



**MENDOCINO COUNTY BEHAVIORAL  
HEALTH ADVISORY BOARD**

**REGULAR MEETING**

**MINUTES**

**February 19, 2020  
10:00 a.m. to 2:00 p.m.**

**Avila Center, Seaside Room  
778 S. Franklin St., Fort Bragg**

**Chairperson**  
Michelle Rich

**Vice Chair**  
Meeka Ferretta

**Secretary**  
Dina Ortiz

**Treasurer**  
Vacant

**BOS Supervisor**  
Carre Brown

<b>1<sup>ST</sup> DISTRICT:</b> DENISE GORNY LOIS LOCKART RICHARD TOWLE	<b>2<sup>ND</sup> DISTRICT:</b> DINA ORTIZ MICHELLE RICH SERGIO FUENTES	<b>3<sup>RD</sup> DISTRICT:</b> MEEKA FERRETTA AMY BUCKINGHAM VACANT	<b>4<sup>TH</sup> DISTRICT:</b> EMILY STRACHAN LYNN FINLEY VACANT	<b>5<sup>TH</sup> DISTRICT:</b> PATRICK PEKIN MARTIN MARTINEZ FLINDA BEHRINGER
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**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."*

<b>Item</b>	<b>Agenda Item / Description</b>	<b>Action</b>
<b>1.</b> 5 minutes	<b>Call to Order, Roll Call &amp; Quorum Notice, Approve Agenda:</b> <ul style="list-style-type: none"> <li>Meeting called to order by Chair Rich at 10:06 AM.</li> <li>Members Present: Ferretta, Finley, Lockart, Martinez, Pekin, Strachan, and Towle.</li> <li>Quorum met.</li> </ul>	Board Action:
<b>2.</b> 5 minutes	<b>Minutes of the January 15, 2020 BHAB Regular Meeting:</b> <i>Review and possible board action.</i> <ul style="list-style-type: none"> <li>Minutes approved as written.</li> <li>Member Martinez expressed he would like to see action items added to the minutes so all follow ups are done.</li> </ul>	Board Action: Motion made by Member Strachan, seconded by Member Lockart to approve the January 15, 2020 minutes as written. Motion passed unanimously.
<b>3.</b> 15 minutes (Maximum)	<b>Public Comments:</b> <i>Members of the public wishing to make comments to the BHAB will be recognized at this time.</i> <ol style="list-style-type: none"> <li>Josephine Silva commented she would like to see an Ad Hoc Committee for a curriculum for the Behavioral Health Training Center. She would like the curriculum to include information for doctors, health care workers, students, etc.</li> <li>Josephine asked the Board if there was any follow up on the SSI legislative proposal.</li> <li>Member Strachan commented that it may be something that the</li> </ol>	

