

HUMBOLDT COUNTY BEHAVIORAL HEALTH BOARD MEETING

February 26, 2022

10:30-2:30

Meeting via Zoom

Members present:	Tim Doty, Laura Montagna, Tim Ash, Debbie Hartridge, Alison Tans, Isabella Wotherspoon,		
Members excused:	Steve Madrone, Tracie Conner, Madison Flynn, Alissa Norman		
Guests present	Colleen Broderick, Danette Kellerman		
Staff present:	Connie Beck, DHHS Director; Emi Botzler-Rodgers, Behavioral Health Director; Joe McManus, Executive Secretary		
TOPIC	DISCUSSION	ACTION/FOLLOW UP	PERSON RESPONSIBLE
1. Call to Order-	Meeting called to order by Tim Doty at 10:30 am.	Informational	
2. Adjustments to the Agenda	None.		
3. Public Comments	None.		
4.Introductions a) Tell us the important mental health issues you are interested in, goals and what you bring to the Board.	<p>a) Tim Doty reported he is long- time resident of the county and is interested in housing and support for clients. Tim is a NAMI member, supports Laura’s Law and is interested in advocacy.</p> <p>b) Laura Montagna reported she advocates for the most vulnerable clients in the system. Her goals are to start up ad hoc committees to take on the Board’s priorities and to bring a positive attitude to the Board.</p> <p>c) Colleen Broderick reported she is a Nurse Practitioner and has a history as a primary care provider and has worked with veterans, families and is interested in getting services to the homeless.</p> <p>d) Isabella Wotherspoon reported she is a lifelong resident of the county and has been a Social Worker for over ten years, currently she is at the Public Defender’s office and provides services to youth, families, TAY, elders and is interested in the Mental Health Diversion out of the criminal justice system.</p> <p>e) Allision Tans reported she is interested in community advocacy, MHSA funding and solutions, Laura’s Law, improvements to SV/CSU and system change. She has experience as a grant writer and would like to see more data presented to the Board. Allison previously worked for DHHS at Behavioral Health and Public Health and is currently working for the CA Workforce Development Board.</p>	Informational	

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<p>4.Introductions a) Tell us the important mental health issues you are interested in, goals and what you bring to the Board.</p>	<p>f) Danette Kellerman reported she is a Social Worker at the Conflict Counsel department and has 20 years' experience in homeless outreach, prisons, drug court and would like to reduce stigma for those clients in the criminal justice system. She supports self-care and education for daily living skills.</p> <p>g) Tim Ash reported he has been on the Board for 16 years, is a long-time resident of the county and is also a NAMI member. His goals are to advocate for family issues, clients in the criminal justice system, CIT, AB109 and First Break.</p> <p>h) Debbie Hartridge reported she is a long time NAMI member and is interested in families dealing with mental health issues and treatment.</p>	<p>Informational</p>	
<p>5. Emi Botzler-Rodgers</p>	<p>a) Emi reported she has worked with Tim Ash and Tim Doty for a long time and that the BH Board is important to the community. Emi attended HSU and her work history includes working with preschoolers, Infant mental health, teens, and TAY. Racial Equity is also very important to her. Emi has also worked for the Courts, UIHS, and has been the Behavioral Health Director since 2017. She oversees all the Behavioral Health programs and some of the challenges are staffing, funding and the payment structure for Behavioral Health. Emi reported she likes to empower staff to make decisions and would like to work with the Board to advocate for those who need services. A question-and-answer period followed the discussion.</p>	<p>Informational</p>	
<p>6. Connie Beck</p>	<p>a) Connie Beck reported she is a long-time resident of the county and her background is in finance and business administration. She has worked for the county for 26 years and also has worked for Crestwood. She has been the DHHS Director for 6 years. Connie appreciates the work the Board is doing for the community. Some of the new programs that are in progress are an adult crisis residential facility, a children's crisis facility, permanent supportive housing, and increased housing for the severely mentally ill clients. Connie reported that Behavioral Health is very complex with the regulations and payment structure. Connie reported an equity program manager has been hired and this is very</p>	<p>Informational</p>	

