

Executive Committee Teleconference Meeting

AGENDA

May 9, 2013

2:30 p.m. – 2:50 p.m.



**Call-In Information: 1-877-339-2412,
Conference Code: 2250381321**

Teleconference Meeting Locations:

Marriott Cal Expo
1782 Tribute Road
Sacramento, CA 95815
(916) 929-7900

San Bernardino County
268 West Hospitality Lane, Suite 400
San Bernardino, CA 92415
(909) 382-3101



CalMHSA Executive Committee Teleconference

Agenda

Thursday, May 9, 2013

2:30 p.m. – 2:50 p.m.

In compliance with the Americans with Disabilities Act, if you are a disabled person and you need a disability-related modification or accommodation to participate in this meeting, please contact Laura Li at (916) 859-4818 (telephone) or (916) 859-4805 (facsimile). Requests must be made as early as possible, and at least one full business day before the start of the meeting.

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

1. CALL TO ORDER

2. ROLL CALL AND INTRODUCTIONS

3. INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT - The Executive Committee welcomes and encourages public participation in its meetings. This time is reserved for members of the public (including Stakeholders) to address the Committee concerning matters on the Agenda, however due to duration and single issue on this agenda time will be limited to two minutes per person and ten minutes total.

For Agenda items, public comment will be invited at the time those items are addressed. Each interested party is to indicate their interest at the request of the Chair upon conclusion of Committee discussion of each item. When it appears there are several members of the public wishing to address the Committee on a specific item, at the outset of the item, the Committee Chair may announce the maximum amount of time that will be allowed for presentation of testimony on that item.

Since this meeting is by teleconference, members of the public will have the option of going to one of the identified meeting sites, or calling in. For public comment, and comment on any agenda item(s) and/or non-agenda item(s), first comments will be requested from each noticed location, then from persons who have called in. Members of the public calling in are requested to send an email to calmhsa@georgehills.com during the meeting stating their name and the subject of their comment (emails must be received prior to moving to the next agenda item).

4. APPROVAL OF AGENDA AS POSTED (OR AMENDED)

- 5. CONSENT CALENDAR** – If the Committee would like to discuss any item listed, it may be pulled from the Consent Calendar
- A. Minutes from the January 24, 2013 Executive Committee Teleconference 5
 - B. Minutes from the February 15, 2013 Executive Committee Meeting 11
- Recommendation: Approval of the consent calendar.**
- 6. PROGRAM MATTERS**
- A. SDR Consortium 18
- Recommendation: Authorize conduct of SDR consortium by CalMHSA staff effective immediately. Authorize contract for up to \$1,000,000 between CalMHSA and staff employer George Hills Company for such work, with provisions similar to the prior contracts negotiated with MHCC. The contract's administrative fee shall not exceed standard practice with other CalMHSA contractors. Authorize Wayne Clark and Scott Gruendl to negotiate and sign contract with George Hills Company consistent with Board's authorization.**
- 7. GENERAL DISCUSSION**
- A. Report from CalMHSA President – Wayne Clark 30
 - Other
- Recommendation: Discussion and/or action as deemed appropriate.**
- 8. CLOSING COMMENTS** - This time is reserved for comments by Committee members and staff to identify matters for future Committee business.
- A. Committee
 - B. Staff
- 9. ADJOURNMENT**

CONSENT CALENDAR
Agenda Item 5

SUBJECT: Consent Calendar

BACKGROUND AND STATUS:

The Consent Calendar consists of items that require approval or acceptance but are self-explanatory and require no discussion. If the Executive Committee would like to discuss any item listed, it may be pulled from the Consent Calendar.

- A. Minutes from the January 24, 2013 Executive Committee Teleconference
- B. Minutes from the February 15, 2013 Executive Committee Meeting

RECOMMENDATION:

Approval of the consent calendar.

REFERENCE MATERIALS ATTACHED:

- Minutes from the January 24, 2013 Executive Committee Teleconference
- Minutes from the February 15, 2013 Executive Committee Meeting



"A George Hills Company Administered JPA"

CalMHSA Executive Committee Meeting Minutes from January 24, 2013

Teleconference start time: 2:35 p.m.

ROLL CALL:

MEMBERS PRESENT:

Wayne Clark, PhD, Monterey County
Maureen Bauman, LCSW, Placer County
Karen Baylor, PhD, LMFT, San Luis Obispo County
Scott Gruendl, MPA, Glenn County, Superior Region
Brad Luz, PhD, Sutter/Yuba Counties, Central Region
Rita Austin, LCSW, Tuolumne County, Central Region
William Arroyo, PhD, Los Angeles County, Los Angeles Region (*not at a noticed location*)
CaSonya Thomas, MPA, CHC, San Bernardino County, Southern Region
Karen Stockton, PhD, MSW, Modoc County, Superior Region

MEMBERS ABSENT:

Michael Kennedy, MFT, Sonoma County, Bay Area Region
Jo Robinson, San Francisco City & County, Bay Area Region
Marvin Southard, DSW, Los Angeles County, Los Angeles Region
Frank Warren, San Luis Obispo County, Southern Region
Anne Robin, MFT, Butte County, Superior Region

STAFF:

John Chaquica, CalMHSA
Ann Collentine, CalMHSA
Stephanie Welch, CalMHSA
Kim Santin, CalMHSA
Doug Alliston, Murphy, Campbell, Guthrie & Alliston, PLC
Sarah Brichler, CalMHSA
Laura Li, CalMHSA
Maya Maas, CalMHSA

OTHERS:

None

1. CALL TO ORDER

Wayne Clark, PhD, Monterey County, CalMHSA President, Executive Committee Chair, called the meeting to order.

