

County of Los Angeles – Department of Mental Health  
**OFFICE OF THE MENTAL HEALTH COMMISSION**  
 Thursday, July 27, 2017  
 Meeting Minutes  
 Caroline Kelly, Chair, Facilitating

**APPROVED on September 28, 2017 by Unanimous vote**

Discussion	Recommendation/ Action/Motion
<b>1. Call to Order by Vice Chair Lue</b> Roll Call – Canetana Hurd – <ul style="list-style-type: none"> <li>• Absent Excuse: Herman DeBose, Cynthia Sanchez, Tiombe Wallace, Jeannine Pearce, Jo Helen Graham, and Judy Cooperberg</li> <li>• Absent: Connie Salgado-Sanchez</li> </ul>	<b>ACTION: None</b>
Approval of May 25 and June 22, 2017 minutes – <b>TABLED DUE TO QUORUM UNMET</b>	<b>ACTION: None</b>
<b>2. Commission Appointees</b> <b>Susan F. Friedman</b> – News reporter for NBC; retired and became involved in children issues; Chaired LA County Commission for Children and Families; and Chaired the committee on mental health issues. <b>Patrick Ogawa</b> – 30 year County retiree, Executive Director of the Board of Supervisor’s Executive Office, Director of Alcohol and Drug Programs, and other non-profit agencies	
<b>3. Public Comments:</b> <ol style="list-style-type: none"> <li>a. Peer counselor who is available to speak to other public places like fire department, etc. to advocate for mental health</li> <li>b. Client spoke on volunteering to oversee food provided at the commission meeting she will no longer help out because of the negative comments being made about her.</li> </ol>	<b>ACTION: Follow up with referrals</b>
<b>4. DMH Report – Dr. Jonathan Sherin</b> Discussed the first look at the future structure of the DMH management re-organization Main reason for the reorg is to obtain a better sense of what is being delivered to empower the trenches. DMH Future Structure matrix was handed out describing the following components- <ol style="list-style-type: none"> <li>a) Design</li> <li>b) System</li> <li>c) Support</li> <li>d) Performance</li> <li>e) Policy division</li> </ol> Announcements – <ol style="list-style-type: none"> <li>a) Six positions were approved for the Peer Resource Center at DMH Headquarters.</li> <li>b) Executive Management Team and other clinical staff were asked to start seeing patients (clients) once per week. Dr. Rod Shaner is leading the way being the first to see patients.</li> </ol> Public Comments on DMH Report	

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<ul style="list-style-type: none"> <li>a) Complimented Dr. Sherin on leading DMH in a new direction that is new and refreshing.</li> <li>b) Thanked DMH for opening the Peer Resource Center</li> <li>c) When will staff names be placed on the departmental reorganization list? Dr. Sherin – within the next couple months</li> <li>d) Would like to join in on planning to provide input for activities and services in the resource center Dr. Sherin – the center is peer driven, the intent is to create an advisory board and get feedback</li> <li>e) Read a spiritual piece on the timing of Dr. Sherin placed in DMH will be a beautiful transformation. Hire more people with lived experience.</li> <li>f) Former county employee would like to be reinstated, if not, wants to ensure that current peers are cared for and receive the training and resources needed to benefit the clients</li> <li>g) Offered resources for peer advocates</li> </ul>	
<p>5. <b>Presentation on Service Area 6 and the Women’s Community Resource Center Program</b> - Terri Boykins, Deputy Director and Dr. Elena Farias, Clinical Program Manager III</p> <p>Ms. Boykins reported Service Area 6 priorities remain consistent with DMH reorganization plan. Yolanda Whittington, SA 6 District Chief continues to progress receiving funding for Parks after Dark and LGBTQ projects.</p> <p>SAAC 6 continues to address trauma concerns and the need for more resources. SAAC wrote a proposal to partner with agencies and companies to fund trauma issues in the community.</p> <p>Dr. Farias gave update on directly operated clinics -</p> <p>Augustus F. Hawkins Family Mental Health Clinic</p> <ul style="list-style-type: none"> <li>a) Housed on the MLK Campus offering full mental health and health opportunities for partnerships.</li> <li>b) HIV resources for mental health with health services partnership with Unified Services for HIV</li> <li>c) Youth aging out of foster care outreach</li> <li>d) Health Academy – established to encourage charter high school students to pursue all medical professions</li> <li>e) NAMI resources available in the lobby to create a warm and welcoming environment</li> <li>f) Promotores Program – Twenty programs are assigned to the community to link underserved clients to health care services.</li> </ul> <p>Compton Family Mental Health Center –</p> <ul style="list-style-type: none"> <li>a) Specialized child services for children and families</li> <li>b) Networking and outreach engagement in the community continues</li> <li>c) NAMI resources available in the lobby to create a warm and welcoming environment</li> </ul> <p>Care/Harbor LA</p> <ul style="list-style-type: none"> <li>a) Mental health evaluations available for crisis intervention and acute care treatment</li> <li>b) Hosted a clinic open house – over 100 attended</li> </ul>	

