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## Survey assesses mental health system

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Although Sonoma County has or soon will have all the major elements of a creative, effective system of acute mental health-care services, stake holders are not engaged in the planning for new services and are confused about what is available, skeptical about the future and fearful for their clients.

That's what a mental health consultant told Petaluma Health Care District board members at a recent meeting. "Stake holders and the public need to be educated about the services that are available, and how they can be accessed," said mental health consultant Sharon Jackson of Health Marketing & Management in Mill Valley, as she made her presentation. "And referrals for psychiatric acute care services need to be routed through a center." As a result of the survey, a series of presentations on local mental health care services and needs soon will be presented to members of the Petaluma Health Care District board.

"We probably will have the presentations made to the full board, and the health promotion committee will be looking at what the board's role is to educate the public about these issues," said Daymon Doss, CEO of the health care district.

Jackson was hired by board members to conduct a series of interviews with selected key informants to gain a better understanding of the clinical resources available when psychiatric providers believe hospitalization is the optimal treatment for a person.

The Petaluma Health Care District Board requested the interviews partially to discover the impact closing of over 75 percent of the Sonoma County's 68 psychiatric beds in June 2007 has had on people who need hospitalization under Section 5150 of California's Welfare and Institutions Code. This code stipulates that a qualified officer or clinician can involuntarily confine a person who is gravely disabled or deemed a danger to himself, herself and/or others.

Interviews were conducted with representatives of the Sonoma County Department of Health Services, Department of Mental Health Services, Petaluma Police Department, St. Joseph's Health System, Petaluma Valley Hospital, Petaluma Peoples Services Center, Petaluma Health Center, Petaluma Health Care District and two psychiatrists in private practice.

"I was most impressed that every single person I interviewed was very candid and positive," Jackson said. "Every person's attitude was, 'We're all in this financial boat together.' I didn't see the kind of hostility and finger-pointing that I've found in every other situation I've studied.

"But they had a lot of fear and frustration."

Jackson reported that for psychiatric care, Sonoma County has available in Santa Rosa 16 acute-care hospital beds; eight emergency-services beds, with a hold of up to 23 hours for assessment and stabilization; and eight crisis residential beds, which can be used for up to eight days for assessment, stabilization and treatment. Also, funds are available to establish a psychiatric health facility with 16 beds that could serve as an intermediate-care residential program for longer-term stays and treatment, but a site for the facility has not been found.

She found that just as before the number of beds were reduced, in Sonoma County roughly 11 to 12 people now are in psychiatric facilities each day, and 80 percent of them are admitted to county facilities.

Sonoma County does not have any acute care psychiatric services for adolescents or children, so they are sent out of the county for treatment.

Doss had mixed feelings about the results of the survey.

"When we asked Sharon to do this study, I thought that she might find far more chaos than she discovered," he said. "It's clear to me that we have the bones of a system, but maybe it hasn't been communicated very well. We need to educate people about how the system works and what providers are available."

Board member David Anderson, a psychiatrist, emphasized the importance of addressing the needs of mentally ill people and filling current gaps in the system.

"If we don't do so, we're viewing these people as second- or third-class individuals, and their problems as something that 'happens to someone else,'" he said.

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