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## California Association of Mental Health Patients' Rights Advocates

**Board Meeting Minutes**  
**Wednesday, February 28, 2018**  
**Time: 10:00 AM - 3:00 PM**  
**Via Conference Call**

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### **I. Call to Order**

#### a. Introductions and Roll Call

<b>Member/Title</b>	<b>County</b>
Samuel Jain / President	Santa Clara
Jill Ward / Vice-president	Shasta
Kelly Reilly / Secretary	San Diego
Gloria Hernandez / Central Valley	Fresno
Jim Raphael / BAYPAC	Santa Clara
Marueen Edwards-Love for Martin Hernandez/South	Los Angeles
Jean McDonald / At Large	San Diego
Ann Coller – COPR / At Large	Sacramento Area
Christina S. Kraushar / At Large	Merced
Richard Krzyzanowski - DRC / At Large	Los Angeles Area
Carol Underwood / At Large	Trinity
Mike Phillips / At Large	San Diego
Marita Saracho / At Large	San Bernadino

### **II. Housekeeping**

#### a. Roll Call – Quorum – met

#### b. Treasurer's Report: Report via Samuel, balance \$6713.77.

76 members. Franchise tax board form due 4/15/18, Annette will take care of it. Another tax form due 5/15/18, Annette will take care of that as well. Luncheon updates later.

#### c. Approval of Minutes – Jean McDonald motions to approve, Richard seconds. Approved.

### **III. Statewide Business**

#### a. PRA Legislation Update/Discussion

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Two bills working with planning council – AB 2316, and AB 2317. CAMHPRA wrote language for bills, and is the main lobbyist. Working with Eggman's office, who agreed to carry bills.

AB 2316: creates training & certification program for county PRAs, makes sure counties give trainings (ideally an online certificate program) within 90 days of hire. Most likely with materials from existing PRA manual. Changes statute that governs relationship between COPR & DPH, gives oversight to COPR. Mainly to ensure advocates are competent within a reasonable amount of time. Could write into bill that this is not intended to replace or conflict with training required under 5512 (PRAT). Could specifically statutorily define PRAT as an ongoing training. Will be drafting language to ensure no conflict.

AB 2317: extends protections to whistleblowers in a contractor role. If adverse employment action taken against individual after reporting legal violations, individual may have cause for illegal adverse employment action. This bill extends protections to contractors. Because our role as advocates is sometimes to whistleblow, the bill ensures all advocates have those protections. Samuel spoke with Office of Legislative Counsel – language is only for independent contractors, but it should also cover contracted entities as well. There are also some issues with Labor Code 1102.5 as it only applies to individuals, so it is difficult to take that language and apply it to agencies. May need to create an entirely new list of whistleblower protections for agencies. May taper language down to only cover PRAs (not all contractors in watchdog roles). Samuel reached out to PRA in Humboldt who was previously fired, he was excited about this bill and will agree to testify in congressional hearings about both of these bills. Currently looking for co-sponsors, will start lobbying organizations as well to gather support for these bills. Hoping to get through this legislative session. California Behavioral Health Committee has been a great ally and has put in a lot of work as well. Can write a letter/bullet points for discussions with local Assembly members after getting amendments through first, but people should be careful about lobbying on employer's dime if they are not working for a private entity. Once language is finalized, can put out a press release and put info on CAMHPRA website – or press release could come from Eggman's office, or the Planning Council.

## b. CAMHPRA Policy Platform Update

Meeting in December that went well - Richard is drafting edits, Samuel will also edit. Plan to have crafted document with policy platform at PRAT. Very close to finishing, laid good foundation and a lot of good thinking/conversations went into this. One final conference call will be planned to review final document.

## c. San Benito County Lawsuit Update

Previous motion from Board to potentially be organizational plaintiff for lawsuit for very inadequate mental health services in SB county (people being held in non-designated facilities, multiple 5150s, 5250s...) Anne Hadreas last said they were unable to find any

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individual plaintiffs and unable to get a hold of PRA in this county. No email response, no update as of now.

