



Recommendations to Contra Costa Health Services, Contra Costa Mental Health Commission, and All Community Stakeholders:

We are encouraged by recent efforts of our County Behavioral Health leadership to join us on two site visits and consider housing and program options such as Psynergy and Ever Well. We are hopeful that we will see a tightly-scoped formal analysis in the coming months that addresses the housing gaps for the adult SMI specialty mental health population of Contra Costa.

We ask that the following recommendations be considered as our community continues to work towards solutions for Housing That Heals:

1. Convene a *Value Stream Mapping Event* to co-create a community *Action Plan* that will focus on building increased access to a full continuum of care with all levels of Housing That Heals for the 5600.3(b) adult SMI population.
 - Review recommendations from previous Contra Costa County Housing Reports (1994 & 2013) cited in this paper along with recent reporting, housing needs assessments, and housing goals developed by California Mental Health Boards and Commissions and the California Mental Health Planning Council.
 - Perform a cost benefit case study analysis for high cost users of Specialty Mental Health Services. Focus on access to clinically appropriate level of care, not the least expensive or least restrictive. Allow a person the ability to move within the continuum of care and seamlessly access more intense levels of support, treatment when needed, and a less restrictive care environment when ready.
 - Consider the need for an in-county IMD/MHRC/PHF facility. Consider the cost to clients, families, conservators, and case managers who travel to out-of-county placements.
 - Assure equity of access to addiction treatment and primary care for all those who meet the 5600.3(b) definition.
 - Establish quality assurance standards on all 5600.3(b) housing programs. Improve care coordination and transitions to community-based care and include community oversight, accountability, and transparency.
2. Appoint a Contra Costa Behavioral Health Housing Czar/Chief who has in-depth experience with housing development, proposal and grant writing, and knowledge of the 5600.3(b) Specialty Mental Health system of care.
 - Serve as a liaison to all county departments, divisions, and community-based organizations.
 - Develop contractual relationships with multiple providers to develop a system of abundance, quality, safety, stability, and choice across the life span of a person.
 - Oversee quality assurance standards. Ensure that every member of a “care team” receives the training and education required to ensure high quality treatment and that all Department of Labor regulations are being met.
 - Track the progress of the *Action Plan* with public monthly updates to community partners.
 - Support and advocate for legislation that will increase funding to build Housing That Heals for those living heroically with a serious mental illness.



*Housing That Heals:
A Search for a Place Like Home for Families Like Ours*

The intention of this spotlight on Contra Costa is to provide an overview of our community’s Specialty Mental Health system of care with a focus on quality housing access. We have great pride in the public health system of Contra Costa and in no way want to diminish the hard work of our community stakeholders and county partners.

We believe that we have one of the best public safety net systems in the state and nation. However, like all other counties, we have failed to bend the harm curve and provide adequate housing solutions for this most vulnerable SMI specialty mental health population. And, there is still no agreement on who the most vulnerable population is or the public data to identify it.

The mission of Contra Costa Health Services is “to care for and improve the health of all people in Contra Costa County with special attention to those who are the most vulnerable to health problems.”⁸⁴ As two moms who have worked with pride and purpose to support this mission, we urge all community partners to spotlight the specialty mental health population of Contra Costa and include the WIC 5600.3(b) population among the most vulnerable to health problems.

We believe in the power of partnership and in our community’s ability to unite in humanity around injustice, inequity, and discrimination. But we worry about the endless processing, papering, and planning while people with a serious mental illness are dying slowly, with their rights on.

Too many are still dying far too young due to co-morbidities, suicide, solitary confinement, and shame. While science and medical research pursue prevention and more effective treatments, we must fund proven practices today for those who cannot wait for more politics and broken promises. **We have talked enough and studied enough and we know what to do.**

Together, let us build a system of care that includes Housing That Heals in Contra Costa County.



***This Heart Paper is dedicated to all of the
♥ Moms on a Mission for Families Like Ours ♥***

⁸⁴ <https://cchealth.org/healthservices>

SHCLA Workplan

Community Land Trust Incorporation	END DATE	RESP.	STATUS
Draft Mission Statement	11/18/2020	PMT	complete
Present possible domain names to PMT	12/2/2020	NCLT	complete
Draft/outline articles of incorporation, bylaws	12/22/20 3/21	NCLT	complete
Draft Board documents - create board handbook and board matrix	12/31/20	NCLT	complete
Finalize Bylaws in draft	12/31/2020	NCLT	in progress
Review current efforts by the County and its partners for providing affordable supportive housing	12/23/2020	Karen	ongoing
Develop a comprehensive strategic plan to establish and sustain SHCLA	1/31/2021	Karen	in progress
Research best practices being employed in other counties re: land banks and affordable SH strategies	12/31/2020	Karen	ongoing
Set up website and social media accounts for SHCLA	2/1/2021	NCLT	in progress
Establish Advisory Committee	2/15/21	PMT - Karen/Erin	Complete and meeting bi-monthly
Outreach for Founding Board Officers	2/15/21	PMT	in progress
Draft community membership and guidelines framework for the SHCLA	2/15/21	NCLT	in progress
Nominate Founding Board members	2/17/21	PMT + Advisory Comm.	in progress
File Articles of Incorporation	3/4/21 3/31/21	NCLT	Filed with Secretary of State
CA Tax Exempt application and 1023	3/1/2021	NCLT	

Hold first board meeting to adopt bylaws and policies	3/15/2021	PMT	
Additional Board Member Recruitment and Interviews	3/31/21	PMT + advisory comm	
Synthesize info gathered from focus groups / community outreach	3/31/2021	NCLT	
Community Outreach			
Present Community Outreach Plan to PMT	2/17/2021	Erin	
Build outreach list including consumers/families, MH CBOs, Housing, Finance, city/municipalities	11/20/20	NCLT	complete
Write and send newsletter to members	12/20/2020	NCLT	monthly
Plan focus group and create outreach materials	1/27/21	NCLT	
Send outreach materials/announce focus groups	1/20/21	NCLT	
North County Consumer Focus Group		NCLT	
South County Consumer Focus Group		NCLT	
Family member (+NAMI) focus group		NCLT	
Schedule ongoing stakeholder meetings: Consumer group, Family group, MH provider group		NCLT	
Hold meetings with City agencies and councils		Karen & Erin	ongoing

Supportive Housing Community Land Alliance- TIMELINE

- Outreach (to consumers, SH providers, housing resources)
- focus groups to advise program development
- CLA incorporation founding board
- hire Executive Director
- create/fine-tune the 4-year financial plan
- fine tune outreach plan to implement AB2377 acquisitions

- programs in place
- supportive housing standards established
- acquisition plan in place to meet SMI housing needs within 5 years
- impact report from evaluation team
- sustainable financial model to carry project beyond pilot funding

Y2 (10/2021 - 9/2022)

- Launch CLA, hire staff,
- develop supportive housing program
- 1st property acquisition, access funding for specific projects
- hire consultant for evaluation plan
- focus on board & care acquisitions but begin plan for individual homes, small sites

Y1 (10/2020 - 9/2021)

Y3 (10/2022 - 9/2023)

EBSHC

East Bay Supportive Housing Collaborative

Members

Kathleen Sikora
 Chair, EBSHC
 Margot Dashiell
 Vice Chair, EBSHC
 Linder Allen
 Tom Bates Fmr. Mayor,
 Assemblymember
 Dmitri Belser E. D. Ctr. for
 Accessible Technology
 Laurie Capitelli
 Fmr. Councilmember
 Michael Godoy
 Loni Hancock
 Fmr. Mayor, State Senator
 Lois Heaney
 Linda Maio
 Fmr. Vice Mayor
 Liz Rebensdorf
 President, NAMI East Bay
 Toni Veglia

