

Contra Costa County Mental Health Commission
Thursday, October 25th, 2012
MINUTES

I. Call to Order / Introductions

The meeting was called to order by Chairperson Carole McKindley-Alvarez at 4:31 p.m..

Commissioners Present:

Louis Buckingham, District III
 Evelyn Centeno, District V
 Jerome Crichton, District III
 Jack Feldman, District V
 Dave Kahler, District IV
 Peggy Kennedy, District II
 Carole McKindley-Alvarez, District I

Supv. Karen Mitchoff (arrived 4:36)
 Colette O’Keeffe, District IV
 Teresa Pasquini, District I (arrived 4:36)
 Annis Pereyra, District II
 Gina Swirsding, District I
 Monique Tarver, District III (arrived 4:36)
 Sam Yoshioka, District IV

Non-Commissioners Present:

Adam Alessi, Student
 Stan Baraghin, MHCC
 Kayla Berrios, Student
 Marilyn Bonilla, Family
 Lia Bristol, Supv. Mitchoff’s office
 Andrea Clark, ANKA BHC
 Brenda Crawford, MHCC
 John Gagnani, Local 1
 Caitlin Healing, Student
 Justin Ilagan, Student
 Sarah Kalin, Student
 Vanessa Lалан, Student
 Marsha McInnis, BHR/Pathway to Wellness
 Susan Medlin, CCBH/OCE

Victor Montoya, Adult Program Chief
 Mariana Moore, Alliance
 Jenny Nicholson, Student
 Dena Odeh, Student
 Holly Page, MHA
 Roberto Roma, CCBH/OCE
 Mary Roy, MHA
 Anderson Salinas, Student
 Karen Shuler, MHC Executive Assistant
 Shelby Solomon, Student
 Robert Thiago, CCBH
 David Villescaz, Student
 Nicole Wagner
 Denise Walker, Family

II. Public Comment

- 1) Stan commented about a letter that had been written to the county regarding the urgent need for a mini-van for transportation for consumers.
- 2) Marilyn also commented about the need for transportation.
- 3) Brenda made a comment that the appearance of having consultants approved before services doesn’t seem right.

III. Announcements

- 1) Holiday MHC meeting schedule.
 November meeting will be the 5th Thursday, Nov. 29th
 December meeting will be the 3rd Thursday, Dec. 20th.
Note: The December meeting will be a shortened monthly MHC meeting from 3:30-4:30, followed by the Annual MHC Meeting, 4:30-6:30.
- 2) Committees need to develop their 2013 Goals at their November meeting.

IV. Approval of the Minutes from September 27, 2012

A motion to approve the Minutes was made by Sam and seconded by Gina.

Vote: 12-0-2 (Evelyn and Teresa abstained). The Minutes were approved.

V. Update on hiring of the Mental Health Director

Steven Grolnic-McClurg has been hired and will assume duties in December.

VI. Review of Mental Health Department's Commitment to follow up from Family Steering Committee Memorandum of Concern dated 3.17.2009.

Request information in form of actual invoices.

Concern was expressed over the high price of consultant fees. A request was made for a complete accounting of the funds.

- Annis made a motion requesting a full accounting, with invoices invoices, to include all paid consultants. Evelyn seconded.

Discussion: There was discussion as to whether or not it's appropriate to bring this up at this time when we're going into a new era with a new Director of Behavioral Health and a newly-appointed Mental Health Director. There was a feeling that time should be given to give the new administration a chance to share with us their vision and goals and to work collaboratively with them in 2013. A suggestion was made to have a separate, independent committee that just deals with the MHSA to work collaboratively with the administration. They would be responsible for reviewing, updating and evaluating MHSA proposals and reporting on ongoing program reviews to the MHC. A response was made to these comments that we do now work in collaboration with Behavioral Health. There was an objection to there not being a conversation about the Mental Health Director process at this meeting. The MOC referred to in this agenda item was a leading moment in MHSA when family members formulated concerns for the leadership, and continued to work collaboratively. There was concern about a \$300/hr. consultant fee then. Asking this question now is legitimate and is a new question. It was felt that we didn't follow-up on this. It's an integrity issue, and we deserve an answer and this should be reviewed and answered. It will help the new Mental Health Director to see what the real status is. There was also concern expressed that in this case it may come to the Commission out of context, which may cause confusion. Support was again expressed for a separate MHSA committee, which has already been a conversation in the Capital Facilities Committee.

Carole said this brings up an overall budget conversation in general to look over the overall system of care to see how money is being used that is not for direct client care. She would also like to see a Finance committee to keep aware of how we are using our dollars.

There was discussion asking how much is being spent on front line care. Teresa mentioned that the Capital Facilities Committee did request a current expenditure and revenue report from MHSA. Others also said they'd like to address the issue of how money is spent. There was an opinion raised that the cost of the house in Antioch is too expensive.

Supv. Mitchoff suggested tabling this idea. She'll be meeting with new the MH director and she could ask him to sit down with the Chair and Vice Chair and committee chairs about he and his staff being responsive to the issues being raised by the Commission. They could meet and put time frames on issues. She added that she would like us to craft what we're going to say to Steven.

