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NEVADA DISABILITY ADVOCACY & LAW CENTER

Nevada's Federally-Mandated Protection and Advocacy System for Individuals with Disabilities

STATEMENT BY JAMES J. VILT, ESQ. OF NEVADA DISABILITY ADVOCACY & LAW CENTER TO THE ASSEMBLY COMMITTEE ON JUDICIARY **REGARDING ASSEMBLY BILL NO. 53**

February 21, 2003

Good morning. This statement is submitted on behalf of Nevada Disability Advocacy & Law Center (NDALC), Nevada's federally mandated, governor designated protection and advocacy system for individuals with disabilities. See the Protection and Advocacy for Mentally Ill Individuals Act of 1986 (42 U.S.C. §§10801 et seq).

As I am sure you are aware, Las Vegas' medical hospitals have been increasingly called upon to detain mentally ill individuals who have been medically screened and are awaiting transport to the State's psychiatric inpatient facility. These individuals have been apprehended and detained based upon an allegation that they are mentally ill and that, as a result of that illness, present a clear and present danger of harm to themselves or others.

Because the State facility is often at capacity, these individuals will remain in the medical hospital to which they were brought for upwards of 50 hours after they have been medically cleared, generally without being provided with any treatment for the condition which serves as the basis for their detention. Therefore, hospitals in Las Vegas are now acting as detention centers for the mentally ill, a task which they are ill equipped to perform.

Violent outbursts by mentally ill individuals who are being detained against their will in such a setting is inevitable. While NDALC certainly supports health care staff receiving every possible protection in performing their duties, enhancing the penalties for actions related to individuals' untreated mental health needs will do little to further this goal. NDALC would, therefore, encourage this Committee to direct its focus towards preventative measures rathern than punative measures.

Clearly, violent assaults by mentally ill individuals are preventable to a large extent by ensuring that staff are trained to deal with this population. NDALC would suggest that hospitals should develop and implement policies and procedures designed to create an environment that assures the safety of patients and staff. These policies should be complimented with direct care staff who have had comprehensive training in dealing with

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mentally ill individuals with an emphasis on early recognition of the potential for aggressive behavior and deescalation techniques.

Training should be comparable to that required of psychiatric technicians. Moreover, appropriate levels of trained staff should be designated to attend to mentally ill patients and a sufficient number of security personnel and staff with appropriate physical attributes and training should be available to respond to assault alarms.

In conclusion, the reality is that medical hospitals and health care providers are going to continue to be called upon to medically clear mentally ill individuals. NDALC submits that greater training, not penalties, is the best means by which to reduce assaults on providers of health care.