



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.

CONTRA COSTA COUNTY MENTAL HEALTH COMMISSION
Thursday • November 12, 2009 • 4:30-6:30 p.m.
Concord Police Department Community Room • 1350 Galindo Street • Concord

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

AGENDA

Public Comment on items listed on the Agenda will be taken when the item is discussed.

1. 4:30 **CALL TO ORDER / INTRODUCTIONS/CALL FOR PUBLIC COMMENT CARDS**
2. 4:35 **PUBLIC COMMENT.**
The public may comment on any item of public interest within the jurisdiction of the Mental Health Commission. In the interest of time and equal opportunity, speakers are requested to observe a 3-minute maximum time limit (subject to change at the discretion of the Chair). In accordance with the Brown Act, if a member of the public addresses an item not on the posted agenda, no response, discussion, or action on the item may occur. Time will be provided for Public Comment on items on the posted Agenda as they occur during the meeting. Public Comment Cards are available on the table at the back of the room. Please turn them in to the Executive Assistant.
3. 4:40 **ANNOUNCEMENTS**
 - A. Introduction of Carole McKindley-Alvarez
 - B. The Annual Advisory Body Training will take place at the BOS Chambers at 651 Pine Street on December 7, 4:00 – 5:30 pm
4. 4:45 **APPROVAL OF THE MINUTES**
ACTION October 8, 2009 MHC Monthly Meeting
5. 4:50 **VICE CHAIRPERSON'S COMMENTS – Teresa Pasquini**
 - ACTION** A. Consider what action the MHC would like to take regarding amendments to and ratification of the revised bylaws.
 - ACTION** B. Report on MIAW presentation by MHCC Consumers and appointment to meet with Supervisor Gioia at West County Wellness Center. Reconsider motion regarding letter to BOS regarding West County consumer suicide.
 - ACTION** C. Consider inviting Health Services Department to attend a Commission meeting to explain policy on the reporting of psychiatric incidents at CCRMC and all sentinel events occurring in the mental health system. Refer to CC Times Article.



6. 5:10 **ELECTION OF OFFICERS – Anne Reed, MHC Elections Coordinator**

ACTION A. Election of Officers

7. 5:35 **REPORTS: ANCILLARY BOARDS/COMMISSIONS**

- A. Mental Health Coalition – Teresa Pasquini
- B. Healthcare Partnership – Dave Kahler
- C. Human Services Alliance – Mariana Moore
- D. Local 1 – John Gragnani
- E. Mental Health Consumer Concerns (MHCC) - Brenda J. Crawford
- F. National Alliance on Mental Illness (NAMI) – Al Farmer
- G. MHSA CPAW – Annis Pereyra

9. 5:55 **MHC COMMITTEE / WORKGROUP REPORTS**

- ACTION**
- A. Diversity and Recruitment Workgroup-Anne Reed
Brief report and consider draft mission statement, in concept.
 - B. Report letter received from the Department of Mental Health regarding the MHC's concern, to MHSOAC, about flawed community planning process.
 - C. MHC/CPAW Capital Facilities and Projects Workgroup –Annis Pereyra.

- ACTION**
- 1. Statement from Teresa Pasquini
 - 2. Reconsider workgroup's charge, focus and collaborative relationship with CPAW including discussion on information technology as part of the workgroup's charge. Discuss actions that may be taken by CPAW at the 11/5/09 meeting in relation to the efforts of the MHC-CPAW Capital Facilities Workgroup and consider actions to be taken.
 - 3. Hear Commissioner's concerns.

10. 6:20 **FUTURE AGENDA ITEMS**

Any Commissioner or member of the public may suggest items to be placed on future agendas.

- A. List of Future Agenda Items:
 - 1. Case Study
 - 2. Discussion of County Mental Health Performance Contract & Service Provider Contract Review.
 - 3. Presentation from The Clubhouse
 - 4. Presentation from the Behavioral Health Court.
 - 5. Discuss MHC Fact Book
 - 6. Review Meetings with Appointing Supervisor
 - 7. Creative ways of utilizing MHSA funds
 - 8. TAY and Adult's Workgroup
 - 9. Conservatorship Issue
 - 10. Presentation from Victor Montoya, Adult/Older Adult Program Chief
 - 11. Presentation from Crestwood Pleasant Hill
 - 12. Proposed MHC 2010 Legislative Platform, presentation by Dorothy Sansoe
 - 13. Report on Behavioral Health Unit – Dr. Johanna Ferman
 - 14. Report on Integrative Health Center Proposal – Dr. Karen Burt

11. 6:25 **ADJOURN MEETING**

The next scheduled meeting will be Thursday, Dec. 10, 2009 from 4:30 – 6:30 pm.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the staff to a majority of the members of the Mental Health Commission less than 72 hours prior to that meeting are available for public inspection at 1340 Arnold Drive, Ste. 200, Martinez during normal business hours

**Contra Costa Mental Health Commission
Monthly Meeting
October 8, 2009
Minutes – Draft**

1. CALL TO ORDER/INTRODUCTIONS

The meeting was called to order at 4:40 pm by Vice Chair Teresa Pasquini.

Commissioners Present:

Dave Kahler, District IV
Scott Nelson, District III
Colette O’Keeffe, MD, District
Floyd Overby, MD, District II
Teresa Pasquini, District I, Acting Chair
Annis Pereyra, District II
Anne Reed, District II
Sam Yoshioka, District IV

Attendees:

Brenda Crawford, Mental Hlth Consumer Cons.
Kathleen Creel, Diablo Valley Family. Coalition
John Gragnini, Local 1
Lynn Gurko, Crestwood Patterson
Anne Heavey, Nat’l Alliance on Mental Health
Cindy Mataraso, Crestwood Patterson
Mariana Moore, Human Services Alliance
Kassie Perkins, Anka BHI
Connie Steers
Jakki Tachiera, Diablo Valley Family Coalition
Karen Wise, Anka BHI
Steve Grolnic

Commissioners Absent:

Art Honegger, District V-Excused
Peter Mantas, District III-Excused
Carole McKindley-Alvarez, District I-Excused
Bielle Moore, District III-Excused
Supv. Mary Piepho-Excused

Staff:

Suzanne Tavano, MHA
Vern Wallace, MHA
Sherry Bradley, MHA
Dorothy Sansoe, CAO
Suzette Adkins, Supv. Bonilla’s office
Tomi Van De Brooke, Supv. Piepho’s office

Vice Chair Pasquini read the Mental Health Commission mission statement to remind us of why we meet. Vice Chair Pasquini is Acting Chair in the absence of Chair Mantas. Commissioners, Contra Costa Health Staff and members of the public introduced themselves. (See sign-in sheet for more names)

New commissioner Sam Yoshioka introduced himself. He is a family member and has experience in the mental health field, including working with Contra County Health Services. He thanked Supv. Bonilla’s office for the appointment and looks forward to making a contribution.

2. PUBLIC COMMENT [First 5 Submitted]

- A. Kathleen Creel, on behalf of The Diablo Valley Family Coalition, presented a letter expressing their group’s concern about losing the opportunity for the PHF.

Their statement included:

1. The family members have reviewed and provided comments on the PHF plan at the public hearings and forums made available to them.
2. The approval of the PHF plan as proposed at this time.
3. It is imperative that the existing 23 beds on Ward 4C remain open.

Their formal request to the MHC includes:

1. Vote today to request that the county earmark the land on Allen Street for mental health care system use while the MHC completes its research and inform the BOS of their decision.
2. Approve this project as proposed at this time.
3. Do not waste funds or time on assessing alternatives, rather us that money and time to address citizen concerns regarding accessibility of this site (ie. ride vouchers or similarly fiscally sound solutions/s), etc.
4. Set an assertive deadline to move this project forward so that this opportunity is not missed (at minimum, set an aggressive date for the completion of your research and report of the results.)
5. Make clear the MHC's objections to closing any beds on Ward 4C.
6. Request that the MHC ask the County to notify the MHC, the NAMI Board and the Diablo Valley Family Coalition at the moment discussions are on the table regarding closing any beds on Ward 4C.

3. ANNOUNCEMENTS

A. Vice Chair Pasquini called attention to the Minds on the Edge program on PBS. She watched it and found it riveting; she encourages everyone to watch it on t.v. or go to the website.

