



Health, Housing & Community Services  
Mental Health Commission

To: Mental Health Commissioners  
From: Jamie Works-Wright, Commission Secretary  
Date: September 17, 2024

**Documents Pertaining to 9/26/24 Agenda items:**

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Health, Housing & Community  
Service Department  
Mental Health Commission

## Berkeley/ Albany Mental Health Commission

### AGENDA

**Regular Meeting**  
**Thursday, September 26, 2024**

*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.*

**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 September 26, 2024 meeting agenda
  - b. Public Comment (non-agenda items)
  - c. Action Item: to Approve the July 25, 2024 minutes
- 3. Specialized Care Unit (SCU) Update – Katie Hawn**
- 4. Cares First, Jails Last update – Sasha Gayle-Schneider**
- 5. Interview and vote on nomination of Maria Sol to the Mental Health Commission**
- 6. Interview and vote on nomination of Ashley (Jiahao) Gu to the Mental Health Commission**
- 7. Mental Health Manager’s Report and Caseload Statistics – provided by Jeff Buell**
  - a. MHC Manager Report September
  - b. Caseload Statistic September 2024
- 8. Subcommittee Reports**
  - a. **Membership Subcommittee**
    - i. **Discuss new application changes and WIC requirements**
  - b. **Evaluation Subcommittee**



Health, Housing & Community  
Service Department  
Mental Health Commission

- c. **Berkeley's participant in reorganization and, potentially, to make recommendations concerning Berkeley's implementation of the reorganization**

## 9. 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.

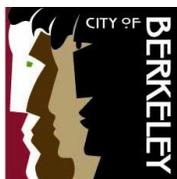
Contact person: Jamie Works-Wright, Mental Health Commission Secretary (510) 981-7721 or [Jworks-wright@berkeleyca.gov](mailto:Jworks-wright@berkeleyca.gov)



**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. Thankyou.**

### **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  
July 25, 2024

**Members of the Public Present:** Maria Sol, Jose Rios, Ann Hawkins, Lillian Gates-Tilles, Lorry L.

**Staff Present:** Jeff Buell, Karen Klatt, Jamie Works-Wright

### 1) Call to Order at 7:05 pm

**Commissioners Present:** Andrea Prichett, Monica Jones (Chair), Cecilia Lunaparra, Edward Opton, Glenn Turner (Vice Chair) **Absent:** Ajay Krishnan

### 2) Preliminary Matters

#### a) Approval of the July 25, 2024 agenda

**M/S/C (Opton, Jones)** Move to approve the agenda

**PASSED**

**Ayes:** Jones, Lunaparra, Prichett, Opton, Turner **Noes:** None; **Abstentions:** None; **Absent:** Krishnan

#### b) Public Comment- 1 public comments

#### c) Approval of the June 27, 2024 Minutes

**M/S/C (Opton, Krishnan)** Motion that we move to approve the June 27, 2024 minutes

**PASSED**

**Ayes:** Jones, Lunaparra, Opton, Turner **Noes:** None; **Abstentions:** Prichett; **Absent:** Krishnan

\*Motion to extend the meeting by 10 minutes to 9:10

**M/S/C (Prichett, Opton)**

**Ayes:** Lunaparra, Prichett, Opton, Turner **Noes:** Jones; **Abstentions:** None; **Absent:** Krishnan

### 3) Public Hearing - MHSA Fiscal Year 2025 Annual Update – Karen Klatt

**M/S/C (Prichett, Opton)** The Mental Health Commission approves the overall MHSA Annual budget with modifications. The Mental Health Commission recommends that the

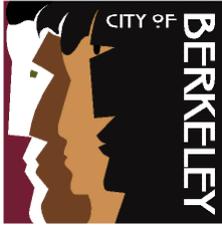
\$600,000 for the Encampment based Mobile Wellness Center be reconsidered and these funds reallocated to support the needs of the unhoused people. This funding shall be contingent upon a public hearing that includes community input with service users and providers and that a plan be developed for its effective use. The Mental Health Commission also recommends that the Mobile Crisis Team be funded through BDP (Berkeley Police Department) and overseen by the Mental Health Department.

**PASSED**

**Ayes:** Jones, Lunaparra, Prichett, Opton, Turner **Noes:** None; **Abstentions:** None; **Absent:** Krishnan

- 4) **Review, edit and vote for approval of the letters written to the City Auditor by Edward Opton** - Did not get to item
- 5) **Discussion and review of Berkeley Side article about "Berkeley returns \$400,000 in housing funds meant for homeless hotel". Write and vote on an opinion to be sent to the city manager, city council and/or Berk MH division – Glenn Turner** - Did not get to item
- 6) **Mental Health Manager's Report and Caseload Statistics – provided by Jeff Buell** - Did not get to item
  - a) MHC Manager Report July
  - b) Caseload Statistic July 2024
- 7) **Subcommittee Reports – Did not get to items**
  - a. **Membership Subcommittee**
  - b. **Evaluation Subcommittee**
  - c. **Berkeley's participant in reorganization and, potentially, to make recommendations concerning Berkeley's implementation of the reorganization**
- 8) **Adjournment – 9:07 PM**  
**M/S/C (Jones, Opton) Motion to adjourn the meeting**  
**PASSED**  
**Ayes:** Jones, Lunaparra, Opton, Prichett, Turner **Noes:** None; **Abstentions:** None;  
**Absent:** Krishnan

**Minutes submitted by:** \_\_\_\_\_  
 Jamie Works-Wright, Commission Secretary



Health Housing and  
Community Services Department  
Office of the Director

## MEMORANDUM

**To:** Mental Health Commission  
**From:** Katherine “Katie” Hawn, Special Projects Coordinator  
**Date:** 9/17/2024  
**Subject:** Specialized Care Unit Update Report

### Specialized Care Unit Update Report

Please find the attached report on Specialized Care Unit (SCU) services from July 1 through August 31. This report contains multiple updates including:

- SCU program update including services provided
- SCU Steering Committee Handover to the Mental Health Commission

### SCU General Program Updates

The Specialized Care Unit currently operates 24 hours per day on Sundays through Tuesdays. The SCU operates from 12am to 4pm and 8pm through 11:59pm on Wednesdays through Saturdays. The SCU can be reached by calling (510) 948-0075. Additional program updates are below:

- A) SCU continues to recruit, hire, and train staff to fully ramp up to the 24 hour, 7 days per week model. Bonita House expects to have the SCU program operating at full capacity this summer.
- B) Bonita House continues to refine their data collection procedures to assist the City with grant reporting, as well as answer questions about the services the team provides. The following data was collected from July and August 2024. Please note that some numbers have been aggregated according to healthcare privacy regulations.
  - a. The SCU received 163 calls in July and 136 calls in August. In July, the SCU team responded to 90 calls in the field, and 82 calls in the field in August. Some calls can be resolved over the phone or are not appropriate for an SCU response (i.e. better suited to 911).
  - b. In July and August combined, the SCU responded to 17 calls that included law enforcement. This also includes calls where both law enforcement and

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the SCU showed up on the scene and calls that were escalated to law enforcement.

- c. In July and August, the SCU wrote a total of 14 5150/5585 holds for clients.
- d. The SCU provided a variety of services to clients. In July and August, this included transportation to John George, Alta Bates, and Amber House among other locations.
- e. The SCU also received referrals for clients from 988 and 911. The SCU received less than 11 referrals from 988 and less than 11 referrals from 911.

### Handoff of the SCU Steering Committee to the Mental Health Commission

The SCU Steering Committee was established in 2021 by former HHCS Director, Dr. Lisa Warhuus. The Steering Committee's scope included working collaboratively to conduct the community engagement process for the design of the Specialized Care Unit, propose a program design based on these results, and ensure launch of a pilot program that aligned with the plan set forth by the Steering Committee. The SCU Steering Committee has been exceptionally successful in reaching its goals. Designing the SCU and bringing the program to fruition would not have been possible without the time, dedication, and expertise of the SCU Steering Committee members.

Since 2021, the Steering Committee has been made up of a combination of community members and City of Berkeley staff. Community representation includes the Berkeley Mental Health Commission, Berkeley Community Safety Coalition, Lifelong Medical, Consider the Homeless, and other advocacy and care-based organizations in Berkeley. City representation includes staff from HHCS, including the Mental Health Division as well as the Berkeley Fire Department and City Manager's Office. Once contracted with the City, Bonita House crisis program leadership also joined the Steering Committee.

The Steering Committee provided valuable feedback and insight throughout three important phases of the SCU project:

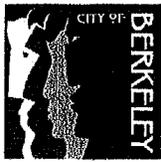
1. Design: Steering Committee members worked closely with Resource Development Associates (RDA) on the design documents for the SCU and provided detailed analysis on each recommendation to ensure a customized non-police crisis response program for Berkeley.
2. Selecting a Provider: The Steering Committee reviewed and provided feedback for the Request for Proposals that was released to community providers. Additionally, multiple members from the Steering Committee served on the review panel, eventually selecting Bonita House as the provider.

3. Ramp-Up Implementation: Once Bonita House was selected as the SCU provider, the Steering Committee provided feedback to operational procedures regarding how the SCU operates in the field to support clients as well as coordinate with other first responders. Additionally, the Steering Committee has shared personal experiences with the SCU in the field, including praise for how services are provided, and important suggestions for improvement.

Now that the SCU is fully functional and embarking on the evaluation process, HHCS will prioritize expanding community input by working with pre-existing Commissions and meetings to provide updates about the SCU's progress as well as gather feedback about the program. This includes these monthly updates to the Mental Health Commission and participation in the Reimagining Public Safety updates every six months. The Steering Committee has provided significant feedback and direction to this process, and many members will continue to do so through their representation in these public spaces.

Applicant's Name \_\_\_\_\_

Mental Health Commissioner Applicant Criteria	Application	Interview
<b>Interest</b> - Demonstrates interest in community mental health services		
<b>Commitment</b> - Ready to commit to Commission duties; preparation & attendance at meetings; timely paperwork		
<b>Diversity</b> - Reflects the diversity of the community		
<b>Cooperation</b> - Able to constructively handle conflict & differences of opinion		
<b>Welcoming</b> - Willing and able to work alongside consumers, family members & diverse members		
<b>Effective</b> - Able to work with City staff, management & Berkeley & Albany City Councils		



APPLICATION FOR APPOINTMENT TO BERKLEY/ALBANY MENTAL HEALTH COMMISSION

NAME: MARIA SOL

PREFERRED PRONOUN(S):

Residence Address: 2650 DELAWARE #206 BIRK 94709

Business Name/Address: Street City Zip

Occupation/Profession:

Business Phone: Home Phone:

Email address: MEGAMOM.MS@GMAIL.COM

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:

Table with 3 columns: NAME, ADDRESS, PHONE NO. containing names like LESLIE BERKLER and ELIZABETH MORRIS.

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.

APPLICATION FOR APPOINTMENT TO  
BERKLEY/ALBANY MENTAL HEALTH COMMISSION

Name: MARIA SOL

I have been a resident of Berkeley / Albany since: 1981  
(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: Maria Sol Date: 8/1/24

AFFIDAVIT OF RESIDENCY

I, MARIA SOL, 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: Maria Sol Date: 8/1/24

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
- 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 HAVE BEEN A DIRECT CONSUMER OF MENTAL HEALTH SUPPORT ALONG WITH MEMBERS OF MY FAMILY + COMMUNITY... AND I HAVE STUDIED + PROVIDED SUCH SERVICES.**
2. Are you involved in other community activities? If so, which ones? **HUMAN WELFARE + COMMUNITY ACTION COMMISSIONER  
GRAY PANTHERS BOARD MEMBER  
FOOD DISTRIBUTION  
"HOMELESS" PREVENTION/MITIGATION/SUPPORT/ADVOCACY**
3. What, in your opinion, are the most important mental health issues in Berkeley and/or Albany? **NEGLECT + LACK OF SUPPORT/VALUE/  
PREJUDICE + DISPARAGEMENT + ALIENATION + TRAUMA!  
(unaddressed + repeated!) DECREASED SERVICES +  
INCREASED HURDLES TO GET ACCESS TO + CARE...!**
4. What do you recommend doing about them? **SEE VALUE + POTENTIAL!  
PREVENT HARM INCREASE CONNECTION + LISTEN!  
PROVIDE REAL SUPPORT + BASIC NEEDS THEN  
BETTER INFO + COORDINATED WRAP AROUND SERVICES!  
SIMPLE EFFICIENT RESPONSE TO COMMUNITY INPUT + CAPACITY!**
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? **GIVEN I HAVE PERSONAL DIRECT  
LIVED EXPERIENCE + HAVE ENGAGED FOLK  
FROM COAST TO COAST MY WHOLE LIFE I HAVE  
LOTS OF EXPERIENCE/"KNOWLEDGE" + COMMITMENT TO  
THE BEST IN FOR + WITH EVERY ONE!!**
6. What unique contributions (work experience, education, attributes and training) do you have to make to the Mental Health Commission? **COLLEGE MAJOR IN  
PSY + SOC... WORK IN STATE HOSPITALS  
SHELTERS + SHELTER PROGRAMS + "BATTERED" WOMEN  
ADVOCATE FOR MAXIMUM HEALTH + WELL BEING!!**

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

(Thank You!!)



