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by the residents

of Pomona,
Claremont and La
Verne.

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HOPE. WELLNESS. COMMUNITY.

Let's find it together.

MISSION: By understanding the needs of consumers and families, Tri-City Mental Health Authority 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

REGULAR MEETING AGENDA

BEHAVIORAL HEALTH COMMISSION

TUESDAY, SEPTEMBER 8, 2026 AT 3:30 P.M.
MHSA ADMINISTRATION BUILDING
2001 NORTH GAREY AVENUE, POMONA, CA 91767

To join the meeting on-line click on the following link:

[https://tricitymhs-
org.zoom.us/j/88256564807?pwd=kkqbJK6SoGzBpgqkbOiP5dC000fO8A.1](https://tricitymhs-org.zoom.us/j/88256564807?pwd=kkqbJK6SoGzBpgqkbOiP5dC000fO8A.1)
Passcode: xm.T07sV

Administrative Office

1717 North Indian Hill
Boulevard, Suite B
Claremont, CA 91711
Phone (909) 623-6131
Fax (909) 623-4073

Clinical Office / Adult

2008 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
Fax (909) 865-9281

Clinical Office / Child & Fam

1900 Royalty Drive, Suite 180
Pomona, CA 91767
Phone (909) 766-7340
Fax (909) 865-0730

MHSA Administrative Office

2001 North Garey Avenue
Pomona, CA 91767
Phone (909) 623-6131
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Wellness Center

1403 North Garey Avenue
Pomona, CA 91767
Phone (909) 242-7600
Fax (909) 242-7691

Public Participation. Section 54954.3 of the Brown Act provides an opportunity for members of the public to address the Behavioral Health Commission (BHC) 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 Governing Board. Therefore, members of the public are invited to speak on any matter on or off the agenda. If the matter is an agenda item, you will be given the opportunity to address the legislative body when the matter is considered. 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.**

In-person participation: raise your hand when the Governing Board Chair invites the public to speak.

Online participation: you may provide audio public comment by connecting to the meeting online through the zoom link provided; and use the Raise Hand feature to request to speak.

Please note that virtual attendance is a courtesy offering and that technical difficulties shall not require that a meeting be postponed.

Written participation: you may also submit a comment by writing an email to sazzam@tricitymha.ca.gov. All email messages received by 12:30 p.m. will be shared with the Behavioral Health Commission before the meeting.

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 BHC less than 72 hours prior to this meeting, are available for public inspection at 1717 N. Indian Hill Blvd., Suite B, in Claremont during normal business hours.

In compliance with the American Disabilities Act, any person with a disability who requires an accommodation in order to participate in a meeting should contact Administrative Assistant Sara Azzam at (909) 451-6429 at least 48 hours prior to the meeting.

CALL TO ORDER

Chair Henderson calls the meeting to Order.

ROLL CALL

Anne Henderson – *Chair*

Wray Ryback – *Vice-Chair*

Sandra Grajeda – *GB Liaison*

Aaron Baker

Clarence D. Cernal

Sandra Christensen

Kyoni Cummings

Mildred Garcia

Frank Guzman

Laura Mundy

Janet R. Roy

Christina Vera

Hansley C. Wang

Danette E. Wilkerson

POSTING OF AGENDA

The Agenda is posted 72 hours prior to each meeting at the following Tri-City locations: Clinical Facility, 2008 N. Garey Avenue in Pomona; Wellness Center, 1403 N. Garey Avenue in Pomona; Royalty Offices, 1900 Royalty Drive #180/280 in Pomona; MHSA Office, 2001 N. Garey Avenue in Pomona; and on the TCMHA's website: <http://www.tricitymha.ca.gov>

REGULAR BUSINESS**I. APPROVAL OF MINUTES OF THE JULY 14, 2026, REGULAR MEETING OF THE BEHAVIORAL HEALTH COMMISSION****II. PRESENTATION –**

- i. **OVERVIEW OF TRI-CITY MENTAL HEALTH AUTHORITY'S MOBILE CRISIS CARE UNIT**
- ii. **OVERVIEW OF 2026 DATA NOTEBOOK AND FORMATION OF AD HOC COMMITTEE**

III. ONTSON PLACIDE, EXECUTIVE DIRECTOR MONTHLY REPORT**COMMISSION ITEMS AND REPORTS**

Commissioners are encouraged to make brief comments or request information about Behavioral Health needs, services, facilities, or special problems that may need to be placed on a future Behavioral Health Commission Agenda. In addition, this is an opportunity to provide reports on their activities.