4. APPROVAL OF THE MINUTES

- **ACTION:** June 25, 2009 MHC Monthly Meeting –Motion made to approve. (M-Reed/S-Pereyra/P -Reed, Kahler, O'Keeffe, Pereyra, Overby, Pasquini, 6-0)
- **ACTION:** August 13, 2009 MHC Monthly Meeting – Motion made to approve. (M-Reed/S-Pereyra/P –Reed, Kahler, O'Keeffe, Pererya, Overby, Pasquini, 6-0)
- **ACTION:** September 3, 2009 Special Meeting – Motion made to approve. (M-Reed/S-Pereyra/P-Reed, Kahler, O'Keeffe, Pereyra, Overby, Pasquini, 6-0)

5. VICE CHAIRPERSON'S COMMENTS

A. Site Visits: Vice Chair Pasquini commented the MHC hasn't conducted a site visit during 2009 and she would like to consider a site visit. Her site list includes:

1. Crestwood Angwin (far away, but would provide insight into how family members/loved ones feel when they go to visit loved ones placed in out of county mental health rehab facility)
2. CCRMC (the last visit there was 2-3 years ago)

Commissioner Reed commented it would be helpful to reconstruct what sorts of things commissioners are to look for during a site visit: general feelings about a site or looking at

specific things. Vice Chair Pasquini responded commissioners are to be observe, be objective and report back to the MHC. She suggested looking at the Commissioner Handbook to see if there are any guidelines for site visits.

Commissioner O'Keeffe suggested adding an acute inpatient overflow site as an option; we have 18 or 19 acute inpatient overflow patients each day. Where are the most frequently used hospitaSuzanne Tavano mentioned John Muir, Herrick, St. Helena in Vallejo and St. Helena in St. Helena are the most commonly used overflow hospitals.

Commissioner Overby wanted to know the difference IMD/MHRC/SNF facilities. Suzanne Tavano stated IMD (Institute of Mental Disease) broadly applies to many levels of locked, 24 hour care, including hospitals. In California, the MHRCs (Mental Health Rehab Center) have become a subset of IMD's and were mostly locked, but could be unlocked. The SNF (Skilled Nuring Facilities) can be either medical or a special treatment center more like an IMD.

CommissionerReed suggested putting site visits on the January agenda to set a date/places to site visit and division of sites up among the commissioners. Theresa (not vice chair Pasquini) ?? stated there used to be site visit evaluation forms. Staff to see if form is still available in computer records.

B. Submission of nominations for Chair and Vice Chair: MHC bylaws call for an election in November. An Election Coordinator needs to be nominated and elected today from the MHC. If Vice Chair Pasquini runs for office, it would be a conflict of interest for her to act as Election Coordinator.

➤ **ACTION: A motion was made to appoint Commisioner Reed as Election Coordinator and accept nominations for Chair and Vice Chair for the upcoming election. She will receive nominations, confirm the nominee agrees to serve and submit them to Nancy Schott for the November agenda. (M-Nelson/S-Kahler/P-unanimously 8-0)]**

C. Next week is Mental Illness awareness week, MHC will receive a proclamation from Supv. Piepho at the 10/13/09 BOS meeting at 9:30 am. Commissioners are welcome to join Vice Chair Pasquini and Donna Wigand in accepting the proclamation.

D. CIMH Training: Sherry Bradley stated training is currently the responsibility of the California Mental Health Planning Council. There is a training planned and she is waiting for more information.

E. New commissioners requiring training; schedules will need to be coordinated

6. REPORT: Deputy Director, County Administrator's Office-Dorothy Sansoe

A. She reviewed the differences between standing committees, task forces and work groups. A standing committee is a committee set out in the bylaws; a subcommittee of the MHC and subject to all the rules the MHC follows. A task force is something that is set up for a specific purpose and for a specific length of time. Depending on the size task force, it may not require

public noticing. A workgroup, depending on the size, can be just like a task force or it can be a larger subgroup of the MHC and subject to public noticing if there was a chance there would be a quorum of commissioners at a workgroup meeting. If discussions are held on a subject that is on a MHC agenda or may be on a future agenda, all public noticing and public comment regulations should apply. If there are any questions on what category a formed group falls under, please contact her and she will assist in the determination. The rules regarding around the subgroups may change if the proposed Bylaws are adopted; keep this in mind as the commissioners review the changes.

- B. Proposed Reviewed Bylaws: She reviewed proposed bylaw revisions as prepared by MHC Bylaws Committee and county counsel's comments on those changes dated 7/14/09. MHC Bylaws Committee members included Vice Chair Pasquini, Commissioners Kahler, Mantas, O'Keeffe and Pereyra. Tomi Van De Brooke mentioned some comments made by supervisors in the workgroup may not be accurately noted and she would like to review as well. Dorothy Sansoe offered to revise the Bylaws into more readable format and forward to Vice Chair Pasquini for all commissioners.

Vice Chair Pasquini confirmed the MHC did not wish to convene a workgroup to review the proposed bylaws, but rather each commissioner would read them on their own. This agenda item will come back at the November MHC meeting for an approval vote.

7. **REPORT: Contra Costa Health Services Mental Health Administration**

A. Suzanne Tavano-general report:

1. State budget reductions for children's services: no actual reduction; good news. Reduction in state allocation for AB 3632 services: CCC will have to manage the reduction in allocation and postponement of payments. Reduction in managed care allocation: after developing some ways to increase revenue, the net reduction was 500K to be absorbed in services CCC provides to its private provider network. In the end they will serve the majority of people for less cost. Also
2. Presented a chart or "map" showing countywide Mental Health Services including separate sections for West, Central and East Counties further divided into Adult and Children's Services. It will be posted on the website and updated continually. Sometimes when speaking to people, specific programs are mentioned without the understanding that the majority of funding for those programs comes from Mental Health; the map is a way to communicate the various services and programs offered by the family of providers contracted with CCC.
3. Other charts:
 - a. Mental Health Consumer Served by Provider Category: under the CCRMC category in years leading up to '05 -'06, the numbers reflect operation of 2 units. After that time one unit closed and available beds went from 44 to 23, therefore the drop in the annual numbers in '06 -'07. In the Private Hospitals section, the numbers show quantity of stays by unique individual that does not account for repeat stays. Not shown, but more valuable to discuss is the number of hospital days, since some patients might be in and out or in for an extended period of time.

- b. 3632 Clients chart shows information on children's services and where they are being served.
- c. SB 90 Claim: 3632 is a mandated service and CCC submits a mandate claim to the state. For 2008-2009 the total cost of services was approx. \$14.5 million with approx. \$8.6 million being reimbursed by Medi-Cal, leaving approx. \$6 million for the mandate claim to the state. Payments from the state can run 1-2 years behind and the county must carry those costs. Vern Wallace stated the state is only is required to repay up to 15% up to 3 years. She brought up that many of the children they serve under 3632 are privately insured, which leaves fewer spots for Medi-Cal and non-insured insured children. It's a complicated balancing act to provide the required services given the over strained mental health system.
- d. Chart of Locked Long-term Subacute Care Providers: Financial information was not included, but it would be good to have for the Workgroup to analyze costs of out of placement care. Vice Chair Pasquini gave Suzanne a chart from the state website for her to review, may only show Medi-Cal paid claims only.

TO DO: Suzanne Tavano to include costs on chart of Locked Long-Term Care and submit to the MHC.

- B. Vern Wallace-presented an executive summary prepared by Dr. Walker for the BOS regarding closure of Chris Adams Girls Center. Given the facility has not been able to keep the census near the 17 girls required to retain a level 12 group home certification, continually had staffing issues and difficulties in responding to health/welfare issues in a timely manner led to the closure. The 7 girls either returned home or relocated to other facilities. All employees were relocated/reassigned to providing services to AB3632 children. They are hoping to carry forward best practices (ie. anger replacement) from the facility out to the region. The site is now on the county owned facility property list; possibly Probation is interested.
- C. Sherry Bradley-MHSA final component, Innovation, was launched 10/7/09. Taped in the format of a training, by CCTV and will be aired 10/20 and 10/21. MHSA is seeking projects that meet the guidelines described in the training. This is an opportunity to try something new and the learning process has to drive the project. If a project has a positive outcome, then MHA will attempt to locate from other sources. '09-'10 for CSS and PEI updates will be posted for 30 day public comment period soon. The MHC will conduct a public hearing for those plans.

8. REPORTS: ANCILLARY BOARDS/COMMISSIONS

- A. Mental Health Coalition – Teresa Pasquini read a report she submitted to The Mental Health Coalition: “The Mental Health Coalition met on September 22, 2009 at MHCC in Concord. All members were present including, JohnGragnani, Mariana Moore, Brenda Crawford, Dave Kahler, and me. The conversation was serious and focused on the tragic suicide of a beloved West County Consumer, the previous weekend. The focus of the discussion was on the systemic gaps, the perceived disrespect for the Mental Health Consumer Concerns staff's attempted interventions, and the plans for advocating around this devastating loss.

I shared the fact that I had received a call from a West County Consumer the day before notifying me of the incident and begging for my intervention. I also shared the email that I had received from a peer supporter and advocate from MHCC. I include a copy of that email, along with my email to the Mental Health Director and others regarding my desire to seek solutions to learn and from this tragedy.

While all coalition members expressed concern and emotion over this event, there was no consensus on moving forward with any action, as a Coalition. Some individual members expressed their intentions for advocating for an investigation. I was one of those members.

