

**TO:**

**This year please legislatively improve the rights for the disabled. Doing so will save lives, improve quality of care and help promote recovery.**

**As of today, Alaska in an unconstitutional way turns the disabled over to private locked facilities and units with very few specific state standards of care.**

**AS47.30.660(b) (13) Change the law.**

**The Alaska Mental Health Trust Authority beneficiaries**

**Fall into four main categories and number 50,000 or more:**

**the mentally ill, individuals with cognitive impairments, persons with Alzheimer's and persons who have alcoholism. A common thread is individuals needing assistance from the state because of their disability.**

**Mental Health Advocates, Faith Myers/Dorrance Collins, 3240 Penland Pkwy, Sp. 35, Anchorage, Ak. 99508 929-0532**

**Everything we are asking for in this document is being done in other states, either because of legislative efforts or court orders.**

**One.** Revise the psychiatric patient grievance procedure law AS47.30.847 with the requirement for a standardized due process and appeal process suitable for a disabled individual or an individual in crisis—doing so will save lives and improve quality of care.

**Two.** AS47.30.847 says psychiatric patients have a right to bring their grievance to an impartial body within a facility. The legislature should establish who the impartial body is.—As of now, there is no uniform standard. And after 24 years, no impartial body.

**Three.** Legislatively require that statistics of complaints filed by mental health trust beneficiaries is kept by a state agency and given to the general public and the state legislature on an annual basis.—Until the general public and the legislature has an understanding of the types of patient complaints in locked psychiatric institutions there will be no way to hold institutions accountable and make necessary improvements.

**Four.** Revise AS47.30.847--Legislatively require that an employee of an institution act as a patient advocate and be readily available during hours of operation to assist the disabled in clinics and institutions and there has to be a method to give the patient advocate some training and autonomy such as answering to the Board as opposed to the CEO.

**Five.** Legislatively require that the disabled in clinics and institutions must be informed verbally and in writing of their rights and options not only by the treating facility but by the state. (a uniform procedure designed by the state and patient advocates)

**Six.** Legislatively require a single state office to act as the intake for complaints filed by mental health trust beneficiaries. Also require the agency to review hospitals and clinics to see that they are following state laws and regulations.

**Seven.** Legislatively require psychiatric hospitals and units to recognize and treat sanctuary trauma—examples of sanctuary trauma: placing a patient in isolation, strapping a patient to a gurney or other means of restraint, physical takedowns. Sanctuary trauma is experienced by up to 47% of the patients and can cause or exacerbate Post Traumatic Stress Injury. Requiring psychiatric hospitals to recognize sanctuary trauma and provide treatment or a debriefing can save millions of treatment dollars.

### **Reference Information**

--SUBJECT: STATE OBLIGATIONS WITH RESPECT TO PSYCHIATRIC HOSPITALS (WORK ORDER NO. 29—LS0406)

Kate S. Glover, Legislative Counsel—47.30.660 (b) (13) “There is an argument that this statute creates an unconstitutional delegation of executive branch functions to nongovernmental and regulated entities.”

#### **TRAUMA WITHIN THE PSYCHIATRIC SETTING: A PRELIMINARY EMPIRICAL REPORT**

Eight page Report by Dr. Karen J. Cusack and others. The report brought about changes in patient care in South Carolina, Maine, Massachusetts. The most important objective, “Do no harm.”

## **Reference Information**

### **--ON BEING INVISIBLE IN THE MENTAL HEALTH SYSTEM**

Twenty-two page report by Dr. Ann Jennings. Outlines what happened to a woman who was repeatedly institutionalized from age 13 until she committed suicide in a psychiatric institution at age 32. The report documents how Anna was re-traumatized by treatment in institutions.

### **--ABUSE AND NEGLECT INVESTIGATION: ALASKA PSYCHIATRIC INSTITUTE (API) ISSUED APRIL 5, 2011**

Nine page report produced by Disability Law Center. Report goes into details how patients at Alaska Psychiatric Institute were unable to file a grievance in a fair way and the involvements of the employee unions in influencing the patient grievance procedure.

### **--ALASKA PSYCHIATRIC INSTITUTE**

Individuals in Alaska with a severe mental illness are mistreated. What is not obvious to the general public or the legislature is the extent of the mistreatment. In 2005 at state-run Alaska Psychiatric Institute, the three sexual abuse allegations by patients were discounted. Fifty-four complaints of not receiving respect or dignity discounted. Multiple complaints of physical abuse discounted. Eighteen of not being safe discounted. The power of discounting patient complaints even today goes in favor of the managers of psychiatric institutions. API management in 2005 was embarrassed. API's answer: *Never again let the general public look at the specific categories of patient complaints in their hospital.*

**The disabled are mistreated and need improved rights**

**—Please help.**

**Mental Health Advocates, Faith Myers/Dorrance Collins**

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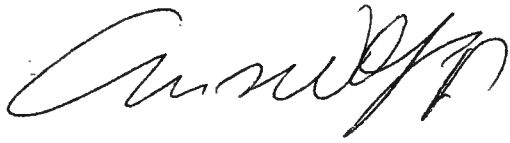
November 30, 2016

To whom it may concern,

I would like to support the advocacy of Faith Myers around rights of the mentally disabled. It is important that the mentally disabled, especially in a hospital environment, feel and understand that they can file a grievance. Many people feel overwhelmed and the State does not need to add to their feelings of helplessness. This feeling of helplessness would only tend to exacerbate their underlying symptoms. It is important for staff and patients to delineate and focus on the area of "Institutional Trauma". There should be staff training on this subject and then a debriefing for both staff and affected patients should this occur in the hospital.

If you have any questions, please do not hesitate to call my office.

Sincerely,

A handwritten signature in black ink, appearing to read 'Aron Wolf', written in a cursive style.

Aron Wolf, M.D.  
Wolf Healthcare Clinic



**Psych Rights** | Law Project for  
Psychiatric Rights

December 9, 2016

Alaska Legislature

Re: Faith Myers & Dorrance Collins Rights Advocacy

Dear Alaska Legislators:

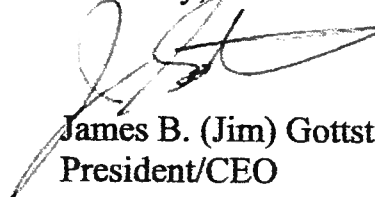
I have known Faith Myers and Dorrance Collins for close to 20 years. They are tremendous advocates and I wholeheartedly support their efforts to legislatively improve the rights of people diagnosed with mental illness and other mental disabilities.

For example the current handling of grievances is a travesty. They are basically ignored. This needs to be improved. Any legislation to address this problem should allow people to pursue their grievances in court if they are not satisfied and be exempted from having attorney's fees awarded against them if they are unsuccessful.

There should also be a statute that requires psychiatric hospitals and units to recognize and treat institutional trauma. Many, many people who have been hospitalized on the grounds that they are mentally ill find that the hospitalization was far more traumatic than the problems that brought them in in the first place.

I hope that the upcoming Legislative Session will be the occasion to legislatively improve the rights of people diagnosed with mental illness.

Sincerely,



James B. (Jim) Gottstein, Esq.,  
President/CEO