

County of Santa Cruz

Mental Health Advisory Board

PO Box 962 Santa Cruz, CA 95061 (831) 454-4767

Re: 2018-2019 Biennial Report of the Santa Cruz County Advisory Board

Dear Members of the Board:

On behalf of the Santa Cruz Mental Health Advisory Board, we are enclosing the 2018-2019 Biennial Report that highlights our activities. The Mental Health Advisory Board would like to thank the Santa Cruz County Board of Supervisors for the continued support that they provide to the Behavioral Health Services Division of the Health Services Agency, to our Board and to the Community.

The Mental Health Advisory Board is a group of volunteer appointed representatives. Our primary functions are to provide oversight and monitoring of the mental health system, advise the Board of Supervisors and the Director of Behavioral Health, review and evaluate the community's mental health needs, services, facilities, and special problems, ensure that community members are involved in the planning process for providing behavioral health services, and advocate for persons dealing with behavioral health issues.

We invite you to read the highlights of our last two years of efforts, advocacy, involvement, and caring. Highlights include Suicide Prevention, Childrens Mental Health, County Office of Education, Santa Cruz County Jails, Substance Use Disorder Treatment, Mental Services Act Committee, Peer support: NAMI, MHCAN, Second Story, as well as our Mandated responsibilities and goals for 2020. We look forward to continued support and involvement for the Santa Cruz County Board of Supervisors and Behavioral Health staff, and invite the community participation as we work to achieve our goals for 2020.

Most Sincerely

Xaloc Cabanes, Chairperson, Mental Health Advisory Board

Cc: Erik Riera, Behavioral Health Director

Dr. Vanessa De La Cruz, Chief of Psychiatry

la fines

Cassandra Eslami, Chief of South County Behavioral Health & Community Engagement

Mimi Hall, Health Services Agency Director Mental Health Advisory Board members



County of Santa Cruz HEALTH SERVICES AGENCY **Behavioral Health Services Division**

Santa Cruz County Mental Health Advisory Board

1400 Emeline Avenue, Santa Cruz, CA 95060 (831) 454-4170 FAX: (831) 454-4663 TDD: (800) 523-1786



XALOC CABANES Chair District 1



Erika Miranda-Bartlett Co-Chair District 3



REBEKAH MILLS Secretary District 5



GREG CAPUT Board of Supervisors



KATE AVRAHAM District 5



LYNDA KAUFMANN SERG KAGNO District 1



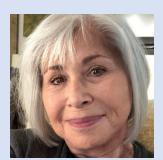
District 4



Hugh McCormick District 3



Antonio Rivas District 4



DR. JOANNA WHITCUP District 2

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by Erika Miranda-Bartlett

Role of the Santa Cruz County Mental Health Board

The legally mandated responsibilities of the Mental Health Board specify that we:

- 1. Submit biennial reports during odd numbered years to the Board of Supervisors and the County Mental Health Department on the needs and performance of the County's mental health system;
- 2. Review and evaluate the County's mental health needs, services, facilities and special problems;
- 3. Review the County agreements entered into pursuant to Welfare & Institutions Code Section 5650;
- 4. Advise the Board of Supervisors and the Mental Health Director as any aspect of mental health program in our County;
- 5. Review and approve the procedures used to ensure citizen and professional involvement in all stages of the planning process;
- 6. Review and make recommendations on applications for the appointment of a local director of mental health services. The Board shall be included in the selection process prior to the vote of the Board of Supervisors;
- 7. Review and comment on the County's performance outcome data and communicate its findings to the State Mental Health Commission;
- 8. Assess the impact of the realignment of services from the State to the County, on services delivered to clients and on the local community.

The specific duties and functions of committees and members of the Mental Health Board are governed by the By-Laws of the Board, which must conform to the County Charter, A.B. 14, the Bronzan-McCorquodale Act, and the Brown Act.

The Behavioral Health Division staff designated as support is Jane Batoon-Kurovski, whose impeccable work supports the Board in all our endeavors after her appointment in February 2018. The Mental Health Advisory Board deeply appreciates the cooperation of the Santa Cruz County Behavioral Health Department and Behavioral Health Director Erik Riera.

