

Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, July 1, 2021

3:00 pm – 5:00 pm

Meeting Access via Online Zoom Video Conference and Telephone Conference:

<https://homebaseccc.zoom.us/j/724180505?pwd=ayswSINGeU02MTMrRkIzSkY1OFYyQT09>

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



Members Attending: Candace Collier, Douglas Dunn, Carolyn Goldstein-Hidalgo, Sara Marsh, Roberto Roman, Jennifer Tuipulotu, Johanna Wagner, Graham Wiseman, Amelia Wood

Staff Attending: Janet Costa, Jessica Dominguez, Jessica Hunt, Jaime Jenett, Ernesto Robles, Ellie Shirgul, Robert Thigpen

Public Participants: Grace A., Jo Bruno, Pete Caldwell, Deborah Callister, John Gallagher, Angela Juarez, Julie Kinloch, Christina Mann, Susan Norwick Horrocks, Kelly Perryman, Lauren Ninkovic, Teresa Pasquini, Lauren Rettagliata

Facilitator: Amanda Wehrman

Recorder: Audrey Montana

Staff Support: Jennifer Bruggeman
Genoveva Zesati

Excused from Meeting: None

Absent from Meeting: Stephen Boyd, Lisa Bruce, Steve Blum, Y’Anad Burrell, Chaplain Creekmore, Tom Gilbert, Dave Kahler, Kimberly Krisch, James Lancaster, Jackie Lerman, Anna Lubarov, Leslie May, Mariposa McCall, Kathi McLaughlin, Melinda O’Day, Chelise Stroud

TOPIC	ISSUE/CONCLUSION	ACTION/ RECOMMENDATION	PARTY RESPONSIBLE
1. Welcome – Call to order, Roll Call, Review Working Agreement, Finalize Meeting Minutes • Announcements	<ul style="list-style-type: none"> • Roll Call, Call to Order • Announcements – <ul style="list-style-type: none"> ○ (Jessica Dominguez) Uber and Lyft will provide free rides for people to get vaccinated to July 4th. ○ (Genoveva Zesati) A mobile vaccination clinic will go to locations where five or more persons are scheduled to receive vaccinations. Do not need to be a resident of Contra Costa County. The link for this free service is as follows: 	Information Notes will be posted to MHA CPAW website.	Amanda Wehrman, Facilitator Audrey Montana to post notes.

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	<p>Mobile Vaccine Request in Contra Costa County for the Homebound: https://forms.office.com/Pages/ResponsePage.aspx?id=3tkgKC3cY00GJvKwA00MRS41XWRGeRJBtHJgApNLJo1UNjQ4WTM0VVBXWEY3MDRHMjFGVjIIUEc2My4u&wdLOR=cFCC83D0F-655C-4300-9FDE-E2C3459CE5BA</p> <p>Mobile Vaccination Request Form for Contra Costa County Businesses/Community Groups: https://forms.office.com/Pages/ResponsePage.aspx?id=3tkgKC3cY00GJvKwA00MRS41XWRGeRJBtHJgApNLJo1UMU0xQzA3M0E3RUVIRk8zOEdSR0o2UzNHUi4u&wdLOR=c1E462F15-8872-42A2-B593-72E1DC9BD3CD</p> <ul style="list-style-type: none"> o (Douglas Dunn) next Wednesday from 4:30 pm to 6:30 pm via Zoom during the Mental Health Commission meeting will be the Mental Health Services Act (MHSA) 2021-2022 Plan Update Hearing and Public Comment. o (Graham Wiseman) Encourage all to attend this public hearing. Can see how the County handled the COVID crisis and how we are emerging. Shows what we are going to do to rebuild and regrow. o (Lauren Rettagliata) The Department of Health Care Services has released the budget. Shows the money that will flow to the County. It does differ. The State numbers are higher than anticipated. To review, goggle the Department of Health Care Services, Mental Health Services Act Report to the Governor. The Department of State Hospitals is now an arm of the Department of Corrections. The County Behavioral Community Health is functioning as a branch of the Department of State Hospitals. o (Susan Norwick Horrocks) NAMI depends on membership and fundraisers to sustain our programs. Can become a member for five dollars a month. Our website is: www.namicontracosta.org. 		

