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MHSOAC
Mental Health Services
Oversight and Accountability Commission

MHSA Services Committee
Meeting Minutes
April 8, 2009

1500 Capitol Ave, Hearing Room #167
Sacramento, CA 95814

Committee Members Present

Dr. David Pating, Chair
Beth Gould, Co-Chair
Sergio Aguilar-Gaxiola, MD
Rocco Cheng, Ph.D.
Richard Conklin, LCSW
Fran Edelstein Ph.D.
Karen Moberly-Todoroff*
James Gilmer
Mary Hale
Michael Oprendek, LCSW
Peter Manoleas, LCSW
Janice Rollins-Dean, MSW
Betsy Sheldon
David Weikel MSW
Sean Zullo

Committee Staff

Ann Collentine
Dee Lemonds
Vivian Lee

Other Attendees

Darlene Prettyman
Sherri Whitt
Bev Whitcomb
Rusty Selix
Stacie Hiramoto
Filomena Yuroshek
Deborah Lee, Ph.D.
Monika Grass
William Rhett-Mariscal
Ann Arneill-Py
William Suibney
Zoey Todd
Barbara Marquez
Arnulfo Medina
Sandra Marley
Dede Ranahan
Stephanie Welch
Lin Benjamin for Terri Restelli-Deits

* Teleconference participant

Agenda Item	Discussion	Action(s)	Individual Responsible
Welcome and Introductions Introduction of New Committee Members	1. Commissioners Dr. David Pating and Beth Gould serves as Co-Chairs. 2. Both co-chairs extended a warm welcome to all attendees to the first meeting of the Services Committee 1. Introductions occurred for all meeting participants 2. Commissioner Pating commented on why the various members of the committee had been selected and the valuable expertise they bring in a variety of service areas.		Commissioners:. Pating and Gould Commissioners:. Pating and Gould
Presentation of MHSA Services Committee Charter and Workplan	1. Dr. Pating explained that it would be the responsibility of this committee to make recommendations to the MHSOAC on various issues including: • oversight and implementation of Plan Reviews • the Integrated Plan expected to be developed for use in 2012 • integrating the recommendations from the MHSOAC Co-occurring Disorders Report • vision for technical assistance and training • strategic collaboration with other MHSOAC committees and other agencies 2.It was noted that although this committee has responsibility for ensuring the quality and fidelity of the Plan Review process the Client/Family Leadership Committee is responsible for designing an appeal process for Plan Reviews 3.Discussion of the Committee's workplan included identification of three future dates for all-day committee meetings. Future meeting dates are		Commissioners:. Pating and Gould Ann Collentine

	June 17, 2009, September 9, 2009 and November 4, 2009. 4. Broad discussion took place about the specific work of the committee, areas of focus, opportunities available nationally that support committee work and accountability for committee work. ➢ There was recognition that this committee would look at the community input process as part of Plan Review ➢ Discussion about the need to look at working with Primary Care and the opportunities that may be available as a result of the Federal stimulus package and both state and federal initiatives ➢ CIMH indicated that they have done some work on collaboration with primary care that could be valuable ➢ Discussion about the White House holding stakeholder meetings to focus on the "whole person" and suggestion that the committee review the White Paper produced by CMHDA on healthcare reform. ➢ Discussion about how this committee would be accountable to its goals and track its work. Suggestion that committee review at end of each meeting to ensure that Workplan priorities are covered. Ultimately this Committee is accountable to the Commission and as such will be reporting on its work to the Commission. Discussion about need to transition from measuring access to care' to measuring 'quality of care'. This will require indicators for quality of care.		Committee Discussion
New Member Orientation	A powerpoint presentation provided an overview of the MHSA.		Ann Collentine

Overview of Plan Review and Technical Assistance	1. Commissioner Pating indicated his desire to focus on transformative services and the need to have enough specificity in MHSA plans up front to reasonably determine whether the plan is workable and will likely result in the desired outcomes. ➢ Discussion about how funding impacts access and the need for this Committee to provide input to the Fiscal Committee. A workgroup or subcommittee of this committee will make recommendations to the Fiscal Committee. ➢ Discussion about what constitutes 'quality indicators' and what the community sees as important versus what county mental health may identify. ➢ Discussion about what the Innovation Committee hopes to see in the Innovation Plans. ➢ Mention of the FAQ's expected from DMH that will identify more flexibility for Full Service Partnership (FSP) programs. ➢ Discussion of Housing Plan reviews and the focus on access for cultural groups. ➢ Discussion of the Workforce, Education and Training (WET) plan reviews. Reviewers are not sure the plans are as transformative as they would like. Additional focus on this issue will occur following work on Prevention Early Intervention (PEI) Plan reviews. ➢ Discussion of "Parking Lot" issues that require further discussion and focus at another time. Identified issues include: 1)administrative processes versus workability of plans; 2)problems that arise when the MHSA intends to be transformative and state administrative processes are not, i.e. MHSA statutes provide for avoiding the general contract process while state policies continue to require standard contract procedures ➢ Discussion of the need for service indicator outcomes		Commissioners:. Pating and Gould

