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MENDOCINO COUNTY BEHAVIORAL HEALTH ADVISORY BOARD

AGENDA

December 21, 2016 from 10:00 AM to 2:00 PM County Administration Office Conference Room C 501 Low Gap Road, Ukiah Chairperson
John Wetzler
Vice Chair
Vacant
Secretary
Dina Ortiz
Treasurer
Kate Gaston
BOS Supervisor
John McCowen
BOS Supervisor
Alternate Dan Hamburg

	SE GORNY	2ND DISTRICT: CATHY HARPE	3 RD DISTRICT: MARGIE HANDLEY	4 TH DISTRICT EMILY STRACH	
Jan M	IcGourty	DINA ORTIZ	Maureen O'Sullivan	JILL McCaughn	
Lois I	LOCKART	KATE GASTON	VACANT	TAMMY LOWE	ROGER SCHWARTZ
$\boxtimes \mathbf{R}$	egular Meeting	g	Special Meeting	Stand	ing Committee Meeting
	All	Agenda Items a	re Subject to Discus	sion and/or Ac	tion
		Agenda Ite	m / Description		Action
Item 1	Open Session, Call to Order, and Roll Call, Quorum Notice, Agenda Changes: • Meeting called to order by Chair Wetzler at 10:05 am • Roll call read by Member Ortiz • Chair Wetzler announced quorum present • Mission Statement read by Member Schwartz • Members present: Harpe, Gorny, Ortiz, Strachan, McGourty, Pekin, Wetzler, Gaston, Lockart, Handley, O'Sullivan, Schwartz, Lowe and Supervisor Hamburg. Mendocino County Behavioral Health Advisory Board				
	delivery of	ommitted to consu quality care with	Statement: mers, their families a the goals of recovery, or individuals to meet atial."	human	
Item 2	BHAB Meet Handout		November 16, 2016 I	Up Go M 10 BI is BI No	pard Action: con motion by Member corny and seconded by ember Ortiz with a vote of Yay and 1 Abstaining by HAB members present: It ordered to approve the HAB minutes from the evember 16, 2016 meeting written.

Item 3	Treasurer and Secretary Reports - Discussion and Action	Board Action: Board accepted treasurer	
	Treasurer Report:	report.	
	A. BHAB Expense Report - Handout	This topic will be agenized	
	a. Treasurer Gaston announced the California	for January 23, 2017	
	Behavioral Health Boards and Commissions	meeting.	
	(CALBHBC) Meeting in April will be electing new	meeting.	
	representatives. She recommends this board send 2 or 3 members to attend the meeting.		
	Secretary Report:		
	A. Communications:		
	a. None at this time.		
Item 4	Public Comment - Statement to be read by Vice Chair:		
	Public Comment Statement read by Member Schwartz.		
	Citizen and Community comments and questions regarding Mental Health Services in the County are welcomed and encouraged and are one of the mandated functions of the Behavioral Health Advisory Board. Comments will be limited to three minutes or longer, at the discretion of the Chair. Speakers do not have to identify themselves.		
	Members of the public wishing to make comments to the Mendocino County Behavioral Health Advisory Board will be recognized at this time. Public comment is also requested at each agenda item particular to that agenda subject matter.		
	Board members may only "briefly respond" to public comments.		
	Record of Public Comment may be documented by the Behavioral Health Advisory Board Secretary and added as an addendum to the minutes.		
	Dr. J Holden spoke about the program currently for Competency Restoration at the Jail for people with		
	misdemeanor charges. He also commented regarding the new Competency Restoration program the State and County are working out a contract for that will include people with felony charges to participate. The program is called The Mendo Method.		
Item 5	Report from Chair Wetzler - A. Report from the Chair - a. Current Events- Discussion on the Stepping Up	E	

