Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, October 7, 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: Stephen Boyd, Candace Collier, Chaplain Creekmore, Douglas Dunn, Anna Lubarov, Sara Marsh,

Lucy Espinosa Nelson, Roberto Roman, Jennifer Tuipulotu, Graham Wiseman, Amelia Wood

Staff Attending: Dr. Suzanne Tavano, Janet Costa, Jessica Dominguez, Jessica Hunt, Jaime Jenett, Michael Petersen, Jonathon San Juan

Public Participants: Pete Caldwell, Lisa Finch, Leona Foster, Christopher Holden, Susan Norwick Horrocks, Jessica Osborn, Stephanie,

Jenna Williams

Facilitator: Amanda Wehrman

Recorder: Audrey Montana

Staff Support: Jennifer Bruggeman

Excused from Meeting: None

Absent from Meeting: Y'Anad Burrell, Tom Gilbert, Carolyn Goldstein-Hidalgo, James Lancaster, Leslie May, Melinda O'Day,

Johanna Wagner

TOPIC	ISSUE/CONCLUSION	ACTION/	PARTY
		RECOMMENDATION	RESPONSIBLE
1. Welcome – Call to order,	Roll Call, Call to Order		Amanda Wehrman,
Roll Call, Review Working	• Announcements –		Facilitator
Agreement, Finalize	o (Lucy Espinoza Nelson) Is the Family Children Services		
Meeting Minutes	Coordinator. Will be hiring a Family Partner which is under		Audrey Montana to
Announcements	the Community Support Worker positon. Looking for		post notes.
	someone who is bilingual. Those interested please email		
	resumes to <u>Lucy.espinoza@cchealth.org</u> .		
	 (Lisa Finch) Announcing the Putnam Peer Connection 		
	Center's Harvest Festival/Reopening of the Antioch Site		
	(Formerly known as Recovery Innovations) to be held on		
	October 29th. We are very thankful we can reopen. For		

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		 information, please call Lisa Finch at (925) 804-1902 or email lisa@putnampeerconnections.org. (Jessica Dominguez) Today is a Spare the Air day. Free rides on public transportation are available. (Meeting Notes (August 5, 2021) – Approved with minor revisions. 	RECOMMENDATION	RESI ONSIBLE
2.	Stakeholder Sharing by	Adults Committee: No additional comments.		Committee
	Meeting Groups	Aging & Older Adults Committee: No additional comments.		Representatives
•	Adults Committee Aging & Older Adults Committee	Alcohol and Other Drug Services (AOD) Advisory Board: No additional comments.		
•	Alcohol and Other Drug Services (AOD) Advisory Board	Behavioral Health Care Partnership (BHCP): No additional comments		
•	Behavioral Health Care Partnership (BHCP)	Children, Teens and Young Adults (CTYA) Committee: No additional comments.		
•	Meeting Children, Teens and Young Adults (CTYA) Committee Health, Housing & Homeless Services (H3) – Continuum of Care Innovation (INN) Committee Membership Committee	Health, Housing and Homeless Services (H3): The Contra Costa Annual Report has been released. 2020 Contra Costa Annual Report has data on the Homeless System of Care: https://cchealth.org/h3/coc/reports.php#Annual . There will be a presentation on the report at the next Council on Homelessness meeting on October 28 th . We will be sending out a newsletter with information and updates. Innevation (INN) Committee: No additional comments.		
•	Mental Health Commission	Innovation (INN) Committee: No additional comments. Montal Health Commission (MHC)		
•	(MHC) Mental Health Commission – Quality of Care	Mental Health Commission (MHC) – There was a meeting yesterday. Presentation by HealthRight360 that supports people coming out of incarceration. Described services they provide. Discussion		
•	Reducing Health Disparities (RHD)	with Dr. Steve Hahn-Smith (Behavioral Health Services Chief of Information) regarding a single location/site to get resource		
•	Social Inclusion Committee Suicide Prevention Committee	information) regarding a single location/site to get resource information rather than having to go to six different locations/sites.		

