

Meeting called to order @ 12:18p. by LD Louis Deputy District Attorney (Alameda County Mental Health Unit)

Attendees:	MHAB Members:	✓	LD Louis, MHAB Chair, Deputy District Attorney (Alameda County Mental Health Unit), Vice Chair of Mental Health Advisory Board and Head of Mental Health Unit for the Alameda County District Attorney's Office District 4				
		✓	Joe Rose, President CEO of NAMI Alameda County South <b>NAMI National Alliance on Mental Illness-ACS</b>	✓	Jessie Slafter, <b>East Bay Children's Law Attorneys</b> and <b>Member of Mental Health Advisory Board</b>	✓	Sarah Oddie, Policy Advisor <b>Supervisor Wilma Chan's Office</b>
		✓	Adriana Furuzawa, Director of <b>Early Psychosis Division, Felton Institute</b> (Family Services Agency of San Francisco)	✓	Lara Maxey, Director of External Affairs at <b>La Familia</b>	✓	Kristin Spitz, Executive Director <b>Boldly Me</b>
			Ricki Garcia, Parent Partner at <b>Fred Finch</b>				Teri Talauta <b>NAMI Alameda South Board of Directors</b>
		✓	Jackie Siefel, Clinical Supervisor at <b>Victor Community Support Services</b>				
	BHCS Staff:	✓	Angelica Gums, HR Liaison, <b>BHCS Office of the Director, Recording Secretary</b>	✓	Tanya McCullom, Program Specialist, <b>BHCS Office of Family Empowerment</b>		
		✓	Asia Jenkins, <b>BHCS Office of the Director</b>				

ITEM	DISCUSSION	DECISION / ACTION
I. Roll Call	A. LD Louis conducted roll call	
II. Approval of Minutes	A. March minutes are approved	
III. Chair's Report by LD  a. MHSA Public Comment Period is Open b. MHAB General Meeting Update	<p>The one-year MHSA annual report is now open for public comment. If you google MHSA, Alameda County, you can get to the website. On the front page are all the links to submit public comments. Those links will remain open until May 17<sup>th</sup>. Our May meeting for the general MHAB will be a presentation and comments on the one-year plan.</p> <p>It is always important to get the word out at the beginning. Try to review it before the next MHAB meeting. The plan is very important to funding services that are provided by our agency over the coming year. Dr. Tribble previously commented that most of what is there is status quo. Anticipated changes to the budget and fiscal uncertainly, there were very few changes proposed.</p> <p>Our general meeting was very hippie. It was broken up into two parts. They have been working on developing a monitoring framework and there was a presentation by the consultants regarding that. It will be posted to our website, so you can see what the first component of the framework are.</p>	

The first set is set of essay questions to ask the agency about how programs are performing. The second piece that is still in process is data questions regarding the performance of programs. We'll be able to present this to members of the community who are interested.

The budget cuts have been of interest to the community to understand how those cuts will impact the provision of services. There has been skepticism from the community about whether the cuts were truly natural.

In evaluating where the cuts should be made, the agency looked at the number and types of programs over the last five years it would not impact the provision of services that have been historically in place. Hopefully we'll hear more about that from Lisa.

L.D. has been working on lining up speakers for May so that the Committee can think about questions. She is still working on June and is hoping that she could get Juan Taizan to discuss the system of care.

## VI. DISCUSSION:

### A. Presentation: Children's System of Care Update (Director Lisa Carlisle)

**Lisa Carlisle provided a year in review of all of our child and young adult services.** She explained that the impact of COVID-19 "was felt across systems" and adjustments had to be made to operations. The goals of the presentation were to provide a brief overview of our services, introduction to our team, updates and new programming, and areas of focus moving forward.

The CYASOC is part of ACBH that provides services to children, youth and young adults ages 0-24 years old. CYASOC primarily provides mental health and substance use disorder services to individuals and families who have full scope Medi-Cal and who meet service criteria.

Director Carlisle introduced two new Division Directors that will be joining her unit. Sun Hyung Lee, who will oversee Transition Age Youth (TAY), and Laphonsa Gibbs, who will oversee Outpatient Services.

