



## **May 28, 2009 Meeting Minutes**

California Institute for Mental Health  
Sequoia Room  
2125 19<sup>th</sup> Street, 2<sup>nd</sup> Floor  
Sacramento California

### **1. Call to Order**

Chair Poat called the meeting to order at 9:06 a.m.

### **2. Roll Call**

Commissioners in attendance: Andrew Poat, Chair, Larry Poaster, Vice Chair. Richard Bray, Linford Gayle, Beth Gould, Tom Greene, Richard Van Horn, William Kolender, David Pating, Patrick Henning, Darlene Prettyman, Larry Trujillo, and Eduardo Vega.

Not in attendance: Lou Correa, Howard Kahn, and Mary Hayashi.

Thirteen members were present and a quorum was established.

**Chair Poat** commented on the recent election, in which the voters again chose to support mental health. However, he also recognizes that this does not mean to imply that the budget problems are over. MHSOAC looks forward to being a resource to the Governor and the Legislature.

**Chair Poat** also recognized Older Adults Mental Health Week, currently being celebrated. Twenty-two counties have submitted the PEI plans that address the mental health of older adults. Examples are:

- Butte County - a lesser populated county, which has proposed special programs for senior adults
- Calaveras County - which has included a grandparents project
- Contra Costa County - a more highly populated county, which has put together two special programs for seniors

### **3. Adoption of April 2009 Meeting Minutes**

**Motion:** *Upon motion by Commissioner Prettyman, seconded by Commissioner Greene, the Commission unanimously adopted the April 2009 Minutes.*

#### **4. MHSOAC Strategic Direction**

**Chair Poat** opened by looking at the options MHSOAC has relative to AB 5xxx. AB 5xxx was adopted in the budget agreement a few months ago. The Governor and the Legislature would like to expand the role of MHSOAC. How should we implement this legislation and move forward?

**Executive Director Sheri Whitt** gave a PowerPoint presentation. She prefaced it with the staff recommendation that it may be in the best interest of the Commission to consider continuing on in its current relationship with DMH, in addition to entering into an interagency agreement with them to clarify any other operational issues.

##### **A. Adopt role pursuant to Chapter 20, Statutes of 2009 (AB 5xxx)**

**Ms. Whitt** provided some background on AB 5xxx:

- Chapter 20 of the Third Extraordinary Session of 2009 (AB 5xxx) was an urgency measure which went into immediate effect and amended three sections of the MHSOAC
- There have been opportunities for public input
- Some stakeholders feel that this was put on an MHSOAC agenda without enough opportunity for stakeholder input. Perhaps having 30 days or longer available for input would have been helpful.
- MHSOAC sections amended were Welfare and Institutions Code (WIC) Sections 5845, 5946, and 5847

Regarding the amendments to MHSOAC Section 5845:

- The amendment to MHSOAC Section 5845 contains three amendments that do not require MHSOAC action, because the Commission already does those things
- The “Separate and Apart” portion of the MHSOAC Section 5845 amendment states, “The Commission shall administer its operations separate and apart from the State Department of Mental Health”

**Ms. Filomena Yeroshek**, staff counsel, described what “separate and apart” might mean:

- Option 1: In plain language it means totally autonomous in operation
- Option 2: It means autonomous in hiring and firing staff

The options are problematic because the Legislature did not provide funding autonomy; DMH still holds the purse strings. Ms. Yeroshek suggested two ways that MHSOAC can proceed:

1. Have WIC Section 5892 amended to provide MHSOAC with authority to administer its own administration funds
2. Reach an agreement with DMH on how to deal with the funds issue

**Ms. Whitt** discussed the pros and cons of each option.

**Commissioner Pating** asked about the fiscal impact of one of the options;

**Commissioner Henning** then asked about the fiscal impact of all the options. **Ms. Whitt** replied that one of the ongoing challenges the Commission has is that its money comes via the Budget Change Proposal (BCP) process. Aside from that, the only available money to fund Commission activities is the 5% line item of the MHSA.

**Commissioner Greene** asked who authored the language in this bill and what was their intention? **Ms. Whitt** replied that the author of AB 5xxx was Noreen Evans, Budget Chair, although she wasn't necessarily the author of the specific language. Staff does not have a public confirmation of the source of the "separate and apart" language.

