
State of California

**MENTAL HEALTH SERVICES
OVERSIGHT AND ACCOUNTABILITY COMMISSION**

Minutes of Teleconference Meeting
August 26, 2021

MHSOAC
1325 J Street, Suite 1700
Sacramento, CA 95814

890-9029-5267; Code 506?LGqj

Lynne Ashbeck
Chair
Mara Madrigal-Weiss
Vice Chair
Toby Ewing, Ph.D.
Executive Director

Members Participating:

Lynne Ashbeck, Chair
Mara Madrigal-Weiss, Vice Chair
Ken Berrick
John Boyd, Psy.D.
Keyondria Bunch, Ph.D.

Steve Carnevale
Shuonan Chen
Itai Danovitch, M.D.
Gladys Mitchell
Khatera Tamplen

Members Absent:

Mayra Alvarez
Sheriff Bill Brown
Assembly Member Wendy Carrillo

David Gordon
Tina Wooton

Staff Present:

Toby Ewing, Ph.D., Executive Director
Anna Naify, Consulting Psychologist
Maureen Reilly, Acting General Counsel
Norma Pate, Deputy Director, Program,
Legislation, and Administration
Brian Sala, Ph.D., Deputy Director,
Research and Chief Information Officer

Tom Orrock, Chief of Stakeholder
Engagement and Grants
Sharmil Shah, Psy.D., Chief of Program
Operations

CALL TO ORDER

Chair Lynne Ashbeck called the teleconference meeting of the Mental Health Services Oversight and Accountability Commission (MHSOAC or Commission) to order at 9:01 a.m. and welcomed everyone.

Commissioner Tamplen spoke on behalf of the people of Afghanistan during this difficult time. She asked everyone to visit change.org and the petition to support the categorical humanitarian crisis in Afghanistan.

Commissioner Boyd asked for a moment of reflection for the people of Afghanistan.

Amariani Martinez, Commission staff, reviewed the meeting protocols.

Chair Ashbeck gave the announcements as follows:

Announcements

- The next MHSOAC meeting is scheduled for Thursday, September 23rd. The agenda will be posted on September 13th.
- A slide was shown of the six Innovation projects that were approved through the delegated authority of the Executive Director and the Chair. The project plans and staff analysis for each Innovation project were included in the meeting materials.

Research and Evaluation Committee Update

Commissioner Berrick, Vice Chair of the Research and Evaluation Committee, provided a brief update of the work of the Committee since the last Commission meeting:

- The Committee has had a number of preparation meetings that have focused on using the Senate Bill (SB) 82 triage crisis services outcomes evaluation as a format for broader evaluation, focusing initially on children and youth and ultimately moving to each of the major component areas of the MHSA.
- The next Research and Evaluation Committee meeting is scheduled for Wednesday, September 1st, and will include a comprehensive review of triage crisis services outcomes evaluation and a discussion on the broader Children's Mental Health Services Initiative, led by the Governor and the Administration, and how that relates to the Commission and its evaluation process.

Client and Family Leadership Committee Update

Tom Orrock, Chief of Stakeholder Engagement and Grants, provided a brief update of the work of the Client and Family Leadership Committee (CFLC) Committee since the last Commission meeting:

- The Committee has continued to focus on opportunities to advance the work of peers in the mental health workforce and to provide input on the implementation of the peer specialist certification process, which is under the authority of the Department of Health Care Services (DHCS).

- Committee Members heard presentations at the August 19th meeting from the California Association of Mental Health Peer-Run Organizations (CAMHPRO) and the DHCS on the implementation of SB 803 peer certification and peer provider billing.
- Committee Members also heard a presentation at the August 19th meeting from staff on a school-based mental health implementation guide example that was created by the Commission in collaboration with the Department of Education, the School-Based Health Alliance, and the California Mental Health Services Authority (CalMHSA) that could be used as a sample for the Committee's creation of a implementation guide for peer certification processes at the county level to assist county behavioral health departments that are interested in launching a peer certification program.
- An additional CFLC meeting is scheduled for Tuesday, September 28th, to discuss the specific components of the implementation guide.
- The next regular CFLC meeting is scheduled for Tuesday, October 19th.

Cultural and Linguistic Competency Committee Update

Mr. Orrock stated the next Cultural and Linguistic Competency Committee (CLCC) meeting is tentatively scheduled for Thursday, October 14th.

