

County of Fresno

ADVISORY BOARDS AND COMMISSIONS

FRESNO COUNTY BEHAVIORAL HEALTH BOARD DBH Health and Wellness Center 1925 E. Dakota Ave. Fresno, CA 93726

Meeting Minutes March 20, 2019

MEMBERS PRESENT	BEHAVIORAL HEALTH	<u>PUBLIC MEMBERS – </u>
Carolyn Evans	Dawan Utecht	<u>Continued</u>
Francine Farber	Sue Vang	Stan Lum
Katie Lynn Rice	Kristin Lynch	Fausto G. Novelo
Curt Thornton	Tami Defehr	Sharon Ross
David Thorne		Ryan Banks
Donald Vanderheyden	PUBLIC MEMBERS	David Alanis
Jerry Wengerd	Rondy Earl Packard, Jr.	Deanna Kivett
Marta Obler	Amanda Boone	Trish Small
Shantay Davies-Balch	Fidel Garibay	
	Mark Leanhart	
MEMBERS ABSENT	Mary Lou Brauti-Minkler	
Kylene Hashimoto	Elsa Quintanilla	
	Naomi Buchanan	
BOARD OF SUPERVISORS	Amanda Wngerd	
Sal Quintero (absent)		

I. Welcome and Opening Remarks

Chair Carolyn Evans opened the meeting at 2:32 PM.

In recognition of National Women's History Month, Francine Farber discussed the current era including the high number of women currently serving in U.S. government, including the House of Representatives and Senate. The celebration began in Sonoma County in 1978, then in 1980, President Carter declared a National Women's History Week during the month of March; however, by 1986 there were 14 states that declared it as Women's History Month. In 1987, Women's National History Month was declared for the country. Each year the National Women's History Project delivers a theme; this year's theme is *Visionary Women, Champions of Peace and Non-violence*, honoring women who have pioneered non-violence to change society.

II. Approval of Agenda by Board

Agenda approved

III. Approval of Minutes

Minutes approved from January 16, 2019 and February 20, 2019.

IV. Update & Program Review – Department of Behavioral Health – Director Dawan Utecht

Legislation

On March 11th Director Dawan Utecht attended an Assembly Budget Hearing on behalf of the California Behavioral Health Directors Association (CBHDA) held by Health and Human Services focusing on the Mental Health Services Act (MHSA). She gave testimony on a number of topics with the Department of Health Care Services (DHCS) and the Oversight and Accountability Commission (OAC) and the California Health Facilities Financing Authority (CHFFA).

Dawan added that CFFA recently put out a grant opportunity of \$26 million; however, did not understand why more counties did not apply. It is challenging time, as there are a numerous amount of competitive grants for Proposition 47, AB 1810, No Place Like Home (NPLH), the Edward-Byrne Justice Assistant Grant (JAG), and AB 1810, which is not competitive but much work is being done. Behavioral Health Directors will suggest that CFFA make future grants opportunities available that are need-based.

AB 389: This bill would put Peer Navigators in emergency departments. This proposal is for the state to fund peers in the emergency rooms to assist in response to individuals in mental health crisis.

AB 331: Proposed by Assemblymember Hurtado, counties would be required to have a suicide prevention plan for youth. Fresno County recently completed its plan.

Contracts / Board Agenda Items

Crisis Residential Facility: Crisis Residential Unit (CRU) is officially open and accepting clients who meet the criteria to enter the program. Have admitted between 8 – 10 individuals; anticipate reaching capacity in the near future.

LOSS (Local Outreach to Suicide Survivors) Team: the contract will go to the Board of Supervisor (BOS) on April 9th. As part of the Suicide Prevention Plan, the county will contract with Hinds Hospice for the LOSS Team.

JP Marketing – Communications Plan – April 9th: The group will assist the department in its plan for community outreach and engagement, including branding. It is important that programs funded through DBH will be recognized as such, specific branding, that will bring awareness to the community about the types of services and resources the department can provide.

