

**EL DORADO COUNTY
MENTAL HEALTH JOINT COMMISSION
Minutes January 23, 2013**

DATE: **Wednesday – January 23, 2013**

TIME: **5:00 PM**

PLACE: **Facilitated by Video-Conference at:
Western Slope - 415 Placerville Drive (EMS)
Placerville, CA 95667
and
South Lake Tahoe – Public Health/Mental Health Offices
1360 Johnson Blvd., Suite 103
South Lake Tahoe, CA 96150**

- I. Call to Order; Roll Call; Introductions
 Members: Denise Burke, R.S. Lynn, Michael Pickens, Claudia Ball, Linn Williamson, Jim Abram, Guadalupe Medrano, Bonnie McLane, Jane de Felice, Craig Therkildsen
 Guests: Diana Hankins, Bill Ball, Larry Hartrum, Cathy Hartrum, Laurie Marchat, Larry Allum, Jackie Noren
 Staff: Daniel Nielson, Patricia Charles-Heathers, Lori Walker, Stephanie Carlson, Janet Stevens, Laura Walny, Doris Jones, Cheree Heffner, Laura Eakin
- II. Approval of Agenda
 Item III. Approval of the Minutes was moved to Item VIII; with this adjustment, the agenda was approved.
- III. Public Comment (15 minutes)
 - Dr. Lynn reported that parking continues to be an issue with Mental Health programs, including Wellness, sharing space at the South Lake Tahoe Senior Center. On Nov. 9th managers from Mental Health met with Senior Center representative and there was a verbal agreement that Mental Health would not use the parking spaces in the Senior Center lot. Currently County vehicles belonging to Mental Health continue to be parked in the senior Center lot, and the County has installed a sign specifically reserving one spot for Mental Health drop-off. Seniors have been told to move their vehicles out of this spot. The Senior Center has an existing, designated drop-off area. Dr. Lynn is asking Mental Health to honor the verbal agreement, and resolve the parking conflicts before the next Mental Health Commission meeting.
 - Larry Allum commented that homeless individuals are getting referred from agency to agency without getting the services they need. He suggested that the County needs a single point of contact, where individuals could request services and get the help from all of the various agencies.
 - Larry Hartrum spoke to honor the volunteers who have worked so hard to make Hangtown Haven a reality.
- IV. Report of Nominations Committee on slate for officers' election for 2013; consideration of other nominations. Vote for officers.
 - The Nominations Committee presented a proposed slate of officers for 2013.
 - Chair of the South Lake Tahoe Council: R.S. Lynn
 - MH Commission Chair: Linn Williamson
 - MH Commission Vice Chair: Jim Abram
 - Discussion was opened for other nominations; none were presented.

- Commission members voted to approve the slate of officers recommended by the Nominations Committee.
 - Denise Burke reminded the group that Commission by-laws specify that the County-wide Chair position shall rotate between the West Slope and South Lake Tahoe; for 2013, the SLT Council is relinquishing the County-wide Chair position. Dr. Lynn will Chair the SLT Mental Health Council, and Linn Williamson will Chair the MH Commission, with Jim Abram as Vice Chair.
- V. MHC response to national discussion of mental illness.
- Commission members discussed articles and editorials that have appeared in local papers following the shootings at Sandy Hook Elementary School in Newtown, CT on 12/14/2012.
 - “*Viewpoints: It’s time to stop ignoring mental illness law*” - written by Amanda and Nick Wilcox and Kent and Sharon Thorpe for the Sacramento Bee, Jan. 13, 2013, available at: <http://www.sacbee.com/2013/01/13/5109009/its-time-to-stop-ignoring-mental.html>
 - “*Mental illness must be confronted*” - presented by the Editorial Board, for the Sacramento Bee, December 30, 2012 and available at: <http://www.sacbee.com/2012/12/30/5080744/mental-illness-must-be-confronted.html>
 - “*Viewpoints: Predicting future violence is anything but easy*” - written by Dr. Amy Barnhorst, for the Sacramento Bee, January 3, 2013 and available at: <http://www.sacbee.com/2013/01/03/5088752/predicting-future-violence-is.html>
 - “*I am Adam Lanza’s mother*” - written by Liza Long for the San Francisco Chronicle, December 18, 2012 and available at: <http://www.sfgate.com/opinion/openforum/article/I-am-Adam-Lanza-s-mother-4125542.php>
 - Jim Abram noted that the tragic shootings brought everything to a head - the Commission wants change; the County wants change; and everyone wants to improve. Jim recommended that the problem be addressed at the policy level, and in particular noted that:
 - The CA State Legislature reform the LPS Acts;
 - Laws exist to protect the client, but clients sometimes won’t allow themselves to be helped;
 - Laura’s Law has not been adopted by the majority of California Counties;
 - Because there is now agreement that change in mental health laws are needed, the Commission can be effective in helping to move change forward.
 - Daniel Nielson, County Health and Human Services Agency Director, noted that legislation has been introduced in the California Legislature to reform LPS laws. The Department cannot weigh-in to either support or oppose legislative changes with approval from the County Board of Supervisors.
 - Claudia Ball disagreed with the conclusions of Amy Barnhorst (in the “*Predicting Violence*” article, cited above) – noting that LPS laws put into effect 40 years ago cannot reflect current research and knowledge about the biological basis of mental illness.
 - Dr. Lynn noted that active consumers of mental health services aren’t usually a problem; it is usually the people who should be getting treatment but are not who commit acts of violence. Dr. Lynn also noted that some people are extremely

