



## SONOMA COUNTY MENTAL HEALTH BOARD

Minutes of February 20, 2018



This Meeting:

Norton Mental Health Center,  
West Wing Conference Room, Santa Rosa

Minutes are posted in draft form and after approval at [www.sonoma-county.org/mhboard](http://www.sonoma-county.org/mhboard)

Email: [dhs-mhb@sonoma-county.org](mailto:dhs-mhb@sonoma-county.org)

**Please Note: A list of commonly used abbreviations and acronyms is attached**

### CALL TO ORDER

Meeting called to order at 5:00 PM by Chair, Asghar Ehsan

### ROLL CALL

**Present:** Asghar Ehsan, Matthew Jensen, Mary Ann Swanson, Shellie Hadley, Kathy Smith, Dick Kirk, Sherry Weyers, Fran Adams, John Suazo

**Excused:** Diana Nelson, Lyndal-Marie Armstrong, Bob Cobb, Patricia Gray

**Absent:** None

**PEERS Coalition Representative:** Kayla Dias (present)

**Board of Supervisors Liaison to the MHB:** Shirlee Zane (Absent)

**Sonoma County Behavioral Health:** Mike Kennedy (BH Division Director); Susan Castillo (Community Mental Health Section Manager); Randy Royston (Adult and Older Adult Services Section Manager); Sid McColley, (Acute & Forensic Services Section Manager); Amy Colville (Older Adults/Transitional Recovery Program Manager); Lisa Nosal (CMHCs Clinical Specialist); Sara Obstarczyk (Older Adults Clinician); Lauren Petersen (Patients' Rights Advocate Assistant); Ella Jackson (Transitional Recovery Clinical Specialist); Kristie Badger, (CSU Peer Support Specialist); Christy Livingston (Youth & Family Services Clinician); Lara Duran (Youth & Family Services Clinician); and a few other SCBH staff.

**Community Members:** Laurie Petta (GIRE); Susan Keller (Community Network); Donnell Holmes (Buckelew); Lis Fiekowsky (ESC Union Representative); Grace Harris (CPI); Jennifer Berghof (SOS Counseling); Susan Hertel (DAAC); Shannon Ryan (Petaluma Peoples Services); Jamie Burke (Buckelew); Coressa Hearp (Buckelew); Susan Fette (TLC); Katee Capeto (Sonoma County Main Adult Detention Facility); Debby Pitkin (Sonoma County Main Adult Detention Facility); Sean Bolan (GIRE); Darryl Smith (DAAC); Anita LaFollette (Homeless Action!); and a several other community members.

### ANNOUNCEMENTS /PUBLIC INTRODUCTIONS & COMMENTS

- 1) You may submit agenda items for consideration prior to the Executive Committee meeting, normally held on the first Wednesday of each month, 10:30 AM to Noon. Email or call MHB clerk Rhonda Darrow (565-4850), [Rhonda.Darrow@sonoma-county.org](mailto:Rhonda.Darrow@sonoma-county.org) to verify the next meeting date.
- 2) Please direct all your questions to the Chair.

### APPROVAL OF MINUTES

Minutes from January 16, 2018 meeting were approved as written.

**PATIENTS' RIGHTS ADVOCATE REPORT** – Tamara Winer, PRA ([Tamara.Winer@sonoma-county.org](mailto:Tamara.Winer@sonoma-county.org)) and Lauren Petersen, PRA Assistant (707) 565-4978

No report.

**CONSUMER AFFAIRS REPORT** – Kate Roberge, Consumer Education Coordinator of the Consumer Relations Program of Goodwill Industries ([kroberge@gire.org](mailto:kroberge@gire.org)), Amy Breckenridge, Consumer Affairs Coordinator of the Consumer Relations Program of Goodwill Industries ([abreckenridge@gire.org](mailto:abreckenridge@gire.org)) and/or Guests

No report.

**SPECIAL PRESENTATION:** *Older Adult Early Intervention and Treatment (Amy Colville and Sara Obstarczyk of SCBH Older Adult Program)*

Local mental health boards/commissions are required annually to review performance data for mental health services in their county and to report their findings to the California Mental Health Planning Council (CMHPC). To provide structure for the report and to make the reporting easier, each year the CMHPC creates a Data Notebook for local mental health boards/commissions to complete. The Data Notebook is a structured format for reviewing information and reporting on specific mental health services in each county. The topic for the 2017 Data Notebook reviews behavioral health services and needs in the system of care for older adults. This topic follows their yearly practice of focusing on a different part of the behavioral health system. This is the last Special Presentation of older adult services. The MHB members will be finalizing the 2017 Data Notebook to submit by the end of February 2018.