A question about how the department will measure the success of contracts. If approved, the contract will be negotiated. Measurements may include, but not limited to, successful outreach of engagement efforts; how many individuals are touched by marketing efforts; and the successful implementation of how the department is recognized in signage.

Statewide Updates

Department of Healthcare Services Reorganization: Beginning in July, the DHCS is starting a re-organization of how services will be accessed through them. The Behavioral Health Division will only have non-Medi-Cal services. Services accessed through Medi-Cal will be directed to the Medi-Cal program, same program that receives physical health, long-term care facilities, developmental disabilities; this also includes the financing. Audits and Investigations will go into a separate divisions. Will provide updates as more is known.

Waiver Renewals: DHCS is anticipating the renewal of 1915(b) waiver, the method in which programs are carved out and the 1115 waiver, includes the Substance Use Disorder (SUD) Redesign. The 1915(b) waiver is anticipated to end in June 2020 and the 1115 waiver ends December 31, 2020. In 2020, this will give Behavioral Health Directors an opportunity to provide feedback on such things as including the IMB exclusion and changing how behavioral health departments are funded for services.

Public-Private Partnership Efforts:

- The Behavioral Health Action Committee that came from the California Health Foundation, to bring together large foundations, employers, and businesses, on how to improve the behavioral health services.
- CalMHSA California Partnership for Behavioral Health and Wellness will try to expand the statewide efforts by leveraging funding through private donors.
- Staglin Family Foundation BringChange2Mind a foundation out of Napa Valley, also trying to improve mental health across the state.

Faith-based efforts

There are number of faith based mental health providers, most recently the Westside Church of God, led by Pastor Binion. He connected with another pastor in Alameda County, taking a group to attend a training Creating Mental Health Friendly Communities. Since then the church has utilized parishioners that are licensed mental health clinicians and opened a counseling center within the church. DBH will work towards partnering with them, and other faith based organizations, and DBH will focus on doing more within that community.

Dawan added that the three NPLH applications submitted by DBH, preliminary discussions indicate that all applications received and that are financially feasible will be funded. DBH will continue to work with the state on the funding piece.

On March 21st, there will be a justice hub design session led by the courts and facilitated by Lynne Ashbeck, through Community Conversations. The group will look at how to design services for individuals that are interacting / intercepting with criminal justice system. Justice Hub concept is to locate and co-locate services in the downtown area to provide supports for individuals with mental health and / or substance use disorders that have been involved in the criminal justice system.

<u>Program Review: Comprehensive Medical and Behavioral Health Care Services at Fresno</u> County Jail

Provider: Wellpath (California Forensic Medical Group - CFMG

Last July, Wellpath / CFMG, is the current provider for jail medical services in the Fresno

County Jail, include medical care, chronic care, dental, detoxification, prenatal care, vision, and labs are provided. Behavioral health care services includes suicide prevention, substance use disorders, crisis stabilization, and care coordination.

Target Population for DBH includes adult inmates housed at the jail with acute mental illness and subacute mental health and substance use disorder conditions requiring clinical mental health care. Specifically targeting inmates with Serious Mental Illness (SMI).

The budget for the overall contract is almost \$23 million of that DBH contributes \$5 million, per year for behavioral health services. The funds include (Substance Abuse and Mental Health Services Administration (SAMSHA) grant and mental health realignment; SAMSHA grant can no longer be used for jail services. Therefore, there will be a shift in funds, using more realignment funds in place of SAMSHA funding. During the six-month reporting period, July 2018 to December 2019, over two thousand unique clients were served and number of services billed is just over thirteen thousand.

The average daily population of the jail is just over three thousand, of those 749 are receiving mental health services, and 182 diagnosed as SMI. Of the 182, 54 are segregated by solitary confinement, not ideal; however, this is in part due to the current design of the jail. Those with SMI are required to have three mental health contacts per week and a minimum of seven hours of out of cell recreation per week.

Through a new component of the contract, SUD services will be provided. Individuals will be assessed; thereafter, a treatment plan will be developed; they can also receive detoxification management, counseling, treatment of co-occurring / dual diagnosis disorders, and psychoeducation. The SUD team will consist of five full-time staff (1 SUD Counselor, 3 Licensed Marriage Family Therapists, and 1 Care Manager).

