



Mental Health Commission

Contra Costa County Mental Health Commission has a dual mission: 1) To influence the County's Mental Health System to ensure the delivery of quality services which are effective, Efficient, culturally relevant and responsive to the needs and desires of the clients it serves with dignity and respect; and 2) to be the advocate with the Board of Supervisors, the Mental Health Division, and the community on behalf of all Contra Costa County residents who are in need of mental health services.

QUALITY OF CARE COMMITTEE

Mission: To assist Contra Costa County mental health consumers, family members and the general public in advocating for the highest quality mental health services and supports delivered with dignity and respect.

Thursday, September 17th 2015 ♦ 3:00-4:30
1340 Arnold Drive, Ste. 112 (Downstairs Conference Room), Martinez

The Commission will provide reasonable accommodations for persons with disabilities planning to participate in Commission meetings who contact the Executive Assistant at least 48 hours prior to the meeting at 925-957-5140.

AGENDA

1. **3:00 Call to Order / Introductions**
2. **Public Comments**
3. **Commissioner Comments**
4. **Announcements**
5. **Approval of the Minutes from July 23rd, 2015.** *Action Item*
6. **Update on repairs and renovations at Crestwood Healing Center – Travis Curran** *Possible Action Item*
7. **Update on Services at George and Cynthia Miller Wellness Center – Vic Montoya** *Possible Action Item*
Including discussion of:
 - 1) How patient complaints are handled
 - 2) Description of staff training in sensitive issues (LGBTQ, etc.)
 - 3) Consideration of handing out a survey to patients who receive treatment at Miller Wellness Center and PES.
8. **Brainstorm elements of a game plan for advocacy for a Children & Adolescent Inpatient Unit and a Children & Adolescent Crisis Residential Center** *Possible Action Item*
 - Identify models for successful advocacy
 - A. George and Cynthia Miller Wellness Center
 - 1) What was required to successfully advocate for the facility.
 - 2) Who were the key players behind advocating for this project?
 - B. Hope House Crisis Residential Facility
 - 1) What was required to successfully advocate for the facility.
 - 2) Who were the key players behind advocating for this project?



- Determine information needed for developing a plan (Reference in-depth questions as examples) – Discussion.

In-Depth Questions

- 1) What are the basics on the facility, e.g. size/capacity, services?
 - 2) How much it cost to construct and what it costs to operate as well as sources of funding?
 - 3) What kind of information was pulled together to make the project case, e.g. the facts stating need, the requirements of the projects e.g. capacity and services, projected capital costs?
 - 4) What/who were the key sources of information?
 - 5) What steps were taken to advocate for the project?
 - 6) What actions were most successful?
 - 7) What actions weren't worth the effort or failed?
 - 8) How long was the process?
 - 9) What were the other big picture lessons learned?
 - 10) Was there a report / presentation prepared? Can we get copies?
 - 11) What were the approvals required in order to make the facility a reality to the extent that the MHC was involved? E.g. approval of the MHC and the Board of Supervisors, who else? At what point in the process is the MHC's job done?
- Set up initial ad hoc meeting dates

9. Discuss having members of the Quality of Care Committee attend the CPAW Children's Committee.

10. Items for October 15th Quality of Care Committee Agenda

- Invite representative from Hope House for an update
- Presentation on the findings from the latest MHSIP (Mental Health Statistics Improvement Program) surveys – Ann Isbell and Rose Philipps and

11. Items to forward to the October 8th MHC Meeting

12. 4:30 Adjourn Meeting