



PRAIRIE ST. JOHN'S™

March 8, 2016

Madam Chairman Hogan and Members of the interim Human Services Committee,

Thank you for taking your time to address the needs of persons who are challenged with behavioral health issues.

It is an honor and privilege to be able to write this letter to your committee. As a psychiatrist who was trained in South Dakota and is practicing in Minnesota and North Dakota, I make two suggestions that I believe will significantly improve the mental health hold process in North Dakota and will dramatically help our patients:

1) I believe the hold period should be extended to 72 hours like our neighboring state Minnesota. I faithfully believe that 24 hours is just too short to obtain necessary and valuable collateral information or make a thorough observation and monitoring of behaviors. It is not surprising that the state with the lowest suicide rate in the nation (New York) has a hold time of 72 hours. It might be also worth mentioning that the suicide rate is substantially higher in North Dakota compared to Minnesota 18 versus 12 per 100,000 per year. On the other hand, it might be that the 72 hours are all that's needed to fully evaluate a patient and could save the patient from being unnecessarily committed and reduce the burden on the courts and behavioral health system.

2) I believe most physicians would concur with me that maintaining a positive patient-doctor relationship is vital for successful treatment of mental illnesses. I believe that having the doctor attend court to testify for the county and "against" their patients is counterproductive and defeats the purpose of achieving treatment goals. Often times, this ends with opposite results, especially since the patients who are choosing to go to court are usually under the assumption that their doctor is acting against their best interest. For this reason, I believe in adapting the model of having an independent examiner assess the patient, collect collateral information, represent the counties in hearings, etc. In addition to maintaining viable doctor-patient relationship, this process will bring in an extra examiner for a more thorough screening process and will save valuable doctors' time so they can concentrate on working on

Telephone
701.476.7200

510 4th Street South
Fargo, ND 58103

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patients' needs, medication management and other parts of the treatment plan. That will be an excellent improvement in the current process.

Thank you for your time and attention.

Sincerely,

Dr. Ammar Ali
510 4th St S
Fargo ND 58103

American Board Certified in Psychiatry and Neurology, Faculty member and Lecturer at the University of South Dakota Psychiatry residency program, Practicing Psychiatrist at Prairie St John's Hospital, St Cloud Hospital, and Rice Memorial Hospital, Member of the American Psychiatric Association and South Dakota Psychiatric Association.