

Advisory Committee Meeting

AGENDA

January 12, 2012
3:00 pm – 4:00 pm

Dial-in Number: 877-339-2412
ACCESS CODE: 2250381321

Public Meeting Locations:

Holiday Inn, Capitol Plaza
300 J Street
Sacramento, CA 95814

FYRT Office
345 15th Street, Suite A
San Diego, CA 92101
Training Room

CASRA
815 Marina Vista
Martinez, CA 94553

CalMHSA ADVISORY COMMITTEE MEETING

January 12, 2012
3:00 pm – 4:00 pm

Dial-in Number: 877-339-2412 ACCESS CODE: 2250381321¹

Public Meeting Locations:²

Holiday Inn, Capitol Plaza
300 J Street
Sacramento, CA 95814

FYRT Office
345 15th Street, Suite A
San Diego, CA 92101
Training Room

CASRA
815 Marina Vista
Martinez, CA 94553

The Committee welcomes and encourages public participation in its meetings. Following each item, time is reserved for members of the public to address the Committee. Items not on the agenda are reserved for the end of the meeting.

Comments will be limited to three minutes per person and twenty minutes total. Each interested party is to complete the Public Comment Card and provide it to committee member as each location, prior to start of item. When it appears there are several members of the public wishing to address the Committee on a specific item, at the outset of the item, the Committee Chairs may announce the maximum amount of time that will be allowed for presentation of testimony on that item. Comment cards from each meeting location will be retained as a matter of public record.

1. **Call to Order**
2. **Roll Call and Public Comment and Recusal Instructions**
3. **Opening Remarks by Co-Chairs**
4. **Approval of the Agenda as Posted (Or Amended)**
5. **Approval of the minutes from the November 17, 2011 Advisory Committee meeting**
 - Public Comment
6. **Program Director's Report** (verbal report)
7. **Presentation of Stigma and Discrimination Reduction Consortium** (to be posted on website and distributed prior to meeting)
 - Discussion of draft review tool for consortium membership selection
 - Public Comment
8. **Presentation and Action on CalMHSA Draft Implementation Work Plan Amendment #1**
 - Public Comment
9. **General Public Comment**
10. **Adjourn Meeting**

¹ In response to Committee members' request, we are testing a teleconference system to allow those who are participating via telephone to make public comments.

² In compliance with the Americans with Disabilities Act, if you are a disabled person and you need a disability-related modification or accommodation to participate in this meeting, please contact Laura Li at (916) 669-4098 (telephone) or (916) 859-4805 (facsimile). Requests must be made as early as possible, and at least one full business day before the start of the meeting.

Materials relating to an item on this agenda submitted to this Board after distribution of the agenda packet are available for public inspection at 3043 Gold Canal Drive, Suite 200, Rancho Cordova, CA, 95670, during normal business hours.

Agenda Item 5

SUBJECT: CalMHSA Advisory Committee Meeting Minutes

BACKGROUND AND STATUS:

The CalMHSA Advisory Committee held their first meeting on Thursday, November 17, 2011 in Folsom, CA.

Minutes from that meeting are enclosed for review and approval.

RECOMMENDATION:

Approval of the minutes from the November 17, 2011 Advisory Committee as presented.

REFERENCE MATERIALS ATTACHED:

- Advisory Committee Meeting Minutes, November 17, 2011
- Advisory Committee Meeting Calendar - 2012

MINUTES

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY (CaMHSA)

ADVISORY COMMITTEE MEETING

Folsom, California
November 17, 2011

MEMBERS PRESENT

Maureen F. Baumann, LCSW, Advisory Committee Co-Chair

Joseph Robinson, Advisory Committee Co-Chair

Michael Kennedy, MFT, Sonoma County

Anne Robin, MFT, Butte County

Jerry Wengerd, LCSW, Riverside County

Justin Louie Lock

Donna Ewing-Martó (via phone)

Donna Jensen

Molin Malicay

MEMBERS ABSENT

William Arroyo, MD, Los Angeles County (alternate)

Keris Jän Myrick

STAFF PRESENT

John Chaquica, CPA, MBA, ARM, CaMHSA Executive Director

Ann Collentine, MPPA, CaMHSA Program Director

Laura Li, CaMHSA Program Analyst

Doug Alliston, Legal Counsel, Murphy Campbell Guthrie & Alliston

MEMBERS OF THE PUBLIC

David Kopperud, California Department of Education

Cielo Avalos, Department of Mental Health (DMH)

Rosemary Milbrath, Sonoma County NAMI

Cecilia Badger, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO)

Call to Order

Co-Chair, Maureen Bauman, CalMHSA Board Member, Placer County, called the meeting to order at 10:14 a.m., after which, Laura Li, CalMHSA Staff, took roll and established a quorum.

