



Merced County Mental Health Board Meeting
February 4, 2014
3:30 – 5:00 pm
1137 B Street, Merced, CA

Present:	Cora Gonzales, Chair; Richard Hawthorne, Vice-Chair; Iris Mojica de Tatum, Secretary; Mary Ellis; Sally Ragonut; James Fuller; Jan Morita; Keng Cha; Mary Hofmann; Kim Carter; Vince Ramos; David Baker, Supervisor Walsh
Absent:	Audrey Spangler; Chuck McClure
Others Present:	Scott De Moss; Curt Willems; Chris Kraushar, PRA; Sharon Jones; Mike Zdanowski; Sharon Robinson; Kurt Craig; Claudia Rodriguez; Carol Hulsizer, Recorder

MINUTES

I. Call to Order / Flag Salute / Roll Call

Cora Gonzales, Chair, called the meeting to order at 3:30 p.m. The flag salute was done. Roll call was taken.

II. Mission Statement

Iris Mojica de Tatum read the Mission Statement.

Cora shared the following statement – “Minds are like a parachute – they only function when open”, the author Thomas D.

III. Approval of Minutes from January 14, 2014 (BOARD ACTION)

Action/Recommendation: M/S/C (Ellis / Fuller) to approve the minutes from January 14, 2014.

IV. Approval of Agenda for February 4, 2014 (BOARD ACTION)

Action/Recommendation: M/S/C (Hawthorne / Fuller) to approve the February 4, 2014 agenda.

V. Opportunity for public input. At this time any person may comment on any item which is not on the agenda.

Discussion/Conclusion: Vince received a letter from Alliance. They have a format and will cover mental health and drug and alcohol recovery. Alliance and Beacon Insurance have qualifications that the clients have to meet; but they will be covered under Alliance for mental health services.

Vince discussed the policy for the Wellness Center. At one time they tracked outpatients because they were given case workers. Vince questioned Curt if outpatients can go back into the Wellness Center; he knows that there was a tracking problem and capacity problem. One time they surpassed the capacity and they were supposed to go to the CUBE but since there was not enough room for the staff the Wellness Center stayed where it is at. Vince meant ‘outpatients’ as those who need maintenance, have an open case, and are not so severe – in the moderate group. They come in for groups, for therapy they see their caseworker, and then they socialize and participate in the functions at the Wellness Center for support. Curt said he was willing to look into this and bring back a report.

Vince questioned if the Auditors-Controller can tell the Board what is happening with the MHSA money; how they figure benefits, especially bonuses for the staff. Scott stated that he is not sure about bonuses. When they have approved projects or programs or staffing in MHSA, that is what is paid out of MHSA dollars. If a clinician does PEI out in the schools, when the MHSA plan is approved for the clinician, the County budget office tells the department that a clinician is “this” amount, and that is the amount that is plugged in. That amount covers their payroll expenses and their benefit expenses for the program. Whatever the County has in agreement to pay whatever classification that is put in the plan; those are the dollars that are put in the plan to pay for that expense. Iris asked the Director to address the topic of bonuses – County employees do not get bonuses. Scott stated that as far as he knows, County employees do not get bonuses. There are different pieces in the MOUs with differentials, longevity pay that happens once a year, and

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once a year, if the employee has a certain amount of sick leave, they can sell back a certain amount of sick leave. These are all factors that the County has negotiated with the unions. All this is factored into a position because the County is obligated to pay certain things because of the agreements with the unions. Scott is not aware of any bonuses.

Recommendation/Action: As noted above

VI. CUBE Report – Claudia Rodriguez

Discussion/Conclusion: Claudia is the Program Assistant at the CUBE. You have to be between 16 and 25 years of age in order to attend and they do not have to be open to Mental Health services. She passed around a monthly calendar that they do and it shows all the different activities there for the month. She continued that there is a published magazine called We’Ced and the editor is Andre Reyes. He publishes this magazine every three months and is asking if he can interview one of the team members as well as staff members for an article on the CUBE. Mr. Reyes gives these magazines away for free in the community. All the stories are about youth from Merced County youth. The current magazine has articles about rape culture, Obamacare, teen diabetes, teen parents and bullying. These are based on facts. It is a non-profit organization where teens get to express themselves in writing. There is a new Vocational Rehab Counselor, Mariella Gomez, and her role is to connect the youth with employment resources to get them employed, provide them with appropriate clothing, books for educational purposes, provides transportation (along with others in the CUBE who provide transportation), and she discusses with them what they want to start working on for the future.

