

C.A.M.H.P.R.A.

California Association of Mental Health Patients' Rights Advocates

Minutes

Quarterly Board Meeting

10/31/2012

Time: 10:00 a.m. to 4:00 p.m.

Call to order 10:20 by Jill Ward.

Present: Joyce Ott, Dave Vandenberg, Hank Hallowell, Michael Udeorji, LA, Barbara Rocha, Delores Casteneda Orange, visiting, Jim Marques, Cynthia White new So Cal rep needing to pay dues, Jill Ward, Anna Krieger, Janet Marshall Wilson, Gloria Hernandez, Ann Coller, Jim Marquez, Jim Preis

Quorum attained.

Agenda: stop for Dan Brzovic

Minutes of 7/23/12 minutes: marquez/Krieger to accept as submitted; carried unanimously.

Announcement: requests a few minutes at end.

Training 11/14

Gloria teresa treasurer's report delayed in case she shows up.

Organizational business:

Website issues:

In suspension on camhpra website why? Doesn't make sense for free site. Don't know why? Out of date format which can't be formatted. Adam Baroff webmaster per Griselda. Jumbala an old version, a content management system. Anyone can change content. AB recommends domain name. For frequent updates as to daily blogs. AdamBaraff does with HTML.5 for reference materials, could connect w twitter & facebook for questions. M/S/Hernandez/Wilson to get quote from Adam and move forward, delegate decision if under \$500/year mveon to new guy webmaster for under \$500/year. Jill will e-mail quote to all and we will figure out on listserve. Teresa requested to call Jill.

Legislation committee:

A Hank AB1693: IST pilot projects so local counties could treat IST felony in local jails by counties. Did not pass. Jim Preis: LA had one of the 1st pilot projects; did

not work well; jail not a good place to regain competency. Talking about opening one at CPT in Delhi. They have ISD unit, treating both felony & misdemeanor IST [Ann C.] Report? Misdemeanor? Have whole program in state hospitals where they go to classes. But stayover in state hospital changed from 6 mos to 2 weeks. Any evaluations done on original pilot? San Bernadino has one, will forward. No report of a study; to expand pilot from SB to LA and Kern.

AB1907 lowenthal, dept of corrections inmates 9/30 passed, signed and codified. Due process rights around forced medications; no longer includes PRAs as counsel. DAN: no PRAs can represent. PDs will be doing. Specific provisions for due process, std of proof, notice, etc. Hearing officer or judge. Determination lasts for 1 year subject to renewal. For people in local jails, takes precedence over Title 15 regs, not ltd to AB109. Concern: [ann] all people in jail or just post-conviction? Sheriff's assoc didn't want to be doing 2 types of memdication hearings. Jim R. or Anna will get more info.

Dan Brzovic: expansion of programs to rstore felons to competence in county jails. No info.

AB1907: for LPS patients who would have Riese procedures, ab109 realignment trnsfer to county jail. [dump oncounties to avoid requirement to provide massive medical care]. Title 15 for misdemeanors. 1907 only applies to post-convictionfelons who would have gone to state prison but are going to county jails instead. Kehea procedures. Riese hearing officers able but do not have to conduct Kehea hearings. Workload issues. PRAs can represent in local jails on kehea. Don't want kehea to replace riese if we can avoid it.

State hosital defn of contraband put into statute.

Lps reform task force 2: not a task force, a very small group of people, not a big consensus document. Randal Hagar and a few others. Real issue: take away freedom, do only what is absolutely necessary as opposed to dx therefore father knows best. Specifics: gd change defn: add lack of capacity. Lack of capacity to consent = gd. Worrisome: completely harmless then placement in facility and forced medication. Anogsnasoia [?] any rational person would consent. Also worrisome: expand ability to hospitalize, restrict freedom of movement by hospitalization or conservatorship. Expansion of criteria: perfectly harmless, taking care of themselves, why not leave them alone. Add health and safety. Lack of capacity: dmh sponsored 8 hr focus group in LA: opposed: all the 1st responders in LA. Health care needs: what does that have to do with psychiatric hospitalization? Probate Code and PC conservatorships: not mh tx std. hard to argue refusal of medical tx [eg diabetes] → 5150. Expansion of defn: unqualified people are making decisions.

Combining 2 hearings: burden on hospitals to go through 2 hearings [Hagar]. Change of std of proof on riese to pc. Have capacity hearing, inviting one extra

hearing, unsure if agree to 14 day hold then change mind. LA {preis] they are very different hearings. Formal rules of evidence for Riese. Riese vs. St. Mary's was about right to informed consent not to refuse. Right to talk to MD. Therapeutically, works a lot better to have this conversation. One hearing would do away with this conversation. Practical thing: psychiatrists would be forced to do all hearings. Adds unnecessary riese hearing where people are not refusing.

