



**TULARE COUNTY  
MENTAL HEALTH BOARD**  
5957 S. Mooney Boulevard  
Visalia, California 93277-9394  
559-624-7445

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**TULARE COUNTY MENTAL HEALTH BOARD AGENDA**

**Date and Time: October 6, 2020**

**Board Convenes at 3:00**

**Location: Zoom Meeting ID: 949 1062 2895**  
**Passcode: 837612**

**p.m.**

**Online:** <https://tularecounty-ca.zoom.us/j/94910622895?pwd=eGwwZTVYSklrbncxU3dncEVETXduQT09>

**Over the Phone: (669) 900-9128**

I. Call to order 3:00 p.m.

**NOTICE TO THE PUBLIC  
PUBLIC COMMENT PERIOD**

At this time, members of the public may comment on any item not appearing on the agenda. Under state law, matters presented under this item cannot be discussed or acted upon by the Tulare County Mental Health Board at this time. For items appearing on the agenda, the public is invited to make comments at the time the item comes up for the Board consideration. Any person addressing the Board will be limited to a maximum of three (3) minutes so that all interested parties have an opportunity to speak. At all times, please state your name and address for the record.

II. Public Comment 3:00 - 3:05 p.m.

III. Action Items 3:05 - 3:15 p.m.

- a. Action Item to approve September 1, 2020 Mental Health Board minutes
- b. Consider application for continued membership from Sandra Juarez for Family Seat #11
- c. Consider application for continued membership from CJ Long for Family Seat #12
- d. Consider application for continued membership from Christopher Smith Consumer Seat #14

IV. Presentation / Reports / Discussion Items

- a. Medication-Assisted Treatment (MAT) 3:15 - 4:00 p.m.  
Dr. Lester Love, Medical Director, Mental Health Department
- b. Supervisor Shuklian Report 4:00 - 4:05 p.m.
- c. Director of Mental Health Report 4:05 - 4:10 p.m.
- d. Executive Committee Secretary Report 4:10 - 4:15 p.m.  
Packet enclosures
- e. Mental Health Board Members' Reports (committee(s) and individual activities) 4:15 - 4:20 p.m.

V. Future agenda items for next meeting and adjournment. 4:20 - 4:30 p.m.

- a. MHSA Community Program Planning Process for upcoming 3-Year Plan

**Next Meeting Date: November 10, 2020 from 3:00 to 4:30 p.m via Zoom**

**Online:** <https://tularecounty-ca.zoom.us/j/94910622895?pwd=eGwwZTVYSklrbncxU3dncEVETXduQT09>

**Over the phone: 1 (669) 900-9128 Meeting ID: 949 1062 2895 Password: 837612**

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact Elodia Burlingame at 624-7462.

Public documents related to the items on this agenda may be reviewed online at [www.tchhsa.org/mhb](http://www.tchhsa.org/mhb).

Mental Health Board membership applications are available at:

<http://tularecounty.ca.gov/clerkoftheboard/index.cfm/board-commissions-and-committee/>.

**Tulare County Health and Human Services Agency**  
**September 1, 2020**

<b>Committee Name:</b>	<b>Tulare County Mental Health Board</b>	Starting Time: 3:00 p.m.	Ending Time: 3:55 p.m.
<b>Place:</b>	Meeting held Via ZOOM.		
<b>Members Present:</b>	George Allen; Erin Brooks; Veronica Clifton; Gail Jones; Sandra Juarez, MSN; C.J. Long; Bruce Nicotero; Chief Jason Salazar; Christopher Smith; Therese Woodmansee.		
<b>Members EXCUSED:</b>	Dale Asman; Lynn Martin Del Campo; Supervisor Amy Shuklian (District Three, Ex-Officio); Michele Eaton.		
<b>HHSA Staff Present:</b>	Donna Ortiz, Director of Mental Health; Dayna Wild, Division Manager, Managed Care; Diane J. Fisher, Department Secretary; Jacob Jimenez, Family Advocate; Noah Whitaker, Community Services Director; Cory Silva, Administrative Specialist; Michele Cruz, MHSA Manager; Christopher Glidden, Administrative Specialist; Noah Whitaker, Community Services Manager; Elodia Burlingame, Staff Services Analyst; Diane J. Fisher, Department Secretary.		
<b>Other Staff/Guests:</b>	Tulare County Public Defender's Office – Judy Rogado, Tom Faulkner, Rigo Robles Turning Point –Ray Banks, Chief Executive Officer; Ivan Rodriguez, LCSW, Program Director; Irma Rangel, LCSW, Program Director. Societas, Inc. – Sander Valyocsik, MA, Program Evaluator. Kings View – Angela Garcia, Yelitza Perez. Family HealthCare Network – Janet Paine. Uplift Family Services – Tino Lucero		

