



LIVE WELL
SAN DIEGO

August 3, 2017
Behavioral Health Advisory Board
Meeting Minutes

P.O. BOX 85524
San Diego, CA 92186-5524
(619) 563-2700 • FAX (619) 563-2775/2705

MEMBERS PRESENT

Joel San Juan – District 1
Michael Matthews – District 2
Rebecca Hernandez, 2nd Vice Chair – District 2
Jenifer Mendel, Member-at-Large (ADS) – District 2
Deanne George – District 3
Colin MacKinnon – District 3
Tom Behr – District 4
Jerry Hall – District 4
John Sturm, 1st Vice Chair – District 4
Judith Yates, Member-at-Large (MH) – District 4
Phil Deming, Chair – District 5
Richard McGaffigan – District 5

MEMBERS NOT PRESENT

Eyra Leeper – District 1
Carmelita Trujillo – District 1
Ed Weiner – District 3
Dana Hamilton – District 5
K.C. Strang – District 5

STAFF TO THE BEHAVIORAL HEALTH ADVISORY BOARD

Alfredo Aguirre, Director, Behavioral Health Services (BHS)
Traci Finch, Principal Administrative Analyst, Behavioral Health Services
Benjamin Parmentier, Administrative Analyst III, Behavioral Health Services
Philip Ainsworth, Administrative Analyst II, Behavioral Health Services

I. CALL TO ORDER

The Behavioral Health Advisory Board (BHAB) meeting was called to order by Phil Deming, Chair, at 2:35 p.m. at the County Administration Center, 1600 Pacific Highway, San Diego, California 92101, Room 302/303.

II. INTRODUCTION OF BOARD MEMBERS

Members of the BHAB introduced themselves.

III. APPROVAL OF THE MINUTES – June 1, 2017

ON MOTION of John Sturm, seconded by Colin MacKinnon, the BHAB approved the minutes of June 1, 2017, as written.

AYES: 8 NAYS: 2 ABSTENTIONS: 1

IV. PUBLIC COMMENT

Alisa Chatrapachai came before the Behavioral Health Advisory Board as the Vice President of the California Association of Local Behavioral Health Boards and Commissions (CALBHB/C) and member of the Behavioral Health Board in Orange County. She described the Association's role of supporting Behavioral Health Boards and invited the BHAB and others to attend the Southern California Region Meeting in San Diego on January 19th and 20th. More information will be shared with BHS staff.

V. UPDATE: STEPPING UP INITIATIVE (Kathy Myers/Alfredo Aguirre)

Kathy Myers, San Diego Sheriff's Department and Alfredo Aguirre, Behavioral Health Services, discussed the Stepping Up Initiative. On November 15, 2016, the County Board of Supervisors adopted a resolution that supports the Stepping-Up Initiative to reduce the number of adults with mental illness in jail. This is a national initiative with more than 200 participating counties. On May 2nd, Supervisor Greg Cox, Sheriff William Gore, and District Attorney Bonnie Dumanis received authorization from the Board of Supervisors to develop a strategy to address the mental health of sentenced offenders by providing an alternative to a jail custody setting, and links to additional treatment and services.

Four key outcome goals of the program include:

- 1) Reduction in the number amount of individuals with mental illness who are processed into the jail system.
- 2) Reduction in the incarceration period for those identified with a mental illness.
- 3) A system to ensure these individuals are connected to services upon release.
- 4) Reduction in the recidivism rate for individuals with mental illness.

In the past, individuals in jail who were diagnosed with mild to moderate mental health issues, which may be complicated by substance abuse issues, did not meet the threshold to obtain mental health services while in custody. There are people that would benefit from this program already identified by the Sheriff's office.

DISCUSSION:

Why has the program decided to focus on mild to moderate mental health illness as opposed to severe issues?

- For individuals diagnosed with mild to moderate mental illness there are limited treatment options available for them in custody. These individuals need access to more services.

Are jail staff trained to identify a mental health issue when it presents?

- All deputies and clinical staff are trained to identify mental illnesses. This program will flag individuals who may also need mental health programs/treatment outside of jail.

Does Project In-Reach only serve individuals with severe mental illness or do they serve those with mild to moderate symptoms?

- Project In-Reach does work with all levels of mental illness and substance abuse. Funding was added to focus on the severely mentally ill.

Are there any programs like this available to individuals in our juvenile system?

- This program is only for individuals in custody, and most juveniles are not in custody, however assessment teams provide assessments and treatment to juveniles. The juvenile homeless population is currently not being addressed by this program.

What's the potential number of individuals who need services?

