NOTICE OF PUBLIC MEETING – County of Santa Cruz
MENTAL HEALTH ADVISORY BOARD
MARCH 17, 2022 ♦ 3:00 PM-5:00 PM
HEALTH SERVICES AGENCY
1400 EMELINE AVENUE, BLDG K, ROOM 207, SANTA CRUZ, CA 95060
THE PUBLIC MAY JOIN THE MEETING BY CALLING (916) 318-9542, CONFERENCE ID 165 963 902#

Xaloc Cabanes
Chair
1st District

Valerie Webb
Member
2nd District

Vacant
3rd District

Serg Kagno
Secretary
4th District

Jennifer Wells Kaupp
Member
5th District

Laura Chatham
Member
1st District

Catherine Willis
Member
2nd District

Hugh McCormick
Member
3rd District

Antonio Rivas
Member
4th District

Jeffrey Arlt
Member
5th District

Supervisor Greg Caput
Board of Supervisor Member

Erik G. Riera
Behavioral Health Director

IMPORTANT INFORMATION REGARDING PARTICIPATION IN THE
MENTAL HEALTH ADVISORY BOARD MEETING
The public may attend the meeting at the Health Services Agency, 1400 Emeline Avenue, Room 207, Santa Cruz. All individuals attending the meeting at the Health Services Agency will be required to use face coverings regardless of vaccination status. Individuals interested in joining virtually may click on this link: Click here to join the meeting or may participate by telephone by calling (916) 318-9542, Conference ID 165 963 902#. All participants are muted upon entry to prevent echoing and minimize any unintended disruption of background sounds. This meeting will be recorded and posted on the Mental Health Advisory Board website.

If you are a person with a special need, or if interpreting services (English/Spanish or sign language) are needed, please call 454-4611 (Hearing Impaired TDD/TTY: 711) at least 72 hours in advance of the meeting in order to make arrangements. Persons with disabilities may request a copy of the agenda in an alternative format.

Si usted es una persona con una discapacidad o necesita servicios de interpretación (inglés/español o Lenguaje de señas), por favor llame al (831) 454-4611 (Personas con Discapacidad Auditiva TDD/TTY: 711) con 72 horas de anticipación a la junta para hacer arreglos. Personas con discapacidades pueden pedir una copia de la agenda en una forma alternativa.
AGENDA

3:00 Regular Business
   a. Roll Call / Introductions
   b. Public Comment
      (No action or discussion will be undertaken today on any item raised during this Public Comment period except that Mental Health Board Members may briefly respond to statements made or questions posed. Limited to 3 minutes each)
   c. Board Member Announcements
   d. Approval of February 17, 2022 minutes*
   e. Secretary’s Report

3:15 Standing Reports
   a. Board of Supervisors Report – Supervisor Greg Caput
   b. Behavioral Health Director’s Report – Erik G. Riera, Behavioral Health Director
      1. Presentation: Overview of Substance Use Disorder Services
         Anthony Jordan, Substance Use Disorder Services Director
   c. Committees
      1. MHSA Advisory Committee
      2. Site Visit / Programs Ad Hoc Committee
      3. Budget Committee
      4. SUDC/MHAB Merger Committee
      5. Community Engagement Committee
      6. Law Enforcement and Mental Health Ad Hoc Committee
   d. Patient’s Rights Reports – George Carvalho

4:45 New Business / Future Agenda Items
   a. Nominating Committee for Board Officers
   b. Summary of Retreat

5:00 Adjourn

Italicized items with * indicate action items for board approval.

