

MONTHLY MEETING MINUTES
MENTAL HEALTH COMMISSION (MHC)
May 3rd, 2023 – FINAL

Agenda Item / Discussion	Action /Follow-Up
<p>I. Call to Order / Introductions</p> <p>Cmsr. L. Griffin, Mental Health Commission , MHC Chair, called the meeting to order @ 4:46pm.</p> <p><u>Members Present (In-Person):</u> Chair, Cmsr. Laura Griffin, District V Vice-Chair, Cmsr. Leslie May, District V Cmsr. Ken Carlson, District IV Cmsr. Gerthy Loveday Cohen, District III Cmsr. Pamela Perls, District II Cmsr. Barbara Serwin, District II Cmsr. Gina Swirsding, District I</p> <p><u>Members Present (Virtually):</u> Cmsr. Skyelar Cribbs, District III</p> <p><u>Members Absent</u> Cmsr. Tavane Payne, District IV (Excused) Cmsr. Rhiannon Shires, District II (Unexcused) Cmsr. Geri Stern, District I (Unexcused)*</p> <p><u>Presenters:</u> Lynn Mackey, Contra Costa Superintendent of Schools Alejandra Chamberlain, Director, Foster Youth Services Coordinating Program (FYSCP) Contra Costa County Office of Education (CCCOE) Gerold Loenicker, Program Chief, Child & Adolescent Services (BHS) Dr. Suzanne Tavano, Director of Behavioral Health Services (BHS)*</p> <p><u>Other Attendees (*in Person):</u> Colleen Awad (Supv Ken Carlson’s ofc)* Guita Bahramipour, AOD Advisory Board Angela Beck* Jennifer Bruggeman Vanessa Chena Gigi Crowder, NAMI CC John Gallagher Patricia Granados* Johnie Hines Jessica Hunt Jennifer Morales Fahimeh Niroomand Armon Ofogh Dorie Ofogh Kiana Ofogh Teresa Pasquini Jennifer Quallick (Supv. Candace Andersen’s ofc) Stephanie Regular, Public Defender’s office Jenny Sanchez, Psynergy Jane Sheehan* Sam Tooloee Taunita Trotter Jennifer Tuipulotu Nooshi Vatanka Parto Vossough Katherine Wade*</p>	<p>Meeting was held at: 1025 Escobar Street, Martinez, CA 94553 and via Zoom platform</p>

II. CHAIR COMMENTS/ANNOUNCEMENTS:

- i. Review of Meeting Protocol:
 - NO Interruptions; Limit two (2) minutes per speaker; Stay on topic, Wait to be acknowledged by the Chair before commenting, NO sidebars
- ii. Meeting attendance rules: Please RSVP as soon as possible to guarantee a quorum; If not attending in person must be “just cause” notify the chair ASAP or “Emergency Circumstance” request must be submitted in writing and voted on by the commission. All absences must be noted in minutes for all meetings
- iii. Reminder all commissioners required to take the Brown Act Training (<https://www.contracosta.ca.gov/7632/Training-Resources>); and Ethics Training (<https://www.fppc.ca.gov/learn/public-officials-and-employees-rules-/ethics-training.html>)

I would like to thank everyone for attending. I have a few announcements, first we have lost another Commissioner this month: Joe Metro, District V has resigned. Due to the new teleconferencing rules now in effect, he can no longer make the meetings.

We are arranging a visit (tour) to the Psych Emergency Services (PES) and in patient units (4C/4D) at Contra Costa Regional Medical Center (CCRMC).

Reminder: May is Mental Health Awareness Month.

III. PUBLIC COMMENT:

- (Gigi Crowder) I wanted to come and lift up the City of Antioch, especially for its African American residents placed on the chaos that we are experiencing from the racist text messages. I know the mom of the individuals who was identified in a more deplorable way by the police there. I was a little disappointed that we didn't get any action or had any actions from Behavioral Healthcare Department. I feel we should treat this as we did COVID as an emergency. The mental health of residents in Antioch has been compromised (especially African American residents) and it just seems we should be doing more around the healing process for that community. We have heard at the Board of Supervisors (BOS) that there is going to be funding for the attorneys that will support both families and finding justice through the cases reviewed where racism may have been impacted as well as the District Attorney (DA) receiving funding. But the funding to support a healing process has not really taken off. It definitely needs to happen because the residence of the eastern part of the county have largely been neglected where programming is concerned and groups of us are stepping up to fill the void. I am most concerned with young people. Young people in ([REDACTED]) were not getting in our NAMI office about it and the challenges that residents are facing. This is an appeal for us, when something like this happens, to have a response to it from Behavioral Health, the school districts, letting us know that we matter.
- (Guita Bahramipour) I'm here to speak about Mental Health issue and 988 and the community of Farsi speaking. They are here and want to talk to you. Farsi speaking, Iranian/Persians. They are not receiving support or help, they need more programs, to be recognized. Some of them are Afghanistan refugee, and we need to have more programs for them. Refugees from Iran and Tajikistan, there are about 70K-80K Farsi speaking residents in our county. We need to pay more attention to them and would like you to give them a few seconds if they would like to

raise their hand and the issue with their problems or maybe we can address their problems into the committees.