Prevention and Early Intervention Subcommittee Update

Vice Chair Madrigal-Weiss, Chair of the Prevention and Early Intervention (PEI) Subcommittee, thanked Stacie Hiramoto, Director, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO), for sending the Commission a letter from the MHSA Partners Forum and the California Reducing Disparities Project (CRDP) regarding items covered by the PEI Subcommittee. She stated she will be responding to this letter shortly.

Vice Chair Madrigal-Weiss stated a virtual panel discussion is scheduled for Wednesday, September 1st, co-hosted in partnership with the California Alliance of Child and Family Services and the Children's Partnership. She thanked Commissioner Boyd for agreeing to facilitate the panel discussion.

Roll Call

Maureen Reilly, Acting General Counsel, called the roll and confirmed the presence of a quorum.

GENERAL PUBLIC COMMENT

David Smith stated concern about data collection and measurement of outcomes in crisis situations and post-recovery. The speaker suggested that some of the things that are happening in treatment services may circumvent longer-term recovery and are limiting individuals from reaching their full potential. The speaker asked how to locate data on this.

Chair Ashbeck asked Mr. Smith to send an email to staff for assistance.

Mary Ann Bernard, retired lawyer, family member, and advocate for the severely mentally ill, reminded Commissioners that the last clause of Section 5840(c) of the Mental Health Services Act (MHSA) has always required that PEI “shall also include components similar to programs that have been successful in reducing the duration of untreated severe mental illnesses and assisting people in quickly regaining productive lives,” which means that PEI is also relapse prevention.

Mary Ann Bernard also reminded Commissioners that the Office of Administrative Law (OAL) required this Commission to include relapse prevention for individuals with existing severe mental illness in the existing PEI Regulations because it is a statutory mandate. The speaker noted that crisis intervention without relapse prevention is cruelty.

Stacie Hiramoto thanked staff for putting the letter regarding the PEI Subcommittee from the MHSA Partners Forum in the meeting materials and Vice Chair Madrigal-Weiss for her note that she will be responding to the letter soon.

Stacie Hiramoto noted that the CRDP was able to obtain the \$63.1 million it sought to extend the project for another four years.

Poshi Walker, LGBTQ Program Director, Cal Voices, stated, as per the letter to the Commission dated July 28, 2021, Cal Voices is requesting that a presentation on the Help@Hand Multi-County Innovation Collaborative Project, formerly known as the Tech Suite Collaborative Innovation Project, be added to an upcoming agenda, which is in accordance with Commissioner requests made during the February 27, 2020, meeting. The speaker referred to the minutes from the February 27, 2020, minutes for details on Commissioner requests. It has been 18 months since Commissioners requested more information. The speaker noted that concerns voiced by Commissioners and the public still exist. The speaker requested that Commissioners again ask for an update addressing those concerns in the near future.

Chair Ashbeck stated she would work with staff to get that on an agenda prior to the end of the year.

Hannah Bichkoff, Policy Director, Cal Voices, stated concern about the document titled “Commission Positions on 2021 Legislation,” which was included in the meeting materials. The speaker stated the involvement in establishing legislative actions for the 14 identified bills should be vetted at a public meeting to ensure that the Commission is responding to the needs of the community. The speaker asked how these bills are prioritized, how consensus is built around these bills while avoiding serial communication, and whether the presentation of this bills to the Commission includes opposing views and avoids bias and influence from special interest groups. The speaker stated the Commission is to provide technical assistance to the Legislature, not to become legislative advocates or a lobbying body.

Andrea Crook, Director of Advocacy, ACCESS California, a program of Cal Voices, echoed Poshi Walker’s comments. The speaker highlighted Commissioner comments and requests made at the February 27, 2020, Commission meeting. The speaker stated

there are still no outcomes, budget narrative breakdowns, or learnings provided by the Help@Hand Multi-County Innovation Collaborative Project. It is important to invite Help@Hand back and to provide them with a structured outline of what the Commission would like them to report on to ensure that the Commission receives more than a generic overview.

Steve McNally, family member and Member, Orange County Behavioral Health Advisory Board, stated families and system users in the MHSA are paramount and yet are continually left at the sidelines. It is confusing because so much is done out of view. The speaker stated concern about who oversees CalMHSA and stated they will share a presentation that CalMHSA recently did in Orange County to staff where no dollar figures were provided.

