

MHAB Children’s Advisory Committee (CAC) APPROVED Minutes
 November 20, 2020 ♦ 12:15pm – 1:45pm♦ **Via GoTo Meeting Video Conferencing**

Meeting called to order @ 12:18p. 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				
		✓	Joe Rose, President CEO of NAMI Alameda County South NAMI National Alliance on Mental Illness-ACS	✓	Jessie Slafter– East Bay Children’s Law Attorneys and Member of Mental Health Advisory Board		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
		✓	Ricki Garcia, Parent Partner at Fred Finch	✓	Lara Maxey, Director of External Affairs at La Familia	✓	NAMI Alameda South Board of Directors Teri Talauta
		✓	Jackie Siefel, Clinical Supervisor at Victor Community Support Services				
	BHCS Staff:	✓	Angelica Gums, HR Liaison, BHCS Office of the Director, Recording Secretary	✓	Tanya McCullom, Program Specialist, BHCS Office of Family Empowerment	✓	Damon Eaves, BHCS Associate Director Child and Young Adult System of Care
		✓	Asia Jenkins, BHCS Office of the Director	✓	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. October notes are approved	
III. Children’s System of Care Report by Damon Eaves	A. No update	

IV. PRESENTATION & DISCUSSION: THE CHILDREN SYSTEM OF CARE AND TELEHEALTH DURING THE COVID-19 PANDEMIC (in partnership with Office of Family Empowerment, Boldly Me & NAMI)

- A. L.D. moved the chairs report to the bottom so the youth can present.
- B. Attached to the agenda is the data notebook and at page 8, bottom of 7, there are questions surrounding the children’s system of care.
- C. Page 9 – is the county doing enough to serve the children/youth in group care?
- D. As you’re listening to the meeting, look at the section around children’s system of care and comment in the section box and we’ll lift up your responses to that section.
- E. Scroll under telehealth piece, there is a section surrounding telehealth services. Please note which questions and comment your response in the comment. L.D. wants to lift up the responses to the committee in terms of how telehealth services are performing.
- F. Tanya is not asking the youth to answer questions about the data notebook. We just want their feedback on telehealth services and distance learning.
- G. L.D. wanted members to know that the data notebook is returned to the state of California and the youth being present can really inform and assist with our responses to telehealth. She values their contribution.
- H. L.D. wanted to open the conversation up to the youth participants to talk about their experiences accessing telehealth services and using distance learning.

Question posed to the High School students: Explain one thing that is working and one thing that can be improved with distance learning and telehealth

- a) Everything else is fine, we share screens, there are break out rooms, etc.
- b) More group activities and bonding time with everyone. It’s hard to do that through zoom.
- c) Teachers are going easier on them and the environment is not as stressful.
- d) The environment can be very lonely because there is limited social interaction.
- e) As a senior, it’s been a lot easier to submit college apps.
- f) Constant realization that there are experiences you’re missing out on
- g) Teachers are more lenient, and counselors reach out to students to discuss their mental health
- h) The time slots are for one hour or more to listen to teachers lecture. At the end of the day, students feel a little burned out.
- i) It’s not causing much problems, because she self-studies anyway.
- j) You can’t ask questions to the leaders directly. And computer problems are annoying.
- k) In terms of learning, we have to self-study a lot. It’s hard to sit in front of screen for a long time. Students find themselves zoning out.
- l) It takes space away from school pressure and conflicts and by being online. They can engage more in a positive way in class.
- m) Online classes are way more boring and can easily get distracted. More so than in school.

College Student Response:

- a) Distance learning has great benefits.
- b) She is more flexible and can choose her classes more easily.
- c) At the college, they are great with citing mental health resources at the school.

- d) She gets resources through Boldly me.
- e) It is difficult to find friends and community distancing. The downside is the social aspect of school.

Joe: You're attending an out of state college, but you're at home in Fremont and you don't have any opportunity to mingle with other people on campus. How does that feel?

