



The Matthew Harris Ornstein Memorial Foundation

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Testimony to the Commission to Study Mental and Behavioral Health in Maryland

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OUR STORY



- 1/3/2015 – our son Matthew Harris Ornstein died in a tragic accident resulting from an undiagnosed, untreated mental illness.
- For the preceding ten years, most of which were spent in Maryland, Matthew and his family suffered unrelenting pain, disappointment and endless frustration with the broken mental healthcare system.
- Before his illness, Matthew lived a full life as a stand-up comic, national champion debater, Princeton graduate and more.
- Matthew was beloved by hundreds of family members and close friends for his intellect, his humor and his kindness.
- The Matthew Harris Ornstein Memorial Foundation (MHOMF) was founded by his family in August 2015 to honor his all too brief life.

MISSION AND INITIATIVES – PART 1



MHOMF's Mission has two components. The first is to honor the healthy Matthew, his passion for, and national success at, competitive policy debate; his belief in debate as a key to success; and his devotion to others less privileged than he.

- MHOMF's first program (Summer 2015) was establishment of the Matthew Harris Ornstein Summer Debate Institute, in partnership with the new Washington Urban Debate League.
- Designed to teach learning and life skills to students at primarily Title 1 public and charter schools in DC and Prince Georges County.
- Highly successful and growing exponentially.
- Useful in demonstrating that mental illness can strike anyone.

MISSION AND INITIATIVES- PART 2



The second prong of MHOMF's mission, and the one most relevant for today, is to honor Matthew's memory by:

- (1) Working to eliminate stigma, minimize suffering and improve outcomes for those victimized by serious mental illness,
- (2) Creating programs designed to help repair the nation's horribly broken system for the care and treatment of those blameless individuals with these insidious brain diseases; and
 - Leap Foundation for Research to Practice (www.lfrp.org)
 - Definition of Insanity Documentary (www.doifilm.com)
- (3) Standing up, speaking out, and telling Matthew's story.

“DEFINITION OF INSANITY”



- Feature length documentary (can be found at www.doifilm.com).
- About Judge Steven Leifman & the Miami Criminal Mental Health Project.
 - Pre-Booking Crisis Intervention Training (more than 7,600 trained).
 - Pre-Trial Diversion (housing, medication support, group therapy).
 - Film created to be used as template by other jurisdictions.
- Movie has been shown privately, to great acclaim, in cities experiencing pressure from widely reported tragedies involving police (Rochester, NY); at state judicial conferences (Illinois and Texas); at public screenings hosted by entities such as NAMI and the National Law Enforcement Museum, and in other places seeking transformational change in broken systems of care.
- Premiered March 2020 at the Miami Film Festival; ran on PBS April 2020.

LEAP FOUNDATION FOR RESEARCH TO PRACTICE



- Partnership with Dr. Xavier Amador (author of international bestseller “I’m Not Sick, I Don’t Need Help” and TedTalk at <https://www.youtube.com/watch?v=NXxytf6kfPM>) & the LEAP Foundation for Research to Practice (www.lfrp.org) to provide below cost training to caregivers, healthcare providers, law enforcement personnel and others in effective method to improve communication with those suffering from anosognosia in order to move towards agreement on joint goals.
- Pre-COVID: full day trainings ; 2nd day provided to train new trainers.
- During COVID: 3 hour, immediately fully enrolled online trainings.
- 960 people have attended these joint programs to date.

MHOMF'S AMBITIOUS "TO DO" LIST



- **WHILE CONTINUING/EXPANDING OUR EXISTING PROGRAMS, WE HOPE TO:**
- Find more ways to work on eliminating stigma/decriminalizing mental illness
- Bring science-based knowledge of anosognosia to more and wider audiences
- Convene small groups of interested stakeholders to support a clearly defined (Annual Report, Recommendation 9) and science-based legal standard for court-ordered treatment.
- Partner with clergy/religious leaders, the first (and often only) responders in cases of SMI (prevalence of psychosis with religious ideations, etc.).
- Select from among several options the topic for our next documentary.
- Vet with interested parties the idea of a subspecialty in the treatment of SMI.
- **FIND SOME TIME TO REST!!!**

BE LEADERS: SOME “OUT OF THE BOX” IDEAS!



- 1. PROPOSED ACTION:** Require everyone who gets a driver’s license to name a healthcare power of attorney (and establish a database with names/contact information that could be accessed in case of medical/mental health emergency). **BENEFIT:** Enable doctors/judges to have someone from whom permission to treat can be obtained if an individual is incapacitated/unable to reach an informed decision him/herself.
- 2. PROPOSED ACTION:** Allow friends/family members to apply and pay for healthcare insurance for adults with SMIs who would otherwise be uninsured. **BENEFIT:** Enable those with resources to defray healthcare costs of loved ones, helping facilities be able to treat more of the uninsured.

ANOTHER BOLD IDEA!



Collaborate with non-profit organizations, psychiatrists, community stakeholders to establish pilot projects and ultimately submit an application to the ACGME (Accreditation Council for Graduate Medical Education) for a Board Certification eligible 1 year fellowship in providing psychiatric care to individuals with serious mental illness.

- Include rotations in locales: inpatient psychiatric wards, forensic wards, emergency rooms, specialty court settings, competency and commitment hearings.
- Didactic curriculum would include evidence on the latest brain research/neuroscience, anosognosia, newest treatments (medication and other), existing community resources and relevant laws.
- Convince area health insurers to reimburse certified specialists at higher rate.
- Provide financial incentives, such as partial forgiveness of student loans, for those specialists who work for two years in underserved areas.

WHY????



- To enable individuals, loved ones/caregivers, other doctors to be able to identify immediately those with the requisite knowledge and experience to treat SMI.
- To help prevent critical errors of judgment and erroneous advice in life and death matters due to lack of relevant knowledge and adequate experience.
- Eliminate needless shopping around, thereby saving critical time in finding the RIGHT doctor quickly (importance of first episode treatment).
- Save having to pay for visits to doctors not qualified to treat SMI.
- Incentivize more practitioners to specialize in treating SMI because of heightened confidence after additional training, potential for enhanced financial and psychic rewards.

THANK YOU For Your
Devoted Effort to
Improve Maryland's
Care & Treatment of
Those Who, Through
No Fault of Their
Own, Suffer From
Serious Mental
Health Disorders &
Insidious Brain
Diseases.

And THANK YOU for the chance to speak with you
today. We are ready to help in ANY way!

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