



**MINUTES
REGULAR MEETING OF THE
MENTAL HEALTH COMMISSION
NOVEMBER 12, 2013 – 3:30 P.M.**

The Mental Health Commission met in a regular meeting on Tuesday, November 12, 2013 at 3:30 p.m. in the Administration Building, 1717 N. Indian Hill Blvd. # B, Claremont, California.

CALL TO ORDER

Chair Bloom called the meeting to order at 3:30 p.m.

ROLL CALL

A visual roll call was taken.

PRESENT:

Arny Bloom, Chair
Sylvia Whitlock, Ph.D., Vice-Chair
Betsy MacLaren, Secretary
Cheryl Berezny
Joseph M. Lyons, Ph.D.
Ashley Nielsen, MSW
Donald R. Perez
Toni L. Watson
Davetta Williams

ABSENT:

Paul Capraro
Maria Elena Garcia
Twila L. Stephens

STAFF:

Jesse H. Duff, Executive Director
Toni Navarro, LMFT, Director of Clinical Program Services
Dr. David Block, Psychiatrist III
Mica Olmos, Executive Assistant

I. APPROVAL OF MINUTES FROM THE MENTAL HEALTH COMMISSION MEETING HELD OCTOBER 8, 2013

There being no comments, Commissioner Whitlock moved, and Commissioner Watson seconded, to approve the Minutes of October 8, 2013. The motion was carried by the following vote: AYES: Commissioners Berezny, Lyons, MacLaren, Perez, Watson, and Williams; Vice-Chair Whitlock; and Chair Bloom. NOES: None. ABSTAIN: Commissioner Nielsen. ABSENT: Commissioners Garcia, Capraro, and Stephens.

II. PRESENTATION

A. AN OVERVIEW OF WHAT TRI-CITY CLINICAL PROGRAMS ARE DOING TO MEET THE TRIPLE AIM GOALS SET FORTH FOR HEALTHCARE REFORM

Director of Clinical Program Services Navarro stated that today's presentation will be about integration, the Affordable Care Act and how it applies to Tri-City. She then introduced Dr. David Block, Tri-City's new lead Psychiatrist, noting that he expends 70% of his time working with her administratively, with the best practices department, the medical support staff, and the clinical teams to improve protocols and move Tri-City into the 21st century regarding integrated care and improvement on how Tri-City provides services. She then talked about the Institute for Healthcare Improvement (IHI) who conducted a global study about the current problems associated with healthcare and, as a result, identified three primary goals to improve the healthcare systems and developed the *Triple Aim Initiative*, which is the basis of the Affordable Care Act. She then showed a 7-minute video that provided an overview of the IHI Triple Aim.

The video talked about the IHI Triple Aim design which states that there are three dimensions that must be implemented simultaneously: 1. improving the health of populations; 2. improving the patient experience of care (quality and satisfaction); and 3. reducing the cost of health care per capita. A concept design was developed to fulfill the IHI Triple Aim and is made up of five components: 1. focus on individuals and families; 2. redesign of primary care services; 3. integration; 4. per capita cost reduction; and 5. prevention and health promotion. IHI Triple Aim also has measures to tell if implementations are on track to improvement.

Director of Clinical Program Services Navarro stated that in the past few years, Tri-City has completed successfully the goals of the Triple Aim in a number of ways such as reducing the number of crisis situations, noting that currently most of crisis referrals are non Tri-City clients; conducting triage meetings twice a week, wherein the on-call teams conduct assessments of people at risk and proactive wellness checks on at-risk clients; and have expanded the psych/tech department, licensed under the nursing board of State of California, in order to meet and address integrations issues and how to get clients to access medical care and medical treatment as needed.