	<b>Discussion</b>	<b>Scheduled Actions/ Recommendations</b>	<b>Person(s) Responsible</b>
<b>I.Call to Order</b>	<p>The meeting was called to order at 3:00 p.m. Members were reminded of the following: If there is a conflict of interest, Members must abstain from any discussion or voting.</p> <p>Action Items will be considered approved when half plus one of the members who are <u>present and voting</u> vote yes.</p>	N/A	Chair Nicotero
<b>II.Public Comment</b>	<p>Mr. Tom Faulkner, Senior Deputy at the Tulare County Public Defender's Office, attended to make a comment regarding the lack of competency training in Tulare County. This results in a delay of consumers being placed in a state facility, sometimes 3-4 months, due to the delay in competency training. (This was before COVID-19). He is aware that Ms. Brooks has brought this up and is supporting the subject. They would appreciate some sort of jail based competency training program in Tulare County. Judy Rogado, Senior Deputy Public Defender, expressed her support, stating that consumers are waiting for this training; she suggests that Tulare County explore how other counties process this training so there is not a delay, as well as where their funding is obtained.</p>	N/A	Mr. Faulkner/ Ms. Rogado/ Mr. Whitaker

	<p>Ms. Ortiz agreed that there is a need to look into this process and see what can be done regarding this delay. Ms. Brooks suggested perhaps collaboration with other departments (i.e., Sheriff's Dept) would be helpful in regards to Jail Based Competency Training. Mr. Nicotero suggested that this be a future Agenda items for the Mental Health Board.</p> <p>Noah Whitaker gave a report regarding the Suicide Prevention Task Force (SPTF). He reviewed the suicide numbers for this year thus far. National Suicide Prevention Week is September 6-12, 2020. He announced the upcoming events for that week.</p> <ol style="list-style-type: none"> <li>1. <b>What:</b> Central California Regional Suicide Prevention Summit 2020 <b>When:</b> Wednesday, September 9th from 9 a.m. - 4:30 p.m. <b>Link:</b> <a href="https://us02web.zoom.us/meeting/register/tZ0uceGuqT4qHdRmO8BpuaUzOwVIEYda6KzR">https://us02web.zoom.us/meeting/register/tZ0uceGuqT4qHdRmO8BpuaUzOwVIEYda6KzR</a></li> <li>2. <b>What:</b> California Student Mental Wellness Conference <b>When:</b> September 8-10, 2020 <b>Link:</b> <a href="https://www.wellnesstogether.org/pages/conference">https://www.wellnesstogether.org/pages/conference</a></li> <li>3. <b>What:</b> The Source LGBT+ Center's Mental Health Mondays, chat about suicide prevention. <b>When:</b> Monday, Sept 7, 2020 @ 6 p.m. <b>Link:</b> <a href="https://www.facebook.com/thesourceigbt">https://www.facebook.com/thesourceigbt</a></li> </ol>		
<b>III. Action Items</b>			
<b>a. Action Item to approve August 4, 2020 Mental Health Board Minutes</b>	<p>The minutes of August 4, 2020 were reviewed by Tulare County Mental Health Board Members.</p> <p>Ms. Long moved to approve the August 4 minutes as written; seconded by Chief Salazar. Motion approved.</p> <p>AYES: 11 (Allen, Brooks, Clifton, Jones, Juarez, Long, Salazar, Smith, Clifton, Salazar, Woodmansee)</p> <p>NOES: 0</p> <p>ABSTENTIONS: 0</p> <p>ABSENT: 3 (Asman, Martin Del Campo, Eaton)</p>	N/A	Chair Nicotero
<b>IV. Presentations / Reports / Discussion Items</b>			
<b>a. Supervisor Shuklian Report</b>	Ms. Ortiz stated that Supervisor Shuklian sends her regrets, as she had a conflicting meeting at the Board of Supervisors Office.	N/A	N/A
<b>b. Director of Mental Health Report</b>	Ms. Ortiz gave an update regarding Tulare County's number of cases and hospitalizations related to COVID-19, stating that Tulare County is one of the leading counties with the highest positivity rate based on population in the state. Although there has been a marked improvement since the prior week, Tulare County is still considered one of the high-risk counties. Agency Director Tim	N/A	Ms. Ortiz

