

Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, April 7, 2022

3:00 pm – 5:00 pm

Meeting Access via Online Zoom Video Conference and Telephone Conference:

<https://homebaseccc.zoom.us/j/84801163858?pwd=d01ZbHN0bHZ5V1NCeDdZUkh2SW1pQT09>

Call In Number: 1-669-900-6833 Meeting ID Code: 848 0116 3858 Password: 390775



- Members Attending:** Y’Anad Burrell, Douglas Dunn, Anna Lubarov, Sara Marsh, Lucy Espinosa Nelson, Roberto Roman, Graham Wiseman, Amelia Wood
- Behavior Health Director:** Dr. Suzanne Tavano
- Staff Attending:** Janet Costa, Synetta Freeman, Jaime Jenett, Ernesto Robles, Robert Thigpen, Genoveva Zesati
- Public Participants:** Mariela Acosta, Phil Arnold, Carla, Gigi Crowder, Alonzo Edwards, Meaghan Faulkenberry, John Gallagher, Naomi Gashaw, Vi Ibarra, Shelly Ji, Reverend Wanda Johnson, James Kendrick, Edgar Martinez, Veronica McManus, Michele O’Keefe, Gerardo Peniche, Jill Ray, Elder Desiree Rushing, Tristan Siebold, Tiffany Wang, Baylee Wechsler, Laura Zanzucchi
- Facilitator:** Mark Mora
- Recorder:** Audrey Montana
- Staff Support:** Jennifer Bruggeman
- Excused from Meeting:** Jennifer Tuipulotu
- Absent from Meeting:** Chaplain Creekmore, Tom Gilbert, Carolyn Goldstein-Hidalgo, James Lancaster, Leslie May, Melinda O’Day, Johanna Wagner

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| 1. Welcome <ul style="list-style-type: none"> • Call to Order • Roll Call • Review Working Agreement • Finalize Meeting Notes • Announcements | <ul style="list-style-type: none"> • Welcome, Call to Order • Roll Call • Reviewed Working Agreement • Meeting Notes: Reviewed meeting notes (February 3, 2022). No revisions recommended. • Announcements <ul style="list-style-type: none"> ○ (Gigi Crowder) NAMI Contra Costa is taking nominations for the Mental Health Awareness Month Champions of | Information Notes will be posted to MHSA CPAW website. | Mark Mora (Facilitator) Audrey Montana to post notes. |

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| <ul style="list-style-type: none"> • Poll | <p>Change Awards. Will be presenting awards at the NAMI General Meeting in on May 19th. Will also discuss AB 988 and the A3 (Anyone, Anytime, Anywhere) Program.</p> <ul style="list-style-type: none"> ○ (Genoveva Zesati) Native American Health Center Family Day will be this Saturday. Flyers available. We have released the information for the Loan Repayment Program for Behavioral Health Services staff and partner-based agency staff to help repay eligible student loans: Loan Repayment Program Application and Program Guide: https://cchealth.org/mentalhealth/mhsa/pdf/CCBHS-LRP-Application-Program-Guide.pdf Contact: Genoveva.Zesati@CCHealth.org ○ (Jennifer Bruggeman) Introduced the new Supervisor of the Innovation CORE (Center for Recovery and Empowerment) Program, Laura Zanzucchi. CORE is an intensive out-patient program for youth that are dually diagnosed with mental health and substance use disorder issues. CORE was inactive during COVID. Currently in the process of rehiring staff. <ul style="list-style-type: none"> • Poll (not conducted at this meeting and will do next meeting) | | |
| <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 & | <p>Adults: 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):</p> <ul style="list-style-type: none"> • There was meeting in March. • The next BHCP meeting will be April 19, 2022. Invite all to come for an update as to Assembly Bill 988. Update on the Miles Hall Crisis Hub and the A3 (Anyone, Anywhere, Anytime) program. <p>Children, Teens and Young Adults (CTYA) Committee: No additional comments.</p> | | Committee Representatives |