- Program, there will be a meeting January 18 & 19th in Sacramento. A team from Mendocino County will be attending; the team will include a representative from the Sheriff's Office, Behavioral Health, HHSA Administration Office, Probation Office, RQMC and BHAB. BHAB representative will be Jan McGourty.
- b. A revised and an alternate BHAB schedule was presented, one kept the January Meeting on the 3rd Wednesday (January 18th) and having a second joint meeting January 23rd with BOS, the alternate schedule moved the regular meeting to January 23rd to combine the regular and joint meetings.
 - i. There was some discussion to the merits of the schedules. Acting Administrative Secretary Peckham explained the reasoning for each of the schedules.
- c. BOS Joint Meeting (Jan. 23rd) for Member Discussion Member Schwartz brought up having a prior discussion at the November 16th meeting of having a discussion with BOS to establish topics to discuss.
- d. RCHDC Status Report Chair Wetzler feels the status of the housing project has been a bit stalled. He asked Supervisor Hamburg his opinion.
 - i. Supervisor Hamburg stated that there has been no report from RCHDC for some time. The last they heard was that they found some promising property it Willits. Fort Bragg has been pretty much eliminated due to water hook up issues.
 - ii. Member Gaston commented that she hasn't seen a lot of enthusiasm for the project from the BOS. She is concerned that the project will slide away.
- iii. Supervisor Hamburg commented that the BOS takes this very seriously and supports the project.
- iv. Discussion on why the project has not moved forward; Director Miller explained there are tax incentives for the housing project. The county has a MOU with RCHDC, Director Moss Chandler and other county staff has met with RCHDC to look at properties. They have discussed what the barriers are for the different properties. After the discussion of where the highest population of homeless are (Ukiah has the highest homeless population in the county), the plan is to go back to BOS in January with information.
- e. Chair Wetzler announced his retirement from the

Board Action:

With a motion from Member Gaston and seconded by Member Schwartz and an unanimous yay vote from members present; the BHAB Schedule for 2017 with the January meeting being moved to Monday the 23rd for a joint meeting with BOS is approved.

Formal announcement of

	board as of January 31, 2017. He expressed how important his time on the board has been to him. He wants to encourage the board to keep membership continuous and be proactive. f. Letter to Board of Supervisors, County Executive Office, and Behavioral Health Director regarding Mental Health Services Act Housing Program – After some discussion the board the decided that Member Ortiz would draft a letter to the BOS regarding the concerns BHAB has for the housing project. g. Site Visits to Nevada and Sonoma Counties Crisis Stabilization Units (CSU)- Chair Wetzler contacted Nevada County Behavioral Health CSU to see about a visit by BHAB members and BHRS Staff. They were receptive to a visit so a date will need to be selected. Acting Administrative Secretary Peckham has attempted to contact Sonoma County Behavioral Health CSU, no response back yet. She will continue to try and contact them.	Chair Wetzler's retirement from BHAB as of January 31, 2017. BHAB Secretary Ortiz will draft a letter to BOS regarding the housing project.
Item 6	Director's Report - Jenine Miller, Psy.D., Behavioral Health Director: Handout	÷
	 A. Director Report - Jenine Miller, BHRS Director; a. Fort Bragg Substance Use Disorders Treatment (SUDT) – SUDT does currently have a waiting list of 15 people, there are now 2 counselors on the coast. Both are working with the maximum number of clients. Director Miller will be looking at how to expand coverage. She will be looking at if it is possible to get some SUDT services in the South Coast area. b. Board and care facilities – Discussion of the different kinds of facilities and the services Medi- Cal will allow the facilities to bill for. c. There is a difference in what Medi-Cal considers acute care and what psychiatrists consider acute care. 	
	 d. Question regarding what the issues with the Humboldt County CSU are having. i. Part of the problem is that Medi-Cal won't pay for services; the county has to use realignment dollars at a high cost per day. e. Request from Member Strachan - she would like to see a matrix of how the billing works. i. Director Miller will see about putting something together, but sometimes there are things you are not aware of and will have to 	

be figured out after the fact.

- f. Discussion of which facilities the county has contracted with.
 - i. At this time the county is paying a patch rate of \$130 to \$300 per day for each client. The county has a few that are in the \$60 to \$90 range but can go up to \$800 or more a day.
- g. Discussion of "buying beds". The county used to buy beds, so they would be available whenever they would be needed. The beds would have to be paid for whether they were used or not. Sometimes when the county would call for the bed only to find out they had filled the bed with a client from another county. The fees for the time the bed was unavailable would have to be reimbursed.
- h. Question How many days for an average stay in a facility would be needed?
 - i. Director Miller stated that she could come up with some numbers, but will need to look into it.
- j. Discussion of at the federal level some possible changes for IMD facilities. If those purposed changes happen it would open up many more opportunities.
- k. Question regarding emergency room billing for MH clients, who pays for those visits?
 - i. The county doesn't pay for ER visits. The hospitals can bill Medi-Cal or private insurance or will assist clients to apply for Medi-Cal.
- 1. Discussion of Site visits to Nevada and Sonoma Counties.
 - Site Visits to Out-of-County Crisis
 Stabilization Units Acting Administrative
 Secretary will be getting an e-mail out to
 regarding a site visit for Nevada County nd
 follow up with Sonoma County
- m. Wellness Grants The County has 2 grants;
 - i. Mobile Outreach Preventive Services (MOPS) program which targets Round Valley, North County areas, South Coast areas and Anderson Valley that don't have local services. The County is looking into hiring a 2nd team to work primarily on the South Coast.
 - ii. Crisis Residential Treatment Program RQMC will be going forward with purchasing property for a crisis residential treatment program. There is \$500, 000 funding available. There will be more information

