

**MENTAL HEALTH COMMISSION
FINANCE COMMITTEE MEETING MINUTES
July 21st, 2022 - FINAL**

Agenda Item / Discussion	Action /Follow-Up
<p>I. Call to Order / Introductions Chair, Cmsr. Douglas Dunn, District III called the meeting to order at 1:34 pm.</p> <p><u>Members Present:</u> Chair, Cmsr. Douglas Dunn, District III Cmsr. Leslie May, District V Cmsr. Rhiannon Shires, District II</p> <p><u>Other Attendees:</u> Cmsr. Kerie Dietz-Roberts, District IV Cmsr. Laura Griffin, District V Angela Beck Jennifer Bruggeman Gerold Loenicker, CCBHS Child and Adolescent Programs Chief Jen Quallick (Supv. Candace Andersen’s ofc)</p>	<p>Meeting was held via Zoom platform</p>
<p>II. PUBLIC COMMENTS: None.</p>	
<p>III. COMMISSIONERS COMMENTS:</p> <ul style="list-style-type: none"> • (Cmsr. May) My first comment, I did meet with the City of Antioch administration and they did construct their letter to the Board of Supervisors (BOS) urging them to support Behavioral Health Services (BHS) and to ensure they did apply for, not just this round of grants, but all and that they will do same for each subsequent rounds, as well as conducting meetings within the City Administration office identifying properties out here (East County) that can be converted to new infrastructure to house every level of severe mental health. I have finally got them on board and they will be following through. My final comment, who stated they were interested in properties or has properties... I did not understand, is this private non-profits looking at purchasing county properties? Who is it? There have been properties identified out here in East County. I am wondering who is trying to keep secrets? • (Cmsr. Griffin) They have identified four (4) sites that have potential, but have asked us to keep it confidential at the moment, not give out the names of the properties and parties involved. That is basically for bidding purposes and that nature so that we don’t get outbid, or raise the prices on us. That is what was relayed to us in the steering committee meeting and we have to honor that. (RESPONSE: Cmsr. May) I was curious because, you know, at one time I was actually going out, driving around to properties and sending properties to whoever the person is in charge of acquiring properties, I sent quite a few, spoke to the realtors and did all that. This is before they hit the MLS. I have always tried to do my part and assist. • (Cmsr. Griffin) You will happy but we were asked to keep it confidential. 	

<p>IV. COMMITTEE CHAIR COMMENTS:</p> <ul style="list-style-type: none"> (Cmsr. Dunn) Right now we are focusing on children and adolescent programs because the Behavioral Health Continuum Infrastructure Project (BHCIP) with whom Cmsr. Griffin is involved with and on the steering committee with behavioral health services (BHS) leadership, the deadline for proposals is going to be August 31st and I hope, if it is possible, that Mr. Loenicker could let us know what they are planning to bid on at the August finance committee meeting. Starting in September, we will be focusing on Round 5 of the BHCIP. Cmsr. Griffin has kept the commission well up to date so if you have further questions, about what it all involves, I will defer to Cmsr. Griffin. Then in Round 6 (the last). The reason these rounds are so important is the state put out over \$2.2bil (actually \$3bil) including the \$800mil in the Community Care Expansion (CCE). The original deadline was in July, but there is still money on the table and several Contra Costa County (CCC) Community-based organizations (CBOs) want to bid on this but want to do so in private so they have asked CCBHS to not say who they are. So, Dr. Tavano is honoring that and as chair of this committee, along with Cmsr. Griffin, we are honoring that as well. So once that is done, we will then be focusing after Round 5 and Round 6 which are around \$480mil each. 	
<p>V. APPROVE minutes from June 16th, 2022, meeting:</p> <ul style="list-style-type: none"> Cmsr. May moved to approve the minutes with corrections. Seconded by Cmsr. Shires <p>Vote: 3-0-0 Ayes: D. Dunn, L. May, R. Shires Abstain: none</p>	<p>Agendas/minutes can be found at: http://cchealth.org/mentalhealth/mhc/agendas-minutes.php</p>
<p>VI. DISCUSS Current Focus: Begin discussion of strategy for analyzing how money is spent on Contra Costa Children & Adolescent services</p> <p>(Cmsr. Dunn) To start, let's refer to the Attachment A – MHC Finance Committee Discussion on strategy for analyzing how money is spent per region on county BHS. Our current focus is on Children and Adolescent Services (Medi-CAL clients grades K-12). Some of the main issues:</p> <ol style="list-style-type: none"> How funding sources and their expenditures are tracked per region and clinics and other program contracts within the region for: <ul style="list-style-type: none"> Medi-Cal billing Federal Financial Participation reimbursement “match” 1991 state Realignment 2011 state Realignment Mental Health Services Act Federal and State Grants County General Services Contribution How services funding and expenditures are “tracked” per region and clinics within each region for: <p>Children and Adolescents: Ages 0-17</p> <ul style="list-style-type: none"> School based services contracts “Specialty” Mental Health Services for Children & Adolescents (school based and non-school based services contracts) 	

