

Contra Costa Mental Health Commission
Monthly Meeting Minutes
March, 24, 2011
Approved April 28, 2011

1. **CALL TO ORDER / INTRODUCTIONS**

The meeting was called to order at 4:32 by Chair McKindley-Alvarez. Introductions were made around the room.

Commissioners Present:

Peter Bagarozzo, District V
Peggy Kennedy, District III, Vice Chair
Dave Kahler, District IV
Carole McKindley-Alvarez, District I, Chair
Colette O’Keeffe, MD, District IV
Floyd Overby, MD, District II
Teresa Pasquini, District I
Annis Pereyra, District II

Commissioners Excused:

Evelyn Centeno District II
William Wong, District V
Sam Yoshioka, District IV

Commissioners Absent:

Supv. John Gioia, District I

Attendees:

Ralph Hoffmann, NAMI, MHCC, MindFreedom
Brenda Crawford, MHCC
Mariana Moore, Human Services Alliance *arrived
at 5:22*
Carolina Salazar

Staff:

Linda Cipolla, Staff to MHC
Susan Medlin, OCE
Suzanne Tavano, MHA
Donna Wigand, MHA
Sherry Bradley, MHA
Jennifer Tuipulotu, OCE
Dorothy Sansoe, CAO

2. **PUBLIC COMMENT**

The public may comment on any item of public interest within the jurisdiction of the Mental Health Commission. In the interest of time and equal opportunity, speakers are requested to observe a 3-minute maximum time limit (subject to change at the discretion of the Chair). In accordance with the Brown Act, if a member of the public addresses an item not on the posted agenda, no response, discussion, or action on the item may occur. Time will be provided for Public Comment on items on the posted Agenda as they occur during the meeting. Public Comment Cards are available on the table at the back of the room. Please turn them in to the Executive Assistant.

There were no public comments

3. **ANNOUNCEMENTS**

- A. Consumer invitation to Quality of Care Standing Committee on April 6, 2011 10:00am-12:00pm
- B. Public Hearing Meeting April 28, 5:30-7:30pm; MHC Monthly Meeting April 28, 4:30-5:30pm

Sherry Bradley announced that there is a full draft annual plan for the Mental Health Services Act on the MHSA website for the period ending April 7th 2011. She provided the plan to the Commissioners in attendance. It contains copies of exhibits to the state. Since it’s such a large document, she recommended the Commissioners focus on the executive summary and she will provide a full overview at the Annual Plan Public Hearing in April.

4. 4:50 **CONSIDER APPROVAL OF MINUTES**

A. January 27, 2011 Monthly Meeting

Corrections:

Page 13 of packet: Reword Commissioner Pereyra's statement about housing

Page 13 of packet: make correction on NAMI

- **ACTION: Motion made to approve the January 27, 2011 Monthly Meeting minutes with corrections:** (M- Kennedy /S-Overby; Passed unanimously, 7-0-0)

B. February 24, 2011 Monthly Meeting

Corrections:

Page 20 of packet: make correction on NAMI

Page 22 of Packet: Correct Motion to include, 'with the exception of 'transportation' to Capital Facilities Committee.'

- **ACTION: Motion made to approve the February 24, 2011 Monthly Meeting minutes with corrections:** (M- Kahler /S-Pereyra; Passed unanimously, 7-0-0)

5. **STAKEHOLDER UPDATES**

A. Susan Medlin – Office for Consumer Empowerment (OCE)

She was excited about a current project: gathering consumer and family members to convene on a Wellness Recovery task force in which to impact the system. It is part of a PEI stigma reduction campaign.

B. Al Farmer – National Alliance on Mental Illness (NAMI)

Farmer was not in attendance so no update was provided.

C. Brenda Crawford – Mental Health Consumer Concerns (MHCC)

She reported that MHCC is continuing to grow with a record number of consumers. The average numbers at Central is 35 per day, East is 22, and West is outgrown at 28. In hindsight, it wasn't a good decision to rent that space since they are now "busting at the seams."

Current focus is working with staff regarding peer support and advocacy. She explained that peer support meant whole health - a combination of physical and nutritional support. They will offer a 10 week program to examine goals around physical, emotional and nutritional health and will work in collaboration with SAMSA (*Substance Abuse and Mental Health Association*). Several people from each location have already signed up for the program.

