

Minutes for Yolo County Mental Health Board
Monday, April 23, 2007

Members Present: Chairwoman Carolyn Reiff, Vice-Chairwoman Marilyn Moyle, Millie Braunstein, Annie Breault-Darling; Peter Brixie, Robert Canning, Martha Flammer, Guille Libresco, Robert Schelen, Rev. Hank Scherer, Laura Bibelheimer (for Helen Thomson); Joanne Welty

Members Absent: Irma Rodriguez, Mike Summers

Members Excused: Marilyn Schwartz

Others Present: Richard DeLiberty, ADMH Interim Director; Mike Tucker, ADMH Deputy Director Fiscal & Administration; Mark Bryan, ADMH Deputy Director Operations; Theresa Smith, ADMH Clinical Program Manager; Joan Beesley, ADMH MHSA Program Manager, Tawny Yambrovich, ADMH Secretary; Leslie Carroll, Nami-Yolo; June Forbes, NAMI-Yolo; Nancy Temple, NAMI-Yolo; Pat Leary, Assistant County Administrator, Yolo County

Location: Training Room, Families First, 2100 Fifth Street, Davis, CA 95618

- I. Meeting called to order by Chairwoman Carolyn Reiff at 7:10 P.M.
- II. Approval of meeting agenda: *Motion made and seconded to approve agenda; carried.*
Approval of meeting minutes for March 26, 2007: *Motion made and seconded to approve minutes of last meeting; carried.*
- III. Announcements:
 - a. Carolyn welcomed Richard DeLiberty as Interim Director.
 - b. Held a moment of silence for the victims of the Virginia Tech shootings, their families, and the family of the shooter.
- IV. Public Comment:
 - a. David Thompson, Neighborhood Partners, spoke regarding Cesar Chavez Plaza, a partnership with Davis Community Meals (DCM) to create low income housing. Construction is in progress, and units will be available for occupancy September 1. Deadline for applications is May 4th; lottery will be held May 7th for units. Emphasis is on tenants likely to be homeless otherwise. Social Services will have an office on-site. Ground floor units are totally physically handicapped-accessible (26 units). The work that county units and ADMH did to help publicize the availability of units in Eleanor Roosevelt Circle was greatly appreciated. Cesar Chavez will have an oversized community building with community room and community kitchen and an office available on site for outside agencies to deliver services. Play areas, community gardens, plenty of parking, and all units can be converted to handicap access. They are trying to reach local community to be beneficiaries. 80 people are on the waiting list already. DCM has been doing outreach; 40 applications have already been received from the homeless community. Information and applications can be found at www.community.coop/Davis. Documents are available in Spanish and English. Marilyn M asked, "If homeless are without regular income, how do

they qualify?” Dave T answered that Neighborhood Partners and DCM are partnering to try to get them in. DCM has a HUD grant to get homeless in permanent housing. The management company is the same one that is handling Eleanor Roosevelt Circle.

- b. Martha F. asked if the LMHB would be interested in a free presentation/training? (Sponsored by Eli-Lilly) presented by Perry Communications group. Consensus was yes – date and topics TBA.
- V. Report: Board of Supervisors – Helen Thomson absent; no report
- VI. Report: LMHB Chairperson – Carolyn Reiff
- a. Chair’s report: Carolyn proposes that Richard DeLiberty decides which Managers and Directors come to LMHB meeting as needed to present information that may not have been covered in committee meetings; the information that has been covered in committee meetings can be presented during the committee reports.
 - b. Need to stress to Board of Supervisors that the remaining opening on LMHB be filled by a consumer as current Board composition does not meet requirements.
 - c. Nominating Committee – Millie B: Write down who you think should be chair and vice-chair of the board; send names to committee. Carolyn R. notes that there are no guidelines for how long you have to be on board before running for office.
- VII. Report: ADMH Interim Director – Richard DeLiberty
- a. Overview and Goals – Richard is an MSW (Social Worker) and has earned parts of several degrees...worked in mental health center in Indiana for parts of 12 years; was deputy director of mental health in Indiana. Spent a very short time as deputy director of Mental Health in Nebraska. He has grandkids in Santa Rosa. Really enjoyed working with Tom.

We have a lot to do over next year. There is a \$5.2 million budget deficit that needs to turn around. We need to improve community based care; evidence based care. A lot of people are in locked facilities and outside the county that we could bring back to the community if we could build good strong programs to support them here in the community.

