

Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, February 7, 2019

3:00 pm – 5:00 pm

Location: 2425 Bisso Lane, First Floor Conference Room, Concord, CA 94520



- Members attending:** Steve Blum, Stephen Boyd, Candace Collier, Doug Dunn, Kimberly Krisch, Sara Marsh, Mariposa McCall, Will McGarvey, Kathi McLaughlin, Melinda O’Day, Jennifer Tuipulotu
- Staff attending:** Jennifer Bruggeman, Janet Costa, Kristen He her, Sarah Kennard, Windy Taylor, Robert Thigpen, Genoveva Zesati
- Public Participants:** Glen Arnold, Tonya Arnold, Keri Banks, Loretta Bradstreet, Sean Casey, Guadalupe Cazares, Gigi Crowder, Wanda Davis, Ruth Fernandez, Cheryl Hall, Denise Hansell, Mia Jackson, Gail Miller, Kelly Ransom, James Ross, Barbara Simpson, Carwen Spencer, Hillie Thom
- Facilitator:** Maria Pappas
- Recorder:** Audrey Montana
- Staff Support:** Warren Hayes
- Excused from Meeting:** Roberto Roman
- Absent from Meeting:** David Bergesen, Lisa Bruce Courtney Cummings, Maude DeVictor, Tom Gilbert, David Kahler, James Lancaster, Jackie Lerman, Lucy Nelson, Ryan Nestman, Lauren Rettagliata, Sheri Richards, Karen Smith, Connie Steers, Chelise Stroud, Matthew Wilson, Sam Yoshioka

TOPIC	ISSUE/CONCLUSION	ACTION/RECOMMENDATION	PARTY RESPONSIBLE
1. Welcome <ul style="list-style-type: none"> • Call to Order • Roll Call, Introductions • Review Working Agreement • Announcements • Finalize Meeting Notes 	<ul style="list-style-type: none"> • Introductions made • Review Working Agreement • Announcements – <ul style="list-style-type: none"> ○ Dr. Matthew White (Acting Director of Behavioral Health Services) announced that Warren Hayes is now the Mental Health Program Chief for Contra Costa Behavioral Health Services <p>Meeting Notes - Approved (no revisions)</p>	Information Notes approved. Will be posted to MHS CPAW website.	Maria Pappas Audrey Montana to post notes.

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<p>2. Dialogue with Contra Costa Behavioral Health Services (CCBHS) Executive Staff</p> <ul style="list-style-type: none"> • Update on General Items 	<p>Dialogue with Contra Costa Behavioral Health Services (CCBHS) Executive Staff:</p> <p>Dr. Matthew White:</p> <ul style="list-style-type: none"> • No Place Like Home <ul style="list-style-type: none"> ○ Money on the state level originating from MHSA ○ Available for housing for those with a serious mental illness ○ The filing deadline for funds for the competitive round was late January ○ We filed an application for supportive housing for ten beds • Oak Grove Site <ul style="list-style-type: none"> ○ First Hope used to be located on this site ○ In the early planning states to develop this site ○ Two programs situated on the site <ul style="list-style-type: none"> ▪ Short Term Residential Treatment Program (STRTP) <ul style="list-style-type: none"> ◇ For youth up to 18 years of age ◇ This site used to be a group home ◇ For short term stays with a high level of services provided ◇ Program designated for youth ▪ Community Treatment Program <ul style="list-style-type: none"> ◇ For Transitional Aged Youth (TAY) 18-26 years old ◇ Full service Assertive Community Treatment (ACT) model program ◇ Currently in the early stages of planning this program 		<p>Dr. Matthew White, Acting Director of Contra Costa Behavioral Health Services</p>

