

**MENTAL HEALTH COMMISSION  
JUSTICE SYSTEMS COMMITTEE MEETING MINUTES  
January 25, 2022 – FINAL**

<b>Agenda Item / Discussion</b>	<b>Action /Follow-Up</b>
<p><b>I. Call to Order / Introductions</b> Chair, Cmsr. Geri Stern, called the meeting to order @1:35pm</p> <p><u>Members Present:</u> Chair - Cmsr. Geri Stern, District I Cmsr. Alana Russaw, District IV</p> <p><u>Other Attendees:</u> Cmsr. Douglas Dunn, District III (2:14pm) Cmsr. Laura Griffin, District V Cmsr. Barbara Serwin, District II (1:55pm) Angela Beck Jennifer Bruggeman Teresa Pasquini Jill Ray (Supv. Candace Andersen's ofc) Stephanie Regular Baylee Wechsler, Transitional Age Youth Coordinator, NAMI, Contra Costa</p>	<p>Meeting was held via Zoom platform</p>
<p><b>II. PUBLIC COMMENTS: None</b></p>	
<p><b>III. COMMISSIONERS COMMENTS: None</b></p>	
<p><b>IV. CHAIR COMMENTS:</b></p> <ul style="list-style-type: none"> <li>• There was no meeting in December. Spent a great deal of time putting together the year end report. One thing that came up over and over that we have been pushing for from Detention Health was to collect some data on diagnosis and numbers of behavioral health detainees in both detention centers. We have asked a number of times and have received pushback from a number of fronts. John Kincaid (former Cmsr and committee member) had suggested at one point last year that we get an intern to collect the data since no one stepped up from detention health to do so. I put out an email to the Department of Criminal Justices at UC Berkely and received a response back from the Deputy Chair and said it probably won't work for our school, but I will put it through the school's public policy. I got two candidates, one of which had applied to be a commissioner at one point. She was really gung-ho</li> </ul> <p>I then sent the information to Lavonna Martin, the new Deputy Director of Detention Health and she said no, not at this time. I was incredibly upset and disappointed, but Lavonna was very kind, we spoke for an hour via Zoom and she explained that since she has come on board, Detention Health has a whole list of goals related to the Prison Law Office that are priority over the next year that is going to be all consuming. She stated she did not want to disappoint a student at UC Berkely and was familiar with the School of Public Policy (she attended) and felt this could be done in a year.</p> <p>In the meantime, Cmsr. Serwin contacted Steve Hahn-Smith (Informatics Director) and stated he might be able to collect this data. I gave him exactly what we wanted and he is in the process of collecting the data. What Lavonna did tell me was, that out 5300 people admitted to Detention last year, 2300 had behavioral health diagnosis, which is a lot. She stated that is to be expected. Later today, in this meeting, I will be going over the Stepping Up Program in the jails throughout the country and speaking to what I learned about behavioral health care in the jails nationally. I think we have a very good partner in Lavonna Martin. She is easy</p>	