- (Dorie Ofogh) I am here to (also) support Guita in what she is saying. If you look at the history of the country of Iran, it is a country that has been hit with a revolution, dealing with oppression (both physical and mental oppression) of people and we do have immigrants here who need the support of the government and our cities to get on their feet. There are people who are just not able to have a normal life. Unfortunately, they are not getting the help they need. For example; getting the correct interpreters. Sometimes Iranian dialect is different than the Afghan dialect, but they get a Persian speaking it is the same language but it is different. They get an interpreter that doesn't speak the right dialect and then there is miscommunication in that process. Or they are not getting put through their right channels in order to get the help and support they need. I am appealing to the Board to help them in the community so that they can get the support they need. Also, I am unsure of the program timing but I do have a video to give you a brief history of the country of Iran from many years ago through the revolution. If there is time and you allow it, I would like to share that with you. (Cmsr. Griffin) we will contact you regarding getting that on the agenda within the next couple meetings).
- (Patricia Granados) I am a 15-yr combat veteran and resident of Antioch. I have fought for justice and peace and have advocated and written statements and recommendation letters for Afghan nationals, so I understand. Before anything, given the racial history of our government and the recent investigations of the Antioch Police Department, they have continued to oppress Black Lives, Brown Lives and () racism and we need a place of healing. There is a history of oppression dating back and not many know, the most recent was of the black of the community deserves a safe space of healing, but also a community where everyone can be welcome because we are going to need to heal. There are people hurting, it is traumatic and we are reliving these traumas that are unjust and it isn't fair. It isn't right.
- (Kathryn Wade) I am the late Malad Baldwin's mother. My son was beat in 2014 and was administered mental health medication per the police. The beatings didn't stop, even calling 911, the police would show up and the only ones to show up and write the 5150s. My son was one of those called out in the texts. Reading about him in the texts, Baldwin started the grades with an 84% of deadly force they put on my son. It re-traumatized me. My son died in 2021 and he was neglected in his room, he did come back to life and died two days later. I want to say that we do need services out there. I am his mother. It felt like my son died all over again. Last year I wanted to take my life and called 911 and they never showed up. Minutes later, a lady got me and it was a restricted call and said they were the police there to help me out. I had already left. Just in that instant, I wanted to take my life because all that I have been trying to do is put complaints in regarding the things they were doing to my son and no one listened at the department. I understand why now. Nobody was overseeing them. I am a mother hurting, grieving over her child and had to witness these beatings and the neglect. I have videos of them stating they won't take him if he doesn't fit the criteria or you feel they wouldn't tell me about him taking his life,

you take him. The officer that beat him the first time and went to court, my son was acquitted of charges. He was still going to be sued and come back to my house on a 5150 call. There is just a lot of stuff that went unheard that happened to my baby and he is a black African American man. We don't have nowhere to go. I have called 911, they didn't answer the call, I dialed 211 and they don't know how to equip this kind of situation. So I am just left in limbo and now these texts came out with all this racist stuff? This is affecting our community. This community is diverse and where can I go for healing? I used to work with CCC Mental Health and it has been like this for a long time, even with the MHSA funding, but it did outreach in West County underserved, where did that money go? Now a lot of people, gentrification in Antioch. This is a diverse community and there is no way these police should be paid tax payers money to do things they have done and got away with it for so long. There is no way we taxpaying citizens should pay any money for an attorney to cover up their lies and still get their pensions. This money should go to the people they victimized. If I was a criminal, it wouldn't happen this way. No one is investigating anything.

- (Jane Sheehan) I was pressed into service at the Antioch Police Station to guide the civil rights of protester that were on a hunger strike for a long time. I personally witnessed several civil rights violations to the protesters, all of whom (with the exception of two kids), were people of color. The police violated my civil rights and I was horrified at their behavior. I have never seen a police department that is so out of control and contemptuous. I would like to give the rest of my time to Kathryn.
- (Kathryn Wade) I just want to see some time of justice for my sone. As a mother, to witness my son walking down the street and the police pull him over, he asked what did I do? I recorded, she put his hands in handcuffs. This is not how you do the mentally ill. If he is sick, call an ambulance. I had to talk to the mental health lady sheriff to let him out. I recognized her name and said 'you are the same officer that stopped him when he was walking down Lonetree that dispatched the other officers' saying he had gun and they jumped out and beat him. They have come in my house and beat him. They pulled guns to his head in Walmart. There is a lot they did to my baby and nothing was ever done. I have stacks of complaints that went unheard.
- RESPONSE: Cmsr. Griffin – I hear you, the commission hears you and our Supervisor hears you. We definitely need to put more attention out in East county for mental health and maybe we can work with Supv. Carlson and the BOS to see what we can do to change this. I am so sorry for you loss. As a mother, I can't even imagine.
- (Jane Sheehan) Are there any mental health first responders in this county, when someone calls for mental health service/emergencies?
- RESPONSE: Cmsr. Serwin – Yes we have a Mental Health Crisis Response Team that has been developed over the past year and a half or so. It is responding in all districts, all cities. Some cities have their own programs, but, by and large, crisis intervention responds. I believe Antioch is covered by the Crisis Intervention Team. This is a new program and is funded by the Measure X dollars.
- (Kathryn Wade) I asked the police and I have the video at my house regarding that response team and they told me they didn't have the

