

SB 686
Testimony March 23, 2021
Senate Committee On Human Services, Mental Health and Recovery

Good afternoon Chair Gelser, Vice-Chair Andersen, and Committee members:

I am Dr. Jacek/Jack Haciaak, Director of DynamicChanges LLC. I am also a retired Psychologist and past administrator of several mental health programs in four states. My testimony on SB 686 is informed in part by my participation in the creation of the Mid-Willamette Valley Acute Care Mental Health Services involving Salem Hospital and Good Samaritan Hospital in Corvallis, and management of hospital services for one of the large Denver, Colorado mental health quadrant programs, Park East Mental Health Center.

I support SB 686 with whatever amendments might be needed to resolve any definitional or technical difficulties.

The standard of care for evaluation and treatment during inpatient services has been in-person psychiatric contact facilitating a comprehensive and dynamic interpersonal process. Research of telehealth being used in mental health care has shown benefits in the delivery of services, while the effectiveness of mental health treatments using telehealth continues to be investigated and to-date is inconclusive for many services.

With respect to SB 686's requirement that a person be given an option for in-person engagement with their psychiatric providers, important clinical factors need to be considered.

When a person is in a psychiatric inpatient treatment facility, they are routinely in one of their most vulnerable sets of circumstances. Not only is the environment itself easily disorienting, but research has shown that many such individuals are experiencing effects of trauma at such times. A key treatment factor for reducing trauma effects and any associated symptoms is providing an individual with control over their environment to enhance an improved experience of safety. SB 676 would provide one mechanism for such control and improved feelings of safety --- the opportunity to choose --- to those who are discomforted when only relating virtually with their psychiatrist.

Additionally, adapting treatment to an individual's unique needs, values, and preferences --- called "individualized care" --- is not only recognized as enhancing mental health care effectiveness, but it has been shown to be most necessary when a

person's vulnerability is high and their circumstances complex. SB 686 does that for hospitalized individuals.

SB 686 provides a clinically sound modification to inpatient care where only virtual psychiatric services are currently offered. Please pass SB 686.

Thank you.

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