

**BEHAVIORAL HEALTH ADVISORY BOARD  
ADULT SERVICES COMMITTEE  
MINUTES ■ Thursday, May 4, 2017**

<p><b>Present</b>          Karyn Bates, Co-Chair          Nancy Borchard, Co-Chair          Gane Brooking, BHAB          Ratan Bhavnani, BHAB          Rachel McDuffee, Aegis          Maria Meza, Aegis          Mark Stadler, CIT          Scott Walker, CIT          David Deutsch, NAMI          Jennifer Goble, Pacific Clinics          Dana Secor, Turning Point Foundation          Mark Schumacher, Turning Point Foundation          Denise Noguera, VCAAA          Dan Powell, VCMH Inpatient Unit</p>	<p><b>VCBH Managers/Staff Present</b>          John Schipper, Adult Division Chief          Pam Roach, Transformational Liaison          Peter Schreiner, Older Adults          Clara Barron, MHSA          Anna Flores, ADP          Debbie Conner, Management Assistant</p> <p><b>NEXT MEETING:</b>  <b>Thursday, June 1st, 2017, 10:00 a.m. – 12:00 pm</b></p> <p>Ventura County Behavioral Health          1911 Williams Drive, Training Room, Oxnard</p>
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Note: The committee has not yet approved these minutes. There may be additions/deletions or corrections before the minutes are accepted in final form.

	DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ ACTIONS	RESPONSIBLE
I.	<b>Call to Order</b> Co-Chair Nancy Borchard called the meeting to order at 10:05 a.m.		
II.	<b>Approval of the Agenda</b> Ms. Borchard asked the Committee to review and approve today's agenda.	The agenda was approved as written. <b>M/S/C</b>	
III.	<b>Approval of the Minutes</b> 1. Ms. Borchard asked the committee to review and approve the minutes of the April 6, 2017 meeting. 2. Denise Noguera requested that VII.H read: "Denise Noguera stated that Area Agency on Aging is aware of the community's need to provide housing. The Area Agency on Aging provides the social services, and the issue is with lack of housing that will take Section 8 vouchers." 3. A motion was made and seconded to approve the minutes as amended.	The minutes were approved as amended. <b>M/S/C</b>	
IV.	<b>Welcome and Introductions</b> Ms. Borchard welcomed everyone and asked for introductions.		
V.	<b>Public Comments</b> None.		
VI.	<b>Chair Announcements</b> 1. Ms. Borchard announced that she would need to leave early, and Co-Chair, Ms. Bates, will continue the meeting when she leaves. 2. Ms. Bates read a weekly memo on homelessness from Kay Wilson-Bolton, a BHAB member and the director of SPIRIT of Santa Paula. – Resources for Homeless and Hungry People City of Santa Paula. Ms. Bates shared this as a reminder of what is being done in the area and of the need for more assistance for the population this organization serves. Ms. Bates expressed her vision for creating a work group to assist in improving the future of affordable housing. Gane Brooking noted that Ms. Wilson-Bolton's business connections might be of value in this regard. Ms. Brooking noted that Continuum of Care is having a housing meeting this month, and she will find out when and interface with all who are working on housing.		

**VII. Presentation – Outpatient Psychiatric Observation Service (OPOS) and Hillmont Psychiatric Center (HPC) – Dan Powell**

Mr. Powell explained the history of A&R as a facility that for 20 plus years was being run inside of HPC. In January of 2017, this changed as the State declared that an outpatient facility could not exist in an inpatient unit. This year a flex plan was created that would allow an outpatient observation unit in an inpatient unit. A&R was dismantled and OPOS (Outpatient Psychiatric Observation Services) was created in its place.

The physical location has also changed. Patients are no longer located in one large room with the nursing staff. Instead, they are placed in beds in the inpatient environment. Another benefit is an increase in census: A&R could accommodate ten patients; OPOS serves twelve, with a 4:1 patient to nursing staff ratio. The average length of stay is 17-19 hours, with variance based on patient needs.

The State (California Department of Public Health) comes to look at the facility and data every four months. The State looks at many aspects of OPOS: length of stay (hopefully, less than 23 hours and 59 minutes), male/female ratios, voluntary vs involuntary admits, and more.

Mr. Powell opened the presentation up for questions from the committee:

Q: Ms. Brookings asked if OPOS is being notified about ERs that are sending patients out of county.

A: Mr. Powell stated that the problem was that emergency rooms were moving clients quickly, in part because they were not waiting to pass through the required screening process of sending the referral and labs to OPOS. Once OPOS was informed, they made a change in operations that has resulted in fewer patients being moved out-of-county. The change in operations allows for OPOS to accept an ER patient through a screening call to an OPOS nurse. The nurse may consult with a doctor if necessary before accepting the referral. If information is needed, a bed can be held until the information is received.

Q: How does person get from the ER to OPOS?

