

Melissa Sweet,

I'm writing in opposition to SB 826 as currently drafted.

The proposed changes of defining "Mental health professional" to include physician assistant, certified nurse specialist and clinical nurse specialist-certified with the qualifications of being an individual 'who is trained and experienced in the area of mental illness or developmental disabilities' greatly concerns me given that such health care workers have vastly varied depth and breadth of education and training and lack the medical expertise necessary to provide the highest quality care to meet the needs of patients in their time of need as they face the prospect of being placed into a psychiatric unit against their will or being physically restrained.

As a psychiatrist working in a community hospital, including the Emergency Department and psychiatric unit, in addition to a Community Mental Health agency, I frequently support medical staff and patients surrounding matters of Petitions and Clinical Certificates. I also work alongside and collaborate with advanced practice professionals as part of the broader health care team and greatly appreciate the care they provide.

In my greater than 20 years of experience, I've come to appreciate that patients who are subject of Petition for Hospitalization are placed in an extremely vulnerable position of facing the possibility of being hospitalized against their wishes, sometimes to a distant hospital far away from family if our local psychiatric unit is full (which is often the case). It requires a highly trained and skilled clinician to determine when a patient who is the subject of a Petition does not require inpatient psychiatric care and can be treated in the community and linked with local resources. With the proposed changes, undoubtedly there will be increasing rates of unnecessary hospitalizations which in addition to being wasteful and adversely impacting citizens, such will further exacerbate our state's psychiatric bed shortage and tax our already stressed health care system.

Additionally, I'm unclear as to the need to expand to workforce to perform Clinical Certificates. From my perspective in rural Northern Michigan and by interfacing with multiple Emergency Departments, there doesn't appear to be a shortage of physicians who can complete Clinical Certificates. If there is such a shortage, as the Covid-19 pandemic has demonstrated, the use of telemedicine can be used to expand and improve access to behavioral health care.

Parallels can be drawn to the proposed changes involving evaluation for seclusion and restraints of patients, who (again) are being examined at a time when they are most vulnerable. These complex and important patient care issues can be viewed through the lens of protecting our citizen's civil rights. In their time of greatest need, our citizens deserve the highest quality health care available to them.

Thank you for your time and considerations.

Respectfully,

Curtis Cummins, M.D.

Clinical Assistant Professor, Michigan State University, College of Human Medicine

Munson Medical Center – Munson Healthcare

Northern Lakes Community Mental Health Authority

Traverse City, MI

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