



NOTICE OF PUBLIC MEETING – County of Santa Cruz
MENTAL HEALTH ADVISORY BOARD
DECEMBER 16, 2021 ♦ 3:00 PM-5:00 PM
HEALTH SERVICES AGENCY

1400 EMELINE AVENUE, BLDG K, ROOM 207, SANTA CRUZ, CA 95060
THE PUBLIC MAY JOIN THE MEETING BY CALLING (916) 318-9542, CONFERENCE ID 198 606 85#

Xaloc Cabanes Chair 1 st District	Valerie Webb Member 2 nd District	Erika Miranda-Bartlett Co-Chair 3 rd District	Serg Kagno Secretary 4 th District	Jennifer Wells Kaupp Member 5 th District
Laura Chatham Member 1 st District	Catherine Willis Member 2 nd District	Hugh McCormick Member 3 rd District	Antonio Rivas Member 4 th District	Vacant 5 th District

Supervisor Greg Caput Board of Supervisor Member	Erik G. Riera Behavioral Health Director
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**IMPORTANT INFORMATION REGARDING PARTICIPATION IN THE
MENTAL HEALTH ADVISORY BOARD MEETING**

The public may attend the meeting at the Health Services Agency, 1400 Emeline Avenue, Room 207, Santa Cruz. All individuals attending the meeting at the Health Services Agency will be required to always maintain a distance of at least 6-feet from others. The use of face coverings is also required. Individuals interested in joining virtually may click on this link: [Click here to join the meeting](#) or may participate by telephone by calling (916) 318-9542, Conference ID 198 606 85#. All participants are muted upon entry to prevent echoing and minimize any unintended disruption of background sounds.

If you are a person with a special need, or if interpreting services (English/Spanish or sign language) are needed, please call 454-4611 (Hearing Impaired TDD/TTY: 711) at least 72 hours in advance of the meeting in order to make arrangements. Persons with disabilities may request a copy of the agenda in an alternative format.

Si usted es una persona con una discapacidad o necesita servicios de interpretación (inglés/español o Lenguaje de señas), por favor llame al (831) 454-4611 (Personas con Discapacidad Auditiva TDD/TTY: 711) con 72 horas de anticipación a la junta para hacer arreglos. Personas con discapacidades pueden pedir una copia de la agenda en una forma alternativa.



AGENDA

3:00 Regular Business

- a. Roll Call / Introductions
- b. Public Comment
(No action or discussion will be undertaken today on any item raised during this Public Comment period except that Mental Health Board Members may briefly respond to statements made or questions posed. Limited to 3 minutes each)
- c. Board Member Announcements
- d. *Approval of October 21, 2021 minutes**
- e. Secretary's Report

3:15 Standing Reports

- a. Board of Supervisors Report – Supervisor Greg Caput
- b. Behavioral Health Director's Report – Erik G. Riera, Behavioral Health Director
 1. Presentation: Overview of Children's Behavioral Health Services
Lisa Gutierrez-Wang, Children's Services Director
- c. Committees
 1. MHSA Advisory Committee
 2. Site Visit / Programs Ad Hoc Committee
 3. Budget Committee
 4. Community Engagement Committee
 5. Law Enforcement and Mental Health Ad Hoc Committee
- d. Patient's Rights Reports – George Carvalho

4:30 New Business / Future Agenda Items

- a. *Approve informational letter regarding Behavioral Health Programs** – Erika Miranda-Bartlett
- b. Letter of support for the Oversight Committee of the Sheriff's Office
- c. *2021 Data Notebook**
- d. Biennial Report 2021

5:00 Adjourn

*Italicized items with * indicate action items for board approval.*

MENTAL HEALTH ADVISORY BOARD RETREAT
JANUARY 14, 2022
HEALTH SERVICES AGENCY
1400 EMELINE AVE, BLDG K, ROOM 207
SANTA CRUZ, CA 95060
10:00AM – 3:00PM
TELEPHONE CALL-IN NUMBER (916) 318-9542
CONFERENCE ID # - TBA

NEXT REGULAR MENTAL HEALTH ADVISORY
BOARD MEETING IS ON:
JANUARY 20, 2022
HEALTH SERVICES AGENCY
1400 EMELINE AVE, BLDG K, ROOM 207
SANTA CRUZ, CA 95060
3:00PM – 5:00PM
TELEPHONE CALL-IN NUMBER (916) 318-9542
CONFERENCE ID # - TBA

MINUTES - DRAFT

MENTAL HEALTH ADVISORY BOARD

October 21, 2021

3:00 p.m. – 5:00 p.m.

Health Services Agency, 1400 Emeline Avenue, Room 207, Santa Cruz, CA 95060

Microsoft Teams Meeting (916) 318-9542, Conference ID 630 071 512#

Present: Antonio Rivas, Catherine Willis, Hugh McCormick, Jennifer Wells-Kaup, Laura Chatham, Serg Kagno, Valerie Webb, Xaloc Cabanes, Supervisor Greg Caput

Absent: Erika Miranda-Bartlett

1. Public Comments
 - No public comments.
2. Board Member Announcements
 - Survey for retreat – Board members should complete as soon as possible.
 - Chair Xaloc Cabanes received the Santa Cruz County Probation Department Auxiliary Staff of the Year Award.
3. Approved meeting minutes for September 16, 2021.
Motion by Antonio Rivas to approve September 16, 2021 MHAB minutes. Second by Serg Kagno.

AYES: Antonio Rivas, Catherine Willis, Hugh McCormick, Jennifer Wells-Kaup, Laura Chatham, Serg Kagno, Valerie Webb, Supervisor Greg Caput

ABSTAIN: Xaloc Cabanes

ABSENT: Erika Miranda-Bartlett

4. Secretary's Report
 - Ethics Training – no one is overdue.
 - Other trainings – all trainings taken by Board members should be reported to the Secretary for tracking purposes.
 - Subcommittee meeting information (dates and who attended) should be submitted to Secretary for tracking purposes.
5. Standing Board of Supervisors (BOS) Report, Supervisor Greg Caput
 - Public meeting announcement: Department of Pesticide Regulation is conducting a public webinar to collect input on the design and development of a statewide system to provide notification in advance of pesticide application. It will be held on November 2nd, 9am-11:30am in English and November 3rd, 5:30pm–8pm in Spanish. For more information, visit www.cdpr.ca.gov. This is a concern for people that have residence near farmland.
 - Vacancy on the MHAB in the 5th District – MHAB Member in the district will send notices out in San Lorenzo Valley.
 - Per the County Health Department, the MHAB can go back to in-person meetings. Make plans to meet back in-person in January.

6. Behavioral Health Director's Report, Erik Riera
 - The Director's Report is on AB 118, which establishes a pilot program called C.R.I.S.E.S. Community Response Initiative to Strengthen Emergency Systems.
[Click here to view the Behavioral Health Director's Report.](#)