NEXT REGULAR MENTAL HEALTH ADVISORY BOARD MEETING IS ON:
   APRIL 21, 2022 ♦ 3:00 PM – 5:00 PM
   HEALTH SERVICES AGENCY
   1400 EMELINE AVENUE, BLDG K, ROOM 207, SANTA CRUZ, CA 95060
   TELEPHONE CALL-IN NUMBER (916) 318-9542; CONFERENCE ID # - TO BE ANNOUNCED
MENTAL HEALTH ADVISORY BOARD
FEBRUARY 17, 2022 ♦ 3:00 PM-5:00 PM
Microsoft Teams Meeting (916) 318-9542, Conference ID 621 545 626#

Present: Antonio Rivas (arrived at 3:41pm), Hugh McCormick (arrived at 4:17pm), Jeffrey Arlt, Jennifer Wells-Kaupp, Laura Chatham, Serg Kagno, Valerie Webb, Xaloc Cabanes, Supervisor Greg Caput

Excused: None

Absent: Catherine Willis

Staff: Jane Batoon-Kurovski

Guest: Dr. Ken Minkoff

I. Roll Call – Quorum present. Meeting called to order at 3:07 p.m. by Chair Xaloc Cabanes.

II. Public Comments
A. Jasmine Najera – former Forensic Services Program Manager for Santa Cruz County. Clarified that Monterey County donated $3 million to the Pajaro Valley Health Trust.

III. Board Member Announcements
A. Chair Cabanes announced that Supervisor Caput will not be seeking reelection. He thanked Supervisor Caput for his support, dedication, and everything that he has provided to the Mental Health Advisory Board.

IV. Business / Action Items
A. Approve January 20, 2022 Minutes
   Motion/Second: Supervisor Greg Caput / Valerie Webb
   Ayes: Jeffrey Arlt, Jennifer Wells Kaupp, Laura Chatham, Serg Kagno, Valerie Webb, Xaloc Cabanes, Supervisor Greg Caput
   Nays: None
   Not Present during this action item: Antonio Rivas, Hugh McCormick
   Motion passed.

V. Reports
A. Secretary’s Report
   1. Retreat to be held on March 11th, 10am-3pm
   2. Outside training opportunity – Adult Survivor System Navigation Workshop, February 23rd 3pm to 5pm. It is for individuals and organizations working with victims/survivors of crime to provide direct services, to make referrals, in navigating the system.
   3. Volunteers needed for the Homeless Point in Time Count on Monday, February 28th, 5am to 9:30am. The Point in Time Count is a count of sheltered and unsheltered people experiencing homelessness on a single night in January.
   4. 988 system should be up and running for Santa Cruz by mid-July.
B. Board of Supervisor’s Report – Supervisor Greg Caput
1. Supervisor Caput thanked the MHAB for all the work they do.
2. Supervisor Caput said the letter on the Oversight Committee of the Sheriff’s Office needs to come from the MHAB and should get on the Board of Supervisors agenda for discussion and clarification of everything that it entails.
3. Update on projects
   a. The vaccine site at Ramsey Park moved to the old West Marine Building.
   b. Watsonville Community Hospital - Pajaro Valley Health Trust trying to take over and operate the hospital. The cost to purchase a bankrupt hospital is $30-$40 million. There is some state and local funding, and working on getting money from Sutter Hospital, Dominican Hospital, and Monterey County. A board will be formed to look into all the ramifications of taking over the hospital.

C. Behavioral Health Report – Cassandra Eslami, Director of Community Engagement
   1. Update on the California Health Facilities Financing Authority (CHFFA) application - the County has been funded with $7.5 million towards the Children’s Crisis Residential Program. The initial application was for $20.5 million for the entire facility. Other options will be explored for the remaining $13 million. Cassandra stated that they are going to look at the behavioral health continuum infrastructure programming money, which is coming out in August for the children and youth programs. Cassandra also stated that at this time, they are exploring the current BH SIP money that’s available right now for programs for the adult crisis step down as they continue to try to expand the crisis continual.

D. Committee Updates
   1. MHSA Advisory Committee – no report.
   2. Site Visit / Programs Committee – no visits due to COVID.
   5. Law Enforcement and Mental Health Committee – plan to have on-going presentations during the committee meetings and create a work group to follow up on the road map presentation.

E. Patient’s Right Report – Davi Schill was present for the meeting. No one had questions regarding the Patients’ Rights Report.

