MARIN MENTAL HEALTH BOARD MEETING

Tuesday, September 8, 2020 6:00pm-7:30pm Zoom Meeting M-I-N-U-T-E-S

Join Zoom Meeting

https://us02web.zoom.us/j/86451388274?pwd=b3pNL2V4VIEzaGtJWmhrRWo3bmtNQT09

Meeting ID: 864 5138 8274 / Passcode: 758540

Dial in: 1 669 900 6833 US

6:00 p.m.

The Mental Health Board is hosting a Public Hearing on the Mental Health Services Act (MHSA) Three Year Plan (FY20/21-FY22/23). A copy of the draft plan that is currently out for 30-day public comment can be found at: www.MarinHHS.org/MHSA

Mental Health Board Hosted the Public Hearing for the Mental Health Services Act Three Year Plan. Presentation on timeline, community planning, and highlights of what will change with the implementation of this plan. Public Comment period was opened at 6:08 for public comment. Seven (7) comments received in support of the plan and one suggestion to explore additional options for non-self-report measures for analysis of the effectiveness of the Crisis Intervention Training as that program is further expanded. All comments are attached. Plan to be brought to the Board of Supervisors on 9/22/2020.

Public Comments on the Proposed MHSA Three Year Plan

List of all comments received during the 30-day comment period and in person at the Public Hearing:

Comments from the Public Hearing:

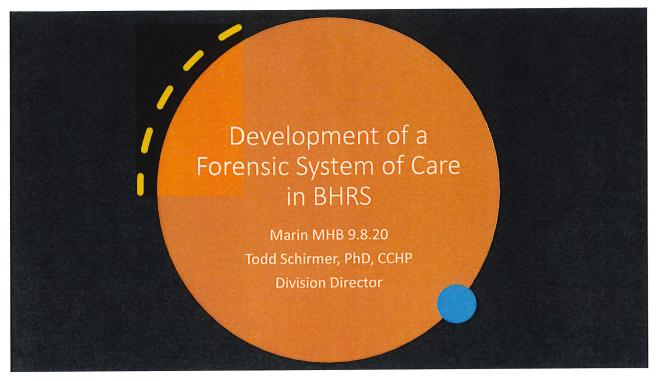
- "As some who is new to the whole planning process, as I read through the plan and each of the programs and how much community consultation had happened, I was impressed, very impressed with how rich it is. Rich in the sense of substantively rich and reflective of new and best practices in lot of these fields. I honestly just had the sense that this was just a very thorough, thorough plan."
- "This looks wonderful. It does look like a very comprehensive plan. Something that I like is the focus on eating disorders—I don't think we have had an emphasis on that in the past and also having a website that is public facing as technology is what we do now. I am glad those are the changes we are making—good work!"
- "This touches on so many areas that are important. The criminal justice Stepping Up program is critically needed now. I hope that is able to dovetail more with defunding the police. Mobile Crisis team has done so much and the closer we can get to 24/7 the better. The Promotoras, I think COVID has shown the weakness that we have in providing resources to the Latinx community, so this is really valuable to expand that. It is always nice to be able to fill in for grants that are ending. Increase peer support and peer programs—I think we have been very successful. The website—I have been so frustrated for 10 years, I can never find things. It will be really nice to be able to find things more easily. I think this—considering the amount of time that you patiently listened to so many people in the community saying what was important to them individually and boiling that down to these items—this is what we really need. Congratulations."

