

**Contra Costa County Mental Health Commission's
Public Hearing on the MHSA 2013-2014 Plan Update
August 22, 2013
Minutes – FINAL**

1. Call to Order / Introductions

Mental Health Commission Chairperson Carole McKindley-Alvarez called the meeting to order at 6:10

Commissioners Present:

Louis Buckingham, District III
Jack Feldman, District V
Dave Kahler, District IV
Peggy Kennedy, District II
Carole McKindley-Alvarez, District I
Teresa Pasquini, District I
Lauren Rettagliata, District II
Sam Yoshioka, District IV

Commissioners Absent:

Evelyn Centeno, District V
Jerome Crichton, District III
Supv. Karen Mitchoff, BOS Representative
Colette O'Keeffe, District IV
Gina Swirsding, District I

Non-Commissioners Present:

Hillary Bowers, OCE
Lia Bristol, Supv. Mitchoff's Office
Jeromy Collado, MHA
Gloria Davidson, NAMI
Steven Grolnic-McClurg, Mental Health Director
Steven Hahn-Smith, MHA
Peggy Harris, Concerned Citizen
Warren Hayes, MHSA Program Manager
Gerold Lienicker, PEI Coordinator
Peter Mantas, Guest
Mary Long, MHCC
Teisha Marj, ANKA
Erin McCarty, MHA
Susan Medlin, OCE
Mariana Moore, Human Services Alliance
Roberto Roman, OCE
Karen Shuler, MHC Executive Assistant
Nina Smith, AOD Advisory Board
Cynthia Staton, Guest

2. Announcements

None

3. Opening Comments by the Mental Health Commission (MHC) Chair

Carole read the portion of the W&I Code that described the authority, process and purpose of the Public Hearing.

4. Fiscal Year 2013-2014 Mental Health Services Act (MHSA) Plan Update –

Warren Hayes, MHSA Program Manager

Warren explained Contra Costa Mental Health is inviting comment on the 2013-2014 MHSA Plan Update. The 3-year Plan states how Contra Costa Mental Health will use MHSA resources to improve the Contra Costa Mental Health system as well as comply with statutory and regulatory requirements of the MHSA. This Annual Update Plan includes a Budget Summary and Program Descriptions divided into the major MHSA components: Community Services and Supports (CSS), Prevention and Early Intervention (PEI), Workforce Education & Training (WET), Innovation, Information Technology (IT), and Capital Facilities (CF). Special sections address Peer and Family Supports and Efforts to Reduce Health Disparities.

This year's estimated expenditures of \$48,000,000 includes \$36.3 million for CSS, \$8.9 million for PEI, \$8.7 million outlay for a 1-time CF and IT project, \$2.3 million for Innovation projects, and \$600,000 for WET. Major new programs for startup for this year include a Crisis Intervention Program, an Assessment and Recovery Center, and the implementation of an Electronic Medical Records System.

We welcome Public Comment on this plan update. We've started our community planning process for Contra Costa's next 3-year plan which will be effective July Of 2014. All comments will be included in this Plan Update as well as considered in the development of the next 3-year plan.

5. Public Comment on Plan

- Cynthia Staton asked if this was the 3-year plan?
Warren replied that this is an update to the Plan that was previously approved. Steven added that it is our plan for what we're going to be doing for the coming year.
Cynthia commented that under the Full Service Partnerships, she'd like to have it broken down to agencies that are receiving funds.
SUMMARY: CLARIFY INFORMATION ABOUT AGENCIES AND FUNDING
- Cynthia Staton suggested the MHC invite someone to discuss WRAP, SPIRIT, etc. to try to connect the MHC to what's going on.
SUMMARY: PROJECTION OF EXPECTATIONS
- Nina Smith said she has worked with those who are dual-diagnosed, and there is a need to include quality of evaluating positive outcomes.
SUMMARY: HOW TO EVALUATE POSITIVE OUTCOMES
- Gloria Davidson stated that at the simplest level, we must be able to show outcomes.
SUMMARY: ACCOUNTABILITY AND ABILITY TO MEASURE OUTCOMES
- Mariana Moore expressed frustration at the last minute rush. She said she is glad there will be a better planning process in the future. For the record, the Human Services Alliance supports having clear accountability and measures of success.
SUMMARY: CLEAR ACCOUNTABILITY AND MEASURING OUTCOMES AND APPRECIATION FOR TRANSPARENCY IN THE PROCESS.
- John Gragnani sent in a statement supporting the Plan, but expressed concern over financial mismanagement and said we must do better going forward. (Copy attached.)
SUMMARY: CONCERN OVER MISMANAGEMENT OF FINANCES THE NEED FOR GOVERNMENT TRANSPARENCY

