



**MENDOCINO COUNTY BEHAVIORAL
HEALTH ADVISORY BOARD**

REGULAR MEETING

AGENDA

**November 16, 2020
3:00 p.m. to 5:00 p.m.**

Join Zoom Meeting:

<https://mendocinocounty.zoom.us/j/98557737710>

Call in:

+1(669) 900-9128 or +1(346) 248-7799

Webinar ID: 985 5773 7710

Find your local number:

<https://mendocinocounty.zoom.us/u/acQchywdog>

Chairperson
Michelle Rich

Vice Chair
Meeka Ferretta

Secretary
Jo Bradley

Treasurer
Richard Towle

BOS Supervisor
Carre Brown

1ST DISTRICT:
DENISE GORNY
LOIS LOCKART
RICHARD TOWLE

2ND DISTRICT:
MICHELLE RICH
SERGIO FUENTES
VACANT

3RD DISTRICT:
MEEKA FERRETTA
AMY BUCKINGHAM
VACANT

4TH DISTRICT:
JULIA EAGLES
VACANT
VACANT

5TH DISTRICT:
MARTIN MARTINEZ
FLINDA BEHRINGER
JO BRADLEY

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. 5 minutes	Minutes of the October 21, 2020 BHAB Regular Meeting: <i>Review and possible board action.</i>	Board Action:
3. 10 minutes (Maximum)	Public Comments: <i>Members of the public wishing to make comments to the BHAB will be recognized at this time. Any additional comments will have to be provided through email to bhboard@mendocinocounty.org.</i>	Board Action:
4. 20 minutes	Measure B Discussion: <i>Possible board action.</i> A. Measure B October Meeting Report B. Behavioral Health Training Center: <i>Alyson Bailey, Measure B Project Manager</i>	Board Action:

5. 15 minutes	Mendocino County Report: <i>Jenine Miller, BHRS Director</i> A. Director Report Questions B. Budget Update C. Mental Health Project Updates	Board Action:
6. 15 minutes	Substance Use Disorder Treatment Quarterly Report: <i>Rendy Smith, SUDT Acting Deputy Director</i>	Board Action:
2 minutes	Stretch Break	
7. 10 minutes	RQMC Report: A. Data Dashboard Questions B. Services Update	
8. 15 minutes	Assisted Outpatient Treatment (AOT) Presentation: <i>Karen Lovato, BHRS Acting Senior Program Manager</i>	Board Action:
9. 15 minutes	Board Reports: <i>Discussion and possible board action.</i> A. Chair – <i>Michelle Rich</i> 1. 2020 Annual Report Draft 2. California Behavioral Health Planning Council 2020 Data Notebook Survey Follow Up 3. California Association of Local Behavioral Health Boards and Commissions Yearly Dues Invoice 4. Membership Terms B. Vice Chair – <i>Member Ferretta</i> C. Treasurer – <i>Member Towle</i> D. Membership Committee:	Board Action:
10. 10 Minutes	Member Comments:	Board Action:
11.	Adjournment: Next meeting: December 14, 2020 from 3:00 – 5:00 PM	

AMERICANS WITH DISABILITIES ACT (ADA) COMPLIANCE

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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



**MENDOCINO COUNTY BEHAVIORAL
HEALTH ADVISORY BOARD**

REGULAR MEETING

MINUTES

**October 21, 2020
1:00 p.m. to 3:00 p.m.**

Join Zoom Meeting:

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+1(669) 900-9128 or +1(346) 248-7799

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Item	Agenda Item / Description	Action
1. 5 minutes	<p>Call to Order, Roll Call & Quorum Notice, Approve Agenda:</p> <ul style="list-style-type: none"> Chair Rich called the meeting to order at 1:04 PM. Members present: Behringer, Bradley, Buckingham, Ferretta, Fuentes, Gorny, Lockart, Martinez, Towle, and Supervisor Brown. Agenda approved as written. 	<p>Board Action: Motion made by member Behringer, seconded by Member Towle to approve the agenda as written. Motion passed.</p>
2. 5 minutes	<p>Minutes of the September 16, 2020 BHAB Regular Meeting: <i>Review and possible board action.</i></p> <ul style="list-style-type: none"> Minutes approved as written. 	<p>Board Action: Motion made by Vice Chair Ferretta, seconded by Member Behringer to approve the September 16,</p>

		2020 regular BHAB meeting minutes as written. Motion passed.
3. 10 minutes (Maximum)	<p>Public Comments: <i>Members of the public wishing to make comments to the BHAB will be recognized at this time. Any additional comments will have to be provided through email to bhboard@mendocinocounty.org.</i></p> <ul style="list-style-type: none"> No public comments. 	Board Action:
4. 15 minutes	<p>Measure B Discussion and Possible Action:</p> <p>A. Measure B September Meeting Report</p> <p>I Vice Chair Ferretta was not in attendance at the last Measure B meeting.</p> <p>II BHRS Director Miller reported on the Measure B September meeting:</p> <p>a) The Measure B meeting last month was not recorded due to technical difficulties.</p> <p>b) There was a discussion about hiring a consultant to develop a business plan, but the committee voted to have a strategic plan with financials instead. The strategic plan will be completed by the Project Manager, with input from BHRS Director Miller, and the Kemper Ad Hoc Committee.</p> <p>c) The Request for Proposals (RFP) and Request for Qualifications (RFQ) are still out for the Crisis Residential Treatment (CRT) facility and the Psychiatric Health Facility (PHF); they will close in mid-November.</p> <p>d) The Measure B Committee also had a discussion on hiring a landscaper/custodial services for the training center and the CRT lot. The recommendation was to hire Sonoma Cleaners, but the committee does not want to hire a company without an RFP process. The committee recommended that the Project Manager talk to county maintenance and county custodial to determine if this is something the county is able to do. If not, an RFP will be released to determine other options.</p> <p>(i) BHRS Director Miller mentioned that the Measure B Committee did approve a 1 time expense to clean up the CRT lot and the training center to avoid any nuisances.</p> <p>III Discussion on the BHAB Measure B representative, and whether or not there should be a back-up Measure B representative for when Vice Chair Ferretta is unable to attend the Measure B meetings.</p> <p>a) The BHAB will review the 2021 schedule of meetings for Measure B and BHAB to determine what is best for the BHAB to be able to provide more feedback in a timely manner.</p> <p>b) Member Bradley volunteered to be a backup for Measure</p>	Board Action:

	<p>B meetings, and attend any meetings as a member of the public for when Vice Chair Ferretta is unable to attend.</p> <p>B. Behavioral Health Training Center Letter</p> <p>I Vice Chair Ferretta reported that construction at the training center is beginning by the end of this month, and a questionnaire to service providers is also in the works to be sent out.</p> <p>II Measure B Project Manager, Alyson Bailey, sent a letter to the training center Ad Hoc notifying them of the decision to hold off on the remodeling of the training center, and will not resume until the BOS approves the business plan.</p> <p>III Discussion on the BHAB writing a letter reflecting the concerns regarding the training center.</p> <p>a) The board agreed a letter is not necessary, and instead decided that the Measure B representative can take and send notes about the Measure B meeting to Lili, and Lili will send out to all board members.</p>	
<p>5. 20 minutes</p>	<p>Mendocino County Report: <i>Jenine Miller, BHRS Director</i></p> <p>A. Director Report Questions</p> <p>I Director report included in agenda packet.</p> <p>II Additional SUDT data requested is included in the report, and BHRS will continue to expand that information.</p> <p>III BHRS Director Miller asked the board for feedback on the timeliness reports that are included in the agenda, asked if they are still working and are beneficial.</p> <p>IV Discussion on data about clients who do not complete their SUDT treatment. BHRS Director Miller explained there are various reasons as to why this happens.</p> <p>V Member Martinez commented he would like all reports signed off by the person who does them. Any electronic reports will be marked as being electronic reports, and will include the name of the person who pulled the information and the date.</p> <p>VI Member Towle commented he would like the MOPS brochure to be updated to clearly define the phone number for accessing help in central Ukiah.</p> <p>VII Member Martinez requested that BHRS Director Miller include more information on BHRS vacancies, and how many staff are hired and how many leave on a monthly basis.</p> <p>B. Awareness Campaign</p> <p>I Suicides in Mendocino County have continued to increase; the latest count in mid-October was 30, very high compared to previous years.</p> <p>a) Suicide prevention billboards are now up on Hwy 101 and Hwy 20.</p> <p>II Statistics from before April of this year, and after April show that deaths by drug overdose decreased since the county went into shelter in place due to COVID. There have been 22 total drug overdoses this year to date; 17 between January and April, and 5 between May and mid-October.</p> <p>III BHRS community support groups are continuing to be offered, as well as the warm line.</p>	<p>Board Action:</p> <p>BHRS Director Miller will reiterate with BHRS staff to update the brochure.</p>

