

MINUTES OF THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA



14-4

During the oral communication section of the agenda for Tuesday, March 12, 2013, Nosente Unuti spoke on behalf of her son and requested that the Board establish an ASL peer group to help the deaf community.

**ATTACHMENTS FILED WITH
CLERK OF THE BOARD**

**AGENDA NO.
14-4**

**Riverside County Board of Supervisors
Request to Speak**

Submit request to Clerk of Board (right of podium),
Speakers are entitled to three (3) minutes, subject
Board Rules listed on the reverse side of this form.

SPEAKER'S NAME: Nosente Uhu.

Address: 6071 Pachappa Dr.
(only if follow-up mail response requested)

City: Riverside **Zip:** 92506

Phone #: (951) 788-9490

Date: 3/12/2013 **Agenda #** oral

PLEASE STATE YOUR POSITION BELOW:

Position on "Regular" (non-appealed) Agenda Item:

Support **Oppose** **Neutral**

Note: If you are here for an agenda item that is filed
for "Appeal", please state separately your position on
the appeal below:

Support **Oppose** **Neutral**

I give my 3 minutes to: _____

BOARD RULES

Requests to Address Board on "Agenda" Items:

You may request to be heard on a published agenda item. Requests to be heard must be submitted to the Clerk of the Board before the scheduled meeting time.

Requests to Address Board on items that are "NOT" on the Agenda:

Notwithstanding any other provisions of these rules, member of the public shall have the right to address the Board during the mid-morning "Oral Communications" segment of the published agenda. Said purpose for address must pertain to issues which are under the direct jurisdiction of the Board of Supervisors. YOUR TIME WILL BE LIMITED TO THREE (3) MINUTES.

Power Point Presentations/Printed Material:

Speakers who intend to conduct a formalized Power Point presentation or provide printed material must notify the Clerk of the Board's Office by 12 noon on the Monday preceding the Tuesday Board meeting, insuring that the Clerk's Office has sufficient copies of all printed materials and at least one (1) copy of the Power Point CD. Copies of printed material given to the Clerk (by Monday noon deadline) will be provided to each Supervisor. If you have the need to use the overhead "Elmo" projector at the Board meeting, please insure your material is clear and with proper contrast, notifying the Clerk well ahead of the meeting, of your intent to use the Elmo.

Individual Speaker Limits:

Individual speakers are limited to a maximum of three (3) minutes. Please step up to the podium when the Chairman calls your name and begin speaking immediately. Pull the microphone to your mouth so that the Board, audience, and audio recording system hear you clearly. Once you start speaking, the "green" podium light will light. The "yellow" light will come on when you have one (1) minute remaining. When you have 30 seconds remaining, the "yellow" light will begin flash, indicating you must quickly wrap up your comments. Your time is up when the "red" light flashes. The Chairman adheres to a strict three (3) minutes per speaker. **Note: If you intend to give your time to a "Group/Organized Presentation", please state so clearly at the very bottom of the reverse side of this form.**

Group/Organized Presentations:

Group/organized presentations with more than one (1) speaker will be limited to nine (9) minutes at the Chairman's discretion. The organizer of the presentation will automatically receive the first three (3) minutes, with the remaining six (6) minutes relinquished by other speakers, as requested by them on a completed "Request to Speak" form, and clearly indicated at the front bottom of the form.

Addressing the Board & Acknowledgement by Chairman:

The Chairman will determine what order the speakers will address the Board, and will call on all speakers in pairs. The first speaker should immediately step to the podium and begin addressing the Board. The second speaker should take up a position in one of the chamber aisles in order to quickly step up to the podium after the preceding speaker. This is to afford an efficient and timely Board meeting, giving all attendees the opportunity to make their case. Speakers are prohibited from making personal attacks, and/or using coarse, crude, profane or vulgar language while speaking to the Board members, staff, the general public and/or meeting participants. Such behavior, at the discretion of the Board Chairman may result in removal from the Board Chambers by Sheriff Deputies.

March 12, 2013

Riverside County Board Of Supervisors

Re: Services For Deaf Mentally Ill

I am here to ask for Mental Health Services for my adult son who is deaf. He has been unable to get any services other than medication since coming into the Riverside County Mental Health Program.

I am requesting the implementation of an ASL peer group that will help the deaf and hard of hearing navigate the mental health process, as well as meet the growing need in the deaf community. Having someone interpret a group is not really a "peer group" because of the unique issues faced by this culture. Communication is the foundation of life and language specific peer groups, regardless of the language, is the foundation for the term "peer group" if positive outcome is the goal for each consumer.

