

County of Los Angeles  
**MHC EXECUTIVE COMMITTEE MEETING**  
Minutes -Thursday, April 13, 2023, @11 am  
Kathleen Austria, Chair, Presiding  
**Approval Date: May 11, 2023**

**Motion moved by Commissioners Austria, Dagleish and Friedman by unanimous vote**

**1. Welcome & Call to Order - Chair Austria**

**2. Roll Call - Commission Staff**

Commissioner Austria (P), Commissioner Friedman (A), Commissioner Root (A), Commissioner Dagleish (P), **No quorum.**

- a. Commissioners in attendance for MHSA Annual Update Plan Briefing Presentation: Commissioner Schallert, Commissioner Weissman, Commissioner Molina, Commissioner Cooperberg, Commissioner Stevens

**3. Administrative Action Items:**

- a. Approval of Minutes – February 09, 2023, tabled to May 11, 2023
- b. Approval of Minutes – March 09, 2023, tabled to May 11, 2023

**4. Presentation**

- a. MHSA Annual Updates Plan Briefing (Kalene Gilbert, LCSW, DMH-MHSA Administration)  
Kalene Gilbert provided the Executive Committee a preview of the MHSA components in the MHSA Annual Update Plan for the upcoming public hearing: (see link for details)
  - I. Purpose of the Annual Update
  - II. Overview of MHSA Components
  - III. MHSA Client County and Expenditures
  - IV. Community Planning Process
  - V. MHSA Proposal Process
  - VI. Proposed Changes
  - VII. Next Steps and Timeline
- b. **Announcement:** MHSA Administration will soon roll out a MHSA dashboard allowing MHC, community members, stakeholders and others to look at the stats.

**5. Items for Discussion and Possible Action:**

- a. Prepare regular Commission meeting agenda for the April 27, 2023, meeting
  - i. Agenda items/topics for consideration for the April 27<sup>th</sup> meeting:
    - 1. **Election of Executive Committee Officers**
      - a. April: Appointment of Nomination Committee
    - 2. **MHSA Annual Updates Public Hearing**
    - 3. **Resume monthly DMH Budget Updates for May 25, 2023 meeting (Molina request)**

**6. Telephonic Public Comment Agenda & Non-Agenda Items**

- a. **John Warden:** Hi, my name is John Warden. LA County has experienced increases in anxiety, depression, post-traumatic stress, and suicide. There is a priority for a robust real-time community needs assessment. These are just some of the challenges that this commission is dealing with. Life Score is a simple, easy to use peer support, health improvement platform with unique privacy and security based on evidence-informed research, and deep learning data allows you to build capacity to connect users to community resources, getting them directly to

the right support at the right time. Life Score can provide leadership dashboards with real time data on the mental health and wellness of LA County residents, especially in those demographics most at risk, including veterans and females under 30.

The reporting allows you to evaluate outcomes and efficiencies by each supervisor district. You can make better informed decisions, including looking at the effects of social determinants, mindset, and other environmental factors. Former LA mental health director, Dr. John Sherin, is one of the supporters of Life Score and says the following: "I would expect to see both improvements in mental health status and decreases in suicide risk with the application of Life Score in care systems. I'm hopeful that Life Score gets an opportunity to demonstrate its potential efficacy and impact, which I believe to be substantial."

- b. **Osbee Sangster:** Good day! My name is Osbee Sangster Speaking on behalf of the Black Los Angeles County Client Coalition, Inc. Today, I am requesting the Mental Health Commissioners assistance related to the Service Area SALT3 Virtual Meeting Minutes (distortion) for the Month of January and February 2023 (page's 2 and 7.) We ask for your oversight, accountability, support, and the focus on the History of Black America, understanding and awareness leads to progress. Let's be a stark reminder of inequities. An assault on one, is an assailing on all of us.

How far we've come! And how far we must go! the Black Los Angeles County Client Coalition has traveled hundreds of miles together advocating for mental health services, collaborating on subject matters that matter to us deeply. Today, calls for the need of urgency to address, ensure and identify motives in response to SALT3 recent minutes that were duped into publishing broken English, indifferent and gull behavior; misleading and deceiving readers with scattered fragments, words and sentences that were unfinished, incomplete, and introduced into the deception of uttered-detracting comments (to take away, or divert parts) tales written down about our African American history and the (BLACCC) Digital Literacy project.

We've been hoodwinked and bamboozled. The reproach of cruel behavior; is an attitude of indifference with the intent of (shaming) laxness and to deceive the public. BLACCC's public comment and announcement edits is misleading and deceptive to the Greater Los Angeles County society-race-ethnic group.

The SALT3 impertinence administration to even allow and or approve edits with duped broken English, to be released and published by the Los Angeles County Department of Mental Health. Without "Red Flags," the (audacity) of this administration not to consider; and or take the time to read, listen, review and or proof, public Virtual recordings and or transcripts to clarify BLACCC's Content and spoken details is alarming.

