



MINUTES

REGULAR MEETING OF THE MENTAL HEALTH COMMISSION FEBRUARY 13, 2024 – 3:30 P.M.

A regular meeting of the Mental Health Commission was held on Tuesday, February 13, 2024 at 3:35 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 3:35 p.m.

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

MENTAL HEALTH COMMISSION

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

ABSENT: Clarence D. Cernal
Isabella A. Chavez
Toni L. Watson

STAFF

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

REGULAR BUSINESS

I. APPROVAL OF MINUTES FROM THE DECEMBER 20, 2023 GOVERNING BOARD AND MENTAL HEALTH COMMISSION REGULAR JOINT MEETING

There being no discussion, Commissioner Reyes moved, and Commissioner Stephens seconded, to approve the Minutes from the December 20, 2023 Governing Board and Mental Health Commission Regular Joint Meeting. The motion was carried by the following vote: AYES: GB Liaison Cockrell; Commissioners Reyes and Stephens; Vice-Chair Ryback; and Chair Henderson. NOES: None. ABSTAIN: None. ABSENT: Commissioners Cernal, Chavez and Perry.

II. APPROVAL OF MINUTES FROM THE JANUARY 9, 2024 MENTAL HEALTH COMMISSION REGULAR MEETING

There being no discussion, Vice-Chair Ryback moved, and Commissioner Reyes seconded, to approve the Minutes from the January 9, 2024 Mental Health Commission Regular Meeting. The motion was carried by the following vote: AYES: GB Liaison Cockrell, Commissioners Reyes and Stephens; Vice-Chair Ryback; and Chair Henderson. NOES: None. ABSTAIN: None. ABSENT: Commissioner Chavez and Perry.

III. PRESENTATION – OVERVIEW OF PROPOSED CHANGES TO THE MENTAL HEALTH SERVICES ACT (MHSA) THROUGH PROPOSITION 1 ON THE MARCH 2024 BALLOT INITIATIVE, AND ITS PROJECTED IMPACT ON MENTAL HEALTH SERVICES AND PROGRAMS

Director of MHSA and Ethnic Services Barford indicated that she will explain the impact that Proposition 1 will have on MHSA funding, noting that Proposition 63, the Mental Health Services Act (MHSA) is a voter initiative from 2004; and that Proposition 1, the Behavioral Health Services Act (BHSA), is designed to change the MHSA. She explained that in March of 2023, Governor Newsom announced his plan for behavioral health reform to improve how California treats mental illness, substance abuse disorders, and homelessness; that the ballot initiative is designed to modernize the MHSA by amending it; that the name will be changed from MHSA to BHSA; that the ballot is also combined with AB 531; and that it will go before the voters on March 5, 2024. She then discussed the various changes that Proposition 1 will bring such as the funding will go from five MHSA plans with designated funding, to three categories under BHSA with very specific funding percentages. She stated that currently all MHSA programs are administered at a local level and with the new initiative, the Workforce Education and Training, Innovation, and prevention programs will be funded at the State level.

Vice-Chair Ryback inquired if the programs will still be administered locally even though they will be funded at the State level. Director of MHSA and Ethnic Services Barford responded in the affirmative, and pointed out that she will discuss during her presentation the reduced amount of funding which counties will be required to apply.

Director of MHSA and Ethnic Services Barford stated that if the BHSA is passed, it would change the distribution of the original Mental Health Services Act funds and create a new funding source for substance use disorder services; it would create a new structure for the community planning process, data collection, reporting and accountability; that one of the biggest changes will be that all funding will be incorporated into the annual updates and three year plans instead of just the MHSA programs and will showcase how everything integrates and supports each other; and that the State's tax allocation they take before it is distributed to the counties, will increase from 5% to 10%.

Commissioner Reyes inquired about the origin of the MHSA funding. Director of MHSA and Ethnic Services Barford responded that the funding is from the millionaire's tax, and that the 5% of this funding that is taken by the State before it is distributed to the counties, will increase to 10%.

Executive Director Hundal added that the millionaire tax remains the same, which 1% on every dollar earned over a million dollars and is allocated to the counties; that in the past state took 5% before the funding was distributed to the counties, and now the State would take 10%, noting that there is no new tax.