1. Ralph M. Brown Act Overview

Doug Alliston, Legal Counsel, Murphy Campbell Guthrie & Alliston, did a brief review of the Brown Act, to include: open meetings, time requirements for the posting of agendas.

Ms. Li did a review of the public comment procedures to include completing a public comment card for the purpose of having a record on file of comments made during the meeting.

2. Introductions and Review Committee Charter

Co-Chair Bauman asked committee members to introduce themselves and give some background information as to their professional roles and involvement with mental health.

Co-Chair Bauman also did a brief overview of the committee's charter, followed with details provided by Ann Collentine, CalMHSA Program Director.

Discussion took place as to the possibility of change language in the charter as it relates to the purpose, from "ongoing oversight of regular reporting from Program Partners in key areas related to Core Principles adopted by CalMHSA" to "ongoing review and comment of" as they felt the word "oversight" was a bit strong. After continuous discussion it was determined important to leave the language of the charter as approved by the CalMHSA Board of Directors, as it was significant to stakeholders involved in the collaboration that creation of this committee.

3. Clarifying Roles of Advisory Committee vs. Executive Committee vs. Statewide Evaluation Expert Team (SEE)

Ms. Collentine did a review of the various roles between existing and future CalMHSA committees and workgroups.

A member asked if the selection for the SEE team would be done in the same process as the Advisory Committee, if so, could the Advisory Committee discuss the process of selection.

Ms. Collentine indicated that process was still evolving and would be happy to take that question back and report status at the next committee meeting.

John Chaquica, CalMHSA Executive Director, stated the process for the SEE team could move deliberately within the next 60 days or more quickly. Therefore, recommends if there are opinions/recommendations they could provide today, that would be great.

Co-Chair Bauman asked staff to further identify the goal of the SEE team so committee members could provide comment/recommendations.

Mr. Chaquica stated this team derived from the creation of the Work Plan, a necessary component in order to have the Work Plan approved by the MHSOAC. Staff is looking at the RAND Corporation to provide some input as to what this team should look like—it may include individuals from the OAC Evaluations Committee, other organizations, outside groups and experts. There are a lot of moving parts to this group and members will be derived from people who can commit for the duration. This is all the information they can provide right now.

Co-Chair Bauman, opened it up for comments.

Jerry Wengerd, Riverside County, indicated this is of significance and the core of CalMHSA, which should be done well.

Co-Chair Joseph Robinson agreed with Mr. Wengerd and indicated this was a great opportunity for this committee to assist and partake in this process.

4. SDR Program Two: Values, Practices and Policies Program (VPPP), Component Four: Promoting Mental Health in the Workplace

Co-Chair Bauman asked Ms. Collentine to give an update relative to the SDR program which received no responders. Ms. Collentine indicated that on February 14, 2011, CalMHSA released the SDR Request for Proposals (RFP) Letters of Intent (LOI) to be submitted by March 8, 2011, and with a closing date of March 30, 2011. Of the LOIs and proposals received, not one was submitted for Program Two: Values, Practices and Policies Program (VPPP), Component Four: Promoting Mental Health in the Workplace.

Program Two: Values, Practices and Policies Program (VPPP), Component Four: Promoting Mental Health in the Workplace requires a Program Partner to provide (but is not limited to) the following:

- Identify and disseminate best practices for incorporating mental and emotional wellness in the workplace.
- Engage employers and employer organizations in partnerships to address the importance of promoting mental wellness and reducing stigma.

- Conduct training statewide for employers on the importance of mental health wellness for all employees and best practices for promoting wellness.

Promoting Mental Health in the Workplace should target at a minimum employers and Human Resources staff.

