

**MENTAL HEALTH COMMISSION
MONTHLY MEETING MINUTES
March 1, 2017 – FINAL
At: San Pablo Community Center
WEST COUNTY**

Agenda Item / Discussion	Action / Follow-Up
<p>I. Call to Order / Introductions Commission Chair Duane Chapman called the meeting to order at 4:35pm.</p> <p><u>Members Present:</u> Chair- Duane Chapman, District I Vice Chair- Barbara Serwin, District II Supv. Candace Andersen, District II Sam Yoshioka, District IV Diana MaKieve, District II Gina Swirsding, District I Douglas Dunn, District III Michael Ward, District V Connie Steers, District III (arrived @4:41pm) Lauren Rettagliata, District II (arrived @4:45pm)</p> <p><u>Commissioners Absent:</u> Jason Tanseco, District IV Meghan Cullen, District V Mike Ward, District III</p> <p><u>Other Attendees:</u> Cynthia Belon, Director of Behavioral Health Vern Wallace, Program Chief for the Children and Adolescent programs Jill Ray, Field Rep Supv. Andersen’s office, District II Gloria Menjivar, West County Family Partner Vic Montoya, Program Chief for Psych serves at CCRMC and for the Wellness Center Will Taylor, NAMI rep</p> <p>Adam Down, Behavioral Health Admin Liza A. Molina-Huntley, Executive Assistant for MHC</p>	<p>EA-Transfer recording to computer</p>
<p>II. Chair Report, Announcements, and Comments:</p> <p>a. The role of the Mental Health Commission- Duane- Asked each Commissioner to state why they choose to volunteer to be on the Commission of Mental Health.</p> <ul style="list-style-type: none"> • Duane- volunteers because he is concerned about those, with mental illnesses, throughout the community • Supervisor Andersen- volunteers on the Commission because she wants to be the representative for the Board of Supervisors, 	

there is a lot that is being worked on, in mental health issues in Contra Costa County and we are doing some great innovative things. Addressing adult, homeless and children's mental health issues and so many more things that we need to do in our community and I feel that it is very important that a Supervisor regularly participates in the Commission meetings. I have committed to participating and being a member.

- **Gina-** I represent the West County district, I live here. I joined the Commission because in 2006 I had a traumatic life changing experience and it took three years to get help. I want to help others to get the help they need, quickly. I really want to help our transitional age youth too.
- **Sam-** I represent district IV and I have been a part of the Commission for some time. I worked at FULTON State hospital. When I came to Contra Costa County, an opportunity opened for me to work at the West County Mental Health Center in Richmond. Since then I have volunteered on the Mental Health Commission and the advisory boards and I enjoy it. I serve as a "Family Member," on the Commission.
- **Doug-** I serve as a Commissioner, "Member at Large," for district III out in East County, from Pittsburg. I volunteered to help get Laura's Law, implemented in the county and because of my finance background; I want to make sure the monies are used to best serve all that need mental health services in the community.
- **Connie-** I serve as a "Member at Large" and represent district IV. I am a retired "Nurses Rights" advocate and I volunteer because I always want to make sure of the due process for everybody in the county. I am interested in family support for those who have loved ones with mental illnesses.
- **Diana-** I represent district II, as a "Member-at-Large," and I got involved in mental illness about ten years ago by starting an occupational and support process in my temple. I started it to help people and families that suffer with mental illness. It has become my late life work. I have written information nationally and done some educational programs to teach how to engage and reach out to people with mental illness and provide support. We run monthly support groups for family members and for individuals and mindfulness classes. A couple of years ago I was made aware of the Mental Health Commission and seemed like the right step for me to take my passion and help others, so I volunteered to join.
- **Barbara-** I volunteer as a "Consumer member" for district II and I serve as the Vice Chair for the Commission. The reason why I volunteer is from a more personal stand point. That is why I have a lot of empathy for people and for their experiences. I wanted to give back and help people with their needs.

- **Director-** Cynthia Belon, I am the Behavioral Health Director. It is nice to see everyone here this evening.
- **Jill-** I am with Supervisor Andersen's office
- **Executive Assistant-** Liza, if anyone has any comment cards please hand them to me so I may forward them to the Chair.
- **Victor Montoya-** I am the Program Chief, and I oversee the Psychiatric serves at Contra Costa County Hospital and at the Miller Wellness Center.
- **Adam-** I work with the Behavioral Health Administration
- **Vern-** I am the Program Chief for Child and Family Systems of Care
- **Lauren-** I volunteer as a "Family Member," representing district II and I have had some experiences with psyche emergency, in patient 4C and with incarceration. I am very interested in making sure we treat the community, which suffers with mental illness, the best we can in our county.
- **Antwon-** I work with AOD, from district I, and I am concerned with things that go on in West County. I want to make sure the monies go to support our county.
- **Marilyn-** I am with the Richmond Progressive Alliance, which is part of Contra Costa County Coalition.
- **Gloria Johnson-** I live here in Richmond and I am looking for services for mental health patients, for a family member and for my whole neighborhood to find out what is going on and see how we help our community, help each other, help Richmond.
- **Eddy Morrison-** I am the Mental Health Director for the "Men and Women of Purpose Center" and part of the "Rich Minds Network." My main focus is to try to get as much support and help, especially for dual diagnosis. I would like to know what happened to the funding for mental health services in West County.
- **Will ?-** I am part of a safety project, help people coming out of prison and a lot people are coming out of prison with mental health issues that need to be addressed and I want to know what is going on, why?
- **Will Taylor-** I am with the "National Alliance on Mental Illness, (NAMI)," for Contra Costa County. We provide support and advocacy outreach and education for families with mental health illness that have concerns. We are here to help and expand our services to East and West Counties. I have met with Duane to talk about expansion to West County.
- **Maria Rivera-** I am an immigration attorney and resident of San Pablo and I am here to point out that mental health dollars should not go to our jails. We have many needs in our community and funds should not go to a jail expansion.
- **Gloria Menjivar-** I am a Family Support Worker for West County, for Adult mental health for Contra Costa County

