



PUBLIC COMMENT TO ADDRESS THE MENTAL HEALTH COMMISSION
 March 28th 2024, Mental Health Commission Full Meeting/ MHSA Public Hearing
 (IN PERSON AND BY PHONE) TRANSCRIPT AND EMAIL ATTACHMENTS

The following individuals addressed the Commission either in person or by phone during this meeting. Emailed communication is attached separately.				
Agenda #	Name	Method used to address the Commission (e.g., By phone, in-person, or email)	Type of Public Comment (e.g., General or Stakeholder Report)	Comments
Public Comment				
	Chuck Woodrow	In person	General	Thank you for having the meeting and my name is chuck wood rough and I am here to ask ab the (Indistinct) diagnose program and I see a great need for that and my personal experience 20 years ago I had the opportunity to go through the twin peek program and as a result of that I had the opportunity to reinvent myself and my life has been very successful and I haven't been back in the hospital nor do I self medicate anymore. And I noted they closed the door diagnose program and I you see a great need for that. My question to the board with passing proposition one and implementing more (Indistinct) residential programs.
	Anonymous	In Person	General	Thank you for giving me this chance. Dr. Wong she stayed on I wonder why you don't respond to any of the citizens concerns and you are not here. You ran away one day when I was here. It is not the commissioners that can answer the question how your department has been working. With a conflict of interest that exists between your department and the health care providers and some other staff. What do you have to say about that Dr. Wong? Why don't you come here and give your answer to the commissioners and to us as the public. And the commissioners I want to know what are you doing b about my you reports that I have provided? I hope you are going to give me some answers. Thank you.
	Bernadette Martinez	In Person	General	My name is ber net mar tee in easy and mental health advocate and I founded add organization and I am diagnosed since I was 12. Age of 12 I tried today take my own life. Age of 15 I took a handful of pills and that started my (Indistinct) I was dual diagnosed. I have extensive effort on voluntary effort for mental health stability. Two

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				<p>of my adult children are also diagnosed and I deal with those journeys everyday. It is difficult. And I have questions in regards to potential legislation for statute of limitation for any individual hospitalized for mental health disability. The liabilities add up like no other. I am not asking for a free pass just a time out. I did 1.6 million in ten months working for a law firm and negotiating contracts and I have success in advocating and I have saved several lives so far and glad we are on record. Nonetheless my objective now is to help others not, I am in a mental health crisis now and homeless living my car. The civil liabilities need to be addressed and doesn't take much to be kind to somebody in pain. Pain is universal and when someone's pain is so severe the only solution is taking your own life and it is deep and difficult to come back and I came back about three times and each time set me back further and further. If we can have a tier type of level of severity and helpfulness because of my extensive background and efforts to have mental health stability I think it would be helpful for the community thank you.</p>
	Monica Olsen	In person	Stakeholder Report	<p>Greeting my name is Monica Olson and one of the three SALT chairs serving the Antelope Valley and we are planning the meeting for April 1st for (Indistinct) monthly meeting. We are also continuing to plan for May mental health awareness event scheduled for May the 4th with no discouragement of agencies embracing a Star Wars theme. Rumors of a costume for service area chief. This week we met with Dr. Horn to understand the procurement process and roadblocks for outreach and one (Indistinct) Spanish documents without the time to go through the standard 30 day DMH process specifically for SALT one meeting agenda and meeting minutes as we want more engagement with the Spanish speaking community we ask if it is possible to use part of the budget to contract with a county vendor for the documents that require a quick turn around. Dr. Horn gave a review of the process and gave options for what to do to make the documents available. Another item on which Dr. Horn agreed to follow up is ability to access and update many</p>