phone number. (Cmsr. Serwin) That was an issue, just how to get that number. (Kathryn Wade) but they are targeting African American people in the community and if the police come out first. I know about the program, I interviewed for a position with them. The police tell us they don't know the number and said they didn't know about it. They are still not sending those referrals to that program to be there for those people that are going through a mental break. So the police officers deterring and stating they don't know the number is still leaving it up to them to brutalize and mistreat people that need medical (mental health) attention rather than criminalizing mental illness. It is an excuse to take three lives. I let my son go with them that day because they wanted to take him to PES, they didn't call the ambulance.

- RESPONSE: Cmsr. Serwin – I was involved with the team that did the brainstorming (there was about 40 people working out the situations and protocols). This program is still in its early stage and it will be rolled out over the next two years. One barrier to implementation has been the extreme shortage of mental health workers. Filling these positions, there are twelve teams and by June it should be 24, the target number of teams in the county.
- (Kathryn Wade) how many (percentage) of African American's are on those teams? (Cmsr. Serwin) I can't say how many on the team, but I can say for the project that developed this whole team and process, four out of five of the project managers were African American. (Angela Beck) for the three members of the public, in the meeting, please write down your email on the sign in sheet and I will send you the information for A3 and will connect you with the director for A3/Crisis Intervention (Dr. Chad Pierce) and he is African American. The problem is getting people hired.
- (Kathryn Wade) I was one of the stakeholders in that, working with people from Office of Consumer Empowerment (OCE) and moving from Richmond out to Antioch, those services didn't come this way. With the diversity of the community and the issues out here in East County, those services did not move with them and maybe that should be looked at, as well. (Cmsr. Serwin) That is something I have asked BHS multiple times for an analysis of how many dollars are spent per capita across each district and I have been denied that information.
- (Jennifer Morales) I am the Organizing Manager for the Community Engagement Program, for the non-profit organization Monument Impact. My job is to engage with our community about renter rights and to help renters if they choose to come together with their neighbors to organize unions in their buildings to demand from their landlords and property managers, and sometimes even City Council, for respect, dignity, and a safe inhabitable home. I am here to support Reimagine Antioch. CCC does have a horrible history of prioritizing profit over people. Given the recent events that have occurred in Antioch, it is not a shock to me that this happened as our own Sherriff Livingston in the CCC Sheriff's Department has worked with ICE (in 2018 and prior) to detain human beings. On top of the racism that renters of color experience here in CCC, it has been named the number one county in the Bay Area with the most evictions. If you are unaware, it is the Sheriff's department who conduct the lock outs; while at the same time, we are being told by our City Councils to call the police when our landlords are harassing us.

When we call them, they are also telling us they can't do anything to intervene. It is a no brainer what being displaced and force out of your home does to a person, especially by the police. It does affect your mental health, especially the children. In order to prioritize our communities healing in CCC and especially the residents of Antioch and to call for justice, we do ask for the MHC's support to act on Reimagine Antioch's demands for calling out the County's Board of Supervisors Burges and Glover for their silence and complicity. As well as to call on the DA to release the names and pause all criminal filings pertaining to the racist 45 involved officers and for the DA to reopen cases with those officers involved in the in-custody deaths and to prosecute for all civil rights violations and hate crimes. In addition, we call on MHC to call on the city of Antioch to fire and decertify these officers involved in the misconduct in other ways, such as hate crimes and conspiracy and for those 45 officers involved in this text crime, we ask for their retirement and pensions to be cancelled and for their names to be released. We also ask to support asking Mayor Thorpe to interview residents who completed applications for the civilian oversight commission and for the committee to be empowered beyond its purely advisory role to be at the table when conducting the audit. Lastly we ask that funds from **CBDG (Community Development Block Grant?)** be given to a non-profit in Antioch to be used to host a healing submit for residents that have experienced trauma from this.