Also, a reminder that they are celebrating their 35th anniversary on June 11th and will be honoring folks. Jay Mahler, the founder of MHCC, is still accepting nominations and has expanded nominations to include Napa County.

D. John Gragnani – Local One/MH Coalition

Gragnani was not in attendance so no update was provided.

E. Marianna Moore – Human Services Alliance

Moore arrived later in the meeting so no update was provided.

6. STANDING COMMITTEE UPDATE

A. Capital Facilities

The first meeting had not been scheduled so no update was provided.

B. Criminal Justice

Commissioner Kahler read a report for the group which included an extensive list of stakeholders who had been invited. (*see document*)

Commissioner Pasquini complimented the Criminal Justice Committee on the invitees list.

Discussion:

There was concern regarding the minutes provided from the Criminal Justice meeting on March 11, 2011 (page 78 in packet) and that the wording reflected negatively on consumers. It was suggested that the term 'mental health consumers' be the replacement.

Susan Medlin recommended consumer identifying information not be included in minutes and Commissioner Pasquini said that it is up to the family member's discretion what is shared.

Chair McKindley-Alvarez said the Commissioners need to be aware of the content of the minutes and that regardless of author, they need to be approved by the committee chair. She asked the Criminal Justice committee to rewrite the minutes and resubmit to the full commission.

Process questions arose when Commissioner Pasquini inquired about standing committee mission implementation. She wanted a clear completion of the planning meeting process including a Commission approved and adopted action plan. In example, last year a several page document was created and the full commission adopted each standing committee plan.

Chair McKindley-Alvarez said all committees would need to create and provide their mission statement to be approved at the April meeting.

Process questions arose regarding standing committee membership. For instance Commissioner Centeno had requested to be removed from the Criminal Justice Committee. Chair McKindley-Alvarez confirmed each member (*membership or resignation*) needs to be approved by the Commission.

C. Quality of Care

Vice Chair Kennedy said the first meeting was March 2nd and members consist of Carole, Floyd, and Colette (who wasn't in attendance). The elected officers are: Peggy Kennedy- Chair, Floyd Overby -Vice Chair, Carole McKinley-Alvarez - Secretary.

The mission statement was not created but they will develop a Mission statement at the April meeting for approval by MHC.

Regarding the goal of data-driven gap analysis, they invited county staff to discuss gathering quality versus quantity data at the Quality of Care meeting on May 4.

They invited consumers to discuss supportive services in the workplace at the Quality of Care committee meeting on April 6.

Brenda Crawford expressed concern that mental health diagnosis is not an excuse for bad job performance and also that the committee may overstep a boundary by discussing a personnel issue with a contract agency. She suggested broadening the topic to include support for employing certified peer specialists and finding ways to provide structural and system support for consumers to be good employees.

Commissioner Pereyra said some consumers cannot take on full time jobs and she suggested there be focus on part-time jobs as well.

Vice Chair Kennedy said consumers wanted a place where they could go and be heard and get information. Chair McKindley-Alvarez said they are not excluding part-time or volunteer employment, but looking at how consumers acquire necessary services.

Commissioner Pasquini asked if the whole year will be spent on the workforce bullying task. That concerns her. She wants the priorities for Quality of Care issues spelled out. "It's important to support work and it's important to support those who are not able to speak for themselves."

Vice Chair Kennedy said the issue came up to such a great degree last year and the discussion had been delayed so they wanted an open forum. The Committee doesn't plan to have ongoing conversation, they will just discuss the issue as directed by the MHC in its motion to send the issue to the Quality of Care committee.

Chair McKindley-Alvarez restated that the missions would be vetted and voted on by the full commission.

D. Nominating Committee

Since Commissioner Yoshioka and Commissioner O'Keeffe, Chair and Vice Chair of the Nominating Committee were not in attendance. Chair McKindley-Alvarez urged the Commission to read the Committee meeting notes in the packet.

