

**CPAW MEETING**  
**Date of Meeting: Thursday February 7<sup>th</sup>, 2013**  
**3:00 PM to 6:00 PM**  
**Location: 2425 Bisso Lane, Suite 100, Concord, CA 94520**



Members attending: Stephen Boyd Jr., Lisa Bruce, Brenda Crawford, Doreen Gaedtke, Tom Gilbert, John Gragnani, Molly Hamaker, Dave Kahler, Kimberly Krisch, Susanna Marshland, Kathi McLaughlin, Susan Medlin, Mariana Moore, Ryan Nestman, Teresa Pasquini

Staff attending: Cynthia Belon, Jeromy Collado, Ken Gallagher, Steven Grolnic-McClurg, Helen Kearns, Gerold Loenicker, Imo Momoh, Leslie Ochang, Holly Page, Angela Pride, Roberto Roman, Heather Sweeten-Healy, Tommy Tighe, Jennifer Tuipulotu, Cassie Brown, Doug Halpern, Stacey Tupper, Ziba Rahimzadeh, Jan Cobaleda-Kegler

Public Participants: Suzan Imani, Linnea Stanley, Glen Arnold, Devon Roberts, Beth Williams, Diana Jones.

Excused from Meeting: Ana Lubarov

TOPIC	ISSUE/CONCLUSION	ACTION/RECOMMENDATION	PARTY RESPONSIBLE
1. Opening, Agenda Review, Announcements: <ul style="list-style-type: none"> <li>• MHSAs Coordinator Update (Steve)</li> <li>• Audit Committee Update (Steve)</li> <li>• Age-related Committees Update (Staff)</li> <li>• Facilitator Update</li> </ul>	<ul style="list-style-type: none"> <li>• Agenda was reviewed</li> <li>• Introductions were made</li> <li>• Steven Grolnic-McClurg reported there will no longer be a temporary MHSAs Coordinator position. We will know more by March meeting about the MHSAs permanent position</li> <li>• Four CPAW members expressed interest in participating in the committee to design the second of the audits               <ul style="list-style-type: none"> <li>○ Looking to the Mental Health Commission to supply people. Mike Geist may do the audit and will take names of other possible auditors. Jana</li> </ul> </li> </ul>	<p>➤ <b>Kathi withdrew her participation on the committee to design the second audit</b></p>	

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<ul style="list-style-type: none"> <li>• Children’s FSP Update (Holly)</li> <li>• Others?</li> </ul>	<p>has been drafting deliverables for the first financial audit. There will be a meeting on 2/8/13 to discuss the audit.</p> <ul style="list-style-type: none"> <li>○ The second audit will have more program-related questions. The first audit will move forward rapidly</li> <li>○ Jan Cobaleda-Kegler shared Vern Wallace is contacting former members of the Child/Adolescent Task Force and combining it with people who expressed interest in the Children’s age-related committee. An email will be sent out soon with a meeting with him at mental health admin to start the process and pick a chair. There are some parents interested and we will have discussion on how we can get parents involved</li> </ul> <ul style="list-style-type: none"> <li>• Holly Page announced that the age related committees are open for input and the committees are still open to everyone interested</li> <li>• Grace Boda and Leigh Marz have decided not to renew their contract with Contra Costa County Mental Health Administration as facilitators. Their contract ends March 31.</li> <li>• Holly presented there were three parts to the Children FSP program. <ul style="list-style-type: none"> <li>○ The first is Personal Service Coordination and the contract was awarded to Seneca. Monthly meetings</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>➤ <b>Kathi is withdrawing her name from the Children’s age related committee</b></li> <li>➤ <b>John Gagnani suggested branching out the participation for the children’s age related committee to all regions and posting flyers in the waiting rooms.</b></li> </ul>	

