

Minutes for Yolo County Mental Health Board
Monday, August 27, 2007

Members Present: Chairwoman Marilyn Moyle; Vice-Chairman Robert Schelen; Millie Braunstein; Robert Canning; Martha Flammer; Carolyn Reiff, Irma Rodriguez; Rev. Hank Scherer; Marilyn Schwartz

Members Absent: Anne Breault-Darling, Peter Brixie; Guille Libresco; Mike Summers;

Members Excused: Helen Thomson, Yolo County Supervisor; Joanne Welty

Others Present: Richard DeLiberty, ADMH Interim Director; Christina Hill-Coillot, ADMH Deputy Director Clinical; Joan Beesley, ADMH Program Manager; Jesse Salinas, Analyst, CAO; Tawny Yambrovich, ADMH Secretary; Nancy Edgar, ADMH; Don Cowan, ADMH; Tatyana Solimena, ADMH; Maria Elena Vega, ADMH; Donna Bousquet, ADMH; Laura Bibelheimer, BOS; Don Meyer, Probation; Fred Heacock, Executive Director, YCCC; June Forbes, NAMI-Yolo; Leslie Carroll, NAMI-Yolo; Walter Shwe, client; Shanna Baggaly, NAMI-Yolo; Erika Cristo, CA DMH; Diane Sommers, Suicide Prevention

Location: Walker Room, Bauer Building, 137 North Cottonwood Street, Woodland, CA 95695.

I. Meeting called to order by Chairwoman Marilyn Moyle at 7:05 P.M.

II. Approval of Agenda; Minutes.

Approval of Meeting Agenda: *Motion was made by Hank Scherer and seconded by Millie Braunstein to approve agenda; carried.*

Approval of Meeting Minutes: *Motion was made and seconded to approve minutes of June 12, 2007 meeting as amended; carried*

III. Announcements:

- a. Marilyn Moyle for NAMI Yolo: NAMI-Yolo is canceling their September 5th Potluck so that members and friends can attend the Community Lecture at the UC Davis MIND institute – **Cognitive Behavioral Therapy for Schizophrenia: Practical Methods for Improving Treatment Outcome**. This is something that NAMI-Yolo is very interested in having become part of our treatment program. The speaker is Jesse Wright, M.D., Professor and Associate Chairman of the Department of Psychiatry and Behavioral Sciences at the University of Louisville School of Medicine.

IV. Public Comment

Note: Interpreters available to repeat information in Russian or Spanish

Joan Beesley: currently up for Public review are two documents – the Community Services and Supports Implementation Progress Report, which covers May – December 2006; and the

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Community Services and Supports Performance Contract Amendment Request Fiscal Year 2007–2008. Implementation Progress Report is subject to hearing with the Local Mental Health Board; the Performance Contract Amendment was not, but it is more efficient to discuss both at once.

- a. MHSA has surplus funds, and Yolo County has an opportunity to apply to DMH for additional funding to expand Wellness Centers and ACT teams; we were allotted \$763,000 of CSS funding for next fiscal year, and we are required to submit an amended contract to tell DMH how we plan to spend the money.
- b. Proposed expansion of Adult Wellness Program, including Wellness center; also will include ACT team services to be provided by TeleCare corporation and TeleCare will serve 50 Full Service Partnership patients, in addition to the existing team. Propose to use \$200,427 of unexpended CSS funds to pay start up costs of TeleCare ACT program, which will leave that amount of Program funds still available, since the start up costs were a one-time expenditure.
- c. Request that remaining unexpended Community Services and Supports funds be earmarked to open a consumer run Drop-In center in the community.

Question – June Forbes: If consumers proposed a center where they wanted to hire some staff that WEREN'T consumers to assist them, would anything in the proposals preclude that?

Answer: Richard DeL: No, the sponsoring agency could assist with support, as long as the Drop-In center itself were staffed by consumers.

Irma R. – Concerned that with a budget of \$3 million, only \$289,000 is specifically dedicated to children. I know that there is the TAY project, but I am really concerned about the lopsidedness of all the resources going to 18-and-above, especially knowing that many of our children grow up to be adult consumers, and we need to invest in them early on.

Joan B: We teamed with Social Services to apply for SB 163 status to divert kids from residential care. It's also too early to say, but proposed guidelines are that 51% of MHSA Prevention and Early Intervention funds be spent on people 25 and younger.

Martha F – Because of restrictions on funding, counties are erring on the side of not giving service if there is any question.

