

**Alameda County Mental Health Board Minutes**  
**May 8, 2006 ◊ 12:00pm-2:00pm**  
**Lakeside Plaza Building, 1401 Lakeside Dr. Room 1107**  
**Oakland, CA 94612**

Meeting called to order @ 12:00pm by Chairperson Marsha McInnis

**HOUSEKEEPING**

Roll Call / Introduction of Guests

**Mental Health Board Members:**

**Present:** Anthony Hare, Marsha McInnis, Joe Shimizu, Sup. Gail Steele and Dr. Ron Tauber

**Excused:** Karen Bridges, Rochelle Elias, Anthony Forrette and Hal Zawacki

**BHCS Staff:** Michelle Burns, Barbara Majak, Carolyn Novosel, Marye Thomas, MD, Gary Spicer, Thomas Walker & Agnes Catolos

**Public:** Melissa Murphy (ACCMHA), John Steinfurst (Fred Finch Youth Center), Howie Harp's Rep.-Clarence Brewer, Jerome Attaway, Betty Oliver, Curtis McBride, Lorenzo Kearney, Joseph Carter, Veyama Sachiko and Mary Johnson

<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<b><u>Approval of April 2006 MHB minutes</u></b>	No correction was made to the April 2006 MHB Minutes.	M/S/C Joe Shimizu/ Dr. Ron Tauber 4-Favored 1-Abstained
<b><u>Correspondence</u></b>	Mr. Walker made an announcement that the Board of Supervisors (BOS) presented to the BHCS Dept. and the MHB the proclamation for " May is Mental Health Month".	
<b><u>Presentation</u></b> Transition Age Youth (TAY) presented by Michelle Burns	Ms. Burns stated that she is the Coordinator for the TAY Planning Panel and she's also the Coordinator of EPSDT. Ms. Burns distributed and presented facts about TAY... Who are TAY? TAY is described by the CA. Mental Health Director's Association as young people ages 14-24 originally 21 but expanded to 24 who are transitioning out of the mental health system either from Foster Care, Juvenile Hall, AB3632 (Special Education). TAY will involve a wide variety of partners including families, education, agencies in the community, housing etc. to provide care.	

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<i>TAY Presentation (Cont.)</i>	<p><i>How many youth?</i>  <i>In 2001-2002, there were only 136,510 youth served in the entire state of CA;TAY represents one of most underserved populations for mental health services, in Alameda County, there are about 163,358 youth; about 17% in need were served; Latino and Asian/Pacific Islander population was impacted more severely than other populatios in the county.</i></p> <p><i>What Exists for TAY in Alameda County?</i>  <i>Foster Care System, ILSP, STARS, Fred Finch Youth Center, Juvenile Justice/Probation, Education, Co-occurring Disorders (Thunder Road) Housing (Coolidge Court, Berkeley shelter, Bay Area Youth Center), Employment (Alameda County Vocational Rehab)</i></p> <p><i>Recommendations fro TAY MHSA Programs:</i>  <i>STAY Supported Housing Program</i>  <i>TIP Transition to Independence Program</i>  <i>Resource Center Safe Place for Prevention and Early Intervention funding</i></p> <p><i>TAY handout that was distributed also consisted of the following:</i></p> <ul style="list-style-type: none"> <li>• <i>TAY Planning Panel Composition</i></li> <li>• <i>Data on Summary of Clients Served as % of Estimated SMI/SED Prevalence Population by Age Group, Ethnicity and Region</i></li> <li>• <i>Description of FSP 6-TIP(Transition to Independence Process) Team</i></li> <li>• <i>Fact Sheet for STAY Supported Housing Program for TAY</i></li> </ul>	
<p><b><u>Action Items</u></b>  <i>A. Community Service Awards Nomination</i></p>	<p><i>Mr. Walker stated that prior to the MHB meeting, the Nomination’s Committee consisted of Dr. Tauber, Mr. Shimizu and Mr. Walker decided on the list of nominations for the Community Service Awards 2006 which are as follows:</i>  <i>Business-Pathways to Wellness</i>  <i>Children/Adolescence –Bochan Huy</i>  <i>Consumer-Maria Luz Ortiz</i>  <i>Professional-Art Hom and Dr. Robert Ratner</i>  <i>Volunteer-Lena M. Wynn</i></p> <p><i>Dr. Tauber made a motion to approve nominees that were submitted by the committee.</i></p>	<p><i>M/S/C Dr. Tauber/  Mr. Shimizu  All Favored</i></p>