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| <p>Homeless Services (H3)</p> <ul style="list-style-type: none"> • Innovation (INN) Committee • Membership Committee • Mental Health Commission (MHC) • Reducing Health Disparities (RHD) • Social Inclusion Committee • Suicide Prevention Committee • System of Care (SOC) Committee | <p>Health, Housing and Homeless Services (H3):</p> <ul style="list-style-type: none"> • Every year we must do federal Housing and Urban Development funding application for funding for homeless housing and services. Learned we received additional HUD funding re domestic violence. Hope Solutions will be operating a new program serving people experiencing domestic violence. Link for the HUD Funding Award results: https://cchealth.org/h3/coc/pdf/Award-Results-FY2021.pdf • Have a new Continuum of Care (COC) Director, Jamie Schecter. Info will be in the COC Newsletter. <p>Innovation (INN) Committee: No additional comments.</p> <p>Membership Committee: No additional comments.</p> <p>Mental Health Commission (MHC):</p> <ul style="list-style-type: none"> • Last night, the Mental Health Commission discussed the Behavioral Health continuum infrastructure future Program. Updates provided by Dr. Suzanne Tavano and Adam Down. County is applying for several funding grants. Also provided updates on housing placements and the budget. <p>Mental Health Commission (MHC) – Quality of Care: No additional comments.</p> <p>Reducing Health Disparities (RHD): No additional comments.</p> <p>Social Inclusion Committee:</p> <ul style="list-style-type: none"> ○ Did not meet in March. Next meeting is in April. <p>Suicide Prevention Committee:</p> <ul style="list-style-type: none"> • This month the Suicide Prevention Committee had a presentation about the rates of suicide in the elder community and ways can address this (especially isolation experienced in the elder community). • The quarterly Suicide Prevention Youth Subcommittee will meet next month in May, Mental Health Awareness Month. <p>System of Care Committee: No additional comments.</p> | | |

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| <p>3. Dialogue and Update from Contra Costa Behavioral Health Services (BHS) Executive Leadership</p> <ul style="list-style-type: none"> • Care Court • Updates – A3, Youth CSU, Housing Grants • Q&A | <p>Dialogue with Contra Costa County Behavioral Health Services (BHS) Executive Leadership</p> <p>Dr. Suzanne Tavano:</p> <ul style="list-style-type: none"> • Youth Crisis Stabilization Unit (CSU) <ul style="list-style-type: none"> ○ Still in negotiations re a service provider ○ The building construction is moving forward for the Youth CSU to be located at the Miller Wellness Center – Behavioral Health side ○ No disruption to the Center until September as currently working on new permits/finalizing plans • Care Court <ul style="list-style-type: none"> ○ Announced by Governor Newsom. Concept is to identify those who are unsheltered and have a diagnosis of schizophrenia psychosis spectrum. ○ The Court will appoint a clinician to assess the person. If the Court determines the criteria has been met, then Behavioral Health will be responsible and a support person will be assigned to the individual to assist and help with services navigation. Will develop a plan to include Behavioral Health services and housing. ○ Geared to reducing the incidents of homelessness especially with those with serious mental health issues ○ The legislature is looking at budgeting. To provide funds for the judicial system – Court, Judge and Public Defender. Unknown what sanctions available to the court if the person does not participate. Still new program and is developing. • Housing Grants <ul style="list-style-type: none"> ○ Through the California Department of Health Care Services (DHCS) and California Department of Social Services (CDSS) grants are available. Each Department’s grants have a different focus. ○ Have a consultant to lead the community planning process | | <p>Dr. Suzanne Tavano (Director, Behavioral Health Services)</p> |

