

# COUNTY OF YOLO

Health and Human Services Agency

Joan Planell  
Director

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(530) 661-2750 • www.yolocounty.org

## Local Mental Health Board Meeting Minutes

**Monday, February 22, 2016, 7:00 PM – 9:00 PM**  
Arthur F. Turner Community Library Meeting Room  
1212 Merkley Avenue, West Sacramento, CA 95691

<b>Members Present:</b>	Brad Anderson; Bret Bandley; Richard Bellows; Robert Canning; Martha Guerrero; June Forbes; James Glica-Hernandez; Sally Mandujan; Supervisor Jim Provenza; Robert Schelen; Tom Waltz; <del>Janlee Wong<sup>1</sup></del> ; Tawny Yambrovich
<b>Members Excused:</b>	Davis Campbell; Sarah Hahn; Nicki King; Josh Pozun; Supervisor Don Saylor
<b>Staff Present:</b>	Karen Larsen, Mental Health Director / Alcohol and Drug Administrator Makayle Neuvert, Secretary, LMHB Administrative Support Emily Henderson, Assistant Deputy to Don Saylor
<b>Community Members:</b>	Igee Amadasun, Turning Point Community Programs Gabe Lockshin, Turning Point Community Programs
<b>Others/Guests:</b>	Sara Gavin LMFT, LPCC, Director of Behavioral Health Diana White, Chief Operating Officer

### 7:00 PM CALL TO ORDER

1. Welcome and Introductions: The February 22, 2016 meeting of the Local Mental Health Board was called to order at 7:00 PM. Introductions were made and new member Lisa Cherubini was welcomed.
2. Public Comment: None
3. Approval of Agenda: **Motion:** James Glica-Hernandez, **Second:** Lisa Cherubini, **Discussion:** None, **Vote:** Passes with 1 abstention from June Forbes
4. Approval of Minutes from January 25, 2016: **Motion:** Tawny Yambrovich, **Second:** Bret Bandley, **Discussion:** Typo noted and will be corrected, **Vote:** Unanimous
5. Member Announcements:
  - June Forbes shared flyers advertising the NAMI-Yolo 2016 Pat Williams Dinner on February 25<sup>th</sup>, an invitation to the next NAMI-Yolo meeting including with special discussion topics, and also a NAMI-Yolo calendar of events.
  - Emily Henderson invited all to attend the 2016 annual Soup's On event being hosted by Supervisor Don Saylor on March 10<sup>th</sup>. This year's proceeds will benefit Yolo Interfaith Immigration Network.

<sup>1</sup> Correction noted during March 2016 motion to approve these minutes.

#### 7:15 PM TIME SET AGENDA

6. Provider Presentations on Dual Diagnosis / Co-Occurring Disorders Services: Karen Larsen offered an introduction of the presenters from Turning Point Community Programs (TPCP) and CommuniCare Health Centers (CCHC). She also commented on the need for integrated services, supporting both behavioral health and substance use disorder treatments.

The following presentations were shared with the group.

[CommuniCare Health Centers: Sara Gavin LMFT, LPCC, Director of Behavioral Health](#)

[Turning Point Community Programs: Diana White, Chief Operating Officer](#)

#### 7:55 PM CONSENT AGENDA

7. Mental Health Director's Report: The following item(s) were pulled from Karen Larsen's Mental Health Director's Report for additional discussion.
- Student Mental Health: The graphic included in the report was clarified. Student mental health is one of the statewide initiatives for MHSAs and the information and the graphic was released concurrently with this recent conversation among MHSAs stakeholders.

The following updates were also shared.

- New Medical Director: Leigh Harrington, M.D., M.P.H., M.H.S.A., has been hired as the new Medical Director for Behavioral Health Services. She will be invited to a future LMHB meeting to meet the Board.
- Homeless Services: Karen mentioned that the bill that Former Senator Steinberg worked on, including the "No Place Like Home" proposal, seeks to allocate a certain percentage of MHSAs dollars to pay for permanent supportive housing. Yolo County has not taken official position on this bill and is the case with a number of counties.

#### 8:00 PM REGULAR AGENDA

8. Board of Supervisors Report: Emily Henderson spoke on behalf of Supervisor Saylor who has a conflict and was not able to attend.
- Members James Glica-Hernandez, Bret Bandley, and Bob Schelen were thanked for speaking about the LMHB annual report at the January BOS meeting.
9. LMHB Strategic Plan Long Range Goals Update: Topic champion Davis Campbell was not able to attend this meeting so this was tabled until next month. General long term goals and shorter immediate goals were previously introduced and will be under consideration and up for vote/approval at the next meeting. It was reiterated that the efforts of the goals will be supported by the committee structure.
10. Chair Report – Bob Schelen
- a. LMHB Officer Election: This is an interim election with the annual election of officers planned for the May meeting.
    - Vice Chair – A motion was made to elect James Glica-Hernandez as the LMHB Vice-Chair  
**Motion:** June Forbes, **Second:** Martha Guerrero, **Discussion:** None, **Vote:** Unanimous
    - Secretary – With James' acceptance of the Vice-Chair position, the Secretary position as then vacant. James nominated Sally Mandujan for the Secretary position. **Motion:** James Glica-Hernandez, **Second:** Martha Guerrero, **Discussion:** James referenced a waiver included in the bylaws which allowed a nomination and election to occur in the same meeting. Bob confirmed that State regulations had been reviewed and approved such action. On the job training from

previous office holders was also proposed to support Sally in this role. **Vote:** Passes with 1 abstention from Tawny Yambrovich