2. ROLL CALL AND INTRODUCTIONS

Laura Li, CalMHSA, called roll and a quorum was established at 3:02 p.m. Ms. Li asked if any members of the public were present. No members of the public identified themselves.

3. INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT

Doug Alliston, Legal Counsel, reviewed the meeting process. The chair will take comment from members first. Once members have commented, he will open the subject up for public comment by call-in location followed by comment by those calling in from unposted locations. Roll call of committee members at posted locations will be taken on substantive matters.

4. APPROVAL OF AGENDA AS POSTED (OR AMENDED)

Chair Clark entertained a motion to approve the agenda as posted.

Action: *A motion was made to approve the agenda as posted.*

Motion – Maureen Bauman, Placer County

Second – Scott Gruendl, Glenn County

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

None

5. APPROVAL OF CONSENT CALENDAR

Chair Clark entertained a motion to approve the consent calendar as posted.

Action: *A motion was made to approve the consent calendar as posted.*

Motion – Maureen Bauman, Placer County

Second – Scott Gruendl, Glenn County

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

None

6. PROGRAM MATTERS

A. Resources from Statewide Project

Ann Collentine, CalMHSA Program Director, provided a brief overview of the resources available for county and public use from CalMHSA's program partners.

Links were provided in the agenda packet and will continually be added to the CalMHSA Website and distributed via the weekly CalMHSA Express. At the request of William Arroyo, Los Angeles County, staff will create samples of the customizable resources to be presented at the February 15, 2013 board meeting.

Recommendation: *None, information only.*

Public comment was heard from the following individual(s):
None

B. Plan Update Contract Amendments

Ms. Collentine explained the oversight in funding amounts recommended to the board at the December 13, 2012 meeting for the Institute on Aging and the University of California. Both contract amendments were approved at the December 13, 2012 board meeting.

Action: *Approval of increasing the range of funding allocation for Institute on Aging by \$50,000, or up to \$282,920, and for the University of California by \$19,224, or up to \$877,224.*

Motion – Karen Stockton, Modoc County
Second – Brad Luz, Sutter/Yuba County

Wayne Clark	Aye	Rita Austin	Aye
Maureen Bauman	Aye	Marvin Southard	*
Karen Baylor	Aye	William Arroyo	***
Scott Gruendl	Aye	CaSonya Thomas	Aye
Michael Kennedy	*	Frank Warren	*
Jo Robinson	*	Karen Stockton	Aye
Brad Luz	Aye	Anne Robin	*

*Not Present **Abstain ***Not at a noticed location

Motion passed unanimously.

Public comment was heard from the following individual(s):
None

7. ADMINISTRATIVE MATTERS

A. Amended Travel Policy(ies)

John Chaquica, CalMHSA Executive Director, provided an overview of the changes being recommended to the non-board committee member and the board of directors’ travel policies. Both policies would include changes which would bring them in line with the current procurement policy, giving the CalMHSA Executive Director the authority to approve expense reimbursement

requests under \$5,000 and requests for an amount up to \$100,000 to be approved by the President and Treasurer of the Board (per event). In addition, to receive reimbursement under the proposed member policy, an approved county must be designated as a “hardship county,” for one year. As the current policies state, there is a yearly cap per county or non-board committee member of \$600.

The amendment to the board of directors’ travel policy came up specifically in regard to having the county liaisons participate in some of the travel related events around the PEI Statewide Projects. The amended policy would expedite the process without tying up the Executive Committee’s time.

Rita Austin, Toulumne County, asked if there was ever a time when the Executive Committee was not in agreement with travel expenses. Mr. Chaquica responded that he did not recall there ever being an issue in regard to travel expenses. He added that all expenses are reviewed and signed by the treasurer. This amendment would also assist with any future travel for the county staff who participate on the Finance Committee as well as the State Hospital Bed Work Group.

Dr. Arroyo expressed concern with extending the board of directors travel policy to cover more than just the delegated board member and his or her alternate, preferring to use funds for programs and initiatives instead of for county travel. He stated the need for this proposal to be given serious consideration by the board. Upon further discussion, a motion was made and approved to table the proposed changes as recommended.

Recommendation: *Approval of the Amended Non-Board Committee Member Travel Policy and Amended Board of Directors Travel Policy.*

Action: *To table the proposed changes to the travel policies.*

Motion – Karen Stockton, Modoc County
Second – Rita Austin, Tuolumne County

Wayne Clark	Aye	Rita Austin	Aye
Maureen Bauman	Aye	Marvin Southard	*
Karen Baylor	Aye	William Arroyo	***
Scott Gruendl	Aye	CaSonya Thomas	Aye
Michael Kennedy	*	Frank Warren	*
Jo Robinson	*	Karen Stockton	Aye
Brad Luz	Opposed	Anne Robin	*

*Not Present **Abstain ***Not at a noticed location

Public comment was heard from the following individual(s):
None

8. GENERAL DISCUSSION

A. Report from CalMHSA President – Wayne Clark

- a. Strategic Planning Task Force
- b. American Journal of Public Health Article
- c. Finance Committee Task Force
- d. Other

Chair Clark notified the Committee of the Strategic Planning Task Force's first meeting on February 1, 2013 to discuss the list of ideas previously discussed. The second meeting will take place during the February Policy Forum in Sacramento. The Strategic Planning Session will take place on April 12, 2013. The American Journal of Public Health article has been accepted and will be published in the journal in the next month or two. As a side note, Chair Clark noted Senator Darrell Steinberg's references to several of the CalMHSA statewide prevention activities in his presentation to Vice President Biden regarding violence prevention. The Finance Committee Task Force is scheduled to meet on January 25, 2013 to discuss the contractual relationship with George Hills Company.

