

October 27, 2021

Senator James Gray Chairman  
Committee to Study Workplace Safety in Health Care Setting  
State House Room 103  
107 North Main Street  
Concord, NH 03301

Chairman Gray and Honorable Committee Members,

Thank you for inviting me to testify on behalf of NAMI NH, the National Alliance on Mental Illness. Our mission is to improve the lives of all people impacted by mental illness and suicide. We are not treatment providers in the traditional sense of the term; we accomplish our mission by providing support, education, and advocacy.

I have been employed at NAMI NH since 2003 and have served as the Executive Director since 2011. I have multiple family members with mental illness and some who have co-occurring mental illness and substance use disorders. I am a Licensed Independent Clinical Social Worker (LICSW) in New Hampshire. Earlier in my career, I was employed for seventeen years at Lakes Region Mental Health where I served in various roles including as a liaison to our state hospital coordinating admission and discharge planning, working in our partial hospitalization program, and providing 24/7 mental health emergency services to Lakes Region and Spaulding Hospitals. In those roles, we were very intentional in providing training and taking steps to promote workplace safety and prevent incidents of violence. However, I do want to be clear that I do not in any way consider myself an expert in workplace safety. I am also not an attorney, nor is NAMI NH able to provide legal interpretations regarding proposed criminal statutes.

The news is filled with reports of aggressive and sometimes violent behaviors that are directed toward restaurant employees, store clerks, airline attendants, teachers, and others. It saddens me that these incidents are also directed at health care workers. Specific to health care settings, it appears from previous testimony that lacking any standard definition of violence or assault as well as specific data presents a significant barrier to determining what if any specific actions should be taken to increase safety and reduce violence.

My expertise is in the area of mental illness. One of the data questions I have is how many of these incidents involve people with mental illness. If there is specific information on incidents involving people with mental illness, is that data broken out into whether they are on a voluntary or involuntary status. It is important to acknowledge at the outset that people with

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untreated mental illness can be more violent than the general population, and the possibility of violence is further increased for those people who have a co-occurring mental illness and substance use disorder. However, data indicates that immediate family and friends are the people most likely to be victims of aggression by people with mental illness.

It is also important to note that the current emergency department boarding crisis, which delays timely treatment for individuals in a mental health crisis, is likely a significant factor in increased agitation, and aggression in this population.

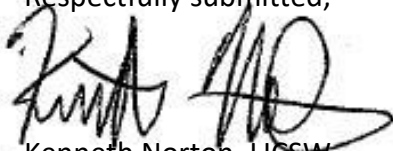
People with mental illness face significant discrimination in many areas of their lives. This includes national estimates that 1 in 4 people with serious mental illness are arrested at some point in their lives. High rates of arrests and incarcerations represent one of the failures of deinstitutionalization and the lack of comprehensive community-based mental health services. NAMI NH is concerned that whether intentional or unintentional, that recommendations coming from this committee and/or the proposed legislation regarding warrantless arrests will negatively impact people with mental illness. Our belief is that people with mental illness need help and not handcuffs.

We recommend the committee focus on comprehensive workplace safety training such as the model developed by New Hampshire Hospital. Combining this with standardized definitions and reporting on data will go a long way toward informing future efforts to address workplace safety in healthcare settings.

Finally, we would like to publicly thank all our health care workers, particularly those working with individuals with acute mental illness. You are our heroes, and we thank you for your dedication and compassion.

Thank you for the opportunity provide input to your committee. I will be happy to answer any questions which you have.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Kenneth Norton', written over a light blue circular stamp.

Kenneth Norton, LICSW  
Executive Director