PUBLIC COMMENT

The Public may speak regarding any Tri-City Mental Health Authority 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 Behavioral Health Commission will meet next in a Regular Meeting to be held on **Tuesday, October 13, 2026 at 3:30 p.m.** in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.



ONTSON PLACIDE, MA, LMFT
EXECUTIVE DIRECTOR



MINUTES

REGULAR MEETING OF THE MENTAL HEALTH COMMISSION July 14, 2026 – 3:30 P.M.

The Mental Health Commission Regular Meeting was held on Tuesday, July 14, 2026, at 3:30 p.m. in the MHSA Administrative Office located at 2001 North Garey Avenue, Pomona, California.

CALL TO ORDER Chair Henderson called the meeting to order at 3:30 p.m.

ROLL CALL Roll call was taken by Administrative Assistant Azzam.

MENTAL HEALTH COMMISSION

PRESENT: Anne Henderson, Chair
Aaron Baker
Patricia Carrillo
Clarence D. Cernal
Sandra Christensen
Frank Guzman
Laura Mundy
Janet R. Roy
Christina Vera
Danette E. Wilkerson

ABSENT: Wray Ryback, Vice-Chair
Sandra Grajeda, GB Member Liaison
Mildred Garcia
Kyoni Cummings
Hansley Wang

STAFF

PRESENT: Ontson Placide, Executive Director
Sara Azzam, Administrative Assistant

REGULAR BUSINESS

I. INTRODUCTION AND WELCOME OF NEW MENTAL HEALTH COMMISSION MEMBERS

Administrative Assistant Azzam provided an overview of the Mental Health Commission recruitment process and introduced newly appointed Commissioners Aaron Baker, Patricia Carrillo, Kyoni Cummings, Hansley Wang, and Christina Vera.

Commissioner Vera expressed appreciation for the opportunity to serve on the Commission. She shared that her son lives with schizophrenia and noted her previous involvement with and familiarity with Tri-City Mental Health Authority.

Commissioner Carrillo introduced herself as an employee of Pomona Unified School District and reported that she recently began graduate studies toward a Master of Social Work degree. She expressed enthusiasm about serving on the Commission, learning more about behavioral health services, and contributing to the community.

Commissioner Baker stated that he was pleased to join the Commission. He shared that he serves as a faculty member at the University of La Verne and is a licensed clinical psychologist. He expressed his appreciation for the opportunity and his interest in supporting the Commission's work.

II. APPROVAL OF MINUTES OF THE JUNE 9, 2026 REGULAR MEETING OF THE MENTAL HEALTH COMMISSION

Chair Henderson opened the meeting to Public Comment; there was none.

There being no discussion or public comment, Commissioner Cernal moved, and Commissioner Guzman seconded, to approve the Minutes from the June 9, 2026, Regular Meeting of the Mental Health Commission. The motion was carried by the following vote: AYES: Commissioner Cernal, Christensen, Guzman, Mundy, and Wilkerson; and Chair Henderson. NOES: None. ABSTAIN: Commissioners Baker, Carrillo, Mundy, and Vera. ABSENT: GB Liaison Grajeda; and Commissioners Garcia, Cummings, and Wang; and Vice-Chair Ryback.

III. PRESENTATION -- OVERVIEW OF THE TRI-CITY MENTAL HEALTH AUTHORITY'S PERMANENT SUPPORTIVE HOUSING (PSH)

Housing Manager Monzon provided an overview of the Housing First model, noting that Los Angeles County utilizes a Housing First approach that prioritizes individuals with the highest levels of need for housing placement. She explained that while many clients face significant challenges, staff work diligently to provide support and housing stability opportunities. She reported that the individuals served through these programs often represent those with the greatest housing and behavioral health needs. In response to a question from Commissioner Vera, Housing Manager Monzon confirmed that Tri-City works closely with Los Angeles County in these efforts.

Housing Manager Monzon reviewed several existing permanent supportive housing developments, including Cedar Springs, Gateway, and Park Avenue, and discussed the supportive services available to residents, such as housing navigation, employment support, benefits assistance, case management, and community resource referrals. She noted that Tri-City currently has eight housing staff members and expects to add three additional staff positions to support expanding housing initiatives.

