

Behavioral Health Survey Results

May 21st, 2025

Laurie Goldstein

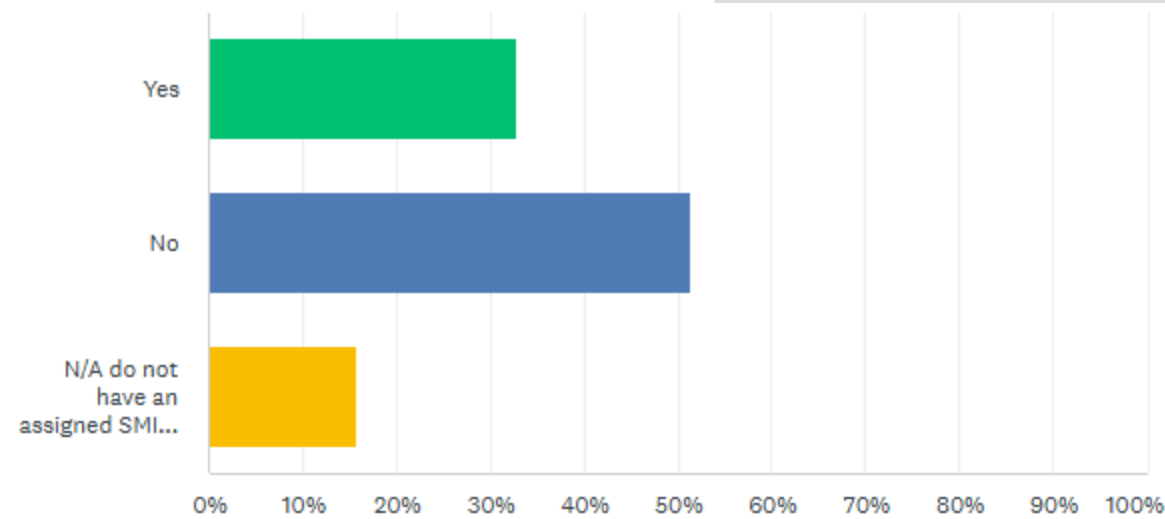
Josh Mozell

Rachel Streiff

Description

- We wanted to assess the behavioral health concerns around guardianship, COT, and preferences for court hearings.
- We ran the Survey Monkey survey for the month of May 2025
- One randomly selected winner received a \$100 Amazon Gift card out of the **79** participants

Q1- Has your clinic refused to initiate a petition for a COE (Court-Ordered-Evaluation) process of a family member or friend in need of intervention? If so, which provider and clinic(s)?



ANSWER CHOICES	RESPONSES	
Yes	32.89%	25
No	51.32%	39
N/A do not have an assigned SMI clinic	15.79%	12
Total Respondents: 76		

Comments for Q1-

Has your clinic refused to initiate a petition for a COE (Court-Ordered-Evaluation) process of a family member or friend in need of intervention?

1. Lifewell:South Mountain
2. Friday, February 2nd, (2024) my son had an appointment with the PCP, [REDACTED] PMHNP-BC, at COPA West Valley. [REDACTED] told me that she's the one who signed that the COT is not renewable. (NP [REDACTED] only started at COPA-WV on December 11, 2023.) My son's PCP was [REDACTED], NP. I have [REDACTED] testament dated 11/01/23 that my son should stay on COT. [Note: I was not my son's guardian at this time, he was in Haven BHH and I was applying for emergency guardianship, which I did get, Josh Mozell is my attorney.]
3. A petition was initiated by inpatient provider.
4. Copa Health did not inform me about renewing COT. I found out via MadMoms. By that time, the COT was close to expiring. I contacted COPA Health, and they said there was nothing they could do. I called Francis (thank God for her!) and she gave me Dr. Chern's number. He worked with the clinic to get her petitioned. The petition was granted, and my daughter was picked up and sent to RI. When she arrived at RI they told the police that they could not hold her because they did not have a petition (the petition was sent to the wrong place) the police called me to inform me of the status which I am grateful. At that point I called RI and I asked them to please give me some time to find out what happened to the petition. They held her and Copa Health was able to send the petition to them to admit her. Someone at Copa health was supposed to get her transferred to Valley Wise (they were waiting for her) that never happened. I received a call from RI stating that they would be releasing her at midnight because the COT would be expiring and they had no reason to hold her. They told me I could go to RI and sign a mental health POA and they would keep her until the next day which I did. They released her to me the next day. Copa Health initiated an emergency petitioned and she was picked up again. She was transferred to Valley Wise and a new COT was put in place. Dr Chern was amazing and very helpful!
5. Terros
6. Southwest Saguaro
7. Terros 51 ave and Priest
8. southwest buckeye
9. Terros on Cactus and 23rd ave. They have been so terrible with communication. Even when I had my son at my house during an episode.. It took them forever to get here, and my son ended up leaving. They refused to take him because the 72 hours ran out... but it was at the cut off time.. and then my son ran! It took so long to get another one. and I followed my son for 6 hours and knew where he was... but he went into a "new" jurisdiction.. and then they told me I needed to get a new one for that area! It is so disgusting!!!! and maddening!!
10. Lifewell
11. Horizon Health Apache Junction

Comments for Q1-

Has your clinic refused to initiate a petition for a COE (Court-Ordered-Evaluation) process of a family member or friend in need of

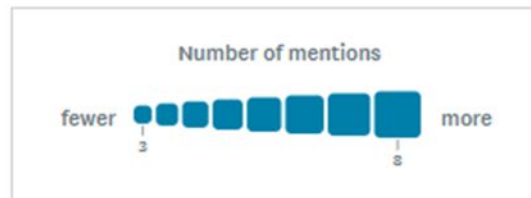
intervention?

12. Southwest Network
13. Spectrum Healthcare
14. Lifewell
15. First Episode center in Avondale; SWBH Saguaro in phoenix
16. Copa never initiated COT
17. Copa Gateway
18. Lifewell/Terros Mitchell
19. Copa
20. Lifewell S mountain
21. Terros
22. His previous case managee named Chris from Copa East Valley suggests I go to Community Bridges and start the process. loved one has SMI clinic but N/A for COE
23. Southwest Network
24. Loved one has SMI clinic but N/A for COE
25. Polara. But they said they had not witnessed the behaviors.
26. Partners In Recovery Metro
27. Copa

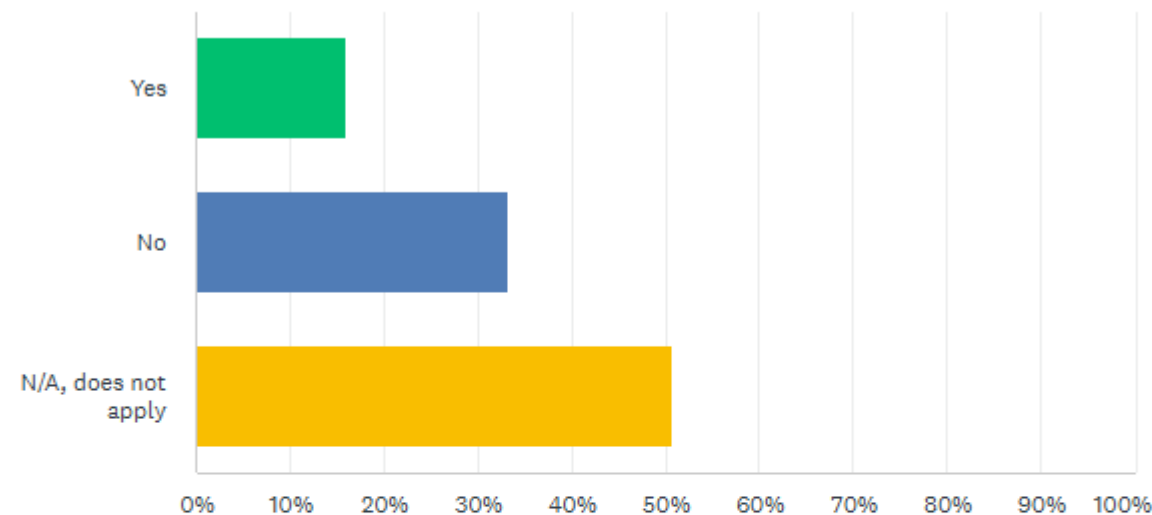
Word Cloud for Q1-

Has your clinic refused to initiate a petition for a COE (Court-Ordered-Evaluation) process of a family member or friend in need of intervention?

initiated Lakshmi Nair
new time one
petition
hold Terros
RI Copa son
COT lifewell
Copa Health go took told sent



Q2- If your clinic refused to initiate a petition for COE, did they then ask the parent/family member/someone to do the petition instead?



ANSWER CHOICES	RESPONSES	
Yes	16.00%	12
No	33.33%	25
N/A, does not apply	50.67%	38
Total Respondents: 75		

Comments for Q2-

If your clinic refused to initiate a petition for COE, did they then ask the parent/family member/someone to do the petition instead?

1. As noted above. He said it would best if I did it. 8 didnt know he was an alternative. (The [REDACTED] from Copa EV)
2. Lifewell said to do the petition as the parent since they saw the behaviorI wouldn't say no completely... but it was like pulling teeth and them being so annoyed!!! Same clinic
3. COPA gateway
4. Yes, each time, they suggested that I do it. (which I did) This was particularly difficult since I have been the target of several serious assaults by son, include one that lead to criminal charges and an injury.
5. Lifewell
6. The clinic suggested the BHRF could collect evidence to file the petition.I just asked yesterday if my son's COT can be extended and I have not heard back yet. However, I will reach out to them again on Monday.
7. Southwest network
8. Yes, I did it myself several years ago!
9. Lifewell South Mountain
10. Partners In Recovery Metro

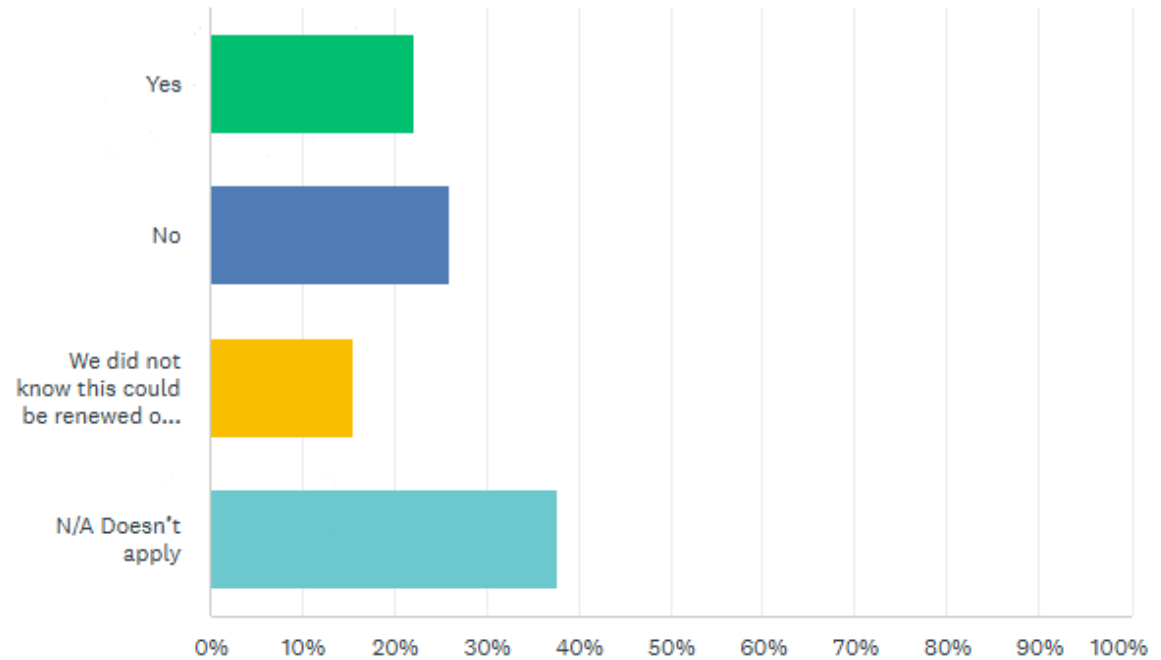
Word Cloud for Q2-

Has your clinic refused to initiate a petition for a COE (Court-Ordered-Evaluation) process of a family member or friend in need of intervention?

Yes
Lifewell



Q3- Have you had your loved one's clinical team refuse to renew or extend the Court-Ordered Treatment (COT) past the one-year timeframe when the family felt that continuation was necessary?



ANSWER CHOICES	RESPONSES	
Yes	22.08%	17
No	25.97%	20
We did not know this could be renewed or extended	15.58%	12
N/A Doesn't apply	37.66%	29
Total Respondents: 77		

Comments for Q3-

Have you had your loved one's clinical team refuse to renew or extend the Court-Ordered Treatment (COT) past the one-year timeframe when the family felt that continuation was necessary?

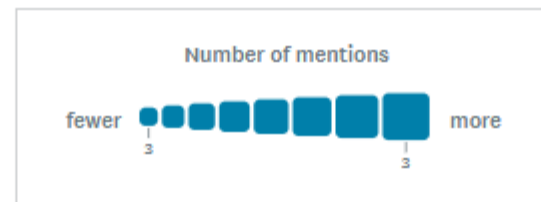
1. Terros
2. lifewell s mountain
3. lifewell/Terros - Mitchell
4. I wouldn't say no completely... but it was like pulling teeth and them being so annoyed!!! Same clinic
5. First Episode Center in Avondale; SWBH Saguaro in PHoenix
6. Lifewell
7. southwest buckeye
8. I just asked yesterday if my son's COT can be extended and I have not heard back yet. However, I will reach out to them again on Monday.
9. Lifewell south mountain
10. Horizon Health, Apache Junction. clinic didn't refuse just didn't complete the process in time while my son was in the hospital within the last 30 days and in jail
11. The clinical team never informed me that COT's can be renewed.
12. Terros
13. Southwest Saguaro
14. Clinic requested judicual renew with client to update before the end of the cot.
15. Lifewell South Mountain
16. Yes, same as answer #1, and they refused it in 2021.
17. He hasnt hit the year mark yet.
18. [REDACTED], COPA Gateway
19. But it was after four years.
20. COPA gateway

Word Cloud for Q3-

timeframe when the family felt that continuation was necessary?

Have you had your loved one's clinical team refuse to renew or extend the Court-Ordered Treatment (COT) past the one-year

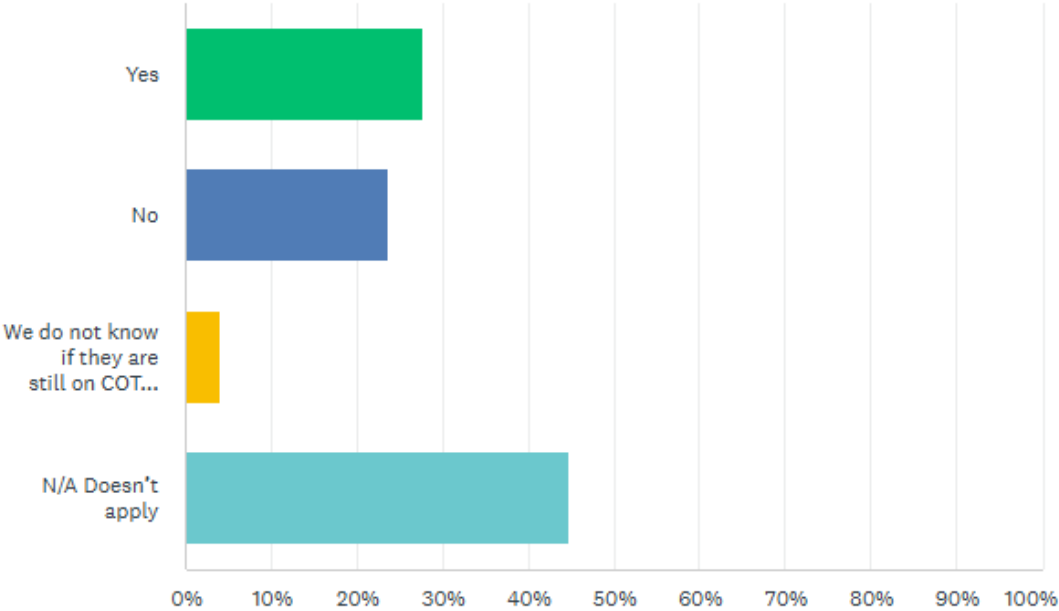
clinic
Terros
COT
lifewell



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Combined words (0) Hidden words (0)

Q4- Has your loved one 's clinical team failed to renew or extend the COT past the one-year timeframe, even though the individual should have been renewed, for example, because they have a have a history of violence, or there were arrests, or hospitalizations during the period of COT, or the individuals has poor insight and the COT was clearly necessary to ensure compliance?