Sam proposed that the motion be amended to table it and have the Executive Committee look into gathering statistics in the near future to address the issues. Another suggestion was having a simple report card presented on a quarterly basis.

John from Local 1 commented that the rank and file are both shocked and dismayed that the direct service providers were not invited into the process of selecting the Mental Health Director. Going forward, we must have an administration whose actions reflect their words.

Carole stated this will be covered at the annual planning meeting. We will need data from all 3 systems of care in order to determine our next steps.

A new motion was presented by Annis and seconded by Evelyn to table the request for invoiced financial reports on the use of high paid consultants until after the Mental Health Director takes his position.

Discussion on amended motion: Gina said she also wants to voice her concerns and Teresa asked for clarification.

Annis said we can update the Mental Health Director in January and can wait for reports, but it will be discussed at the planning meeting.

Teresa said she supports motion but does not want the motion tabled.

Supv. Mitchoff said she was suggesting that communication to the new director could be formulated at the annual planning meeting.

Annis removed her motion with a comment. She asked that it be tabled. Evelyn seconded the motion. The motion was removed.

VII. Receive and discuss report from MHSA representatives regarding MHSA funding allocations for Community Based Organizations.

Mary Roy explained that when contract renewal time comes up, contracts move forward at the same level. When we did the 2012-2013 we anticipated there would be an integrated plan. But at the state level there's a recommendation to do another annual plan this year. In terms of major revision to MHSA, it hasn't happened. In terms of contracts going forward, we are between administrations. The last administration said everything would go out via RFP. This was agreed to. It was predicated on getting a 20% increase. This year we are getting monthly allocations based on taxes collected two years ago, and don't know how much money we'll get. We may still get 20%. But our fiscal officer doesn't want new programs to go forward without money in hand.

Questions were asked about how this affects CBO's with current contracts? It was also asked if there was dialogue around whether or not they are doing a good job so we want to give them more, or help them with additional expenses?

Mary responded that on the PE&I side, there are ongoing conversations with CBO's. Contract monitoring issues are not discussed here.

Vic explained that we as staff make recommendations to the BOS. We are in an administration transition, and a decision was never made about whether or not we would recommend to the BOS that RFP's be used. In July we have an automatic renewal and continue at that funding level if there are no new monies. The new MHSA funding structure is different. The disbursements change each month so recommendations cannot be made to expand new staffing levels until we know what the dollar levels would be or staff would have to be cut. He feels the recommendation of a fiscal committee is a good one. The CRF project was off and on, and the ongoing operational costs need to be considered. The ARC hasn't been fully considered so far as ongoing revenue and staffing is considered. The next couple of months should bring a clearer picture. At this point we're status quo, and he wants to stay that way until we know more about ongoing revenue. CBO's haven't received cost of living raises, but county staff has taken cuts for the last 3 years.

Brenda read the following statement from Janet. "Concerns: There is the need to serve those with serious and persistent M.I. – SpeeMI's – as intended by the MHSA, and not just blend funds to serve all homeless and/or homeless 'with a disability.' In 3 fiscal years ending 2010-11, well over \$36 million was spent to send CCC residents out of county for placements under conservatorship. The county must develop the political will to create massive permanent housing with adequate psychosocial supports, so these residents may return home and be closer to family, friends, and clinical supports. These residents must also be trained in independent living skills, such as homeless case managers provide, in order to prevent recidivism. If such training is not covered by Medi-Cal then outside funding must be secured

for it. And whenever there is a transfer in placement, including to or from CCRMC, a standardized forms needs to be completed to streamline the process and define transfer responsibility. A subcommittee of the CPAW Housing Committee was created in order to create such a form, and Patients' Rights should be included in the subcommittee.

Brenda also made a comment about conversation seeming to have lost its civil rights and social justice. Can't compare services to the quality of people's lives. People are still operating in silos. There is stigma. Consumers can have their rights taken away.

Martin Edwards commented that in 1865 basic health and education was provided for free men, but the same issue is still on the table. We need to push and demand that the monies be provided for services that are productive and working.

Gina commented that in Richmond, people think the county's taking care of housing for the mentally ill so the housing council don't include the mentally ill.

Monique said we need to identify CBO's where people are getting their needs met. Appropriate delivery of services is important. The County needs to look at and partner with other organizations.

Mary commented that in terms of allocations, more money went to CBO's than county services. There is room for more growth, but we are making steps toward that.

Teresa said she strongly appreciates the passion being expressed by Janet, Brenda and others, and expressed deep respect and support of the administration. She added that we have looked at doing things differently. State gave responsibility to local stakeholders, so we need to step up. She would like to see an absolute integration of the system.

Mariana said she agrees with partnering collaboration with CBO's. Question: 1) Keep status quo...at what point would you have enough information to go forward? Vic: Until state comes up with a clarifier or until there's 20% more. 2) Freezing hiring of county staff or just CBO's. Budget is set forth based on actual revenues. Based on last year's allocations and budgets, we have contracts. Vic: Both.

Colette asked, once the dollars are being given, what kind of transparency is there – what % is being used for frontline services.

