

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

614 A



**SUBMITTAL DATE:**

**AUGUST 4, 2011**

**FROM:** Department of Mental Health

**SUBJECT:** Mental Health Board Annual Report

**RECOMMENDED MOTION:** Move that the Board of Supervisors receive and file the Mental Health Board Annual Report for the Fiscal Years of July 01, 2009 – June 30, 2011.

**BACKGROUND:** The Mental Health Board (MHB) serves as a liaison between the community, the Department of Mental Health, and the Riverside County Board of Supervisors. It is the function of the MHB, under the California Welfare and Institution (W&I) Code 5604.2 to review the services of the local mental health system and assess programs to make sure they meet the needs of our residents and ensure that citizens of Riverside County are provided with prompt, effective, efficient, and culturally competent community-based services. The MHB provides critical examination and review of services and proposes recommendations concerning delivery of services.

JW:VA

*Jerry Wengard*  
Jerry Wengard, Director

<b>FINANCIAL DATA</b>	Current F.Y. Total Cost:	\$0	In Current Year Budget:	0
	Current F.Y. Net County Cost:	\$0	Budget Adjustment:	0
	Annual Net County Cost:	\$0	For Fiscal Year:	09-11

**SOURCE OF FUNDS:** N/A

Positions To Be Deleted Per A-30

Requires 4/5 Vote

**C.E.O. RECOMMENDATION:**

APPROVE

BY *Debra Courmoyer*  
Debra Courmoyer

**County Executive Office Signature**

- Consent
- Policy
- Consent
- Policy

Dep't Recommi:

per Exec. Ofc.:

Prev. Agn. Ref.:

District: All

Agenda Number:

2.18

**PAGE 2:**

**SUBJECT:** Mental Health Board Annual Report

**BACKGROUND: (Continued)**

As required under the W&I Code and the Riverside County Board of Supervisors, Policy A-21, the Mental Health Board respectively submits its annual report to the Board of Supervisors covering the needs and performance of the county's mental health system.

The MHB's commitment to their duties and responsibilities has always been met with cooperation and enthusiasm. The common goal of serving the mentally ill is, and always will be, the desire of the Riverside County Mental Health Board.

The Mental Health Board would like to take this opportunity to thank the Board of Supervisors for their continuing support related to the needs of the Department of Mental Health which, in turn, allows them to provide effective and efficient mental health services to the citizens of Riverside County.

# Riverside County



**FY 07/01/09 - 06/30/2011**

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# Riverside County

## INTRODUCTORY STATEMENT

The Riverside County Mental Health Board (MHB) is committed to overseeing, evaluating, and reviewing the Riverside County Department of Mental Health's (RCDMH) delivery of services to the mentally ill residing within the county. It is the function of the MHB to ensure that citizens of Riverside County are provided with prompt, effective, efficient, and culturally competent community-based services. The MHB provides critical examination and review of services and provides recommendations concerning the delivery of services. With this purpose in mind, they enable severely mentally disabled adults, older adults, children at risk of mental disability, transition age youth, and substance abusers to maintain an optimal level of personal and social functioning.

The MHB serves as a liaison between the community, the Department of Mental Health, and the Riverside County Board of Supervisors. The MHB consists solely of a group of consumer advocates who's aim is to educate, advocate for ready access to services, and guide consumers through the mental health system.

The MHB is committed to ensuring that culturally competent services are provided to all people of ethnic, cultural, racial and linguistic backgrounds through program review and appropriate recommendations.

# Riverside County

## MISSION STATEMENT

*(Adopted September 2002)*

*“The mission of the Riverside County Mental Health Board is to provide public, consumer, and family input into the planning process for mental health services and to assist the Riverside County Department of Mental Health in carrying out its mandated functions, to advocate as a united voice on mental health consumer issues, and to promote improvement in the quality, quantity, and cultural competency of mental health services delivered to the residents of Riverside County.”*

## THE MISSION OF THE CALIFORNIA MENTAL HEALTH MASTER PLAN

*(Passed as part of the Bronzan-McCorquodale Act of 1991)*

*“The mission of California’s mental health system shall be to enable persons experiencing severe and disabling mental illnesses and children with serious emotional disturbances to access services and programs that assist them, in a manner tailored to each individual, to better control their illness, to achieve their personal goals, and to develop skills and supports leading to their living the most constructive and satisfying lives possible in the least restrictive available settings.”*

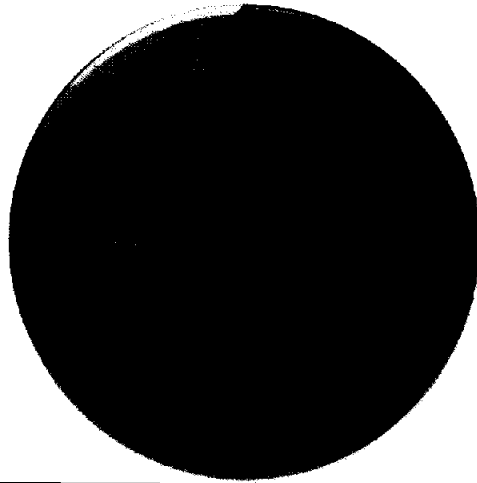
# Riverside County

## Composition of Board

The Mental Health Board (MHB) for the County of Riverside shall consist of 16 members appointed by the Board of Supervisors in accordance with Welfare and Institutions Code, Section 5604, as amended by Chapter 1374. One member of the MHB will be a member of the Board of Supervisors or his/her formal designee. Fifty percent (50%) of the board membership shall be consumers, or the parents, spouse, sibling, or adult children of consumers who are receiving or have received mental health services. At least twenty percent (20%) of the total membership shall be consumers, and at least twenty percent (20%) shall be families of consumers. Each member of the Board of Supervisors shall appoint three persons from their district to the MHB.

The MHB for the County of Riverside also consist of three Regional Mental Health Boards: Western, Mid-County, and Desert. The purpose of the Regional Mental Health Boards is to serve in an advisory capacity to the Regional Managers and the MHB, and to ensure that all County mental health programs and services of the respective geographical areas are responsive to community needs. The Regional Boards convey the goals and programs of service to the community, and represent and serve as a two-way communication link between the regional service and the general public, key segments of the community, and geographic areas within the county. Each Regional MHB focuses on specific Supervisorial Districts. The Western Regional Board addresses Supervisorial Districts 1, 2 and parts of 5. The Mid-County Regional Board concentrates on Districts 3 and parts of 5, and the Desert Regional Board focuses on Districts 4 and parts of 5.