ANSWER CHOICES	RESPONSES	
Yes	27.63%	21
No	23.68%	18
We do not know if they are still on COT or not.	3.95%	3
N/A Doesn't apply	44.74%	34
Total Respondents: 76		

Comments for Q4-

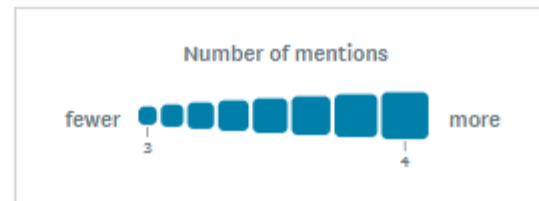
Has your loved one 's clinical team failed to renew or extend the COT past the one-year timeframe, even though the individual should have been renewed, for example, because they have a have a history of violence, or there were arrests, or hospitalizations during the period of COT, or the individuals has poor insight and the COT was clearly necessary to ensure compliance?

1. Spectrum Healthcare Cottonwood
2. It is time about now and Im told by son's attorney that he's likely to go to prisin even though at th8s point he must be returned to competence to accept a plea.
3. Terros
4. Lifewell s outh mountain
5. Copa
6. lifewell/Terros - Mitchell loved one admitted to hospital for suicide attempt 3 weeks short of expiration
7. Same clinic
8. Yes, I have several gut wrenching experiencing. And each refusal put my life at risk and forced me to live in a safe room. My son has never been offered housing
9. lifewell
10. Spectrum Healthcare
11. southwest buckeye
12. Lifewell south mountain
13. Horizon Health, Apache Junction. clinic didn't refuse just didn't complete the process in time while my son was in the hospital within the last 30 days and in jail
14. see above
15. Terros
16. Southwest Saguaro
17. Didnt go throw yet.
18. Lifewell South Mountain
19. Yes, same as answer #1, my son had hospitalizations during the period of COT. (No violence. Arrested in 2014/15, Denton Texas.)
20. COPA Gateway, [REDACTED]
21. Polara. Because they are PAD.
22. COPA gateway

Word Cloud for Q4-

Has your loved one 's clinical team failed to renew or extend the COT past the one-year timeframe, even though the individual should have been renewed, for example, because they have a have a history of violence, or there were arrests, or hospitalizations during the period of COT, or the individuals has poor insight and the COT was clearly necessary to ensure compliance?

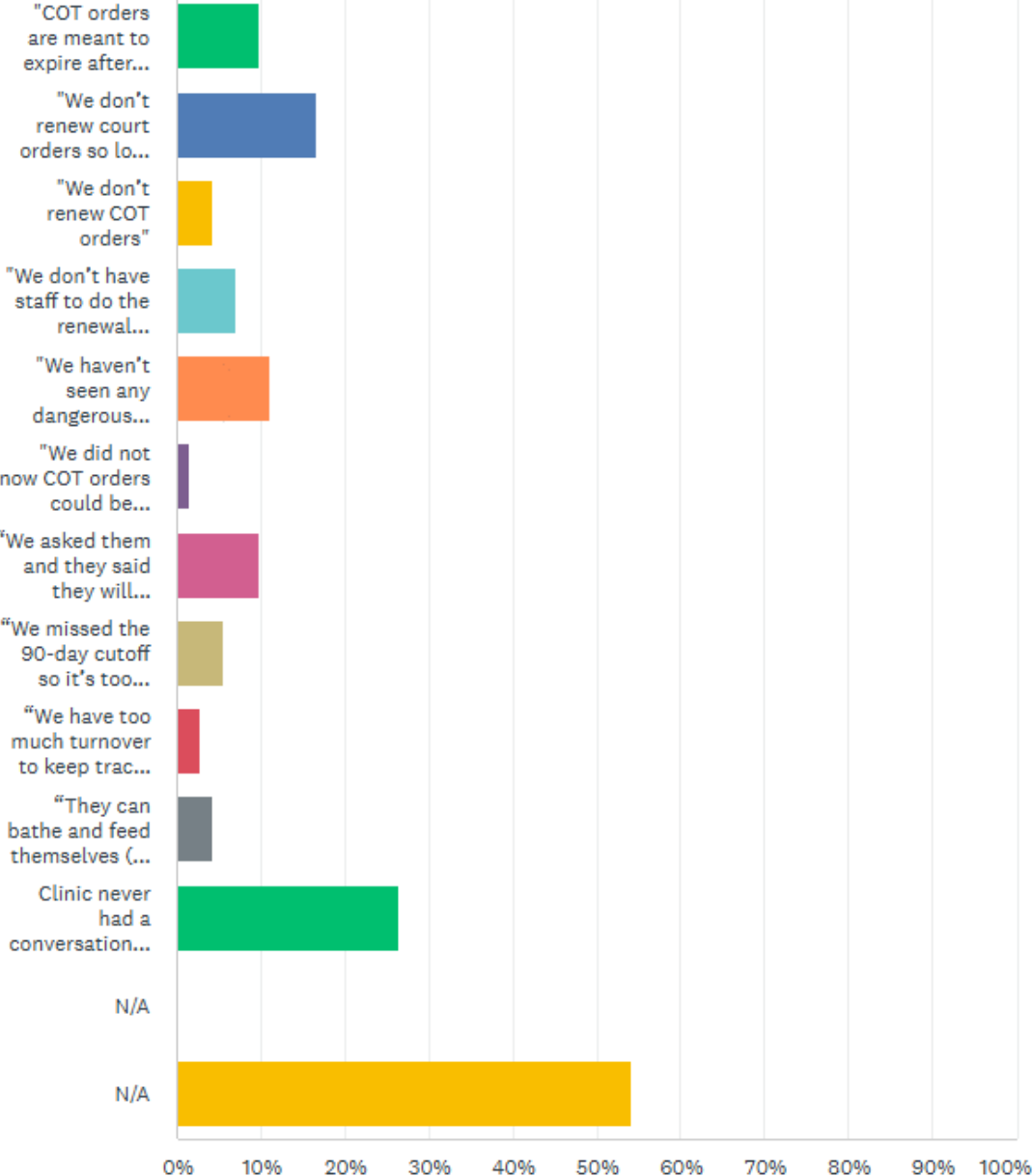
lifewell son Terros



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Combined words (0) Hidden words (0)

Q5- Has your clinic given any of the following reasons for not renewing a COT order? Check all that apply.



ANSWER CHOICES	RESPONSES	
▼ "COT orders are meant to expire after 1 year"	9.72%	7
▼ "We don't renew court orders so long as they are taking their medications"	16.67%	12
▼ "We don't renew COT orders"	4.17%	3
▼ "We don't have staff to do the renewal paperwork (aka no MD/DO psychiatrist available)""	6.94%	5
▼ "We haven't seen any dangerous behaviors recently, so we won't renew the COT"	11.11%	8
▼ "We did not know COT orders could be renewed"	1.39%	1
▼ "We asked them and they said they will voluntarily take their meds"	9.72%	7
▼ "We missed the 90-day cutoff so it's too late"	5.56%	4
▼ "We have too much turnover to keep track of COT renewals"	2.78%	2
▼ "They can bathe and feed themselves (or comparable) so they don't need COT anymore"	4.17%	3
▼ Clinic never had a conversation with the family or guardian about the renewal.	26.39%	19
▼ N/A	0.00%	0
▼ N/A	54.17%	39
Total Respondents: 72		

Comments for Q5-

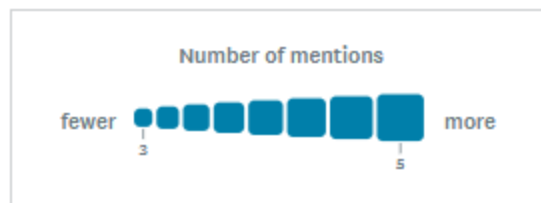
Has your clinic given any of the following reasons for not renewing a COT order?

1. Other - paperwork was completed but not turned in by the deadline because case manager was sick and they didn't have someone pick up her work in time
2. Terros
3. Terros
4. lifewell south mountain
5. Copa
6. lifewell/Terros - Mitchell months later - stopped meds yet clinic transferred to 'Navigator' status - when we asked about PAD - we were told loved one doesn't qualify as not DTS/DTO and they bathe and can make themselves a sandwich.
7. Twice, the assured me they would pursue an additional court order and then neglected to do so. I have an excellent email trail on this topic along with some recorded conversations.
8. Spectrum Healthcare
9. southwest buckeye
10. Horizon Health, Apache Junction
11. COPA
12. Terros
13. The clinic never mentioned renewal until parent of client brought it up when case manager asked the client sign judicial form.
14. Lifewell South Mountain
15. Although COPA Health used all of the checked reasons to explain why my brother's COT wouldn't be renewed, ultimately they did.
16. Same as #1.
17. Terros did not renew a COT saying "they were taking their meds." So far not having the COT hasn't been a big issue.
18. Copa
19. Signature Health and Windsor Laurelwood
20. [REDACTED], COPA Gateway
21. Copa on Bell Adina
22. Polara. In the fourth possible renewal with new psychiatrist.
23. COPA gateway

Word Cloud for Q5-

Has your clinic given any of the following reasons for not renewing a COT order?

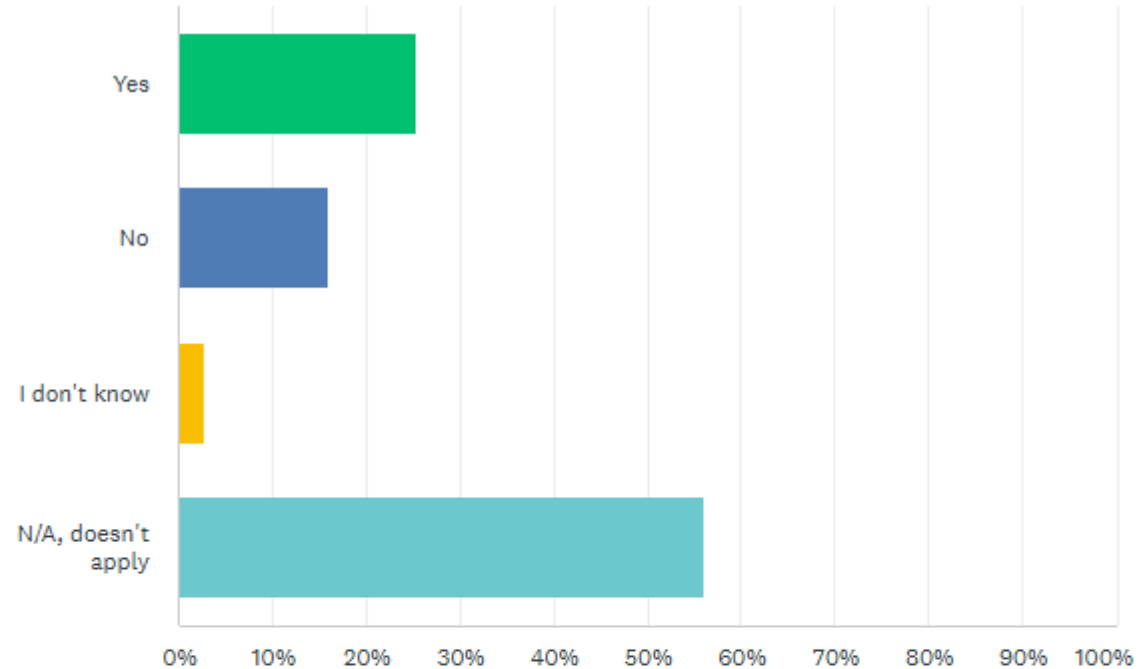
Copa
Terros
COT Health



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Combined words (0) Hidden words (0)

Q6- As a guardian, did your clinic ever fail to notify you that a COT order was about to expire?



ANSWER CHOICES	RESPONSES	
Yes	25.33%	19
No	16.00%	12
I don't know	2.67%	2
N/A, doesn't apply	56.00%	42
Total Respondents: 75		

Comments for Q6-

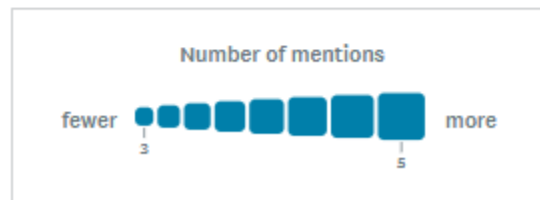
As a guardian, did your clinic ever fail to notify you that a COT order was about to expire?

1. Spectrum Healthcare Cottonwood
2. Terros
3. lifewell south mountain
4. Copa
5. They never did!!
6. SWBH Saguaro refused to move forward with the doctors report so that I could pursue guardianship.
7. Lifewell south mountain
8. Southwest network
9. Terros
10. They brought it up when yhry asked my son to sign the judjdiciualform
11. Lifewell South Mountain
12. My son's current clinic is Southwest Network Estrella Clinic; we started there in early 2024 and his doctor (Dr. [REDACTED]) is just now finishing up the COT order.
13. Found out after COT expired.
14. Windsor Laurelwood released my son who was acting aggressive towards family to the streets of Cleveland without a phone, a coat, or a place to stay. They never reached out to us first.
15. CBI Mesa Heritage
16. i have stayed on top of it and reminded the clinic. And advocated for the necessary renewal. Two years ago the clinic made errors in the paperwork and the renewal failed and a new petition had to be filed. This year the clinic submitted the wrong witness statements- from two years prior. I caught and corrected the error so the problem did not prevent the successful and necessary renewal.

Word Cloud for Q6-

Has your clinic given any of the following reasons for not renewing a COT order?