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

Thank you for your interest in improving community mental health in Berkeley and Albany. Below is some important information about the Berkeley/Albany Mental Health Commission you should 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/Albany Mental Health Commission is composed of mental health consumers, family members of consumers and Berkeley/Albany residents with a broad range of disciplines, professions and fields of knowledge.

### **Composition of the Commission**

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

To meet state requirements, more than half the seats are designated as Special Public Interest. Special Public Interest members shall be consumers or the parents, spouses, siblings or adult children of consumers who are receiving or have received mental health services from a City or County Program or any of its contract agencies, a state hospital, or any private nonprofit mental health agency. This helps to ensure that people who are impacted by mental health services have a voice in the oversight process.

The specific membership of the Commission is as follows: (a) one member of the Commission is the Mayor or a City Council designee, (b) two shall be residents of the City of Albany (at least one Special Public Interest), and (c) the remaining members shall be residents of the City of Berkeley. Of the total membership, at least seven members of the Commission shall be Special Public Interest, with at least 20% of the total Commission members direct consumers and at least 20% family members. The remaining Commission members represent the General Public Interest and are from a variety of fields and professions.

The City of Berkeley's Conflict of Interest Code requires members of the Berkeley/Albany Mental 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 981-6900, or visit the website at <https://berkeleyca.gov/your-government/public-records/conflict-interest-reports>

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:

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

- Demonstrates interest in community mental 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 mental health consumers and members of diverse communities;
- Able to constructively handle conflict and differences of opinion;
- Reflects the diversity of the Berkeley/Albany community;
- Willing and able to work with City staff, Mental Health management, Albany and Berkeley City Councils; and
- The Commissioner or their spouse is not a full or part time employee of: the City of Berkeley's mental health division, a county mental health service, the California Department of Health Care Services, a mental health contract agency or a paid member of the governing body of a mental 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 Special Public Interest or General Public Interest category, and if Special Public Interest, whether they are a consumer or family member as defined above.



APPLICATION FOR APPOINTMENT TO BERKLEY/ALBANY MENTAL HEALTH COMMISSION

Redistricting 14 Commissioners may not be eligible to serve. Contact the City Clerk to verify.

NAME: Jiahao Gu

PREFERRED PRONOUN(S): She/her

Residence Address: 2205 Blake Street Berkeley 94704

Business Name/Address: Street City Zip

Occupation/Profession: Student

Business Phone: Home Phone: 925-667-8589

Email address: ashleygua@berkeley.edu

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:

Table with 3 columns: NAME, ADDRESS, PHONE NO. containing Jonathan Ginsberg and Dr. Ming Zhou.

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Name: [Signature]

I have been a resident of: Berkeley / Albany since: 2023 (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:  Date: 08/06/2024

AFFIDAVIT OF RESIDENCY

I, Jiahao Gu, 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: 08/06/2024

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

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

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

*Please see attached document*

2. Are you involved in other community activities? If so, which ones?
3. What, in your opinion, are the most important mental health issues in Berkeley and/or Albany?
4. What do you recommend doing about them?
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?
6. What unique contributions (work experience, education, attributes and training) do you have to make to the Mental Health Commission?

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

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

As a first-generation Chinese immigrant who has been attending high school and college in the Rockridge-Berkeley area in the past five years, I have witnessed and experienced the process of not only seeking mental health services but also overcoming my community's sociocultural stigma around the subject. Although I was eventually able to access support and accommodation, I understand that I wouldn't have been able to without the incredible privilege of being surrounded by such a diverse community whose openness to speaking about mental health encouraged me to seek psychiatric support in the first place. Through this experience, I realized that local level support systems and the community's attitude towards mental health are some of the most important components of the process of encouraging our community's mental and behavioral wellness. I have been a chapter leader and advisory board member for Bring Change 2 Mind, a nonprofit focused on youth mental health stigmatization, and a counselor for the California Youth Crisis Hotline, and I hope to continue participating in this work through supporting the efforts of the Commission.

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

I am a sister of the Delta Sigma sorority at UC Berkeley and I am involved in several other on-campus organizations such as the student council and business-related clubs. I am also a summer intern for the Alameda County District 1 Supervisor.

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

From my perspective, one of the most important mental health issues in our community is serving the unique needs of everyone on our broad socioeconomic and cultural spectrum. As both a college town and historically diverse community with a foreign born population of 21.4% and a poverty rate of 18%, Berkeley's incredible diversity comes hand in hand with vast discrepancies in its population's cultural understanding of mental wellness and in their financial ability to access help, a disconnect that requires us to continuously create and adjust our strategies based on the needs and abilities of different communities. Similarly, these cultural and economic disparities can also affect the ways in which people choose to pursue care. For example, someone who hasn't previously engaged with the American healthcare and insurance systems may encounter difficulties when trying to navigate the system and become discouraged from continuing their perusal.

Another important issue within mental health in the city is an apparent lack of streamlined access to urgent non-emergency mental health care. At UC Berkeley, for example, many students report that it's difficult to book same day or next day appointments, an obstacle that once again discourages community members from seeking help.

4. What do you recommend doing about them?

In my opinion, a good place to start is conducting data analysis and field studies within the city to identify different demographic groups, their levels of access to mental health services, their attitudes towards these services, and their preferred method of support in times of crisis. This would allow the city to create tailored advertisements towards these groups and to

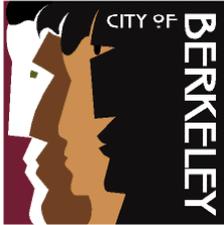
implement culturally sensitive tools and related training. Additionally, data points like these can help the city in pinpointing the specific issues hindering each socioeconomic groups' access to care, from which the process to accessing care can be streamlined and resources to explain the process can be created.

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?

Having worked almost 250 hours as a crisis counselor at the CA Youth Crisis Hotline, I am experienced in being a responder to the diverse population of youth in the Bay Area when they are in times of immediate need. Through advising callers in crisis and referring them to appropriate resources, I witnessed firsthand the variety of issues intersectional to mental and behavioral wellness, like financial insecurity, homelessness, and familial abuse. Moreover, this position has given me experience with introducing members of under-served communities to such resources and encouraging them to utilize them. I believe that this experience can help make Berkeley Mental Health more inclusive as I now hold the perspective of being a sort of liaison between those seeking help and those providing it, giving me an understanding of the unique needs of every person that engages with the system and the capabilities (and limitations) of the resources that can be offered.

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

As mentioned above, I have significant volunteer experience with a youth crisis hotline, during which I completed trainings such as discussing mental health with members of underrepresented communities. In addition, I also handled confirming partnerships and data with local organizations, such as psychological emergency centers and emergency temporary shelters. Separately, I was also previously a member of the student advisory board of Bring Change 2 Mind, a nonprofit specializing in broadening mental health awareness among middle and high school students. In addition to founding a chapter at my own high school, I also worked on creating activities and presentations for NorCal student chapters and facilitating contact between the organizations and the chapter leaders.



Health Housing and  
Community Services Department  
**Mental Health Division**

## MEMORANDUM

**To:** Mental Health Commission  
**From:** Jeffrey Buell, Mental Health Division Manager  
**Date:** 9/12/2024  
**Subject:** Mental Health Manager Report

### Mental Health Services Report

Please find the attached report on Mental Health Services for August 2024.

### Information Requested by Mental Health Commission

No questions were submitted by the Mental Health Commission this month.

### Mental Health Division Updates

### **Homeless Full-Service Partnership (HFSP)**

In May of 2017, the City of Berkeley engaged in a three year time-limited pilot of the Homeless Outreach and Treatment Team (HOTT), an expanded version of the City's Homeless Outreach Team (HOT) that brought, primarily through the Mental Health Service Act (MHSA), increased staffing and short term clinical services. The primary goal was to engage unhoused individuals, link to services, and promote self-sufficiency through long term service connection. [https://berkeleyca.gov/sites/default/files/2022-02/Berkeley-HOTT\\_Final-Evaluation-Report.pdf](https://berkeleyca.gov/sites/default/files/2022-02/Berkeley-HOTT_Final-Evaluation-Report.pdf)

As the HOTT pilot wound down, the plan was to shift to an MHSA funded Full-Service Partnership (FSP) model in order to provide team-based, intensive, long-term wraparound specialty mental health treatment to unhoused or precariously housed clients with serious mental illness who opted in to voluntary treatment. The outreach/linkage function was moved to the City Manager's office under Neighborhood Services as a Homeless Response Team (HRT). When the COVID-19 pandemic emerged and the City delayed the transition of the HOTT for an extra year in order to support outreach efforts to unhoused communities and encampments, and ultimately made the transition from HOTT to HFSP and HRT in March of 2022.

*A Vibrant and Healthy Berkeley for All*

Today's HFSP functions as one of three treatment teams with the City of Berkeley's behavioral health services. The City's three teams each serve a population: adults, unhoused adults, and children, respectively. Each of these teams works with Berkeley residents who meet specialty mental health eligibility criteria, have the greatest functional impairments, have gone through an intake process, and have opted in to voluntary outpatient treatment. The HFSP is not designed or resourced to provide general outreach to the City at large, but rather services and outreach to the individuals who went through an intake and were assigned to this team. The nuanced differences between the HFSP and HOTT can be confusing, especially with respect to the and outreach encampment response functions being separated and assigned to the HRT. The HFSP, as does other FSP teams, works in a multi-disciplinary team model with a high staff to client ratio. FSP's utilize a flexible "whatever it takes" approach to support a client's journey toward wellness and recovery. HFSP provides crucial and necessary services to unhoused Berkeley residents with serious behavioral health needs who choose to engage in treatment and linkage to resources.

### **Compliance with Prop 1 and other WIC changes to the requirements of Behavioral Health Boards**

Several changes have occurred in recent years, including the passage of Proposition 1, that greatly impact behavioral health systems, their functioning, and their funding. Several updates to the laws and requirements surrounding our behavioral health systems and their structures impact Berkeley, the services it provides, and the current Mental Health Commission that serves as our local Behavioral Health Board.

In order to meet these new requirements and criteria in the Welfare and Institutions Code (WIC), the Health, Housing, and Community Services (HHCS) Department plans to support a process to bring Berkeley into compliance, including bolstering recruitment for the Commission, offering a survey to former members (Draft attached), and creating of required documents such as bylaws. HHCS staff will be available to help guide and assist in the next steps. Required recent changes are briefly summarized below:

- **WIC Update - Effective January 1, 2025**: Membership rosters and bylaws should be updated to reflect changes from Proposition 1 (the Behavioral Health Services Act):
  1. 5604. (2)(B)(i) Fifty percent of the board membership shall be consumers, or the parents, spouses, siblings, or adult children of consumers, who are receiving or have received behavioral health services. One of these members shall be an individual who is **25 years of age or younger**. (ii) At least 20 percent of the total

membership shall be consumers, and at least 20 percent shall be families of consumers.

2. 5604. (2)(D)(i) At least one member of the board shall be an **employee of a local education agency**. (ii) To comply with clause (i), a county shall notify its county office of education about vacancies on the board.
3. **"Mental"** is changed to **"Behavioral"**, and advising regarding **"substance use disorder"** is added within the duties.

**WIC Update - 2023** to "Local Membership Criteria" (5604.) in regard to veterans/veterans advocates; **WIC Update - 2020** in the following areas: Bylaws, Duties, MHSA Duties, Expenses, Membership; **WIC Update - 2015** Mental Health Consumers can work for County AND serve on Boards/Commissions

## Mental Health Commission Feedback Survey

### Summary and Purpose of the survey:

As part of our ongoing efforts to improve the retention and recruitment of qualified commissioners, we are launching the Mental Health Commission Feedback Survey. The goal of this survey is to identify challenges commissioners have faced and gather insights on how we can enhance the experience for current and future members.

### Key Objectives of the Survey:

1. **Retention and Recruitment:** The survey is designed to help us understand why commissioners leave and how we can improve retention.
2. **Experience Evaluation:** We seek to gain insights into what aspects of the commission members found most rewarding and challenging.
3. **Resource Assessment:** We want to assess whether commissioners received the necessary resources and support.

We are asking former Mental Health Commissioners from the last 10 years to participate in this survey. The survey is 19 questions and should take approximately 10-15 minutes to complete.