A: Usually by ambulance after the patient has had the required medical screening exam (MSE) at the ER. If the ER does not do the MSE, it will be done at the OPOS ER. OPOS staff will take the patient to OPOS ER, and may stay with the patient until the MSE is completed. There is a space designated for those who are on a hold and waiting for the MSE, so they are not in the ER with other patients.

Q: With OPOS, do clients need to go through an ER to be admitted?

A: Yes. It is part of the licensing requirement. OPOS cannot do the MSE as A&R used to do, so clients cannot be admitted directly to OPOS. The patient must have the MSE done at the ER, either the referring ER or OPOS ER. The treating psychiatrist also cannot do the MSE. Ms. Flores expressed concern that this process will escalate the client.

Q: Ms. Goble asked if patients would be waiting in the ER for hours.

A: Mr. Powell stated that once the MSE was completed, the patient would be admitted immediately. The only time a patient would have to wait would be if the OPOS was filled to capacity or if the client had medical needs that needed immediate attention.

Q: Ms. Goble asked what the process would be when someone such as law enforcement, a family member, or neighbor brought an individual directly to OPOS.

A: Mr. Powell responded that OPOS would do a screening and would have staff escort the patient to the ER for an MSE if the patient needed to be admitted.

Q: Ms. Goble asked whether consideration had been given to the hospital hiring peer support or recovery coaches to stay with the client rather than a "warm hand off."

A: Mr. Powell said, to his knowledge, it had not been discussed, but welcomed it as a suggestion.

Ms. Goble stated that the standing meetings OPOS has with referring hospitals might be a good place to discuss the idea of hospitals employing those with lived experiences, to create a "Friends in the ER" type group. Some members agreed that this was a good idea, and Mr. Powell suggested contacting the case managers or directors of the emergency rooms.

Mr. Walker stated that local ER might be more receptive than an overcrowded VCMC. A challenge law enforcement faces is when ERs are unable to maintain the clients who have been taken in on a 5150. At times, clients may walk away. This means PD must locate the client. One concern is that if the 5150 times out (72 hours) before the individual makes it to an LPS facility, a subsequent hold cannot be written, and the client may have a firearm back because the firearm prohibition never goes into effect.

Mr. Powell addressed this issue. He stated that a new process was recently put into place: Expiring 5150s typically go to the top of the list of admittance. If it seems another 5150 is needed, then the hospital will go to 5250.

Q: Ms. Brookings asked if any feedback had been given to the State that this may not be the best solution for people in crisis.

A: Mr. Powell stated OPOS has discussions with State when they do data collection and review every 4 months.

Mark Stadler stated that he views the changes as positive and expects they will improve over time as VCMC is no longer the only ER to receive 5150s.

Q: Mr. Bhavnani inquired as to funding and billing for services in OPOS.

A: Mr. Powell stated that the services are being paid for out-of-pocket, and OPOS is a non-revenue generating service, but he is hopeful that this may change. When these services were provided at A&R, they were billable.

Q: Ms. Bates asked if OPOS patients are ever placed at CRT (Crisis Residential Treatment).

A: Yes.

Q: Do OPOS patients ever move to other hospitals?

A: Yes, if insurance providers request/require/approve this, and it is appropriate.

Q: Ms. Borchard asked if there has there been communication with outside ERs about researching a patient's psychiatric background/care when they are brought in.

A: Mr. Powell stated there has not been communication about this, and Mr. Deutsch reiterated the concerns and problems created by this situation.

Q: Mr. Walker asked about ER doctors having authority to write 5150s and the potential for conflict of interest especially in cases where the ER might be full.

A: Mr. Powell stated he has observed good results from doctors who have been trained in this regard.

Q: Ms. Bates asked if there was anything to take to hospitals.

A: Mark Stadler responded that the number one staff request was for security. He expressed the idea that law enforcement would like to have a drop off CSU type facility as is seen in other parts of the nation.

