

FORM APPROVED COUNTY COUNSEL  
 BY: GREGORY P. PRIAMOS  
 DATE: 12/24/15

Departmental Concurrence

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

2017A



**FROM:** Riverside University Health System – Behavioral Health

**SUBMITTAL DATE:**

**SUBJECT:** Behavioral Health Commission Annual Report FY14/15. District: All. [\$0]

**RECOMMENDED MOTION:** That the Board of Supervisors receive and file the Behavioral Health Commission Annual Report for FY14/15.

**BACKGROUND:**

**Summary**

The Behavioral Health Commission (BHC) is established pursuant to the provisions of California Welfare and Institutions (W&I) Code Sections 5604 et seq. and Health and Safety Code Sections 11800-11803 et seq. The BHC serves as a liaison between the community, the Riverside University Health System – Behavioral Health, and the Riverside County Board of Supervisors. It is the function of the BHC, under California W&I Code 5604.2 and BHC Bylaws Article I, Section 3 to review the services of the local mental health and substance use 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.

(Continued on Page 2)

*Steve Steinberg*  
 Steve Steinberg, Interim Director  
 RUHS - Behavioral Health

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 0	\$ 0	\$ 0	\$ 0	Consent <input checked="" type="checkbox"/> Policy <input type="checkbox"/>
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0	

<b>SOURCE OF FUNDS:</b> N/A	<b>Budget Adjustment:</b> NA
	<b>For Fiscal Year:</b> 14/15

**C.E.O. RECOMMENDATION:** APPROVE  
 BY: *Debra Cournoyer*  
 Debra Cournoyer  
 County Executive Office Signature

**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Jeffries, seconded by Supervisor Tavaglione and duly carried by unanimous vote, IT WAS ORDERED that the above matter is received and filed as recommended.

Ayes: Jeffries, Tavaglione, Washington, Benoit and Ashley  
 Nays: None  
 Absent: None  
 Date: January 5, 2016  
 xc: Behavioral Health

Kecia Harper-Ihem  
 Clerk of the Board,  
 By: *[Signature]*  
 Deputy

- A-30
- Positions Added
- 4/5 Vote
- Change Order

Prev. Agn. Ref.: 2-13 of 7/29/14 | District: ALL | Agenda Number:

2-7

**SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA  
FORM 11: Behavioral Health Commission Annual Report FY14/15. District: All. [\$0]**

**DATE:**

**PAGE:** 2 of 2

**BACKGROUND:**

**Summary (continued)**

The BHC provides critical examination and review of services and proposes recommendations concerning the delivery of services.

As required under the California W&I Code, BHC Bylaws, and the Riverside County Board of Supervisors, Policy A-21, the Behavioral Health Commission respectively submits its annual report to the Board of Supervisors covering the needs and performance, of the County's mental health and substance use system.

The BHC's commitment to their duties and responsibilities has always been met with cooperation and enthusiasm. The common goal of serving people with mental illness and those struggling with substance use is, and always will be, the desire of the Riverside County Behavioral Health Commission.

The BHC would like to take this opportunity to thank the Board of Supervisors for continuing to support the needs of Riverside University Health System – Behavioral Health, which in turn, allows mental health and substance use services to be provided effectively and efficiently to the citizens of Riverside County.

**Impact on Citizens and Businesses**

The services described in the Behavioral Health Commission Annual Report are a component of the Riverside University Health System – Behavioral Health system of care aimed at improving the health and safety of consumers and the community.

**ATTACHMENTS:**

Behavioral Health Commission Annual Report FY14/15

**COUNTY OF RIVERSIDE  
DEPARTMENT OF MENTAL HEALTH**

**BEHAVIORAL HEALTH COMMISSION  
ANNUAL REPORT**

7/1/2014 – 6/30/2015

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**BOARD OF SUPERVISORS**

District I – Kevin Jeffries  
District II – John Tavaglione  
District III – Chuck Washington  
District IV – John Benoit  
District V – Marion Ashley



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## **BEHAVIORAL HEALTH COMMISSION INTRODUCTION**

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The Riverside County Mental Health Advisory Board was created on August 15, 1966 and transitioned to become the Mental Health Board on April 6, 1993. The purpose of the Mental Health Board was to review and evaluate the County's mental health needs, services, facilities and special matters; advise the Board of Supervisors and Director of Mental Health; review certain mental health related agreements; assess the impact of realignment of services from the state to the County; report to the State regarding the County's performance outcome data; and perform other enumerated tasks.

The Riverside County Substance Use Advisory Committee was formed on June 2, 1994 through the consolidation of the Riverside County Alcohol Advisory Committee and the Riverside County Advisory Committee on Drug Abuse. The purpose of the Substance Use Advisory Committee was to advise the Board of Supervisors and Director of Mental Health on the prevention, treatment, and recovery programs within the County; encourage and educate the public on the nature of drug and alcohol programs; and review the County's needs to address the ongoing problems associated with drug and alcohol abuse.

As these two issues are often so intertwined, the state legislature dissolved the State Department of Mental Health and the State Department of Alcohol and Drug Programs and merged them into the Department of Healthcare Services (DHCS) in 2013. Following suit, on November 24, 2014, Riverside County's Board of Supervisors approved the consolidation of the Mental Health Board and Substance Use Advisory Committee, establishing the Behavioral Health Commission (BHC).

The Behavioral Health Commission is committed to overseeing, evaluating, and reviewing the Department of Mental Health's delivery of services to people struggling with mental illness and/or substance use, residing within the county. It is the function of the BHC to ensure that citizens of Riverside County are provided with prompt, effective, efficient, and culturally competent community-based services. The BHC provides critical examination and review of services and provides recommendations concerning the delivery of services.

The BHC serves as a liaison between the community, Department of Mental Health, and the Riverside County Board of Supervisors. The Commission consists of consumers, family members of consumers, and public interest representatives from the medical field, educational field, and law enforcement, whose aim is to educate, advocate for ready access to services, and guide consumers through the mental health and substance use system.

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

## **MISSION STATEMENT**

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*"The mission of the Riverside County Behavioral Health Commission is to provide public, consumer, and family member input into the planning process of mental health and substance use services and to assist the Riverside County Department of Mental Health in carrying out its mandated functions, to advocate as a united voice on substance use and 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.*

*This Commission is established pursuant to the provisions of California Welfare and Institutions (W&I) Code Sections 5604 et seq. and Health and Safety Code Sections 1180-11803 et seq."*

## **THE MISSION OF THE CALIFORNIA MENTAL HEALTH MASTER PLAN**

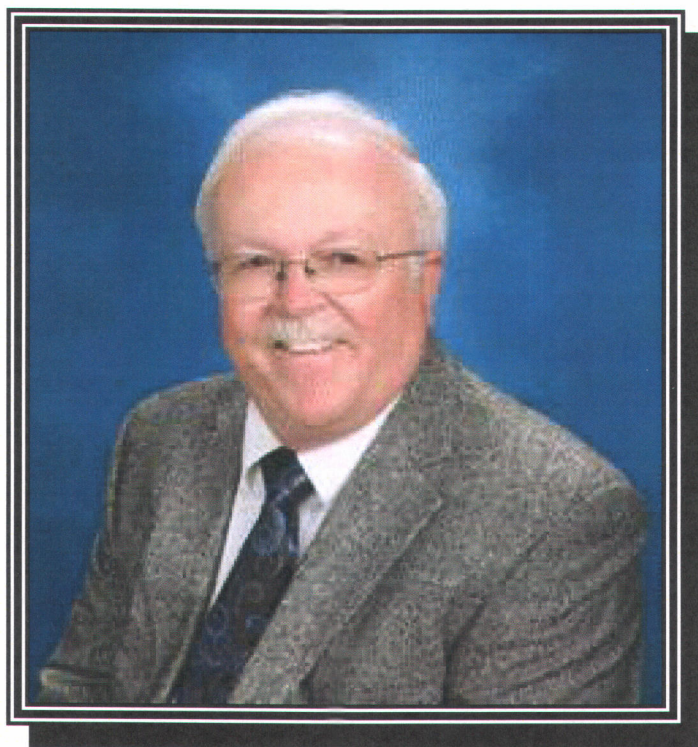
*(Passed as part of the Bonzan-McCorquodale Act of 1991)*

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*"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."*

## BEHAVIORAL HEALTH COMMISSION AND DESERT REGIONAL BOARD CHAIR

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Richard Divine  
Family Member  
District 4

## RECRUITMENT EFFORTS

The Behavioral Health Commission continually supports recruitment efforts and encourages new members to join the Commission through a variety of methods that include community outreach and solicitation through a variety of venues. These include postings on the County Mental Health and Board of Supervisors websites, distribution of information at community events such as the annual May is Mental Health Month "Live Life Well" Fair and other community gatherings, as well as through stakeholder groups such as the Consumer Wellness and Recovery Coalition.

