

**Families Alternative Report to Contra Costa County
Assisted Outpatient Treatment Workgroup Recommendations**

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Executive Summary and Thoughts for Consumers to Ponder

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We are most thankful that, after 8 months of work, the workgroup has recommended badly needed county Behavioral Health system improvements. In particular, we appreciate and strongly support the establishment and robust MHSA / county BHSD funding of:

1. County In-Home Outreach Team and treatment engagement phone line. This “plug” a major gap in family and consumer behavioral health services identified by the workgroup.
2. Educating and Coordinating with the Consumer’s Support network. In particular, hiring a Behavioral Health Navigator at each adult clinic would greatly help care givers and/or family members better “navigate” the county system to help consumer loved ones receive better care.

However, we disagree with the 3rd recommendation for a small 10 person Laura’s Law “pilot program” and an intimated 6-9 month implementation timeline. Summarized below are results of our comprehensive proposal for a full 45 person county program. Unlike a tenuous “pilot,” **a Laura’s Law program implemented July 1, 2014 would immediately do the following:**

- Greatly reduce threat of violence to the public by completely psychotic seriously mentally ill (SMI) persons.
- **Could be funded by a combination of MHSA and BHSD budget dollars.** There is nearly \$55 million unspent available dollars as of June 30, 2013, which exceeds the cumulative recommended Prudent Reserve amounts by over \$8 million for the 5 MHSA programs.
- **Reduce** associated hospitalization, out-of-county conservatorship placement, and jail detention costs by nearly \$5 million annually, and ongoing state hospital costs by over \$5.7 million annually; thus actively encouraging ongoing voluntary service programs expansion of nearly \$10.7 million annually.
- Require FSP multi-discipline “accountability of care” reporting transparency that would quickly correct the inadequate county oversight of mental health service delivery, spending, and MHSA programs.
- Provide a kind, helpful civil rights “guiding hand” to help SMI persons who do not know they are ill to receive sustained, badly needed “community recovery” treatment.

By contrast, a 10 person pilot program (see attached Pilot program spreadsheets, pp. 1-3):

- Would only “touch the surface” violence threat to the public by completely psychotic SMI persons.
- Reduce hospitalization, out-of-county conservatorship placement, and jail costs from a range of \$1,008,683 to \$1,154,034 while likely incurring costs of approx. \$568,500-\$650,000 for a program savings of only \$364,000-\$485,000.
- Increase variable per client cost of care services from a range of \$25,000-\$48,000 up to \$65,000 because of a much smaller number of persons served.
- Only slowly correct the inadequate “responsiveness of care” and records reporting and oversight problems that currently plague county mental health services delivery, spending, and MHSA programs.
- Would not produce enough data to show the effectiveness of treatment outcomes. The results for the 10 people selected, whether positive or negative, may not be representative of the population Laura’s Law is intended to serve. Therefore, it would not inform the issue of whether to enlarge the program.