### Percentage



- White
- Hispanic
- African American
- API
- Native American
- Other
- Vacant

Meeting these requirements and increasing diversity are crucial objectives of the Riverside County MHB in order to best service the community. The Riverside County MHB aims to appropriately represent the ethnic and cultural diversity of the County's client population.

<u>Race/Ethnicity</u>	<u>Percent</u>
White	56.25%
Hispanic	12.50%
African American	0.00%
API	0.00%
Native American	6.25%
Other	0.00%
Vacant	25.00%
Total	100.00%



## Riverside County

MEMBER	DATE APPOINTED	TERM EXPIRES	CATEGORY
Richard Divine, Chair	1997	2013	District 4 Family Member
Christina Salas, Vice-Chair	2007	2013	District 5, Public Member
Hal Adams, Secretary	2009	2013	District 3, Family Member
Mary Allred	2005	2013	District 3, Family Member
Sherry Skidmore	1998	2014	District 1, Public Member
Shenna Moqet	2007	2013	District 5, Consumer Member
Rochelle Koch	2010	2013	District 4, Public Member
Julie Crouch	2009	2009	District 2, Family Member
Georgia Smith	2008	2008	District 2, Consumer Member
Donna Johnston	N/A	N/A	BOS Representative, District 2

## Riverside County

MEMBER	DATE APPOINTED	TERM EXPIRES	CATEGORY
Richard Divine, Chair	1997	2013	Family Member
Janice Quinn, Vice Chair	1997	2012	Public Member
Joseph Butts, Secretary	2004	2013	Public Member
Bonnie Gilgallon	2008	2012	Public Member
Stanley Jessop	2000	2012	Consumer Member
Raymond Chu	2011	2013	Public Member
Mark Miller	2002	2012	Public Member
Pat Wilhite	2008	2011	Family Member
Edward Wood	1999	2013	Consumer Member
Michael Kim	2009	2012	Public Member
Christina Salas	2007	Resigned 05/2011	Public Member

## Riverside County

MEMBER	DATE APPOINTED	TERM EXPIRES	CATEGORY
Hal Adams, Secretary	2008	2011	Family Member
George Middle, Vice Chair	2008	2011	Public Member
Virginia Marshall, Secretary	2006	2013	Family Member
Mary Allred	2003	2012	Family Member
Art Eisenheim	2004	2012	Consumer Member
Gloria Hernandez	2005	2013	Consumer Member
Horace L. Spear	2005	2013	Public Member

## Riverside County

MEMBER	DATE APPOINTED	TERM EXPIRES	CATEGORY
Greg Damewood, Chair	1997	2012	Family Member
J Keith Oddson, Vice Chair	2008	2011	Family Member
Agostino Riccardi, Secretary	2009	2011	Family Member
Caroline Martinez	2008	2011	Family Member
Angela Arauz- Castillo	2006	2012	Family Member
Jane Qui	2005	2013	Public Member

# Riverside County

## EXECUTIVE SUMMARY

Submitted By Richard Divine  
MHB Chair 2007-2011

The Riverside County Mental Health Board (MHB) would like to take this opportunity to thank the Board of Supervisors for their continuing support to the needs of the Department of Mental Health. This continuing support allows the department to provide effective and efficient mental health services to the citizens of Riverside County.

The Mental Health Board was mandated by the California Welfare and Institution Code (W&I Code) 5604.2 to review the services of the local mental health system and assess those programs to make sure they meet the needs of our citizenship. The Riverside County Mental Health Board meets ten (10) months of the year; August and December have been designated as "Dark" months. The Executive Committee meets the same 10 months of the year and is tasked with reviewing the previous weeks MHB meeting minutes and setting the agenda for the following MHB meeting. The Executive Committee consists of the MHB Chair, Vice Chair, Board Secretary, Mental Health Director or his Designee, and the Mental Health Board Liaison. All Mental Health Board members participate in at least one of the Board's "standing committees" and/or are in The California Association of Local Mental Health Boards/Commissions (CALMHB/C). The standing committees submit reports monthly which update the Mental Health Board on their activities. Members of the main MHB, Regional Board, and standing committees also complete site visits annually. Program sites are visited and the services provided are evaluated in order to ensure that consumer needs are adequately met. During these visits, Board and Committee Members as well as Program Staff have the opportunity to provide recommendations for improvement.

Throughout the fiscal year, the MHB has been kept apprised of the ongoing Riverside County and State of California budget discussions, and the effects to the Department of Mental Health and its services rendered. The Mental Health Department has kept the Mental Health Board fully informed of the ramifications of the budget crisis and the effects to programs that the department provides. In addition,

Celebrate Recovery presentations, which showcase the benefits of various Mental Health programs, are held at the MHB meetings each month. Participants from various programs share their personal experiences as well as appreciation for the resources made available to them.

The Mental Health Board has been provided with monthly updates on Proposition 63 or the "Mental Health Services Act" (MHSA) and the services provided by this act. Mr. Bill Brenneman L.C.S.W., is the MHSA Manager and is tasked with keeping the Board informed of the Act's implementation and status of the programs that have already been placed into service. Mr. Brenneman has kept the MHB fully apprised of the status of the five (5) components to the act, their budgets and funding streams.

The Mental Health Services Act mandates that the MHB hold public hearings on any new program or annual update, and publically post them for thirty (30) days or more. For the year of 2010, the MHB hosted 3 Public Hearings. The MHB then submitted recommendations to the Department of Mental Health for implementation and funding of the various components covered by those Public Hearings.

