



Healthy Mendocino Mental Health Action Team Minutes  
Monday, February 25<sup>th</sup>, 2019

In Attendance: Melinda Driggers, Michelle Rich, Julie Fetherston, Marvin Trotter, Natasha Carter, Christine Hawley, Lindsey Painter, Bonnie Boek, Jan McGourty

No changes to minutes or updates to agenda

Updates:

**Mental Health Action Team subpage:**

Julie reported that she wasn't able to put together a mock up Mental Health Action Team page for two reasons: 1) the web development on the current platform takes a trained staff person to create new content and staff didn't have the time/capacity during the CHNA cycle and 2) the RCS/MCOE resource directory grant is an overlap that might make the webpage redundant.

**ReDesign:**

Julie spoke with (Miles, Steve Zuieback, Camille Schrader) several people to track down the documents and Camille said she would find her copies and send them on.

**MCOE/RCS grant:**

Natasha (MCOE), Christine (RCS), and Lindsey (RCS) gave a report on the grant

RCS obtained a three-year grant from SAMSA in October 2018. The grant covers ages 0-21 and adult veterans. The idea is to raise awareness around mental health issues in children and veterans and reducing barriers to mental health access and services. Two-armed approach of training and resource. MCOE is provided prevention and intervention RCS more intervention at tier 2-3.

Tabling, outreach, resources, community members, so one of the documents could be a resource list or social media campaign, trainings on the calendar for this year.

Trainings include Some of the Head start, school counselors. Trainings can be tailored for your need Length of time would be dependent on what the group needs. Some of the components are:

- Collateral and problem solving 4 hours
- Pro-Act 12-16 but components can be pulled out,
- mental health first aid was 8 hours now piloting 6 hours

Dr. Trotter expressed interest in holding a training for the ER staff.

Content is Pro-act collaborative - Emotional behavioral cognitive skills, questions to ask etc.... common mental health symptoms and how it differs among age variations, protocols for referral, etc. Ideas for resources include: a one-page handout on common symptoms and signs of mental health issues, based on the 5 most common diagnosis seen in Ukiah.

Jan asked if law enforcement is invited – yes and if she has a contact please pass it on.

The group discussed the kind of resources included. Lindsey and Christine were not necessarily thinking about doing a web-based resource toolkit, but more of collaborative directory that captures the work we are currently doing and includes beacon resources and other handouts. Love the idea of the toolkit. Discussion followed about potential web hosting spot, how to find stipend to have a webmaster update the site. Possible content:

- Articles and information aimed at destigmatizing mental health challenges and diagnosis, plus self-care
- local stories that humanize the issue
- links to national web-based resource
- Policies and practices “how to find a provider, what to keep in mind, who takes my insurance”
- Anything else that would make it easier for someone who doesn’t know how to find help

Content sorted by categories, regions etc. to make it as easy as possible to find what you need

### **Best Practices: wellness policies**

Julie reported that she had approached several Human Resources Professionals to flow the idea about a wellness policy workshop (accommodations and other policies that improve the mental and physical health of employees) and there was some general enthusiasm. The team decided to start to pull together best practices and examples of well-done policies for the resource toolbox and a potential workshop.

**ACTION ITEM 1:** Julie will put together a digital folder for compiling these resources

**UPDATE:** link to shared google drive folder....

<https://drive.google.com/drive/folders/1fzj8VTEE2irc4TIRnPfBZJVsyRBL6td-?usp=sharing>

**ACTION ITEM 2:** Julie will contact RCS (for their family friendly policies) and Manzanita Services (for their Accommodations policies) and see if they can share.

**ACTION ITEM 3:** Julie will continue to talk with HR directors and personnel to see if it is feasible to hold a HR policy workshop

Other Updates:

Dr. Trotter gave an update on the Orchard Avenue project the Measure B group is hoping to build. It is a residential treatment facility with a four-bed locked facility on the ground floor and ten beds upstairs. The group is trying to fast track the facility by building it privately and then selling it to the county. There

was some discussion about the need for this kind of facility and why the hospital is involved. Last year, there were 742 5150's that came through AHUV's emergency room!

He also said that AHUV is planning a new addition to their facility that will include mental health practitioners, urologists and a cancer care chemo center. All providers we need, and the demand is growing because Lake County is closing their chemo center.