



**MENDOCINO COUNTY  
BEHAVIORAL HEALTH ADVISORY BOARD**

**REGULAR MEETING**

**MINUTES**

**January 26, 2022  
10:00 AM – 12:00 PM**

**Chairperson  
Michelle Rich**

**Vice Chair  
Flinda Behringer**

**Secretary  
Jo Bradley**

**Treasurer  
Richard Towle**

**BOS Supervisor  
Mo Mulheren**

Zoom Meeting:

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

Call in:

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

Webinar ID: 985 5773 7710

<b>1<sup>ST</sup> DISTRICT:</b> DENISE GORNY LOIS LOCKART RICHARD TOWLE	<b>2<sup>ND</sup> DISTRICT:</b> MICHELLE RICH SERGIO FUENTES VACANT	<b>3<sup>RD</sup> DISTRICT:</b> MILLS MATHESON JEFF SHIPP LARANN HENDERSON	<b>4<sup>TH</sup> DISTRICT:</b> JULIA EAGLES VACANT VACANT	<b>5<sup>TH</sup> DISTRICT:</b> FLINDA BEHRINGER JO BRADLEY MARTIN MARTINEZ
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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."*

	Agenda Item / Description	Action
<b>1.</b> 3 minutes	<b>Call to Order, Roll Call &amp; Quorum Notice, Approve Agenda:</b> <ul style="list-style-type: none"> <li>○ Chair Rich called the meeting to order at 10:05 AM.</li> <li>○ Members present: Behringer, Bradley, Eagles, Gorny, Henderson, Lockart, Martinez, Towle, and Chair Rich.</li> <li>○ Agenda approved as presented.</li> </ul>	Board Action: Motion made by Member Martinez, seconded by Member Bradley to approve the agenda as presented. Motion passed unanimously.
<b>2.</b> 2 minutes	<b>Approval of Minutes from the November 17, 2021 BHAB Regular Meeting:</b> <i>Review and Possible Board Action.</i> <ul style="list-style-type: none"> <li>○ Minutes approved as presented.</li> </ul>	Board Action: Motion made by Member Behringer, seconded by Member Towle to approve the 11/17/21 BHAB



		meeting minutes as presented. Motion passed.
<b>3.</b> 10 minutes (Maximum)	<p><b>Public Comments:</b> <i>Members of the public wishing to make comments to the BHAB will be recognized at this time. Any additional comments can be provided through email to <a href="mailto:bhboard@mendocinocounty.org">bhboard@mendocinocounty.org</a>.</i></p> <ul style="list-style-type: none"> <li>○ John Wetzler: CA Supreme Court issued a finding in case Steeveti vs Clint Denon. The ruling stated that the holding of defendants in local county jails who have been deemed incompetent to stand trial by Superior Court judges is cruel and unusual punishment. Many of these defendants often spend months in solitary confinement separated from the jail population awaiting a bed in the State Hospital system. How to conform legal system to the needs of our MH system. John suggests an increase in the number of beds in the State Hospital System. This would require a letter to State Senators, Governor, etc. John would also like a support letter from this board, BH Director Jenine Miller, as well as the Sheriff's department. <ul style="list-style-type: none"> <li>- BHRS Director Miller reports that the law did change in 2022 for misdemeanor offenses in regards to competency to stand trial.</li> <li>- Chair Rich asked John to send this Letter to Lili and that this item be included in the next BHAB meeting agenda.</li> </ul> </li> <li>○ Deborah Rogers, Carmen Price: Will be joining BHAB meetings every month along with peers. Deborah and Carmen thanked the board for all of their work.</li> <li>○ Richard Towle: Member Towle reports he found a psychiatrist that accepts Medicare in Mendocino County: Dr. Stephen Vance with Mendocino Hillside Health Clinic.</li> <li>○ Jo Silva: There are very few available private psychiatrists in Mendocino County. It is very difficult to get any type of treatment other than medication treatment. Would like to know if there are better techniques to bring more psychiatrists to Mendocino County.</li> </ul>	Board Action: None.
<b>4.</b> 5 minutes	<p><b>A. Resolution Authorizing Remote Behavioral Health Advisory Board Meetings:</b> <i>Discussion and Possible Board Action.</i></p> <ul style="list-style-type: none"> <li>○ The board approved to hold the February BHAB meeting via Zoom.</li> </ul>	Board Action: Motion made by Member Bradley, seconded by Member Towle to hold the February BHAB meeting via Zoom. Motion passed.
<b>5.</b> 25 minutes	<p><b>Mendocino County Report:</b> <i>Jenine Miller, BHRS Director</i></p> <p>A. Director Report Questions</p> <ul style="list-style-type: none"> <li>- Director's report included in agenda packet.</li> </ul>	Board Action: None.