Promoting Mental Health in the Workplace Seeks:

- Increased awareness of the importance of mental health within organizations.
- Increased respect and awareness of the rights of people identified with mental health challenges.
- Education of employers on the importance of mental health wellness for all employees.

The Advisory Committee discussed the various options of moving forward with this particular project to include: re-issuance of the RFP with limited edits but not changing intent or scope of work; re-issuance of the RFP with new expanded distribution list (reaching out to the private industry); not re-issuing the RFP and possibly using the allocated funding to other existing SDR projects; adding language to the RFP for more specificity on focus etc.; and re-issuing the RFP with language indicating CalMHSA is not obligated to award a contract if there is no qualified/acceptable proposal submitted, allowing for moving in another direction.

Discussion was extensive with many options. The committee reached consensus on the recommendation below for Board consideration and approval.

Recommendation: Approve the re-issuance of the Stigma and Discrimination Reduction Request for Proposal (RFP), Program Two: Values, Practices and Policies Program (VPPP), Component Four: Promoting Mental Health in the Workplace, to include: 1) distribution to an expanded mailing list; 2) with limited revisions which do not change intent or scope of work but emphasize the opportunity to leverage this program to expand current workplace or public health education programs to include a mental health and wellness component; 3) with caveat that CalMHSA is not obligated to fund if proposals are rejected and will re-evaluate this component for other options.

5. Implementation Work Plan Status Update

Ms. Collentine provided an overview of current program status and indicated, due to new county membership, additional funding had been received and staff would be working to re-assess the current Work Plan in the first quarter of 2012.

6. CalMHSA Communications Work Plan

Co-Chair Bauman initiated discussion relative to how they, as committee members, would be checking in and disseminating information with the individuals they represent.

Anne Robin, Butte County, indicated she was making an effort to get on the agenda of the upcoming regional training sessions for the Mental Health Board to allow for some outreach.

Co-Chair Bauman, indicated this would be an ongoing topic at future meetings.

7. Schedule for December Teleconference and 2012

Co-Chair Bauman moved to the last agenda item, the 2012 schedule. She explained the considerations for the 2012 meeting schedule, highlighting the opportunity for the plan amendment to go before the OAC, when the amendment would go before the Board for approval, and when the Advisory Committee would need to have input. Staff is now proposing a slightly different schedule from what is in the agenda packet. Co-Chair Bauman then called on Ms. Collentine to walk the committee through the thought process.

Ms. Collentine explained the original thought was the committee would meet quarterly with a teleconference halfway between each meeting—every six weeks. The proposed agenda reflects that thinking. However, looking at being in front of the OAC in the third week of March 2012, staff is now looking at changing the schedule to the fourth Thursday of each quarter, with the first meeting taking place on January 26, 2012. The following meetings would take place on April 26, 2012, July 26, 2012, and October 25, 2012. The teleconference meetings, each an hour and a half at most, would be six weeks in between the meeting on the third Thursday at 9 a.m.

Committee members noted that the third Thursday conflicts with OAC meetings. Discussion followed around those that are flying in from Southern California or driving down from Northern California and coordinating with other meetings to make participation more conducive. It was then suggested following the CMDHA All Directors Meeting on the months opposite Board Meetings from 3:00 p.m. to 5:00 p.m.

Staff is also working on a quarterly stakeholder's roundtable plan which will be presented at the next meeting, and which could be combined with future Advisory Committee meetings. The roundtables will provide a forum for stakeholder comment and discussion.

It was concluded that the next meeting would be held on January 12, 2012 from 3:00 p.m. to 5:00 p.m. Until an alternate plan is developed, going forward Advisory Committee meetings will be held every other month following the CMHDA All Directors Meeting.

Public comment was heard from the following individual(s):

Cecilia Badger, Racial and Ethnic Mental Health Disparities Coalition (REMHDCA)

Depth of public participation was discussed as it relates to those calling in from remote locations. Staff was given direction to look into the technology available and the costs associated with those options. A report will be given at a future meeting.

Co-Chair Bauman called on Mr. Alliston to provide clarification on the requirements for hosting public locations allowing for public participation as it relates to the teleconference calls. Ms. Collentine extended the invitation for the public to participate in the teleconference calls at the CalMHSA office in Rancho Cordova.

