Family Handbook

A GUIDE FOR FAMILIES OF INDIVIDUALS WITH MENTAL ILLNESS

BEHAVIORAL HEALTH&RECOVERY SERVICES

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Directory of Mental Health Resources in Kern County

Emergency Numbers

24 Hour Crisis Hotline (Bakersfield).....800-991-5272

Bakersfield Police Department 661-327-7111

Kern County Sheriff's Office 661-861-3110

Kern County Fire Department 661-324-4552

Poison Control.....800-222-1222

Services

Adult Mental Health Services/ Access to Care..... 661-868-8080

Adult Protective Services (APS).....661-868-1006

Aging and Adult Services..... 661-868-1000

Al-Anon..... 661-322-1102

Alliance Against Family Violence 24 Hour Hotline..... 661-327-1091

Brand New Day..... 661-371-2525

Child Guidance Clinic..... 661-322-1021

Children's Mental Health Services..... 661-868-6750

Child Protective Services (CPS)..... 661-631-6011

Conservators Office..... 661-868-1010

Crestwood Behavioral Health..... 661-363-8127

Family Advocate..... 844-360-8250

Bakersfield Behavioral Healthcare Hospital..... 661-398-1800

Kern Medical..... 661-326-2000

National Alliance on Mental Illness (NAMI)..... 661-858-3255

Omni Family Health..... 661-392-7850

Patients' Rights..... 844-360-8250

Social Security Administration..... 866-366-9558

Truxtun Psychiatric Medical Group..... 661-323-6410

Veterans Administration..... 661-632-1800

Kern Behavioral Health and Recovery Services

The Kern Behavioral Health and Recovery Services is pleased to provide this family handbook for your convenience. Although this handbook does not contain all the information available in our county, it provides information about the most important areas of services for individuals recovering from mental illness and for their family members.

This handbook provides information related to the Family Advocate of Kern Behavioral Health and Recovery Services, as well as the different types of mental health-related services and programs available in our county.

Wellness and Recovery

The Wellness and Recovery Approach has been adopted by the county mental health services to partner with family members in the recovery process. Family input and assistance with the plan for treatment is an important part of Wellness and Recovery.

Cultural Competence in Family Advocacy

Cultural Competence is an important part of Family Advocacy, where human differences and similarities are taken into consideration to help families link to appropriate services. In helping your family, the Family Advocate will address cultural challenges and concerns, including the stigma attached to mental illness in society. Problems of misunderstanding, fear, and discrimination are concerns often related to mental illness in many cultures. The Family Advocate will try to help you address these and other cultural related challenges through self-empowerment with dignity and respect.

General Terms

5150 - A transportation document that requests a designated facility to hold and evaluate an individual for treatment of mental health symptoms that cause them to be a danger to others, him or herself, or to be gravely disabled for ***up to*** 72 hours.

5250 - Certification of not more than 14-days after the 5150 or 72 hours because the psychiatrist believes the individual continues to remain a danger to self, to others, or gravely disabled.

5260 - Re-certification for an additional 14-days.

5300 - Post Certification for an individual that continues to remain dangerous to others and the psychiatrist has petitioned the courts for an additional 180 days of treatment.

5350 Temporary Conservatorship (T-Con) - Is when an individual that has had an investigation done by the Kern County Conservators office and the Conservators office then makes a request to the court for a 30-day time period to assist an individual with Grave Disability. (i.e. food, clothing, shelter, 3rd party assistance)

AOD: Alcohol and Other Drug Programs – AOD services are focused on creating safe, healthy communities that discourage underage drinking and drug use and helps residents eliminate their substance misuse. Services are located throughout Kern County, providing individual and group counseling, drug and alcohol education and relapse prevention services in residential, sober living, and outpatient treatment settings.

Adult Residential Facility (ARF): Licensed residential mental health care facilities providing supervision and medication monitoring by professional staff.

Confidentiality: Ethical and legal restriction of disclosure of medical information. HIPAA policies direct this practice.

Conservator/Conservatorship: When a guardian is appointed to make decisions on behalf of a mental health client.

Co-occurring disorders: Person with at least one mental health and one substance use disorder.

CSU: Crisis Stabilization Unit

Cultural Competency: Effective work in cross-cultural situations among providers, family, peers, and community members engaged in an agency providing a public service.

Evidence-Based Program: Program with practices with a record of success. Evidence is supported by valid research that demonstrates its effectiveness with a particular group (Children, Transitional Age Youth, Adults, and/or Older Adults). Premise is that it will advance the client/peer toward recovery.

F-2-F: Family –to-Family is a 12-week education program sponsored by the National Alliance on Mental Illness.

Family Advocate: Family Advocate represents the family/support person's perspective within the system of care (see "Role of Family Advocate" on page 8 for more details).

Grave Disability - Is the inability to provide food, shelter, and clothing due to a mental illness for self or accept third party assistance.

- Food: either unable to provide food for themselves or they are refusing to eat due to their mental illness.
- Shelter: either unwilling or unable to obtain housing or loses housing repeatedly.
- Clothing: unable to dress appropriately either for the weather, or in keeping with public guidelines. Psychosis is sometimes responsible for public nudity, causing contact with law enforcement and making them vulnerable in other ways.

IDT (Interdisciplinary Treatment Team): It is required that patients' care be overseen and managed by an interdisciplinary group consisting at least of a physician, nurse, social worker, and counselor. A holistic approach for interdisciplinary teams (IDTs) allows experts in different disciplines to evaluate and provide feedback to the care plan, and ensures comprehensive care.

IPU (Inpatient Psychiatric Unit): Locked inpatient psychiatric unit located at Kern Medical.

Kern BHRS: Kern Behavioral Health and Recovery

LGBT: Lesbian, Gay, Bisexual, Transgender

LCSW: Licensed Clinical Social Worker

Legal Hold - When your family member is placed in an acute psychiatric unit involuntarily, they are placed on various legal holds.

LPS Conservatorship - This is a permanent conservatorship. If your family member was already on a T-Con, he/she may be upheld too remain on permanent conservatorship. These conservatorships run for one year and are renewed on annual psychologist's evaluations.

MET (Mobile Evaluation Team): MET is dispatched by law enforcement when a mental health crisis is identified in the community.

NAMI: National Alliance on Mental Illness

PEC (Psychiatric Evaluation Center): is the 24-Hour Crisis Stabilization Unit in Kern County.

PFLAG: Parents, Friends, and Family of Lesbian, Gay, Bisexual, and Transgender Persons

P-2-P: Peer-to-Peer is a 12-week education program for persons diagnosed with mental illness.

