
State of California

**MENTAL HEALTH SERVICES
OVERSIGHT AND ACCOUNTABILITY COMMISSION**

Minutes of Teleconference Meeting
April 22, 2021

MHSOAC
1325 J Street, Suite 1700
Sacramento, CA 95814

920-3349-3807; Code 723810

Lynne Ashbeck
Chair
Mara Madrigal-Weiss
Vice Chair
Toby Ewing, Ph.D.
Executive Director

Members Participating:

Lynne Ashbeck, Chair
Mara Madrigal-Weiss, Vice Chair
Mayra Alvarez
Ken Berrick
John Boyd, Psy.D.
Keyondria Bunch, Ph.D.

Steve Carnevale
Shuonan Chen
Itai Danovitch, M.D.
David Gordon
Gladys Mitchell
Tina Wooton

Members Absent:

Sheriff Bill Brown
Assembly Member Wendy Carrillo
Khatera Tamplen

Staff Present:

Toby Ewing, Ph.D., Executive Director
Filomena Yeroshek, Chief Counsel
Norma Pate, Deputy Director, Program,
Legislation, and Administration

Brian Sala, Ph.D., Deputy Director,
Research and Chief Information Officer

[Note: Agenda Item 2 was taken out of order. These minutes reflect this Agenda Item as listed on the agenda and not as taken in chronological order.]

CALL TO ORDER AND WELCOME

Chair Lynne Ashbeck called the teleconference meeting of the Mental Health Services Oversight and Accountability Commission (MHSOAC or Commission) to order at 9:03 a.m. and welcomed everyone.

Chair Ashbeck welcomed Steve Carnevale and Shuonan “Shuo” Chen to the Commission. Commissioners Carnevale and Chen introduced themselves.

Chair Ashbeck reviewed the meeting protocols.

Announcements

Chair Ashbeck stated the next MHSOAC meeting is scheduled for Thursday, May 27th. The agenda will be posted on May 17th.

Chair Ashbeck asked the Committee Chairs to update the Commission on the work of the Committees:

Research and Evaluation Committee Update

Commissioner Danovitch, Chair of the Research and Evaluation Committee, provided a brief update on the activities and accomplishments of the Research and Evaluation Committee:

- The Committee held a Data Forum in March and presented the Commission’s latest dashboards on fiscal transparency, programs that are supported by the Mental Health Services Act (MHSA), and disparities.
- A Subcommittee created by the Research and Evaluation Division has been developing a strategy around research and evaluation and will be meeting next month.
- The Research and Evaluation team submitted an abstract for the American Public Health Association annual meeting in October. The abstract is on a study that evaluates the service needs of Full-Service Partnership (FSP) clients who have a child in the welfare system and the impact of FSP services on parent and child reunification. The team will use data to examine the relationship between involvement in services such as FSPs and outcomes such as parent and child reunification or avoidance of criminal justice involvement.
- The Research and Evaluation team also published an article in an SAS publication on the Commission’s use of data and data analytics. The data linkage work connecting different databases to make the data available and interpretable will be featured on May 18th through 20th, in an SAS global forum, a worldwide event that attracts over 25,000 professionals. Due to the COVID-19 pandemic, this event will be held remotely.

CLCC Update

Commissioner Alvarez, Chair of the Cultural and Linguistic Competency Committee (CLCC), provided a brief update on the activities and accomplishments of the CLCC:

- The CLCC met for the second time on April 12th as a continuation of the first meeting which was held in March.
- The second meeting consisted of additional discussion on the Solano County Interdisciplinary Collaboration and Cultural Transformation Model (ICCTM) Innovation Project. This model was presented at a previous Commission meeting and demonstrated the effectiveness in reaching Filipino-American, Latino, and LGBTQ communities in Solano County. The Committee had an opportunity to hear more about the collaborative and to identify opportunities to expand that approach to report back to the Commission.
- The Committee provided input on the importance of community leadership in program implementation, recognizing that the voices of the most impacted individuals must be at the table. The Committee discussed how to bring that to life with this project and how to ensure that lessons learned are applied to this model in additional counties.
- The Committee heard a presentation from Executive Director Ewing on the funding proposal that seeks to leverage the work of the California Reducing Disparities Project (CRDP) and its pilot projects and initiatives that are led by community-based organizations that serve communities of color and other marginalized communities. This is also a follow-up from a previous Commission meeting where the Committee was charged with identifying opportunities that exist to expand the CRDP and work in partnership with counties to address racial inequities in the mental health system.
- The Committee specifically discussed a proposal to contract with a statewide technical assistance provider that assists community-based organizations in their efforts to collaborate with local county behavioral health departments. Feedback received from the Committee was to encourage the Commission to move forward as expeditiously as possible, given the multiple crises that have impacted the mental health and well-being of communities, and to assist community organizations in building relationships with behavioral health departments to address the mental health conditions resulting from the COVID-19 pandemic as well as those that existed prior to the pandemic.
- Additional Committee meetings were added to the calendar in response to the need for important discussion on these topics. The next CLCC meeting is scheduled for May 13th.

CFLC and EPI Plus Advisory Committee Updates

Chair Ashbeck stated Commissioner Tamplen, Chair of the Client and Family Leadership Committee (CFLC) and the Early Psychosis Intervention Plus (EPI Plus) Advisory Committee, was unable to be in attendance. A summary of the Committees' activities is included in the meeting packet.

Roll Call

Filomena Yeroshek, Chief Counsel, called the roll and confirmed the presence of a quorum.

INFORMATION

1: Public Hearing on Prevention and Early Intervention

Presenters:

- Vilma Reyes, Psy.D., Clinical Supervisor/Associate Community Mental Health Initiative Director
- Joy D. Osofsky, Ph.D., Paul J. Ramsay, Chair of Psychiatry, and Barbara Lemann, Professor of Child Welfare, Louisiana State University Health Sciences Center
- Paula Allen, Global Leader and SVP, Research and Total Wellbeing, Morneau Shepell
- Andreea L. Seritan, M.D., Professor of Clinical Psychiatry, UCSF Department of Psychiatry and Behavioral Sciences

Chair Ashbeck stated this work is led by Vice Chair Madrigal-Weiss and Commissioner Alvarez. The Commission has been working to advance prevention and early intervention of mental health statewide. This project was initiated by Senate Bill (SB) 1004. Prior to the COVID-19 Pandemic, the Subcommittee held two in-person meetings with approximately 110 attendees and has recently completed a series of virtual events, including ten listening sessions and three forums, which engaged nearly 800 Californians from across the state. Written summaries are being produced and will be publicly disseminated for each event. Video recordings of the three forums will be available on the Commission's YouTube channel.

Chair Ashbeck stated today's hearing is the second hearing before the Commission on prevention and early intervention. The first hearing highlighted key concepts and opportunities for population-based prevention and early intervention. Today's hearing will explore key concepts and opportunities for prevention and early intervention across the lifespan and place-based approaches to prevention and early intervention to meet people where they learn, work, connect with social networks and cultural practices, and receive care and support. She asked the members of the panel to give their presentations.

Vilma Reyes, Psy.D.

Vilma Reyes, Psy.D., Clinical Supervisor/Associate Community Mental Health Initiative Director, provided an overview, with a slide presentation, of the challenges to the well-being of Latinx immigrant families with young children, including those resulting from the COVID-19 pandemic and impacts on existing or new mental health inequities; opportunities to address mental health disparities during early childhood, including addressing risk factors and promoting protective factors experienced by members of

diverse communities; and policies and practices that should be prioritized by the state to promote well-being among parents and their children up to age five.

Dr. Reyes stated trauma extends beyond life experiences that have caused adversity and harm to individuals and families to the systems that are not questioned and the adverse childhood experiences (ACEs) that are not assessed, but these things make huge impacts in the development of individuals. The majority of harm being presented to the mental health systems support was either caused, exacerbated, or maintained because of structural racism and other structural traumas. This leads children to believe they are fundamentally unsafe. Messages over time from the early years of unsafety cause a loss of the sense of control, connection, and meaning. This can be changed but the source of healing must be embedded in the outer layer. It is important to create healing systems and to put trauma-reducing practices into place that are safe, supportive, and healing.

