Stakeholder Sharing
(CPAW Meeting – September 6, 2018)

Highlights of news to share and areas discussed at recent CCBHS supported stakeholder meetings:

**Mental Health Commission (MHC) – July 11th**
- Discussion ensuring Contra Costa County (CCC) BHS has emergency action plan in time of disaster. Vice Chair of District I requested copy of emergency action plan.
- MHC Retreat to be held Wednesday, September 26. Retreat will take place in lieu of regular MHC meeting at Vincent/Briones High School. Offices of Anna Roth, Director of Health Services for CCC secured facilitator for retreat. Facilitator will be Institute for Patients and Family Centered Care (non-profit working with health care staff, families, and patients to better collaborate and inspire patient and family centered care).
- Construction of future West County Mental Health clinic started in same vicinity of West County Health clinic. Updates to be provided to MHC as information becomes available.
- Health, Housing and Homeless Services (H3) presented on permanent supportive housing projects. Micro-housing is inexpensive and building can start quickly. Often, it takes 5-7 years to build housing in community, micro-housing can be developed in 11 months. H3 is working to create first project in West County. All units will be ADA accessible, approximately 180 square feet and will include kitchen, bathroom with a shower, and bed. Project will have supportive services available to residents. First project is for highest utilizers of the county’s system of care, chronically homeless, (although not a requirement), and have some sort of a disability (developmental or behavioral), requiring long-term support. Estimated time frame to be operating is by October of 2019.
- H3 looking into opening CARE CENTER, drop-in, multi-service site, to offer case management, housing basic needs, showers & laundry, facilities for animals and, and locked storage for personal belongings in East County(Antioch). Recognizes scarcity of services in that area. Looking into developing Micro Housing in East County in future as well.
- Presentation from Juvenile and Probations Mental Health Services Program Manager, Dr. Dan Batiuchok, of services provided. Currently, 3 programs exist within department of mental health and probation services: mental health clinic at Juvenile Hall (staffs 3 full-time mental health clinicians and 3 part-time psychology trainees that are doctoral students; in fall will increase to 5 part-time psychology trainees). Clinicians work staggered schedule, Wednesday to Saturday, or Sunday to Wednesday, approximately from 9am to 7:30pm. There is 1 psychiatrist providing medication coverage for Juvenile Hall and the Ranch working part-time. As of July 11, population being served is approximately 82 youth, and 50 youth at Ranch. Total of 132 youth. The Ranch staffs 2 full-time mental health clinicians, working staggered schedule to provide services 7 days a week. Youth at the Ranch are in facility for longer period (four to nine months); so youth are engaged in long-term therapeutic services. Third program is “Mental Health Liaisons” program. Has 1 full-time licensed mental health clinician, at each regional office: West (Richmond), Central (Martinez) and East County (Antioch). Also a 90% FTE, Family Partner Community Worker, at Richmond office, to provide family support services. About 40% to 60% of youth at detention facilities require mental health services.
- REMINDER, no MHC meeting in September. Instead there will be a MHC Retreat on Wednesday, September 26th from 3pm to 6:30pm at Vicente/Briones High School, 925 Susana Street, Martinez. Everyone is invited to attend.
Quality of Care Committee (QC) – July 19th

- QC Committee had sent letter to CCRMC requesting to integrate current consumer advocacy empowerment and grievance resolution program at hospital, into quality of care practices of psychiatry unit at 4C and Psychiatric Emergency Services (PES). CCRMC staff, Shelly and Jaspreet attended July MHC meeting to respond to letter. Both provided overview of quality assurance process used at PES and 4C, acknowledged that process contains similar elements of process recommended for implementation. Hospital is looking at ways to improve 4C and PES, based on consumer empowerment and grievance resolution process. Shelly and Jaspreet will document details of processes used to help MHC better understand how they work, identify potential gaps and understand changes being made. Documentation will be forwarded to MHC.

