## Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, October 3, 2019 3:00 pm - 5:00 pm

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



**Members attending:** Stephen Boyd, Jo Bruno, Candace Collier, Doug Dunn, Kimberly Krisch, Sara Marsh, Kathi McLaughlin,

Melinda O'Day, Roberto Roman, Jennifer Tuipulotu, Amelia Wood

**Staff attending:** Jennifer Bruggeman, Janet Costa, Jessica Dominquez, Monique Harts-Washington, Michael Petersen, Ernesto Robles,

Robert Thigpen

**Public Participants:** Keri Banks, Steve Callahan, Guadalupe Cazares, Ruth Fernandez, Sean Kearns, Mia Jackson, Cheryl Maxie,

Daryn Nabeta, James Ross, Carwen Spencer, Amanda Wehrman

Facilitators: Jennifer Bruggeman, Genoveva Zesati

**Recorder:** Audrey Montana

**Staff Support:** Warren Hayes

**Excused from Meeting:** None

Absent from Meeting: Steve Blum, Lisa Bruce, Y'Anad Burrell, Courtney Cummings, Tom Gilbert, David Kahler, James Lancaster,

Jackie Lerman, Mariposa McCall, Will McGarvey, Ryan Nestman, Lauren Rettagliata, Chelise Stroud, Gina Swirsding,

Matthew Wilson, Sam Yoshioka

TOPIC	ISSUE/CONCLUSION	ACTION/	PARTY
		RECOMMENDATION	RESPONSIBLE
1. Welcome	Call to Order	Information	Jennifer
Call to Order	• Roll Call, Introductions		Bruggeman
Roll Call, Introductions	Review Working Agreement		(MHSA Program
Review Working	• Announcements		Supervisor),
Agreement	<ul> <li>Spirituality Conference organized by NAMI will be</li> </ul>		Genoveva Zesati
• Announcements	held on October 10 <sup>th</sup> and 11 <sup>th</sup> in Walnut Creek at the		(MHSA
<ul> <li>Finalize Meeting Notes</li> </ul>	Presbyterian Church. Conference fee can be waived.		Workforce
	Bart is located nearby.		Education and
	<ul> <li>Welcome to our new consultant/CPAW Facilitator,</li> </ul>		Training (WET)
	Amanda Wehrman (Home Base in San Francisco).		Coordinator

TOPIC	ISSUE/CONCLUSION	ACTION/ RECOMMENDATION	PARTY RESPONSIBLE
2. Dialogue with Contra Costa Behavioral Health Services (CCBHS) Executive Staff • Psychiatric Emergency Services (PES) and Innovation Agenda Readiness Forms (ARFs) Update and Timeline	Amanda has had experience with Health Housing and Homeless Services (H3). She will act as the Facilitator for the December CPAW meeting.  • Meeting Notes  • Approved  Dialogue With Contra Costa Behavioral Health Services (CCBHS) Executive Staff  Psychiatric Emergency Services (PES)  Dr. Matthew White:  • Building remodel  • All parties at the table and the hospital is engaged  • Reviewing possible funding – County and Board of Supervisors  • Reviewing Model of Care – area is also an area for children, is currently a small area with a medical feel and there is not a lot of clinical engagement  • Meet in two weeks on funding and remodeling  • Do not have a timeline at this time as sources for	ACTION/ RECOMMENDATION  Notes will be posted to MHSA CPAW website	PARTY RESPONSIBLE  ASA III)  Audrey Montana to post notes  Dr. Matthew White (Medical Director Contra Costa Mental Health Services)
	funding for these renovations and changes is being discussed and determined  Staff enrolled in consumer-friendly trainings  Site Visits  Completed site visit at Willow Rock Center in Alameda to see that Model of Care  Plan site visit to Santa Clara to see the Model of Care for Adults and Children  Now PES has signage that directs people to the third floor waiting area and to the Miller Wellness Center – provides information and directions  Aware there is no phone in the waiting area and will install. Will have a video phone. Currently is still a waiting area.  Also met to discuss voluntary clients		

