

\_\_\_ INFORMATION

TAB SECTION: F

X ACTION REQUIRED:

DATE OF MEETING: 10/18/12

Approve 5 Member Committee

DATE MATERIAL

PREPARED BY: Murphy

PREPARED: 09/24/12

---

**AGENDA ITEM:** 5-Member Patient's Rights Committee Discussion

**ENCLOSURES:** None

**OTHER MATERIAL RELATED TO ITEM:**

---

**ISSUE:**

As the 2012-2013 State Budget was being negotiated, one of the changes proposed in the Trailer Bill Language was to change the language regarding the mandated Patients Rights Committee from the mandated "shall" to the more permissive "may". The Council's comments on the Trailer Bill Language included the following recommendation and rationale:

- WIC 5259 (page 159) Remove "may" and reinstate "shall" *"be a five-person Patients' Rights Subcommittee...."* The DMH has recently completed a lengthy CRIPA review, and the Council recommended in 2010 that an advisory group be convened to continue to monitor the state hospitals for continued compliance. Therefore, we support the requirement for a Patients' Rights Subcommittee. We also believe that providers could offer valuable input and their inclusion should be considered for this subcommittee.

SB 1009 included the following language:

WIC 5514. There shall be a five-person Patients' Rights Committee formed through the California Mental Health Planning Council. This committee, supplemented by two ad hoc members appointed by the chairperson of the committee, shall advise the Director of Health Care Services and the Director of State Hospitals regarding department policies and practices that affect patients' rights. The committee shall also review the advocacy and patients' rights components of each county mental health plan or performance contract and advise the Director of Health Care Services and the Director of State Hospitals concerning the adequacy of each plan or performance contract in protecting patients' rights.

The Council is being asked to consider and discuss the following:

- How will this work with the existing committee structure? Will it be a new committee? Since this is an ongoing commitment, and not a project oriented task, it cannot really be considered an ad hoc committee. One option to consider is that the members can meet when the Executive Committee meets. This would preclude having Executive Committee members serve on the committee, but it also avoids creating an extra night's travel.
- The other question is around the appointment of two external people to participate in the committee. How should this be done? Who should be invited? From which organizations should we request participation? A few of the options to look at are:
  - NAMI – they have extensive experience creating ways to increase communications and improving treatment
  - Disability Rights California – they have extensive experience advocating for these populations and ensuring that their rights are not violated
  - California Hospital Association – they have been very active in the recent effort to clarify portions of the Lanterman-Petris-Short Act and offer perspective into treatment limitations and options.