E Quorum

- i. DISCUSS: what makes up a quorum
- ii. ACTION: outline solutions

Dorothy Sansoe explained a quorum is basically defined as 'more than 50% of a group.' So if there were 12 in your group, more than 50% would be 7 individuals. As long as you have a quorum of a standing committee, you can have your agenda meeting. She used an example: if a standing committee is two and the commission quorum is 7, then if five additional commission members come to the standing committee meeting, with seven commission members present, then you have an appropriate quorum for the standing committee but there is also a quorum for the Commission. The problem is the meeting has not been agenda as a Commission meeting. The result is the Commission has had a meeting which has not been properly agenda according to the Brown Act. How you handle that is up to the Commission, such as drawing straws or nicely asking a Commission member to leave the meeting if they are the seventh member. There is a way to have more than seven members and not break the Brown Act and that is when extra commissioners in attendance observe only and do not talk or participate in any way.

Discussion:

There was inquiry about renaming the meetings as Commission meetings so quorum was not an issue. Sansoe's example was if the Executive Committee met as the Commission then they would need at least seven members to attend and basically they would be having a Commission meeting, not an Executive Committee meeting.

Vice Chair Kennedy with the Executive Committee as an example, said there are four members so a quorum would be three. If four additional Commissioners showed up for the meeting there would be a total of seven Commissioners, so unless one leaves or doesn't participate they are in violation of the Brown Act. (yes).

Chair McKindley-Alvarez called for discussion on options.

Discussion:

Carolina Salazar from District IV said as rule of thumb County Council recommends that only members of the committee attend the committee meeting.

Commissioner Pasquini thought that the quorum issue might vary according to different County Counsel since the Commission had chosen standing committees in December in order to allow additional Commission members to attend the meeting. Dorothy Sansoe said she had given the Commission bad advice and they had been breaking the Brown Act in the past by not publically noticing committee meetings. There's been a number of conversations and more focus the last few months on this issue and the responses are remaining the same – Mary Anne Mason (County Counsel) is considered the county expert on the Brown Act.

Chair McKindley-Alvarez acknowledged that the Commission had gone through all the work of rearranging from workgroups to standing committees so that others could attend now to find they are back where they started. She asked for a motion on how to move forward.

Vice Chair Kennedy said the standing committees have to be noticed, so they are basically doing the same thing as work groups. Chair McKindley-Alvarez repeated Sansoe's explanation that it had been a mistake not to publically notice the meetings in the past.

Dorothy Sansoe said according to Mary Ann Mason 'if the Commission sanctions a group to meet then it needs to be officially, publically agendized.'

Commissioner Pasquini moved that they go by the recommendation of County Counsel, but that her preference was not to restrict non-committee members, but rather leave it to the Chair to make the call at a given committee meeting.

Dorothy Sansoe said there's nothing prohibiting the commission members to ask who is attending in advance so they could plan who needs or chooses to be there.

MOTION: last person to arrive to a meeting creating a quorum will be asked to leave.

- **Motion made to approve agreement that any Commissioner arriving a and creating quorum shall be asked to leave:** (M- Pasquini /S-Pereyra; Failed 5-1-1;Y-Kahler, Kennedy, McKindley-Alvarez, Pasquini, Pereyra, / N-Bagarozzo/ A-Overby

7. **MHSA UPDATE**

A. HEAR Housing update – Annis Pereyra

B. HEAR CPAW MHSA Update – Teresa Pasquini

Commissioner Pereyra referred everyone to page 88 in the packet for an update from IT from Steve Hahn-Smith: Hospital and Ambulatory Care have selected another vendor and are doing some backtracking to see if it can attach to the module at the hospital so that all consumer information can be entered into one system. MH Deputy Director said updates are changing regularly. There were demonstrations from Epic who reviewed their workload and acknowledged they weren't prepared to take it on - which would mean two different information systems, one for electronic records and one for claims. MHA has taken Epic off and

moved back to the original vendor with the understanding there would be inter-operability between the two systems.

Commissioner Pereyra moved on to housing data provided in the packet.

Two things of note: the first statistics that came out made the documentation look like a huge chunk of the Cal FHA housing MH Services Act had been expended. The clarification is 675 out of that and the rest came out of one time housing funds through CSS. Look on second page at number 9 it talks about Behavioral Health shared housing, which has \$3 ½ M allocated. It has not been extended. It is dedicated to Anka (*Anka Behavioral Health, Inc.*) to secure scattered site housing. She questioned whether the money indicated, \$1,750,000, would go to the actual housing itself and the other portion would go to maintenance. Her only outstanding question was, ‘Why the split per MHSA regulations?’

