



NAMI
National Alliance on Mental Illness

NAMI | New Hampshire

February 12, 2019

Honorable Chairman Robert Renny Cushing
Criminal Justice and Public Safety Committee
Legislative Office Building, Room 204
36 North State Street
Concord, New Hampshire 03301

Re: HB 726 Relative to the Secure Psychiatric Unit

Dear Mr. Chairman and Committee Members:

My name is Kenneth Norton and I serve as the Executive Director of NAMI NH, the National Alliance on Mental Illness. I also have a family member with a serious mental illness and a co-occurring substance use disorder who has experienced repeated periods of incarceration.

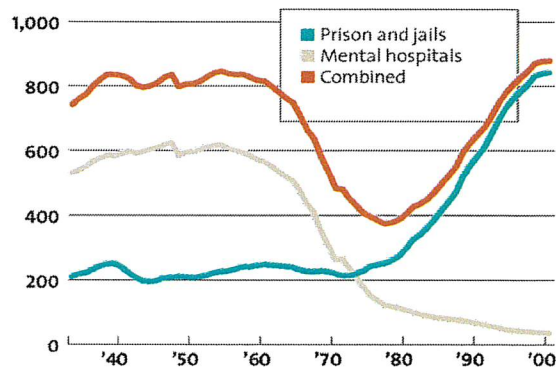
Although we have many questions about aspects of this bill and while we expect to learn more about how the state intends to proceed regarding the various populations of people currently served by our Secure Psychiatric Unit, NAMI NH is here today to testify in support of HB 726.

First, regarding the transfer of the Secure Psychiatric Unit from the Commissioner of the Department of Corrections to the Commissioner of the Department of Health and Human Services I would like to make several comments. Put in a historical context, the Secure Psychiatric Unit in NH was under the Department of Health and Human Services until the late 1980's. I am not aware if at that time, when the authority was transferred, there was a broader discussion of issues that went beyond the issues of a security, geographic location which had been triggered by a precipitating high profile event in the community and the opportunity to relocate from an old brick institutional facility whose physical plant was clearly inadequate and unsafe, to a more modern updated facility.

The timing of this change was when New Hampshire was in the midst of an accelerated process of deinstitutionalizing individuals who had spent decades at New Hampshire Hospital and moving them into a growing community-based system of care. There was not a lot of thought given to the increasing number of individuals with mental illness who were being arrested and involved with the courts. Looking back we can see pretty clearly that as the numbers of

people with severe mental illness were moved to the community, there was also a dramatic increase in the number of people who found themselves incarcerated in our local jail, in our prison and in our

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secure psychiatric unit. The chart above gives a look nationally at the criminalization of people with mental illness and their movement from hospitals to incarceration. This leads us to this point in time where we hear that the largest “mental health” facilities in the country are the Dade County Jail in Miami, the Cook County Jail in Chicago and the LA County Jail.

It is important to note that our current Secure Psychiatric Unit serves many different types of people. Among them are included: those with no involvement in the criminal justice system (transferred to the SPU from New Hampshire Hospital); those convicted of crimes; those who are not guilty by reason of insanity; those who are charged with a crime but who are awaiting competency evaluations; those who have been found not competent to stand trial; and those who a judge has determined can be restored to competence; and individuals who are held at our county jails for a variety of reasons who as a result of their severe mental illness cannot be safely maintained in the jail.

Most notable among them are those who have been civilly committed to New Hampshire Hospital and who have not been charged with any crime who because they are such an extreme danger to themselves or others are not able to be safely maintained at New Hampshire Hospital as it is presently configured. In being transferred to the prison, they come under the oversight of the Department of Corrections and are co-mingled with prisoners convicted of serious crimes and their families have to undergo criminal background checks and have restricted visitation privileges. NAMI NH has long been opposed to this process and this bill would result in those people coming back under the jurisdiction of the Department of Health and Human Services.


For people with severe mental illness who are incarcerated there is always the competing interests of security and safety and treatment and therapeutic environment. Like other areas of mental health treatment there have been significant changes and improvements in these areas in the past several decades. Our neighbor to the south Massachusetts is a great example of having enormously reduced the use of seclusion and restraints of their forensic population at Bridgewater State Hospital through an intensive training effort and shifting the culture to be less focused on a prison level of security and strengthening their therapeutic environment. NAMI NH looks forward to NH taking a similar concerted effort in this direction in the near future.

Toward that end, we are strongly supporting HB 726, we believe that transferring oversight of the Secure Psychiatric Unit to the Department of Health and Human Services and working to transform the Secure Psychiatric Unit into an accredited hospital is an important step toward decriminalizing mental illness for all people with mental illness who have court involvement, whether they end up housed at the Secure Psychiatric Unit or elsewhere in the criminal justice system.

I would also like to note, that this is not in any way a reflection of the care provided by the Department of Corrections. It is NAMI NH’s experience that the leadership of the Secure Psychiatric Unit is composed of highly dedicated individuals who have a great deal of expertise and experience with treating individuals with severe mental illness. We believe they have worked tirelessly to try and provide effective care and treatment to people in their care and that the physical plant and overall resources needed to appropriately serve this population have been consistently lacking.

Thank you for your consideration and I am happy to answer any questions you have.

Sincerely,



Kenneth Norton LICSW
Executive Director