#### Questions:

- I. Could you share more about the timeline for hiring Early Childhood Coordinator?

We will be recruiting for that position, but we wanted to make sure that we had key positions in place. Hoping to release that position in Early August.

- II. Is the Santa Rita TAY re-entry program is also going to end up migrating to the new Forensic position?

Everything connected to re-entry will migrate over to Juan's Department.

- III. There is a historical decrease in the provision of services, but it is very significant that there is a decline happening year after year. What do you think is that attributed to?

Some is a result in the change in legislation with the affordable care act. It separated out mild to moderate and moderate to severe. Before the affordable care it, mental health plan was responsible in

	<p>serving across the spectrum. Mild to Moderate is now the responsibility of primary care and Moderate to Severe is now the responsibility is specialty care. Secondly, families moved out the area due to the cost of living. Lastly, we have several vacant positions across our provider network. These positions are hard to fill because of the language barrier.</p> <p>IV. Is there any data surrounding how many of the young people in the population of ages 18-24 are being represented in the ages of 0-17 population? How many people from the age group 0-17 will continue to need services? If the age group 0-17 population is crossing over into the Adult Forensic setting, once they come out into the system being a part of the 18-24 population?</p> <p>That information is something to be looked into, I am not prepared to discuss that answer today, in terms of the crossover.</p> <p>V. How many of the young people coming into the system in adult systems? What are the numbers of who has been served as youth and then continued on into our Adult Justice systems?</p> <p>I can take that back to Executive Leadership in Behavioral Health Care. This request is a longitude look at some of the youth who have matriculated up into the Adult System and Forensic setting. I will be sure to take that back for further inquiry.</p> <p>VI. Do these numbers also include youth in the dependency system?</p> <p>Yes, these are aggregate numbers, I did not separate these aggregate numbers out by population, in terms of coming from school based, or which ones are dependency. Those would be included in the overall numbers, I did not disaggregate them too that level.</p> <p>VII. I hear about Cal Aim having a huge impact on Behavioral Health. Do you have any general sense on what its impact might be? Are there any work groups looking at these issues now?</p> <p>Cal Aim is going to replace what is now called "Medi-Cal Wavier." The Medi-Cal Wavier is a contract, the State of California has with CMS, for our Federal Medicaid service that was to sunset December 2020. Due to the Covid-19 pandemic we have been given extensions. Cal-Aim brings things to the table that is an integration of Mental Health and Primary Care. So, there will be changes in expectations for coordination with Mental Health and Primary Care now, with children and adult.</p> <p>There is also something implemented now, which is what we call "Final Rule." It's a precursor to Cal Aim which has to do with looking at different timelines for services that match and mirror what we see in Primary Care. One example, prior to Cal Aim and Final Rule, there was not an existing timeline when individuals need to be connected to services after a crisis. Now, with Cal Aim and Final Rule, mental health plans are to connect individuals to outpatient services 96 hours post hospitalization. Now, we are supposed to connect individuals to outpatient services within 10 days of receiving the referral.</p>	<p>161</p>
--	---	------------

	<p>The key things that are being mentioned, is a more targeted collaboration between Mental Health and Primary Care, and it is also doing some shifts with the payment and reimbursement structures for Specialty Mental Health. There are several work groups on several levels, Dr. Tribble is doing work groups at her level, I am also in similar work groups with the state on the children’s level. There are also work groups with Substance Use Disorders, with a variety of taskforces that different counties are involved in.</p> <p>VIII. Is there any place for contract agencies to participate in these work groups?</p> <p>I think that I can send Asia or Angelica the link to Health Care Services, because they have a Cal Aim page. On the Cal Aim page there is a list of the various stakeholder groups and the opportunities for participation. I am not well versed in those stakeholder groups, but they do have them listed, and individuals can sign up to participate or listen. I can certainly send it forward.</p> <p>IX. Do we have a sense of who will be replacing Damon Eaves, since he is retiring?</p> <p>I can’t reveal that yet until everything is able to be announced. Yet, we are revamping this role because right now Damon oversees a lot of things, and we are onboarding the new leader into the Associate Director role. The scope of that role will shift, since we are adding additional capacity so that the role is much more manageable. I am hoping that we can introduce this individual by Fall, maybe mid to late August</p> <p>X. Who will be our liaison?</p> <p>Director Carlisle affirmed that she would be the contact.</p>	162
<b>Public Comment on Items not on Agenda</b>	No public Comment	
<b>VI. Adjourn</b>	Meeting Adjourned 1:15 pm	
<b>Next Meeting</b>	<b>Friday, April 23, 2021 at 12:15p via GoTo Meeting</b>	