Steve McNally asked the Commission for help with finding local behavioral health board distribution lists. When information does not come to local behavioral health boards, they cannot know to ask questions about community issues. The speaker asked for a legislative cheat sheet, once the budget is summarized, and for assistance finding trailer bill language.

Tiffany Carter, Statewide Advocacy Liaison, ACCESS California, a program of Cal Voices, stated the need for county plans being approved by this Commission to be innovative by the legal definition and to ensure that Innovation is the appropriate mechanism and funding stream for Innovation plans.

ACTION

1: June 24, 2021, MHSOAC Meeting Minutes

Chair Ashbeck stated the Commission will consider approval of the minutes from the June 24, 2021, teleconference meeting.

Public Comment

Tiffany Carter stated the meeting minutes are often paraphrased. This is inappropriate for public comment because paraphrasing can cause things to be lost in the translation. The speaker stated words matter. The speaker requested a verbatim transcript of the meetings to better capture words and intended meanings.

Poshi Walker agreed with the previous speaker and referred to her comment captured in the June 24th minutes that the speaker “stated the concern about the lack of LGBTQ representation on the Commission.” The speaker stated she said more than that and would appreciate that being included in the minutes.

Poshi Walker noted that, when comments are in support of proposed projects, the minutes do not state what the comments were or why they are in support. Meeting minutes are the only record of what took place. The speaker asked that public comments not be paraphrased in the minutes but stated in full, minus repeated and filler words.

Motion: Agenda Item 1

Chair Ashbeck asked for a motion to approve the minutes.

Commissioner Berrick made a motion to approve the June 24, 2021, teleconference meeting minutes.

Vice Chair Madrigal-Weiss seconded.

Action: Commissioner Berrick made a motion, seconded by Vice Chair Madrigal-Weiss, that:

- *The Commission approves the June 24, 2021, Teleconference Meeting Minutes as presented.*

Motion carried 8 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted "Yes": Commissioners Berrick, Carnevale, Chen, Danovitch, Mitchell, and Tamplen, Vice Chair Madrigal-Weiss, and Chair Ashbeck.

ACTION

2: Placer County Innovation Plan

Presenter:

- Amy Ellis, Placer County Health and Human Services-Deputy Director, Adult System of Care

Chair Ashbeck stated the Commission will consider approval of \$2,750,000 in Innovation funding for Placer County's 24/7 Adult Crisis Respite Center Innovation Project.

Commissioner Boyd recused himself from the discussion and decision-making with regard to this agenda item pursuant to Commission policy.

Chair Ashbeck asked the county representative to present this agenda item.

Amy Ellis, Deputy Director, Placer County Health and Human Services, Adult System of Care, provided an overview, with a slide presentation, of the need, proposed project to address the need, community contribution, learning objectives, evaluation, and budget of the proposed 24/7 Adult Crisis Respite Center Innovation Project.

Commissioner Questions

Commissioner Carnevale asked if this project is new across the system and what has been learned with similar initiatives.

Ms. Ellis stated she reached out to several counties that have similar services but none were doing it exactly like this project with its length of stay, services offered, and level of staffing. Also, since it is in outpatient behavioral health, it can bill for certain services, borrow nursing or psychiatric staff during the day, and do services directly on site.

Commissioner Carnevale asked the county to measure outcomes to understand the amount of funding saved downstream by putting in earlier Intervention practices and to see how that applies across the system.

Chair Ashbeck stated one of the metrics is to reduce traffic through the hospital emergency room but noted that this service cannot be on hold. She asked how to measure something that does not happen.

Ms. Ellis stated that is why the county will need to measure both quantitatively and qualitatively in the evaluation approach.

Commissioner Berrick stated the project in and of itself is not innovative but it brings Innovation in its effort to be comprehensive in providing real options across the whole continuum of care.

Vice Chair Madrigal-Weiss asked about the plan to get this project out to the community.

Ms. Ellis stated it has been identified as one of the county's top priorities on its communication plan. The county will put messages on social media and in newspapers and marketing flyers.

Commissioner Mitchell asked about the plan for growth.