There needs to be a neutral process that allows Sentinel events to be reviewed by members of the community who do not have a conflict of interest. This is not about blame, but about learning. There was a system failure that caused a young man to die. We need to understand what happened to prevent another life being lost. I urge all of us to advocate, to the Board of Supervisors, to request an independent investigation of this suicide. We can't hide behind HIPPA. We can let go and learn, without knowing the names and specifics.

I would ask the commission to consider a motion that would include writing a letter to the Board of Supervisors requesting an independent internal review that would include a report back to the Board stating what steps will be taken to correct the communications breakdown between doctors, case management, administrators, peer supports, the failure to admit to the County Hospital, the failure to hold, the failure to coordinate discharge plans. The failure to prevent this young man from hurting himself.

This young man touched several points in the system including community organizations like NAMI and MHCC, County Programs like the county hospital, 38th Street Clinic, Police contact, out of county contract acute hospitalization. He had a large peer support system begging for help. We have a death and the lingering painful question of why. The Commission needs to help find that answer. Please consider taking action today.”

Commissioner Reed recalled previously requesting another internal investigation earlier in the year regarding a west county consumer; how effective are internal investigations? Vice Chair Pasquini said the MHC did not receive a report back. Vice Chair Pasquini stated the consumer was her son and filed a complaint that went up to state Board of Mental Health; it did not receive a satisfactory outcome. She feels this has been ignored. Suzanne Tavano stated Vice Chair Pasquini received a letter from the state and she could share letter if she wants.

Suzanne Tavano stated she was not sure if the BOS would direct MHA to conduct an internal investigation, but there would not be a way for members of the community to participate in that due to privacy laws. MHA will participate in any way the law allows them to do.

- **ACTION: A Motion was made to authorize the Chair of the Mental Health Commission to write a letter to the Board of Supervisors requesting that the Board ask the Mental Health Director to lead an internal investigation into the circumstances surrounding the death of the unnamed young man, focusing on systemic and personnel-**

related issues and any corrective actions. Further request that the response to the Board from the Mental Health Director be made within 60 days. (M-Reed/S-Pereyra/P-carried unanimously 8-0)

Discussion:

Commissioner Reed asked if the MHC would ever be able to see the results of an internal investigation. Suzanne Tavano said that on the second, recent, incident, MHA could report back on what steps were taken, but not discuss the consumer specifically. They could discuss generically what was looked at during the investigation and what corrective steps would be taken. Other people in the room could have that conversation, but MHA could not be part of that conversation. It's a matter of finding balance in what they can share and participate in working within Section 5328 of the Welfare and Institutions Code.

TP would like to share the letter she received back from the state at a separate time. It would be a lengthy session to describe the agonizing process of filing a complaint, both locally and at the state level.

- B. Hospital Community Forum and/or Healthcare Partnership – Dave Kahler: Beginning 10/28 the Healthcare Partnership is scheduling workshops Wednesdays 6:00 – 8:00 pm including orientation and educational information on resources available when a loved one is released from 4C.
- C. Human Services Alliance - Mariana Moore – presentation on background and history of the group: Members are non-profit community based organizations providing services in Contra Costa County. Member groups are typically Health and Social Services focused. Providers involved are long term, stable providers.
- D. Local 1 – John Gragnini: He is very appreciative that Vern Wallace and Suzanne Tavano were able to relocate the Chris Adams positions. These positions are desperately needed in the children's system. At a recent meeting they reviewed the Mental Health Coalition Talking Points.

TO DO: Staff to verify if the MHC adopted the Mental Health Coalition Talking Points.

- E. Mental Health Consumer Concerns – Brenda Crawford: staff at MHCC going through difficult times with the suicide of west county consumer and organizational culture change. Continue to serve daily 25 west county, 35 in east county, 30 in central
Changing from drop-in center to wellness and recovery center; looking to be fully staffed by 10/30/09. She appreciates all the support she received from Susan Medlin at the Office of Consumer Empowerment and Suzanne Tavano with offers of assistance. The staff is now ready to grieve and she will be calling for grief support.
Working on Holiday Party; Dec. 11 (11 am – 2 pm.) at Pleasant Hill Community Center, the largest gathering of consumers in Contra Costa County. Entire staff is participating.

F. MHSA and CPAW – Annis Pereyra: her report is in the packet from meetings on 9/17/09 and 10/1/09; concerns that there is too much material to cover in meetings. Concerns on Family Steering committee and issues brought up by them not being addressed. There are concerns money being distributed without the Family Steering committee meeting. Steering committees forming again.

9. **MHC COMMITTEE/WORKGROUP REPORTS**

A. At the 9/3/09 Special Meeting, the MHC voted to join with CPAW to form the MHC-CPAW Capital Facilities Workgroup, including 4 assigned CPAW members and 4 MHC commissioners (Vice Chair Pasquini and Commissioners O’Keeffe, Pererya and Reed) They have had 2 meetings, 9/24/09 and 10/5/09. Commissioners Honegger resigned as Chair of the workgroup and Chair Mantas requested Vice Chair Pasquini take over as Chair. The minutes from both meetings are in the packet. At the first meeting they agreed on the charge for the group, including reviewing alternatives and options, including the 20 Allen site, and IT needs. The Workgroup added back in the IT funds which had been taken off the table, but but the Workgroup wasn’t aware of that. Sherry Bradley stated that removal of funds had taken place prior to CPAW being formed. The consensus of the group was that they didn’t want to be driven by a timeline; they want to process to be done properly and include a needs and priority analysis in order to determine what the actual county needs are. As was presented at the 9/3/09 Special Meeting, other counties have developed priority lists including up to 10 items and Contra Costa County had only one, the psychiatric pavilion. The commission voted and the workgroup agreed further analysis was needed to determine if that single option was the best use of the funds.

Commissioner Pereyra wanted to make sure it was clear the Capital Facilities and IT funds were in one pot of funds. The Workgroup was told the computerized medical records part of the project, originally thought to be \$2 million, has come in at \$5-6 million. Sherry Bradley said that amount includes electronic medical records system, personal health record system and e-prescribing. Vice Chair Pasquini asked if there would be any future MHSA funding that could be allocated for that type of project? Sherry Bradley said no. If the funds were not used for IT at this point, the opportunity is lost unless the County wishes to fund it.

Referencing the 10/5/09 MHC-CPAW Capital Facilities Workgroup meeting minutes, Vice Chair Pasquini said the Workgroup decided the needs analysis survey questionnaire presented at the 10/5/09 meeting did not accomplish what they were looking for and was to be revised. Based on the meeting minutes, Sherry Bradley revised the survey, but it’s missing an IT question.

Vice Chair Pasquini said there is community interest in a timeline and although the Workgroup doesn’t want to be driven by one, they understand the need to establish a timeline. The Workgroup is looking for ratification of the work they have agreed to and permission to move forward per the directive at the 9/3/09 Special Meeting.

Commissioner Reed stated that although the Workgroup doesn’t want to be driven by a deadline, everyone understands they don’t want to delay to the extent that it might foreclose any options. There is a general sense of a lack of data of the true needs and desires of our consumers are and that’s the reason the Workgroup came up with a “down and dirty” survey that can be sent out to an extensive group of people quickly and the data returned to determine if the option on the table

(20 Allen site) is the best meeting the needs of consumers and family members or whether there are other options that need to be explored. They are hoping the survey will provide the data they feel is currently lacking.

The Workgroup is moving as quickly as they can. Meetings are public and if a timeline is important, meetings may go to once a week and not be posted according to the Brown Act and Better Governance Ordinance requirements. Dorothy Sansoe reminded everyone the meetings can still be noticed, but just not meeting the time requirements. Vice Chair Pasquini wants to reinforce the Workgroup wants to be inclusive and thorough; not about what she wants as a commissioner, but what the community needs.

- **ACTION: Motion to authorize the Capital Facility Workgroup to create and send out a survey, to expedite it, to poll the community on the Needs Assessment Survey for Capital Facilities Funding. It would be in some form similar to this survey discussed today. (M-Pereyra/S-Overby/P-Unanimously 7-0) (Commissioner Kahler left the meeting prior to this agenda item and did not participate in the vote.)**

Discussion:

Commissioner Yoshioka wondered if expert consultants would be utilized in preparation of the survey or if the Commission has had previous experience to conduct the survey. Does the Commission have the experience to develop a survey? Sherry Bradley said MHA is committed to providing the support the Workgroup requires. She submitted the survey to the Planning and Evaluation Unit (research unit) and they've given some suggestions that were included on the draft survey. After revisions are made, the Planning and Evaluation Unit will review the survey once more. Commissioner Yoshioka wondered if the survey would be tested prior to issuance; Sherry Bradley said no.

Vice Chair Pasquini mentioned she did not believe the County did testing analysis on the original proposal. Suzanne Tavano concurred. Vice Chair believes this survey will be an acceptable tool to gather this type of material.

