

October 8, 2012

Rose King...Contact mentalillnessfacts@gmail.com

TO: Interested Advocates and Front-Line Stakeholders
FROM: Rose King, Mental Illness F.A.C.T.S. a partnership of Family And Consumer True Stories. SEE "Findings and Purpose" [facebook.com/mentalillnessfacts](https://www.facebook.com/mentalillnessfacts)

RE: Commentaries and Investigative Reports on Mental Health Services Act

I would like to recommend to those interested in public opinion about implementation of Prop 63/MHSA to consult those actually active in the field of county public mental health systems—that is, persons seeking services for themselves or others, and front-line providers working to provide the best possible services in challenging circumstances. I do not discount the managers, grant-seekers, and directors who are on site at those service centers, as also a source of knowledge. However, it is clear from years of MHSA reports that special interests who identify themselves as "stakeholders" spend a great deal of time and money consulting each other, and have very limited exposure to on-site revealing sources.

Current opinion can be found in the more than 100 online respondents—in the SF Chronicle alone—to my SF Chronicle Commentary "Prop 63, Mental Health Services Act, Not As Advertised" and the AP, Hannah Drier, article published shortly afterward in the SF Chronicle "California Mental Health Dollars Bypassing Mentally Ill." The AP story received similar responses in other newspapers, from small communities such as Vallejo to large, mixed urban areas such as San Diego.

The CA Dept of Mental Health did three separate field studies, concluding in each of three studies with the report that the chief concern of consumers, families, staff in public mental health was development of a "dual system." In 2008, a Dept of Finance audit issued a highly critical assessment of the state's management of MHSA. DMH dismissed integration from the start because the Department declared it was too difficult to design the guidelines for integrating all components of the MHSA and existing Systems of Care. As a result, implementation was not guided by the model programs referenced in MHSA, with Systems of Care standards of service spelled out in existing California codes.

The truth is that all public reports are anecdotal because no state or local agency seeks to determine the quality of mental health services in any county. Reports of success are the product of "fox guarding the hen-house" practices. I am among a vocal number of people who will not be silent witnesses to violations of the language of the law and voter intent, and who will continue to investigate and report on massive waste, potential conflicts of interest, and the extraordinary diversion of MHSA revenue for purposes other than direct services. If the press is the only source of oversight, that is where the stories will be told. The official reports and audits by state and county agencies, critical reports from county mental health boards and commissions, and statements such as the attached are not acted upon by any politician, bureaucrat, or official agent of oversight. SEE BELOW Exhibit:



The State's Voice on Mental Illness

DATE: November 20, 2008

MEMO TO: MHSOAC Commissioners

FROM: NAMI California

SUBJECT: NAMI California Survey to Affiliate Presidents and NAMI MHSA Statewide Advisory Pool on MHSA Services and the Two-Tiered System

The attached comments are from NAMI members - family members and clients – residing throughout California as of November 13, 2008. These comments are unedited and answer the following questions:

1. What are you or your family member in need of that you are not getting from your public mental health system?
2. Have your public mental health services improved, declined or remained the same since the passage of Prop 63 in 2004?
3. Has the “two-tiered” public mental health system impacted you or your family member, or affected the resources available to you or your family member?

NAMI CA believes these comments build a clear picture of California public mental health services as experienced by the people who are currently using them or trying to use them.

Prop 63 monies are funding a parallel mental health system that excludes current clients. Contrary to legislative expectations, funds are not being devoted to enhancing and expanding the Systems of Care model, as described in the California Welfare and Institutions Codes, for all who need this level of service.

This results in discrimination and was not the intent of PROP 63. The situation has reached the point of needing a serious course-correction because of inappropriate interpretations about implementing the MHSA.

We respectfully ask each Commissioner to read these comments in full and to aggressively exercise your oversight authority to address and redress the issue of California's two-tiered public mental health system.

Thank you for your attention and your action.

Dede Ranahan
MHSA Policy Program Manager