

Consolidated Planning and Advisory Workgroup (CPAW)

Thursday, June 2, 2016

3pm – 6pm

Location: 2425 Bisso Lane, First Floor Conference Room, Concord, CA 94520



Members attending: Dave Kahler, Jennifer Tuipulotu, Sheri Richards, Doug Dunn, Sam Yoshioka, Matt Wilson, Roberto Roman, Jenny Robbins, Molly Hamaker, Lauren Rettagliata, Ryan Nestman

Staff attending: Matthew Luu, Stephanie Chenard, Robert Thigpen, Isabelle Kirske, Brett Beaver, Mark Marolt, Jan Cobaleda-Kegler, Ellie Shirgul, Steve Polivka, Elena Eagan, Vicki White, Bob Thigpen, Betsy Orme

Public Participants: Bessie Sagaiga, Anthony Reed, Tanya Arnold, Glen Arnold, Dana Matteri, Carwen Spencer, Lori Pryor, James Ross, Will Taylor, Serena Neighbors, Melinda O’Day, Gigi Crowder, Sara Marsh,

Facilitator: Warren Hayes

Recorder: Lisa Cabral

Staff Support: Warren Hayes

Excused from Meeting: Susan Medlin, Karen Smith, Will McGarvey, Jackie Lerman, Lisa Bruce, Kathi McLaughlin, Courtney Cummings,

Absent from Meeting: Kimberly Martell, Duane Chapman, Maude DeVictor, Ashley Baughman, Gina Swirsding, Connie Steers, Kimberly Krisch, Tom Gilbert,

TOPIC	ISSUE/CONCLUSION	ACTION/RECOMMENDATION	PARTY RESPONSIBLE
1. Welcome <ul style="list-style-type: none">• Call to Order• Introductions• Working Agreement• Announcements• Finalize Minutes	<ul style="list-style-type: none">• Introductions made.• Warren Hayes reviewed CPAW’s Working Agreement.• Approved May notes with corrections• Little Hoover Commission was reviewing MHSAs and the initiative called “No Place like Home” which the commission is trying to add to the	Information Minutes approved. Will be posted to MHSAs CPAW website.	Warren Hayes Lisa Cabral to post minutes.

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	governor's budget.		
<p>2. Behavioral Health Issues</p> <ul style="list-style-type: none"> • New CSW's on Transition Team 	<p>Community Support Worker's on Transition Team – Vickie White and Mark Marolt</p> <ul style="list-style-type: none"> • Two CSW positions have been filled at PES and will report to the Transition Team. • Referrals are received from PES. • CSWs work with individuals and their families to help them in their recovery. • CSWs go with and help individuals in getting needed service, such as going to DMV to get ID. • Would like to be able to track family involvement but not sure of how to track? • Solicited feedback on needs at PES from Dr. Girard when the positions were being hired for. <p>Vocational Services Program Coordinator - Elena Eagan,</p> <ul style="list-style-type: none"> • Began in Vocational Services in 2000. • Funding is provided to get individuals return to work. • Vocational Services are divided into Teams to receive referrals from East, Central and West County clinics, as well as other referral sources, such as crisis residential programs. Currently reaching out to the homeless shelters. <p>Tapestry Update</p>		Matthew Luu

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	<ul style="list-style-type: none"> • Tapestry has been working smoothly within the Access Unit <p>e-Prescribing</p> <ul style="list-style-type: none"> • West County was the pilot clinic to use e-Prescribing and problems that have arisen are currently being fixed. <p>Coaching to Wellness</p> <ul style="list-style-type: none"> • CSW working with a nurse to reduce the no-show rate. • Began in East Adult clinic and will be expanding to Central Adult clinic <p>MHSIP surveys</p> <ul style="list-style-type: none"> • Completed during the month of May to provide feedback on the system and how to improve. Once the information has been analyzed the information will be shared with CPAW. <p>Welcoming Committee</p> <ul style="list-style-type: none"> • Created to improve a welcoming environment for consumers at mental health clinics. • Committee is creating a folder for consumers who are entering the clinic for the first time. • Adam Down to be invited to CPAW in the future to present draft of folder contents for feedback. 		
3. Discussion and Action	<ul style="list-style-type: none"> • Statewide agencies have created a 		

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<p>Recommendation on Children's 4D proposal</p>	<p>“white paper” regarding the need for children’s inpatient beds.</p> <ul style="list-style-type: none"> • Children’s committee is creating a letter of recommendation to bring to CPAW for endorsement for a Children’s Inpatient Unit at 4D. 		
<p>4. CPAW Committee Reports</p> <ul style="list-style-type: none"> • Membership • Innovation • Systems of Care 	<p>Membership</p> <ul style="list-style-type: none"> • Did not meet for the month of May and have not received new applications <p>Innovation</p> <ul style="list-style-type: none"> • Concept submission deadline is June 30th. • Reviewed protocol and review documents used for review of Innovation submissions. • Committee members have signed an impartiality statement. • Warren to meet with executive staff for their perspective regarding public mental health needs. <p>Systems of Care</p> <ul style="list-style-type: none"> • Working on new PEI forms to record data beginning July 1st • Currently having a discussion regarding WET and Capital Facilities. • Next meeting is next Wednesday, June 8th. • Continue to review EHR, Miller Wellness Center, and Transportation 		<p>Committee Representatives</p>