available in January.

- n. Member Ortiz requested that Director Miller include the cost of Conservatorships on the Director's Report.
- o. Director Miller introduced Charlotte Scott, she is the County Counsel attorney that represents Behavioral Health.
- B. MHSA Report Karen Lovato, Acting MH Deputy Director;
 - a. Discussion on the MHSA Innovation Plan Approval for Covelo.
 - b. Question Did you talk to different Native American tribes?
 - i. Only Covelo 1st Tribe had input. The plan was presented to the Covelo Tribal Counsel.
 - c. Question is the project sustainable?
 - d. This will be a 3 year project with approximately \$300,000 per year. There will be opportunities to request adjustment of the funding.
 - e. There were several requests for clarification and corrections of typos that were brought up by BHAB members.
 - i. Acting MH Deputy Director Lovato will be following up to make any corrections as needed. She requested that anyone that found typos or items that need clarification to please send the information to her.
 - f. How would people know to come to the Center in Covelo?
 - i. Acting MH Deputy Director Lovato stated that that will be part of getting the education to the public out. The premise is that the providers would be local, whether they are natural or conventional healers and clients would not need to go out of the community to get services.
 - g. Acting MH Deputy Director Lovato will let BHAB know when the public presentation will be made to the State so if any members would like they can attend.
 - h. Question What are the suicide rates for Covelo?
 - i. The numbers are not available at this time but acting MH Deputy Director Lovato will look into getting accurate numbers.
 - j. BHAB Members voted to accept the Innovation Plan for Covelo with typo corrections. They will write a letter of support for the project.

Board Action: Motion to approve the Innovation Plan for Covelo with grammatical corrections, suicide and ethnic population data added. Motion made by Member McGourty and seconded by Member Strachan; with a unanimous Yay vote of members present, motion passed.

C. AOT Update Report – Karen Lovato, Acting MH Deputy Director and Will Riley, AOT Coordinator: a. AOT has had 18 referrals to date. b. Discussion of how the program works. AOT Coordinator Riley tracks client progress and contact them weekly. The contact maybe checking with providers to see if the client is engaged with the program. c. Question - Has the county approached a settlement with any of the clients: Not at this time. d. 4 to 5 of the participating clients are homeless; they tend to go in and out of homelessness. e. Question - Is anyone in the county looking into getting grants for homelessness? HHSA Director Moss Chandler stated that the County is currently looking at 4 different grants through the State. ii. BHRS and ROMC are working together to put together a housing project to purchase a house for AOT clients. There is something in the works. f. Member Gaston asked to that the acronyms used be explained. g. Question - Is there a clinician working with AOT? i. Dan Anderson and Bonnie Anderson are working with AOT clients. D. Revenue and Expenditure Reports - BHRS Director Miller a. No questions at this time regarding Fiscal Reports. RQMC Data and Updates by Written Report: Handout

Item 7

- A. Redwood Quality Management Company Tim Schraeder, MFT - Chief Executive Officer
 - a. Follow-up on Capacity Issues RQMC is continuing to cover any capacity issues that remain.
 - b. Assertive Outreach to Mental Health Court Graduates - RQMC follows up with graduates and offers support to clients that need/want it to continue moving forward.
 - c. Chandra data update review of report.
 - Request to include how many homeless on the data reports.
 - d. Discussion of how the determination of which facility a client is placed in.
 - Part of the determining factors for placement