PRA (Patients' Rights Office): The Patients' Rights Advocate is responsible for investigating and trying to resolve complaints, appeals, and grievances regarding mental health services.

Probable Cause Hearing (PC Hearing) - Probable Cause hearings are made available to individuals who have been put on a 14-day hold (5250). These hearings are held within the first 4 days of that hold to fulfill the patients' right to due process.

Release of Information: Written permission given by the mental health services client for his or her medical record and /or other information to be released to a specific person(s).

Reise Hearing - A Reise hearing is also known as a Capacity Hearing, and determines an individual's ability to understand multiple factors regarding medications that are being prescribed by a psychiatrist while an individual is receiving treatment on a psychiatric unit.

Room and Board: Residential facility providing housing and meals but not managing medications or operating under the authority of a licensing agency.

WIC: Used in this publication to refer to the Welfare & Institutions Codes that governs mental health services.

Writ of Habeus Corpus - A request for release by an individual while receiving treatment in a designated facility for judicial review in Superior Court.

The Role of the Family Advocate

If a member of your family, significant other or close friend is suffering from mental illness, and have been unable to engage them through the normal routes, you can contact the Family Advocate for help in navigating the system of care. The Family Advocate can be the family's link to the system of care with Kern Behavioral Health and Recovery Services. A variety of services is available to help you navigate the mental health system. The Family Advocate is also there to provide support and assistance to the family, and promote family self-care. The Family Advocate is a trained professional who can help ***you*** to support and assist your loved one.

Family Advocacy Services

The following are some of the services provided by the Family Advocate:

- Advocates for families and helps families communicate with service providers
- Links families with appropriate services as supporters and caregivers
- Assists the family with complaints and concerns regarding mental health services
- Educates treatment teams on strategies to encourage family or support person engagement and integration
- Provides consultation to treatment teams on challenging issues
- Provides education for family members about
    - The structure of the System of Care
    - Engagement and Integration in their loved one's treatment
    - Participation in treatment direction or discussion
    - The National Alliance on Mental Illness (NAMI) in Kern County

The Family Advocate CANNOT:

- Provide therapy services needed by an individual or by family members
- Release confidential information to family members without the client's consent
- Make decisions for family members
- Force a family member receiving services to do anything against his or her will

For more information about Kern BHRS Family Advocacy

Call 844-360-8250 or Email familyadvocate@kernbhrs.org

Communicating with a Family Member with Mental Illness

Communication with individuals suffering from mental illness requires open-mindedness and a level of understanding and competence. Here are some suggestions on how to communicate with your family member with mental illness:

- **Be respectful**: When a person feels respected and heard, he or she will be more likely to return respect and consider what you have to say. Let your family member share in the responsibility for making good decisions.
- **Be aware of differences in reality:** If a person is experiencing hallucinations or delusions, be aware that this experience is his or her reality. Acknowledge it, and don't ignore or argue about it.
- **Be honest:** Do not assume that an individual with mental illness will believe anything you say. Mental illness has nothing to do with the person's intelligence level. Most likely the person will remember your conversations.
- **Listen:** Try to understand what he or she is communicating. In most instances, if you listen carefully, you will be able to understand. If an individual is an adult, communicate with him or her like an adult.
- **If needed, set limits:** For example, "I only have five minutes to talk with you." Do not be critical; try to restrain any anger or frustration, and repeat yourself if needed.
- **Use direct and clear sentences:** Some mental illnesses make concentrating difficult so it is important to speak clearly (with respect) and be specific, such as, "please put your dishes in the sink when you have finished eating" instead of "please clean up when you're done".
- **Be patient if your family member appears like he or she does not want to talk:** You will have a better chance of communicating when your family member is open to talking. Sometimes just sitting quietly with him or her can open the door to conversation. Try not to be forceful.

Source:

Swink, D.F. (2010). Community with people with mental illness: The Public's Guide. Psychology Today. Retrieved from http://www.psychologytoday.com/blog/threat-management/201010/communicating-people-mental-illness-the-publics-guide

Capital District Health Authority. (2010). Living with Mental Illness: A Guide for Family and Friends. Retrieved from http://ourheatlhyminds.comfamily-handbook/communicaton/index.html

Seeking Mental Health Services for a Family Member

What can you do when your family member resists help?
Even when your family member is refusing, you may continue to seek services to help your family member. Being aware of the warning signs, such as a suicidal threat or harm to others, is important when you are seeking help. Here are a few resources that may assist family members in getting your loved one support and treatment.

How do I get help in crisis or emergency situations?

Kern County Mental Health 24-Hour Crisis Hotline

Toll Free: 1-800-991-5272 (24hours/7 days a week)
TTY: 661-868-8142
The Mental Health Hotline provides crisis and suicide intervention for individuals of all ages. In addition, the team offers telephone counseling for a variety of mental health problems, as well as offering assistance with coping skills. Hotline staff members provide immediate assistance, and then connect callers to follow-up services both within the behavioral health system of care and the larger community.

If your family member is an immediate risk of harm to him/herself or others call 911.

Access and Assessment Center

Mary K. Shell Mental Health Center
2151 College Ave (Front Entrance Only)

The Access Center is a central point of access into the Kern County Mental Health System of Care. Initial screenings are provided for adults and seniors adults. The Access Center provides assistance with community services and system of care referrals to determine proper service placement.

The Assessment Center is designed to evaluate the needs of the individual served through the completion of a psychosocial assessment. The assessment results produce individualized recommendations, specific to the individual's needs, to the most appropriate treatment resources and referrals either within, and/or outside the system of care. Assessments are conducted by Licensed Practitioners of the Healing Arts (LPHA), which include Master's and PhD level licensed or licensed eligible clinicians.

24 Hour Psychiatric Evaluation Center/Crisis Stabilization Unit (PEC/CSU)

Mary K. Shell Mental Health Center
2151 College Ave (Rear Entrance Only)
PEC/CSU is a 24-Hour/7 day a week urgent care psychiatric unit with the goal of providing psychiatric care in the least restrictive environment possible. The PEC/CSU is unique in the San Joaquin Valley. The PEC/CSU is the designated facility for non-EMS (Emergency Medical Services) involuntary psychiatric evaluation in Kern County for adults and minors. It also provides services to individuals on a voluntary basis. PEC/CSU is designated to provide brief, culturally sensitive, individual and family crisis intervention services. PEC/CSU provides services for adults, children, and their family members.

Using Law Enforcement

Threats of harm to self or others can involve many types of weapons like guns and knives. If weapons are present never put yourself at risk. If your family member's behavior is violent or has a history of violence, keep you and your family safe using the tips and communication skills in this book and call law enforcement.

