

The Humboldt County Behavioral Health Board

SUMMARY

The 2015-2016 Humboldt County Civil Grand Jury (HCCGJ) received several complaints regarding the Mental Health Branch of the Department of Health and Human Services (DHHS). Those complaints conveyed dysfunctional work guidelines, distrustful working relationships, unresponsive upper management, mass resignations, and an unsupportive work environment. The complaints reflected the concerns of a broad base of community mental health advocates and Mental Health Branch staff. The number of complaints and the wide spectrum of those filing complaints instigated this HCCGJ investigation.

A single individual had served as department director since the formation of DHHS in 2001. With the announced retirement of that individual in 2015, the Humboldt County Board of Supervisors (BOS) decided to pursue a review of the Department of Health and Human Services, including the Mental Health Branch. The BOS contracted with W. Brown Creative Partners (WBCP) to develop a transition organizational assessment for DHHS. The completed study by WBCP, titled *Humboldt County Department of Health and Human Services Transition Organizational Assessment Study* (the Brown Assessment Study) was submitted to the BOS on September 22, 2015.

The Brown Assessment Study made a number of recommendations regarding the Department of Health and Human Services and the Mental Health Branch specifically. It did not, however, review or make recommendations regarding the Humboldt County Behavioral Health Board (BHB), a board that could have done much to mitigate the circumstances and atmosphere within the Mental Health Branch of DHHS. While many Humboldt County department heads and elected officials could have been more proactive in identifying problems within the Mental Health Branch, this role is specifically assigned to the BHB by the Bronzan-McCorquodale Act. The HCCGJ finds that the BHB failed to exercise this important role.

A review of the BHB actions revealed few recommendations, fewer comments on policies, little advice to governing bodies, and seldom reviewed or evaluated community mental health needs. The Minutes from the board's meetings reveal the BHB's time was primarily spent listening to reports from the DHHS and Mental Health Branch employees. The HCCGJ could find no evidence that mandated annual reports had been filed for several years with the BOS.

The Humboldt County Civil Grand Jury recommends that the BHB submit its past due annual reports to the BOS and thereafter submit, in a timely manner, its required written annual report. The HCCGJ recommends that the Humboldt County Behavioral Health Board undergo training to fully understand its duties and roles, and to proceed proactively to carry out the requirements of the Bronzan-McCorquodale Act.

1 BACKGROUND

2 Nearly one in six California adults have some mental health need, and approximately one in
3 twenty suffer from a serious mental illness that makes it difficult to carry out “major life
4 activities.” One out of every thirteen children in California suffer from a mental illness that
5 limits their participation in “major life activities.” These figures clearly indicate the need for
6 effective mental health programs in the State.

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8 **From State Mental Hospitals to Local Communities:** The early years of the mental health
9 system in California were characterized by state-run psychiatric hospitals. In the late 1950s, a
10 major change came to California mental health programs. State and mental health officials
11 believed that the mentally ill could be more effectively treated in their local communities.

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13 Deinstitutionalization was motivated by sincere beliefs. The envisioned success of
14 deinstitutionalization rested largely on the assumption that as hospitals closed, the funds
15 saved from their closures would be allocated to “follow the patient” into community mental
16 health resources. By the time Ronald Reagan assumed the governorship in 1967, California
17 had already eliminated more than half of its state mental hospital beds. That same year,
18 California passed the landmark Lanterman-Petris-Short (LPS) Act, which virtually abolished
19 involuntary hospitalization, except in extreme cases.

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21 Many California counties did not have systems in place to handle their increasing patient
22 populations. The State faced increasing budget pressures that caused reimbursement
23 difficulties. Although many attempts were made to solve the financial shortfalls, they were
24 largely unsuccessful. In 1972 and 1973, Governor Ronald Reagan vetoed two funding
25 provisions designed to reserve hospital closure savings for mental health; these vetoes
26 contributed to an ongoing pattern of funding shortfalls.

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28 In 1991, the California Legislature, facing a multi-billion dollar budget deficit, enacted a major
29 change in mental health funding, among other programs, with the passage of the Bronzan-
30 McCorquodale Act (Chapter 89, Statutes of 1991), referred to as “realignment.” This
31 realignment represented a new partnership between the State and the counties, which were
32 now assigned the delivery of mental health services.

