



MINUTES

REGULAR MEETING OF THE MENTAL HEALTH COMMISSION JUNE 13, 2023 – 3:30 P.M.

The Joint Governing Board and Mental Health Commission held on Tuesday, June 13, 2023 at 3:37 p.m. in the MHSA Office located at 2001 North Garey Avenue, Pomona, California.

CALL TO ORDER Chair Henderson called the meeting to order at 3:37 p.m.

ROLL CALL Roll call was taken by JPA Administrator/Clerk Olmos.

MENTAL HEALTH COMMISSION

PRESENT: Anne Henderson, Chair
Wray Ryback, Vice-Chair
Carolyn Cockrell, GB Member Liaison
Clarence D. Cernal
Nichole Perry
Joan M. Reyes
Twila L. Stephens

ABSENT: Isabella A. Chavez
Toni L. Watson

STAFF: Rimmi Hundal, Executive Director
Elizabeth Renteria, Chief Clinical Officer
Seeyam Teimoori, Medical Director
Dana Barford, Director of MHSA & Ethnic Services
Mica Olmos, JPA Administrator/Clerk

REGULAR BUSINESS

I. APPROVAL OF MINUTES – GOVERNING BOARD AND MENTAL HEALTH COMMISSION JOINT MEETING OF MAY 17, 2023

There being no comment, Commissioner Cernal moved, and Commissioner Reyes seconded, to approve the Governing Board and Mental Health Commission Minutes of their Joint Meeting of May 17, 2023. The motion was carried by the following vote: AYES: GB Liaison Cockrell; Commissioners Cernal, Reyes, and Stephens; Vice-Chair Ryback; and Chair Henderson. NOES: None. ABSTAIN: None. ABSENT: Commissioners Chavez and Watson.

II. PRESENTATION

A. “RECOVERY MOMENTS” STORY

Dominique King, Psychiatric Technician on the Psychiatric Assessment Care Team (PACT), shared a client’s recovery story of an individual referred by the police department. She explained that her main goal, in addition to safety, is to meet the individual where they are at and treat them with dignity and respect; that assessments are integrated experiences and that not everyone who is assessed for a higher level of care or psychiatric hospitalization necessarily goes to the hospital. She indicated that in the case of the individual, she found that criteria for hospitalizations were not met, and the person required a personal follow-up plan; that she obtained permission from the individual to perform daily follow-ups and that the individual was very receptive and that she was able to build trust with the individual, gathered pertinent information to build a custom treatment plan, and was able to assist with linkage to the Access to Care department. She added that the individual felt a sense of accomplishment and was able to go through the process at their own pace. Since the individual did not have transportation and verbalized their concern about not being able to follow-up with the scheduled intakes, she advocated for the individual and was able to transport the individual to and from their formal intake appointments. She concluded by stating the importance of follow-up, linkage to resources, and making sure the individual knows all their available options.

Commissioner Ryback inquired about the various forms of communication with clients. Psychiatric Technician King replied that communication can be over the phone, in person and even email.

