



MENDOCINO COUNTY BEHAVIORAL HEALTH ADVISORY BOARD

REGULAR MEETING AGENDA

March 20, 2019
10:00 a.m. to 2:00 p.m.

Farm Advisory Building Conference Room, 890 N. Bush St., Ukiah
and live video conferenced to
Seaside Room, 778 S. Franklin St., Fort Bragg

Chairperson
Jan McGourty

Vice Chair
Emily Strachan

Secretary
Dina Ortiz

Treasurer
Flinda Behringer

BOS Supervisor
Carre Brown

1ST DISTRICT:

DENISE GORNY
JAN MCGOURTY
LOIS LOCKART

2ND DISTRICT:

DINA ORTIZ
MICHELLE RICH
VACANT

3RD DISTRICT:

MEEKA FERRETTA
AMY BUCKINGHAM
RICHARD TOWLE

4TH DISTRICT:

EMILY STRACHAN
TAMMY LOWE
LYNN FINLEY

5TH DISTRICT:

PATRICK PEKIN
MARTIN MARTINEZ
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	Call to Order, Roll Call & Quorum Notice, Approve Agenda:	Board Action:
2. 10 minutes	A. Minutes of the February 20, 2019 BHAB Regular Meeting: Review and possible board action	Board Action:
3. 15 minutes (Maximum)	Public Comments: <i>Members of the public wishing to make comments to the BHAB will be recognized at this time.</i>	
4. 30 minutes	BHAB Reports: Discussion and possible board action. A. BOS Report - Supervisor Brown B. Chair – Jan McGourty I. Report to BOS II. Measure B – See Measure B January Minutes III. Stepping Up – May Month of Action IV. CIT Review V. Innovation Plan Discussion C. Secretary D. Treasurer	Board Action:
5. 30 minutes	Committee Reports: A. Membership B. Flow Chart C. Appreciation D. Dual Diagnosis E. 2019 Committees	Board Action

6. 30 minutes	Mendocino County Report: <i>Jenine Miller, BHRS Director</i> A. Crisis Intervention Team (CIT) Training - April 3-5, 2019 at Consolidated Tribal Health Conference Room. B. Discussion of Grievance/Complaint Process C. 2018 Audits - <i>List of Audits in 2018</i>	Board Action:
LUNCH BREAK 12:30 to 1:00		
7. 20 minutes	RQMC Report:	
9. 30 minutes	BHAB Business: A. Review of BHAB Job Duties I. Grievances & Incidents II. Court Case on Jail 2014 B. Trainings I. (CALBHBC) - April II. Stepping Up Webinars III. MHSA Online Training IV. Online Ethics Training C. Data Notebook	Board Action:
10. 5 minutes	Adjournment: Next meeting: April 17, 2019 in Boonville	

AMERICANS WITH DISABILITIES ACT (ADA) COMPLIANCE

The Mendocino County Behavioral Health Advisory 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 Behavioral Health Administrative Office by calling (707) 472-2355 at least five days prior to the meeting.

BHAB CONTACT INFORMATION: PHONE: (707) 472-2355 FAX: (707) 472-2788
EMAIL THE BOARD: mhboard@mendocinocounty.org WEBSITE: www.mendocinocounty.org/bhab



**MENDOCINO COUNTY BEHAVIORAL
HEALTH ADVISORY BOARD**

**REGULAR MEETING
AND
MENTAL HEALTH SERVICES ACT THREE-
YEAR PLAN ANNUAL UPDATE 2018/2019
PUBLIC HEARING
MINUTES**

**February 20, 2019
10:00 a.m. to 2:00 p.m.**

**Consolidated Tribal Health Conference Room,
6991 N. State Street, Redwood Valley**

Chairperson
Jan McGourty

Vice Chair
Emily Strachan

Secretary
Dina Ortiz

Treasurer
Flinda Behringer

BOS Supervisor
Carre Brown

1ST DISTRICT:
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Item	Agenda Item / Description	Action
1. 5 minutes	Call to Order, Roll Call & Quorum Notice, Approve Agenda: <ul style="list-style-type: none"> Meeting called to order at 10:11 by Vice Chair Strachan Roll called by Member Rich Quorum met Members present: Behringer, Ferretta, Finley, Gorny, Lockart, Martinez, Rich, Strachan, Towle, McGourty and Supervisor Brown Agenda approved with removal of Item 4.IV, to be placed on the March 20, 2019 agenda. 	Board Action: Motion made by Member Gorny, seconded by Member Finley to remove Item 4.IV, to be placed on the March 20, 2019 agenda. Motion passed unanimously.
2. 10 minutes	A. Minutes of January 16, 2019 BHAB Regular Meeting: <i>Review and possible board action</i> I. Minutes approved as written. B. Minutes of January 31, 2019 BHAB Special Meeting: <i>Review and possible board action</i> I. Minutes approved with correction of typo, Item 4.D.	Board Action: Motion made by Member Rich, seconded by Member Ferretta to approve the 1/16/19 minutes as written and the 1/31/19 minutes with correction of typo. Motion passed unanimously.
3.	Public Comments:	

<p>15 minutes (Maximum)</p>	<p><i>Members of the public wishing to make comments to the BHAB will be recognized at this time.</i></p> <ul style="list-style-type: none"> • Richard Matens, CEO Consolidated Tribal Health Project, commented he appreciates what the County has done to improve and include Native Americans in mental health services. • Josephine Silva, community member, commented on the EQRO report. <ul style="list-style-type: none"> ○ Commented on the Quality Improvement Committee (QIC) and Behavioral Health Advisory Board (BHAB) meetings having mostly agency people attending, not enough community members or consumers, she suggested that all the public meetings be at Manzanita or Mendocino Coast Hospitality Center or another place consumers would be at and she felt more likely to attend. ○ Commented the community should have more say in where and how the Mental Health Services Act (MHSA) budget is being spent. ○ Commented regarding psychiatrists being hired, she wanted to know what is being done about hiring more psychiatrists. She feels there is not enough psychiatrists available as needed. ○ Commented on the Crisis Flow Chart, she agrees it's very difficult to follow. 	
<p>4. 40 minutes</p>	<p>BHAB Reports: <i>Discussion and possible board action.</i></p> <p>A. BOS Report: <i>Supervisor Brown</i></p> <ol style="list-style-type: none"> I. Supervisor Brown thanked the BHAB Ad Hoc Committee for breaking down the Kemper Report (Measure B). The recommendations that were presented to BOS were on the agenda at the same meeting the Measure B Committee was presenting to the BOS. The BHAB recommendations were very helpful to the BOS members and the Community. II. Supervisor Brown stated she is happy to see the Stepping Up Program and Crisis Intervention Team (CIT) Training is moving forward. III. Member Martinez asked if there will be any safety measures taken for the staff. <p>B. Chair:</p> <ol style="list-style-type: none"> I. Measure B – BHRS Director Miller commented on the Measure B Committee as BHAB Chair McGourty was not present. She commented the committee voted to send their recommendations to BOS. The next Measure B Committee meeting will be Wednesday, February 27, 2019. <ol style="list-style-type: none"> a. Vice Chair Strachan has been meeting with Mark Mertle, Measure B Committee member, they have a small Ad Hoc Committee to discuss the needs of the coast. They have been discussing the “Livingroom concept”, but what the Ad Hoc Committee sees as a 	

