The Role of the Patient Advocates:
A Summary of the Medical Records of William Bruce

By March 2006, William Bruce had a well documented history of dangerousness, paranoid thinking, and refusal to take medication. Despite this, and despite his family's oft-voiced fears for his and their safety and their pleas that he remain in an environment where he would be compelled to take the medications that were so effective in ameliorating his condition, the patient advocates from the Disability Rights Center ("DRC") persistently lobbied William's doctors to allow William to leave Riverview. William was discharged from Riverview Psychiatric Center on April 20, 2006. He murdered his mother on June 20, 2006. The following is a brief summary of events leading up to his discharge, with an emphasis on the role that the patient advocates played in this tragedy.

On March 23, 2006, William met with his treatment team, including his psychiatrist Dr. Fliesser. The "patient advocates" Helen Bailey and Trish Callahan from the DRC were also present at this meeting. Members of William's family were excluded and were not present. Dr. Fliesser's notes indicate that during the meeting "repeatedly emphasized to the disability rights advocate my clinical opinion that the patient's paranoid psychosis is not likely to improve without pharmacotherapy" and "the patient continues to refuse pharmacotherapy." Fliesser's notes make clear that the patient advocates disregarded his cautions. The notes reveal that the advocates instead asked for clarification of specific treatment goals for him so he could be released from the hospital. Ms. Bailey, not a doctor herself, even asked if a second opinion from another psychiatrist could be obtained. (Tab 15[1]: Note by Jeffrey M. Fliesser MD, dated 3/23/06).

Helen Bailey stated that she had reviewed the medical record (!) and saw no documentation to support William's having to remain at Riverview. (Tab 16: Progress Note from the Treatment team meeting, dated 3/23/06). Patient advocate Callahan suggested that William may actually be getting worse by remaining at Riverview. (Tab 16: Progress Note from the Treatment team meeting, dated 3/23/06). On March 27, 2006, Dr. Fliesser's notes again indicate that he "emphasized" to both William and William's "advocates" that William requires pharmacotherapy to treat these paranoid symptoms and be able to be safely discharged to the community and William continues to refuse medication. (Tab 19: Progress Note by Jeffrey M. Fliesser, MD, dated 3/27/06). His views mirrored that of the people who knew William best, his family.

After Dr. Fliesser stopped seeing William on March 30, 2006, the patient advocates began to urge William's new psychiatrist, Dr. Filene, to discharge William. At a treatment team meeting on April 6, 2006, social worker Andy Davis and patient advocate Trish Callahan were present. During the meeting, the notes reveal that Callahan actually instructed William how to answer, as if she were his lawyer at a deposition or trial, and repeatedly interjected on his behalf, as Dr. Filene was attempting to examine him. William deferred to Callahan and was much less interactive than in a meeting with Dr. Filene on the previous day, when, notably, the patient

[1] References to "Tab __" are to the medical records found behind the referenced tab in an accompanying notebook.

advocates were not present. Callahan redirected the discussion away from exploring William's history, mental status and treatment, and focused the discussion instead on attempting to define a date of discharge and her own assertions that William's well-being was being harmed by ongoing hospitalization. She stated the prospects of his summer employment would be impaired the longer he stays. The meeting had a tone of "legal antagonism" according to Dr. Filene's contemporaneous notes. (Tab 23: Progress Note by Daniel R. Filene, MD, dated 4/6/06).

When Dr. Filene asked William about his activity level being increased so he could access the community he hesitated. Again according to Dr. Filene's contemporaneous notes: "Ms. Callahan then stated, 'They want to see that you can play nicely in the community. Just say yes,' after which William Bruce stated 'Yes.'" The doctor asked William whether there was any risk he'd refuse to return to the hospital from a community trip; according to the medical records, "Ms. Callahan told him 'Just say no,' after which William stated 'No.'" (Tab 23: Progress Note by Daniel R. Filene, MD, dated 4/6/06)

When Dr. Filene asked William about speaking with outpatient providers, Ms. Callahan responded that there would be no benefit in obtaining their opinions and William declined consent. When Dr. Filene asked if he could speak with William's mother, Ms. Callahan responded that his parents are a negative influence in his life (!) and William declined consent. William said he would not undertake psychological testing with a Dr. Gregor. When Dr. Filene inquired about his misgivings, "Ms. Callahan responded 'He said no, he doesn't have to answer anything else.'" William was innately guarded about his mental state, and was "further urged in this direction by his advocate who urges him to avoid revealing personal information." "The opinions of those who know him best in the community [referring to William's family and others] are not available to me, again with the advocate's concurrence." (Tab 23: Progress Note by Daniel R. Filene, MD, dated 4/6/06)

On April 11, 2006, William told Dr. Filene that his advocates are stating "he is not ill, not a danger and should be released." (Tab 24: Progress Note by Daniel R. Filene, MD, dated 4/11/06). On April 20, 2006, Dr. Filene noted that "Mr. Bruce and Patient Advocates continue to push for his release" in advance of the expiration of his court commitment. The Client, social worker, and Advocate continued to reiterate that William had a secure discharge plan including housing with his friend Jesse. Dr. Filene then began discussing a plan of discharging William on April 24 but this date did not work for social worker Andy Davis for his own personal reasons, who requested it be moved to April 20. Dr. Filene agreed to the advancement. (Tab 26: Progress Note by Daniel R. Filene, MD, dated 4/20/06).

After discussing this plan with William, Dr. Filene was informed that Jesse was out of state until early May but Andy Davis arranged for William to stay at a hotel *by himself* until Jesse returned. Dr. Filene noted that "he weighed the potential increased risk of social isolation while using a hotel, against the importance of promoting the patient's trust in the mental health system by not reversing my agreement to discharge." At the team meeting Dr. Filene discussed the plan with social worker Davis who was comfortable with it and indicated he was nearby and could check on William frequently. (Tab 26: Progress Note by Daniel R. Filene, MD, dated 4/20/06). William was discharged on April 20, 2006.

The patient advocates repeatedly encouraged Dr. Filene to discharge William. Even though Dr. Filene's progress notes on April 6 and April 11 stated that Dr. Filene felt "Mr. Bruce presents an intermediate level of safety concern," the patient was discharged on April 20. (Tabs 23 and 24: Progress notes by Daniel R. Filene, MD, dated 4/6/06 and 4/11/06 2006).