A success story from Cedar Springs was highlighted through an email shared by a former client. The client expressed "ample gratitude" for the support provided to herself and her three children after entering housing in 2016. She reported that stable housing and supportive services helped her family regain stability, access needed mental health services, and achieve long-term success. Housing Manager Monzon noted that the family remained housed for several years before

transitioning to a family home and that the client wished to share her appreciation with the Commission.

Housing Manager Monzon also provided updates on current and future housing developments. Existing projects include Holt Family Apartments, Villa Esperanza, and Chris Hartmine. Future permanent supportive housing projects in development include Claremont Gardens, the Pomona Tiny Homes Project, and the St. Ambrose Project.

Commissioner Vera asked about funding designated for housing and whether a housing plan was still being developed. Housing Manager Monzon reported that several projects have already been identified for funding and are currently moving through final planning and implementation stages. She explained that housing funding requires extensive reporting and compliance measures to ensure resources are used appropriately.

Commissioner Guzman thanked Housing Manager Monzon for the presentation and expressed appreciation for hearing the Cedar Springs success story. He also inquired about community needs such as furniture donations. Housing Manager Monzon stated that information regarding donation opportunities would be shared and noted that housing staff assist individuals whenever possible, even when they are unable to access Tri-City resources directly.

Executive Director Placide commended Housing Manager Monzon and the Housing Team for their work and highlighted the complexity of housing funding and service delivery. He noted that housing resources must support a wide range of client needs and ongoing program operations. Executive Director Placide further commented that behavioral health agencies throughout California are undergoing significant transformation and stated that updates will continue to be provided as new information becomes available.

IV. EXECUTIVE DIRECTOR MONTHLY REPORT

Executive Director Placide provided updates regarding several agency initiatives and statewide developments. He reported that SB 707 requires agencies to provide agendas and meeting materials in threshold languages and noted that microphones have been incorporated into meetings to improve accessibility and ensure all participants can hear discussions clearly. He welcomed the Commission's newly appointed members and expressed appreciation for their willingness to serve.

Executive Director Placide announced that the Mental Health Commission will transition to the Behavioral Health Commission as part of the statewide transition from the Mental Health Services Act (MHSA) to the Behavioral Health Services Act (BHSA). He stated that bylaw amendments will be presented to the Governing Board on July 15 and that the next Commission meeting will be conducted under the Behavioral Health Commission designation.

Interim Director of BHSA & Ethnic Services Rodriguez reported that Tri-City's Integrated Plan draft had been approved and submitted to the Department of Health Care Services (DHCS). She explained that DHCS has a 30-day review period and recently released a new budget template that all counties are required to complete. She noted that all counties are experiencing similar implementation challenges and that the review process typically involves ongoing revisions and feedback between counties and the State.

Executive Director Placide stated that Tri-City is in the final stages of BHSA implementation and expressed confidence in the agency's preparedness. He emphasized that the process remains dynamic and will continue to involve collaboration with the State over the next six to twelve months. He reported that the agency's budget has increased from approximately \$55 million under MHSA to approximately \$79 million under BHSA, requiring significant expansion of programs, expenditures, billing processes, and reporting requirements over the coming years.

Executive Director Placide provided an update on recruitment efforts, reporting that approximately 235 of the agency's 265 positions are currently filled. He noted that BHSA implementation will increase staffing needs to approximately 320 positions, requiring the hiring of roughly 60 additional employees. He stated that recruitment efforts have included partnerships with outside organizations, promotional videos, and expanded outreach campaigns. He also reported that offers had been extended for key leadership positions and that a new Executive Assistant had joined the agency. He acknowledged former Executive Director Toni Navarro for securing funding that helped support training and workforce development efforts.

Executive Director Placide explained that Tri-City functions as a Behavioral Health Authority within its service area while remaining part of the Los Angeles County Mental Health Plan and maintaining a dual relationship with Los Angeles County and the State of California. He discussed recent housing funding challenges affecting Los Angeles County and noted that although additional federal funding was provided to help address housing shortfalls, those circumstances do not directly affect Tri-City clients because eligible individuals access housing services through Tri-City's dedicated funding streams.

Commissioner Vera asked about the historical BHSA housing eligibility requirements and whether the County previously required individuals to have both mental health and substance use disorders to qualify for housing services. Executive Director Placide explained that previous requirements were more restrictive and generally prioritized individuals with co-occurring mental health and substance use conditions. He noted that recent BHSA changes now allow eligibility for individuals with a mental health condition only, a substance use disorder only, or co-occurring conditions, thereby expanding access to housing resources.