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	<ul style="list-style-type: none"> • Mental Health <ul style="list-style-type: none"> ○ Just completed the External Quality Review Organization (EQRO) process <ul style="list-style-type: none"> ▪ Is essentially a three-day intensive audit process ▪ A group hired by the state to do a review of our services ▪ Provides recommendations and a report ▪ Just completed the closing session of the process ▪ Reviewers had lots of thoughtful questions ▪ Will receive EQRO recommendations in 90 days ▪ The Office of Consumer Empowerment was one of the highlights of the meeting as is doing very well • Diversion Related Activities <ul style="list-style-type: none"> ○ State legislation <ul style="list-style-type: none"> ▪ Encourage counties to divert people from jail who have been arrested for felonies ▪ If determined the person may have a mental illness and the mental illness played a role in committing the crime ▪ That person could then benefit from outpatient services ▪ The person would be diverted from jail to outpatient mental health treatment ▪ Ultimately the charges would later be dropped if the person participates in treatment ▪ Assembly Bill 1810 <ul style="list-style-type: none"> ◇ Pilot program which provides approximately one million dollars per year for three years with the purpose of counties engaging in diversion programs ◇ Counties can opt in or opt out ◇ Our County has chosen to participate 		

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	<ul style="list-style-type: none"> ▪ Have been meeting with the Public Defender, District Attorney and judge <ul style="list-style-type: none"> ◇ All three and Dr. White will go to Sacramento tomorrow to participate in a technical assistance program ◇ See how we can build upon services the County already has <p>Questions and Comments:</p> <p>Q: Am excited about the program. We are service providers. We have been getting calls from the Public Defender. But, we are a bit confused. Can we receive training from the Public Defender about the program (i.e. Describe the program, what it entails, service provider responsibilities)?</p> <p>A: The legislation passed. If a person is identified as a likely candidate, a service plan is established and brought to the judge. Judge will rule whether the mental illness was related to the crime and whether the plan is acceptable to approve diversion for the person. The Public Defender is moving fast and is making calls on the type of services that are available for this diversion program. The Public Defender should be talking to Marie Scannell at Forensics. We are looking at a single point of contact for this program. We will all work together to develop a good plan for this new process.</p> <p>Q: Would you be looking at peer providers to provide care or will you also hire clinical social workers with similar experiences as these individuals?</p> <p>A: Yes. Would like to have a combination of Substance Abuse Counselors, Peer Advisors, Therapists and Forensically oriented groups. Wrap around services will be provided.</p> <p>Q: How young would these individuals be? Sometimes juveniles are charged as adults. The definition of mental illness for youth is different. It would be nice to see if we can provide this service to youth.</p>		

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	<p>A: Adults. I will be going to a six-hour technical assistance meeting tomorrow and I will bring up that issue.</p> <p>Comment: The law is changing so as not to automatically charge teens as adults.</p> <p>Q: Is there new legislation regarding those who are incompetent to stand trial?</p> <p>A: There is legislation and funds regarding those who are incompetent to stand trial or at risk of being so. There is also a separate piece of legislation for these same individuals who may have committed a felony. As a result, Behavioral Health is working with the District Attorney, Public Defender, Mental Health Forensics and Contra Costa Regional Medical Center. The hospital has a Behavioral Health Court program (probation and mental health treatment). Are now determining which clients would be better served in the various environments available. Goal is to work with Diversion and Probation programs.</p> <p>Comment: The Behavioral Health Court is one of the strongest programs this County has. Works with individuals with a criminal charge and mental health issues/substance abuse issues. The program initially helped twenty people and the number is down to eight now. Staffing issues should not be the reason someone goes to jail. This new bill can strengthen this program. I know people who have greatly benefited from this program.</p> <p>Response: We will now have a coherent system to help people.</p> <p>Q: How do you choose who qualifies for diversion? What if the individual does not adhere to the diversion or other program?</p> <p>A: Diversion is at the discretion of the judge. The mental illness must be related to the crime and the individual is agreeable to diversion. The judge makes the determination what to do if a person does not participate in the diversion program. The person could be made to return to the court process.</p>		