Kern County law enforcement officers are trained in mental health Crisis Intervention Techniques and are best equipped to deal with the weapon.

Emergency Number for all cities - 911

Kern County Sherriff's Department - 661-861-3110

Bakersfield Police Department - 661-327-7111

Mobile Evaluation Team

MET is dispatched by law enforcement when a mental health crisis is identified in the community. MET provides crisis intervention, voluntary and involuntary assessment for psychiatric hospitalization and follow-up in the community. MET strives to provide services that are culturally appropriate by incorporating/understanding the family and significant other's needs and information.

MET can provide linkage to mental health services and community resources for minors, adults, senior adults, and veterans. MET also provides briefings and crisis intervention training for law enforcement and assists the Patients' Rights Advocate to provide regular county trainings for 5150 certification (involuntary hospitalization).

Outreach Services

Kern Behavioral Health and Recovery Services provides Outreach services to individual who are either unable or unwilling to ask for help for themselves. Outreach services are designed to engage the individual and begin assisting them in their home when the person will not voluntarily come into the office and do not meet criteria to be placed on a legal hold. This may include being referred for the Reach or AOT Program.

Laura's Law Assisted Outpatient Treatment (AOT)

AOT as permitted by Laura's Law is designed to prevent persons at know risk who are not receiving mental health treatment from deteriorating into states where they are gravely disabled, dangerous to themselves or others. It does so by directing such persons into compulsory treatment in the hopes that the person's condition will improve and she or he will seek subsequent treatment voluntarily.

Thus, the overall effectiveness of the program will be seen in its ability to successfully graduate persons from AOT into voluntary treatment while preventing episodes of grave disability, dangerousness to self or others.

AOT includes a variety of mental health treatments such as psychiatric medication, individual and group therapies, psychosocial skills training, substance use disorder treatment, case management and crisis intervention.

AOT clients usually receive these services in the community several times each week by a team of highly trained and caring professionals that include licensed mental health professionals (e.g. psychiatrist, psychologist, therapist, nurse) as well as recovery specialists, substance abuse specialists, and peer support specialists.

If the person doesn't immediately agree, AOT will continue their attempts for no less than 30 days. If their

attempts fail during this time, Kern BHRS may file an AOT petition with the Kern County Superior Court if several conditions are present:

- The person has a history of lack of compliance with treatment for his or her mental illness.
- The individual has been offered the opportunity to participate in a treatment plan by the Kern BHRS director, or his/her designee, and the individual continues to fail to engage in treatment.
- The individual's condition is substantially deteriorating.
- It is likely that the person will benefit from assisted outpatient treatment.

If the court finds that the conditions for AOT have been met, the mentally ill adult will be ordered to receive AOT from Kern BHRS for 180 days. AOT can be repeated if the necessary conditions remain present at the end of each term. Most people receiving AOT are prescribed and accept psychiatric medications even though involutory medication is not allowed by Laura's Law.

Who is AOT for?

Mentally ill adults presently residing in Kern County who:

- Have been offered the opportunity to participate in treatment by Kern BHRS but have failed to engage in treatment, AND
- Their condition is presently substantially deteriorating.

AOT is not for persons who:

- Are under the age of 18.
- Are not presently residing in Kern County.
- Are ill, but not recently deteriorating.
- Are currently participating in mental health treatment.
- Do not have a history of non-compliance with mental health treatment.
- Have never been hospitalized or arrested.

Who can request AOT?

- Immediate adult family members.
- Persons 18 years of age or older residing with the individual.
- Director of treating agency, charitable organization, licensed residential care facility or hospital.
- Peace officer, parole or probation officer supervising the individual.

What to expect if you make a referral.

Kern BHRS will contact you to learn more about your concerns. We will also attempt to meet with the mentally ill adult to encourage him or her to receive our services voluntarily and to allow us to share information about our attempts with the referring party.

Kern BHRS cannot share this information without the consent of the mentally ill individual.

Family Member's Role in Seeking Involuntary Mental Health Services

How do you request hospitalization using an involuntary hold (5150)?

When you call for help for your family member, a professional (e.g., law enforcement or designated mental health staff person) will, in most cases, come to where you are located and conduct an assessment to determine whether your family member should be transported to a psychiatric facility for a 72- hour hold for treatment and evaluation. **The 72-hour hold is known as a 5150.** (See diagram on the next page) For this hold to take place there needs to be "probable cause," which means your family member, as a result of the mental disorder, is a danger to himself/herself, or others, or is gravely disabled.

Symptoms That Indicate Probable Cause

Danger to Self: A person who has suicidal thoughts and is an immediate threat to his or her own safety, as a result of mental illness (e.g., delusions, hallucinations, or depression). The means and ability to carry out these threats have to be present to meet criteria for Danger to Self.

Danger to Others: A person threatens to harm others and has a plan, the means, and the imminent ability to carry out these threats, as a result of mental illness (e.g., delusions, hallucinations, or depression). The person must be an immediate threat to someone's safety.

Grave Disability: An individual is unable to care for himself/herself and/or is unwilling to accept a third party's assistance to obtain food, clothing, or shelter, as a result of mental illness (e.g., delusions, hallucinations, or depression).

As a family member, do you have a say in determining "probable cause" (5150.5)

You may provide information related to your loved one and his or her mental health history to the 5150 evaluator. It is important to provide an accurate summary. The law enforcement or mental health professional will consider relevant information about the history of a person's mental disorder to determine probable cause for a 72-hour hold (5150). It is important to document information about your loved one and the history of his or her mental illness so you will have it readily available when you need it. **(See documentation pages 15-21 of this handbook)**

This is a legal document and any information may be submitted to the courts. All information must be accurate and truthful.

What happens to an individual once he or she is taken for a 5150?

Kern County's designated 5150 receiving facility is PEC/CSU at the Mary K. Shell Mental Health Center located at 2151 College Avenue in Bakersfield, CA 93305.

At the Psychiatric Evaluation Center/Crisis Stabilization Unit (PEC/CSU) the individual is evaluated and treated for mental illness. During or at completion of this hold, an individual may be certified (determined by a judge to require hospitalization for mental illness) for up to 14 days of intensive treatment related to a mental health disorder or impairment. The certification will lead to a legal hearing, at which the hearing officer will decide whether to uphold the 14-day certification upon hearing the evidence of probable cause. During the hearing, which takes place at the hospital, you may provide information in writing to be considered for review, or you may testify as a witness if your family member has consented for you to be present.

