



SONOMA COUNTY MENTAL HEALTH BOARD

Minutes of March 19, 2019



This Meeting:
The Hub Conference Room, 2245 Challenger Way,
Suite 100, Santa Rosa, CA 95407

Minutes are posted in draft form and after approval at www.sonoma-county.org/mhboard
Email: dhs-mhb@sonoma-county.org

Please Note: A list of commonly used abbreviations and acronyms is attached

CALL TO ORDER

Meeting called to order at 5:02 PM by Chair, Mary Ann Swanson

ROLL CALL

Present: Mary Ann Swanson, District 2 Peter McAweeney, District 4 Diana Nelson, District 2
Bob Cobb, District 4 Dick Kirk, District 1 Sherry Weyers, District 5
Fran Adams, District 2 Robert Hales, District 5

Excused: Kathy Smith

Absent: Patricia Gray, Matthew Jensen, Shellie Hadley

SRJC PEERS Coalition Representative: Maria Arreguin (not present) but Sara Stoxen (present)

Sonoma County DHS, Behavioral Health Division: Sid McColley (Section Manager of Adult, Acute and Forensic Services)

Community Members: David Cox; Susan Keller (Community Network); Erika Klohe (St. Joseph's); Laurie Petta (Goodwill); Donnell Holmes (Bucklelew); Anita LaFollette (Homeless Action); Sean Kelson (Goodwill); Grace Harris (CPI); Mary-Frances Walsh (NAMI); Kate Roberge (Goodwill); Peterson Pierre; Frank and Bill SmithWaters; and several other community members.

ANNOUNCEMENTS /PUBLIC INTRODUCTIONS & COMMENTS

- 1) You may submit agenda items for consideration prior to the Executive Committee meeting, normally held on the first Wednesday of each month, 10:30 AM to Noon. Email or call MHB clerk Rhonda Darrow (565-4850), Rhonda.Darrow@sonoma-county.org to verify the next meeting date.
- 2) There are vacancies in Districts 1, 3 and 4. If you are interested in serving on the Board, please contact Rhonda Darrow (565-4850, Rhonda.Darrow@sonoma-county.org).
- 3) Please direct all your questions to the Chair.

APPROVAL OF MINUTES

The present members approved the minutes for December 5, 2018 (all approved, except for abstentions from Fran Adams, Robert Hales and Peter McAweeney), and February 19, 2019 (all approved, except for one abstention from Bob Cobb).

Fran Adams requested a process in getting returned answers from questions posed in past MHB meetings. Mary Ann requested to have this item added to the next MHB Executive Committee Meeting agenda for 4/3/19.

CONSUMER AFFAIRS REPORT – Kate Roberge, Consumer Education Coordinator of the Consumer Relations Program of Goodwill Industries (kroberge@gire.org), and/or Guests

Kate Roberge shared update of Senate Bill 10: Mental Health Services: Peer, Parent, Transition-Age, and Family Support Specialist Certification Act.

- *Senate Bill 10 requires State Department of Healthcare Services to establish a statewide peer support specialist certification program by July of 2020.
- *The State of California defines a peer support specialist as a person 18 years old or older who has self-identified as having lived experience of recovery from mental illness and has the skills learned in formal training to deliver peer support services to promote mind/body recovery and resiliency for adults.
- *Peer support recognized in the United States, Europe and Australia as a best practice component of effective mental health support and treatment.
- *California has over 6,000 peer support specialists, yet no statewide scope of practice, standardized curriculum, training standards or supervision standards are available.
- *Right now California is one of three states (along with Arizona and South Dakota) left who do not have peer support specialist certification. There are 58 California counties who do not have reciprocal agreements. (Certification cannot be transferred from county to county).
- *Peer certification would standardize curriculum and regulation so that all counties would be on the same page. Peer specialists throughout state would be held to the same standards. Right now, each county has its own training, with no standardization.
- *Two peer support specialist certification bills were introduced recently but did not make it into law. In 2017, the bill was not supported by the Department of Healthcare Services, whose committee would not sign off on bill. It was withdrawn, rather than allowing it to die in committee. Last year, the bill made it through the legislative process, but Governor Brown vetoed it.
- *SB 10 has had a first reading on the Senate floor and will go to the State Health Commission for review on the 27th of March.
- *It is hoped that with a new governor, the bill will be successful this time around.
- *Under SB 10, peer support specialists would be able to bill Medi-Cal for services.
 - Double-edged sword. Medi-Cal billing would pay for peer services and many agencies that could not afford to hire peer specialists would be able to.
 - But Medi-Cal system and billing is very deficit-based. This means that a person's weaknesses, rather than strengths, are emphasized.
 - This goes against the philosophy and training of peer support specialists, who are taught to emphasize each person's strengths.
 - Many people are working to get the negative, deficit-based terminology out of the Medi-Cal billing process.
- *Under SB 10, the core competencies of peer support required for certification would include an understanding of:
 - The concepts of hope, recovery and wellness
 - The role of advocacy
 - Cultural competency
 - Trauma-informed care
 - Group facilitation skills
 - Self-awareness and self-care
 - Co-occurring disorders of mental health and substance abuse
 - Conflict resolution
 - Professional boundaries and ethics
 - Safety and crisis planning
 - navigation of, and referral to, other resources
 - Documentation skills and standards
 - Confidentiality
- *Under SB 10, the core requirements of a peer support specialist must:
 - Be 18 years or older
 - Have a mental health diagnosis that is self-disclosed
 - Have or have had mental health services
 - Have the willingness to share individual experience or recovery
 - Demonstrate leadership and advocacy skills
 - Have a strong dedication to recovery

- Abide by a code of ethics
- Successfully complete training and examination.

