# JUSTICE SYSTEMS COMMITTEE  
## MONTHLY MEETING MINUTES  
### July 24, 2018

<table>
<thead>
<tr>
<th>Agenda Item / Discussion</th>
<th>Action / Follow-Up</th>
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<tbody>
<tr>
<td><strong>I. Call to Order / Introductions</strong></td>
<td>EA Transfer recording to computer</td>
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<tr>
<td>Commission Chair Diana MaKieve call to meeting to order @2:01pm</td>
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<td><strong>Members Present:</strong></td>
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<td>Chair- Diana MaKieve, District II</td>
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<td>Vice Chair- Gina Swirsding, District I</td>
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<td>Duane Chapman, Vice Chair for MHC, District I</td>
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<td>Geri Stern, District I</td>
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<td><strong>Commissioners Absent:</strong></td>
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<td>Julie Ann Neward, District III</td>
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<td><strong>Other Attendees:</strong></td>
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<tr>
<td>Roberto Vargas, Director of Safety and Performance Improvement, CCHS/CCRMC</td>
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<td>David Seidner, Chief for Detention Mental Health</td>
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<td>Liza A. Molina-Huntley, EA- MHC</td>
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<td><strong>II. PUBLIC COMMENTS</strong></td>
<td>none</td>
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<td><strong>III. COMMISSIONERS COMMENTS</strong></td>
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<td>• Gina- concerned about growing numbers of homelessness, throughout Contra Costa County, and California</td>
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<td>• Geri- the Sheriff’s Office returned her phone call, regarding Assisted Outpatient Treatment (AOT) program referrals.</td>
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<td><strong>IV. Chair ANNOUNCEMENTS/COMMENTS</strong></td>
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<td>• Diana- interested in the Racial Justice Task Force, will be submitting their recommendations and findings to the Board of Supervisors (BOS). Reached out to Lara DeLaney, Acting Director, Office of Reentry &amp; Justice, to request a presentation, for the next meeting on August 28. Donte Blue, the Deputy Director, will be presenting at the next meeting.</td>
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<td>• Attended two meetings, pertaining to homelessness.</td>
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<td><strong>V. Approval of May 22, 2018 minutes.</strong></td>
<td>Agendas and minutes can be found at: <a href="https://cchealth.org/mentalhealth/mhc/agendas-minutes.php">https://cchealth.org/mentalhealth/mhc/agendas-minutes.php</a></td>
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<td>• Duane Chapman moved to motion, second by Gina Swirsding, to approve the minutes.</td>
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<td>• Vote: 4-0-0</td>
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<td>Ayes: Gina Swirsding, Diana MaKieve, Geri Stern and Duane Chapman</td>
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<td>Abstain: none</td>
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<td>Absent: Julie Ann Neward</td>
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<td><strong>VI. RECEIVE presentation from the following: David Seidner, LMFT, CCHP-MH, Mental Health Program Chief for Detention Mental Health Services and Roberto Vargas, Director of Safety and Performance Improvement, CCHS/CCRMC</strong></td>
<td>Value Stream Mapping (VSM) and Rapid Improvement (RI) events can be viewed online at: <a href="https://cchealth.org/video/">https://cchealth.org/video/</a></td>
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<td>• Roberto- specializes in improvement and product managing, identifying problem areas and supporting team work and building system infrastructure to advance forward. Initiated work, collaborating with various departments, to align priorities and put patients at the center of all improvement work, by using “lean management”. A methodology to do product management and get things done.</td>
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<td>• August 28, 2017- was the first session, towards improvement- the value stream mapping event (VSM). A multi-disciplinary team, spanning across the county, including different divisions of stakeholders involved in the entire process. Many people had high interest in the progress of the process. The VSM was the opportunity to get a good understanding of what is the current</td>
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state of mental health care being delivered at detention facilities. Most of the time was focused on the Martinez detention facilities; the other facilities were included and visited as well during the event. The idea is, to understand the current process and have a share understanding, of impediments to achieving tasks. As a team, collectively look towards the future and what needs to get done to achieve the goals, looking at the current state and the future state. The VSM is a one week session, the report out was on September 1, inviting community partners.

- David- all presentations were filmed and on the website for viewing at: https://cchealth.org/video/ . During the VSM event, time observations are conducted of each process and every process is logged. Measurements must be taken, before they can be changed.

