

Mental Health Action Team Minutes February 9, 2017

Present: Patrice Mascolo, Natasha Carter, Joann Rosen, Tim Schraeder, Jenine Miller, Betty Lacy, Marvin Trotter, Ace Barash, Sandy O'Ferrall, Bill Murrey (Population Health Solutions invited by Sandy)

- Jenine Miller talked about what is being done now for the Mental Health population in the county.
 - Assisted OP tx (Laura's Law)
 - Court ordered
 - Specific criteria
 - To Date: haven't needed to involve courts yet
 - GAP: housing RQMC is buying a 3-bedroom house in Ukiah
 - Mobile outreach prevention services (MOPS)
 - Team of RN MH and Sheriff Dept. tech
 - Covelo, Hopland, AV, 4 south coast
 - Status: very successful in Covelo particularly
 - Adding second team
 - North and South county
 - Sheriff tech hired
 - Outreach
 - Hopland Tribe
 - All clinics
 - South coast partners, including Sonoma County (meeting planned). How to better serve the So. Coast?
 - Expanded Medication Management for Adults
 - 3 psychiatrists: Dr. Garrett and 2 telepsych
 - MOU
 - Met with hospitals and most clinics, FRCs, and tribes
 - RQMC has 6 subcontractors, many more for MHSA services
- In progress and in the future
 - Stepping Up Initiative
 - Meeting in Sacramento
 - How do you divert at every step in the criminal justice system
 - Prop 47
 - Must have MH or SUDT
 - MH Facility
 - Still interest in this, need to regroup
 - MHSA Innovation
 - Plan with Covelo
 - MH/SU respite in community
 - State sent back, not innovative
 - Rework and submit within the next month

- What is really needed is more money and Housing
 - Gibson
 - AOT (in progress)
 - 61 conserved clients, \$50 -\$700/day “patch” Avg. \$130/day to treat
 - Received a \$500,000 grant to build crisis residential unit, the site is chosen, it has a building on it and an empty lot. RCS is moving into the building and they will build a new building for CRT.

Possible Action Steps

- **Jenine emphasized that all that is happening now is for the Sever Mentally Ill (SMI) and not for the mild to moderate people. Need to find solutions for this population also.**
- **Next election get the BOS to put up an initiative for a both a facility and treatment. Something like 70 % facility and 30% treatment. Or 40 - 60.**
- **Do we also include the mild to moderate in our plans?**
- **Work on a Drug Medical Waiver so can bill insurance and MediCal for detox treatment and services and Case Management for substance abuse.**
- **Need to include Latino providers and workers. The Latino population does not know about opportunities. Need therapists who speak Spanish.**
- **Need to work on prevention: work with people who have been traumatized, work toward decreasing the trauma. PIE: Prevention/Intervention/Education**
- **Mental Health education in the schools. Suicide prevention, mental health classes.**
- **Work to increase the availability of housing for the MH population. Have to address the NIMBY issue through education. Work on the media to stop reporting negative news on MH.**
- **Services for people is lacking, need something to keep them busy.**
- **Get the clients at the table, change meeting hours to times more of the community can attend.**