (for reference) <http://labor.vermont.gov/workers-compensation/employers/employers-responsibility-for-reporting-an-injury/>