- 6,000 are in custody and about 2,000 take psychotropic drugs (including those diagnosed as severely mentally ill). This program is a pilot designed to serve 24 individuals at one time within three existing programs, and work with approximately 100 individuals total to determine which approaches are best. These individuals will work through the 12 Step Program and other treatment programs to support recovery.

When individuals are wearing an ankle bracelet, are they required to stay inside the facility or expected to have jobs and perform community service?

- Individuals will need to be assessed to determine if they will benefit from vocational training. Some may also need to apply for government assistance in order to transition into the community.

Some program users may have to wait until their medication levels have stabilized before they can take further steps. Some of this population may not be able to get jobs, however this program works with groups such as Second Chance to help the individuals search for employment.

Are individuals at the facility located on 35th Street still considered inmates? Will they get time off of their sentence if they go through the program?

- Yes, these individuals are considered inmates. They will not get a reduction of their sentence for program participation. This population is misdemeanor offenders which typically serve brief sentences, although some may have a slightly longer sentence because they have repeated offenses.

Since an individual's mental health issues can fluctuate, is BHS taking advantage of Medi-Cal funding opportunities for this program?

- The program will work with individuals who qualify to obtain SSI, Medi-Cal, and other benefits.

VI. MENTAL HEALTH SERVICES ACT (MHSA) THREE-YEAR PROGRAM & EXPENDITURE PLAN – Initiation of 30-day Public Comment Period – Alfredo Aguirre, Director, Behavioral Health Services, Adrienne Yancey, Principal Administrative Analyst, Behavioral Health Services

The board was informed of the initiation of the 30-day Public Comment Period for the MHSA Three-Year Program & Expenditure Plan. The MHSA requires BHS to develop three-year expenditure plans, review all programs that receive MHSA funding (and identify any other funding options that may be available), and provide an annual update of changes made to existing programs. The proposed plan will cover Fiscal Year (FY) 17-18 through FY19-20. BHS staff will provide the BHAB with the plan narrative and a link to the full plan document.

BHS is required to post MHSA plan proposals for public review and comment, and any community input will be reviewed. The public will also have an opportunity to address the board regarding the plan at a Public Hearing. The finalized plan proposal will be presented to the BHAB as an action item prior to going before the Board of Supervisors for approval.

DISCUSSION:

Can BHAB members provide the plan to the communities they represent?

- Yes. BHS will also forward a link to the plan to stakeholders and will post a public notice asking them to forward to other stakeholders.

If a client has a problem or question with one of the programs, they are able to go to Recovery International or NAMI. Since these are Medi-Cal reimbursable services, wouldn't they also have the option of going to the Center for Medicare and Medicaid Services?

- Yes. To clarify: the MHSA resolution process is not speaking to issues with client care, but with the issues of a client's access to services. If they feel the County is not adhering to the MHSA, they can file a grievance.

Community Engagement Process:

BHS has expanded the focus of the community engagement process from mental health issues to include substance use disorders. BHS has scheduled two community forums and a tele-town-hall in the month of August. BHAB members were encouraged to share information about the upcoming forums with their communities. BHS will also host the following focus groups in August and September: homeless clubhouse members, general clubhouse members, those struggling with substance use disorders, transition age youth, justice partners, the adult reentry population, and the frontline staff of County contracted providers.

DISCUSSION:

Concern was expressed about participants' having sufficient opportunity to fully express their views in the new community engagement format.

- There will be an opportunity to take an online survey for those who are unable to attend the forums, or wish to provide additional feedback.

What led to decision to alter the number and format for this year's forums?

- The decision to adjust the number and format of the forums was based on a decreasing number of participants attending the forums. BHS determined that a reduced number of forums would be sufficient to obtain the necessary community input.

A question was asked regarding the availability of interpreter services and accommodations for other languages.

- It was pointed out that the flyer included in the members' packets was the English version, and that the website provides threshold language versions. The registration form asks registrants to identify their language preference, and interpreter services will be available for those that request it. This year's forum promotion encourages people to visit our website and the flyer has been placed in multiple outlets, such as the San Diego Union-Tribune.

Will the justice-involved focus group include juveniles and young adults or just adults?

- The current plan is to only involve adults, but BHS will take under advisement the idea of involving juveniles and young adults as well.

Does BHS have a list used to get information directly out to consumers and families?

- Through our stakeholder cascade process, we encourage our stakeholders to help get this information out to clients, colleagues, and family.

