



Health, Housing & Community Services
Mental Health Commission

To: Mental Health Commissioners
From: Jamie Works-Wright, Commission Secretary
Date: April 17, 2025

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Health, Housing & Community
Service Department
Mental Health Commission

Berkeley/ Albany Mental Health Commission

AGENDA

**Special Meeting
Wednesday, April 30, 2025**

All Agenda Items are for Discussion and Possible Action

Public Comment Policy: *Members of the public may speak on any items on the Agenda and items not on the Agenda during the initial Public Comment period. Members of the public may also comment on any item listed on the agenda as the item is taken up. Members of the public may not speak more than once on any given item. The Chair may limit public comment to 3 minutes or less. The meeting may be recorded by staff to review the minutes to get accurate motions on record.*

Time: 7:00 p.m. - 9:00 p.m.

Location: North Berkeley Senior Center
1901 Hearst Ave. Berkeley, Poppy Room

- 1. Roll Call (1 min)**
- 2. Preliminary Matters**
 - a. Action Item: Approval of the April 30, 2025 meeting agenda
 - b. Public Comment (non-agenda items)
 - c. Action Item: Approval of the March 27, 2025 meeting minutes
- 3. Proposed Motion: Request City Council recommend local participations in local based innovative behavioral health innovations – Edward Opton**
- 4. Review, discuss and actions regarding the updated By-Laws for Berkeley Behavioral Health Commission.**
- 5. Review, discuss and actions for application for appointment to Berkeley Behavioral health commission.**
- 6. Agenda items for commission meetings – Commission Secretary Jamie**
- 7. Interview and vote for new applicant – Ian Hunt**
- 8. Interview and vote for new applicant – Patricia Fontana-Narell**
- 9. Vote to re-appoint, Commissioner Glenn Turner to Mental Health Commission**



**Health, Housing & Community
Service Department
Mental Health Commission**

10. Mental Health Manager's Report and Caseload Statistics – provided by Jeff Buell

- a. MHC Manager Report
- b. Caseload Statistic April 2025

11. Subcommittee Reports –

- a. **Membership Subcommittee**
- b. **Financial Subcommittee**
- c. **Care Court Subcommittee**
- d. **Evaluation Subcommittee**
 - i. **Discussion and Possible Action on Mental Health Commission Annual Report**

12. Adjournment

Communications to Berkeley boards, commissions or committees are public record and will become part of the City's electronic records, which are accessible through the City's website. **Please note: Email addresses, names, addresses, and other contact information are not required, but if included in any communication to a City board, commission or committee, will become part of the public record.** If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service or in person to the secretary of the relevant board, commission or committee. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the secretary to the relevant board, commission or committee for further information. The Health, Housing and Community Services Department does not take a position as to the content.

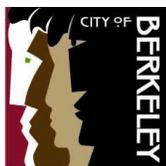
Contact person: Jamie Works-Wright, Mental Health Commission Secretary (510) 981-7721 or
Jworks-wright@berkeleyca.gov



*Communication Access Information: This meeting is being held in a wheelchair accessible location. To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the Disability Services specialist at 981-6418 (V) or 981-6347 (TDD) at least three business days before the meeting date. **Please refrain from wearing scented products to this meeting. Attendees at trainings are reminded that other attendees may be sensitive to various scents, whether natural or manufactured, in products and materials. Please help the City respect these needs. Thank you.***

SB 343 Disclaimer

Any writings or documents provided to a majority of the Commission regarding any item on this agenda will be made available for public inspection in the SB 343 Communications Binder located at the Adult Clinic at 2640 MLK Jr. Way, Berkeley, CA 9470



Department of Health,
Housing & Community Services
Mental Health Commission

Berkeley/Albany Mental Health Commission Draft Minutes – Regular Meeting

7:00 pm
North Berkeley SC 1901 Hearst

Regular Meeting
March 27, 2025

Members of the Public Present: Jonah Markowitz, Ian Hunt, Olga Bolotina

Staff Present: Jeff Buell, Jamie Works-Wright

1) Call to Order at 7:03 pm

Commissioners Present: Andrea Prichett, Monica Jones (7:05); Edward Opton, Glenn Turner, Maria Sol, Lisa Teague, Ashley Gu, Igor Tregub **Absent:** Ajay Krishnan

2) Preliminary Matters

a) Approval of the March 27, 2025 agenda

M/S/C (Sol, Tregub) Motion to approve the agenda with the changes to remove items 4 and 5, Interview and vote for new applicants, due to neither candidate being available for the meeting.

PASSED

Ayes: Gu, Opton, Prichett, Sol, Teague, Tregub, Turner; **Noes:** None; **Abstentions:** None;
Absent: Jones, Krishnan,

b) Public Comment- 2 public comments

c) Approval of the February 27, 2025 Minutes

M/S/C (Turner, Teague) Motion to accept the minutes

PASSED

Ayes: Gu, Jones, Opton, Prichett, Sol, Teague, Turner; **Noes:** None; **Abstentions:** Tregub;
Absent: Krishnan

3) Review, Discuss and Actions regarding the By-Laws for Berkeley Behavioral Health Commission.

M/S/C (Prichett, Opton) Motion to bring back the by-laws next month with the new edits discussed in the meeting.

PASSED

Ayes: Gu, Jones, Opton, Prichett, Sol, Teague, Turner; **Noes:** None; **Abstentions:** Tregub;
Absent: Krishnan

- ~~4) Interview and vote for new applicant – Patricia Fontana-Narell – Cancelled~~
- ~~5) Interview and vote for new applicant – Maya Ezekiel – Cancelled~~
- 6) **Proposed Motion: Request City Council recommend local participation in local-based innovative behavioral health innovations – Bring back next month**
- 7) **Mental Health Manager’s Report and Caseload Statistics – provided by Jeff Buell – No Motion Made**
- a) MHC Manager Report
 - b) Caseload Statistic March 2025
- 8) **Subcommittee Reports – Did not get to items**
- a) **Membership Subcommittee – Discuss recruitment for Veteran’s and Education representative**
 - b) **Financial Subcommittee**
 - c) **Care Court Subcommittee**
 - d) **Evaluation Subcommittee**
 - i) **Discussion and Possible Action on Mental Health Commission Annual Report**
- 9) **Information concerning current Berkeley Behavioral Health services for children. - Did not get to items**
- 10) **Following five domestic violence homicides, San Mateo County launches co-response pilot. - Did not get to items**
- 11) **Adjournment - 9:00 PM**
M/S/C (Gu, Teague) Motion adjourn the meeting
PASSED
Ayes: Gu, Jones, Opton, Prichett, Sol, Teague, Turner; **Noes:** None; **Abstentions:** None; **Absent:** Krishnan Tregub

Minutes submitted by: _____
Jamie Works-Wright, Commission Secretary

**BYLAWS OF THE
CITY OF BERKELEY BEHAVIORAL HEALTH COMMISSION**

ARTICLE I – NAME

The name of this Commission shall be the **Berkeley Behavioral Health Commission**.

ARTICLE II - AUTHORITY

The authority of the **Berkeley Behavioral Health Commission** is established pursuant to California Welfare and Institutions Code (WIC) 5604.

ARTICLE III - DUTIES

The duties of the Behavioral Health Commission (as defined in section 5604.2 and 5963.03 of the Welfare and Institutions Code) are as follows:

1. Review and evaluate the community’s public behavioral health needs, services, facilities, and special problems in any facility within the jurisdiction where behavioral health evaluations or services are being provided, including, but not limited to: schools, emergency departments, jails and psychiatric facilities.
2. Review any City agreements entered into pursuant to Section 5650. The local behavioral health commission may make recommendations to the City Council regarding concerns identified within these agreements.
3. Advise the Berkeley City Council and the Berkeley Behavioral Health Division Manager as to any aspect of the local behavioral health program. Local behavioral health commissions may request assistance from the local patients’ rights advocates when reviewing and advising on mental health or substance use disorder evaluations or services provided in public facilities with limited access.
4. Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process. Involvement shall include individuals with lived experience of mental illness and/or substance use disorder and their families, community members, advocacy organizations, and behavioral health professionals. It shall also include other professionals that interact with individuals living with mental illnesses/substance use on a daily basis, such as education, emergency services, employment, health care, housing, law enforcement, local business owners, social services, seniors, transportation, and veterans.
5. Submit an annual report to the City Council on the needs and performance of the behavioral health system of the City of Berkeley.
6. Review and make recommendations on applicants for the appointment of a local director or manager of behavioral health services. The commission or designees from the commission shall be included in the selection process prior to the decision of the hiring manager.

7. Review and comment on the City's performance outcome data and communicate its findings to the California Mental Health Planning Council.
8. Assess the impact of the realignment of services from the state to the City on services delivered to clients and on the local community.
9. Perform such additional duties as may be assigned to the Behavioral Health Commission by the Berkeley City Council.
10. Behavioral Health Services Act (BHSA) Duties from WIC Code Section (5963.03)
 - a. Conduct BHSA Hearing: The Behavioral Health Commission established pursuant to Section 5604 shall conduct a public hearing on the draft three-year integrated plan [optional: "and annual updates"] at the close of the 30-day comment period.
 - b. Review/Recommendations on Adopted BHSA Plan: The Behavioral Health Commission shall review the adopted plan or update and make recommendations to the local mental health agency or local behavioral health agency, as applicable, for revisions. The local mental health agency or local behavioral health agency, as applicable, shall provide an annual report of written explanations to the local governing body and the State Department of Health Care Services for any substantive [see (f) below] recommendations made by the local mental health commission that are not included in the final plan or update.

For the purposes of this section, "substantive recommendations made by the local behavioral health commission" refers to any recommendation presented to the commission and approved by a majority vote of the members present at a public hearing, provided that a quorum has been established.