<p>to get a hold of, she was very available and felt we can reach out and count on her for information.</p> <p>(Teresa Pasquini) Can you remind us of what your goal is for this data? What the direction is? (RESPONSE: Cmsr. Stern) I want to determine where these DSM5 diagnosis were clustering in the jails. What do we have? Mostly a mental Health issue? We obviously have a large percentage of substance abuse problems, but where are they? Are they drug or alcohol or a combination? Or a combination of drug and mental health? Where are they? What are they? Where do they fall? So that we can pinpoint, or perhaps, focus in the community more aggressive treatment so people don't end up in the jails. The data seems to be there, let's take a look. Without the data, we can't assess the needs and request for help in certain areas if we don't know what we are dealing with.</p>	
<p><b>V. APPROVE minutes from the November 23<sup>rd</sup>, 2021, Justice Systems Committee meeting</b></p> <p>Cmsr. Alana Russaw moved to approve the minutes as written. Seconded by L. Griffin. Vote: 3-0-0 Ayes: G. Stern (Chair), L. Griffin and A. Russaw Abstain: 0</p>	<p><a href="http://cchealth.org/mentalhealth/mhc/agendas-minutes.php">http://cchealth.org/mentalhealth/mhc/agendas-minutes.php</a></p>
<p><b>VI. RECIEVE a summary of former MHC Commissioner Teresa Pasquini's testimony on Lanterman-Petris-Short Act issues and concerns presented at the December 15, 2021 Joint Informational Hearing of the Health and Judiciary Committees of the California State Senate.</b></p> <p>Link to Ms. Pasquini's testimony: <a href="https://www.dropbox.com/s/0ig77a6o1slx2cf/TP.mp4?dl=0">https://www.dropbox.com/s/0ig77a6o1slx2cf/TP.mp4?dl=0</a></p> <p>(Cmsr. Stern) We have Teresa Pasquini here to summarize her testimony of December 15<sup>th</sup>, 2021 at the State Senate and I will turn this over to Ms. Pasquini.</p> <p>(Teresa Pasquini) I want to be really clear that I am only representing myself, personally. I am giving you my perspective. The day of this hearing, I was invited to give testimony representing NAMI California (National Alliance on Mental Illness); however, I made clear in my testimony that I was speaking in my own voice that day. My goal for my personal testimony was to bring the voices of families like mine into that room and to ensure that people knew the Legislatures and policy makers knew that even with resources and insurance and family members and access to a lot of resources, that you can still off the carved out cliffs of California's mental health system, both public and private. I have been very public with family's story form many years and I knew once my son was safe and out of the justice system, I knew I wanted the whole story to be told from beginning to current. I was only given five minutes and did go a little over. There is a video link to my testimony provided.</p> <p>I will add that I just had a blog posted by Pete Early, an author and sits on ISMICC (Interdepartmental Serious Mental Illness Coordinating Committee). He is a family member as well and just shared a blog post that I was able to go into a bit more detail and can also provide to the committee, as well. What I had hoped to bring into the room at the legislative hearing and into this room is my firm desire, my personal passion, is to lay down the ideological weapons that are harming clients and families and the providers that serve both. We all need to come together and create solutions because the status quo isn't really working for anyone.</p> <p>I would also like to add that I am being followed this year by a documentary film crew. The documentary is called "Nobody cares about crazy people" and is based on a book by a best-selling author, Ron Powers who lost a son to suicide. It are a couple family members in California that will be part of the film. There was a documentary film crew that was following us that day of the hearing. I did not stay for the whole nine hours and I am putting that forward because I had film crew, I didn't go up and spend the night and had a film crew in my room at 6:45am and it was a really long day. I had been working on my testimony up till then and after my testimony I stayed a bit longer</p>	

and knew I had to drive home. It took everything out of me and I left everything 'on the floor' from the effort I put into trying to communicate my lived experience, my family's lived experience, my experience as a partner in a public health system, my experience as a NAMI member, my experience as a local, state and national advocate.

I did go back and listen to the whole hearing so it is on tape. The hearing started with an overview of the Lanterman-Petris-Short (LPS) Act, it included attorneys from the national health law program, there was a fiscal policy analyst from the legislative analysts office that presented. There were also different members of the department health care services presenting and was followed by a panel of two African American women with different experiences. It was followed with a presentation by the state auditor, as there was a call for an audit a couple years ago regarding LPS. The intent was to find out how counties were implementing the LPS Act. Many were surprised at the results of the audit because the experience from most families and those that I know is that there is broad disparity in how the LPS is applied in each county. There are 58 counties and 58 ways that it is used, applied and interpreted. Those of us that are advocates across the state and have different relationships with different families know that there is no commonality on how it is applied.

The one thing the auditor did call out is there is strong feelings about the conservatee population, those on LPS conservatorships, there is definite concern expressed in the audit about how LPS conservatees are not adequately tracked. What happens to them when they come off? How they step up and step down? That resonated with me and was something that has been my experience. I agreed with that piece of the audit and it has partially been handled in Susan Eggman's SB-507, enacted last year and was the amendment to Laura's Law that states that when you are stepping off conservatorship, you can step down to Laura's Law without having to start over from scratch. The way Assisted Outpatient Treatment (AOT) was originally written, it was basically that one had to be deteriorating at the time of the referral.