B. OVERVIEW OF GENOA PHARMACY LOCATED AT TCMHA ADULT OUTPATIENT CLINIC—2008 N GAREY AVENUE IN POMONA, CA

Eliane Paz, Pharmacist of Genoa Pharmacy, provided an overview of the functions of the Genoa Pharmacy located at the Tri-City Mental Health Authority adult outpatient clinic. She explained that Genoa Pharmacy has a focus on behavioral health, which is an advantage compared to the traditional retail pharmacy that is not equipped to deal with that population; and do not have mental health expertise, the time to address the medication barriers or financial burdens a patient may be experiencing, and are not integrated into the care team. She stated that the Genoa Pharmacy staff is physically on site and can discuss the various barriers that patients may be experiencing, including able to speak to the insurance companies and provide payment plans for their medication; and when patients cannot make a payment, they can still get their medication; that they offer bubble packaging, which is a prefilled medication organizer that has different colors for different times of the day that allows patients to know when they have taken their medications; provide weekly and monthly mobile packs; offer a delivery service on Mondays, Wednesdays and Fridays at no additional cost for those patients who have a transportation barrier; assist with prior authorizations; that their process is a lot faster due to close contact with the care team; and that they are able to get the medication to the clients before approval since they continue to work on it until it is approved. Also, since Genoa Pharmacy is on-site, they can address the various medication barriers and help with medication adherence and able to follow up with the patients, which in turn decrease emergency room visits and hospitalizations. She then provided data on medication services, number of clients, and number of prescriptions filled, noting that the retention rate is 92.7%. She then explained that clients are continuously transitioning out of medication monitoring from the Full-Service Partnership (FSP), Adult Outpatient, and the pharmacist can continue to simplify the process by repacking it for the patients and making sure that they are taking their various medications on time and at the right time.

Commissioner Reyes referred to patients who are unable to pay and inquired if their medication is charged to MHSA funds. Pharmacist Paz replied that many times the insurance company will pick up the charge if there is a hardship; however, it is on a client-to-client basis. Executive Director Hundal stated that MHSA funds do not pay for medication, but flex funds can be used if the client is in Full-Service Partnership (FSP).

Pharmacist Paz reported that that a majority of the patients served at the pharmacy have Medi-Cal; that between June and August, there is a usually a lapse in coverage due to the Medi-Cal renewal period; that when this occurs, they communicate with the care team to facilitate the process and if clients are not be covered, they can still receive their medication from Genoa; that once the coverage has been reinstated, staff can go back and bill their Medi-Cal. She expressed that it is a great thing because during the renewal period at retail pharmacies patients cannot get their medication if they are not covered.

Commissioner Reyes asked if the pharmacists deal with the homeless. Pharmacist Paz replied in the affirmative, noting that they do deliver to the homeless; that they work closely with the FSP and AOP teams and they deliver the medication on behalf of the pharmacy.

Commissioner Ryback inquired if Genoa records are integrated with Tri-City Mental Health Authority's electronic health record. Chief Clinical Officer Renteria replied in the negative, adding that although it would be ideal, it is not being done yet. Medical Director Dr. Teimoori added that due to compliance laws and regulations.

Commissioner Cockrell inquired if Genoa provide services to community members who are not Tri-City clients. Pharmacist Paz replied in the affirmative, noting that although they do not advertise publicly, they are open to the public; they mail medications; they are full service and service everybody regardless of insurance; that they accept almost all of the big insurance providers and if there is one that they do not have a contract with, they can work on that.

Commissioner Cernal inquired about the size of the pharmacy staff. Pharmacist Paz responded that there are two staff members: one pharmacist and one technician; two per diem pharmacists, a per diem technician, and the delivery drivers; that at most, there are 4 people working at a time due to California law.

Medical Director Dr. Teimoori stated that Tri-City staff is always trying to improve care to its clients by providing high quality care and easy access to medication; and that this is the reason for having the Genoa pharmacy on-site. He added that all feedback received regarding the pharmacy has been positive; and that before having the pharmacy on-site, there were gaps in treatment due to a lack of communication between the pharmacy, patient, and the primary care providers, and provided an example. He also shared that if a Tri-City client is not picking up their medication at Genoa's pharmacy, Tri-City staff finds out very quickly since the pharmacy staff work very closely with the doctors.

Commissioner Ryback inquired about Genoa's focus on behavioral health. Pharmacist Paz stated that the pharmacy started as behavioral health focused; that the company was bought by Optum, and since then it has branched out into more primary care sites; and that most of their pharmacies are still behavioral health focused.