	<p>IV BHRS is focusing on recovery; September was recovery month, but BHRS decided to focus and advocate for recovery awareness for the rest of the year. A lot of outreach and awareness will continue happening through the end of the year along with suicide prevention awareness.</p> <p>V BHRS Director Miller shared the new Warm Line bracelets created in collaboration with NAMI Mendocino. These bracelets will be distributed to community as another resource to access help and information. Mental Health and SUDT goodie bags are also being provided, the bags contain different resources for the community and how to access services.</p> <p>VI BHRS also continues to work with private insurances and Partnership to assure they are continuing to provide services and taking new clients.</p> <p>VII Extensive discussion on the county population suffering from mental health issues during these times and what factors are contributing to the rise in mental health illness diagnosis. BHRS Director Miller commented that mental health illness diagnosis are increasing as a whole, not only in Mendocino County, but nationwide.</p> <p>a) Chair Rich reported she had a conversation with Roseanne Ibarra from Adventist Health. Ms. Ibarra has been working on diversity and equity of inclusion within the community; and she would like to specifically know about Mental Health. Chair Rich has invited Ms. Ibarra to join the BHAB meeting next month, and is hopeful this board can work with Ms. Ibarra and her team to move forward.</p> <p>b) Discussion on Mendocino County being the third highest in California with a homeless population, and 12th in the country with highest homeless population.</p>	
<p>6. 10 minutes</p>	<p>Legislative Update: <i>Jenine Miller, BHRS Director</i></p> <p>A. BHRS Director Miller reported on the recent Mental Health bills signed by Governor Newsom.</p> <p>I Parity: This legislation enforces private insurance companies to provide parity in services. This legislation will prohibit private insurance companies from limiting Mental Health and Substance Use Disorder treatment (SUDT) services to only acute and short term clients. Private insurances will now be required to provide services based on medical necessity like Medi-Cal does.</p> <p>II Peer providers: Legislation requires DHCS to establish requirements for Peer Support Specialist certifications for both Mental Health and SUDT treatment. This provides a lower level of requirements to be able to provide services; right now it is required to be at least at a care manager level or Mental Health Rehab Specialist level. This will also allow counties to bill Medi-Cal for lower level service providers.</p> <p>III Assisted Outpatient Treatment (AOT): This legislation will not impact Mendocino County a whole lot, but there will be</p>	<p>Board Action:</p>

	<p>changes to how people can get into AOT, and added judges to be able to refer clients to AOT. This does not loosen the criteria to qualify for AOT.</p> <p>IV Another bill that passed was that the State will open a suicide prevention office under CDPH, to provide better outreach and education.</p> <p>V Supervisor Brown shared that the General Government Standing Committee is working on a legislative platform. The way the legislative platform has been done previously is being revised, but they always reach out to county departments and advisory boards to give input and receive feedback on what the county should be looking at as far as legislation and what they should be focusing on. This helps county representatives direct the feedback to state representatives and organizations. Supervisor Brown encouraged the board to use this process if there is anything they would like the legislative platform to be aware of.</p> <p>a) Member Martinez suggested that Tribal governments be included in the outreach the legislative platform does.</p>	
2 minutes	Stretch Break	
<p>7. 10 minutes</p>	<p>RQMC Report:</p> <p>A. Data Dashboard Questions</p> <p>I Included in agenda packet.</p> <p>II As requested by Member Martinez, RQMC included a report on hard to reach isolated clients, and outcomes and deliverables over the last 3 years.</p> <p>B. Services Update</p> <p>I Chair Rich asked for clarification on the over contract for 260k. Camille said that means more people were moved to Medi-Cal than what was anticipated, usually happens every year.</p> <p>II Vice Chair Ferretta commented she has been on this board since 2017, but until the last couple of months she actually learned how to access mental health services thanks to the support of Camille.</p> <p>a) Vice Chair asked Camille if RQMC is responding to the ASO RFP, Camille confirmed they are.</p>	Board Action:
<p>8. 5 minutes</p>	<p>Healthy Mendocino Data Request: <i>Discussion and possible board action.</i></p> <p>A. Patrice Mascolo, Healthy Mendocino Project Manager, joined the BHAB meeting in regards to the letter she sent to the board (included in agenda packet).</p> <p>I Healthy Mendocino is attempting to start collecting mental health data to add on their website, specifically the RQMC data, and the suicide data BHRS provides to the BHAB. Healthy Mendocino would like this board's approval to obtain the data and be able to include on their website.</p> <p>a) Healthy Mendocino's goal is to include and maintain</p>	Board Action: Motion made by Member Fuentes, seconded by Member Towle to approve Healthy Mendocino's request to use data provided in the BHAB reports pending approval

	<p>updated data on their website so it is available to the entire community, as they are mandated to also work on mental health. Healthy Mendocino would like this board's approval to obtain the data and be able to include on their website.</p> <p>b) Discussion on whether or not this has to go to the BOS for approval.</p> <p>c) Members agreed to have BHRS Director Miller follow up with County Counsel to make sure the board can honor Healthy Mendocino's request.</p> <p>d) Camille confirmed with Patrice that she can have access to all of their data, will add her to RQMC's email recipient list. Camille commented she would like to have more regular and consistent suicide data as well.</p>	<p>from County Counsel. Motion passed.</p>
<p>9. 20 minutes</p>	<p>Board Reports: Discussion and possible board action.</p> <p>A. Chair – <i>Michelle Rich</i></p> <p>I BHAB Secretary Appointment</p> <p>a) The Membership committee nominated Member Bradley to be the BHAB Secretary.</p> <p>II November and December BHAB Meetings</p> <p>a) The November and December BHAB meetings conflict with the Measure B meetings; the board agreed to move the November and December BHAB meetings to November 16, and December 14.</p> <p>III Annual Report</p> <p>a) The board agreed to submit both the 2019 and 2020 BHAB annual report together to the BOS by early 2021 (once the 2020 report is completed).</p> <p>IV Ford Street Project Letter</p> <p>a) Jacqueline Williams, Ford Street Project Executive Director, sent a letter to the BHAB (included in agenda packet). Chair Rich invited Jacqueline Williams and her staff to join the BHAB meeting next month.</p> <p>B. Vice Chair – <i>Member Ferretta</i></p> <p>I No report.</p> <p>C. Treasurer – <i>Member Towle</i></p> <p>I There are some mileage expenses on the BHAB ledger that are not accurate, Member Towle will report back at next month's meeting.</p> <p>D. Membership Committee:</p> <p>I No updates from the Membership Committee.</p>	<p>Board Action: Motion made by Member Martinez, seconded by Member Gorny to assign Jo Bradley as the BHAB's Secretary. Motion passed.</p> <p>Chair Rich will have a draft of the 2020 annual report by next month's meeting.</p>
<p>10. 10 minutes</p>	<p>California Behavioral Health Planning Council 2020 Data Notebook Survey: Discussion and possible board action.</p> <p>A. The California Behavioral Health Planning Council notebook survey is an annual board duty.</p> <p>I Chair Rich will work on a draft, and bring back to the board for review and approval next month.</p>	