The dates and subjects of the Public Hearings are as follows:

- ◆ **Public Hearing— July 7, 2010– Innovation– Recovery Learning Center– Legacy Housing Project**  
Conduct a three (3) year pilot Recovery Learning Center project that will test a new service delivery model for Riverside County Mental Health by funding two (2) alternative "consumer driven" mental health centers. (\$7.8 million) Legacy is a gated, 81 unit multi-family permanent housing project to be located in Thousand Palms. The Department of Mental Health plans to apply for funding for 15 MHSA units. The amount of MHSA capital funds being requested is \$3,000,000, which includes \$1,622,400 for development and up to \$1,377,600 to provide operating subsidies for the MHSA units.
- ◆ **Public Hearing – March 2, 2011 – FYI 11/12 Annual Plan Update**  
Riverside County enhanced, expanded, and continued with existing, previously approved MHSA programs. (\$38 million)
- ◆ **Public Hearing – April 6, 2011 – Innovation – Family Room and Bella Vista Housing Projects**  
Developing a service system envisioned, developed, and led by family members with the expressed intent to support consumer driven recovery goals is, therefore, a necessary innovation to further transform our recovery-oriented service delivery system. (\$2.4 million) Bella Vista Family Apartments is a family affordable housing community located at 66950 Ironwood Drive, Desert

Hot Springs, CA. The total cost of the development is approximately \$10,000,000. The amount of MHSA funds being requested is \$3,374,580, consisting of \$1,687,290 in permanent financing and \$1,687,290 in capitalized operating subsidy.

As the W&I Code dictates, the MHB is responsible for reviewing contracts pursuant to W&I Code Section 5650. The State Hospital Bed Usage Standard Agreement falls within the guidelines of Section 5650. This annual contract was slated for but not presented to the MHB for scheduling reasons. However, this will be rescheduled.

The MHB conducts site visits to the varying mental health clinics and programs located throughout Riverside County. Board members are assigned to review the services delivered, the staffing required to provide those services, location of clinic, and the availability to the clients. Transportation issues and other problems that occur during the delivery of services are also discussed. After the site is visited, each board member is asked to report back to the MHB either verbally or in written form.

Riverside County is the only county that has regional mental health boards. These boards are located in Western, Mid-County, and the Desert Region. The regional boards act as the "eyes and ears" of the MHB. At this time, I would like to thank those members of the regional boards who make us aware of the community's needs by submitting monthly reports of their regions to the MHB.

The MHB anticipates that you will be pleased with the report to follow. Through the efforts of the MHB and Department of Mental Health, its Administration and Staff; the services provided to the mentally ill consumers of Riverside County are some of the best services offered by any County Mental Health Agency. The MHB's commitment to its obligations and responsibilities has always been met with cooperation and enthusiasm. The common goal of serving the mentally ill is and always will be the desire of the Riverside County Mental Health Board.

Respectfully,

Richard Divine, MHB Chair

# Riverside County

## COMMITTEE REPORTS

The Mental Health Board (MHB) has developed many committees over the years that are tasked with assessing programs, their functions, and their effectiveness. Members of the MHB are elected as Committee Chairs. Below is a list of MHB committees.

- ◆ **Housing Committee**
- ◆ **Children's Committee**
- ◆ **Criminal Justice Committee**
- ◆ **Older Adults System of Care Committee**
- ◆ **Adult System of Care Committee**
- ◆ **Legislative Committee**
- ◆ **Veteran's Committee**

Many of the committee Chair's have submitted an annual evaluation of the committee's activities. Included are several of these evaluations.



# MENTAL HEALTH BOARD

## Housing Committee Report

July 1, 2009 through June 30, 2011

Goals	Activities	Outcomes
<ul style="list-style-type: none"> <li>◆ Meet the needs of culturally diverse communities for affordable, appropriate, &amp; accessible housing</li> </ul>	<ul style="list-style-type: none"> <li>• Support the development of affordable housing projects</li> </ul>	<ul style="list-style-type: none"> <li>◆ Demonstrate increased housing capacity across levels of support</li> </ul>
<ul style="list-style-type: none"> <li>◆ Reduce Stigma &amp; NIMBYism that create barriers to housing</li> </ul>	<ul style="list-style-type: none"> <li>• Participate in the HUD Community Call Committee - 10 Year</li> </ul>	<ul style="list-style-type: none"> <li>◆ Demonstrate active participation in HUD Coalition Steering Committee, Regional Committees, and Subcommittees</li> </ul>
	<ul style="list-style-type: none"> <li>• Educate the public on mental health issues</li> </ul>	<ul style="list-style-type: none"> <li>◆ Demonstrate educational initiatives</li> </ul>
	<ul style="list-style-type: none"> <li>• Promote the development of affordable housing &amp; partnerships</li> </ul>	<ul style="list-style-type: none"> <li>◆ Demonstrate participation in advocacy</li> </ul>

This period will be forever etched in the memory of all members of the Housing Committee as we watch developments unfold. MHSA funds (Prop. 63) have helped develop permanent affordable housing for many mental health consumers who were formerly homeless, in and out of the hospital and not in treatment. Over 500 consumers, who have developed wellness and recovery plans, are living in stable environments. Some have even returned to work. They participated in Full Service Partnership Programs in all three regions of Riverside County and many are now living in some of the new housing complexes that MHSA housing dollars have developed by co-partnering with affordable housing developers. Housing development is a slow process, but is very rewarding when it reaches completion. We have an excellent staff working on development and are one of the top four counties in California utilizing MHSA funds to build housing.

A large percentage of those living on the street are severely mentally ill. The *2011 Riverside County Homeless Count* indicated that there were 6,203 homeless persons with the Point in Time (PIT) count. There were 1,113 individuals in shelters and 5,090 living in cars, the streets, freeway underpasses, abandoned buildings, RV's, encampments and other areas. There has been an 84% increase from the number of homeless counted in the PIT count in 2009.

Of course, the unemployment rates have driven the homeless count up. In January 2009 the rate was 11.7% and that increased to 14.8% in January 2011. The rate hit its peak in July 2010 with 15.4% out of work. People who became unemployed lost their homes and ended up experiencing homelessness for the first time in their lives. Another factor contributing to homelessness was cited by the *Consortium for Citizens with Disabilities Housing Task Force*. They noted that people with disabilities receiving Social Security Insurance (SSI) needed to pay 112% of their monthly income to rent a modest one bedroom unit at published fair market value. Many low income mental health consumers are priced out of the market and can not rent safe, clean shelter. It is vitally important for all communities to continue to develop extremely low income affordable housing.

MHSA funds have been used to buy into developing projects furnishing us with 15 scattered site units in each development. The development has an MHSA/FSP office on site with a case manager. That case manager makes sure that our mental health consumers in the Full Service Partnership program keep their apartment clean, stay stable, have rental subsidies, have treatment, and assist them in their wellness and recovery. There will eventually be nine developments in all three regions, Western, Mid-County and the Desert, of Riverside County.

