



Merced County Mental Health Board Meeting and Public Hearing

August 13, 2013

4:00 – 7:00 pm

1137 B Street, Merced, CA

Present:	Cora Gonzales, Chair; Iris Mojica De Tatum, Secretary; Jan Morita; Mary Ellis; Sally Ragonut; Chuck McClure; Vince Ramos; Keng Cha; Supervisor Hub Walsh; Kim Carter; David Baker; Mary Hofmann
Absent:	Maureen Freitas; James Fuller; Audrey Spangler
Others Present:	Manuel Jimenez, Director; Richard Hawthorne; Sharon Jones; Curt Willem; Sharon Robinson; Chris Kraushar, PRA; Carol Hulsizer, Recorder

MINUTES

I. Call to Order / Flag Salute / Roll Call

Cora Gonzales, Chair, called the meeting to order at 4:03 p.m. The flag salute was done. Roll call was taken.

II. OPEN PUBLIC HEARING: Mental Health Services Act (MHSA) Annual Plan Update FY 2013/2014 a) Close Public Hearing (7:00 p.m.) 1) Approve Annual Update – Sharon Jones (BOARD ACTION)

Discussion/Conclusion: Cora welcomed the public to today's meeting. She asked that everyone speak clearly. If someone does not speak English, they can use an interpreter.

Sharon Jones had a powerpoint presentation on the Mental Health Services Act (MHSA) Annual Update FY 2013/2014. She went over the powerpoint and explained that this would lead into the public's testimonies.

Liz, retired Mental Health professional – she submitted some questions and wondered how they will be answered; Sharon J. commented that they will be submitted formally, in writing to her. Liz continued that since then she has additional questions. It would be helpful in reviewing the plan, and she said that whoever wrote the Annual Review did an excellent job – it is well written, she would like to see it go a little further though. It is hard to ascertain the efficacy sometimes of the programs when there is not a breakdown of what kinds of staffings are involved. If you look at the Adult Systems of Care – the original plan called for a full-time case manager, a 50% nurse and 25% psychiatrist. What she does not know is how each of those plans have changed over time because the needs of the community have changed. There is not a way to get an accurate assessment of those things. She encouraged that in the next plan or review that is done, that maybe putting the budget in for each plan would be really an added bonus for those who need to look at it and say, 'how can you see 6,000 people in the Adult System of Care with only one person that is working full time'. Liz thinks those kinds of things are really important because she imagines that the programs have changed since the original plan in 2006. But there is no place to go to see what those changes are. In addition, with the PEI, with some of those programs, an RFP had to go out and a person does not know where the money was at that particular time; and in that plan, there was no breakdown of budgets for each of those. Part of the reason Liz brought this up is because some of the programs have had some cutbacks – not only in staffing, but in money – and so they are not able to do what they were designed to do in the beginning, but there is nowhere to go to see where the Department has made changes around that. She thinks it would be important for the kind of transparency that is wanted with MHSA to include those kinds of things in the Annual Report. Sharon J. responded that a lot of the work is done at the MHSA Planning Council and is in the minutes and notes. She understands Liz's concerns and will move forward with this definitely. Liz continued that all they have to go to is the website and what is on there is totally not what is happening in the real world. When the Annual Review is written, if you go back to the plans that are on the website, there are many new plans/programs that have come in, but there is nowhere to go online and see what is that mentoring program from the schools doing, where are they going, who are the staff involved, and is Mental Health staff also there or is it just public school staff. Those are the kinds of things that need to be detailed out. More transparency is needed, particularly around staffing and allocations, because you say what the budget is going to be, but if 50% goes to administrative costs and 25% is going to direct service, Liz feels that is not okay. To be able to look at this would be really important. Manuel commented that one thing people will see next year will be more outcome and data presented, not only in the Annual Update, but also in the outcomes and they will be publishing and posting that information. He thinks that is what people want to see as well. Liz continued that in the original plans, the outcomes were geared around including those unrepresented populations in the community.

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She knows that there is a movement to change some of those outcomes so it would be really important within the next couple of months to post online each program and what their designated outcomes are for the next year so that when the plan comes out they can look back and see that those outcomes were met or they did not. Manuel stated that they will be putting out a publication shortly and looking at some the program's SMART goals. One thing they did this year, in the majority of their MHSA contracts, if not all of the, is have the providers work on SMART goals. Manuel is also working with Steve Roussos and having him work with the staff and contract providers to look at outcomes and data the Department wants to collect in all programs. Liz stated that even with the SMART goals, not all programs fit under that kind of criteria. Some of the programs are mentoring programs – how do you know that the person mentored did better than when they came in. Liz thinks that individualizing those programs and understanding that some will meet SMART program, but some cannot.

Veronica – she goes to the Wellness Center almost every day. She and Andrew (seated next to her) are volunteers in the kitchen and they prepare meals. When they have food available, they prepare food for the clients. They have been filling out surveys that staff has asked them to fill out. Staff says that the purpose of the surveys is to see if the Wellness Center will stay open or will it close and they need input to give all the required information. Veronica wishes that the Wellness Center would not close – she wants it to stay open. It is very important for, especially for people that are coming out of Marie Green. When they are in the Marie Green, they come to the Wellness Center and it is a place of hope, recovery and wellness. She wants to give her support for the Wellness Center. It is a very good place to be and there is meetings going on and they have a good time there. Chuck (Board member) asked Veronica if there are other roles that she has. Veronica stated that she is the Co-Chairperson for the Advisory Committee. Andrew is the Chairperson, and Paulette is the Treasurer. They have meetings every Monday at 11:00 and they have a community meeting at 10:00. Veronica and Andrew have served two terms so far (6-month terms). They try to have as many fund raisers as they can.