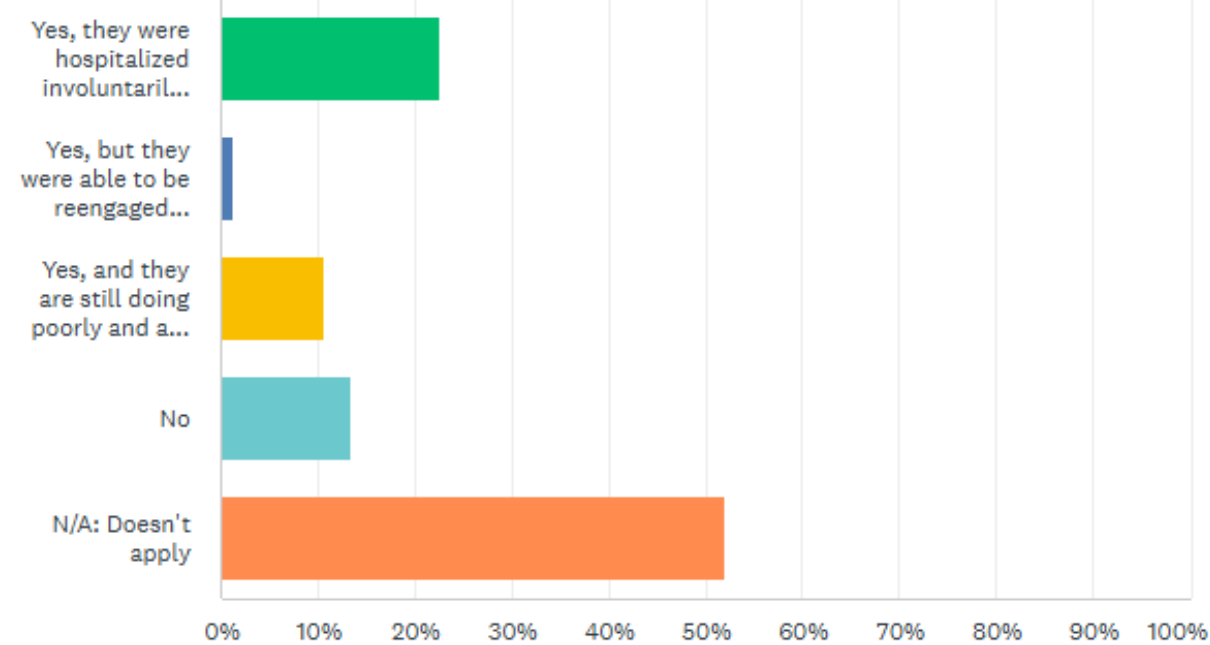
clinic son
lifewell south mountain



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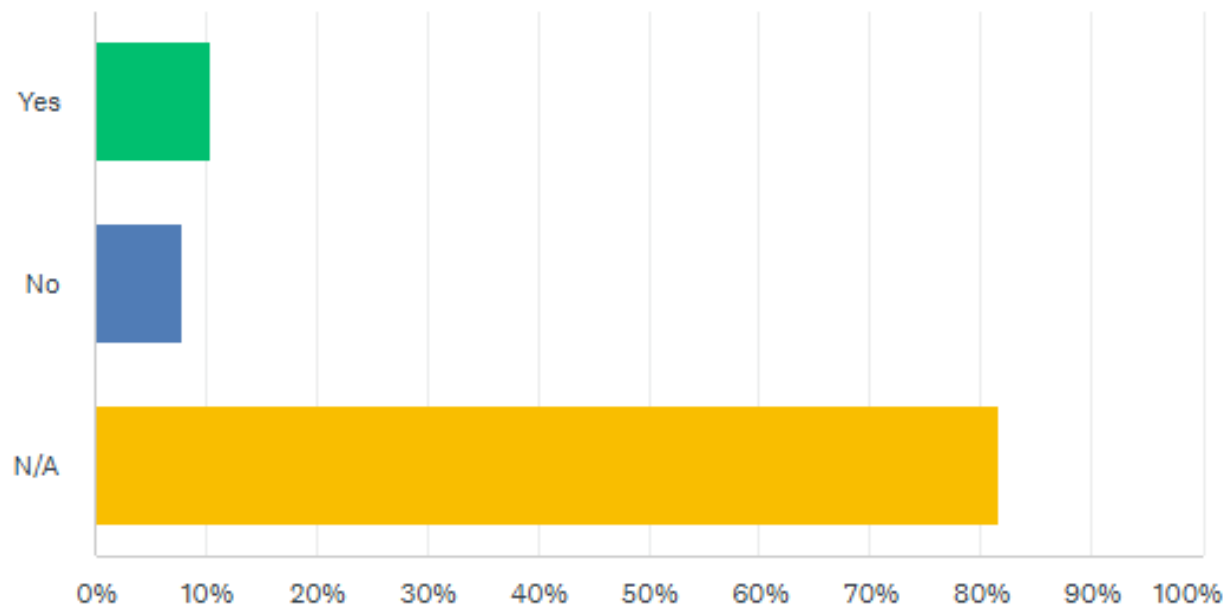
Q7- Has your loved one deteriorated because COT was not renewed?



ANSWER CHOICES	RESPONSES	
Yes, they were hospitalized involuntarily for a new COT	22.67%	17
Yes, but they were able to be reengaged without another order	1.33%	1
Yes, and they are still doing poorly and are not getting help	10.67%	8
No	13.33%	10
N/A: Doesn't apply	52.00%	39

Total Respondents: 75

Q8- Was your loved one's COT allowed to expire while they were in jail?



ANSWER CHOICES	RESPONSES	
Yes	10.53%	8
No	7.89%	6
N/A	81.58%	62

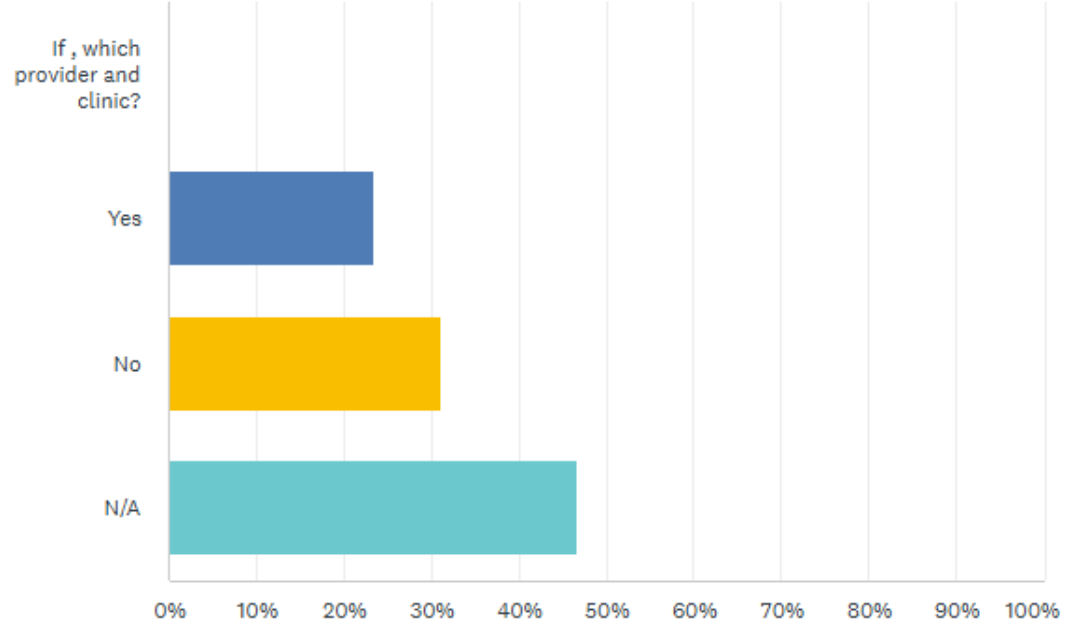
Total Respondents: 76

Comments for Q8-

Was your loved one's COT allowed to expire while they were in jail?

1. Copa EV several time but I dont recall the revolving door of providers.
2. Every time! He is in jail now... again!
3. Spectrum
4. southwest buckeye
5. Horizon Apache Junction
6. Currently under COT several more months left.

Q9- Did you ever ask your clinic for help with guardianship, and did your clinic or provider fail or refuse to provide necessary documentation to support your guardianship?



ANSWER CHOICES	RESPONSES	
▼ If , which provider and clinic?	0.00%	0
▼ Yes	23.38%	18
▼ No	31.17%	24
▼ N/A	46.75%	36
Total Respondents: 77		

Comments for Q9-

Did you ever ask your clinic for help with guardianship, and did your clinic or provider fail or refuse to provide necessary documentation to support your guardianship?

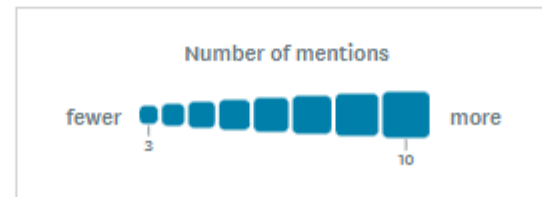
1. Not sure
2. Dr. [REDACTED] (not in an SMI clinic but private pay) was faxed on 3/10/25 a request for a health professional report to begin the guardianship process. When I called Dr. V's office recently to follow up, I was told by the office staff they never got the fax and even if they did, they wouldn't sent this report or anything without an ROI
3. Lifewell s mountian
4. They said he is over 18 and can't talk to me!
5. Copa Gateway
6. I knew they wouldn't provide assistance with guardianship so I didn't even try.
7. I asked for help with Legal Guardianship, but they never got back to me. It was Copa Clinic
8. Yes, I begged the staff at SWBH Saguaro to help me gain guardianship after two back to back hospitalizations in 2023. I have an excellent email trail, in 12/23 when I asked "I also wish to ask the SMI Clinic (Dr. [REDACTED]) to complete a "health professional's report" so that I can seek temporary guardianship of Nick" they said "With the temporary guardianship I will need to do some research on that to make sure I am giving you the correct information." I followed up in Feb and again in March. When I tried to express my concern over my physical safety in jan 23 I was told this "The behaviors I see during medication observation is different then what you are describing. He also met with RN [REDACTED] yesterday and she stated his behaviors was not like you are describing. If you are not comfortable with him staying at your home, do you have a recommendation where you like to have your son stay" Despite criminal charges, and Nick menacing one their staff which resulted in immediate amendment, my safety has been continuously ignored with gaslighting. in Jan 23 I was told this when following up on the request for guardianship "He also met with RN [REDACTED] yesterday and she stated his behaviors was not like you are describing. If you are not comfortable with him staying at your home, do you have a recommendation where you like to have your son stay". Finally in March 24 when the declined to pursue guardianship they told Nick I was requesting which created tremendous tension in my house, when I asked them about this, I asked [REDACTED] this "I am also concerned that someone shared with Nick my interest in becoming his guardian before the expiration of his current court order. It is routine practice to share this kind of information with the client and what is the thought process behind sharing it? How does that help promote Nick's engagement with his therapy and recovery?" and she responded with this: "We are always transparent and forthcoming with our clients. This helps to ensure that they are aware about things that could impact their lives. Before we complete a renewal of a court order or complete an initial PAD COE, we inform the client that it is our intent."
9. Southwest Network, they eventually provided the health professionals report paperwork that was requested. Initially they were unwilling and the case manager told me "I don't believe she needs a guardian, only a payee". This was after the provider completed the health professionals report for emergency guardianship. The refusal came from the case manager when I pursued permanent guardianship.
10. Lifewell south mountain
11. Guidance Center - Flagstaff
12. This process was a nightmare! Copa Health said I did not have a ROI, therefore I could not get medical records. I asked them if my attorney could request the records and they said yes. They did not tell me he needed a ROI as well, so more time was wasted. My attorney sent them a letter requesting the records, they responded to him and told him because he did not have a ROI, they would not release the records to him. Luckily, a case manager reviewed the file and found there was a verbal ROI on file. I filled out the appropriate paperwork, and they said the process would take 14 days. After 14 days they told me they could not accept a verbal ROI (which was documented in the file). After fighting that fight, they determined it could be accepted, after another 14 days, they told me the verbal ROI had expired because they are only good for 6 months. Another go around ensued. I pointed out that the date I had filled out the paperwork was still within one day of the ROI expiring. After several calls to Copa Health compliance officer, I was finally granted the request, but not all paperwork was included, finally after reaching out to them again and again I received all the required documents for the guardianship petition.
13. Terros
14. Former Terros provider Dr. [REDACTED] but she's not there anymore.
15. I was told it would be too difficult to get because he was an adult.
16. It was difficult because they fired key people who know his history and were significant in his recovery and they were confused as to who could help us. We did get eventually help.
17. [REDACTED], COPA Metro
18. They didn't fail but only because I had to ask a bunch of times for the letter from the doctor to support renewing the guardianship.

Word Cloud for Q9-

documentation to support your guardianship?

Did you ever ask your clinic for help with guardianship, and did your clinic or provider fail or refuse to provide necessary

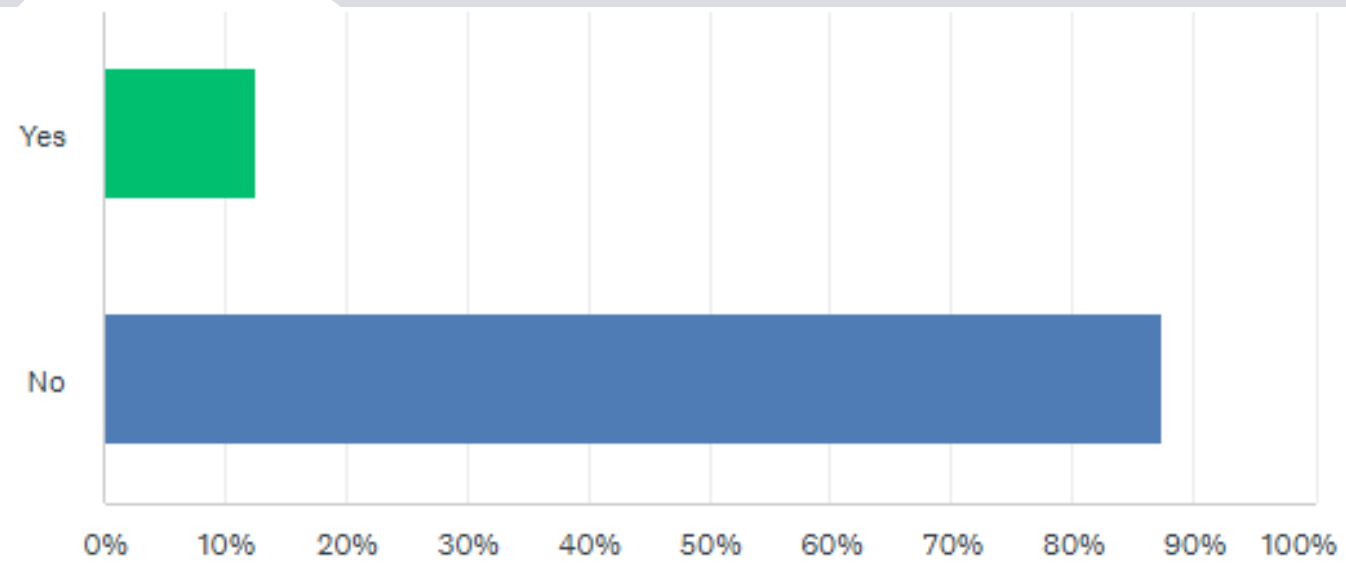
health professional report paperwork
help request said process
guardianship Copa
ROI Nick asked told Dr days



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Combined words (0) Hidden words (0)

Q10- As a guardian, did your clinic ever fail or refuse to renew mental health powers in your guardianship order?



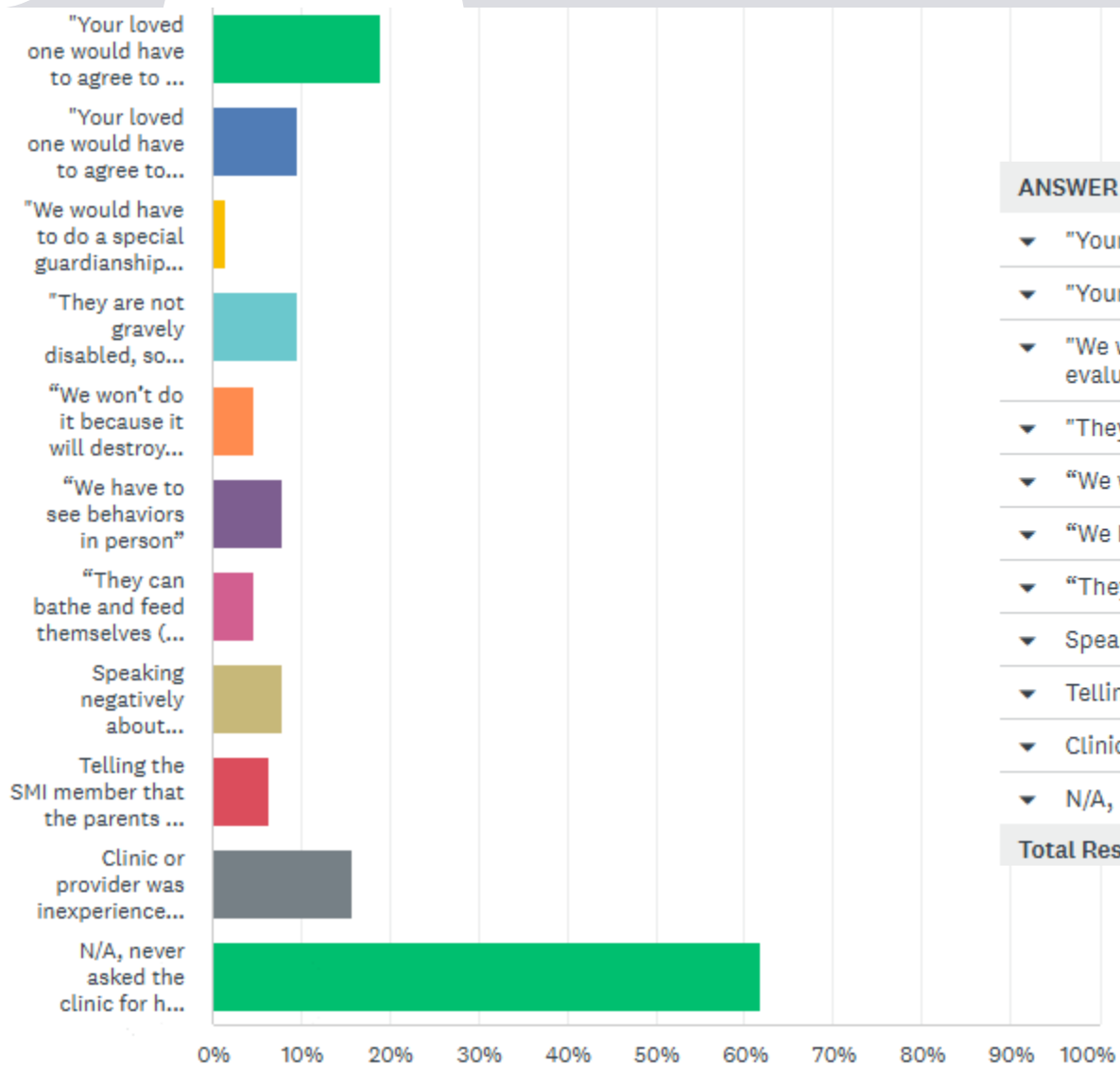
ANSWER CHOICES	RESPONSES	
Yes	12.50%	6
No	87.50%	42
Total Respondents: 48		

Comments for Q10-

As a guardian, did your clinic ever fail or refuse to renew mental health powers in your guardianship order?