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•	System of Care Committee Training Advisory	Mental Health Commission (MHC) – Quality of Care Committee: No additional comments.		
	Workgroup (TAW)	Reducing Health Disparities (RHD): Currently preparing the Annual Cultural Competency Plan. Getting input and feedback and looking at ways for improvement. Preparing data for next year.		
		Social Inclusion Committee: No additional comments.		
		Suicide Prevention Committee: No additional comments.		
		System of Care Committee: No additional comments.		
		Training Advisory Workgroup (TAW): No additional comments.		
3.	Dialogue with Contra Costa Behavioral Health Services (BHS) Executive Leadership • Measure X priorities & Status • Status of other grants • COVID Boosters • Q&A with group	Dialogue with Contra Costa County Behavioral Health Services (BHS) Executive Leadership Dr. Suzanne Tavano: Crisis Stabilization Unit for Youth One year ago received a CHAPA grant for the redesign of an existing building as a free standing Crisis Stabilization Unit for Youth Will be located on the Behavioral Health Side of Miller Wellness building. Separate from the hospital. But, nearby in case of physical health emergencies. Current number of youth is zero to four. Can accommodate up to nine youths. Just received conceptual drawings that provide the footprint of the space and describes anticipated use. Not dorm style. Separate areas. Conceptual Design Drawing One To accommodate up to eight youth Provides a bit more space. Leaning toward this plan. Conceptual Design Drawing Two Can accommodate up to nine youth		Dr. Suzanne Tavano, (Director, Behavioral Health Services)

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	 Consolidated Planning Advisory Workgroup (CPAW) background and history Have members to represent under-represented groups Consolidated in one group for feedback Is an ongoing membership advisory body. The intent in developing a standing advisory body is members will have historical knowledge. See how programs advocated for are working out. Meet regularly throughout the year. Implementation of CalAIM Working to meet milestones and deliverables as required by the State Impacts how all collectively do business in the future Payment Reform – no longer a cost system. Entire system will now be pay-for-service system. Will provide presentations on the components of CalAIM For the billing system, will replace ShareCare Specialty Mental Health Mental Health Services Act (MHSA) All local and state dollars, will use as matched to federal dollars. The more we can match, the more federal dollars come into the County and more programs and services we can be provide Will be looking at the MHSA Plan. Initially cut back in view of COVID. Now will review to determine what can add back into the Plan. The three percent COLA increase for programs will be put back into the Plan Forensics The Department of State Hospitals has determined that stays are too long Now looking at evaluators and their training CPAW Innovation Identify good programs and then approach stakeholders for input. Want to spend funds in a meaningful way. 	RECOMMENDATION	RESPONSIBLE

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	Comments and Response to Questions:		
	• (Jennifer Bruggeman) There was a question as to the age		
	group to be serviced by the Crisis Stabilization Unit for		
	Youth. Response: Can see from 0-5 years old. But, really for the 6 to 18 year old youth. 18 and above will go to Psychiatric		
	Emergency Services (PES).		
	 (Jessica Dominguez) You indicated the Crisis Stabilization 		
	Units will not be dormitory but will be private rooms. Having		
	a roommate may play an important role. Can be comforting		
	and there would be someone to talk to. Response : In the		
	design there would be at least a couple of rooms with two		
	beds.		
	(Anna Lubarov) How would fee-for-service effect Peer Run		
	Services? Response: Don't see any additional challenges. We		
	are very committed to Peer Providers and Family Partners.		
	• (Roberto Roman) Is the space at Miller Wellness being		
	reallocated for the Youth Crisis Stabilization Unit?		
	Response: Yes. We are investing the grant funds into this		
	pace at Miller Wellness. We relocated administrative support		
	staff to the primary care setting. Hope to eventually have the		
	Oak Grove Campus to be the main crisis hub.		
	(Amelia Wood) How do we go about becoming an		
	Independent COVID-19 Test Site? Response: We could not		
	do for Community Based Organizations (CBO's). Can do		
	within Behavioral Health with County employees. In August		
	instituted Public Health Orders that applied to all County		
	Public Health workers. By these Orders, anyone working in the Health Care Center had to be vaccinated by September		
	30 th . Exceptions for Medical Exemptions or Religious		
	Exemption. Had to set up a system for those not vaccinated to		
	be tested every seven days for COVID-19. Behavioral Health		
	nurses were trained to administer the tests. County Behavioral		
	Health staff are now ninety six percent vaccinated. CBO's		
	will be able to apply to be Independent COVID-19 Testing		
	Centers. Any organized entity can apply through the State		

