Testimony House Bill 1090 - Department of Human Services House Human Services Committee Representative Robin Weisz , Chairman

January 8, 2019

Chairman Weisz, and members of the House Human Services Committee, I am Rosalie Etherington, Superintendent of the North Dakota State Hospital (NDSH) of the Department of Human Services (DHS). I appear today to testify in support of House Bill 1090.

Current law mandates NDSH and the Life Skills and Transition Center (LSTC) to admit all court ordered individuals, regardless of the facility's capacity. In order to retain safe and effective care we ask for authority to decline admission when at capacity.

NDSH provides acute, subacute, and specialized rehabilitation hospital services for individuals with severe mental illnesses or substance use disorders as well as residential treatment services for inmates and probationers in the correctional system and for dangerous sex offenders. Our ability to provide a safe and therapeutic environment depends on our ability to maintain an appropriate patient census.

House Bill 1090 attempts to address part of that problem by giving NDSH the ability to decline an admission made pursuant to certain court orders. These come through the involuntary treatment procedures under Chapter 25-03.1 and court orders for restoration of an individual under Chapter 12.1-04-06.

LSTC provides intermediate residential and community services for adults and youth with intellectual disabilities. Residents are generally admitted only through guardian consent. However, legally an order for restoration to LSTC is possible, which is why it is included in this bill.

It is not our desire to turn people away in need. Rather, what we seek is the ability to provide the best care to those in need in the appropriate setting without compromising the care of those currently in our facilities. Moreover, possessing the ability to decline admissions when we are at capacity furthers the development and expansion of crisis and community services. In fact, hospital and residential bed reductions, such as those included in the executive budget, depend upon the expansion of these priority services and the statutory authority to decline admissions when full. House Bill 1090 partially addresses that problem.

This concludes my testimony and I am happy to answer any questions. Thank you.