Monica, with Caring Kids Program – she passed around folder with Caring Kids information inside describing the work they do and some information as to why they provide the type of work they for very young children and family members. Caring Kids is a program that provides prevention and early intervention services to young children. It is a program jointly funded by First 5 Merced County and Prop. 63 PEI funds. She might have the opportunity to come back to a future meeting and speak a little more about Caring Kids. She shared a letter that a parent, who has been a recipient of their home visiting services, had written: "Although I am not able to be at the presentation, I wanted to take this opportunity tell you about my experience with Taylor Frost and the Caring Kids program. (Taylor Frost is one of the Social Skills Trainers/home visitors and she is here today as well) I have 3 children ages 8, 6 and 1. In the beginning of 2013 I started having trouble with my son Robert who was 5 years old. A few years ago his father and I divorced. I did everything I could do to maintain routines and rules however; watching my kids cry and feel sad was very heartbreaking. As a result, instead of punishing (and this is a word that she used in quotation marks) them for their wrong doings, I made empty threats and let everything go. Throughout the school year (kindergarten), I spent a lot of time speaking with the teachers and after school program directors due to Robert's aggressive behavior. Every time my children went to visit their father, they would come back with totally different personalities and they still do. My son Robert seemed to be troubled the most. He began threatening other children; he had severe temper tantrums and was very defiant. I was so lost. I tried everything I could think of. I tried talking to him, time-outs, taking things away, adding chores or adding homework, behavior charts, lecturing him. . everything. When I met Taylor, I was at that point where I felt like I was a bad mother and that my family was falling apart. Initially I thought the sessions would be only for my son. It turns out that I learned a lot more than I expected. I learned how to be a better parent, how to ask for help, how to identify the triggers and my favorite one – how to get my son to tell me how he's feeling and why he is doing whatever it is he shouldn't be doing. It's been a long road and I have struggled a lot but things are starting to get better. A few days ago Robert threw a small box on the floor because his brother wanted it. When I asked him to pick it up, he threw a tantrum and refused to talk to me. It took about 5 minutes but with a calm demeanor and skills that I learned from Taylor, I was able to steer him in the right direction. For the first time he was able to tell me what he did wrong, why he did it and what he should have done instead. To me, this is a breakthrough. The road has been long and extremely difficult but things are finally starting to turn around. Every other weekend during their visitation with their father I have to go through hoops to get Robert where he was before he left. But I now have the tools I need to get where we need to be. So, I want to say thank you to Taylor and thank you to the Caring Kids Program for helping me be a better parent and guiding me with tools to help me bring my family closer together. I am truly grateful for everything.' And we want to extend our gratitude to the Mental Health Department for continuing to support the work they are doing with young children and families. So thank you.

Andrew and he goes to the Wellness Center and he is a volunteer in the kitchen. He is really happy with what they do there and he is happy with that. Like she said, they don't want the Wellness Center to close up – they want to keep it open. 'Cause everybody goes there and, you know, where are they going to go. So. . . (Cora asked if his concern was the closure.) Yea, and like he said, the staff helps him out with the problems he has and he keeps going. . because he went for three days, and, then he said 'no' this ain't for me, so threw up over it and there've been over in two years, so, he likes being there and he likes what he does there. He thanked everyone. Manuel commented that since he and Veronica brought this up – there is no intention of closing the Wellness Center; he

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does not know where this comes from. Veronica stated that she overheard they were thinking of closing it the numbers went down. Manuel stated that he has not had even one thought of doing this.

Jerry a consumer worker at the Wellness Center – he is a peer person/client also. Since he has been at the Wellness Center his skills have improved in the community and at the Wellness Center. He has learned all the skills. He has recently, before he came to the Wellness Center, his last relapse was about seven years ago, he lost all contact with his family. Due to going to the Wellness Center and participating in the programs and working there, he has learned the skills and he now talks to his brother, his ex-wife, his sons and daughter and they actually have a relationship going after seven years from his last relapse. It has been awesome for him to go to the Wellness Center, he has learned a lot, some good coping skills, communication skills. Now he sees that happening with other people coming out of Board and Care homes. They've also learned those skills and have their own place. They live independently and homeless people also doing the same thing. It is a very valuable, important place to all consumers with mental illness and it's a good all round place for them to learn and progress and move on the pathways to recovery. It is a very awesome program and they also have the pathways to employment there, chief work skills which he has been a part of recently. That's an awesome program that teaches people skills and reduces the relapses; he's knows that from experience. This program really saves on people going back into Marie Green. He can't say enough for the program.

Sue – she has a 44-year old daughter who is dual-diagnosed as OCD and anorexia nervosa. It has been hard, she didn't know how to deal with her mental illness and she loves her daughter so she wanted to educate herself on mental illness. First she got involved in the CASRA program that was mentioned in the powerpoint. That helped her a lot but her daughter with her severe eating disorder she was depriving herself of food and water. She found her in a fetal position in the middle of the living room floor. She has been through a lot with her. Her psychology instructor could see how distraught she was over this and the CASRA class is good for what it does, but also she needed a different kind of help along with it. She suggested NAMI and NAMI was so supportive. They taught her that a lot of the feelings she had were not abnormal. She would resent her at times and feel angry at her. A lot of the feelings she had, they helped her to understand it and they were very supportive of what she was going through. She doesn't have any family here in California and she was going through this alone. She has also been to the Wellness Center and she did great while she was doing that. But, NAMI was great and she couldn't have made it through what she went through without it.

Veronica came to support Caring Kids as well. She is a mom of two boys and was introduced to Caring Kids when her son started preschool. Reading the letter that Monica read, she realized how many similarities her son had. She also struggled through with the whole preschool. Halfway through the school year he had the same kind of behavior – he was being defiant, some aggression going on within the classroom with the other kids also. After she was introduced to Caring Kids through the school, she met Taylor and they came to her house. Her and her husband went through the whole parenting skills and gave them a lot of skills and how to parent their son even though they never used a timeout before. Now he knows what a timeout is and he's well aware of what the consequence will be. She is very thankful they came into their lives. Now he is doing great and is very well-behaved in school. She is here to thank everyone for this program. It is a great program.