Meeting Dates, Times and Locations

January 18, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
February 15, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
March 15, 2018	3:00 p.m. – 5:00 p.m.	Pajaro Valley Community Health Trust, 85 Nielson Street, Watsonville
April 19, 2018	3:00 p.m. – 5:00 p.m.	Pajaro Valley Community Health Trust, 85 Nielson Street, Watsonville
May 17, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
June 18, 2018 (Retreat)	1:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
June 21, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
July 19, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
August 16, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
September 20, 2018	3:00 p.m. − 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
September 27, 2018	3:00 p.m5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
(Emergency Meeting)		
October 18, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
November 2018	(No Meeting Held)	
December 20, 2018	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
January 17, 2019	3:00 p.m. – 5:00 p.m.	Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
February 21, 2019	3:00 p.m. – 5:00 p.m.	Watsonville City Council Chambers, 275 Main Street, Ste 400, Watsonville
February 21, 2019 March 21, 2019	3:00 p.m. – 5:00 p.m. 3:00 p.m. – 5:00 p.m.	Watsonville City Council Chambers, 275 Main Street, Ste 400, Watsonville Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
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February 21, 2019 March 21, 2019 April 18, 2019 May 16, 2019 June 20, 2019 July 18, 2019 August 15, 2019 September 18, 2019 (Retreat) September 19, 2019	3:00 p.m. – 5:00 p.m. 3:00 p.m. – 5:00 p.m. 1:00 p.m. – 4:30 p.m. 3:00 p.m. – 5:00 p.m.	Watsonville City Council Chambers, 275 Main Street, Ste 400, Watsonville Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz Sr Ctr of San Lorenzo Valley, Highlands Park 8500 Hwy 9, Ben Lomond Watsonville City Council Chambers, 275 Main Street, Ste 400, Watsonville Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz Agriculture Extension, 1430 Freedom Blvd, Suite E, Watsonville Health Services Agency, 1400 Emeline Ave, Bldg K, Santa Cruz
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Board Structure

The Welfare and Institutions Code requires that every County have a Mental Health Board or Commission, and AB 14 established specific mandates for the number and function of County Mental Health Boards. Consistent with these requirements, the Santa Cruz Mental Health Advisory Board shall consist of 11 members who are residents of the County, appointed as follows:

- A. Each Supervisor shall nominate two (2) persons who may reside within the Supervisor's district. A member of the Board of Supervisors shall serve as the 11th member of the Mental Health Board.
 - Of the 10 persons so appointed, at least six (6) shall be persons or family members of persons who are receiving or have received mental health services from a city or County Bronzan-McCorquodale program or any of its contracting agencies. At least three (3) of the members so appointed shall be a parent, spouse, sibling, or adult child of a person receiving or have received mental health services. The remaining members shall be persons with experience and knowledge of the mental health system;
- B. One member of the Board shall be a member of the Board of Supervisors;
- C. (1)Except as provided in subsection (C)(2) of this section, no member of the Mental Health Advisory Board, or his or her spouse, shall be a full-time or part-time employee of a County mental health service, an employee of the State Department of Health Care Services, or an employee of, or a paid member of the governing body of a Bronzan-McCorquodale contract facility;
- (2) A consumer of mental health services who has obtained employment with an employer described in subsection (C)(1) of this section and who holds a position in which he or she does not have any interest, influence, or authority over any financial or contractual matter concerning the employer may be appointed to the Mental Health Advisory Board. The member shall abstain from voting on any financial or contractual issue concerning his or her employer that may come before the Mental Health Advisory Board;
- D. The composition of the Board shall reflect the ethnic diversity of the client population.