Make a Difference in Your Community  
**Join the Behavioral Health Commission**



**Gain Networking &  
Real World Experience!**



**Develop Leadership Skills!**



**Add Board Service Experience  
to your Resume!**

The County of Riverside is currently seeking volunteers to serve on the Behavioral Health Commission, and is searching for motivated individuals who want to make an impact on how mental health services are delivered in the County of Riverside.



For more information, contact:  
Maria Roman  
Behavioral Health Commission Liaison  
(951) 955-7141

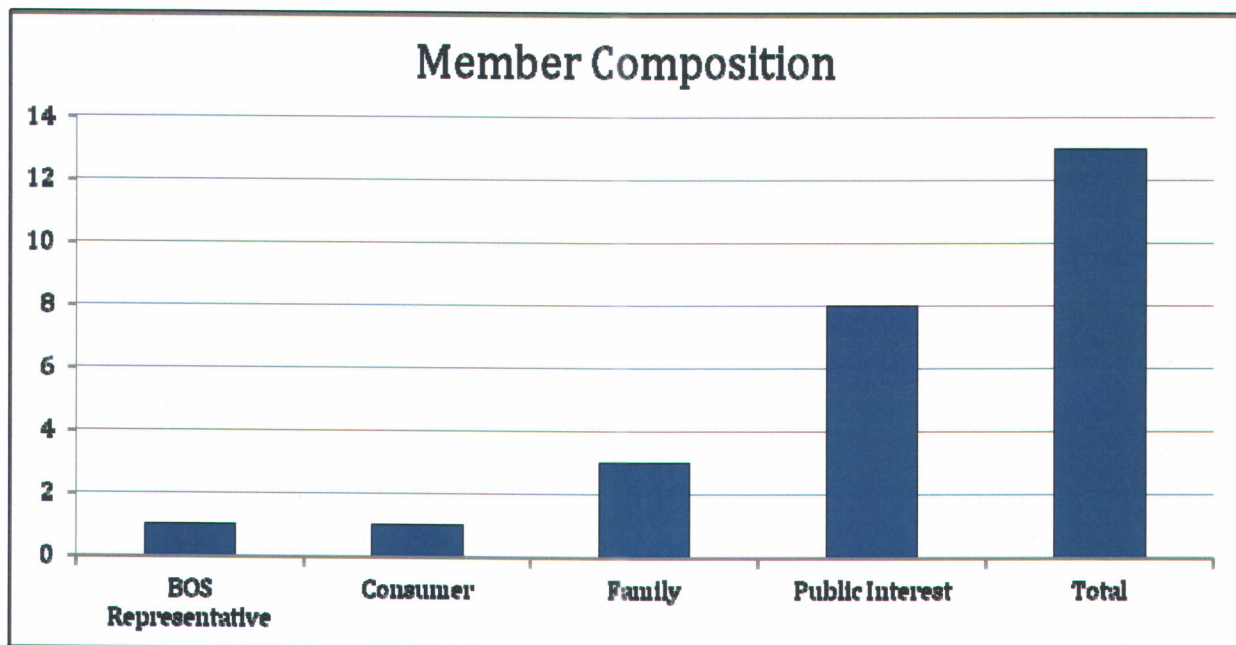
Applications available at: [www.rcdmh.org](http://www.rcdmh.org)



## COMPOSITION OF THE BOARD

The Behavioral Health Commission (BHC) for the County of Riverside shall consist of 15 members appointed by the Board of Supervisors in accordance with Welfare and Institutions Code, Section 5604, as amended by Chapter 1374. An additional member of the BHC 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, spouses, siblings, 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 BHC.

The BHC for the County of Riverside also consists of three Regional Behavioral Health Advisory Boards: Western, Mid-County, and Desert. The purpose of the Regional Behavioral Health Advisory Boards is to serve in an advisory capacity to the Regional Managers and the BHC, 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; 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 BHC 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 1, 3, and parts of 5, and the Desert Regional Board focuses on District 4 and parts of 5.



## 2015 BEHAVIORAL HEALTH COMMISSION ROSTER

### EXECUTIVE COMMITTEE

RICHARD DIVINE, <i>Chair</i> Family Member District 4 - John Benoit Term Expire: 6/30/16	RICK GENTILLALLI, <i>Vice Chair</i> Law Enforcement District 3 - Chuck Washington Term Expire: 6/30/18	JULIE CROUCH, <i>Secretary</i> Family Member District 1 - Kevin Jeffries Term Expire: 6/30/17
GREG DAMEWOOD Family Member District 5 - Marion Ashley Term Expire: 6/30/18	JASON FARIN BOS Representative District 2 - John Tavaglione Term Expire: 6/30/18	BEATRIZ GONZALEZ Education District 4 - John Benoit Term Expire: 6/30/16
WALTER T. HAESSLER, MD Public Interest District 1 - Kevin Jeffries Term Expire: 6/30/16	ERIC KEEN Law Enforcement District 1 - Kevin Jeffries Term Expire: 6/30/16	CAROLE SCHAUDT Public Interest District 4 - John Benoit Term Expire: 6/30/17
GEORGIA SMITH Consumer District 2 - John Tavaglione Term Expire: 6/30/18	VICTORIA ST. JOHNS Education District 4 - John Benoit Term Expire: 6/30/18	JAMES R. STUART Law Enforcement District 4 - John Benoit Term Expire: 6/30/16
DARYL TERRELL Family Member District 5 - Marion Ashley Term Expire: 6/30/16		

## 2015 DESERT REGION BEHAVIORAL HEALTH ADVISORY BOARD ROSTER

RICHARD DIVINE, <i>Chair</i> Family Member District 4 - John Benoit Term Expire: 6/30/16	JANICE L. QUINN, MD, <i>Vice Chair</i> Public Interest District 4 Term Expire: 12.31.15	MARK MILLER, <i>Secretary</i> Public Interest District 4 Term Expire: 12.31.15
JOSEPH A. BUTTS Public Interest District 4 Term Expire: 12/31/16	DENISE DIAMOND Family Member District 4 Term Expire: 12.31.15	MARSHA DREW Consumer District 4 Term Expire: 12.31.16
MAURA FISHER Public Interest District 4 Term Expire: 12.31.16	BONNIE GILGALLON Public Interest District 4 Term Expire: 12.31.15	KATHERINE HEICHEL Public Interest District 4 Term Expire: 12.31.15
SHARON HJERPE <i>Unknown</i> District 4 Term Expire: 12.31.15	JIM JONES Public Interest District 4 Term Expire: 12.31.15	SANDRA J. NEJA Family Member District 4 Term Expire: 12.31.16
FLOYD RHOADES Public Interest District 4 Term Expire: 12.31.15	CAROLE SCHAUDT Public Interest District 4 Term Expire: 12.31.16	

## 2015 MID-COUNTY REGION BEHAVIORAL HEALTH ADVISORY BOARD ROSTER

GLORIA HERNANDEZ, <i>Chair</i> Consumer District 5 Term Expire: 12/31/16	KIMBERLY MCELROY, <i>Vice Chair</i> Public Interest District 3 Term Expire: 12/30/17	GLORIA WILLIAMS, <i>Secretary</i> Consumer District 3 Term Expire: 12/31/18
IAN AMAN Public Interest District 5 Term Expire: 6/30/2018	PEPE DEL RIO Public Interest District 1 Term Expire: 12/31/16	WALTER T. HAESSLER, MD Public Interest District 1 Term Expire: 06/30/16
GLORIA HERNANDEZ Consumer District 5 Term Expire: 12/31/16	GEORGE MIDDLE Public Interest District 1 Term Expire: 12/31/17	

## 2015 WESTERN REGION BEHAVIORAL HEALTH ADVISORY BOARD ROSTER

GREG DAMEWOOD, <i>Chair</i> Family Member District 5 Term Expire: 06/30/2018	RIC RICCARDI, <i>Vice Chair</i> Public Interest District 5 Term Expire: 12/31/17	Secretary Position Currently Vacant
CAROLINE MARTINEZ Consumer District 1 Term Expire: 12/31/17	KATHY MAURO Consumer District 2 Term Expire: 12/31/18	JANE QIU Family Member District 1 Term Expire: 12/31/16

## COMMITTEE REPORTS

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The Behavioral Health Commission has a number of committees that are tasked with assessing programs, their functions, and effectiveness. Members of the BHC are elected as Committee Chairs. Below is a list of BHC committees.

