



The 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.

Executive Committee Meeting
Tuesday May 23, 2017 ♦ 3:15pm to 5pm
1340 Arnold Drive, Martinez- 112 conference room, first floor

AGENDA

- I. Call to Order / Introductions**
- II. Public Comments**
- III. Commissioner Comments**
- IV. Chair comments**
- V. APPROVE minutes from April 25, 2017 meeting**
- VI. RECEIVE report regarding the integration of advisory bodies- Commissioners Gina Swirsding and Sam Yoshioka**
- VII. DISCUSS needs and expectations for the Health Housing and Homeless program presentation for the full commission June 7 meeting.**
- VIII. DISCUSS the 2017 Commission retreat: training, July date and other topics**
- IX. REVIEW comments from the May 3, 2017, Mental Health Commission/MHSA Program and Expenditure Plan Public Hearing draft meeting minutes, to discuss adding additional comments/recommendations to the Plan for the Board of Supervisors presentation.**
- X. DISCUSS responsibility and protocol for appointing new Commissioners**
- XI. DISCUSS plan to appoint a nominating committee to appoint the Chair and Vice Chair for 2018**
- XII. DISCUSS options for full Commission meeting in East County and West County for 2017**
- XIII. Adjourn**



**MENTAL HEALTH EXECUTIVE COMMITTEE
MONTHLY MEETING MINUTES
April 25, 2017 – First Draft**

Agenda Item / Discussion	Action / Follow-Up
<p>I. Call to Order / Introductions Commission Chair Duane Chapman called the meeting to order at 3:27pm. Happy birthday to Barbara, Vice Chair, of the commission.</p> <p><u>Members Present:</u> Chair- Duane Chapman, District I Vice Chair- Barbara Serwin, District II Diana MaKieve, District II</p> <p style="padding-left: 40px;"><u>Commissioners Absent:</u> Sam Yoshioka, District IV Gina Swirsding, District I</p> <p><u>Other Attendees:</u> Patti Dillard, Full Service Partner for East County Jill Ray, Field Rep. District II Supv. Andersen’s office Lauren Rettagliata, District II (arrived @3:27pm) Adam Down, Behavioral Health Administration (arrived @3:20pm) Liza A. Molina-Huntley, Executive Assistant for MHC</p>	<p>EA-Transfer recording to computer</p>
<p>II. Public Comments: None</p>	
<p>III. Commissioners Comments:</p> <ul style="list-style-type: none"> • Lauren- I pulled off the three year plan and it has draft, “do not distribute,” is that the latest copy? • EA/Liza- Warren is finishing up the updated copy for the full commission meeting and it will be posted tomorrow with the agenda. • Lauren- ok, I was trying to prepare my comments • EA/Liza- Yes, I believe the comments received during the 30 day period have been collected and reviewed but you probably can forward your comments to Warren if you have them? • Lauren- Yes, I know, I wanted to forward them to him beforehand, so is there going to be a huge discrepancy or is this pretty much going to be • EA/Liza- To the best of my knowledge, that is close to what it is going to be. Warren is preparing a summary and then the comments from the public, at the hearing on May 3, will be added to the Plan, along with Commissioner’s comments. • Lauren- That’s what I needed to know because I just have today and tomorrow and then I’m gone until right before our meeting. 	

<p>IV. Chair comments:</p> <ul style="list-style-type: none"> • Duane- I have a few items, as I was saying, I was at a training this weekend. The training was very good and done by the California Local Behavioral Health and Commission. They oversee all the Commissioners throughout the counties. The training was excellent. The main thing that they were training us on was our roles and our responsibilities and our do's and don'ts. After the four day training I came back and thought we need to have Susan come back to us, for training, or we need to start going to the trainings. I think it's very informational, it gives us what we need and stops us from fighting because we will realize what our commitments are. It was just wonderful. This evening I am going to pick up the proclamation for May Mental Health Awareness Month, from the City of Richmond. 	
<p>V. APPROVE minutes from March 21, 2017 meeting Diana moved to motion to accept the minutes, Barbara seconded the motion VOTE: 3-0-0 AYES: Duane, Barbara, Diana NAYS: none ABSTAIN: none Absent: Gina and Sam</p> <p>Duane- We follow the Brown Act, is that correct? EA/Liza- and the Better Government Local Ordinances Duane- according to the training that I got this weekend, all votes must be registered, by member. Mark absentees, include their names. Jill- yes, they just changed that last year EA/Liza- I note the names of the Commissioner's, how they vote and who is absent.</p>	
<p>VI. DISCUSS goals and protocol for residential and treatment facilities and potential for Mental Health Commissioner's participation-</p> <ul style="list-style-type: none"> • Barbara- Adam, do we have a presenter for this? • Adam- no, I think that we were trying to get someone here • EA/Liza- time constraints regarding the late submission for the request • Lauren- I had a discussion with Teresa Pasquini, a past commissioner, who has been on many and did a lot of the facility visits and she says that she actually has the documentation and forms that were used. The commission at that time did go to the Institute of Mental Diseases and they did go to the Super Augmented Board and Cares and wasn't all that long ago, maybe six years ago. She does have the documentation so we don't have to recreate the wheel. They went to Napa State, Crestwood and other facilities. I thought that the fact that they went to Napa State was very interesting and eye opening. • Duane- No we don't because the local board also has updated the suggestions for all of our commissions to use Statewide. As Susan pointed out at the training, this is a responsibility of our local boards to do site facility checking 	<p>*Postponed to May meeting *Chair will send out the updated copies to the Commissioners and to the EA *Adam- set up meeting for Chair/Vice Chair -with Jan, Adult's MH Program Chief, * Adam will follow up with the Commission regarding Coroner's report for woman (Courtyard resident) found dead in SF bay</p>

and report back problems, if you see them or whatever is going on needs to be reported back to people and that's what the forms are for, for documentation. We can use them for the Data Notebook for next year, because next year is older adults. People are going to be asking from the Cal Planning Commission. I do have the forms and I will forward those to you.

- **Adam-** My proposal on this it would be easier if we can put together a group, one or two of you- the Chair and Vice Chair, to have a meeting with Jan, the Program Chief for Adults Mental Health Programs, to talk about this. She is in charge of that and I would like to arrange a meeting, this is my suggestion to move forward on this. We can bring the materials that Teresa was talking about; I just want to coordinate it with the right people that can make it happen. It would be easier to do, not in this environment.
- **Barbara-** Why is that Adam? Personally, I would have liked to have the information. I was hoping that we'd have Jan or Joseph Ortega.
- **Adam-** Part of it is that they can generally answer, ok, we agree with you that there will be
- **Barbara-** We can start with the informational piece of it, and then we can all get on the same page? Then we can, as a group, move forward as to what we feel we should be doing.
- **Adam-** So you would like to have a presentation for the Commission on this? We have been talking about that for months now, it's never really happened.
- **Duane-** I think would be good but we have to understand that that is part of our responsibility, ok? I want to make that real clear that it is part of the Commissioners responsibility to report back.
- **Adam-** I understand, I am just trying to find the most practical way to get it done. It is a just a logistical process to schedule.
- **EA/Liza-** Don't the Commissioners need to decide how many visits they want to do and where?
- **Duane-** I did point out, I love going site seeing and I go unannounced. You see better unannounced at some of the places. Some places it's nice to let people know that you're coming. If you go to a major clinic, just go sit in the lobby, you can see everything that is going on. We need to coordinate it, we need to do something but it also needs to be understood that there are times that we are going to go unannounced, two or three together.
- **Jill-** Are you going to be introducing yourselves as Mental Health Commissioners when you arrive on site?
- **Duane-** Yes, we can but we don't have to, I like being up front
- **Jill-** If you're going as an official, you don't have to announce that you're going ahead of time if it's an open facility, but if you're going as Mental Health Commissioners, I would think you would need to introduce yourselves as Commissioners.

Otherwise you're playing an "I got you!" If there is something going on they're not going to be able to hide it from you that quickly, right?

- **Patti** – Are there site criteria that you're looking for in particular, is there something specific you want to observe?
- **Barbara**- I think that is where we're at, we are really in the initial stages of trying to identify what our goals and objectives are and our process. Adam, I can see a couple of people meeting with Jan so that she is able to get our questions and we can let her know what we are trying to do. Allow her sometime to research and schedule. I feel that the next step would be to present it, back to the EC because it would be good to go the Commission with a report and presentation but also with some options.
- **EA/Liza**- That is a great idea Barbara
- **Adam**- That is what I'm trying to arrange. It's just some business process that we can get to make this happen. Taking it back to EC after, that's fine
- **Duane**- Lauren and I went with Cynthia to the Concord clinic and there were people playing cards and they didn't bother to change the card game while we, I was sitting there and watch what goes on. I couldn't believe that they wouldn't stop
- **Lauren**- I am going to send you something that I had sent to me. This is just one reason that we do these and I know that Warren's team does a very good job but it's on a three year cycle. I sent it to Jan, because I sent it to Jan because there were very serious allegations and Candace and Matthew and Steve Blum. That was a parent was concerned and wanted to stay anonymous, sent me the CCL (Community Care Licensing) on the Courtyard where they have some very serious violations. Scalding water coming out of the showers at 116 degrees, cigarette smoking going on in all the rooms, not only cigarettes- when I went there once, unannounced, it was marijuana smoking everywhere. I don't know which one is more harmful? There were huge medication violations and these are listed on the CCL's and they were not on the CCL's that we received when they went through the Courtyard. Someone had just been back within the last month and a half and they are now being fined. It was the nature of the things that were happening there and we've never really got an answer to the lady that was found floating in the Bay. Did they report her missing, or did they not report her missing? I have grave concerns about some of these facilities and yet I see some people being, it's not terrible, but it's far from good.
- **Duane**- I know and I have the same concern when it comes to the fire that was in El Cerrito, nobody has yet, reported back to us. Jill has graciously started to get somebody to give us what happen but nobody has reported back yet. One of our responsibilities is to make sure that our clients are safe and in that, look around, see if smoke alarms are around.

- **Jill-** I got follow up information on that and I shared it with you. He was not a Behavioral Health client, that gentleman wasn't. They do have Behavioral Health clients that live there (at apartment building in El Cerrito), he in particular was not. The fire report is not finalized yet. That was the last piece of information that we didn't have. There was immediate outreach to our clients, actually the whole building; they had immediate outreach of mental health workers on site to help them process the information and what had happened there.
- **Lauren-** I have you heard anything on the Courtyard and the Coroner's report. Because we were told many times that we were waiting for the Coroner's report and that's been about nine months, so there should be, just about a year and nine months since we've asked about the Coroner's report.
- **Jill-** I don't think that I was involved in the asking in any of that. It didn't come to me. It can take quite a bit of time. Especially if there is a criminal investigation, it will take even longer.
- **Adam-** I will follow back up on that
- **EA/Liza-** I have experienced Coroner's reports taking longer than two years, it just depends on each circumstance.
- **Lauren-** the question that I just want asked is did they report that she was missing? I mean, have we looked into that? Did anyone from the Courtyard report that the lady was missing?
- **Duane-** that is Richmond and I checked it and there is no report on that
- **Jill-** ok, nobody asked me to follow up on that
- **Lauren-** I mean that's serious!
- **Duane-** This is why we have to do site visits. It's something we should have been doing and need to keep doing and we need to start doing them as quick as possible. I think that if people know that you're coming, and people know that you're gonna go and do the visits, then they're gonna get there acts together. Here's a lady that just started full service partnership and she's asking the questions.
- **Patti-** Are you talking about Family Courtyard? I have worked at East County; I was with Concord Health Center as well. I have been to Family Courtyard with a client that was there.
- **Duane-** So, anymore conversation needed?
- **Adam-** Let's formalize the next steps on this, so we don't keep spinning around. I will try to arrange a meeting with Jan and?
- **Barbara-** Lauren would you be able to go?
- **Lauren-** It depends on when it is? It just depends on what the date and time is?
- **Barbara-** I can participate
- **Duane-** and I want to participate, so let's get it set up
- **Lauren-** if you have both of them, I can always file my questions through them, if I'm available, I'll come.
- **Adam-** If that's the case, if you're comfortable with that Lauren then maybe we can work on that issue with the Chair

meeting with Cynthia and Jan?