### Survey Questions:

#	Survey Question	Response Options
1	Please note that this survey is anonymous, and your responses will be kept confidential. However, if you would like to provide your name and mailing address, we would be happy to mail you a gift card as an appreciation for your participation.	(Text Response)
2	How long did you serve on the Mental Health Commission?	(Multiple choice) Resident of the City of Berkeley, Resident of the City of Albany, Mayor or City Council designee, Special Public Interest- Consumer of Behavioral/ Mental Health Services, Special Public Interest- Family Member of Behavioral/ Mental Health Services, General Public Interest member
3	How did you hear about the opportunity to join the commission?	(Multiple choice) Less than 1 year, 1-2years, 2-3 years, 3-6years, 6-9 years

#	Survey Question	Response Options
4	How did you hear about the opportunity to join the Berkeley Mental Health Commission?	(Rank options) Referred by a City Council member, Word of mouth (friend, family, colleague), City of Berkeley website, Community announcement, Social media, Local community organizations, Public meeting or event, Other
5	What were the primary factors that influenced your decision to apply for the Mental Health Commission? (Rank the following in order of importance: 1 being the most important)	(Multiple choice) Desire to advocate for mental health services, Personal lived experience with mental health, Professional interest, Opportunity to influence local policy, Community involvement and service, Encouragement from others (e.g., friends, colleagues) Other
6	If you selected "Other," please provide additional details.	(Open-ended)
7	How would you describe the application process to join the Mental Health Commission?	(Multiple choice) Very easy, Somewhat easy, Not so easy, Very difficult, Other,
8	What challenges or obstacles, if any, did you experience during the application process?	(Open-ended)
9	How would you rate your overall experience as a member of the Mental Health Commission?	(Multiple choice) Very positive Positive Neutral Negative Very negative
10	What aspects of your overall experience on the commission did you find most rewarding?	(Open-ended)
11	What aspects of your overall experience on the commission did you find most challenging?	(Open-ended)
12	What were the primary reasons for your decision to leave the commission? (Check all that apply)	(Multiple choice, may select more than one) Personal or family reasons, Professional or work commitments, Dissatisfaction with the commission's activities or direction, Lack of time or availability,

#	Survey Question	Response Options
		Challenges in navigating needs within the commission, Conflict or differences of opinion that were difficult to resolve, Relocated outside of Berkeley, Attendance Requirement, In-person/ Hybrid challenges, Reached Term Limit, Other
13	What circumstances might have influenced your decision to stay on the Commission?	(Open-ended)
14	What advice would you tell someone considering applying for the Mental Health Commission?	(Open-ended)
15	During your time on the Commission, did you feel you received adequate resources and support (e.g., meeting compensation, childcare reimbursement, attendant care, or disabled support services) to fulfill your duties? Please describe your experience.	(Open-ended)
16	If there are other resources or support that would have helped you in your role, please describe what additional support you believe would have been beneficial.	(Open-ended)
17	What suggestions do you have for improving the commission?	(Open-ended)
18	Would you recommend serving on the Mental Health Commission to others?	(Multiple choice) Yes No Other (type-in)
19	If you'd like to refer someone to serve on the Mental Health Commission, please provide their name and contact information.	Text Response

## Berkeley Mental Health Caseload Statistics for September 2024

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 September 2024
<p><b>Adult, Older Adult and TAY Full Service Partnership (AFSP) (Highest level outpatient clinical case management and treatment)</b></p>	<p>1-10 for clinical staff.</p>	<p>4 Clinicians, 1 Non-Licensed Clinician, 1 Clinical Supervisor</p>	<p>56</p>	<p>\$53,353</p>	<p>Clients: 54 API: 2 Black or African-American: 27 Hispanic or Latino: 1 White: 20 American Indian: 0 Other/Unknown: 4 Male: 32 Female: 15 Missing Gender ID: 7 Prefer Not to Answer Gen ID: 0 Multiple Gender ID: 0 Heterosexual: 37 Unknown: 5 Missing Sex Orient: 7 Bisexual: 0 Queer: 1 Prefer Not to Answer Sex Orient: 1 Multiple Sex Orient: 0 Gay: 2 Questioning: 0 Lesbian: 0</p>
<p><b>Adult FSP Psychiatry (September Stats)</b></p>	<p>1-100</p>	<p>0 FTE</p>	<p>49</p>	<p>\$2,037,600</p>	
<p><b>Homeless Full-Service Partnership (HFSP) (Highest level outpatient clinical case management and treatment)</b></p>	<p>1-8 for clinical staff</p>	<p>3 Clinicians, 2 Non-Licensed Clinician, 1 Clinical Supervisor</p>	<p>42</p>	<p>\$70,571</p>	<p>Clients: 37 API: 1 Black or African-American: 20 Hispanic or Latino: 0 Other/Unknown: 2 White: 14 Male: 19</p>

## Berkeley Mental Health Caseload Statistics for September 2024

							Female: 14 Missing Gender ID: 3 Unknown: 1 Prefer No to Answer: 0 Multiple Gender Identities: 0 Heterosexual: 24 Missing Sex Orient: 3 Bisexual: 3 Unknown: 4 Gay: 1 Questioning: 1 Multiple Sex Orient: 1 Prefer Not to Answer: 0 Lesbian: 0
<b>HFPS Psychiatry (September Stats)</b>	1-100	0.5 FTE	30	TBD			
<b>HFSP FY22 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)</b>							
<b>Comprehensive Community Treatment (CCT)</b> (High level outpatient clinical case management and treatment)	1-20	7 Clinicians 1 Team Lead 1 Clinical Supervisor	163	\$18,704			Clients: 148 American Indian: 2 API: 12 Black or African-American: 57 Hispanic or Latino: 6 Other/Unknown: 7 Pacific Islander: 2 White: 62 Male: 54 Female: 59 Multiple Gender Identities: 0 Missing Gender ID: 29 Non-Conforming Gender ID: 1 Prefer Not to Answer Gender ID: 1 Female to Male: 1 Queer Gender ID: 1 Unknown: 2 Heterosexual Sex Orient: 84 Unknown: 15 Missing Sexual Orient: 29

## Berkeley Mental Health Caseload Statistics for September 2024

									Bisexual Sex Orient: 1 Lesbian Sex Orient: 5 Gay Sex Orient: 4 Prefer Not to Answer Sex Orient: 6 Multiple Sexual Orient: 0 Queer Sexual Orient: 1 Other Sexual Orient: 3
<b>CCT Psychiatry (September Stats)</b>	1-200	0.75 FTE	120						
<b>CCT FY21 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)</b>									
<b>Focus on Independence Team (FIT) (Lower level of care, only for individuals previously on FSP or CCT)</b>	1-20 Team Lead, 1-50 Post Masters Clinical 1-30 Non- Degreed Clinical	1 Licensed Clinician 1 CHW Sp./ Non- Degreed Clinical, 1 Clinical Supervisor	87	\$33,473					Clients: 83 API: 65 Black or African American: 29 Hispanic or Latino: 5 Other/Unknown: 1 White: 43 Male: 46 Female: 33 Intersex: 1 Missing Gender ID: 3 Other Gender ID: 0 Heterosexual: 69 Unknown: 6 Missing Sexual Orient: 3 Prefer Not to Answer Sexual Orient: 4 Gay: 1 Multiple Sexual Orient: 0 Questioning: 0
<b>FIT Psychiatry (September Stats)</b>	1-200	.25	71						
<b>FIT FY21 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)</b>									
			\$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 September 2024
Children's Full-Service Partnership (CFSP)	1-8	1 Senior Behavioral Health Clinician 1 Non-Licensed Clinician	11	\$262,322	Clients: 9 American Indian: 0 API: 1 Black or African-American: 6 Hispanic or Latino: 1 Other/Unknown: 1 White: 0 Female: 3 Male: 3 Missing Gender ID: 3 Unknown: 0 Non-Conforming Gender ID: 0 Heterosexual: 3 Missing Sexual Orient: 1 Unknown: 5 Gay: 1 Other Sexual Orient: 0 Questioning Sexual Orient: 0
CFSP Psychiatry (September Stats)	1-100	0	4		
<b>CFSP FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>					
Early and Periodic Screening, Diagnostic and Treatment Prevention (EPSDT) /Educationally Related Mental Health Services (ERMHS)	1-20	2 Clinicians, 1 Clinical Supervisor	55	\$198,333	Clients: 38 American Indian: 0 API: 2 Black or African-American: 16 Hispanic or Latino: 5 Other/Unknown: 8 White: 7 Female: 6 Male: 10 Missing Gender ID: 19 Unknown: 2 Multiple Gender ID: 1 Non-Conforming Gender ID: 0

						Female to Male: 0 Other Gender ID: 0 Heterosexual: 10 Unknown: 5 Missing Sexual Orient: 19 Gay: 1 Multiple Sexual Orient: 0 Bisexual: 1 Lesbian: 1 Prefer Not to Answer: 0 Other Sexual Orient: 0 Queer Sexual Orient: 0 Questioning Sexual Orient: 1
ERMHS/EPSTD Psychiatry (September Stats)	1-100	0	11			
<b>EPSDT/ERMHS FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>						
High School Health Center and Berkeley Technological Academy (HSHC)	1-6 Clinician (majority of time spent on crisis counseling)	3 Clinicians, 1 Clinical Supervisor	Drop-in: 18 Externally referred: 6 Ongoing tx: 18 Groups: 0 Offered/ 0 Conducted			N/A
<b>HSHC FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>						
\$396,106						

Crisis and ACCESS Services	Staff Ratio	Clinical Staff Positions Filled	Total # of Clients/Incidents	MCT Incidents Detail	Calendar Year 2024 (Jan '24- Dec '24) Demographics – From Mobile Crisis Incident Log (through September 2024)
Mobile Crisis (MCT)	N/A	2 Clinicians filled at this time	<ul style="list-style-type: none"> <li>79 - Incidents</li> <li>13 - 5150 Evals</li> <li>2 - 5150 Evals leading to involuntary transport</li> </ul>	<ul style="list-style-type: none"> <li>47 - Incidents: Location - Phone</li> <li>18 - Incidents: Location - Field</li> <li>0 - Incidents: Location - Home</li> </ul>	Clients: 389 API: 15 Black or African-American: 80 White: 106 Hispanic or Latino: 9 Other/Unknown: 179 Female: 180 Male: 170 Transgender: 2 Unknown: 37
<b>MCT FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>					
Transitional Outreach Team (TOT)	N/A	.5 Licensed Clinician, (TOT and CAT have been recently merged)	0 – Incident(s)	N/A	Clients: 17 API: 1 Black or African-American: 3 White: 11 Hispanic or Latino: 0 Other/Unknown: 2 Female: 9 Male: 8 Transgender: 0 Unknown: 0
<b>TOT FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>					
Crisis, Assessment, and Triage (CAT)	N/A	2 Non-Licensed Clinicians, .5 Licensed Clinician, 0 Clinical Supervisor	89 - Incidents	N/A	Clients: 407 API: 9 Black or African-American: 75 White: 58 Hispanic or Latino: 21 Other/Unknown: 244 Female: 134 Male: 144 Transgender: 1 Unknown: 129
					<b>30</b>

**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

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**From:** Works-Wright, Jamie  
**Sent:** Tuesday, September 10, 2024 4:08 PM  
**To:** Works-Wright, Jamie  
**Subject:** FW: Upcoming Course Offerings - September - November 2024

Please see the information below from Monica about some upcoming trainings.

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](mailto:JWorks-Wright@berkeleyca.gov)

*Office: 510-981-7721 ext. 7721*

*Cell #: 510-423-8365*




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**From:** Monica Jones <lightsoftomorrow09@gmail.com>  
**Sent:** Tuesday, September 10, 2024 3:52 PM  
**To:** Works-Wright, Jamie <JWorks-Wright@berkeleyca.gov>  
**Subject:** Fwd: Upcoming Course Offerings - September - November 2024

**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.

hi jamie,

please share with the commissioners.

monica

----- Forwarded message -----

**From:** Carolyn Perez <[carolynperez@berkeley.net](mailto:carolynperez@berkeley.net)>  
**Date:** Tue, Sep 10, 2024 at 10:10 AM  
**Subject:** Fwd: Upcoming Course Offerings - September - November 2024  
**To:** Carolyn Perez <[carolynperez@berkeley.net](mailto:carolynperez@berkeley.net)>

Greetings,

EBAC is offering some great training opportunities for staff and families in English and Spanish.