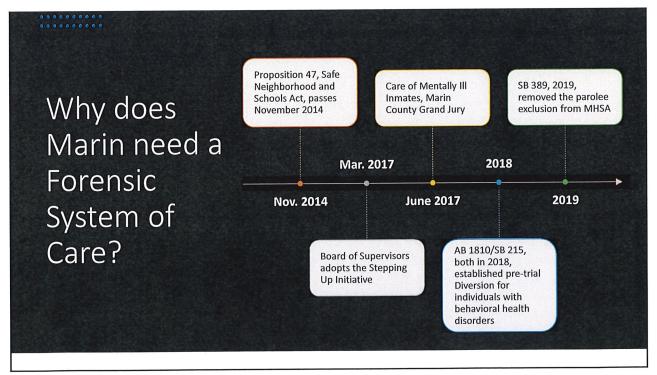
- "I want to insert my congratulations also. I read it—very comprehensive—I really like the Executive Summary, because it really put it together. You can look at that and get the whole picture. I did have a couple things: The Promotoras, I think it is one of the best programs I have looked at over the years. I am really glad to see it being expanded and reinstated. I am glad to see that Marin City now has a part of that program. What I did like about the Promotoras was the training component that I have been involved in of that program has been really impressive. I hope the structure that was started in the Canal will also be expanded to Marin City and also the training part so they won't be starting all over again. The advantage of that experience. I am really happy to see that program expanded into Marin City—I see you are calling it something different, Promoters is a grea.t I didn't see a lot of accommodation for the nursing homes. I would like to see down the line some better coordination and relationship with the nursing homes. Where a lot of our behavioral health issues are. I hope down the line we could help them and they could help you about what their issues are. One other thing I have. With all the changes that are happening, not knowing what is happening month to month, let alone year to year, I was wondering are we still going to be stuck with a3 year plan, maybe we should have a 2-year plan or a one year plan. Is there a way for this to be revisited on annual basis or is this just stuck in place for the full three years. So those are my questions. I think it was a really fantastic presentation.
- "My kudos as well to you and the team—the front end and all the way through including the pivot and the adjustment that had to be made with COVID coming on. You really managed that transition smoothly and I think the changes make sense. Bottom line we will see a reduction in what we expect revenue wise so had to adjust for that. So I appreciate your and your teams ability to make those adjustment. And I also it is very well down and very readable. The table of contents is especially helpful I think on picking out things as one-offs.
- "I think it was very age friend also. I saw lots of references to the age-friendly movement and there were lots of age-friendly programs included."
- "When will the peer program coordinator position be posted?" Goal is by November.
- "I can add my two cents—I came in late to this very late process and I just want to second that I learned A LOT in reading—skimming really—the plan. I wanted to give a thumbs up to increasing services to teens and young adults with eating disorders. That is a gap I have certainly seen as a pediatrician with Marin Community Clinics. I am happy to see that on the list of things that will change. I am also curious more than anything and excited about the Promotoras. For our patient population that will be very helpful as well as the increased peer support. I think as a pediatrician part of my job is really focused on prevention. I think the more we can do on the front end serves our community well. I have one question that has to do with the mobile crisis which I understand part of the reason on expanding the hours was to reach into the school day and I just wonder how that will look like if our schools continue to operating remotely. Is there any other way to utilize that expanded hours in a way that is useful until kids are back in school in person?"
- "I had a specific point which maybe more something to note rather than to try to answer. One of the things that is really rich and impressive about this is how many outcomes-based measures there are and how thorough that is. It is a really good working document for that. There is one outcomes-based measure for the crisis intervention teams for the experience of the enforcement officers in the appropriateness of the response. A self-reported measure on appropriateness of response. Is there a way to capture a non-self-reporting way to measure appropriateness of response?" Follow-Up: "Ensure training for dispatchers around how to respond appropriately and when to utilize mobile crisis."

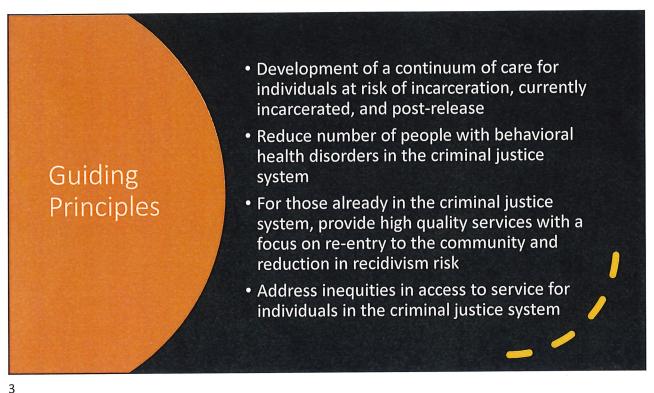
	Witten Comments Received:
	 "I want to emphasize the importance of including peer support in all areas regarding public mental health. I agree that systemic racism is the foremost mental health crisis, and our county of Marin is no exception. I feel law enforcement and the judicial systems must face the toughest scrutiny with regards to racial and mental health justice!"
,	 "Thank you for your Awesome work on this as always. What you include is building a more Equitable and Inclusive in Community using a Cultural lens. Thank you for that :-)."
	Substantive Changes made during the public comment period:
	No substantive changes were made to the proposed plan during or after the public comment period.
6:30 p.m.	Call to Order 6:00 p.m.
	Introductions Call for Quorum: Yes (8)
	In attendance: Rachel Farac, Maya Gladstern, Stephen Marks, Katie Rice,
	Jaime Yan Faurot, Everett Brandon, Heather Johnson, Aida-Cecilia Castro Garcia
	Absent: Patricia Carillon
	Staff: Jei Africa, Todd Schirmer, Taffy Lavié, Galen Main
	Guests: David Ruth and Lisa Leavitt
6:35 p.m.	Review and approval of Agenda / Review and approval of Minutes for June meeting Agenda: Maya G. made motion to approve agenda / seconded by Heather J. – APPROVED Minutes: Everett B. made motion to approve August minutes / seconded by Maya G. – APPROVED
6:40 p.m.	Correspondence, Announcements and Public Comments (please limit to 3 minutes per speaker) None
6:45 p.m.	 BHRS Director's Report – Jei Africa September is Recovery and Suicide Prevention month. A resolution will be read next week and BHRS will provide some remarks at the BOS meeting. Two testimonials from community members will join us too. Preparing to respond to the triennial audit with the Department of Health Care Services for the week of November 2nd. Submitting all necessary documents. We've applied for a grant to participate in a collaborative to be a trauma informed organization through the National Council; we received notice that we are one of the selected organizations.
6:50 p.m.	Presentation: Dr. Todd Schirmer, Division Director, Forensic/Criminal Justice discussed the development of a forensic system of behavioral health care in Marin, including the Stepping Up Initiative, sequential intercept mapping, funding mechanisms, and how we can improve care for individuals within the criminal justice system. Highlights include:
	 There is a need for a forensic System of Care as a result of Prop 47 passing in 2014; The Grand Jury report on the care of mentally ill inmates in Marin; BOS adopting the Stepping up Initiative and AB 1810/SB 215, both in 2018, established pre-trial diversion for individuals with behavioral health disorders.

