

**MENTAL HEALTH EXECUTIVE COMMITTEE  
MONTHLY MEETING MINUTES  
August 24, 2021 - FINAL**

Agenda Item / Discussion	Action /Follow-Up
<p><b>I. Call to Order / Introductions</b> Chair, Cmsr. G. Wiseman, called the meeting to order @ 3:35 pm</p> <p><u>Members Present:</u> Chair, Graham Wiseman, District II Vice-Chair, Cmsr. B. Serwin, District II Cmsr. Laura Griffin, District V Cmsr. Leslie May, District V</p> <p><u>Other Attendees:</u> Cmsr. Douglas Dunn, District III Cmsr. Kathy Maibaum, District IV Cmsr. Michael Hudson, District IV Angela Beck Jennifer Bruggeman Jen Quallick (Supv. Andersen’s Office)</p>	<p>Meeting was held via Zoom platform</p>
<p><b>II. PUBLIC COMMENTS: None</b></p>	
<p><b>III. COMMISSIONERS COMMENTS: None</b></p>	
<p><b>IV. COMMITTEE CHAIR ANNOUNCEMENTS/COMMENTS:</b> We had hoped to escape the online world we have all lived in for the past year, but it doesn’t look like that is going to happen anytime soon. Until further notice, we are sticking with our Zoom platform.</p>	
<p><b>V. APPROVE minutes from July 27, 2021, meeting:</b></p> <ul style="list-style-type: none"> <li>• L. May motioned to approve the minutes as written.</li> <li>• Seconded by L. Griffin</li> </ul> <p><b>Vote:</b> 4-0-0 <b>Ayes:</b> G. Wiseman (Chair), B. Serwin (Vice-Chair), L. Griffin, L. May <b>Abstain:</b> none</p>	<p><a href="http://cchealth.org/mentalhealth/mhc/agendas-minutes.php">http://cchealth.org/mentalhealth/mhc/agendas-minutes.php</a></p>
<p><b>VI. DISCUSS MHC Retreat and proposed attendee preparation, including Zoom format, theme, activities, technical and facilitation support:</b> As mentioned in the chair announcements, we have made a decision to hold the retreat online. There are no facilities available for in person meetings due to COVID Protocol re-instated, we will need to use the Zoom format. Format and design for the Retreat, the Chair/Vice-Chair have been brainstorming how this will flow. Much of the input received from commissioners and CBOs has been taken into this planning and development. Mainly, we will discuss the rough format of having three portions of the meeting: first being ‘Reflection’; second ‘Recovery’; and the third ‘Reimagining’.</p>	

(Cmsr. Serwin) I can share the agenda we have been working on.

<screenshare introductory draft>

There will be a welcome and introductions. Then we move to ask ourselves: Why a retreat? Why are we here? What are our objectives?

We then provide an overview of our themes of the retreat:

- **Reflection:** How did COVID itself affect our community of clients, family members and healthcare providers? How did the system change? How did this altered system affect us all? What were the positive outcomes? What were the negative outcomes? What broke and what got stronger? What did we lose and what did we gain?
- **Recovery:** What are the new realities? What is the new norm? What is here to stay? How do we realign ourselves to the new norm? What needs to be fixed? What are the priorities? We need to take stock of our strengths and how we can use them. What are our opportunities to be stronger and better than before?
- **Reimagining:** What is our reimagined vision of our behavioral healthcare system? What are the services, goals and metrics of this system? What are the key steps toward this reimagined world?

We will have an icebreaker and an overview of how the rest of the retreat will unfold and then move into the core of it. These are themes that interspersed in here are discussions of actual services that we are delivering and specific problems we are having. Those are the things we need to narrow down. This will be the mode of reflection we are taking.

(Cmsr. G. Wiseman) One of the things at the bottom would be a list of action items. What do we want to act upon? My hope for our retreat is that we come together as a commission, identify what we really as a group feel passionately about and work together on that. Also, what we feel passionately about as individuals. I know we talked about “What is an advocate? How do you advocate?” I hope that becomes part of the discussion, as well. Defining what we do and how we do that.