	<p>Lutz gives a week-to-week update at the Board of Supervisors meeting every Tuesday morning (with the exception of their Dark Days). The State has changed the metrics regarding reopening requirements.</p> <p>It has been announced that there is a third Optimum Serve testing site located at the International AgriCenter in Tulare. Everyone is encouraged to be tested. Others are located at the Dinuba and Porterville Veterans Memorial Buildings. Tulare County's website with the COVID-19 information will be emailed to all Board Members for their information.</p> <p>Ms. Ortiz also made references to schools not being able to open. She stated that Tulare County is working with school districts to develop plans on how to open safely once the State metrics are met.</p> <p>Wearing masks, washing hands, and following CDC guides will help in meeting the State metrics sooner.</p> <p>The Mental Health Branch is developing a series of metrics that is focusing on service delivery, health outcomes, and fiscal sustainability. Ms. Ortiz stated that she will continue to communicate with the Board regarding any programs which might be affected as a result of the national pandemic.</p> <p>The clinics continue provide services via telehealth and over the phone; however, the clinics have been opened to consumers who need one-to-one service by appointment only.</p> <p>Ms. Ortiz stated that bi-weekly meetings have been instituted with provider network (including children's providers) and are also working with community-based organizations in order to ensure that community members are receiving the services they need. Tulare County will also be messaging the community on the pandemic effects related to isolation and how/when to access services for those who might currently be experiencing adverse reactions.</p> <p>The EQRO Review is scheduled from September 9-11, 2020 and will be a virtual review. The Mental Health Branch is preparing for this review based on the MHP Guidelines.</p> <p>Contracted providers (Turning Point, Tulare Youth Service Bureau, and other partners) are talking with schools regarding isolation, adjustments, and other barriers.</p> <p>Regarding Laura's Law, in mid-September, Mental Health Executive Management will be meeting with Tulare County Superior Court representatives. Due to COVID-19, the Superior Court is not completely opened, so this might not move quickly; but Ms. Ortiz will keep the Board informed.</p> <p>Tulare County was given opportunity (along with all 58 counties in California) to request an extension to submit their 3-year plan. Tulare County requested this so that current programs can be submitted, as well as programs/services which might be implemented in the next year, and ensure that those plans meet all Branch initiatives including Substance Abuse Disorder. A plan is underway to hold the Stakeholder meetings, focus groups, and key informant interviews.</p>		
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	<p>Ms. Ortiz gave an update regarding Project Room Key (the initiative from the State at the beginning of COVID-19 to house the homeless population who tested positive or were at high risk for COVID-19 to help isolate them in hotels and motels from others in the community). This project has been going well. A hotel in Tulare (Palms 99) is being utilized for this. Two more hotels (one in Visalia and one in Porterville) will also be used for this. In addition, the State Housing and Community Development Department was awarded \$5.2 million for the Project Room Key program. These additional funds will help to sustain this program moving forward.</p> <p>The Mental Health Board Annual Report was approved by the Tulare County Board of Supervisors today.</p> <p>Ms. Ortiz addressed questions from Mental Health Board members.</p>		
<b>c. Executive Committee Secretary Report &amp; Packet Enclosures</b>	Mr. Nicotero stated that the Executive Committee reviewed topics which were discussed at today's meeting.	N/A	Chair Nicotero
<b>d. Mental Health Board Members' Reports (Committees + Individual Activities)</b>	<p>Ms. Jones inquired (on behalf of others) regarding the reinstatement of services at the Mental Health Clinic. Ms. Ortiz suggested that Ms. Jones let others know that they can feel free to call the clinic for urgent appointments if needed. .</p> <p>Chief Salazar stated he has upcoming meetings with Gwen Schrank (Clubhouse Visalia) and Tulare County Office of Education regarding mental health in their areas. He will bring feedback from those meetings.</p> <p>Mr. Nicotero stated that he and Erin Brooks will be participating in the opening session of the EQRO Review. In addition, the 2020 Behavioral Health Board Data Notebook will be an upcoming project; the topic is "the use of telehealth during the 2020 Public Health Emergency."</p>	N/A	Board Members
<b>V. Future agenda items/ adjournment</b>	<p>AB 1304, the California MAT Re-Entry Incentive program (Dr. Love)</p> <p>Jail Based Competency Training</p> <p>Laura's Law Update (Donna Ortiz)</p> <p>Presentation regarding Autism</p> <p>The meeting adjourned at 3:55p.m.</p>	N/A	Chair Nicotero
<b>Minutes Written By:</b>	N/A	N/A	Diane J. Fisher
<b>MINUTES READ/APPROVED BY: BRUCE NICOTERO, CHAIR</b>			
<p><b>NEXT MEETING: October 6, 2020 3:00-3:45 p.m.</b></p> <p><b>LOCATION: To be held via Zoom</b></p>			