- Adult System of Care Committee
- Children's Committee
- Criminal Justice Committee
- Executive Committee
- Housing Committee
- Legislative Committee
- Older Adults System of Care Committee
- Veterans Committee

An annual summary of each committee's activities, submitted by the Committee Chairs, are included on the following pages.

## ADULT SYSTEM OF CARE COMMITTEE

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### 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."*

### GOALS

*"To provide RCDMH and the BHC with feedback from community stakeholders, consumers, and family members about the mental health needs of adults and their families, to make recommendations about services to best meet the needs of adult consumers and their families, to provide input about policies and advise of necessary changes to existing policies to ensure the delivery of high quality and culturally competent services, to review performance outcomes of mental health programs to determine if they meet the goals of RCDMH, to improve coordination of services to consumers who receive services from multiple agencies and enhance interagency collaboration."*

\*\*\*\*\*

The Adult System of Care (ASOC) Committee remained active and informed this past year. Through several presentations by Bill Brenneman, Mental Health Services Act (MHSA) Administrator, the ASOC Committee reviewed outcomes and provided feedback for the MHSA Three-Year Program and Expenditure Plan, as well as the Annual Plan Update. It is the opinion of the ASOC Committee that all the Department of Mental Health's programs have been meeting their respective goals, and accountability and timeliness are appropriately being met.

In addition, the Committee heard other presentations, including one by Douglas Tavira, Department of Mental Health (DMH) Veteran Services Liaison, regarding Veterans' Affairs in Riverside County and their interface with DMH. The Riverside Transit Authority (RTA) Director of Planning, Rohan Kuruppu, also presented on their 10-Year Transit Network Plan.

A number of DMH Regions and agencies continue to participate in, and attend, ASOC meetings and report on their collaboration with MHSA efforts. These include the three Department Regions; Recovery Innovations, Inc.(RII); Inland Empire Health Plan (IEHP); National Alliance for the Mentally Ill (NAMI), Western, Mt. San Jacinto, and Temecula Valley Chapters; and Art Works.

Despite ongoing recruitment efforts, the Committee continues to experience difficulty meeting the appropriate cultural and gender diversity composition, number of members, and consistent participation from existing members. As a result, recruitment efforts will be ongoing for the coming year.

Georgia Smith, the ASOC Committee Chairperson, and Patricia Carrillo, Vice-Chair, have regularly attended Behavioral Health Commission (BHC) meetings and reported all Committee information and suggestions to the BHC. Elaine Barron, Mental Health Services Administrator and DMH Liaison to the ASOC Committee, communicates information, findings, and suggestions to DMH Administration. This ensures that resolutions and recommendations are provided to both the BHC and DMH, and any necessary follow-up actions are taken, if needed. In turn, feedback is also provided to the ASOC Committee.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

The Committee conducted monthly review of its Mission Statement, in an effort to invigorate membership and implement the Committee's mission. This included discussions regarding roles and responsibilities and goal development. A subcommittee for improving public transportation for persons carrying diagnoses continued its work. Implementing a survey of clients receiving services in clinics across the County regarding their need for public transportation. The results of the survey were conveyed to RTA via attendance by Committee members at three RTA Board of Directors Meetings. The focus of the feedback to RTA centered around inadequate access to the Intensive Treatment Facility (ITF), Emergency Treatment Services (ETS), and other DMH facilities located on County Farm Road and Rustin Ave. The result was greater Departmental interface with the Economic Development Agency (EDA) around the ability to increase public transportation facilities and access in those areas of the city.

In FY14/15, the ASOC Committee actively participated in the following events:

- IEHP Disability Expo on 9/20/14,
- NAMIWALKs fundraiser on 10/25/14;
- Mental Health Awareness in March, 2015;
- Desert Regional Art Show on 5/12/15;
- May is Mental Health Month (MiMHM) Fair at Fairmount Park on 5/21/15;
- First Annual MiMHM Fair in the Mid-County Region on 5/30/15;
- Perris Family Room Creativity Gallery/Family Fiesta on 6/18/15.

In response to questions and comments raised by attendees at Committee meetings, a new subcommittee on "Access" was formed, with the responsibility of looking into an organized methodology for information and referral about the totality of services provided by the Department being accessible at any given portal of entry into any Department services.

Respectfully submitted,

Kathy Mauro, Interim ASOC Chair  
Elaine Barron, LCSW, Mid-County Mental Health Services Administrator



## CHILDREN'S COMMITTEE

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The Mental Health Board Children's Committee is a standing committee of the Riverside County Behavioral Health Commission. The committee is comprised of consumers, parents/caregivers of consumers, as well as public and private sector representation. 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. Mental Health Children's Committee presents important issues to the Mental Health Board as well as involved agencies, encourages increased family/caregiver input, and networks with local community agencies.

Presentations for the past year included:

- September 2014 - Janine Moore, MHSA PEI Manager, spoke on the current Prevention and Early Intervention initiatives as part of the Mental Health Service Act (MHSA). Members in attendance provided feedback.
- October 2014 - John DeVries from Victor Community Support Services presented on a current trend in mental health treatment called "Mindfulness."
- December 2014 - IEHP came with their provider to describe the new benefits for people with a diagnosis of Autism. The treatment is called Applied Behavioral Analysis. The program and referral process were discussed.
- January 2015 - Myriam Aragon, Cultural Competency Manager provided an update on the Cultural Competency Plan for the Department. David Schoelen, Workforce, Education, and Training (WET) Manager, presented on efforts outlined in the MHSA Plan related to staff training.
- February 2015 - Lily Gallegos provided an update on the evidence-based practice called Multidimensional Treatment Foster Care (MDTFC). This practice is being used with children who are dependents of Public Social Services.
- March 2015 - Recovery Innovations presented a fabulous version of "In Our Own Voice" on the strength of recovery and hope. This program is sponsored by NAMI.
- April 2015 - Dr. Sue Balt gave a detailed presentation on the school district Local Control and Accountability Plan (LCAP) and mental health initiatives.
- May 2015 - The Preschool Program presented "Strong Kids", a group to help children with parents who are incarcerated.
- June 2015 - Dwayne George, Supervisor of the Juvenile Justice Programs for mental health, described the new competency protocols for children and also the new IRIS program (grant-funded program for children in the Youth Offender Program).

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

Committee members also participated in several philanthropic activities throughout the year. For the beginning of the school year, members helped mental health clinics with their "Fill a Backpack" drive. Backpacks were filled with the essentials that all children need when returning to school and were given to children who receive mental health services in the County so that they would be able to start the school year with necessary supplies. In total 407 children received backpacks this year. During the Thanksgiving season, 112 food baskets were assembled and members assisted mental health clinics to provide food baskets and/or gift certificates for food purchases to families in need throughout the community. During the Christmas season committee members participated in the annual "Snowflake Banner". Decorative snowflakes, displaying the names and gift wishes of children who receive mental health services in the County, were displayed on the banner. Members selected a snowflake and purchased the gift for the child. In total 1,110 "snowflake" gifts were distributed over the holiday season.

There were also 20 people that were sent to the CMHACY (California Mental Health Advocates for Children and Youth) Conference. This year's conference focused on "Creating Solutions: Integration, Innovation, and Intervention". Among those that attended were parents and children who also presented at two of the conference workshops. The workshops were "Parenting AB 109 Inside and Out" and "It Takes a Village AND a Family - Substance Abuse Treatment with the Juvenile Justice Population by Combining MDFT and Wraparound."

