

Testimony in Support of HB 1470, Relating to Continuation of Behavioral Healthcare for Incarcerated Persons

**Submitted by: Capt. Andrew Frobig
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House Human Services Committee Hearing February 9, 2021 9:00 a.m.

Chairman Weisz and members of the committee,

My name is Andrew Frobig, and I serve as the Jail Administrator at the Cass County Jail. I am appearing this morning to provide testimony in support of HB 1470.

This bill presents the opportunity for two significant steps forward throughout North Dakota.

Continuity of care is a critical component of effective care, and I welcome the opportunity to codify into law a standard which establishes that a person already connected to public behavioral healthcare shall continue to receive such care even if they find themselves incarcerated. In my nearly 22 years of correctional experience, I have observed and experienced that unaddressed or under-addressed behavioral health matters are indeed a primary driver of conduct which results in persons becoming incarcerated. At my facility, we have spent the better part of the past 15 years attempting to increase our ability to recognize, assess, evaluate, and connect persons with behavioral healthcare needs to adequate care providers. During that time, we have experienced a steady increase in the number of persons requiring such care, and a steady increase in the severity of those afflictions. In other words, the scope of behavioral health care needs among the inmate population continues to grow, and it grows at pace that exceeds both our ability to keep up and also the availability of community resources.

Behavioral Health encompasses both substance abuse and mental illness. Often, persons who find themselves incarcerated suffer from both concurrently. Resources are insufficient throughout this state, and barriers remain, for all persons who suffer from behavioral health afflictions. That scarcity of resources, and those stacked barriers, are further compounded once a person becomes incarcerated. For those who have managed to navigate the existing system, and become connected to a public behavioral health provider, it makes both fiscal and medical sense to ensure that they continue receiving treatment even if they become incarcerated.

I also support the study proposed in HB 1470. I sincerely hope that if this bill is passed, that this study is one that will actually be conducted and prioritized. It is critical that the legislature be given the opportunity to learn about the realities and true scope of this growing problem. Much effort and significant money has already been put into efforts to address behavioral health, and the money spent to develop programming, increase access, streamline processes, and provide for treatment has certainly had a positive impact, but it has only been sufficient to reach a portion of those who are afflicted with such problems. These programs have run out of money due to underestimated need, we have experienced long wait lists for those who qualify and need services, and to be perfectly frank, people are ending up in jail as a result, and incarceration is being extended as cases are delayed due to lack of resources to provide prompt assessment, evaluation, and referral to necessary care. A comprehensive study is absolutely necessary so that you, as legislators, can learn the true scope of these issues, and review the full relevant data, to make more informed decisions in future efforts to address these community wide problems.

I thank you for your time, and I will stand for questions.