

Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, May 6, 2021

3:00 pm – 5:00 pm



<https://homebaseccc.zoom.us/j/724180505?pwd=ayswSINGeU02MTMrRklzSky1OFYyQT09>

Call In Number: 1-669-900-6833 Meeting ID Code: 724 180 505 Password: 6472

- Members Attending:** Stephen Boyd, Candace Collier, Chaplain Bobby Creekmore, Douglas Dunn, Carolyn Goldstein-Hidalgo, Sara Marsh, Roberto Roman, Jennifer Tuipulotu, Johanna Wagner, Graham Wiseman, Amelia Wood
- Staff Attending:** Dr. Suzanne Tavano, Jessica Dominguez, Adam Down, Jessica Hunt, Jaime Jenett, Kennisha Johnson, Ernesto Robles, Jonathan San Juan, Windy Taylor, Robert Thigpen
- Public Participants:** Victoria Alexander, Bree Brytus, Pete Caldwell, Diane, Helen Dreyman, Lisa Finch, John Gallagher, Susan Norwick-Horrocks
- Facilitator:** Amanda Wehrman
- Recorder:** Audrey Montana
- Staff Support:** Jennifer Bruggeman
Genoveva Zesati
- Excused from Meeting:** Kathi McLaughlin
- Absent from Meeting:** Lisa Bruce, Steve Blum, Jo Bruno, Y’Anad Burrell, Courtney Cummings, Tom Gilbert, Dave Kahler, Kimberly Krisch, James Lancaster, Jackie Lerman, Anna Lubarov, Leslie May, Mariposa McCall, Ryan Nestman, Melinda O’Day, Lauren Rettagliata, Chelise Stroud, Gina Swirsding, Matthew Wilson

TOPIC	ISSUE/CONCLUSION	ACTION/RECOMMENDATION	PARTY RESPONSIBLE
1. Welcome – Roll Call, Call to Order • Announcements • Finalize Meeting Notes	<ul style="list-style-type: none"> • Roll Call, Call to Order • Announcements – (Audrey Montana) Correction to the CPAW May Calendar. The Aging and Older Adults Workgroup will be meet once this month on May 12th. There is no meeting on May 26th. (Correction: The Workgroup met on May 26th) 	Information Notes approved. Will be posted to MESA CPAW website.	Amanda Wehrman, Facilitator Audrey Montana to post notes.

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	<ul style="list-style-type: none"> ○ (Jaime Jenett) The Contra Costa Continuum of Care (CoC) Learning Hub (Topic: Behavioral Health Resources for People Experiencing Homelessness) will be held May 10th from 1:00 – 3:00 pm. Will be a panel discussion with questions and answers afterwards. Steve Blum will be doing a high-level recap of the types of housing, including MHSA, Board and Cares, PSH, etc. The link for the Learning Hub: https://conta.cc/3nMg0pT ○ (Graham Wiseman) I have been working on Senate Bill 21 – for a California Mental Health Awareness license plate. We cleared the first committee meeting. Now in the Senate Appropriations Committee. The goal is to bring the conversation about mental health into the light. ○ (Roberto Roman) There will be a Mental Health Awareness Month Celebration on May 13th from 1:00 – 3:30 pm. Shared the flyer for the celebration. The Zoom link: https://cchealth.zoom.us/j/96176731835 ○ (Meeting Notes (April 1, 2021) – Approved no revisions 		
<p>2. Stakeholder Sharing by Meeting Groups</p> <ul style="list-style-type: none"> ● Adults Committee ● Aging & Older Adults Committee ● Alcohol and Other Drug Services (AOD) Advisory Board ● Behavioral Health Care Partnership (BHCP) Meeting ● Children, Teens and Young Adults (CTYA) Committee ● Health, Housing & Homeless Services (H3) – Continuum of Care 	<p>Adults Committee: No additional comments.</p> <p>Aging & Older Adults Committee: No additional comments.</p> <p>Alcohol and Other Drug Services (AOD) Advisory Board: No additional comments.</p> <p>Behavioral Health Care Partnership (BHCP): BHCP met on April 20th. Provided time for patient and client family stories. Received updates on grants and Psychiatric Emergency Services Units 4D and 4C. Received a presentation from the Mobile Crisis Response Team (MCRT). The MCRT will again provide a presentation at our next meeting, Tuesday, May 18th via Zoom.</p> <p>Children, Teens and Young Adults (CTYA) Committee: Still conducting meetings with Behavioral Health leadership. Committee meetings currently on hold.</p>		<p>Committee Representatives</p>