	<p>priority need for the coast are crisis beds to relieve the Hospital of client care.</p> <ul style="list-style-type: none"> i. Member Finley commented there are a lot of people wanting more crisis beds for people on the coast. There is concern with keeping clients, hospital staff, and the public safe on the coast. ii. Supervisor Brown commented that Dr. Marvin Trotter stated at a BOS meeting that his group has been tracking the crisis hospital client numbers in the county. She thinks the information will be followed up by the Measure B Committee as they pursue options on how the Measure B funds will be used. iii. Supervisor Brown stated the Measure B Committee needs to come up with a place people in crisis, but not meeting 5150 criteria, can go and feel comfortable to get the help they need. <ul style="list-style-type: none"> b. Member Lockart asked why or if the Measure B Committee minutes could be brought to the BHAB meetings. <ul style="list-style-type: none"> i. BHRS Director Miller stated the Measure B Committee minutes are posted on line, but she said it's something that can be done; members will need to keep in mind the minutes will be a month behind. <p>II. Stepping Up- BHRS Director Miller commented that the County is in the beginning stages of the program and more people (agencies) are attending the meetings; Supervisor Brown, Sheriff Allman, RQMC, Courts, Probation, and BHRS. The group is working on getting a representative from the District Attorney's Office (DA) to attend. The group has spent the last 2 meetings on defining what mental health and recidivism means as there are different definitions. Next steps are to look at who (which agency) can do what.</p> <ul style="list-style-type: none"> a. Member Martinez asked if there has been any discussion regarding re-entry to the community. <ul style="list-style-type: none"> i. BHRS Director Miller commented that hasn't been discussed yet, but Substance Use Disorders Treatment (SUDT) has counselor, Jill Ales, working at the jail with inmates and she does work with clients on re-entry. She helps get clients connected to support services before they are discharged from the jail. b. Supervisor Brown is hoping the new addition to the jail will help with getting inmates connected to services both while in custody and when they are discharged. c. BHRS Director Miller stated BHRS is currently trying to hire a discharge planner to work with inmates so when the inmate is discharged from the jail they have 	
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	<p>in place, someone that will be picking them up from the jail, where they will go to live, and connections to services they will need for support. She commented the jail has some education classes for inmates and several have received their General Education Degrees (GED) while in custody.</p> <p>d. Member Lockart commented that education is important, not so much at the higher levels, but as an advocate for vocational training she thinks education/training for jobs such as a mechanic is needed.</p> <p>III. CIT Training: Member Ferretta commented on the CIT Training, she thought it was a great training. She listed some of the training points that were covered in the three days. She talked about the different agencies that were represented; law enforcement (Sheriff Deputies both in corrections and patrol, probation, grand jury, Ukiah Police Dept.). There were NAMI family members and clients that presented. They explained how the 5150 process is experienced and perceived by the family and the client. She mentioned some of the younger lower level law enforcement officers were concerned that if they tried to put into practice the techniques/skills they were learning, their supervisors may not be aware of the procedures and they could be reprimanded.</p> <p>a. BHRS Director Miller commented the Ukiah Police Department Chief and Sheriff Allman stated they had reports from their staff that had attended CIT Training stating it was a very important and useful training. The Chief and Sheriff will try to make sure more of their staff attends future training.</p> <p>b. Member Ferretta was surprised that a Sheriff Deputy commented he was not aware of the Mobile Outreach Prevention Services (MOPS) teams and what they do. BHRS Director Miller will follow up with Sheriff Allman to make sure the Deputies are aware of MOPS and the support they provide.</p> <p>c. The next CIT Training will be April 3rd, 4th, and 5th at the Consolidated Tribal Health Project Conference Room from 8:00 to 5:00, lunch will be provided. The training flier will be sent to BHAB members so if they want to attend they can register, there is no charge for the training.</p> <p>IV. Letters of Appreciation: Vice Chair Strachan passed out Certificates of Appreciation for members to sign. These are Certificates the board had voted to send out to all County Staff and all of the contracted providers along with MHSA funded providers. The County will make sure the certificates are delivered.</p> <p>V. Dual Diagnosis Committee Report - <i>Discussion and possible action</i></p>	<p>Board Action: By consensus of members</p>
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	<p>a. Due to Secretary Ortiz not being available, by consensus of the members present this item will be held over and added to the March 20, 2019 agenda.</p> <p>VI. California Association of Local Behavioral Health Board and Commissions (CALBHBC) Training and Meetings: <i>Discussion and possible action regarding members attending meetings/training</i></p> <p>a. Discussion of any member interested in attending upcoming meetings/training. The only member currently interested is Member Ferretta, she will attend the training in Oakland in March.</p> <p>VII. California Behavioral Health Planning Council - Data Notebook - <i>discussion and possible action by members</i></p> <p>a. Member Rich stated that Chair McGourty, Secretary Ortiz and she met to discussion completion of the Data Notebook. They divided the notebook into sections for each to work on. Member Rich has a few questions, but will follow up with Chair McGourty and Secretary Ortiz and hopes they will have a report at the next BHAB meeting.</p> <p>b. There was a question of what the data/information collected is used for.</p> <p>i. The Data Notebook is actually a survey this year but will go back to data collection next year.</p> <p>ii. BHRS Director Miller commented the data collected is to see what mental health needs are for the State.</p> <p>C. Secretary- no report D. Treasurer-no report</p>	<p>present Item 4.B-V Dual Diagnosis Committee Report, will be held over to another meeting for discussion.</p>
<p>5. 10 minutes</p>	<p>Membership: <i>Discussion and possible action</i></p> <p>A. Membership - Supervisor Brown swore in Member Lockart for another three year term on the BHAB.</p> <p>B. BHAB Member Handbook - <i>Need updates</i></p> <p>I. Amanda Stoner, BHRS Admin, Staff Assistant III placed the updated information and removed the outdated information in the Member Handbook while the meeting was in process. Members not in attendance will need to make arrangements to get their Handbooks updated.</p> <p>C. Membership Applicant - <i>Discussion and possible action</i></p> <p>I. The board received an application for a new member Sergio Fuentes for District 2. There was discussion of whether Mr. Fuentes meets the criteria for the Consumer position that's open at this time or whether the board can have someone that is not a consumer fill the position.</p> <p>a. Member Rich thinks the position should be filled by a consumer to provide input from a consumer perspective.</p> <p>b. Discussion of putting the subject on hold while the board reaches out to some of the providers to see if there is possibly a client that may be interested in</p>	<p>Board Action: By consensus of members present the applicant Sergio Fuentes was held over to the next meeting pending follow up regarding the applicant meeting the criteria for the position of Consumer.</p>

	<p>serving on the board.</p> <p>c. Supervisor Brown offered to follow up with Supervisor McCowen regarding the concerns of BHAB regarding Mr. Fuentes' application.</p> <p>II. Discussion of the difficulty of asking an applicant if they are a consumer. The new application form doesn't have a box an applicant can check to say which position they are applying for, which the previous application did.</p> <p>a. Supervisor Brown talked about the changes made to the application.</p> <p>III. BHRS Director Miller will have her staff look up the regulations regarding who can fill the positions on BHAB.</p> <p>IV. Member Lockart thinks the board should consider anyone that applies regardless of whether the applicant meets criteria for Public Interest, Family/Consumer, or Consumer.</p> <p>D. Membership Pictures - BHRS Director Miller stated that starting with the next BHAB meeting she would like pictures taken of individual members and a group picture of the board to put on the BHAB website.</p>	
<p>6. 15 minutes</p>	<p>RQMC Report: <i>Camille Schraeder, CFO Redwood Quality Management Company</i></p> <p>A. Ms. Schraeder commented RQMC is working on their provider contacts for FY 2019/2020, to meet the State requirements.</p> <p>I. Discussion of the homeless housing and the process of building a community culture.</p> <p>II. RQMC is working out a procedure to bill for client services that were previously unbillable.</p> <p>III. Ms. Schraeder commented on where medication management services are provided and the RQMC staff providing the services.</p> <p>IV. Discussion of the "crisis beds", Ms. Schraeder stated the program is funded by a private entity.</p> <p>V. Member Martinez asked Ms. Schraeder what RQMC is doing for the safety of their staff. He asked if there were cameras, security guards, lights in the parking areas, etc. He is concerned not just in the buildings, but with staff going from the building to their cars after hours.</p> <p>a. Ms. Schraeder commented that inside the buildings they have cameras and there is an intercom that staff can use with a code word to let other staff know they need help.</p> <p>b. BHRS Director Miller stated that if there is a particular person the staff is concerned about they can opt to get a restraining order.</p> <p>VI. Discussion of grants for the homeless shelter which had to be in place by October 2018. Ms. Schraeder stated the funding from H.E.A.T. has been put on hold. The homeless resource center is on hold pending funding.</p>	<p>Board Action:</p>

	VII. Ms. Schraeder will have staff add to the Data Dashboard the re-hospitalization numbers. She noted the Sheriff calls were up for the month of December 2018.	
<p style="text-align: center;">LUNCH BREAK 11:45 to 12:15 Adjourned at 11:58 - Reconvened at 12:24</p>		
<p>7. 60 minutes</p>	<p>BHAB / Mental Health Overview of BOS Presentation: <i>Presentation by Tammy Moss Chandler, HHSA Director and Jenine Miller, BHRS Director</i></p> <p>A. HHSA Director Tammy Moss Chandler commented about being away from HHSA for about a year to work on the County fire recovery.</p> <p>B. HHSA Director Tammy Moss Chandler stated the presentation she and BHRS Director Miller is presenting was regarding the Kemper Report that was done regarding the Measure B needs. She commented the presentation is a draft and she is hoping for feedback and suggestions from BHAB members. The presentation will be on the agenda for BOS in March. This presentation will also involve RQMC.</p> <p>I. HHSA Director Tammy Moss Chandler reviewed what the presentation will cover; she reminded everyone present that when the County talks about mental health services they are talking about Specialty Mental Health Services (SMH) which provides services to the severely mentally ill.</p> <p>II. Member Ferretta asked for clarification of the top slide on page four. What did the circle Contracted ASO mean?</p> <p>a. HHSA Director Tammy Moss Chandler explained that in most counties the funding is paid out directly by the county to contracted providers, but in Mendocino County there is a contract with an Administrative Services Oversight (ASO) company, RQMC, which receives funding as stated in their contract. The ASO is responsible for paying the providers for services.</p> <p>III. Member Lockart asked if the recent Office of Inspector General (OIG) Audit will affect funding.</p> <p>a. HHSA Director Tammy Moss Chandler responded that the estimated amount the County will have to pay back to the State will be \$790,000, which is less than what the County thought would need to be paid back.</p> <p>IV. BHRS Director Miller commented on the pages in the report regarding SMH services. She reviewed the criteria to receive services for SMH.</p> <p>a. Vice Chair Strachan asked if a person could self-refer for placement in a SMH facility.</p> <p>i. BHRS Director Miller explained that a person can self-refer, but will first be assessed to see if the criterion is met before being admitted.</p> <p>V. BHRS Director Miller explained that every client has to have a client plan before any billing can be sent to Medi-</p>	

	<p>Cal. The client plans have to be updated annually or anytime client care needs to be changed.</p> <p>a. Discussion of what has to be in the client plan and how often it can be updated, how many times of service and how a service will be provided, along with the expected outcome of the service.</p> <p>VI. Member Towle asked about a client receiving services, but has Medi-Cal issued from another county.</p> <p>a. BHRS Director Miller explained that you can get services, but the County will not get matching payment from realignment funds from the county the Medi-Cal was issued. There is a new regulation called a presumptive transfer that states all counties should take care of their own clients, but all Crisis clients will be served regardless of Medi-Cal or other insurance coverage. If a crisis client needs to get or change the county of Medi-Cal issue the crisis workers will help to apply or change Medi-Cal.</p> <p>VII. Discussion on why/when Medi-Cal can deny services.</p> <p>a. Day Treatment/Day Rehabilitation billing is one of the main reasons for denial. RQMC has worked very hard to decrease the number of denials by Medi-Cal.</p> <p>b. BHRS Director Miller commented on some of the ways denials can come up. The Triennial Audit is one of the ways. The County does its own audits of client charts two to three times a year.</p> <p>c. Discussion of the ASO training the providers to complete documentation in client charts to meet the regulations for Medi-Cal billing.</p> <p>VIII. Member Behringer asked if Medi-Cal targets the most expensive services to deny.</p> <p>a. BHRS Director Miller stated she didn't think so; Medi-Cal has strict regulations regarding what can be billed and how the documentation should be completed.</p> <p>IX. Discussion of the difference between a 72 hour hold (5150) and conservatorship. BHRS Director Miller explained the Lanterman-Petris-Short (LPS) Act Conservatorship and how it came into law and how it works.</p> <p>a. HHSA Director Tammy Moss Chandler commented that she and BHRS Director Miller are working together to look at the number of LPS clients.</p> <p>X. HHSA Director Tammy Moss Chandler talked about the importance of MHSA and the providers they fund.</p> <p>XI. HHSA Director Tammy Moss Chandler mentioned the Substance Abuse and Mental Health Services Administration (SAMHSA) and SB 82 grant funding.</p> <p>XII. HHSA Director Tammy Moss Chandler explained the No Place Like Home grant and what it will fund. The County qualified for \$1.7 million which will help with homeless</p>	
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	<p>housing.</p> <p>XIII. Discussion of the Kemper Report recommendations. Any feedback from BHAB members should be sent to BHRS Director Miller.</p>	
<p>8. 15 minutes</p>	<p>Mendocino County Report: <i>Jenine Miller, BHRS Director</i></p> <p>A. Crisis Intervention Team (CIT) Training</p> <p>I. See item 4.C for discussion details.</p> <p>B. Willow Terrace - <i>Discussion and Clarification of Applicant Process - Acting Deputy Director Karen Lovato</i></p> <p>I. Acting Deputy Director Karen Lovato clarified the application process for the Willow Terrace housing. She stated there were very few clients that did not meet the qualifying criteria for housing. She apologized for any confusing information that may have been relayed. She doesn't think there are any issues regarding income or lack of income. Willow Terrace was designed for no income or very low income residents. The application team is currently trying to get more applications than there are vacancies so they can be sure to have clients for all the units.</p> <p>II. Vice Chair Strachan stated she wants a Willow Terrace in Fort Bragg.</p> <p>III. Member Rich asked if there was a plan for providing household items for the new residents of Willow Terrace as most of them have nothing to set up a home.</p> <p>a. Acting Deputy Director Lovato stated there will be basic items in place. There will be a letter sent out asking for donations such as towels and sheets.</p> <p>IV. There will be a community building participation program in place to help get the residents thinking about building a community.</p> <p>V. Discussion of what the housing units will be like; they will be pet friendly as many of the homeless people have pets.</p> <p>VI. Discussion of Rural Community Housing Development Corporation (RCHDC) regulations that has to be met to receive funding.</p> <p>VII. Acting Deputy Director Lovato stated that all residents will be provided with WRAP Around services and there will be a resident care manager on site.</p>	<p>Board Action:</p>
<p>9. 25 minutes</p>	<p>Mental Health Services Act (MHSA) Three-Year Annual Update FY 2018/2019 Public Hearing: <i>Discussion and possible action</i></p> <p>A. BHRS Director Miller commented the County/MHSA was in attendance to get feedback from the public regarding the MHSA Three-Year Plan Annual Update 2018/2019.</p> <p>I. Josephine Silva commented she was sad that there were not more people from the public.</p> <p>a. Ms. Silva stated she is happy that there are photos of Mendocino County in the plan as they show the size</p>	<p>Board Action:</p> <p>Motion made by Member Ferretta seconded by Member Finley to approve the MHSA Three-Year Plan Annual Update 2018/2019 as written to go forward to BOS. Motion passed</p>