Respectfully submitted,  
Julie Crouch, BHC Children's Committee Chair  
Angela Igrisan, Mental Health Services Administrator

## CRIMINAL JUSTICE COMMITTEE

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### 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 with involved County agencies, the community, the family, and other support systems."*

### GOAL

*"To address housing issues by increasing beds and augmenting Board and Care facilities, to provide Law Enforcement Personnel Training, to promote integration and collaborate with different agencies, to monitor competency programs, and improve safety in jails."*

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### GOALS OF THE CRIMINAL JUSTICE COMMITTEE

1. Housing Issues: Increase Beds and Augment Board and Cares - To monitor and provide feedback regarding housing issues including detox, diversion beds such as short-term transitional residential program, and board and care beds with or without special programs such as dual diagnosis.
2. Training for Law Enforcement Personnel - To monitor training provided to all Riverside County law enforcement and other agencies on crisis intervention. Work toward getting the training to more staff and other Law Enforcement agencies and expanding the training curriculum.
3. Promote Integration and Collaboration with Different Agencies - To work with different agencies in order to promote communication and collaboration.
4. Liberty Healthcare Program - To monitor the current return to competency program administered by Liberty Health and the Sheriff's Department and bring forth any concerns for the benefit of mentally ill inmates.
5. Safety in Jails - To discuss safety issues occurring in the jails involving mentally ill inmates and Detention Mental Health consumers with the goal of providing feedback, identifying trends and issues, and providing information to the appropriate persons with the goal of a safer incarceration period for mentally ill persons.

The Criminal Justice (CJ) Committee currently has a total of twenty-six members and an average of twenty-one members regularly attend meetings. The Committee contains representation from a number of agencies including Mental Health Detention Services, Riverside County Sheriff's Department, Probation Department, Public Defender's Office, National Alliance on Mental Illness (NAMI), Mental Health Peer Support Specialists, Western and Mid-County Mental Health Boards, and Detention Health Services. Consumers and family members also attend CJ Committee meetings. Throughout the past year, the CJ Committee was involved in a variety of activities and had a number of accomplishments.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

Members participated in various events in Riverside County including the Substance Abuse "Recovery Happens" event which occurred on Saturday, September 27, 2014 at Fairmount Park, the American Heart Association's 2014 Heart and Stroke Walk at Jurupa Park, and the May is Mental Health "Live Life Well" event which took place on Thursday, May 22, 2014 also at Fairmount Park. Several Mental Health Court and Detention Services presentations were made to NAMI groups, and Committee members attended various NAMI events and meetings. Many Committee members attended the 2014 NAMI walk at Diamond Valley Lake in Hemet.

Housing Issues - The goal is to increase beds and augment board and care facilities. Individuals with mental illness and/or those with substance use issues who need residential placement are provided housing by the Riverside County Department of Mental Health (RCDMH), as needed. The Department has expanded some housing programs to meet the needs of the AB109 population; additional housing options have recently been under review, and new housing is pending the final approval processes. Individuals are able to receive emergency housing, transitional housing, and short-term rental assistance. Community Service Assistant staff are also providing supports in the residence with food stamp applications, bus passes, emergency food and hygiene packets as well as individual budgeting and menu planning including grocery shopping and food purchases. More than 2,500 days of housing for an expected 150 AB109 participants and homeless on the streets, are projected to be expended in this fiscal year.

Law Enforcement Collaborative - A committee of Mental Health/Riverside County Regional Medical Center professionals was created to continually review, revise, and present training to correctional and patrol employees of the Riverside County Sheriff and Police Departments. The main focus is to train all staff that may come into contact with mental health consumers, including dispatch and other law enforcement agencies throughout California. Currently, County, State, and Federal Police agency representatives have been trained. This training has been well received, and a permanent schedule for the Law Enforcement Personnel Training is in place. Deputy Sheriffs and Police Officers from other counties and agencies have also attended the training. These include Fullerton, Brea, and Orange Counties, the Los Angeles Department of Defense, and Los Angeles Police and Sheriff's Departments. Police and Sheriff Sub-stations from the cities of Moreno Valley, Perris, Palm Desert, Indio, Blythe, Palm Springs, and Desert Hot Springs have also attended. The training includes panel discussions from the Mental Health Family Advocate Program and a presentation from NAMI. Furthermore, the training is certified by the Commission on Peace Officer Standards and Training (POST). Family Advocate representatives actively attended the training in the past and are now part of the Training Committee.

All committee representatives have reported that the Law Enforcement Personnel Training has been beneficial to both the community and to the law enforcement agencies. To date, approximately 1,000 individuals from the Sheriff's Department and 700 others from Police Departments have been trained.

Information System -The Electronic Management of Records (ELMR) Clinical Workstation was launched in July of 2012. Detention Services is a unique program and attempting to adjust to the new information system was difficult. However, over the last two years, the program has adjusted to the new ELMR system, and updates are provided at CJ Committee meeting.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

AB109 - The RCDMH recognizes that many of the individuals incarcerated in our county jails suffer from mental illness and substance-related conditions. We are committed to identify those individuals through comprehensive assessment, which includes investigation and review of individual and family history of mental illness, inpatient and outpatient treatment history, alcohol and other drug history, placement history, criminal history, including incarceration, parole, and probation. To insure that the client's symptoms are being addressed and to encourage adherence with treatment recommendations, in addition to the comprehensive assessment and follow-up by clinical staff, group activities (such as Anger Management, Seeking Safety, and Substance Abuse) are also offered.

In Detention, AB109 individuals are currently housed in the five jails in Riverside County: Robert Presley Detention Center, Southwest Detention Center, Smith Correctional Facility, Indio Jail, and Blythe Jail. Robert Presley Detention Center in Riverside and Smith Correction Facility in Banning both have mental health staff available 24/7. There are currently thirteen AB109 Clinical Therapist positions in Detention Services and Detention Mental Health Services are available at each of the five jails for all AB109 inmates.

Out-of-custody AB109 individuals are receiving outpatient treatment, referrals for placement and housing, which includes detoxification, diversion, short-term transitional residential, board and care, and room and board, through the newly named "New Life" AB109 Clinics. The current "New Life" AB109 Clinics are located in Riverside, Banning, Hemet, Cathedral City, and Blythe.

The AB109 Presentencing Realignment Exit Plan and Recommendation Program was started in May of 2013. This new program helps in the presentencing phase of the AB109 clients. Clients are referred by the court, and they are assessed and a treatment recommendation is given to the court for approval. To date this program has received a total of 106 referrals from the court. Currently there are five Clinical Therapist positions dedicated to this program.

Mental Health Court - Mental Health Court has grown considerably, and there has been an expansion of staff in the Riverside office due to an increase in the number of referrals received from the Riverside County Public Defender and private attorneys. This past year, the program added three Realignment-funded Clinical Therapist positions and two Realignment-funded Behavioral Health Specialist positions to the Riverside Mental Health Court to support a new Realignment (AB109) Presentencing Program. Veterans' Court referrals have also increased and this past year Detention Services has added one Clinical Therapist dedicated to Veterans. Mental Health Court also supports the Misdemeanor Alternative Program (M.A.P.). Updates for MH Court, the new Realignment Presentencing Program, and M.A.P. are given at the CJ Committee Meeting.

Patton State Hospital Waiting List - The average wait time for a Patton State Hospital bed is approximately five weeks. The wait list has decreased from an average of 20 to an average of 18 individuals. The Liberty Healthcare Restoration of Competency (ROC) program that started in October 2013 has allowed clients to receive services upon sentencing, decreasing the wait list or eliminating the need for restoration for those individuals who successfully complete the program. Additionally, Detention Services continues to partner with Long Term Care staff to place consumers at the contracted Institution for Mental Disease (IMD) in Sylmar, CA. The committee is updated on the Patton State Hospital wait list at each committee meeting.

Respectfully submitted,

Greg Damewood, Criminal Justice Committee Chair, and  
Deborah Johnson, Deputy Director, Forensics

## EXECUTIVE COMMITTEE

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During the first 6 months of the 2014/2015 year, the Riverside County Mental Health Board Executive Committee continued to analyze the board meetings, topics, and schedule speakers to answer questions put forth by board members. The agenda for upcoming meetings were set and speakers were invited to inform the Board of their programs and/or services. The Mental Health Department has continued to keep the Board informed of inner workings within the Department plus informed on any budget or legislative matters that might affect the Behavioral Health Commission, Department, and consumers.

