

MHSA Advisory Committee Meeting Notes

October 26th, 2016

1:30 – 3:00pm

20 N. San Pedro Road, Point Reyes Conference Room

Next Meeting Dates:

November 15th 12:30 – 2pm

December 13th 12:30 - 2

Advisory committee members present: Maya Gladstern, Barbara Coley, Sandra Poniek, Sandra Fawn, Victoria A. Sanders, Robert Reiser, Brian Slattery, Gail Theller, Sandra Ramirez Griggs, Vinh Q. Luu, Heather Richardson, Carol Kerr, Laura Katorowski

Non-committee participants present: Kristen Gardner, PEI/INN Coordinator, Mary Roy, MHSA Three Year Community Planning, Suzanne Tavano, Director of Behavioral Health and Recovery Services, Kerry Pierson former committee member..

Announcements:

Mary Roy – National Institute of Health formally recognizes Sexual and Gender Minorities as a Health Disparity Population for Research Purposes. While great strides have been made in recent years, stigmatization, hate-violence and discrimination are still major barriers to the health and well-being of SGM populations. Research shows that SGM individuals who live in communities with high levels of anti-SGM prejudice die sooner - 12 years on average- than those living in more accepting communities.

Committee Updates

Behavioral Health Director Report:

The request to return the remaining \$1.4 million of the funds originally assigned to CalHFA, to develop housing for MHSA has moved forward. We anticipate receiving this within the next few months. Once we receive it we have 3 years within which to expend it. We hope to develop the permanent housing for the Behavioral Health Population. Housing has been identified as an area of greatest need. Both staff and clients prioritize permanent housing as a necessary. Currently Marin County provides housing for roughly 550 individuals (most of which is not permanent housing).

Committee members were asked to identify any new housing developments that may want to support permanent housing for our clients..

Update on MHSAAC membership:

MHSAAC membership has decreased over the past few months; the 27-member roster is now 20 members. MHSAAC is looking for representation from consumers, youth, education, and law enforcement communities. As we bring new members on board MHSAAC is hoping to set up an orientation meeting.

Brian Slattery – discontinuation of a continuum of care – clients with HIV, Substance use, mental health issues went into the continuum of care but without adequate

discharge planning and support ended up living on the street again. The clients mentioned were living at Mill Street.

Stipends for participants with Lived Experience

Gail Theller expressed concern over the resignation of Kerry Pierson. His resignation resulted from the changing fiscal policies and practices of the BHRS Fiscal Team. Gail proposed the development of a sub committee to bring forward a set of recommendation and ground rules on how to better incorporate consumer needs into the policy and procedures of the MHSAAC.

Kerry Pierson stated that the decision to shift payment types for consumers from cash to check created an inconvenience. He felt that this did not take the consumer's opinion into account and recommended that the County engage and negotiate payment type and other similar situations with consumers in order to better understand the challenges they face.

A discussion continued and addressed possible alternative payment types. MHSAAC members addressed the barriers associated with payment type and the invaluable experience that consumers bring to the committee.

Housing

In a recent meeting with the Board of Supervisors, the top two needs for the county were identified as, increasing the number of mental health hospital beds available and permanent housing.

Housing has been addressed as countywide problem and it is not something that BHRS can resolve alone. In order to address the housing shortage the community, developers, contractors, and the county need to invest in housing.

Recently, a Sober Living Environment for women, was about to open when the landlord ultimately decided not to lease the property due to pressures from neighbors and stigma. There are community concerns over potential decreases in property values. Political pressures were also identified as a potential barrier. Housing is clearly a multifaceted problem. MHSAAC members pointed out that there are groups already working on the housing problem, i.e. Marin Environmental Housing Consortium. MEHC meets next on Nov. 16th at 5:30pm.

A potential guest speaker, Ashley Mcantyre was identified. MHSAAC members expressed interest in having a presentation on housing and homelessness. (McIntyre will be leaving on maternity leave) and MHSAAC Members endorsed asking her to attend a meeting after she returns to work.

Programs in Sonoma County have been toured as possible models for Marin. A motel was converted as a permanent housing facility at a neighborhood of high crime. The motel was converted into a 108-bed permanent housing facility. The new housing ultimately improved the crime rates in that community.

Meeting Location:

Some individuals have expressed concerns over the meeting location, parking, and possible transportation stipends. MHSAAAC member proposed moving to the Wellness Campus on Kerner or an alternate location with better parking near Home Depot in San Rafael.

For now MHSAAAC meetings will continue at 20 North San Pedro. Efforts will be made to accommodate the needs of new members.

Rating Scale Review and Utilization:

The MHSAAAC Membership endorsed a scale designed to be used as a tool to review program proposals and existing programs. This tool would serve to provide an equitable means of reviewing established programs and reviewing new program proposals to assist with prioritising programs and services for funding.

MHSA Planning Progress, next steps and input:

We are currently waiting for finance to provide the forecasting of the MHSA funds that will be available for the development of the next MHSA 3-Year Plan. A discussion was held on how to best approach and assess the many different programs. Do we, separate based on age, category etc.? A board member to assist with the process created a template.

An overview of the MHSA planning process was given. Currently, the planning process designed to identify community needs by reaching out to key informants, conducting focus groups, and hosting 3 community meetings and an on-line survey. This process will lead to the development of a community priority which informs the development of the MSHA plan. Both the MHSAAAC and the Mental Health Board will have an opportunity to review the plan. The plan will then be posted for 30-Day Public Review and Comment and upon approval will be submitted to the Board of Supervisors for final approval.

In the spring MHSAAAC will review existing programs.

Through the MHSA Planning Process the following questions are being explored:

- Identifying the Strengths of Behavioral Health Services
- Mental Health and Substance Abuse needs experienced in the Community
- Identifying barriers in access to services / System Issues
- Identifying gaps in the service delivery system
- What prevention or early intervention activities could be provided which would assist individuals before these problems become severe and disabling?
- Reaching Underserved Cultural Communities
- Integrating Mental Health and Substance Abuse Services
- Integrating Trauma Informed Care
- **Housing**
- Suggestions for above
- Suicide Prevention

- First Episode Psychosis

The goal is to complete focus group interviews by mid-December (e.g. ERC, Marin Advocates for MH, Staff Policy Forum, Latino Providers, Consumers, Adult Providers, Vietnamese, LGBTQ Adults, LGBTQ Youth, West Marin, FEP, Suicide Prevention, Family Members, and Law Enforcement.)

MHSA Advisory Committee Members also requested information on the funding streams which support Behavioral Health Programming.

Next Meeting Goals

MHSAAC Advisory Committee Members endorsed using the next meeting as a focus group to provide input into priorities and provide feedback on refining the process. Committee Members requested that programs be presented by MHSA categories with the corresponding programs available, within each.

We are hoping that after the holidays to sort, analyze and bring it back to this meeting. Hoping that July 1st everything is completed.

Set clear rules regarding conflict of interest and involvement on the committee.

Provide an estimated amount of resources available to distribute among agencies.

Discuss the roles of MHSAAC Members: