



State of California

**MENTAL HEALTH SERVICES
OVERSIGHT AND ACCOUNTABILITY COMMISSION**

Minutes of Meeting
March 24, 2016

MHSOAC
Darrell Steinberg Conference Room
1325 J Street, Suite 1700
Sacramento, California 95814

866-817-6550; Code 3190377

Members Participating

Victor Carrion, M.D., Chair
Tina Wooton, Vice Chair
Lynne Ashbeck
Khatera Aslami-Tamplen
Sheriff Bill Brown
John Buck
David Gordon
Richard Van Horn

Members Absent:

Senator Jim Beall
Itai Danovitch, M.D.
Larry Poaster, Ph.D.
Assembly Member Tony Thurmond

Staff Present

Toby Ewing, Ph.D., Executive Director
Brian Sala, Ph.D., Deputy Director,
Evaluation and Program Operations
Norma Pate, Deputy Director, Program,
Legislation, and Technology
Filomena Yeroshek, Chief Counsel
Peter Best, Staff Services Manager
Kristal Antonicelli, Associate Governmental
Program Analyst
Cody Scott, Staff Services Analyst
Moshe Swearingen, Office Technician

CONVENE

Chair Victor Carrion called the meeting of the Mental Health Services Oversight and Accountability Commission (MHSOAC or Commission) to order at 9:35 a.m. and welcomed everyone. Filomena Yeroshek, Chief Counsel, called the roll and announced that a quorum was present.

Announcement

Chair Carrion welcomed Lynne Ashbeck to the Commission. Commissioner Ashbeck fills the seat of a representative of a health care service plan or insurer.

ACTION

1A: Approve February 25, 2016, MHSOAC Meeting Minutes

Action: Vice Chair Wooton made a motion, seconded by Commissioner Van Horn, that:
The Commission approves the February 25, 2016, Meeting Minutes.

Motion carried 5 yes, 0 no, and 3 abstain, per roll call vote as follows:

The following Commissioners voted “yes”: Chair Carrion, Vice Chair Wooton, Commissioners Aslami-Tamplen, Buck, and Van Horn. The following Commissioners abstained: Commissioners Ashbeck, Brown, and Gordon.

INFORMATION

1B: February 25, 2016, Motions Summary

1C: Evaluation Dashboard

1D: Calendar

INFORMATION

2: Presentation on MHSA Housing Bond Initiative

Presenters:

Former Senate President Pro Tem Darrell Steinberg and Craig Cornett, Chief Fiscal Policy Advisor to Senate President Pro Tem Kevin De Leon

Mr. Cornett provided a fact sheet to the Commissioners on the Mental Health Services Act (MHSA) Housing Bond known as the “No Place Like Home” initiative and welcomed Commissioner feedback. He stated that homelessness is a growing problem throughout the state of California and Los Angeles has the largest population of homeless people in the country. He stated the need for local governments to take the lead on finding solutions to the problem in their areas and for the state to provide leadership and assistance to be a catalyst for homelessness efforts. The multi-pronged, bipartisan initiative was released on January 4, 2016.

Mr. Cornett stated that permanent, supportive housing for homeless populations, particularly with mental illness, has been proven successful and that the demand is there throughout the state. He summarized the background and logistics of the \$2 billion revenue bond that will be awarded on a competitive basis over a number of years. This initiative will be included in the June state budget.

Mr. Steinberg introduced Anna Hasselblad, Director of Public Policy, Steinberg Institute, and stated that he and Ms. Hasselblad are working in partnership with the Senate on this initiative which represents an important evolution of the MHSA. There must be overarching, statewide objectives as part of the implementation of Proposition 63. Distributing MHSA funds 58 ways without an overriding set of state purposes makes it difficult to understand the impact of this Act. It is important to demonstrate the impact to show taxpayers how the MHSA has positively impacted many Californians by filling gaps in mental health service, and to show consistent, outcome-based evaluations and recovery so that policy makers will be willing to consider investing more to help fill the gaps and help more Californians.