March 2, 2021

Dr. Karen Tribble, Director, Alameda County Behavioral Health
 3000 Embarcadero Cove
 Oakland, Ca

Dear Dr. Tribble:

Re: Community Recommendations in Support of De-Incarceration of Persons with Mental Illness

The East Bay Supportive Housing Collaborative (EBSHC) and Families Advocating for Serious Mental Illness (FASMI) were gratified to read your October 2020 recommendations to the Board of Supervisors (BOS) regarding de-incarceration of persons with mental and behavioral illness. We are aligned with the broad scope of service and institutional expansions your recommendations cover. We are also encouraged by the potential inherent in the Department of Housing and Community Services' 2021 *Behavioral Continuum Infrastructure* proposal of \$750M for a one-time general fund allocation for competitive grants over a three-year period. These initiatives are in sync with our vision of Care First, Jails Last, a model underway in Los Angeles County.

Contact: sikorakt@aol.com

<https://eastbaysupportivehousingcollaborative.org>

We are particularly enthusiastic about the ACBH proposal to augment the capacity of the acute, sub-acute and licensed board and care facilities infrastructure. As community advocates, family members, and organizational volunteer service providers, we perceive these to be among the most urgently needed services, among the many worthy service demands identified, because they will likely provide the best opportunities for people in SMI and/or SUD crisis to gain stability and avoid involvement in the criminal justice system. **Therefore, our organizations endorse the ACBH proposals generally, while underscoring the needs we perceive to be of highest priority—those most likely to reduce both incarceration and homelessness, issues clearly intertwined for persons with untreated SMI/SUD.**

We understand that the Board of Supervisors' decision-making process is dynamic and is driven by county resources as well as the potential availability of the state proposals referenced above. Several months ago, we were informed that the BOS will not be in a position to allocate the full \$50M estimated cost of the initial ACBH recommendations during this troubled financial year. One BOS staff member specifically encouraged EBSHC to identify the one or two cost items thought to be of most critical value in their impact on the decarceration process. In addition, we were informed that individual supervisors are interested in priorities recommended by community organizations.

On August 30, 2020, The East Bay Supportive Housing Collaborative submitted a statement to the JIMH in favor of the movement in Alameda County to make significant reductions in the Santa Rita mental health unit. In the interim, you, Dr. Karyn Tribble, submitted to BOS a multi-faceted plan aimed at jail reductions in the mental health unit and strategies to prevent incarceration in the first place. The following are our top two priorities among your recommendations to BOS:

Priority One: Increase the number of sub-acute beds to permit consumers who have begun treatment in an acute psychiatric hospital to achieve the stabilization necessary to maintain a treatment regimen and move to a lower level of care. We believe that this would achieve the dual benefit of increasing individual opportunities to consolidate treatment gains and achieve higher levels of functionality while relieving the pressure on our psychiatric hospitals that more individuals in crisis can be admitted for acute care.

Priority Two: In an era when licensed board and care facilities are closing in Alameda County at an alarming rate, continue the HCSA's Housing Division practice of rate supplementation of existing facilities with MHSA funds. For those with serious mental illness, some still in the process of stabilizing from acute psychosis, increase the number of licensed board and care homes as resources become available, perhaps utilizing non-profit providers to manage the level of care appropriate for some individuals exiting JPG and Villa Fairmont. With support for activities of daily living and oversight of clients' medication regimen, many individuals are able to gain and maintain stability. Some will eventually be able to move on to lower levels of care. In the 2020 EBSHC recommendations to the JIMH, two areas of concern not identified in the ACBH recommendations to BOS were highlighted. It's not clear that these recommendations would require costly expenditures but they will require policy development and cross system coordination at the least, with psychiatry, criminal justice, juvenile justice, crisis services, public information/relations and clinical providers.

- I. The fact is that pre-COVID reports indicate that African Americans are high utilizers of the county's most restrictive adult services. As you are aware, these rates are just under 50% of those admitted to John George and the Santa Rita Jail Mental Health Unit on an annual basis. Of those identified as high utilizers of John George (more than 10 admittances/yr.), again, African Americans represent the highest proportion of any ethnic or racial group. **An equity interest should require a racially aimed strategy to reduce the burden of the most severe aspects of mental illness manifested in the African American community.**

- II. Family members are the frontline in experiencing the signs of mental or behavioral illness and in overseeing the welfare of those in their care. There appears to be no active policy for family member outreach across the system, for a public relations campaign to alert families to early signs of SMI/SUD and the resources available for treatment, or for a feedback system for families to report difficulties or successes in system utilization. While we have seen excellent examples of staff work from the Office of Quality Assurance, few people are aware of this ACBH service. Thus, we wish to re-state the recommendations for family-oriented initiatives and BIPOC outreach, particularly African American outreach strategies, which were included in our August 2020 statement to JIMH. So far, these recommendations appear not to have been addressed. **A broad policy approach is needed to assist families in understanding the importance of recognizing early manifestations of SMI, early intervention options, county and community resources, family advocacy, and burn out prevention.**

Thank you for your consideration of our recommendations.

Signed

Kathleen Sikora, Chair

Margot Dashiell, Vice Chair

for The East Bay Supportive Housing Collaborative (Please see membership listed in letterhead.)

and

Alison Monroe

Katy Polony

for Families Advocating for the Seriously Mentally Ill (FASMI)

**Supportive Housing Community Land Alliance Summary
October 2020 – March 2021**

Project Grantee – Northern California Land Trust (NCLT) is creating new community land trust (CLT) entity

Project Subject Matter Expert (SME) – Dev Goetschius, Burlington Associates

FUSE Fellowship (Fellow) – Karen Nemsick

ACBH Project Manager (PM) – Mary Skinner

Highlights:

- Project management team (NCLT, SME, Fellow, ACBH PM) begins meeting every 2 weeks with the first meeting in November, 2020;
- Advisory committee has been formed and began bi-monthly meetings in February, 2021; it is comprised of the PMT; staff from ACBH Consumer Empowerment Department; ACBH Ethnic Services; AC Social Services; POCC members; and other community members;
- Legal counsel has been secured by NCLT to assist in drafting and filing required documents;
- CLT Articles of Incorporation drafted, approved, and filed with the CA Secretary of State in March 2021;
- Board documents drafted;
- Founding board members are being nominated in April; and
- Bylaws are being drafted for PMT's review and approval.

The fellow has also been identifying and engaging with various stakeholders including other ACBH departments, family members, NCLT, county supervisor offices, state officials involved in AB2377, and affordable housing developers to assist in understanding their goals and potential concerns with the CLT. This outreach has included exploring best practices in housing with other supportive services organizations such as BACS, Hope Coop, and Corporation for Supportive Housing.

Upcoming Action Items:

- Board development and discussion about nomination of founding board members;
- CLT Membership model structure;
- Review and selection of membership model to add to the bylaws;
- Job description of CLT Executive Director and timeline for hiring;
- Bylaws review by Advisory Committee
- Focus groups and CLT website

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Monday, April 26, 2021 12:06 PM
To: Works-Wright, Jamie
Subject: FW: Justice Department Finds that Alameda County, California, Violates the Americans with Disabilities Act and the U.S. Constitution | OPA | Department of Justice

Please see information below.

