

Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, January 9, 2020

3:00 pm – 5:00 pm

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



Members attending: Jo Bruno, Y’Anad Burrell, Candace Collier, Doug Dunn, Ana Libero, Sara Marsh, Kathi McLaughlin, Melinda O’Day, Roberto Roman, Jennifer Tuipulotu, Amelia Wood

Staff attending: Alexander Ayzenberg, Jennifer Bruggeman, Janet Costa, Jessica Dominguez, Adam Down, April Loveland, Ellie Shirgul, Dr. Suzanne Tavano, Dr. Matthew White, Genoveva Zesati

Public Participants: Alex Atkins, Keri Banks, Stan Baraghin, Pete Caldwell, Gigi Crowder, Lesley Garcia, Don Green, Cheryl Hall, Denise Harold, Mia Jackson, Cheryl Maxie, Lori Pryor, James Ross, Sar, Carwen Spencer

Facilitator: Amanda Wehrman

Recorder: Audrey Montana

Staff Support: Warren Hayes

Excused from Meeting: Stephen Boyd

Absent from Meeting: David Bergesen, Steve Blum, Lisa Bruce, Courtney Cummings, Maude DeVictor, Tom Gilbert, David Kahler, Kimberly Krisch, James Lancaster, Jackie Lerman, Will McGarvey, Mariposa McCall, 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"> • Call to Order • Roll Call, Introductions made • Review Working Agreement • Announcements <ul style="list-style-type: none"> ○ (Genoveva Zesati) There will be no Membership Committee meeting this month. Next meeting will be in February. ○ (Y’Anad Burrell) <ul style="list-style-type: none"> ▪ ACEs (Adverse Childhood Experience) Aware Grant open now. Can google ACEs Aware Grant 	Information	Amanda Wehrman (Facilitator)

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	<p>for information. Directed to Community Based Organizations, nonprofits and professionals.</p> <ul style="list-style-type: none"> ▪ Kaiser Permanente 2020 Grant Cycle (for nonprofits) has begun. Google for information. ▪ San Francisco Foundation has Equity Grants for nonprofits available. ○ (Gigi Crowder) NAMI Contra Costa will have its annual Crab Feed fundraiser event on March 7th. Volunteers welcome. • Meeting Notes <ul style="list-style-type: none"> ○ Approved no revisions 	<p>Notes approved. Will be posted to MHSA CPAW website.</p>	<p>Audrey Montana to post notes.</p>
<p>2. Dialogue with Contra Costa Behavioral Health Services (CCBHS) Executive Staff</p> <ul style="list-style-type: none"> • Update on Mental Health Services Act (MHSA) Meeting in Sacramento on December 9th 2019 	<p>(Documents distributed: Governor Newsom Proposed Budget, Peer Certification Training, CalAIM)</p> <p>Presentation by Warren Hayes (Mental Health Operations and Program Chief):</p> <ul style="list-style-type: none"> • Governor Newsom Proposed Budget <ul style="list-style-type: none"> ○ Emphasis on funding to combat homelessness ○ Augmented Board and Cares are not sufficiently funded. These are key elements to providing shelter to people suffering from serious mental illness <ul style="list-style-type: none"> ▪ Contra Costa has over twenty Augmented Board and Cares. Is a challenge to add more –limits on the amount paid for services. • Changes to Federal MediCal Payments to Behavioral Health Services Department <ul style="list-style-type: none"> ○ Attempt to reform the system and simplify the process ○ Governor Newsom is interested in such reforms ○ Will help California to obtain federal funding ○ CalAIM objective “MediCal Healthy California For All” • Gavin Newsom Administration’s Proposed Revision to the Mental Health Services Act (MHSA) <ul style="list-style-type: none"> ○ Attempt to move MHSA treatment and service dollars 		<p>Warren Hayes (Mental Health Operations and Program Chief)</p>