----- Forwarded message -----

From: **EBAC Training Department** <[training@ebac.org](mailto:training@ebac.org)>

Date: Tue, Sep 10, 2024 at 10:03 AM

Subject: Upcoming Course Offerings - September - November 2024

To: <[carolynperez@berkeley.net](mailto:carolynperez@berkeley.net)>



## Upcoming Course Offerings September - November 2024

**Fri, September 13th 9am - 12pm**

**[Board of Behavioral Science Approved Law and Ethics  
Related to Telehealth \(3 CEU Credit Hrs\)](#)**

**Trainer: Pamela Harmell, PhD - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Fri, September 13th 1pm - 4pm**

**[The Impact of Structural Racism on System Involved Youth](#)**

**Trainer: Nicole Klasey, PSY.D - Distance Learning**

**Wed, September 18th 1:30pm - 4:30pm**

**[The Effects of Trauma on Development](#)**

**Trainer: Cristal Alvarado, LMFT - Distance Learning**

**Wed, September 18th 1:30pm - 4:30pm**

**[Trauma and Resilience in African American Communities](#)**

***(2.5 CEU Credits)***

**Trainer: Branson Boykins, PhD - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Thurs, September 19th 10am - 1pm**

**The Effects of Trauma on Development**

**Trainer: Cristal Alvarado, LMFT - Distance Learning**

**Thurs, September 19th 1pm - 4pm**

**Implicit Bias in Child Welfare, Education and Healthcare**

**(2.5 CEU Credits)**

**Trainer: Nicole Klasey, Psy.D - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Mon, September 23rd 1:30pm - 4:30pm**

**Introduction to Attachment-Based Eye Movement**

**Desensitization Reprocessing with System Impacted Youth and Families (2.5 CEU Credits)**

**Trainer: Michelle Gutierrez, LMFT - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Wed, September 25th 1:30pm - 4:30pm**

**Best Practices in Working with Translators and Interpreters with Spanish Speaking Families (2.5 CEU Credits)**

**Trainer: Jeanette Lopez-Urbina, LCSW - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Wed, October 2nd 1:30pm - 4:30pm**

**Strategies to Support Regulation and Co-Regulation**

**Trainer: Antoine Moore, M.A - Distance Learning**

**Wed, October 9th 1pm - 4pm**

**The Impact of Internalized Racism on Youth**

**Trainer: Nicole Klasey, Psy.D - Distance Learning**

**Wed, October 9th 1:30pm - 4:30pm**

**Entering Children's Worlds: An Introduction to Sand Tray  
Part 1 (2.5 CEU Credits)**

**Trainer: Cristal Alvarado, LMFT**

**In Person - Hayward Location**

*\*\*\*Participants must attend the full course in order to receive credit (with the exception of breaks / lunch)*

**Mon, October 14th 1:30pm - 4:30pm**

**Strategies to Support Regulation and Co-Regulation**

**Trainer: Cristal Alvarado, LMFT - Distance Learning**

**Wed, October 16th 1:30pm - 4:30pm**

**Reducing Implicit Bias in Services with System Impacted  
Youth and Families**

**Trainer: Cristal Alvarado, LMFT - Distance Learning**

**Thurs, October 17th 10am - 1pm**

**Reducing Implicit Bias in Services with System Impacted  
Youth and Families**

**Trainer: Cristal Alvarado, LMFT - Distance Learning**

**Thurs, October 17th 1pm - 4pm**

**What Social Service Providers Need to Know about Racial  
Trauma**

**Trainer: Nicole Klasey, Psy.D - Distance Learning**

**Wed, October 23rd 1:30pm - 4:30pm**

**Immigration Trauma: Special Focus on Central American  
Immigrants (2.5 CEU Credits)**

**Trainer: Jeanette Lopez-Urbina, LCSW - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Fri, October 25th 9am - 4pm**

**Board of Behavioral Science Approved Law and Ethics**

**Considerations for School Based Practices (6 CEU Credits)**

**Trainer: Daniel Taube, PhD - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Tues, November 5th 1pm - 4pm**

**An Overview of Commercial Sexual Exploitation of System Impacted Children**

**Trainer: Nicole Klasey, Psy.D - Distance Learning**

**Wed, November 6th 1:30pm - 4:30pm**

**Linguistically Responsive Trauma Informed Care Principles and Interventions for Spanish Speaking Clients and Families (Training Will Be Delivered in Spanish) (2.5 CEU Credits)**

**Trainer: Jeanette Lopez-Urbina, LCSW - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Wed, November 6th 1:30pm - 4:30pm**

**Entering Children's Worlds: Creating Safety and Calling in Resources Part 2 (2.5 CEU Credits)**

**Trainer: Cristal Alvarado, LMFT**

**In Person - Hayward Location**

*\*\*\*Participants must attend the full course in order to receive credit (with the exception of breaks / lunch)*

**Wed, November 13th 1:30pm - 4:30pm**

**Family Case Planning Skills and Intervention with a Culturally Diverse Population (2.5 CEU Credits)**

**Trainer: Branson Boykins, Psy.D - Distance Learning**

*\*\*\*For any distance learning course participants must have their cameras on for the full course to receive full credit (with the exception of breaks / lunch)*

**Thurs, November 14th 10am - 1pm**

**Culturally Responsive Relationships for Providers**

**Trainer: Cristal Alvarado, LMFT - Distance Learning**

**Fri, November 15th 1pm - 4pm**

**Conflict Resolution Skills for System-Involved Youth and Young Adults**

**Trainer: Nicole Klasey, Psy.D - Distance Learning**

**Wed, November 20th 1pm - 4pm**

**The Impact of Gun Violence**

**Trainer: Nicole Klasey, Psy.D - Distance Learning**

**Wed, November 20th 1:30pm - 4:30pm**

**Effective School Advocacy for Providers Working with System Impacted Youth and Families**

**Trainer: Marya Wright, ACSW - Distance Learning**

**Thurs, November 21st 10am - 1pm**

**Understanding and Addressing Bullying Behavior with System Impacted Youth**

**Trainer: Dana Holtz, NCSC, RPT - Distance Learning**

***To access our training all participants will need to create a profile in the "EBAC Training Database System"***

**Click [HERE](#) to Login & Register if you already have a profile!!**

**[Click Here to Sign Up and View Our Training Offerings!](#)**

**This process takes 5 minutes and Directions can be found [HERE!](#)**

**Please contact [training@ebac.org](mailto:training@ebac.org) for assistance**

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**All Zoom & Survey Links will be automatically send to you through our new "Training Database System" the day prior to training date @ 4:15pm. If you do not think you received it please check your junk/spam folder or email us at [training@ebac.org](mailto:training@ebac.org) and we will assist you!**

**Thank you!**

**EBAC Trainings are sponsored in partnership with Chabot Los Positas Community College District and Alameda County Child Welfare Services. Trainings are contracted and funded by the Federal Foster Care Program Title IV-E funding. Title IV-E trainings are intended as a resource for Alameda County foster and adoption care providers and County staff members that provide support and assistance to these care providers. Please feel free to distribute training announcements to your IV-E qualifying county staff and IVE-E qualifying partners in the community.**

Cancellation Policy: There is currently no charge for trainings for eligible participants. If a course must be cancelled, the course instructor and registrants are notified via phone and/or email no later than one week in advance. In the event that an instructor has an emergency and must cancel a course with less than a week notice, we will notify participants immediately via email and include information regarding a rescheduled date. We request email notification 10 days in advance of the training date from participants whom cannot attend a course. To cancel an email must be submitted to [training@ebac.org](mailto:training@ebac.org).

**CEUs:** EBAC provides CEUs for some but not all trainings offered. To receive a CE credit you MUST attend the full course. *CE Certificates will be available to download at your convenience through the new training database system 10 business days from the date of training.* EBAC is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for LMFTs, LCSWs and/or LPCCs under the California Board of Behavioral Sciences Provider # 138020. EBAC maintains the responsibility for this program/course and its content.

Special Needs: EBAC complies with all local, state and federal regulations including the American Disabilities Act. Please notify [training@ebac.org](mailto:training@ebac.org) at least 10 days in advance if you have special needs that require accommodation. In the circumstance of a request we will work to provide the accommodation to the best of our ability and respond to the registrant accordingly. The training department meets all applicable local, state, and federal standards, including the Americans with Disabilities Act of 1990 (ADA), 42 U.S.C. §§ 12101-12213 (2008).

Grievances: In an effort to provide the highest quality services to participants in our trainings, participants are encouraged to report immediately any concerns regarding EBAC training. All participant complaints/grievances should be submitted in writing to the East Bay Agency for Children at [21455 Birch St. Hayward CA 94541](mailto:21455 Birch St. Hayward CA 94541) or by email to [training@ebac.org](mailto:training@ebac.org). Once a complaint or grievance has been submitted, you can expect a response in no more than ten (10) business days by email or phone contact.

**Contact Us**

Email: [training@ebac.org](mailto:training@ebac.org)  
Phone: 510-844-5370

East Bay Agency for Children | 2828 Ford Street | Oakland, CA 94610 US

[Unsubscribe](#) | [Update Profile](#) | [Constant Contact Data Notice](#)



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**Carol Finis Perez, MPA**

Family Engagement and Equity Specialist  
Office of Family Engagement and Equity  
Berkeley Unified School District  
Work cell: 510-849-7396

“Parent participation is the leading predictor that supports students’ academic success, regardless of race, socioeconomic status, ethnicity, or cultural background.” Dr. Karen Mapp

## Works-Wright, Jamie

---

**From:** Works-Wright, Jamie  
**Sent:** Tuesday, September 10, 2024 9:39 AM  
**To:** Works-Wright, Jamie  
**Cc:** Buell, Jeffrey  
**Subject:** FW: (Correction) Invitation to October 18 / 19 Meeting/Training (Hybrid: Milpitas/Zoom) (CALBHB/C)

Hello Commissioners,

Please see the information below, please register and plan to attend if interested.

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](mailto:JWorks-Wright@berkeleyca.gov)  
 Office: 510-981-7721 ext. 7721  
 Cell #: 510-423-8365




---

**From:** Theresa Comstock <theresa.comstock@calbhbc.com>  
**Sent:** Monday, September 9, 2024 11:35 AM  
**Subject:** (Correction) Invitation to October 18 / 19 Meeting/Training (Hybrid: Milpitas/Zoom) (CALBHB/C)

**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.

Please share with local mental/behavioral health board/commission. Thank you!

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CALBHB/C invites you to register for the October 18th *and/or* 19th Meeting/Training (Hybrid: Milpitas\* *or* Zoom)!

\*CALBHB/C will pay the hotel directly for lodging for one\*\* mental/behavioral health board/commission member per county (but all members and staff are welcome to attend!)

\*\*We will pay for lodging for two members in counties with CALBHB/C Governing Board members (Napa, San Francisco and Solano Counties.) Please notify us by September 16th regarding lodging needs.



## California Association of Local Behavioral Health Boards and Commissions

### CALBHB/C Quarterly Meeting *and/or* Training - Open Statewide

Hybrid: Zoom / In-Person (Milpitas)\*

October 18, 2024 (Meeting) / October 19, 2024 (Training)

We invite you to register! Registration is open to all local mental/behavioral health board/commission members and staff. *There is no fee to register.*

Please Register at: [www.calbhbc.org/registration](http://www.calbhbc.org/registration)

#### Friday, October 18, 2024, 1:30 pm - 5:30 pm

##### 1:30 pm: **Welcome & Introductions**

Bill Stewart, President, CALBHB/C

Theresa Comstock, Executive Director, CALBHB/C

##### 1:45 - 4:30 pm **Updates/Presentations** from statewide organizations:

- Crisis Care Continuum Presentation
- CA Association of Local Behavioral Health Boards/Commissions (CALBHB/C)
- CA Behavioral Health Planning Council (CBHPC)
- Mental Health Services Oversight & Accountability Commission (MHSOAC)
- Peer Provider Certification Update
- Additional Speakers (To Be Determined)

4:30 pm - 5:30 pm - **Issue-Based Discussion:** Local Board/Commission Members are asked to introduce themselves and *briefly* discuss local successes and/or challenges related to behavioral health in their local communities.

#### Saturday, October 19, 2024, 9 am\* - 12 pm

9 am\* - 12 pm: Mental/Behavioral Health Board/Commission Training includes:

- How to Be an Effective MH/BH Board/Commission (9 am - 10:30 am)
- Chair & Admin Training (All are welcome to attend. (10:40 am - 12 pm))

\* In-Person Registrants:

Coffee & Pastries will be available at 8:30 am on Saturday.

Location information is provided through registration confirmations to attendees.

Expenses: CALBHB/C will pay travel & lodging expenses for one\*\*\* MH/BH board/commission member per county in the **Bay Area\*\* Regions** (but more are welcome to attend.)

Hotel Room-Block Deadline - Please notify us re: lodging needs by September 16th  
[info@calbhbc.com](mailto:info@calbhbc.com)

Registration Deadline: *In-person* attendees are asked to register by Friday, October 10th, 2024.

**\*\*The Bay Area Region includes the following counties/jurisdictions:** Alameda, Contra Costa, Marin, Monterey, Napa, San Benito, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma, and City of Berkeley

**\*\*\*In counties with CALBHB/C Governing Board Members, CALBHB/C will pay expenses for an additional member.**

[www.calbhbc.org](http://www.calbhbc.org) email: [info@calbhbc.com](mailto:info@calbhbc.com) [facebook/CALBHBC](https://www.facebook.com/CALBHBC)

## Works-Wright, Jamie

---

**From:** Works-Wright, Jamie  
**Sent:** Tuesday, September 3, 2024 1:52 PM  
**To:** Works-Wright, Jamie  
**Subject:** FW: Mark Your Calendar! Free Teen/Youth Mental Health Workshop

Hello Commissioners,

Please see the information below from Chair Monica Jones

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](mailto:JWorks-Wright@berkeleyca.gov)

*Office: 510-981-7721 ext. 7721*

*Cell #: 510-423-8365*




---

**From:** Monica Jones <lightsoftomorrow09@gmail.com>  
**Sent:** Tuesday, September 3, 2024 1:38 PM  
**To:** Works-Wright, Jamie <JWorks-Wright@berkeleyca.gov>  
**Subject:** Fwd: Mark Your Calendar! Free Teen/Youth Mental Health Workshop

**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.

hi. can you share with the commissioners.

monica

----- Forwarded message -----

**From:** Carolyn Perez <[carolynperez@berkeley.net](mailto:carolynperez@berkeley.net)>  
**Date:** Tue, Sep 3, 2024 at 1:34 PM  
**Subject:** Fwd: Mark Your Calendar! Free Teen/Youth Mental Health Workshop  
**To:** Carolyn Perez <[carolynperez@berkeley.net](mailto:carolynperez@berkeley.net)>

Please share with anyone that might be interested...