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| | <ul style="list-style-type: none"> ○ The Contra Costa Behavioral Health Continuum Infrastructure Program (BHCIP) will meet on April 18th from 4:00 – 6:00 Zoom. All welcome to attend. Meeting information and Zoom link: https://cchealth.zoom.us/j/97093808575 Phone: (646) 519-9805 Meeting ID: 970 9380 8575 ○ Will discuss multiple grant opportunities: <ul style="list-style-type: none"> ▪ Phase 1 <ul style="list-style-type: none"> ◇ Mobile crisis response. Applied and awarded a little under three million dollars (14-18 month) ▪ Phase 2 <ul style="list-style-type: none"> ◇ Planning Grant applied for and awarded. In the process of receiving funds ▪ Phase 3 <ul style="list-style-type: none"> ◇ Pertains to shovel ready projects. Reached out to several entities. Currently no shovel ready projects. Deadline to apply is April 8th. ▪ Phase 4 <ul style="list-style-type: none"> ◇ In the summer, a Youth Treatment Facility. To fill in the gaps in the system. ◇ Next round to apply is this summer re youth treatment facilities. Next grant after that is more open. Looking for shovel ready projects. ▪ Phases 5 and 6 (still open) ● A3 Program (Anyone, Anywhere, Anytime) <ul style="list-style-type: none"> ○ Currently hiring staff, testing the Telecom piece ○ Working with consultants and looking at training grants. Especially training of non-law enforcement crisis staff. Working with Police Chiefs now for crisis training focused on law enforcement. And also training of law enforcement who work with other crisis responders. ● Oak Grove Campus <ul style="list-style-type: none"> ○ Had a number of preliminary meetings | | |

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| | <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Gigi Crowder) You will be working with consultants re crisis intervention training. Was there a Request for Proposals (RFP) announced for that? We have specialized staff at NAMI that even provide such training. Consultants should reflect the community served. Response: I am not sure as I am not involved with that process. Yes. Will provide you information re a contact person. • (Douglas Dunn) The April 18th BHCIP meeting regarding children and adolescents brick and mortar ideas? Response: Yes. Will be an overview of both opportunities. Deadline for shovel ready projects is tomorrow. If funding not all used, may be another opportunity to submit proposals in May. Working now with entities that may have shovel ready projects by May. • (Lucy Espinosa Nelson) The CORE program is to help people with housing. I know a family with children I am working closely with. This family is in need of housing and close to living on the streets. I called 211 and CORE and nothing. I was disappointed and frustrated. Is there an easier way to get housing and services for this family? Response: I will be meeting with Lavonna Martin re Coordinated Entry System and prioritized entry. We need to better understand all the housing options. Behavioral Health does not play a role in that specific process. We will see how we can best support people to access housing. Look at the system. I will report next month on our meeting discussions. • (Jill Ray) There are two CORE programs. One is related to the Coordinated Entry System for housing that works with Health, Housing and Homeless Services (H3). The other is the CORE (Center for Recovery and Empowerment) Program that is an Innovation program that works with youth. Response: The Innovations CORE program addresses the co-occurring needs of youth. This program was paused. Received feedback re the program. We want to service youth in the community. We | | |

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| | <p>want the criteria for admission to the program to be more flexible. Want to work with the families more. That CORE program is being reformulated. We are happy Laura Zanzucchi is with the program and am enthusiastic for a new course for the program. We want to expand this program to all regions of the County. (Jill Ray) The CORE program that works with housing and H3, was not paused. (Jennifer Bruggeman) The youth CORE Program will have a Steering group to help with the relaunching of the program. May possibly do a name change for this youth CORE Program. Will keep all updated.</p> <ul style="list-style-type: none"> • (Anna Lubarov) For those working with the crisis team and staff, hope will have those involved who have direct lived experience. They will be very valuable. I know those with PhD's and BS degrees who are consumers. Happy to share the names. Response: All is in the planning phase now. There is absolutely room. We actually have funding for that from various grants. Will be a robust program. • (Sara Marsh) I work with housing. 211 and speaking with housing coordinators is a good place to go. They will work hard to help families that do not fit in other categories. There barriers to getting into housing especially for youth. HUD wants people prioritized based on length of time homeless. Youth usually have not been homeless as long as people in their fifties. All the people working with the housing systems are working hard to make services as accessible as possible. There is also MHSA housing that is not corrected to the CORE Coordinated Entry System. I believe Behavioral Health manages entry to those programs. Would like to be more transparent. Perhaps a roadmap. Know how many units available. Response: Yes. The Mental Health Commission has touched on that. I will be happy to share any information. All that information has been catalogued. Every room has been catalogued – location, operators, funding, number of beds, etc. The information is available. Also, Master Leasing has moved back to Behavioral Health under Kennisha Johnson. Would | | |