There were several panels with different perspectives from across the state. There is definite consensus that we need to change. There was discussion that a special session was needed on this issue. It seems that there is very definite plans to move forward with some action and what action and what those changes look like, no one knows. There is currently legislation being drafted, possibly some legislation being reconsidered.

**Questions and Comments:**

- (Cmsr. Stern) On page 10 of that report, there is a graph (2005-2019) the number of permanent conservatorships has dropped by 6000 and temporary conservatorships have dropped by 4000. Is that statewide?  
(RESPONSE: Stephanie Regular) that is compiled by the Department of Health Care in California and would be all the reporting done through that website statewide.

**VII. DISCUSS ways that County agencies and the Mental Health Commission can advocate for the California Governor to appoint a position for oversight of the state's Conservatorship programs.**

(Cmsr. Stern) In regard to the Workshop from the fellow from New York University provided, the bottom line is there needs to be someone appointed by the Governor for the State of California to oversee the Department of Public Guardian's or Conservatorships to reign in and get some uniform data across the state. Is that your understanding? Was anything mentioned about that at the meeting, Teresa?

(Teresa Pasquini) Yes, Data and Accountability were strong themes, whether they had a clear understanding of what that it is, that was not necessarily articulated.  
<Quite a few minutes of fading out/unable to hear / understand what is being said>

(Cmsr. Stern) Is there any way that we can advocate to the Governor's office to appoint a conservator chair for the state? Someone who can oversee this and develop a set of standards that are uniform through out the state and guidelines that county

have to adhere to? I don't understand why everyone has their own opinion how their office of public guardian functions and it doesn't really seem to serve that population. Is there any thing we can do to move that forward? (RESPONSE: Cmsr. Serwin) The challenge, in my mind, is that this is one of those big state issues and others in this meeting (Teresa) are more aware of which specific lobbying groups have the most impact in that area. It seems that joining in with those groups is the way to go about it as it is going to take a team effort. There is nothing that prevents us from contacting that office with an advocacy request. All we can do is advocate at that level, we are not in an advisory capacity.

(Cmsr. Stern) I would like to propose that we make a motion to the Board of Supervisors (BoS) that they speak to the legislature or whoever their body above them is, because I don't know how we can do anything, more than what we have already done this year, to advocate without some statewide leadership on this issue. There seems to be a vacuum at the top. No one is 'steering the ship' and we need to start somewhere.

(Cmsr. Serwin) It is a good place to start and there is nothing that prohibits us from continuing to find what is the most connected party and making a statement of what we think is required. We are completely free to do that, as long as we don't contradict any position that has already been taken by the BoS stating they were *against* such a thing, we couldn't go and advocate *for* such a thing.

(Jill Ray) Just to clarify, it is not only going *against*, it actually can't advocate for anything that isn't part of the platform already. Something the Supervisors haven't already taken a position on, cannot be a position by the Mental Health Commission. The best way is to reach out to our legislature staff person, Lara Delany (County Administrator), and ask her if this is part of our legislative platform. (Cmsr. Serwin) We can request it be added if it wasn't? (RESPONSE: Jill Ray) Absolutely.

(Cmsr. Serwin) Cmsr. Stern, it would be up to your committee to formulate the motion for that, and as Jill recommended, to reach out first to Lara Delany. (Jill Ray) Just so you know, the BoS will turn around and ask Suzanne Tavano what her position on this is and that is why it will save a step and just go to whatever subcommittee in Family and Human Services or Internal Operations to dive deeper if it is not already a part of our legislative platform.

(Cmsr. Dunn) The big issue with funding, as I understand, the counties are totally responsible for funding their conservatorship departments. They receive no state funding whatsoever. That will be another issue. How is expanded conservatorship duties, the rights of the clients protected, etc. the funding will be a big issue. (RESPONSE: Cmsr. Stern) The fact that there is no funding coming in from the state is a red flag. How do you expect counties to function without some assistance from the state. It is a huge problem, it is very expensive. (Cmsr. Dunn) Right now, times are good because of all the funding, the state's getting all kinds of funding and the economist thinks it's too much and that's another issue. But when times are not good, it will crash.

