

MENDOCINO COUNTY BEHAVIORAL HEALTH ADVISORY BOARD

REGULAR MEETING MINUTES

November 14, 2018 10:00 a.m. to 2:00 p.m.

Chairperson

Jan McGourty

Vice Chair Emily Strachan

SecretaryDina Ortiz

Treasurer Vacant

BOS Supervisor Georgeanne Croskey

Mendocino County Museum 400 East Commercial Street Willits, CA

1 ST DISTRICT :	2 ND DISTRICT:	3 RD DISTRICT:	4 ^{тн} DISTRICT:	5 TH DISTRICT:
DENISE GORNY	VACANT	Meeka Ferretta	EMILY STRACHAN	PATRICK PEKIN
JAN McGourty	DINA ORTIZ	RICHARD TOWLE	TAMMY LOWE	MARTIN MARTINEZ
LOIS LOCKART	MICHELLE RICH	Amy Buckingham	LYNN FINLEY	Flinda Behringer

OUR MISSION: "To be committed to consumers, their families, and the delivery of quality care with the goals of recovery, human dignity, and the opportunity for individuals to meet their full potential."

Item	Agenda Item / Description	Action
1. 5 minutes	A. Meeting called to order by Chair McGourty at 10:17 B. Quorum met C. Members Present: 1. Members: McGourty, Gorny, Lockart, Towle, Ferretta, Buckingham, Strachan, Finley, Behringer, Martinez, and Supervisor Croskey 2. Discussion and approval of agenda as written – Vice-Chair Strachan motioned, seconded by Member Lockart.	Board Action:
2. 10 minutes	 Minutes of October 17, 2018 BHAB Regular Meeting: There was discussion and review of the August 15, 2018 BHAB minutes. Member Gorny motioned, seconded by Vice-Chair Strachan. Approved unanimously with no changes. 	Board Action:
3. 15 minutes (Maximum)	 Public Comments: Members of the public wishing to make comments to the BHAB will be recognized at this time. There were no public comments. 	
4. 15 minutes	BHAB Reports: A. Supervisor Croskey a. Previous BOS meeting was discussed:	Board Action:

- i. Presentation on the current status of Whole Person Care (WPC) at BOS. Went over well and seems to be coming together.
- ii. The progress on the Willow Terrace Project appears to be ahead of schedule.
- iii. Went over the Homeless Emergency Aid Program (HEAP), BOS is creating an ad hoc committee to look into long-term housing options for the homeless.
- iv. BOS ad hoc committee looking at whether or not to keep Juvenile Hall (JH) open, the committee is recommending keeping it open and then disbanding the committee; another ad hoc committee will be created to discuss possible ways to fund it.
- v. Staffing is a concern in the JH currently, as many staff sought employment elsewhere.
- vi. There was discussion of the change in laws and how it has affected the number of children having to go into JH, most JH's have more beds available than necessary.
- vii. Stepping Up: Supervisor Brown will attend the next Stepping Up Committee meeting; she will take over as BOS representative after Supervisor Croskey leaves.

B. Chair

- a. Measure B meeting was cancelled.
- b. Vice Chair Strachan stated the Mark Mertle called a meeting on the coast to discuss Measure B. Two members of the Coast Hospital, two members of the Coast Clinic, Dan Gjerde and herself were among those who attended. Mr. Mertle stated at the meeting that if we do not work on providing the opinions of those living on the coast, that the Measure B decisions will happen with or without their input.
- c. Vice-Chair Strachan asked a question regarding keeping people out of the ERs, she asked what triggers going to the hospital versus using the mental health facilities.
 - i. It was explained that the issue does not lie in the patients going into the ERs, but the length of time they end up staying there, sometimes days. The real goal is to have somewhere that the ER can send these patients. While some of the hospitals in the county have "safe areas" for these clients, having a dedicated area to take them would help greatly and would likely be much cheaper.
 - ii. Mobile Outreach and Prevention Services

(MOPS) or mobile services are not generally available within the city; because the expectation is that clients go through RQMC providers.

- 1. The MOPS team was created for those that do not have access to resources; this is defined on a case by case basis, such as a high level client that refused services, but keeps showing up at the hospitals
- 2. Generally, if RQMC is unable to provide the outreach, MOPS will. RCS is not always open, but they are always on call.
- 3. After hours, most crisis cases are defaulted to the hospital and crisis workers will come from RCS. RCS staff covers Ukiah and Willits, and other staff covers the coast.
- 4. A member of the public asked if that was due to limited funding or limited staff. BHRS Director Jenine Miller stated the crisis workers are not in the office 24/7, but will respond to calls on off hours.
- 5. There are specific months that crises tend to spike, based on experiences from previous years. October is usually a very high month. Response times are much better than in the past, and there are still not enough Psych beds available in California.
- *ii.* A member of the public asked if there was a requirement to have an officer stay with those patients while they are in the ER.
 - 1. They will stay long enough to remove any dangerous items, but there are usually not enough officers available to have them stay in the ER.
- *iii.* Member Buckingham stated that the ER must have a 1:1 ratio of mental health patients to ER staff, it can no longer be higher; it is becoming impossible to maintain that ratio or to have enough staff there at all times.
- *iv.* It was stated that Howard Hospital and Ukiah Valley Medical Center have had to add some type of security position in the ER.
- v. It was stated that it is taking up to 30 days to find out if someone needs mental health