<p>11. 10 Minutes</p>	<p>Member Comments: A. Chair Rich reminded members that they cannot comment on the RFP process, and therefore should not comment about RFP to Camille. B. Discussion on an award for Supervisor Brown and Emily Strachan from the Appreciation Committee. C. Training discussion and update: I It is not anticipated for County Counsel to offer a Brown Act training until early next year. Lili will update the board as more information is received.</p>	<p>Board Action: Appreciations to be done at December BHAB meeting. Lili will re-send email to board.</p>
<p>12.</p>	<p>Adjournment: 3:07 Next meeting: November 18, 2020</p>	<p>Motion made by Member Martinez, seconded by Member Fuentes to adjourn the meeting.</p>

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Behavioral Health Advisory Board Director's Report

November 2020

1. Board of Supervisors:

- a. Recently passed items or presentations:
 - i. Mental Health:
 - a. None
 - ii. Substance Use Disorders Treatment:
 - a. None
- b. Future BOS Items or Presentations:
 - i. Mental Health
 - a. None
 - ii. Substance Use Disorder Treatment:
 - a. None

2. Staffing Updates:

- a. New Hires:
 - Mental Health: Acting Senior Department Analyst
 - Substance Use Disorders Treatment: None
- b. Promotions:
 - Mental Health: None
 - Substance Use Disorders Treatment: None
- c. Departures:
 - Mental Health: None
 - Substance Use Disorders Treatment: None

3. Audits/Site Reviews:

- a. Date occurred and report out of findings:
 - i. No Report Out for October, as we are between audits/reviews.
- b. Upcoming/Scheduled:
 - i. BHRS Outpatient Chart Audit – currently in progress

- ii. EQRO virtual site review – November 9-12, 2020
- c. Site Reviews:
 - i. No SMH sites were up for review in October 2020
 - ii. RCS successfully added three Short-Term Residential Therapeutic Programs

4. Grievances/Appeals:

- a. MHP Grievances: 6
- b. SUDT Grievances: 0
- c. MHPSA Issue Resolutions: 0
- d. Second Opinion: 0
- e. Change of Provider Requests: 1
- f. Provider Appeals: 0
- g. Consumer Appeals: 0

5. Meetings of Interest:

- a. MHPSA Forum/QIC Meeting: December 9, 2020 @ 10:00 - 12:00 am on Zoom: <https://mendocinocounty.zoom.us/j/92069894869>
- b. Cultural Diversity Committee Meeting: November 24, 2020 @ 3:30-5:30pm

6. Grant Opportunities:

- a. None

7. Significant Projects/Brief Status:

- a. Assisted Outpatient Treatment (AOT): AB 1421/Laura's Law
- b. Melinda Driggers, AOT Coordinator, is accepting and triaging referrals:
 - i. Referrals to Date: 89
 - ii. Total that did not meet AOT Criteria: 78
 - a. Total Referrals FY 20/21: 4
 - b. Client connected with Provider/Services: 2
 - c. Unable to locate/connect with client: 1
 - iii. Currently in Investigation/Screening/Referral: 0
 - iv. Settlement Agreement/Full AOT: 1
 - v. Other (Pending Assessments to file Petition): 1

8. Educational Opportunities/Information:

- a. None

9. Mental Health Services Act (MHSA):

- a. MHSA Forum/QIC Meeting: December 9, 2020 @ 10:00 - 12:00 am on Zoom: <https://mendocinocounty.zoom.us/j/92069894869>

10. Lanterman Petris Short Conservatorships (LPS):

- a. Number of individuals on LPS Conservatorships = 59

11. Substance Use Disorder Treatment Services:

- a. Number of Substance Use Disorder Treatment Clients Served in September 2020
 - i. Total number of clients served = 99
 - ii. Total number of services provided = 639
 - iii. Fort Bragg: 19 clients served for a total of 124 services provided
 - iv. Ukiah: 67 clients served for a total of 470 services provided
 - v. Willits: 13 clients served for a total of 45 services provided
- b. Number of Substance Use Disorder Clients Completion Status
 - i. Completed treatment/recovery = 9
 - ii. Left before completion =18
 - iii. Referred = 1
 - iv. Total = 28
 - v. Average Length of Service = 144.76 hours

12. Contracts:

- a. None

13. Capital Facility Projects:

- a. Orchard Project
 - i. CHFFA Board Meeting 12/5/19 - Milestone of securing funding met.
 - ii. CHFFA Board Meeting 1/30/2020 – New milestones were provided by CHFFA for completion of the Orchard Project
 - iii. CHFFA Board Meeting 10/29/20- Kudos given for forward momentum on the project
- b. Willow Terrace Project
 - i. Vacancies filled through Coordinated Entry process as they come available.
 - ii. Some turnover in tenancy.

QI Work Plan - 3.D

Report - Appeals, Grievances, Change of Provider - September 2020

Provider Appeal (45 days)

Receipt Date	Provider Name	Reason	Results	Date Completed	Date Letter sent to Provider
Total	0				

Client Appeal (45 days)

Receipt Date	Provider Name	Reason	Results	Date Completed	Date Letter sent to Client
Total	0				

Issue Resolutions (60 Days)

Receipt Date	Provider Name	Reason	Results	Date Completed	Date Letter sent to Provider
Total	0				

SUDT Grievance (60 Days)

Receipt Date	Provider Name	Reason	Results	Date Completed	Date Letter sent to Provider
Total	0				

Client Grievance (60 Days)

Receipt Date	Provider	Reason	Results	Date Completed	Date Letter sent to Client
9/1/2020	RQMC/RCS	Regarding conduct and inaction of staff regarding issues at a joint facility.	The investigation revealed that the staff have taken all complaints seriously and attempted to correct any issues at the facility.	10/14/2020	10/14/2020
9/1/2020	RQMC Meds Management	Regarding conduct of RQMC Meds Management staff and a proposed a medication change.	The investigation found that the medication management staff had followed all current medication guidelines in regards to the medication change. The interactions with staff had been documented and staff was spoken to regarding conduct.	10/14/2020	10/14/2020
9/3/2020	Restpadd	Beneficiary states that facility imposes a policy that patients can not touch each other but that the staff at the facility can be frequently seen touching each other, such as with high fives.	While Restpadd does not have a no touch policy they do discourage touching between both patients and staff in order to respect the boundaries of individuals.	10/22/2020	10/22/2020
9/15/2020	County Mental Health Agencies	Beneficiary states that county agencies have not offered the services they are eligible to.	Investigation still ongoing. Current investigation shows that beneficiary has been offered services multiple times and has been informed that they are welcome to resume services at any time. Beneficiary had voluntarily terminated services.		
9/24/2020	RC3	Beneficiary states that a crisis worker had seemed to be uninterested in engaging with the beneficiary.	Beneficiary communicated with the crisis worker and withdrew grievance.	10/6/2020	10/6/2020
9/29/2020	County Mental Health Agencies	Beneficiary is alleging that Mendocino county shared mental health records with another county and it has led to Children's Services removing their child from the home.	Investigation found that no records requests had been received for this beneficiary's mental health records.	10/14/2020	10/14/2020
Total	6				

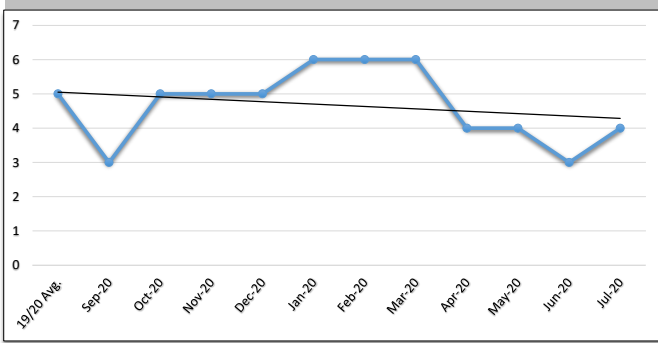
Client Request for Change of Provider (10 Business Days)

Receipt Date	Provider	Reason	Results	Date Completed	Date Letter sent to Client
9/11/2020	Manzanita	Beneficiary requests transfer of services to RCS.	Beneficiary discharged from previous provider and services opened at new provider.	9/22/2020	9/22/2020
Total	1				