#### **Commissioner Comments:**

- (Cmsr. L. May) I just had a very bright idea on ‘Reflection’. Each commissioner lists three to five things to reflect on. I would also love to see is feedback from the behavioral health services. (Not the ‘big wigs’) Those working in BHS such as: MH clinical specialists, advocates in different positions and have them answer three questions to get a variety. For example, five people from in the public that literally work with the public in the clinics from throughout the county and in the hospital, in order to see how far off ours is. I feel that would be great to include feedback from them. I saw a presentation where they had a picture with post-its and people were able to put their responses. Then we could go through those post-its. I think it would be interesting to see, not only how it affected us, but those working with the clients in lived experience.
- (Cmsr. G. Wiseman) Those are two great suggestions. Wondering about the availability of county employees. Ms. Bruggeman, if you could comment? Maybe, instead of calling people in, we ask them, perhaps send out a brief survey to get feedback? Cmsr. May, would you want it to be in person? (Cmsr. May) It would be good to do a survey, but what if we send out an invitation to attend? (Cmsr. Serwin) We have had

staff invited in the past. We worked with BHS to come up with a list of participants and did have cross section of people. My only concern now is because of COVID, people seem a little more difficult to schedule the time, as we are all busy. I am hopeful that BHS staff can join us. I feel it will be really valuable.

- (Cmsr. May) We should select at least four employees, send the survey and invite them and let them know we really value their input and opinions. We want to see how this all has affected them. County and a few from the various agencies funded with MHSA funding. We should invite as many as would like to come but ask them to just speak on this survey (quick guest speakers).
- (Jennifer Bruggeman) I think it is a great idea to try to garner input from folks actually working in the clinics and directly working with those in the community. That is a great thought. I am just wondering, it certainly wouldn't hurt invite folks, but it does roll into the evening past normal working hours, not that people wouldn't want to participate but there may be some conflicts family, business, etc. I think a survey is a really good idea, as it could be completed in a few minutes. We utilize surveys quite a bit to get input from a broader cross-section of folks because you can do it through survey monkey and people are able to complete and you can get some good information. I would try a two-pronged approach – the survey, as well as inviting some folks.
- (Cmsr. Dunn) Should we invite detention mental health staff? I personally think so, they have had to reimagine their service delivery in this COVID environment. What will this mean for them going forward? They are a part of mental healthcare within this county.
- (Cmsr. G. Wiseman) That is a great idea, the more inclusive we can be from different perspectives, the better we will have an idea of what is actually going on the county. **All commissioners: If anyone has specific individuals you want to ensure are invited, please forward those to Ms. Beck so we can build our invitation list.** This goes for everyone, if there are individuals you think would be a wonderful addition or someone's input that would be extremely valuable to hear, let's make sure we get them on the invitation list.

Dr. Tavano had given a Town Hall presentation with Congressman DeSaulnier and was kind enough to pass along to me. She had said some things that affects us all. I'll just summarize some of the information on the slides and I will forward this to Ms. Beck so it is available for us.

- What has happened with COVID – children having been left unattended because clients had to go to meetings, less face time, more complex issues to overcome, and those in recovery homes had no visitors, staff shortages and also staffing re-purposed to work on COVID aspects, increases in DUIs, relapses, the phenomenon of online sales where juveniles can purchase alcohol or other drugs and have them delivered to their home, use of fentanyl is up. These were some things she referred to. For kids, we had increased referrals, school closures, increased anxiety and depression with reduced support and less healthcare workers. She referenced, pre-pandemic, they were getting 2,993 calls per month on the access line. The second year of the pandemic, it has gone up to 5,300 per month. There has been a lot of people reaching out for

help and hope. How has the county been dealing with this, because this not how the system was designed? I was really glad to see her point out some of the real struggles that BHS has gone through. Especially that COVID is a physical health issue, yet our behavioral health has been pulled over to work on this. As far as the outline for the mental health retreat, is there additional input?