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	<p>have started with them to get them to a place where they're able to start implementation. Contract will start March or April.</p> <ul style="list-style-type: none"> <li>○ The second RFP for Multidimensional Family Therapy (Mental Health and Substance Abuse) is out. This part is free standing with some coordination with county staff. Applications are due by Feb 15. We need a group of 6-8 people to review the RFP. The review will probably happen third or fourth week of February, with a decision hopefully happening sometime in the beginning of March.</li> <li>○ The third RFP to go out is Multi-Systemic Therapy for juvenile offenders. That will hopefully go out in the next two weeks or so and hope is to start in April</li> <li>○ The fourth component is the County Wide Assessment Team - being assembled. This should be up and running probably in the next month. All pieces are coming together nicely.</li> <li>● Lisa Bruce announced Crestwood Annual Art Show by consumers Feb 28 4-6pm</li> <li>● Molly: Hamaker announced the Putnam Clubhouse 5<sup>th</sup> birthday Feb 22 3 – 7 PM at 3024 Willow Pass Rd. Concord</li> </ul>		
2. Public Comment	<ul style="list-style-type: none"> <li>○ No public comments were made</li> </ul>		

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3. Social Inclusion	<p>Handout: Agenda Readiness Form-Social Inclusion</p> <ul style="list-style-type: none"> <li>• Susan Medlin presented Social Inclusion has been in existence since the summer of 2011. Social Inclusion came together as a community group. To be inclusive it opened to providers, family members, etc. The committee works hard to accommodate the different members and what they need. Maria Pappas is consultant. People join a Social Inclusion Committee because they're passionate and want to help. Our future hope is to have a Social Inclusion Conference this May for Mental Health Recovery Month <ul style="list-style-type: none"> <li>○ The conference planning searched for different people that were authorities on doing research into stigma on people with mental illness. They came up with a list of speakers and made a video and showed it around and took feedback on which people we would want to see speak at the conference. We received 168 returns from consumers and families, to help determine what people would like to be included in the conference.</li> <li>○ Lisa Bruce shared consumers don't always understand the language that is used in the meetings sometimes feeling left out. She participates in the Conference Planning Committee and holds meetings with Crestwood about the</li> </ul> </li> </ul>		

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	<p>conference and what they would like to see. Lisa appreciates OCE for all of their understanding, support, and patience.</p> <ul style="list-style-type: none"> <li>○ Glen Arnold, a resident of Crestwood Healing Center, shared Social Inclusion means he doesn't have to be alone. He learns how members have been successful, productive members of the society that they live in. He doesn't feel stigmatized when he goes there and feels what he says may have an impact on someone else. In the SPIRIT program he is learning things and resources he can pass on to others in the future.</li> <li>○ Jennifer Tuipulotu leads the Photovoice Subcommittee and has been the team leader for all committees and age groups leading Photovoice projects, which is an educational instrument to help consumers cope with and confront prejudice and discrimination through advocacy and education. It is a meaningful picture selected by the participant and includes a written statement with a message to educate those who are viewing the display. Goals: To showcase and debut Photovoice at the Social Inclusion conference and at non-traditional public settings. To help others understand similarities</li> </ul>		

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	<p>they share with people experiencing mental illness, and their families, and walk away with a greater feeling of connection.</p> <ul style="list-style-type: none"> <li>○ Devon Roberts displayed her Photovoice piece “See Me for Who I Am.” Project states, “When you have a mental illness, there are lots of barriers to overcome.” Picture shows a fence that is symbolic of barriers to the community, without which people would be free to relax and enjoy their lives. She thanked Doug Halpern and Chelsea for helping with her project</li> <li>○ Chelsea Holzer feels extremely grateful and privileged to have been a facilitator for this project. Facilitators sat down and supported each other and discussed how the groups were going to happen</li> <li>○ Jennifer also shared Photovoice is ready to launch almost 20 pieces from the Photovoice project at St. Mary’s, Martinez Art Gallery, New Leaf Academy, etc.</li> <li>● Susan Medlin explained Social inclusion is funded by program three of the first PEI funding for stigma reduction and awareness education.</li> <li>● Teresa raised questions about how outreach to consumers is conducted. How is stigma reduction measured and who approved the</li> </ul>		