Mariana Moore voiced her serious concern that people may not understand what the options mean on the first page. It might be good to have some consumers fill out and test the survey. Vice Chair Pasquini mentioned we have several consumers on the MHC and Brenda Crawford offered to have consumers test the survey at the West, Central and East County centers. Sherry Bradley mentioned the Planning and Evaluation Unit suggested testing the survey as well. Mariana Moore suggested having a definitions page included in the survey. Vice Chair Pasquini mentioned she wants to make sure consumers are able to participate since that was a missing piece of the original process.

Suzanne Tavano would the survey results be balanced against data based on usage? There are "wants", but they should be balanced against actual utilization information. Commissioner Reed stated the survey would be one source of data used in conjunction with others.

Commissioner Yoshioka asked if the Research Unit would be able to provide information about how PHFs are doing in terms of best practices within the counties that have county hospitals?

He looked at Alameda County's website and found out their PHF is located 12 miles away from Highland Hospital. He wants to make sure we have access to all information on best practices and we not missing information available from other counties. Having a survey is one avenue to pursue, but we should identify best practices from within California counties that have these types of facilities as well.

Lynn Gurko commented we need to be cognizant about length of stay at a PHF and the program options that might be available. There are several PHFs with the Crestwood system and the stays are quick. Long term, getting people enrolled in programs and out in the community, it's a quick turn around. She encouraged everyone to look at practices that are high impact and quick. Vice Chair Pasquini recommended everyone read all the documentation the MHC has produced over the past year including the efforts to seek information and analyze it.

Commissioner Reed reminded the group that the motion on the floor is to ratify the Capital Facilities Workgroup intent to send out a survey. Anyone with comments regarding data collection to attend the next MHC-CPAW Capital Facilities Workgroup meeting on 10/19/09 at 6:15 pm at Mental Health Consumer Concerns facility.

10. SPECIAL REPORTS

1. Advocacy Issues-Sherry Bradley: On behalf of Julie Freestone she wanted to suggest some direction if the MHC is interested in advocacy. She left copies of Contra Costa County legislative platform that include information on 2 advocacy areas the MHC has previously discussed: Transportation and Housing. Dorothy Sansoe discussed having MHC create a legislative platform not on specific bills, but rather specific ideas. The MHC could advocate for any bill that came up focusing on ideas included on the legislative platform without going through a great deal of red tape. This idea will be discussed at a future MHC meeting. Vice Chair Pasquini mentioned having a planning retreat to create an Action Plan.

11. FUTURE AGENDA ITEMS

There was no discussion on future agenda items.

12. PUBLIC COMMENT

There was no public comment.

13. ADJOURN MEETING

➤ **ACTION:** A motion was made to adjourn the meeting at 6:50 pm. (M-Reed/S-Pererya/P-unanimously 7-0)

The next regularly scheduled meeting of the Mental Health Commission will take place Thursday, November 12 at the Concord Police Department Community Room, 4:30 – 6:30 pm.

Agenda Item 5C

Excerpt from 10/8/09 MHC Minutes from pages 6 and 7

- **ACTION: A Motion was made to authorize the Chair of the Mental Health Commission to write a letter to the Board of Supervisors requesting that the Board ask the Mental Health Director to lead an internal investigation into the circumstances surrounding the death of the unnamed young man, focusing on systemic and personnel-related issues and any corrective actions. Further request that the response to the Board from the Mental Health Director be made within 60 days. (M-Reed/S-Pereyra/P-carried unanimously 8-0)**

Contra Costa County clamps down on information about psychiatric unit violence

By Rick Radin

The Contra Costa Times

Posted: 11/03/2009 04:07:12 PM PST

Updated: 11/03/2009 05:35:51 PM PST

Contra Costa County is defending censorship as a matter of legal liability in deleting all information from written reports of violence in the psychiatric unit at Contra Costa Regional Medical Center in Martinez.

In response to a public records request, the Times received 40 reports of incidents that occurred between Jan. 1, 2004 and Aug. 10, 2009.

All information on each of the reports was completely blacked out, including the date and description of the incident.

The county's censorship extends to its own appointed Mental Health Commission, which has been unable to access the same reports.

Spurring the document request were anonymous calls to the Times about violence in the mental ward. One caller said that a patient stabbed a psychiatric nurse in the temple with a pencil or a pen. Another informant said that a patient grabbed a nurse by the hair and slammed her head against a wall.

In 2005, Times health care reporter Sandy Kleffman obtained from the county the same reports with only the patients' names inked out. Her stories about violence in the unit prompted a federal investigation and a threat to cancel Medicare and Medicaid contracts worth millions. The county agreed to improve safety and was not penalized.

Since then, the anonymous calls about violence on the ward have continued. When the Times submitted a new information request, it received the 40 fully censored reports on violent incidents.

The redactions were done to protect patient confidentiality, county Health Department spokeswoman Kate Fowlie said. By refusing to release complete information, the health department is ignoring state law and preventing the county's Mental Health Commission from acting to correct problems, commission Chairman Peter Mantas said.

An attorney who specializes in public records law said the county violated the law by denying access to information about mental ward violence.

The county is "entitled to redact names from incident reports, which is usually a sufficient answer to concerns about personal privacy," said Terry Francke, general counsel for Californians Aware, an advocacy group for public meeting and public records laws. "It gives no idea of who's involved in the incident, so no one's privacy is involved at all."

A private attorney retained by the health department had a different view.

California law protecting the confidentiality of mental health patients trumps the right of the public to know what is happening in the mental ward, said Shirley Morigan, a partner with Foley & Lardner LLP in Los Angeles.

A health care provider could be liable to fines of as much as \$25,000 per incident and civil damages if even one person were able to identify a mental patient through the release of a report, she said.

The crux of the disagreement comes in six words in a 1980 state law.

The state Welfare and Institutions Code measure states that health agencies can be held accountable for releasing confidential information about patients "in the course of providing services."

Francke and other public records law advocates said that mental health information about diagnoses, medications and treatments of patients are off-limits because they involve providing services.

However, accounts of violent incidents do not fall into the realm of providing services because they have nothing to do with a patient's treatment and are more like police reports, Francke said.

Morrigan countered that since the requested reports are internal hospital documents, the information is relevant to how the clinic provides services, and their release automatically exposes the hospital to legal liability.

"Police reports are public information," she said. "But these aren't police reports — they're reports of unusual occurrences put together by hospital risk management to monitor service."

County health department Director William Walker consulted Morrigan before ordering the redactions, Fowle said.

Mantas, the Mental Health Commission chairman, said panel also was unable to review the county's corrective action reports, which outline what the health department will do to prevent violence.

"Even though all mental health commissioners have signed confidentiality agreements authorizing us to make client contact, we received no reports," he said.

Reach Rick Radin at 925-952-5053.



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.

2010 Officer Elections

Summary of Nominations

Request for Nominations – 10/19/09

Reminder – 10/26/09

Nominations Due – 10/30/09

Candidate Response Due – 11/02/09

Nomination Date	Nominating Commissioner	Candidate	Position	Status	Date
10/19/09 10/24/09	Bielle Moore Teresa Pasquini	Art Honegger	Vice Chair	Declined	10/24/09
10/29/09	Sam Yoshioka	Dave Kahler	Chair	Accepted	11/01/09
10/29/09	Sam Yoshioka	Dave Kahler	Vice Chair	Accepted	11/01/09
10/24/09	Teresa Pasquini	Peter Mantas	Chair	Accepted	10/25/09
10/20/09	Annis Pereyra	Peter Mantas/ Teresa Pasquini	Co-Chairs	PM-Accepted TP-Accepted	10/25/09 10/30/09
10/19/09 10/29/09	Bielle Moore Scott Nelson	Teresa Pasquini	Chair	Declined	10/30/09
10/20/09	Annis Pereyra	Teresa Pasquini	Vice Chair	Accepted	10/30/09
10/24/09	Teresa Pasquini	Annis Pereyra	Vice Chair	Accepted	10/30/09

Note: Nominations are listed in alphabetical order by last name of candidate.



Nomination Solicitation Email #1

----- Message from "Anne Reed" <aereed001@hotmail.com> on Mon, 19 Oct 2009 14:53:15 -0800 -----

<sk1der@aol.com>, <dk122932@aol.com>, <pamantas@yahoo.com>, <mmckal@aol.com>, <bielle.m@gmail.com>, <skottneel@sbcgloba.net>, <cokeeffedaphne@yahoo.com>, <mfoveyby@yahoo.com>, <namap2536@aol.com>, <ablades49@yahoo.com>, <ssyoshioka@comcast.net>

Subject: Request for MHC Officer Nominations - Response due by 10/30/09

Everyone ~

At the last MHC meeting, I was selected to act as the coordinator for the upcoming MHC 2010 officer elections. On behalf of the Commission, I am now accepting nominations for the following positions:

- Chair
- Vice Chair

If you are interested in either of these positions, or would like to nominate someone for one of these positions, please let me know by **October 30, 2009**. (General job responsibilities listed in our proposed revised by-laws are listed below.)