successful at avoiding treatment, and that judges are reluctant to rule in favor of involuntary treatment. In the more than 12 years since the murder of Laura Wilcox, this County hasn't seen the need for change.

- Several members of the Commission engaged in a discussion of how to best voice their support for the implementation of Laura's Law in El Dorado County, and how to use MHSA money to implement the law.
 - It was noted that the majority of Commission members have supported County implementation of Laura's Law for many years, but the Department has not moved in this direction.
 - Nevada County petitioned to use MHSA funding to implement Laura's Law; Commission members discussed sending a subcommittee to meet with Michael Heggarty, Director of Behavioral Health in Nevada County, to address funding barriers and solutions. Alternately, the possibility of inviting Michael Heggarty to El Dorado County to speak to a task force of city police, County law enforcement, and mental health department leaders who would be involved in the implementation of Laura's Law was also considered.
 - Linn Williamson summarized research conducted at Duke University that documented cost savings and a significant reduction in both re-incarceration and psychiatric hospitalizations following the implementation of Kendra's Law in New York. This research is available in the October 2010 issue of *Psychiatric Review*.
 - While the MH Commission would like to go on record in support of implementing Laura's Law in El Dorado County, this recommendation must be brought to the Board of Supervisors by the Mental Health Director. Commission members proposed, discussed, and approved a motion to request that the MH Director take all necessary steps to support the adoption of Laura's Law in El Dorado County to the Board of Supervisors.
 - Daniel Neilson suggested that a subcommittee of the MH Commission work with the Department to identify the components of Laura's Law that are already in place, what specific changes would be required, at what cost, and who would be served by implementation of the law. Daniel noted that whether or not he agreed with the proposal to implement Laura's Law, he would go to the Board of Supervisors and present both sides fairly and fully, so that Supervisors can make the decision. Commission members agreed to work with the Department to address these issues; individual commission members who wish to participate on the subcommittee were advised to see Linn Williamson.

VI. NAMI statement regarding Mental Illness Tragedies in the country and request for Mental Health Commission Special Meeting.

- Larry Hartrum reported that NAMI issued a statement following the shootings on December 14, 2012 and addressing the need to talk about mental illness and follow through with programs, so that early prevention, intervention and treatment services are available to anyone in need.
- Darrell Steinberg, author of California's Prop. 63, contacted Vice President Biden with the suggestion that MHSA could serve as a model for implementing a National Mental Health Program. He proposed that the federal government consider a match of funding for states to enhance mental health services and noted that every dollar spent through MHSA services saves \$0.88 in costs to the criminal justice, health and housing services systems.

- Michael Fitzpatrick, Executive Director of NAMI, also met with Vice President Biden to encourage the investment of federal funds to improve early identification and intervention in mental health care – before a crisis occurs.
- Larry Hartrum suggested that a task force be formed to include Social Service, Mental Health and Law Enforcement leaders, to address the needs of people in the community who are falling through the cracks and not receiving services. Stephanie Carlson reported that Green Valley Church is considering a similar idea.
- Cathy Hartrum recommended that the Mental Health Commission “stay the course” and continue to seek information. She felt that the Commission is moving in the right direction, toward the implementation of Laura’s Law.
- Commission members agreed that a Special Meeting would not be necessary as the Commission intends to keep the discussion of Laura’s Law and LPS reform on the agenda for future meetings.

VII. Department News and Updates

- A written update of Mental Health Department news was distributed. Departmental updates are also included as an appendix to this document [Appendix A].
- Jackie Noren provided an update from the Sheriff’s Office.
 - C.I.T. calls are being compiled and tracked through dispatch.
 - The Sheriff’s Office is waiting for the MHSA funding that would allow all deputies to complete an 8-hour training to better prepare them to intervene in mental health crisis situations.
 - In addition, 13 deputies are signed up to attend C.I.T. training in March.
 - In regard to C.I.T. trained deputies in South Lake Tahoe, Jackie noted that Tahoe does have one trained deputy, but that this person is currently out on medical leave.

VIII. Approval of Minutes (Nov. 28th in Draft on website)

- Approval of the November minutes was deferred until the next Commission meeting.

