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# Report: Mental-health system in transition

## Consultant touts progress, but says central point of entry badly needed

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**New mental-health coalition created**

A new group of more than two dozen providers, advocacy groups and law-enforcement officials gathered to discuss the local mental-health situation at a meeting hosted by the Petaluma Health Care District last month. The group, Petaluma Interagency Mental Health Collaborative, discussed ways in which members can work together to provide better mental-health services in southern Sonoma County and nearby areas. "Our board of directors has been studying the delivery of mental-health services for several months now, and it became apparent to us that there was a lack of information regarding what kinds of services were being offered," said Daymon Doss, CEO of the health care district. "This meeting was a first step to sharing all the information, and we plan to build on that." "I thought (the meeting) was very rewarding for all of those in attendance, and ultimately for the patients who may receive enhanced treatment options now that their provider is aware of all that is available to them," added Dr. David Anderson, a member of the PHCD's board of directors. Group members come from county agencies, public and private non-profit groups and law-enforcement agencies that work with mental-health patients. The PHCD also devoted most of its May 29 board meeting to mental-health issues, and included a report from a consultant hired by the board, as well as presentations by representatives from Sonoma County Mental Health and the National Alliance on Mental Illness.

Southern Sonoma County is making progress as it transitions from a mental-health system based on a medical model to a more socially integrated model, but still needs to establish stronger communications between providers as well as a central point of entry for patients, said a consultant hired by the Petaluma Health Care District. Consultant

Sharon Jackson of Health Marketing & Management in Mill Valley emphasized these points during a PHCD Board of Directors meeting that focused almost exclusively on mental-health issues in the county. Jackson first explained the difference between a medical model, which assigns primary decision-making to providers, and a social model, which allows consumers to have the right and responsibility to make decisions regarding their care. She feels that Sonoma County has redesigned its mental-health services to become more in alignment with a social model. "The shift from medical-model mental-health services to social model represents a major change in the way services for people in mental distress are thought about, planned and delivered," she wrote in her report. "It accelerates integration of community services into systems and into the everyday lives of consumers; it accelerates the challenges of planning and working jointly with consumers, the county, law enforcement (and) social and medical services." Jackson praised southern Sonoma County's efforts to transition to a social model, but pointed to areas that need improvement. "The programs needed in southern Sonoma County are in place and providing high-quality services that support consumers in their efforts to maintain their personal lives, routines and relationships, she wrote. "Many of the elements and language of social model programs are included in the written programs materials. However, they are not always backed up by clear, prominently placed contact information. Families and consumers report great frustration in trying to access mental health services. "Paradoxically, the successes in community-based program implementation contribute to the access dilemma. The more fully the services are integrated and embedded within the community, the more important a single point of entry, supported by a centralized information system, becomes." She summarized her report with several recommendations for better mental-health services: establish a fully developed, one-stop shop and information and communication system with clear and widely disseminated information; continue to host and support the Petaluma Mental Health Collaborative; and support the National Alliance on Mental Illness and other organizations in working with police departments to reestablish the Mobil Cross Intervention Team and

other tools for working with mentally-ill offenders. Other recommendations are: provide resources to support additional family and peer-support classes; support opportunities for consumers to build networks in which being a consumer is normative and peers support one another; continue to educate the public; and keep following the development and implementation of 211 (a telephone service that connects people with appropriate community providers) in Sonoma County and explore possibilities for application to the single point-of-entry system. Initially, Jackson was hired by the district in 2007 to conduct a series of interviews with key informants to gain a better understanding of clinical resources available when psychiatric providers believe hospitalization is the optimal treatment for a person. She reported back to the board on Oct. 25, and subsequently began identifying ways to address problems noted in that report. (Contact Dan Johnson at [dan.johnson@arguscourier.com](mailto:dan.johnson@arguscourier.com))