NOTE: DO NOT USE "REPLY ALL" TO THIS EMAIL. Please respond by either creating a new email or using the "Reply" button. Nominations are confidential; in addition, we do not want to run afoul of the Brown act with a "Reply All" email string.

Please note that the following is the schedule of election activities:

- October 30, 2009 – Nominations are due to aereed001@hotmail.com
- November 1-3, 2009 – Nominees will be contacted to confirm interest and to obtain consent to serve
- November 4, 2009 – The final slate will be forwarded for inclusion on the monthly agenda
- November 12, 2009 – Elections held at the regularly scheduled MHC meeting

As you know, we have added a number of new Commissioners in 2009. This year, we suggest that nominees prepare a short statement of interest, detailing why they are willing to assume a leadership role. Nominees should submit statements to me, and it will be distributed as part of the November 12th meeting in advance of the election.

If you have any questions, feel free to contact me. In addition, Peter (pamantas@gmail.com) and Teresa (mmap2536@aol.com) are available to give you first-hand accounts of the specific responsibilities and time commitment necessary for these positions.

Anne

Chair

The Chairperson shall preside at all meetings of the Commission and perform duties consistent with these Bylaws, the Welfare and Institutions Code and the Commission Policy and Procedure Manual. The Chairperson will be in consultation with the local Mental Health Director.

The Chairperson shall conduct meetings, maintain order and decorum, and decide questions of procedure as required by the Brown Act and the Contra Costa County Better Government Ordinance.

In the event Co-Chairpersons are elected for the Commission, all the duties of the Chairperson will be divided between the Co-Chairpersons and all references to Chairperson herein will apply to the Co-Chairpersons.

The Chairperson shall appoint a representative, who may be either an officer or other member of the Commission, to the California Association of Local Mental Health Boards/Commissions. The duties of the representative to the statewide organization shall be to represent the Mental Health Commission at statewide meetings and to make regular reports to the Commission.

The Chairperson may not serve as a member of the Membership/Nominating Committee.

Vice Chair

In the event of the Chairperson's absence from a meeting of the Commission or inability to act, the Vice Chairperson shall preside and perform all duties of the Chairperson. In case of removal of the Chairperson, the Vice Chairperson shall perform all duties of the Chairperson until new elections can be held.

Nomination Submission Email # 2

----- Message from "Anne Reed" <aereed001@hotmail.com> on Mon, 26 Oct 2009 20:24:58 -0800 -----

<sk1der@aol.com>, <dk122932@aol.com>, <pamantas@yahoo.com>, <mmckal@aol.com>, <bielle.m@gmail.com>, <scottnel@sbcglobal.net>, <cokeeffedaphne@yahoo.com>, <mfoverby@yahoo.com>, <mamap2536@aol.com>, <ablades49@yahoo.com>, <ssyoshioka@comcast.net>
<ablades49@yahoo.com>, <ssyoshioka@comcast.net>
cc: <NSchott@hds.cccounty.us>

Subject: Reminder: Request for MHC Officer Nominations - Response due by 10/30/09

Everyone ~

Our Commission doesn't run unless people step up. Consider nominating yourself as Chair or Vice Chair for 2010.

All nominations are due to me by Friday, October 30th.

We all choose different ways to invest our 10 hour per month time commitment to the MHC; if you're not currently on a subcommittee or workgroup, think about serving as Chair or Vice Chair.

Email if you're interested (remember, "reply" not "reply all").

Anne

(And don't forget to attend the November 12th meeting to cast your vote. See you then.)

From: Anne Reed [mailto:aereed001@hotmail.com]

Sent: Monday, October 19, 2009 3:53 PM

To: sk1der@aol.com; dk122932@aol.com; pamantas@yahoo.com; mmckal@aol.com; bielle.m@gmail.com; scottnel@sbcglobal.net; cokeeffedaphne@yahoo.com; mfoverby@yahoo.com; mamap2536@aol.com; ablades49@yahoo.com; ssyoshioka@comcast.net
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Annue

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MHSA Housing Committee Report

CPAW Housing Committee met 10-26-09, with Maria Pappas, Graphic Facilitator, leading the group. Mashariki Kurudisha brought Anne Cory from Oakland's Corporation for Supported Housing (**CSH**) and introduced her to the workgroup.

The first discussion was in regards to the Housing Coordinator position, which has been an issue raised by the FSC (**F**amily **S**teering **C**ommittee) and even addressed in the MOC. Sherry reported that the position was approved by the CCC BOS over 2 months ago, but is still delayed in process due to freezes. There is no job description to date. I have been instructed to bring this before the MHC to ask that an official request be made by the Commission to the Board of Supervisors that this position be fast-tracked.

A "Housing 101" informational meeting has been discussed for some time. Anne Cory explained that her organization has a state contract to do housing education, so a task force has been formed that will meet separately from the larger group to work on a presentation for housing, under Anne's direction. I mentioned that there were previous focus groups held on housing over a year ago and asked that this information could be used to develop the presentation. Sherry Bradley will update the CPAW website to include Key Material, and hyperlinks will be included in the minutes that connect to materials on the website.

Funding continues to be referred to as \$9.1 Million in MHSA Housing Money and I would respectfully request that future reference to the Cal HFA money be in terms of "remaining" funds since a portion has already been designated for use in project under way. Any reference to the total amounts raises unrealistic expectations among both consumers and family members if available funds are substantially less. In addition, Vic Montoya reported that operating subsidy takes up over one-half of funding, which should further reduce expectations. Anne Cory added that it is difficult to get a 20-year service commitment when service providers work by year-to-year contract. Vic also raised NIMBY issues of the past.

CCC MHA has decided that these housing funds will be used for FSP only, while the expectation has been that housing would be accessible to all with MI, another issue worthy of consideration by the MHC and the community. I raised the issue that if Older Adults are NOT considered to be FSP, and there is no housing component in their MHSA services, then there is a critical lack of housing availability for a key group of people.

Annis Pereyra, 11-06-09

Combined MHC/CPAW Capital Facilities/IT Workgroup Report

It is with my displeasure that I must report that this workgroup, to date, has been unable to focus on the task at hand and has instead been mired in negative interactions that detract from our goal.

The survey that was worked on by both Sherry Bradley and Susan Medlin, and brought to the workgroup, has been deemed to be a flawed by a county specialist in data collection. It has not been released by the workgroup, which was what the Commission had empowered us to do. There has been no determination of a different method to use in the collection of input from the community.

In addition, at the start of the meeting of 11-02-09, Julie Freestone reported to us that CCC was having second thoughts about the agreed upon price of the land at 20 Allen Street, as the property has decreased in value during this troubled economic time. CCC amended their bid to \$500,000 less than the previous one and the land owner has until close of business 11-06-09 to accept or reject this bid. Secondly, the CCC Health Dept. has other uses for this property, and if the property is purchased, it may be put into a project that combines use.

Concurrently, there have been new developments with the IT proposal. It had been determined last month that the cost of the system that would best serve CCC Mental Health was not accessible with the \$2 million allocated, but would instead cost 5 to 6 million. Implementation of EHR (Electronic Health Records) is a federal mandate. Other departments within the county health system have had their systems upgraded to comply with the mandate. MHA was going to allocate \$2 million from MHSA funds, while other departments were brought to compliance with other funding sources. It is expected that within the next week, MHA will be notified of more detailed information concerning IT.

Teresa Pasquini has resigned as chair of this workgroup but will remain as a member, and I will be taking over as chair. An informal gathering of the workgroup members will continue with a meeting on 11-16-09 to regroup and determine how to proceed. By that time, there should be further information released about both IT and the 20 Allen property.

Annis Pereyra, 11-06-09



CALIFORNIA DEPARTMENT OF

Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-2526

October 1, 2009

Teresa Pasquini, Vice Chair
Contra Costa County Mental Health Commission
30 Douglas Drive, Suite 240
Martinez, CA 94553

Dear Ms. Pasquini:

On May 5, 2009, the Department of Mental Health (DMH) received notification of your complaint regarding Contra Costa County Mental Health (CCCMH), from Sheri Whitt, Executive Director, of the Mental Health Services Oversight and Accountability Commission (MHSOAC), in accordance with Welfare and Institutions Code Section 5845(d)(7).

On August 25, 2009, Patricia Coyle, County Programs Technical Assistance liaison spoke with you by phone. The purpose of the call was to obtain general information related to issues brought forward by Peter Mantas on behalf of the Contra Costa County Mental Health Commission. Your issues concern CCCMH and the MHSA Community Program Planning process not being inclusive to all stakeholders and that the planning process was unclear. In this phone discussion, you stated that ongoing communication with CCCMH has led to development of a new workgroup representing the needs and desires of a broader target population. After talking with you and CCCMH, we recognize that combined goals of this workgroup will improve the dialogue between CCCMH and stakeholders, and improve the MHSA Community Program Planning process. DMH encourages and recognizes CCCMH's commitment to bring consumers and family members together to promote wellness, recovery and resiliency.