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<ul style="list-style-type: none"> • Innovation (INN) Committee • Membership Committee • Mental Health Commission (MHC) • Mental Health Commission – Quality of Care • Reducing Health Disparities (RHD) • Social Inclusion Committee • Suicide Prevention Committee • System of Care Committee • Training Advisory Workgroup (TAW) 	<p>Health, Housing and Homeless Services (H3): No additional comments,</p> <p>Innovation (INN) Committee: No additional comments.</p> <p>Mental Health Commission (MHC): The Mental Health Commission met yesterday and received a major presentation on the Crisis Intervention Rapid Response Event. The final public read out of the Event may be May 24th.</p> <p>Mental Health Commission (MHC) – Quality of Care Committee: No additional comments.</p> <p>Reducing Health Disparities (RHD): No additional comments.</p> <p>Social Inclusion Committee: No additional comments.</p> <p>Suicide Prevention Committee: Received a presentation from Fresno County on their new Innovation Suicide Prevention Follow Up Call Program. Inspiring to hear what they have done in a collaborative environment. Fresno County lost three children to suicide within forty-eight hours. Working collaboratively with medical, law enforcement and school district staff, immediately sent out a message to all parents to be aware of this crisis and provided information. Outstanding example in being proactive in suicide prevention. Also discussed having two committees (regular monthly Committee meetings) and Youth subcommittee to focus on issues relating to youth. The Suicide Prevention Request for Proposals (RFP) submissions are due tomorrow. Then a panel will review applications. Will keep CPAW updated as to this RFP.</p> <p>System of Care Committee: No additional comments.</p> <p>Training Advisory Workgroup (TAW): Will mostly likely be a combined meeting of the Training Advisory Workgroup (TAW) and the Reducing Health Disparities Workgroup (RHDW). Scheduled within the next couple of months.</p>		

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<p>3. Dialogue and General Update with Contra Costa Behavioral Health Services (BHS) Executive Leadership</p> <ul style="list-style-type: none"> • 21-22 MHSA Budget Update • COVID-19 Vaccination Update • SB803 – Updates • Community Crisis Response - Updates 	<p>Dialogue with Contra Costa County Behavioral Health Services (BHS) Executive Staff</p> <p>Dr. Suzanne Tavano:</p> <ul style="list-style-type: none"> • COVID-19 Vaccination Update <ul style="list-style-type: none"> ○ General update <ul style="list-style-type: none"> ▪ 68 to 70 percent of the Contra Costa community has had at least one vaccination. 48 percent are fully vaccinated. ▪ Have plenty of vaccines and locations to provide ▪ Fewer people now are making appointments or coming in ▪ Younger adults are resisting the vaccine (growth in incidents of their illness/hospitalization) ▪ Doing outreach and education to those not yet vaccinated ▪ Some Behavior Health clients have not been vaccinated. We are providing education and support ▪ Youth 16 years old and older are now eligible. Pfizer is the approved vaccine for youth. Public Health is planning outreach in schools and is working with the Office of Education. Anticipate very soon Pfizer will be available for youth ages twelve plus. Things are moving quickly for youth five years of age and above. Hope by the Fall all school age youth will have the opportunity to be vaccinated. Hoping school can be back in session by the Fall. Will identify youth in need of support. It has been a difficult year for youth. ○ Early Childhood Mental Health <ul style="list-style-type: none"> ▪ Moved to full service. At this time in the pandemic, the request for services has been growing. More than requests prior to the pandemic. As people are getting vaccinated, they are coming forward asking for services. 		<p>Dr. Suzanne Tavano (Director Behavioral Health Services)</p>

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	<ul style="list-style-type: none"> ○ County Mental Health Services <ul style="list-style-type: none"> ▪ Did not lose services in past year. Just reduced in-person visits. Since December, moving toward more in-person services. ▪ Now working toward more people working on site and services being delivered in person. Goal, in view of the Governor’s timeline, is to prepare for working more in person with the public. Behavioral Health Services staff may be on site a larger percentage of the time. Will determine equitably. ▪ Contra Costa is one of the leading counties in the country in the vaccination rate. We are doing really well. Need to reach out to those who have not yet been vaccinated. Goal is to obtain 80 percent vaccination rate. ▪ Yesterday Dr. Ori Tzvieli held a Town Hall for County Behavioral Health staff. Made a presentation, provided updated information, and responded to questions from County staff. ○ Adult Vaccinations <ul style="list-style-type: none"> ▪ Some clients at the three Adult Clinics are resisting being vaccinated. Working on encouraging these clients to be vaccinated. Will conduct outreach. ● Community Crisis Response Update <ul style="list-style-type: none"> ○ Rapid Improvement Event <ul style="list-style-type: none"> ▪ Yesterday gave a strong presentation. Was very comprehensive. Possibly the Mental Health Services Act – Consolidated Planning Advisory Workgroup (CPAW) may want to receive this presentation. ▪ Another event will be coming up. This is one of the largest events and is far more inclusive. All parts of our community are represented. ▪ Even looking at developing a new, modern dispatch system 		

