



## Advisory Board On Alcohol And Other Drug Problems

June 19, 2012

5:30 PM

Mental Health Administration  
1137 B Street, Merced

<b>Present:</b>	Richard Hawthorne, Chair; Lori Newman, Vice-Chair; Paula Mason; Su Briggs; Stephen Pierce; Claude Scheiner
<b>Absent:</b>	Michelle Symes; Dr. Livermore; Nathan Sweem
<b>Others Present:</b>	Manuel Jimenez; Tabatha Weeda; Christopher Jensen; Lisa Maples, Probation; Mary Hofmann, Mental Health Board; Vince Ramos, Mental Health Board; Cora Gonzales, Mental Health Board; Jan Morita, Mental Health Board; Carol Hulsizer

## MINUTES

### I. Call to Order – Richard Hawthorne, Chair

Richard Hawthorne called the meeting to order at 5:31 p.m.

### II. Self-Introductions – Members and Guests

### III. Public Opportunity to Speak on Any Matter of Public Interest Within the Board's Jurisdiction Including Items on the Board's Agenda

Cora Gonzales, Jan Morita, Mary Hofmann and Vince Ramos, all members of the Mental Health Board, were present tonight. Cora stated that she volunteered to attend this meeting in regards to merging the Mental Health Board and the AOD Board. Having members from both Boards attend these meetings is one of the first steps in making this happen.

### IV. Approval of Minutes from April 17, 2012 (ACTION ITEM)

**Action/Recommendation:** M/S/C (Newman / Briggs) to approve the minutes from the April 17, 2012 meeting.

### V. Approval of Agenda for June 19, 2012 (ACTION ITEM)

**Action/Recommendation:** M/S/C (Newman / Briggs) to approve the agenda for the June 19, 2012 meeting.

### VI. AB 109 Follow-up – Lisa Maples, Probation

Lisa is the Program Manager with Merced County Probation. She was present tonight to give a follow-up on AB 109; Jim Bucknell had originally given a presentation to this Board approximately six months ago. If anyone is interested in attending, the Community Corrections Partnership (CCP) Executive Meeting is on Monday, June 25<sup>th</sup> at 1:30 in Room 310. The Chief will be presenting the 2012/13 strategy plan; this plan will also be available Thursday on-line. When AB 109 originally started in 2011, they received \$2.8 million to deal with offenders in the community that were considered nons (non-violent, non-serious, non-sex offender) even though they do have four sex-offenders that they supervise (because their prior offense was a sex offense, not their current offense). Currently, they are supervising 150 PRCS cases (Post Release Community Supervision). Basically, they get released from prison, they come into our community, and Probation supervises them. They can go into the Behavior Intervention Program if they get into trouble; there are sanctions such as flash incarceration (where they can spend 10 days or less in custody). They also have Mental Health Court that has been going on for about a month now; they have had about 25-30 cases so far. Out of the Mental Health Court they have Re-entry Court. The AB 109 implementation plan originally included the Mental Health Courts, alternative sanctions which can be pre-trial release on EMP from the jail, BI Program, and transitional housing. Probation is in the process of contracting with Tranquility House, Hobie House and New Way in Los Banos which is a sober-living program for men only. They are also working with MCOE, Workforce Investment, and HSA to get programs going for clients while they are still in custody. Assessments can be done while they are in custody in order to help the client make better decisions, setting them up with job placement, helping with child care, and the literacy program. If these post-release community clients get into trouble for a new violation, they don't go back to prison and what they have instead is the 1170 which is a split sentence and the judge decides how the sentence is split. After that, Probation

starts supervision. At this point, Probation has done two sweeps (compliance checks) throughout the County to make sure they are where they are supposed to be and doing what they are supposed to be doing. The Behavior Intervention (BI) Program is not just for the post-release offenders. They offer all types of services including a Mental Health Clinician, they work on resumes, peer groups, chem testing, and parent night (where clients can bring their kids in). Since BI opened in 2008, they have had over 400 clients go through with about 103 graduating. The Community Corrections Partnership (CCP) Exec Committee stemmed out of AB 109 and the Chief Probation Officer chairs this meeting; also attending are the Chief of Police, Sheriff, Mental Health, and HSA. This group of individuals decides what the plan is and then it goes to the BOS. From this there is the sub-group – the Re-entry Group. The Re-entry Group will be located in the old Environmental Health building on 22<sup>nd</sup> and O. This will be a one-stop shop for the probationers that get out. Eventually Re-entry Court will be there and this will model after the Mental Health Court which is currently going on. There is also the PACT Program (Parole and Probation Community Team) which is for all the offenders released from prison. This is held at Gateway Church once a month (next meeting is June 26<sup>th</sup>) from 9:00-11:00 and all clients must attend at least once. At Gateway there are pamphlets showing all the different agencies and programs available in the community. They also have the opportunity of meeting someone from AOD, Family Support, HSA, BI, Tranquility House, Hobie House, the Literacy Program from the Library, and other faith-based organizations. They also have Transitional Housing and are working on an MOU to house some clients in the Hobie House or Tranquility Village where Probation pays the cost and the clients go through the program.