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<p>3. Dialogue with Stakeholder Committee Representatives</p> <ul style="list-style-type: none"> • Adults • Alcohol and Other Drug Services • Children, Teens and Young Adults • Housing Committee (Health, Housing & Homeless Services) (H3) • Innovation • Membership • Mental Health Commission • Older Adults • Quality of Care (Mental Health Commission) • Social Inclusion • Suicide Prevention • System of Care 	<p>Committee Updates (Stakeholder Sharing sheets) were distributed</p> <p>Adults – The Contra Contra Action Team presented. Provided an overview of Laura’s Law and Assisted Outpatient Treatment (AOT) and Assertive Community Treatment (ACT Model). Recovery International (RI) also spoke and presented an overview of RI and Advanced WRAP Facilitation training. Meet on the fourth Tuesday of the month. Next meeting is February 26th.</p> <p>Alcohol and Other Drug Services - Representative was not present and there were no additional comments.</p> <p>Children, Teens and Young Adults – Had a guest speaker on topic of Probation and Mental Health Services. Tele-psychiatry is now being offered in the Children’s Clinic which had reduced the wait times to two to three weeks. Had a presentation of lived experience from a 15-year-old TAY guest speaker. She indicated she was in crisis, went to Psychiatric Emergency Services (PES) and was told she had an eight hour wait for services. She told of the lack of privacy at PES. The Committee is following up on her comments and suggestions. A comment was made to ask for MHSA funds to establish a children and young adult unit at PES. Dr. White responded the topic of a unit for youth at PES has been discussed and he is advocating for such a unit. The final determination is with the hospital and the County. He advises co-advocacy on all levels. Next meeting is February 14th.</p> <p>Housing Committee (H3) – Completed the yearly Point In Time Count last week. This is the basis for a lot of funding. We currently do not have the final figures. Homeless, Mentally Ill, Outreach and Treatment programs (HMIOT) funding discussed. Also discussed coordinated entry for housing, funding for Diversion programs and housing. Rapid Resolution programs, Adult Protective Services</p>		<p>Committee Representatives</p>

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	<p>grants. In East County for those who are living in their cars, there is a congregation that will be opening its doors from 6:00 am to 6:00 pm where people could have access to restrooms and snacks. A new Warming Center will be opening in West County. For the second year, we have an Intern working with the homeless at the Walnut Creek library. The Garden Park Apartments which is MHSA funded was highlighted on the local news. They do wonderful work and is a great permanent supportive housing model.</p> <p>Innovation – Have had a difficult time getting a position approved through the County. Position funded by the State. Problem is Innovation projects are time limited. Could take two plus years to start a new project. We have a new program in West County, Center for Recovery and Empowerment (CORE). County requirements and changes to State approved program details (i.e. position descriptions) causes huge delays. Suggestion (1) approvals for positions should not go through County process but through one administrator (i.e. Warren Hayes) and (2) Permit authorization for County credit card to purchase items directly (i.e. supplies, equipment, etc.). Dr. White responded he is aware of the County process and the delays. Next Week Personnel is doing a review (Rapid Improvement Event) of its hiring process. In April, there will be further procedural reviews. Warren Hayes indicated up until three years ago, MHSA was exempted from a portion of the hiring process but then Human Resources took away that exemption. We need to revisit the possibility of reinstating the exemption. Comment: Perhaps someone can speak before the Board of Supervisors directly.</p>		

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	<p>Membership – Have an application for CPAW membership. This month’s meeting falls on a holiday. Tentatively rescheduled to meet Thursday, February 21st at 1:00 pm. Comment: Committee attendance declining. Also need to encourage new CPAW membership. Welcome suggestions for outreach for new members. Suggest providing a list of the CPAW Committee members to see who is and is not present.</p> <p>Mental Health Commission – The Sherriff’s Department made a presentation. Due to AB 1194, law enforcement must look at a person’s mental health history before making a 5150 recommendation. The new 5150 forms incorporate this change. This is positive change. The Commission approved sending a letter to the County Board of Supervisors to ask the Department of Health Care Services to file an Institute of Mental Disease Thirty Day Waiver which could result is significant short-term funds for the County. Could free up realignment money. Behavioral Health Court will also be on upcoming agendas.</p> <p>Older Adults – Provided End of Life issues training and had 70-80 attendees. There is an excellent video addressing these issues. The next meeting is February 27th.</p> <p>Quality of Care (Mental Health Commission) – Will discuss the Behavioral Health Court on February the 28th.</p> <p>Social Inclusion – Plan to expand Social Inclusion to East County and West County this year. The next meeting will be February 14th will have a guest speaker and discussion for Black History month.</p> <p>Suicide Prevention – No additional comments.</p> <p>System of Care – Invite all to come. This is a vital committee. Have new housing. Looking at Oak Grove and services to be provided. Will meet February 13th at 1:00 pm.</p>		

