

# Placer County Mental Health, Alcohol and Drug Board *Annual Retreat/Workshop*

May 20, 2016

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**Attendees:** Maureen Bauman, David Bartley, Yvonne Bond, Janna Jones, Janet O'Meara, Sharon Stanners, Theresa Thickers and Will Dickinson (attended last portion of meeting)

**Absent:** Jim Holmes

**Guests:** Twylla Abrahamson, Lisa Cataldo, Stacci Filla, Marie Osborne and Martha Quirarte

## **INTRODUCTIONS**

Theresa Thickers, Chairperson, commenced the Mental Health, Alcohol and Drug Board (MHADB) annual workshop/retreat at 8:43 a.m., providing the following information for attendees:

- Not an official part of the regular MHADB meeting.
- No decisions are made during this time.
- Input only.
- Training for board members and public, if present.

Theresa Thickers, Chairperson, introduced herself and reviewed the meeting agreements for today's annual retreat/workshop.

### ❖ **Welcome / Housekeeping (overview of the day) – Theresa Thickers**

- **Meeting agreements were identified**
  - *One person speaks at a time*
  - *Listen to each other's perspective*
  - *Be respectful*
  - *Take breaks as needed*

### ❖ **Board Protocol and Public Comment – Theresa Thickers**

- Reviewed.
- No public comment received.

### ❖ **Review Agenda – Theresa Thickers**

- Reviewed.

### **Board Introductions (background and interest)**

- Members and guests introduced themselves, shared information about their background and identified what their interest is in participating on the board.

### ❖ **Informational Presentation – Maureen Bauman**

- **Affordable Care Act (ACA) covering parity and geographic managed care**
  - Provided a PowerPoint presentation (hard copy also provided), reviewing some of the changes that occurred with the implementation of the Affordable Care Act (ACA), which went into effect January 2014.
  - Created a new way to purchase coverage through health insurance exchanges.
  - Stopped insurance companies from charging more or denying coverage because of preexisting conditions.
  - Defined mental health substance use as a condition that was mandatory for all plans.
  - Largest expansion of mental health and substance use services in a generation – making sure people are required, by law, to have coverage for a disease that is very common in our society.
  - Reviewed the essential health benefits that health plans must include.
  - Mental health and substance use treatment must be covered at parity (same level) with medical and surgical benefits.
  - We are the HMO (Health Maintenance Organization) for specialty mental health (those eligible for specialty mental health on Medi-Cal).
  - Substance abuse expansion also occurred with the ACA. Reviewed the services that were added.

- Specialty mental health services are designed for people who have some specific diagnoses, e.g., psychoses, major depression, schizophrenia, etc.
- Reviewed the President's Task Force, which he established to end discrimination in mental health and addiction treatment coverage.
- Provided an overview of Disability Rights California (DRC), specifically related to the Mental Health Stigma and Discrimination Reduction Project, as requested by MHADB members.
  - The DRC fights for equal mental and physical private health insurance coverage (parity).
  - Reviewed the Parity Fact Sheets.
- Mental Health Services Act (MHSA) plan is still being drafted. Ms. Bauman noted there will be a change in the way the plan will be completed this year, sharing examples of what it will look like. A draft was passed around for review.
  - People will have a much better idea about the programs and what is happening with the MHSA dollars.
  - The Mental Health Oversight Accountability Commission is the statewide organization that has final approval of the plan.
- Discussed the Governor's May revise, which includes support for Senator Steinberg's initiative - No Place Like Home, designed to prevent and address homelessness. A percentage of MHSA dollars will be taken from counties and will be competitively awarded to counties.

