MENTAL HEALTH COMMISSION MONTHLY MEETING MINUTES

Wednesday April 4, 2018 – FINAL MINUTES

At: 550 Ellinwood Way, Pleasant Hill, CA

	Agenda Item / Discussion	Action /Follow-Up
ı.	Call to Order / Introductions	
	sion Chair Barbara Serwin called the meeting to order at 4:38pm	
Member	rs Dresent	
Members Present: Chair Barbara Sanuin District II		
Chair- Barbara Serwin, District II Vice Chair- Duane Chapman, District I		
	for Diane Burgis, District III	
Diana MaKieve, District II Douglas Dunn, District III (arrived @4:45pm)		
Geri Stern, District II (arrived @4.45pm)		
Gina Swirsding, District I		
Lauren Rettagliata, District II		
Leslie May, District V		
Mike Ward, District V		
	hioka, District IV	
	Commissioners Absent:	
	Meghan Cullen, District V	
	Patrick Field, District III	
Other A	ttandagg	
	ttendees: . Roth, Health Services Director for Contra Costa County	
	nssen, Assistant to Health Services Director for Contra Costa Count	
	Benepal, Interim Chief Executive Officer for CCRMC and Detention Mental Health	
· ·	thew White, Chief Psychiatrist, Medical Director for BHS and Interim Director for BHS	
	am "Mario" Berlingieri, Chairman of the Department of Psychiatrist and Psychology	
for Contra Costa County Health Services		
	forrow, Field Representative for District III	
	Field Representative for District II, Supervisor District II	
Colleen Isenberg, Field Representative for District IV		
Theresa Comstock, President of California Association of Local Behavioral Health Boards &		
Commissions and Board member of Napa County Mental Health Board		
Matthew Luu, Deputy Director of Behavioral Health Services		
Dr. Jan Cobaleda-Kegler, Adult/Older Adult Program Chief for BHS Division (arrived @5:15pm)		
Jennifer Tuipulotu, Program Coordinator for the Office for Consumer Empowerment, BHS		
	own, MH Project Manager (arrived @5:28pm)	
	higpen, Adult- Behavioral Health Family Services Coordinator	
Theresa Pasquini, family member		
Erika Raulston, family member		
	ngro- RI International	
	Molina-Huntley, EA for MHC	
II.	Public Comments: None	
III.	Commissioner Comments:	Interested in serving as a volunteer on
•	Lauren- would like to commemorate the death of Dr. Martin Luther King Jr.	the Mental Health Commission?
	and read one of Dr. King's speeches:	Apply online at:
	"When our days become dreary with low-hovering clouds of despair, and	https://ca-
	when our nights become darker than a thousand midnights, let us	contracostacounty2.civicplus.com/6408/Boards-
	remember that there is a creative force in this universe, working to pull	and-Commissions-Database
	down the gigantic mountains of evil, a power that is able to make a way	
	out of no way and transform dark yesterdays into bright tomorrows. Let	
	us realize the arc of the moral universe is long but it bends towards	
	justice. by Dr. Martin Luther King Jr."	
•	Duane- is glad to be back, after his extended medical absence	
•	Lauren- wanted the attendees to read the "ECAMH registered nurses	
	addressing Patient Safety concerns in regard to the current crisis" by	
	Therese Becker, AMFT, presented and discussed during the March 7, 2018	
L	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