**Chair Poat** pointed out that the opinions of those who wrote the bill have no standing. The issue was the words adopted by the Legislature. Several commissioners disagreed. **Commissioner Greene** remarked that it's a nuanced situation, and meaning is rarely plain. "Separate and apart" is a powerful phrase. That's why he was curious about what the Legislative history was.

**Commissioner Henning** pointed out that **Ms. Yeroshek** spoke about the broader context of the words, rather than strict interpretation.

**Ms. Yeroshek** mentioned that the lack of public legislative history is a problem. All of the changes made by the bill provide for a picture of increased operational independence of the Commission. Just because it's the plain meaning as well as the legislative intent does not mean it's the best strategic way to go at this time.

**Ms. Whitt** remarked that, from a staff perspective, the hope is that the Commission will strive for greater levels of independence. To make this happen, MHSOAC would have to go to the Legislature, ask for a change in its authority, figure out how to get to its piece of the money -- many steps are involved and it seems premature to try at this time. But the MHSOAC needs to decide.

**Vice Chair Poaster** asked what the public record was on this. **Ms. Yeroshek** replied that there were several analyses for AB 5xxx but no public hearing -- it was a budget trailer bill, which has very little documentation, but the analyses are public.

**Commissioner Henning** asked again about fiscal impact of the options. The MHSOAC is looking at a pretty serious decision about its autonomy. Funds are more and more precious, and we need to have detailed information about fiscal impact before taking an action. **Chair Poat** responded that staff is attempting to get some general direction from the Commission before they invest lots of time gathering information.

**Commissioner Henning** asked for some sort of level: ten Personnel Years (PYs), or one PY? **Chair Poat** replied that it will probably be several PYs.

**Vice Chair Poaster** asked if "separate and apart" meant a separate IT system, or a separate personnel administration system, or a separate general services system? **Ms. Whitt** responded that these are the issues in front of the Commission; there is an incredible amount of nuance in all of this.

**Ms. Whitt** stated that MHSOAC Section 5846, WIC 5846 (b) states that “plans that are submitted must be approved within 60 days after receipt.” This is currently the standard that MHSOAC engages in with DMH, so no action is required. WIC 5846 (c) also requires no action.

**Ms. Yeroshek** clarified that “guidelines” do not equal “regulations,” which are legally binding law that the Legislature authorizes other State entities to adopt. The Legislature did not do that here; they used the word “guidelines” in two sections of 5846 and 5847.

**Commissioner Greene** asked whether there is an explicit limitation on these guidelines with respect to how they might affect DMH. **Ms. Yeroshek** replied that there is not. He asked whether it would also be the case that this guideline language would overcome any concern about underground regulations. **Ms. Yeroshek** didn’t think so; although she would need to research that further to be certain.

**Ms. Whitt** clarified that the Commission has the authority to write guidelines, but guidelines carry no authority to make the counties conduct themselves in a particular way; only regulations do that. Thus, a “grey zone” is created that adds difficulty to providing clear feedback to the counties on this issue.

**Chair Poat** suggested that the Commission move in one of two directions:

1. Flesh out the presentation further by enumerating what the functions are.
2. In a climate where State government is laying off employees and forcing furloughs, it doesn’t seem timely for the Commission to be building a larger organization. Let’s look at another ad hoc way to implement AB 5xxx.

**Commissioner Greene** suggested that the Commission go to DMH and say that it wants an interagency agreement. We are “separate and apart,” but we want to be efficient. Let us start this process as separate and apart -- we are an oversight agency and we oversee them. We can’t be in a position where we’re utterly dependent on them for budget matters. Finally, he would like staff to sit down with Darrell Steinberg and get a better bead on what the author or authors had in mind here.

Commissioners further discussed the parameters and implications of “separate and apart” and how best to clarify the term, as well as the appropriate wording for a motion.

**Motion:** *Upon motion by Chair Poat, seconded by Commissioner Greene, the Commission affirmed its policy independence and directed staff to return at the June MHSOAC meeting and enumerate the following regarding operational independence:*

1. *The key functions of MHSOAC operations.*
2. *The current method of achieving those functions.*
3. *Recommendations on how to proceed with current operations or amended procedures authorized by AB 5xxx.*
4. *MHSOAC budget implications for each of these.*
5. *Provide a suggested timeline for the activities described above.*

## **B. Adopt MHSOAC Multi-Year Strategic Plan for 2009-2010**

**Ms. Whitt** provided the PowerPoint presentation, which was posted on the MHSOAC website and distributed on the MHSOAC listserv.

