

**EL DORADO COUNTY  
MENTAL HEALTH JOINT COMMISSION  
Minutes July 25, 2012**

**TIME: 5:00 PM**

**PLACE: Video conference at: Western Slope – Mental Health  
415 Placerville Drive (EMS)  
Placerville, CA 95667**

**South Lake Tahoe – Public Health/Mental Health Offices  
1360 Johnson Blvd Suite 103  
South Lake Tahoe, CA 96150**

I. Call to Order; Roll Call; Introductions

Members: R.S. Lynn, Ben Ehrler, Michael Pickens, Jan Melnicoe, Jim Abram, Claudia Ball, Guadalupe Medrano

Guests: Bill Ball, Diana Hankins, Jackie Noren, Russ Fackrell, Maureen Focht, Clay Dawson, Ellie Dawson, Earl McGuire, Stan Paolini, Brady McGuire, Cathy Hartrum, Brenda Bailey, Lee Jackson

Staff: Joan Meis-Wilson, Patricia Charles-Heathers, Carol Martin, Sophie Cabrera, Janet Stevens, Prestine Skinner, Rob Evans

II. Approval of Agenda

Discussion of the new homeless encampment being built by Hang Town Haven (# VI.) was deferred as the intended guest speakers were unable to attend. Commission members also agreed to discuss the Mental Health move to 4140 Mother Lode Drive (# VII.) but to postpone their vote on this item. With these adjustments, the agenda was approved.

III. Approval of Minutes (June 27<sup>th</sup> in Draft on website)

Approved

IV. Public Comment (15 Minutes)

Claudia shared that Bonnie McLane's husband passed away on Thursday, July 19. Claudia relayed Bonnie's appreciation for the kind thoughts and messages she has received from members of the MH Commission and others in the community.

V. Department News and Updates

- Program managers spoke briefly to summarize Department news, and a more detailed written update was distributed. Departmental updates are also included as an appendix to this document [Appendix A].
- Additional questions were raised and addressed during the discussion of Department news:
  - Is there a standard for providing Intensive Case Management (ICM)?  
There is a standard for this model, and Departmental plans for implementing ICM are consistent with the model.

- Does the State mandate that the County have a MHSA Advisory Board?  
The Department of Mental Health recommends Advisory Boards as a best practice for MHSA program development, but the State does not mandate that Counties establish an MHSA Advisory Board. These Boards are designed as a venue to solicit advice from community partners, support effective collaboration, and promote a broader, more inclusive perspective on service needs and resources available in the community.
  - Jackie Noren from the El Dorado County Sheriff's Office provided an update on Crisis Intervention Team (CIT) training. The program is being restructured and two additional officers have been recruited and will be trained to participate on the team. CIT training is scheduled for August 6 - 9, 2012.
- VI. Discussion of the new homeless encampment being built by Hang Town Haven, a new non-profit corp. Community Resource Center, a non-profit corp. will be directly involved in daily operations: Discussion postponed.
- VII. Discussion and Vote on proposed move of Mental Health move to 4140 Mother Lode Drive.
- During approval of the agenda, Commission members agreed to postpone a vote on this item.
  - The proposed site is located about a quarter-mile east of Lee's Feed store on Motherlode Drive. Currently, the closest bus stop is located in front of the Valero gas station and Gold Harvest Market, about 0.2 mile from the proposed site. There are no sidewalks or crosswalks on Motherlode Drive between the bus stop and the proposed site.
  - The Department has spoken with El Dorado County Transit about the possibility of making a minor change in the bus plan to allow passengers to be dropped off and picked up at the proposed site. Indications are that this change would be feasible.
  - Claudia Ball went to the proposed site to observe traffic and bus patterns, and to survey potential client safety issues. She compiled her observations and questions for the Department in an email that was sent to Commission members and to Joan Meis-Wilson prior to this meeting; the contents of that email are included as an appendix to this document [Appendix B].
  - Jim Abram restated his concern for clients who have to take the bus from Placerville to the proposed site. While the distance from the current location to the proposed site is less than ten miles, those taking the bus would have a 90-minute bus commute that would include a 40-minute wait on Missouri Flat Road in front of the Walmart store. Clients who want to arrive at the proposed site for a morning appointment would have to be at the bus stop by 6:50 AM in order to reach the site by 8:30 AM. Clients who ride the bus would have to leave the site by 2:30 PM in order to catch the last bus back to Placerville. In addition, this area has few amenities for clients and family members; there is a social network and things to do in Placerville that doesn't exist in Shingle Springs.
  - Several Commission members were interested in touring the proposed site. Claudia asked that this opportunity be extended to all interested Commission members and stakeholders; Russ Fackrell, El Dorado County Facilities Manager, indicated that he would work with the property owners to set up a tour. It was also suggested that Commission Members and other stakeholders might be interested in touring the current MH Clinic as well as the proposed site.