Discussions are happening for a new strategy, this includes providing Courtesy Discharge Transport Services. At discharge, clients are offered a ride by the Fresno Sheriff's Office to community resources and ensuring they are given the proper medication when being discharged. Since December 2018, of the 82 offers made, 10 were accepted, 72 declined and other discharges are not applicable. Not all discharges were offered rides due to already securing rides, discharge was immediate, or they were discharged to another facility. Additionally, if given a 72-hour notice of discharge, in an attempt to ensure clients receive their medication at discharge, Wellpath staff will gather medication for clients to have on their property.

Shantay Davies-Balch recently joined the BHB, as a community member and someone with lived experience, mental health is very important to her. She is very interested in ensuring consistent models of care for treatment. She is happy to be a part of the board.

V. Old Business

a. Site Visit Report—Fresno County Jail and Wellpath Medical Services
Five members of the BHB and one Family Advocate toured the jail. Members reported it was
interesting to see how things work in the jail, from the facility to staff. Due to the design of
the jail, transporting inmates between floors is necessary in order for them to attend
programs or therapy. Despite the challenges of staffing and high inmate population,

members were impressed by all the work and coordination from staff of the Fresno Sheriff's Office and Wellpath, to ensure assessments, safety checks, medical checks, etc. are getting done.

In addition to staffing shortages, members were concerned about the therapeutic environment, in that some inmates must be in cells during group therapy. Members were informed that the safety cells are a necessary caution when an inmate is determined to be harmful to self and / or others. In those cases, the inmates are given a 24-hour follow-up, followed by another evaluation within seven days, then 30 days. They may be seen more often in that timeframe by a clinician or therapists if necessary. There are three contacts per week by a licensed therapist. The contacts can happen in two group meetings and one individual session or two individual sessions and one group.

Individuals are assessed for criminogenic risk, in addition to the mental health assessment. The offense and /or criminogenic risk may have nothing to do with mental illness. County jails are not designed in the way for which they are being utilized today, they were designed for short-term stays; however, that has changed with AB 109.

- b. Report from Ad Hoc Committee to Contact Government Representatives No report at this time.
 - c. Report from Ad Hoc Committee on Data Notebook for California Behavioral Health Planning Council

Question 5 of the report was completed by DBH.

Question 5: If you could add a program, facility, or resources within the next three years, what would be your highest priority need? **DBH Response:** Trauma informed, no barriers, same day housing complex or complexes with a vocational component that is person driven possibly by the department. Essentially, it would look like permanent supportive housing giving stability and engaging them in treatment services.

Katie asked for input from the BHB on questions 5 and 6. Question 6 discuss ranking priorities for workforce, education and training, technological training.

The BHB will request a one-month extension in order to receive additional input from BHB members.

VI. New Business

 Ad Hoc Committee to Discuss on RFP Process with County Purchasing Department

The group was developed as board members have concerns with the Request for Proposal process, and how service providers are selected.

Curt Thornton raised a concern regarding ad-hoc committees and individual schedules, which has been an issue when trying to meet. Therefore, there will not be an ad-hoc committee on this particular matter; however, members were invited to meet with County Purchasing to discuss and share their concerns. Date will be announced.

Curt added that if the Ad-Hoc Committee assigned to contact government representatives is

not successful in setting future meeting dates, he may request to disband and ask interested and available BHB members for input and assistance when making contact with government representatives.

b. April Site Visit

The April site visit will be to the RISE, SHINE programs and Conservatorship. Dates to be determined.

c. Community Forums – Local and Rural

In the past, BHB has held two or three forums per year. This year they are proposing to hold one in downtown Fresno, possibly in May. The second will be in a rural town, aiming for Kerman, possibly in June. The BHB requested for the CIT to attend and make brief presentation, at both forums. Turning Point rural clinic offered to help organize and to attend.