- BHC noted efforts made by BHS on improving timeliness, access to care and hiring additional psychiatrists. Staff continue to receive training, including trauma informed care. BHS has also hired more staff with lived experience and added Family Support Workers (FSWs). Will work to provide more Transitional Aged Youth (TAY) services.

- Tele-psychiatry services have initiated in the eastern region of the county, with hopes to expand services across county.

- Next meeting is Thursday, September 20th at 1220 Morello Avenue, Suite 100, Martinez from 5pm to 6:30pm.

Alcohol and Other Drugs (AOD) Advisory Board – No meetings in July or August

- July and August AOD meetings were canceled. Last meeting was held May 23rd and was summarized in last month's CPAW summaries.

- Next meeting is Wednesday, September 26th at 1220 Morello Avenue, Martinez from 4pm to 6:15pm.

Adult Committee – July 24th

- Steve Blum, Supportive Housing Manager, presented Point In Time Count, (snapshot of persons experiencing homelessness and living in shelters). It showed 65% of homeless reported a disability and 89 families with children were also homeless. Increase in numbers from 2017 of number of homeless seniors and chronically homeless.

- Jane Yoo, Mental Health Housing Coordinator, works closely with contracted facilities to coordinate housing and stepping people through different levels of care. Goal is to help folks live more independently. Jane is partnering with Steve on creating independent living options for independent housing.

- Travis Curran, Campus Administrator of Crestwood Healing Center in Pleasant Hill, discussed 2 programs. Bridge program holds up to 65 adults of all ages & Pathway program up to 16 people, of a younger population in a transitional residential program up to 1 1/2 years. Crestwood's vocational program also has some kind of paid employment for 1/2 of their residents.

- Larger philosophy of Adult Committee is how do we help people to have purpose and meaning in their lives and how to get people more connected to the community. By fundraising aimed at different cause in the community that are meaningful for the purpose so we are making this impact outside of ourselves.

- Next meeting is Thursday, September 25th at 1340 Arnold Drive, Suite 200 Martinez from 3pm to 4:30pm.
H3 Housing Committee – August 7th

- There is bucket of 1.7 million dollars. 5% ($360,000) will be dedicated toward youth experiencing homelessness. Other dollars can be used towards brick and mortar housing, acquisition, HSF or rentals. H3 has surveyed CPAW partners and H3 to identity how to allocate funds and is reviewing responses. Systems of Care Committee discussing what services should look like for persons with mental illness who are chronically homeless. County to get $150,000 for technical assistance from State. There will be competitive and non-competitive process for counties to apply for funding. Meeting held on August 30, 2018 in Oakland attending by H3, Behavioral Health and Conservation Development to gather more information.
- 7.1 million dollars will be coming to County, as one time funds. Must be spent by 2020 in different categories: Homeless mentally ill outreach & treatment ($745,000), Homeless Emergency Aid Program (HEAP) for unsheltered and will be regional stakeholder process, coming through Continuum of Care (CoC), Housing Core Healthy California to provide supportive services that individuals need in housing, and Emergency Solutions Grant can be used towards day shelters, shelters and outreach.
- Homeless Awareness Month coming up in November.
- Youth Homeless Demonstration Plan Update (YHDP) discussed. Will be first ever Youth Count in Contra Costa County. Opportunity to bring large group of people together to discuss needs and assessment. Will be Youth led and Youth driven process in order to have largest impact. Youth Action Council (YAC) discussed questions used on surveys for Point In Time (PIT) adult count. One YAC member felt questions were uncomfortable to answer and discussed ways to make questions less intimidating for youth; so accurate responses can be recorded. Some youth afraid of being reported to police and will run if not approached correctly. YAC will help roll out survey. HUD mandates one adult PIT counts every 2 years. Youth count is not mandated and less restrictive.
- Next meeting is Tuesday, November 6th from 1pm to 3pm at 2425 Bisso Lane, Concord. Meetings take place quarterly on the first Tuesday of the month.