DMH utilizes the Interim Mental Health Services Act (MHSA) Issue Resolution Process to address issues received by the MHSOAC and the California Mental Health Planning Council (CMHPC). The purview and authority of DMH in addressing MHSA issues is limited to alleged activities by county mental health programs that are inconsistent with MHSA statutes, regulations, or the MHSA Agreement between DMH and the county.

If you have any questions you may contact Patricia Coyle, County Programs Technical Assistance, at (916) 651-0997.

Sincerely,

SOPHIE CABRERA, CHIEF
Community Programs Branch

cc: Chief, County Programs and Technical Assistance
Beverly Whitcomb, Executive Director, MHSOAC
Peter A. Mantas, Chair CCCMHC
Donna M. Wigand, Director, CCCMH
S. Bradley, MHSA Program Manager, CCCMH

November 5, 2009

Dear CPAW members and Mental Health Commissioners:

Based on recent communications from a CPAW member, I feel that it is necessary to state the following:

- I have attempted to place the community interests above my own personal feelings. Since April of 2008, I have spent hours, days, weeks, and months gathering information, hearing different perspectives, attending meetings, focus groups, stakeholder groups, Mental Health Director Steering Committee meetings, Board of Supervisor meetings and Committees, etc., on the topic of the proposed Psychiatric Pavilion, at 20 Allen. I did not work in a vacuum. I was part of a Commission Workgroup, Chaired by another Commissioner, Art Honeger, and fellow Commissioners, Annis Pererya, and Colette O'Keefe, consumer reps to the Commission. That Workgroup reported back to the full Mental Health Commission, on a monthly basis, for support and direction on our process.
- The Mental Health Commission held a 3 hour public meeting on September 3, 2009 where it was decided that the public planning process for the MHSA Capital Facilities Component needed to "start over." There was a motion made by Commissioner Anne Reed and seconded by Commissioner Dave Kahler to work collaboratively with members of CPAW.
- Commissioner Art Honeger, a family representative to the Commission, requested to be relieved of his Chair Duties, for this newly formed workgroup, due to care giving responsibilities for his family members. Peter Mantas, Chair of the Commission, who is on medical leave, requested that I assume the responsibilities of Chairing this workgroup. This was in addition to performing as the Acting Chair of the full Commission, during Chair Mantas' absence.
- I worked closely with Julie Freestone, staff to Dr. William Walker, in coordinating the charge, focus goals, agenda, and timeline for this effort. This was discussed and agreed upon during a pre CPAW meeting, on September 17, 2009, with Mental Health Director, Donna Wigand, Deputy Director, Suzanne Tavanno, MHSA Coordinator, Sherry Bradley, Commissioner and CPAW member, Annis Pererya, and CPAW member, Veronica Vale.
- I am proud of the workgroups attempts to develop and agree on a charge at its first meeting on September 17, 2009. There was a unanimous agreement: "For the MHC Capital Facilities workgroup members and CPAW member (up to 4) to review options and alternatives (including 20 Allen site as one option) for Capital Facilities **and technology needs for mental health services in Contra Costa County** with an open mind and no pre-conceived ideas..."
- I am very comfortable with the way that I maintained balance with my personal opinions and other's opinions. When there were procedural questions, I consulted with Julie Freestone and Dorothy Sansoe, who I believe consulted County Counsel, as well. I did not attempt to "override an action taken by the majority of the workgroup..." I brought all concerns back to the workgroup for

consideration, based on new information that occurred after the October 5th meeting.

- Because of the level of personal attacks and failure to mediate the concerns that arose over the motions made at the October 5th meeting, I resigned as the Chair of the Workgroup, at the meeting held Monday, November 2, 2009. I did not want a perception of bias to prevent the workgroup's progress.
- Annis Pereyra has been appointed by Chair Mantas to take over as Chair of the MHC Capital Facilities/IT Workgroup. I will remain a member of that workgroup. A report and discussion will occur at the next Mental Health Commission meeting on November 12, 2009.

I have no respect for tactics that do not seek solutions. There are very complicated issues before both CPAW and the Commission surrounding the MHSA Capital Facilities and Information Technology Component. The Public Planning, for a county of over one million residents, should not rely on the special interest groups who have political power. The "most vulnerable" should not be defined by one stakeholder. Our mental health community has many vulnerable members of all ages, cultures, races, and zip codes. As a Commissioner, CPAW member, NAMI Board Member, Healthcare Partnership member, and Family Member of two Contra Costa County residents, with serious mental health challenges, I will honor and protect them all.

I repeat, this is not about what I want, but what the COMMUNITY NEEDS. A proper analysis of those needs has NOT been completed. I hope CPAW and the Commission will support the integrity of the Community Planning process and complete the needs analysis for BOTH Capital Facilities and Information Technology.

Sincerely,
Teresa Pasquini

DAVID KAHLER

I would like to have the four motions listed below to be placed on the agenda for the Mental Health Commission November 12, 2009 meeting.

The commission supports keeping the acute care ward, 4C, open on a permanent and indefinite basis. It is a fundament part of the mental health continuum. If the closure of 4C begins to be an item of discussion, the Health Department will inform the Mental Health Commission, the Board of Directors of NAMI Contra Costa and the Director of Mental Health Consumer Concerns.

A mental health facility is not of much use to a patient that can't get to the facility. So it is proposed that:

The Commission propose that the Mental Health Administration create a transportation plan that will fill any and all gaps in the public transportation system and furnish a means to reach CCRMC on a 24/7 basis.

The CPAW/Capital Facilities Workgroup continue on an indefinite basis with support from the Commission and the Mental Health Division to do research and develop information for the Commission.

The Commission put the proposal regarding the 20 Allen Street project on the November 12, 2009 meeting as an action item.

1110 St. Francis Drive, Concord, California, 94518

925- 676 5771 Fax: 925- 476 1444 E mail: dk122932@aol.com

Capital Facilities/Technological Needs Projects

County	Project Title	Description	Capital Facility Funds Requested	Technological Needs Funds Requested	Date Received	Date Approved
Butte	BU-03 Infrastructure EHR Viability (Fixed/Networking/Mobile)	Technological Needs	\$0	\$1,389,168	2/27/2009	6/3/2009
Butte	BU-04 Electronic Health Record (EHR) Eligibility Enhancement and Electronic Labs	Technological Needs	\$0	\$113,111	2/27/2009	6/3/2009
Butte	BU-05 Consumer Lab and Media-Enabled Conference Room	Technological Needs	\$0	\$186,560	2/27/2009	6/3/2009
Calaveras	CA-01 Integrated Client Management	Technological Needs	\$0	\$146,000	4/22/2009	7/9/2009
Calaveras	CA-02 Consumer Supports	Technological Needs	\$0	\$17,000	4/22/2009	7/9/2009
Calaveras	CA-03 Staff Supports	Technological Needs	\$0	\$217,000	4/22/2009	7/9/2009
Colusa	Joint Power of Authority (JPA) Electronic Health Record (EHR) Enhancement Project	Extend the functionality of an existing system	\$0	\$462,941	5/6/2009	7/9/2009
Contra Costa	Predevelopment funds - Cap. Facility	Pre-development funds	\$200,000	\$0	6/15/2009	6/19/2009
Fresno	Co-occurring Detoxification and Assessment Center (CODAC)	Renovation of a County owned structure	\$221,300	\$0	8/3/2009	
Fresno	FR-02 Integrated Mental Health Information System	Technological Needs	\$0	\$2,529,651	4/22/2009	6/3/2009
Fresno	FR-03 Telemedicine Technology Needs Project	Technological Needs	\$0	\$138,100	4/22/2009	6/3/2009

<i>County</i>	<i>Project Title</i>	<i>Description</i>	<i>Capital Facility Funds Requested</i>	<i>Technological Needs Funds Requested</i>	<i>Date Received</i>	<i>Date Approved</i>
Fresno	Urgent Care/Wellness Center	Renovation of a county owned structure	\$135,800	\$0	8/3/2009	
Glenn	Orland Facility	New modular building for MHSA mental health services that will be county-owned property in Orland	\$360,500	\$428,000	6/1/2009	6/30/2009
Humboldt	HU-02 Integrated Clinical and Administrative Information System	Technological Needs	\$0	\$1,403,700	4/29/2009	7/9/2009
Kern	Batch Interface to MHSA FSP DCR System - Project 9	Technological Needs	\$0	\$86,020	5/22/2009	
Kern	Consumer/Family Computer Facilities - Project 5	Technological Needs	\$0	\$69,840	5/22/2009	
Kern	ePrescribing - Project 3	Technological Needs	\$0	\$198,684	5/22/2009	
Kern	Network Infrastructure Modernization - Project 1	Technological Needs	\$0	\$800,400	5/22/2009	
Kern	Network of Care - Project 8	Technological Needs	\$0	\$81,000	5/22/2009	
Kern	Personal Health Record - Project 7	Technological Needs	\$0	\$1,450,000	5/22/2009	
Kern	Recovery Oriented Treatment Planning - Project 4	Technological Needs	\$0	\$75,000	5/22/2009	
Kern	Technology Refresh - Project 2	Technological Needs	\$0	\$650,000	5/22/2009	
Kern	Tele-Psychiatry Upgrade - Project 6	Technological Needs	\$0	\$0	5/22/2009	

