

OFFICE OF THE MENTAL HEALTH COMMISSION

October 28, 2021 – Minutes

Stacy Dagleish, Chair, Presiding

Minutes Approved: November 18, 2021

Motion made, moved by Commissioner Schallert, second by Commissioner Cooperberg

DISCUSSION

Call to Order and Roll Call

Chair welcomed new Mental Health Commissioner Martel Okonji, appointed by Supervisor Shelia Kuehl, Third Supervisorial District, on October 5, 2021.

Roll Call: Commissioner Root (AE), Commissioner Padilla-Frausto (P), Commissioner Friedman (AE), Commissioner Stevens (P), Commissioner Turner (P), Commissioner Dagleish (P), Commissioner Banko (P), Commissioner Okonji (P), Commissioner Ogawa (P), Commissioner Molina (P), Commissioner Acebo (P), Commissioner Cooperberg (P), Commissioner Weissman (P), Commissioner Schallert (P), Anders Corey (AE) –

QUORUM PRESENT

Administrative Matters

- a. Approval of the Minutes
 - i. Motion to approve August 27th Special Meeting minutes, so move by Commissioner Acebo as reflected in the conversation, second by Commissioner Schallert
 - ii. Motion to approve July and September minutes, so move by Commissioner Ogawa, second by Commissioner Molina
- b. Continuation of Meetings by Teleconference in Compliance with AB 361 – Pinki Mehta reported on AB 361, so the MHC meetings remain in compliance with the latest Brown Act directive to continue to meet via teleconference.
- c. Commissioner Discussion and Recommendations
 - i. **Action Item:** Request staff to provide action item tracking list on what we are supposed to be doing, what is pending and what is completed to review at full meetings
 - ii. What is the expectation for work or product for the priority areas assignment?
 - iii. Commissioner Banko is available to arrange information and project management for priority deliverables

Public Comment: Agenda & Non-Agenda Items

Sammy Lavilla - addressed items: 1) the Commission and DMH need to evaluate how many homeless Skid Row are using housing and the supportive services onsite. 2) What is the follow process regarding 5150 placements in hospitals

Jim “The Hat” - reported updates regarding COVID-19 opening for outdoor activities and events gives a light of hope and gratitude

MC Harris – commented that the school base presentation did not mention the 504 plan which is a plan his kids are on. Requested a report in on the 504 programs.

Department of Mental Health Report – No report

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Presentations –

Alliance for Health Integration (AHI) - Jaclyn Baucum, Chief Operating Officer – link to supporting document

<https://dmh.lacounty.gov/about/mental-health-commission/minutes/>

Board passed a motion in February 2020 to take the work AHI completed and look at a different model. The Board adopted three priority areas developed by AHI for collaboration and engagement across the departments.

Priority 1 Integrate and Develop Prevention Treatment and Healing Services - This is the three Departments' commitment to providing the right care at the right time to those most in need of county and county-funded services, and county-contracted.

Priority 2 Reduce Health Inequities – How to deliver the right care at the right time to folks without paying attention to cultural and linguistic appropriate care in communications. Treat our clients in a way that makes sense to them and makes them feel comfortable.

Priority 3 Improve Organizational Effectiveness – How to both support the workers who are doing all the work for priorities one and two, the workplace, the wellness of the workers, and the engagement of the workers. And how do we also support the systems that the workers do their work through and that communicate between the departments.

DMH School Based Initiative – Robert Byrd, Interim Deputy Director, PEI, DMH and Kanchana Tate, Manager for the School Based Community Access Platform, link to supporting document <https://dmh.lacounty.gov/about/mental-health-commission/minutes/>

School Based Services Plan - School based community access platform (SBCAP)

SBCAP started at the beginning of COVID-19 with a 25-member team to coordinate and support initiatives across the 81 school districts, 2,248 individual school sites serving over 1.4 million students. Partner with 71 legal entities with MOUs across the 81 school districts. Nineteen DCFS specialized foster care co-located staff in 19 offices providing triage linkage. The school communities provide opportunities and collaborate efforts to help students, children, youth, and their families to thrive. Prior to 2019, nearly half the schools had relationships with DMH clinics and the provider community.