ARTICLE IV - MEMBERSHIP

- A. **Membership Requirements:** Membership is defined in accordance with California Welfare & Institutions Code (WIC) Section 5604 to include:
1. The Behavioral Health Commission shall consist of 13 members appointed by the City Council.
 2. One (1) member shall be a designated Berkeley City Council member appointed by the City of Berkeley, Mayor.
 3. Fifty percent (50%) of the commission membership shall be consumers, or the parents, spouses, siblings, or adult children of consumers, who are receiving or have received behavioral health services. Within these categories:
 1. One (1) of these members shall be an individual who is 25 years of age or younger.
 2. At least twenty percent (20%) of the total membership shall be consumers, and at least 20 percent (20%) shall be families of consumers.
 4. In counties/cities with a population of 100,000 or more, at least one (1) member of the commission shall be a veteran or veteran advocate.
 1. For purposes of this section, "veteran advocate" means either a parent, spouse, or adult child of a veteran, or an individual who is part of a veteran's organization, including the Veterans of Foreign Wars or the American Legion.
 2. To comply with clause (i), the City shall notify its county veterans service officer about vacancies on the commission, if a county has a veteran's service officer.
 5. At least one member (1) of the commission shall be an employee of a local education agency. (ii) To comply with clause (i), a county/city shall notify its county office of education about vacancies on the commission.
 6. Membership should reflect the ethnic, cultural, racial and LGBTQ+ diversity of the clients served in the county/city.
 7. The Behavioral Health Commission is encouraged to include individuals who have experience with and knowledge of the mental health system, such as members of the community that engage with individuals living with mental illness in the course of daily operations, such as representatives of county offices of education, large and small businesses, hospitals, hospital districts, physicians practicing in emergency departments, city police chiefs, county sheriffs, and community and nonprofit service providers.
 8. Except as provided in the next paragraph, a member of the commission or the member's spouse shall not be a full-time or part-time City employee of a City behavioral health service, a full-time or part-time County employee of a County behavioral health service, or an employee of the State Department of Health Care Services, or an employee of, or a paid member of the governing body of, a behavioral health contract agency.
 9. A consumer of mental health services who has obtained employment with an employer described in paragraph (10) and who holds a position in which the consumer does not have any interest, influence, or authority over any financial or contractual matter concerning the employer may be appointed to the commission. The member shall abstain from voting on any financial or contractual issue concerning the member's employer that may come before the commission.
 10. If it is not possible to secure membership as specified from among persons who reside in the City, the Berkeley City Council may substitute representatives of the public interest in behavioral health who are not full-time or part-time employees (except as noted below*) of a City behavioral health service, a full-time or part-time County employee of a County behavioral health service, or an employee of the State Department of Health Care Services, or an employee of, or a paid member of the governing body of, a

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behavioral health contract agency. *Section 5604 of the California Welfare and Institutions Code (3) (d) (1) and (2) states that Consumers may be employed by City or county behavioral health services or behavioral health contract agency as long as they don't have any financial or contractual interest, and are not allowed to vote on any financial or contractual issues concerning their employer that may come before the Commission.

11. Terms of Office: Terms for each member of the Behavioral Health Commission shall be three years. Members shall be limited to three consecutive, three-year terms unless waived by a majority vote of the Berkeley City Council.
12. Compensation: No member shall be compensated for duties performed as a member of the Behavioral Health Commission. Notwithstanding the previous sentence, a member may be reimbursed for the actual costs of attending meetings, conferences or similar gatherings if attendance at the meeting, conference or similar gathering is approved in advance in writing by the Behavioral Health Commission Chair and the Berkeley Behavioral Health Division Manager.

B. Process and Participation Requirements: A member of the Behavioral Health Commission must:

1. Be appointed by the Berkeley City Council.
2. Take the Oath of Office administered by the Clerk of the Berkeley City Council.
3. Maintain a satisfactory meeting attendance record as defined by the commission manual, to Behavioral Health Commission meetings and other assignments.
4. Comply with all applicable regulations of the Fair Political Practices Commission, including, but not limited to, preparing and filing FPPC Form 700, if required, within 30 days of appointment and annually prior to April 1st of each year.
5. Keep any confidential information obtained while performing duties as a Behavioral Health Commission member confidential.
6. Participate in site visits of a behavioral health facility or program, at least once per year, unless excused by the Executive Committee.
7. The activities and affairs of individual members of the Behavioral Health Commission, when acting as Commission members, shall be conducted, and powers exercised, by and under the direction of the Behavioral Health Commission and these bylaws.

C. Recruitment of Members

1. Responsibility for Recruitment. Recruitment of prospective members of the Berkeley Behavioral Health Commission shall be the responsibility of individual members of the Berkeley City Council and members of the Behavioral Health Commission who may recommend appointees to the City Council. An effort will be made to recruit individuals who have experience with and knowledge of the behavioral health system. This would include members of the community that engage with individuals living with mental illness in the course of daily operations, such as representatives of county offices of education,

large and small businesses, hospitals, hospital districts, physicians practicing in emergency departments, city police chiefs, county sheriffs, veteran's programs and community and nonprofit service providers.

2. Berkeley City Council Recruitment. City Council members are encouraged to nominate individuals from their respective district to facilitate wider representation across the City of Berkeley, for a total of ten Behavioral Health Commission members to be nominated and appointed by the City Council. The City Council may accept more than one nomination from each district based on interest and willingness of community members to serve.
3. Recruitment by the Behavioral Health Commission- Interview and Recommendation. All applicants, except those nominated directly by the City Council, shall be interviewed at the commission meeting by members of the Behavioral Health Commission. Names of the applicants recommended shall be presented to the full Behavioral Health Commission for its consideration. Those applicants recommended by the Behavioral Health Commission shall then be referred to the City Council with a recommendation they be appointed to the Berkeley Behavioral Health Commission.

ARTICLE V - MEETINGS

1. Annual Meetings. There shall be a regular meeting, which shall constitute the annual meeting of the Behavioral Health Commission, to be held on the fourth Thursday of January of each year at which time a meeting schedule (that includes regular meeting day, time and location will be adopted for the next twelve months, and elections held. If the fourth Thursday of January falls on a Holiday, the meeting shall be held on the third Monday of July.
2. Regular Meetings of the Behavioral Health Commission may be held at such time and place as is established by the annual meeting schedule.
3. Special Meetings. Special meetings, for any purpose or purposes related to the business of the Behavioral Health Commission, may be called at any time by the Chair of the Commission or by a majority of the Commission members.
4. Notice of Annual and Regular Meetings. Meeting agendas shall be posted 72 hours in advance on the city's website and given to each member of the Behavioral Health Commission by one or more of the following methods: (a) by personal delivery of written notice; (b) by first class mail, postage prepaid; (c) by fax transmittal or e-mail of written notice; or (d) by telephone, text or email, either directly to the member or to a person at the member's office or home who would reasonably be expected to communicate that notice promptly to the member. Notices sent by first class mail shall be deposited in the U.S. Mail not less than five days before the time set for the meeting. Notice given by personal delivery, fax, E-mail, or telephone shall occur at least 72 hours before the time set for the meeting. The notice shall be posted at least 72 hours prior to the meeting in a location that is freely accessible to members of the public.
5. Notice of Special Meeting. A special meeting may be called at any time by the Chair of the Behavioral Health Commission or by a majority of the Behavioral Health Commission members. Notice of special meetings shall be posted 24 hours in advance on the city's website and shall be provided to each member of the Behavioral Health Commission and to local media that has requested notice. The notice

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shall be delivered personally or by any other means and shall be received at least 24 hours before the time of the meeting as specified in the notice. The notice shall specify the time and place of the special meeting and the business to be transacted or discussed. No other business shall be considered at these meetings by the Commission. The notice shall be posted at least 24 hours prior to the special meeting in a location that is freely accessible to members of the public.

ARTICLE VI - OFFICERS

1. Officers of the Commission. The officers of the Commission shall consist of a Chair and Vice-Chair.
2. Election of Officers. The offices of Chair and Vice-Chair shall be elected at the annual meeting of the Commission and those elected shall serve for a term of at least one but not more than two consecutive years. It is the non-binding policy of the Commission that the Vice-Chair will be the person that will normally be elected to serve as Chair in the year following service as Vice-Chair.

If the Chair's office is vacated prior to the end of the one year term, the Vice Chair shall assume the Chair's office and a replacement Vice Chair shall be nominated at the next regularly scheduled meeting. The election vote for the new Vice Chair shall be held at the next regularly scheduled meeting following the nomination meeting.

ARTICLE VII - DUTIES OF OFFICERS AND OTHER COMMISSION POSITIONS

Duties of the Officers of the Commission. The duties of the officers of the Behavioral Health Commission shall be as follows:

1. Chair: It shall be the duty of the Chair to prepare the agenda for and preside over all regular and special meetings of the Commission; to appoint Committee and Work Group chairs; coordinate existing Committees and Work Groups; serve as an ex-officio member of all Committees and Work Groups; call special meetings of the Commission when necessary; and be in regular consultation with the Manager of the Behavioral Health Division.
2. Vice-Chair: It shall be the duty of the Vice-Chair to assist the Chair in the execution of duties and to perform Chair duties during the Chair's absence. In case of the resignation, leave of absence, or the death of the Chair, the Vice-Chair shall perform such duties as are imposed on the Chair until such time as the Behavioral Health Commission elects a new Chair.
3. Upon the expiration of his or her term of office, or in the case of resignation, each Officer shall turn over to his or her successor, without delay, all records and materials pertaining to the office.

ARTICLE VIII - COMMITTEES

1. The following Standing Committee is created:

An Executive Committee. The Executive Committee, will be composed of the current and past Chair, Vice Chair, and three Members-at-Large. The term of Executive Committee members shall coincide with their terms as members of the Commission. The Executive Committee shall be responsible for the overall management of the activities and business of the Behavioral Health Commission. This includes, but is not necessarily limited to, the following:

- a. Establishing and overseeing of Ad Hoc Committees (short term workgroups); coordinating selection and implementation of site visits; approving Behavioral Health Commission agendas; drafting policies and procedures for Behavioral Health Commission approval; and selecting Work Group and Committee chairs on the recommendation of the Behavioral Health Commission Chair.
 - b. Selection of Members-at-Large. Any member of the Behavioral Health Commission, other than the Chair, Vice-Chair and past Chair, can potentially be a Member-at-Large. In February of each year, the Chair, Vice-Chair and past Chair, will make recommendations for three Members-at-Large to be approved by vote of the Behavioral Health Commission each March. Prior to the vote on these recommendations, the floor will be open to Commission members for additional nominations. Members-at-Large will attend and participate in Executive Committee meetings. Members-at-Large will have voting rights during Executive Committee meetings.
2. Standing Committees may be established or eliminated by the Behavioral Health Commission. Standing Committees have ongoing responsibilities concerning a particular subject matter that is not time limited. Committees and Work Groups will conduct meetings in accordance with the Brown Act (Government Code Section 54950 et seq.) to the extent applicable.

ARTICLE IX - ATTENDANCE & VACANCIES ON THE COMMISSION

1. All Behavioral Health Commission members are required to contact the Behavioral Health Commission Chair or staff liaison to the Behavioral Health Commission prior to a meeting if they are unable to attend. Failure to do so will result in an unexcused absence.
2. A Commission member may be deemed by the Executive Committee to have ceased their duties as a Behavioral Health Commission member based on attendance and/or performance of other assigned duties. If after review the Executive Committee determines the member should be removed, a recommendation will be made to the full Behavioral Health Commission. Upon two thirds vote, the Behavioral Health Commission may recommend the removal of the member to the Commission of Supervisors.
3. When a vacancy occurs, the staff liaison to the BHC shall advise the Commission and the Executive Committee will commence the recruitment for a replacement.