	<p>Board may want to take to the BOS.</p> <p>D. Debra Lane, Compliance and Safety Officer at Redwood Coast Medical Services in Gualala, commented they are going through a difficult time. Their behavioral health department is struggling with staff, they are trying to recruit a psychiatrist from Santa Rosa for at least 1 day a month. There is currently no behavioral health staff to provide services. Update on the helipad.</p>	
<p><b>4.</b> 30 minutes</p>	<p><b>Reports:</b> <i>Discussion and possible board action.</i></p> <p>A. Chair: <i>(Michelle Rich)</i></p> <ol style="list-style-type: none"> <li>I. Chair Rich commented the Board can start tracking action items as needed.</li> <li>II. Chair Rich would like to start a parking lot list to track action items the Board may want to consider at future meetings.</li> </ol> <p>B. Vice Chair: <i>(Meeka Ferretta)</i></p> <ol style="list-style-type: none"> <li>I. Measure B <ol style="list-style-type: none"> <li>a. Vice Chair Ferretta was sworn in by Lili Chavoya.</li> <li>b. Vice Chair Ferretta attended the Measure B Committee meeting as part of the audience held on January 22, 2020.</li> <li>c. She also met with the Measure B Ad Hoc Committee for the Behavioral Health Training Center. <ol style="list-style-type: none"> <li>i. Vice Chair Ferretta reported there is about 3 million dollars in the Measure B Committee account as of right now.</li> <li>ii. The Board of Supervisors (BOS) wants a curriculum for trainings, classes etc. to be offered at the training center.</li> <li>iii. Vice Chair Ferretta suggested the Board make a summary of what trainings are currently facilitated that will be offered at the training center without spending Measure B funds.</li> </ol> </li> </ol> </li> <li>II. Discussion on repairs needed at the training center. <ol style="list-style-type: none"> <li>a. The Behavioral Health Training Center Ad Hoc Committee oversees the remodeling of the training center.</li> <li>b. The Ad Hoc Committee is composed of BHRS Director Miller, Vice Chair Ferretta, Tom Allman, and Mark Mertle. This committee is making the decisions on the remodeling process of the training center. Any renovations done to the building should be for the purpose of making it into a training center.</li> <li>c. The Measure B Committee approved \$250k for the retro fit of the building.</li> <li>d. There will be a report on Phase 1 of the remodeling plans at the next Measure B meeting.</li> <li>e. There are mental health one time funds that will pay for some of the IT equipment for the training center.</li> </ol> </li> <li>III. Member Ferretta commented that it would be a good idea to start bringing Tri folds to Measure B meetings to help the Willits community be informed on how to access mental health services in Mendocino County. Jed Diamond, the new Measure B Chair, wants to make sure the Willits community is informed and wants to make sure they are able to access the information. <ol style="list-style-type: none"> <li>a. The Measure B Committee is constantly letting people know to direct any questions on mental health to the Behavioral Health Advisory Board.</li> </ol> </li> </ol>	<p>Board Action: Chair Rich and Vice Chair Ferretta to look into tracking possibilities for action items.</p>