- **Duane-** Good place
- **Adam-** Then we can get the next steps forward and report back to either to EC next month and make a point to actually get a real educational style presentation on H3 and housing options in the next month or two. We keep wanting to do that and everything gets in the way
- **Barbara-** I feel like until we have something circumscribed
- **Adam-** I think we can start the logistic process
- **Jill-** I think the idea was an –Adult Housing 101
- **Adam-** Adult Housing 101 for a future commission meeting but in the meantime that doesn't mean that we can't arrange some of this other stuff to make it all one big package.
- **Barbara-** I feel like it's such a wild and wooly beast to go to a commission without some clearly defined goals and options
- **Adam-** It's confusing too because there's so many levels and layers and in's and out's and regulations
- **Diana-** Right and the goal is to have all of the Commissioners participate in the visits so yes, you have to get the answers of what we want first.
- **Adam-** so, if that's ok, I will try to schedule the meeting, we'll try to schedule Jan for a section of that at the Chairs meeting. Hopefully we can come to some agreements to some agreements, strategies as on how to move forward and we can take that back to the rest of the commissioners.
- **Duane-** well let's put this down to bring up at the Chair's meeting
- **Adam-** we're all noted
- **Diana-** Just one, Barbara, point of view: the goals, are you looking at for what we are going to see, do or accomplish at the site visits, generally?
- **Barbara-** I think the bigger picture, first, is why we're doing this and what are we're trying to get out of it? Then, get more into the process of it.
- **Lauren-** I just think that it's really important that if you are a Mental Health Commissioner, I think I might be one of the only ones that's around that has been in Napa State, that has been in an institute of mental diseases, that has been at these facilities, knows what they look like and knows what happens there. And, I find it very very hard, especially; I mean our new people aren't participating at all. But maybe this would draw them into participation? I don't know and for people like you, who haven't been to the shelters, who haven't been to the shelters and seen the options. Liza hasn't been, it would be, it's a real education because then you understand- oh ok, locked facility, super board and care, different, what happens at each of the different facilities and how they differ and how the clients differ.
- **Duane-** I'm gonna step back one- it's our fault for not being trained correctly. It's our fault for not looking and reading what our responsibilities are and not asking the questions. I think about the training we had, even though I was ready to

<p>fall asleep there. I am glad that the local board, that we are now regions, so we are part of the Bay Area Region. The Bay Area Region has some very good advocates. It is something that we have to make sure that everybody attends. If you want to stay on this commission, you need to have and know what your responsibilities are.</p> <ul style="list-style-type: none"> • Adam- We can bring Susan back too. • Duane- We can? Okey dokey. • Diana- Was Susan the one at our... ok, she was good. • Lauren- I guess I got really lucky because I was one of the only Commissioners coming on- but when I came on, there was a Mental Health Director that was only here for a short time, his name was Steven McClerk. He came in and met with me for one hour, which is unbelievable to get any time, when you're a brand new commissioner. He set me up with the Adult Chief, who at that time was Victor Montoya and he said- I want you to go meet with Victor and Cynthia- because it's actually all a blur to what is happening out there. Victor sat down with me and he started to tell me what I needed to go see and told me when he was going to be where and at what time and told me to meet him there. So then I got the picture, of what the clinics look like, he pointed where forensics was and I didn't even know what that was at the time. It all takes shape and so few Commissioners have that. • Duane- That was part of the things that we were going to talk about with Barbara that we need to start doing with these new Commissioners that are coming on board. This will lead us to our next assignment. Now we have a plan, so we are moving on. 	
<p>VII. DISCUSS according to article IV, section 4, of the Bylaws of the Mental Health Commission regarding the recruitment of applicants-</p> <ul style="list-style-type: none"> • Diana- What was the goal on that? • Barbara- Well, in my perspective we do have three applicants that aren't attending. So the question is what to do with that? How many positions are opened, besides those? • Adam- I'm not sure of the top of my head, four or five? • EA/Liza- There are four current vacancies in districts one, three, four and five, one seat in each. • Diana- on top of the three that are not attending? • Barbara- So that's why we are working below capacity because of this and it's the responsibility in part of the Supervisor's to be recruiting and obviously we can do outreach too but this is a big task and our workload will only get lighter and the quality of our work will only get better if we have all hands on deck. So the question is: how can we approach recruiting more successfully? • Diana- There's no question that the "Family Members" have been the most passionate advocates for the commission. What about NAMI? Lauren, aren't you in a great position to be a recruiter? • Lauren- I am in a great position to be a recruiter but you 	<p>*BOS will approve and appoint members</p> <p>*EA/Liza will complete brochure to present at full commission meeting</p> <p>*Duane will contact Jason and Michael regarding their absences.</p>

know I have kind of gotten my hand slapped because I have been, like I did with you and called you and recruited you and found out about Barbara too. I have gone out, there was a past Commissioner, in East County, we can do NAMI but the problem is they are Central County. Almost every single person resides in Central County and our section of the County is covered and that's where the majority of the people live. West county, there is another NAMI, I don't know them that well, we maybe can contact? There's going to be an event on May 25th and that's a "Faith Net" event that is being outreached through Gigi Crowder, who is stepping in and covering for Will Taylor. That event is expected to draw about 120 people, it will draw heavily from the East and West County, and Black Ministers always turn out for that. I went out to Pittsburg where I was just amazed at the involvement of the Black Ministers have

- **Duane-** I have. I can tell you that the Black Ministers in Richmond, we held a training, we did one at Hill Top Church, which is predominately a White church and not one of the African American Ministers showed up, no- two showed up and they showed up late.
- **Lauren-** The ones out in Pittsburg showed up and filled up the church. The event is going to be in Pleasant Hill Community Center. Where are our open positions? Are they mostly Supervisor Federal Glover's?
- **Duane-** Federal Glover's, district five
- **Jill-** and District three- Supervisor Burgis and district four, Supervisor Mitchoff and Supervisor Gioia, district one.
- **Lauren-** He has not appointed anyone since Teresa stepped down.
- **Jill-** and I can tell you that this is not the only advisory body that has had very long vacancies in district one.
- **Duane-** I've been going out and trying to recruit at meetings and different places and it's up to us. When we joined this they said to us, ten hours a month and if anybody here can say they have put in less than ten hours I'll say how did you do it?
- **Lauren-** What about the woman that we sent to, that has approached you and I more than once and seems to be quite articulate.
- **Duane-** We can't get her to get an application in, Betty Davis
- **Lauren-** There's another one
- **EA/Liza-** Please tell anyone to contact me and I will be glad to send them an application.
- **Lauren-** ok if I run into her again I will because she has been at the Community Planning sessions and that where I did bend some ears.
- **Duane-** You have to realize when you know a community, for instance as well as I know Richmond, there are some folks that you don't want. Let's be realistic about it. Some people have their own reasons for coming on and we want the right people that are going to contribute and work together. We

all need to continue and go out and try to get more folks on board.

- **Adam-** You'll be speaking at the Richmond City Council tonight?
- **Duane-** I already have it on my agenda and in my head
- **Jill-** Supervisor Gioia did send out an e blast in the last month saying that there is a variety of boards and advisory bodies that are looking, including the Commission. It's not that he isn't trying to do outreach.
- **Barbara-** Jill, can you give us an idea of what are typical things that you've seen that Supervisor's office have tried for recruitment?
- **Jill-** I can't speak to any other Supervisor's office, I can only speak to our own- every month in our e news blast we have a list of advisory bodies openings and it's separated out, we do district two and then other district advisory bodies openings. We have in the days gone past, I use to do press releases to all the media, but they don't get published anymore. I haven't had one published in probably two years and I would send them out.
- **EA/Liza-** Maybe that's why district two seats are full?
- **Jill-** We did have a rush of vacancies at the end of last year but other than that we have been pretty good at being full in all of our advisory bodies
- **Duane-** I understand district two provides candy and coffee
- **EA/Liza-** I provided you with water and brownies
- **Jill-** I can only speak about all the outreach we do, we have been very successful. We are also district two, it's different. If a person is out in the far East county, it's quite a trek if you're gonna volunteer time into something like this.
- **Duane-** That's why we have to start moving around.
- **Adam-** I was just gonna say, I'm getting notices through my union and the labor from the City of Concord they are rallying this idea of creating candidates and doing things like that so that sitting on commissions and boards like this is a way to do that, perhaps? I'm just throwing out an idea.
- **Jill-** Some are more political than others. There are some very political advisory bodies in our county that the unions really do like to be a part of.
Its outreach, it's talking about it. You've seen me come to meetings and handout flyers from different boards.
- **Adam-** Some are more political
- **Barbara-** When I first started, I think I was sitting in for another district, temporarily, I forgot what the term was called?
- **Jill-** Out of district appointment, it's not very popular really. You really need representation from each district because you want the voice from that district. It is possible, we have done it.
- **Lauren-** I have been out to the new health facility in East County that is the Behavioral Health Children's and then there's the adults on the other side and primary health on

the other. But, many of these people that go to primary health- this is a great audience. Could we have some brochures? A brochure at the clinics? The Children's Behavioral Health, Adults and primary care?

- **Duane- (to EA/Liza)** our brochures that we are working on?
- **EA/Liza-** I actually have viewed Mental Health Commission brochures, from other counties throughout the State and I am in the process of creating a MHC brochure. It's almost done.
- **Lauren-** yes, can we have them soon? I was also wondering if we can have an application on it or a cheat sheet, this is how you apply- call Liza, you know at this number to get it started.
- **Jill-** You can call Liza but we do have a whole process that we go through the Clerk of the Board for all applicants.
- **EA/Liza-** the instructions are on the application
- **Duane-** ok, let's do this
- **Barbara-** Hold on, excuse me but I just have one more question- I'm wondering if it would be worthwhile to contact the Supervisors: Mitchoff, Glover, etcetera to let them know what situation we're in and really request their support.
- **Duane-** I will do that and contact Gioia
- **Jill-** it is their responsibility to do the outreach to fill their seats. If there were "at-large" seats at say go at it, but when they are district Supervisor seats, you really need to communicate that to the Supervisor. It's not really popular for me to reach out to other Supervisors.
- **Lauren-** I think Supervisor Burgis would be very interested.
- **Duane-** So let's table this and right now, let it be known that I will go and contact each of the Supervisors and let them know we need their help. I will also contact their Chiefs of Staff and their liaisons and let them know that we need people. I would like to have the brochure, when can you get it done?
- **EA/Liza-** I do have one application, another called me today and said she will be out of the county all summer and will return in August, and the other one is for district one and she said she submitted her application. I will get the brochure done for the next full commission meeting.
- **Duane-** ok, so we got that done and we need to put that as-
- **Adam-** Do we need to address at the board meeting next time- the formation of an ad hoc applicant interview committee if we do have people in the hopper already? I know we've done one in the past but I don't know if those go on forever?
- **Lauren-** it's gone. I think it's an annual or as needed.
- **Diana-** it seems like there is only five of us on the commission right now.
- **Jill-** I just thought about that based on something you said earlier. It's a great opportunity as May Mental Health Awareness Month to announce at your cities and everywhere else that we're always looking for Commissioners. Even though we already have district two, but there's no harm,

because actually that area is also district three because we split Tassajara Valley.