- **Stephanie Regular-** I am an attorney for the Public Defender’s Office and part of the Mental Health League. The issues, of this meeting are important to me because many of my clients that are in jail obviously reenter the community and reenter without services, most of the time. I am concerned about what is happening in our county regarding reentry services and support.
- **Duane-** **The role of the Mental Health Commission is on the table, with the meeting materials, we have all the information and I hope that everybody gets a copy. Our role is, as volunteers, to advocate to the Board of Supervisors, for people who are unable to advocate for themselves. This is a volunteer position. None of us get paid. We’re supposed to volunteer ten hours a month. I will tell you that if we only volunteered ten hours, we would never get anything done. I put my whole heart and soul into this, to help others. We are a legislative advisory body and we have mandated responsibilities to follow. The Mandated Responsibilities of the Mental Health Commission is included in your packets, please read it. We are not here for joy, for fun, we are here because each of us have a reason to be here, as you all heard. We have people in our families, people that we know, or have worked with people with mental health issues and we want things to get better for them.**
- **Gina-** I am very concerned about our public view regarding people with mental illness, especially concerned about our public leaders and media regarding labeling people who have mental illness. I went to a City Council meeting, to speak on the behalf of the “patients” that are in the Martinez jail. It seemed like my constituents, of the city where I live in Richmond, really don’t understand what is going on. Some laughed and joked about mental illness. Mental illness is not a funny matter. It is hard for people with mental illness to get up out of bed, to take a shower, to go anywhere, to do anything, yet alone try to help. I don’t think it’s funny to label people and I have heard doctors say that everybody has mental illness; it depends upon the degree of mental illness. People need to realize what mental illness is and who we are representing. Mental illness is a biological illness, not just something that someone has done wrong, it’s an illness. I want to help everybody, the homeless, the people in our jails; our youth, everybody and I really do care. I care about the families with loved ones with mental illness; the whole community suffers with each person who has mental illness.

- b. **Overview of Contra Costa County Mental Health Services-Director**
- c. **West County mental health resources explained-Director**
- d. **What you need to know about County Mental Health Services-Director**
 - **Duane-** Our County has a responsibility for overall public health.

Mental health, as well as other diseases, is part of the Health Services Department. The role that we are focusing on today is the mental health aspect. The Director of Behavioral Health will explain what the department has to offer as far as mental health services in West County and throughout the County.

- **Director-** Mental health and alcohol and drugs are systems of care that are part of the Behavioral Health Division. This division was formed approximately five and half years ago, with the implementation of the “Affordable Care Act” as well as changes that were taking place at the State level regarding funding. There was really an acknowledgment and agreement to take a look at how we can provide integrated services so that patients could experience improved care. Initially Behavioral Health included the “Homeless System of Care,” but they are now a separate division, with the acknowledgment that housing is clearly related to a person’s health status and needs to work with all of the other divisions within the Health Services Department. Moving on integration of mental health and alcohol and other drugs over the last six years, we also have worked very diligently on integrating our services with our CCRMC (County hospital) and our health centers and with public health and with our Contra Costa Health Plan. We focus on integrating Behavioral Health Services into primary care, so people that do have mental illness, or an alcohol or a drug issue - we can assess what their needs are and connect people to resources throughout the county. I’m happy to announce that Behavioral Health has just finished their five year strategic plan, that we are in the process of rolling out and the focus will be on the integration of services. This includes the implementation of an electronic health record, so patients will experience improved health care, as they see their primary care physician and their behavioral health practitioners, we will be able to have a chart that holds everyone’s information that follows them wherever they obtain services in our system. Please get our “**Behavioral Health Resource Guide**,” they are available at the table, up front with the meeting materials. It will give you the information regarding the services available in West County and throughout Contra Costa County. Please pick up a copy; it will help give you information on what services are available. Vern is here to talk about children’s services. We have a mental health clinic for adults, on El Portal, in West County. If you look at the diagrams that are available in the back, for viewing, we will be building a new clinic. It will move to a location adjacent to where the West County Health Center currently is and we will be co-locating with additional primary care services. The goal is to really create greater accessibility and integration of services. The mental health evaluation teams are working in collaboration with the Richmond’s Police Department and what it does is it sends teams out to people’s

