

NAME OF COMMITTEE: CPAW Meeting
MEETING DATE & TIME: Thursday, March 1, 2012
LOCATION OF MEETING: 2425 Bisso Lane, Concord, CA



TOPIC	ISSUE/CONCLUSION	ACTION/RECOMMENDATION	PARTY RESPONSIBLE
	<ul style="list-style-type: none"> ○ Holly Page, Staff for Data and Support ○ Jennifer Tuipulotu, Office of Consumer Empowerment, lived experience parent of child ○ Mae Bragen, Family Member of Adult ○ Fatima Matal Sol, Alcohol and Other Drugs ○ Mildred Brown, Education ○ Chris Farnitano, M.D. Health Care ○ Neely McElroy, Child and Family Services ○ Jenny Robbins, Homeless Program ○ Jeromy Collado, Support Staff ○ Anthony Sanders, Mental Health ○ Gina Swirsding, Mental Health Commission ○ Donna Andersson, Probation <p><u>Steps</u></p> <ul style="list-style-type: none"> ○ Look at other MHS Stakeholder bodies throughout the state ○ -Consider conflict of Interest ○ Behavioral Health Processes and how they relate to MHS ○ How to ensure Stakeholder involvement, both client and family member ○ Will officially ask for recommendations both from Stigma and Discrimination, Social Inclusion Committee to best include client experiences and the same request will go out to NAMI and how we include adult family members ○ Recommendations anticipated within 6 to 8 weeks 		

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	<ul style="list-style-type: none"> • 3 PEI Statewide Projects (the original design of PEI) Suicide Prevention, Stigma and Discrimination, Student Mental Health: <p><u>Accomplished</u></p> <p><u>Center for Dignity, Social Inclusion and Stigma Discrimination (developing website)</u> vehicle for disseminating best practices and ideas for effective strategies for reducing stigma and discrimination.</p> <ul style="list-style-type: none"> ○ Education materials ○ Training materials ○ Working on the level of policy and law to support social inclusion ○ Statewide media campaign <p><u>Suicide Prevention Project- Your voice counts</u></p> <ul style="list-style-type: none"> ○ includes community forum ○ in the beginning phases, there is an opportunity for a voice regarding what areas need to be addressed in the Statewide Suicide Prevention Efforts <p><u>Children's FSP-</u> Please review the Orange, Pink and Lavender papers- back in Oct. Holly presented data for the planning and funding allocated for the FSP Plan</p> <ul style="list-style-type: none"> ○ In coordination with the Children's Lead Staff ○ Attending CATF Meetings ○ Collaborative workgroup for planning ○ Review of the collected data ○ Holly will present brainstorming ideas to 		<p style="text-align: center;">Mary Roy</p>

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	<p style="text-align: center;">April's CPAW meeting</p> <p>Kimberly Krisch- NAMI Walk on Saturday, June 2, 2012 at the Lindley Meadow, Golden Gate Park, San Francisco provides 85% of the revenue for NAMI</p> <ul style="list-style-type: none"> ○ Would like to create constituent groups for probation, AOD, MHSA, and Office of Consumer Empowerment ○ Donate \$100 receive a T-Shirt <p>Teresa Pasquini- Recovering family member</p> <ul style="list-style-type: none"> ○ There is an article in the East Bay Express that features Gloria Hill. Included alarming statistics and mentioned level of crisis in Alameda (our sister county) has the highest 5150 in California ○ References Laura's Law (not here to promote) I think mandated treatment for those with the most serious mental illness are not being handled properly, I am causing a great deal ○ Consumers float from county to county or land in our hospitals ○ It is a regional issue, what kind of planning takes place around crisis? ○ Teresa spoke in Sacramento with other family members to the legislature in regards to issues around MHSA ○ As a CPAW stakeholder what our involvement will be ○ CIMH is holding some stakeholder process, what input the does the local level of Contra Costa 	<ul style="list-style-type: none"> ➤ April 12th a Team Captain Kick-off (no cost associated) 	