Michael – he is a client of Mental Health and the Wellness Center. A year and a half ago he came to Mental Health because about two blocks down he was contemplating throwing himself in front of a train. Since then he has grown tremendously. Because of the Wellness Center he is now in his second semester of college – he is a full-time student. He goes to the groups and meetings at the Wellness Center on a constant basis, he is involved with the Wellness Center is doing. He has gotten housing because of the Wellness Center and so many things have gone right in his life. He is 43 years old and been through numerous programs and none have ever worked. Because of the people involved in Mental Health and mainly the Wellness Center how much wisdom there is the reason why he wanted to get his life straight. They took him under their wing. He is happy and is able to stand up here without having a major anxiety attack. He thanks Mental Health and mainly the Wellness Center for his whole life and everything.

Judy and she is a facilitator for Family-to-Family. She is a retired teacher and has seen a lot of children with problems. Sharon mentioned they are able to offer help before they get worse – identify them – what it is that they do because every time there are cuts. The first thing to go from school is the counselor who is very much needed. Sharon J. talked about Help First which is changing the philosophy of not allowing individual's systems getting worse, but having something to help them – like in the case of the Caring Kids program for 0 to 5. One thing that Monica didn't mention it that they also help children of other ages if there is a need. There are quite a few prevention programs to intervene early on. Judy questioned if the schools know about this in Atwater. Sharon stated that Caring Kids goes all over Merced County, the iMatter program goes all over the County. They will be identifying areas that may not be served currently. Sharon continued that the Ongoing Planning Council is looking for family members, individuals with lived-experience with a mental illness to come to the Council and inform them of these needs. The 3rd Thursday of the month from 10:00-12:00 there is a meeting in this room. She is recruiting for this committee.

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Bill has a 41-year old son with paranoid schizophrenia for 20 years and recently for the first time they needed help with the County. They have had a lot of help in the past with NAMI and handled things on their own as a family. What was perplexing was that his son was extremely ill and was admitted to Marie Green and was there quite a while. But about the time his son just began to barely improve, cooperate with staff, get good sense of where he was and what was going on – it was time for discharge. He wished that the actual care in Marie Green, or like facilities, could last a little longer and a little higher level of improvement. It's like a major surgery and the next day you go home and finish getting well at home. That's okay but when your mind is really a mess. . . The positive thing he wanted to say was what surprised him at Marie Green and Urgent Care team and several weeks after discharge – in many organizations it's the employee level with the customer or patient that things will go wrong. They found at almost every turn employees that were far better than you would have ever expected – diligent, conscientious and you could tell they really cared. Somebody has been doing something right in recent years with the employees.

Lisa is a Board member of NAMI and facilitator for the Family-to-Family course. She expressed her appreciation to Mary – she is incredible – she is NAMI. Her first contact with NAMI was with Mary. Her professor had intercepted her during a crisis moment and referred her to NAMI. She taught the Family-to-Family class, she provided encouragement, she showed her how to set boundaries and enforce them. She gave advice and was very compassionate. There is saying in NAMI – 'You can't know what you have not been told' and also to be gentle with yourself. After the Family-to-Family class, she was better educated, learned how to understand what was going on with her husband and how to use tools for better communication. After the class she was ready to give back. She sat in on the Board meetings and when the opportunity came to be educated as a facilitator for the Family-to-Family course, she jumped on this and then started sitting in on the support group. She has learned a lot from NAMI and if it hadn't been for the intervention with her professor she wouldn't have had this outlet. Her husband has gone through the mental health system and she never heard about NAMI from anyone. If there had been an earlier introduction into NAMI she would have been able to avoid calling the police twice.

Sharon Jones mentioned that people keep testifying to NAMI and that is because Mental Health has a training and technical capacity building contract with NAMI.

Nancy's husband first discovered an article in the paper about the NAMI Family-to-Family class several years ago. She had a family member with acute depression and she signed up for the class. She was amazed at the compassion by Mary and Diane and the other ladies teaching it. This is an incredible resource to have and the word is starting to spread. It is an incredible organization. She can't speak highly enough about NAMI. Her loved one has also gotten involved.

Elena – she has depression and goes over to the Wellness Center three times a week. It is nice to know there is caring staff members there and they are good people – they really care about what is happening. If they haven't heard from her in a couple of days, they will call her. This is nice – working with someone who cares instead of just a job and wanting to get rid of her. She teaches by profession and also teaches a class every Wednesday at the Wellness Center.

Belinda – 15-18 years ago her son was diagnosed with schizophrenia and at that time NAMI was not in Merced. She was hospitalized, given a bottle of medication and an appointment card. She didn't have a clue about mental health/illness. She looked up information and found a NAMI organization in Modesto and took a class there to educate herself. She is sort of a founding mother of NAMI in Merced. She is so proud of NAMI and what they have done. She is grateful that the program has continued and helped many people.

Laura is on the Board of the Merced Chapter of NAMI. She found out about NAMI through her mom. She has taken a few classes as a consumer and wanted to say how great the programs really are. There was also a lot of education and she learned a lot of things she did not know. She has also been trained to be a presenter for In Our Own Voice. She has attended the Peer-to-Peer classes and this is one of her favorites. She sees these as a support group. When she was in high school these classes would have helped her greatly. Thank you NAMI.

Prudy wanted to put a plug in for NAMI and working with the MHSA; this is a great partnership. She took her first Family-to-Family class 15 years ago from Belinda. And 15 years later she is amazed that a handful of volunteers have expanded the program so much. One of her criticisms is the school system. She has been a teacher for 32 years they desperately need counselor. They need to know about Caring for Kids and they don't. You need to get hold of administrators, Rosemary Parker-Duran, and educate them and have that filter down to the schools. They need resources. NAMI has excellent programs for elementary, middle and high school – parents and teachers are crying out for help.