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34 Provisions of this Act transferred financial responsibility for most of California’s mental health
35 care from the state to local governments, and provided counties with a dedicated revenue
36 source to pay for these changes. It also set new standards for county involvement in mental
37 health programs. Local mental health boards were given responsibility to:

- 38
39 · Oversee and monitor the local mental health system;
40 · Advocate for persons with serious mental illness; and
41 · Provide advice to the governing body (the Board of Supervisors).

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1 The Bronzan-McCorquodale Act established very specific guidelines for county mental health
2 boards. Section 5604.2 of the Act provides that county mental health boards shall:

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- 4 1. Review and evaluate the community's mental health needs, services, facilities, and
5 special problems.
- 6 2. Review any mental health services performance contracts entered into pursuant to
7 Section 5650, a part of the Act that establishes an annual report by the Board of Supervisors
8 to the State.
- 9 3. Advise the governing body and the local mental health director as to any aspect of the
10 local mental health program.
- 11 4. Review and approve the procedures used to ensure citizen and professional involvement
12 at all stages of the planning process.
- 13 5. Submit an annual report to the governing body on the needs and performance of the
14 county's mental health system.
- 15 6. Review and make recommendations on applicants for the appointment of a local director
16 of mental health services. The board shall be included in the selection process prior to the
17 vote of the governing body.
- 18 7. Review and comment on the county's performance outcome data and communicate its
19 findings to the California Health Planning Council.
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21 The Bronzan-McCorquodale Act does not limit the ability of the governing board to transfer
22 additional duties or authority to a mental health board. In addition, the Bronzan-McCorquodale
23 Act lays out specific provisions on the composition of the board, the size of the board, and the
24 development of its bylaws.

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26 Humboldt County established a Mental Health Advisory Board in 1970. Throughout the
27 1970s, 1980s, and 1990s, the local Mental Health Advisory Board was very active. It provided
28 community education through various projects and public forums, including participation in
29 health fairs, TV and radio shows. It was instrumental in the development of Sempervirens, the
30 County's inpatient psychiatric facility. More recently, the Mental Health Advisory Board
31 changed its name to the Behavioral Health Board (BHB) and now it also oversees the Alcohol
32 and Drug Abuse programs. Throughout most of its existence the Humboldt County Mental
33 Health Advisory Board was proactive and acted as a watchdog for community interests.

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35 During the HCCGJ investigation, the mental health advisory boards from other counties were
36 also reviewed. In contrast to Humboldt County's BHB, the HCCGJ found that the Mendocino
37 Mental Health Advisory Board was currently involved with mental health issues. The County
38 of Mendocino is presently engaged in an intense community discussion on how to structure
39 its mental health program and whether to establish an inpatient psychiatric hospital. The
40 Mendocino Mental Health Advisory Board is actively participating in the debate by holding
41 public hearings and testifying before the local board of supervisors.

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1 **METHODOLOGY**

2 The 2015-16 Humboldt County Civil Grand Jury:

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4 · Interviewed elected County officials and Branch Directors, Program Managers, Deputy
5 Directors and the past and present Directors of the Humboldt County DHHS.

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7 · Interviewed individuals who had filed complaints regarding the Mental Health Branch of
8 the Humboldt County DHHS.

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10 · Reviewed and studied the *Transition Organizational Assessment Study of the Humboldt*
11 *County DHHS*, the Bronzan-McCorquodale Act, and Minutes of past Humboldt County BHB
12 meetings.

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14 · Interviewed a member of the BHB and a member of the National Alliance on Mental Illness.

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16 · Visited Humboldt County's mental health hospital, Sempervirens.

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18 **DISCUSSION**

19 In 2014, the prior Director of Health and Human Services announced his retirement, to be
20 effective in December 2015. At the same time, the Humboldt County BOS contracted with W.
21 Brown Creative Partners (WBCP) to review the DHHS and develop a transition organizational
22 assessment. The BOS publicly stated that:

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24 This change in leadership is an opportune time to review the work effectively
25 being executed by the department, seek opportunities for improvement, and
26 identify the ideal candidate's competencies for the next leader of DHHS.