- b. Update on the Proposed Amendment to Bylaws and Committee Meeting Structure:
- Committee Structure: an [email to committee chairs](#) was distributed and all the details were reviewed. Specifically noted was the current existence of 4 committee workshops per year and that in order to meet in excess of these times, each committee must provide a schedule to [LMHB@yolocounty.org](mailto:LMHB@yolocounty.org), including locations, for applicable preparation and noticing. County staff administrative liaison to the LMHB Makayle Neuvert, will provide shell agenda templates to committee chairs.
  - Bylaws: An [updated version of the bylaws](#) was shared by James and will be sent to the group electronically for review of the proposed changes. The next agenda will include a vote/approval of these changes.
- c. Discussion on Recent Deaths of Individuals in Police Custody: June Forbes, with support from Tom Waltz, opened a discussion on this topic, specifically focused on the incidences involving David Shurtz and James Dugger. Tom shared the basic details of each situation then fielded questions on the law enforcement perspective. Tom noted the similarities of the situations and the differences in the police response. In both cases restraints were needed and cardiac arrest or medical distress was experienced. Member Brad Anderson questioned the connection of these cases to this mental health board. June countered with an inquiry of what could have been done differently so lives were not lost and why any use of force was necessary for a mental ill person. Tom noted that the police response was based on reports of a disturbance, not a mental illness call. Further, when someone is in a non-communicative state, the Community Intervention Program (CIP) and Crisis Intervention Training (CIT) are not effective. The police have to be multi-talented and multi-disciplined. Richard Bellows asked about the use of tranquilizer darts but Tom noted that this was not the standard due to the significant issues involved in chemically retraining people and the unknown potential with a person's medical situation or drug interaction. Tazers are the current non-lethal tool used. Attribution of death from substance overdose was questioned by member James and this was confirmed as a possible scenario. Public comment of a description of the event as heard by community member Gabe Lockshin was shared. Bob has three documents to share based on his research and will send these electronically to the group.
- d. Legislative Ad Hoc Committee Report: Martha Guerrero shared recent updates on the following bills. She will get a bill list together.
- SB-238 Foster care: psychotropic medication for children in foster care: new language introduced.
  - Serious consideration to fund services and housing in a bill for rapid rehousing programs and might have a mental illness component.
  - A bill passed on February 22 to fund services for developmental disabilities in the community, as well as the managed care organization tax.
- e. Board Committee Reports:
- Communication and Education Committee: A list of activities for the upcoming public forums is being prepared. Bob and Karen will be asked to speak and anyone else interested in speaking are encouraged to reach out to James. James will be attending the [CIBHS Statewide Training](#) in hopes of growing our contemporary knowledge. He invited any others to join him. Email James with interest by February 24.

- Program Committee: No update however topics for the next committee meeting include Board and Cares, and employment opportunities for those in Mental Health in Workforce Investment Programs.
- Budget and Finance Committee: The current focus is on the revised budget and there is a need to have longer meetings during the budget preparation season. A meeting with the HHSA is being planned. This committee is vacant two positions and all were asked to consider joining.
- Committee membership was discussed and vacancies reviewed. Josh Pozun was added to the Communications and Education Committee, Lisa Cherubini was added to the Program Committee, June Forbes asked to also participate on the Budget and Finance committee, Sarah Hahn will need to choose where she would like to participate.

#### 9:00 PM ADJOURNMENT

#### 11. Future Meeting Planning and Adjournment:

- The next meeting will be held on Monday, March 28, 2016, from 7:00-8:00 PM\* at the Bauer Building, Thomson Conference Room, 137 N. Cottonwood Street, Woodland, CA 95695. *\*The next meeting will consist of an abridged regular meeting from 7:00 – 8:00 PM followed by Board Committee Workshops from 8:00 – 9:00 PM.*
- Future Meeting Planning:  
March: Strategic Plan Long Range Goals for additional discussion and finalization; Approval of updates to the bylaws; Committee Workshops  
April, May, and June: Public Forums
- This meeting was adjourned at 9:02 PM.



**FEBRUARY 22<sup>ND</sup>, 2016**  
**SARA GAVIN LMFT, LPCC**  
***DIRECTOR OF BEHAVIORAL HEALTH SERVICES***

## Behavioral Health Department



- 65 employees
- Bilingual Adult Psychiatrist, Child Psychiatrist, Licensed MFTs, LCSWs, MFTi/ASWs, Substance Abuse Specialists, Case Mangers, Youth and Family Specialists, Outreach Workers, Child Development Staff and Administration.
- 9 current student interns (Sacramento State Social Work Program).



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- Primary Care, Prenatal
- Dental
- Substance Use Disorder Treatment
- Adult, Child, Family Therapy
- Adult and Child Psychiatry
- Case Management
- Child Development and Parenting

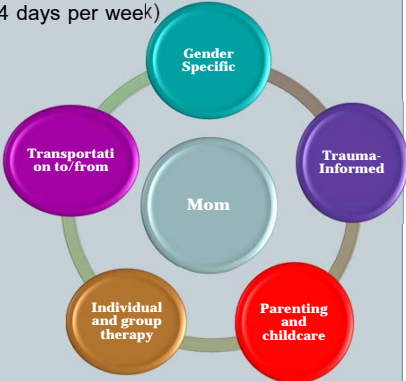
**Dual Diagnosis Out Patient Services:**

- Perinatal Day Treatment program
- Path to Recovery
- CORE/CREO
- Behavioral Health in Primary Care
- Youth Services

## Perinatal Day Treatment (PNDT) and Child Development Program (CDP)

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- PNMT is an intensive day program (3 hours a day, 4 days per week)
- Pregnant and parenting women.
- PMADS screening and treatment
- Gender-specific intervention
- Individual and group therapy
- Evidenced Based Models:  
Seeking Safety, Dialectical Behavior Therapy, and Courage to Change.
- Free of cost transportation.
- The Child Development Program (CDP)
  - runs concurrently with PNMT and offers childcare to children ages 0-5 whose mothers attend PNMT.