- Two of the Golden Plaza partners, Stan Paolini and Brady McGuire, attended the meeting to address concerns about the current MH clinic site that were summarized during the 6-27-2012 MH Commission meeting. They had also prepared a more detailed written report of building issues concerning both sites, which was distributed by email to Commission members, and is included as an appendix to this document [Appendix C]. The partners provided examples of building modifications that have been implemented to benefit MH clients and staff, and indicated that many of the walls in the building are non-structural and can be moved to meet current needs.
- Commission members were interested in the perspective of West Slope (WS) clients regarding the current MH Clinic site, as well as the experience of clients of the Tahoe MH Clinic, which was relocated about six months ago. Joan Meis-Wilson cautioned that the WS move should not be compared to Tahoe, as the circumstances are different.
- Commission members asked about the amount of money that potentially could be saved by moving to the proposed site.
- Joan Meis-Wilson acknowledged that while the proposed site has a designated kitchen space, including a sink and the necessary electrical wiring, kitchen appliances would have to be purchased. The proposed site is set up as a clinic, and offers a better opportunity for setting up separate adult and children's areas.

#### VIII. Social Security Issues/clients losing benefits

- Issues regarding Social Security Insurance (SSI) benefits appear to be in a holding pattern. Lee Jackson noted that workers in the Social Services Division have also found that SSI issues are becoming more time-consuming and more difficult to resolve. Claudia asked if there has been any follow-up with those MH clients for whom letters were written during March and April of this year. Joan Meis-Wilson will include an SSI follow-up in the Departmental news for the August meeting of the MH Commission.

#### IX. Commissioners' Comments

- Jim Abram reiterated his interest in touring the proposed site, and the importance of making this opportunity available to others as well.

#### X. Adjournment

**Appendix A**  
**Health and Human Services Agency: Mental Health Departmental Update**  
**Mental Health Commission**  
**July 25, 2012 Meeting**

**Follow-Up Items:**

**Program Manager 2 Comments (Patricia Charles-Heathers)**

- I have now been on board a little over one month
- Conducting weekly planning meetings with Adult Outpatient Services, Children Outpatient Services and the PHF/PES/CRT. Outpatient Services have developed Mission and Vision statements and are in the process of obtaining feedback from their staff.
- Conducting weekly planning meetings with Laura Walny and Robert Evans to design the ICM Model, interface the model with PES and work on the process for dissolving the CRT. The design is now completed and the staffing will be sent to Fiscal for a Cost Analysis.
- Conducting weekly Managers Meetings; currently working on identifying the data needing to be collected in order to generate weekly, monthly and quarterly reports.
- In the process of recruiting a Patients Rights Advocate to replace Prestine Skinner.

**Outpatient Services (Laura K. Walny)**

- **OP Staffing:** On Monday, July 16, 2012 we welcomed Clinician Doris Jones back to MH after being away for six years. Doris has been working for our partners in Human and Community Services; specifically Public Guardian, Adult Protective Services and most recently Child Protective Services. Doris has joined the Adult OP Team. As we continue to have 2 vacant positions (1 Children, 1 Adults), we will be starting another clinician recruitment.
- **Adult OP Caseload (June):** 444 clients open to services managed by 4.6 clinician equivalents with 2 MH Workers and limited extra help worker/aide time; caseload average 67.27 clients per staff.
- **Children's OP Caseload (June):** 204 clients open to services managed by 6 clinician equivalents with 1 p/t extra help MH Worker; caseload average 34 clients per staff.
- **Worker of the Day:** (Adult/Children's Unit Clinicians is now available to address unanticipated situations during business hours). To date, WOD has responded to 111 situations: 27 requests for service, 57 urgent situations (defined as "without timely intervention likely to result in immediate psychiatric emergency), 17 information only calls, 12 crisis situations.
- **Adult Registration (formerly Tuesday Intake):** Implementing Triage Protocol on July 30, 2012; training has been provided for clinical staff to facilitate more efficient access to needed services. We will test the process for a couple of weeks to identify any areas which need to be fine tuned and then determine the plan for increasing registration days and expanding access to services. Averages for last 4 weeks: 12 Registrations per week, 5 "no shows/cancellations", 4 assigned to clinicians, 3 referred out to community partners.

**MHSA (Sophie Cabrera)**

- **MHSA Advisory Board:** The MHSA Advisory Board met on July 17, 2012 to discuss the FY 2012/13 MHSA Plan. The MHD presented proposals and received support from the Advisory Board on four (4) changes to the existing plan:

- The MHD will proceed with terminating the current Innovation Plan (Closing the Gap). MHD will notify the Mental Health Services Oversight and Accountability Commission (MHSOAC) of the closure. FY 12/13 will be used to plan for future innovation plans.
- A new Workforce Education and Training (WET) will be established that will fund CIT training for County Sheriffs and EMS staff. Training will also be made available to local law enforcement (SLT, Placerville PD).
- The MHD will proceed with closing the CRT and redirecting resources that will establish and staff Intensive Case Management (ICM) teams and support alternative housing options. Establishment of a subcommittee to explore housing options (Board & Care, Room & Board, etc) was recommended. The MHD will establish a committee.
- Prevention and Early Intervention (PEI) Children's programs will be consolidated into one program. Services will be provided primarily by community providers via contract. The Advisory Board recommended that the PEI plan have a family focus designed to address the reduction of trauma and violence. A subcommittee will be established to continue development of the plan.

