

**Mental Health Commission
Quality of Care Committee Minutes
February 16, 2017- FINAL**

Agenda Item / Discussion	Action / Follow-up
<p>I. Call to Order / Introductions The meeting was called to order by Committee Chair Barbara Serwin at 3:24 p.m.</p> <p><u>Members Present:</u> Vice Chair- Barbara Serwin, District II Connie Steers, District IV Gina Swirsding, District I</p> <p><u>Members Absent:</u> None</p> <p><u>Others Present:</u> Duane Chapman, District I Douglas Dunn, District III Jill Ray, Supv. Andersen’s office, District II Adam Down, CCBHS Liza A. Molina-Huntley, Executive Assistant for MHC</p>	<p>Executive Assistant:</p> <ul style="list-style-type: none"> • Transfer recording to computer. • Update Committee attendance • Update MHC Database
<p>II. Public Comment Doug announced the EMS 5150 SUMMIT will be on 2/22/17, at John Muir in Walnut Creek at the Ygnacio Valley facility, from 8am to 4:30pm. Chair will not be attending, defers ticket to colleague, Commissioner Connie Steers, who will be attending in her place</p>	
<p>III. Commissioner Comments Connie – a person known to her disappeared on a legal hold, gone for two weeks. Would like more to be done regarding the effects of psychiatric medications and other medications. More research needs to be done regarding the effects of mixing medications and how they affect the brain/behavior. Would like data to be obtained</p>	
<p>IV. Chair announcements/comments:</p> <ul style="list-style-type: none"> • Requests questions for Vern Wallace, regarding children and adolescents programs and/or facilities, to be directed to the Chair of this committee, before the full commission meeting on March 1, 2017. The Chair will forward all questions to Vern, Program Chief of Children’s and Adolescents for Mental Health • Last meeting there was not a quorum due to Connie and Gina being absent. There was an informational meeting with Vern Wallace regarding new legislation affecting long term care for children. • Gina will inform the Chair if she cannot attend the meeting 	
<p>V. APPROVE Minutes from November 17, 2016 meeting Chair reviewed and made corrections prior to the meeting. Gina moved and Connie seconded to approve the minutes as presented. VOTE: 3-0-0 YAYS: 3 NAYS: 0 ABSTAIN: 0 Present: Barbara, Connie, Gina Absent: 0</p>	

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<p>VI. RECEIVE and DISCUSS feasibility analysis to create a children’s inpatient treatment facility. – Warren Hayes</p> <ul style="list-style-type: none"> • Motion to move item to March committee meeting • Gina moved, Connie seconds • VOTE: 3-0-0 YAYS: 3 NAYS: 0 ABSTAIN: 0 • Present: Gina, Barbara, Connie Absent: none • Chair continues with agenda • Not present for presentation, although confirmed, conflicting schedules did not allow him to be present for the presentation. Sent apologies to Chair and attendees. 	<p>The 4D document will be request, by the Chair, to Warren</p>
<p>VII. DISCUSS needs for quality review of county facilities- Adam Down</p> <ul style="list-style-type: none"> • A list of 54 contract facilities, were provided to the attendees Only a few of the adult and children contractors, are not listed and some are not physical sites • Members of the Commission have visited some facilities in the past, not all commissioners on a regular basis • Chair proposes a proactive role in reviewing facilities on a regular basis, and the Committee conducting its own review of the facilities to provide valuable input regarding the quality of care and what services are being provided in the facilities listed • Consider for all Commission members to visit sites to educate and contribute to the process • Designate a person to keep track of facilities and identify primary focus sites • Create or locate a standardized checklist of items to review at sites. It is believed that the MHSA Finance Committee has one in place • Presented a comprehensive list of the contract facilities, utilized in Contra Costa County, that are MHSA program funded and are reviewed by MHSA. • Medi-Cal provides: consumer advocacy, obtain complaint forms and other services to the public and recipients. Website: http://www.medi-cal.ca.gov/ which will be included in the “Welcome” packet, being prepared by Behavioral Health Administration • Behavioral Health Administration does track some complaints and can provide information, if requested. • Behavioral Health Administration does conduct consumer surveys, several times throughout the year; although, the procedure for collecting data at clinics and at CCRMC at discharge, is unknown • Noted by Gina- at the Adult clinics in both Central and West County, discharge surveys were not distributed, although they were distributed at other centers and clinics • The most recent survey was conducted by the County, approximately a month ago • Noted by Duane- Shelter Inc. received funds from MHSA, why? Would like to obtain updated information regarding what facilities were reviewed recently, confirmation and outcome of review, and how often is the facility reviewed • Noted by Adam- it is important to provide a purpose to obtain or request information from Behavioral Health Administration. The Behavioral 	<p>Adam will try to provide the data from the most recent “Customer Satisfaction” surveys at the next meeting and will provide a list of renewals of contracts from January to June and continue to provide on a quarterly basis</p>