	<ul style="list-style-type: none"> <li>- BHRS Director Miller reports that there continues to be an increase in LPS conservatorships. Spending more than what was projected for this fiscal year. Have spent 1.6 million dollars in LPS costs from July-Dec 2021.</li> <li>- NAMI suicide prevention yard signs are available for interested board members.</li> </ul> <p>B. Staffing Update</p> <ul style="list-style-type: none"> <li>- Recruiting and attempting to hire more staff. There is a mental health crisis across the state of California, very difficult to hire mental health professionals currently.</li> <li>- There is proposal to build a consortium in Mendocino County, BHRS Director Miller has been discussing with the Mendocino Hillside Health Clinic and RQMC to try to build the consortium to bring more professionals to Mendocino County.</li> </ul> <p>C. CalAIM</p> <ul style="list-style-type: none"> <li>- CalAIM is an expansion of Medi-Cal. Currently, beneficiaries that have Medicare or private insurance struggle to get mental health services in Mendocino County. The state is currently working on parity requirements across the system of care to create a standard care requirement across the system. With CalAIM, for Medi-Cal it is supposed to provide more services for all levels of care. Mental Health Plans (MHP) only provide Specialty Mental Health (SMH) services to those who meet criteria. The mild to moderate population is served through Beacon and Partnership. CalAIM expands Medi-Cal services, and changes medical necessity so more people can qualify for mental health services. It also adds access criteria for SMH. The state created enhanced care management (ECM) and community supports. PHP is supposed to rule out an ECM and community support model, and are contracting with providers in Mendocino County to serve those individuals that meet the criteria, this is a new benefit that was not offered before.</li> <li>- There will also be documentation changes for the way the county documents and bills for services. The state is currently working to develop a rate structure and counties are hopeful this will allow the opportunity to increase staff salaries and services.</li> <li>- Discussion on how CalAIM impacts a mild to moderate clients.</li> <li>- The county will not know if there are any downsides to CalAIM until it fully rolls out, but will continue to provide more information and updates.</li> </ul>	
<p><b>6.</b> 10 minutes</p>	<p><b>Psychiatric Health Facility (PHF) Feasibility Study Update:</b> <i>Jenine Miller, BHRS Director</i></p> <p>A. BHRS and partners (county General Services and Facility and Fleet departments, Nacht &amp; Lewis, AECOM, LACO) presented the feasibility study and a recommendation to the BOS yesterday.</p> <p>I. The team looked at 3 options for the feasibility study of Whitmore lane: rehabbing the current building, demolishing and rebuilding the current building, or if a whole different site should be considered. Because of the way the current building is set up, it does not provide the ideal security and oversight</p>	<p>Board Action: None.</p>

	<p>for patient care for a PHF. Different rooms are needed for different meeting environments. BHRS also wants to make sure that NAMI Mendocino can have an office on site so they can connect with individuals and family members from day one to help them get connected to services.</p> <p>II. BHRS Director Miller wants to reduce the impact on Whitmore Lane since it is a small residential lane. The option of demolishing the building has a lot of benefits and allows for the entrance to be situated off of State Street and also allows for the creation of a fence to create more privacy.</p> <p>III. Taking into consideration the overall impacts and best interest long term for the county, the community, and the PHF residents, the team concluded option 2 (demolishing and rebuilding the building) is the best option, and this is the option that was presented to the BOS.</p> <p>IV. The BOS voted to move forward with the recommendation. <ul style="list-style-type: none"> <li>o The projected timeline is 38 months. It will be a super PHF (will meet Medicare and Medi-Cal requirements), and will allow the facility to bill private insurance, Medicare, and Medi-cal. It will be a 16 bed facility.</li> </ul> </p> <p>V. Discussion on the pilot program to create an alert system so law enforcement can notify mental health staff when they run into someone that needs outreach, so that mental health staff or the homeless outreach team can reach out and assist the individual.</p> <p>VI. NAMI has a new Executive Director Lindsey Daughter. She will be invited to speak to the Board once she is settled in to her new position. NAMI plans to take over the Warmline, which was the original plan.</p> <p>VII. Community training in process, NAMI and BHRS are working on de-escalation training. This is a training Supervisor Mulheren requested for the community and will be offered to the entire community.</p> <p>VIII. Jo Silva: Having family be involved is super important for ongoing relationship; this type of connection does not usually happen so it will be very important for NAMI to be at the PHF. Community training is a good idea.</p>	
<p><b>7.</b> 15 minutes</p>	<p><b>Mental Health Services Act Quarterly Update – Karen Lovato, BHRS Senior Program Manager</b></p> <ul style="list-style-type: none"> <li>o MHSA quarterly update present by Karen Lovato.</li> <li>o This update predominantly focuses on Prevention and Early Intervention (PEI) and Community Services and Supports (CSS) data.</li> <li>o Data presented included: <ul style="list-style-type: none"> <li>- Age population (predominantly serving age 26-59)</li> <li>- US census percentage by age</li> <li>- Race</li> <li>- Ethnicity</li> <li>- Gender breakdown (predominantly females in PEI and males in CSS)</li> </ul> </li> </ul>	<p>Board Action: None.</p>