Adults and Older Adults: Ages 18 and up

Adults: Ages 18-59

- Clinic services contracts
- Specialty Mental Health Services contracts

Older Adults: Ages 60 and older

- Clinic services contracts
- Other services contracts

Operational and other issues

- Are Mental Health and AOD program contracts and their costs tracked by region and clinics and programs within that region?
- South county—Supervisor District 2—historically not recognized as a legitimate service area—lumped into central county region with Concord based clinic services
- Program “Coding” vs. “Cost Center” Coding, now have incorporated MHSA program contract coding.
- Other issues? One that I have realized, out here in East county, there are issues between East and Far East county. Most of the clinics are either in Pittsburg (Adult) or in East Antioch (children, BHS and Medical). You go out to Brentwood, Discovery Bay, there is nothing.

Observation

- Likely a multi-year process with hundreds of contracts to review, esp. if contracts and their costs are not electronically tracked via the 3 main CCBHS regions—West, Central, and East

Comments and Questions:

(Cmsr. May) I was reviewing and have a few comments. It appears that Care Court is going to pass. I am such a proponent for that. There has been such a lack of parental and guardian input and involvement. There have been issues forever where a parent/guardian has had no input or kept in the loop. In this tracking, and looking at the reports we will discuss, I want to see parent/guardian input. I also want to see provider input, those actually providing the services at the locations to say, ‘we know what kind of money came in, but we are not providing enough groups/care’ (LMFTs/LCFWs) limited to what services they are providing and how limited they are and what they can provide to clients.

We need that input because, when we go to the administrators, they can write a wonderful glowing report. Anyone can write a beautiful report, but it can be untrue. I would like to speak to people that work at these places. I hear the feedback. Things like, ‘we have received this money, but no raise in salary and want us to take on more patients.’ They may have a meeting to discuss the contract, what and where they are allocating that in the budget and state they will be have 10 groups a week, etc. But in reality they are not providing that. They are shortchanging where the funds are being allocated.

We also have parents and guardians that are stating these places (services) are not meeting our children’s needs. I am hearing a lot of horrific stories (truly terrible stories) and concerned they are not getting to have input. Even older adults. There are parents in their 80s taking care of 60 year old children.

The next part I would like to comment on, under 'operational and other issues', you speak to South county Supervisor District II. It hasn't been recognized as a legitimate service area. It is lumped in with Concord. That's not fair because you name Brentwood, Oakley, Discovery Bay – that is very important. I believe I shared this before...My area that I cover (one person, mind you) all from Martinez, all the way out to San Ramon and all the way to Discovery Bay. That is too large of an area for one person and I am finding that I am referring them to Concord for a psych evaluation and a full copy of the panel. Then, when I realize there is someone that is so serious and severe, I have to send them out to have them evaluated. My supervisor is having me send these clients to the county facilities into Concord. There are really no facilities (San Ramon up to Walnut Creek and from the Caldecott on up); we are looing at three big regions that need these services, places where these folks can go to locally without having to drive 40 miles in heavy traffic (680/Hwy 4 corridors). That is another issue that needs to be brought into focus. Financing and also the parent/guardian input and the actual providers to get their feedback. There is some funny business going on with the finances of a lot of these places.

(Cmsr. Shires) What is meant by 'historically not recognized as a legitimate service area'? and what town's fall within that area?

(RESPONSE: D. Dunn) Historically, behavioral health services had been broken out into three regions. There is a MediCAL focus to BHS and most of the MediCAL residents live in one of those three areas -- Central, West and, now a significant, amount (40%) lives east of Willow Pass, which is East county. Historically, apparently very few MediCAL recipients (lower income) live in Supervisor Andersen's district.

(Cmsr. Shires) I wasn't aware of that. (Cmsr. D. Dunn) there should be some county services (between Lafayette /Orinda and between Danville/San Ramon) and right now there are none.

