

Summary

Merced County Behavioral Health and Recovery Services Ongoing Planning Council

July 22, 2021
9:00am
Via Zoom

Present:

Sharon Jones, Fernando Granados, Zeus Baldevia, Elizabeth Casarez, Joana Castañeda, Alyssa Castro, Jose Chavez-Diaz, Susan Coston, Cesar Garcia, Fernando Granados, Caitlin Haygood, Patti Kishi, Monica Mata, Cindy Mattox, Christy McCammond, Ismael Muñoz, Jenna Nunes, Jesse Ornelas, Maria Orozco, Nancy Reding, Shavon Roach, Jeff Sabean, Sandra Sandoval, Brian Sterkeson, Cari Urquiza, Bao Vang, Pangcha Vang, Griselda Vasquez, Siaxouwyee Vue

Presentation and Discussion:

All Members

I. Call to Order / Roll Call

II. Approval of Minutes

The approval of minutes for May 27, 2021 was motioned /seconded (Nancy Reding /Siouxouwyee Vue) and carried.

III. Update Planning Council Contact List

Fernando Granados, Chair, encouraged all attendees to confirm their attendance via chat or by emailing Maria Orozco.

IV. Notice to the Public

No notices.

V. Chair's Report

No Report

VI. BHRS Report

Sharon Jones reported that Behavioral Health & Recovery Services is starting to open back up with more direct face to face appointments. In terms of outreach and engagement, they are back out in the community engaging the outline communities throughout Merced County. BHRS is preparing for big changes at the state level such as CalAIMs which is like a reorganization of the medical system and includes how medical necessity will be captured. ACEs Aware – Adverse Childhood Experiences is another big initiative - they are looking at trauma informed care as well as cultural humility. They are trying to really move forward with all of those particular important topics, strategies, and ways of engaging and seeing the world. In addition, peer support – the importance and value of lived experience and how it's been seen as a resource throughout Merced County with the new legislation. Sharon mentioned a call she had yesterday with Cal-MHSA. They will be developing a certification program for peers. She noted that we have always known that lived experience is wonderful through our substance use recovery side, but Mental Health is starting to fully embrace the whole concept of lived experience and the power that it brings with it. Sharon hopes to move forward in the future where other people can speak on the agenda. The last meeting was cancelled due to a double booking trying to get the Innovative Plan approved - the Transformational Equity Restart program. These are some of the changes in the annual update, which went to the board of supervisors on June 22nd.

VII. Approval of Annual Update 2021-2022 Program Changes

Sharon reported that the COPE mobile crisis response team was moved from the Community Services & Support to the Prevention & Early Intervention component. For the Older Adults System of Care, which is operated by Area Agency on Aging – they tried to recruit for an extra-help clinician for at least 2-3 years. It is difficult when it comes to hiring a clinician for extra-help. In this annual update it was increased to a full-time clinician. The Livingston clinic is now being referred to as the new north county facility. They are looking for a nice Livingston north county facility for services as part of their capital facilities projects. There was an increase for that as cost is going up as well. The facility is currently by Liberty Market in Livingston. In terms of the spacing it is time for a refresh with a new north county clinic. This is to service that area of Merced County which will be inclusive of Delhi, Atwater, Livingston, and Hilmar – many of our communities in need of help. They are awarding Golden Valley as part of integrated primary care in this particular annual update. In addition, they are increasing the MAPs program to add a clinician in the Los Banos area. MAPs usually

has a clinician in the Livingston area; now one of the Community Development Partners supports that program in the Livingston community. The clinician would be in the Los Banos community. That was determined by the chiefs of police in conversations in that community; Los Banos is really in need. Sharon informed that Mobile Crisis has been moved to Prevention & Early Intervention – often times individuals being assessed are not already in the system of care. As a part of early intervention, they are engaging individuals to make sure they lessen the impact and won't need more severe treatment. As a part of this annual update, they received approval from the Board of Supervisors for a full-time clinician to support the Caring Kids program. Often times in this community that is one of the areas that needs more capacity building or more enhancement.