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				micro site and establish a social media present presences and appreciate the time Dr. Horn made in support of this. We are eager to continue to learn existing processes and establish new ones as needed to keep our SALT going and thriving.
	Pastor Joshua Nah	Phone	General	This question and comment is from Joshua NA. There is a lot of questions related to the previous comments in this MHSA meeting. So there has been many questions and many comments related to the services and I would like to know what the follow up procedure? How you receive the question and comment and how you implement those question and comments and what the result is. And in our community a lot of people, a lot of patients or the consumers they are wondering the results of our comments and ideas and questions. Thank you.
	Hector Ramirez	Phone	Stakeholder	?My name is Hector Ramirez and one of the cochairs for the access for all USCC we had our meeting this month again. We now have had two of the cochairs resign from the subcommittee because of difficulty with DMH staff and getting accessibility services and some really unfortunate stigmatizing behavior that we experience and we have a new cochair and we had our first meeting and discussed new procedures and the three year MHSA document that is up for review and our members want to highlight the fact it is not ADA accessible for those of us who have disabilities and it is a 370 page long document and it is long to read and to print it is very expensive and through it it is unaccessible. It is in English only and we did request in accessible format and Spanish from staff numerous times and we haven't received it and know today is the deadline and that is a concern we didn't have access to the document because our disabilities or in Spanish and the deadline is today and it highlights one of the biggest concerned with this process not only with this document and how it involves our access for all USCC stakeholders that have disabilities and we want b to thank the commissioners who note and had highlighted these issues and we did send a notice to Dr. ong last year and we haven't heard back or know whether or not she received our message with our concerns

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				<p>and we are thankful for those of you who are here to listen to our stakeholders and it is very important that at least somebody recognized our consumers with disabilities have paid a significant burden in the administrative process. Even with the consultant that the department has hired. We will be having our in person meeting in May. And it will be our first in person meeting since the pandemic and if we are hoping to have it at the main DMH building and it is a really important meeting for many of us. We lost many of our members throughout the pandemic to COVID and it will be a really pivotal opportunity skchlt and look forward to working with the taun chss that is prop one brings and the benefits and opportunities that are in it. Like the accountability factor to ensure their processes are accessed to people with disabilities and we are glad to be part of the system and hoping that the next time that the DMH delegations consumers are also included in that so the the narrative is more beneficial and not only to the ten but all 11 legislative representatives that got that opportunity. Thank you.</p>
	Charles Wade	Phone	Stakeholder	<p>Hello I am Charles Wade. I am with SALT six and want to say thank you for having this meeting</p>
	Paul Stansbury	Phone	Stakeholder	<p>Good morning this is Paul stance burry SALT eight cochair and a few brief items we had a long discussion about the MHSA update and two year plan and shared information with the membership about the resource available and thorough process we have in try to go develop recommendations and thought it was a good process and we are making sure to track the implementation and what is going to happen with the plan and that is one of the issues of this. How to mac sure and I know part of the CPD process is address how this is implemented.</p> <p>There was a discussion about proposition one. Concerns were expressed and had at that point we didn't know the results and there was a concern about it is happening and how it could impact the department of mental health programs.</p> <p>Third we also we are planning or give an update on the April 25th town hall at the course community center and looking forward to</p>

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				<p>that and making sure people in the area are aware of the town hall meeting on that date.</p> <p>Another item to be sure you are aware of in order to do more outreach and engagement we have May 4th meeting at the engage 1 wood that is an in person meeting and part of the effort to move the meeting around is service area and connect with the different community ins the service area and finally we were looking at how to encourage more membership. We have good participation. We are always looking to make sure we have representation in different communities in our area and we are looking forward to the elections this summertime. That is my report. Thank you</p>
	Ivonne Sandoval	Phone	Stakeholder	<p>It has been a good month and we were rattled to see where prop one is going to lie. It is a good fight and I can thank those who voted on it even though it didn't pass and it was very marginalized and of course this is time of getting ourselves dusted off and going back to the bulletin board and seeing how we can process and move forward and continue to help those that need help.</p> <p>I just want to say that we had our meeting on the second Friday of this month. We gathered and we were talking about our two upcoming mental health events. The first one will be May the 4th. At bell ve der lake park in east Los Angeles and that park is between Brooklyn Caesar Chavez avenue and first street. It would be on either side. It is a big park and you will find the tents there in addition to that on May the 4th is NAMI walk and held at the historic Los Angeles park on Spring Street. Unfortunately it is on the same day. Maybe if I p am whimsical I can make it in the morning with the NAMI people and be present and it is not too far, and be able the to get to bell ve der park.</p> <p>I know for this, for going back to the bulletin board. I am sure Wendy and Kimberly is hearing and I know with you on board it is going to be a good way of coming together and finding better solution to deal with prop one.</p> <p>I, myself, all month, it has been a month of is now known as MEXICA new year. And this is because a lot of the native tribes</p>