Mr. Steinberg stated that Full Service Partnerships and their elements – intensive outreach, case management, services, and housing – have been proven successful, but California lacks capacity for housing. Housing alone is not enough, but without housing it is difficult to provide services, and it is an important component in recovery. The \$2 billion Proposition 63 funding stream is ongoing. It would be negligent not to use the ongoing nature of this funding stream and capitalize it for the single, most important element in helping individuals living with serious mental illness who are living on the street get better.

Commissioner Questions:

Chair Carrion stated his appreciation for the stakeholder feedback process prior to writing the bill. He asked about the flexibility of the review process for smaller counties that may not have the technical capabilities and resources to submit an application or to support new construction.

Mr. Cornett stated that small counties have a different set of needs and abilities to put applications together. He stated that the process will include a tier of categories: smaller counties will compete with smaller counties, medium with medium, and urban with urban. A regional approach will be encouraged in some cases. Also, technical assistance funding is being looked into to assist with the application process. He emphasized that the initiative not only supports new construction, but repurposing of existing structures is even better because they can more quickly be made available. He gave the example of the model state, Utah, renovating a 300-bed hotel into supportive housing.

Chair Carrion asked how the \$2 billion figure was reached, how much of the problem \$2 billion will solve, and if the idea is to set up a model for others to follow.

Mr. Cornett stated the \$2 billion amount is just a starting point and will take a few years to expend to allow counties that may not be ready in the first year to apply during the second or third grant round.

Mr. Steinberg stated that the \$2 billion figure was a round number and could go higher if it was the desire of stakeholders to commit more. He cautioned against delaying the process and emphasized the need for some of the funds to go out immediately. He gave the example of Senate Bill (SB) 82 that was passed in 2013 and that some counties will not have a single crisis unit up until 2017.

Vice Chair Wooton stated that she has heard concerns in her county about relationships they have built with county developers and that there may not be strong incentives for developers to continue those partnerships.

Mr. Cornett stated that ongoing relationships with affordable housing developers can enhance the competitive nature of the applications because it could show that the county is ready to go since they already have those relationships.

Vice Chair Wooton stated that Santa Barbara County has no space for housing and will be forced to build new construction, which will be expensive. She asked if that aspect will be considered in the proposal process.

Mr. Cornett stated that all factors will be considered. The issue of housing is a statewide problem and there is a lack of sources for affordable housing. He stated that the annual cost in Los Angeles for the chronically homeless, mentally ill population is over \$100,000 per person. Counties are already spending large amounts on these individuals. Housing, stabilization, and treatment will save money in the long run.

Commissioner Brown stated that there are huge numbers of mentally ill individuals in California's jails and prison system who often cycle through again and again. He asked if the legislative intent is for counties to use the funds to construct facilities that could be eligible for people coming out of criminal justice facilities, which could be used as an alternative to custody for criminal offenders, or that could be used for mental health treatment facilities that incorporate a relatively long-term treatment program for the chronically mentally ill who oftentimes are the ones that cycle through. He encouraged Mr. Cornett to work with the Sheriff's Association and others to make this initiative a great resource to break the cycle.

Mr. Cornett stated that he welcomes the opportunity to work with the Sheriff's Association. Commissioner Brown's questions are being looked into. The target population is chronically

homeless, mentally ill individuals. Someone coming out of jail is not necessarily chronic because they are just coming out; however, those populations are highly likely to be homeless over time, especially if they have a mental illness. The initiative will be crafted to serve those populations.

Commissioner Aslami-Tamplen stated that this initiative will save lives and impacts the whole community. The combination of homelessness and mental illness increases the likelihood of being a victim of crime.

Commissioner Ashbeck agreed that there is a difference between large and small counties and emphasized that the Central Valley has both urban density and distant rural cities. The cost is much higher for distant rural cities such as the city of Coalinga, which is 90 miles from the nearest large urban center. She asked Mr. Cornett to be mindful of these differences when crafting the criteria, to include system thinking, and to include everyone at the table, not just housing representatives.