- Expands access to prevention services
- Supports students/families towards individual and community wellbeing
- Raise awareness
- Promote resilience
- Build organizational and community capacity
- Build the capacity to recognize and respond to trauma
- Build bridges to mental health care

Community Reports

SALT 4 – Ezekiel Reyes, Co-Chair

We had a meeting last week, the Los Angeles Police Department Crisis Response Support to select mental evaluation. So, we had two people from the Los Angeles Police Department and from the Sheriff's Department come in and give us an update on how everything has been progressing with what they have been doing to work with Mental Health and the homeless, and it went well. I would also like to add that I have been meeting up with many of the homeless at the Tiny Home locations and they have nothing to do, and I was wanting to see if DMH can give pamphlets out that show the different kinds of Mental Health issues that develop from homelessness, so that way, they have something to read in the time that they have nothing to do, that way they can stay well-informed.

SALT 5 – Penny Mehra, Co-Chair

Our SALT is finally having some progress in moving along towards our goals and planning events for the promotional SALT participation. We are sad to lose one of our Co-Chairs, Martel, who's been a great member, but we understand that he's going on to the Commission here and so we know he's doing good work. In our Service Area, as everywhere in the County, issues with homelessness continue to be a high-stress point and one of the events that we're planning, people have asked to develop -- we haven't developed it yet -- but a presentation to community members, to talk about what DMH is doing and what Mental Health services are available and how people are engaged in assisting the homeless to try and soften the response to homelessness in the community. So, I'm going to keep an eye on that and see how that goes. Also, I did hear that there was a question regarding -- we have several very vibrant, I think, Health Neighborhoods and there was a question from staff on the Health Neighborhoods, if there was a way for staff and for agencies to give feedback to the County, what that mechanism was. And I guess that's it for us.

SALT 8 - Paul Stansbury, Co-Chair

Summarize the issues your Service Area/Cultural Community is currently addressing: At the October 1, 2021, SALT 8 Meeting we received information National Hispanic Heritage Month and other community activities and resources available related to mental health. The primary agenda items were a Peer Mentoring Group report and had budget planning session.

As previously reported the Peer Mentoring Group had been formed as an ad hoc group of the SALT 8 YourDMH. The report at the October 1 meeting was to clarify the role of the group and its activities. There had been expression of misunderstandings about its role and status as part of SALT 8. A special meeting had been called to review and to plan for a presentation for the full SALT 8 regarding the group. The original purpose was to develop a mentoring program for peers so they could better understand the system, how to participate in the SALT, and become SALT leaders. There was concern by some about the group being only ad hoc, and not addressing peer certification input by peers, and lack of recognition of efforts on speaker's bureau by peers. The report to the SALT was to allow the group to review its activities, its purpose and how to address issues. Some had expressed concern that it was considered an "ad hoc" committee which was thought it may have indicated a lack of importance, but it was clarified this status was according to the YourDMH guidelines and not an indication of lack of support. It was indicated that some of the issues that had come up were not just SALT 8 issues and addressed in other SALTs, UsCCs and even outside of the Your DMH channels.

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At the meeting there was discussion on budget plans for the year with proposed projects and ideas presented. The uncertainty of being able to meet in person and when that might occur makes some of the proposed projects problematic but hopefully by spring the ability to meet and have in person activities will be clear.

The continuing issues in SALT 8 are addressing impacts of COVID on services especially about racial disparities, the anti-Asian hate racism, vaccination disparities, access to services for those persons who have technology barriers, youth and transitional age youth, the increased level of mental health challenges with the anxiety and stress because of COVID and how MHSA funding and programs can and are being used to address these issues and the ongoing programs. About MHSA, understanding the impact that COVID had on some of the changes, the members are concerned about how to evaluate the use of FSP teams, performance-based approach, the flow of clients, addressing the demographic disparities, community-based PEI efforts with schools and libraries, the innovation programs and how are the changes specifically addressing SALT 8 issues. Also, SALT 8 wants a peer resource center in the service area. The peer members are very appreciative of the current Peer Resource Center but believe peers could be better served with a local one also.

Key struggles this month: The need for a hybrid approach to meetings where persons can meet in person, or virtually is becoming evident. SALT 8 has very good attendance virtually but many feel they are missing the opportunity to network and address issues more effectively by not meeting in person. Others are very reluctant to meet in person. A hybrid approach for the near future would address this issue.

Key successes this month: The report by the Peer Mentoring Work Group was productive for SALT 8 members to understand its role and what needs to be addressed in other channels.