8. General Public Comment(s)

Co-Chair Bauman asked for any public comment. Hearing none the meeting was adjourned at 1:05 p.m.



"A George Hills Company Administered JPA"

CaIMHSA ADVISORY COMMITTEE 2012 CALENDAR of MEETINGS

<u>Date:</u>	<u>Time:</u>	<u>Location:</u>
January 12, 2012	3:00pm-4:00pm	Teleconference
March 15, 2012	2:45pm-5:00pm	Marriott Cal Expo, 1782 Tribute Road, Sacramento, CA 95815
May 10, 2012	3:00pm-4:00pm	Teleconference
July 12, 2012	2:45pm-5:00pm	Holiday Inn Capital Plaza, 300 J Street, Sacramento, CA 95814
September 13, 2012	3:00pm-4:00pm	Teleconference
November 15, 2012	TBD	TBD – In person meeting

NOTE: Dates subject to change

Agenda Item 7

SUBJECT: Stigma and Discrimination Reduction Consortium

BACKGROUND AND STATUS:

The Stigma and Discrimination Reduction (SDR) Program One: Strategies for a Supportive Environment Program, Component One: Stigma and Discrimination Reduction Consortium, was previously awarded to a client-led organization, but contract negotiations were discontinued due to organizational restructuring and ongoing changes. Subsequently, on October 13, 2011 the CalMHSA Board of Directors authorized the CalMHSA Executive Director to recruit a project leader via a Request for Interest (RFI) process and enter into a contract for timely implementation of SDR Program 1, Component 1.

On October 14, 2011, staff released a 15-day RFI and, although CalMHSA received a number of applications of interest, due to the comprehensiveness and unique qualifications required for this position, staff extended the solicitation deadline until the position is filled but no later than November 28, 2011.

On November 21, 2011, first round interviews were conducted by an interview panel consisting of CalMHSA staff (Ann Collentine and Stephanie Welch), Dr. Naylor Goodwin, CiMH President and CEO, and two consumers (Clayton Chau, Orange County, and Kamila Baker). A second round of interviews was held on November 28, 2011. The second interview panel was comprised of Board Vice-President Maureen Bauman, Doretha Flourney-Williams of CIMH, John Chaquica and Ann Collentine. Adele James was selected to be Project Manager (see attached). Ms. James self-identifies as a consumer with extensive background in facilitation, project management and leading community engagement with diverse client populations, including individuals living with a mental illness. CIMH will provide administrative and organizational support to Ms. James. Staff is currently working on contract completion; however, the project is effectively under way.

As approved by the CalMHSA Board in October, the role of the Project Manager is to implement SDR Program 1, Component 1, and by September 30, 2012, transition the Consortium's administration to a consumer/client-led organization that has the capacity to continue to manage the work of the project until the SDR Initiative concludes on June 30, 2014. Such an organization would have the ability to provide a statewide voice on the critical impact of stigma and resulting discrimination and disparities experienced by individuals, families and communities. Ms. James will be giving an update on the plan and seeks member input on the review scoring tool.

RECOMMENDATION:

Information only

REFERENCE MATERIALS ATTACHED:

- Draft Review Tool and Criteria for Selection of Consortium Members (to be posted on website and distributed prior to meeting)

Agenda Item 8

SUBJECT: Draft Implementation Plan Amendment #1

BACKGROUND AND STATUS:

The California Mental Health Services Authority (CalMHSA) is an independent administrative and fiscal government agency focused on the efficient delivery of California mental health projects. California counties established CalMHSA as a Joint Powers Authority (JPA). Member counties worked together to develop, fund and implement mental health services, projects and educational programs at the state, regional and local levels. CalMHSA members developed an Implementation Work Plan in Fiscal Year 2010-11 that describes how \$129 million of Mental Health Service Act funds will be utilized to implement California's Statewide Prevention and Early Intervention (PEI) Plan to Prevent Suicides, Reduce Stigma, Discrimination and Improve Student Mental Health.