----- Forwarded message -----

From: African American Family Outreach Project (AAFOP) <aafop@mhaac.org>

Date: Tue, Sep 3, 2024 at 12:59 PM

Subject: Mark Your Calendar! Free Teen/Youth Mental Health Workshop

To: <carolynperez@berkeley.net>

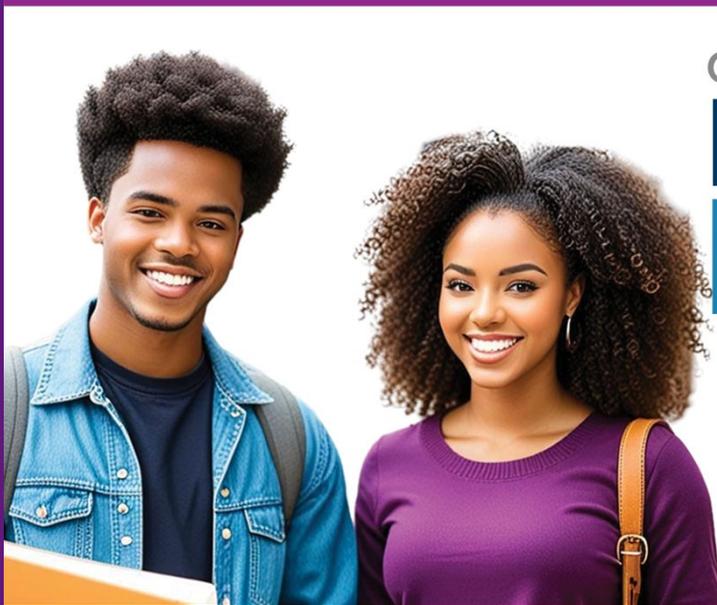
# MARK YOUR CALENDAR!

This is a workshop that every teacher, parent, and those in the role of parents, should

**SPREAD THE WORD!**



INVITES YOU TO JOIN  
**SPECIAL FREE  
ONLINE WORKSHOP**



CHILD • TEEN • YOUTH  
**MENTAL  
HEALTH**

What are the signs that  
might need mental health

What, if anything, triggers  
psychotic break?

What should I do if a child  
under my care loses to

## *Our Presenters*

**Sun Hyung Lee**  
LCSW, MPH

Division Director, Transition Age  
Youth Services, Child & Young Adult  
System of Care  
Behavioral Health Department



**Adriana**  
LMFT, CPRP

Division Director  
Felton Institute  
Early Psychosis D



SATURDAY

**SEPT  
28**9:45am -  
12:30pm*Zoom opens  
at 9:30am***CLICK HERE TO  
REGISTER FOR THIS EXCITING WORKSH**  
<https://tinyurl.com/Child-TeenMe>or call **(510) 697-8533***After registering, you will receive a confirmation email  
containing information about joining the meeting*

AAFOP is a program of the

**mentalhealth**  
ASSOCIATION OF ALAMEDA COUNTY**Behavioral H  
Department**  
Alameda County Hea[View email in browser](#)AAFOP · [7677 Oakport St · Suite 100 · Oakland, California 94621 · USA](#)  
[update your preferences](#) or [unsubscribe](#)**Carol Finis Perez, MPA**Family Engagement and Equity Specialist  
Office of Family Engagement and Equity  
Berkeley Unified School District  
Work cell: 510-849-7396

“Parent participation is the leading predictor that supports students’ academic success, regardless of race, socioeconomic status, ethnicity, or cultural background.” Dr. Karen Mapp

**Works-Wright, Jamie**

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**From:** Works-Wright, Jamie  
**Sent:** Friday, August 16, 2024 3:10 PM  
**To:** Works-Wright, Jamie  
**Subject:** FW: Mental Health Advisory Board Meeting (August 19, 2024)  
**Attachments:** MHAB Main Board Agenda (August 2024).pdf; MHAB Main Board Meeting UNAPPROVED Minutes (July 2024).pdf

Hello Commissioners,

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](mailto:JWorks-Wright@berkeleyca.gov)  
Office: 510-981-7721 ext. 7721  
Cell #: 510-423-8365



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**From:** MHB Communications, ACBH <ACBH.MHBCommunications@acgov.org>  
**Sent:** Friday, August 16, 2024 3:08 PM  
**Subject:** Mental Health Advisory Board Meeting (August 19, 2024)

**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.

Good afternoon,

Please see attached materials for the Mental Health Advisory Board meeting scheduled for **Monday, August 19, 2024 at 3:00 PM.**

This will be an in-person meeting to be held at 2000 Embarcadero Cove, Suite 400 (*Gail Steele Conference Room*), Oakland CA. Members of the public are invited to observe and participate in person or remotely via Zoom.

To participate via Zoom, please click on the meeting link below:

<https://us06web.zoom.us/j/84285334458?pwd=bURyU1JqS2YvVGhRU2g4SW5yL0xRQT09>

**Webinar ID: 842 8533 4458**

**Passcode: 269505**

Or Telephone:

USA 404 443 6397 US Toll

USA 877 336 1831 US Toll-free

**Conference code: 988499**



Alameda County  
Mental Health Advisory Board

# Mental Health Advisory Board Agenda

48

Monday, August 19, 2024 | 3:00 PM – 5:00 PM

2000 Embarcadero Cove, Suite 400 (Gail Steele Room) Oakland

This meeting will also be conducted through videoconference and teleconference

<https://us06web.zoom.us/j/84285334458?pwd=bURyU1JqS2YyVGVhRU2g4SW5yL0xRQT09>

Teleconference: (877) 336-1831 | Teleconference Code: 988499

Webinar ID: 842 8533 4458 | Webinar code: 269505

<b>MHAB Members:</b>	<b>Brian Bloom</b> (Chair, District 4)	<b>Thu Quach</b> (District 2)	<b>Mary Hekl</b> (District 4)
	<b>Terry Land</b> (Vice Chair, District 1)	<b>Ashlee Jemmott</b> (District 3)	<b>Larry Brandon</b> (District 5)
	<b>Jennifer DeGroat-Penney</b> (District 1)	<b>Shannon Johnson</b> (District 3)	<b>Olivia Daprile</b> (District 5)
	<b>Carolynn Gray</b> (District 2)	<b>Yuliana Wisner-Leon</b> (District 3)	<b>Juliet Leftwich</b> (District 5)
	<b>Gina Lewis</b> (District 2)	<b>Warren Cushman</b> (District 4)	<b>Amy Shrago</b> (BOS Representative)

## Committees

### Adult Committee

Terry Land, Co-Chair  
Thu Quach, Co-Chair

### Children’s Advisory Committee

Ashlee Jemmott, Co-Chair  
Warren Cushman, Co-Chair

### Criminal Justice Committee

Brian Bloom, Co-Chair  
Juliet Leftwich, Co-Chair

### MHAB Mission Statement

The Alameda County Mental Health Advisory Board has a commitment to ensure that the County’s Behavioral Health Care Services provide quality care in treating members of the diverse community with dignity, courtesy and respect. This shall be accomplished through advocacy, education, review and evaluation of Alameda County’s mental health needs.

- 3:00 PM Call to Order \_\_\_\_\_ Chair Bloom
- 3:00 PM I. Roll Call
- 3:05 PM II. Approval of Minutes
- 3:05 PM III. Public Comments
- 3:10 PM IV. MHAB Chair’s Report
- 3:20 PM V. MHAB Announcements
- 3:25 PM VI. ACBH Director’s Report
- 3:35 PM VII. MHAB Office Elections
- 3:45 PM VIII. Committee and Liaison Reports
  - A. Adult Committee
  - B. Criminal Justice Committee
  - C. Children’s Advisory Committee
  - D. MHSA Stakeholder Committee
  - E. Budget Stakeholder Advisory Committee
  - F. Berkeley Mental Health Committee Liaison
- 3:55 PM IX. CARE Court Presentation and Discussion
- 4:50 PM X. Public Comments
- 5:00 PM XI. Adjournment

Contact the Mental Health Advisory Board at [ACBH.MHBCommunications@acgov.org](mailto:ACBH.MHBCommunications@acgov.org)



ALAMEDA COUNTY

Board of Supervisors



Behavioral Health  
Department

Alameda County Health



**Mental Health Advisory Board UNAPPROVED Minutes**  
**Monday, July 15, 2024 | 3:00 PM - 5:00 PM**



Alameda County  
Mental Health Advisory Board

Meeting Conducted In-Person and through Video/Telephone Conference

<b>MHAB Members:</b>	<input checked="" type="checkbox"/> <b>Brian Bloom</b> ( <i>Chair, District 4</i> ) <input checked="" type="checkbox"/> <b>Terry Land</b> ( <i>Vice Chair, District 1</i> ) <input checked="" type="checkbox"/> <b>Carolynn Gray</b> ( <i>District 2</i> ) <input type="checkbox"/> <b>Gina Lewis</b> ( <i>District 2</i> )	<input checked="" type="checkbox"/> <b>Thu Quach</b> ( <i>District 2</i> ) <input checked="" type="checkbox"/> <b>Warren Cushman</b> ( <i>District 3</i> ) <input type="checkbox"/> <b>Ashlee Jemmott</b> ( <i>District 3</i> ) <input checked="" type="checkbox"/> <b>Olivia Daprile</b> ( <i>District 5</i> )	<input checked="" type="checkbox"/> <b>Juliet Leftwich</b> ( <i>District 5</i> ) <input type="checkbox"/> <b>Lawrence Brandon</b> ( <i>District 5</i> ) <input checked="" type="checkbox"/> <b>Mary Hekl</b> ( <i>District 5</i> ) <input checked="" type="checkbox"/> <b>Amy Shrago</b> ( <i>BOS Representative</i> )
<b>ACBH Staff:</b>	<input checked="" type="checkbox"/> <b>Dr. Karyn Tribble</b> ( <i>ACBHD Director</i> ) <input type="checkbox"/> <b>James Wagner</b> ( <i>ACBHD Deputy Director, Clinical Operations</i> ) <input checked="" type="checkbox"/> <b>Vanessa Baker</b> ( <i>ACBHD Deputy Director, Plan Administration</i> )		
<b>Excused Absences:</b>	<input checked="" type="checkbox"/> <b>Dainty Castro</b> ( <i>MHAB Liaison</i> ) <input checked="" type="checkbox"/> <b>Asia Jenkins</b> ( <i>ACBHD Admin Support</i> )		
	Ashlee Jemmott		

Meeting called to order at 3:02 PM by Chair Brian Bloom.

ITEM	DISCUSSION	DECISION/ACTION
<b>Roll Call / Introductions</b>	Roll call was completed.	
<b>Approval of Minutes</b>	The meeting minutes from June 17, 2024 were adopted and approved with the revisions requested by the Mental Health Advisory Board (MHAB) members and MHAB Chair, Brian Bloom.	
<b>Public Comments</b>	Public comments were given.	
<b>MHAB Chair's Report</b>	MHAB Chair Bloom provided the following report:  <u>MHAB Officer Election</u> : According to the MHAB Bylaws, the Nominating Committee will accept nominations and conduct the office elections during the August board meeting. The new officers will start their one-year term on September 1 <sup>st</sup> . MHAB Members were	<b>49</b>

ITEM	DISCUSSION	DECISION/ACTION
	<p>encouraged to submit their nominations directly to Member Jemmott, who volunteered to chair this committee, or contact MHAB Liasion, if preferred.</p> <p><u>MHAB New Member:</u> Jennifer Penney has been appointed as a new MHAB representative from District 1. She will join in-person at the main board meeting in August, where she will have an opportunity to introduce herself .</p> <p><u>MHAB Recruitment Update:</u> There are only three MHAB vacancies we need to fill, one from District 1 and two from District 3.</p> <p><u>Main Board Topic Agenda:</u> A Court Court presentation is scheduled for the August main board meeting.</p> <p><u>SUD Facility Site Visit:</u> MHAB Member Heckl, who volunteered to organize a site visit to an SUD facility, is still working on identifying a site and will provide an update at next month's meeting.</p> <p><u>Annual Report:</u> The annual report will be discussed at the September main board meeting to compile recommendations for the Board of Supervisors (BOS) based on the MHAB's work at both the committee and main board levels. Member Leftwich has volunteered to lead this effort again this year. Additionally, Chair Bloom announced that an ad hoc committee will be discussed at the next main board meeting.</p> <p><u>MHAB Children's Advisory Committee Update:</u> This committee is working on finalizing a recurring schedule and is in the process of sending out a poll to determine meeting preferences. The goal is to start holding monthly meetings by September.</p> <p><u>Care First, Jails Last Ad Hoc Committee:</u> This committee is currently in the planning phase and will begin organizing logistics following the final presentation to the BOS scheduled for August 6, 2024. Several members have expressed interest in participating, including Vice Chair Land, and Members Leftwich, Daprile and Heckl.</p>	