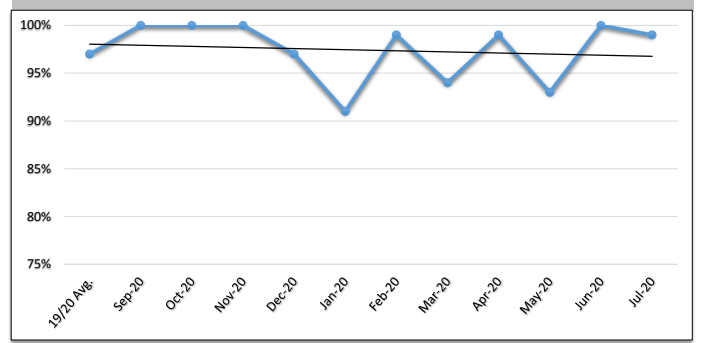
0 Provider Appeals
0 Client Appeals
0 Issue Resolutions (Completed)
0 SUDT Grievances (Completed)
5 Grievance (Completed)
1 Requests for Change of Provider (Completed)

2019-2020 Year to Date Timeliness Charts and Graphs

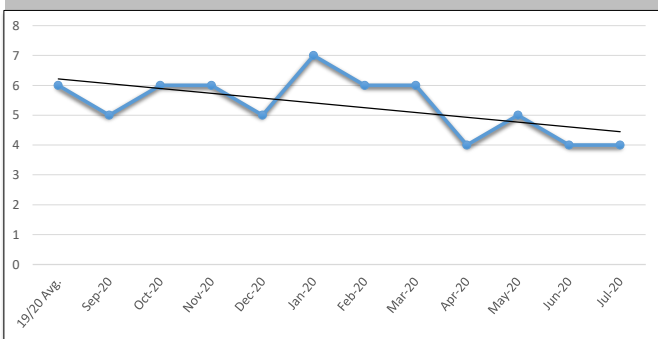
Length of Time from Initial Request to first offered Appt. - Mean BPSA - MHP Standard or Goal - 10 Business Days - 95%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	5	4	6	6
Sep-20	3	4	6	5
Oct-20	5	5	5	5
Nov-20	5	4	6	8
Dec-20	5	4	5	3
Jan-20	6	6	6	5
Feb-20	6	5	8	3
Mar-20	6	5	6	8
Apr-20	4	3	4	6
May-20	4	4	5	8
Jun-20	3	3	8	9
Jul-20	4	4	4	1
Aug-20	3	3	3	3
12 Mo. Avg.	5	4	6	5



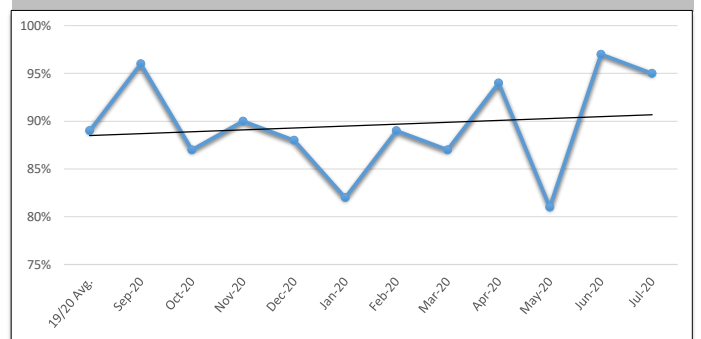
Length of Time from Initial Request to first offered Appt. BPSA - MHP Standard or Goal - 10 Business Days - 95%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	97%	95%	98%	100%
Sep-20	100%	100%	100%	100%
Oct-20	100%	100%	100%	100%
Nov-20	100%	100%	100%	100%
Dec-20	97%	100%	95%	100%
Jan-20	91%	76%	100%	100%
Feb-20	99%	98%	83%	100%
Mar-20	94%	89%	97%	100%
Apr-20	99%	100%	98%	100%
May-20	93%	93%	99%	100%
Jun-20	100%	100%	100%	100%
Jul-20	99%	97%	100%	100%
Aug-20	100%	100%	100%	100%
12 Mo. Avg.	98%	96%	98%	100%



Length of Time from Initial Request to first kept Appt. - Mean MHP Standard or Goal - 10 Business Days - 90%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	6	4	6	8
Sep-20	5	4	6	5
Oct-20	6	5	7	6
Nov-20	6	4	7	8
Dec-20	5	5	6	3
Jan-20	7	6	7	5
Feb-20	6	5	8	3
Mar-20	6	6	6	8
Apr-20	4	3	5	11
May-20	5	4	6	10
Jun-20	4	2	5	9
Jul-20	4	4	4	1
Aug-20	3	3	3	3
12 Mo. Avg.	5	4	6	6

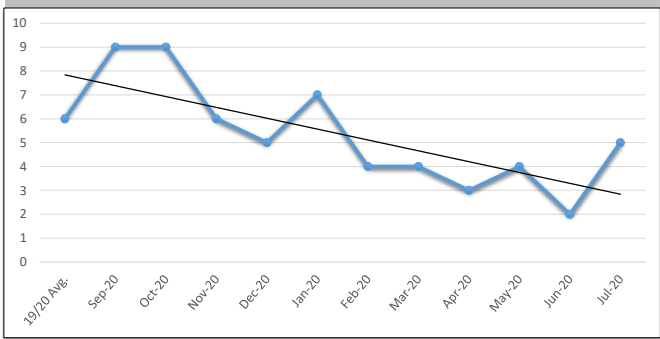


Length of Time from Initial Request to first kept Appt. - MHP Standard or Goal - 10 Business Days - 90%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	89%	94%	85%	83%
Sep-20	96%	100%	94%	100%
Oct-20	87%	100%	79%	100%
Nov-20	90%	97%	86%	100%
Dec-20	88%	94%	85%	100%
Jan-20	82%	78%	84%	100%
Feb-20	89%	97%	83%	100%
Mar-20	87%	87%	88%	100%
Apr-20	94%	100%	90%	0%
May-20	81%	90%	73%	67%
Jun-20	97%	100%	94%	100%
Jul-20	95%	92%	97%	100%
Aug-20	100%	100%	100%	100%
12 Mo. Avg.	91%	95%	88%	89%

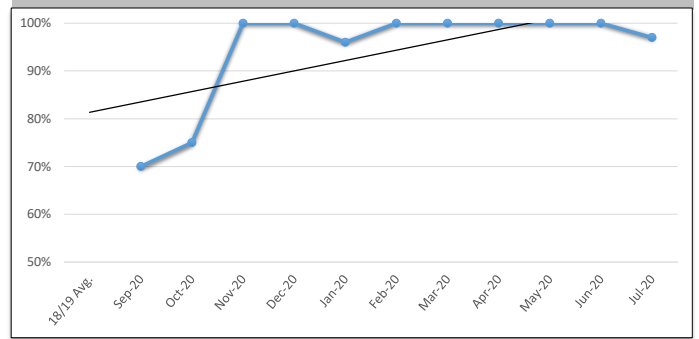


2019-2020 Year to Date Timeliness Charts and Graphs - Page 2

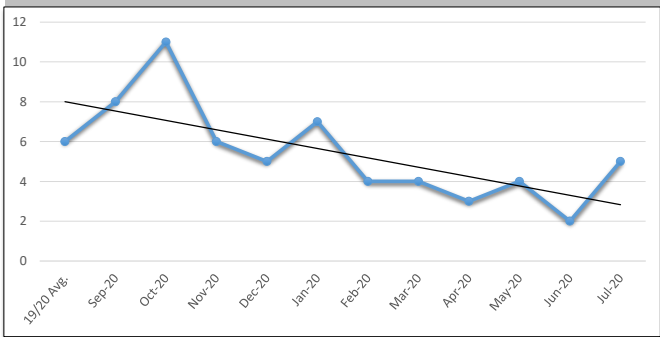
Length of Time from Initial Request to first offered Psychiatry appt. - Mean MHP Standard or Goal - 15 Business Days - 90%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	6	5	7	10
Sep-20	9	10	9	2
Oct-20	9	8	10	21
Nov-20	6	6	6	#N/A
Dec-20	5	5	5	#N/A
Jan-20	7	7	10	#N/A
Feb-20	4	3	6	7
Mar-20	4	3	6	#N/A
Apr-20	3	2	3	#N/A
May-20	4	4	5	#N/A
Jun-20	2	2	2	#N/A
Jul-20	5	4	8	#N/A
Aug-20	4	4	7	#N/A
12 Mo. Avg	5	5	6	10