Commissioner Ashbeck stated that cities that do not have large homeless populations also need help to prevent it from getting worse, such as the city of Clovis, where their homeless population cannot qualify for help because the city does not meet the threshold for crime. There are cities that can be prevented from becoming a catastrophe that are also worth considering.

Commissioner Gordon stated that he was pleased to see the initiative target families who are involved with the Child Welfare System. He stated the need to also consider the problem of affordable housing for teachers, such as in the Bay Area.

Mr. Cornett stated that there is an opportunity in this initiative to ensure that the individuals who are in recovery are not segregated and that housing is built in a way that integrates different populations, including those in need of workforce housing.

Public Comment:

Michelle Violett, of Nevada County, stated that housing is considered the beginning of treatment in Nevada County but it takes work – mental health, substance use services, rental support, and subsidies are also needed. MHSA funds cannot provide everything; it is important to determine who can provide other services. She suggested building relationships with the U.S. Department of Housing and Urban Development (HUD) and the public housing authorities. She stated the concern for small counties and how they can compete even with other small counties. She asked how to make the initiative work in small, rural counties where the cost of housing is high, such as in Truckee.

Poshi Mikalson Walker, Lesbian Gay Bisexual, Transgender, Queer (LGBTQ) Program Director, Mental Health America of Northern California (NorCal MHA), asked about LGBTQ youth up to age 25 and the housing initiative. She spoke in support of Commissioner Brown's comments about what happens when individuals are released from the criminal justice system. Adult-focused emergency and transitional housing is not appropriate for youth in general and the LGBTQ youth in particular. She stated that NorCal MHA recommends that the support of LGBTQ youth be included as a focus as this project moves forward and that adult, transgender-specific services be included as part of the focus of this project. Also, Veteran's Affairs is reducing and eliminating transitional housing for veterans. Housing of some type should be included that has intensive support and programming to transition the chronically homeless to a point where permanent housing is a successful intervention and experience.

Commissioner Van Horn suggested that Ms. Mikalson Walker's comments would be made much more strongly with the California Behavioral Health Directors Association (CBHDA) and the California Council of Community Behavioral Health Agencies (CCCBHA) and their memberships so that agencies and counties recognize the issues that LGBTQ youth are facing.

Heidi Strunk, Advocacy Coordinator, California Association of Mental Health Peer-Run Organizations (CAMHPRO), agreed that there is a need for housing for the homeless mentally ill population, but stated the concern that it will deflect funding from existing programs that have a history of successfully supporting communities. CAMHPRO also wants to ensure that the housing units are not segregated, but are integrated within counties, and that the housing is strategically placed near services or public transportation to reach services to embrace the spirit of the Full Service Partnership.

Kate Burch, of the California LGBTQ Health and Human Services Network, echoed Ms. Mikalson Walker's comments. She suggested awarding extra points to counties that have a plan for serving LGBTQ populations. It is clear that all housing must respect a person's gender identity and not have criteria based on gender history, because individuals make different medical decisions about what is appropriate for their own life and that should not be part of the criteria for finding state housing.

Michaele Beebe, Public Policy Director, United Advocates for Children and Families (UACF), spoke in support of this initiative and agreed with Ms. Mikalson Walker's and Ms. Strunk's comments. She stated that parents often become homeless because of their children's behavior. She suggested that the child might be the individual that is the qualifier rather than the adult. Many homeless children have parents that have mental health issues. She thanked Commissioner Brown for mentioning the mentally ill inmate population. She suggested contacting the California Council on Mentally Ill Offenders (COMIO), which has programs for inmate transition.

Michael Helmick, Assistant Director, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO), agreed with Ms. Strunk's comments. He requested that demographic data of those served by these programs be collected. He urged the author's office to ensure that stakeholders will see this legislation and vet the language appropriately.

Mike Gallagher, Program Director, California Youth Empowerment Network (CAYEN), echoed Ms. Mikalson Walker's comments. He asked about the safeguards in place in the supportive services to ensure that counties and providers are really supporting the individuals they are meant to support.