Jamie Works-Wright

Consumer Liaison

Jworks-wright@cityofberkeley.info

510-423-8365 cl

510-981-7721 office



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From: boona cheema [mailto:boonache@aol.com]
Sent: Sunday, April 25, 2021 8:04 AM
To: Works-Wright, Jamie <JWorks-Wright@cityofberkeley.info>
Cc: margaretcARolfine@gmail.com; prichett@locrian.com
Subject: Justice Department Finds that Alameda County, California, Violates the Americans with Disabilities Act and the U.S. Constitution | OPA | Department of Justice

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Please forward this to the Mental Health Commission.

Also asking that this be on the agenda in May.

Thank You

<https://www.justice.gov/opa/pr/justice-department-finds-alameda-county-california-violates-americans-disabilities-act-and-us>

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Friday, April 23, 2021 4:54 PM
To: Works-Wright, Jamie
Cc: Downs, Fawn
Subject: Agenda Items for MHC May 27, 2021

Hello Commissioners,

Please submit any Agenda items for the May 27th Mental Health Commission meeting, by **Monday, May 3rd**. Any items you would like in the MHC packet needs to be submitted by **Thursday May 13th**.

I will be going on vacation on May 19-28 and I need to have everything prepared before May 18th. Thank you for understanding and your help.

Have a great weekend.

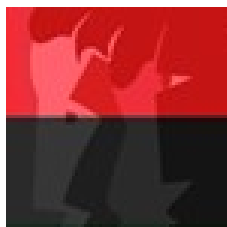
Jamie Works-Wright

Consumer Liaison

jworks-wright@cityofberkeley.info

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Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Friday, April 23, 2021 9:56 AM
To: Works-Wright, Jamie
Subject: FW: MHSA Community Input Meetings
Attachments: MHSA FY22 Annual Update Community Input Meetings .pdf

Please see the information below and the attached flyer about the MHSA input meetings

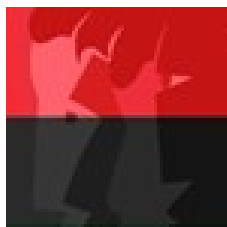
Jamie Works-Wright

Consumer Liaison

Jworks-wright@cityofberkeley.info

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510-981-7721 office



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From: Klatt, Karen
Sent: Friday, April 23, 2021 9:52 AM
To: Works-Wright, Jamie <JWorks-Wright@cityofberkeley.info>
Subject: MHSA Community Input Meetings

Jamie,

Please share this information with the MH Commission:

Greetings!

Below is an announcement, with attached flier, of four **Mental Health Services Act (MHSA) Community Input Meetings** that will be held by Zoom. The meetings are being conducted to elicit input into the MHSA FY21/22 Annual Update and on new ideas and strategies to address mental health needs in Berkeley.

Meetings will be held on the following dates and times:

- Monday, May 3rd: 1:00pm – 2:30pm
- Tuesday, May 4th: 10:30am – 12:00pm
- Tuesday, May 11th: 6:00pm – 7:30pm

-Wednesday, May 12th: 3:00pm – 4:30pm

Join Zoom Meetings at:

https://zoom.us/j/8446733966?pwd=OGp3Tm5L_QTc5TGdhd2tYWlIKcDVhdz09

Or call into Zoom Meetings: 1 (669) 900-6833

Meeting ID: 844-673-3966

Password: 081337

A PowerPoint presentation will be shown during the Zoom meeting. The presentation will be the same during each meeting. If you are interested in participating and will be calling into the meeting and would like a copy of the presentation, please contact Karen Klatt at: KKlatt@cityofberkeley.info or (510) 849-7541.

All community members and staff are welcome to participate. Please circulate widely to anyone who you think would be interested in providing input into this process.

Thanks much,

Karen

*Karen Klatt, MEd
MHSA Coordinator
City of Berkeley Mental Health
3282 Adeline Street
Berkeley, CA 94703
(510) 981-7644*

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**JOIN A COMMUNITY ZOOM MEETING
TO LEARN ABOUT, AND INFORM,
CITY OF BERKELEY
MENTAL HEALTH SERVICES ACT (MHSA)
FUNDING AND SERVICES!**

MHSA LEGISLATION PLACES A 1% TAX ON PERSONAL INCOMES ABOVE \$1 MILLION DOLLARS. FUNDS ARE DISTRIBUTED TO MENTAL HEALTH JURISDICTIONS BASED ON THE POPULATION IN A GIVEN AREA. ANNUAL FUNDING IS LOCALLY PROVIDED IN THE FOLLOWING AREAS:

COMMUNITY SERVICES & SUPPORTS (CSS): PROVIDES TREATMENT SERVICES AND SUPPORTS FOR SEVERELY MENTALLY ILL ADULTS AND SERIOUSLY EMOTIONALLY DISTURBED CHILDREN.

PREVENTION & EARLY INTERVENTION (PEI): FOR STRATEGIES TO RECOGNIZE EARLY SIGNS OF MENTAL ILLNESS; TO IMPROVE EARLY ACCESS TO SERVICES AND PROGRAMS; AND TO PREVENT MENTAL ILLNESS FROM BECOMING SEVERE AND DISABLING.

INNOVATIONS (INN): FOR SHORT-TERM PILOT PROJECTS TO INCREASE NEW LEARNING IN THE MENTAL HEALTH FIELD.

MEETINGS ARE BEING CONDUCTED TO ELICIT COMMUNITY INPUT ON THE PROPOSED MHSA FY21/22 ANNUAL UPDATE FUNDS, AND ON NEW IDEAS AND STRATEGIES TO ADDRESS MENTAL HEALTH NEEDS IN BERKELEY.



Meeting Dates/Information:

Monday, May 3: 1:00pm-2:30pm

Tuesday May 4: 10:30pm-12:00pm

Tuesday, May 11: 6:00pm -7:30pm

Wednesday, May 12: 3:00pm-4:30pm

Join Zoom Meetings at:

<https://zoom.us/j/8446733966?pwd=OGp3Tm5LQTc5TGdhb2tYWllKcDVhdz09>

Or call into Zoom Meetings:

1 (669) 900-6833

Meeting ID: 844-673-3966

Password: 081337

*If you are calling into the meeting and would like a copy of the PowerPoint Presentation that will be shown, please contact Karen Klatt.



For more Information contact:

Karen Klatt (510) 849 -7541

KKlatt@cityofberkeley.info

**To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the Disability Services Specialist at 981-6418 (V) or 981-6347 (TDD) at least three business days before the meeting date.

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Thursday, April 22, 2021 3:39 PM
To: Works-Wright, Jamie
Subject: FW: Link to City Auditor Just Released Report on Police Calls for Servivery

Please see the information below.

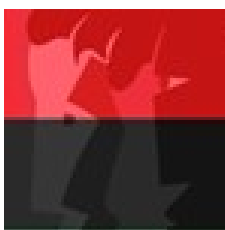
Jamie Works-Wright

Consumer Liaison

jworks-wright@cityofberkeley.info

510-423-8365 cl

510-981-7721 office



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From: Margaret Fine [mailto:margaretcARolfine@gmail.com]
Sent: Thursday, April 22, 2021 3:34 PM
To: Andrea Prichett <prichett@locrian.com>
Cc: Works-Wright, Jamie <JWorks-Wright@cityofberkeley.info>
Subject: Fwd: Link to City Auditor Just Released Report on Police Calls for Servivery

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----- Forwarded message -----

From: Margaret Fine <margaretcARolfine@gmail.com>
Date: Thu, Apr 22, 2021 at 3:31 PM
Subject: Link to City Auditor Just Released Report on Police Calls for Servivery
To: Works-Wright, Jamie <JWorks-Wright@cityofberkeley.info>

Dear Jamie - Would you kindly share this report with the Commissioners and the public? Also BMH staff may be interested if they have not yet seen it. Thank you! Best wishes, m

Dear All—

Today the City Auditor released the report on overall police response to calls for service and officer initiated stops in the City of Berkeley.