Sonoma County Older Adult Services consists of a multidisciplinary team of psychiatrists, registered nurses, licensed and/or intern Behavioral Health Clinicians and a Client Support Specialist. If indicated, OAT (Older Adult Team) can deliver weekly medications to clients in their home and can monitor adherence, provide medication education, offer case management and many community referrals. OAT staff can often visit the clients when hospitalized either medically or psychiatrically and facilitate communications between the medical staff and the psychiatric staff for care and follow up and discharge planning. OAT maintains relationships with our clients when they have been referred to a Skilled Nursing Facility for rehabilitation and/or longer term care when needed. One of the most important services that the OAT is able to provide is to coordinate safe transportation for the older client; they are able to facilitate the clients attending important doctor's appointments, having routine laboratory work done. The OAT staff strongly advocate for their consumers to participate in community-offered services in order to reduce social isolation. They are currently enjoying their relationship with The Bridges to Health Program which helps link their patients to their Primary Care with much greater ease and consistency. On OAT, if indicated from the assessment they offer Full Service Partnership, providing community-based services to the most vulnerable and highest need Older Adult referred for Behavioral Health Services in Sonoma County.

The SCBH Older Adult Services, in combination with MHSA services, reaches seniors in Sonoma County, far and wide. They also have a Liaison to Human Services In-Home Supportive Services, who provide outreach to seniors who are often vulnerable and benefit from the support. Because of this rich diversity of providers, OAT staff are able to deliver client-driven care and meet more of the community needs of the older clients, such as post-hospital visits and home visits for psychiatric assessments.

There are currently 128 SCBH Older Adult clients. The current SCBH Older Adult staff consists of: one program manager (Amy Colville); one secretary; one part-time psychiatrist and one part-time psychiatric nurse practitioner; one psychiatric nurse (RN) who also carries a small caseload; one and three-quarters time of Client Support Specialist (driver, appointment person, medication delivery); and three licensed clinicians/interns. There are three tiers of services that the clients fall under: Tier 1—Full Service Partnership; Tier 2—Case management and medication; and Tier 3—medication only and minimal case management.

**Full Service Partnership/Prevention and Early Intervention:** With MHSA dollars, Older Adult Services have been able to expand services to promote paths to prevention and recovery at SCBH and in the community. The programs are Council on Aging, Jewish Family & Children's Services, West County Community Services Senior Peer Counseling, and the Sonoma County Human Services: Older Adult Collaborative, which is a five agency collaborative comprised of: the Sonoma County Human Services Department, Adult & Aging Division, Council on Aging, Jewish Family and Children's

Services, Petaluma People Services Center and West County Community Services. The Older Adult Services' Full Service Partnership provides comprehensive, intensive services for Older Adults who are experiencing severe and persistent mental illness and are interested in participating in a program designed to address their emotional, physical and living situation needs. The Full Service Partnership program is able to provide intensive and innovative services, beyond the reach of traditional outpatient services. MHSa provides the means for the Full Service Partnership program to fund three peer support programs that offer guidance to discover meaningfulness and develop community connections for Full Service Partnership recipients, as well as older adults in the community.

In collaboration with Human Services, the Older Adult Services Liaison to In-Home Support Services meets with older adults, who show symptoms of depression, serious mental illness and/or suicidal thinking, and provides an in-home assessment and linkage to services—MHSa services for older adults including peer support, in-home counseling and Healthy IDEAS. Our programs at Older Adult Services believe all individuals can live healthier, more connected and fulfilling lives.

In-Home Supportive Services/SCBH Liaison Staffing consists of one half-time licensed clinician who offers outreach, referral and consultation; they do not offer ongoing case management as they get constant referrals and assessment and this person offer post-hospital visits to unopened clients.

Advance Care Directives Pilot: The SCBH Older Adult team has been working with a consultant, Susan Keller, in piloting Advance Care Directives to SCBH older adult clients. The clients are working with their case managers in completing their Advance Care Directives that will give them a voice in who will speak for them, who will care for their pets, etc. The plan is to continue working with all SCBH clients to complete their Advance Care Directives to keep in their charts and also to share with their primary care physicians, family members and supportive partners.