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	<p>to fund response to homelessness (by voters' initiative)</p> <ul style="list-style-type: none"> ○ Governor Newsom approved these revisions to be placed on the November ballot ○ We are quite concerned with this ● Tax Reform <ul style="list-style-type: none"> ○ Reform State tax deductions for high end homes and second homes - Cap the deductions for interest paying on mortgages ○ Several hundred million dollars would then be put into affordable housing ○ Draft of this legislation will be completed this Spring ● Supportive Services <ul style="list-style-type: none"> ○ No Place Like Home Permanent Supportive Housing Round Two - application deadline was yesterday ○ We completed and submitted four applications asking for 22 million dollars for over sixty units ○ Last year submitted one application and was awarded funds for 29 units in East Contra Costa County ○ These were applications for units in Central and West County ○ Submitted an application for the Oak Grove site to provide twenty affordable housing units devoted to Transition Age Youth <p>Presentation and Response to Questions by Dr. Suzanne Tavano (Director Behavioral Health Services):</p> <ul style="list-style-type: none"> ● California State Association of Counties (CSAC) <ul style="list-style-type: none"> ○ Represents all County administrators around the State. Is organizing a workgroup. Our County Administrator, David Twa, is a member of the CSAC workgroup. Our County has an indirect voice at the table. 		<p>Dr. Suzanne Tavano (Director Behavioral Health Services)</p>

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	<ul style="list-style-type: none"> • Governor’s Press Release <ul style="list-style-type: none"> ○ The renaming of CalAIM ○ Please see handout • Certified Peer Providers <ul style="list-style-type: none"> ○ Three years ago, worked with NAMI and other groups to propose legislation for Certified Peer Providers ○ Vetoed at the Governor’s desk as more financial analysis was required ○ Senator Jim Beall from Santa Clara County is willing to partner with the County Behavioral Health Directors’ Association (CBHDA) as co-sponsors ○ The financial analysis is moving forward now ○ Please refer to handout ○ There is much support for Certified Peer Providers and we are hopeful the legislation will pass this time • Governor’s Proposed Budget <ul style="list-style-type: none"> ○ Please refer to handout ○ Intent is to decrease homelessness and increasing access to behavioral health care <p>Questions and Comments:</p> <p>Q: Suggest cities organize in response to taking funds from MHSA. School boards would be concerned as they have MHSA funding for some of their school-based programs.</p> <p>A: Some cities are advocating for providing such funding directly to the city governments and not to County Behavioral Health Departments. However, our County provides funding for the homeless and we do so through the local community planning process. We tell this to the Steinberg Institute, the California Mental Health Services Oversight and Accountability Commission, Department of Health Care Services and others. To take funding from MHSA bypasses the community planning process.</p>		

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	<p>Q: Would you have information on the MHSA reserves? How can programs get funded?</p> <p>A: The funding goes through the community planning process. The community participates in the development of the MHSA Three Year Plans and the annual updates. There are two elements about the MHSA money. One is the prudent reserve – required to have a certain amount of dollars to be able to sustain programs for a period of time. The other element is unspent dollars. These are two separate buckets of money.</p> <p>Q: Is this County against taking the MHSA funds to go to combating homelessness?</p> <p>A: The MHSA funds should remain protected. The Board of Supervisors and County Accounting Office is very supportive of that. The funding goes through the community planning process.</p> <p>A: (Warren Hayes) That is consistent, and the Board has been clear as to local control of MHSA funds.</p> <p>Comment: I was at the meeting on December 9th. NAMI attended. Four hours of panels. Sacramento Mayor Steinberg stated that if he could move one billion dollars of MHSA funding and combine this with other grants, he could begin to solve the homeless problem. There were two hours of public comment. I spoke and said the Mental Health Services Act was never meant to solve homelessness. Leave MHSA funds alone. We all want to solve homelessness. But, not at the expense of MHSA treatment of the most vulnerable.</p> <p>Comment: This is equivalent to the hijacking of MHSA money. MHSA programs actually do help to reduce homelessness. There was absolutely no notice of this to the public.</p> <p>Comment: We must ensure those to be provided housing are not required to have A-One credit.</p>		

