



MISSION

By understanding the needs of consumers and families, Tri-City provides high quality, culturally competent behavioral health care treatment, prevention and education in the diverse cities of Pomona, Claremont, and La Verne.

TRI-CITY MENTAL HEALTH AUTHORITY MENTAL HEALTH COMMISSION AGENDA

OCTOBER 13, 2020
3:30 p.m.

MEETING LOCATION

Pursuant to California Governor's Executive Order N-29-20 (Paragraph 3), adopted as a response to mitigating the spread of Coronavirus (COVID-19), the Mental Health Commission is authorized to hold its public meetings via teleconference and the public seeking to observe and to address the Mental Health Commission may participate telephonically or otherwise electronically. Therefore, this meeting will be held via teleconference. The locations from where the Commissioners are participating are not listed on the agenda and are not accessible to the public.

To join the Mental Health Commission meeting click on the following link:

https://webinar.ringcentral.com/webinar/register/WN_iuum3JgISs6587E801yntw

Or you may call: 1(720)9027700 or 1(346)9804201
Webinar ID: 148 598 9122

Posting of Agenda. The Agenda is posted 72 hours prior to each meeting on the Tri-City's website: <http://www.tricitymhs.org>

Public Participation. Section 54954.3 of the Brown Act provides an opportunity for members of the public to address the Mental Health Commission on any item of interest to the public, before or during the consideration of the item, that is within the subject matter jurisdiction of the Mental Health Commission. The public can make a comment during general public comments or on a specified agenda item by leaving a voice mail message at (909) 451-6421 or by writing an email to molmos@tricitymhs.org. All voice mail messages and emails received by 1:30 p.m. will be read into the record at the appropriate time. If you wish to speak on a matter which is not on the agenda, you will be given the opportunity to do so at the Public Comment section. No action shall be taken on any item not appearing on the Agenda. The Chair reserves the right to place limits on duration of comments.

Any disclosable public records related to an open session item on a regular meeting agenda and distributed by Tri-City Mental Health Authority to all or a majority of the Mental Health Commission less than 72 hours prior to this meeting are available for public inspection at <http://www.tricitymhs.org>

CALL TO ORDER

Chair Watson calls the meeting to Order.

ROLL CALL

Toni L. Watson – *Chair*
Anne Henderson – *Vice Chair*
Carolyn Cockrell – GB Liaison
Ethel Gardner

Joan M. Reyes
Daniel Rodriguez
Wray Ryback
Twila L. Stephens

Alfonso Villanueva
David J. Weldon
Davetta Williams

REGULAR BUSINESS

I. APPROVAL OF MINUTES FROM THE JULY 14, 2020 MENTAL HEALTH COMMISSION REGULAR MEETING

II. PRESENTATION

- A. “RECOVERY MOMENTS” STORY
- B. STATE-REQUIRED CULTURAL COMPETENCY PLAN UPDATE AND PROCESS
- C. INTRODUCTION AND ROLE OF TRI-CITY’S CULTURE, INCLUSION AND DIVERSITY COMMITTEE AND ITS 3 NEW COMMUNITYWIDE ADVISORY COUNCILS
- D. 2020 DATA NOTEBOOK ON THE ISSUE OF "TELEHEALTH"
- E. MHC ESTABLISHING ITS PRIORITY TOPICS AND/OR GOALS FOR FISCAL YEAR 2020-21

III. EXECUTIVE DIRECTOR REPORT

COMMISSION ITEMS AND REPORTS

Commissioners are encouraged to provide comments or ask questions about the community’s mental health needs, services, facilities and special problems. In addition, this is an opportunity to provide reports on their activities.

PUBLIC COMMENT

The Public may at this time speak regarding any Tri-City related issue. No action shall be taken on any item not appearing on the Agenda. The Chair reserves the right to place limits on duration of comments.

ADJOURNMENT

The next Regular Meeting of the **Mental Health Commission** will be held on **Tuesday, November 10, 2020 at 3:30 p.m.** via teleconference due to the COVID-19 pandemic.

MICAELA P. OLMOS
JPA ADMINISTRATOR/CLERK



**MINUTES
REGULAR MEETING OF THE MENTAL HEALTH COMMISSION**

JULY 14, 2020 – 3:30 P.M.