Some stakeholders provided enthusiastic feedback about using the plan and the calendar; others expressed regret at their lack of involvement in actually developing the plan. They feel that responding to developed draft documents is too limited, and possibly inconsistent with the MHSA. Some stakeholders hope to be more involved in the development of future MHSA strategic plans.

**Ms. Whitt** presented the plan's background:

- The Mission, Vision, and Values come from past adopted documents
- The Goals, Objectives, and Strategies come from Strategic Planning Meetings and the Chair's PowerPoint of January 2009
- Statements of Intent clarify the goals, but do not add additional content
- Action steps mostly come from committee charters and activities, MHSOAC-mandated activities, or other current statewide activities or projects
- The document represents an effort at bringing together action, conversation and dialogue that has taken place in other venues. Very little in the document should look new or unfamiliar
- Goals and clarifying Statements of Intent are meant to be multi-year and have no explicit timelines
- Objectives/Strategies and their timelines will change from year to year
- Details about the role of staff, committees, and the Commission in achieving the objectives/strategies have been added for transparency and project management

Comments about the calendar:

- It was created as a companion to the MHSOAC Multi-Year Strategic Business Plan; it describes main timeframes for accomplishing plan objectives by month
- An updated copy will be distributed at each MHSOAC meeting
- A copy will be brought to each MHSOAC meeting to document date changes

**Ms. Whitt** then asked the Committee to consider approving the goals.

- Goal I: Define "transformation" and articulate its vision
- Goal II: Develop an integrated, consistent approach to evaluate the results of the MHSOAC, and facilitate the adoption of best practices across the entire community-based mental health system

- Goal III: Adopt an approach for significantly reducing forms of mental health stigma and resulting discrimination towards those at risk of and living with mental illness and their families
- Goal IV: Further define the roles and responsibilities of the Commission
- Goal V: Adopt an approach for reducing disparities in access to and quality of services for racial, ethnic and cultural communities

As the Committee considers approval of the goals, **Ms. Whitt** offered reasons for supporting the goals as identified.

- The goals allow the Commission to have broad impact in several high priority areas
- The goals are consistent with the MHSA
- The goals are consistent with stated MHSOAC priorities, as expressed in past strategic planning meetings and the MHSOAC Chair PowerPoint of January 2009

**Ms. Whitt** offered a contrasting perspective, for not approving the goals as identified.

- The goals commit the Commission, committees and staff to a demanding, and possibly not achievable, workload
- It could be advantageous to focus increased attention on fewer goals

**Ms. Whitt** concluded the presentation by offering staff recommendations for approving the goals and entire MHSOAC Multi-Year Strategic Business Plan as written.

- While the workload is demanding, it is achievable. Now, more than ever, is the time to press forward and make demonstrable, meaningful progress in key areas of MHSOAC policy and implementation
- Given agreement regarding the goals, objectives and strategies, the plan is ready for approval. Details regarding the role of staff, committees and the Commission in carrying out the plan can be adjusted through the committee and Commission process as needed

**Commissioner Henning** asked if the motion outlined has enough flexibility to adjust to MHSOAC's interpretation of the results of their 5xxx discussion. **Ms. Whitt** replied that it does; the goals as written stand and remain relevant, regardless of how MHSOAC chooses to interpret "separate and apart."

**Chair Poat** asked where operating the five programs of the Act would fall among the priorities? He felt that the Commission's reason for being is not explicitly mentioned in the document. **Commissioner Pating** agreed, saying he would support pulling it out as a separate goal.

**Commissioner Henning** added that he would like to see the role of individual commissioners outlined -- as the roles of staff, committees, and full Commission are outlined. **Ms. Whitt** responded that commissioner roles are outlined in the Rules of Procedure; and clarification can be found when all the documents are viewed as a whole.

**Chair Poat** reiterated that the goal of his PowerPoint in January was that everyone -- Commissioners, stakeholders, interested parties -- would know what's happening and when decisions are being made. This needs to be public knowledge. All partners need to know what will be adopted, say, six months from now. That is the goal of the Strategic Plan.

Commissioners further discussed the appropriate wording and sequencing of goals.

**Motion:** *Upon motion by Chair Poat, seconded by Commissioner Pating, the Commission unanimously voted to adopt the MHSOAC Multi-Year Strategic Business Plan, with the addition of, as Goal #1 (and subsequent renumbering of the following goals): "Continue to fund and execute all five MHSA programs - objectives, strategies, and roles identified accordingly."*

#### **C. Adopt MHSOAC Committee Charters**

**Ms. Whitt** began by noting that the primary request was a formatting change: making sure that all the charters were put into a common format. All the charters have been looked at before by the Commission.