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				<p>basically from Mexico that many indigenous people here are from there. They had created this grouping to celebrate all of those nations.</p> <p>So the month of March is MEXICA new year and I want to wish everyone a happy new year in this manner.</p> <p>I was able the to attend a couple of events that were held at the museum in long beach.</p>
	Barbara Wilson	In person	General	<p>Despite the fact that I am one of the three cochairs for Spa two I was out of the state and did not attend our meeting and we did have a presentation about men and their mental health need and especially in midlife. My comment today is me as a private citizen.</p> <p>As I have written already I am very concerned about the new, not new, the continuing and flourishing growth industry that is unlicensed, unregulated facilities that house people. And I would like to, you know, just make you aware of some of the dangers and one of the big dangers of course is that residents have no consumer protections since they are not liepsed. If somebody wakes them up at 2 o'clock in the morning and tells them to get out that is what happens.</p> <p>Also we have a lot of push back from homeowner groups because they don't know the difference between licensed facilities and unlicensed facilities. They do know that when cops are out in their neighborhoods at two in the morning they don't want them there and say that is bringing the property values down. They go to their city or counsel or whoever the political represent I haves are and demand we don't want any facilities in our neighborhood for the mentals and this puts our licensed facilities at risk.</p> <p>So, I am hoping that the commission can take a look at that, maybe encourage the board of supervisors to begin to identify where are these facilities located? There is no tracking apparently.</p> <p>Also if there is a bill, potentially, AB 2650 that is proposing toen count the number of people in licensed facilities that have serious mental illness and who are low income.</p>

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				<p>I want to mention to you people who attend day programs in the community in their efforts the grow their stability are actively being recruited by unlicensed facility owners at those sites. Particularly they target people it seems that have family members that are out of state. With that I will close.</p>
	Ezekiel Reyes	In person	Stakeholder	<p>Hi my name is e Sikh el, update Dr. Horn has come to SALT four and shared with us numerous amounts of information in regards to what we can and can't do as a SALT. We feel reinvigorated because of the information shared and we work together with the liaison so it feel like a team effort now. We are planning for many more events this year in comparison to last year because we have finally found what we can and can't do with the events and planning meetings. Everything is working out so far. It is going slow. COVID hindered a lot and we are going out of the phase now and looking promising. Thank you so much for that.</p>
	Ezekiel Reyes	In Person	General	<p>For the public comment I I would like to say prop one is the worst thing that could have ever been put together. For the simple fact as of right now we have many homeless. I know many homeless and I spent 15 years on the street due to cancer twice and many of t homeless I do know many are housed and those with who are housed are not forgotten. We have a system now before prop one passed the perp feels homeless before they move out of the houl. They become homeless after they move out of the families house and finally get services and aid connecting them to many people as a community and then they are placed nd a home. In an apartment by themselves and now they are back to square one. And everything is going in a circle for those experiencing homelessness. Again, people may believe homelessness starts when a person becomes unhoused that is not true. Homelessness starts when the child is finally realizing they are the black sheep of the family. That is when homelessness helps.</p>

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	Eddie Flemming	In person	General	<p>Good morning commission and good morning everyone. My name is Eddy Flemming and I am from emergency and intervention. You hear me? There we go. My name is eddy FLEMMING with emergency intervention and director of community relations and I am here the to read the the letter from the community and address the disconnect between the department and the community. We have no direct connection to resources except for the agenda which might be six meetings a year and I heard something put off until June. People are having an experience now and I heard something about another consultant and that is the last thing we need. I have this letter from the community in SALT six to an attention. Sunlt complunt and trust and transparency. I am writing to address the matter of utmost importance concerning community trust and transparency concerning SALT six and funding allocations for mental health advocates and support we must uphold the account sxblt credibility in our initiatives and last SALT six meeting there was a break down in communication regarding funding allocation for community events aimed at mental health awareness many community members left the meeting (Indistinct). January 18th, 2024, dfs brought to the attention of t community and SALT six members at the service area leadership team allocated over a 130,000 for community based organizations and partnership with organizing mental health and events in the community. This information was clearly outlined in the agenda clarifying the intend use of funds and subsequent rel vags of the funds were not available many question the accountability and credibility of the leadership and absent of transparency and honesty caused significant harm and disappointment with the community. Stakeholder trust is compromised. (Indistinct) the emotional toll on our end user and consumers is profound.</p>
MHSA PUBLIC COMMENT	Antonia Rios	In person	General	<p>I am a native American latina mother of seven grandmother of four and provider for the past 16 years today I stand or sit before you to advocate for the inclusion of parents anonymous an amazing</p>