## Path 2 Recovery Program (P2R)

- Dual Diagnosis Recovery program
- Woodland and West Sacramento
- Serving women/men age 18 +
- Evidenced Based Models: *Illness Management and Recovery as well as, Dialectical Behavior Therapy (DBT).*
- Group, Individual and Family intervention
- Onsite urine analysis
- Access to psychiatrist and consultation
- An after-care component is included.
- Walk-in screening for substance use services: Woodland and West Sacramento, Monday and Thursdays 2-4pm or by appointment if necessary



## Community Outreach Rural Engagement (C.O.R.E)/ Creando Recursos y Enlaces Para Oportunidades (C.R.E.O)

- Funded by 3-year MHSA Grant
- CREO services are aimed at improving access and increasing life functioning for the underserved Latino/Hispanic community of Yolo County struggling with behavioral health issues.
- In-office, or in-community
- Full-scope behavioral health services (case management, counseling/psychiatry/substance abuse).
- All services are delivered in Spanish by clinicians who are culturally reflective of the community.
- Monthly educational groups on topics such as nutrition, mental illness, communication, resources etc.
- SMART-Y SSI Services imbedded
  - In 14/15 259 patients who were screened for CREO Services, 176 engaged in CREO services
  - 100% of eligible CREO patients engaged in case management services by the CREO case managers.
  - 114 patients have engaged in mental health services with the CREO Behavioral Health Specialist

## Integrated Behavioral Health (IBH) Services



- Integrated Behavioral Health (IBH) Services are delivered within the primary care clinic (Children and Adults).
- Available for CommuniCare Health Centers Medical patients
- Brief, confidential individual counseling services, referrals to other agencies, coordination of referrals to substance abuse recovery programs, assistance in managing serious health conditions such as chronic pain, hypertension and diabetes.
- Access to bilingual Adult Psychiatrist and Child Psychiatrist
- Davis, West Sacramento and Hansen (Woodland).
- SBIRT

## YOUTH SERVICES



- School Services
- Individual Therapy
- Trauma Focused Cognitive Behavioral Therapy (TF-CBT)
- Seeking Safety
- Mental Health Assessments/ groups in Juvenile Hall
- Functional Family Therapy (FFT)
- Child Psychiatry
- Substance Use Services





## Questions?



Sara Gavin, LMFT, LPCC  
Director of Behavioral Health Services  
[Sarag@communicarehc.org](mailto:Sarag@communicarehc.org) 530 405-2836

Adult Substance Use Services  
Christina Andrade-Lemus, MSW (916) 403- 2970

Perinatal and Family Services  
Tegwin Millard, LMFT (916) 403- 2970

Child Development and Parenting Services  
Denise Tillery, LCSW (916) 403- 2970

Wraparound Services  
Kim Porter, ASW (530) 405-2815

CORE/CREO  
Eliana Argueta (916) 698-7893

Youth Services  
Alexandra Garton, LMFT (916) 403- 2970

Business Operations / Billing  
Shannon Garza, Business Operations Manager (530) 405-2815





## FREE TO CHOOSE

- Community-based group and one on one counseling for individuals with co-occurring mental health and substance use challenges
- Endorses the concept of individualized care while emphasizing harm-reduction, decision-making skills, psychoeducation, and resiliency.
- Integrates client-centered modalities of treatment designed to increase motivation, acknowledge strengths, examine stages of change, and explore barriers to sobriety.
- Includes support as it relates to developing proactive approaches to better manage co-occurring disorders



## FREE TO CHOOSE

- Provides Harm Reduction services in a Wellness and Recovery Model for clients with both psychiatric disabilities and substance abuse.
- Ideal for clients who can't or won't accept abstinence as the only goal, or as a requirement for getting help.
- Allows substance abuse to be framed as a behavioral and safety hazard, rather than judged as a moral issue.
- Engages clients with Motivational Interviewing, vignettes or client stories of hope.



## GOALS

- Our mission is to assist all clients with substance abuse issues to identify their strengths, becoming more confident, competent members of their community.
- The emphasis is on allowing an environment for clients who cannot or will not accept abstinence as the only goal to learn tools for maintaining personal values (such as safety, housing, stable relationships, and community participation).



## WHAT HARM REDUCTION ISN'T

- Anti-abstinence
- Enabling
- Condoning
- Approving



## WHAT HARM REDUCTION IS

- Member driven
- Alternative approach to helping people who won't abstain from drinking and/or using substances.
- Views certain behaviors as health hazards, not moral issues.
- Continuum based



## SERVICES

Free to Choose provides:

- Co-occurring Disorder Assessments
- Group therapy
- Individual therapy
- Step-down peer-facilitated groups



## FTC GROUPS

- Group therapy is divided into sections focusing on education, guidance and intervention in the areas of: Harm reduction, stages of change, sober social skills, and community integration.
- Three sections will be covered in group therapy over 12 weeks, adding new members every 4th week. Sections may be repeated as needed.



## STAFF

- Certified Alcohol and Drug Abuse Counselor and a Peer Support Counselor.
- Staff members focus on: strength-based approaches, emphasizing resilience and recovery.