A formal grievance was filed December 2012, to address this gap in care as well, as having a doctor, yell at my son about healing his deafness, because she believes in God, while waiting in ETS clinic for a shot. How dehumanizing from someone who is charged with helping maintain

ORA /
03/12/13

mental health to infer that he was broken due to his deafness.

Six years ago our family was forced to send my son across country, to Washington D C to get care because Riverside did not have services other than placing him in a locked facility. He is now home and the issues are the same, not even the basics like a Peer Support Group in ASL, counseling to implement a Treatment Plan or other supportive services available to hearing consumers.

I have asked county mental health program managers for accommodation for my son, meetings have been set but canceled, as well as the Centers On Deafness- Inland Empire, the Riverside County Culturally Competency Committee attempted to get an appointment with Dr. Wiengart but could not get a call back, so I am now bringing this issue to you. No one should be forced to leave home to get an equitable opportunity for basic mental health care. Especially in a county that has a large deaf and hard of hearing community. With the supportive data demonstrating the need, it appears that there is a little value placed on this vulnerable group and their families.

I am respectfully asking that you direct some attention to helping bridge this large gap.



Nosente A. Uhuti

P. O. Box 20552
Riversdie, CA 92516

December 11, 2012

Riverside County Mental Health Plan
Quality Improvement Coordinator
P. O. Box 7549
Riverside, CA 92513

Re: Melvin Richard Pemberton

Dear Sir/Madame;

This communication is a formal grievance on behalf of Melvin Pemberton, my adult son, who received emergency care from Riverside County Emergency Treatment Services, October 22, 2012 released November 5, 2012.

Melvin Pemberton is deaf and was housed in the facility without a live interpreter most of the time. The Video Relay was used to communicate when asking questions but he was basically isolated during his stay. When he was stabilized I was told that if he could not come to my home, but that he would be released to the homeless shelter because there was no "appropriate place to put him" and "he was not displaying any symptoms". (He was too drugged to display anything) I picked him up on November 5, 2012 and he is currently living in my home and I am providing the supervision that is needed for his daily care. There are no current support services for the deaf mentally ill available. The lack of support services equitable to the hearing community, such as support groups and socialization activities, make it difficult to keep my family member in care and compliant.

My family member (Melvin Pemberton) was given an appointment to return to the ETS clinic in two (2) weeks, Nov. 21, 2012) to receive a shot. (100 mg of haldal IM) When the computer broke (relay service from Moreno Valley) an interpreter was called in so we had to wait two hours. When called in to see the doctor she looked at the file and then at Melvin. When she began to speak and he looked at the interpreter the doctor began to yell at him, "you can hear me, can you hear me"? I told her that she would hurt someone's feelings yelling at him. The doctor stated that she "**believed in God**", and that she was a "**healer**". She acted as though he was broken



Nosente A. Uhuti

P. O. Box 20552
Riversdie, CA 92516

because of his deafness. She was totally out of line. I am a believer also but resent this doctor yelling and attempting to lay hands on him for "healing". We came in for a shot for his mental health, if there was to be healing that is where it should take place.

Clearly this behavior is in violation of all regulations for Cultural Competence by all definitions. The Department of Mental Health Title IX, Section 1705 states that "Culturally competent services means a set of congruent behaviors, attitudes and policies in a system or agency to enable effective service provision in cross-cultural settings." This truly did not happen in either encounter with the service provider.

As for interpreting services, it would be helpful if the person is certified and fluent. Also they should not add comments but should sign exactly what is being said. Quality Improvement stresses that efforts to comply with interpreter guidelines be documented, however this falls short of solving the problem of attitudes that are far from respectful or accommodating.

The documented sequence of events surrounding treatment of and for my family member was lacking in many areas. Most importantly there appears to be a failure to develop services for the deaf mentally ill. It is unacceptable to place a patient in isolation and call it treatment. There is no chance of success with the current gaps in services to this underserved population.

I look forward to opening dialog regarding quality services and program development as well as resolution of this issue.

Sincerely,

Nosente A. Uhuti

What is Peer Support?

Receiving Peer Support is having a person who has had similar "lived experiences" within the mental health system assist in guiding a person receiving services as they embark on their journey to mental health wellness and recovery.

The Peer Support Specialist engages with the person receiving services one-on-one or in a group setting. The person receiving services has the opportunity to experience what it's like to walk side-by-side with a person who has "been there", while learning new tools and practicing new skills in moving through challenges.