ARTICLE X - RESIGNATIONS AND LEAVES OF ABSENCE

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1. Any member may resign effective upon giving notice to the Chair, the Vice Chair, staff liaison of the Behavioral Health Commission or City Clerks' office.
2. A Commission Member who does not wish to resign and who needs leave from Commission commitments, may request a leave of absence for personal reasons. The request must be submitted in writing to the Chair of the Behavioral Health Commission. The Executive Committee and or City Council/ Mayor may approve his or her request for a period of time that does not exceed 6 months.

ARTICLE XI - MEETINGS, QUORUMS, AND RULES OF ORDER

1. The Behavioral Health Commission shall meet monthly or as scheduled on the Commission's approved annual calendar of meetings.
2. A quorum shall consist of 50% plus one of the appointed members. Members who are on an approved leave of absence will not count toward establishing a quorum.
3. Meetings of the Behavioral Health Commission shall be governed by Rosenberg's Rules of Order [Link](#) and shall comply with the Brown Act.

ARTICLE XII - AMENDMENTS TO BYLAWS

These bylaws may be amended at any meeting of the Behavioral Health Commission by a two-thirds vote of its membership when reasonable advance notice has been given as described below.

The Behavioral Health Commission shall use the following procedure when amending the Bylaws.

1. Proposals for change shall be noticed on the Behavioral Health Commission agenda and a written copy sent to all Behavioral Health Commission members a minimum of five days prior to the meeting date on which proponents wish consideration and a vote on the change.
 - a. The Behavioral Health Commission must approve the change by a two-thirds majority of those members in attendance at a regular or special meeting at which a quorum is present.
 - b. The change, as approved, is to be signed and dated by the Behavioral Health Commission Chair.
 - c. The changed and revised copy of the Bylaws is then forwarded to the City Council Commission for their review and approval.
 - d. A copy of approved changed Bylaws is to be provided to each City of Berkeley Behavioral Health Commission member at the next regularly scheduled meeting.
 - e. Approved Bylaws are to be filed with the Behavioral Health Agency staff liaison. Additionally, an appropriate historical log of all Bylaw changes and the date of the change are to be maintained by the

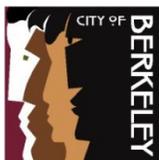
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behavioral health agency staff liaison. The historical log is to be distributed to all Behavioral Health Commission members whenever “Proposals for Changes” are distributed.

- f. All members will be provided with a set of the current Behavioral Health Commission Bylaws and Policies and Procedures.

ARTICLE XIII - POLICIES AND PROCEDURES

The Behavioral Health Commission may establish Policies and Procedures on matters not covered by these Bylaws.



APPLICATION FOR APPOINTMENT TO BERKLEY BEHAVIORAL HEALTH COMMISSION

Thank you for your interest in improving community behavioral health in Berkeley. Below is some important information about the Berkeley Behavioral Health Commission. Please review before completing your application.

Background

Created by California Welfare and Institutions Code Section 5604 and Berkeley City Resolution 65,945-N.S., the Berkeley Behavioral Health Commission, originally named the Berkeley/Albany Mental Health Commission, is composed of behavioral health consumers, family members of consumers and Berkeley residents with a broad range of disciplines, professions and fields of knowledge and experience. Beginning on January 1, 2025, new changes are required from the passage of Proposition 1 (SB 326) and are outlined below.

Composition of the Commission

The Commission consists of thirteen members. Commissioners are appointed by Berkeley City Council for a three-year term, with a limit of three consecutive terms.

To meet state requirements, fifty percent of the seats are designated for consumers or the parents, spouses, siblings or adult children of consumers who are receiving or have received behavioral health services. At least one of these members must be 25 years of age or younger. This helps to ensure that people who are impacted by behavioral health services have a voice in the oversight process. At least one seat is designated for a veteran or veteran advocate. At least one seat is designated for an employee of a local education agency.

The specific membership of the Commission is as follows: (a) one member of the Commission is the Mayor or a City Council designee, (b) the remaining members shall be residents of the City of Berkeley. Of the total membership, at least 20 percent shall be consumers, and at least 20 percent shall be families of consumers. The remaining Commission members shall be individuals who have experience with, and knowledge of, the behavioral health system including community members who engage with individuals living with behavioral health challenges in the course of daily operations. Examples include community members from a variety of fields and professions. Such as representatives of county offices of education, larger and small business, hospitals, emergency departments and community nonprofit service providers.

The City of Berkeley's Conflict of Interest Code requires members of the Berkeley Behavioral Health Commission to file Statements of Economic Interest – FPPC Form 700, which is a public document. For more information, please contact the City Clerk's Department at (510) 981-6900, or visit the website at <https://berkeleyca.gov/your-government/public-records/conflict-interest-reports>

APPLICATION FOR APPOINTMENT TO BERKLEY BEHAVIORAL HEALTH COMMISSION

In addition, Commissioners are required to participate in the AB 1234 Ethics Training, which is offered on line. Additional trainings are offered annually through the California Association of Local Mental Health Boards/Commissions (CALMHB/C) and California Institute for Mental Health (CiMH).

General Commissioner Qualifications:

- Demonstrates interest in community behavioral health services;
- Ready to commit to Commission duties, including preparation for and regular attendance at monthly Commission and Committee meetings, timely review of meeting materials and completion of Commission paperwork and training;
- Willing and able to work alongside behavioral health consumers and members of diverse communities;
- Able to constructively handle conflict and differences of opinion;
- Reflects the diversity of the Berkeley community;
- Willing and able to work with City staff, Behavioral Health management, Berkeley City Councils; and
- The Commissioner or their spouse is not a full or part time employee of: The City of Berkeley's behavioral health division, an Alameda county behavioral health service, the California Department of Health Care Services, a behavioral health contract agency or a paid member of the governing body of a behavioral health contract agency.

Please be aware that, as with other City Boards and Commissions, once an application is filed with the City of Berkeley, it becomes public information. Further, in order to confirm that the Commission membership is representative of the various categories set forth in state law and City resolution, applicants need to indicate on the application form whether they are applying to represent the categories as defined above.



APPLICATION FOR APPOINTMENT TO BERKLEY BEHAVIORAL HEALTH COMMISSION

Redistricting
Commissioners may
not be eligible to
serve. Contact the
City Clerk to verify.

NAME: _____

PREFERRED PRONOUN(S): _____

Residence Address: _____
Street City Zip

Business Name/Address: _____
Street City Zip

Occupation/Profession: _____

Business Phone: _____ **Home Phone:** _____

Email address: _____

Employer's Name: _____

Name of Spouse's Employer: _____

(Please note that pursuant to Welfare and Institutions Code Section 5604(d), no member of the City of Berkeley's Mental Health Commission or his or her spouse may be: (a) a full or part time employee of City of Berkeley's mental health division, (b) a full or part time county employee of a county mental health service, (c) an employee of the California Department of Health Care Services, or (d) an employee of, or paid member of the governing body of, a mental health contract agency. If you are unsure whether your employment or your spouse's employment falls within this restriction and are interested in applying for the Commission, please contact the Commission Secretary.)

The following individuals are qualified to comment on my capabilities:

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE NO.</u>
_____	_____	_____
_____	_____	_____

The City of Berkeley's Conflict of Interest Code requires members of all City of Berkeley Commissions except the Youth Commission and Commission on Status of Women to file Statements of Economic Interests – FPPC Form 700. The Form 700 is a public document. For more information, please contact the City Clerk's Department at 981-6900, or visit our website at <https://berkeleyca.gov/your-government/public-records/conflict-interest-reports>.

Name: _____

I have been a resident of Berkeley since: _____

**APPLICATION FOR APPOINTMENT TO
BERKLEY BEHAVIORAL HEALTH COMMISSION**

I qualify for appointment under the following categories

(Please check all that apply to you)

- Consumer who is receiving or has received behavioral health services or family members (parents, spouses, siblings, or adult children) of a consumer.

Please indicate all that apply to you:

- Consumer Family member 18 - 25 years of age

- Veteran or Veteran Advocate

- Employee of a local Education Agency

- Community member who has experience with and knowledge of the behavioral health system including those who engage with individuals living with mental illness in the course of their daily operations, representing a broad range of disciplines, professions, and fields of knowledge. Such as representatives of county offices of education, larger and small business, hospitals, emergency departments and community nonprofit service providers.

Signature of Applicant: _____ **Date:** _____

AFFIDAVIT OF RESIDENCY

I, _____, hereby declare, under penalty of perjury, that I am a resident of the City of Berkeley. I understand that, with the exception of a temporary relocation outside of Berkeley not to exceed six months, I may no longer serve on a Berkeley Commission should this cease to be true.

Signature of Applicant: _____ Date: _____

APPLICATION FOR APPOINTMENT TO BERKLEY BEHAVIORAL HEALTH COMMISSION

DEMOGRAPHIC SURVEY (Optional):

Please indicate gender: Male Female Nonbinary Prefer not to say

Please indicate whether you are currently a student: Yes No

Please indicate the racial / ethnic category which you most closely identify with below (*response optional - please check only one category*):

- WHITE (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East
- BLACK or AFRICAN AMERICAN (not of Hispanic or Latino origin):** All persons having origins in any of the Black racial groups of Africa
- HISPANIC or LATINO:** All persons of Central / South America or other Spanish culture or origin, regardless of race
- ASIAN (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent. This includes, Cambodia, China, Japan, India, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- AMERICAN INDIAN / ALASKAN NATIVE (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of North, Central, and South America, and who maintain cultural identification through tribal affiliation or community recognition.
- NATIVE HAWAIIAN / PACIFIC ISLANDER (not of Hispanic or Latino origin):** All persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- TWO or MORE RACES (not of Hispanic or Latino origin):** All persons who identify with more than one of the above six races

**APPLICATION FOR APPOINTMENT TO
BERKLEY BEHAVIORAL HEALTH COMMISSION**

**Supplemental Questionnaire
Berkeley Behavioral Health Commission**

In addition to completing the application form, candidates are requested to provide the following information to assist the Behavioral Health Commission in their process to recommend applicants for appointment by Berkeley City Council. Please use an additional sheet if necessary.

