

MHC/CPAW Capital Facilities Workgroup Meeting

Date: October 5, 2009, 6:30-8:30 p.m.

Location: Mental Health Consumer Concerns (MHCC)
2975 Treat Blvd., Bldg. C, Concord, CA 94518

Minutes – Approved 10/19/09

1. CALL TO ORDER/INTRODUCTIONS

The Workgroup meeting was called to order at 6:30 p.m. by Chairperson Teresa Pasquini.

Mental Health Commissioners Present:

Teresa Pasquini, District I-Chair
Annis Pereyra, District II
Anne Reed, District II

Attendees:

Sherry Bradley, CCMH
Karen Shuler, MHSA Communication Coordinator
Steven Marks, MHCC
Ryan Nestman, Consumer/Family Member
Cindy Staten, MHCC
Susan Medlin, CCMH
Dave Kahler, NAMI

Consolidated Planning Advisory Workgroup Members Present:

Brenda Crawford, CPAW
Susan Medlin, CPAW
Tony Sanders, CPAW

Absent: MH Commissioner Colette O’Keeffe
CPAW Member Kathi McLaughlin

2. PUBLIC COMMENT

Speaking as a member of the public, Mental Health Commissioner Dave Kahler distributed a memo to the Workgroup that outlined his concerns. He stated he wants to see an assertive timeline developed that would accommodate the pressures for using the 20 Allen site. He said it is the only property contiguous with the hospital and may be assigned to someone else if the timeline is not assertive. As a Commissioner, he said he would like to have the opportunity to vote on it before the December 31st deadline for acquiring the property.

3. ANNOUNCEMENTS

Teresa viewed “Minds on Edge” on PBS and found it riveting. It will be on TV again and is also available on the internet.

4. APPROVE OF THE MINUTES

- **ACTION: A motion was made by Annis Pereyra and seconded by Brenda Crawford to approve the Minutes from the September 24, 2009 MHC/CPAW Capital Facilities Workgroup meeting. Tony questioned the costs of electronic records and the percentages as stated in the Minutes. He asked if the breakdown will be on this or a future agenda. Teresa said it would be covered on this agenda. The Minutes were approved as presented.**

5. CHAIR COMMENTS

- A. Discuss any procedural concerns for future meetings. Report on conversation with Dorothy Sansoe. Because of confusion over the meeting process, Teresa met with Senior Deputy CAO Dorothy Sansoe. Teresa explained that the Mental Health Commission has been meeting in workgroups over the past year, and no

noticing is required so long as a quorum is not present. But in order to get the information out to as many people as possible, Teresa stated she would like all future meetings to be noticed, if possible. There was discussion as to having meetings on set days. Teresa said she would like more clarification regarding the Brown Act requirements.

➤ **Recommendation: Anne suggested taking the matter of noticing the meeting to the full Commission for a final decision. There was consensus on taking this matter to the Commission.**

B. Discuss and agree on reporting procedure to MHC and CPAW.

Teresa wants this group to make the decision as to how to report back to the MHC and to CPAW. Ryan suggested that one person would make the report to both groups. Who would be eligible to give the report was discussed. Concern over conflict of interest and maintaining a balance was expressed. Brenda suggested that a CPAW member report to CPAW (Brenda volunteered) and that a Commissioner report to the MHC. Annis suggested having a collaborative effort between a Commissioner and a CPAW member.

➤ **ACTION: Anne made a motion that Brenda, Ryan and Annis work together to compile a report to the MHC and CPAW and present it each month. Annis seconded the motion. Motion passed unanimously.**

➤ **Recommendation: Brenda, Ryan and Annis will work together to compile a report to the MHC and CPAW and present it each month. The Workgroup's Minutes will go out to both the MHC and CPAW.**

C. Invite new attendees to state their personal goals for the outcome of this process.

Tony Sanders: To ensure that as many stakeholders as possible are included in the process. Groups have been identified as being underserved, and would I like to take that into consideration.

Ryan Nestman: It's about knowledge for me – and finding resources for my family and me.

Anne Reed: I want to be part of this workgroup to ensure we don't miss opportunities to create the type of services that will improve life for the consumers.

D. Report any developments discussed at 10/1/09 CPAW.

None were reported.

6. QUESTIONNAIRE/SURVEY DRAFT

A. Background to the Questionnaire: Review, discuss and make final recommendation to be presented to MHC on 10/8/09.

We wanted the Questionnaire to be in a language people could relate to, and not just showing gaps in the services assessment, but one showing what could be done with Capital Facilities Funds. Note: Discussion of the Background to the Questionnaire immediately flowed into a discussion that included suggestions, concerns, objections and recommendations (listed in B.)

