

# Sacramento County Mental Health Board Adult System of Care (ASOC) Meeting

## MINUTES – IN PERSON MEETING HYBRID PARTICIPATION OPTION

Monday, July 1, 2024

6:00 PM – 7:30 PM

Members Present: Brad Lueth, Mallika Walsh, Laura Bemis, Melinda Avey

Members Absent: Patricia Wentzel

### Agenda Item

#### I. Welcome and Introductions

- Introductions
- Acknowledgement of [Conduct Agreement](#)
- Announcements by MHB ASOC Committee Members

Vice Chair Lueth commenced the meeting at 6:01pm, introductions were made and Conduct Agreement acknowledged.

No announcements were made.

#### II. Public Comments Relating to the Sacramento County Behavioral Health Services Adult System of Care – Items Not on Agenda

- No public comments were made.

#### III. Presentation on Psychiatric Advance Directives Implementation with Question and Answer from Committee Members

- Presentation by Andrea Cook (BHS) on the Psychiatric Advance Directives (PADs) implementation. PPT presentation is attached to the minutes.
- The PADs is translated into Spanish and posted on the BHS website: <https://dhs.saccounty.gov/BHS/Pages/BHS-Home.aspx>
- PADs is not an innovation itself, but the innovation comes from technology they are creating so that first responders and hospitals can communicate in real time if a crisis were to happen.
- MHSAs Steering Committee has opted out of investing in the innovation but tracking the findings.
- To date, there have been 15 presentations throughout BHS. Community Lunch & Learn later this month for individuals to learn more. Behavioral Health Peer Specialist Managers are offering ongoing training and Technical Assistance to BHS providers who would like more support on how they can best support their clients with creating a PAD.
- Presentation slides included PADs overview, benefits to consider when creating a PAD, appointment of an agent for healthcare, statement of individual mental health care instructions, and individual physical health care instructions.
- MHTC has agreed to accept these PADs and the PADs will be included in the Electronic Health Record (EHR). Copies of PADs would be provided to MHTC and health care agents.
- Andrea guided members to the BHS website (<https://dhs.saccounty.gov/BHS/Pages/BHS-Home.aspx>) and MHSAs – Peer Support Specialists webpage (<https://dhs.saccounty.gov/BHS/Pages/MHSA/Peer-Support-Specialists/Medi-Cal-Peer-Support-Specialists-Homepage.aspx>) where they can find the

posted PADs. The PADs has been translated into Spanish and BHS is making ongoing refinements, including adding the English translation for ease of reading. Goal is to have translations available for threshold languages.

- [PSYCHIATRIC ADVANCE DIRECTIVE \(saccounty.gov\)](https://saccounty.gov/psychiatric-advance-directive)
- [BHS-Sacramento-PAD-Español.pdf \(saccounty.gov\)](https://saccounty.gov/bhs-sacramento-pad-espanol.pdf)

#### Member Comments/Questions:

- Vice Chair Lueth:
  - Will service providers be introducing this to consumers?
    - Yes.
  - Will providers be trained to assist and support with filling out the PADs?
    - Yes, there have been over a dozen trainings working with county operated programs to train on the form. Our vision is for every Sacramento County resident have a PAD.
  - If a consumer is under conservatorship, could a PADs be done if a conservator is not available?
    - Andrea noted she is not an attorney. Whether or not an individual is conserved, a PAD is a powerful tool that tells the people around you what you need so you can have a meaningful recovery. Due to potential capacity issues or legalities, the PADs will be honored if individuals are receiving services in Sacramento County.
  - If an emergency situation occurs and the individual is placed on an involuntary hold, how does the PAD show up in their file?
    - The PAD will be in the EHR, which is part of our county system. A copy will also be given to MHTC, their health care agent and alternative health care agent. All individuals will have access to PADs, so it is important to select health care agents that are available and willing to be their voice and carry out the PADs.
  - In my experience, a family member has ended up in Woodland. How will their health care agent know to activate the PAD and notify everyone on that list?
    - The PADs will follow them to Woodland if the health care agent ensure they get it. It will be their responsibility to activate it.
- Member Bemis:
  - Do you only help Sac Co residents with this?
    - Yes. If someone comes in from another county and ends up in Sacramento County, we wouldn't help them fill it out. And it is best to do it when people are healthy. Recovery is a huge spectrum and if an individual is okay and they feel they would like to create a PAD, then we will help them. It is client defined; meet them where they are.
  - If an individual completes a PAD and they end up at the hospital or MHTC and it's not followed, what are the consequences of that?
    - MHTC will honor it. If the PAD is not being followed, it would be because there are capacity issues. Not everyone is going to get their wishes met. The more detailed and specific their PAD is, they will more likely have their preferences met.
  - Are you going to be training other peer specialists that are not part of the county?
    - The Lunch & Learn will be an opportunity for Peers to learn more about the PAD. The TA that managers are offering are to the providers, to provide support to individuals who are receiving services.
  - On the PAD it has the physical and behavioral sections. What if you already have the physical advance directive and you only need the behavioral?
    - Individuals only need to complete the sections that are relevant to them.
  - Does the PADs need to be notarized?
    - No, but you can have two witnesses sign it. Witnesses should not be healthcare providers.
  - You mentioned meds and putting in yes or no to different medications. If they're on medication and find that something changes and can no longer take medication and add it to PAD, do they have to get the whole section re-done and have it re-witnessed?
    - Yes, make a revision and share with healthcare agents and make sure everyone

has a copy and that it is updated in the EHR. Sign or initial and date the revised copy.