A MHB member asked what is keeping clients from getting more in-home nursing services. The primary care physician needs to write a prescription for these services and some insurances do not cover these services. The hope is to get more medical social workers to work with the physicians in allowing more clients to remain in their homes.

#### **REPORT OF BEHAVIORAL HEALTH DIVISION DIRECTOR** Michael Kennedy, MFT

Mike reported that SCBH Division is facing budgetary issues which began before the fires. The Division's reduction plans to meet a deficit of \$8.5 million are the following:

- All positions have been frozen since the beginning of the fiscal year
- When staff left, no one was hired behind them
- No overtime was granted
- No more use of extra-hire staff
- The 44 contract providers have been asked for 20 percent reductions;
- Of the 289 SCBH staff, there are 44 vacancies and 30 staff have been notified of layoffs. This week there may be some substance use disorder funding coming through that could reduce some layoffs.

MHB member said to not fault anyone but to make sure this will not happen again. A suggestion was made to ask DHS Administration to present at a MHB meeting, ask for a fiscal administrator to present every three months on fiscal matters to keep everyone apprised. Also, have the MHB membership write a letter to the Board of Supervisors and to *The Press Democrat*.

Kathy Smith said that she feels blindsided by not hearing about the financial deficits earlier. She said that she needs this information as being a member of the MHB.

Matthew Jensen asked if any of the contractor providers with housing components will have to shut down. No one could answer this question at this time.

John Suazo asked if there were any funding reserves that the County could not touch. He also asked why this information was not shared sooner. Are there other plans put in place, as in applying for more grants, etc.?

Dick Kirk asked what happened between June and August 2017. Mike said that inaccurate Medi-Cal estimates and projections were made in prior years, decrease in claims, and higher costs from long-term care where rates continue to increase. The process to get Medi-Cal and Medicare claims is within 90 days and can take up to the end of the fiscal year to settle up and the cost report can take up to three to four years. The claiming system is very complicated. Mike is working with other County Behavioral Health Directors in trying to get the claiming process changed to payment up front—the minute-to-minute progress notes are too much of a problem for staff and clients' care. Dick said that MHB members have not been doing their job and need to work on being part of the solution.

The ESC representative, Lis Fiekowsky, said they represent 150 County staff. She said that they are looking for any County funding reserves and resources and asking to slow down the layoff process. She asked that the MHB members be advocates for these mental health and substance use disorder services.

The MHB members made a motion to request the Department of Health's whole plan and financial information prior to going to the Board of Supervisors on March 20, 2018. The MHB members will schedule a meeting to go over the requested information prior to the Board of Supervisors' meeting. MHB members requesting this information to be posted on MHB website.

#### **MH SYSTEMS TRANSFORMATION** Section Managers

Sonoma County's Mental Health Services Act [MHSA] page is at [www.sonoma-county.org/mhsa](http://www.sonoma-county.org/mhsa)

The State's MHSA page is at [http://www.dmh.ca.gov/Prop\\_63/MHSA/default.asp](http://www.dmh.ca.gov/Prop_63/MHSA/default.asp)

MHSA newsletter is available at the link <http://www.sonoma-county.org/health/about/pdf/mhsa/>

Randy Royston, Adult and Older Adult Services Section Manager, reported that client services will continue.

#### **PEERS (PEOPLE EMPOWERING EACH OTHER TO REALIZE SUCCESS) COALITION INTERN REPORT** –

This is the link to SRJC's webpage about current health events around the campus:

<https://events.santarosa.edu/calendar-events>

Kayla reported the PEERS Coalition has been continually offering QPR (Question, Persuade, Refer) trainings to students. They continue to have monthly events. The next event on March 29<sup>th</sup> will be for mental health screenings. Since the firestorm disaster, the importance of mental health services has been highly sought out by SRJC students, especially those who lost their homes.

