



Health, Housing & Community Services  
Mental Health Commission

To: Mental Health Commissioners  
From: Jamie Works-Wright, Commission Secretary  
Date: February 23, 2024

**Documents Pertaining to 2/29/24 Agenda items:**

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Health, Housing & Community  
Service Department  
Mental Health Commission

## **Berkeley/ Albany Mental Health Commission**

### **AGENDA**

#### **Special Meeting Thursday, February 29, 2024**

**Time: 7:00 p.m. - 9:00 p.m.**

**Location: North Berkeley Senior Center  
1901 Hearst Ave. Berkeley, Poppy Room**

- 1. Roll Call (1 min)**
- 2. Preliminary Matters (5 min)**
  - a. Action Item: Approval of the February 29, 2024 Special Meeting agenda
  - b. Public Comment (non-agenda items)
  - c. Action Item: Approval of the January 25, 2024 minutes
- 3. Mental Health Manager's Report and Caseload Statistics – provided by Jeff Buell (10 min)**
  - a. MHC Manager Report February
  - b. Caseload Statistic February 2024
- 4. Discussion of Elections Process for Chair and Vice Chair**
- 5. Elections for Chair - beginning March 2024**
- 6. Elections for Vice Chair – beginning March 2024**
- 7. Revisit, review and vote on formal request to make the Commission meetings hybrid– Glenn Turner (10 min)**
- 8. Subcommittee Reports (20 min)**
  - a. Youth Subcommittee
  - b. Membership Subcommittee
  - c. Evaluation Subcommittee –
    - i. **Redo vote for Annual Report – Review, discuss, and make modifications to the Annual Report 2022-2023; and then propose adoption by the Mental Health Commission; and then submission to the Berkeley City Council.**
- 9. Adjournment**



**Health, Housing & Community  
Service Department  
Mental Health Commission**

Communications to Berkeley boards, commissions or committees are public record and will become part of the City's electronic records, which are accessible through the City's website. **Please note: Email addresses, names, addresses, and other contact information are not required, but if included in any communication to a City board, commission or committee, will become part of the public record.** If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service or in person to the secretary of the relevant board, commission or committee. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the secretary to the relevant board, commission or committee for further information. The Health, Housing and Community Services Department does not take a position as to the content.

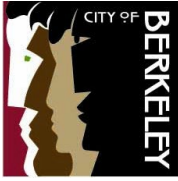
Contact person: Jamie Works-Wright, Mental Health Commission Secretary (510) 981-7721 or [Jworks-wright@berkeleyca.gov](mailto:Jworks-wright@berkeleyca.gov)



*Communication Access Information: This meeting is being held in a wheelchair accessible location. To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the Disability Services specialist at 981-6418 (V) or 981-6347 (TDD) at least three business days before the meeting date. **Please refrain from wearing scented products to this meeting. Attendees at trainings are reminded that other attendees may be sensitive to various scents, whether natural or manufactured, in products and materials. Please help the City respect these needs. Thank you.***

**SB 343 Disclaimer**

*Any writings or documents provided to a majority of the Commission regarding any item on this agenda will be made available for public inspection in the SB 343 Communications Binder located at the Adult Clinic at 2640 MLK Jr. Way, Berkeley, CA 9470*



Department of Health,  
Housing & Community Services  
Mental Health Commission

## Berkeley/Albany Mental Health Commission Draft Minutes

7:00 pm  
North Berkeley SC 1901 Hearst

Regular Meeting  
January 25, 2024

**Members of the Public Present:** Alice Feller, Paul Kealoha-Blake, Genevieve Wilson, Shirley Posey, Ahoora (Farzaneh) Izadi, Ann Hawkins, Patricia Fontana, Moni Law, Margaret Fine

**Staff Present:** Jeff Buell, Katie Hawn, Sasha Gayle-Schneider, Jamie Works-Wright

### 1) Call to Order at 7:06 pm

Commissioners Present: Monica Jones, Edward Opton, Mary Lee Kimber-Smith, Glenn Turner **Absent:** Kate Harrison, Andrea Prichett

### 2) Preliminary Matters

#### a) Approval of the January 25, 2024 agenda

M/S/C (Kimber- Smith, Opton) Make a motion to approve the agenda

**PASSED**

**Ayes:** Jones, Opton, Kimber-Smith, Turner **Noes:** None; **Abstentions:** None; **Absent:** Harrison, Prichett

#### b) Public Comment- 3 public comment

#### c) Approval of the October 19, 2023 Minutes

M/S/C (Opton, Jones) Move that we approve the minutes.

**PASSED**

**Ayes:** Jones, Opton, Kimber-Smith, Turner **Noes:** None; **Abstentions:** None; **Absent:** Harrison, Prichett

### 3) SCU and updates- Provided by Lisa Warhuus, read by Katie Hawn

No Motion Made

### 4) Cares First, Jails Last Update – Sasha Gayle-Schneider

No Motion Made

**5) Proposal for Early Intervention in Psychosis Programs provided by Alice Feller – Andrea Prichett**

No Motion Made

**6) Review and Vote on Dates for Commission Meetings for year 2024**

a) Review potential dates for 2024 –

**M/S/C (Jones, Turner)** Motion that we keep the calendar as it is and remove the dates for December and keep the date in November on the 3<sup>rd</sup> Thursday of the month November 21, 2024.

**PASSED**

**Ayes:** Jones, Opton, Kimber-Smith, Turner **Noes:** None; **Abstentions:** None; **Absent:** Harrison, Prichett

b) Review religious holidays for 2024

**7) Proposal to establish a subcommittee concerning statewide efforts to build residential facilities – Edward Opton**

**M/S/C (Opton, Jones)** Motion to establish a subcommittee concerning statewide efforts to build residential facilities and put it on the agenda at the next meeting to establish membership.