As of June 16, 2011 the following developments are:

- ◆ Rancho Dorado, Moreno Valley – Multi Family - Completed – All 15 units rented and occupied
- ◆ Vintage at Snowberry, Riverside – Older Adults – Completed – 15 units in process of being rented
- ◆ Vineyards at Menifee, Menifee – Older Adults – Funding approved  
Construction starting soon
- ◆ Legacy, Thousand Palms – Multi Family – Funding Approved – Construction starting soon
- ◆ Bella Vista, Desert Hot Springs – Multi-Family – First redevelopment project – 15 units - Application for funding to be submitted by end of June

We have opened two Safe haven projects, one in Riverside and the other in the Desert region. Each has a drop-in center for the homeless to receive messages and mail, shower, use washers and dryers, etc. They are encouraged to enter the Safe haven

program to obtain transitional housing and full services. Each place has 25 beds and is generally full. It has been a learning experience to operate these facilities. Many who have graduated now work as Peers to operate the facility and wonderful recovery stories can be shared. The Housing Committee would like to see a Safe haven facility in the Mid-County area. However, due to stigma and NIMBYism, it has been difficult to get a Safe haven project started. There is great need in this area to obtain a homeless shelter for the mentally ill.

In 2009 and part of 2010 our membership declined and attendance at our meetings was at a critical low. Mary F. Allred, Chair called a meeting and met with Maria Marquez, Western Region Manager, Lynn Brockmeier of RCMH/HHOPE, and Vicki Neugebauer from the Office on Aging. We discussed various strategies to increase membership and it was decided to 1) Change our meeting time to 3<sup>rd</sup> Thursday of each month, 4:00 p.m. to 6:00 p.m. along with 2) Have a Housing Education presentation before each business meeting. The changes have increased our attendance by 300% and has been very informative and successful.

The presentations were as follows:

- ◆ November 18, 2010 – **Housing 201** – Tips on Evaluating which level of support would be right for consumers, how to select housing service providers. By Maria Marquez
- ◆ December 2010 – Dark
- ◆ January 20, 2011 – **Planning for Housing After a Hospitalization.** By Debbie Kalley, MH Services Supervisor; Terry Carter, CT; Linda Omagan, CT; Sean Fredericksen, CT1
- ◆ February 17, 2011 – **Fair Housing: Rights, and Responsibilities for Tenants and Landlords.** By Monica Lopez, Riverside Fair Housing Council
- ◆ March 16, 2011 – **Housing Authority: Affordable Housing Programs.** By Carrie Harmon, Riverside Housing Authority
- ◆ April 21, 2011 – **Transition Age Youth – Housing and Support Options.** By Pauline Youlin-Bartlett, CT; Frank Jefferson Glipa, MHSS
- ◆ May 18, 2011 – No General Meeting – Participated with display on Housing at **May is Mental Health Month Faire, Live Life Well,** Bordwell Park, Riverside.
- ◆ June 16, 2011 - **Housing Issues with Older Adults.** By Margo Alexander and Joe Sebastian and
- ◆ **Resource Center on Positive Aging** – By Vicki Neugebauer, RC Office on Aging (Gave everyone a wonderful handbook on resources to help seniors.)
- ◆ Homeless count DPSS and Riverside County system

All of these public education presentations were informative and the general public and mental health staff attended which increased attendance at our meetings.

We have started distributing membership forms to prospective members under the new RCMH Board bylaws. We are now in compliance as a committee. Also, I requested an Executive opinion of our Bylaws as to Contract Agencies being members of our committees. It was determined that because we in no way bind the main board to any binding decision, contract agencies can belong to the committees. We do not vote on contracts. They cannot serve on the Regional Boards or the Main Board.

We look forward to another exciting year in the area of housing and our participation in the affordable housing arena.

Respectfully submitted:

Mary F. Allred, MHB Housing Committee Chair



# Riverside County Department of Mental Health



## MHSA Permanent Supportive Housing Program Housing Projects Completed or in Development as of March 1, 2011

### Rancho Dorado, Moreno Valley, CA



- 80-unit Family Apartment Community (first phase) with 15 supportive housing units
- MHSA application submitted on 5/6/08
- Opened for occupancy in fall, 2010

### Vintage at Snowberry, Riverside, CA



- 224-unit Senior Apartment Community with 15 supportive housing units
- MHSA application submitted on 4/6/10
- Construction is underway with scheduled opening in 2012

### The Vineyards at Menifee, Menifee, CA



- 80-unit Senior Apartment Community with 15 supportive housing units
- MHSA application submitted on 6/15/09
- Construction is underway with scheduled opening in 2012

### Legacy, Thousand Palms, CA



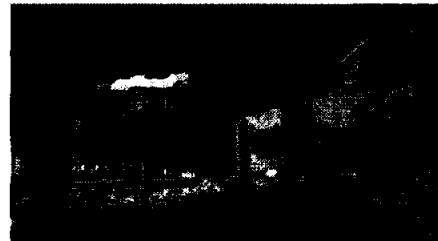
- 80-unit Family Apartment Community (first phase) with 15 supportive housing units
- MHSA application submitted on 9/13/10
- Construction is underway with scheduled opening in 2012

### Cedar Glen, Riverside, CA



- 78-unit Family Apartment Community with 15 supportive housing units
- MHSA application to be submitted in 2012
- Currently in pre-development with anticipated opening in 2013

### Bella Vista, Desert Hot Springs, CA



- 96-unit Family Apartment Community with 15 supportive housing units
- MHSA application to be submitted in summer, 2011
- Acquisition rehab project. Units are scheduled to come on line in 2012

# **MENTAL HEALTH BOARD**

## **Children's Committee Report**

**July 1, 2009 through June 30, 2011**

The Children's Committee is a standing committee of the Riverside County Mental Health Board. Our committee is comprised of public interest members, school district representatives, community based organizations, Riverside County employees, probation, health care affiliates, consumers, caregivers, parents and mental health advocates. The committee advocates for the needs of children who have been identified as or at risk of having emotional/behavioral challenges. Advocacy extends to their families and/or caregivers. The Children's Committee will present important issues to the Mental Health Board as well as involved agencies, encourage increased family/caregiver input, and network with local community agencies. Through collaboration many ideas and suggestions were given to the Department of Mental Health who in turn implemented many new programs and workshops for the consumers and families they serve. In addition, the committee serves as a resource of knowledge to help others who are directly or indirectly affected by mental illness. Monthly meetings are held during which community organizations present agency updates, new programs, cut backs, restructuring and other opportunities for community involvement and education. The committee members are able to gain valuable information about other community programs and events and take the information back to the community and those they serve.