The hospital representatives may assist families in preparing for written and/or verbal testimony at this hearing. The

following examples are the types of information useful in a Probable Cause hearing:

- My brother is going to hurt himself; he's planning to crash his car into a tree and says he will leave now and end it all.
- He just swung a stick violently at his mother and is screaming at her in an aggressive manner.
- She hasn't eaten anything I've given her in the past three weeks because she says I'm trying to poison her.
- My mother is wearing three coats in 105-degree weather (or not wearing any clothing in public).

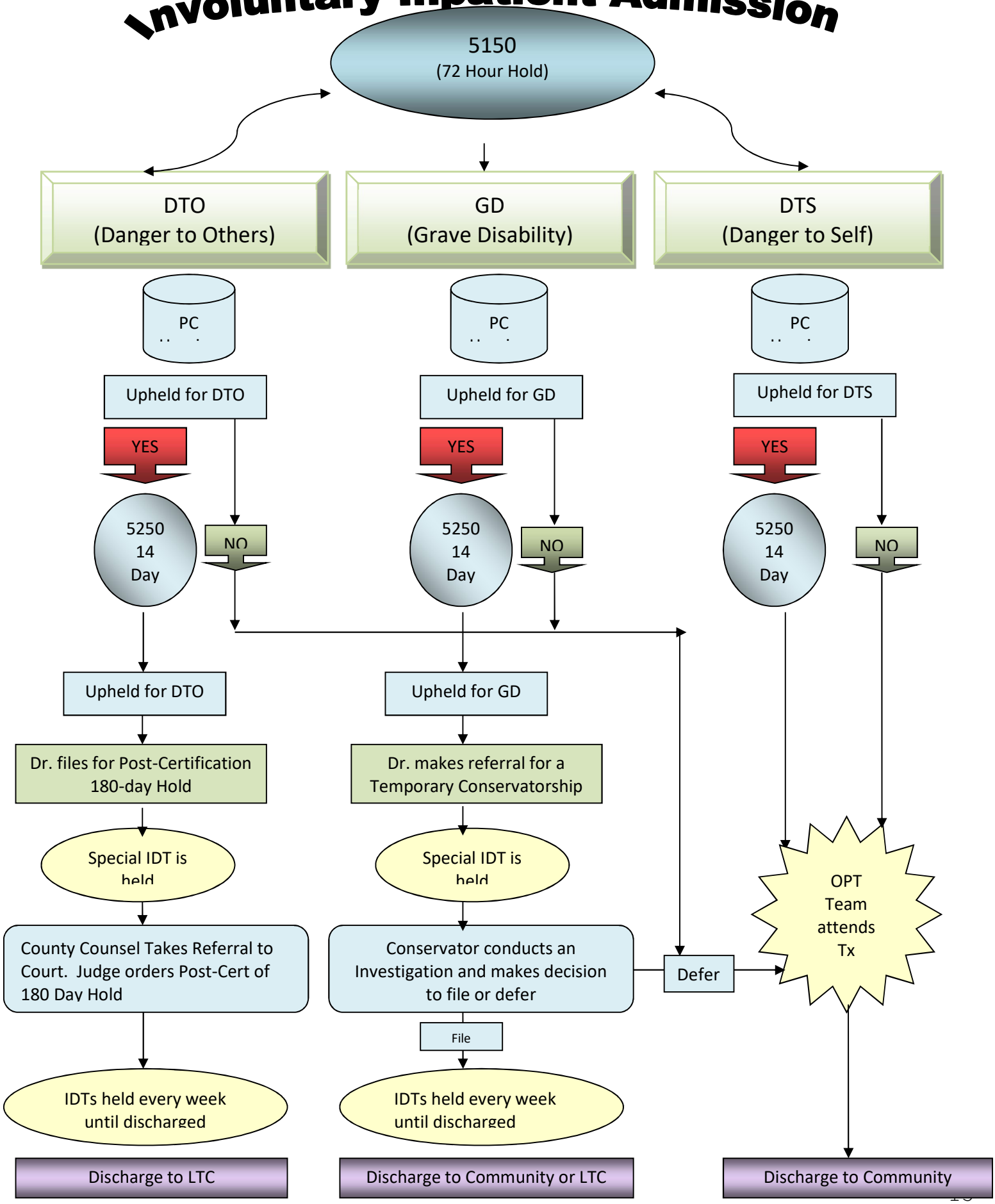
If the hearing officer determines that probable cause exists, your family member is placed on a 14-day certification or 5250. (If no probable cause is determined, he or she can be released immediately following the hearing). During any time of the 14-day hold:

1. The hospital may place the person on a second 14-day recertification if the person has been determined to be ***a danger to himself/herself.*** This action requires no additional due process (no hearing) (*Welfare and Institutions Code 5260*).
2. In some counties, after your family member has completed a 14-day period of treatment, they may be held for an additional 30 days of the doctor determines that they remain ***gravely disabled*** and are unwilling to accept voluntary treatment (*Welfare and Institutions Code* 5270.15). **(Not in Kern County)**
3. If sufficient reason exists at the end of the 14-day certification to believe that your family member remains a ***danger to others*** because of a mental disorder, the person who is in charge of the facility may petition the court for them to remain in the facility for further treatment. This treatment is not to exceed 180 days, however if the individual remains a danger to others, the individual can be referred for a second 180-day hold (*Welfare and Institutions Code 5300 et. al.).*
4. **Temporary Conservatorship**

   If the person in charge of the facility where your family member is being treated believes that they may benefit from the services of a conservator (a guardian to make decisions for a client with mental illness) due to being gravely disabled, they may file for a Temporary Conservatorship (T-Con) for up to 30 days. At the end of the 30 days, a hearing will be held to determine whether the person remains gravely disabled and whether a one-year (Permanent Conservatorship) is necessary. The County Deputy Conservators' Office conducts a full investigation to determine appropriateness of 1-year/permanent conservatorship.

   It is important to note that only the Public Conservator can initiate a petition for LPS Conservatorship and serve as a Temporary Conservator. In Kern County only Designated 5150 Facilities or the Superior Court may initiate a referral for LPS Conservatorship. (See diagram in this handbook)

Involuntary Inpatient Admission



ADULT INFORMATION FORM

Present this form to any Peace Officer, Psychiatric Emergency Team staff member, First Responder or an evaluator performing a 5150 assessment of your family member to help determine if he or she meets criteria for a 72-hour evaluation in a psychiatric facility.