Ms. Ellis stated it was fiscally responsible for the county to start small and grow as the need requires to help with sustainability. She stated a wing on the wellness center was split to create this project. If needed, the wing can be opened up to create greater capacity on site. Also, an additional site can be created offsite through a community provider that provides similar services.

Public Comment

Jodi Nerell, Director of Local Mental Health Engagement, Sutter Health, spoke in support of the proposed Innovation Project.

William Garrity asked if North Valley Behavioral Health is part of the proposed Innovation Project.

Alicia Pimentel, Anthem Blue Cross/Medi-Cal, spoke in support of the proposed Innovation Project.

Poshi Walker stated #Out4MentalHealth has been doing local work and listening sessions with Black, Indigenous, and People of Color (BIPOC), queer, and trans communities. The speaker stated there is true fear of engagement, especially for the BIPOC community. Getting into services oftentimes is traumatizing because services do not offer culturally affirming and sensitive services or have the understanding of the role that race, ethnicity, sexual orientation, gender identity, and age play together in a person, which cannot be separated out.

Poshi Walker stated ze have heard over and over the idea of mandated reporting, being 5150'd, and the fear of having anything to do with a system that will force individuals into services, which results in reluctance to engage. The speaker asked for assurance that the proposed Innovation Project will be completely voluntary.

Matthew Diep, California Youth Empowerment Network (CAYEN), echoed Poshi Walker's concerns. The speaker asked if transition-age youth (TAY) will be included in these services. The speaker thanked the county for including peer support specialists in the project and asked if TAY will be included in the peer support specialist positions hired by the county.

Commissioner Discussion

Chair Ashbeck asked the county representatives to respond to comments and concerns brought up during public comment.

Ms. Ellis responded to William Garrity's question by stating the 30-day crisis resolution is done by a county contracted provider. North Valley Behavioral Health is the operator of the county's locked facility, which is adjacent to the project facility.

Ms. Ellis responded to Poshi Walker's comments by stating it is always the county's intent to try to voluntarily engage. It is difficult to promise that there would never be a time when a 5150 process might need to be initiated within the facility, but that would only be reserved if they met the strict requirements of harm to self or others or great disability to where the county would legally be required to ensure the safety of the individual. Involuntary treatment would be a last resort.

Ms. Ellis stated the county is aware of the need to ensure culturally-responsive techniques and practices to help keep the engagement voluntary.

Ms. Ellis responded to Mr. Diep's question. She stated the county's adult and children's systems of care were involved in the Innovation planning process and the needs of youth and TAY were discussed. The proposed Innovation Project will provide services for individuals 18 years and above.

Executive Director Ewing responded to Commissioner Berrick's comment. He stated this work is part of the support the Commission has provided to counties on the Crisis Now model to work toward the goal that this is not the exception but is the standard practice. There are a total of 14 counties engaged in that. He stated this raises concerns that have been consistent throughout the Commission's Innovation work – at what point something is no longer innovative because a group of counties are starting to do that.

Executive Director Ewing stated the Legislature has stated that the Commission needs to figure this out on a case-by-case basis. He stated staff is working with a number of partners to streamline and better understand how to make Innovation work and to push systems towards the continuum of support that is necessary in addressing all issues that have been raised around trust and capacity building. Many more counties are interested in following what Placer County is doing and benefiting from that capacity.

Commissioner Danovitch agreed with both the need for this project and the question about its innovativeness. He stated another standard of Innovation is the learning component with the question being "what will we learn from this that will enable us to sustain this after the funding from the Innovation mechanism is completed?" He stated his biggest concern about this is that the learning question that needs to be answered that will enable the sustainability of this after the Innovation funding completes is not

fully addressed. He asked the team leading the proposed Innovation Project to learn how it will be sustained and how this pilot innovative mechanism can be used to ensure that, if it works, there is a mechanism to continue it.

Motion: Agenda Item 2

Chair Ashbeck asked for a motion to approve Placer County's 24/7 Adult Crisis Respite Center Innovation Project.

Commissioner Berrick moved the staff recommendation.

Vice Chair Madrigal-Weiss seconded.

