



Alameda County
Mental Health Advisory Board

Executive Committee **APPROVED Minutes**
Thursday, February 11, 2021 ♦ 3:30 PM – 5:00 PM
2000 Embarcadero Cove, Suite 400, Oakland

Teleconference Meeting

Committee Members:	<input checked="" type="checkbox"/> Lee Davis (<i>Chair, District 5</i>); <input checked="" type="checkbox"/> L.D. Louis (<i>Vice-Chair, District 4</i>); <input type="checkbox"/> Brian Bloom (<i>District 4</i>); <input checked="" type="checkbox"/> Juliet Leftwich (<i>District 5</i>); <input checked="" type="checkbox"/> Marsha McInnis (<i>District 1</i>)
ACBH Staff:	<input checked="" type="checkbox"/> Karyn Tribble (<i>ACBH Director</i>); <input checked="" type="checkbox"/> Kristin Boer (<i>Administrative Liaison</i>); <input checked="" type="checkbox"/> Angelica Gums (<i>Secretary II</i>); <input checked="" type="checkbox"/> Asia Jenkins (<i>Secretary II</i>); <input checked="" type="checkbox"/> Sarina Hill (<i>Program Specialist</i>); <input checked="" type="checkbox"/> Kate Jones (<i>Adult/Older Adult SOC Director</i>)

Meeting called to order @ 3:30 PM by **Chair Lee Davis**.

ITEM	DISCUSSION	DECISION/ACTION
Roll Call	Roll Call completed.	
Approval of Minutes	Minutes approved.	
Data Notebook Follow-up	<p>Sarina Hill and Kate Jones presented the responses to the follow-up questions regarding the Data Notebook.</p> <ol style="list-style-type: none"> Can we name the ARFs? Refuge (TAY), Bonita House (Dual Dx), Casa De La Vida (community conservatorship/AOT & Reentry from Santa Rita) Are there any plans for an assessment for unmet needs for ARFs? – not specific to ARFs. Planning is happening to address the concerns that resulted from some lawsuits 6,854 beds paid for /70 individuals = 98 days or 3 months average/individual in ARF. Is that reasonable? Yes, it is reasonable. Individuals stay between 3-6 months. Some leave much sooner and some stay longer than six months. Average does not account for outliers. People are only staying and average 3 months? Please see previous response 	Schedule time at a future meeting to review the Data Notebook follow-up responses at a main board meeting.

Contact the Mental Health Advisory Board at ACBH.MHBCcommunications@acgov.org



Alameda County
Board of Supervisors

Alameda County ac bh
Behavioral Health Care Services
MENTAL HEALTH & SUBSTANCE USE SERVICES

ITEM	DISCUSSION	DECISION/ACTION
	<p>4. Does Licensed Adult Residential Facility Equal Board and Care? In regards to Q2. No. Residential facilities have programming and B & C does not. Are any individuals included who are not seriously mentally ill? Possibly but not through our contracts</p> <p>5. Can we name the four IMDs? Villa, Gladman, Morton Baker Center, and Garfield (specialty for neurobehavioral clients)</p> <p>6. Can we name the out-of-county IMDs? Crestwood IMDs.</p> <p>7. Is there any way to get the total expenditures on either IMDS or ARFs or both? Yes</p> <p>8. Why did they only stay 97 days on the average (why did they leave or why did the county quit paying?) in regards to Q3. If this refers to ARFs, please see answer above. ARFs are voluntary and people choose to leave or have met their goals for their respective treatment plan.</p> <p>9. Unmet needs-This question is critical because a lack of ARF beds is blamed for lack of IMD beds. Q4 I'm not sure how a lack of ARF beds can be blamed for IMD beds. Not following the reasoning.</p> <p>➤ Who is the requester of the Data Notebook? The Data Notebook was <i>“Prepared by the Performance Outcomes Committee of the California Behavioral Health Planning Council - The California Behavioral Health Planning Council (Council) is under federal and state mandate to advocate on behalf of adults with severe mental illness and children with severe emotional disturbance and their families.</i></p> <p>➤ Can we say briefly why there is a data notebook and why it asks these particular questions this year? The Data Notebook is a structured format to review information and report on each county's behavioral health services. A different part of the public behavioral health system is focused on each year, because the overall system is very large and complex. This system includes both mental health and substance use treatment services designed for individuals across the lifespan. The 2020 Data Notebook is focusing on telehealth and other strategies to provide services during the COVID-19 public health emergency.</p>	