## GROUP LOCATIONS

- West Sacramento
- Davis (Farm House and Homestead)
- Woodland
- Winters



## EVIDENCE-BASED PRACTICES

- Motivational Interviewing (MI)
- Wellness Recovery Action Plans (WRAP)
- Harm Reduction



## REFERRALS & LINKAGES

The Free to Choose program offers all clients various referrals to numerous resources within the area. These referrals and linkages include the following locations:

- Yolo County Mental Health/Drug and Alcohol Department (Case Management, additional support groups and therapy)
- Homestead Co-op Living Community Davis, CA
- Davis Food Bank (Soup Kitchens, Food Pantries, and Shelters) Davis, CA
- Walter's House Treatment Center Woodland, CA
- Davis Hope Group (Alcohol Anonymous group) Davis, CA
- Woodland Traditional Group (Alcohol Anonymous group) Woodland, CA
- Narcotics Anonymous at Church of the Nazarene in Woodland, CA
- East Yolo Fellowship (Alcohol Anonymous) West Sacramento, CA
- Safe Points Syringe Exchange Sacramento, CA





## CONCLUSION

- Harm reduction services reach out to people and their families often well before they have decided to change anything about their drug use, in an effort to motivate the user to make healthy, life-promoting, choices. This non-judgmental approach reduces risk for substance abusers as they develop the desire and the skills to help themselves



## CONTACTS

Program Director: Igbinosa Amadasun  
Phone: (530) 601-5959  
Email: [igbinosaamadasun@tcp.org](mailto:igbinosaamadasun@tcp.org)

Director of Program Services: Sadie Shen  
Phone: (530) 601-5959  
Email: [sadieshen@tcp.org](mailto:sadieshen@tcp.org)

COO: Diana White  
Phone: (916) 364-8395  
Email: [dianawhite@tcp.org](mailto:dianawhite@tcp.org)





## Makayle Neuvert

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**From:** slobadbobs@aol.com  
**Sent:** Friday, February 19, 2016 5:18 PM  
**To:** mguerrerosa@yahoo.com; jcglicahernandez@gmail.com;  
bellows\_richard\_j@sbcglobal.net  
**Cc:** LMHB; Makayle Neuvert  
**Subject:** Brown Act/Standing Commimtee Procedures  
  
**Categories:** LMHB

Hello LMHB Standing Committee Chairs:

There is so much work to do, especially if we use the Committee system to champion our three major goals of the Strategic Plan effort that Davis has been at the head of for the last few months. We will be finalizing that process now. As you know, each Standing Committee is scheduled to meet three times this year (March, June and September) after our regular monthly meeting. Given the workload and the conference call situation thrown into a questionable category per the Brown Act definitions.

Here is what must happen with the Standing Committee's.

1. You need to designate a member (it can be you, the Chair, or another member of the Standing Committee) to be the contact with Makayle.
2. You need to look at the months we do not have the standing committee's meeting after the regular meeting and set a permanent time for your Sub-Committee to meet. For instance, if you want to meet on all the other months, which at this point, I would advice; you need to get to Makayle the time, day of the week and date for the meeting; for instance....The \_\_\_\_\_ Standing Committee will be meeting in April, May, July, August, and October on the third Tuesday of each month 4-19/5-17/7-19/8/16/10/18 at 4 pm in the Bauer Building. (It helps to pick a county building, since they do not have to paid for and super early pre-booked).
3. There needs to be an agenda put together for each meeting to be posted not less than 72 before the meeting. to that end, please have an agenda prepared 5 business days before each Standing Committee meeting. Makayle has a template she will use, however you can set different items on each agenda each month.
4. Please assign someone to take minutes of each of your Standing Committee meetings. Send those minutes to Makayle and she will send them to the Executive Committee for review, before final inclusion into the full meeting agenda packet.

It has been difficult for Supervisor Provenza, Supervisor Saylor, the County Counsel and I to put together a meeting on the Brown Act; however we know this procedure satisfies the Brown Act. So, we will follow this procedure at this time. If it continues that we cannot meet in person, (the above group), I will see if we can do a conference call and see of there is somewhere where flexibility is allowed.

Please contact me in reply to this email, if you have any questions.

Thanks Chairs!

Bob Schelen



## **Yolo County Local Mental Health Board**

### **Committee Guidelines**

The work of the Yolo County Local Mental Health Board (the Board) is vital to ensuring the continuation of the work our county is doing in providing excellent mental health care to the maximum number of residents possible. Toward that end, the Board has created three committees and one subcommittee, including the Program Committee, the Finance Committee, the Communication and Education Committee, and periodically, the ad hoc Legislative Subcommittee, if a specific, time-limited activity is required. To facilitate the work of these committees, four subcommittee meeting dates are scheduled throughout the 2016 calendar for These meetings have been noticed according to the Brown Act, which require a minimum of 72 hours advanced notice, distribution of materials, and site notice on the day of the meeting.

#### **Structure**

The committees are created to attend to the specific areas of concern as determined by the Board as a whole. To meet, we have two options:

1. Preset dates and times, which are noticed by the Department of Mental Health, with venues and organizational logistics required by the Brown Act.
2. Dates and times requested by the Committee Chair for specific activities that come before it the Committee.

The logistics for the first option are established and noticed at the beginning of each calendar year.