## d. DRA Lawsuit Update

Jim Raphael sent out motion requesting people to vote on whether to permit CAMHPRA to become organizational plaintiff in Stanford student mental health services lawsuit related to leave of absence policies subjecting students with acute psych admissions to take leave of absence without any due process rights to object to decision. 13 replies, all voted yes, but subsequently Samuel and Jim have been told they cannot proceed with lawsuit due to MHAP advocacy at Stanford University Hospital - may ultimately be subject to testifying in trial, could put at risk client records. Additionally, DRC does not seem to have understanding of what it means to be organizational plaintiff, example: If there was a countersuit, CAMHPRA would have to pay. Jim and Samuel recommend CAMHPRA not proceed in being organizational plaintiff due to concerns. However CAMHPRA is independent organization, and although Samuel and Jim cannot participate - it is still up to the rest of the Board. Jim motions to withdraw his motion due to conflict of interest, and Santa Clara office recommends that CAMHPRA withdraw from being organizational plaintiff in DRA student mental health litigation. Since Jim initially brought motion forward, no vote is needed.

## IV. PRAT 2018/CAMHPRA Luncheon

### a. PRAT Tabling Planning

There is interest in tabling at PRAT, it went well last year. Supplies left over from last year that we could use again this year (significant amount). Could spend some money to add something else – last year we gave away post it notes (many leftover). Anne Collier had previously suggested something interactive such as a button maker or prize wheel to spin. Also, Jim Raphael suggests “Ask the Advocate” where people could come up and ask for advice or questions. (Richard suggests small disclaimer to limit liability, Samuel can write something up, since we already offer advice – “This is advice from an individual advocate, not necessarily representing CAMHPRA, not to be considered legal advice”). Would need two Board members at table to do Ask the Advocate. Advocates remind us that Jim Marquez also has Patient Rights Jeopardy game, could give prizes for correct answers, but not sure about logistics of leaving laptops at table, perhaps could print out the Jeopardy questions on paper. Prizes – Starbucks cards? Will discuss via email. Jim Raphael, Richard, Gloria, Samuel, Chris, Kelly, and Jill can help table. Will cover 15 minute slots in between the trainings, and maybe 15 minutes on either side of the lunch break. Annette will have brochures, frame with logo, Samuel will have coalition map and Ask the Advocate sign, and bring copies of the PRA whitepaper. Chris will look into cards. CAMHPRA table cloth? Samuel will follow up with Annette to see if it’s possible to get one before PRAT. Samuel motions to approve up to \$150 for tablecloth and/or prizes, Jill makes the motion, Gloria seconds. All in favor, approved.

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## b. Luncheon Planning Update

Annette left notes – she has only received about 15 completed forms, only 1 person has paid in full. Please send in forms and payment ASAP. Will send weekly reminders starting March 1<sup>st</sup> to Board and listserv. Some counties require W-9 form, this could create a little bit of a hold up. Annette is putting together centerpieces, needs one or two volunteers to assist. People interested in helping can connect with Annette – would probably be on Wednesday night. Jill and Carol volunteered and will connect with Annette. One centerpiece is a box that will be filled with different items (t-shirts, mugs, etc). Need donations of items to put in the box, please contact Annette if you have any donations. Catering for luncheon is all set up.

## c. Awards Update

Annette's office will provide frames for awards, and she will make certificates. Gloria and Chris can connect with Annette with names of award winners. Update: received five nominations so far. Samuel will be sending reminder email for submissions again, 3/8 will be last day to submit. Voting will be open for one week, then will notify people on 3/15 or 3/16.

## d. Keynote Speaker Update

Assembly member Eggman unable to attend, Rusty Selix unable to attend. Kelechi Ubozoh would be next, will send email to ask if she is available. If not, will contact Lührman or Caesares next.

## e. Officer/Board Elections

Will gather list of interested people, hope to have a couple of different people running. If there are different people for each position, they could stand and express why they are interested at PRAT. Will send an email to see who is interested, election will happen at PRAT.

## V. Coalition Reports

### a. Far North: Jill Ward (Shasta) –

Did not have meeting, but will report for Shasta County. Starting AOT program, contracted out to The Care Center (similar to a pre-crisis center, open 3-11pm and on weekends). 4-5 individuals identified, but it is just getting started. Behavioral Health court was implemented for the last 3 years, AOT is new to the County. Jill has access to the case manager for AOT for collaboration. Shasta Regional Med Center is planning to open an LPS unit called Center for Behavioral Health – right now they have a voluntary 16 -20 bed facility. They say it will open in March but likely won't happen until July.

Carol for Trinity – the largest project is the opening of Cedar Home, “guest home” unlicensed, not board & care. Pre-crisis, open for people to stay about 2 weeks. Hiring 4 peer specialists. Ready to go, and Carol will present about patient rights at staff training. She will also be involved in meeting new clients and informing them about their rights. Will be owned and run by Behavioral Health. Carol is also involved in the Mental Health Advisory Board, which is working to address geriatric mental health issues.