Joy D. Osofsky, Ph.D.

Joy D. Osofsky, Ph.D., Ramsay Chair of Psychiatry and Lemann Professor of Child Welfare, Louisiana State University Health Sciences Center, provided an overview, with a slide presentation, of the impacts of the COVID-19 pandemic on children, adolescents, and schools. She stated COVID-19 differs from other disasters because of the social anxiety and indefinite uncertainty it has caused. She stated the importance of routines and structure, concentrating on things that can be controlled, and incorporating ways to stay healthy and to relate to other students safely in school settings as ways to support the emotional and mental health needs of students as they return to school. She stated structure and predictability is important to support resilience in children during these times of indefinite uncertainty.

Dr. Osofsky stated her organization revised their list of Ten Considerations for Mental Health Professionals Helping in Schools Following Disasters to relate to the COVID-19 pandemic. The ten considerations, which were not included in her original presentation materials, are as follows:

1. Remember that the entire school community and their families have been impacted by the COVID-19 pandemic – school administrators, teachers, staff, support personnel, and students.
2. Recognize that each school has its own culture. It is important to learn the culture of the school as well as the community.
3. Is the school facility adequately prepared to institute the necessary structural and physical precautions that are needed for safety?
4. The way you start a relationship with a school system will set the tone for your work.
5. For mental health professionals or counselors, define your role in the school before providing services, and determine if your organization has an agreement and what your role will be with the school district – this will impact how referrals and confidentiality are handled.

6. Work with the school system to identify what their needs are following COVID-19.
7. It is important to be flexible when working in schools.
8. It may be helpful to talk to additional staff at the school.
9. With COVID-19, like other major disasters, it is important to recognize that everyone has been impacted in some way.
10. Parents and caregivers are always important.

Paula Allen

Paula Allen, Global Leader and Senior Vice President, Research and Total Wellbeing, Morneau Shepell, provided an overview, with a slide presentation, of workplace mental health, the Mental Health Index (MHI), which offers a clear measure of mental health in working populations over time, and the social determinants of mental health that the workplace can influence, such as access to health care, income equality, and job security. She stated mental health is the most important core factor in overall well-being and is a collective responsibility. It impacts virtually everything – quality of life, productivity at work, and, ultimately, how successful their organizations can be based on their contribution.

Ms. Allen stated the MHI shows that mental health of working Americans declined since the COVID-19 pandemic and continues to be strained. She noted that the mental health score for managers is lower than it is for non-managers. She stated employees with better employer support have better MHI scores. She stated the importance of prioritizing employee well-being in the workplace. The Sustainability Accounting Standards Board (SASB) is one of many working toward adding mental health to environmental, social, and governance (ESG) frameworks.

Ms. Allen stated workplace mental health and everything organizations can do to be helpful are not onerous. Those things such as empathy, training, and resources help make a meaningful difference in the lives of their employees, and in turn make a meaningful difference in the economy. Those things just need to be done. A major barrier is the lack of knowledge in most organizations of how critically important this is and how simple it can be integrated into business plans. This is the work that needs to be done.

Andreea L. Seritan, M.D.

Andreea L. Seritan, M.D., Professor of Clinical Psychiatry, UCSF Department of Psychiatry and Behavioral Sciences, provided an overview, with a slide presentation, of the impacts of the COVID-19 pandemic on the mental health of older adults, opportunities for prevention and early intervention within older adult populations and strategic settings for interventions, and policies and practices that should be prioritized by the state to promote prevention and early intervention in mental health among older adults. She suggested the continued use of telepsychiatry beyond the COVID-19 pandemic, screening using tools validated with diverse populations, increased access to mental health care services, and better reimbursement of services provided with an

interpreter. She stated all health care providers should be trained to care for older adults. It is important to find solutions now and not to wait for the next crisis.

