

Good afternoon, Chair Monnes Anderson, Vice-chair Linthicum and members of the committee. My name is Lisa Haddock. I am a Registered Nurse with a background primarily in Emergency Medicine. I am also the mother of two beautiful boys, Clayton who is 25 and his younger brother, Hunter, who would have been 23 if he were still alive today. I lost Hunter to suicide May 7, 2017 at the age of 21. Hunter had some struggles with social anxiety at a minimum. After Hunter's death, I requested his medical records from his primary care provider. Looking through Hunter's medical records was probably the third hardest thing I have done to this date. The most difficult moment I have ever faced, was the morning of May 7, 2017 when I received a phone call from his father, stating my son, Hunter, had been found dead. This is a phone call, and a sentence that I hear over and over again, every day in my head. I cannot get away from it. I hear the voice telling me, your son is dead..... This is something no parent should ever have to hear. The second worst moment in my life was May 13, 2017. This was a Saturday and the day before mothers-day; this was also the day of Hunter's funeral. At the conclusion of my son's service, I stood in the rain and watched the Hurst drive away with my baby. I knew his time on earth was done, and that I will never lay eyes on him again. I would never hear his laugh, see his heart-melting smile, I would never smell his scent. I would never have the honor of rubbing his big ol' feet while we watch TV together on the couch. My time with my son, was done.

Looking through Hunter's medical records I discovered that in a two-year span, starting with his first appointment with his primary care physician in February 2015 to March of 2017 Hunter was seen two times in a face to face appointment with his physician. During this same time frame, Hunter had five medication changes. These medications were prescribed to treat mental illness. He was started on Buspar, had a dose increase, a medication change, another medication added, changed to yet another medication and all of this was done over a two-year span and it was done over the phone. With a medical background, I cannot imagine assessing a mentally ill patient over the phone. Hunter called with complaints of his medications not working, his PCP documented a chart note that she disagreed with

Hunter when he stated the medication was not working. Somehow, she felt, over a phone appointment that my son's medication was indeed working. Hunter also called with complaints of panic attacks, chronic anxiety, palpitations, heart racing, sweating, fatigue, and the inability to concentrate. Finally, in March of 2017 he contacts an urgent care looking for help. The chart note for this contact reads "this is more than we can handle, please follow up with your PCP within two weeks". THIS IS MORE THAN WE CAN HANDLE. This physician also makes a note in the chart that Hunter had not had an actual appointment with his PCP in nearly two years. Two months after the urgent care contact, Hunter took his life.

As his mother, I knew Hunter was struggling. I often tried to talk to him about his thoughts and what he was feeling. At times he would tell me small things and then promptly say, I'm fine mom, don't worry about it I am trying to take care of it. Hunter was trying and he was getting no-where.

I believe this issue here is twofold. There is a big stigma with mental illness and there is a huge need for provider education. I feel strongly that Hunter reached out for help several times from his primary care provider and she had many, many opportunities to recognize the condition my son was in. While I do not blame those on my son's care team for their lack of appropriate assessment and treatment, I feel it was simply due to their lack of knowledge and awareness on how to treat this type of "sick". Hunter was private and trying hard to be an independent man of 21 and he did his best to seek help.

I am here today to speak in memory of those who have lost their fight to mental illness and I am here to speak for those who are currently in such a dark place that they cannot speak for themselves. As people working in the medical field, myself included, it is our responsibility to assess, diagnose and treat our patients. This includes those with mental illness. People with mental illness especially need our help as they have a very difficult time asking for it. Education on suicide awareness and risk assessment is key in the ability to have the tools needed to be successful. These lives are precious, they are salvageable, and they are someone's child. While creating a mandate on mental illness education will not bring back my

son, it will help many others come out of the dark place they reside, it will provide the tools we are currently lacking, allowing medical personal to help those in need, allowing them to live a life they deserve to live. If it can keep another mom from feeling this deep, dark pain that I feel every second of every day, I fully support senate bill 808 and ask that you see the dire need for education on suicide risk assessment, treatment and management.

Thank-you