In December of 2014, the Riverside County Board of Supervisors joined the Riverside County Mental Health Board and the Riverside County Substance Use Advisory Committee to form the Riverside County Behavioral Health Commission. The first meeting of January 2015, the new Riverside County Behavioral Health Commission met for the first time and the Executive Committee increased from 3 to 6 members. The Executive Officers of both the Board and Committee continued to operate in their assigned capacities until the Commission could form new By-Laws and elections were held. The BHC approved the new By-Laws on July 1, 2015 and was adopted by the Board of Supervisors on August 18, 2015. During the July 2015 meeting, an election was held and the Executive Committee was reduced to three (3) members once again.

The new challenge for the Executive Committee is to make sure that both mental health and substance use programs and issues are treated equally and time is spent on both. Therefore, monthly agendas are consistently set with at least one (1) mental health and two (2) substance use program updates.

During the year, each Commission member is asked to conduct one or more site visits to the various behavioral health clinics and/or programs to review their services and provide feedback and recommendations. The Commission tries to visit each clinic and or program at least once every two years. The reports obtained from these visits give the Commission a brief view into the services offered, staff and education, and problems or issues.

Under Proposition 63 (MHSA), the Commission is mandated to hold Public Hearings on new Innovation Programs and/or Annual Plan Updates. Each Draft Annual Plan Update or Innovation Program must be posted for public review for a minimum of 30 days before a Public Hearing can be held. This year's hearing covered the adoption of the MHSA Annual Plan Update for FY15/16. This was the first Public Hearing to be simultaneously linked with audio/visual equipment to accommodate participation by all three regions. There was a great turnout in all three regions and all comments and recommendations were recorded and incorporated as part of the Plan Update. After the public comments and suggestions were compiled, three members of the Commission reviewed the comments and made recommendations as appropriate.

Riverside County covers a large geographical area and because of its size, three (3) Regional Commission Advisory Boards have been appointed to ensure that those with a mental health diagnosis in Riverside County have local representation and do not have to travel to Riverside to have their information heard or presented. The Regional Advisory Boards are located in the Desert, Mid-County, and Western Regions. As Commission Chair, I would like to thank those members of the Regional Advisory Boards who make the Commission aware of the community's needs by submitting monthly reports from their regions. I take great pride in the programs, services and the quality of information we are provided.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

The creation of the Riverside County Behavioral Health Commission was a major achievement of this Commission during this year and will be an ongoing mission for change and improvement in the future.

Respectfully submitted,

Richard A Divine  
Riverside County Behavioral Health Commission Chair

## HOUSING COMMITTEE

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The goals of the Housing Committee of the Riverside County Behavioral Health Commission (formerly the Riverside County Mental Health Board) are to review program activities; provide direction and input on housing activities and new projects; and direct staff on emergent issues and concerns that impact Riverside County Department of Mental Health (RCDMH) consumers. The Housing Committee members also serve as key stakeholders in reviewing MHSAs housing development projects

Due to lack of active members and difficulty with recruitment, the Housing Committee no longer holds regularly scheduled monthly meetings. The Behavioral Health Commission is actively recruiting additional members to participate on this important Standing Committee and return to a monthly meeting schedule.

### OVERVIEW

The Mental Health Services Act (MHSAs) provides funding specifically for the development of permanent supportive housing for people that are homeless or at risk of homelessness and also have a chronic, persistent, and disabling mental health condition. RCDMH has implemented a balanced county-wide strategy to ensure that housing opportunities for this population are provided across its three service delivery regions and that the housing opportunities address the specific housing needs of adults, older adults, and transition age youth (TAY).

### SAFEHAVEN FACILITIES

RCDMH continues to operate two Safehaven facilities, **The Place** and **The Path**, which follow a low-demand, drop-in model for providing homeless outreach and permanent supportive housing to homeless individuals with serious mental health conditions. Both facilities are operated using a nonprofit provider, Recovery Innovations, whose program model emphasizes peer-to-peer engagement and support. Recovery Innovations operates both facilities under the contract with RCDMH and both continue to operate at or near full capacity. Those seeking permanent housing at either location must have a diagnosed mental illness and be considered chronically homeless. Ninety-nine percent of provider staff has received mental health services themselves and many have also experienced prolonged periods of homelessness.

The Place, located in Riverside, was opened in 2007 and provides permanent housing for 25 adults, along with supportive services, laundry and shower facilities, meals, referrals, and fellowship for drop-in center guests. The drop-in center operates 27/7/365 and serves as a portal of entry for hard to engage homeless individuals with a serious mental health disorder.

The Path located in Palm Springs, was opened in 2009, and provides permanent supportive housing for 25 adults on the campus of Roy's Resource Center. It is located immediately adjacent to a Full Service Partnership clinic that is operated by RCDMH. Nearly 89% of the individuals who have resided in The Path maintain stable housing for one year or longer.

The Path and The Place are partially funded by HUD permanent supportive housing grants. The RCDMH HUD grants have successfully been renewed in order to support these programs through FY16/17. The success of The Path and The Place, together with the prominent role they play in the continuum of housing for RCDMH consumers, positions these programs for continued success as a valuable contact point for homeless individuals with severe mental illness.



### TEMPORARY HOUSING

During FY14/15, MHSa funding for temporary emergency housing was continued. These funds were combined with other grant funds (Emergency Housing and Shelter Grant) in order to provide access to emergency motel housing or rental assistance. Using MHSa funding, the staff of the Homeless Housing Partnerships and Education (HHOPE) program at RCDMH provided a total of 19,182 emergency bed nights to 982 individuals or families with children across all age groups during FY13/14. The requests for this type of assistance have increased significantly during FY14/15.

Beginning in July 2014, the HHOPE Program established Housing Crisis Response Teams to develop and implement innovative strategies for targeting homeless individuals in crisis. This effort surfaced through an ongoing review of the continuum of services and housing supports provided by the HHOPE Program, which identified the need to consolidate the regionally based street outreach teams that were spread across the County. The goal of this effort is to have all four existing teams under one program for a more unified approach for reaching individuals living on the streets and quickly linking them to services and housing.

There are five key domains of the Housing Crisis Response approach:

1. Housing Crisis Initial Response
2. Street Outreach Engagement
3. Housing Crisis "Plan" Development
4. Housing Crisis Plan Support
5. Housing Crisis Community Response

The Housing Crisis Response approach was adopted specifically in response to an emergent need to more rapidly engage a homeless person that is in crisis and address the components of the crisis simultaneous with addressing that person's housing needs. Preliminary results of implementing this approach have been positive and reinforce continuing this as one of many housing interventions.

### PERMANENT HOUSING

The MHSa permanent supportive housing program continued to advance its efforts during FY14/15. The Perris Family Apartments began construction in FY13/14. Consistent with the service delivery model of all other MHSa funded RCDMH; it will include 15 integrated supportive housing units within the 75 unit complex. The community will include a full-time onsite support staff member who will have an on-site private dedicated office. This multi-family affordable housing project is located in the City of Perris. The project is scheduled for occupancy in the late summer of 2015.

With the completion of the Perris Family Apartments, RCDMH will have committed and expended all available MHSa housing development funds held in trust by the California Housing Finance Agency (CalHFA). RCDMH will continue to support affordable housing development and development projects as funding becomes available, and will continue providing strong advocacy for special needs housing for very low-income residents, particularly those who are homeless or at risk of homelessness and have severe and persistent mental illness. Existing units of MHSa permanent supportive housing will remain available to eligible residents for a minimum period of 20 years from the date of initial occupancy.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

RCDMH leveraged more than \$19 million in MHSA funds for permanent supportive housing to support the development efforts associated with the creation and planning of more than 850 units of affordable housing throughout Riverside County. Integrated within each MHSA-funded project were 15 units of permanent supportive housing scattered throughout the apartment community. The affordable housing communities that received MHSA funding from the RCDMH for permanent supportive housing are identified below.