Name of Adult:	Date of Birth:
Primary Language:	Phone Number:
Address (Street, City, State, Zip):	
Medi-Cal: Yes ☐ No ☐ Medi-Cal #:	Medicare: Yes ☐ No ☐
Private Medical Insurer (If Applicable):	
Please ask the person being assessed to sign an authorization permitting the hospital to communicate with me regarding his or her care. (I understand that if a Release of Information is not signed, the hospital is not allowed to share confidential information.) Yes ☐ No ☐	
My family member has a wellness and recovery plan or Advanced Directive	Yes ☐ No ☐
A copy of the Advanced Directive is attached.	Yes ☐ No ☐
BRIEF HISTORY OF MENTAL ILLNESS	
At what age did the mental illness begin: ( ) Diagnosis Given:	
Does this individual use drugs? Yes ☐ No ☐	
What substances, if any, have been recently taken?	
MEDICATIONS	
Medications individual has taken:	
Medications individual has responded well to:	
Medications that have caused adverse reactions:	
Allergies (medications, foods, chemical, and other):	
SPECIAL CONSIDERATIONS	
Spiritual/Cultural needs:	
Dietary needs:	

OTHER MEDICAL CONDITIONS	
Treating Physician:	Phone Number:
Case Manager/Therapist:	Phone Number:
Current living situation:	
CONTACT INFORMATION	
Information submitted by (print name):	Relationship to Individual:
Address:	
Phone:	
Signature:	Date:

CURRENT REASONS FOR CONCERN (PLEASE CHECK ALL THAT APPLY)

	Date:	Yes	No
Individual excludes family when refusing treatment			
Individual is not taking medications:			
Individual is danger to self/others			
Individual is under the influence of alcohol			
Individual is under the influence of drugs			
Individual is not able to provide or utilize assistance for shelter			
Individual is not able to provide or utilize assistance for food			
Individual is not able to provide or utilize assistance for clothing			
Individual has a history of not continuing mental health treatment			
Law Enforcement was called			
Crisis intervention team was called (from law enforcement)			
Psychiatric emergency team called (from mental health crisis team)			

SUMMARY OF THE RISK

What is occurring now?
What has led to this over the past two or three weeks?
Historically, what happened in similar circumstances that causes concern now?
What specific treatment action does the family request?
What is your concern if treatment is not received now?

Submitting this form does not guarantee that you will receive information in return unless consent is provided by your family member.

This document may become a legal record, which may be made available to the patient.

CHILD INFORMATION FORM

Present this form to any Peace Officer, Psychiatric Emergency Team staff member, or an evaluator performing a 5150 assessment of your family member to determine if he or she meets criteria for a 72-hour evaluation in a psychiatric facility.

Name of Child:	Date of Birth:
Primary Language:	Phone Number:
Address (Street, City, State, Zip):	
Medi-Cal: Yes ☐ No ☐ Medi-Cal #:	Medicare: Yes ☐ No ☐
Private Medical Insurer (If Applicable):	
Person(s) with legal custody of child:	Phone Number:
Person(s) with legal physical custody of the child:	Phone Number:
Other important information about the child:	
BRIEF HISTORY OF MENTAL ILLNESS	
At what age did the mental illness begin: ( ) Diagnosis Given:	
Does this individual use drugs? Yes ☐ No ☐	
What substances, if any, have been recently taken?	
MEDICATIONS	
Medications individual has taken:	
Medications individual has responded well to:	
Medications that have caused adverse reactions:	
Allergies (medications, foods, chemical, and other):	
SPECIAL CONSIDERATIONS	
Spiritual/Cultural needs:	
Dietary needs:	

OTHER MEDICAL CONDITIONS	
Treating Physician:	Phone Number:
Case Manager/Therapist:	Phone Number:
Current living situation:	

CONTACT INFORMATION	
Information submitted by (print name):	Relationship to Child:
Address:	
Phone:	
Signature:	Date:

CURRENT REASONS FOR CONCERN (PLEASE CHECK ALL THAT APPLY)

	Date:	Yes	No
Child excludes family when refusing treatment			
Child is not taking medications:			
Child is danger to self/others			
Child is under the influence of alcohol			
Child is under the influence of drugs			
Child is not able to provide or utilize assistance for shelter			
Child is not able to provide or utilize assistance for food			
Child is not able to provide or utilize assistance for clothing			
Child has a history of not continuing mental health treatment			
Law Enforcement called			
IEP addressed higher level of care			
504 plan addressed higher level of care			

SUMMARY OF THE RISK

What is occurring now?
What has led to this over the past two or three weeks?
Historically, what happened in similar circumstances that causes concern now?
What specific treatment action does the family request?
What is your concern if treatment is not received now?

This document may become a legal record, which may be made available to the patient.

Application for 72-Hour Detention for Evaluation and Treatment

(**Supplement** - Relevant Information about the Historical Course of the Person's Mental Illness)

W & I Code, 5150.05, requires, when determining if probable cause exists to take a person into custody or cause a person to be taken into custody shall consider available relevant information about the historical course of the person's mental disorder if the information has a reasonable bearing on the determination as to whether the person is a danger to others, or to himself, or to herself as a result of a mental disorder. Evidence of the "historical course of the person's mental disorder" may be provided by the person who has provided or is providing mental health or related support services, or one or more members of the family of the person under consideration for involuntary treatment.

In addition, W & I Code, 5150.05, requires that the designated facility for evaluation and treatment shall consider, pursuant to W & I Code, 5151, available and relevant information regarding the "historical course of the person's mental disorder" for establishing probable cause for admission.

Application is hereby made for the admission of:

_____/ _____

Name of Client Date

The following recent and relevant behaviors shall be considered in determining probable cause for involuntary evaluation and treatment:

_____

_____

_____

_____

_____

_____

_____

_____

Approximate Date of Reported Behavior: _____

Information Source: _____

(Law-Enforcement, Mental Health Professional, Family Member, Significant Other(s) etc.)

Reporting Person's Signature: _____Date: _____

Working With a Mental Health Provider

When working with your loved one's mental health provider, it is important to have past and current information on hand about his or her mental illness. When your family member is admitted to a hospital, you can offer the information below to provide an accurate picture of your family member's illness. If your family member is discharged, medical records can be requested by your family member, or with his or her consent, you can make the request.

1. **Know your loved one's history**
    - Keep a journal of problematic symptoms and behaviors (e.g., sleep patterns, hallucinations, changes in speech patterns, energy level) and the date of occurrence.
    - Treatment history: What medications he or she has taken in the past; side effects of medication; why the medication was stopped; were they helpful; and previous hospital stays (including when, where, and why, how long).

2. **Know as much as possible about the current treatment**
    - Keep a list of important contact numbers (e.g., psychiatrist, therapist & case manager).
    - Keep a 1-page summary of the current treatment plan, along with your contact information, to send to the hospital if your loved one is admitted. Information about the current treatment should include: medication names, their purposes, dosages, and schedule.