- are insurance, medical health issues, gender, age and whether the facility has an open bed.
- ii. RQMC doesn't think they are having a huge struggle getting clients placed.
- e. Question If there was a Crisis Stabilization Unit (CSU) in the county would it solve the problem?
 - i. It would help but it would not take minors.
- f. Discussion of Mendocino County clients being placed in and by other counties.
- g. RQMC keeps crisis cases open for up to 60 days after a client is discharged and do follow up to make sure clients get the services needed.
 - When discharged from hospitals RQMC will transport clients back home to Mendocino County.
- h. Question What are the costs of placement?
 - It depends on what insurance the client has and will vary from client to client depending on needs and facility.
- i. Question Who decides what hospital clients go to?
- j. Age will define which hospitals can be used. Then the crisis staff will start calling hospitals that can be used, if a hospital expressed interest in taking the client information packets are sent. Once the hospital reviews the client information they will respond as to whether they will accept the client.
- k. Question How are the staffing capacity issues?
- 1. RQMC has hired new staff for the coast, but still has a few positions posted.
- m. RQMC feels the staffing is good and stable, at the same time crisis has been very busy. They get a lot of walk-ins and people that want to hang out.
- n. Since July 1, 2016 RQMC has seen over 700 new clients. Has done training, and outreach projects. Is expanding on the coast.
- o. RQMC CEO Schraeder reported that Behavioral Court is going really well, RQMC is providing services for the referred clients before and after graduation.
- p. Gibson House is going well and they need another house like it. RQMC is working on finding another house. Staff lives in the house so there is someone available day and night.
- q. HHSA Director Moss Chandler discussed how the housing situation is going and the avenues they are pursuing.
- r. Chair Wetzler requested an organization chart at the next meeting.

	12:00 to 12:30 LUNCH BREAK	Adjourned 12:24 Reconvened 12:55
Item 8	Alyson Blair: Redwood Creek Report -	
	 A. Description of Redwood Creek (RC) Residential Facility with 4 independent apartments on the property also. a. RC is a board and care facility. Currently they have 16 clients and 4 clients living independently in the apartments. The facility is for clients recently released from hospitalization. The primary focus is on independent living, individual counseling along with some group activities and socialization. 	
	Clients spend 3 days a week with Manzanita. b. Question - Does OMG own Redwood Creek (RC)? i. RC is not licensed with OMG but is affiliated with Willow Glen in Yuba City. Tom Ortner founded Willow Glen but left it in Jeff Payne's care. c. Question - Are you at full capacity? Do you have a	
	 waiting list? i. Yes, they are at full capacity. No, they do not have a waiting list. d. Question - Why are you no longer accepting Medi-Cal? i. Ms. Blair wasn't sure why they are no longer accepting Medi-Cal. ii. Director Miller stated all the clients at RC are Medi-Cal; the county covers the costs with 	
	realignment funds. e. Question - How many staff do you have? i. There is 9 staff currently; to be fully staffed they need 11. Ms. Blair is trying to hire to fill the vacant positions. f. Director Miller stated the LPS placement team works with Ms. Blair to fill any vacancies with Mendocino County clients. The County keeps a wait list of clients for RC. g. Discussion of what would be required if the	
	County owned RC and what it would take to get it certified to bill Medi-Cal. i. Director Miller clarified how the costs are paid, the facility get about 90% of the client's SSI and the County pays a "patch" of \$130 per day per client. The client gets to keep \$30 to \$50 of their SSI check to use for Personal Incidental (PI) use (client can use to purchase extra things they need/want). The client receives housing, 3 meals plus 3 snacks a day	

- with 24/7 care/supervision.
- ii. The SSI checks go straight to the facility; the only time the County gets the SSI is if it is more than the cost of the facility.
- h. Question What is the longest stay for a client? What is the age range for clients?
- i. Ms. Blair stated the longest stay she was aware of was 4 to 5 years. Ages of clients at this time range from 26 to 65.
- j. Discussion of the County cost for the services the clients receive.
- k. Director Miller stated that we pay less for the exact same services at other facilities, the rates range from \$60, \$90 to \$130.
- 1. Ms. Blair commented that they have recently changed the dietary requirements to be diabetic friendly and has a local gym that agreed to a \$30 monthly fee for clients that want to work out at the gym. The goal is to get a healthier lifestyle for clients that they can continue outside of the facility.