<p>houses, particularly after the person has been to PES and have been released, as a way of getting people psychiatric services and connect with resources and hopefully helps people not go to psyche emergency services as their first place for care. The goal is for people to get ongoing care. We are also working with other police departments in Central and East Counties. We also have a transition team that is a multiple disciplinary team for individuals that are released from the hospital, they can have follow up services and connect them to resources that they need and provide medication support. Our clinic provides psychiatric medication support, case management, transportation, connecting people to resources to meet their needs; we are expanding group care for individuals that do not need intensive care and formulating step-down services in our mental health clinics. We are constantly attempting to meet the needs of the community and identify resources and continue to help them whether it's recovery or ongoing care. "The Brookside Homeless Shelter," has added mental health services and we have "Cali House," which is a homeless shelter for transition age youth that also provides mental health services and alcohol and drug recovery services and assess on-site as well.</p>	
<p>III. Commissioner's comments-</p>	
<p>IV. PUBLIC COMMENTS: (3 minutes per speaker)</p> <ul style="list-style-type: none"> • (see below) 	
<p>V. APPROVE minutes from February 1, 2017 meeting Motion to approve the minutes was made by Diana, Gina seconded the motion</p> <ul style="list-style-type: none"> • No corrections were needed • VOTE: 8-0-0 • YAYS: Supervisor Andersen, Duane, Lauren, Gina, Diana, Barbara, Doug, and Connie • NAYS: none ABSTAIN: none • ABSENT: Meghan, Jason, Mike; Sam left early, at 5:59pm. 	
<p>VI. DISCUSS and APPROVE to develop a letter for support to the Contra Costa County Sheriff's department's application for (SB844), for the \$70 million grant for which they will submit to the Board and State of Community Corrections Board, for the creation of a mental health treatment facility to provide mental health services at the West County Detention Facility in Richmond, California- COMMISSIONER COMMENTS:</p> <ul style="list-style-type: none"> • Lauren- I have visited the facility and the area known as the "M" module, in the Martinez jail. I hope everyone has an opportunity to visit the current site, and other modules at the Martinez jail, where those who are incarcerated and have severe mental illness are placed. Because of the structure of the jail and for safety reasons, these people are not let out of the small facilities for long periods of time, sometimes 48-72 hours, for their safety, as well as for the safety of others. There is not a treatment facility at the jail and there needs to be a facility to help and 	

treat the mentally ill that are incarcerated. Without treatment, they will continue to come back to the jail and not be able to get better and stay out of jail. The grant is about correcting the bad situation that exists. When the facility was built, no one ever thought that so many mentally ill would be incarcerated. The old jail was not built to serve the mentally ill. More of our mentally ill are housed in the jails than in our hospitals or at any of our treatment centers. Being in jail, without treatment, does not help these people get better. I have visited the West County detention center and I have seen the land; there is room for a treatment center. The \$70 million dollars is coming from money that tax payers have paid and we are applying to get this money back. I don't want the money to go to another county, I don't want the money to go to Santa Clara County or San Francisco County for those counties to build a treatment center for their mentally ill that are incarcerated, I want the money to come to us, to Contra Costa County, to help our people that are incarcerated get better so hopefully they don't come back to jail. It is a well thought out plan and it's meant to help people get better. If we don't, another county will. We cannot use this grant money for anything other than what it's for. Better we spend this money now, before there is a lawsuit for not treating the mentally ill that are now incarcerated.

- **Doug-** There is a huge problem with our severely mental ill in our jails that in the system of the United States has been going on for over 50 years. Right now there are 10 times more severely mentally ill in jails, over 356,000 in prisons and jails, compared to 35,000 in treatment facilities in the United States. Contra Costa County is no exception. At any given day, from 240 to 270 severely mentally ill are in the Martinez detention facility which is not designed to house the mentally ill. The 4C unit has 23 beds and a good 11 to 1 ratio. Senator Darrell Steinberg recognizes the situation and is an advocate for the mentally ill; he stated: *"since when did jails become the defacto asylums for the mentally ill of this county?"* and this proposal is similar to the Senator's proposal and it is well thought out and I have no doubt that beds will be reduced at the Martinez facility and if approved, the capacity of Martinez will get back to where it should be at a population of 319. Contra Costa County will have a new mental health treatment center to help those currently in jail and incoming, which is badly needed. It's very unfortunate but that's the reality of the situation, we are not going to stop mentally ill from being incarcerated, they need treatment and help; it will get worse before it gets better.
- **Gina-** What changed my view about the jail was the people that gave us a presentation were not correctional officers; there are people that specialize in psyche care. The people that are in jail, that suffer with mental illness, are not let out to see day light, it's not right and it doesn't help them, it makes them worse. The situation is very serious, the building is old and there is no room at the jail to build a mental health treatment center. I have been to both facilities and it is not a happy place to be placing anyone with mental illness. In jail the conditions are a result of our society. And some, with mental illness that are homeless,

jail is a place for them to get a bed, a meal and a little bit of structure that they need in their lives. They need care; they need more to get better. That is why I am for this grant.