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	<p>County have?</p> <ul style="list-style-type: none"> ○ The original stakeholder groups got it wrong the first time around, if those same people are developing what's going to be our local process, the maybe the local stakeholders may want to have input on what we would like it to be, rather than letting the state organizations determine again. I am just throwing it out to this group to consider. <p>Suzanne-</p> <ul style="list-style-type: none"> ○ One process is the JPA (statewide), has a stakeholder group that guides the JPA and planning process. CIMH is involved, it is not a CIMH activity 	<ul style="list-style-type: none"> ➤ Mary is the liaison for CIMH and CMHDA and can disseminate that information for the stakeholders to attend ➤ Teresa will forward information to Mary and Mary in regards to CIMH (stakeholder) involvement. Mary to send to all CPAW Members via email 	
2. Public Comment	<p>The following issues were noted:</p> <p>Ralph Hoffman- Speaking on behalf of consumers and family members who are not present here. Some may have been present at one time. There are a lot of homeless consumers and stressed out family members. I have not seen how much MHSA funds actually get to the level of consumers and family members; quite simply I do have some alternatives. I am concerned that a lot of MHSA Funds are not getting down to the lower level. We have a lot of homeless and mental health consumers.</p>	ACTION TAKEN:	All

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<p>3. Acting Mental Health Director's Report</p>	<p>The following issues were noted:</p> <p><u>Please review corral colored insert in packet</u></p> <ul style="list-style-type: none"> ○ Educationally Related Mental Health Services (ERMHS) three of the SELPA's signed the MOU. The Contra Costa SELPA representing 16 school districts has not yet signed. We are hopeful this will occur in a timely manner. ○ Bid for the Assessment Recovery Center was due March 1, 2012 ○ Bid for the Crisis Residential Treatment Program due March 15, 2012 ○ Health Center at 38th Street, will be moving to the newly constructed Health Center to be located adjacent to Doctor's Hospital. ○ Grant proposal for a preliminary project ○ The first Steering Committee for Behavioral Health Integration will meet every second Tuesday of the month. <p><u>Mentioned at the Commission</u></p> <ul style="list-style-type: none"> ○ We submitted a grant proposal to CMS for the <i>Psychiatric Emergency Demonstration Project</i>. Notification from the Feds-California was selected and we are going thru the terms and conditions ○ Responding to DHCS to accept grant, due by the beginning of the week of March 5th ○ If grant accepted there will be a 30-60 day period to put implementation plan together. <p><u>Staff Priority Needs Assessment</u></p>	<p>ACTION TAKEN:</p>	<p>Heather Sweeten-Healy, Holly Page, Laura Balon-Keleti</p>

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	<ul style="list-style-type: none"> ○ Went out to county staff ○ To extend survey to Homeless Services, AOD, and contractors ○ Work with CBO's who are not part of the alliance <p><u>Immediate Need</u></p> <ul style="list-style-type: none"> ○ More mental health presence in the respite center ○ A request to Health Services to fund a mental health clinical specialist to do initial assessments and needs identification ○ To provide supervision to interns to build an internship program within the homeless shelters to extend services out there ○ Waiting for approval from Finance <p><u>109</u></p> <ul style="list-style-type: none"> ○ Received funding for a Clinical Specialist, Part-time doctor, and Part-time Nurse to be available to provide services ○ Clinical Specialist- currently working out of the Transition Team ○ A forensics team will be built up, starting with small positions thru the 109 	<ul style="list-style-type: none"> ➤ Suzanne will send the Survey Monkey link to Mariana Moore ➤ Collected information will be consolidated and brought to the next CPAW meeting 	
<p>4. Small Group Discussion of Increased MHSA Allocation</p>	<ul style="list-style-type: none"> ● Anticipating a 10% increase in MHSA Allocation ● Need to create a plan at a 10% level and Optimistically at a 20% level to ensure we capture all available funding ● Next month review data , and recommendations ● Engage in a partnership for planning, looking at 	<p>ACTION TAKEN:</p> <ul style="list-style-type: none"> ➤ February 29, 2012- all documents were sent to members for review prior to this meeting 	<p>Mary</p>