Sherry Bradley couldn’t explain why the 50/50 split was approved; she believed the loan application itself had been approved but the actual funding hadn’t taken place and her understanding was it’s a 65/35 split so will ask housing experts for clarification.

Commissioner Pasquini had no additional comments but urged Commissioners to review and prepare for the public hearing, and to ask questions in advance prior to the hearing.

Commissioner Pereyra expressed level of frustration that PEI and CSS went before CPAW but was ‘too small of a meeting to feel comfortable to drag out the rubber stamp.’

8. **MENTAL HEALTH DIRECTOR’S REPORT – Donna Wigand**

A. HEAR report on reorganization

B. HEAR report on local and state budget updates

Chair McKindley-Alvarez, and reps from the AOD and Homeless Services boards and Personnel met with four applicants. In terms of timeframe, Donna Wigand will be there full time until July to transition to the new Division Director and new MH Director.

The MH Director said local budget hearings start April 12th and they don’t close until May. Adoptions are on May 3rd. The Board is on spring break for two weeks in between. She encouraged everyone to attend the hearing on April 12th. The time the Health Department or Mental Health will be heard was yet unknown. She didn’t expect a big budget controversy.

They’ve had nine reductions in the last 10 years. It’s been rough but she felt there might be a reprieve this year.

The state budget is still a huge issue and won’t be resolved for some time. Still trying to drum up support for the constitutional special election. Plan b is terrible. They did get an email from County Counsel and the court reconsidered its prior ruling on 3632. ‘A tentative ruling has granted our meeting the 35 counties motion.’

(3632 is a state law that forced the counties to be the mental health provider to all children who are assessed through an individualized education plan to require MH services). In comparison, all other states have Education select the provider and pay for it.

California chose to force the County MH System to absorb all of the work and all of the un-reimbursable costs. So, 35 counties formed a joint complaint to be relieved of the mandate since the funding was let go last year. The first go round was basically that the county was relieved to pay for residential services only but the county still had to be the MH provider and had to pay. They asked for reconsideration and the judges are now recognizing and considering again. “We do not yet know if the CA school association will provide

argument.” She had the actual three page document which is difficult to read so she will provide the document to the EA if anyone requests a copy.

Dorothy Sansoe said the budget for the April 12th hearing, will be available on the website end of the day, March 31st

MH Deputy Director said regarding 3632 the first issue was whether the Governor had legal authority to eliminate the funding and the mandate, and the ruling was that he did have the authority. This is the second piece which clarifies since that happened, that MHA is not responsible for 10-11. Money from the MH Services Act has been moved so once that’s back in the budget it restores the mandate and then they still have to deal with those capped amounts for 11-12.

MH Director said the State Department of Mental Health is basically ceasing to exist as a separate state agency. There is talk about having 19 positions left, that would be assumed under the Department of Health Care Services. She expected that the Department of AOD could not continue to exist either.

There was some confusion about OAC positions and who they would report to versus DMH which Donna was reporting on.

Commissioner Pasquini said she would like to see discussion on an action plan around advocating the local process and possibly the state process and possibly fold that into the next item (*item 9 below*).

9. **DIRECTOR OF BEHAVIORAL HEALTH AND HOMELESS SERVICES
SELECTION PROCESS**

A. DISCUSS

B. ACTION: next steps

Chair McKindley-Alvarez explained when Dr. Walker spoke at the Commission they discussed having an open and inclusive process for the selection, and to be included in the dialog moving forward. What actually occurred is that she was invited with about fourteen days notice to participate with the interview process along with representatives from the AOD and Homeless Services advisory boards. She asked Dorothy to check with County Counsel to ensure it was something that didn’t need to be approved. She attended the first round of three candidates. Since one candidate could not make it, Commissioner Bagarozzo sat in on final panel with the last candidate since Commissioners Kennedy and Pasquini could not attend.

She explained there had been dialog about the process being exclusive. The item was on the agenda in order to discuss challenges, how to ensure the Commission has a voice in the direction in which Dr. Walker and his team moves in selecting and moving forward with the plan for the Director of Behavioral Health and Homeless Services.