Dr. Block talked about his professional background and his medical approach to integrated services. He then stated that he was going to talk about what staff is doing in Tri-City both internally and externally regarding connecting with Tri-City's community partners, specifically with the integration of the medical aspect of care. He stated that internally, Tri-City is enhancing what takes place when an individual comes in for a med support visit. He reported that individuals with serious and persistent mental illness die on average 25 years earlier from physical problems, such as cardiac related illnesses, than those without a serious and persistent illness. Therefore, Tri-City is hiring a medical assistant to help streamline the gathering of vital signs data such as blood pressure, weight, and obtaining information about all the medication clients are taking, not just from Tri-City but also from primary care physicians, smoking assessing, and provide a feeling of a primary care visit. He added that this is important because staff is enhancing and updating Tri-City's Electronic Health Records System, noting that in the next three to six months they are implementing e-

prescribing to see all the medications that an individual is taking and figure out if there will be any drug interactions. Also, Tri-City had re-establish its connection with the Pomona Valley Medical Center Family Residency Program by having every few months a second year family medicine resident shadowing individual psychiatrists coming into inquiry to obtain exposure to community mental health. In addition, Tri-City is offering services to clients where they can visit Tri-City to ensure that they are taking their psychiatric medications correctly and also assist them to be compliant with their physical medications. He then reported attending a conference, along with Director of Clinical Program Services Navarro, named *Integrating Substance Use Mental Health and Primary Care Services*, wherein it was discussed the evidence based practice called SBIRT –Screening Brief Intervention and Referral for Treatment, which SAMHSA –Substance Abuse and Mental Health Services Administration, is promoting as a comprehensive integrated public health approach for early intervention in treatment of persons currently abusing substances, including tobacco. As a result, he will be working with Director of Clinical Program Services Navarro and the clinical staff using the SBIRT approach and focus on the smoking issue since it is tied to cardiac problems and nicotine induces the metabolism of a lot of the psychiatric medications that Tri-City gives to clients.

Commissioner Dr. Whitlock stated that most psychiatrists are MD's and that there are MD's that provide psychiatric services that have a specialty in something else, and inquired if the later are less likely to refer people with mental illnesses. Dr. Block replied in the affirmative, noting that the majority of mental health services are provided by family medicine doctors and not by psychiatrists.

Commissioner Watson inquired if part of the screening process will include screening for over the counter medications. Dr. Block replied in the affirmative, noting that the screening will include medication that is prescribed, over the counter, illicit and any medicinal products such as supplements and natural herbal products.

Commissioner MacLaren inquired if Tri-City staff was checking clients for diabetes. Dr. Block replied that, depending on the medication clients are taking, staff checks the blood sugar before a client starts treatment and continues to monitor over the course of the treatment. He indicated that this practice is not something that staff routinely does for every client that visits Tri-City because is not an American Diabetes Association guideline or an American Psychiatric Association guideline; however, if the client is overweight or has a history of diabetes, staff will check blood sugar levels before starting treatment, noting that it is just not cost effective to have the test done on every single client.

Dr. Block then talked about what Tri-City is implementing externally and noted that he is part of the Integrations Committee and hears about the concerns that clients, consumers, and patients have; about how patients are treated by their psychiatrist; or how rushed patients are by their primary care doctor. Therefore, staff will place mental health posters in the offices of primary care physicians to empower and educate clients; and to communicate a message indirectly to patients that the doctor's office is aware that people suffer from mental illnesses and that they are ready to talk to patients about it. He also reported that staff had finalized a Needs Assessment for primary health care offices throughout the Tri-City area regarding what they need or would like to learn about mental health.

Director of Clinical Program Services Navarro added that by having a lead psychiatrist on staff, and listed as the doctor collaborating in the project with the community trainers, has made a big difference and has encouraged more primary physicians to complete the surveys.

Dr. Block then talked about the lunch-n-learn meetings for the healthcare community, noting that last week the first one took place and that about 25 people attended. He explained that the goal of these meetings is to have substance use treatment providers, mental health providers, and primary care providers, meet and learn about a topic that they may not know a lot of, noting that the first meetings are focusing on mental health. He added that at the conclusion of the meeting, staff surveys the attendees to determine what they need more of and be responsive to what the community needs. Also, because many of Tri-City clients also have significant health problems, Tri-City recently hired a psychiatrist that is also board certified in family medicine in order to treat clients who are more medically complicated, and to be able to coordinate care between Tri-City doctors and their internal medicine doctors. He concluded that Tri-City is implementing all these changes per the direction of the Triple Aim Initiative.

Commissioner Nielsen referred to Dr. Block's comment about the Pomona Valley Family Medicine Program, and inquired how Dr. Block sees that partnership either growing or expanding for the integration of care. Dr. Block replied that Tri-City staff provides primary and family doctors, who are the majority of medical doctors treating mental illnesses, exposure to psychotic illnesses and help reduce stigma and preconceptions about mental illnesses; and in turn, family doctors can feel more comfortable treating clients who suffer from a mental illness and not just treating the mental illness part. He added that Tri-City staff is also going to develop a closer connection with Western Medical School to get medical students interested in community mental health in this area, as they will be more likely to practice in this area, noting that it is hard to recruit for highly trained and high quality psychiatrists in this area.

