

MHAB Children’s Advisory Committee (CAC) APPROVED Minutes – Via Video Conferencing
 July 24, 2020 ♦ 10:07 a.m.- 11:30 a.m. ♦ 500 Davis St., San Leandro, CA Suite 120, Room B

Meeting called to order @ 10:10 a.m. by LD Louis Deputy District Attorney (Alameda County Mental Health Unit)

Attendees:	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 District 4			
			Lee Davis			
		Gail Steele, Former Board of Supervisor	✓	Joe Rose, President CEO of NAMI Alameda County South NAMI National Alliance on Mental Illness-ACS	✓	Sarah Oddie, Policy Advisor Supervisor Wilma Chan’s Office
	✓	Adriana Furuzawa, Director of Early Psychosis Division, Felton Institute (Family Services Agency of San Francisco)	✓	Neill Penn, Member of Mental Health Advisory Board	✓	Boldly Me Kristin Spitz, Executive Director
	✓	Jessie Slafter– East Bay Children’s Law Attorneys and Member of Mental Health Advisory Board	✓	Josh Nomkin, Law Student Intern, East Bay Children’s Law Offices	✓	NAMI Alameda South Board of Directors Teri Talauta
	BHCS Staff:	✓	Andrea Dacumos, BHCS Recording Secretary	✓	Tanya McCullom, Program Specialist, BHCS Office of Family Empowerment	✓
✓		Jeanelle Wan, BHCS	✓	Kristin Boer, BHCS Office of the Director		

ITEM	DISCUSSION	DECISION / ACTION
I. Roll Call	A. LD Louis conducted roll call	
II. Approval of Minutes	A. June and May minutes tabled. May minutes amended with the following corrections: a. Teri Talauta’s name spelling b. Section V. Focus Group B.1.d. Dr. Richard Labelle’s name to be added	
Gail Steel Memorial and a moment of silence	There will be a memorial honoring and remembering our community champion, Honorable Gail Steele via Zoom on August 1st at 10am. All are welcome. Please share in your networks.	
III. Children’s System of Care Report by Damon Eaves	A. Damon Eaves updated the group on the Children’s System of Care a. Executive Team hired an Administrative Assistant, Vanessa Bradley b. There is a hold on re-organization of: i. TAY Office moving to 500 Davis Street ii. Early Childhood merging with Children’s Specialized Services iii. Level 3 Med Clinic moving to Fairmont iv. New positions c. County is now in 2 nd phase of budget after a \$7.2 million cut in Phase I d. We are now in Budget year 2021, commencing July 1 st e. Outpatient Coordinator position will move forward	

	<ul style="list-style-type: none"> f. Margie Padilla has retired from Early Childhood, Mental Health Coordinator (to be hired) will take her place g. Contract renewals – Providers should have received their renewal contracts. There will be zero growth due to budget considerations h. Working with School Based Providers on how to best use distance learning and hybrid in person services . i. OUSD, Hayward, San Lorenzo, Berkeley, San Leandro will all start with distance learning j. 90% of School Districts have sent in their fire clearance letters for certification k. Project Room Key is where Board of Supervisors have purchased hotel rooms for the homeless, vulnerable to COVID, as well as those needing to quarantine. This effort was supported by Substance Use Services, Children’s Services, Adult Services and Case Management for ongoing housing and linkages <ul style="list-style-type: none"> i. Comfort Inn is 31% full ii. Raddison Inn has 269 occupants 94% full, Safer Ground site iii. Quality Inn has 43 occupants and 44% full iv. Marina Village – Safer Ground from domestic violence shelter is 98% full v. Springhill Suites – Safer Ground site has 118 occupants at 99% full 	<p>LD would like presentation on school districts are dealing with distance learning and plan in September</p> <p>Tanya would like to have Family Partners speak to the accessibility of services during COVID</p>
<p>IV. Chair’s Report</p>	<p>A. Recap of MHAB Meeting, ACBH Budget Report</p> <ul style="list-style-type: none"> a. Dr. Wagner and Dr. Imo Momo talked about the budget. Children’s services are unable to expand and positions are being cut. Traditionally underfunded, this is setting up children to end up in adult system of care b. There was a presentation on expansion of Amber House. We need more programs like crisis residential homes, which take the pressure off jail as opposed to a 5150 c. Project Room Key will present on places for SMI, homelessness during COVID and keeping them housed (basic needs) for August meeting <p>b. Upcoming MHAB Agenda</p> <ul style="list-style-type: none"> a. Next month Nathan Hobbs from SUD and perhaps a provider for youth TAY in August 	 <p>2020 Priorities Children's list.pdf</p>
<p>V. PRESENTATION: Dependent Child / Youth and Access to MH System of Care– Jessie Slafter</p>	<ul style="list-style-type: none"> A. Jessie Slater, Attorney for the East Bay Children’s Law Office representing foster youth and also a trained social worker gave a presentation on dependent children and youth accessing mental health services. Josh Nomkin law school intern, co-presented. These would include those youth on child welfare, probation, homeless, emancipated, TAY or sexually exploited. B. Questions from the Group (via chat) <ul style="list-style-type: none"> a. Tanya: When a child is first removed from the home do the biological parents still maintain medical and educational rights for a period of time in support of reunification? <ul style="list-style-type: none"> I. Jessie: Yes, biological parents maintain medical & educational rights. If parent is unavailable, or making unsound decisions, child welfare worker will make decisions. Mental health records are not available to parents, to protect confidential discussions. This often leads to disenfranchisement of the parent in participating. 	 <p>CAC 2020.07.24 - Dependent Childr</p>