1. Not [REDACTED] - retired
2. Lifewell south mountain
3. Guidance Center
4. Not yet
5. Valleywise SMI has often not returned the Health Professionals Report in a timely manner
6. Southwest Saguaro
7. It was never offered as an option
8. Last year I was told at the clinic with the PA that it is getting harder and harder for judges to agree to approve mental Health powers.
9. [REDACTED], COPA Metro, was not easy to work with on this front.
10. I had to "fight" with the Psych NP at Copa for three months to get it done. He had told me, in person, that he agreed but then filled the paperwork out to the contrary. I have the emails to show the communication and advocacy. So I got it done and it was very necessary.

Q11- Has your clinic or provider given any of these reasons for NOT supporting a guardianship? (check all that apply)



ANSWER CHOICES	RESPONSES	
▼ "Your loved one would have to agree to the guardianship"	19.05%	12
▼ "Your loved one would have to agree to participate in a special guardianship evaluation"	9.52%	6
▼ "We would have to do a special guardianship evaluation and formally witness dangerous behaviors during the evaluation"	1.59%	1
▼ "They are not gravely disabled, so they don't qualify for a guardianship"	9.52%	6
▼ "We won't do it because it will destroy the relationship"	4.76%	3
▼ "We have to see behaviors in person"	7.94%	5
▼ "They can bathe and feed themselves (or comparable) so they don't need a guardian"	4.76%	3
▼ Speaking negatively about guardianship or the proposed guardian directly to the SMI member	7.94%	5
▼ Telling the SMI member that the parents are seeking guardianship	6.35%	4
▼ Clinic or provider was inexperienced with laws and guardianship	15.87%	10
▼ N/A, never asked the clinic for help with guardianship	61.90%	39
Total Respondents: 63		

Comments for Q11-

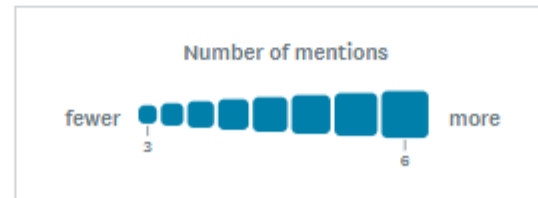
Has your clinic or provider given any of these reasons for NOT supporting a guardianship?

1. Clinic: Polara Health case manger who had never met the member wanted the member to have supported decision making (with members of the clinical team) rather than guardianship.
2. Just about to start the process.
3. Our LO does not receive care at an SMI clini
4. no one offered guardianship.
5. Minimizing the behaviors communicated to the clinic, despite Nick having menaced an Act team member which resulted in their immediate ammendment to a petition (for her safty). The Gaslighting is very destructive and disorienting.
6. The mental health powers were not given due to lack of staff (i.e. psychiatrist). My wards provider is a nurse practioner and therefore does not carry the credentials for the courts to allow mental health powers.
7. Not applicable. Clinic supported guardianship and necessary report.
8. Blatantly put paperwork for him to sign to remove me from helping. When he was extremely dangerous and psychotic.
9. Your son will improve with a Maricopa County Public Fiduciary Guardian because then you will not have these arguments about his disability check each week. Terros
10. Didn't feel the need for guardianship in order to deal with my son treatment plans in treatment in general. Just requested COT so he can be stabilised in some sort of treatment.
11. It would mean SMI person could not do anything for himself without my permission. Like sign in for help if going into episode and I'm not there.
12. Their doctor would not fill out the paperwork, but the NP did and the court refused it. So we hired a doctor to do the evaluation while my son was in the hospital, Haven BHH.
13. Dr. [REDACTED] just said she didn't need it. We had to use another doctor.
14. I have asked questions about guardianship, but my LO's case manager was not helpful in answering my questions.
15. Staff is not properly trained by their employer. CBI Mesa Heritage
16. No response, asked repeatedly in emails to COPA Metro.
17. The last time we renewed the guardianship, my daughter's entire team were new people so I suspect they were inexperienced.

Word Cloud for Q11-

Has your clinic or provider given any of these reasons for NOT supporting a guardianship?

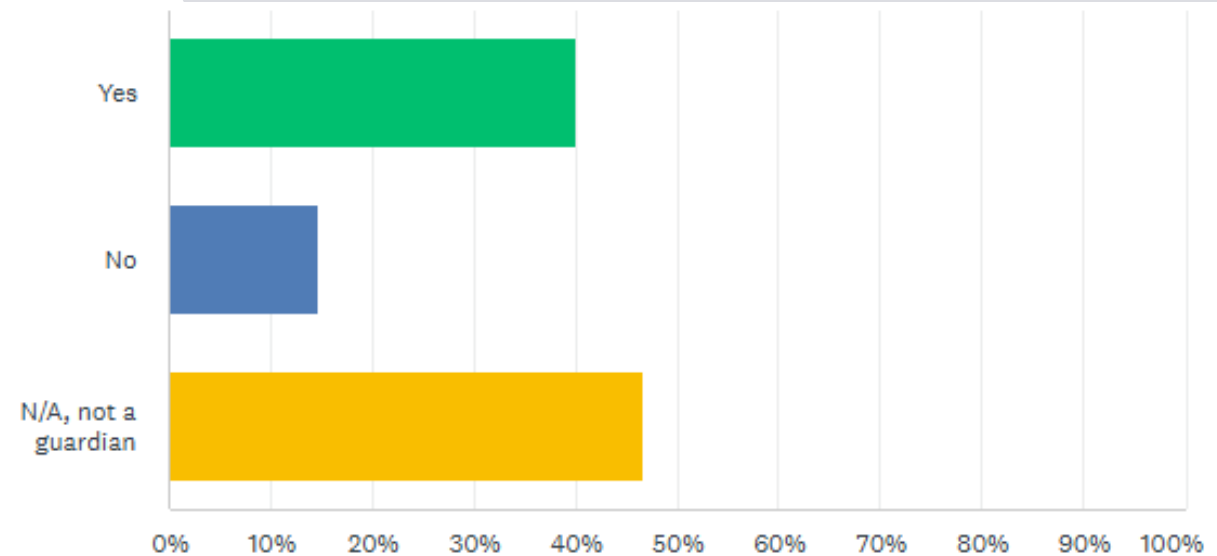
team treatment
guardianship
Clinic son member
doctor



Showing 7 words

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Q12- Have clinics or hospitals made treatment decisions or medication changes without notifying or including the guardian?



ANSWER CHOICES	RESPONSES	
Yes	40.00%	30
No	14.67%	11
N/A, not a guardian	46.67%	35
Total Respondents: 75		

Comments for Q12-

Have clinics or hospitals made treatment decisions or medication changes without notifying or including the guardian?

1. Clinic: Polara Health case Clinics: Polara Health; Southwest Behavioral Health; Spectrum Healthcare
2. Granite Mountain Behavioral Healthcare - Prescott Valley AZ
3. copper spring
4. I never knew I could be a guardian. When I asked Terros if there is anything I can do.. they said he's over 18, so no.
5. As my daughter's PoA and agent on her Alaska Advanced Health Care Directive including for Mental Health, two providers failed to honor patient's agent to make decisions. Patient meeting all criteria for admission was denied admission and then petitioned without talking with the agent and mother to make a decision for care.
6. St Luke's - Jan 2024
7. they would provide klonopin while inpatient and would discharge and stop the klonpin
8. Aurora
9. Yes, Terros and CBI did not accept my input first with medications and not accepting my input that another medication may work better. Not willing to try new meds.
10. Aurora Behavioral Health- Tempe As well as many physical medicine practices.
11. St Lukes, Community Brides, Aurora,
12. Recovery Innovations inpatient
13. Valleywise
14. Can't remember the name

Comments for Q12-

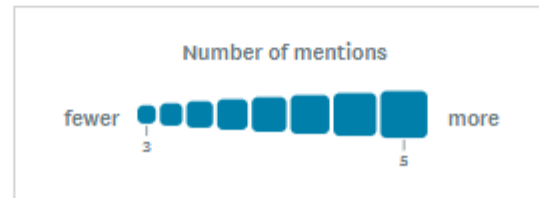
Have clinics or hospitals made treatment decisions or medication changes without notifying or including the guardian?

15. Copa Health has not kept me in the loop about all appointments and the status of trauma counseling. I have been requesting counseling for my daughter since February.
16. St. Lukes, Community Bridges, Banner Good Sam
17. Terros
18. Phoenix Medical, College Medical, Via Linda Behavioral
19. Mountain Vista; CBI TP2
20. Aurora, St Luke's
21. i don't remember
22. I am POA so I should be included in tx, but never am.
23. Aurora Glendale Dr. [REDACTED], Haven Dr [REDACTED]
24. Many years ago
25. Signature Health and Windsor Laurelwood put him on the wrong medication and made his situation much worse.
26. In the past hospitals never asked me as a guardian with mental health powers permission to change medications they did and then sent him home after a short stay with no direction
27. [REDACTED], COPA Gateway reduced Inveggia Sustenna without my (guardian) knowledge, prior to appointment time.
28. initially, but not after I exercised my authority consistently. That said, one of the CM stated... and it is in my LO's records... that I am 'difficult'.

Word Cloud for Q12-

Have clinics or hospitals made treatment decisions or medication changes without notifying or including the guardian?

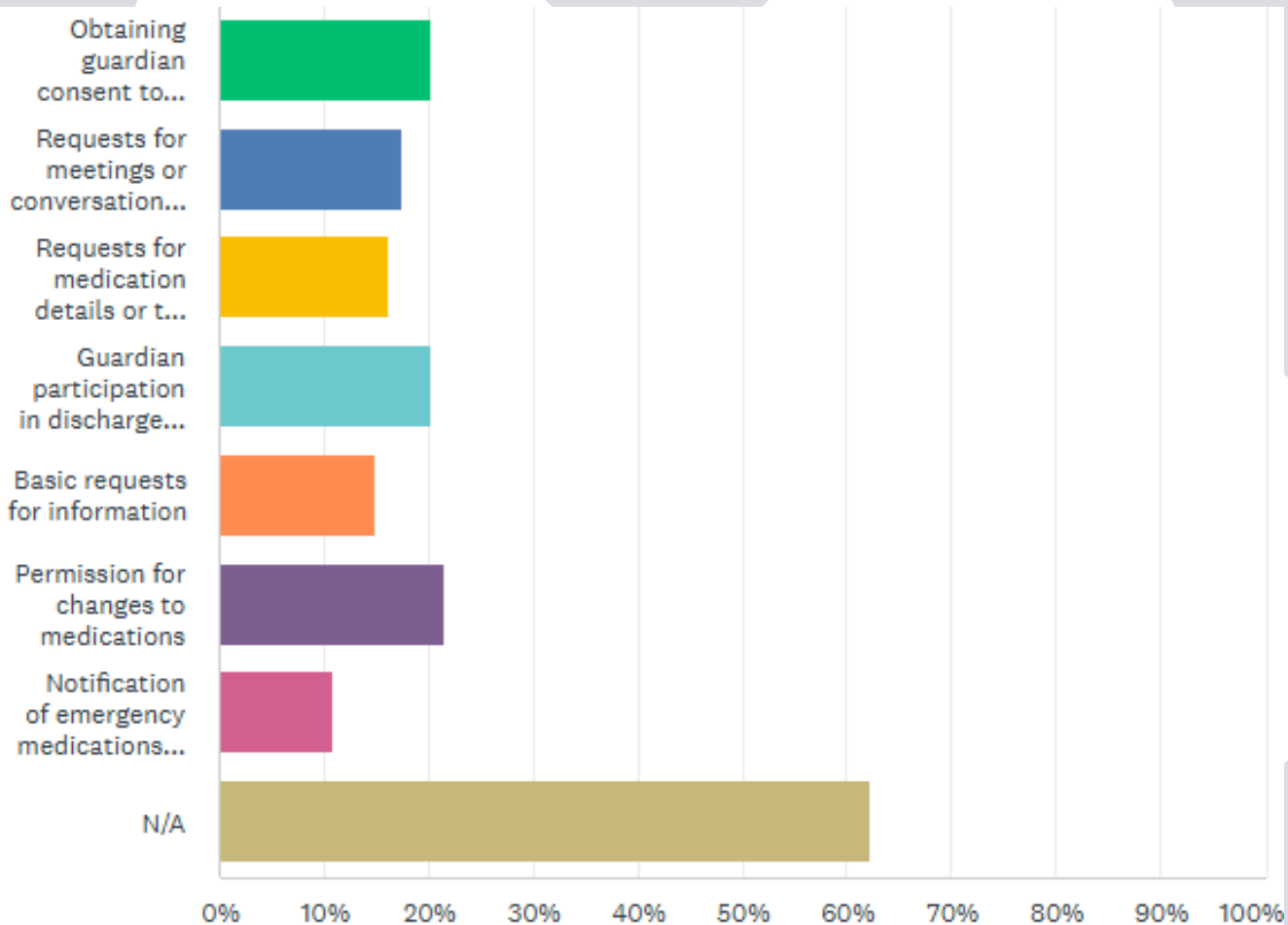
medications s agent
never
guardian Health Terros
Behavioral Aurora



Showing 9 words

Combined words (0) Hidden words (0)

Q13- Have clinics or hospitals refused to honor any of the following guardian rights or requests (select all that apply)



ANSWER CHOICES	RESPONSES	
▼ Obtaining guardian consent to treat upon admission	20.27%	15
▼ Requests for meetings or conversations without the ward (patient) present	17.57%	13
▼ Requests for medication details or test results	16.22%	12
▼ Guardian participation in discharge planning	20.27%	15
▼ Basic requests for information	14.86%	11
▼ Permission for changes to medications	21.62%	16
▼ Notification of emergency medications given	10.81%	8
▼ N/A	62.16%	46

Total Respondents: 74

Comments for Q13-

Have clinics or hospitals refused to honor any of the following guardian rights or requests

1. Clinic: Polara Health case Clinics: Polara Health; Southwest Behavioral Health; Spectrum Healthcare
2. Clinics: Polara Health; Southwest Behavioral Health; Spectrum Healthcare
3. Copper springs
4. st lukes, aurora
5. Providence Alaska Medical Center Anchorage, Alaska (see below) only two bad acting malpractice doctors interfered and made negligent decisions. The Mental Health Unit gave unprecedented care over the winter for four months building a lasting recovery. Only one provider on the unit created havoc. She routinely left a wake of chaos for patients and families. As did one psyche ED doctor. The two of them following some kind of corporate playbook with people's lives.
6. No one honors medical and mental health POA, Copa, CBI, Valleywise & DDD.
7. Banner Behavioral St. Luke's
8. COPA
9. Scottsdale, Banner, Community Bridges, Haven
10. Aurora
11. Terros Priest
12. Aurora Behavioral Health- Tempe Angelic Homes LLC (BHRF) Serenity Preferred LLC (BHRF)
13. Valleywise wouldn't tell me she was there unless I had her code. I worked it out so I'm not going to be all that specific. But needing a code is ridiculous. I've spoken with moms in other states that don't have this. Not sure how this code crap came about, but I'm not sure how requiring a person who is SMI and potentially floridly psychotic to have to give someone a code seems cruel.
14. COPA; no longer but they did in the first few years. Communicating in front of the client was very difficult and detrimental to our relationship and his person. COPA

Comments for Q13-

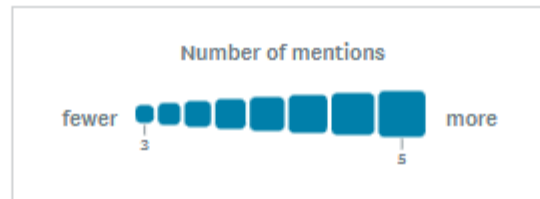
Have clinics or hospitals refused to honor any of the following guardian rights or requests?