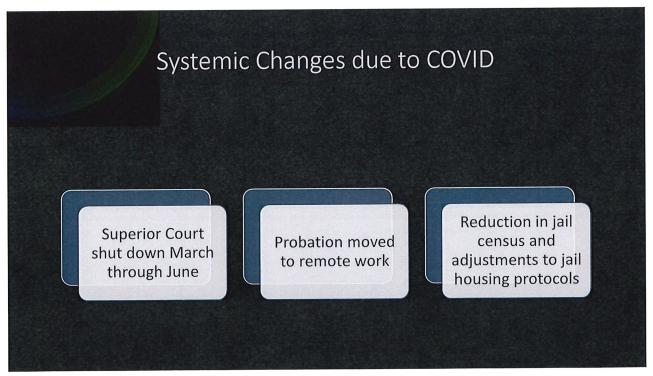
	 Systemic changed due to COVID include superior court shut down March through June, Probation moved to remote work and Reduction in jail census and adjustments to jail housing protocols. Forensic System of Care includes Assisted Outpatient Treatment (AOT aka Laura's Law, Behavioral Health Diversion, Proposition 47 / PIVOT, Jail Mental Health and STAR Full Service Partnership (FSP). What's next: Behavioral Health Diversion, Partnership with law enforcement to improve responses to individuals in behavioral health crises, data sharing and streamlining and close collaboration with Probation and Substance Use Disorder System of Care.
7:10 p.m.	Legislative Updates (if any) • SB803 (peer certification) is now at Governor Newsom's desk; PR campaign to pressure the governor to sign it; We are hopeful that it will pass this time.
7:15 p.m.	 Committee Liaisons, Task Force Updates MHSA – Galen Main (MHSA Coordinator) Seeking testers for Prevention and Outreach public facing website. Cultural Competency Board / WET – Maya Gladstern Meets every other month, usually on the same day as the MHB. She will have an update next month AOD Board Liaison – Heather Johnson AOD Board was dark in September CALBHB/C (as needed) Events that MHB members will attend/have attended
7: 20 p.m.	 New Business MHB brochures We will have brochures for review in October Discussion: Recruitment / Membership / Future Presentations Executive team will meet with David Ruth regarding membership Site Visits
7:30 p.m.	ADJOURN
Next Meeting Dates	Next MHB meeting- Tues. October 13, 2020 @ 6 pm Location to be determined Next Executive Committee meeting – 12:15 pm Tues. Sept 29, 2020 — Conference Call

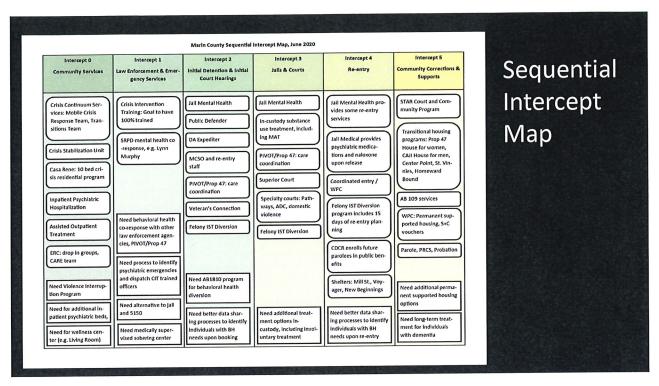
All public meetings and events sponsored or conducted by the County of Marin are held in accessible sites. Requests for accommodations may be made by calling (415) 473-3020 (Voice) (415) 473-3232 (TTY) or by email at disabilityaccess@marincounty.org at least four work days in advance of the event. Copies of documents are available in alternative formats, upon written request. Late agenda material can be viewed in the office of Community Mental Health Services, between the hours of 8:00 am and 5:00 pm. Community Mental Health Services office is located at 20 N. San Pedro Road, Suite 2021, San Rafael, CA, 94903. Thank you for your interest and participation in the workings of the Marin Mental Health Board. If you would like more information or would like to speak with a member of the Board, please contact: Taffy Lavié 415-473-6809