Workforce, education, and training funds of about 1.4 million to help build the workforce were received in fiscal year 2007/2008. That money has run out now. Within the MHSA, they will allow to transfer 20% of funding from Community Services & Support for workforce, education, and training to fulfill the prudent reserve, capital facilities, and technological needs – they are at that point now in terms of workforce, education, and training where they are utilizing the transfer to keep the Psychosocial Rehabilitation program and the California Stanislaus Social Work stipend going forward. Each year 4 stipends are awarded to social work students at CSU Stanislaus in the amount of \$9,250 dollars – the pay back is to support BHRS in the Merced community. Two peer support specialists will be added to the Innovative Strategist Network, an already approved program. It is a limited amount of money over the 5 years, but the program is being enhanced with 2 peer support specialists. Sharon said that lived experience is such a catalyst for healing. Within the system, they will be building up peer support. With the new CalAIM, peer support can now document and bill for their services in the electronic health records. Also, some of the administrative overhead is increasing with the CalAIMs and is almost like a rebuilding of the infrastructure. BHRS will be hiring 3 MHSA funded Staff Services Analysts to help with some of the administrative oversight and data tracking, outcomes, analysis, etc. They are also in the works of hiring a staff to do clinical supervision. In this particular update, the title was a Supervising Behavioral Health Clinician. It may not be that title but they will be looking at enhancing their clinical services by hiring a strategic person to do clinical supervision, some of the clinical trainings, and build up clinical expertise and care to provide the very best care to others. Sharon reminded everyone that Jennifer Jones held the position of the Community Enrichment Director. That is no longer a position at BHRS – it was deleted from the MHSA actions. Sharon is trying to update everyone with all the changes.

VIII. Approval of Innovation Plan (Transformational Equity Restart Program)

Sharon Jones informed that there are currently 2 Innovation Plan projects intersecting one another: The Innovative Strategist Network that was approved February 23, 2017, a 5 year innovative project. Also, as of June 24th, 2021, the Transformational Equity Restart program, which is to support individuals that find themselves justice involved. It's about equity for that particular population, and making sure an infrastructure is set up where their lives can be transformed to break the cycle of going in and out of jails, in and out of hospitals, and being homeless in the community; that is what they are testing out as a result of the most recent approved Innovation Plan. The Transformational Equity Restart program is a 3.6 million dollar project over 5 years.

Fernando Granados asked: who is going to be providing that service? Will it be in house or are there going to be an RFP for it? Sharon thinks it's going to be a BHRS program right now. It will probably be implemented by Behavioral Health & Recovery Services. If anything else comes up, she will let the group know right away.

Pangcha Vang asked if this was to improve the programs for the clients in the justice involved program. Sharon said yes, it has more of an outpatient focus, but it is to improve the outcomes for individuals. Often times, people living with mental illness end up in the justice system. That's really not the place where they should be, it is maybe a result of behaviors, not on their own fault, but due to how mental illness operates. This program is to improve their lives, to have a program they can go to and get better. It's going to have a career pathway as well and build up peer support to help each other. Under the Mental Health Services Act, all of the program should be geared towards the essential elements: Cultural Competence, community collaboration, integrated experience, and all the essential elements that our programs operate under. Pangcha asked if the program provides counseling services. Sharon said yes, probably for the next meeting she will have Jeff Sabeau and maybe support him to give an overview of that program and the plan that was approved by the state. Sharon explained that it will have counseling services and peer support connection; the goal is culturally specific interventions to help individuals. It will open up the toolkit to help people. Sharon said she could give a presentation on it moving forward so everyone can get more information.

IX. Assembly Bill (AB 2265) Substance Use Treatment

Usually Mental Health Services Act fund is just what it says- about mental health. Assembly bill 2265 is saying that you can do screening for substance use as it relates to co-occurring. Now Mental Health Services Act funds can be used for that particular type of screening. If an individual comes in for a mental health concern, they can also be screened for substance use. That is the conversation and that is what most recently has changed.

X. Continuous Community Program Planning Process – Focus Groups, Key Informant Interviews, etc.

Sharon Jones mentioned the value of being at the table, having a voice, and being able to handle situations in real time. Each year there is the community planning process and focus groups – now they will be done year long. Each quarter Sharon will facilitate groups. If anyone is interested in key informant interviews, not only will there be a stakeholder meeting like this meeting, but Sharon will also be facilitating focus groups, key informant interviews, and at any time anyone can talk to her about any issue that relates to MHSA. She asked if anyone would like to establish a focus group to please email Caitlin Haygood. Sharon asked Caitlin to share her email with the group. Sharon would love to set up a focus group to keep the conversation ongoing so that they can really try to transform people's lives, give them a voice, and help out – it's all about healing and care.