(Cmsr. Serwin) Is there a county you have seen that is a 'model county' with respect to dealing with this issue? (Teresa Pasquini) No. I will say that for the last year I have been part of a 'grave disability' workgroup that exists down in LA County and was invited into that group last year. It is run by the Medical Director of their homeless project and includes a wide-\_\_\_\_\_ of their county staff. Yesterday their county public guardian presented at the meeting I was at yesterday. It has been a great learning opportunity for me to see how another county functions in this regard. They are different and manage things differently. I believe LA County has been ahead of the game on planning and preparing for some of the issues that are coming down now, such as the Department of State Hospital (DSH) issue, the jail and various 'human log jams' and I think they have been doing a great job preparing. They are not perfect but have been doing a good job. Their LA County jail is still the number one facility providing mental health services in LA County. It is still unacceptable, and they don't

<p>have it down, but they have done some good things. That is the only county that comes to mind.</p> <p>(Cmsr. Stern) We are not going to stop, I just think someone needs to be accountable at the state level and, at some point, there needs to be some department.</p> <p>(Teresa Pasquini) Well, the state realigned it to the county. I agree, I think there is a federal role here, as well. The IMD exclusion comes in. You can't provide treatment for people if there are no facilities to provide it. Lots of moving targets and I would encourage you all to keep your eye on tracking it.</p> <p>(Cmsr. Stern) I think people are not necessarily aware that there is no oversight at the state level. If everyone has their own agendas in each county and their own set way of doing things, it's a disaster because people are being placed out of county to another county with their own set of rules. It's just a mess. (Teresa Pasquini) Families know exactly what a mess it is and there are other organizations, such as NAMI, that have come out with recommended reforms for LPS and, again, we have until February 18<sup>th</sup> for any new legislation to be written. Lauren and I also met with a couple different legislative staff and with Senator Eggman's staff three times in the last year, we met with Senator Stern's staff and another assemblymember from LA County. I want to see some northern California advocacy going on and not have it be all in southern California. I would love to see the CCC BoS take a leadership role in the Bay Area. We absolutely need definite partners to solve this problem. It is just too big to accomplish on our own.</p> <p>(Cmsr. Serwin) One of the many responsibilities of the Mental Health Commissions and Boards is to evaluate how well services that were realigned to the county are being implemented, for each respective county. I don't know how it roles up when there is a particular service that has been realigned that isn't happening well at each county level. (Cmsr. Stern) I think our conversation with Lara Delany might be enlightening. We will do that shortly.</p>	
<p><b>VIII. DISCUSS how AB328 (Reentry Housing and Workforce Development Program) is moving through legislature and being instituted to address housing for formally incarcerated individuals.</b></p> <p>This is a state assembly bill (not a county bill) and we don't follow every bill closely, so the website would give you the most current status. There are different tabs that tell you where the status is and where the vote is.</p> <p>How it is going to be implemented going forward, I have no comment on that as there is not a final bill. We don't make plans as a county on how things will be implemented until we have a final piece of legislation.</p> <p>(Cmsr. Stern) Thank you for clarifying. I did get the summary.</p> <p>(Jill Ray) I will tell you, our Measure X committee did come up with some recommendations and the BoS approved the housing trust fund to be developed. AB109, the states transfer of certain inmates to the county's for responsibility, so there is a community advisory board focused on working through the housing issues those people who are re-entering the community and are working with the Health, Housing and Homeless (H3) division to determine what type of housing we need. There is not any one type and how each individual may need something different, so they are figuring it out. Most who are leaving our detention system don't necessarily want to go to a shelter bed. They are working on the different types of housing needed and what is best for the population coming from the justice system. So, regardless of that bill, our county is working on those issues. The goal is permanent supportive housing.</p> <p>(Cmsr. Stern) It is better to have something in the pipeline, so that's good news.</p>	

**IX. DISCUSS data and issues presented in a webinar held January 17, 2022 and sponsored by the Council of State Councils (CSG) Justice Center on the Stepping Up program and the use of contracted mental health services in jails**

Link to Step Up Together: <https://stepuptogether.org/>

(Cmsr. Stern) After I sat in on this webinar, I contacted Jennifer Yen. She said that CCC (or at least her department) is not a member of Stepping Up, but when she looked at the link for stepping up, she stated her department has been doing that since 2015. I don't know why our county is not doing this but what they did say is that not all states are participating, California is participating but maybe not all counties are participating.

