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ORANGE COUNTY BOARD OF SUPERVISORS



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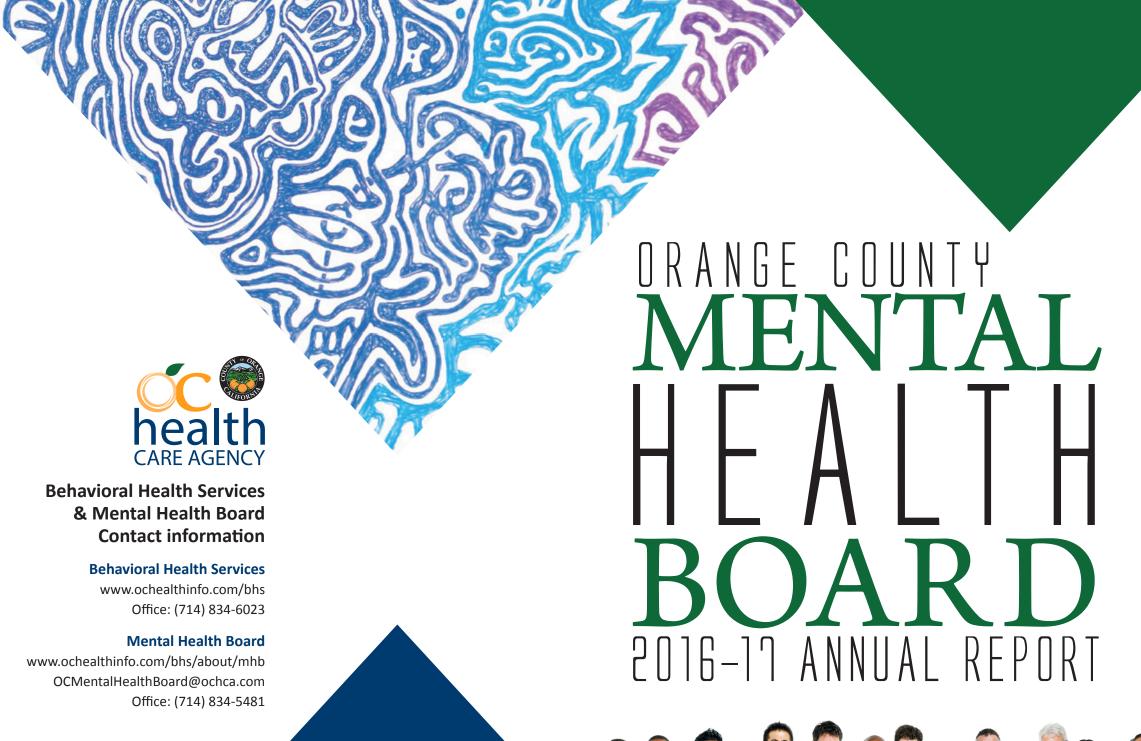
Lisa A. Bartlett5th District Supervisor

2016-17 MHB Recommendations to the Board of Supervisors:

- Create opportunities for funding smaller community based organizations within county procurement or look at changing county contracting policies to allow more flexible methods of rewards for smaller specialty organizations.
- Create policy changes and support funding streams that allow for an increase in the number of beds across the treatment continuum (inpatient psychiatric, gero-psych beds, board and cares, shelter plus, residential substance use treatment).
- Create policy changes and support funding streams that increase available housing options for those individuals who are homeless and mentally ill.
- Consider proposing legislation that would bridge conflicts between mental health and neurology (specifically dementia disorders).
- Look at policies that may inadvertently promote and sustain stigma around mental health.

2016-17 MHB Recommendations to Behavioral Health Services:

- Increase the availability of bilingual clinicians in languages other than the threshold languages.
- Increase the number and range of co-located services (wrap around).
- Expand the availably of OC links to include weekends and evening hours.
- Explore the possibility of developing an older adults "Silver Tree House."
- Create programing and service lines to meet the needs of older adults with a co-occurring diagnosis of Mild Cognitive Disorder, Dementia or Alzheimer's disease.
- Expand the anti-stigma campaigns across the county.
- Increase the number of older adults served across all programs including MHSA programming.



he 2016-17 annual report of the Mental Health Board (MHB) is submitted in accordance with California Welfare and Institutions Code 5604.2(a). Under state law, the MHB is required to review and evaluate the mental health needs, services, and special projects in the Orange County Community. The MHB requirements also include advising the Board of Supervisors (BOS) and Behavioral Health Services Director as to any aspect of the local mental health programs.

About the Mental Health Board:

The MHB is comprised of 15 volunteer members plus one member of the Orange County Board of Supervisors. Each Supervisor makes an individual appointment, and the MHB Nominating Committee also recommends the appointment of new members. The categories of membership includes:

- Member of the Orange County Board of Supervisors
- Consumer
- Family Member
- Mental Health Professional
- Public Interest



Mental Health Board Members for 2017:

Supervisor Andrew Do

(appointed 2016, continues in 2018) 1st District

Alisa Chatprapachai, OTD, OTR/L

(appointed 2015, continues in 2018) Public Interest - 2nd District Appointee

Tia Christian

(appointed 2017; resigned 2017) Public Interest

Karyl Dupee, LMFT

(appointed 2016, continues in 2018) Public Interest - 1st District Appointee

Sandra Finestone, Psy.D

(appointed 2016, continues in 2018) Direct Consumer/Family Member

Diana Heineck

(appointed 2017, continues in 2018) Direct Consumer

Matthew Holzman

(appointed 2016, continues in 2018) Family Member Vice Chair 2018

Brian Jacobs

(appointed 2010, resigned 2017) Family Member

Judith Lewis

(appointed 2010, resigned 2017) Family Member

Karyn Mendoza, LCSW

(appointed 2013, resigned 2018) Family Member

Carolyn Nguyen, MD

(appointed 2010, resigned 2018) Mental Health Professional

Michaell Rose, DrPH, LCSW

(appointed 2012, continues in 2018) Public Interest - Chair 2017, 2018

Fasi Siddiqui

(appointed 2016, continues in 2018) Public Interest - 5th District Appointee

Gregory Swift, MFT

(appointed in 2011, continues in 2018) *Vice Chair 2017 - 4th District Appointee*