- (Guita Bahramipour) I would just like to share information on 988. In the Iranian community, there was a community member, very loving friend that has been complaining about hearing voices and the community has tried to help, family could not help her, finally the community got together and asked to be helped by 988. The caller made a phone call to 988 and it was transferred to Oakland. The community member got paranoid that they would come in and handcuff her and take her to a facility and drug her, so she stopped responding. After which, the call happened and nothing happened. I am asking here, what can we do for our callers, what can 988 do? What can 211 do? What can this commission do?
- (Vanessa Chena) I am a community organizer with Monument Impact in Concord. I would also just like to echo and support that list of demands that were put together by Antioch community members and Reimagine Antioch regarding the Antioch Police Department. After hearing about the recent racist, sexist and discriminatory event within APD, like many others, I feel disgusted but not surprised. This has really shaken the feeling of safety and comfort of many residents and families of Antioch and across the county. The City of Antioch needs more mental health services. In my work as a community organizer, my co-workers and I work to support tenants, as they build tenant power amongst themselves to assert their rights and create community with their neighbors. The ultimate purpose of this is to ensure renters are living in a safe and inhabitable home. Antioch is a beautiful city and home to many but, unfortunately, noting about the recent APD news feels safe or habitable. As members of our County MHC, I ask that you all listen to the voices of Antioch's community and others in support of Reimagine Antioch's demands which Jennifer had listed earlier. These are only a few of the demands the community is calling for but I highly suggest and

ask that you all take the time to consider how these recent events have affected our community members and their well-being. And how you all move forward to show the residents of Antioch the support and the solidarity they are asking for.

- (Gigi Crowder) The Angelo Quinto response team, funded by Antioch, kicks off on Monday with the ribbon cutting. This is not from the County.
- (Taunita Trotter) I am a 30+ year resident of Antioch, California. What I am asking of the commission is for us to be able to address the needs as an emergent intervention to our underserved population. I ask it be placed on the agenda to look at the triggers of our Black and brown community in CCC and that we look at having an intervention for the current response needed right now. That we look at these Measure X dollars mentioned so we are able to react whether it is addressing emotional needs via Zoom but to be able react to the triggers of this climate and that we have some type of telehealth line in regard to a place of healing on an emergent basis and that we look at the needs, triggers and fears of our Black and brown residents and that we be able to place this on the agenda. I am also a community health worker, so I definitely will volunteer if they need for the Crisis Intervention Team.
- (Dorie Ofogh) I wanted to echo what Ms. Trotter is saying. That the community needs help regardless the color of your skin, we need these programs to be stepped up and people helped. We also have a friend who has difficulties obtaining any mental health, she lives with her husband who does not care at all about her well-being, whether she is driving or not, he will drive her and dump her somewhere to get rid of her for a few hours. Please step up these programs and allow people to benefit from them, not only those who need the help, but also it will benefit the person, their family and friends and the whole community.
- (Cmsr. Griffin) I want to thank all of you for commenting on this very important topic and to let you all know the commission has heard you and we will definitely look to putting this on a future agenda to see if we can help in any way and get some awareness on what needs to be done and what we can do.

IV. COMMISSIONER COMMENTS

- (Cmsr. Swirsding) I am a consumer and have had the police come and handcuff me. I wasn't doing anything but because I have a mental health diagnosis, they prejudged the situation. I live in Richmond. That whole experience has caused me to install security so I can see who is there because I will not answer the door to the police. They handcuffed me, put me in the ambulance and the people in the ambulance said I wasn't doing anything but sitting in a chair and they took the handcuffs off. There is more than that going on here. It's being labeled and once you are labeled, that's it. I hear you. We had a great program in West County but lost it all.
- (Cmsr. May) There are people here crying and coming to this commission asking us to do things. We have been talking about not having enough community participation. I have invited the community members to come out in person and on zoom to speak. Since 2020, I have been saying we build this agenda up with too many people presenting. We don't need this, what we need is less presenters and more community

