

County of Los Angeles – Department of Mental Health
OFFICE OF THE MENTAL HEALTH COMMISSION
 Thursday, September 28, 2017
 Meeting Minutes
 Caroline Kelly, Chair, Facilitating

APPROVED: by Unanimous Vote on October 26, 2017

Discussion	Recommendation/ Action/Motion
1. Call to Order by Chair Kelly Roll Call – Canetana Hurd: <ul style="list-style-type: none"> • Absent Excuse: Merilla M. Scott, Cynthia Sanchez, Kita Curry, and Jeannine Pearce • Absent: Kathryn Barger 	ACTION: None
Approval of May 25, June 22, and July 27, 2017 minutes – APPROVED BY UNANIMOUS VOTE	ACTION: Minutes approved
<ul style="list-style-type: none"> • Welcome New Commissioner Stacy Dalglish – Third District appointee, Marriage and family therapist by training, social services commission in Santa Monica. Active in UCLA Semel Institute • Two Commissioners depart - Herman DeBose and Jo Helen Graham appointed by 2nd District 	
2. Public Comments: <ol style="list-style-type: none"> a. Mia St. John – comment on DMH lack of transparency and oversight of suicides in DMH mental health facilities. b. Catherine Clay – IAB update on the 8 priorities particularly women’s reintegration. Ms. Clay gave copies of the recommendations she submitted to the board for the program c. Wendi Cabil – CAF (Countywide Activity Fund) suggested working on increasing the amount allowed and the processing time d. Jacqueline Glass – comment on CAF, how to title agenda items 5-7, background checks, and SAACs e. Mello Desire – Peer Center, December 8-10, youth parade in So. LA, urgent matter with DMH programs f. Mark Karmatz – comment on policy assistance centers, Catherine Bond memorial, and peer run organizations g. Maria E. Williams – family member with abusive son (referred to DMH Consumer Advocacy representative) 	ACTION: Follow up with referrals
3. DMH Report – Mimi M. McKay, Deputy Director, Strategic Planning and Communication Gave introduction and current reports <ul style="list-style-type: none"> • Oversees web services, legislative agenda, and grant management services division 	
4. MHSA Presentation – <ul style="list-style-type: none"> • Dr. Debbie Innes-Gomberg, Deputy Director, Program Design and MHSA Outcomes Bureau • Dr. Sermed Alkass, Transition Age Youth Bureau, Practice Lead for Early Psychosis • Kalene Gilberg, Program Manager III, Prevention and Early Intervention Bureau 	
MHSA represents approximately 25% of the overall DMH budget Prevention and Early Intervention Programs involve 4 key components:	

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<p>1. Prevention-identifying individuals at risk of mental illness, or parents that have mental disorders.</p> <p>2. Early Intervention- target children or adolescents suffering from trauma, depression, school issues or parents with mental illness</p> <p>3. Stigma reduction – help community members understand mental illness and where to get help.</p> <p>4. Suicide Prevention – utilize Didi Hirsch hotline which is available statewide and suicide prevention trainings.</p> <p>The goal is to identify suicide risk factors.</p> <ul style="list-style-type: none"> • Catch the issues or identify problems before it happens. Interventions prior to 18 months have better outcomes. • Mollen Bill – creates public private partnership for counties to apply for grants for early psychosis treatment. The idea is to collect data across states and provide learning efforts <p>Dr. Sermed Alkass – Transition Age Youth Bureau</p> <ul style="list-style-type: none"> • CAPs (Center for the Assessment of Prodromal States) – Schizophrenia is continuum; first episode prodromal appears in early stages and is simple and hard to detect. Prevention is to focus on the early stage • Coordinated Specialty Care project – the model brings a more robust and clear intervention for programs • Approximately 65% of PEI funds goes to child and adolescence treatment to prevent or delay onset <p>Public Comment on MHSA presentation–</p> <ul style="list-style-type: none"> • Endorse using the CAPs program and the benefits of connecting early • Question: Can schizophrenia be cured or prevented? Answer: If you intervene early enough it can be prevented 	
<p>5. Presentation Women’s Community Resource Center (WCRC) – Carlotta S. Childs, Deputy Director</p> <p>Carlotta Childs-Seagle introduced a new team of managers to oversee the WCRC program. Dr. Angela Shields, Acting Chief SA 6 and La Tina Jackson, Mental Health Clinical Manager, SA 2 who is volunteering to assist the program restructure.</p> <ul style="list-style-type: none"> • Program has increased to 40 more staff to combat the reported 600 cases per clinical staff. • Staff will work with incarcerated women to secure stabilization services available through linkages to other community resources. • Program plans to relocate to August F. Hawkins Clinic to accommodate the program expansion • WCRC program is divided into two components; reentry and reintegration to separate those involved in the release process and those who completed the release process • Expectation is to serve 360 people per year <p>Public Comments on WCRC Presentation</p> <ul style="list-style-type: none"> • Question: Are you connecting with the “Get on the Bus Program?” Answer: No but I will find out about that program • Catherine Clay submitted written recommendations to the Board in support of the WCRC new team structure 	