**Chair Poat** referenced the "big picture": committee chairs, supported by the staff member assigned to each committee, work to the plan. Chairs raise their hands the moment the committee is in jeopardy of not achieving the plan -- this shouldn't happen two days before a Commission meeting or one hour before a vote. It is a matter of transparency; everyone will know what we're doing. We will set dates and manage to those dates.

#### **D. Adopt Rules of Procedure**

**Ms. Whitt** gave a PowerPoint presentation summarizing the Rules of Procedure, which include:

- The process of development of the Rules; opportunity for input for Commissioners and stakeholders; and actual stakeholder input
- Organization of the Rules
- Terms and roles of Commissioners
- Process for Election of Chair and Vice Chair
- Commissioner vacancy and expenses; Commissioner orientation and training
- Conflict of interest situations and their prevention
- Commission representation
- The role of the Executive Director and Chief Legal Counsel

- Procedures for Commission and committee meetings

Various changes were requested by Commissioners and will be incorporated by the staff, who will develop another draft Rules of Procedure, as well as an Executive Committee charter, for next month's meeting.

The issue of public process timeframes was addressed. Is 30 days enough notice for stakeholders to bring upcoming topics to their constituents, and then bring back their responses to the Commission? **Commissioner Van Horn** agreed that the 6-month meeting agenda posting, recommended by **Chair Poat**, may solve the problem. **Commissioner Gould** remarked that, when the committees have important policy issues at hand, it's incumbent on the committee chairs and co-chairs to involve stakeholders at the beginning of the process.

**Motion:** *Upon motion by Commissioner Pating, seconded by Commissioner Prettyman, the Commission unanimously voted to adopt the following MHSOAC committee charters for 2009:*

1. *The Cultural and Linguistic Competence Committee*
2. *The Client and Family Leadership Committee*
3. *The Mental Health Funding and Policy Committee*
4. *The Evaluation Committee*
5. *The Mental Health Services Committee*

## **5. Discuss Mental Health Budget for FY 2009-10 and FY 2010-11**

**Commissioner Greene**, in his role as Funding and Policy Committee Chair, opened the topic by remarking that the Commission has obligated the Funding and Policy Committee to provide updates on the evolving budget picture and this is the committee's first report.

Currently the budget picture is very much a moving target. The good news is that Proposition 1E was defeated by an overwhelming margin, suggesting broad public support for issues that MHSOAC advocates. The bad news is that the State thought there was a budget conclusion earlier this year; that has turned out not to be the case. State revenue projections are falling rapidly. County budgets are collapsing. Thus, we are seeing significant dollar reductions at both levels.

According to the Department of Finance, for FY 08-09 the State is \$3.5 billion in the hole. For FY 09-10 the projection is \$9 billion. Including the propositions, which were worth \$5.8 billion, and changes in programs (including Unemployment) that increase costs by \$3 billion; the total negative number is \$21.3 billion. Adding negative tax revenues, the number goes up to \$24.1 billion.

UCLA experts project that the economy will begin to uptick in 2010. By 2011, California will begin to return to a more normal growth pattern. But for budgeting purposes, we have to assume that we're in a 2-year down cycle until we start to get back to normal.

After the Propositions failed, the Governor outlined his “doomsday budget.” It contains three possible actions worth noting:

1. Move part of the budget solution into the next budget year
2. Move the state’s budget problem to the counties by borrowing from the counties
3. Accelerate revenues into this current budget cycle

Including cuts to health and human services, all these actions don’t solve the budget deficit. We will probably need to find between \$5 and \$8 billion more.

As of May 26, we saw a series of proposals to make further cuts -- to CalWorks, Corrections, Medi-Cal, and Healthy Families. We will probably see an additional set of proposed cuts from the Legislature. In terms of Mental Health reductions, Medi-Cal, Mental Health Managed Care, EPSDT, and FFP for Healthy Families are targets. When all these programs lose state dollars, the matching federal dollars will also be reduced. In terms of the people MHSOAC watches out for, these are all very substantial cuts.

Payment delays and borrowing have enormous implications in the real world of local services. The Legislative Analysts Office (LAO) suggests that these cuts should be accompanied with additional flexibility in the use of the funds that remain. As a Commission, we need to be watchful about what that might mean to mental health services.

