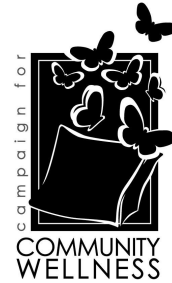


**Campaign Steering Committee Meeting
Summary Notes
August 24, 2007
10-1pm**



Steering Committee Attendees: Katherine Smith, Deb Martin, Dave McManus, Jerry Nevins, Elaine Rowen, Diane Shively, Deanne Thornton, Candyce Skinner (for Cindy Brundage), Miranda Long, Christina Nicholson, Debbie You, Brenda Dunlap, Edna Moore, Tad Kitada, Sandena Bader, Esmerita Rivera, Sonia Samaniego, Mike Blair, Denise Lindquist, Cheryl Boldt, Mike Mann, Sandena Bader, and Sarah Coolidge (for Sylvia Ambriz)

Non-Steering Committee Attendees: David Gray, Tammy Lorance, Karen Klayman, Jeanette Prout, Katie Carlson, Isabelle Wilson, Mike D, Cheryl Moshacher, Nancy Lungren, Elisa Herrera, David Soto, Pam Spanier, Marnie Mendoza, Lo Quinn, Sam Stodolski, Isabel Toro, Sharen Neal, Gordon Armstrong, Richard Knecht, Lynn Tarrant, Maureen Bauman, and Mike Lombardo.

I. Previous Meeting Minutes

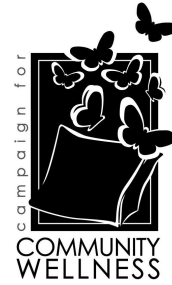
- a. Steering Committee Minutes 7-27-07
- b. Summary of breakout session notes 7-27-07

II. Targeted Outreach List for PEI Planning Process

In your packet—please review

III. Consumer Voice

- a. Debora Martin (stakeholder) shared a story of a co-occurring client. The collaborative efforts between the County staff and Sierra Council worked well for this client.
- b. Jerry read a poem to the group that he wrote that will be posted on the Campaign for Community Wellness website on the Voice page
- c. A client shared his story of chemical dependency and alcohol. He has been in recovery and for the past month has been off his medication successfully.
- d. A mother of a 27-year old son who has been diagnosed as bi-polar and also has substance abuse issues. Son stayed at Cypress House with success until it closed. He is currently having difficulties again and she feels he is getting lost in the Mental Health System again.



IV. Public Comments/Updates

- a. David Gray (public) stated that it seems that the Core Team sets the agenda and maybe we should add more members and not just have County staff on it.
- b. Deanne Thornton (stakeholder) agreed with David's comments regarding the agenda.
 - **Action Item- Add members to Core Team**
- c. Sharen Neal (public) regarding the Targeted Outreach Group she doesn't see the Veterans on the list. The original Steering Committee only viewed 91 pages of the CSS plan and there were 170 pages, she wants to know why they were not able to see the entire plan prior to it being sent to the State.
- d. Gordon Armstrong (public) has been in/out of jail for years. He is diabetic, his file was never transferred from Mental Health to the jail. The jail staff was giving him the wrong medication and he had a stroke because of it. He would like to see a jail program (MH) in Placer County.
- e. Public Comment-states that she has a 5-year old grandson that was 5150'd, staff had a difficult time finding help for him because of his age. She said the RAFT Team is great and helped her with her grandson.
- f. Sharen Neal thanked everyone who is staffing/participating in different programs; their work and efforts are very valuable.
- g. Streamline has been working to help create more transportation in Placer County. A new Health Express transportation service is here for clients at little or no cost; to be used to transport to/from appointments.

V. Homework: Inventory of current prevention & intervention programs

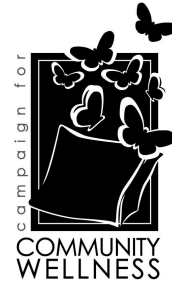
- Lauren identified homework for committee members in packet marked with yellow post it notes.

VI. PEI Planning

We reviewed the previous meeting draft guidelines and wanted to present where we are now.

August

- Reviewed the Campaign for Community Wellness PEI Planning process per input from our July 27th meeting.



Decision: this committee agreed on the planning process for PEI through a consensus process.