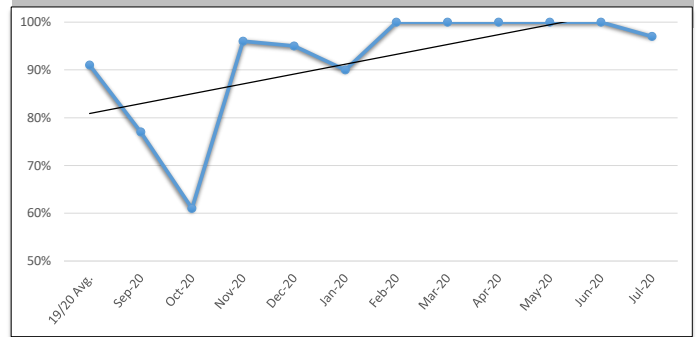
Length of Time from Initial Request to first offered Psychiatry Appt. - MHP Standard or Goal - 15 Business Days - 90%				
	All Services	Adult Services	Children's Services	Foster Care
18/19 Avg.	#N/A	#N/A	#N/A	#N/A
Sep-20	70%	68%	75%	100%
Oct-20	75%	75%	75%	0%
Nov-20	100%	100%	100%	#N/A
Dec-20	100%	100%	100%	#N/A
Jan-20	96%	95%	100%	#N/A
Feb-20	100%	100%	100%	100%
Mar-20	100%	100%	100%	#N/A
Apr-20	100%	100%	100%	#N/A
May-20	100%	100%	100%	#N/A
Jun-20	100%	100%	100%	#N/A
Jul-20	97%	96%	100%	#N/A
Aug-20	96%	95%	100%	#N/A
12 Mo. Avg	95%	94%	96%	67%



Length of Time from Initial Request to first kept Psychiatry appt. - Mean MHP Standard or Goal - 15 Business Days - 90%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	6	5	7	10
Sep-20	8	7	10	2
Oct-20	11	11	13	21
Nov-20	6	4	8	#N/A
Dec-20	5	5	7	#N/A
Jan-20	7	6	12	#N/A
Feb-20	4	3	6	7
Mar-20	4	3	6	#N/A
Apr-20	3	2	3	#N/A
May-20	4	5	4	#N/A
Jun-20	2	2	2	#N/A
Jul-20	5	4	10	#N/A
Aug-20	4	3	7	#N/A
12 Mo. Avg	5	5	7	10

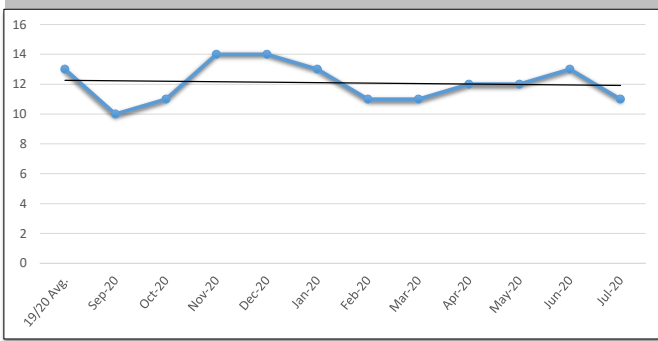


Length of Time from Initial Request to first kept Psychiatry Appt. - MHP Standard or Goal - 15 Business Days - 90%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	91%	92%	91%	67%
Sep-20	77%	80%	71%	100%
Oct-20	61%	59%	67%	0%
Nov-20	96%	100%	90%	#N/A
Dec-20	95%	100%	83%	#N/A
Jan-20	90%	91%	83%	#N/A
Feb-20	100%	100%	100%	100%
Mar-20	100%	100%	100%	#N/A
Apr-20	100%	100%	100%	#N/A
May-20	100%	100%	100%	#N/A
Jun-20	100%	100%	100%	#N/A
Jul-20	97%	96%	100%	#N/A
Aug-20	100%	100%	100%	100%
12 Mo. Avg	93%	94%	91%	75%

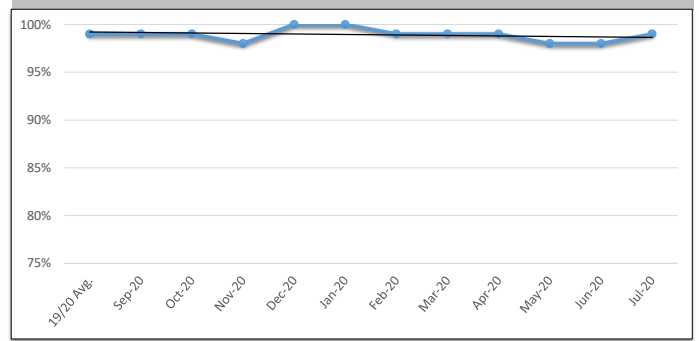


2019-2020 Year to Date Timeliness Charts and Graphs - Page 3

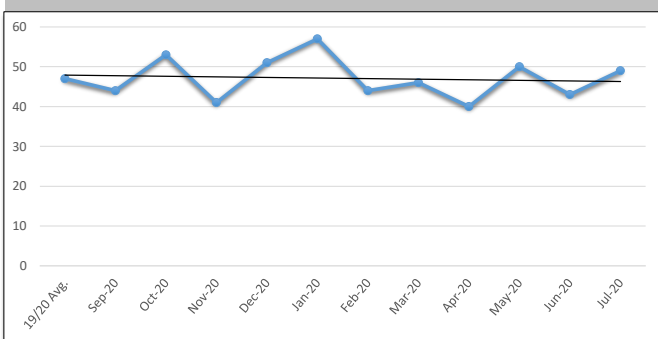
Length of Time from Service Request for urgent Appt. to Actual Encounter Mean - MHP Standard or Goal - 95% (Minutes)				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	13	13	13	15
Sep-20	10	9	12	#N/A
Oct-20	11	12	8	8
Nov-20	14	14	14	11
Dec-20	14	15	12	7
Jan-20	13	13	10	0
Feb-20	11	11	11	19
Mar-20	11	12	9	10
Apr-20	12	12	10	7
May-20	12	13	11	20
Jun-20	13	13	12	30
Jul-20	11	12	7	#N/A
Aug-20	12	12	7	#N/A
12 Mo. Avg.	12	12	10	12



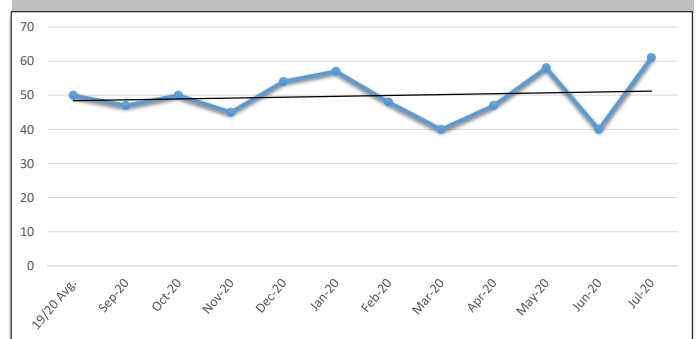
Length of Time from Service Request for urgent Appt. to Actual Encounter - Mean Percent of Goal that meets this Standard - MHP Standard or Goal - 95% (Minutes)				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	99%	99%	99%	100%
Sep-20	99%	99%	98%	#N/A
Oct-20	99%	99%	100%	100%
Nov-20	98%	98%	100%	100%
Dec-20	100%	100%	100%	100%
Jan-20	100%	99%	100%	100%
Feb-20	99%	99%	100%	100%
Mar-20	99%	99%	100%	100%
Apr-20	99%	99%	95%	100%
May-20	98%	98%	100%	100%
Jun-20	98%	97%	100%	100%
Jul-20	99%	99%	100%	#N/A
Aug-20	98%	98%	100%	#N/A
12 Mo. Avg.	99%	99%	99%	100%