- **Lauren-** if they live on the other side of Diablo Road out there in Black Hawk they're in district three.
- **Jill-** So it's a great opportunity at the Board of Supervisors, we have some vacancies.
- **Adam-** so can we wait another month to form that, what I'm trying to suggest is that either you be ready to interview or we're not ready yet to do that?
- **Duane-** we are ready to start interviewing, because over the next two weeks and with May Mental Health Awareness Month coming up, there are certain places that we're gonna go and get proclamations. We need to check with Glover's office, to see who in East County, if they got any cities there that want to do a proclamation?
- **Adam-** So my recommendation is before we do a public hearing, we take brief item to appoint an ad hoc committee interview committee at our next full commission meeting. So we are prepared when and if we get applicants we can start the interview process and we don't delay it another month while we wait to form an ad hoc interviewing committee.
- **Diana-** Are we going ahead and using the four absent rules and dropping them. Are we going to drop those that haven't been showing up?
- **Lauren-** it's three absences
- **Duane-** Jason and Michael. I am going to call them both again and
- **Adam-** Meghan has been trying; I think she's made most of the full commission meetings.
- **Lauren-** but you have to be part of a committee too, to be on the commission and attend.
- **EA/Liza-** I did explain that to her and she is interested in participating in the Quality of Care Committee starting in June. She is finishing up her final exams in May.
- **Duane-** ok so the plan is to
- **Adam-** we can hopefully do this fairly quickly. Right before we'll do a quick meeting of the Mental Health Commission before we open the public hearing and appoint that ad hoc committee, that way we're set up to do it, when and if.
- **Diana-** the people that show up at the public hearing might also
- **Adam-** they may also have some interest in this also
- **EA/Liza-** My goal is to have that brochure at the next full commission meeting.
- **Duane-** yes, on the table and some caps too
- **EA/Liza-** no caps Duane, nice try. Did I not get you your badges? Are you all going to be present at the Board of Supervisor's presentation of the proclamation on May 2nd? I would like to take a picture of all of you with the Board of Supervisors.
- **Duane-** I'll be there
- **Lauren-** I won't be there because I am on the Benioff

<p>Children’s Hospital Committee. I don’t know if many of you know that the Oakland Children’s hospital became part of the UCSF Benioff consortium and their big huge fundraiser is part of putting that on May 2nd.</p>	
<p>VIII. COMMITTEE DISCUSSION- regarding the Contra Costa County 2016 Data Notebook and consider next steps of action to be addressed</p> <ul style="list-style-type: none"> • Duane- We need to get this notebook in as quickly as possible • Adam- that’s another ad hoc committee you need to create, it is. • Duane- I hope not. • Lauren- we didn’t do it last year, in 2015? The one I did had to do with alcohol and other drugs. • Adam- that was 2015 • Lauren- that is the one that where we got together and then we made the assignments and asked the Commissioners, did the assignment and sent it back to the Executive Assistant, who was Karen Schuler at the time. We sent the agreed upon questions and sent it to the people accordingly within the administration and reviewed them as a committee and put them in the notebook. I put them in the notebook for Karen and then she sent it on. • Duane- so what I think we’ll do, if Barbara doesn’t kill me- I would like Barbara, Diana- do you have time? And I • Diana- This looks like a hugely labor intensive project • Adam- I have to be honest, I don’t think it is. I actually love this exercise the whole thing gets me going a little bit. They laid out some information and it’s a good set of exercise to understand the subject and look at what the States looking at, what the data is, I think it’s an insightful exercise for Commissioners and a worthwhile use of time. I just think it’s like a college assignment of some sort. I’ve already gone through it and picked out the people you need to talk to and given that to Liza • Jill- it’s very informative and you can go as deep as you want or as surface as you want, there’s no requirement. • Duane- the Cal Planning present this to the Legislators and really go forth to get funding. That’s how we get our funding. This year they think that it’s very important, that we do it. Unfortunately, we’re a little late but I twisted some arms and legs and we gotta get this in as soon as we can. • Diana- the focus on this one, as I understood it, is kids? • Barbara- the first step, is identifying people to request information from • Lauren- they’ll know and then what I did was on all the questions that required Commissioner output- I used email and sent it to every single Commissioner and got responses back, from more than half, but you know- Diana, Gina, Sam, gave me responses back. Your gonna have to do some editing because you don’t want repeat things and then there were two or three other people and I put mine in and we 	<p>*Ad hoc committee formed: Duane, Barbara and Diana will meet on 5/12/17 , at 11:30 am, to discuss and assign duties for the 2016 Data Notebook</p>

<p>edited everything then sent it back out to the people, because we had edited their response, got their approval. Everybody was so easy about it. Putting it together, the whole thing didn't probably take me more than 10 hours total. People responded, its three quarters of the way filled out. And Matthew Luu got right back to me too. Fatima Del Sol got right back to me.</p> <ul style="list-style-type: none"> • Diana- so what we got in the handout, it looks filled out. So this is what we have to work with, right? Other than the parts we have to add. So do you guys know who to call? • Duane- yes- that's what Adam just said he did. The report that they gave us at Family and Human Services yesterday. • Jill- I forwarded you the packet so you can pull that out. • Duane- that will do us a lot of good. • Adam- yes, I forwarded to Liza who talk to. I think it's a good exercise, gives you a chance to dialogue a little bit with the questions and data. I really think it's a good • Lauren- you learn a lot • Duane- I also think it's good to get the school districts involved. • Barbara- do we have a target deadline? • Duane- let's wait until the three of us get together. Liza will help us to set a date to meet. • EA/Liza- were you looking at the first week in May or the second week? The 8th or 9th? Morning or afternoon? I will have to check the availability on the conference rooms, we are having a bit of an issue but I will do our best. • Diana- the second week is better for me, the 8th or 10th works for me • Barbara- the 10th is better for me, morning is best for me? • Duane- ok, May 10 works for me- 10 am, send out an email to us to confirm 	
<p>IX. DISCUSS the May 3- MHC hosting the MHSA public hearing draft agenda and May Mental Health Awareness Month</p> <ul style="list-style-type: none"> • Duane- We are all aware that we're doing the hearing and our wonderful Liza put out a beautiful flyer and agenda and we all know that May is Mental Health Awareness month • Barbara- do we have any other items for the meeting because last year we were able to do a little bit of business • EA/Liza- we need to add the motion for the ad hoc committee and what about reading the proclamation for May Mental Health Awareness Month? Or announce it? • Duane- ok • Jill- I think it should be read. You're going to have an audience. • Duane- that's what we have Liza for • Jill- or Candace can read it; just have a copy of it available for her. • Barbara- I wish it was in straight forward English is the issue that I have with it • Adam- that's what makes it fancy and special 	<p>*EA- create proclamation and send to Chair of BOS for agendizing presentation and finish completing MHC brochure</p>

<ul style="list-style-type: none"> • Jill- it's a proclamation • Lauren- one year we had Roberto Roman come in and sing from the Office of Consumer Empowerment, an inspirational song- if you didn't want to read the proclamation. It gets the Office of Consumer Empowerment involved in the Mental Health Commission. • Duane- it might be too late now, but I'm sure that we'll see what we can do. Can you ask him? (to EA/Liza) • Barbara- Yes, can we invite him to sing? That would be really nice. • EA/Liza- Of course, I will send a request out today • Jill- So we will bring the proclamation to the meeting because it will have been done the day before at the Board of Supervisors presentation. • Adam- I think it would be kind of a fun little thing to do. We can do the ad hoc interview committee, read the proclamation and Roberto can sing a song and we can get into the public hearing. We can ask. He usually makes it to the meetings. • Lauren- and if he needs transportation, maybe Robert Thigpen or somebody can be there? I know it's a tremendous hardship on him. 	
<p>X. DISCUSS proposal for renovations at 1420 Willow Pass- by Adam Down</p> <ul style="list-style-type: none"> • Adam- So, Behavioral Health Administration has promised to consult with the Mental Health Commission regarding facility projects that we are working on. The project at 1420 Willow Pass, we got the cart ahead of the horse and (Lauren) you were able to define it at the Finance committee. There was a capital projects request. I would like to explain the process that we went through, where we were at and where we're at now. So about a year and a half ago, shortly after your visit to the Concord clinic (Lauren) we began exploring the options of what we can do there and what's going on at the Concord clinic. I don't know if you've been there, I don't know if vocational service was still located in there? • Lauren- no, they had exited the building • Adam- ok, so that space is still sitting vacant. As you know that clinic is extremely crowded and very busy, I think it's our busiest. There is a variety of things in there that are not great. We looked at a number of options. We looked at full scale gut redo, we looked at smaller renovation, make it better, more comfortable, more welcoming. We did engage real estate services, capital projects, public works, which is where I think that information ended up coming up to the Finance Committee. There has never been any approval from Pat Godley, never been any approval from any County Administrator or the Board up until, it still hasn't been. Pat Godley has now given us a green light to go ahead with a facelift for 1420 Willow Pass. • Lauren- It was \$977,000; it's almost a million dollars. The 	<p>*EA-Place on agenda for MHC meeting on 5/3/17 to create ad hoc committee</p> <p>*Motion to recognize the Behavioral Health has engaged the Mental Health Commission and agreed to continue consultation under an ad hoc committee formed by the full commission throughout the term of the project."</p> <p>Motion made by Diana and seconded by Barbara</p> <p>VOTE: 3-0-0</p>

questions that I, there's no problem with knowing that something needs to be done but we do not, the County does not own that building. So placing a million dollars into a building that the County does not own. The question I have is the Mental Health Commission was not consulted when they went ahead and put in that the health care unit downstairs. I don't know how much money and I think maybe that's something, we as the Mental Health Commission, should know. How much money has been expended already for the primary health area that was put in? Because there's a lot of questions from people when they go to the clinic not being actually able to interface with the help that's offered downstairs. They can't get blood draws because they're not open or not available, they can't get shots because they're not there or not available. It's just that this is a clinic that I see a lot and \$977,000 dollars is a lot of money! Also, the Finance committee report showed that 20% of it had already been allocated? Now was that true, or not?

- **Adam-** No, there's not been 20% of
- **Lauren-** Because there's been a lot in that report that was not exactly correct.
- **Adam-** yeah that caught everyone a little bit off guard when that document came.
- **Jill-** It comes out of Public Works
- **Adam-** We engage Public Works because that's who you gotta work with and then this report, our initial kind of thoughts on it all surface in the light of day like it was a full go project. That was never, we just weren't there yet.
- **Jill-** They didn't say that, they said it was in the feasibility stage but it had money eared marked, it was erroneously eared mark but it was eared marked by Public Works. Publicly it was just a roll over from some other project.
- **Lauren-** Karen Mitchoff said that it had been approved on a "Consent item" and that it already been approved. So that is one thing and Duane was one thing and Duane was there with me that got us like- "well now wait a second, this seems really strange because we have already received the affirmation from the Behavioral Health Administration after the West County facility, that we would always be in the loop and boy, this is not in keeping us in the loop.
- **Jill-** She probably meant a different piece of that because there was different piece of that entire report that had been approved.
- **Adam-** They may have accepted that report or they may have accepted something else.
- **Jill-** One of those projects had been approved; it's a H3 IT work. So there was one project on that entire list that had been approved. I pulled that information and I shared with you (Lauren), that there were three things that had been approved by the Board agenda, but that was not one of them.
- **Lauren-** I really thank you for that because until you did

clarifications it was all pretty murky. But the other thing that I'm as a Commissioner I need a deeper understanding of it. This is realignment money, there was some MHSA?