Commissioner Questions and Discussion

Vice Chair Madrigal-Weiss acknowledged importance of not just training but intentional, systemic, trauma-informed tools and practices in schools. She stated that students have said their first priority is an emotional safe place, and schools should be responsive to that need.

Commissioner Alvarez highlighted the importance of thinking beyond traditional definitions of what Prevention and Early Intervention can be to better meet the needs of our communities in the settings where they are, whether it is the workplace, schools, or homes. She acknowledged the unique opportunity to reform the mental health system to be more responsive to communities when updating the PEI regulations.

Commissioner Berrick stated that the information presented can be used develop a roadmap and action plan to support young people and adults in the coming months.

Commissioner Wooton acknowledged the importance of workplace mental health and having a diverse workforce to meet the needs of communities. She highlighted the work that social workers and first responders take on every day, and the value of making employees feel safe.

Public Comment

Jesus Sanchez, Co-Founder and Executive Director, Gente Organizada, spoke about how restrictive prevention and early intervention regulations are on communities. The speaker stated their organization works with a youth group that advocates for mental health services and stigma reduction. In local efforts, they have been frustrated at the lack of responsiveness and investments in youth and that prevention and early intervention funds are inaccessible, which compounds existing inequities in communities and sends thousands of youths into the criminal justice system without giving most of them an opportunity to address their challenges and trauma. Easing restrictions can save lives and empower service providers to be responsive to the community. The speaker suggested centering investment in children and youth with non-traditional approaches and school-based mental health as strategies to achieve prevention and early intervention.

Jesus Sanchez stated several individuals from their organization tried to participate in this meeting and make public comment but had to log off. The speaker asked the Commission to allow these individuals to provide their public comment via email.

Josue Garcia-Minjares, Student, Cal Poly Pomona, and Member of a Pomona social action group, spoke about how restrictive prevention and early intervention regulations impact lives in Pomona. The speaker shared their story of living with major depressive disorder and the impacts it has on their ability to perform in society. The speaker stated they have dedicated their life to advocating for mental health resources and sharing resources to their community in the form of conferences, workshops, and healing circles.

Josue Garcia-Minjares stated one way for individuals to receive help earlier is if local mental health institutions have more freedom to spend their prevention and early intervention funds on timely and responsive investments. The speaker urged the Commission to ease PEI funding regulations to address issues before they get out of control, which will save individuals' futures and help them get back on track and lead productive lives.

Steve Leoni, consumer and advocate, stated recovery largely requires the elements being discussed today. The speaker agreed with Dr. Reyes that the sense of control, connection, and meaning and bringing intentionality and mindfulness to problems is central. The speaker stated they also agreed with the point that individuals heal through relationships, which is part of the issue behind peer certification. The speaker suggested that the Commission find a way, while pursuing the work on evaluation and building the database, to measure how well programs and counties are doing in fostering relationships. The speaker suggested sharing the information presented during the panel discussion with legislators.

Carol Sewell, California Commission on Aging, stated the issue of older adult mental health is often overlooked. The speaker asked the Commission to make time at a future meeting for Dr. Seritan to more fully present her material. The older adult population is dependent upon the outreach of community-based organizations. The speaker stated the need for strong connections between the mental health network and the area agencies on aging and the aging and disability resource connections in California. There needs to be a community focus on making that happen. The older adult population needs to remain an important component of the prevention and early intervention outreach.

Mark Karmatz, consumer and advocate, asked how peer workers are being supported in the older adult and school populations.

BREAK

[Note: Agenda Item 2 was taken out of order and was heard after Agenda Item 3.]

ACTION

2: Award Early Psychosis Intervention Plus (EPI Plus) Phase 2 Grants

Presenter:

- Tom Orrock, Chief of Stakeholder Engagement and Grants

Chair Ashbeck stated the Commission will consider awarding EPI Plus Grants to the highest scoring applications received in response to the Request for Applications for the Early Psychosis Intervention Plus Phase 2 Grants. She asked staff to present this agenda item.

