



**MENDOCINO COUNTY BEHAVIORAL
HEALTH ADVISORY BOARD
REGULAR MEETING**

MINUTES

**September 16, 2020
1:00 p.m. to 3:00 p.m.**

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Richard Towle

BOS Supervisor
Carre Brown

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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."*

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 by Chair Rich at 1:02 PM. Members present: Behringer, Bradley, Eagles, Ferretta, Fuentes, Gorny, Martinez, Towle, and Supervisor Brown. Agenda approved as written. 	Board Action: Motion made by Vice Chair Ferretta, seconded by Member Towle to approve the agenda as written. Motion passed.
2. 5 minutes	Minutes of the August 19, 2020 BHAB Regular Meeting: Review and possible board action. <ul style="list-style-type: none"> Minutes approved as written. 	Board Action: Motion made by Vice Chair Ferretta, seconded by Member Towle to approve the August 19, 2020 BHAB meeting minutes as written. Motion passed.

	<p>county is considering a discount for amount of use in case an agency needs the facility multiple times a week. The Sheriff's department will also pay whenever they need to use the facility. The business plan is still being developed so nothing is final yet. The BHAB would like the opportunity to weigh in on the business plan; Alyson will make sure the BHAB gets the business plan before it goes to Measure B for approval.</p> <ul style="list-style-type: none"> b. Discussion on if a survey has been done regarding other providers, and if they have intentions of using the facility and if so how much they are willing to pay to use it. Chair Rich suggested it'd be beneficial to know this information before developing a business plan. c. The board thinks there should be a mandatory amount of mental health trainings offered. d. Member Towle suggested bookings for a whole year in advance should not be allowed, but rather up to a month ahead. <p>C. Kemper Report Recommendations Update</p> <ul style="list-style-type: none"> I. BHRS Director Miller shared that the Measure B Committee presented 4 items to the BOS: the Mobile Outreach Crisis Response Team, Aftercare Services, Community Education Awareness, and the 1.3 million dollars for supportive mental health housing on the coast. Of those 4 items, only the mobile outreach item passed, all other items were put on hold by the BOS. The BOS wants a business plan developed prior to approving any more Measure B dollars to be spent. BHRS Director Miller will work with the Measure B Ad Hoc Committee recently formed to develop this plan. 	
<p>5. 15 minutes</p>	<p>Mendocino County Report: <i>Jenine Miller, BHRS Director</i></p> <ul style="list-style-type: none"> A. Director Report Questions <ul style="list-style-type: none"> I. Director report included in agenda packet. <ul style="list-style-type: none"> a. BHRS included additional Assisted Outpatient Treatment (AOT) data as requested by the board, referred to the 2019/20 fiscal year data. b. BHRS is working on adding more Substance Use Disorders Treatment (SUDT) information; SUDT is currently in the middle of an electronic health records switch so it is only pulling current data, but will have more data by next month. B. Budget Update <ul style="list-style-type: none"> I. BHRS is continuing to watch the budget, and how it will be impacted overall due to COVID and the fires. Hopeful realignment dollars stay consistent this year. II. BHRS closed the Mental Health Services Act (MHSA) Request for Proposals (RFP) for CSS and PEI. Currently in process of reviewing those, BHRS Director will work with Chair Rich and Member Fuentes to help review the RFP's. <ul style="list-style-type: none"> a. There are also 2 other RFP's out for the 	<p>Board Action:</p>

	<p>Administrative Services Organization (ASO) and the Crisis Residential Treatment facility, and a Request for Qualification for a Psychiatric Health Facility. Conferences for bidders are being hosted this week and next week, they all close in November.</p> <p>III. BHRS continues to run the warm line Monday-Saturday from 7:00 – 6:30 PM.</p> <p>IV. Discussion on the new suicide prevention flyer created in both English and Spanish. This will be used for the billboards planned for Hwy 101 and Hwy 20. The flyer is available on all social media accounts and on the BHRS website; if any members are interested in obtaining copies, Lili can print and mail them.</p> <p>V. In the last count in early September, there were 25 suicides total so far this year.</p> <p>C. Community Support Groups</p> <p>I. BHRS community support groups are available to the entire community for free. Groups include karaoke, talking circle, red road, as well as a few Spanish groups. BHRS will continue to expand in the next couple of months.</p> <p>a. BHRS now also has social media platforms on Twitter, Facebook, and Instagram.</p> <p>III. Discussion on overdose data: BHRS Director Miller wants to collect additional data on overdoses. In 2019 there were 39 overdoses; in 2020 there have been 16 to date.</p> <p>a. Discussion on obtaining tribal suicide and overdose data. Member Martinez shared BHRS would need to get in contact with the tribe department of social services to obtain, but it is up to the tribal council to release this information.</p> <p>b. Youth have access to the Warm Line, prevention lines, and counselors in schools. As part of a new grant, there will be more mental health services available to schools</p> <p>c. Discussion on how to best spread and share flyers to do more outreach in the community including restaurants, hotels, schools, etc. Member Bradley will follow up with Jenine to provide feedback and contact information on how to do more outreach.</p>	
<p>6. 15 minutes</p>	<p>Mental Health Services Act (MHSA) Quarterly Update: <i>Karen Lovato, BHRS Acting Deputy Director</i></p> <p>A. Karen Lovato, BHRS Acting Deputy Director joined the board to give an MHSA quarterly report update based on data collected from fiscal year 2019/20.</p> <p>I. MHSA is the millionaire’s tax passed in 2004; it takes 1 percent from millionaire’s taxes and diverts them for funding mental health services.</p> <p>a. There are 5 different components to MHSA: Community Services and Supports (CSS), Prevention and Early Intervention (PEI), Innovation (INN),</p>	