**TULARE COUNTY**  
**MENTAL HEALTH BOARD (TCMHB) APPLICATION**  
5957 South Mooney Boulevard  
Visalia CA 93277  
(559) 624-7462  
[TCMHBoard@tularehhsa.org](mailto:TCMHBoard@tularehhsa.org)

**A. APPLICANT INFORMATION**

Applicant Name Sandra Luarez  
Home Street Address: 1612 N. Asciano CT Home Phone: \_\_\_\_\_  
City: Visalia State: CA Zip: 93291  
Email Address: sansvilla6818@sbcglobal.net  
Work Street Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Occupation: Retired F/T ☐ P/T ☐ Student ☐ Retired ☒ Volunteer ☐  
Supervisory District: No. 1 ☐ No. 2 ☐ No. 3 ☒ No. 4 ☐ No. 5 ☐ (Visit: <http://tularecounty.ca.gov/board/>)  
Languages spoken fluently: English

**B. AFFIRMATIVE ACTION**

Date of Birth: 2-28-41 Sex: Female ☒ Male ☐ Person with disabilities: Yes ☐ No ☒  
Ethnicity: African American ☐ Asian/Pacific Islander ☐ Hispanic/Latino ☐ Caucasian ☒  
Native American ☐ Other \_\_\_\_\_

**C. MEMBERSHIP CATEGORY** (Please check all that apply):

- ☐ Public Defined as a member of the general public.  
☐ Consumer Defined as a person who has received mental health services. (See page 4).  
☒ Family Defined as the close relative of a person who is receiving or has received mental health services  
(Select all that apply):  
☒ Parent ☐ Spouse ☐ Sibling ☐ Child