Regarding advocate contract negotiation: Guide/resources for contract negotiation may be helpful. There are training, insurance, travel, tax costs that advocates may not

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initially know about. Anne Coller recommends reading everything before signing, and not feeling rushed to sign. Each County is different, there is no uniform way in which this is done. The issue would be getting this information to people before they are contracted. CAMHPRA may be a good organization to put out a guide. Carol offered to help come up with a list of good questions, ideas, and resources for contract negotiations. Could put up on website, and possibly recruit Justin Boise (full time planning council member who works in this area). Due to volume of projects, will table this for now.

b. BayPac: Jim Raphael (Santa Clara)

Not had meeting. In Santa Clara: dealing with 80 bed facility with 17 minor's beds, facility has a lot of issues bringing itself in compliance with statutory regulations and patient rights – ie lack of robust discharge planning for out of county individuals (they are experiencing delays after winning hearings due to transportation issues). Also holding certifications and Reise proceedings for minors, PRAs will be working to address this issue. Additionally, oftentimes patients are not signing off on consent form and/or checkboxes are left blank, which raises questions on if the informed consent is actually being done. Internal audits happening to make sure they bring themselves into compliance. Issues with voluntary minor admissions – staff making statements like “the 5150 has expired and you’ve lost the opportunity to consent to voluntary treatment”. Separately, an MHRC, Crestwood – recently started a no smoking policy. Complete ban of smoking on the facility, which was not the case previously – thought to be happening at all Crestwoods in the state. When policy changes at one Crestwood it seems to effect the others in the state.

c. Central: Gloria Hernandez (Fresno County)

Kings County has a new mental health director, Lisa Lewis. Nominating her for award. Tulare County – advocate reporting that she is unable to call families, look at records. Spoke with employer who contacted Gloria, stated that PRA can participate in coalition meeting, but is not to report anything about Tulare County at the meetings. Additionally, none of the clients are being permitted to sign voluntary. Anne Coller working to address these issues. She previously addressed the issue of clients being allowed to sign voluntary, but the resolution did not seem to stick. This highlights the importance of orientation and training for PRAs. Kern County – participated in meeting, had some issues with CSU and will de-certify one unit.

d. South: Martin Hernandez (Los Angeles) –

Maureen Edwards-Love gave update: non-LPS designated ED pilot project – new hospitals where patients can come get evaluated and get transferred for treatment faster. Clients were able to get medications quickly and many did not need a 5250.

Jean McDonald for San Diego – Laura's Law (AOT), a couple of clients pending for court hearings, Judge on medical leave so continuances are happening. Substance Use Disorder expansion possibly happening soon.

## VI. Reports from Meetings/Other Advocacy Organizations

a. California Coalition for Mental Health (CCMH): Samuel Jain

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Report from John Perez of SAMSHA regarding work to enhance behavioral health services at the federal level, mainly via grants. Reprioritization of SAMSHA under Trump administration. Prioritizing increase in hospital beds and AOT. Concern that there is movement away from the rehabilitation model and towards the medical model. Report in Governor's budget - \$175 million towards IHT programs to rehabilitate/restore competency. "No Place Like Home" bill - \$140 million from MHSA to pay bonds back for affordable housing – currently being litigated to see if MHSA money could be used. Karen Baylor, was director of behavioral health at DHCS, was fired a month or two ago, big news.

b. California Office of Patients' Rights (COPR): Ann Coller  
Working on issues in Tulare County mentioned above. Also some issues in the Central Region - not having an advocate or designating senior clinical coordinator as advocate. Made progress in at least one county. Issues with private hospitals deciding they can hire their own advocate. Helpful for COPR to do training for others in the county (ie Tulare supervisor) re: patient rights advocacy. State hospitals becoming more restrictive. COPR is looking for extra staffing, an additional 4 positions who could help with training etc.

c. Mental Health Advocacy Services (MHAS): Jim Preis – not in attendance

d. Disability Rights California (DRC): Richard Krzyzanowski

LA County – innovation proposal to OAC – to assume \$2 million for transcranial magnetic stimulation. Less invasive than ECT, although there is argument that it is still invasive. Proposal is for a mobile unit which will give TMS service to people in Board & Care facilities. TMS has had success in the private sector, fairly new to public sector. OAC decided to postpone a vote to approve the proposal. Need more info about informed consent and rights protection for people who are offered treatment. Conversation with the head of LA Dept of Mental Health who expressed some of the same reservations, proposal was already on the table when he took the position. Also looking to expand CAMHPRO board, if you know someone with lived experience encourage them to apply on the website.