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| | <p>like federal dollars to help expand housing. But once do, must abide by federal definitions for services. Trying to look at housing options that can grow without using federal dollars.</p> <ul style="list-style-type: none"> • (Phil Arnold) When Y2K was anticipated, a lot of people were hiring consultants. At that time, I was a Project Manager with Oracle. After Rodney King, worked with individuals in Los Angeles in the rebuilding process. Informed Vendors were designated as Uniquely Qualified which speeded up the process. Recommend to proceed with caution and deliberate self-inspection to ensure equity in review of Requests for qualifications, information or proposals. • (Anna Lubarov) Is it easy for consumers or their families to access services for housing and Behavioral Health services? We should do testing on the system. Get recommendations to streamline the system. Response: We invest in as much as we can. Invested twenty million dollars of one-time funding in No Place Like Home for permanent housing. Then an additional thirty million - a total of fifty million dollars. Put as much as Behavioral Health Services can into housing. Working also on implementing CalAIM. Our County improvement plan was approved by the State. Is very IT focused. To streamline documentation and the process. Reducing and eliminating barriers that people experience in accessing care and making the care and services more immediately available. Changes to the service delivery system itself. Is a quality improvement process. • (Gigi Crowder) There will be training only for law enforcement but not for individuals? Voices of those most harmed should be heard re such training. Response: We are putting a committee together to identify training needs for crisis responders and also advanced training for law enforcement. • (Jaime Janett) Volunteered to present at a future CPAW meeting on how housing decisions made in homeless system of care for rapid and permanent supportive housing. | | |

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| | <ul style="list-style-type: none"> • (Graham Wiseman) Dr. Tavano and her team made a great presentation before the Mental Health Commission yesterday. Our county is spending twenty percent of it's budget on housing. That's fifty million dollars! • (Synetta Freeman) Thank you Dr. Tavano. • (Phil Arnold) Thank you Dr. Tavano. Your work product and commitment are genuinely appreciated. Stay the course! | | |
| <p>4. Forum Overview from 3/4/22</p> <ul style="list-style-type: none"> • Summary of presentation, feedback • Survey Results | <p>Presenter: Genoveva Zesati</p> <p>PowerPoint Presentation – “Innovation Community Forum Summary Report “</p> <ul style="list-style-type: none"> • Community Forum Overview (held March 4, 2022) • Was a virtual event with eighty attendees <ul style="list-style-type: none"> ○ Interpretation services available in various languages and American Sign Language ○ Conducted Poll: <ul style="list-style-type: none"> ▪ 40% not attend a forum prior, 33% not familiar with MHSA or Innovation, ▪ Peer (28%), Family (28%), other (30%) ▪ Community Member (38%), Provider (54%) ▪ Identified by County region • Shared Community Program Planning Process Survey Results <ul style="list-style-type: none"> ○ Survey open two and a half months prior and forum day ○ Received 230 responses ○ Reviewed demographic data from those responding (e.g., race/ethnicity, affiliation, age, gender identity, sexual orientation, education level, language, disability, region of the County, Veteran status) ○ Priority issues identified in order of priority (e.g., Increase in Behavioral health Services, Housing/Homeless, Access to care, Community building and support, crisis services, prevention and early intervention, justice involved/community violence, school-based supports/services, suicide prevention and transportation. | | <p>Genoveva Zesati (Workforce, Education and Training (WET)/Ethnic Services Coordinator - Mental Health Services Act)</p> |