*Hopefully, SB 10 will become law, and we will join the rest of the country in having statewide peer certification.

The junior/colleges would offer the core classes and there is discussion of having those peer providers already doing the work to be “grandfathered” into these certified positions. There was a comment made about needing a certification program for peer providers with a statewide scope of practice, training standards, supervision standards or certification. The funding would come from MHSA monies. A comment was made to keep in mind that the peer providers’ duties could be on two different tracks—Medi-Cal billing and not billing Medi-Cal. It is important to have both tracks supported by peer providers. Currently, Telecare and Buckelew have hired Peer Specialists, but their services are not billed to Medi-Cal.

PUBLIC COMMENTS/CONCERNS/ACCOMPLISHMENTS

Susan Keller of Community Network gave MHB members who were not in attendance at last month’s meeting a *Toolkit for Advance Care Planning with Mental Health in Mind*.

Laurie Petta of Goodwill said there will be a May is Mental Health Month event on Thursday, May 2, 2:30 to 4:30 PM, at the Wellness & Advocacy Center providing guest speakers and tabling from different programs on stigma busting and mindfulness. NAMI will also be taking over the California Hope, Crisis Counseling Program (CCP) for fire survivors from Goodwill as of June 30, 2019.

Anita LaFollette of Homeless Action hoping for public involvement by attending the Sonoma County Community Development Commission meetings to participate in ways to alleviate homelessness.

Sean Kelson reminded everyone of *The Wellness Speaker’s Panel* at Interlink Self-Help Center, 1033-4th Street, this Friday, March 22, 2019, 1:00 to 2:30 PM. “The Wellness Speaker’s Panel is a group of individuals who share their stories of recovery in order to spread hope, educate the public, and bring humanity to the experience of having mental health challenges. Each speaker brings their unique perspective on mental health and wellness informed by their individual experiences. Please join us as we listen to their stories of hope and recovery! There will also be some time for questions and discussion including how to book them for future presentations.”

Mary-Frances Walsh shared the new NAMI Sonoma County brochure:

WHAT YOU CAN DO

Make a donation. Make hope possible.
Families who need the support NAMI Sonoma County provides call us every day. We couldn't provide these services without you. Visit www.namisoco.org to make a donation online or send a check payable to NAMI Sonoma County at 182 Farmers Lane, Suite 202, Santa Rosa, CA 95405. NAMI Sonoma County is a 501(c)(3).

Volunteer. Give back to the NAMI community.
We welcome applications from anyone who supports the mission and goals of NAMI. Because volunteering at NAMI Sonoma County requires specialized training and supervision by a staff member, we ask for a one-year commitment for most volunteer positions. Request a Volunteer Application form; email Info@namisoco.org.

Become a NAMI member. Be an advocate for mental health.
Add your voice to our efforts to advocate for better access to mental health services and end the discrimination associated with mental illness. Become a NAMI member at all three levels of the organization—national, state and local—with one payment! Join online at www.namisoco.org or request a Membership Application form; email info@namisoco.org.

NAMI Sonoma County
National Alliance on Mental Illness

NAMI Sonoma County
182 Farmers Lane, Suite 202
Santa Rosa CA 95405
Warmline: 866-960-6264
www.namisoco.org

NAMI Sonoma County helps individuals and families affected by mental illness to build better lives through education, support and advocacy.

NAMI Sonoma County
National Alliance on Mental Illness

OUR PROGRAMS

Warmline (866-960-6264)

Are you, or someone you care about, living with mental illness? We can help. The NAMI Sonoma County Warmline offers free and confidential non-crisis support and information.

- Connect with someone who understands, in English or Spanish.
- Find help navigating Sonoma County's mental health system.
- Receive referrals for mental health services, housing, legal assistance and more.
- Learn about our support groups, classes and events.
- Call or text 866-960-6264, email warmline@namisoco.org or live chat at www.namisoco.org.

Support Groups

One of the most important things you can do to support a loved one with serious mental illness is to have hope. Our free support groups nourish hope by offering shared coping strategies and practical information in a judgement-free environment.

- **NAMI Connection** is for adults (18+) living in recovery from a mental illness.
- **NAMI Family Support Group** is for family members and friends of people living with serious mental health challenges.
- **Grupo de Apoyo de Familiares de NAMI** es para familiares de las personas que viven con una enfermedad mental.
- **Wildfire Survivor Support Group** is for anyone impacted by recent California wildfires.