- Roberto- the goal is: “provide high quality care for inmates (patients) that addresses all mental, physical and psycho-social needs; and is timely, trauma informed, culturally sensitive and respectful.” The first week was to figure out the current and future state. The team breaks down processes into small pieces, called Rapid Improvement Events (RI). The RI event is the series of testing and interventions. Starting with “intake,” the initiation of the process-appropriate screening, enough supplies, knowing the workflow between different disciplines. There were a total of four different topics: intake, emergent mental health, specialty care/access, and pre T release/reentry. Each RI event is one week long and the videos are also available on the same website for viewing. After the events, the focus is sustainability of the changes implemented and sustain continue learning: teams continue to meet, after the event, improvement is ongoing and there is oversight continuing to measure successes and failures. Staff assessment was conducted and noted that additional staff is required to complete the workflow and redesign the team.

- David: was part of a team, that looked at the process of a different area, (nursing) and observed the workflow in the area. Some considerations were to reorganize the space so that it is efficient and to minimize waste. The patient is at the center of the entire process, beneficial to the patient. Some activities are system centered, beneficial to the system. There are three parts to moving forward: staff analysis/model (more staff is required), optimize and increase efficiency in the electronic health record (EHR), and facility upgrades/basic improvements. Optimizing the EHR is important, to be paperless. Martinez detention facility is outdated, as well as updated equipment needed to complete work properly. New work stations will be completed, soon. Staff, clinical staff and labor is one aspect. Detention is a large system; all three jails can hold approximately 1600 people, averaging 1450 to 1550. Many have health and mental health care needs. Some patients entering the system can be under extreme distress, entering detention can heighten symptoms, and we want to make sure that patients obtain the care that they need, while in the facility. Wanted for the patients and staff, at detention mental health, is privacy, dignity and safety. The mission is to provide overall health care to patients, regardless of their current legal status.

- Duane- what data/statistics does the detention mental health department keep?

- David- during the improvement events, the metrics becomes incredibly important, to be able to measure the improvements, from the changes being implemented. Some of the data available is- how many patients are receiving our service. We are in the process of building our reports, to capture data. One of the captured data, during the RI event, was release times. Release times are primarily in the morning; the data captured the peak release time is Thursday morning at 6am and at 7pm. This is important data, to organize
staffing needs, build programs and collaborations, to provide better services, post-release. Building the resources, for the patients. Our job is to open up the process, for patient centered care. The improvement work, Value Stream Mapping and Rapid Improvement events, started in the summer of 2017. The ongoing improvement group is called: “Detention Redesign”. The group that I am working with is called: “Structure Activities”. One of the collaborations with Behavioral Health, hospitals, clinics and detention is presently, a Community Support Worker, from the Forensics program, who is certified to do Wellness, Recovery, Action Plan (WRAP) groups and comes in every Friday, to co-lead WRAP groups with one of our clinicians at the Martinez detention facility. This is an amazing collaboration, between divisions. The WRAP groups started in January of 2018, and there has been two graduations (8-10 week program), graduating six to seven patients, per group. The WRAP books are $10 a piece, and the OCE Program Coordinator Jennifer Tuipulotu, was able to give the books to detention for their WRAP program at no cost to detention. Patients are now able to be shared, across systems, so post-release communication will be easier, because of EHR, between detention and clinics.

- (A copy of the OCE newsletter was provided at the meeting. To receive copies contact the Office of Consumer Empowerment (OCE) offices at: 1330 Arnold Drive in Martinez, or call (925) 957-5105, to receive a copy).
- David- The data infrastructure is developing and by improving our data resources, we will be able to advocate better, to meet patient’s needs. Detention does not bill for services.
- Duane- suggested that each Board of Supervisor’s office obtain copies of the newsletter, City office and police departments. He will reach out to the office to obtain copies of the newsletter.
- Roberto- A “business intelligence” team is responsible for building reports for the improvement process, to help guide through the improvement work. The reports are built to better understand the improvements being made, and prioritize the data, to optimize the delivery of care. In the process of building, “dashboards,” to be able to access important reports and data, quickly.
- Diana- Juvenile detention is utilizing interns, to assist with the caseload. Can interns be used in the adult mental health detention system?
- David- we are strategizing, to bring more staff on board, being creative in the process.
- Duane- what types of services are offered to ICE inmates, is Assisted Outpatient Treatment (AOT) offered? Does AOT have capacity to receive non-English speaking patients, or accept non-documented individuals?
- David- Federal inmates (females) have access to mental health services and may meet with mental health clinicians or psychiatrist. Male inmates were not receiving mental health services. Deferred AOT question to the AOT program manager, Dr. Marie Scannell.

