



### CONTRA COSTA MENTAL HEALTH COMMISSION

1220 Morello Ave., Suite 100 Martinez, CA 94553

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Current (2020) Members of the Contra Costa County Mental Health Commission

Barbara Serwin, District II (Chair); Leslie May, District V(Vice Chair); Supervisor Diane Burgis, BOS Representative, District III; John Kincaid, District II; Joe Metro, District V; Douglas Dunn, District III; Graham Wiseman, District II; Geri Stern, District I; Gina Swirsding, District I; Sam Yoshioka, District IV; Katie Lewis, District I; Kira Monterrey, District III; Alana Russaw, District IV; Laura Griffin, District V; Candace Andersen, Alternate BOS Representative for District II

#### **Mental Health Commission (MHC)**

Wednesday, September 2<sup>nd</sup>, 2020 ◊ 4:30pm-6:30pm **VIA: Zoom Teleconference:** 

https://cchealth.zoom.us/j/6094136195
Meeting number: 609 413 6195
Join by phone:
1 646 518 9805 US

Access code: 609 413 6195

- I. Call to Order/Introductions
- **II.** Public Comments
- **III.** Commissioner Comments
- IV. Chair Comments/Announcements
- V. APPROVE August 5th, 2020 Meeting Minutes
- VI. RECEIVE presentation on Contra Costa County voting operations by Scott Konopasek, Assistant Registrar for Voters, County Clerk's Office AND DISCUSS needs that people with a serious mental illness have for voting support (20 minutes)
- VII. RECEIVE presentation on the San Francisco Comprehensive Crisis Services program, Stephanie Felder, Director, Comprehensive Crisis Services, San Francisco Department of Public Health (15 minutes)
- VIII. RECEIVE presentation on the Contra Costa County Mobile Crisis Response Team (MCRT), Marie Scannell (Program Manager) and/or Natalie Dimidjian (Program Supervisor) of the Forensic Mental Health Services, Contra Costa Adult Mental Health (15 minutes)

### (Agenda continued on Page Two)



The Contra Costa County Mental Health Commission is appointed by the Board of Supervisors to advise them on all matters related to the county's mental health system, in accordance with mandates set forth in the California State Welfare & Institutions Code, Sections 5604 (a)(1)-5605.5. Any comments or recommendations made by the Mental Health Commission or its individual members do not represent the official position of the county or any of its officers. The Commission is pleased to make special accommodations, if needed, please call ahead at (925) 957-2619 to arrange.



### **Mental Health Commission (MHC)**

(Mental Health Commission Agenda, September 3, 2020 - Page Two)

- IX. DISCUSS alternative models and funding for community crisis response being proposed by county local communities, Director of Behavioral Health Services, Dr. Suzanne Tavano (15 minutes)
- X. DISCUSS Mental Health Commission analysis of the Mental Health Services Act (MHSA) 2020-2023 Three Year Plan budget as a precursor to the Plan Public Hearing, Barbara Serwin, Commissioner and Chair, and Douglas Dunn, Commissioner and Chair of the MHSA-Finance Committee (15 minutes)
- XI. RECEIVE Director of Behavioral Health Services report, Dr. Suzanne Tavano (15 minutes)
- XII. Adjourn

## KNOW WHEN TO CALL

### **CONTACT US**

# MCRT

### **WHEN TO CALL 911**

- · Someone is in immediate danger
- In the act of attempting suicide
- Physically assaulting someone else
- Threatening with a weapon
- Appears to have a medical emergency

### WHEN TO CALL MCRT

- Behavior is escalating, but no immediate danger
- Threatening suicide or severely depressed
- Verbally threatening someone else
- Throwing objects or hitting furniture or walls
- Could become a danger to themselves or others
- You are a member of a community impacted by a recent traumatic event

### **ADULTS**

For crisis response services for adults, call 1-833-443-2672.

### **MINORS**

For crisis response services for minors (17 and younger), call Seneca MRT 1-877-441-1089.



### CONTRA COSTA MOBILE CRISIS RESPONSE TEAM

Contra Costa Behavioral Health Services

Mental health crisis intervention at your location









June 2019



## WHAT DOES MCRT DO?

## HOW DOES IT WORK?

### **ABOUT US**

The Mobile Crisis Response Team (MCRT) provides professional, same-day intervention for adults who are experiencing mental health crises and to communities impacted by traumatic events.

MCRT includes licensed mental health clinicians, community support workers, and a family nurse practitioner employed by Contra Costa Behavioral Health Services (BHS).

The team visits clients, families, and/or significant support persons to prevent acute psychiatric crises resulting in involuntary hospitalizations.