	➢ Discussion about what happens even when a program has positive outcomes. Concern expressed that Innovation will go the way of other demonstration pilots and projects that are successful and yet cannot be sustained because they lose funding. ➢ Discussion about the vibrancy and integrity of the community planning process and the need to focus TA on reiterating the vision for the community planning process and understanding who are the stakeholders. ➢ Discussion about the status of counties' understanding of the recovery/integration model for services under Community Services and Supports (CSS). ➢ Commissioner Pating reported that the MHSOAC Evaluation Committee was issuing an RFP for MHSA Evaluation. The Evaluation Committee expects to have a framework for the MHSA evaluation within one year. They will not have the indicators at that time but do intend to include service indicators in the evaluation design. ➢ Discussion about the need to keep evaluation as simple as possible and not re-invent methods that may already exist. Examples cited included AB 2034 outcome collection and methods used in the HIV community to identify outreach contacts. ➢ There was discussion about sharing information from this Services Committee with the Evaluation Committee. ➢ Discussion about the disconnect felt in Native American communities as they perceive that a county went ahead and did what they wanted regardless of the input received from the Native American stakeholders. The community believes that if they do not go to stakeholder meetings they are perceived as not wanting to participate and when they do go the result is their issues are not addressed.		

	➢ Another problem for counties is that they continue to identify new groups of persons who need service but frequently do not have the staff or services to provide. ➢ With regard to PEI there is confusion among some counties about when "early intervention" applies versus when FSP treatment would be appropriate. ➢ Discussion about the need to overcome this barrier by having a clear vision about what good recovery looks like. For example where does PEI leave off and CSS begin? ➢ Discussion about a report on Prevention produced by the Institute of Medicine that was 15 years in the making. An identified challenge was how to measure and allow enough time to evaluate. This report includes suggestions communities may implement that target prevention. ➢ It was noted that CIMH is developing a clearinghouse of resources related to PEI. ➢ It was suggested that there should be a feedback loop to community stakeholders about what has been learned in California and across the country about prevention efforts.	A survey will be distributed to gather information about what has been learned through local PEI efforts. This input will be collated and brought back to this group for discussion.	Ann Collentine/ MHSOAC Staff
Review Draft Innovation Review Tool	Staff presented an overview of the Draft Innovation Tool. ➢ This tool is not intended as a "rating" system. ➢ The tool is a way to focus discussion and get input from reviewers. ➢ Innovation guidelines will become regulations and the Review Tool should be in sync with both. ➢ The Review Tool contains provisions from both statutes and regulation. ➢ The review process should be based on principles with flexibility for counties in how they apply those principles.	Staff will send the Innovation Review Tool via e-mail to all Services Committee members for feedback. The tool will then be	Deborah Lee Ann Collentine

	➢ Generally the reviewers' discussion about an Innovation Plan focuses on: 1. What is great about this Plan? 2. Are there things in the Plan that do *not* meet guidelines or reviewers cannot tell whether they meet guidelines? 3. Issues of interest but not directly related to the Review Tool, the regulations or the guidelines. ➢ Discussion about the MHSOAC's desire to include both "required" questions on the Review Tool as well as other questions that might not be required but would produce rich information. This method was discouraged by DMH. ➢ Comment about the Review Tool not addressing the quality of projects. ➢ Support expressed for having information about how the Review Team will approach quality analysis of Innovation Projects. ➢ Comment about Plans being important but implementation being key. Discussion about the need to support counties by providing TA before counties begin writing their Innovation Plans. This should start with the CPP process. ➢ Comment reminding committee that they always have the opportunity to comment on regulations during the public comment period. ➢ Both PEI and Housing regulation packages should be available for review in the near future. ➢ Sheri Whitt indicated that she is tracking the DMH rulemaking calendar and will share that information with committees. ➢ Committee members volunteered to review regulation packages.	forwarded to the Commission for approval. Review PEI Regulations Review Housing Regulations	Committee Volunteers Commissioner Pating, : James Gilmer,, Rocco Cheng, Peter Manoleas, Karen Todoroff, Mary Hale Commissioner: Darlene Prettyman, Committee Volunteers: Commissioner