The Mental Health Commission met in a Regular Meeting on Tuesday, June 9, 2020 at 3:37 p.m. via teleconference pursuant to California Governor Newsom Executive Order N-25-20 wherein he suspended certain provisions of the Brown Act to allow the continuation to hold meetings without gathering in a room in an effort to minimize the spread and mitigate the effects of COVID-19 (Corona Virus Disease of 2019).

CALL TO ORDER Vice-Chair Henderson called the meeting to order at 3:37 p.m.

ROLL CALL Roll call was taken by JPA Administrator/Clerk Olmos.

PRESENT: Toni L. Watson, Chair (arrived at 3:40 pm)
Anne Henderson, Vice-Chair
Carolyn Cockrell, Governing Board Member Liaison
Joan M. Reyes
Twila L. Stephens
David J. Weldon
Davetta Williams

ABSENT: Ethel Gardner
Daniel Rodriguez
Wray Ryback
Alfonso "Al" Villanueva

STAFF: Toni Navarro, Executive Director
Rimmi Hundal, Director of MHSA and Ethnic Services
Angela Igrisan, Chief Clinical Officer
Mica Olmos, JPA Administrator/Clerk

REGULAR BUSINESS

I. APPROVAL OF MINUTES FROM THE FROM THE JUNE 9, 2020 MENTAL HEALTH COMMISSION REGULAR MEETING

There being no comment, Chair Watson, and Commissioner Weldon seconded, to approve the Minutes of the June 9, 2020 Mental Health Commission Regular Meeting. The motion was carried by the following vote: AYES: Commissioners Reyes, Stephens, and Weldon; Vice-Chair Henderson; and Chair Watson. NOES: None. ABSTAIN: Governing Board Member Liaison Cockrell. ABSENT: Commissioners Gardner, Rodriguez, Ryback, Villanueva, and Williams.

II. PRESENTATION

A. "RECOVERY MOMENTS" STORY

AGENDA ITEM NO. I

Chief Clinical Officer Igrisan stated that she believed the recovery story is us because we are all here on the video screen or on the phone; that we have persevered through this and we are 'keeping calm and carrying on' and there is a lot to be said for that; that we are taking care of ourselves, taking care of each other, and meeting our needs the best way we can; and we will celebrate Tri-City's 60th birthday.

Director of MHSA & Ethnic Services Hundal reported that staff just wrapped up the summer camp which for the first time it was held virtually; that the craft supplies were delivered to the participants on a weekly basis; pointing out that a family that had recently moved to California from out of state, did not know anybody and the family child enrolled in our summer camp and was able to make other friends, learned healthy coping skills, and will continue to come to the wellness center and enjoy the services.

B. REVIEW OF MHC GOALS DURING FISCAL YEAR 2019-20:

1. To increase the attendance of Members of the Mental Health Commission to the MHSA community planning process meetings;
2. To have 100% quorum at all of the regularly scheduled meetings of the Mental Health Commission; and
3. To impact disparities in mental health access of culturally diverse groups.

Executive Director Navarro asked the Commission to look back and see what we were able to accomplish in the six months that we were able to operate traditionally and review the Commission goals for last fiscal year.

Chair Watson reported that Commission attendance did increase in stakeholder meetings and that most of the Commission meetings had a quorum. Executive Director Navarro concurred with Chair Watson's comment, noting that the Commission had met its goal because the Commission was well represented in all the stakeholder meetings and the Commission meetings had a quorum; expressed appreciation for the Commissioners' participation in the community meetings, and said that this goal was a success.

Commissioner Reyes then spoke about the Commission's 3rd goal, and reported that the Commission had only one outreach event in February for black history month, then COVID came along; therefore, she was not sure when the Commission can move forward, and recommended to having this same goal for next year.

Chair Watson spoke about having to complete a survey about mental health advocacy in the jails from the California Behavioral Health Planning Council. JPA Administrator/Clerk Olmos stated that she had forwarded the information to Executive Director Navarro and she will follow up.

Executive Director Navarro explained that the responsibility of service in jails is of the LA County Department of Mental Health; that Tri-City crisis support team and ATC (Access To Care) work in coordination with the Pomona Mental Health Court and collaborate with the LA Department of Mental Health representative on cases that are heard out of Pomona Superior Court and are residents of the three cities; that Tri-City works very closely with them to provide the services for those persons who are going to be required to seek mental health treatment in lieu of jail time.

She also stated that she will follow-up on the survey and will set a presentation to the Commission regarding what we do with those in our three cities who have found themselves facing the law enforcement and the courts.