The logistics for the second option is also mandated by the Brown Act. For any meeting that will have a quorum in attendance, these policies shall be followed. With no fewer than seven (7) working days notice, the Committee Chair shall contact the Board Secretary to coordinate the meeting to prevent undo requests of the Department staff. The Secretary will then coordinate activities with the Department after all details are worked out, so that staff may notice the meeting. The process is as follows:

1. The date is set;
2. The venue is determined;
3. The notice is sent out to all stakeholders through various media, e.g. newspapers, e-mails, and fliers, as necessary for the particular meeting;
4. The venue is required to be accessible for all people who choose to attend the meeting;
5. A sign is required to be posted at all entrances, even private domiciles or hotel rooms;
6. In the case of teleconferencing:
  - a) Telephone numbers and access codes are provided for conference calls as part of the notice;
  - b) The location of each Board member is identified. A quorum of these committee members must be within the boundaries of our service area, which is Yolo County; and
  - c) Signs are posted at the venue of each person's location;

At all Committee meetings, the Vice-Chair of the Committee, or another member shall be assigned to take minutes of the meeting, which will then be shared with the Board Chair, and Secretary of the Board, for recordkeeping purposes.

Chairs may not have serial meetings with Committee members to avoid Brown Act requirements.

**Summary**

Although these guidelines are specific and rather intensive, they also provide our stakeholders adequate access to the Board, and requires accountability for our actions as a Board.



## BYLAWS

### ARTICLE I

#### SECTION I: MISSION, VALUES AND RESPONSIBILITIES

##### Mission:

Yolo County Local Mental Health Board supports the wellness, recovery, and resilience of all Yolo County residents through the identification of local mental health assets and needs, informed advocacy and education and collaboration with policymakers, service providers, consumers, and family members.

##### Values:

- Every person deserves well-being and quality of life
- Every person has value, importance and is unique
- Meaningful consumer and family participation
- Cultural sensitivity, appropriateness, and appreciation for the diversity of the region
- Highest quality, integrated services and supports
- Strong social safety net
- Political and personal accountability
- Advocacy beyond the minimum mandated care
- Evaluation and evidence-based decision making

Duties and Responsibilities: *(Welfare and Institutions Code, Section 5604; Yolo County Ordinance 2-2.1302)*

The Yolo County Mental Health Board shall:

1. Review and evaluate the Yolo County mental health needs, facilities, services and special problems.
2. Review any county agreements or contracts entered into pursuant to Section 5650 of the Welfare and Institutions Code.
3. Advise the governing body and the local mental health director as to any aspect of the local mental health program.
4. Review and approve the procedures used **to insure ensure** citizen and professional involvement in all stages of the planning process.
5. Submit an annual report to the County Board of Supervisors on the needs of performance of the county's mental health system.
6. Review and make recommendations on applicants for the appointment of a local director of mental health services. The Mental Health Board shall be included in the selection process prior to the vote of the Governing Body.

**LOCAL MENTAL HEALTH BOARD – BYLAWS**  
**Updated: December 11, 2013**

7. Review and comment on the county's performance outcome data and communicate its findings to the California Mental Health Department, the Board of Supervisors and 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 the local community as required by Section 5604.2 (b) Welfare and Institutions Code.

**SECTION II: RELATIONSHIP WITH THE COUNTY BOARD OF SUPERVISORS**

It is the intent of the Board to maintain excellent relations with the Yolo County Board of Supervisors. The primary role of the Board is to advise the County Board of Supervisors on all mental health issues in Yolo County as defined by the California Welfare and Institutions Code.

**SECTION III: RELATIONSHIP WITH THE COUNTY DIRECTOR OF MENTAL HEALTH**

It is the intent of the Board to maintain a collaborative and supportive relationship with the County Director of Mental Health and staff.

**SECTION IV: MEMBERSHIP**

The Mental Health Board shall consist of sixteen (16) members appointed by the Board of Supervisors as follows:

- (a) Permanent members: There shall one permanent member of the board, who shall be a member of the Board of Supervisors.
- (b) Rotating members: There shall be fifteen (15) rotating members appointed as follows:
  - (1) At least fifty (50%) percent of the members shall be consumers or the parents, spouse sibling, or adult children of consumers, who are receiving or received mental health services;
  - (2) At least (20%) of the total membership shall be consumers and at least twenty (20%) percent of the total membership shall be families of consumers.
- (c) The Board of Supervisors shall, through its appointments to the Mental Health Board, strive to reflect the ethnic diversity of the client population of the County.
- (d) The Board of Supervisors is encouraged to appoint individuals who have experience and knowledge of the mental health system.

**SECTION V: MEMBERSHIP TERMS**

The initial terms of the fifteen (15) rotating members of the Mental Health Board shall be as follows:

- (a) Five (5) members shall be appointed for a three (3) year term.
- (b) Five (5) members shall be appointed for a two (2) year term.
- (c) Five (5) members shall be appointed for a one-year term.
- (d) Thereafter, as vacancies occur, subsequent appointments shall be made for three (3) year terms.
- (e) Membership shall be effective upon appointment by the Board of Supervisors. However, all terms shall be deemed to have commenced on February 1 following the initial appointment, and thereafter all terms shall be aligned to begin on February 1 and end on January 31.



