

# Alpine County Mental Health Board

February 18, 2021

*Special Meeting Minutes*

Via Zoom

MEMBERS PRESENT

Jessica Bennett, Chair  
Rita Lovell, Vice Chair  
Jane Sweeney  
Supervisor Irvin Jim

MEMBERS ABSENT

No absentees



Other Attendees:

Deb Goerlich, BHS Admin Asst. III (minutes)  
Gail St. James, BHS Director  
Nani Ellis, BHS Fiscal & Administrative Supervisor  
Katie Johnston, BHS Fiscal & Tech Specialist  
Briana Vallejo, Live Violence Free  
Amy Broadhurst, Ex. Director First 5

**1. Call to order regular meeting:**

The meeting was called to order at 12:07 p.m.

**2. Oral Communication - General Public Comment**

**This portion of the meeting is an opportunity for members of the public to address the Mental Health Board. No action can be taken on matters not listed on the agenda.**

Amy Broadhurst, First 5 Alpine commented – “WATER, A Superhero in the fight for Dental Health – free virtual parenting event on February 25 via zoom at 6pm”

**3. Consent Agenda**

Matters that are routine and non-controversial and are usually approved by a single majority vote without discussion. Items can be removed from the consent agenda to be discussed and considered separately.

**3.1 Request approval of regular meeting minutes on 1/28/2021**

**MOTION J. Sweeney/SECOND R. Lovell to approve the special meeting minutes as amended**

**AYES: J. Sweeney, R. Lovell, J. Bennett**

**NOES: NONE**

**MOTION CARRIED**

**4. New Business:**

**4.1 Discussion on the Mental Health Services Act (MHSA) contract by and between Alpine County Behavioral Health & Alpine Kids**

- The BHS Director reported that a letter from Alpine Kid’s had been distributed to the Board of Supervisors and Alpine Kids participants. In the letter, MHSA had been mentioned several times as a county agency

Approved as Submitted 4/22/21

that they had been contracted with. The BHS Director also reported that the Board of Supervisors had recently increased the level of insurance requirements for all contracts. BHS had been working with Alpine Kids to complete this piece of the contract. The Alpine Kid's Director and their governing board had elected to end the program.

**4.2** Discussion on the Assisted Outpatient Treatment (also known as Laura's Law) AB 1421- Gail St. James, BHS Director

- Dissemination of the History of AB1421. The BHS Director requested MHB members and the public email their comments to her once they have read the Bill, by the middle of March 2021. - [See attached Exhibit "A"](#)
- The MHB unanimously agreed to support Alpine County's decision of opting out of the Assisted Outpatient Treatment

**4.3** Discussion on the 2020-21 MHSA Plan Annual Update Stakeholder's Meeting presented on February 8, 2021 - Gail St. James, LMFT

- BHS Director reported the Stakeholder's meeting was well attended; BHS is in the process of collecting the data. The plan will be drafted and available for public comment by 3/22/21. The Public Hearing will be held on 4/22/21 during the MHB meeting, in which the MHB members will vote regarding approval and making the recommendation to the BOS for their approval at the next BOS meeting scheduled for 5/15/2021.

**5. Unfinished Business**

**5.1** Director Report - Gail St. James, LMFT or designee

- Nothing to report at this time.

**6. Board Member Reports:**

- A) Chair Bennett - thanked the members for being flexible with the Special Mental Health Board meeting today.
- B) Vice Chair Lovell - reported the NorthNet Library System's (NLS) is hosting a panel discussion on March 9, 2021 on **Mental Health Supports for Disaster Preparedness and Recovery**. Libraries have played a crucial role in community mental health, serving as a source of refuge, providing vital human connection, and linking patrons with essential resources. Vice Chair Lovell will be attending.
- C) Irvin Jim - BOS Liaison shared he has nothing to report at this, his first meeting.
- D) Jane Sweeney - MHB Member shared at the Stakeholder's meeting she had volunteered to be on the Alpine County Suicide Prevention committee. Through California Behavioral Health Local Committees & Boards (CALBHBC) she has enrolled in a class/training on guidelines for children with Emotional Disorders from dealing with COVID19 & the isolation. Member Sweeney is also signing up for the Suicide training that is being offered.

**Adjournment: 12:43 pm**

The next scheduled meeting will be held in March 25, 2021, the location to be determined.