B. Questionnaire/Survey Draft: Review, Discuss and make final recommendations to be presented to MHC on 10/8/09

Questions/Suggestions:

- Tony asked where stakeholder groups that have been surveyed would be listed?
- Teresa said the information is included in the data compilation. This process was about getting new data and this would address anything new that has come up.
- Susan suggested listing "additional interests" under #1 ("My experience with Contra Costa Mental Health is based on:")
- Annis suggested placing "previous stakeholder participation" under #1("My experience...")
- Sherry said a suggestion had been made to add "Check all that apply" to each question.
- Tony suggested adding the best practices categories under "Gender".
- A suggestion was made to add "Sexual orientation" under "Gender" and above "Age"
- It was decided it would be a good idea to check with the specific State listings and with Human Resources to

see how to correctly list items regarding gender.

- Anne suggested not just using the word “Other”.
 - Anne said there was no indication of polling for economic or location information.
 - Brenda stated we are looking to get a basic snapshot of what had changed over the 5-year period since the previous surveys. What services are needed now so far as Capital Facilities is concerned -- how should this money be used – are there any new ideas? She wanted the focus on where the services should be located.
- After discovering duplicated numbers on the Questionnaire that confused the review process, it was decided to refer to an updated copy of the Needs Assessment Survey, Sherry distributed corrected copies (with tracking changes).
- Annis asked to remove the “Restrictive settings” bullet (second to last bullet under “How should an MHSA funded Capital Facility be used?”)
 - Under the same category, it was suggested that The Clubhouse be added as a bullet.
 - Under the same category, it was suggested changing “co-occurring” to “dual diagnosis”
 - Add “mental health and other integrated services”
 - Add “psychiatric recovery centers”
 - Pull out mental health and substance abuse -- separate dual diagnosis – it could include counseling
 - Instead of using the acronym “TAY”, say “Young adults”
 - Anne Reed said the information is too specific. It needs to be information that has value.
 - Susan expressed the opinion that most consumers would not fill it out.
 - The group as a whole liked Question #4 – “Which of the following needs, identified in MHSA planning processes, community forums, focus groups, do you feel are most important?” It was felt that we have to rank it to give it value.
 - Anne said make #1 (“How should an MHSA funded Capital Facility be used”): “If you had the money to build a building for mental health services, rank these in the order you would put them.”
 - Teresa referred to the component Exhibit 3, saying it answers the Charge given to the Workgroup at the 9/3/09 CPAW meeting. It gave us an idea of what we were going to end up with. We need to review the answers and alternatives. Now we need to find the IT needs.
 - In asking for suggestions, it needs to be clear we cannot include housing.
 - Step 1: The questionnaire will address what we want
Step 2: What we can have.
 - Ryan suggested referring people to the website for more detailed answers.
 - Sherry said the research suggested we should ask people to join a focus group to give and get more information
 - Teresa said that as a group we decided we would not be dictated by an arbitrary time, meaning the 12/31/09 deadline was not going to run the show. This could be changed at the MHC meeting.
 - Annis suggested sending out the Questionnaire and set up focus groups so the dates would already be set.
 - Tony suggested placing on the Questionnaire ideas that have already been suggested, and tell what the money could be used for.
 - Susan said she wants to make sure each individual client is reached.
 - Brenda said one of the reasons we're doing this is there's a perceived/or in reality notion the community was not reached out to. 20 Allen St. proposal was presented, but not other alternatives. She said we need to have a realistic time frame. How can we meet needs we say were not met previously without going into an in-depth procedure, thus costing more money.
 - Back to the Questionnaire, Susan said, we need to define “Crisis Residential Center”. She suggested “Voluntary alternatives to hospitalization”
 - Teresa said we just need to make an effort to reach as many as people as possible.