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	<p>Comment: We should have Mayors look at how much money is spent in their cities for mental health services. Taking funds away from MHSA would impact cities.</p> <p>Comment: Those of us who live in our cars need insurance, DMV registration. Difficult to get without an address. Issues involving people who live in their cars should be addressed.</p> <p>Dr. Tavano closing comments:</p> <ul style="list-style-type: none"> • We are working on a report <ul style="list-style-type: none"> ○ Will demonstrate to people in our Behavioral Health Community that we are already investing in housing and housing supports ○ During the community planning process, the County hears from the community that is being served 		
<p>3. Stakeholder Sharing by Committee Representatives on Key Topics in Committee Meetings</p> <ul style="list-style-type: none"> • Membership • Systems of Care (SOC) • Social Inclusion • Children, Teens and Young Adults • Adults • Aging and Older Adults • Innovation (INN) • Mental Health Commission (MHC) • Quality of Care • Alcohol and Other Drug Services (AOD) • Housing Committee 	<p>Committee Updates (Stakeholder Sharing sheets) were distributed</p> <p>Adults – No meeting in December.</p> <p>Aging and Older Adults: Two trainings were provided in 2019. Hope to do similar training this year. Discussing barriers, opportunities and housing for older adults. Shelter Inc presented. Next month Health, Housing and Homeless Services (H3) will present. Co-ordinated entry will be discussed. All invited to attend and provide input. Issue is that this meeting is the same time as the Transportation Committee meeting. We will discuss making the meeting time earlier.</p> <p>Alcohol and Other Drug Services - Representative not present.</p> <p>Behavioral Health Care Partnership (BHCP) – Making great progress. Updating the brochure. Have seen great improvement at Psychiatric Emergency Services PES).</p>		Committee Representatives

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<p>(Health, Housing & Homeless Services) (H3)</p> <ul style="list-style-type: none"> • Suicide Prevention • Reducing Health Disparities (RHD) • Behavioral Health Care Partnership (BHCP) Meeting • Training Advisory Workgroup (TAW) 	<p>Children, Teens and Young Adults – Discussed creating a focus group re changes being made at PES. Will discuss and request feedback. Will discuss changing the time of the meeting to start at 10:30 am. Next meeting is February 13th.</p> <p>Housing Committee (H3) – No meeting in December.</p> <p>Innovation – No additional comments.</p> <p>Membership – No membership meeting this month. Will meet in February.</p> <p>Mental Health Commission – No additional comments as to the December meeting. Yesterday at the meeting, Seneca presented on the Children’s Mobile Response Team. Director Dr. Suzanne Tavano presented the Director’s Report. Drafted the Data report. Preparing for the Orientation for new Mental Health Committee Commissioners. Will be held the hour before the monthly Mental Health Commission meeting. This Orientation will be live streamed on Contra Costa Television.</p> <p>Older Adults – No additional comments.</p> <p>Quality of Care (Mental Health Commission) – No additional comments.</p> <p>Reducing Health Disparities (RHD) – No meeting in December. Prior meetings identified key issues to focus on. Discussed top five issues for the Cultural Competency Plan. Discussed health navigators. Working to support each other and help people connect with community support workers. Will have a focus group on the issue of Asian languages. Invited all interested to attend. Next meeting will be January 27th.</p> <p>Social Inclusion – No additional comments.</p>		

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	<p>Suicide Prevention – No additional comments. Next meeting will be January 24th.</p> <p>System of Care – Next meeting will be February 12th. Discussed upcoming topics such as type of support services attached to permanent supportive housing (such as No Place Like Home), career progression opportunities, peer providers, family partners, Full-Service Partnerships, suicide prevention, early childhood mental health, cultural responses and support, peer support and training.</p> <p>Training Advisory Workgroup (TAW) – County staff and public attend and accept input on training needs. Receive suggestions on effective training. Also, review the training budget. Discuss ongoing staff training. Did not meet in December. Will next meet on January 27th.</p>		
<p>4. Update on MHSA 2018-2019 Expenditure and Budget</p>	<p>Presentation by Warren Hayes (Operations and Mental Health Program Chief)</p> <p>(Document distributed: MHSA Budget Report, Fiscal Year 2018-2019)</p> <ul style="list-style-type: none"> • 2019 MHSA Community Forum Themes <ul style="list-style-type: none"> ○ Themes recommended by CPAW Committee ○ Held three Community Forums in the Fall ○ Last month’s CPAW meeting provided a summary of the results of the three forums by Jennifer Bruggeman (MHSA Program Manager) ○ In June will go before the Board of Supervisors and present the MHSA Three Year Expenditure Plan (FY 2021 – 2024) • Review of the Report for Fiscal Year 2018-2019 (second year of the 2017-2020 Three Year Plan) <ul style="list-style-type: none"> ○ Referred to Handout (MHSA Budget Report Fiscal Year 2018-2019) ○ Summary of Approved Budget (\$5.5 Million) for spending in our local MHSA trust fund 		<p>Warren Hayes (Operations and Mental Health Program Chief)</p>