Manuel, Director, stated there is an excellent NAMI here in Merced and it is due to the dedication of a few volunteers. He admires all the work they do. Other Mental Health Directors are not as fortunate because in some counties the relationship between a Mental Health Director and NAMI can be strained. He also reminded everyone that County Mental Health is in 35 schools at this time. The

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clinicians are being stretched thin but we will have more clinicians soon, hopefully. Manuel will ask Steve Gomes to invite NAMI and himself to do a presentation with all the superintendents.

Cora, Chair, stated that she was very proud of each one for having the courage to stand up, give a testimony, and tell the Board what is important to them. Some have been in the mental health care field and still want to be a voice. She felt this was absolutely wonderful and thanked each one for being here and not being afraid to come forward.

Hub, Supervisor, asked to look again at the powerpoint slide that had the quote from Albert Schweitzer. He shared that he greatly appreciated the testimonies from NAMI, Wellness Center, and Caring for Kids. It is reaffirming to him about the kind of activities and efforts that are made as professionals, as peers-to-peers, as family members. He thanked everyone for their time also. He appreciates it.

Megan – first she apologized for being late but she wanted to say a word of support for NAMI and the absolute need for NAM to get support from County Mental Health services. They have provided something that she has found nowhere else – and that is hope. She had lost everything and they were the organization that she found that showed recovery is possible and you can get your life back and you can recover from mental illness. She was just here to say how much she supports them for what they have done. She is now a straight A student at UC Merced and developing artificial intelligence systems. She is studying autism, she is happily married and NAMI played a huge part in that. She was just here to show support.

Bill and Mila saw the Sun Star front page article. They have a daughter that has mental health issues and they were attracted to the classes. Both have taken the classes and it has been an oasis for them. It has offered them a lot of hope; she is still not in recovery but she eventually will choose that path and it is thanks to NAMI. That is why they came today.

Barbara – she came to voice her support for NAMI. She apologized for being late but she just got off work. She wanted to take this opportunity to tell everyone how important NAMI is to her. She spent many years learning and dealing with family members who are mentally ill. Last year who two youngest children were both in crisis at the same time. They both have struggled for most of their young lives. She has tried to get them help for years; over seventeen years to be exact. Both have had several diagnoses and been on several medications. When she went through the NAMI program, and they would talk about all the medications, she lost count. She reached a point where she had nowhere to turn. They had been to so many doctors and psychiatrists and counselors, they refused to go to anymore. She was sure they would give up, that they may not make it. She lost her hope that it would be okay. She figured they would eventually die one way or another. She picked up the newspaper one day and there was an article on the very front page of a couple she knew. They had adopted a boy years ago when she knew them and they were sharing their story about their son and how NAMI had helped them. She cried and cried and was so proud of them. She thought my god these people are so brave to share their story because as you all know, mental illness doesn't have the best reputation. She decided to go to her first meeting and she was in crisis trying to help them. She was scared. She walked into this meeting and wasn't sure what to expect and she certainly was not comfortable. Especially when they said, 'who are you, which family member are you here for' and she is going – her mom, her dad, her brother, her sister, her kids. Holy _____. Obviously, you know – a life of dysfunction. She learned through counseling herself that she was raised in a home with dysfunction and she thought this was normal – she didn't know any different. And luckily she was able to get counseling and did learn a lot. But trying to help young children is a different story. The facilitators were kind, funny, knowledgeable and she was so impressed with how well structured the program was. She didn't expect a volunteer program to be like that. She herself has volunteered for many years involved with many organizations and she was pleasantly surprised. Not only were they organized, but there was a lot of valuable information – stuff she didn't know. Beyond that was that they laughed and cried and ate together. This is what she walked away with – she is not alone, because she feels alone a lot. She doesn't have a support system here, she doesn't have a lot of family, and she truly felt alone. She felt they understood, really understood, because they have lived it. Unfortunately, when you have lived it, it is a whole different thing. It is not the same as reading it in the book and then trying to help people. She doesn't think there is any right or wrong way to deal with mental illness – that became clear real soon when they all shared their stories. They have all gone through a lot of the same thing – trying to figure it out. She was obsessed with getting a diagnosis only to realize that it really didn't matter. She was dealing with behavior and problems and needed to get to the root of those problems and the diagnosis really didn't matter. She realized that she can help others with her experience and the program gave her hope. Not only were they helping themselves, but they are learning to help others through NAMI and to have the same love and compassion that the NAMI volunteers have – not to judge – to listen and just love them. Thank you.

