

Testimony to LHC-Public Hearing on MHSA Report follow-up

May 26, 2016

My name is Teresa Pasquini. I am a resident of Contra Costa County and a Co-Founder of Mental Illness FACTS and a Right 2 Treatment. I am a proud colleague of Rose King, a co-author of Prop 63. I am also the proud mom of an adult son with schizoaffective disorder. His failed care has changed my family forever and drives my passion for him and all who still suffer without a right to treatment.

There is no accountability for the multiple failures and harm caused to my son and family. His care has been fragmented, rationed and harmful. Because of our family experience, I became a Mental Health Commissioner in Contra Costa County in 2006 when my son was stuck in the revolving door of hospitalizations. My son is now stuck in the revolving door of jail and state hospitals on an incompetent to stand trial hold. I believe the system is incompetent.

While Contra Costa was implementing their voluntary only MHSA programs, my son was involuntarily placed in every locked facility(except jail) that our county contracts. There was no community system of care that could provide him with the right care, at the right time and in the right place. There still isn't.

He is not alone. There are hundreds of psychiatrically disabled people in my community and across this state who are not getting access to safe, efficient, timely, equitable care. To be clear, I cheer successes and have worked as a volunteer to support system change all along the continuum of mental health care, whether Stage 1,2,3 or 4. When I joined the Contra Costa MH Commission in 2006, I joined every committee in our county that was working on implementing the MHSA. I was a leader on our county MHSA Stakeholder Committee and Chaired the MHSA/Finance Committee of our Commission. I also founded a Behavioral Healthcare Partnership at our local county hospital to connect the continuum of care for system improvements. I know what has worked and what has failed.

As a result of my family experience, I have shared my family story nationally at the Institute of Healthcare Improvement, the National Quality Forum, a Grand Rounds presentation at the University of Michigan and at a media event on Capitol Hill last May with a panel of families. 3 of the 6 families on that panel were from California. That is not something to be proud of. We told our horror stories of failed first care in California and our fight to win treatment before tragedy.

While I am aware of recent evaluations and their positive outcomes, that data is skewed and being provided in a vacuum because there was never a baseline to provide context for need. We can't measure successes based on selective programs and populations. We need to know the whole system gaps before we can claim progress. I consider the MHSA a tiny little pilot project that must be taken to scale to be proven effective.

All of the stories and outcomes of the Act are not positive and the Little Hoover Commission must hold firm on tightening the accountability, fiscal oversight, the need for a clear measurement strategy for outcomes and compliance with the law.

The system was and still is a fail first system for people with disabling serious mental illnesses. We still have a system of heroics, not a system of care. The consumers, family members and front line providers are drowning in crisis driven care and seeking access to anything with a hot and a cot. That is not transformation. We must stop the waste, fragmentation and blatant discrimination and fund a right 2 treatment for those who are disabled and filling our jails, streets and morgues.

Respectfully submitted,
Teresa Pasquini