
NAMI EAST BAY NEWSLETTER

A local affiliate of the National Alliance on Mental Illness (NAMI)

May-June 2018

Addiction and Mental Health

Wednesday, May 23

“With the legalization of marijuana, it is important to discuss the effects of cannabis on mental health,” says **David Kan, MD, DFASAM.**¹ He is a clinical psychiatrist specializing in addiction psychiatry, forensic psychiatry, general adult psychiatry, and psychopharmacology. He is on the UCSF Department of Psychiatry Clinical Faculty and has a private practice located in Walnut Creek. Dr. Kan has received multiple awards and honors in the areas of addiction medicine and clinical instruction in psychiatry, and has made extensive contributions with his work in guidelines for physicians working in opioid treatment programs. He gives frequent presentations on Smoking Cessation and Chronic Mental Illness; Stimulants, Psychosis, and Treatment; Cannabis; and Post Traumatic Stress Disorder.

Please bring your questions and join us for an interesting evening.

Speaker Meeting starts at 7:30 pm

Albany United Methodist Church
980 Stannage Avenue, Albany
Corner of Stannage and Marin

Meeting is free and open to the public.

Support Meetings

NAMI East Bay offers the following monthly support meetings:

- **Support and Share Group for Families of Adults** is held on the 2nd Wednesday of each month. The next meetings are May 9, June 13, and July 11.
- **Support and Share Group for Families of Children, Adolescents, and Young Adults** is held on the 3rd Tuesday of the month: May 15, June 19, and July 17.

¹ Distinguished Fellow – American Society of Addiction Medicine.

Support Group Meetings are held at the Albany United Methodist Church, 7-9 pm. Enter through the gates to the right of the door on Stannage Avenue, turn left through the large room, go down the hall, and come up the stairs. Signs will be posted.

All support meetings are free to NAMI members and non-members, offering a chance to talk with others who understand, give emotional support, and share ways they have found to cope.

Help Needed on Re-Chartering

All NAMI affiliates across the country are having to go through a re-chartering process. This involves, essentially, getting all our legal ducks in a row through updating and fine-tuning our bylaws, putting legal documents on file, setting up a financial audit, signing off on statements of intent, etc. Note: this isn't what many of us got involved in NAMI to do. Our time will be consumed by paperwork. Nevertheless, here we are.

If any of our readers are (1) kind attorneys with a background in non-profit law, who could give us a couple of hours and look over our bylaws, or (2) kind financial folks who can review our financial status and recordkeeping, let us know. We'll be ready for help later this month and would appreciate some *pro bono* assistance.

Peer Support Groups

We get many calls inquiring about support groups for relatives with mental illness. Such groups are offered through Kaiser and the Wellness Centers, and we are excited to announce that plans are under way to get a local peer-run group going. Six individuals from three Alameda County affiliates have signed up to receive facilitator training through the NAMI Connection program this summer. When completed, our local Connection group will operate at the same time as a family support group—a model that operates successfully elsewhere.

SPEAKER NOTES

Issues in Managing Adult Residential Facilities

Summarized by Thomas T. Thomas

Locating decent housing for a loved one is among the greatest frustrations families face. At our March 28 meeting we heard from **Sharon Hawkins Leyden, LCSW**, who is Director of Coordinated Entry Systems at the [Berkeley Food & Housing Project](#) (BFHP), and from **Megan Liu**, who is the second generation in her family to manage licensed board and care facilities for people living with mental illness in the East Bay. Liu is also an Assessment and Outreach Specialist with the veteran-support group [Swords to Plowshares](#). Both of the speakers shared a wealth of information, including elements of quality licensed adult (age 18-62) residential housing and the trends that are responsible for the closure of decent housing for people living with mental illness.

Leyden has a 33-year career of working with the homeless, 23 of them in the Bay Area. Before joining BFHP three years ago, she was also supervisor of the [Russell Street Residence](#) in Berkeley. This assisted-living, senior-care facility has 17 residents, of whom only one has required hospitalization in the past five years—a testament to the high level of care. “Russell Street is a good model for keeping people safe and thriving,” Leyden said. Russell Street is also ranked in the top five such facilities in the Bay Area.