1. Please explain why you are interested serving on the Berkeley Behavioral Health Commission.

2. Are you involved in other community activities? If so, which ones?

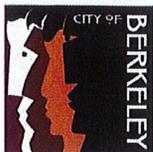
3. What, in your opinion, are the most important behavioral health issues in Berkeley?

4. What do you recommend doing about them?

5. It is important that Berkeley Behavioral Health be responsive to the needs of our culturally diverse community. What knowledge and experience do you have that could help provide insight on how to make Berkeley Behavioral Health even more inclusive of under-served communities?

6. What unique contributions (work experience, education, attributes and training) do you have to make to the Behavioral Health Commission?

Return this form to the City Clerk Department: 2180 Milvia Street, Berkeley, CA 94704



**APPLICATION FOR APPOINTMENT TO
BERKLEY/ALBANY MENTAL HEALTH COMMISSION**

NAME: Jan Dustin Hunt

PREFERRED PRONOUN(S): He/Him

Residence Address: 2530 Hillegass Ave, #114, Berkeley, CA 94704
Street City Zip

Business Name/Address: _____
Street City Zip

Occupation/Profession: Retired/Disabled

Business Phone: _____ Home Phone: 415 940 8223

Email address: janandhunt@gmail.com

Employer's Name: N/A

Name of Spouse's Employer: N/A

(Please note that pursuant to Welfare and Institutions Code Section 5604(d), no member of the City of Berkeley's Mental Health Commission or his or her spouse may be: (a) a full or part time employee of City of Berkeley's mental health division, (b) a full or part time county employee of a county mental health service, (c) an employee of the California Department of Health Care Services, or (d) an employee of, or paid member of the governing body of, a mental health contract agency. If you are unsure whether your employment or your spouse's employment falls within this restriction and are interested in applying for the Commission, please contact the Commission Secretary.)

The following individuals are qualified to comment on my capabilities:

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE NO.</u>
<u>Jennifer Caldwell, MFT</u>	<u>2640 McK Way, Berkeley, 94704</u>	<u>(510) 960.0135</u>
<u>Paul Blake</u>	<u>2236 A Ward St, Berkeley, 94705</u>	<u>(510) 610.3577</u>
<u>Michael Marchant</u>	<u>2690 McK Way, Berkeley, 94704</u>	<u>(510) 520.8282</u>

The City of Berkeley's Conflict of Interest Code requires members of all City of Berkeley Commissions except the Youth Commission and Commission on Status of Women to file Statements of Economic Interests – FPPC Form 700. The Form 700 is a public document. For more information, please contact the City Clerk's Department at 981-6900, or visit our website at <https://berkeleyca.gov/your-government/public-records/conflict-interest-reports>.

CITY OF BERKELEY - CITY CLERK
2024 NOV 14 PM 2:25

APPLICATION FOR APPOINTMENT TO BERKLEY/ALBANY MENTAL HEALTH COMMISSION

Name: Ian D. Hunt

I have been a resident of: Berkeley / Albany since: 2019
(circle one)

I qualify for appointment under the following:

- Representative of General Public Interest who shall be persons representing a broad range of disciplines, professions, and fields of knowledge.
- Representative of Special Public Interest who shall be consumers who are receiving or have received mental health services or family members (parents, spouses, siblings, or adult children) of consumers. Please indicate at least one:

Consumer Family member

Signature of Applicant: Ian D. Hunt Date: 11/15/2024

AFFIDAVIT OF RESIDENCY

I, Ian Dustin Hunt, hereby declare, under penalty of perjury, that I am a resident of the City of Berkeley. I understand that, with the exception of a temporary relocation outside of Berkeley not to exceed six months, I may no longer serve on a Berkeley Commission should this cease to be true.

Signature of Applicant: Ian D. Hunt Date: 11/15/2024

DEMOGRAPHIC SURVEY (Optional):

- Please indicate gender: Male Female Nonbinary Prefer not to say
- Please indicate whether you are currently a student: Yes No
- Please indicate the racial / ethnic category which you most closely identify with below (response optional - please check only one category):
- WHITE (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East
 - BLACK or AFRICAN AMERICAN (not of Hispanic or Latino origin):** All persons having origins in any of the Black racial groups of Africa
 - HISPANIC or LATINO:** All persons of Central / South America or other Spanish culture or origin, regardless of race
 - ASIAN (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent. This includes, Cambodia, China, Japan, India, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
 - AMERICAN INDIAN / ALASKAN NATIVE (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of North, Central, and South America, and who maintain cultural identification through tribal affiliation or community recognition.
 - NATIVE HAWAIIAN / PACIFIC ISLANDER (not of Hispanic or Latino origin):** All persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands
 - TWO or MORE RACES (not of Hispanic or Latino origin):** All persons who identify with more than one of the above six races

**APPLICATION FOR APPOINTMENT TO
BERKLEY/ALBANY MENTAL HEALTH COMMISSION**

**Supplemental Questionnaire
Berkeley/Albany Mental Health Commission**

In addition to completing the application form, candidates are requested to provide the following information to assist the Mental Health Commission in their process to recommend applicants for appointment by Berkeley City Council. Please use an additional sheet if necessary.

1. Please explain why you are interested serving on the Berkeley/Albany Mental Health Commission.

I receive critical mental health services as a resident and have valuable feedback on lots of subjects.

2. Are you involved in other community activities? If so, which ones?

I have been involved in housing services, substance abuse and harm reduction support.

3. What, in your opinion, are the most important mental health issues in Berkeley and/or Albany?

Fundamentally, the drug abuse and resulting homelessness are core. This place attracts needy homeless people - what then?

4. What do you recommend doing about them?

So much to say. Honestly just continue to provide accessible services.

5. It is important that Berkeley Mental Health be responsive to the needs of our culturally diverse community. What knowledge and experience do you have that could help provide insight on how to make Berkeley Mental Health even more inclusive of under-served communities?

I lived in the tents during the pandemic and survived every day.

Please let me help you understand your

6. What unique contributions (work experience, education, attributes and training) do you have to make to the Mental Health Commission?

From above, my experience is invaluable ^{clients} and I have background that →

Return this form to the City Clerk Department: 2180 Milvia Street, Berkeley, 94704

continued →

the commission.

I worked in/with
municipal govt's, ~~at~~
and am ~~ext~~ ~~er~~

looking forward to this, if I
am given the opportunity
Please and Thank you.



Ian D. Hunt



APPLICATION FOR APPOINTMENT TO BERKLEY/ALBANY MENTAL HEALTH COMMISSION

24
Notarizing
CITY OF BERKELEY - CITY CLERK
2024 NOV 13 PM 3:18
City Clerk to verify.

NAME: PATRICIA FONTANA-NARELL

PREFERRED PRONOUN(S):

Residence Address: 1326 SANTA FE BERKELEY CA 94702
Street City Zip

Business Name/Address:
Street City Zip

Occupation/Profession: ARCHITECT (RET.)

Business Phone: Home Phone: 510-847-1785

Email address: prfontana@comcast.net

Employer's Name:

Name of Spouse's Employer: SELF EMPLOYED

(Please note that pursuant to Welfare and Institutions Code Section 5604(d), no member of the City of Berkeley's Mental Health Commission or his or her spouse may be: (a) a full or part time employee of City of Berkeley's mental health division, (b) a full or part time county employee of a county mental health service, (c) an employee of the California Department of Health Care Services, or (d) an employee of, or paid member of the governing body of, a mental health contract agency. If you are unsure whether your employment or your spouse's employment falls within this restriction and are interested in applying for the Commission, please contact the Commission Secretary.)

The following individuals are qualified to comment on my capabilities:

Table with 3 columns: NAME, ADDRESS, PHONE NO.
Row 1: GLEN U TURNER, BOWTA ST., BERKELEY, 510-527-2855
Row 2: LINDA MAIO, BERKELEY WAY, BERKELEY, linda.maio@yahoo.ca

The City of Berkeley's Conflict of Interest Code requires members of all City of Berkeley Commissions except the Youth Commission and Commission on Status of Women to file Statements of Economic Interests - FPPC Form 700. The Form 700 is a public document. For more information, please contact the City Clerk's Department at 981-6900, or visit our website at https://berkeleyca.gov/your-government/public-records/conflict-interest-reports.

Name: Patricia Fontana-Narell

I have been a resident of Berkeley Albany since: 1973
(Circle one)

**APPLICATION FOR APPOINTMENT TO
BERKLEY/ALBANY MENTAL HEALTH COMMISSION**

I qualify for appointment under the following:

- Representative of General Public Interest who shall be persons representing a broad range of disciplines, professions, and fields of knowledge.
- Representative of Special Public Interest who shall be consumers who are receiving or have received mental health services or family members (parents, spouses, siblings, or adult children) of consumers. Please indicate at least one:
- Consumer Family member

Signature of Applicant: Patricia Santana-Narell Date: 11/15/24

AFFIDAVIT OF RESIDENCY

I, PATRICIA SANTANA-NARELL hereby declare, under penalty of perjury, that I am a resident of the City of Berkeley. I understand that, with the exception of a temporary relocation outside of Berkeley not to exceed six months, I may no longer serve on a Berkeley Commission should this cease to be true.

Signature of Applicant: Patricia Santana-Narell Date: 11/15/24

DEMOGRAPHIC SURVEY (Optional):

Please indicate gender: Male Female Nonbinary Prefer not to say

Please indicate whether you are currently a student: Yes No

Please indicate the racial / ethnic category which you most closely identify with below (*response optional - please check only one category*):

- WHITE (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East
- BLACK or AFRICAN AMERICAN (not of Hispanic or Latino origin):** All persons having origins in any of the Black racial groups of Africa
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- ASIAN (not of Hispanic or Latino origin):** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent. This includes, Cambodia, China, Japan, India, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
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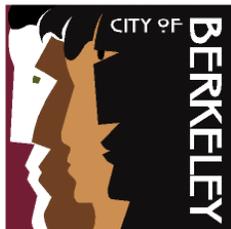
**APPLICATION FOR APPOINTMENT TO
BERKELEY/ALBANY MENTAL HEALTH COMMISSION**

ANSWERS TO SUPPLEMENTAL QUESTIONNAIRE

1. My son was diagnosed with a Serious Mental Illness while he was a student at UC Berkeley. In trying to get the support and care he needed I encountered instead a system that seemed designed to obstruct and delay the delivery of care. I educated myself about the laws and policies that constrained providers' ability to help those in their care and became involved in Mental Health activism. My son has been a client of BMH for most of the last two decades, so I have a lot of experience with the agency through several leadership and policy iterations.
2. I have been involved in advocacy at the city, county, state and national level. I co-founded a group, *Voices of Mothers*, that spearheaded the successful drive to get Assisted Outpatient Treatment adopted by the Board of Supervisors in Alameda County. I am on the Steering Committee of *FASMI (Families Advocating for the Seriously Mentally Ill.)* I am a member of a state wide advocacy group, the *Grave Disability Workgroup*, that works with legislators and administrators on policy proposals. I have represented the family stakeholder on numerous ACBH Advisory Committees, including the *Justice Involved Mental Health Committee*, the *CARE Court Workgroup*, and the committees that instituted CIT training and Behavioral Health Courts.
3.
 - 1) Understaffing at Berkeley Mental Health.
 - 2) Lack of Supportive Housing for those with SMI.
 - 3) Failure to partner with family members/caregivers.
 - 4) Laws and policies that make it difficult to access care early on when the potential for recovery is greatest.
4.
 - 1) Search for ways to accelerate hiring at BMH.
 - 2) Pursue BHCIP and other revenue streams to increase the number and types of Supportive Housing in Berkeley.
 - 3) Incorporate Family Advocates into Case Management Teams.
 - 4) Create an Early Intervention Pilot Program in Berkeley.
5. I have worked with the FASMI Steering Committee to try to bring diversity to the membership. FASMI also collaborates with community partners like the *ICJJ*, the *Care First Task Force*, and *African-American Support Group*, that advocate for equity and diversity.
6. I have written articles addressing topics relating to Mental Illness for various publications.
I have a Masters of Architecture degree with a focus on alternate housing typologies that foster community.