Services that Peer Support Specialists Offer:

- One-on-one support
- Wellness Recovery Action Plan (WRAP)
- Linkage to community self-help groups
- Resource Assistance
- Recovery Coaching
- Advocacy to erase stigma of mental health consumers
- Assistance in building coping skills
- Providing a positive and safe space for a person to work toward recovery

The Five Recovery Pathways

Peer Support is also structured around five principles that enhance a person's ability to move toward recovery.

Hope: There is hope for people with psychiatric symptoms and/or addiction to recover. Peer Support Specialist are the "evidence" that recovery is possible.

Choice: Each person takes responsibility for their own situation to begin to move ahead, making choices and decisions, even calculated risks, becoming self-determined in moving toward recovery.

Empowerment: It is a commitment to effecting positive change. It is a supportive venture that uses each individual's knowledge and experience to empower the recovery process. It is giving the person the opportunity to regain their own power in their own life.

Environment: Creating a space where people are empowered to recover, to succeed in accomplishing their goals.

Spirituality: Developing personal spiritual strengths, giving the person the opportunity to explore and discover their own sense of meaning and purpose in life.

What can a person expect from working with a Peer Support Specialist?

A "PSS" can assist a person working toward recovery in the following ways:

- ◆ Setting personal goals
- ◆ Practicing new skills
- ◆ Working through specific challenges
- ◆ Inspiring a person to get more involved with their community
- ◆ Being a source of empowerment and support
- ◆ Helping a person to connect to their own life in a new way
- ◆ Modeling recovery by "being the evidence"
- ◆ By providing a safe space for a person to discover meaning a purpose in their own life

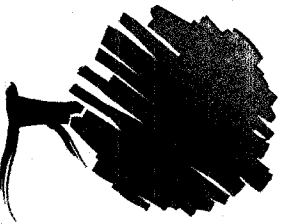
"Recovery is the point in someone's illness, in which the illness is no longer the first and foremost part of his or her life, no longer the essence of all his or her existence. Ultimately, recovery is about attitude and making the effort."

- Author Unknown

Riverside County Department of Mental Health

The Department has an agency-wide approach that supports the concept of recovery on multiple levels. The philosophy of recovery embraces and encourages an individual's capacity for change and personal transformation. The peer-to-peer interaction is an integral part of the mental health recovery process. The Department offers a partnership with the person receiving services, so they have the opportunity to experience a real and positive change in their life.

*Recovery is
knowing who you
are and utilizing
your strengths to
become all you were
meant to be.*



Desert Regional Clinics

Indio Clinic 47-825 Oasis St. Indio, CA 92201 760-863-8445	Mature Adult Clinic 68625 Perez Road, #11 Cathedral City, CA 92234 760-773-6767
Banning Clinic 1330 West Ramsey St. #100 Banning, CA 92220 951-849-7142	Desert Full Service Partnership 19531 McLane St., #6 North Palm Springs, CA 760-288-4579
Blythe Clinic 61297 W. Hobsonway Blythe, CA 92225 760-921-5000	

Western Regional Clinics

Jefferson Wellness Ctr. 1827 Atlanta Ave., #D3 Riverside, CA 92507 951-955-8000	"The Spot" Trans- lational Age Youth (TAY) Center 1827 Atlanta Ave., # D-2 Riverside, CA 92503 951-955-8210
Main Street Clinic 629 N. Main Street, #C-3 Corona, CA 92880 951-738-2400 760-770-2222	Bialine Clinic 769 Blain St., #B Riverside, CA 92507 951-358-4705

Mid-County Regional Clinics

Hemet Clinic 650 N. State St.,reet Hemet, CA 92543 951-791-3300	Perris Clinic 1688 N. Perris Blvd., #17—L11 Perris, CA 92571 951-443-2200
Mature Adult Clinic 31946 Mission Trail, #B Lake Elsinore, CA 92530 951-245-7791	Temecula Clinic 41002 County Center Dr., Bldg B, #320 Temecula, CA 92591 951-600-6355



Riverside County Department of Mental Health

Jerry Wengert, Director
Mental Health Administration Office
4095 County Circle Drive
Riverside, CA 92503

Riverside County Board of Supervisors
Bob Buster—First District
John Tavaglione—Second District
Jeff Stone—Third District
John Benoit—Fourth District
Marrion Ashley—Fifth District

RIVERSIDE COUNTY DEPARTMENT OF MENTAL HEALTH

A partnership for positive change.

What is Peer Support?



Showing the people we serve that
recovery is possible.