Support group meeting times and venues can be found online at www.namisoco.org. They are drop-in. Just come!



Classes

Do you need help encouraging a loved one to seek resources or treatment? Would you like to learn how to better handle difficulties that arise when life is impacted by mental health challenges? Our classes provide outstanding free education, skills training and support, along with the unique understanding of people with lived experience.

- **NAMI Family-to-Family** is a class designed for families, partners and friends of people with mental illness to facilitate a better understanding of mental illness and increase coping skills. Classes begin throughout the calendar year.
- **NAMI Peer-to-Peer** is a course on recovery for adults with mental health conditions looking to better understand themselves and their recovery. Taught periodically.

All classes require registration. Contact our Warmline (866-960-6264) to learn more and request an application.



NAMI Presentations Come to You

We can bring NAMI to your Sonoma County school, organization or business.

We can gear presentations toward a range of middle and high schools, colleges, faith-based groups, hospitals, mental health facilities and employers.

- **Ending the Silence:** We teach middle and high school students about the warning signs of mental illness for themselves and friends. *Ending the Silence* raises awareness and changes thinking about mental illness.
- **In Our Own Voice:** This unique presentation offers insight into the hope and recovery possible for people living with mental illness. *In Our Own Voice* challenges assumptions, attitudes and stereotypes by describing the reality of living with mental illness.
- **Mental Health 101:** This accessible introduction speaks to what mental illness is, how to recognize and support those living with mental illness, as well as how NAMI's peer-led programs can serve the community.
- **NAMI: Who We Are, What We Do:** Includes a brief history of mental health relevant to why NAMI was formed and NAMI's focus today (education, support and advocacy), as well as an overview of our programs and how to access them. Helpful to those who would like to refer people to our programs.
- **Family & Friends** is a seminar for people who have a loved one with a mental health condition, covering the topics of diagnoses, treatment, crisis preparation, self-care and NAMI and community resources.

Contact Us

To learn more, visit www.namisoco.org or call the Warmline at 866-960-6264.

SPECIAL PRESENTATION: *Sonoma County Office of Patients' Rights (Presenters: Bill and Frank SmithWaters)* *Highlights:*

The State mandates that each County has a Patients' Rights Advocate (PRA). The SmithWaters Group offers their services to Sonoma, Napa and Lake Counties. Some of their duties include monitoring licensed board and care facilities (they do inspections once a year; they just completed inspections of Le Elen facilities) and providing 5150 hold trainings. The PRA does not represent clients in court or offer referrals to attorneys. The Sonoma County clients would be referred to Legal Services of Northern California – their website link is <https://linc.net/>.

Anita LaFollette of Homeless Action shared an incident of a consumer being discharged from Memorial Hospital Emergency Room onto the streets. Frank and Bill SmithWaters said there is an inherent problem with emergency rooms and hospitals discharging procedures.

Since there is no LPS unit at the Sonoma County Main Adult Detention Facility at this time, there is no patients' rights advocate at this time.

(The SmithWaters Group brochure)

The SmithWaters Group was founded by Frank and Bill SmithWaters. With more than 50 years of combined experience working in the mental health community at the local, state and national level they have a firm commitment to ensuring that the rights of individuals receiving mental health services are upheld.

The SmithWaters Group is dedicated to ensuring that all individuals are able to thrive and live their lives in a manner that provides them with the greatest opportunity for success.

All of the staff of the SmithWaters Group have experienced life as both a provider of services and a recipient of services. We have a unique perspective of how the system functions and having that life experience is something we all draw from for effective advocacy. We value the diversity of life and incorporate that completely into our services.

The SmithWaters Group currently provides contractual direct advocacy services to the mental health community in the following counties in California:

Napa County Office of Patients' Rights
 Sonoma County Office of Patients' Rights
 Lake County Office of Patients' Rights

The SmithWaters Group

Main Office: Sacramento, Ca 95816
 707-501-3298



The SmithWaters Group

**Providing
 Mental
 Health
 Advocacy
 Services**



707-501-3298

Your Rights in the Mental Health System

Persons with mental illness have the same legal rights guaranteed all other persons by the federal constitution and laws, and the constitution and laws of the state of California, unless specifically limited by federal or state law or regulations. California Welfare and Institutions Code 5325.1

You Have the Right To:

Timely access to care, including making services available 24-hours a day, 7 days a week, when medically necessary to treat an emergency psychiatric condition or crisis condition.

Respectful treatment by mental health practitioners, agency, clinic and hospital staff members and with due consideration for your dignity and privacy.

Receive information on available treatment options and alternatives, presented in a manner appropriate to your condition and ability to understand.

Informed consent to treatment and to prescribed medication.

Request to receive a copy of your medical records, and request that they be amended or corrected.

The right to access the services of a Title IX Patients' Rights Advocate at all times.

Confidential care and record keeping.

Be free from any form of restraint or seclusion used as means of coercion, discipline, convenience, punishment or retaliation as specified in federal rules about the use of restraints and seclusion in facilities such as hospitals, nursing facilities and psychiatric residential treatment facilities where you stay for treatment.