Sherry said she will copy summaries of all focus groups and community forums. Information will show if this where we still are today. Needs listed were:

- Housing
 - Education
 - Societal development
 - Transportation
-
- Brenda said we need to integrate the focus groups into the process.
 - Anne stated that we need to come to a general agreement about the survey and get it out and going
 - The opinion was restated that it needs to be written in common language
 - Anne stated that she can support the decision not to be driven by the 12/31 deadline so long as everyone understands that at some point they will look for someone else to buy the 20 Allen St. site.
 - It was asked how this survey helps us get to that process.
 - Teresa said that this was our goal to do this...to try a questionnaire.
 - Tony added the questionnaire was to include categories of types of facilities.
 - Brenda said that the way 20 Allen St. unfolded was a concern – its being centralized in Martinez – was this the best use of this money? So we started thinking about developing services in other parts of the county. Do we want to put it all in this 1 location -- what is the impact on other parts of the county? Is this the best model? The feeling is that it wasn't a participatory process.
 - Annis asked if there was a way to provide these services at areas throughout the county?
 - Susan said it needs to be near the hospital.
 - Teresa said she thinks there could be regional crisis centers.
 - Annis said there are other models -- such as Kaisers call center that diverts people to a crisis center nearest to them -- why not have a 24/7 call center with response teams throughout the county, in conjunction with CBO's.
 - Ryan asked why not a mobile crisis center in every region?
 - Mark mentioned that a lot of people need to get away from their home and a lot of them need to get away for a few days.
 - Anne said the agenda item is to discuss the survey and whether the survey meets the needs.
 - Brenda said it needs to combine questions and ask the people to prioritize what is needed – and give examples.
 - Teresa said we're not necessarily meeting the expectation of what we were trying to accomplish here.
 - Anne said a question should be, if given the money, would you want it in central county, decentralized, don't care, or just want the services.
 - Current and/or future accessibility needs to be taken into consideration.
 - Teresa added: what does the community need -- we need accurate, scientific data. Finances will come into the decision-making.
 - Anne asked if this Questionnaire will substantially enhance the information we already have? The overall consensus was No, but there was a feeling a simple survey needs to be done.
 - Anne said part of our responsibility is to draw upon our own experiences, data collected, and the experience of others to make a decision.
 - Teresa said she was never shown the information as to why the money was going to be spent for the PHF to be built. She said she wants something to make sense.
 - Brenda said we also need to give folks in the community alternative models. We need to talk about the broad spectrum of options on a survey, and give people the range of choices that are out there. She stated she wants to decrease the number of involuntary commitments into county hospital. She added that we need to develop a Questionnaire that gives a range of options with a place to write.
 - Anne mentioned the need for each option to be economically about the same.
 - Brenda said we need to pull out of 20 Allen St. proposal the amount that would be funded by MHSA and show that number.

There was discussion about IT and the expense of getting the medical records computer system up and running.

- Annis said that a combination of Capital Facilities/IT and innovation is \$10.2 million. She asked if the money can come from the county to augment the \$2 million IT money.
- Sherry said the County is looking at more options.
- Tony suggested taking the survey and before the next meeting each work on the range of options and include it.
- Brenda said we need to ask what would they like to be developed in the way of services
- Teresa said that was her goal – to ask what are our needs?
- Sherry said we should include IT in the choice of options.

- **ACTION: Anne made a motion to table any decision and take no action on action items A and B with regards to the presentation of any final recommendations to the Mental Health Commission on October 8th. Teresa Pasquini seconded the motion. It was thought to be an excellent idea. The motion carried unanimously. Following further discussion, it was decided to ask that the motion be withdrawn. All who had voted to accept the motion agreed. Anne withdrew the motion.**

Teresa mentioned that the MHC will not be able to hear anything until November 12th, although a Special MHC Meeting could be called. Tony recommended asking the MHC to request a range of options.

- **ACTION: Anne made a new motion that we incorporate the changes that Sherry has written, create a new draft of the questions and present the draft to the MHC with the proviso there will be one question yet to be formulated dealing with the range of possible options. The motion was seconded by Annis. Motion carried unanimously.**
- **Recommendation: We incorporate the changes that Sherry has written, create a new draft of the questions and present the draft to the MHC with the proviso there will be one question yet to be formulated dealing with the range of possible options.**

7. POSSIBLE DATA SOURCE DOCUMENTS

- A. Review and Discuss.
No discussion.

8. INFORMATION ON CHILDREN'S PROPOSAL

- A. Discussion.
No discussion.

9. NEXT STEPS/SET NEXT MEETING DATE

- **Next meeting date: Monday, October 19th at MHCC from 6:15-8:15 pm**
- Members each bring their suggestions for the survey to the next meeting and we discuss and come up with a final decision.
- Tony suggested having a presentation by IT representatives.
- Sherry will send out a chart of data resources for PEI, CSS, WET, Housing, Innovation, etc.

10. PUBLIC COMMENT

None.

11. ADJOURN MEETING

The meeting was adjourned at 8:45 p.m. by Chairperson Pasquini.

Respectfully submitted, Karen Shuler
MHSA Communications