III. EXECUTIVE DIRECTOR MONTHLY REPORT

Executive Director Hundal reported that the Strategic Plan is underway; that the Governing Board and Commission Members will be hearing from the consultant to get their feedback for Tri-City's Strategic Plan; that there will be virtual interviews as well. She then announced that June is Pride month, which is recognized in June because of its historical ties to the Stonewall Riots in 1969; and indicated that she provided resources and a list of events in her report. She added that Tri-City has a Rainbow Council, an advisory council to the Tri-City Executive Team that provides culturally relevant services for the LGBTQ+ communities, and discussed the dates and times when they meet, encouraging everyone to attend. She also reported that this year staff will honor Juneteenth, which was approved last year as an additional paid holiday by the Governing Board and shared resources regarding Juneteenth celebrations taking place in the community. She added that the African American Wellness Council is taking a break due to virtual fatigue; that the Diversity, Equity, and Inclusion Coordinator is going out into the community and meeting people where they are, and that hopefully meetings will begin in person again at the African American Museum of Beginnings.

Commissioner Reyes inquired about the Strategic Plan feedback process. Executive Director Hundal explained that the Five-Year Strategic Plan is to give Tri-City a roadmap to where Tri-City should go in the next five years, and it will also help the organization apply for grant monies; that the consultant assisting with the creation of the Strategic Plan will ask questions and allow for a non-biased plan; that the consultant will develop a vision statement based on feedback received from the Mental Health Commission, Governing Board, staff, and community members.

Discussion ensued regarding the consultant interviews and the framework of the interview questions to obtain feedback and that there will be no right or wrong answer; about certain ideas for the Strategic Plan; and about the Tri-City rebranding project status which resulted in Tri-City's new slogan which was printed on posters and various communication mediums.

Commissioner Cernal inquired about the status of the Advisory Councils. Director of MHSA and Ethnic Services Barford replied that except for the Rainbow Group, the groups are the same; and explained the circumstances and the barriers to connect with the community. She also shared the various activities and proposed solutions such as reaching out to other counties to find out other strategies; and that since events are going back to in-person, staff are hoping to meet people in their own community, at colleges, or cultural centers, noting that going to the community is better due to the stigma that mental health has; that certain cultures view mental health in a negative light; that if Tri-City attends a community event or partners with a cultural organization, it is a bit more subtle and inviting; and that at this moment, having groups set up with a certain number of people meeting every month is not working.

Commissioner Reyes inquired about working with the Native American community. Director of MHSA and Ethnic Services Barford responded that a connection was made with a cultural broker; that they did a training in the Wellness Center; that the presenter brought in artifacts, performed a dance, and talked about Native Americans and mental health; that it has not been expanded and a group has not been formed; however, this is something that is on staff's radar.

Discussion ensued regarding what a cultural broker is; about how to reach the Native American and AAPI communities; about how to engage and get to know employees that identify as Native American; about the importance to build trust first; and about the connection with the Costanoa Rumsen tribe, which staff will continue to pursue opportunities there.

Governing Board Liaison Cockrell inquired about the Costanoa Rumsen tribe gathering location. Executive Director Hundal replied that they have a center where they connect, meet, and have their circles with the elders once a month; that staff used to attend those meetings; that in the past, they used to come and perform for the MHSA meetings; and that staff will continue connecting with them.

COMMISSION ITEMS AND REPORTS

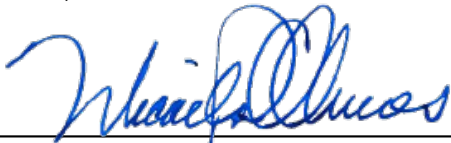
Chair Henderson reported that her church is having Tri-City present on Suicide Prevention for their Wellness Series. They have two dates set: July 8th and July 15th.

PUBLIC COMMENT

There was no public comment.

ADJOURNMENT

At 4:17 p.m., on consensus of the Mental Health Commission its meeting of June 13, 2023 was adjourned. The next Regular Meeting of the Mental Health Commission will be held on Tuesday, July 11, 2023 at 3:30 p.m., in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.



Micaela P. Olmos, JPA Administrator/Clerk