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Marin County Board of Supervisors, District 2

Spring 2016

I'm thankful for the long and cool spring we had, but the heat that descended over Memorial Day weekend has signaled that summer is right around the corner. Looking forward to it, as well as the end of school, attendant tick-down in traffic, and the long, warm days providing some time and space for appreciating family, friends and this great community we are a part of. That said, no shortage of work to do, nor hot topics in District 2 and greater Marin. Updates on several in this issue: the Sir Francis Drake Corridor Improvement Project, meeting the challenge of homelessness, County Mental Health Services and Laura's Law.

As always, please never hesitate to contact me with your opinions, comments, questions, or concerns on these or any other issues. Email krice@marincounty.org or call 415-473-7825. You can also connect with me by "liking" my Facebook page at www.facebook.com/D2KatieRice and twitter at @SupervisorRice.

In This Issue:

Sir Francis Drake Corridor Improvement Project Update

Meeting the Challenge of Homelessness

County Mental Health Services and Laura's Law

Sir Francis Drake Corridor Improvement Project Update

As we all know and experience nearly daily, traffic volumes are at an all-time high and the ensuing congestion a major frustration for everyone dependent on our local roads to get around. The increase in traffic is impacting our overall quality of life, the environment and challenging our mobility as a community. Traffic volume has grown significantly over the last several years with a robust bay area economy and ensuing job growth (both within Marin and regionally) being the primary drivers. Add to that a booming school age population, meaning more car trips to and from school as well as after-school activities. And, yes, those of us without children at home are driving more too. The average Marin County household generates 10-12 trips per day now, versus six

trips per day when I was growing up. In fact, that six trips per day per household number was used by traffic engineers and city planners to calculate roadway capacity needs going forward when many of our major roadways were expanded in the 60's and 70's. Sir Francis Drake no exception.

Addressing today's traffic congestion will take a multi-prong approach including: maximizing the efficiency of existing roadways, reducing the number of cars on the road, and improvements in public transportation, including school bus programs, and programs encouraging biking, walking, carpooling and alternative commute modes.

The [Sir Francis Drake Corridor Improvement Project](#) is one such effort. Despite some claims (and press) to the contrary, the project is aimed at relieving traffic congestion and making safety and access improvements at intersections and on existing pathways for residents, students, and the disabled who are using the corridor without a car. The SFD project is a much needed opportunity to improve conditions for all modes of travel. And while it won't eliminate congestion or fix every safety issue through Kentfield and Greenbrae, it will certainly improve on existing conditions.

Over the last 18 months, County engineers and design team have conducted a comprehensive process which has integrated expertise in engineering and traffic planning with community input, observation, and real world experience. The process has included three community workshops, an open house, two onsite walking tours, regular meetings with a community advisory committee and technical working group, and several meetings with local organizations including the Kentfield Planning Advisory Board and Greenbrae Property Owners Association. The process has resulted in a list of project components aimed at improving congestion and safety in the corridor that have gone through technical analysis, been publicly vetted and discussed, and refined in response to public comment and concern. Total price tag for all of the improvements is estimated at \$19.2 million, while current available funding is \$13.2 million. Hence the need to determine what potential components to be implemented with existing funding, and what to be implemented through separate grants or other sources of funding.

Next steps in the process: environmental review as required by the California Environmental Quality Act (CEQA) for the entire scope of proposed project elements will begin this summer. Public hearings on the environmental report, final project and phasing determination should be able to occur towards the end of 2017. The construction schedule will be developed with the design plans, but the goal will be to schedule major construction for paving and rehab during summer months when there's less traffic. I will continue to keep the community apprised of progress on this and other important traffic/transportation improvement efforts. For more information, please visit the [project website](#), sign up to [subscribe](#) for updates and read this [IJ article](#) about the recent open house. Note that open house exhibits will be posted on website next week.

Meeting the Challenge of Homelessness

Homelessness is a serious and growing challenge here in Marin as it is elsewhere in the Bay Area and beyond, and nowhere more apparent than in San Rafael. Serving as a member of the Marin Mental Health Board, and as Co-Chair of the countywide Homeless Planning Steering Committee with San Rafael Councilwoman Kate Colin, has given me insight into the complexity of the issue, as well as the opportunity to better address homelessness in our community.

In recent years the County has expanded and become more innovative in its efforts to combat homelessness with increased funding for mental health and substance abuse services, investments in permanent supportive housing, and new programs aimed at getting the chronically homeless off the streets and into appropriate services and housing. I have also worked to strengthen the County's partnership with the City of San Rafael, the business community, and service providers with a specific emphasis on addressing homelessness in downtown San Rafael. Additionally, the County continues to work in partnership with the faith community to support the [REST program](#) in its current iteration as a temporary emergency shelter, and towards creating a permanent location for this important service. Homelessness is not just a San Rafael issue, nor just a County issue, it is a community issue. It will take all of us, working together, to truly make a difference.