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	<p>existing data</p> <ul style="list-style-type: none"> • Sent to all members- Consumer satisfaction survey conducted in late 2011 (Angela Pride helped launched this project Administration was done in collaboration with Office and Consumer Empowerment and Mental Health Consumer Concerns (provided us stakeholder and client experiences) • Staff Needs Assessment (disseminated more widely and will be brought to the April meeting) • Looked at strategies identified but not developed in the original stakeholder process <p><i>Purpose of break out books is to introduce the type of data that exist now and what other data should be generated?</i></p> <p>MHSA construct remains the same</p> <ul style="list-style-type: none"> ○ 80% chronically and persistently mental ill ○ 51% of 80% goes to Full Service Partnerships ○ 20% goes to PEI ○ 5% of Total MHSA budget for Innovation <p>New Proposals for Development</p> <ul style="list-style-type: none"> ○ Early Intervention for Psychosis ○ Several Innovation Programs <p>Discussed the data- please review packets</p>		

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	<ul style="list-style-type: none"> ○ Consumer Perception Survey Report- 2011 ○ Staff Priority Needs Survey ○ The plan is to reach out to the contract agencies and other behavioral Health partners to solicit input <p>Historical data on red paper- please review</p> <ul style="list-style-type: none"> ○ Summary of the stakeholder and planning process for CSS ○ Components summarized <p>Summary of consumer and transportation committee</p> <ul style="list-style-type: none"> ○ Goal to assess of what the needs are ○ What exists in the county ○ Survey for two weeks (front staff asked consumers how they arrived to the clinic, and how long it took) <p>Group questions and answers</p> <ul style="list-style-type: none"> ○ What additional kinds of data would be important to have to inform the plan update? ○ Focus on kind of data, and content of data included in packet? Use summary document to guide you ○ Given the current transition in stakeholder process, what recommendations do you have for gathering 		<p>Erin</p> <p>Groups Teresa Pasquini, Mariana Moore</p> <p>Jami, Stephen Boyd, Jr., Tom,</p> <p>Kathi, Susan, John, Lisa, Ben David Barr</p>

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	<p><u>Question #2</u></p> <ul style="list-style-type: none"> • <u>Dedicate a wall for (FSP, Non-FSP):</u> <ul style="list-style-type: none"> ○ CSS ○ PEI ○ INN • <u>Include:</u> <ul style="list-style-type: none"> ○ Projects ○ Populations ○ Gaps ○ Priorities • <u>Voting Process</u> <ul style="list-style-type: none"> ○ 3 priority votes per person ○ Color code according to stake holder's primary/secondary groups ○ CPAW members, if possible, meet with their constituency groups before next meeting 		

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	<p><u>Teresa Pasquini's Group</u></p> <p><u>Data</u></p> <ul style="list-style-type: none"> ○ # of people who need/require FSP-level of service? <p><u>Housing</u></p> <ul style="list-style-type: none"> ○ # of people in system high level of care who are ready to transition to independent housing with supportive services, but have nowhere to go? ○ What level of care/types of services do they want? ○ # Identified MH Consumers are ready to leave residential AOD treatment, programs and want supportive housing? <p><u>Consumer Voice- ></u> <u>now gather beyond 2 week survey?</u></p> <ul style="list-style-type: none"> ○ See handouts ○ Access? ○ Penetration? > See handout..... ○ Caseloads ○ Family Input <ul style="list-style-type: none"> • <u>Process Ideas: Next 2 Meetings</u> <ul style="list-style-type: none"> ○ Consumer voice/engagement in this process (in 		

