



ANNUAL REPORT 2020

Mendocino County Behavioral Health Advisory Board



Prepared by Michelle Rich, MA, Board Chairperson

Table of Contents

Executive Summary.....	2
About the Board.....	3
Meetings.....	3
Special Meetings.....	3
Committees.....	3
Board Members.....	1
Current Board Members.....	1
Recognition of Service.....	1
Where We Are Now.....	1
Covid-19.....	1
Measure B.....	2
Barriers to Service.....	2
Moving Forward.....	3

Executive Summary

On so many levels 2020 was not the year we expected and the Behavioral Health Advisory Board adapted along with everyone else to the new way of doing business: at a distance. Just as we adapted, we also experienced loss. Our members lost jobs, houses, and loved ones. The board changed as members stepped down and we had to figure out how to continue fulfilling our duties in this new virtual world.

Despite this, we still reviewed contracts, engaged new members, and advised Behavioral Health Services on topics ranging from suicide prevention to the Measure B training facility. We heard reports from the substance abuse treatment program, MHSA, and the Assisted Outpatient Treatment program. We monitored incoming data to hold the providers accountable. And we even managed to complete our annual data notebook (with thanks to the Behavioral Health staff for support on data collection). We did our best to advocate for those who cannot.

In this report you will find the details about our activities in 2020 and a snapshot of the state of mental health now and some thoughts on what the future might hold. While there are so many issues that could be discussed, this report focuses on a few that seem of particular relevance as we conclude the year: staffing, COVID-19 adaptations, Measure B, stigma reduction, and housing.

We hope for a better 2021 as vaccines are developed and our lives become more routine again. But the reality of budget cuts and long-term mental health implications leave a shadow over the coming year. Moreover, many of the systemic problems in the mental health system as a whole have only been exacerbated by the pandemic. With this in mind, the Behavioral Health Advisory Board remains committed to our mission to support the delivery of quality care that aims for recovery, human dignity, and the opportunity for people to meet their full potential.

Warmly,

Michelle Rich
Chairperson

About the Board

The Mendocino County Behavioral Health Advisory Board (BHAB) serves as an advisory board to the Board of Supervisors and the Behavioral Health & Recovery Services Director. Mandated by state law, BHAB consists of 15 board members who represent consumers, family members, and the public. Additionally, one county supervisor sits as a non-voting, ex-officio member. As our mission states, BHAB is committed to consumers, their families, and the delivery of quality care with the goals of recovery, human dignity, and the opportunity for individuals to meet their full potential.

Meetings

In 2020, BHAB held 11 regular meetings and one special meeting. The COVID-19 pandemic and subsequent shelter-in-place order that occurred in March, 2020 necessitated the cancellation of the March regular meeting. The board typically meets the third Wednesday of the month at locations throughout the County. The shelter-in-place order resulted in the April through December meetings being held by Zoom. To make this accommodation, meetings were also limited to two-hours in duration.

The change to an online, shorter meeting did impact the breadth of topics covered as well as the ease of public comment. We did adapt our public comment format over the year to ensure that the public was able to comment both during specified open public comment at the beginning as well as on each agenda item. While we were able to conduct business by Zoom, it is not the preferred method of doing business and we hope that 2021 will bring opportunities to engage with each other and the public safely in-person.

Special Meetings

BHAB held one special meeting on March 6, 2020 with the purpose of engaging in a brief strategic planning exercise and deeper discussion of the board's role and responsibilities. While the subsequent out-break of the pandemic did affect the implementation of some of the identified goals, the special meeting did result in the following priorities for 2020:

- Review contracts
- Change focus Annual Report to emphasize current state of mental health in Mendocino County
- Education around stigma and discrimination
- Outreach
- Legislative Advocacy
- Measure B Involvement
- Supporting Stepping Up initiative

Committees

There were three ad-hoc committees during 2020 as follows:

Membership Committee: Emily Strachan, Meeka Ferretta, and Michelle Rich

Contracts Committee: Emily Strachan, Lynn Finely, Sergio Fuentes and Michelle Rich

Appreciation Committee: Richard Towle and Martin Martinez

Nominations Committee: Flinda Behringer and Michelle Rich

Board Members

2020 brought many transitions for BHAB. Long-time chairperson Jan McGourty's term ended in 2019 and Michelle Rich stepped into the role of chairperson. Additionally, many members experienced changes in their personal lives not only from COVID-19, but also from the many challenges and opportunities that life brings. The board began the year with several vacancies, and though we did bring on new members, other members stepped down. The board is still actively seeking to fill the remaining four vacancies.

Current Board Members

1st District:

Denise Gorny
Lois Lockart
Richard Towle

2nd District:

Michelle Rich
Sergio Fuentes

3rd District:

Amy Buckingham

4th District:

Julia eagles

5th District:

Martin Martinez
Flinda Behringer
Jo Bradley

Officers:

Chair: Michelle Rich
Vice-Chair:
Secretary: Dina Ortiz/ Jo Bradley
Treasurer: Richard Towle

Recognition of Service

Thank you to the following former members of the board. We appreciate your service to the community and wish you well.

- Jan McGourty
- Patrick Pekin
- Emily Strachan
- Lynn Finley
- Tammy Lowe
- Dina Ortiz
- Meeka Ferretta

Thank you!

The Behavioral Health Advisory Board would like to extend a special thanks to Supervisor Carre Brown for her many years of service to the county and for her attention and contributions to mental health in our county.

We would also like to recognize the service of the staff members of the Behavioral Health Services department in particular the leadership of Dr. Jenine Miller as well as the administrative support of Lilian Chavoya and Dustin Thompson.