Patricia Fontana-Narell
11.15.2024

Internal



Health Housing and
Community Services Department
Mental Health Division

MEMORANDUM

To: Behavioral Health Commission
From: Jeffrey Buell, Behavioral Health Division Manager
Date: 4/15/2025
Subject: Behavioral Health Manager Report

Behavioral Health Services Report

Please find the attached report on Behavioral Health Services for March 2025. Also note that fiscal fields continue to not be updated in this template. Commissioners may seek to meet again with the Division Manager and Health, Housing, and Community Services (HHCS) Fiscal Services Manager to discuss helpful data and structure for future service reports (Initial meeting on 11/18/25).

Information Requested by Behavioral Health Commission

No new questions were submitted by Commissioners in this time frame.

Mental Health Division Updates

Policy and Funding

- On April 7, 2025, DHCS opened the public comment period for Module 3 and updated the [Behavioral Health Services Act County Policy Manual](#) to include the content reviewed during the public comment period for Module 2. The policy manual now provides guidance on draft and final Integrated Plan submissions, funding allocations, Medi-Cal payment, Full-Service Partnerships, promoting access to care, early intervention programs, and workforce education and training. Module 3 will provide additional guidance and templates for counties as they prepare to submit their first Integrated Plans in 2026. After the public comment period closes, feedback will be analyzed to identify common themes and concerns that will be added to the updated [Behavioral Health Services Act County Policy Manual](#). Please review Module 3 (<https://policy-manual.mes.dhcs.ca.gov/bhsa-module-3-closes-04-25-2025/V0.3.0/>) and provide your input. To learn how to provide feedback with DHCS' new web-based tool, please watch this [instructional training video](#). For specific questions about the

A Vibrant and Healthy Berkeley for All

updated policy manual, please email BHTinfo@dhcs.ca.gov. For specific public comment-related inquiries, please email BHTPolicyFeedback@dhcs.ca.gov.

- DHCS put out this [APL](#) (all plan letter) providing guidance regarding the obligations of health plans related to behavioral health crisis services provided to an enrollee by a 988 center or mobile crisis team. This guidance clarifies the requirements for health plans to cover mental health and substance use disorder treatment to enrollees by 988 or a mobile crisis team, regardless of network providing the care or authorization status.
- Medi-Cal facing potential cuts: over the next two weeks, Congress will again consider massive spending cuts, cuts that could dramatically affect the 15 million Californians who rely on Medi-Cal. The federal administration and Congress have indicated that they plan to craft a budget blueprint that will shrink the size of government while extending massive tax cuts that are due to expire this year. One of the spending cut targets identified is Medicaid, the joint federal-state program that provides health care for 83 million people nationwide, including in California where the program is called Medi-Cal. Most beneficiaries are people with lower incomes and children, and these funding streams will directly impact the services for these populations, including physical and behavioral health services.
- The City of Berkeley has reviewed its current exposure to federal budget changes, and charted the expected and possible effects. While more information on the federal level continues to trickle out, the City is looking to prepare for various grant and revenue impacts to services.

Berkeley Mental Health Caseload Statistics for April 2025

Adult Services	Intended Ratio of staff to clients	Clinical Staff Positions Filled	# of clients open this month	Average Monthly System Cost Previous 12 Months	Fiscal Year 2025 (July '24-June '25) Demographics as of April 2025
Adult, Older Adult and TAY Full Service Partnership (AFSP) (Highest level outpatient clinical case management and treatment)	1-10 for clinical staff.	4 Clinicians, 2 Non-Licensed Clinician, 1 Clinical Supervisor	55	\$3,766	Clients: 59 API: 3 Black or African-American: 30 Hispanic or Latino: 1 White: 22 American Indian: 0 Other/Unknown: 3 Male: 36 Female: 19 Missing Gender ID: 0 Unknown: 1 He/Him: 2 They/Them: 1 Prefer Not to Answer Gen ID: 0 Multiple Gender ID: 0 Heterosexual: 47 Unknown: 9 Missing Sex Orient: 0 Bisexual: 0 Queer: 0 Prefer Not to Answer Sex Orient: 1 Multiple Sex Orient: 0 Gay: 1 Questioning: 1 Lesbian: 1
Adult FSP Psychiatry (April Stats)	1-100	0 FTE	45	\$2,037,600	
AFSP FY21 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)					
Homeless Full-Service Partnership (HFSP) (Highest level outpatient clinical case management and treatment)	1-8 for clinical staff	1 Clinicians, 2 Non-Licensed Clinician, 1 Clinical Supervisor	39	\$2,952	Clients: 41 API: 1 Black or African-American: 24 Hispanic or Latino: 1

Berkeley Mental Health Caseload Statistics for April 2025

						Other/Unknown: 1 White: 14 Male: 22 Female: 14 Missing Gender ID: 0 Unknown: 4 She/Her: 1 Heterosexual: 31 Missing Sex Orient: 0 Bisexual: 1 Unknown: 8 Gay: 0 Questioning: 0 Multiple Sex Orient: 0 Prefer Not to Answer: 1 Lesbian: 0
HFPS Psychiatry (April Stats)	1-100	0.5 FTE	19			
HFSP FY22 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)						
Comprehensive Community Treatment (CCT) (High level outpatient clinical case management and treatment)	1-20	7 Clinicians 1 Team Lead 1 Clinical Supervisor	166	\$1,408		Clients: 183 American Indian: 2 Asian: 13 Black or African-American: 74 Hispanic or Latino: 9 Other/Unknown: 11 Pacific Islander: 2 White: 72 Male: 77 Female: 79 He/Him: 10 She/Her: 7 Other Additional Gender Category: 6 Female to Male: 0 Gender Queer: 2 Prefer Not To Answer: 1 They/Them: 1 Unknown: 0
			TBD			

Berkeley Mental Health Caseload Statistics for April 2025

									Heterosexual Sex Orient: 129 Unknown: 26 Missing Sexual Orient: 0 Bisexual Sex Orient: 3 Lesbian Sex Orient: 4 Gay Sex Orient: 7 Prefer Not to Answer Sex Orient: 2 Multiple Sexual Orient: 0 Queer Sexual Orient: 4 Other Sexual Orient: 4
CCT Psychiatry (April Stats)	1-200		0.75 FTE	118					
CCT FY21 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)									
Focus on Independence Team (FIT) (Lower level of care, only for individuals previously on FSP or CCT)	1-20 Team Lead, 1-50 Post Masters Clinical 1-30 Non- Degreed Clinical		1 Clinician 1 CHW Sp./ Non- Degreed Clinical, 1 Clinical Supervisor	81	\$668				Clients: 86 API: 5 Black or African American: 30 Hispanic or Latino: 5 Other/Unknown: 0 White: 46 Male: 49 Female: 33 She/Her: 2 He/Him: 1 Intersex: 1 Heterosexual: 78 Unknown: 5 Missing Sexual Orient: 0 Prefer Not to Answer Sexual Orient: 2 Gay: 1 Multiple Sexual Orient: 0 Questioning: 0
FIT Psychiatry (April Stats)	1-200		.25	65					
FIT FY21 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)									
				\$900,451					

Family, Youth and Children's Services	Intended Ratio of staff to clients	Clinical Staff Positions Filled	# of clients open this month	Average Monthly System Cost Last 12 months	Fiscal Year 2025 (July '24-June '25) Demographics as of April 2025
Children's Full-Service Partnership (CFSP)	1-8	1 Senior Behavioral Health Clinician 1 Non-Licensed Clinician	9	\$2,739	Clients: 11 American Indian: 0 Asian: 1 Black or African-American: 7 Hispanic or Latino: 1 Other/Unknown: 2 White: 0 Female: 4 Male: 5 Missing Gender ID: 0 Unknown: 1 Non-Conforming Gender ID: 0 Heterosexual: 4 Missing Sexual Orient: 0 Bisexual: 2 Unknown/Not Available: 5 Gay: 0 Other Sexual Orient: 0 Questioning Sexual Orient: 0
CFSP Psychiatry (April Stats)	1-100	0	2		
CFSP FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)					
Early and Periodic Screening, Diagnostic and Treatment Prevention (EPSDT) / Educationally Related Mental Health Services (ERMHS)	1-20	2 Clinicians, 1 Clinical Supervisor	60	\$946	Clients: 66 American Indian: 2 Asian American: 1 Black or African-American: 25 Hispanic or Latino: 12 Other/Unknown: 16 White: 10 Female: 32 Male: 25 Missing Gender ID: 4 Unknown: 2 Multiple Gender ID: 0

							Non-Conforming Gender ID: 1 Prefer not to answer: 1 Other Gender ID: 0 Heterosexual: 36 Unknown: 11 Missing Sexual Orient: 4 Gay: 1 Multiple Sexual Orient: 0 Bisexual: 7 Lesbian: 1 Prefer Not to Answer: 1 Other Sexual Orient: 3 Queer Sexual Orient: 1 Questioning Sexual Orient: 1
ERMHS/EPSTD Psychiatry (April Stats)	1-100	0	8				
EPSTD/ERMHS FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)							
High School Health Center and Berkeley Technological Academy (HSHC)	1-6 Clinician (majority of time spent on crisis counseling)	1 Clinician, 1 Clinical Supervisor	Drop-in: 10 Externally referred: 10 Ongoing tx: 43 Groups: 6 Offered/ 6 Conducted				N/A
HSHC FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)							
\$396,106							