(Cmsr. Shires) What can we do about that? We as commissioners, what kind of action do we need, who do we need to be in contact with? How do we 'grass root'? (Cmsr. Dunn) To start with, we first need to get a mapped graph as to where the regions (cities) where MediCAL residents live to help determine where services are (or should be) located. For discussions sake, between Lafayette and Orinda, there might not be as many County BHS providers as East, Central and West, but we still need something between Danville and San Ramon, as well. So, first we need to know where the target population lives. As Chair, I am willing to do that. Contact Pat Godley and Dr. Tavano to see if there is some data or map that shows where these folks live (protecting privacy of course).

(Cmsr. Shires) There certainly are, as I know starting with the pandemic, I was doing a lot of pro-bono work with those in that demographic.

(Cmsr. May) I wanted to add one more component to this. They also do not have any partial hospitalization programs or intensive out-patient programs in those areas. I am having clients from these regions/cities and was directed to call John Muir. When I did speak with them, John Muir stated they do have an intensive outpatient, but only take them from 14 up and try to keep them at home when there are very severe mental illness and behavioral problems without placing in facilities, which

we know would be somewhere out of this county. There is no partial hospitalization. John Muir also do not take MediCAL, as well as Kaiser, they would have to write a referral to attend their program and it is basically six (6) weeks of group therapy. These are issues, that in Alameda County, they have this handled and have so for years. Contra Costa is missing the boat so terribly. This has been heard for years from the public, everyone. This is really an atrocity. We are still functioning in the dark ages. My final comment is that even though the areas I spoke of (Caldecott to 680/San Ramon to Walnut Creek), even in Antioch. Those areas are what we used to call 'historically' the affluent areas. But guess what? There are a lot of folks whose family members or another whole family has moved back into the family home because of financial circumstances due to mental illness in the family. They need assistance and move back in with their older parents, so the grand parents help with these children. So where the old numbers are, we need to get these updates, Dr. Tavano needs to really start looking to get real time numbers of where the MediCAL recipients are now registered and living. It is going to be a dramatic change from where it was in 2020 (just within two years). It is so important and what I wanted to add.

(Cmsr. Shires) Part of what has happened, too, during 2020 is that there are a lot of single mom's now trying to make it with their children and are on MediCAL and not getting services. Some is COVID-based, where there has been death of a spouse or divorce/spousal abuse. There are some families where you will have three, four, sometimes five families living in one home, trying to make it together.

(Cmsr. Dunn) Yes, to that point, where we live (on our street) in Antioch, there are two houses that used to be old homes and were sold to corporations and now there are rentals. There are three to five families living in them. They are taking pretty decent care of the house, but with COVID and the extremely high cost of living here in the Bay Area and the East County, I understand why.

(Cmsr. Shires) And people used to have insurance with their jobs and now with no work and all they have is MediCAL. It is everywhere and bringing this up, it is so important we address that issue.

VII. REVIEW Behavioral Health Services (BHS) contracts below and ask questions to Program Managers (if available):

- A. La Cheim School Contract and Amended Agreement**
- B. West Contra Costa Unified School District Contract**
- C. Martinez Unified School District Vicente Continuation High School Contract**
- D. James Morehouse Project at El Cerrito High School Contract**

La Cheim School Contract and Amended Agreement (Gerold Leonicker)

This contract that contains three distinct services within the contract:

- Short-term residential treatment (STRTP) facility. One (1) six-bed house in West County. They accept placements from child welfare and probation. They provide mental health services to those residents. BHS does not place children in residential treatment, it is either probation or child welfare, or in some cases, the school district. BHS pays for and arranges for mental health services provided in

those facilities. There are licensed therapists on staff to provide those mental health services while residents are at those facilities. As a reminder, STRTP are the successor (replacement) for the old group homes. It was recognized that with children and adolescents, a group home should never be a long-term solution. A child should be in a family-based home and congregate care facility should really be a short-term treatment solution, rather than a long-term placement.

- Therapeutic Behavioral Services (TBS) program. Not stand alone mental health services, they are provided in conjunction with other mental health services. If there is already a case manager or care coordinator or a therapist in place that provides treatment for the underlying mental health disorder, the therapist can make a referral for therapeutic behavioral services for a behavioral specialist to come in and help the client with specific targeted behaviors that may be in the way of functioning at the school or at the home. If there is a clear disruptive behavior (tantrum or the like), they come up with a behavior plan that the client and caregiver can implement to development replacement alternative behaviors that are more adaptive. TBS is a fairly robust program they run.
- School-based Day Treatment program. It is a non-public school where districts such as West Contra Costa Unified (WCCUSD) or Mt. Diablo (MDUSD), where kids get placed for education who have a very hard time functioning in a normal school environment. La Cheim runs a very small, contained school program for (up to) 12 students that are taught by a special education teacher that is hired by La Cheim and those students usually receive pretty intensive mental health services at the school location. They all have a therapist assigned and not meant to be a long-term school placement, it is meant to help the student develop the necessary skills to return to mainstream education.

