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## MINUTES

HEALTH COMMISSION

COMMUNITY AND PUBLIC HEALTH COMMITTEE

Tuesday, July 20, 2010, 2:00 p.m.

101 Grove, Room 302, San Francisco, CA 94102

### 1) CALL TO ORDER

Present:

Commissioner Margine Sako, Chair

Commissioner James M. Illig, Member- arrived at 2:15pm

Commissioner Catherine Waters R.N., Ph.D., Member

Commissioner Sonia Melara

Commissioner Sako called the meeting to order at 2:03 pm.

Commissioner Sako requested that some of the Committee time be devoted to discussing Laura's Law, which is being considered by the Board of Supervisors today.

### 2) APPROVAL OF THE JUNE 15, 2010 COMMUNITY AND PUBLIC HEALTH COMMITTEE MINUTES

Action Taken: The Committee voted unanimously to approve the minutes of the June 15, 2010 meeting.

### 3) HIV HEALTH SERVICES UPDATE

Bill Blum, HIV Health Services Interim Director made the presentation.

The following are highlights of the discussion of this item:

- HIV Health Services programs are approximately two thirds community providers and one third DPH providers. Both types of providers are held to the same quality standards and are monitored in the same manner.

- Although other areas report changes in HIV cases by race and ethnicity, data from San Francisco shows cases here have been consistent in these categories.
- The San Francisco Eligible Metropolitan Area (EMA) does communicate with other EMAs in the area but improvements in this area could still be made.
- The recent DPH reorganization which made Bill Blum, Chief Operating Officer of Community Oriented Primary Care, continues to process of integrating HIV into its primary care homes.
- Commissioner Illig congratulated Mr. Blum for his excellent work in taking over the HIV Community Planning Process. The result has been a noticeable increase in community spirit.

**4) MHSA UPDATE**

Alice Gleghorn, of Community Behavioral Health, made the presentation.

The following are highlights of the discussion of this item:

- The Mental Health Services Act, (MHSA) was intended to fund new services and not supplant existing programs. Its funding is in the DPH base budget. The State sets the funding formula and it is anticipated that there will be less funding available next year due to the slow economy.
- All proposed changes in MHSA planning and/or spending must reviewed by the Mental Health Board.
- The MHSA Advisory Board, made of approximately twenty-five community providers, meets every other month to provide input to DPH.
- DPH would like to improve coordination with other City Departments that provide services to this same population.

**5) COMMUNITY AND PUBLIC HEALTH COMMITTEE CALENDAR**

**6) EMERGING ISSUES**

Jo Robinson, Director of Community Behavioral Services, Bob Cabaj, Medical Director of Community Behavioral Services and Barbara Garcia, Deputy Director, presented an overview of "Laura's Law," legislation being considered by the Board of Supervisors simultaneous to the Health Commission Committee meeting.

The legislation was developed in response to concern about people who are mentally ill but do not seek treatment or take medications. The California law is named after Laura Wilcox who was shot and killed by someone diagnosed with paranoid schizophrenia who refused to take medication. Laura's Law is modeled after New York's, Kendra's Law which has been successful in reducing psychiatric hospitalizations, known suicide attempts, and incarcerations on people with mental illness.

Ms. Robinson stated that a key factor in the success in New York's Kendra's law is that the courts had authority to mandate treatment and medication. The law that is being considered by the Board of Supervisors does not contain this authority. An individual ordered by the courts to go to treatment or take medication would be able to refuse under Laura's Law. In addition, each time that someone was ordered to court or for subsequent court review of the case, there would have to be a full psychiatric assessment conducted with no reimbursement for these or related court costs. Because this proposed legislation does not give the courts authority to be effective, DPH does not support it.

Laura's Law would allow friends, family members, or providers to request that a court determine that a person go into outpatient treatment. The criteria for a person to be considered for Laura's Law is:

- The person is at least 18 years old;
- The person is suffering from a mental illness;
- The person is unlikely to survive safely in the community without supervision, based on a clinical determination;
- The person has a history of lack of compliance with treatment for mental illness that revealed serious violent behavior or required hospitalization;
- The person is unlikely to voluntarily participate in the outpatient treatment;
- The person is, according to his or her treatment history and current behavior, in need of the treatment to prevent a relapse or deterioration that would likely result in serious harm to the person or others;
- The person is likely to benefit from outpatient treatment.

7) **PUBLIC COMMENT**

8) **ADJOURNMENT**

The meeting was adjourned at 3:56pm.