At 3:54 p.m. Chair Tony Watson left the meeting.

Commissioner Reyes stated that the Commission should broaden its outreach to include the Native Americans since there are 265 Native Americans residing in the City of La Verne.

Executive Director Navarro stated that the event held in February was very successful for the Commission; and unfortunately as mentioned before, COVID shut us down for the remainder of the year; nevertheless, that the first goal was fully met and the second goal was met as best as could be expected under the circumstances. JPA Administrator/Clerk reported that the same commissioners continue to be absent; and those that in the past were always in attendance, continue to attend the meetings faithfully.

Executive Director Navarro stated that COVID is affecting all of us differently and is really interfering with just the way we are used to doing our lives and our business; however, it seems to be the same Commissioners that continue to miss meetings, and inquired if the Commission wished to form an AdHoc Committee to reach out to those MHC Members or if it was preferable that Tri-City staff handles it.

Vice-Chair Henderson indicated that it is important to find out the reason they are not attending Commission meetings because it might be that they are having technical problems. JPA Administrator/Clerk Olmos stated that the Commission had established that Commissioners had to notify us when they were not able to attend; and that she had not received any notifications regarding any issues that resulted in their inability to attend.

Executive Director Navarro stated that one of the goals to work on is the communication between the Commission and the Clerk, and this can be discussed for future goals about the follow-up with those Commissioners who we have not heard from lately.

A. MHC ESTABLISH ITS PRIORITY TOPICS AND/OR GOALS FOR FISCAL YEAR 2020-21.

Vice-Chair Henderson stated that the first thing to put on its priority topics or goals for next fiscal year will be working with the Commissioners that have not been able to attend meetings, and encourage them to attend. Executive Director Navarro added that we can also assess the technological needs of those Commissioners who have not been attending meetings.

Vice-Chair Henderson inquired if the topic of disparities in mental health access for our culturally diverse groups had been discussed by the Mayor's public task force.

Executive Director Navarro stated that she is in the Committee on Health and Wellness and it has not exactly gotten to the disparities part of it yet; that they are still in the crisis critical action for all of Pomona and concerned about interfacing with the Basic Needs Committee and the Housing and Educational Committees; that housing is part of the basic needs; that they will be merging with Pomona's Promise which is one of the current priority discussion.

Director of MHSA & Ethnic Services Hundal reported that the Basic Needs Committee had not discussed disparities yet because they are currently focusing on the very basic needs, such as food drives; that they will focus next on housing rights because many citizens are unable to pay their rent and are at risk of eviction, trying to figure out their rights versus the landlord's rights; that on the City of Pomona's website all the local emergency phone numbers are listed for any kind of help needed such as medical services, mental health services, food services, and housing rights.

Executive Director Navarro suggested that perhaps a goal might be some kind of campaign or outreach around mental health access disparities.

Chief Clinical Office Igrisan stated that we just learned that half of Pomona are recipients of Medi-Cal; that staff formed an African-American Family Wellness Advisory Committee to the clinical department and is expanding to advise all of Tri-City; and discussed what staff had been working on treatment options for people of color and who do not have any other avenue to express what they need.

Director of MHSA & Ethnic Services Hundal said that at the Cultural Inclusion and Diversity Committee Meeting, a subcommittee was formed for the Latino community in our community and named themselves "Adelante", a word in Spanish meaning moving forward, and staff is currently recruiting committee members.

Chief Clinical Officer Igrisan added that staff is already seeing our numbers increase and, by the very nature of who we are at Tri-City, we are going to serve people who are disproportionately affected by both COVID and racial disparities; therefore, everything we do has to be informed and culturally in a space of humility, and that our environments are welcoming to people; and staff is developing a plan to have a clear curriculum on how can we tailor a treatment compounding racism and COVID with mental health issues.

Vice-Chair Henderson recommended to extend last year's goal number three regarding impacting disparities in mental health access of culturally diverse groups, and add details at the next meeting. Commissioner Reyes concurred with Vice-Chair Henderson.

Executive Director Navarro stated that she is hearing that we've got some groups happening at Tri-City that is community focused, not just internally focused, and would really welcome and extend encouragement to Commission Members to be parts of those groups.

Discussion ensued regarding the Native American population and how to reach out to them, and the possible contacts available.