Side by Side Laura's Law Programs Comparison

| Full Laura's Law Program | Pilot Laura's Law Program |
|---|---|
| <ul style="list-style-type: none"> Maximum Number of Clients: 45 | <ul style="list-style-type: none"> Maximum Number of Clients: 10 |
| <ul style="list-style-type: none"> Greatly reduces public safety threat posed by some completely psychotic SMI persons. | <ul style="list-style-type: none"> Barely "grazes" the public safety threat posed by some completely psychotic SMI persons. |
| <ul style="list-style-type: none"> Quickly corrects inadequate Quality of Care, data reporting and many oversight issues. | <ul style="list-style-type: none"> Only gradually corrects inadequate Quality of Care, data reporting, and many oversight issues. |
| <ul style="list-style-type: none"> Provides numerous Civil Rights protections | <ul style="list-style-type: none"> Provides numerous Civil Rights protections |
| <ul style="list-style-type: none"> Annual Hospital Savings: \$2,329,763 | <ul style="list-style-type: none"> Annual Hospital Savings: \$514,243 - \$511,114 |
| <ul style="list-style-type: none"> Annual Out-of County Conservatorship Savings: \$2,362,068 | <ul style="list-style-type: none"> Annual Out-of County Conservatorship Savings: \$464,443 - \$448,293 |
| <ul style="list-style-type: none"> Annual Jail Detention Cost Savings: \$231,045 | <ul style="list-style-type: none"> Annual Jail Detention Cost Savings: \$74,348 - \$71,951 |
| <ul style="list-style-type: none"> Annual Out-of-County State Hospital Cost Savings: \$5,770,823 | <ul style="list-style-type: none"> Annual Out-of-County State Hospital Cost Savings: NONE |
| <ul style="list-style-type: none"> Maximum Annual "Cost Avoidance" Savings: \$10,693,698 | <ul style="list-style-type: none"> Maximum Annual "Cost Avoidance" Savings: \$1,054,034 - \$1,031,359 |
| <ul style="list-style-type: none"> Annual FSP-AOT per Client Costs: \$25,000 | <ul style="list-style-type: none"> Annual FSP-AOT per Client Costs: \$25,000 |
| <ul style="list-style-type: none"> Maximum Annual per Client Additional Services and Housing Costs, if needed: \$13,442 | <ul style="list-style-type: none"> Maximum Annual per Client Additional Services and Housing Costs, if needed: \$18,330 - \$20,000 |
| <ul style="list-style-type: none"> Maximum Annual per Client Court Costs, if needed: \$ 9,915 | <ul style="list-style-type: none"> Maximum Annual per Client Court Costs, if needed: \$13,520 - \$16,750 |
| <ul style="list-style-type: none"> "Cost Avoidance" Success Rate: 75% | <ul style="list-style-type: none"> "Cost Avoidance" Success Rate: Unknown |
| <ul style="list-style-type: none"> Per client level of costs do not vary because of proved service effectiveness and efficiency | <ul style="list-style-type: none"> Cost Savings and per client level of costs vary because service effectiveness and efficiency is Unknown due to reporting issues. |
| <ul style="list-style-type: none"> Full programs proven to work in Nevada County, State of New York, and North Carolina | <ul style="list-style-type: none"> Does not effectively inform whether to enlarge the program because of current reporting issues. |

We have this proposal available for those who wish to carefully study it. In the meantime, we have thoughts for our consumer friends to ponder as we work together to come up with solutions that will benefit them, as well as families, who also daily live with the reality of mental illness. More than anything else, we all want sustained, meaningful recovery for as many consumers as possible. Therefore, we ask that all involved consider the following thoughts:

Thoughts for Consumers to Ponder

Mental health consumers often oppose Laura's Law because they fear it begins the "slippery slope" of out-of locked facility "forced medication;" thus, erasing their small, incremental hard won gains for self-determination from a society still influenced by the stigmatizing legacy of "lifetime state hospital confinement" decades ago. The mantra in the mental health consumer movement is, "Nothing about us without us." As the parents of consumers and friends with a growing number of consumers, we agree. Laura's Law does, indeed, directly affect the consumer.

However, countless parents, siblings and friends of our consumer loved ones have often helplessly watch them spiral uncontrollably downward with each brain damaging psychotic break. Their impaired brain "wiring" will not let them comprehend that they are ill. Such consumers often end up either in the "revolving door" of endless hospitalizations and conservatorships, the criminal justice system, homelessness, or as disabled "wards" of the state. Laura's Law and similar Assisted Outpatient Treatment (AOT) laws offer such persons the "last treatment chance in the community" to "get their life back."

For consumers' friends and families, Laura's Law is a kind "guiding hand," even if a judicial order is involved, to help their loved have an intensive community treatment centered opportunity without forced medication for a healed and recovered life. With many guaranteed civil rights, Laura's Law offers the ability to grasp recovery without the legally and emotionally restrictive environment of 4C and places such as Crestwood-Angwin, the jail, Napa State Hospital, or the "prison" of homeless. That is why consumers' friends and families support a full 45 person county Laura's Law program implemented as soon as possible.