

**Alameda County Mental Health Board Minutes**  
**October 12, 2009 ◊ 12:00pm-2:00pm**  
**First 5 Office Suite 130**  
**1100 San Leandro Boulevard**  
**San Leandro, CA 94578**

Meeting called to order @ 12:15 by Chair Rochelle Elias

**HOUSEKEEPING**

Roll Call/Introduction of Guests

**Mental Health Board Members:**

**Present:** Kelly O’Lague- Dulka, Rochelle Elias, Luvenia Jones, Sup. Gail Steele, Lisa Gifford, Ravi Sodhi, Sheldon Koiles, Pat Buchanan and Laura Mason

**Excused:** Maxine Oliver-Benson, Alane Friedrich, Stephen Post and Patricia Sweetwine

**Absent:** Dorothy King

**BHCS Staff:** Barry Hall, Gary Spicer, Barbara Majak, Agnes Catolos and Marye Thomas, MD

**Public:** Deborrah Bremond, Margot Dashiell, Dennis Romano (ACCMHA), Sam Greyson and Joe Rose

<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<b>Public Comment</b>	None	
<b>Approval of September 2009 MHB minutes</b>	No corrections were made to the September 2009 MHB minutes.	M/S/C Pat Buchanan/ Lisa Gifford All favored
<b>Presentation: Strategic Plan for Children’s System of Care</b>	<p>Ms. Novosel distributed and presented the Strategic Plan for Children System of Care that included info e.g.</p> <ul style="list-style-type: none"> <li>▪ Over the past 10 years, the dept. expanded its delivery of services through Early Periodic Screening Diagnosis and Treatment (EPSDT) to 0-5 children and children from schools, foster care system and juvenile justice service.</li> <li>▪ In 2007, Children Services started Children’s Strategic planning process which was based on the huge amount of expansion that the BHCS had done; a consultant was hired to facilitate the strategic planning.</li> <li>▪ Six primary goals were developed to address goals over the years 2009-2012.</li> <li>▪ MHSA funds allowed the county to address their goals on prevention and early intervention and it also helped with the evidence based practice called Multi</li> </ul>	

<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<p><i>Presentation: Strategic Plan for Children’s System of Care (Cont.)</i></p>	<p><i>Systemic Therapy which served about 95 youth from juvenile community/probation population.</i></p> <p><i>Children’s Services by the Numbers reflects data of children’s served from yr. 2008 e.g.</i></p> <ul style="list-style-type: none"> <li>▪ <i>Zero-five services-2,943 served</i></li> <li>▪ <i>Foster Care services (0-21 y/o)-2,943 served</i></li> <li>▪ <i>Probation MH (10-18 y/o)-1,360 served</i></li> <li>▪ <i>School Based Services (0-21 y/o)-1,814 served</i></li> <li>▪ <i>Special Education MH (5-21 y/o)-983 served</i></li> <li>▪ <i>Outpatient Services (0-18 y/o)-3,386 served</i></li> <li>▪ <i>Crisis Services (0-18 y/o)-790 served</i></li> <li>▪ <i>Hospital Inpatient Services (0-18 y/o)-510 served</i></li> <li>▪ <i>MH Services in Residential Placement (6-21 y/o)-197 served</i></li> <li>▪ <i>Alcohol and Other Drug (AOD) Prevention Services (10-18 y/o)-9,054 served</i></li> <li>▪ <i>Spending on Children for FY 09-10-approx. 22% of all appropriations in county-wide proposed budget that includes Health Care, Public Health, BHCS and Child Welfare</i></li> </ul> <p><i>Questions and Answers:</i></p> <p><i>Ms. Jones asked how long the records are kept now, because she stated that in the past the records were destroyed to keep people from being stigmatized by the time they turned 21.</i></p> <p><i>Dr. Thomas responded that all providers are required to keep treatment records for 7 years after the child reaches 21 but she’s not certain what is the school district’s policy on keeping records.</i></p> <p><i>Ms. O’llague-Dulka asked if the county will have a standardized system of data collection and data tracking for CBO’s.</i></p> <p><i>Ms. Novosel responded that the plan in having a standardized system of data collection and data tracking is a working progress.</i></p> <p><i>Dr. Thomas stated that currently CBO’s have to report to the dept’s. INSYST System to have common data elements across the providers but there is a challenge in sharing info with other systems e.g. education and probation and everybody has different issues around confidentiality especially for children. Dr. Thomas related that what they are working on at the statewide level is the development of an electronic health record to</i></p>	