<i>County</i>	<i>Project Title</i>	<i>Description</i>	<i>Capital Facility Funds Requested</i>	<i>Technological Needs Funds Requested</i>	<i>Date Received</i>	<i>Date Approved</i>
Lake	Electronic Health Record Project	Capital Facilities or additional IT / Technological Needs	\$513,500	\$275,000	7/20/2009	
Los Angeles	LA-03 Integrated Behavioral Health Info System	Provide integrated clinical, administrative, financial functionality	\$0	\$10,010,374	2/3/2009	6/19/2009
Los Angeles	LA-04 Contract Provider Technology Projects	Provide assistance to contract providers to obtain funding for the Integrated Info. Systems	\$0	\$11,250,142	2/3/2009	6/19/2009
Los Angeles	LA-05 Consumer/Family Access to Comp. Resources Project	Set-up consumer/family dedicated computer workstations in service settings	\$0	\$1,400,000	2/3/2009	6/19/2009
Los Angeles	LA-06 Personal Health Record Awareness Education Project	Development of written/online Personal Health Record awareness/education materials	\$0	\$385,000	2/3/2009	6/19/2009
Los Angeles	LA-07 Data Warehouse Redesign	Redesign current data warehousing to be compatible with implementation of electronic health record	\$0	\$772,931	2/3/2009	6/19/2009
Los Angeles	LA-08 Telepsychiatry Feasibility Study	Feasibility study to identify opportunities for a variety of telepsychiatry programs	\$0	\$322,000	2/3/2009	6/19/2009
Los Angeles	LA-09 Tech. Needs - Admin. Costs	Technological Needs - Administrative Costs	\$0	\$2,399,954	2/3/2009	6/19/2009
Mono	Antelope Valley Wellness Center	ADA upgrades to the Wellness Center	\$169,487	\$0	4/2/2009	5/15/2009
Mono	MO-02 JPA Electronic Health Record (EHR) Enhancement Project	Extends the functionality of an existing system	\$0	\$180,390	4/14/2009	7/9/2009
Mono	Supported and Transitional Housing	Renovation of a County owned structure	\$500,260	\$0	4/2/2009	5/15/2009
Monterey	Capital Facility Pre-development	Pre-development costs associated with Capital Facility project	\$443,266	\$0	10/6/2008	11/12/2008

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Monterey	Integrated Behavioral Health Electronic Health Record Project	Implement Electronic Health Record	\$0	\$2,192,193	8/4/2008	8/25/2008
Monterey	Integrated Health Services Center	Upgrade existing facility located on Fort Ord.	\$2,466,541	\$0	5/7/2009	7/23/2009
Nevada	Crown Point Circle	Renovation; Increase office space for program staff; create conference room	\$52,126	\$0	2/2/2009	3/9/2009
Nevada	Crown Point Circle, Turning Point	Renovation; Increase office space to expand client capacity for Turning Point program	\$205,100	\$0	11/18/2008	12/18/2008
Orange	401 S. Tustin	New Construction; Crisis Residential Pgm/Wellness Center/Education and Training Center	\$18,300,125	\$0	1/21/2009	3/12/2009
Riverside	Desert Safehaven Drop-in Center	Renovation; Drop-in Center/Out-patient Clinic	\$1,300,000	\$0	10/29/2008	12/18/2008
Riverside	Technological Needs Project Proposal	Technological Needs	\$0	\$4,500,000	6/3/2008	10/2/2008
Sacramento	Mental Health System Upgrade Project	Updating System Architecture to Support EHR.	\$0	\$875,000	5/14/2009	7/9/2009
San Bernardino	Behavioral Health Management Information System Replacement	New BH Management Information System with Case Management and Billing Functionality. Reporting, information analysis.	\$0	\$4,271,707	6/18/2009	8/10/2009
San Bernardino	Data Warehouse Continuation	Software development, licensure, training, software, analysis of disparate health systems data to assist in making improved operational decisions.	\$0	\$3,695,956	6/18/2009	8/10/2009

<i>County</i>	<i>Project Title</i>	<i>Description</i>	<i>Capital Facility Funds Requested</i>	<i>Technological Needs Funds Requested</i>	<i>Date Received</i>	<i>Date Approved</i>
San Bernardino	Electronic Health Record (EHR)	Expedited access to the appropriate Service Records, Automating and Streamlining the Service Provider's Workflow, Imaging System.	\$0	\$2,272,993	6/18/2009	8/10/2009
San Bernardino	Empowered Communication / SharePoint	Wireless Communication, Computers, Audio/Video Studio, Video Conferencing, MS SharePoint, Web Page, Blog, Information Kiosks.	\$0	\$1,086,500	6/18/2009	8/10/2009
San Bernardino	One Stop Center/Crisis Residential Program	Transform and modernize an existing County-owned facility	\$8,921,642	\$0	6/18/2009	7/28/2009
San Bernardino	Upgrade to HP Proliant Servers	Server Upgrade to Relieve Resource Demands and Maintain the Advancements in Data Collection, Manipulation, and Reporting.	\$0	\$61,372	6/18/2009	8/10/2009
San Bernardino	Virtual Desktop / Server Environment	Two separate virtual infrastructures, Virtual Desktop and Virtual Network.	\$0	\$1,739,532	6/18/2009	8/10/2009
San Francisco	Redwood Center	Renovation of a County owned structure, Dual diagnosis residential treatment	\$2,012,000	\$0	8/20/2009	
San Francisco	Silver Avenue Family Health Center Behavioral Health	Renovation of a County owned structure, Mental Health and other use	\$508,000	\$0	4/16/2009	7/2/2009
San Luis Obispo	SL-03 Electronic Health Record System	Implement Electronic Health Record system	\$0	\$1,210,000	4/1/2009	6/3/2009
San Mateo	eClinical Care System	Implement Electronic Health Record and Clinical Decision Support system	\$0	\$3,310,078	5/27/2008	7/28/2008
San Mateo	eClinical Care System - Expansion	Obtain items/services to ensure timely implementation of eClinical Care	\$0	\$413,010	12/16/2008	1/12/2009
San Mateo	Electronic Clinical Care	Technological Needs	\$0	\$1,563,888	4/30/2009	7/9/2009

<i>County</i>	<i>Project Title</i>	<i>Description</i>	<i>Capital Facility Funds Requested</i>	<i>Technological Needs Funds Requested</i>	<i>Date Received</i>	<i>Date Approved</i>
Santa Clara	Bed and Housing Exchange Database	Technological Needs Project Proposal 6	\$0	\$200,000	7/3/2009	
Santa Clara	Consumer and Family Health Education	Technological Needs Project Proposal 7	\$0	\$131,000	7/3/2009	
Santa Clara	Consumer Learning Center	Technological Needs Project Proposal 4	\$0	\$572,000	7/3/2009	
Santa Clara	Consumer Portal and Web Redesign	Technological Needs Project Proposal 5	\$0	\$319,000	7/3/2009	
Santa Clara	County Health Record Integration Initiative	Technological Needs Project Proposal 3	\$0	\$1,100,000	7/3/2009	
Santa Clara	Electronic Health Record	Technological Needs Project Proposal 1	\$0	\$13,600,000	7/3/2009	
Santa Clara	Enterprise Wide Data Warehouse	Technological Needs Project Proposal 2	\$0	\$2,600,000	7/3/2009	
Solano	SL-01 Electronic Health Record Readiness Project	Consulting services/prepare for implementation of Electronic Health Record	\$0	\$557,000	3/27/2009	7/9/2009
Sonoma	Norton Mental Health Center West Wing Renovation	Renovation; Create space to house MHSA programs serving children/TAY/homeless	\$597,239	\$0	2/25/2009	3/13/2009
Trinity	TN-01 Electronic Health Record Project	Implement Electronic Health Record project	\$0	\$387,000	3/25/2009	6/3/2009
Trinity	TN-02 Consumer Access to Computing Resources	Obtain internet access for clients/family members at various locations within County	\$0	\$10,000	3/25/2009	6/3/2009
Trinity	TN-03 Trinity County Telemedicine Upgrade	Purchase equipment and establish broadband connection	\$0	\$18,000	3/25/2009	6/3/2009