Here is the link to the report and the Tweet thread.

Report:

https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf

Report Summary in Spanish:

https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Analisis%20de%20la%20Respuesta%20Policial%20de%20la%20Ciudad%20de%20Berkeley.pdf

Tweet thread: <https://twitter.com/JennyTheAuditor/status/1385318901177667585?s=20>



[Jenny Wong, #StopAsianHate 王儷蓉 on Twitter](#)

" @JennyTheAuditor Today we released a report, which for the first time provides a review of all police responses to calls for service and officer initiated stops in the City of Berkeley. <https://t.co/DV0oxZbPAf> 1/"

twitter.com

Per the Auditor, the top findings are in the highlights page at the top of the report, in addition to a broad overview on the types of calls police respond to, the amount of time spent on these calls and number of officers who respond to them, officer initiated stops and the results of these stops, and police response to calls involving mental health or homelessness.

Hopefully you will be keen for the Mental Health Commission meeting for May 2021 to focus on this report including a presentation.

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Tuesday, April 20, 2021 10:30 AM
To: Works-Wright, Jamie
Subject: FW: May is Mental Health Month Celebration
Attachments: May Is Mental Health Month 2021flyer.pdf; Award Nomination letter 2021.pdf

Please see the information below.

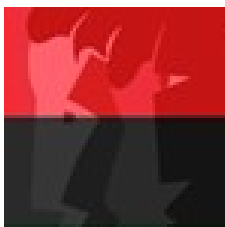
Jamie Works-Wright

Consumer Liaison

Jworks-wright@cityofberkeley.info

510-423-8365 cl

510-981-7721 office



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From: Grolnic-McClurg, Steven
Sent: Tuesday, April 20, 2021 9:57 AM
To: Works-Wright, Jamie <JWorks-Wright@cityofberkeley.info>
Subject: FW: May is Mental Health Month Celebration

Please send to MHC. Thanks.

Steven Grolnic-McClurg, LCSW
 Mental Health Manager
 Berkeley Mental Health
[510-981-5249](tel:510-981-5249)

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From: Katuala, Yvette
Sent: Monday, April 19, 2021 2:55 PM
To: All Mental Health <AllMentalHealth@cityofberkeley.info>
Subject: May is Mental Health Month Celebration

Hello,

On behalf of the May is Mental Health Month Planning Committee, I am pleased to announce that Berkeley Mental Health is hosting its annual community May is Mental Health Month celebration. **Due to Covid-19, the event this year will be virtual and will be held on Wednesday, May 26, 2021 from 5:30pm – 7:30pm.** (flyer attached) The theme this year is:

Covid-19: Challenges, Hope and Resiliency
“Increasing Community Mental Health & Wellness”

Also attached is the Award Nomination letter with all of the details around nomination guidelines. **The deadline for nominations is Wednesday, May 12, 2021.**

Please let me or Barbara Ann White know if you have any questions concerning the Award Nominations.

Regards,
Yvette.

*Yvette Katuala, MA, LMFT
Assistant Mental Health Division Manager
City of Berkeley, Mental Health Division
(510) 981-7654 (direct)
(510) 499-4125 (cell)*

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City of Berkeley Mental Health Division
&
Berkeley Mental Health Commission
May is Mental Health Month 2021



Covid-19: Challenges, Hope, and Resiliency
“Increasing Community Mental Health and Wellness”



Ending Mental Health Stigma and Discrimination

Join Us For This Free Zoom/Call-In Community Event!

The program will focus on the Challenges, Hope, and Resiliency that individuals have endured during the COVID-19 Pandemic. The event will include a consumer/peer panel presentation, information sharing, entertainment, prizes, and the community achievement awards will be presented.

When: Wednesday, May 26, 2021

Time: 5:30 - 7:30 P.M.

Zoom Registration Link: <https://zoom.us/j/95664280093>

One tap mobile: US: +16699006833 Telephone: Dial: US: +1 669 900 6833 Webinar ID: 956 6428

Please continue to adhere to all federal, state, county, and city safety COVID-19 protocols.

For additional information contact: (510) 981-5290



HEALTH, HOUSING & COMMUNITY SERVICES DEPARTMENT
MENTAL HEALTH DIVISION

The City of Berkeley Mental Health “May is Mental Health Month 2021” Achievement Awards

April 19, 2021

To: Berkeley Mental Health Staff, Peers/Consumers, Family Members, Community Partners, and All Community Stakeholders

From: Berkeley Mental Health’s “May is Mental Health Month Committee” (MIMHMC)

Subject: Achievement Award Nominations

The Berkeley Mental Health MIMHMC is seeking nominees for its Mental and Behavioral Health Achievement Awards (a nomination form is attached). Achievement Awards are given to staff, peers/consumers/clients, family members, professionals, organizations, faith-based, businesses, media, volunteers, and mental health first aiders who have made an extraordinary difference in the lives of people living with mental health challenges and/or co-occurring conditions.

Recognition is given for, but not limited to mental and behavioral health education to the general public; elimination of stigma; preventing or fighting housing discrimination for mental health consumers/clients; creation of new and innovative programs and services; fundraising for mental health activities; recognition of long-term financial support to mental health services; provision of community supportive activities that emphasize mental and behavioral health; advocacy and/or intervention on behalf of peers/consumers/clients and working for positive new mental and/or behavioral health legislation.

Deadline for award nominations is **Wednesday, May 12, 2021 by 5:00 pm**. Honorees will be notified by **Wednesday, May 19, 2021** and awards will be presented to awardees at the “May is Mental Health Month” zoom event on **Wednesday, May 26, 2021 starting at 5:30 pm**. A zoom link will be sent to all honorees, prior to the event.

Please email, fax or mail nominations to:

Barbara Ann White, MA
City of Berkeley Mental Health
3282 Adeline Street
Berkeley, CA 94703
bawhite@cityofberkeley.info

Awards Categories

Business: An individual, group of individuals or company operating as for profit (e.g. an attorney, physician or landlord), who is not a mental health contractor and has provided extraordinary services through any of the above described activities.

Child/Adolescence: An individual, group or organization that has contributed, enhanced and expanded children's mental health and alcohol and drug services to infants, children and youth in Alameda County.

Client/Person with Lived Experience: An individual who has experienced mental health challenges and who has helped to improve the provision of mental health services.

Family: An individual who has a family member who has experienced mental health challenges and who has helped to improve the provision of mental health services.

Faith Based: A faith-based organization that has provided extraordinary services in the mental health arena.

Media: An individual, group or organization, who through the media has informed the public in a positive way about issues related to mental health.

Professional/Organization: A mental health professional or organization taking that "extra step" in providing mental health services and going beyond their job description.

Volunteer: An individual not fiscally compensated for their work and has made an extraordinary difference in the lives of those people with mental health challenges.

Mental Health First Aider: An individual who has utilized Mental Health First Aid skills to compassionately respond to a person in a mental health crisis and/or assisted them in accessing mental health services.