	<p>Q: Ms. Goble asked if patients get medication when they come in to the ER.  A: Mark Stadler responded that this varies: While it used to be that they did, now it seems it's only when the patient is disruptive. Several board members expressed concern for patients who may suddenly stop receiving medication while in the ER, IPU, and Jail.</p> <p>Mr. Powell stated that the overall success of the new OPOS is due to hard work on the part of all partners, including hospital staff and law enforcement.</p>		
<p><b>VIII.</b></p>	<p><b>Members Comments</b></p> <ol style="list-style-type: none"> <li>1. Rachel McDuffee announced that the Simi Valley Treatment Center moved to 660 E. Los Angeles Avenue, and they are having an open house on May 24<sup>th</sup> from 3:00 p.m. – 6:00 p.m. Flyers for the event were passed out.</li> <li>2. Jennifer Gobles asked for a moment of silence for Dr. Barry Boatman, who passed away unexpectedly on April 29. Ms. Gobles expressed her gratitude for Dr. Boatman’s passion for serving clients and the tremendous loss the community feels at his passing. A moment of silence was observed.</li> <li>3. David Deutsch advised that an interim leader would be assigned, acknowledged the tremendous loss of Dr. Boatman to the community, and requested that the committee adjourn in Barry’s name.</li> <li>4. Opioid Conference with Gold Coast is May 5, 2017 at Ventura Marriott.</li> <li>5. NAMI Walk Saturday May 6 at Ventura Pier.</li> <li>6. Turning Point - Champions of Mental Health Brunch will be held Sunday, May 7<sup>th</sup> at 11:30 a.m. at the Crowne Plaza. Contact Mr. Schumacher to attend this free event.</li> <li>7. Ms. Borchard shared that an article about how emergency rooms might reduce suicidality will be e-mailed to board members.</li> <li>8. CIT is realigning goals and doing multi-county meet and greet with the following counties on May 18<sup>th</sup>: Kern, Santa Barbara, San Luis Obispo, and Ventura.</li> <li>9. CIT Academy May 22-26 at National University.</li> <li>10. VCBH Bipolar Seminar on May 18<sup>th</sup>. Must sign up on line.</li> <li>11. Birth announcement for Turning Point Clinical Director Kalie Matisek – a baby boy on April 11<sup>th</sup>.</li> </ol>		
<p><b>IX.</b></p>	<p><b>Update: Behavioral Health Adult Division – Dr. John Schipper</b></p> <p>A. SAMHSA Site Visit</p> <ol style="list-style-type: none"> <li>1. Opening Session - SAMSHA met with Elaine Crandall, John Schipper and Patricia Gonzalez and received overview of the Assist Program.</li> <li>2. Second session – SAMHSA met with Telecare and VCBH-RISE to walk through our process.</li> <li>3. Legal session – This session took place at the courthouse with judge and County Counsel and VCBH Patient Rights Advocate Tina Coates. It is becoming clear that California is an outlier in this process as California takes a less authoritative stance and puts less reliance on court orders than in other jurisdictions. Preservation of civil liberties in California is reflected in Laura’s Law as it requires that the person is offered voluntary services and refuses them. In other states, the person only must be deemed 'likely to refuse.</li> <li>4. Brian Stettin, who worked on Kendra’s Law, is now working with AOT. He is a strong advocate that Laura’s Law should be more forceful. He will be on a panel at the NAMI conference in August in Newport Beach. There will be a CCIT (California Crisis Intervention Training). Mr. Stettin has requested that VCBH attend this conference. VCBH will have the opportunity to contribute some data that will help illuminate whether court orders make a difference or vigorous outreach and engagement do.</li> <li>5. Stakeholder session – This was an honest and transparent session.</li> </ol>	<p>Information</p>	

VCBH has been asked to present on the stakeholder process at the upcoming conference in Virginia at the end of May. There was a great law enforcement presence that RDA (group that is evaluating data) had not seen in other SAMHSA visits.  
 People of Concern - monthly meetings are helping VCBH to collaborate with law enforcement.

6 Exit interview session – This session was held at the Telecare site.

B. Discussions with Tri- Counties Regional Center (TCRC): Elaine Crandall has been meeting with TCRC personnel along with VCBH managers Pete Pringle, Patrick Zarate and John Schipper. They are closing the three remaining Developmental Centers, which are akin to state hospitals. As a result, a large number of long-term residents will be released into the community. Only individuals who are assessed to be “not competent” will be placed in a facility, with a goal of “restoration.”

Tri-Counties has indicated that about 400 of their clients have a mental illness in addition to a developmental disorder. Tri-Counties will be reporting to VCBH the number of clients who are concurrently enrolled with both agencies. It is a relatively small number, but will have a huge impact on resources without a necessarily positive outcome. Discussions will continue.

C. Department of Rehabilitation has approached VCBH (Elaine Crandall and Sevet Johnson) with some joint grant opportunities for transitional aged youth.

D. WPC Whole Person Care – An endeavor to identify high utilizers (ERs, ambulatory care, psychiatric placement, and medical service expenses) Johnson Gil led meeting last week that was an intersection of different organizations. Sheriffs provided list of top 25 utilizers. The relationship between homelessness and mental illness is complicated; not all homeless people have mental illness as many people think. It seems about a third to half of the police departments’ high utilizers are mental health clients. The police are a bridge because they have the most facetime with the homeless and they have personal connections with many of the homeless. Part of the discussion included mobile units that provide showers and hygiene for homeless with a goal to get to know the people and then offer other services that they may need.

**X. Update: Behavioral Health Substance Use Disorders**

A. Working on setting rates for DMC ODCS and making progress. Will go live before January 2018. Finished last in series of required trainings May 3, 2017. Discussion about how rules will get tweaked under managed care.