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	proposal and will begin to review the 4D proposal.		
5. BHS Committee Dialogue <ul style="list-style-type: none"> • Social Inclusion • Housing and Homeless Services • Alcohol and Other Drug Services • Children, Teens and Young Adult • Adults • Older Adults 	<ul style="list-style-type: none"> • Social Inclusion – resumed planning, development and implementation of new campaign “Bridging the Gaps”. Feedback from committee members to provide support for social inclusion ambassadors who would provide outreach to outdoor events, such as farmer’s markets and health fairs. • Brainstormed for new activities for the rest of the year. • Photovoice class has been completed at Recovery Innovations on May 10th. May 27th displayed artwork at friends/family event at Recovery Innovations. • Photovoice class began April 26th and is currently in its 7th week at Hume Center in Pittsburg. • Photovoice will begin July 8th at Family Courtyard in West County. • WREACH is currently preparing individuals to speak at Crisis Intervention Training meeting with law enforcement. WREACH subcommittee to reach out to CBO’s. The next WREACH committee will be on June 23rd at 1:30-3:30pm at Bisso. • Next Social Inclusion meeting will be on Thursday, June 9th from 1pm-3pm. 		Committee Representatives

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	<ul style="list-style-type: none"> • Housing and Homeless Services – Last meeting held on May 3rd. The first meeting focused on introduced housing, housing models and how to access housing and gaining input from attendees. Last Meeting focused on funding. If you have agenda items for the July meeting, please contact Jenny Robbins. The next BH Housing Meeting will be on July 5th from 1-3pm. • Alcohol and Other Drug Services – AOD Advisory Meeting on May 25th but did not have a quorum. BOS to support or oppose the legalization of marijuana. Next meeting will be on June 22nd. • Children, Teens, and Young Adult – Currently working on a mission statement and finalize mission statement at the June 9th meeting. Representatives from Riverview Middle school to present findings of surveys of bullying in schools on the July 14th. • Adults –Betsy Orme has been designated as the staff support for the Adult Committee. First meeting was held on May 24th at Mental Health Administration. • Many individuals attended the meeting with a wide diversity of 		

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	<p>representation. Large amount of interested in TAY and coordination of care with TAY. Many ideas were shared for the possibility of an Innovation concept submission.</p> <ul style="list-style-type: none"> • Older Adults-Next meeting on June 22nd. Concentrating on meeting deadline for the innovative concept proposal. Looking to create innovation proposal to decrease gaps for older adults within the county mental health system. 		
<p>6. Stakeholder Dialogue</p> <ul style="list-style-type: none"> • Mental Health Commission • Behavioral Health Care Partnership • Other Stakeholder Bodies 	<ul style="list-style-type: none"> • Mental Health Commission-Will be presenting a budget crisis report to be submitted to the Board of Supervisors. • Anka requesting MHSA funding to support the Don Brown shelter. MHSA/Finance meeting had Lavonna Martin report on CALFHA. • Behavioral Healthcare Partnership-PES CSW's are up and running. Dr. Kristine Girard's last day with the county is today. 		Committee Members
Break (flexibly applied)			
<p>7. Innovation</p> <ul style="list-style-type: none"> • Addressing questions posed at the April CPAW Meeting – what do we need to know prior to proposal submission 	See attached document		Warren Hayes
8. Capital Facilities/IT	See attached document		Warren Hayes

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<ul style="list-style-type: none"> Addressing questions posed at the April CPAW meeting 			
9. Public Comment, Announcements	No public comments/announcements		Meeting Attendees
10. Review of Meeting	<ul style="list-style-type: none"> If you do not like how CPAW meeting is run, attend the steering meeting. Liked the meeting is substantive and focused. This meeting encouraged individuals to ask questions. This is a very inclusive stakeholder process. Need to increase attendance among CPAW members. 		Meeting Attendees
11. Next CPAW, Steering, Membership Meetings	CPAW meeting is Thursday, July 7, 2016 from 3-6pm with orientation from 2-3pm. Steering will meet on June 16th from 3-5pm. Membership will meet on June 20th from 3-5 pm.		

Capital Facilities/Information Technology Q & A

Q. How are things decided here, and who decides them?

A. Stakeholders collectively provide input and then advise the Behavioral Director, Finance, CAO Office, and the Board of Supervisors, who ultimately decide what is to be authorized.

Q. Who decides the percentage of unspent funds to be moved to the CF/TN component?

A. It is recommended that Counties should have one year of combined unspent funds from previous years and prudent reserve in order to be able to sustain commitments during a prolonged downturn in the state economy. The percentage of unspent funds to be moved to the CF/TN is decided by the process outlined in the above answer to the first question.

Q. What is the status of the mental health electronic record project, and will they run out of money before it is finished?

A. Yes, the mental health electronic record will run out of MHS Information Technology component funding before all of the objectives are met. The status of electronic records system is still being determined during this first pilot stage before the scope and budget for phase II is considered.