Commissioner Vera asked whether the expanded eligibility criteria would result in any reduction in services. Executive Director Placide responded that no services would be reduced and noted that Tri-City continues to maintain contracts and certifications necessary to provide both behavioral health and substance use treatment services. Commissioner Vera also asked about the increase in the agency's budget. Executive Director Placide explained that the increase is associated with BHSA's transition from prevention-focused funding toward treatment-focused services. He added that Tri-City continues to pursue additional funding sources to sustain Wellness Center and early intervention programs beyond currently identified funding periods.

Commissioner Baker asked whether the larger budget creates additional funding opportunities. Executive Director Placide responded that the expanded programming structure generates additional billing opportunities tied to new service delivery requirements.

Commissioner Carrillo shared information regarding a research project on homelessness and tiny home communities, including a model developed by Alan Graham. Executive Director Placide noted that the Pomona Tiny Homes Project represents Tri-City's first effort of this kind and stated that the agency remains open to partnerships with organizations interested in supporting housing initiatives.

Commissioner Christensen shared information about Hoodies for Homeless, a nonprofit organization interested in providing services and resources to individuals experiencing homelessness. Executive Director Placide welcomed opportunities to collaborate with community partners that support individuals in need.

COMMISSION ITEMS AND REPORTS

Commissioner Guzman asked whether the Therapeutic Community Gardens program would continue. Executive Director Placide explained that the garden was originally funded through MHSA dollars but has since become self-sustaining and integrated into the agency's infrastructure. He noted that the only potential challenge in the future may be space limitations as the agency continues to expand. Commissioner Guzman also shared flyers for the upcoming Pomona Valley Pride event scheduled for August 1, noting that the event focuses on mental health and wellbeing, with particular attention to the transgender community.

Commissioner Vera requested additional Commissioner training regarding Commission responsibilities, agency budgeting, and the transition from MHSA to BHSA. She also emphasized the importance of preserving the original purpose for which Tri-City Mental Health Authority was established. Executive Director Placide explained that Tri-City was originally founded to serve individuals with moderate to severe mental health conditions and that this mission remains unchanged. He noted that MHSA expanded services to include prevention and early intervention activities but did not alter the agency's core responsibility to provide services for individuals with moderate to severe needs. He stated that while BHSA brings significant system changes and funding opportunities, those changes will not supersede Tri-City's foundational mission.

Commissioner Baker stated that, as a new Commissioner, he looks forward to receiving additional training and learning more about the scope of Tri-City's services. Executive Director Placide reported that staff are developing training materials for Commissioners.

Chair Henderson requested additional information regarding Tri-City's field-based outreach teams, partnerships with local police departments, and how those programs interface with one another. Executive Director Placide responded that presentations on these teams are planned and will be provided on an ongoing basis. He encouraged Commissioners to provide feedback regarding agency operations and services.

Commissioner Vera asked how Commissioners can best provide input regarding agency programs and services. Executive Director Placide explained that the Governing Board is responsible for governance and policy oversight, while the Commission serves as a conduit for community feedback, recommendations, concerns, and observations regarding services provided by Tri-City. He emphasized the importance of communicating community experiences, concerns, and recommendations so that the agency can identify opportunities for continuous improvement. Commissioner Carrillo reported that, through her work with Pomona Unified School District, she met with 17 licensed clinicians and compiled several pages of feedback regarding mental health services. Executive Director Placide stated that all feedback, whether positive or negative, is valuable and helps the agency evaluate and improve services. He emphasized that hearing directly from the community is critical to improving the behavioral health system and ensuring services meet community needs.

Commissioner Vera suggested rotating Commission meetings among the three member cities to increase public engagement and accessibility. She also referenced a prior Commission-supported project that ultimately was not approved at the state level and expressed interest in receiving additional guidance regarding Commission priorities, current initiatives, and future areas of focus. Executive Director Placide acknowledged the suggestion and reiterated the importance of keeping Commissioners informed as BHSA implementation continues to evolve.

PUBLIC COMMENT

Chair Henderson encouraged Commissioners and members of the public to attend upcoming Governing Board meetings and noted that participation is also available remotely through the agency's online meeting platform. She emphasized the importance of remaining engaged and informed regarding agency initiatives, BHSA implementation efforts, and policy discussions affecting Tri-City Mental Health Authority.