Issues: need better tools for financial management. HR, IT, and the CAOs office are assisting with getting better data and financial systems to make everything less burdensome, not more.

Bringing people back to the county should decrease costs.

Revenue: need to generate more than we have in the past; improving data and fiscal systems will assist in this goal.

Have to change attitudes about how things get done, while protecting our most vulnerable citizens.

Discussion:

Marilyn M. asked: In light of events at Virginia Tech, how do we report people who are a danger to themselves or others so that they can't purchase firearms in CA? (Feel like it happened to me; feeling for the family of the young man who didn't get the mental health treatment he needed.)

June Forbes – Letter in the Davis Enterprise from a social worker: focus on the individual who needs help: make continuing efforts to engage, ACT, outreach, cultural competence, MHSA teams that will make continuous efforts to engage.

Annie B-D: Virginia removed phrase “imminent danger” from laws?

June F.: Is there a liaison between UCD and Woodland College and ADMH? This is a violent nation; one ill kid did a horrible thing; those who aren't mentally ill do horrible things every day.

Christina H-C: Discharge planner coordinates with the local schools.

Carolyn R.: Need more education and awareness of symptoms; people don't know what to look for.

Annie B-D: Mentally ill are released time-and-time again; and no one is held accountable.

Carolyn R: Educators are mandated reporters. Kids say all the time “I'm going to kill you,” without thinking that statements like that can have real consequences.

Robert C.: Need to work on having services available and accessible.

Annie B-D: I believe that nothing will happen until “something the size of Mt. Vesuvius” comes along.

Robert C.: Need to bring people with expertise in to educate; elevate awareness.

Rev S. – If a person is an alcoholic or has drug problems, and drives impaired, they lose their license (which doesn't necessarily keep them from getting behind the wheel of a car). There is no reporting of someone who is a danger to self or others to keep them from buying weapons in CA? Suicide by cop? Should this person have had legal access to weaponry?

Richard D.: If they've been under 5150 hold, they cannot purchase guns x 5 years.

Bob S.: There is a waiting period for criminal/mental health background check in CA already. Community based care and people who have to be institutionalized; where is the line drawn between people with “unusual thought processes,” vs. people who are a danger.

Joanne W.: What is in place, and what can we be instrumental in putting in place?

- b. Naming Conference Rooms in the Bauer Building – Richard states that there are four smaller conference rooms in the Bauer Building that are going to be named; two by the Health Dept, and two by ADMH.

Marilyn M: says that it was voted to have Hanna Bauer's name on plaque for the Bauer building, along w/Dr. Bauer; Ray Groom indicated it would be included on plaque and it's not there.

Suggestions are: Hanna Bauer, Pat and Bill Williams (founders of Pinetree Gardens), Mercedes Livingston (a consumer that did considerable fundraising for YCCC, sat on LMHB), and current LMHB member Guille Libresco

Robert C: *Made a motion that conference rooms be named after Hanna Bauer and Mercedes Livingston; motion was seconded, carried.*

Richard D – Needs paragraph about Hanna Bauer (Bob Schelen) and Mercedes Livingston (Guille Libresco)

VIII. Budget Report: Mike Tucker

Handouts: Summary document of accounts; anticipated expenditures. Highlighted accounts are line item expenditures. Some of the assumptions in the budget are still under review, and the budget is assuming that the CAO's office will only provide the minimum required by law.

Richard D: Report on 3rd quarter financials; net deficit.

1 – \$5.2 million deficit.

2 – savings and general funds = \$4.2 million

3 – \$5.2 million (money coming out of reserves, money from BOS), remaining deficit = \$3.7 million)

4 – 24-hour care (state hospitals, IMDs, etc) = \$2.5 million over budget

5 – Cost report (\$1.9 million) due to how state is looking at 2001 MCL expenses

6 – MCR (have not been billing; Sinaiko should help us generate MCR revenues)

Nancy T – What is the likelihood of getting some of the cost report monies back?

RD – coin toss.

Hank S.: Are you allowed to and do you write a percentage of your budget as capital reserves?

Richard D: Put in a reserve for Cost Report, but it wasn't enough; normally reflect the monies under "salary savings."

Mike T.: Savings from year-to-year go into Managed Care Reserve; that money has been spent to balance the budget.