15. Aurora Behavioral Health- Tempe Angelic Homes LLC (BHRF) Serenity Preferred LLC (BHRF)
16. Community Brides, Aurora,
17. Valleywise CBI
18. Recovery Innovations
19. Terros
20. We do not have guardianship but they did deny Power of Mental Health attorney
21. Mountain Vista and CBI TP2
22. i don't remember
23. Aurora Glendale, Phoenix Medical Behavioral, Haven. Also Dr. [REDACTED] used to refuse to meet guardian without the wards permission. But she's gone now.
24. Signature Health
25. Haven, CBI inpatient
26. [REDACTED] and [REDACTED] COPA Gateway. [REDACTED] refused to meet with me (guardian) or respond to email of concerns prior to first meet. She asked that I leave the room during the initial meeting, so she could speak with my son in private. I complied to her request, but didn't feel comfortable. She stated I could request in front of my son to speak to her privately next time, but I do not feel that is appropriate either. That dynamic leads to mistrust with my son who suffers from a lack of insight.
27. COPA gateway
28. COPA; no longer but they did in the first few years. Communicating in front of the client was very difficult and detrimental to our relationship and his person. COPA

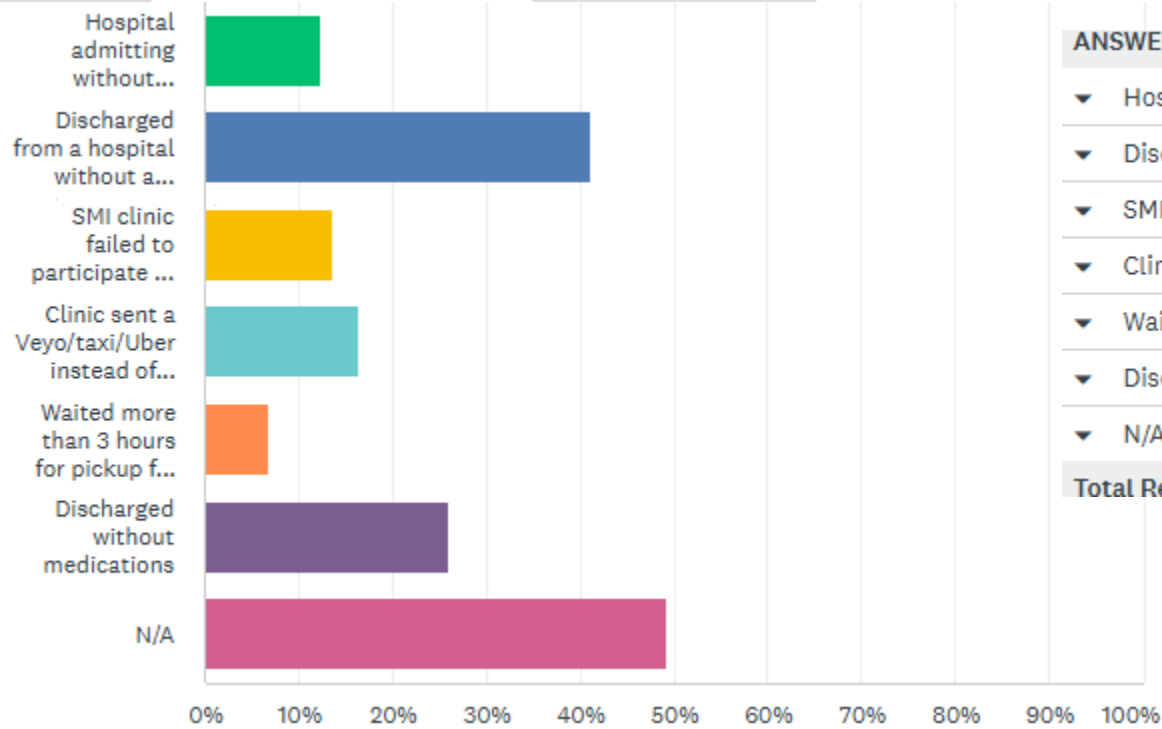
Word Cloud for Q13-

Have clinics or hospitals refused to honor any of the following guardian rights or requests?

Valleywise COPA one s Medical
code Aurora CBI son
Haven
Behavioral Health speak
Mental Health



Q14- Has a hospital admitted and/or discharged your loved one without SMI clinic involvement and coordination? If yes, select all that apply:



ANSWER CHOICES

	RESPONSES	
▼ Hospital admitting without notifying the SMI clinic	12.33%	9
▼ Discharged from a hospital without a “doc-to-doc” (phone call between hospital and outpatient clinic doc)	41.10%	30
▼ SMI clinic failed to participate in hospital discharge planning meetings	13.70%	10
▼ Clinic sent a Veyo/taxi/Uber instead of staff person to pick them up from the hospital	16.44%	12
▼ Waited more than 3 hours for pickup from discharge	6.85%	5
▼ Discharged without medications	26.03%	19
▼ N/A	49.32%	36

Total Respondents: 73

Comments for Q14-

Has a hospital admitted and/or discharged your loved one without SMI clinic involvement and coordination?

1. Medical Behavioral Hospital of Northern Arizona - Prescott, AZ, looks like it closed Phoenix Medical Psychiatric Hospital - Phoenix, AZ - also looks like it closed Polara Health inpatient unit - Prescott Valley, AZ Pronghorn Psychiatry - Prescott Valley, AZ
2. Haven Behavioral Health, so there was a 5 day lapse in continuing it!!! I provided NP at Copa EV with copies of discharge paperwork. We were not told the rxs were called in when he was seen by [REDACTED] at 7:30 am 2 days after discharge. Then I had to pay out of pocket for him to restart after pharmacutd advice on most important ones to continue!! . Saturday after Haven discharge, son was shivering during withdrawal from benztropine, gabapentin, haloperidol, and trazodone. It wa a criminal neglect in my opinion.
3. Valleywise Alium
4. copper springs
5. aurora
6. St. Luke's Copa
7. No. Clinic was assigned. Valley Wise to Sonoran SW
8. Banner Good Sam
9. Valleywise, Southwest, Connections.. I know there are more.. I need to look them up.
10. CBI, Copa Gateway
11. hospital sent him to a group home. then the group home sent him home after 3 months with no follow up or medication follow up
12. Haven
13. After Nick menaced one of the Act Team members in 11/2023 he was amended at when to Haven's. He had only been out of Valley Wise for three weeks after being of COT for 8 months. He was very unstable. Dr [REDACTED] continually tried to get Dr. [REDACTED] to provide continuity of care with his clozapine, but Dr. [REDACTED] never returned his phone call or attended the staffings (this was over the long Thanksgiving Day Holiday). Nick was off Clozapine for an extended period and was aggressive to me during visits at the Havens which the BH tech documented in his file. I was begging for guardianship but could not either doctors assistance. Despite demonstrated hostility and aggression toward me at a visit (and being off his clozapine) he was released to my care just days later.
14. Aurora
15. I don't know if this counts about July of 24 my son was at Palo Verde in Tucson. They let him out onto the streets in a Uber after I begged and begged them to keep him and help him

Comments for Q14-

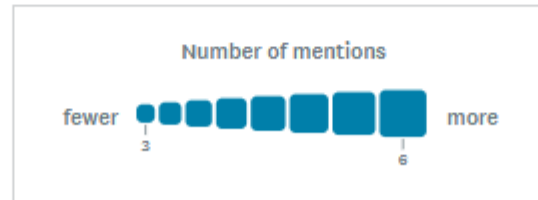
Has a hospital admitted and/or discharged your loved one without SMI clinic involvement and coordination?

16. CBI, Copper springs, Aurora
17. Recovery innovations inpatient
18. Valleywise CBI
19. House on 43rd Ave and Windrose Manager said he was good to go without including me or his case worker at COPA
20. St. Luke's
21. Recovery InOvations
22. First hospitalization he was interviewed for SMI and denied even though he was in full psychosis. Was to be admitted to out patient program Momentum but we had to fight getting Momentum to call us and then had to fight for SMI
23. CBI falsely accused my brother of becoming verbally combative to get him transferred out of their facility. When pressed for details, they changed their tune. Mountain Vista would not schedule a doc-to-doc with the clinic. Psych provider at hospital refused to talk to me.
24. Copper Springs East CBI
25. Upc
26. Aurora
27. i don't remember
28. COPA Mesa
29. Aurora Glendale more recently. In the past there were issues with discharging from hospital to the clinic and not all the meds were available for pickup at the clinic. Clozapine would have REMS issues then some meds had copays because they were not on the non-title 19 formulary like modafinil and OTC meds so payment would be an issue causing delays.
30. Windsor Laurelwood did not coordinate with Signature Health when releasing my son who was in harms way mentally due to medications given to him.
31. CBI inpatient Haven
32. As guardian I have requested records from Lifewell, but have not received anything.
33. Valleywise
34. Scottsdale behavioral has discharged without meds Several times

Word Cloud for Q14-

Has a hospital admitted and/or discharged your loved one without SMI clinic involvement and coordination?

Health copper springs
Valleywise Aurora son
days Haven CBI begged
issues Copa hospital clinic
Clozapine inpatient Behavioral
meds

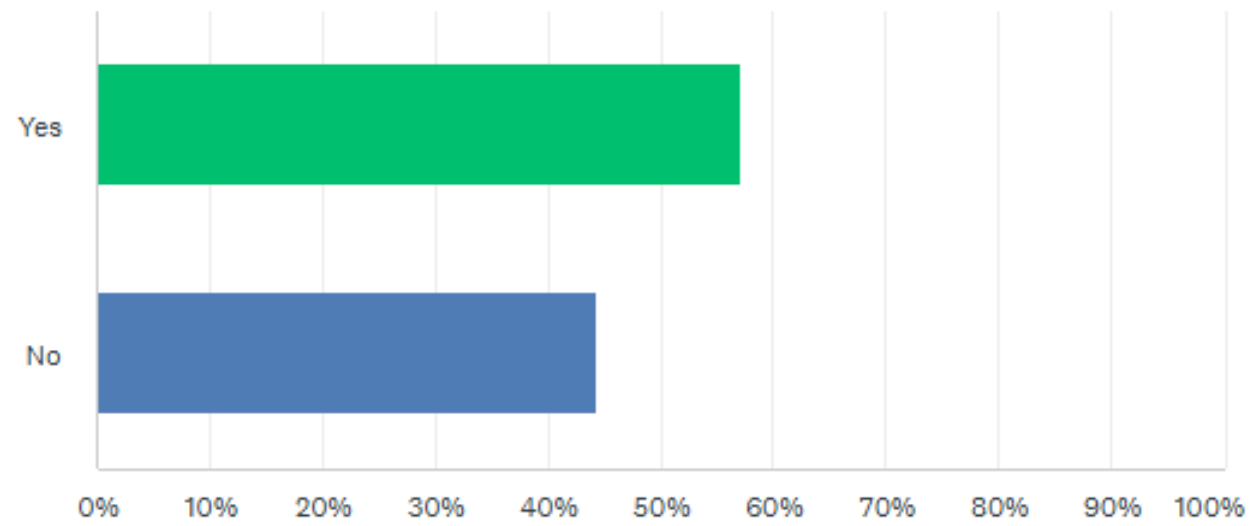


Showing 19 words

Combined words (0)

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Q15- Has the clinic refused to return calls when you were concerned or needed help with a family member?



ANSWER CHOICES	RESPONSES	
Yes	57.14%	40
No	44.29%	31
Total Respondents: 70		

Comments for Q15-

Has the clinic refused to return calls when you were concerned or needed help with a family member?`

1. Child & Family Support Services (CFSS); Polara Health; Southwest Behavioral Health; Spectrum Healthcare
2. Due to understaffing only
3. Not in last 2 yrs.
4. Terros
5. n/a due to my SMI LO does not have a clinic
6. Terros
7. st lukes, lifewell south mountain
8. Copa
9. copa gateway between 09/2022 - 2/20/23
10. Banner Good Sam - Phoenix
11. La Fontera. Let so many messages I lost count. I was inquiring on services that I was interested in for my sister. They never call back
12. All of them, especially Connections!
13. Copa Gateway
14. Banner Behavioral St. Luke's
15. Southwest Behavioral and Health Services Buckeye
16. they claim hippa and say they can only speak to my son
17. Spectrum
18. Clinicians at SWBH - Saguaro; UPC many times, CBI, First Episode Center - This happens all the time and I have good documentation
19. Aurora, lifewell
20. Spectrum Healthcare
21. Terros 51 ave and Priest

Comments for Q15-

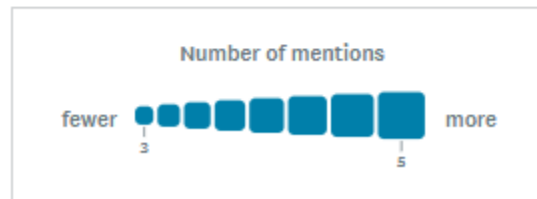
Has the clinic refused to return calls when you were concerned or needed help with a family member?

22. buckeye southwest
23. Southwest network
24. Lifewell south mountain
25. Not refused but took too long to return calls poor intervention or crisis support
26. [REDACTED] at COPA
27. The only person who has been good about returning calls is my daughters new case manager. Prior to her, I had to call Copa Health corporate compliance or Dr Chern because no ONE would returns calls.
28. However, often not in a timely manner. St. Lukes
29. I filed retaliation grievances and it only gets worse
30. At first Southwest Network San Tan was unbelievably difficult to deal with. Getting meds renewed was a repeated difficulty. They have changed management and it has been so much better in all aspects
31. Lifewell South Mountain
32. CBI staff never returned calls. Mountain Vista was not much better.
33. Copper Springs East
34. They havent refused, they just ignore family communication many times.
35. Windsor Laurelwood
36. It is impossible to reach them by phone and when promised return phone calls. They NEVER do. Which leads us to continually follow up while leaving messages and transferred wrong staff and those that are not properly trained by the company they work for High turnover rate as well. Very inconsistent
37. Copa I don't have an ROI, however, I wanted to give them info regarding possibly renewing COT.
38. Banner Behavioral Health Hospital
39. COPA
40. Terros Priest Rd Tempe

Word Cloud for Q15-

Has the clinic refused to return calls when you were concerned or needed help with a family member?