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<p>4. MHSA Community Forum</p> <ul style="list-style-type: none"> • Summary of January 16th, After Action, Input for Future Forum Timeframe 	<p>Presentation by Jennifer Bruggeman (West County Forum – “Serving the Immigrant Community”, January 16, 2019, Richmond Memorial Auditorium): (Presentation handout provided to CPAW attendees)</p> <ul style="list-style-type: none"> • Demographics (Age) <ul style="list-style-type: none"> ○ 110 attendees ○ Half were adults between the age of 26 and 59 ○ Under 25 mainly Transitional Age Youth <ul style="list-style-type: none"> ▪ Many young people from People Who Care came from Pittsburg • Demographics (Race/Ethnicity) <ul style="list-style-type: none"> ○ 44 percent Latino ○ This was the largest number of Latino attendees of any of the three recent forums • Demographics (Identification) <ul style="list-style-type: none"> ○ 17 percent Consumers ○ 7 percent Family Members ○ 60 percent Service Providers ○ 16 percent Other • Demographic (Region of County Represented) <ul style="list-style-type: none"> ○ Arrived from West, Central and East Counties ○ 2 percent from Alameda County • Demographic (Agencies Represented) <ul style="list-style-type: none"> ○ Many Agencies and MHSA providers participated ○ Bay Area Legal Aid with attorney representative ○ Community Health for Asian Americans (CHAA) ○ Richmond Citizen Police Review Commission ○ Catholic Charities of the East Bay ○ West Contra Costa Youth Services Bureau ○ City of Richmond ○ Regional Center East Bay ○ And several other agencies and programs 		<p>Jennifer Bruggeman, MHSA Program Supervisor</p>

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	<ul style="list-style-type: none"> • Forum Flyers <ul style="list-style-type: none"> ○ In English, Spanish, Chinese and Farsi • Forum On-Site Translations Available <ul style="list-style-type: none"> ○ Spanish and Mien • Live Broadcast of Forum on Contra Costa TV <ul style="list-style-type: none"> ○ Video available on MHSA website • Two Presenters <ul style="list-style-type: none"> ○ Amy Weiss (Director of Refugee and Immigrant Services), Jewish Family Community Services East Bay ○ Blanca Gutierrez (Community Care Consortium) <ul style="list-style-type: none"> ▪ Presentation – Public Charge • Forum Survey (Top Important Issues) <ul style="list-style-type: none"> ○ Strategies for offsetting fear/mistrust in the community ○ Create a peer support system for Immigrants ○ Need for more interpreters/translation services in multiple languages ○ Better understanding of existing Mental Health and legal services • Small group discussion <ul style="list-style-type: none"> ○ Important part of this process ○ The challenge would be the noise level ○ We had a large turn out for this forum ○ The small groups were not as small (10 plus up to 15) • Service Providers Present at the Forum <ul style="list-style-type: none"> ○ Good idea for the future to introduce the service providers and let them give a summary of the services • Evaluations <ul style="list-style-type: none"> ○ Written evaluations many had comments ○ We did well ○ 92 percent agreed or strongly agreed objectives were clearly stated ○ 92 percent agreed or strongly agreed that they were satisfied with the experience 		

