



NAMI MISSION: NAMI Sacramento provides mutual support, resources, advocacy, and education to the families, friends, and persons with mental illness to improve their general welfare and treatment.

July 23, 2010

As a result of recent actions by the County of Sacramento, NAMI Sacramento feels obliged to release a statement, and suggest recommendations on possible next steps to improve local mental health services. NAMI Sacramento is dedicated to improving the lives of those impacted by mental illness. We invite you to read the attached statement and hope you will support our recommendations.

Sincerely,

Board of Directors
NAMI Sacramento
www.namisacramento.org

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Sacramento County's Mental Health System is in crisis. Budget choices by the County have disrupted the lives of the mentally ill. The Mental Health Treatment Center Crisis Unit has been closed, flooding unprepared hospital emergency rooms and pushing many vulnerable people into life threatening situations in the community. Inpatient programs are overbooked. More contacts with law enforcement have resulted in threats to the safety of both the mental health clients and officers. The Mental Health Court has been shuttered, forcing more clients into jail rather than community treatment. Jail inmates with mental health problems are increasing, and, according to local press reports, there has been a jump in suicide attempts by the mentally ill. The system is lurching toward chaos.

The County has defined the budget crisis in a way that has foisted false choices upon the mentally ill and the public. It is now implementing a restructuring plan that disrupts services to the mentally ill because it has chosen to interpret County Charter Article 71J to protect public employees at the expense of those suffering from severe mental disabilities. The County budget plan guts the existing private contractor-based service system, while it saves the jobs of public employees and hikes their salaries. It is not cost-effective because salaries and benefits of public employees are two to three times more than those of private contractor employees are. If the County Counsel's opinion regarding Article 71J is rejected and public employees forgive salary raises, mental health clients might not be forced to seek care in unfamiliar settings.

The County admits that its plan has prompted fear and trepidation among mental health consumer clients. It will not only increase the cost of services, but we expect it also will overburden law enforcement. There will be costly hospitalizations, inappropriate incarceration of the mentally ill and increased suicide risk. The flawed plan violates the Mental Health Services Act (MHSA) because it was developed without the participation or support of consumers and family members. It was created behind closed doors and then imposed upon the community as a certainty. Public response came later and it was overwhelmingly negative. The plan has prompted lawsuits seeking to stop its implementation, and inquiries by the State Mental Health Department regarding its legality.

In response to opposition, the County has made minor modifications to its plan. Despite these minimal changes, the fundamental thrust of the County plan remains the same. This disruptive plan, along with the legal and administrative challenges raised by the community and the State, has created major uncertainties. These uncertainties threaten the basic infrastructure of the mental health system, which will only be magnified by likely future budget cuts. Moreover, the plan appears to contravene its own County Counsel's flawed opinion. It proposes to use private contracts even though the County Counsel says that public jobs must be protected before private contractors can be employed.

NAMI Sacramento Recommendations

NAMI Sacramento, the Sacramento Affiliate of the National Alliance on Mental Illness, represents family members of the mentally ill and consumers of mental health services. If the County's proposed restructure plan had been presented for approval or support by the Mental Health Services Act Steering Committee, we believe it would have been rejected as needlessly disruptive and not cost-effective. We support legal action to enjoin the County from implementing its flawed restructuring plan. We also recommend that:

1. The California Department of Mental Health and the Mental Health Services Oversight and Accountability Commission examine the process employed to develop the County Restructure Plan in light of MHSA requirements for community input. The MHSA requires that counties use a community driven process to develop plans for how to use MHSA funds. Instead the County developed a plan on its own and then told stakeholders they had no choice but to accept it.
2. The Board of Supervisors rescind its support for the proposed restructuring plan. The County Counsel's Opinion of Article 71J of the County Charter is disputed in a lawsuit and by the California Department of Mental Health, which holds that State law encouraging contracting takes precedence over the County Charter. NAMI Sacramento recommends the Board of Supervisors reject the County Counsel's interpretation, and instead treat it as a matter of policy and not law. We suggest a policy that favors cost-effective services provided by private contractors.
3. Public employee unions receiving pay increases agree to concessions that will make additional funds available for private sector contractor's services to the mentally ill. Such concessions are in the long run interest of public employees who will need public support to avoid future cutbacks in public employee jobs and benefits. These concessions will help avoid needless disruption of services to the mentally ill. The American Federation of State, County, and Municipal Employees Local 146 representing health workers have agreed to wage concession that will save almost \$2 million this fiscal year and next. Public employee unions representing those who serve the mentally ill are urged to consider actions that will make funds available for cost-effective services to the mentally ill provided by existing private contractors. Representatives of affected public employee unions may consider appearing before the Mental Health Board and the MHSA Steering Committee to discuss how their actions could help ameliorate the current fiscal crisis.
4. Hospitals confronted by mental health patients flooding their emergency rooms consider pooling their resources to fund added Psychiatric Health Facilities in the Community. One such facility has been established by Crestwood Behavioral Health. These small units can be located in various parts of the community. Such facilities, unlike the Mental Health Treatment Center, are eligible to receive federal Medicaid matching funds. It is further suggested that hospitals explore the extent to which private foundations such as the California Endowment might provide funds for such facilities.
5. The County maximize the use of federal funds available to support mental health services provided by Federal Qualified Health Centers (FQHC). Sacramento has several such agencies and their resources could be employed as part of the County plan for provision of mental health services.
6. The County place a high priority on utilizing MHSA funds to support training for law enforcement on how best to respond to problems presented by the mentally ill. Such a training effort can pay major dividends in preventing injury and even death to the mentally ill in crisis situations. This training is most effective when accompanied by community resources to respond to emergencies.
7. Family members, consumers, and the many private agencies serving mental health clients plan for how to respond to future budget stringency over the next several years, and develop creative approaches to involve the public in providing human and financial resources for mental health programs designed to promote wellness and recovery.