❖ **Committee Composition, Roles and Responsibilities Discussion – Theresa Thickens**

- Reviewing the composition of the current committees - how many members, how many goals each committee has and what makes sense in terms of committee composition.
- The Executive Committee talked about using one of the committees to serve in the capacity as a resource to all the other committees. The committee would be used to present on specific topics and provide regular reports that are of specific interest to the groups.
- Proposed using the QI committee as a resource to the other committees relative to the specific areas of interest and provide a full board presentation a couple times throughout the year, maybe quarterly.
- The MHADB is not large enough to support four committees at this point.
- Theresa Thickens opened up the discussion to brainstorm how best to structure the committees.
  - Have a consistent structure.
  - Structure the committees so there is more support and sharing of information.
  - Track whatever is happening in the other areas – less of a silo effect.
- Reviewed the potential of using the QI committee to staff and inform AOD, Adults and Children's committees.
- Ms. Bauman requested the MHADB: 1. Executive officer to also sit on the county QI committee; and 2. continue to test the Adult Intake line.
- Identify someone from each of the committees to be a liaison to the QI committee. Since there currently is no dedicated QI manager, have Twylla Abrahamson, Marie Osborne or other staff person (analyst) rotate through committee meetings on a quarterly basis and submit reports to the board, as well as providing an actual QI report once or twice a year.
- MHADB will receive the annual QI Plan, the driving document done every year, and review the effectiveness.

**Committee Compositions**

- Discussed and proposed a new structure, maintaining three committees with dedicated staff for each of the committees, as well as QI support:
  - Alcohol and Other Drugs Committee (AOD)
    - Sharon Stanners continues as chair.
    - Amy Ellis continues as staff support.
  - Children's Services Committee (CSC)
    - Will Dickinson continues as chair until term expires (Aug 2016).
    - Sharon Behrens assumes chair (Sept 2016).
    - Twylla Abrahamson continues as staff support.
  - Adult Services Committee (ASC)
    - Janet O'Meara continues as chair until term expires (July 2016).
    - Yvonne Bond and David Bartley assume co-chair roles (Aug 2016).
    - Curtis Budge continues as staff support.

- Quality Improvement Committee
  - Discontinued as stand-alone committee (June 2016).
  - Becomes *Quality Assurance* resource (QA) to AOD, CSC and ASC (July 2016).
  - Marie Osborne assumes staff support role (July 2016).
  - Theresa Thickens continues to attend Placer/Sierra Quarterly Quality Review meetings as MHADB representative.

### **Committee Roles**

- All committees are responsible for completing **two** test calls every month (as scheduled and monitored by committee chairs).
- All staff to provide backup personnel or alternate arrangements if unable to attend their designated committee meeting.
- Marie Osborne (QA staff) attends AOD, CSC, and ASC once each quarter, as coordinated by Ms. Osborne and committee chairs; chairs communicate significant related data/audits of interest to her prior to scheduled committee meeting.
- QA staff to provide an oral presentation to full board annually.
- QA staff to provide a written report to the board annually for inclusion in the *MHADB Annual Report* to the BOS.
- QA staff to provide brief oral reports to full board as dictated by significant county QI activity/audits/reports.

### ❖ **Report Card and Self-Evaluation of Board 2016-17 Plan** – *Theresa Thickens*

- The State Association of Mental Health Boards put together a report card for mental health boards to complete to evaluate their own functioning.
  - Report cards were previously provided, requesting members complete prior to the retreat.
- Discussed and provided comments/feedback on the report card.
- Discussed how board members are oriented (#1) and how to improve. Along with meeting with the Director and self-initiative, include staff support.
  - Take to Executive Committee to review and structure the orientation process.
- Discussed reviewing and updating the report card, along with the task calendar, at an Executive Committee meeting for future use.
- Briefly discussed guest speakers/trainings (FY 2015-16).
  - Theresa Thickens requested each committee suggest a speaker or training they would like to have. This information can be brought to the Executive Committee or be included in the Annual Report, identified as an area the committee would like to learn about (presentation/training).
- Report cards were submitted to Theresa Thickens for summary and distribution to board.

### ❖ **Working Lunch**

#### **Committee Sessions** – *Theresa Thickens*

- Distributed and reviewed guidelines for developing the goals for FY 2016-17.
- Structure roles and responsibilities of committee chairs, members, support staff; identify expectations of members, site visits and test calls.
- Reviewed each topic: Roles and Responsibilities; Goals, Oversight and Collaboration; and Challenges and Opportunities.
  - Can substitute a site visit for a regular meeting.
  - Outreach responsibility of each committee.
    - a. Attend an event.
    - b. Develop outreach materials.
    - c. Provide venues for the committee to hear issues going on with consumers or family members.