- If you have a healthcare directive in Sacramento and you end up in Santa Barbara and you have your health care agent or secondary healthcare agent supporting you, do they have to honor that PAD because it's not in Sacramento?
  - The PAD is a legal document and it should be honored nationwide. There aren't legal ramifications at this point and time. They're going to do their best to honor their wishes. But as far as any punitive repercussions, there are currently none.
- Can the primary physician be a psychiatrist?
  - Primary will be for physical health and mental health. Primary for mental health can be a psychiatrist.
- Do you think in the future there would be some kind of card that goes with their license or ID that says I have a PAD so they can carry it and if they're not able to even say their name and have a PAD? They have medical emergency bracelets.
  - I see more of a digital technology and people will have more access. Until it gets to the point where everyone is aware of it. If they are receiving services in Sacramento County, they will be looking for it.
- Member Walsh:
  - Thanked Andrea; it's a very good initiative. This allows for individuals who fall into involuntary situations get the support they need when we want to give medications urgently.
  - How does the process start with the PAD if someone gets 5150? Who informs the person who is placing them on a hold?
    - The healthcare agent is responsible for notifying and ensuring that everyone gets a shared copy.
  - Oftentimes a person is placed on an involuntary hold and the facility may not get timely information, there might be a delay. There may be some lapse of time and the individual has expressed their preferences, how do we execute the PADs?
    - This is not bulletproof, it is the healthcare agent's responsibility to make sure they have access. So they can take that information under advisement.
  - I see the sentiment behind it and empowering the individual but I also see the urgency for treatment and diffuse the crisis. The more leg work we do in advance, the more we're setting ourselves up for success. I support the effort.
  - Where did this movement start?
    - The attorney advocating for PADs wants to see this initiative take off nationwide. There is a website with more information: [NRC PAD | National Resource Center on Psychiatric Advance Directives \(nrc-pad.org\)](http://nrc-pad.org)
- Member Avey:
  - I really support this idea because I think it's empowering for people and it won't work 100% of the time, but it's a good start. I like the idea of the bracelet and emergency personnel would be alert to that.
- Members thanked Andrea for speaking with the group.

#### **IV. Second Public Comment Period on PAD Implementation**

- Vice Chair Leuth acknowledged the Board received two emails for public comment regarding PADs and regarding Prop 1. They are attached to the agenda. Read them at your leisure, it was written as public comment.

#### **V. Committee Discussion of Questions and Concerns to be Addressed at FSP Visits**

- Members discussed whether dates and times have been determined yet. Nothing has been set up yet.
- Members discussed questions they would like to ask the FSPs:
  - Talk about PADs and where they are in implementation.
  - Overall care they provide and the kinds of groups they offer. Are the groups onsite?
  - How do they run their FSP?

- How long do people stay?
- What is their screening process for moving people between levels?
- How many people drop out early? Are they at capacity? Help us to understand if there's a waiting list. How do they handle the waitlist? How do they prioritize people? What is the criteria?
- How many people are co-occurring? How many people meet the criteria?
- Members discussed any specific FSPs they'd like to visit.
  - The MHSA innovation criminal justice involved.
  - TAY FSP
  - We'd like a list of the FSP providers.
  - Member Bemis shared Psynergy has 4 or 5 locations. Psynergy is where people came from out of state hospitals. 80% of those clients are under conservatorship and they usually come into this program because there aren't other programs that can meet their needs.
- Members discussed whether they would be violating any confidentiality when they do the site visits? They may need to sign a confidentiality agreement.

## **VI. Adjournment**

- Next meeting will be on August 5, 2024 from 6:00pm-7:30pm
- Vice Chair Leuth adjourned the meeting at 7:15pm.

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# Psychiatric Advanced Directives (PADs)

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Andrea L. Crook, MS

Health Program Manager

Mental Health Services Act

# Agenda

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- Psychiatric Advance Directive
- Benefits
- Part I: Appointment of an Agent for Healthcare
- Part 2(a) Statement of Individual Mental Health Care Instructions
- Part 2(b) Individual Physical Health Care Instructions
- Meet the PADs team

# Psychiatric Advanced Directive

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A Psychiatric Advance Directive (PAD) is a legal document you create while you are well. This is your clients opportunity to write down how they want to be treated if they were to have a mental health emergency in the future. It gives individuals a voice when they are unwell and peace of mind when they are well. It does this by allowing individuals the opportunity to identify trusted individuals to make sure their wishes are followed if, in the unlikely event they are to have a mental health emergency.



