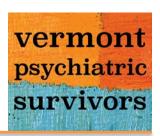


S.3 – An Act Relating to Mental Health Professionals' Duty to Warn

Wilda L. White, Executive Director Vermont Psychiatric Survivors, Inc. Senate Committee on Judiciary February 7, 2017

About Wilda White



- Executive Director, Vermont Psychiatric Survivors since July 2015
- Attorney licensed to practice in NY, CA and MA
- Psychiatric Survivor
- Working in coalition with others concerned about adverse impacts of *Kuligoski* decision

Subject of Today's Testimony

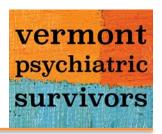


• Impact of *Kuligoski* on patients and clients

Impact on caregivers

Proposed statutory language drafted by coalition

About Patients and Clients



- About 10% of Vermonters (62,751) received mental health services in 2014
- Mental health patients are, in general, over-surveilled for dangerousness
- Desire to be seen as an individual, for who you are, by health care provider

Patient/Client Impacts



- With uncertain duty to warn, mental health professionals may practice defensively because of liability concerns
- Increases risk of false positives (i.e., incorrect assessment of dangerousness)
- False positives, more so than breach of confidentiality, disrupt therapeutic alliance, causing patients to end relationship, forgo treatment

Application of Kuligoski Duty



- Caregiver is actively engaging with the patient's provider in connection with the patient's <u>care</u> or <u>treatment plan</u>
- Provider substantially relies on that caregiver's ongoing participation
- Caregiver is himself or herself within the zone of danger of the patient's violent propensities

Example of Caregiver Actively Engaging



- Mental health provider asks "caregiver" to remind patient to take medication
- Mental health provider asks "caregiver" to monitor patient/client for reaction to medication
- Mental health provider asks "caregiver" to assess patient/client's mood

Impact on Caregivers



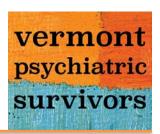
- Blamed by doctor and patient/client
- Sued by third-party
- Wracked with guilt
- Families torn apart
- Caregivers decline to cooperate or be helpful
- Clients/Patients lose critical support

Proposed Statutory Language



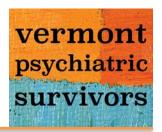
- Proposes to place language in new 18 VSA 1881 Confidentiality/HIPPA standard rather than Mental Health/Involuntary Treatment statute
- Creates no new statutory duty; reiterates common law duty
- Clarifies there is no liability for failing to train, warn, notify caregivers

Goals of Proposed Language



- Limit perpetuation of discrimination and stigma against people with mental health diagnoses
- Avoid singling out mental health patients; applies to all patients
- Clarify that the common law *Peck* duty still applies
- Clarify common law duty in light of HIPPA ("imminent")

Contact Information



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