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November 1, 2018

Frank Reed  
Vermont Department of Mental Health  
Waterbury, VT

*Via Email*

*Re: DRVT Recommendations for ONH Study Committee Report to Legislature*

Dear Frank,

In response to your request at the last ONH Study Committee that committee members provide you with written recommendations for the group to consider forwarding on to the Legislature later this Fall, DRVT makes the following suggestions for inclusion in the Committee's Report:

**The ONH Committee members and public participants universally agreed that, anecdotally at least, the ONH system was not effective or optimal to respond to the needs it was apparently created to address.**

People with mental health conditions, their family and their advocates that were present at the Committee meetings, universally and consistently expressed their **concern that the coercive, disempowering, and medication-dependent aspects of the current ONH system are actually harmful to the patient's long term recovery.**

The State's Attorney's representative indicated several concerns with the ONH system currently, but the most salient issue was the perception that people on ONH's are not adequately supervised to assure they do not create an unreasonable risk to public safety. **There was absolutely no data provided that would tend to show that there is a problem with people on ONH's causing harm to others.**

The **September 27, 2018 Vermont Psychiatric Survivor's Position on ONH's**, provided to the Committee, is a **clear, comprehensive, evidenced-based, persuasive argument for ending the use of ONH's in Vermont immediately.** DRVT agrees and recommends that the Committee report to the Legislature that "a substantial number of Committee members agree that the current ONH system is not serving Vermonters in the most optimal manner and the law should be changed to do away with ONHs and replace them with substantially augmented, various and appropriate, voluntary and accessible mental health services and related supports."

Specifically, DRVT recommends the Committee recommend that the Legislature provide adequate funds to allow AHS create two pilot projects in different parts of the State that would

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On the web: [www.disabilityrightsvt.org](http://www.disabilityrightsvt.org)

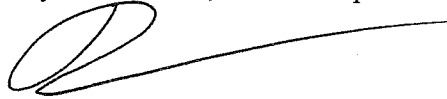
implement an augmented community treatment program to provide behavioral health support services that use a person-centered, recovery-based approaches to provide to persons, including those released from commitment, who have been diagnosed with a severe and persistent mental illness: (1) Real, active and sensitive outreach; (2) mental health services; (3) vocational assistance; (4) education concerning family issues; (5) information to develop wellness skills; (6) peer support services; and (7) housing supports. Such services should be provided by mobile, multidisciplinary teams in community settings and should be reviewed by a committee of stakeholders to be identified by the Legislature.

In addition, DRVT recommends that the Committee request that the Legislature provide adequate funding to allow AHS to take significant, timely efforts to increase the capacity of Vermont's mental health workforce, from psychiatrists to supportive peers to therapists and case managers, in order to address the need for augmented community-based services and the clear lack of adequate workforce to fulfill those needs.

DRVT also recommends the Committee recommend that MHLP and DMH AG's be assigned to criminal cases at the time a Court makes a finding of lack of competency to stand trial or insanity.

I am authorized to state that Committee Member Mary Cox agrees with the recommendations herein.

Respectfully Submitted by A.J. Ruben, DRVT Supervising Attorney

A handwritten signature in black ink, appearing to be 'A.J. Ruben', with a long horizontal flourish extending to the right.