What to watch for in this fluid situation:

- The perception of the pace of economic recovery. If the economy begins to uptick, maybe we can plan for a \$20 billion deficit problem instead of \$24 billion
- The raw amount of federal stimulus dollars we might get
- The strings attached; whether the state can supply required matching dollars
- Flexibility in the use of funds
- Specific funding reductions in state mental health programs
- Reduced county incomes, with increased borrowing from the counties by the state
- Borrowing capacity issues

As individuals and as a Commission, we need to decide what roles we want to take in this ongoing debate with enormous human implications to the people we’re concerned about.

**Ms. Stephanie Welch** of the California Mental Health Directors Association (CMHDA) was invited forward. She explained that the only unspent monies that could possibly be swept this year are CSS or PEI, with about \$6 million. The CMHDA is working with a few counties that have minimal amounts and probably want to put those amounts in their prudent reserve.

**Ms. Pat Ryan**, also of CMHDA, made the point that realignment revenues for the counties, which is their core funding, are supposed to be growing but are expected to be down 17% this fiscal year. This creates a new base for next year. To quantify that, its \$200 million dollars lost for mental health alone.

**Chair Poat** suggested that MHSOAC partners give presentations at the county and state levels, to explain the status and policies associated with prudent reserve money, and in that way the counties can learn how to make the money available. CMHDA, DMH, and MHSOAC will all be involved.

**Chair Poat** also requested that **Commissioner Vega** work with staff to provide a draft informational letter, helping the Commission illustrate the likely impacts of eliminating some of the county programs.

### **Public Comments**

- **Mr. Jorge Wong**, speaking for Mr. Rocco Cheng, expressed that there should be a minimum of 30 days for any public posting, in printed or electronic media, of any information given. Also, many individuals from different cultural, ethnic, and linguistic backgrounds often don't have the opportunity to express their views, so Mr. Cheng urges having two such representatives on each of MHSOAC's committees.
- **Ms. Delphine Brody**, California Network of Mental Health Clients, CARE Coalition, MHSOAC Community Partners, addressed these items:
  - On AD 5xxx: although the Network has not had the opportunity to review it, they support the idea of the MHSOAC becoming independent and using its accountability and oversight powers.
  - Regarding the Strategic Plan: there are some great ideas to look forward to. The Vision could stand some revision.
  - Defining Transformation and articulating its Vision: (Ms. Brody distributed a memo on behalf of the Network.)
  - Regarding the Rules for Procedure: The Network is concerned that there be 30 days of notice. (Executive Officer Whitt will set up a meeting with Ms. Brody about her concerns.)
- **Mr. Rusty Selix** addressed two AB 5xxx issues. On fiscal independence, MHSOAC has as much independence as any other group funded by the Governor and the Legislature. On the guidelines vs. regulations issue: if MHSOAC adopts guidelines, DMH can amend their regulations to reflect that.
- **Ms. Fran Edelstein**, California Alliance of Child and Family Services, supported the comments made by the Commissioners regarding "separate and apart": MHSOAC should be guided by the notion that it needs the independence necessary to carry out its oversight function. She also urged having a 30-day notice for written materials.

- **Ms. Stacie Hiramoto**, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO) and the Mental Health Association of California, thanked MHSOAC for considering the requirement to have two people from racial, ethnic, and cultural communities on each committee. She also thanked Commissioners Van Horn and Vega for bringing forth the information from their committee meeting yesterday. She requested clearer requirements for the committees in the Rules and Procedures, and for any future Executive Committee to have meetings open to the public.
- **Ms. Cheryl Maxson**, Modoc County, had two concerns - Regarding the planned calendar: will it include conferences, workshops, etc. of related organizations? Regarding the fiscal budget: Governor Schwarzenegger should reinstate the luxury tax.
- **Ms. Stephanie Welch**, CMHDA, requested the Commission be mindful, while considering AB 5xxx, not to duplicate effort, which might be costly. Also, in terms of operationalizing transformation, counties have already operationalized transformation in the way that they've implemented their CSS and PEI plans. She requested MHSOAC work with the counties for consistency. Lastly, for training and orientation in the Rules and Procedures, Ms. Welch requested that fiscal policies be included that related to community mental health.

**Chair Poat** thanked Ms. Dede Ranahan of NAMI California for the note she distributed on behalf of a variety of organizations on the MOU.

