

April 12, 2017

Honorable Supervisors:

The Department of Behavioral Wellness defines the increased need for involuntary, locked placements for persons with mental illness – in IMDs (Institutions for Mental Disease), the jail and psychiatric hospitals – to be its major challenge. We in NAMI (the National Alliance for Mental Illness) are shocked and concerned to learn the county's mental health director proposes to de-fund the county's Assisted Outpatient Treatment (AOT) program, a program that demonstrably reduces involuntary hospitalizations and incarcerations.

In its recent two-year outcomes report, San Francisco County's AOT program describes a reduction of incarceration by 74%, a reduction of psychiatric hospitalization by 64%, and a reduction in psychiatric emergency services (PES) by 87%. These outcomes reflect results in other counties, and across the nation over the past 15 years, matching the goals of our department, and our county.

NAMI and the community advocated for adoption of AOT in Santa Barbara County from the time Laura's Law (the name for AOT in California) was passed into California law in 2002. Last year, a 3-year pilot program was approved and endorsed by the Board of Supervisors. It commenced January 1, 2017. In the first 2 ½ months of the program, 14 referrals were made, most by law enforcement. Of those 14, 10 persons were engaging with treatment teams as of March 15<sup>th</sup> – a remarkable record, considering that one of the criterion for eligibility in AOT is a history of refusing mental health treatment.

AOT is the only outpatient treatment program than mandates assertive outreach by the Department of Behavioral Wellness to persons who are too ill to recognize their need for treatment. This, and the compassionate outreach of the program's treatment teams accounts for its success. We have a great program in place under strong leadership, a program that is already beginning to yield positive results - one we can be proud of. The program is serving many more than the 10 person pilot program implies, because when someone agrees voluntarily to undertake treatment, that slot is opened for another person. This is happening. Persons successfully served by AOT retire their "high utilizer" status, and reduce the huge cost to the county in incarcerations, hospitalizations, emergency calls, and emergency room utilization; also reducing the

cost of human misery to persons living untreated on the street, and the anguish of their families. This is why law enforcement has responded so positively to the program.

Now, the county's mental health director is proposing to de-fund the 3-year pilot program adopted by the Board of Supervisors.

It should be noted there are funding options for continuation of the AOT program beyond the county budget (e.g., AB 109 Realignment, MHSA, and others). The mental health director is choosing to recommend new initiatives other than AOT for funding. Choices are being made. It cannot be said there are not funding opportunities for AOT. Projections at the state level are that MHSA funding to the counties is likely to continue to increase over the next several years. This is but one option for funding.

NAMI recommends and urges that the Board of Supervisors mandate continuation of the 3-year AOT pilot program adopted by the county in 2016.

Respectfully,

George Kaufmann, President,  
NAMI Southern Santa Barbara County

Lynne Gibbs  
NAMI Southern SB County Board