Action/Recommendation: Vince commented that he attended the Ongoing Planning Council Meeting and some have an increased budget and had written recommendations; were these to be viewed to see if they are also being voted on? Manuel stated that they were outlined in the presentation. Vince stated that the Core had deducted \$207,000 and there was \$500,000 original. Sharon J. responded that in the powerpoint was the proposed FY 13/14 steps that Vince is referring to. At the Ongoing Planning Council, they reviewed each one and Angelo made a printout of this. This is what the stakeholders requested for FY 13/14 and is being identified here today. Manuel stated that this is not an exact figure and the figures will not be higher than those. Sharon J. continued that it is still subject to BOS approval. Vince questioned then that they are voting on the increase, if it happens or no. Sharon J. stated that they are not voting on an increase, they are voting on approving the Annual Update as is. Listed in the Annual Update is the proposed implementation for FY 13/14. That does not mean it is approved, it still has to go through an additional, separate process; but they do have to identify what the current needs are for the community and these are the needs that have been identified. Iris asked Vince what his question is. Vince stated that Mental Health mailed out forms and asked questions. What happens to the form? Does the form get posted with this form here? Sharon J. stated they collect all the feedback, Carol takes notes of this and will be included in the appendix in the report. What they are asking for today is approval of the Annual Update and the Annual Update still has to go to the BOS and the Auditor Controller as well. All the information on FY 13/14 list came off the feedback forms just like that and they are listed in bullets. Cora stated that it is not part of the report, it is a document to guide you. Iris stated this is a required part of the process – this is put up for 30 days and during that time the comments are posted and included in the Annual Update. Sharon J. stated that once the final draft is on the website, it will have all the comments in the report. Vince questioned if this is what the BOS will be voting on and Sharon J. responded “yes” and after that it will go to the State. Vince questioned when that will be posted on the website and Sharon stated the rules and regulations do not operate like that. Iris commented that the Ongoing Planning Council will go back and review all the comments. Vince commented that there is a lot of good information and ideas out there but he thinks it needs a little more work. At 6:57 p.m. there was a motion, seconded and carried (M/S/C - Mojica De Tatum / Ellis) to approve the draft MHS Annual Report for FY 13/14 which will include all comments made at this meeting tonight. There was one opposition. There were no abstentions. Sharon J. stated this will go to the BOS the first meeting in September. Manuel would like the Chair of the Mental Health Board attend the BOS meeting to address any comments.

III. Approval of Minutes for June 4, 2013 (BOARD ACTION)

Action/Recommendation: Sally commented that a correction was asked for at the July meeting regarding the June minutes. Vince requested that the minutes on page 4, second line, be changed from “increasing staff pay” to “increasing paid staff”. The June minutes could not be approved due to a lack of a quorum at the July meeting.

Vince then commented that the recorder had not put in the July minutes the conversation regarding him not being able to speak under item #4 “Opportunity for Public Input”. The Chair, Cora had told him that he is not ‘public’ and his comments should be held until item #XII ‘announcements’. After discussion Supervisor Walsh motioned that the June 4th minutes be approved and have whatever additional comments about those minutes reflected in the August minutes. M/S/C (Ellis / McClure) to approve the June 4th minutes.

IV. Approval of Minutes for July 2, 2013 (BOARD ACTION)

Action/Recommendation: Jan asked for a change under the Chair’s Report. The minutes reflect, “throughout the year, visit opportunities to encompass. . .” Jan would like the word “visit” removed from the minutes. The recorder stated that if this was stated that it cannot be taken be removed. Iris asked if the minutes are taken verbatim and the recorder responded, “pretty much”. Iris agreed that you cannot change verbatim.

Due to Vince’s comments under item #III – Approval of Minutes from June 4, 2013, the July minutes, which were summarized will now be changed to: “a. Vince commented that since there was an increase in the Mental Health budget, some of the money could be used for implementing Laura’s Law. Cora decided that this could be added to the end of today’s agenda.” Let the July minutes reflect that the minutes should be: “Vince stated that when Manuel gives his Director’s Report there is an increase in mental health budget and Vince thinks that the money could be used to implement Laura’s Law and his program. . Cora stated that this could be added to the end of the agenda as an agenda of interest, but this is ‘public input’, that is not covered as public input. Vince stated something undecipherable. Cora stated again at the end of the meeting, if there is time, we can ask for comments. . Vince replied he was just asking. Cora continued that he is asking about staff, this is ‘public’ that is being referred to right now. Vince continued that if you look at Laura’s Law it is considered public. Manuel commented “no”. Vince continued, because they are the ones that help get the budget increase because of all this. . Manuel continued that what they want to do is give the public an opportunity to speak and so really this section is just for the public to speak, it is not for Board members to speak. Vince stated this falls under open discussion to the Board. Manuel continued that Vince is a Board member and Board members can comment on any of the topics that we are talking about on

IV. Approval of Minutes for July 2, 2013 (BOARD ACTION) – con't.

the agenda and then if there is anything new that the Board wants to talk about, they can talk about it at the end of the agenda, if time permits. But if you want something put on the agenda for him (Manuel) to talk about or anybody else, you can talk to Cora and it can be added on another day. Vince continued (undecipherable) about the agenda. Cora continued that at the end, after they have gone through the agenda, she will ask for any additional comments" – end of conversation. **M/S/C (Ragonut / Mojica De Tatum)** to approve the July 2, 2013 minutes.

Vince then questioned where his statement was going to be put. Cora replied that he had an opportunity. Vince questioned if it will go in June's. Cora replied "no" it would not go in June's; the June minutes have already been approved, seconded and voted. The July 2nd has been motioned, seconded and voted – now we move forward. Vince stated that the Board is not doing right with what everyone is saying in the minutes. Manuel asked Carol to explain how she does the minutes because she does keep a tape recording and does do her best to document everything to put in the minutes. Carol commented that it is hard to put in everything that everyone says, but anything that is important, like what Jan was talking about, is put verbatim. But the minutes would be many, many pages if every single word is put in. Vince replied that he believes that but there is no conversation that was had about pay raises and bonuses. Carol commented that that was in there because he wanted something changed. Cora replied that she did not say that Vince couldn't speak, she was trying to clarify what the "opportunity for public input" was. If it is in regards to the public making an announcement, but if it is a personal item that needs to be announced, that is why "announcement" was added. Carol then commented that if something is on the agenda she is required to put what is said, if it is not on the agenda, it does not have to be in the minutes. Supervisor Walsh commented that he thinks the purpose of the minutes is a summary. If they were action minutes, the only thing that would be put down is when action was taken on a particular item. These are summary minutes, not verbatim – word for word.

V. Approval of Agenda for August 13, 2013 (BOARD ACTION)

Action/Recommendation: Jan commented on the agenda. On the Executive/Bylaws/Planning Committee it still shows Mary, Sally and Vince and Jan believes it should be Cora, Richard and Iris. Also Patients' Rights Advocate shows Barbara and should be Chris. Carol commented that she had reused an old agenda and did not make the corrections. She will correct this. **M/S/C (Hofmann / Baker)** to approve the August 13, 2013 agenda.