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<p><i>B. Joint Coordination Meeting between Berkeley MH Commission and MHB on June 12<sup>th</sup> MHB Meeting</i></p>	<p><i>Mr. Walker stated that he had spoke with Harvey Tureck and Michael Diehl, they are set for June 12<sup>th</sup> joint meeting.</i></p> <p><i>Mr. Shimizu asked if they have a program to discuss or a focus issue for the joint meeting.</i></p> <p><i>Ms. Majak related that from Mr. Diehl's email, he talked about having presentation about focusing on consumer and family involvement and participation which was discussed at the last MHB meeting about recruitment of consumers as well as family members into the MHSA process and into the system; Alameda County seems to have a greater strength with family and Berkeley has greater strength with consumers.</i></p>	<p><i>M/S/C Mr. Shimizu/ Sup. Steele All Favored</i></p>
<p><b><u>Discussion Items</u></b></p> <p><i>A. MHB Retreat, Saturday, July 15<sup>th</sup> (Full day)</i></p> <p><i>B. MHSA Update</i></p> <p><i>C. MHB Role in MHSA</i></p> <p><i>(Discussion for above items were combined)</i></p>	<p><i>Ms. McInnis stated that the last Executive Committee Meeting was extended and that it was decided having MHB Retreat on July 15<sup>th</sup>.</i></p> <p><i>Dr. Thomas stated that several Executive Committee Meeting's ago, it was discussed to have a retreat and the initial focus was to develop a work plan for a year, it was discussed and brought up as an action item to the MHB meeting; there was conversation about when the retreat should occur as well discussion about incorporating the discussion about the role of the MHB relative to MHSA and also discussed having a facilitator, which was decided to get Martin Paley. Dr. Thomas stated that there was confusion in terms of where the Department is and where the MHB is in the MHSA process; what should be the next step etc. Dr. Thomas related that she had several conversations with Ms. McInnis after the Executive Meeting and made an Executive decision to take a step back to have additional discussions among board members about the retreat i.e. when to have it, what should be the topic etc.</i></p> <p><i>Ms. McInnis added that the board members should be on the same page, no mystery or confusion.</i></p> <p><i>Dr. Thomas felt that it would probably make more sense to take a step back, do the preparatory work first to be more productive than just sort of launching forward and continuing on the path where some of the board members are not on the same page. Dr. Thomas stated that there's an extended meeting in June re: continued planning of the MHSA so there's probably nothing wrong in having the retreat until fall may be do some of the prep work over the summer; delaying the retreat won't cause a terrible affect on the planning relative to MHSA.</i></p> <p><i>Mr. Spicer stated that the actual date for the extended meeting will be on June 19<sup>th</sup> and</i></p>	

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<i>Discussion Items (Cont.)</i>	<p><i>that there should be MHB representation for this meeting.</i></p> <p><i>Dr. Thomas stated that participants for the June 19<sup>th</sup> meeting will include the Project Management Team (from the MHSA planning process which was consisted of stakeholders, family, consumers, providers and organized labor) with some extended membership that will include some staff members from the BOS and MHB representative.</i></p> <p><i>Ms. Majak stated that they would like to have a couple of MHB representatives in the June 19<sup>th</sup> meeting; the meeting is more of a design meeting, it's not an action meeting to figure out what's the best way to design a process that is most transparent, that is most participatory, that has the right people at the table to do the annual updates and to responds to the other MHSA sections.</i></p> <p><i>Sup. Steele stated that the BOS should be able to understand the whole process i.e. who are in the groups; when the groups meets, etc.</i></p> <p><i>Ms. Majak felt that may be they need to revisit is get some capacity on marketing, it really takes an expertise to be able to explain the process to the public; what is it they are doing and how they are doing it; it didn't have to on-going but to help in getting the word/info out in a way that is meaningful; understandable to people who get confuse; it's going to be more complicated so they have to make it simple.</i></p> <p><i>Sup. Steele agreed to make it simple i.e. who's on the committee, when is the meeting, etc. just some very basic info and need to make sure that the MHB and every member of the BOS office has something that they can look at.</i></p> <p><i>Dr. Thomas asked what would be the best way to send copies of documents to the Clerk of the BOS with the assumption that they will be distribute to each BOS member and their staff.</i></p> <p><i>Sup. Steele responded that there may be some problems why such copies were not distributed to each BOS members.</i></p> <p><i>Mr. Hare endorsed Ms. Majak and Sup. Steele ideas about the need for a simple layout of the MHSA info bulletin.</i></p>	

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<i>Discussion Items (Cont.)</i>	<p><i>Dr. Tauber stated that he agrees to delay the retreat however he felt that they should continue having conversation about the role of the MHB in MHSA, it might be even more productive if they have smaller conversations over sometime frame but it has to be planned and would like to encourage the board to share conversations about what goals MHB see with the MHSA and how they are going to interact with it.</i></p> <p><i>Mr. Shimizu asked Mr. Spicer when he and the MHB decide the role of MHB in MHSA.</i></p> <p><i>Mr. Spicer responded that he felt that its an unanswerable question, they may not really know fully what the role of MHB would be in the on-going MHSA review as long as a year or maybe 2 years because its really an evolving target and relationship.</i></p> <p><i>Ms. Majak added that Sacramento still has to come out with instructions, BHCS doesn't know yet what the state is going to request for; need to have structures that will facilitate communication that are simple, clear and open as possible so that they are transparent for people who will participate. DMH could change requirements or it may be different instructions for each section of the MHSA because the Oversight and the Accountability Commission is responsible for prevention and innovative programs and DMH approves the other 3 sections.</i></p> <p><i>Mr. Spicer stated that on a practical level they can expect their 1<sup>st</sup> annual update probably in January 2007.</i></p> <p><i>Mr. Shimizu asked if it's fine to have the retreat in Sept.</i></p> <p><i>Mr. Spicer responded that as long as there is already some MHB involvement with the process and not wait until the retreat occurred.</i></p> <p><i>Dr. Thomas stated that it's very critical to have MHB representation in the June 19<sup>th</sup> meeting; agreed with Mr. Tauber's idea about having some on going dialogue and will look at developing some bulletin info that the Dept. can communicate better.</i></p> <p><i>Ms. Majak pointed out 3 things need to be done:</i></p> <ol style="list-style-type: none"> <li><i>1) MHB should start on going dialogue amongst themselves and with the Dept. about what the role could be, might be or should be.</i></li> <li><i>2) Pick a couple of board members for the June 19<sup>th</sup> meeting</i></li> <li><i>3) The Dept. will work on trying to have some very simple bullet re: MHSA.</i></li> </ol>	