Systems of Care (SOC) Committee – August 8th

- NAMI Contra Costa briefed committee on grand opening date of August 24th. Office located at 2151 Salvio St. Suite M, Concord, CA 94520 will support services including Family Support Volunteer Network.
- Rich Penksa from Mental Health Systems presented on supportive housing mode, specifically in connection with Contra Costa ACTiOn team. Served as stakeholder education in preparation for upcoming supportive housing legislation.
- Committee gathering ideas and stakeholder input that will be used to include in plan when apply for funding. Discussion to continue at next meeting.
- Next meeting is September 12th from 10am to 12pm at 1220 Morello Avenue, Suite 100 in Martinez.

Children, Teens and Young Adults – August 9th

- At last CTYA meeting, new Children’s Chief, Gerold Loenicker and Dr. Matthew White introduced themselves to the Committee and were able to hear about hopes for Children’s System of Care. Both shared top priorities and discussed some of the changes needed in the Children’s System of Care.
- TAY Advisory Report was tabled to next meeting, and will continue to receive feedback from the Committee to provide recommendations to CPAW for the programs that came to present their programs.
- Next meeting is September 13th from 11am to 1pm at 1340 Arnold Drive, Suite 200, Martinez.
Committee for Social Inclusion - August 9th
- Social Inclusion Committee is planning for September and October meetings in West county as part of Social Inclusion: Hope Starts with Us public advocacy campaign.
- There was presentation on Service Provider Individualized Recovery Intensive Training (SPIRIT) and application process for upcoming 2019 year and 25th Anniversary SPIRIT class.
- PhotoVoice Empowerment Project Subcommittee held it’s first of three planning meetings on August 22 focusing on future PhotoVoice exhibitions.
- At WREACH Speakers’ Bureau Subcommittee meeting, August 23 attendees engaged in “Word Association” activity; designed to create knowledge of the power of words when spoken and the reactions they can have on the way people think.
- Please note, next meeting is Thursday, September 13th from 1pm to 3pm at the Native American Health Center at 2566 MacDonald Avenue, Richmond.

Aging and Older Adult Committee – August 22nd
- Committee is planning training on October 19th, by Dr. Patrick Arbore on Dealing with End of Life Issues for Behavioral Health Professionals. The training will consist of a panel of speakers to include; Chaplains of Training, Hospice, Faith-based, Self-Care, Senior Legal, and a rep from Rainbow Community Center. The panel/resource portion of training will be from 9am to 12pm, Dr. Arbore's lecture will be from 1pm to 4pm. Currently working on locating facility that will seat 150 guest at tables, offer audio/video equipment, and will allow food/ drinks. Registration invitations will go out to BHS, hospital staff, community based organizations, and community.
- Next meeting is Wednesday September 26th from 2pm to 3:30pm at 2425 Bisson Lane, Concord.

Suicide Prevention - August 24th
- There will be a presentation on September 11th to the Board of Supervisors to adopt a resolution and declare September 2018 as Suicide Prevention Awareness Month
- On September 17th there will be a free screening of the documentary film, The S Word, at 6:30pm in the Board of Supervisors’ Chambers (651 Pine Street, Room 107) in Martinez. If you are interested in attending you must register in advance. Please email Jennifer.Bruggeman@hsd.cccounty.us for registration info.
- The MHSA Suicide Prevention clinician is now working one day per week in each of the adult clinics in the East, Central & West areas of the county.
- The next Suicide Prevention meeting will be Friday, September 28th at 1220 Morello Avenue, Suite 100, Martinez at 9am.