VI. Mission Statement

Action/Recommendation: Cora read the Mission Statement.

VII. Opportunity for Public Input to Speak on Any Matter of Public Interest Within the Board's Jurisdiction Including Items on the Board's Agenda (Time Limit of 3-5 Minutes)

a. Open Discussion for Board

Discussion/Conclusion: Chris Kraushar commented that the public service announcements stated that there would be an open time to comment on the MHSA plan from 4:00 or 4:30 to 7:00. People may be arriving. . . Cora continued that the Board will stop at that particular moment and address them. If somebody walks in the Board will . . . then Chris stated that some new people have arrived. Cora then addressed new people who arrived.

Recommendation/Action: Information only

VIII. Chair's Report

a) Evaluation Results (Cora)

Discussion/Conclusion: Cora reminded everyone to turn in their activity logs. Board members may think this is not important, but when it is time to do the Annual Report, it is extremely helpful to include in the Annual Report as to what the Board is doing. She also discussed the evaluation that was presented in the packet. There was a theme that kept coming up. When preparing to come to the Board meeting, participation in the Board should not just be one person dominating the conversation and there should not be just people sitting quietly. The Board wants everyone's input. Please review the evaluation for the previous fiscal year. There was also a training, there was a guest in regards to combining the AOD Board as well as the Mental Health Board. That was very informative. He gave them some ideas and expressed to continue guiding the Board through the process.

Recommendation/Action: As noted above

IX. Supervisor’s Report (Hub)

Discussion/Conclusion: Hub reported that today was the first reading of the County’s ordinance dealing with passionate care of grows on marijuana. The Board’s tentative approval pending a Public Hearing in September is that they will limit, in Merced County, grows up to 12 plants. Anything over 12 plants will be determined to be a nuisance and will be dealt with. They will also have to have a card to have 12 plants. This ordinance will only pertain to those who live in the unincorporated communities in Merced County. If you live in an incorporated city, city of Atwater, Merced, Livingston, Gustine, Dos Palos, Los Banos, they will have to do something along this ordinance; it does not pertain to them. There are some cities that have begun to initiate the review and discussion. The next meeting for the Board, which is the last week in August, is the final budget hearings.

Recommendation/Action: Information only

X. Director’s Report (Manuel)

- a) Gateway Terrace Update
- b) Budget Update

Discussion/Conclusion: a. Manuel reported that Gateway Terrace is completed. They are taking applications. He has been waiting for a phone call from Christy Alley to tell him the exact time the Open House will be. He does believe it will be on August 27th sometime in the afternoon, but that has not been confirmed yet. Some details still need to be worked out and Manuel wanted to speak with Chris Kraushar after this meeting regarding this. b. The Board of Supervisors will be hearing the final budget on August 27th. Mental Health is hoping they will be able to hire some new staff – they are requesting 11 new positions. There will also be some new money. The Legislature has allocated more money for mental health services. These are monies the Department will have to apply for. The Department does plan on applying for everything they can. There will be money for creating mobile crisis as well as triage teams to place people in hospitals and schools. Mental Health will be partnering with neighboring counties for some other services such as crisis residential which will allow people to transition from Marie Green to other places if they need a longer stay. More information will come. Manuel was asked about a July 29th Sun Star article titled, “Mental Health Care Slow in Valley”. One paragraph from the article was read and then the question was asked how the Department is doing in hiring a psychiatrist, a therapist and clinician social workers. Manuel responded that, unfortunately, the Department is having a challenging time recruiting a psychiatrist. Dr. Castillo left over a year ago and the Department is having such a hard time that the Board of Supervisors and the CEO has approved the Department to use a headhunter to try and recruit one. Dr. Manuel is overwhelmed because she is doing a lot of the work in Marie Green. To make things worse, Dr. Rai has given her resignation. Now we will have to hire two psychiatrists. The question was asked if the Department can go overseas and get an H1B Visa. Manuel will ask about this. This is not just a central valley problem; it is statewide as well, even though Manuel feels the central valley is the most hard hit. Manuel is on the Governing Board for the Mental Health Director’s Association and he co-chairs the Adult and Older Adult System of Care meetings. The committee asked him to address this at tomorrow’s meeting and he will bring this up and let them know this is an issue. There are some counties that do not have a lot of applicants, or no applicants. The Stanislaus County Mental Health Director and Manuel will be meeting with Dr. Aguilar-Gaxiola soon along with another doctor who runs the psychiatric school to see what can be done to get more psychiatrists and residents coming into this community. MHPA money will be used out of the regional WET partnership to help fund and pay for stipends. The question was asked regarding the allocation of dollars for mental health professionals to go with first responders to shootings and such and would this fit into that category. Manuel responded that what is stated is “mobile response teams”. There is not much detail yet. The organization that will help dispense the money is working with the CA Mental Health Director’s Association and other interested parties to see exactly how that money can be used. The question was asked if the plans can be specific to the community. Manuel responded definitely – that is what they want. All this will be explained on Thursday and the information should come out by October. Another question was asked if the Department had thought about facilitating the education of in-house nurse practitioners because if you have gone to a specialist lately, a lot of time you see the specialist maybe once and all the care is the nurse practitioner or the PA. Curt responded that this was talked about earlier today. Hub commented that in a professional organization statement, nationwide, he was speaking with a group that had some terrible circumstances of tragic shootings. These were Supervisors from Colorado. When they talked about their emergency crisis response – excellent crisis response connections for law enforcement, excellent crisis response for medical teams. And they said where they did not do well was counseling follow-up connections. Everything else fell together because they had practiced that before, but when it came to follow-up, they never had practice on what to do under that kind of scenario. This might be something we should talk about. Manuel commented that he and Curt have already met with the local hospitals and will be meeting with law enforcement. They do attend the Chief’s meetings and want to be onboard with them also. Another person was concerned about the Federal health reform and the prisons releasing more criminals who will need mental health care. Is Merced County Mental Health prepared for January 1, 2014 as far as staff and being proactive? Manuel responded “no”, but they are being proactive. Manuel, the Public Health Director and HSA Director meet semi-regularly (try for once a month) to talk about healthcare reform and what everyone is doing. The

