I. ACTIVITIES

- **Collaborations**
  1. Actively participated as a member of the Mental Health Coalition.
  2. Actively participated in the newly formed MHSA Consolidated Planning Advisory Workgroup (CPAW).
  3. Worked with Mental Health Administration to assure that the community be kept informed about the budget cuts and their impact.
  4. Formed the MHC-CPAW Capital Facilities/Information Technology Workgroup to analyze options and alternatives for MHSA Capital Facilities funds and bring back recommendations to Mental Health Administration and the Health Services Department.
  5. Actively participated in the Hospital Community Forum.
  6. Actively participated in the newly formed Healthcare Partnership at CCRMC on an ad hoc basis.
  7. Invited National Alliance on Mental Illness-Contra Costa to present monthly reports at the MHC meetings.
  8. Held two Mental Health Commission Planning Meetings and began work on updating Bylaws.
  9. As family community stakeholders, two commissioners, participated in the Kaizen Event at CCRMC as part of the Lean Management effort.
  10. Ongoing collaborative efforts with Health Services Division including Director Dr. William Walker/staff and Mental Health Director Donna Wigand/staff.

- **Actions Related to Areas of Concern**
  1. Wrote a letter to Sheriff Warren Rupf in support of the Behavioral Health Court grant request.
  3. Heard report on The Medical Component in Transforming to a Recovery Oriented System and Supporting Both Consumers and Family Members by Dr. Johanna Ferman.
  4. Formed the following Workgroups: Quality of Care and Quality of Life, Diversity and Recruitment, Bylaws and Capital Facilities & Projects.
  5. Advocated for MHSA funded open positions to be filled as soon as possible working with MHA and CAO office.
  6. Advocated against the closure of beds in CCRMC Ward 4C.
  7. Wrote a letter to BOS regarding the proposed PHF and concerns about the stakeholder process.
  10. Appointed a Commissioner to attend the CCC Transit Authority Operations and Scheduling Committee meetings and provide updates on transportation issues.
  12. Wrote a letter to key County administrators taking a position against Prop 1E.
  13. Wrote a letter to County legislators taking a position against 2009 budget cuts.
  14. Commissioners attended BOS Finance and Family and Human Services committee meetings.

- **Site Visits / Events**
  1. Received the “May is Mental Health Month” Proclamation from the Board of Supervisors
  2. Received “October 12-16, 2009 is Mental Illness Awareness Week” Proclamation from the Board of Supervisors
  3. Chair attended the CALMHBC/CIMH meeting/training.
  4. Attended the following open houses: The Clubhouse, Mental Health Consumer Concerns, and Human Services Alliances of Contra Costa.
  5. Attended the Mental Health Consumer Concerns Holiday party.
  6. Joint visit with Supv. Gioia to the Mental Health Consumer Concerns West County Wellness Center.
• Governance
  2. Presided over Public Hearings regarding MHSA Draft Component Plans.
  4. Held Special Meeting to hear community input on MHSA Capital Facilities/IT Component.
  5. MHC Capital Facilities & Projects Workgroup met with Supervisors Glover and Ulukeman.

II. ACCOMPLISHMENTS
  1. Saved psychiatric beds from being closed in Ward 4C at CCRMC.
  2. Worked to fill vacant Commission seats by visiting MHCC Wellness Centers and encouraging consumer participation.
  3. Worked to fill vacant Commission seats with specific attention to increase racial and cultural diversity.
  4. Specific outreach to staff at mental health clinics, CCRMC, Detention, MHA, County administrative staff and County line staff through a Capital Facilities & Projects Workgroup Needs Assessment Survey.
  5. Vice-Chair invited, as community family stakeholder, to join Dr. William Walker, HS Director and Anna Roth, CEO CCRMC at BOS presentation.

III. ATTENDANCE / REPRESENTATION
A quorum was achieved at all of the scheduled meetings of the Mental Health Commission in 2009. The following individuals served on the Commission in 2009:

- Clare Beckner, District IV, Family Member F/Caucasian Res. 8/2009 Attended 7/7
- David Evans, District V, Member-at-Large M/Caucasian Res. 2/2009 Attended 0/2
- Art Honegger, District V, Family Member M/Caucasian App. 5/2008 Attended 8/11
- David Kahler, District IV, Member-at-Large M/Caucasian App. 4/2000 Attended 11/11
- Peter A. Mantas, District III, Family Member M/Caucasian App. 10/2008 Attended 8/11
- Carole McKindley-Alvarez, Member-at-Large F/African-American App. 8/2009 Attended 2/4
- Jacque McLoughlin, District II, Family Member F/Caucasian Res. 1/2009 Attended 1/1
- Bielle Moore, District III, Member-at-Large F/Caucasian App. 11/2008 Attended 7/11
- Colette O’Keeffe, District IV, Consumer F/Caucasian App. 10/2008 Attended 11/11
- Floyd Overby, District II, Family Member M/Caucasian App. 5/2009 Attended 7/7
- Anne Reed, District II, Member-At-Large F/Caucasian App. 1/2009 Attended 7/7
- Connie Tolleson, District V, Consumer F/Caucasian Res. 4/2009 Attended 1/4
- Sam Yoshioka, District IV, Family Member M/Asian-American App. 9/209/2009 Attended 3/3

Board of Supervisors Representative to the Mental Health Commission:
Supv. Mary N. Piepho
Attended 3/11

Vacancies on the Commission (3)
District I: Consumer District V: Consumer District V: Member-At-Large

IV. TRAINING / CERTIFICATION
• Welcomed 5 new Commissioners
• Annual Advisory Body Training

V. PROPOSED WORK PLAN / OBJECTIVES FOR 2010
  1. PARTICIPATE in the development of programs at the site set aside for a PHF (psychiatric health facility) and/or other services/programs. This would include but not be limited to:
    a. Participating in the planning process
    b. Supporting efforts that improve post-discharge planning and timely coordination of care.
    c. Monitoring to ensure inpatient needs are being met.
  2. PARTICIPATE in the planning of efforts that address the gaps in service, quality of care and support CCMH in its attempts to secure non-General Fund dollars.
  3. OTHER PRIORITY AREAS, to be addressed when possible:
    a. Reopen CSU Admissions.
    b. The integration of physical health into MH services.
    c. Care coordination for “meds only” consumers not receiving case management services.
  4. IMPROVE MHC’s recruiting process to improve its cultural, racial and ethnic diversity.
  5. GOVERNANCE
    a. Preside over Public Hearings regarding MHSA Draft Component Plans
    b. Complete revision of Mental Health Commission Bylaws
    c. Review and comment on the County’s Performance Outcome Data Report and report the findings to Board of Supervisors and California Mental Health Planning Council.