Receive services that are culturally competent, sensitive to language, to cultural differences and ethnic backgrounds.

Participate in planning your own treatment, in developing a treatment plan that includes the goals of treatment and the services that will be delivered.

Participate in decisions regarding your mental health care, including the right to refuse treatment.

Providing Mental Health Advocacy Services

707-501-3298

Handout:

Sonoma County Office of Patients' Rights

**Quarterly Report of Activities
 October 1 – December 31, 2018**

The Sonoma County Office Patients' Rights, contracted to The SmithWaters Group, provides advocacy and education services to the mental health community under a contract with Sonoma County Division of Health and Human Services.

The Sonoma County Office of Patients' Rights is dedicated to providing full CCR Title IX advocacy services to clients residing within the county. We embrace our expanding and evolving role of provision of Patients' Rights services to the local mental health community. We meet on a regular basis not only with local community members but also with behavioral health staff and individuals from this county placed in facilities throughout the region. Our goal is to continue to build a quality advocacy system in this county that reflects the quality of services available to all residents.

We provide a multitude of direct patient's rights services to the behavioral health community of Sonoma County. As with all Title IX advocacy programs, we operate as the advocacy representative of the County Behavioral Health Director. Our access to clients and related records is provided by W&I and CCR statutory authority.

Following is descriptive highlights of a few of the services provided during this quarter with related graphs and charts. As our presence continues to grow in Sonoma County, we will continue to tailor this report to closer reflect our services in this county.

Highlights of Quarterly Activities

Death Investigation at the Crisis Stabilization Unit

This quarter saw an unfortunate incident of suicide at the CSU. The incident is under review.

Advocacy at Aurora Hospital

We continue to develop working relationships with the staff at Aurora Hospital. The Hospital Administration has been very accommodating to any needs or request that we have made. Some issues still persist with the hospital liaison but the Administrator has been able to diffuse those issues as they arise.

We continue to ensure that appropriate contact information is directly available to all patients at Aurora Hospital. We have developed a new patients' rights brochure that has been made available to all patients at this facility. Additionally, they receive the mandated patients' rights handbook. We have multiple advocates providing services onsite at Aurora. Jackie Shepherd and Michell Chisham currently provide much of the client representation in Certification Review and Riese/Medication Capacity Hearings that occurs at this facility 5 days per week. On occasion, Bill or Frank SmithWaters will be onsite for supervision and additional hearing support when not conducting client-related interviews and trainings in the community.

Certification and Riese Hearings at Aurora and the CSU

During this quarter, we represented clients in a combined total of 333 hearings – this included representation in a total of 277 – 5250 Certification Review Hearings, 31 – 5270 Hearings (extended 30 day holds), and 22 Riese Hearings. This quarter the number of clients choosing to invoke W&I 5256.3 (waiving their presence at the Certification Hearing) continues to remain constant with the reported number from previous quarters. Even though a client may choose to not participate in the hearing process, a hearing is still held and the possibility (although very insight in this county) exists that they may be released from the legal hold if the Hearing Office determines that no cause exists for the involuntary hold.

The release rate at both 5270 and 5250 hearings has improved slightly to 5.2%. Current available information indicates that average release rates statewide in counties that conduct hearings is typically 16% - 23%. We will continue to monitor this and other factors that may contribute to a low release rate. There currently appears to be no external factors resulting in the low percentage of releases other than the determination by the appointed Sonoma County Hearing Officer.

Clients, as always, are advised of the ability to file a Writ of Habeas Corpus with the Superior Court at any time during their involuntary hold.

Medication Capacity (Riese) Hearings

During this quarter a total of 22 clients were represented in medication capacity hearings. Of the 22 clients, 14 were found to lack the capacity to make medication decisions. One client was determined to have the capacity and the Riese Petition was not upheld. In 7 other instances the Riese Petition was withdrawn prior to the Hearing. We met with several Aurora doctors to review the use of the Riese process and discussed alternatives that are available—including more dialog with the patient regarding what medications have worked for them in the past. These discussion will be a regular occurrence as we strive for a system that reduces the need for forced medication.

Patients' Rights Complaints

During this quarter we processed 156 formal complaints (those complaints that required more than just a quick phone response). The largest component of those complaints relate to the legal hold process, followed by access to services. We conduct in-person interviews with clients whenever possible and when not possible we access clients by phone. As we become more integrated into the client community we undoubtedly will see an increase in the number of complaints we will be receiving.

This quarter included no complaints of mistreatment by any staff at any facility.

Education

We will continue to provide education to segments of the mental health community—and the community at large—about patients' rights and about the function of this office. We had a total of 16 educational opportunities during this quarter, including presentations to behavioral health staff, community service providers and client centers. We are currently planning expanded trainings and update education opportunities at Aurora during the coming months. We will be offering patients' rights update trainings to all nursing staff on a quarterly basis. We are currently providing training on the various legal holds—including 5150, 5250 and 5270 predominantly. The trainings we are offering have become popular as requests are being made by community service providers for a multitude of different patients' rights related topics. We continue to attempt to contact folks that we do not normally have direct contact within the community and will work closely with the county to increase that contact for additional in-service and training opportunities.

