San Bernardino County Community Forum – July 29, 2014
Comments

- Excellent and informative session. Question and answer was excellent.

- I enjoyed the opportunity to share and learn about what is working in Mental Health throughout CA

- Is there a teaching person or group who can teach school counselors how to deal with persons with different types of mental issues? I found this meeting outstanding and informative. Thank you for allowing us to attend. (Pathways to Recovery, DBH)

- Information on programs from other counties to improve services in San Bernardino (African American Mental Health Coalition)

- Awesome! Dr. Monica is the best! You should hire her at the state level. A dynamic leader and has a very bright future!

- I enjoyed the wide range of information re: all DBH programs presented here today. Our DBH is a model of outreach. Great job!

- Thank you for the opportunity to obtain an update on the developments on mental health services within our region and a chance to voice our opinion and comment on current experiences within the topics listed. Great to hear about such wonderful work and awareness building that is increasing access for Mental Health. (SBCSS)

- Very great words of wisdom. I really enjoyed every one of the speakers today. I'm currently enrolled at Chaffey College (criminal science program) and I now have that much more interest in the mental health care in our communities. Thank you to all the speakers for this meeting. I really enjoyed it. I'll be back next year.
- Thank you so much for coming!

- Over the past three years have utilized the MHSA Housing trust funds of approx. $20 million dollars to leverage over $120 million dollars in rehab, acquisition, and new construction in affordable housing throughout the county. The MHSA Housing Trust has created a partnership/collaboration with other housing agencies (including the local Housing Authority) and numerous city officials. The benefit of the MHSA Housing Trust has created affordable permanent supportive housing for the following populations: TAY, Older Adults-Seniors and individuals/families with mental illness. With the creation of the numerous MHSA Housing projects, the County of San Bernardino DBH has been recognized by the National Association of Counties (NACO) with the national award for Housing and Health (wrap-around mental health services). I would like to see DHCS and CalHFA to continue to fund this program (housing), since we have created many new partnerships with County and city gov't, but with addressing the needs of our clients seeking permanent supportive housing. (San Bernardino DBH)

- Concerns RT Workforce education – can you help? The barriers at the state level for funding of nursing programs in the CSU is a problem to promoting diversity in RNs and thus additional psych nurse practitioners to help with shortages in MH care and in integrating physical and behavioral health care. This is pervasive for nursing and also other health care professionals at entry levels. There are also regulations with the BHN that are restricting learning placements. Mental Health regulations limit activities that can be done at various professional levels beyond licensure boundaries. (Susan McGee-Stehsel, CSUSB Nursing Faculty)

- Several comments – Does DBH have a 'direct connect' with 211? Either a staffer 24/7 or a call-forward direct to DBH crisis line? Any expansion of the Age Wise Program? Does the State plan to expand services through the counties? Do all counties have a complimentary in-home program? Can it or will it be expanded to dependent adults under age 62? In-home behavioral health for bed-bound younger hospice patients would be helpful – Hospice MSW's are limited in scope. Can it be provided for Medi-Cal patients? Mental Health Advanced Directive: many consumers have no knowledge of this right. Medical providers and legal/attorneys also need to know about this right/option.

- Must be transparent regarding "what are we doing to hire Psychiatrist in this county." Beef up the outpatient clinic, not create more programs without considering line staff that actually provide the services. There is lots of talk and lots of managers but no line staff workers. Without line staff, programs will not succeed. We need bilingual staff, we have over 67% Hispanic population coming in for services and they at times have to wait because we have limited Spanish speaking clinicians.

- I have had the opportunity to work within our County (San Bernardino) Behavioral Health Department. I am increasingly concerned about the lack of quality residential treatment facilities California has available. Many LPS conservatee's are placed out of their home counties due to the lack of appropriate placement options. I would like to see an increased amount of quality residential programs for our LPS conservatee's; in addition, I believe increased case management/individual counseling for the Conservatee population is needed. If polling our CA Counties you may find that most counties do not have locked residential services available in their counties, requiring them to place their conservatee's out of county. This makes case management challenging, as well as visiting with family. This practice results in further isolation for the Conservatee, which increases their life stressors. Case management services are likely reduced to 1x/month (if that frequent). Also, individual counseling services in these locked residential programs are the exception- not the rule. Programming at these facilities are also implemented by non-professionals. I would like a polling of LPS Conservatee's (past and present) to ask about how they perceive these programs (placements). I believe there is much insight to be gained by looking closely at the quality of the services our counties have to offer one of the most vulnerable populations of our mental health consumers. Thank you for your consideration.

- While I understand and respect privacy issues, it can be hazardous for family members to be left in the dark on what is happening with adults with mental illnesses. My mother wants to help and be involved with the progress of her husband but is not allowed since he prefers (that) she not. They have children in the home. He is very emotionally and mentally unstable. I am in constant fear of their safety. My mother has no idea about his diagnosis, prognosis, progress with medications, goals, etc. That seems unfair and dangerous to the entire family. On the contrary, she has a child with Autism and is very engaged with her daily living. Why can't she be given the same opportunity with her husband? It's what is best for everyone. Someone who doesn't speak for weeks at a time does not have the sound judgment to make the privacy decision. Where are the "rights" for my mom and her kids?

- San Bernardino County needs to provide psychiatric and therapy services for post-partum and other mental health issues related to pregnancy, including a reproductive psychiatrist. Doctors fear prescribing medication to pregnant and breastfeeding women and need education on this matter. Someone needs to change the definition of criminally insane so psychotic women who kill their children have a chance to not be convicted of murder but be not guilty by reason of insanity. (Inland Empire Perinatal Mental Health Collaborative)

- There needs to be more focus on prevention by expanding grief and loss support for children/families – for regular grief experiences including death, incarceration, divorce, foster placement. Currently the focus continues to be directed more at the severe mental health issues and does not address grief/loss issues before they develop into more severe mental health conditions. Our agency is interested in partnering in providing education, information and resources regarding grief processing for children, families and adults. (The Stephen Center)

- I am very concerned about the quality of vocational rehab services provided by the Department of Rehabilitation. For those consumers who are not interested in entering the mental health field, the services offered are poor and inadequate. The DOR has been meeting regularly with the goal of providing better services. This group of people are not publicizing their progress – if any. There are many proven best practices that can advance the employment of consumers but DOR has not adopted these best practices. Why? I believe that Recovery for many includes employment.

- Respectively, what are the challenges in the city of San Bernardino and its citizens? I often read-listen that violence/ death issues seem to dominate the city's concerns? Please provide some positive message in this regard. Thank you.