B. Levels of care – Asking why some clients choose treatment at lower level than they need. The reason for treatment refusal is often not pathological, but human. Many times, the individual has a significant relationship, responsibility, or an animal that is a first priority.  
 Placement criteria is followed for those who are using Drug Medi-Cal. People can self-refer to lower level, but not higher level. We have several residential programs for people who have acute symptoms, but we don’t have housing options.

Information

**XI. Adjourn**

The meeting adjourned at 11:57 a.m. in memory of Barry Boatman.

**IF YOU ARE IN DANGER  
CALL 911.**

**IF YOU ARE DESPERATE  
CALL 211.**

It is free, confidential and available  
24 hours a day in over 150  
languages.

Counseling \* Domestic Violence  
Substance Abuse Services \* Housing  
Employment Resources  
Health Care \* Senior Services  
Food Assistance  
Resources for Parents  
Rental Assistance \* Real Estate Fraud

***Serving our homeless friends and  
neighbors since Christmas Eve 2008***

It was the cold and drizzly day when Richard Rios Soto died in one of our churches. He had been ill and his death turned into something positive for the homeless population in Santa Paula.

In that year Santa Paula had 97 documented homeless men, women and children. In 2014, there are 31. Our goal is to serve them all until the number reaches "zero". In 2016, there are 55 documented homeless. The number is not up. They were here all along, just not counted.

There is a shower program ahead and the Drop-In center is open from 9 – noon on weekdays. Food, water, necessities and service provider connections.

**SPIRIT of Santa Paula**  
***Santa Paulans Investing in Relationships***

***Of Integrity and Trust***  
A Non-profit Religious Corporation  
Organization 2405141 -- EIN 27-0005506

**Corporate Office:**  
113 N. Mill Street, Santa Paula CA 93060  
Direct to Kay Wilson-Bolton 805.340.5025  
Efax 805.258.7028  
www.spiritofsantapaula.org  
kay@spiritisp.org

**Resources for Homeless and  
Hungry People  
City of Santa Paula**

**24 Hour Contact:**  
Kay Wilson-Bolton 805.340.5025  
Lupe Servin - 805.625.4898 (Espanol)

Dawn Bavero, President -- 805.302.9939

W. John Kulwicz, Treasurer  
532 Glade, Santa Paula CA 93060

Kay Wilson-Bolton, Secretary - 805.340.5025

Lupe Servin, Director -- 805.418.4750

Dave Bavero, Director -- 805.201.8795

Dan McGranahan, Advisory Committee

William Simmons, Advisory Committee



Founded in 2002

**Resources for Homeless and  
Hungry People  
City of Santa Paula**

***Serving the Least Powerful and  
Most Vulnerable People  
in the City of Santa Paula***

Drug and Alcohol Counseling  
Biblical Counseling  
Connecting People with Resources  
Substance Abuse Services \* Housing  
Food Assistance  
Resources for Parents  
Real Estate Fraud Advisors  
Neighborhood Mediation

113 North Mill Street  
Santa Paula CA 93060  
805.340.5025 – 24/7

Director: Chaplain Kay Wilson-Bolton

**SPIRIT of Santa Paula – Hot Meal**  
For take-out and/or dining room

First Presbyterian Church  
121 N. Davis Street - 805.340.5025  
Many Meals Every Wednesday 5 pm – 6 pm

**THIRD SATURDAY OF EACH MONTH  
BOYS AND GIRLS CLUB 10 AM**

**Community Assistance (CASP)**  
First United Methodist Church  
133 N. Mill Street - 805.525.8890  
Every Monday – 8 am to Noon

**Santa Clara Valley CFL**  
217 N. 10<sup>th</sup> Street - 805.933.9800  
2<sup>ND</sup> AND 4<sup>TH</sup> Fridays – 9 am to 1 pm  
1 Friday 9 am to 10:30 am (fruits and vegs)

**St. Vincent de Paul – St. Sebastian's**  
235 N. 9<sup>th</sup> Street - 805.525.2149  
Thursdays 1 pm to 4:30 pm

**Templo De Milagros**  
133 N. Mill Street – 805.525.2244  
Every Saturday form 2 – 3 pm

**Valley Community Foursquare Church**  
611 E. Main Street - 805.525.4273  
Tuesdays from 9 – 10 am

**Lifeway Baptist Church**  
683 W. Santa Paula St. - 805.525.2420  
Monday – Friday – by appointment only

**SPIRIT of Santa Paula – Food Pantry**  
First Presbyterian Church  
121 N. Davis Street - 805.340.5025  
Every Wednesday 5 pm – 6 pm

**SPIRIT of Santa Paula – USDA plus**  
CENTURY 21@ building  
113 n. Mill Street Alley - 805.340.5025  
Every Saturday 2:30-3:30

**SPIRIT of Santa Paula – USDA plus**  
St. Paul's/Emmanuel Lutheran Church  
117 N. 7<sup>th</sup> Street, Santa Paula  
805.340.5025

Every Saturday 8:30 – 9:30 am  
**Lottery for position in line. Early birds not necessary**

**Freewill Baptist Church -Hands of Hope**  
Food and clothing - families and Veterans  
406. Acacia Road in Santa Paula  
Margarita Flores 805.746.9582

**EMERGENCY FOOD BOXES BY APPOINTMENT**  
805.340.5025 OR 805.525.2420

**Transportation:**  
Vista Bus from K-Mart, City Hall  
Countywide Transportation 1.800.438.1112

**Dial-A-Ride:** Fillmore: 805.524.2319  
Piru: 805.524.2319 Santa Paula: 805.933.2267

**Greyhound Bus:** 805.488.2706

**VISTA Dial-A-Ride does NOT operate on the following holidays:** New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day.