3. **Balance involvement with independence**
    - If your loved one allows, accompany him or her to appointments to keep an open dialogue with providers.
    - Ask your loved one how comfortable he or she is having you share with their doctor, but remember to let your loved one take charge of telling or expressing his or her story.

4. **How to communicate so the provider will hear you**
    - Be concise and make a list of questions and concerns you want to address in advance.
    - State your main concerns clearly: "She seems much more depressed and I am worried."
    - If it is difficult to talk with the provider, try expressing your concerns via a letter.
    - You are always allowed to share information with the providers, but privacy law often prohibits them from sharing details in return.

A Guilt-Free Bill of Rights for Families and Loved Ones

1. **A right to survive**
2. **A right to privacy and to lead our own lives.**
3. **A right not to go broke or alter our standard of living.**
4. **A right not to be psychologically abused.**
5. **A right to physical safety.**
6. **A right to express our emotions.**
7. **A right to respite and vacations.**
8. **A right to receive help for ourselves.**
9. **A right to set house rules and be treated with respect and consideration.**

(The above rights are developed by Parents of Thresholds, Chicago, Ill.)

Self-Care for the Caregiver

Dedicated to those family members and friends who are primary caregivers of a loved one or friend with mental illness….

1. Be gentle with yourself.
2. Remind yourself that you are a loving helper, not a magician. None of us can change anyone else—we can only change the way that we relate to others.
3. Find a place where you can be a hermit—use it every day—or when you need to.
4. Learn to give support, praise and encouragement to those about you- and learn to accept it in return.
5. Remember that in the light of all the pain we see around us, we are bound to feel helpless at times. We need to be able to admit this without shame. Just in caring and in being there, we are doing something important.
6. Learn to vary your routine often and to change your tasks whenever possible.
7. Learn to know the difference between complaining that relieves tension and the complaining that reinforces it.
8. On your way home from work, focus on one good thing that happened during the day.
9. Become a resource to yourself! Be creative and open to new approaches to old things.
10. Use the support you give to others or a "buddy" system regularly. Use these as a support for reassurance and to redirect yourself.
11. Avoid "shop talk" during your breaks or when you are socializing with colleagues.
12. Learn to use the expression "I choose to…" rather than the expressions like "I have to…," "I ought to…, "or "I should…"
13. Learn to say, "I won't…" rather than "I can't…"
14. Learn to say "no" and mean it. If you can't say "no"- what is your "yes" worth?
15. Aloofness and indifference are far more harmful than admitting to an inability to do more.
16. Above all else - learn to laugh and play.

-Author Unknown

Your Rights When Your Family Member is Hospitalized

Families of clients in psychiatric hospitals are encouraged to participate in the assessment, treatment, and aftercare planning process for each client, consistent with the best interest and wishes of the client. **The family rights listed below require the client's written authorization.**

- The right (of a spouse, parent, child, or sibling) to be notified of the client's presence in a 24-hour facility, unless the client requests this information not be provided. [WIC 5328.1(a)]
- The right to be given information regarding the diagnosis, prognosis, prescribed medication, and side effects, and progress of the client. If the client is initially unable to authorize the release of this information, daily efforts shall be made to secure the client's consent or refusal of authorization. [WIC 5328.1(a)]
- The right for the information provided in confidence by the family to the treatment provider not to be revealed to the patient. [WIC 5328.(b)]
- The right to a copy of the written aftercare plan when the client is discharged from an inpatient psychiatric facility, with the consent of the client. [WIC 5618.]
- The right of the client to assign a relative or guardian to be given required information concerning the consent and explanation about administration of convulsive treatment or psychosurgery, if authorized by the client. [WIC 5326.6(b), 5326.7(c)]
- The right to receive copies of public information, including licensing and other reports. [WIC 6250 et seq.]
- The right to visit the client every day, with the consent of the client. [WIC 5325(c)]
- The right to have confidential telephone calls with the client and to mail and receive unopened correspondence. [WIC 5325(d), (e)]
- The right to provide clothing, personal possessions, and a reasonable sum of money for the client to use in the facility. [WIC 5325(a)]
- The right to participate in the treatment and rehabilitation planning of the client as a source of information and support. Included in the participation is assisting the client in returning to the most constructive and satisfying lifestyle of his or her own definition and choice in the least restrictive environment, preferably in the client's own community. [WIC 5600.2(a)(2), 5600.4(c)
- The right for a person designated by the client to be advised of the time and place of the certification hearings, judicial review, conservatorship proceedings, and other due process proceedings, unless the client requests that this information not be provided (under the advisement that the client has the right to request this information not be provided). [WIC 5256.4(c), 5276, 5350.2]
- The right to be appointed conservator or to nominate a conservator subject to the priorities and preferences in the Probate Code. [Cal. Probate Code §§ 1810-1813]
- The right to have as the first priority for conservatee placement a facility as close as possible to the conservatee's home or home of a relative. [WIC 5358(c)]

- The right to submit a complaint regarding abuse, unreasonable denial, or punitive withholding of right concerning a resident in a licensed health or community care facility to a Patients' Rights Advocate for investigation. [WIC 5520(a)]
- The right (unless found not to be acting in good faith) to be immune from civil or criminal liability, penalty, sanction, or restriction for participating in the filing of a complaint or providing information to the Patients' Rights Advocate [WIC 5550(a)]
- The right to be informed by the facility of the telephone number of where to file complaints with the Department of Health Services, Licensing and Certification Program [Cal. Health & Safety Code § 1288.4]. Professional licensing boards and other regulatory and enforcement agencies may also be contacted to register complaints about the facility or personnel.
- The right to not have the client discriminated against for the family member's participating in any advocacy. [WIC 5550(c)]

What to do When Your Family Member Has Been Arrested

A step-by-step guide to help families cope with the criminal justice system in Kern County when a family member who suffers from mental illness has been arrested.

Step 1: Support Your Relative

- If your relative/friend has been arrested, help the person to stay calm and let him or her know you will help.
- Remind the person that he or she has the right to have an attorney present if being questioned by police officers or detectives.
- If he or she is already at the Central Receiving Facility (CRF), the downtown Sherriff's jail in Kern County, he or she will be screened for mental illness, as well as other health concerns, upon arrival. It is very important that they be direct and honest to benefit as much as possible from this screening process. Tell the person to expect to be interviewed by jail medical and mental health staff. Let the person know it is OK to discuss his or her physical and mental condition, diagnosis, medications, and so forth. It is important that the person feel safe to speak openly on these topics.