treatment, but this is not what the County is seeing from the report data; the standard is 10 days. The county will be reviewing the numbers to verify that the standards are continuing to be met. Medi-Cal is very strict and the times frames must be met.

vi. Consultation and EQRO Report Review will be added to the agenda for the January meeting.

C. Secretary

a. There was a discussion regarding the letter of appreciation handout that was provided. It was reviewed and approved.

D. Treasurer

- a. The provided BHAB budget was reviewed
- b. There was a reminder for the board members to submit any outstanding mileage from the last meeting.
- c. There is an advisory board new members training in San Diego on January 18-19, provided by CIBHS and CALBHB. There are additional trainings taking place in March in Oakland and in August in Redding.

E. Membership Terms of New Members

- a. All member terms are 3-year terms; the newly joined members have terms ending in December 2018, Behavioral Health Director Jenine Miller, Psy.D. is seeing if that can be rolled into the next term. The board members with terms ending soon will need to email Behavioral Health Director Jenine Miller that they are still interested in serving.
- b. No letters have been received from the Clerk of the Board regarding the terms that are ending.
- c. The previous agreement was that if the member lets BHRS know they want to continue serving, the term could be continued with an email to the department.
- d. It was stated that Member Rich was intending to send an email about serving again and Member Pekin discussed with Chair McGourty that he wanted to continue his term.

F. Nomination of 2019 Officers

- a. Member Behringer discussed nomination of members, but there were no offers to serve as an officer, Member Behringer offered to be treasurer, if there was no other interest from the other board members. If any member decides they are interested in serving as an officer of the board, they should email Member Ortiz.
- b. There was a motion to accept the three previous officers (Chair McGourty, Vice-Chair Strachan, and

There was a motion to approve the letter of appreciation as written. Member Gorny motioned, Vice-Chair Strachan seconded. Vote passed unanimously.

There was a motion to accept the currently serving officers to remain in their respective roles and Member Behringer to fill the role of Treasurer. Motioned by Member Gorny and

	Member Ortiz) in their current roles and Member Behringer to take the recently vacated role.	seconded by Member Ferretta. Vote passed unanimously.
5. 20 minutes	Mendocino County Report (Dr. Jenine Miller): -	Board Action:
20 minutes	 The draft 2019 BHAB meeting calendar was provided and discussed. BHAB members will review and vote on it next month. It was stated that the Ft Bragg Regional Center has now has video conferencing capabilities. Stepping Up – Behavioral Health Director Jenine Miller, Psy.D. stated a Stepping Up committee meeting was held and that it was a success. We were able to have an official Stepping Up meeting with key players in the community in attendance. There were representatives from BHRS/SUDT, the Board of Supervisors, the Courts, NAMI, BHAB, and Sheriff's Office; they assigned a dedicated point of contact for each department involved. Member Gorny stated that the State Council of Developmental Disabilities would be offering recertification training in Feb/Mar or late spring in Northern counties. It was recommended that this training should not take place at the same time as the CIT trainings; it was suggested that she reach out to someone at BHRS for more information on the dates of the training. There was a discussion on the IMD exclusion waiver. Currently the waiver in place is for SUDT only opting into the ODS waiver. There has been movement to make this 	
	also include mental health as well.	
6.	RQMC Report:	
15 minutes	1. More data on the programs have been added to the report as	
	was requested in a previous meeting.There was a request for RQMC to break down the data between Adults and Children.	
	3. A member of the public asked what number of people Measure B would serve. It was stated that from the data that we have collected, it would likely serve around 10 beds inland and 4 to 6 on the coast.	
	4. A member of the public asked about number of Crisis Workers that were available. It was stated that there are several counselors and the supervisor that work on the coast, Ukiah and Willits share counselors. According to the current data, we have been meeting the 20-30 minute response times and sometimes it is happening much faster. It was stated that the hospital has not been seeing response times like that.	
	5. There should be a third tier backup for when the response times are not going to be met, Camille will be looking into why there are issues arising.6. There was discussion about parts of WPC that are working	
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- better than anticipated
- 7. Member Lockart asked about opiate usage and if RQMC had any related education provided in the schools. The different providers that are available in the schools were discussed.
- 8. There was discussion around the education of opiates in the schools and the style of education.
- 9. There are SUDT Counselors in the schools (education prevention and treatment) currently.

