

**Testimony on Senate Bill 226**  
**Submitted by Jamie Buchenauer, Director of Government and Public Relations**  
**Before the Senate Public Health and Welfare Committee on October 2, 2007**

Thank you Chairman Erickson, Chairman Hughes, and members of the Senate Public Health and Welfare Committee for allowing the National Association of Social Workers, PA Chapter (NASW-PA) to give testimony on Senate Bill 226 PN 263.

The National Association of Social Workers is the largest membership organization for professional social workers and nationally serves over 150,000 members. In Pennsylvania we represent about 6,100 members and work to enhance the professional growth and development of social workers, to create and maintain social work standards, and to advance sound social policies.

Senate Bill 226, sponsored by Senator Greenleaf establishes a procedure for obtaining court orders for certain individuals with mental illness to receive and accept outpatient treatment.

NASW-PA would like to bring the following concerns and issues about SB 226 to the committee's attention.

There are complaints nationwide and in this Commonwealth that those needing mental health services are unable to access them. Whether it be due to lack of health insurance, health care coverage that does not provide for mental health or behavioral health services, the stigma associated with accessing mental health services or services not being available in the community, many individuals who seek treatment are not provided adequate services that meet their needs. Additionally patients prescribed medication for mental health needs may not take the medication, often due to financial reasons.

NASW-PA has the following questions: Will the enactment of this bill cause other populations who are voluntarily receiving services to be denied due to the prioritization of assisted outpatient treatment? Will adequate funding follow the enactment of the legislation to ensure subjects of assisted outpatient treatment receive services and are not faced with involuntary hospitalization due to a lack of funding or resources at the local level?

NASW-PA is also concerned about the legislation as it may violate the patient's rights and self-determination by forcing treatment on those who have decided, for whatever reason, to forgo treatment. In light of the trend in other states toward involuntary outpatient treatment, careful evaluation should be done to balance the protection of the

consumer's right to self-determination with the safety of the family and the community. Does the safety of the general public trump the rights of the patient to decide their own course of treatment?

In 2000 the California Senate Committee on Rules commissioned the Rand Institute for Civil Justice to study the effectiveness of involuntary outpatient treatment. The study of involuntary outpatient treatment in eight states (Ridgely, Borum, & Petrila, 2001) found that whereas “community-based care by multidisciplinary teams of highly trained mental health professionals with high staff to client ratios” (p.99) produces good outcomes, the question of whether court orders improve outcomes was left unanswered. At a time when there are few adequate services and fiscal restraints limit funding for mental health services, the cost of bureaucratic aspects of involuntary care could use up resources needed for outreach, follow-up care, and other services that people request.

SB 226 has no mention of the various mental health providers who may be providing treatment to the population of individuals affected by the legislation. Licensed clinical social workers (LCSW) work in a variety of settings, including hospitals, outpatient facilities and private practice where they would encounter individuals needing and not receiving mental health treatment for a variety of reasons. The legislation makes no mention of what role licensed clinical social workers or social workers will have in the involuntary treatment process. In fact, the only mental health providers given standing to advocate on behalf of the patient are the physician and the psychiatrist. Not mentioned are the continuum of other mental health providers who may be able to advise on the needs of the patient.

Social workers play a key role in educating the public about mental illness as a means of fostering prevention, encouraging early identification and intervention, promoting treatment, and reducing the stigma associated with mental illness. The responsibility includes efforts to influence public policy in ways that will foster improved prevention and diagnosis and promote comprehensive, continuous treatment of mental illness for all individuals who need these services and not only those who might be considered a threat to society.

Again, NASW-PA thanks the Committee for the opportunity to testify before you today.