	<ul style="list-style-type: none"> <li>b. Interviews for a new Measure B Project Manager were held this past Friday, there is an offer going out to one of the candidates.</li> <li>c. There will be one Measure B meeting held in Fort Bragg and Willits later this year, dates have yet to be finalized.</li> </ul> <p>IV. Discussion on how Measure B funds need to be spent, and how the Committee is authorized to spend the money.</p> <ul style="list-style-type: none"> <li>a. Anytime the Measure B Committee comes to an agreement to spend funds, they make a recommendation to the BOS, and the BOS makes the ultimate decision on whether or not to allow the Committee to spend the money.</li> <li>b. There is an Ad Hoc committee to look at a strategic plan for budget purposes in regards to the recommendation from the Kemper Report. The BOS is also wanting a business plan.</li> <li>c. Vice Chair Ferretta stated the board cannot make a business plan without a strategic plan on what needs to be done.</li> <li>d. Nacht &amp; Lewis, the contracted architectural firm are doing a feasibility study to look at the old Howard hospital and Orchard Street to determine costs, and then will issue a recommendation to express their opinion on what should be done.</li> </ul> <p>V. BHRS Director Miller commented the County is working to build a Crisis Residential Treatment (CRT) facility on Orchard Street.</p> <ul style="list-style-type: none"> <li>a. The priority is to have the CRT facility open, licensed, and running by December 2021 since the County needs to meet the deadlines established by the California Health Facilities Financing Authority (CHFFA) in order to not lose the 500k grant money they awarded the County to build this facility.</li> <li>b. It will be a 5 bed facility, but is being built to house 6-8 clients. The County does not want to limit the ability to expand the facility in the future if needed. So they are currently looking to make it a 6-8 bed model but making it to be able to expand up to 10.</li> <li>c. BHRS Director Miller stated that in the monthly auditor report it shows how much is in each category. Public member asked what plans are included in the feasibility study for a Coast facility, who advises the Measure B committee, and how community members from the Coast can advise the Measure B committee. <ul style="list-style-type: none"> <li>i. Community members need to give their input to their district representative.</li> </ul> </li> </ul> <p>VI. Discussion on how the BHAB wants to communicate their recommendations to the Measure B Committee.</p> <p>VII. Member Towle commented there should be 5 minutes allotted to Vice Chair Ferretta at the Measure B Committee meetings, to express concerns, give updates, etc.</p> <ul style="list-style-type: none"> <li>a. BHRS Director Miller explained the Measure B Committee sends a notice to all members prior to the meeting that allows every member to add items to the agenda. They also go around the room at the end of the meetings for anyone that wants to report on something.</li> </ul>	<p>Will add to Goals for 2020 discussion.</p>
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	<p>C. Secretary: <i>(Dina Ortiz)</i></p> <p>I. Absent from today's meeting.</p> <p>D. Treasurer: <i>(Vacant)</i></p> <p>I. Nominations</p> <p>a. Member Towle was nominated and appointed as Treasurer for the Behavioral Health Advisory Board.</p> <p>II. The board agreed to have a Membership committee discussion.</p> <p>a. Member Strachan shared she received an application for the 3<sup>rd</sup> District vacant position. Member Strachan interviewed the candidate, and requested for Member Ortiz and Pekin to also interview the candidate.</p> <p>b. Member Pekin reached out to the candidate but has not heard back yet.</p> <p>c. Discussion on adding additional members to the Membership Committee in the future as this will be Member Pekin's last meeting.</p> <p>d. Vice Chair Ferretta spoke to Supervisor Haschak, and he has not yet approved this candidate.</p> <p>e. The next two candidates need to be consumers in order to meet the minimum percentage requirement.</p> <p>III. Discussion on the District Supervisor endorsing candidates who apply to be on the BHAB. The Board needs to contact the District Supervisor with any candidates who are interested in being a part of the Board prior to moving forward with anything else.</p> <p>IV. John Wetzler shared the process he went through a few years back to be appointed to the BHAB.</p> <p>V. Further discussion on process of recruitment and assigning new board members, and BOS endorsement.</p> <p>VI. Member Towle commented he would like for the BHAB members to have at least 3 minutes at each meeting to give a report out as needed.</p> <p>VII. Victor Aparicio, Point Arena High School Campus Security and Native American liaison, shared that the Manchester and Point Arena communities have a lot of mental health issues that arise from drug addiction, alcohol abuse, etc., and they lack the help their community needs. He stated there are no services being offered at the Reservations in that area. He expressed his appreciation for all the work currently being done, but stated his community is in need of a lot more help, and needs to spread the word.</p> <p>VIII. Josephine commented that the Hispanic community is also not represented enough in Mendocino County.</p>	<p>Motion was made by Member Strachan, seconded by Vice Chair Ferretta to appoint Member Towle as the Treasurer for the BHAB. Motion passed unanimously.</p> <p>Added to parking lot list.</p>
<p><b>5.</b> 15 minutes</p>	<p><b>BHAB Annual Report:</b></p> <p>A. Review and Approve</p> <p>I. Members reviewed the 2019 annual report.</p> <p>a. Page numbers and typos on the report need to be corrected, as well as the Fort Bragg flow chart needs to be updated.</p> <p>b. Discussion on the Data Notebook information on the annual report and whether or not to include it. The Board agreed to</p>	<p>Board Action: Dustin Thompson to send Member Strachan the updated Fort Bragg flow chart.</p>

	<p>include it in the annual report.</p> <p>II. Discussion on how the annual report gets presented to the BOS.</p> <p>a. Member Towle asked for Chair Rich to notify the BHAB when they will be presenting the annual report to the BOS. Jan McGourty and Chair Rich will be presenting the report to the BOS.</p> <p>b. As soon as the report is done, it can go on the BOS agenda, it takes approximately 6 weeks for it to be put on the agenda.</p> <p>III. Discussion on the Fort Bragg City Council and Ted William's request for more detailed data for successful outcomes vs. people served.</p> <p>a. Discussion on success data and factors that contribute to how this is measured.</p>	<p>Motion made by Member Towle, seconded by Member Strachan to approve the 2019 BHAB annual report with the noted corrections. Motion passed unanimously.</p>
<p><b>6.</b> 15 minutes</p>	<p><b>2019/2020 CALBHB/C Invoice:</b> (<i>Membership Renewal</i>)</p> <p>A. Annual membership renewal for the California Association of Local Behavioral Health Boards and Commissions (CALBHB/C) is due; annual membership costs \$600.</p> <p>I. Board members agreed to continue the annual membership.</p>	<p>Board Action: Motion made by Member Finley, seconded by Member Strachan to continue the association with CALBHB/C. Motion passed unanimously.</p>
<p><b>7.</b> 45 minutes</p>	<p><b>Mendocino County Report:</b> <i>Jenine Miller, BHRS Director</i></p> <p>A. Director Report Questions</p> <p>I. BHRS Director Miller stated changes were made to the Director Report. Board members will continue to receive the report in the agenda packet and are welcome to ask any questions on the information provided. The reports will have a different approach as BHRS and RQMC want to provide more information on current services, what their working on, etc.</p> <p>B. Status Update on Current Projects</p> <p>I. BHRS started intensive outpatient treatment for substance abuse in Ukiah, and plan to open in Fort Bragg in the next 4-6 months. It is the first time in years that Mendocino County has offered intensive outpatient substance abuse treatment.</p> <p>a. This is not part of drug court although clients can be court ordered. Clients can do this outpatient treatment if they do not need residential treatment, but need a higher level of care.</p> <p>b. There is now 2 counselors in Fort Bragg, and BHRS is recruiting for a third position.</p> <p>II. Drug diversion program has now also opened in Fort Bragg. This program used to be only offered in Ukiah and Fort Bragg clients that were court ordered into drug diversion had to drive to Ukiah.</p> <p>III. Mr. Aparicio asked the board how drug diversion works for people in the Coast. He does not think there is any type of SUDT services in the South Coast. There are no other services other than Alcohol Anonymous meetings.</p> <p>a. BHRS Director Miller explained BHRS has been recruiting</p>	<p>Board Action:</p>