Rita Lovell, Vice Chair  
Mental Health Advisory Board

## MHB Special Mtg – 2/18/21

### Item 4.2 “Exhibit A”

#### AOT (Assisted Outpatient Treatment): Laura’s Law

**History: AB1421, also known as Laura's Law, is a California state law that allows for court-ordered Assisted Outpatient Treatment (AOT).**

To qualify for the program, the person must have a serious mental illness plus a recent history of psychiatric hospitalizations, incarcerations or acts, threats or attempts of serious violent behavior towards self or others. The law was named after Laura Wilcox, a receptionist who was killed by a man who had refused psychiatric treatment. The measure passed the California Legislature in 2002 and was signed into law by Governor Gray Davis. The statute can only be used in counties that choose to enact outpatient commitment programs based on the measure. As of 2010, Nevada County has fully implemented the law and the California State Association of Counties chose Nevada County to receive its Challenge Award for implementing Laura's Law. Subsequently, in 2011, a National Association of Counties Achievement Award in Health was awarded to Nevada County for the Assisted Outpatient Treatment Program.

As defined by California Welfare and Institutions Code sections 5345-5349.5, Laura’s Law creates an AOT program that provides court-ordered treatment (not medication) for persons with severe mental illness who meet the following criteria:

- Must be eighteen years of age or older
- Is suffering from a mental illness
- Is unlikely to survive safely in the community without supervision, based on a clinical determination
- Has a history of non-compliance with treatment which has either:
  - a) Been a significant factor in his or her being in a hospital, prison or jail at least twice within the last thirty-six months; or
  - b) Resulted in one or more acts, attempts or threats of serious violent behavior toward self or others within the last forty-eight months
- Has been offered an opportunity to voluntarily participate in a treatment plan by the local mental health department but continue to fail to engage in treatment
- Has a substantially deteriorating condition
- Be likely to benefit from assisted outpatient treatment; and
- Participation in the assisted outpatient program is the least restrictive placement necessary to ensure the person's recovery and stability.

At the time Laura’s Law passed, it was an opt-in process and the local Board of Supervisors had to pass a resolution or act through the county budget process to establish the program. At minimum a county who agrees to implement Laura’s Law must have a community based mobile and highly trained team that use **high staff-client ratios of no more than 10 clients per team member**. The program must include family outreach support, supportive housing and/or housing assistance, and vocational rehabilitation. In addition, every 60 days, the Director of the AOT program shall file an affidavit affirming continued AOT treatment and report multiple data reports annually to the California Department of Health Care Service (DHCS). Also, no services must be reduced in order to

implement AOT under Laura's Law. At the present time, AOT is an opt-out process which must be in place by June 30, 2021.

### **Behavioral Health Services Department:**

Although AOT may be a support system for Behavioral Health in larger, and even mid-size counties, smaller counties face an issue due to lack of capacity, resources and additional funding. These reasons, including the following specific talking points, would either preclude or show lack of necessity for the adoption of Laura's Law in Alpine County:

- This program is redundant as services of housing / housing assistance is provided as needed within the realm of Full Service Partnership (FSP) funded under MHSA. An individual who meets criteria for AOT, often meets criteria for FSP services. The FSP programs in place are funded through MHSA, and are designed to do "whatever it takes" to assist people with a diagnosis in the level of Severely Mentally Ill (SMI), long term illness, provided the resources are available. These programs did not exist when Laura's Law was passed in 2002.
- An individual who meets criteria for a 72 hour hold for reasons of Danger to Self, Danger to Others, or Gravely Disabled, will be assessed for 5150 hold in a psychiatric unit. The capacity to psychiatrically hospitalize a patient for 72 hours due to lack of compliance of therapeutic treatment would be unavailable in this program as Alpine County does not have a psychiatric health facility or Crisis Residential Facility to house those patients not in compliance, nor would a facility contracted in another county accept this client without meeting criteria for 5150 hold.
- Some counties offer Specialized Mental Health or Behavioral Health Courts (BHC) which have been increased with good outcomes to reduce non-compliance and recidivism, as well as to improve behavior. The BHC supervises intensive treatment for those whose crime has been attributed to their mental illness. We currently do not have a BHC in Alpine County, however, we do work closely with the courts and counsel to monitor these behaviors.
- MHSA Housing under the FSP program provides emergency housing and supportive housing if a client is deemed eligible. Since Alpine County does not have county established low income housing, we utilize hotels in nearby areas. This requirement under AOT could eventually mandate that Alpine County take responsibility for county supported housing at some point.
- Referral to Vocational Rehabilitation Services as needed are already in place. Alpine County utilizes the Vocational Rehab department in South Lake Tahoe. Under AOT we may be asked to provide transportation to local community colleges and work sites to complete this process.