Claudia was asked what “do not have to be open to Mental Health Services” means. She stated that it means it is open to the public as long as they are of age and they want to have some mental health services, they just want a place to be safe at, they want intervention or they want to attend some of the groups there.

Claudia was asked when most of the kids come in. She stated that the mornings are when staff do their clerical work. The facility is open from 10:00 to 5:00 and they all drop in between those hours. Some days are busier than others – depending on the groups they have. Daily they have anywhere from five to fifteen youth there throughout the day. She was then asked about a report from last month’s meeting on how many attend and whether that number is unduplicated people; Claudia stated that is an unduplicated number – a spreadsheet on attendance had been made to input all the information and it can only be input once. On an average they have about ten kids per day.

Claudia was asked how many staff are in the CUBE. There is one individual who is a Peer Mentor in the morning and a CAW in the afternoon and four other peer mentors.

Claudia was asked how they address gang issues at the CUBE. She replied that they work closely with Probation and the Day Reporting Center (DRC). The DRC youth are on an ankle monitors and on probation. Everyone is aware of why these youth are there and what their needs are. Some are gang affiliated and they talk with them about it – they do not allow them to bully anyone, cannot wear any colors and if anyone throws gang signs they are approached and given a warning. If it happens once they are asked to leave and if it happens twice, they would be suspended. They do have gang and drug prevention groups.

She was asked if the CUBE does any outreaching to help other youth. Claudia stated that they do. They were just at Atwater High and they had a good turnout. They are also having another presentation for the adult probation office to let them know what services the CUBE offers.

She was asked if the kids attending all wear ankle bracelets or are they attending just because they want to. Claudia stated that on Wednesdays and Fridays it is DRC kids and are there with their Probation Officer. The other days it is pretty much foster kids, group home kids and kids that receive services there. She was asked how many are receiving services beside the CUBE. She replied that all the DRC kids are open to Mental Health.

Another asked if they had any issues blending juveniles with adults. Claudia said they have not had any major issues. They do make sure that all TAY members are comfortable there. Sharon Jones commented that according to Lori Keegan, Lead at the CUBE, approximately 15-30 are currently being served. The services are individual therapy, case management, crisis intervention, vocational rehabilitation services for jobs and employment, and volunteer work. There is a variety of ethnicities – Caucasian, Asian, African-American, Hispanic, and multi-cultural. Some presenting problems vary depending on the TAY members; some examples are – driver’s license, complete school, an employment challenge, independent living, learning how to cook, addictions to overcome, learning to drive, enrollment in college, graduate from DRC program or Behavioral Health Court program, staying out of trouble, improvement in school, lower level of placement care, getting off probation, and transition from Valley Community schools. Most of the 15-30 attending

VI. CUBE Report – Claudia Rodriguez – con't.

are foster youth.
Claudia was asked if the kids are referred or how they know about the CUBE. Claudia stated that many times it is word of mouth, but they do get a lot of referrals from clinicians, Probation Officers, foster parents, and the high schools.