**Homeless & Housing Services/Shelters**  
Call Homeless Services for Housing Assistance  
805.385.1800

**RAIN Transitional Living Center** 805.389.3308  
1732 Lewis Road, Camarillo CA 93012

**Salvation Army (Intake)** 805.659.3598  
155 So. Oak Street, Ventura CA 93001

**Ventura County Rescue Mission** 805.436.4590  
234 E. 6<sup>th</sup> Street, Oxnard CA 93030

**City Center Applications** 805.487.3445  
(Women & Children's Shelter)

**The Lighthouse – Women and Children**  
805.385.7200 104 N. Hayes. Oxnard CA 93030

**You must call ahead. There are waiting lists.**

**Job and Career Centers**  
725 E. Main Street, Santa Paula 805.933.8300  
828 E. Ventura Street, Su. 200, Fillmore 805.524.8666  
4651 Telephone Rd, Suite 200, Ventura 805.654.3434  
635 So. Ventura Rd, Oxnard 805-204-5100

**Drug and Alcohol Counseling - 24/7**  
Jim Dexheimer 805.901.7479  
**Spiritual Counseling – 24/7**  
Kay Wilson-Bolton 805.340.5025  
Dawn and Dave Bavero – 805.221.8795

**Healthcare for the Homeless**  
**Walk-In Services:**  
**Santa Paula: Santa Paula Clinic**  
1334 E Main St Santa Paula, CA  
(805) 933-1122 (Call 805.340.5025for appointment)

**Fillmore: Fillmore Family Medical Urgent Care Clinic**  
828 Ventura Street, 805-524-8604

**Oxnard: Las Islas Urgent Care Clinic**  
325 Channel Islands Blvd, 805-483-0198

**Magnolia Urgent Care**  
2240 E. Gonzales Road, 805-981-5181

**Oxnard One Stop Clinic at Community Action of Ventura County** on Wednesdays, 8:30-11:30AM  
921 Richmond Avenue, 805-652-6694

**Ventura:**  
**One-Stop Center at Ventura Public Health**  
Tuesdays, 10AM to 1PM  
3147 Loma Vista Road, 805-652-6694

**West Ventura Urgent Care**  
133 W. Santa Clara Street, 805-641-5620

**Veterans Services**  
County of Ventura Veteran Services Office  
855 Partridge Drive, Ventura  
805.477.5155  
<http://www.ventura.org/human-services-agency/veteran-services>

**Mental Health**  
Crisis Team 1.866.998.2243  
STAR (Access to Mental Health Services)  
1.866.998.2243

Ventura County Mental Health Services 805.477.5700  
4258 Telegraph Rd, Ventura

**Rent & Utility Assistance – on Funds Available**  
St. Vincent de Paul 805.525.2149  
SPIRIT of Santa Paula 805.340.5025

**Subject:** The sad steps to homelessness. Week 433 Unfolds on May 3, 2017  
**From:** Kay Wilson-Bolton (kay@spiritsp.org)  
**To:** kay@spiritsp.org;  
**Bcc:** tapdancer805@yahoo.com;  
**Date:** Tuesday, May 2, 2017 9:54 PM



It begins when life is shaky on the economic front. Job loss, hours cut, schedule changes. It interrupts regular schedules for kids in school and daycare. Then comes the flat tire, dead battery, and registration with a smog required.

Pressure builds. Someone starts drinking and there is less money for utilities. Soon the rent can't be paid and the house or apartment is lost.

I have one such woman with grown children in a local motel. Alcohol and drugs are the problem of all three. They have been evicted from two motels and moved to their third today. Mental health is involved, Adult Protective Services and the Police. Until mom wants to quit drinking, there is nothing to be done. Nothing.

We had 20 people in one day at Richard's Drop In center last week. David Bavero is leading a Bible Study on Friday mornings with lots of encouraging words for each one. He is filling in for Pastor Jim Dexheimer until he is well enough to return. Maria Sanchez is hosting the Drop In Center and was once homeless herself with a five year old son. See, it can be done.

This Thursday is the National Day of Prayer with local people praying for the things that touch the heart of God. 7 pm at Chapel of Angels, 600 E. Pleasant Street, Santa Paula. Spanish-speakers prayer service at 7 pm, Puente de Vida Church, 203 So. 8<sup>th</sup>, Pastor Adele Garza leading worship.

