



SACRAMENTO COUNTY MENTAL HEALTH BOARD (MHB)

March 3, 2010

MHB General Board Meeting Minutes

Sacramento County, Administration Building—Hearing Room 2
700 H Street, Sacramento, CA 95814

Attendance: Chad Thompson - Chair (arrived at 6:11pm); Terry Imai – Vice Chair; Frank Topping – Secretary; Christopher Browne (arrived at 6:11 pm); Jane Fowler; Laurd Irvin; Randi Knott; Langley Kreuze; Susan McCrea (arrived at 6:12 pm); Supervisor Don Nottoli (arrived at 6:24 pm and left at 7:43 pm); OJ Platt.

Other Attendees: Julie Leung, Division of Mental Health Liaison; Janice Snyder, Deputy County Counsel

I. Call to Order: Terry Imai, Vice-Chair, called the meeting to order at 6:05pm.

Welcome and Introductions

- A. Approval of March 3, 2010 Agenda: Randi Knott motioned to approve the March 3, 2010 agenda. Jane Fowler seconded. Ayes: unanimous. Motion carried (7).
- B. Approval of February 3, 2010 Minutes: Langley Kreuze motioned to approve the February 3, 2010 minutes. Frank Topping seconded. Ayes: unanimous. Motion carried (7).

II. Announcements and Advocacy Reports (two minute presentations)

A. Announcements:

1. Tonja Edelman, Mental Health American of Northern California (MHA), announced that MHA is sponsoring a Peer Support Group Facilitation Training, May 6th. More information to follow.
2. Mary Ann Bennett, Deputy Director, announced that the National Alliance on Mental Illness (NAMI) is sponsoring a Walk on April 24, William Land Park, Sacramento.

B. Youth, Adult and Consumer Advocacy Report: No Report

C. Mental Health Contractors Association Report: Paul Powell, Association President, provided the following report: Association members have been involved with the following:

1. Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), which reauthorizes the McKinney-Vento Homeless Assistance Programs. A workshop is pending and will keep us informed.
2. Department of Behavioral Health Services (DBHS) Convening and Visioning
3. California Association of Social Rehabilitation Agencies Statewide Meeting

III. Public Comment (two minute presentations): No public comment made.

IV. Division of Mental Health

A. Director's Report – Mary Ann Bennett, Deputy Director

1. On March 1, 2010, DBHS facilitated a Community Convening which kicked off the department's strategic planning. Over 75 DBHS staff, Providers, MHB members, community members were in attendance.
2. DBHS is sponsoring a team, "The Wellness Walkers", for the NAMI Walk on April 24, William Land Park.

3. Budget:
 - a. Midyear budget reductions included a \$1.6m reduction, elimination of 16 vacant positions. We are also taking a hit of \$624,000 reduction in Realignment dollars for which we reduced pharmacy and sub-acute bed costs.
 - b. For FY 10/11 we need to look at absorbing/reducing \$14m. This includes a combination of items including unavoidable cost increases which is around \$4m, Crestwood 12-bed Psychiatric Health Facility (PHF) which is about \$800,000, first payment to reimburse Municipal Services Agency reserves which is \$2.9m, revenue issues related to SB90 claiming in the Child and Family Services Unit. Additionally, we are anticipating further reductions from the State; however, the magnitude of the State reductions are unknown at this time. In FY 07/08, we took a hit to the AB 2034 programs in which we lost approximately \$5m. In FY 08/09, we took an \$11m hit. For FY09/10 we took a \$31m hit. Over past three years, the Division of MH has taken reductions totaling \$47m.
- B. MHSA Plan Update for FY 10/11 – Michelle Callejas, MHSA Program Manager (see handout)