### **South Lake Tahoe (Barry Wasserman)**

- Use of Senior Center - MH Staff report friendly and cooperative interactions with Senior Center staff after initial uncertainty and coolness. Two MH staff members have now relocated to the Sr Center and a number of clinic groups are now meeting there. This has relieved some space pressure on the Johnson site.
- Because the SLT schools no longer offer summer school, it can be difficult to maintain contact with children and families during the summer. In response, clinical staff are operating a number of age-based summer children's groups that include fun activities with necessary social skill building and sense of belonging. When necessary to allow participation, staff are picking up children at their homes. They are to be commended for their initiative in finding a practical and clinically appropriate way to provide access and services over the summer to some of our most at risk young clients.

### **Inpatient and Crisis Services (Rob Evans)**

- Provided Patricia Charles-Heathers with essential information to assist with ability to meet the increasing demand of PHF beds as well as continued improvements of the service delivery and program model.
- Continuing to operate at maximum capacity and needing to refer El Dorado County residents in need of inpatient psychiatry services to out of county contract facilities due to lack of PHF beds.
- Continuing to provide benefit analyst services to PHF clients with approximately 90% of clients leaving with health benefits supporting both PHF costs and other community based health care services. This increase in potential revenue will translate to increased services at the PHF as well as better health outcomes for our county residents.
- Engaged in planning process to restore the PHF to its previous 16 bed capacity.
- Planning food service delivery change which will include hiring a professional cook to manage the kitchen, food ordering, preparation and work with our dietitian. This will put the PHF in compliance with DMH standards and increase mental health services on the unit.

### **Clinical Management Unit (Carol Martin)**

- To continue to provide clients with the best customer service part of the unit staff attended training on understanding the client's point of view, to be prepared to handle all

situations, and insure the clients are aware staff is there to provide support to them in receiving services.

- Our staff prepared for the new arrival of the two new psychiatrist. Time and attention was given to the details of having office space, tools and resources ready for the doctors to implement in their day-to-day work. The unit has dedicated a portion of one Senior Medical Office Assistant's time to specifically give attention to task that assist the doctors.
- Coming soon...acknowledging the importance of including all community in the conversation and action of planning a new Innovation three-year plan, the unit staff will work with MHSA Innovation to use the reception areas bulletin boards to keep everyone informed of upcoming planning meetings and ways to become involved!

### **MHSA Innovation (Carol Martin)**

**Please consider the information as the community moves forward to start the planning of a new three-year plan:**

#### **Definition of Innovation**

An innovation project is defined, for purposes of the MHSA guidelines, as one that contributes to learning rather than a primary focus on providing service. By providing the opportunity to "try out" new approaches that can inform current and future practices/approaches in communities, an innovation project contributes to learning in one or more of the following three ways:

- Introduces new mental health practices/approaches including prevention and early intervention that have never been done before, or
- Makes changes to an existing mental health practice/approach, including adaptation for a new setting or community, or
- Introduces a new application to the mental health system of a promising community driven practice/approach or a practice/approach that has been successful in non-mental health contexts or settings.

To clarify, a practice/approach that has been successful in one community mental health setting cannot be funded as an INN project in a different community even if the practice/approach is new to that community, unless it is changed in a way that contributes to the learning process. Merely addressing an unmet need is not sufficient to receive funding for this component. (MHSA - Enclosure 1, page 5-6)

### **Behavioral Health Court Report (Shirley White)**

- South Lake Tahoe Behavioral Health court is currently serving 7 active clients. Two new referrals are pending enrollment and are undergoing assessment to determine eligibility for the program. 2 of the current participant will be pending successful graduation within the next two months due to their compliance and success with their treatment plans. Both of these participants have secure safe and stable housing and are reporting very good outcomes with Dr. Stone. Next proceedings will be held in South Lake Tahoe on August 16 with the Honorable Judge Steven Bailey presiding.
- Placerville Behavioral health Court has 10 active participants. One participant is scheduled to graduate at the August BHC hearing. She has been an outstanding success throughout her year of participation and will continue on in BHC as mentor to new program participants. All of the 10 participants have been in compliance with their treatment plans this month and have attended all weekly groups. The next BHC hearing in Placerville will be on August 6, 2012. The Honorable Daniel Proud will preside over the hearing.

**Appendix B**  
**[Email from Claudia Ball, Chair of the Mental Health Commission]**

To: Joan Meis-Wilson, Assistant Director, Mental Health, HHSA  
To: Members of El Dorado County Mental Health Commission  
From: Claudia Ball, Chair, MHC

I would like to clarify some of the concerns discussed at the last MH Comm. Meeting of June 27, 2012. It seems as though most of them center around the issue of transportation of MH clients. I would also like to touch upon issues commissioners have brought forward at that meeting and since.

Additionally, I am asking that all West Slope commissioners take the time within the next two weeks and drive past the Slate Creek Center proposed location on 4140 Mother Lode Drive, east of the intersection of South Shingle Road and Mother Lode. This location used to be the site of Tribal Health and is just east of Lee's Feed Store. Please keep in mind that under the current arrangement, El Dorado Transit would be dropping off and picking up passengers in front of the Gold Harvest Market/Valero Gas business on the opposite side of the road and approximately 3/10 of a mile west of the proposed location. Here are some obvious problems causing concern to commissioners.