The model looks at the whole person in terms of their mental health, nutrition, skill building, and issues of isolation. In the case of Russell Street and similar facilities, Leyden described five important factors for success:

- **Funding**—Russell Street is partially funded by a U.S. Department of Housing and Urban Development (HUD) grant, with a small amount of funding from the City of Berkeley, plus private donations. It has a yearly shortfall of about \$30,000, which they always manage to make up. Residents at the facility also pay one-third of their income, such as from Social Security. “But if their income is zero,” Leyden said, “then they pay zero.”
- **Direction**—the current manager, Annette Suggs, has 19 years of experience and, on a personal note, she is the youngest in a family with 14 brothers, so

she knows how to deal with people. She treats the residents and staff at Russell Street as an extension of her family.

- **Staff**—the team supporting Suggs is close-knit with low turnover. Everyone shows up on time and knows what to do.
- **Mental health support**—the facility has a close relationship with Berkeley Mental Health (BMH), the city’s own behavioral health services department.² Most of Russell Street’s residents are BMH referrals and come with an assigned clinician, so residents get clinical care on a daily basis and in a crisis. “Without support from BMH, this level of care would be difficult to achieve,” she said.
- **Community support**—Russell Street participates in activities like a community garden and classes in nutrition, computers, and life skills.

“The goal,” Leyden said, “is to have people leave to go to independent living.” Russell Street has had two residents leave in the past two years, which opens up its limited space.

Russell Street depends on its HUD grant, for which the facility has to file a renewed application every year. But a few years ago HUD issued a ruling on “coordinated entry.” This calls for the homeless people in each county to have one point of entry into supported housing and use one tool that ranks them according to factors such as those with the longest period of homelessness, greatest degree of poverty, and highest need, including mental illness. Leyden has been working on this entry tool at BFHP. She notes that Berkeley currently has about 1,000 people sleeping on the streets each night, while Albany has 66 homeless people. In Contra Costa County, the decision has also been made to “streamline” the county’s homeless shelters, so that only those with the highest level of need are served.

The result of this change in intake means that facilities like Russell Street may not get referrals from BMH, with all the clinical support that comes with them, but instead will get placements from high-scoring homeless people in the “north county” area (i.e., Berkeley, Albany, and Emeryville).

² Berkeley is the only city in California with its own mental health program. All the rest are served by county functions, including San Francisco, which operates its mental health services at the county level.

When one member of the audience asked about her son getting “blown off” the waiting list for housing, Leyden explained that HUD does not want lists but a dynamic pool of people to be served. “But for every bed in a board and care facility,” Leyden said, “there are hundreds of people trying to get in.”

She noted that HUD also offers housing vouchers under Section 8, which allow a person to obtain market-rate housing for one-third of their income and get needed support once a month. But she called this “Willy Wonka’s Golden Ticket,” because Alameda County only offers fifty such vouchers a year.

Megan Liu said that California will soon experience a major shift in adult residential facilities.³ The trend is going to shut down board and cares as a private industry—owned, managed, and operated by individuals or a company, as hers is—in favor of operation by the state or a nonprofit organization. One aspect of this trend that she noted was changes in state licensing.

Her family business is regulated by the [Community Care Licensing Division](#) (CCLD), which maintains offices in most major cities, including Oakland. The business had one licensing analyst, who worked with them consistently for ten years. After a funding decision in 2012, the CCLD sent Liu’s facility three different analysts in two years, and some of them knew less about the rules than she did. “The analyst is supposed to advocate for the residents,” Liu said. But the trend now is for the analyst to visit once every five years if there is no complaint. And with a complaint—which must be founded—the analyst is required to show up within five days.

Many board and cares are unlicensed, but Liu suggested that NAMI should advocate for shutting them down. Her reasons were that such facilities are unregulated and there are no requirements for staff training or licensing of administrators, no capacity limits, no nutritional standards, and usually no overnight staff. Most of these facilities, she suggested, are only in business to collect the residents’ Social Security checks.

³ Liu distinguished between adult residential facilities (ARFs) and residential care for the elderly (RCFEs). ARFs are for people 18 to 62, and people with mental illness need to be diagnosed before age 18 to be admitted. RCFEs are for people 62 and older and provide a different level of services.

The reason many private board and care owners are getting out of the business are threefold. First, they are frustrated with CCLD administration. For example, one analyst told Liu that residents could keep medications in their rooms—and that is simply not true. Second, many licensees own the residential property, and they can find a better use for it in the current housing market. And third, the SSI cap on housing expenses for the disabled, currently \$800 per month, has not increased while facility costs are going up. In Oakland, the average cost of maintaining a bed in a board and care, including food and medication administration, is \$3,000 per month.