**NOT PASSED**

**Ayes:** Jones, Opton, Kimber-Smith, **Noes:** None; **Abstentions:** Turner; **Absent:** Harrison, Prichett

**8) Revisit, review and vote on formal request to make the commission meetings hybrid – Glenn Turner**

No Motion Made

**9) Subcommittee Reports (20 min)**

a) **Youth Subcommittee** – No Motion Made

b) **Membership Subcommittee** - No Motion Made

c) **Evaluation Subcommittee** –

i) **Redo cote for Annual Report - Review, discuss, and make modifications to the Annual Report 2022-2023; and then propose adoption by the Mental Health Commission; and then submission to the Berkeley City Council.**

Did not get to item

**\*Motion to extend the meeting to 9:15**

**M/S/C (Prichett, Opton)**

**Ayes:** Jones, Opton, Turner; **Noes:** Kimber-Smith; **Abstentions:** None; **Absent:** Harrison, Prichett

**NOT PASSED**

**10) Mental Health Manager’s Report and Caseload Statistics – provided by Jeff Buell**

a. **MHC Manager Report January**

b. **Caseload Statistic January 2024**

- c. **MHC Manager Report November**
- d. **Caseload Statistic November 2023**  
Did not get to item

**11) Discussion for Election Chair and Vice Chair – Voting in February –**  
Did not get to item

**12) Adjournment – 9:00 PM**

**Minutes submitted by:** \_\_\_\_\_  
Jamie Works-Wright, Commission Secretary

DRAFT



Health Housing and  
Community Services Department  
**Mental Health Division**

## MEMORANDUM

**To:** Mental Health Commission  
**From:** Jeffrey Buell, Mental Health Division Manager  
**Date:** 2/13/2024  
**Subject:** Mental Health Manager Report

### Mental Health Services Report

Please find the attached report on Mental Health Services for January 2024.

### Information Requested by Mental Health Commission

- 1) Q: "One, how is the city of Berkeley doing in terms of implementing Cal aim, the major Medi-Cal reforms, that included enhanced care management, and in lieu of services to provide housing, supports for people who need vouchers, and other kinds of assistant? Also, how is it going in terms of covering substance used disorder and providing Taylor treatment and harm reduction services to people who need this kind of care?"

A: The Health, Housing, and Community Services (HHCS) Department has been addressing and rolling out CalAIM Medi-Cal changes on the proscribed schedule provided by the State. The Mental Health Division's Compliance branch participates in regular meetings to ensure that the Mental Health Division is in sync with both the State's and County's rules/expectations. The Mental Health Division leadership has also been in touch with our Alameda County counterparts to similarly discuss strategic and fiscal changes to our systems as well as how to balance the need for services with the reductions to fees, payments, and reconciliation expected from the CalAIM rollout.

Enhanced Care Management is a systematized whole person care management practice that has certain requirements of care providers and Managed Care Plans (MCP) operating within Alameda County. City of Berkeley and other local providers are in various stages of entering into agreements with these MCP's. The City of Berkeley and Alameda County plan to utilize existing teams that already do this work and adjust their services to ensure that we meet all of the ECM requirements in order to qualify for this funding stream. Of note, ECM reimbursement rates in our system of care are lower than previous rates that

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these teams were able to receive, which will likely result in shortfalls that must be supplemented with other funding sources and/or service cuts.

Housing services are provided through a separate system than mental health services, though the systems interface with each other often. Because of changes to HUD funding requirements back in 2017, supports for people who need vouchers and other kinds of housing assistance go through a coordinated entry system. The system puts all clients through the same criteria for evaluation and resource assignment to ensure that the residents with the highest needs are served proportionally with higher resources.

With respect to SUD services associated with Berkeley Mental Health, we continue to co-locate SUD and harm reduction services through Options Recovery at our Adult Mental Health and High School Health Center clinics. The Division is in process of reviewing expansion for those contracted SUD services with Options, and is also looking at hiring a full time COB staff person to provide these services to the High School Health Center.

- 2) “One last question is in terms of proposition one and the mental health services, that the behavioral health services act, what does the division plan to do in terms of Using its resources for increased FSP and housing to provide for clients? What do you think the impact will be if proposition?”

The Mental Health Division is still in process of calculating fiscal projections and impacts of Proposition 1 in the event that it passes in March. The funding reductions and requirements to spend on FSP services will be measured against our current funding of FSP services. The Mental Health Division currently operates three FSP teams (Adult, Homeless, and Children’s FSP), and these programs are already heavily funded by MHSA. Preliminarily, our Fiscal office expects that budget reductions could total as high as ~\$1.75 million per year from MHSA changes, resulting in cuts and/or reductions to FSP and Community Mental Health services that have relied on this MHSA funding.

### Mental Health Division Updates

The Mental Health Division’s areas of updates:

- A) Proposition 1 update: Governor Newsom’s “Modernization” of the Mental Health Services Act (MHSA) is set for a vote in March. Proposition 1 will create a general obligation housing bond for which Counties can apply to build mental health treatment residential settings for residents with mental illness, substance use disorders, and unhoused veterans; double the State’s allotment off the top of these tax funds; change how the remaining funds are required/allowed to be



spent, and require that ALL funding sources for mental health services will go through a collective transparent process for public feedback, just as MHSA funds have always done. Other questions about effects are difficult to answer as the legislation is long and does not fully spell out all of the steps or details.