**D. BACKGROUND AND INTERESTS** (Please feel free to use additional sheets.)

1. What specific areas of interest do you have in mental health? (Check all that apply.)

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Adult Services (25+ years)      | <input type="checkbox"/> Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) |
| <input type="checkbox"/> Children and Youth Services (0-15 years)   | <input type="checkbox"/> Managed Care   |
| <input type="checkbox"/> Transitional Age Youth (TAY) (16-24 years) | <input type="checkbox"/> MHSA   |
| <input type="checkbox"/> Deaf and Hearing Impaired Persons          | <input type="checkbox"/> Persons of ethnic minorities                                 |
| <input checked="" type="checkbox"/> Education                       | <input type="checkbox"/> Quality Assurance  |
| <input type="checkbox"/> Elderly Persons                            | <input type="checkbox"/> Suicide Prevention   |
| <input checked="" type="checkbox"/> Housing                         | <input type="checkbox"/> Other _____  |
| <input type="checkbox"/> Legislative Advocacy                       |   |

2. Have you had any involvement with persons who have mental illness? Yes ☒ No ☐

a. If yes, what has been your personal involvement? \_\_\_\_\_

Twin sons diagnosed with mental illness

3. Why do you want to serve on the Mental Health Board? \_\_\_\_\_

My interest in the TCMHB stems from wanting to know programs, goals, challenges in mental health in Tulare County. I would like to have a voice when appropriate and be an advocate when possible. I think my lived experience with sons who have had diagnosed mental illness as well as my professional experiences will allow me to understand and be a participant on this Board.

4. Summary of applicable experience (Job, personal, volunteer, community service, etc. Please attach a resume if you have one.) \_\_\_\_\_

RN, BSN, MSN(Community Health) 13 years as school nurse at Redwood High School. 9 years as Public Health/Supervising Nurse a Visalia Health Care Clenter. Nursing career from 1964 to 2010. Varied experiences, hospitals, clinics, schools, Foreign Service(Afghanistan), etc. Volunteer at Gateway Church in five areas. Volunteered at Hands in the Community and NAMI, Young Lives, Living Water World Mission

#### D. AFFIRMATIVE ACTION

Date of Birth: 02/28/1941

Sex: Female ☒ Male ☐

Person with disabilities: Yes ☐ No ☒

Ethnicity: African American ☐

Asian/Pacific Islander ☐

Hispanic/Latino ☐

Caucasian ☒

Native American ☐

Other \_\_\_\_\_

#### E. DESCRIPTION OF MENTAL HEALTH BOARD (MHB)

Mandated responsibilities (as defined by W & I Code § 5604.2):

- Review and evaluate the community's mental health needs, services, facilities, and special problems.
- Review any county agreements entered into pursuant to W & I Code §5650.
- Advise the governing body and the local mental health director as to any aspect of the local mental health program.
- Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process.
- Submit an annual report to the governing body on the needs and performance of the county's mental health system.
- Review and make recommendations on applicants for the appointment of local Mental Health director.
- Review and comment on the county's performance outcome data and communicate its findings to the California Mental Health Planning Council.

Members of the Mental Health Board are mental health advocates. They are representatives of their communities, the Tulare County Mental Health Board, and the Tulare County Board of Supervisors.

Members are recruited to represent clients of Mental Health Services, family members, and the general public.

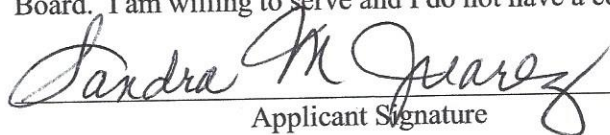
**Political Reform Act of 1974:** To ensure full disclosure to the public, members are required to disclose certain personal financial holdings that could be materially affected by their official actions. This requirement is fulfilled annually by completion of Form 700 of the Fair Political Practices Commission.

#### F. TIME INVOLVEMENT

Members are expected to attend monthly meetings unless excused by the Chairperson. Meetings are currently held on the 1<sup>st</sup> Tuesday of the month from 3:00 PM to 4:30 PM. TCMHB members may also expect to spend 2-10 hours per month on committee work. It is expected that members will facilitate an interchange with various interest groups in their respective communities, with the Mental Health Board, and with the Board of Supervisors. Members will also be expected to familiarize themselves with services by visiting programs. Members, as they are able, may also attend and become involved in conventions, conferences, and seminars presented by the department and supporting agencies. Mileage could be considered for reimbursement.