- Commission meeting and including in this month's meeting packet.
- Gina- regarding the Napa shooting at the Veteran's home last monthmany Veterans that suffer with PTSD (Post Traumatic Stress Disorder) are very dependent on these programs. Apparently the shooter was in a PTSD program at the Veteran's home in Napa and was discharged from the program. Gina stated that the discharge may have been part of the reason that caused his reaction; maybe programs should consider possible reactions of their patients before discharging. Stated that she is concerned "about pushing people out too soon."
- Leslie- contacted the Board of Behavioral Sciences and the California Marriage and License Therapists Association, is concerned about the documentation of patients that are released too soon and both professional and public safety. The actual numbers are not made public of how many therapists, social workers and others working in the mental health field are killed by patients. Mental health workers, therapists are not unionized and believe that all mental health professionals should be unionized, there is no protection for mental health professionals and there is danger working in the profession.
- Sam- expressed that the Commission should strive to have a full Commission of 16 members. There are several vacancies that have not been filled for years. Consistent monthly attendance should be important to all Commissioners. Commissioners that do not attend regularly, their seat should be vacated and allow someone else that will commit to attending the meetings. Expressed that although a Supervisor stated that only Supervisors should have involvement in recruiting, feels that the Commission should attempt to fill the positions, so that there is a full Commission. The attendance has been an ongoing issue and a lot of Committee meetings have been cancelled due to a lack of quorum. Attendance should be tracked, to consider seat vacancies
- District III -Supervisor Burgis, stated that it is difficult to fill the vacancies, specifically when there are certain requirements attached to them. All seats were finally filled for district three and was just informed that a Commissioner from district three has not been attending. Now needs to start over on filling the seat that will be vacated. It will help to communicate with the Supervisors so that they are made aware of the vacancies in their district and their attendance, to encourage the Commissioners to attend. There are approximately 80 different advisory boards and Committees in the County and Supervisors are doing their best to fill the seats in all of them. District three does advertise the vacant seats, as do the other District Supervisors. Does encourage Commissioners to reach out to potential candidates and they can now apply online at: https://ca-contracostacounty2.civicplus.com/6408/Boards-and-<u>Commissions-Database</u> Supervisor Burgis stated that she wants to make sure that applicants do have an interest and a passion to participate and contribute, before she appoints a person.

IV. Chair Announcements-

- Barbara- as many of you know, Cynthia Belon has retired from her position as the Behavioral Health Services Director and Anna Roth is here to make an announcement
- Anna Roth- continued, as she herself has been recently appointed as the Director of Contra Costa Health Services (CCHS); she was previously the Chief Executive Officer for Contra Costa Regional Medical Center and all the health centers, assuming her new role as of February 1, 2018. Anna Roth recognized the previous Director of Behavioral Health Services, Cynthia Belon, for her contributions and amazing leadership. Cynthia Belon retired from her duties as Director effective March 30, 2018. Cynthia integrated three divisions and brought them together: Health,

*EA will forward completed proclamation to Supervisor Burgis' office, attention Mark Goodwin.

- Home and Homelessness (H3), Alcohol and Other Drugs (AOD) and Mental Health. It was a herculean effort and Anna recognizes all the work that Cynthia did during her employment with Contra Costa County. Anna Roth expressed well wishes for Cynthia in her retirement.
- Anna Roth- informed that CCHS is opening the recruitment, and will conduct an extensive search, for a new Behavioral Health Services (BHS) Director. CCHS will work with the Commission and obtain the Commission's input, as well as the input from employees, in the hiring process of the new Director for the Behavioral Health Services Division. It is also important to obtain the perspective, of the end users, of the systems within the division. There maybe changes, looking at the best models across the state and nationwide. During this time of transition, Anna requests patience, and allow that "due diligence" be done during the recruitment process for this important position.
- Anna Roth- In January of 2016, Dr. Ross Andelman retired as the Medical Director for Behavioral Health Services. After which, Dr. Jon Whalon served as the Interim Medical Director up to October 2017. She announced that Dr. Matthew White will be the Medical Director for the Behavioral Health Services Division, effective immediately. This will be the first, cross-divisional integrated leadership position. He will remain the Chief of Psychiatry in Psych Emergency Services (PES) and 4C, as well as in Detention Mental Health, overseeing psychiatric services, while serving as the Medical Director for the BHS division. It is recognized that the patients do not care if they are walking into a Behavioral Health clinic, or the hospital, all they care about is getting the help that they need. CCHS is very excited that Dr. White has agreed to take on this integrated leadership. In addition, Dr. White has also agreed to serve as the Interim Behavioral Health Services Division Director. He will be taking the lead of the BHS division, until a permanent Director for the division has been selected.
- Dr. White has extensive experience. He has served as the Chief Psychiatrist of PES, at CCRMC, 4C, Inpatient Psych and Miller Wellness Center; he oversees the integration piece of Behavioral Health Primary Care and Detention Mental Health Services. He has participated and led many team improvement events. He trained at UCSF, he has worked at Alta Bates and he trained in internal medicine. Dr. White went to Stanford, to do his psychiatrist internship, and worked as a pharmacologist in the depression clinic. He was also the Director of Primary care of consults, integration and outreach, before becoming the Chief Psychiatrist. There has been a lot of discussion regarding psychiatric services, the access and availability of psychiatrists, and now there will be a psychiatrist to help navigate the tasks and work towards improving psychiatric care. Dr. White's new appointments are effective immediately. Dr. White insists on continuing his clinical duties at PES.
- After recently meeting and discussing with the Executive Leadership team
 of Behavioral Health Services, CCHS and BHS are ready to look at new
 models to serve the community better. Dr. White will be approaching his
 leadership role a little bit different, because he will remain a working
 psychiatrist
- Dr. White- Appreciated his introduction. Stated that during his work as an internist, he realized that psychiatry is his passion and continues to see himself as a clinician. It is about treating the patient, providing care for those who need care. Realizes the importance of patients having access to psychiatric care, care should be seamless from PES, to the Miller-Wellness Center to the clinics. Has aided in the communication process, between the different systems, to help improve and coordinate patient care. It is important to continue to build the care, have the adequate staffing to provide the care, and that staff can do their work, efficiently, while improving care. Communication will continue to improve across all the systems of care. Requests patience during this time of transition. He looks