#### **Proposed Committee Responsibilities**

- Working lunch discussion on committee goals and responsibilities resulted in the following proposals:
  - **Composition**
    - Identify committee chair, committee members and necessary county support.
    - Communicate responsibilities and expectations of all members (e.g., meeting schedule, committee attendance, site visits, event and test-call participation, etc.).

- Ensure at least **one** committee-related presentation is provided to the full board annually by appropriate staff, network providers, consumers, etc.
- Identify committee member roles in drafting the annual report and provide a mid-year committee report (written and verbal) to full board.
- **Goals**
  - Identify and prioritize committee goals. Consider committee resources available and ensure goals identified are manageable.
  - Indicate how each goal will be accomplished and related outcome measure(s).
  - Indicate when each goal will be completed. Identify goal as near-term (completion FY 16-17), long-term (continues into future FYs), future consideration (begin in future FY).
  - Include at least **one** outreach goal to attract new members and increase visibility of your committee's mission, and the mission of the full board.
- **Oversight and Collaboration**
  - Identify site visits and arrange and complete at least **one** visit during the FY.
  - Identify key programs, audits, and data to monitor, and ensure a committee-related QA discussion is held in your committee with QA staff quarterly.
  - Identify collaboration opportunities and participate in at least **one** collaborative event during the FY.
  - Identify and coordinate with Executive Committee if, when, and how communication with BOS representative(s) occurs.
- **Challenges and Opportunities**
  - Based on prior years' experience and the MHADB report card discussed at the annual retreat, identify individual, committee, and full board challenges and accomplishments to either rectify or build upon.
  - Know your committee members' interests, areas of limitation, and strengths, and capitalize/accommodate as appropriate.

#### **Committee Goals for FY 2016-17**

- Reviewed FY 2015-16 goals to verify status, identify items to be carried over to the next FY and new goals.
- **CSC**
  - Sprouts program – continue to follow, due to being in danger of closing.
  - Psychotropic medication appears to be satisfied (for Placer County).
  - Trauma Informed Care has been satisfied.
  - Expecting another presentation on Prevention and Early Intervention – continue to assess.
  - Connection between mental health, drug and alcohol use, and sexually exploited youth. Satisfied this is not a mental health driven issue.
  - Received training on Katie A requirements. General satisfaction that Placer is in compliance.
  - Agreed to move the ongoing Educationally Related Mental Health Services assessment activity to the CSC in FY 16-17 (i.e., no longer a “joint” activity between CSC and QI).
  - Continuum of Care Reform (AB403) - follow up requested.
  - Consumer satisfaction – talking to consumers/advocates, didn't get momentum. Carry it forward to the next FY.
  - Have fewer goals that are educationally oriented toward not just educating but delving into outcomes.
- **ASC**
  - Monitor Implementation of Assisted Outpatient Treatment (AOT) is completed.
  - Assessing housing program has a few items remaining - continue.
  - Investigate inclusion of family members in treatment – continue to develop recommendations.
  - Investigate data use for adults with severe mental illness is an ongoing issue - move to QI for a conversation.
  - Advocate for superior professional competency of providers (under Turning Point -TP) – continue hearing from TP, to receive periodic updates.
  - Lisa Cataldo provided input, requesting continuation of monitoring of AOT. She doesn't feel counties are well versed on the treatment and its use.
  - Requesting more education on conservatorship – information on how it works for both the conservator and conservatee.
  - Family support and navigation/education – know how to navigate the system and where the resources are.

- AOD
  - Review and monitor criminal justice plan for persons with Substance Use Disorder (SUD) – set aside.
  - 1115 Waiver has not been addressed yet.
  - Investigate rise in heroin use and make recommendations – goal met.
  - Increased visibility of SUD and advocate for improved programs - would like to revisit homeless shelter. Continue visibility and outreach.
  - Ms. Bauman noted that the Drug Medi-Cal Organized Delivery System will be a goal. It will be developed in the next few months.
  - Visibility to be a key goal.
- Quality Improvement and Executive Committee
  - Executive Committee to talk about how to integrate what is a board-wide goal and what is specific to individual committees and bring back to full board.

❖ **Member and Public Comment** – *Theresa Thickers*

*Retreat adjourned at 1:25 p.m.*