



Services Committee Meeting Minutes
September 9, 2014
1:00 PM – 4:00 PM
1325 J Street, Suite 1700
Sacramento, CA 95814

Committee Members:	Staff:	Other Attendees:
<u>Commission Miller-Cole</u> <u>Commissioner Gordon</u> <u>Jim Gilmer</u> <u>Pete LaFollette</u> <u>Karen Todoroff</u> <u>Lindsay Walters</u> <u>Rocco Cheng</u> <u>Autumn Valerio</u>	<u>Kevin Hoffman</u> <u>Filomena Yeroshek</u> <u>Jose Osequera</u> <u>Wendy Desormeaux</u> <u>Deborah Lee</u> <u>Jennifer Whitney</u> <u>Ma Caliolio</u> <u>Holli Reed</u>	<u>Stacie Hiramoto</u> <u>REMHDCO</u> <u>Steve Leoni, Client</u> <u>Advocate</u>

***Participation by Phone**

Hector Ramirez, Kenneth White, Raja Mitri, Mellon Vue
 Absent: Bill Brown, Co-Chair; Tina Wooten, Co-Chair; Kristina Kaufman; Maria Salinas;
 Mary Hale

Agenda Item 1: Welcome/Introductions and Adoption of September 9, 2014 Meeting Minutes

The Chair called the meeting to order at 1:04 PM and welcomed everyone in attendance, either physically or on the phone. All meeting participants introduced themselves.

Co-Chair Gordon moved to adopt the minutes and the motion was seconded by Lindsay Walters. The minutes passed by unanimous vote.

A committee member expressed appreciation for the minutes accurately reflecting committee member concerns regarding process.

Public Comment

There was no public comment on the minutes.



Agenda Item: Overview: MHSO Innovation Program Requirements

(See attached PowerPoint Presentation)

A brief synopsis of the comments, concerns and desires expressed by committee members on Innovation are as follows:

- To serve as a unifying force with the 58 counties, and ensure some consistency in how Innovation plans are implemented and reported on.
- To be in a position to have adequate data and information on the Innovation that has been piloted so we can make policy recommendations on what programs have been successful.
- To have the data and the ability to tell which individual indicators and systematic changes are making a difference in reducing racial and ethnic disparities across the State.
- To develop a way to share information between counties so they can understand what tools are available to them and continue to dismantle the silos.
- To have the California Reducing Disparities Project partners involved in the Innovation efforts with the Mental Health Services Oversight and Accountability Commission.
- Have a way to ensure that the Innovation dollars are going to the treatment of Severely Mentally Ill persons.
- To compare Innovation projects on the basis of how they qualify for Innovation funding, what are the learning objectives, what are the outcomes, what was learned and will be recommended for replication. Use a spread sheet format to capture the information.

There was a discussion of the OAC's hope of developing a resource center that will be a link to other mental health resources, be a hub of peer support, and sustain the dissemination of technical assistance and information. The California Institute for Behavioral Health Solutions (CiBHS) has Innovation website for which CiBHS is actively seeking input on Innovation related content.

The Innovation regulations, if approved, will have more specificity regarding Innovation reporting requirements and will aid in the collection of information from the counties.

General Public Comment

A member of the public suggested that the Evaluations Committee look at the Innovation programs for best practices. The OAC should continue to foster a culture of Innovation and quality improvement.



Agenda Item 3: Discussion of Future State-Wide Communication Plan Efforts (see attached Power Point Presentation)

A brief synopsis of the comments, concerns, and desires expressed by committee members on the topic of the State-Wide Communication Plan follow:

- Appreciation for the existing website was expressed.
- The OAC was encouraged to continue to work to make it accessible to persons with disabilities and inclusive of other languages.
- Initiating marketing research, creating a strategic marketing plan and forming an advisory group were suggested.
- Modeling a campaign similar to the Hands Across America as a way to market and fundraise.
- Reaching out to County Strategic Information Officers as partners to get the word out was suggested.

Public Comment

A member of the public was optimistic and excited about the work that is being done and would like the Cultural Competency Committee to be informed of these efforts as well.

A member of the public expressed concern about the use of the label, “seriously mentally ill.” He pointed out the terms recently used related to celebrity suicides as battling demons and depression. Suggested focus groups could be done to determine what terms would be more acceptable to various audiences

A committee member from Ventura County attended the state NAMI Conference which was held in Newport Beach, as part of the Ventura Client Network. Two keynote speakers were consumers and family members. The Client Network is also crafting a letter to Senator Beal to be aware of Bills 3717 and HR 4574, the Strengthening of the Mental Health Community Act of 2014. The Client Network requests that the legislator ensure that the Health Insurance Portability and Accountability Act do not provide a barrier to care.



Agenda Item 4: Committee Member Report- Out on MHSA Program Implementation

Santa Barbara has hired a consultant to work with them on redesigning the Behavioral Health (BH) system. They have been emphasizing engaging local stakeholders and community leaders to support these efforts. While it has been challenging, having an ongoing forum has allowed for positive results. Santa Barbara County has been able to move beyond conversations focusing primarily on what doesn't work and/or "How come we have not had this kind of service before?" to conversations about how the community can create better systems together. The first year there have been many staff changes in BH system and how services are delivered with a focus on getting the right services for each level of care. This year Santa Barbara is working towards integrating Alcohol and Other Drug services with mental health services. In the next phase of the system redesign, they will be looking at integrating primary care into the mental health service delivery system as well.