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	<p>welcoming, safe way)</p> <p><i>Additional suggestions from Teresa's group:</i></p> <ul style="list-style-type: none"> ○ Number of days between the time person requests mental health services through county "access" and receives services of any nature; ○ Average caseloads of Service Coordinators/Case Managers in adult and children systems for largest percentage of consumers (consumers not in any type of intensive case management or categorical aid program), and those likely to have been identified by county in their estimate of "underserved/inappropriately served?" What are the county practices/procedures for reviewing caseloads? ○ Percentage and numbers of consumers being served in programs based on Recovery Model, and staffed by service team trained in Wellness, Recovery, Resilience approach; ○ Accessible services within Recovery Model programs and percentage of consumers utilizing services; ○ Capacity to provide collaborative, consistent, evidence-based services to individuals with co occurring disorders 		

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	<p><u>Kathi McGlaughlin's Group</u></p> <p><u>CPAW Comments</u></p> <ul style="list-style-type: none"> ○ Transportation-more consumer comment ○ Family member of adults ○ Consumer satisfaction <p><u>Barriers</u></p> <ul style="list-style-type: none"> ○ Housing ○ Vocation <p><u>Not Enough Success Data</u></p> <ul style="list-style-type: none"> ○ What is working and why? ○ What isn't working and why? ○ How do we address interfaith community? And MH especially to LGBTQIA and suicide? ○ Stigma data ○ Physical Health- how is our physical/mental health care integration helping with access to PH Care ○ Staff survey- define after school needs vs. therapeutic programs <p><u>Public Comments</u></p> <ul style="list-style-type: none"> ○ People who cannot get into the system (too many 		

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	<p>barriers)</p> <ul style="list-style-type: none"> ○ Need more cultural competent data ○ Do environmental scan ○ Intersections of race, gender, mental health, age (they are multipliers) ○ How many organizations with the same client (coordinated care) across programs and domains ○ Data on commitment to warm hand off <p><u>CPAW</u></p> <ul style="list-style-type: none"> ○ Break out by age group twice ○ Supply someone to act as facilitator and scribe to allow scribes to give input ○ All info ahead of time ○ CPAW attending this meeting! ○ Add stakeholder representative (TAY, Older Adult and Children) <p><u>Lisa Bruce's Group</u></p> <p><u>Vocational</u></p>		

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	<ul style="list-style-type: none"> ○ How many consumers are denied employment due to background checks or lack of work or too much work or gaps of work? ○ How many TAY are turned away due to # of beds? What region do they come from (shelters)? ○ How many older adults are turned away from shelters? What region do they come from? (keep in mind complex mental, medical & social challenges) <p><u>Suggestions for next meeting break out groups</u></p> <ul style="list-style-type: none"> ○ Projects that are proposed-list them all and have a voting process ○ Every CPAW stakeholder process get 6 votes ○ Color code dots 		
5. CSS Adult FSP- Program #3	<p>The following issues were noted:</p> <ul style="list-style-type: none"> ● Please review CSS Program Presentation Template (White paper) <p><u>Suggestion</u></p> <ul style="list-style-type: none"> ○ Create a stratified service Transition must include health and employment 	ACTION TAKEN:	Holly

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	<ul style="list-style-type: none"> ○ Jobs for the handicap ● What was the expansion services in (central and East)? <ul style="list-style-type: none"> ○ Rubicon and ANKA are co-located in central county funds were redirected in their existing plan ○ Now serving 155 Full Service Partners in that collaborative 		
6. PEI Program 9- Youth Development	<p>The following were noted: Kennisha presented a PowerPoint presentation and elaborated on the following programs under Program 9:</p> <ul style="list-style-type: none"> ○ James Morehouse Project located at El Cerrito High School ○ New Leaf at Martinez Unified School District- (partnership with CSU Eastbay) located at Vicente/Briones ○ RYSE ○ People Who Care ○ STAND <p>Laura reviewed the outcomes and measures for these programs</p>	<ul style="list-style-type: none"> ➤ Kennisha can send the link for the New Leaf Program ➤ Can SPIRIT speak at the New Leaf site? 	
7. Public Comment	No public comment		Grace
8. Close	6:10		