



Testimony for the NYC Council Committee on Fire and Emergency Management (Jointly with the Committee on Mental Health, Disabilities and Addiction, the Committee on Hospitals, and the Committee on Public Safety)

At the Oversight Hearing on Mental Health Involuntary Removals and Mayor Adams' Recently Announced Plan

Joann Ariola, Chair

Members: Carmen De La Rosa, Kevin C. Riley, Oswald Feliz, James F. Gennaro, Lynn Schulman, Robert F. Holden, Kalman Yeger, and David Carr

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Submitted by Kimberly George, President and CEO, Project Guardianship

Thank you to the various Committees here for allowing me the opportunity to provide testimony today. My name is Kimberly George, and I am the President and CEO of Project Guardianship.

Project Guardianship is a recent spinoff of the Vera Institute of Justice and an independent non-profit organization providing comprehensive, court appointed guardianship services to hundreds of limited capacity New Yorkers citywide. We serve clients regardless of their ability to pay and provide services for some of the most compelling and complex cases in the city. Our clients include older New Yorkers living with serious mental illness, disability, dementia, substance misuse disorders, Traumatic Brain Injury, and other conditions that negatively impact their ability to make decisions. We also share research and recommendations for building a better guardianship system and advocate for a more equitable service response for people in need of surrogate decision-making supports or protective arrangements.

As you all know, in November 2022, Mayor Adams announced that first responders would be directed to remove and hospitalize people who appeared too mentally ill to care for themselves, regardless of whether those individuals consented to medical treatment. In doing so, the mayor indicated a need for additional resources for hospitals to accommodate the anticipated increase in psychiatric patients throughout the city. This increase will certainly have a ripple effect on a variety of related human services providers, including guardians.

This is because, according to data collected by the NYS Office of Court Administration, hospitals account for 25% of guardianship petitions brought in New York State. This occurs largely in cases where a patient cannot consent to services, a patient is unable to navigate



Medicaid enrollment to cover their medical bills, and/or the hospital cannot arrange for a safe discharge. In most cases, the patients lack familial and other supports. According to a recent report by the American Bar Association, mental illness is the reason for guardianship appointments in approximately 20% of cases nationwide.

Considering this data and our own experience serving as a legal guardian over the past 18 years, we know that an increase in hospitalizations will lead to an increase in guardianship petitions and appointments, and that – just like our hospitals – guardianship providers will also need more resources to meet that imminent need. Further, as more and more private attorneys are stepping away from guardianship practice due in part to the intense and time-consuming nature of the work alongside strict limitations on legal fees, judges are increasingly reliant on nonprofit providers to deliver these vital services. Nonprofits' interdisciplinary team-based models of employing case managers, finance associates, and attorneys offer guardianship clients the individualized, wrap-around support that solo private practitioners cannot.

Today, Project Guardianship serves as legal guardian for nearly 200 New York City residents. Not only are most of them very poor, but over half of our clients (54%) have diagnosed mental health disorders, such as schizophrenia, bipolar disorder, or post-traumatic stress disorder. As a mission-driven organization whose bottom line is the health, safety, and dignity of our clients, it is critical that our client-to-case manager ratio remain manageable so that the quality of our services – which often revolve around care coordination and keeping New Yorkers in their homes with Medicaid coverage and medical and mental health treatment – remains high.

We stand ready to respond to the imminent uptick in guardianship petitions and appointments due to Mayor Adams' directive, but we will need additional funding to meet the needs of these clients adequately and in the most person-centered way possible. We have and will continue to fill the gaps in our social safety net and will persist in connecting our clients to the housing, health and mental health care, legal and immigration services, and public benefits they need and deserve to gain stability and reduce their involvement with first responders and the hospital system. With additional support from the Council, we can offer our model of interdisciplinary services for more New York City residents who will undoubtedly enter guardianship arrangements as this directive is executed.

We hope to work with you as we strive to serve our fellow New Yorkers who may be impacted by this new directive.

Thank you for your time and consideration.



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Please contact Kimberly George at kgeorge@nycourts.gov with any questions or requests for additional information.