



Minutes

Present: Sally Ragonut, Chair; Paula Mason, Vice-Chair; Bruce Metcalf, Secretary; Supervisor Lor; Mary Ellis; Iris Mojica de Tatum; Vicki Humble; Micki Archuleta; Zachery Ramos; Vince Ramos; Kim Carter; Keng Cha

Absent: Emil Erreca

Others Present: Sharon Mendonca; Charles Bruce; Chris Kraushar; Renee Smyth; Carol Hulsizer, Recorder

Call to Order / Roll Call

Due to COVID-19 today's meeting was held via conference call. Chair Sally Ragonut called the meeting to order at 4:00 p.m. Roll call was taken. Sally informed the Board that there has been a change to the agenda; item 9.b. (under Director's Report) has been pulled. The Director, Genevieve Valentine, could not make the meeting today; Assistant Director, Sharon Mendonca is present instead.

Mission Statement

The Mission Statement was read by Mary Ellis.

Approval of Minutes from July 7, 2020 (BOARD ACTION)

Discussion/Conclusion: Sally wanted to amend/change last month's minutes. She commented that on page 2 nothing was mentioned, during discussion of top priorities, that a list of top priorities would be sent to all Board members so they could choose the ones they would like to have looked into in the coming year. It should be added that Carol Hulsizer would send out a top list of priorities to all Board members. Another item on page 2, under Committees, line 2, the Executive By-Laws Planning did not include Iris' name – Iris's name needs to be included in that list.

Recommendation/Action: M/S/C (Metcalf / Mojica de Tatum) to approve the amended July 7, 2020 minutes. Due to this being a conference call, the names of all Board members were called and asked whether they themselves approved the minutes.

Lor – yes	Mojica de Tatum – yes	Ellis – yes
Ramos, V. – yes	Cha – yes	Ragonut – yes
Metcalf – yes	Ramos, Z. – yes	Humble – yes
Erreca – absent	Carter – yes	Archuleta – lost contact
Mason – yes		

Opportunity for public input. At this time any person may comment on any item which is not on the agenda.

Discussion/Conclusion: No public input

Recommendation/Action: None

Approve Annual Report for FY 19/20



BEHAVIORAL HEALTH AND RECOVERY SERVICES

Behavioral Health Board Meeting

301 E. 13th Street

Merced, CA 95341

August 4, 2020

Discussion/Conclusion: Sally made the motion to approve the Annual Report for FY 19/20. Supervisor Lor thanked the committee for putting together such an amazing report. Her favorite part is reading about all the members. She is excited to have such a great group of folks on the Board. Sally has spoken to Supervisor Lor about how they will present this to the Board. One suggestion was Carol mailing over to the Board of Supervisors (BOS). Iris and Sally will compose an email and send to the BOS; they will then read the email it at the meeting and be entered into the minutes of the Board meeting.

Recommendation/Action: M/S/C (Ellis / Ramos, Z.) to approve the Annual Report for FY 19/20.

Lor – yes	Mojica de Tatum – yes	Ellis – yes
Ramos, V. – yes	Cha – yes	Ragonut – yes
Metcalf – yes	Ramos, Z. – yes	Humble – yes
Erreca – absent	Carter – yes	Archuleta – lost contact
Mason – yes		