	<p>and diversity of the County; she hopes they are kept in the plan.</p> <ul style="list-style-type: none"> b. She commented on the Innovation Plans, she liked the second aspect and likes the social interaction ideas. c. She is sad that the third option for the TAY group being a televised interaction. d. For prevention she would like to see more education on nutrition. e. She feels there should be more emphasis on work programs for clients. f. Ms. Silva complimented Acting Deputy Director Lovato on putting this plan together, and stated she understands that the County has constraints as to what can go forward. <p>II. BHRS Director Miller asked the BHAB members to send their feedback for next year's MHSA Three-Year Plan Update to her or Acting Deputy Director Lovato.</p> <p>III. Member Rich stated in regards to the Parent Child Interaction Therapy (PICT) and Positive Parenting Programs (PPP), they don't match. BHRS Director Miller stated they will revisit that section again.</p>	unanimously.
<p>10. 5 minutes</p>	<p>Adjournment: Meeting adjourned at 1:58 by Vice Chair Strachan.</p> <p>Next meeting: March 20, 2019 in Ukiah live video conferencing to Fort Bragg</p>	

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Emily Strachan, BHAB Vice Chair

Date

Carolyn Peckham, BHRS Administrative Secretary

Date

BHAB CONTACT INFORMATION: PHONE: (707) 472-2355 FAX: (707) 472-2788
EMAIL THE BOARD: mhboard@mendocinocounty.org **WEBSITE:** www.mendocinocounty.org/bhab

Mental Health Treatment Act Citizen's Oversight Committee

Mendocino County Administration Center
501 Low Gap Road, Room 1010
Ukiah, CA 95482
707.463.4441

measureb@mendocinocounty.org



January 23, 2019 Minutes

AGENDA ITEM NO. 1 – CALL TO ORDER AND ROLL CALL (1:00 P.M.)

Committee Members Present: Mr. Thomas Allman; Ms. Carmel J. Angelo; Dr. Ace Barash; Mr. Jed Diamond; Mr. Ross Liberty; Ms. Jan McGourty; Dr. Jenine Miller; Ms. Donna Moschetti; Ms. Shannon Riley; and Mr. Lloyd Weer.

COMMITTEE MEMBER MERTLE PRESENT: 1:02 P.M.

2) PUBLIC EXPRESSION

Presenter/s: Dr. Marvin Trotter.

3) COMMITTEE MATTERS

3a) Approval of Minutes from December 31, 2018, Meeting

Presenter/s: Chair Barash.

Public Comment: None.

Committee Action: Upon motion by Member Moschetti, second by Member Diamond, and carried unanimously, IT IS ORDERED that the December 18, 2019, minutes are hereby approved.

3b) Election of Vice-Chair of the Mental Health Treatment Act Citizen's Oversight Committee

Presenter/s: Chair Barash.

Public Comment: None.

Committee Action: Upon motion by Member Diamond, second by Member Liberty, and carried unanimously, IT IS ORDERED that Member Moschetti is hereby appointed as Vice-Chair of the Mental Health Treatment Act Citizen's Oversight Committee.

3c) Discussion and Possible Action Regarding Expenditure Report on Measure B Tax Funds

Presenter/s: Auditor-Controller Weer.

Public Comment: Ms. Carole Hester.

Auditor-Controller Weer provided an update on the Expenditure Report. He stated that the only change from the December report was the addition of the October tax proceeds in the amount of \$652,942.00, which brought the total tax proceeds \$4,711,904.00, to date. He continued by stating that there are no new expenditures, and to-date interest was \$3,400.00, for a current total fund balance of \$4,516,255.00

Committee Action: No action taken.

3d) Discussion and Possible Action Regarding Update from County Counsel Regarding Legal Issues Raised by the Committee

Presenter/s: Ms. Katharine L. Elliott, County Counsel.

Public Comment: Ms. Carole Hester; and Mr. John McCowen.

Ms. Elliott reported that the Board of Supervisors unanimously approved County Counsel's participation in the Committee without any charge to the Measure B fund. She continued that she had received questions from the Committee regarding outstanding legal issues. The first question was, "*A legal opinion regarding the City of Willits claims as to jurisdiction over utilizing the old Howard Hospital as a Psychiatric Health Facility (PHF).*" She continued that as this question was posed by Member Liberty, she had met with Mr. Liberty prior to the meeting to discuss some of the complications. She continued that her simple answer was that the County oversees County-owned property, and the County is subject to County rules, and not City rules. Her secondary answer was, depending on what type of certification is sought from the State, the State could impose local restrictions from the local entity.

The second question addressed by Ms. Elliott was, "*The Board of Supervisors legal ability to spend Measure B funds on building and/or improving facilities not owned by the County.*" Ms. Elliott stated that the County can give money to enhance a building not owned by the County, and it would not be considered a gift of public funds if it the money was given for public good. She continued that although it is possible, she would recommend against it as the County would not have future legal oversight of the facility. Discussion ensued regarding current ownership of the Old Howard Hospital, a potential partnership with Adventist Health, the Orchard Avenue property, and the potential ability for the County to enter into long-term contracts for operations in non-county owned buildings.

The third question presented to Ms. Elliot was, "*Conditions in which Measure B funds could be used for construction of facilities without paying prevailing wage rates.*" Ms. Elliott responded that there were no conditions, if the facility being constructed was a County building, the County would be required to pay prevailing wages. Mr. Mertle then raised the question would the same situation apply if the money was donated to a business to improve their building. Ms. Elliott stated that she could not answer that question on behalf of the recipient of the funds, as they may have their own particular requirements.

Committee Action: No action taken.