IX. Commissioners’ Comments

- Claudia Ball encouraged Commission members and others who are interested to look at the research available at the Treatment Advocacy Center website, available at: <http://www.treatmentadvocacycenter.org/>

X. Adjournment

Appendix A:

**Health and Human Services Agency: Mental Health Departmental Update
Mental Health Commission
January 23, 2013 Meeting**

Highlights of the 2nd Quarter
October 2012 - December 2012

Assistant Director of Health Services (Patricia Charles-Heathers):

- During this quarter I was promoted from Program Manager II to Assistant Director of Health Services, and now oversee both Mental Health and Public Health. Laura Walny is currently serving as Acting Program Manager II.
- We completed the first part of the Strategic Planning process for all Mental Health Services, and developed Mission, Vision, Values and Belief Statements (see below).
- We began a more meaningful data collection process, and have been working closely with staff so that they understand the purpose behind data collection and its usage in driving program decision making. The results from the Psychiatric Health Facility (PHF) and Psychiatric Emergency Services (PES) has been shared.
- Alcohol and Drug Programs has been moved under the umbrella of Mental Health, and will open the door to better collaboration and expanded services to clients. Shirley White, Program Manager, has begun participating in the Mental Health Leadership and Managers Meetings.

Mission, Vision, Values and Belief Statements:

Strengthening, Empowering and Protecting the Residents of El Dorado County

Adult Outpatient Services

Mission: *In service of community wellness, we build partnerships with adults to strengthen hope, meaning and purpose, by utilizing their knowledge, resiliency, strengths and community supports to find and/or regain their personal wellness.*

Vision: *To provide an inspiring and energizing environment.*

Values:

- **Respect:** *We promote and protect the dignity of staff and every adult and family member we serve.*
- **Person-Centered:** *We celebrate the strength and achievements of everyone's journey.*
- **Hope:** *We believe better days are ahead.*

Our Beliefs:

- *We believe that every individual we serve is unique and deserves our passion, focus and commitment.*
- *We believe that recovery is real, people are resilient and hope is essential.*
- *We believe that honest and respectful communication allows us to grow and become open to new possibilities.*
- *We believe in the importance of being true to ourselves and those we serve.*

Children Outpatient Services

Mission: *To provide evidence-based mental health services to children and families utilizing respectful client-centered supports that create a path to wellness and hope for the future.*

Vision: *To provide a safe place to change your path and grow your future.*

Values:

- **Respect:** *We promote and protect the dignity of staff and every child and family member we serve.*
- **Person-Centered:** *We celebrate the strength and achievements of everyone's journey.*
- **Hope:** *We believe better days are ahead.*

Our Beliefs:

- *We believe families can...*
- *We believe that together we can maximize the opportunities for resiliency and positive change.*
- *We believe that a positive partnership with families uncovers strengths, unlocks tools and inspires hope for a better future.*

Psychiatric Health Facility (PHF)

Mission: *We provide a welcoming and therapeutic environment for adults who are experiencing an acute crisis in their life by offering immediate, safe, comprehensive client-centered care, so they continue on their path to wellness.*

Vision: *To provide hope for the future.*

Values:

- **Respect:** *We promote and protect the dignity of staff and every adult and family member we serve.*
- **Person-Centered:** *We celebrate the strength and achievements of everyone's journey.*
- **Hope:** *We believe better days are ahead.*

Our Beliefs:

- *We believe that mental illness does not define the whole person.*
- *We believe that recovery is real and hope is the key.*
- *We believe that honest and respectful communication allows us to grow and become open to new possibilities.*
- *We believe in the importance of having choices and being responsible for our lives.*

Psychiatric Emergency Services (PES)

Mission: *We provide a quick response and appropriate interventions to people who are in crisis, to lessen human suffering and enhance community safety.*

Vision: *Creating solutions during tough times.*

Values:

- **Responsiveness:** *We recognize the immediacy of each situation.*
- **Collaboration:** *We believe that solutions arise from community partnerships.*
- **Client-Centered:** *We honor and respect individuality and self-determination while ensuring safety.*

Our Beliefs:

- *We believe that a crisis is a part of the Path of Life.*
- *We believe that all lives are valuable.*

Data Report - Psychiatric Health Facility (PHF):

- Total Referrals = 253
- Total EDC Clients Admitted = 62
- Total EDC Clients Denied = 10
- Total Out of County Clients Admitted = 28
- Total Out of County Clients Denied = 153
- Total Clients Discharged = 97
- Total Clients Discharged with Benefits = 84

Data Report - Psychiatric Emergency Services (PES):

- Total Evaluations Completed = 833
- Total Clients Referred to EDC PHF = 42
- Total Clients Referred to Hospitals = 43 (Private Insurance = 36; Medical Issues = 3; No Beds at PHF = 4)
- Total Other Referrals = 748