- a. With respect to Alameda County: Behavioral health services/supports are projected to lose half of their funding (~\$48 million) in order to redirect to Housing (~\$26 million) and Full-Service Partnership (~\$22 million) services. The county will be able to apply for the Prop 1 housing bonds for eligible behavioral health housing projects.
- b. With respect to Berkeley: Full fiscal impacts are not yet fully projected, though significant MHSA funds were already being spent on Behavioral Health Support Services, Housing, and Full-Service Partnership services. Small jurisdictions (like Berkeley) theoretically may opt out of the Housing component requirement, though DHCS has not created this process or rule set at this time. New reporting requirements will require the deployment of more administrative duties to comply with the changes to the law, necessitating shifts to the balance of service to administrative spending.
- c. Prop 1 includes a \$6 billion bond measure that will make funds available for qualifying mental health and veteran housing projects. These funds do not appear that they will be automatically sent to jurisdictions like MHSA funds, but rather will be available for competitive application.

## Berkeley Mental Health Caseload Statistics for February 2024

Adult Services	Intended Ratio of staff to clients	Clinical Staff Positions Filled	# of clients open this month	Average Monthly System Cost Previous 12 Months	Fiscal Year 2024 (July '23-June '24) Demographics as of February 2024
Adult, Older Adult and TAY Full Service Partnership (AFSP) (Highest level outpatient clinical case management and treatment)	1-10 for clinical staff.	4 Clinicians, 1 Non-Licensed Clinician, 1 Clinical Supervisor	52	\$3,945	Clients: 63 API: 2 Black or African-American: 34 Hispanic or Latino: 1 White: 26 American Indian: 0 Other/Unknown: 0 Male: 36 Female: 26 Missing Gender ID: 0 Prefer Not to Answer Gen ID: 1 Multiple Gender ID: 0 Heterosexual: 51 Unknown: 4 Missing Sex Orient: 0 Bisexual: 1 Queer: 1 Prefer Not to Answer Sex Orient: 3 Multiple Sex Orient: 2 Gay: 0 Questioning: 1 Lesbian: 0
Adult FSP Psychiatry (February Stats)	1-100	0 FTE	43	\$2,037,600	
<b>AFSP FY21 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)</b>					
Homeless Full-Service Partnership (HFSP) (Highest level outpatient clinical case management and treatment)	1-8 for clinical staff	3 Clinicians, 2 Non-Licensed Clinician, 1 Clinical Supervisor	41	\$4,416	Clients: 42 API: 2 Black or African-American: 25 Hispanic or Latino: 1 Other/Unknown: 0 White: 14 Male: 27

## Berkeley Mental Health Caseload Statistics for February 2024

HFPS Psychiatry (February Stats)	1-100	0.5 FTE	30		Female: 13 Missing Gender ID: 1 Unknown: 1 Prefer No to Answer: 0 Multiple Gender Identities: 0 Heterosexual: 33 Missing Sex Orient: 1 Bisexual: 3 Unknown: 3 Gay: 1 Questioning: 1 Multiple Sex Orient: 0 Prefer Not to Answer: 0 Lesbian: 0
<b>HFSP FY22 Mental Health Division Estimated Budgeted Personnel Costs, including Psychiatry and Medical Staff (FY22 not yet available)</b>					
Comprehensive Community Treatment (CCT) (High level outpatient clinical case management and treatment)	1-20	7 Clinicians 1 Team Lead 1 Clinical Supervisor	144	\$1,633	Clients: 178 American Indian: 2 API: 17 Black or African-American: 69 Hispanic or Latino: 6 Other/Unknown: 3 Pacific Islander: 1 White: 80 Male: 93 Female: 77 Multiple Gender Identities: 2 Missing Gender ID: 0 Non-Conforming Gender ID: 2 Prefer Not to Answer Gender ID: 1 Female to Male: 1 Queer Gender ID: 1 Unknown: 1 Heterosexual Sex Orient: 131 Unknown: 19 Missing Sexual Orient: 1



Family, Youth and Children's Services	Intended Ratio of staff to clients	Clinical Staff Positions Filled	# of clients open this month	Average Monthly System Cost Last 12 months	Fiscal Year 2024 (July '23-June '24) Demographics as of February 2024
Children's Full-Service Partnership (CFSP)	1-8	0 Senior Behavioral Health Clinician 1 Non-Licensed Clinician	10	\$5,562	Clients: 13 American Indian: 0 API: 0 Black or African-American: 7 Hispanic or Latino: 6 Other/Unknown: 0 White: 0 Female: 5 Male: 6 Missing Gender ID: 1 Unknown: 1 Non-Conforming Gender ID: 0 Heterosexual: 6 Missing Sexual Orient: 1 Unknown: 5 Gay: 1 Other Sexual Orient: 0 Questioning Sexual Orient: 0
CFSP Psychiatry (February Stats)	1-100	0	4		
<b>CFSP FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>					
Early and Periodic Screening, Diagnostic and Treatment Prevention (EPSDT) /Educationally Related Mental Health Services (ERMHS)	1-20	3 Clinicians, 1 Clinical Supervisor	50	\$1,200	Clients: 70 American Indian: 6 API: 4 Black or African-American: 29 Hispanic or Latino: 14 Other/Unknown: 2 White: 15 Female: 29 Male: 25 Missing Gender ID: 5 Unknown: 6 Multiple Gender ID: 3 Non-Conforming Gender ID: 2