What priority community issue(s) from your SALT or UsCC should the MHC be aware of: Developing a hybrid approach to meetings was an expressed need. Also, addressing the different perspectives on the state of the pandemic where some believe it is over, the concerns about variants, the large number who haven't been vaccinated and that it will be with us for a long time to come was an issue. Recruiting members willing to represent stakeholder groups as opposed to just attending meetings is an ongoing priority.

Discussions

1. Priority Updates

- a. School-Based Mental Health – representatives provided today's presentation see documents <https://dmh.lacounty.gov/about/mental-health-commission/minutes/>
- b. Disparities – Commissioner Padilla-Frausto
We are still waiting for a report back on motions passed by Supervisor Hahn regarding Asian Pacific Islander (API) groups.
- c. Homeless/Housing – Commissioner Weissman
Workgroup continues to meet with Maria Funk and Lisa Ruiz on topics related to homeless and housing. The group discussed FSP program, and its redesign scheduled to flip July 1. DMH transition into the new world of FSP is active and we will continue to have more definite report back. Group plans to meet with Commissioner Stevens soon.
- d. Staffing & Vacancies – Commissioner Ogawa
Commissioner reported various SALTs are inquiring on the difficulty in recruiting and hiring individuals, especially therapist and professionals. It's a real challenge for all SALTs. SALTs inquired whether the Commission could get ongoing reports from the department about the vacancies and

how they are being filled. The request to have org chart with names is still pending. SALTs also inquired about getting more information on WET funding because of staffing and recruitment, will the County look at increasing the amounts for these programs.

Action – Request updates on issues or problems the WET program is having to rebuild the workforce.

2. Chair & Commissioner Reports

5th District Report

- **Commissioner Weissman** - Announced Hollywood 2.0 is the newest iteration of the Trieste program. Supervisor Kuehl motioned to start and implement Trieste next week. Commissioner met with DMH staff regarding FSP to focus on the community-based providers and partners pick up nonclinical positions that might be a quicker fix.
- **Commissioner Schallert** - Proposed a question regarding open positions that can't be filled? We are closer to having an Empath Program on the site of Henry Mayo Hospital. Stephanie English is pledging as much as she could to support that DMH serve the uninsured and underinsured. The Restorative Care Center has 5 buildings, 80 rooms, and a wellness center. Private entity will take over the urgent care center to serve adolescents. One problem came up this month is that we have legal entities, AMR or PMRT and it is impossible to get an ambulance to the crisis program. We need an adolescent and children's behavioral health unit. Will continue to update on this real problem.
- **Commissioner Cooperberg** –
Action Item: Recommend MHC invite James Coomes, Director of Urgent Care at Olive View, to full meeting and share the unique program models that they are putting on the Olive View campus.

4th District Report

- **Commissioner Ogawa** -Suggested Commissioner Schallert address his question to Greg Polk to provide guidance on how to address the vacancies in both directly operated and contracted agencies. Our feedback remains the same issues that we've been stating, the integrated care, the funding, and the staffing organizational structure. Also, we are looking at pilots hoping that DMH will recognize in terms of primary health care integrating with mental health care.

3rd District Report

- **Commissioner Okonji** - SALT5 Co-Chairs are struggling trying to utilize funding to engage in communities. Staff is great assisting with conversation, documents, and processes but they are really hitting the wall. Joining with additional stakeholders would implement some of the funds. There is struggle hiring within organizations. Specifically Hollywood Homeless Youth Partnerships which combines our homelessness organizations together are having conversations about pay equity. I am really seeing the differences between government contracts, county and organization positions not having the capacity to live fulfilling lives with the amount of pay available to them, and it's happening in a lot of spaces.

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2nd District Report

- **Commissioner Stevens** - Working closely with 2nd district around homeless mainly SPA 6. Looking at those unhoused facing challenges and working with the Homeless Initiative. Concerned and about SA6 and no update on the West Central Mental Health issue.
- **Commissioner Turner** - AOT staff has been gutted and needs administrative staff to support team meeting set up and take minutes. AOT has been understaffed, 17 people cannot serve the entire County. It was suggested Commissioner approach DMH about providing more outreach capability, raise staff levels, and more assisted outreach treatment programs.

Closing / Adjournment - Motion to adjourn in recognition of Breast Cancer Awareness, LGBTQ History Month, and Mental Illness Awareness Week