<b>ITEM</b>	<b>DISCUSSION</b>	<b>ACTION</b>
<p><i>Presentation: Strategic Plan for Children’s System of Care (Cont.)</i></p>	<p><i>have a common treatment planning tool and the lead counties in the planning are Alameda County, Los Angeles and San Diego.</i></p> <p><i>Ms. Elias asked what are the future funding challenges.</i></p> <p><i>Ms. Novosel responded that there is a lot of funding challenges ahead e.g. delayed payments/reimbursements from the State to counties and the county end up using county general funds to continue providing services.</i></p> <p><i>Dr. Thomas stated that the State owes the county \$12 mil for AB3632 and yet the county is mandated to offer the service.</i></p> <p><i>Sup. Steele described how Children Services were 35 years ago e.g. there was no Children’s Director and the 1<sup>st</sup> Director was shared with Adult Services; there was no psychiatrist facility like Willow Rock Center; there was no services in schools; there was no cooperation between Probation, Foster Care and Mental Health; they were fighting for a 25% of funding to go to children but now with the EPSDT expansion Alameda County is serving a higher percentage of children. Sup. Steele addressed that some of the biggest gap in children services are services for the high end kids and AOD.</i></p>	
<p><b>Emergency Action Item:</b> <i>MHB request to have a meeting with BHCS Admin, Patients’ Rights Advocates, Family Advocates at John George</i></p>	<p><i>Ms. Elias made a motion to have an emergency item to make a formal request to BHCS Admin to have a “pre-negotiation” meeting that will involve Patients’ Rights Advocates and Family Advocate to address various issues at John George such as quality of care.</i></p> <p><i>Discussion:</i></p> <p><i>Ms. Gifford felt that having the meeting is a positive opportunity for the board’s purpose to be informed and to be responsible for some of the services that are going on but she felt that the downside is the time and seems like getting into details is not necessary.</i></p> <p><i>Mr. Sodhi felt that the board is stepping in from an advocacy standpoint on behalf of the patients and family rights.</i></p> <p><i>Ms. O’llague-Dulka expressed her concerns: 1) felt that there is process issues-she felt that the board should be informed first before sending out any correspondence 2) role and function of the board-she felt that it is not the board’s job to do oversight and the board’s job is to address any issues to BHCS Admin.</i></p> <p><i>Sup. Steele felt that the board is entering into a very complicated situation to try to get in the middle of a contract negotiation with staff and she felt that any issues has to be</i></p>	<p><i>M/S/C Ms. Elias/Ms. Gifford 8 members favored 1 member abstained Motion passed.</i></p>

<i>ITEM</i>	<i>DISCUSSION</i>	<i>ACTION</i>
<p><i>Emergency Action Item: MHB request to have a meeting with BHCS Admin...(Cont.)</i></p>	<p><i>brought up at a certain place like Adult Committee. She expressed that she understands that the intent is all for the best care of the clients and the board has every right to address to the Mental Health Director any issues that are inappropriate or any circumstances that the board are unhappy with. She acknowledged that there is a need to hold John George accountable. She stated that the intent, the frustration and the anger is all appropriate but the board has to be careful on how to move forward with their concern.</i></p> <p><i>Ms. Jones stated that as a family member and a consumer, she is affected by all the issues happening at John George; as a board member, she would like the board to have a commitment to its community and it's a big concern for her to see things work out at John George.</i></p> <p><i>Mr. Koiles stated that the pre-negotiation meeting will serve as a learning experience for the board to be informed on what is going on and to be able to ask questions/address concerns that could be resolved in the meeting.</i></p> <p><i>Mr. Sodhi suggested to have a running list of issues or concerns.</i></p> <p><i>Ms. Elias felt that the board has a finite knowledge about John George and she would like to have a deeper and more meaningful conversation with BHCS Admin.</i></p> <p><i>Sup. Steele suggested using a different word instead of "pre-negotiation" to just ask for a meeting to clarify all concerns that the board has, list all the issues, state what kind of outcomes the board expect and then may be bring back recommendations to the Adult Committee.</i></p> <p><i>Dr. Thomas stated that working together with the MHB is extremely important to hold John George accountable.</i></p> <p><i>Sup. Steele made a substitute motion to take out the "pre-negotiation" and change it to request for an urgent meeting with BHCS Admin around issues on John George and other interested parties are welcome to the meeting.</i></p> <p><i>Ms. Elias felt that it's a great step forward to be working with BHCS Admin. around issues concerning John George.</i></p>	<p><i>M/S/C Sup. Steele/ Ms. Gifford All members favored Substitute motion passed</i></p>
<p><b><i>The rest of the agenda items were tabled.</i></b></p>		

*Meeting was adjourned at 2:20 pm*