- **Ms. Ranahan** then gave her wish list for items to be included in the Strategic Plan. She also suggested that MHSOAC send a letter to be distributed at next week's state budget hearing.
- **Mr. Steve Leoni**, MHSA Implementation Team with the Network, and Board of Directors of the Mental Health Association of California, commented on the Rules and Procedures. He would like to see mention of comments in the committees. He also stated that there's a big difference between the 30-day timeline and the document itself; back and forth dialogue with the counties from the start of the 30-day comment time is necessary.
- **Ms. Pat Ryan**, CMHDA, made a plea to the Commissioners to begin focusing on mitigating damage at the local level due to budget cuts, and assisting people at the local level as they cope with service reductions.
- **Ms. Patricia Gainer**, specializing in client-led mental health services and mental health governance related to the MHSA, addressed the first strategic goal of Defining Transformation. She read the MHSA vision of Defining Transformation and urged MHSOAC to correlate with this. She added comments about AB 5xxx, committee structure, and MHSOAC lacking underserved cultural group leadership in implementing the MHSA.
- **Ms. Linda Picton** of Sonoma County commented on social and linguistic competence. She stated that the system is broken, and that clients need reasonable access to the services they require.

6. **Closed Session** -- [The Commission met in closed session pursuant to Government Code Section 11126(a)(1).]

7. **Adopt Innovation Review Tool**

**Ms. Ann Collentine**, MHSOAC staff, gave a short presentation on the reformatted draft Innovation Plan Review Tool, which is consistent with all the innovation guidelines that have been published. It was vetted with the Mental Health Services Committee. Ms. Collentine concluded with the staff recommendation for approval.

**Commissioner Pating** highlighted the key question in the Tool -- Question #9: "Is the project innovative?" This question will probably be the crux of what the plan approval will revolve around.

**Commissioner Henning** asked about item #23; which appears to preclude other funds coming in. After discussion, the language was further clarified.

**Commissioner Vega** was concerned about the qualifying language in each of the items #11-17: "only if applicable." **Commissioner Pating** clarified that the Tool is actually used as a review check sheet for the Plan Review Team. The real integrity of this process is with the team itself and the ultimate determination will be: Did it meet the guideline?

**Public Comment**

- **Eric Zuniga** stated that in respect to #9, the innovation description, there is a psychology model that addresses the complexities of the human condition with simplicity. (He distributed corresponding document to Commissioners and staff.)

**Motion:** *Upon motion by Commissioner Van Horn, seconded by Commissioner Gould, the Commission voted to adopt the Review Tool. The motion passed with one abstention.*

8. **PEI State-Administered Projects -- County Assignments of Funding to State**

**Ms. Beverly Whitcomb**, MHSOAC staff, gave the PowerPoint presentation. She noted that the three PEI Statewide Projects in jeopardy are Student Mental Health Initiative (SMHI), Suicide Prevention, and Stigma and Discrimination Reduction. The staff recommendation is that the Commission should defer the decision to approve PEI Statewide Project funds for local PEI plans for three months, so that the Commission may obtain input from stakeholder counties and others on this issue.

**Commissioner Gould** added that the Service Committee would like the additional time to work with the counties and the stakeholders to see what the entire range of options might be in regard to salvaging, reconfiguring, keeping, etc. these excellent projects.

**Commissioner Henning** expressed the concern that three months may be too long, given the current budget situation, for the money to be sitting and not being spent.

**Ms. Whitcomb** continued her presentation. Highlights follow:

- Established amounts to be set aside for the PEI Projects total \$244 million
- Currently only 17 counties have assigned funds for FY 08-09 through FY 11-12, for a total of \$45.5 million

- Three counties (Shasta, Nevada, and San Joaquin) have requested to use funds to develop and implement local PEI plans instead of assigning the funds back to the State. These counties' Plans are up for approval today.
- The general consensus is that additional time is needed to determine the best way to proceed

**Commissioner Pating** explained that the reason we're here now is that three PEI Plans are forcing the following question: Are you going to abandon the statewide effort and give the money to the counties or are you going to make a different policy with regard to the limited statewide monies we've collected? The range of options is broad and complex. In sampling a wide constituency of stakeholders, there is a broad-based feeling that there's something still very good about what's been done with the statewide projects.