VI. Presentation: Roadmap to the Ideal Crisis System, Dr. Kenneth Minkoff
   The presentation includes essential elements, measurable standards, and best practices for behavioral health crisis response. Dr. Minkoff’s presentation also included the vision, the three major sections of the report (Accountability and Finance, Crisis Continuum and Basic Clinical Practice), and tools to help implementation (steps for communities and steps for system leaders and advocates).

VII. New Business / Future Agenda Items
   A. Development, implementation, and support of 988 Subcommittee – to be discussed at the retreat.
   B. Additional one-hour monthly meeting to address special, urgent, or requested MHAB related topics – to be discussed at the retreat.
   C. Consider Adopting Assembly Bill 361 Statement of Findings Allowing Remote Meetings. The Mental Health Advisory Board discussed Assembly Bill 361 which allows Brown Act advisory commissions and bodies to meet remotely during a state of emergency by approving a statement of findings every 30 days. The Board agreed the meetings should be held virtually and in a physical location.

VIII. Adjournment
   Meeting adjourned at 5:24 p.m.
Front Street

Name of facility: Front Street Residential

Patients’ Rights involved: Right to be free from harm, right to be treated with dignity and respect.

Summary of advocacy/ Action taken:

1. Contacted facility to determine covid status of staff and residents as well as set up an appointment with client. This writer spoke with client at length to determine the adequacy of the staff response to the resident-to-resident abuse, as well as the client’s physical condition and whether the client felt safe at the facility.

Date of first contact with client: 2/5/22

Date of the most recent contact with client: 2/7/22

Outcomes: Client continues to feel safe at the facility and does not wish to press charges. The client communicated that the staff were responsive regarding this incident and believes that they will continue to do so. No physical injuries were reported or observed by this writer. This writer will check in with the client upon future monitoring of the facility.

Telecare

Name of facility: Telecare-PHF

Patients’ Rights involved: Right to have representation by a Patients’ Rights Advocate.

Summary of advocacy/actions taken: This writer took 3 lengthy reports from a conserved client concerning his past and present circumstances. Per client’s permission this writer contracted the conservator and advocated for requested testing.

Date of first contact with client: 2/8/22

Date of most recent contact with client 2/23/22

Outcomes: The client will remain at the facility until stabilized. This writer will make weekly contact with the client and will continue to advocate to the conservator for the client’s requested testing.
Name of facility: **Telecare-PHF**

Patient’s Rights involved: Right to contest conservatorship

Summary of advocacy/actions taken: In response to a phone messaged I interviewed this conserved client by phone. This writer then referred this client to his social worker. The client informed me that the social worker is willing to help him. The client has been discharged from the Telecare facility and placed out of county. This writer will continue to reach out to him to determine if there is any way I may be of help.

Date of first contact with client: 2/23/22
Date of last contact with client 2/28/22

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**7th Avenue Center**

Name of facility: **7th Avenue Center**

Patients’ Rights Involved: Right to be fully informed and involved in her treatment decisions. Right to contest conservatorship

Summary of advocacy/actions taken: This writer placed a call to public defender to determine whether the client would be eligible for a re-hearing on the matter. Per client’s permission this writer spoke with the conservator. Spoke with the client about the responses from the Public Defender as well as her Conservator. No further action is required from this writer. This client has been discharged from the facility.

Date of first contact with the client: 1/20/22
Date of last contact with the client: 2/11/22

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Name of facility: **7th Avenue Center**

Patients’ Rights involved: Right to contest conservatorship, right to be in least restrictive facility

Summary of advocacy/ actions taken: This writer to a newly conserved client who requested to be released from conservatorship. This client is not eligible to go to court for another 4 months. I received permission to speak with the client’s conservator and did so. The client stated that this person is at the proper level of care at this point. This writer will continue to reach out to this client on a weekly basis.

Date of first contact with client: 2/17/22
Date of last contact with client: 2/21/22

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Name of facility: **7th Avenue Center**

Patients’ Rights involved: Right to be free from harm
Summary of advocacy/actions taken: In response to a report from the facility of resident-to-resident abuse. This writer interviewed my client at the facility. The facility was very noisy due to gardening work, but we were able to get through the interview. This writer did not observe physical injury, nor informed of such. This client declined to exercise his right to contact local law enforcement. When asked by this writer, my client stated that staff responded quickly and that he felt safe while at the facility. This writer also made a call to the client’s conservator. The conservator returned me call. He stated that he thought that the facility was doing a good job.