Among the various initiatives and programs initiated by the County (often in partnership with others) during the past two years:

- To better serve and bring homeless with serious mental illness into services and housing, the County has invested significant new funding towards improvements at [Psychiatric Emergency](#), the launch of two [mobile crisis outreach teams](#), and increased funding to create additional capacity in our permanent supportive housing programs (housing and wrap around services for the mentally ill) as well as full-service partnership programs.
- In partnership with the City of San Rafael, launched a multi-disciplinary effort – the HOT Team –tasked with bringing San Rafael's homeless off the streets and into appropriate services and care. The team is comprised of lead staff from law enforcement, mental health and social services, the criminal justice system and service providers and is tasked with providing assistance to chronically homeless individuals most in need of services.
- Beginning in 2014, partnered with San Rafael to help fund the [San Rafael Downtown Streets Team](#), a program providing meaningful structure, work experience and a path off the streets and into stable housing for San Rafael's homeless population.
- Continued to support the emergency rotating shelter/ [REST program](#) while allocating \$500,000 in funding towards establishing a permanent site for the program.
- Financed (at a cost of \$2 million) and led the relocation of the 26 bed

[Helen Vine treatment facility](#), and funded and launched a three year, 10-bed pilot program for chronic alcoholics.

These and other initiatives and investments have increased our ability to address some of the root causes of homelessness, help some of our homeless stabilize their lives and get into housing, and make a positive difference for the community. The Board's recent increased investment particularly in our full service partnership programs will help to significantly expand capacity for homeless with mental health needs. This investment was made in lieu of adopting Laura's Law or Assisted Outpatient Treatment at this time. (More on Laura's Law below).

To close: Homelessness is an issue that will continue to challenge our community. But I am hopeful that with a concerted and coordinated effort, through partnerships across jurisdictions and departments, through the employment of new and innovative approaches, we can better manage this extremely sad and difficult community and societal issue. Visit my [website](#) for more information on homelessness and efforts being made.

County Mental Health Services and Laura's Law

As of January 2016, over 2000 residents suffering from moderate to severe mental illness were receiving mental health services through the County of Marin. Among those 2000, over 500 are receiving both mental health services and housing support through Full Service Partnerships or permanent supportive housing programs, or are in board and care facilities, crisis residential, or hospital or acute care facilities, many under full conservatorship. Estimates are that roughly 185 individuals with serious mental illness are not receiving the treatment and services they need primarily for lack of capacity at the appropriate level of care within the existing system.

In 2015, at the request of many throughout the community, I asked the director of Health and Human services, Dr. Grant Colfax, to make a comprehensive assessment of current county mental health services in the context of whether adopting/implementing an Assisted Outpatient Treatment Program (AKA [Laura's Law](#)) would make sense for Marin County at this time. Would the implementation help us get those needing help into service? Would it result in improved services and outcomes for the seriously mentally ill in our community? Would it help us to get those who refuse treatment into services?

First a summary of what Outpatient Treatment Program (AOT)/Laura's Law is and what it is not:

- AOT provides a legal mechanism to bring a referred individual into a civil court before a judge for assessment and determination as to eligibility and efficacy of court ordered intensive outpatient mental health services program.
- Eligible adults must meet set criteria for serious mental illness with repeated crisis events, and be refusing to voluntarily engage in mental health services.

- AOT does not allow for involuntary treatment or administration of medications, regardless of court order.
- AOT is not a substitute for interventions that treat the most seriously mentally ill, including [5150s](#) and conservatorships.
- Of 58 counties in the state, 15 have adopted some form of AB 1421 (Laura's Law), seven have implemented a program, five within the last year.

Dr. Colfax's analysis included a dive into the data being generated by two counties that have adopted Laura's Law (Nevada and Yolo), and other states that have similar laws in place. It also included a comprehensive assessment of Marin's current mental health care system: our current capacity, quality of care, and unmet demand within the community. His analysis was brought forward to the Board of Supervisors in February, and can be summarized with the following:

- An estimated 5 - 14 current Marin County residents suffering from serious/severe mental illness are potential candidates for Laura's Law. Another 180 individuals with serious/severe mental illness, but not meeting the criteria for AOT, would benefit from placement into services, or a different level of service and treatment than they are currently receiving.
- Adoption of AOT would require significant investment to both establish and implement administrative and court procedures, regardless of number of clients referred.
- The County is currently at capacity for clients needing high level of care and case management (at crisis acute, sub-acute facilities and in permanent supportive housing for stabilized clients); additional resources must be invested to expand capacity in order to appropriately serve new cases.

After much deliberation and listening to passionate and moving testimony from the public on all sides of the issue, the Board voted to not implement Laura's Law this year. Instead, we directed staff to do the following:

- Expand mental health system capacity, specifically at the high-level, acute-need level of care, hospital beds, permanent supportive housing, and full service partnership slots.
- Improve [Psychiatric Emergency Services](#), particularly around assessment, coordination of care, and placement and treatment plan post stabilization.
- Over the next 12 months, specifically target the identified population (AOT candidates and other severely mentally ill) for concentrated outreach and getting into treatment.

- Track and report back on progress with target population.
- Re-assess/re-consider adoption of AOT in spring of 2017.

The conversation around Laura's Law/AOT was a difficult one. Many individuals are in need of treatment, either refusing or not receiving the level of care that would be most beneficial while family members and the community at large must witness daily a fellow human being in need, and unhelped. While at the local level we work to improve the system and capacity, at the societal and higher governmental level, both laws and funding challenge our ability to be successful.

I believe that it was the right decision to make this past February, to increase our investment in capacity and quality of care and expand and improve our system in order to serve more of those suffering from serious and severe mental illness in our community. AOT may be the tool that will help get folks who have previously refused services into treatment, but implementing it at this time will divert funding into administrative and court costs and away from actual services and creating the additional capacity we need right now. The Board will assess progress made in both building capacity and bringing targeted population into treatment in spring of 2017 with the tools we have in place. And we will also re-consider Laura's Law, and whether it makes sense to adopt it here in Marin, at that time.

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