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	<ul style="list-style-type: none"> • Grant opportunities <ul style="list-style-type: none"> ○ Last Thursday we went before the California Health Facilities Financing Agency (CHFFA) Board and were given the final award of 2.3 million dollars to convert the Behavior Health side of the Miller Wellness Center into a crisis stabilization unit for youth. Will provide family-oriented treatment. ○ Will next appear before the Board of Supervisors to accept the grant money. Once approved, the construction process will begin. • Federal level earmark legislation <ul style="list-style-type: none"> ○ Made two proposals. One to expand the Mobile Crisis Response Team by adding Substance Use Counselors to the existing Team. Second proposal to bring the Oak Grove campus up to Code so that it could open as a crisis hub (Mobile Crisis Team may reside there, Dispatch Center, develop a crisis care program for adults, youth, etc.). Met with Congressman Mark De Saulnier’s staff who advanced the proposals to the legislature for consideration. <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Graham Wiseman) Is there going to be a hub? We already have an outstanding Call Center. Response: It is not a decision currently. The grant is for bricks and mortar to bring the building up to Code. The hub addresses part of the needs. • (Kennisha Johnson) We would love to hear from you re a single phone number to call for the Design Team. • (Roberto Roman) Is there any update as to Senate Bill 803 – Peer Support Specialist Certification? Here is a link for information as to Peer Support Services: https://www.dhcs.ca.gov/services/Pages/Peer-Support-Services.aspx <p>Response: Jennifer Tuipulotu has been my partner on this. She can provide an update. (Jennifer Tuipulotu) Several</p>		

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	<p>organizations have been sending recommendations to the State (i.e. training, hours required for training, Coe of Ethics, etc.). Now under review by the State Department of Health Care Services. They will compose guidelines then send an information notice to the County in July. Will then use the guidelines to develop our County program. (Dr. Tavano) We have been well represented by Jennifer Tuipulotu in the meetings.</p> <ul style="list-style-type: none"> • (Chaplain Creekmore) I participated in the Value Stream Mapping Event of last year. Were discussions of having to wait for police to show up and the effect of police presence. Is there anything about that issue? Also wondering if any updates as to SB 803 regarding grandfathering in paid employed and volunteer Peer Specialists as of January 1, 2022? Response: (Jennifer Tuipulotu) We are asking that those also volunteering be considered for being grandfathered in. We have discussed that in meetings. Some agencies providing recommendations have cited this. (Dr. Tavano) Thank you for raising that. I will definitively weigh in whenever I have an opportunity. • (Douglas Dunn) Will Oak Grove be an alternative destination as opposed to going to Psychiatric Emergency Services (PES)? Response: It could be. We are looking at alternate destinations. • (Jonathan San Juan) At the Rapid Improvement Event presentation, there were many police representatives. The more connection with police is a great value. Can you tell how that developed and how police departments will be involved? Did all police departments in the area attend? I was looking for representation from Antioch. Response: The cosponsors of the event are the area Mayors (six City Managers) and Health Services. We have invited other police districts (other than the six locals) to participate. The Design Team is looking at the collaborative model. After the call and initial assessment, it will be determined if law enforcement needs to 		