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	<ul style="list-style-type: none"> ▪ Expenditures were \$48 million - underbudget ▪ But had \$48 million in actual revenue <ul style="list-style-type: none"> ◇ Monies received from State MHSA fund and interest earned ▪ Spent a little less than revenue received ○ Fund Ledger <ul style="list-style-type: none"> ▪ Balance of unspent funds as of July 1, 2018 was \$51 million. ▪ Revenue received and interest earned was \$48 million ▪ Funds available for 18-19 Expenditures - \$100 million ▪ Revenues <ul style="list-style-type: none"> ◇ Last few years revenue stabilized. Previously revenues varied (high years and low years). Recognized that revenue could be volatile ◇ Safeguards established to provide for a reserve (for those years the revenue decreased – Prudent Reserve) ◇ Recently revenue has been increasing eight percent per year. We have prudently increased the budget five percent. Spending is at three percent. ◇ This is why the Unspent Funds have been gradually increasing ◇ Not wise to commit those funds (i.e. in a program) if the program may outlast the available reserve funds ◇ Reviewed Fund Balance, Expenditures and Prudent Reserve ◇ \$59 million in Unspent Funds as of six months ago ◇ The current fiscal year will be similar to fiscal year 18-19 		

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	<ul style="list-style-type: none"> ○ The Community Program Planning Process and the next Three-Year Expenditures Plan <ul style="list-style-type: none"> ▪ Through the three MHSA Community Forums conducted last fall, refined priority issues and topics ▪ Next month at the CPAW Committee meeting, will discuss issues/topics for funding ▪ In March, will come before the CPAW Committee with the first draft of the next Three-Year Plan ▪ Will receive input and make revisions ▪ Will post the proposed Three-Year Plan for thirty days ▪ In April, there will be a public hearing hosted by the Mental Health Commission ▪ Revisions will be made ▪ Then will go before the Board of Supervisors with the new Three-Year Plan for FY 21-24 ▪ Will have an approved MHSA Three-Year Expenditures Plan by July 1st <p>Questions and Comments:</p> <p>Q: Any information re one-time only funding? A: We would have such information in February.</p> <p>Q: Are there specific funds for the staff training? A: These funds are in last year and this year's budget. Adam Down is our Training Coordinator and has such information re training and funds spent on training. The Training Advisory Committee also discusses funding. Community organizing expenditures are located throughout the budget particularly regarding staffing.</p> <p>Q: The State put out information as to new regulations for MHSA funds in regard to expected reserves. Do you have information?</p>		