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<p>c) NAMI resources available in the lobby to create a warm and welcoming environment</p> <p>West Central Family Mental Health Center</p> <p>a) SB 82 field based services triage team serves homeless and at risk of homelessness clients</p> <p>b) Specialized foster care – 4 co-located offices – welcome 5 trainees</p> <p>c) NAMI resources available in the lobby to create warm and welcoming environment</p> <p>d) Wellness Center</p> <p>Women’s Community Resource Center (WCRC)</p> <ul style="list-style-type: none"> <li>• Crisis intervention, intensive case management</li> <li>• Developed a tracking sheet to maintain data and activity on a quarterly basis</li> <li>• 24 staff in the program, leadership team is working with Dr. Shaner to hire 1 psychiatrist</li> <li>• Therapy termination is assessed by a team guided by the DMH policy</li> <li>• 100 cases closed</li> <li>• Quarterly graduation ceremonies are held to celebrate successful program completion</li> <li>• Outreach efforts regarding termination: <ul style="list-style-type: none"> <li>a) Make several phone calls</li> <li>b) Send letters</li> <li>c) Staff conduct home visits</li> </ul> </li> <li>• Four community meetings are ongoing <ul style="list-style-type: none"> <li>a) Conducts focus groups with participants from WCRC, Probation, DMH staff, WCRC clients</li> <li>b) Re-entry – provides intensive case services when released from jail; it offers crisis intervention, medication support, and legal services</li> <li>c) Re-integration – provides services to clients who graduate from the re-entry program. Peer advocates provide the services to promote sense of independence.</li> </ul> </li> </ul> <p><b>Commission Action Recommendation –</b></p> <ul style="list-style-type: none"> <li>• Prepare a detailed report on the status of the WCRC program since the 2016 December town hall meeting. Give detail on the trends over the past year; # of clients being served, # of new clients to the program, and data that will breakdown outcomes of the 100 cases closed for an ongoing baseline to compare shifts and improvements.</li> </ul> <p><b>Public Comments - WCRC speakers</b></p> <p>a) Nothing has been done, no changes</p> <p>b) Groups are cancelled without notice</p> <p>c) There is no women’s empowerment on Skid Row</p> <p>d) Latino Coalition – no services in SA 6 &amp; 7 for Latino community.</p> <p>e) Offered volunteer work with WCRC</p>	

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<p>f) Wants more clients to attend the SAAC meeting to better inform the community of the WCRC issues</p> <p>g) Commented the visits to service area 6 clinic waiting rooms and wellness centers.</p> <p>h) Suggested DMH recruit more peer activities similar to other states</p> <p>i) Wellness Centers – West Central Mental Health Center</p> <p><b>ACTION</b> – Ask Dr. Sherin to look into the therapy termination, after care, and reconnection into the system. What’s happening with the classes? Report back in November 2017</p>	
<p>6. Discussion Action Items/Update – Caroline Kelly</p>	
<ul style="list-style-type: none"> <li>• Three vacancies are available</li> <li>• Approve bylaws – September meeting agenda</li> <li>• Approval Value Statement – September agenda</li> <li>• August meeting will be Dark</li> <li>• Invited interest in annual report</li> <li>• Strategic plan started with an aspect to enhancing communication broadly. Met with CIO IT at Executive Committee meeting. Looking to expand the DMH calendar, Commission webpage</li> </ul>	
<ul style="list-style-type: none"> <li>• Election of Commission Officers – Current slate Chair-Caroline Kelly 1<sup>st</sup> Vice Chair – Lawrence Lue 2<sup>nd</sup> Vice Chair – Merilla M. Scott Member-at-Large (2) – Herman DeBose <b>Election tabled due to lack of quorum –</b> <b>ACTION: Add item to September agenda</b></li> </ul>	<p><b>ACTION: Place item on September agenda</b></p>
<p>6. Commissioners’ Report</p>	
<p><b>Commissioner Curry –</b></p> <p>a) Tension in suicide has increased particularly because of the Pasadena shooting and well known people. Working with news media to be sensitive to suicide when reporting.</p> <p>b) Will send representatives to each SAAC to share info on crisis line and suicide.</p> <p>c) <b>ACTION:</b> Follow up with Commissioner Curry</p>	<p><b>ACTION: Follow up with Commissioner Curry</b></p>
<p><b>Commissioner Kelly</b></p> <p>Invited to participate on homeless initiative panel with DMH, LASHA Commission, and Probation to enhance DMH communication on HIPPA and other policy issues with the courts.</p>	

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<p><b>Commissioner Lue</b></p> <p>a) CALBHB/C (California Association of Local Behavioral Health Board/Commissions) – Training is available to new Commissioners</p> <p>b) Plans to meet with Robin Kay for follow up on Supervisor Hahn’s motion on disparities, particularly focusing on the API community to utilize the information to improve other communities .</p>	
<p><b>7. SAAC Co-Chairs/Community Reports/LACCC</b></p>	
<p>SAAC 2 – Patricia Russell</p> <ul style="list-style-type: none"> <li>• SAAC continues to discuss co-occurring disorders and receive feedback from panel discussions.</li> <li>• August Dark</li> </ul> <p>SAAC 3 – William Legere</p> <ul style="list-style-type: none"> <li>• Medicare/Medi-Cal</li> <li>• CAF (Client Activity Fund) issues</li> <li>• Organization</li> </ul> <p>SAAC 6 – Dorothy Banks</p> <ul style="list-style-type: none"> <li>• Presentation on non profit offering free legal services for under served communities</li> <li>• Upcoming meeting scheduled to address issues that are working and not working</li> <li>• SAAC meetings will relocate back to the Augustus Hawkins location effective July 2017</li> </ul> <p>SAAC 8 – Paul Stansbury</p> <ul style="list-style-type: none"> <li>• Dr. Sherin scheduled to visit SAAC meeting</li> <li>• Renew council membership</li> <li>• Continuing efforts working on trauma informed care priorities and homelessness.</li> </ul>	
<p><b>Meeting adjourned - Next Meeting – AUGUST DARK (no meeting)</b></p> <p>September 28 @ 11:00 am – 1:30 pm</p> <p>Kenneth Hahn Hall of Administration – Room 739</p> <p>500 W. Temple Street</p> <p>Los Angeles, CA 90012</p>	

**Meeting highlights by Canetana Hurd**