MENTAL HEALTH SERVICES FOR ADULTS IN LANE COUNTY

INTRODUCTION

At the Lane County League's annual meeting in 2015 members voted to update the language of the Mental Health Services for Adults in Lane County position. The adopted scope of work directed the committee to consult with a mental health professional to identify outdated terminology in the position and develop appropriate revised language. The committee met with Jose Soto, Executive Director of National Alliance on Mental Illness (NAMI) in Lane County for that purpose. The revised language, which is included with this everymember material on page 6, is proposed for consensus adoption. The scope of work that was adopted also provided that if the review of the position identified substantive issues that should be restudied or updated, a proposal for such research should be presented to members for consideration.

The scope of this report:

- Update the language of our local position for mental health services for adults in Lane County
- Present an overview of what support services are available in Lane County for individuals and their families seeking addiction or mental health services
- Present strengths and weaknesses of current mental health services in Lane County

LANE COUNTY SERVICES

Lane County Health and Human Services (LCHHS) staff prepared a community mental health and addictions biennial implementation plan in 2012 as directed by the Oregon Health Authority. The process, from the community needs assessment through the identification and description of the priority areas, is intended to guide efforts to better support and serve individuals throughout Lane County who seek addiction and/or mental health services. The needs assessment results will be integrated into the broader Community Health Needs Assessment, and the priorities and strategies will be aligned with similar efforts identified in the Community Health Improvement Plan.

Lane County's current behavioral health system includes services and supports offered by both Lane County Health and Human Services as well as local, not-for-profit organizations. Referencing the Institute of Medicine Model as a framework for ensuring the full continuum of services are supported, a summary of the current system is discussed below.

Mental health promotion, suicide prevention, substance abuse prevention and problem gambling prevention are coordinated through the LCHHS Public Health Prevention Program. In addition to these promotion and prevention services, Lane County works closely with a wide range of not-for-profit organizations, schools, research organizations, the local Coordinated Care Organization (CCO) and others to deliver evidence-based initiatives across all disciplines and the spectrum of health promotion and prevention.

Mental health treatment occurs in a variety of locations and delivery systems. LCHHS provides services as well as contracts with local not-for-profit behavioral health providers to offer a variety of mental health treatments. Most behavioral health services are provided in the Eugene/Springfield area with

limited services provided in the larger rural communities. Long term mental health care is provided in a variety of locations, including local residential facilities, group homes and foster homes. Lane County Behavioral Health, (LCBH), a division of Lane County HHS, provides adult, child, adolescent and family assessment and services intended to improve mental health and support overall function. Available outpatient services include case management, individual and group therapy, family support and psychiatric medication management. Primary care is co-located, and mental health nursing care coordination is available to support an integrated approach to improved functioning because physical and mental health concerns often overlap. LCBH staff provides oversight of Lane County's residential and foster homes and evaluates individuals for access to services on request for individuals living in these houses.

Substance abuse treatment for both youth and adults is primarily provided by local not-for-profit organizations. LCHHS contracts for many of these services, and many are provided through contract with Trillium Community Health Plans CCO. LCBH provides Methadone Maintenance for adults with opioid dependence or addiction. Although the county offers some continuum of treatment services, many are quite limited. Similar to mental health services, most alcohol and drug treatment services are located within the Eugene/Springfield area.

Problem gambling services in Lane County are provided by two entities: Emergence Gambling Treatment Program (treatment) and Lane County Public Health Prevention Program (LCPHPP) (prevention). Emergence, which provides free and confidential help for problem gamblers and their loved ones, also operates the statewide gambling help line, 1-877-MY-LIMIT.

Mental health promotion means efforts to enhance individuals' abilities to strengthen their ability to cope with adversity and to achieve developmentally appropriate tasks (developmental competence) and a positive sense of self-esteem, mastery, well-being, and social inclusion. There can be overlap between promotion and prevention efforts, depending on the population served and the target of the prevention activity.

Basic premises:

- Everyone across the mental health continuum can benefit from mental health promotion services and supports.
- In general most, if not all, services/supports that are beneficial to treatment and recovery will (or should) also serve to promote mental health.