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	<p>be present in the response. Will be partnering only when necessary. Goal is to move toward a non-law enforcement model as much as possible but also knowing that at times is important for everyone’s safety and well-being that it be a collaborative response. (Graham Wiseman) There are 34 law enforcement agencies in the County. Not having full representation is not having full support. (Douglas Dunn) Antioch is very involved both the City Manager and the Police Department.</p>		
<p>4. 21-22 Annual Update to 3 Year Plan – Draft</p> <ul style="list-style-type: none"> • Presentation and Overview of 21-22 Plan 	<p>Presentation by Jennifer Bruggeman: (PowerPoint presentation – “MHSA 3 Year Plan 21-22 Annual Update”)</p> <ul style="list-style-type: none"> • The Fiscal Year 2021-2022 Annual Update <ul style="list-style-type: none"> ○ The MHSA 3 Year Plan was approved by the Board of Supervisors this February. Delayed due to the pandemic. ○ Posted on the Mental Health Services Act (MHSA) website on May 3rd for a 30-day Public Comment period. Comment cards in English and Spanish and this PowerPoint presentation are also posted. ○ The public hearing on the Plan Update will be held at the Mental Health Commission meeting either June 2nd or July 7th. The date will be announced. ○ Today will outline the changes in the Plan Update • Supportive Housing <ul style="list-style-type: none"> ○ Provided updates on No Place Like Home applications. The new Chief of Supportive Housing Services is Kennisha Johnson. The ongoing goal is to increase on-site permanent supportive housing services and supports. • Early Childhood Mental Health <ul style="list-style-type: none"> ○ The Early Childhood Mental Health Request for Proposal award has been awarded to the ECPIC Collaborative. We Care for Children will act as the lead agency. 		<p>Jennifer Bruggeman. (Mental Health Services Act (MHSA) Program Manager)</p>

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	<ul style="list-style-type: none"> ○ Services include outreach, education, and parenting support for families with children 0-5 years old. ○ Funding will be \$125,000.00 per year PEI contract ○ Prevention and Early Intervention (PEI) enhancement to the Children’s System of Care ● Suicide Prevention <ul style="list-style-type: none"> ○ The Suicide Prevention RFP was released. Applications to be submitted starting tomorrow. Services expected to begin July 1, 2021. Has a \$50,000.00 a year funding. PEI enhancements to Countywide suicide prevention efforts ● Mental Health Career Pathways <ul style="list-style-type: none"> ○ Expand the Loan Repayment Program to Community Support Workers (Peer Providers) and Mental Health Clinical Specialists ○ Goal of increasing retention and language capacity among workforce ○ Funded through Workplace Education and Training (WET) and the Greater Bay Area Regional Partnership with the California Mental Health Services Authority (CalMHSA) and the Office of Statewide Health Planning and Development (OSHPD) ● Looking Ahead <ul style="list-style-type: none"> ○ Provided updates as to Innovation programs ○ Update as to Community Crisis Response – Community Crisis Initiative and Rapid Improvement Events. ○ Update on expansion of the Mobile Crisis Response Team by adding an additional Team ○ The Suicide Prevention Coalition will add the Youth Subcommittee ● Community Program Planning <ul style="list-style-type: none"> ○ MHSA Presentations and Events <ul style="list-style-type: none"> ▪ September 2020 – Evolution of the Peer Movement ▪ January 2021 – Hope and Wellness in Diverse Communities ▪ March 2021 – Historically Marginalized Community 		

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	<p>Engagement (HMCE) Workgroup</p> <ul style="list-style-type: none"> ▪ March 2021 – Older Adult MMCE Workgroup ▪ March 2021 – African American HMCE Workgroup ▪ March 2021 – Nuestra Comunidad, Nuestro Bienstar (Our Community, Our Wellbeing) Held in Spanish. <ul style="list-style-type: none"> ○ Summary of Community Program Planning <ul style="list-style-type: none"> ▪ Number of participants for these events totaled 350. Included providers, community members, peers, family members, community partners and advocates. Events free and open to the public. ○ Demographic Information based on surveys received <ul style="list-style-type: none"> ▪ More diversity and more participation of consumers, family members and Peers at these events ○ Community Feedback <ul style="list-style-type: none"> ▪ What does wellness look like in your community? <ul style="list-style-type: none"> ◇ No barriers to treatment, no stigma, safe outdoor spaces, resource hubs ▪ What’s working well? <ul style="list-style-type: none"> ◇ Telehealth, Mobile Crisis Response services, hotlines, non-profit community-based organizations, language access and older adult services ▪ What are the service gaps? What’s missing? <ul style="list-style-type: none"> ◇ Affordable housing with on-site services, access to technology, mental health supports, virtual mental health, need to promote resources, need more community crisis response services, access to funding and resources, services for Transitional Age Youth (TAY) and the African American community, Peer respite centers, re-entry support services ▪ What populations are most at risk? <ul style="list-style-type: none"> ◇ Youth, teens, seniors, homeless population, immigrants, refugees, minorities, low income people, single mothers, people with disabilities, 		