Recommendation: Discussion and/or action as deemed appropriate.

Public comment was heard from the following individual(s):
None

B. Report from CalMHSA Executive Director – John Chaquica

- a. Department of Health Care Services No-cost Extension
- b. State Hospital Beds
- c. CalMHSA Projects Funding Model
- d. Paschal/Roth Agreement Amendment
- e. General

Mr. Chaquica provided an update on the discussion with Department of Health Care Services regarding a no-cost extension. There was a meeting in October at which there was a receptive response. The discussions stalled in December and a new DHCS staff member is being assigned.

Staff will be sending out an email regarding the MOU and the results of discussion with Department of State Hospitals (DSH) staff. The Work Group met with DSH staff and CMHDA staff on January 15, 2013. DSH was under the impression that CMHDA was disinterested in being a party to the discussion, to which CMHDA indicated they never made such comments. As well DSH stated feedback from the counties was that there was an interest in simplifying the agreement and therefore movement to an MOU was of interest. However, DSH never felt the counties would want to have input in what that MOU might look

like. Following discussion, DSH indicated the MOU would be sent out for a 30-day comment period (for changes to be applied in the 2013-14 FY). A group of counties will be invited to meet with the department to discuss the document. The department is looking into billing for bed use in the future as opposed to annual bed purchase. Additionally, some clarity was provided as to why DSH does not want to have a discussion with the JPA directly and an amendment will be made to the JPA agreement to allow for broader scope.

Mr. Chaquica has been working with Allan Rawland, Associate Administrator – Government Relations, on the beginnings of a discussion regarding how the JPA and the counties can have a different funding model going forward. The model was provided in the agenda packet and the Committee was asked to review and provide feedback to staff.

In September, the board approved a six-month contract with Pascal/Roth. Staff is working with CMDHA on an updated contract. A report will be provided at the February 15, 2013 board meeting.

Recommendation: Discussion and/or action as deemed appropriate.

Public comment was heard from the following individual(s):
None

9. ADJOURNMENT

Hearing no further comments, the meeting was adjourned at 4:16 p.m.

Action: A motion was made to adjourn the meeting.

Motion – Karen Baylor, San Luis Obispo County

Second – Maureen Bauman, Placer County

Motion passed unanimously.



"A George Hills Company Administered JPA"

CaIMHSA Board Meeting
Meeting Minutes from February 15, 2013
Sacramento, California

MEMBERS PRESENT

Wayne Clark, PhD, CaIMHSA President, Monterey County
Maureen F. Baumann, LCSW, CaIMHSA Vice President, Placer County
Karen Baylor, PhD, MFT, CaIMHSA Secretary, San Luis Obispo County
Michael Kennedy, MFT, Bay Area Region Representative, Sonoma County
Brad Luz, PhD, Central Region Representative, Sutter/Yuba County
Rita Austin, LCSW, Central Region Representative, Tuolumne County
Marvin J. Southard, DSW, Los Angeles Region Representative, Los Angeles County
William Arroyo, MD, Los Angeles Region Representative, Los Angeles County (alternate)
CaSonya Thomas, MPA, CHC, Southern Region Representative, San Bernardino County
Karen Stockton, PhD, MSW, Superior Region Representative, Modoc County
Anne Robin, MFT, Superior Region Representative, Butte County

MEMBERS ABSENT

Scott Gruendl, MPA, CaIMHSA Treasurer, Glenn County
Jo Robinson, Bay Area Region Representative, San Francisco City and County
Frank Warren, Southern Region Representative, San Luis Obispo County

BOARD MEMBERS PRESENT

Patricia Charles-Heathers, El Dorado County (alternate)
Asha George, PhD, Humboldt County (alternate)
Andrea Kuhlen, MPA, Imperial County (alternate)
Kristy Kelly, MFT, Lake County
Jim Rydingsword, Mariposa County
Tom Pinizzotto, Mendocino County (alternate)
Mary Hale, Orange County
Mary Ann Carrasco, Sacramento County
Jean Anderson, San Joaquin County (alternate)
Alfredo Aguirre, LCSW, San Diego County
Stephen Kaplan, San Mateo County
Nancy Pena, PhD, Santa Clara County
Dean True, RN, MPA, Shasta County (alternate)
Madelyn Schlaepfer, PhD, Stanislaus County
Noel J. O'Neill, MFT, Trinity County

BOARD MEMBERS ABSENT

Karyn Tribble, PsyD, LCSW, City of Berkeley
Michael Laffin, Colusa County (alternate)
Mary Roy, MFT, Contra Costa County
Gary R. Blatnick, Del Norte County
Donna Taylor, RN, Fresno County
Gail Zwier, PhD, Inyo County
Jim Waterman, PhD, Kern County
Mary Ann Ford Sherman, MA, Kings County
Ken Mannel, Lassen County
Janice Melton, LCSW, Madera County
Margaret Kisliuk, HHS, Marin County
Robin Roberts, MFT, Mono County
Jaye Vanderhurst, LCSW, Napa County
Michael Heggarty, MFT, Nevada County
Jerry Wengerd, LCSW, Riverside County
Alan Yamamoto, LCSW, San Benito County
Rama Khalsa, PhD, Santa Cruz County
Michael Noda, Siskiyou County
Halsey Simmons, MFT, Solano County
Jesse Duff, Tri-City Mental Health Center
Meloney Roy, LCSW, Ventura County
Kim Suderman, LCSW, Yolo County