Crisis and ACCESS Services	Staff Ratio	Clinical Staff Positions Filled	Total # of Clients/Incidents	MCT Incidents Detail	Calendar Year 2024 (Jan '25- Dec '25) Demographics – From Mobile Crisis Incident Log (through April 2025)
Mobile Crisis (MCT)	N/A	2 Clinicians filled at this time	<ul style="list-style-type: none"> 52 - Incidents 13 - 5150 Evals 4 - 5150 Evals leading to involuntary transport 	<ul style="list-style-type: none"> 22 - Incidents: Location - Phone 18 - Incidents: Location - Field 0 - Incidents: Location - Home 	Clients: 141 API: 5 Black or African-American: 30 White: 37 Hispanic or Latino: 4 Other/Unknown: 65 Female: 61 Male: 66 Transgender: 2 Unknown: 12
MCT FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)					
			\$771,623		
Transitional Outreach Team (TOT)	N/A	.5 Licensed Clinician, (TOT and CAT have been recently merged)	<ul style="list-style-type: none"> 1 – Incident(s) 	N/A	Clients: 2 API: 0 Black or African-American: 0 White: 1 Hispanic or Latino: 0 Other/Unknown: 1 Female: 0 Male: 2 Transgender: 0 Unknown: 0
TOT FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)					
			\$272,323		
Crisis, Assessment, and Triage (CAT)	N/A	1 Non-Licensed Clinicians, .5 Licensed Clinician, 0 Clinical Supervisor	<ul style="list-style-type: none"> 68 - Incidents 	N/A	Clients: 110 API: 1 Black or African-American: 16 White: 26 Hispanic or Latino: 4 Other/Unknown: 63 Female: 45 Male: 45 Transgender: 0 Unknown: 20

**CAT FY21 Mental Health Division Estimated Budgeted Personnel Costs
(FY22 not yet available)**

\$735,075

Not reflected in above chart is Early Childhood Consultation, Wellness and Recovery Programming, or Family Support. In demographics, other/unknown is used both when a client indicates that they are multi-racial and when demographic info is not known.

*Average System Costs come from Yellowfin, and per ACBH include all costs to mental health programs, sub-acute residential programs, hospitals, and jail mental health costs.

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Wednesday, April 16, 2025 9:29 AM
To: Works-Wright, Jamie
Subject: FW: Spring 2025 Newsletter | CALBHB/C - Please Share with Board/Commission Members!

Hello Commission,

Please see the information below

Thank you for your time.

Jamie Works-Wright

Consumer Liaison & Mental Health Commission Secretary
 City of Berkeley
 2640 MLK Jr. Way
 Berkeley, CA 94704
JWorks-Wright@berkeleyca.gov
 Office: 510-981-7721 ext. 7721
 Cell #: 510-423-8365



From: CAL BHBC <cal@calbhbc.com>
Sent: Wednesday, April 16, 2025 8:07 AM
Subject: Spring 2025 Newsletter | CALBHB/C - Please Share with Board/Commission Members!

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.



**California Association of Local Behavioral Health
 Boards and Commissions**

Special Notes:

[Link to Newsletter](#)

Annual Reports - Please share your annual reports w/CALBHB/C - cal@calbhbc.com

CALBHB/C Nominations - Interested in a two-year position on CALBHB/C's 15-member Governing Board? Please complete the short nomination application by May 1st. [Link to Application](#)



**California Association of Local Behavioral Health
Boards and Commissions**

CALBHB/C Newsletter, Spring 2025

In this Issue:

[Grants/Funding](#)

[Issue Briefs](#)

[Reports & Webinars](#)

Board/Commission: [Resources](#)

State/National: [Meetings / Events](#)

[Welfare & Institutions Code](#) (Link to website)

CALBHB/C Meeting & Training

Zoom Registration is still open!

Friday, April 18, 1:30 pm - 5:30 pm - *Meeting*

Saturday, April 19, 9 am - 12 pm - *Training*

Please Register: www.calbhbc.org/registration

There is no fee to register.

Meeting Friday, April 18, 1:30 pm - 5:30pm

- Updates from Statewide Organizations
- Crisis Care Continuum Review
- Issue-Based Discussion: Local board/commission members are asked to introduce themselves and briefly discuss *local* successes and/or challenges related to behavioral health.

Training Saturday, April 19, 9 am - 12 pm

- How to be an Effective Behavioral Health Board/Commission
- Chair & Admin Training (All are welcome)

Please Register: www.calbhbc.org/registration



The California Association of Local Behavioral Health Boards/Commissions (CALBHB/C) supports the work of CA's 59 local Mental/Behavioral Health Boards and Commissions.

Website: www.calbhbc.org
Email: info@calbhbc.com

CALBHB/C supports the work of CA's 59 local Behavioral Health Boards and Commissions

Works-Wright, Jamie

From: Berkeley/Albany Mental Health Commission
Sent: Tuesday, April 15, 2025 1:48 PM
To: Works-Wright, Jamie
Subject: FW: 2024 Housing Trust Fund Request for Proposals for
Attachments: 2024 HTF RFP Commissions Memo_04-10-25.docx

Please see the information below and attached about the housing trust fund

Thank you for your time.

Jamie Works-Wright

Consumer Liaison & Mental Health Commission Secretary

City of Berkeley

2640 MLK Jr. Way

Berkeley, CA 94704

JWorks-Wright@berkeleyca.gov

Office: 510-981-7721 ext. 7721

Cell #: 510-423-8365



From: Chang, Lourdes
Sent: Thursday, April 10, 2025 3:42 PM
To: Chang, Lourdes <LChang@berkeleyca.gov>
Subject: 2024 Housing Trust Fund Request for Proposals for

[Internal](#)

Dear Commission Secretaries,

Please share with your Commissions the attached memorandum regarding the recent 2024 Housing Trust Fund Request for Proposals (RFP). The memo includes a link to the 2024 HTF RFP and summaries of the applications for funding we received. Feel free to email me with any questions.

Thank you,
 Lourdes

[Lourdes P. Chang](#)

Senior Community Development Project Coordinator
 City of Berkeley

Health, Housing & Community Services

Please send all messages addressed to my attention to: lchang@berkeleyca.gov

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Thursday, April 3, 2025 12:04 PM
To: Works-Wright, Jamie
Subject: Proclamation for the May is Mental Health Event
Attachments: Mental Health Commission May is Mental Health Awareness Month Letter to Berkeley City Council.pdf; Council MIMHM 2021 Resolution (002).docx; Council MIMHM Resolution 042815 sgmc edit.docx

Hello Commissioners,

In previous years the commission contribute to the May is Mental Health event by writing a proclamation to submit to the city council to be read at the event.

I am wondering if the commission is interest writing a resolution. I have attached a few proclamations that were done in the past, if you would like to reference back to see how it was done, please let me know. The deadline is approaching and I would have to submit to city council, hopefully with Council member Tregub's help.

Thank you for your time.

Jamie Works-Wright

Consumer Liaison & Mental Health Commission Secretary

City of Berkeley

2640 MLK Jr. Way

Berkeley, CA 94704

JWorks-Wright@berkeleyca.gov

Office: 510-981-7721 ext. 7721

Cell #: 510-423-8365



May 10, 2022

Mayor & Berkeley City Councilmembers
City Hall, 2180 Milvia Street
Berkeley, CA 94704

Re: Mental Health Commission Support for May is Mental Health Awareness Month

Dear Mayor and Berkeley City Councilmembers,

The Mental Health Commission for the City of Berkeley joins the national movement each year to support May as Mental Health Awareness Month. As a Commission, we fight stigma, provide support, educate the public, and advocate for policies that benefit people with mental illness and substance use disorder (SUD).

At our last Mental Health Commission Meeting, the Commission passed this letter to show its support for May is Mental Health Awareness Month and to send it to the Mayor and Berkeley City Councilmembers. The Mental Health Commission supports the federal government's May is Mental Health Awareness Month proclamation as:

"Mental health is essential to our overall health, and the importance of attending to mental health has become even more pronounced during the COVID-19 pandemic, which has not only negatively impacted many people's mental health but has also created barriers to treatment.

Millions of adults and children across America experience mental health conditions, including anxiety, depression, schizophrenia, bipolar disorder, and post-traumatic stress disorder. Nearly one in five Americans lives with a mental health condition. Those living with mental health conditions are our family, friends, classmates, neighbors, and coworkers.

The COVID-19 pandemic and the resulting economic crisis has impacted the mental health of millions of Americans. Isolation, sickness, grief, job loss, food instability, and loss of routines has increased the need for mental health services. At the same time, the need to protect people from COVID-19 has made it more challenging for people to access mental health services, and harder for providers to deliver this care.

Even before COVID-19, the prevalence of mental health conditions in our Nation was on the rise. In 2019, nearly 52 million adults experienced some form of mental illness. Recent data from the Centers for Disease Control and Prevention indicates that one in four adults reported experiencing symptoms of an anxiety or depressive disorder in February 2021 — a significant increase from the prior year. Youth mental health is also worsening, with nearly 10 percent of America's youth reporting severe depression. We must treat this as the public health crisis that it is and reverse this trend.

Too many people with mental health needs feel they have nowhere to turn. Suicide is the tenth leading cause of death in the United States and the second leading cause of death for our Nation's youth today. Suicide rates are disproportionately high among Black youth, and LGBTQI+ persons are at disproportionate risk of death by suicide as well as suicidal ideation, planning, and attempts."

Thus, the Mental Health Commission supports National Mental Health Awareness Month, and calls upon "citizens, government agencies, organizations, healthcare providers, and research institutions to raise mental health awareness and continue helping Americans live longer, healthier lives."

Very truly yours,
Mental Health Commission for the City of Berkeley



Office of the City Manager

CONSENT CALENDAR

May 11, 2021

To: Honorable Mayor and Members of the City Council

From: Mental Health Commission

Submitted by: Councilmember Terry Taplin

Subject: Proclaiming May 2021 as Mental Health Month

RECOMMENDATION

Adopt a Resolution proclaiming May 2021 as Mental Health Month in the City of Berkeley.

FISCAL IMPACTS OF RECOMMENDATION

None.