The committee played an active role in the development of the Prevention and Early Intervention Plan in 2009. The committee reviewed the final draft of the plan and supported this component of the Mental Health Services Act. Currently many programs are being implemented related to Prevention and Early Intervention. The Children's Committee remains active in receiving updates on these programs implementation, status, and outcomes.

In 2009, the Children's Committee received an update on the innovations component of the Mental Health Services Act. The committee provided suggestions on new and creative programs that would benefit children. One suggestion that was recommended was beginning an art program for children and youth that would therapeutically assist in their recovery.

The Children's Committee remains active in receiving updates from the children's services manager of the Department of Mental Health related to programs,

client population, and budget impacts on children's services. In addition, members of the Children's Committee have completed various site reviews of programs and clinics. The Department of Mental Health is doing an outstanding job in the delivery of children's services, and to the development and implementation of evidenced based practices and programs.

Throughout the year the Children's Committee participated in various projects to assist children and families in need, including the backpack/school supply drive, Thanksgiving baskets, snowman banner, and toy drive. Furthermore, children's booths and activities were provided at the National Alliance on Mental Illness walk and May is Mental Health Month event.

The committee actively followed the state deferment and suspension of AB3632, IEP services related to mental health.

Through the governor's actions, state funding was eliminated for services related to mental health services required by IEP's. The RCDMH continued to provide outpatient mental health services and the school districts provided funding for children to remain in their residential placements.

The Children's Committee continues to advocate for the mental health needs of children. In 2010 individual committee members sent advocacy letters to their local legislators requesting support for the Mental Health Services Act and rejection of any ballot initiative that would take funds from MHSA.

The committee made the following recommendations to RCDMH for new services and expansion:

- ◆ Expand Therapeutic Behavioral Service allowing more Non-Medi-Cal slots.
- ◆ For the 0-5 populations expand Parent Child Interactive Therapy. The Department of Mental Health will be expanding this treatment and creating mobile units.
- ◆ Aggression Replacement Treatment (ART) expansion to schools, group homes, etc. The Department of Mental Health has ART being provided to students at Desert Springs Middle School and has intentions of expanding to other schools.
- ◆ Provide services in the school to help students that do not qualify as Severally Emotionally Disturbed. New programs are being implemented at schools through Prevention and Early Intervention to assist at risk children and youth.
- ◆ C-DISC (Computer-Diagnostic Interview Schedule for Children) tool will provide more accurate diagnosis of minors (including co-occurring disorders) seeking services. There is discussion of the Department of Mental Health using CANS, Child Adolescent Needs and Strengths, as a diagnostic tool.

- ◆ Expansion of the Rapid Psychiatric Evaluation through Emergency Treatment Services that now offers limited emergency prescription refill services for post hospital clients.
- ◆ Increase the number of Wraparound slots and Multi-Dimensional Treatment Foster Care.
- ◆ Expansion of Juvenile Mental Health Courts (JMHC) as an alternative to incarceration. Provide screening to every youth that comes into juvenile hall; providing services and follow up for those identified as having a mental illness.
- ◆ Working collaboratively with community agencies to bring programs and services to children and families. Providing additional mental health services at school sites. Supporting and working with the Student Assistance Program's in school districts.
- ◆ Focus on teenage depression and suicide prevention. New initiatives are being established by the Department of Mental Health through Stigma Reduction and Community Capacity Building.
- ◆ Implement Triple P, Positive Parenting Program in Riverside County.
- ◆ Improvement of CARES line in receiving and making referrals and authorizing of Mental Health services.

The Children's Committee is encouraged by the expansion and direction of children's services in Riverside County. The opening of the Recovery Learning Center, which is a state approved innovation program, will be a peer driven clinic and extend to serve transition age youth as well. Children's Services restructured in the Desert Region and has become more inclusive of the family model. It now includes the provision of parent training and support through Educate, Equip, and Support Classes, Open Doors Parent Support Group, and the Parent to Parent Telephone Support Line.

Respectfully submitted:

Christina Salas, MHB Children's Committee Chair



# **MENTAL HEALTH BOARD**

## **Legislative Committee Report**

**July 1, 2009 through June 30, 2011**

### **Mission Statement**

***“To bring the Mental Health Board abreast of all pertinent issues or topics currently being discussed in State and Government legislation”***

The main goal of the Legislative Committee is to foster awareness, review current proposed bills, and make recommendations as to the position Riverside County takes in these issues. By keeping the Mental Health Board informed about topics that are being discussed in legislation, we are more readily equipped to advocate for the consumers of Riverside County.

### **Goals**

***“To keep the Mental Health Board informed of legislative activities whether Federal, State, or County”***

***“To advocate for legislation that would be beneficial to our clients”***

Committee Members report on any legislative activity they find that might concern Riverside County Mental Health. The Legislative Committee continues to monitor the internet’s various legal web sites for proposed legislation that affect the Department of Mental Health’s ability to deliver services to the clients of Riverside County. The committee asks board members to search national and local periodicals for any legislation or change of legislation that would affect services rendered to our clients.

This committee is vigilant, and has advised the Mental Health Board on the

changes to the laws which affect our homeless programs, Individual Education Plan Program, and the ongoing changes to legislation regarding balancing the State's budget. The committee will be re-energizing it's activities and will become more proactive to the needs of our clients in Riverside County. Currently, the committee is attempting to acquire at least one additional standing member and establish a definite time for the monthly meetings. Once a definite time is established, the Legislative Committee hopes to obtain more members who will contribute in its efforts.

Respectfully Submitted,

Richard Divine  
Legislative Committee Chair

# **MENTAL HEALTH BOARD**

## **Veterans Committee Report**

**July 1, 2009 through June 30, 2011**  
**Riverside County Department of Mental Health**

The Veterans committee, sponsored by the Riverside County Mental Health Board and chaired by one of its member, is a group of volunteers interested in reducing the stigma of mental illness and improving the quality of life for veterans and their families dealing with mental disorders.