Comment: June Forbes – I don't have the words to express the tragedy that I see unfolding. The many were to benefit from Community Services and Supports money, and the few were to be served by Full Service Partnership money. The Community Services and Supports that we had disappeared. We won't be offering the Full Service Partnerships to folks who are beginning to get lost; we'll be using them to take folks we already rescued. I think this is a terrible loss and a terrible tragedy.

Joan – A lot of the Full Service Partnerships will be used for clients who have been in IMDs longer than they should have, because there weren't appropriate wraparound services for them in the community.

Public Hearing closed by Chairwoman Marilyn Moyle

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Carolyn Reiff moves that the changes to the two MHSA public documents be approved; Robert Schelen seconds. Motion carried.

- V. MHSA – Joan Beesley:
- a. Esparto/Greater Capay Valley Program is up and running, as is Transition-Age Youth and Adult Wellness. TAY and Capay are being run by Vicki Cruz, who is doing a great job.
 - b. Adult Wellness Alternatives is expanding; serves those 18 and up. Serves some youth who don't fit in with the TAY program, and some older adults who don't fit in to the Older Adults program.
 - c. TAY and Adult Wellness have been open since April, and are providing services M-F 10 A.M. – 5 P.M.; the next stage will be 24-hour crisis service for Full-Service Partnership clients.
 - d. Older Adults is enjoying tremendous success with wonderful supervision by Nancy Edgar; performing outreach to the Spanish- and Russian-speaking communities (thanks to Tatyana Solimena and Maria Elena Vega). We have increased the number of our senior peer counselors from 8 to 20. The intent is to reach these consumers and assist them to live independently as long as they can.
 - e. We are going in the right direction; serving more and more people all the time, which is the way we want it to be.
 - f. Marilyn M: these services are not restricted only to those who are Medi-Cal eligible; participation is open and voluntary.
 - g. Adult Wellness is serving both new clients and clients who have received other ADMH services in the past. Every county in the state is behind in getting their numbers to where they want them, but they are increasing, and that is a positive thing.
 - h. MHSA law does not permit services to those who are on parole; other than that, if the person does not have a *violent* criminal history they are welcome. It is difficult, due to the need to insure the safety of all clients.

Question: Irma R. – Are the enrichment services Peer Driven or Peer Provided?

Answer: Joan B. – There is a combination; we have a number of consumer employees at the center; one of them teaches the relaxation/yoga class, and an art/drawing class is led by a consumer employee. The Dual Diagnosis Support classes are done by Mental Health Specialists or Clinicians.

Irma – I'm recalling the discussions about insurances and hospitalizations; if there's some way we can get on their panels and those with resources could potentially pay/reimburse the department – privately insured clients shouldn't be encroaching on other resources. Insurance companies also get out of paying for covered services.

Martha F. – There is a statewide group that is working on ways to improve Managed Care via parity.

Bob S. – Before we address enforcement of payment, we have to get insurance companies to *cover* mental health services.

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Marilyn M. – It is a fact that private-pay clients are under-served. Drop-In centers are not just places to hang out, they are critical to wellness and recovery. We need to get legislation passed.

Hank S. – If veterans could access their benefits, they could be served in their local communities instead of having to travel to bases.

- VI. Fred Heacock, Executive Director of YCCC – Board is firmly committed to re-thinking their vision and diversifying services. They have identified specific populations that they would like to serve, Transition Aged Youth, mentally ill who are involved with the criminal justice system, Older Adults, and dual-diagnosis consumers. We are responding to requests for proposals that involve these populations.
- a. One of the issues they are dealing with is utilization at Safe Harbor – YCCC is applying for a long-term care license for Safe Harbor; if they can increase crisis utilization, they won't have to convert to long-term care.
 - b. Michelle Kellogg just returned from Europe.
 - c. YCCC has opened up a facility in Auburn (Placer County) called Harmony House to help consumers step down from IMDs; working closely with Placer County to provide Crisis Residential.
- VII. Board of Supervisors: no report this month.
- VIII. LMHB Chairperson's Report – Marilyn Moyle:
- a. Received a nice letter from CAO Sharon Jensen in response to all the letters to the Davis Enterprise regarding the closing of the Regional Resource Centers: Sharon reasserts her support to our programs, and her concerns that the programs be implemented in as effective a way as possible. Marilyn feels that the MHSA programs are implementing the LMHB's vision.
 - b. Attended Health Council meeting – Richard was giving a report on the state of Mental Health Services; Marilyn will represent the LMHB at the Health Council Meeting when she can.
 - c. Visited ACT Team's presentation on August 10; met program administrator Barbara Brown.
- IX. Naming of Conference Rooms in Bauer Building – Marilyn enjoyed researching Mercedes Livingstone – finding out who she was, why she is remembered so well: she was one of the few mental health clients who was willing to come out of the closet and identify herself as a mental health client at the time that she did.