- **Adam-** It's all going to be County General funds.
- **Lauren-** Cause it does have Realignment and MHSA down and so it's all going to be County General Funds, right?
- **Adam-** Yep
- **Jill-** But that was also clarified, in a subsequent email that was clarified by Pat Godley.
- **Adam-** It's clarified by Pat Godley and I am here today to tell you that it's here, its County General Funds and not Realignment dollars.
- **Jill-** and I shared that by email with you as well (Lauren) regarding Pat Godley's response.
- **Adam-** I tell ya why you hadn't been looped into the process- we were in real estate negotiations with private companies, doing different things, including- it was sensitive at that point and we were really just trying to understand the scope of the project and where we were working it with staff level work. It hadn't even really been raised up full decision making level yet. Now it's gotten there
- **Jill-** now it becomes part of the public process
- **Adam-** and now it become part of the public process. I am happy to talk to you about it and find a way to report out to you on this, as much as you'd like. I just wanted to present to you, I think that it's very important and a million dollars is a lot of money, in the world of construction it does not go as far as you might imagine in some ways. I think we can do a lot to improve the environment for our consumers there, the environment for our staff members there, we can add treatment rooms that will increase the billable output of that clinic. We can do a few different things that will really make it nicer. Your suggestions, in fact your recognition of that Sheriff's station in the front as just being incredibly stigmatizing and bad is a very driving force behind this. We worked with the staff to find ways to put that in a better spot, it meets their needs and improves consumer experience. That's really what we're gonna try to do, it may be that we come back, it may not be the end all solution for 1420 Willow Pass, in the longer term but this will make a big difference for a lot of people in the AA mid-term.
- **Lauren-** Do we get to know, can we find out -since the county does not own the building, what type of lease is on the building? There had been, since it's a privately owned building, I think it's a very unwise decision unless you have some type of very secure long term lease on the property. I mean if your sink in a million dollars, that maybe it's a seven to ten year lease. The reason I ask this, I do own commercial property and I do know that- I have a brewery at one of my centers and they put in all the repairs and renos, so this is normal but before they sunk in all the money for the brewery, we had to sign on the dotted line that they got a

lease for an option, for 15 years. That is something that I want to make sure that is in place, something like that. Is the County looking at that?

- **Adam-** I am confident we're looking at the lease
- **Jill-** We wouldn't sink money into it unless we have a commitment, we can find out the term of the lease.
- **Adam-** We can find out the terms
- **Lauren-** Because there were some kind of strange things done at Oak Grove. I mean I would trust but after I've gone in and seen the stuff that was done at Oak Grove, I'm beginning to think- wait a second, it seems like some real missed steps are sometimes made. When the design end of it comes up I think the Commission should definitely be part of the design of the building along with our Office of Consumer Empowerment, the people that use the clinic.
- **Duane-** Right, you know one thing that we have to remember is that, that I learned down at the training is the Commission doesn't sign a contract, we don't. But, we do have the right to give input.
- **Jill-** Absolutely and I think that's what Adam is doing in this point in time. He's saying it's time-
- **Duane-** Yes, you know, keeping us informed is a good thing. This is a partnership and here we go
- **Jill-** Right, now that it's part of the public process and all these negotiations are done, then that's the time that the Commission will become involved.
- **Adam-** It is, our consumers are there, it's also a work place – it will be 80 people, so they have a very strong interest in on how that works and feels. I think your right Lauren, all these things out there we have some preliminary ideas about
- **Duane-** like Lauren said it's a building the County doesn't own. I mean I'm sure there are buildings that maybe close around that the county wants to buy?
- **Jill-** that's not uncommon for us to lease space, long term leases, Duane you know that. In fact our main office has been the Supervisor's office for at least a decade and it's a lease that we renew every three years.
- **Adam-** I want to throw this out there too- there's a number of things going on in the Behavioral Health world regarding the AOD expansion, space needs are changing because our programs are changing. The mental health clinics aren't the most popular neighbor in the world, often, it's an issue. A lot of landlords won't even talk to you, really, once you tell them what you're doing. This has been a long; we have been there for a while. I know our general services guys like working with that particular landlord a lot.
- **Lauren-** yes, he must, although I don't know him, he must specialize in this because he's got that for the Central County Clinic. It's situated so there is forensics right behind and then the other building is STAND which is domestic violence. Then you cross the way and you have ANKA. It is in a location that people who actively uses that facility.

- **Adam-** and another point, just to what you were saying Duane, with all this movement around, there's not this giant stock commercial space in Central County that will work for our needs. There's stuff, I'm not saying this is the only building that we could have possibly chosen, that's not true. But we have engaged and needs to meet with all kinds of other competing interest. So this is a solution that we've come up with, a design that we think we can do that would make helpful. I would like to find a way to share it with you. I was really just here to introduce the project with you and engage with you about this right now, so how would you like to do that?
- **Barbara-** I have a question, just in terms of defining a date, by which the Commission could have the opportunity to review is somewhat based on what the next steps are, where you're at?
- **Adam-** I would like to start working on the project, I would like to get making, get capital projects really going on this thing. Start dialing in, inform the staff for one thing- you've heard about before the staff at 1420 Willow Pass
- **Barbara-** Would the June meeting be adequate for the full commission?
- **Adam-** I would like some sort of blessing to begin work on it before that. I would be happy to continue to update you, share some other information; I show you preliminary what we do. I think you're gonna be, hopefully you can see the value in it.
- **Barbara-** It's just that that would be the first possible date for the full commission
- **Jill-** do you have preliminary drawings or any kind of
- **Adam-** I do have some preliminary drawings I can share
- **Jill-** I'm wondering if you should just do it at the May meeting.
- **EA/Liza-** Just like a quick overview, like this is coming kind of thing. Like an announcement?
- **Duane-** hold on, let's not get ourselves overwhelmed. June I think is fine, but June you'll have a full scope of everything that's going on.
- **Adam-** I think we have a pretty good idea of what we'd like to propose and like to get out there and we'd like to get your feedback on that. But I also want to move the project forward. We've been waiting for years for this, so I am willing to work with you-
- **Barbara-** So what would be the next step? Just giving the green light to start?
- **Adam-** Yes, it's the green light. We're gonna reach out to Public Works, I've got an email from Lisa Driscoll today saying, is there an approval, have you worked with the Mental Health Commission yet? You guys rattled some cages there so, like we got everyone's
- **Jill-** so he can't move forward in the next steps until you guys says yes. If you wait 'til June, your putting this off for two

months.

- **Barbara-** I'm curious, we have limited time, we have a couple of items on the agenda, how much time do you think it would require for an adequate presentation so that people really can understand. Do you have something that could be included in the packet?
- **Adam-** I can include our preliminary drawings, if you'd like?
- **Barbara-** in the packet would be great.
- **Adam-** In the packet, I think we can do that?
- **Barbara-** because some people need a little time to absorb that
- **Adam-** Yeah, I am a little concerned about the mechanics, this is sort of detailed questions about looking at walls and those discussions if you get them into too large of a group, everyone's got a little bit of an opinion about everything and it's just really difficult to have that conversation.
- **Barbara-** What could you see working then? Are you suggesting an ad hoc committee?
- **Adam-** I'm suggesting showing, I would like to introduce it to the Commission, so maybe I would be open to that and share it. Then maybe we can refer to a committee, of some sort, one of you can take a deeper dive into what we're proposing over there, just so you guys are aware and that can be reported out in June?
- **Barbara-** ok, yeah, it would take some volunteers to be part of it
- **Adam-** or you can take a little ad hoc committee to discuss it with me. I want to find a way to engage you without impeding the work of what is already complicated.
- **Duane-** I'm trying to think of a way, May 3 we already got a plan for, so let's do a special meeting for this project. And people who are really interested can come and we can set up a committee so we don't have to worry about.
- **Adam-** I think that the ad hoc committee might be a way, if you guys are comfortable with that? If we can do that in May?
- **Diana-** So then, at the commission we would just introduce that this project is, you can still announce it and give a five minute overview, right? And then we would set up the committee from there.
- **EA/Liza-** Yes, exactly
- **Adam-** we would set up an ad hoc committee for ongoing consultation throughout the process
- **EA/Liza-** So, can I include it in the agenda?
- **Barbara-** Yes and then anything you put in terms of an overview in the packet I just think that is really important.
- **Adam-** Yeah, I will. And just so you know, the way that this was designed is that I went and convened a meeting of the staff members there and we had your feedback, some of it from your site visit (Lauren) what we knew you guys were feeling about the place. We've all been there, so but we did was we convene a meeting with their staff. We got

representatives from their functional areas, we had from the clerks, to the nurses to the docs and we tried to work with what works for them now and what we had with the goal always of trying to make it more welcoming for consumers. That was our thought process.

- **Duane-** I think it would be nice if you invited the staff to our meeting. Because we are advocating for the client.
- **Lauren-** Maybe we can meet downstairs so they wouldn't have to travel?
- **Adam-** I actually love that idea and maybe that would be for the ad hoc group? That would be the easiest thing.
- **Duane-** I can just see that vacant room with all that junk sitting in there
- **Lauren-** A question that I have for you and you may probably know this but since it is not a county owned building and there is a landlord who owns this building. Who does the negotiations because when you do a remodel like this, usually the landlord will do specific items because they will stay with the building? For example, such as the flooring, the carpeting and the painting and these are big ticket items. When you're doing a building like this some of- what type of negotiations are going on with the landlord to decide what is his responsibility and what will be our responsibility as a county. Because we are vastly improving his property.
- **Adam-** I don't know if we've entered into that yet
- **Lauren-** ok so that's a question that is very very important
- **Adam-** this isn't an unknown landlord to us. This is someone that we've been working with for a long time. But who does the negotiating? Public Works real estate, general services
- **Lauren-** Public Works real estate do- can we ask them that question and tell them the Commission is asking that question?
- **Adam-** I can try to find some information on the lease and that type of thing, other than that I would be speaking out of terms. I can ask for some information and see what we can do. Again, I want to engage with you in a productive way on this but again this is complicated and going to be a lot of work too
- **Lauren-** do you want me to send you an email on that?
- **Jill-** I don't think we're gonna get into the lease details, quite frankly
- **Lauren-** No- but we should ask that question to the right party who would be negotiating
- **Jill-** the building we lease in Danville, the Supervisor's office paid for all the upgrades when we took it over. We did the carpeting and all the rest, that's what we paid for and it's not uncommon as a county since were gonna go in and completely redo a space. The carpeting was fine before, it just not to my previous boss's standard
- **Lauren-** I don't know if you've been there but this carpeting is awful! You could probably grow stuff on it and the walls are horrific and the elevator is- an elevator costs tens of

thousands of dollars.

- **Adam-** I'll tell you right now, the elevator is not in the scope of work. Elevators are outrageously expensive.
- **Lauren-** that's what I mean, so these are things that sometimes the landlord does have to pick up
- **Adam-** I'll look into that, again- what you've got Lauren in that report, when I am over in Behavioral Health here, little analyst guy, trying do a project, I have to engage the resources of the county and then there's lots of different people. So what you got was me engaging, me, after getting a little bit of approval from Cynthia and then Finance saying ok, go figure this out. So we then put in a request to Public Works, or General Services, so they're responsible for the overall project management and they're responsible for the lease negotiations, the real estate transactions that's their lane. I'm here trying to get a nice place for my staff and consumers, that's my role.
- **Duane-** So, I would say that the date of this meeting that we have, we invite all interested and concerns to cover ourselves. The Supervisor did say for Public Works and everybody to get in touch with us and they didn't.
- **Adam-** Right, I think that we can arrange that, we can find something that will satisfy a community process. I'm not saying that you will get all that you're asking for but I think we can give you a strong community process that we can at least everyone has heard? That's what I can promise you, so.
- **Jill-** you can offer feedback to the development of the center but whether or not you get to deep dive into the lease details is a whole different issue.
- **Lauren-** no we don't want to deep dive into the lease details, we want the county to do the deep dive and get the best deal.
- **Jill-** well that is what they're doing and they have a whole division that does that and they negotiate all of that.
- **Adam-** Sometimes they do public meetings but that's partly my job too that is to be out here and work with you all as our stakeholders
- **Duane-** I'm gonna demand one thing- I want to be the one who takes a hammer to that window downstairs so you can look through
- **Adam-** that costs a lot of money, like \$10,000
- **Duane-** they sat there playing cards and didn't move or paying any attention
- **Lauren-** when I found out I got upset about that and found out that the was a hospital and the hospital required that type of thing be there and that Behavioral Health Administration no more wanted it than anyone else but the was the requirement of the hospital
- **Duane-** How much is the hospital going to be a part of this
- **Adam-** nothing, this is all our area. We've accommodated them in our design, we found a different way to make them- that's another sensitive issue that's gotta be worked out

interdepartmentally because there's some people at the hospital that opinions on how things should be as well. We are moving along, I want to encourage the commission

