

**Alameda County Mental Health Board
ADULT COMMITTEE MINUTES
September 20, 2010 ♦ 12:00pm-2:00pm
Gail Steele Room**

Meeting called to order @ 12:00pm by Alane Friedrich

HOUSEKEEPING

Roll Call/Introduction of Guests

MHB Members: Alane Friedrich, Jeffrey Davidson and Laura Mason

BHCS Staff: Michael Lisman

Committee Members: Kathie Zatkan (ACNMHC), Joe Rose (NAMI), Dennis Romano (ACCMHA), Beverly Bergman (MHAAC), Hazel King (MHAAC), Francesca Tenenbaum (MHAAC), Karina Foote (FERC), Michael Diehl (BOSS), Mary Suilmann (Telecare), Pansy Taft-Butkowski (Sausal Creek), and Guy Qvistgaard (JGPP)

ITEM	DISCUSSION	PLAN/ACTION
Approval of Adult Committee July 2010 Minutes	No correction was made to the July 2010 Adult Committee minutes.	M/S/C Ms. Tenenbaum/ Ms. Mason Motion passed All favored
Conclusion/ Comments on Laura's Law Discussion	<p>Ms. Friedrich distributed an article re: San Francisco County's position on Laura's Law.</p> <p>Ms. Zatkan stated that Laura's Law is not completely out the table in San Francisco County, they'll have further discussion very soon. She added that there's a push to implement it throughout the county and she will keep the committee updated concerning Laura's Law.</p> <p>Mr. Diehl would like to have further discussion on Laura's Law with family members to get the family perspective because he felt that the committee agreed on a clients' perspective but not the issue on how to maintain the services.</p> <p>Ms. Foote felt that the discussion on Laura's Law at the last meeting led towards a consensus that Alameda County is not set up for it and it didn't seem a practical approach in this county.</p> <p>Ms. Friedrich agreed that the committee discussion did not support the adoption of Laura's Law for Alameda County, and that there would be no recommendation to adopt it. She hoped that FERC</p>	

<p>Conclusion/Comments (Cont.)</p>	<p>would be able to assist families in need, but that present procedures seem to rely on 5150's and the mobile crisis team when a family member could not be persuaded to go to Sausal Creek for evaluation.</p>	
<p>Presentation by Joe Rose on: Lives Affected by Mental Illness Presentation - See Handout</p>	<p>Mr. Rose presented info re: Lives Affected by Mental Illness that will be held on Tuesday, Oct. 5th, 7pm-9pm in the Pathway Community Church in Fremont. He provided the following info:</p> <ul style="list-style-type: none"> • He stated that the intent of the event is to do an outreach to people dealing with mental illness but don't know how to connect with the system and to those who might know how to connect but are hesitant to do so for various reasons. • He related that he got the idea for this event last July 2009 when he attended a NAMI Conference in New Mexico. He started putting together a similar event here in the Bay Area last Oct. during Mental Illness Awareness Week; they had about 50 people and with the success of the event he decided to do it again this year; • He is doing advertisements for this year's program not just to get funds but also to promote the NAMI education classes. He is doing some fundraising, he got about 15 businesses who contributed e.g. Mi Pueblo is donating drinks and desserts; Peets Coffee and Starbucks are donating coffee, etc, BHCS has done the design and printing of flyers; FERC and Mental Health Matters, etc. He related that they have 14 people on the committee and they are doing a lot of outreach for the event. • He is inviting the NAMI presidents from around the Bay Area to come and look if the event is something that could work in their area. 	
<p>Looking at Past & Present Committee Topics. Discussion regarding agenda topics for this coming year. Review of Report Information & possible changes.</p>	<p>Ms. Friedrich distributed the list of Adult Committee's topics from previous years and she asked what the committee would like to see as an agenda topics for the coming year...</p> <p>Mr. Qvistgaard would like to look at quality measures to see what quality indicators each program does that the community should be looking at. He related some of the things they are measuring at JGPP e.g.: how frequently assessment are done and completed; how frequently they use seclusion and restraints; how frequently are they discharging on multiple and difficult psychotic and if there is a discharge plan; they do measure patient satisfaction, etc.</p> <p>Mr. Lisman related that the BHCS has a new Quality Improvement Director (Toni Tullys) and that the dept. has a new set of Mission and Values. He felt that the committee needs to know how the county's quality indicators differ or in concert with the community.</p> <p>Ms. Friedrich suggested having Ms. Tullys to come and present what the county is doing re: quality measures.</p> <p>Mr. Davidson suggested having Mr. Qvistgaard do a presentation at the next meeting re: his ideas on quality measures.</p>	

