

# AMI Newsletter



ALLIANCE FOR THE MENTALLY ILL  
of San Mateo County  
(Formerly P.A.S.)

P.O. Box 3333  
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San Mateo, Co. 94403  
(415) 573-5345

## Meeting Schedule

OCTOBER 1982

Hrs 1-4 pm, Mon-Wed-Fri

### OCTOBER MEETING

Date: October 27, 1982  
Time: 7:30 PM  
8:00 speaker

Place: San Carlos City Hall  
666 Elm St., San Carlos

Speaker: Louise Wensel, M.D.

Dr. Wensel practices orthomolecular medicine in Palo Alto, and comes highly recommended by an AMI member whose daughter is her patient.

Dr. Wensel believes in giving a complete physical examination before beginning psychiatric treatment.

She holds three evening meetings per month on Wednesdays for families interested in learning more about her practice.

### CORDILLERAS CENTER

The transition in management to Telecare was going smoothly. Telecare will be hiring more personnel. The Union contract was signed with a 5% increase plus more vacation and leave time. The equipment owned by Mental Health Management was purchased by Telecare.

The patient representative reported that the food was good. Patients seem unconcerned about the transition. They are more concerned regarding conservatorship. 20% request jury trials and 5% are granted them.

The patients are expected to spend 27 hours per week in various programs.

The current census is 104 with 7 from San Francisco.

Someone from Telecare management will speak at the November meeting of the Mental Health Advisory Board.

Reported by Dorothy Texier

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### BUTTE COUNTY

At a meeting with Families for Mental Recovery of Butte County, we ran into some old friends from San Mateo. Charlene Kavanagh, formerly with PAS, was an active member of the family group. Lisa DeMatteis who with her sister Marcia, ran board and care homes in San Mateo, now has two homes in Butte County. One is for D.D. and the other for M.D. We were interested in Lisa's description of her home for mentally ill. She said it was several miles out of the town of Paradise, near a lake. It had formerly been a hunting lodge and had been converted to a board and care home. She cares for 15 people (coed), those who are the most difficult to handle. She reported that she could manage because of the somewhat isolated location.

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### MENTAL HEALTH ADVISORY BD MEETING 10/6/82

Of interest to AMI members, Ms. De Luca introduced members of Telecare, new management at Cordilleras. Mr. Peterson reported that transition went smoothly because of excellent cooperation by Mental Health Management. The program and staff are intact. Telecare administrators will be the November speakers.

### Other Mental Health Meetings:

1st Wed. Mental Health Advisory Bd  
Every Month 12:00-2:00 pm Multipurpose Rm  
Hlth & Wlfr Bldg, 37th S.M.

3rd Sunday Family Advocates for Mentally  
Every Month Ill Napa State Hospital,  
Music Rm 11:00 to 1:00 pm.

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### MATEO LODGE AND DEXTER HOUSE

More board members are needed for the Mateo Lodge and Dexter House Board. If you are interested in community care, join the board and help to run these homes. For information call:

Mark or Dan at Dexter House, 365-9453  
Tony or Fidelina at Mateo, 365-7043  
Ian Adamson 408-336-5336

Ian Adamson, Coordinator

Ed Note: A true feeling of community was provided by Ian Adamson and Ansie & Henry Sperry who hosted a delicious Chinese dinner for clients and board members of Mateo Lodge and Dexter House, at a Palo Alto restaurant.

We all had a great time and thank the Sperrys for their generosity.

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Congratulations to Sally Mishkind, the newly elected President of the State Mental Health Association.

Mental Health Advisory Bd continued:

The Letter of Intent presented by San Mateo county to participate in the Pilot Program for consolidation of fee-for-service Medi-Cal and Short/Doyle was accepted by the state. Ms. De Luca reported that they are now exploring funding and waivers before making a final decision to be part of this project.

It was also reported that the census at Napa is the lowest in history. There are now 56 patients there, 11 children and adolescents, 6 long term geriatrics, and 39 adults.

The entire treatment staff at Guadalupe Health Center is out because of a disagreement with the Administrative Director of the contract. RFPs for a new contract are being developed.

Juan Lopez reported on Federal Block Grants for Consultation and Education, which are being funded in Regions I, III, and IV. Since there is about a 25% cut in funds, they had to choose some priorities. The following were chosen: Elderly, minorities, child-adolescent, & developmentally disabled.

A report was given on Cornerstone, the facility for 6 adolescents, which opened 2 years ago in San Mateo. It has served 35 young persons in the 2 years and reports good results. Of the 35, 1/3 returned to their homes, there is a 29% recidivism to hospital, (most had been hospitalized previously), 3 have gone to college, 2 to the military, 4 are employed. The treatment is behavior management, average stay 4.6 months, with a limit of one year.

Sue Miller, Observer

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ED NOTE: One wonders why the Developmentally Disabled are one of our priorities, as noted above - Federal Block Grants.

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In these days when the choice is "least restrictive" or "least expensive", rather than "most therapeutic" environment for patients, the following story is typical of those heard not only in Oregon, but in California and throughout the U.S.

From the TASK FORCE FOR THE MENTALLY AND EMOTIONALLY DISABLED Newsline, Sept 1982:

TMED REQUESTS REVIEW OF PATIENT'S CASE

TMED has asked the Critical Incident Committee to review the discharge of a 20-year old patient who was released from Dammasch three months before his involuntary commitment expired. Less than a month later, he committed suicide. Twice before his death, according to TMED's information, he tried to get back into the hospital. Once he was taken there by police and released again.

Some of his last days were spent in jail on a trespassing charge. His family understands that his public defender and jail personnel also tried to get him into the hospital.

At the time of his death he was living in the Bridgeport Hotel on Burnside, a placement made by the hospital. (The Bridgeport is the hotel with the cockroaches which we saw on Channel 2 in May.)

We are requesting a review of this case because we believe this patient represents a sizeable number of our chronically mentally ill who don't fit into any of our existing programs.

This person had a history of severe illness and had spent a good part of every year since his 17th birthday in the hospital. On release he was never well enough to live in a licensed home where he was expected to participate in a day program. Instead, he went to a westside boarding house until, finally, even the boarding house wouldn't take him.

He was a difficult patient to place. There is no question about that. He had a history of taking drugs. He wouldn't follow the rules. His mother says he wasn't so much defiant as oblivious to everything around him. He could not fix his own meals or follow through on the instructions for his medication.

The Bed Reduction Plan proposes to keep patients like this 20-year old out of the hospital. Where? In Burnside hotels? Jails? We have asked the Critical Incident Committee to determine what housing alternatives were available to this patient and what housing alternatives are available to others like him.

We are also asking the Committee to review the hospital's evidence that this patient was ready for release.

Note: The Portland, Oregon, Mental Health Division has appointed a Critical Incident Committee, made up various disciplines, including a member of TMED (the family group), to monitor state hospital bed reduction.

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IN APPRECIATION

Treasurer for the California Alliance for the Mentally Ill, Nelson Thompson, wishes to thank each of you for honoring your pledges to support our Sacramento office and the efforts of its staff. Checks may be made to: CAMI  
Mail to Nelson Thompson, 12228 S. Julius Ave., Downey, CA 90242

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Election day is Nov. 2. Let each of us carefully consider the issues and candidates before we vote. The actions or non-actions of our legislature and congress greatly influence the mental health scene.