LA County has strict guidelines around using Evidence Based Practices (EBP). An issue currently being discussed is that this will be the last year that the county will provide training for contractor's staff on Evidence Based Practices. Regular training is needed to ensure fidelity to the initial constructs of the evidence based model. Staff turnover is a significant issue for contractors and if they need to absorb the cost of providing the training, it will be a significant expenses.

November 6, 2014 the Community Forum will be held in Ventura. A committee member encouraged the Racial and Ethnic Mental Health Disparities Coalition (REMHDCO) to attend. And asked if the marketing efforts and outreach for the forum could be expanded and marketed to Santa Barbara as well as Santa Maria, West Ventura Communities? Various ethnic communities are spread out in these areas. REMHDCO would like to recruit representatives of ethnic communities. Legislators cross over between Santa Barbara and Ventura counties.

A committee member reported that in the East County, seventeen people were laid off from a peer based recovery program. It was reported that the rationale given was that the services were being moved to clinicians. The entire program was eliminated. Concern was expressed that peer based recovery and cultural brokers are being left out in the system transformation. The question was raised as to how the Services Committee/OAC can examine programs just being cut off.

A committee member stated that counties right next to each other don't know what is going on in neighboring counties and could possibly support each other if there was better communication.



Staff suggested that the Regional partnerships were designed to address workforce issues regionally and might be an avenue to explore at the county level.

General Public Comment

A member of the public stated that Counties are all over the map, and it is a tragedy that we don't have a good data source, across the state, to track these types of issues. Some counties are improving and integrating peer providers and others have not. It is difficult to tell what the trend is statewide. It would be nice to know and have structure to gather the data.

A committee member has been working with the Office of Statewide Health Planning and Development (OSHPD) and discussed that they are doing great work and putting out Requests for Proposals on how to hire, support, and retain peer support workers. Working Well Together (WWT) has also been developing good ideas on how to help agencies recruit, retain and train peer specialist.

The NAMI walk is October 11, 2014.

A member of the public thanked a committee member for bringing attention to the problems that EBP present. In REMHCO's opinion, it was tragic when LA County required that their programs be EBP's when nothing in the regulations required they do so.

Often the EBP's do not always serve communities of color or ethnic communities. EBP's are frequently not tested with underserved populations. REDHMCO is hoping to make it clear in the regulations that EBP's are not required.

A committee member mentioned that LA will be hosting a conference on October 8, 2014 to talk about evidence based and community based practices.



Agenda Item 5: Report out on Materials from CIMH Fiscal Leadership Institute Related to Affordable Care Act

Lindsay shared information that she obtained while attending a presentation given by Dale Jarvis, CPA, entitled “Excellence in Mental Health Act and the Emerging Health Reform Landscape (Moving from Sick Care to Health).” (See attached PowerPoint.)

Lindsay wanted to know if California is going to participate in the pilot project, and how the Service Committee can support our leaders in submitting an application.

The Department of Health Care Services will be the responsible party for completing the application. It was suggested that DHCS be asked if they plan to submit an application for the pilot program at the next Behavioral Health Forum on October 2, 2014. These forums are not membership based so anyone can participate. CiBHS is providing staff support to these forums so Autumn can pose the question.

A website to gather stakeholder feedback and suggestions is available at MHSUD/STAKEHOLDERINPUT@DHCS.CA.GOV. Persons can request to have their email added to the distribution group through this address. The easiest means of locating information on the forums on their website is to go the DHCS calendar and click on the date for the meeting.

It was mentioned that the Planning Counsel has a Health Care Reform Committee and that Dr. Patting and Sandra Goodwin Naylor with CiBHS are looking into ways to leverage Mental Health Services Act funds with Behavioral Health Care Homes.

A committee member was heartened to hear the support for the peer recovery model in the presentation and expressed a desire to participate.

Service Committee members would like to stay informed on the Excellence in Mental Health Act, Pilot Project applications and implementation.



Agenda Item 6: Information Item: New Committee Membership Cycle Starts in January

The new two-year membership cycle will begin in January. The MHSOAC is currently working on refining the application process.

A committee member expressed that there is a lot to be said for seasoned people who have learned the ropes and can build upon that experience.

A community member mentioned that they had heard you can only serve on one committee. Counsel stated that the instructions have not been finalized.

A committee member stated that sometimes committees operate in silos, and encouraged staff as they develop guidelines for committees to consider some of the broader things that can be done to encourage more effective collaboration with other committees.

The Chair encouraged committee members with any specific ideas or suggestions on how that could be accomplished to please bring them forward.

Staff mentioned that we will not be holding any of the committee meetings at the same time next year which will assist people who want to attend more than one meeting.

General Public Comment:

A member of the public invited everyone to the California MHSA Multicultural Coalition (CMMC) meeting Monday September 29, 2014 at the holiday Inn.

CiBHS has been working on a project to build consensus guidelines for involuntary detention. The next meeting is this Friday. Materials for the meeting can be found on CiBHS website under the special projects tab. The next steps will be to have a Webinar to present the information collected in the regional meetings. Another Webinar will be presented in the Fall with the draft language.

Adjournment

Meeting adjourned at 4:08 PM.