



Los Angeles County Mental Health Commission

“Advocacy, Accountability and Oversight in Action”

Annual Report

FY 2017-2018

FY 2017-2018 Commission Members

<u>1ST DISTRICT</u>	<u>2ND DISTRICT</u>	<u>3RD DISTRICT</u>	<u>4TH DISTRICT</u>	<u>5TH DISTRICT</u>
LAWRENCE LUE 5/24/2016-1/01/2019	HAROLD E. TURNER 10/17/2017-1/01/2019	MERILLA M. SCOTT, PHD 12/08/2015-1/01/2019	TIOMBE WALLACE 3/28/2017-1/01/2019	JUDY S. COOPERBERG, MS, CPRP 2/13/2018-1/01/2020
SUSAN F. FRIEDMAN 7/18/2017-1/01/2020	KITA S. CURRY, PHD 3/08/2017-1/01/2020	STACY DALGLEISH 9/19/2017-1/01/2018	JEANNINE PEARCE 4/11/2017-1/01/2019	BRITTNEY WEISSMAN, MPP 1/16/2018-1/01/2021
CYNTHIA SANCHEZ 2/10/2015-3/19/2018	VACANT	VACANT	PATRICK OGAWA 7/11/2017-1/01/2020	VACANT



Executive Committee (from left to right): Susan Friedman, Member-at-Large, Lawrence Lue, Interim Chair, Merilla Scott, 1st Vice Chair, and Stacy Dalgleish, Member-at-Large.

VISION

ALL LOS ANGELES COUNTY INDIVIDUALS, FAMILIES, AND COMMUNITIES HAVE ACCESS TO EFFECTIVE MENTAL HEALTH CARE.

MISSION

TO ADVISE THE LOS ANGELES COUNTY BOARD OF SUPERVISORS AND THE DEPARTMENT OF MENTAL HEALTH DIRECTOR ON ISSUES IMPACTING THE COUNTY MENTAL HEALTH SYSTEM. TO REVIEW AND APPROVE THE PROCEDURES USED TO ENSURE COMMUNITY PROFESSIONAL INVOLVEMENT AT ALL STAGES OF THE PLANNING PROCESS.

VALUES

PERSON CENTERED CARE	We believe individuals should be treated with respect, met with understanding and should have an active voice in their treatment process.
CULTURALLY RESPONSIVE CARE	We believe treatment and programs must understand and incorporate relevant cultural factors into the treatment process as part of providing quality care. This means both recognizing individual and systematic racial bias.
TRAUMA INFORMED CARE	We believe the organizational structure and treatment framework should involve understanding, recognizing and responding to the effects of all types of trauma, not just on the individual seeking treatment but to the family and community.
COMPREHENSIVE CARE	We believe in the systematic coordination of health care that addresses mental health, substance abuse and primary care services to ensure the best outcomes for those with multiple healthcare needs. Individuals should have access to attaining education, employment, secure housing, and other needed services.
ACCESSIBILITY TO CARE	We believe individuals with mental health needs should be able to easily access care in a welcoming and respectful environment.
ACCOUNTABILITY	We believe services and programs should be held to the highest quality standards and should be responsible for enduring effective care and positive outcomes.

Historical Background

State law requires that each county have a Mental Health Board or Commission. The role of the Commission is established in the Welfare and Institutions Code (WIC) Section 5604. Pursuant to Section 5604 et seq. of the WIC there now exists in the County of Los Angeles the Mental Health Commission (MHC) and that Commission is hereby continued in existence in the Department of Mental Health effective October 29, 1957. The Los Angeles County Mental Health Commission consists of sixteen members. By law, one member of the Commission must be a member of the Board of Supervisors. Section 5604 W.I.C. sets very specific membership requirements. Fifty percent of the Commission membership shall be consumers or the parents, spouse, sibling, or adult children of consumers, who are receiving or have received mental health services. Consumers constitute at least 20% of the total membership. Families of consumers constitute at least 20% of the membership.

Annual Work Plan

During FY 17-18, the Commission continued its focus on reviewing reports, holding multiple public meetings and community events to address mental health issues, attending meetings and presentations throughout the county, and advocating for issues concerning special needs, projects, and issues that impact and improve mental health services in Los Angeles County. This against the continuing backdrop of great challenges and change for the Commission and for the Department. For the Commission, the departure of our Chair and the subsequent medical leave of the Acting Chair during the first 6 months; two new Commission appointees; and up to four Commissioner vacancies/absentees per meeting. For the Department, executive reorganization with corresponding new executive hires; review and recommendations for Reinvigorating Stakeholder Engagement; and planned expenditure of accumulated unspent Mental Health Services Act (MHSA) funds.

The Commission continues to pursue implementation of the strategic plan it developed at the end of 2016-2017, to increase and strengthen its focus on important responsibilities such as evaluating contracts for mental health services, reviewing and analyzing State contracts to determine trends and impact on LA County particularly regarding the use of MHSA funds; the impact of the realignment and integration of services from the state to the county; and services delivered to clients and on the local community.