	<ul style="list-style-type: none"> <li>- Total number of individuals served</li> </ul> <p>Other:</p> <ul style="list-style-type: none"> <li>o Karen reports there is a possibility of doing a Performance Improvement Project on how to collect data to be more reflective.</li> <li>o Subsequent to FY 21 -22 Safe Passage is closing.</li> </ul>	
<p><b>8.</b> 10 minutes</p>	<p><b>RQMC Report:</b> <i>Camille Schraeder, Redwood Quality Management Company</i></p> <p>A. Data Dashboard Questions – report included in agenda packet.</p> <p>B. Services Update</p> <ul style="list-style-type: none"> <li>o Camille commented on the CalAIM discussion from Director Miller’s report. <ul style="list-style-type: none"> <li>- ECM was supposed to be a full integration of the Whole Person Care (WPC) pilot but it is not. Referrals will be sent to PHP, need to be accepted, honor the criteria, and then authorizes a provider to serve. Trying to transition 185 SMI compromised clients that are currently linked to a MH provider and primary care provider, and WPC is filling that gap. RQMC’s goal is to continue that platform even with the reduced rate and increased narrow way in. Will need to make sure to monitor PHP closely. ECM has now extended to anyone who qualifies but a provider is needed and providers need to become ECM providers. RQMC’s focus are SMI clients.</li> <li>- Assertive community treatment (ACT) – Camille reports RQMC is currently working on this.</li> </ul> </li> </ul> <p>C. Staffing Update</p> <ul style="list-style-type: none"> <li>o Camille reports staffing issues have not improved, and the current COVID surge has impacted all agencies. Camille commented the level of stress and impact this has on providers is the new normal and agencies will have to adapt to the new way to provide care. Daily calls and check-ins between all agencies are very helpful. All client plans can be shared by multiple agencies and can be coordinated at MAC meetings or daily calls. Helps manage workload and provide services.</li> </ul>	Board Action: None.
<p><b>9.</b> 10 minutes</p>	<p><b>Children’s System of Care:</b> <i>Board Discussion and Possible Action.</i></p> <p>A. Ad Hoc Committee Formation</p> <ul style="list-style-type: none"> <li>o Tabled.</li> </ul>	Board Action: None.
<p><b>10.</b> 15 minutes</p>	<p><b>2022 BHAB Ad Hoc Committees:</b> <i>Board Discussion and Possible Action.</i></p> <p>A. Advocacy and Legislation Committee</p> <p>B. Appreciation Committee</p> <p>C. Contracts Committee</p> <p>D. Data Notebook</p> <p>E. Membership Committee</p> <p>F. Site Visit Committee</p> <p>Item tabled due to lack of time, will follow up at next month’s meeting.</p>	Board Action: None.
<p><b>11.</b> 15 Minutes</p>	<p><b>Board &amp; Committee Reports:</b> <i>Discussion and Possible Board Action.</i></p> <p>A. Chair – <i>Michelle Rich</i></p>	Board Action: None.



	<ul style="list-style-type: none"> <li>○ 2021 BHAB Annual Report <ul style="list-style-type: none"> <li>- Tabled.</li> </ul> </li> <li>○ 2022 BHAB Calendar/Meetings <ul style="list-style-type: none"> <li>- The February meeting will be on February 23, 2022 at 10:00 AM – 12:30 PM via Zoom.</li> <li>- Lili will send a Doodle poll to all members of the board to determine the best day/time of the month for the remainder of 2022 BHAB meetings.</li> </ul> </li> </ul> <p>B. Vice Chair – <i>Flinda Behringer</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul> <p>C. Secretary – <i>Jo Bradley</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul> <p>D. Treasurer – <i>Richard Towle</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul> <p>E. Advocacy &amp; Legislation Committee – <i>Member Bradley, Chair Rich</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul> <p>F. Appreciation Committee – <i>Member Fuentes &amp; Martinez</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul> <p>G. Contracts Committee – <i>Member Fuentes, Vice Chair Eagles, Chair Rich</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul> <p>H. Membership Committee – <i>Member Behringer, Bradley, Eagles, Gorny, &amp; Chair Rich</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul> <p>I. Site Visit Committee - <i>Member Behringer, Fuentes, Martinez, &amp; Towle</i></p> <ul style="list-style-type: none"> <li>○ No report.</li> </ul>	
12.	<p><b>Member Comments:</b></p> <ul style="list-style-type: none"> <li>○ No member comments</li> </ul>	Board Action: None.
13.	<p><b>Adjournment: 12:05 PM</b></p>	Board Action: Motion to adjourn meeting at 12:05 PM. Motion: Julia Eagles, second: Richard Towle, motion passed.

**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.

**BHAB CONTACT INFORMATION:**

**PHONE: (707) 472-2355 | FAX: (707) 472-2788**

EMAIL THE BOARD: [bhboard@mendocinocounty.org](mailto:bhboard@mendocinocounty.org) | WEBSITE: [www.mendocinocounty.org/bhab](http://www.mendocinocounty.org/bhab)

Michelle Rich

Michelle Rich, BHAB Chair

2/23/2022

Date

Lili Chavoya

Lili Chavoya, BHRS Admin Secretary

2/23/2022

Date