As a result, there are simply no new, licensed facilities for the mentally ill in the Bay Area. Some of the alternatives are home health care, if you can afford it. This service can provide aides for cooking, cleaning, and other chores but may not be equipped to serve people needing a higher level of care. And Medicare will pay for In Home Support Services (IHSS), which does not include providing staff and caps the hourly wage it will pay.

At the end of the meeting, NAMI East Bay President Liz Rebensdorf described her and Vice President Margot Dashiell’s work on the housing issue in Alameda County. One project is the Independent Living Association (ILA), which seeks to create a middle ground between licensed and unlicensed board and cares. Under this program, the county wants to leverage privately owned houses for unlicensed room-and-board spaces for adults who do not need medical supervision. The ILA would provide education and training for operators, perform annual visits, and offer advocacy and a complaint process for residents. The program is currently working in San Diego (see <http://ilasd.org>).

Dashiell is also working with the Supportive Housing Collaborative of the East Bay to encourage creation of support services in new housing for people with mental illness.

In closing, Sharon Leyden noted that MediCal is building a platform that will eventually provide supported housing under MediCal billing.

Past articles in the Speaker Notes series are available online at www.thomasthomas.com under “NAMI East Bay.” Also available is a copy of the brochure “Medications for Mental Illness.”

Lakehurst Weekend Meal Program

Kenneth Thames is a retired IBM salesperson who served as keyboardist/song leader in the pilot Culture of Inclusion Project at the Lakehurst Hotel, a single room occupancy (SRO) hotel near Lake Merritt in Oakland. He was part and parcel of its success in demonstrating the power of in-site programs in reducing isolation and improve functioning of people living with serious mental illness. During his tenure at the hotel he learned that residents faced regular bouts of hunger.

As a result of his on-going dedication in delivering meals to residents of the Lakehurst, he was the recipient of the 2017 Mental Health Achievement Award from the Mental Health Association of Alameda County.

—Margot Dashiell, Vice President, NAMI East Bay

Upon learning that the Lakehurst did not serve meals on weekends, I contacted grocery stores, food banks, and others doing work around food insecurity. The responses to my requests for food were overwhelming. The organizations were more than willing to make available safe and healthy food items that might have otherwise ended up in compost bins. The program is well into its third year of operation.

Every Friday morning and evening, ready-to-eat food items are gathered and delivered to the residents. The operation is very informal. I load my car with the items, the residents gather around the car, and the distributions are done in an orderly manner without the need for queues. It is a good thing to see the residents sharing and passing food around to a resident who may not be as mobile, to another who may be shy about receiving food, or to another who may be elderly.

Many of them will ask if they can take food to residents who, for a variety of reasons, cannot come down. There is genuine caring and a sense of community.

Without prompting, several of the residents assume leadership roles. They have taken it upon themselves to call residents to let them know my arrival times. Others will gently enforce orderly conduct, if needed, but it is rarely necessary. Never once has there been an incident to threaten the continuation of the program. The interactions among the resi-

dents during the distributions are always positive. There are many smiles on Friday, not only because there is food, but it has become an opportunity to congregate.

Last year I was able to form new relationships. For example, on some Saturdays, I distribute hot meals that are provided by local food banks. One contact is willing to provide as many dinners as needed. On the Saturday before Easter, I received forty-eight meals and gave each resident two meals, one for lunch and the other for dinner. This was especially welcomed since it was the end of the month, when most residents have run out of money. As always, the residents were appreciative. On those occasions when I am not available to make deliveries, I have enlisted a very supportive team of volunteers.

The Friday meal program has become an integral part of life at the Lakehurst. I hope we can keep it going.

—Ken Thames

Housing Contacts

One of our March speakers, Megan Liu, sent us some contact information for families who are looking for licensed adult residential facilities:

<https://secure.dss.ca.gov/CareFacilitySearch/Search/AdultResidentialAndDaycare>.

“As a reminder,” she says, “they can also call the Oakland Community Care Licensing Division office and request a list of facilities that accept SSI. This can help reduce the amount of time they would need to call facilities on their own.”

Oakland Adult & Senior Care Regional Office
1515 Clay Street, Suite 310, MS 29-21

Oakland, CA 94612

Telephone: (510) 286-4201

Fax: (510) 286-4204

This office covers both Alameda and Contra Costa counties.

Correction to UC “Sleep Study”

In our last newsletter, we misrepresented the research study being done at UC through the Sleep and Mood Disorder Clinic. The study deals with depression, not sleep, and is still recruiting subjects.