#### **CALBHBC Report** – Sherry Weyers/Lyndal-Marie Armstrong

This is the link to California Association of Local Behavioral Health Boards and Commissions website:

<http://calbhbc.weebly.com/>

Kathy Smith listened in to the CALBHBC conference call on January 9, 2018 regarding "Board and Care" (Adult Residential Facility) Issue and attended a CALBHBC meeting in Woodland on January 26, 2018, with all stakeholders invited (lived experienced, first responders, etc.). She reported that the biggest problem for running a board and care facility is the rates they are receiving. The board and care facilities developmentally delayed housing residents who are developmentally delayed receive about \$7000 per month compared to \$1200 for board and care facilities housing those residents with mental health challenges. The discussion was on how to work with the State on this disparity.

Sherry Weyers reminded MHB members of the CALBHB/C Bay Area Regional Meeting in Redwood City on Friday, April 20, 2018. Also, the CA Institute of Behavioral Health Solutions is offering Mental/Behavioral Health Board Training on April 21, 2018.

CIBHS binders of *Manual for Local Mental Health Boards and Commissions and Best Practices for Local Mental/Behavioral Health Boards & Commissions* were handed out to the MHB members.

**MHB CHAIR'S REPORT/BOARD PLANNING: – Asghar Ehsan**

The MHB Working Retreat is scheduled for Saturday, April 28, 2018.

**OTHER REPORTS:**

No reports.

**BOARD DISCUSSION / PUBLIC COMMENTS:**

Susan Keller gave advice on how the MHB members can influence the Board of Supervisors—the Board of Supervisors need three votes to pass; need good talking points from contractors; need to know what the cuts mean and then what will happen.

SCBH staff shared that when the extra-hire staff was let go, her caseload doubled. The impact will be on so many levels—Emergency Rooms, extensive wait lists, increase in incarceration rates and law enforcement will be impacted.

Anita LaFollette of the Homeless Action reported that 95 homeless people are living behind the Dollar Tree in the Roseland District. There are housing managers working to help find homes for these people and so many of them are mentally challenged. Now they are being told by the County Board of Supervisors to move out in 30 days. She questioned how this problem would be resolved with these cuts to mental health services during this time of unknown economic status.

Another SCBH staff shared that with this reduction in staff and contract providers' services what mental health services will look like—more teens showing acute behaviors of suicides, runaways, fire-setting, injurious to animals. Also, there is the problem of meeting compliance of access for adults and children now being scheduled into May. There have been two adult suicides in the last three months.

There is the Mental Health Resiliency Forum by Sonoma County Department of Health Services is on February 22, 2018, 6:00 PM Resource and Services Fair and 7:00-9:00 PM Forum, at the Glaser Center, 547 Mendocino Avenue, Santa Rosa. It will be hosted by Sonoma County Supervisors Shirlee Zane and Lynda Hopkins, with special guest, Congressman Mike Thompson. "Our community has gone through a traumatic experience. The fires affected every one of us. We invite you to a Mental health Resiliency Forum to learn about available services and resources, and hear expert panelist speak on trauma and how to foster well-being during this difficult time. Ask questions. Get help. You are not alone in this."

Meeting adjourned at 7:05 p.m.

