

experienced delays in negotiating consensus with each of the labor organizations on the Transitional Duty Policy, thus full implementation of this pilot program in the five major departments has not yet been achieved. The Board of Supervisors will continue to monitor this progress.

---

## **MENTAL HEALTH MANAGEMENT ILLS**

### ***FINDINGS: Pages 66-68***

***F1.b During the current grand jury tenure, eighteen interviews with staff from several programs and various levels of supervisory duties were conducted. Nearly all interviewees expressed negative appraisals of management. Interview specifically indicate that the degree of discouragement stemming from management practices would now be higher in contrast with the year-old survey cited above.***

**RESPONSE:** The Board of Supervisors neither agrees nor disagrees with the finding.

The Board of Supervisors does not participate in the interview process nor is it provided any records related to interviews; therefore, it cannot respond one way or another to the finding. The Board does appreciate the feedback from the Grand Jury and has requested the CAO work with the Department to determine if further steps need to be taken on any of the Findings.

***F1.f Fear of retaliation from management for various reasons was reported by a significant number of employees interviewed.***

**RESPONSE:** The Board of Supervisors neither agrees nor disagrees with the finding.

The Board of Supervisors does not participate in the interview process nor is it provided any records related to interviews; therefore, it cannot respond one way or another to the finding. As indicated by the Department, its Compliance Program includes information on anti-retaliation laws and resources for reporting suspected retaliation.

***F2.e No record of Norton Center safety monthly committee meeting for the year 2003 could be produced for the grand jury.***

**RESPONSE:** The Board of Supervisors neither agrees or disagrees with the finding

The Board of Supervisors is not involved in the Norton Center safety committee meetings nor does it receive copies of records related to the meetings; therefore it cannot respond one way or another to the finding. The Department indicated that it did provide a copy of the Safety Committee minutes to the Grand Jury and that only one meeting had been held in 2003.

***F3.a Most MHS medical staff support other employees' complaints regarding management practices. Nearly all of the psychiatrists were signatory to a statement critical of MHS management.***

**RESPONSE:** The Board of Supervisors disagrees partially with the finding.

The Board of Supervisors is in receipt of the psychiatrists' statement, but has not received or heard complaints from other employees.

***F3.b Testimony of psychiatrists enumerates instances of managers' overriding the physicians' role and overriding medical decisions, such as:***

- ***Cancellation of patient appointments without prior approval by a physician.***
- ***Placing non-physician managers in the role of supervising nurses and physicians.***
- ***Empowering non-medical managers to make final decisions about patient care in the name of the treatment team.***

RESPONSE: The Board of Supervisors neither agrees nor disagrees with the finding.

The Board of Supervisors was not present for the testimony of the psychiatrists; therefore it cannot respond one way or another to the finding.

***F3.c Interviewees stated that MHS is likely to lose highly trained and dedicated essential staff as a result of interference with medical practice by management.***

RESPONSE: The Board of Supervisors disagrees partially with the finding.

Some psychiatrists did make such a statement to the Board during a regularly scheduled Board meeting, though the Board is not aware of any psychiatrists resigning as a result of interference with medical practice by management since the statement was made.

***F4.a Department of Health Services management selected a consultant to conduct the 2002 organizational study in MHS. The consultant began work with a survey of MHS staff in August 2002.***

RESPONSE: The Board of Supervisors agrees with the finding.

***F4.d Results of the survey were not available until July 2003, just past the end of the 2002-2003 grand jury's term. This precluded that grand jury from evaluating the survey and consultation results. At present, because the plan of action has yet to be completed and implemented, the 2003-2004 grand jury is again unable to evaluate the effectiveness of the consultation.***

RESPONSE: The Board of Supervisors agrees with the finding.

***F4.e According to the contract, a follow-up survey is to be conducted by the consultant six months after the implementation of the action plan. If the plan is in place by the end of the current grand jury's term as is expected, there would be time for the next grand jury to evaluate the "effectiveness" results, which would be due in January 2005, and provide a report during its term on the ultimate success.***

RESPONSE: The Board of Supervisors agrees with the finding.

***F5.a Physician's are concerned that it is becoming difficult to practice good medicine at MHS and to provide treatment according to the regulations and guidelines of the State Medical Board.***

RESPONSE: The Board of Supervisors disagrees partially with the finding.

The Board is aware of the physicians' concerns, but has received no specific information supporting the concern. The Board has directed the County Administrator to work with the Department of Health Services and the psychiatrists to verify the validity of the concern, and if necessary, take appropriate actions.

***F5.b Interviewees asserted that should MHS lose medical staff, replacing physicians of equally high quality will be difficult, especially if a reputation of intrusive management of doctors is established.***

RESPONSE: The Board of Supervisors neither agrees nor disagrees with the finding.

The Board was not involved in the interviews; therefore, it cannot respond one way or another to the finding.

***R4. That HS management creates written performance standards and expectations for MHS senior management aligned with the goal of improving skills in relating with staff as identified by this report and the consultation process; include these standards in the annual performance evaluation of both senior and line staff management effectiveness.***

RESPONSE: The recommendation has been implemented.

As indicated by the Department, it routinely and annually reviews and discusses performance standards and goals with both management and line staff.

***R8. That HS management provide all staff with instruction and information regarding anti-retaliation laws—federal, state, civil service or labor—and the agencies and services provided to assist them if retaliation is perceived or feared from supervisors for any work-related reasons.***

RESPONSE: The recommendation has been implemented.

As indicated by the Department, the recommended instruction and information is part of the Department of Health Services Compliance Program.

***R9. That HS management affirms and delineates appropriate boundaries between medical and managerial authority in PES based upon The Medical Board of California's Corporate Practice of Medicine Guidelines and the California State Business and Professions Code, Sections 2050-2079, Section 2190-2196.5, and Section 2400-2417.***

RESPONSE: The recommendation will not be implemented because it is not warranted.

As indicated by the Department and County Counsel, case law (Community Memorial Hospital v. County of Ventura (1996) 50 Cal.App4th199 and Estate of Miller (1936) 5Cal.2d 588) holds that the prohibition of practice of medicine by corporation does not apply to counties or non-profit community clinics.

***R10. In view of the prolonged character of problems in MHS and in view of MHS medical staff bringing these issues to the Board's attention at their meeting on March 23, 2004, the Board of Supervisors should report to the grand jury what requirements they will establish to ensure that HSD management addresses grand jury recommendations.***

RESPONSE: The recommendation has been partially implemented.

The Board is aware of the work that has already been done by both management and employees to strengthen the working relationships in the Mental Health Division and supports the on-going processes that have been put in place to make the Division a stronger and better organization. In response to the issues brought forward by medical staff, the Board directed the County Administrator on March 23, 2004 to work with the Department of Health Services, the Human Resources Department, the local union and the affected employees regarding the medical staff's specific concerns. The County Administrator and