3e) Discussion and Possible Action Including Review of Kemper Report, as Recommended by the Behavioral Health Advisory Board and Adoption of Recommendations Contained Therein

Presenter/s: Member McGourty.

Public Comment: Mr. John Haschak; Mr. John McCowen; and Ms. Camille Schraeder.

Ms. McGourty opened by stating that, at the Committee's request, Mr. Kemper did an analysis of the County behavioral health needs and provided specific recommendations based on their report. She continued that the Behavioral Health Advisory Board (BHAB) reviewed the report in depth, and the Committee should as well. She stated that the BHAB found that some of the contained recommendations were general and others vague, so Ms. McGourty prepared a study guide to better approach the report. She began the review by directing the Committee to the Program Services area, and the need for a Psychiatric Health Facility (PHF) or other inpatient psychiatric care facility created. She continued that the Committee had previously discussed the need for a Request for Proposal (RFP), or a Request for Information (RFI). The Committee discussed the difference between each request, and the need to determine the most practical and useful next step. Discussion ensued regarding the recommendations contained in the Kemper Report and the need for a guide and/or a strategic plan to help prioritize the committee's future actions.

The question was raised as to which was the top priority of each committee member. Each member then in turn stated their top priority/priorities. Those receiving the highest mentions in the following order were Psychiatric Health Facility; Crisis Residential; and Crisis Stabilization.

Committee Action: Upon motion by Member Diamond, Second by Sheriff Allman, and carried unanimously, IT IS ORDERED that the Mental Health Treatment Act Citizen's Advisory Committee hereby accepts the Kemper Report as a guideline for the Committee to make recommendations to the Board of Supervisors regarding program, priority and funding.

3f) Discussion and Possible Action Including Approval of Recommendation to the Board of Supervisors Regarding a Request for Proposal (RFP) for a Biddable Design of a Combined Residential, Crisis Stabilization and Crisis Access Facility in the Ukiah Valley

Presenter/s: Chair Barash.

Public Comment: Mr. John McCowen; Ms. Tammy Moss Chandler; and Mr. Dan Anderson.

Chair Barash began the discussion regarding the need for the Committee to move forward with a crisis residential stabilization unit. He continued that the Board of Supervisors had already approved it, and that the Committee ultimately needed to determine whether they approved utilization of Measure B funds for the project; and how to proceed with an RFP for a biddable design or design/build, and the possible locations for such facility. It was suggested that one possible approach could be that the Committee make a recommendation to the Board of Supervisors to move forward with research of crisis stabilization in a crisis residential unit.

At the Committee's request, Mr. McCowen provided some clarity regarding previous Board of Supervisors action in respect to the Orchard Avenue building. Mr. McCowen stated that the Board had supported a grant application that had not been funded. Ms. Moss Chandler directed the Committee members to the agenda packet, which contained all previous Board of Supervisors actions. She continued by clarifying the previous actions related to the Orchard Street property. Clarification regarding the funds used to purchase the property, the current status of the property, as well as the fact that there were not any restrictions was provided by Mr. Anderson of Redwood Community Services.

CHAIR BARASH PASSED THE GAVEL TO VICE-CHAIR MOSCHETTI. CHAIR MOSCHETTI PRESIDING.

Committee Action: Upon motion by Member Angelo, second by Member Barash, and carried unanimously, IT IS ORDERED that the Mental Health Treatment Act Citizen's Oversight Committee makes recommendation to the Mendocino County Board of Supervisors to explore utilizing Measure B funds for the development of a Crisis Stabilization and Crisis Residential Facility and a 24-hour Psychiatric Facility. Further, that the Board of Supervisors direct staff to research options associated with such facility including design/bid/build and potential property or facility locations.

CHAIR BARASH PRESIDING

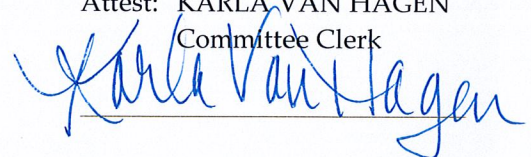
4 COMMITTEE MEMBER REPORTS

4a Committee Member Reports Regarding Items of General Interest

5 ADJOURNMENT

THERE BEING NOTHING FURTHER, THE MENTAL HEALTH TREATMENT ACT CITIZENS OVERSIGHT COMMITTEE ADJOURNED AT 3:20 P.M.

Attest: KARLA VAN HAGEN
Committee Clerk



The Committee complies with ADA requirements and upon request, will attempt to reasonably accommodate individuals with disabilities by making meeting materials available in appropriate formats (pursuant to Government Code section 54953.2) Anyone requiring reasonable accommodation to participate in the meeting should contact the Committee clerk by calling (707) 463-4441 at least five days prior to the meeting.

Additional information regarding the Committee may be obtained by referencing: www.mendocinocounty.org/community/mental-health-oversight-committee



Mendocino County Behavioral Health and Recovery Services
Behavioral Health Advisory Board General Ledger
FY 18/19
March 12, 2019