#### G. APPLICANT SIGNATURE

I understand the responsibilities and time commitment required of members of the Tulare County Mental Health Board. I am willing to serve and I do not have a conflict of interest. (Refer to TCMHB Bylaws at: [www.tchhsa.org](http://www.tchhsa.org))

  
Applicant Signature

09/15/2020

Date

When completed, please return to the address on the front of this application or email it to:  
[TCMHBoard@tularehhsa.org](mailto:TCMHBoard@tularehhsa.org).



## H. CONFLICT OF INTEREST

In general, no member of the board or his or her spouse may be a full-time or part-time employee of Tulare County Mental Health, the State Department of Health Care Services, or an employee of, or a paid member of the governing body of, a private entity, which contracts with the County to provide mental health services.

I certify that, except as provided below, neither I, nor my spouse, is an employee or paid board member of one of these entities.

SJ

Initials

There is an exception to this rule:

1. Are you an active or former consumer of Tulare County Mental Health?

Yes ☐

No ☒

If yes, continue to question 2.

If no, stop. Your application is complete.

2. Are you employed by Tulare County Mental Health, the State Department of Health Care Services, or a private entity which contracts with the County to provide mental health services?

Yes ☐

No ☒

If yes, continue to question 3.

If no, stop. Your application is complete.

3. What employer do you work for and what is your title?

\_\_\_\_\_  
\_\_\_\_\_

4. Does your position have any interest, influence, or authority over any financial or contractual matter for your employer?

Yes ☐

No ☒

If yes, STOP. The exception does not apply to you.

If no, continue to question 5.

5. I understand that I need to advise the Mental Health Board of this affiliation.

SJ

Initials

6. I understand that if approved as a member, whenever an agenda item involves a financial or contractual matter concerning my employer I am to abstain from any discussion or vote on that item.

SJ

Initials

If you answered "Yes" to question 2 above, you must have approval by your employer to apply for membership to the Tulare County Mental Health Board, as it is the preference of the Mental Health Board that the applicant be in good standing with their employer. In addition, attendance to the meetings and committees may affect work schedules causing difficulty in the commitment necessary for membership. This requires completion of the Employer Information Section on the next page. Thank you for your consideration.

#### D. AFFIRMATIVE ACTION

Date of Birth: 08/21/1941

Sex: Female ☐ Male ☐

Person with disabilities: Yes ☐ No ☐

Ethnicity: African American ☐

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Native American ☒

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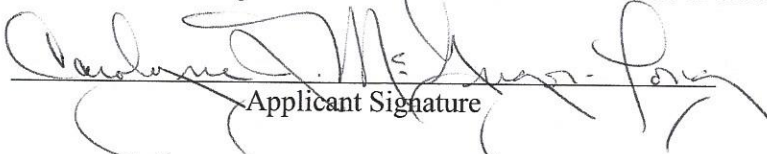
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Applicant Signature

09/16/2020  
Date

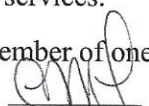
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If no, continue to question 5.

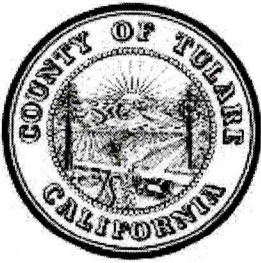
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\_\_\_\_\_  
Initials

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\_\_\_\_\_  
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**A. APPLICANT INFORMATION**

Applicant Name Christopher Smith  
Home Street Address: 120 Eaton ave Home Phone: 559-978-1285  
City: Druba State: CA Zip: 93618  
Email Address: Christopher.Smith@upliftfs.org  
Work Street Address: 554 W. Morton ave Work Phone: 909-1071  
City: Porterville State: CA Zip: 93257  
Occupation: Youth Partner F/T ☒ P/T ☐ Student ☐ Retired ☐ Volunteer ☐  
Supervisory District: No. 1 ☐ No. 2 ☐ No. 3 ☐ No. 4 ☐ No. 5 ☐ (Visit: <http://tularecounty.ca.gov/board/>)  
Languages spoken fluently: English

