

The Commonwealth of Massachusetts

PRESENTED BY:

Patricia A. Haddad

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to creating a pilot program to transfer high acuity behavioral health and dual diagnosis patients away from overcrowded emergency departments.

PETITION OF:

Name:	DISTRICT/ADDRESS:
Patricia A. Haddad	5th Bristol
Kimberly N. Ferguson	1st Worcester
Brian M. Ashe	2nd Hampden
Michael D. Brady	Second Plymouth and Bristol
Peter Capano	11th Essex
Tackey Chan	2nd Norfolk
Daniel R. Cullinane	12th Suffolk
Daniel M. Donahue	16th Worcester
James B. Eldridge	Middlesex and Worcester
Dylan A. Fernandes	Barnstable, Dukes and Nantucket
Sean Garballey	23rd Middlesex
Carlos Gonzalez	10th Hampden
James K. Hawkins	2nd Bristol
Jonathan Hecht	29th Middlesex
Natalie M. Higgins	4th Worcester
Kate Hogan	3rd Middlesex
Randy Hunt	5th Barnstable

Hannah Kane	11th Worcester
David Henry Argosky LeBoeuf	17th Worcester
Jack Patrick Lewis	7th Middlesex
Harold P. Naughton, Jr.	12th Worcester
Patrick M. O'Connor	Plymouth and Norfolk
Marc R. Pacheco	First Plymouth and Bristol
Denise Provost	27th Middlesex
Rebecca L. Rausch	Norfolk, Bristol and Middlesex
David Allen Robertson	19th Middlesex
Maria Duaime Robinson	6th Middlesex
Daniel J. Ryan	2nd Suffolk
Walter F. Timilty	Norfolk, Bristol and Plymouth
José F. Tosado	9th Hampden
Steven Ultrino	33rd Middlesex
John C. Velis	4th Hampden
Bud L. Williams	11th Hampden

By Mrs. Haddad of Somerset, a petition (accompanied by bill, House, No. 1720) of Patricia A. Haddad and others relative to creating a pilot program to transfer high acuity behavioral health and dual diagnosis patients away from overcrowded emergency departments. Mental Health, Substance Use and Recovery.

[SIMILAR MATTER FILED IN PREVIOUS SESSION SEE HOUSE, NO. *1064* OF 2017-2018.]

The Commonwealth of Massachusetts

In the One Hundred and Ninety-First General Court (2019-2020)

An Act relative to creating a pilot program to transfer high acuity behavioral health and dual diagnosis patients away from overcrowded emergency departments.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1	Chapter 19 of the General Laws, as appearing in the 2016 Official Edition, is hereby
2	amended by adding the following sections at the end thereof: -
3	Section XX. For the purposes of this section, the term "dual diagnosis" shall mean a
4	mental illness and a substance abuse problem occurring simultaneously.
5	There shall be, on the campus of Taunton State Hospital, a Behavioral Health Emergency
5 6	There shall be, on the campus of Taunton State Hospital, a Behavioral Health Emergency Department Relief Pilot Program to accept medically stable, high acuity behavioral health and

9 or who have a dual diagnosis should be transferred to this pilot program if another appropriate 10 setting cannot be located within four hours of admission to the emergency department. Patients 11 admitted to the pilot program will be cared for until an appropriate placement is found that meets 12 the patients' needs, which shall be no more than fourteen days following admission to the pilot 13 program. The program shall be operated by the department and staffed by the department 14 registered nurses, psychiatrists and other staff as needed to provide appropriate care, with 15 program protocols and a staffing plan to be developed during the first six months following 16 passage of this legislation by a committee including the department, the department of public 17 health, the national alliance on mental illness, the Massachusetts Nurses Association and the 18 emergency nurses association. For the purposes of this pilot program, Taunton State Hospital 19 shall be allowed to accept patients classified under Section 12 of Chapter 123 of the General 20 Laws. The pilot program shall operate for a period of two years, with a report to be filed by the 21 department with the Joint Committee on Mental Health during year two of the program, to 22 evaluate the success of the program in decreasing emergency department overcrowding in the 23 Southeast Region, and the quality of care provided in the program. The report shall be drafted 24 by an independent entity, utilizing data from the department and the local hospitals in the 25 Southeast Region.