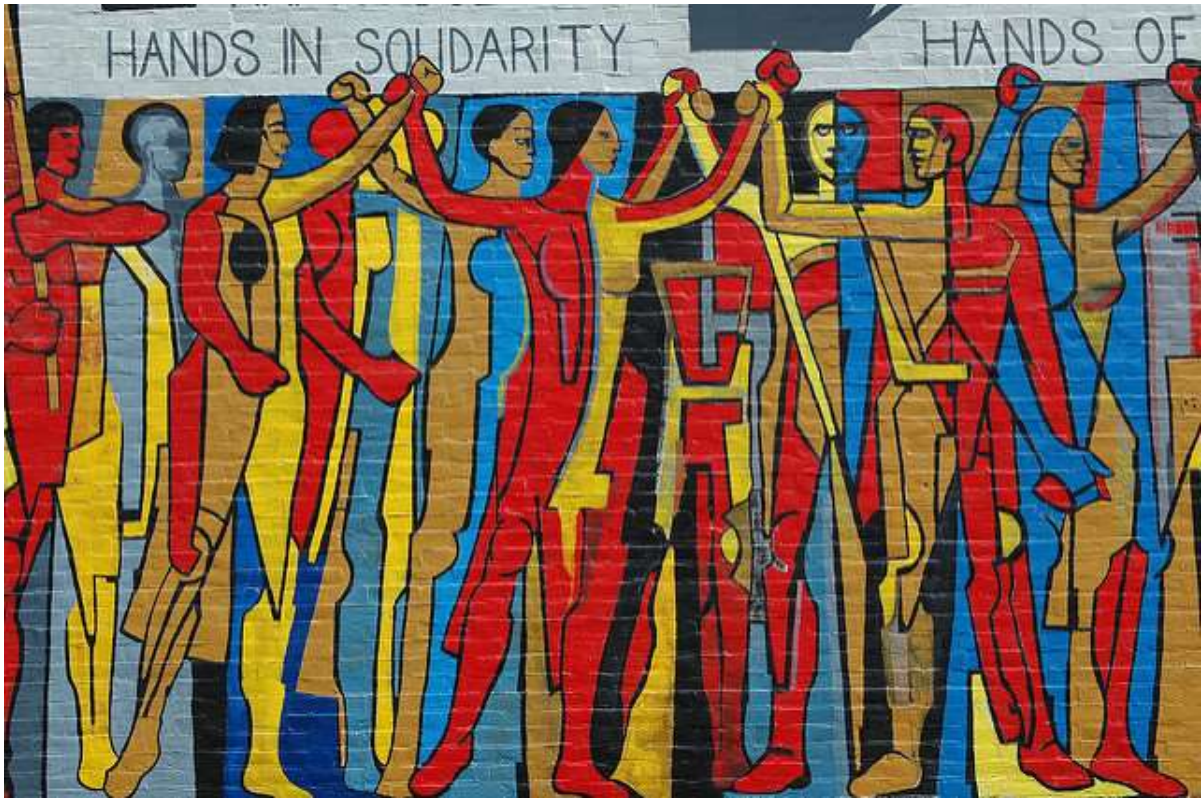
Step 2: Contact the Downtown Jail Central Receiving Facility (CRF) / Correctional Mental Health (CMH) 661-868-6895 or call 661-868-6850
If they have been transferred to the Lerdo Facility call CMH 661-391-7948 / Admin. Main number 661-391-7900

- Call 661-868-6850 Kern County Sheriff Clerical Admin
- Inform jail staff that your family member suffers from a mental illness and describe the diagnosis and any other concerns. **IMPORTANT:** If you know or suspect your relative has had recent thoughts of suicide, or suicide attempts, be sure to inform the jail **and** Correctional Mental Health staff.
- Ask for your family members' booking number, the court location and date of arraignment, and the visiting hours and location for your family member.
- Inquire as to your relative's status and estimated length of stay at this facility. Ask if he or she is expected to be released directly from CRF (this sometimes happens for minor offenses) and ask for the time and place so you can be there to pick them up. If your relative is severely ill, ask if the mental health worker could make application for him or her to go to the PEC/CSU for crisis intervention or evaluation of the need for a "5150". (i.e., evaluate the need for involuntary treatment)

Step 3: Contact the Correctional Mental Health Jail Team

- **From 8:00 a.m. - 5:00 p.m**. call Correctional Mental Health 661-868-6895
    - Staff are available 7 Days a week 8:00 a.m. to 5:00 p.m. Inform the mental health staff your family member has a mental illness and has been arrested. (Use the form on the following page to provide information to mental health staff)

- **Leave a voicemail message** if you are calling after 5:00 p.m. or if no one answers. Provide your contact information and your call will be returned as soon as possible. **You may also fax the information to (CRF) 661-868-5312 or (Lerdo) 661-391-7978**
- **NOTE: Please be aware that if you have an active restraining order in place, Correctional Mental Health staff is limited in their conversation with you; however, any relevant mental health information about your family can be received and is very important and appreciated.**



Inmate Medication Form

Date:_____ **Booking Number:**_____

Inmate Information

Full Legal Name:_____ DOB:_____

Street Address:_____City:_____State: _____Zip:_____

Family Contact Information

Family Contact Name:_____Relationship: _____

Street Address: _____City: _____State: _____Zip: _____

Daytime Phone: _____ Evening Phone: _____

Psychiatrist/Treatment Facility Information

Psychiatrist (Current or last seen):_____Date Last Treated: _____

Street Address:_____City:_____State:_____Zip_____

Phone:_____ Fax: _____

Medical Information

Diagnosis:_____

Daytime Medications: _____

_____

Night Time Medications: _____

_____

Past Problem Medication Effects (i.e. side effects, allergies, medication that did not work):

_____

_____

When were medications last taken? _____

Is suicide a concern? No __ Yes__ If Yes, Why? _____

History of Suicide Attempts: _____

_____

History of Violence: _____

_____

Other Medical Concerns: _____

Medical Doctor's Names:_____ Office Phone:_____

Street Address:_____City:_____State:_____Zip_____

Pharmacy:_____Office Phone:_____

Street Address_____City:_____State:_____Zip_____

Correctional Mental Health Service

Fax Numbers

CRF (661)868-5312 Lerdo Jail (661) 391-7978

Legal Representation

When your family member is arrested, he or she may either retain a private attorney or use the Public Defender's Office. A Public Defender will be assigned at arraignment if your family member does not have or cannot afford a private attorney. Do not be afraid to use the Public Defender. Public Defenders often have knowledge of the "system" as it pertains to those who need mental health services. The attorney who appeared at arraignment and accepted the case for the Public Defender's Office will usually not be the attorney who actually handles the case. You should call the Law Office of the Public Defender at (661)868-4799 to learn the name of the Deputy Public Defender assigned to your relative's case.