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28 The resulting document, entitled the *Humboldt County Department of Health and Human*
29 *Services Transition Organizational Assessment Study* (the Brown Assessment Study),
30 completed by WBCP and submitted to the Humboldt County BOS on September 22, 2015,
31 contains many pertinent recommendations.

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33 During its term, the 2015-2016 Humboldt County Civil Grand Jury received a number of
34 complaints regarding the Mental Health Branch of the Department of Health and Human
35 Services. Those complaints conveyed dysfunctional work guidelines, distrustful working
36 relationships, and an unsupportive work environment. The complaints filed reflected the
37 concerns of a broad base of community mental health advocates and Mental Health Branch
38 staff.

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40 Given the number and the content of the complaints received, and in the spirit of the Brown
41 Assessment Study, the Humboldt County Civil Grand Jury decided to focus on the Humboldt
42 County Mental Health Branch. The Brown Assessment Study did not, however, address one

1 crucial entity. The Humboldt County Civil Grand Jury believes the Humboldt County Behavioral
 2 Health Board (BHB) could and should have played a “watchdog” role in overseeing and
 3 monitoring the Humboldt County mental health system. The HCCGJ decided to focus its
 4 investigation on the BHB.

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6 **Structure of the Behavioral Health Board:** The Bronzan-McCorquodale Act, landmark
 7 legislation that sets guidelines for mental health programs in California, provides that every
 8 county mental health board shall:

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- 10 · Ensure 50% of the committee must be either a client or the family member of a client who
- 11 is receiving mental health care
- 12 · Reflect the ethnic diversity of the client population of the county
- 13 · Consist of 10 to 15 members but the BOS may increase the size of the board, when such
- 14 action is appropriate

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16 The current BHB has 15 members. However, the BHB has historically had difficulty retaining
 17 members. The BHB membership lacks the ethnic diversity required by statute. In an interview
 18 with a BHB member, it was stated that there is no formal process for soliciting members from
 19 the community. Currently, BHB members suggest individuals for Board membership, and then
 20 forward their recommendations to the BOS for appointment. There is a membership application
 21 on the County website, however, outreach beyond that is minimal.

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23 The duties of the BHB are substantial. The Humboldt County Civil Grand Jury’s investigation
 24 found that BHB members are overwhelmed due to the amount of work, particularly in light of the
 25 fact that all board members are volunteers. The Bronzan-McCorquodale Act does allow BHB to
 26 expand and increase the size of its membership. Doing so might be a viable first step in
 27 successfully completing its many important functions.

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29 **Activity of the Behavioral Health Board:** The Humboldt County Civil Grand Jury found that
 30 the volunteer Board members of the BHB are well-intentioned and well-versed on mental health
 31 issues. The BHB holds ten monthly meetings per year as provided by their Bylaws. However,
 32 the role of the board members at BHB meetings appears to have been limited to that of
 33 spectators, while the upper management of DHHS and the Mental Health Branch staff made
 34 numerous presentations. The only action items the HCCGJ ascertained from the previous year’s
 35 Minutes were housekeeping matters such as approval of the Minutes. There was rarely any
 36 discussion among Board members regarding the presentations made. The Board did not
 37 proactively engage in making recommendations, advise BOS, or evaluate procedures and
 38 programs.

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40 The Humboldt County Civil Grand Jury found no evidence that the BHB reviewed, made
 41 recommendations, or commented upon the Brown Assessment Study. Under the Bronzan-
 42 McCorquodale Act, the BHB is mandated to “review and evaluate the community’s mental
 43 health needs... and special problems.” Yet the Brown Assessment Study clearly described
 44 serious and “special problems” within the County’s mental health system.

1 Furthermore, even with the mass resignation of most of the mental health physicians in 2015,
 2 the BHB did nothing; they did not discuss the issue or take any action. Although the BHB is
 3 charged with advising the BOS about any aspect of the mental health program, the BOS never
 4 discussed this issue with the BHB. It was noted in the BHB's Minutes that new physicians had
 5 been hired to replace those who had resigned. HCCGJ interviews confirmed that there was no
 6 discussion of either the Brown Assessment Study or the mass resignation of physicians by the
 7 BHB.