Where We Are Now

Historically, Mendocino County has shown relatively high rates of adults needing and receiving behavioral health services as compared to other California counties ([Healthy Mendocino website](#)), Behavioral Health Services and its Administrative Service Organization (ASO henceforth) have made strides in improving access, serving clients and responding innovatively to the challenges COVID-19 has presented. However, there still remain challenges and gaps in the overall system of care particularly outside specialty mental health.

One of the primary issues that has become acute this year revolve around providing adequate, trained staff in particular licensed therapists. Both within the county and in the ASO and its contracted agencies, attracting and retaining qualified providers remains a critical problem. Assessments, case plans, and therapeutic services are only as good as the ability of staff to provide them. Lack of staff places high volumes of work on existing staff and increases risk of staff burnout, especially so with the COVID-19 Shelter-in-Place order.

Additionally, the Behavioral Health Services Administration has taken on more supervision of other programs, including the absorption of Measure B. This additional workload does complicate ensuring that there is adequate staff to accomplish core functions, particularly in light of the projected mental health budget cuts.

Lastly, there has been a great deal of discussion with the Board of Supervisors, the broader community, and with BHAB itself, about the outcomes of the mental health system. Due to privacy issues, we don't necessarily see the results of client's journeys to wellness. However, there is ample data to suggest that clients are receiving appropriate and timely care. Both the ASO and the Behavioral Health Department provide detailed reports each month to BHAB and are responsive to requests for more data. The challenge is not necessarily access to information, it's how to interpret the information to show the human impact of the dollars spent by the mental health system.

Covid-19

Mental health services are considered essential services and the Behavioral Health Services and the ASO have continued providing services throughout the year. However, there have been changes in how services are delivered. Most services have moved to telehealth with some in-person options available as necessary. Behavioral Health Services has also operated a COVID-19 warm line and offered virtual support groups by Zoom. The support groups are available to the general public and not only specialty mental health clients.

The COVID-19 pandemic has precipitated a wave of mental health issues with implications well into the future. Isolation does exacerbate mental health symptoms and the additional stress on individuals and families has led to increase in suicides, domestic abuse and child trauma, as well as increase in substance abuse. Additional impacts on mental health come from the stress of illness, job losses, food insecurity,

political uncertainty, and social strain of implementing recommended pandemic protocols (masking in particular). BHAB members report that there are more instances of racial prejudice and harassment in public venues related to the pandemic social distancing requirements.

Measure B

BHAB was represented by Vice-Chair Meeka Ferretta in both the Measure B monthly meeting and the training center ad hoc committee. Michelle Rich represented Measure B in a collaboration with NAMI and the Behavioral Health Department to present recommendations for services that would address gaps in the system that could be funded now by Measure B. The recommendations that were approved by Measure B were for housing for seriously mentally ill individuals on the coast, community outreach, aftercare for individuals discharged from hospitalizations who do not have Medi-Cal, and for supporting the mobile crisis team. The only recommendation not supported by the Board of Supervisors was the housing for seriously mentally ill individuals on the coast.

Barriers to Service

The system of care has adopted a no wrong door approach to receiving services there are still three significant barriers beyond the system itself notably stigma and discrimination and access to safe, affordable housing.

Given the increase in stress and strain there are more people needing support particularly in the mild to moderate. Yet, asking for help is difficult and widespread public education and peer support is needed to reduce the stigma that comes with asking for help and the potential for discrimination with family and in the workplace. County Behavioral Health Services are for the specialty mental health population and the burden of outreach and education for the whole community lies beyond their scope of work. This is an area that could be contracted to an outside entity such as NAMI and funded through Measure B funds. Education for the mild and moderate population in this capacity would go a long way to reducing the need for higher levels of care in the future.

Ensuring that those experiencing serious mental health conditions have stable housing increases their access to services and participation in their road to wellness. It is difficult to make and keep appointments, keep track of medications, and maintain a wellness routine if one does not have stable housing and is experiencing the ongoing trauma of living on the streets. We know that there is an intersection between homelessness and mental health. The County has taken advantage of grants and partnering with other agencies to provide housing such as the in the Willow Terrace permanent housing project and the purchase of the Best Western on Orchard Street in Ukiah for transitional housing project. However, NIMBY-ism and lack of public education about why stable housing is so critical for this population continue to create barriers for these types of projects. Public education and continued grant-seeking and community partnerships are critical for providing the level of needed housing for the seriously mentally ill population.

Moving Forward

As we look to the future it is important to realize that Behavioral Health Services will likely continue to be impacted by funding reductions from the state. The exact projections vary, but will likely be significant particularly because Behavioral Health Services do not receive substantive County funding. With fewer MHSAs realignment dollars to serve as Medi-Cal match, this will translate to fewer services. Now is not the time for Mental Health Services to do less. Without early intervention, prevention, and additional treatment at the mild to moderate level, the mental health crisis instigated by the COVID-19 pandemic will cause lasting effects to the mental well-being of Mendocino County residents well into the future. In the long-run this could cause unsustainably high costs for more intensive care. Interventions now will make a profound difference in the future of mental health services in Mendocino County. To that end, BHAB submits the following three recommendations:

1. Designate an ad hoc committee to make actionable recommendations for increasing adequately trained professionals, for example, a psych tech program, student loan forgiveness programs, housing incentives for relocating, partnering with a research university to develop a pipeline of appropriate professionals (similar to the Adventist Health Residency program), and encouraging retention of existing employees through incentives and appreciation programs.
2. Support stigma reduction and community education efforts across the county.
3. Continue to develop housing options at all levels for the seriously mentally ill population and host community meetings at the locations of proposed projects to address concerns about NIMBY-ism.