ORG	OBJ	ACCOUNT DESCRIPTION	YR/PER/INL	EFF DATE	AMOUNT	INVOICE #	CHECK #	VENDOR NAME	COMMENT
MHB	862080	FOOD	2019/02/000182	08/09/2018	193.92	072118	4287751	SAFEWAY	ACCT 85006
MHB	862080	FOOD	2019/03/000081	09/07/2018	92.49	85006 081818	4289348	SAFEWAY	ACCT 85006
MHB	862080	FOOD	2019/05/000045	11/01/2018	152.62	101318	4293037	SAFEWAY	ACCT 85006
MHB	862080	FOOD	2019/06/000717	12/20/2018	125.02	111018	4296088	SAFEWAY	85006
MHB	862080	FOOD	2019/07/000135	01/04/2019	84.01	120818	4296551	SAFEWAY	ACCT 85006
FOOD Total					\$648.06				
MHB	862150	MEMBERSHIPS	2019/07/001413	1/25/2019	\$600.00	DUES 18/19	4297612	CALBHB/C	J. MILLER ANNUAL DUES FY18
MEMBERSHIPS TOTAL					\$600.00				
MHB	862170	OFFICE EXPENSE	2019/02/000228	08/09/2018	111.61	1144338	4287560	FISHMAN SUPPLY COMP	
MHB	862170	OFFICE EXPENSE	2019/03/000545	09/17/2018	89.99			AMZN MKTP 59180	AUG P-CARD
MHB	862170	OFFICE EXPENSE	2019/03/000935	09/27/2018	39.03	1151382	4290738	FISHMAN SUPPLY COMP	
MHB	862170	OFFICE EXPENSE	2019/04/001205	10/26/2018	7.99				1Q 1819 USE TAX PCARD AUGUST
MHB	862170	OFFICE EXPENSE	2019/06/000646	12/17/2018	4.91			WALMART.CO 83830	
MHB	862170	OFFICE EXPENSE	2019/06/000719	12/20/2018	39.03	1165480	4295760	FISHMAN SUPPLY COMP	
MHB	862170	OFFICE EXPENSE	2019/08/000789	02/22/2019	23.70	1174668	4299304	FISHMAN SUPPLY COMP	
MHB	862170	OFFICE EXPENSE	2019/09/000167	03/07/2019	39.03	1176969	4300103	FISHMAN SUPPLY COMP	
MHB	862170	OFFICE EXPENSE	2019/09/000167	03/07/2019	-5.53	1176293	4300103	FISHMAN SUPPLY COMP	
OFFICE EXPENSE Total					\$349.76				
RNTS & LEASES BLD GRD Total					\$0.00				
MHB	862250	TRNSPRATION & TRAVEL	2019/03/000152	09/07/2018	87.86	8/16/18	4289263	MCGOURTY JAN	LOCAL 8/16/18
MHB	862250	TRNSPRATION & TRAVEL	2019/03/000689	09/20/2018	70.84	8/14/18	4290382	MARTINEZ MARTIN D	LOCAL 8/14/18
MHB	862250	TRNSPRATION & TRAVEL	2019/03/000689	09/20/2018	41.42	8/15/18	4290554	STRACHAN EMILY	LOCAL 8/15/18
MHB	862250	TRNSPRATION & TRAVEL	2019/04/000470	10/12/2018	68.67	9/13/18	4291742	STRACHAN EMILY	LOCAL 9/13/18
MHB	862250	TRNSPRATION & TRAVEL	2019/04/001023	10/25/2018	46.87	10/17/18	4292503	MARTINEZ MARTIN D	LOCAL 10/17/18
MHB	862250	TRNSPRATION & TRAVEL	2019/05/000938	11/29/2018	44.14	10/17/18	4294070	BEHRINGER FLUNDA	LOCAL 10/17/18
MHB	862250	TRNSPRATION & TRAVEL	2019/05/000938	11/29/2018	44.14	10/17/18A	4294070	BEHRINGER FLUNDA	LOCAL 10/17/18A
MHB	862250	TRNSPRATION & TRAVEL	2019/05/000938	11/29/2018	26.71	11/14/18	4294070	BEHRINGER FLUNDA	LOCAL 11/14/18
MHB	862250	TRNSPRATION & TRAVEL	2019/05/000938	11/29/2018	26.71	11/14/18A	4294070	BEHRINGER FLUNDA	LOCAL 11/14/18A
MHB	862250	TRNSPRATION & TRAVEL	2019/05/000938	11/29/2018	20.71	11/14/18	4294337	MARTINEZ MARTIN D	LOCAL 11/14 - 11/1
MHB	862250	TRNSPRATION & TRAVEL	2019/06/000040	12/06/2018	33.79	11/14/18	4294770	MCGOURTY JAN	LOCAL 11/14/18
MHB	862250	TRNSPRATION & TRAVEL	2019/06/000040	12/06/2018	58.31	10/17/18	4294770	MCGOURTY JAN	LOCAL 10/17/18
MHB	862250	TRNSPRATION & TRAVEL	2019/06/000040	12/06/2018	43.60	11/14/18	4294892	STRACHAN EMILY	LOCAL
MHB	862250	TRNSPRATION & TRAVEL	2019/09/000167	03/07/2019	37.70	2/20/2019	4300017	BEHRINGER FLUNDA	LOCAL 2/20/2019
TRNSPRATION & TRAVEL Total					\$651.47				
MHB	862253	TRAVEL & TRSP OUT OF COUNTY	2019/03/000310	09/13/2018	238.47	7/26/18	4289573	MCGOURTY JAN	SACRAMENTO 7/26/18
TRAVEL & TRSP OUT OF COUNTY Total					\$238.47				
Grand Total					\$2,487.76				

Summary of Budget for FY 18/19

OBJ	ACCOUNT DESCRIPTION	Budget Amount	YTD Exp	Remaining Budget
862080	Food	1,800.00	648.06	1,151.94
862150	Memberships	600.00	600.00	0.00
862170	Office Expense	500.00	349.76	150.24
862210	Rents & Leases Bld	30.00	0.00	30.00
862250	In County Travel	5,800.00	651.47	5,148.53
862253	Out of County Travel	2,770.00	238.47	2,531.53
Total Budget		\$11,500.00	\$2,487.76	\$9,012.24

Behavioral Health Advisory Board Director's Report

March, 2019

1. Board of Supervisors:

a) Recently passed items or presentations:

i) Mental Health:

- Discussion and Possible Action Regarding Presentation of Behavioral Health Advisory Board 2018 Annual Report
- Discussion and Possible Action Including Acceptance of Presentation Regarding the Current Provision of Mental Health Services in Mendocino County
- Discussion and Possible Action Including Acceptance of Presentation on the National Stepping Up Initiative Focused on Reducing the Number of People with Mental Illness in Jails

ii) Substance Use Disorders Treatment:

- None

b) Future BOS items or presentations:

i) Mental Health:

- None

ii) Substance Use Disorders Treatment:

- None

2. Staffing Updates:

December:

a) New Hires:

Mental Health: Secretary

Substance Use Disorders Treatment: 0

b) Promotions:

Mental Health: 0

Substance Use Disorders Treatment: 0

c) Departures:

Mental Health: Program Administrator – Extra Help

Substance Use Disorders Treatment: 0

3. Audits/Site Reviews:

- a) Date occurred and report out of findings:
 - DHCS Triennial – waiting for report
- b) Upcoming/scheduled:
 - EQRO – September 10 – 11, 2019

4. Grievances/Appeals:

- a) Grievances: 5
- b) Second Opinion: 0
- c) Change of Provider: 4
- d) Provider Appeals: 0
- e) Client Appeals: 0

5. Meetings of interest:

- a) MHSA Forum & Quality Improvement Committee Joint Meeting:
March 28, 2019; 5 pm - 7 pm, Yuki Trails, 23000 Henderson Road, Covelo, CA 95428.
Video conferenced to Mendocino Coast Hospitality Center, 101 N. Franklin St., Fort
Bragg, CA 95437

6. Grant opportunities:

- a) None at this time.

7. Significant projects/brief status:

- a) Assisted Outpatient Treatment (AOT): AB 1421/Laura's Law.
Melinda Driggers, AOT Coordinator, is accepting and triaging referrals:
 - Referrals to Date: 47
 - Did not meet AOT Criteria: 43
 - Currently in Investigation/Screening/Referral: 3
 - Settlement Agreement/Full AOT: 1
 - Other: 0

8. Educational opportunities/ Information:

- a) MHSA Forum & Quality Improvement Committee Joint Meeting:
March 28, 2019; 5 pm - 7 pm, Yuki Trails, 23000 Henderson Road, Covelo, CA 95428.
Video conferenced to Mendocino Coast Hospitality Center, 101 N. Franklin St., Fort
Bragg, CA 95437.
- b) SafeTALK (suicide prevention training):

March 12, 2019; 1 pm - 4 pm. Harwood Hall, Laytonville Healthy Start Family Resource Center 44400 Willis Ave., Laytonville, CA 95454.

- c) Crisis Intervention Team Training (Three days):
April 3rd -5th, 2019; 8 am - 5 pm, Consolidated Tribal Health Project, 6991 N. State Street, Redwood Valley, CA 95490 (For Law Enforcement, First Responders, and Behavioral Health Providers).

9. Mental Health Services Act (MHSA):

- a) MHSA Forum & Quality Improvement Committee Joint Meeting:
March 28, 2019; 5 pm - 7 pm, Yuki Trails, 23000 Henderson Road, Covelo, CA 95428. Video conferenced to Mendocino Coast Hospitality Center, 101 N. Franklin St., Fort Bragg, CA 95437.