- forward to working with everyone. Dr. White would like to hear answers to "what is working and what is not working," from providers, stakeholders, patients and family members; and figure out how ways to move forward together.
- The MHC Chair and Commissioners welcomed and congratulated, Dr.
 White, as the new Medical Director for the Behavioral Health Services
 Division, and as the Interim Director for the same division, and will
 continue to serve as the Chief Psychiatrist for PES, 4C, Miller Wellness, the
 health centers and Detention Mental Health; and serve clinically too.
- Commissioner Sam Yoshioka asks how and when will the MHC be involved in the selection and appointment process, to obtain a new Director for BHS? Wonders what is the protocol for the MHC involvement in the selection process?
- Anna Roth will investigate the matter further. She would like to propose a process and bring the proposal to the MHC. Would also like to involve the community (patients and family members) and staff. Will meet the minimum requirements of the process, plans to exceed the requirements. The process will be lengthy, due to its level of importance. Would like to not replicate the past, would like to look across the best practice models, nationwide. Asked for consensus amongst the MHC. Attendees affirmed their agreement and will be kept informed. Leslie May provided a "praise report" of her personal experience with a family member and the Miller Wellness, appreciative of the services provided.
- President of California Association of Behavioral Health Boards and Commissions (CALBHBC), Theresa Comstock, stated that there is a mandated, state law, that involves the MHC in the selection process
- Vice Chair, Duane Chapman, requested that Theresa, as a State board member, to elaborate regarding the MHC involvement in the selection process for a Director of BHS. Is it a law that the MHC must be involved?
- Theresa affirmed that it is mandated that the MHC be part of the selection process for the new Director.
- Chair- requests that there be a recruitment process, and training provided, of new Commissioners. Proposes that it be made a goal for the MHC in 2018. Stresses the importance filling all the vacancies, to aid in obtaining consistent attendance, which is currently a problem. Many meetings have been cancelled due to a lack of quorum. Informed that Adam Down has forwarded the new bylaw of the MHC, to be reviewed by the Grants and Contracts department, that will allow the Executive Committee members to step in to form a quorum, in any standing Committee. The department will forward the change to the Health Services department, who in turn will schedule it for the Board of Supervisors ultimate approval. The process is in progress.
- Chair shared that the MHC has been invited by Jennifer Tuipulotu, the Program Coordinator of the Office of Consumer Empowerment (OCE), to participate jointly in their efforts to promote Mental Health Awareness Month in May. The OCE, would like to partner and present with the MHC to the Board of Supervisors, to present "Photo Voice". Photo Voice is a program funded by MHSA, to create art that allows consumers to express their feelings about being mentally ill and/or being in their environment. All art is created by people who have received services from the county. The exhibit of Photo Voice, named "See me for who I am," will be placed in the Art Passages Gallery, at 651 Pine Street in Martinez. The Art Passages Gallery is a project of the Arts and Culture Commission of Contra Costa County. If anyone is interested, the group meets the second Monday of every month. Twelve Photo Voice pieces will be displayed in the gallery, starting May 1, 2018. It will also include promotional pieces and "Fact or Fiction" displays, and known celebrities living with mental illness. The OCE would like to present, along with the MHC, on Tuesday May 1 at the Board of Supervisors meeting, a brief overview of the exhibit and a short PSA