Leslie Carroll suggested naming one of the rooms the “Sunflower Room” to honor all the Mental Health consumers instead of just one.

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The documentation of Pat and Bill Williams' nomination is impressive, and they are definitely deserving of the honor.

Millie B: Makes a motion that the Local Mental Health Board recommend one conference room be named the Mercedes Livingstone room in honor of Mercedes' pioneering work as a consumer who identified herself publicly as such, and the second to be named the Pat and Bill Williams Room. The supporting documents should clearly state that one of the reasons that Mercedes is being nominated is because of her pioneering work and her founding of Consumers Speak in Yolo County. Seconded by Martha F; carried.

X. ADMH Interim Director's Report – Richard DeLiberty:

- a. Services are improving, and strong, but brittle. At least two counties are trying to return Mental Health services to the state. Our first efforts have to be to reach those who are most disabled.
- b. Community Based Services – Forensic, Specialty, and ACT teams: community services are increasing, ACT team census is increasing. There are two ACT teams: a methamphetamine ACT team contracted through CommuniCare, and the TeleCare ACT team (Yolo Strides) which we have discussed. Team-based case management programs will be alternatives to hospitalization and incarceration as we go forward.

24-hour care: we would like to see trending down; haven't seen a change.

Residential facilities: trending upwards. Farm House, Pine Tree Gardens and Safe Harbor are the facilities we would like to continue utilizing, to bring people home to the county. Pine Tree Gardens is trending upwards again.

Mental Health Specialty Teams - MHSA

We've used 30% of our budgeted IMD days two months into the Fiscal Year.

- c. AB2034 – 36 people that were being served through AB2034 will be displaced. They may be absorbed into an MHSA program. CMHDA is meeting with DMH to see what can be done – possibly redirecting some unspent state administrative funds as a “loan.”
- d. Client and Service Information (CSI) Data – Haven't sent in any data since October 2003 due to incompatibility; last two months our data has been accepted with a 99.9% accuracy rate. The information and encounter data is sent to the Feds for demographic and usage tracking.
- e. Dr. Leigh Harrington will start at the end of September in our Adult program; Dr. Kevin Rosi will be joining the staff as a Child Psychiatrist.
- f. We received a 3-year designation as a Mental Health Physician Shortage Area.

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- XI. Legislative Update – Martha Flammer: Perry Communications will provide a free training: Mental Health 101 sponsored by Eli Lilly – need LMHB Participation. Need a date in September that 6 people or more can attend for 1-2 hours; can invite neighboring county to join. 7-9 P.M. on a Thursday after Sept 23. **Recommend Thursday, Sept. 27, evening training.**
- a. Healthcare reform: impact of mental health programs is pretty significant; CMHDA have been active trying to keep costs from being transferred to communities. Legislature will probably start with uninsured children, and then childless adults.
 - b. SB568: Wiggins bill: is continuing along, with amendments specifying when it is appropriate to use medication.
 - c. Darrell Steinberg SB 851, creating Mental Health Courts, is in the Assembly suspense file.
 - d. AB 900 for prison downsizing, as well as regional groups discussing rehabilitation.
- XII. Committee Reports:
- a. Program Committee report received via e-mail: any questions? No.
 - b. Forensics: looking at establishing Mental Health Court; Adult Forensics Strategic Planning Committee headed by Angela Pflager is pursuing. The Forensics Program reviewed a presentation from Jacques Bourseau and Barry Perrou regarding the PARS (Psychiatric Assistance Response Services); we plan to have them present at the Adult Forensics Planning Committee to screen utilization in the Yolo/Sacramento Region. PARS is an ambulance company that uses technology to determine where there is a free bed in the community. Ambulance First Response to bring consumers to regionally available bed with hopefully reduced Law Enforcement intervention and reduced need for stay in ER. In addition, Martha reported that Commissioner Mike Summers is currently in Tennessee at a Crisis Intervention Team Training on behalf of Yolo County.
- Note: Hank S. – affirms his belief that law enforcement generally uses the least amount of physical intervention necessary.
- XIII. Adjournment – 8:51 P.M.