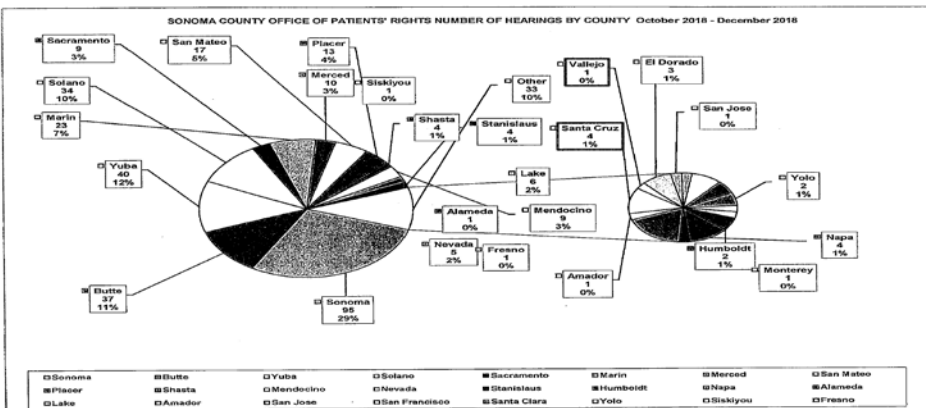
Handouts:

SONOMA COUNTY OFFICE OF PATIENTS' RIGHTS HEARINGS BY COUNTY October 2018 - December 2018 (QTR 2 2018/2019 FY)

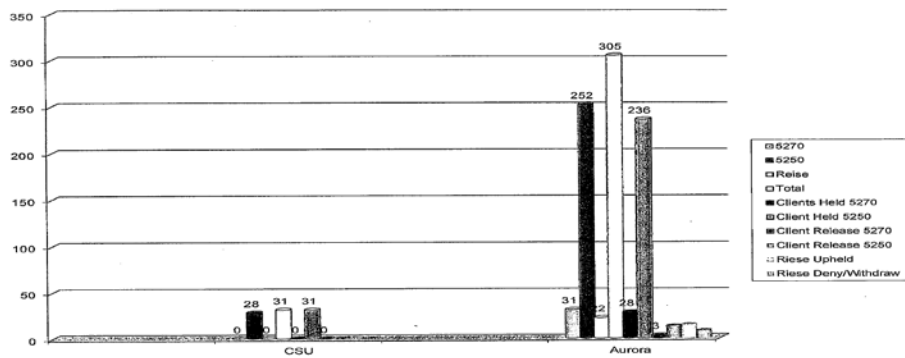
County	# of Hearings
Sonoma	95
Butte	37
Yuba	40
Solano	34
Sacramento	9
Marin	23
Merced	10
San Mateo	17
Placer	13
Shasta	4
Mendocino	9
Nevada	5
Stanislaus	4
Humboldt	2
Napa	4
Alameda	1
Lake	6
Amador	1
Santa Cruz	4
Vallejo	1
El Dorado	3
San Jose	1
Monterey	1
San Francisco	3
Santa Clara	2
Yolo	2
Siskiyou	1
Fresno	1
Total	333

Hearings by Facility and Results October 2018 - December 2018 (QTR 2 2018/2019 FY)

Facility	5270	5250	Release	Total	Client Hold 5270	Client Hold 5250	Client Release 5270	Client Release 5250	Release Upheld	Release Deny/Withdraw
CSU	0	28	0	31	0	31	0	0	0	0
Aurora	31	252	22	305	28	236	3	13	14	6
Release %	6.20%									

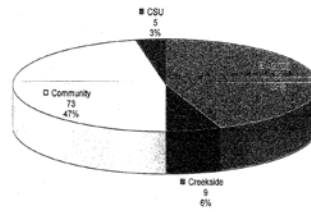
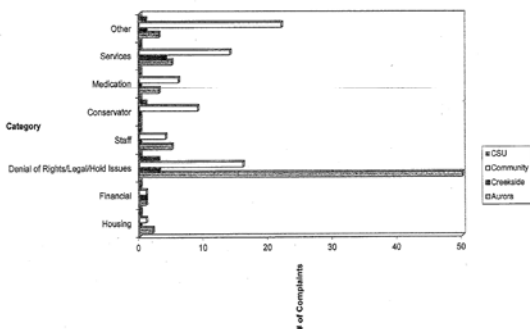


Hearings by Facility Stats October 2018 - December 2018



Sonoma County Office of Patients' Rights Complaints by Facility October 2018 - December 2018

Sonoma County Office of Patients' Rights Complaints by Category by Facility October 2018 - December 2018



SONOMA COUNTY OFFICE OF PATIENTS' RIGHTS COMPLAINTS BY FACILITY October 2018 - December 2018 (QTR 2 2018/2019 FY)