<p>members coming and speaking up. Sharing their stories, their terrors, their hurt, their pain, their trauma. This is a mental health commission. If they can't come to the commission and complain and share what they are going through. I tip my hat at the Supervisor for showing up, but the two other supervisors that should be here but never attend, they are nowhere to be seen. As usual. I appreciate hearing from the community members more than I appreciate hearing from these same presenters every month. That is my take on this. And we do need help in Antioch.</p> <ul style="list-style-type: none"> • (Cmsr. Cohen) I think the students of color, all over, I see so much trauma. They don't want to go to class. Some teachers are old school and don't connect. People are not trained in multi-cultural awareness. I come from a huge district in New Mexico and we were trained and it is hard not to get frustrated because you don't have the resources that I used to have and I used to help my students. We are so lucky since the Liberty Union School District does not have a suicide. And this tells me we are doing something right. Since the pandemic, we have not had one suicide. We are working very hard with limited resources. • (Cmsr. Serwin) I just wanted to point out that a couple of years ago, the Afghan community came to appeal to the commission to build up more resources to serve their community and I have to say they may have been heard, but BHS did not have any sort of answer to them and it was very disappointing so I am glad you all stepped up and made this point again. 	
<p>V. APPROVE April 5th, 2023 Meeting Minutes</p> <ul style="list-style-type: none"> • April 5th, 2023 Minutes reviewed. Motion: G. Swirsding moved to approve the minutes as is. Seconded by B. Serwin <p>Vote: 8-0-0</p> <p>Ayes: L. Griffin (Chair), L. May, K. Carlson, G. Cohen, S. Cribbs, P. Perls, B. Serwin, and G. Swirsding</p> <p>Abstain: None.</p>	<p>Agenda and minutes can be found:</p> <p>https://cchealth.org/mentalhealth/mhc/agendas-minutes.php</p>
<p>VI. UPDATE on Mental Health Commission (MHC) Members and committee assignments, Angela Beck, Executive Assistant</p>	<p><i>Due to time constraints, this has been tabled for next month</i></p>
<p>VII. RECEIVE Presentation – Foster Youth Services Coordinating Program (FYSCP) – Alejandra Chamberlain, Director, Youth Services (FYSCP), Contra Costa County Office of Education (CCCOE)</p> <p><u>Mission</u></p> <p>Youth Services (YS) provides a broad range of coordinated services for youth who are in foster care or experiencing homelessness or experiencing barriers and need support to finish school, find a job or pursue a career path. Our programs are designed to prepare students to become self-confident, self-sufficient and independent adults.</p> <p><u>Funding Partners</u></p> <ul style="list-style-type: none"> • YS is a grant funded department within the Contra Costa County Office of Education (CCCOE), Student Programs, and receives funding from: <ul style="list-style-type: none"> • California Department of Education • Contra Costa County Employment and Human Services <ul style="list-style-type: none"> * Workforce Development Board of Contra Costa County * Children and Family Services (CFS) 	<p>PowerPoint presentation for this agenda item was shared to the Mental Health Commission via screen share and forwarded to the MHC and meeting participants via email after the meeting; as well as attached to the end of these minutes.</p>

- Contra Costa County Probation Department
- Department of Rehabilitation

Overview (Shared Org Chart)

- 4 core programs
 - Education for Homeless Children and Youth (EHCY)
 - Foster Youth Services Coordinating Program (FYSCP)
 - YS Empowerment Program (YSEP)
- Workforce program
- 3 management and 29 staff = 32 staff
 - Admin (4), EL II (2), EL I (1), YSS I (14), and Tutors (3)
- 14 Contracts
 - WIOA, Probation (2), EHCY, WAI, DOR
 - TPP, DOR WCW, Tutoring, FYSCP, CFS,
 - Title IV E, AB130, and HEARP I and II.

During 2022-2023, FYSCP served 753 Children and Youth in foster care

- Local Education Agency (LEA) numbers:

• Antioch Unified School District (AUSD)	219
• West Contra Costa Unified School District (WCCUSD)	123
• Mount Diablo Unified School District (MDUSD)	126
• Pittsburg Unified School District (PUSD)	64

2022-2023 Services:

- Liaison support
 - FYSCP Staff is collocated at CFS to provide CFS staff in coordinating, collaborating, and communicating with school district staff
- Tutoring
 - Students received tutoring via Zoom or in person
- Education Case Management
 - Students received services such as assistance with screening for AB167/216, tracking attendance, school enrollments and transfers , post-secondary support, etc.
 - FYSCP Staff collocated at AUSD, WCCUSD and MDUSD in progress
- Laptops and hotspots
 - Devices were provided
- Transportation
 - Students received transportation via HopSkipDrive
- Education records request
 - For court hearing and school placement change
- FAFSA Challenge
- Technical assistance
- Professional development
 - Trainings for district, CFS and community stakeholder
- AmeriCorps

FYSCP Data

District	2020-2021	2019-2020	2018-2019	2017-2018	2016-2017
Acalanes	4	6	4	8	4
Antioch	220	232	265	292	304
Brentwood	39	39	39	51	63
Byron	17	13	7	5	6
Canyon	0	0	0	0	0
CCCOE	20	45	60	73	42
John Swett	6	11	5	11	20
Knightsen	1	1	0	0	1
Lafayette	0	3	2	0	1
Liberty	37	48	45	57	56
Martinez	15	17	13	21	13
Moraga	2	1	0	0	0
Mt. Diablo	142	141	184	160	200
Oakley	35	28	33	55	51
Orinda	1	1	2	3	1
Pittsburg	88	79	70	93	96
San Ramon	21	29	30	39	31
Walnut Creek	0	1	4	10	7
West Contra	149	147	185	184	203
TOTAL	797	842	948	1062	1099

School District	2022-2023	
	Point in Time	2021-2022
Acalanes Union High	6	6
Antioch Unified	219	281
Brentwood Union Elementary	29	24
Byron Union Elementary	9	8
Contra Costa Co. Off. of Education	24	26
John Swett Unified	7	7
Knightsen Elementary	2	2
Lafayette Elementary	4	6
Liberty Union High	25	43
Martinez Unified	4	5
Moraga Elementary	4	
Mt. Diablo Unified	126	115
Oakley Union Elementary	28	21
Pittsburg Unified	64	71
San Ramon Valley Unified	17	22
Walnut Creek Elementary	5	1
West Contra Costa Unified	123	113
Nonpublic	40	0
Public Other	17	0
County Total	753	751