ITEM	DISCUSSION	DECISION/ACTION
<p><b>ACBHD Director's Report</b></p>	<p>Alameda County Behavioral Health Department (ACBHD) Director, Dr. Karyn Tribble provided the following update:</p> <p><u>Quality Improvement and Data Analytics Division Director:</u> Emily Galimba was introduced as the new Division Director for the Quality Improvement and Data Analytics team under Plan Administration. She shared insights into her responsibilities and oversight, along with her background prior to joining ACBHD.</p> <p><u>IST Grant Update:</u> Dr. Tribble confirmed that only individuals deemed felony Incompetent to Stand Trial (IST) by the court are eligible for the IST grant. The new facility will have approximately 88 beds dedicated solely to IST cases, and can be used for their treatment. The program aims to support individuals both during and after their time in jail, aiding in their reintegration into the community. Eligibility may also vary based on specific charges or court restrictions.</p> <p><u>Senate Bill 43 Update:</u> Dr. Tribble highlighted ongoing planning and stakeholder meetings to expand the criteria for placing individuals on 5150 hold, including those with substance use issues. The implementation is scheduled to begin in January 2026.</p> <p><u>ACBHD Strategic Plan:</u> The ACBHD Strategic Plan is now available for review. Dr. Tribble encouraged everyone to provide feedback and to reach out with any questions.</p>	
<p><b>MHAB's Response to MHSA FY 2024-2025 Annual Update Plan (Action Item)</b></p>	<p>Chair Bloom announced that the MHAB Executive Committee recommends that the MHAB adopt the MHSA Three-year Plan letter, with final edits by Vice Chair Land Member Leftwich.</p> <p>Member Thu Quach provided feedback on the recommendations section concerning <i>Prevention, Education, and Intervention (PEI)</i> in the draft letter. She highlighted the importance of assessing the programs' impact, noting the difficulty in isolating specific outcomes and potential impracticality of requesting specific data from the county as it may not be feasible. Member Quach will provide some key points to ensure this feedback is incorporated in to the final draft.</p> <p>A motion was proposed for the board to authorize necessary changes, including grammatical edits to Recommendation 4, in collaboration with Vice Chair Land and Member</p>	

ITEM	DISCUSSION	DECISION/ACTION
	Julie, with a suggested timeline for completion. The motion was moved by Member Leftwich, seconded by Member Gray, and approved unanimously.	
<b>Committee &amp; Liaison Reports</b>	Agenda item not discussed.	
<b>Housing as HealthCare Presentation and Discussion</b>	<p>Supportive Housing Community Land Alliance (SHCLA) Executive Director, Teslim Ikharo, delivered a presentation on SHCLA's involvement in the creation of licensed residential facilities and family engagement in the affordable behavioral housing continuum. Key points from the presentation and discussion include:</p> <ul style="list-style-type: none"> <li>• SHCLA is a community Land Trust or nonprofit organization dedicated to producing affordable housing where the Land Trust owns the land and/or the improvements on the property</li> <li>• SHCLA supports low-income Alameda County residents, particularly those with serious mental health challenges</li> <li>• There are two types of housing: Licensed Board and Care (B&amp;C) and independent Living Homes</li> <li>• SHCLA's goal is to provide assistance and encourages operators of 6-bed facilities to expand to larger operations (i.e., 15-bed facility)</li> <li>• Approximately 1,600 B&amp;Cs went out of business between 2020 – 2023 due to factors such as: facility owner retirement, lack of interest from new generation, reimbursement rates, maintenance costs, and financial unsustainability</li> <li>• Funding streams include BHCIP, Prop 1</li> <li>• Supportive housing is the most effective method to ensure individuals remain housed</li> <li>• B&amp;Cs are very cost effective compared to hospitals or Skilled Nursing Facilities</li> </ul>	
<b>Public Comment</b>	Public comments were given.	
<b>Adjournment</b>	This meeting was adjourned at 5:05 PM.	

# Community Assistance, Recovery and Empowerment: The CARE Act / CARE Court

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Quarterly Advisory Committee

August 19, 2024

Roberta Chambers, PsyD  
[roberta@indigoproject.net](mailto:roberta@indigoproject.net)

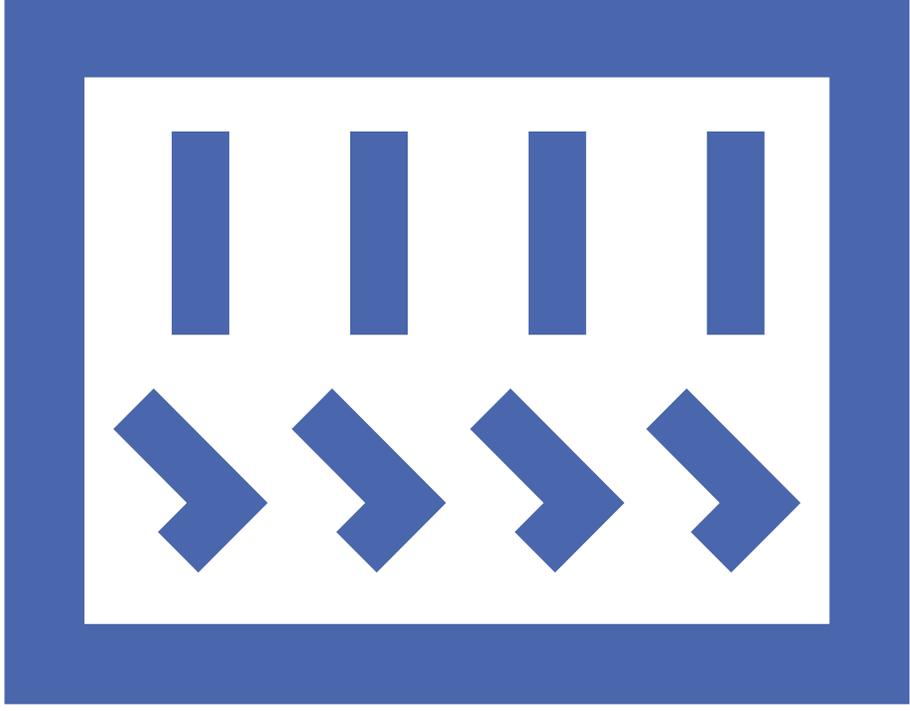
Stacey Smith, MBA  
[stacey@sksc consulting.net](mailto:stacey@sksc consulting.net)



# Agenda

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1. CARE Act Overview
2. Implementation Updates
3. CARE Process Flow and Partner Roles
4. Outstanding Considerations
5. CARE Resources and Trainings
6. Discussion



# CARE Act Overview

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# The CARE Act

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- The CARE Act is a legislation that authorizes CARE Court, a new civil court process to ensure that individuals most impacted by mental health challenges receive the services that they need.
- The purpose of CARE Court is to engage a targeted group of people in community-based treatment to avoid unnecessary crisis, hospitalization, homelessness, and incarceration.
- CARE Court establishes a civil court process whereby the courts can order eligible individuals to participate in a CARE agreement or plan provided by a CARE team for up to 12 months with the possibility to extend for an additional 12 months.
- CARE Court is not optional.
  - If a county does not comply with CARE court they can be fined.
  - If a consumer does not comply with their CARE agreement/plan, this can be used as evidence as a presumption of eligibility in an LPS Conservatorship hearing.
- Alameda County is required to begin implementation by December 2024.

# Who is eligible for CARE court?

The CARE act does not apply to everyone experiencing a mental health issue or homelessness.

The State estimates that 7,000-12,000 people may be eligible statewide (est. 294- 504 in Alameda County), but this is likely a large underestimate.

CARE court is specifically for individuals who are at a high risk of placement in a locked setting, such as a jail or psychiatric hospital.

The purpose of CARE court is to engage those individuals in the community and reduce the need for conservatorship/ confinement.

**5972.** An individual shall qualify for the CARE process only if all of the following criteria are met:

- a) The person is 18 years of age or older.
- b) The person is currently experiencing a severe mental illness...and has a diagnosis identified in the disorder class: schizophrenia spectrum and other psychotic disorders, including substance induced psychosis.
- c) The person is not clinically stabilized in on-going voluntary treatment.
- d) At least one of the following is true:
  - (1) The person is unlikely to survive safely in the community without supervision and the person's condition is substantially deteriorating, and/or
  - (2) The person is in need of services and supports in order to prevent a relapse or deterioration that would be likely to result in grave disability or serious harm to the person or others, as defined in Section 5150.
- e) Participation in a CARE plan or CARE agreement would be the least restrictive alternative necessary to ensure the person's recovery and stability.
- f) It is likely that the person will benefit from participation in a CARE plan or CARE agreement

# Who else may be eligible for CARE court?

- **Penal Code Revisions**
  - The CARE Act amends the penal code and allows for judges to refer someone who is determined to be incompetent to stand trial and *ineligible for diversion* over to CARE court. Before the CARE Act, the judge could only refer to AOT or LPS conservatorship.
- **Insurance Code Revisions**
  - The CARE Act amends the insurance code to require health insurance plans to cover the costs of CARE Act evaluations and CARE plan services

**1374.723.** (a) *A health care service plan...shall cover the cost of developing an evaluation pursuant to Section 5977.1 of the Welfare and Institutions Code and the provision of all health care services for an enrollee when required or recommended for the enrollee pursuant to a CARE agreement or a CARE plan approved by a court regardless of whether the service is provided by an in-network or out-of-network provider.*

**Are people who are Incompetent to Stand Trial eligible for CARE court?**

Yes, if they are determined to be IST and ineligible for diversion, the judge may refer them to CARE court.

**Are people with private insurance eligible for CARE court?**

Yes. The CARE Act requires that health insurance plans pay for the evaluation to determine CARE court eligibility and establish the CARE plan. It also requires that health plans pay for the services included in a CARE plan.

# Who can file a CARE Court petition?

## **A potential CARE Court recipient may:**

Become engaged with Crisis, Emergency Department, or the Criminal Justice System

Be preparing for discharge from an acute, subacute, or other residential setting

Be engaged in services but not doing well

Have multiple interactions with first responders

Be referred to or enrolled in AOT or LPS Conservatorship

Be engaged with Criminal Court

Be engaging with another qualified petitioner

**5974.** The following adult persons may file a petition to initiate the CARE process:

- A person with whom the respondent resides.
- A spouse, parent, sibling, child, or grandparent or other individual who stands in loco parentis to the respondent.
- The hospital where a person is receiving treatment, including psychiatric hospitalization.
- The agency that has provided within the past 30 days or who is currently providing behavioral health services to the respondent or in whose institution the respondent resides.
- A licensed behavioral health professional who has supervised the treatment or been treating the respondent for a mental illness within the past 30 days.
- The county behavioral health agency of the county in which the respondent resides or is found.
- *A first responder, including a peace officer, firefighter, paramedic, emergency medical technician, mobile crisis response worker, or homeless outreach worker, who has had repeated interactions with the respondent*
- *The public guardian or adult protective services*
- *California Indian health services program or California tribal behavioral health department*
- *The judge of a tribal court that is located in California, or their designee.*
- *The respondent.*

# Who participates in the CARE court process?

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Petitioner

Courts

Public  
Defender

County  
Behavioral  
Health

County  
Counsel

Volunteer  
“Supporter”

Health Plan  
(payment  
only)

Other service  
providers, as  
indicated

# What specific services can be included in a CARE plan?

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**5982.** (a) The CARE plan may include only the following:

- 1) Behavioral health services funded through the 1991 and 2011 Realignment, Medi-Cal behavioral health, health care plans and insurers, and services supported by the Mental Health Services Act pursuant to Part 3 (commencing with Section 5800).
- 2) Medically necessary stabilization medications, to the extent not described in paragraph (1).
- 3) Housing resources
- 4) Social services funded through Supplemental Security Income/State Supplementary Payment (SSI/SSP), Cash Assistance Program for Immigrants (CAPI), CalWORKs, California Food Assistance Program, In-Home Supportive Services program, and CalFresh.
- 5) Services provided pursuant to Part 5 (commencing with Section 17000) of Division 9.

**Can CARE court force someone to take medications?**

CARE court allows for

“medically necessary stabilizing medications”

to be included in the CARE plan but does not authorize them to be administered involuntarily.

If a person refused medication, this would be addressed under existing laws and practices (e.g., Riese hearing)

# Implementation Updates

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# Interagency Updates

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Indigo facilitated monthly interagency workgroup meetings and smaller team meetings with ACBHD, H & H, and the Courts; presented at the “all cities” meeting on 4/19; attended HMA’s housing-focused forum on 4/28 & 4/29 and data related training on 6/25; and attended Self-Help training with Self-Help staff on 4/30.

Judges and ACBHD leadership met to discuss their CARE approach and the experience they want people to have in CARE.

H&H and ACBHD met to discuss CARE housing services to be available for CARE respondents.

Self-Help and ACBHD continued collaboration to support Self-Help so that appropriate staff understand the behavioral health and other potential needs of CARE respondents, including what resources are available through what mechanisms.

Judicial officers and OIT staff visited Riverside County CARE site in June, Orange County in July, and San Francisco County in August.

Representatives from the Interagency Workgroup (including Judges, ACBHD, H&H, and Indigo) visited San Diego County CARE Court and program site in July.