## **LOCAL MENTAL HEALTH BOARD – BYLAWS**

**Updated: December 11, 2013**

- (f) There shall be an equal number of appointees by each member of the Board of Supervisors.
- (g) No member of the Mental Health Board or his or her spouse shall be a full-time or part-time county employee of a County mental health service, an employee of the State Department of Mental Health, or an employee of, or a paid member of the governing body of, a Bronzan-McCorquodale contract agency.
- (h) A member of the Mental Health Board shall abstain from voting on any issue in which the member has a financial interest as defined in Section 87103 of the California Government Code.
- (i) If, prior to the expiration of a term, a member ceases to retain the status which qualified the member for appointment to the Mental Health Board, the membership of the member shall be terminated, and a vacancy shall be declared.
- (j) If it is not possible to secure membership as specified from among persons who reside in the County, the Board of Supervisors may substitute representatives of the public interest in mental health who are not full-time or part-time employees of the County mental health service, the State Department of Mental Health, or on the staff of, or a paid member of the governing body of, a Bronzan-McCorquodale contract agency. (§ 5, Ord. 1159, eff. May 20, 1993)

### **SECTION VI: VACANCIES**

When a vacancy occurs, the board chair shall contact the appropriate governing board member to determine if she/he has a candidate for the vacancy and/or if the member would consider recommendations from the Mental Health Board.

### **SECTION VII: TERMINATION**

The term of office of a rotating member who has three (3) consecutive unexcused absences from meetings of the Mental Health Board may be terminated by the Board of Supervisors after notification to the member and the Mental Health Board. The vacancy thereby created shall be filled by the appointment of another representative of the same group for the remainder of the unexpired term of the member being replaced. A person so appointed may then serve a maximum of two (2) additional terms following the completion of the unexpired term.

### **SECTION VIII: QUORUM**

A quorum for meetings of the Mental Health Board shall consist of not less than one-half (1/2) of the currently appointed members. A majority vote of the members present shall be required for any motion, resolution, or other action. (§ 6, Ord. 1159, eff. May 20, 1993)

### **SECTION IX: BOARD SELF-EVALUATION**

Each year the Board shall conduct a Board Self-evaluation, which shall address issues of effective Board operation and governance and accomplishment of Board statutory requirements and annual goals.

### **SECTION X: OFFICERS**

The officers shall be a chairperson, ~~and a vice-chairperson, and a secretary~~ who shall be Mental Health Board members and who shall serve on a yearly basis and be subject to election by a majority of the Board present and voting by a majority of the Board present and voting in May of each year. ~~A secretary may be elected, unless secretarial staff is otherwise provided.~~



**SECTION XI: MEETINGS**

The Board shall be subject to the provisions of Chapter 9 (commencing with Section 54950) of Part I of Division 2 of Title 5 of the Governing Code, relating to meeting of local agencies (The Brown Act.) The Board will meet at least ten (10) times annually.

**SECTION XII: REIMBURSEMENT FOR EXPENSES**

Members of the Mental Health Board shall receive reimbursements for their actual and necessary expenses incurred in the performance of their duties outside the boundaries of the County. A member shall obtain written approval from the Mental Health Director prior to attending any event outside the boundaries of the County for which the member wishes to be reimbursed. Odometer reading and receipts will be required for reimbursement in accordance with the rules established by the County Auditor-Controller. Reimbursements shall be budgeted and charged against County Mental Health funds and shall be subject to the budgets limitations and restriction placed on such funds.

**SECTION XIII: RESPONSIBILITIES OF OFFICERS**

The Chair shall be the principal Board officer, shall chair Board meetings and serve as the Board's chief spokesperson. He/she shall carry out the policies of the Board and shall do everything necessary to carry into effect the Board's statutory responsibilities and additional Board goals.

The Vice-Chair shall do everything necessary to assist the Chair in the performance of his/her duties. In the event of absence of the Chair, the Vice-Chair shall exercise all powers of Chair.

The Secretary shall take the minutes of the Executive Committee meetings, review the minutes of the Mental Health Board prior to public distribution and assist the Chair and Vice-Chair in the performance of their duties.

**SECTION XIV: REMOVAL OF OFFICERS**

An officer may be removed for cause from office for cause by the majority vote of all members casting secret ballots at an official Board meeting.

Adequate formal notice, in writing and person, must be given to an officer of such an impending removal action.

**SECTION XV: STANDING COMMITTEES**

There are three standing committees of the Board appointed by the Board Chair. The purpose of the standing committees shall be to assist and support the Board by carrying out specific tasks assigned as needed by the Board Chair and/or the Board. A subcommittee cannot take formal action on behalf of the Board without prior authorization of the Board. All LMH Board members are welcome and encouraged to attend subcommittee meetings. The standing committees are:

**Advocacy Budget and Finance:** The Advocacy Budget and Finance Committee shall provide leadership to the Board by reviewing and reporting on legislative proposals, considering budget and funding issues for mental health in Yolo County and ensuring all advising functions of the Board are carried out.

**Communications and Education:** The Communications and Education Committee shall provide leadership by assisting the Board to inform the public on mental health issues in Yolo County,

**LOCAL MENTAL HEALTH BOARD – BYLAWS**  
**Updated: December 11, 2013**

developing education opportunities for the Board and coordinating the development of the Board's annual report required by the Health and Welfare Code and Yolo County Ordinance.

Program: The Program committee shall provide leadership to the Board on the review and evaluation Yolo County mental health needs, facilities, services and special problems required Welfare and Institutions Code and Yolo County Ordinance.

The Chairs of each of the three standing committees shall serve on the Executive Committee of the Board

**SECTION XVI: SECTION XVII: EXECUTIVE COMMITTEE**

The Executive Committee of the Board shall consist of the Board Chair, Vice Chair, Secretary (if appointed), Chair of the Advocacy Budget and Finance Committee, Chair of the Communications and Education Committee, and Chair of the Program Committee. The Executive Committee shall meet as needed as determined by the Board Chair.