7. Presentation: MHSa Innovation Proposal for 2022-2027
 - Karen Kern, Adult Services Director
 - Joey Crottogini, HPHP Director
 - Dr. Robert Ratner, Housing for Health Medical Director
 - Cassandra Eslami, Director of Community Engagement
 - Cassandra Eslami, Director of Community Engagement
 - The proposal for the MHSa Innovation Project is open for public comment starting today which will go for 30 days through November 20th. All the information in the presentation can also be found on the Internet, www.santacruzhealth.org/MHSa along with a link to public comment where public comment can be submitted online, in person, over the phone or via email. The innovation project stems from stakeholder engagement process where we learn more about the needs of our consumers. The plan is to launch this project in April 2022 and anticipate this project will go for 5 years through the end of fiscal year 26/27.
 - Karen Kern, Adult Services Director
 - Goal is to design a stronger system of care for those people experiencing homelessness or with housing insecurity and provide all the things that they need, making sure that services are wrapped around the person.
 - 26% of the people who are unsheltered identified as being severely mentally ill. With the 2020 Point in Time Count, there's evidence that it's self-report for people and does not reflect the entire population of unsheltered adults.
 - Our housing continuum is under resourced, so even where there are efforts to help support people get into housing and health services, the diversity of housing options is very limited.
 - The immediate purpose in this innovations project is increasing access to mental health services to underserved groups. The long-term purpose is about promoting interagency and community collaboration related to mental health services or supports or outcomes.
 - For the first 2 years, the primary funding stream for this project is going to be through the SAMHSA grant, with a little bit of MHSa, and then years 3 through 5 is going to be funded through MHSa. As this model is being built, we will be looking at CALAIM and Medi-Cal reform for opportunities that can be used to sustain it ongoing.
 - The immediate response starting in year one is case management, housing navigation, and peer support; Street Behavioral Health Medicine, which includes medication assisted therapy; harm reduction and self-directed model, and then intensive support until clients are established and engaged with a stable system of care. The whole goal is to outreach to people who are experiencing homelessness, determine what their needs are, start figuring out how to connect them to those services that are going to meet their needs, and then transition them into those services, so they have a more stable setting.
 - The program is focusing on the city of Santa Cruz and Watsonville as people experiencing homelessness were primarily in those two cities.
 - Street Medicine is one of the strategies where Behavioral Health is going to partner with HPHP to provide field-based services, shelter support where available and then also use Telehealth to connect people to services in clinics when they need something more than we're able to provide on a street.

- The program includes case management, peer support and direct psychiatric care. 100 people will be served annually, but for the first two years, 300 unduplicated people will be served.
 - The program will promote interagency case conferencing/ triage, so this model for example, will have a weekly huddle for any of the service providers that might be involved with the clients in this program, and use a universally accepted referral process and a Community Information Exchange (CIE) for data exchange.
- Joey Crottogini, Homeless Persons Health Project (HPPH) Director
 - HPPH is part of the Clinics Division of the Health Services Agency. The division has public health nurses and mental health client specialists that go out to do Street Medicine because people in general, regardless of homelessness status, might not want to go to a clinic, so the best way to reach out to them is to just meet them exactly where they're at, and it's low barrier harm reduction approach to providing high quality care. It has always been called outreach, but when you start attaching healthcare professionals and medical providers, it turns into what is called Street Medicine as we are adding behavioral health supports and services to a mobile van.
 - We have a 23-foot van which acts as the base for a lot of services. The van itself has an exam room inside so patients can be seen privately and do a number of procedures, including intakes for different types of behavioral health care services.
 - Within the Street Medicine team, MAT (Medication Assisted Treatment) is provided so people are screened for substance use disorder and alternative medications are provided to individuals to get off of opioids.
 - Goal is to have different staffing for the Street Medicine team within the Clinics division and attach a behavioral health component. If we're able to meet people where they're at instead of having them come to the clinic and go out and do the follow up work with them (the assessments, the intakes, the medication management), it is going to be a huge pathway for that individual to get high quality care, stability in their lives and hopefully access to other services like permanent supportive housing.
- Dr. Robert Ratner, Housing for Health Medical Director
 - The Housing for Health Division is part of the Human Services Department and is relatively a new division in the County. One of our responsibilities is to service staff to something called the Continuum of Care and is a term that comes from the federal government. The Housing and Urban Development Department requires communities to put together collective groups of people working on the issue of housing and homelessness to try to prevent people from losing their homes and helping people get back into housing. Our staff is responsible for trying to bring together those federal housing related programs and resources in a coordinated way, called Smart Path Coordinated Entry System.
 - The County is far below where we want to be in terms of shelter capacity due to funding and locations. Other interventions include Rapid Rehousing, where we give someone services and time limited subsidies to help them get back into housing. For a lot of people that we're serving with this grant, they're going to benefit from permanent supportive housing, ongoing housing subsidies and services for as long as people need it.
 - Discussions include ensuring that outreach teams have more direct access to shelter beds and more information about available shelter. The goal is to really partner with these programs, Behavioral Health and HPPH, so that when shelter beds become available, there's a way to make direct referrals, and there's better communication.
 - Housing for Health Division is continuing to partner with Behavioral Health to create new housing opportunities. Our division often gets some funding from the

state that's related to housing and addressing homelessness. We can create more recovery, resident's homes, more support housing opportunities.

- A lot of our housing providers are not as familiar with how to help people struggling with behavioral health, mental health substance use issues so having these teams to go out and provide, either physical or mental health or substance use services for people who are in a shelter is a huge benefit to the folks who run shelters. It also helps our shelter system be more open to taking people that often get rejected by traditional shelter providers to have these extra supports and education and training.
- We are the agency responsible for the homeless management information system, which is a database that we're required to manage under the Continuum of Care, tracking our efforts to help people move from experiencing homelessness to being back into a home as quickly as possible.

[Click here to view the MHSA Innovation Project Presentation.](#)

8. Standing Reports

- a. MHSA Advisory Committee (Members: Erika Miranda-Bartlett, Antonio Rivas)
 - No report.
- b. Site Visit Program Ad Hoc Committee – (Members: Serg Kagno, Hugh McCormick, Valerie Webb)
 - Last Patient's Rights Report included more detailed information. Working with Advocacy Inc. to do client satisfaction surveys.
- c. Budget Committee
 - Budget update as provided by BH Director: Funding is doing well. There are some increases in funding, particularly in MHSA funds. Some monies have been set aside for large projects such as the Adult Crisis Residential Program, and a grant that is going in the end of this month for a Children's Crisis Residential Program and moving the Children Crisis Stabilization Program, but there will be some additional funds to look at separate from those set aside. Several grants have been received totaling about \$8 million, in addition to another grant award from the CA Department of Public Health for suicide prevention. Total funding for suicide prevention work is up to \$1 million and as a result, in a position to implement our County suicide prevention plan.
- d. Community Engagement Committee – (Members: Valerie Webb, Catherine Willis, Laura Chatham)
 - Did not meet this month.
- e. Law Enforcement and Mental Health Ad Hoc Committee (Members: Hugh McCormick, Serg Kagno, Catherine Willis, Jennifer Wells Kaupp)
 - Met with Jeffrey Arlt and his wife about their interest and there's a group of people interested in MERTY type program. Looking into it and reading the National Council for Behavioral Health White Paper about how to start one, what to look for.

9. Patients' Rights Reports – by George Carvalho, Patients' Rights Advocate
- Davi Schill is a Patient's Rights Advocate for Advocacy, Inc. She has been with the agency for over 20 years and advocates for Santa Cruz County and San Benito County. San Benito County has a behavioral health unit, but no facilities. The advocates are at Telecare on a regular basis due to the hearings that are done there but split the time monitoring the different facilities throughout the County.
 - Clarification on Reise Hearings – they are medication capacity hearings. George Carvalho or Davi Schill represent individuals in those hearings as well as the certification review hearings. They advocate work with the individuals in the hearing and represent them.

10. New Business

- a. Consideration of youth, Marlize Velasco to become Member-At-Large
Motion by Serg Kagno for Marlize Velasco to become a Member-At-Large. Second by Antonio Rivas.