ACBHD has procured services for a CARE dedicated FSP Team and 2 CARE dedicated IHOT Teams.

H&H is in contract negotiation to procure the providers who will be providing CARE housing services to CARE participants. <sup>3</sup>

# The Superior Court of Alameda County

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- The Superior Court of Alameda County has continued to focus on the who, what, where, and when of CARE Act Court.
  - CARE Act Court to be held in the Probate Division.
  - Hearings to be held in Wiley Manuel Courthouse Department 103.
    - Ongoing meetings to discuss logistical, technological, and environmental needs
  - Honorable Judge Bean to be the presiding judge.
- Judges and Self-Help Staff are attending Judicial Council trainings and utilizing CJER website training materials to prepare for implementation.
- Judicial Officers have had ongoing meetings with Self-Help and are coordinating with Behavioral Health to learn mental health criterion and resources available through the County's Behavioral Health system.
- With assistance from the Court Public Information Officer, and in coordination with Behavioral Health, the County is planning for mechanisms to publicize Alameda County's CARE Court to reach the greatest number of people.
  - CARE Act Court logo has been selected for marketing, communication, and website use.
  - Draft of CARE Act Court FAQs and Eligibility Criteria for the public in process.
- Court OIT Department is meeting monthly with Behavioral Health to discuss data sharing and information flow for CARE Act Court processes.

# Public Defender's Office

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- Have attended Interagency Workgroup meetings since onset and actively engaged with Cohort 1 counties to inquire about CARE implementation.
- Secured the contract to provide legal representation for CARE respondents.
  - Contract was awarded on June 25, 2024.
- Meeting bi-weekly with current focus on identifying necessary staff to support CARE implementation.
- Attended the following trainings:
  - State Bar of California's CARE Court Convening
  - California Public Defender Association Mental Health Roundtable

# Behavioral Health Department

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- The Full Service Partnership and Intensive Outreach Teams RFP has been awarded.
  - The RFP winner will begin start up in September.
  - 1- 100 person FSP team of 100 and 2- 40 person Intensive Outreach Teams
- ACBH working to operationalize processes and workflows
  - Data/QI team working on developing flags in EHR system to support IHOT team in locating individuals
  - Data/QI team is setting up back end reports for required data collection
  - System of CARE team is finalizing processes and workflows for program
- Meetings with ACBHD & the Courts
  - Will utilize the court portable to send and retrieve vital information (e.g., petitions, assessments, case management updates, exchange of required data for state reporting).
  - Training needs for self-help staff identified and prioritized.
  - Communication plan in the process of being developed.
- Meetings with ACH Housing and Homelessness team on Bridge Housing utilization and process

# Housing and Homelessness Services (H&H)

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- H&H team continues planning and coordination to bring Bridge Housing online
- Continues efforts in expanding staffing capacity
- RFP released for Interim Housing/Emergency Shelter beds
  - Contract negotiations with five sites
  - Targeting over 160 beds; shared and single room settings
  - Connections to Housing Navigation supportive services
- RFP forthcoming for expansion of Licensed Facility (Board and Care) beds
  - Tier 4 beds (40 set-aside) to support those with higher acuity
- In partnership with BHD, Round 3 BHBH funding granted:
  - Additional expansion of housing
  - Outreach and Engagement (Forensic Access Points – Coordinated Entry)
  - Homelessness Prevention

# AC Health Bridge Housing Model Overview

Housing Type	Summary	Capacity
<b>Interim Housing/ Emergency Shelter</b>	<ul style="list-style-type: none"> <li>Shared settings (Rooms to support up to two people; some limited single room availability)</li> <li>Onsite staffing and meals</li> <li>Some sites will allow pets</li> <li>Adheres to County Shelter standards</li> <li><b>Availability:</b> <i>Contracting term start of October 1</i></li> </ul>	160-178 beds
<b>Hotel/Motel Vouchers</b>	<ul style="list-style-type: none"> <li>Average duration of 14 nights, while a longer-term resource is identified</li> <li>FSP teams administered</li> <li><b>Availability:</b> <i>anticipated December/in-development</i></li> </ul>	15 people/ per month
<b>Licensed Facility Beds (Tier 4)</b>	<ul style="list-style-type: none"> <li>Board &amp; Care (shared rooms, two per room)</li> <li>Onsite staffing and meals</li> <li><b>Availability:</b> <i>Three sites projected; RFP in July – online in November/December</i></li> </ul>	40 beds (3 facilities)
<b>Forensic Peer Respite</b>	<ul style="list-style-type: none"> <li>Available to mental health consumers who are justice involved; 14-day stay (average)</li> <li>Serving individuals aged 18-59 with mental health and justice involvement</li> <li><b>Availability:</b> <i>anticipated February 2025</i></li> </ul>	6 beds
<b>Rental Assistance</b>	<ul style="list-style-type: none"> <li>Rental assistance subsidy support for approximately 55 clients</li> <li>Will support temporary subsidy for those at imminent risk of losing current housing</li> <li><b>Availability:</b> <i>on-going</i></li> </ul>	55 vouchers

# CARE Process Flow and Partner Roles

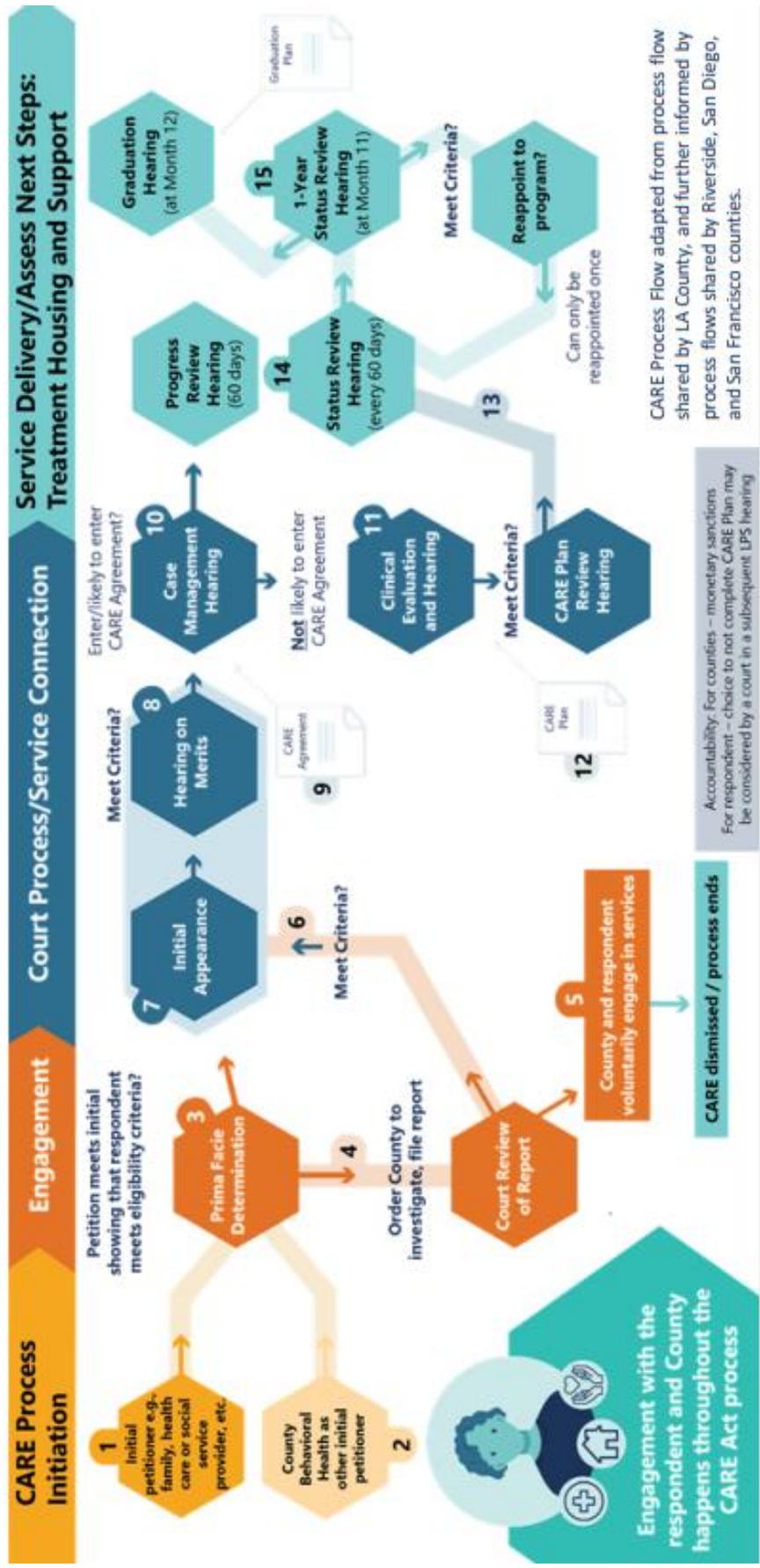
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# CARE Act

# The CARE Process Flow to Treatment, Housing, and Support



## CARE Act Process Flow



CARE Process Flow adapted from process flow shared by LA County, and further informed by process flows shared by Riverside, San Diego, and San Francisco counties.



## Process Flow Details

Crosswalk: the numbers shown here with the following information to learn more details about the CARE Act Process Flow.

## CARE Process Initiation

- 1 A case is initiated when a person petitions the court to determine a respondent's eligibility and begin CARE proceedings. The statute allows for a range of individuals to file petitions, such as family members, health care or social service providers, or first responders.
- 2 County behavioral health agencies may also file petitions

## Engagement

- 3 Initially, the court will decide if the petition shows that the individual meets, or may meet, eligibility criteria for CARE proceedings (i.e., a prima facie showing).
- 4 If the petition was filed by other than the county behavioral health agency, the court will order the agency to investigate and submit a report to determine whether the respondent meets, or is likely to meet, the eligibility criteria.
- 5 During this time, the county behavioral health agency will attempt to engage the respondent in voluntary services and report to the court on the outcome of those efforts.

## Court Process/Service Connection

- 6 If the court finds that the respondent qualifies for CARE proceedings, and efforts to engage the respondent in services was not effective, the case will proceed through the court flow with the goal of connecting the respondent with services. At this point, the court will appoint an attorney to represent the respondent throughout the proceedings, at no cost.
- 7 At the initial appearance, if the petition was filed by other than the county behavioral health agency, the original petitioner is substituted out, and the director of the county behavioral health agency is appointed. During this appearance, the respondent has the option to select a supporter or ask that one be appointed.
- 8 At the hearing on the merits (which can be combined with the initial appearance), the court determines if the respondent meets eligibility criteria under a clear and convincing standard.
- 9 An important component of this court process is that the respondent, their attorney, their supporter, and the behavioral health agency will work together to create a voluntary CARE agreement and engagement in services.

## Court Process/Service Connection continued

- 10** At the case management hearing, if a CARE agreement is not likely to be reached, the court will order the county behavioral health agency to conduct a clinical evaluation.
- 11** The court will review the clinical evaluation and other evidence from the county behavioral health agency and the respondent. The court will also determine if the respondent meets the eligibility criteria and order a CARE plan.
- 12** At this point, the respondent, their attorney, their supporter, and the behavioral health agency will work together to create a CARE plan that includes services the respondent is entitled to receive under the CARE Act. These services should be collaboratively determined, according to the specific needs of the respondent.

## Service Delivery/Assess Next Steps: Treatment Housing and Support

- 13** During service delivery, a respondent will receive services indicated in his/her CARE plan: behavioral health services (including treatment for substance abuse disorder as applicable), medically-necessary stabilization medications (as applicable), housing resources & supports, and funded social services, including those services available to indigent California residents.
- 14** Progress will be checked at status review hearings, at intervals set by the court.
- 15** At month 11, it will be determined if the respondent is either ready to graduate or the respondent maybe reappointed to the program, and continue to receive services under CARE, for up to one year.