Attendance

2018	Jan 18	Feb 15	Mar 15	Apr 19	May 17	Jun 18 Retreat	Jun 21	Jul 19	Aug 16	Sep 20	Sep 27 Emergency Meeting	Oct 18	Nov NM	Dec 20
Aimee Escalante	Е	Х	Е	Χ	Χ	Х	Χ	Χ	Х	Χ	Х	Е		Χ
Bek Phillips	Х	Х	U	Х	Χ	Χ	Е	Х	Х	Х	Х	Х		Х
Charlotte Reyes	U	U	U U SV 05/2018											
Erika Miranda-Bartlett		NBM 10/30/18						Х						
Holly Heath	NBM 10/30/18						Х							
Hugh McCormick	Х	Е	Χ	E	Χ	Х	E	Χ	Χ	Χ	Е	Χ		Е
Jim Roszell	Χ	Х	Χ	X X E E U R 08/2018										
Jodie Wells	Χ	Е	Χ	Χ	E	Х	Е	Х	Χ	Χ	Х	Χ		Е
Kate Avraham	Х	Е	Е	Ε	Х	Х	Χ	Х	Х	Х	Х	Χ		Х
Lynda Kaufmann	Χ	Х	Χ	Ε	Х	Е	E	Х	Χ	Χ	Е	Χ		Χ
Rebekah Mills	Х	Х	Х	Χ	Χ	Х	Е	Χ	Х	Χ	Х	Х		Χ
Xaloc Cabanes	Х	Х	Х	Х	Х	Х	Х	Χ	Х	Х	Х	Х		Х
Supervisor Greg Caput	E	Х	Х	Х	Х	E	Х	E	Х	Х	E	Х		Х

 \mathbf{X} – Present

 \mathbf{E} – Excused

U-Unexcused

R – Resigned from Board

NBM – New Board Member

NM – No Meeting Unless Needed

SV – Seat Vacated, too many absences

CI – Conflict of Interest

SM - Special Meeting

When a member fails to attend three (3) consecutive meetings without good cause entered in the minutes of the Mental Health Advisory Board, or if a member fails to attend six (6) meetings during any twelve (12) consecutive month period with or without good cause, a vacancy shall exist and shall be reported in writing by the Mental Health Board Chair to the Board of Supervisors, the Clerk of the Board, and the member vacating his or her seat of the Mental Health Board.

2019	Jan 17	Feb 21	Mar 21	Apr 18	May 16	Jun 20	Jul 18	Aug 15	Sep 18 Retreat	Sep 19	Oct 17	Nov NM	Dec 19
Aimee Escalante	Е	Е	Е	E		R 05/01/19							
Antonio Rivas	NBN	И 04/16	5/19	Х	U	Х	Е	Е	Χ	Х	Е		Е
Bek Phillips	U	Х	Х	Х	Е	Х	Х	Х	U		R 09/	19/19	
Erika Miranda-Bartlett	Χ	Х	Χ	Χ	U	Χ	Х	Е	Х	Χ	Х		Χ
Holly Heath	Х	X X X				R 04/19/19							
Hugh McCormick	Х	Е	Х	Е	Χ	U	Х	Х	Е	U	Х		Χ
Jodie Wells	Е		R 02/20/19										
Kate Avraham	Χ	Х	Е	Χ	Χ	Х	E	Е	Х	Χ	Х		Х
Lynda Kaufmann	E	Х	Х	Х	Х	E	Х	Е	Е	Х	Х		Х
Rebekah Mills	U	Х	Е	Χ	Х	Х	U	U	Х	Χ	Х		Х
Serg Kagno		NBI	M 06/1	1/19		Х	Х	Х	Х	Χ	Х		Х
Xaloc Cabanes	Х	Х	Х	Х	Х	Х	Χ	Х	Х	Х	Х		Х
Supervisor Greg Caput	Х	Х	Х	Х	Х	Х	E	Х	Х	Х	Х		Х

Mental Health Advisory Board Report on Aspects of Mental Health in Santa Cruz County (with MHAB Goals and Accomplishments)

By Erika Miranda-Bartlett

Suicide Prevention

The suicide rates for Santa Cruz County are alarmingly high, more than **150%** the California average (2014-16 CDC Statistics). To assess our community's strengths and resources and improve these outcomes, the Suicide Prevention Task Force created the <u>Suicide Prevention Strategic Plan</u> over 2018 and 2019 with the aid of consultant Noah Whittaker. Participants included former MHAB Co-Chair Bek Phillips.