### **Goal**

*“To assist, develop, implement, and promote mental health peer and family support programs for veterans that encourage the prevention of mental health crisis or intervene at early stages of mental health need”*

The committee developed a resource brochure to be distributed to veterans and family members for easy to find references to services available in the County, and is collaborating with and assisting the NAMI Frontline Project to provide Family to Family education and support programs to veterans and their families. Committee members also participated in recognizing military veterans in the Riverside County Mental Health Training. Veterans Committee Members attended the 1<sup>st</sup> Annual Orange County Veteran’s Conference. Combating stress, Post Traumatic Stress Disorder, Traumatic Brain Injury, indigent veterans, and veteran’s court were some of the various topics discussed. Furthermore, the Veteran’s Committee assisted and participated in the grand opening of the new Veterans Resource Center at Riverside City College. Board Members also participated in the Annual Veterans Parade in Riverside held April 16, 2011, and the Memorial Day ceremony held at the Riverside National Cemetery.

Respectfully Submitted,

Hal Adams  
RCMHB Veterans Committee Chair

# **MENTAL HEALTH BOARD**

## **Older Adult System of Care Committee Report**

**July 1, 2009 through June 30, 2011**

### **Vision**

*“We value self-determination and independence of our older adult and culturally diverse consumers. We value pursuit of quality of life.”*

### **Goal**

*“To enable older adult consumers who are significantly impaired from a mental illness to access the services that will promote empowerment and recovery.”*

Older Adults Services seeks to assist consumers in their recovery and maintaining a physically and emotionally healthy lifestyle so that they are able to remain in their home or community based housing for as long as possible. Services are provided by a multi-disciplinary staff with specialized training in evaluating and addressing both mental illness and issues of aging.

This committee meets monthly on the first Tuesday of each month at noon at the Mental Health Administration Office. Much of the committee functions are focused on orientation and training regarding exciting new MHSA programs. As a result, there will be an influx of new MHSA funding and program designs and operations that will enhance older adult mental health services in our County. It provides a forum for representatives from other agencies to communicate common goals and challenges serving older adults. Consumers and family members are invited to join and/or attend to provide feedback about the services they receive or need to enhance their quality of life.

The following is a brief view of the MHSA subjects covered during the year:

- ◆ Specialty Multidisciplinary Aggressive Response Treatment Team (SMART), a Full Service Partnership
- ◆ Peer Support Training with emphasis on implementing Wellness Recovery Action Plan (WRAP)
- ◆ Older Adult Prevention and Early Intervention (PEI) Evidence Based Treatment Program Implementations: Program for Encouraging Active and Rewarding Lives for Seniors (PEARLS), Caregiver Support Group, Cognitive Behavior Therapy (CBT) for Late Life Depression, Prolonged Therapy for Post Traumatic Stress Disorder, Innovation Project: Older Adult Self-Management Health Team (OASHT)
- ◆ Housing Programs available to Seniors
- ◆ Workforce Education and Training

During 2009 the Older Adult Services partnered with Cam and hosted the Older Adults Conference at the Riverside Convention Center. This was the highlight of the committee and the Mental Health Department Older Adult Services. The Conference focused on the needs of the Older Adult mental health stakeholders. The Conference was well attended and the participants came from all regions of the State. Responses by the attendees were over-whelming positive. In 2010 and 2011, the Committee continued to keep abreast of MHSA activities and the mental health needs of the older adult community.

The Older Adult System of Care Committee provides a vehicle for the community at large to communicate to the Mental Health Department personnel the unmet mental health needs of the County's older adults. The Older Adult System of Care Committee also suggests ways it can assist in meeting those needs. Finally, the committee continually endeavors to seek additional members representing the diverse population in Riverside County.

Respectfully submitted,

Agostino "Ric" Riccardi,  
MHB Older Adult System of Care Committee Chair

# **MENTAL HEALTH BOARD**

## **Adult System of Care Committee Report**

**July 1, 2009 through June 30, 2011**

The Adult System of Care Committee (ASOC) is a committee of the Riverside County Department of Mental Health Advisory Board. Consistent with its mission, the role and functions of the ASOC Committee are to provide opportunity for feedback to the Department of Mental Health from community stakeholders, consumers, and family members about the mental health needs of adults and their families.

### **Mission Statement**

*“To promote, support, and advocate for high quality and culturally appropriate services for severely and persistently mentally ill adults and their families residing in Riverside County through formal recommendations.”*

## **Criminal Justice Committee Report**

### **Mission Statement**

*“To facilitate recovery of people who have a serious mental illness in the Criminal Justice System by enhancing programs in our community through collaborative efforts involving all county agencies, the community, and the family”*

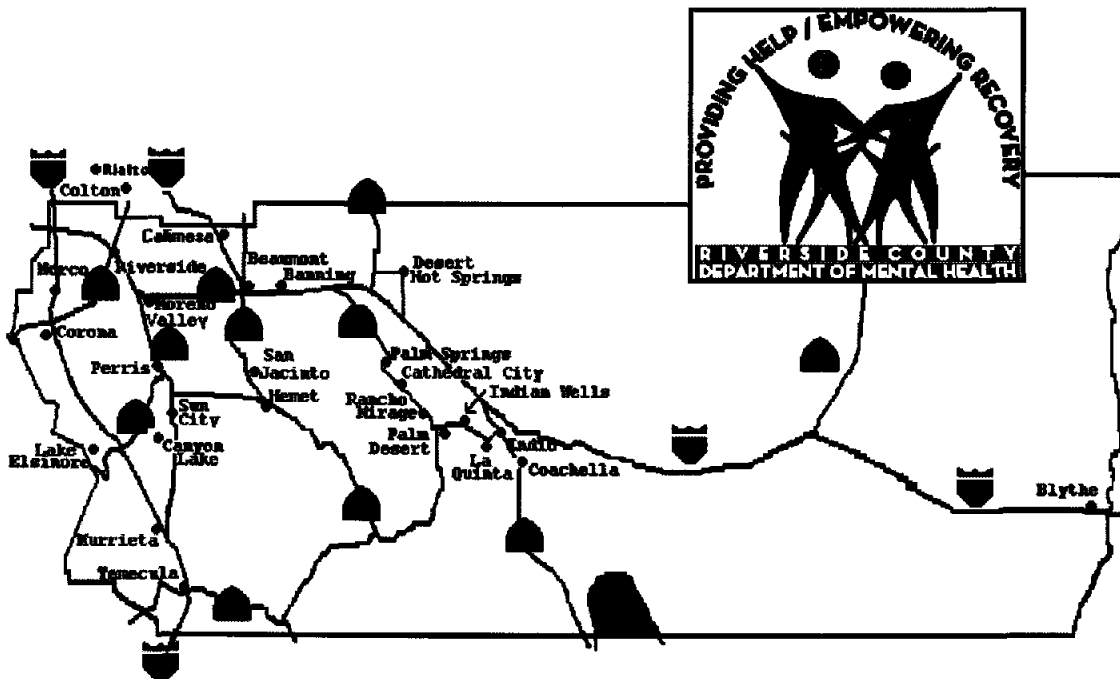
\*Both the Adult System of Care Committee and the Criminal Justice Committees have been without a Committee Chair throughout the reporting period. The Mental Health Board is actively recruiting and has made it a priority to fill these positions in the near future. As a result, there are no reports for these committees at this time.