Total Number of Hospital Discharges				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	47	39	7	1
Sep-20	44	33	11	2
Oct-20	53	45	8	0
Nov-20	41	21	9	2
Dec-20	51	43	8	0
Jan-20	57	50	7	0
Feb-20	44	41	3	1
Mar-20	46	39	7	0
Apr-20	40	34	6	2
May-20	50	40	10	1
Jun-20	43	37	6	0
Jul-20	49	38	11	1
Aug-20	46	38	8	1
12 Mo. Avg.	47	38	8	1
Total	564	459	94	10

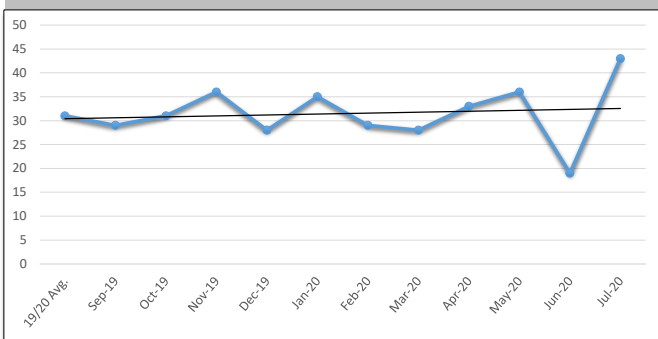


Total Number of Hospital Admissions				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	50	42	7	1
Sep-20	47	40	7	2
Oct-20	50	41	9	0
Nov-20	45	38	7	2
Dec-20	54	46	8	0
Jan-20	57	49	8	0
Feb-20	48	43	5	1
Mar-20	40	35	5	0
Apr-20	47	39	8	3
May-20	58	48	10	0
Jun-20	40	36	4	0
Jul-20	61	46	15	1
Aug-20	50	43	7	1
12 Mo. Avg.	50	42	8	1
Total	597	504	93	10

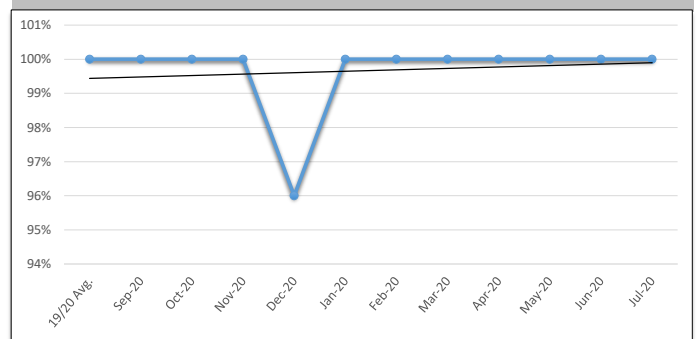


2019-2020 Year to Date Timeliness Charts and Graphs - Page 4

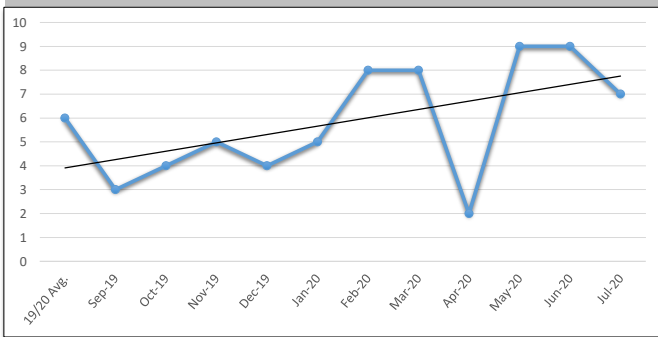
Timeliness of follow-up encounters post psychiatric inpatient discharge Number of follow-up appts within 7 days				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	31	27	4	1
Sep-19	29	24	5	1
Oct-19	31	26	5	0
Nov-19	36	30	6	1
Dec-19	28	23	5	0
Jan-20	35	32	3	0
Feb-20	29	28	1	1
Mar-20	28	26	2	0
Apr-20	33	27	6	2
May-20	36	34	2	0
Jun-20	19	17	2	0
Jul-20	43	32	11	0
Aug-20	24	23	1	0
12 Mo. Avg.	31	27	4	0
Total	371	322	49	5



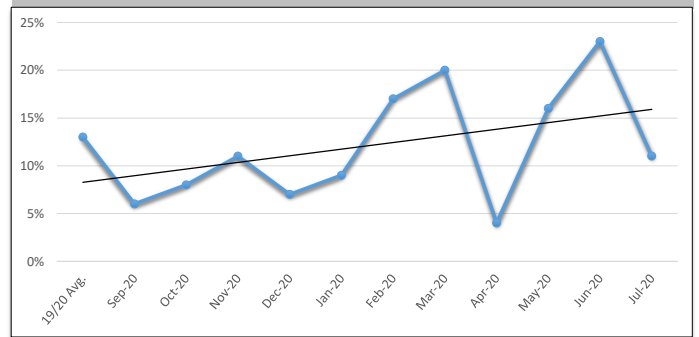
Timeliness of follow-up encounters post psychiatric inpatient discharge Percent of appointments that met this standard within 7 days - Goal is 95%				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	100%	100%	97%	100%
Sep-20	100%	100%	100%	100%
Oct-20	100%	100%	100%	#N/A
Nov-20	100%	100%	100%	100%
Dec-20	96%	100%	80%	#N/A
Jan-20	100%	100%	100%	#N/A
Feb-20	100%	100%	100%	100%
Mar-20	100%	100%	100%	#N/A
Apr-20	100%	100%	100%	100%
May-20	100%	100%	100%	#N/A
Jun-20	100%	100%	100%	#N/A
Jul-20	100%	100%	100%	#N/A
Aug-20	100%	100%	100%	#N/A
12 Mo. Avg.	100%	100%	98%	100%



Psychiatric Inpatient Readmission rates within 30 days Total number with readmission within 30 days				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	6	5	1	0
Sep-19	3	1	2	1
Oct-19	4	2	2	0
Nov-19	5	4	1	0
Dec-19	4	4	0	0
Jan-20	5	4	1	0
Feb-20	8	7	1	0
Mar-20	8	8	0	0
Apr-20	2	1	1	0
May-20	9	9	0	0
Jun-20	9	8	1	0
Jul-20	7	3	4	0
Aug-20	5	4	1	0
12 Mo. Avg.	6	5	1	0
Total	69	55	14	1

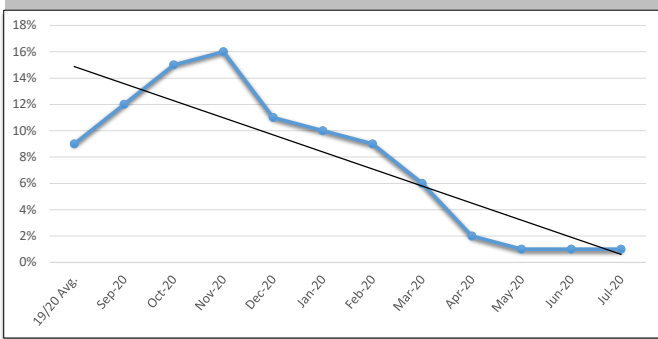


Psychiatric Inpatient Readmission rates within 30 days Readmission Rate - Goal is 10% within 30 days				
	All Services	Adult Services	Children's Services	Foster Care
19/20 Avg.	13%	12%	18%	50%
Sep-20	6%	3%	29%	50%
Oct-20	8%	5%	22%	#N/A
Nov-20	11%	11%	14%	#N/A
Dec-20	7%	9%	0%	#N/A
Jan-20	9%	8%	13%	#N/A
Feb-20	17%	16%	20%	#N/A
Mar-20	20%	23%	n/a	#N/A
Apr-20	4%	3%	13%	#N/A
May-20	16%	19%	n/a	#N/A
Jun-20	23%	22%	25%	#N/A
Jul-20	11%	7%	27%	#N/A
Aug-20	10%	9%	14%	#N/A
12 Mo. Avg.	12%	11%	18%	50%