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				<p>organization with rich history of services and impact in our communities since 1969. Parents anonymous has been a becken of hope for diverse parents children and youth offering evidence based programs and supportive services that have positively transformed countless lives. Parents anonymous evidence based approach is not only recognized locally but supported at the federal level through the inclusion in the federal clearinghouse for evidence based practice. This acknowledgment underscoreses the effectiveness and legitimacy of parents anonymous programs. Which have been evaluate and had proven to deliver tangible result ins improving family dynamics. Mental health and overall well being. Despite the proven track record and unwavering commitment to servicing our community. Parents anonymous was unjustly excluded frd the recent mental health services act with MHSA 24\26 plan that decision not only overlooks the valuable contributions of parents anonymous and undermines the integrity of the decision making process within the community planning process CPP. As a CPP member who attended almost every single one except one because of my brothers passing due to mental health. I was appointed to be on CPI subcommittee and USCC and parents anonymous has served diverse parents children and youth since 1969 despite the on going commitment and submission of proposals by the deadline established by DMH there has been no contact or follow up. Further more parents anonymous was unjustly eliminated from the MHSA 24\26 plan despite knowing, having a three year contract with DMH to provide services via a master agreement starting in 2019 for seven years. The importance here that I am saying to you all is parents anonymous be put back in the green and doing so if it is not you are failing hundreds of thousands diverse parents, children and youth. And I wanted to throw in there because of this organization I stand here today celebrating 18 years clean. Maintaining my mental health and stability and it saved my sons life. My daughter who was held hostage and her mental health. It saved her life and not only that it made the cycle of mental health within generation of my own</p>
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				family and those that I know completely break that chain and we are strong advocates here today because of it.
MHSA PUBLIC COMMENT	Anonymous	In person	General	<p>I am senior research and development research with parents anonymous and also a member of API USCC and I attended the CPP meetings and I am here to address serious concerns regarding the community planning process for the MHSA 24/26 plan and impact on organizations like Parents Anonymous and let's talk about the methodology or lack thereof. Throughout the process there is absence of any methodology. Instead of diving into the specifics of each recommendation decisions were made based on whether stakeholders agreed or disagreed with categories of recommendations. This blanket approach (Indistinct) each recommendation. The dollar or the dollars on the table. The budget that usually asked about today that wasn't discussed in the beginning and we didn't know about in any of that. Leaving stakeholders every one in the dark about the data and evidence behind all of the recommendations. This process is meant to be more than just going through the motions. It is about listening to the voices of all of the community members regardless of background or experience. And yet CPP failed to do just that. Let's talk about Parents Anonymous. Despite having a master agreement with the DMH the organization was inadvertently eliminated in the current plan. Proposal submitted by the deadline established by the DMH and it was acknowledged asked and there is no contact or follow up since. Parents Anonymous was eliminated saying it didn't meet the guidelines which isn't possible since there is a three year contract with the DMH to provide services by a seven year master agreement since 2019. Organizations like Parents Anonymous have been supporting the empowerment of diversion parents' children and youth since 1969 and has been supported by the federal clearinghouse and I would recommend that MHC take a look at all of the points and make changes.</p>

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MHSA PUBLIC COMMENT	Bernadette Martinez	In Person	General	Hi again. (Indistinct). Primary focus on my unlawful detainer. And landlord awareness for mental health is awesome. (Indistinct) and domestic violence and in my minutes at court they said, the court at the the hearing that my evidence was not going to be allowed. I had a voice recording at two in the morning from my landlord saying get rid of the cat or get out. The cat is is my best friend and towed four of my vehicles. I was asked to sit down and mote with his attorney I didn't have legal representation and I was by myself and I met with the attorney and she said because you didn't file the documentation you are not table to admit any to the court. In the minute order it says request continued made by the defendant was heard. Motion to continue by defendant is denied. I have been in a mental health crisis since the induction of my 15 year old son who is a gang leader arrestd with a loaded firearm. I was dealing with this by myself and lost my apartment and couldn't get a continuance in court. Path ways of hope is my service provider and defendant walks out of the kourtd and states dos what you have to do. And court state as default hearing. And this is on my record and I want to thank the planning commission for hearing my statement the last meeting and providing landlord awareness.
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MHSA PUBLIC COMMENT	Anonymous	In person	General	>> Goods afternoon everyone I am with NAMI urban LA. Just appreciate you having this space today. I had the pleasure of p being a part of the community planning team for this stakeholder process. And I want to, just share some reif flexion that is the process was really powerful in a lot of ways and just the time invested; the effort, I just want to uplift that RIGO rod regez was an exceptional facilitator for the conversation. We had a diverse group of people who got together discuss proposal ideas and I want to