VII. DIRECTOR'S REPORT – Alfredo Aguirre, Director, Behavioral Health Services

- Introduction: Benjamin Parmentier, Administrative Analyst III, will be taking over for Traci Finch as lead staff analyst to the Behavioral Health Advisory Board.
- Introduction: Sarah "Dani" Alvarado, Administrative Secretary III, will be taking over for Allison Williams as secretary to the BHS Director.
- Drug Medi-Cal update: the County will submit the proposed rates to the State. Once approved, BHS will work with BHAB and Board of Supervisors to get support for our contract with the Department of Health Care Services for an organized delivery system for substance use disorders. Current Medicaid funding appears adequate, and no imminent reduction in Federal funding is projected.
- BHS Ten-Year Roadmap update: A draft of the Roadmap will be presented to BHAB this fall.
- Prop 47 update: The County and City of San Diego are collaborating in the formation of a Prop 47 local advisory committee. The County has been awarded a \$6 million grant, over a 3 year period, which will enhance the City's SMART program and two County programs focusing on recidivism and supportive services.

VIII. CHAIRPERSON'S REPORT – Phil Deming, Behavioral Health Advisory Board Chair

- BHAB Fall Retreat update: An update of the retreat planning was given to the board. It is scheduled for October 21st.
- Appointment of the Nominating Committee in September: Board members were asked to contact Ben Parmentier and Traci Finch by 8/17 if interested in serving on the nominating committee. Members interested in serving as an officer of the board were asked to let the nominating committee know.
- The September 7th BHAB Meeting will be moved to Room 310 of the County Administration Center.

IX. SPECIAL GUEST – California State Assemblymember Todd Gloria, District 78

- A number of senate bills concerning housing issues are pending before the legislature.
 - The main bills include:
 - SB 2 – Written by Senator Toni Atkins, this bill will allocate \$250 million annually for the creation of affordable housing across California.
 - SB 3 – Authorizes a \$3 billion bond for the construction of affordable housing in California; to be placed on the ballot in 2018.
 - SB 35 – Addresses the planning and zoning process, in order to streamline approval of new housing.

DISCUSSION:

Procedural and status questions were raised regarding the bills discussed.

- These bills have been passed by the CA State Senate. No major changes are anticipated in the House, and the Governor has expressed support for these bills.

Is there a waiver that allows development projects to avoid affordable housing requirements? Is there a mechanism to ensure the waiver is not a benefit to developers?

- Developers can pay “in-lieu of” fees in order to avoid the city of San Diego policy that requires 10% of all new housing construction to be set aside for subsidized housing. This is not a benefit to developers, because this fee goes to the local housing authority and can be used to build many more affordable units elsewhere in the city.

Do any of these bills address the issue of very low income housing?

- Both SB 2 and SB 3 address this issue, and will contribute to the availability of low income housing, including very low income housing.

How can the board effectively form relationships with local Assemblymembers in order to become a resource for them regarding behavioral health?

- The board can invite their local representatives to attend a meeting, and board members can connect with their staff to schedule an individual appointment.

The BHAB shared with Assemblymember Gloria their work on addressing gaps in suicide prevention and implementation of Drug Medi-Cal.

X. ADVOCATE REPORTING

None

XI. BOARD MEMBER ANNOUNCEMENTS

None

XII. MEETING ADJOURNMENT

ON MOTION of Michael Matthews, seconded by Colin MacKinnon, the meeting adjourned at 4:58 p.m.
AYES: All

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Brown Act Procedure: *As required by California Government Code 54950 et seq. (Ralph M. Brown Act), a copy of the packet of information that was mailed to Behavioral Health Advisory Board members at the point of posting of this agenda has been placed at the reception desk at 3255 Camino Del Rio South, San Diego, CA 92108, for public inspection, and is available at the site of the meeting for public inspection. Members of the public wanting their own copy of the advance materials may request them under Government Code 6250 et seq. (Public Records Act) and receive them on payment of copying charges of \$0.20/page, and actual mailing charges, if mailing of the material is requested. If you are planning to attend and need special accommodations, you must call Jackson Alexander at (858) 505-6521, at least three days in advance of the meeting.*

Respectfully submitted,



Sarah Alvarado, Secretary to the Director
Behavioral Health Services

Reviewed by,



Ben Parmentier, Administrative Analyst III
Behavioral Health Advisory Board Support Staff

Approved by,



Phillip R. Deming, Chairperson
Behavioral Health Advisory Board

For BHAB documents, agenda, minutes and Director's Reports, please read or download from
the Network of Care Behavioral Health Advisory Board at:
<http://sandiego.networkofcare.org/mh/content.aspx?id=257>