Minutes submitted by Angelica Gums



**From:** [Downs, Fawn](#)  
**To:** [Works-Wright, Jamie](#)  
**Subject:** FW: General Crisis Response Information - Division of Mental Health (what public see online or hears voicemail)  
**Date:** Wednesday, May 26, 2021 7:27:13 AM  
**Attachments:** [General Crisis Response Info Division Mental Health Web Voicemail.PDF](#)

---

Hi,

I am sorry to forget to cc you on this. I so appreciate you and your work here ....it has been very hectic trying to be the acting secretary...

*Fawn Downs, LCSW  
 Berkeley Mental Health  
 Compliance Officer, QA/QI Program Supervisor  
 Phone: 510-981-5236  
 Fax: 510-596-9299*

*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](mailto:HIPAAPrivacy@cityofberkeley.info) and destroy this message immediately.*

---

**From:** Downs, Fawn  
**Sent:** Wednesday, May 26, 2021 7:22 AM  
**To:** Downs, Fawn <[FDowns@cityofberkeley.info](mailto:FDowns@cityofberkeley.info)>  
**Subject:** FW: General Crisis Response Information - Division of Mental Health (what public see online or hears voicemail)

Good morning,

Please see info below.

Thanks,  
 Fawn

*Fawn Downs, LCSW  
 Berkeley Mental Health  
 Compliance Officer, QA/QI Program Supervisor  
 Phone: 510-981-5236  
 Fax: 510-596-9299*

*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](mailto:HIPAAPrivacy@cityofberkeley.info) and destroy this message immediately.*

---

**From:** Margaret Fine <[margaretcarolfine@gmail.com](mailto:margaretcarolfine@gmail.com)>  
**Sent:** Tuesday, May 25, 2021 4:35 PM  
**To:** Downs, Fawn <[FDowns@cityofberkeley.info](mailto:FDowns@cityofberkeley.info)>  
**Subject:** General Crisis Response Information - Division of Mental Health (what public see online or

hears voicemail)

**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.

Hi Fawn - Thank you so much for your time and effort. Here is the last packet for the Commissioners before the meeting. Best wishes, Margaret

Dear Commissioners,

I hope you're well.

Over the past 2 days, we have sent information to you about the Data Analysis Report, the mobile crisis team voicemail, and general financial information about the Division of Mental Health. We learned today that the Agenda Packet may be updated following its distribution last Friday. I apologize for any duplication during the past 2 days as a result.


Right now I am passing along the last packet with general information about the Division of Mental Health's crisis response services (the date below represents when I printed the info from the Internet): This information represents what the public views online and hears over the phone.

- Home: Division of Mental Health webpage, 5/22/21
- Mobile Crisis Team (MCT) webpage, 5/22/21
- Mobile Crisis Team verbatim voicemail transcript and analysis, 5/22/21
- City & County Mental Health Triage Services webpage, 5/22/21
- City & County Mental Health Triage Services verbatim voicemail transcript, 5/23/21
- Berkeley Police Department CIT (crisis intervention team) webpage, 5/22/21
- Mobile Crisis Team Caseload Statistics, April 2021
- Table of Contents for Berkeley Mental Health MCT Manual, Revised September 1995 (sent earlier)
- RDA contract for MCT evaluation and Specialized Care Unit

Thank you very much for your time.