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| | <ul style="list-style-type: none"> ○ Preferred method for input re Contra Costa Behavioral Health care <ul style="list-style-type: none"> ▪ Live event (62), Survey (122). Contact directly via phone or email (25), attending CPAW or other public meetings (30) ● Innovation Project Ideas <ul style="list-style-type: none"> ○ Psychiatric Advanced Directives (PADS) ○ Community Defined Practices ● Small Group Discussion <ul style="list-style-type: none"> ○ Things working well <ul style="list-style-type: none"> ▪ Community Based Organizations (CBO's), Older Adult Program, Collaboration and Organizations doing school based mental health work ○ What to see more of <ul style="list-style-type: none"> ▪ Services for cultural groups and regions of County, culturally relevant/appropriate services, focus on impact of trauma, Peer partners, Peer run programs, early intervention for youth, better access and one stop resource hubs ○ What's not working, Gaps <ul style="list-style-type: none"> ▪ Need more support for families, lack of timely and appropriate access, culturally responsive care, lack of housing, need more support for youth, stigma and need funding for community-based organizations ○ Innovation Projects <ul style="list-style-type: none"> ▪ Strong support for Psychiatric Advance Directives (PADs) and micro grants for Community Based Organizations for community defined practices ▪ Support for other Innovation projects such as experimental treatments for mental health and early intervention for youth in schools <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> ● (Gigi Crowder) What amount of grant funds are needed for the Innovation program and microgrants? When might the | | |

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| | <p>Innovation projects start? Response: (Jennifer Bruggeman) The Innovation projects are still in development and there is no specific dollar amount yet. The Innovation Committee will meet later this month. Will discuss grants, funds and the project proposals. PADs is part of a multi-county collaborative that has already received State approval. With micro-grants, will start from the beginning, go through the process and ultimately receive approval from the State. (Dr. Suzanne Tavano) The State made one change for approval of an Innovation project. Previously had to be a new, first time devised and implemented project. But can now look to other counties that have devised and implemented the project previously to implement new for the first time in this County. (Anna Lubarov) From the Demographic data, appears 38% of attendees identified as Peers. 28% were family. But 54% of the participants were providers. A large percentage of attendees were providers. Who are the focus for the forum? Response: Providers could be County staff, Community Based Organization staff or other provider staff. (Jennifer Bruggeman) Many such events are heavily attended by providers. But sometimes people have multiple identities – could be a family member and a provider. We spread the word to as many as possible through our networks. Usually approximately half attendees are providers. If anyone has any ideas for additional outreach, please contact us.</p> <ul style="list-style-type: none"> • (Tristan Siebold) I think suicide prevention should be higher up on the priority list. Should focus a little bit more on Peers. Also, transitional age youth (TAY). Should focus on preventing future homelessness of TAY. Suicide prevention should always be number one priority. Suicide prevention should be present in schools as early as possible. Need to destigmatize mental illness. Transitional age youth and peers are overlooked. Response: (Genoveva Zesati) There is the Suicide Prevention Committee supported through Behavioral Health Services. We can send that information to you if you | | |

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| | <p>would like. (Jennifer Bruggeman) The Priorities are listed in order based on responses from participants at the forum.</p> <ul style="list-style-type: none"> • (Graham Wiseman) I am on the Suicide Prevention Committee and the Mental Health Commission. I am active working with youth and work throughout the state on youth suicide prevention. Important to hear the voices. The community outreach survey was sent several times before the forum. I know there was a real effort to get input from different people in the county. For this forum, twenty eight percent of the attendees are from one CBO. There are a lot of other groups and agencies here in the county. Over representation does not mean they are the strongest voice. Providers are here because we care and are working together to accomplish something. From a presentation given by Adam from the County, shows the level of commitment of our county to prevent homelessness. A big chunk of our budget going to that. We need to acknowledge that and applaud it. Let's celebrate some of the successes of this county. We are accomplishing a lot and moving forward. Recently lost several students in the county to suicide. Suicide prevention is a high priority. Now have a program in the schools. Response: (Dr. Suzanne Tavano) Do need to take a look at the resources. • (Edgar Martinez) I also think suicide prevention should be higher on the priority list. Response: (Dr. Suzanne Tavano) The county Office of Education in collaboration with Behavioral Health received funding for student mental health. The County and contracted CBO's also go into the schools. Under public health, the mobile FQHC has clinicians providing mental health services to students. • (Anna Lubarov) Should look at suicide prevention in young people. Meet people where they are. Provide help before too late when standing on the side of a bridge. • (Gigi Crowder) Some people who registered had problems logging into the forum. | | |