Steve Leoni, consumer and advocate, spoke in support of the initiative but stated that he was irked by the fact that mental health dollars continue to be spent to backfill for an essential failure in the housing market to serve people at the lower end. Better solutions are needed for the general housing market. Many homeless individuals are not mentally ill but out of luck, and this needs to be addressed. He stated that he was encouraged by the increase in the SSI rate.

Sally Zinman, Executive Director, CAMHPRO, spoke in support of the initiative. She stated that it is important to address housing and homelessness, but she asked where the money will come from for the other populations. She cautioned against raiding MHSA funds for issues other than mental health issues. She asked what services will be decreased due to the funds going to housing and homelessness.

Jennifer Cook, Program Supervisor, Placer County Children's System of Care, spoke in support of the initiative. She voiced the concern about the variances between counties and within counties. She agreed that counties should have plans but disagreed that they should compete against each other. She stated concern about the term "chronically." The MHSA addresses "risk of" or "early emergence" of homelessness. She thanked Commissioner Brown for addressing individuals coming out of institutions, whether it be medical, psychiatric, or correctional facilities.

Kiran Savage, Director of Legislation and Advocacy, National Alliance on Mental Illness (NAMI) California, spoke in support of this initiative. Statewide initiatives are important for reaching

everyone with mental health conditions. Evaluating MHSA programs is important to find out what is working and to build in a robust evaluation component to these new housing programs so funds increase over time so that the best way to distribute them can be determined. She thanked Commissioner Brown for his comments about reentry. It is important to keep people from cycling in and out of hospitals, correctional facilities, and homelessness.

Commissioner Discussion:

Commissioner Buck stated that there are unspent funds from prior years and he does not think there is a problem with this initiative taking away funds from current programs. Also that there is an inherent conflict between segregated and integrated housing. He encouraged, as the legislation goes on, that minds stay open and thoughtful and not just go for ideology.

Chair Carrion stated that it is important to give the person a choice of where to live. This would help with the segregation issue.

Commissioner Van Horn stated that developments with multiple populations use less MHSA funds than if all occupants were from the mental health population.

Commissioner Gordon stated that the bonds would not be sold all at once but slowly over time. The increase in the revenue to the fund would probably increase more than the debt would accumulate in any given year. It would build to the \$130 million, and by then the extra funds earned through the tax would be far more than that.

Commissioner Van Horn stated the need for everyone to be extra vigilant because this initiative is developed as a trailer bill and there will be little time to vet or comment before it is passed.

ACTION

3: Rules of Procedure Amendment (First Read)

Presenter: Filomena Yeroshek, Chief Counsel

Ms. Yeroshek provided an overview, by way of a PowerPoint presentation, of the background, proposed delegation of authority to approve additional funding for a county's innovations project that was previously approved. She discussed the next steps of this proposed amendment to the Rules of Procedure.

Commissioner Questions and Discussion:

Vice Chair Wooton stated the importance of adhering to the principles of the MHSA in all decisions made by and for the MHSOAC and of involving consumers and family members in the process.

Public Comment:

Adrienne Shilton, Director of Intergovernmental Affairs, CBHDA, spoke in support of the proposed amendment to the MHSOAC Rules of Procedure.

Mr. Helmick urged that the Commission be made aware of changes made and require counties to include stakeholder input on any changes made.

Action: Commissioner Van Horn made a motion, seconded by Commissioner Brown, that:

The Commission adopts the following new rule to the Rules of Procedure:

Rule 2.6 Delegated Authority of the Executive Director

The Executive Director, or his or her designee, is authorized to approve a county's request to expend additional Mental Health Services funding in an amount not to exceed \$500,000 or 15%

of the total project, whichever is less, for an Innovation project that has been previously approved.

Motion carried 8 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted “yes”: Chair Carrion, Vice Chair Wooton, Commissioners Ashbeck, Aslami-Tamplen, Brown, Buck, Gordon, and Van Horn.