Left to right: Lisa Wong, Debbie Innes-Gomberg, Dr. Curley Bonds



Left to right: Commissioner Ogawa and Commissioner Ledesma

Goal 1: *Review and evaluate the mental health needs, services, facilities, and special problems.*

Activities

- ❖ Advised the department on coalitions, communications, patients' rights.
- ❖ Advocated for expanded role in reinvigorating stakeholder engagement with Service Area Advisory Committees (SAACs) and Underserved Cultural Communities (UsCC). MH Commissioner had active involvement as a member on the UsCC Leadership Group and as a member on the Asian Pacific Islander Subcommittee.
- ❖ Supported PROJECT ABC (*About Building Connections for Young Children and Families*) Governance Board. 4-Year award to DMH from the Substance Abuse and Mental Health Services Administration (SAMHSA) to develop a comprehensive service system for very young children (birth to five) in Service Planning Area (SPA) 6.
- ❖ Partnered with DMH staff to review and comment on the county's performance outcomes data on older adult services (Data Notebook) and communicated these findings to the California Behavioral Health Planning Council.
- ❖ Participated in stakeholder meeting reviewing the quality, outcomes, timeliness of, and access to the Medi-Cal Specialty Mental Health Services provided by LA County through the External Quality Review Organization.
- ❖ Developed new protocol for the coming year to spread out the presentations on MHSA (over 5 meetings) so that Commissioners and community members can better understand the components.
- ❖ Developed new protocols around the information presented by the Director at meetings. Information will include major restrictions of the department, opening of new facilities or new treatment options, and more reporting of outcomes that impact consumers.
- ❖ Submitted letter to Board of Supervisors in support of its January 30, 2018 motion to amend the definition of gravely disabled as referenced in State law and followed related proposal State legislation.

Goal 2: Review any County agreements entered between the Mental Health Services and local programs in accordance with the California Welfare and Institutions Code, Section 5604.2 (2).

Activities

- ❖ Reviewed MHSA Annual Update for FY 2018-2019 to the Three-Year Program and Expenditure Plan of MHSA (2017-2020) and voted to approve the proposed Update.
- ❖ Participated in/reviewed proposed spending plan for accumulated unspent MHSA funds.
- ❖ Held public hearings and provided presentations on: Board and Cares, Full Service Partnerships, County priorities, DMH priorities, County and State legislation, LPS law.

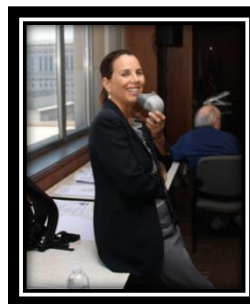
Commissioners took part in the following **Conferences, Events, and Meetings:**

Hope & Recovery Conference	Latino Mental Health Conference	African American Mental Health Conference	Consumer Conferences-Service Areas, SHARE, and NAMI
CA Assoc. of MH Peer-Run Organizations (CAMHPRO) Peer Advocacy Conference	County-Wide Meetings on Homelessness	Innovations Pipeline Workgroups	Individual SAAC Meetings and Events
Systems Leadership Team Meetings	Attended the 1-year Celebration of the Peer Resource Center/Expansion	Meetings with DMH Discipline Chiefs	ACCESS Training on MHSA
CA Behavioral Health Planning Council Meetings	Stigma Reduction/Suicide Prevention Events	Trainings Facilitated by CA Institute for Behavioral Health Solutions (CIBHS)	Events on the Youth Diversion and Development Model through ODR

Canetana Hurd,
Commission Staff



Lucy Rivero,
Spanish Translator



Goal 3: Establish standing and ad hoc committees, comprised of Commissioners and others with specific expertise, to address special needs, projects, and issues to impact and improve mental health services in Los Angeles County.

- ❖ **Ad Hoc Committee on LA County's Board and Care System** prepared: *A Call to Action: The Precarious State of the Board and Care System Serving Residents Living with Mental Illness in Los Angeles County*. Outcome: September 11, 2018 Board Motion directing the Health Agency to report back with a plan to stabilize and grow our existing Adult Residential Facility (ARF) network across the County.
- ❖ **Assisted Outpatient Treatment Oversight Committee.** Initiated discussion with DMH's Office of Medical Director and Emergency Outreach Bureau to review purposes of AOT Oversight Committee.
- ❖ **California Association of Local Behavioral Health Boards and Commissions (CALBHB/C):** Participated as members of Governing Board and in Regional and Statewide meetings.
- ❖ **Annual Town Hall Meeting** – December 2017. Held the annual town hall meeting in Service Area 8 on December 14, 2017. Presented awards to outstanding innovations programs.

Goal 4: Assess the Impact of the Integration and Realignment of Services.

Activities

- ❖ **Los Angeles County Hospital and Healthcare Delivery Commission Behavioral Health Ad Hoc Committee.** Connected to discuss shared interests in addressing behavioral health among commissions, including Hospital and Healthcare Delivery, Mental Health, Public Health and Alcohol and Other Drugs.
- ❖ Represented mental health services at the Integration Advisory Board meetings and built relationships with Department of Public Health (DPH) and Health Services (DHS) and other related Commissions.



From left to right: Carmen Aguilar, LCSW Office of Constituent Advocacy Consumer and Family Affairs and Linda Stone-Abrams, ACSW Psychiatric Social Worker, Outreach and Triage Division

Ongoing-Long Term Projects

Moving into FY 2018-2019 the MHC has established the following Ad Hoc Committees which will focus on key priority areas. Commissioners opted into small work groups to establish goals and milestones for each priority area and volunteered to lead various elements of the overall project. This plan has a special emphasis on collaboration and impact moving forward. The MHC has a renewed inspiration in the spirit of hope and a can-do attitude for the future.

Internal Operations

- Role and Expectations of the MHC
- Culture Re-Defined
- Commissioner Engagement
- Infrastructure and Accountability
- Full Commission Mtg Restructure
- Public Comment Tracking & Monitoring
- Annual Report

Compliance, Oversight & Accountability

- MHSA Standards/Evaluation
- Site Visits of Directly Operated & Contract Providers
- Data Notebook
- Assisted Outpatient Treatment
- Stakeholder Engagement

Strategic Partnerships

- Public and Consumers
- Board of Supervisor Offices
- Department of Mental Health
- Service Area Advisory Committees
- YourDMH/System Leadership Committee
- Health Agency
- Other County Commissions



LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
hope. recovery. wellbeing.

Mental Health Help 24/7

HOTLINE:

1-800-854-7771