Joy Torres

(appointed in 2016, continues in 2018) **Direct Consumer**

Vacant MHB positions as of March 2018:

3rd District Appointee Rep Direct Consumer/Family Member Direct Consumer/Family Member Direct Consumer/Family Member Public interest Mental Health Professional

Mental Health Board Initiatives and Goals:

Each year, the MHB has an annual retreat planning meeting to brainstorm and prioritize goals and objectives for the year. This strategic planning session gives board members and participants the opportunity to foster creative thinking, processing of ideas and the enthusiasm and commitment necessary to successfully fulfill established objectives. On Tuesday, January 10, 2017, the MHB met and established the following major objectives for 2017:

- Increase Board of Supervisors (BOS) participation and interaction with MHB
- Increase community participation in MHB meetings
- Conduct two site visits
- Find collaborative opportunities with other county departments
- Increase knowledge about BHS related to:
- Outreach for consumers and families
- ☐ Mental health and housing issues

In 2017, the MHB met twice a month during a Study Committee Planning Meeting and General Meeting. The MHB serves as a link between the BOS and Behavioral Health Services (BHS) by advising the BOS and BHS Director regarding community behavioral health care services.

MHB Committees and Liaison Responsibilities:

In 2016-17, MHB members served on a variety of direct MHB Committees, while others served as liaisons to other Boards:

MHB Committees

Executive

Older Adult Services

Board of Supervisor Committee

Data Notebook

Gaps in Services

Finance and Resource Committee

Membership

Liaisons to other Boards/Committees:

Alcohol & Drug Advisory Board

California Association of Local Behavioral Health Boards and Commissions (CALBHBC)

Community Action Advisory Committee (CAAC) Community Quality Improvement Committee (CQIC)

Mental Health Services Act (MHSA)

Stepping Up Initiative



adults. One of the committee's goals is to review

- MHSA Committee: This committee was deeply engaged with the Mental Health Services Act (MHSA) Steering Committee during 2016-17, participating in all of the year's meetings. The Mental Health Board also reviewed the MHSA Steering Committee's proposed programs and funding levels and had the opportunity to provide recommendations on the proposed MHSA plan. Proposals forwarded to the BOS included transportation, additional training for BHS staff in EMDR, housing and a number of other significant improvements in the system of care.
- **CALBHBC**: Orange County Mental Health Board Members, Fasi Siddiqui and Alisa Chatprapachai were elected South Directors of the California Association of Local Behavioral Boards and Commissions (CALBHBC) in Spring 2017. Together, they have facilitated more partnerships among 11 mental health boards in the region. In addition, Alisa was elected Vice President of the CALBHBC in Spring 2017.
- Board of Supervisors Communications Committee: This year, there is representation of mental health board members from all supervisorial districts. Between 2016-2017, a team of two mental health board members visited each member of the Board of Supervisors and/or their representatives in each district to discuss new collaborative efforts. We are also grateful to have Supervisor Do represented on the board.
- Gaps in Services Ad Hoc Committee: This committee received a wide variety of input and feedback from key community stakeholders via focus groups, telephone conversations, and public comments. The gaps in services identified

include but are not limited to:

- ☐ In-home mental health for parents and children age 0-5 ☐ Specially trained service providers for the visually im-
- paired community
- ☐ Culturally and linguistically appropriate services for various refugee populations
- ☐ Mental health services for those with developmental disabilities (not regional center eligible); lack of workforce who is skilled and trained to work with those who have disabilities
- ☐ Lack of cross linkage/referrals between systems
- ☐ Co-occurring treatment facility in Orange County
- ☐ Medical detox beds in Orange County
- ☐ Robust services for emancipated foster youth

In addition, these smaller specialty providers all agree that the funding streams for their services are very limited. The BHS and MHSA process for contract procurement is regulated and cumbersome and often not viable for smaller nonprofits. Current funding streams and their respective process favors larger generic providers, leaving many gaps in services for smaller high risk groups in the community.

Older Adults Committee: This committee was reinitiated this year and is comprised of one MHB member and a wide range of community representatives who are all focused on older adult services and treatment. This committee shall provide information and propose actions and policy positions to the MHB regarding the mental health needs of older

current OC Health Care Agency (OCHCA) Behavioral Health Older Adult services and the effectiveness of the MHSA Three-Year Program and Expenditure Plan for fiscal years 2017/18 - 2019/20 pertaining to older adult's mental health needs. Another goal is to assess and evaluate gaps and barriers in current mental health services to older adults based on data from OCHCA and MHSA.

CAAC: The Community Action Advisory Committee (CAAC) advises the Health Care Agency on issues related to funding on mental health services in Orange County through the Mental Health Services Act (MHSA). Between 2016-2017, CAAC members visited and surveyed 85% of all MHSA Programs and provided valuable input to the MHSA Coordinator. Through this survey, they ensured all programs provided services are of high quality, accessible. culturally competent, client-driven, consumer

and family focused, recovery and resiliency-focused and

cost-effective.