Our menu tomorrow will be cold ham and pasta salad with raisins, bell pepper, celery and onions with a special caramelized onion sauce. Ooooooh la la. Buttered fresh carrots, romaine salad, orange slices and rolls.

Thank you everyone for your support. Pray for us when you think about it, would you. Sometimes, the work feels too hard.

The National Institute of Mental Health: [www.nimh.nih.gov](http://www.nimh.nih.gov)

## Emergency Departments Could Play Significant Role in Reducing Suicide Attempts

NIH-funded research shows an intervention that includes follow-up phone calls reduces the risk of future suicide attempts for people at risk

May 1, 2017 • Science Update

Suicide is the tenth leading cause of death in the United States. A significant proportion of individuals who die by suicide have made a prior suicide attempt, and often access emergency care (ED) services. Research funded by the National Institute of Mental Health (NIMH) now shows hospital emergency departments can play a vital role in lowering the number of suicide attempts among adults by as much as 30 percent.

In results published April 29, 2017 in *JAMA Psychiatry*, the largest ED-based suicide intervention trial ever conducted in the United States examined how screening in emergency departments, followed by safety planning guidance and periodic phone check-ins led to a 30 percent decrease in suicide attempts over the 52 weeks of follow-up, compared to standard emergency department care. The five-year Emergency Department Safety Assessment and Follow-up Evaluation (ED-SAFE ([www.nimh.nih.gov/news/science-news/2010/new-grant-aims-to-identify-and-reduce-suicide-among-emergency-department-patients.shtml](http://www.nimh.nih.gov/news/science-news/2010/new-grant-aims-to-identify-and-reduce-suicide-among-emergency-department-patients.shtml))) study involved nearly 1,400 suicidal patients in eight hospital emergency rooms across seven states.

“We expect that EDs are capable of helping individuals at risk for suicide attempts. Earlier ED-SAFE study findings showed that brief universal screening could improve detection of more individuals at risk,” said Jane Pearson, Ph.D., chair of the Suicide Research Consortium at the NIMH. “These recent findings show that if ED care also includes further assessment, safety planning, and telephone-based support after discharge, there is a significant reduction in later suicide attempts among adults.”

“We were happy that we were able to find these results,” said lead author Ivan Miller, Ph.D., Professor of Psychiatry and Human Behavior at Brown University, Providence, Rhode Island. “We would like to have had an even stronger effect, but the fact that we were able to impact attempts with this population and with a relatively limited intervention is encouraging.”

The collaborative effort included researchers at Brown University and Butler Hospital in as well as: Massachusetts General Hospital, Harvard Medical School; University of Colorado Depression Center; Cape Cod (MA) Hospital; University of Massachusetts Medical School; and the Division of Services and Intervention Research at NIMH.



CONTRIBUTED/NATIONAL PARK SERVICE  
Researchers with the National Park Service have started tracking this young male mountain lion dubbed P-56.

pus.  
"Milkweed is the host plant to the monarch butterfly, meaning that the monarch has to come down and lay their eggs on that particular plant," he said. "It can't be any other plant — it has to be milkweed."  
Giving youngsters the chance to

— it has to be milkweed."  
**DAVID SNOW**  
HORTICULTURIST

door space is filled with loose clusters of California native milkweed plants, intermixed with nectar-producing native plants including yarrow, coyote mint and California buckwheat.

See BUTTERFLIES, Page 5A

# America's veterans need help to find homes

**VETERANS**  
JC OBERST



Veterans need help from property landlords so they can use their HUD-Veterans Affairs Supportive Housing (HUD-VASH) vouchers to rent an affordable place to call home.

The VASH vouchers provide rental assistance to veterans and their families.

The Ventura County Homeless Count for 2017 was released in April, and 1,152 homeless individual and families were counted. Seven percent of the homeless reported they were veterans. Below are the numbers of homeless veterans reported for the past three years:

» 2017: 80 total homeless veterans; 30 sheltered, 50 unsheltered; 30 unsheltered chronically homeless.

» 2016: 77 total homeless veterans; 20 shelter; 57 unsheltered; 25 unsheltered chronically homeless.

» 2015: 108 homeless veterans; 21 sheltered; 87 unsheltered; 50 unsheltered chronically homeless.

The Ventura County Homeless Count report's first recommendation for the past three years has been to end homelessness among veterans. To achieve this goal in 2017 will take citizens and businesses working with government agencies by making more properties available for rent using vouchers. HUD issued 154 VASH vouchers for veterans to use in Ventura County. Currently, 45 are unused. If veterans could find housing using all the VASH vouchers available, we could reduce the number of homeless veterans in 2017 by 50 percent without needing any additional government funding.