Additional Award Criteria:

1. Nominations for recent activities are preferred, but long term activities or service may be recognized.
2. Awards are for Alameda County residents or for nominees, who have provided activities or services, particularly for residents of the cities of Berkeley and/or Albany and must benefit persons with "mental health challenges or co-occurring conditions" in Alameda County.

We look forward to receiving your nominations.

Sincerely,

Berkeley Mental Health's
May is Mental Health Month Committee

Attachment: Application



Nomination Form

**Mental Health Achievement Awards 2021
Application**



If you know someone who has been instrumental in providing mental health and/or co-occurring conditions services and/or educating the public about Mental Health and/or Behavioral Health and has made an extraordinary difference in the lives of people with “mental health challenges” in Berkeley and/or Albany; please nominate someone for a Mental Health Achievement Award. There is no limit to the number of nominations that you can submit and self-nominations are welcomed too.

To make a nomination, please complete the following information and try to be as specific as possible. **Deadline for award nominations is Wednesday, May 12, 2021 by 5:00 pm.**

Your name and contact information (Optional—you may nominate anonymously)

Name: _____

E-mail: _____

Phone: _____

Address: _____

Organizational affiliation (If applicable): _____

Nominee’s name and contact information

Name: _____

E-mail: _____

Phone: _____

Address: _____

Organizational affiliation (If applicable): _____

Award Category
(Circle One)

**Business---Child/Adolescent---Consumer/Client---Family---Faith-Based
Media---Professional/Organization---Volunteer---Mental Health First Aider**

**Description of this person's or organization contributions, as they relate to the application
criteria above. (500 words maximum):**

**Please return the completed form to Berkeley Mental Health at the contact information
below by **Wednesday, May 12, 2021 by 5:00 pm.****

**Awards will be presented to awardees at the “May is Mental Health Month“ zoom event, on **Wednesday,
May 26, 2021 starting at 5:30 pm.****

(Awardees will be notified by Wednesday, May 19, 2021)

Please email, fax or mail nominations to:

**Barbara Ann White, MA
City of Berkeley Mental Health
3282 Adeline Street
Berkeley, CA 94703
bawhite@cityofberkeley.info**

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Monday, April 19, 2021 9:09 AM
To: Works-Wright, Jamie
Subject: FW: Public Works Project of the Year Historical Restoration/Preservation \$5million but less than \$25 million - Mental Health Services Center Renovation

Hello All,

Please see the information below

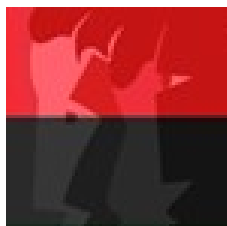
Jamie Works-Wright

Consumer Liaison

Jworks-wright@cityofberkeley.info

510-423-8365 cl

510-981-7721 office



Please be aware that e-mail communication can be intercepted in transmission or misdirected. The information contained in this message may be privileged and confidential. If you are NOT the intended recipient, please notify the sender immediately with a copy to HIPAAPrivacy@cityofberkeley.info and destroy this message immediately.

From: Grolnic-McClurg, Steven
Sent: Monday, April 19, 2021 8:36 AM
To: Works-Wright, Jamie <JWorks-Wright@cityofberkeley.info>
Subject: FW: Public Works Project of the Year Historical Restoration/Preservation \$5million but less than \$25 million - Mental Health Services Center Renovation

Please forward to MHC.

Steven Grolnic-McClurg, LCSW
Mental Health Manager
Berkeley Mental Health
[510-981-5249](tel:510-981-5249)

Please be aware that e-mail communication can be intercepted in transmission or misdirected. The information contained in this message may be privileged and confidential. If you are NOT the intended recipient, please notify the sender immediately with a copy to HIPAAPrivacy@cityofberkeley.info and destroy this message immediately.

From: Rhonda Wilhite
Sent: Friday, April 16, 2021 10:18 AM

ToSubject: Public Works Project of the Year Historical Restoration/Preservation \$5million but less than \$25 million -
Mental Health Services Center Renovation

WARNING: This is not a City of Berkeley email. Do not click links or attachments unless you trust the sender and know the content is safe.

Primary Agency – City of Berkeley, CA DPW
Primary Contractor – B Bros Construction
Primary Consultant – ELS Architecture

Congratulations!

The Mental Health Services Center Renovation has been selected as one of the American Public Works Association's *Public Works Projects of the Year Historical Restoration/preservation for \$5 million but less than \$25 million* for 2021. As the managing agency, primary contractor, and primary consultant for this project we are pleased to inform you of this honor. Your selection puts you in a very elite group of winners and APWA is proud to have those on this project epitomize the public works profession and our association.

We have notified APWA's Board of Directors and copied your local chapter of this prestigious honor you have been selected to receive. In addition, as the project's primary agency, primary contractor, and consultant you will each receive a plaque recognizing this achievement.

Currently, APWA is planning for a live PWX event in St. Louis, Missouri on August 29-September 1, while there will not be an official Awards ceremony due to restrictions on distance and group size, we will be offering a photo opportunity on site.

For additional information about PWX and APWA, please visit our website at www.apwa.net/PWX

This is a very special occasion and we look forward to fully recognizing your contributions and achievements in the field of public works. For national awards staff to make the necessary preparations we will need you to do the following.

Please fill out the "Plaque Information Form." We ask that the managing agency, primary contractor and primary consultant each complete by **May 10, 2021** by using this link <https://form.jotform.com/193434438858168> copy and paste into browser if link does not open. We will be shipping the award directly to you so please give the address you want the award shipped to but no PO BOX please.

When more information is known about the PWX recognition we will be sending that information out to all award recipients.

If you have any questions or need additional information, please do not hesitate to call me at 800-848-2792 x5261 or my direct line 816-595-5261.

Sincerely,

Rhonda Wilhite

Awards and Chapter Relations Associate
American Public Works Association
Kansas City Office
Ph: (816) 595-5261 | Fax: (816) 472-1610
Your Comprehensive Public Works Resource

Works-Wright, Jamie

From: carole marasovic <daphnesflight@yahoo.com>
Sent: Saturday, April 17, 2021 10:43 AM
To: All Council; Williams-Ridley, Dee; White, David; Katz, Mary-Claire; Berkeley City Council Policy Committee; Terrones, Roberto; Homeless Services Panel of Experts; Berkeley/Albany Mental Health Commission; Measure O Oversight Board; jjacobs@cityofberkeley.info; kelly hammargren
Cc: Garland, Liam; Supriya Yelimeli
Subject: Re: Berkeley emergency homeless shelter closing

WARNING: This is not a City of Berkeley email. Do not click links or attachments unless you trust the sender and know the content is safe.

Kelly,

Thank you for including me on this e-mail.

I believe Dorothy Day (and the City) have been diligently working to transition the emergency storm shelter residents to other shelter locations currently in place. Dorothy Day is an excellent provider and they will also be the provider for the new Grayson Street location projected to open at the end of May.

Carole
(in individual capacity)

On Friday, April 16, 2021, 11:23:34 PM PDT, kelly hammargren <kellyhammargren@gmail.com> wrote:

Dear Mayor Arreguin, Councilmembers Kesarwani, Taplin, Bartlett, Harrison, Hahn, Wengraf, Robinson, Droste, City Manager D Williams-Ridley, Deputy City Manager, David White Human Welfare and Community Action Commission and City Council Health, Life Enrichment, Equity and Community Committee, Homeless Commission, Homeless Panel of Experts, Measure O Bond Oversight Commission, Mental Health Commission, Community Health Commission, LWar

I am saddened to read in Berkeleyside that the City of Berkeley is closing the homeless shelter for the season. Does this Mayor, Council, City Manager and Deputy City Manager really believe homelessness is a seasonal condition that ends in the spring?