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 9 However, the BHB members do recognize their mandated responsibilities and have
 10 discussed their shortcomings. At the annual BHB board retreat, held on February 21, 2015,
 11 the Minutes indicated that Board members knew that:

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 13 The Board's role as written in the current Bylaws is to advise the BOS and
 14 Mental Health Director. Another duty is to review facilities and provide input on
 15 needs in the community. There is also an annual report to the Board of
 16 Supervisors.

17
 18 BHB members also discussed options on how the BHB and its Committees could provide more
 19 input by:

- 20
 21 · Increasing Board meeting time to two hours
 22 · Meeting later in the day to increase public participation
 23 · Advertising the meeting on social media and using radio announcements
 24 Receiving written monthly reports from DHHS staff in advance, so they do not require as
 25 much time during the meetings
 26 · Connecting with people who need mental health services and how those people are being
 27 affected by these programs
 28 · Complying with the Brown Act for the Behavioral Health Board and Committee meetings
 29 · Providing input to the Behavioral Health Board so they can advise the Board of Supervisors
 30 and the community

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 32 This was reiterated at their March 2016 annual retreat when the BHB discussed how they could
 33 become more effective. Some of the suggestions included:

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 35 · Establish a Housing Committee
 36 · Prepare a report every month for the BOS Agenda
 37 · Develop at least two goals for each committee for the year
 38 · Involve the community
 39 · Increase BHB role and collaboration with other agencies in the community
 40 · Advocate for the mentally ill

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 42 The HCCGJ found that the BHB has identified many solutions to their failure to be more
 43 proactive, and encourages the BHB to implement the suggestions developed during their 2015
 44 and 2016 Board retreats.

1 **Training for the Behavioral Health Board:** There has not been a consistent comprehensive
2 training program for members of the BHB. One member reported that several years ago, before
3 many of the current members joined the Board, there had been some training focused on the
4 roles and responsibilities of membership. A source reported that attempts by the Board to
5 secure training from an outside agency had not been possible due to financial considerations.
6 One or two Board members have availed themselves of webinars in an attempt to keep current
7 with developments in the mental health field.

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9 Another option is to take advantage of free training offered by the California Institute for
10 Behavioral Health Solutions. This organization held a conference on April 2, 2016, entitled
11 “Local Mental Health Boards/Commissions: The Responsibility and Reality: How Does a
12 Mental Health Board Exercise Its Authority?” Not only was the seminar free, transportation
13 reimbursement was provided for one person per county. The HCCGJ could find no evidence
14 that a BHB member participated in this free training. The HCCGJ strongly urges the BHB to
15 take advantage of this free training in the future.

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17 **Behavioral Health Board Annual Report:** One of the provisions of the Bronzan-
18 McCorquodale Act requires that the BHB prepare and submit an annual written report on the
19 needs and performance of the County’s mental health system to the BOS. When the HCCGJ
20 requested information on the last completed reports, it was learned that reports were
21 submitted in 2012 and 2013. There is no evidence that the BHB submitted annual written
22 reports for 2014 or 2015 and there is no evidence that the BOS requested them.

23
24 **Relationship between the Humboldt County Board of Supervisors and the Behavioral**
25 **Health Board:** The Bronzan-McCorquodale Act clearly states that BHB members are
26 appointed by, and report to, the Board of Supervisors. Each term the BOS appoints one
27 Supervisor as an advisor to the Behavioral Health Board, with another Supervisor appointed
28 to serve as an alternate advisor. Yet the Humboldt County Civil Grand Jury’s investigation
29 revealed a continuing pattern of no formal communication between the BOS and BHB.

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31 The only evidence the HCCGJ could find of the BHB making a presentation to the BOS was
32 on April 5, 2016, when the Chair of the BHB along with the Mental Health Branch made a
33 presentation to the BOS regarding Laura’s Law. This law allows counties to permit court-
34 ordered assisted outpatient treatment for those with serious mental health issues. In addition,
35 the HCCGJ investigation found that the BOS did not seek the advice of their own advisory
36 board, i.e. BHB, regarding the Brown Assessment Study or the mass resignations of
37 physicians from the Mental Health Branch.