Some veterans are issued vouchers and excited about the chance to find a home, only to be disappointed because they are unable to locate a property or landlord that will accept it. The VASH voucher has a time limit of 90 days from the time it is issued. If the veteran cannot find a place to rent, the voucher expires and will need to be reissued. If you are a property manager, now is the time to join us and serve those who served us by making your property available to veterans with VASH vouchers. You will find helping a veteran in need to be a rewarding experience.

If you are a property manager or landlord and want to help a veteran, please call me at 482-6550.

## Announcements

» May is Military Appreciation

See OBERST, Page 4A

## Happenings

May 3: 6:30 p.m., Moorpark proclamation

*Please join us for our*



# Open House

**05.24.2017**

**Defeating the Opioid Epidemic Together**

**Wednesday, May 24th 3-6pm**

**Call Deborah for more information at**

**(805) 522-1844 or email at**

**[dwinters@aegistreatmentcenters.com](mailto:dwinters@aegistreatmentcenters.com)**

**Aegis Treatment Centers**

**660 E. Los Angeles Ave., Suite B2**

**Simi Valley, CA 93065**



# nAMIWalks

National Alliance on Mental Illness

## Ventura County



#IAmStigmaFree

Join the **NAMI Ventura County** mental health walk to raise funds and awareness to help change perceptions about mental illness.

## JOIN THE MOVEMENT

### Saturday, May 6, 2017

## Ventura Beach Promenade

### Register and Donate Today!

[Namiwalks.org/venturacounty](http://Namiwalks.org/venturacounty)

For more information contact: Roberta Griego, [roberta@namiventura.org](mailto:roberta@namiventura.org) (805) 641-2426

## #NAMIWalks VENTURA COUNTY

- Read all papers fully. If you do not understand or cannot read the papers, tell the officer you need an interpreter.

**IF YOU ARE TAKEN INTO IMMIGRATION FOR "ICE" CUSTODY**

**You have the right to a lawyer**, but the government does not have to provide one for you. If you do not have a lawyer, ask for a list of free or low-cost legal services.

You have the right to **contact your consulate** or have an officer inform the consulate of your arrest.

**Tell the ICE agent you wish to remain silent.** Do not discuss your immigration status with anyone but your lawyer.

**Do not sign anything**, such as a voluntary departure or stipulated removal, without talking to a lawyer. If you sign, you may be giving up your opportunity to try to stay in the U.S.

**Remember your Immigration number ("A" number) and give it to your family.** It will help family members locate you.

**Keep a copy of your immigration documents with someone you trust.**

**IF YOU FEEL YOUR RIGHTS HAVE BEEN VIOLATED**

**Remember: police misconduct cannot be challenged on the street.** Don't physically resist officers or threaten to file a complaint.

**Write down everything you remember**, including officers' badge and patrol car numbers, which agency the officers were from, and any other details. Get contact information for witnesses. If you are injured, take photographs of your injuries (but seek medical attention first).

**File a written complaint** with the agency's internal affairs division or civilian complaint board. In most cases, you can file a complaint anonymously if you wish.

**Contact the ACLU of Southern California** at 213.977.9500 or [www.aclu-sc.org](http://www.aclu-sc.org)

The ACLU of Southern California is one of the oldest, largest and most progressive ACLU affiliates in the nation. Founded in 1923, we've never wavered in pursuing liberty, equal rights and economic justice for all.

**Become an ACLU member TODAY!**



**LIBERTY | JUSTICE | EQUALITY**

1313 W. 8th Street  
 Los Angeles, CA 90017  
 213-977-9500  
[www.aclusocal.org](http://www.aclusocal.org)

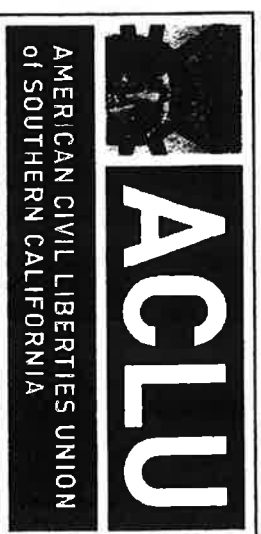


**MY RIGHTS CARD**

I am giving you this card because I do not wish to speak to you or have any further contact with you. I choose to exercise my right to remain silent and to refuse to answer your questions. If you arrest me, I will continue to exercise my right to remain silent and to refuse to answer your questions. I want to speak with a lawyer before answering your questions.

**KNOW  
 YOUR  
 RIGHTS**

**What to Do If  
 Questioned by  
 Police, FBI,  
 Customs  
 Agents or  
 Immigration  
 Officers**



**LIBERTY | JUSTICE | EQUALITY**

**WHAT TO DO IF YOU'RE STOPPED BY POLICE, IMMIGRATION AGENTS OR THE FBI**

**YOUR RIGHTS**

- You have the right to remain silent. If you wish to exercise that right, say so out loud.
- You have the right to refuse to consent to a search of yourself, your car or your home.
- If you are not under arrest, you have the right to calmly leave.
- You have the right to a lawyer if you are arrested. Ask for one immediately.
- Regardless of your immigration or citizenship status, you have constitutional rights.