Std of proof: pc for gallinot. Brd for conservatorship. Proposed: riese based on pc but would never get to court, DOING AWAY W/PRESUMPTION OF CAPACITY.

Current sx: pc w/getting into court quickly. Old sx: dilemma doc.. court clinical recommendation. proposed: nonjudicial commitment. Burden has to be on parties who want to detain people. [rogue staff tearing up writs].

Pc is to arrest or detain pending a hearing or trial, not to detain forever.

Periods of time: 28 days on pc, nonjudicial procedure. Petition for writ? Std

5300 burder would be on person detained; no CRH;

dilemma doc: detain as short as possible; hagar: detain as long as possible. No data at all which justifies 28 days. No justification. Average length = 7 day stay. Has nothing to do w/LPS: has to do w/reimbursement. Subterfuge for eliminating due process. Want to come up w/longest possible time that they can justify as reasonable; see due rocess as interfering w/tx. Insurance companies are going to ask for medical necessity. Want smooth tx process to go on as long as possible.

God to get to statewide county counsel group our arguments.

Hospital group when 150 starts, ER turnaround, hospitals have to work w community and county mh to prevent ER overuse.

ATTACK ON COUNTY RIGHTS: county counsels will be vehemently opposed. Not a cookie-cutter way of doing things. Role of state DMH: doesn't exist; who would enforce? Codification? Dmh: 1/3 positions vacant; does not know how will handle licensing functions for PHFs and MHRCS went over to CCL. Dmh approval of county designated facilities also went to ccl. Community mental health services a real mess. State hospital services a hit the ground running.

Dan gone 11/14 back 12/10. m/s CAMHPRA analyzing sharing proposal and provide recommendations and our m/s/Wilson/Hernandez unanimous. Look at realistically what is allowable. Try to do something b/4 dan leaves to get his feedback.

Value of cares coalition. Bigger point of view. Cares coalition has added narpa. Need to sort out representation.

Sharee's assistant requested meeting re CAMHPRA's proposed legislation. Dan recommends going to meeting find out what they want, try to influence CHA as they are drafting the bill. Eg 1799.111 law changed but still a problem; changing laws is not the necessary answer.

Teresa: treasur 5147.36. no expenditures since July [charged for Rockin website 110.62] supposed to apply w/in 72 hours so no thought of hacker.

Break till 1:15 for lunch.

Back from lunch:1:20

Coalition updates

Joyce Ott Far North [Trinity] has not done anything. Trinity: disaster preparedness, working w/red cross. All county employees are taken as 1st responders in disaster. Talking about having cross-training: disaster prep and mh issues. Sisyuu: struggling, asked joyce to be pra, she had to decline but will help train. Shasta opening up PHF 1/1 doctors: unknown. Beginning stages of meeting w PD, County Counsel, take on LPS reform re county uniformity, get support from new mh director [replacing Marta McKenzie]; may name PG

Ccc: LPS reform mtg, crestwood, 3 wellness centers issues, b&carre monitoring, r&b coalition,

Alameda: electronic medical records at john george. Pleasesend cpoa trainings, traveling staff, lots of education to be done, working to improve voluntariness, varying levels of success. Continue with CIT trng and working to reduce s/r; Napa: shh: key cards, lack of MDS' NSH: voluntariness; day of remembrance

Monterey; issue of voluntary pt scheduled for 3rd ect tx, refused, 5150'd; plan of correction submitted; no longer do ect on anyone on a hold. new folks in charge of rep payee program, problems with checks not being paid on time, strategies

Sf: cultural competence issues; access to pts on holds on medical units. Surveying pts on services they provide.

Sonome: aurora: finishing up new facility [December?] working on psych designation of crisis stabilization; will not be allowed to be designated; state probably not interpreting law correctly, to be continued.

Santa clara: working with new VA upgraded facility; patients seem to like it a lot. Trying to bank on good will with jail inpatient unit. Quarterly meetings w PG office: productive. Problems w/benefits management. Wrapped up big audit of private hospital; continuing with CIT trng and 5150 trng.

Central valley: mtg last Wednesday: good representation, kern co now doing riseses. Straightened outtimeliness of riese hearings. Good sam: intercounty amendmentments. Crestwood closed now mhrc, does a lot of 5300. Do other 23 hr facilities use cameras during evaluation? Called by facility if over 23 hrs.

Fresno, getting new mh director; MD at Crestwood PHF lost it, trying to restrict to certain room; saying Fuck you to Gloria, unprofessionally cussing; in process of filing of medical board complaint against MD; diagnosed Gloria. If he is doing that to Gloria, then how is he treating patients. Will send copy of medical board complaint to CEO and contract monitor. Wants a public apology. Details of bad reputation of MD. Very hostile environment; staff quitting.