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1 FINDINGS

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- 3 **F1.** The Humboldt County Behavioral Health Board does not adequately serve the Mental
4 Health Branch of the Department of Health and Human Services, the Humboldt County
5 Board of Supervisors, nor the citizens of Humboldt County.
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- 7 **F2.** The Humboldt County Board of Supervisors provides little or no direction, specific goals,
8 or training to the Humboldt County Behavioral Health Board.
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- 10 **F3.** The Humboldt County Behavioral Health Board failed to submit written annual reports to
11 the Humboldt County Board of Supervisors for the years 2014 and 2015.
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- 13 **F4.** There is little evidence of communication between the Humboldt County Board of
14 Supervisors and the Humboldt County Behavioral Health Board.
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- 16 **F5.** The Humboldt County Board of Supervisors failed to include the Humboldt County
17 Behavioral Health Board in discussions regarding the County mental health system.
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- 19 **F6.** The Humboldt County Behavioral Health Board assumed little or no responsibility for
20 investigating issues of concern regarding the County's mental health system.
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- 22 **F7.** The Humboldt County Behavioral Health Board Minutes in the past year reflect no
23 formal actions taken to advocate for the mentally ill in Humboldt County.
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25 RECOMMENDATIONS

- 26 **R1.** The Humboldt County Civil Grand Jury recommends that the Humboldt County
27 Behavioral Health Board submit its past due annual reports to the Humboldt County
28 Board of Supervisors, and thereafter submit, in a timely manner, its required annual
29 reports. **F3**
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- 31 **R2.** The Humboldt County Civil Grand Jury recommends that the Humboldt County
32 Behavioral Health Board expand its membership, as allowed by State law, so it can
33 more proactively serve the interests of Humboldt County. **F1**
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- 35 **R3.** The Humboldt County Civil Grand Jury recommends that the Humboldt County
36 Behavioral Health Board study and then proceed to proactively carry out the
37 requirements of the Bronzan-McCorquodale Act. **F1, F3, F6, F7**
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- 39 **R4.** The Humboldt County Civil Grand Jury recommends that the Humboldt County Board of
40 Supervisors monitor the performance of the Behavioral Health Board by requiring
41 periodic reports throughout the year. **F1, F2, F3, F4, F5**
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- 1 **R5.** The Humboldt County Civil Grand Jury recommends that the Humboldt County Board of
 2 Supervisors support training programs to ensure that Board members are supported in
 3 meeting their responsibilities to the community and the mental health system. **F2**
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- 5 **R6.** The Humboldt County Civil Grand Jury recommends the Behavioral Health Board
 6 members explore and utilize online training, video-conferencing and webinars available
 7 to expand their knowledge. **F2**
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- 9 **R7.** The Humboldt County Civil Grand Jury recommends that the Humboldt County Board of
 10 Supervisors ensure that the Behavioral Health Board has sufficient resources and
 11 authority to fulfill their duties as required by the Bronzan-McCorquodale Act. **F1, F2, F4,**
 12 **F5, F6**
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14 **REQUEST FOR RESPONSES**

15 Pursuant to Penal Code section 933.05, the Humboldt County Civil Grand Jury requests
 16 responses as follows:

17 Humboldt County Board of Supervisors (**R1, R2, R4, R5, R7**)

18 Humboldt County Behavioral Health Board (**R1, R2, R3, R6, R7**)
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| Reports issued by the Grand Jury do not identify individuals interviewed. Penal Code section 929 requires that 21 reports of the Grand Jury not contain the name of any person or facts leading to the identity of any person who 22 provides information to the Grand Jury. |
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25 **BIBLIOGRAPHY**

26 "California Welfare and Institutions Sections 5600-5623.5 and 5650"

27 California Health Care Almanac: www.ccef.org/-/media

28 California Mental Health Directors: www.mhac.org/pdf/cmhda_history_mental_funding

29 Strobe, Gladys. *"Mental Health Citizens Advocacy Papers."*

30 <http://library.humboldt.edu/humco/holdings/StrobeAid.htm>

31 W. Brown Creative Partners, *"Humboldt County Department of Health and Human Services*
 32 *Transition Organizational Assessment Study," 2015*

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