- **DUANE-** We will now open the forum to a public hearing and I want to make it very clear, we are the Mental Health Commission, we advocate for the mentally ill in our community. Not for people that get arrested or ICE, only for mental health. I was here when the jail was built, working at the county hospital, it was not designed to serve people with mental illness, only those with medical conditions. To stop people from going back and forth to the emergency room. Things happen! When you go to the jail and see you people standing behind a window, with mental health issues, crying and sad, instead of getting treatment that they deserve. This is why I support it! I know I made the right choice for those with mental health issues. Do we have a timer? Each person has 3 minutes to speak. I ask that you please be considerate of others.

PUBLIC COMMENTS: (3 minutes allotted per speaker)

- **Marilyn-** I am with the Richmond Progressive Alliance, which is part of the Contra Costa Racial Justice Coalition and it saddens me to see how the Sheriff is trying to drive a wedge between mental health advocates and advocates for reducing the jail population; we are all looking to improve the overall health of our community. If Martinez is in such bad shape, why are we using it at all? Why can't the funds be used to simply rebuild or renovate the Martinez facility without adding any new jail bed capacity? Or demolish the Martinez facility and sell the land and build a new facility out in West County? With this expansion, we'll eventually have more people coming. The grant provides no money to hire mental health staff and to deliver more services and requires a 10% match from the County fund, which will cause a reduction in other county services that we need. Only 2% of the grant fund will be used to improve the mental health facilities, the vast majority is for increasing jail bed capacity. Are you willing to pay the price of this relatively small benefit and I encourage you all to talk to the Racial Justice Coalition. There has to be a better way to address the needs of the mentally ill....
- **Maria –** The Sheriff's proposal is inadequate to deal with mental illness issues of this county, as has been discussed... This is his third time around and I have been at every step opposing it, for the same reasons. I want to protect the mentally ill, the way it's handled, at the point of contact is what makes the difference, who are not in a position of being guilty of criminal behavior.... After my personal experiences, I am more committed to have the services for the mentally ill deserving of what they deserve, not incarceration....please do not support this proposal... The Racial Justice Coalition has done a study, it's a wonderful analysis. I can provide a copy to the Commission. I am in opposition to this project, I hope that you reconsider.
- **DUANE- Please provide a report to our Executive Assistant**
- **(woman, name unknown) -** I am here representing CISCO and I am in opposition to the expansion of the jail. I too think that it is not an

effective way to handle the mentally ill in our county....the \$70 million dollars that the Sheriff is asking for is ridiculous and \$2 + million dollars is for new deputy Sheriffs, that is almost half of the annual budget that the citizens of Contra Costa County will have to pay for. Over \$1 million is to give added support to already existing groups... only \$700,000 is going to mental health providers. That is every year. Why can we not provide beds for ICE and use the beds in West County detention for a better place for our mentally ill? If the Sheriff can take the beds out, he can put them back... The money he gets from ICE does not equal the amount per bed for incarcerated persons. The County pays \$11.00 per bed, per night. ICE pays \$8 per bed, per night.

- **Pastor Joel Jones-** We have wasted a whole bunch of time on this jail thing and you can spare a couple of extra minutes for me since I spent a whole day at the Board of Supervisor's meeting and put my public comment card in and ten people went before me. These people that are more concerned about people who are locked up with mental health issues, what about the children that are free, that are running around in our schools that do not have services. People in our community that are self-medicating because of the crime and trauma in our communities and you talk about our money that we paid? I think that \$8 is too cheap! I hear it's more like \$84 a day for ICE holds. I heard \$84 per day times 233 new beds = would be something like \$18,000 per day, something more like \$500,000 per month.... That is some good money for the Sheriff to make! Why we would have to go to prison to get mental health? So you mean they're going to invest all of this money that we paid in taxes and loved ones can't go to West County to get mental health services, unless they are incarcerated? That's crazy! How are all you professional people around here thinking this way about people who are incarcerated and our communities' are dying because... You're smiling but you've never seen a child hungry and then he goes to school and cusses his teacher out and beats up the teacher and then he's labeled mentally ill? Please, the way it's handled at the point of contact, with Mobile Services we have been crying out for that and got a late response from you and were promised at the last meeting the West Contra Costa County would be considered in the three year plan and we are nowhere there! West Contra County hasn't had services for a while! We want services for our community! I am not going to jail but I might go crazy dealing with all of these professional people who want to invest in prisons and not in people. Our community is dying from the lack of investment in its people.
- **Antwon-** Long time Richmond resident and also a member of the AOD board for district I. When I was young, my mama fought to get me services in West County and couldn't get me any. She fought to get me into the diagnostic center, which is where the rich folk go, I was the only person from Richmond getting services. Now we have no treatment program, no detox center, but we're gonna spend all this money and the people in jail get mental health issues from being inside the walls of the jail. Jail does something to a person and changes them. It sucks the life

out the people. A lot of issues are not being addressed, our kids are undiagnosed, they come out of the womb dysfunctional because of the drug addiction in our community and folks don't care about the people in our community. That is why we are seeing the level of violence that we do. People gotta get off dope and get on hope! There is a stigma with mental health and it's not conducive to our society. We have unlearned behavior and it's a problem.