- video produced by a local high school from the county. The MHC will present the proclamation for Mental Health Awareness Month, along with other remarks to the Board of Supervisors (BOS). The display will remain in the Art Passages Gallery for the entire month of May.
- Jennifer added that Photo Voice is a stigma and discrimination reduction project provided by Prevention and Early Intervention (PEI) program, a component of the Mental Health Services Act (MHSA)
- Chair continued that it is a wonderful opportunity to work together in a very meaningful way on mental health awareness.
- Field Representative, Jill Ray, asked if the MHC is working with Supervisor Burgis' office? Informed that five minutes, or less, are allowed for presentations during the BOS meeting.
- Supervisor Burgis will inform her Chief of Staff, Mark Goodwin, to follow up regarding the proclamation. Requested that the proclamation be sent to her office, after the OCE has completed it.
- Sam Yoshioka added not to forget that April is Alcohol Awareness Month and Alcohol and Other Drugs (AOD) will be presenting before the BOS their proclamation on April 10.

V. MOTION to APPROVE minutes from March 7, 2018 meeting Duane Chapman moved to motion, Mike Ward seconded the motion *no corrections needed

VOTE: 10-0-0

YAYS: Supervisor Diane Burgis, Barbara Serwin, Duane Chapman, Diana MaKieve, Mike Ward, Leslie May, Geri Stern, Sam Yoshioka, Gina Swirsding, and Lauren

NAYS: none ABSTAIN: none ABSENT: Doug Dunn, Patrick Field and Meghan Cullen

*Post final minutes to MHC website

http://cchealth.org/ mentalhealth/ mhc/agendasminutes.php

- VI. RECEIVE presentation from Theresa Comstock, President of the CA Association of Local Behavioral Health Boards and Commissions (CALBHBC) regarding:
 - 1) Statewide Mental/Behavioral Health Issues
 - 2) Resources for Boards/Commissions
 - 3) Upcoming CALBHBC meeting and Mental/Behavioral Health Board training on April 20-21 in Redwood City
 - Theresa- CALBHBC is made up of all 58 county Boards and Commission throughout the state of California. The association is here to support Commissioners, provide resources, training and aware that each county wants to make a difference in their communities. CALBHBC creates opportunities, for statewide advocacy. CALBHBC wants to listen to each county and hear about the issues in Contra Costa County.
 - Handed out flyers, the same as the ones included in the meeting packet. Referred to the back of the newsletter, where it states, "The Duties of Boards and Commissions". Decided to discuss this area because one of the duties was raised in the previous conversation regarding the hiring of the next Behavioral Health Director; "duty number six states reviews and recommends applicants for the appointment of a local Director for Behavioral/Mental Health Services. The Board/Commission shall be included in the selection prior to the vote of the governing body appointment. A lot of the Boards will decide which member(s) will be part of the interview process and looking at applications. Encouraged the MHC to figure out how to become involved and part of the process, since the input of the MHC is critical. CALBHBC has noticed that around the state, there is a huge turnover of in Behavioral/Mental Health Directors. It is important to be part of the process and it is a mandate for Boards and Commissions, they need to be taught that they have that right, it is a part of what Commissions do. The duties are always listed on the back of every newsletter. Another duty is to advise and partner with the Behavioral Health Director and the Board of Supervisors, on what are the mental health issues are within your community. Another duty is to complete and