- Passengers would have to cross Mother Lode Drive. They could walk a short distance to the west where Mother Lode, South Shingle and Ponderosa Rd. Overcrossing and Hwy. 50 East On/Off ramp intersect. However, to get to this intersection, they will have to walk across a strip mall/gas station driveway and there is no sidewalk between the bus stop and the intersection. The bus stop, a grassy area approximately 35' x 15' is between 2 very busy driveways; vehicles pull into this strip mall very quickly. Commissioners have seen passengers darting across Mother Lode through traffic.
- The current bus stop is awkwardly placed. Westbound Mother Lode curves while at the same time the grade of the road increases as it approaches the bus stop/intersection area, leading to inadequate visibility and time for reaction.
- Other than the newly built "76" gas station on the corner of South Shingle and Mother Lode, there are no sidewalks on either side of Mother Lode in this area.
- Speed of traffic is an issue. You need only to spend some time in this area to observe the safety issue.
- Heavy traffic usage occurs; I was amazed how much traffic there was. Mother Lode is very busy and many vehicles enter/exit eastbound Hwy. 50. Heavy traffic also comes from South Shingle and Ponderosa.
- A confusing situation for pedestrians arises at the crosswalk which lacks signage warning to watch for pedestrians. Westbound Mother Lode traffic encounters a red light while simultaneously a green turn light allows one traffic lane, the outer right Mother Lode traffic lane to proceed north onto Ponderosa Rd. while all other traffic is stopped. A pedestrian would notice all traffic stopped and mistakenly believe the intersection is clear for them to proceed across Mother Lode. However, an approaching vehicle would see the green turn signal, not expecting a pedestrian to step right into the intersection where there is no margin for error. Additionally and more importantly, vehicles are driven at a higher rate of speed through this one turn lane of northbound Ponderosa traffic, This speed acceleration is due to the traffic lane being primarily used for unrestricted entry to westbound Hwy. 50, no stops or yields; the traffic light where Ponderosa intersects with North Shingle is **past** the Hwy. 50 entrance.
- Shared Turn Lane (Suicide Lane) on Mother Lode, westbound, at intersection becomes part of left turn lane onto South Shingle. Eastbound, it becomes a left turn lane into the strip mall/Valero Gas parking lot driveway, adjoining the bus stop island. Additionally the driveway to the east of the bus stop has traffic emerging from the opposite side of Mother Lode from the Reibes building double driveway. The Shared Turn Lane makes

an already bad situation worse. When traffic is heavy, as when I saw it, and going very fast, it seems like vehicles are going quickly in every direction.

- While the Mother Lode intersection is ADA compliant, it would be difficult for anyone in a wheelchair to make their way from the bus stop to the intersection. They would have to use their wheelchair on a very busy road.

Additionally, commissioners are anxious to understand several points.

- What will the cost be for the new building? How does this compare with the over-market cost of \$ .50 per square foot the county is now paying for the current location? What is the building's square footage? A commissioner has expressed the thought that it would be good to be able to compare the rents for both buildings to see what savings there is on the new building and will the money saved be enough to pay for MH's own bus shuttle service for clients as well as hiring new clinicians, as was proposed at the last comm. meeting. Can the rent money saved be allocated to a bus shuttle service program without approval of the BOS or whoever designates that money's usage?
- Has a site analysis been requested of El Dorado Transportation, and, when will it be performed? How does the parking compare with the current location?
- It is obvious that water leakage has been occurring, with fresh paving patch near the front steps. In the middle of the front parking there was a 10' x 6" stretch of water on top of a patch.
- During the last MHC meeting, MH put forth the idea that it may be possible to use department vans to transport clients. Has a department Transportation Plan been started to begin to consider the issue?
- There has been comment that the Missouri Flat Transfer Center's Shelter is inadequate should many more clients need to use it due to a move and increased bus usage. Will the department broach this issue with El Dorado Transportation?

Thank you for again listening to our concerns.

Claudia

Appendix C

[Correspondence from the Golden Plaza partners, sent to the Mental Health Commission]

**GOLDEN PLAZA I, LLC**

**P.O. BOX 188321  
SACRAMENTO, CA 95818**

**TELEPHONE: (916) 455-0982**

July 19, 2012

El Dorado County  
Mental Health Commission  
670 Placerville Drive  
Placerville, CA 95667  
Attn: Claudia Ball, Chairwoman

Subject: **Mental Health Lease & Mental Health Commission Meeting Minutes 6/27/12**  
670 Placerville Drive, Placerville, California

Dear Mental Health Commission:

I have read the Mental Health Commission Meeting minutes of June 21, 2012, and the comments prepared by Ms. Wilson regarding the analysis of the existing Mental Health location and the potential Shingle Springs location and I wish to provide you with the following information.

As some background, my partners and I met with our District Supervisor on October 10, 2011 regarding making a rental concession after receiving a letter from Mr. Fackrell requesting that reduction. My partners had questions about the budget and told our supervisor that we would make a concession. Our Supervisor told us that he would look into the matter and get back to us. Unfortunately we have not yet heard anything back. My partners and I are still willing to make rental concessions and request the opportunity have time to speak at the next Mental Health meeting agenda regarding the lease, as we would like to answer any questions.