Stanislaus, getting newPHF in county.

Tulare: mom trying to amend rcd of 8 year old, differenceof opinion.

Merced: Barbara coffelt gone. ew advocate who used to be in charge of acute facility and assist mh director. Will come to January mtg.

Trng issues for PRAT: AB109, electronic rcds, electronic records, 1st session should still be newadvocate issues so people [traveling] are not left out. Cynthia: Synthetic drug issue [eg spice] look like schizophrenia. Important: symptomogy: knarling, knashing and primal. 6900 calls in 2011 from ERs expected to double this year. Free training. Grant funding. Great strength. Caution advocates to be careful.

Gloria: 5150 task force: emergency room frequent flyers. Real problem is at end: no IDM, b&c's, not at beginning of the road.

So cal [Cynthia] topics for prat: 109, dsm5, OPR position on access to electronic rcds, health & mh and mrcds [integrated health care]. Firearms clarity; geroqpsych an ongoing problem dealing w/dementia; more of a problem as population ages, Jim P: LA office needs to be more tied in. eg dan b. said: a pilot including LA county is not a pilot. Help LA!

Implementation of KG: most counties have not done anything. With Counsel. Whose budget is it going to come out of??

DRC will write in December.

Reports from other advocacy organizations:

Coalition: Jim P. only goes to Southern CA meetings. Sac meetings? Janet & Anna take turns. 2 in sac for every 1 in south. Jim could brief, gets minutes. organizational Dues [and pays less dues] and charge for attending meeting.

COPR: ann off phone

MHAS: Jim P. joint DRC/MHAS joint stigma/discrimination grant calmhsa. Fact sheets produced. 3 year project. MHAS focusing on youth. Topics and direction derived from advisoryboard. Youth: elimination of mh special ed services from schools [transferred from counties]; area of advocacy: school discipline, expulsion rather than ID as special ed student. Gloria: Fresno Bee [yesterday] good on-line article. NPR focused on this Friday or Monday. School districts won't do anything until made to do so and no one is making them. Lots of ways it could be done well.

Litigation: right to counsel, Ist due to severe mental disability in deportation proceedings. Filed summary jm, expect positive outcome, more information in next couple of months.

Govt benefits and health care reform. Deincentivize people getting on SSI, counties will get more. Lose 50% reimbursement. Chec w. Anna,

DRC: 0

Public policy: done earlier

CAMHPRO: ideology is not the problem. Name Recognition. We could redesign our letterhead to emphasize PRA. Tabled for now.

NEW BUSINESS:

Listserve:

PRAT trng 2/6,7,8. Tuesday night annual camhpra meeting. Workshops: meds, riese, conservatorship Ji Marquez w pamphlet, how to not become one of your own clients, topics taken from listserve. Reppayees, electronic medical rcds, voluntariness, brainstorming discussion, panel of sages. Breakout topics s/a electronic medical records. 5150's in ED's across sizes of counties. What nurses do in hospitals. Cultural competency. Advance riese. How to comply w/kg share different ideas on how to implement, volunteer jim Raphael. Brown bag medication tool kit [polypharmacy]; successful San Diego study, janet contact Mary Jo Obrien.

Space issue: Barbara Rocha feels that Michele Mudgett got message. Jill to call Michele re: not being able to gt into sessions. Repeating is not the answer. An issue last year was the financing of the space.

Are there other options? There was always adequate room @ Holiday Inn. And we need agenda 1 month ahead of time, even as a tentative agenda.

Camhpra awards:committee: Barbara rocha, teresa a., Gloria, jill, Jim Marquez

Deadline to get in: 12/21. distribute on listserv; be able to submit electronically as well as by fax. Send out a description of what award is for.

Keynote speakers: Ellen Sacs [The Center Can't Hold"] anna to contact Jim P. - she is on his board; clayton chau. Mary ellen Copeland,

Barbara to talk with the Hyatt re: meal.

Joyce: oac has all 3 ks for consumer & family involvement, new k: for client perspective. Memorial project is not identified, .cultural competence, no local training . . when k itself comes out, there will be a 45 day comment period, consortium? Advocacy piece has gone out the window. Joyce to send e-mail link to contracts.

Anna [announcement] will send out for whole board: Nat'l center for youth law] youth board trying to reduce antipsychotics for foster youth. Medi-Calid fraud. Sending to whole pras listserv.

LA looking at impact of all measures: all would be costly. Report.

Options: similar wordpress
Jumbala 2.5
Drupla

m/s/carried marzuez/rocha/ adjourn. 1545