**Ms. Welch** made the points that CMHDA has been working on this issue for about two years, and over a year ago they understood that the challenges of reassignment were really just issues of technicalities. Individual counties have the prerogative to take their own positions, and may not agree with CMHDA's advocacy position. CMHDA does believe in all five projects, and that the challenges around reassignment are real, and they don't want to disregard the work that's been done to date. She recommended meeting regularly with interested people, outside of the Service Committee, to start exploring solutions right away.

### **Public Comment**

- **Ms. Diana Clayton**, President of NAMI for Shasta County, commented that the Executive Summary of the Suicide Prevention Plan states that it is a blueprint. Counties and stakeholders had agreed that this was what they needed. Shasta County, after two years of hard work, does not want the state to come in and change the blueprint.
- **Mr. Bert Epstein**, Four-Year Public University Counseling Center Directors, endorsed the motion as it was set forth. They are happy to be involved in the process in any way. The SMHI is in wonderful shape now and ready to go. Many of the Counseling Center Directors would be happy to meet with their county counterparts to move the process forward.
- **Ms. Stacie Hiramoto**, REMHDCO, spoke in favor of the proposed motion. The Reducing Disparities Grant is one of the most important issues to the organization, and to lose the Stigma and Discrimination Reduction Project would be very devastating.
- **Mr. Mark Montgomery**, Director of Mental Health Programs for Shasta County, stated that his county completely supports the blueprint of the statewide Suicide Prevention Plan. The challenge is how you implement it at the local level. For Shasta County, mandated vs. voluntary reassignment of dollars is the issue. Currently the State owes Shasta County a \$2.1 million cost settlement from FY 05-06, so local trust in the State is damaged.

- **Ms. Michele Violett**, Nevada County, urged MHSOAC not to support the motion. The Commission would be going against local county process. Delaying the vote for three months could result in Nevada County possibly having to let staff go. Her suggestion was to do what the counties have had to do for the last six years -- to narrow the scope and goal of what they are trying to do with the money they have.

**Commissioner Van Horn** remarked that the largest probable problem of this whole thing is Los Angeles County, with a \$46 million dollar chunk of the total. The Director there stated to Commissioner Van Horn that his board is not willing to let loose of the \$46 million, particularly with the State's budget issues. Any deferred timeframe won't matter. It's a real problem because this is 30% of the total funding.

**Ms. Welch** clarified that CMHDA's intent and commitment is to achieve the goals of the statewide initiative. They did not say that they believe counties will be able to get timely assignment back to the State for the State administration of statewide projects. In the past they have explored multiple ways of doing that -- and Los Angeles County is very interested in exploring those options as well -- but the hard-pressed reality of what Mr. Montgomery described for Shasta County, to make that assignment in the next three months, that may be difficult.

**Vice Chair Poaster** commented that hopefully the Service Committee is going to look at the wide range of options available to keep these statewide projects. Many people have been involved over months and years in developing these.

**Chair Poat** stated that he understands the frustration of Mr. Montgomery and others. At the beginning of his term as Chair, he directed the Commission either get all these programs into operation or abandon them. He is willing to give it three more months, but if MHSOAC can't make a go of it then, we should "ratify reality."

**Motion:** *Upon motion by Commissioner Greene, seconded by Commissioner Gayle, the Commission motioned to defer the decision to approve PEI state project funds for local PEI funds until September 1. The motion passed with three abstentions (Vega, Prettyman and Henning).*

## 9. PEI Plan Approval

**Ms. Collentine** presented eight county PEI Plans for approval. She observed that all eight plans are wonderful examples of what's going on in the counties and enthusiastically recommended all eight.

County PEI Plan highlights included:

**Inyo:** four projects are planned. One project, in contract with UC Davis, is Parent-Child Interview Therapy, and will be done in a mobile way. Parents will work directly with therapists in how they intervene with their children. The county is also doing pre-school programs. Recommend approval of \$150,000.

**Nevada:** includes three different projects. Suicide Prevention Integrated Training is for first responders. Another project is outreach to Latina communities; the third is using school-based services. Recommend approval of \$1,627,500. Statewide project funding represents \$173,000 of this amount; loss of this funding reduces the Plan by 10.6%.

**San Benito:** plans for four projects. Their highest concern was programs related to youth. They also have a Suicide Prevention Program, and a program with early interventions for parents. A new program is one that expands services at a local women's shelter that largely serves Hispanic women. Recommend approval of \$467,900.