ACTION

4: Contracts with iFish Group, Inc.

Presenter: Brian Sala, Ph.D., Deputy Director

Dr. Sala stated that the Commission has been working with the iFish Group, Inc., on a consulting basis to prepare fiscal transparency tools to display budgetary information related to county revenues and expenditures of MHSA funds. The working document has been developed from the Annual Revenue and Expenditure Reports and is ready to be shared with the CBHDA and the counties to verify the accuracy of the data.

This proposal is for an amount not to exceed \$250,000. The first \$100,000 will be for iFish to develop an open data portal with another entity to support the back end of the fiscal transparency work. The rest of the requested amount is for additional consulting hours with iFish to develop the front end – data analytics tools to provide flexibility to implement the fiscal transparency vision as discussed in the last MHSOAC meeting – and to identify the most cost-effective, efficient strategies for displaying the data for stakeholders and to do advanced planning on new opportunities for other transparency projects.

Commissioner Questions and Discussion:

Commissioner Aslami-Tamplen asked if there will be continued annual costs. Dr. Sala stated that it would cost \$85,000 to \$95,000 to support the open data portal if a more cost-effective arrangement cannot be made with other state agencies, such as the California Department of Health and Human Services Agency (CHHS), to partner with the Commission on this effort. Ongoing consultation costs with iFish will be minimal after the infrastructure has been put into place.

Action: Commissioner Van Horn made a motion, seconded by Commissioner Gordon, that:

The MHSOAC authorizes the Executive Director to enter into contracts with iFish Group, Inc., for an amount not to exceed \$250,000.

Motion carried 8 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted “yes”: Chair Carrion, Vice Chair Wooton, Commissioners Ashbeck, Aslami-Tamplen, Brown, Buck, Gordon, and Van Horn.

GENERAL PUBLIC COMMENT

There were no comments from members of the public.

ACTION

5: Marin County Innovation Plan

Presenter: Brian Sala, Ph.D., Deputy Director

Deputy Director Sala provided an overview, by way of a PowerPoint presentation, of the Marin County Innovation (INN) project history, and learning objectives of the proposed four-year, \$1,616,900, INN project titled “Growing Roots: The Young Adult Services Project.”

Commissioner Questions and Discussion:

Commissioners stated that the information provided by the county required further detail to better understand the INN project. Commissioners stated that they would like the opportunity to ask Marin County clarifying questions, such as:

- What is missing in the provision of services and how will this informal system of care help with that?
- It seems to require a needs assessment. Wouldn't that have already been done?
- What will be evaluated?

The Commissioners wanted more detail foreshadowing what some of the solutions might be. In addition, the purpose of the project does not match the steps of the INN project.

Deputy Director Sala stated that the lack of clarity regarding the services the county expects to connect transition-age youth (TAY) to is in part reflective of the challenges in getting TAY to participate in services. Low penetration rates are an endemic problem with the TAY population. This INN project concentrates on how to address the process failure of low penetration rates. It will be a developmental process to figure out the appropriate services needed.

Executive Director Ewing stated that the INN project will be a two-step process to better engage TAY: the process of engagement and the development and support of an action plan. There is vagueness in the action plan because the process to develop that will be the first step.

Commissioner Brown stated that this is exactly what the Commission has been criticized for in the past – being nonspecific about what the funds will be spent on. In this case, the action plan that will be developed could be something the Commission feels is an inappropriate use for the funding. He made a motion to postpone any action on this project until the county clarifies their proposal and is available to field questions from Commissioners.

Public Comment:

Ms. Mikalson Walker spoke in support of sending the proposal back to Marin County for additional detail. She stated the concern that Latino TAY will be overshadowed in the process. Based on the Latino Reducing Disparities Report, it is difficult for Latino TAY who also identify as LGBTQ to come out in public. This INN project will ask them to come out in a public way to interface with these components. She asked how the youth will be chosen and how to assure there is true representation, especially for those who are already underserved and unserved, and how they will be reached.