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	<ul style="list-style-type: none"> ○ (Johanna Wagner) The 2MIPeople Clinic (after-hours med management) will be opening in September. For information, contact mcoyle@2mipeople.org. ○ (Meeting Notes (June 3, 2021) – Reviewed. Minor revision suggested. 		
<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 ● 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 	<p>Adults Committee: No additional comments.</p> <p>Aging & Older Adults Committee: (Provided Summary of May 2021 Meeting)</p> <ul style="list-style-type: none"> ○ Steve Blum from Health, Housing and Homeless Services (H3) presented re COVID and Project Room Key. ○ Created a new Comcast Commercial – Outreach to older adults. Focused on COVID 19 scams. Stressed the vaccine is not a scam and no need to provide insurance or citizenship information in order to receive vaccines. This information is available in English and Spanish, has graphics. Will soon be available in Chinese and Tagalog. Provided information on the Elder Abuse Hotline and focused on elder abuse. Commercials in English, Spanish and Chinese. ○ Presentation by the Center for Elders Independence in partnership with the Concord PACE Program. Thinking of partnering with PACE which provides several services. ○ Presentation by Health Aid USA. Had done focus groups with African American and Latino older adults in the Bay Area and presented their findings. Their report was “Finding Community Through COVID”. Spoke of resilience of and challenges facing older adults. Need to keep focusing on vulnerable older adults. ○ Next meeting is July 28th from 2:00-3:30 pm. Will have a presentation from the AOD program. <p>Alcohol and Other Drug Services (AOD) Advisory Board: No additional comments.</p>		<p>Committee Representatives</p>

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<ul style="list-style-type: none"> • Training Advisory Workgroup (TAW) 	<p>Behavioral Health Care Partnership (BHCP):</p> <ul style="list-style-type: none"> ○ No meeting in June. The next meeting will be July 20th from 1:30 to 3:00 pm. <p>Children, Teens and Young Adults (CTYA) Committee: No additional comments.</p> <p>Health, Housing and Homeless Services (H3):</p> <ul style="list-style-type: none"> ○ The Concord Shelter has reopened. Placing people from Project Room Key hotels currently. Will be placing people again through the CORE program around August 1st. Have pods now so people have their own space. Also now accepting couples and families. Now has a kennel for dogs and a parklet. Will accept outside referrals starting August 1st. ○ (Jo Bruno) I toured the shelter. Has storage bins under beds. Each pod has a desk and chair. Dogs are welcome inside sleeping pods. It is really amazing. ○ The following link has more information from our Council on Homeless meeting. You can also get info and photos on the shelter on page 32: https://www.contracosta.ca.gov/AgendaCenter/ViewFile/Minutes/07012021-3558 ○ H3 does not have No Place Like Home funds. But, there is new housing staff in Behavioral Health, Kennisha Johnson, who may be able to answer questions regarding No Place Like Home funding and housing. ○ (Genoveva Zesati) The No Place Like Home update is provided by Adam Down at the CPAW System of Care Committee meetings. The next update will be given at the next meeting to be held on August 11th at 10:00 am. ○ (Jennifer Bruggeman) The Round Three noncompetitive allocation was just awarded to Contra Costa County and Resources for Community Development (RCD) for a project on Ygnacio Valley Road in Walnut Creek. Will be new construction with eight housing units designated for 		

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	<p>No Place Like Home qualified residents.</p> <ul style="list-style-type: none"> ○ Medical Respite is now also opening. <p>Innovation (INN) Committee: No additional comments.</p> <p>Mental Health Commission (MHC): No additional comments.</p> <p>Mental Health Commission (MHC) – Quality of Care Committee: No additional comments.</p> <p>Reducing Health Disparities (RHD):</p> <ul style="list-style-type: none"> ○ No meeting in July. Next meeting in August. <p>Social Inclusion Committee: No additional comments.</p> <p>Suicide Prevention Committee:</p> <ul style="list-style-type: none"> ○ Will present the update today later in this meeting ○ On June 25th, shared Quality Improvement/Quality Assessment (QI/QA) data on pre-COVID and post-COVID suicide rates. Looking at establishing a Data subcommittee in the coming months ○ Discussed a possible Suicide Prevention Youth Subcommittee September event. <p>System of Care Committee:</p> <ul style="list-style-type: none"> ○ There will be no meeting in July. The next meeting will be in August. <p>Training Advisory Workgroup (TAW): No additional comments.</p>		
<p>3. Dialogue and Update with from Contra Costa Behavioral Health Services (BHS) Executive Leadership</p> <ul style="list-style-type: none"> ● Update on Youth Crisis Stabilization Unit (CSU) ● State Budget following 	<p>Dialogue with Contra Costa County Behavioral Health Services (BHS) Executive Staff</p> <ul style="list-style-type: none"> ● There will not be a presentation today as we were just notified the Behavioral Health Director (Dr. Suzanne Tavano) is ill today and cannot make today’s meeting 		