The Mental Health Advisory Board followed the activities of the Task Force in our Director's Reports, including hiring a consultant with MHSA monies. After the draft release of the Suicide Prevention Strategic Plan in April of 2019, a presentation of the draft was given to the Mental Health Advisory Board in May by Cassandra Eslami, Chief of South County Behavioral Health Services. The ground-breaking and thorough Suicide Prevention Strategic Plan was unanimously approved by the Board of Supervisors on June 11th 2019.

Looking forward, workgroups will form to address prevention, intervention and postvention. An implementation plan has been created to aid the launch of trainings, services and supports county-wide.

Children's Mental Health

Santa Cruz County gained momentum in offering children's behavioral health services and supports during 2018-19 with many successes in new initiatives, plans and curriculums.

In early 2018, the *Live Oak Cradle to Career Initiative* made news with an award of \$50,000. This innovative collaboration, initially a brainchild of Supervisor John Leopold, is dedicated to interweaving local families with the health, education, community resources and activities they need and deserve. Also in 2018 the Alternative Education School Safety Council, part of the Santa Cruz County Office of Education, released their *Comprehensive School Safety Plan*, an outline of how to best work with students to create the secure, inspiring environment that our children deserve from their education.

Superintendent Faris Sabah's editorial in the *Santa Cruz Sentinel*, June 29th 2019, outlines that the shared goal of the Office of Education, County Behavioral Health, Santa Cruz City Schools, and the Pajaro Valley Unified School District is an open access approach to behavioral health care for minors. Equal access to behavioral health care for minors is essential for prevention and early intervention of serious lifelong behavioral illness, and it's appropriate for the MHAB to make sure this vision is put into culturally competent practice.

The County Office of Education has implemented a trauma-informed comprehensive student wellness curriculum, currently offered at more than 20 alternative schools across the county. In November of 2019, Xaloc Cabanes, the Chair of the Mental Health Advisory Board, was named *Community Hero of 2019* by the United Way's Community Assessment Project, for his work on the curriculum as well as the Mental Health Advisory Board.

The expansion of South County Behavioral Health at 1430 Freedom Blvd in Watsonville added serious utility to Children's Behavioral Health Services. Officially opened in December of 2019, the new facility offers more than twice the space for behavioral health services available through the County. The facility is next door to

healthcare and dental clinics, offering easy access to services. As two thirds of the county's minors live in the Watsonville area, quick access to services is essential, and some were previously only available in Santa Cruz.

Regretfully, Santa Cruz County is still struggling to provide inpatient care for our most vulnerable in their formative years. Community members, including Carol Williamson of NAMI, brought serious concerns about the availability of inpatient and emergency care for minors to the attention of the Mental Health Advisory Board.

When Mental Health Advisory Board members—Serg Kagno, Hugh McCormick, Rebekah Mills and Erika Miranda-Bartlett—toured the local Psychiatric Health Facility in December of 2019, we learned they have extremely limited beds for minors: five spaces. In practice, nearly all the area's minors who require inpatient behavioral health care are sent out of the county and away from their family, friends, and community.

Santa Cruz County Jail & the Jail Committee:

The Santa Cruz County Jail is one of the county's biggest mental health treatment centers. The Jail Committee, co-chaired by MHAB Secretary Rebekah Mills and Board Member Hugh McCormick, met regularly with interested community members and Santa Cruz County jail leadership, including the Head Sheriffs and (then) Chief of Corrections Jeremy Verinsky and Chris Clark. During its existence, the Jail Committee was successful in advocating for improved and increased access to mental health services, and other issues like enhanced distribution and use of tablet computers—made available to inmates in all Jail units.