- We also reviewed the breakout session notes from our July meeting.
- Streamline asked for additions from stakeholders on the workgroup recommendations.

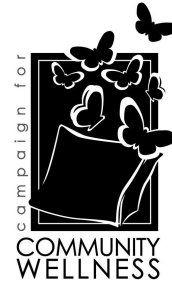
Comments/Concerns on workgroup recommendations were as follows:

- Candyce Skinner is concerned with the combining of groups because there may be more representation for one age group than another.
- Isabel Toro would like to see cultural be incorporated into every group.
- Christina Nicholson said she feels it is important to talk about SAMHSA and that there are a lot of commonalities with the two programs; she would like to see less dividing.
- Sarah Coolidge would like to see a group for families.
- Debora Martin is concerned with the division of the age groups.
- Public comment-this person said they would like to see the tailoring around needs. In other words, create a group around the needs of Placer County.
- Jerry Nevins is concerned that there are no co-occurring groups.
- Isabel asked, "What are stakeholders wanting to see regarding how the funding should be disbursed?"
- **Staff comment/response per above comments:** There are no regulations on how workgroups are to be organized. The only regulation is that 51% of money goes to 0-25 age group.

Decision: The committee agreed that a decision couldn't be made about Work Groups until our September 28 meeting because we were missing data to drive the process. The Committee will wait to review the data in September before they make a decision on how to proceed.

Streamline suggested creating a Prevention Sub-committee, four volunteers from the committee and one public person wanted to be involved and is identified as follows:

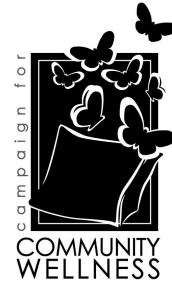
Isabel Toro (Peace for Families)
Tad Kitada (Office of Education)



Deanne Thornton (Child Abuse Prevention Council)
Cheryl Boldt (Consumer/Family Voice)
David Gray (Public)

Other General Comments Around Prevention:

- A suggestion was made to find a common definition, that committee agrees on, for "Prevention".
- Deanne Thornton said her organization uses the following to define prevention: 1. Broad based (all children) 2. Focused based 3. Direct (includes family)
- Tad said they have a definition at Office of Education and it is, "Prevention is youth development prevention which leads to early intervention."
- David Gray also stated that CSOC has a picture of a waterfall to show the different levels of prevention, he asked if someone could bring it in next meeting, he thinks it would be useful to the committee.
- Cheryl Boldt asked if any of this information given at this meeting is in the schools in Placer County.
- Marnie Mendoza suggested Health Fairs would be a good place for this information to be distributed so it becomes common knowledge to residents.
- Debora Martin said there is a September 18th System Transformation meeting being held and data is going to be given in the meeting; she will bring data to our September 28th meeting.
- Public comment made that there is a lot of outreach in the communities in churches.
- Jerry Nevins said wellness and recovery needs to be the message we send; not mental health.
- Michael Romero stated that we want to get data on do-able preventions (what do we want to prevent?) and what's affordable.
- Christina Nicholson said that at the SAMHSA meetings data is presented; she will bring that data to our next meeting.



- The Steering Committee asked that the sub-committee to create a working definition for PEI.
- Michele Laylen (public) made a comment that a wider span of education about mental health resources is needed in the schools; she had a really hard time finding resources/information (even from school staff) for her child dealing with mental health issues.
- **Decision:** The committee agreed to review the process, timeline, and action plan prior to the September 28th meeting. Due to so much information needing to be reviewed in the September meeting, the committee agreed to have a 6-hour meeting.
- **Action:** Streamline to get a list of education representatives to coordinate this effort.
- **Action:** Tad was tasked with getting school site/district representatives here for their input.
- Gordon suggested looking at Juvenile Hall indicators.
- Mike Blair said that Roseville has a Youth Community Development that has 10 interns; he would like to have people come to their group and give presentations on different programs.
- Christina Nicholson stated that there is already a group of educators working on SAMHSA stuff.

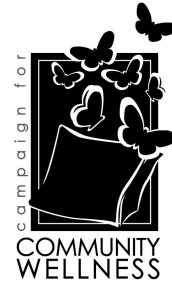
VII. Public Comments Received/Feedback

The committee was asked to take a few moments to read the comments from NAMI and David Gray, as well as, the responses from Placer County and give comments.