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<p>May Revise – impact on Behavioral Health Systems, including Housing and State Hospitals</p>	<ul style="list-style-type: none"> • Douglas Dunn (CPAW Member and Mental Health Commission Commissioner) provides information: <ul style="list-style-type: none"> ○ The California State Association of Counties had a June 15th budget deadline ○ The Governor’s Budget <ul style="list-style-type: none"> ▪ Half a billion dollars for the Behavioral Health Continuum of Care in the State ▪ 150 million -- Crisis Response 100 million -- Justice related 22 million -- Behavioral Health Quality Improvement ○ Most vulnerable are those who suffer from a serious mental illness, have committed a felony, and deemed incompetent to stand trial. ○ 1,600-person waitlist for people to go from County Jail to State Hospital. They are incompetent to stand trial. ○ The Governor proposed 1,000 people under LPS conservatorship would be pushed out of State hospital beds and given to the Counties in the next three years. ○ Courts ordered people must be taken from a County jail to state hospital within 28 days no later than 60 days ○ Contra Costa has a contract with two State Hospitals for twenty beds ○ Twelve and a half million dollars to partner with Counties to re-evaluate individuals deemed incompetent to stand trial. We will talk about these issues at the Mental Health Commission. <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Teresa Pasquini) it’s a grave situation. Must be aware of this problem. Need to look at terminology of “least restrictive as appropriate”. • (Lauren Rettagliata) Need to look at how much money we have in unspent funds. Need to adjust our figures now that we know the State will provide more funding than anticipated. A top priority would be to keep a well-trained workforce. Our County 		

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	<p>needs to get reports that have this information.</p> <ul style="list-style-type: none"> • (Jennifer Bruggeman) This annual update is a snapshot in time. We drafted this plan in the Spring based on older fiscal projections. This was not a usual year. With COVID, the fiscal projections became more conservative. The budget is set by the County Administrator’s office. We work with that budget. This new State funding will be going to Counties, but it is not clear where this funding will go we do not have details on this new funding. With this Plan, we are working with our normal timeline and presenting our annual updated plan. We will update all and CPAW of any funding changes. We know the budget in this Plan will change for the better. That’s a good thing. Any changes we will include in the next year’s update. • (Douglas Dunn) For the State and Federal funding, we need to ask them for more accurate real time fiscal projections. • (Teresa Pasquini) To Douglas Dunn re the State hospitals, what’s our plan in Contra Costa? Response: (Douglas Dunn) Those in jail deemed long term incompetent to stand trial, may be considered for a Murphy conservatorship. These are the most vulnerable citizens. • (Kelly Perryman) Is there any money for a Peer Respite Center? Response: (Jennifer Tuipulotu) Under the legislation, there will be Peer certification. Currently do not think we have enough money for a Peer Respite. Is being considered as an alternative destination for people in crisis. Looking at data and have been in contact with other Peer Respites in the area. (Douglas Dunn) Perhaps look at the funding from the State for continuum of care. (Lauren Rettagliata) We have worked with the Peer Respite Center in Santa Cruz and have information. 		

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4. Innovation Overview & Looking Ahead	<p>Jennifer Bruggeman (MHSA) PowerPoint Presentation - “Innovation Projects in Contra Costa County, An Overview “</p> <ul style="list-style-type: none"> • What is Innovation? <ul style="list-style-type: none"> ○ Is one of the five components of the MHSA ○ To Develop and test new unproven mental health models ○ Primary purpose: To increase access to mental health services for the underserved, increase quality of services, promote interagency & community collaboration ○ Address any age group or population ○ New and innovative to your County ○ Local projects or can opt into multicounty collaboration ○ Receives 5% of the MHSA budget (two million dollars) ○ Have a five- year maximum funding timeline – sunset or continue under a new funding source • How is a Project Chosen? <ul style="list-style-type: none"> ○ Ideas vetted through local stakeholder process / community planning process ○ Proposals have 30-day public comment period ○ Proposals approved by the Mental Health Services Oversight & Accountability Commission (MHSOAC) ○ Approved projects are included in the MHSA Three Year Plan and require Board of Supervisors’ approval • Local Existing Projects <ul style="list-style-type: none"> ○ Coaching to Wellness, Overcoming Transportation Barriers, Partners in Aging, Center for Recovery and Empowerment (CORE), Cognitive Behavioral Social Skills Training (CBBST) in Board and Cares • What’s Next? <ul style="list-style-type: none"> ○ Three of five current projects will sunset by 2021 ○ CORE & CBBST funded through 2023 ○ Need new innovative projects to reflect existing and emerging community needs 		Jennifer Bruggeman. (Mental Health Services Act (MHSA) Program Manager)