Best wishes,  
Margaret

# CRISIS RESPONSE MATERIALS



Home
Residents
Businesses
COVID-19
Services
Elected Officials

search:  GO

**WELCOME**  
Mental Health Home

**WHAT'S NEW**  
MHSA Plans and Updates

**POPULAR TOPICS**  
Adult Internship Program Descriptions  
FYC Internship Descriptions

**QUICK LINKS**  
Adult Services  
Family, Youth and Children's Services (FYC)  
Mental Health Commission  
Mobile Crisis Team (MCT)  
City & County Mental Health Triage Services

## MENTAL HEALTH

1521 University Avenue, Berkeley, CA 94703  
 TEL: (510) 981-5290, TDD: (510) 981-6903, FAX: (510) 981-5235  
 Email: [mentalhealth@cityofberkeley.info](mailto:mentalhealth@cityofberkeley.info)

---

### Home

Welcome to the Mental Health Division at the City of Berkeley, CA. We are part of the [Health, Housing & Community Services Department](#).

Click on any of the links below to see more information on our programs.


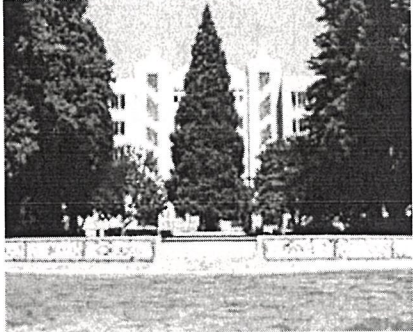
**Welcome Page - Welcome to the Division of Mental Health**  
[more...]

Mental Health Programs


Mental Health Services Act (MHSA)

Adult Services  
Family, Youth and Children's Services (FYC)  
Mobile Crisis Team (MCT)  
City & County Mental Health Triage Services

MHSA Detailed Summary  
MHSA Plans and Updates  
Community Services and Supports Programs  
Prevention and Early Intervention (PEI)





Home Residents Businesses COVID-19 Services Elected Officials

search:  GO

**WELCOME**  
Mental Health Home

**WHAT'S NEW**  
MHSA Plans and Updates

**POPULAR TOPICS**  
Adult Internship Program Descriptions  
FYC Internship Descriptions

**QUICK LINKS**  
Adult Services  
Family, Youth and Children's Services (FYC)  
Mental Health Commission  
Mobile Crisis Team (MCT)  
City & County Mental Health Triage Services


**RELATED LINKS**  
Public Health Division  
Office of Vital Statistics  
Environmental Health Division  
Health, Housing & Community Services Department

Select Language ▼

Translation Disclaimer

## MENTAL HEALTH

Mental Health Division



### Mobile Crisis Team (MCT)

#### Our Purpose

We reduce the impact of mental health emergencies through immediate response to crisis situations at the street-level and through coordination and consultation with local public safety organizations, hospitals and other community groups.

#### What We Do

- Deliver crisis intervention services at locations throughout the community (suicide, homicide, threats, drug abuse, evaluation for psychiatric hospitalization)
- Provide consultation to hospital emergency personnel, community agencies and citizens
- Disaster and trauma-related mental health services
- Provide consultation to police and fire departments regarding known or potential mental health cases
- Support [Berkeley Police](#) on the [Barricaded Subject Hostage Negotiation Team](#)

#### Who We Serve

Residents of Berkeley and Albany. Primarily those referred by the [Berkeley Police](#) and [Fire](#) Departments, hospital emergency rooms, other Berkeley and Albany agencies, and residents.

#### Accessibility

Language(s) currently spoken: English, Cantonese, French, and Hindi.

Fee: None

#### Clinical Staff

Psychologists, Social Workers, Marriage and Family therapists and graduate student interns.