CURRENT SITUATION AND ITS EFFECTS

The Substance Abuse and Mental Health Services Administration (SAMHSA) has determined that persons diagnosed with severe mental illness have a life expectancy of 25 years less than members of the general public. Through their National 10 x 10 Campaign they are bringing awareness to this devastating fact and have pledged to decrease that disparity by ten years in the next ten years. In the City's Mental Health Division many mental health clients also have co-occurring addiction disorders, exacerbating existing barriers to recovery and increasing the disparity in their life expectancy.

Mental Health America, an organization working to improve the mental health of all Americans, began observance of Mental Health Month during the month of May in 1949. Their primary goal was to promote awareness of mental health conditions and mental wellness for all. Local government agencies, public and private institutions, businesses and schools join in this annual campaign to raise public awareness and understanding of mental health and illness, and to reduce the stigma associated with mental health problems and treatment. Council is requested to join in this national campaign in order to promote increased awareness of mental health and mental disabilities in the City of Berkeley.

BACKGROUND

The mental health and well-being of the City of Berkeley's residents is a critical issue that affects not only quality of life, but also the health of our communities, families, and economic stability. Mental disorders and mental health problems affect residents of all backgrounds and all stages of life, and no one is immune from its affects. The World

Health Organization (WHO) found that mental illnesses is the top ranking cause of disability in the United States and the most prevalent health problem in America today – more common than cancer, lung and heart disease combined. Nationally, one in four adults lives with a diagnosable, treatable mental health condition. According to WHO, in a typical workplace with 20 employees, four will likely develop a mental illness this year. More than three out of four employees who seek care for workplace issues or mental health problems see substantial improvement in work performance after treatment. Although mental health treatment has been shown to be effective, an estimated two-thirds of adults and young people with mental health challenges are not receiving the care they need to improve their lives significantly.

Socioeconomic inequalities and disparities in health have been widening for decades. In the United States, the data consistently show that people living in poverty, and particularly those who are members of minority communities, bear a disproportionate burden of exposure to unhealthy environments and are at greater risk for mental and behavioral health-related conditions. The Health, Housing & Community Services (HHCS) Mental Health Division has recently initiated a Health Equity Committee to assess and address inequities in access to mental health services.

The City of Berkeley Mental Health Division has been engaged in Mental Health Services Act (MHSA) planning and implementation in recent years, with the intent to identify areas of greatest need and to increase effective mental health services that promote mental health recovery. The Mental Health Division will continue to participate in a comprehensive and inclusive planning process to transform services provided by the Mental Health Division in alignment with core MHSA principles.

To strengthen the Berkeley community, the Mental Health Division also provides Mental Health First Aid training to enable community members to better assist their friends, family and neighbors who may have signs and symptoms of a mental health crisis or illness. The Mental Health First Aid Training teaches participants how to use a 5-step action plan to help connect a person in distress to appropriate professional, peer, social or self-help care.

The basis for a Citywide May is Mental Health Month proclamation is to increase awareness of the importance of mental health, and that mental health and physical health go hand-in-hand. This awareness helps to demonstrate commitment and support to Berkeley residents who have a mental illness and their families. This event also promotes hope and encourages those with mental illness to recover and become productive members of the community.

The Mental Health Division and the Berkeley/Albany Mental Health Commission are hosting a “May Is Mental Health Month” celebration entitled: Covid-19: Changes, Hope and Resiliency “Increasing Community Mental Health and Wellness. The free be held Virtual event will be on Wednesday, May 26 from 5:30-7:30pm virtually using zoom. The

program will include presentations, revealing of the New Berkeley Mental Health Clinic information sharing, entertainment, and prizes. Community achievement awards will be presented.

At its March 25, 2021 meeting, the Mental Health Commission passed the following motion:

Review Recommendation to City Council to declare “May is Mental Health Month”
M/S/C (cheema, Opton) Move the motion on page 21 the Resolution Proclaiming May 2021 is May is Mental Health Month.
PASSED

Ayes: Blanton, cheema, Fine, Opton, Prichett Noes: None; Abstentions: None; Absent: Moore, Taplin

ENVIRONMENTAL SUSTAINABILITY

There are no identifiable environmental effects or opportunities associated with the subject of this report.

RATIONALE FOR RECOMMENDATION

Proclaiming May as Mental Health Month offers us the opportunity to bring awareness that treatment for mental health problems is effective, that the successes of people in recovery are often remarkable, and to acknowledge men and women in the field who dedicate their lives to help people with psychiatric disabilities and other mental health problems.

ALTERNATIVE ACTIONS CONSIDERED

None.

CONTACT PERSON

Terry Taplin, City Councilmember, District 2, 981-7120
Jamie Works-Wright, Commission Secretary, Health, Housing & Community Services, 981-7721

Attachments:

1: Resolution PROCLAIMING MAY 2021 AS MENTAL HEALTH MONTH

RESOLUTION NO. ##,###-N.S.

PROCLAIMING MAY 2021 AS MENTAL HEALTH MONTH

WHEREAS, mental health is essential to everyone's overall health, productivity and well-being; and

WHEREAS, one in four American adults are affected by a mental illness; and

WHEREAS, mental health problems do not discriminate; they affect people regardless of race, creed, age, life style, or economic status; and

WHEREAS, Mental Health Recovery is possible with proper treatment and support empowering mental health consumers to lead full and productive lives; and

WHEREAS, as many as eight million Americans who have serious mental illnesses do not receive adequate treatment each year; and

WHEREAS, people who have untreated mental health issues use more general health services than those who receive mental health services when they need them; and

WHEREAS, The Substance Abuse and Mental Health Services Administration (SAMHSA) has determined that persons with severe mental illness have a life expectancy of 25 years less than members of the general public; and

WHEREAS, more than 50% of persons receiving treatment in the mental health system also have Co-Occurring Disorders compounding their barriers to recovery and increasing the disparity in their life expectancy; and

WHEREAS, the City of Berkeley has made a commitment to community-based systems of mental health care in which all residents can receive high-quality and consumer-centered services; and

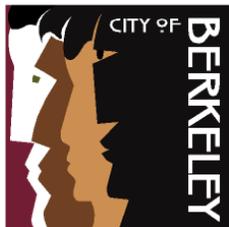
WHEREAS, Mental Health First Aid training is available in Berkeley to enable community members to better assist their friends, family and neighbors who may have signs and symptoms of mental illness or be in a crisis; and

WHEREAS, the City of Berkeley has been actively involved in the planning and implementation of the Mental Health Services Act to increase effective mental health services that promote Mental Health Recovery in Berkeley; and

WHEREAS, we commend the Mental Health Division, for their outstanding work improving the quality of life for mentally disabled individuals in our community; and

WHEREAS, Mental Health America observes Mental Health Month every May to raise awareness and understanding of mental health and illness.

NOW THEREFORE, BE IT RESOLVED that I, Jesse Arreguin, Mayor of the City of Berkeley, do hereby proclaim May 2021 as Mental Health Month in the City of Berkeley and call upon all Berkeley citizens, government agencies, public and private institutions, businesses and schools to recommit our community to increasing awareness and understanding of mental illness and the need for appropriate and accessible services for all people with mental illnesses.



Office of the City Manager

CONSENT CALENDAR

April 28, 2015

To: Honorable Mayor and Members of the City Council

From: Mental Health Commission

Submitted by: Paul Kealoha-Blake, Chair

Subject: Proclaiming May 2015 as Mental Health Month

RECOMMENDATION

Adopt a Resolution proclaiming May 2015 as Mental Health Month in the City of Berkeley.

FISCAL IMPACTS OF RECOMMENDATION

None.

CURRENT SITUATION AND ITS EFFECTS

The Substance Abuse and Mental Health Services Administration (SAMHSA) has determined that persons diagnosed with severe mental illness have a life expectancy of 25 years less than members of the general public. Through their National 10 x 10 Campaign they are bringing awareness to this devastating fact and have pledged to decrease that disparity by ten years in the next ten years. In the City's Mental Health Division many mental health clients also have co-occurring addiction disorders, exacerbating existing barriers to recovery and increasing the disparity in their life expectancy.

Mental Health America, an organization working to improve the mental health of all Americans, began observance of Mental Health Month during the month of May in 1949. Their primary goal was to promote awareness of mental health conditions and mental wellness for all. Local government agencies, public and private institutions, businesses and schools join in this annual campaign to raise public awareness and understanding of mental health and illness, and to reduce the stigma associated with mental health problems and treatment. Council is requested to join in this national campaign in order to promote increased awareness of mental health and mental disabilities in the City of Berkeley.

BACKGROUND

The mental health and well-being of the City of Berkeley's residents is a critical issue that affects not only quality of life, but also the health of our communities, families, and economic stability. Mental disorders and mental health problems affect residents all backgrounds and all stages of life, and no one is immune from its affects. The World

Health Organization (WHO) found that mental illnesses is the top ranking cause of disability in the United States and the most prevalent health problem in America today – more common than cancer, lung and heart disease combined. Nationally, one in four adults lives with a diagnosable, treatable mental health condition. According to WHO, in a typical workplace with 20 employees, four will likely develop a mental illness this year. More than three out of four employees who seek care for workplace issues or mental health problems see substantial improvement in work performance after treatment. Although mental health treatment has been shown to be effective, an estimated two-thirds of adults and young people with mental health challenges are not receiving the care they need to improve their lives significantly.

Socioeconomic inequalities and disparities in health have been widening for decades. In the United States, the data consistently show that people living in poverty, and particularly those who are members of minority communities, bear a disproportionate burden of exposure to unhealthy environments and are at greater risk for mental and behavioral health-related conditions.

The 2013 Berkeley Health Status Report Summary identifies discrepancies in health outcomes between white and African American residents and states that the City of Berkeley is committed to addressing and eliminating health inequities.

The City of Berkeley has been engaged in Mental Health Services Act (MHSA) planning and implementation in recent years, with the intent to identify areas of greatest need and to increase effective mental health services that promote mental health recovery. The Mental Health Division will continue to participate in a comprehensive and inclusive planning process to transform services provided by the Mental Health Division in alignment with core MHSA principles.

To strengthen the Berkeley/Albany community, the City of Berkeley is currently offering Mental Health First Aid training to enable community members to better assist their friends, family and neighbors who may have signs and symptoms of mental illness or be in a crisis. The Mental Health First Aid Training teaches participants how to use a 5-step action plan to help connect a person in distress to appropriate professional, peer, social or self help care.

The basis for a Citywide May is Mental Health Month proclamation is to increase awareness of the importance of mental health, and that mental health and physical health go hand-in-hand. This awareness helps to demonstrate commitment and support to Berkeley/Albany residents who have a mental illness and their families. This event also promotes hope and encourages those with mental illness to recover and become productive members of the community.