VII. RECEIVE reports and update attendance participation at advisory bodies as agreed:

- Diana- Two objectives for participating in outside meetings, for the Justice Systems Committee: 1) awareness and to inform what is happening in the county, 2) how does it affect our consumers/clients in the county? 3) Finding value in serving as a Commissioner (personal accomplishment) find a way to do something important and valuable through the Justice Systems Committee. Finding a common goal, on why we volunteered to serve in the first place.
- There is a lot of change going on in the county, and we should take interest in: diversion program in Antioch, Community Corrections Partnership (meets quarterly, next meeting on September 7) department

Link to Homelessness webpage: [https://cchealth.org/healthcare-for-homeless/](https://cchealth.org/healthcare-for-homeless/)
heads, attend the meeting; and discuss funding, assessment tools to
determine the severity of the crime, risk of the individual fleeing, a high-
level view of what is coming and the work being done. The next steps – a
crime safety assessment, the criteria for staying in jail, or released until
trial. Not using the crime, to determine the risk.

- The Juvenile Justice meeting, a judge participates, part of the judicial
counsel, involved in training and communicating new information. The
groups are really dedicated to helping the kids and reduce recidivism.
- The Council on Homelessness is similar to the MHC: micro-housing and
Point in Time (PIT)
- Continuum of Care: Director of H3, Lavonna Martin and staff, chair the
meeting. Discussed the equity in homelessness in Contra Costa County,
the trend is that homelessness is increasing statewide: where are the
highest levels of homelessness, what are the causes of homelessness,
how do we help to break the trends in homelessness (approximately 200
attendees). Definition, stated at meeting: “help is a state of complete
physical, mental and social well-being and not merely the absence of
disease or infirmity.” It is more about the whole person. During the
meeting, attendees were set into groups to discuss what can be done to
make a difference?

- Due to the high costs of housing, and low salaries, more and more are
staying at home or renting, in groups. People that do not have a safety
net are homeless. We need to work together to find ways to make
housing a priority. Foster care kids do not have a safety net.
- Would like a representative from MHET, to present at the September 25
meeting, to educate the Committee, pertaining to the training provided
officers answering to 5150 calls
- Note: without accurate data, it is difficult to determine needs.
- Geri- contacted the Sheriff’s office to learn more about the training that
officers are receiving, for crisis intervention. Attended the AOT meeting,
representing the MHC. Doug co-chaired the meeting. Would like to
provide to officers, responding to a 5150 call, a tool to handout to
families.

i. Community Corrections Partnership- the next meeting will be on 9/7/18
at: 50 Douglas Drive in Martinez (Sequoia room)

ii. Juvenile Justice/Delinquency Prevention Commission meeting- (First
Wednesday of every month), September 5 from 6:30pm-7:30pm, at:
Walnut Creek Superior Court, 2nd floor Dept. 5, 640 Ygnacio Valley Rd,
Walnut Creek

iii. Council on Homelessness meeting will be on Thursday, September 6,
1pm to 3pm, at: 50 Douglass Drive, Martinez, in the Sequoia room.

iv. Continuum of Care- next meeting, Friday October 19 (**check website)

v. Assisted Outpatient Treatment Workgroup meeting will be on Friday,
October 12, from 10am to 11:30am, at 50 Douglass Drive, in Martinez in
the Sequoia room.

VIII. DISCUSS agenda for August 28, 2018 meeting:

- The main focus for the agenda will be the Racial Justice Task Force
recommendations, presented to the BOS- by Deputy Director, Donte
Blue
- Invite representative to discuss the above
- The Committee has agreed to continue to attend meetings to learn
more about mental health services, in detention, probation and how
law enforcement and consumers relate.

*September 24 meeting:
MHET representatives request to present
and provide updates, sent to- Dr. Jan
Cobaleda-Kegler (pending confirmation)
**October 23 meeting:
Crisis Intervention Team
(contact Dr. Jan Cobaleda-Kegler, for
scheduling)

VIII. Adjourned Meeting at 3:40pm