Treatment is free and participants will receive a no-cost, non-medication therapy for depression. Par-

ticipants need to meet criteria for depression and be available for one hour, once or twice a week, for four months. New participants will be enrolled through early 2019.

Contact depression.berkeley@gmail.com or call 510-643-3797. The project coordinator is Harukah Notsu.

Film Festival Saturday, July 7

As we did last year to celebrate Mental Health Awareness, NAMI East Bay invites you to our own film festival—no red carpets or celebrities but a showing of films dealing with mental illness/health, discussion afterwards, and refreshments. So save the date, Saturday, July 7, and in a couple of weeks we will be announcing the chosen films on our website, through flyers, and electronically. You can call our office or email us as well and we'll let you know what's playing. This is a no-fee event. We invite you to leave film recommendations with our office.

Immune System Disorders and Mental Illness

Researchers at [Houston Methodist](#) hospital believe that a significant number of people carrying a diagnosis of schizophrenia or bipolar disorder may have a treatable immune system condition. In 2007, anti-NMDA receptor encephalitis was found to cause symptoms similar to those in the mental illnesses. Antibodies produced by the immune system usually attack foreign substances, but this can go wrong and the attack goes against brain receptors. The study to explore this thesis is taking place now in Houston, with several phases of the study ongoing.

We mention this here because, first, this is being researched by six medical centers in Houston and, second, one of our NAMI members took his son to Texas for the study and is reporting significant improvement in symptomology. He'd be happy to discuss this with other parents. You can get the member's name and number from our office.

NAMI California Conference

This year, the annual conference for NAMI California, one of our mother organizations, will be held in beautiful Monterey on June 1 and 2.

These conferences are always well-run and informative, with something for anybody who has a personal or academic interest in mental illness. The theme this year is "United Voices: A Stronger California." There will be two main speakers, discussing Hip Hop Therapy and College Stress, along with multiple smaller workshops on such topics as crisis prevention, use of modern technology, mental health self-disclosure, environmental supports to cognitive dysfunction, and law enforcement mental health strategies. Take a look at the full agenda at www.namica.org and come along.

NAMI East Bay on Facebook

Despite all the hullabaloo about privacy and Facebook, the social media facilitator is still a major player in sharing with other people. Our NAMI East Bay Facebook page is being re-energized by board members Michael Godoy and Chris Hunter. If you think particular items of interest should be shared, send them to us at namieastbay@gmail.com and we'll forward your ideas to Michael and Chris.

Wellness Centers in Our Area

Wellness centers are located around the county and were developed to provide support to individuals with mental health challenges who want to manage their symptoms and move forward.

BACS (Bay Area Community Services) operates four centers, open 8:30-5 pm week days, in Hayward, Fremont, Oakland, and Pleasanton. Offered services are peer support, clinical and life skills groups, social outings, nutrition support, and—for those who qualify—psychiatry and case management services are available. Call BACS at 510-613-0330 or visit www.bayareacs.org and follow link to Modernizing Mental Health Services.

In North County, Bonita House offers two centers, Casa Ubuntu at Eastmont Mall in Oakland and Berkeley Creative Wellness Center. Check the website at Bonitahouse.org.



East Bay

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Albany, California, 94706
Time Value

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Are your dues paid
for 2018?
(Check Mailing Label)
Your Support Matters
Renew Now!

NAMI EAST BAY 2018 MEMBERSHIP

Please check your mailing label. If the code "18" is over your name on the right side of the label, your dues are current through 2018. If your mailing label indicates a previous year, or nothing at all, your dues are not current.

We urge you to mail your 2018 dues now. And if you can afford to add a bit more, please do so. Your \$40 NAMI East Bay membership gives you our newsletter six times a year, the quarterly "Connection" from NAMI-California, and the NAMI-National "Advocate." NAMI East Bay is nonprofit [501(c)3] and your dues and contributions are tax deductible.

Family Membership, \$60 per year Open Door Membership, \$5 per year

Make checks payable to "NAMI EAST BAY" and mail to NAMI East Bay, 980 Stannage Avenue, Albany, California 94706

Contact me for Family to Family Education Class

Name: _____ Phone No.: _____

Address: _____

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I'd like to volunteer:	<input type="checkbox"/> In the Office	<input type="checkbox"/> Grant Writing	<input type="checkbox"/> Membership Committee
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