Berkeley Mental Health is hosting a “May Is Mental Health Month” celebration: “Each Person Matters – Road Maps to Wellness” on Saturday, May 2, 2015 from 1 - 4 pm at the South Berkeley Senior Center.

At its March 26, 2015 meeting, the Mental Health Commission passed the following motion:

M/S/C (Grossman, Arreguin) The Mental Health Commission recommends that City Council declare May 2015 as Mental Health Month.

Ayes: Arreguin, Davis, Fazio, Grossman, Heda, Kealoha-Blake, Marasovic, Michel, Posey; Noes: None; Abstentions: None; Absent: Dixon, Kerr.

ENVIRONMENTAL SUSTAINABILITY

There are no identifiable environmental effects or opportunities associated with the subject of this report.

RATIONALE FOR RECOMMENDATION

Proclaiming May as Mental Health Month offers us the opportunity to bring awareness that treatment for mental health problems is effective, that the successes of people in recovery are often remarkable, and to acknowledge men and women in the field who dedicate their lives to help people with psychiatric disabilities and other mental health problems.

ALTERNATIVE ACTIONS CONSIDERED

None.

CONTACT PERSON

Paul Kealoha-Blake, Commission Chair
Carol Patterson, Commission Secretary, Health, Housing & Community Services, 981-7721

Attachments:

1: Resolution PROCLAIMING MAY 2015 AS MENTAL HEALTH MONTH

RESOLUTION NO. ##,###-N.S.

PROCLAIMING MAY 2015 AS MENTAL HEALTH MONTH

WHEREAS, mental health is essential to everyone's overall health, productivity and well-being; and

WHEREAS, one in four American adults are affected by a mental illness; and

WHEREAS, mental health problems do not discriminate; they affect people regardless of race, creed, age, life style, or economic status; and

WHEREAS, Mental Health Recovery is possible with proper treatment and support empowering mental health consumers to lead full and productive lives; and

WHEREAS, as many as eight million Americans who have serious mental illnesses do not receive adequate treatment each year; and

WHEREAS, people who have untreated mental health issues use more general health services than those who receive mental health services when they need them; and

WHEREAS, The Substance Abuse and Mental Health Services Administration (SAMHSA) has determined that persons with severe mental illness have a life expectancy of 25 years less than members of the general public; and

WHEREAS, more than 50% of persons receiving treatment in the mental health system also have Co-Occurring Disorders compounding their barriers to recovery and increasing the disparity in their life expectancy; and

WHEREAS, the City of Berkeley has made a commitment to community-based systems of mental health care in which all residents can receive high-quality and consumer-centered services; and

WHEREAS, Mental Health First Aid training is available in Berkeley to enable community members to better assist their friends, family and neighbors who may have signs and symptoms of mental illness or be in a crisis; and

WHEREAS, we commend the Mental Health Division, for their outstanding work improving the quality of life for mentally disabled individuals in our community; and

WHEREAS, the City of Berkeley has been actively involved in the planning and implementation of the Mental Health Services Act to increase effective mental health services that promote Mental Health Recovery in Berkeley; and

WHEREAS, Mental Health America observes Mental Health Month every May to raise awareness and understanding of mental health and illness.

NOW THEREFORE, BE IT RESOLVED that I, Tom Bates, Mayor of the City of Berkeley, do hereby proclaim May 2015 as Mental Health Month in the City of Berkeley and call upon all Berkeley citizens, government agencies, public and private institutions, businesses and schools to recommit our community to increasing awareness and understanding of mental illness and the need for appropriate and accessible services for all people with mental illnesses.

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Wednesday, April 2, 2025 4:17 PM
To: Works-Wright, Jamie
Subject: Agenda Items for April

Hello Commissioners,

The next commission meeting will take place on Thursday, April 24 from 7-9pm.

If you would like to have any items discussed and/or motioned at the next meeting, please submit your item to me by **Monday, April 7th**, if you would like to have any item in the packet, please submit by **Monday, April 14th**

If you would like Jeff to address any topic in his report please send your questions or request **by April 10th**.

Thank you for your time and adhering to the request and deadlines.

Jamie Works-Wright

Consumer Liaison & Mental Health Commission Secretary

City of Berkeley

2640 MLK Jr. Way

Berkeley, CA 94704

JWorks-Wright@berkeleyca.gov

Office: 510-981-7721 ext. 7721

Cell #: 510-423-8365



Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Tuesday, March 25, 2025 9:41 AM
To: Works-Wright, Jamie
Cc: Buell, Jeffrey; Gilman, Scott; Buddenhagen, Paul; Ishii, Adena
Subject: FW: City of Berkeley Specialized Care Unit

Hello Commissioners and City Staff,

Please see the message below from Commissioner Opton

Thank you for your time.

Jamie Works-Wright

Consumer Liaison & Mental Health Commission Secretary
 City of Berkeley
 2640 MLK Jr. Way
 Berkeley, CA 94704
JWorks-Wright@berkeleyca.gov
 Office: 510-981-7721 ext. 7721
 Cell #: 510-423-8365



From: Edward Opton <eopton1@gmail.com>
Sent: Sunday, March 23, 2025 11:06 PM
To: Works-Wright, Jamie <JWorks-Wright@berkeleyca.gov>
Subject: City of Berkeley Specialized Care Unit

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.

To: Jamie Works-Wright
 From: Edward Opton

Please circulate this e-mail to members of Berkeley's Behavioral Health Commission, to managers of Berkeley's Behavioral Health agency, and to the City Manager.

I write to advise of a problematic advertisement published on behalf of our city's behavioral health agency:

"NEW NUMBER for NON-POLICE emergencies
 510-948--0075

Hey Berkeley! Do you have an emergency that is not life-threatening, one that does not require use of police force? **SO, DO THE RIGHT THING!** Call Berkeley's new Specialized Care Unit (SCU) for a more compassionate response to someone in a mental health crisis. *Clip & Save this notice!"*

Berkeley published the ad in the *Berkeley Times*, March 13, 2025, p. 5.

I appreciate our city's efforts to advise the public of the potentially valuable services offered by the SCU. Unfortunately, the ad misrepresents--intentionally or otherwise--the most important facts about the Specialized Care Unit's most controversial design feature.

The Behavioral Health Commission has been told that calls to the Specialized Care Unit will be routed to Berkeley's "Dispatch." Dispatch's primary responsibility, its most important duty, is to send police officers to crime scenes: especially sites of interpersonal violence, actual, alleged, or threatened crimes, other breaches of the peace, suspicious behaviors, public disorders, destruction of property, and the like. Police officers may be the only city employees authorized to use deadly weapons.

Naturally, most people are reluctant to call for armed intervention into volatile situations, especially when the presence of lethal weapons could escalate into serious injury or death. Reluctance to risk turning a family argument into a potential crime scene is especially understandable when the problematic person(s) are relatives, e.g., a child, parent, husband, or wife. Overcoming that reluctance is the rationale for our city's advertisement of the Specialized Care Unit's services. The ad leads readers to expect a "more compassionate" response, i.e., an unarmed and, therefore, a non-police-officer response. The ad misleadingly omits the fact that the key decision will not be a decision by the caller. The key decision is to send an armed police officer, a mental health worker, both, or neither. That decision will be made by a dispatcher--a dispatcher who works in the same unit that sends officers to scenes of actual or potential criminal violence. The ad implies that the caller can request *and obtain* a response that does not include the presence of lethal weapons. That implication is the main point of the ad, and it is misleading.

The ad also omits information that is likely to be important for persons requesting assistance: dispatchers experience *personal* incentives to send armed police. If a police officer wounds or kills a problematic person, no blame should fall on the dispatcher and none will. But if the dispatcher decides not to send an armed officer, any violence may--and probably will--lead to troubling questions about the dispatcher's decision. Why did the dispatcher *not* dispatch a police officer to a potentially violent scene? Even if the caller requested a non-police response, it was the dispatcher who exercised her judgment not to dispatch a police officer, and if serious violence followed, it was her judgment that events proved had been mistaken. Has a dispatcher ever been disciplined for sending an armed officer into a situation that ended in violence? Not likely. Might a dispatcher be criticized, or even disciplined, for failing to dispatch an armed responder to a scene that she knew could have a violent ending? Of course. At a minimum, making a decision that ended badly would be personally painful for the dispatcher.

In short: the advertisement misstates the most salient facts.

Berkeley should not mislead the public.

It is unfortunate that the Behavioral Health Commission has not been included in the many months of discussions by Berkeley city agencies concerning the Specialized Care Unit.

Although these comments come from a member of the Behavioral Health Commission, the Commission has not yet had an opportunity to discuss the issues raised in this letter. It is my hope that Berkeley will allow the Commission to participate in future discussions of the Specialized Care Unit as well as other policy issues that inevitably confront the City's mental health efforts.

Edward Opton
eopton1@gmail.com

510-524-6858
1428 Cornell Avenue, Berkeley 94702

Works-Wright, Jamie

From: Works-Wright, Jamie
Sent: Tuesday, March 25, 2025 9:33 AM
To: Works-Wright, Jamie
Subject: FW: BHC membership criteria

Hello Commissioner,

Please see the information below from Commissioner Opton.

Thank you for your time.

Jamie Works-Wright

Consumer Liaison & Mental Health Commission Secretary

City of Berkeley

2640 MLK Jr. Way

Berkeley, CA 94704

JWorks-Wright@berkeleyca.gov

Office: 510-981-7721 ext. 7721

Cell #: 510-423-8365



From: Edward Opton <eopton1@gmail.com>
Sent: Saturday, March 22, 2025 12:06 AM
To: Works-Wright, Jamie <JWorks-Wright@berkeleyca.gov>
Subject: Re: BHC membership criteria

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.

3/21/25

To: Jamie Works-Wright

Please circulate the memo below to the members of the Behavioral Health Commission (BHC) and to others who may be interested.

Edward Opton
 Member, BHC

3/21/25

To: Members, Behavioral Health Commission
Re: Commission Membership Criteria

BHC Secretary Works-Wright's memo to BHC commissioners (3/20/25, March agenda packet pp. 26-27) helpfully spells out a number of requirements that will complicate our efforts to revise the rules for recruiting and selecting new BHC members. The requirements are multiple, and to make the task even more complex, they don't include some of the most important items that must be on the list, whether spelled out or implicit, such as the ability to work well with others and to communicate effectively.

Our task--to revise the membership criteria--is complex. Can any of us imagine succeeding within the very limited time of a monthly two-hour meeting or even a series of such meetings? Instead, let's create a subcommittee to take up the task and to bring back at least one comprehensive recommendation and, preferably, some alternative recommendations.

Edward Opton