- *see attachments from CALBHBC
- *for additional information, visit website at: http://www.calbhbc.com/
- *Lauren Rettagliata will forward a copy of the template and a copy in report form of the Program and Fiscal Review Report, to Theresa Comstock
- *Theresa Comstock will follow up with MHOSAC regarding the Program and Fiscal Review Report tool
- *Theresa will follow up regarding possible funding for children's crisis residential facility

submit the Annual Report to your Board of Supervisors and submit the Data Notebook to the Statewide Commissions and Planning Council annually. There is additional information on the website at: http://www.calbhbc.com/. Annual Reports from different counties are posted on the website for public viewing, along with other useful resources, including the Data Notebooks, the compiled version. It is a good way to identify what are the issues and gaps. The newsletter is sent out electronically, to the administrative liaison, the Behavioral Health Director and the Chair of the Board/Commission and ask to forward to the rest of its members. A summary of the MHSA is provided in the newsletter. Online training modules are offered to those who are interested.

- Invited members to attend a very important meeting on April 20, and on April 21 there will be a Mental Health Board/Commission training in Redwood City. There are no members from Contra Costa County that have confirmed their attendance. It would be good for one or more members, and the Director, from the County to attend. Attendance is important to receive information from other counties and give information from your county. Encourages and extends invitation including payment for one overnight stay at a local hotel. CIBHS, whom provides the training, will pay for an additional person's overnight stay at a hotel. CALBHBC will also pay for travel expenses, mileage. Please register through the website as soon as possible. If more than one or two people wish to attend, they can pay for lunch for everyone, but cannot pay for a hotel stay for everyone, only one or two people.
- Due to recent statewide tragic events, for example, the various fires that affected people throughout the state, anticipating that there will be more people needing mental health services.
- There will be attendees from the MHSOAC, Mental Health Services Oversight and Accountability Commission, they will discuss their fiscal tool, there is a link on the CALBHBC website. How to look at your county's spending by following six components and decipher where your county is at, according to funding and spending. Encourages to read the State Auditor's Report, counties are not spending and drawing down their MHSA funds and will be reverted if not utilized.
- On Saturday, April 21 the training will be provided by Susan Wilson. Susan
 has taken on a lot of leadership throughout the state, regarding mental
 health. She will discuss the role of the Mental Health Boards/Commission
 and members. How to do issue specific advocacy, as a Board; she will also
 cover the Bylaws and the Brown Act Regulations and how to represent
 yourself together, as a Board/Commission.
- Lauren participated in a statewide conference call and noted how simple and easy it was to participate. She also attended a conference in Woodland, near Sacramento, regarding adult mental health. Noted that the MHC will be forwarding to the MHSOAC, the Program and Fiscal Review, created by the MHC, as a tool. Warren Hayes is the Program Manager that coordinates the team that goes out and conducts the reports for the MHSA funded programs. The state needs to see this tool, it has been delivered twice to the MHSOAC and to the Hoover Commission. Will forward a copy to Theresa, of CALBHBC, so that the organization has a copy of the template and a copy in the report form. We are very proud of the work that has been done by the CCCMHC. It does help identify gaps and areas of improvement in programs and helps maintain standards, if not maintained then the MHC can take a deeper dive into the issues identified in the Program and Fiscal Review Report.
- Theresa continued to inform that a paper was finally completed by the California Planning Council, which reports to the State Legislature, stressing the critical needs throughout the state for board and cares for adults for mental illness. The document is 26 pages, a summary is provided on the website. There is an insufficient amount of housing and long-term

care and patients are spiraling back into acute care or recidivism in jails. The costs to the county and the state for revolving individuals is very high. More advocacy is needed, and the solutions are very costly, other sources are needed to be allocated to meet the housing needs and help decrease recidivism. Licensing requirements need to be restructured. Patients are only receiving Medi-Care and that is it, which doesn't cover the care costs. This causes board and cares to close or offer poor services to minimize costs. Changing the structure will need to look at patients with developmental disabilities, these patients can draw up to \$7000 per month, that amount makes it possible to pay for patient care. Also, looking into Social Security supplemental income, to help cover costs. The amount that patients are currently receiving for care costs, places a huge burden on the county. More board and cares are needed for placements.