Facility	# of Complaints
Aurora	69
Creekside	9
Community	73
CSU	5
Total	156

SONOMA COUNTY OFFICE OF PATIENTS' RIGHTS COMPLAINTS BY CATEGORY BY FACILITY October 2018 - December 2018 (QTR 2 2018/2019 FY)

Category	Aurora	Creekside	Community	CSU
Housing	2	0	1	0
Financial	1	1	1	0
Denial of Rights/Legal/Hold Issues	50	3	16	3
Staff	5	0	4	0
Conservator	0	0	9	1
Medication	3	0	6	0
Services	5	4	14	0
Other	3	1	22	1
Total	69	9	73	5

BEHAVIORAL HEALTH DIRECTOR'S REPORT/HBH FISCAL UPDATE/MENTAL HEALTH SYSTEM TRANSFORMATION: Bill Carter or Designee

Sonoma County's Mental Health Services Act [MHSA] page is at www.sonoma-county.org/mhsa
 The State's MHSA page is at http://www.dmh.ca.gov/Prop_63/MHSA/default.asp
 MHSA newsletter is available at the link <http://www.sonoma-county.org/health/about/pdf/mhsa/>

Due to Bill Carter not being available, Sid stood in for him. She shared that the SCBH budget will be submitted to the Board of Supervisors very soon.

There are three jail diversion grants being developed: 1) DSH funding for Felony Incompetent to Stand Trial; 2) Board of State & Community Corrections (Proposition 47) jail diversion (misdemeanants with mental health and substance use disorder diagnoses if able to remain amenable in the community for two years in a treatment facility that offers wrap-around, housing and employment services, their charges will be dropped); and 3) CA Health Facilities Finance Authority facility for jail diversion.

Sonoma County has submitted two applications to the competitive No Place Like Home Program. One application is for 64 units, half of which would be homeless-dedicated and low income, and another 51 unit housing project.

SCBH has been billing Medicare as of November 1, 2019.

PEERS (PEOPLE EMPOWERING EACH OTHER TO REALIZE SUCCESS) COALITION INTERN REPORT –

This is the link to SRJC's webpage about current health events around the campus:

<https://events.santarosa.edu/calendar-events>

Sara Stoxen, PEERS Coalition representative, attended for Maria Arreguin, who is on spring break. She shared that last week that they met with 900 Santa Rosa High School students who volunteered to come to a talk about depression, stress, sleep and self-care. She said that they are currently not set up to meet with the other high school students but hopes they will be able to in the near future. They are preparing for May is Mental Health Month with talks around stigma reduction and what mental health means to me. She also shared the Movies for Mental Health event on April 11th (please see below).

Movies for Mental Health

When: Thu, April 11, 4pm – 6pm

Where: Bertolini Student Activities Center

Description: Join the PEERS, Students for Recovery, and the SRJC Student Nurses Association as we harness the power of thought-provoking short films and dialogue on the topic of mental health within our community! Everyone is welcome and there will be free food to enjoy! Those with questions or needing accommodations should contact Stephanie S. Sanchez at (707)524-1536 or ssanchez2@santarosa.edu

OTHER REPORTS (INCLUDING CALBHC Report – Sherry Weyers and Others

This is the link to California Association of Local Behavioral Health Boards and Commissions website:

<http://www.calbhbc.org/>

Sherry gave report from her CALBHC/C meeting in Folsom on 10/19 to 10/20/18 Highlights: First speaker was Senator Richard Pan from Sacramento region. He is a strong behavioral health advocate, especially for children and youth. He wants the Planning Council and CALBHC/C to work closely together to address unmet needs in this area and all areas of behavioral health. He addressed his concerns regarding insurance coverage and access, especially for chronic mental health conditions, management and cohesiveness. He sees a need for statewide services in integration between schools and behavioral health. Panel topic: A Robust Housing Continuum for Adults with Severe Mental Illness (related materials at www.calbhbc.com/homeless--housing.html).

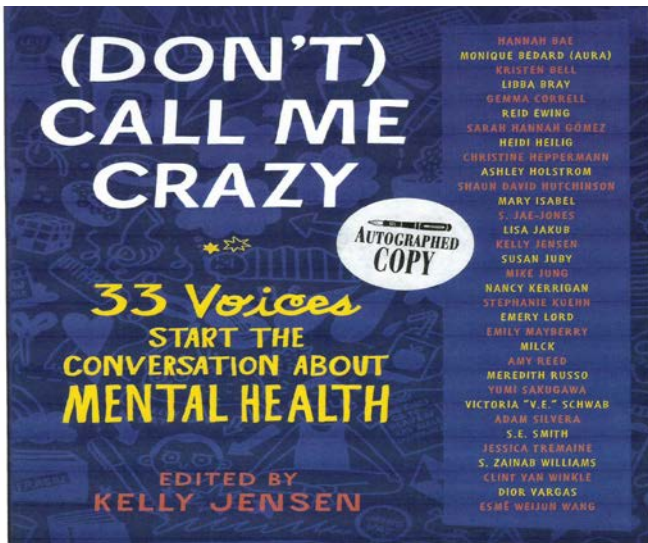
Sherry reported that she attended the CALBHC/C meeting in Oakland on 3/16/19. Handouts from the meeting were already sent out to the MHB members. Sherry felt the discussion on advocacy is particularly interesting and will be helpful to the members going forward. The Data Notebook is due by March 31, 2019. The MHB members are working on finalizing it before submission. Next year's Data Notebook topic is on trauma informed. Many MHB meetings are using Rosenberg's Rules instead of the Brown Act which has softer rules. The next Planning Council meeting will be in April 2019 in San Francisco, and the fall meeting will be in Sacramento in October 2019.