Though this ad-hoc committee has reached its sunset date, the message the committee has received from our community is that we still have work to do in the coming years. The committee stresses the necessity of traumainformed training for every jail employee, full accountability for inmates' treatment, and enhanced transparency about any and all jail conditions. The high rate of staff turnover in the Santa Cruz County jail system makes gaining traction in these areas a difficult proposition. Of special concern are multiple lawsuits related to (some serious) injuries at the Santa Cruz Main Jail and our area's other corrections facilities.

With regards to the Jail facilities themselves, Supervisor Greg Caput cited (cf. June 20, 2019 minutes) numerous structural concerns. The now-antiquated Main Jail was built in 1981 and currently lacks adequate heating or cooling abilities—especially in the sprawling building's detention cells.

One concern the committee regularly received from families of inmates in the Santa Cruz County Jail system centered around a common difficulty of finding clear (and up to date) information about many of the Jail's programs, services, and resources—including commissary, telephone calls, visitation, court protocol, mail, inmate rules and regulations, tablet computers, grievance reports, and medical requests. Board Member Hugh McCormick created and compiled the extensive "Jail Orientation Guide for Friends and Family Members of Inmates in the Santa Cruz County Jail System." This guide explains and breaks down many of the Jail's procedures, how inmates and family members can access the Jail's variety of programs and services, and how families/friends can best support their incarcerated loved ones. The 45+ page Orientation Guide will be freely available in the lobby of the Santa Cruz Main Jail, as a PDF version on the Jail's website, and used by Santa Cruz County's Probation Department and Public Defenders (among others).

Restarted Mental Health Services Act Committee:

In August 2018, Lynda Kaufmann and Bek Phillips began the Mental Health Services Act (MHSA) Committee as a fact-finding and reporting committee. After the MHSA passed in 2004, initially Santa Cruz had a robust Steering Committee which dissolved in 2010. Therefore, the MHAB's MHSA committee reformed in September of 2019 with the intention of creating and sustaining an MHSA oversight and input group separate from the Mental Health Advisory Board.

ACCESS California, invited by Ms. Kaufmann, coordinated with the Santa Cruz County Behavioral Health Division to make multiple presentations. First, ACCESS California sent Statewide Advocacy Liaison Tiffany Carter, who presented a thorough MHSA overview of 2 hours during our Stakeholder Empowerment Kickoff meeting on July 8th, 2019.

ACCESS California then offered 2 complementary MHSA trainings in Santa Cruz County in November of 2019. Andrea L. Crook, Director of Advocacy, and Tiffany Carter held the classes in Building K on Emeline Avenue. These programs were well-attended by delegates both from Santa Cruz and outside the area; the Leadership program had roughly 15 participants with multiple representatives from the Central Coast and other local counties, and other delegates travelling from Marin or even Tuolumne. The Community Empowerment training boasted more than 40 attendees with the majority from Santa Cruz.

Santa Cruz County's MHSA liaison, Cassandra Eslami, attended multiple meetings of the MHAB's MHSA Committee and has been a valuable aid to budgetary insight. The feedback from the community has increased thanks to Ms. Eslami's efforts to broaden the meeting times, languages and geographic range of discussions. Ms. Eslami also carved out the time to attend the Community Empowerment training offered by ACCESS California, deeply appreciated by participants from Santa Cruz county.

At this time, the Department of Behavioral Health has hired a consultant, Dr. Jerry Solomon, to assist with the community planning process. The vision with Dr. Solomon is to hold a variety of meetings in different settings to ensure consumer, stakeholder and public input into all MHSA behavioral health programming. The county is eager for increased community involvement in the upcoming MHSA three-year update, due June 2020.

Substance Use Disorder Treatment

One of the biggest changes in Behavioral Health during this time period was the decision to transition to the Drug Medi-Cal State and Federal ODS waiver. As the county is only obligated to serve our county's residents with Medi-Cal, this new funding stream for Medi-Cal recipients significantly expanded treatment services beginning in January 2018. Before January 2018, county workers served approximately 375 individuals per quarter. Then in the first quarter of waiver implementation, Santa Cruz County offered more than 900 individuals substance use disorder treatment. (cf. May 2018 minutes)

Board members Xaloc Cabanes, Hugh McCormick, and Erika Miranda-Bartlett toured the Janus of Santa Cruz residential facility in August 2018. Janus is currently the only residential substance use and detoxification program in the county. Staff there noted gaps in treatment availability: specifically, there is highly limited space for women's-only substance use treatment, and there is no public residential treatment for minors.