10. Lanterman Petris Short Conservatorships (LPS):

- a) Number of individuals on LPS Conservatorships = 60

11. Substance Use Disorder Treatment Services:

- a) Number of Substance Use Disorder Treatment Clients Served in January, 2019
- Total number of clients served = 89
 - Total number of services provided = 594
 - Fort Bragg: 14 clients served for a total of 47 services provided
 - Ukiah: 68 clients served for a total of 510 services provided
 - Willits: 7 clients served for a total of 37 services provided

12. Contracts:

- a) None.

13. Capital Facility Projects:

- a) Orchard Project
- Aka: SB 82 Wellness Grant, Crisis Residential Treatment, Crisis Center
 - Agency: Redwood Community Services
 - Purpose: One stop crisis campus to include Crisis Residential Treatment
 - Status: Property had been purchased
 - Status Update: Extension granted for use of funds through 2021.
 - Next steps: Development for use
 - Funding: SB82 Grant
 - Possible Funding Options: California Development Block Grant (County CDBG in May) and Measure B funding (pending RFP process)

b) Willow Terrace Project

- Aka: MHSA Housing, Gobbi Street
- Agency: Rural Community Housing Development Corporation
- Purpose: 38 unit apartment complex
- Status: Construction is going well, Referral processes are being finalized, and preliminary FSP referral candidates are being discussed.
- Funding: MHSA Housing, Affordable Housing Program, and California Tax Credit
- Ground breaking ceremony was held on March 29, 2018
- Grand Opening planned for April 19

Behavioral Health Recovery Services
SUDT FY 2018-2019 Budget Summary
Year to Date as of **February 28, 2019**

			EXPENDITURES					REVENUE						
	Program	FY 18/19 Approved Budget	Salaries & Benefits	Services and Supplies	Other Charges	Fixed Assets	Operating Transfers	Total Expenditures	SAPT Block Grant and FDMC	2011 Realign	Medi-Cal FFP	Other	Total Revenue	Total Net Cost
1	SUDT Overhead	0		655				655				85,555	85,555	(84,900)
2	County Wide Services	90,481		19,155				19,155					0	19,155
3	Drug Court Services	(935)	104,949	1,973				106,922		76,172			76,172	30,750
4	Ukiah Adult Treatment Services	(54,203)	272,488	18,720			(2,678)	288,530		12,451		52,670	65,121	223,410
	Women In Need of Drug Free													
5	Opportunities	425	74,242	2,690				76,932		79,295			79,295	(2,362)
6	Family Drug Court	(995)	158,443	3,767				162,210				812	812	161,398
8	Friday Night Live	(213)	3,131	1,144				4,276					0	4,276
9	Willits Adult Services	(397)	54,114	1,244				55,358					0	55,358
10	Fort Bragg Adult Services	7,858	104,682	31,436				136,117				875	875	135,242
11	Administration	(22,347)	164,035	116,228				280,263	8,316			1,208	9,523	270,740
12	Adolescent Services	(22,056)	166,529	2,978			(16,470)	153,037				4,525	4,525	148,512
13	Prevention Services	(18,146)	68,837	19,956			(477)	88,316				9,843	9,843	78,473
a	Total YTD Expenditures & Revenue		1,171,451	219,291	0	0	(19,625)	1,371,772	8,316	167,917	0	155,488	331,721	1,040,051
b	FY 2018-2019 Adjusted Budget	(20,528)	2,547,909	557,520	70,000	0	(604,587)	2,570,842	1,274,472	635,393	20,000	661,235	2,591,100	(20,258)
c	Variance		1,376,458	338,229	70,000	0	(584,962)	1,199,726	1,266,156	467,476	20,000	505,747	2,259,379	

Behavioral Health Recovery Services

	Program	FY 18/19 Approved Budget	Salaries & Benefits	Services & Supplies	Other Charges	Fixed Assets	Operating Transfers	Total Expenditures	Revenue Prop 63	Total Net Cost
1	Community Services & Support	392,999		136,046			1,631,427	1,767,473	1,545,610	221,863
2	Prevention & Early Intervention	316,367		165,187			93,260	258,447	373,927	(115,480)
3	Innovation	1,271,493		22,898				22,898	98,402	(75,504)
4	Workforce Education & Training	150,000		12,531				12,531		12,531
5	Capital Facilities & Tech Needs	175,000		84,258				84,258		84,258
a	Total YTD Expenditures & Revenue		-	420,919	-	-	1,724,688	2,145,607	2,017,939	127,668
b	FY 2018-2019 Approved Budget	2,305,859	0	3,027,085	0	0	3,961,161	6,988,246	4,682,837	2,305,409
c	Variance		-	2,606,166	-	-	2,236,473	4,842,639	2,664,898	2,177,741

* Prudent Reserve Balance

* WIC Section 5847 (a)(7) - Establishment & maintenance of a prudent reserve to ensure the county continues to be able to serve during years in which revenues for the Mental Health Services Fund are below recent averages adjusted by changes in the state population and the California Consumer Price Index.

Behavioral Health Recovery Services
Mental Health FY 2018-2019 Budget Summary
Year to Date as of **February 28, 2019**

		Program	FY 18/19 Approved Budget	EXPENDITURES					Total Expenditures	REVENUE					Total Revenue	Total Net Cost
				Salaries & Benefits	Services & Supplies	Other Charges	Fixed Assets	Operating Transfers		2011 Realign	1991 Realign	Medi-Cal FFP	Other			
1		Mental Health (Overhead)	(6,003,392)	8,041	307,997	8,832,179		56,149	9,204,365			7,314,824	3,713,291	11,028,115	(1,823,750)	
2		Administration	910,124	386,940	138,412				525,352				53,206	53,206	472,146	
3		CalWorks	(16,628)	57,581	591				58,173				25,449	25,449	32,724	
4		Mobile Outreach Program	369,193	177,529	6,462				183,991				44,424	44,424	139,567	
5		Adult Services	1,264,455	333,280	20,465	1,038,060			1,391,805				233,033	233,033	1,158,771	
6		Path Grant	0		(68,180)				(68,180)				0	0	(68,180)	
7		SAMHSA Grant	0		33,327				33,327				0	0	33,327	
8		Mental Health Board	11,500		2,417				2,417				0	0	2,417	
9		Business Services	833,729	375,199	11,438.32				386,637				44,345	44,345	342,292	
10		Children Services	0						0				0	0	0	
11		AB109	6,861	72,831	784				73,615	59,050				59,050	14,565	
12		Conservatorship	2,456,866	64,387	44,342	137,774			246,503				0	0	246,503	
13		QA/QI	695,605	359,219	3,145				362,364				907	907	361,457	
a		Total YTD Expenditures & Revenue		1,835,007	501,200	10,008,012	0	56,149	12,400,369	59,050	0	7,314,824	4,114,655	11,488,530	911,840	
b		FY 2018-2019 Adjusted Budget	528,313	4,221,366	2,404,426	17,146,774	0	56,150	23,828,716	5,906,692	4,180,046	8,125,307	5,088,358	23,300,403	528,313	
c		Variance		2,386,359	1,903,226	7,138,762	0	1	11,428,347	5,847,642	4,180,046	810,483	973,703	11,811,873	(383,527)	

ROLES AND DUTIES of the Mendocino County Behavioral Health Board and the Mendocino County Health and Human Services Staff

PURPOSE

The purpose of this and procedure is to ensure the required duties of the Mendocino County Behavioral Health Board (BHAB) and Mendocino County Health and Behavioral Health & Recovery Services (BHRS) staff are being met in accordance with state law and the BHAB bylaws. It is not intended that this Policy limits or eliminate any powers or duties given to the BHAB through any statute or other law.