**Action/Recommendation:** Information only

**VII. Prevention Specialist Report – Christopher Jensen**  
**a. Slideshow from the Youth-2-Youth Conference**  
**b. Prevention Grant**

**a.** Christopher explained how Youth-2-Youth works – high school students mentor middle school students for a one-day youth conference and it is open to all students within Merced County. Christopher showed a slideshow from the conference. **b.** Christopher passed out copies of the Merced County Strategic Prevention Plan Outline. Every five years the State Dept. of Alcohol and Drugs, which funds prevention, charges the counties with developing a strategic prevention plan. It is a treatment plan in regards to prevention for the entire county – you do a needs assessment, look at capacity and skills, planning, implementation and evaluation. Prevention has been looking at the plan from five years ago, looking at what they were able to accomplish, things they were not able to accomplish and why, and the modality used. The framework used on the last five-year plan was process measurement – statements were developed such as, “by this date, we want to have ‘x’ number of people in this program”. The State is pushing counties to change attitude and behaviors – not just serving people – but measuring whether you had an effect. They came up with three priority issues to focus on – 1) Underage alcohol use, 2) Meth use, production and sales, and 3) Community capacity for prevention. From these three issues they came up with problem statements stating what the issue is. From the problem statement goals were developed as to what they want to do about the problem. The objectives were created by looking at contributing factors to the problem and stating what they are going to do about those contributing factors that in theory will help them reach their goal. Christopher went over the problem statements for the three different issues. Christopher hopes to increase community involvement in the prevention planning process for the development of this plan in the next five years – that is the objective. The action steps to get there outline the engagement process. They will focus on four community teams – two specific to youth and two that are not particular to youth, but can have youth on them.

**Action/Recommendation:** Information only

**VIII. Level System / Accomplishments for the Year – Tabatha Weeda**

Tabatha reported that they started their transition into the way they do services on June 1, 2012. They had three staff trained in MRT (Moral Recognition Therapy) that uses the cognitive behavioral approach and applying that to the alcohol and drug population. They have also increased parenting groups, anger management groups, women trauma groups, and men trauma groups. Their SAMHSA groups have been doing well – this is a co-occurring group for those with mental health issues and alcohol and drug issues that they are providing services for. This year they had a total of 622 new admissions and 336 graduates; these are all cost savings to our community which equals about a 54% success rate with all those going through. These figures are an overall for all of AOD. They are also moving forward with integration into primary care. About a year ago they started working with Family Care on 13<sup>th</sup> Street; they have an AOD Counselor in there working with the staff and educating them on the signs and symptoms of what to look for with drug-seeking behaviors. They have a few steady clients going to Family Care. They continue to meet with Livingston Medical Group. They have also begun working with Castle Family Health Centers.

**Action/Recommendation:** Information only

<b>IX. Executive Committee Report – Richard Hawthorne</b>
<b>a. Nominate / Vote Chair and Vice-Chair (ACTION ITEM)</b>
Richard commented that several members of the Mental Health Board were present tonight. On June 5 <sup>th</sup> Richard attended a Mental Health Board meeting; the two Boards are talking about blending and this was discussed at that meeting. The decision was made to move forward with combining the two Boards. The MH Board put together a committee, and would like members from the AOD Board join this committee to complete the work that Lori started in moving towards a joint Board. Manuel commented that this combined committee needs to work out the details – size of Board, dealing with existing members, etc., along with County Counsel's guidance. This Department does need to start looking at becoming a Behavioral Health Department and the combining of these two Boards moves towards that goal. There are approximately 38 counties in California that have become Behavioral Health Departments. <b>a.</b> Lori and Paula worked very hard finding someone to be the Chair for FY 12/13. Richard has agreed to continue being the Chair and Lori has agreed to continue being the Vice-Chair.
Ethics Training – Richard stated that Carol has emailed members regarding an upcoming ethics training that the County will be providing in August. Ethics training is required every two years in compliance with Assembly Bill 1234. Because the County offers ethics training every two years, it is being strongly advised that everyone attend the upcoming training in order to get on a two-year schedule. If someone attended an ethics training last year, and would be due again next year, they might have a hard time finding another place to take an ethics training.
<b>Action/Recommendation:</b> Richard made the recommendation to create a sub-committee to work with the Mental Health Board sub-committee in order to move forward with this process. M/S/C (Briggs/Newman) to create this sub-committee. Richard asked who would like to be on this committee. Su Briggs, Paula Mason, Lori Newman and Richard Hawthorne all volunteered. Cora Gonzales and Richard will coordinate some times for both Boards to meet. Cora asked that Carol email everyone who volunteered to work on this. <b>a.</b> M/S/C (Newman/Briggs) to accept Richard as the Chair for FY 12/13. M/S/C (Hawthorne/Mason) to accept Lori as the Vice-Chair for FY 12/13.
<b>X. Committee Reports</b>
<b>a. Membership – Vacancies</b>
<b>a.</b> Richard commented they are still looking to fill vacant positions.
<b>Action/Recommendation:</b> None
<b>XI. Alcohol and Drug Program Administrator's Report - Manuel Jimenez</b>
<b>a. Realignment</b>
<b>b. CADPAAC Update</b>
<b>a.</b> Manuel passed out and explained a document showing the estimated 2012/13 mental health funding and account structure; this was put together by Calif. Mental Health Directors Association (CMHDA). <b>b.</b> Due to time constraints, this will be discussed at the next meeting.
<b>Action/Recommendation:</b> None
<b>XII. Other Business (Discussion Only)</b>
None
<b>Action/Recommendation:</b>
<b>XIII. Next Meeting Agenda, Date, and Location</b>
<b>Action/Recommendation:</b> The next meeting date is scheduled for Tuesday, August 21, 2012.
<b>XIV. Adjournment</b>
<b>Action/Recommendation:</b> The meeting was adjourned at 7:32 p.m.

Minutes prepared by: \_\_\_\_\_  
Carol Hulsizer