**YOUR RESPONSIBILITIES**

- Do stay calm and be polite.
- Do not interfere with or obstruct the police.
- Do not lie or give false documents.
- Do prepare yourself and your family in case you are arrested.
- Do remember the details of the encounter.
- Do file a written complaint or call your local ACLU if you feel your rights have been violated

We rely on the police to keep us safe and treat us all fairly, regardless of race, ethnicity, national origin or religion. This card provides tips for interacting with police and understanding your rights. Note: some state laws may vary. Separate rules apply at checkpoints and when entering the U.S. (including at airports).

**IF YOU ARE STOPPED FOR QUESTIONING**

**Stay calm.** Don't run. Don't argue, resist or obstruct the police, even if you are innocent or police are violating your rights. Keep your hands where police can see them.

**Ask if you are free to leave.** If the officer says yes, calmly and silently walk away. If you are under arrest, you have a right to know why.

**You have the right to remain silent and cannot be punished for refusing to answer questions.** If you wish to remain silent,



This information is not intended as legal advice. This brochure is available in English and Spanish / Esta tarjeta también se puede obtener en inglés y español. Produced by the American Civil Liberties Union 6/10

tell the officer out loud. In some states, you must give your name if asked to identify yourself.

**You do not have to consent to a search of yourself or your belongings,** but police may "pat down" your clothing if they suspect a weapon. You should not physically resist, but you have the right to refuse consent for any further search. If you do consent, it can affect you later in court.

**IF YOU ARE STOPPED IN YOUR CAR**

**Stop the car in a safe place as quickly as possible.** Turn off the car, turn on the internal light, open the window part way and place your hands on the wheel.

Upon request, show police your driver's license, registration and proof of insurance.

**If an officer or immigration agent asks to look inside your car, you can refuse to consent to the search.** But if police believe your car contains evidence of a crime, your car can be searched without your consent.

**Both drivers and passengers have the right to remain silent.** If you are a passenger, you can ask if you are free to leave. If the officer says yes, sit silently or calmly leave. Even if the officer says no, you have the right to remain silent.

**IF YOU ARE QUESTIONED ABOUT YOUR IMMIGRATION STATUS**

**You have the right to remain silent and do not have to discuss your immigration or citizenship status with police,** immigration agents or any other officials. You do not have to answer questions about where you were born, whether you are a U.S. citizen, or how you entered the country. (Separate rules apply at international borders and airports, and for individuals on certain nonimmigrant visas, including tourists and business travelers.)

**If you are not a U.S. citizen and an immigration agent requests your immigration papers, you must show them if you have them with you.** If you are over 18, carry your immigration documents with you at all times. If you do not have immigration papers, say you want to remain silent.

**Do not lie about your citizenship status or provide fake documents.**

**IF THE POLICE OR IMMIGRATION AGENTS COME TO YOUR HOME**

If the police or immigration agents come to your home, you do

**not have to let them in unless they have certain kinds of warrants.**

**Ask the officer to slip the warrant under the door or hold it up to the window so you can inspect it.** A search warrant allows police to enter the address listed on the warrant, but officers can only search the areas and for the items listed. An arrest warrant allows police to enter the home of the person listed on the warrant if they believe the person is inside. A warrant of removal/deportation (ICE warrant) does not allow officers to enter a home without consent.

Even if officers have a warrant, **you have the right to remain silent.** If you choose to speak to the officers, **step outside and close the door.**

**IF YOU ARE CONTACTED BY THE FBI**

If an FBI agent comes to your home or workplace, **you do not have to answer any questions.** Tell the agent you want to speak to a lawyer first.

If you are asked to meet with FBI agents for an interview, **you have the right to say you do not want to be interviewed.** If you agree to an interview, **have a lawyer present. You do not have to answer any questions** you feel uncomfortable answering, and can say that you will only answer questions on a specific topic.

**IF YOU ARE ARRESTED**

**Do not resist arrest,** even if you believe the arrest is unfair.

**Say you wish to remain silent and ask for a lawyer immediately.** Don't give any explanations or excuses. If you can't pay for a lawyer, you have the right to a free one. Don't say anything, sign anything or make any decisions without a lawyer.

**You have the right to make a local phone call.** The police cannot listen if you call a lawyer.

**Prepare yourself and your family in case you are arrested.** Memorize the phone numbers of your family and your lawyer. Make emergency plans if you have children or take medication.

**Special considerations for non-citizens:**

- Ask your lawyer about the effect of a criminal conviction or plea on your immigration status.
- Don't discuss your immigration status with anyone but your lawyer.
- While you are in jail, an immigration agent may visit you. Do not answer questions or sign anything before talking to a lawyer.