X. Director's Report (Manuel) – con't.

Public Health Dept. has spearheaded some of this healthcare reform. They are also part of a healthcare consortium made up of the FQHCs in the community and the rural health centers. They recently got a Blue Shield grant to help educate the community and develop a plan on how to educate the community, and how to enroll folks in the community. On the social services side (HSA), they are developing a Call Center for folks who may be eligible to enroll and help get them enrolled. The CEO has asked for information and what affect the Affordable Care Act will have on the Mental Health Dept. This will be presented to the BOS in the near future. Manuel stated that he thinks the numbers have gone down a little and that there may be 25,000 new people who may be eligible for the ACA (25,000 Medi-Cal recipients in Merced County). For Mental Health, depending on what figures you look at, there may be about 10% of those who may meet the Department's target population of severely and persistently mentally ill or require some sort of drug and alcohol treatment and may be eligible. Does the Dept. have the staff to serve 2,500 – no. But the CEO is open to going to the BOS and asking them for more positions to meet the needs of this population. Will there be 25,000 new people coming to Mental Health? Probably not. It will be a slow process and a lot of education. Several agencies have been awarded funding from the Dept. of Healthcare Services to provide education and training to the community throughout California. Those agencies will be doing this outreach between now and December and January, if not longer. Hub commented that as people become eligible, they are not automatically going to be informed consumers. Now that they may potentially be covered under the Medicaid expansion, it will be awhile before that mind set about how they approach healthcare will change.

Recommendation/Action: Information only

XI. Committee Reports / Updates

- a. **Quality Improvement Committee (QIC)** (Sally / Mary E.)
- b. **Executive / Bylaws / Planning Committee** (Cora / Iris)
- c. **Membership Committee** (Kim)
- d. **Patients' Rights Advocate** (Chris)
- e. **Wellness Center Update** (Chuck)
- f. **CALMHB/C Update** (David / Keng)
- g. **NAMI** (Mary H.)
- h. **Children's System of Care (CSOC)** (Cora)
- i. **MHSA Ongoing Planning Council** (Sharon J. / Mary E. / Chuck)
- j. **Cultural Competency Committee** (Mary H. / David)
- k. **Community Partner's Meeting** (Vince / Mary E.)
- l. **AOD** (Richard Hawthorne)

Discussion/Conclusion: Cora asked that everyone think about if there is another committee that they might like to participate in. Cora asked Richard where he was in the process of being placed on this Board. He responded that it should be shortly, he was interviewed today with the Chair and Vice-Chair of the BOS. a. Sally reported that the meeting was postponed until this Thursday. There will be a report in October. b. Cora stated that there will be a report at the next meeting. They will not be doing anything with the bylaws until they combine the Mental Health Board and AOD Board. c. Kim reported they are not doing anything with this either until the two Boards merge. d. Chris reported that in today's packet there is a W&I Code that has the Patients' Rights Advocate's responsibilities circled. This is something that Keng brought back from the CALMHB/C. She is aware of this and does provide all these duties for the County – each and every one from 'a' to 'e'. She makes sure compliance is maintained. Specifically it talks about 'c' providing training and education about mental health law and patients' rights to mental health providers. This month she has been out at CPT which is a local facility doing some training for all their staff. It is a mandatory patients' rights training in order to make sure they are in compliance. e. Chuck reported that Keo, who is their Southeast Asian Mental Health worker, came to the CAC yesterday and they approved \$30 going to the SEAs to buy the fabric in order to do a community quilt. There is an issue with the jail (Sandy Mush) and Marie Green and the leftover food from the jail. In the past the extra food from the jail was sent to Marie Green and what Marie Green didn't use was given to the Wellness Center. Chuck was not sure of everything – it had something to do with a contract. Manuel commented that the current contract with the jail is to provide three meals/day for those in Marie Green. Unfortunately we have to buy a minimum of ten; if there is not ten clients in Marie Green, the food was given to the Wellness Center. But breakfast is changing a little and recently the client count in Marie Green has been high. In the meantime they have approved CAC funds to cover breakfasts on Mondays, Wednesdays and Fridays. Chuck also gave everyone at the CAC meeting yesterday a list of resources for those who are in need of breakfast, lunch, dinner, clothes, etc. They are looking into a canopy because the fund raisers sometime need some shade; it will be funded by the CAC. It will only be used when they work with the grill. There are seven people now