Student Response: She gets all the work but none of the social aspect.

L.D.: Are you getting emails in these isolated settings, being in quarantine with their families and their tensions, are you receiving emails from the school saying that you need to talk even if you are not on campus?

- a) Losaleen put in the chat, one thing that is working for her is the screen sharing with the transcript on during zoom calls.
- b) One thing that can be improved will be the need for more interaction with peers through zoom calls, so it would be more incentivized to show up.
- c) The meeting was on the Skyline Instagram page. She didn't have any interaction with telehealth. Tanya thought that the student school-based counselors invited students, but they also put it on social media.

Do we know how to reach students who are in crisis who need to speak with someone outside of their household? So even if they are not using the telehealth services, how are the young people being placed on notice to their families. How did she find out about the center on campus?

Does anyone know how schools are letting families know in the COVID no family is present on campus climate about resources?

- a) Losaleen is getting weekly resources on what resources are available to students from Skyline High Schools.
- b) Two daughters at Kennedy High School- What I get from my daughters is that they get open office hours with the counselors and they can make appointments with the counselors. They can get a list of resources that they can contact, and they can get soft handoffs.
- c) Irvington Highschool refers students to Boldly me. The students are notified by their Counselors to work with Boldly me.
- d) Many principals at the schools are always taking Boldly me brochures and giving to students. There is always a concern about liability from the school district's prospective, the process of calling child protective services and if there is something happening with the family and the child has caused cautiousness from the school district.

- e) There are have incidences of rape cases and guns to school. They call the SRO and District Attorney and the can be process intensive. There is a concern that they don't want to open up pandora's box on their campus.
- f) **Katherine Lampee:** Program Manager for the Skyline Health Center. We decided to give information about this meeting to the COST Manager. We also sent it out to the ASB President and she blasted it out in email. The manger blasted it out to the teachers.
- g) Messages are also being sent out on Instagram. Behavioral Health is not as visible as it could be. They updated the skyline website. She wants to do Behavioral Health presentations to various groups on campus. She also wants to be able to get into the classrooms through Zoom.
- h) **L.D. :** These kids are dealing with the pandemic as it touched their family and personally, then they're dealing with the ancillary- not being able to see their friends and socialize, because these places are closed. Then they're asked to learn in a completely different way than they've been asked to learn their entire life.

L.D.: Is there some concerted effort to touch every student at the school where they check on the student's mental health, or is it that they blast on social media and if they see it or they don't and if it gets bad enough then they'll ask for help? How individualized is the contact in trying to reach kids surrounding mental health?

- i) Katherine: The coordination of services team (COST) meets once a week and we have referrals that come to our team, they go through and filter to one person and they filter it out to about 25-30 resources, on and off campus. Teachers send in COST referrals as well as admin and parents.
- j) If she receives a COST referral, she will call that student directly and make contact. Or if it was a Spanish-speaking student, she would call a staff and schedule introductory appointment with behavioral health person.
- k) The people have the most contact with them are doing the best that they can in grade evaluation, attendance evaluation, what is the general appearance of student when they come to class and how they act in class to determine their mental health. They're making determinations on what they see on many different levels and sending us information so that we can make contact.
- l) The COST has groups for males and females and offers individual help for services. That is how they make contact face to face.

L.D.: One thing it raises in her office, since they have been doing implicit bias training, is the teacher gaging as they look at the student in the screen, is the student a behavioral problem or is he in mental health crisis due to isolation? How do you guys deal with implicit bias and access to services for diverse population?

- a) That is a work in progress.

A. Invite students back who attend schools in the Hayward and Oakland area

- b) Skyline has trainings on implicit bias and don't know if that is in the works.
- c) Dr. Fisher and Principal Valez, regarding implicit bias and black lives matter, created an African American's studies class. Dr. Fisher and Principal Valez train students on how to interact with community and law enforcement in society so that there is an understanding among community and sensitivity with the students, so we can address this problem. Principal Valez got this approved at Kennedy High School.