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	<ul style="list-style-type: none"> ➤ It would be interesting to see how we compare with the rest of the state! CBHPC Reports (ca.gov) ➤ The supervisors always want to know how this county compares to others! CBHPC Reports (ca.gov) <p>Chair Davis commented that having 70 individuals in all of Alameda County being served. There is a huge gap that needs to be addressed, and would like to know what the efforts will be moving forward, to get information on this vulnerable population.</p> <p>There are 3 adult residential facilities that ACBH contracts with all serving different populations: REFUGE which services TAY (Young adults 18-25 years old); Bonita House that is a co-occurring program, and only focuses on co-occurring for the population we serve; Casa de la Vida, that was converted to focus on individuals who are re-entering the community from Santa Rita Jail, and those individuals who are in the AOT and conservatorship program. Housing is a huge challenge in the Bay Area and the choice was made to convert that program into serving those that had been forensically involved.</p> <p>There have been some challenges with the young adult population, and have made some allowances in the crisis residential where clients can stay up to 30 days. The Youth and Young Adult System does some very highly specialized work through REFUGE to be able to get the TAY population to stay for a longer period of time.</p> <p>Bonita House is the co-occurring program, that serves individuals who may have a substance use disorder in addition to a serious persistent mental illness. This could be a very challenging population to serve for example some individuals want to smoke, and the Adults/Older Adult System of Care is currently working the SUD Continuum Care System to address this issue. This is a voluntary program like all the other programs and people have to interested in recovery. There can sometimes be delays in getting clients into the program due to funding, the clients have to have a funding source, i.e. Social Security or General assistance.</p> <p>With Casa de la Vida, there can be challenges with getting clients into the program due to not knowing the exit date of clients coming out of Santa Rita Jail, and so that has to be carefully coordinated at with the Sheriff's Department and Casa de la Vida.</p>	

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	<p>The unmet need is a question that still needs to be answer. How many people need these services and are not getting them? What are the reasons for that? And if people are leaving before its wise for them to do so on their own basis, should we be talking about some more programs that are involuntary or how to get people to their best state of health. And without the data of how many people would like to be in these programs, and if there are waiting list or reasons people can't get in.</p> <p>Could possibly host some focus groups to get data. There are people that are very interested in services and some of the data tell us that people aren't interested in our services. Like when we have reached out multiple times and they connect back with us.</p> <p>There is data tracking that can tell how many beds are utilized, however there is no automatic mechanism. But can certainly follow-up as a follow-up to this to present what the utilization? We can get the information from the program and validate that information.</p> <p>Or if there is a waiting to indicate what the need would be. And there are referral lists that ACBH have, that could used to get a better understanding of how many individuals are referred annually and actually how many people actually go into the service.</p> <p>Member Leftwich comment that the referral list would be good, but really would like to focus on the unmet needs. Are the referral lists lengthy and there aren't enough spots in these facilities? Is there a need for expansion?</p> <p>ABCH does have this information and a lot of it goes to current utilization. Many of the programs are not fully utilized and some are probably in excess. Unfortunately, what has been seen is that the trends are people don't believe there is access or availability so therefore don't reach out. But in many cases, we do have open slots and are not able to discern easily to find out what's the issue. Can drill down if there are specific parameter that are interesting to the Board. What is missing is real time access even though a lot of other providers on different systems can see that and what we're hoping for with the implementation of the billing and electronic records system.</p> <p>Vice Chair Louis posed that the group have a deeper discussion and figure out if this conversation should be agendize for an Adult Committee, Criminal Justice or a full board meeting. But there should definitely be a follow-up discussion to be able to dedicate an entire meeting to get details. There are a lot of questions that have been raised, and suggested that this be added to a future MHAB</p>	<p>Schedule time at the March or April meeting to plan where this could logistically be brought back for further discussion and then delegate to subcommittee.</p>