- (Cmsr. May) I was at that meeting as well. Those were the points brought up. In terms of us and the breakdown, in terms of – back to ‘Reflection, Recovery and Reimagining’ I personally do not want to hear from the administrators. We have heard from them enough. I want to hear from the people that are actually doing the work with the clients and families. Clinicians, Correctional officers, and others do a survey on how they would reimagine their jobs under a new vision of the behavioral healthcare system in the community and in the detention facilities. Both in detention mental health and in the hospital settings (PES, 4C, 4D, other clinics and agencies). Same with recovery. The same survey questions be put forth to more staff and us. We keep inviting administrators and to me, that is defeating the purpose. I want to hear what the people doing the work are saying.
- (Cmsr. Wiseman) Given we only have three hours, I’m hoping a lot of these questions, if we work with the county and develop some good questions for the survey, I am hoping those can be combined and brought out. So, instead of having to hear from multiple different people, we can have a summary of what people in this district are commenting on that we should be aware of. I really like that idea and hoping other commissioners support that concept and let’s get a good, well intended survey out there. With Ms. Bruggeman’s cooperation we can push that out and really get some good input. I do, want to get some administration input, especially regarding a conversation I had with Dr. Tavano on accountability for budget and how there seems to be a substantial change coming from the state on CBOs are funded and how they are held accountable, which is different than in the past. Ms. Bruggeman, do you think that would perhaps be a topic for Matthew Luu? Is that someone who could speak succinctly to that point as we go forward?
- (Jennifer Bruggeman) There are some changes in terms of contracts. There are a couple things, changes the way they are structured with this whole CalAIM effort. I think Matthew Luu would be a good person to speak to that. He is pretty involved in that and simultaneously, we are working through the county BHS is working with a contractor to advise on how we can better structure all our contracts so they are more streamlined and more aligned with each other to create a bit more consistent accountability. There is also a new gentleman, Christopher Pedraza, who is the contract expert.
- (Cmsr. May) Whatever speakers we have, I am officially requesting that the speaker is reflective of the community we serve in terms of race. We need to really take that into perspective, because if we are going to outside speakers and inviting the public, I want those attending from the public to see that there are people representative of them too. They are different races and socio-economic status. I think there needs to be a diverse group of people this time.

<ul style="list-style-type: none"> <li>(Cmsr. G. Wiseman) Great and noted. Moving on to the retreat framework, the Reflection-how it has affected us each and share that and the Recovery is the part I would actually hope to leave the most time for. For us to have gathered information, processed it a bit and come together as a commission and state ‘this is where we want behavioral health in our county to go.’ Any way you would like to strengthen or add? Please share now or by email. Let us know what you would like as a commissioner. Each of has a strong voice here. If we combine these voices, and become a chorus, we can really make some improvements that we hear about. Thank you, Cmsr. May.</li> </ul>	
<p><b>VII. UPDATE on Site Visit assignments, schedule of Site Visits, training in September, and Zoom format</b></p> <p>(Cmsr. B. Serwin) The Quality of Care committee is overseeing the Site Visit Program.</p> <ul style="list-style-type: none"> <li>(Angela Beck) The first site to be visited is going to be with Blessed Care home, in Pittsburg. Commissioner Wiseman and Russaw are assigned with Commissioner May as the ‘mentor’. This needs to be scheduled as there is a minimum amount of time before hand that we need to announce and post to let the clients know we will be conducting the site visit. We need some dates for the commissioners that are assigned to schedule when they are available. (Cmsr. L. May) My concern with this, when we have the one sign up, we need to be consistent and not contact Ms. Beck later on and say they are unable to participate. These are planned out and coordinate with multiple individual schedules.</li> </ul> <p><b>Questions and Comments:</b></p> <ul style="list-style-type: none"> <li>(Cmsr. G. Wiseman) Quality of Care and the Site Visit team has really made it clear to all of us how important it is to conduct this and hoping we have more signed up than needed. (Angela Beck) We do have everyone set up on their assignments and the sites for each month. I sent the email out so everyone is aware of the sites they are assigned to and the month. There is a lot of planning and coordinating because of the sites, getting volunteer to be interviewed and we have to ensure there is no cancellation. I think we will need to conduct via Zoom. It makes it a bit easier, but one of the things we encountered was Mondays and Fridays are not good days because of Zoom traffic and connectivity issues (esp Monday mornings and Friday afternoons). Just to keep that in mind moving forward.</li> <li>(Cmsr. G. Wiseman) Are we fulfilling our requirement by having a zoom visit vs in person? (Cmsr. Serwin) We are doing the best we can, bottom line. We are restricted by COVID regulations. The physical site is one aspect of it, but it is one of many. There is nothing to prevent us from circling back once COVID is lifted to do just that site physical review (a walk-thru).</li> <li>(Cmsr. L. May) I was researching the state commission website to ensure we are doing what is required. When I looked, a lot of the state and county offices are not sending out anyone for inspections unless it a Level V, not sure what a Level 5 is, but must be a very serious allegation. I was pumped to go into these places.</li> <li>(Angela Beck) There is also a link Commissioner May sent to us in order to log in and review complaints. One of the steps in getting prepared</li> </ul>	

for these site visits is for the assigned commissioners, this is one of the steps to be included: to review any complaints (past, current, have they been resolved or are they active?). This will be included in the site visit training.