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<p>6. Discussion Action Items/Update – Caroline Kelly</p> <ul style="list-style-type: none"> • Announced that Terry Lewis retired effective August 31. Thanks to Canetana and Valerie for stepping in. Job opening for Terry’s position will be posted soon. • Approval of May, June and July minutes – approved by unanimous vote • Approval of Bylaws – approved by unanimous vote • Approval Value Statement – approved by unanimous vote • Approval of the annual report to send to the Board • Update on areas of interest for investigation – Topics that are driven by what we hear from the community what Commissioners see and do shape our agendas. Through a group process we decided to investigate WCRC and Board. Once concluded we will provide a written report with recommendations to the Board for our annual report. <ol style="list-style-type: none"> a. WCRC will continue to be an area of concern for the Commission due to the new team in place it will continue to be an area of interest b. B&C – many people who live LA County live in B&C and a number of the facilities are closing. Based on research indicates B&C are economically viable, what are alternative housing options for those with issues of mental illness, funding of supportive housing c. Peer Employment – start with the issues of supported employment, how is the department utilizing peers, what’s happening with the agency. <p>Election of Executive Committee Officers – Commissioner Cooperberg presented the following slate for voting Chair – Caroline Kelly 1st Vice Chair – Lawrence Lue 2nd Vice Chair – Merilla Scott Members-at-Large Stacy Dalgleish Susan F. Friedman</p> <p>Slate presented was approved by unanimously IAB will complete a written report and sunset in October 2017</p>	
<p>7. Commissioners’ Report</p>	
<p>Commissioner Cooperberg –</p> <ul style="list-style-type: none"> • Chair of the annual CASRA conference in Pasadena, CA on Thursday, November 2. 	<p>ACTION: None</p>
<p>Commissioner Lue</p> <ul style="list-style-type: none"> • Older adults is the area of service for FY 17-18 Data Notebook • SLT plans to reinvigorate its membership structure. Watch for updates on SLT webpage. • MHSa plans to amend the three year plan to allocated funding for IT services 	

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<p>8. SAAC Co-Chairs Reports</p>	
<p>SAAC 1 – Jean Harris, Co-Chair</p> <ul style="list-style-type: none"> • Added a public comment section on SAAC meeting agenda. to contribute Dr. Sherin’s interface model • INN2 update is completed and now working to complete INN3 • Planning to conduct an evening meeting to increase service area attendance. • Supervisor Barger’s Homeless Consortium will change schedule to meet quarterly • Attended SAAC Co-Chair meeting with Commission • MET attended the last SAAC meeting and will attend regularly if available • SAAC is encouraging Supervisor Barger to fill the two vacant positions on the Commission soon 	
<p>SAAC 2 – Patricia Russell</p> <ul style="list-style-type: none"> • SAAC would like to move the SAAC Co-Chair meeting time up so that more time is allowed to give SAAC reports • A Medi-Cal waiver update was presented at the SAAC meeting • Future meeting topics planned are homelessness and housing, and tapping the whole person care dollars 	
<p>SAAC 3 – William Legere</p> <ul style="list-style-type: none"> • Client Council Committee – the client committee was developed to increase membership with more clients • Educational law/disparities were presented at the SAAC meeting. Public education and public special education should be free for persons with disabilities. 	
<p>SAAC 6 – Dorothy Banks</p> <ul style="list-style-type: none"> • Discussed outreach efforts to clients and families • Select ambassadors to speak to various programs and community events • Welcomes the changes in service area 6 management • Presentation from Children’s System of Care on child safety was presented in the SAAC meeting • Continues to request appointed commissioners attend SAAC meeting to hear what the Commission is doing 	
<p>SAAC 8 – Paul Stansbury</p> <ul style="list-style-type: none"> • Organizational meeting occurred to welcome new members and organize rotational meeting location and time • Didi Hirsch presented on suicide at the SAAC meeting. • Problems—More training is needed to address trauma informed care issues to place homelessness people in housing with diversion issues • Raising awareness in the community’s LGBTQ population 	
<p>Meeting adjourned - Next Meeting –</p>	

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October 26, 2017 @ 11:00 am – 1:30 pm Kenneth Hahn Hall of Administration – Room 739 500 W. Temple Street Los Angeles, CA 90012	

Meeting highlights by Canetana Hurd