							Female to Male: 0 Other Gender ID: 0 Heterosexual: 30 Unknown: 23 Missing Sexual Orient: 5 Gay: 4 Multiple Sexual Orient: 3 Bisexual: 2 Lesbian: 1 Prefer Not to Answer: 1 Other Sexual Orient: 0 Queer Sexual Orient: 0 Questioning Sexual Orient: 1
ERMHS/EPSTD Psychiatry (February Stats)	1-100	0	11				
<b>EPSDT/ERMHS FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>							
High School Health Center and Berkeley Technological Academy (HSHC)	1-6 Clinician (majority of time spent on crisis counseling)	4 Clinicians, 0 Clinical Supervisor	Drop-in: 21 Externally referred: 12 Ongoing tx:62 Groups: 0 Offered/ 0 Conducted				N/A
<b>HSHC FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>							
\$396,106							

Crisis and ACCESS Services	Staff Ratio	Clinical Staff Positions Filled	Total # of Clients/Incidents	MCT Incidents Detail	Calendar Year 2024 (Jan '24- Dec '24) Demographics – From Mobile Crisis Incident Log (through February 2024)
Mobile Crisis (MCT)	N/A	2 Clinicians filled at this time	<ul style="list-style-type: none"> <li>60 - Incidents</li> <li>16 - 5150 Evals</li> <li>6 - 5150 Evals leading to involuntary transport</li> </ul>	<ul style="list-style-type: none"> <li>38 - Incidents: Location - Phone</li> <li>20 - Incidents: Location - Field</li> <li>0 - Incidents: Location - Home</li> </ul>	Clients: 48 API: 4 Black or African-American: 12 White: 11 Hispanic or Latino: 0 Other/Unknown: 21 Female: 28 Male: 17 Transgender: 0 Unknown: 3
<b>MCT FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>					
			\$771,623		
Transitional Outreach Team (TOT)	N/A	.5 Licensed Clinician, (TOT and CAT have been recently merged)	<ul style="list-style-type: none"> <li>4 – Incident(s)</li> </ul>	N/A	Clients: 3 API: 1 Black or African-American: 1 White: 1 Hispanic or Latino: 0 Other/Unknown: 0 Female: 2 Male: 1 Transgender: 0 Unknown: 0
<b>TOT FY21 Mental Health Division Estimated Budgeted Personnel Costs (FY22 not yet available)</b>					
			\$272,323		
Crisis, Assessment, and Triage (CAT)	N/A	2 Non-Licensed Clinicians, .5 Licensed Clinician, 0 Clinical Supervisor	<ul style="list-style-type: none"> <li>94 - Incidents</li> </ul>	N/A	Clients: 57 API: 0 Black or African-American: 16 White: 7 Hispanic or Latino: 1 Other/Unknown: 33 Female: 18 Male: 24 Transgender: 1 Unknown: 14

**CAT FY21 Mental Health Division Estimated Budgeted Personnel Costs  
(FY22 not yet available)**

\$735,075

Not reflected in above chart is Early Childhood Consultation, Wellness and Recovery Programming, or Family Support. In demographics, other/unknown is used both when a client indicates that they are multi-racial and when demographic info is not known.

\*Average System Costs come from Yellowfin, and per ACBH include all costs to mental health programs, sub-acute residential programs, hospitals, and jail mental health costs.



**3) Incompatible Public Offices**

The common law doctrine of incompatible public offices prohibits a public official from occupying two public offices that are incompatible in terms of their duties and/or the likelihood of divided loyalties. However, in Berkeley, serving on two or more City boards or commissions, including quasi-judicial bodies, is permitted (BMC Chapter 3.80). A commissioner who already occupies an elected or appointed office other than a City board or commission and wants to apply for appointment to a City commission should seek the City Attorney's advice as to whether the two offices may be deemed incompatible.

**4) Incompatible Activities for Compensation**

Government Code Section 1126 prohibits a public official from engaging in activities for compensation that are incompatible with his or her public office. A commissioner engaged in compensated activities that may be incompatible with his or her duties as a commissioner should consult the City Attorney.

**5) State-Mandated Ethics Training**

State law (AB 1234) requires certain local agency officials to receive training in ethics. In Berkeley, the officials identified for requirement are Mayor and City Council, City Auditor, Rent Stabilization Board Commissioners, Board of Library Trustees, and Police Review Commissioners.

These officials will receive a notice from the City Clerk advising them of the required training. The training may be completed on the FPCC website. The training must be completed within one year of the date of appointment and every two years thereafter. A certification of completion must be filed with the City Clerk. For more information, please contact the City Clerk Department.

**F. COMMISSION ORGANIZATION****1) Election of Officers and Terms of Office**

Unless otherwise provided by ordinance,<sup>2</sup> the chair and vice-chair are elected by the majority of the commission for a one-year term and hold office until their successors are elected or until their terms as members of the commission expire. No commissioner shall serve as chair for more than two consecutive years. There is no term limit for vice-chair.

Unless otherwise provided for in the enabling legislation, the annual election of commission officers should occur during the month of February. The election of officers must be listed as an item on the agenda.

Two meetings prior to the meeting at which officers will be elected, commissions are encouraged to list as an agenda item a discussion of the election, to inform all commissioners of the opportunity to seek nomination and election for the offices of chair and vice chair, to discuss and agree to the nomination process and timing for nominations (if no policy has been enacted by the commission), and to add clarity for commissioners and the

<sup>2</sup> Election of officers to the Police Review Commission, Board of Library Trustees, and Landmarks Preservation Commission are regulated by BMC Sections 3.32.050, 3.04.040, and 3.24.030, respectively.

public. In order to facilitate an orderly and fair nomination process, commissions may open nominations at the January meeting (or the meeting prior to the February meeting) and then hold the vote on officers at the February meeting. A Commission may enact a policy on officer elections in conformance with the requirements stated below, specifying the timing for nominations, the order in which nominations will be voted upon, and any other details that support a fair, orderly and transparent process for election of officers.