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	<p>meeting for a few minutes with the responses that have been received thus far and ask the group whether they want to take this up in the Adult Committee meeting, and then schedule a follow-up meeting. This would give community members an opportunity to submit additional questions and we can have a robust discussion at a future meeting.</p>	
<p>Retreat Follow-up</p>	<p>Roberta presented on the follow-up to the Retreat. Roberta has sent the notes and the monitoring framework outline. The monitoring framework needs to be reviewed and discussed at an ad hoc committee meeting, and if the group is in agreement with the framework then worksheets can be created and data request that would go to the department for the board to monitor, and develop a series of different ways you can request information. Then time can be spent with ACBH and the data services team to be sure we have packaged the request in a way it can be easily provided back to the Board. Would like the request to be very straightforward.</p> <p>Vice Chair Louis suggested to schedule an ad hoc committee meeting to review and drill down into the information, and maybe have a presentation about where we are, but drill into it to develop a more substance report out to the larger group. I believe our next step is an ad hoc committee where the committee can drill down into the weeds on what's been developed so far and to formulate it into a something more for the entire board. Next step will be to schedule an ad hoc meeting.</p> <p>Lee to do a report out at the main meeting in the Chair's Report to inform the full board that the team presented at the Exec Committee and received an update on the status and development and it was agreed to have an ad hoc committee meeting and the plan is to have a presentation and report out at the March meeting.</p>	<p>Asia to schedule an ad hoc meeting.</p>
<p>Forensic Plan Update</p>	<p>Dr. Tribble shared the Forensic Plan Update. Dr. Tribble will be presenting to the Board of Supervisor the update, there is not a confirmed date, yet. Would like to present to the MHAB before going to the Board of Supervisors, if possible or a presentation to the Executive Committee. Would like for the MHAB to hear and ask questions. Possibly schedule for the March meeting.</p> <p>There will be a communication coming out shortly regarding the departmental goals and True North Metrix, so you should receive it later today from the Office of the ACBH Director.</p>	
<p>Discussion Items</p>		

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	<p>A. Future Agenda Items for MHAB</p> <ul style="list-style-type: none"> • February Meeting ideas – Bylaws There will be a discuss at the February to discuss the bylaws. Will invite Ray Leung from county counsel. Julie will present the bylaws and answer any questions or concerns that may rise. Then have the member vote to approve the bylaws. The last memo had some highlighted areas of change based on the email from county counsel. Two-thirds vote of the appointed member are needed to pass any changes the bylaws. The memo was just explaining to board what the state law says with the recommendations. There has been some discussion about eliminating the office of secretary, but we have also talked about adding a social media account and having someone on the board whose role would be to manage that. Don't necessarily have to call it a secretary, we could call it a communications role. Should think about an idea of a supporting document that doesn't have to be long and could be bullet pointed surrounding some additional positions. Need to encourage board members to attend so we can vote and pass the bylaws. • IOP Letter of Support Lee to review to the letter. Letter will be circulated to members for their review and will discuss at the February meeting and a vote on this matter. Also, invite an advocate to speak and set the stage. <p>B. Annual Awards Banquet</p> <ul style="list-style-type: none"> • Plan to postpone the Annual Banquet to Fall 2021. Currently, the venue is reserved for May 13th and we need to contact venue to change the date. Currently, the venue is closed and not hosting any events. Plan to host the event on October 14th. Will check on with venue reserved the October 14th date if available. <p>C. LEAD Listening Session The Office of Consumer Empowerment would like to present to the board on the Listening Session Campaign that was hosted and do a</p>	<p>Julie to send memo and bylaws document to Dr. Tribble to send to Ray.</p> <p>IOP Letter to be included with MHAB main meeting agenda.</p>

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	<p>presentation on the themes that came from the listening sessions and to invite MHAB member to attend the LEAD Summit at the end of February. They would like 10 minutes on the agenda at the MHAB.</p> <p>D. Forensic Diversion and Re-entry Services Director Job Description Discussion To be presented at the Criminal Justice Committee meeting. James can be involved, and he can present and talk about the position. Next week, there is a presentation on the Safe Landing Project.</p>	
Adjournment	Adjourned at 5:00 PM	

Minutes submitted by A. Jenkins