III. EXECUTIVE DIRECTOR REPORT

Executive Director Navarro announced that we have officially began our 60th year, and expressed being excited and proud for all that the agency has accomplished in the 12 years that she has been employed by Tri-City; that it has been a consistent positive and important part of the safety net of the three cities for 60 years and that she looks forward to moving forward from here to be even stronger as our whole country, and more locally, we move out of COVID and get to wherever we are going to get to in the next year; discussed some of the celebration plans pre-COVID and post COVID; that staff is trying to figure out how to make Tri-City much more of a household name for everyone in the three cities, thus, staff will work on a community evaluation to obtain data and facts about how they see Tri-City, and set the tone and the road for us for our next decade.

She the reported that we are having lots of community chats and connection, and having good participation during mental health month; and discussed data regarding mental health conditions, treatment and diagnoses for black Americans, Latin X, and Asian-American.

COMMISSION ITEMS AND REPORTS

Commissioner Reyes inquired if Tri-City can allow the Red Cross to host a blood drive in the room where the Commission holds its meetings. Executive Director Navarro replied in the affirmative and will reach out to the Red Cross to find out what their requirements would be and if our facilities are adequate.

Executive Director Navarro stated that an upside to COVID is that we are recruiting and attracting quality staff so we are off to a strong start this new fiscal year; that the governor of California and the legislature did agree to backfill County Behavioral Health with some extra dollars that they might have lost in the transition going from onsite to tele-health; that Tri-City will be able to recoup money and that our budget is strong.

PUBLIC COMMENT

There was no public comment.

ADJOURNMENT

At 4:35 p.m., on consensus of the Mental Health Commission its Regular Meeting of July 14, 2020 was adjourned. The Mental Health Commission is dark during the month of August, and its next Regular Meeting will be held on Tuesday, September 8, 2020 at 3:30 p.m. via teleconference due to the COVID-19 pandemic.

Micaela P. Olmos, JPA Administrator/Clerk



II. PRESENTATION

A. "RECOVERY MOMENTS" STORY

Staff will introduce Tri-City clients from Clinical and MHSA programs, respectively, to talk about their journey of healing and recovery.

B. STATE-REQUIRED CULTURAL COMPETENCY PLAN UPDATE AND PROCESS

Presenter: Rimmi Hundal, Director of MHSA and Ethnic Services, and her department designated staff.

C. INTRODUCTION AND ROLE OF TRI-CITY'S CULTURE, INCLUSION AND DIVERSITY COMMITTEE AND ITS 3 NEW COMMUNITYWIDE ADVISORY COUNCILS

Presenter: Rimmi Hundal, Director of MHSA and Ethnic Services, and her department designated staff.

D. 2020 DATA NOTEBOOK ON THE ISSUE OF "TELEHEALTH"

Presenter: Rimmi Hundal, Director of MHSA and Ethnic Services, and her department designated staff.

E. MHC ESTABLISHING ITS PRIORITY TOPICS AND/OR GOALS FOR FISCAL YEAR 2020-21.

At its Regular Meeting of July 14, 2020, the MHC recommended to discuss its proposed following goals:

1. To have 100% quorum at all of the regularly scheduled meetings of the Mental Health Commission; and
2. To impact disparities in mental health access of culturally diverse groups.

However, due to a lack of a quorum of its September 8, 2020 meeting, the Mental Health Commission must continue to discuss and establish its goals for Fiscal Year 2020-21.



**Tri-City Mental Health Authority
MONTHLY STAFF REPORT**

DATE: October 13, 2020
TO: Mental Health Commission of Tri-City Mental Health Authority
FROM: Toni Navarro, LMFT, Executive Director
SUBJECT: Executive Director's Monthly Report

COVID-19 OPERATIONS UPDATE

Modified operations remain in place. While the majority of direct client/participant services continue via telehealth, staff in various programs such as the Therapeutic Community Garden and all clinical programs are doing well protected sessions in the office/garden and conducting home visits as needed. Preliminary results from the Tri-City clients' and participants' survey indicate that overall 75%-85% are pleased with their telehealth services and perceive their care to be as good and/or progressing as well as it was prior to the COVID-19 changes. The Best Practices Team is preparing the results of this survey and plans to present them soon to staff—who the Executive Team hopes will feel motivated and inspired by the strong positive response and appreciative comments expressed by many of the approximately 250 respondents. The Executive Director will bring that report to the Commission in November.