West Contra Costa Unified School District Contract (Gerold Leonicker)

- West Contra Costa Unified School District (WCCUSD) run a school-based counseling and wrap around clinic. It is not tied to specific schools. It is clinicians who provide services to students from a variety of schools. Students are identified within the district and referred to that clinic. The clinic is one of contract providers (like any other), similar to Bay Area Community Resources or SENECA or any other. If the school district becomes a mental health contract provide and so their clinic accepts referrals from students within the district and the therapists typically go out to the schools and provide services at the location. For students who have more complex needs (special education or have more complex needs) and need coordination, they are also referred to the wrap-around program within the clinic, where in addition to, getting therapy, they are getting wrap-around services. There is a team of folks that get together and talk about the needs of the family with the family. It is where the family comes together with the providers to talk about the needs of the family and how those needs could be met and make a plan. The wrap-around team comes up with a plan to address the various needs of the family.

Martinez Unified School District Vicente Continuation High School Contract (Jennifer Bruggeman)

This and the James Morehead Project Contracts are MHSA funded programs under prevention and early intervention (PEI). These PEI contracts tend to be much smaller than the medical-based contracts, such as the one's you were speaking to Gerold about. Typically, these tend to be one initiative within the agency or program or they pay for a portion of staff salaries. That is pretty much the case is here. Vicente is a continuation high school in the Martinez Unified School District (MUSD) and it is located downtown Martinez next to the District offices on Susana Street. It is a beautiful, relatively new building and they have been very gracious with us, allowed us (before COVID) to host various meetings there after school hours, etc. Many of the commissioners who have been here for a while have actually been there. It being a continuation high school, it is generally students (historically) who are credit deficient or, perhaps, struggling for one reason or another in the larger mainstream public high school setting so they are referred to the continuation high school.

The last program review, just before COVID, we were told by the principal, that now Vicente has become this place that students actually opt to go to versus Alhambra or a larger high school because they just really like it, it has a great reputation, it is a very welcoming space and the classes are much smaller. They have very innovative and unique programming that is really tailored to meet each student's unique needs.

The funding they receive through this MHSA contract, I believe the primary counselor at the high school, Amy Spector is a licensed clinician. When we were there last, there was another clinician that I believe was half time. The way it is set up, themes around mental health and wellness are really infused throughout all of the programming. You don't have to have a referral, any student can access the mental health counseling piece if they wish. They told us that every student they have has talked to the counselor at least on one occasion and not necessarily due to any kind of serious mental health issue, but just for that extra level of support.

James Morehouse Project at El Cerrito High School Contract (Jennifer Bruggeman)

The James Morehouse Project is a Wellness Center that is located at El Cerrito High School in El Cerrito (West County). Both of these programs have been with MHSA since the beginning of MHSA funding became available in CCC, these two programs have been receiving funding and have evolved over time. The James Morehouse Project is, as said, a Wellness Center that anyone within the school can access services there, there is no need for a referral.

They put a lot of intention and effort into making this wellness center very welcoming and not stigmatizing. It is not a place where you would go because you are having a problem with your mental health, perse. You can go because you need a band aid or an icepack or, because they have partnered with public health, so there is also some medical and dental services kids can receive within this Wellness Center, in addition to

groups and individual therapy, they do a lot of restorative justice work and youth leadership opportunities.

The director of the program is Jenn Rader, and is a great educator, teacher, facilitator. She facilitates the Trauma 101 courses that have been offered all throughout the county. They do also have licensed clinicians on staff, as well rely on clinical interns every year. It is a really sought after program to do an internship because they specialize in a particular kind of Narrative Therapy, and there are not a lot of those internships available in the United States and have intern applicants from all over the country and outside the country, who want to come train under the staff that work there. It is a really great program and we were very excited to visit the program and see how they operate. The school, in terms of the demographics, the Director told us that El Cerrito High School is kind of unique in that it is culturally or ethnically equally diverse in terms of 25% black/African American students, 25% white/Caucasian, 25% Latinx and 25% Asian/American Pacific Islander (AAPI). It is a very balanced student population.