Tom Orrock, Chief of Stakeholder Engagement and Grants, provided an overview, with a slide presentation, of the challenge of available services for early psychosis, Assembly Bill (AB) 1315, timeline, goals, and evaluation of the EPI Plus Program Phase 2 Grants. He announced the applicants with the highest overall scores as follows:

New or Existing Program Category

- Santa Clara County

Hub and Spoke Program Category

- Nevada County

Mr. Orrock stated staff has emailed summaries of these programs to Commissioners and will also post them on the Commission website.

Commissioner Questions and Discussion

Chair Ashbeck asked for a motion to approve the EPI Plus Phase 2 Grant awards.

Vice Chair Madrigal-Weiss moved the staff recommendation.

Commissioner Boyd seconded.

Public Comment

Richard Gallo, Volunteer ACCESS Ambassador, spoke in support of the EPI Plus Phase 2 Grant awards.

Stacie Hiramoto, Director, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO), spoke in support of the EPI Plus Phase 2 Grant awards.

Action: Vice Chair Madrigal-Weiss made a motion, seconded by Commissioner Boyd, that:

For each of the grants, the Commission authorizes the Executive Director to:

- *Issue a Notice of Intent to Award EPI Plus Grants to the two highest scoring applicants in each category:*
 - Santa Clara County – New or Existing and*
 - Nevada County – Hub and Spoke*
- *Notify the Commission Chair and Vice Chair of any protests within two working days of the filing and adjudicate protests consistent with the procedure provided in the Request for Applications.*
- *Execute the contracts upon expiration of the protest period or consideration of protests, whichever comes first.*

Motion carried 9 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted “Yes”: Commissioners Berrick, Boyd, Carnevale, Chen, Gordon, Mitchell, and Wooton, Vice Chair Madrigal-Weiss, and Chair Ashbeck.

ACTION

3: Fresno County Innovation Plans

Presenter:

- Ahmad Bahrami, MBA, Division Manager-Public Behavioral Health/Equity Services Manager, Fresno County Department of Behavioral Health

Chair Ashbeck recused herself from the discussion and decision-making with regard to this agenda item pursuant to Commission policy. She asked Vice Chair Madrigal-Weiss to facilitate this agenda item.

Vice Chair Madrigal-Weiss stated the Commission will consider approval of \$1,000,000 in Innovation funding for Fresno County's Suicide Prevention Follow-Up Call Program Innovation Project and \$2,400,000 for their California Reducing Disparities Project (CRDP) Evolutions Innovation Project. She asked the county representative to present this agenda item.

Ahmad Bahrami, MBA, Division Manager-Public Behavioral Health/Equity Services Manager, Fresno County Department of Behavioral Health, provided an overview, with a slide presentation, of the need, proposed project to address the need, and budget of the proposed CRDP Project Evolutions Innovation Project. He stated the county is seeking to fund the three CRDP projects at their current level as part of the sustainability approach.

Mr. Bahrami continued the slide presentation and discussed the need, proposed project to address the need, and budget of the proposed Suicide Prevention Follow-Up Call Program Innovation Project. He stated the county plans to adapt the Follow-Up Call program model in a way that may help better inform suicide prevention activities and interventions in the future.

Commissioner Questions and Discussion

Vice Chair Madrigal-Weiss asked for a motion to approve Fresno County's CRDP Evolutions Innovation Project.

Commissioner Gordon moved the staff recommendation.

Commissioner Wooton seconded.

Public Comment

Stacie Hiramoto spoke in support of the proposed Fresno County Innovation Project.

Julie Snyder, Steinberg Institute, spoke in support of the proposed Fresno County Innovation Project.

Action: Commissioner Gordon made a motion, seconded by Commissioner Wooton, that:

The Commission approves Fresno County's Innovation Plan as presented as follows:

Name: California Reducing Disparities Project Evolutions

Amount: Up to \$2,400,000 in MHSA Innovation funds

Project Length: Three (3) Years

Motion carried 8 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted "Yes": Commissioners Berrick, Boyd, Carnevale, Chen, Gordon, Mitchell, and Wooton, and Vice Chair Madrigal-Weiss.