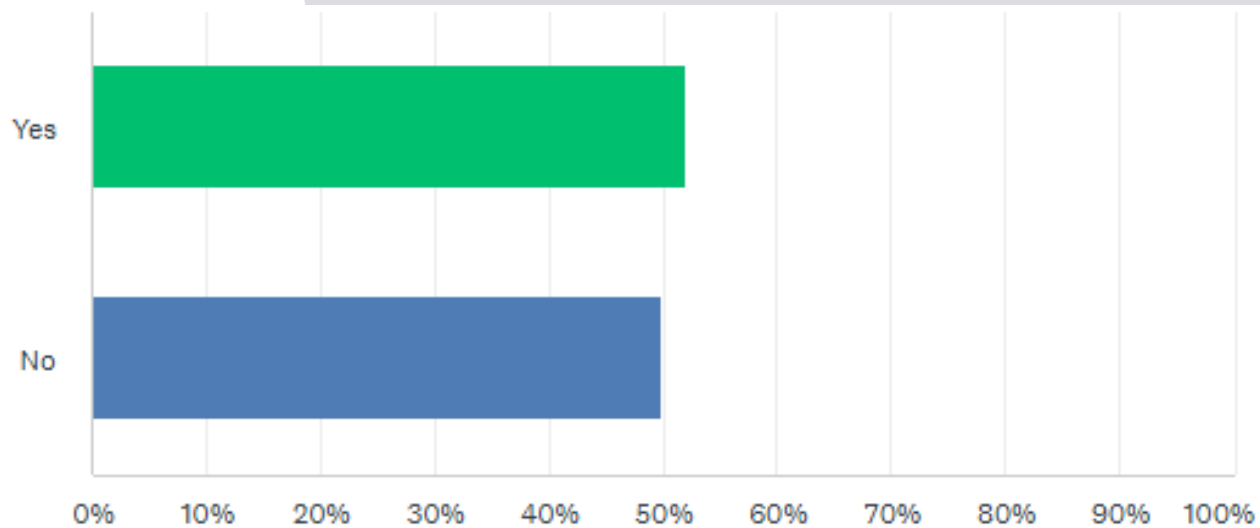
lifewell south mountain
Services call st lukes
never Copa Terros
good return calls



Showing 9 words

Combined words (0) Hidden words (0)

Q16- Are there clinics or hospitals that excel in supporting guardians for behavioral health matters? Please specify



ANSWER CHOICES	RESPONSES	
Yes	52.00%	26
No	50.00%	25

Total Respondents: 50

Comments for Q16-

Are there clinics or hospitals that excel in supporting guardians for behavioral health matters?

1. Child Clinic: Valle Del Sol ([REDACTED], SMI psychiatry provider)
2. The Guidance Center, Flagstaff inpatient unit, BHRF and ACT team
3. I have heard Copa Gateway is good but son agreed to switch then charged his mind.
4. n/a
5. Valleywise
6. heard that southwest network san tan is good from other parents/guardians
7. Copa gateway has provided support Since I became guardian with counseling and supportive groups for my son.
8. Banner Behavioral Health - Scottsdale
9. No, all they want to do is drug them up and send them back to the streets. None of them actually try to help them.
10. Providence Alaska Medical Center under every provider but one bad acting doc on unit and one malpractice ER doc. All other providers and nursing and staff treated patient and family with all due respect to deliver complex Clozapine and ECT interventions.
11. I did not receive help
12. Copa Gateway Act Team
13. Lifewell
14. Southwest network Northern star
15. I believe if my son has MetLife or Aetna he would get better care. He has state insurance.
16. [REDACTED], NP
17. Southwest Network Northern Star, UPC inpatient, certain providers at CRU units
18. CBI Javelina communication with guardian has been excellent during transfer to hospital process. Auroa Aurora Behavioral Health System - Tempe
19. I wish I knew those

Comments for Q16-

Are there clinics or hospitals that excel in supporting guardians for behavioral health matters?

20. Orion Homes Kat at RI
21. The last time my daughter was at Valley Wise Mesa (February 2025) I was very impressed with the staff, especially Dr. Pardo. First doctor that actually understood and was able to pinpoint the issues my daughter was suffering from.
22. Valleywise Mesa and Valleywise Maryvale, hospitals, with Dr. Carol Olson's support, Valleywise Mesa SMI Clinic
23. Specifically, Eilene F at Southwest Saguaro is AMAZING
24. Valley Wise provided excellent care. Meghan Matte and Janina at COPA Health (Metro) were awesome too. Side note: I was lucky though. Although Meghan acted as my brother's case manager, she was actually the clinic coordinator. She was assigned my brother because I had retained legal services from Josh Mozell.
25. Southwest Network Estrella Clinic. Valley Wise BHH, Maryvale.
26. Swm San tan
27. Copa Health, Valleywise
28. Nick Eisemann-Astone at Terros.
29. Valleywise and COPA
30. I'd like to change to one that does. We would love a recommendation.
31. EpiCenter
32. Not guardian but Polara excels in many many ways
33. ValleyWise is the only hospital that showed respect and true concern/compassion. COPA team performs significantly better now than it did initially and that is because I have connected with people in positions of authority for stronger advocacy.

Word Cloud for Q16-

Are there clinics or hospitals that excel in supporting guardians for behavioral health matters?

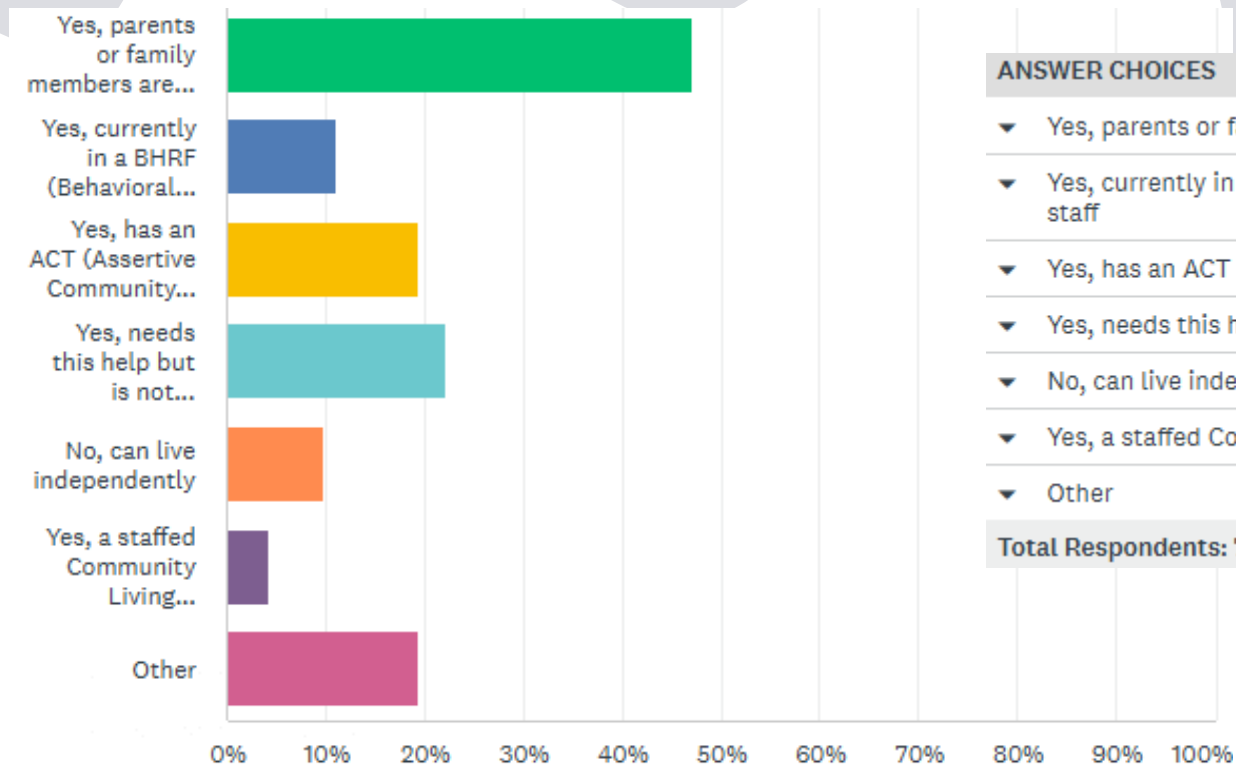
one COPA unit good hospital
son Valleywise guardian
provider Clinic actually
Valley Wise Copa Gateway



Showing 13 words

Combined words (0) Hidden words (0)

Q17- Does your ward or family member need supervision and assistance with living and medications? (Supported living)



ANSWER CHOICES

RESPONSES

Yes, parents or family members are providing this support	47.22%	34
Yes, currently in a BHRF (Behavioral Health Treatment Facility), treatment center, "flex care" or "step down" with staff	11.11%	8
Yes, has an ACT (Assertive Community Treatment) team	19.44%	14
Yes, needs this help but is not receiving it	22.22%	16
No, can live independently	9.72%	7
Yes, a staffed Community Living Placement (CLP)	4.17%	3
Other	19.44%	14

Total Respondents: 72

Comments for Q17-

Does your ward or family member need supervision and assistance with living and medications? (Supported living)

1. Child Clinic: receives services through the Division of Developmental Disabilities (DDD) including HCBS (home and community based services) including attendant care, habilitation and respite
2. The Guidance Center, Flagstaff
3. He needs court ordered treatment but his lack of insurance is a constant issue.
4. Copa
5. my son lives independently but I as his guardian still help him with his medication.
6. Have it now, but that will change after my parents pass away or they no longer can watch my sister
7. I full time arrange complex case management without a department of health care services waiver 1115 because the state of Alaska has yet to implement or operationalize support for chronic medical management to a family member. Patient falls under DHSS/Health Care Services for Chronic medical management yet is shunted to no help of case management under Behavioral Health/Substance Abuse. Seems the State relies on a perverted psychiatric path of committing and sending gravely ill out of State to god knows what kind of facility. For bad players the medical is mentalized and very messed up.
8. My LO is 17
9. We pay for a personal assistant to help with medication management
10. Southwest Behavioral and Health Services Buckeye is working with our son in a program at New Freedom.
11. I am 67 years old and had a bad divorce. I have another disabled adult child. I work and have a mortgage without a large retirement plan. Nick was removed from the Scattered Housing list in 2019 after I filed a grievance (yes, I have proof). For my own safety I have rented my son an apartment and now pay for his expenses and my own. This is not sustainable.
12. Waiting for a BHRF placement
13. death of loved one only 5 days after COT expired
14. Currently residing at Serenity Preferred LLC (BHRF)
15. Orion
16. Parents are providing this support but needs the ACT team, which hasn't been completely facilitated.
17. Have requested placement
18. Orion Homes

Comments for Q17-

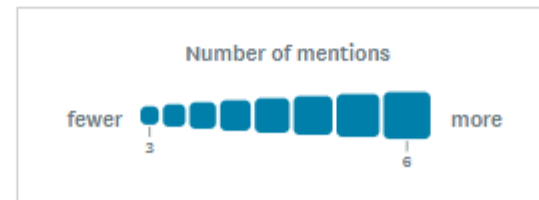
Does your ward or family member need supervision and assistance with living and medications? (Supported living)

19. Copa Health I have requested my daughter be put on ACT. At first they told me that, as a guardian I can not make that decision, if my daughter was not on board. I told them they were wrong, and they said it won't help her if she doesn't want to participate.
20. Jeff lives independently, in a CLP. He receives a lot of support from his parents. Jeff "left" his SMI clinic (with Dr. [REDACTED] ok'ing that after him being stable for a few months), The clinic and case manager provided a lot of support. We were not in favor of him dropping down to the GMH clinic, but willing to give it a try. Jeff's fairly stable. Dr. [REDACTED] said he can go back to the SMI clinic and see Dr. [REDACTED], if need be. And, he wants to switch to a different clinic.
21. ACT Team at Terros is worthless
22. Also has a 1:1
23. Lifewell South Mountain
24. Although CBI and Mountain Vista claimed my brother could live on his own, he couldn't because of dementia. Mercy Care also refused him an BHRF placement. Mercy Care wouldn't return calls or emails from the case manager either. Ultimately, I was able to get him qualified for ALTCS.
25. BHRF: Serenity Residential Homes, Gilbert AZ.
26. Copa Health
27. ACT: SOUTHWEST NETWORK CLP: COPA
28. He needs a flexcare program
29. In a private pay BHRF due to being NT19.
30. And One to One
31. Lifewell/Terros on Osborn
32. We need help. Somehow SMI is not recognized as a disability while receiving disability. This is an invisible disease and it needs as much support as the visable disability's. Why are we not supported ??? ALTCH will Not help we were denied services for SMI because it isn't a visable. disability. We are falling through the cracks of the system.
33. COPA Gateway
34. Polara

Word Cloud for Q17-

Does your ward or family member need supervision and assistance with living and medications? (Supported living)

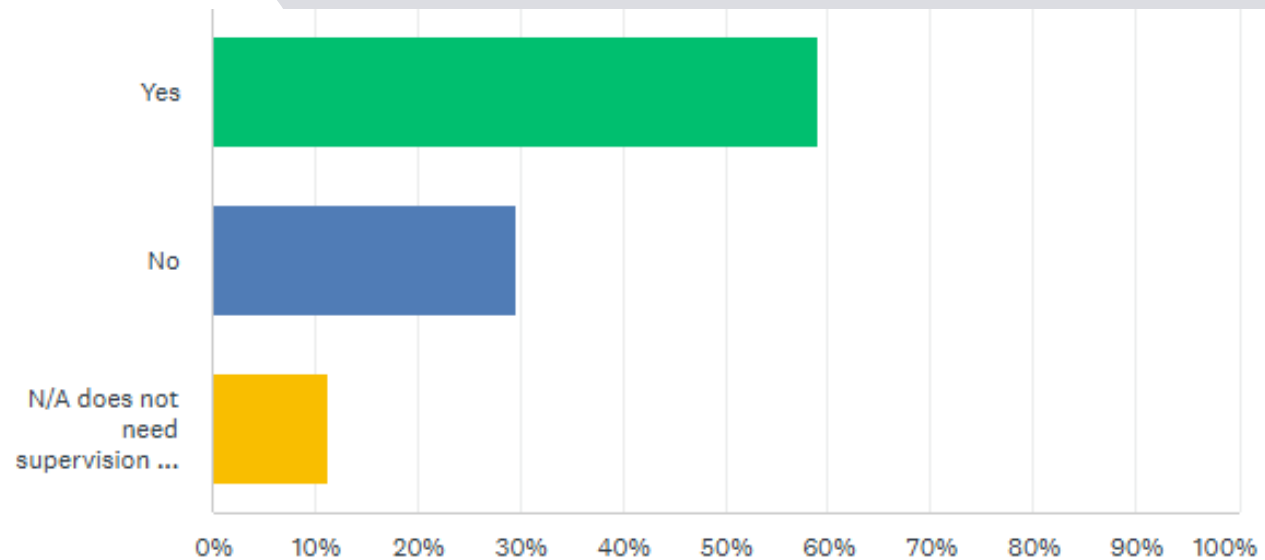
Dr Darling BHRF clinic
Jeff support son disability will
One COPA t services Homes
pay receives help
parents State needs



