



March 5, 2024

RE: Testimony by Disability Rights Michigan (DRM) on HB 5114

Good afternoon, Chairwoman Rogers, and members of the Health Policy Committee, and thank you for the opportunity to provide comments in response to House Bill 5114.

Disability Rights Michigan (DRM) is the private, nonprofit, nonpartisan organization mandated by federal law to provide information and advocacy to people with disabilities living in Michigan. We serve Michigan citizens by providing a range of advocacy assistance which can include short-term assistance, investigations, and direct legal representation.

One of the unique things our staff do is spend a lot of time working in institutional settings where individuals with mental illness and other disabilities are confined, often because of a court order, while receiving treatment. DRM has direct experience witnessing and investigating the use of restraint, seclusion, and forced treatment. We appreciate the challenges hospital settings face with recruiting and retaining an adequate number of physicians, including psychiatrists, and recognize the difficulties this can pose when urgent situations present, and it can be difficult to get responses and assessments timely when there are a limited number of mental health professionals available. That said, we are deeply concerned about HB 5114 expanding the scope of who would be allowed to order restraint and seclusion. The expansion will not afford additional individuals to provide treatment or therapies to patients, rather it will only allow additional individuals to strap people down, force medications including injections onto them, and confine them. It is important to keep in mind the trauma histories many patients have being subjected to restraint, seclusion, and forced medications only furthers that trauma. Decisions to expand the scope of practice, particularly for convenience of institutional settings and the staff who work in them, do nothing to promote health, safety, or wellness on the part of the people served.



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Further, HB 5114 proposes expanding who can certify that an individual meets criterion for involuntary hospitalization. In other words, the bill would allow additional people to hospitalize someone against their will and force them to be subjected to various forms of treatment. Not unlike with restraint and seclusion, this effort to expand the scope of does not provide any direct benefit to individuals with mental illness and other disabilities. We have recently heard testimony by public mental health providers that hospital stays have increased significantly over the past couple of years as a direct result of a lack of community-based services and a shortage of direct care workers to provide services in the community. This does not support a need to expand who is considered a mental health professional.

Giving someone power over other individuals is a tremendous responsibility and expanding the list of people for mere convenience does a disservice to the people served. The changes HB 5114 proposes do not benefit people with disabilities – the people directly impacted by these changes – and, in fact, only expands the number of people who can limit their rights, restrain, or seclude them, and force them to be institutionalized. Let us not forget how dangerous these practices are and the long-term trauma impacts on patients and staff. Many people, including children - including in Michigan – have been seriously injured and even died while being restrained and subjected to forced treatment. DRM opposes HB 5114 and urges members of this Committee to consider how the proposed expansions will hinder and limit people served without adding any therapeutic benefit or increasing their access to treatment and services.

Thank you for considering testimony on HB 5114. If you have any questions, please contact Michelle Roberts at 517-487-1755 or mroberts@drmich.org