Comments and Questions:

- (Cmsr. Dunn) The time in an STRTP is six (6) to nine (9) months, correct? (RESPONSE: G. Leonicker) That is exactly right. La Cheim runs one of those STRTPs.
- (Cmsr. May) La Cheim, this small, contained school (non-public) is it located out in El Sobrante? (Yes) and how would a parent or care-giver be able to enquire about putting their child in to the program. (RESPONSE: G. Leonicker) Good question. They are all students on an individual education program (IEP). Those students with that placement need would be placed by the IEP team through the district at that school. Transportation would be provided, usually through the district.
- (Cmsr. Shires) Would it only be certain school districts? Is it all school districts in CCC? (RESPONSE: Gerold Leonicker) Yes. La Cheim used to have two locations, but they closed one. It is down to the one location in El Sobrante. Since it is a non-public school, technically every district in the county could place there but it is usually the district that is (somewhat) in proximity. But can accept students from districts within the county and outside the county.
- (Cmsr. Shires) I have question regarding wrap-around talking to family about needs and addressing them, what kind of needs are they addressing? (RESPONSE: Gerold Leonicker) Wrap-around comes into play when families struggle with various social factors that impact a child or the family of a mental health situation. Food insecurity, long-standing struggles (i.e.. Family instability, moving from school to school), where once or twice a week therapy just isn't enough, you really need to pull the whole family and the other supports of the family together to not only talk about more narrow mental health issues of the child, but also to speak about how to address the nutritional needs of the child and family, where the backpack comes from, or summer camp/summer support, after school support and how those needs can be taken care of. Where the various support, professional and non-professional, come together to wrap-around the family.

- (Cmsr. Shires) Do you actually provide that family with resources? (RESPONSE: Gerold Leonicker) We don't provide the resources ourselves, but the wrap-around team links the family to those resources where their needs can be met. In very limited circumstances, when there are flex funds available, we can provide those supports as well. It is very limited though.
- (Cmsr. Shires) If there are medical needs in the family, do you help them with that also? (RESPONSE: Gerold Leonicker) The wrap around teams will help the family navigate the system, how to get an appointment, who to go to, etc.
- (Cmsr. Shires) Are there interpreters? Are they able to help different populations from the community (RESPONSE: Gerold Leonicker) Yes, there is always that go. Bilingual (esp. Spanish) a therapist is always the goal. I cannot say what status currently is, in terms of the bilingual staff in that program, but for every program I know of, there is always the goal to attract bilingual staff.
- (Cmsr. May) What if a person has been expelled from the regular Martinez school, would this be a school they can attend? (RESPONSE: J. Bruggeman) That is a great question that I don't know the answer to and would have to research that.
- (Cmsr. May) What if they have, because of their severe behavioral / mental health diagnosis, if they are on medication but if their expulsion were because of their behaviors, would this be like a second chance opportunity? I believe that kids (adolescents/teens), they should have a second chance, even if they can't make it in a 'regular' school, if there are intensive counselors there that can monitor and are available to interact with the students. I feel the social component is so important on the journey of 'recovery' (not necessarily substance abuse) to normalize their situation. (RESPONSE: J. Bruggeman) Those are great questions and it is my understanding that it is very much a second chance for students who have struggled in the mainstream setting and had issues with attendance or suspensions, but expulsion, I am not sure specifically but I will find out. Certainly, suspension and various other barriers are making that larger setting just not work for individual students. This is an opportunity to have more of a creative approach to education and help catch up on all the credits they are behind so they do graduate on time. In one of the summaries, it goes into how there are a lot of experiential learning opportunities, leadership opportunities. Some of the kids there, before COVID, when we visited, they had started a podcast about mental health and interviewing various people from the community. They have service learning projects, career preparation, mentoring, internships and all kinds of opportunities that are really tailored to the interests and needs of the student. They have partnerships with a lot of local businesses to help with some of the internship experiences.
- (Cmsr. Griffin) The CCC Office of Education handles all the expulsions for the county public schools, so they have a variety of programs in the student programs department for children that have been suspended and expelled and I think it really matters the degree, one on one basis, depending on what the problem is. If you go on to their

<p>website, they also show all kinds of different support services they have for children that get expelled and suspended in our county.</p> <ul style="list-style-type: none"> • (Cmsr. Shires) The only comment I wanted to make is that what I really love about this program (James Morehouse Project), and I have been working with a lot of wellness programs, is they have partnered this with Public Health so that kids can just go in and not have a sense of they have to have a mental health issue. A lot of kids, even though we are trying to get away from the stigma, it is still there. One of the problems we are having in our district here, and I have been speaking with a lot of kids, is the fact that they have to ask for a pass from their teacher to go to the wellness center and that has been the biggest impediment to going. They feel like they are saying to their teacher (or anyone) something is wrong, instead just being able to go and then have someone at the wellness center giving them an excuse for the class they are missing at that point in time to get the help they need. I like this program a lot. 	
<p>VIII. Adjourned meeting at 2:53 pm</p>	