## **VII. Public Policy**

a. SB 215 Diversion: mental disorders –  
Alternatives to incarceration if offenders suffer from mental disorder, and if disorder played a role in offense, and if mental health treatment would benefit. Will get people out of the criminal justice system – motion to support, approved. Kelly and Samuel will work on a support letter, and will include concerns about mental health courts from a patient rights perspective.

b. SB 1045 Conservatorship: chronic homelessness: mental health  
Just got stripped recently, was previously the leading bill for the grave disability definition expansion. Would expand the definition to include inability to take care of medical needs when there is a risk of death from the medical issues. Samuel recommends that we adamantly oppose, asks for a motion to campaign against the bill. Big erosion of civil liberties. Propose to lobby directly with senators and legislators working bill. CAMHPRA would oppose at all stages and bring in other organizations as

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well. Gloria makes motion, Richard seconds. Approved. Kelly and Samuel will work on this.

AB 2156, Mike Phillips points out that this bill has the same language re: expanding definition of grave disability. Would make changes to Health and Safety Code as well.

c. AB 820 Emergency Medical Services: transportation alternatives  
Allows paramedics to transport people directly to mental health facilities if appropriate. Fresno was involved in pilot program which went well, paramedics were able to transport people directly to CSUs. Bill has support from the California Hospital Association.

d. SB 142 Criminal offenders: mental health  
Gives money to counties who are giving alternative options to incarceration for criminal offenders with mental health issues.

e. SB 906 Medi-Cal: mental health services: peer, parent, transition-age, and family support specialist certification  
Creates peer certification, 36 other states already have this certification. Samuel makes a motion to support, Richard seconds, approved.

f. AB 205 Medi-Cal: Medi-Cal managed care plans  
Authorizes a person to request a hearing about their Medi-Cal managed care plan, even after they have exhausted the Medi-Cal appeal process.

g. SB 171 Medi-Cal: Medi-Cal managed care plans  
Relates to parity compliance

h. AB 1250 Counties: contracts for personal services  
Requires county to look at services they are contracting out, and anything that could be done by county employees should not be contracted out. Any contract over \$200,000 would need to be automatically audited at the contractor's expense. CAMHPRA has mix of county employees vs county contractors. Would jeopardize services for advocates who are not county employees. Sponsored by the county employee union, SEIU. This would not jeopardize advocates who are already county employees, but it does jeopardize jobs of advocates who are not county employees. Because CAMHPRA is mixed, we will neither support nor oppose at this time. We can always revisit if the language changes.

i. SB 1004 Mental Health Services Act: prevention and early diagnosis.  
Shifts some of the money from MHSA

j. AB 186 Controlled substances: safer drug consumption program.  
Safe injection sites for IV drug users

Other legislation

AB 2287 - Used to be Dept of Mental Health which oversaw state level activities/regulation related to mental health. Dept was eliminated, duties were split between DHCS and DPH. Concern that DHCS is not paying enough attention to mental health. This bill creates a new department with the same or similar duties as the Dept of Mental Health and transfers duties from DHCS to the new organization as they relate to MHSA. All other mental health services would stay with DHCS.

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Cal ACEP (Academic College of Emergency Professionals) sponsoring two bills:

AB 2983, voluntary patients cannot be placed on a hold just for transport –Mostly focused on transports during 5150, although Mike Phillips is working with them to expand the language to cover any transport during LPS process. Samuel makes motion to support, Jim Raphael seconds. No opposed, approved. Anne raises concern if the ambulance company is covered by this language. Mike will follow up to find out.

AB 2099 – a copy of 5150 is just as good as the original 5150 (urban legend that it's not, this bill would end the debate). Chris moves to support, Anne seconds. No opposed, approved.

## **VIII. New Business and Next Meeting; Adjourn**

Samuel makes a motion that CAMHPRA participate in Mental Health Matters Day, put on by Each Mind Matters & Mental Health America – California on May 22, 2018. In front of the Capitol in Sacramento, many different mental health and advocacy organizations will have tables, speakers etc. Samuel hopes for CAMHPRA to have a table, and would drive to Sacramento to staff a table, could use items from PRAT. Samuel motions to participate, Richard seconds, Approved. Jill suggests also supporting the Disability Action rally at the Capitol and will send info to Board.