ADJOURNMENT

At 4:49 p.m., on consensus of the Mental Health Commission, its meeting of July 14, 2026, was adjourned. The next Regular Meeting of the Mental Health Commission will be held on **Tuesday, September 8, 2026 at 3:30 p.m.**, in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.

Ontson Placide, MA, LMFT
Executive Director



I. PRESENTATION –

i. OVERVIEW OF TRI-CITY MENTAL HEALTH AUTHORITY'S MOBILE CRISIS CARE UNIT

Presenter: Markie Sterner, Clinical Program Manager

ii. OVERVIEW OF 2026 DATA NOTEBOOK AND FORMATION OF AD HOC COMMITTEE

Presenter: Sara Rodriguez, Interim Director of MHSA & Ethnic Services



Tri-City Mental Health Authority MONTHLY STAFF REPORT

DATE: September 7, 2026

TO: Behavioral Health Commission of Tri-City Mental Health Authority

FROM: Ontson Placide, Executive Director

SUBJECT: Executive Director's Monthly Report

I. MHSA to BHSA PLANNING

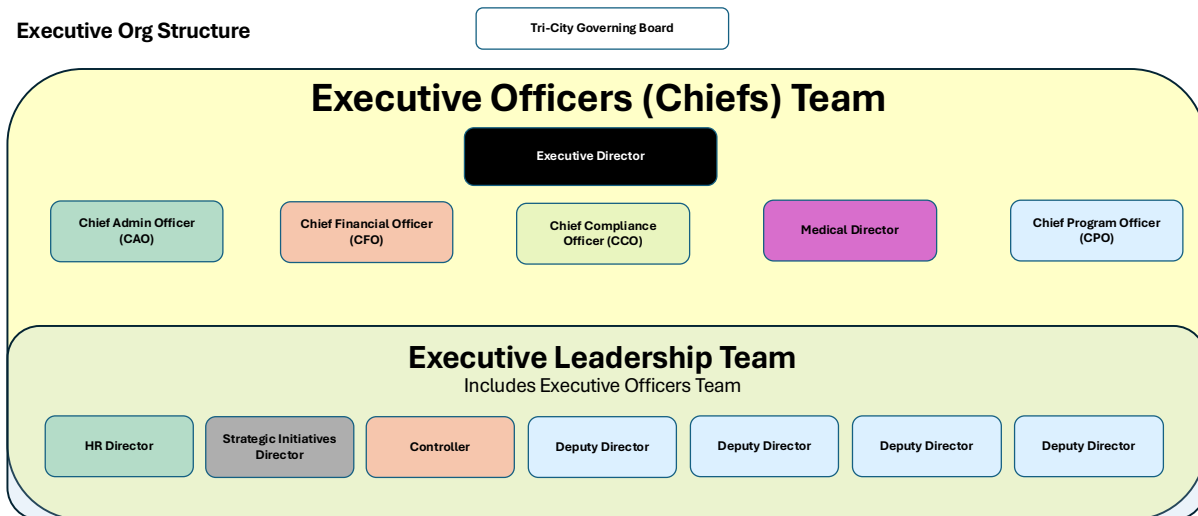
As of July 1, 2026, Tri-City Mental Health Authority officially began implementation of the Behavioral Health Services Act (BHSA). This marks the beginning of a multi-year transformation effort that will significantly expand the agency's service continuum, infrastructure, workforce, and operational capacity.

Implementation activities are currently focused on the recruitment and onboarding of more than 35 new positions, development of new programs and service lines, and the operational build-out necessary to support BHSA priorities and expanded access to care. Concurrently, Tri-City is developing the policies, procedures, clinical workflows, and quality assurance systems needed to support these new services.

To ensure fidelity to state-approved Evidence-Based Practices (EBPs), new programs must undergo certification and implementation support through designated Centers of Excellence and other DHCS-recognized training entities. In addition, Tri-City is developing standardized level-of-care and service-intensity screening tools to ensure individuals are appropriately matched to the services that best meet their clinical needs.

Significant progress has also been made in expanding Substance Use Prevention and Treatment Services (SUPT). Tri-City has successfully obtained its DHCS Substance Use Disorder Program License and is currently completing the final stages of certification through the Los Angeles County Substance Abuse Prevention and Control (SAPC) division. Once certified, the agency will be positioned to provide new SUD treatment services within its continuum of care.