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	<p>Questions and Comments:</p> <p>Q: In reference to the demographics, is there any way to determine how many in each category are immigrants? How many attendees came from Immigrant communities? Can we ask if the person is first generation, second generation, etc.? Ask the region each person is from (i.e. Nigeria, Cambodia, etc.)?</p> <p>A: We do not have that information. In the future we will ask for that information.</p> <p>Warren Hayes: If we have a forum that has a theme, we will tailor the questions on the demographic survey form to the theme of the forum and the population attending.</p> <p>Comment: If you have a theme, perhaps you will see different service providers participating relevant to that specific theme.</p> <p>Q: Would you want to have the questions be anonymous for some of the themes?</p> <p>A: For this forum, we were mindful of that concern. People might be fearful to even come to event like this. We had signs that attendees did not have to write their names on the sign in sheet. Signs indicated cameras would be present but only speakers/presenters would be filmed.</p> <p>Comment: We must do outreach to the community for the forum. People may not be aware of these type of County events where service providers would be present. Need to brainstorm on doing more outreach.</p> <p>Q: Can we use public television for outreach and to advertise?</p> <p>A: Yes. Good idea. We can also use social media. There is a health system Facebook page where we may be able to publicize the forums in advance.</p> <p>Comment: We can also maybe advertise on the radio.</p>		

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	<p>Comment: One program arranged transportation to bring people (primarily youth from East County) to this West County forum. We can work with programs and organizations to arrange carpools or transportation to bring people to the forums. Ask programs and organizations to bring at least one or more clients to the forums. Having a Key Note speaker on a topic that interests people as with this forum draws people to the forums.</p> <p>Comment: Some programs and organizations are aware that this forum has information on funding. Providers show up because they understand this. We should ensure programs and providers are aware of this. Would encourage them to attend and speak up as to issues and needs. This results in stakeholder input and can affect funding.</p> <p>Comment: Immigrants live in all regions of the County. A forum on Immigrant issues should be located more centrally. Some people wanted to come to this forum in West County, but they could not come this far. This would be a transportation barrier.</p> <p>Comment: Should contact those who provide direct services. Many service providers do not know of MHSA. Outreach to these direct service providers would be good. They can inform their patients. A one on one or presentation at each clinic before the forum would be good. Clinic staff would then be informed. They work directly with the patients.</p> <p>Response: We emailed the announcement to service providers. We also distributed flyers in multiple languages. Good point.</p> <p>Q: Can we have a copy of this PowerPoint presentation? A: Yes. We will email this presentation to those on the CPAW email contact list.</p>		

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	<p>Q: The forum is now completed. What is the next step? What is done with the information obtained?</p> <p>A: Information we received from the small group discussions from all these three forums, will be included in the 2019 MHSA Plan Update. The future upcoming community forums will inform, advise CPAW about the next three-year funding cycle for MHSA.</p> <p>Input for future Forums:</p> <p>Comment: Suggest a forum in South County. We have three more? San Ramon Medical Center may be a location.</p> <p>Response: Will complete the next three forums before mid-December before the budget process. These forums are our stakeholder input for MHSA. We completed East, Central and West counties. For South County, San Ramon, maybe the Danville area could be a location. We must look for a central location, availability of the venue, if it is affordable, large enough and if there is public transportation available to the venue.</p> <p>Comment: For any region, we must find out who is receiving services and who is not. Must be region specific. What are the barriers in that region? Why are people in that region not receiving services?</p> <p>Comment: A school site is a good location for a forum. A more multigenerational approach. The school can work with us and get information out to families. There might be a school in San Ramon.</p> <p>Comment: A school site was good. People were able to break off into classrooms. Also, transportation in South County is a major issue. Total lack of public transportation. This is a potential topic for this region.</p> <p>Comment: Also, how do we make those services accessible.</p>		