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	<p style="text-align: center;">people with substance use disorders</p> <ul style="list-style-type: none"> • Projected Fiscal Year 2021-2022 Budget <ul style="list-style-type: none"> ○ \$54.4 million. Unspent funds \$29.1 million. Prudent reserve unchanged at \$7 million. • Fund Ledger (summarized) • How Can I provide more input? <ul style="list-style-type: none"> ○ View the plan on the Contra Costa County Behavioral Health website at: https://cchealth.org/bhs. Click on the Mental Health tab then click on the MHSA tab. ○ Provide Public Comment online, by email or by phone: <ul style="list-style-type: none"> - Online: https://cchealth.org/bhs - Email: mhsa@cchealth.org - Phone: (925) 313-9525 ○ Attend the Public Hearing via Zoom at the Mental Health Commission Meeting <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Douglas Dunn) Good presentation. I am following this very closely as Chair of the Mental Health Commission’s MHSA Finance Committee. • (Graham Wiseman) Know it was difficult to project funds due to COVID-19. I think the state received more money than they thought they would receive. If so, is there a plan if the funding should increase instead of decrease? Response: That could be a possibility. These figures were based on projections from several months ago. Dr. Tavano may address that issue during her update today. (Dr. Tavano) The governor’s state budget should be released soon. If the state budget is revised and more funding becomes available, will put those funds into more services. • (Jaime Jenett) I am from Health, Housing and Homeless Services (H3). Addressing the housing issue, 79 percent of the people in our system are waiting for housing. They need permanent supportive housing. There is a demand for housing. Many struggle with mental health issues. Housing is 		

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	<p>critical for this very high need population. Also, we just updated homeless congregate facility guidelines (i.e. transporting clients, home visits and shelters. The link for the updates: https://cchealth.org/h3/pdf/Orange-Tier-Congregate-Care-Letterhead.pdf</p>		
<p>5. Introduction of new Behavioral Health program Chief of Supportive Housing Services, Kennisha Johnson, LMFT</p> <ul style="list-style-type: none"> • Role and responsibilities • Relation to Mental Health Services Act (MHSA) Housing 	<p>Kennisha Johnson, Chief of Supportive Housing Introduction:</p> <ul style="list-style-type: none"> • Has been with the County for nineteen years <ul style="list-style-type: none"> ○ Started as the new Behavioral Health Services Chief of Supportive Housing in March this year ○ Has been with Contra Costa County nineteen years. The first six years with the Children’s Clinic as a Therapist. Is a licensed Marriage and Family Therapist. Then worked in the Adult Clinic as a Case Manager and provided clinical services. ○ For seven years was a Manager and then for the last three years have been the Supervisor of the Central County Adult Clinic • Will be working with the Housing Continuum <ul style="list-style-type: none"> ○ Augmented Board and Cares – Working with Jim Grey who is processing the referrals and placements. Will be doing contract monitoring of all Board and Cares. Meeting with owners to understand services provided by each and to determine any gaps and needs. ○ Mental Health Services Act (MHSA) Housing <ul style="list-style-type: none"> ▪ Working with Health, Housing and Homeless Services (H3) with Steve Blum. Transitioning MHSA housing back to Behavioral Health. ▪ Shelter, Inc. has a large master lease contract. Will be working with smaller site-based units. Met with Hope Solutions this morning. ○ No Place Like Home <ul style="list-style-type: none"> ▪ Have been working with Adam Down 		<p>Kennisha Johnson, Behavioral Health Services Chief of Supportive Housing</p>

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	<ul style="list-style-type: none"> ○ Mental Health Rehabilitation Centers (MHRC) <ul style="list-style-type: none"> ▪ Working with Nursing Liaison discussions include people transitioning out of locked facilities and looking at step down opportunities ○ Will be monitoring contracts for programs – ensure all agencies are providing all services under the program contracts and will help with efficiency ○ Aware of need for supportive housing for clients ○ See the needs expressed at MHSA community forums <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Amelia Wood) I am a Housing Specialist at the HUME Center. I think clients are crammed into licensed Board and Cares. Would like to see skill building trainings or outings. Nutrition is also very important. Would like to talk with you offline because I have some great ideas. Response: I look forward to talking with you. • (Roberto Roman) What is the effect of COVID on the clients in the Board and Cares? For example, residents of Crestwood have not attended meetings since COVID. Lost contact with them. Concerned about client isolation. Response: I will definitely talk with Travis at Crestwood. We do have regular meetings. I am aware clients have access to video communications. Hopefully we can get them back to meetings as fast as possible. I will reach out again and see the best way to move forward. (Jennifer Bruggeman) Our Team has tried unsuccessfully to reach out to Crestwood leadership to see how we can facilitate getting residents to return to these meetings. Help from Kennisha Johnson would be appreciated. • (Douglas Dunn) Yes, the topic of step-down services for those coming out of MHRC’s. Also need to look at step down services for those coming out of quasi or fully criminal locked facilities (i.e. state prisons, state hospitals. Also important is the California Health Facilities Financing Agency (CONREP) and post CONREP. That is another area of concern I am 		