**SECTION XVII: SUB COMMITTEES AND OTHER SPECIAL COMMITTEES**

The Chair may at any time appoint task and time specific committees of the board to address strategic goals, projects or studies. These committees shall be for a time certain and will disband upon completion of the assigned task. (§ 10, Ord. 1159, eff. May 20, 1993)

**SECTION XVIII: RULES OF ORDER**

The authority of the Brown Act shall govern meetings of *this organization and its standing committees* and Roberts Rules of Order modified to allow open participation of the Chair, who may also set discussion time limits as appropriate.

## **ARTICLE II**

### **SECTION I: AMENDMENTS**

These bylaws may be amended at any meeting of this organization by a two-thirds vote of the appointed membership of the Yolo County Mental Health Board. These bylaws shall be reviewed periodically ~~to insure~~ **ensure** compliance with State Law.

### **SECTION II: EFFECTIVE DATE**

These bylaws shall go into effect and become effective immediately upon their adoption.

The Board shall meet and provide opportunities for client and general public input at least once per year in the cities of Davis, Woodland and West Sacramento, California. The Board may at its discretion add additional locations as deemed necessary.

### **SECTION III: CODE OF ETHICS**

A code of ethics should include, but not be limited to the following:

As a member of the Yolo County Local Mental Health Board, I:

- Will become knowledgeable about the duties and mission of **the Local Mental** Health Board, and promote those to the publics with whom I have influence;
- Will give necessary time, thought, and study to the work of the Board;
- Will attend regular meetings, and participate in committee meetings;
- Will be fully and carefully prepared for each meeting by doing the required reading and completing the necessary tasks for Board and committee work;
- Will work with fellow Board members in a spirit of harmony and cooperation;
- Will respect other speakers and listen to other viewpoints;
- Will share viewpoints, and despite differences of opinion, abide by and uphold final decisions of the board;
- Will abide by the purpose of the Brown Act;
- Will disqualify myself from discussion and vote on an issue where there is a conflict of interest or if the outcome will grant me or my employer any pecuniary or material benefits; and
- The code of ethics should be discussed with new board members and reviewed at least yearly by all members.



### STATEWIDE TRAINING:

Saturday, April 2, 2016  
10:00 AM to 3:00 PM  
Registration at 9:30 AM  
Lunch at Noon

### LOCATION

CIBHS  
2125 19th Street, 2nd Floor  
Sacramento, CA 95818

### REGISTRATION

Click here:  
[http://  
cibhs.networkofcare4elearning.org/EventDetail.aspx?  
pld=540&OrgId=223](http://cibhs.networkofcare4elearning.org/EventDetail.aspx?pld=540&OrgId=223)

Please register by  
March 25, 2016

Problems or questions with  
registration, please contact  
Kelly Bitz, [kbitz@cibhs.org](mailto:kbitz@cibhs.org)

### COST

Training is FREE  
*Lunch will be provided.*

### TRAVEL

Only one person per county will  
receive travel reimbursement.  
Car pooling is encouraged.

## Local MH Boards/Commissions

### *Responsibility and Reality: How Does A Mental Health Board Exercise Its Authority?*

#### Description

The authority of a local mental health board is described in the Welfare and Institutions Code Section 5604.2. The description is very general and it is up to each local mental health board to figure out how to meet the described responsibilities in partnership with their local mental health department. In this workshop, we will discuss the responsibilities of the local mental health board and work together to develop and discuss methods of meeting those responsibilities.

#### Learning Objectives

- ◆ Learn and interpret the seven responsibilities of any local mental health board.
- ◆ Establish and develop ideas for how to meet the seven responsibilities.
- ◆ Learn the components of an action plan tailored to the needs of a local mental health board.

#### Who Should Attend

All members of each County Local Mental Health Boards/Commissions are invited to attend. However, only one person per county will receive travel reimbursement. Car pooling is encouraged.

#### Travel

See attached travel policy. To qualify for travel reimbursement, **you must contact CIBHS for prior approval no later than March 7, 2016.**

For travel information and approval, please contact Kelly Bitz, [kbitz@cibhs.org](mailto:kbitz@cibhs.org) or (916) 379-5322.

#### For more information, contact:

Shoshana Zatz  
[szatz@cibhs.org](mailto:szatz@cibhs.org)  
(916) 379-5341

Kelly Bitz  
[kbitz@cibhs.org](mailto:kbitz@cibhs.org)  
(916) 379-5322

**Local Mental Health Boards and Commissions  
Travel Reimbursement Policy  
Updated January 2016**

**Travel Reimbursement Policy**

CIBHS will reimburse Local Mental Health Boards and Commissions training participants or attendees for a limited number of expenses related to travel for LMHBC trainings. CIBHS assumes no obligation to reimburse participants or attendees for expenses that are not in compliance with this policy. Only one Mental Health Board Member per county will be guaranteed reimbursement. You must attend the training to receive requested reimbursements.

Travelers are responsible for any additional expenses resulting from the use of an indirect route or stops along the way for personal reasons. Reimbursement is limited to the actual costs incurred or to the costs that would have been incurred using the normally traveled route, whichever is less (MapQuest or Google Map print out is required as support). **The mileage on the reimbursement form and the mileage on the map print out must match.**

If the participant does not have a credit card, participant must contact CIBHS within 30 days for travel arrangement instructions. A signed and fully completed CIBHS reimbursement form (with original receipts and Map Quest/Google print outs) should be emailed to: **Kelly Bitz: [kbitz@cibhs.org](mailto:kbitz@cibhs.org)**, within 30 days of the actual travel.

**Regional Trainings**

Only participants from the region in which the training is being held will be eligible for travel reimbursement. Lodging will be provided only to regional members who must travel **more than 50 miles one-way from their home or workplace** to the training venue. Only one LMHBC member per county is eligible for travel reimbursement and/or prepaid lodging.