- (Cmsr. K. Maibaum). I am reading the email Angela sent out. It looks really nice and organized how it is broken down by month. But you answered the questions regarding how we will be meeting. I do see the one in February, they do have some complaints. I am guessing, when the time comes in February, we will know more whether we can visit or not, in person. (Angela Beck) Yes, we are hoping for that sooner than later.
- (Cmsr. L. Griffin) Is the September site, are we conducting via Zoom for sure? (Angela Beck) I am assuming and I haven't received an answer yet as to who is supposed to reach out initially to the program director at the site. Is it me or Cmsr. Serwin? (Cmsr. Serwin) I assumed it would be you, Angela, setting up the scheduling to confirm whether or not they can accept in person? (Angela Beck) Yes, but I thought you were to reach out initially and that I would be reaching out to scheduling after you made the initial contact and explained the site visit as an official request. (Cmsr. Serwin) We can discuss, I didn't remember that being part of the process, but if it is that is fine. (Angela Beck) That is only because, when we were doing the testing, that was the process.
- (Cmsr. G. Wiseman) When will we have the next update? (Angela Beck) It did go out. But as far as the site visits, there will be updates to the particular commissioners for that site visit once it has been scheduled. The training is the hour before the next commission meeting and we are discussing that and there needs to be a reminder email sent out tomorrow for the commissioners as it is mandatory.
- (Cmsr. L. Griffin) Just that the SVP team needs to get together to finalize the training. (Cmsr. B. Serwin) yes, we have a few meetings to work and finalize before then.
- (Cmsr. L. May) I just want to find out, is there any way we can get reports from the county on these agencies that have been closed currently or have been closed within the past 8 months for any substantial amount of time (a week or longer) due to COVID? While we are conducting these site visits, even though we are not walking in there, we need to know. I personally heard today about one that is closed and has been for the past couple of weeks because the employees keep getting COVID, not the clients/patients... the employees. Hope House. Which is shocking because I know they are very clean. I am wondering why the county is not sharing that information with us on a monthly basis. We need to know from this point forward, for the next five years. (Cmsr. G. Wiseman) I am going to tie that into having that addressed by Ms. Bruggeman, but it also ties in with Agenda Item X, which is requesting information from BHS staff. Specifically, to this question, I will put a note and come back to it in a couple minutes when we are on that agenda item, we can address this question at that time. Just in the interest of time.

**VIII. UPDATE on Orientation starting in November**

Is there any new updates on this? Or are we just continuing to gather the information on this and prepare ourselves?

- (Cmsr. B. Serwin) It is just the status quo and continuing to plug away and identify the documents we need and the priority for me has been this first site training module. As soon as we have that ready to go for September 1, the focus will be back on the full orientation module as a whole. We already have 75% of the documents we need for that already (with some to update).
- (Jennifer Bruggeman) I have the binder in front of me and the first module has, it seems, all the backup information but needs updating. I would be happy to start scrolling through the table of contents and search to see if there are any outdated materials and provide the latest information if that would be helpful. (Cmsr. Wiseman) That would be extremely helpful. A lot has happened in the last three years. I am sure there are some changes and updates to be made. That would be extremely helpful and appreciated.
- (Cmsr. B. Serwin) Yes, after I get this site visit training module off my chest, my intention is to have a 'kick off' meeting for the orientation where Jennifer, Angela and I hunker down and map out how to conduct in an efficient way.