### Hours of Operation

Mobile Crisis Service Days: Sunday, Monday, Wednesday, Thursday and Friday 11:30 a.m. to 10:00 p.m. Please note the Mobile Crisis Team **is not** available on Tuesdays and Saturdays.  
Phone [\(510\) 981-5900](tel:(510)981-5900) (Police Non-emergency 24 hrs.) or [\(510\) 981-5254](tel:(510)981-5254) (Voice message)

To give feedback on your experience with the Mobile Crisis Team Services, go to: <http://www.surveymonkey.com/r/berkeleymobilecrisis>

[Home](#) | [Web Policy](#) | [Text-Only Site Map](#) | [Contact Us](#)

Mental Health Division, 1521 University Avenue, Berkeley, CA 94703

Questions or comments? Email: [mentalhealth@cityofberkeley.info](mailto:mentalhealth@cityofberkeley.info) Phone: [\(510\) 981-5290](tel:(510)981-5290)  
(510) 981-CITY/2489 or 311 from any landline in Berkeley

TTY: [\(510\) 981-6903](tel:(510)981-6903)

Specifically the mobile crisis team operates by using voicemail messaging. Since calling this number in early June 2020, no live person has ever answered the phone.

### **The mobile crisis team voicemail states:**

“Hello you have reached the Berkeley Mental Health Mobile Crisis Team. If this is a medical or psychiatric emergency, please hang up and dial 911. If you need an evaluation in the field, please call the Berkeley Police Department directly for immediate assistance. The police non-emergency number is 981-5900. Mobile crisis is on duty from 11:30 am until 10 p.m. all days excluding Tuesday and Saturday. The best way to reach the mobile crisis team is by leaving a message here. Messages are checked frequently during our working hours. Press # now to leave a message.”

Points to realize about the current system that may be relevant to qualitative research on policing and mental health/SUD crisis response:

1. The Mobile Crisis Team voicemail, as a first point of contact for crisis calls, directs callers and relies on 911 medical or psychiatric emergency and immediate assistance of police to conduct a mental health evaluation in the field.



2. The MCT voicemail message prompts callers to use 911 for a psychiatric emergency and the non-emergency police dispatch number to get a crisis mental health assessment in the field.

3. Police officers receive approximately 40 hours CIT training, while mental health clinicians generally have a masters degree and license in order to conduct mental health assessment in the field (5150).

4. These instructions may send ambiguous messages about the fundamental purpose and the nature of the Mobile Crisis Unit's role in responding to people experiencing a mental health crisis (or substance) in the field.

**WHAT'S NEW**

MHSA Plans and Updates

**POPULAR TOPICS**

Adult Internship Program Descriptions  
FYC Internship Descriptions

**QUICK LINKS**

Adult Services  
Family, Youth and Children's Services (FYC)  
Mental Health Commission  
Mobile Crisis Team (MCT)  
City & County Mental Health Triage Services

**RELATED LINKS**

Public Health Division  
Office of Vital Statistics  
Environmental Health Division  
Health, Housing & Community Services Department

Select Language ▼

Translation Disclaimer

**City & County Mental Health Triage Services**

Are you or someone you know experiencing a mental health crisis? Contact the Berkeley Mental Health crisis line to speak to a mental health professional who can help you.

The crisis line is open Monday through Friday 11:30 AM to 4:00 PM; call us at [\(510\) 981-5244](tel:5109815244). The crisis line can provide support and resources over the phone to individuals in crisis, their families, and community members. The crisis line can also determine if an immediate in-person evaluation for safety is needed and connect the caller to the right resources.

In addition to the crisis line, Berkeley Mental Health offers other services for people in need of immediate mental health support:

- **Walk-in hours and phone-based resources** for individuals seeking services to meet with a mental health professional for screening, assessment, and referrals
  - In person at 1521 University Avenue in Berkeley Monday through Thursday 8:00 AM - 1:30 PM
  - Over the phone at [\(510\) 981-5244](tel:5109815244) Monday through Friday 8:00 AM - 4:00 PM
- **Mobile Crisis Team** that provides field-based support for people experiencing mental health crises
  - Mobile Crisis Service Days: Sunday, Monday, Wednesday, Thursday and Friday 11:30 AM - 10:00 PM. Please note the Mobile Crisis Team **is not available** on Tuesdays and Saturdays.  
Phone: [\(510\) 981-5900](tel:5109815900) (Police Non-emergency 24 hrs.) or [\(510\) 981-5254](tel:5109815254) (Voice message).