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	<p>conference for social inclusion and how are we as a county allocating those funds?</p> <ul style="list-style-type: none"> <li>• Stephen Boyd shared his participation in the development of brochures for overcoming mental health stigma – one for mental health providers, one for peer providers, one for parents and caregivers of children, one for families of adults, one for consumers. . To create the content they spoke to different groups, had family members come in and speak to them to help them create the family member’s brochure, etc. Brochures will be distributed in the Reach Speakers Group and clinics</li> <li>• Social Inclusion committee worked together to develop a definition for stigma. Stigma can be defined as a combination of learned negative attitudes, misinformation, fear, and unfounded beliefs that motivate people to treat others or themselves differently, causing discrimination.</li> <li>• Social Inclusion is making an effort to outreach into new areas, one of them being the mental health clinics. Set up table at East County Adult and had informative materials to distribute, newsletter, etc. Goal is to bring more people into the committee. <ul style="list-style-type: none"> <li>○ Suzan shared she has learned so much She plans to encourage residents of Crestwood to attend meetings.</li> </ul> </li> <li>• Roberto Roman shared a handout that included bus information to help public transportation</li> </ul>	<ul style="list-style-type: none"> <li>➤ <b>Kathi suggested adding an estimated distance from wherever the bus stops to where the meeting location is. Also making sure that most programs that are funded are on the bus list. She also offered having some people who are in her program to help do research for the list and get credit for it as part of the program</b></li> <li>➤ <b>Teresa requested that CPAW members be able to access minutes to Social Inclusion meetings.</b></li> </ul>	

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	<p>riders coordinate their time with meetings. He enjoys having the opportunity to collaborate with individuals who have similar goals and aspirations</p> <ul style="list-style-type: none"> <li>• Brenda suggested being creative and looking into a family consumer shuttle like the state of Pennsylvania.</li> </ul>	<p><b>Information should be available to all, without having to ask for them</b></p>	
<p>4. Defining a Quorum for CPAW</p>	<ul style="list-style-type: none"> <li>• 6 members feel that 60% attendance for voting privileges is adequate. Another 6 feel that 75% attendance is adequate to vote</li> <li>• A member must have been present for the set percentage of meetings regardless of an excused absence. If a person loses voting privileges because of excessive absences, they can regain them as soon as their attendance meets the threshold percentage.</li> <li>• In voting circumstances, it is up to the facilitator to let a person know individually whether they meet the voting requirement.</li> <li>• The quorum will be used any time there is a vote</li> <li>• Brenda expressed her opinion that if we don't make CPAW relevant again none of it is going to matter. We need to revisit the core values of MHSA and the original intent of the stakeholder process.</li> <li>• The former mental health director Donna Wigand wanted CPAW to be in charge of the membership of CPAW and the ability to accept new members sits within CPAW.</li> </ul>		



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5. BREAK			
6. 12/13 Plan and Projected Budget Update	<ul style="list-style-type: none"> <li>• Steven shared we are going to fully implement the 12/13 plan. Part of what we will be working on in the coming months will be asking for CPAW’s approval to approve the plan. Unfortunately, our program and fiscal side were not on the same page, and this created an inexcusable error where people were not able to be provided with the services they needed. This will not be repeated and should not have occurred. Everyone is working hard to rectify this. We have been working on moving stuff out that’s in priority 1. RFPs will be moved out as rapidly as possible. The process to get staff hired and in place will be expedited. We will move forward to get vehicles for programs purchased. Innovation proposals for transportation and for Older Adult have been asked to be submitted for approval so that they can get those out the door.</li> <li>• Brenda explained the Older Adult innovation project was approved two years ago and has been in limbo for financial reasons, not reasons of needing another level of approval. She emphasized that any future discussion should not impact this project, which was approved years ago. <ul style="list-style-type: none"> <li>○ Steven replied that the older adult innovation project was designed prior to there being oversight as to whether a</li> </ul> </li> </ul>		