VII. Committee Reports

a. Adult Services

The Adult Services meeting was held on March 4th. Turing Point presented on the First Street Center. In 2012, Turning Point was awarded the contracts to provide outpatient-based substance use and mental health services to convicted individuals who qualify under AB109 for early release from prison or jail with Post Release Community Supervision. Individuals are referred by AB 109 Adult Probation and Pretrial Teams; they are assessed for Mental Health and / or Substance Use Disorders, and receive appropriate services, if needed. All services are voluntary. Clients assessed with co-occurring disorders may participate in SUD and mental health treatment concurrently.

Those with mild to moderated disorders receive services at the First Street Center; those with serious mental illnesses are referred for intensive outpatient services to the Full Service Partnership at an adjacent location.

No meeting in April due to Holiday. Next is May 6th.

b. Children's Services

DBH provided an update on vacancies within the department. Currently there are 12 vacancies for community mental health workers (case managers); in December, the department hired 12 unlicensed clinicians.

Additional updates included Child Welfare referrals: January there were 326 referrals from DSS; 32 were incomplete. Prior to February 19, there were 115 referrals, with 21 incomplete. Clients must be seen within 10 days of referral. Currently, there is no wait time for psychiatrists; however, there is a wait for initial assessments and appointments with therapists. No wait for those coming directly from the hospital; psychiatrist on contract to see those children immediately.

Therapeutic Foster Care (TFC) Program, Michelle Pentell, Golden State Family Services (GSFS). TFC program is for foster youth ages 0 to 21 years who are in the custody of Fresno County Child Welfare Services, and who have complex emotional and behavioral needs. This is an intensive, short-term program provided by TFC trained Resource Parents. Parents must complete progress note documentation on a regular basis; staff reviews notes

weekly. Parents may have only one TFC designated child in their home. Services are supported by licensed behavioral health therapists through GSFS, which offers case management, in home support services, behavioral consultation, training, on-call help 24/7, emotional support, respite care, and a higher daily payment rate of \$25.05. GSFS is in the beginning stages; therefore, not currently serving children. The Committee wants to have them back again next year to provide an update on challenges and successes.

Foster parents in attendance expressed concerns with the state regulations. Parent groups will work toward advocating for more informed state mandates. Parents agreed that "compassion fatigue" is an issue; they would like more education on self-care, along with support groups.

The next meeting will be held on April 25th.

c. Justice Services

In lieu of the meeting, the BHB toured the jail.

The next meeting is scheduled for May 13, 2019 at Blue Sky Wellness Center.

d. Other reports or announcements

The Cultural Responsiveness Committee met on March 7th. Over 1000 paper and electronic client and family surveys have been returned and are being tabulated. Because of the large number the analysis will be brought to the committee in May. Over 400 electronic surveys have been received from DBH staff and contracted providers; these will be analyzed and brought to the committee in June.

Three of the five subcommittees met for the first time. Francine Farber serves on the Communications Committee. The group had a lively discussion on numerous ways in which increased communication can be addressed. The department is finalizing a contract with JP Marketing and they hope to have a representative attend their next committee meeting to discuss future ideas and plans, as well as to listen to the committee's ideas. Each subcommittee will meet every other month.

Carolyn reported that during a recent Community Conversations meeting, there was a presentation on the Multi-Agency Access Program (MAP). She would like to have a presentation on that same presentation during the May meeting.

VIII. Public Comment

Mary Lou Brauti-Minkler reminded everyone about the 15th Annual NAMI Walk, scheduled for May 11th. It will be at Fresno State, the exact location on the campus has not been determined yet.

A representative of Dr. Mathew Tatum's office made an announcement regarding two facilities. He owns and operates Ascend Behavioral Health, an adolescent outpatient program and Sierra Meadows, program for adults. Familiar with the need for adolescent outpatient services, they opened up the facility. Classes have already filled up. At this time, they only accept private insurance. They can provide a high level of treatment for adolescent and adults. The target for the youth program is 13 to 17; adult program is 18 and

up. They are in the same building, so transitioning from children's to adult program is a little easier.

IX. Meeting adjourned at 4:13 PM.

This meeting is open to the public under the Ralph M. Brown Act.