If there are multiple nominees for chair or vice-chair, the commission may wish to use a process by which all nominations can be made prior to voting. Full discussion of nominations is recommended, including the ability of nominees to speak on behalf of their own candidacy.

Additional regulations for officer elections:

- Nominations for chair and vice-chair require a motion (with second).
- A commissioner may nominate himself or herself.
- Any member of the commission, regardless of length of tenure on the commission may be elected chair or vice-chair.
- There is no automatic succession from vice-chair to chair.
- Motions to nominate must be voted on in the public forum, and no secret ballots are allowed.
- A roll call vote is recommended for votes on commission officers, and is required if any commissioner requests a roll call vote.
- The results of the vote must be publicly announced and the vote recorded in the minutes (Resolution No. 60,531-N.S.).
- A commissioner may not be elected chair if he or she will not be able to finish the term due to the two-year limitation.

Terms of office for officers are determined by the date the election regularly occurs, not by the date it may have actually occurred. If there is a slight variation in the date of the election, the sitting chair may serve on an interim basis provided that they do not exceed the two-year limit.

**Scenario:**

The chair is elected in February 2016. The chair resigns in April 2016. A new chair is elected in May 2016. The newly elected chair will serve from May 2016 to February 2017, when the next regular election is held.

**2) Mandatory Annual Training for Chairs and Vice-Chairs**

Chairs and vice-chairs are required to complete mandatory annual training. Resolution No. 63,876-N.S. was adopted by the City Council to implement video training for commission officers to satisfy the requirements of Resolution No. 60,531-N.S.

The chair and vice-chair must view, in its entirety, a training video on commission procedures and legal requirements. Upon completion, the chair and vice-chair must file with the City Clerk an Affirmation of Completion.

This training video must be viewed and the Affirmation of Completion must be filed with the City Clerk no later than 60 calendar days from the date of election as chair or vice-chair. Failure to complete the video training and file the Affirmation of Completion within 60 days of election will result in the immediate forfeiture of the position of chair or vice-chair.

Commission officers must file an Affirmation of Completion within 60 days from the date of election or forfeit their seat as chair or vice-chair.

While not mandatory for commissioners other than the chair and vice-chair, completion of this training is encouraged for all commissioners.

The required training video may be viewed online through the city website - <https://www.cityofberkeley.info/commissions/> or a DVD may be obtained from the City Clerk Department at 2180 Milvia Street, 1<sup>st</sup> Floor. The City Clerk also offers a video terminal at its office for commissioners to view the training video.

### 3) **Duties of Officers**

The “presiding officer” (chair or, in his or her absence, the vice-chair), performs the following duties.

- Presides at all meetings of the commission and ensures that the work of the commission is accomplished. To this end, the chair must exert sufficient control of the meeting to eliminate irrelevant, repetitious, or otherwise unproductive discussion. At the same time, the chair must ensure that all viewpoints are heard and are considered in a fair and impartial manner.
- Ensures that commission bylaws, if any, and procedures are followed. The chair cannot make rules related to the conduct of meetings; only the full commission may do so.
- Appoints commissioners to temporary subcommittees subject to the approval of the full commission.
- Approves the agenda prior to distribution. This is limited to the structure and order of the agenda and does not grant the chair the authority to remove an item submitted by commissioners or staff if submitted by the established deadline.
- Signs correspondence on behalf of the commission.
- Represents the commission before the City Council. Other commissioners may be the representative with the formal approval of the commission by motion and vote.
- Approves commission reports to Council. The chair cannot modify content that was approved by the full commission.
- The chair or a quorum of the commission may call a special meeting.
- The chair and vice-chair have full rights to vote and to make or second motions.

## Works-Wright, Jamie

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**From:** Works-Wright, Jamie  
**Sent:** Monday, February 5, 2024 10:35 AM  
**To:** Works-Wright, Jamie  
**Subject:** MHC agenda items and packet items

Hello Commissioners,

I hope all is well.

Please provide me with any agenda items that you would like to see on the agenda for February 22, 2024. Please send them by Friday, February 9, 2024. If you want anything added to the packet, please send me these things to me by Monday, February 12.

Thank you for your time.

### Jamie Works-Wright

*Consumer Liaison & Mental Health Commission Secretary*

*City of Berkeley*

*2640 MLK Jr. Way*

*Berkeley, CA 94704*

[JWorks-Wright@berkeleyca.gov](mailto:JWorks-Wright@berkeleyca.gov)

*Office: 510-981-7721 ext. 7721*

*Cell #: 510-423-8365*



## Works-Wright, Jamie

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**From:** Moni Law <monilaw7@gmail.com>  
**Sent:** Thursday, January 25, 2024 5:07 PM  
**To:** Berkeley/Albany Mental Health Commission  
**Cc:** Works-Wright, Jamie; Harrison, Kate; Mary-Lee Kimber Smith; Andrea Prichett; lwaruss@cityofberkeley.info  
**Subject:** Mental Health Resource Guide for Berkeley Youth  
**Attachments:** Mental Health Guide- Finished (3).pdf

WARNING: This is not a City of Berkeley email. Do not click links or attachments unless you trust the sender and know the content is safe.

Spanish Translation also attached in separate email. As a result of Councilmember Harrison's support of five BHS seniors proposal in 2022- a budget of \$350,000 was unanimously passed for mental health resources at BHS. This was prompted by the tragic death by suicide of a BHS senior only months earlier.

The 5 students, Eva, Ginger, Haley, Lily and Mary researched the available resources and included a legend for the background of the therapist, added a section on dealing with gun violence trauma and drug and alcohol addiction, and include useful tips for parents and teachers.