Hank S: Are we allowed to put savings aside? MT – Yes. When there were reserves, we put it aside. However, population is growing at 6-8%, but realignment dollars (main source of revenue) is only growing at 2%, so there are no savings to set aside.

What we need to do different next year: Decrease utilization of acute hospitals, IMDs, and long term residential care.

Most of budget increase is MHSA.

Hank S.: Are we taking steps to correct cost reporting problems?

Richard D.: Yes, we have taken those steps, but they won't show results (probably) for 2-3 years.

June F.: John Buck told me that if he took somebody out of the state hospital, he could hire someone to be with that person 24/7 for less money than it takes to hospitalize them.

Expanding FSPs; forensics is working with MIOCR team; in process of signing contract with ACT team.

June F. What can you tell us about TeleCare?

Richard D.: Became familiar with TeleCare in Nebraska; networked, impressed with their evidence-based care, experience in the field. Results in hospitalization and IMD rates are impressive. They will bring in an implementation team to get started. Team's office will be located in Davis or West Sacramento. They want a drop-in center to be part of TX; discussions are under way.

Bob S.: Large part of budget goes to hospital-based care; presumably community based care is less expensive AND better for the client. How do we not constrain providers from making appropriate referrals to 24-hour residential because of cost considerations?

Richard D.: County has kept that expense. Yolo County hospitalizes a much higher percentage of patients than most other communities. Will find housing for these clients via ACT teams.

Joanne W – When do you anticipate having these people out of facilities?

RD – People are coming home every day. If we hospitalized at the rate we do and no one was going home, the hospitals would be full. We'll know in August or September whether this is working.

Martha F.: There is significant competition with MHSA to hire clinicians. Looking for people with experience for the ACT team so that constituents are protected and don't fall through the cracks.

Richard D.: TeleCare will come with an established team of professionals, and will hire as needed. We get money back every year from Small Counties Risk Pool. Across CA 10% of crisis get hospitalized; in Yolo County is approx. 44%. Need a change of culture to care for individuals in a more community based manner.

Bob S.: A number of times when community based care was tried, it did not work because the resources were not provided. There is evidence that these kinds of programs CAN work when the resources are there.

IX. MHSA – Joan Beesley:

- a. Thanks to those of you who came out for our Open House at TAY and Adults; 3 hours with a good turnout. Very appreciative to those of you who came. Another stakeholder meeting in May (probably May 17th); will send e-mail, to look at amended plan, progress report to the state for first 8 months of services. All 4 programs are running; we are not fully staffed but we are close. Replacing AB2034 Supervising clinician; new clinician coming on board April 30. Allotment for training will be \$470,000 over 3 years; \$42,000 for planning. Requirements from the state will be posted soon. Prevention and early intervention amounts and requirements will be coming soon as well. "Thank you all for your support."

- X. Legislative Review – Martha Flammer
- a. Mental Health Parity bills: Highlighted areas of concern: effect on state laws (SB 558 will preempt state parity laws, HR 1424 will not). MF cautions us not to oppose either one, as something has to be on the floor for there to be action. We should advocate for those items that promote mental health parity. HR 1424 is not currently moving through committee.
June F: How hard is it to find out if Pete Stark’s bill is getting any support? (Eliminating lifetime cap on MCR inpatient days for illness)

Joan B: What’s the latest on 2034? Budgeted or no?
Martha F.: Prepare for the loss of the funding. Schwarzenegger could veto. Sac Bee may do article with Turning Point director.
Bob S.: Helen Thomson proposed parity for all mental health coverage, but in order to get passed it was limited to schizophrenia and bipolar coverage. New bill is proposed to extend parity in CA for remaining mental illnesses. AB 423, Assemblyman Beale.
- XI. Program Reports: Program reports: see handout.
- a. Forensic Committee – Mark B.: What’s going on in CA Department of Corrections and Rehabilitation and how that may impact the community; also drafting letter to court re: mental health consumers and how the current court calendar is currently confusing, leading to missed court appearances and missed opportunities for consumers.
 - b. Budget Committee – Marilyn M: learned what was presented in tonight’s budget update.
- XII. Adjournment – Meeting was adjourned at 9:05 p.m.; next meeting will be held:

Monday, May 21, 2007
7:00 P.M.
Walker Room, Bauer Building
137 North Cottonwood Street
Woodland, CA 95695

Respectfully submitted by:

Tawny Yambrovich, Secretary