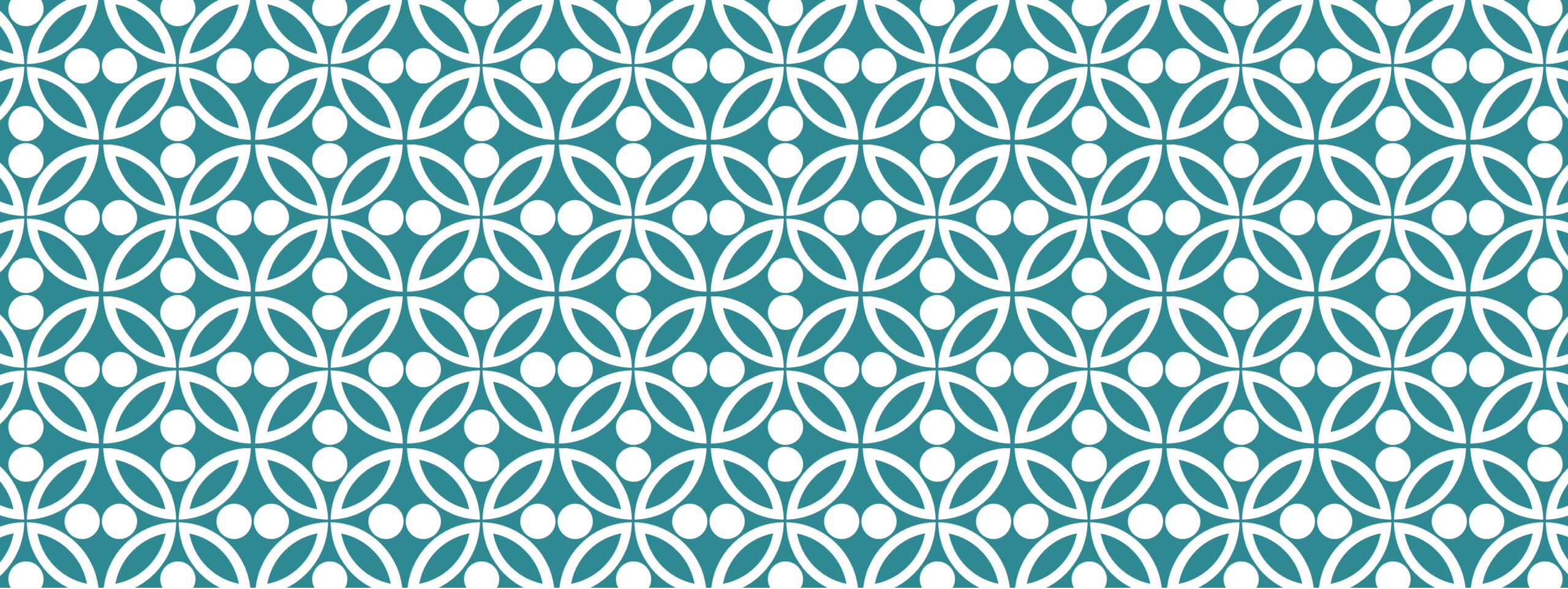
AYES: Antonio Rivas, Catherine Willis, Hugh McCormick, Jennifer Wells Kaupp, Laura Chatham, Serg Kagno, Valerie Webb, Xaloc Cabanes, Supervisor Caput

NAYS: 0

ABSENT: Erika Miranda-Bartlett

- b. Informational letter regarding Behavioral Health Programs – postponed to next meeting.
- c. Letter of support regarding Oversight Committee of Sheriff's Office – postponed to next meeting.
- d. Data Notebook – MHAB officers have met with BH Director to review and obtain some of the information. Draft of the Data Notebook will be shared at the next meeting in December for vote and submission.

Motion to adjourn made by Serg Kagno. Second by Laura Chatham. Meeting adjourned at 4:59 p.m.



CHILDREN'S BEHAVIORAL HEALTH

12/16/21

TODAY'S AGENDA

- **Mission and Vision**
- **Specialty Mental Health Services (SMHS)**
- **CBH Teams**
- **Child & Adolescent Needs and Strengths (CANS) Data**
- **CBH Trauma Informed Systems Committees**
- **2022 Initiatives**

CONDADO DEL SANTA CRUZ

Salud Mental y Tratamiento del Uso de Sustancias



POR NIÑOS Y ADULTOS



CBH Statement of Purpose: Children's Behavioral Health programs are intended to address the needs of children/youth in the Santa Cruz community who are struggling with mental health conditions that are interfering with their ability to keep themselves and others safe, regularly attend and participate in school, manage healthy relationships and thrive in their development.

CBH Mission Statement:

To provide strength-based, family-centered, integrated, accessible, culturally and linguistically appropriate behavioral health services to Santa Cruz County children/youth and their families/caregivers in order to promote health and resilience.

CBH Pillars:

1. Family-focused care
2. Integrated Care
3. Staff Wellness

SERVICES WE PROVIDE

Crisis Intervention

Psychosocial Assessment

Plan Development

Individual Therapy, Family Therapy, and Group therapy

Collateral contacts with family and non-family supports

Psychiatric Care

Case Management

Intensive Care Coordination (ICC)

Intensive Home-Based Services (IHBS)

Therapeutic Behavioral Services (TBS)

Family Partners

CBH TEAMS



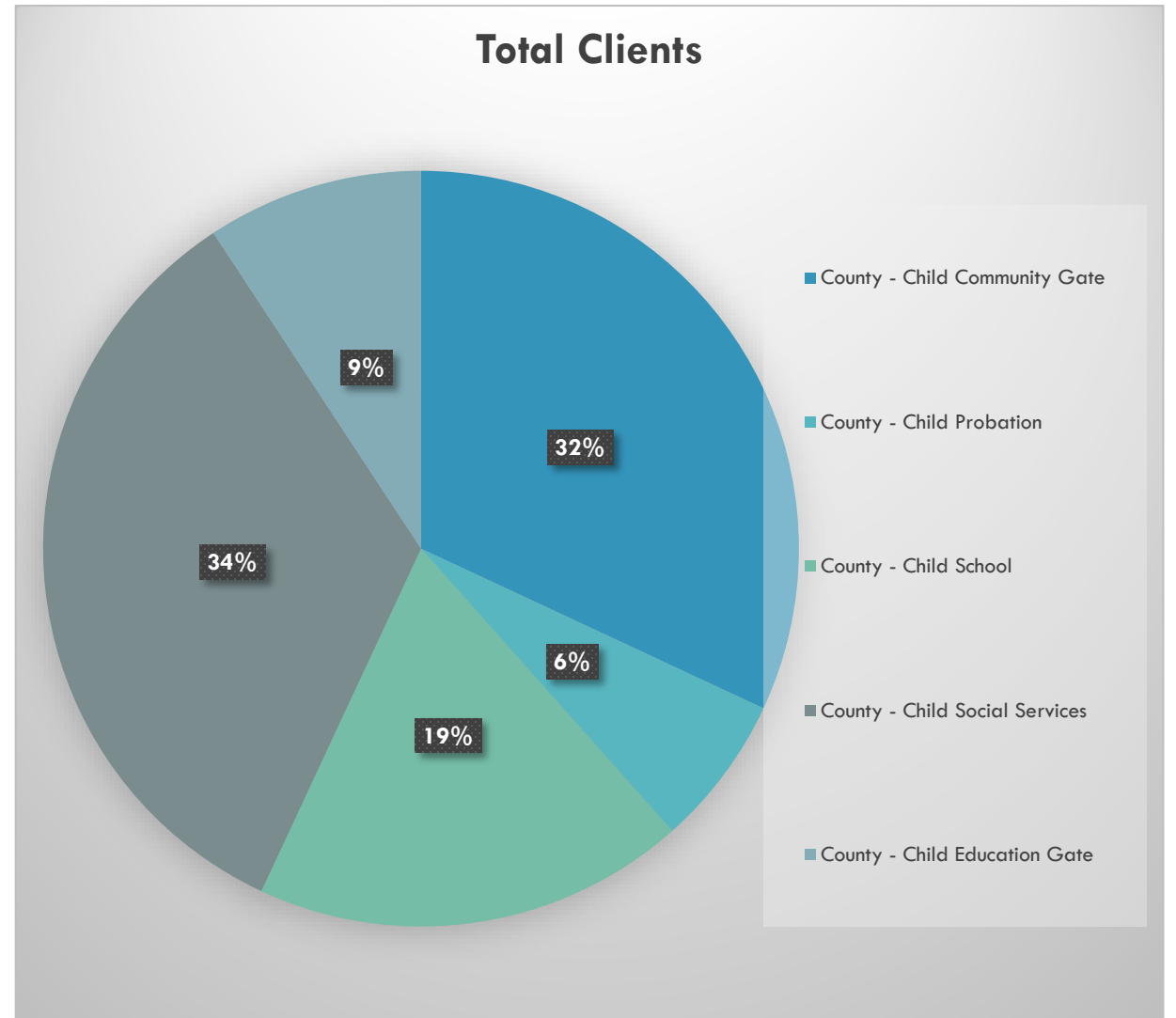
Community Gate

School (ERMHS)