To support this transformation, Tri-City continues to strengthen its leadership infrastructure. Recent additions include the appointment of Sheryll Prinz-McMillan as Chief Administrative Officer and the creation of the Strategic Initiatives Director role, now held by Erin Sapinoso, formerly the agency's Grants Manager. Additionally, the agency has expanded its executive structure to include an Executive Officers Team along with the Executive Leadership Team expansion to support organizational growth, regulatory compliance, strategic implementation, and operational excellence.



In partnership with the Los Angeles County Department of Mental Health (LACDMH), Tri-City is pursuing a new overarching contract designed to expand service authority and strengthen Tri-City's exclusivity and service delivery responsibilities within its service area. These efforts would support greater local control of behavioral health services, increase access to care for residents, and further establish Tri-City as the region's comprehensive public behavioral health provider.

II. Transition from Mental Health Commission to Behavioral Health Commission

At its July 2026 meeting, the Tri-City Governing Board approved renaming the Mental Health Commission to the Behavioral Health Commission. The name change reflects the agency's expanded scope of services and responsibilities, including the addition of Substance Use Prevention and Treatment Services (SUPT), implementation of the Behavioral Health Services Act (BHSA), and the continued integration of mental health, substance use, wellness, and recovery-oriented services. The new name more accurately represents the full continuum of behavioral health services provided by Tri-City and aligns with the agency's ongoing transformation efforts.

III. NATIONAL & STATEWIDE UPDATES IN BEHAVIORAL HEALTH

Californians to pay billions of dollars more in taxes- Senate Bill 125 implements a tax on managed care organizations to shore up Medi-Cal funding in light of cuts imposed by the federal government's budget law - H.R. 1, otherwise known as the One Big Beautiful Bill Act. The cut in federal funding for Medicaid, known as Medi-Cal in California, is offset by the managed care organization tax. That tax charges an \$8.85 tax per enrollee each month who gets their health insurance through managed care organizations. According to a budget analysis from the

Legislative Analyst's Office, the managed care organization tax stands to generate roughly \$2 billion to help increase funding for Medi-Cal health plans. [Center Square](#)

San Francisco urges Kaiser to drop behavioral health demands- Oakland, Calif.-based Kaiser Permanente is facing pushback from San Francisco, the first city to pass a resolution opposing the health system's behavioral health contract demands related to AI, layoffs and outsourcing, according to a Sept. 1 report from the Board of Supervisors. Kaiser provides care and coverage to 69,000 employees of the city and county. [Becker's Behavioral Health](#)

California AI therapy bot ban heads to governor's desk- The California Legislature passed Senate Bill 903, which would prohibit AI algorithms from providing or advertising therapy or psychotherapy in California, according to an Aug. 31 news release from Sen. Steve Padilla's office. Here are three things to know: [Becker's Behavioral Health](#)

California emergency room wait times among nation's longest, study finds- For people experiencing a mental health crisis, the wait is even longer at five hours and 14 minutes on average — almost two hours longer than everyone else in the U.S. Discharged patients are spending about 20 minutes longer in the ER than they did in 2019. [KTLA](#)

Why are drug overdose deaths declining?- From 2021 to 2023, more than 105,000 people in the U.S. died from a drug overdose each year — tens of thousands more than the already high rates seen in the lead-up to the Covid pandemic. Then, suddenly, the death rates dropped. In 2024, U.S. overdose deaths decreased 27%. Preliminary data from 2025 show another meaningful drop, though overdose mortality is still quite high. Other countries with major overdose problems also saw fewer deaths: In Scotland, there was a 13% decrease in 2024, and in Canada, 9%. [STAT](#)

Stimulant Use Disorder Might Be Providers' Next Quiet Crisis- The prevalence of stimulant use disorders has surpassed the number of individuals with opioid use disorder for the first time, fueling new challenges for providers. Stimulant use has grown in part due to an influx of cheap methamphetamine entering the U.S., with the total number of Americans now impacted by stimulant use disorder climbing to 4.5 million, according to data from the Substance Abuse and Mental Health Services Administration's annual report (SAMHSA). But unlike opioid use, there is no FDA-approved medication to curb or treat stimulant use disorder. [Behavioral Health Business](#)

END OF REPORT