- **Duane-** So we'll include it in the meeting and make sure we take notes to give to the full commission and try to get everyone on board, ok?
- **Adam-** Can I, I would like to say- are you ok with us moving forward with the workers involved? I want some kind of vote to say- you know, we'll engage with the process and so we can move forward with this.
- **Duane-** Lauren, what did you think?
- **Lauren-** I'm not a voter, so-
- **Diana-** I will make a motion
- **Barbara-** Just if we're gonna vote on it; just recognize that there's a caveat that it's not said later that's too late because we gave a green light.
- **Adam-** I don't think you're gonna get a too late; you'll get some answers about why or why not maybe.
- **Barbara-** I am just formalizing that as part of the vote
- **Adam-** ok
- **Diana-** Motion, that we approve, with the constraints of the ad hoc committee
- **Duane-** for the record- Liza, could you please read the motion off?
- **Adam-** Yes, we should formulate a good motion on this one-
"motion to recognize the Behavioral Health has engaged the Mental Health Commission and agreed to continue consultation under an ad hoc committee formed by the full commission throughout the term of the project."
- **Diana-** I make the motion
- **Barbara-** I second the motion
- **Duane-** all in favor say "I"
VOTE: 3-0-0
YAYS: Duane, Barbara and Diana
NAYS: none
Abstain: none
Absent: Sam and Gina
- **Adam-** Thank you
- **Jill-** Under the new changes your supposed to state your first and last name when you vote
- **Duane-** The workforce summit on children's and youth and if anybody wants to attend it, Cynthia has graciously approved four slots. Gina and I are going, anybody else? It's on May 10th; I knew there was something on that date. We need to change the data notebook meeting.
- **EA/Liza-** the 11th or the 12th?
- **Diana-** I can't make the 11th, the 12th works for me
- **Duane/Barbara-** I'm fine, that works for me
- **Barbara-** at 11:30am?
- **EA/Liza-** ok so the meeting will be on Friday, May 12 at 11:30

<p>and I will book the room.</p> <ul style="list-style-type: none"> • Duane- ok – “Proposition 63”, I want to make sure each commissioner has a copy and a copy of “Promoting Student Mental Health” this is a guide by the University of California uses for their faculty and staff and I think it’s a wonderful guide and we should have copies of it for your reading pleasure. 	
<p>XI. DISCUSS and RECEIVE, report from Chair, regarding CALBHBC conference</p> <ul style="list-style-type: none"> • Duane- we discussed this at the beginning but I will get somethings and forward them to you. I’ll have the CBIS binder that gives us our responsibilities, I’ll have it copied and given it to everybody for our next full commission meeting. There’s a couple of our responsibilities that I’m gonna have her write them out in her own words, what our role is- Susan, have her come and give the training to our full commission • Diana- Maybe we can do it as our meeting • Barbara- In August? • Adam- as an August retreat again. I think last year we spent all day on the Power Point and maybe we can do that again? • Duane- the Roles and Responsibilities is about two hours • Adam- I think that was the design last year, to do that in the first part and then take the second part spends the rest of it doing strategic planning. • Lauren- you know you pass this out, if everyone, when they read it will look at page four, look at the last paragraph, was inserted because of the advocacy work of Rose King, Teresa Pasquini and myself who actually went to the Little Hoover Commission meeting- that starts “never the less...” • Diana- you gave us a lot of paper to take home • Duane- that’s Liza • EA/Liza- we killed a forest at Duane’s request • Diana- I have changed to having everything on my ipad it’s so easy to read and saves it there and I don’t have these huge file cabinets full of paper. • Adam- did we get a motion to adjourn? 	
<p>XII. Adjourned meeting at 4:59 pm</p>	

Respectfully submitted,
Liza Molina-Huntley
Executive Assistant to the Mental Health Commission
Behavioral Health Services Administration



**MENTAL HEALTH COMMISSION
MONTHLY MEETING MINUTES**
 Hosting the Public Hearing,
 on the Fiscal Years 2017 to 2020
 For the Mental Health Services Act
 Three Year Program and Expenditure Plan
 May 3, 2017 – First Draft

Agenda Item / Discussion	Action / Follow-Up
<p>I. Call to Order / Introductions The Chair of the Commission, Duane Chapman, called the meeting to order at 4:38pm.</p> <p><u>Members Present:</u> Chair -Duane Chapman, District I Vice Chair- Barbara Serwin, District II Supv. Candace Andersen, District II Diana MaKieve, District II Gina Swirsding, District I Douglas Dunn, District III (arrived @4:43pm) Meghan Cullen, District V Lauren Rettagliata, District II Mike Ward, District V</p> <p><u>Commissioners Absent:</u> Sam Yoshioka, District IV Connie Steers, District III Jason Tanseco, District IV</p> <p><u>Other Attendees:</u> Warren Hayes, MHA Program Manager of Behavioral Health Adam Down, Behavioral Health Services Admin Jill Ray, Field Rep Supv. Andersen’s Office, District II Roberto Roman, Office for Consumer Empowerment Guita Goudarzi, AOD liaison Charles Madison, President of NAMI Sharon Madison, NAMI Kanwarpal Dhaliwal, RYSE Center Organization Kassie Perkins, ANKI BHI Sheri Richards, CPAW Judy Cohen, NAMI Mark Cohen, NAMI Kristen Clapton, CCBH Teresa Pasquini, Family member Robert Thigpen, CCBH Anne Sutherland, AOD Chair Don Green, NAMI PG- Soto Barbara Scott, NAMI Kay Derrico, NAMI</p>	<p>EA-Transfer recording to computer</p>

<p>Melinda Mehan, CCBH Liza A. Molina-Huntley, Executive Assistant for MHC **The attendees had the privilege to hear Mr. Roberto Roman singing at the beginning of the meeting. All in attendance enjoyed his talented voice.</p>	
<p>II. Proclamation to declare May as Mental Health Awareness Month</p> <ul style="list-style-type: none"> • Supervisor Candace Andersen – summarized the Proclamation stated that it was passed on May 2, at the Board of Supervisor’s meeting. All the Board of Supervisors have signed the proclamation and had great things to say about the Mental Health Commission. Her remarks focused on how important it is that we continue to work to destigmatize mental health. Everyone has been touched by someone who has had challenges due to mental illness. We need to continue to advocate improving the lives of those who suffer with mental illness. Provided and presented the official proclamation, on behalf of the Board of Supervisors. Thank you to everyone for all that you do. 	
<p>III. CREATE an ad hoc committee to screen Mental Health Commission applicants, to forward to the Board of Supervisors for approval and appointment.</p> <ul style="list-style-type: none"> • Duane- referred discussion to Supervisor Andersen due to some concerns. We need to remember that the Board of Supervisors appoints our member that is the first step is. The next step should be, but our Bylaws say something different than the Contra Costa Advisory Body Handbook does. I will let Supervisor Andersen take over from here. • Supervisor Andersen- We are in the process of making a brochure, kudos to Liza who made a really nice brochure about the Mental Health Commission. Supervisor Mitchoff did express yesterday that her concern, which she expressed previously, about her desire to appoint Mental Health Commissioners before anyone else talks to them or screened. She doesn’t like that screening process. What she would like to do is to have Supervisors appoint whoever they want to, as long as the person meets the required statutory requirements of being a consumer, a family member or at large. Then any interaction with the rest of the Commission would take place after that point 	<ul style="list-style-type: none"> • The Board of Supervisors will meet and appoint applicants interested in becoming new Commission members • The Bylaws will be modified to mirror the Contra Costa Advisory Handbook regarding applicants processing

through an orientation with the Chair or the Committee members. In the past, we have been doing that at times, we haven't always had someone from the Commission reviewing them first. It is a really important thing to Supervisor Mitchoff so we will be bringing that to the Mental Health Commission, a revision of the Bylaws and to the Board of Supervisors that would change that process to mirror the Advisory Board Handbook. The Supervisor would appoint someone and then after that they can interaction would take place with the Commissioners.

- **Gina-** When I am out in my district and I see somebody, I can approach a person with the brochure. I am in the district with Supervisor John Gioia. Why I am saying that is because I talk to a lot of people and tell them about our commitment. The first thing that they ask is: are the meetings in West County? Because it is hard for everyone to come out, a lot of people have transportation issues.
- **Supervisor Andersen-** This brochure will be very helpful and we want you recruiting members, if you have a vacant seat. Let's let it go through the Supervisor and let them make that decision and then they will meet the Commission afterwards. Please continue recruiting. What Karen was concerned about was a formal recommendation by the Mental Health Commission; she just wants to make that decision, then following that decision the interaction with the Commission.
- **Barbara-** I'm just curious on what her perspective is and what commadeer that she wants that?
- **Supervisor Andersen-** The perspective is that, she is ultimately making the appointment, she wants to make that decision and would rather have potential Commissioners sit in on a Commission meeting and then come talk to me about it and hear about their thoughts regarding the role of a Commissioner. She wants her own independent decision; she doesn't want people to tell her if that person should be on the board. She expressed a strong preference for her making the decision; an appointment can take place and then have an orientation follow up. Historically, we have done the appointment and an orientation done post appointment, with the Chair or an ad hoc committee that explains the full details regarding what the Commission does

and what their roles are. Talking to the person, we never had anyone rejected because of it. For that reason, in reference to Supervisor Mitchoff and then the other possibility would be to send the whole thing to internal operations and have a drag out discussion.

- **Diana-** I think one of the biggest concerns that I have about that is that the Supervisor feels to have somebody placed on the Commission is to have somebody in front of their face. We, on the Commission, are very aware of the fact that we are down five Commissioners right now and that makes it difficult for us to do our job. So if we can't get out there and try to find people and recruit, it makes it harder on us.
- **Supervisor Andersen-** Yes you can, with this process in no way do we stop you from recruiting. I think that Supervisor's Mitchoff's concern is having a practice where when someone applies they have to go before an ad hoc committee for a recommendation, as well as meeting her. She did not think that having an ad hoc committee helps.
- **Diana-** So does that mean that we don't have a role or voice in whom comes on to the Commission?
- **Supervisor Andersen-** in a nice way, no. It is her decision on who she appoints for her district and she wants to have the first interface that person has that's going to operate in the role as a Commissioner. That in no way limits Commissioners from going out and recruiting and stating what district openings there are and having that conversation and refer them to their District office.
- **Doug-** In my experience, my name was discussed at the Commission and was issued and appointed by my district supervisor.
- **Lauren-** the procedure was, when I was Chair, was that people could apply through their Supervisor's office or contacting through the Executive Assistance or directly through the CAO's office, they could send an application. The applications were received and our Executive Assistant would verify if they lived in the county and what district they lived in. Then we would interview these people. When I went to my interview there was another gentleman that was also interviewing for the same position and I was interviewed by the whole Commission. I was fortunate that I was picked in the interview. California State law does not

state or outline the exact procedure of the appointment.