CONCERN OVER MISSED OPPORTUNITIES TO FILL KEY POSITIONS

6. Commissioner Comments

- Lauren said the use of acronyms in the Plan needs to be stopped – the document needs to be understood by anyone who picks it up. She found the document to be informational. She added she found it very confusing how some information was lined up. For example, she would like to see how much funding was being connected to each program as it was discussed in the Plan. (Copy of comments attached.)

SUMMARY: OVER USE OF ACRONYMS

CONNECTING INFORMATION TOGETHER – CONNECTING AGENCIES WITH THE FUNDING

- Peggy asked what is the status of the MHSA Fiscal Audit Review? Teresa replied the MHSA/F Committee considered the first part and suggest the word “audit” be removed. We received the report in our packets. The MHC had not taken a position on what type of audit it was going to be done and we came up with a process. The other part that was agreed upon was that the 2nd part of the audit will include deliverables. A motion will come to the MHC next month. It will be a three-prong process and partner with CPAW. Needs assessment and site visits are being done by MHA. Peggy added: In relation to the state audit: we as a commission need to be proactive and ask for expedited oversight and outcomes framework for Counties of the State. Steven added the findings of the state audit show there has been very little oversight from state bodies so a strong county support system is needed.

SUMMARY: STATE AUDIT RESULTS SHOW THE NEED FOR A

FRAMEWORK FOR EVALUATING PROGRAM OUTCOMES

- Teresa stated that family members had strong dreams about Prop 63. She suggested revisiting the Memorandum of Concerns. She added she is the only CPAW member not to support this Plan. We don’t have enough information to allow us to continue to roll over twenty million plus dollars. We need to know how decisions are being made.

SUMMARY: QUESTIONED USE OF FUNDING

QUESTIONED HOW DECISIONS ARE BEING MADE—SHOULD BE MORE TRANSPARENT

- Louis said it looks good on paper, but in reality, it’s not how things happen. He gave an example of the difficulty in accessing phone help when his son was escalating.

SUMMARY: ACCESS TO SERVICES

NEED FOR RE-TRAINING STAFF

REDUCING HEALTH DISPARITIES

- Sam said we are fortunate to have two new people in our Mental Health Administration. We welcome Warren coming from the state. He asked how can Contra Costa County live up to some of the other counties in the state in terms of how they’re doing? We need to have stakeholders be involved in the implementation of the plan. We also need to look at who isn’t involved in the FSP programs.

SUMMARY: INVOLVEMENT OF STAKEOLDERS IN THE EVALUATION

AND IMPLEMENTATION OF THE PLAN -- GATHERING DATA ON PERFORMANCE OUTCOMES

REQUESTED DIRECT CONSUMER REPORTS

- Carole said each year we are rushed and then told it will be better next year. We haven't gotten to the core of the service delivery. How many programs are receiving MHSA funds automatically? We need to effectively evaluate how money is being distributed. She stated the need for an in depth analysis of the quality. She suggested having consumers come in and address how the services have or have not worked for them. Steven said he's tried to be transparent and agrees with the comments, but given the time frame he's been given, changes could not be made this year. Improvements will be made next year.

SUMMARY: AUTOMATIVE ROLLOVER OF FUNDS.

WE NEED MORE INFORMATION TO SHOW MHSA IS WORKING PROPERLY. WE NEED PROOF.