Action: Commissioner Berrick made a motion, seconded by Vice Chair Madrigal-Weiss, that:

The Commission approves Placer County's Innovation Plan, as follows:

Name: 24/7 Adult Crisis Respite Center

Amount: Up to \$2,750,000 in MHSA Innovation Funds

Project Length: Five (5) Years

Motion carried 7 yes, 0 no, and 1 abstain, per roll call vote as follows:

The following Commissioners voted "Yes": Commissioners Berrick, Carnevale, Danovitch, Mitchell, and Tamplen, Vice Chair Madrigal-Weiss, and Chair Ashbeck.

The following Commissioner abstained: Commissioner Bunch.

Commissioner Boyd rejoined the meeting.

BREAK

INFORMATION

3: Capitol Collaborative On Race and Equity (CCORE) Team Overview and Discussion with the Commission

Presenter:

- MHSOAC Staff

Chair Ashbeck stated CCORE team members will present an update on the progress toward developing a Racial Equity Action Plan (REAP), areas of opportunities, and next steps. She asked staff to present this agenda item.

Lauren Quintero, Chief, Administrative Services, and Co-Lead, CCORE Team, began her presentation by doing a land acknowledgement of the MHSOAC headquarters office, listing Native American tribes that are indigenous to the area, and an acknowledgement for the movement for Black lives. She provided an overview, with a

slide presentation, of the background, goals for today, and activities and inputs guiding the work.

Anna Naify, Ph.D., Consulting Psychologist, and Co-Lead, CCORE Team, continued the slide presentation and discussed feedback received on internal practices to support equity and external supports for mental health, the REAP vision and root cause analysis, data discovery, potential opportunity areas, current initiatives, and next steps. She stated the CCORE training is near completion and the REAP and supporting implementation plan will be developed this fall.

Ms. Quintero asked Commissioners to discuss opportunities for transformational change and race equity. She read a list of questions to help facilitate the discussion, as follows:

- How can we best embed equity into everything we do?
- What are your priorities for supporting racial equity and school mental health?
- How might the Commission engage tribes?
- How could staff support strategic initiatives of the Commission to use data, increase capacity at the local level, and engage the public in authentic and meaningful ways?

Ms. Naify included additional questions for discussion, as follows:

- How can the state support the success and strategies that increase equity in access to care and decrease stigma, given the diverse population of California?
- How can we leverage the Commission's tools and strategies including thinking about financial incentives, Innovation, how Innovation plans are reviewed and approved, and policy to prioritize reducing disparities in mental health?

Commissioner Questions

Commissioner Carnevale spoke in support of the CCORE project.

Commissioner Bunch asked what was measured for impact for groups which are most negatively impacted within schools.

Dr. Naify stated expulsion and suspension data was used.

Commissioner Bunch asked what is stopping the requirement for a racial equity component for every Innovation plan brought before the Commission.

Executive Director Ewing stated staff is thinking about how to embed an equity lens in everything the Commission does and is drafting a plan that will be presented to the Commission for adoption.

Chair Ashbeck noted that the language used when discussing race and equity is important and needs to be clear.

Public Comment

Poshi Walker commended the Commission's efforts but urged not just looking at race while ignoring other inequities involved that cannot be ignored.

Hanna Bichkoff discussed two other data points worth considering in this initiative – English language learners and youth in foster care, who are disproportionately served within the public school system.

Stacie Hiramoto stated concern that there was no use of the words race or racism in the vision and root analysis. Racial equity cannot be achieved without the willingness to use those words.

Commissioner Discussion

Vice Chair Madrigal-Weiss stated this is a great first step. Regular updates are necessary to hold the Commission accountable.

ACTION

4: MHSOAC Budget Overview and Expenditure Plan

Presenters:

- Toby Ewing, Executive Director
- Norma Pate, Deputy Director

Chair Ashbeck stated the Commission will hear a presentation on the Fiscal Year 2020-21 budget, including specific accomplishments from the past year, and will consider approval of the Fiscal Year 2021-22 Operations Budget and Expenditure Plan. She asked staff to present this agenda item.

Norma Pate, Deputy Director, provided an overview, with a slide presentation, of the Fiscal Year 2020-21 budget and the Operations Budget and Expenditure Plan for Fiscal Year 2021-22. She noted that the Commission budget increased this year from \$45 million to \$255 million.

Commissioner Questions

Commissioner Danovitch asked if the Commission has the ability to effectively manage the increased budget.

Deputy Director Pate agreed with the need for more resources to manage the increased funding and programs. Staff is working closely with the Department of Finance to address these resource needs.