Discussion:

Commissioner Overby said his impression is that the new director will come from in-house and asked whether that was a requirement. MH Director responded that the Candidate doesn’t have to come from in-house but Dr. Walker wanted to first look at promotional opportunities.

Commissioner Pasquini said she’d been vocal but without intent to offend anyone. She personally objected to the process based on the information shared in the Executive Committee meeting since the Division director could be the MH director.

She had specifically asked Dr. Walker if the Commission would be participating and sending the Chair without any direction is not what she considers to be participation. The Chair doesn't speak for the Commission. That's one of their mandated duties of the W&I code – we determine how we participate. She thinks it's important to have the mental health voice at the table. With forewarning they could at the least have developed a position/values statement.

Dorothy Sansoe said she had discussed this with Teresa, and talked to MH services personnel and provided them copies of Welfare & Institutions Code. Dr. Walker said he doesn't intend to make the division director, the mental health director and when it comes time for that election process Dr. Walker will follow the Welfare and Institutions Code and involve the MHC in the process.

Brenda Crawford was concerned that as yet there had been no bringing together of staff and various agencies for the separate divisions to start to alleviate the historical friction between divisions.

Chair McKindley-Alvarez called for action items such as drafting a statement on how as a commission to move forward.

Discussion included looking at qualities and expectations for the Director role and the timeline for submission since the final interview would be the following week on March 29.

Chair McKindley-Alvarez asked whether the Commission would like to submit something to Dr. Walker. There was discussion about a letter with a list of qualifications. It was agreed to create a special meeting connected to Executive Committee meeting for input to provide to Dr. Walker about how to move forward on the position.

The Board meeting will start at 9am or 1pm on the scheduled Executive Committee date so it was moved to the 5th and changed to 3:30 to 5. It would be an MHC Special meeting so everyone could attend.

Brenda Crawford was concerned with the time restrictions that not many consumers would be able to attend. Consumers want to know that they "won't be kicked to the curb with the realignment and that they have a seat at the table."

Commissioner Pereyra said she and Colette could come to MHCC to discuss with the consumers. There was discussion that there are different needs in different areas of the county. And that consumers at state level are wondering if they will still have policy making power etc. They don't want to start over because currently they've got health care, AOD and Homeless Services - how are they going to be involved in all of that?

Chair McKindley-Alvarez wanted to make the meeting open to those who work with Consumers, so they are available or can send public comment because their voices need to be heard.

(This motion was amended to include the Board.)

- **ACTION: Motion made to have a Special Meeting for consumers and families to discuss and make recommendations to the Board and to Dr. Walker.:** (M- Kennedy /S-Pereyra; Passed unanimously, 7-0-0)

10. **AB3632**
 - A. DISCUSS letter drafted by Evelyn Centeno
 - B. ACTION

Vice Chair Kennedy said previously there wasn't an action item attached to discussion, but there had been enough discussion that the group was not comfortable supporting the letter when the Board was not in favor. Commissioner Pasquini said she was not concerned about being in alignment with the Board since they are supposed to be separate but that (*as per the Executive Committee discussion of 3.5.11*) she felt part of the letter was factually incorrect and so could not approve it.

Vice Chair Kennedy said it was discussed in the Executive Committee that individuals could send the letter to legislators as an individual and that no action had been taken.

11. **CONTRA COSTA RE-ENTRY PLANNING INITIATIVE**
 - A. DISCUSS
 - B. ACTION: next steps

Dorothy Sansoe provided an update: The Board adopted a strategic plan at the Board meeting the day before. The Board had a long discussion which neither she nor Teresa could stay for so she could not speak to details. It was confirmed the initiative was adopted with MHSA language.

Commissioner Pasquini said there was an extensive report on Vic's Involvement on the reintegration and reentry process. She believed it needs clarity, and though accepted by the Board, the 'ban the box' language was removed. (meaning the box you check to identify yourself as a parolee or probationer to disclose when looking for housing or a job.)

She recommended inviting Supervisor Gioia to attend a meeting and provide direction on how the Commission could participate. She attended the Public Protection meeting and offered her assistance and will be approaching him personally.

Commissioner Pasquini made the motion as below:

Also, Criminal Justice could be a partner.