The MHAB looks forward to our upcoming merge with the Santa Cruz County Substance Use Disorder Commission (SUDC). We believe this merger will aid in deepening the board's comprehension of the behavioral health treatment system in California and its unique Santa Cruz facets. The MHAB created an Ad-Hoc committee in December 2019 to facilitate our merger with SUDC.

NAMI Santa Cruz County Continues to Flourish

In 2018 and 2019, the programs supported and run by NAMI Santa Cruz County have grown almost beyond belief. From their education of providers (one 5 week program), families (four 12 week programs in English, and one in Spanish) and peers (three 10 week programs) to support groups of all different kinds meeting 3-5 times a week every week of the year, NAMI creates a rich tapestry of assistance and knowledge for our local community. NAMI also runs presentations for schools, and in 2018-2019 they gave more than 30 "Ending the Silence" presentations based on their ambassador's lived experience, with another thirty (30!) at local colleges and universities, mental health facilities and for teachers or parents. Not content with resting there, NAMI

facilitated 3 Crisis Intervention Trainings, 6 informative lectures, and ran the Human Race 2018, a fundraising 5K. NAMI representatives also participate in many Mental Health Advisory Board meetings, SCPD Chief's advisory committee and the Sheriff's Advisory Council, the Integrated Behavioral Health Action Coalition, the Suicide Prevention Task Force, COPA, and the Human Care Alliance.

With so much good to give back, NAMI SCC recently expanded by multiple full-time positions, including a new Executive Director Therese Adams. NAMI SCC's intention for 2020-2021 is to expand their wide-ranging services to our threshold language of Spanish, approaching the task of consciousness expansion and education with investment in members of that community.

Finally, when contacted for comment, NAMI SCC's main request was that the Mental Health Advisory Board and our representatives continue to support our community, those struggling with behavioral health concerns, and their friends and family by supporting, advocating for, and *funding* access to services at all levels. Board and care homes like the recently closed Rose Acres (losing 34 beds) and supportive step-down facilities like El Dorado Center or Telos cannot replace an increased number of psychiatric emergency beds. However, with community resources and support given to alternatives like peer respite and crisis residential services, we can create more safe spaces for people to continue their recovery, reserving emergency beds for urgent need.

Peers Supporting Peers Need Our Support

The Mental Health Advisory Board convened an Emergency Meeting in September 2018 in order to hear community feedback and concerns about the abrupt closure of 2nd Story. 2nd Story is the 1st peer respite opened in California and is managed by Encompass Community Services. MHAB Member Hugh McCormick covered the facility's closure in an article for *Good Times*, a weekly newspaper based in Santa Cruz. This publicity from an MHAB member led directly to a large charitable donation, allowing the trailblazing program to continue providing services to our community.

2nd Story continues to be the county's only alternative to inpatient psychiatric hospitalization, specifically designated to serve those of highest need: Santa Cruz County Medi-Cal recipients who qualify for care coordination and enhanced services. Although previously supported by Santa Cruz County, the peer-run program will now lose its funding when the public's generous donation runs out.

The Mental Health Client Action Network continues to be a unique and accessible resource for many devoted members with inspiring stories, despite their restrictive Special Use Permit by the City of Santa Cruz. The Special Use Permit limits the large facility to 50 clients over a day's time, and in the past few years has demanded *MHCAN* retain a security guard as well as shutting down the food pantry shared by and delivered to clientele. According to Sarah Leonard, Executive Director of *MHCAN*, their supported housing neighbor (run by a separate non-profit) had as many emergency calls in just a few months as *MHCAN* had had all year. The Mental Health Advisory Board has written a letter of support for *MHCAN* which will be sent in January 2020 and due to ongoing concern, the MHAB plans to review the Special Use Permit.