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				<p>share in look at the presentation today it was great to see some of the recommendations presented here and also it is a very limited work at what happened in that space. I just want to urge the commissioner to consider all of the proposals that all of the recommendations that were shared in the fuller, I am sure you have the big one that you are referencing. Just to keep in mind that the ones shared today, while there is a lot of consensus that went into representing those. They are not fully representative of what some of the robust discussions and em passionate conversations that were had on the team and some of the ones that didn't make it to the limited look and I want you to consider those and as Kalene mentioned a lot of specificity is lost when consolidating to the recommendations here and some are where the most pressing needs are. I can't say that enough. We see the gap between the ARDI need areas and that is just a very limited look and then the services that were provided. I think a lot of that. A lot of those needs are not going to be addressed until we get specific and name the population most impacted by some of the gaps and I think taking a deep look at the recommendations you are seeing some of the community members it took a lot for a lot of us to be at the table so consistently. And, you know, we did that for the community that is we represent and I want to encourage you to consider those and lean into the specificity and make room for that. Until we name the populations that were impacted we are not going to see the gaps closing</p>
MHSA PUBLIC COMMENT	Hector Ramirez	Phone	General	<p>>> Thank you my name is Hector ra mir ez and I am LA county consumer and mental health clinic here in chats worth and my comments are as a consumer and I participated in this project since the succession and I think one thing to take away from this it was a good attempt and it shows perhaps it is failure. Up until a couple of minutes ago many of were having joining through Microsoft teams and we couldn't join. We call and had couldn't e mail the department and we didn't get a response. While the department and staff could say they have accommodations and services for us to participate. The fact is that many of us don't have access to them</p>

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				<p>because of the technical difficulties we are forced to deal with through Microsoft teams and then definitely some of the attitude issues we had with the facilitator particularly for people with disabilities and our Spanish speaking communities who felt very much not only marginalized but discriminated and had unfortunately in our access for all. Our consumers have stopped participating in those groups and two of the cochairs resigned because of the retaliation and hostility. Not only towards disability but some of the members try to support and advocate for some of the other priorities that is are not included here and for those that are new. Think that this particular document is an example of why prop one was kind of passed forward and while it talks about equity and (Indistinct) and doesn't have accountability and is lose sight and had doesn't show the contributions that the community did or mention the deficits it encountered in the process and other they think it is missing sg specificity in the to how to clearly articulate some of the things that are going to be worked nd implementation. Particularly given the fact that the recommendations from people with disabilities in our access for to, and not included in here to resolve and follow up with that really look forward to making sure that is include and had (Indistinct) an example of how this report, similarly another community. The access for all USCC which is represented here and I am cochaired of is not title correctly. To say the community and you don't write about the community group the way it is. It shows a significant disconnect.</p>
MHSA PUBLIC COMMENT	Osbee Sangster	Phone	General	<p>Good day my name is (Indistinct) representing black Los Angeles county client coalition Inc. Key struggles for the plan include concerns over homelessness. Funds to help capitalize and reinstate the housing trust fund advisory. DMH to support development of supportive housing today to keep pace with the crisis in our communities we need immediate ready for occupancy dwellings. Housing and investment not 2 or 3 years. Housing units down the road. The importance of reestablishing the housing trust fund to support the development of homelessness. Transitional and</p>