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	<ul style="list-style-type: none"> • Prioritizing New Innovation Project Needs <ul style="list-style-type: none"> ○ Community Crisis Response efforts https://cchealth.org/bhs/crisis-response/ ○ Crisis Intervention Program for Co-Occurring Conditions (Psychiatric Emergency Services alternative) ○ Addressing Supported Housing ○ Culture-Specific Community Practices • How Can I stay involved? <ul style="list-style-type: none"> ○ MHSA Consolidated Planning Advisory Workgroup (CPAW) monthly meetings ○ Innovation (CPAW sub-committee) meetings (bi-monthly) ○ Contact us: <ul style="list-style-type: none"> ▪ MHSA@cchealth.org ▪ https://cchealth.org/mentalhealth/mhsa/ ▪ Main office (925) 313-9525 ▪ Jennifer.Bruggeman@cchealth.org ▪ jessica.hunt@cchealth.org <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Jennifer Tuipulotu) How much is the funding for Innovation? If we have an idea, do we submit proposals the same as a few years ago? Response: Approximately a million dollars. A few years ago, the proposals could be more broad. Currently proposals should relate to emerging priority needs. • (Johanna Wagner) If we have an innovative idea or program, should we be coming to the Innovation Committee meetings? Response: Meetings are open to anyone. You are welcome to come. Would recommend you come to the meetings. • (Jessica Dominguez) Overcoming Travel Barriers (OTB) was going to do travel training. Then the Pandemic hit. We now have a first request from an individual who would like to learn to take the bus. Hope things work out and we can do this. • (Roberto Roman) The executive leadership is narrowing the scope of Innovation proposals different from a few years ago? 		

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	<p>If the community advocated for a certain Innovation project, would that help? Would Peer Respite qualify as an Innovation project per the MHSOAC? Response: Yes. And we are always open to having a conversation about MHSA programs. Since we do not have a Peer Respite, a case could probably be made that it could be an Innovation project.</p> <ul style="list-style-type: none"> • (Sara Marsh) We put in a proposal before but was turned down with the explanation that it already exists. Would be great to have this PowerPoint again. Having Peer Respite as alternative housing sounds good. Response: We now have access to technical assistance in preparing Innovation applications. • (Susan Norwick Horrocks) What happens if we have great programs that no longer have funding? Response: The Coaching to Wellness staff was absorbed into the Health system. That's what we hope for the other projects that will be ending. If it was a County operated program, we will find a place for them. • (Jo Bruno) Peer Respite is run by Peers. The following is the link to Sally's Place in Hayward: https://www.lafamiliacounseling.org/sallys_place <p>The following is the link for a Peer Respite in Santa Cruz: https://www.cibhs.org/sites/main/files/file-attachments/thurs_215_edgeab_peer_respite_5.pdf?1396393054</p>		
5. Recovery Innovations (RI) Wellness City Update	<p>Genoveva Zesati (MHSA)</p> <ul style="list-style-type: none"> • Recovery Innovations (RI) closed its doors June 30th • We worked in collaboration with Putnam Clubhouse. Putnam Clubhouse will be the service provider • Will be offering Peer recovery services. The model is similar to those services previously offered by RI. Also RI clients received an electronic resource form and provided with three phone numbers to contact if questions. • Those receiving services from RI were given written notice of 		Genoveva Zesati (Mental Health Services Act, Work, Education and Training /Ethnic Services Coordinator