Q. Can stakeholders say no if the County needs more MHS funds to complete the electronic mental health record system?

A. Yes, stakeholders can provide input indicating that they advise against utilizing more MHS funds.

Q. For CF/TN projects, what should be the performance deliverables, outcomes, and how and with what regularity should this be communicated to stakeholders?

A. The process is for County staff to bring to CPAW and to the System of Care committee for discussion and feedback to provide recommendations for performance deliverables, outcomes and a time line for communication.

Q. How can we ensure CF/TN funds spent continue to support mental health services, and can we get the money back if it doesn't?

A. The legal way to receive money back is by conducting an audit. The Department of Health Care Services conducts a triennial audit and determines if MHS funds have been misspent and require the county to transfer back those funds that have been inappropriately charged to the MHS cost center.

Q. Can we re-visit the psychiatric health facility proposal that was not funded the last time CF/TN projects were proposed?

A. Yes, the psychiatric health facility proposal can be re-visited.

Q. Can CF/TN funds be used to:

- **Support a centralized resource for training, education and support of family members of mental health consumers?**

Yes, but this support program might better come from the Workforce Education and Training, Community Services and Supports or Innovation components.

- **Enable the PSP system to interface with Epic Tapestry?**

Yes, this is a needed component for billing and data management. PSP is the current mainframe used by mental health for billing purposes.

- **Pay one-time costs for establishing computer labs in programs capable, willing and appropriate to add this consumer service? How about other one time capital facility, information technology costs that enhance existing programs?**

Yes, paying one-time costs for computer labs. Yes, use of one-time CF/TN funds to enhance existing programs.

- **Upgrade existing computer systems?**

No, each county should have a separate cost center to upgrade computer systems, that is not MHSA funding. CF/TN funds are one-time funds.

- **Supply computers to consumers and family members as appropriately part of their treatment plan?**

That is a possibility. Again, CF/TN funding are for one-time funding. Support for computers and consumers using them is an ongoing cost, and needs to be solved.

- **Make current facilities earthquake safe?**

This a County operating reserve item, and should be funded outside MHSA.

- **Enable facilities to be Wi-Fi enabled?**

No

- **Retrofit ward 4D at CCRMC for mental health bed use?**

Yes, retrofit is possible as a one-time funded project, as the planned service is mental health.

- **Establish locked facilities?**

Yes, if it is a psychiatric hospital facility, institute for mental disease and skilled nursing facility, Capital Facilities one-time costs can be used for mental health service delivery

- **Establish shared housing units in each region?**

Yes

- **Augment innovation funding?**

Yes

- **Purchase property?**

Yes

- **Renovate non-County owned facilities?**

Yes

Q. What can't CF/TN funds be used for?

A. Items the county should be providing, essentially not purchasing non-MHSA related items.

Q. Can we concentrate on one region of the county at a time?

A. Yes

Q. Canada claims to not have a homeless problem. Can that be looked into?

A. Yes. However, the relation to preparation for a potential CF/TN project would need to be established in order to justify use of County staff time to research.

Q. What information do I need to take with me when I am participating in other stakeholder committee/workgroup meetings?

A. Share the Q&A information from the CPAW meeting back to individual committee meetings.

Q. Is there MHSA funding ear-marked for housing?

A. Yes, there is funding under the Community Services and Supports portion of MHSA.

Innovation Q & A

Q. What is innovative, how it is defined, and what are the criteria?

A. Innovative is new and a different pattern of service. The criteria are 1) Introducing a mental health practice or approach that is new to the overall mental health system. 2) Making a change to an existing practice in the field of mental health, including but not limited to application to a different population, or 3) Applying to the mental health system a promising community-driven practice or approach that has been successful in non-mental health contexts or settings.

Q. What are the rules as specified in the new regulations?

A. New innovative projects are time-limited (up to five years). Will need to look to see how long can we charge to the Innovation cost center. The regulations have changed regarding the tracking of outcomes that will need to be reported.

Q. Can a current innovative project be expanded with new innovation funding to serve another region or population?

A. Innovative projects requires us to learn something new.

Q. Can housing and alcohol and other drug services be funded with innovation funds?

A. Yes, if the Homeless or AOD services have integrated with mental health services.

Q. Are part-time employment, school participation, peer centers, services to those incarcerated, possible as innovative projects?

A. Innovative projects need to be community public mental health services.

Q. Can innovation funds be used to augment a new approach to an existing program?

A. Yes

Q. Could innovation funds fund an annual event rather than a service or program?

A. Yes.

Q. Could innovative projects be used to address first responders, such as faith based organizations?

A. Yes, by connecting community resources to public mental health.

Q. How does sustainability figure into the decision-making when considering a new innovative project?

A. MHSA funding is for up to five years and then the program has to address the issue of sustainability.

Q. Can a successful innovation project replace an unsuccessful project?

A. Yes. The county is responsible to back fill up to the 5% level of annual MHSA received by the County.

Q. Can we emphasize innovative projects that impact the whole system rather than small, specific populations?

A. Yes

Q. Could Innovative concepts be combined another concept?

A. Yes