- **Teresa-** So this is nothing new that I'm hearing here in terms that there's always been some Supervisor's that feel very strongly about this, it's not only Supervisor Mitchoff that has this strong feeling, I believe John Gioia also has that feeling, maybe not as much now as he did at one time. I think that it's unfortunate the Supervisor has the right to self-appoint and direct appoint. I was direct appointed, as Doug just said. I can tell you that I wished that that wouldn't have happened to me that was a very uncomfortable position for me to be in. I actually came into a room; I believe Diane is here, I believe she was the Vice Chair at the time when I appointed. I came into a room full of people that didn't know who I was, and it wasn't friendly, quite frankly, so I think that it's too bad that there can't be some kind of middle ground here? I think absolutely Supervisor Mitchoff is correct, that it is ultimately her decision and that there has always been that power struggle going back and forth. Ultimately you want to make sure that you have public volunteers that feel comfortable coming to a table with people and know what there is, there should be more interchange.
- **Supervisor Andersen-** and that is where I'm hoping with this whole change in Bylaws, that we can have, when someone is appointed that this when we can focus on the orientation, and inform of the duties and responsibilities as a Mental Health Commissioners, this is how they operate, here's an introduction to the subcommittees and their vacancies and coming and sitting in on a meeting before being on the commission.
- **Gina-** like Teresa, I also did feel a little bit out of place. I think one thing that is nice about it, if we tell them what's expected and we let them ask questions and we shared our experience. A lot of it is getting to know each other.
- **Barbara-** Just a couple of things, in terms of that interview process, that ability to interact with the Commissioners was really important, in my experience. I also feel that it shows transparency and that's important. When the application is put out there, it's for a Committee to review.
- **Teresa-** I think it's been almost two years that I was on this Commission and my seat is still

<p>vacant, which is absolutely inexcusable! I am making a public statement to the Commission, as a former Commissioner, that it deeply offends me that such an important position, there has been a lot of community uproar in West County and there is no representative for people, other than Duane and Gina, and I'm still getting phone calls, and so. So I'm happy to say that to John Gioia and I'm happy to say it to anybody, but my point is that if you're going to amend the Bylaws and ask that these direct appointments from the Board, then they need to make sure that happens.</p> <ul style="list-style-type: none"> • Supervisor Andersen- They absolutely do. I agree 100% and I don't want any of this to stop anyone's desire to be out in the community recruiting people. • Duane- so this is what we're going to do- everything is on hold for right now, except we are still going to go out there and recruit people. Keep recruiting. I am going to check with the California Association of local Behavioral Health Boards and Committees and see how other people are doing it and get some support from them and CAL OSHA, and get some support from them and directions from them, in writing, and that way we will then meet with the Supervisor and let her know what we have come across and see if we can come to a happy medium. I think that's the best way to do it. • Supervisor Andersen- I am going to weigh in on this and I am going to peacefully find the least objection that we can still accomplish what we want to do which is to get new Commissioners oriented to the norms of this Commission and get them excited about being here. • Duane- do we need a vote on this? No, we are leaving it as is. 	
<p>IV. RECEIVE introduction to 1420 Willow Pass renovation and CREATE an ad hoc committee for continuing review of the project by Adam Down.</p> <ul style="list-style-type: none"> • Duane- This is a new project that there was some discussion about and Adam will inform the rest of the board. • Adam- Thank you for putting this in a crowded meeting agenda. I often work for the Commission and one of my other roles is that I also work on facilities with the department. Many of you have visited or 	<p>The ad hoc committee will meet with Adam Down, and or Behavioral Health Administration staff, regarding the updates for the renovation to 1420 Willow Pass in Concord. The Commissioners Gina, Lauren and Meghan are the ad hoc committee members and Mike Ward will serve as an alternate.</p>

<p>worked or done something at the 1420 Willow Pass clinic, which is a centered Concord adult's mental health clinic. It can use some work, I think anyone who has visited would agree with that statement. There is an opportunity to improve it, the vocational unit had been downstairs, and it was vacated three years ago. The main area upstairs, on the second floor has been continued to be filled with staff members and clients, it's a very busy clinic and creates an environment that is less than welcoming. We feel like we can accomplish quite a bit with some renovations there and expanding, decompressing staff, into that lower level unit. The process of where we're at right now, we engaged the general service department, professional services, consultation and project feasibility early on. We worked with the employees on site, cross section employees, we had nurses, doctors, clinicians, management and a clerk, everybody sat around and asked- what can we do here to make this better for you? We really zeroed in on a few things, the very important we heard them from Commissioners as they've gone and you can see it when you just walk in yourself. The preliminary design that we put forward for approval- to increase lobby, patient waiting area size, decompression of various staff members in the clinic, improved clerical work function, better patient circulation, additional treatment rooms, and a creation of a welcoming environment, including removing the Sheriff's station that is front and center as you walk in the door. We know that it was important to many people. What I hear today, we are looking at about \$980,000 in total budget. Of that, \$700,000 is construction costs, approximately. What was proposed to the Executive Board, and forwarded to this meeting, was to get an ad hoc committee, assign a smaller number of people that we would like to work, as we move forward, to ensure that the public process has been followed, that you are able to accurately advise and inform the</p>	
---	--

<p>Board and the Mental Health Director and your aware of the project as we promised. With that I would like to turn it over to you for any questions or to appoint an ad hoc committee that I will work with going forward to keep bouncing the ideas and report back to the Commission at future meetings.</p> <ul style="list-style-type: none">• Lauren- As some of my fellow Commissioners may not be aware that my day work is that I have commercial properties and that I am required, as an owner of commercial properties to work with some of my leaser's to do renovations'. The one thing that I wanted to point out to our Supervisor Andersen is that the County does not own this building and putting in \$980,000 into a building that we do not own maybe warranted but I know that when I have leasers' come to me when they have to do renovations there is usually an agreement worked out because leasers are very concerned that they can put massive renovations and then only have like a three to five year lease. Usually you then negotiate a longer term lease that incorporates the amount of money that the leaser is putting into the building. Also, every time I go into negotiations with the leasers, if flooring, walking and carpeting are in deteriorating conditions, such as they are at the 1420 Willow Pass property, the owner of the property, usually finances the funds of this type of renovation. I am pretty familiar with renovations and what it takes negotiate them. It does seem like a lot of money but I haven't done one in the last five years in California. I would ask the Supervisors since this is a lot of money, every dollar that we spend on renovations can possibly be used for care. I understand that this is coming out of the general fund.• Supervisor Andersen- Do you know the term of the lease that there is on that building? (Adam)• Adam- I believe we are in there right now until 2020? Public Works Real Estate is engaged in this project as well.	
--	--

- **Supervisor Andersen-** I know we have a pretty good real estate department and let me share some of this with you- the reality is that many of our federal and state programs, we will be reimbursed for lease payments, we will not be reimbursed for a building that we own. So it has been beneficial for us to lease and rent buildings, rather than own them, because then we wouldn't have the reimbursement funds. It is also much cheaper for us to contract, with an outside building with a property management company because they then maintain the building, they provide custodial services and using our own public works labor, to maintain custodial staff is really very expensive when you add all the county benefits. It's generally much more cost effective to lease a building, for its intended purpose but we do have real estate professionals who manage the county's leases and do work out details like getting credit for the property improvements and lease terms. I don't want anyone to think that no one is watching the store and we are just throwing money out here.
- **Lauren-** I had significant questions because on the Oak Grove property that the County did purchase, it seems like sometimes the County isn't making the wisest decisions when it comes to real estate decisions that they make that deal with mental health.
- **Supervisor Andersen-** that's pretty hard if you are going to another location on Oak Grove
- **Lauren-** this is a good location, I am just asking that we really do, do due diligence with public works or whoever is negotiating. Because the building, if they are supposed to be maintaining that building for you? I know that at one time Public Works came in to clean the carpets, the building has been in a very deteriorated state, always has been for the last four years and it's not what I would consider a public building at all. That is my two cents and I just want the very best for the people.

- **Adam-** We are hoping that the ad hoc committee will have a real understanding and we will present this to them. We haven't engaged that far, we have merely scoped out a proposal, that at this point it's still preliminary. That information will be forthcoming, that is the point of forming the ad hoc committee so we can continue to work and make sure that your concerns are met and others concerns are met.
- **Gina-** It's really interesting because in West County they built a new clinic, which is beautiful, it's only medical and the mental health section is at a whole other place. I have visited the Concord clinic, what I like about is that it has the medical part is connected so patients are able to get all the help right there. Where in West County, it's not connected and they have to go to two different places, it's hard to get to and not easy if your handicapped or in a wheelchair. One of the major problems in West County is for consumers to get their lab work done, it's very difficult for them due to transportation and they are on a limited income and have to go to two places. I think it's great that it's combined in Concord.
- **Lauren-** West County is opening up space there.
- **Gina-** yes, that's in process, I know that.
- **Duane-** With that being said, I am going to ask for volunteers from the Commission, to be on the ad hoc committee. Who wants to volunteer for it? Lauren, ok, Gina ok, anyone else, public?
- **Adam-** I would like to propose one of the new Commission members- Michael or Meghan, this a meeting that I can be flexible around your schedules. It does not have to be a set meeting; we can work around and make it work for the people who are involved, if that's ok?
- **Duane-** ok so far I have Gina and Lauren and Meghan, if Meghan cannot make a meeting, then Michael will attend as an alternate.

<ul style="list-style-type: none"> • Adam- we will be flexible around your schedule (Meghan) • Duane- Then that is that, thank you very much for volunteering 	
<p>V. APPROVE minutes from April 5, 2017 meeting Motion to approve the minutes was made by Gina, Doug seconded the motion</p> <ul style="list-style-type: none"> • No corrections required • VOTE: 9-0-0 • YAYS: Supervisor Andersen, Duane, Barbara, Gina, Diana, Doug, Lauren, Mike and Meghan • NAYS: none ABSTAIN: none • ABSENT: Sam, Connie, Jason 	
<p>VI. Duane adjourned the Mental Health Commission meeting at 5:21 pm in the memory of the Behavioral Health Director's father who just passed, Vernon Belon and also in the memory of a young man, who committed suicide, because of the two people we share in a moment of silence.</p>	
<p>I. The Chair, called to order- The Public Hearing on the Mental Health Services Act Three Year Program and Expenditure Plan at 5:22 pm</p>	
<p>II. Opening Comments by the Mental Health Commission Chair- Duane Chapman.</p> <ul style="list-style-type: none"> • Everyone can read, so I am moving on and we will allow three minutes time for each speaker. We are here are to confirm and complete the process. Warren, can you start the process? 	
<p>III. Fiscal Years 2017 to 2020 Mental Health Services Act (MHSA) Three Year Program and Expenditure Plan- by Warren Hayes, MHSA Program Manager</p> <ul style="list-style-type: none"> • Warren- First of all, I would like to thank the Commission for putting in a big chunk of their time to host the public hearing which is required by statute and regulations and I believe they are listed here. It has been my privilege to provide support for the stakeholder process that started last summer when our consolidated planning advisory work group did the planning and were the helping hands for our community forums that were held in October, November and December. Those were 	

<p>designed to solicit in several venues interactive dialogue around the needs and priorities for the County regarding mental health. In January and February the information was reviewed, that we got from the community forums as well as to review a quantitative needs assessment that looked at Behavioral Health needs from a little different lens. In March we held a joint meeting, the Consolidated Advisory Planning Workgroup (CPAW) and the Mental Health Commission members were invited to have an informal discussion regarding the draft of the Three Year Program and Expenditure Plan. Then we got into the formal part of the process, whereby we posted the draft on the website, changes were made as a result of the informal discussions with CPAW and the Mental Health Commission members. We then posted the corrected draft, for a public comment period of 30 days. That is required also by law. The Commission then hosts, this event, which is a public hearing, which is a formal event. As much as I would love to get into discussions and dialogue about the three year plan, this event this evening is really for the public to provide comment, as well as the Commission members to provide comment and then have the comments listed from both the public and Commissioners, as it is listed on the agenda. We are in the formal period, which means that if you sent me an email asking why we are doing something, at this point we will discuss it, give me a call. A lot of you take advantage of that and I very much enjoy those discussions, they are off the record but they are really important because this is not a simple process. The Mental Health Services Act (MHSA) dollars have lot of strings attached and I am happy to explain to those who would like a deeper knowledge of how these things come together. This process is all in preparation of the plan. After this evening, we will then provide a formal written response to the public comments that came in the 30 day</p>	
--	--

<p>period, the public comments tonight, as well as the Commission’s comments and any potential recommendations. That will all go into the three year plan and soon as we get a response to those and get it approved by my boss, the Behavioral Health Director, we will send it to the County’s Administrator’s Office for putting the plan on the agenda, for the Board of Supervisors. We hope to have this before the Board of Supervisor’s for their consideration, sometime in June, so that hopefully we have a plan in place starting July 1, which is the start of the three year period.</p> <ul style="list-style-type: none"> • Duane- ok, with that I am first going to ask for public comments, regarding the plan. • Warren- Duane, one last thing here is there is a two page public hearing presentation, that’s in your materials. I had put this together as a two page summary that is in your packet. I can read that into the record if you’d like, the last three years I have read the summary so it shows up in the minutes. • Supervisor Andersen- I don’t know why you need to read it into the agenda to have it part of the minutes? We can hand it over to Melinda and have it be made part of the minutes, unless you really want to read the whole thing in? • Warren- No, this is really up to the Commission folks. • Supervisor Andersen- I have read it, has everyone on the Commission read it? I’d hate to have you recite it unnecessarily. • Warren- I think your points well taken. Right after the draft minutes, which were just approved, which is page six, then the next page is Adam’s report on Willow Pass, but after that is the two page summary. If you have not read it you might want to take a look at while there’s public comment? • Duane- Yes, let’s start the public comment 	
<p>IV. Public Comment regarding the Plan- (Transcribed by Melinda Mehan @47:12 on the audio recording)</p> <ul style="list-style-type: none"> • Duane- I will start first by calling Mr. Charles Madison. Please everyone speak loud 	

enough so we can get it on the recording.
Thank you.