Wellness In Schools Program (WISP)

The vision of the CCC WISP is for all students in the County to access needed behavioral health services and supports in a timely manner

It is anticipated that the WISP Liaisons will:

- Establish new partnerships with mental health service providers
- Improve or develop systems to create sustainable best practices and protocols
- Share best practices for school-based mental health through a “Community of Practice”
- Improve timely access to and reduce barriers to accessing needed services
- Increase linkages to mental health services for districts
- Increase training on mental health topics to educators, administrators, parents/families, and students, to improve awareness and understanding of mental health topics, and knowledge of how to navigate services
- Reduction in negative student outcomes (e.g., chronic sadness, thoughts of suicide, suicide rates, chronic absenteeism, school failure, etc.).

RESOURCES

CCCOE FYSCP Website:

<https://contracosta.ss16.sharpschool.com/cms/One.aspx?portalId=1077397&pageId=2979068>

CCC Liaison List:

<https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:bbc68c50-4f76-392b-bdfb-37e49ceae693>

CDE FY Education Rights Website:

<https://www.cde.ca.gov/ls/pf/fy/fyedrights.asp>

COE Liaison List:

<https://www.cde.ca.gov/ls/pf/fy/contacts.asp>

Questions and Comments

- (Gigi Crowder) More and more, when there is an opportunity to share the demographics, ethnic information, that we do so. I am pushing hard for county to recognize the disparities that exist. We notice from your PowerPoint that the bulk of the youth are in Antioch and I would gather that a large number are African American and Latinx and so that is why we push for an African American Holistic Wellness Hub. We continue, year after year, seeing the same trends and recognize the culture and spiritual needs of young people who are displaced from their families are

often not getting met. I would ask that whenever you are presenting to use that we get it from the lens of offering the ethnic demographics. (RESPONSE: Alejandra Chamberlain) Absolutely. I am a data freak so I do have that information. Unfortunately, the request came last week and I literally only had two days to put this PowerPoint together, there was just not enough time. I am happy to share that with this group, via a pdf. I have had the pleasure of having a great supportive team that's been collecting the data. I could give you that by district, as well as county-wide. What it looks like.

- (Gigi Crowder) Thank you. We are really excited about the small grant we got from NAMI to work with youth in the eastern part of the county. We are launching our program with some student mental health ambassadors that working on videos. Our main focus is to reduce the stigma associated with mental health. (RESPONSE: Alejandra Chamberlain) What Ms. Gigi is referring to is our partnership between the FYSCP Program and the WIISP. We already contracted out some funds with the intention of really looking at how do we support our youth in foster care when it comes to mental health and really providing that intense, mindful service.
- (Cmsr. Griffin) Alejandra, thank you for a wonderful presentation. I do have a question. As far as children in foster care with mental health issues that may require a visit to PES (Psychiatric Emergency Services), I was made aware of some situations in the past where Foster Children were dropped off at PES. Their guardians/parents, whomever could not deal with them anymore and I was wondering, is that true? Is that still going on? What happens to those kids that are dropped and 5150'd or whatever. I am very concerned about that. (RESPONSE Alejandra Chamberlain) Cmsr. Griffin, that is a wonderful question. I do want to acknowledge that my expertise comes with the education lens. Unfortunately I don't have an answer.
- (Gerold Leonicker) It is true that PES is utilized when minors, including foster children, are experiencing acute psychiatric crisis, to the point where the caregivers cannot care for them and so PES is a crisis intervention and it does happen that child welfare is looking for alternative placement and cannot find in a timely manner. There is only few resources available to help manage minors with very severe behavioral and psychiatric issues. So, yes it does happen. PES is utilized in that way. Not ideal but we have a fairly good collaborative relationship between crisis services and child welfare / child family services (CFS).
- (Cmsr. Griffin) Does anyone follow the child and what services ... (Gerold Leonicker) Yes, most certainly. Our hospital and PES liaison, as well as our foster youth mental health staff who follow those minors closely. We are ready to provide support services to help stabilization within the community.
- (Cmsr. Griffin) Do you think it happens frequently? (Gerold Leonicker) More often than it should happen, but frequently is an elastic term. It doesn't happen all the time, but certainly more often that we would like.
- (Dr. Tavano) We could check with PES to see if that data is tracked or not, but all I would say is, going back decades when I was an in-patient provider, at times a family (foster or not) will determine during the course of a hospitalization or during the course of a visit to PES that they cannot manage and they do essentially walk away and it is at that point

that CFS will step in. They are not necessarily already involved with the foster care system, but that sometimes happens. The frequency is what I don't have the data on. I was hoping we could frame this presentation a bit and asked Gerold to please speak to the collaborative that really came together in order to pursue the grant funding / obtaining the grant funding in a role that behavioral health plays in a bigger picture of it.