Date of first contact with client: 2/23/22

Date of last contact with client 2/25/22

Name of facility: 7th Avenue Center

Patients’ Rights Involved: Right to be free from harm:

Advocacy/actions taken: In response to a resident-to-resident abuse report generated by the facility this writer attempted to speak with the alleged victim. However, my client refused to speak with me and declined to give a reason for the refusal. This writer placed a call to conservator that as of this writing has not been returned.

Date of first Contact: This writer as of this writing has not been able to speak with the client but will continue to reach out to him both by phone and in person.

Willowbrook

Name of facility: Willowbrook

Patients’ Rights involved: Right to free from harm

Summary of advocacy/actions taken. In response to a report of resident-to-resident abuse this writer attempted to speak with client. However, my client did not wish to speak with this writer without any reason offered. This writer took a verbal report for more detailed information from the Administrator. During this interview I asked whether the client was informed about her right to contact local law enforcement. The client was informed but declined to exercise this right. This writer will make two more attempts to speak with the client while at the facility. This issue remains ongoing.

Date of first contact with client: 02/13/22

Date of last contact with client: Not applicable

Name of facility: Willowbrook
Patients’ Rights involved: Right to be free from harm

In response to my client’s call, I interviewed her by phone: Per the client’s permission I spoke to the Administrator. Client has a sum of money that cannot be secured by the facility. This writer urged the Administrator to contact Encompass about the payee program. This writer is in almost daily contact with this client and continues to do so. This writer will place another call to the Administrator and will continue to monitor the situation closely.

Date of first contact with client: 2/1/22
Date of last contact with client 2/28/22

Out of county placement

Name of Facility: Crestwood-Modesto (out of county)

Patients’ Rights involved: Right to be free from harm

Summary of advocacy/actions taken: Received call from conserved client placed out of county. This client reported multiple rapes and needs pre-natal care. This writer reported this information to the staff of the Crestwood facility as the client’s Conservator. This writer will continue to reach out to this client on an ongoing basis.

Date for first contact with client: 12/14/21
Date of last contact with client: 2/18/22
## TELECARE CLIENT CERTIFICATION AND REISE HEARING/PATIENTS’ RIGHTS REPORT

**February 2022**  
**Third Quarter**

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<td><strong>1.</strong> TOTAL NUMBER CERTIFIED</td>
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<td><strong>2.</strong> TOTAL NUMBER OF HEARINGS</td>
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<td><strong>3.</strong> TOTAL NUMBER OF CONTESTED HEARINGS</td>
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<td><strong>7.</strong> DISCHARGED BEFORE HEARING</td>
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<td><strong>10.</strong> NON-REGULARLY SCHEDULED HEARINGS</td>
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Ombudsman Program & Patient Advocate Program shared 0 clients in this month  
(shared = skilled nursing resident (dementia) sent to behavioral health unit or mental health client placed in skilled nursing facility)

*The usual scheduled hearing days are Tuesdays and Fridays. Due to the pandemic and the shortage of bed availability throughout the state of California hearings can are scheduled throughout the week to accommodate legal requirements that hearings must occur no later than one week of hospitalization.*
The following is an account of activity February 1, 2022, through February 28, 2022 providing representation to clients held at Telecare (Santa Cruz Psychiatric Health Facility) who are facing Reise Hearings.

Total number of Riese petitions filed: 9
Total number of Riese Hearings conducted: 8
Total number of Riese Hearings lost: 8
Total number of Riese Hearings won: 0
Total number of Riese Hearings withdrawn: 1 - 1 hour and 20 minutes
Hours spent on Riese Hearings Conducted: 3 hours and 75 minutes
Hours spent on all Riese Hearings included those hearings that were cancelled by the hospital:

Respectfully submitted,

George N. Carvalho, PRA