STAFF PRESENT

John Chaquica, CPA, MBA, ARM, CalMHSA Executive Director
Kim Santin, CPA, CalMHSA Finance and Administration Director
Ann Collentine, MPPA, CalMHSA Program Director
Allan Rawland, Associate Administrator – Government Relations
Stephanie Welch, MSW, CalMHSA Senior Program Manager
Sarah Brichler, MEd, CalMHSA Program Manager
Laura Li, CalMHSA Program Analyst
Maya Maas, CalMHSA Executive Assistant
Doug Alliston, Legal Counsel, Murphy Campbell Guthrie & Alliston

MEMBERS OF THE PUBLIC

Stacie Hiramoto, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO)
David Kopperud, California Department of Education
Kurt Schweigman, Native American Health Center
Sandy Hyndall
Jenny Zink
Chris Kughn, Marin County
Kirsten Barlow, California Mental Health Directors Association (CMHDA)

1. CALL TO ORDER

The regular meeting of the Board of Directors of the California Mental Health Services Authority (CalMHSA) was called to order by President Wayne Clark, PhD, Monterey County 12:31 p.m. on February 15, 2013, at the Holiday Inn Capitol Plaza, located at 300 J Street, Sacramento, California. President Clark asked Laura Li, CalMHSA Program Analyst, to call roll in order to confirm a quorum of the board.

2. ROLL CALL AND INTRODUCTIONS

Ms. Li called roll and informed President Clark a quorum had not been established. President Clark requested that staff continue to monitor any late comers while the board proceeded with conversation and any items not requiring action. He then asked for members of the public and staff to introduce themselves.

3. INSTRUCTIONS FOR PUBLIC COMMENT AND STAKEHOLDER INPUT

Doug Alliston, Legal Counsel, reviewed the instructions for public comment, including the process of public comment cards, and explained the process of the previous closed session. He also noted items not on the agenda would be reserved for public comment at the end of the agenda.

4. CMHDA STANDING REPORT

With no CMHDA staff present, President Clark moved on to the next item.

5. STATEWIDE PEI PROGRAMS

A. Program Partner Resources

Ann Collentine, CalMHSA Program Director, with assistance from Stephanie Welch, CalMHSA Senior Program Manager, and Sarah Brichler, Program Manager, provided the board with an overview of the resources from Statewide PEI projects that are available for use by counties and stakeholders. The resources presented are also linked in the agenda packet on pages 6 through 9.

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

None

Following the conclusion of staff's presentation on available resources, it was determined a quorum would not be reached. Upon consultation from legal counsel, President Clark convened a meeting of the Executive Committee. Ms. Li took roll and confirmed a quorum of the Executive Committee.

**CalMHSA Executive Committee
Meeting Minutes from February 15, 2013
Sacramento, California**

6. APPROVAL OF AGENDA AS POSTED (OR AMENDED)

President Clark called for approval of the agenda as posted and asked for comment from Committee members. Hearing none, President Clark entertained a motion to approve the agenda as posted.

Action: *A motion was made to approve the agenda as posted.*

Motion: *Anne Robin, Butte County*

Second: *Marvin J. Southard, Los Angeles County*

Motion carried by unanimous consent.

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

None

7. CONSENT CALENDAR

President Clark acknowledged the consent calendar and asked for comment from Committee members. Hearing none, President Clark entertained a motion to approve the consent calendar.

Action: *A motion was made to approve the consent calendar.*

Motion: *Alfredo Aguirre, San Diego County*

Second: *Karen Stockton, Modoc County*

Motion carried unanimously.

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

None

8. Membership

A. County Outreach Report

Allan Rawland, CalMHSA Associate Administrator – Government Relations, provided an update on outreach efforts. Several non-member counties have informed staff of the intention of applying for membership over the next few months.

Action: *None, information only.*

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

None

9. ADMINISTRATIVE MATTERS

A. JPA Agreement Amendment

John Chaquica, CalMHSA Executive Director, presented the recommended changes to the JPA Agreement, the goal being to make the document as broad as possible to allow for flexibility in future programs. A list of the changes is provided on page 51 of the agenda packet. Members will need to take the agreement back to their boards for approval. Staff has created a staff report template to assist in that process. Mr. Chaquica then asked for comments.

Stephen Kaplan, San Mateo County, asked about inclusion of Medi-cal programs and whether such programs would need additional board approval. Mr. Alliston clarified

that programs would be fiscally self-contained and participating members would sign a participation agreement to be involved in a particular program.

Mr. Kaplan asked if CalMHSA had spoken with CADPAAC to ensure roles around Medical and drug treatment did not overlap. Mr. Alliston confirmed he had an email from Don Kingdon, CMHDA, regarding CADPAAC's awareness of and agreement with this language.

Following further discussion, the inclusion of "CSAC and its affiliates" was made to the recommendation.

Action: *Approval of the amended CalMHSA JPA Agreement as presented, with an effective date of July 1, 2013 to allow time for members' Boards of Supervisors to approve, with the addition of language referring to CSAC and its affiliates.*

Motion: *Karen Baylor, San Luis Obispo County*
Second: *Anne Robin, Butte County*

Motion carried unanimously.