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	<p>the change to Putnam. Putnam hosted a Town Hall meeting last week. Answered questions.</p> <ul style="list-style-type: none"> • Putnam will work with Behavioral Health Services on the new Putnam Center – Peer Connect • Will keep the RI staff who will now work with Putnam • Have flyers to provide information. Many not yet aware that RI will be closing. All RI clients received formal notice of RI closing and transition to Putnam. • Peer Connections will work with Putnam – <ul style="list-style-type: none"> ○ No one needs a formal diagnosis ○ Encourage social skills ○ Work on mindfulness, wellness, go on outings, provide vocational support, WRAP plans, ○ Will partner with Peer providers and provide coaches ○ Will now be Peer Connection Centers • Goal is to have the program Peer run. <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Roberto Roman) How long will it take to get the new email/contact information for Putnam? Response: Will take some time. Onboarding RI staff now at Putnam and setting up now. The best point of contact would be Tamara Hunter. • (Jo Bruno) Do you have any flyers or information that we can share? Response: I can provide the flyer with contact information. We announced this at the last CPAW meeting and at other stakeholder meetings. There was also the Town Hall meeting. • (Sara Marsh) What does a Peer Connection Center look like? Response: Putnam requires clients to have a formal diagnosis. Is a Peer designed program. Activities and classes ongoing at the Center thorough out the day. Have outings and vocational support. Will have Wellness Recovery Action Plans (WRAP). Will try to keep services similar to RI. In the next month focusing on a formalized curriculum. Asking for input from the clients. Meals also offered throughout the day. 		

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	<p>Clients have (i.e. Mayor) duties at the Center.</p> <ul style="list-style-type: none"> • (Jennifer Tuipulotu) Looking to have these centers Peer run. There will be a community planning process. Want to say thank you to the Putnam Board members and to Tamara for all their hard work. Tamara has been putting in long hours to ensure a continuum of care with no interruptions. This is amazing that they stepped up so quickly to support those who are vulnerable. Everyone please send a thank you to Tamara to keep her spirits lifted. Thank you. Response: Yes. Tamara has been working on this long hours. She ensures clients can connect. They have her number. • (Lauren Rettagliata) Central County has a lot of gym equipment and some computers stored in a warehouse. Tim Richardson at Putnam may know something about these stored items. 		
<p>6. Update on Suicide Prevention Request for Proposals (RFP), Suicide Prevention Coalition & Potential September Event</p>	<p>Jessica Hunt (MHSA)</p> <ul style="list-style-type: none"> • Suicide Prevention Request For Proposals (RFP) <ul style="list-style-type: none"> ○ The Panel selected the Contra Costa Crisis Center to receive funding ○ This program based on similar programs that were successful in Sacramento and Fresno ○ If is a Psychiatric Emergency Services (PES) follow up care program. Is 24/7. With call assistance and follow up care. Reduce the risk of suicide. Link to resources, call at certain intervals, follow up, assess for risk. Develop a safety plan. ○ Currently coordinating the Crisis Center staff with the PES staff to establish a procedural workflow for all parties involved. • Youth Sub-committee <ul style="list-style-type: none"> ○ Youth members requested a virtual event to be held in September (Suicide Prevention Awareness Month) ○ Currently starting to coordinate that event 		<p>Jessica Hunt (Mental Health Services Act Program Supervisor)</p>

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	<ul style="list-style-type: none"> ○ Focused on education of knowing the signs, understanding risk factors, protective factors, ways to speak to someone who is in crisis, how to connect with providers. Will keep all posted about this upcoming event. ○ Please contact me if interested in participating in planning this event 		
7. Public Comment & Suggestions for Future Agenda Items	<ul style="list-style-type: none"> • (Jo Bruno) A presentation about Peer Respite. • (Susan Norwick Horrocks) Were can we find details about No Place Like Home? Response: (Jennifer Bruggeman) Adam Down from Behavioral Health Services is tracking the No Place Like Home information. He has been coming to the Systems of Care Committee meetings and have been providing updates. I believe he will be providing an update at the August meeting (second Wednesday, August 11th at 10:00 am). Usually, the Behavioral Health Director is at these meetings to hear your thoughts but, unfortunately, she is not here today. 		Amanda Wehrman
8. Plus / Delta – Review of Meeting	<ul style="list-style-type: none"> • (Roberto Roman) Would like to commend Douglas Dunn for his report today. I know it is not easy to track all the policy information. I just want to say, “I appreciate you, Doug.” 	CPAW members and attendees	Amanda Wehrman
9. Adjournment & Next CPAW Meeting Information	<ul style="list-style-type: none"> • The next CPAW meeting will be August 5, 2021 from 3:00 pm to 5:00 pm. 		Amanda Wehrman