**IX. UPDATE on new Commissioners and open seats**

Earlier today I was working with Ms. Beck on a draft letter for us to send to all Supervisors when there is an opening on the MHC. This letter, which will have ready as an attachment for the full commission is just to make all Supervisors aware there is a vacant seat that, we on the MHC, would prefer to have all our seats filled. As per the bylaws, I have a link to them to what a qualified person is to be on the commission. And that we, as the bylaws are written, are offering to review and put forth recommendations for applicants with supervisor request. And, as Supervisor Andersen pointed out, you can be a resident of District II and serve in District III or vice versa. You are not limited. Our openings are as follows:

- District I – Member-At-Large (VACANT)
- District II – Family Member (Vacant as of 7/1/21)
- District III – Consumer (VACANT)
- District III – Member-At-Large (VACANT)

**Comments and Questions:**

- (Cmsr. L. May) I have helped put together a list of commissioners that are currently in attendance violations. So, you say there are three seats available. Also, in our bylaws, we have as a commission, the right to put forth those names of people who have high absenteeism to be stepped down as commissioners or be removed as commissioners and have an opportunity to put other commissioners in those spots. That is in Article VI, nomination of and removal of officers. In terms of placing candidates and choosing candidates to be on the commission, there is no language that states we have to ask permission from any of the supervisors to be involved in the process as I have noted numerous times. The state and county bylaws, as well as the state board of commissions, we do not have to ask their permission. We are supposed to be part of the selection process. I am asking: (1) this be put on the full

commission agenda, we review and vote as a commission on reviewing the absences. (2) If commissioners have been absent over the amount of time, we as a commission agree, they are to step down or write a letter to be removed, and (3) we are being recognized as an entity of this county that has a right to help select commissioners so we are not blindsided by commissioners who really don't know or understand the duties and responsibilities. We are not here to babysit and train, we are here to do work and our work is continually growing as each year that goes by, especially during these times. Yes we need to have our training binders, our orientation and we do need to get that process going again. However, no one should be sitting on this Commission if you haven't attended a certain number of meetings, you can't recite certain things, just because it looks good on a resume or curriculum vitae. I am asking these be put on the September MHC agenda.

- (Cmsr. G. Wiseman) Thank you Commissioner May. I know we have had quite of bit of discussion. There are lot of moving parts here regarding the Board of Supervisors (BoS) Internal Affairs group changing some of the bylaws mid-stream and, I am hoping this would be a topic we actually discuss at the retreat on how much the commission wants to invest in time and effort to address this. Because, Commissioner May has done an outstanding job of researching what other MHC in the state have regarding bylaws and state law on this. We have this information and it is contradictory to the environment we are in now. So, the question is: how much effort do we want to put forth on this? Your point is well taken and I will include that on our summary for the full MHC meeting.
- (Cmsr. K. Maibaum) I am new to this area and I found out about the open seat through NAMI. I am a volunteer at NAMI and they mentioned it and that is how I was able to participate. I have also participated before applying. I just wanted to know, how else are candidates solicited? How do you keep them on? I know the responsibilities (what has been accomplished), I guess it is tantalizing for some people to say 'yes I want to be a part of this' because I want to serve my community.
- (Cmsr. G. Wiseman) This is something we should take up at the full commission meeting so all the commissioners are advised. But there are community based organizations that are active, aware and keep track of openings on the different boards and commissions throughout the county. There also individuals who are active and people who have attended this meeting for two years or more and they are not commissioners but they care about what is going on in their community. There is also the posting on the county website if someone is interested in mental health, they would look it up and see there are openings. We had (I believe) 25 applications in the last ten months of those wanting to serve on the MHC. The process is those are reviewed by the supervisors and they make those appointments. A lot is reliant of their staff. One of the reasons and impetuous for the letter we will be sending out to all supervisors is to remind them of their responsibility to keep these seats filled. That is what we are trying to do. An organization like NAMI makes people aware. They follow this commission and what we do. Commissioner Dunn is a member, I am a member. I do not know who else on the Commission is. Commissioner Griffin, Serwin, you...