Public comment was heard from the following individual(s):
None

10. PROGRAM MATTERS

A. Report from CalMHSA Program Director – Ann Collentine

Ann Collentine, Program Director, gave a brief review of current program activities. Four contract specialists have come on board: Ken Crandall, Superior Region; Benita Ramsey, Southern (Eastern) Region; Rita Downs, Central Region; and Christina Hill-Coillot, Bay Area Region.

Ms. Collentine outlined some of the communication strategies being used by staff to disseminate vital information. She encouraged members to share the weekly CalMHSA Express with their staff and constituents.

Action: *None, information only.*

Public comment was heard from the following individual(s):
None

B. Statewide Hospital Beds Planning Update

Mr. Chaquica provided a brief overview of the Statewide Hospital Beds Workgroup progress to date. Counties have received a request for revisions to the MOU from the Department of State Hospitals. CalMHSA is requesting those revisions be sent to them for consolidation so the JPA can continue to serve as one voice. A meeting was held with DSH on January 15, 2013. An email summarizing the meeting distributed to members and is provided in the agenda packet on page 86. The Work Group's next task is issuing an RFP to provide options to counties.

One item discussed at the January 15, 2013 meeting with DSH was the 17601 Election. This election would allow counties to control the funds versus the state controlling the funds. Los Angeles County has sent the State Controller a request for copy of the election; no response has been received to date. On page 93 of the agenda packet, a letter template has been provided and members are encouraged to complete and submit the letter to the state controller's office.

Action: *None, information only.*

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

None

C. Lime Green: Promote Mental Health Awareness – William Arroyo

William Arroyo, Los Angeles County, provided a background on an emerging effort to promote a lime green ribbon campaign to brand mental health awareness. Los Angeles County is joining in the efforts with SAMHSA and some local community organizations, and is hoping the CalMHSA board will endorse the campaign and join in the promotion of the brand.

Action: *Endorse and actively promote the lime green ribbon for mental health awareness and explore ways to incorporate the color lime green in Stigma and Discrimination Reduction efforts.*

Motion: *William Arroyo, Los Angeles County*

Second: *Anne Robin, Butte County*

Motion carried unanimously.

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

None

11. GENERAL DISCUSSION

A. Report from CalMHSA President – Wayne Clark

President Clark informed the board of the upcoming Strategic Planning Session on Friday, April 12, 2013. Mr. Rawland also recommended inviting the non-member counties to participate. President Clark then gave an update on the Finance Committee Task Force, who is in the process of reviewing the George Hills Company contract. They have created a protocol for performance review and will be distributing an evaluation survey. They will report out at a future board meeting.

Recommendation: *None, information only.*

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

None

B. Report from CalMHSa Executive Director – John Chaquica

Mr. Chaquica briefly discussed the status of CalMHSa contract with the Department of Health Care Services (DHCS). DHCS is trying to determine which department should oversee the contract and, as of this date, have not made an official announcement. Two new counties—Ventura and Butte—have contact CalMHSa staff regarding CalMHSa acting as fiscal agent for their Workforce, Education and Training funds. Mr. Chaquica then referenced a recent invitation distributed to members to participate in one of two board orientation Webinars being held on February 28, 2013 and March 7, 2013. He encouraged members to participate as well as members of their staff who may benefit.

Recommendation: *None, information only.*

Public comment was heard from the following individual(s):
None

12. PUBLIC COMMENTS

A. Public Comments – Non-Agenda Items

President Clark invited members of the public to make comments on non-agenda items.

Public comment was heard from the following individual(s):
Kirsten Barlow, California Mental Health Directors Association (CMHDA)

14. NEW BUSINESS AND CLOSING COMMENTS

President Clark asked the board if there was any new business or closing comments. Hearing none, he entertained a motion to adjourn.

15. ADJOURNMENT

There being no further comments, the meeting was adjourned at 2:01 p.m.

Action: *To adjourn meeting.*

Motion: *Karen Baylor, San Luis Obispo County*

Second: *Anne Robin, Butte County*

Motion carried unanimously.

Respectfully submitted,

Karen Baylor, PhD, LMFT
Secretary, CalMHSa

Date

PROGRAM MATTERS

Agenda Item 6.A

SUBJECT: SDR Consortium

BACKGROUND AND STATUS:

The purpose of the Stigma and Discrimination Reduction (SDR) Consortium program is to bring together diverse perspectives to review efforts of the overall SDR component in order to support consistent messaging that reflects the values of resilience, recovery and wellness. Due to its diversity, the Consortium is also designed to reach and network with key partners in SDR efforts, such as educators, primary care providers, law enforcement, veterans and others. Consortium members are from all over the state and can provide input from local communities as well as support the local dissemination of SDR efforts and tools. The Consortium provides recommendations and takes action to support smaller scaled efforts at local and regional levels. All of this work is guided by their Strategic Work Plan.

Timeline and Current Status

- The original budget for the SDR Consortium from the approved Work Plan was \$1.5 million.
- CalMHSA was unable to execute a contract with California Network of Mental Health Clients, the organization that was selected through the competitive RFP process, to administer the contract in the fall of 2011.
- CalMHSA's board supported a transition plan, which brought in a consultant to build and then staff the work product of the SDR Consortium with CiMH providing administrative support from the fall of 2011 through the fall of 2012. During this time, \$300,000.00 of the contract was expended.
- During this time the membership created a Strategic Work Plan that identified five outcomes for the consortium to achieve by June 30, 2014 (or upon conclusion of the contract with CalMHSA).
- CalMHSA staff, with direction from the Board and the Consortium, created a Request for Interest (RFI) for a consumer-run organization with statewide voice to take over the administration of the Consortium. After a competitive review process, Mental Health Consumer Concerns (MHCC) was awarded a contract for the remaining funds—\$1.2 million. The contract was signed December 10, 2012.

