GMCB Public Comment

Submit Date: 2/24/2023

Name: Laura Nelson
Topic: Use of $18 million for mental health UVMCC

Comment: Vermont's unmet mental health care needs are many. But the one most glaringly apparent is inpatient beds, for which the money is currently earmarked. We have been banging the drum for this need since Irene when the Waterbury complex shut down. It has only gotten worse. The legislature took testimony from ED doctors and nurses not long ago, some of whom were truly distraught at the PTSD level for the ongoing abuse and serious injury they receive from treating mental health patients in the ED for WAY too long because there is no place else to put them. We hailed them heroes during Covid. Now we are dumping potentially dangerous patients with serious mental health needs into ED's that are not equipped to care for them, for extended periods!, at the expense of the health and safety of our precious and overworked medical staff. It is dangerous for the professionals, who we risk losing since they are at the end of their ropes with these working conditions. It is dangerous for other ED patients, whose care may suffer since staff get preoccupied with putting out mental health related fires. It is just such grossly inadequate and inhumane practice to keep folks with this level of mental health need in an ED not equipped in any way to meet their needs, over extended time!! You have to determine if this is Vermont's most pressing mental health crisis area, I feel like it is, and money ear marked for this purpose should remain for this purpose. The budget put forward by Central VT Hospital a few years ago was out of this world high, because it had numerous items in it that had little to do with increased bed capacity - parking garage, new entrances, rooftop gardens, etc. I'm sure a lot of that is important infrastructure, but it is not essential to increasing mental health capacity. Use the $18 million to build out capacity as far as possible, wherever possible. Yes, we have other unmet mental health needs, but inpatient capacity has been a critical unmet need for a long time, at the expense of the patient, the very valuable but vulnerable staff tasked with their care in an inappropriate ED setting, and the expense of other ED patients who need for the ED to be a nonviolent setting where they can receive the attention and treatment they need. Listen to your medical staff, before you lose them.

Post Comment: Yes