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| | <ul style="list-style-type: none"> • (Edgar Martinez) The marketing for the forum could be improved. Was advertised on social media platforms one week prior. Or less depending on the platform. But happy about the budget for housing. However, there are local government challenges that politicize support. Will city councils support these actions in their city? • (Shelly Ji) Thank you Genoveva for the Chinese translation for the forum meeting. Next time the translation should be more focused on mental health terms translation than general meaning translation. Translator should have a little background in mental health. We also need more funding for the Asian Pacific Islander community (API). Also, API transitional age youth and their families need support. | | |
| 5. Overview 22-23 Plan Update | <p>Presenter: Jennifer Bruggeman</p> <p>PowerPoint Presentation – “MHSA 22-23 Plan Update Overview”</p> <ul style="list-style-type: none"> • MHSA Three Year Program and Expenditure Plan Fiscal Years 2020-2023 - This is now year three of the three year cycle • The MHSA FY 22-23 Plan draft update is posted on the MHSA website (https://cchealth.org/mentalhealth/mhsa/). Public Comment cards are available and comments can also be submitted via email. • Reviewed priorities from the pre-COVID period • Budget increases <ul style="list-style-type: none"> ○ Increased budgeted from 54 million dollars to 63 million dollars. <ul style="list-style-type: none"> ▪ Community Services and Supports – \$47.8 Million ▪ Prevention & Early Intervention – \$10.5 million ▪ Innovation – \$1.9 Million ▪ Workforce, Education and Training – \$2.9 million ▪ Capital Facilities/Technology – funded through other revenue sources | | Jennifer Bruggeman (Mental Health Services Act (MHSA), Program Manager) |

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| | <ul style="list-style-type: none"> ○ Increases for <ul style="list-style-type: none"> ▪ Housing and Supportive services ▪ Bilingual Staff through Intern Stipend Program ▪ Career Ladder Positions for Peers ▪ Innovation Programs (PADs and Micro-grants) <ul style="list-style-type: none"> ◇ PADs proposal draft is located on the MHSA ◇ website: (https://cchealth.org/mentalhealth/mhsa/) ● Housing <ul style="list-style-type: none"> ○ Enhancement to Housing Continuum ○ Maximize No Place Like Home participation <ul style="list-style-type: none"> ▪ Round 1 – 10 units at Veteran’s Square ▪ Round 2 – 13 units at Galindo Terrace ▪ Round 3 - 8 units at Ygnacio Valley Road ▪ Round 4 - If awarded, will result in 21 units in Walnut Creek and 8 units in Richmond ○ Maximize grant opportunities ○ Behavioral Health Housing Services Coordination Team expansion ○ Expansion of enhanced board and care contracts ● Peer Support <ul style="list-style-type: none"> ○ Career Ladder, Senate Bill 803 (Peer Certification), Peer Respite Center (TBD planned as part of the Miles Hall Crisis Hub (funded by Measure X) ● Workforce, Education & Training (WET) <ul style="list-style-type: none"> ○ Intern Stipend Program (bilingual staff) ○ Workforce retention and recruitment – expansion of loan repayment program ● Innovation <ul style="list-style-type: none"> ○ PADs presentations, seven stakeholder meetings, survey ○ Innovation Community Forum - March 4, 2022 ○ Two Innovation Projects (PADs and Micro-grants) | | |