# Benefits

## Benefits to consider when creating a PAD

**Clarify Treatment Preferences:** A PAD enables individuals to express their treatment preferences in advance. This can be crucial during times when they may lack the cognitive capacity to make decisions about their own care.

**Protection Against Unwanted Treatments:** By specifying their preferences, individuals can protect themselves from receiving treatments they do not want. This empowers them to maintain control over their care even during a crisis.

**Streamlined Communication:** A PAD provides clear instructions to healthcare providers, family members, and other involved parties. This helps streamline communication during emergencies, ensuring that everyone is aware of the individual's preferences.

**Enhanced Recovery:** When treatment aligns with an individual's preferences, it can enhance their recovery process. Having a PAD ensures that the care provided is consistent with their wishes, promoting better outcomes.

**Promotion of Autonomy:** A PAD allows individuals to assert their autonomy by expressing their desires for treatment. It ensures that their voice is heard, even when they are unable to communicate directly.



# Part I: Appointment of an Agent for Healthcare

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## Designation of a Health Care Agent

1. Designation of a Health Care Agent
2. Designation of an Alternative Health Care Agent
3. Authority Granted to their Agent
4. Their Choices as to a Court Appointed Conservator



\*\*Make Sure Your Client Gives Their Agent and Alternate Agent A Copy of ALL Sections of their PAD.

# Part 2(a) Statement of Individual Mental Health Care Instructions

- Who, in addition to their Health Care Agent Should be Notified Immediately of their Admission to a Psychiatric Facility?
- Their Choices of Treatment Facility and Choices for Alternatives to Hospitalization if 24 Hour Care is Deemed Medically Necessary for their Safety and Well being.
- Their Primary Physician who is to have the Primary Responsibility for their Mental Health Care
- Their Choices about primary Physicians Who Will Treat them if they are Hospitalized, if their Primary Physician is unavailable.
- Their Choices Regarding Methods for Avoiding Emergency Situations
- Their Choices Regarding Emergency Interventions
- Their Choices Regarding Routine Medications for Psychiatric Treatment
- Their Choices Regarding Emergency Psychiatric Medication
- Their Choices Regarding Electroconvulsive Therapy
- People Prohibited from Visiting Them
- Other Instructions About their Individualized Mental Health Care

# Part 2(b) Individual Physical Health Care Instructions

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- Their Primary Physician who is to Have Primary Responsibility for their Physical Health Care is:
- Statement of Desires, Special Provisions and Limitations
- Their Choices Regarding Experimental Studies and Drug Trials
- Their Instructions Regarding Life Sustaining Treatment
- Their Choices Regarding Contribution of Anatomical Gift
- Their Instructions Regarding Autopsy
- Their Choices Regarding Disposition of their Remains

# Final Reflections

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Remember that creating a psychiatric advance directive is a proactive step that can empower individuals to advocate for their own mental health care during challenging times.

People make PADs when they are feeling well and able to think clearly about what they want. PADs are used if the person is unable to make decisions during a mental health emergency.

For those who wish to complete their PAD electronically a fillable form is available.

All technical assistance and training requests may be directed to the Behavioral Health Peer Specialists Program Managers at [BHSPeerCertification@sacounty.gov](mailto:BHSPeerCertification@sacounty.gov).



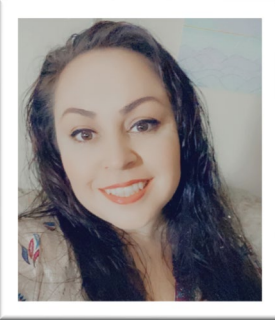


**“Occupying my mind with complex problems has been my best and most powerful and most reliable defense against mental illness.”**

**-Elyn Saks**

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# Meet the PADs team



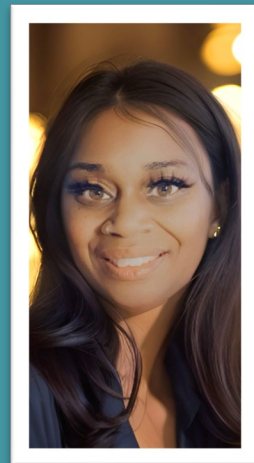
**Rexanne Irizarry**  
Behavioral Health Peer Specialist  
Program Manager

Liaison to Family, Parent, and  
Caregiver Peer Support Committee



**Eva De La Cruz**  
Behavioral Health Peer Specialist  
Program Manager

Liaison to Youth Peer Support  
Committee



**Tahirah Hudson**  
Behavioral Health Peer Specialist  
Program Manager

Liaison to Adult Peer Support  
Committee

# Thank you

 [BHSPeerCertification@saccounty.gov](mailto:BHSPeerCertification@saccounty.gov)

 [Medi-Cal Peer Support Specialists](#)