

Opposing House Bill No. 4129: **Medically Frail Parole**

Thank you.....

My name is..... and I am representing the medical facility branch of OSHA, or MOSHA for short (haha). I am here to oppose House Bill number 4129, entitled “Medically Frail Parole.”

The current law states that prisoners who have reached their minimum sentence may be granted medical parole if they are determined to be physically or mentally incapacitated. The current law also requires a review of medical, institutional, and criminal records prior to being accepted into medical parole. This proposed bill is an unnecessary and unsafe addition to a perfectly functional system that is already in place. It would allow prisoners who are, in fact, physically capable of causing harm, out of prison and into a medical care facility. This bill actually removes the requirement for potential medical parole prisoner’s medical, institutional, and criminal records be reviewed. The only stipulations are that the prisoners be considered “medically frail,” which is defined by the bill in Section 22: Subsection C. “Medically Frail” describes an individual who is a minimal threat to society as a result of his or her medical condition, who has received a risk score of low on a validated risk assessment, whose recent conduct in prison indicates he or she is unlikely to engage in assaultive conduct, whose ability to perform 2 or more activities of daily living is significantly impaired....as a result of a disabling mental disorder....a serious and complex medical condition...or a physical disability.” If we take this definition and apply it to a case of a prisoner with early onset dementia, the outcome is a clearly dangerous person who should not be allowed out of prison. If this prisoner whom we shall name “Joe” is a generally well behaved inmate who struggles to dress and to walk due to some balance issues, he would qualify as having a mental disorder and being unable to

complete 2 activities of daily living. There are two obvious issues with this scenario. The first is that Joe is still capable of committing harm to hospital staff who frequent his room and bedside, and even other patients in the facility. Being unable to complete 2 or more daily activities is by no means a thorough method to ensure that the prisoner is unable to commit harm. The second major issue is that while Joe may have been a decently well-behaved convict, a mental disorder such as dementia or Alzheimer's could potentially make the prisoner significantly more agitated than he was prior to the surfacing of the disease. Due to the fact that many mental disorders interfere with patient's ability to communicate, simple issues like hunger, pain, sleepiness can easily escalate into frustrated and upset patients. So, the very disorder that is allowing the prisoners to be considered for parole can potentially make that prisoner even more violent.

As a member of the healthcare workforce who has been physically assaulted by patients with mental disorders causing aggression, I would not feel safe working in a facility with an easily aggravated and only slightly disabled convicts. As a patient, the hospital needs to be a safe place to heal and recover, this bill would turn medical facilities into a more dangerous place for staff and patients alike. In a nation focused on early detection of cancer as a weapon to fight it, passing a law that would potentially make patients fearful of medical facilities is blatantly counterproductive. The medical branch of OSHA and the people of Michigan are satisfied with the system in place, requiring prisoners to be physically or mentally incapacitated to be allowed into a medical facility. Patients without those limitations must remain in prisons and use the medical resources already provided to them there, for the safety of the people and to maintain the effectiveness of the medical system.