- (Gerold Leonicker) In 2019, CCCOE with Lynn Mackey and myself, we put a team together to apply for this grant funding. There are several pieces to it, WISP under the umbrella of the CCCOE is one piece. Our contract expansion in AUSD is another piece, because collaboratively we established that in East County, especially Antioch, there was the greatest needs to expand, especially in mental health services. We collaboratively applied for this grant and the funding is running through BHS and then passed on to the CCCOE for WISP, in part, and another goes to the expansion of BHS in Antioch. We continue to collaboratively monitor their program closely. We have regular monthly steering committee meetings and collaborative meetings to gather input and further develop this program together. The program manager for WISP, Ade Gobir who presented to the MHC on a previous occasion, she works very closely with a point person on our side of the house in BHS, including myself and another manager as an integrative approach to implementing WISP within the county.
- (Dr. Tavano) The reason I asked Gerold to step in is that we don't 'brand' everything we are involved in. It really is to highlight the strong collaborative relationship between BHS and the CCCOE. There is a lot of planning that occurs together. This grant opportunity was an amazing opportunity and it really was the power of the entities working together to get a very good grant proposal through and funded.
- (Patricia Granados) I wanted to ask that we redirect the conversation back to the presentation because there are several questions still left.
- (Teresa Pasquini) Just to comment on children being left in PES since it was raised. I know for sure that it has happened in the past. It was brought before our commission numerous times. Suzanne is correct, families are actually coached sometimes to abandon their children in order to get them the access to what they need. I know we have had families come before the commission who had to do that with grandchildren, etc. I also want to say that there are literally children living in PES and it goes back years ago. Due to the inability to place them and they would be dropped there and live there and PES staff would literally become their caregivers. Anyone seeing that room, it is no place for someone to live. I also want to say, at the time, the staff I was aware of was heroic with the caregiving they were providing to the youth while they were there and I don't think we hear enough about the good things our staff do in some of these extraordinary circumstances. So, I wanted to raise that issue and, again point to the fact that there is a lack of placements. I don't know if it has changed and I think, Suzanne, it would be great to see the data because I know there have been a lot of changes in the system since then. I know there was a time when we were struggling to place people.
- (Patricia Granados) I think it's a great program I am learning about and thank you for that. My concern is Antioch and the funding going through there and the leadership that it goes through. I am specifically speaking about Superintendent Stephanie Anello's use of funds in the past. Meant

<p>to go for the kids, how to make sure this funding goes to the youth, the foster youth, because under that leadership, (I believe) \$1m is unaccounted for and \$75k that was supposed to go to LCAP (Local Control and Accountability Plan), went to the local blogger for some political gains and lawsuits. What kind of protocols is there going to be put in place to ensure that the marginalized the foster kids will get it? It is not coincidence that under her husband’s leadership, a lot of these abuses that happened, targeted black and brown communities.</p> <ul style="list-style-type: none"> • (Cmsr. Cohen) I worked for Liberty Union School District, each high school has a targeted counselor. They are dedicated to foster youth, homeless and youth at risk. That is part of funding the district received from somewhere (Alejandra Chamberlain) That is part of the work we are doing with the liaisons. We pilot a program with intention of extending the work that the district liaison does, by partnering with the school site and selecting an individual who would want to participate in professional development and technical assistance to be the school site liaison there for having better opportunity to interact with students more intentionally and one on one. As a result of that pilot program, we have seen an increase of just awareness of staff and youth in foster care and their needs. Whatever is going on within the school site being brought to the district and to our attention to provide support. The short answer is Yes. • (Cmsr. Swirsding) Has the youth conference started up again? (Alejandra Chamberlain) The one in Richmond? Unfortunately, I have never taken the lead on that one and was always a co-helper and it was really driving by the Richmond Police Department (but I don’t remember for sure) and unfortunately they have not picked it up since the pandemic 	
<p>VIII. RECEIVE Report Out: Alcohol and Other Drugs (AOD) Liaison, Cmsr. Rhiannon Shires, PsyD</p>	<p><i>Due to time constraints, this has been tabled for next month</i></p>
<p>IX. RECEIVE Report Out: Mental Health Services Act Advisory Council (MAC) Jennifer Bruggeman, MHSA Program Manager</p>	<p><i>Due to time constraints, this has been tabled for next month</i></p>
<p>X. Committee Report Out: Finance, Justice, and Quality of Care Committees</p>	<p><i>Due to time constraints, this has been tabled for next month</i></p>
<p>XI. UPDATE Student Behavioral Health Incentive Program (SBHIP) Overview and Current Status, presented to the Quality of Care Committee by Robert Auman (Senior Program Manager), Contra Costa Health Plan</p>	<p><i>Due to time constraints, this has been tabled for next month</i></p>
<p>XII. DISCUSS Plans for May is Mental Health Awareness Month, Cmsr. Laura Griffin</p> <p>Just to quickly touch base, we had a meeting, a few of us with Jennifer Tuipulotu Office of Consumer Empowerment (OCE) and a few others this past week regarding the topic would be for the presentation to the Board of Supervisor (BOS). We will be presenting to the BOS on May 23. It will be a five minute presentation and part of the presentation, I am thrilled to say, will be Ms. Amanda Allgood. She is a survivor of child trafficking, a resident of CCC, and will be one of our speakers. She will be able to tell her story of</p>	