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	Questions and Comments:		
	Comment: Our experience is that the kids are not getting the help they need. The consumers and families must be involved in the planning. We would like to review the plans. We keep getting dismissed. We are tired of waiting.  Response: (Warren Hayes) Dr. White is working hard on this project. Dr. White is very passionate for change at PES. The structural change at the hospital is not under our control. We receive the bill for the services. Dr. White is working with all parties as an advocate to push forward this project for PES.		
	Comment: This is a topic Supervisor Burgis is very interested in. She suggests the Mental Health Commission Chair and Vice Chair meet with Hospital Administration to help break down walls of resistance. We understand funding at the hospital has been cut by ten percent. So, we are aware they are concerned about funding. For funding, we should have partners. What is the timeline for releasing drawings of planned remodel?  Response: (Dr. White) We are working with the hospital. We are willing to be partners. As funding is still an issue, we do not have a timeline currently.		
	<ul> <li>Q: How do we get funding? Can we use unspent funds as a one-time cost for facility updates and construction?</li> <li>A: (Warren Hayes) Yes. Must ensure Contra Costa Regional Medical Center (CCRC) is also contributing funds to remodel their building. Also, is expensive to house those who have been released from PES.</li> <li>A: (Dr. White) Working on the funding. Need more than MHSA funds alone so we want to make sure this project is adequately funded with County and other sources.</li> </ul>		
	Q: Can we have one project manager to also oversee the direction our funds are used for this project?		

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	A: (Warren Hayes) Excellent point.	RECOMMENDATION	KEST OTGIBLE
	<ul> <li>Q: Any other topics of conversations between Behavioral Health and CCRC?</li> <li>A: (Dr. White) Currently we are focusing on PES but also discussing other topics. Hope to get all parties together to discuss other topics.</li> </ul>		
	<ul> <li>Q: What can we do to help?</li> <li>A: (Dr. White) Thank you for the information and suggestions today. Invite all to provide especially specific recommendations for changes to PES. I will inform those with decision making authority of your frustrations and input and will continue to act as your advocate.</li> </ul>		
	Innovation Agenda Readiness Forms (ARFs) Update and Timeline		
	Warren Hayes:		Warren Hayes,
	<ul> <li>The CPAW Innovation Committee</li> <li>We start new Innovation projects</li> <li>Have input and provide oversite</li> <li>We initiate, develop and help these new Innovation projects blossom</li> <li>But there is a lot of frustration due to delays in working with the County and the State. Innovation Committees in other Counties also experience this same frustration.</li> <li>The ARF prepared by the Innovation Committee - specific recommendations</li> </ul>		Mental Health Program Chief
	<ul> <li>Enable the MHSA Program Chief to have direct authority for MHSA staff, directly order equipment and supplies for projects. Currently to hire staff or order equipment or supplies must go through many levels for approval</li> <li>Put Personnel (i.e. hiring) and Contracts as Consent Items before the Board of Supervisors.</li> </ul>		

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		RECOMMENDATION	RESPONSIBLE
TOPIC	ISSUE/CONCLUSION  O Be able to directly determine and make budget decisions for Innovation projects O These recommendations are doable and actually have now been done  Warren Hayes is now the Chief of Operations and Administration for Behavioral Health and now has authority over these processes.  Makes budget decisions specific to the Innovation projects  Staff and Contracts are now on the Consent Calendar of the Board of Supervisors  No longer have the delays of being on the General Calendar for review by the Board of Supervisors  MHSA now the equivalent to a Freeze Exemption Approved by the Finance Department No longer need to go through the process that other costs centers have to go through Finance recognized the MHSA Innovation component Innovation Projects These are newly designed projects We currently have two new Innovation projects CORE program (Center for Overcoming Recovery Empowerment) Cognitive Behavioral Social Skills Training (CBSST) For new Innovation Programs, we must be selective and determine if each program will be County operated or based on contract Time limited projects (five years)	ACTION/ RECOMMENDATION	PARTY RESPONSIBLE
	<ul> <li>Takes approximately one and a half years to stand up a new Innovation program</li> <li>From the date the new program opens its doors, the five-year time period begins</li> <li>Previously getting funds approved by the County</li> </ul>		