<p>Commissioner May, excellent points. We do need to budget some time to really delve into this.</p> <ul style="list-style-type: none"> <li>• (Cmsr. B. Serwin) just as a matter of practicality, Commissioner May, we have raised a couple of points (1) being commissioners who have missed too many meetings. That is something handled directly by the Chair / Vice-Chair. It is not something that needs to go to the commission, it is just a fact and it needs to be dealt with. That has been raised to our attention. The other (2) in terms of new commissioner to replace / need to be appointed. Our bylaws stand and we need to follow our bylaws in terms of replacing any commissioners up until the point our bylaws change. It is a great idea to have the full discussion about it and would just suggest it as a full commission meeting agenda item versus having it at the retreat. It is a chunky thing in and of itself with a more specific audience.</li> </ul>	
<p><b>X. DISCUSS requesting information and meeting attendance from BHS staff</b></p> <p>This on the agenda, is that we have had some requests from Dr. Tavano that multiple committees have been making requests of county employees, sometimes it is information that the county employee already has given a presentation on, other times it is asking for work that has not been already tasks. The request was that when we, as members of the MHC request information or presentations from county BHS, that we go through Dr. Tavano as a clearinghouse. Also, be sure to include Commissioner Serwin and I (Chair/Vice Chair) on those requests and Ms. Beck (EA) so we log what the requests are and that we are cognizant we do not overload specific individuals/departments, or that the committees are not double requesting (two different committees asking the same person for the same information). That is why this is on the agenda. I would like to open up for a brief discussion and questions.</p> <p><b>Comments and Questions:</b></p> <ul style="list-style-type: none"> <li>• (Cmsr. L. May) If anyone wants a speaker, each committee should submit by a certain date so that Angela is not having a nervous breakdown. What they would like to speak to. That make sense. Now it makes sense to go through Dr. Tavano for that. So, the person can come to the specific committee but not in the same month. It makes sense. You have clarified. I wondered why we need to go through her and it is now clear.</li> <li>• (Cmsr. B. Serwin) I also want to add (as a devil’s advocate) to this process. I do understand why. I have been chair and vice chair for many years. My caution is that the incumbent (it is not always going to be Dr. Tavano and before it wasn’t her) can use it as a filter and can always have reasons why that person is not available or why that information is not available. We had that for seven years prior to Dr. Tavano. I just laid out for Dr. Tavano, a program we will be investigating ‘Housing that Heals’ in support of the motion we passed as a commission earlier this year and laid out the program we will be researching and she responded that staff was very unavailable due to the public health commitments and that could we handle this conversation in the leadership meeting between Cmsr. Wiseman, myself, Matthew Luu, Jennifer Bruggeman and Dr. Tavano at our</li> </ul>	

<p>monthly one hour meeting. This is housing. The question of housing along the continuum of care. It is not something we are going to do in an hour, as it is something we haven't done in 20 years. I have yet to respond because I really wanted to think carefully about that. In my worst nightmares, that is the kind of situation that happens and I don't want to see the commission go down that path. We are advising Behavioral Health Services. There should be facilitation happening for us to get the information, get the people we need to interview actively and there not be a wall there. I am not saying that is what Dr. Tavano's intention is, or that it will work out that way. It is just more a word of caution and something we need to be vigilant and aware of, or it shuts down our business.</p> <ul style="list-style-type: none"> <li>• (Cmsr. D. Dunn) To follow on what Commissioner Serwin just said. I felt I had been running into this a bit, trying to get incompetent to stand trial information, come to find out at the previous meeting, they just didn't know. The persons I had asked, I wish I would have known six weeks ago. We got some very helpful information out of the deputy district attorney that handles the mental health unit in the public defender's office. That was more helpful than anybody, but those are the kind of things they are not forthcoming. And I agree with Cmsr. Serwin, we know what happened under the previous regime, constant butting heads trying to get information. I don't get that feeling under Dr. Tavano, but it is something I don't want to see happening again.</li> <li>• (Cmsr. B. Serwin) Just another practical matter, we need to keep in mind only some of the people we request is from BHS. We don't need to address through Dr. Tavano for those not under BHS, but we still should be attempting to coordinate and make sure we are not double dipping and be cognizant of the time they are asking.</li> </ul>	
<p><b>XI. UPDATE on Motion Status</b></p>	<p><b>Forward to next meeting</b></p>
<p><b>XII. REVIEW elections process</b></p> <p>Commissioner May reminded us that it is coming up and we need to set up an Election Ad hoc committee to go over the seats, talk to candidates about their positions on the Board. We all serve one year in our roles and up for re-election. Are there any questions regarding the election process? We will be going over this at the main MHC meeting. Those of you who have participated before, we should see who the candidates are and some commissioners volunteer to be on the ad hoc committee</p> <p><b>Comments and Questions:</b></p> <ul style="list-style-type: none"> <li>• (Cmsr. L. May) When will the list be available? You are stating there will be a list of candidates. (Cmsr. Wiseman) at the next MHC we will announce the elections, asking for candidates for people who want to serve on the ad hoc committee and refreshing memories of the bylaws. Typically, at that time, we have people volunteer to serve on the committee and declare their willingness.</li> <li>• (Cmsr. B. Serwin) Yes who would like to serve on the ad hoc committee.</li> <li>• (Cmsr. L. May) Then after this, can we get back on a regular schedule?</li> <li>• (Cmsr. B. Serwin) &lt;screenshare bylaws on elections ad hoc committee&gt; We didn't do this in August, but there is an extra month built into the</li> </ul>	