- **Charles Madison-** I want to first thank Warren and his group for finally getting a 3-Year Plan together that is readable. For so many years, you had to hunt all over the document to find out what area you were dealing with, and so now we have a program where you can actually look at something. My hat's off to you. Thank you so much for getting that into the program. Secondly, I want to thank the County and I want to thank CPAW for recognizing and adding families into this. I'm speaking as a family member here, and that we are so happy to see that there is an allocation to support families in the 3-year program, and that's pretty much what I've got to say, so thank you very much, everybody, and thank you, Warren.
- **Mary Ann Andrews-** First, I would like to thank the County, CPAW, and all others concerned that a program to support families has been shown in the budget. It's very important to have families supported through these programs for the health and wellness of their loved ones. I understand family members can be tossed around by the whirlwind that is mental health. These programs help educate families to become aware of how to handle and understand their loved ones. It cannot be easy to have a loved one with mental illness, and how to deal with the effects are not always obvious. When do I call to have my loved one hospitalized, and did I do the right thing? Why these suicide cries? What is real, and what is not real? These struggles and so many more can be overwhelming at best. It is important for family members to know that they are not alone as they struggle with the devastation that mental illness can leave behind. To help them to try to understand something that is sometimes not understandable is no easy task, but with these funds, this task can be started. I know that these funds will go to promote awareness and compassionate

understanding of mental illness as a real disease; so again, I would like to thank you for your support of family members.

- **Sharon Madison-** I am piggy-backing off of the people who just spoke before me, that I definitely want to express this to everybody, and I really want to acknowledge that the Mental Health Commission, our County, our supervisors, and their recognition of the vital role that families do play in the mental health treatment plans for our loved ones. We've been waiting for this for a long, long time. For some reason, we've been put out in the field like we weren't part of this, and when we look at all these treatment plans and programs and whatever, it becomes quite evident that a lot of the burden of these illnesses falls on the family. So I know I have said this before, but I do want to reiterate this, that I feel that what better gift we can give someone who is living with a mental illness than an educated family. Thank you.
- **Anne Sutherland-** Thank you for taking my comments and questions. I am a local physician. I was appointed as a member-at-large on the Alcohol and Other Drugs Advisory Committee and was immediately elected chairman, so I'm new at this. I'm trying to educate myself. I originally wanted to be of service. So please educate me. I read through as much of this as I could, and just as mental health has been marginalized in the community, I'm getting the impression that substance use disorders are marginalized within the mental health community. Please prove me wrong. I looked through this, and I did not see any services specifically allocated for substance use disorders. We have two full-time paid staff members and a lot of volunteers, and other than that, my impression is that we don't have much in the way of funds allocated. My simplest question is, is anything going to be done about getting rid of alcohol and drugs in homeless shelters, because people with substance use

disorders go through rehab; it's an expensive process, a lot of them don't have homes to go back to; their families end up getting wrecked by their disease, and when they go back to homeless shelters, it's my understanding that a lot of these are called "wet"; there are drugs and alcohol in the homeless shelters, and it ends up being a revolving door for these people. The time and money that were spent on them is wasted, because they relapse.

The second part of my question is that substance use disorders are now considered to be a mental disability.

What's being done to integrate them into the mental health services at large?

- **Kanwarpal Dhaliwal**- Good evening; I'm with the RYSE Center in Richmond. This is the first time I've been to a Commission meeting. It's good to be here. I've attended CPAW meetings. Also, I want to echo the suggestion/request to maybe also move meetings around to different regions of the County. It is not easy to get here, and for those of us working in other regions, to be coming to Central County 2-3 times a week is actually pretty challenging. I would just ask that consideration. What I want to talk about is a few things. One is just the appreciation of the work, the struggle, the healthy struggle. Sometimes it doesn't feel healthy. It really is sort of figuring out how do we ensure that the most structurally vulnerable communities get what we need and what we deserve. And I know that it is no simple feat to do, and I just want to appreciate that work. And in that spirit, I also offer one of the things that we think is really important to start to look at is the sense and idea of atmosphere of trauma, atmosphere of distress. Our young people in our communities talk all the time everywhere they go that they feel threatened, whether it's the system, whether it's going into Target, whether it's going to City Hall, that fact and there's the stress that's happening all the time. I think we are starting to try to

<p>figure out how to address that more holistically. I really want to offer and hope I can work with any and all of you on, on behalf of RYSE, on behalf of the providers that we work with in West County, is how do we really address this holistically so that all the levels of mental health or the distress actually are addressed more holistically when we see the relationship between all of them. I think that sometimes for us what feels challenging about just looking at episodic or individual. Understanding that what happens in our bodies and our minds and our relationships is also related to the social conditions that we're in, and so we really want to push that, and that the solutions are community-grounded, community-rooted. Yes, we all know there's a lot going on in West County, and there's a lot of challenge, and we really feel like we need our services to come from a place of seeing or being part of humanity and not having to be systematized or put into a system before we get anything. Thank you.</p> <ul style="list-style-type: none">• Teresa Pasquini- I actually didn't plan on making a public comment; I came to listen today. But I, too, would like to compliment the Commission and CPAW on the Community Planning process. I have been a part of the planning process for these 3-Year Plans since the inception of the MHSA, and I do see a simpler plan to read and follow. I am also happy to see attention given to the families that the Commission has long advocated for. I'll be curious to see how those plans are implemented and how effective they are. I think it's very important to have family support and education, but it doesn't do us any good to educate on how to navigate a broken system, and I can't emphasize enough how the system is still very broken and fragmented, even though we do have some really wonderful programs in place. I did want to share that I had the privilege of attending a Laura's Law court session last week. Somebody I have advocated for over	
--	--

<p>12-13 months to get into the program was actually finally found. Even though she had hit our Psych Emergency door and/or 4C door 6-7 times and also hospitalized in Marin General and had been referred, but then lost, she was found. I did have the privilege of attending a court session. She had invited me in. I'm not her family member, so we do have a lot of consumers who need advocates – strong advocates – who do not have family members to support them. Gina, this is sort of for you, because I know how you feel about Laura's Law. So I actually pushed – I was told it's a closed session, and I said, "If a consumer is struggling with going to court and they are afraid of going to court, and they have invited somebody to come with them, can we just ask why somebody couldn't be invited in?" And so I was told I had to go and sit in the hallway, which I did do. The Public Defender did invite me in at the request of the consumer. It is supposed to be a consumer-driven process, and so I would like to encourage – I still haven't seen a meeting come forward about our Laura's Law, but the last time I was here, I requested. I haven't seen a community meeting planned. I am really very strongly interested in seeing some changes and some improvements in our Laura's Law process.</p> <p>Last but not least, housing-housing-housing. Housing and transitional care. You all know the story of my Danny. I believe most of you know the story of my Danny. He is currently in an out-of-county placement, and he is doing amazing, very, very well. And as you know, he's been 5150'd over 50 times in his life. The trauma of that is very serious. He's been sent out of County to locked facilities for most of his adult life. This started at 18; he's going to turn 35 in August. We're hoping for him to be able to come back, but I had a conversation with his conservator today, and I don't feel there's a program available in Contra Costa County that would adequately provide his</p>	
---	--

<p>needs. I didn't see anything in this plan that would support consumers who do not require to be in a locked facility that could come back into our community and transition back and be supported. I would strongly encourage the Commission, CPAW, and the Board to explore new contracts with new providers. There are programs out there like Synergy in Morgan Hill. Synergy is opening another program in Sacramento. We have to start thinking outside of the box for the people who have been in a box or locked up, you know, "out of sight; out of mind," for most of their lives, and that is true trauma. I would just really strongly encourage – I don't know if there's anything in the plan; I didn't see anything. I am happy to see the Oak Grove finally come around; however, I would really like to also comment that that's not something really to celebrate, because that was actually on my agenda 6 years ago. I don't know what's taken so long, so that's a little frustrating as well. So I celebrate the good things and the positive things, but we have a long way to go. Thank you.</p>	
<p>V. Commissioner Comments-</p> <ul style="list-style-type: none"> <p>Duane Chapman- As a Commissioner, I'm glad to see that we are concentrating on the family. Family means a lot to everybody, and I don't tell everybody a lot that I have 3 people in my family that suffer with their mental health, one died, and I have two others that I take care of. Family is very important; to understand to make sure you're doing the right thing. How many times I've called the police. How many times I have fought with my brothers and sister to do the right thing, and when I read this and saw that there was going to be a lot of attention to family, I said, "Right on." However, we still have a lack and a broken service. Yes, we're not perfect. The County is not perfect. But as a Commissioner, I ask you, and as the Chair of this Commission, if you see something that needs to be paid attention to, stop, write it down, and send it to me. Because if it's in</p> 	

writing, it's better than saying it. And then with that, we have something to take to the Board of Supervisors. But you know, people can say anything they want to say. If you don't get up and say it in front of the Board, or you don't put it in writing, guess what? It didn't happen. So I know we have a lot of energy and a lot of concerns, but if you have a problem you think about that young man who committed suicide earlier this month. It took me back, and I want to make sure that as many people as we can save, we do it together. Thank you.