	<p>for a substance abuse counselor in the South Coast, but have had no luck. The problem is there are hardly any applicants for substance abuse counselors regardless of location.</p> <p>b. BHRS Director Miller commented BHRS gives MHSA funds to different tribes to focus on mental health and substance use so there should be some type of services being offered. She suggested Mr. Aparicio follow up with her to discuss further as she wants to make sure they have the funds for necessary services.</p> <p>c. Member Pekin mentioned Mendocino County does not have its own long term drug treatment facility and how important it is for there to be one in Mendocino County. The closest ones are in San Francisco and Oakland.</p> <p>IV. BHRS is working on the MHSA 3 year plan, BHRS Director Miller stated it will be a formal RFP process.</p> <p>C. Legislative Updates</p> <p>I. BHRS Director Miller gave an overview of the current legislative bills the California Behavioral Health Director’s Association (CBHDA) has been following.</p> <ul style="list-style-type: none"> <li>• AB 5: impacting County contracts, and impacting the county as a whole as to how they can contract out</li> <li>• AB 2112- Youth suicide prevention, CBHDA supports this bill.</li> <li>• AB 2105 – criminal proceedings competency to stand trial</li> <li>• AB 2018- intensive treatment certification, would be change to requirements in 5150 and 5250</li> <li>• AB 1976 – Laura’s Law participation for every county</li> <li>• SB 855: change on parity – would require more parity in health insurance.</li> </ul> <p>D. Prop 56/Whole Person Care</p> <p>I. This is the behavioral health integration incentive grant.</p> <p>II. The Grant is a for a 33 month period beginning 4/1/2020 and ending on December 31 2022.</p> <p>III. The County applied to participate for improved hospital follow up and medication management for beneficiaries for co-occurring diagnosis.</p> <p>IV. Whole person care (WPC) is still going as of right now. WPC is being taken from county structure to a primary care structure, so now it will be part of Partnership Health Plan. As of 12/31/2020 WPC will no longer exist, as there will be a new model to encompass what WPC is.</p> <p>V. Further discussion on the Prop 56 grant and the proposed areas to be funded.</p> <p>VI. All the legislations discussed are pending, they have not been approved.</p> <p>E. Healthier California for All</p> <p>I. The Department of Health Care Services needs to submit a waiver with the federal government to provide certain services to get federal dollars. These are the dollars mental health uses to fund the system. Services provided need to meet specific</p>	<p>BHRS Director Miller to follow up with Mr. Aparicio.</p>
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	<p>criteria. The waivers for both SUDT and mental health are up in addition to several other waivers.</p> <p>II. The Mental health waiver encompasses a lot more than just mental health. The waivers are expiring on October 2020. In the past the State just renews these waivers, but this year the waivers will be revamped to try and enhance the Medi-Cal system in California.</p> <p>III. BHRS Director Miller read off some of the proposed changes and what is being addressed with the new waivers.</p> <p>IV. Discussion on CalAIM behavioral health stakeholder workgroups that are advocating to see Medi-Cal where it is best.</p> <p>V. The waiver is not approved yet, once California decides on the waiver proposal, it gets submitted to Center for Medicaid /Medicare Services, and either they accept or it becomes a back and forth conversation. The Department of Health Care Services cannot move forward until the State approves this plan. If needed, the State will extend the current waiver while they negotiate the new waiver.</p> <p>VI. Enhanced care management: in Lieu of Services discussion.</p> <p>VII. Discussion on Dual SMP, Medi- Medi services.</p> <p>VIII. RQMC is Medicare certified and so is RCS so they can take Medi-Medi clients. County requires Medi-Medi for their providers in order to be able to bill Medi-Cal, so the change would make this a requirement.</p> <p>F. Psychiatric Health Facility (PHF) Education</p> <p>I. Discussion on community concerns on what recommendations are being made to the Measure B Committee, whether the county needs a PHF, and how to fund these facilities.</p> <p>II. Stats on Hospital Usage</p> <p>a. BHRS Director Miller provided crisis stats for Mendocino County for 2018/19 and 2019/20 hospitalizations including: how many people are hospitalized, what hospital the 5150 started at, how many days spent in the hospital on average, and how many beds are needed on average.</p> <ul style="list-style-type: none"> <li>• Ukiah Valley Medical Center: <ul style="list-style-type: none"> <li><u>2018/19:</u></li> <li>Total hospitalized: 408</li> <li>Avg./month: 34</li> <li>Avg. days patient stayed in hospital: 9.1</li> <li>Avg. beds needed per month: 10.3</li> <li><u>2019/20 to date:</u></li> <li>Total hospitalized: 193</li> <li>Avg/month: 32</li> <li>Avg. days patient stayed in hospital: 7.9</li> <li>Avg. beds needed per month: 8.4</li> </ul> </li> <li>• Howard Hospital in Willits: <ul style="list-style-type: none"> <li><u>2018/19:</u></li> <li>Total hospitalized: 106</li> <li>Avg/month: 9</li> <li>Avg. days patient stayed in hospital: 6.7</li> <li>Avg. beds needed per month: 2</li> </ul> </li> </ul>	
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2019/20:

