

To: Chair Kropf, Vice-Chair Chotzen, Vice-Chair Wallen and Members of the Committee:

Good Afternoon Chair Kropf, Vice-Chair Choteson, Vice-Chair Wallen and members of the committee. My name is Melissa Thompson and I am the Chief Behavioral Health Officer for BestCare Treatment services, the Community Mental Health Program serving Crook and Jefferson Counties. Thank you for allowing me to testify today. I am here speaking on behalf of the Association of Oregon Community Mental Health Programs (AOCMHP) in support of HB 2467. I was a member of the Commitment to Change Workgroup that met for several years and currently a member of Chair Kropf's workgroup on Civil Commitment and Aid and Assist. I am a licensed behavioral health clinician who has extensive experience and knowledge working in the civil commitment system. Additionally, I am a family member of a person who suffers from a severe and persistent mental illness experiencing multiple hospitalizations as a result of this illness, and I am a provider who was physically attacked by a client experiencing psychosis as a result of her mental illness. A client who, due to our current statutes, did not qualify for an involuntary hold nor a civil commitment until after she attacked me.

As a provider, attempting to help those with a mental illness is my number one priority and number one reason I come to work everyday. Seeing an individual suffer from a mental illness and feeling as though there is nothing you can do to legitimately help that person is one of the worst feelings a provider can experience. Attempting to help an individual who does not have insight into their mental illness is extraordinarily challenging as a provider and knowing that this person will likely end up in the criminal justice system, as a result of our inability to get this person the help they need, becomes a heart breaking reality that we as providers and family members have to reconcile. Explaining to family members who are begging you, as a provider, to help their loved one why the current laws prohibit me from doing what I know clinically will help and potentially save someone's life is even more gut wrenching. These phone calls have kept me up night after night over the years.

These experiences are why I am here in support of HB 2467 today. This bill is a reasonable attempt to help an individual who may or may not have insight into their illness receive the care and treatment they need to attempt a life of recovery.....to help providers treat and support people suffering from a mental illness that has altered the course of their lives...to help family members support their loved ones in getting the treatment they need and reduce the times they have to either fear for the life of their loved one or their own lives...to help our state take a deeper responsibility for ensuring the safety of an individual suffering from a mental illness and the safety of others. HB 2467 is the first step in helping to right the ship.it is imperative, however, that the funding of the appropriate resources accompany this bill to ensure placements and services needed to help these individuals be successful in their attempt at recovery takes place. Our current resources are horrendously inadequate to meet the needs of these individuals and I implore the legislature to ensure that the funding for additional Secure Residential Treatment Facilities, Residential Treatment Homes, supportive intensive outpatient programs, and other civil commitment services is a top priority in this legislative session. Without these investments, HB 2467 will not provide the intended outcomes.

We would like to thank our partners at NAMI who led this effort to develop this proposal and who took into consideration the input and perspective of those with lived experience and providers.

Thank you for your time and for listening to my testimony today.

Respectfully,

Melissa Thompson, MA LPC CADC I

Chief Behavioral Health Officer, BestCare Treatment Services