Commissioner Berrick suggested bringing in short-term contracting positions to help with the additional workload. He stated the need to respond quickly to people in need and to have structures in place that allow the Commission to do that and to move in ways that government cannot always do.

Chair Ashbeck asked to include a Rapid Response line item in the financial statements.

Commissioner Berrick agreed with strengthening a formal behavioral health disaster response. He stated the need to have the capability built in as part of a comprehensive long-term plan to respond to individuals whose lives are immediately impacted. If this capacity is not built in, response is delayed. He noted that CalMHSA has also been thinking about this.

Commissioner Mitchell stated concern about capacity due to the Commission's small staff. She asked about the plan to grow staff.

Executive Director Ewing agreed that the Commission's workload has grown tremendously while the number of staff to support that work has remained unchanged. He stated staff will shortly be submitting a confidential budget request to the governor for his consideration.

Commissioner Carnevale stated adding capacity to not only service the current needs but to learn from the work being done is an important element in order to deliver services effectively. He stated the need to invest in long-term programs that really address the generational and systemic causes of these problems. This is the only way to begin to address problems in the long-run. He suggested identifying the percentage of the budget that addresses urgent, current needs versus longer-term programs that solve some of these problems and trying to find a balance between the two.

Presentation, continued

Executive Director Ewing continued the presentation and highlighted accomplishments made during the past year and goals for the new year. He stated an incentive grant will be provided to every county in the state of California to strengthen school mental health partnerships. Staff will be working in the coming months to allocate that funding.

Commissioner Discussion

Vice Chair Madrigal-Weiss stated the Commission already agreed with supporting a convening around youth mental health. She asked where that is outlined in the budget.

Executive Director Ewing stated \$300,000 has been set aside as a specific line item in the budget to sponsor a youth mental health convening specifically designed for and by youth mental health leaders to bring together youth mental health organizations to design an event to elevate the voice of youth around youth mental health needs.

Executive Director Ewing stated the Commission has invested \$50,000 to initiate a website that would allow Californians to have access to free apps and websites that have been vetted by subject matter experts to ensure they are not harmful. The goal is not that they are evidence-based, but that they do no harm. The Together for Wellness website is part of the CalHOPE platform.

Vice Chair Madrigal-Weiss asked to take the lead on the youth mental health convening. She invited Commissioner Tamplen to work alongside her along with other Commissioners who would like to join in this effort.

Chair Ashbeck agreed.

Commissioner Berrick suggested starting the planning process to include a clearly-identified budget line item for mental health rapid response.

Public Comment

Theresa Comstock, Executive Director, California Association of Local Behavioral Health Boards and Commissions (CALBHB/C), reminded the Commission that at a past meeting they requested a new stakeholder advocacy contract supporting boards and commissions and their work in terms of reviewing, advising, and ensuring local stakeholder input.

Matthew Diep expressed appreciation for the conversation around elevating youth voice. The speaker offered CAYEN's help in bringing youth to the table to support the Commission's efforts.

Poshi Walker stated the website referenced by Executive Director Ewing was not evidence-based. The bar was just to not be harmful. Although first, do no harm is important, especially when referencing LGBTQ individuals, not being able to get help is in and of itself harmful. The speaker stated individuals go to this website for help but it is not helpful. It does not have LGBTQ-specific crisis lines listed. It is important that someone in crisis does not get someone who has no knowledge of their identity. The lack of a culturally responsive response in and of itself can be harmful.

Motion: Agenda Item 4

Chair Ashbeck asked for a motion to approve the Fiscal Year 2021-22 Operations Budget and Expenditure Plan.

Vice Chair Madrigal-Weiss moved to approve the staff recommendation.

Commissioner Danovitch seconded.

Action: Commissioner Boyd made a motion, seconded by Commissioner Danovitch, that:

- *The Commission approves the Fiscal Year 2021-22 Expenditure Plan.*

Motion carried 9 yes, 0 no, and 0 abstain, per roll call vote as follows:

The following Commissioners voted "Yes": Commissioners Berrick, Boyd, Bunch, Carnevale, Danovitch, Mitchell, and Tamplen, Vice Chair Madrigal-Weiss, and Chair Ashbeck.

ADJOURN

There being no further business, the meeting was adjourned at 12:55 p.m.