- Another issue is employment for mental health patients. IPS is Individual Placement and Support it allows a collaboration between the Department of Rehabilitation, the Mental Health Division and the drawing of Medi-Cal dollars so these programs can be put in place to help patients obtain employment and trained in job skills. Alameda County has fully implemented the program, employing over 50%, statewide the employment rate for seriously mentally ill is only at 10%. Alameda has created a program, within their Behavioral Health Division, for vocational services for mentally ill adults and has a Vocational Director that oversees the program.
- Peer Provider Certification, SB906, that has created a lot of support in Sacramento.
- Finding psychiatrists is an issue throughout the state, as it is for Contra Costa County, as well as housing.
- Commissioner asked if Consumers serve on CALBHBC?
- CALBHBC as a statewide association and a nonprofit, diversity is a priority and want consumers on the board if they can commit to attending the meetings on a consistent basis and contribute towards a change.
- Sam-Contra Costa County is the 9th highest in population with one million people, in the original plan, it included for recovery the Miller Wellness Center. Included in the facility for both children and adult crisis residential. Contra Costa went ahead with the adult portion but left the children's behind. I would like your opinion regarding a county this population size, whether it makes sense to pursue the children's residential and crisis residential facility? Also, look at psychiatric care facility for a county with a million people.
- Theresa-believes that there may be, grant funds that are available from MHSOAC for crisis residential for children, will investigate the matter further and respond via email.
- Thanked everyone for being Commission members and caring about their community. It takes a lot of time and hard work to volunteer on the Commission and CALBHBC is available to provide support to Boards and Commissions across the state.

VII. SELECT a co-chair for the April 20, 2018 Assisted Outpatient Treatment (AOT) Workgroup Meeting, Warren Hayes, MHSA Program Manager

- Lauren moves to motion that Charles Madison President of National Alliance for Mental Illness (NAMI), to serve on behalf of the MHC, as the next co-chair for AOT. Gina seconded the motion. Chair called to vote
- Sam requested a discussion, prior to voting, stating that Mr. Madison is not a Commission member and that the co-chair of the AOT Workgroup needs to be a Commission member
- Lauren stated that it is agreed that one Chair will be from the County and the other would be appointed by the MHC and can present. Doug agrees and stated furthermore at the last meeting a community member was the co-Chair
- It was noted that a task force created the process and it was agreed that a

*Douglas Dunn will co-Chair the AOT meeting on April 20

MHC member and an AOT member, (which was the case of the previous co-Chair), are to partner and co-Chair the AOT quarterly meetings. The original parameters of the process need to be adhered to and checked to see if the MHC can appoint who is not a Commission member.

- Supervisor Burgis requested that the original document be reviewed, before deciding
- Warren stated that the co-Chair serving for the AOT side, is Ronnie Potts and is waiting for MHC to name their co-Chair, to arrange a meeting next week with both co-Chairs and develop an agenda for the April 20 meeting
- The Chair made a request for a Commissioner to volunteer to co-Chair- no response was received
- Lauren requested to continue the vote, since a motion was made and seconded, to move forward
- The Chair agreed to move forward and vote
- VOTE: YAYS- Supervisor Burgis, Barbara Serwin, Lauren Rettagliata, Douglas Dunn and Gina Swirsding
- Diana MaKieve- stated that she did not want to vote without knowing the parameters
- Supervisor Burgis- stated that there could be a vote to appoint and if there is a member that will volunteer to co-Chair, then that person will serve
- Jill did look up the original document online. The document states that a Behavioral Health Staff will co-chair and a member of the Mental Health Commission will co-Chair and both will facilitate the AOT meeting
- Chair- since it must be a member of the Commission, who will volunteer?
- Douglas Dunn volunteered to co-Chair the AOT meeting
- Douglas Dunn MOTIONS to volunteer as the co-Chair of the next AOT meeting on April 20, Gina Swirsding seconds the motions
- VOTE: 11-0-0 YAYS: Supervisor Burgis, Barbara Serwin, Duane Chapman, Douglas Dunn, Gina Swirsding, Sam Yoshioka, Mike Ward, Geri Stern, Diana MaKieve, Lauren Rettagliata and Leslie May NAYS: none ABSTAIN: none ABSENT: Patrick Field and Meghan Cullen