Distance Learning – Are services being modified to meet people in these new realities? We need to make sure that the staff is conscious of possible implicit bias in terms of resources and what type of resources and how they are perceiving crisis that a young person may be experiencing due the pandemic.

- a) **Rosalyn:** I think that it is difficult now to identify students going through a mental health challenge, because most of the students have their cameras off. However, we do have check-in questions, and based on each student's response, teachers reach out to see how they can support students. Teachers receive mental health trainings over the summer.
- b) Katherine likes the idea of check-in questions.
- c) They must have their screens on, internet is heavily loaded, test-taking could be difficult. They maintain a social life online with their friends through zoom. They do miss the in person.
- d) **Tanya:** Still wants to hear from students in the Hayward and Oakland Area. Now she has a contact with the school-based behavioral health providers, I can get the information out sooner and possibly more students will be able to participate. There is a culturally difference between students in Fremont, Hayward, and Oakland.
- e) **L.D.:** That is a fair request. We also didn't have enough time to ask follow-up questions with the young people that were here. One person who was a college student and we had to suck out the information.
- f) We need to have a special meeting where we plan with their school schedule to have 30-45 minutes to engage with young people. Would also like a representative from Behavioral Health to be present to hear what the young people have to say.

<p>V. Chair's Report by LD</p>	<p>A. Larger MHAB & Retreat update</p> <p>a) The mental health advisory board had their general meeting early this week. They wanted to reduce the SMI population at the Jail. There was a BOS presentation on this on October 27th where Dr. Tribble summarizes the presentation and gave opportunities for board and community to comment. Taking pieces and building it out at future meetings.</p> <p>b) Our group wants to look at early intervention and recognizing that some folks served in CSC somehow their needs aren't met and some end of up adult system of care receiving services. How can we keep that from happening?</p> <p>c) January 23rd is the retreat – It will be held virtually, and a save the date will go out.</p> <p>d) May 13th is the Banquet- We want award recipients to be present in a live space, but it will be a webinar that is livestreamed.</p>	
<p>V. Future Agenda Items</p>	<p>B. UPDATED Presentation on Children's Services</p> <p>C. Children who are their own primary advocate (e.g. foster youth or youths without appropriate parental care)?</p> <p>D. Care facilities for youth (Fremont Hospital), Out of County Facilities</p> <p>E. Foster Care Issue</p> <p>F. Anxiety, Stress and Suicide in the TAY Population</p> <p>G. Ask for expansion of services similar to Union City Family Center</p>	
<p>Public Comment on Items not on Agenda</p>	<p>Joe – AB 2022 – The law states that (1) there must be MHSA funding in the budget line for it and (2) there must be an application where the schools can apply to implement AB 2022. Concern is that it is not being addressed.</p> <p>a) It states that all schools in the state of California both public and private must inform students at least twice a year of available mental health service for them. Resource funds are available for the schools to take on this. Schools shouldn't tap into their funds but to use these funds as the state mandate.</p> <p>b) It always comes down to people not doing what they need to do because there is no penalty. Maybe the County doesn't want to do this because they don't have the mental health resources to do this work. Why is this not being done?</p> <p>c) In regards, to the data notebook, where should we send it? Email to L.D. and she will sort it out to who needs to have it.</p> <p>d) Joe, regarding comment, there is an issue with resources at the school where coping skills to deal with mental health is not taught. They teach you what the mental illnesses are, but they teach you how to cope with them in class. At scale, if you want to fix the problem, you have to teach them the coping skills.</p> <p>e) Students don't know how to ask for resources or have the habit to look them up. When it comes to how to deal with it, some don't know how to deal with it, such as growth mindset vs. fixed mindset.</p>	

VI. Adjourn	Meeting Adjourned 1:46p	
Next Meeting	Friday, January 22 nd at 12:15p via GoTo Meeting	

Minutes submitted by Angelica Gums