- To support a smooth transition, the interim consortium program manager provided some support and training to MHCC through February 2013.
- CalMHSA terminated Mental Health Consumer Concerns (MHCC) contract on Monday, April 8th due to performance failure. The decision to terminate the contract came after a performance improvement plan (PIP) was provided to MHCC on April 2nd. In discussions with the interim executive director and representatives of their board, it was determined that MHCC could not comply with a Performance Improvement Plan (PIP) and there was mutual agreement with CalMHSA that the contract should be terminated immediately. CalMHSA appreciates that MHCC has been collaborative and cooperative in this process.

Key Issues

- Roughly \$1 million remains in the contract to implement the activities of the Strategic Work Plan within a less than 14-month-timeframe (April 2013–June 2014). The budget supports an “up to” 30 member body that meets quarterly in person with a variety of workgroup meetings via webinar or conference call during the remaining months of the year. Staffing includes program support with needed expertise in SDR work to staff the five consortium workgroups, facilitation of a statewide coalition, and administrative support to support compliance with CalMHSA reporting and the RAND evaluation, necessary IT systems and tools, and management of travel, stipends and meeting planning.
- The time to select another contractor and get the organization up to speed with all of the activities of the CalMHSA PEI statewide projects and how they relate to the work of the SDR consortium, including training for compliance with CalMHSA reporting requirements, would be at least three to six months.
- Based on previous solicitations for qualified contractors, there might not be a pool of qualified candidates.
- Consortium members are fatigued and concerned by all of the transition and are seeking CalMHSA’s involvement to provide stability and swift action so that the Strategic Work Plan can be implemented within the short remaining timeframe.

STATUS AND NEXT STEPS:

To expedite meeting deliverables with quality and efficiency, CalMHSA staff is recommending direct administer of the SDR consortium effective immediately. The intent is not for CalMHSA to continue to administer this program after June 2014, but to stabilize

and strengthen it. CalMHSA's administration would build towards a transition effective after June 2014 to sustainable leadership of the SDR Consortium by a qualified organization that can provide expertise and statewide voice for those with lived mental health experience consistent with the California Statewide Plan to Reduce Stigma and Discrimination. This recommendation has been vetted and supported by the SDR Consortium members as of April 23, 2013. The scope of tasks includes:

- Assuming the all management, administration and organizational functions of the existing SDR consortium, including compliance with reporting requirements and the independent statewide evaluation conducted by RAND,
- Ensuring statewide voice on the critical impact of stigma, resulting discrimination, and disparities experienced by individuals, families, and communities,
- Maintaining and supporting the current configuration of the consortium's membership that prioritizes and is reflective of diverse sectors and disciplines, in addition to the mental health field; and individuals representing consumers, family members and parents,
- Fulfilling the networking, coordination and collaboration role of the consortium by staffing workgroups, webinars, meetings and supporting the statewide dissemination and local use of Each Mind Matters and other educational tools and resources, and
- Implementing the Consortium's Strategic Work Plan through activities and tasks that support the achievement of the outcomes identified in the work plan.

Staffing Plan:

- The administration of the SDR Consortium will begin by hiring a program manager, program coordinator, administrative assistant and clerical/information technology assistant to execute the work of the SDR Consortium in an expedited manner.
- Seek to retain consultation services of the former interim program manager, Adele James, in a reduced role as the consortium's facilitator. SDR Consortium members trust and respect Ms. James. Ms. James facilitation provides continuity and allows for new program staff to focus on staffing workgroups and accomplishing needed tasks. Ms. James has expressed interest and availability.

- Seek to develop consultation contracts with organizations or experts, as needed, to provide subject matter expertise to conduct the tasks identified in the Strategic Work Plan and to act as a link to local/regional SDR activities.

RECOMMENDATION:

Authorize conduct of SDR consortium by CalMHSA staff effective immediately. Authorize contract for up to \$1,000,000 between CalMHSA and staff employer George Hills Company for such work, with provisions similar to the prior contracts negotiated with MHCC. The contract's administrative fee shall not exceed standard practice with other CalMHSA contractors. Authorize Wayne Clark and Scott Gruendl to negotiate and sign contract with George Hills Company consistent with Board's authorization.

REFERENCE MATERIALS ATTACHED:

- Stigma and Discrimination Reduction Consortium Strategic Work Plan



STIGMA & DISCRIMINATION REDUCTION CONSORTIUM STRATEGIC WORK PLAN

October 11, 2012

SDR Consortium Members

Name	Affiliation
Brianda Alanis	Inspire USA Foundation
Kirsten Barlow	CA Mental Health Directors Association
Adrian Bernard	Second Story Peer-Run Respite, NAMI
Rocco Cheng	Pacific Clinics
Shawn Davis	Youth in Mind
Azizza Davis Goines	Sacramento Black Chamber of Commerce
Kathleen Derby	NAMI California
Andrew Duch	Butte County Sheriff's Office Rural Law Enforcement
Renu Garg-Peterlinz	Pool Of Consumer Champions (POCC)
Myel Jenkins	Sierra Health Foundation
Nga Le	Community Health for Asian Americans
Pamlyn Millsap	Eureka Police Department
Ralph Nelson	MHSOAC
Victor Ojakian	Asian Americans for Community Involvement (AACI)
Tara Pir	Institute for Multicultural Counseling & Education Services (IMCES)
Suamhirs Rivera	Youth In Mind
Stephen Salva	CA Association of School Counselors
Peter Schroeder	Mental Health Association in CA
Tracy Tripp	
Karen Ventimiglia	County of San Diego
Ken White	Ken White & Associates
Scott Whyte	Stigma Elimination Task Force
Chong Yang	Stanislaus Behavioral Health and Recovery Services
Sally Zinman	CA Client Action Workgroup

SDR CONSORTIUM VISION STATEMENT

Californians embrace evolutionary movement for wellness through social inclusion and social justice.