The stepping up program is defined as: encouraging sheriff's departments to pair with contracting companies to provide mental health services in the jails.

(Jill Ray) We joined the stepping up effort as a county and we did the sequential intercept mapping (SIM) in 2018, report in 2019 to the BoS (will share link) and then the pandemic hit as we were deciding next steps. Supervisor Andersen asked for that to be put back on the public protection committee agenda for this year to discuss next steps. We do have the SIM, it is already out of date because we don't have some of the programs and we have added more. It was a great start and identified all the steps an individual goes through. Much as agreed that zero doesn't really represent zero, I think there is a pre-zero, a diversion part. That was not included. This is just about when someone hits the justice system and how we can divert them.

There is a lot of work that still needs to be done along those lines. As far as detention mental health, the sheriff is contracting with health services to provide detention mental health. Module M and our Martinez upgrades are in final stages (ahead of schedule) and upgrades and improvements to provide mental health services in that facility. We are moving forward with the west county reentry center, the pod that will provide mental health and substance abuse treatment programming out in west county area. We are moving forward in a lot of different ways. The lawsuit that happened is addressing a lot of the issues that Stepping Up was pointing to. I saw the webinar and the only thing I ask is what would your question(s) be, we are already contracting for mental health services within detention health.

(Cmsr. Stern) No questions, just going to report on the webinar. When I mentioned this to Cmsr. Serwin, we were not aware the psychiatrists were contracted and that was new information for us. We thought they were on staff with detention health. For instance, Meghan Della Selva and the other psychiatrists, we thought were on staff but they are hired through Transitions. (Jill Ray) Dr. White was our Behavioral Health Director and he, also was a contracted psychiatrist within our system. There is a serious lack of psychiatrists available to hire.

(Cmsr. Stern) I am just going through a brief summary of what was covered.

- Need to use a validated measuring tool that all parties utilize to measure which types of mental health issues are being evaluated.
- It is important to coordinate with reentry to provide good pre-release opportunities and services.
- Training is important between jail staff and mental health providers to know where their boundaries are between jail staff and mental health providers.
- Some of the services provided are medically managed withdrawal of opioids in jails.
- It's important to imbed mental health clinicians with the housing of the inmates being treated with mental health disorders.
- It's important to have re-entry navigators to collaborate with community providers on a daily basis.
- It's important that medical records are homed by the jails themselves in the database dashboards.

History of why jails went to contracted care for mental health services:

- The counties had control over the services and it was deemed to be inadequate and the jails then went to contracting services.
- Some of the negotiations between jails and contractor providers had a clause for liquidated damages.
- Liquidated damages can be initiated if the contractor doesn't perform and the sheriff can pull the contract.
- There is a profit motives for the contracting providers and the sheriffs offices that utilize them and need to be aware of how much Medicaid is reimbursing providers in the community to make it on par with jail providers.
- If the contractors are offering a cheaper price, then the sheriff's office needs to dig deeper to determine where the contractors may be cutting corners that are making their prices cheaper.