Respectfully submitted, Rhonda Darrow, Mental Health Board Clerk

## ABBREVIATIONS & ACRONYMS

5150	Declared to be a danger to self and/or others
AB3632	Assembly Bill - State-mandated MH services for seriously emotionally disturbed youth - discontinued by State
ACA	Affordable Care Act
ACT	Assertive Community Treatment (program run by Telecare)
ANSA	Adult Needs and Strengths Assessment – a “tool” for determining which services are needed by each particular adult client
AODS	Alcohol and Other Drugs Services – now a part of the Mental Health Division and called SUDS
BHD	Behavioral Health Division (Sonoma County)
CADPAAC	County Alcohol and Drug Program Administrators’ Association of California
CALMHB/C	California Association of Local Mental Health Boards & Commissions - comprised of representatives from many MHBs in the State
CANS	Child, Adolescent Needs and Strengths (Assessment) – helps determine which services are needed by each child client
CAPE	Crisis Assessment, Prevention, and Education Team; goes into the schools when called to intervene in student mental health matters
CAPSC	Community Action Partnership-Sonoma County
CCAN	Corinne Camp Advocacy Network - Peers involved in mental health advocacy
CDC	Sonoma County Community Development Commission
CHD	California Human Development
CIP	Community Intervention Program
CIT	Crisis Intervention Training (4-day training for law enforcement, to help them identify and respond to mental health crisis situations)
CMHC	Community Mental Health Centers, Located in Petaluma, Guerneville, Sonoma, and Cloverdale (part of SCBH))
CMHDA	California Mental Health Directors Association
CMHL	SCBH’s Community Mental Health Lecture series - open to the public - usually takes place monthly
CMSP	County Medical Services Program - for uninsured, low-income residents of the 35 counties participating in the State program
ConREP	Conditional Release Program (State-funded, SCBH-run, but will be turned over to the State 6/30/14)
CRU	Crisis Residential Unit (aka Progress Sonoma-temporary home for clients in crisis, run by Progress Foundation)
CSU	Crisis Stabilization Unit (Sonoma County Behavioral Health’s psychiatric emergency services at 2225 Challenge Way, Santa Rosa, CA 95407)
CSAC	California State Association of Counties
CSN	Community Support Network (contract Provider)
CSS	Community Services and Support (part of Mental Health Services Act-MHSA)
DAAC	Drug Abuse Alternatives Center
DHCS	(State) Department of Health Care Services (replaced DMH July 1, 2011)
DHS	Department of Health Services (Sonoma County)
EPSDT	Early Periodic Screening, Diagnosis & Treatment (Children’s Full Scope Medi-Cal to age 21)
EQRO	External Quality Review Organization (annual review of our programs by the State)
FACT	Forensic Assertive Community Treatment
FASST	Family Advocacy Stabilization, Support, and Treatment (kids 8-12)
FQHC	Federally Qualified Health Center
HIPPA	Health Insurance Portability and Accountability Act
HSD	Human Services Department
IHT	Integrated Health Team (medical and MH services for adults)
IPU	Inpatient Psychiatric Unit
IRT	Integrated Recovery Team (for those with mental illness + substance use issues)
IMDs	Institutes for Mental Disease (residential facilities for those unable to live on their own)
INN	Innovation (part of MHSA)
JCAHO	Joint Commission on Accreditation of Healthcare Organizations - accredits hospitals & other organizations
LG	Los Guilicos-Juvenile Hall
LGBQQT	Lesbian/Gay/Bisexual/Queer/Questioning/Transgender/Intersexed (also LGBT)
MADF	Main Adult Detention Facility (Jail)
MHB	Mental Health Board
MHSA	Mental Health Services Act
MST	Mobile Support Team - gets called by law enforcement to scenes of mental health crises
NAMI	National Alliance on Mental Illness
NBSPP	North Bay Suicide Prevention Project
NOA	Notice of Action
OSHPD	Office of Statewide Health Planning and Development - the building department for hospitals and skilled nursing facilities in state
PC1370	Penal Code 1370 (Incompetent to Stand Trial, by virtue of mental illness)
PCP	Primary Care Provider (medical doctor)
PES	Psychiatric Emergency Services – open 24/7 for psychiatric crises - 3322 Chanate Road
PEI	Prevention and Early Intervention (part of Mental Health Services Act-MHSA)
PHP	Parker Hill Place - Telecare’s transitional residential program in Santa Rosa
PHP	Partnership Health Plan
PPP	Triple P - Positive Parenting Program

PPSC	Petaluma People Services Center
QI/QA	Quality Improvement/Quality Assurance - Wendy Sanders and Joanne Bender/Cheryl Tamblyn
QIP	Quality Improvement Policy (meeting)
QIS	Quality Improvement Steering (meeting)
QIC	Quality Improvement Committee (meeting)
RCC	Redwood Children's Center
RFP	Request For Proposals (released when new programs are planned and contractors are solicited)
RRC	Russian River Counselors
SCBH	Sonoma County Behavioral Health
SCOE	Sonoma County Office of Education
SELPA	Special Education Local Plan Area
SNF (Sniff )	Skilled Nursing Facility
SPMI	Serious Persistent Mental Illness (or Seriously Persistently Mentally Ill)
SUDS	Substance Use Disorders Services (formerly AODS)
SWITS	Sonoma Web Infrastructure for Treatment Services
TAY	Transition Age Youth (18-25)
VOMCH	Valley of the Moon Children's Home
WET	Workforce Education and Training (part of MHSA)
WRAP	Working to Recognize Alternative Possibilities
Wraparound	Community-based intervention services that emphasize the strengths of the child and family
YS/Y&F	Youth Services/Youth & Family (Sonoma County Behavioral Health)