Rotary Club's program at BHS offered to sponsor printing some copies of the guide and posters around campus with a QR code sending the student, teacher or family member to an electronic copy.

It is our hope that at least 500 copies will be printed for distribution to BHS new Wellness Center, Health Clinic, Y Teen Center, BYA and BMH.

Sent from my iPhone



# MENTAL HEALTH RESOURCE GUIDE



BERKELEY YOUTH

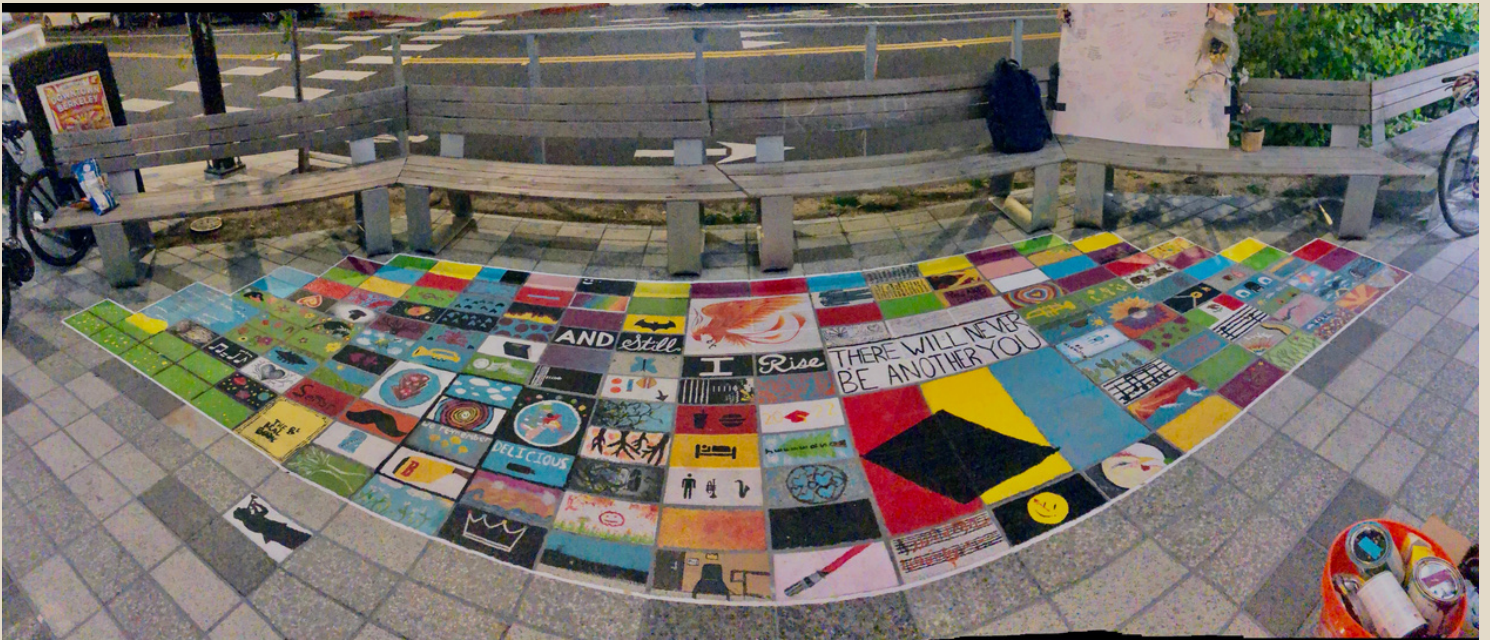


*"And Still I Rise"*

- Maya Angelou











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# Hotlines

## Nationwide Mental Health Crisis and Suicide Prevention Number

- 9-8-8
- 800-273-8255
- you can call or text
- Auto-directed to a local one based on area code.
- Will call the police if you are a danger to yourself or others.

## Trevor Project ★

- **1-866-488-7386**
- [thetrevorproject.org](http://thetrevorproject.org)
- Support hotline for LGBTQ or GSM youth under 24.
- "If you are a young person in crisis, feeling suicidal, or in need of a safe and judgment-free place to talk, call the TrevorLifeline now."
- Operates 24/7
- Limited to 30 min, you can call back after 30 min.

## KEY

- ★ - QUEER &/OR TRANS SPECIFIC
- - POC SPECIFIC

## Crisis Text Line:

- **Text HOME to 741741** to get connected to a counselor
- [crisistextline.org](http://crisistextline.org)
- Provides support addressing negative emotions and suicidal thoughts.

## Blackline ★●

- **1(800) 604-584**
- Geared towards the LGBTQI, BIPOC community
- Anonymous and confidential line to report negative, physical, and inappropriate contact with police
- Provides immediate crisis counseling



# BACKGROUND

## HISTORY

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In response to a student's death by suicide on April 18th 2022, two deaths of Berkeley High students by gun violence on October 1st 2022, and the rising mental health crisis among youth across the world, five BHS alumni have come together to create a resource packet for struggling youth. Teens are in need of mental health assistance, whether this means individual therapy, group counseling, or even a guide to healthy habits, this resource packet can help.

## MISSION

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We strive to provide Berkeley youth with accessible mental health resources. Mental health impacts thoughts, behaviors, and emotions. By learning healthy coping mechanisms, and ways in which you can improve your mental health, your outlook on life may improve drastically. This mental health guide is a starting point for those seeking care or to improve their overall well-being.

## STATISTICS

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Among adolescents aged 12-17 years in 2018-2019 reporting on the past year:

(cdc.gov)

15.7% made a suicide plan.

59.8% of youth with major depression do not receive any mental health treatment



# Common Mental Illnesses and Symptoms

## MENTAL ILLNESS

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A wide range of disorders that impact emotional and mental wellbeing. Many mental illnesses consistently affect mood and emotion.