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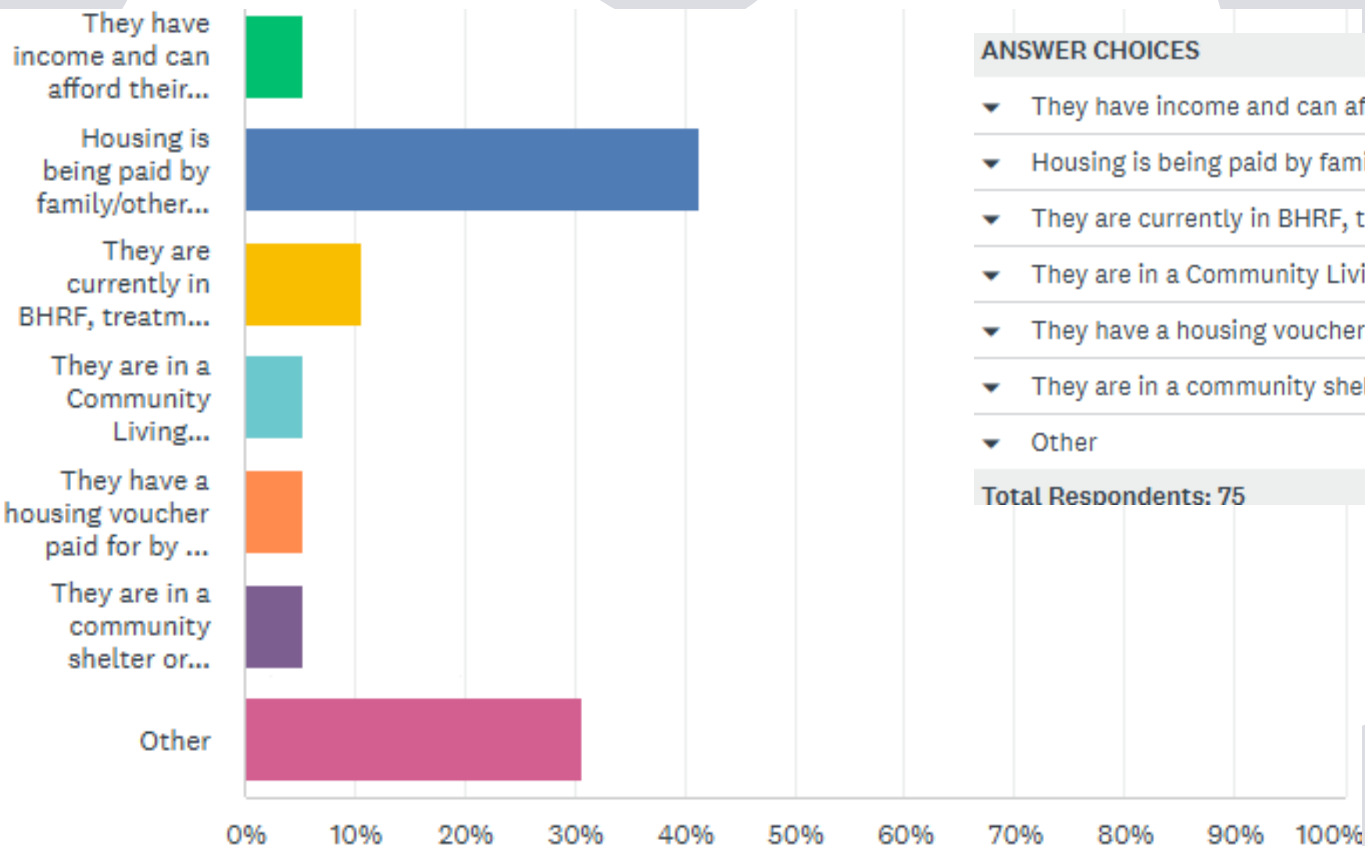
Combined words (0) Hidden words (0)

Q18- If you answered yes above, is your loved one considered a high cost / high utilizer because of frequent hospitalizations or behavioral health needs?



ANSWER CHOICES	RESPONSES	
Yes	59.15%	42
No	29.58%	21
N/A does not need supervision or assistance with medications	11.27%	8
Total Respondents: 71		

Q19- Who is paying for or supplementing the cost of your loved one's current housing?



ANSWER CHOICES	RESPONSES	
▼ They have income and can afford their own housing	5.33%	4
▼ Housing is being paid by family/other private support	41.33%	31
▼ They are currently in BHRF, treatment center, “flex care” or “step down” paid for primarily by insurance or AHCCCS	10.67%	8
▼ They are in a Community Living Placement (CLP) for SMI paid for by the state	5.33%	4
▼ They have a housing voucher paid for by the state	5.33%	4
▼ They are in a community shelter or unhoused	5.33%	4
▼ Other	30.67%	23
Total Respondents: 75		

Comments for Q19- Who is paying for or supplementing the cost of your loved one's current housing?

1. loved one receives SSI funds which are used to cover housing costs; more resources are needed including an option for funding which would allow the loved one to remain in their family home
2. Social Security Disability Insurance
3. He is in jail again!!
4. Social security and supplemental income from a parent pays their housing
5. hud housing based on income
6. When my loved one stays compliant on meds, everything's pretty good
7. He chooses to be homeless because he is in fear of being picked up and me wanting to help him. He is so far off. He needs an inpatient program that will help him immensely before they let him go. But no one offers to help he needs, they just drug him up and set him on the streets. I used to pay for sober living places, but he burnt every bridge, because of his mental illness.
8. On Medicare and Medicaid. Disability before the age of 65.
9. SSI and family support
10. Currently in a program at New Freedom
11. jail
12. Social security pays part of living expenses, I cover around \$500 per month additional
13. Me, Mom Dumping, and it is an extreme burden
14. ASH
15. They are in CBI waiting for placement to a BHRF. Otherwise would be homeless
16. passed away in jail
17. He lives with me and my mother
18. Step down has been offered but my son doesn't stay.
19. She is living with a friend.
20. Lives on street. Probably steals from convenience stores

Comments for Q20-

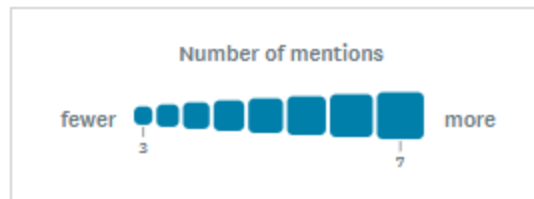
Who is paying for or supplementing the cost of your loved one's current housing?

21. She lives at home with us.
22. ALTCS
23. and SSDI Medicare
24. The past 6 months in a flexicare doing well. Manic episode required inpatient. Symptoms not resolved so inpatient 4 times in a month. Will discharge next week to TLP. Clinic told him they submitted stepdown app, but Mercy Care told me an app has not been submitted.
25. Private paying for a BHRF.
26. HOM inc
27. Prison is paying for his care now...he is not on any medication and seems to be doing much better. I can't help but to wonder how wrong it was to make him take medication that was hurting him not improving his symptoms.
28. LO lives at home with parents and is receiving disability.
29. We need financial help. We've been on housing lists for years. It's a joke. We would like support with him home instead and will know for certain he's cared for properly. The system is not helping in these BHRF homes. They are not a fit for us.
30. Is on COT. Able to function while on medication only. Is working and paying for housing at the moment.
31. Loved one is on disability and family pays the rest.
32. Parent

Word Cloud for Q19-

Does your ward or family member need supervision and assistance with living and medications? (Supported living)

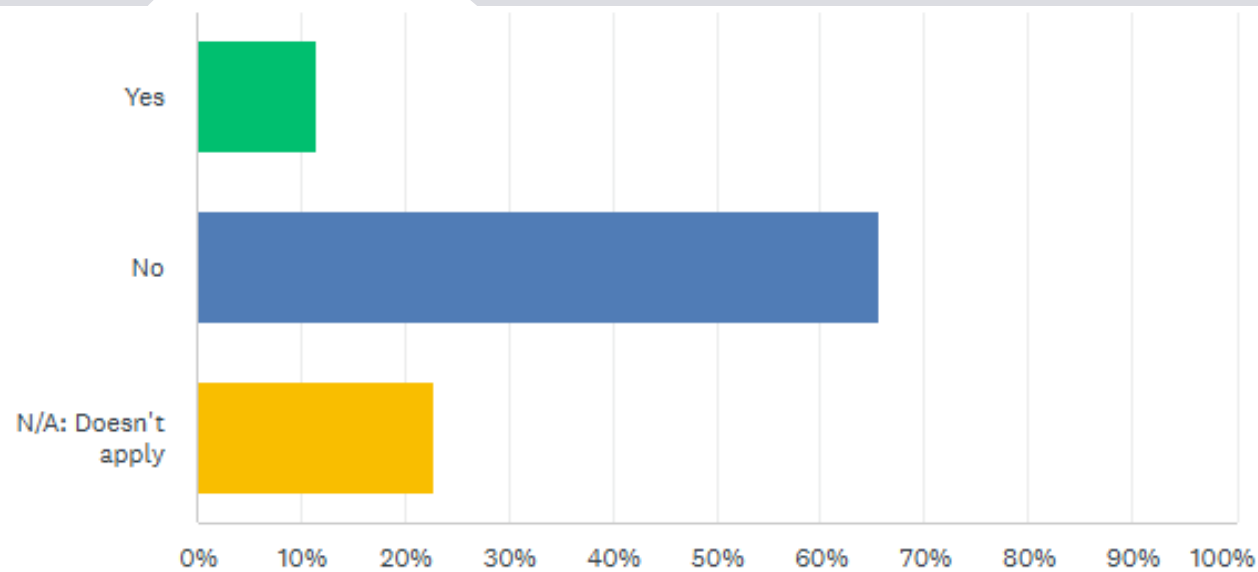
month BHRF Care Social security
family
home Disability **living**
jail **help** **pays**
needs housing
loved one inpatient will parent
medication



Showing **18** words

Combined words (0) Hidden words (0)

Q20- Have you had to pay for a psychiatrist because the clinic providers refused to participate in paperwork or evaluation?



ANSWER CHOICES	RESPONSES	
Yes	11.43%	8
No	65.71%	46
N/A: Doesn't apply	22.86%	16
Total Respondents: 70		

Comments for Q20-

Have you had to pay for a psychiatrist because the clinic providers refused to participate in paperwork or evaluation?

1. Mental health clinic was unable to provide client with licensed therapist trained in autism and PTSD and was unable to contract with outside providers. Paid for sessions with trauma-informed therapist with successful outcome.
2. I cannot afford to. He only sees a psych NP
3. cant afford to do this
4. Chose to pay for private care because too many medication errors within the system...One such error placed him on life support in intensive care for two weeks.
5. He is too far off for that, he doesn't even believe he has an illness. The government and everyone is out to get him.No place has helped him cope with anything. So he is just on the run.
6. when no one would see us because of HIPPA I had to pay out of pocket for an initial consultation
7. I pay for a psychiatrist out of pocket because my clinic never referred me to one when I asked for it
8. Attempted to utilize this option, but could never find private providers who were willing to see Nick
9. guardianship paperwork while in jail
10. He refuses any type of therapy
11. The clinic provided guardianship paperwork, but only from a nurse as they did not have a psychiatrist available.
12. Have had to pay for outside consultation because there is a lack of psychiatrists at the clinics. NPs are not MDs. I don't see how the clinics can get away with this.
13. This was back when Dr. [REDACTED] was at Terros.
14. Not yet but it was difficult to get this done.
15. Had to pay for private psychiatrist because of extremely poor car at COPA gateway

Word Cloud for Q20-

Have you had to pay for a psychiatrist because the clinic providers refused to participate in paperwork or evaluation?

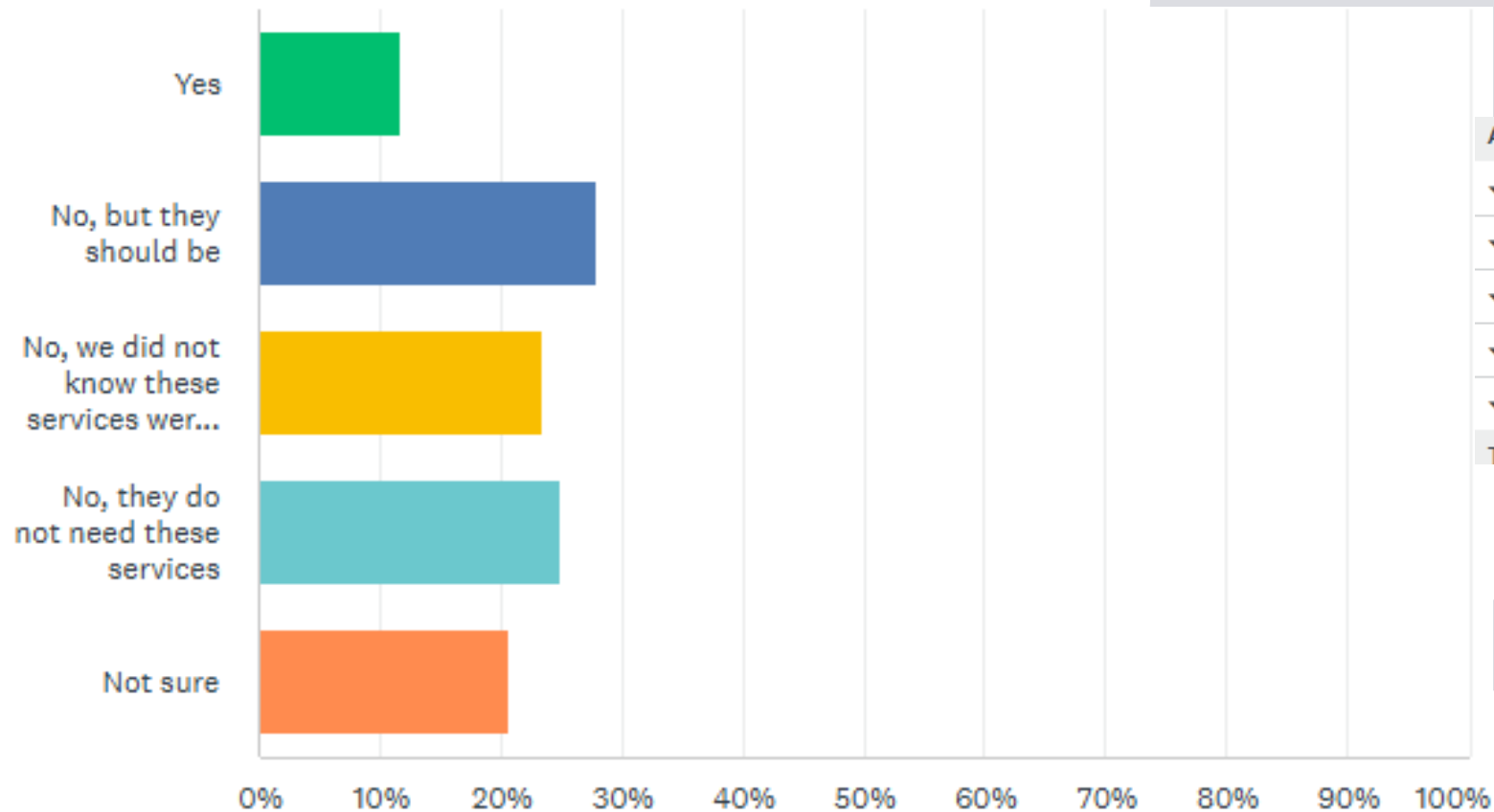
one
private pay clinic
psychiatrist see



Showing 6 words

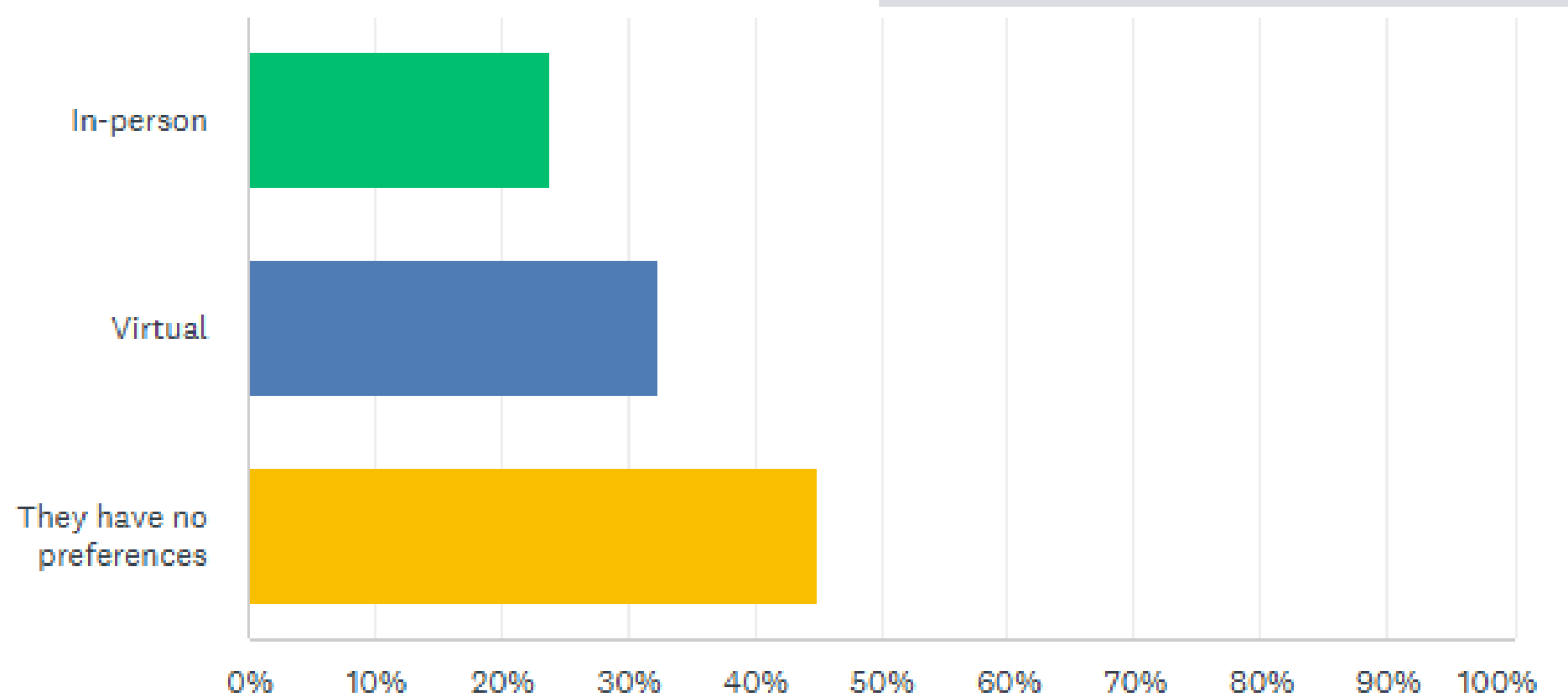
Combined words (0) Hidden words (0)

Q21- If your family member is in need of permanent housing that provides supervision and assistance with living and medications, is your family member on the permanent supported housing wait list?