Item 9 Response to Election Results of AG and AH:

- A. Discussion of the possibility of a new measure to be developed similar to AG and AH.
 - a. Chair Wetzler talked to Sheriff Allman and the sheriff wants to revisit the measure.
 - b. Chair Wetzler and Member McGourty stated they want to have a Special Meeting to discuss a strategic planning meeting to create a vision of what the BHAB wants to do regarding a possible measure for mental health in Mendocino County.
 - c. Some of the ideas and questions discussed were:
 - i. There was a strategic plan done in the past and it should be looked at again before scraping it and starting over.
 - ii. Perhaps have an Ad Hoc Committee instead of the whole board be involved.
 - iii. There should be a Needs Assessment done to find out what the county really needs.
 - iv. There is possibly of 2 other groups that are working on the same thing who are they?
 - v. Should be a study done to see what the costs would be and what is feasible.
 - vi. BHAB should meet with the other groups and work together.
- d. Member Handley commented that 2 different groups had looked at the old Howard Hospital in Willits, the estimated cost to do needed renovations would be about 5 million dollars.

Board Action: With a motion made by Member McGourty and seconded by Member Pekin to hold a Special Meeting January 13, 2017 at the Farm Advisory Building from 1 pm to 3 pm, the motion passed with a unanimous Yay vote by members present.

	 e. HHSA Director Moss Chandler commented she thought that BHAB members should attend the other groups meetings to see where and what they are doing instead of doing the same thing. f. There was a County Health Needs and Assessment done and one of the 5 items that was listed was Mental Health. g. BHAB members voted to hold a Special Meeting January 13, 2017 to discuss and create a vision of what Mental Health should look like for Mendocino 	
	County.	
Item 10	Joint Meeting with Board of Supervisors January 23, 2017 in Ukiah: a. Opportunities and Concerns - Discussion of topics for discussion at the joint meeting with BOS. b. Chair Wetzler suggested that members think about what they want to bring as topics for discussion to the joint meeting. i. Topics to discuss will be on the Special Meeting agenda for January 13, 2017.	Board Action:
Item 11	Behavioral Health Advisory Board 2017 Meeting Schedule and Venues	Board Action:
	a. Discussion and vote as documented in Item 5 above.	
Item 12	Election of New Officers A. Nominating committee: Nominations were opened by Chair Wetzler, previously the Nomination Committee had the following people nominated: • Chairperson - Jan McGourty • Vice Chairperson - Patrick Pekin • Secretary - Dina Ortiz • Treasurer - Cathy Harpe a. As there were no apposing candidates, members voted to accept nominations as presented by the Nomination Committee. Meeting Adjourned 2:08	Board Action: With a motion and unanimous Yay vote by members present it is ordered to elect all nominated members into the positions they were nominated for, Chairperson - Jan McGourty, Vice Chairperson - Patrick Pekin, Secretary - Dina Ortiz, and Treasurer - Cathy Harpe.
	 a. BHAB draft regular meeting minutes – November 16, 2016 b. Treasurer Report c. Tentative 2017 BHAB Schedule d. Director's Report e. Round Valley Innovation Project f. Expenditure Reports g. RQMC Data Dashboard - new format 	

Thank you for your interest in the proceedings of the Mendocino County Behavioral Health Advisory Board.

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) 472-2310 at least five days prior to the meeting.

John Wetzler, BHAB Char

1-23-17

Date

Carolyn Peckham, Acting Administrative Secretary

Date

Addendum A

Public Comments

Submitted by BHAB Secretary Ortiz

Josephine comments

- 1. AG did not past, so the board should have an adhoc committee and taking over Howard Hospital. this should include providing financial aspect. When families have to travel to visit their family member in the hospital, it is very costly because of the travel
- 2. The board needs to make a comment about how other health issues impact mental health, ie medication, diabetics, dementia

<u>Discussion of the Mental Health Innovation Plan</u>

Josephine commented

1. Need to include the percent of Native Americans in Covelo,

Addendum B

A message to outgoing BHAB Chair John Wetzler from his wife.

Growing from Difficulties

Seeking Solutions

Looking beyond personal issues to helping our community

You have devoted much of your energy and ability to the Mental Health Board.

Our County has benefited.

Our family has benefited.

I am grateful for your hard work and persistence.

You have learned and grown.

You have helped our daughter achieve greater stability.

You have earned the respect of many throughout Mendocino County and others you met at state-wide conferences and meetings.

You have engaged members who will carry on the good, hard work of the Mental Health Board.

You will find what draws you now, which projects, the new initiative, exploration of in-County care.

Viva!