V. Discussion/Action Items

- A. Chief Deputy RC Smith – Questions and Answers: Chief Deputy Smith, representing the Sheriff's Department, oversees field and investigate services. This FY, the Sheriff's Department has taken up to \$60m in reductions and they have less than 40% of the equivalent staff providing law enforcement services to unincorporated county as compared to the law enforcement staffing for the City of Sacramento. The Department has been working with County Mental Health, the Mental Health Treatment Center and local hospitals to provide responsive services with diminishing resources. Trying to initiate three things:
 - (1) Mental Health Triage Scale which is a tool that officers can use in triaging situations related to mental health issues and referencing available resources.
 - (2) Mental Health Resource Guide
 - (3) Behavioral Health Card, a card that clients may voluntarily complete which provides information about where they are receiving services, contact numbers, medications they are taking, name of their physician. This information will be helpful to Law Enforcement and other crisis responders in linking the clients with support services.

Q: *How do you distinguish petty theft and public intoxication, or things like vagrancy and loitering when there is a mental health issue?*

A: Officers do not have to make an arrest on any misdemeanor or infraction offense. With the exception of someone wanting to make a private person's arrest, officers will assess whether a crime really occurred or the situation is a manifestation of another issue. The officer has the authority to use discretion in these situations so that there is an appropriate outcome fitting for the individual.

Q: *We were aware that you were working with Dorian when the Sacramento County Mental Health Treatment Center was engaged in rolling closures.*

A: We've been working with the Hospital Council who has a diversion management system who handles all trauma cases. They have a way of knowing which emergency room to take trauma cases to. We use the same model for 5150s. We are trying to work with the hospitals to use this model for situations involving mental health issues.

Q: *Parents/support person often times use the phrase "danger to self or others or unable to care for him/herself" so that law enforcement can place their family*

member on a 72-hour hold. At times, parents/support persons report that nothing has happened as a result.

A: The challenge is that when an officer responds to some type of call related to a mental health crisis, the definition of “5150” is broad and subjective. The officer has to be able to articulate some clear manifestation that supports the provision of a 5150. Some officers are more experienced at this than others, but most all of our officers are committed to serving the community in the best way possible.

Q: *Have you considered having officers go to Mental Health Provider sites to observe what consumers experience?*

A: We’re open to any kind of training that will broaden our horizons. The challenge is two-fold: (1) What is the best training model? Classes don’t work because it takes forever to rotate everyone through since we are the 10th largest law enforcement agency in the State. (2) Because of the budget cuts, we have cut all discretionary training there is. So, we are looking for alternative ways of providing information and training in a timely fashion. We’re using “on-scene” input and supervision to provide information.

Q: *Are you aware of 5150.05 where a family member has the right to provide relevant information about the person’s history when the person is lying?*

A: In this field, there are so many nuances in the law. Just because there are laws that sanction someone when they lie to you doesn’t prevent it from occurring. My goal is to help my staff be as efficient in the utilization of their discretion in the application of the law to serve the needs of the community. I know that this doesn’t answer your question directly.

Q: *Has PERT or CIT been explored in this county?*

A: We were 110 percent committed to participate in PERT but, currently, we are under-resourced and cannot take an overburdened resource and pull them out of their assigned duties and commit them to the PERT model as it was proposed.

Q: *Does POST have anything training-wise for officers? And should we advocate for this to be mandatory training?*

A: Any type of mandatory training at this point in time will be met with resistance. It’s not because of the value of the training, it is because of the cut-backs and lay-offs and huge reductions in staff. It’s a timing issue. Post does have some distance learning models.

Matt Reali will start attending MHB meetings regularly to continue the dialogue.

B. MHB Member Interview: MHB members facilitated an interview with Michael Hansen. Frank Topping motioned to forward recommendation of Michael Hansen as a MHB member to the Board of Supervisors (BOS). Laurd Irvin seconded. Ayes: unanimous. Motion carried (10).

C. MHB Annual Report: Consent Item or Receive and File: MHB members agree to submit the 2009 Annual Report as a Receive and File document to the Board of Supervisors (BOS).

VI. Adjournment: The meeting was adjourned at 8:15pm.