

April Eighth —House Finance Committee
Please do not pass HB 214 before making improvements

Most individuals would be stunned to learn the loop holes that psychiatric institutions and clinics and even DHSS have used for 20 years to deny psychiatric patients their right to file a grievance or an appeal. The goal is not only to re-write AS47.30.847 but to see to it that the new law contains as few loop holes as possible.

We are asking that the following be added to HB 214—Y.

One. Make the language clear—the “patients can file a grievance at the time of their choosing regardless of the availability of an informal complaint process”
Page 5, line 28-30.

Two. Add—“Following the initial evaluation psychiatric patient rights (#4, #5, #7 and #9) can only be temporarily removed if the professional in charge determines that granting the patient those rights will pose a threat to the safety or well-being of the patient or others.”—*Otherwise low level staff will make the decisions as to what the patients can or cannot do.*

Three. The “facility employees designated as a patient advocate must be required to have training in mental health consumer advocacy.” *HB 214 now states that any employee can be the patient advocate, with or without mental health consumer advocacy training or any training.—must take into account advocates go on 4 day weekends, and 3 week vacations.*

Four. “The facility Patient Advocates should be available to the patients 24 hours a day/ 7 days a week.” *Otherwise the facilities will decide when an advocate is available to patients—could be one or two days a week.*

Five. There should be “an urgent grievance procedure for psychiatric patients.” *Patients are locked in psychiatric facilities for less than 14 days—Patients could be denied their rights or mistreated the whole 14 days.*

Six. Add clarity to the telephone call center on page 5—Make it clear who is going to inform the patient of their right to call and the telephone number to call to file a grievance.

Seven. Add clarity to when a patient's grievance starts—when it is dropped in the box? Or called in? What is the start time for the due process.

Eight. Page 6, line 1....."A patient can only withdraw their grievance with a written statement or by patient's signature," *otherwise the psychiatric facilities will withdraw grievances without patients' permission.*

Nine. "DHSS and psychiatric facilities and units should be required to keep statistics of any type of patient complaints that are logged in with staff in facilities, either verbally or in writing. Not just formal grievances."

Ten. DHSS will be required in HB214 to investigate psychiatric patient complaints. In 2008, DHSS was required to investigate patient complaints—According to a 2008 State Ombudsman's report, DHSS had not investigated a patient complaint in 5 years, mainly because they never gave out their phone number. Strengthen HB 214 by "requiring DHSS not only to investigate psychiatric patient complaints but also be required to give out their phone number to all psychiatric patients in psychiatric facilities and units."

Eleven. Like in AS47.30.847, give psychiatric patients "a right to bring their grievance to an impartial body." *Otherwise a patient's grievance will be decided by the staff member the patient is complaining about.*

As stated, providers of psychiatric services, including DHSS, will look for loop holes in HB 214. Please make our requested additions.

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