This Mayor and Council asked this city of residents to support Measures O and P and we did. Now it is time to stop treating homelessness like it is a seasonal problem that goes away in April and doesn't return until winter.

Berkeley needs to do better,

kelly hammargren

Works-Wright, Jamie

From: Taplin, Terry
Sent: Saturday, April 17, 2021 12:39 AM
To: kelly hammargren; All Council; Williams-Ridley, Dee; White, David; Katz, Mary-Claire; Berkeley City Council Policy Committee; Terrones, Roberto; Homeless Services Panel of Experts; Berkeley/Albany Mental Health Commission; Measure O Oversight Board; jjacobs@cityofberkeley.info
Cc: Garland, Liam; Supriya Yelimeli
Subject: Re: Berkeley emergency homeless shelter closing

Ms Hammargren,

Thanks for writing. As stated in the Berkeleyside article, the BESS (Berkeley Emergency Storm Shelter) is the winter shelter which ran from November to April. The article states *"the city will open other emergency shelters for various time periods in response to weather events like fire season, extreme heat and cold."* The article further states that *"city workers in partnership with Bay Area Community Services also visited the shelter and asked each person if they wanted an option for additional housing"* including Berkeley Food and Housing's Dwight Shelter. Council will also be voting on the new Grayson shelter at an upcoming council meeting.

The 1000 Person Plan identifies rehousing and permanent supportive housing as critical strategies to address homelessness and also articulates zoning and policy barriers to such solutions.

Returning to the article: *"in Berkeley overall, homelessness respite programs during the pandemic were able to relocate about 70 people into permanent housing, temporary housing like shelters or other institutions, according to a report from the city in February. Since then, Health, Housing and Community Services Director Dr. Lisa Warhuus said an additional 33 people from Berkeley shelters have moved into permanent housing and the Safer Ground program has served 25 new households, with another nine households being able to leave the hotels."*

Berkeley as a single jurisdiction does not have the resources to solve this crisis on our own. We require massive investment and support from the County, State, and Fed as well as greater collaboration with our neighboring jurisdictions. That being said, we are not deterred and are deeply committed to pursuing solutions and programs to support our unhoused communities, provide services and opportunities for emergency respite and permanent housing. We appreciate your attention and concern.

Kind regards,
Councilmember Taplin

Get [Outlook for iOS](#)

From: kelly hammargren <kellyhammargren@gmail.com>

Sent: Friday, April 16, 2021 11:23:23 PM

To: All Council <council@cityofberkeley.info>; Williams-Ridley, Dee <DWilliams-Ridley@cityofberkeley.info>; White, David <DWhite@cityofberkeley.info>; Katz, Mary-Claire <MKatz@cityofberkeley.info>; Berkeley City Council Policy Committee <policycommittee@cityofberkeley.info>; Terrones, Roberto <RTerrones@cityofberkeley.info>; Homeless Services Panel of Experts <hspe@cityofberkeley.info>; Berkeley/Albany Mental Health Commission <BAMHC@cityofberkeley.info>; Measure O Oversight Board <measureo@cityofberkeley.info>; jjacobs@cityofberkeley.info <jjacobs@cityofberkeley.info>

Cc: Garland, Liam <LGarland@cityofberkeley.info>; Supriya Yelimeli <supriya@berkeleyside.com>

Subject: Berkeley emergency homeless shelter closing

WARNING: This is not a City of Berkeley email. Do not click links or attachments unless you trust the sender and know the content is safe.

Dear Mayor Arreguin, Councilmembers Kesarwani, Taplin, Bartlett, Harrison, Hahn, Wengraf, Robinson, Droste, City Manager D Williams-Ridley, Deputy City Manager, David White Human Welfare and Community Action Commission and City Council Health, Life Enrichment, Equity and Community Committee, Homeless Commission, Homeless Panel of Experts, Measure O Bond Oversight Commission, Mental Health Commission, Community Health Commission, LWar

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This Mayor and Council asked this city of residents to support Measures O and P and we did. Now it is time to stop treating homelessness like it is a seasonal problem that goes away in April and doesn't return until winter.

Berkeley needs to do better,

kelly hammargren

Works-Wright, Jamie

From: kelly hammargren <kellyhammargren@gmail.com>
Sent: Friday, April 16, 2021 11:23 PM
To: All Council; Williams-Ridley, Dee; White, David; Katz, Mary-Claire; Berkeley City Council Policy Committee; Terrones, Roberto; Homeless Services Panel of Experts; Berkeley/Albany Mental Health Commission; Measure O Oversight Board; jjacobs@cityofberkeley.info
Cc: Garland, Liam; Supriya Yelimeli
Subject: Berkeley emergency homeless shelter closing

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Berkeley needs to do better,

kelly hammargren

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Friday, April 16, 2021 3:04 PM
To: Works-Wright, Jamie
Subject: FW: Alameda County Mental Health Advisory Board Public Notice - Criminal Justice Committee Meeting (April 23rd)
Attachments: 2021 MHAB CJ Agenda 4-21-21.pdf; MHAB CJC Meeting Minutes 2-17-2021 UNAPPROVED.pdf; MHAB CJC Meeting Minutes 3-24-2021 UNAPPROVED.pdf

Please see the information below

Thank you for your time.

Jamie Works-Wright

Consumer Liaison & Mental Health Commission Secretary
 City of Berkeley
 1521 University
 Berkeley, CA 94703
jworks-wright@cityofberkeley.info
 Office: 510-981-7721 ext. 7721
 Cell #: 510-423-8365



From: MHB Communications, ACBH [mailto:ACBH.MHBCommunications@acgov.org]
Sent: Friday, April 16, 2021 2:53 PM
Subject: Alameda County Mental Health Advisory Board Public Notice - Criminal Justice Committee Meeting (April 23rd)

WARNING: This is not a City of Berkeley email. Do not click links or attachments unless you trust the sender and know the content is safe.

Greetings,

Please find attached the agenda and unapproved February and March meeting minutes for the **Alameda County Mental Health Advisory Board, Criminal Justice Committee Meeting on Wednesday, April 21st. from 4:30 pm – 6:00 pm.**

Thank you.

Alameda County Mental Health Advisory Board



Alameda County
Mental Health Advisory Board

Mental Health Advisory Board Agenda Criminal Justice Committee

Wednesday, April 21, 2021 ♦ 4:30 PM – 6:00 PM

2000 Embarcadero Cove, Oakland, CA, Suite 400, Alvarado Niles Room

Teleconference: 1 (571) 317-3116, Access Code: 770-722-253

GoToMeeting Link: <https://global.gotomeeting.com/join/770722253>

Committee Members:	Brian Bloom (<i>Co-Chair, District 4</i>); Juliet Leftwich (<i>Co-Chair, District 5</i>), Lee Davis (<i>District 5</i>)
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- 4:30 PM I. Call to Order & Roll Call / Introductions**
- 4:40 PM II. Approval of February and March Meeting Minutes**
- 4:45 PM III. Discussion topic: How should the term “seriously mentally ill” be defined for purposes of evaluating the effectiveness of programs intended to reduce the SMI population at Santa Rita Jail?**
- Should the definition be based on diagnoses, services, a combination of those things and/or other factors?
- Guest speaker: Dr. Aaron Chapman, Behavioral Health Medical Director and Chief Medical Officer, ACBHCS
- 5:55 PM IV. Next Steps**
- 6:00 PM V. Adjournment**

Contact the Mental Health Advisory Board at ACBH.MHBCommunications@acgov.org



Alameda County
Board of Supervisors

Alameda County ^{ac} ^{bh}
Behavioral Health Care Services



Committee Members:	<input type="checkbox"/> Brian Bloom (Co-Chair, District 4); <input type="checkbox"/> Juliet Leftwich (Co-Chair, District 5); <input type="checkbox"/> Lee Davis (District 5)
ACBH Staff:	<input checked="" type="checkbox"/> Angelica Gums (Administrative Liaison); <input checked="" type="checkbox"/> Asia Jenkins (Administrative Liaison)

Meeting called to order @ 4:32 PM by Chair **Juliet Leftwich**.