# Riverside County

**Western Regional Mental Health Board**  
Greg Damewood, Western Regional Board Chair

**Mid-County Regional Board**  
Hal Adams, Mid-County Regional Board Chair

**Desert Region Regional Board**  
Richard Divine, Desert Regional Board Chair



# **MENTAL HEALTH BOARD**

## **Regional Mental Health Board Report**

**Western Regional Board**  
**Greg Damewood, Chair**

Three (3) goals the Western Regional Board established during the year include the following:

- ◆ Educate individuals on mental health
- ◆ Address mental health issues throughout the community and assigned region
- ◆ Reduce stigma associated with mental illness

Western Regional Board Members remain focused on attaining their goals throughout the year. All board members consistently attended meetings, supported board goals, and completed site visits throughout the year. Following these visits, members submitted detailed reports for each location. The Western Regional Chair and the Department of Mental Health Administration informed board members about various changes and programs. Board members shared information regarding the various mental health programs throughout the County of Riverside. Board members, mental health administration, and community contacts shared personal experiences and discussed the challenges of mental health services such as fund cuts, transportation issues, and those without Medi-Cal being denied benefits. Western Regional Board Members supported and attended youth, elderly, community meetings, and conferences. During the holiday season, board members served meals to the elderly. In addition, various trainings were attended throughout the year. Western Regional Board Members also attended meetings in coordination with the Office on Aging, spoke before city dignitaries about mental health, and was present at Criminal Justice meetings in order to gain knowledge about how the mentally ill are treated while in prison and following their release. During the month of May, the Department of Mental Health and the Western Regional Board participated in and hosted the May is Mental Health Month event at Bordwell Park in Riverside, CA.

The Western Regional Board has participated in the following specific activities and events during the reporting year:

- ◆ Dare to Be Aware Youth Conference
- ◆ Senior Citizen Meeting
- ◆ Meals for Elderly Activities
- ◆ May is Mental Health Month

The Western Regional Board has approached Stigma and Mental Health, which is in need of continued support. It will also begin to address the effects and fear that some individuals encounter following losing benefits.

Respectfully Submitted,

Greg Damewood  
Western Regional Board Chair



# **MENTAL HEALTH BOARD**

## **Regional Mental Health Board Report**

**Mid-County Regional Board**  
**Hal Adams, Chair**

The Mid-County Regional Mental Health Advisory Board consist of seven very active and involved individuals residing in various cities within the Mid-County region. All members participated in the annual board training program as well as completed the required ethics curriculum. Meetings were held in a different location each month, either at a mental health clinic or a contracted provider facility. The manager of each facility would provide a report on services and personnel, allowing the members to become better acquainted with the services provided to clients and family. Site reviews of twelve locations including county clinics and contracted agencies were conducted. Mid-County Board Members reported on the locations visited. Members also actively participate in committees including Children's, Older Adults, Adult System of Care, Criminal Justice, Legislative, Housing, and Quality Improvement. In recognizing May as Mental Health Month, Members of the Board attended the City Council meetings of each city in Mid-County, and provided a presentation about mental health. During this time, Mid-County Board Members received various city proclamations from the mayor of each city. The Mid-County Regional Advisory Board assisted in presenting a public awareness through a film festival which displayed three dynamic mental health documentaries in South Riverside County. In addition, the Creativity Gallery was hosted at the Perris Mental Health Clinic. Numerous consumers, from various clinics in the Mid-County region, contributed works of art and participated in activities. The tradition of providing gifts and meals to needy families during the holidays was continued with great enthusiasm.

Respectfully Submitted,

Hal Adams  
Mid County Board Chair

# **MENTAL HEALTH BOARD**

## **Regional Mental Health Board Report**

**Desert Regional Board**  
**Richard Divine, Chair**

Three (3) goals the Desert Regional Board established during the year include the following:

- ◆ To continue and improve May is Mental Health Month and the Art Show
- ◆ To make all more aware of the services provided in the region
- ◆ Educate the public about mental illness and the stigma attached to it

The Desert Regional Board is a very active, outspoken, and energetic board that attends all meetings with a great deal of enthusiasm and efficiency. The board has been the driving force behind the Police Training Program and the Suicide Prevention Program. The May is Mental Health Month Art Show was a great success, exhibiting over 150 art pieces and 50 local client/artists this past year. In the past, the Desert Regional Board has coordinated annual employer recognition events to thank the local businesses who hire local clients. While coordinating this year's May Art Show, the Board outreached to and involved several, different clinics and drop in centers. They also provided the necessary art supplies to the client's in need. With the permission of the Regional Manger, department management who provide services in the Desert Region, were invited. By coordinating this, all Desert Regional Board Members could hear the given report, ask questions, and comment on those services.

Also during the month of May, the Desert Regional Board participated in both the Regional and County May is Mental Health Month. Desert Regional Board Members obtained various cities proclamations associated with May is Mental Health Month. While attending meetings at various City Halls, Board Members addressed the stigma associated with mental illness and the efforts to reduce it. Monthly, the Board held presentations on services provided by mental health staff and outside vendors. Board Members also attended training hosted by the California Institute for Mental Health.

Furthermore, the Desert Regional Board explored different methods to educate the public about the stigma associated with mental illness. One Board Member, a radio personality in the Desert Region, hosted a show in the area on mental illness. During this broadcast she called various professionals and board members. The audience was able to call in to ask questions and be provided with advice and information.