County Counsel Presentation: Welfare & Institutions (W&I) Code

Discussion/Conclusion: Charles Bruce with County Counsel was present for today's meeting. His report today is to go over the updated W&I Code, specifically Section 5604.2 and Assembly Bill (AB) 1352 that preceded the actual revision of the code. The purpose of this revision according to the author of this Bill was that local Mental Health Boards were intended to connect family members, consumers and the community to County Board of Supervisors and local Mental Health and Behavioral Health Directors with the sole purpose of helping to improve the community mental health system. Over the last 27 years that role has been marginalized according to this author. This bill and the codification of it would bring broader community impact respective to the local Mental Health Boards with added benefit of increased transparency for and input by the community. That comes directly from the Assembly Committee on Health analysis of the bill before it was passed. The relevant findings of the Legislature: The Bronzan-McCorquodale Act requires county mental health systems to provide services to children and adolescents with serious emotional disturbance and adults who have serious mental illness. An important finding was that local Mental Health Advisory Boards provide community voice and input into the development and adoption of community mental health service plans. Lastly, the local Mental Health Boards advise the Board of Supervisors on issues related to the mental health system. The new section that has been codified is actually mostly an addition to what existed before. They didn't take anything away but they did want to expand and clarify the role that the Advisory Board plays in advising the BOS. They wanted to strengthen and empower these Advisory Board's ability to serve its intended purpose. They wanted to increase transparency around any objections to Advisory Boards substantive recommendations (any recommendations that you take up as a Board with a quorum and pass). Finally, they wanted to increase the role of non-traditional community participation and that includes educators, hospital workers (emergency room workers) and law enforcement to include their experiences, knowledge and expertise in different sectors that intersect and engage with the mental health system. The W&I Code 5604.2 is broken into two sections – "a" and "b". "A" has eight sub-sections that Charles went through individually to see what is different and what stayed the same. 1. Review and evaluate the community's public mental health needs, services, facilities and special problems *(new added information) in any facility within the county or jurisdiction where mental health evaluations or services are being provided, including, but not limited to schools, emergency departments and psychiatric facilities.* This is a real expansion and clarification of what exactly the Legislature expects the Advisory Board will focus their attention when looking at the needs and services and facilities. 2. Review any county agreements entered into pursuant to Section 5650. *(New added information) The local Mental Health Board may make recommendations to the governing body regarding concerns identified within these agreements.* The governing body is the BOS. 4. Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process. *(New added information) Involvement shall include individuals with lived experience of mental illness and their families, community members, advocacy organization, and mental health professionals. It shall also include other professional that interact with individuals living with mental illnesses on a daily basis, such as education, emergency services, employment, health care, housing, law enforcement, local business owners, social services, seniors, transportation and veterans.* Charles added this goes back to their intention to increase the role of non-traditional community participation. 5. There is no added text. Submit an annual report to

the governing body on the needs and performance of the County's mental health system. 6. No added text. Review and make recommendations on applicants for the appointment of a local director of mental health services. The Board shall be included in the selection process prior to the vote of the governing body. 7. No added text. Review and comment on the county's performance outcome data and communicate its findings to the California Behavioral Health Planning Council. 8. No added text. This part does not limit the ability of the governing body to transfer additional duties or authority to a mental health board. Charles continued with the second part of 5604.2, subsection B - It is the intent of the Legislature that, as part of its duties pursuant to subdivision (a), the Board shall assess the impact of the realignment of services from the State to the County, on services delivered to clients and on the local community. There was no change to this section. The last update is for W&I Code, Section 5848. The Mental Health Board established pursuant to Section 5604 shall conduct a public hearing on the draft three-year program and expenditure plan and annual updates at the close of the 30-day comment period required by subdivision (a). Each adopted three-year program and expenditure plan and update shall include any substantive written recommendations for revisions. The adopted three-year program and expenditure plan or update shall summarize and analyze the recommended revisions. The Mental Health Board shall review the adopted plan or update and make recommendations to the local mental health agency or local behavioral health agency, as applicable, for revisions. *The local mental health agency or local behavioral health agency, as applicable, shall provide an annual report of written explanations to the local governing body and the State Department of Health Care Services for any substantive recommendations made by the local mental health board that are not included in the final plan or update.* Charles completed his report and then asked if there were any questions. Iris questioned the section discussing the Board members reviewing and evaluating many different locations. They have had discussion on this topic and it has been issue of content because the Board does not have a way to do this or how would they do it. One issue that always comes up is HIPAA in terms of the Board going to these facilities to do reviews and evaluations. Charles replied that it depends on what the issue is. If they can get the information they want based on a report, that is probably fine. There is power for this Board to ask for assistance from the Patients' Rights Advocate (PRA); the PRA is supposed to help facilitate the Board to getting access either to a facility or to the proper person to collect the information needed. Vince asked if the Board gets to see all the Behavioral Health Director candidates or does just one person get to see? Also, on the MHSA Update, does Mental Health have to give a written response to the Board members when they ask a question? Sally responded that there were three Behavioral Health Board members that participated in the selection of the current Director. Sally was chosen because she is the Chair of the Board, Bruce Metcalf was chosen because he is the Secretary and Iris was chosen as she is on the State Planning Council. Iris then responded that in the 3-Year Update, the document does have the answers to questions that were asked. Vince then asked who sends the document to the Calif. Planning Council – the Behavioral Health Board or the Behavioral Health Dept. Sharon responded that the Department submits the document. Vince then asked that when the public has a question regarding something on a MHSA Update is that answer posted on the MHSA Update? Sharon responded that whenever there is a question from the public that is a public comment and it is put into the plan with the answer. When the plan is complete it is submitted by the Department. Sally asked that Sharon follow-up with Vince on this issue.