I also want to clear up some misconceptions and inaccurate information that appears to be made, as the Exhibit "B" analysis matrix from the June 26<sup>th</sup> Mental Health Commission Meeting minutes seems incomplete, heavily biased towards the potential future location and left out a lot of analysis regarding both sites which I am providing below:

**Pros of 670 Placerville Drive location:**

- Superior location central to Placerville & County - Close to US 50 & Hwy 49
- Large amount of Parking, 118 parking and parking spaces at facility conforming to current City codes
- Safe with City sidewalks along street and walkable to Placerville for clientele and staff
- Bike lane access to building and Placerville
- Regular stop on El Dorado Transit Route
- Fully Code Compliant Property for Building Code, Title 24, ADA and Fire Code
- Fully Handicapped accessible, ADA and CA Title 24 improvements certified by City of Placerville
- Elevator for wheel chair access
- Natural, serene, therapeutic Creek side setting for clientele and staff
- Low street acoustic traffic noise creating a stress free environment for clientele and staff
- Newly installed patio next to creek \$4,223 cost
- Newly installed landscaping \$32,875 cost

**Pros of 670 Placerville Drive location: (continued)**

- Therapeutic gardening and patio area for clientele
- 3 Kitchenettes/Break Rooms, one on each floor
- 4 Conference Rooms (2 large, 1 medium, 1 small)
- 3 Central Lobbies / Waiting areas with elevator access
- Loading zones in front of building entrances
- Future expansion capability of additional 14,000SF building (County has first option for space per current lease agreement)
- Brightly lit parking lot, all parking visible from street for enhanced security
- Close to Emergency Responders headquarter for Fast Response time from Police, Fire & Sheriff
- Advanced Fire Alarm system and annunciators installed for clientele and staff safety per Fire Department for occupancy loads
- Short commute for staff & clientele
- Close to nearby Mental Health Facilities, Puff unit, County Facilities and Marshall Hospital
- Close to nearby New Morning, MORE Workshop, Courts, Health & Human Services
- Specialized Sonitol Alarm & Door Locking System installed in 2011 at \$77,000 cost
- Specialized High Bandwidth (Opt-E-WAN) Network capability installed in 2009 at \$38,000 cost
- Specialized Data Wiring installed through out space at \$50,000+ cost
- Original Space Planning done to EDCMH's needs (staff has been relocated through out the space recently over the last couple years, not in accordance with original space planning)
- Building owners maintain digital AutoCAD files of plans and space use for ongoing, cost efficient space planning. Services can be provided at nominal cost.
- Separate wings for varying uses and management with common area lobbies in between
- Private restrooms on each floor, no shared common area restrooms and associated security problems
- No moving costs -\$100,000
- Energy Efficient Building, energy efficient lighting installed in 2003
- Local Building Owners provide fast response time and timely maintenance service, often same day service. Licensed Civil Engineer with over 50 years experience on staff to address code compliance issues.
- Local Building Owner's invest in the property and accommodation of Mental Health regardless of contractual obligations ( ie., Patio \$4,223.,Additional Parking Lot \$207,586, Landscaping \$32,875 and \$1,000's of dollars of many other minor improvements)
- 5 year history of receiving exceptional 24/7 service from Building Owners who go above and beyond to accommodate County and Mental Health Staff at any time of the day/night, weekends. Maintenance response time is usually within a few hours.
- Preventive Maintenance program for building systems to maintain service and reduce problems, (ie., HVAC maintenance, rotate out water heaters to avoid leaks, etc.) Owners stock many repair items to avoid downtime, ie., Replacement HVAC units and parts to avoid significant downtime.

**Golden Plaza response to Joan Meis-Wilson's Cons:**

Concern: Security is an issue - many doors to secure and maintain security.

Response: Sonihol & Alarm system with automatic locking doors installed by EDC 2011 at cost of \$77,000 to address this. Central monitoring station installed at reception area. Doors are a requirement of Building and Fire Codes due to occupancy loads for safe egress in an emergency situation.

Concern: Inadequate Group Rooms.

Response: Not sure what the definition of a "group room" is. Several conference rooms available.

Concern: Cost of Rent.

Response: Modern buildings with good locations, high levels of maintenance, proper ADA access and above adequate parking are more expensive. Owners willing to negotiate on rental rate.

Concern: Entrance is unwelcoming and confusing.

Response: See January, 2001 letters from Deb Lane regarding County installing directional signage. Not all signage was installed by County in 2007. A small amount of additional signage will remedy this situation. Location is well known by clientele after 5 years of use.

Concern: Medical records are located into two separate areas.

Response: This was done during space planning in 20007 at County's direction.

Concern: Lack of private spaces to meet with clients. All adult clinicians share office space.

Response: Not true, most clinicians have private offices.

Concern: Support staff located in 4 separate areas making it difficult to provide support and coverage for each other.

Response: Staff has deviated from original space planning and relocated offices.

Concern: Children share reception space when seeing doctor.

Response: Shared reception areas are normal in buildings and doctors offices. Individual reception areas were not part of the Mental Health original space planning.

Concern: Staff are located in Wellness center area where it is loud and often disruptive to work or to work staff.

Response: Staff has made these changes from the original space planning.

Concern: Ventilation is poor or lacking. Many areas do not have adequate air flow resulting in stuffy, hot or cold spaces.

Response: Incorrect. System was balanced prior to County's occupancy. See attached letter regarding HVAC Systems dated 7/17/2012.

Concern: Security system is unpredictable- locking and unlocking at random.

Response: Minor County maintenance issue. County has started maintaining its own Sonitrol system.

Concern: No break room for staff.