**B. AFFIRMATIVE ACTION**

Date of Birth: 6/28/1990 Sex: Female ☐ Male ☒ Person with disabilities: Yes ☐ No ☒  
Ethnicity: African American ☒ Asian/Pacific Islander ☐ Hispanic/Latino ☐ Caucasian ☐  
Native American ☐ Other \_\_\_\_\_

**C. MEMBERSHIP CATEGORY** (Please check all that apply):

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☐ Family Defined as the close relative of a person who is receiving or has received mental health services  
(Select all that apply):  
☐ Parent ☐ Spouse ☐ Sibling ☐ Child



**D. BACKGROUND AND INTERESTS** (Please feel free to use additional sheets.)

1. What specific areas of interest do you have in mental health? (Check all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Services (25+ years)                            | <input type="checkbox"/> Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) |
| <input type="checkbox"/> Children and Youth Services (0-15 years)              | <input type="checkbox"/> Managed Care   |
| <input checked="" type="checkbox"/> Transitional Age Youth (TAY) (16-24 years) | <input checked="" type="checkbox"/> MHSA  |
| <input type="checkbox"/> Deaf and Hearing Impaired Persons                     | <input type="checkbox"/> Persons of ethnic minorities                                 |
| <input type="checkbox"/> Education   | <input type="checkbox"/> Quality Assurance  |
| <input type="checkbox"/> Elderly Persons                                       | <input type="checkbox"/> Suicide Prevention   |
| <input type="checkbox"/> Housing   | <input type="checkbox"/> Other _____  |
| <input type="checkbox"/> Legislative Advocacy                                  |   |

2. Have you had any involvement with persons who have mental illness? Yes ☒ No ☐

a. If yes, what has been your personal involvement?

I have been ~~involved~~ involved in TAY housing for multiple years serving as a consumer, an advocate, and staff

3. Why do you want to serve on the Mental Health Board? To provide a voice for the consumers on the board as well as giving back to the programs that assisted me on my path of recovery

4. Summary of applicable experience (Job, personal, volunteer, community service, etc. Please attach a resume if you have one.) \_\_\_\_\_

#### D. AFFIRMATIVE ACTION

Date of Birth: 06/28/1990

Sex: Female ☐ Male ☒

Person with disabilities: Yes ☐ No ☒

Ethnicity: African American ☒

Asian/Pacific Islander ☐

Hispanic/Latino ☐

Caucasian ☐

Native American ☐

Other \_\_\_\_\_

#### E. DESCRIPTION OF MENTAL HEALTH BOARD (MHB)

Mandated responsibilities (as defined by W & I Code § 5604.2):

- Review and evaluate the community's mental health needs, services, facilities, and special problems.
- Review any county agreements entered into pursuant to W & I Code §5650.
- Advise the governing body and the local mental health director as to any aspect of the local mental health program.
- Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process.
- Submit an annual report to the governing body on the needs and performance of the county's mental health system.
- Review and make recommendations on applicants for the appointment of local Mental Health director.
- Review and comment on the county's performance outcome data and communicate its findings to the California Mental Health Planning Council.

Members of the Mental Health Board are mental health advocates. They are representatives of their communities, the Tulare County Mental Health Board, and the Tulare County Board of Supervisors. Members are recruited to represent clients of Mental Health Services, family members, and the general public.

**Political Reform Act of 1974:** To ensure full disclosure to the public, members are required to disclose certain personal financial holdings that could be materially affected by their official actions. This requirement is fulfilled annually by completion of Form 700 of the Fair Political Practices Commission.