MHSA FUNDED PERMANENT SUPPORTIVE HOUSING

REGION	PROJECT NAME & POPULATION SERVED	NUMBER OF AFFORDABLE UNITS IN THE COMMUNITY	NUMBER OF MHSA UNITS EMBEDDED IN THE COMMUNITY
Desert	LEGACY All consumers	80	15
Desert	VERBANA CROSSING All consumers	96	15
Mid-County	PERRIS FAMILY APARTMENTS All consumers <i>(under construction)</i>	75	15
Mid-County	THE VINEYARDS AT MENIFEE Older Adults	80	15
Western	CEDAR GLEN All consumers	Phase 1 – 78 <i>(open)</i> Phase 2 – 75 <i>(in planning)</i>	15
Western	RANCHO DORADO All consumers	Phase 1 – 70 Phase 2 – 75	15
Western	VINTAGE AT SNOWBERRY Older Adults	224	15
TOTAL <i>(including those in planning and under construction)</i>		853	105

The MHSA units within each of these communities operate at near 100% occupancy and experience very little turnover. There continues to be a waiting list of more than 100 eligible consumers for housing of this kind.

SCATTER SITE HOUSING

In addition to providing support to MHSA residents in these communities, the Homeless Housing Opportunities, Partnership & Education (HHOPE) Housing Resource Specialist position is funded through MHSA and provides ongoing support to scattered site housing managers and residents. During FY13/14, the staff of the HHOPE Program provided property management and resident supportive services to consumers residing in 168 HUD-funded supportive housing apartments across Riverside County.

LOOKING AHEAD TO FY15/16

The elimination of Redevelopment Agencies statewide over the past several years; has withdrawn a source of funding that has traditionally been a powerful driver for the creation of new units of low-income and special needs housing. Affordable housing communities provide a natural setting and partnership for the development and co-location of MHSA supportive housing units within those communities. Although current conditions in the financial markets and the development community are generally favorable for expanded activity in low-income and special needs housing, there is a large gap in funding for new MHSA permanent supportive housing that severely constrains the capacity of RCDMH to expand this much needed program.

RCDMH is working closely with the Riverside County HUD Continuum of Care and various Veteran Service Partners to explore the possibility of establishing a partnership, if feasible, to apply for funds that are available through Proposition 41 (the California Veterans Housing and Homeless Prevention Bond Act), which was approved in June 2014. This effort, if successful, would provide supportive housing units for veterans as part of Phase 2 of Cedar Glen in Riverside.

There are over 100 MHSA-eligible consumers who are on a waiting list for permanent supportive housing in Riverside County. Permanent supportive housing for people with mental illness is an integral part of the solution to homelessness in Riverside County and is a cornerstone of our consumers' long term wellness and recovery. There are ongoing efforts to collaborate and join with developers and community partners to capture any funding opportunity that will support the production of affordable housing which includes units of permanent supportive housing for MHSA-eligible consumers. The need for permanent supportive housing for homeless and at-risk of homeless individuals with severe and persistent mental illness continues to far outpace the supply in Riverside County.

Respectfully submitted,

Jesse Weller,  
Deputy Director of Housing

## LEGISLATIVE COMMITTEE

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### MISSION STATEMENT

*"To bring the Behavioral Health Commission abreast of all pertinent issues or topics currently being discussed in State and Federal Government Legislation."*

### GOALS

*"To keep the Behavioral Health Commission informed of legislative activities whether Federal, State, or County."*

*"To advocate for legislation that would be beneficial to our clients."*

\*\*\*\*\*

The main goal of the Legislative Committee is to inform the Behavioral Health Commission of current proposed legislation and make recommendations as to the position the Riverside County Behavioral Health Commission should consider and/or support on these issues. It is imperative that the Legislative Committee reports on legislation under review as early as possible so the Commission is in the best position to advocate for our consumers.

Although the Legislative Committee does not hold regular scheduled meetings, all members of the Commission are asked to keep track of current legislation and issues that might affect behavioral health funding or services.

The Legislative Committee is actively recruiting additional members to monitor proposed legislation that might affect the Department's ability to deliver services to the clients of Riverside County. It is the Committee's intent to be vigilant and advise the Commission of any changes to laws which might affect existing programs, budgets, or clinics.

Respectfully submitted,

Richard A Divine,  
Legislative Committee Chair

## OLDER ADULT SYSTEM OF CARE COMMITTEE

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### VISION

*"Our vision is to value self-determination and independence of our older adult and culturally diverse consumers. We value the pursuit of quality of life."*

### MISSION STATEMENT

*"Our mission is 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 by maintaining a physically and emotionally healthy lifestyle so 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.*

### GOALS

*Reduce stigma and increase utilization of services through education and awareness.  
Support the mission of RCDMH to provide high quality care to residents of Western Region.*

\*\*\*\*\*

The Older Adult System of Care (OASOC) Committee meets on a monthly basis with Board and Care operators, local agencies, consumers, and staff to increase understanding, educate, and inform members of available services, to share common concerns, and to advocate and promote quality services for all consumers.

Guest speakers from different agencies give a 30-40 minute presentation on their area of expertise. Speakers from the Family Advocate staff, to the Deputy Director of Housing, and other partnering agencies, provide consumers, staff and others education and awareness in an effort to improve the quality of life for older adults.

Staff in all regions participate in and promotes local events and health fairs to increase awareness of services and reduce stigma, including the *Flying Doctors* and the *Live Life Well* health fair.

### BOARD AND CARE COMMITTEE

In the last fiscal year, semi-annual meetings with Board and Care operators for the elderly have continued. The Committee was created to improve the relationship between operators and consumers, to support and improve care of consumers and to meet licensing requirements. Meetings are held at MH Administration and are well attended by operators and Case Managers who visit consumers on a regular basis.

An integral part of the Board and Care meeting is a guest speaker. Speakers have included the Ombudsman, Riverside Police, and Supervisor for American Medical Response (AMR), representatives from Public Guardian and Riverside Payee Offices. Attendances has grown, with staff and Board and Care operators and consumers stating that it has improved relationships as well as care of consumers.

PETS ASSISTING IN RECOVERY PROGRAM (P.A.I.R.)

The Older Adults program is utilizing the PAIR program for individual therapy and groups.

EVIDENCE-BASED PRACTICES AND OTHER GROUPS

Over the past year, both SMART and Wellness and Recovery have increased their number of evidence-based groups. Bridges and Recovery Management Groups today include:

- WRAP (Wellness Recovery Action Plan) run by Peers
- Grief and Loss Group
- Psychotherapy Group
- Bridges [Life skills and recovery management, run by an Clinical Therapist (CT) and Behavioral Health Specialist (BHS)]
- Recovery Management (Life Skills, run by CT and BHS)
- Innovations HeLP (Healthy Living Partnership)
- Co-Occurring Disorder group (for consumers diagnosed with major mental illness and substance abuse issues)
- CBT group for Depression [Cognitive Behavior Therapy-using the Beck Depression Inventory (BDI) to measure effectiveness]
- Exercise Group [Peer Support Specialists (PSS) and BHS take consumers to a swimming program, instituting Patient Health Questionnaire (PHQ 9) to measure effectiveness]
- Quarterly Family Conferences: significant others are invited to come together for support, mental health education and referral to resources
- Dialectical Behavior Therapy (DBT)

Respectfully submitted,

Ric Riccardi,  
Older Adults System of Care Chair  
Tony Ortego, Mental Health Administrator

## VETERANS COMMITTEE

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### VISION

*"We look forward to a day when a grateful nation will fully recognize and meet the needs of its Veterans."*

### MISSION STATEMENT

*To advise and foster a collaboration of veterans' families' and mental health support organizations to address and alleviate the mental health needs of veterans and their families, as well as recommend and propose related services.*

### GOALS

*To create and launch an intake form and referral process for veterans. To participate in the interviewing and hiring process of the new Veterans Services Liaison position. To monitor and assure all veterans requesting Riverside County Department of Mental Health services receive those services per department policy.*

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The Veterans Committee held regular meetings and participated and/or supported a number of events during the past year, some of which are highlighted below.

One of the Departmental changes that took place in July 2014, was the Veterans Services Liaison, Douglas Tavira, was promoted to a Clinical Therapist position with the Long Term Care Program. This position was temporarily filled with a Volunteer Veterans Services Liaison until April 2015. The Department is recruiting for a Clinical Therapist to fill the Veterans Services Liaison position with the goal of hiring a veteran who understands the vet culture.

In September 2014, the Department of Mental Health agreed to collaborate with the Department of Veterans Services to fund a Resource Guide for Veterans of Riverside County. This guide was printed and Riverside County Department of Mental Health received copies for distribution to clinics and interested parties. The guide easily fits into a pocket for easy access to the numerous resources available throughout Riverside County.