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6. Connie Beck	exciting. Some of the questions from the Board included Public Health and COVID, Tele working, recruitment of staff and salaries. b) Connie reported she is hopeful that the Cal Poly HSU will help with recruitment of nurses and social workers. Also, the BOS just approved a new policy and procedure for Tele Working and this will allow some staff to keep working from home. The recruitment for a full -time Medical Director for Behavioral Health is continuing. A question-and-answer period followed the discussion.	Informational	
7. BHB Handbook/Meetings	a) Tim Doty reported that current meetings were increased to 2 hours a few years ago so the Board can have more discussion. The agenda for the meetings is set at the monthly executive committee meeting. The public comments section is important to have to get the public's comments and must be on the agenda per the Brown Act for public meetings. There is a 3-minute time limit set for this. The Communications section is for the Board members to make comments or to give their updates. Can we move up the Actions items section closer to the beginning of the agenda so the Board can take care of their business then they can have presentations. Sometimes staff attend has the public this must be recorded in the minutes. Also, the Board needs to be clear on what items they are voting on. Tim Doty also reported that the presentations are discussed at the Executive Committee meeting. Can the Board have more time to evaluate presentations? Allison Tans also said she would like to see more data in the presentations. Tim Ash asked if the Board could schedule out the presentations for a year and request from staff what data and specifics they are requesting. Tim Doty reported he would like to get more written reports with more details and use with the ad hoc committees. Tim would also like to set a place on the agenda for all the standing committees and ad hoc committees to report and give updates. Tim would also like a spot on the agenda for old business with bullets so the Board can be reminded.	Informational	
8. Bylaws	.	Informational	

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8. Bylaws	<p>a) Tim Ash reported that the current bylaws were last updated in 2012 and they are currently working with Emi and County Counsel to update the bylaws</p> <p>b) The bylaws cover committees, officers, meetings and notices, types or meetings and the role and responsibilities for the Board members. One of items is to review facilities like the jail, SV or other facilities. Also, another duty is to review contracts for the Behavioral Health Branch. Tim reported that the Board hasn't been doing much of this and is hopeful that with new members on the Board they can start doing this again.</p> <p>c) Tim reported that one of the advantages for using ad hoc committees for the Board is these don't need to have an agenda posted or minutes. The standing committees must comply with the Brown Act and have meetings posted ahead of time and have agendas and minutes. The Board's chairman can appoint ad hoc committees as needed.</p> <p>d) Tim reported that the Board could use training on the Brown Act. Laura Montagna reported that the CALBHB site is a good resource and they have these online trainings available for all Board members to access. Isabella and Danette would like to start an ad hoc for facilities review and will discuss with Tim Doty.</p>	Informational	
10. Adjournment	Meeting adjourned at 2:30 pm.		
Minutes submitted by: Joe McManus Submitted to: BHB			
ACROYNMS - Updated 7/23/21			
ACA	AFFORDABLE CARE ACT		
ACES	ADVERSE CHILDHOOD EXPERIENCES		

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AFHHA	AFFORDABLE HOMELESS HOUSING ALTERNATIVES		
ADHD	ATTENTION DEFICIT HYPERACTIVITY DISORDER		
ADCS	ALCOHOL DRUG CARE SERVICES		
AHP	ARCATA HOUSE PARTNERSHIP		
AIDET	ACKNOWLEDGE INTRODUCE DURATION EXPLANATION THANK YOU		
APD	ARCATA POLICE DEPARTMENT		
ART	AGRESION REPLACEMENT THERAPY		
AOD/DR	ALCOHOL AND OTHER DRUG DUAL RECOVERY		
ATP	ADOLESCENT TREATMENT PROGRAM		
AOT	ASSISTED OUTPATIENT TREATMENT (LAURA'S LAW)		
ASAP	ALLIES FOR SUBSTANCE ABUSE PREVENTION		
ASIST	APPLIED SUICIDE INTERVENTION SKILLS TRAINING		
ASOC	ADULT SYSTEM OF CARE		
BOS	BOARD OF SUPERVISORS		
CAEQRO	CALIFORNIA EXTERNAL QUALITY REVIEW ORGANIZATION		
CALBHBC	CALIFORNIA ASSOCIATION OF LOCAL BEHAVIORAL HEALTH BOARDS AND COMMISSIONS		
CALFHA	CA HOUSING FINANCE AGENCY		

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CANS	CHILD AND ADOLESCENT NEEDS (TRAINING)		
CARF	COMMISSION ON ACCREDITATION OF REHABILITATION FACILITES		
CCRC	COMMUNITY CORRECTIONS RESOURCE CENTER		
CFMG	CALIFORNIA FORENSIC MEDICAL GROUP		
CMHACY	CA MENTAL HEALTH ADVOCATES FOR CHILDREN AND YOUTH		
CBHDA	CALIFORNIA BEHAVIORAL HEALTH DIRETORS ASSOCIATION		
CBH	CHILDREN’S BEHAVIORAL HEALTH		
CMS	CENTERS FOR MEDICARE AND MEDICAID SERVICES		
CCP	COMMUNITY CORRECTIONS PARTNERSHIP		
CCRC	COMMUNITY CORRECTIONS RESOURCE CENTER		
CCRP	CA CENTER FOR RURAL POLICY		
CCT	COMPREHENSIVE COMMUNITY TREATMENT		
CIT	CRISIS INTERVENTION TRAINING		
CIBH	CALIFORNIA INSTITUTE FOR BEHAVIORAL HEALTH		
CR	COLLEGE OF THE REDWOODS		
CSU	CRISIS STABILIZATION UNIT		
CWS	CHILD WELFARE SERVICES		
C&FS	CHILDREN AND FAMILY SERVICES		
DHHS	DEPARTMENT OF HEALTH AND HUMAN SERVICES		
DHCS	DEPARTMENT OF HEALTH CARE SERVICES		
DMC	DRUG MEDI-CAL		
DRP	DUAL RECOVERY PROGRAM		
EBP	EVIDENCE BASED PRACTICES		
ERMHS	EDUCATIONALLY RELATED MENTAL HEALTH SERVICES		
ETD	EMPLOYMENT TRAINING DEPARTMENT		
EPD	EUREKA POLICE DEPARTMENT		