Problem behavior prevention, including substance abuse and problem gambling, as well as mental health promotion and suicide prevention efforts are coordinated through the LCHHS Public Health Prevention Program (LCPHPP). This program is an integrated prevention program including behavioral health, traditional public health chronic disease and wellness promotion, and prevention strategies to support Trillium CCO. The LCPHPP utilizes the Strategic Prevention Framework and other public health planning models to develop and implement priority prevention strategies. Focusing on specific program areas, LCPHPP staff routinely develops work plans based on an assessment of local data, review of capacity to determine ability to address the need, development of a work plan identifying prevention best practices, implementation of strategies including a strong emphasis on policy, and finally an evaluation of the plan. The Prevention Program is supervised by a Certified

Prevention Specialist (CPS) and all staff have either a CPS or a Masters in Public Health. Implementation of prevention best practices are fulfilled by PHPP staff and through partnerships with local community-based prevention coalitions, organizations, and schools.

The early intervention program is characterized by intervention strategies for new parents and young children. Lane County has an incredible network of resources readily available to individuals and families. Services offered locally include:

- Monthly meetings between organizations including mental health/substance abuse providers, parenting resources, childcare providers, child development specialists, CCO-prevention team members, information and referral resources, and social service providers
- Monthly e-news letters
- Comprehensive resource guide

There are approximately 10,600 people in Lane County with a developmental disability. Lane County Developmental Disabilities Services (LCDDS), a division of LCHHS, served more than 2,000 people last year (2014) while brokerages (contracted services) served approximately 1,300. Of the people receiving services locally, 55% are male, 40% are between the ages of 23-40, 35% under the age 22, and more than 90% are Caucasian. Fifty-three percent also receive mental health services, 39% need additional or new mental health services, and 13% have alcohol or other drug problems. One of the major gaps is a lack of medical/insurance coverage for mental health services for youth identified with autism. Support/services for this population is very difficult to access. This issue highlights the ongoing gap or challenge regarding identifying the responsible payer for services between the medical or behavioral health systems.

The biennial implementation plan provides an overview of Lane County's current mental health/addictions service system along the continuum of health promotion, through prevention, treatment, and recovery services. While qualitative and quantitative data indicate several areas of strengths and opportunities, the data also identify three key areas in need of improvement. These are:

1. Access

- a. Residents reported being generally unaware of prevention information, education, activities or programs available in their community.
- b. Access is limited due to lack of awareness of services, no services offered in some geographic locations, transportation challenges to specific populations, such as veterans and LGBTQ, language barriers and lack of child care.

2. Transitions

- a. From residential, in-patient, hospitalization, or incarceration to the community
- b. From youth oriented services to adult services
- c. Between social service systems

3. Communication/Coordination

- a. Dissimilar language and jargon between systems create confusion.
- b. Discrete funding silos contribute to uncoordinated services.

c. Lack of communication and coordination between service providers makes it particularly difficult for individuals with multiple service needs.

Further information pertaining to Lane County's improvement plan for mental health can be found at http://www.lanecounty.org/departments/HHS/admin/documents/biennialplan141417oha.pdf.

NATIONAL ALLIANCE ON MENTAL ILLNESS LANE COUNTY (NAMI LANE COUNTY)

NAMI Lane County Mission Statement The mission of NAMI Lane County is to improve the quality of life of persons with mental disorders and of their families through support, education and advocacy. (http://namilane.org/about-nami-your-affiliate/mission/)

Agency Overview (excerpts below provided by Jose Soto, NAMI Lane County Executive Director) One in four people in Lane County currently experiences a mental health issue. Mental illness does not discriminate based on age, income, or life experience. NAMI Lane County, a non-profit, volunteer organization, offers support to community members without charge. Those for whom NAMI Lane County currently provides services are children, young adults, transition age youth, adults, seniors, Spanish speakers, homeless and veterans.

NAMI Lane County provides a safety net of daily support and assistance that complements Lane County's medical, psychiatric, and social services for individuals at risk for, recovering from or experiencing mental health crises.

NAMI Lane County provides support and education to individuals, families, community agencies, providers and systems through a countywide network of advocates, volunteers and caring professionals. NAMI Lane County teaches courses, sponsors support groups, gives workshops, disseminates mental health mailings and newsletters, maintains community bulletins, staffs resource centers, speaks at community events, provides clothing and socialization activities. NAMI Lane County advocates with the legislature on mental health issues, and also advocates with social service agencies for families in crisis.

A Brief Update

Over the last few years NAMI Lane County has grown by leaps and bounds! NAMI Lane County continues to allocate its limited resources to meet the needs of the community. Whether one is a family member looking for support, education or resources, someone in recovery or a professional, NAMI Lane County is available for everyone.