The Department of Mental Health participated in the 5<sup>th</sup> Annual 2014 Veterans Expo, sponsored by Veterans Easy Access Program (VEAP). It was held October 11, 2014 at the Riverside County Fair Grounds in Indio. The Expo provided an opportunity for all veterans to learn more about their benefits and services available. It also gave the VEAP Alliance a fitting platform to recognize the sacrifices our military personnel, both active and those who served in the past, have made for us all.

US VETS – Inland Empire hosted Riverside County's First Annual Veterans Stand Down, in conjunction with the Veterans Assistance Leadership of Riverside County (VALOR). The Veterans Committee was part of the Planning Committee, participated in the event, and provided resource materials. The event was held on October 17, 2014, at the Perris Fairgrounds. The event brought comprehensive services to homeless and at-risk veterans under one roof. The goal of the Stand Down was to connect veterans with vital resources and formulate a strategy that would ensure all veterans who wish to help themselves receive the services they need. Services included housing, employment, medical and dental care, clothing, hot meals, benefits, resources, haircuts and showers, and much more. Veterans Committee member Douglas Tavira was on the Valor Health Care Subcommittee and through his efforts the US Army Reserves provided cots, tents, shower units, etc. for the event.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

The Veterans Committee participated in Riverside County's 2015 Point-in-Time (PIT) count of Homeless Veterans on January 28, 2015. Included was a Subpopulation Survey of sheltered and unsheltered individuals, which consists of questions from the County's Homeless Management Information System (HMIS) that identify the eight subpopulations that HUD requires communities to identify. They are:

- 1) Chronically homeless persons;
- 2) Chronically homeless families;
- 3) Persons with severe mental illness;
- 4) Chronic substance abusers;
- 5) Veterans;
- 6) Persons with HIV/AIDS;
- 7) Victims of domestic violence; and
- 8) Unaccompanied youth under age 18.

This PIT Count will enable the VA, US Department of Housing and Urban Development (HUD), and the County of Riverside to assess the current size and characteristics of our homeless veteran population in order to seek the additional resources needed to achieve the goal of preventing and ending homelessness among veterans in Riverside County by the end of 2015.

The Veterans Committee not only participated as an exhibitor but also helped in the preparation of "May is Mental Health Month." This is a yearly "Live Life Well" Mental Health Fair that draws a crowd of well over 700 community members each year. It has enjoyed increasing success and visibility over the past several years due to the creativity and dedication of Department of Mental Health employees, volunteers, and exhibitors. The event which was held at Fairmount Park in Riverside on Thursday, May 21, 2015 offered free health screening, children's activities, community information booths, and free food and entertainment.

The Veterans Committee continues to collaborate with the Veterans Court. The mission of the Riverside County Veterans Court is to provide an inter-agency, collaborative treatment strategy for Veterans in the criminal justice system who suffers from Post-Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), psychological issues, sexual trauma, mental health, or substance abuse problems.

The Veterans Committee is currently working on an intake form and referral process. This form would be used between Riverside County Department of Mental Health (Veterans Services Liaison) and the Department of Veterans Services (VA). This referral form, with all the necessary information, would be used to expedite services at the VA and within Riverside County Department of Mental Health. At the present time the referral form is being evaluated and updated.

Respectfully submitted,

David Schoelen,  
Mental Health Services Administrator/  
Workforce Education and Training (WET) Coordinator  
Dr. Walter T. Haessler,  
Veterans Committee Chair



## REGIONAL BEHAVIORAL HEALTH ADVISORY BOARDS

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### DESERT REGIONAL BOARD

*Richard Divine, Desert Region Board Chair*

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### MID-COUNTY REGIONAL BOARD

*Gloria Hernandez, Mid-County Region Board Chair*

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### WESTERN REGIONAL BOARD

*Greg Damewood, Western Region Board Chair*



## DESERT REGIONAL BEHAVIORAL HEALTH ADVISORY BOARD

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RICHARD DIVINE  
Desert Regional Board Chair

JAMES GRISHAM  
Desert Region Mental Health Services Administrator

### MISSION STATEMENT AND GOALS

*"To continue to build upon the success of the "May is Mental Health Month" Creative Writing and Art Show, establish full Board capacity and make sure recruited board members represent the populace of the Desert Region, make the community aware of the services offered in the Desert Region, ensure that these programs meet the community's needs, and educate the public about and reduce the stigma attached to mental illness."*

\*\*\*\*\*

The Desert Regional Board (DRB) is one of three Regional Boards located throughout Riverside County. Because the County of Riverside is such a large geographical area, the Mental Health Board established three Regional Boards to act a liaison between the citizens of each region and the main Mental Health Board. The Desert Region covers from Calimesa, through Banning and Beaumont, the Coachella Valley and Blythe.

Membership of the Desert Board has stayed constant, with a few members leaving and replacements quickly brought on board. This is a very active board, with members from all walks of life. The Board is striving to establish a more culturally diverse membership and is supporting outreach to various communities and organizations.

During the months of April and May, the DRB members attended various city council meetings to accept "May is Mental Health Month" proclamations. Most city councils have afforded time for the Board member to discuss mental illness with the goal to reduce stigma and inform the audience of the various programs and services the Mental Health Department provides.

"May is Mental Health Month" is celebrated across the Country and certainly throughout the Desert Region. The DRB has chosen to sponsor a Creative Writing and Art Show; and in 2014 celebrated the 12<sup>th</sup> year for this event. For the first time, the Art Show was hosted by the Coachella Valley Rescue Mission with over 150 pieces of art and over 250 attendees. Special thanks go out to the Mission and its staff, Dr. Janice Quinn, Mark Miller, and Regional Director Jim Grisham for their continuing efforts in making this show a huge success. In attendance this year were local mayors and city council members.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

The Board members pride themselves in attending many community meetings and functions to keep up with what is happening in the Desert Region and in turn we have begun to have more citizens attend our meetings. This Board believes it is very important to open dialogues with many community boards and service organizations to truly keep informed about what is happening in our region.

The Desert Regional Board wishes to thank the Riverside County Mental Health Department, especially the regional staff, for the quality and range of services provided to the Desert Region community.

Respectfully submitted,  
Richard Divine, Desert Regional Board Chair and  
James Grisham, Desert Region Mental Health Services Administrator

## MID-COUNTY REGIONAL BEHAVIORAL HEALTH ADVISORY BOARD

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KIM MCELROY  
Mid-County Regional Board Vice-Chair

ELAINE BARRON  
Mid-County Region Mental Health Services Administrator

### MISSION STATEMENT

*"To support the Behavioral Health Commission's mission with our input, voice, advocacy, and promotion of quality services for the culturally diverse communities of the Mid-County Region."*

### GOALS

*"To reduce stigma and increase utilization of services through education and awareness, to support the mission of Riverside County Department of Mental Health to provide recovery-oriented services to empower members of the Mid-County Region to achieve greater independence, to advise the Mid-County Region and the Behavioral Health Commission, and to promote Board membership."*

\*\*\*\*\*

Throughout the past year, the Mid-County Regional Board (McRB) has been active through monthly board meetings and numerous activities. The Board holds meetings each month at various clinics and mental health programs throughout the Region to enhance members' understanding of the locations and services in the various communities within the Mid-County Region. McRB members also participated on committees of the Behavioral Health Commission (BHC), including the Criminal Justice, Adult System of Care, Legislative, Veterans, and Children's subcommittees and attended monthly meetings.

McRB members also participated in the very successful, First Annual May is Mental Health Month (MiMHM)—Mid-County "Live Life Well" event, sponsored by the McRB and Seams of Gold which was held on Saturday, May 30, 2015, at Foss Field Park and the Perris City Council Chambers. Two Board members co-chaired the event. Board members also attended various city council meetings during the months of April and May, 2015, to accept proclamations from various cities, including Canyon Lake, Hemet, Lake Elsinore, Menifee, Murrieta, Perris, San Jacinto, Temecula, and Wildomar. These proclamations were displayed to the community at the MiMHM "Live Life Well" event in Riverside, at Fairmont Park, on May 21, 2015. In addition, one McRB member sponsored a booth at Canyon Lake's "Fiesta Days" event, for Recovery Innovations, Inc., where stigma reduction literature and other mental health resource information was distributed.