Director of MHSA and Ethnic Services Barford continued to explain that the BHSA would eliminate locally controlled funding for community prevention programs as well as workforce education and training; that the funding would no longer be distributed directly to TCMHA to implement projects and eliminate locally controlled funding for innovation projects. She indicated that the Mental Health Services Oversight Accountability Commission (MHSOAC) will have \$20 million in funding, which counties can apply for through a competitive process, and then implement the projects; she noted that counties currently have their own funding. She also stated that the BHSA would also eliminate the funding for Capital Facilities and Technological Needs (CFTN), which will result in funding for buildings and technology would be taken away and it will not allow to transfer CSS (Community Support Services) funds to support CFTN. She then discussed the current MHSA Program Placement: 1) Community Services and Support (CSS) Plan is 76%; 2) Prevention and Early Intervention (PEI) Plan is 19%; 3) Innovation (INN) Plan is 5%; and that CSS supports 4) WET Plan, and 5) CFTN Plan. She explained that these categories and percentages of funding will change with Proposition 1, noting that Housing will be 30%; Full-Service Partnership (FSP) will be 35%; and Behavioral Health Services and Supports (BHSS) will be 35%; and also discussed the proposed services that would be provided under each category. She indicated that if passed BHSA would go into effect on July 1, 2026 and discussed the proposed budget under Proposition 1/SB 326 using the existing numbers from Fiscal year 2023-2024 since it cannot predict what the numbers will be in 2026. She reported that it is estimated that the County would need to allocate approximately \$4.9 million to Housing, noting that TCMHA currently allocates \$637,083 to Housing, which means there would be a 667% increase in spending; that the Housing allocations would need to serve at least 50% of the chronically homeless populations and up to 25% could be dedicated to capital projects within the housing department; and that there will be restrictions on how the money can be spent, for example, substance use or mental health treatment services cannot be funded through the housing category.

Commissioner Reyes inquired if the \$4.9 million will be allocated by the County or by TCMHA. Director of MHSA and Ethnic Services Barford responded that it is the amount to be allocated by TCMHA, pointing out that the 30% percentage allocation will be the same for all the counties.

Director of MHSA and Ethnic Services Barford then stated that TCMHA's current budget for FSP is \$5.2 million; and that the projected amount under BHSA will be \$5.7 million, which is about an 8% increase. She then stated that 35% of the funding will be allocated to BHSS; that at least 51% of this funding needs to be allocated for early intervention programs and within that program 51% needs to be dedicated to individuals ages 25 and under; that 49% or less of Early Intervention needs to serve ages 26 and over; and that the remaining percentage would be dedicated to the rest of the programs; that it is estimated that there will be a decrease in funding of about 53% (\$6.5 million); thus, existing funding would be essentially cut in half. She added that Proposition 1 consists of SB 326 and AB 531; that TCMHA has been tracking the bill for months including meetings with California Behavioral Health Directors Association and other Counties; that if it is passed, TCMHA will continue to review the guidelines and requirements for Proposition 1 as they consider each program and how it is impacted; that the goal is to preserve as many MHSA programs as possible and meet Proposition 1 criteria; that any proposed changes to programming will be presented to the Mental Health Commission, the Governing Board and the stakeholders for review and feedback; that the transition will take time since the Proposition goes into effect on July 1, 2026; that existing programming developed under the last Three-Year Plan, will continue to be in place, noting that annual updates, public hearings, and the stakeholder process will continue.

Vice-Chair Ryback inquired about the intention of the legislature by shifting so much funding to housing and what the legislature expects counties to do. Executive Director Hundal replied that it is not clear what the state expects counties to do; however, it is supposed to help the homelessness crisis in California. Director of MHSA and Ethnic Services Barford added that the focus of the legislation is in the ballot measure and that the state is looking at this from a very high level, not from a county level, noting that the MHSOAC is not made of people who work in counties; that there have been many meetings with the California Behavioral Health Directors Association and various counties to share feedback and prepare fiscal monitoring tools; that many of the changes made were based off the feedback from counties; that the legislature is also desiring councils to draw down on federal funds.

Discussion ensued regarding how TCMHA staff is working, along with a financial consultant, to determine how funding and programming will be affected, available options, and the best way to move forward and continue in serving the TCMHA residents; about the bond measures placed on the ballot, what has been said about how the bonds will be paid; about the root cause of homelessness, funding for homelessness, and the possibility of the measure passing; about not enough information available regarding housing requirements under Proposition 1.

A member of the public referred to the 667% budget increase for housing and the fact that no substance use or mental health services would be allowed in the category; and inquired how they are going to house individuals without supporting the tenants with services. Executive Director Hundal replied, that although they cannot provide supportive services with the funding under this category, there will be other ways to provide supportive services or other kinds of services from other pockets. Member of the public further inquired if any of the funding would come from the State directly and if so, if all counties would have to bid and fight for those funds. Director of MHSA and Ethnic Services Barford mentioned that the State might create prevention programs at the State level that TCMHA can apply for those, but there is not enough information available.

Discussion ensued regarding the 10% tax the State will take from the counties; about current housing laws which states that TCMHA cannot require individuals to receive mental health services; about housing for current clients and the new guidelines for the allocation funds which may cover anyone in the community, not just a TCMHA client.