#### F. TIME INVOLVEMENT

Members are expected to attend monthly meetings unless excused by the Chairperson. Meetings are currently held on the 1<sup>st</sup> Tuesday of the month from 3:00 PM to 4:30 PM. TCMHB members may also expect to spend 2-10 hours per month on committee work. It is expected that members will facilitate an interchange with various interest groups in their respective communities, with the Mental Health Board, and with the Board of Supervisors. Members will also be expected to familiarize themselves with services by visiting programs. Members, as they are able, may also attend and become involved in conventions, conferences, and seminars presented by the department and supporting agencies. Mileage could be considered for reimbursement.

#### G. APPLICANT SIGNATURE

I understand the responsibilities and time commitment required of members of the Tulare County Mental Health Board. I am willing to serve and I do not have a conflict of interest. (Refer to TCMHB Bylaws at: [www.tchhsa.org](http://www.tchhsa.org))

Chris Smith

 Digitally signed by Chris Smith  
Date: 2020.09.28 13:22:49 -07'00'

Applicant Signature

09/28/2020

Date

When completed, please return to the address on the front of this application or email it to:  
[TCMHBoard@tularehhsa.org](mailto:TCMHBoard@tularehhsa.org).

## H. CONFLICT OF INTEREST

In general, no member of the board or his or her spouse may be a full-time or part-time employee of Tulare County Mental Health, the State Department of Health Care Services, or an employee of, or a paid member of the governing body of, a private entity, which contracts with the County to provide mental health services.

I certify that, except as provided below, neither I, nor my spouse, is an employee or paid board member of one of these entities.

CS

Initials

There is an exception to this rule:

1. Are you an active or former consumer of Tulare County Mental Health?

Yes ☒

If yes, continue to question 2.

No ☐

If no, stop. Your application is complete.

2. Are you employed by Tulare County Mental Health, the State Department of Health Care Services, or a private entity which contracts with the County to provide mental health services?

Yes ☐

If yes, continue to question 3.

No ☒

If no, stop. Your application is complete.

3. What employer do you work for and what is your title?

Youth Partner with UpLift Family Services

4. Does your position have any interest, influence, or authority over any financial or contractual matter for your employer?

Yes ☐

If yes, STOP. The exception does not apply to you.

No ☒

If no, continue to question 5.

5. I understand that I need to advise the Mental Health Board of this affiliation.

CS

Initials

6. I understand that if approved as a member, whenever an agenda item involves a financial or contractual matter concerning my employer I am to abstain from any discussion or vote on that item.

CS

Initials

If you answered "Yes" to question 2 above, you must have approval by your employer to apply for membership to the Tulare County Mental Health Board, as it is the preference of the Mental Health Board that the applicant be in good standing with their employer. In addition, attendance to the meetings and committees may affect work schedules causing difficulty in the commitment necessary for membership. This requires completion of the Employer Information Section on the next page. Thank you for your consideration.



**TULARE COUNTY  
MENTAL HEALTH BOARD (TCMHB) APPLICATION**  
5957 South Mooney Boulevard  
Visalia, CA 93277  
(559) 624-7462  
[TCMHB@tularehhsa.org](mailto:TCMHB@tularehhsa.org)

**I. EMPLOYER INFORMATION**

Applicant Name: Chris Smith Home Phone: 5599672180 Work Phone: 5599091071

<b>FOR EMPLOYER TO COMPLETE</b> <i>(only pertains to applicants who checked yes for Section H, Question 2)</i>		
Is this applicant in good standing with your organization?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Does this applicant hold a position which has any interest, influence, or authority over any financial or contractual matter for your organization?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Supervisor Approval:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<div style="display: flex; justify-content: space-between; align-items: flex-start;"><div style="text-align: center;"><u>Tino Lucero</u> Applicant's Supervisor Signature</div><div style="text-align: center;"><small>Digitally signed by Tino Lucero DN: cn=Tino Lucero, o=Uplift Family Services, ou=Social Services, email=tino.lucero@upliftfs.org, c=US Date: 2020.09.29 11:24:51 -0700</small></div><div style="text-align: center;"><u>09/29/2020</u> Date</div></div>		