Vice Chair Madrigal-Weiss asked for a motion to approve Fresno County's Suicide Prevention Follow-Up Call Program Innovation Project.

Commissioner Wooton moved the staff recommendation.

Commissioner Berrick seconded.

Action: Commissioner Wooton made a motion, seconded by Commissioner Berrick, that:

The Commission approves Fresno County's Innovation Plan as presented as follows:

Name: Suicide Prevention Follow-Up Call Program

Amount: Up to \$1,000,000 in MHSA Innovation funds

Project Length: Three (3) Years

Motion carried 8 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted "Yes": Commissioners Berrick, Boyd, Carnevale, Chen, Gordon, Mitchell, and Wooton, and Vice Chair Madrigal-Weiss.

Chair Ashbeck rejoined the meeting.

ACTION

4: Approve March 25, 2021, MHSOAC Meeting Minutes

Chair Ashbeck stated the Commission will consider approval of the minutes from the March 25, 2021, teleconference meeting.

Chair Ashbeck asked for a motion for approval of the minutes.

Vice Chair Madrigal-Weiss made a motion to approve the March 25, 2021, teleconference meeting minutes.

Commissioner Berrick seconded.

Public Comment

No members of the public addressed the Commission.

Action: Vice Chair Madrigal-Weiss made a motion, seconded by Commissioner Berrick, that:

- *The Commission approves the March 25, 2021, Teleconference Meeting Minutes as presented.*

Motion carried 7 yes, 0 no, and 2 abstain, per roll call vote as follows:

The following Commissioners voted "Yes": Commissioners Berrick, Boyd, Gordon, Mitchell, and Wooton, Vice Chair Madrigal-Weiss, and Chair Ashbeck.

The following Commissioners abstained: Commissioners Carnevale and Chen.

GENERAL PUBLIC COMMENT

Richard Gallo stated the Santa Cruz County Mental Health Advisory Board met last Thursday and the administrators claimed that the county will receive a decrease in MHSA funding. The speaker stated the Department of Health Care Services (DHCS) website does not address this topic. The speaker asked for more information on future MHSA funding to counties.

Chair Ashbeck asked staff to respond to Richard Gallo's question.

Executive Director Ewing stated there are factors that make it difficult to answer this question. One of these is that the Department of Finance has issued information that suggests it must reconcile prior year allocations. There is as much as a \$100 million reduction in MHSA funds going to counties in prior fiscal years. This happens because the state projects the amount of funding available in a given fiscal year and the reconciliation process takes some time. This means that counties will need to make adjustments in terms of the amount of funding that is currently available based on the need to reimburse the state, depending on how their allocation was given to them over time and whether or not it was spent during the fiscal year in question.

Executive Director Ewing stated, at the same time, the economy is currently making it difficult to forecast the MHSA revenues that will be available in future years. The January revenue projection from the Department of Finance shows an increase of approximately \$100 million from the current fiscal year to the new fiscal year, and new projections will come out within the next 60 days from the Department of Finance on what can be expected.

Stacie Hiramoto welcomed the new Commissions and stated REMHDCO looks forward to working with them.

Stacie Hiramoto asked the Commission to take up SB 106, Mental Health Service Act: innovative programs, which is of great concern to the mental health community at large at the state level. The speaker requested putting this bill on the agenda for discussion at the next Commission meeting.

Theresa Comstock, Executive Director, California Association of Behavioral Health Board and Commissions (CALBHB/C), asked the Commission to consider augmenting the MHSOAC Stakeholder Advocacy Contracts budget to include an additional amount specifically for stakeholders who serve as members of boards and commissions. The speaker stated current expenditures related to the contract with the MHSOAC total over

\$115,000 but the contract is at \$55,500. The speaker stated a letter with their full comment has been sent to Chair Ashbeck and staff.

ADJOURNMENT

There being no further business, the meeting was adjourned at 12:35 p.m.