- **Lauren Rettagliata-** I did submit them via writing, and I will leave Melinda a copy. My first comment is, I have a number of comments, I have drilled down, and I am going to drill down into the housing section. Because housing was cited as the number one thing that needs to be addressed at our Community Planning Process by the people who attended; housing and supportive housing. Yet, if you'll note in the vision statement, there is not one thing that is mentioned about providing housing through our mental health services plan. So I would like that to be addressed. I think there needs to be a statement in the vision that we as a community have addressed housing and supportive housing as our number one need. It wasn't just this year; it's been for the last 3 planning meetings I've been at. In the Needs Assessment on page 10 clearly calls and this is the quantitative study that was done by the Mental Health Department, clearly called for improved capacity to assist consumers who move from locked facilities to community based services. Yet this is not addressed in the Plan. It was called out as being much needed. It was called out in the Quantitative Needs Assessment. It was called out at the Community Planning Process meetings. It has been continually called out at Mental Health Commission meetings. There is no provision for this in the 3-Year Plan. The lack of housing and the correct supportive housing was

<p>identified as the number one need. The \$1.7 million funding in the Plan is not new money but old money that was not used. It is designated for permanent housing and not for transitional housing, which is integral to a workable system of care. “No Place Like Home” program funding cannot be used for this essential treatment and care element, so I think we really have to address it, and we cannot wait for the next 3-Year Plan to do this.</p> <p>shelters are listed under housing services. Shelters are not housing. Shelters are emergency services. Shelters need to have their own designation under emergency services.</p> <p>Since MHSA funding is the major source of the shelters, what provision in the County System of Care Plan assures that beds for those with a serious mental illness receive priority? What are we doing to assure that patients from Psych Emergency, Contra Costa Regional Medical Center, 4C, Miller Wellness, and Hope House and Full Service Partnerships have access to this emergency service? MHSA clearly states that the funding is to be directed for the use of those with a serious mental illness – not a mental health condition, not for someone in temporary trauma, but for serious mental illness.</p> <p>This Commission worked diligently for two years to develop a program and fiscal review process. We now have an excellent tool to evaluate every program funded with MHSA funds, that are contracted, and also that are performed by our own county. Of the last seven programs evaluated, all seven were found deficient in effective communication between the contract manager and the contractor. How are we going to remedy this was not addressed in the 3-Year Plan. Almost all of the augmented board and cares had findings that required further attention in quality assurance and staffing sufficient for the program. There were also medication; there were very many deficiencies. So my</p>	
---	--

<p>question is, we should have in this 3-Year Plan, because we knew we had this problem, we should have addressed what are we going to do if we have to shut down an augmented board and care, because this is a real possibility. As you know, I went on some of the facilities. Some of them looked pretty good, but actually there were many recommendations were being made that what was happening was people were being placed out into augmented board and cares and really never heard from again. They were disconnected with their case management. That was noted by Warren's team that went out. So these people may not be using our emergency rooms; they're not really receiving treatment and care, and we may have to shut down some of these augmented board and cares. So my question is I think this 3-Year Plan should address and have money provided for what happens to these people if we do have to go in and shut down an augmented board and care. And my question is, with the tool that we have before us, with the program and fiscal reviews, who is held responsible to see that deficiencies are corrected? Will the contracted agency be allocated the MHSA funding if these deficiencies are not corrected? If we shut down augmented board and cares, where do the residents go? And where is the plan to house these residents if the placement they are currently in is not providing care? Then on page 20, there was an attempt to address housing, and it says, relevant program/planning elements: Sufficient affordable housing for all consumers of Contra Costa Behavioral Health Services is not what MHSA, that these funds cannot really be used, there's no way that we can address the 3,800 homeless residents that we have. But what I'm saying we can't just dismiss that we have 3,800 homeless and say MHSA funding can't address this. MHSA funding is asked to address the housing needs of those who are severely and persistently mentally ill. Where it ends,</p>	
--	--

<p>where we need that critical gap to provide traditional housing for those leaving locked facilities and those who are housed in a full service partnership. In February 2016, full service partners came to a Mental Health Services Act committee meeting and let us know that 10% of those that they serve were homeless. This homelessness was not by choice, I don't believe. I think many times it is because the alternative is an abysmal living situation, many times situated in what we call a drug corridor, many times in room and boards that are bedbug infested, and many times in areas and shelters that are hidden from public view.</p> <p>Supportive housing, on page 38, Shelter Inc. 119 units, \$2.281 million. What is used to assure that those who receive one of the 119 units have received a diagnosis of severe mental illness? I know we used the LOCUS and the CALOCUS, but these units are for the severely and persistently mentally ill, so is a physician's assessment required for these people? How do we assure that the people living in these 119 units are severely and persistently mentally ill? Do we do a check every three years, do we do a check every four years, what do we do?</p> <p>We have now have an MHSa plan for at least eight years, yet we have the same conditions getting even worse. We have to ask ourselves, for 8 years we have had MHSa funding for the limited future, and as you know, the Commission wrote the White Paper and we showed that conditions for the severely mentally ill are not improving in this county. So, is what we're doing the right use of the funding? Though intake times have improved for those with a serious mental illness, treatment time and the ability to see a psychiatrist at the clinics has not improved, and I thank Warren and his team for the placing in the Workforce Education and Training (WET), at least it's an attempt to draw psychiatrists into our county.</p>	
--	--

What method is used by our county to place MHA contracts that are more than \$250,000 out for re-bid at least every five years? Without having a request for a proposal opportunity every so many years, the County loses the ability to be assured that the best services are being provided by the best contractors. I know that, because I've been reading the plans now for five years, I've never seen anything go out for a re-bid on a request for a proposal. I appreciate the time that everyone has had to take notes on this.

- **Gina Swirsding-** One of the things I'm really glad, looking over the plan, is that because we did have, from my part of the county, they came out to speak on their needs of trauma. Getting help for those, especially those who experience gun violence. I've been talking all throughout the County, mostly with police officers and first responders, paramedics. Because in many aspects of gun violence, the burden is actually a lot on them. And this was my experience, when I got shot at, there is no help. Even though I went to a group, at Herrick Hospital at an outpatient program, and they would never let me talk about it. In my experience with mental health, the reason why I'm mentally ill is because when I got assaulted in 1989, I did not talk, because the person who assaulted me died in the process of it. Not only did I get as being the victim, but also got visited by the homicide detectives. In my mind, I was thinking I was going to jail. And I still sometimes believe that, even though it's been so long. I have this fear that I'm going to go to jail because this person died because I defended myself. When you don't talk, you become mentally ill. So, when I got shot at, I started talking, and that's when actually I think it was good. If you don't, what happens is you have revenge, like I did. Why was I like that? Because actually in reality, I was really suicidal. I didn't care. So why I'm saying this is I've been working with a lot of kids in

my area, and a lot of them are traumatized. They're functioning, they're going to school, but a lot of them are traumatized because of gun violence. I'll ask kids' questions and then you see their little eyes open, and they start talking about what their experience is on the gun shooting they experienced. So if you can't talk about it, then what happens is, if you're a victim of gun violence, you start doing revenge. That's why a lot of our gang members go out and shoot each other. So where did I get the help? Not from the psychiatric community, not from the police department, because they disassociate, not by the military, because they disassociate. I ended up talking to gang members, and that's where I got my help. So I started asking around, where is the building, where I could go if I was a victim of gun violence? I couldn't get help because there is no place. There's a place for people who are sexually assaulted, for people with domestic violence, there's places you could go and say, "Hey, I need help." And they can help you through that process, but when it comes to gun violence, there is no place. I read an article about a woman that her daughter was shot, last year, at the Hilltop Mall. The woman is from Mill Valley and the daughter was too. This mom now is going to Richmond from Mill Valley, trying to find out why her daughter was shot. That is a response that people can have. So I don't know what to do but the reason why I joined this Commission was because of just this matter of gun violence; which occurs in every part of this county. Even in Concord and I've heard about it in all different places. It's increasing. So I just think there needs to be a place for people to go and there needs to be a small group. In a small group, where people who were shot at, can talk together about it. Like people with drug and alcohol, you have people who can relate and you get help that way. That's how I get help for my mental illness, talking to other people who have experienced the same thing. I'm

<p>joining the Commission again for another three years and this is one area I really want to be addressed. I know it may not be in this budget but I'm already working with some people in my county. I'd like to see this throughout the county, from East County to Central County and in West County. There are a lot of victims out there and they're alone. But I'm glad, I read some of the stuff in the plan and I like it. So I want to say, you did listen to us.</p> <p>Supervisor Andersen- Warren is here to listen and accept the comments</p> <p>Duane- So we need to develop a list of comments and a list comments and recommendations to the County Mental Health Administration and to the Board of Supervisors.</p>	
<p>VI. Develop a list of Comments and Recommendations to the county mental health Administration (MHA) and to the Board of supervisors (BOS)</p> <p>Duane- I think we've heard everything today and I know that we have Melinda here and we have Liza, who will get all this information back to us as quickly as possible. One of the things as a Commission, we're going to hand-deliver the comments that were said today, to the Board of Supervisors and we will ask them to read them, word by word.</p> <p>Warren- Duane, just so you know your statement will be part of the plan.</p> <p>Gina: Can a Community member still go to the Board of Supervisors to express some of their needs?</p> <p>Supv. Andersen: You always can go to the Board of Supervisors. We're down to 2 minutes, because our meetings are so long. You have 2 minutes to make a public comment.</p> <p>Gina: No, before the June thing.</p> <p>Duane: Anyone else have anything to say that you think is important enough to give to the Board of Supervisors? You will go first, you have three minutes.</p> <p>Guita Bahramipour: Could you please</p>	

describe on page B34, regarding First Hope and the budget is \$1.6 Million. I just want to know how they can manage with such a little funding to manage this wonderful program.

Warren: I'd be happy to talk to you in depth about the First Hope program.

Duane: Excuse me, we are not having, nor open for discussion.

Warren: It's an excellent question I'd be happy to chat with you offline in depth about it.

Sheri Richards: I wasn't going to speak; I just wanted to listen and be a fly on the wall, so to speak. I want to say that I've been inspired at this meeting, hearing from AOD, hearing from Gina, that people that are in this Commission and people that volunteer are motivated because they have their own personal stories. For me it's about older adults and I didn't hear that this evening. I wanted that to go on the record. Something that I've said, I think I said it in one of the planning meetings, all the issues of housing, transportation, stigma, discrimination, add old age to that, and the voice for older adults just isn't there. It's my observation. What got me here was just simply curiosity, but it was also coming from a home of being the responsible person, I felt some sense of responsibility to bring back the information to the Older Adult Committee and I'm so glad I came. What is missing is internal advocacy. It would have been really neat if someone in one of the areas said, "Hey, Sheri, this would really be a good meeting for you to go to." Lauren nudged me at CPAW, and I think that was in the back of my mind, maybe this is what she was talking about. So I appreciate any communication, don't hesitate, because new people like myself, I'm learning the ropes, and this doesn't come naturally. People need encouragement to speak up and to voice what they are witness to. Thank you.

Jill: So maybe, Warren, you could just give a little burb on what the deadline is to

receive comments on this plan?

Warren: Actually it is. I think Duane actually explained it quite nicely just now, which is that Melinda is our scribe. She gets all the comments. We then go into lockdown to sort it all out and officially respond to all the comments, and that then goes into the 3-Year Plan that the Board of Supervisors can see what the public comment period, because that started in March, and so this public hearing tonight actually is the culmination of that.

Jill: So if anybody has comments on the final plan, go to the Board of Supervisors hearing and make their comments public at the Board of Supervisors, or submit them prior to that meeting?

Warren: Yes

Supv. Andersen: If you want a response, you have a few minutes left.

Kanwarpal Dhaliwal: I would like to see a consideration of the emerging science around chronic stress, chronic trauma across the lifespan, so adverse childhood experiences, all of that. I don't see any of that sort of in it and it's definitely something I think is important and that we have an opportunity to integrate into what we already know. So I'd like to see the chronic trauma, chronic stress, ACEs kind of stuff, trauma-informed approaches be a part of it. I'd also like to really see, for the record, how we are addressing the trauma of racial aggression that plays out in all that we're doing.

Gina Swirsding: I want to echo what she said. That's what lacks in psychiatry, is how to treat people with PTSD. I was placed on different types of medications because it mimics other things. My psychologist, who is a specialist for PTSD, was constantly fighting on my behalf, to get me off the medication that made me worse. I couldn't sit and watch my favorite TV shows because PTSD mimics other mental illnesses so I was given the wrong medication which made me very aggressive. Being placed on the wrong medication can make a person more

<p>aggressive or even suicidal. When my psychiatrist, who worked at the Veterans Administration, fought for me to be finally taken off the wrong meds, I got better. There are a lot of medications and psychiatrists and they all handle trauma differently. It's about finding the right doctor, to prescribe the right medication. They need to know how to handle people that have been through trauma. Especially if a person is older and taking other medications, due to other health problems, this is something that does need to be evaluated.</p> <p>Duane- Alright, with that, on behalf of the Commission, any other comments? The only thing that I am going to ask everybody else to do is to make sure that you get one of these brochures. Especially all of you that came to visit today, become a Commissioner, and come have some fun. Like I so love, it's not a ten hour job, ok. If there is nothing further and we are all in agreement?</p> <p>Commissioners- Yes!</p> <p>Duane- Then I call this meeting to end.</p>	
<p>VII. Public Hearing was adjourned at 6:20 pm</p>	

Respectfully submitted,
Liza Molina-Huntley
Executive Assistant to the Mental Health Commission
CCHS Behavioral Health Administration