POST NOTE: When Charles was discussing the W&I Code, Section A, the slide for item #3 was inadvertently missed. Item #3 reads: Advise the governing body and the local mental health director as to any aspect of the local mental health program. *Local mental health boards may request assistance from the local patient's right advocates when reviewing and advising on mental health evaluations or services provided in public facilities with limited access.*

Recommendation/Action: Information only

Chair's Report

- a. Discuss Behavioral Health Board Best Practices
- b. Discuss Gantt Chart vs Action Plan
- c. Discuss Board's Top Priorities for FY 20/21

Discussion/Conclusion: a. This month's meeting information contained a document entitled, How Does a Behavioral Health Commission Exercise Its Authority? Sally discussed the Duties of the Board – the first role and responsibility from W&I Code 5604.2

that Charles spoke about is the review and evaluation of the community's mental health needs. Sally wanted to focus on that today. She asked that the Board members all come up with ideas about different community organizations that can actually come and present to this Board. BHRS staff already come to Board meetings and present their programs. Currently because of COVID-19 the Board is not able to go out in the community. In addition, sometimes HIPAA is going to cause problems with going out in the community and they will need some guidance from the PRA. Having Board meetings on the sites of various community programs – the Board is not able to do this due to COVID-19; but this could be looked at in the new year. Next is system for evaluation of residential facilities/programs – at last month's meeting the Director stated that there will be four adult residential facilities opening up in Merced. Then there are the "town halls" or "forums" to discover what people think about current issues; Sally questioned if this could be done on a virtual forum. Sharon responded that she didn't see why they couldn't because all the facilities now have telehealth equipment. Sally asked if they could connect now with Los Banos or Livingston; Sharon stated that they can. Next is working with the staff regarding special issues – Sally stated that as a Board they need to talk about what this means and what "special issues" might entail. Sally asked if Board members had any ideas what special issues they might work with the staff on. Iris replied that once a family member came to the Board and they were frustrated; the family member brought to the Board's attention the special issue. Sally continued that they need to get out in the community and find out what is going on. Lastly, monitoring the BOS agendas for activity regarding mental health/substance abuse. Sally stated that with help she was able to attend a BOS meeting last week virtually. She commented that she didn't have access to a BOS agenda. Renee Smyth was able to show everyone how to find/access the BOS agenda electronically. Chris commented that Board members can sign up to be notified when agendas are posted – it would go right to their email with the link. b. Sally then continued with the Action Plan noted on the first page of this particular document. Sally wants to move from the Gantt chart, which is lengthy, confusing, and requires a lot of writing, to an Action Plan. She went over how to fill out the Action Plan. Sally then asked that each of the committees do this. She thought they could all meet by phone. Kim commented that maybe they could use the Gantt chart partially so there is a way to gage the action plan in their progression. Sally thought they could do that. c. Sally continued with the Top Priorities; she thanked everyone who filled out their top priorities. The item that turned out to be number one – most important to most of the Board members – Behavioral Health through eyes of the client/consumer, their experience with Point of Entry (POE), intake and services. They will need staff to help them with this along with Chris Kraushar. Another top priority for the Board was Law Enforcement – procedures and how they handle issues. Sally felt someone from law enforcement could attend a monthly meeting and give an update; she felt this could be further discussed at the Executive Board meeting next week. Supervisor Lor recommended that for the "shining areas of BHRS and areas that need help" in order to align with the Strategic Plan, that they put this in the Annual Report and use that for their new year's goals and consider what some of the Department's challenges are. Chris Kraushar commented that when she is able to be on the unit again, she can talk to the admitted patients via law enforcement and ask them about their experience. She can bring this back as anonymous comments. Supervisor Lor suggested that Chris get help from the staff so that more clients can be interviewed and ultimately gather more feedback in the same amount of time.

Sally mentioned that she and Kim received information on a training by Calif. Institute of Behavioral Health Solutions (CIBHS) – a virtual symposium. The meeting will be on August 11 and 12 on homelessness and how it is stretching across California.