ISSUE/CONCLUSION	ACTION/ RECOMMENDATION	PARTY RESPONSIBLE
for these projects cause major serious delays for these time limited Innovation Programs  The largest delay was providing the project reports to the State Oversight and Accountability Commission at the State level  Having the Innovation Project items now placed on the Board of Supervisor's Consent Calendar ends the delay in that level of the process. This resulted from the ARF and advocacy.  Going forward with future Innovation Projects, there will be a shorter time now before we can get the authorization from the State to proceed with the project	RECOMMENDATION	RESI ONSIBLE
Comment: The issue is whether to have County operated Innovation Programs or Contracted Programs (i.e. with Community Based Organization). Also, we need to be able to bill to be self-sufficient after the five-year period.  Response: (Warren Hayes) These are five-year programs. We watch the clock. We must determine the best billing mechanism. There must be a dialog among the leaders of the program, the County and the State. Need to ensure a revenue building mechanism for each Innovation Project to ensure future sustainability.		
Committee Updates (Stakeholder Sharing sheets) were distributed  Adults – No additional comments  Alcohol and Other Drug Services - Representative not present  Children, Teens and Young Adults – No additional comments  Housing Committee (H3) – No additional comments  Innovation – Request new responsibilities designated to Mental  Health Program Chief, Warren Hayes, regarding  operations and funding for Innovation Programs. Warren		Committee Representatives
	for these projects cause major serious delays for these time limited Innovation Programs  The largest delay was providing the project reports to the State Oversight and Accountability Commission at the State level  Having the Innovation Project items now placed on the Board of Supervisor's Consent Calendar ends the delay in that level of the process. This resulted from the ARF and advocacy.  Going forward with future Innovation Projects, there will be a shorter time now before we can get the authorization from the State to proceed with the project  Comment: The issue is whether to have County operated Innovation Programs or Contracted Programs (i.e. with Community Based Organization). Also, we need to be able to bill to be self-sufficient after the five-year period.  Response: (Warren Hayes) These are five-year programs. We watch the clock. We must determine the best billing mechanism. There must be a dialog among the leaders of the program, the County and the State. Need to ensure a revenue building mechanism for each Innovation Project to ensure future sustainability.  Committee Updates (Stakeholder Sharing sheets) were distributed Adults – No additional comments  Alcohol and Other Drug Services - Representative not present Children, Teens and Young Adults — No additional comments  Housing Committee (H3) — No additional comments  Innovation — Request new responsibilities designated to Mental Health Program Chief, Warren Hayes, regarding	for these projects cause major serious delays for these time limited Innovation Programs  The largest delay was providing the project reports to the State Oversight and Accountability Commission at the State level Having the Innovation Project items now placed on the Board of Supervisor's Consent Calendar ends the delay in that level of the process. This resulted from the ARF and advocacy. Going forward with future Innovation Projects, there will be a shorter time now before we can get the authorization from the State to proceed with the project  Comment: The issue is whether to have County operated Innovation Programs or Contracted Programs (i.e. with Community Based Organization). Also, we need to be able to bill to be self-sufficient after the five-year period.  Response: (Warren Hayes) These are five-year programs. We watch the clock. We must determine the best billing mechanism. There must be a dialog among the leaders of the program, the County and the State. Need to ensure a revenue building mechanism for each Innovation Project to ensure future sustainability.  Committee Updates (Stakeholder Sharing sheets) were distributed  Adults – No additional comments  Alcohol and Other Drug Services - Representative not present  Children, Teens and Young Adults – No additional comments  Housing Committee (H3) – No additional comments  Innovation – Request new responsibilities designated to Mental Health Program Chief, Warren Hayes, regarding operations and funding for Innovation Programs. Warren