From the Tri-City staff survey regarding COVID-19 modifications and concerns, the number one answer given to the inquiry about what is needed to feel comfortable to come back to work in the office was having plenty of PPE and the ability to have distance and protective barriers. Over the past month and currently, Tri-City's facilities' staff are coordinating office preparations and safety preparations with agency management as more staff return (on staggered schedules) to the office one or two days a week. Facilities' staff have secured a variety of plexiglass barrier options to meet staff and client needs, have a consistent and frequent cleaning/disinfectant schedule at each site and for the agency's transportation fleet, and have secured a significant stockpile of PPE, hand sanitizer, and disinfectant supplies.

NEW STATE LEGISLATION SUPPORTING BEHAVIORAL HEALTH

In finalizing California's Budget package for 2020-21 on October 1st, Governor Newsom approved a handful of Senate Bills that have important implications for California's county behavioral health field and its consumers. In addition to bills clarifying and elevating the value and importance of the full integration and attention to physical, mental health and substance use disorder, one bill in particular seeks to transform behavioral health care service delivery. Senate Bill 803 (SB 803) is titled Mental Health Services: Peer Support Services Certification.

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Copied here is a complete explanation of the bill prepared by the California Behavioral Health Directors' Association (CBHDA) Policy and Legislation staff:

Purpose

SB 803 establishes a statewide certification program for Peer Support Specialists and provides the structure needed to secure a federal match for Peer Support Services under Medi-Cal. The program defines the range of responsibilities and practice guidelines for Peer Support Specialists, specifies required training and continuing education requirements, determines clinical supervision requirements, and establishes a code of ethics and processes for revocation of certifications. When implemented, counties will have the option to provide Peer Support Services with Certified Peer Support Specialists and secure Medi-Cal reimbursement.

Implications

SB 803 requires the Department of Health Care Services (DHCS) to seek a federal waiver to establish a Medi-Cal demonstration or pilot project for the provision of Peer Support Services at the county level. Counties have the option to participate and provide the nonfederal share of funding for Medi-Cal reimbursable Peer Support Services provided by certified Peer Support Specialists, who will be added as a new Medi-Cal provider type.

While the waiver is being sought or soon after secured, DHCS will develop statewide requirements for counties, or an agency representing counties, to use in developing certification of Peer Support Specialists, including:

1. Define the qualifications, range of responsibilities, practice guidelines, and supervision standards for Peer Support Specialists.
2. Determine curriculum and core competencies required for certification of an individual as a Peer Support Specialist.
3. Specify Peer Support Specialist employment training requirements, including core-competencies-based training and specialized training necessary to become certified.
4. Develop fees charged for certification and recertification, subject to DHCS approval.
5. Add a Medi-Cal billing code for Peer Support Services.
6. These activities need to be completed by July 1, 2022.

Additionally, this bill authorizes, subject to DHCS approval, a county or an agency representing counties, to develop a Peer Support Specialist certification program in accordance with the statewide requirements established by DHCS by July 1, 2022 including requirements that applicants must meet to be certified as a Peer Support Specialist.

Once a certification program is developed, county behavioral health agencies can support staff with lived experience to become certified or seek to hire or contract with individuals and agencies with certified Peer Support Specialist. County employed or contracted Peer Support Specialists will be able to provide Medi-Cal reimbursable Peer Support Services. Counties will provide the non-federal share for Peer Support Services and secure federal matching funds if they opt to provide this service.

60TH YEAR CELEBRATION PLANNING

In life, the developmental phase of persons aged 60+ is characterized by reflection, reviewing of one's existence and planning for how to leave a legacy of sorts. As Tri-City proceeds through its 60th year, the Executive Team is looking to do just that for the agency from an organizational perspective. Specifically, Tri-City will present a proposal to the Governing Board at its October meeting seeking to engage a consultant that will assist Tri-City, its staff, and its community partners and stakeholders to reflect on Tri-City's role as the three cities' mental health authority; review the Agency's mission statement and its standing and contribution within the cities; and work to create a legacy plan for Tri-City's next decade based on: the communities' feedback; pending and upcoming legislative mandates; future funding and the fiscal landscape; data received about the mental health needs and treatment priorities of stakeholders; as well as the outcomes and performance of the services and programs of Tri-City. If approved, the Executive Director will bring more specific information and discuss the next steps for this process to the November Commission meeting.