McRB members were also active during the holiday season and provided gift card donations for several holiday projects sponsored by the Department's Parent Support and Training Program. Once collected, these donations were presented to consumers of the Hemet Adult Clinic, the Lake Elsinore Family Room, the Perris Family Room, and the Temecula Adult Clinic.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

Each month, a McRB representative is present at the BHC meetings, to obtain information and to provide Mid-County information. The Board also reviewed and provided feedback for the Department's Mental Health Services Act Annual Plan Update.

Throughout the year, the Board participated in the following community events:

- National Alliance on Mental Illness (NAMI) Walks fundraiser, held on October 25, 2014, at Diamond Valley Lake in Hemet;
- Mt. San Jacinto NAMI Annual Christmas Party;
- Diocese of Riverside and San Bernardino Spirituality and Mental Health: A Call to Awareness, Assessment, and Advocacy conference; and
- Art Works Film Festival in Temecula.

The Chairperson also attended the California NAMI Conference in Anaheim.

The McRB also became informed about numerous mental health-related topics and heard presentations, from the Hemet Adult Clinic (and, specifically, the Chronic Pain Management Program), the Lake Elsinore Family Mental Health Program, the Cultural Competence/Reducing Disparities Program, Victor Community Support Services, the Temecula Adult Clinic (including the Dialectical Behavior Therapy Program), the Lake Elsinore Family Room, and Seams of Gold, The Mid-County Multidimensional Family Therapy (MDFT) Program, the Perris Family Room, Recovery Innovations, Inc., and ANKA Full Service Partnership (FSP). There were also lively discussions about the pros and cons of Laura's Law.

The McRB members completed a number of site reviews, including at the Hemet Adult Clinic, the Lake Elsinore and San Jacinto Older Adults Programs, and ANKA Full Service Partnership.

Board membership increased this year, with the additions of Pepe del Rio, Kim McElroy (now Vice-Chair), Gloria Williams (now Secretary), and Ian Aman.

Respectfully submitted,

Kim McElroy, Mid-County Board Vice-Chair  
Elaine Barron, LCSW, Mid-County Mental Health Services Administrator

## WESTERN REGIONAL BEHAVIORAL HEALTH ADVISORY BOARD

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GREG DAMEWOOD  
Western Regional Board Chair

VICKI REDDING AND PAUL THOMPSON  
Western Region Mental Health Services Administrators

### MISSION STATEMENT

*"To support the Behavioral Health Commission's mission with our input, voice, advocacy, and promotion of quality services for the culturally diverse communities of Western Region."*

### GOALS

*"To reduce stigma and increase utilization of services through education and awareness, and to support the Mission of Riverside County Department of Mental Health to provide high quality care to residents of Western Region."*

\*\*\*\*\*

The Western Regional Board (WRB) members participated in the National Alliance on Mental Illness (NAMI) Walk and in a number of other community activities throughout the year. Ms. Patricia Carrillo was the main member to support the Walk in November 2014, and is appreciated for her service. As a Board, we supported the event by fund-raising, walking, and volunteering on the day of the event.

Board members also volunteered at the Local Elks Lodge serving Holiday meals to seniors, and participated in the May Is Mental Health Month "Live Life Well" event at Fairmont Park. Members also attended training on elder abuse prevention as hosted by the County of Riverside.

The WRB insures that the Regional Board's perspective and concerns are presented by participation in various department committees. Participants report back to the WRB to keep members current as to activities within the various committees. The Administrators of the County in attendance have been very supportive of the Board. We have had a year that has been a year of reconstruction as the Mental Health Board is now the Behavioral Health Commission leading to new members and structure.

WRB members conducted site visits to better understand Western Region program services and needs. Members were assigned site visits to complete, prepare reports on their findings, present suggestions, and submit them to the main MHB. Site visits completed by WRB members included at least 1-2 sites per member.

DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

The Western Region Board unfortunately experienced the passing of two members: Mr. Keith Oddson and Ms. Patricia Carrillo, during this past year. Another long-time member left the Board due to job duties. The main attention now must be on increasing membership. The Board has obtained one new member that is greatly contributing and we foresee several other members in the coming months. As a Board, we continue to enjoy and appreciate participation in our duties.

Respectfully submitted,

Greg Damewood, Western Regional Board Chair  
Vicki Redding & Paul Thompson,  
Western Region Mental Health Services (MHS) Administrators

## SITE REVIEWS

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*The goal of the Behavioral Health Commission and its regional advisory boards is to visit all service locations within a two year time period to assess the community's mental health needs, to evaluate the extent to which these needs are being met, and to make any necessary recommendations in regard to policy and procedural matters.*

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### **DESERT**

Site Name & Address: Indio Mental Health Clinic - Adults  
Recovery Learning Center (RLC)  
47-825 Oasis Street  
Indio, CA 92201  
(760) 863-8455

Completed by: Mark Miller

Date Completed: April 10, 2015

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Site Name & Address: Indio Multi-Dimensional Family Therapy (MDFT)  
47-825 Oasis Street  
Indio, CA 92201  
(760) 863-8455

Completed by: Mark Miller

Date Completed: October 24, 2014

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Site Name & Address: Milestones Adult Residential Board & Care Facility  
82485 Miles Avenue  
Indio, CA 92201  
(760) 347-4347

Completed by: Sandra Neja

Date Completed: March 5, 2015

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Site Name & Address: Oasis Rehabilitation Center/ Harmony Center  
81-840 Avenue 46, Suite 106-107  
Indio, CA 92201  
(760) 238-5980

Completed by: Jim Jones

Date Completed: September 3, 2014



**MID-COUNTY**

Site Name & Address: ANKA – Full Service Partnership Program (FSP)  
102 West Main Street  
San Jacinto, CA 92583  
(951) 487-8883

Completed by: Gloria Williams

Date Completed: March 9, 2015

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Site Name & Address: CALWORKS/ GAIN  
23119 Cottonwood Avenue, Bldg. B  
Moreno Valley, CA 92553  
(951) 413-5500

Completed by: Chris Halliday

Date Completed: September 3, 2014

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Site Name & Address: Mission Trail Wellness & Recovery Clinic for Mature Adults  
31760 Casino Drive, Suite 100  
Lake Elsinore, CA 92530  
(951) 471-4600

Completed by: George Middle

Date Completed: November 26, 2014

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Site Name/ Address: San Jacinto Wellness & Recovery Clinic for Mature Adults  
1370 S. State Street, Suite B  
San Jacinto, CA 92583  
(951) 791-3596

Completed by: Kimberly McElroy

Date Completed: November 21, 2014

**WESTERN**

Site Name/ Address: The Journey  
Transitional Age Youth (TAY) Full Service Partnership Program  
771 Blaine Street, Suite D  
Riverside, CA 92507  
(951)328-2283

Completed by: Kathy Mauro

Date Completed: March 26, 2015

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Site Name & Address: Homeless Housing Partnership & Education (HHOPE)  
1405 Spruce Street  
Riverside, CA 92507  
(951) 715-5050

Completed by: Ric Riccardi

Date Completed: August 6, 2014

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Site Name & Address: Long Term Care (LTC) Placement  
3625 14<sup>th</sup> Street  
Riverside, CA 92501  
(951) 955-1554

Completed by: Kathy Mauro

Date Completed: March 25, 2015

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Site Name & Address: The Public Guardian  
3625 14<sup>th</sup> Street  
Riverside, CA 92507  
(951) 955-1640

Completed by: Greg Damewood

Date Completed: April 1, 2015

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Site Name & Address: Riverside County Regional Medical Center  
Emergency Treatment Service (ETS)/Crisis Services  
9990 County Farm Road  
Riverside, CA 92503  
(951) 358-4700

Completed by: Christina Torres

Date Completed: July 31, 2014

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DEPARTMENT OF MENTAL HEALTH  
BEHAVIORAL HEALTH COMMISSION

Site Name & Address: Riverside County Regional Medical Center  
Inpatient Treatment Facility (ITF)  
9990 County Farm Road  
(951)358-4700

Completed by: Christina Torres

Date Completed: July 31, 2014

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Site Name & Address: Robert Presley Detention Center – Jail Services  
4000 Orange Street  
Riverside, CA 92501  
(951) 955-4545

Completed by: Opal Hellweg

Date Completed: September 16, 2014