Since the CalMHSA Implementation Work Plan was approved by the Mental Health Services Oversight and Accountability Commission (MHSOAC) in February 2011, 13 new counties and cities¹ beyond those included in the original work plan have elected to participate in CalMHSA PEI statewide projects. To date, new participation has resulted in an additional \$7.7 million of assigned program funds for redistribution into new communities. This Work Plan Amendment #1 seeks to utilize a portion of the newly assigned funds to expeditiously address the following:

- Expand the scope of regional projects to include additional geographic areas and underserved populations, and,
- Strengthen racial, ethnic and cultural competency within existing projects.

Principles for Funding Allocations:

The primary principles driving the allocation of additional program funds are:

- Implement PEI projects in an expeditious manner.
- Strengthen local and regional capacity by ensuring new CalMHSA participants are included in funded activities.
- Maintain overall consistency in the proportion of funds allocated to Suicide Prevention 25%; Stigma and Discrimination Reduction 37.5%; and Student Mental Health 37.5%.²
- Consider the unique characteristics of communities participating in CalMHSA, including local factors such as capacity, population, and setting (rural, suburban, urban).

STAFF RECOMMENDATIONS:

Suicide Prevention (SP): Increase by approximately \$1.9M (25% of \$7.7M).

Regional Local Capacity Building Programs:

As new communities participate in CalMHSA, many regional SP providers are being asked to serve additional counties and/or cities. Augment regional programs to serve an expanded geographic and/or racial/ethnic/cultural and underserved population.

¹ Amador, Calaveras, Del Norte, Lassen, San Francisco, Santa Barbara, Mariposa, Merced, San Benito, San Mateo, Tri Cities, Tuolumne, Madera

² DMH Information Notices No.: 08-25 and 10-06, "The goal... is to ensure that California maintains the significant and intended investment in the three program areas as originally intended."

Student Mental Health Initiative (SMHI): Increase by approximately \$2.9M (37.5% of \$7.7M).

Higher Education: California Community Colleges (CCC):

SHMI Higher Education funds were allocated equally to each system¹. The CCC serves a student population that is 6 to 11 times that of the California State University and University of

Stigma and Discrimination Reduction (SDR): This amendment will set aside approximately \$2.9M (37.5% of \$7.7M) for Work Plan Amendment #2 (planned for Fall 2012).

Eight out of 10 SDR projects are in the initial stages of implementation; the other 2 projects will be re-released for bid in the future². It is recommended that program enhancements be delayed until Work Plan Amendment #2, so that they can be informed by implementation data.

Work Plan Amendment Timeline:

- Pre-meeting with CalMHSA Advisory Committee Co-Chairs: January 5, 2012
- MHSA Coordinator's Meeting: January 9, 2012
- CalMHSA Advisory Committee Meeting: January 12, 2012
- Release draft document for 30 day review for period January 20- February 19, 2012
- CalMHSA Board Meeting: February 10, 2012
 - Request that final approval be delegated to the Executive Committee.
- CalMHSA Executive Committee via teleconference: Date TBD, early March, 2012
- Presentation to MHSOAC Board Meeting: March 22, 2012

Work Plan Amendment #2 Proposed for Fall 2012

An additional work plan amendment is proposed for Fall 2012; it will include the \$2.9M set aside for Stigma and Discrimination Reduction and will address the undistributed assigned funds and any other available funds (e.g. operating reserve and other unspent dollars). This plan will be informed by emerging program data, determination on whether funds revert on June 30, 2014, and may address other needs identified in prior stakeholder processes.

RECOMMENDATION:

Adopt staff recommendations to distribute to:

- Suicide Prevention (SP): Increase by approximately \$1.9M (25% of \$7.7M). *Regional Local Capacity Building Programs*,
- Student Mental Health Initiative (SMHI): Increase by approximately \$2.9M (37.5% of \$7.7M). *Higher Education: California Community Colleges (CCC)*
- Stigma and Discrimination Reduction (SDR): This amendment will set aside approximately \$2.9M (37.5% of \$7.7M) for Work Plan Amendment #2 (planned for Fall 2012).

REFERENCE MATERIALS ATTACHED:

- None

³ SMHI Higher Education Initiative funding for UC, CSU and CCC was approximately \$7.5 million each.

⁴Program 1, Component 1: SDR Consortium, Program 2, Component 4: Promoting Mental Health in the Workforce