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	<p>A: The State just sent out a notice with formulas and we responded showing we are in compliance.</p> <p>Q: Did any African Americans organizations apply for funds?</p> <p>A: Many of the organizations were established seven years ago. It was a competitive process with lots of community involvement. Since then, we have not added a lot of new organizations. Organizations contact us. We have discussions and identify what are our needs. We look at our budget. When there is an opportunity, we put out a Request for Applications for competitive bidding. Most recently NAMI went through this process. There is a County prescribed process. There are currently several organizations that focus on the African American population.</p> <p>Q: You indicated growth has been about eight percent a year. What period has it been eight percent?</p> <p>A: The last six years. We must consider the large amount of funds being used for No Place Like Home. For Fiscal Year 18-19, we were slightly under our revenues. We project for Fiscal Year 19-20 our expenditures may be about even to the amount of our revenues. We will be spending down unspent funds. MHSA is one of the rare departments that has a reserve in the event of future revenue changes. Additional questions can be sent to us for next month's CPAW meeting.</p>		
<p>4. Explore Possible Forum Topics for 2020 – Suggestions include Peers in Recovery, Suicide Prevention & Cultural Responsiveness</p>	<p>Jennifer Bruggeman (MHSA Program Manager): (Document distributed: Community Program Planning Process (CPPP) 2020-2023 Three Year Plan)</p> <ul style="list-style-type: none"> • Community Program Planning Process <ul style="list-style-type: none"> ○ Reviewed last two pages of handout distributed • Three MHSA Community Forums from last six months <ul style="list-style-type: none"> ○ Held discussions and received input on issues ○ Three major issues emerged <ul style="list-style-type: none"> ▪ Peers 		<p>Jennifer Bruggeman (MHSA Program Manager)</p>

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	<ul style="list-style-type: none"> ▪ More Suicide Prevention community meetings ▪ Cultural Responsiveness • Discussion of possible Forum Topics for 2020 <ul style="list-style-type: none"> ○ Focus on Cultural Responsiveness and the African American community and language barriers ○ Look at successful and effective alternate services models used for housing. ○ Issue of homelessness <ul style="list-style-type: none"> I was homeless for ten years. I too slept in my car. Why does the community not help the homeless? • Services for people exiting the criminal justice system or coming out of state hospitals. Also address step down services for those needing less intensive services. Can discuss Senate bill 389. • Cultural responsiveness <ul style="list-style-type: none"> ○ Emphasis on Eastern European Immigrants – i.e. Russian immigrants. Many suffer from post-traumatic stress disorder, but this not addressed. Need special outreach and engagement. • Power of laughter. Can be therapeutic and helpful. • Cultural Responsiveness <ul style="list-style-type: none"> ○ Issue of language, translations. Issue of service providers “who look like you”. ○ Suggest cultural ambassadors from various communities who can help us understand culture and the clients’ views. Best if from the local communities that are being served. • Early Childhood Mental Health. Need to help communities understand that even children under five may need services. • Criminal Justice. Training for law enforcement and training in the academy. Information cards to be distributed by law enforcement. <ul style="list-style-type: none"> ○ (Suzanne Tavano) We used to have and distribute 		

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	<p>cards. NAMI Contra Costa is currently updating these cards.</p> <ul style="list-style-type: none"> • Young children and Adolescent Mental Health. Need to also focus services on children over five years old but not yet teens. Elementary and junior high school age. Not enough services for this age group. <ul style="list-style-type: none"> ○ When my twins were eleven years old, they needed services. Was difficult of find services for them. • Retreat Forum. Use this opportunity for networking. Need to single out people who provide the same services. Can have multiple resource tables and open discussions. Need to collaborate with all of Contra Costa County. Need to reach out to East County as services are lacking in that area (especially in the area past Antioch – Byron, Knightson, Discovery Bay, Bethel Island). • Training for Law Enforcement. Crisis Intervention Training. Tendency to criminalize mental health conditions. We need to fund and encourage this training for law enforcement. Should pay officers for one week of such training. This could be paid for from MHSA funds as other counties do. 		
5. Public Comment & Suggestions for Future Agenda Items	<p>Public Comment: None Announcements: None</p>	CPAW members and attendees	Amanda Wehrman
6. Plus / Delta - Review of Meeting	<ul style="list-style-type: none"> • Several CPAW subcommittee and other committee meetings times overlap. We should review the schedule of meetings and consider revising meeting times. • January 14th from 11:00 am to 1:00 pm Delta Peers will meet in Antioch. Will discuss the survey of downtown Antioch. 		Amanda Wehrman
7. Adjournment & Next CPAW Meeting	<ul style="list-style-type: none"> • The next CPAW meeting will be Thursday, February 6th from 3:00 pm to 5:00 pm. 		Amanda Wehrman