Response: There is a breakroom on each floor with kitchenettes. One staff member moved her office into the kitchenette on lower floor, once again deviating from original space planning. Landlord provided new outdoor patio for additional break space.

Concern: Main reception is inadequate and receptionist is isolated from other staff' difficult to get help if crisis happens in reception area.

Response: Reception area was designed by County to be at this central location and enhanced with bullet proof glass for security and control of clientele. Receptionist has newly installed special alarm panel that tells her where issue is located. Receptionist is never completely central to all people in any building, as there are always hallways. There is another receptionist window on 2nd floor.

Concern: Meeting rooms must be accessed through staffwork space- door is often propped open to allow access which is security risk..

Response: There are 4 separate conference rooms.

Concern: Poor design for use of space..

Response: Space planning was done at County direction in 2007 over a 9 month period and endless back and forth sessions of meeting with staff by Deb Lane of El Dorado County General Services. Ms. Lane interacted with staff to achieve an efficient space plan. The problem is that staff has independently deviated from space planning by relocating offices and changing the use of different rooms without any space planning considerations. Also, other departments from the Mallard Lane location were moved into the building in 2009 without any space planning.

### **Cons of Shingle Springs location:**

- Lacks enough parking, 49 County approved and permitted regular parking. Approximately only 40 currently available due to other tenant's use and portions of parking lot fenced off. Mental Health previously had only 50 spaces at Pioneer Plaza location in 2006 and it was not enough parking.
- Very tight parking spaces and parking lot access. Lacks loading zones for County vans.
- Rear parking lot doesn't conform to El Dorado County standards is not lighted, has steep slopes and was built without County permits or approvals. We have heard there are code compliance issues. It is in an area that lacks visibility and puts clientele/staff at risk, especially at night dark.
- Not fully Title 24/Handicapped accessible, 12 steps up to main entrance, building has two major interior grade separations and will need elevator(s) installed to be fully ADA accessible and avoid customer complaints. There has been significant local comment about ADA comment and litigation brought by a local ADA attorney.
- Inferior location, primarily older industrial area, hard to find.
- 10 to 15 minute commute each direction from Placerville.
- Poor El Dorado Transit access, long travel times to site. No current transit stop.
- Building site and area location lacks amenities.
- Lacking street frontage landscaping.
- Long response time from headquarters for First Responders (Police, Fire, Sheriff).
- Too far away from Marshall Hospital and EDCMH Puff unit.
- Probable loss of clientele due to distance of location.
- Unsafe for Pedestrians. Not walkable to community, no sidewalks or bike lane access. Dangerous egress visibility onto Motherlode Drive due to high traffic, high speed & lacks of sight distance.
- Parking lot lighting does not meet current County requirements.
- No loading zone in front of building entrance for EDCMH vans.
- Concrete Tilt-up Warehouse style building.
- Lacks controlled lobby waiting area (current site has bullet proof walls and bullet proof glass window for security and control of clientele.
- Expensive Moving Costs \$100,000+
- Expensive Tenant Improvements to tailor for specific needs (long permitting & construction periods).
- Lacks expansion capability as site area is maxed out.

El Dorado County Mental Health Commission

19 July, 2012

Page -5-

- Lacks Sonitrol Alarm & Automated Access Hardware \$77,000 cost at current site.
- Expensive Data Wiring needed to meet County standards \$50,000 cost at current site.
- Lacks AT&T High Bandwidth Internet for new MH software (Opt-E-WAN) accessibility \$38,000 cost at current site.
- Loss of \$70,844 spent on tenant improvements at current site.
- Sunset Lane Affordable Housing is not a County project, financing unsure.
- Out of Town owners live in Bay Area, no history renting to County.

My partners and I feel we have given exceptional service to the County and its employees and have invested heavily in accommodating them when not contractually obligated to do so. Attached is a narrative discussing the move into Golden Plaza from Pioneer Plaza and the associated costs of \$659,649 that have been spent to date to accommodate the Mental Health Department. My partners have spent over \$250,000 since 2010 to build additional parking, landscaping and patio area As stated previously, my partners are willing to assist the County in updating space planning at the current facility and have the professional staff and computerized CAD drawing files to do so efficiently.

If I can be of assistance to answer any questions please telephone me at (916) 455-0982 office or (916) 425-4243 cel.

Sincerely,

Brady McGuire  
Managing Member  
Golden Plaza I, LLC

Attachments: Narrative of El Dorado County Mental Health Lease  
Costs spent to date at current Golden Plaza Facility  
Letter regarding HVAC Systems at EDCMH dated 7/17/12

cc: El Dorado County Mental Health Commission members  
Russ Fackrell, Facilities Manager, El Dorado County  
Norma Santiago, El Dorado County Supervisor, District 5  
Ron Briggs, El Dorado Mental Health Commission & Supervisor District 4  
Golden Plaza- Earl "Mick" McGuire, Stan Paolini

## **NARRATIVE**

### **EL DORADO COUNTY MENTAL HEALTH LEASE GOLDEN PLAZA BUILDING 670 Placerville Drive, Placerville, California**

In October of 2007 El Dorado County Mental Health moved from very cramped space at the Pioneer Plaza on Placerville Drive into the more spacious Golden Plaza Professional Building. There were single offices with three or four employees working at card tables. The Pioneer Plaza lacked adequate parking for the growing Mental Health Department, as employees and clientele often parked across the street at the Movie Theater site and crossed busy Placerville Drive due to only 50 allotted parking spaces. Careful facilities and space planning was performed by EDC General Services staff and consultants to create well planned space that met staff, clientele, ADA, building code, HIPPA and other necessary requirements. The planning, engineering and permitting stages took approximately 9 months, while the overall process including construction took a little over a year.