	<p>Workforce Education and Tracking (WET), and Capital Facilities and Technology needs.</p> <ul style="list-style-type: none"> b. Innovation projects are 5 percent of MHSA funding, designated for projects that are new and funding must be approved by the state. c. Karen explained the county is required to hold a community planning process to get community stakeholder involvement in MHSA programs. MHSA holds forums every other month targeted to reach out to different populations of stakeholders to get feedback. d. CSS is the largest category in MHSA, and is broken into 3 further different types of services: Full Service Partnership (FSP), general system development, and outreach and engagement. FSP is meant for clients with the highest needs and most severe symptoms. CSS also has the capacity to have a certain percentage redirected to continue workforce education and training, capital facilities and technology component, and also to put away as prudent reserve. The prudent reserve this year has been impacted by COVID this year, and many counties have had to use prudent reserve dollars to sustain existing programs. e. PEI has 6 categories: prevention services, early intervention services, outreach, stigma and discrimination reduction, access and linkage to treatment, and suicide prevention. f. PowerPoint slides presented on age, ethnicity, and gender data for CSS and PEI services for fiscal year 2019/20. The current Mendocino County census only designates the population as male or female but programs do question non-binary genders. g. BHRS currently has 2 innovation projects underway, the Rounds Valley project, and the Healthy Living Community Innovation Project. h. All MHSA service providers are expected to continue delivering services through COVID, within the context of the public health orders. Services have adapted to individualized, zoom, and telehealth based services. There has been an impact on MHSA revenues due to the delay in collecting taxes, so contracts will be reduced by 15 percent in FY 20/21. i. Once the MHSA RFP contracts are awarded, the MHSA three year plan will be updated. This plan will be presented to the BHAB for input and approval before going in front of the BOS. 	
<p>7. 10 minutes</p>	<p>RQMC Report:</p> <ul style="list-style-type: none"> A. Data Dashboard Questions <ul style="list-style-type: none"> I. Data dashboard included in agenda packet. B. Services Update <ul style="list-style-type: none"> I. Data dashboard shows crisis support numbers were down in March, April, and May as well as services compared to 	<p>Board Action:</p>

	<p>other months in previous years. There was an increase in crisis outreach, which is a sign people were not accessing crisis support unless they absolutely needed to.</p> <p>II. About one third of people seen in crisis are not Medi-Cal beneficiaries but rather Medicare, private insurance or indigents.</p> <p>III. Camille continues to be concerned with the low numbers in the children’s system of care. RQMC had a meeting with MAC providers to discuss outreach and engagement, and also a PCCY meeting with schools to talk about how to help them connect. All three agencies have volunteered to support schools on an emergency basis to have access to clinical staff if they don’t have any upon immediate need. They can call RQMC to set up a clinic, and should help gain connection.</p> <p>IV. RQMC will provide a new re-entry report, service delivery narrative, and outreach and engagement support report (by program) next month.</p> <p>V. Discussion on the challenges telehealth presents for younger kids, compared to how teenagers have adapted to it. RCS wrote a grant for internet access and subscription for general population kids, have not heard back yet.</p> <p>VI. RQMC has been working with providers to respond to the MHSA RFP, and also actively engaged in the ASO contract due November 5th.</p> <p>VII. Medication management has been going well in Fort Bragg with the services of Dr. Goodwin, Dr. Timme, Larry, and a nurse practitioner.</p>	
<p>8. 15 minutes</p>	<p>Board Reports and Possible Action:</p> <p>A. Chair – <i>Michelle Rich</i></p> <ol style="list-style-type: none"> 1. BHAB Secretary Appointment <ul style="list-style-type: none"> • Secretary appointment tabled. • Members will continue to recruit for empty board spots through the BOS; consumer spots are needed. <p>B. Vice Chair – <i>Member Ferretta</i></p> <ul style="list-style-type: none"> • No report. <p>C. Treasurer – <i>Member Towle</i></p> <ul style="list-style-type: none"> • No expenses in 20/21 budget so far, whatever is not used is rolled back into the general fund. 	<p>Board Action:</p>
<p>9. 5 minutes</p>	<p>Brown Act and Ethics Training for Board Members:</p> <ul style="list-style-type: none"> • All members are due for a training except for Chair Rich, Member Behringer, and Supervisor Brown. • Lili sent an email to all board members with information on how to complete a Brown Act and Ethics training through the California Association of Local Behavioral Health Board Association. • Supervisor Brown commented members can also go to the FPPC state website to complete this training. 	<p>Members due for a training will try to complete a training before the next BHAB meeting.</p>

10. 10 Minutes	Member Comments: <ul style="list-style-type: none"> Member Martinez would like reports submitted to the BHAB to be signed off by whoever writes them. 	Board Action:
11.	Adjournment: 3:13 Next meeting: October 21, 2020	

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BHAB CONTACT INFORMATION: PHONE: (707) 472-2355 FAX: (707) 472-2788

EMAIL THE BOARD: bhboard@mendocinocounty.org WEBSITE: www.mendocinocounty.org/bhab

Michelle Rich

Michelle Rich, BHAB Chair

10/26/20
Date

Lili Chavoya

Lili Chavoya, BHRS Acting Administrative Secretary

10/26/20
Date