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<i>Discussion Items (Cont.)</i>	<p><i>MHB members who will be attending the June 19 meeting are: Mr. Tauber, Mr. Shimizu and Mr. Hare, Sup. Steele might be able attend for a while.</i></p> <p><i>Mr. Shimizu asked about the current status of MHSA approval.</i></p> <p><i>Mr. Spicer stated that BHCS has received a letter from DMH re: their initial response to the review; the Dept's. target deadline to response is end of this week and it will probably take about another 2 weeks for the final approval. Mr. Spicer stated that they are in the process of working with groups to develop RFP for promulgation around the county for their plan even though they won't be able to implement until they get approval; they are targeting their 1<sup>st</sup> start up with the FSP to occur in Oct. 2006 and targeting to have all of their programs start by Jan. 2007.</i></p>	
<b><u>Director's Report</u></b>	<i>Dr. Thomas discussed the County Budget Update-A handout of the CAO Targeted Reduction Plan was distributed; out of the \$78 mil county deficit, HCSA reduction target is about \$13.5 mil. Mr. Kears plans to address the deficit by using the Financial Management Reward and also identify with the Dept. Heads some areas/issues need to be addressed that will affect the HCSA budget i.e. closure of the Oakland Jail.</i>	
<b><u>Chair Report</u></b>	<i>No report given.</i>	
<b><u>Committee Chair Reports</u></b> <i>Adult Committee Report</i>	<i>Mr. Hare stated that they've discussed the Sausal Creek Report which reported some increase in population; they've also discussed the preliminary data on 5150 detentions in Oakland as well as discussion on assembly bill 5150.05.</i>	
<i>Awards Committee Report</i>	<i>Mr. Walker asked everyone to mark their calendar on May 25<sup>th</sup>-Community Service Awards 2006, from 5pm-8pm at the Aquatic Center in Oakland.</i>	
<i>Children's Advisory Committee (CAC) Report</i>	<i>Sup. Steele reported that at the CAC Ms. Novosel is asking each of the agencies to discuss their assets and challenges; they've discussed hiring staff for residential places and they've discussed having an email distribution for children services.</i>	
<i>Housing Committee Report</i>	<i>No report given.</i>	
<i>Public Awareness Committee (PAC) Report</i>	<i>Mr. Shimizu stated that only Ms. Heiliger and he were present at the last PAC meeting; one of the issues PAC still need to discuss is the development of the Stigma Presentation for the youth; they've also discussed NAMI Walks on June 3<sup>rd</sup>.</i>	
<b><u>Liaison Committee Report</u></b>	<i>No report given.</i>	

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<b><u>Public Comments</u></b>	<p><i>Mr. Brewer stated that he's advocating for the Howie Harp Multi Service Center to stay open more hours but it seems to be a minor issue compare to other mental health problems that Dr. Thomas mentioned.</i></p> <p><i>Mr. Kearney also addressed his concern about the need for the center to stay longer hours because its hard to give services from just 9-1pm; he does shelter referral later in the day; if the center is open until 5 pm they can do a lot more.</i></p> <p><i>Mr. Walker responded that eventually, the center will stay open for extended hours probably from 8am-4pm or 5pm when they select new provider.</i></p> <p><i>Dr. Thomas added that it could be longer hours because what they would want to do is incorporate the things that's being done at Howie Harp with the focus on wellness and recovery through the development of the MHSA Wellness and Recovery Hub.</i></p>	
<b><u>Board Comments</u></b>	<p><i>Mr. Tauber stated that as a member of the Measure A Oversight Committee he would like to know how the Medical Center spent their Measure A allocation i.e. how much went to John George for people with serious mental illness diagnosis; he felt that the Medical Center should provide an answer.</i></p> <p><i>Sup. Steele felt that the \$s wont be trackable.</i></p> <p><i>Mr. Shimizu invited everyone to the NAMI Walks on June 3<sup>rd</sup>.</i></p>	

*Meeting was adjourned @ 2:15PM  
Minutes submitted by Agnes F. Catolos*