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FFT	FUNCTIONAL FAMILY THERAPY
FURS	FAMILY URGENT RESPONSE SYSTEM
HART	HUMBOLDT ALCOHOL RECOVERY TREATMENT
HBHDC	HUMBOLDT BAY HOUSING DEVELOPMENT CORPORATION
HCPR	HUMBODLT COUNTY PROGRAMS FOR RECOVERY
HCGJ	HUMBODLT COUNTY GRAND JURY
HSU	HUMBODLT STATE UNIVERSITY
HCTAYC	HUMBOLDT COUNTY TRANSITION AGE YOUTH COLLABORATION
HCMH	HUMBOLDT COUNTY MENTAL HEALTH
HHHC	HUMBOLDT HOUSING AND HOMELESS COALITION
HOME	HOMELESS OUTREACH & MOBILE ENGAGEMENT
HRC	HUMBOLDT RECOVERY CENTER
HSU	HUMBODLT STATE UNIVERSITY
HVN	HEARING VOICES NETWORK
IEP	INDIVIDUAL EDUCATION PLAN (FOR YOUTH WHO MEET EMOTIONAL DISTIRBANCE CRITERA)
ISP	INDIVIDUAL PLACMENT AND SUPPORT
IST	INCOMPETENT TO STAND TRIAL
ITFC	INTENSIVE THERAPEUTIC FOSTER CARE
IY	INCREDIBLE YEARS
IHSS	IN HOME SUPPORT SERVICES
IOA	INSTITUTE ON AGING
IDDT	INTEGRATED DUAL DIAGNOSIS TREATMENT
IST	INCOMPENTENT TO STAND TRIAL
LECAH	LAW ENFORCEMENT CHIEFS OF HUMBOLDT
LGHH	LET'S GET HEALTHY HUMBOLDT
LBHB	LOCAL BEHAVIORAL HEALTH BOARD
LGBTQ	LESBIAN GAY BI TRANSGENDER QUEER
MAT	MEDICALLY ASSITED TREATMENT
MEV	MOBILE ENGAGEMENT VEHICLE

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MTC	MODIFIED THERAPEUTIC COMMUNITY
MTFC	MULTI –DIMENSIONAL TREATMENT FOSTER CARE
MHSA	MENTAL HEALTH SERVICES ACT
MHSAOAC	MENTAL HEALTH SERVICES ACT OVERSIGHT AND ACCOUNTABILITY COMMISSION
MIST	MOBILE INTERVENTION AND SERVICES TEAM
MRT	MOBILE RESPONSE TEAM
NAMI	NATIONAL ALLIANCE ON MENTAL ILLNESS
NFP	NURSE FAMILY PARTNERSHIP
OLLI	OSHER LIFELONG LEARNING INSTITUTE
OSHPD	OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
OTP	OFFENDER TREATMENT PROGRAM
PBIS	POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORTS
PEI	PREVENTION AND EARLY INTERVENTION
PIT	POINT IN TIME COUNT
PCIT	PARENT CHILD INTERACTIVE THERAPY
PIP	PERFORMANCE IMPROVEMENT PROJECT
PBIS	POSITIVE BEHAVIORAL INTERVENTION SERVICES
PRA	PATIENT’S RIGHTS ADVOCATE
QPR	QUESTION PERSUADE REFER
RF	REGIONAL FACILITY
RFQ	REQUEST FOR QUALIFICATIONS
ROSE	RURAL OUTREACH SERVICES ENTERPRISE
RUPRI	RURAL POLICY RESEARCH INSTITUTE
SAPT	SUBSTANCE ABUSE PREVENTION AND TREATMENT
SUD	SUBSTANCE USE DISORDERS
SAMHSA	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMISTRATION
SDS	SAME DAY SERVICES
SOC	SYSTEM OF CARE
SV	SEMPERVIRENS