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	<p>Comment: I notice people do not like to drive out of their area. We try to do programs in many parts of the County as we can. Consider displacement. People who lost housing. Where are they going and how can we connect them with services there. They do not know where the services are in their new area.</p> <p>Comment: Potential locations in San Ramon. PG&E Conference Center. San Ramon High School has a large performing arts center and breakout classrooms. They also have an alternative high school at a separate site. Might get more people to come as it would be intergenerational as it is a large school district.</p> <p>Q: After a forum, need continued open dialog. Can say we identified issues and say this is what we've done. When do you do that?</p> <p>A: Forums are usually one stop, one event. You recommend a follow up on the forum.</p> <p>Comment: Perhaps we use technology to link various areas. Video, interactive? Some people do not have the ability to get to the forums. Transportation barriers.</p> <p>Comment: School districts may be able to let you use their equipment and technology to conduct webinars.</p> <p>Comment: Upcoming forum topic could be suicide. Suicide awareness and education. Dialogue in a forum setting would be a great opportunity.</p> <p>Comment: Topic of mental illness and hidden homelessness in South County.</p> <p>Comment: Criminal justice. Criminalizing people for having a mental condition.</p> <p>Comment: Could have a forum on early childhood mental health. We provide services for young children. SB1004 is</p>		

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	<p>starting. Expanding priorities for funding. An item on this legislative list is early childhood trauma. Children who experience four or more adverse childhood experiences have a twelve-fold risk for suicide. That risk can start at birth for some children. Have a forum on this with families and providers in the room for an open discussion. How MHSA could use prevention funds could be active in this area.</p> <p>Comment: Yes. Need to help families with these issues.</p> <p>Comment: Under the current bill, there is funding outside of Prop 98. Educators support providing early childhood education. Another topic could be older adults. This is an underserved population. They do not come out to ask for help. Older adults many times would not admit they had a mental illness. They do not reach out for help and not covered very well by Medicare.</p> <p>Comment: Trauma is a topic. Also, the criminal justice system and mental illness issues. Needs to be discussed. People should learn about the diversion programs. Families need to know about this so families could advocate for family members.</p> <p>Comment: Do not forget the kids. There are kids at juvenile hall, Boys Center, Girls Center. Previously had very successful programs. They were shown to be effective. Was a collaboration by Probation, Mental Health and the schools. The programs were then defunded. These successful programs disappeared. We should put funds back into these successful programs.</p> <p>Comment: We should have a meeting to bring all the people who touch mental health together. Schools, probation. Need to bring all the leaders together to figure out how can meet more collaborately.</p> <p>Q: Who oversees the Action Team (AOT) program?</p>		

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	<p>A: Marie Scannell, Jane Cobaleda-Kegler and Dr. Matthew White.</p> <p>Comment: Been a while since I have been to a CPAW meeting. See a lot of familiar faces. I still get the same sense of sincerity when I come to these meetings. People being sincere about others who are less fortunate or disadvantaged or have mental health issues. Like when I first started coming to these meetings. I would like to thank you all for it.</p>		
5. Public Comment, Announcements	<p>Public Comment: None</p> <p>Announcements:</p> <ul style="list-style-type: none"> • NAMI Writer’s Group will be moving next month to the NAMI office. Changing meeting dates from the first Tuesday to the second Saturday of each month to permit people who work to attend. Everyone is welcome. • NAMI is having its big fund raiser (Crab Feed) at the Concord Center, March 2nd, 5 pm to 8 pm. Have raffle tickets for sale. • Want to thank Dr. Matthew White for coming in view of his busy schedule and for staying throughout the entire CPAW meeting. We wanted a dialogue and to hear from Dr. White. But more importantly, we wanted Dr. White to hear from us. We appreciate the fact that Dr. White is doing that. Thank you. 	CPAW members and attendees	Maria Pappas
6. Review of Meeting	<ul style="list-style-type: none"> • Also want to thank Dr. White for coming to the meeting, speaking and remaining to hear comments and input. Thank you. • Like the fact most people here today participated rather than having just a few people speak. 		Maria Pappas
7. Adjourn	<ul style="list-style-type: none"> • The next CPAW meeting will be March 7th from 3:00 pm to 5:00 pm. 		Warren Hayes