

MENDOCINO COUNTY BEHAVIORAL HEALTH ADVISORY BOARD

Chairperson Michelle Rich

Vice Chair

Meeka Ferretta

Secretary

Jo Bradley

Treasurer Richard Towle

BOS Supervisor Carre Brown

REGULAR MEETING

MINUTES

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

Join Zoom Meeting: https://mendocinocounty.zoom.us/j/98557737710

<u>Call in:</u> +1(669) 900-9128 or +1(346) 248-7799

Webinar ID: 985 5773 7710

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1 ST DISTRICT:	2 ND DISTRICT:	3 RD DISTRICT:	4 TH DISTRICT:	<u>5тн DISTRICT:</u>
DENISE GORNY	MICHELLE RICH	Meeka Ferretta	JULIA EAGLES	MARTIN MARTINEZ
LOIS LOCKART	SERGIO FUENTES	Amy Buckingham	VACANT	Flinda Behringer
RICHARD TOWLE	VACANT	VACANT	VACANT	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.	Call to Order, Roll Call & Quorum Notice, Approve Agenda:	Board Action:
5 minutes		Motion made by
	• Meeting called to order by Chair Rich at: 3:05 PM.	Member Gorny,
	 Members present: Bradley, Eagles, Ferretta, Gorny, Fuentes, 	seconded by
	Martinez, Lockart, and Towle.	Member Bradley to
	 Agenda approved as written. 	approve the agenda
		as written. Motion
	The state of the s	passed.
2.	Minutes of the October 21, 2020 BHAB Regular Meeting: Review	Board Action:
5 minutes	and possible board action.	Motion made by
		member Lockart,
	Minutes approved as written.	seconded by
		Member Gorny to
		approve the October
		21, 2020 BHAB
		minutes as written.
		Motion passed.

3. 10 minutes (Maximum)	Public Comments: 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 . No public comments	Board Action:
	be recognized at this time. Any additional comments will have to be provided through email to bhboard@mendocinocounty.org. No public comments. Measure B Discussion: Possible board action. A. Measure B October Meeting Report I. BHRS Director Miller commented on the additional costs Measure B is being asked to pay for internal staffing. She explained that all non-general funded programs have to pay A-87 costs, which means they have to pay for services other county departments provide. a. BHRS offered to support Measure B, but under the agreement that BHRS would bill on a per minute rate, not for free. BHRS began to bill for the support and the Measure B Committee started questioning this, and would like BHRS to cover the costs. II. Discussion on Measure B paying for the staff support BHRS provides; BHRS Director Miller would like the BHAB's feedback on what they believe Measure B should and should not pay for. III. Discussion on the board writing a letter to Measure B to summarize some of their concerns. The board would like to express they do not support BHRS paying for Measure B staff support, to provide feedback on the importance of providing a CIT training at the training center, and to ensure follow through with Brown Act regulations. a. Chair Rich and Member Bradley will work on the letter to Measure B. b. BHRS Director Miller shared there will be an in-person CIT training that will be provided by the Sheriff's office. Measure B will be asked to pay the costs for the CIT training. c. All of BHRS trainings have been through Zoom, and will continue to be through Zoom due to Covid. B. Behavioral Health Training Center: Alyson Bailey, Measure B Project Manager I. Alyson Bailey absent from today's meeting. II. BHRS Director Miller reported that there was a request to have a strategic plan written to detail out the projects and the priorities of Measure B projects. III. Progress on the training center has stopped due to in-person trainings unable to happen currently due to Covid. a. A decision need	Motion made by Member Gorny, seconded by Member Bradley to write a letter to the Measure B Committee regarding Measure B staff support expenses, to encourage a CIT training, and ensuring Brown Act follow through. Motion passed.
	 and which one to prioritize. b. The BOS has financial concerns, as they really need to know if the training center is more important than bringing a PHF to the community. If facilities are the top priority, the county needs to make sure it can afford them 	