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<ul> <li>Innovation</li> <li>Membership</li> <li>Mental Health Commission</li> <li>Older Adults</li> <li>Quality of Care (Mental Health Commission)</li> <li>Social Inclusion</li> <li>Suicide Prevention</li> <li>System of Care</li> </ul>	responsibilities.  Membership — No additional comments  Mental Health Commission — No additional comments  Older Adults — Date of November meeting will change. An Announcement will be sent.  Quality of Care (Mental Health Commission) — No additional comments  Social Inclusion — No additional comments  Suicide Prevention — No additional comments		
4. Service Provider Individualized Recovery Intensive Training (SPIRT) Presentation	Service Provider Individualized Recovery Intensive Training Program (SPIRIT):  Janet Costa:  • SPIRIT Program Information  • Program is held at Contra Costa College in San Pablo  • Nine unit college course  • Taught by peers and family members  • Celebrating 25 <sup>th</sup> year graduation  • Presented SPIRIT Video  • Applications  • New deadline to submit applications – October 18th  • No requirement of a High School Diploma or GED  • Must be eighteen by the time the classes start  • From the applications narrow down to 60 and interview all 60 applicants  • Will accept forty into the Program  • SPIRIT I and II (Training)  • Program starts January 27 <sup>th</sup> • Monday and Wednesdays from 11 am - 2 pm  • SPIRIT III (Internship)		Janet Costa, Office For Consumer Empowerment (OCE), Mental Health Community Support Worker II, SPIRIT Instructor

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TOPIC	Michael Peterson:  SPIRIT III (Internship Process)  Monday 11 am – 2 pm  Take skills learned from SPIRIT I and II and start Internships  Students trained with interview practices, role play and instructed on writing resumes  Hold a Job Fair and invite thirty different agencies that conduct interviews  Encourage students to interview with five different agencies  After interviews, will match the SPIRT intern with the appropriate agency  The Intern will work a minimum of sixty hours to qualify to graduate from the Program  After graduating the program, many students continue with their education at the College  Some students volunteer with the system or obtain part time or full-time employment  some Interns are able to stay with the agency or some move on to continue with their education  The program supplies the supplies, books, binders and also has some fee waivers (\$440.00 fee)  Students support each other with ride sharing and even study in the car as study groups  Janet Costa:  Students support each other through the Program		

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	•	RECOMMENDATION	TEST OT (STBEE
5. Report Out of Suicide Prevention Community Forum in September	Suicide Prevention MHSA Community Forum (September 12, 2019, San Ramon Community Forum):  Jennifer Bruggeman:  (Document distributed: Community Forum Summary)		Jennifer Bruggeman, Genoveva Zesati
	<ul> <li>MHSA Community Forum (Suicide Prevention)         <ul> <li>110 people attended</li> <li>92 completed demographic forms</li> <li>Gender – 67% female, 29% male, 3% other</li> <li>Majority (75%) were in the 26-59 age group</li> <li>Identity – Approximately half were service providers, approximately 25% consumers or family members, 17% CCBHS staff, 13% other</li> <li>Area of County – Most South or Central County</li> <li>Race/Ethnicity – Approximately fifty percent White/Caucasian and a general mix of other races/ethnicities</li> </ul> </li> <li>Feedback – Most Pressing Issues (Care/Needs)         <ul> <li>Housing was a topic many people provided feedback on</li> <li>More education</li> <li>Suicide prevention</li> <li>More language access</li> <li>More Mental Health resources</li> <li>Education for families with young children</li> <li>Lack of coordinated services and resources</li> <li>Need more regionally located resources and services especially in East County</li> <li>Combatting Mental Health stigma</li> </ul> </li> <li>Feedback about the Forum         <ul> <li>Over all positive feedback</li> <li>They really liked the Speakers</li> <li>Appreciated the Spanish translation</li> </ul> </li> </ul>		