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	<p>hearing in the community that I would like to make you aware of. Response: Ok. Thank you. (Dr. Tavano) I had a couple of conversations with the state about the CONREP population. Historically the County operated the CONREP program. But was not fully funded that it needed to be. Was returned to the state. The State is encouraging counties to take the CONREP programs back. I totally agree with that but would still need funding. Would need funding for housing. She asked the State what funding would be provided (i.e. mental health treatment, housing, etc.) No one from the state got back to her. That is where the struggle is right now – housing.</p> <ul style="list-style-type: none"> • (Carolyn Hidalgo-Goldstein) Looking forward to working in collaboration with our programs. Invite to meet with Mental Health Systems to show you great work doing. Can discuss the program, master leases and how we can improve our services. So excited to work in collaboration. Response: I look forward to coming out. 		
<p>6. May is Mental Health Awareness Month</p> <ul style="list-style-type: none"> • Resource Sharing from Each Mind Matters (EMM) 	<p>Jessica Hunt (MHSA): (Document – “May Mental Health Matters Month – Activation Kit 2021”)</p> <ul style="list-style-type: none"> • May is Mental Health Awareness Month <ul style="list-style-type: none"> ○ Friends at CalMHSA and Each Mind Matters have provided a Mental Health Matters Activation Kit for 2021. Has a host of resources and tools to help people engage in COVID safe, friendly ways to support mental health. The link for the activation kit: https://emmresourcecenter.org/resources/may-mental-health-matters-month-activation-kit-2021 ○ Reviewed information, resources and additional links provided in the Activation Kit (i.e. Information, activities, and links, etc.) Theme this year is “Hope for Change”. 		<p>Jessica Hunt, Mental Health Services Act, (MHSA) Program Supervisor</p>

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7. AAPI Anti-Hate Info – Contra Costa Response & Resources	<p>Genoveva Zesati (MHSA): (Document: “Asian-Pacific Islander Community / Ally Resources”)</p> <ul style="list-style-type: none"> • Shared document listed above. Reviewed information, resources, and links. • Lao Family Community Development, NAMI Contra Costa services (Also Mandarin language services), Stop Asian Hate agency • Asian Americans Advancing Justice received funding for training and resources. In response to anti-Asian acts. The link is: https://www.advancingjustice-chicago.org/what-we-do/bystander-intervention-trainings/ • If you would like information or resources, can email directly at Genoveva.Zesati@cchealth.org 		Genoveva Zesati. (Workforce, Education and Training (WET)/Ethnic Services Coordinator, ASAIH - Mental Health Services Act)
8. Public Comment and Suggestions for Future Agenda Items	<ul style="list-style-type: none"> • (Douglas Dunn) Request the same Agenda items recommended from the last CPAW meeting as the same recommended future Agenda items for this meeting. Also, the Mental Health Commission MHSA – Finance Committee will be focusing with the help of the Mobile Crisis Response Team (MCRT) leadership into what a true 24/7 crisis response system would look like. That Committee meeting will be May 20th. • (Amelia Wood) Supportive housing ideas. 		
9. Plus / Delta – Review of Meeting	<ul style="list-style-type: none"> • (Roberto Roman) This meeting was very informative and engaging. Really appreciated it. • (Douglas Dunn) Thank you for the summary of topics going on in the community. • (Susan Horrock) I think you calling Roll was helpful. • (Amelia Wood) Amazing and hopeful today. 	CPAW members and attendees	Amanda Wehrman

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	<ul style="list-style-type: none"> • (Bree Brytus) Loved the discussion on housing issues, permanent supportive housing (one of the issues closest to me) • (Johanna Wagner) Very Glad to hear discussion of the Board and Cares. • (Candace Collier) I enjoyed the report outs, updates and Kennisha’s presentation. Love being at CPAW. 		
10. Adjournment & Next CPAW Meeting	<ul style="list-style-type: none"> • The next CPAW meeting will be June 3, 2021 from 3:00 pm to 5:00 pm. 		Amanda Wehrman