SDR CONSORTIUM VALUES

Our overarching PRINCIPLE is:

To reduce mental health stigma and discrimination by promoting wellness, social justice and social inclusion by framing and articulating our work around the following VALUES:

1. People first: recognize and utilize the strengths of individuals, families, friends and community allies to reduce stigma and discrimination and foster recovery, resiliency and wellness for all.
2. Respect and promote responsiveness to California's diversity of culture, ethnicity, age, sexual orientation and all people from un- and underserved populations in various geographic locations (urban, suburban, rural).
3. Support transparency and open dialogue to promote wellness, social justice and social inclusion.
4. Recognize and support collaboration between and among public and private sectors within and outside of the public mental health system to assure systemic and sustainable change.
5. Emphasize the importance of resiliency, recovery and wellness by supporting the development and research of creative and innovative consumer and family driven approaches to reduce mental health stigma and discrimination.
6. Commitment to learning within a historical framework and working toward evolutionary progress.

SDR CONSORTIUM ROLE

Our ultimate ROLE is:

To share our collective experience to inform and partner with CalMHSA and its Program Partners to reduce mental health stigma and discrimination by improving outcomes that promote wellness, social justice and social inclusion by being or doing the following:

1. Be an ambassador, liaison, and advocate for consumers, families, and communities through sharing our collective experiences to reduce mental health stigma and discrimination by promoting wellness, social justice and social inclusion.
2. Be a think tank, consultant, and advisor for CalMHSA board and staff regarding essential elements of stigma and discrimination reduction in statewide programs and policies.

3. Promote wellness, social justice and social inclusion with the goal of reducing mental health stigma and discrimination through our own work product, partnership with CalMHSA statewide partners, and other possible statewide collaborations.
4. Identify and support the dissemination of consumer and family driven best practices aimed at reducing mental health stigma and discrimination through a clearinghouse and local contacts, particularly in partnership with the California Center for Dignity, Recovery & Stigma Elimination.
5. Encourage and help shape public policy that reduces mental health stigma and discrimination through promotion of wellness, social justice and social inclusion.

SDR CONSORTIUM OUTCOMES

CALMHSA AND CALMHSA PROGRAM

Outcome 1: Build strong relationships with CalMHSA Program Partners and CalMHSA to reduce mental health stigma and discrimination by promoting wellness, social justice and social inclusion as evidenced by:

- Meeting with all SDR Program Partners (Disability Rights California; Entertainment Industries Council, Inc.; Mental Health Association of San Francisco; NAMI California; Runyon, Saltzman & Einhorn; United Advocates for Children & Families; Community Clinics Initiative; Mental Health America of California) to learn about their work, share the Consortium's Strategic Work Plan and description of assistance offered by the Consortium;
- Meeting with key liaisons/Program Partners for the Student Mental Health & Suicide Prevention Initiatives in order to learn about their work, share the Consortium's Strategic Work Plan, description of assistance offered by the Consortium, encourage and strategize about programmatic recommendations for SDR via promotion of wellness, social justice and social inclusion;
- Strengthening the Consortium's understanding of Program Partners' work through review of quarterly Initiative Reports and presentations by Program Partners;
- Sharing SDR Consortium Recommendations Forms with Program Partners after presentations to the Consortium, and a summary of those recommendations to CalMHSA;
- Strategizing with Program Partners from all Initiatives, key CalMHSA staff, and CalMHSA Board members about opportunities to strengthen/leverage SDR efforts through integration/coordination of work both within and across Initiatives;
- Review future work products of CalMHSA Statewide PEI Program Partners to assure promotion of SDR.

STATEWIDE NETWORK FOR MENTAL HEALTH SDR SUSTAINABILITY

Outcome 2: Promote sustainability of wellness, social justice and social inclusion efforts to reduce mental health stigma and discrimination by cultivating opportunities for development of an integrated network of local and state level partners and coalitions, both within and outside of the mental health system as evidenced by:

- Sharing Consortium vision and aligning with local and state level partners and coalitions;
- Maintaining ongoing dialogues with local and state level partners and coalitions both within and outside of the mental health system;
- Developing a self-sustaining network of local and state level subject matter experts, as well as CalMHSA Program Partners, as an organizing body in order to coordinate, leverage and advocate for SDR work throughout California;
- Collaborating with Disability Rights California to developing one informational “white paper” for distribution to private sector organizations (including but not limited to business, employers, private foundations, insurance industry, law enforcement, faith/spiritual groups, K-12 and higher education, health and mental health, social services, consumer and client organizations, family organizations, military partners, County Behavioral Health) addressing the commonality of mental health challenges, with recommendations or action steps that can be taken to promote SDR, wellness, social justice and social inclusion in each sector. Developing a statewide plan for media release including a minimum of 3 public relations efforts, dissemination of a minimum of 1,000 print copies of the “white paper”, and make an electronic printable version available for wide distribution throughout the state to private sector organizations.
- As a component of Mental Health Association of San Francisco’s March 21-22, 2013 resource dissemination conference, host an SDR policy/advocacy working meeting track, designed in collaboration with local and state level partners and coalitions, both within and outside of the mental health system, in order to develop and implement a coordinated statewide SDR Plan.