- **ACTION: Motion made for Chair to extend an invitation to Supv. Gioia to participate in an MHC meeting soon where he can discuss the re-entry planning initiative and explore options in the ways in which the MHC can participate, as well as making the Criminal Justice Standing Committee a resource.**
(M- Pasquini /S-Kennedy; Passed unanimously, 7-0-0)

12. **BONITA HOUSE KNIGHTSEN FACILITY**
 - A. DISCUSS
 - B. ACTION: Advocacy and Education for the Board of Supervisors

Commissioner Pereyra opened the discussion with a call to be proactive and inform supervisors of the Commission's comments before the Board's hearing on the project. Mary Piepho said it had gone to Conservation and Development and will come back with input when done with that part of the process. She wanted to request that the Chair contact the Conservation and Development partner, Catherine Kutsuris so they know the status. She invited Commission members to attend group meetings with the BOS at their respective offices in advance of the next hearing in order to provide a positive spin on what the farm project could provide for their community.

Dorothy Sansoe explained the status was the County Planning commission had heard the item and approved it. There was an appeal from a neighbor therefore it goes to the BOS to hear the appeal. She'd already made a call to Conservation Development staff who are working on the project and they will inform her when it's ready to go the Board. She will inform the Commission of that date.

They would like to gather concerns about the property especially in regard to the Contra Costa Times article in order to respond to the Board. Also proposed was that Mary Piepho host a meeting for key Knightsen neighbors and possibly Capital Facilities members and other stakeholders to educate and mediate the differences between the town and the MH community so there isn't an overreaction as had occurred with the Crestwood facility in Pleasant Hill. The Commission has to take a strong position to support the use permit to provide strong testimony to the Board of Supervisors.

Discussion:

The similarities and learnings from Crestwood were discussed including that in the end the American Disabilities Act prevailed; advocacy was what was missing in the Crestwood disaster. It took a long time before it was clear the community was in violation. Education would be needed for both the Board and the Knightsen community.

Commissioner Pasquini said 'three of us provided testimony which helped change their minds'. She supports Commissioner Pereyra's suggestions, knowing it's going to be a complicated endeavor.

Commissioner Pereyra read the following as a motion:

- **ACTION: Motion made to approve the following:**
 1. **Commission members attend meetings with the BOS**
 2. **Invite Supervisor to submit questions and concerns to MHC so they can provide feedback**
 3. **Propose Supervisor Piepho hold community meeting to educate the community and address their concerns.:** (M- Pereyra/S-Kennedy; Passed unanimously, 7-0-0)

Discussion:

Brenda Crawford questioned the effect of the same cast of character's per their body language at the last meeting which she thought was not positive, and that they need to be more strategic so folks are receptive.

Susan Medlin said information on stigma reduction points to promoting a connection between the people recovering from mental illness and the community, so opportunities to create dialog between the two would be very good.

When asked about the timing Commissioner Pereyra said April or May; within the next two weeks, as soon as they get through working with Rick Crispino on talking points, they will start setting up meetings but will need time to educate.

There was discussion about how to best move forward: Enlisting champions, for instance Mary McGovern House is in that neighborhood with no apparent problems. Inviting community organizations and faith based organizations could help. They need to get talking points out quickly.

Mental Health Director said part of the issue is structural, MHA was the instigators and implementers of Crestwood. This case is different since it's a private entity with private money, and it was her understanding they were not necessarily working with Medi-Cal and Medi-Care and uninsured. It's a valuable MH facility, but she questioned that MHA would be placing and paying for folks as they do for Crestwood?

Commissioner Pereyra suggested that MHA might choose to contract with that facility to provide placement, and the cost per client to be at that location will be dependent on what the county chooses to do in terms of placement and what programming they will require.

In a change of subject, Chair McKindley-Alvarez informed the Commission she will not be in attendance at next meeting since she'll be attending the California Association of Local Mental Health Boards and Commissions meeting at the end of April.

It was explained the next meeting would be an hour only with the public hearing following.

13. **ADJOURN MEETING**
 Meeting adjourned at 6:45 pm

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by the staff to a majority of the members of the Mental Health Commission less than 96 hours prior to that meeting are available for public inspection at 1340 Arnold Drive, Ste. 200, Martinez during normal business hours.

Respectfully submitted,
Linda Cipolla
Executive Assistant