**Additional Alameda County mental health crisis services:**

- Call the 24-hour crisis line for immediate support through Crisis Support Services of Alameda County at [1-800-309-2131](tel:18003092131)
- Call the Alameda County ACCESS (Acute Crisis Care and Evaluation for System-wide Services) Program for questions about mental health services and eligibility at [1-800-491-9099](tel:18004919099) Monday through Friday 8:30 AM - 5:00 PM

## **City and County mental health triage services voicemail message:**

You have reached the voicemail for the Berkeley Mental Health crisis assessment triage line. If this is a medical or psychiatric emergency, please hang up and dial 911. Between 8 am and 5 pm, Monday through Friday, this number will connect you with the crisis assessment triage line at Berkeley Mental Health for immediate assistance including crisis services. If you wish to leave a message, you may bypass this message by pressing the # key at any time and someone will call you back as soon as possible.

If you are in crisis or need an immediate evaluation in the field, please call the Berkeley Police Department non-emergency number at 981-5900 for immediate assistance. Messages left on this line after 5 pm daily and all day on weekends and holidays will not be retrieved until 8 am on the next working day. For 24 hour crisis assistance by phone, you can also contact Alameda County Crisis at 1-800-309-2131. Thank you very much for calling.





**WELCOME**

- Police Home
- About Us
- Contact Us
- FAQ

**WHAT'S NEW**

- BPD Recruitment
- Commendations & Praise
- Complaints and Concerns
- Annual Crime Reports
- Security Camera Registry

**POPULAR TOPICS**

- BPD Online Crime Reporting
- BPD Training & Policy
- Open Data and Public Records
- BPD News Room

**QUICK LINKS**

- Beat Map & Officer List
- Communications Center
- Community Services Bureau
- Crime Prevention
- Crisis Intervention Team
- Historical Unit
- Jail Facility
- Neighborhood Watch
- Our Fallen Heroes
- Parking Enforcement Unit
- Property and Evidence
- Records Bureau
- Traffic Bureau

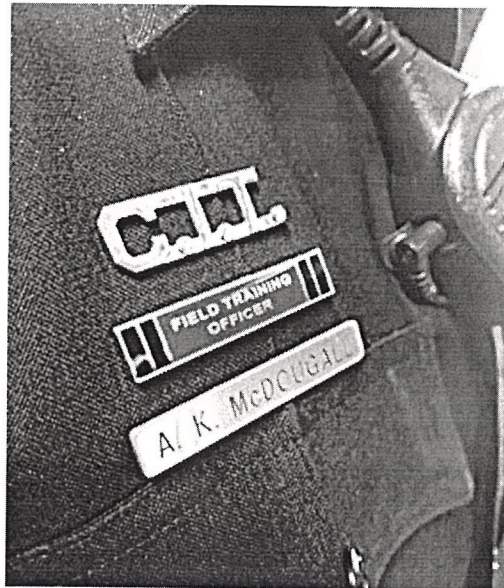
# BERKELEY POLICE DEPARTMENT

Police Department

## Crisis Intervention

In July, 2011 Alameda County Behavioral Health Care Services and the Oakland Police Department hosted Alameda County's first training course in Crisis Intervention. Involved in the planning stages of the training, the Berkeley Police Department was able to send officers to that first class—forming the Department's first Crisis Intervention Team (CIT).

CIT training is an innovative police-based crisis intervention program with community, health care and advocacy partnerships. The 38 hour training course provides police-based crisis intervention training to officers for assisting those individuals with a mental illness or who are in psychiatric crisis. CIT training improves the safety of patrol officers, consumers, family members, and the community.



As part of the mission of our Crisis Intervention Team, the Berkeley Police Department has taken a leading role in working to redirect mental health consumers away from the criminal justice system and back into the community system of care.

While most officers of the Berkeley Police Department have received some training in Crisis Intervention, officers attended the 38 hour CIT training course can be identified by a "CIT" pin worn on their uniform. Berkeley residents, mental health institutions or businesses can request that a CIT Officer respond to calls involving a mental health emergency. Our CIT officers have training specifically geared toward resolving these incidents safely.