## ANXIETY

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### Symptoms:

1. Feeling restless, wound-up, or on-edge
2. Being easily fatigued
3. Having difficulty concentrating
4. Being irritable
5. Having headaches, muscle aches, stomachaches, or unexplained pains
6. Difficulty controlling feelings of worry

## DEPRESSION

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### Symptoms:

1. Feelings of sadness, tearfulness, emptiness or hopelessness.
2. Angry outbursts, irritability or frustration, even over small matters.
3. Loss of interest or pleasure in most or all normal activities, such as sex, hobbies or sports.
4. Sleep disturbances, including insomnia (sleeping too little) or hypersomnia sleeping too much.
5. Tiredness and lack of energy, so even small tasks take extra effort

## TRAUMA


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A distressing experience that has lasting effects on mental, emotional, and sometimes physical wellbeing



# Signs of Emotional Distress



- Struggling to get out of bed in the morning because of mood
  - Having low or no energy
  - Difficulty concentrating
  - Appetite changes that result in unwanted weight changes
  - Having unexplained aches and pains, such as constant stomach aches or headaches
  - Feeling helpless or hopeless
  - Excessive smoking, drinking, or using drugs, including prescription medications
  - Worrying a lot of the time; feeling guilty but not sure why
  - Lack of interest in schoolwork, chores, or other responsibilities
  - Crying spells or bursts of anger
  - Loss of interest in things you usually find enjoyable
  - Inability to perform usual daily functions and responsibilities
  - Thinking of hurting or killing yourself or someone else
- 

# Trauma From Gun Violence

Violent deaths (homicide, accidents, suicide) can trigger unique qualities of traumatic grief. With the prevalence of gun violence occurring and shown in the media, it's crucial to understand the effects of these events. The mental health toll does NOT only affect those closest to gun violence.

## **Some mental health effects of gun violence:**

Depressive episodes, anxiety, trauma, post traumatic stress disorder, intrusive thoughts, sleep problems, substance abuse, self harm, and personality changes.

## **Advice to Parents/ Caregivers**

### **Acknowledge what is happening**

- Silence can communicate the idea that its not ok to talk about hard things
- Ask questions like “did you hear about the shooting, what questions or worries do you have?”
- Make sure not to stereotype the perpetrator/make assumptions about the person (Mental health is a good example: 1 in 4 adults experience mental health issues, the majority are not violent.
  - Remind child that there is compassion and care in the world: Emphasize the amount of people who care ex. who took care of the victims.

### **Provide a sense of safety and security**

- Remind them that the adults in their lives are doing everything they can to keep them safe and protected.

### **Watch out for signs of emotional stress listed above.**

Look into getting professional help (Grief counseling, therapy,<sup>28</sup> etc.) 4



# Tending to Your Mental Health



## Taking Care of Your Body

- Regular Exercise (30 minutes of walking)
- Stay Hydrated:
  - 8x8 rule: drink eight eight ounce glasses of water (even if you don't feel thirsty)
- Eating healthy
  - Eat plenty of fruits and vegetables along with foods rich in omega-3 fatty acids, such as salmon. Dark green leafy vegetables in particular are brain protective. Nuts, seeds and legumes, such as beans and lentils, are also excellent brain foods.
- Sleep (9 hours per night)
  - Create a sleep schedule.
    - Go to sleep and wake up at the same time every night.
  - Lower your usage of screens before bed.
  - Save your bed for sleeping (don't study or work in your bed)



## Take Time to Relax

- Meditation
- Breathing exercises
- Yoga
- Reading

### Helpful Apps:

- Headspace (free for Berkeley residents)

For Headspace subscription (active until Sept. 30, 2023)

- Scroll down and select Headspace button
- Complete the Headspace sign-up process, enter "Berkeley" and your zip code where you work, live or go to school, and set up your profile.
- link: <https://helpathandca.org/berkeley/#Headspace>

## Gratitude

Remind yourself of the things that you are grateful for. Writing them down before bed, or when you get up can be really beneficial.

## Connecting with people

Reach out to friends and family who can support you during this process



## Advice to Parents

- Listen to your child. Don't brush their feelings or concerns off.
- Respect your child's boundaries. If they don't want to talk about something at that moment, don't force them to.
- Find a good time to bring up the topic.
- Consider suggesting therapy as an option.

## Advice to Teachers

- Remind students that their worth doesn't depend on academic performance.
- Try and provide breaks or give extensions on work if asked.
- Remember that not every student is the same. Students are going through different things and can't always work at the same pace.



# Types of Therapy

## COGNITIVE BEHAVIORAL THERAPY

A form of psychological treatment that is especially effective for substance abuse, anxiety, depression, eating disorders and other severe mental illnesses. Treatment usually involves efforts to change thinking patterns, increase awareness of thought patterns and behaviors, and establish coping mechanisms. Goal-oriented, typically lasts a few months to a year, 'symptom-focused'.

## PSYCHODYNAMIC THERAPY

Treatment focuses on the psychological roots of emotional suffering, through self-reflection and self-examination. Explore past difficulties and relationship patterns, understand how personal history influences current mindset, and establish positive relationships.

## DIALECTICAL BEHAVIORAL THERAPY

A type of psychotherapy that focuses on mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness. It balances acceptance and change, and emphasizes the importance of validating individual's experiences while encouraging personal growth.

## WEBSITES WITH MORE INFO

CBT

PSYCHODYNAMIC THERAPY

DBT



# Types of Providers

## PSYCHIATRIST

MD or DO degree. As medical doctors who studied psychology and physiology, they can diagnose and prescribe medications. Some do therapy as well.