- **Stephanie-** I am an attorney for the Public Defender's Office and all of the clients on my case load are mentally ill. I have had clients that don't want to be released because they have no place to go. I am concerned that the money from this proposal is being used as a band aid for the lack of services for the community. I was in court today with a client that no longer has a criminal case but is being maintained in the jail because there are no placements for him. The jail is being used as a mental health facility because there is no place else for the conservator to send him. I am speaking today and I do not expect to change your minds because you have been pondering this for a long time. For anyone who is on the fence, I just hope that you consider - is this the best use for our money? I am also a resident and it's extremely concerning to me, for my clients to get out and return to nothing... I cannot say that the system is completely failing. I believe that the mental health workers in our county are exceptional people and that everybody has the best interests of my clients at heart, but there is a lack of funding. If this was free money to fix our jails I would be the first one in line to say yes, let's take it. But this is not about free money, coming from the state; this is also putting up county money. I agree, the conditions are deplorable, I have never been inside "M" or "D", so if you can help me get a tour, I would love that. I would like to see how my clients are living and see it first hand. I don't see this money is going to change the people who are on "D" and "Q". My clients that are there is not because there is a lack of space on "M" it's because they are considered dangerous and a safety risk and I don't expect that they will be moved to a placement like West County, if they're considered a safety risk... Why aren't we using money in support of mental health facilities, as opposed to the jail?
- **Lauren:** Actually, part of the new facility will be built specifically for that.
- **Gloria-** I have heard you say there's resources for people with mental health but time and time I have spoken with court appointed workers, social workers, drug and rehab workers and lawyers and I have a question- if this is part of their job description to deal with mental health persons, how is it that they keep saying that they don't have any resources, no referrals, in order to get people into programs. Doctors and social workers tell me: "I'll look into, or I'll get back to you" and then when you get back to them they say they are still trying to find out. So you have resources, supposedly, in and out of jails, hospitals, on a 5150 and then some but who is actually monitoring. No one! Who is responsible? I don't know, so if you don't know, where do you go? Who does know? Where do you go to get the information?
- **Tracy-** I am a mental health worker and have been for many years, in this

county and currently in San Francisco's department for public health. I think the language is a big problem, when we talk about a jail expansion. Even if they build something and it was designated for mental health, maybe it didn't have to be a jail expansion? Maybe it can just be a facility that was being built for those who have mental wellness issues, acute or not acute. That would be great! Because they do need something. Mental health has a different look, sometimes you don't see it. How will the population be admitted into the facility? I want to call it a mental health facility, not a jail, something lovely that has a wellness component opportunity that is attached. How is the population to be streamlined? Is there an "aftercare" component? If they have a sentence, they have an end date, what is the next solution? Are they going back into the vicious cycle or are they going into an aftercare component? They need mentorship, services...

- **Charlene**- I want to let everybody know that my mental stress level is real high knowing that you guys are gonna do this, expand this jail with all these millions of dollars and we have no services in West County. Why is that? Why do you want to continue to oppress the West County people? It's unfair! Why do you want to do that to us? Something is wrong! You guys are causing a lot of undue stress on people like me and I really don't stress out that much but when I hear different things that you have money for everything. You guys need to change the system! Is anybody here from the Board of Supervisors? Are you for the jail expansion? Well you should change your mind! You're oppressing the people!
- **Elizabeth Carmedy** – I am the Director of Community Engagement for West Contra Costa County Unified School District. Our team actually oversees all the mental health services in our schools and our collaborative partnerships that serve and support our young people and our families. Our team also supports family engagement, our full community school workers, our school based health centers, and our foster and homeless youth.
- **Duane**- I am now closing the public hearing and opening it up to our commissioners.
- **Supervisor Andersen**- The application for this grant went in last Friday and has been submitted. We did have two other counties that are also applying for this grant - that is San Francisco and San Joaquin. San Joaquin is applying for a smaller amount, San Francisco was awarded the grant last time around but their Board of Supervisors declined it. I am glad we can have this meeting here, in West County, because I think it's really important that we have this dialogue. I appreciate our Chair bringing in Behavioral Health with our county health care system to really just sort of lay out all of the programs that we're doing, currently, in the community and in the future to address mental health. Everyone on the Board of Supervisors agrees that you don't want jail to be the first time you treat mental health. We want to treat it from the moment a person is pregnant, to ensure that her child is healthy, we want to make sure that we can get all children into a good preschool program that we