**San Joaquin:** will use cultural brokers (ministers, medicine men and women, shamans, and elders) who can effectively influence cultural norms and perceptions around mental health, regarding stigma reduction and reducing disparities in access. All of their projects address co-occurring disorders; they are very aware of this problem. Recommend approval of \$11,676,900. Statewide project funding represents \$1,339,000 of this amount; loss of this funding reduces the Plan by 11.4%.

**Santa Cruz:** conducted an outstanding community program planning process that included 60 meetings. They went out to the community and asked for the best times of day for meetings and focus groups. Minutes from the meetings and focus groups were made immediately available on their website. They will include a veterans project. Recommend approval of \$3,800,242.

**Shasta:** they also had an extensive community planning process. They plan five projects; two will coordinate with statewide projects on stigma prevention and suicide prevention. Other projects will include gatekeepers to work with older adults, and an Early Onset project. Recommend approval of \$3,141,700. Statewide project funding represents \$352,200 of this amount; loss of this funding reduces the Plan by 11.2%.

**Stanislaus:** had an active and involved steering committee and local groups. They will request eight projects. Recommend approval of \$7,845,800.

**Tulare:** plans for six different wonderful projects. Recommend approval of \$7,682,766.

### **Public Comment**

- **Ms. Pat Oetzel**, Shasta County, stated that it would be a real shame for her county not to get the state dollars now; they need them.
- **Ms. Carol Williamson**, President of NAMI Santa Cruz, spoke in favor of her county's request. A diverse range of clients and families participated in the development of this county's Plan.

- **Ms. Joyce Ott**, California Network of Mental Health Clients, Shasta County, commented that she had received many calls from consumers and family members and, while they felt encouraged to participate, their participation was taken away by the process. They felt that it didn't meet the intent of Proposition 63.
- **Ms. Michele Violett**, Nevada County, spoke in favor of approval of her county's Plan. She stated that it looked like MHSOAC would approve her county's request minus the 08-25 funding. She asked for clarification of the new process - what should she tell her stakeholders and staff?
- **Mr. Mark Montgomery**, Shasta County Mental Health Director, stated that this has been a stakeholder process for nearly two years. But what the MHSOAC was about to approve is different from the Plan that was put before them. Mr. Montgomery was now struggling with how to present the Commission's decision at the local level.
- He asked for direction from the Commission. **Ms. Collentine** clarified that, if a reduced amount of money is approved for the county, MHSOAC is not dictating where the dollars should go. Discretion is left to the local Mental Health Director. **Mr. Montgomery** responded that the process was supposed to involve stakeholder participation from Day One.

**Motion:** *Upon motion by Commissioner Van Horn, seconded by Vice Chair Poaster, the Commission voted unanimously to approve the Inyo County PEI Plan.*

**Motion:** *Upon motion by Commissioner Trujillo, seconded by Commissioner Van Horn, the Commission voted, with one abstention (Vega), to approve the Nevada County PEI Plan, with the exception of those dollars designated for statewide projects, which would be deferred until August 27 at the latest.*

**Motion:** *Upon motion by Commissioner Gould, seconded by Commissioner Van Horn, the Commission voted unanimously to approve the San Benito County PEI Plan.*

**Motion:** *Upon motion by Commissioner Trujillo, seconded by Commissioner Prettyman, the Commission voted to approve the San Joaquin County PEI Plan, with the exception of those dollars designated for statewide projects, which would be deferred until August 27 at the latest.*

**Motion:** *Upon motion by Commissioner Gayle, seconded by Commissioner Henning, the Commission voted unanimously to approve the Santa Cruz County PEI Plan.*

**Motion:** *Upon motion by Commissioner Gayle, seconded by Commissioner Prettyman, the Commission voted to approve the Shasta County PEI Plan, with the exception of those dollars designated for statewide projects, which would be deferred until August 27 at the latest.*

**Motion:** *Upon motion by Commissioner Trujillo, seconded by Commissioner Pating, the Commission voted unanimously to approve the Stanislaus County PEI Plan. (Vice Chair Poaster recused himself.)*

**Motion:** *Upon motion by Commissioner Pating, seconded by Commissioner Van Horn, the Commission voted unanimously to approve the Tulare County PEI Plan.*

**Ms. Collentine** announced that MHSOAC has 37 approved PEI Plans to date, totaling approximately \$136 million.

**10. Adjournment**

**Ms. Whitcomb** listed the agenda items for the upcoming June meeting.

She also announced that Commissioner Kolender is retiring in July.

**Chair Poat** adjourned the meeting at 4:14 p.m.