We are also available to provide traumatic grief counseling and support.

The goal is to de-escalate the crisis and connect the client to mental health resources.

MCRT responds to all calls involving adults in Contra Costa County that need crisis intervention in the community. We provide crisis intervention and support to stabilize the situation.

If needed, MCRT can initiate an involuntary psychiatric hold as per Section 5150 of the California Welfare & Institutions Code.

### WHEN WILL MCRT ARRIVE?

**MCRT does not provide emergency response.** Arrival time depends on the availability of staff and the details of the situation.

When you call, a team member will let you know an estimated time of arrival.

If you, or someone you know, are experiencing a mental health crisis, call 1-833-443-2672.

A team member will receive calls Monday to Friday 8a.m.–10:30p.m., and Saturday and Sunday 8:30a.m. –5p.m. If we cannot answer your call immediately, leave a message including your name and number. We will return your call as soon as possible.

Depending on the need, a crisis trained licensed clinician and community support worker may go to your location. The team will try to stabilize the situation and provide appropriate services and resources.

MCRT works closely with local law enforcement (for the purpose of safety) and may bring police to the location, depending on staff's assessment of safety needs.



### **CCBHS Budget Summary Analysis:**

2020-2023 3 Year Plan, 1991 & 2011 Realignment, & Federal Financial Participation (Medi-Cal) Match

### MHSA: 2020-2023: Proposed 03/2020 vs. Likely Revised

Sources: Comparing March 2020, MHSA DRAFT 3 Year Expenditure & Plan to 2019-2020 MHSA Plan Update

### **Key COVID-19 Spending and Issue areas:**

### **Community Services & Supports (CSS)**

MHSA Funded Housing Supports: P. 34: 2020-2021: \$10.294M vs. 2019-2020: \$7.179M; Allocation detail provided on P. 34 is very inadequate. Must have Allocation Detail like provided on Page 44 of MHSA 201-2020 Plan Update, especially for Board and Care Facilities

County EPDST Expansion: P. 47: 2020-2021: \$800K vs. 2019-2020: \$2.5M NOTE: Because of COVID-19, the \$1.7M or so Est. Federal Financial Participation (FFP) Reimbursement "return" to the MHSA fund has not occurred. With the financial effect of COVID-19, how will this effect the Revised 2020-2023 MHSA Three year plan budget for other funded MHSA programs?

Mobil Crisis Response Team (MCRT): P. 39: 2020-2021: \$1.7M vs. 2019-2020: \$1.405M. Is the additional \$700K the extent of additional MHSA funding? How would collaborative "opt in" private insurance and local city police departments work in funding MCRT? What about major MCRT restructure to include the CAHOOTS as well as PERT models of responding to persons in mental health distress?

### <u>Prevention & Early Intervention (PEI)</u>

NOTE: P. 44: Need the level of demographic detail provided on P. 54 of the 2019-2020 Plan Update.

Apparently, no further additional PEI 2020-2023 Three Year Plan funding

#### Innovation (INN): apparently no additional funding for either CORE or CBSST

Workforce Education & Training (WET): P. 60. Apparenty, no additional WET spending.

### <u>Capital Facilities (CF)/Information Technology (IT):</u> PP. 65 & 66 <u>Capital Facilities</u>

 Oak Grove & STRTP Project: 2020-2021—Apparently taken out of the budget but trying to retain the Oak Grove property for No Place Like Home (NPLH) bid opportunities for adolescent permanent supportive housing, correct?

#### **Information Technology**

• Electronic Mental Health Data Management System: \$1.5M. 2020-2021: \$500K budgeted. Project withdrawn?

**The Budget:** PP. 67-69: Recommend transferring \$4.4M in Unspent Funds in 2020-2021 to quickly reach the allowed 33% CCS Prudent Reserve level and maintain it through 6/30/2023 unless stakeholders vote differently. State legislators (AB 2576) are looking to grab every "widows mite" of MHSA unspent funds they possibly can in this profound COVID-19 budget crunch era.

- MHSA Unspent Funds: \$49M projected as of 6/30/2020. Actually that? Propose to spend \$5-\$7M annually to shore up normally community Realignment funded programs to maintain the \$ for \$ FFP (Medi-Cal) match? If so, which programs? The MHC MHSA Finance Committee needs the latest available basic 1991 & 2011 Realignment & FFP budget data, including impact if further federal stimulus aid is NOT forthcoming.
- IMD classified locked facilities—will 1991 Realignment dollars be spent for these purposes in COVID-19 budget crunch times? Will CCBHS, CCRMC 4C, and the Public Guardian dept. stop filing for LPS T-Con and Renewable Conservatorships?