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<p>Health division does not currently have a consolidated contract unit that can obtain information in a readily manner</p> <ul style="list-style-type: none"> • Noted by Jill- information regarding Board agenda items cannot be released to the public, until 96 hours prior to the meeting, in accordance to the Brown Act and the BGO, (Better Government Ordinance), so everyone obtains the information at the same time. This is for all items and all meetings. Suggestion is that a designated Commissioner reviews the Board’s agenda on Thursdays, when the agenda is published, to search for items that might be of interest to the commission/ers. Not a Behavioral Health staff member, it would need to be a Commissioner. There are a large amount of items on every agenda. Every office is on the same schedule. The questions can be made to the pertaining department or entity, prior to the meeting. Items can be removed from the agenda, if deemed necessary. MHC reviews items to be entered into. • Adam conveyed that not all information can be provided upon request or within the time requested, not because BH does not want to provide the information but because it is not accessible or readily available. The Executive Assistant stressed the difficulty in accessing internal information as well. There is a desire to provide information; it just takes time to obtain. Announced that a new position was posted as a Mental Health PROGRAM CHIEF that will be responsible for directing administrative activities at Behavioral Health Administration. The new position will help solve the complexity of obtaining information and be able to consolidate, connect and coordinate the department’s resources information. • Commissioner Connie inquired how to search items on the BOS agenda? • Jill suggested viewing a prior agenda, to become familiar with the format, and search items that have an “MH” (acronym for Mental Health); this identifies the funding stream (MHSA, realignment I/II, hospital). Then Connie can check where the funding source is from. The BOS agenda items that are highlighted are current and have an agenda, the agenda items, noted in black ink, do not have an agenda posted • The Chair referenced the attached legislation: CALIFORNIA’S CHILD WELFARE CONTINUUM OF CARE REFORM. At the February meeting, although no quorum, Vern discussed the legislation and how our county is implementing it and provided the information for review, along with the SUMMARY ATTACHED, regarding the two new legislations AB403/AB1299 	
<p>VIII. REVIEW and ACCEPT the 2016 Year end committee report ALL documents must have “DRAFT” until final vote</p> <ul style="list-style-type: none"> • Gina moved to motion, Connie seconds VOTE: 3-0-0 YAYS: 3, NAYS: 0, ABSTAIN: 0 Present: Barbara, Connie, Gina Absent: none • Gina noted that consumers are having a difficult time to obtain medical devices that are needed, a mask, which is vital to her. Contra Costa County does not have a consumer advocacy to assist in obtaining information, medicines or devices. It is very overwhelming for those who have disabilities to obtain what they need and are mentally ill, 	

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<p>lose services.</p> <ul style="list-style-type: none"> • Connie also noted others that have informed her of miscommunication or errors being made against consumers, not for consumers. The department has been contracted out to Sacramento- “Self Help”. How to serve consumers better. <p>Some information cannot be disclosed, in full detail, due to HIPPA codes. Only generalized information can be provided regarding a population, not specifics.</p>	
<p>IX. REVIEW and DISCUSS goals and action plan for 2017: Gina moved to motion, Connie seconds VOTE: 3-0-0 YAYS: 3, NAYS: 0, ABSTAIN: 0 Present: Gina, Connie, Barbara</p> <ul style="list-style-type: none"> • Chair created report and reviewed all minutes and meetings including the prior goals set. • Some of the goals are: • A general statement that covers for Ad Hoc issues that appear in addressing gaps • Researching specialty mental health services • Monitoring PES • Continue to work with the criminal justice community to advocate for the improvement of care for the inmates who are mentally ill • Adam- suggests a deep dive into EQRO, will probably take two whole meetings, the way the state looks at quality of care. • Other options for goals were discussed: • Investigate drug and alcohol programs for mental health consumers • Investigate the deaths of the mentally ill consumers who are living in county homes and shelters 	<p>CHAIR will email EA the goals for 2017</p>
<p>X. Adjourned at 4:58pm</p>	

Respectfully submitted,
Liza Molina-Huntley
ASA II- Executive Assistant for MHC
CCHS- Behavioral Health Administration
Minutes approved on 3/16/17