Dick shared that the PAM ad hoc committee is in the process of looking for qualitative information of SCBH services. Dick said that the site visits will be opened to all of the MHB members to attend.

MHB CHAIR'S REPORT/BOARD PLANNING: – Mary Ann Swanson

Mary Ann shared that she approached Supervisor Rabbitt's District Deputy about asking for a representative/designee of the Board of Supervisors to attend the Mental Health Board meetings. There will be more discussion on this request. Mary Ann did request that MHB members ask their District representative to attend the meetings when in the outlying areas, i.e., the next meeting on April 16 is in Cloverdale.

Mary Ann shared a recommended book:



Mary Ann shared this wise saying:

Before you speak, let your words pass through three gates:

At the first gate, ask "is it true?"

At the second gate, ask "is it necessary?"

At the third gate, ask "is it kind?"

BOARD AND PUBLIC COMMENTS:

The MHB members are scheduling a Spring Retreat. A facilitator is being asked about available times in April or May 2019.

A community member expressed their appreciation of the services their son is receiving from the Forensic Assertive Community Treatment (FACT).

Meeting adjourned at 6:59 p.m.

Respectfully submitted,

Rhonda Darrow, Mental Health Board Clerk

ABBREVIATIONS & ACRONYMS

5150	Declared to be a danger to self and/or others
AB3632	Assembly Bill - State-mandated MH services for seriously emotionally disturbed youth - discontinued by State
ACA	Affordable Care Act
ACL	All County Letter
ACT	Assertive Community Treatment (program run by Telecare)
ANSA	Adult Needs and Strengths Assessment – a “tool” for determining which services are needed by each particular adult client
AODS	Alcohol and Other Drugs Services – now a part of the Mental Health Division and called SUDS
ART	Aggression Replacement Therapy
BHD	Behavioral Health Division (Sonoma County)
CADPAAC	County Alcohol and Drug Program Administrators’ Association of California
CAHPS	Consumer Assessment of Healthcare Providers and Systems
CalEQRO	California External Quality Review Organization
CALMHB/C	California Association of Local Mental Health Boards & Commissions - comprised of representatives from many MHBs in the State
CANS	Child, Adolescent Needs and Strengths (Assessment) – helps determine which services are needed by each child client
CAPE	Crisis Assessment, Prevention, and Education Team; goes into the schools when called to intervene in student mental health matters
CAPSC	Community Action Partnership-Sonoma County
CARE	California Access to Recovery Effort
CBT	Cognitive Behavioral Therapy
CCAN	Corinne Camp Advocacy Network - Peers involved in mental health advocacy
CDC	Sonoma County Community Development Commission
CDSS	California Department of Social Services
CFM	Consumer and Family Member
CFR	Code of Federal Regulations
CFT	Child Family Team
CHD	California Human Development
CIP	Community Intervention Program
CIT	Crisis Intervention Training (4-day training for law enforcement, to help them identify and respond to mental health crisis situations)
CMHC	Community Mental Health Centers, Located in Petaluma, Guerneville, Sonoma, and Cloverdale (part of SCBH))
CMHDA	California Mental Health Directors Association
CMHL	SCBH’s Community Mental Health Lecture series - open to the public - usually takes place monthly
CMS	Centers for Medicare and Medicaid Services
CMSP	County Medical Services Program - for uninsured, low-income residents of the 35 counties participating in the State program
CONREP	Conditional Release Program (State-funded, SCBH-run, but will be turned over to the State 6/30/14)
CPS	Child Protective Service
CPS (alt)	Consumer Perception Survey (alt)
CRU	Crisis Residential Unit (aka Progress Sonoma-temporary home for clients in crisis, run by Progress Foundation)
CSU	Crisis Stabilization Unit (Sonoma County Behavioral Health’s psychiatric emergency services at 2225 Challenge Way, Santa Rosa, CA 95407)
CSAC	California State Association of Counties
CSN	Community Support Network (contract Provider)
CSS	Community Services and Support (part of Mental Health Services Act-MHSA)
CWS	Child Welfare Services
CY	Calendar Year
DAAC	Drug Abuse Alternatives Center
DBT	Dialectical Behavioral Therapy
DHCS	(State) Department of Health Care Services (replaced DMH July 1, 2011)
DHS	Department of Health Services (Sonoma County)
DPI	Department of Program Integrity
DSRIP	Delivery System Reform Incentive Payment
EBP	Evidence-basis Program or Practice
EHR	Electronic Health Record
EMR	Electronic Medical Record
EPSDT	Early and Periodic Screening, Diagnosis and Treatment (Children’s Full Scope Medi-Cal to age 21)
EQRO	External Quality Review Organization (annual review of our programs by the State)
FACT	Forensic Assertive Community Treatment
FASST	Family Advocacy Stabilization, Support, and Treatment (kids 8-12)
FQHC	Federally Qualified Health Center
FY	Fiscal Year
HCB	High-Cost Beneficiary
HIE	Health Information Exchange
HIPPA	Health Insurance Portability and Accountability Act
HIS	Health Information System
HITECH	Health Information Technology for Economic and Clinical Health Act