VIII. RECEIVE updates from Matthew Luu, Deputy Director of Behavioral Health Services

- Matthew provided updates- Vern Wallace, Program Chief for Children and adolescents, retired as of January 31 of 2018. BHS has been working with CCCHS to recruit candidates to fill the position. The acceptance of applications has ended and hopefully within the next 30 days, a panel will be assigned to start the interviewing process
- In 2017, BHS division participated in the triennial audit. There are two parts to the audit: one is the inpatient review audit, which was assisted by Dr. White and Shelly Whalon, the results have not been obtained by the State; and the second part is the outpatient audit. The preliminary finding and the division was given the opportunity to review the finding and assert corrections or provide additional documents. Two scores were obtained by the preliminary findings of the outpatient audit and they were as follows: the Systems Review Score (Systems Review Score includes Access Line, timeliness, patients receiving appointments) the division received a score of 90 out of 100 and a 95 score was achieved as the Chart Review Score (doctors, clinicians and nurses charting information in the patient's file). There were four to five items that were appealed by the division and they were overturned by the State audit. Therefore, the division did receive a higher score in the Systems Review
- In January, the division participated in the annual audit, by the External Quality Review Organization (EQRO- State auditors), which the MHC was invited to participate in and Lauren and Barbara were present. The state has hired a vendor called Behavioral Health Concepts, to audit all the counties to conduct surveys and look at each county's system, to look for where improvements are needed. EQRO sent us a preliminary result and gives the division 30 days to review

of the Geo-mapping be provided to the MHC

*Matthew will request a summary

- the findings and providing supporting documentation for clarification, before Behavioral Health Concepts finalizes their report and submits for public record.
- The third item that the division is scored on, and recently added, is called "Network Adequacy Standards". This entails the number of contracts with providers, Community Based Organizations (CBO's) to serve all the consumers in Contra Costa County. There are approximately 16,000 unduplicated consumers that are served by the County. The state requires the division to create a Geo-mapping locating all the clinics, CBO's and providers, in relation to where the consumers live, to see if the location of the services matches where the consumers live. The state will indicate to the county, what areas are lacking services. Looking at every aspect of serving each consumer. It was a massive undertaking to complete and was completed and submitted to the state on March 30. The state has 90 days to provide feedback.
- Vice Chair, Duane request a copy for the MHC; the Chair agrees
- Matthew will request the Program Manager, Priscilla Aguirre to provide a summary for the MHC. This new requirement will be ongoing and is to be updated, quarterly. The state has not yet clarified how they will be using the data and when the information will be published for the public.
- Geri- the BHS division is gathering all this information for the state and federal government to identify the gaps in staffing, what will the government do with the findings, will the county be penalized?
- Matthew-each county must abide by the standards provided by the federal government. If the county is not meeting the standard, then a proposed alternative standard is submitted for consideration. An example is the lack of available psychiatrists in East County, the State requires for the county to find an alternative solution to the problem. The county has started to utilize Tele-psychiatry, where a patient is seen by a nurse, a case manager and a psychiatrist using Tele-psychiatry. The patient can ask questions using the monitor and obtain prescriptions, while the psychiatrist is in another county. The services are still being rendered. Tele-psychiatry is an interim plan, while the county continues to recruit to hire full-time psychiatrists, providing an option to provide service and fill in gaps where needed. Dr. Samir Shah is aiding in recruiting psychiatrists
- Anna Roth- added that Tele-psychiatry is an additional way of providing services. Virtual options are needed, not to eliminate the positions, to provide additional services for those patients with transportation and/or disability issues. Psychiatrists will continue to see patients and do Telepsychiatry; they will do both, to facilitate appointments and be more efficient.
- Tele-psychiatry was implemented in East County, and started on March 14 with Dr. Terry, full-time. Dr. Barnes will start, part-time in East County on April 16. The third psychiatrist will be Dr. Putziger, once credentials have been cleared and confirmed, also for East County, hopefully starting in May. All previously mentioned are for Tele-psychiatry in East County.
- For the West County Children's services clinic, Dr. Zakee Matthews, will start working in the clinic full-time, on May 23, providing in person care.
 Dr. Lee may return to work for the County, to serve the Central County Children's clinic. Happy to report that things are continuing to improve.

