Riverside County Mental Health Department - Public Guardian

Background

The Public Guardian is a division of the County Mental Health Department. The primary function of this office is to act as the court-appointed surrogate decision maker for persons unable to manage their private lives. These clients are frail, elderly persons or severely mentally disabled individuals. There are two separate sections in the Public Guardian’s office. The Probate section manages the program for the elderly unable to care for themselves. The Lanterman-Petris-Short (LPS) Act section is focused toward the gravely disabled people who are developmentally disabled or in need of mental health treatment. The program of interest in this report is directed toward those elderly persons unable to care for themselves, of whom approximately 77 percent are indigent.

On February 9, 1993, the Board of Supervisors adopted the Conservatorship admission criteria. This was to allow the Public Guardian the ability to provide services to those who are eligible.

The Public Guardian receives at least 400 referrals a year. The top four reasons for referral are: people who are unable to manage their financial affairs, self-care deficit, financial abuse and physical abuse. Adult Protective Services is the most frequent source of referrals.

On receipt of a referral, the office does the investigation. If it is found that there is a need for intervention, the case is given to the County Counsel for review and request for a court decision. When the decision is made, the referral then goes back to the Public Guardian for implementation.

This program’s primary interest has been "serving the elder abuse victims" for the last three years. The Public Guardian is the only agency empowered to remove the severely incapacitated person from the abusive situation. This program has protected many individuals, some near death, from abusive caregivers. The Public Guardian’s office has stopped many family members from removing the elderly from skilled nursing facilities only to abandon them a few days later.

Financial abuse has a devastating effect upon the senior population. Lifetime savings are quickly gone and the senior has to resort to public assistance. In cases where the non-relative care-giver uses powers of attorney and inter vivos trust, the Public Guardian’s office will work with the attorneys to resolve the problem.

Major sources for funding this program are SB 910 funding for targeted case management and Medi-Cal or Medicare claims. The program also attempts to collect
fees from the client for these services. However, most of the client’s funds may be depleted within a year. Clients with sizable estates often use private conservators.

**Findings**

1. The Public Guardian program has been short staffed for two years due to unfilled positions and leaves of absence. Most of the elderly mentally ill patients referred are indigent (77 percent), and there is limited help available under the current organizational structure.

2. Due to the severe financial limitations and consequent staff shortages, the Public Guardian program may be at risk of liability from the courts, state and patients’ families. Investigation reveals that other departments have indicated many problems interacting with the Public Guardian office.

3. One background case investigator was assigned to the Public Guardian program for Riverside County. The investigator eventually worked on a part-time basis and finally resigned. This staff vacancy produced a major backlog of cases. As a result, the investigator agreed to return on a part time basis and will train any newly-assigned investigator trainee.

   Additionally, only one Registered Nurse is assigned to make medical follow ups in the entire county.

4. Management problems are major impediments to operational functions. Temporary assignment of a Chief Deputy Public Guardian does not provide the organizational stability that is essential in this unit. Within the past year and a half, two temporary Chief Deputies have been assigned to the Public Guardian’s office. They have performed very well under conditions of budget reductions and a backlog of cases.

5. The Director of the Mental Health Department proposed the following budgetary reductions for 1997-98 which currently impact the Public Guardian Unit.

   Patient and Medi-Cal management fees are less due to the reduction of the number of patients.

   Two Deputy Public Guardians and one Office Assistant positions were eliminated.

   An estimated yearly average of 400 referrals will be cut by 50 percent. A maximum caseload will be 150 cases.

   Mental Health Department is requesting an add-back to fund one Deputy Public Guardian to handle critical cases. This may not provide adequate training for new people as well as the experienced who have been acting in more than one capacity.
Recommendations

Director of Mental Health:

1. Consider other staff members in the Mental Health Department to fill the vacant positions of Investigators and Registered Nurses, even on a fill-in basis.

2. The court should consider that the office of the Public Guardian should receive first consideration before the appointment of private conservatorships if there is no available relative.

3. Expand the Investigator and Registered Nurse positions to two full-time employees for each category.

Chief Deputy Public Guardian should develop a volunteer program to assist with the payee staff function of collection and payment.

County Board of Supervisors:

4. Assign a permanent Chief Deputy to head the Public Guardian program. This will provide solid leadership and a commitment to excellence not normally found in temporary leaders.

Create a board of consultants composed of representatives from the Public Guardian, Public Defender, County Counsel, Adult Protective Services, Superior Court Probate Officers and Ombudsmen to enhance a more unified, professional service for the elderly or mentally ill patient.

Human Resources Department and Chief Deputy Public Guardian:

5. Establishing additional training courses for all conservators and investigators and providing two-day in-service training at least once a year will assure quality and quantity of client care.

Increasing staff will increase the client base which will increase income.