7. 75 minutes

Kemper Report – Study Analysis:

The provided Kemper Report Study Guide was reviewed.

- Policies
 - The items in highlighted in yellow on the handout are things that were discussed and found vital at a previous BHAB meeting.
 - Need to make sure the recommendations are reflecting the desire to supplement services, NOT supplant services. A Project Manager needs to be hired to oversee the implementation. It was suggested that contract monitoring and management be added to the recommendation.
 - o There was a discussion about the Bi-Annual Review of Measure B spending. It needs to be monitored to show if Measure B spending has a positive impact on MH/SUDT Continuum of Care. Review the data to see how the numbers change from year to year, to determine was a decrease or increase in the use of services.
 - The board recommended that a Prudent Reserve of Measure B funds be created to help plan for future sustainability.
 - 10-Year Strategy Plan Supervisor Croskey suggested that BHAB recommend a push for adoption by a specified date.
 - o Restructure Data provided by BHRS, RQMC, and subcontractors It was suggested that this be changed to a bi-annual review instead of quarterly to correspond with the Bi-Annual Review that is also required, Supervisor Croskey suggested keeping it as quarterly as it is a very important metric to track and catch trends more expediently. The County and RQMC already monitor this data monthly.
- Page 2 Services
 - A Measure B subcommittee has met to discuss a recommendation for type of facility, but have not yet presented anything to the Measure B committee. It was suggested that BHAB recommend putting out a detailed RFI for multiple facility types, including detailed staffing info. This should include all current

suggestions (PHF, CSU, and CRT), as well as any other options that are viable, which may or may not include an indigent site.

• Break for Lunch 12:39

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LUNCH 12:30 – 1:00

8. 55 minutes

Kemper Report - Recommendations

- A member of the public stated that BHAB needed to make sure to consider the coast's needs for the recommendations.
- It was stated that if a CRT/CSU was implemented, the expectation is a reduction in patient utilization by 50% in less than 5 years. Camille Schraeder stated that at least a third would be diverted within the first year and reaching 50% over the following 5 years it could be possible. Having a facility open would likely decrease the demand for a psych hospital.
- There was a discussion regarding the Orchard street property proposed for a possible CSU and what issues they have experienced.
- Recommendation: It is imperative to create a facility that can serve pre-crisis or 5150 holds on the coast in collaboration with the coastal communities and community partners.
- If an RFI is being recommended for one piece of the project, such as the inland facility, then all of the pieces, such as the coast, need to have one.
- Recommendation BHAB recommends that MOPS be expanded, and it should be verified that each team has two people (counselor and a sheriff tech).
- Recommendation –Explore collaborations with the clinics around the county, RQMC medication management, and MOPS for continuation of care; using the tele-psych services, if necessary.
- Recommendation Have Mendocino County take the lead in promoting private insurance parity to align with specialty mental health Medi-Cal.
- Recommendation Create a common definition of "wellness", while keeping cultural competency in mind.
- Recommendation Create workshops for employers/physicians in the community to educate them on how to work/serve with specialty mental health clients and how to reduce stigma.
 - Teach them how to be inclusive, providing employment and decreasing the stigma around specialty mental health clients.
- Recommendation Build a range of supported, inclusive, and integrated housing throughout the county.

Board Action:

	 Recommendation - Build at least one Medi-Cal billable Board and Care facility. Recommendation - An expansion of SUDT, have more counselors in outlying areas and work towards more outreach and collaboration in the schools, particularly in tribal communities to promote prevention.
9. 5 minutes	Adjournment Next meeting: December 19, 2018 in Ukiah and live video conferencing in Fort Bragg. This will be a 2-hour meeting to coincide with the Measure B Meeting. • Meeting Adjourned at 2:13 pm • Member Gorny motioned, Member Ferretta seconded.

AMERICANS WITH DISABILITIES ACT (ADA) COMPLIANCE

The Mendocino County Behavioral Health Board complies with ADA requirements and upon request will attempt to reasonably accommodate individuals with disabilities by making meeting material available in appropriate alternative formats (pursuant to Government code Section 54953.2) Anyone requiring reasonable accommodations to participate in the meeting should contact the Mendocino County Mental Health's Administrative Office by calling (707) 472-2388 at least five days prior to the meeting.

Jan McGourty, BHAB Chair

Date

12-19-18

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Dustin Thompson, Program Specialist I

Date

BHAB CONTACT INFORMATION: PHONE: (707) 472-2388 FAX: (707) 472-2331