Innovation Committee – August 27th
- Coaching to Wellness provided an update on project’s staffing and enrollment criteria. A Mental Health Clinical Specialist was hired in May 2018 and will be responsible for clinical assessments, annual clinical updates and developing treatment plans. Also, the project has decided to expand criteria and open enrollment to all clients in need of health care management.
- Jane Yoo, Mental Health Housing Services Coordinator announced hiring of the new Mental Health Clinical Specialist. Clinician is currently being acclimated to the Board and Cares and shadowing staff to become familiarized with County System.
- Nancy O’Brien, Mental Health Program Supervisor updated committee on Center for Recovery and Empowerment. She discussed the new location and staffing. Staff have moved into location and are slowly starting to receive referrals. Project is still in process of hiring a few more positions.
- Next meeting will focus on implementation of the two new innovation projects.
- Next meeting is Monday, October 22nd at 2pm at 1220 Morello Avenue, Suite 100, Martinez.
Stevenson Place Helps Those Who Need Extra Care, But It’s Not Being Replicated

Pete Earley

(5-2-16) The Justice Department, many mental health advocates and federally funded protection and advocacy groups are opposed to group homes and housing that resembles an institutional setting. The goal is for everyone to live independently in their own apartment.

But is it realistic to believe that everyone can live on their own if they have a severe mental illness and other debilitating challenges?

My good friend Trudy Harsh, the driving force behind the non-profit Brain Foundation, believes that some individuals need services that are best delivered in a group setting or multi-person facility. That’s currently a politically unpopular point of view, but Trudy is speaking from her experiences not only as a housing activist but also as a mother.

If you are a regular reader of this blog, you are familiar with Trudy’s story. She grew tired of attending countless community meetings where everyone complained about a lack of affordable housing in Fairfax County, Virginia, but didn’t do anything to help resolve those complaints. Talk without action is meaningless so Trudy used her experience as a real estate broker to obtain a low interest loan from the Virginia Housing Development Authority in 2006 to buy a house for persons with brain diseases (she refuses to call them mental illnesses.)

She named it Laura’s House, after her daughter, Laura, who developed a brain tumor at age eight and underwent surgery that left her stunted emotionally and physically. (Laura faced numerous challenges for the next thirty years until her death in 2006.)

Trudy contracted with Pathway Homes, a local mental health provider, to oversee care for residents in Laura’s House. Her formula — of having a non-profit group finance a house — caught on. It was copied in Florida. Today, there are nine Brain Foundation houses in our community and last Saturday, I spoke at a fundraiser for the Brain Foundation, which I would urge you to support.

In addition to creating these nine group homes, Trudy believes Fairfax needs to construct two larger facilities patterned after Stevenson Place, which is not far from my home. It is a dormitory style facility composed of six “neighborhoods.” Each neighborhood is located in a wing of the building and each wing contains six separate
bedrooms with full baths, a communal living room and a kitchenette.

Trudy gave me a tour of Stevenson Place a few years ago. At that time, it was staffed round-the-clock by a total of 33 employees. The workforce included a registered nurse, a nurse practitioner, two mental health therapists, a psycho-social rehab specialist, and a psychiatrist, who was on call. Meals were provided, as well as, classes on social skills and job placement for those capable of working part-time.

Stevenson Place describes itself as a:

… non-institutional, warm and homelike environment which addresses the needs of all residents for a stable, safe, and supportive place to live…designed to empower and encourage residents to recover and to realize their individual potential in the least restrictive environment in which they are capable of living.

The top goal of Stevenson Place is:

| to emphasize consumer empowerment, choice and a sense of self-determination through incentives and encouragement for resident to assume increasing responsibility and control over their own lives. |

Who lives at Stevenson House?

All thirty-six bedrooms were occupied when I visited. Fourteen of the residents had come directly from state mental hospitals, ten had lived previously in supportive housing that had proved too much for them to handle, four had lived with their families, two had been living in homeless shelters, two others had come from assisted living facilities outside Fairfax County, and three had arrived after being evicted from apartments.

Half of the residents had severe and persistent schizophrenia. Forty percent had been diagnosed with schizoaffective disorder and the final ten percent had other mental disorders that interfered in their daily lives, including severe depression.

Let’s dig a bit deeper. In addition to those mental illnesses, eighty percent of the residents had additional personality disorders that made it challenging for them to live independently. The other twenty percent had intellectual disabilities and/or developmental disorders that required them to have daily help.

Despite all of these challenges, one fourth of the residents were able to work part-time in our community at jobs in national chains such as Red Lobster, IHOP, Wegmans and Food Lion.