The consensus of the Committee was that this was too much information to process and respond to immediately. Streamline proposed a new process for the letters to be sent via email one at a time; then Michele will collect all responses, send them to Seana and Lauren to incorporate into a response letter. Then the draft response letter from Placer will go back out to the committee for approval.

Other Comments:

- Cheryl Boldt would like to see the wait time to see a doctor in the Mental Health system reduced from 6 months; she is frustrated with the system.



- Brenda Dunlap is concerned that this committee is focused on substance abuse and homelessness.
 - **Response to Brenda's concern**-this is supposed to be a broad discussion.

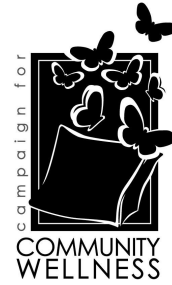
Additional Notes from flip chart:

1) Look at distinction between: Prevention, Intervention and Treatment

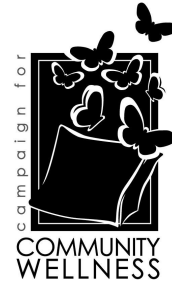
- a. Collaboration/working together is key so that we meet the needs
- b. Divide by what you are trying to prevent
- c. Use funds in non-traditional (as long as it is evidence-based)
- d. Two-step process:
 - i. Start with data: indicators in our community
 - ii. Research best practices to match these indicators (state models are good to look at as long as prevention and intervention program maps to an indicator)

2) Prevention

- a. The group was asked “what is the definition of prevention” and in turn posed the question, “aren’t we all in prevention”?
 - i. Prevention was defined as anyone who is not currently getting services and who does not have a diagnosis
- b. RAFT – good with NA and whole family
- c. Whole Family – key part of prevention
- d. Waterfall → CSOC
- e. The following emerged from a group discussion on prevention:
 - i. DeAnne’s Comments:
 1. Doesn’t occur
 2. Look at state
 3. 3 layers:
 - Broad (all children)
 - Focused (at risk population)
 - Direct to a family
 - ii. Isabel’s Comments:
 1. Step out of box, new modalities of healing
 2. Build strength to avoid mental illness:
 - Listen – hear needs
 - Honor values
 - Build self-esteem



- iii. Cheryl's Comments:
 - 1. Keep it simple
 - 2. Education/outreach in schools/public
 - 3. Brochures – in different languages
 - 4. Psychologists in place to provide services in different languages
- iv. Deb's Comments:
 - i. System transformation team has data
- vi. Michael's Comments:
 - 1. Informal networks (churches) are great to include in outreach
- vii. Jerry's Comments:
 - 1. Merge recovery & wellness as the focus, not mental illness
 - 2. Educating community about how mental illness works – anti stigma (i.e. apt. managers)
- viii. Mike R's Comments:
 - 1. Simple is good – we want to prevent everything, but need to focus rather on something (even if 10%) that we can effectively do – prevention?
 - 2. Challenge: what is it that we want to prevent? What's doable? What's affordable?
- ix. Prevention/Intervention Team: DeAnne, Isabel T., Tad, Cheryl, David
- x. **Action:**
 - 1. Request best practices
 - 2. Data
 - 3. Include culturally relevant models, even if they aren't traditionally evidence-based studies
- xi. **Workgroup Action:**
 - 1. Local definition of prevention and intervention
 - 2. Best Practices:
 - Faith-based interventions
 - N.A. interventions
 - Cultural practices – SAMHSA



3. Define “what” we are going to prevent
4. Prevention – wider, community awareness

3) Public Comment

- a. NAMI response
- b. Process – have a small group develop response/have a Steering Committee letter
- c. 2 job descriptions of MAP (Sharon)
- d. All teams – how do we reach them (Sharon)
- e. Family satisfaction (Sharon)
- f. Capture letter – respond
- g. Include recognition of emotional perspective in response letters
- h. Other radio stations
- i. Process - online posting
 - i. Letter (1) → comments → draft letter (Core Team & Steering Committee) → comments → letter back
 - ii. Side – want time to get drugs shortened (6 months is too long!)

4) 2 Decisions

- a. Process & timeline
- b. September Meeting
 - i. Needs to be longer (9-3)
 - ii. Location: Sierra College – Rocklin