**Questions and Comments:**

- (Jill Ray) I will address one thing you said about data collection. Our detention health has been on the EPIC system for quite some time and they do have access to medical records with the medical facilities for anyone in our detention system.
- (Cmsr. Dunn) I agree it was just getting started when COVID hit and now we are in a holding pattern situation. In answer to jail being the ultimate back up, this is why my hair is on fire with the incompetent to stand trial (IST) issue. If CCC does nothing, I am telling everyone that will listen, our jails will be the ultimate holding tank for unrestorable persons judged Murphy Conservatees. They say there are five to seven, but that population will grow over time if we don't handle the IST population problem.
- (Jill Ray) Let's be clear. We are not opening more spaces, they are removing a set number of beds from Martinez and transferring them to West County in a unit that can handle that population and give them the treatment they need rather than just warehousing them waiting for a state bed. That's the goal, we are not adding any more beds to the system. Simply creating the beds that we need to help these people. Just to be clear, a lot of things did go on hold with the Pandemic; however, all the things I said we were working on, the Martinez facility and West County Detention facility, none of that was put on hold. We continued moving forward with all of those programming needs and all the constructions upgrades and all moved forward. The only thing we didn't continue with is the SIM tool to try to figure out how to fill more gaps. Although I know there has been more gaps filled over time because of the various funding we received. It just needs to be updated. Just to be clear we are only addressing those people that will hit the system to provide them the care they need. At the same time, we are working on a whole lot of diversion so people don't end up in the system. That is the ultimate goal, that people don't end up incarcerated if they have a mental health issue. That is the whole point of Stepping Up and that's why we joined it.
- (Cmsr. Dunn) That's why we, in the MHSA-Finance committee have put motions forward to the commission and then to BHS for sufficient funding for its new specialized facilities that we will need in this county so there is someplace to divert, not only the population you are talking about but the IST population that is coming back to our county.
- (Cmsr. Stern) <to Cmsr. Dunn> Please send me ideas to follow up on.
- (Cmsr. Russaw) I was wondering if someone can come from the program that Ms. Ray was speaking about in Martinez, or is it still too much in the fruition stages, the Stepping Up program? (RESPONSE: Jill Ray) The Stepping Up Initiative is a state/nationwide effort and we joined a few years ago, with the intention of Stepping Up is no finding, it's not an actual office, it's just an idea. The idea is to separate those people struggling from mental health in the justice system. Evaluate what we need to do in our system to help people who are struggling with mental health to not end up in our justice system. That's the goal. We joined that effort with that goal in mind, so the various things like the Martinez Detention facility is contracting with health services. I'm not sure that health services has

<p>the full plan on services that will be provided there but I know they are working with the sheriff on that.</p> <ul style="list-style-type: none"> <li>• (Cmsr. Serwin) Have we ever had anyone here from Stepping Up to give a comprehensive layout of what they are doing here in the county in terms of what we committed to doing in terms of what we are actually doing? (Jill Ray) There is no one from Stepping Up. I can provide information on the website so you can see the goals, but there is no one from Stepping Up, we had a consultant come in and got a grant to provide a consultant for that two day workshop that Teresa talked about to put together that report but no funding, no staff person, it's an idea we joined and as we move forward through public protection to determine next steps can certainly report on that. It is an internal county process and each county has their own process they go through in their own efforts.</li> <li>• (Cmsr. Serwin) How do we interface with the broader Stepping Up initiative, I see webinars sponsored by Stepping Up that have counties present, is there someone to coordinate or a point of contact? (Jill Ray) Tim Ewell, in our county administrator's office is now the Assistant County Administrator, he is our point person and we had several internal meetings with department heads to talk about what do we do moving forward? How do we move this forward within the county? It was at a point in time where those same people were sitting around the table for about five other issues going on in our county and we determined that creating a 'Stepping Up Working Group' was not the best way to move forward but what we did create was the Office of Re-Entry that coordinates a lot of those different efforts within the County Administrators Offices. Tim Ewell has held on to stepping up and that is what the discussions will be at Public Protection starting this year, February is the first meeting where we will talk about: What are the next steps? What do we want to do in our county? Where do we want to go with this from here? What needs to be updated? And how best to move it forward. There is no coordination with the greater effort. Nationwide, their goal is to just get more counties on board.</li> <li>• (Cmsr. Serwin) What is the office? (Jill Ray) Public Protection committee is the subcommittee on the BoS (Candace Andersen and Federal Glover) that handles all law and justice issues. It is on the agenda for this year to discuss how we will move forward now that we have all that. First meeting is the fourth Monday in February. They meet the fourth Monday of the month. (Cmsr. Serwin) Geri that seems to be a good thing to track on? (Cmsr. Stern) Yes, Angela can you make a note of that? (Jill Ray) February 28<sup>th</sup> at 10:30 am. The membership did not change, I anticipate it will continue on that same schedule.</li> </ul>	
<p><b>X. Adjourned at 2:59 pm</b></p>	<p>No meeting for December due to the holiday.</p>