- Teresa echoed Carole's comments. She said she also welcomes Warren. She said she is still not going to be able to support this Plan. She stated she feels we're flying blind. She added she sees things in the reports that she knows aren't true.

SUMMARY: NOT ENOUGH INFORMATION

- Jack stated CPAW has worked on this for years. The MHSA is supposed to be for the severely mentally ill, yet they're supposed to volunteer for services. But if you're severely mentally ill, you're probably not going to volunteer for services. That's a dichotomy.
- Teresa read a statement from the Department of Healthcare Services dated 7/10/13 that stated, "Pursuant to AB1467 and directions provided by the Governor, how MHSA funds and programs are locally funded is decided by your Board of Supervisors and the local Mental Health Board." Our comments need to reflect that we need direction from the BOS on how they want us to develop a collaborative partnership.

SUMMARY: ACCOUNTABILITY COLLABORATION

7. Develop List of Comments and Recommendations to the County Mental Health Administration (MHA) and to the Board of Supervisors

In addition to the above comments, only two comments were received by MHA, and two comments were received by the Commission.

Appreciation was expressed for Warren, Erin McCarty and Steve Hahn-Smith for their efforts.

Motion #1:

- Peggy made a motion, seconded by Sam, that the Commission accept the comments/recommendations and forward them to the Mental Health Administration for forwarding to the BOS.

Discussion:

- All comments should be considered substantive.
- Teresa said she liked the part in the Plan about the OCE, especially the line staff.
- Lauren asked if we would be voting on the Plan or the recommendations or just send the recommendations and comments forward.
- Carole said comments about Commissioners agreeing with or not agreeing with the Plan will be moved forward.

- Teresa objected to the process and asked us to revisit the process of not approving the Plan.
- Lauren said it is one of our duties as charged by the State to approve the Plan. The Agenda did not give us the ability to fulfill our responsibilities.
- Carole said she thinks the Commission wants to make a motion to approve or not based on making a recommendation on where we stand.
- We should take two votes. Lauren asked if we can support the Plan as written? If not, then vote on it with recommendations.

It was suggested that this motion be removed without a vote. Peggy and Sam agreed.

Motion #2:

- Jack made a motion seconded by Peggy to support the plan as written.

Vote:	<u>Ayes:</u>	<u>Nays:</u>	<u>Abstain:</u>
	Louis	Peggy	Sam
	Jack	Carole	
	Dave	Teresa	
		Lauren	

By a vote of 3-4-1, the motion did not pass.

Motion #3:

- Peggy made a motion, seconded by Jack, to approve the Plan with the revisions as suggested through comments and recommendations.

Discussion:

- Teresa asked Steven how he would revise the Plan based on the comments.
- Steven said it is doable. The document would need to be reformatted. We would see if there is a better way to call out the outcomes. Also make it more readable. Bringing in additional consumer comments is not doable for this year.
- Teresa asked what the process is going forward. She asked when it goes to the Board if it would not be a Consent item. She asked for the Commission to be contacted when it goes to the BOS.
- Lauren asked to remove the word “approve” as she cannot recommend it as written, but only what we are sending. She can approve comments and recommendation.
- Carole said if we as a Commission do not approve it, we need to send a statement.
- Sam: The revisions would need to come back, wouldn't they? If so, we can't approve because we don't know what the revisions are.
- Carole asked if Peggy and Jack wanted the motion as is to stay on the floor.
Vote: Jack and Peggy/ABS Sam, Carole, Louis, Teresa, No Dave, Lauren.

Motion #4:

Carole called for a final motion in order to move comments to MHA

- Lauren made a motion, seconded by Sam that the substantive comments and recommendations be forwarded to the County Mental Health Administration, and they will forward them to the Board of Supervisors.

Vote: The motion was approved by a unanimous vote of 8-0.

8. Adjourn Meeting

The meeting was adjourned at 8:00.

Respectfully submitted,
Karen Shuler, Executive Assistant
Contra Costa County Mental Health Commission