Education/County Office of Education (COE)

Child Social Services (DFCS)

Juvenile Justice (Probation)



COMMUNITY GATE

SUPERVISORS: JOANNA MOODY & VINCE STROTH
CLINICIANS:11

Children's ACCESS, a part of the Community Gate team, provides phone navigation and referrals to those seeking Behavioral Health services for children and youth with Medi-Cal. By calling our county ACCESS line 800-952-2335, callers can request services.

CBH contracts with community-based organizations (CBOs) including Parents Center, Encompass Community Services, and Pajaro Valley Prevention and Student Assistance, Inc. (PVPSA).

CBH, or one of our Contract agencies, provides a clinical assessment and then determines if the youth meet our criteria.

If the youth's needs are determined to be at the Mild to Moderate level, they are referred to Beacon for services.

CONDADO DEL SANTA CRUZ

Salud Mental y Tratamiento del Uso de Sustancias

POR NIÑOS Y ADULTOS



SCHOOL (ERMHS)

SUPERVISOR: ROCKY ALLEMANDI

CLINICIANS: 4

CBH is contracted by the Pajaro Valley Unified School District (PVUSD) to provide Educationally Related Behavioral Health Services (ERMHS) to Special Education eligible students (K -12) with an Individualized Education Plan (IEP).

PVUSD is a single School District and Special Education Local Plan Area (SELPA). The SELPA oversees and provides educational services for district students with an IEP.

PVUSD refers students who have qualified for an IEP and need Behavioral Health services (ERMHS) to access their education. Outpatient services may be provided at any of the PVUSD elementary or middle school campuses or as part of a Special Day Class also known as the RISE academy.

EDUCATION/COE

SUPERVISOR: ROCKY ALLEMANDI
CLINICIANS: 2

Education Gate allows schools to directly refer Medical beneficiaries to our services, when the youth and families and the school based social-emotional counselors think these students need a higher level of care.

COE Gate is partnership between CBH and COE to provide needed Behavioral Health services to students who have not been successful in traditional public schools and attend Alternative Education sites.

COE staff make direct referrals of students who subsequently receive Behavioral Health services from our clinical team.

CONDADO DEL SANTA CRUZ

Salud Mental y Tratamiento del Uso de Sustancias

POR NIÑOS Y ADULTOS



CHILD SOCIAL SERVICES

SUPERVISORS: MARY BETH CURLEY & PAUL VITALI
CLINICIANS: 14

Provide clinical services to children and youth from birth to age 21 who are involved with the Human Services Department's Division of Family and Children's Services (DFCS).

Referrals to this team are made directly by FCS Social Workers.

Clinicians regularly facilitate and/or participate in Child and Family Team (CFT) meetings to build upon the strengths, values and goals of each child, youth, and family. The teaming process reflects the culture(s) and preferences of the child, youth and family.

JUVENILE JUSTICE

SUPERVISOR: NEERA BHATNAGAR
CLINICIANS:4

Eligible youth and families request our services through the CFT process, facilitated by Probation.

Probation officers may also directly refer youth and families.

Provide Behavioral Health services 7-days per week to youth who are detained at Juvenile Hall.

Provide Behavioral Health support at the Evening Center, a Detention Alternative intervention for Probation involved youth.