HSD	Human Services Department
HPSA	Health Professional Shortage Area
HRSA	Health Resources and Services Administration
IHT	Integrated Health Team (medical and MH services for adults)
IPU	Inpatient Psychiatric Unit
IRT	Integrated Recovery Team (for those with mental illness + substance use issues)
IMDs	Institutes for Mental Disease (residential facilities for those unable to live on their own)
INN	Innovation (part of MHSA)
IT	Information Technology
JCAHO	Joint Commission on Accreditation of Healthcare Organizations - accredits hospitals & other organizations
LEA	Local Education Agency
LG	Los Guilicos-Juvenile Hall
LGBQQTI	Lesbian/Gay/Bisexual/Queer/Questioning/Transgender/Intersexed (also LGBTQ)
LOS	Length of Stay
LSU	Litigation Support Unit
M2M	Mild-to-Moderate
MADF	Main Adult Detention Facility (Jail)
MDT	Multi-Disciplinary Team
MHB	Mental Health Board
MHBG	Mental Health Block Grant
MHFA	Mental Health First Aid
MHP	Mental Health Plan
MHSA	Mental Health Services Act
MHSD	Mental Health Services Division (of DHCS)
MHSIP	Mental Health Statistics Improvement Project
MHST	Mental Health Screening Tool
MHWA	Mental Health Wellness Act (SB 82)
MOU	Memorandum of Understanding
MRT	Moral Reconciliation Therapy
MST	Mobile Support Team - gets called by law enforcement to scenes of mental health crises
NAMI	National Alliance on Mental Illness
NBSPP	North Bay Suicide Prevention Project
NOA	Notice of Action
NP	Nurse Practitioner
OSHPD	Office of Statewide Health Planning and Development - the building department for hospitals and skilled nursing facilities in state
PA	Physician Assistant
PAM	Program Assessment Matrix Work Group
PATH	Projects for Assistance in Transition from Homelessness
PC 1370	Penal Code 1370 (Incompetent to Stand Trial, by virtue of mental illness)
PCP	Primary Care Provider (medical doctor)
PES	Psychiatric Emergency Services – (open 24/7 for psychiatric crises - 3322 Chanate Road)
PEI	Prevention and Early Intervention (part of Mental Health Services Act-MHSA)
PHF	Psychiatric Health Facility
PHI	Protected Health Information
PHP	Parker Hill Place - Telecare's transitional residential program in Santa Rosa
PHP	Partnership Health Plan
PIHP	Prepaid Inpatient Health Plan
PIP	Performance Improvement Project
PM	Performance Measure
PPP	Triple P - Positive Parenting Program
PPSC	Petaluma People Services Center
QA	Quality Assurance
QI	Quality Improvement
QIC	Quality Improvement Committee
QIP	Quality Improvement Policy (meeting)
QIS	Quality Improvement Steering (meeting)
RCC	Redwood Children's Center
RFP	Request for Proposals (released when new programs are planned and contractors are solicited)
RN	Registered Nurse
RRC	Russian River Counselors
ROI	Release of Information
SAR	Service Authorization Request
SB	Senate Bill

SBIRT	Screening, Brief Intervention, and Referral to Treatment
SCBH	Sonoma County Behavioral Health
SCOE	Sonoma County Office of Education
SDMC	Short-Doyle Medi-Cal
SED	Seriously Emotionally Disturbed
SELPA	Special Education Local Planning Area
SMHS	Specialty Mental Health Services
SMI	Seriously Mentally Ill
SNF (Sniff)	Skilled Nursing Facility
SOP	Safety Organized Practice
SPMI	Serious Persistent Mental Illness (or Seriously Persistently Mentally Ill)
SUDs	Substance Use Disorders Services (formerly AODS)
SWITS	Sonoma Web Infrastructure for Treatment Services
TAY	Transition Age Youth (18-25)
TBS	Therapeutic Behavioral Services
TFC	Therapeutic Foster Care
TSA	Timeliness Self-Assessment
VOMCH	Valley of the Moon Children's Home
WET	Workforce Education and Training (part of MHSA)
WPC	Whole Person Care
WRAP	Wellness Recovery Action Plan
WRAP (alt)	Working to Recognize Alternative Possibilities (alt)
Wraparound	Community-based intervention services that emphasize the strengths of the child and family
YS/Y&F	Youth Services/Youth & Family (Sonoma County Behavioral Health)
YSS	Youth Satisfaction Survey
YSS-F	Youth Satisfaction Survey-Family Version