Recommendation/Action: As noted above

Committee / Ad-Hoc Reports

- a. Substance Use Disorder (SUD)
- b. Board Orientation and Development
- c. Membership Committee
- d. Quality Improvement Committee (QIC)
- e. Annual Report
- f. Executive Committee
- g. Board Member Reports
- h. MHSA Ongoing Planning Council

Discussion/Conclusion: a. Paula reported that Substance Use Disorder (SUD) hired a new Program Manager, Isaura Rizzo. SUD remains open to providing services for the community. They are also going to continue providing these services and slowly integrate groups into daily services. They remind everyone to check on Facebook and Instagram for updates. Upcoming events: September is Recovery Month. They continue to work on their Strategic Planning Framework and have moved into the planning stage. Additionally, they have a Task Force to address their CalOMS errors (data collection and reporting system) for SUDs. The Task Force is working with resources and Automation Services team. b. Bruce reported both of today's presentations dealt with Board development – W&I Code presentation and Sally's discussion on board duties. Any future discussion on the Board's priorities helps to give the Board guidance and direction for possible presenters from the community as well as staff. They will continue with what they have been doing and in the year ahead they will try to put the right speakers/presenters in place for the Board's development. c. Mary had nothing to report. d. Mary went over her Quality Improvement Committee (QIC) report. e. Sally had previously discussed. f. Sally stated that she and Carol have discussed working/revising the Board binder. g. Iris reported that she participated in the Legislative Committee for the Calif. Behavioral Health Planning Council. She discussed several bills: SB803 – the Council is supporting this – Mental Health Services Peer Support Specialist certification; AB8 – student mental health - by December 2024 schools would have to have one mental health professional for every 600 students on campus during school hours, they want the funding stream to be MHSA/PEI and the Council opposes; AB 1776 – data collection for residential facilities – to make public how many beds are available; AB 2015 – Council opposes – would require a hearing for medical condition and how that impacts the decision to certify a person that they are a danger to self and others – the main reason is because the definition expands to include dementia; AB 2112 – suicide prevention – Public Health to establish an office on suicide prevention and would have statewide strategy; SB 665 – Mental Health Services county jails – Council opposes – authorizes use of MHSA funds for individuals incarcerated and to give them service if it's included in the county plan; AB 3242 – want to permanently continue with telehealth in the Emergency Departments. h. Micki was not present today to give a report.

Recommendation/Action: Information only

Director's Report

- a. Update on COVID-19
- b. FY 20/21 Goals & Priorities for Behavioral Health – PULLED
- c. Project Updates
 - (1) Sale of B Street Property
 - (2) Update on BHRS Website
 - (3) Update on Navigation Center

Discussion/Conclusion: Sharon Mendonca was present today in place of Genevieve Valentine. a. Sharon reported that as of yesterday there were 4,422 confirmed, positive cases in Merced. Approximately 1,720 were active and 50 have died. If you go to the County website the statistics are available. You will also see the nine different sites where consumers can be tested. Merced County Behavioral Health & Recovery Services is currently listed as an outbreak area. They are currently not allowing anyone into Marie Green. They are working closely with Public Health to make sure they are abiding by all the guidelines. They are keeping Marie Green and the Crisis Stabilization Unit completely separate from each other. They continue to ask staff to self-monitor prior to coming to work. Masks are also required to be worn. They are trying to allow as many staff as possible to work from home; this is based on department need. b. Pulled. c.(1) This was finalized the first part of July. BHRS no longer owns the B Street property; Merced City now owns the property. (2) Sharon thanked Renee on updating the BHRS website. The Mission Statement has been added, meeting information as well as agenda is posted. A list of Board committee's was added along with members. Supervisor Lor would like to have an explanation of what each committee does. (3) The plumbing work continues; curbs are going in; and the dumpster area is being enclosed. The first units will be showing up about August 27th. The crane will arrive about August 31st or Sept 1st and they will then start putting these units into place. They will be coming up with a Vision/Mission statement. This will be a 15,360 foot site. There will be 75 beds. Address will be 1411 B Street. There will be two dormitory bed areas totaling 7,040 sq.ft. There will be a commercial kitchen. There will be showers, restrooms, dining and common area, classrooms, conference rooms, exam room, two interview rooms,



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clinical/office area, laundry, storage, janitorial and electrical. There will also be places for the consumers to store their personal items and kennels for pets. Projected opening date is October 2020. Sally questioned what procedures will be in place surround COVID-19 when the doors open. Bruce stated they will have to wait and see where they are with COVID-19; they will be working closely with Public Health and the County to determine what the best policies will be. It was asked if Board members will be given a walk-thru; Sharon stated that can be discussed at the Executive Committee meeting.

Recommendation/Action: Information only

Announcements

Discussion/Conclusion: None

Recommendation/Action:

Future Agenda Items / Possible Action Items

Discussion/Conclusion: None

Recommendation/Action:

Adjournment: The meeting ended at 5:55 pm.

Submitted by: Singed
Carol Hulsizer
Recording Secretary

Approved by: Singed
Bruce Metcalf, Secretary
Merced County Behavioral Health Board

Date: 9/9/20

Date: 9/8/20