<p>and how the county programs have helped her. We also touched base, and I want the commissioners to fill me in later after the meeting, what they think about this, but our theme this year is going to be Children’s Mental Health Awareness.</p> <p>In the past few years, there has been a spotlight on the mental health crisis, as we know, and it has taken a heavy toll on our kids. Especially in underserved and marginalized communities. Sometimes we forget about the little kids. They are struggling with anxiety, depression, drama, and way too many of them are facing these issues alone.</p> <p>I found out two days ago that Governor Newsom issued a proclamation declaring May 1-7, 2023 Children’s Mental Health Awareness Week. I want to ask all the commission (all commissioners) to make sure they attend this meeting. The BOS meets at 9:00am, they go into closed session and generally, my experience is that if there are presentations, it should be in the meeting around 9:30am.</p>	
<p>XIII.RECEIVE Behavioral Health Services Director’s Report, Dr. Suzanne Tavano</p> <ul style="list-style-type: none"> ➤ Update on Behavioral Health Continuum Infrastructure Program (BHCIP) ➤ Update on the Behavioral Health Bridge Housing (BHBH) Program ➤ Update on Children’s separate Crisis Services Unit and PES Renovation <p>I am going to speak to CalAIM in ‘shorthand’ and briefly as possible. We have been speaking about this for quite a while now and want to refresh everyone’s memory on what it is about and really fill everyone in regarding the work that has been happening in the last year and a half now.</p> <p><u>CalAIM - California Advancing and Innovating Medi-Cal</u></p> <p>GOAL: Transform and strengthen Medi- Cal, offer the people we serve a more equitable, coordinated, and person- centered approach to Behavioral Health care. The goal of CalAIM is to maximize health outcomes and improve the quality of life of Medi-Cal beneficiaries.</p> <p>Three Major Areas of Change:</p> <ul style="list-style-type: none"> ➤ Reducing barriers to care and improving timely access to services ➤ Coordination of care through improved data exchange ➤ Payment Reform. <p><u>Reducing barriers to care and improving timely access to services</u></p> <ul style="list-style-type: none"> ➤ Beneficiaries can receive timely services without delay regardless of where they seek care. There is no wrong door. ➤ Practitioners can provide and claim for clinically appropriate treatment without prohibition of “correct” delivery system (MHP vs MCP) ➤ Complex conditions (co-occurring mental health and substance use conditions) can be addressed where the client seeks care ➤ Clients can receive mental health services from both the MCP and the MHP if treatment is coordinated and non-duplicative ➤ Clients concurrently can receive mental health and substance use disorder treatment services 	<p>PowerPoint presentation for this agenda item was shared to the Mental Health Commission via screen share and forwarded to the MHC and meeting participants via email after the meeting; as well as attached to the end of these minutes.</p>

CalAIM Implementation Schedule

Policy	Go-Live Date
Criteria for Specialty Mental Health Services	January 2022
Drug Medi-Cal Organized Delivery System 2022-2026	January 2022
Drug Medi-Cal ASAM Level of Care Determination	January 2022
Updated Annual Review Protocol and Reasons for Recoupment FY 2021-2022	January 2022
Documentation Redesign for Substance Use Disorder & Specialty Mental Health Services	July 2022
Co-Occurring Treatment	July 2022
No Wrong Door	July 2022
Updated Annual Review Protocol and Reasons for Recoupment FY 2022-2023	October 2022
Standardized Screening & Transition Tools	January 2023
Behavioral Health CPT Coding Transition	July 2023
County Behavioral Health Plans Transition to Fee-for-Service and Intergovernmental Transfers	July 2023
Administrative Behavioral Health Integration	January 2027

Payment Reform

- Payment reform will transition counties from cost-based reimbursement funded via Certified Public Expenditures (CPEs) to fee-for-service reimbursement funded via Intergovernmental Transfers (IGTs), eliminating the need for reconciliation to actual costs.
- Specialty mental health and SUD services will transition from existing Healthcare Common Procedure Coding System (HCPCS) Level II coding to Level I coding, known as Current Procedural Terminology (CPT) coding, when possible.
- DHCS sets the rates for services rendered by each county. Each county has a different set of rates.
- Rates depend on provider type and service type

Behavioral Health System: Psycho-social Rehabilitation Model that Addresses Social Determinants of Health

- Health Care Access and Quality
- Education Access and Quality
- Neighborhood and Built Environment
- Social and Community Context
- Economic Stability

*Social Determinants Contribute to 70% of Health Outcomes: Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

Questions and Comments

XIV. Adjourned: 6:31 pm