CONDADO DEL SANTA CRUZ

Salud Mental y Tratamiento del Uso de Sustancias

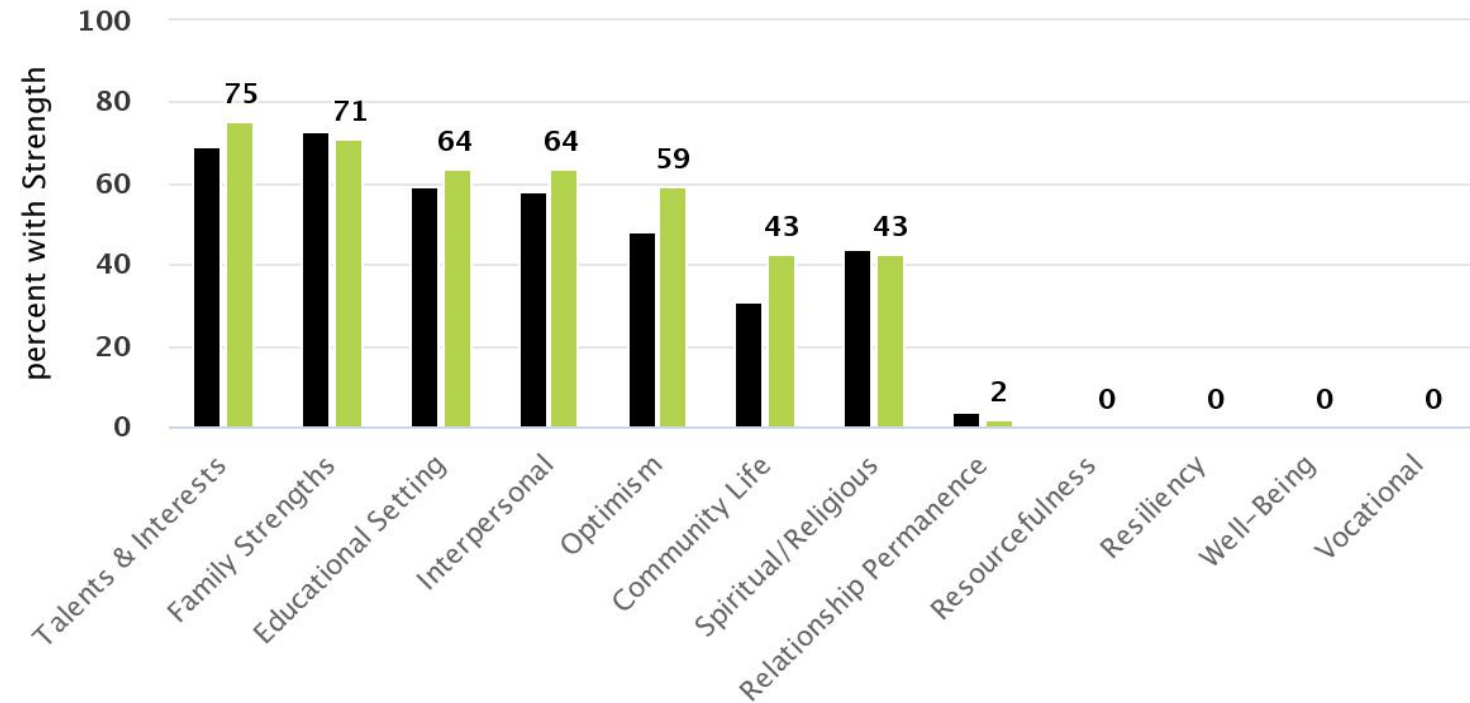
POR NIÑOS Y ADULTOS



CANS DATA

Strength Development Over Time

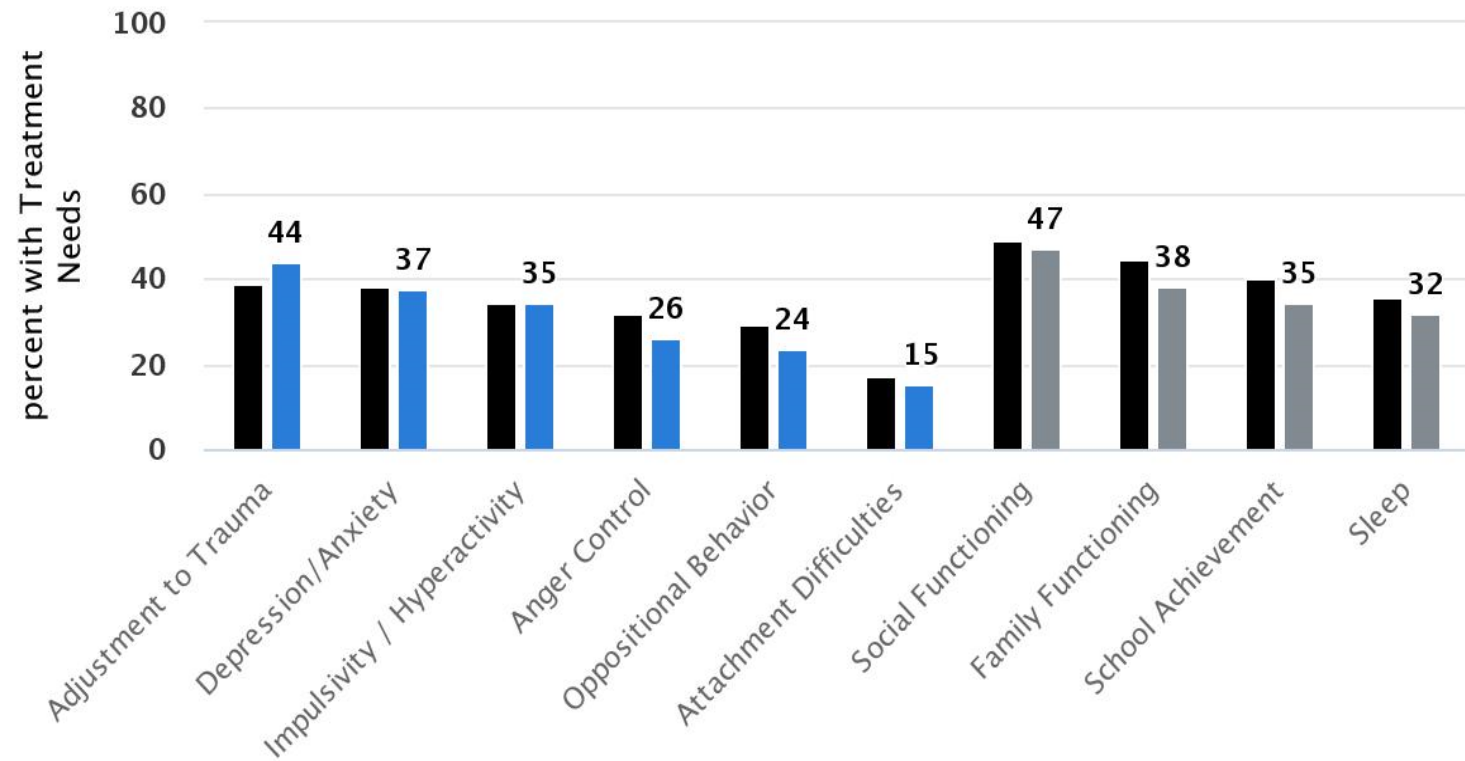
N = 110, For treatments with at least two assessments,
first one done between 03/14/2021 & 12/14/2021
Average time between measures: 5 months



CANS DATA

Key Intervention Needs Over Time

N = 110, For treatments with at least two assessments,
first one done between 03/14/2021 & 12/14/2021
Average time between measures: 5 months

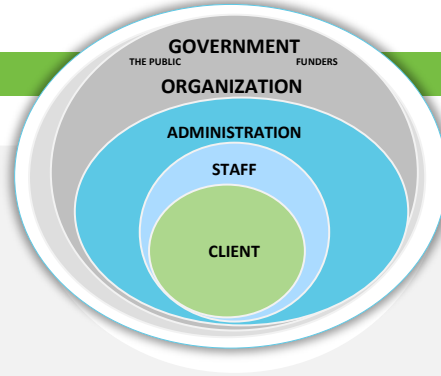


Trauma Informed Systems (TIS) Improvement Project



TRAUMA ORGANIZED

- Reactive
- Reliving/Retelling
- Avoiding/Numbing
- Fragmentation



TRAUMA INFORMED

- Shared Language
- Foundational Understanding of Trauma
- Understanding of the nature and impact of trauma



HEALING ORGANIZATION

- Reflective
- Collaborative
- Culture of learning
- Making meaning out of the past
- Growth and Prevention Oriented

TRAUMA INDUCING

TO

TRAUMA REDUCING

CBH TIS WORK

COMMITTEE NAME	MISSION STATEMENT
Cultural Humility Committee	In order to reduce cultural trauma and foster a safe and supportive work environment, we will increase awareness of and work towards dismantling the institutional and individual racism and oppression of marginalized groups in County Behavioral Health.
Safe and Welcoming Spaces Committee	To create and maintain safe and welcoming spaces for our clients and families, and empower client and family voice so when folks walk through our doors everyone is welcome, safe and heard, and feels a sense of belonging. The Safe and Welcoming Spaces committee's focus is on the improvement, evaluation, and re-design of our areas of contact with clients through a trauma informed and cultural humility lens.
The Love and Chocolate Committee	To shape the culture of Children's Behavioral Health to ensure our workplace is a supportive, inclusive, pleasant place to work where employees feel seen, heard, cared for and appreciated for the meaningful work they do daily in our community.
Clinical Growth Committee	To support and ensure Children's Behavioral Health's commitment to and implementation of best clinical practices by providing informed recommendations, supporting staff in continuing to learn clinically and having opportunities to do so.

CONDADO DEL SANTA CRUZ

Salud Mental y Tratamiento del Uso de Sustancias

POR NIÑOS Y ADULTOS



2022 INITIATIVES



Learning Communities



Preparing for CalAIM



Staff Sustainability and Wellness



Integrating data through a Trauma-Informed lens

QUESTIONS?

Thank you!

Lisa Gutiérrez Wang, PhD

lisa.gutierrezwang@santacruzcounty.us

November 2021

Patients' Rights Advocate's Report

Total unduplicated contacts: 17

Total number of complaints: 11

Community: 3

Facility: 8

Record (1349)

11/1/2021

Carried over from record 13459

10/8/2021 Returned call to client and left message that I am returning regarding his concern

10/8/2021 placed call and spoke with client. He stated that he is a resident of Valley convalescent in Watsonville and that staff had threatened him with forced medication. He also informed me that he is a conservatee of Santa Cruz County. Client declined to speak with long term Ombudsman stating that kindness is the best medicine.

10/22/2021 Received a call from client. The message was slurred and incoherent. Will return a call back to him on 10/25/21

10/25/2021 Placed return call to client (0919 hrs.)

11/1/2021 Client returned call to this writer. I am still unclear whether my client is reaching out for help. If so, the client will be urged to contact the LTC Ombudsman's office. (1014 hrs.)

11/8/2021 The client, over the weekend called to say that he appreciated the work that Davi and myself.

11/15/2021 his writer placed a return call to facility informed me that all the phones were being used by patients. (1335 hrs.)

11/16/2021 on this date this writer returned a call back to my client regarding the above named concerned (0940 hrs.). This writer spoke with my client at 1000 hrs. He does not want to remain on conservatorship. This writer asked whether he had spoken to his conservator. He informed me that he will be speaking with her today. My client will return a call back to this writer after the conversation with the conservator.