Mr. Gallagher agreed with Ms. Mikalson Walker's comments and stated that the vagueness of the proposal is a concern. He asked how many TAY will be on the advisory council, what the TAY demographic will look like on the advisory council, and if there will be peers with lived experience. The upward trend of the Latino population should be reflected on the advisory council. The INN project should be a TAY-driven process instead of a top-down approach. He stated that the University of California, San Diego, has been working on a tool kit to evaluate TAY programs. He suggested that the tool kit may be beneficial for Marin County for their evaluation process.

Stacie Hiramoto, Director, REMHDCO, spoke in support of sending the proposal back to Marin County for additional details. She agreed that Latinos that are deep into their community should be part of the advisory committee to help improve the outcomes for the underserved population. She stated the hope that Marin County will have a broad, geographic reach with this project.

Action: Commissioner Brown made a motion, seconded by Commissioner Gordon, that:

The MHSOAC postpones the decision on the following Marin County Innovation Project:

Name: Growing Roots: The Young Adult Services Project.

Amount: \$1,616,900

Project Length: 4 years

Motion carried 8 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted “yes”: Chair Carrion, Vice Chair Wooton, Commissioners Ashbeck, Aslami-Tamplen, Brown, Buck, Gordon, and Van Horn.

ACTION

6: Lake County Innovation Plan

Presenter: Brian Sala, Ph.D., Deputy Director

Deputy Director Sala provided an overview, by way of a PowerPoint presentation, of the Lake County INN project history, and learning objectives of the proposed five-year, \$853,752, Lake County INN project titled “Full Cycle Referral and Virtual Care Coordination.”

Jeffrey “J.P.” Shute, Business Software Analyst Project Lead, Lake County, stated that this project is an INN solution to solve the industry-wide question of what happens to individuals after the referral process to enable outcome measurement to ensure that the referrals are making a difference in a patient’s life.

Commissioner Questions and Discussion:

Commissioner Brown asked if the county is partnering with the software company to establish the portal means for this project and, if so, how much of the budget would go to the technology.

Mr. Shute stated that the county is partnering with Trilogy Integrated Resources, the founders of the Network of Care. Deputy Director Sala stated that approximately half of the budget is dedicated to personal services, 17 percent is reserved for evaluation and work plan management, and 25 percent is reserved for operating costs.

Commissioner Ashbeck asked how large the circle of care is. Mr. Shute stated that the project will begin with test agencies. Currently, referrals are sent to Beacon, which serves mildly mentally ill clients. The proposed project will serve severely mentally ill clients. The other side might be, for example, Partnership HealthPlan of California (PHC) to connect with Primary Care Providers (PCPs). As things are proved by running the test, it will be expanded.

Commissioner Ashbeck stated that hospital emergency rooms are interested in being in that loop because that loop is expensive and not very effective. She asked about clients who do not have a computer available to access the portal. Mr. Shute stated that computer terminals will be made available at partner agencies, wellness recovery centers, and libraries. The portal can also be accessed by smartphone.

Commissioner Ashbeck stated that Fresno County is trying to eliminate the term “referral” from its vocabulary and instead use the term “linkage.” A referral denotes someone who is struggling to keep it all together while a linkage denotes taking an individual where they need to go.

Action: Commissioner Ashbeck made a motion, seconded by Commissioner Aslami-Tamplen, that:

The MHSOAC approves Lake County's Innovation Project:

Name: Full Cycle Referral & Care Coordination

Amount: \$853,752

Project Length: 5 years

Motion carried 7 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted "yes": Chair Carrion, Commissioners Ashbeck, Aslami-Tamplen, Brown, Buck, Gordon, and Van Horn.