can help their parents, that when we see the first signs of instability or mental health issues that we address them at a very young age. We are partnering with the school districts, in every part of the county. We have laid out for the community today a lot of different programs that we are taking on. We don't ever want someone ending up in jail just because they're mentally ill. There are sometimes though when a crime is committed that is so serious that for the protection of the community someone is going to end up in jail. Unfortunately, whatever mental illness they had early on was not treated, not addressed, but that is just the reality of where we are today. We are dealing with the facts that we have today. We are working really hard in Contra Costa County to intercept mentally ill people before they get into the justice system. We heard a little about the MET teams and mental health evaluations that are out there. Every Deputy Sheriff is now going through training of how to interact with a mentally ill person when they are called. We want everyone to have the same training so when they encounter someone who is autistic or has a mental illness, they do not end up having a horrible encounter that can end up in a violent situation. We are working on that. In January I spent two days in Sacramento, with our Public Defender, a member of the Sheriff's department, the District Attorney and mental health professional David Seidner to talk about what are the best practices in the state of California, across the country, to intercept people before they end up in jail. We came back with some great ideas and we're very hopeful to be implementing "Stepping Up" in Contra Costa County. We will be doing a whole workshop for the Board of Supervisors and as I look at best practices, LA County is way ahead of what they're doing, Santa Clara is as well. What your doing is while someone is incarcerated you start the provision of mental health services and you have that warm hand off when someone leaves jail. LA County has an amazing model that have people that are there to help people get their housing, supportive services, but you want to intercept before they end up in jail and that's the whole point! There is a lot of misinformation surrounding the Sheriff's proposal and this is just something I want to just correct. The Martinez jail, there has been a significant study of the jail site and looking at it on an interim basis, creating some mental health beds because even if we get the grant it would be several years before it would be built and we have to address things immediately. It's a very old construction, it doesn't lend itself to some very basic things and we had a meeting here at the Mental Health Commission on why Martinez would not work to convert it over for mental health beds. Most importantly you would not have the ability to provide the same level of programs. Converting ICE beds, we heard at our Mental Health Commission, into mental health beds isn't a reality. West County detention facility is a very minimum medium level security facility. Prisoners have keys to their cells. In essence, if you have someone who is seriously mentally ill, often times they may become a victim of other prisoners or endanger other prisoners. They have to be in a secured facility. If we move forward with this proposal we will have

that secured facility where they can receive treatment and be safe. It will also free up beds so we can treat women that have mental health issues. Something that we are not doing as good a job as we would like to. We emphasize, there's no new bed capacity. The Board of Supervisors was very clear with the Sheriff; we don't want a bait and switch! If you say we are going to end up with a net loss of beds, we don't want down the road, we need to double up and put the beds back that we took out. If we receive the grant, we want very clear guidelines that that does not happen, without a full public hearing and discussion, before that will ever happen again. Another issue is to make sure that we have different components to how we address mental health in this community. This is one very small segment on how we can address mental illness. Wouldn't it be wonderful if we were able to build this mental health facility in the jail and found ten years down the road, because of everything else we're doing, the treatment people are receiving while incarcerated that we don't have any more people cycling through the jail. But the reality is that right now we do and we need to address it! That is why the Mental Health Commission unanimously last time said- this is one aspect we can control, we as mental health Commissioners can weigh in. Yes, we need to do all these other things, we want to continue to support all the programs and add new programs in the future, but this is just part of how we help the mentally ill that we need to continue moving forward.

- **Duane-** We need to remember something. We, the community, elect the Sheriff. If he doesn't keep his word, we can remove him. Don't forget that. We voted him in and we can vote him out! I have been in this community since 1974. I have been to every budget hearing that the county had. We have never had this many people come to a budget hearing from the community to ask for services. They come to things like this and the whole picture was not explained and I don't know who to blame for that. I hear what you're saying, but do you hear what we got? I had to really think about this. Preventive services are needed in there. I've seen the same people go in and the same people go out and back in again. This Commission is mandated to do something, by law, that we are responsible to advocate to our Board, the issues with mental health. I have no shame in doing it. I want to say that our Commission is devoted to our community of those with mental health issues. We're not getting paid for this. You as community members, when you know something is coming up about mental health issues you need to get to your Supervisor's office and come to the Commission because if we don't approve the mental health budget, hell will break loose. Sometimes we don't agree with them. It's a new day, wherever you go you see people with mental health issues. As long as I have breath in my body, I will advocate for those who can't advocate for themselves.
- **Lauren-** I truly wish that we were getting the funding for education, our children, or housing, how I wish. I advocate for it all and we need you all there advocating for it too.
- **Duane- Do I get a motion? The reason this is happening is because the City of Richmond is sending a letter to oppose the County's application.**

