STATE OF CONNECTICUT

OFFICE OF PROTECTION AND ADVOCACY FOR
PERSONS WITH DISABILITIES
60B WESTON STREET, HARTFORD, CT 06120-1551

JAMES D. McGAUGHEY
Executive Director

Phone: 1/860-297-4307
Confidential Fax: 1/860-297-4305

Testimony of
The Office of Protection and Advocacy for Persons with Disabilities
Before
The Committee on Public Health

Presented by: James D. McGaughey
Executive Director
February 29, 2008

Good morning, and thank you for the opportunity to comment on several bills on your agenda today.

The first is **Raised Bill No. 244, AN ACT CONCERNING NOTIFICATION TO THE OFFICE OF PROTECTION AND ADVOCACY FOR PERSONS WITH DISABILITIES OF DEPARTMENT OF CORRECTION SUICIDES AND DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES CLIENT DEATHS.**

This bill was requested by our Office, and I want to thank the Committee for raising it. It would require that our Office be notified about deaths of people with psychiatric disabilities that occur in State facilities so that we can monitor or initiate investigations as envisioned in our federal authorizing legislation. Specifically, Section 1 would require the Commissioner of Correction to notify our Office of inmate suicides and apparent suicides and to provide us with information about the inmate's mental health status. It would also require DOC to furnish a copy of any internal investigation reports within five business days of completion of those reports. Section 2 would require the Commissioner of Mental Health and Addiction Services to notify our agency of the deaths of any DMHAS clients who are receiving inpatient psychiatric services in a DMHAS operated facility.

As many of you know, our Office was established to safeguard the civil rights of people with disabilities, with a particular emphasis on protecting fundamental human rights such as the right to be free from abuse and neglect. We are authorized to conduct investigations, monitor conditions, review internal investigations and quality assurance data, and pursue various types of advocacy activities. However, in order to fulfill our responsibilities to people who are isolated in institutional environments – people who often are not able to directly contact us - we need to receive notification about events that might raise questions about possible abuse, neglect and other rights violations.

When we do learn of a situation that raises questions, we are generally able to proceed with an appropriate inquiry. For instance, OPA's federally mandated Protection and Advocacy for Individuals with Mental Illness (PAIMI) program has specific authority to independently investigate suspected neglect or abuse of people with mental illness housed in facilities, including hospitals and correctional facilities. In fact, over the past ten years we have conducted investigations into a number of deaths of people with psychiatric disabilities, including DMHAS patients and several inmates who committed suicide. While not every inmate who commits suicide is ultimately shown to have had a record of treatment for mental illness, the fact that an inmate has committed suicide is considered sufficient "probable cause" under the PAIMI Act to initially presume that the inmate was mentally ill, and to initiate an investigation. However, because there is no current requirement that DOC provide our office with notice when an inmate commits suicide, we cannot be sure that we are initiating all of the

inquiries that we should be. If we read about it in the newspapers or otherwise hear about it, we can initiate an inquiry; if we do not hear about it, we cannot do so. Similarly, if we receive information about an allegedly untimely death of a patient in a psychiatric hospital, we can initiate an inquiry. But, there is no systematic way of ensuring that information about the circumstances of patient deaths is being independently reviewed and that investigations are pursued into those cases that raise questions.

This bill would address this problem with respect to people who are hospitalized or incarcerated. In addition, because we have sometimes experienced delays in obtaining certain records related to DOC inmate suicides, the bill would also establish some minimum requirements for timely release of internal investigation reports. It has been pointed out to us that one phase in Section 2 needs to be changed. More specifically, the reference to "or a person with substance use disorders, or both" should be deleted. With that change, I have been assured that DMHAS has no problem with this bill going forward.

Again, I thank the Committee for raising this important bill, and urge you to act favorably on it.

I also want to offer general support for **Raised Bills No. 40 and 422,** both of which address frustrating gaps in availability of housing with appropriate programmatic supports for people with psychiatric disabilities who run afoul of the criminal justice system.

As I think everyone now realizes, a very significant percentage of inmates in Connecticut prisons have psychiatric disabilities. Many of these individuals are incarcerated in the first place, or are held in institutional environments for long periods not because of the seriousness of the crimes they are accused of, but rather because they have neither a place to live or a network of supports to help them achieve and maintain some stability in their lives.

In prison, these individuals often run afoul of the disciplinary rules, become easy victims of others, and they often emerge traumatized, with even greater levels of anger and frustration than before they entered. At a minimum they acquire additional stigmatizing labels and experiences that make the road to recovery more difficult.

Given adequate, relevant supports, which in many cases would include some form of supportive housing, many of those individuals would not be incarcerated, and, in fact, could become contributing members of their communities. It would be more cost effective, and, from a humanitarian perspective, much more appropriate to expand community-based support programs targeted to this population than to continue to send them to prison, where they occupy space that would be better used to house individuals who represent real threats to public safety. These bills address real, fundamental needs, and represent sound public policy. I urge you to support them.

Thank you for your attention. If you have any questions, I will try to answer them.