It would be shameful; not to mention the distortion of the digital divide BLACCC's Literacy Project. An effort; to help the greatest number of needy individuals. Those in need of access to the digital world. Stakeholders / Give-Away (H/P) Chromebook computers to help provide access to digital inclusion.

What are we prepared to do about it? I've also attached email correspondence for your reference.

Please let me know if you have any questions. Thank you.

- c. **Jean Harris:** Okay. So, Jean Harris here, Service Area 1. We had asked repeatedly at the stakeholder meeting, CLT, about service areas and these proposed MHSA changes. Never did get any of that information. Although it was asked repeatedly on slide 7 of the presentation, the data doesn't balance. Unique clients served and new clients, you add up all the service area numbers and they're not the same. The slide 11 had the wrong dates. What are the right dates? What happened in March? And the proposed changes? What has changed? And expansion. What is the cost of expansion? PMRT, where is that now? You're talking about expanding it. What is the input -- the impact of these changes in each service area? What is the overall spending of the Department of Mental Health and MHSA services in each service area? When do Innovation proposals begin review? And how can community members submit proposals? Can outcomes of MHSA funded programs be shared? If we're funding these and they're expanding, how do we know how they did? And so, I would really love to get that information. Thank you.
- d. **Jim "The Hat":** Hello, Thanks, all. Jim "The Hat" open transformation to give you honest and trustworthy information. Well, today's a special day for me, because being able to be with the Department of Mental Health for over 10 years. I appreciate it because here, one of the sources that was able to receive help with my cancer. No, excuse me. Excuse me. With the chemotherapy, which is called controlled suicide. Yeah. That's this nickname. And I appreciated that at so much cost. Without that whole wellness and recovery, I would've died in 2014, like the doctor said. But I did, to make the long story sharp, which it said in scriptures, the vegetables served as food for you. Lost those 52 pounds, cancer free for eight years. No, excuse me, cancer free for seven and a half years.

Now I'm going through my second round. We're going to be there again, same way. But I had to remember that to use it. Well, today at [jw.org](http://jw.org), a worldwide mental health crisis. It showed me one of the colors that I used to wear when I started with the hat. My only complaint now is that Mrs. Dalgleish, and it is a beautiful complaint, she has the color of the glorious hat, that [speaking away from microphone] orange. Please. Please. She has that color that I started off with. And because it's orange, it has substance, the substance of being happy. And that is the same color it has that the article, the front page of [jw.org](http://jw.org). Happy for the Department of Health.

- e. **Carol:** Hello, my name is Carol. And I want -- first, I want to thank the commission for doing the wonderful work that you're thank for providing for the community at large. I'm honored to be here today, but there are a couple of things I want to point out from today's meeting. Again, my name is Carol, and I'm a member of the Asian American community at large. And I'd like to make a comment about the data being presented and wondering how that was culturally relevant into the communities of the AAPI community, which is a diverse community with different languages, cultures being representative.

And I didn't see that being identified in the data presented today and wondering the service areas 2 and 3, which has one of the largest AAPI communities and how those communities will be represented in the MHSA proposal, moving forward with the proposed changes and how the

commission can bring accountability to our DMH department given what happened in the Lunar New Year event this past January.

And there are, given the stigma that Asians do not seek services, given this culturally shame that comes about with seeking mental services, and I'd like to bring that to your attention. So, thank you all for the work that you're doing, and hopefully we can move the conversation along and bring more change and different programs to the meeting. Thank you.

- f. **Carey Grier:** Good afternoon. My name's Carey Grier. I'm a community health worker with the Genesis Older Adult Program, but also a person with lived experience, also an advocate also to a veteran my parents. But regarding within the county and work for the county, don't hold a lot of stuff that's going on. But also, they have the monthly meetings, but only thing you keep hearing about and that you're seeing is that you are hiring a lot of people, top heavy management, you don't see that pertaining to, like, bringing on social workers, nurses, other, you know, the -- I don't know, but we all are important too. You just see more of them and nobody else.

That's what, you know, give kudos, you know, they put all that out there, but no one is, you know, the department they know, they know that they are low, that they are short staffed and everything. And then also, regarding -- pertaining to the individuals with lived experience, the advocates, the community health workers, the promoters that they're going to be changed over to community health workers. There's also a lot of issues going on with that, too, because you've got individuals doing everything and under the sun that shouldn't be done within the department. And the department needs to be. Thank you.

- g. **Carol:** (2<sup>nd</sup> Public comment) Hello, this is Carol again, and I'd like to ask that the information for these commission meetings be disseminated to the communities because this is the first time I'm hearing about this commission and I was invited by my workspace, but I know a lot of people in the community that have no idea when these commission meetings are going on. And you all are making very important decisions that are pertaining to budget programs oversight. And we need more people to be here to provide public comment, to provide oversight to our taxpayer dollars being sent. And I just ask that information be disseminated equitably, fair, and just to all the different SPAs in Los Angeles County, we are diverse linguistically. What is it? Able, like disabled, able, all those things we need to really reach out to the different diverse communities in SPA 1 through SPA 8. Thank you for the time.

**Adjournment – End of meeting 12:46 pm**