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	<p>proposal was innovative enough, but it didn't go out. The staff is working with the Oversight and Accountability Committee to have them approve it. Going forward we have to discuss what we want to do with Innovation. We need to continue to fund approved Innovation proposals. There needs to be discussion about whether we want to fund smaller pilots that we can't sustain and spread, or larger plans, unless we want to project ongoing plans for the program. It will not affect the ones that have already gone through this process. We will move as rapidly as we can in Priority 2 and 3, and the large set of hires for Mental Health staff. We feel confident for at least the next three years, based on projections, that we can sustain everything.</p> <ul style="list-style-type: none"> <li>• The Housing Committee will make a recommendation for how to spend \$650,000 of Housing money; another \$150,000 will go to transitional residences for TAY.</li> <li>• The expansion of the Alternative Ed Programs is moving forward.</li> <li>• Under other programming, up to \$200,000 for additional support for families to access PEI services was explained as going to be 2 CSWs to support families accessing PEI services, and that is moving forward.</li> <li>• Under Innovation, a training for Behavioral</li> </ul>		

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	Health Staff is being created		
7. Input on 13/14 Planning Process	<ul style="list-style-type: none"> <li>• John Gragnani said hopefully positions in the children’s clinics will be going forward. Any position hired after 1/2013 will be on a lower pension tier so those positions won’t cost as much.</li> <li>• Steve requested going back to having a functioning planning group that we can consult with and have fully functioning committees so that we can get the work done. We are not likely to have a lot of new money for the 13/14 plan, so there aren’t going to be a ton of other options but there will be some things to look at.</li> <li>• Kathi McLaughlin feels in her opinion it is up to the Planning Committee members who are present to say whether or not they would like to have a meeting. It is important to get whatever minimal information we have out to people, or say we don’t have it. It would have been helpful to know today would be discussion, not an update so she could have been better equipped to bring thoughts to the table.</li> <li>• John recalled CPAW was told was we were going to require some additional funds to build the crisis res that should be at the 20 Allen St. area and that the arc was going to be co-located at CCRMC. Have those things changed? <ul style="list-style-type: none"> <li>○ Steven replied the money from the reserve</li> </ul> </li> </ul>		

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	<p>was moved. It was not needed for building the crisis res. We are discussing operations. The request for dollars has to be in operating the programs, not constructing them.</p> <ul style="list-style-type: none"> <li>• Teresa shared data that there are 800 people a month going into PES. That's 200 more a month than there was. There is data that's been collected about where those 5150's are coming from. Is PES staff going to be invited to the table for this conversation? <ul style="list-style-type: none"> <li>○ Steven replied there is a meeting with PES tomorrow to figure out how to look at the data closely.</li> </ul> </li> <li>• Twelve people in the room expressed interest in meeting twice in the next month with Steve to discuss a process for planning for the next year.</li> <li>• In response to concerns about the fiscal process, Cynthia stated that she can't say exactly what happened to get to the point where the numbers were messed up. Would like to do a due diligence and then let's move this forward. We need to get to a place where we share information in an ongoing way to where this doesn't happen again. When the numbers were presented there was a question not about starting the programs but also about sustaining the programs.</li> <li>• In response to the communication between finance and administration Jana explained</li> </ul>	<p>➤ <b>Brenda recommended going back to the guiding principles of MHSA and look how the trust broke down and to put systems in place so this doesn't happen again</b></p>	

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	<p>when the new budget was put out, there was not a process to look at what they were already spending, which programs were already going, and what plans had been approved. There was an opportunity there that was more money than there really was. ARC, First Hope, etc. were not in the first planning session. She had information that others did not have and they did not communicate.</p>		
8. Public Comment	<ul style="list-style-type: none"> <li>• Brenda announced Krip Hop Nation on 2/14 11 - 3pm at MHCC</li> <li>• John thanked the Social Inclusion Committee. And he invites all CPAW folks to get on announcement list about meetings.</li> <li>• Glen appreciates Brenda saying “a place where they can feel safe and be themselves.”</li> </ul>		
9. Close	Meeting adjourned at 6:00 PM		