<p>I wanted to show the community that the Mental Health Commission is supporting this. Thank you all for coming. If you need to leave, you may, or you're welcome to stay. Please take a look at the drawings of the new mental health clinic that is coming to West County.</p> <ul style="list-style-type: none"> • Lauren moves to motion to approve to draft a letter of support to the State of community corrections to support the application, for SB844, from Contra Costa County. Gina seconded the motion. <p>VOTE: Supv. Andersen, Duane, Connie, Lauren, Doug, Diana, Barbara, Gina YAYS: 8 NAYS: 0 ABSTAIN: 0 ABSENT: SAM, MIKE, JASON, MEGHAN</p>	
<p>VII. CONSIDER acceptance of the compromise framework for future meetings of the Assisted Outpatient Treatment Workgroup Plan- Barbara- At Duane's and my regular monthly meeting with the Behavioral Health Director, we talked about the combined solution and this draft is with what we came up with. It gives the guidelines for the meetings, agendas, and other items as set forth in the draft attached. We are pleased with how we worked as partners to develop this plan. Gina- I am against this and I am hesitant in voting. Supervisor Andersen- I want to congratulate you in developing this, it reflects the needs of this Commission and how willing you are to work with the staff that is involved. The Commission should have regular updates and be informed on how the program is going, without trying to run the program. Good job in drafting this.</p> <ul style="list-style-type: none"> • Supervisor, Candace Andersen, moves to motion to accept the AOT Workgroup Plan, seconded by Duane. • VOTE: 7-1-0 • YAYS: 7, (Duane, Barbara, Connie, Diana, Supv. Andersen, Doug, Lauren) • NAYS: 1 (Gina), ABSTAIN: 0 • Absent: Sam, Mike, Jason, Meghan 	
<p>VIII. RECEIVE and DISCUSS the update regarding Children's Mental Health Services by Vern Wallace, Program Chief-</p> <ul style="list-style-type: none"> • Vern: I would like to start with what services are available in West County. We do have a full service clinic that has about 800 kids open, on 41st and McDonald; it is the WEST COUNTY CHILDREN'S CLINIC. We have a number of contract providers in the community and we are on school sites, 42 of the district schools, and we are collaborating with the district offices and contractors to add additional services to a number of schools. This is to address the whole school culture piece of managing behavior in schools. We are developing a dual diagnosis adolescent program at the West County Children's clinic; it will be funded by the innovations grant from the Mental Health Services Act. We have experienced significant growth over the past three years, yet we have seen the EPSDT (Early Periodic Streaming Diagnosis and Treatment = a form of Medi-Cal) go up about 15 to 17%. Some of it is because of the Affordable Care Act, 	

due to being able to access services, but a great deal of it is attributed to several State Mandates that have begun recently. First was Katy A, Increased Mental Health Services to Foster Care children, that has now transitioned to the Continuum of Care Reform, which opens the Katy A services. There are three services associated with Katy A: one was intensive care coordination, second was in home behavioral services, and third was treatment Foster Care. Those three services have now been added to the EPSDT mix. We are moving forward with our partners, in probation and social services, to develop the Continuum of Care Reform to address the change in Foster Care regulation, reducing the stay in residential care and returning kids as quickly to the community as possible for a "home," like setting to help kids. This is a move to get kids out of institutional care. The counties were mandated to provide the new services, through Katy A, to the general mental health population under EPSDT. In 1996, California was mandated to implement EPSDT services for mental health and that is what we have been doing since. We are trying to gear up to meet the demand. We have looked at increasing EPSDT expenditures around several core areas: 1) CCR= the Continuum of Care Reform and bringing people on to manage, it puts mental health in a role of managing Foster Care homes, for the very first time and now we have to certify, the mental health component, all our families agencies and the short term residential programs. The second area is to continue our evidence based practices. For the last six to seven years, the Children's Program, has been working to bring practices into the service delivery that are evidence based and have been cited at the Federal government level as a programming that has been approved by the Federal government. The first one that we brought to the county was called "Wrap-Around" services in the mid 90's and since then we have brought on a number of additional services. This year we are adding an "Eating Disorders," programming for a family based treatment. We found that we inherited the "Healthy Families," we realized that there was a great need for a program to address eating disorders, we did not have the infrastructure in place for the program and we are currently working to get staff trained and we will be partnering with the Ambulatory Care clinics, with a medically driven type of program. Another area that we are focusing on is to add to our Mobile Response team availability. To be readily available in each region of the county. It has been under funded for years. We want it to be appropriately available for enough hours and throughout the county, to meet the community needs. The Mobile Response Team will be available 16 to 18 hours per day, in all areas, before the end of this year. Seneca runs the service, for Children's Mental Health and there will also be a Mobile Response Team, available for adults too. They are currently linked to Psychiatric Emergency Services, through the liaison we have at PES. Our referrals have gone from three to four, per month, to last month it was over 100 kids being referred into the Children's Mental Health program. Although we have had a lot of kids showing up in Psychiatric Emergency Services, the actual hospitalization of children has gone down a bit. The Emergency Foster

Care staff is the first contact for kids coming into Social Services System with mental health issues, if they haven't been seen by a clinic prior, they first do an assessment and they are the care taker for that youngster's mental health needs, until they child is sent to a regional clinic for follow up services. We are looking forward to a treatment center to provide necessary mental health services, residential and activities including "life training" and "workability training," which are very important and targeted for the 18 to 24 years old age range. The funding for children has grown in the past twelve years, since I've been the Program Chief, a lot of it has been government mandated. I will take credit for the excellent programing that has been credited by the youngsters and their families. We try to address all the issues and develop plans for improvement and I am happy to be steering it in that direction. Any questions?