NAMI Lane County is growing from a one-room office to three resource centers in Lane County. It is putting volunteers and resources where they are needed most. The main resource center is now located on the second floor of Lane County Behavioral Health Services, and NAMI Lane County is currently opening a second resource center at the Oregon State Hospital in Junction City. NAMI Lane County is expanding its rural outreach to this new location as well as increasing connections with families from all over Oregon. A third resource center will be located at the new PeaceHealth

Behavioral Health Unit (aka Johnson Unit) where NAMI Lane County will connect families and those in recovery to helpful resources in the community.

List of Acronyms

CCO	Coordinated Care Organization
CPS	Certified Prevention Specialist
LCBH	Lane County Behavioral Health
LCDDS	Lane County Developmental Disabilities Services
LCHHS	Lane County Health and Human Services
LCPHPP	Lane County Health Prevention Program
NAMI	National Alliance on Mental Illness

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DISCUSSION QUESTIONS

- 1. Do you concur with the language changes proposed by the committee?
- 2. What should we do if we know someone who has the symptoms of a mental disorder?
- 3. How can we address the shortage of doctors, nurse practitioners and psychiatrists who oversee mental health care?
- 4. Why are people reluctant to consider mental illness a disease?
- 5. What is the most efficient way to use scarce resources to get the best care for individuals?
- 6. Does the stigma of mental illness contribute to the negative attitude towards homelessness?
- 7. Should we propose a new study to members at the annual meeting?

MENTAL HEALTH SERVICES FOR ADULTS IN LANE COUNTY

Below are the proposed changes in the League of Women Voters of Lane County position on mental health services for adults in Lane County. Proposed deletions to the position are crossed out, and proposed additions are indicated in italics and also underlined. The changes reflect current terminology in the mental health field. In addition, the committee incorporated language from the state position on mental health (updated in 2008) in the section titled "Essential Components of Individual Services."

MENTAL HEALTH SERVICES FOR ADULTS IN LANE COUNTY

Concurrence 1986, 1996

Position: The League of Women Voters of Lane County believes that those suffering from <u>living with</u> mental and/or emotional illness (MED), alcohol and/or drug addiction (A&D), and mental retardation <u>intellectual disability</u> and/or developmental disability (MR/DD) (ID/DD) can usually best be cared for <u>utilize services</u> in their own communities in the least restrictive environment consistent with their safety and well-being and that of society. Consequently, the League believes that it is the responsibility of county government to insure that a community-based mental health system is in place to meet the essential needs of such persons in Lane County.

Administration

The League believes that Lane County government is responsible for providing a comprehensive, long-range plan based on a periodic needs assessment and including procedures for setting priorities and for regular updating. The plan should be coordinated with the County's overall long-range human services plan. To serve the public interest, an advisory board, composed mainly of lay people but with representatives of public and private providers as well, should assist in the planning, review, and evaluation of the mental health system, its funding, and services.

Financing

The League believes that an effective system should integrate state and federally funded services, supplementing these with such services as are necessary to meet essential needs. The County <u>and other entities</u> should fund any necessary additional services. The system should provide for the best use of community services for the total funding dollars.

Requirements of the System

- 1. A stable and open administrative structure in which administrators and service providers have clearly defined roles and responsibilities
- 2. Coordination and communication among those responsible for the components of the system, both public and private
- 3. Ease of access to the services
- 4. Monitoring of services to insure quality care and fiscal responsibility

- 5. Systematic review and evaluation of services
- 6. Community support based on understanding of the <u>afflictions</u> <u>conditions and challenges</u>, the treatment needed, and the cost (financial and otherwise) to those in need of services, their families, and society
- 7. Public education to develop and enhance community support and to publicize available services.

Essential Components of Individual Services

The League believes that the mental health delivery system should include individual services that focus on recovery of the individual through use of evidence-based crisis intervention and ongoing support. These services could include alternatives to hospitalization, early intervention, residential services, supportive housing, and services delivered by peers in sufficient mix and quantity to afford an acceptable quality of life for consumers and their families. Other components include:

- 1. Skilled assessment/diagnosis
- 2. Counseling services
- 3. Appropriate housing
- 4- 3. Assistance in socialization
- 5 4. Assistance in employment, including job placement and training
- 6 <u>5</u>. Case-management programs that provide both short- and long-term coordination and continuity of care for persons in the categories of MED, A&D, and MR/DD ID/DD
- 7 <u>6</u>. Adequate monitoring of necessary medication
- 8 <u>7.</u> A commitment process that protects the rights of interested parties
- 9 8. Crisis/emergency care, including a secure holding facility

Education

The League believes the County bears a responsibility for initiating public education to develop and enhance community support and to publicize available services.