Recommendation/Action: Information only

VII. Chair's Report
a. Board Obligation Review

Discussion/Conclusion: a. Cora read the fourteen Board obligations: 1. To participate as partners with the local Mental Health program in all aspects of the community planning; 2. Board members should be hardworking, knowledgeable, committed, and interested in the mental health system; 3. Undivided allegiance to the organization when making decisions affecting the organization, 4. Conflict of Interest: should not use or appear to use, Board membership for purposes of private gain for themselves or family/business partners; 5. Confidentiality: should not inappropriately disclose (formally or informally) confidential information about the Mental Health Department to other persons, without Board approval; 6. Understand Mission Statement, Rosenberg's Rules of Order, By-Laws and the Brown Act; 7. Understanding and complying with Policies and Procedures; 8. Listen first, talk second; 9. Should have a good working relationship with the Director and Mental Health Department; 10. Make every effort to attend all meetings in order to be an informed member of the Board; 11. Show passion, but control emotions; 12. Be respectful and courteous at all times; and 13. Know when and how to negotiate and compromise; 14. Cora added #14 which is not in the binder – They have an obligation to their checklist that they are doing all the appropriate things that they should be doing throughout the year. This is an ongoing, live document that needs to be continually looked at. Cora then read the attendance: Members are expected to attend all meetings of this Board and to participate in at least one sub-committee, Executive Committee, Membership Committee or special committee. A member who is unable to attend a given meeting shall give advance notice of his/her inability to attend either to the Board Chair or the Merced County Mental Health Department. The Board may recommend to the Board of Supervisors the replacement of any member who is absent from three consecutive regular meetings. At the last meeting evaluation was discussed and the Board does do a self-evaluation later in the calendar year. Cora then read advocacy: 1. Advocate for a strong and effective local mental health system; 2. Advocate for what will make things better, stronger and more effective; 3. Be clear about your message; 4. Know what you want to accomplish as a result of advocating; 5. Do your homework; 6. Develop strategic partnerships; 7. Speak from personal experience; and 8. Know when and how to negotiate and compromise.
Sally questioned if there is still a Calif. Mental Health Planning Council. Sharon Jones responded that there is.
David questioned term limits. He attended the CALMHB/C last month and they talked about Mental Health Board members serving two terms and then having to be removed. There was some discussion with no definite answer. Scott stated that he would put some bullet points together for the next meeting to cover this.

Recommendation/Action: As noted above

VIII. Supervisor's Report

Discussion/Conclusion: Supervisor Walsh reported that the County is currently working on ACA (Affordable Care Act). They are in discussions about hospital services because they were wrapped up in indigent care. They are discussing jail and juvenile hall services and potential eligibility. The Continuum of Care (homeless coordination efforts) will have a next-step meeting on February 24th from 1:00-3:00 at City Hall.

Recommendation/Action: Information only

IX. Director's Report
a. Federal / State Compliance
b. Fiscal Report – Sharon Robinson
c. Draft Tri-Annual Medi-Cal Audit

Discussion/Conclusion: b. Sharon R. put together a mid-year report for FY 13/14 which she went over. Sharon then answered questions on the report. a. & c. Scott felt that both items go together. In December the Department went through a tri-annual Medi-Cal audit. He had hoped that there would be a draft letter from the State by this date but nothing has been received yet. The oral exit interview did not go well. There were 131 items in the protocol that the State reviewed and we failed 31; this is compared to 3 failures

IX. Director’s Report – con’t.

at the audit three years prior. One of the key elements was staffing. The Department in this timeframe had significant turnover in some key positions along with vacant positions that play an instrumental role in our Quality Improvement program. Scott thinks we have a significant problem with not having enough people to do all the work that is required. Since this time, Scott has expedited hiring of the vacant positions as well as looking at possibly reclassifying one of the positions to what it used to be. The Department is going to work hard at assessing what they were doing three years ago, what they are doing now and what new requirements have been put in place that they are not currently meeting. Scott feels that going through this process, the QI team will be able to put the program back together. This will be Scott’s focus during his interim status with the Department. Since this evaluation, Scott has found at that we are not alone. Statewide compliance has become an enormous problem. At the last Mental Health Director’s Association meeting some statistics were shared by Carol Sakai who is the Chief of Compliance for the Dept. of Health Care Services over mental health programs. She pointed out some startling statistics. Looking at similar reviews over the last five years and comparing where they were then as compared to now as a State, in FY 07/08 there was an out-of-compliance average percentage of about 14%. As time moved on the percentage began to increase. Scott feels that many mental health systems experienced the same financial difficulties as Merced did. Two years later in FY 09/10 it was 19% and then in FY 12/13 the average was 25% of the items were out of compliance. Scott does not believe this is just Merced County’s problems – it is the whole system. This has not gone unnoticed by the Federal government. Also at the Director’s meeting a letter from the Centers for Medicare and Medicaid Services to Toby Douglas who is the Director of the Dept. of Health Care Services was shared. Under the ACA the State can get a five-year waiver if you already have a waiver in place and the State did file for the five-year waiver. The letter to Mr. Douglas stated that the sole reason the State did not get the five-year waiver was because of the Federal government’s concern about compliance and quality in our state. The letter also stated that they have met with State Dept. staff and feel their oversight programs are absolutely meeting the requirements the Feds want, it is the counties – the counties not paying attention to the quality improvement requirements and the EORO reviews. The counties now burden the State with having to do another waiver in two years instead of five. This means that county mental health systems across the State are going to be put under a magnifying glass. It is important that our QI Department begin to rebuild our QI compliance program. Today’s audits look at specific charts and services to disallow. There will likely come a time in the future when they start to spread a percentage of disallowance across a whole year or type of service. We are fortunate today that they did not do this – they kept the disallowances to the services they reviewed. Twenty charts were reviewed for a three-month period and the disallowance will be related to that – it will not be extrapolated.