XI. Committee Reports / Updates – con't.

authorized in the snack stand to have keys. Staff kept getting bothered at inappropriate times because the key was needed for the snack stand. This was done to alleviate the problem. Everyone who has a key will sign that they have a key; they do have a regular routine on how sales are done. They also have a lot of good food growing in the garden. They will be getting a second refrigerator soon to help store things. f. Cora stated that David has expressed an interest in the CALMHB/C. He and Keng will be co-chairing this. Cora thanked David for taking this on. Keng gave Cora a packet of information from the last meeting he attended; Cora gave it to David for him to look at and then give a report at the next meeting. David questioned if there is an alternate. Cora stated that Keng has agreed to be the alternate. g. Mary was given a round of applause. Mary stated that they have 9 programs now and there were flyers for anyone wanting one - please give them to anyone you know. The Family-to-Family class is starting on September 5th. The Peer-to-Peer class will start two weeks after that. These classes have opened up some major communication within families. Jan reported that NAMI Connection, which is a consumer recovery support group, is ongoing every Wednesday night and is open to any consumer who has a mental illness. It is proving to be valuable because they can come in in crisis, come in when they are successful – they are there for each other. It is very helpful. h. Cora stated the meeting was July 8th. Not many were present. They talked about Katie A. and she didn't quite understand it. She asked to be sent a document that she has been going through. They discussed the eligibility of foster children and how many foster children there are in the system. 60% are between the ages of 0 and 5. The County schools will work with Mental Health. The Probation Dept. announced that they had quite a few openings in their staff. Manuel discussed the vacancies at Mental Health. i. Sharon J. reported that the Planning Council meets the 3rd Thursday of the month from 10:00-12:00. They receive stakeholder input to inform MHSA related business. They have been working on the Annual Update, what they hope will be approved here today. They are also expanding into other workgroups because the guidelines are out for the FY 14/15 MHSA programs. It will be a huge endeavor because they will go out to other communities for focus groups, doing a needs assessment and repackaging MHSA all over. They are still recruiting family members and consumers. She is just trying to meet the needs of the community. It is all about health, wellness, quality of life and meeting the needs of the community. MHSA is about wellness and recovery and collaboration. Iris is the Chair. Iris stated that with the wrap-up of the Annual Update they will be moving on to the input from the community in terms of the programs that are currently there and new programs and what other needs are out there. Sharon continued that the PEI guidelines are being revamped as well as the Innovative guidelines. She will be updating the Committee on the changes. Iris also heard that people want this information on the website. In terms of reporting to the Mental Health Board, they know that the programs are outdated and need to be updated. This has been an ongoing discussion at the Planning Council. They will make the changes as quickly as possible. Sharon knows that the website needs to be updated as well. Richard stated that Merced County has an excellent website but it is very hard to navigate; trying to find someone to contact is not easy. j. Sharon J. reported that after many years there is a Central Region Cultural Competence Summit scheduled for October 2 & 3. Members of the Merced Cultural Competence Committee helped review 36 proposals that will be on the program for the Summit. This will take place in Modesto at the Double Tree Hotel. There is quarterly cultural competency training and it is open to the community; they use the CBMCS curriculum. They are also doing Mental Health 1st Aid. Training on LGBTQ is upcoming. There will be training for the Latino community as well as the African-American community. They meet the 3rd Monday of the month at 3:00 pm. Jan questioned if the deaf culture is included in this. Sharon stated that it is. Jan mentioned that ERs should have large posters with this information posted and she would like to see this followed through. Sharon stated that there was a deaf culture training earlier this year on this subject and she could consult with the person who gave the training. Sharon also stated that a client culture training is also needed soon as well. They also need to do an organizational evaluation in terms on where they are with cultural competence as well. k. Vince reported that that Sierra Vista finished their summer program at the Boys and Girls Club. Referrals came in for their first and second graders providing social skills training. Starting next week they will be outreaching to Weaver School District. Kit from Aspiranet started their new fiscal year with training - motivational interviewing, LSCI training was a week-long training that informed staff on handling crisis moments, and gang training done by Dan Eagerston. Tabatha is still working with Ge trying to get a new calibration with people that are going into the court system to better care for them. Trilogy will put on a presentation for the Blue Ribbon Commission to maximize their contract. Mental Health is going to get a clinician/Dual Diagnosis Specialist for the Wellness Center and the Dual Diagnosis Program. One CAW will be linked with NAMI writing proposals for peer mentors to be submitted to the MHSA Advisory Committee. Jef Berry will take over the duties of Audrey. Chuck stated that Jef will be taking over certain duties that Audrey Slocum had, but not every duty. Currently Jef is working with the housing aspects that Audrey took care of, but not the homeless area that Audrey did. Manuel stated that Audrey recently retired and she definitely will be missed. She was given a small going away party, but they are planning on another one later because she gave such short notice. Vince continued that Donna from Turning Point reported that they are getting a lot of referrals and most are for indigents. Board and Cares may not be the right place for them. Gateway

XI. Committee Reports / Updates – con't.

Terrace will be open August 27th and they are taking applications (section 8 shelter/vouchers). Some will be placed in Dos Palos. Consumers are helping at CARE. I. Richard stated that Cora mentioned earlier that the two Boards met with Cary Martin, Manuel and Curt. Cary is the current Board Chair for San Joaquin County Mental Health. He shared with the two Boards the issues involved in blending the two Boards. Cary indicated that once you blend these two Boards, it will be very beneficial. He gave some suggestions which were written down. The goal now is to finish the By-Laws and make them ready. Manuel stated that the CEO has given his permission to start talking with the Board of Supervisors to let them know what is being planned. A question was asked, what is one of the issues with the blending. Richard stated that one is the agenda; both Boards have large agendas and the blending of the two Boards could mean an excessively long meeting. Another issue is that the AOD Board is comprised of providers of services and the Mental Health Board is precluded from having providers of services. Another issue was having enough Board members on each Board, and how active the individual Boards are.

Recommendation/Action: Information only

XII. Announcements

Discussion / Conclusion: Jan announced that on August 28th they are having their NAMI Business Board meeting in this room. It will from 5:30-6:30. A couple of Board members will present Ending the Silence which is a new program. This will be done by a consumer. It will be brought before junior high and high school students that tell personal experiences and how to recognize whether there might be a mental illness. The young people who hear this can then seek help. As a consumer, Jan has been trained to co-facilitate two programs – one is Peer-to-Peer Education class and NAMI Connection. Jan shared a success story which she thought the Board would enjoy. Manuel thanked Sharon and her team for their work that they did in preparing the draft and presenting to the Ongoing Planning Council.

XIII. Adjournment

Discussion / Conclusion: The meeting was adjourned at 7:00 p.m. The next meeting is October 1, 2013.

Submitted by: _____
Carol Hulsizer
Recording Secretary

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

Date: _____

Date: _____