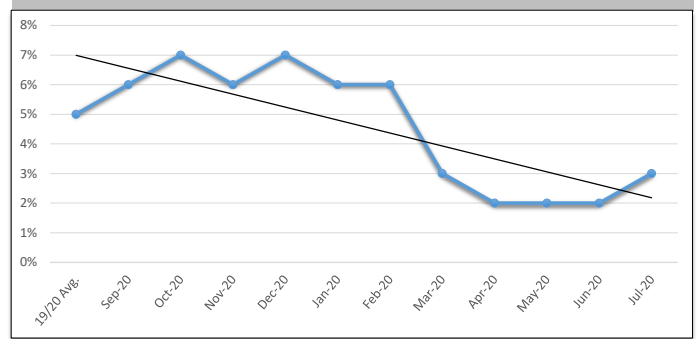


2019-2020 Year to Date Timeliness Charts and Graphs - Page 5

Average Psychiatric No Show Rates			
MHP Standard for Psychiatrists - No Higher than 10%			
	All Services	Adult Services	Children's Services
19/20 Avg.	9%	10%	10%
Sep-20	12%	12%	13%
Oct-20	15%	14%	18%
Nov-20	16%	15%	18%
Dec-20	11%	12%	5%
Jan-20	10%	11%	10%
Feb-20	9%	9%	8%
Mar-20	6%	6%	6%
Apr-20	2%	1%	2%
May-20	1%	1%	0%
Jun-20	1%	1%	2%
Jul-20	1%	1%	0%
Aug-20	2%	2%	1%
12 Mo. Avg.	7%	7%	7%



Average Clinicians other than Psychiatrists No Show Rates			
MHP Standard for Clinicians other than Psychiatrists - No Higher than 10%			
	All Services	Adult Services	Children's Services
19/20 Avg.	5%	6%	4%
Sep-20	6%	5%	7%
Oct-20	7%	9%	6%
Nov-20	6%	8%	4%
Dec-20	7%	8%	6%
Jan-20	6%	9%	3%
Feb-20	6%	7%	5%
Mar-20	3%	5%	3%
Apr-20	2%	2%	2%
May-20	2%	3%	2%
Jun-20	2%	3%	2%
Jul-20	3%	3%	3%
Aug-20	4%	5%	3%
12 Mo. Avg.	5%	6%	4%





Mendocino County Behavioral Health and Recovery Services
 Behavioral Health Advisory Board General Ledger
 FY 20/21
 November 5, 2020

ORG	OBJ	ACCOUNT DESCRIPTION	YR/PER/JNL	EFF DATE	AMOUNT	INVOICE #	CHECK #	VENDOR NAME	COMMENT
MHB	862080	FOOD							
		FOOD Total			\$0.00				
MHB	862150	MEMBERSHIPS							
		MEMBERSHIPS TOTAL			\$0.00				
MHB	862170	OFFICE EXPENSE							
MHB	862170	OFFICE EXPENSE							
		OFFICE EXPENSE Total			\$0.00				
MHB	862210	RNTS & LEASES BLD GRD							
		RNTS & LEASES BLD GRD Total			\$0.00				
MHB	862250	TRNSPRTATION & TRAVEL							
MHB	862250	TRNSPRTATION & TRAVEL							
MHB	862250	TRNSPRTATION & TRAVEL							
MHB	862250	TRNSPRTATION & TRAVEL							
MHB	862250	TRNSPRTATION & TRAVEL							
		TRNSPRTATION & TRAVEL Total			\$0.00				
		TRAVEL & TRSP OUT OF COUNTY Total			\$0.00				
		Grand Total			\$0.00				

Summary of Budget for FY 20/21

OBJ	ACCOUNT DESCRIPTION	Budget Amount	YTD Exp	Remaining Budget
862080	Food	1,800.00	0.00	1,800.00
862150	Memberships	600.00	0.00	600.00
862170	Office Expense	500.00	0.00	500.00
862210	Rents & Leases Bld	30.00	0.00	30.00
862250	In County Travel	5,800.00	0.00	5,800.00
862253	Out of County Travel	2,770.00	0.00	2,770.00
	Total Budget	\$11,500.00	\$0.00	\$11,500.00

Behavioral Health Recovery Services
Mental Health FY 2020-2021
Budget Summary
Year to Date as of **November 9, 2020**

	Program	FY 20/21 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)	(5,833,895)	69,302	116,568	2,830,642		(19,072)	2,997,439		315,557	(148,172)	(831)	166,553	2,830,886
2	Administration	1,448,778	241,068	185,097			(17,974)	408,191				2,689	2,689	405,501
3	CalWorks	98,355	36,795	2,758				39,553					0	39,553
4	Mobile Outreach Program	384,126	61,575	10,235			(516)	71,294	(40,713)				(40,713)	112,007
5	Adult Services	764,577	209,699	33,258	0		(96,828)	146,128				10,168	10,168	135,960
6	Path Grant	19,500		4,029				4,029	0				0	4,029
7	SAMHSA Grant	185,000		37,170				37,170					0	37,170
8	Mental Health Board	11,500		0				0					0	0
9	Business Services	624,295	134,060	36,585				170,645				15,361	15,361	155,283
11	AB109	135,197	39,644	2,943				42,587					0	42,587
12	Conservatorship	2,456,866	2,697	94,854	636,684		(4,041)	730,193				38,593	38,593	691,600
13	No Place Like Home Grant	0						0				0	0	0
14	QA/QI	450,568	107,083	26,037				133,119				8,003	8,003	125,116
a	Total YTD Expenditures & Revenue		901,922	549,533	3,467,326	0	(138,432)	4,780,348	(40,713)	315,557	(148,172)	73,983	200,655	4,579,694
b	FY 2020-2021 Adjusted Budget	744,867	3,510,587	1,962,679	18,778,506	0	(73,244)	24,178,528	6,389,220	4,182,046	10,609,498	2,677,399	23,858,163	320,365
c	Variance		2,608,665	1,413,146	15,311,180	0	65,188	19,398,180	6,429,933	3,866,489	10,757,670	2,603,416	23,657,508	(4,259,329)

Behavioral Health Recovery Services
Mental Health Services Act (MHSA) FY 2020-2021 Budget Summary
Year to Date as of October 28, 2020

Program	FY 20/21 Approved Budget	Salaries & Benefits	Services & Supplies	Other Charges	Fixed Assets	Operating Transfers	Total Expenditures	Revenue Prop 63	Other- Revenue	Total Net Cost
Community Services & Support	-	77,162	27,287	67,513		(7,785)	164,177		48,196	115,980
Prevention & Early Intervention	218,759	9,370	43,499	31,514			84,383		-	84,383
Innovation	508,637		1,267				1,267			1,267
Workforce Education & Training	-		(4,871)				(4,871)			(4,871)
Capital Facilities & Tech Needs	-	-	45,294				45,294			45,294
Total YTD Expenditures & Revenue		86,532	112,476	99,027	-	(7,785)	290,250	-	48,196	242,053
FY 2019-2020 Approved Budget	727,396	517,117	1,504,880	3,058,993	0	496,097	5,577,087	(4,836,832)	(12,859)	727,396
Variance		430,585	1,392,404	2,959,965	-	503,882	5,286,837	(4,836,832)	(61,055)	485,343

Prudent Reserve Balance **1,894,618**

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
SUDT FY 2020-2021 Budget Summary
Year to Date as of **November 9, 2020**