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	<ul> <li>Appreciated food provided</li> <li>Areas for Improvement</li> <li>Issues with the sound system</li> <li>Wi-Fi issues (people could not livestream the event) Video is now available on the MHSA website</li> <li>Suggested using social media more to promote future events</li> <li>Group Discussions</li> <li>Four questions for discussion</li> <li>What resources exist in your community to help those effected by suicide – groups identified forty-five different resources</li> <li>What resources or services would you like to see more of – more language services and language hotlines, printed material should be in different languages, need more bilingual and bicultural staff. More trainings conducted in other languages, training for schools, peer support, training for first responders and law enforcement re suicide prevention and mental health, housing, family support advocacy, the need to serve people regardless of eligibility requirements</li> <li>Practices in your community or culture promote health and wellness - Many mentioned spirituality, law enforcement (crisis intervention services, first responders, peer support), exercise, sports, outdoor activities, being in nature, mindfulness, yoga, inclusivity</li> <li>Any other thoughts or ideas to share -</li> <li>Comment: Medication is an important issue than could be discussed at future forums.</li> <li>Comment: Perhaps have cards for people to inform others that they speak only a particular language.</li> </ul>	RECOMMENDATION	RESI ONSIBLE

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	<b>Comment:</b> My personal belief is that we are all people of color.	RECOMMENDATION	REST CTUSTBLE
	Comment: Went to the Children's leadership Council. Had a group discussion but part of the group had a Spanish translator. They made some of the same comments. Was very enlightening. Learned many children in detention. We had two good programs for incarcerated youth. But those programs were cut due to funding. We need such programs. Encourage all to come to the next meeting.		
	<b>Comment:</b> At my table was First Five. Some members wanted to know about CPAW. Asked if she would be a liaison. In the future she will present their questions and then provide them with CPAW responses.		
	Comment: The event was awesome. New organizations with resource tables were at this forum. The speaker who lost a son to suicide was an incredible speaker and inspirational. The speaker from Coroner's Office was also very interesting. Great Suicide Prevention brochures that was also provided in different languages.		
6. Update on Early Childhood Mental Health	MHSA Community Forum: Early Childhood Mental Health (Pittsburg Senior Center, November 2nd)		
Community Forum in November  Venue, date, time, flyer  Identify possible discussion points, forum helpers and agencies that will table	Jennifer Bruggeman:  • Partnering with Community Based Organizations - First 5 and We Care whose staff are here today  • For those who would like to volunteer for this Forum, please email Genoveva Zesati. The event will be livestreamed. Information on the livestream is on the Forum flyer		Jennifer Bruggeman (MHSA Program Supervisor)
	<ul> <li>Ruth Fernandez:</li> <li>This Forum is an opportunity to bring awareness about Mental Health issues re Young Children</li> <li>Supervisor Glover will do the Welcome at the Forum</li> <li>Listed the speakers and topics for the Forum</li> </ul>		Ruth Fernandez (Deputy Director, First Five Contra Costa)

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	<ul> <li>Will have the small group discussions</li> <li>Working on social media for the event</li> <li>Encourage families to attend</li> <li>Recruited volunteers for the Forum</li> <li>Will have thirteen resource tables</li> <li>Focus on children – prenatal to age five</li> </ul> Daryn Nabeta: <ul> <li>Will provide childcare for up to 24 children</li> <li>Will have child activities, breakfast and lunch</li> <li>Will have gift cards for first fifty families</li> </ul> Comment: Three of my four children started displaying early childhood trauma behavior/mental health issues at young ages. The earlier you catch it and support them, the better.		Daryn Nabeta, (Early Intervention Program Assistant, First 5 Contra Costa)
7. Public Comment and Suggestions for Future Agenda Items	<ul> <li>Public Comment:</li> <li>Would like to see a presentation on Senate Bill 10 and Peer Support Peer Respite in California. This Bill is on the Governor's desk. He has until October 11<sup>th</sup> to sign.</li> <li>Future Agenda Items:</li> <li>We should have a forum on the topic of Peer Support</li> <li>Recommend discussions between Mental Health Commission and CPAW.</li> <li>December 5<sup>th</sup> CPAW meeting will permit open discussion as to topics for CPAW.</li> </ul>		Jennifer Bruggeman, Genoveva Zesati
8. Review of Meeting	Review     Keep discussions within time allotted		Jennifer Bruggeman, Genoveva Zesati
9. Adjourn	The next CPAW meeting will be December 5 <sup>th</sup> from 3:00 pm to 5:00 pm.		Jennifer Bruggeman, Genoveva Zesati