Dr. Lyons complemented both Director of Clinical Program Services Navarro and Dr. Block on the progress that has been made on the integration of care and also talked about the importance of prevention and early intervention and having primary care physicians be more than just prescribers of psychiatric medications. He also stated that he hoped that, in the near future, stigma is not an obstacle for people getting the appropriate health care.

Dr. Block stated that being a primary care doctor has always being tough and their job will become more complicated due to the demands imposed on them by the Affordable Care Act. This is also the time to be considerate of doctors and Tri-City will assist by asking them what they need to make their job easier as it relates to mental health.

The Mental Health Commission thanked Dr. Block for his presentation.

III. REPORTS

A. EXECUTIVE DIRECTOR

Executive Director Duff reported that Tri-City made a second bankruptcy payment to the State of California and the Los Angeles County in the amount of \$843,000, noting that it has been possible by operating more efficiently and effectively. He then talked about the MSHA 3-Year Plan planning and stated that the workgroups that were created had already met several times and are working quicker than anticipated. He reported that Tri-City staff participated in the NAMI Walks and raised over \$10,000, ranking 3rd in the county. He then announced that Tri-City's holiday party will take place on December 12th at the Pomona Valley Mining Company and the Commission was invited. He then talked about the housing projects, noting that they are not finished and staff is currently working with the developers and several community partners to develop a coalition for supportive housing. He then complimented Clifford Beers for continuing to be in partnership with Tri-City and for pursuing the project, noting that Tri-City has not had much financial involvement in contrast with the half million dollars that Clifford Beers has already invested. He then reported that Senate Bill 82 was recently enacted and created a significant amount of State funds for the purpose of enhancing crisis services, indicating that \$40 million will be allocated for the Los Angeles County Region. He then stated that he received a call from Marvin Southard, Director of the Los Angeles County Department of Mental Health, wanting to find out if Tri-City was interested in partnering with the Los Angeles County to provide urgent mental health care services.

Director of Clinical Program Services Navarro added that under the terms of SB 82 there are two grant opportunities; one intended to increase the availability of crisis triage personnel, and the second for one-time funds for capital infrastructure for these emergency services. Therefore, the Los Angeles County would like to partner with Tri-City for the urgent care center to be located in the City of Pomona in order to provide urgent beds for the East San Gabriel Valley. She noted that with the full support and cooperation from the Los Angeles County, Tri-City will be developing a proposal for a mobile triage team to include a licensed psych/tech, a therapist, and a navigator, who will be providing the 5150 assessment as needed to the Pomona Valley ER and help reduce their burden.

At 4:45 pm Dr. Lyons left the meeting.

Commissioner Perez inquired if this will require a new system of services. Director of Clinical Program Services Navarro replied in the negative, noting that it will simply be an enhancement to current services to include 5150 services which will be provided at the Emergency Room of the Pomona Valley Hospital. She then distributed flyers for the upcoming lunch-n-learn meeting.

COMMISSION ITEMS AND REPORTS

Commission Nielsen announced that, since the month of November is National Caregiver Awareness Month, the Claremont Community Senior Services will be providing free massages for caregivers on November 13th and 18th.

Chair Bloom stated that he would like to have a copy of the Tri-City program summaries, which include RBA data and a description of each program, as presented during the delegates' workgroups meetings. Director of Clinical Program Services Navarro stated that they are being updated and will be distributed at the Delegates' meeting of December 5th.

Commissioner Perez stated that he had attended some of the workgroup meetings and that they were excellent and well organized. He then complemented staff in charge of organizing these meetings.

PUBLIC COMMENT

There was no public comment.

ADJOURNMENT

At 4:50 p.m., on consensus of the Mental Health Commission its meeting of November 12, 2013 was adjourned to a Joint Meeting with the Governing Board of the Tri-City Mental Health Center to be held on **Wednesday, December 18, 2013 at 4:45 p.m.** in the Clinical Building, 2008 N. Garey Avenue in Pomona, California.



Micaela P. Omos, Executive Assistant