<p>process so we are fine, we will create the ad hoc committee in September and will have September and October to put their names in, or to reach out to those they have noted people who have been particularly active and see if they are interested in running. Speaking to what is exactly involved so commissioners are fully aware of what they are signing up for and putting it all together. That will be presented in November, everyone will know who is running in the November meeting and in December, we do the actual vote. The new leadership will take over on January 1<sup>st</sup>.</p>	
<p><b>XIII.DISCUSS open Commission seats and notification to Supervisors</b></p> <p>This was blended in with Agenda Item IX. Are there any more questions or comments regarding that discussion?</p>	
<p><b>XIV. DETERMINE September 2021 Mental Health Commission Meeting Agenda</b></p> <ul style="list-style-type: none"> <li>• <b>“Get to know your Commissioner” (Commissioner Serwin and Commissioner Dunn)</b></li> <li>• <b>ANNOUNCE 2022 Elections and REVIEW timing of elections process</b></li> <li>• <b>DISCUSS MHC Retreat and proposed attendee preparation, including Zoom format, theme, activities, technical and facilitation support</b></li> <li>• <b>UPDATE on Site Visit assignments, schedule of Site Visits, training in September, and Zoom format</b></li> <li>• <b>UPDATE on Orientation</b></li> <li>• <b>UPDATE on new Commissioners and open seats</b></li> <li>• <b>UPDATE on BHS contract process and content*</b></li> <li>• <b>Behavioral Health Services Director's Report</b></li> <li>• <b>Further discussion regarding Bylaw’s and how it affects those who serve on the commission**</b></li> </ul> <p>Agenda items agreed/approved.</p> <p>Note:</p> <p>*Angela Beck to invite Christopher Pedraza to speak to contracts, include Dr. Tavano in that request.</p> <p>**Is this something we want to bring up at this point? Is it something that we want to get feedback from Supervisor Andersen on whether or not that bylaw change has gone through? (Cmsr. Serwin) We can certainly look that up in the minutes of the (September 12<sup>th</sup>), it wasn’t voted on in August, so that is still coming up. On one hand, it might be useful to bring this up to the board before that vote, but not that it would necessarily impact that vote. I think this is a broader discussion. I wonder if we will have enough time to do it in this meeting but in November and made it one of the center pieces of discussion of that meeting, then we could do full justice. I feel like this is such a big and important topic, we should not try to rush it ahead of their votes, if they approve, we just move on and discuss anyway.</p> <p><b>Comments and Questions:</b></p> <p>(Cmsr. D. Dunn) so it sounds like it is going to be a November meeting discussion, not a September 1 meeting discussion. (Cmsr. B. Serwin) well, is there time to fit it in, is my question. (Cmsr. G. Wiseman) Cmsr. May, help format and really define in two sentences what do we want our role to be in</p>	

the eyes of the BoS, are we strictly advisory agency that reviews the county budget and report on mental health as we see it? Or are we saying NO, we want to be far more active in who serves with us? And for that to happen we would need the by law to change this way. And expect resistance from the Supervisors. (Include the backup that you have gathered).

(Cmsr. L. May) Okay, I will also work my schedule so that I can be at their meeting as well. (Cmsr. G. Wiseman) I think that will be really helpful in advancing the discussion if we have clear and concise goal with the supporting documentation and people can make an informed decision.

(Cmsr. L. May) Right because we are not just a fan club. We are not being respected for who we are and the work we do, collectively and what we stand for. And the laws that are written, the California Senate, not just this county. I pulled up Senate laws, they have made the laws regarding what is to be done on these commissions and the commission responsibility and also how we work in conjunction with the BoS and what we are supposed to be doing. Not 'this is our suggestion', this is what is supposed to be done. All that is being brushed aside by some supervisors who, quite frankly seem to have a God complex and those times are over, like Commissioner Serwin said, we had 20 years of the last person over our health system that was blocking our ability to do our work.

**XV. Adjourned meeting at 5:00 pm**