Chair Carrion announced that the representatives from Marin County had arrived for their 1:00 p.m. agenda item, which was taken out of order and heard earlier in the meeting. Kristen Gardner, Prevention and Early Intervention (PEI) Coordinator, Marin County, and Kasey Clarke, MHSA Coordinator, Marin County, introduced themselves and stated that they would be happy to entertain Commissioner questions. Chair Carrion stated that the Commission had voted to postpone the decision on Marin County's INN plan and that Deputy Director Sala would discuss with Marine County's representatives the Commission's concerns about the INN project.

INFORMATION

7: MHSOAC Executive Director Report

Presenter: Toby Ewing, Ph.D., Executive Director

Executive Director Ewing presented his report as follows:

Budget Process:

Staff will present before the Assembly Budget Committee on Monday and the Senate Budget Committee in a few weeks. The Commission has two budget proposals that have been adopted into the Governor's budget:

- (1) An expansion of the ability to work with counties on their INN plans. The Commission will propose hiring three staff to join the two-person team currently in place to do four things around innovation:
 - Work with counties and communities around strategic opportunities for INN
 - Enhance the ability to provide INN technical assistance and support for counties
 - Improve the research and evaluation guidance and support to better understand the impact of INN and their ability to transform the mental health system and leverage other research and evaluation resources and opportunities
 - Improve dissemination and messaging in reaching out and engaging the business community
- (2) The Commission will ask to increase the timeframe to roll over funding such as the Triage funding so Counties will have an additional year to use the current funds.

The Commission is also working with the Legislature on the State Administrative Fund. This would increase transparency, remove the incentive for state agencies to spend state administrative dollars in ways that may not be the highest priority under the "use it or lose it" scenario, and it would capture unspent funds and make it available during downturns in the economy.

Personnel:

Progress is being made on hiring for Director of Research, Innovation Director, and Program Director. Training opportunities are being identified for staff.

Stakeholder Contracts:

The Request for Proposals is on track for the stakeholder contracts. New contracts are expected to be in place by July 1 so that there will not be a break between the old and new contracts.

Ongoing Projects:

- Regulation Implementation

Meetings are continuing and progress is being made.

- Crisis Services

Staff is in the process of drafting a set of findings and recommendations. Staff is working to ensure that everyone has an opportunity to engage but that there is clarity on what is staff product versus Commission product for transparency.

- The Little Hoover Task Force Project

The Little Hoover Task Force will reconvene to discuss where the Commission has been, what has been discussed, and what recommendations have been made. The Commission will present at the Little Hoover Commission meeting in May of 2016.

New Projects:

The Issue Resolution Process will be the subject of the April 2016 Commission meeting, and Reversion will be the subject of the May meeting. The Criminal Justice and Mental Health project and the Mental Health and Schools project will soon be framed out. There is a lot of interest in these two projects. Work plans for the four subcommittees will be brought before the Commission soon.

Speaking Engagements:

Staff presented at the following meetings:

- Forensic Mental Health Association
- Council on Mentally Ill Offenders
- Mental Health Partner Forum

Staff is scheduled to present at the following meetings:

- California Mental Health Planning Council
- State Association of Local Behavioral Health Boards and Commissions
- California Council of Community Behavioral Health Agencies

Committees:

The Client and Family Leadership Committee (CFLC) and the Cultural and Linguistic Competence Committee (CLCC) recently met and discussed newly-adopted projects.

Research:

Staff has been discussing with consultants about strategies to leverage data and is looking for more productive models. Staff is trying to do four things:

- Establish an open data agenda
- Develop data visualization tools that map the service delivery system
- Experiment with link analysis
- Discuss crowd-sourcing strategies

Other Projects:

- Suicide Hotlines
- Internship/Fellowship

Commission Meeting Calendar:

- The April meeting will be in Murphys, in Calaveras County, with a focus on the issue resolution process
- The May meeting will be in Sacramento with a focus on reversion
- There is no meeting scheduled for June
- The July meeting is planned as a 2-day meeting in Los Angeles with a focus on mental health and criminal justice and will include site visits

GENERAL PUBLIC COMMENT

There were no comments from members of the public.

ADJOURN

There being no further business, the meeting was adjourned at 2:04 p.m.