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		Department of Public Health to be its own testing site. Certified to do the antigen testing. Also in reference to Mobile Crisis, we are still in the beginning phase. We are ahead of a majority of counties in this State. Working on a virtual mobile crisis hub. Need to look for funding and have applied for grants. We were just notified we received a three million dollar grant award from the State.		
4.	Presentation on Overcoming Transportation Barriers, a 5 year Innovation Project	Presentation: Overcoming Transportation Barriers (OTB), PowerPoint Presentation "Overcoming Transportation Barriers, Five Year Mental Health Service Act, Innovation Grant, 2016-2021, Behavioral Health Services, Office for Consumer Empowerment" Presenters: Jennifer Tuipulotu, Jessica Dominguez and Candace Collier		Jennifer Tuipulotu (Program Coordinator, Office for Consumer Empowerment)
		 OTB Project history In 2016, received a Mental Health Services Act (MHSA) Innovation Services Grant. Overcoming Transportation Barriers is a five year project that is now coming to a close. OTB Project was established to: Help clients build self-sufficiency Apply independent travel skills Increase access to mental health services Improve System navigation Expand independent living and self-management skills Encourage self-advocacy Targeted clients and family members throughout the mental health system of care at County mental health clinics. Did expand to some Community Based Organizations' clients and some Alcohol and other Drugs clients. Had two staff Commute Navigation Specialists (CNS) also known as Mental Health Community Support Workers 		Jessica Dominguez and Candace Collier (Community Support Workers, Office for Consumer Empowerment)

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•	Provided several services including networking and working with local transit authorities and provided them education, met with County programs to assess specific needs, made presentations on the project, provided resources, helped clients and family with accessing public transportation, mapped routes and helped apply for discount transit and bus cards		
	Annual Deliverables 2016-2017		
	 Conducted Service Improvement Survey to assess needs, collaborated with transit agencies, developed a regional brochure/transportation guide and bus ticket log 		
•	 Annual Deliverables 2017-2018 Peer Support Transportation line established, began servicing clients, Travel training with Tri Delta started and Supported SPIRIT students 		
	 Peer Support, mapping routes, links to resources and discounted passes and fare information 		
•	 Annual Deliverables 2018-2019 Developed All County Transportation Guides in English and Spanish Developed Coping Wallet Cards 		
•	 Annual Deliverables 2020-21 Flex Funds introduced, provided transportation updates during pandemic, tri-fold cards in Spanish, developed transportation packets for East County Clinics, Posters for clinics developed and OTB committee meetings met via Zoom 		
	Held bi-monthly OTB subcommittee meetings		
•	Deliverables during the OTB Project O Coping cars, brochures, Flex Funds, posters for clinics and transportation packets for clinics		
•	Recommendations for moving forward o Flex Funds continue (i.e. used to replace wheelchair, wheel replacement, walking shoes for those who are homeless and who also walk to appointments), coping		