In October, 2007 EDCMH moved in to 14,000 square feet of professional office space in the Golden Plaza Building located at 670 Placerville Drive, The Golden Plaza Building is a three story, a fully upgraded ADA accessible building with elevator and handicapped accessibility throughout.. The building is situated in a natural creek side setting that creates a serene environment for its Mental Health practitioners and clientele while being close to the County Administrative buildings and the other County owned Mental Health facility located on Spring Street in Placerville. There are four conference rooms, kitchenettes and common area lobbies on all three floors allowing for waiting areas. The site has future expansion capability for growth with a future 14,000 square foot building planned at the adjacent 650 Placerville Drive site.

The Golden Plaza site originally had approximately 76 parking spaces but the landlord installed 42 additional stalls of parking in 2010 to create a total of 118 parking spaces. The additional parking created above adequate parking ratios for both staff, clientele and allowing for future expansion, large meetings and overnight parking of approximately 10 County owned vehicles in a well lit and safe environment.

The Landlord installed a stamped concrete patio next to Hangtown Creek in 2009 at the east end of the building at EDCMH's request to facilitate the Wellness Center and have a relaxing place for staff and clientele to rest, conduct activities and raise gardens.

The Landlord and the County have invested heavily in the building and site to meet future Mental Health Department needs. Beyond heavy investment by the Landlord to facility in physical improvements such as parking, landscape, patio, ADA improvements, the County has made a large investment in the construction of tenant improvements, extended high capacity data service known as Wide Area Ethernet Service/VPLS (AT&T Opt-E-WAN) from street to allow integration of Mental Health's new convergence software that handles combined voice and data for new Mental Health software, installed high speed networking cabling from Placerville Drive, installed a very high amount of telephone and network cabling throughout that is centralized into two data server rack rooms.

County most recently installed Sonitrol door control hardware and special panic alarm systems throughout the space. The current location allows for the quickest response times from City of Placerville Police, Fire Department and Sheriff's office that are all close by, which increases security for both staff and clientele.

The current lease expires on October 31, 2012 and has two (3) year extension terms. Landlord has invested heavily in improvements specifically to suit EDCMH's needs and would like to continue the lease. Landlord has agreed to make rental concessions to accommodate the County in difficult budget times and feels that the current site provides the best, most efficient location for Mental Health.

**COSTS SPENT TO DATE  
GOLDEN PLAZA  
670 PLACERVILLE DRIVE**

**Costs paid for by Lessor (Golden Plaza)**

-Space Planning	\$	4,700.00
-Tenant Improvement Plans & Engineering	\$	8,000.00
-Plan Check Fees- Tenant Improvements	\$	2,150.00
-Plan Check Fees- Parking Lot Expansion	\$	2,472.00
-Construction Project Management	\$	19,479.00
-ADA Improvements \ Whitman Concrete	\$	16,082.28
-Preliminary construction work- Kime Construction	\$	16,702.44
-Patio- East End- Ken Strauch, Western Sierra	\$	4,223.33
-Parking Lot Improvement Plans	\$	10,080.86
-Paving& Associated grading work - Joe Vicini	\$	207,856.00
-Geotechnical Report Youngdahl	\$	1,455.00
-Landscaping Plans- Gary Hyden	\$	2,480.00
-Landscaping Interior Parking Lot	\$	13,867.00
-Landscaping Corridor- Mark Barnes	\$	16,527.50
Sub-Total	\$	325,805.41

**Costs paid for by El Dorado County (EDCMH)**

-Construction Tenant Improvements	\$	70,844.13
-High Speed Data Communication (Opt-E-WAN)	\$	38,000.00
-Data Communications wiring	\$	50,000.00
-Sonitrol Door Control hardware & alarm	\$	77,000.00
-Moving Costs	\$	??
-Misc Expenses	\$	98,000.00
Sub-Total	\$	333,844.13

Total	\$	659,649.54
-------	----	------------

# GOLDEN PLAZA I, LLC

---

P.O. BOX 188321  
SACRAMENTO, CA 95818

TELEPHONE: (916) 455-0982

July 17, 2012

Mr. Russ Fackrell, Facilities Manager  
El Dorado County  
3001 Fairlane Ct., Suite 1  
Placerville, CA 95667

Subject: **HVAC Systems at El Dorado Mental Health**  
670 Placerville Drive, Placerville, California

Dear Russ,

I wanted to take the time to respond to some of your and staff's concerns about the HVAC "air flows" in the building, so that you and Angelo can better understand the systems and the maintenance that we perform.\

## **Building Construction**

The building is a three story building built into the hillside. The top floor units work the hardest as the top floor roof absorbs the most radiant heat through the roof. The lower two floors units work much less, as they are shielded from much of the roof top radiant heat and maintain a more ambient temperature from the elevated parking structure and hillside. The design conserves a lot of energy on the lower two floors, as those units run less often. The original architect Bailey & Kantz were known for their energy efficient architectural designs.