11/22/2021 At 1045 this writer placed a call to speak with my client. However, he just entered the interview room to speak with his treating psychiatrist.

11/23/2021 At 1005 on this date, this writer placed a call to my client. My client has given me permission to speak with his conservator in the hope that she may drop the conservatorship without going to court. Michaela phone: 454-4017 (831) is the conservator's name.

11/24/2021 Per the client's request and permission this writer placed a call to Michaela (phone: 454-4170) at 1004 hrs.

11/24/21. At 1035 hrs. this writer spoke with the conservator. She informed me that such as decisions would be based on the doctor's professional opinion as to whether the conservatorship should be dropped or remain in place.

This case will be carried forward to December 2021

Record (13500)

11/1/2021 This writer returned a call to a community member requesting a call back and offering to be of service if able.

11/3/2021 Placed call back to community member yesterday at 1730 hrs. The caller described herself as a head trauma survivor as well as diagnosed with diabetes. She reported that her personality had changed so drastically that neither her husband nor daughter wanted anything to do with her. Her husband may be suing for divorce. There is property involved. I urged her to consult an attorney through the lawyer's referral. This caller is not in imminent harm but may warrant a call to Adult Protective services. This writer will call community member and ascertain whether she was able to follow through.

11/8/2021 This writer placed a call to the community member at 1147 hours as a follow up to our previous conversation and left message

11/29/2021 At 1406 hrs. this writer placed a call to a community member: She is working with a member from the Lawyers referral service.

No further action is required from this writer.

Record (13507)

11/3/2021

"Hi my name is Doctor Kathleen Condon. I work with Sana Cruz County Health clinics, and I am not sure if you are the right person to talk to, but I just was hoping to troubleshoot about a patient situation. It is complicated. She is in an assisted living facility. She has a combination of mental health issues and physical health issues and some memory issues as well. Anyway. My phone is (as above) "

11/3/2021 this writer returned a call to Dr. Condon at 0956 hrs. This write left a message stating that I was responding to her call and will try to reach her tomorrow (11/04/21)

11/4/2021 I spoke with Dr. Condon, director of behavioral health services. She reiterated information contained in her voice mail. This writer is concerned about fiduciary abuse and urged her to contact the Long-Term Ombudsman. This writer will place a return call since she stated that she and Mr. Matzie, the Long-Term Ombudsman, are playing phone tag.

11/5/2021 This writer placed a call at 1540 hrs. requesting a call back to determine whether any further assistance on my part is required

11/17/2021 This writer placed a call to Dr. Condon to determine whether I can be of any further assistance to determine whether my referral to the LTC Ombudsman was appropriate.

No Further action required from this writer

Record (13508)

11/3/2021/ Called 10/14 at 1630 hrs. client called wanting to meet with me (Davi Schill) regarding his service animal taken from while in the hospital. We made an appointment to meet on 10/18/at 1400 at Telos. This writer called at noon to confirm the meeting; however, the client was not at the facility any longer. As of this date, no contact with client.

No Further action possible

Record (13509)

11/3/2021 Client called. She is a patient of Telecare PHF. She states that the staff at the telecare PHF do not know how to control her blood sugar and she is requesting a transfer to another facility. She also states that she has been attempting to contact this writer for a couple of days.

11/3/2021 this writer placed a call to my client at this time (1542hrs) call came in 1430 hrs. The number given is a number for Dominican hospital. This writer was informed that she would be returning from the Emergency Department, but as yet the staff does not know when

11/3/2021 This writer placed a return call back to the PHF at 1640 hrs. and was informed that client would return in the next 20 minutes. This writer will return a call tomorrow.

11/4/2021 My client sounds angry and frustrated. She wants to be transferred to another hospital. She states that she the staff is not measuring her blood sugars correctly (15 minutes before meals is when she should receive her insulin) She gives this writer to review the denial of rights for the use of forced medication and gives me permission to speak with Dr. Weinstein and Dr. Webber.

11/4/2021 Placed call to Dr. Weinstein. He was not available. This writer left an in-depth message with staff to be conveyed to Dr. Weinstein.

11/4/2021 This writer placed a call to client. (0927 hrs.). This writer was informed that she was sleeping

11/4/2021 This writer placed a call to Dr. Weinstein at 1047hr. Spoke with Dr. Weinstein. He stated that the client is receiving her insulins as clinically appropriate, and the client was sent to the ED because she had refused an insulin dose. I advocated for a transfer to a different facility. He stated that such a transfer would not be possible. Placed call Ms. Matthews to review documentation for the use of forced medication. This writer reviewed the denial of rights paperwork: Good Cause. Least restrictive interventions as well as the doctor's order. This writer determined that probable cause existed for the use of medication at that time.

11/4/2021 Placed call to client (1100 hrs.) but was unable to get through to her on facility phone line

11/4/2021 Received email response from Ms. Matthews:

"This client has Santa Cruz Medi-Cal so if there is bed availability within our county (Telecare) then this is the appropriate location for her. She is talking about having been sent out to other facilities from the CSP because the Santa Cruz PHF did not have a bed. A lateral transfer is appropriate in the case of clients with insurance in other counties or VA clients."

11/4/2021 This writer placed a call to the Medi-Cal Ombudsman phone 1888-452-8609. The ombudsman informed me that the only way my client can be transferred to another facility would be to drop the Medi-Cal in this county and have another hospital that takes straight Medi-Cal be willing to accept her...after she has been placed on a 5250 hold, after the 5250-certification review hearing

11/4/2021 Placed call to client (1452 hrs.) I spoke with client regarding the information provided by the Medi-Cal Ombudsman. My client stated that the information doesn't make any sense given that she was hospitalized outside of Santa Cruz, county in the past. I encouraged the client to contact the Medi-Cal Ombudsman directly, this writer will check in with the client tomorrow.

11/5/2021 Placed call to client at 14448 hrs. I spoke with the client this afternoon, she decided not to contact the Medi-Cal Ombudsman. She stated that she has a case coming up. We briefly discussed the upcoming Certification Review Hearing.

11/8/2021 The client placed a call to this writer on this date around 1030 requesting that I advocate for the 5250 hold to be dropped.

11/8/2021 This writer placed a call to the client at 1118 hrs. and left message for Dr. Weinstein to return a call back to this writer

11/8/2021 This writer placed a call to Dr. Weinstein at 1353 hrs.

11/9/2021 This writer placed a call to Dr. Weinstein on behalf of my client. Staff informed me to call back in about 10 minutes, i.e., 10.am.

11/9/2021 This writer placed a call to Dr. Weinstein at 1044 hrs. to advocate on behalf of the client. "The facility does not know how to monitor her blood sugars appropriately."

11/17/2021 This writer placed a call to my client at 1419 hrs. This writer spoke with my client. She has a writ hearing scheduled for tomorrow. She informed me that she and another female resident was threatened by a male peer. This male peer charged them. My client will follow up with staff and local law enforcement to press charges for a hate crime.

11/29/2021 This writer placed a call my client at 1415 hrs. Attempted to speak with client on this date at 1316 hrs. However, she has been discharged from the facility. This writer is aware of another number but was told not to use this number.

No further action is possible, until or unless contacted by my client.

Record (13513)

11/3/2021 Received email with voice message. Ms. Macintyre wants to speak to a Patient's Rights Advocate and is requesting a copy of the rights of individuals in mental health facilities.

11/3/2021 This writer returned call and left message stating that the caller is responding to her inquiry.

11/5/2021 This writer placed a call to the above number (831-818-8978) and left information about how to order booklets from the State office of Patients' Rights (1525 hrs.)

No further action unless contacted by community member

Record (13515)

11/8/2021 Returned client's call and left message stating that I will return a call back to her at 1530 hrs.