Recommendation/Action: Information only

X. Committee Reports / Updates

- a. Quality Improvement Committee (QIC) (Sally / Mary E.)
- b. Executive / Bylaws / Planning Committee (Cora)
- c. Membership Committee (Kim)
- d. Patients’ Rights Advocate (Chris)
- e. Wellness Center Update (Chuck)
- f. CA Association of Local Mental Health Board/Chair (CALMHB/C) Update (David / Keng)
- g. National Alliance for the Mentally Ill (NAMI) (Jan)
- h. Children’s System of Care (CSOC) (Cora)
- i. MHSA Ongoing Planning Council (Sharon J. / Iris)
- j. Cultural Competency Committee (Mary H. / David)
- k. Community Partner’s Meeting (Vince / Mary E.)
- l. Alcohol and Other Drug (AOD) (Richard)

Discussion/Conclusion: a. Sally typed up the QI Committee report and passed copies around and went over it. Because Chuck was not present today to give a Wellness Center update, Sally commented that the new Chairperson, Elena, wants the Wellness Center clean and tidy. They have fundraising throughout the year. The LB Wellness Center staff can Skype with Merced Wellness Center during meetings. b. No report. c. Kim had nothing new to report. d. Chris had nothing new to report – same business as last month. e. Chuck was not present (Sally gave a small report). f. Per the recent CALMHB/C meeting, David is not a member yet, but he did go to the Finance Committee and Audit Committee meetings. The CALMHB/C has teamed up with CiMH to do the webinars and there was one January 25th here at B Street on MH Board 101-Roles & Responsibilities. The next webinars are March 22nd on Advanced MH Board Training and May 17th on Effective Advocating with Local Government. Eventually the CALMHB/C will be asking to surpass CiMH and do these themselves. There will be another regional meeting on March 22nd and will be trying to get other counties involved;

X. Committee Reports / Updates – con't.

at least one MH Board member from each county at a regional meeting. **g.** Jan reported that the second (of three) Community Dialogue will take place on March 8th in Livingston at the Middle School from 11:00 to 1:30 and lunch will be offered. It will be offered in both English and Spanish. They don't have flyers yet, but they will get them out. Mary H. continued talking about the recent 5150 training hosted by FERC (Family Education and Resource Center). They do a great job with this training. The Family-to-Family class is going strong and is now taught in English and Spanish. The Peer-to-Peer class starts Thursday. **h.** There was no meeting. **i.** Sharon J. stated the next meeting is February 13th and they are gearing up to work on the 3-year MHSA program plan. If anyone has ideas on focus groups that is needed, please send Sharon an email. **j.** Mary H. stated they discussed that they should widen their idea of what a culture is. It is not just an ethnic thing. Family members are a definitive culture – they have their own shorthand language, share common experiences and become a sub-culture. Their next meeting is February 24th. Sharon J. stated that she did a culture competence presentation to MH Services Oversight and Accountability (MHSOAC) and she can send a copy of this presentation to anyone who is interested. **k.** No report. **l.** Richard reported they are moving forward but waiting for the new Director for the final phase.

Recommendation/Action: As noted above

XI. Announcements

Discussion / Conclusion: Cora had two announcements. First, she apologized to everyone – she failed to communicate effectively regarding the webinar scheduled for January 25th for MH 101 Training. Second, Board members received an invitation from the Fresno County Mental Health Board who is hosting a gathering of adjacent County Mental Health Boards on March 8th in Fresno. Cora asked that Scott decide if the Dept. will have a van available for Board members to travel to the training together.

Recommendation/Action: As noted above

XII. Adjournment

Discussion / Conclusion: The meeting was adjourned at 5:05 p.m. The next meeting is March 4, 2014.

Submitted by: _____
Carol Hulsizer
Recording Secretary

Approved by: _____
Iris Mojica de Tatum, Secretary
Merced County Mental Health Board

Date: _____

Date: _____