## Additional Resources

- Consider viewing the training materials on [CARE-act.org](https://www.CARE-act.org) under training materials, including CARE Act 201: The Client's Journey Through the CARE Act and CARE Act 202: The CARE Agreement & CARE Plan.
- Consider viewing the additional CARE Act briefs:
  - [Eligibility Criteria](#)
  - Supporter Role in the CARE Act

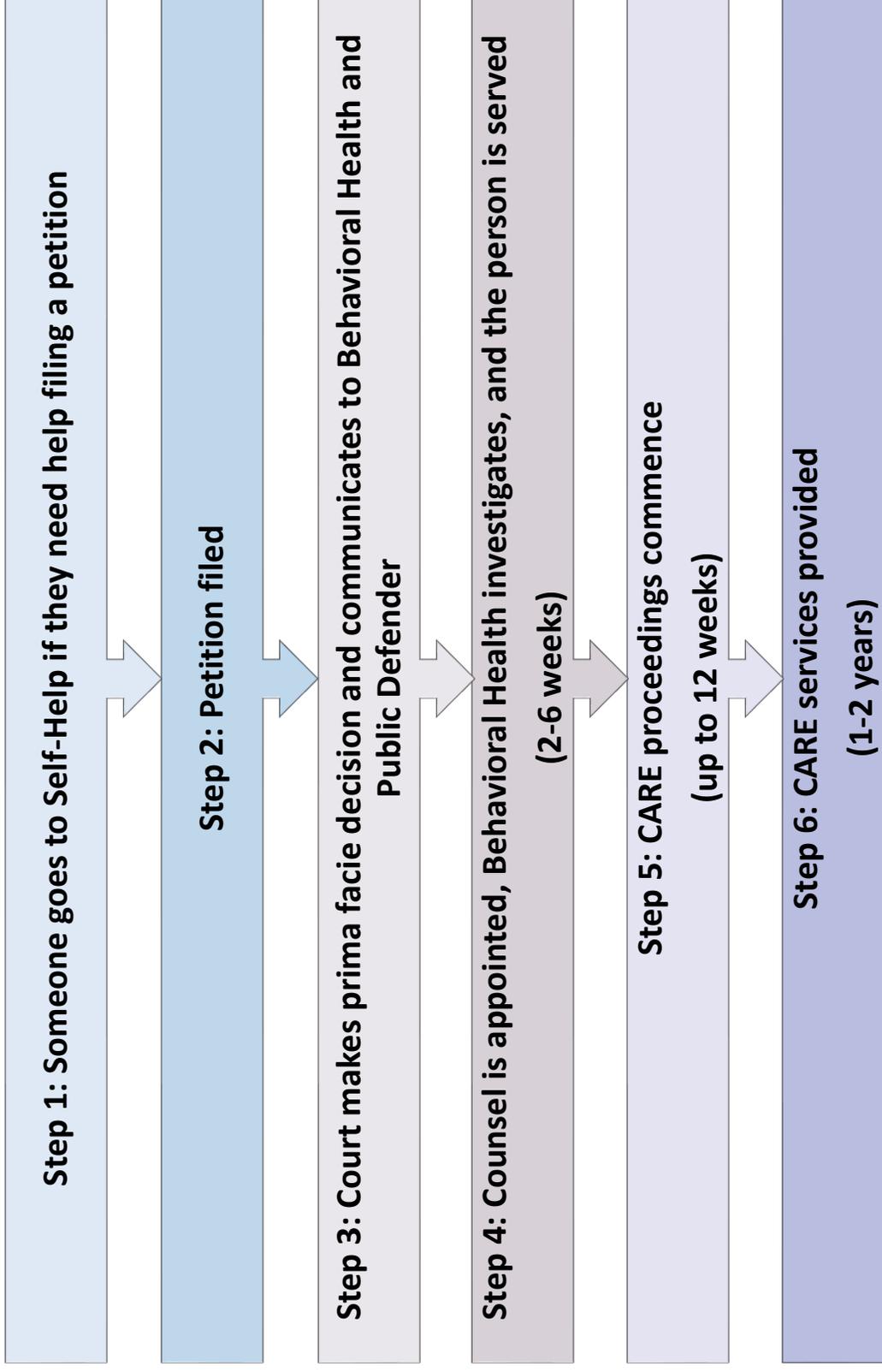


## Statute Language & Citation

The CARE Act Process Flow follows the progression in Community Assistance, Recovery, and Empowerment (CARE) Court Program outlined in [Senate Bill \(SB\) 1338](#).

# CARE Steps at a Glance

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## Step 1. Someone goes to Self-Help if they need help filing a petition

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- ACBHD is collaborating with Self-Help to prepare, including:
  - Training on mental health and de-escalation
  - Information on ACBHD resources, including ACCESS and Crisis Services
- ACBHD/Indigo is planning the trainings for potential petitioners, and will request that contract providers and other partner agencies inform/partner with ACBHD if they are considering or planning to file a petition.

## Step 2. Petition filed

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- ACBHD will file some petitions proactively - plan is to assess the flow of petitions filed at the start of CARE implementation to determine when it is appropriate to begin proactively filing petitions.
  - ACBHD staff is meeting to confirm the information and data capacity needs to proactively file petitions; also mapping out specific process flows.
- Judge Bean will review all petitions filed and use information available to determine if petition meets prima facie standard.

## Step 3. Court makes prima facie decision and communicates to Behavioral Health and Public Defender

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- Court appoints a public defender at this time and orders a CARE assessment to be conducted by ACBHD.
- Court IT team has developed a mechanism where Court communicates to ACBHD and PD when a petition has met prima facie standard.

## Step 4: Counsel is appointed, Behavioral Health investigates, and the person is served

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- ACBHD developing a system to flag anyone for whom ACBHD has been ordered to conduct an assessment, and process flows to support efficiency in investigation and assessment process.
- ACBHD reviews court order, conducts administrative review of records, and deploys IHOT to begin investigation to assess for eligibility.
- CARE IHOT provides report to ACBHD for review and submission to the Public Defender and Courts.
- If CARE respondent suggests they will engage in voluntary services during this period, as a part of their court report, ACBHD will make a recommendation about whether voluntary services should be considered or whether CARE proceedings should continue.
  - For cases where voluntary service engagement may be a viable option, the judge may choose to defer the initial ruling on CARE for 30 days to give the person time to demonstrate they will follow through with voluntary service engagement.
- PD advocates for clients interests in CARE proceedings and engages with clients consistently to build trust so that they will eventually attend court hearings.

## Step 5: CARE proceedings commence

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- If a person does not enter into a CARE agreement at the case management hearing and the Court orders a clinical evaluation, BH will conduct a clinical evaluation.
- ACBHD working with partners (e.g., H&H) to develop a menu of service options available for CARE respondents.
- PD represents clients in all hearings and the negotiation of CARE agreements or plans.
- If CARE agreement not reached and ACBHD ordered to conduct an evaluation, Judge Bean may order a CARE plan at this stage.

## Step 6: CARE services provided

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- CARE services to be provided based on what is in their CARE plan or agreement.
  - Behavioral Health
  - Housing supports
  - Medically necessary stabilizing medications, may be available at court
  - Benefits assistance
  - Other rehabilitation Services
- Ongoing hearings at least every sixty days with status updates for up to 2 years.
  - Public Defender may appear on behalf of respondent and the Court is working towards respondent being able to appear virtually.

# Outstanding Considerations

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# Outstanding Implementation Considerations

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- How will partners manage records requests for people who are commercially insured?
- How will we operationalize the role of volunteer supporter and what training will be available to them?
- At what point will a Psychiatric Advanced Directive (PAD) be offered to an individual who is enrolled in CARE, and who will facilitate the development of the PAD?

# CARE Resources and Trainings

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# CARE Resources

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Consistent information to be provided about CARE no matter where someone presents in the system.

ACBHD and the Self-Help Center are working together to develop a CARE resource page on the Superior Court's Website.

CARE partners (Superior Court, ACBHD, Public Defender's Office, and Housing & Homelessness Services) will provide relevant CARE information on their websites with a link to the CARE resource page.

Interagency partners collaborating with their Public Information Officers to develop a county communication strategy.

CARE Act Court logo has been selected for marketing, communication, and website use.

Draft of CARE Act Court FAQs and Eligibility Criteria for the public in process.

# CARE Trainings

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- General Community Education is being planned collaboratively by the Courts and ACBHD
- Specific trainings for potential petitioners, partners, and other stakeholders is being planned by the Indigo Project, including:
  - ACBHD Service Providers, Staff, and Contracted Providers
  - H&H Staff (formerly OHCC)
  - Alameda Alliance, Healthcare for the Homeless Coalition, Hospital Council
  - Emergency Departments, First Responder, Local Subacute Facilities
  - Public Guardian, SSA, District Attorney, Probation
  - NAMI, POCC, FASMI, Housing Advocates



*Thank You*

## Works-Wright, Jamie

---

**From:** Works-Wright, Jamie  
**Sent:** Friday, August 16, 2024 11:35 AM  
**To:** Works-Wright, Jamie  
**Subject:** FW: Brown Act Ruling: Remote Participation for those with Disabilities

Hello Commissioners,

Please see the information and article 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](mailto:JWorks-Wright@berkeleyca.gov)

*Office: 510-981-7721 ext. 7721*

*Cell #: 510-423-8365*




---

**From:** CAL BHBC <cal@calbhbc.com>  
**Sent:** Friday, August 16, 2024 10:14 AM  
**Subject:** Brown Act Ruling: Remote Participation for those with Disabilities

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*Sharing forward from the CA State Association of Counties (CSAC):*

[ERIC LAWYER STANICIA BOATNER](#)

**August 15, 2024**

A recent [opinion](#) issued by the Office of the Attorney General (AG) found that the federal Americans with Disabilities Act (ADA) requires that individuals with disabilities can participate in Brown Act meetings remotely, without the need to post the address of their remote meeting location. The decision could improve accessibility for individuals with permanent or temporary disabilities serving on Brown Act bodies.

Previously, in a [2001 opinion](#) on the same topic, the AG's office declared that physical presence was an essential job function, thereby not requiring reasonable accommodation under the ADA. However, the new opinion reflects the significant shift in public meeting practices following the COVID-19 pandemic, where remote participation

became more common. The AG now concludes that in-person attendance at Brown Act meetings is no longer an essential job function as defined in the ADA.

The opinion does impose certain conditions for those participating remotely without opening their location to the public. Participants must identify any adults who are also present with them in the room from which they are participating, including their relationship to the participant. Additionally, no action can be taken on agenda items if the participant's connection is disrupted.

[Link to Article](#)

**Works-Wright, Jamie**

---

**From:** Works-Wright, Jamie  
**Sent:** Thursday, August 8, 2024 3:58 PM  
**To:** Works-Wright, Jamie  
**Subject:** FW: CALBHB/C | August Newsletter - Please share with mental/behavioral health board/commission members & staff!

Hello Commissioners,

Please read!!!! See below

Jamie Works-Wright

Consumer Liaison

[Jworks-wright@berkeleyca.gov](mailto:jworks-wright@berkeleyca.gov)

510-423-8365 cl

510-981-7721 office



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**From:** CAL BHBC <cal@calbhbc.com>  
**Sent:** Thursday, August 8, 2024 12:52 PM  
**Subject:** CALBHB/C | August Newsletter - Please share with mental/behavioral health board/commission members & staff!

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

**Reminder:** By January 1, 2025, mental and behavioral health boards and commissions should update membership rosters and bylaws

[August 2024 Newsletter](#)

to comply with CA law. [Welfare & Institutions Code](#)

Helpful resources are highlighted in the newsletter, including “**Bylaws (Sample)**” and “**Membership Guide**” (Sample).



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

CALBHC/C Newsletter, August 2024

**In this Issue:**

- [Advocacy](#)
- [Grants/Funding](#)
- [Issue Briefs](#)
- [Proposition 1 Update](#) (Link to website)
- [Reports & Webinars](#)
- Board/Commission: [Resources](#)
- State/National: [Meetings / Events](#)
- [Welfare & Institutions Code](#) (Link)



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

Website: [www.calbhbc.org](http://www.calbhbc.org)  
Email: [info@calbhbc.com](mailto:info@calbhbc.com)

**CALBHC/C Meeting & Training**  
Hybrid (Zoom/Redding\*)  
September 7th, 2024  
9:30 am - 3:30 pm

Please Register: [www.calbhbc.org/registration](http://www.calbhbc.org/registration)  
There is no fee to register.

**Meeting** 9:30 am - 12 pm

**Updates from Statewide Organizations:**

- CA Association of Local Behavioral Health Boards/Commissions (CALBHC/C)
- CA Behavioral Health Planning Council (CBHPC)
- Mental Health Services Oversight & Accountability Commission (MHSOAC)
- Peer Provider Certification Update

**Issue-Based Discussion:**  
Local board/commission members will have the opportunity to share local successes and/or challenges

**Training** 1 pm - 3:30 pm

- Unconscious Bias (1 pm - 2:30 pm)
- Community Engagement: Ensuring Citizen & Professional Involvement At All Stages of the Local Planning Process. Training includes:
  - o Behavioral Health Services Act (BHSA) Integrated Plan Requirements
  - o Cultural Requirements

Please Register: [www.calbhbc.org/registration](http://www.calbhbc.org/registration)

\*CALBHC/C will pay lodging and travel expenses for one member per county in the Superior Region, but all are welcome! We will provide coffee/pastries and a deli-style lunch buffet to all attendees.

California Association of Local Behavioral Health Boards/Commissions [www.calbhbc.org](http://www.calbhbc.org)

## Works-Wright, Jamie

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**From:** Works-Wright, Jamie  
**Sent:** Tuesday, August 6, 2024 9:31 AM  
**To:** Works-Wright, Jamie  
**Subject:** Agenda Items for September 26 MHC meeting

### Internal

Hello Commissioners,

Reminder that we have a vacation for the month of August and we will reconvene in September.

Please submit any agenda items that you would like to discuss by Monday, September 9, 2024 and anything you would like to submit to the packet, please send by Monday, September 16.

If you have questions you would like to ask Jeff to put in his manger report, please send my way by September 9<sup>th</sup>.

### Jamie Works-Wright

Consumer Liaison

[Jworks-wright@berkeleyca.gov](mailto:jworks-wright@berkeleyca.gov)

510-423-8365 cl

510-981-7721 office



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