	Program	FY 20/21 Approved Budget	EXPENDITURES					Total Expenditures	REVENUE				Total Revenue	Total Net Cost
			Salaries & Benefits	Services and Supplies	Other Charges	Fixed Assets	Operating Transfers		SAPT Block Grant and FDMC	2011 Realign	Medi-Cal FFP	Other		
1	SUDT Overhead	(34,700)		11,828				11,828	(318,431)		2,633	2,775	(313,023)	324,851
2	County Wide Services	133,177		4,278				4,278					0	4,278
3	Drug Court Services	0	12,050	17,034			0	29,084					0	29,084
4	Ukiah Adult Treatment Services	(206,211)	195,342	29,111			(22,428)	202,024			1,653	5,947	7,599	194,425
5	Women In Need of Drug Free Opportunities	0	45,355	3,633			(17,331)	31,656					0	31,656
6	Family Drug Court	(700)	80,807	2,499				83,306					0	83,306
8	Friday Night Live	0		2,563				2,563					0	2,563
9	Willits Adult Services	(3,725)	43,470	1,201				44,671					0	44,671
10	Fort Bragg Adult Services	(78,524)	102,903	25,004				127,907				640	640	127,267
11	Administration	670,826	170,569	104,019			(3,497)	271,092				9,096	9,096	261,995
12	Adolescent Services	(150,172)	25,490	1,268				26,758					0	26,758
13	Prevention Services	0	41,058	5,032			(2,550)	43,540				6,319	6,319	37,221
a	Total YTD Expenditures & Revenue	329,971	717,044	207,469	0	0	(45,806)	878,706	(318,431)	0	1,653	24,778	(289,368)	1,168,074
b	FY 2020-2021 Budget	329,971	2,419,195	1,169,467	49,000	0	(979,866)	2,657,796	1,138,861	617,501	50,000	521,463	2,327,825	329,971
c	Variance	0	1,702,151	961,998	49,000	0	(934,059)	1,779,090	1,457,292	617,501	48,347	496,685	2,617,193	



Report to the Behavioral Health Advisory Board November 2020

1. Staffing

Every agency is currently experiencing openings for provider staff, and we are not receiving much interest from qualified applicants. This at the same time that referrals are extensive and there are lots of people struggling. We continue to brainstorm recruiting strategies and any and all means of rectifying/addressing this problem with strategies including bringing back clinicians as contractors, working on cooperative hiring plans, and reassigning clinical staff to meet current levels of service demand.

2. Audits

The annual review by the External Quality Review Organization is taking place this week.

3. Meetings of Interest

All meetings and conferences have been taking place over zoom. We are meeting twice a week with agency providers. We continue to participate in the weekly Multidimensional Team meeting (including Child welfare, agency providers, probation, education, and public health) regarding placement/service needs for foster youth.

4. Grant opportunities

No new opportunities have come to our attention. Agencies are the main entities that respond to grant opportunities. RQMC will be actively looking for means of obtaining grant funding to support our adult residential sites, where expenses, client needs, and maintenance problems are problematic an additional funding steam will be needed.

5. Significant Projects/brief status

Agencies have been working to support vulnerable homeless people during Covid-19 and reaching out to students who have not been in school and might feel isolated or stressed at home. Several children's agencies have developed contracts with various school districts to meet the needs for support and counseling brought about by the pandemic. Agencies have been checking in with clients regularly to monitor their mental health.

RQMC has submitted our response for the Administrative Service Organization RFP.

Our Whole Person Care team presented at a Care First conference recently.

6. Educational Opportunities

Nothing to report at this time. RQMC notifies agencies of relevant trainings, which are essentially being provided virtually.

7. LPS Conservatorships

We continue through RCS, in collaboration with BHRS, to provide housing options, both in Ukiah and Willits for conserved clients. We are working with the Public Guardian's office to reduce the costs associated with conserved clients' housing. Regular meetings enable monitoring and review of clients in high need and those ready to step down to lower levels of care.

8. We continue to monitor contracts and client services provided through each of our contract agencies. We will be conducting year end contract meetings with each agency as possible.

9. Medication Support Services

Medication management services are continuing with mostly telehealth or phone sessions. Injection clinics continue in person with health precautions. Our medication management has been functioning collaboratively and efficiently. The team continues to be very flexible in ensuring clients are able to be seen as needed.

Mendocino County Behavioral Health and Recovery Services

Mental Health Services Act (MHSA) Stakeholder Forum & Quality Improvement Committee (QIC) Schedule for 2020/2021

As part of the Community Program and Planning (CPP) Process, Mendocino County holds a series of stakeholder meetings for consumers, their families, County staff, service providers, and the community to provide the County MHSA/QIC team with input for program needs and challenges.

Dates & Times:	Locations:
August 26, 2020 4:00 - 6:00 pm	Remote Meeting: ZOOM https://mendocinocounty.zoom.us/j/98377464690
October 14, 2020 3:00 - 5:00 pm	Remote Meeting: ZOOM https://mendocinocounty.zoom.us/j/94217963247
December 9, 2020 10:00 am - 12:00 pm	Remote Meeting: ZOOM https://mendocinocounty.zoom.us/j/92069894869
February 3, 2021 5:00 - 7:00 pm	Remote Meeting: ZOOM https://mendocinocounty.zoom.us/j/91627856085
April 7, 2021 2:00 - 4:00 pm	Remote Meeting: ZOOM https://mendocinocounty.zoom.us/j/91950855988
June 2, 2021 4:00 - 6:00 pm	Remote Meeting: ZOOM https://mendocinocounty.zoom.us/j/92072559534



If you have any questions please contact:

Rena Ford (MHSA) at:

FordRe@mendocinocounty.org or 707-472-2724

Caitlin Colby (QIC) at:

ColbyC@mendocinocounty.org or 707-472-2370



WELLNESS • RECOVERY • RESILIENCE



**California Association of Local Behavioral Health
Boards and Commissions**

November 2, 2020

ATTN: Jenine Miller or current Mendocino County BH Director
RE: 2020-21 CALBHB/C Dues Invoice

Dear Jenine:

Attached is the dues invoice for the Mendocino County Behavioral Health Board. (The 2020-21 Dues Schedule shows the dues amount for all 59 members: www.calbhbc.org/dues)

Special Note re: Allocating to MHSA Community Program Planning (CPP): [CA WIC 5604.3](#) allows for mental/behavioral health board/commission expenses to be paid using MHSA planning and administrative revenues. (Planning costs may be up to 5% of MHSA annual revenue.)

CALBHB/C depends on revenue from dues to help provide the following:

1. Outreach, support, resources, training and organized advocacy among California's 59 local mental/behavioral health boards and commissions.
2. Prompt response to [technical](#) and [issue](#)-based questions.
3. High-quality training materials (including on-line modules) and resources on our website: www.calbhbc.org/training. Binders and printed copies are mailed upon request.

Involvement with CALBHB/C makes our organizations better able to achieve a common objective: to provide effective mental/behavioral health resources in local communities throughout California.

Thank you for supporting the work of the Mendocino County Behavioral Health Board.

Please do not hesitate to contact me.

Best Regards,

Theresa Comstock, Executive Director
CA Association of Local Behavioral Health Boards & Commissions
717 K Street, Suite 427 Sacramento CA 95814
Office: 916-917-5444, Cell: 707-688-5197
www.calbhbc.org



**California Association of Local Behavioral Health
Boards and Commissions**

INVOICE

DATE: November 2, 2020

ATTN: Jenine Miller or current Mendocino County BH Director

FOR: 2020-21 CALBHB/C Membership Dues for the Mendocino County Behavioral Health Board

Special Note re: Allocating to MHSAs Community Program Planning (CPP): CA WIC 5604.3 allows for mental/behavioral health board/commission expenses to be paid using MHSAs planning and administrative revenues. www.calbhbc.org/legislation-mhb-wic

TOTAL DUES: \$600

Please send remittance to: **CALBHB/C, 717 K Street, Suite 427, Sacramento, CA 95814.**

Checks can be made payable to: CALBHB/C.

Federal Taxpayer ID Number: 33-0581682
W-9 Form will be provided upon request.