	before putting money in other places.	
	IV. The training center is ready to be used today as is, there are	
	only additional modifications being asked for, but these	
	additional modifications are not necessary to operate.	
5.	Mendocino County Report: Jenine Miller, BHRS Director	Board Action:
15 minutes	A. Director Report Questions	
	I. Director report included in agenda packet.	
	II. BHRS just finished the External Quality Review	
	Organization (EQRO) yearly evaluation review. This is a	
	yearly audit that evaluates how BHRS is meeting client care	
	expectations. Results (findings and recommendations) of	
	this audit will be shared with the BHAB once they are	
	received. A report is not expected until at least January, but	
	it can take up to 6-9 months.	
	B. Budget Update	
	I. BHRS continues to monitor the budget, could see additional	
	impacts due to COVID.	
	C. Mental Health Project Updates	
	I. Crisis Residential Treatment (CIT) facility: the CRT	
	construction bid will be awarded at tomorrow's BOS	
	meeting. The bid is below what was originally projected for	
	budget, and the plan is to have it up and operating by	
	November 2021.	
	II. Best Western: The State awarded funds to several counties	
	to purchase and renovate hotels and turn them into	
	transitional and permanent housing; Mendocino County was	
	awarded around 9 million dollars. This is not for a specific	
	population, but rather it will be available to anybody who is	
	homeless and looking for somewhere to live.	
	a. There is a town hall meeting tonight with Senator	Lili will send out t
	McGuire at 6:30 PM to provide additional information	link to the town ha
	and answer questions from the community	
	b. Discussion on community concerns on the population	meeting to members.
	who will be housed there and how it will impact the	members.
	community in that area.	
	III. Whitmore Lane: The old nursing facility on Whitmore Lane	
	was purchased by the county. It is currently being used for	
	people with Covid who need to quarantine/isolate and do not	
	have a place to do so. The ultimate goal for this facility is to turn it into a Substance Use Disorder treatment, like a	
	residential sober living environment focused on women and	
	children. Substance Use Disorder Treatment Quarterly Penert: Randy	Board Action:
6.	Substance Use Disorder Treatment Quarterly Report: Rendy	Board Action.
15 minutes	Smith, SUDT Acting Deputy Director	
	A. Rendy Smith joined the BHAB for a quarterly report on	
	Substance Use Disorder Treatment.	
	I. Rendy reported on September 2020 SUDT data:	
	• A total of 99 clients were served, for a total of 639	
	services provided	
	 Fort Bragg: 19 clients for a total of 124 services 	

	 Ukiah: 67 clients for a total of 470 services Willits: 13 clients for a total of 45 services 9 successful treatment completions, 18 clients left before completion, 1 referral was made. Average length of service was approximately 144 hours. II. Rendy shared that there has been a reduction in numbers due to Covid impacts, but clients are getting more and more comfortable with how services are currently being provided. III. Discussion on how services are being provided in outlying areas of the County. a. SUDT has 2 full time counselors in Fort Bragg, and has 	
	been able to implement intensive outpatient services as well as outpatient services. Fort Bragg also offers pre-trial diversion services. This is the first time Fort Bragg has ever had these services available. SUDT has also been able to expand the population served in Willits. IV. In terms of Covid impacts, what is going well for SUDT and what are some of the challenges being faced? a. Rendy shared it was difficult to switch over to virtual services, but with time it has become easier and have been successfully able to connect with clients virtually. Drug testing continues to be a challenge, as it has to be done in 10 minute increments making sure all safety measures are taken.	
2 minutes	Stretch Break	
7.	RQMC Report:	
10 minutes	 A. Data Dashboard Questions I. Included in agenda packet. B. Services Update RQMC is working closely with providers to evaluate clients served and outreach and engagement. There have been significant challenges with recruitment efforts, due to clinicians not working during COVID. Tim is working with providers to share client plans and make sure everyone is getting what they need. Crisis has been relatively stable, but referrals for outpatient have significantly increased. Clinical trainings for mentoring/coaching to support the new Clinical Directors. School based Mental Health services were just launched through the Children System of Care grant, continues to move forward. Pushback on homelessness, RQMC will be holding an emergency meeting for community input on the homeless crisis in our County. Discussion on the yearly trends report and the number of unduplicated clients. Camille explained that unduplicated 	
	clients are clients that are not new to that month, but rather all clients for that month. Camille will follow up in regards to the drastic drop in number of clients served from June to	

	July.	
		D 14.
8. 15 minutes	Assisted Outpatient Treatment (AOT) Presentation: Karen Lovato, BHRS Acting Senior Program Manager A. Karen Lovato joined the BHAB to give an informational presentation on Assisted Outpatient Treatment (AOT) in Mendocino County. I. In November of 2014 the BOS voted to approve an AOT pilot program adopted from Nevada County and Orange County's AOT program. The county did the pilot project for 1 year, and it was fully implemented after that. Based on Nevada County's numbers, Mendocino County was expected to have 4 clients per year in AOT. II. AOT therapeutic component: In most cases there is some sort of legal action or criminal activity that has led to the individual being in front of the court, which determines a therapeutic component of behavioral health that can reduce the individuals likelihood of recidivism or re offending, etc. III. Criteria necessary to meet requirements for AOT: • Must be18 years or older • Serious Mental Illness – have or believe to have a serious mental illness (meeting the medical necessity for specialty mental health services) • Unlikely to survive in the community without supervision. • History of non-compliance as evidenced by history of hospitalizations, incarcerations, or very serious acts of harm to self or others • Substantially deteriorating • Likely to become gravely disabled or cause serious harm without treatment • Failing to engage in treatment • Failing to engage in treatment • Likely to benefit from AOT V. Regulations have very specific numbers around incarcerations, number of hospitalizations. VI. Referrals: The referring party is expected to appear in court and testify to the criteria. Mendocino County has an open door policy, so have not made it as strict as regulation allows. The referral form is available on the Behavioral Health website, or by contacting BHRS AOT Coordinator Melinda Driggers or Karen Lovato. VII. The County keeps the AOT process referral triage portion, and the AOT Coordinator works on collecting additional information to ensure whe	Board Action:
	to do.	
	history and level of engagement, if possible to engage the client in lower level of care, then that is what the AOT tries	