Total hospitalized: 48

Avg/month: 8

Avg. days patient stayed in hospital: 7.7

Avg. beds needed per month: 2

- Coast:

2018/19

Total hospitalized: 116

Avg./month: 9.6

Avg. days patient stayed in hospital: 8.6

Avg. beds needed per month: 2.75

2019/20:

Total hospitalized: 42

Avg./month: 7

Avg. days patient stayed in hospital: 7.9

Avg. beds needed per month: 1.84

- Overall:

2018/19:

Total hospitalized: 630

Avg./month: 52.6

Avg. days patient stayed in hospital: 8.1

Avg. beds needed per month: 15

2019/20:

Total hospitalized: 283

Avg./month: 47

Avg. days patient stayed in hospital: 7.83

Avg. beds needed per month: 12.24

- b. These numbers include clients that are not Mendocino County residents.

III. Discussion on what has influenced the decrease in hospitalizations including the Crisis Respite program.

IV. Josephine asked how a regular person can make a recommendation to their State representative. Discussion on public members making recommendations to State representative and referring to BHRS Director Miller to provide the information and guidelines that the State Representative might not have.

G. CRT Vision/Design Team

I. BHRS Director Miller provided a handout with the vision statement the CRT design team came up with for the CRT facility.

a. BHRS Director Miller recently met for 2 full days with the architectural firm and other Mendocino County staff to start developing the CRT project, feasibility costs, etc.

b. At the CHFFA board meeting on January 30<sup>th</sup>, they accepted a proposal for a new timeline. There are new milestones BHRS needs to meet, otherwise the funds will be lost.

II. CRT vision statement discussion: BHRS Director Miller asked the board for feedback on the vision statement.

a. Discussion on the design of the building to blend into the community, and privacy concerns due to location.



