

June 28, 2020

The Honorable Mike Carter
425 5th Ave. North
Suite 6325 Cordell Hull Bldg.
Nashville, TN. 37243

RE: The Declaration for Mental Health Treatment (DMHT) in Tennessee, Annotated Code 33,
Chapter 6, Part 10

Dear Assembly Member Carter,

My name is Brianna Cheever and I am a social worker and advocate who attends graduate school in your district.

I really appreciate the addition of the Declaration for Mental Health (DMHT) in Tennessee legislature. It is very important for our community that individuals with mental health disorders can stay safe as well as have self-determination in their own care. I know the policy is still relatively new, as it was only signed as law in 2016. But I do believe we will see some significant impact in the years to come if it is implemented properly.

However, there are a couple changes to the policy that I would recommend in order to avoid potential problems in the future. First, I recommend an addition outlining who is responsible for providing the DMHT to clients and helping them fill it out. Mental health providers, primary care physicians, and/or social workers should be required to fill out a DMHT with clients upon diagnosis of the mental disorder, and must document whether the client received or declined a DMHT or that the provider has specifically referred the client to someone who can assist.

The policy also states that admission to treatment cannot be conditioned on whether a person has created a declaration for mental health treatment. I recommend this portion be left in the policy, but the phrasing should be changed to reflect that a patient cannot be denied services if he/she refuses or declines a DMHT, rather than whether he/she has filled one out. If providers are required to assist clients in filling out a DMHT, no client should be without a DMHT.

Lastly, I would recommend the addition of a section stating that providers can refuse to provide the preferences outlined in the DMHT for a client but must notify the client immediately upon receiving a copy of the client's DMHT and prior to a mental health crisis. This protects the rights of providers to decline services if they feel the preferences would be harmful, unbeneficial, and/or out of their expertise. Notifying the client immediately will allow changes to be made to the DMHT with the client's consent or allow the client to find a different provider who can follow his/her preferences.

I am a graduate student working towards my master's in social work with an emphasis in mental health. The DMHT and mental health issues in general are very important to me because I have several family members, friends, and clients who suffer from mental health issues. I would go so far as to say that no one in the State of Tennessee or even the entire United States has been untouched by mental health issues, whether in themselves, family, or friends. Treatment services are very lacking for individuals with mental health issues, but the DMHT is a great start in providing treatment while respecting individuals' rights to self-determination.

The recommendations I have given have been from research but are also from my personal experience working in a pain management clinic for six years. I know that most of the time patients do not know what resources are available to them and can become very confused with paperwork. Many providers assume patients have received information already, and the administrative and clinical side of clinics is completely separated. Advance directives, powers of attorney, disability paperwork, etc. all go to the administrative side where providers do not see them unless they specifically need to fill something out. Also, working in pain management I have seen how different providers vastly differ in their viewpoints on what to implement with clients. Some providers think increasing medications will help, while others think increasing the medications would be too risky. It is important for providers not to be forced to implement a treatment plan just because it is what the patient wants, therefore it is good to incorporate a section for physicians' rights as well.

I urge you to consider drafting a request to implement the changes listed in order to avoid messy situations in the future. Thank you for your consideration.

Sincerely,

Brianna Cheever, BSW
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