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	cards be passed out with bus passes and clipper cards, continue to update and distribute regional brochures		
	 Comments and Response to Questions: (Jennifer Bruggeman) Thank you so much for the great presentation. Innovative projects are time limited with a five year maximum. Great to get an overview at the conclusion of this wonderful project. We see all that you have accomplished. We appreciate you sharing the information with us today. (Amelia Wood) I love the Coping Cards. Great idea. (Chaplain Creekmore) Is there a chance the Program can come back as there is a need for these services? How did people who received assistance from Flex Funds (i.e. wheel chair replacement) qualify? Response: To qualify for Flex Funds, need to be an established client/patient with future appointments already in place with a need for the funds (i.e. wheelchair, shoes). (Jennifer Bruggeman) In regards to the question if the program could come back, it was great to have this presentation on the overview of this project. We can see what was accomplished in the five years. At the end of the five years, a report is done and sent to the California Mental Health Services Office of Accountability Commission (MHSOAC) which is the State body that oversees these Innovation projects. We will look at this project. The Flex Fund component was really valuable. To continue with this project, would need to find another way to fund it in order to incorporate this program into our County System of Care. 		

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 De-Brief 9/9 Youth Suicide Prevention Forum Overview Summary of demographics & feedback Future Community Program Planning 2021 	 On September 9, 2021 during Suicide Awareness Month and Suicide Prevention Week, MHSA held a Suicide Prevention Community Forum on the topic of Youth and Suicide. Virtual Forum with 134 attendees Received a lot of positive feedback from surveys: Majority strongly agreed effective, met objectives, received input from talking circles, felt comfortable providing input during discussions, enjoyed presentations and speakers, were satisfied with the time Forum offered, the time length and were satisfied with the Forum. Most heard of the Forum from County services or County email. Majority were from ages 35 – 55 years old. Also, had youth participants (14 to 18 years old) also 18 to 25 years old. Major language was English and most were female. Majority were from Central and East County. Highest response identified as Caucasian or Asian. Majority responded that neither they nor family member had received mental health services. Others confirmed they themselves or close family member had received services. Identified as members of the community, Behavioral Health providers or consumers. Large number had Masters Degrees. Those at this meeting today received links to the video of the Forum and audio and materials. Have information in English and Spanish. Also have the link to the Suicide Prevention Report. Will send an email with all this information to those on the CPAW email distribution list. Poll question given at the beginning and end of the Forum: If you or someone you know is in crisis, do you know how to reach out for help? 		Jessica Hunt (Mental Health Services Act (MHSA) Program Supervisor)

 Beginning of Forum: 65% said Yes. 7% said No. 28% said were not sure. End of the Forum: 100% indicated they knew how to reach out for help during a crisis. This was the goal of the event. Breakout Groups: asked four questions How to make people feel safe to talk about youth Mental 	COMMENDATION	RESPONSIBLE
said were not sure. o End of the Forum: 100% indicated they knew how to reach out for help during a crisis. This was the goal of the event. • Breakout Groups: asked four questions		
Health and wellness. What needs to change? What works? Ask the person directly. Ask what they need. Use peer support groups, groups, peers with lived experience. Don't lecture. Education and resources needed. Need Mental Health Awareness and Suicide Prevention curriculum. Advertise. Reach a broader audience. Provide education in middle school. Acknowledge issues start younger. Education thru apps. Coping – teach skills like journaling. Provide education on the impact of social media on mental health. What is getting in the way of young people getting the support they need? Cultural attitudes. Stigma, fear. Lack of positive coping skills. Numbing themselves using devices. Lack of education. Poor communication with adults in their life. Lack of access to/knowledge of resources. Lack of affordable access and Transitional Age Youth (TAY) services. Fear of going to unknown person for support. Youth do not know that they can get confidential support even if under age. How can parents, adults and community resource and schools be there for young people? Need more training (i.e. mental health, know the warning signs, knowing what to say, where to reach out for help, how to validate feelings). Change school culture (emphasize importance going to the school		