<i>County</i>	<i>Project Title</i>	<i>Description</i>	<i>Capital Facility Funds Requested</i>	<i>Technological Needs Funds Requested</i>	<i>Date Received</i>	<i>Date Approved</i>
Trinity	Weaverville Short-Term Respite Residential Program	Acquisition/Renovation; Short-term residential program	\$373,000	\$0	3/23/2009	4/27/2009
Tuolumne	Behavioral Health Program Integration	Renovation; Crisis Access and Intervention Program and Behavioral Health Program Integration	\$416,453	\$0	4/14/2009	5/7/2009
Totals			\$37,696,339	\$84,124,195		

MHC ISSUES TRACKING 2009

Date	Subject	Proposed Action	Follow-up Assignment	Timeline	Follow-up	Resolution
January 2009	Mental Health Coalition request to support adding new members. Voted to accept in concept enlarging the MHC Coalition.	Await report back from the Coalition before making a final determination.			Monthly	Pending
February 26, 2009	Letter from Teresa Pasquini regarding incident involving her son... Peter requested that a corrective action plan be developed... Donna agreed... Peter asked staff to follow up within 3 weeks on progress	Mental Health Director asked to provide a corrective action document. Donna reported to the MHC on the county's corrective action procedure and policy. She suggested inviting David Cassell to the April MHC meeting if more information is desired. Peter awaits the corrective action plan as agreed by MH Director. Further clarification is needed to the March 23, 2009 memo.	Staff: Follow-up with Donna.			Pending
February 26, 2009	Family Steering Committee's Letter of Concerns	The Commission was asked to respond to the letter, along with a letter from NAMI in support of the concerns expressed by the Family Steering Committee. Response received from Donna. Commission has not responded.	Commission does not have enough information to take a position and respond.	TBD		Pending
March 26, 2009	Family Steering Committee's 2 nd Letter of Concerns	Set up a Special MHC Meeting to discuss this issue.	Awaiting date/time.	TBD		Pending

MHC ISSUES TRACKING 2009

Date	Subject	Proposed Action	Follow-up Assignment	Timeline	Follow-up	Resolution
February 26, 2009	How many clients using outpatient clinics have Medicare as a possible source of payment for services	Donna to report in writing with report outlining the number of clients. The number of 200 was referenced however source information was not provided even though it was promised by Donna.	Follow-up with Donna			Response received from Donna 6/18/09 Item is still Pending Review
February 26, 2009	Medicare as a possible revenue source for outpatient clinics	Future agenda item		June		Pending
February 26, 2009	Expediting the filling of positions funded by MHSA monies	Staff: Set up an appointment for Peter, Dorothy Sansoe and Donna Wigand to meet	Donna requested holding off until she received a list of all positions with status timelines.			Pending
February 26, 2009	Request for PHF assessment information Letter 1	Letter sent to Donna Wigand with a list of questions.				Pending
March 26, 2009	Request for PHF assessment information Letter 2	Letter sent to Donna Wigand with a list of questions.				Pending
March 2009	MHC Questionnaire	Discuss distribution to county employees.	At the printer	TBD		Pending
April 2009	Bylaws Revisions	Send to County Counsel for Review	Have not been received by Donna from County Counsel		June 17	Pending

MHC ISSUES TRACKING 2009

Date	Subject	Proposed Action	Follow-up Assignment	Timeline	Follow-up	Resolution
April 2009	Reappointments of Peter, Dave and Teresa	Notification of term expirations letters sent to appointing Supervisors	Check status		June 17	Completed
April 2009	Letter to Supv. Bonilla et al re: Capital Facilities	Letter sent	No response from Supv. Bonilla. Response received from the OAC. Copy of response to Supv. Bonilla received from Donna.			Pending
May 2009	Follow-up letter to Supv. Bonilla et al re: Capital Facilities	Letter with comments from Minutes sent.	No response from Supv. Bonilla.			Pending
April 2009	Continuum of care for TAY	Request change of regulations to enable TAY to receive continued medical, housing.	Place on tracking list.			Pending
May 2009	Senior Disabled Bus Pass	Draft letter to CCCTA requesting reduced fare bus pass and permission to have a representative from MHC attend the Operations & Scheduling Committee	In process of drafting letter			Pending

MHC ISSUES TRACKING 2009

Date	Subject	Proposed Action	Follow-up Assignment	Timeline	Follow-up	Resolution
May 2009	Track MHSA Plan Public Hearing agreement	<p>Approve the plan updates assuming the following:</p> <ol style="list-style-type: none"> 1) There be balanced representation on CPAW (county staff, mental health staff are at a minimum on CPAW and a significant portion is made up of family and consumer representatives to get more people involved in the decision-making process. 2) There is heavy involvement of family and consumer members not only in discussion but also decision making (CPAW) 3) Mental Health Administration will work with all stakeholders, especially the Mental Health Commission to develop quantitative and qualitative analysis of MHSA program performance by August 31, 2009. 4) All noted substantive comments get addressed in the plan update with Mental Health Commission involvement – for discussion and review before it's submitted. 	Staff: Follow up with Sherry Bradley		May 18	Pending

MHC ISSUES TRACKING 2009

Date	Subject	Proposed Action	Follow-up Assignment	Timeline	Follow-up	Resolution
February 26, 2009	Request from Rubicon to explain how we are going to integrate CBO's, especially in West County.	Request Donna to give a written response. Donna responded to Steve from Rubicon at the March meeting.	Staff: Follow-up with Donna.	March 16		Completed Verbally during March 26 MHC meeting
February 27, 2009	Recommendation for MHC appointment of Floyd Overby	Send letter of recommendation to Supv. Uilkema Letter sent 3/3/2009	Appointed May 5th			Completed
February 26, 2009	Support of a Behavioral Health Court Grant	Letter was sent to Sheriff Rupf in support of the Behavior Health Court Grant.	Staff: Request an update from Marti Wilson and/or Lt. Mitch LeMay.	February 28	Oct. 1, follow up again Nov. 1	Completed. As of 10/1/09, Sheriff still waiting to hear.
March 26, 2009	Letter in opposition to Prop 1E	Peter is to draft a letter to be sent to the individual members of the BOS requesting their support for the Commission's position.	Await receipt of letter to place on letterhead and send to each member of BOS.			Completed
March 2009	Recommendation for MHC appointment of Anne Reed	Send letter of recommendation to Supv. Uilkema	Appointed May 5th			Completed.
April 23, 2009	Transcript of 3/26/09 Minutes	Staff is instructed to present a transcript of the Minutes.	Staff: Transcribe Minutes			Completed
August 13, 2009	California Institute for Mental Health	Determine what training they offer	Staff to follow-up with Sherry Bradley; training may be offered by CA. Mental Health Planning Council.		9/29/09; 10/8/09: Sherry Bradley still waiting for	Pending

MHC ISSUES TRACKING 2009

Date	Subject	Proposed Action	Follow-up Assignment	Timeline	information.	Resolution
Sept. 3, 2009	Ambulance transfers	Is an ambulance required for patient transfer between CCRMC and a separate facility (ie. CCRMC and a PHF next door)	Staff: follow up with MHA		Follow-up 10/2/09	Pending
Sept. 3, 2009	Info. on the number of CCC patients sent out of the county for treatment and length of stay	Donna Wigand to provide information.	Staff to follow-up with Donna			Pending
Sept. 3, 2009	Chair Mantas requested Dr. Walker look into the ED to CSU situation to improve transition	Dr. Walker to update the Commission on his findings.	Staff to follow-up with Julie Freestone?			Pending
Sept. 3, 2009	Info. on which larger counties have PHF's and how many counties have both PHF's and inpatient.	Donna Wigand to provide information.	Staff to follow-up with Donna Wigand			Pending
Oct. 8, 2009	Chart of Locked Long-Term Subacute Care Providers dated 10/7/09	Add financial information/costs to chart and re-submit to the MHC.	Staff to follow-up with Suzanne Tavano			Pending
Oct. 8, 2009	Letter to BOS regarding suicide of West County	Acting Chair is to write a letter requesting the BOS ask the Mental Health Director lead an internal	Staff to follow up with Acting Chair. Motion wording may require			Pending

MHC ISSUES TRACKING 2009

Date	Subject	Proposed Action	Follow-up Assignment	Timeline	Follow-up	Resolution
Oct. 8, 2009	consumer. Mental Health Coalition Talking Points	Investigation into the circumstances surrounding the suicide of a West County consumer. Further request a response to the BOS from the Mental Health Director be made within 60 days of receipt of the letter. Verify if and when MHC adopted the Talking Points.	confirmation at 11/12/09 MHC monthly meeting. Staff			Completed. 8/13/09 MHC monthly meeting: a motion was passed to adopt them.
Oct. 8, 2009	Needs Assessment Survey prepared by MHC-CPAW Capital Facilities Workgroup	A motion was passed supporting a survey be created, sent out and used to determine the community's input on uses for MHSA Capital Facilities funds.		tbd	tbd	Pending