There are numerous other resources in larger counties, all of which show greater need and serve clients with existing programs and funding. Alpine County, of course, has few resources and works with other counties as needed for the few clients who meet criteria in this category.

## **Performance Outcomes**

Even though Laura's Law allows for the court to order involuntary outpatient services, it does not allow for involuntary medication. (This option falls under the Reis Hearings of the courts.) Failure to comply with an order of AOT alone may not be grounds for involuntary civil commitment or the finding that the person is in contempt of court. Since no civil or criminal penalties are incurred for refusing to participate, the law's power lies in the "black robe" effect of the judge being able to convince the person with a mental illness to accept treatment. Should an individual fail to participate in the court-ordered AOT, they may be held for a 72-hour involuntary stay in the hospital pursuant to WIC section 5150, but if the person does not meet the criteria for a 5150, there will be no mechanism to provide the 5150 assessment and they will be released.

The Behavioral Health programs have a stronger outcome when compared to successful Laura's Law programs. Per the DHCS Laura Law reports, in FY18-19, 13 counties served 227 individuals, with a decreased inpatient psychiatric hospitalization by 33%, and decreased homelessness of 30%, and decreased law enforcement contact of 43%. The majority of County run assisted outpatient treatment, though FSP programs show equal and higher success rates. Although Alpine County will have its own research, our numbers are so small that one new client, or one new incarceration, or one discharge skews the percentages. I'd like to use this example from San Bernardino with a large population as an example.

San Bernardino County, a larger county with many resources, operate a number of programs to assist clients with the following rates of success.

- Recovery Based Engagement Support Teams – increased involuntary outpatient treatment by 80%, and decreased psychiatric hospitalization by 42%.
- Forensic Integrated Mental Health Services – reduced jail stays by 86% and inpatient psychiatric hospitalization by 72%
- Community Crisis Response Teams – divert 51% of crisis calls received from unnecessary hospitalization
- Crisis Stabilization Units – Divert 95% of patients from inpatient psychiatric hospitals
- Assertive Community Treatment – promotes family and community involvement, and reduced inpatient psychiatric hospitalization by 45% and reduce incarceration by 90%.

**I would appreciate feedback from each of our integrated departments and how the adoption of Laura's Law would add to or take away from your work.**

**Please call or email me with any questions and I'll respond. My intent is to collect this data and formulate a presentation and recommendations for our Board of Supervisors who must make the ultimate decision.**

**Thank you,**

**Gail St.James, LMFT and BHS Director**

## Opposition to Laura's Law for Alpine County: Responses received

This report is based on the research by San Bernardino, as well as various discussions with County Behavioral Health Directors, and data collection from numerous departments in Alpine County.

I provided a copy of these statistics to each of the departments below, and have received their position on this program with reason as follows:

- CAO  
*As CAO I support staff's recommendation to opt out.*
- Public Health  
*I agree we need to opt out of the mandate. Alpine County Health Dept is too small and being open only 2 days per week makes compliance impossible.*  
Patience, Public Health NP  
  
*I agree with Patience.*  
Rick Johnson, Public Health, MD
- Sheriff's Office\*
- County Counsel \*
- Court \*
- Probation  
*"...your information further promotes the "one size fits all" theory does not always work, especially in a small county like Alpine with very limited housing options and services found in larger counties. I concur that Alpine County should "opt out" of this mandate and agree adequate services are being provided at the best of our ability."*
- Public Defender \*
- District Attorney  
*"In short, I agree with you. If we were to stay in, I think we would have to go big. Particularly, we need low cost housing. Without it, we get no stability potential. Small counties are of course challenged, but we have more. Most of our population is on the wrong side of Mountain ranges and against a state border. Even without the mountains, the contiguous counties have few resources. The state border means that resources in Nevada usually do not comply with California requirements. I am referring to DUI, domestic abuse and parenting programs. I would also observe that Barton often refuses to accept people tendered for evaluation and treatment under 5150. "*
- Mental Health Board