

## **From a NAMI Family to Family Member**

Hi Tom--I tried to keep this as saga free as possible. This is a high level account of my son's interaction with the system & my interventions as a family member. I am not sure what the outcome would have been without my intervention. At the time the situation felt very unsafe, especially for my son. I highlighted the points where it seemed liked the system was really broken:

### **Record of engagement, incarceration & treatment with Bernalillo county court, jail & UNM Hospital for 26-year-old person with untreated mental illness**

#### **June 2013**

- Subject (PT) suicidal, manic & psychotic. Family member called CIT--took several hours for them to arrive. When they did, PT. would not answer door or speak to officers.
- CIT followed up the next day, but PT. did not behave in a way that led officers to order an evaluation. After officers left, PT became enraged & physically threatened family member.
- Enraged PT manic & psychotic. Family member called CIT second time & again it took several hours for CIT to arrive. Referring to the visit they'd had with him earlier that morning, they did not order an evaluation.

#### **July 2013**

- PT had another manic/suicidal event & agreed to attend therapy the following day
- PT included in Family Therapy with Psychologist who was not able to prescribe meds or order treatment (requires psychiatric evaluation).
- PT continued to be manic, psychotic & depressed & avoided treatment

## **August 2013**

- PT charged with minor traffic violation & possession of illegal substance--truck impounded, PT not held, hearing scheduled

## **September 2013**

- PT Depressed, manic & psychotic. Family member attempted to get PT into psychiatric treatment, however there were months long waiting lists at the psychiatric facilities accepting new patients, very few psychiatrists accepting new patients, patients without referrals, or patients without insurance & family member was told there is no such thing as Psychiatric Urgent Care. PT refused to go to ER.

## **October 2013**

- PT depressed, manic & psychotic. Hearing for possession, released with conditions of release
- PT was seen as a self-pay emergency case by a CNP at a clinic in Rio Rancho, but refused to accept treatment.

## **November 2013**

- PT depressed, manic & psychotic.
- PT charged with battery & violation of conditions of release, held without bond several days at MDC, released on bail with conditions of release/pre-trial services
- PT suicidal, depressed, manic & psychotic. PT admitted to violating conditions of release. Family member called CIT--took hours for them to arrive--they talked to him, but there was a shift change & the second shift did not order an evaluation
- PT charged with violation of pre-trial services, held without bond at MDC, hearing scheduled
- Family member contacted MDC by email requesting psychiatric evaluation & treatment--maintained contact with medical staff at MDC

- Family member faxed letter to judge\* with historical account of untreated mental illness & concerns
- Family Therapy psychologist faxed letter of concern to judge\*
- Case continued for competency evaluation
- Family member contacted Public Defender & Mental Health Public Defender (no response)
- PT manic, psychotic & decompensated at MDC visitations

### **December 2013**

- Case continued, reassigned
- Family member faxed letter to new judge\* including historical account of untreated mental illness & concerns
- DA & Public Defender ordered by judge at Hearing to compile case for mental health court & “move things along”
- Family member made contact with medical staff at MDC, PT. moved to psychiatric unit for evaluation & treatment, & to obtain signed release. Per MDC staff: PT was very paranoid with no insight into mental illness. If PT. is found incompetent to stand trial (as would be the case in an untreated psychotic & manic state), he will be released without any conditions of release, i.e. no treatment order, otherwise he could be assigned a treatment guardian & ordered to undergo treatment & take medication.
- PT manic, psychotic & decompensated at MDC visitations

### **January 2014**

- Hearing continued
- PT determined not eligible for Mental Health Court because he refused treatment & was not willing to admit a diagnosis (in his psychotic state, he lacked insight). Mental Health court advised: If probation is sentenced, MH officers will supervise him if the judge recommends so.

- Family member continued contact with MDC medical staff regarding protective custody, psychiatric evaluation & treatment.
- PT manic, psychotic & decompensated at visitations

## **February 2014**

- Hearing continued
- Family member continued email/phone contact with MDC--treatment with medication & therapy initiated with initial diagnosis. In therapy PT expressed verbal threats against specific parties (party x) to MDC staff. Threatened parties were made aware of remarks by MDC so that evaluation & treatment could address issue. Family & PT informed by MDC medical staff that if PT continued to refuse treatment, he could be sent to State Mental Hospital in LV, NM.
- Family member continued to email symptom/behavior status updates following MDC visits
- PT showed marked improvement on medication
- PT continued treatment & stabilization at MDC in order to attend competency hearing, per MDC staff upon release, PT will be admitted to UNM Psychiatric Hospital
- PT attended competency hearing—all cases dismissed, however PT not released on the weekend. Neither PT nor family received an update as to release.
- Family member sent fax to judge & MDC asking status of case (no response)
- Family member sent email to UNM Psychiatric Inpatient services asking about release from custody into hospital
- Family member made phone call to UNM psychiatric, staff unable to tell family anything without a new signed release
- PT signed release, nurse called to inform family member that PT was admitted for treatment.
- Call to family member from CIT officer--looking for PT to serve a

restraining order per party x

### **March 2104**

- PT. in treatment at UNM Psychiatric for 2.5 weeks--continued marked improvement
- Family member maintained continued contact with UNM Psych staff, faxed PT history, family medical history, additional history, symptom/behavior details, faxed status updates following visits
- PT assigned family member as 6 mos. treatment guardian over the phone. Although family member requested information from several sources (UNM Psychiatric hospital, Mental Health Court, etc.), no treatment guardian information was ever provided.
- PT released from UNM Psych hospital
- Welfare check on PT by CIT officer who served restraining order
- PT assigned Dr., caseworker, assisted by UNM staff with applications for healthy insurance, Medicaid, food stamps, etc.
- Caseworker provided referral to DVR

### **September 2014**

- PT Currently stable & in outpatient treatment at UNM Psychiatric Hospital
- Family member not sure of status of treatment guardianship since 6 months is up, not sure if any sort of hearing is scheduled or if there are continued conditions of release.

\*Details re. Hearing status & schedule tracked by family member at case management website. Details re. PT's assigned unit at MDC tracked by family member at MDC website