**Statewide Trainings**

Only one member per county is eligible for travel reimbursement and/or prepaid lodging. Lodging will only be provided to members who must travel more than 75 miles one-way from their home or workplace.

**Use of Surface Transportation vs. Air Travel**

When air and surface travel are both options, the less expensive option meeting business needs should be employed. If the alternative option is utilized, the consultant may be reimbursed only for the amount associated with the less expensive alternative.



### **Airline Travel -- RECEIPT REQUIRED**

All airline tickets are to be purchased by the training participant or attendee directly. Purchases must be made at least 21 days in advance in order to obtain reasonably priced fares. If air travel is not made within 21 days of travel, CIBHS must be contacted for flight purchase approval. Coach class or any discounted class shall be used in the interest of economy on all domestic flights.

### **Auto Travel: Car Rental—RECEIPT REQUIRED**

Participants or attendees may rent a car to get to their destination when renting is more cost effective than mileage reimbursement for the use of a personal car. The traveler is responsible for obtaining the best available rate that meets the requirements of the trip. All vehicle upgrades, including navigation systems, will not be reimbursed. Travelers are responsible for their own liability coverage and will not be reimbursed for collision waiver (CDW) and loss damage waiver (LDW) on rental cars. If a traveler adds insurance to the rental, the cost will be deducted from the total amount once it is submitted for reimbursement. **Pre-approval is required by CIBHS before renting a car.**

Whenever multiple participants or attendees are traveling together, every effort to rideshare or carpool should be made.

### **Rental Car Gas—RECEIPT REQUIRED**

Gasoline for use in rental cars is reimbursable with proper documentation.

### **Business Use of Personal Vehicle**

Participants or attendees may use their personal vehicle for business purposes if it is less expensive than renting a car. It is the personal responsibility of the vehicle owner to carry adequate insurance coverage for his or her protection and for the protection of any passengers. LMHBC participants who use a privately owned automobile for CIBHS business must have a valid driver's license and meet the minimum requirements for driving within the State of California.

CIBHS reimburses travel mileage at the current IRS approved mileage rate (**\$.54 per mile as of 1/1/16**). This mileage allowance is paid in lieu of actual expenses for gasoline, oil, repairs, registration, insurance, and depreciation. Therefore, actual expenses for those items will not be reimbursed when a personal vehicle is used for business. When two or more persons share an automobile, only the driver may claim reimbursement for mileage. Claims for reimbursement must indicate the origin and destination of the trip and business purpose. Copies of MapQuest or Google maps mileage must be used to support mileage claims as noted above

## **Miscellaneous Transportation – RECEIPTS REQUIRED**

LMHBC Travelers should use public transportation or air/hotel shuttle service when available and practical. Taxi service can be utilized when it is the most efficient and cost effective alternative.

### **Lodging and Parking:**

CIBHS will reserve a block of hotel rooms at a group rate for the Friday night before a Saturday training. CIBHS will make hotel arrangements and pay for the cost of one night's lodging up to the group rate, plus tax and parking only when the training venue is located 50 miles or more one-way from a participant's or attendee's home or workplace. Only one Mental Health Board member per county is eligible for the free room on the Friday night before the Saturday training. CIBHS will prepay for hotel parking fees on the day of the training for all participants.

Participants must use a personal credit card for all other incidentals beyond lodging, tax and parking.

### **Food:**

Lunch will be provided on the day of the training. **Therefore, food purchases will not be reimbursed.**

### **REPORTING GUIDELINES:**

Participants or attendees must file a Travel Expense Claim (TEC) form after the completion of the trip. All expenditures should be reported on one Travel Expense Claim form.

### **Documentation Requirements**

Participants or attendees must provide the following information in order to be reimbursed for any expenditure:

- Name and address of the event
- Time they left their home or workplace for the event and time they left the event
- Time they arrived at the event and time they arrived back home or at their workplace
- Exact amount and date of the expense
- If using a personal car, the miles to and from the event to their home or workplace.

Participants or attendees must submit the following documentation with their TEC Form:

- Car Rental – credit card receipt or rental agency invoice
- Airline travel – credit card receipt or airline invoice
- Auto Rental Gas – gas receipt or other proof of payment

- Map Quest or Google Maps mileage document (with home/workplace address to event address) for use of personal vehicle

Expenses will not be reimbursed without original receipts. Receipts must include the name of the vendor, location, date and dollar amount. Scanned copies or electronic receipts are acceptable provided that the detail contained in these receipts are equivalent to the level of detail contained in an acceptable paper record. For example, the receipt must show the name of the payee, the amount of the charge, the transaction date, and the form of payment.

### **Time Limit for Submission**

Expense reimbursement requests for travel must be submitted within 30 days of the occurrence of the expense. Reimbursement requests received after 30 days from the occurrence of the expense will not be reimbursed without approval of CIBHS Director.

### **Certification of Travel Expense**

Each traveler submitting a Travel Expense Claim must sign the report certifying that the amounts claimed are (a) a true statement of the expenses incurred on official CIBHS business, and (b) not being reimbursed by another organization.

### **Approval of Expense for Payment**

The travel expense report must be approved for payment by the designated CIBHS approver.

### **Questions regarding this policy should be directed to:**

**Shoshana Zatz**  
szatz@cibhs.org  
(916) 556-3480 ext. 141

or

**Kelly Bitz**  
[kbitz@cibhs.org](mailto:kbitz@cibhs.org)  
(916) 556-3480 ext. 122