	<ul style="list-style-type: none"> b. Joe Rose Are all these children dealing with mental illness? In particular those in Juvenile Hall. c. Neil Penn: Youth who have probation issues, very frequently have ADD. Even if the school is offering an IEP this only addresses educational issues, Generally, it doesn't focus upon social impulsivity nor "think before acting." These two factors put youth at greater risk of legal problems. d. Tanya: Is there is a correlation between students with MH challenges receiving proper supports in school and community and whether they end up in the juvenile justice system? <ul style="list-style-type: none"> i. Jessie: Totally e. Tanya: . This is why MHSA funds are so important f. Joe Rose : MHSA funds are for SIM patients. Tanya: It's unfortunate that some families have to give up their parental rights before their children get the services they need h. LD: Aren't MHSA funds also available for education, innovation and early intervention? The percentages allowed to be spent are less but I think MHSA could better assist this population. i. Tanya: What about MHSA PEI funds? <ul style="list-style-type: none"> i. Jessie: Services are supposed to be provided by Medi-Cal, not MHSA j. LD: For example, MHSA funds FERC. k. Adriana: The process would have to start with defining what services (such as creating a specific program, or identifying existing services that could be expanded to include these identified needs), advocate, develop the framework, and bring it to the finish line and included in the MHSA 3-Yr plan. l. Tanya: Jessica, does your agency have family and youth advocates with lived experience on your staff? m. Joe Rose: What should the Mental Health Advisory Board advocate for? n. Adriana: I have never had this information delivered so clearly and concisely! Thanks so much for your presentation and for the link to your guide. o. Joe Rose: would like to follow up with the NAMI Ending the Silence program. We have a grant for this. p. LD : DA Office is responsible for filing 6500 commitments, highest level for Regional Center, applicable to youth. Fighting intensively with Regional Center to prevent youth going into adult system. Slashed secured setting places. Seen spike in developmental delayed folks in criminal system, because Regional Center has done with its placement centers. Would be valuable to bring someone from Regional Center and from DDS, and why they are not keeping youth out of jail. q. Tanya: I would like to talk more about regional center responsibility to youth in child welfare and Juvenile justice. Would like to hear Family / Youth Advocates speak, after doing intense advocacy with Regional Center for youth. Those with lived experience could help cut through the red tape to get services in all systems 	<p>LD would like Jessie to return for a Part II discussion</p>
<p>V. Future Agenda Items</p>	<ul style="list-style-type: none"> 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		
VI. Adjourn	Meeting Adjourned 11:37a	
Next Meeting	Friday, August 28, 2020 at 10a via GoTo Meeting	

Minutes submitted by Andrea Dacumos