The Desert Regional Board also proposed that the "Yellow Ribbon" Suicide Prevention Program be incorporated into the Prevention and Early Intervention Program. Also, the Board was able to submit suggestions for the new by-laws that were composed. They reviewed and approved the two Mental Health Services Act housing projects proposed in the Desert Region. Specifically, the projects located in Thousand Palms and Desert Hot Springs.

Though the Desert Region is a large territory, there are always board members available to represent the area. Board members are also residents who live in Coachella Valley and farther away areas such as Banning and Blythe. I have always been proud to say that I am a member of the Riverside County Desert Regional Mental Health Board.

Respectfully Submitted,

Richard Divine  
Desert Regional Board Chair

# Riverside County

## Site Reviews

Completed by the Riverside County  
Main Mental Health Board

**La Sierra GAIN**

11060 Magnolia Avenue, Riverside, CA 92505–  
Completed by Georgia DeGroat Smith 02/11/10

**CALWORKS**

5961 Mission Boulevard, Jurupa, CA 92509–  
Completed by Moses Rangel 02/11/10

**Iowa GAIN**

1020 Iowa Avenue, Riverside, CA 92507–  
Completed by Moses Rangel 08/25/09

**Norco GAIN**

3178 Hamner Avenue, Riverside, CA 92860–  
Completed by 01/28/10

**Jefferson Wellness Center– Adult System of Care (FSP)**

1827 Atlanta Avenue, Suite D3, Riverside, CA 92507–  
Completed by Mary Allred 12/15/10

**Jefferson Wellness Center– Transition Age Youth (FSP) The Spot**

1827 Atlanta Avenue, Suite D3, Riverside, CA 92507–  
Completed by Mary Allred 12/15/10

**Main Street Clinic**

629 North Main Street, Corona, CA 92880–  
Completed by Julie Crouch 11/24/09

**Fact of Corona**

1195 Magnolia Avenue, Corona, CA 92879–  
Completed by Julie Crouch 11/24/09

## Site Reviews

Completed by the Riverside County  
Western Region Mental Health Board

### **Wraparound Program**

6848 Magnolia Avenue, Suite 200, Riverside, CA 92506–  
Completed by Julie Crouch 11/16/09

### **Children's Case Management**

9707 Magnolia Avenue, Riverside, CA 92503—  
Completed by J. Keith Oddson 02/11/10

### **Multidimensional Treatment Foster Care (MTFC)**

9707 Magnolia Avenue, Riverside, CA—  
Completed Angela Arauz-Castillo 08/25/09

### **Pre-school 0-5 Program**

769 Blaine Street, Suite A, Riverside, CA 92507–  
Completed Angela Arauz-Castillo 01/28/10

### **Therapeutic & Residential Assessment & Consultation Team (TRAC Team)**

9707 Magnolia Avenue, Riverside, CA 92503–  
Completed by J. Keith Oddson 02/11/10

### **Moreno Valley GAIN**

23119 Cottonwood Avenue, Building B, Moreno Valley, CA 92553–  
Completed by Greg Damewood 05/24/10

### **Blaine Street Clinic– Integrated Health**

769 Blaine Street, Suite B, Riverside, CA 92507–  
Completed by Jane Qui 06/09/10

### **Van Horn Counseling Center**

10000 County Farm Road, Riverside, CA 92503–  
Completed by Caroline Martinez 10/01/10

### **ITF/ETS**

9990 County Farm Road, Riverside, CA 92503–  
Completed by Greg Damewood 06/21/11

## Site Reviews

### Completed by the Riverside County Mid-County Mental Health Board

**Lake Elsinore GAIN**

1400 West Minthorne Avenue, Lake Elsinore, CA 92530–  
Completed by Virginia Marshall 09/08/09

**Hemet GAIN**

541 San Jacinto, Hemet, CA 92543–  
Completed by Virginia Marshall 04/12/11

**HHOPE**

769 Blaine Street, Suite B, Riverside, CA 92506–  
Completed by Mary Allred 08/17/09

**Incredible Kids Program**

23119 Cottonwood Avenue, Building A, Suite 110, Moreno Valley, CA 92553–  
Completed by Agostino Riccardi 03/26/09

**Perris Adult Clinic**

1688 North Perris Boulevard, L-7 L-11, Perris, CA 92571–  
Completed by Mary Allred 02/04/10

**Perris Children's Clinic**

1688 North Perris Boulevard, L-7 L-11, Perris, CA 92571–  
Completed by Mary Allred 02/04/10

**Hemet Clinic**

650 North State Street, Hemet, CA 92543–  
Completed by Mary Allred 02/04/10

**Temecula Clinic**

41002 County Center Drive, #320, Temecula, CA 92590–  
Completed by George Middle 02/22/10

**Mt. San Jacinto Children's Clinic**

920 Ramona Boulevard, #2, San Jacinto, CA 92582–  
Completed by Virginia Marshall 04/14/11

**Jefferson Transition Program**

351 Wilkerson Avenue, Suite W, Perris, CA 92570-

Completed by 01/29/10

**Anka Behavioral Health, Inc.**

102 West Main Street, San Jacinto, CA 92583-

Completed by Jim Milliken 02/10/10

**Victor Community Support Services**

31681 Riverside Drive, Suite L, Lake Elsinore, CA 92530-

Completed by Virginia Marshall 03/17/10

## Site Reviews

Completed by the Riverside County  
Desert Mental Health Board

### **Banning Adult Clinic**

1330 W. Ramsey, #100, Banning, CA 92220—

Completed by Christina Salas - 11/04/09

### **Acute & Residential**

47-825 Oasis Street, Indio, CA 92201—

Completed by Joseph Butts - 12/02/09

### **Oasis Mental Health Treatment Center**

47-915 Oasis Street, Indio, CA 92201—

Completed by Joseph Butts-10/09/09

### **Contracts & Homeless The Path**

47-825 Oasis Street, Indio, CA 92201—

Completed by— Bonnie Gilgallon 09/21/09

### **Desert Full Service Partnership/Path**

19531 McLane Street, Suite B-6, Palm Springs, CA 92262—

Completed by Bonnie Gilgallon 10/13/09

### **Cathedral Canyon Wellness & Recovery for Mature Adults Smart Program**

68-625 Perez Road, Suite 11, Cathedral City, CA 92234—

Completed by Louise Jones 09/08/09