ITEM	DISCUSSION	DECISION/ACTION
Roll Call	Roll Call completed.	
Approval of Minutes	February minutes tabled for next meeting.	
Presentation by Dr. Lorenza Hall Regarding Santa Rita Jail Data Provided in Response to MHAB's Request of November 6, 2020	<p>Chair Leftwich provided a brief overview of the data request submitted to ACBH in November regarding the population of mentally ill clients housed at Santa Jail. Dr. Lorenza Hall was invited back to the Board to present on the data.</p> <p>Presentation Overview:</p> <p>Dr. Hall reviewed the attributes associated with SMI clients. In creating the request, Chair Leftwich provided a definition of SMI, and there seemed to be a disconnect on what was provided in the report and what was asked by the Committee. A question was raised on where this definition came from, and if it is used elsewhere in the County? Dr. Hall responded saying that they use this definition with other requests related to mental illness. Their attempt is to cast a wide net to meet the definition provided.</p> <p>There was a question regarding specific housing units within the Jail specifically for SMI clients. Yvonne Jones informed us that housing unit 9 is designated for behavioral health clients and a pod in housing unit 24 is specifically designated for women.</p>	

ITEM	DISCUSSION	DECISION/ACTION
	<p>Chair Leftwich asked if Dr. Hall could explain the role of a level 3 provider. Level 3 providers are individual licensed clinical social workers, marriage and family therapists, Doctor of Psychology, and psychiatrists. They service clients with mild to moderate behavioral health needs.</p> <p>Committee Review of the Presentation:</p> <p>Item 1: The number of seriously mentally ill people who were incarcerated at Santa Rita Jail, including their race, age and gender identity, and whether they suffered from anosognosia (impaired ability to perceive one's mental illness).</p> <ul style="list-style-type: none"> • There are many people who can refuse treatment due to anosognosia. This information will be captured in the clinical chart. • Question: Do they do a mental health evaluation for everyone that enters Santa Rita? • Answer: When a staff person does an intake, they ask the individual if they have a mental illness or history with mental illness. They don't break down the reason why someone refuses treatment. • There must be a joint effort to document the types of mental illnesses and the accompanying systems to support with drilling in the refusals when its part of the treatment plan for the psychiatrists. Need to make alterations to the form to run a report. • An electronic health record is what we'll be building out in the future. <p>The race of each seriously mentally ill person at Santa Rita Jail 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> • This information includes unique individual stays and not multiple stays. <p>The age of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> • Majority of individuals at Santa Rita Jail are younger. Chair Leftwich has requested the age data for the entire Jail. The ethnicity of the jail population cannot be provided, and therefore, they are unable to do a comparison. • Over representation of Blacks, males, and young people remain high. 	<p>Julie to follow up on the gender of the entire jail population.</p>

ITEM	DISCUSSION	DECISION/ACTION
	<p>The sex of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <p>The diagnosis of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> Counting the episodes of those with mental illness, not the individuals. When you open a report for a client, you can enter a primary, secondary, and tertiary diagnosis. The highest number of episodes were Schizophrenia Spectrum and Other Psychotic Disorders and Trauma- and Stressor-Related Disorders. If multiple doctors diagnose me with various primary disorders, then it would show up here. Chair Leftwich requested more detailed data on SMI's and not autism or eating disorders. Dr. Hall responded saying that could be done. <p>Item 2. The number of persons who received psychiatric medication at Santa Rita Jail from 10/2/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> Dr. Hall explained that sorting through the data trying to determine standard medication vs. psychiatric medication could be a challenge but could be done if that is the request. Many of the meds were psychotropic medications but they do include medications such as stool softeners and pain medications. <p>Item 3: The mean and median length of stay for seriously mentally ill persons at Santa Rita Jail and number of persons with single and multiple stays from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> Clients are in Jail less than five days. Most of them have two or more stays. <p>Item 4: The housing and case management needs of seriously mentally ill persons who were released from Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> To appear in this report, we had to have information on subsequent episodes within our mental health system. The system will be able to capture if a client is picked up from Jail upon their release and if they are currently homeless or had a history of being homes, in addition to case management history. 	

ITEM	DISCUSSION	DECISION/ACTION
	<p>Item 5: The number of incarcerated people at Santa Rita Jail who were 5150'd and transported to Psychiatric Emergency Services at John George Psychiatric Hospital (JGP) from 10/1/2018 thru 9/30/2020.</p> <p>Item 6: The number of incarcerated people at Santa Rita Jail who were 5150'd and transported to Psychiatric Emergency Services at JGP and subsequently admitted to an inpatient unit at the Hospital from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> • Chair Leftwich requested information on the number of SRJ inmates who were 5150'd and not admitted to JG PES. Specifically, clients transported to John George and were turned away or triaged for services in the community or returned to Jail. • In psychiatric emergency services (PES), you will receive some treatment but not all cases will result in your being involuntarily held in the hospital. <p>Questions:</p> <p>Joe Rose: How many people need to be medically cleared before going to John George?</p> <p>Everyone who is sent to John George from the Jail and is 5150d needs medical clearance. We do have a medical healthcare provider, Well Path, who can perform the medical clearance. Could there be people who are refusing medications that are prescribed? Yes, but staff are notified within three days. They could also move the medication schedule. If they continue to refuse, then they will discontinue the medication.</p> <p>Allison: If a person refuses medication, would they be in the category here as receiving meds?</p> <p>We're tracking and reporting on prescribed medicines. If they refuse or palm the medication, we don't capture that data.</p> <p>John: People are being 5150d from the community and brought to John George, then a certain percentage of them get placed in the units Then a certain percentage are discharged from PES.</p>	<p>Angelica to send the comments recorded in the Chat to Julie and Brian.</p> <p>Julie will reach out to Dr. Tribble to secure a speaker next month to present on the data and answer our questions.</p>