The remarkable work done by the peers of *MHCAN* and the exceptional transformative atmosphere found in the respite of 2nd Story are made possible because services are provided by people with lived experience. This way, peers avoid the alienation and struggle of trying to explain the why of suicidality, hearing voices or dissociation to someone who may have only read about overwhelming emotional struggles, adverse childhood experiences and trauma. Both guests at 2nd Story's and friends attending *MHCAN* are surrounded by those who've had similar experiences and chose to continue engaging in positive mutual relationships. Interdependence fostered between members of the same community holds space for a transformation. In practice, all involved receive multiple benefits, including a potential exit from the medical model and the 'patient' identity, and better reintegration into our great community.

Advisory Board Goals

2018:

1. Goal: Provide comprehensive training on how to be an effective advisory board

2. Goal: *Develop and follow through on annual strategic plans*

3. Goal: Maintain an active, involved Board4. Goal: Support MHAB committee work

Our chair, Xaloc Cabanes, has met with all interested new members to the board to give them an "onboarding binder" with all basic information and every applicable contact and resource in case of more in-depth consideration. The Behavioral Health Division support staff, Jane Batoon-Kurovski, regularly updates sections of this binder as new information requires. Lynda Kaufmann is now a Governing Board Member of California Association of Local Behavioral Health Boards and Commissions, which is a great asset to information sharing.

The Board had a table at the Mental Health Conference at Twin Lakes, October 11-13th 2018 and held an event to commemorate World Suicide Prevention Day, September 10th, 2018 at the Santa Cruz Town Clock. Kate Avraham, chair of our Community Engagement committee, has a presence at many community events. Both Ms. Avraham and Antonio Rivas attended Communities Organized for Relational Power in Action at Temple Beth-El in Aptos, November 2019. Lynda Kaufmann and Rebekah Mills have attended meetings of Project Connect, and Board Member Serg Kagno is a Project Connect Steering Committee member. Xaloc Cabanes, Kate Avraham, Serg Kagno, Antonio Rivas and Supervisor Caput attended the opening of the new South County Behavioral Health Facility in December 2019.

Mandated Responsibilities of The Mental Health Advisory Board:

Review and evaluate the County's Mental health needs, facilities, and special problems.

Review and approve the procedures used to ensure citizen and professional involvement in all stages of the planning process.

Review and comment on the County's performance outcome data and communicate its findings to the State Mental Health Commission.

Most of the Advisory Board's efforts to complete our mandated responsibilities are mentioned in the State of Santa Cruz County Mental Health report above. The Advisory Board has promptly completed the Data Notebooks that are assigned by the State Mental Health Commission on a yearly basis.

We have successfully accomplished the goals on our annual strategic plan, first conceived in 2018. In September 2019, the Mental Health Advisory Board created a new, more ambitious strategic plan for the upcoming year. Some of these goals may be longer term than one year.

Numbers of Board members and their attendance has varied widely. Multiple bilingual members joined the board, and changes in our bylaws in 2018 encouraged the adoption of at-large members. However, we've had substantial turnover. Ironically, the membership committee lost both of its co-chairs.

Currently, the Mental Health Advisory Board has 1 board vacancy and 2 at-large vacancies. This will increase to 2 board vacancies when Kate Avraham retires in early 2020. The membership committee, now chaired by Hugh McCormick, has done their best to address the vacancies. Efforts to recruit to reflect the diversity in our communities continue. As we continue to grow, we believe the board will become even more effective in achieving our goals and in systematically raising awareness, fueling the torch of advocacy to light the inner fires of our community.

Currently, we have no written reports for the 2 site visits conducted in August 2019 and December 2019 as we have recently remodeled our procedures. In future, we expect site visits to be more frequent, with verbal input given directly to the Behavioral Health Director and director of the facilities as well as written reports in our minutes and sent to the Board of Supervisors.