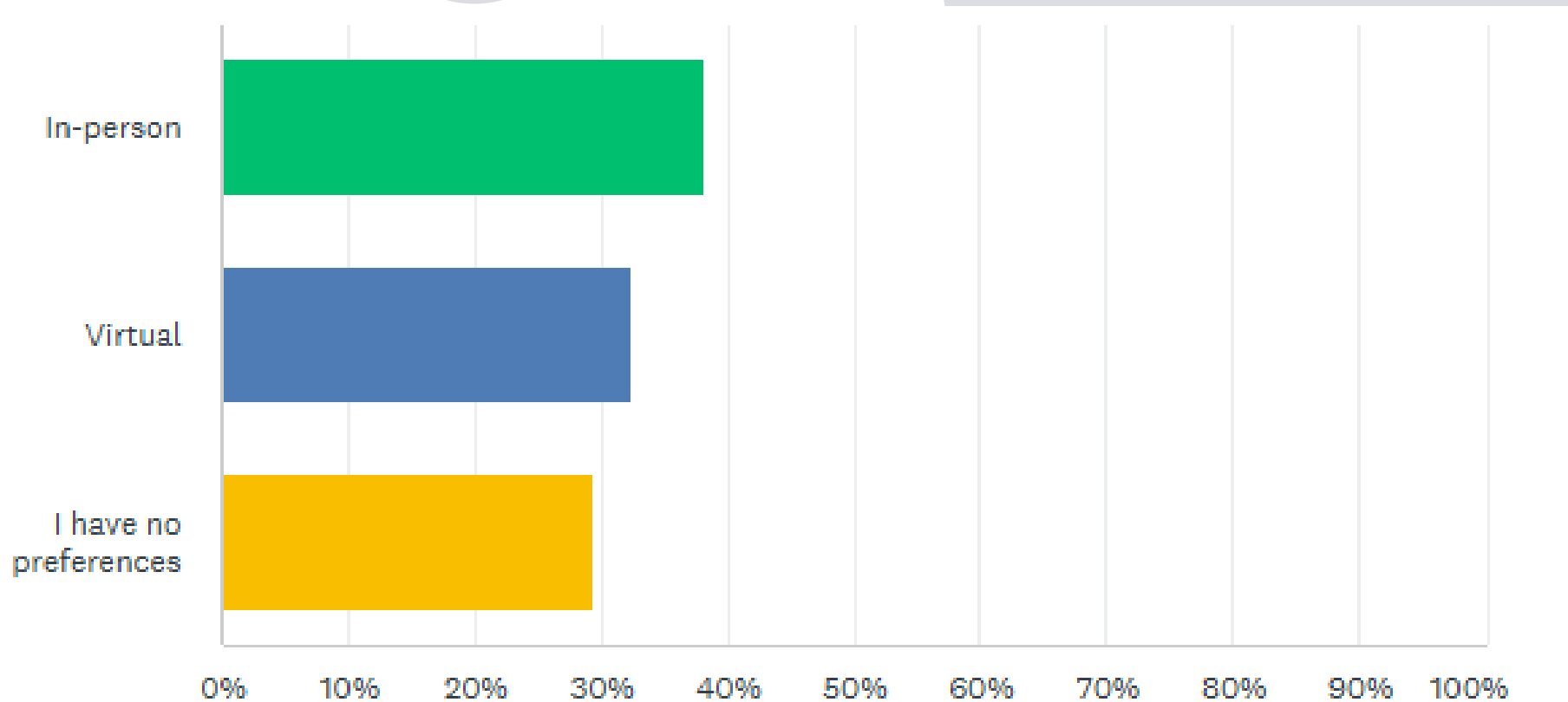


ANSWER CHOICES	RESPONSES	
▼ Yes	11.76%	8
▼ No, but they should be	27.94%	19
▼ No, we did not know these services were available	23.53%	16
▼ No, they do not need these services	25.00%	17
▼ Not sure	20.59%	14
Total Respondents: 68		

Q22- What environment does your ward or family member prefer for behavioral health court matters?



Q23- What environment does the guardian prefer for behavioral health court matters?



Q24- Are there any additional thoughts or insights you'd like to share regarding court-ordered treatment, guardianship, housing or behavioral health services?

- At this time, we are trying to get guardianship for our SMI loved one and not having any luck so far. We plan to go back to our attorney Josh Mozell to see what would be next steps, given our daughter's psychiatrist will not submit a Health Professional Report.
- Cot should be at least 2 years vs 1. Take one year just to get our love ones adjusted by that time its time to start all over and its tough on a SMI individual. Counseling should be a requirement on COT and not an option.
- It's been beneficial for my family and loved one
- I would like to see the services that are available, where and how to get them
- who is in charge of funding for these services that should be available out the severe mentally ill? why could i not find help for the 10 years that I searched.
- Lack of communication, lack of resources and lack of supervised housing for SMI individuals and their families.
- COT should be more of a problem solving court with judician oversight. COT and guardianship should be encouraged in jail
- My son is being treated at Lifewell Clinic on 40 E. Mitchell st, and I am satisfied with their support but they change doctors too often. They have a new doctor treating him who is updating his medication I hope it works.

Q24- Are there any additional thoughts or insights you'd like to share regarding court-ordered treatment, guardianship, housing or behavioral health services?

- Legal Guardianship in my opinion was nothing more than give me a glorified ROI and wasting my money every year to renew it. My requests for certain medications were never honored, my daughter's one clinic forgot to put her name in with HOM Inc. for housing 10 years ago and now she is on a very long wait list. COPA allowed my daughter to get off the ACT TEAM when I was her Legal Guardian and had mental health POA. I told them that I did not in anyway, want her off of the ACT TEAM, and my wishes were not followed. I couldn't do anything about it,. My former attorney didn't bother to return my phone calls or emails which was very frustrating because I need him to intervene.
- A one year court order is too short to mediate the recovery of the individual or to provide safety for the loved one, the family, and the community. There should be a five year court ordered term. Or the Court Order should continue indefinitely, until the loved one is shown to be restored by standards that include sustained functioning, insight into illness, and track record of voluntarily taking medications.
- The clinical staff are untrained with basic ward/guardianship laws and keep insisting the ward makes the decisions about housing and various types of treatment options. They use a SMI persons's lack of insight as an excuse to deny treatment and services the guardian attempts to get for them. They refuse to include guardians in scheduling appointments. They treat family members who are guardians like they are imposing on their loved ones civil rights.
- Any type of financial help.....
- My court ordered treatment for my son was no problem to renew if needed with our clinic.
- I just don't understand how COT is determined by the person who is SMI? Also it can stop before the year is up
- Provide housing with supervision

Q24- Are there any additional thoughts or insights you'd like to share regarding court-ordered treatment, guardianship, housing or behavioral health services?

- The 2024 amendments to ARS 36-504.01 and 36-540 provide important rights of guardians in COT proceedings. These statutes are being ignored. Guardians are being denied their rights to be informed of and fully participate in COT cases. These statutes must be implemented. Also, my LO deserves a permanent housing situation that he does not lose simply because he goes to the hospital. There is currently no appropriate placement. He needs med observation at a level that does not exist outside a bhrf. ACT team is not adequate for his needs. Mercy Care and clinic tell us there is no suitable alternative to bhrf but bhrf is not permanent. It is very destabilizing not to have a permanent home.
- My son has been hospitalized for the maximum amount of days for the calendar year without any progress. He is actually doing just as good in jail, if not better then the level one hospital. Which is very sad. We are lacking a involuntary secured step down with a comprehensive program that includes counseling, services such as ACT while inpatient. Currently only medications are being administered to stabilize which isn't enough! A constant revolving door, while our loved ones and family members suffer. After all the hospital stays he was not helped and is now in jail. Now his COT is going to expire while in jail and there is a great possibility we will need to start the process all over.
- Housing issues constant concern Long term supports are needed without constant moving from one program to another
- Before we obtained guardianship, there was a lot of comments I could have given. I did what I could during thattime
- We should have figured out a better solution for guardian than public fiduciary . I am praying for help for Larry every day.
- When my daughter started having voices, I took her to Lifewell, and all they did was ask me to take her to the hospital. I explained she has lots of food allergies, I am trying to avoid hospitalization.
- We need to be on alert about Medicaid issues!

Q24- Are there any additional thoughts or insights you'd like to share regarding court-ordered treatment, guardianship, housing or behavioral health services?

- The clinics need more education. Right now, they are worthless.
- Too many concerns to list here. The mental health care system needs to be overhauled. If not for dementia and need for help with ADLs, my brother would have died on the streets.
- Guardianship seems complicated. My son works and drives and rents a room in a house with a responsible respectful home owner. He still gets in minor accidents and runs lights occasionally so I'm concerned about him. But he really wants to be independent. He works full time and is on COT with a good Dr. and meds. Finally. He's been hospitalized/in patient care twice this year and each time over two weeks and given all kinds of medication. They didn't know where he was on, the chances his previous Dr was making to meds etc. Horizon was pretty good keeping me in the loop and letting me share what he had been through. But a week after he was discharged he had a worse episode and ended up in Copper Springs and they are by far the WORST place to deal with. No communication. Just awful experience!!!
- While on COT the BHRF should be required to give a nutritional report monthly to the clinic, so that the PCP can monitor the patients nutritional intake.
- SMI system of care, including housing services, is sub-standard in the state of AZ. In a 2 year period my son has been displaced 29 times between inpatient stays, TLP's, flexcare programs, sober living even though he isn't a drug or alcohol user and an extended stay hotel. He feels like he doesn't belong anywhere. He wants to live at home, but it is not safe or therapeutic.
- Too long on the housing wait list - over a year maybe two at this point - it would be nice if I got a regular update like what number we are in the queue and a time estimate.

Q24- Are there any additional thoughts or insights you'd like to share regarding court-ordered treatment, guardianship, housing or behavioral health services?

- Court ordered treatment works when the patient is on the correct medication. It's a disaster when the medical community fails at giving the correct diagnosis and or medication. Group homes did not work and living at home was dangerous for him and our family. He needed a safe place to heal not a rotating door through the court and medical community.
- Yes, there should be family financial support available help as a family paid caregiver. Housing is scarce and we are willing and have been providing that along with all other supports for years but as you can imagine we cannot work and provide financial support and housing because of the full time support my loved one needs Its almost impossible to work outside of the house as my time is consumed caregiving my loved one with a SMI mental health disability including anosognosia. This needs to change. We need to pass bills in the state and senate. It shouldn't matter where they get support and who provides (family) it as long as It is approved. In our case it is a very good fit for our loved one and yes we have put in the stops in case something tragically happens to us.
- Families that provide supports like housing should be included in decision making regarding COT, especially when person experiences lack of insight, has a history of criminal justice entanglements, and evidence of poor judgement. Providers need legal guardrails in place to protect clients who lack the ability to protect and advocate for themselves.
- My daughter has been on COT approximately 4 times. Her current medication helps her function minimally. She has lots jobs because she is so slow. I encouraged my daughter to talk with her provider and she said that her provider can't change it because of COT and that her provider doesn't care.
- Rehabilitation after a psychotic break to rebuild and reinforce good hygiene and health behaviors.

Q24- Are there any additional thoughts or insights you'd like to share regarding court-ordered treatment, guardianship, housing or behavioral health services?

- Renewals for cot are difficult in many ways for the provider. Judging if the person will continue treatment. Amount of paperwork. Serious matter for courts to continue to take away personal freedom. Families should be involved with provider upon renewal and allowed court presence. Tracking of those released from cot to show those in compliance to treatment and those who deteriorate. Maybe courts could grant a temporary or probationary release from cot to judge how a person is doing. Person would have to report to court every 60 days for a year?? Polara is great. So I don't want to tarnish their successes. Just that they should have renewed my son's cot.
- Nothing you don't already know. If you are a fierce advocate, your loved one mostly does okay.
- Work force needs significantly better and ongoing training and pay. Training on Guardianship, anosognosia, benefits of COT for SMI, etc... Guardianship gives the "authority"; system hinders the "ability". This must change; the system should be grateful for the involvement of family and guardians and support their ability to advocate for the person with SMI.
- Very few SMI clinics to choose from Care, f/ u, communication, support etc etc Are no where to be found in Terros on Priest.
- My son is repeatedly prosecuted when his medications are not given in a timelr manner.
- My experience is that there are a sufficient number of skilled people with good intentions in the system to be able to deliver adequate services, however, the structure of the system including the rules and regulations is so inadequate that individuals cannot effectively perform their jobs and deliver needed services.

Q24- Are there any additional thoughts or insights you'd like to share regarding court-ordered treatment, guardianship, housing or behavioral health services?

- I have guardianship since December 30, 2019. I did not realize annual reports were required. I recently received a notice of non-compliance from the court because a report covering 2001 to present are past due. "Pursuant to A.R.S. §14-5315 an Annual Report of Guardian and Physician's Report must be submitted every year by the Guardian on the anniversary date of their appointment as Guardian..." COMMENT: This presents an additional burden for the guardian, but necessary to ensure the loved one has their needs met. However, it would be helpful to have a more streamlined process, especially for loved ones who have been designated SMI. (2) Persons who are DD/SMI do not have adequate access to mental health and wrap-around services that are designed to meet their specific needs.
- The focus should be on expanding and fully funding supportive housing, ACT teams, the clubhouse model, increasing quality of care in clinics and hospitals, effective non-police crisis transport (<https://www.mdedge.com/psychiatry/article/217741/schizophrenia-other-psychotic-disorders/transporting-high-risk-psychiatric/page/0/2>) to reduce the need for more punitive, dehumanizing, dangerous, ineffective and costly programs. Guardianship has been much more effective than court-ordered treatment in our experience. Other states use the Medicaid waiver program to provide assisted living support for people with mental illnesses. ALTCS discrimination against mental illness should be removed and AHCCCS should be forced to follow policy and cover assisted living in home services. Was informed by an OHR advocate about AHCCCS supposedly covering assisted living but we have been unable to obtain this. Supportive housing waitlist does not allow you to apply to the housing you need if you do not already live in the region — because our family member lives in the North they cannot get on the list for the more extensive supportive housing in Central which doesn't exist in the North region. An initiative to get training on anosognosia and LEAP communication evidence and practice into the hands of providers across the state would also be great.

Recommendations for Improvement:

01

Provide additional training on guardianship, Court-Ordered Treatment (COT), and guardian rights.

02

Improve communication regarding available services for both Title 19 and non-Title 19 individuals.

03

Clearly communicate the escalation process to family members and guardians.

04

Enhance transparency and communication around clients' housing needs, including waitlist status.