Welcome and Introductions
Geoff McLennan, Chairperson of the Mental Health, Alcohol and Drug Advisory Board (MHADAB), called the meeting to order at 9:04 a.m. Members and guests were welcomed, and introductions were made.

- Board Protocol (Non-Board Member Participation) - Read by David Bartley
  - This item is designed to clarify, for new attendees, the role of non-board members and their participation while attending the Mental Health, Alcohol and Drug Advisory Board (MHADAB) meetings.
  - The MHADAB encourages public input in all of its meetings. In order to facilitate this, we allow for public input two times - once at the beginning of the agenda and once at the end. These times are for those items that do not appear on the agenda. For items that are on the agenda, the Board will allow time for input from the public at the time the item is heard by the Board. Input guidelines are as follows:
    a. All remarks shall be addressed to the Board as a body and not to any member of the board or staff.
    b. No person, other than a member of the Board and the person having the floor shall be permitted to enter into any discussion without the permission of the chairperson.
    c. For items not on the agenda, each person is limited to three (3) minutes of comment during the Public Comment Period(s).
    d. For items on the agenda, each person is limited to five (5) minutes of comment during the agenda item, unless time is extended by the chairperson.
    e. For items on the agenda, if there is a person speaking on behalf of a group, with no other comments by another member of that group, please identify yourself as such and your time may be extended at the pleasure of the chairperson.
    f. Total discussion time on any item may be limited by the chairperson to ensure that all of the business on the agenda is completed no later than 8:00 p.m.

Consent Agenda Item(s)
None

- Guest Speaker: Amy Ellis, Director, Mental Health Alcohol and Drug Advisory Board
  - Amy Ellis explained that the mental health statute states that the role of the board is to review each annual update and conduct a public hearing at the close of the 30-day comment period. The feedback will be collected by staff and the annual update will summarize and analyze the recommended revisions. This is a reporting out on the last 3-Year Annual Plan for FY 18-19.
  - There is a portion of funding that mandated to goes towards a reserve designated to maintain an adequate level of programming in the event of an economic downturn. Additionally, each county must prepare an annual expenditure plan.
Each time there is a new innovation plan, it is heard by the Mental Health Services Oversight and Accountability Commission (MSOAC).

In housing, accomplishments include the 18-unit apartment housing project that opened in March 2018, a new construction project now has designated funds set aside to move forward, a new housing project in Tahoe-Truckee area, and a property through AMIH as a provider, which is currently in negotiations. MHSA funds continue to be allocated for supportive housing projects as they become available. There is a local commitment to at least one million annual funding to new housing projects.

In Community Services and Supports, this report includes updated data on Full Service Partnerships (FSPs) that outline their effectiveness. People who are enrolled in FSPs are our highest utilizers and to see a reduction in these services is exciting.

Capital Facilities is another specific category that requires designated funding. Funds are estimated at 475K and are in place to help track and analyze data, build electronic records, and to tell the story of improvements through data. Recently, ASOC has developed and paid for a program called Provider Connect. When ASOC had to authorize services prior, it was a manual process. Now, with Provider Connect, the prior authorizations run through an electronic platform to make this happen.

Prevention and Early Intervention (PEI) is put in place to decrease trauma. These prevention and early intervention efforts are meant to decrease their Adverse Childhood Experiences (ACEs).

Yvonne Bond asked what is considered the best way for the board to put forward their opinions or comments in the event that the board had a different view on funding allocation toward prevention or addressing the issues of real-time homelessness. Ms. Ellis responded that this is one activity that the Geoff McLennan has shared he would like to devote some time at the upcoming retreat. The MHADAB will spend some time reviewing expenditures and put forward their recommendations.

David Bartley thanked Ms. Ellis for the presentation and explained that being able to put together an overview of the planning process was helpful.

Claire Buckley asked if there was a state level determination to review and quantify results from these early programs. Twylla Abrahamson explained that SP 12004 sets out statewide priorities for PEI to always be focused on. These areas will be addressed first, and then they will go back to local area planning with their decisions.