	petition gets filed at the court and goes before the Judge. The Judge reviews the assessment and criteria to determine if individual can be referred into AOT. IX. AOT requires that if an individual meets AOT criteria, housing will be offered for that individual if client is in need of housing. B. There are 2 legal pathways for AOT to happen: One is court ordered treatment (when individual referred is disengaged and refusing to cooperate with treatment), the other is settlement agreement pathway (when individual has been disengaged, but once in court process, they agree to cooperate with the AOT intensive treatment process). I. So far, all of Mendocino County's AOT referrals that have qualified have gone into a settlement agreement process. C. Data from 2018/19 State report: I. 24 total referrals, 1 met criteria, 1 was engaged in services, 1 referral the county was unable to make contact with. II. 19 were ineligible, but were able to be engaged in services. III. Predominantly, referrals have been female, in the 26-59 age range, and majority of referrals identifying with White ethnicity. IV. Yearly average for AOT referrals is low twenties. D. Referrals are available in Spanish, and services delivered to individuals would be provided in Spanish if individual speaks Spanish. I. AOT care plans are tailored to individual client needs, including cultural needs. This is developed with the client as part of their care plan.	
	II. Camille commented that RQMC has Native and bilingual	
	providers.	
9. 15 minutes	Board Reports: Discussion and possible board action. A. Chair – Michelle Rich 1. 2020 Annual Report Draft ii. Chair Rich shared a working draft of the 2020 BHAB annual report, and asked the board for feedback. iii. Member Towle recommended the process to get it in front of the BOS gets started now, to possibly include in BOS February agenda. iv. Chair Rich will bring the final report to next month's meeting, and will follow up with Executive Committee meanwhile for feedback/recommendations. 2. California Behavioral Health Planning Council 2020 Data Notebook Survey Follow Up i. Two data points are missing for the Data Notebook, and then it will be ready for submission. Chair Rich will follow up at next month's meeting with completed Data Notebook survey.	Motion made by Member Towle, seconded by
	 California Association of Local Behavioral Health Boards and Commissions Yearly Dues Invoice The Board voted to continue the CALBHB membership. Membership Terms 	Member Fuentes to process the CALBHB yearly invoice and continue

	 ii. Member terms expiring on December 31, 2020: Amy Buckingham, Flinda Behringher, Denise Gorny, and Sergio Fuentes. iii. Members need to let Lili know by written consent if they are planning to renew their BHAB term as soon as possible. B. Vice Chair – Member Ferretta Absent from today's meeting. C. Treasurer – Member Towle BHRS Fiscal corrected the misunderstanding of last month's BHAB ledger. D.Membership Committee: No report. 	membership. Motion passed.
10. 10 Minutes	Member Comments: A. Member Martinez asked the board for approval for funds to purchase and deliver 3 plaques for previous board members Emily Strachan, and Dina Ortiz, as well as Supervisor Caree Brown.	Board Action: Motion made by Member Martinez, seconded by Member Gorny to purchase and deliver 3 plaques to not exceed \$200. Motion passed.
11.	Adjournment Next meeting: December 14, 2020 from 3:00 – 5:00 PM	Motion made by Member Martinez, seconded by Member Gorny to adjourn the meeting. Motion passed.

AMERICANS WITH DISABLITIES ACT (ADA) COMPLIANCE

The Mendocino County Behavioral Health Advisory Board complies with ADA requirements and upon request will attempt to reasonably accommodate individuals with disabilities by making meeting material available in appropriate alternative formats (pursuant to Government Code Section 54953.2). Anyone requiring reasonable accommodations to participate in the meeting should contact the Mendocino County Behavioral Health Administrative Office by calling (707) 472-2355 at least five days prior to the meeting.

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

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

Michelle Rich, BHAB Chair

Lilian Chavoya, BHRS Administrative Secretary

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