11/9/2021 This writer received a return call back from my client at 0630. She continues to want to talk to me. She needs to find the right time when there is a moment of quiet and peace. She will continue to try to reach me.

11/9/2021 My client spoke with me at length she is sounding desperate. She placed three calls to her case coordinator but without response. She is wanting a change of case coordinator (ken Bostin) This writer will place a call both to Mr. Echols and Eli Chance. I urged my client to give verbal consent to speak with me.

11/9/2021 This writer placed a call to Mr. Echols about the client's plight as well as the Supervisor of the older adult team, Ms. Steve Rezika.

11/9/2021 This writer placed a call to Encompass Quality Improve inquiring about the outcome of their investigation into my client's complaint of the El Dorado Center (1035 hrs.)

11/9/21 Judy returned a call back to my office. She was not able to give me any information about the investigation pending approval from the client.

11/29/202111/29/2021

"Hello, George this is (...). I got your message. I'm not sure what day you left it. I have been in the hospital since last Sunday and not a lot of opportunities to get my phone out or make calls or anything like that. So, I'm getting back to you today and I believe that I am going to be discharged from the hospital tomorrow and transported to a nursing home. I don't know which nursing home. It is going to be I won't know until tomorrow as soon as I know have information or once I get settled there. I will give you another call and let you know the details. Okay. I hope you get this message."

This case will be carried over to December 2021

Record (13516)

11/4/2021 Community member contacted this writer over concerns for her daughter in Sacramento County. This writer looked up the number for the Patients' Rights Advocate for Sacramento County and relayed this information to the caller. This writer will follow up with her tomorrow (11/5/21)

11/5/2021 This writer called this community member to determine whether the referral was sufficient. (1532 hrs.)

11/9/2021 Placed call to community member (1453 hrs.). This writer left a message on the community member's voice mail consisting of a request for a return call as well as informing her of my email address.

11/17/2021 This writer placed a call at 1434 hrs. to community members to ascertain the appropriateness of the referral to determine whether I can be of further service.

No further action required

Record (13517)

1/4/2021 Client spoke during my visit on this (around 1030 hrs.) She has requested that I speak with her conservator by her birthdate and Christmas. The name of her conservator is Christine Regimano (sp?) phone; 408-755-7661

11/4/2021 this writer placed a call to the conservator (1517 hrs.). This writer left a brief message stating the client's desire to be out of the facility by Christmas and/or her birthdate.

11/5/2021 This writer placed a call to the client's conservator at 1529 hrs. requesting a call back to my office.

11/9/2021 This writer placed a call to her conservator stating the client's concern.

11/9/2021 The client's conservator returned a call back to this writer. She informed me via voice mail that the client hasn't reached the level of treatment that she is eligible for discharge planning. (1450 hrs.)

11/15/2021 This writer spoke with the client at the facility this past Friday (11/12/21) and informed her of the Conservator's decision. This writer will follow up with the client and provide written material advising her of her rights as a conservatee. ((0955 hrs.)

11/17/2021 This writer placed a call to facility resident and to advise my client of her rights as a conservatee in the state of California. This writer spoke with my client at 1445 hrs. I stated that she has a right to contest her conservatorship in court. She stated that she does want to go to court to contest her conservatorship. My client is conserved in Santa Clara County

11/17/2021 This writer placed a call to the current LPS Public Defender and spoke to him about calendaring the client's LPS hearing.

This record will be carried over to December 20201

Record (13518)

11/4/2021 (1633) Client placed a call to this writer at 1630 hrs. She urgently requested that this writer Speak to Ms. Matthews, the interim facility administrator.

11/4/21 This writer did send off an email to Ms. Vanessa Matthews regarding the client's concern. Given that I sent out the email at 1645 hrs.' it seems doubtful that she had an opportunity to read it.

11/5/2021 This writer placed a call at 15503 hrs. to the client and informed her of the steps taken to advocate on her behalf.

No further action required

Record (13520)

See record # 13494 Carried over from October 2021

11/5/2021 This writer placed a call to my client informing her that the hearing does not save her write-ups and I left my phone for any further communication.

11/9/2021 This writer placed a call to my client at 1000 hrs. to inform her of my discussion with the hearing officer. The number appears to belong to another person. This writer will discontinue any attempts to reach out to my client

No further action possible unless contacted by my client

Record (13525)

11/8/2021 Received call to client. She wants to move into a new building but needs a letter from myself or an attorney. She has requested a call back from this writer. This writer left a message for the client at 1001 hrs. requesting more information about what the content of the letter should be.

11/9/2021 This writer placed a call to my client at 0957 hrs. to inquire about what the contents of the requested letter should be.

11/15/2021 Placed call to client at 0950 hrs. and left message requesting more information from client.

11/22/2021 At 1035 hrs. this writer placed a call to client to request more information about her complaint

11/29/2021 Placed last call to my client at 1422 hrs. This writer left a message for my client that this call would be my last call to her on this specific complaint

No further action possible until contacted by client

Previous record: (13476)

Record (13530)

11/9/2021 This writer placed a call to my client to speak about options and directions for a resolution for her complaint

11/22/2021 At 1033 hrs. this writer placed a call to the client to determine our next course of action.

This record will be carried over to December 2021

Record (13532)

11/9/2021 The community member is a Notary and is attempting to reach the Long-Term Care Ombudsman for clearance to work with a resident of Santa Cruz Acute Care. Center. This writer placed a message on the caller's voice mail with information on how to contact the Long-Term Care Ombudsman.

11/15/2021 This writer placed a call to the community member as a follow-up to referral. (0945 hrs.). Community member stated that he received my voice message.

No further action required

Record (13533)

11/12/2021 This writer returned a call to Becky on this date (133 hrs.) she stated that she is working with a client who is a resident of Santa Cruz County. Our mutual client has been transferred to Heritage oaks in Sacramento and discharged from this hospital without follow up services. This writer referred Becky to the Sacramento County Patients' Rights Advocate program and will follow up with her next week. The phone number is 1-916-333-3800

11/22/2021 Placed follow up call to Becky, a national care advisor. (1031 hrs.) and left a message inquiring about whether she needs any further assistance.

No further action required

Record (13544)

11/15/2021 This writer received a message transferred from the long-term care ombudsman program. The client requested to speak to someone about his civil rights which he states are violated.

11/15/2021 This writer returned a call at 1345 hrs. He stated that he doesn't feel safe at the facility because of another resident that the client described a gay rapist. The client has not brought his concern to his mental health because he is afraid of retaliation from the other residents. This writer did encourage my client to speak with his mental health worker, nonetheless. He informed me that he would speak with him. This writer will return a call back in a couple of days.

11/22/2021 At 1023 hrs. this writer placed a call to the resident's cell number (listed in the cell above). This writer spoke to the resident. He did not speak to staff because he "didn't want the situation to escalate. At this time Joey affirmed that he feels safe. I encouraged him to speak and or with staff if he starts to feel unsafe.

This record will be carried over to December 2021

Record (13560)

11/23/2021 This client placed 3 calls during the hearings. I am just able to respond to her. Client's phone is: (...). This writer placed a call to my client's phone, however, no one answered (1515 hours), (1541 hrs.), (1557 hrs.). This writer spoke with both staff and the client regarding her complaint that the staff did not provide transportation. According to staff they informed the client that staff could not provide transportation to Watsonville and that the client stated that she would provide transportation, however, it the staff's claim that the client did not alert them in time that she continued to need transportation to Watsonville. The client stated that staff deliberately targeted her and that that the staff should be arrested for this. I advised the client that she has a right to contact local law enforcement if the feels that she has been, or is in harm's way.

11/24/2021 Returned call to client on this date at 1510 hrs. I requested to speak with Adrianna, a staff person who would find out about making a doctor-to-doctor consult. However, currently (1512 hrs.) Adrianna went home for the evening as reported to me by another staff member.