ROLES OF CONSUMERS & FAMILY MEMBERS

Outcome 3: Support meaningful roles for consumers and family members in mental health SDR advocacy, education and collaboration aimed at promoting wellness, social justice and social inclusion by being a champion of causes as evidenced by:

- Strengthening the Consortium’s understanding of Program Partners’ work with consumers and family members by reviewing quarterly summaries of Partner Reports on the role of these stakeholders in PEI projects;
- Evaluating the impact/benefit of working with consumers and family members in CalMHSA contracts;

- Collaborating with Mental Health America California, and building on previous efforts including the Working Well Together Report, research, identify and synthesize a report on benefits of working with people with lived experience to promote transformation of stigma and discrimination to wellness, social justice and social inclusion. Developing a statewide plan for media release including a minimum of 3 public relations efforts^[1], and dissemination of a minimum of 1,000 print reports, as well as statewide availability of an electronic printable version of the report;
- Educating legislators, making recommendations and advocating for increased roles and positions for consumers and family members in the formulation of mental health SDR policy, program design, implementation, and service provision.

POLICY & ADVOCACY

Outcome 4: Increase advocacy to promote mental health stigma and discrimination reduction policies as evidenced by:

- Collaborating with Disability Rights California on development of report on strategies for changing organizational practices in order to reduce mental health stigma and discrimination, as well as a statewide dissemination plan for the report, distributing a minimum of 1,000 copies of the report and making electronic printable version of the report available statewide;
- Establishing collaborative relationships with 10 group representing diverse sectors and disciplines from across the state, both within and outside of the mental health system, including SDR Program Partners, to develop a strategy for implementation of 2 statewide mental health stigma and discrimination reduction policies/strategies;
- Working with groups such as Mental Health Association of San Francisco, NAMI, and UACF, as well as groups that can appropriately represent diverse ethnic and cultural communities, to educate 20 elected officials and their staff about the impact of mental health stigma and discrimination, its unintended consequences on their constituents, and best practices for its reduction.

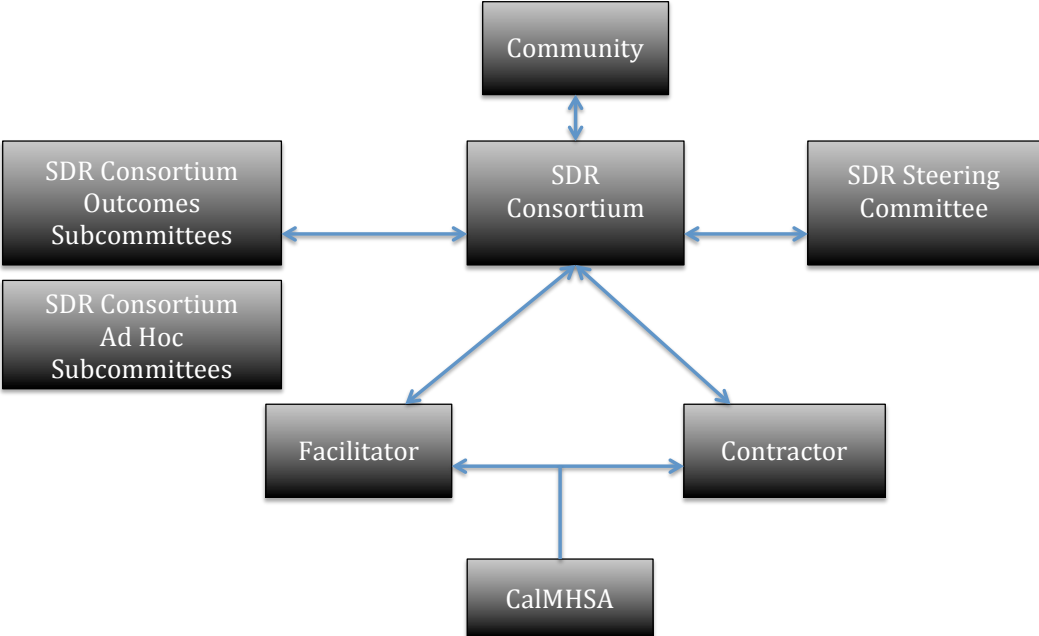
ENGAGING DIVERSE COMMUNITIES

Outcome 5: Educate and engage diverse community sectors in the SDR conversation about wellness, social justice and inclusion as evidenced by:

- Seeking ways to partner with California Reducing Disparities Project (CRDP), and identifying resources to support this collaboration in order to build on CRDP's statewide PEI disparity reports for African American, Asian & Pacific Islander, Latino, LGBTQIAS, and Native American communities. In collaboration with CRDP, identifying how the reports can serve as guides in developing "toolkits" to engage these diverse communities in culturally relevant ways in conversations about SDR, wellness, social justice and social inclusion. Developing a statewide dissemination plan for "toolkits," distribute a minimum of 1,000 toolkits

statewide, and making electronic printable version of the “toolkits” available to diverse community sectors statewide.

SDR CONSORTIUM ORGANIZATIONAL CHART



ADMINISTRATIVE MATTERS

Agenda Item 7.A

SUBJECT: Report from CalMHSA President – Wayne Clark

BACKGROUND AND STATUS:

CalMHSA President Wayne Clark, will provide general information and updates regarding the JPA.

- Other

RECOMMENDATION:

Discussion and/or action as deemed appropriate.

REFERENCE MATERIALS ATTACHED:

- None