## PSYCHODYNAMIC THERAPY

PsyD or PhD degree. No medical degree and therefore can diagnose but cannot prescribe medication. Many do therapy and treatment.

## SOCIAL WORKER/COUNSELOR/THERAPIST

Trained to practice therapy. Therapists have clinical experience and can also serve as social workers. On the other hand, social workers don't have clinical experience or a therapist license and therefore cannot work as therapists.

## PEER COUNSELOR

No degrees, trained to provide counseling. Cannot diagnose or prescribe.

## SPECIALIZATIONS AND DEGREES

LSW: Licensed Social Worker

LCSW: Licensed Clinical Social Worker

DSW: Doctorate in Social Work

MFCC: Marriage, Family, and Child Counseling

LMFT: Licensed Marriage and Family therapist

MFT: Marriage and Family therapist

For more information, visit this QR code (NAMI):  
or visit our website.



# Therapy Centers

## KEY

- ★ - Queer &/or trans specific
- - POC specific
- - low income/sliding scale
- ✓ - Accept Medi-Cal

### Life Stance

- Find a Therapist or Psychiatrist Near You
- Clinicians include psychiatrists, psychologists, and licensed therapists.
- Offers both in-person and telehealth appointments,
- Book by phone: 925-282-1778
- Insurance: Aetna, Anthem Blue Cross of CA, Cigna, MHN, Optum
- [lifestance.com](http://lifestance.com)

### National Queer and Trans Therapists of Color Network



- Search tool to find QTPOC therapists.
- Our overall goal is to increase access to healing justice resources for QTPOC.
- Search for therapists by entering your zip code.
- [nqttcn.com](http://nqttcn.com)  
(if you are directed to the home page, click on mental health directory)

### Peacock Rebellion (QTPOC)



- They provide lists of Queer POC therapists in your city.
- Cities: Berkeley, Oakland, Richmond, San Francisco, San Jose
- [lgbtqpsychotherapistsofcolor.com](http://lgbtqpsychotherapistsofcolor.com)

### Hume Center ■✓

- MediCal and Medicare Sliding scale.
- 1-510-745-9151
- special consideration for the under- and un-served, through practicing an enabling consultation process.

### **Blue Oak Therapy Center ■**

- \$35 - \$90 per session
- 1-510-649-9818
- 3101 Telegraph Ave,  
Berkeley 94705
- Accepts video/phone call therapy
- Fees may be partially covered by some insurance plans. Check with your insurance provider to find out if you qualify under your plan.

### **Open Path Psychotherapy Collective ■**

- Sessions between \$30 and \$60
- [openpathcollective.org/city/berkeley/](http://openpathcollective.org/city/berkeley/)
- nonprofit serves clients who lack health insurance or whose health insurance doesn't provide adequate mental health benefits.

### **The Pacific Center★**

- 1-510-548-8283
- \$45-162
- 2712 Telegraph Ave,  
Berkeley 94705
- Public mental health support for LGBTQ+
- 4 free youth groups

### **The Wright Institute ★■●**

- \$25-75 per session
- (510) 923-2241
- 1918 University Avenue  
Berkeley 94704
- Only communicates over phone call.
- Group rate is \$12 per session. The initial intake session for all new and returning clients is a non-refundable flat fee of \$30.
- Does not currently accept Medi-Cal insurance.
- \*Lower fees can be negotiated on a case-by-case basis.

### **Access Institute ■**

- Income based sliding scale
- (415) 861-5449 x380 (x324 for Spanish).
- 110 Gough St, San Francisco 94102
- [info@accessinst.org](mailto:info@accessinst.org)
- Provides care to people of all ages with the greatest need and least access to care.
- In person only
- Intakes 10-15 mins over the phone
- 2 weeks call return.



### **Psychology Today**

- Therapy Directory Website
- Can search by insurance, issues, gender, therapy type, age, price, etc.

### **Bay Psychiatric Associates**


- Accepts insurance
- 2020 Milvia St Berkeley 94704
- 1-510-843-2220
- Psychiatry available

### **Mind Path Health ■✓**


- Many locations throughout CA: SF, Berkeley, Oakland
- Psychiatry Available

### **Berkeley Therapy Institute**

- 1-510-841-8484
- All clinicians are able to offer teletherapy or telemedicine.
- Psychotherapy, ADHD program, medication consultation, psychiatric treatment
- 1749/1748/1801 Martin Luther King Jr. Way, Berkeley, CA 94709 / 2196 Union St. San Francisco, CA. 94123
- Monday-Friday
- 8:30am-5:30pm (Administrative Office Hours: Monday-Friday 8:30 am – 12:30 pm • 1:30 pm – 5:30 pm)
- Psychiatry available



### **Berkeley Youth Alternatives ■✓**

- 5108459010
  - Counseling Center
  - Serves youth ages 6- 24
  - Sliding Scale, Insurance, Court Referrals
  - 1255 Allston Way, Berkeley
- 



# Resources for Undocumented Youth

## **United We Dream**

- <https://unitedwedream.org/our-work/undocuhealth-wellness/>
- Call: (844)-363-1423
- Text: 877877
- Has directory for therapists + a lot more resources

## **Immigrants Rising Mental Health Connector**

- provides undocumented people with psychological support
- [mentalhealth@immigrantsrising.org](mailto:mentalhealth@immigrantsrising.org)
- <https://immigrantsrising.org/mental-health-connector/>

## Website

[berkeleymentalheal.wixsite.com/guide](https://berkeleymentalheal.wixsite.com/guide)



**Created By Berkeley Mental Health**

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**Facilitated By**

Moni T Law

**Contact Us**

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