When I visited, I asked how many of the residents had moved out from Stevenson Place during the seven years that it had been operating. Sixteen had moved. Five residents had gone into nursing facilities because they needed more nursing care than could be provided at Stevenson Place. Three had moved into less restrictive independent housing. Two had transferred to a group home, two others had returned to a state hospital for more intense inpatient care, two others had gone to live with their families, one had ended up being arrested and was in jail, and one had died.

The goal was to help those, who were capable, to move into a less restrictive environment but there was no hurry to push them out the door.

“Laura could not live independently,” Trudy told me. “She just couldn’t survive without getting daily help.”
Now let's look at the cost.

Stevenson Place’s per person cost per day was $86.07 when I visited it. The average per person, per day cost of housing someone at a Virginia state hospital is $2,680. It is $1,753 in a nonprofit hospital and $1,878 inside a for-profit one. The cost of an 8-person group home in Virginia is $258 per person per day. The cost of housing an inmate in the Fairfax detention center is $145.49 per day.

This means that Stevenson Place is much less expensive than the current housing alternatives in Fairfax County. (I am not including the costs of Housing First and an ACT Team because those services are in short supply and the clientele in Stevenson Place routinely require more intensive services.)

If Stevenson Place is more economical than hospitals, group homes, and jail –if it helps persons who haven’t been able to live successfully in a less restrictive environment by providing them a safe, home-like environment where they have their own room, receive nutritious meals, have access to medical help and job training, why isn’t the county building more facilities like them? Why are other counties and states not replicating this successful model?

The answer: fear and politics.

The Olmstead Act, which requires states to place qualified individuals with mental disabilities in community settings, is being used by the Justice Department to close group homes and facilities such as Stevenson Place. They want everyone to live in an apartment. Period. End of discussion.

I understand why the Justice Department and others oppose group homes and residential facilities. When I did research in Miami for my book, there were 650 Assisted Living Facilities there that housed about 4,500 individuals. Only 200 of those ALFs could pass the state’s minimum standards for operating as a group home. The others were granted waivers by the state to operate at lower standards than the norm. One home I visited had a hole in the roof that rain poured through, medications were scattered on a kitchen table, meals were rice and beans, the caretaker spoke only Spanish but none of the tenants did. There was no therapy, no counseling, nothing but half-dressed residents smoking cigarettes and staring at a black and white television. It was inhumane.

Our fear of institutional living is rooted in our past. For decades, many state hospitals were giant warehouses where residents were neglected, marginalized, dehumanized and abused. One writer in Oklahoma compared state hospitals there in the 1960s to Nazi concentration camps.

I understand those fears.

But the group homes that the Brain Foundation operates are well-run, integrated housing in suburban neighborhoods. There are safeguards. People are treated with respect. Stevenson Place also is a welcoming, clean, and modern home-like facility. It fills a niche often missing in most states.

When I visited, there were 95 individuals on the Stevenson Place waiting list. There currently are some 150 individuals in Virginia state hospitals waiting to be discharged but unable to leave because there are no facilities in their communities that can accommodate them.

Currently, there is a FIVE year wait in Fairfax County if you have a mental illness and need supportive housing.

Many of the residents of Stevenson Place would fall into the “frequent user” category of persons with severe mental disorders. That’s the group that often spend their lives homeless or in jails and prisons. That’s the group caught in revolving door of despair. That’s the group that traditionally uses as much as half of all local mental health dollars yet rarely receive the services that are necessary to help them recover.
Despite the need to provide housing to this group, Trudy Harsh is a lone voice in supporting group homes and multi-unit facilities. She risks being publicly pilloried for daring to say that some people may not be able to live independently and do better in a group home or a multi-housing unit.

Fear and politics triumph.
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**Suicide Prevention:**
- **H3 Community Housing Mtg**
  - October 2nd (Tuesday)
  - 1:00 pm—3:00 pm
  - 2425 Bisso Lane Concord