IX. RECEIVE a presentation of the first DRAFT MHSA Three Year Plan Update for 2018-19, Warren Hayes, MHSA Program Manager

- This is the first draft of the introduction of the MHSA Program and Expenditure Plan, since it is a draft, there is approximately 60 days available to discuss the plan further and provide comments, prior to submitting the finalized plan in June.
- A public hearing will be held at the June Mental Health Commission meeting, where the finalized plan will be presented
- Four documents have been provided for public viewing, including the

* See attachments

FINAL MINUTE	S APPROVED 5/2/18	
XIII.	Adjourned Meeting @6:32pm	
	1) AOD Advisory Board- Sam Yoshioka – 2) CPAW General meeting-Douglas Dunn- 3) Council on Homelessness- 4) Detention Rapid Improvement Event-Barbara Serwin	May 2
XII.	Services six-month updatesBarbara Serwin, Chair, MHC and Lauren Rettagliata, Chair, MHSA/Finance Committee RECEIVE Commission liaison reports:	*Forwarded to the next meeting on
	116 reports presented at the Board of Supervisors' Family and Human Services Committee meeting, 10/30/17. DISCUSS Behavioral Health	
Ai.	Costa County Mental Health Commission Response to Behavioral Health Services Update to Grand Jury Report No. 1703 and Referrals 115 and	May 2
XI.	and/or who pose harm to self/others at the scene of a call for an involuntary hospitalization (5150) – Lauren Rettagliata, MHC Finance Chair Continued from March 7 th full Commission meeting: REVIEW the <i>Contra</i>	*Forwarded to the next meeting on
X.	DISCUSS proposal to advocate to law enforcement for always requiring a medical evaluation at PES of people when they possess a weapon	* Forwarded to the next meeting on May 2
•	The MHSA team has moved, please make note of the new address and phone numbers, presented in the Power Point. The email address remains the same. Contact Warren Hayes for further questions and discussion.	
_	additional public comments will be considered	
•	on May 20. All comments will receive a response. Public comments will not be considered beyond this date. The Public Hearing will be held on June 6, during the MHC meeting. No	
•	Both programs mentioned above, will be part of the spend down Will posts the 30-day time frame for public comments, by April 20, ending	
•	A loan repayment program is in place to offer recruits for student loan debt	
•	A new program will be added, First Hope, a crisis residential facility for youth	
•	EPIC system. All 51 Program and Fiscal Review Reports have been completed	
	at all clinics and is currently in the optimization phase, make it more user friendly. The next step will be to connect the contracted providers into the	
•	The Electronic Record Systems (EPIC) has been installed and implemented	
	three main areas of the County: West, Central and East. Community participants comments and requests for services are documented and included in the plan. The numbers are comprehensive	
•	The plan is driven by the Community Planning Process, conducted in all	
•	The changes that were made to the plan, are stated in the introduction of the draft.	
•	Both the plan update will be provided, along with the spending plan for the unspent funds, to Board of Supervisors for approval	
	the next three years, to complete the budget. There is an amount of reserve that needs to be kept, per year, in unspent funds.	
•	There is an approximate amount of \$51 million of unspent funds and there is a plan in place to spend approximately \$6 million dollars per year, over	
•	No changes are recommended, for the approved budget authority, which is approximately \$55 million for the fiscal year 2018-19	
•	Expenditure Plan, through 2020 As required, the plan is to be updated and approved for 2018-2019	
•	In June of 2017, the Board of Supervisors approved the Three-Year MHSA	
•	Power Point presentation Will highlight the most pertinent information	
	Power Point presentation	