Future Goals

2020 Objectives:

- To become knowledgeable of all the programs that the Board is responsible for, including facilities, resources (organizational chart of Mental Health Services), budget (direct staff funding, money for staff trainings), populations served.
- Create peers eye view of programming in this County (Peer Program Directory), so that concerned family members of children and adults with behavioral health issues can easily access resources (e.g. programs that are accessible with public funds; programs in the County that take Medi-Cal, etc.). Suggestion is to invite peers from MHCAN, etc. and have them engage with the Mental Health Advisory Board.
- More Community Engagement: influence the community; input from community; outreach to Board of Psychologists, County employees, Cabrillo and UCSC. More visibility and presence/co-presence at various events in the community.
- MHSA Stakeholder Committee to become a separate committee from the Mental Health Advisory Board.
- More regular site visits promotes accountability at the program level and education for the Mental Health Advisory Board. Strengthen the site visits to include talking to people who participate in the programs for feedback of their experiences.
- Involve Houseless voices.
- Higher attendance at Board meetings from the public and the Board (location, time). Goal is to fill all Board member positions and both At-Large Member positions and ensure there is a smooth on-boarding process. Possible transportation options for the public so they can attend the meetings offer rides and bus passes.
- Continue jail/criminal justice committee. Work on identifying more needs. The Jail Committee is a voice for incarcerated individuals, and for the friends and family members of those individuals.

Appendix A

List of Presentations at MHAB Meetings In 2018 - 2019

January 2018	Jail Services and Jail Re-Entry Program, Pam Rogers-Wyman
February 2018	Monterey Mental Health Commission, Rebekah Mills
March 2018	Statewide Mental/Behavioral Health Issues, Resources for Boards/Commissions &
	Upcoming CALBHBC Meeting, Theresa Comstock
May 2018	Roles of MHAB Members and functions of the MHAB, Siobhan Kelley
July 2018	Post-Housing Support, John Deetz
September 2018	NAMI, Hugh McCormick
	Patient Portal, Adriana Bare
December 2018	Complaint Process, Karolin Schwartz
	Suicide, Bek Phillips
January 2019	Alternative Model for 5150 Transports, Marty Riggs
February 2019	Evidence-Based Practices, Lynda Kaufmann
April 2019	Focus Intervention Team (FIT) Program, James Russell and Sgt. Billy Burnett
	Depression and Treatment Options, Kate Avraham
May 2019	Suicide Prevention Task Force Strategic Plan, Cassandra Eslami
June 2019	Grievance Process, Cybele Lolley
July 2019	School Informed Services, Xaloc Cabanes
September 2019	"Get Ready Santa Cruz County" Program, Christina Thurston
October 2019	Behavioral Health Court and Specialty Courts, Jasmine Najera and Katherine Mayeda

APPENDIX B

Letter to Board of Supervisors Regarding Strategic Plan Language

Dear Members of the Santa Cruz County Board of Supervisors,

We would like to acknowledge your hard work on creating a clear comprehensive strategic plan for the county. Your leadership and work in finding well-rounded solutions in behavioral health is always appreciated. It is with this in mind we are writing to you on behalf of members of the community and the behavioral health community at large.

In your vision statements, you address multiple focus areas, including dedicating a section for Comprehensive Health & Safety. Here you look at Health Equity, Community Support, Local Justice, and Behavioral Health. It is in regards to the focus statement under Behavioral Health that we would like to address what we have found to be problematic verbiage. Specifically, the wording "lessen the impact" increases the stigma of being ashamed, as it implies there are only negative impacts caused by members of the behavioral health community. This contributes to the idea that they are unwelcome and unwanted. While the majority of the plan has been found to be equitable, this sentence specifically does not fall in line with your stated goals ad tone. It is the consensus of the Santa Cruz County Mental Health Advisory Board and following comprehensive community input that we recommend the following change:

From: Support residents and **lessen** community impacts through increased access to integrated mental health, substance use disorder, and healthcare services.

To: Support residents and **improve** community impacts through increased access to integrated mental health, substance use disorder, and healthcare services.

We sincerely thank you for your time and consideration of this issue. We look forward to receiving your response.

Sincerely,

Xaloc Cabanes, Chairperson Santa Cruz County Mental Health Advisory Board