	<ul style="list-style-type: none"> <li>b. A combination of CHFFA funds and Measure B funds will be used to build this facility.</li> <li>c. The CRT is for patients that are non-acute or that are stepping down from hospitalization.</li> <li>d. It can be Medi-Cal funded as long as no more than 16 beds by a single provider.</li> </ul> <p>III. Discussion on St. Helena possibly closing two inpatient units, would impact 21 beds. It is unclear if they will be closing as there have been rumors they might not be closing since it would be a huge loss to all of Northern California.</p> <p style="text-align: center;"><b>Adjourned for lunch: 12:35    Reconvened: 1:01</b></p>	
	<p><b>LUNCH BREAK</b> <b>12:30 to 1:00</b></p>	
<p><b>8.</b> 15 minutes</p>	<p><b>RQMC Report:</b></p> <p>A. Data Dashboard Questions</p> <ul style="list-style-type: none"> <li>I. Dan Anderson from RCS in place of Camille Schraeder today.</li> <li>II. Reviewed data dashboard numbers. <ul style="list-style-type: none"> <li>a. Clients served numbers are increasing, crisis assessments are steady, and hospitalizations are going down.</li> <li>b. Page 4 of the data dashboard provides financial data and a budget summary.</li> <li>c. Discussion on outcomes of clients that received services i.e. whether or not they got re-hospitalized etc., and what is done to measure outcomes and progress.</li> <li>d. Dan explained one of the measures they use is the Adults Needs and Services Assessment (ANSA) intake which asks the client 50 questions and looks at the entire spectrum in regards to their mental health. This assessment is done at intake and then every six months or at discharge. An outcome score is produced each time, and with this score they are able to measure outcome and needs depending on whether it rises or goes down. <ul style="list-style-type: none"> <li>i. Dan provided and reviewed a handout of RCS mental health assessment outcomes.</li> <li>ii. About 67 percent of adult clients that had two ANSA assessments are showing progress, meaning their ASAM score has dropped.</li> </ul> </li> </ul> </li> <li>III. Vice Chair Ferretta expressed her support and appreciation towards RQMC and RCS for all the work they do.</li> <li>IV. BHRS Director Miller mentioned there is always confusion in regards to what population the county serves. It is a small piece of the entire system, since the County only serves those with specialty mental health needs.</li> <li>V. Member Martinez asked what the RQMC vacancy rate is. Dan stated they are fully staffed on medication support services at the moment.</li> <li>VI. Discussion on the California Highway Patrol (CHP) numbers on “Calls from Law Enforcement to Crisis” data on page 4 of the Data Dashboard always being 0 and whether that information is</li> </ul>	

	<p>accurate or not.</p> <p>a. Dan shared RCS meets weekly and monthly with jail staff, and the CHP is always there, so they are aware of this information.</p> <p>B. Status Update on Current Projects</p> <p>I. Discussion on the crisis respite program and the effects it has had, and how the County will benefit from a CRT as well.</p> <p>a. The crisis respite program has been running for about a year, have had over 1,000 bed days. This program functions as diversion for patients in the ER room that do not need to be in the hospital, or if they are discharged and don't have a place to go.</p> <p>b. Brief calculation: average of about a day and a half is how much time patients spend in the ER room waiting for placement.</p> <p>c. The respite can house up to six people, and is staffed 24/7.</p> <p>d. RCS is in conversations with the hospitals to expand medical respite.</p> <p>e. RCS does not use hotels for the crisis respite program, but hotel vouchers are used in other programs.</p> <p>II. Discussion on the differences between the respite program and the CRT, and differences of other guest homes.</p>	
<p><b>9.</b> 60 minutes</p>	<p><b>Duties and Responsibilities:</b></p> <p>A. Goals for 2020</p> <p>I. Due to lack of time, the Board was not able to get to this agenda item.</p> <p>II. Board members agreed to hold a special meeting the first week of March in Willits to review/discuss goals for 2020.</p>	<p>Board Action: Chair Rich and Lili to follow up and coordinate the BHAB Special meeting for the first week of March.</p>
<p><b>10.</b></p>	<p><b>Adjournment:</b> 1:57 PM</p> <p><b>Next meeting:</b> March 18, 2020 – Ukiah and Fort Bragg</p>	<p>Motion made by Member Martinez, seconded by Member Strachan to adjourn the meeting. Motion passed unanimously.</p>

**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.

Michelle Rich

Michelle Rich, BHAB Chair

6/1/20

Date

Lilian Chavoya

Lilian Chavoya, BHRS Acting Administrative Secretary

6/1/20

Date