My client left the following message at 1407 on this date.

" George. Hello, this is (...) again, I'm calling from (...) I'm going to be taking off because basically I'm calling you, I want to file a legal grievance written on and will be calling the Department of elder abuse adult and elder abuse by mental health counties, but I want these legal grievances to be documented that I'm having to leave here because of the targeted [...] abuse by staff and clients here, that I had to leave a license facility because of targeting and abuse against mentally disabled people staff members included. So, I'm hoping that you'll hold this documented cause I'm going to pursue this in a court of lawsuit. I'm going to win so thank you. Today is November 23rd, and it is 2:00 PM in the afternoon, yes, and I'm having to leave the facility was no place to go because of the situation. I want that all documented when I go. ..."

11/24/2021 This writer placed a call to client phone at 1517 hrs. (there was no answer at this time)

11/29/2021 My client contacted my office. She states that she has been targeted both by the El Dorado facility as well as by the Telecare facility. She states that the prescription for Adderall is for a medical need, and she has a right to be treated for this medical need. It is my client who informed me that she contacted Telecare to obtain her property. Someone, presumably staff informed her that she signed for her property and that it was placed in the taxi at her departure.

11/29/2021 This writer spoke with Ms. Laura Nadel, interim Administrator. She informed me that she will begin the process, but my client may have to stop by Telecare to fill out some paperwork describing the missing items.

This record will be carried over to December 2021

Abuse Reports: 3

Front Street: 1

7th Avenue Center: 2

Record number (13496)

11/1/2021

Narrative: "(...) molested me a day before she left. That is why why6 she left. I told her to leave. She touched my parts (as she pointed to her groin area)

"Can you tell the ladies not to go into my room at night they are touching my private parts. Place call Mercedes. She informed me that my client has a single room and usually sleeps off site with her boyfriend. Client also has a recent decrease in clozapine medication. I will attempt to reach out to her by phone as well as by other means (mail). Staff did not contact case coordinator at this writing (1000hrs) When they have done so this writer will be contacted."

11/5/2021 This writer received an additional SOC report on this date. The narrative reads as follows

"RP is a Salvation Army employee. RP stat that a homeless person by the name of (...) who lives in a tent told her that she woke up in the day room with no pants on. RP stated (...) is concerned that the client is being sexually abused at the facility. R"P further (...) stated he wasn't talking someone else about the incident when a Front Street employee overhears him. RP stated that the next day the employee quit."

11/5/2021 This writer spoke with Mercedes at 1000 hrs. She stated the person that lives in a tent is the boyfriend of client (...) and clarified who the name of the alleged victim. Mercedes further informed this writer that local law enforcement made several attempts to interview the alleged victim but that she continues to refuse to speak with anyone about this information

11/17/2021 This writer placed a call to the Front Street Facility at 1408 hrs. This writer spoke with the facility administrator, Karena Moreno. She will check with the resident to determine whether this resident will speak with the Patients' Rights Advocate, Ms. Davi Schill, Ms. Moreno will return a call back to my office no matter the outcome

11/29/2021 This writer at 1356 hrs. placed call to facility administrator, Karina Moreno. This writer was unable to communicate with the facility since the people on the extensions were not available

This case will be brought forward to December 2021

Record (13947)

11/1/2021

"Hey, George, this is Jose from seventh Avenue Center in Santa Cruz calling regarding two of our residents here getting into an altercation Client A. punching one of their peers, Client H in the face in response. Client A was hit in the back and the face and knocked unconscious to the floor. Client A. was taken to the E R if you have any further questions just call us back at 831-476-1700. Thank you."

11/3/2021 This writer met with both parties at the 7th Avenue Center on this date. Mr. Henry recalled the incident and stated that staff were available in a timely manner and a nursing assessment occurred. Mr. Henry was fixated on the idea that it was in the facility by mistake. This writer will follow up with Mr. Steven Burke regarding this question of identity. This writer met only very briefly with the alleged perpetrator. He didn't wish to speak to me at all and was extremely irritable. When he loomed over this

writer. I discontinued our interview. Later, I spoke with Mr. Burke about the client's irritability. Mr. Burke stated that the client is being held against his will to prevent him from working. This writer suggested that returning to the work force could be incorporated into the client's service plan. Mr. Burke stated that he will speak to the clinical director about this.

No further action required

Record (13550)

11/18/2021 Date and time of incident: 11178 hrs. at 1620 hrs.

Staff (Angel) witnessed resident A sitting on bed kicking resident B on the hand with the bottom of his right foot 1x. Staff provided intervention. Staff offered PRN. Gregory received PRN containing (Anti-Anxiety). Staff stayed with Resident A until calm. Staff notified nurse to assess. This resident received 1700 hrs. meds.

11/19/2020. This writer spoke with the alleged victim. He didn't voice any complaints or concerns about the way staff responded to the incident. This writer will place a call to the conservator on 11/22/21.

11/22/2021 At 1021 this writer placed a call to the conservator (phone: 1-408-755-7604) This writer was informed that Mr. Anderson is on vacation and will return a call back to this writer on 11/29/21.

This record will be carried over to December 2021

Record (13551)

“Narrative: Resident came out of room and reported to staff that the alleged perpetrator struck her 1x in face with closed fist, unprovoked. Staff spoke with the alleged perpetrator. She stated that she was responding to audio hallucination but is calm and refusing PRN at this time. Kathryn S placed on RR level 2 hold. Marisol moved from room 19C to 23B, and nurse notified to assess resident for injuries.”

11/19/21 This writer met with the alleged victim on this date. She appeared uninjured. She stated that staff responded appropriately and in a timely manner. This writer was unable to elicit only word responses from the resident. She had no questions for this writer

11/19/21/2020 This writer placed a call to the conservator of the alleged victim, Mr. Kyle Anderson. Mr. Anderson is on vacation through the 29th of November and will return a call back to my office when he returns on Monday, November 29th Phone: 1-408-755-7604

This record will be carried over to December 2021

******Nothing follows******

Respectfully submitted by George N. Carvalho, Patients' Rights Advocate, 12/15/21

ADVOCACY INC.
TELECARE CLIENT CERTIFICATION AND REISE HEARING/PATIENTS' RIGHTS
REPORT

November 2021
Second Quarter

1. TOTAL NUMBER CERTIFIED	24
2. TOTAL NUMBER OF HEARINGS	24
3. TOTAL NUMBER OF CONTESTED HEARINGS	15
4. NO CONTEST PROBABLE CAUSE	9
5. CONTESTED NO PROBABLE CAUSE	5
6. VOLUNTARY BEFORE CERTIFICATION HEARING	0
7. DISCHARGED BEFORE HEARING	0
8. WRITS	0
9. CONTESTED PROBABLE CAUSE	10
10. NON-REGULARLY SCHEDULED HEARINGS	0

**Ombudsman Program & Patient Advocate Program shared 0 clients in this month
(shared = skilled nursing resident (dementia) sent to behavioral health unit or mental health
client placed in skilled nursing facility)**

**The usual scheduled hearing days are Tuesdays and Fridays. Due to the pandemic and the shortage of bed availability throughout the state of California hearings can be scheduled throughout the week to accommodate legal requirements that hearings must occur no later than one week of hospitalization.*

The following is an account of activity November 1, 2021 through November, 2021 associated with providing representation to clients held at the Telecare (Santa Cruz Psychiatric Health Facility) who are facing Reise Hearings.

Total number of Riese petitions filed: 4
Total number of Riese Hearings conducted: 1
Total number of Riese Hearings lost: 1
Total number of Riese Hearings won: 0
Total number of Riese Hearings withdrawn: 3
Hours spent on Riese Hearings Conducted: 40
Hours spent on all Riese Hearings: 1 Hour