<p>Looking at Past & Present Committee Topics...(Cont.)</p>	<p>Ms. Foote would like Ms. Tullys to come and offer some county leadership to help the committee plan on something re: quality measures.</p> <p>Ms. Suilmann felt that with so many different types of programs and so many different licensing status there are certain levels of quality already being looked at and the committee may not even know what to ask. She felt that it would be good for Ms. Tullys to come and talk about what she knows in terms of how the county gather info.</p> <p>Mr. Romano felt that it's going to be difficult to come up with quality standards that apply across the board because each program is contracted to do a particular job and each program has its own different kinds of indicators. He felt that Ms. Tullys might be able to give some overall quality guidelines and may be its something that the committee can focus on and may be come up with quality indicators that can be applied to the whole system.</p> <p>Mr. Diehl stated that he would like to measure outcomes for incarceration, hospitalization and homelessness and he would like to hear more info on housing, FSP and respite care.</p> <p>Mr. Romano would also like the board to look at the vast majority of the system which is 85% because he felt that the board seems to focus more on the high end of the continuum which is only 15-20% of the services and doesn't know much about the rest of the system. He added that Alcohol and Drugs are part of BHCS and he felt that the board should be called Behavioral Health Board instead of MHB.</p> <p>Mr. Davidson felt that the committee tend to focus on measuring negative stats e.g. recidivism rates and not the success rates.</p> <p>Mr. Romano responded that there are indicators that are focusing on positive like FSP's and Service Teams that the board and the committee don't hear much about e.g. who's getting a job; who's got a place to live; who's out of hospital care, etc.</p> <p>Ms. Friedrich will find out if Ms. Tullys will be able to come at the next meeting.</p>	
<p>Sausal Creek (SC) Report</p>	<p>Ms. Taft Butkowski related the following info:</p> <ul style="list-style-type: none"> • SC's expansion of its physical location finally began on Aug. 23rd after 2 years of waiting for City of Oakland's approval. • SC is busier than ever, they are seeing more people with an average of 15 clients a day compare to 13 clients a day when they are open 24 hours and it's a challenge for them trying to get a lot of clients see a psychiatrist before the doctor leaves. 	

<p>SC Report (Cont.)</p>	<ul style="list-style-type: none"> • She presented SC report for August that included stats e.g. <table border="0" style="margin-left: 20px;"> <thead> <tr> <th></th> <th style="text-align: right;"><i>August</i></th> </tr> </thead> <tbody> <tr><td>Admission</td><td style="text-align: right;">367</td></tr> <tr><td>Ave. number of clients/24 hours</td><td style="text-align: right;">15.3</td></tr> <tr><td>Walk-ins</td><td style="text-align: right;">159</td></tr> <tr><td>Mental Health Referrals</td><td style="text-align: right;">188</td></tr> <tr><td>AOD Providers Referrals</td><td style="text-align: right;">20</td></tr> <tr><td>Uninsured</td><td style="text-align: right;">221</td></tr> <tr><td>Ave. Length of Waits for services (minutes)</td><td style="text-align: right;">150</td></tr> <tr><td>Ave. Length of Visits (hours)</td><td style="text-align: right;">1.5</td></tr> <tr><td><i>Open to Other Services</i> e.g.: ACCESS</td><td style="text-align: right;">11</td></tr> <tr><td>Highland Medical Center ER</td><td style="text-align: right;">46</td></tr> <tr><td><i>Housing Referrals</i> e.g.: 5150's-Herrick</td><td style="text-align: right;">1</td></tr> <tr><td>5150's-JGPP</td><td style="text-align: right;">8</td></tr> <tr><td>Self/Family/Friends</td><td style="text-align: right;">316</td></tr> <tr><td>Not in need of new referral to BHCS system</td><td style="text-align: right;">110</td></tr> <tr><td>Clients New to Sausal Creek</td><td style="text-align: right;">79</td></tr> <tr><td>Clients New to County System</td><td style="text-align: right;">70</td></tr> </tbody> </table> 		<i>August</i>	Admission	367	Ave. number of clients/24 hours	15.3	Walk-ins	159	Mental Health Referrals	188	AOD Providers Referrals	20	Uninsured	221	Ave. Length of Waits for services (minutes)	150	Ave. Length of Visits (hours)	1.5	<i>Open to Other Services</i> e.g.: ACCESS	11	Highland Medical Center ER	46	<i>Housing Referrals</i> e.g.: 5150's-Herrick	1	5150's-JGPP	8	Self/Family/Friends	316	Not in need of new referral to BHCS system	110	Clients New to Sausal Creek	79	Clients New to County System	70	
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<p>JGPP Report</p>	<p>Mr. Qvistgaard presented JGPP's report for August as follows: PES-890; Admits-250; Discharge-249 (Home-139; Shelter-27; B&C-25; Sub-acute-31; Other-27)</p>																																			
<p>Patients' Rights Advocates (PRA) Report</p>	<p>Ms. Tenenbaum related that they have 3 new staff in their team. She distributed PRA Aug report that included stats e.g.</p> <ol style="list-style-type: none"> 1) Total Calls Received: 722 <ul style="list-style-type: none"> ▫ Complaints of Codes/Regulations Violations-10 ▫ Requests for Info/Assistance-712 ▫ Voicemail Message Received- 411 2) Investigations Conducted-10 3) Facility Monitoring Visits- 15 4) Training/Educational &/or Consultation Sessions- 22 <ul style="list-style-type: none"> ▫ Face to face consultation-274 5) Source of Patient Calls e.g. JGPP- 118; Fremont- 113; Herrick-28 6) Type of Calls: Abuse-11 ▫ Patients' Rights-129 ▫ Quality of Care-130 ▫ Legal-161 7) Patient Rep: 5250 Certifications (14 day holds) Number of patients certified-518; Capacity Hearings: Number of Patients filed for Capacity Hearings-52 <p>Ms. Tenenbaum distributed the Consumer and Family Grievance Report.</p>																																			
<p>Family Caregiver Report</p>	<p>Ms. Bergman distributed Family Caregiver Report Aug. report that included stats e.g.</p> <ul style="list-style-type: none"> ▫ Phone calls received-96 ▫ New family visitor-42 ▫ Repeat family visitor-24 ▫ Repeat caller-36 ▫ Family Support Group-27 ▫ Repeat Hospital Visits-24 																																			