ITEM	DISCUSSION	DECISION/ACTION
	<p>Based on the data, there are 5244 SMI in Jail, 3600 admitted, 14% have SMI. That is misleading if we don't account for the amount of time people are spending in Jail. If people with SMI are spending longer of periods in Jail, then it's going to be a higher percentage. This should be a point of reference when addressing the jail reduction.</p> <p>Its troubling that SMI is counted by service category than diagnosis.</p> <p>Level 3 may include clients who do not have an SMI diagnosis. Count the people who are diagnosed and then figure out who is getting services.</p> <p>Allison: We only want data for people who are SMI.</p> <p>Chair Leftwich: We'll be asking for that as follow-up, regarding the people that come from Santa Rita and are placed in the Units.</p> <p>Lorenza: 29.23% of SRJ inmates who were 5150d and administered to John George PES were subsequently admitted into the hospital.</p> <p>Lee: Is there drug testing that happens when someone is perceived to have a mental illness that could be drug-related?</p> <p>Staff do not order drug testing. If a person stays long enough, you will see that those symptoms continue. When someone begins to detox, within 30 days they will begin to notice symptoms subsiding.</p> <p>Chair Leftwich: Do you screen every inmate?</p> <p>Yvonne: As we increase our staff at the jail, we have expanded initial screening.</p> <p>John: Where is the information drawn from?</p> <p>It's a combination of information from Santa Rita Jail, Behavioral Health Data, and Administrative Data in ACBH.</p> <p>We aren't using the newer data source.</p> <p>Are all the questions asked self-reporting questions or are there questions that are answered by the clinicians on their assessment of the individual?</p>	<p>Lee is interested in seeing what an assessment looks like. Yvonne will follow up. What they do is a mental status exam.</p>

ITEM	DISCUSSION	DECISION/ACTION
Next Steps	<p>The staff who are doing the screenings are licensed clinicians. They are seeing if the individual has any history of mental illness and are doing their assessment based on the client's responses.</p> <p>Committee to come up with a list of follow-up questions for Dr. Hall</p>	
Adjournment	Adjourned at 6:00 PM	

Minutes submitted by A. Gums



Committee Members:	<input checked="" type="checkbox"/> Brian Bloom (Co-Chair, District 4); <input checked="" type="checkbox"/> Juliet Leftwich (Co-Chair, District 5)
ACBH Staff:	<input checked="" type="checkbox"/> Angelica Gums (Administrative Liaison); <input checked="" type="checkbox"/> Asia Jenkins (Administrative Liaison)

Meeting called to order @ 4:32 PM by Chair **Juliet Leftwich**.

ITEM	DISCUSSION	DECISION/ACTION
Roll Call	Roll Call completed. Lee will be joining the Criminal Justice Committee.	
Approval of Minutes	January minutes approved.	
Presentation by Katie Kramer of the Bridging Group re: Data Report of the Safe Landing Project at Santa Rita Jail - Covering Pilot Month 1 (Nov. 2020)	<p>Chair Brian explained that the Criminal Justice Committee advocates and makes recommendations to the MHAB and the BOS on reducing the number of people in Jail who have a serious mental illness.</p> <p>Program Overview:</p> <p>Katie Kramer of Bridging Group presented on the preliminary data of the Safe Landing Project (SLP) at Santa Rita Jail. The safe landing project has been operating since the end of June. The Committee was given data from the first month of November and essentially was the first of a three-month evaluative period. The goal was to determine what information is viable/missing from the program. Katie welcomes the committee to share their input on effective indicators that can assist their evaluative process.</p> <p>Pilot data was collected by staff at the Jail. There three categories of information used to capture effectiveness of the pilot. The first survey is provided at the Jail. Incarcerated clients can self-report on their needs. The second survey is a follow up survey provided by Roots Community Center. This survey captures whether the client has received benefits (Medi-Cal, Cal Fresh, SSI, etc.) or other types of community/treatment services. This survey is done monthly.</p>	

ITEM	DISCUSSION	DECISION/ACTION
<p>Preliminary Discussion of Santa Rita Jail Data Provided in Response to MHAB's Request on November 6, 2020</p>	<p>Lastly, there is a quarterly assessment and analysis of data that is matched with County level data. This includes gathering information from other agencies to determine if incarcerated clients are receiving mental and physical services from County Departments and Hospitals. They are also looking at incidents of serious incidents and working closely with the Coroner's Office and Public Health to review that data.</p> <p>Staff at SLP are doing their due diligence to ensure the privacy of incarcerated clients, such as not identifying them by name.</p> <p>The Committee followed up with questions to the presentation around data collection, in terms of self-reporting from clients; development of a viable data tracking system; how clients are served and by whom; alternative practices to collecting data that suggests the initiating contact with clients inside the Jail; the types of services provided by Roots; the number of incarcerated clients with SMI conditions; and existing partnerships with other County Departments.</p> <p>Julie suggested to the Committee that we do some brainstorming of the slides and then generate questions for ACBH to answer at the next meeting.</p> <p>Slide 2: Identifying Clients Experiencing Serious Mental Illness (SMI)</p> <ul style="list-style-type: none"> - What does level three provider mean? <p>Slide 3: The number of seriously mentally ill people who were incarcerated at Santa Rita Jail, including their race, age and gender identify and whether they suffered from anosognosia (impaired ability to perceive one's mental illness).</p> <ul style="list-style-type: none"> - That data is unavailable. - Identifying people who have refused treatment should be recorded. <p>Slide 4: The race of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> - The total number of individuals, but out of how many inmates total? - Are you talking about unique individuals? If someone is in and out of jail, do we count them multiple times? - Half of the population is the African American community and needs to be addressed. 	

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	<ul style="list-style-type: none"> - Pull in people who do data analysis. Its hard with this much information to draw conclusions with this amount of synthesis. <p>Slide 5: The age of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> - Why did we ask these questions of ACBH in the first place? What is it that would be most helpful? Why do we need to know this? - The County puts a lot of information into TAY (Transitional Age Youth). - We can also compare all of these data points with the overall population in the jail. Is it disproportionate in the jail? <p>Slide 6: The sex of each seriously mentally ill person at Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> - Do we know what percentage of the female and male population? <p>Slide 7: The diagnosis of each seriously mentally ill person at Santa Rita Jail 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> - What is trauma- and stressor-related disorders? - The co-occurring disorders. That is not showing up here and should be part of the inquiry. - Doesn't seem like the total lines up with the number of people who are on previous slides who are diagnosed with SMI. <p>Slide 8: The number of persons who received psychiatric medication at Santa Rita Jail from 10/1/2018 thru 9/30/2020</p> <ul style="list-style-type: none"> - Does received mean taken or prescribed? - Does the general public know what psychiatric medication is? <p>Slide 9: The mean and median length of stay for serious mentally ill persons at Santa Rita Jail and number of persons with single and multiple stays from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> - A lot of people don't get charged. - Most people did have multiple stays during the two-year time period. - We would be focusing people with multiple stays if we are looking at recidivism. 	

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	<p>Slide 10: The housing and case management needs of serious mentally ill persons who were released from Santa Rita Jail from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> - Surprised that 41% have a history or a currently homeless at release. - What does case management mean? - The percentage of people who require case management should be 100% <p>Slide 11: The number of incarcerated people at Santa Rita Jail who 5150'd and transported to Psychiatric Emergency Services at John George Psychiatric Hospital (JGP) from 10/1/2018 thru 9/30/2020.</p> <p>The number of incarcerated people at Santa Rita Jail who 5150'd and transported to Psychiatric Emergency Services at JGP and subsequently admitted an inpatient unit at the Hospital from 10/1/2018 thru 9/30/2020.</p> <ul style="list-style-type: none"> - The denominator (population) here is 36,000. - We need more inpatient hospital beds and we also need community conservatorship. - If a client is stable, they can be asked to be released, and they will get discharged back to jail that same day. - Jails are de-facto mental health facilities and we need to improve the services so that clients are treated. 	<p>Angelica to send the comments recorded in the Chat to Julie and Brian.</p> <p>Julie will reach out to Dr. Tribble to secure a speaker next month to present on the data and answer our questions.</p>
Next Steps		
Adjournment	Adjourned at 2:00 PM	

ITEM	DISCUSSION	DECISION/ACTION
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Minutes submitted by A. Gums