Commissioner Stephens stated that initially clients need to be in TCMHA services to be in MHSA housing, but once they are housed, they are no longer required to continue with the services; that the State is talking about is expanding the definition of Supportive Services; that the State is also discussing different ways to fund housing components such as security deposits and application fees.

Discussion ensued regarding factors that make it difficult for a homeless individual to receive housing; about housing timelines for how long someone can be in the application process; and about the funding it would take to expedite the process; about conceptually the state might develop state level prevention programs that counties can apply for access, being noted that there are no specifics, but that it would be a top-down structure.

Director of MHSA and Ethnic Services Barford continued to report that Workforce Education and Training might be impacted including, staff sustainability, loan repayment plans, training and more; that TCMHA can apply for whatever is offered at the state level but it will not be something that is for TCMHA based on needs assessment; and there are no details available. She added that TCMHA will continue to deliver services; that staff have been strategizing for months; that

they will come back with more information in March; and that staff have 2.5 years to see how everything unfolds and any changes to the information currently available.

Commissioner Reyes commented about the time when MHSA was being proposed, stating that there were petitions, signs, and Public Service Announcements about MHSA. She inquired if there was anything about Proposition 1 being promoted. Executive Director Hundal shared that it has been promoted on television but that Proposition 1 was Governor Newsom's initiative so there was not a petition for this bill.

IV. EXECUTIVE DIRECTOR MONTHLY REPORT

Executive Director Hundal reported that February is Black History Month during which it is recognized the impact that African Americans have made in the United States; that this celebration was created in 1926 by Carter Woodson, a noted African American historian, scholar, educator, and publisher; that it is celebrated in February to coincide with Frederick Douglas and Abraham Lincoln's birthdays; and mentioned a variety of events to celebrate African American History Month. She then encouraged the Commission to spread the word that the MHSA department will be hosting meetings to go over Proposition 1 with the community. She also reported that the IT department are continuing to upgrade the network infrastructure at all TCMHA sites to improve WI-FI connectivity and have faster network.

Governing Board Liaison Cockrell inquired if there was an invitation or flyer regarding the informational meetings about Proposition 1 that Commissioner can share with the community. Executive Director Hundal replied in the affirmative, noting that the flyer is posted on the website and that it will be emailed to the Commissioners.

COMMISSION ITEMS AND REPORTS

Vice-Chair Ryback provided an update about the PAD (Psychiatric Advanced Directive) Innovation project, stated that last week, a small IT team did a site visit and observed for a few hours how the PADs work with their behavioral health patients in the emergency department. She also stated that although they have not been accepted yet, they are proposing a couple of staff members, including herself, to present at the Southern California Association of Healthcare Risk Management conference, which takes place annually to educate risk management and patient safety professionals, attorneys, and insurance professionals. She shared that she is hoping she can start discussing PADs with those who are involved in the process of advanced care planning for mental health treatment.

Commissioner Reyes commented that it is a concern about the increase in suicide rates; and talked about a few recent events where she heard about people who committed suicide; that the median age has now dropped to 16 for those committing suicide; and inquired if the Department of Mental Health or any mental health facilities have started looking more intensely at the situation. Executive Director Hundal shared that it is a concern; that staff goes through training about knowing the signs and stigma reduction; that Chief Clinical Director Renteria is working on a zero-suicide program. Vice-Chair Ryback added that from a healthcare perspective, it is a national topic; that it is one of the top 10 patient safety concerns; and that providers are very aware and are putting a lot of things in place to have an impact.

Chair Henderson shared that the Lions Club set up the new playroom at the new pediatric wing at Pomona Valley Hospital; and that there will be a Grand Opening on the February 29th from 2:00-4:00 p.m.

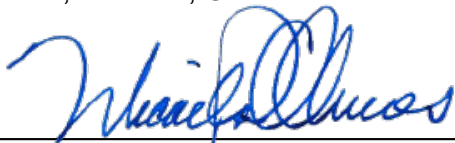
PUBLIC COMMENT

Lisa Naranjo, Program Supervisor -PEI, announced that Green Ribbon Week is from March 18th-22nd; that this year's theme is "Thrive in Mind"; that every year staff brings awareness to mental health and how to reduce the stigma; that one of the best ways to support local, first responders is by reducing the stigma around mental health; that all events are posted on TCMHA website; and that anyone in the community is welcome to come to any of the events.

Sara Rodriguez, MHSA Programs Manager, distributed information about the community forum (MHSA stakeholder meetings) stating that there are two virtual options at noon and 5:30pm; and that her contact information is available on the flyer.

ADJOURNMENT

At 4:30 p.m., on consensus of the Mental Health Commission, its meeting of February 13, 2024 was adjourned. The next Regular Meeting of the Mental Health Commission will be held on Tuesday, March 12, 2024 at 3:30 p.m., in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.



Micaela P. Olmos, JPA Administrator/Clerk