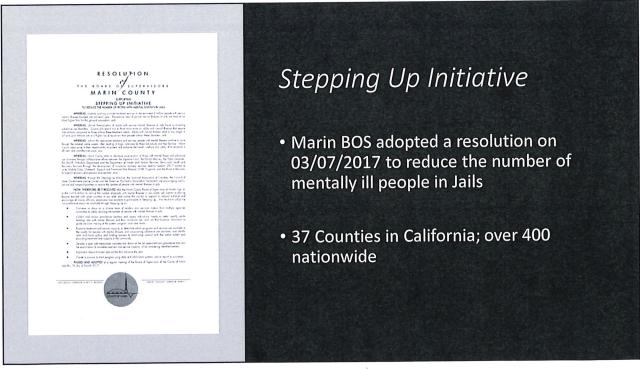


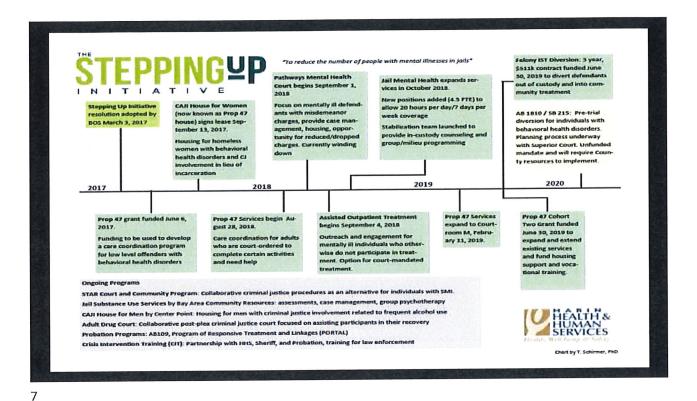














Single Issue Workgroups

AB1810 Planning and

Purpose: Develop procedures regarding Behavioral Health Diversion and recommendations for CIBH and BOS

Meetings held 8/30, 10/24, 10/25

Options In-Custody

Purpose: Identify strategies to address the needs of immates with severe behavioral health symptoms who refuse treatment while in-custody

Meeting held 12/6
Toured Sonoma County
MADF 1/16

Meeting held 12/3
Older Adults in the
Criminal Justice System

Options for Law En-

Purpose: Identify re-

tices for law enforce-

ing individuals in behav-

forcement

Purpose: Determine needs and available resources for older adults entering and exiting the criminal justice system, often with a finding of unlikely to be restored to trial competence Meeting held 2/6 *To reduce the number of people with mental illnesses in jails*

Data initiatives

SAMHSA-funded Medication Assisted Treatment (MAT) access grant: Development of a criminal justice setting data collection/organization system that supports the use of MAT in a correctional setting, needs assessment, recommendation for changes in screening for substance use and mental health needs upon booking, evaluation of success of MAT

Criminal Justice/Behavioral Health stretch assignment: Evaluation of data collection procedures, development of cross-system capabilities to track individuals from community behavioral health treatment, into custody, and back out again. Answer key questions: How many individuals in jair have a serious mental illness, what is their length of stay, what percentage are connected to treatment, what are the recidivism rates.

Exploration of Innovator County designation

- Shared definition of serious mental illness
- Validated mental health screening tool at booking, refer for follow up assessment
- Record results and report regularly

Potential benefits: Recognition for efforts, first step towards full implementation, access to funding (?)

Relevant Legislation

AB 720 (2017): Creates a procedure to administer involuntary medication to County Jail inmates in certain circumstances. Codified as PC 2603.

AB 1810 / SB 215 (2018): Creates Diversion statutes (PC 1001.35 & 1001.36)

58 389 (2019): MHSA amended to remove the parolee exemption, allows MHSA funds to be used for individuals in pre- and post-sentencing diversion or community supervision, including probation and parole



Forensic System of Care - Assisted Outpatient Treatment (AOT) aka Laura's Law - Behavioral Health Diversion - Proposition 47 / PIVOT - Jail Mental Health - STAR Full Service Partnership

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