			Pating, Karen Todoroff, Sean Zullo, Commissioner Darlene Prettyman
Discussion of Memorandum of Understanding (MOU)	Commissioner Gould presented the MOU to the Committee There was discussion about the MOU being developed among DMH, CMHDA, MHSOAC and the CMHPC. ➢ The MOU is intended to clarify the various roles of the involved entities and comply with some recommendations from the OSAE report. ➢ Confusion was expressed about what issues go to MHSOAC committees for discussion and what does not. Sheri Whitt indicated that the MHSOAC is still working on clarifying direction. ➢ There was discussion about how Commissioners are briefed with Sheri indicating that Commissioners will have access to committee comments which sometimes may be summarized. ➢ It was explained that this committee is advisory to Commissioners Pating and Gould who will take input and develop recommendations to the Commission. ➢ Comment was expressed that the MOU was developed without other stakeholder involvement. As a result the MOU seems to take the narrowest view of the role for the MHSOAC.	Committee members may share comments about the MOU with Sheri Whitt prior to April 24th.	Commissioner: Gould
Future Areas of Focus for MHSA Opportunity with Courts	Commissioner Pating opened a discussion about the need for the State to collaborate with other agencies to become truly integrated and improve treatment for offenders. ➢ An opportunity exists to liaison with the Administrative Office of the Courts (AOC) to develop recommendations for how the courts deal with persons with co-occurring mental illness and substance abuse	A workgroup of committee members, staff and other interested stakeholders will	Commissioner Pating Workgroup Members: Commissioner Pating, Mary Hale,

	disorder. ➢ Discussion about a project funded by the California Endowment to look at the integration of mental health and primary care. CIMH is organizing a series of conversations about this. ➢ Comment that this is not only an opportunity to leverage resources but also an opportunity to develop partnerships. ➢ Comment that the projects being funded might be applicable for both PEI and Innovation.	develop an interim document to be shared with the AOC. Committee members volunteered to review the opportunity to seek funding for a project integrating mental health and primary care.	Richard Conklin, Public: Rusty Selix, Delphine Brody, Judge Wendy Lindley, Staff: Dee Lemonds Committee Volunteers: Janice Rollins-Dean, Sergio Aguilar-Gaxiola Peter Manoleas, Commissioner: Darlene Prettyman, Public: Harriet Markell, Alfredo Aguirre Commissioner Pating and Dr. Aguilar-Gaxiola will bring information back to this committee for the June 17th meeting.

Statewide Project Review	Commissioner Gould opened a discussion about the various PEI statewide projects that have been planned and the intended funding. Information presented about Suicide Prevention, the Student Mental Health Initiative, Stigma Discrimination Reduction and Reducing Disparities. Information was reported about the status of counties assigning funds for statewide PEI projects. ➢ The majority of counties including most large counties have not yet assigned funds to the State for PEI statewide projects. ➢ Suggestion that stakeholders that originally conceived the PEI statewide projects should have the opportunity for input about how to proceed. ➢ Discussion about whether there is any opportunity to clarify existing MHSA statutes to require counties to assign this money for statewide projects. The legislature by a majority vote may clarify existing terms of MHSA statutes while it takes a 2/3 vote to add provisions that are consistent with the Act. ➢ Suggestion that counties should not plan on spending the dollars intended for statewide PEI projects in another way until final decisions are reached. Counties who have already 'assigned' their funds should not worry that other counties will not have to contribute to the statewide effort. If it is decided that a statewide project will not go forward than all counties would get their 'assigned' money back. Discussion about whether to establish a subcommittee to deal with this issue.	Convene a workgroup to include other stakeholders to review options for statewide PEI projects. Committee members volunteered	Commissioner Gould Committee Discussion Commissioner Gould and MHSOAC staff Committee Workgroup Members: Betsy Sheldon, Sean

	➢ Discussion about the real options to be considered and whether comments about statewide projects could be included in comments on the PEI regulations? ➢ Interest expressed in knowing how much money has already been spent on this effort including workgroups, work at DMH, etc. and in knowing what types of activities will be involved in the specific projects.	Prepare summary document identifying the various options for statewide projects and explaining the status of various projects.	Zullo, Rocco Cheng, James Gilmer, Fran Edelstein Monika Grass
Public Comment	Discussion about how services are impacted due to lack of funds and the need to collaborate with the MHSOAC Fiscal Committee.	Committee member and other stakeholder who sit on the Fiscal Committee will represent service issues with the Fiscal Committee.	Committee Member: Michael Oprendek Public: Rusty Selix and MHSOAC staff

Review of Action Items and Areas of Focus for Committee	➢ The committee discussed its possible role in reviewing the RFP being developed for MHSA evaluation. ➢ Discussion of ongoing efforts to build partnerships with the courts and improve outcomes for persons involved in the criminal justice system. ➢ Information to be brought to next committee meeting regarding opportunities for projects that integrate mental health and primary care. ➢ Workgroup to review and digest range of options related to statewide PEI projects. ➢ Suggestion that committee receive adequate background on issues and be notified about work of other MHSOAC committees.	Staff will add all committee members to the MHSOAC List Serve.	Ann Collentine / Vivian Lee

Next Meeting	June 17th, 9:30 AM in Sacramento.		
Adjourn	Meeting adjourned at 4:00 PM		