Ms. Buckley asked about Transitional Age Youth (TAY) access to services. Ms. Abrahamson explained that this population can be difficult to engage, and that staff is looking for creative ways to approach and place these services so that TAY will want to engage. Additionally, Ms. Abrahamson shared that they are looking for standardization on a local level to address this issue.

Amy Ellis shared that the Prop 47, which is a grant from the program that targets youth and TAY it is not MHSA funded at this time but has been addressing the TAY population who seem to engage better through this program.

Ms. Buckley asked if there are substance use MHSA dollars. Ms. Ellis responded that those that have a Serious Mental Illness (SMI) but also have a secondary substance use disorder, are able to leverage funding for treatments.

David Bartley asked if Ms. Ellis could point to one item that was a dramatic program change for the county. Ms. Ellis answered that the collaboration with other programs which has allowed them to treat the whole person and some local dollars approved by the BOS to help assist in leveraging funding sources to meet this community need. Less than half of most county BOS allow this practice.

Lisa Cataldo asked if a 24/7 crisis MH clinic funded with MHSA dollars similar to the CSU in Sacramento County could be an option for Placer County. Ms. Ellis answered that they are evaluating this need and believes it would be nice to have in Placer County. Additionally, Ms. Ellis shared that she has been tasked with evaluating the cost of a facility and explained that much of the success of these units depends on criteria to enter and collaboration with law enforcement.

Kristina Brown shared that Sacramento County has opened a Mental Health Urgent Care Clinic (MHUCC) and believes it would be a good center to model in Placer County.

Mr. McLennan shared that he was aware that there are similar crisis centers in Orange County and Los Angeles County.

Mr. McLennan asked about the status of state funding regarding the prudent reserve. Ms. Ellis answered that there has been new guidance that rolled out in the fall and Placer County had a meeting immediately with their fiscal staff to discuss. Ms. Abrahamson shared that Placer County is on target and within 2 million dollars.
Ms. McLennan asked if MHSA funding within the county is non-continuous. Amy shared that it is designated by fiscal year because it is difficult to predict the economic health at times.

Mr. McLennan asked if WET funds could be used to keep psychiatrists in Placer County. Ms. Ellis replied that WET funds cannot be used to pay salaries. Recently, ASOC has worked with HR to hire psychiatrists using a recruitment that combines all additional pays, so that the full compensation amount in Placer County is visible, which will look more attractive to potential candidates.

Mr. McLennan shared that the State Services Commission will be coming out with a new online data portal. Additionally, Mr. McLennan is glad to see that Placer County is organizing data.

Geoff would like to track outcomes with the community and shared that it is good to know that Placer County is working hard to move forward with community outreach.

Supervisor Holmes asked if HR is adding to the application process with an increased rate. Ms. Ellis answered that the rate that the new psychiatrist recruitment will be paid will look higher than what it was, but it will now encompass all the extra pays they were already giving them into the hourly rate. It will go before the BOS and Civil Service Commission (CSC).

Secretary/Treasurer’s Report
- Approval of the April 22, 2019, Regular Board Meeting Minutes. This agenda item will be moved to the June meeting.
- Approval of Treasurer’s Report - $1800 - Amount budgeted for Fiscal Year 2018-19. Expenditures for the month of April include: $78.48- catered meal, leaving a balance of $37.58. This agenda item will be moved to the June meeting.

New Business
- AOD Committee Chairperson
  - Geoff McLennan shared that Claire Buckley has offered to chair the Alcohol and Other Drug Committee.

Board Member Comments
- Mr. McLennan shared that a new retreat will be organized encompassing board preferences.
- Yvonne Bond shared that the nominees are: Chairperson, Geoff McLennan, Vice Chairperson, Yvonne Bond, and Secretary-Treasurer, Lisa Cataldo. Yvonne Bond asked if there were any nominations from the floor; none were given.

Public Input
None Received

Adjournment
- The meeting was adjourned at 10:17 a.m.
- Monday, June 17, 2019, at 4:00 p.m. is the next Executive Committee meeting (ASOC).
- Monday, June 24, 2019, at 5:00 p.m. is the next Board meeting taking place in the Adult System of Care, Pacific Conference Room, Roseville, CA.

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Secretary/Treasurer, Mental Health, Alcohol and Drug Advisory Board