## Partnership with the City of Berkeley's Mobile Crisis Team

In addition to officers trained in Crisis Intervention, officers also have mental health clinicians that are available to assist persons in mental health crisis. The City's [Mobile Crisis Team](#) is available everyday—11:30 am to 10 pm and are dispatched via police radio through our [Communications Center](#). If you or another are having a mental health emergency, you can request that a member of the Mobile Crisis Team also respond when you call for assistance.

### What You can Do to Help

If you encounter a person you believe is in mental health crisis, try to keep your distance and call for assistance. If it's an emergency, dial 911.

If you or a loved one are managing a mental illness or developmental disability and are concerned that you may someday need emergency assistance, consider having a pre-written [crisis plan](#) as part of your [Wellness Recovery Action Plan \(WRAP\)](#). Having a pre-written crisis plan can assist first responders in understanding the best ways to provide assistance and aid in determining the best place for any necessary treatment and/or follow-up.

[Home](#) | [Web Policy](#) | [Text-Only Site Map](#) | [Contact Us](#)

[Police Department](#), 2100 Martin Luther King, Jr. Way, Berkeley, CA 94704

Questions or comments? Email: [police@cityofberkeley.info](mailto:police@cityofberkeley.info) Phone: [\(510\) 981-5900](tel:(510)981-5900)

[\(510\) 981-CITY/2489](tel:(510)981-2489) or 311 from any landline in Berkeley

TTY: [\(510\) 981-6903](tel:(510)981-6903)

# **CASELOAD STATISTICS, APRIL 2021**



<b>Crisis and ACCESS Services</b>	<b>Staff Ration</b>	<b>Clinical Staff Positions Filled</b>	<b>Total # of Clients/Incidents</b>
<b>Mobile Crisis (MCT)</b>	N/A	2 Clinician filled at this time	<ul style="list-style-type: none"> <li>• 101 Incidents</li> <li>• 30 5150 Evals</li> <li>• 7 5150 Evals leading to involuntary transport</li> </ul>
<b>MCT FY21 Mental Health Division Estimated Budgeted Personnel Costs</b>			\$771,623
<b>Transitional Outreach Team (TOT)</b>	N/A	1 Licensed Clinician, 1 Case Manager (both sometimes reassigned due to staffing needs in other units)	73 Incidents
<b>TOT FY21 Mental Health Division Estimated Budgeted Personnel Costs</b>			\$272,323
<b>Community Assessment Team (CAT)</b>	N/A	1 Team Lead, 1 Clinician, 1 Non-Degreed Clinical	79 Incidents
<b>CAT FY21 Mental Health Division Estimated Budgeted Personnel Costs</b>			\$735,075

**BERKELEY MENTAL HEALTH  
MOBILE CRISIS TEAM MANUAL  
(Revised September, 1995)**

**TABLE OF CONTENTS**

<b>PART I:</b>	<b>INTRODUCTION .....</b>	<b>1</b>
<hr/>		
A.	Introduction to the Training .....	1
1.	Purpose and Objectives .....	1
2.	Format .....	2
B.	Introduction to the Mobile Crisis Team .....	2
1.	History .....	2
2.	Funding and Expansion .....	3
C.	Overview of Operations .....	3
1.	General Operations .....	3
2.	Clinical Operations .....	4
<b>PART II:</b>	<b>PROCEDURES .....</b>	<b>6</b>
<hr/>		
A.	Radio Procedure .....	6
1.	Equipment Check-Out Procedures .....	6
2.	Radio Communication Procedures .....	7
3.	Radio Channels .....	8
4.	Radio Transmission .....	8
5.	Radio Transmission Problems .....	9
6.	Calling for Cover .....	10
B.	Safety Procedures .....	11
1.	General Safety Procedures .....	12
2.	Responding to a Call .....	12
3.	Approaches .....	13
4.	General Comments .....	14
C.	Working As A Team .....	15
D.	Working With The Police .....	16
1.	Working Agreements .....	16
2.	Communication with Police Officers about Referrals .....	16
3.	Guidelines for Non-Emergency Referrals .....	17
4.	Riding Along with BPD .....	17