

February 29 ,2020

To Representative Zach Fields

RE:HB 183 Addressing wage and staff issues at API

DEAR Representative Fields

My name is lois Sneed . I live in Anchorage and I retired from API after twenty three years as a registered nurse most of which were in a supervisory capacity . HB 183 is really needed because of the dangers to the staff and patients . The stress is tremendous for the frontline staff especially the ones working directly with new admissions . The rate of sick calls are high do to being over stressed . The lack of training is another factor that adds to the stress level . Mandt classes helped a lot but more was needed .Employees are forced to work overtime when there is a staff shortage and there's always a shortage this can lead to fatigue . The Anchorage police bring new patients to API for admission , these people are handcuffed or zippered tied . The handcuffs and the zip ties must come off before these officers leave API . The staff is left with whatever happens . The staff at API deals with some of the same violent people as APD except API'S staff don't have the same tools . The staff can not use physical restraints without a doctor's order and that can take a lot of time when a patient is out of control. The staff are spat upon , physically attacked , have body fluids thrown on them and much more .The Mandt system teaches staff to treat everyone with dignity and respect . Most of the longterm staff members learned from experience , they learned how to deescalate and manage a situation but that doesn't always work . The staff should be Trained and oriented before having patient contact . My orientation was very brief , a supervisor escorted me to each unit and introduced me to the staff there then returned me to my assigned unit where I began working ,that was it !!(I was attacked for no apparent reason while sitting in the nurses station a male patient attempted to hit me with a chair), One of the admitting RNs was attacked and beaten so badly that she was afraid to return to work months later.She never recovered from her fears . I retired early because I was afraid of being maimed .There are too many incidents like this one .The point is something needs to be done. Better pay , better benefits and better training is the key in my opinion .

Respectfully
Lois J. Sneed

February 29 ,2020

To Representative Zach Fields

RE:HB 183 Addressing wage and staff issues at API

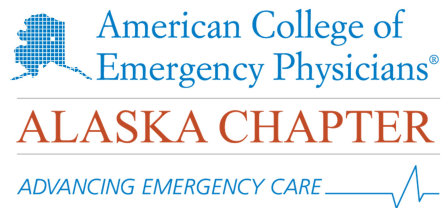
DEAR Representative Fields

My name is Willie Myers . I live in Anchorage and I retired from API after thirty years as a certified nursing assistant four. HB 183 is really needed because of the dangers to the staff and patients . The stress is tremendous for the frontline staff especially the ones working directly with new admissions . The rate of sick calls are high do to being over stressed . The lack of training is another factor that adds to thee stress level . I taught mandt class for several years and it helped a lot but more was needed .Employees are forced to work overtime when there is a staff shortage and there's always a shortage . The Anchorage police bring new patients to API for admission , these people are handcuffed or zippered tied . The handcuffs and the zip ties must come off before these officers leave API . The staff is left with whatever happens . The staff at API deals with some of the same violent people as APD except API'S staff don't have the same tools . The staff came not use physical restraints without a doctor's order and that can take a lot of time when a patient is out of control. The staff are spat upon , physically attacked , have body fluids thrown on then and much more .The Mandt system teaches staff to treat everyone with dignity and respect . Most of the longterm staff members learned from experience , they learned how to deescalate and manange a situation but that doesn't always work . The staff should be Trained and oriented before having patient contact . My orientation was very brief , a supervisor escorted me to each unit and introduced me to the staff there then returned me to my assigned unit where I began working ,that was it !! One of the admitting RNs was attacked and beaten so badly that she was afraid to return to work months later .There are too many incidents like this one .The point is something needs to be done. Better pay , better benefits and better training is the key in my opinion .

Respectfully

Willie Myers

907 301-7897



March 2, 2020

Representative Zach Fields
Alaska State House of Representatives
Room 412, State Capitol
Juneau, AK 99801

Dear Rep. Fields:

The Alaska Chapter of the American College of Emergency Physicians (Ak ACEP) strongly supports the legislation of HB 183 ALASKA PSYCHIATRIC INSTITUTE. We would to thank Rep. Zack Fields for bringing the legislation forward for the State of Alaska.

The struggles that Alaska Psychiatric Institute (API) has been facing over the past several years has caused a crisis in Alaska's emergency departments (EDs) and hospitals. For the last several months, on a regular basis, psychiatric patients are being held in EDs, awaiting definitive care for their mental illness when they have decompensated. Often these patients require dedicated one-to-one care and very close monitoring. While this strains the emergency department staff and physicians, these patients often do not receive timely mental health care coordination while awaiting placement at API. This strain is felt especially in small and rural EDs where bed space and extra staff are scarcer. Tough choices about staffing to care for other sick and injured patients can be limited as patients being held in hospitals need to utilize swing staff and extra personnel. Mental health patient's boarding times range from days on the short end and can extend weeks.

Additionally, Emergency Department physicians report several mental health patients have short-term relapse after they are released from API. API lacks adequate resources to monitor patients in the inpatient setting, and to get a successful discharge plan together. Recently, a Kodiak physician, reported about a patient that had a mental health crisis, waited for a bed at API in Kodiak's hospital for two weeks then was released by API less than two days after being admitted to API. The patient left API back to Kodiak and re-presented in crisis in less than a week to the Emergency Department, needing further interventions. This is both a poor outcome for the patient, and costly for the state. Particularly so when patients are transferred from rural communities, are flown home, only to need to be flown back to Anchorage.

Fully funding API and enabling them to pay competitive rates for staff is a crucial step to restore it to its fully capacity to care for patients. API is critical to our mental health capacity and treatment of patient's in crisis. On behalf of the Alaska Chapter of American College of Emergency Physicians and the over one-hundred Alaska emergency physician members, I urge you to support HB 183 ALASKA PSYCHIATRIC INSTITUTE.

Sincerely,

Nathan Peimann, MD, FACEP
Juneau, Alaska / AK ACEP President
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Timothy D Peterson, MD
321 Highland Dr
Juneau, AK 99801

March 3, 2020

Representative Zach Fields
Alaska State House of Representatives
Room 412, State Capital
Juneau, AK 99801

Re: HB183 Alaska Psychiatric Institute

Dear Rep. Fields,

This is written in strong support of HB 183. My point of view is that of a practicing ER physician in Juneau for thirty one years as well as a member of the Alaska Chapter of the American College of Emergency Physician Group which visited with you last week.

The bed situation at API has shifted a huge burden to small hospitals around the state. Our inpatient Psychiatric facility at Bartlett Regional Hospital in Juneau was built to serve Southeast needs. The bed shortages up north have kept our unit full most of the time. Along with this comes the huge costs of medevac and private transport of patients in both directions.

Local patients are sometimes being held for days in the ER and/or hospital waiting for a bed to open, often to be sent north later. No therapeutic services are being offered other than medications, leaving these patients more likely to relapse through a revolving door.

I thank you and the legislature for helping upgrade the bed status at API. Please stay at this essential task. Lastly I ask you to support a more competitive wage for API nurses. This is what will help insure long term stability.

Sincerely,

Timothy Peterson, MD, FACEP
quigleypeterson@gmail.com