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				permanent housing for the homeless and unhoused. The critical need to produce dwelling in our restored buildings immediately and substantially without delay. On site support services for special needs to leverage we must explore long term commitments and investments for the housing. For the unhoused for the challenges facing us today thank you.
MHSA PUBLIC COMMENT	Dr. Lisa pine?	Phone	General	Thank you this is dlchlt Lisa pine in per listen and parent and CEO of parents anonymous. Thank you for listening and I am sorry I couldn't be in person. I object to the utilization of the model and CBP process for several reasons you look at page 56 and parents anonymous for example was included by the PEI committee in the plan and the discussions we have been around 55 years providing evidence based mental services to diverse parents children and youth in this county. All of a sudden after a meeting in February the department decided to red line it and say by their definition we do not mee the MHSA guidelines that is impossible since we currently have a \$600,000 3 year MHSA contract with the department. So the application of red lining parents anonymous out is not factual and not fair. It meets the guidelinesees and by the way we have a seven year master agreement we are already approved to do MHSA PEI work. We do not know, for example, in this complicated process what the rational for this. We asked for several meetings and we got no response and we also put in a proposal on 1\15\22 as required by the department and never scheduled a meeting to have a conversation at all. The process we believe is very truncate and had the CPP process never moved it had meetings around. How do you engage a county that is 55 miles long and wide and force them to come to a location downtown. You are not looking to get the community involved. To ask parents, children and youth to appear Monday morning is impossible. Many advocates not just us are asking why don't you move the meetings around the county which is done over andover again. Get t the input and ask the community what you need. Last part I want to make about accountability. Thank you ka lean for talking b about the amount of money. But the

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				365 million for PEI or 255 million or over 1.5 billion in the reserves that Los Angeles has. No other county has reserves like Los Angeles and that is online you report and people are suffering and we do not know how much of the proposal is going back in the coppers of the county and how it is going through the community based organizations in the community. Thank you very much .
MHSA PUBLIC COMMENT	Sydney Tapison	Phone	Stakeholder	Good afternoon my name is Sidney SALT seven and new cochair and along with YVONNE I attend it had mens mental health picnic in nor walk and I will say I will be attending my next future meetings in person everyone have a nice day and a bless Easter. Good day. Bye bye.
MHSA PUBLIC COMMENT	Anonymous	In Person	General	>> Hi again the MHSA report is great and it is a report that has been established by a mental health commission on October 7th, 1957. It is a repeat unfortunately. You are just brushing it up. You are not really implementing what was established back then. The discharge plan. Hospitals and discharge patients. There is no safe discharge plan. My daughter is a good reason. I am sitting right here you don't have to go farther away. Landlord. Law enforcement you mentioned they need to be educated. How about our businesses. How about you yourself the mental health employees themselves are out of touch. How about restaurants and all businesses who do work with people. They need to have some kind of mandatory required training like diversity. As the one speaker who experienced about her hearing and her voice was not heard because of her son and all of that stuff. Guess what it is because of lack of patient advocacy. We need new advocates and not the patient right frs the mental health department. No that should be off of t table. Right t now I reported about two months ago. What are you doing still? They should be off of the case. But sadly the relationship that is excludeing patients from participating in probate hearing. I was deny and had I pushed it. It should be, they should be removed immediately. If you didn't do it. Housing issue. If when loved ones are not allowed and had my daughter as sick as she was, she was not allowed to be added on the list. If

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				(Indistinct) doesn't have a heart. Maybe you should bring here. They should be educated.
MHPA PUBLIC COMMENT	Ezekiel Reyes	In person	General	>> My name is EZEKEIL and community member and to speak on the proposal they are great. If not many people felt like they were heard and lots of things got done and we pushed through lots of arguments while we were at the meetings and I went to every one of them. And I felt like I was a r part of it and it was a great experience. I hope there is more of things such as this because it really gets the community involved. Everybody can nitpick and when you nitpick at something you will find something wrong this was something that was brought together by the community at large thank you very much

MENTAL HEALTH COMMISSION MEMBERS

1st District	2nd District	3rd District	4th District	5th District
Supervisor Hilda L. Solis	Supervisor Holly J. Mitchell	Supervisor Lindsey P. Horvath	Supervisor Janice Hahn	Supervisor Kathryn Barger
Bennett W. Root, Jr.	Kathleen Austria	Kevin Peng Xu	Marilyn Sanabria	Brittney Weissman
Imelda Padilla-Frausto	Reba Stevens	Stacy Dalglish	Michael Molina	Lawrence Schallert

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Susan Friedman

Vacant

Teresa Banko

Victor Manalo

Judy Cooperberg

Supervisor Kathryn Barger, represented by Anders Cory, Health Deputy

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