It may take several days for an attorney to be assigned and police reports and other materials to be obtained. Phone calls should be made directly to the attorney assigned to your family member's case and faxed information should be directed to the assigned attorney by name. Remember, it is the inmate, not you, who is the client, so the attorney may not be able to share all information with you. Provide the attorney with an extensive history of your family member (medical, psychiatric, social, and educational). This written information will be very useful in pursuing the best outcome. A private attorney will grant you more time, but remember, you are paying for that access. If your family member decides to retain a private attorney, be sure to find one who is well versed in helping people with mental illness and understands not only the law, but also how to access the treatment facilities and mental health services that are available.

IMPORTANT: Think carefully about posting bail.

No one wants a loved one to remain incarcerated for any length of time. It is an unpleasant experience for the individual as well as the family. However, you must ask yourself the following question: Will your family member be able to comply with the terms of the bail and appear in court when required? Also, as hard as it may seem, for a person with severe mental illness who is in crisis, jail may be a safer place than wandering the streets with no help at all. At least in jail he or she will be fed, sheltered, and be given access to medication treatments.

Supporting and coping with a loved one who suffers from a mental illness can be extremely challenging and stressful. Knowledge, as well as your love and fortitude, will help you to be an effective support system for your relative.

This information was written by NAMI volunteers based on their own personal experience, to help families navigate the system. We are not attorneys, and this is not intended as a substitute for professional legal advice. Please assist your family member in obtaining proper legal representation.

Problem Resolution and Patients' Rights Advocate

There are times when you, as a family member, would require assistance from the Kern County Patient's Rights Advocate (PRA) to help your family member with mental illness. The Patients' Rights Office (PRO) oversees the Kern BHRS Problem Resolution process. The PRA works with the client, the client's family member or other representative, and the treatment providers to resolve issues that can be addressed locally. The PRO generates and notifies beneficiaries of the disposition/resolution plan within mandated guidelines.

The role of the PRA is to assist clients in expressing their wishes, if so requested by the client. There may be a difference between clinical best interest and the client's expressed wishes at times.

The PRA does not form an opinion about a client's intention or a make a judgment call as to who is right; the PRA only helps to express the client's wishes and protect their legal and human rights.

At the same time, it is the PRA's responsibility to give the client enough information so that he or she can make an informed decision. The PRA has the right to investigate complaints and issues at any level of the mental health treatment system, including at the mental health hospitals and hospital emergency departments, as statute and law requires.

The PRA does not need a signed consent from the client to advocate for him or her, or to attend meetings with the therapists, case managers or doctors regarding the client's expressed interest. The PRA is also allowed access to the client's treatment record. These responsibilities are given to the PRA through the WIC (Welfare and Institutions Code) and the CCR (California Code of Regulations).

For more information about Patients' Rights and Family Advocacy, please call the Patients' Rights Office at 844-360-8250.

FAMILY SUPPORT GROUPS

National Alliance on Mental Illness (NAMI)

NAMI is the nation's largest mental health organization dedicated to improving the lives of individuals and families affected by mental illness. Many NAMI affiliates offer an array of support and education programs for mental health clients and their families.

NAMI Kern County Information Line: (661)858-3255

- **NAMI Kern County, Bakersfield**
  Peer Support Meeting
  Contact: Amy (661)247-5426

  Day: Fridays
  Time: 3:00-4:30pm
  Place: Beale Library Lake Room
  701 Truxtun Ave. Bakersfield, CA 93301

  Day: 2nd and 4th Tuesday of each month
  Time: 6:00-7:30pm
  Place: Consumer Family Learning Center
  5121 Stockdale Highway Ste. 150A Bakersfield, CA 93309

  Family Support Meeting
  Contact: Cindy (661)805-6604

  Day: 2nd and 4th Tuesday of each month
  Time: 6:00-7:30pm
  Place: Consumer Family Learning Center
  5121 Stockdale Highway Ste. 150A Bakersfield, CA 93309

  Suicide Survivor Meeting
  Contact: Ellen (661)868-1552

  Day: 1st and 3rd Tuesday of each month
  Time: 6:00-7:30pm
  Place: Consumer Family Learning Center
  5121 Stockdale Highway Ste. 150A Bakersfield, CA 93309

  Family-to-Family Program
  A free 12-week education course for family members offered twice a year (Spring and Fall). Please contact NAMI at (661)805-6604 for information and starting dates.

Peer-to-Peer Program

A free 9-week education course for clients offered twice a year (Spring and Fall). Please contact Amy at (661)247-5426 for information and starting dates.

- **NAMI Kern County, Ridgecrest**

  Peer Support Meeting

  Contact: Janet (760)384-8672

  Day: Tuesdays

  Time: 4:30-6:00pm

  Place: Hope Center

  1400 N. Norma St. Ste. 137 Ridgecrest, CA

  Family Support Meeting

  Contact: Janet (760)384-8672

  Day: Tuesdays

  Time: 6:00-7:30pm

  Place: Hope Center

  1400 N. Norma Street Ste. 137 Ridgecrest, CA

Suicide Hotlines and Helplines

Kern Behavioral Health & Recovery Services Crisis Hotline

24/7 telephone support

1-800-991-5272

National Suicide Prevention Lifeline

24/7 telephone support

1-800-273-TALK(8255)

www.suicidepreventionlifeline.org

Kristin Brooks Hope Center

24/7 National Hopeline

1-800-SUICIDE(784-2433)

(877)838-2838 – 1-877-Vet2Vet…Veterans peer support line

(800)784-2432 – 1-800-SUICIDA…Spanish speaking suicide hotline

(877)968-8454 – 1-877- YOUTHLINE…Teen to teen peer counseling hotline

(800)472-3457 – 1-800-GRADHLP … Grad student hotline

(800)773-6667- 1-800-PPD-MOMS….Post-partum depression hotline

For a list of hotlines outside the US go here: **www.befrienders.org**

Mental Health Related Resources/Websites

NAMI National

www.nami.org

NAMI California

www.namicalifornia.org

NAMI Kern County

www.namikerncounty.org

Children's Mental Health Website

www.kidsmentalhealth.org

National Institute of Mental Health

www.nimh.nih.gov

National Mental Health Association

www.nmha.org

Depression and Bipolar Support Alliance

www.dbsalliance.org

International OCD Foundation (for Obsessive-Compulsive Disorder)

www.iocdf.org

Anxiety and Depression Association of America

www.adaa.org

The Trevor Hotline (866)488-7386

www.thetrevorhelpline.org

A free and confidential crisis and suicide prevention helpline for lesbian, gay, bisexual, transgender, and questioning youth, offering hope and someone to talk to 24/7.