### MHAB Members:
- LD Louis, MHAB Chair, Deputy District Attorney (Alameda County Mental Health Unit), Vice Chair of Mental Health Advisory Board and Head of Mental Health Unit for the Alameda County District Attorney’s Office

### Attendees:
- Gail Steele, Former Board of Supervisor
- Joe Rose, NAMI National Alliance on Mental Illness-ACS
- Annie Kim, Bettye Foster FERC
- Adriana Furuzawa, Director of Early Psychosis Division, Felton Institute (Family Services Agency of San Francisco)
- IRVINGTON HIGH QUEST ATTENDEES
- Jessie Slafter (nee Conradi)
- Sheldon Koiles, Board Member Board (via phone)
- Carolina Padilla, Community Member
- Cathy Davies, MHAAC
- Andrea Dacumos, Recording Secretary
- Tanya McCullom, Program Specialist, BHCS Office of Family Empowerment
- Damon Eaves, BHCS Assistant Director Child and Young Adult

### BHCS Staff:
- LD to look into attending stakeholder meetings to gather information for larger board.

### Items

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<thead>
<tr>
<th>ITEM</th>
<th>DISCUSSION</th>
<th>DECISION / ACTION</th>
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<tbody>
<tr>
<td>I. Roll Call</td>
<td>A. LD Louis conducted roll call</td>
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<td>II. Introductions</td>
<td>B. Introductions made</td>
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<td>III. Approval of Minutes</td>
<td>A. October 25, 2019 minutes were approved</td>
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| IV. Children’s System of Care Report by Damon Eaves | A. Damon was not present to present  
B. Tanya attended the CYA Collaborative Meeting, which discussed the revision of Medi-Cal moving to managed care, replacing 2020 Medi-Cal Waiver  
a. It is called California Advancing and Innovating Medi-Cal CalAIM [https://www.dhcs.ca.gov/services/Documents/CalAIM-BHSAC.pdf](https://www.dhcs.ca.gov/services/Documents/CalAIM-BHSAC.pdf)  
b. Stakeholders, policy makers and community members are holding an intense schedule of meetings between now and February. Family members, consumers are supposed to be invited. They are located in Sacramento. Different counties are sending staff and family members to attend or call. Executive Summary and meeting information can be found on [www.dhcs.ca.gov](http://www.dhcs.ca.gov)  
c. LD pointed out that this is a huge change since California is such a large state and the last state to implement managed care.  
d. One major change is the revision to the definition of “Medical Necessity.” This will eliminate the previously required diagnosis to provide services and eligible for reimbursement.  
i. In the Children’s system, diagnosis is a challenging, as the brain is so fluid in teenage years  
e. Direct services are supposed to be easier to track and simplify billing time  
f. Services will be equal across all counties  
g. Condensed version can be found on: [https://cachildrenstrust.org/](https://cachildrenstrust.org/) | LD to look into attending stakeholder meetings to gather information for larger board. |
V. Presentation / Special Guest: Annie Kim, FERC Director

A. Annie Kim, Director and Bettye Foster, Program Supervisor were invited to present services and programs the Family Education and Resource Center (FERC) provides, so this group can expand its Parent Navigation knowledge.

   a. FERC started 10 years ago and found that community collaboration is key. These partnerships have made navigation services successful.

      1. Schools (IEPs)
      2. Law enforcement (probation officer)
      3. City Counsel
      4. County

   b. Important to know that FERC Family Advocates all have lived experience as a primary care giver (spouse, parent, sibling) to someone with mental health challenges. This establishes the relationship. Clients are connected to similar backgrounds of family advocates.

   c. All services, workshops, trainings and resources are free. Not funded by Alameda County Behavioral Health

   d. Family Partners are matched after clients receive services. For example, if a family needs to be picked up to go to IEP. Need to already be receiving services.

   e. Prior to a warm hand off, FERC researches if resources are appropriate and available.

   f. Annie invited this group to navigate the new website. Entire site can be translated into the 5 threshold languages (Chinese, Vietnamese, Spanish, Farsi, English) https://ferc.org/

   b. Bettye has been working with San Lorenzo and Hayward School Districts on helping parents understand diagnosis and early intervention. Spanish support meets in San Leandro. FERC will always meet where clients are.

   c. Although initially adult focused, FERC has been thriving with TAY and working with NAMI with Ending the Silence for 4 years.

   d. Last year, OUSD partnered with HCSA, Behavioral Health and FERC was the preceptor. One Skyline High student was so impacted by the presentation that she decided to start the first mental health, after hearing suicide threats from fellow students when they didn’t perform well in school. She was also able to hold the first mental health assembly and able to talk at 2 class periods to talk about mental health and offer peer support. She passed on the torch after graduation and is now includes every grade.

   e. Gail would like to see a program like FERC be expanded, rather than use funds to start up something new. If FERC could add more staff, the number of clients served would increase exponentially

   f. Joe questioned how to help students who don’t receive help from parents. Annie would like to get more into schools with Mental Health First Aid presentations.

   g. Adriana asked how many parents are being served of early childhood, TAY and 25 and over. This data could show the community how FERC impacts these different ages.

B. Alanna Powell of Boldly Me has been helping students since. 2012.

   a. Counseled 195 suicidal students Irvington High School
   b. Intercepted school shooting.
c. Served 24,404 kids  
d. Starting to help the homelessness.  
e. Santa Clara is going large scale, integrating into 23 schools.  
f. Online engine can help and need is great across country.  
g. Many parents expect perfection. Boldly Me is able to give them tools to deal with the stress.  
h. LD sees two pillars: re-educating parents and parents that refuse to see the problems.  
i. High school students are asking for help. Trying to go the traditional route is extremely slow.  

C. Children’s Advisory Committee needed to add FERC’s work to annual report to Mental Health Advisory Board  
a. Tanya pointed out the original proposal was for young children who weren’t receiving services. As FERC is very present at schools, it would be advantageous to expand to older children.  
b. Annie pointed out the importance of social media to connect to students  
c. Gail feels Hayward would be a receptive area to focus on  
d. Joe brought up parent navigation should also include peers  
e. LD stated we all need to make others aware of FERC services. 12 employees are an extremely low amount to serve such a large county

| VI. Chair’s Report by LD Louis | A. Mental Health Summit in collaboration with Supervisors Valle and Haggerty on May 1 & 2nd  
| | a. Dr. Ensel will be keynote speaker  
| | b. First day – Focus is on agencies working in mental health field  
| | c. Second day – Community oriented with tabling, hopefully FERC will have a table |

| V. Future Agenda Items | A. UPDATED Presentation on Children’s Services  
| | B. Children who are their own primary advocate (e.g. foster youth or youths without appropriate parental care)?  
| | C. Care facilities for youth (Fremont Hospital), Out of County Facilities  
| | D. Foster Care Issue  
| | E. Anxiety, Stress and Suicide in the TAY Population  
| | F. Ask for expansion of services similar to Union City Family Center |

| Public Comment on Items not on Agenda | A. Irvington High School Seniors comments:  
| | a. Student commented that she is aware that a few teachers who would be interested in hearing from FERC.  
| | b. Both parents, guardians and youth are welcome to call FERC.  
| | c. LD thanked students and invited them to future meetings. |

| VI. Adjourn | Meeting Adjourned 11:35a |

| Next Meeting | Friday, January 24, 2020 at 10a at 500 Davis Street, San Leandro |

Minutes submitted by Andrea Dacumos