- **Gina-** Regarding the MRT=Mobile Response Team, what happens in a lot of areas of the county, when there is a shooting in an area, after that has occurred, it is important to take care of the needs of the community. There are delays and there are conflicts and PTSD =Post-Traumatic Stress Disorders. Many of the youth, in our area, have witnessed violent crimes that have traumatized them. Some of the kids that I work with, even 4th of July can be stressful for these kids because they're in fear, because of the things that they have witnessed. So, the MRT unit is available from 8am to 12am? A lot of shootings happen after those hours and that is when we need the services. Where can kids go to get services, immediately, before their suffering or illness, becomes more complex and worsens. I am concerned for our youth, and ideally it would be great for the services to be available 24/7.
- **Vern-** The Mobile Response is not an emergency responder in that way, it can be and we would probably use it during the business hours to respond to something, like what you described. The reality is that they would be seen the following morning by MRT and take care of those kids until they are assessed, at the regional clinic, or if they felt the need was acute, MRT can refer to our START program, a multi-disciplinary team, it is an immediate intervention that our MRT refers to and is available to the child and the family, 24 hours a day and 7 days a week. They provide a whole array of services, including family therapy and individual therapy. Research shows that the best time to respond is not immediately, that immediate response is best for family and community to respond; it is best for "professionals" to be seen within 24 to 48 hours. MRT is really designed to manage the PES, in the community, after 5pm, when Miller Wellness is closed and it shows that a lot of trauma goes on between 8pm to midnight, for sure for children. This is not the case for adults. We are behind the Foster Reform care and all of our clinicians will be operating from that perspective, as their system, as we move into these new models and it is part of our implementation strategic plan in the next five years. We will be appointing a Trauma Team Leader to manage the program: they need care and nurturing. It is not enough to be trained and do the program, someone has to monitor it, look at the

<p>outcomes and keep the model on track.</p> <ul style="list-style-type: none"> • Duane- I would like to move on to Victor to explain about PES (Psychiatric Emergency) and what it does. • Vic- My responsibility is to oversee the unit called 4C, at CCRMC (Contra Costa County Regional Medical Center,) as well as Psyche Emergency Services. Our role there is primarily one of stabilization and preparing individuals for their next step into the community. Whether it's working with them so they can be considered for conservatorship and go into a longer locked term setting, like the Crestwood facility, or a crisis residential program - there are two, one in Martinez, called the Hope House, and the second one is in Concord, called the Paprika house. They are volunteer placements; 16 bed facilities by regulation, it's a place where someone can get additional care while they transition back into the community, whether that means a board and care facility or some other living situation. The more significant responsibility that we have is trying to link with the clinics, the adult clinics and children, if they require specialty mental health care. If not, we will make a referral to the County's Behavioral Health access line, the 800 number that all counties are mandated to have. Anyone that is Medi-Cal eligible or wants to apply can receive services. We try to work with clinics, people who have repeat visits and the homeless shelters. There is a fair amount of social work that goes on, so when someone comes into PES, they are evaluated by a treatment team, they see a psychiatrist, a nurse, a therapist, all that at the front door. People are approached by a team that is there to help. The law basically states that a 5150, a legally hold on an individual, they are entitled to an evaluation, and can be placed on a hold for up to 72 hours. There is a misconception in the community that the person will be on hold for 72 hours; it is up to 72 hours and very specific. The person's rights are most important. After 23 hours, we will look to contact the hospital, if it is necessary for a person to stay longer. We do have our own unit, of 23 beds at CCRMC, and they can stay there for up to 72 hours until their hearing. If all the beds are full, Behavioral has contracts with other facilities throughout a three to four counties region, including John Muir Medical Center. If you would like additional information, I am happy to return and provide more details regarding our services and what we do. Duane can provide anyone my contact information; I have known him for over 16 years. 	
<p>IX. REVIEW and ACCEPT ALL Yearend Reports from the full Commission and all the Advisory Committee, to form the 2016 Commission Report to the Board of Supervisors.</p> <ul style="list-style-type: none"> • Doug moves to motion to accept all the reports, Diana seconded the motion. • VOTE: 8-0-0 (Duane, Diana, Doug, Barbara, Connie, Supv Andersen, Gina, Lauren) • YAYS: 8, NAYS: 0, ABSTAIN: 0 • ABSENT: Sam, Mike, Jason, Meghan 	
<p>X. RECEIVE the Commission Representative Reports</p>	

<ul style="list-style-type: none"> 1) AOD= Alcohol and Other Drugs Advisory Board- Sam Yoshioka 2) CPAW= the Community Planning Advisory Workgroup- Lauren Rettagliata 3) CPAW, Children’s Committee- Gina Swirsding- 4) Council on Homelessness- Lauren Rettagliata- <ul style="list-style-type: none"> • MOVED TO NEXT MONTH 	
<p>XI. Adjourn Meeting The meeting was adjourned at 6:46pm.</p>	

Respectfully submitted,
Liza Molina-Huntley
Executive Assistant to the Mental Health Commission
CCHS Behavioral Health Administration
Version posted March 29, 2017
Final minutes approved on April 5, 2017