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| | <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Amelia Wood) Veteran’s Square is beautiful. Hume Center is there. Like to see a couple in every city. There is a need for supportive housing like that. Believe grand opening is May 11th at 11 am. What is the Intern Stipend Program? Response: (Genoveva Zesati) CBO’s have Intern. This helps them recruit Interns. Especially those with language capacity or who serve cultural needs of the community. Expanding the funding. • (Gigi Crowder) Delighted about the targeted Interns with lanaguate capacity. A3 is providing services and must ensure we are hiring bilingual staff. But not just linguistic. Staff should reflect the community served (especially for youth services). Includes LGBTQ. If have a list, people more apt to apply. Response: Yes, we heard this recommendation from the community. • (Synetta Freeman) See 21 housing units in Walnut Creek and 8 in Richmond. Things later more equal? Response: Those units were just new housing awarded through the No Place Like Home. Does not represent the housing county wide. Housing is available from Behavioral Health Services and also through H3. Next month Jamie Jenett will talk to us more about housing in the County. (Dr. Suzanne Tavano) We have to partner with a developer/contractor and then purchase those units from the total units in the building. We try to purchase as many as possible for No Place Like Home housing. Residents are placed through the Coordinated Entry System. • (Phil Arnold) As a septuagenarian, growing up I was beat down more that was lifted up. Growing up I heard people say to me I was a “credit to my race”. Not sure what that meant. Had a negative impact. I am pleased to be affiliated with NAMI and the Uplift program for our kids. Need to help youth. I am happy these discussions are happening. I am speaking the truth and thank you for wanting to do something and make a difference. | | |

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| 6. SB 803 (Peer Certification) - Update | <p>Presenter: Roberto Roman</p> <p>Document Displayed: “CalMHSA Timeline – Peer Support Specialist Certification Program”</p> <ul style="list-style-type: none"> • CalMHSA (California Mental Health Services Authority) is the agency responsible for starting this certification program • Timeline shared at the Stakeholder Advisory Council meeting of March 25, 2022 <ul style="list-style-type: none"> ○ May be updated for tomorrow’s scheduled meeting ○ March-April – developing the exam, finalizing competencies and standards ○ May – open program for grandparenting process, technical assistance re trainings ○ June – technical and fairness review, form to publisher ○ July – pilot administration of exam, hold focus groups, entities begin training ○ August – complete pilot testing & standards, cut scores ○ September – final exam forms delivered to publisher ○ October – Peer Certification Exam available to the public • The next Stakeholder Advisory Council meeting is open to the public and will meet tomorrow via zoom at: https://www.calmhsa.org/peer-certification/ <p>Comments and Response to Questions:</p> <ul style="list-style-type: none"> • (Gigi Crowder) Is there a title with the County that must be in place in order to be able to bill for services? Perhaps we can have a meeting with the County re the role the County has to play to ensure everything is in place. Response: I am not clear about what referring to. (Dr. Suzanne Tavano) The State did not want to fund so made it optional. To claim MediCal under this program, it must be a MediCal certified program by Behavioral Health. We do have a certification protocol. We will pay for it and we will do that. | | Roberto Roman (Community Support Worker II, Office for Consumer Empowerment |

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| 7. Public Comment & Suggestions for Future Agenda Items <ul style="list-style-type: none"> • Overview of Cultural humility Plan • NAMI FVSN Presentation | <ul style="list-style-type: none"> • (Baylee Wechsler) Congratulate this Workgroup that there is an emphasis on transitional age youth and Black, Indigenous and People of Color (BIPOC) communities in the upcoming programs. Should also be a focus for funding (Latin X, AAPI, African Americans, TAY, LGBTQ groups) to ensure equitable access to programs. • (Rev. Wanda Johnson) Don't forget our African American group who have been at the bottom of the list. Must be even with other nationalities and organizations. Must be inclusive in conversations. We have to be at the table when making decisions for the community. | | Mark Mora |
| 8. Plus / Delta – Review of Meeting | <ul style="list-style-type: none"> • None at this time. Comments can be emailed to County staff. | CPAW members and attendees | Mark Mora |
| 9. Adjournment & Next CPAW Meeting | <ul style="list-style-type: none"> • CPAW Steering Committee meeting will be April 21, 2022 from 11:00 am to 12:00 pm. • The next CPAW meeting will be May 5, 2022 from 3:00 pm to 5:00 pm. | | Mark Mora |