## **System Type**

Each individual HVAC system is comprised of one exterior Heat Pump Condenser unit and one interior Air Handler Unit. Ducting runs from each Air Handler Unit to vents in offices with returns. Some of these runs have dampers installed to regulate the air flows and can be adjusted. .Additional dampers can be installed to further regulate air flows to individual offices.

## **System Sizing**

A 3 ton unit per 1,000 SF in a modern, insulated space is considered oversized but allows the unit to run less often thereby saving energy costs. Generally 600-800 SF per ton is considered adequate with normal height ceilings, so 3 tons per 1,000 SF is far above average, as a 3 ton unit is often used to cool over twice that space.

## **System Balancing**

The City of Placerville required the system "air flows" to be "balanced" during the building tenant improvements in 2007 as part of the final permit sign off prior to the County's occupancy. A copy of the balancing report from Ski Air Conditioning and the City's permit correspondence is attached. Ski Air Conditioning was the original installer of the Carrier brand equipment in the building and has also done a great majority of the County's HVAC work in the past as well.

El Dorado County-HVAC AirFlows

17 July, 2012

Page -2-

### **Zoning**

The building is divided into 16 areas with roughly one 3 ton HVAC unit per 1,000 SF. This allows areas to be zoned with digital thermostats, ie., you can set a thermostat to not cool a conference room area when not in use and save energy. This is different from most buildings that have just one or two larger roof top units and require the unit to run continuously to heat and cool the entire space. This design saves energy and money by not requiring all areas to be heated or cooled continuously.

### **Thermostats**

Energy saving 7 day programmable digital thermostats have been installed throughout the space and allow for 4 separate temperature adjustments a day, ie., Morning, Day, Afternoon and Evening. This allows for maximum energy savings by shutting the units down during the evenings and weekends and to temperature settings that more accurately meet daily temperature fluctuations. I believe the County could save substantial electricity costs by implementing a more stringent program and adhering to it. Previously, Brian was maintaining the thermostat settings on-site, but he has been gone for over a year and no one is in charge of this task.

### **Filter Changing**

Up until December of 2011, Ski Air Conditioning had been changing the filters quarterly in the systems throughout the building and the County was invoiced for this reimbursement cost per the lease.

In December, unbeknownst to myself, County Maintenance personnel changed the filters throughout the County's space and installed incorrect, highly restrictive HEPA type filters. These types of filters are constructed of a dense, pleated paper and can greatly restrict air flow by up to 30% to 40%, or more. HEPA style filters clog quicker thereby restricting the air flow more and make the Air Handler unit work harder which can cause premature wear on the unit under this increased load and consume more energy as efficiency loss occurs. The original specifications for the Carrier Air Handlers require a thicker, more permeable, breathable filter. I had new custom filters installed just five months before the County changed the filters in December, but they were discarded by County Maintenance when installing the HEPA type filter.

### **Preventive Maintenance**

Preventive maintenance was last performed on all of the outside condenser units in May, 2012. Each unit was cleaned and hosed out removing dirt build up, coils were cleaned with coil cleaner for maximum efficiency and fan motors were oiled. Inside Air Handler unit coils were also cleaned and vacuumed out and coils were cleaned with coil cleaner allowing the units to operate at peak efficiency. Filters were also changed at this time. We inventory two new condenser units and most replacement parts to make any necessary repairs swift to alleviate downtime so employees aren't subjected to any long wait periods for repairs.

I hope this addresses your concerns regarding the HVAC systems and flows, if you have any further questions, please telephone me at (916) 425-4203.

Sincerely,

Brady McGuire  
Golden Plaza I, LLC

Cc: Angelo Troquato, Facilities



# City of Placerville

Community Development Department  
3101 Center Street  
Placerville, California 95667

August 24, 2007

Mr. Earl McGuire  
P.O. Box 617  
Camino, CA 95709

PLAN REVIEW # 07-150  
APN:323-580-271  
OWNER: Golden Plaza Partners  
CONST. TYPE: V-N

PROJECT: Interior T.I. Wall Configurations  
ADDRESS: 670 Placerville Dr  
OCCUPANCY: B  
SQUARE FOOTAGE: 10,981

## PLAN REVIEW COMMENTS

1. CBC 1134B requires various areas of existing buildings to comply and or be made to conform to current standards at the time of additions or modifications. These requirements include the path of travel from disabled parking to the area(s) of remodel and the area(s) of remodel it self. Furthermore, an additional amount of monies in the amount of 20% of the cost of construction shall be allocated to bring any additional areas not in conformance into conformance with current standards.

Please provide amended plans which show that the parking space allocated, path of travel, entry door(s) and interior path for use by disabled persons using the remodeled area(s) compiles with current standards specified per CBC 11B. In addition, please complete the attached "Access Upgrade" form along with the "Declaration of Past Alterations, Remodels or Additions" form. This information may be used to determine if the total amount of monies required to be allocated should exceed the 20%. 1134B.2.1

2. Provide electrical panel schedules and additional documentation demonstrating that the installation of any and all new electrical devices and lighting does not exceed the capacity of the existing equipment to supply the required demands.
3. Provide documentation demonstrating that the existing mechanical system/equipment/fan speeds are correctly sized to maintain required air flow with the addition of air ducts and diffusers.

Jerry Griffin  
Plans Examiner