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	flexible school schedule). Need more campaigns (billboards, on social media). How young people can be there for each other. How to get help for a friend without feeling betraying the friend's trust. Important peer counseling and education. Teach teens how to communicate if need to reach out for help. Anonymous supports like the Contra Costa Crisis Center. Change public stigma. Received a lot of positive feedback from all those who participated. Thank you to everyone who participated.		
	 Comments and Response to Questions: (Chaplain Creekmore) A wonderful, informative presentation. (Jennifer Bruggeman) I put the link for the forum in the Chat if people would like to review the documents (i.e. the Suicide Prevention Report Card): https://cchealth.org/mentalhealth/mhsa/ https://cchealth.org/mentalhealth/ccspc.php (Jessica Hunt) The video and audio of the Forum is available on the Mental Health Services Act (MHSA) website. Presentation slides in English and Spanish are also available. (Graham Wiseman) Thank you for the wonderful summary. Thank you for all the work that you did to make that all come to fruition. Amazed at the information you reported back about how much people were sharing. The County is working on a collaboration with the schools - Behavioral Health and the Office of Education. 		

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6. SPIRIT 2021	PowerPoint Presentation: "SPIRIT (Service Provider		Janet Costa
	Individualized Recovery Intensive Training"		(Community
	Presenter: Janet Costa and Candice Collier (OCE):		
	·		Support Worker II, Instructor SPIRIT Program, Office for Consumer Empowerment) Candace Collier (Community Support Worker, Office for Consumer Empowerment)
	 Three Part Course SPIRIT I and II in the Spring, 2 classes per week on 		
	Monday and Wednesday from 11:00 am to 2:00 pm.		
	SPIRIT III is Internships.		

SPIRIT I and II Presenters Topics: Peer Support, Active Listening, Group Facilitation, Ethics, Cultural Responsiveness, Patient	RECOMMENDATION	RESPONSIBLE
Rights, Resume Writing and Interviewing Skills Subject matter experts from Contra Costa BHS and Community Based Organizations present. College professors also available for guidance and instruction. SPIRIT III - Internships Summer semester. Classes Monday - 11:00 am - 2:00 pm. Tuesdays through Friday is six week virtual internship with a local behavioral health agency for minimum of 60 hours. Placement through interviewing process at virtual work study fair (submit resumes). Prepared students with writing resumes/cover letters and preparing for interviews. 28 behavioral health agencies participated. Graduation - Certificate of Completion Upon completion of SPIRIT I, II and III Certificate of Completion Certificate for Wellness Recovery Action Plan (WRAP) Career Goals/Continuing Education Many SPIRIT graduates go on to paid employment or volunteer within the behavioral health system of care Some continue with college education Have access to SPIRIT Vocational Services and Continuing Education Have access to SPIRIT Vocational Services and Continuing Education Applications for SPIRIT 2022 due October 156th. Link: https://cchealth.org/mentalhealth/pdf/SPIRIT-application-2022v2.pdf Comments and Response to Questions: (Chaplain Creckmore) Has the curriculum changed in consideration of AB 803? Response: (Janet Costa) We have always been compliant. We are pretty much in compliance		

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	 (Lucy Espinoza Nelson) I am so in love with that program. I know so many people who have graduated from the program. SPIRIT does a really great job. It's a very active program. Thank you so much. (Jessica Dominguez) I know someone who wants to become a child therapist. I told him, "Why don't you get your foot in the door and start with SPIRIT?" (Janet Costa) We appreciate all of you who have gone through or support SPIRIT. Application deadline has been extended to October 15th. 		
7. Public Comment & Suggestions for Future Agenda Items	• (Amelia Wood) I find there are not a lot of places out there that support our older adult mental health clients that might have co-occurring medical conditions. Maybe we can discuss that. Getting harder to house clients adults and older adults who suffer with mental heal issues but also have medical issues.		Amanda Wehrman
8. Plus / Delta – Review of Meeting	(Jaime Jenett) Great meeting.(Stephen Boyd) Great meeting and presentations.	CPAW members and attendees	Amanda Wehrman
9. Adjournment & Next CPAW Meeting	• The next CPAW meeting will be November 4, 2021 from 3:00 pm to 5:00 pm.		Amanda Wehrman