POLICY

It shall be the policy of the BHAB and the BHRS staff to work in a collaborative way to fulfill each of its roles and duties in order to make the BHAB an efficient and effective Board representing the interests of the community.

REFERENCES

Welfare and Institution Code section 5604.2, 5650, 5848, 18965.

PROCEDURES

Roles and Duties of the BHAB

1. Review and evaluate the community's mental health needs, services, facilities, and special problems;
2. Review any county agreements entered into pursuant to W&I Code Section 5650;
3. Advise the BOS and the mental health director as to any aspect of the mental health program;
4. Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process;
5. Submit an Annual Report to the BOS on the needs and performance of the county's mental health system;
6. Review and make recommendations on applicants for the appointment of a mental health director. The Board shall be included in the selection process prior to the vote of the BOS;
7. Review and comment on the county's performance outcome data and communicate its findings to the California Mental Health Planning Council.
8. Nothing in the this part shall be construed to limit the ability of the BOS to transfer additional duties or authority to the BHAB.

Roles and Duties of the Officers of the BHAB

The Officers of the BHAB are the Chair, Vice-Chair, Secretary and Treasurer. Each position has specific duties as outlined in Article V of the *Bylaws of the Mendocino County Behavioral Health Advisory Board*.

The **Chair** of the BHAB shall:

1. Prepare the agenda for all regular and special meetings of the BHAB and Executive Committee and confirm meeting materials;
2. Preside over all regular and special meetings of the BHAB
3. Call Special meetings of the BHAB when necessary;
4. Be in regular consultation with the Mendocino County Director of Mental Health;
5. Upon recommendation of the Board, appoint committees and committee members;
6. Serve as ex-officio member of all committees;
7. Review correspondence and make recommendations for distribution of correspondence to appropriate Board Members;
8. Contact BHAB members who have missed two consecutive meetings in order to determine continued participation on the board;
9. Finalize and forward the Annual Report to the Behavioral Health & Recovery Services Department; and
10. Present the Annual Report to the BOS.

The **Vice-Chair** of the BHAB shall:

1. Assist the Chair in the execution of his or her office and to act in his/her stead during absence.
2. Monitor and work with the County Executive Office on membership issues; and
3. Perform other duties as requested by the Chairperson.

The **Secretary** of the BHAB shall:

1. Handle correspondence as directed by the Chairperson;
2. Establish a Quorum at regular and special meetings;
3. Prepare and process publicity releases;
4. Maintain the Policies and Procedures Manual in consultation with and assistance of the Behavioral Health & Recovery Services Department staff;
5. Record all public comments at BHAB regular and special meetings.

The **Treasurer** of the BHAB shall:

1. Monitor any and all funds allocated to and expended by the BHAB;
2. Report the BHAB's financial status at each regular meeting; and
3. Submit a timely annual BHAB budget request to the Chairperson and the Mental Health Director in accordance with W&I Code Section 5604.3 and County policy.

Roles and Duties of the BHAB members

In general, all BHAB member must:

1. Serve on at least one committee of the BHAB unless excused for good cause;
2. Remain in good standing as outlined in section IV.5 of the Bylaws;
3. Contact the BHAB Chairperson prior to a meeting if they are unable to attend;
4. Become knowledgeable and stay informed on information relating to the county's mental health needs, services, facilities, and special problems;
5. Attend mandated training on Ethics and the Brown Act;
6. Recruit for prospective members of the BHAB;
7. Mentor new BHAB members on their role and responsibilities as outlined in the BHAB Handbook;
8. When possible, participate in the public hearings required by the Mental Health Services Act (MHSA) and make recommendations; and
9. Upon request by the Chair, contribute to the annual report on the needs and performance of the county's mental health system to the BOS and the California Mental Health Planning Council.

Roles and Duties of Behavioral Health and Recovery Services (BHRS)

In order for the BHAB to fulfill its core purpose of reviewing and evaluating the community's mental health needs, services, facilities, and special problems, BHRS shall:

1. Provide the BHAB with current performance reviews, i.e. audits and survey research, promptly upon receipt from the state;
2. Submit the procedures used to ensure citizen and professional involvement in all stages of the planning process to the Board for review and approval prior to implementation;
3. Track the BHAB's Annual Report and advise the board when a report is coming due;
4. Provide the Board with performance outcome data and facilitate the communication of the Board's comments to the state planning body;
5. Routinely provide the Board with budget information, contracts, and relevant state information notices and letters.

Mendocino County: Evaluation of Services, Barriers to Access, and Unmet Needs

Below we ask a series of questions about the above services in Mendocino County regardless of fund source. We ask whether there are barriers to service access, unmet needs, or lack of continued or sustainable funding for a particular service or program.

* Required

1) Please indicate (X) any service areas for which your county has identified that persons are substantially underserved or experience substantial unmet BH needs.

	Child	TAY (age 16-25)	Adult	Older Adult
Pre-crisis and crisis services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication education & management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Twenty-four-hour treatment services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rehabilitation and support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vocational services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the major barriers to BH service access for persons who are in need of these services? Indicate any reasons; mark as many as apply for each age group.

	Child	Tay (age 16-25)	Adult	Older Adult
Lack of program funding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of specialized prof. experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of BH workforce/providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clients dispersed outlying areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation problems (bus, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of available appointment times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fear of government involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Linguistic needs (translation, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Culterally relevant needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you checked, other above, please specify.

Your answer



4. Please indicate (X) whether any of the following services are funded with temporary (one-time, time-limited) funding for which you are seeking a sustainable fund source to continue services. *

	Child	TAY (age 16-25)	Adult	Older Adult
Pre-crisis and crisis services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication education & management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Case management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Twenty-four-hour treatment services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rehabilitation and support services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vocational services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. If you could have one new program or facility or resource within the next three years, what would be your highest priority need? Please limit your response to 25 words or less.

Your answer

MHSA Components

The CSS, PEI, and INN components are funded through ongoing revenue into the MHSA fund. Per provisions of the MHSA, the Workforce Education and Training, Capital Facilities, and Technological Needs components were initially funded up front in the early years and are not currently actively funded through MHSA revenues. Although counties can transfer some of their CSS funds for these purposes each year, essentially, the availability of that upfront funding for Workforce Education and Training, Capital Facilities, and Technological Needs ended on June 30, 2018.

Is there a still need for any of these three components in your county?

☐ Yes

☐ No

If yes, please rank the following priority order of need, #1 being highest.

	1	2	3
Workforce Education and Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Capital Facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technological Needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Optional: In 25 words or less, please specify what those needs are.

Your answer

7. Do you have a particularly successful program funded by CSS, Innovation, or PEI that you would like to share with us?

☐ Yes

☐ No

If yes, please describe briefly (maximum one paragraph, 150 words or less)

Your answer

SUBMIT

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