Supv. Mitchoff responded that when there's money available, we put out an RFP. When contractors respond, they get a contract and are monitored every month. She recommended that a demand with line item issues be put in every month. Regarding staffing: when a CBO is given money, it's up to them how the money is spent. They have strict benchmarks. Vacancies can be filled; if there's a new position, they need to go to the Board. Supv. Mitchoff made a motion to receive the report and Teresa seconded. The Commission approved receiving the report by a vote of 13-0-1 (Jack abstained).

VIII. Committee Reports

A. Nominating Committee

Receive nominations for Chair, Vice Chair and two members of the Executive Committee.

Colette called for Nominations. The following Nominations were made:

For Chair: Carole McKindley-Alvarez

For Vice Chair: Peggy Kennedy

Sam Yoshioka

For the Executive Committee: Teresa Pasquini

(2 positions available) Gina Swirsding

Sam Yoshioka

The Nominees will be voted on at the November MHC meeting.

B. Criminal Justice Committee

Approve site visit to Orin Allen Boys Ranch on November 6th from 10:00-12:00. Commissioners sign-up if approved.

Carole asked Dave why a site visit is being requested. Dave replied that it's one of the places people are sent from jail to finish their sentences. The site visit was approved and a sign-up sheet was distributed.

C. Executive Committee

- Peggy made the motion and Jerome seconded to recommend that a formal letter be sent to Cynthia Belon requesting that a Mental Health Commissioner Family Representation and Consumer be appointed to the Executive Team.
Discussion: It was explained that the Executive Team oversees how integration is put together. They are at the top level of integrating the BH system. Mary added that they choose contracting agencies that are guiding MHSA plans and process, and are the architects of the Design Team. The Executive Team consists of Cynthia, Vic, Jan Cobaleda-Kegler, the Mental Health Director, the AOD Director and Lavonna Martin. Sam said a proposal should be communicated to Cynthia to work this up with her and Executive Team. It was clarified that Family and Consumer Representation from the Commission did need to coincide with the seat the Commissioner was appointed to on the Commission. Gina mentioned she had originally asked that this would be a paid position as a consumer. Brenda said she respects the skill and talents of the Commissioners, and she thinks there are consumers who are skilled enough to sit at those tables – but she said she would like to have someone who is currently in our system be appointed and be compensated by a transportation stipend.
Jerome asked for clarification – does the issue have to do with representation or flow of information. Peggy said it came from a desire to have a consumer and family voice on the Executive Team. Teresa added that it was an effort to get at the table and work in true partnership
Monique said she support the effort to be heard, and would like to support Gina's original request that they get compensation.
Vote: The motion passed as presented by a vote of 12-2-0 (Monique and Carole voted against the motion).

D. Quality of Care Committee

The Committee is working on getting patients rights advocates to our Nov. 7th meeting.

E. Capital Facilities Committee

Committee met after the MHC posting deadline.

IX. MHC Representative's Reports

- 1) Behavioral Health Integration Steering Committee – Sam Yoshioka
A copy of the report is in the packet and is available through the MHC Office.
Anyone is invited to the Change Agent meetings.
- 2) MHSA Social Inclusion Committee Report – Carole McKindley-Alvarez
Susan Medlin: For their next monthly meeting, they've decided to hold a potluck and presentation. Nov. 14th 11:30-1:30. They will also be holding a conference in March.
- 3) CPAW Housing Committee Report – Annis Pereyra
Housing committee report went to the Capital Facilities Committee first.

X. Develop Agenda for Annual Planning Meeting

Suggestions:

- 1) Chairperson's report
- 2) Welcome new Mental Health Director – discuss their vision/overview
- 3) Report from Cynthia Belon, Director of Behavioral Health Services
- 4) Review 2012 Committee work plans and goals
- 5) Approve 2013 work plans and goals *Action Item*
- 6) Discuss developing a Vision Statement
- 7) Develop a communication plan for our community -- have the MHC be a conduit to disseminate information to the community.
- 8) The Commission's role in the MHSA process
- 9) Have a discussion of all areas of finance.
- 10) Evelyn asked that we hold off on electing the Executive Committee until after decisions about restructuring the committees are made. Teresa said it is also hard to think about goals without know what committees will be.
- 11) Request that the MHC get the MHSA Annual Plan earlier.
- 12) Stan: people got evicted – there should be a program in place to teach them about how to manage. Evelyn suggested he come to the Capital Facilities Committee meeting. Annis added that this is being discussed in CPAW housing committee.
- 13) Teresa asked that someone from finance be invited – perhaps Dr. Walker – to give a broader picture of MHSA.

It was recommended that the following items were removed from the Annual Planning meeting Agenda and placed on the November MHC Agenda.

- 1) Consider evaluating current committee structure *Action Item*
- 2) Consider creation of a Bylaws Task Force

Also for the MHC Meeting: Election of officers

XI. Commissioner Announcements

Annis clarified comment about Antioch house.

XII. Adjourn Meeting

The meeting was adjourned at 6:40 p.m.

Respectfully submitted,
 Karen Shuler, Executive Assistant
 Contra Costa County Mental Health Commission