Nancy Reding asked if Sharon will continue to have them on Zoom. Sharon said it depends on the person's request but they will try to accommodate whoever is setting it up. Nancy's thinks that because of Zoom, people have been able to attend focus groups as compared to the past where they only had in person. Sharon shared that she is a fan of Zoom and all of the virtual platforms. She agrees that it can bring more people and perspectives from other areas or counties. Sharon is definitely open to that.

Sharon said they want to really reach out and find out the pulse of Merced County; sometimes they are doing planning and think they find it, but really, the community voice is the pulse. Again, Sharon asked that individuals contact Caitlin regarding focus groups.

XI. Adverse Child Experiences Planning

Sharon informed that moving forward Adverse Childhood Experiences will be on the agenda. They received a planning grant along with Merced County Office of Education (MCOE). They been working diligently meeting their deliverables to have a plan for screening for Adverse Childhood Experiences. These childhood experiences can put us in a frequency of toxic stress where a more supportive network and protective factors are needed, so they are developing the Merced County trauma informed network of care, ACEs Inc. They want agencies to get on board with the screening and would like to see every agency in Merced County providing a service screening for ACEs. It also helps develop a help first model or helping as soon as possible to break the cycle of toxic stress in individuals ending up with the chronic diseases that come as a result of being in an ongoing frequency of toxic stress. Sharon will be sharing about this in every meeting agenda because of the importance of Adverse Childhood screenings, and a supportive welcoming environment in our clinic and behavior health settings. That way they can start this trauma informed way of approaching people and helping individuals. They are working on the last deliverable – they had about 4 deliverables, starting with an integration tool which shows where we are as it relates to screening for ACEs in Merced County. Most people in Merced County were not screening for ACEs. The surgeon general has a plan that this will be common place over the next 10 years. Individuals may contact Sharon Jones to learn more about ACEs and to be connected to the meeting at MCOE or BHRS.

XII. Suicide Prevention Month

Sharon shared that the MHSA team wants to have Suicide Prevention events all over Merced County. She expressed the importance of getting the word out about how suicide can be prevented - they can have a Suicide Safer community. She suggested reaching out, as there's help available within arm's reach. Usually a banner is placed over G Street announcing suicide prevention month. At BHRS they have a campaign "Keep Writing Your Story. The research shows that between the person with thoughts of suicide, intervening and giving them a space to pause and talk, we could save lives. Sharon asked for suggestions for Suicide Prevention month. Sharon has started with Safe-Talks– helping individuals know how to not miss, dismiss, or avoid helping someone that might be having thoughts of suicide. Sharon also does the Applied Suicide Intervention Skills Training that she will be starting back up shortly to help build this suicide safer community.

Pangcha Vang suggested a PSA or a program where youth can come together to create a PSA about suicide prevention. She thinks that when you involve people in it, the learning process of suicide and the prevention of it is a lot more meaningful. A program where youth, a group of people who don't speak English or from different backgrounds, LGBTQ, as well as unserved and underserved communities, could write a PSA catered to their community would be really great. Sharon loves the diversity that Pangcha is bringing forward and the idea of the cultural and linguistic part of it; different languages to really embrace the community from many intersections. Because they are unserved and underserved, Pangcha thinks it would be great if stipends could be provided for the time they put in to create a PSA.

Nancy Reding, as a survivor, strongly recommended having survivors participate in this. She expressed not having interest in stipends but knows other people do - she is also available to speak privately to this. She thinks it is important to have survivors involved. Sharon agreed and noted that in previous years "The S Word" film was shown and individuals from the Central Valley Suicide Prevention Hotline go, facilitate a process, and have comments from individuals who are survivors with lived experience.

Elizabeth Cazares, Suicide Prevention Hotline, said they are definitely willing to come out again and would love participating in events throughout suicide prevention month. They would like to get in contact and more connected on what they can plan. Some attendees shared their contact information with Elizabeth.

Alyssa Castro, Youth Leadership Institute, thinks that including the Youth Crisis Stabilization Unit would be helpful as well. Alyssa shared about a young person in their program who received services there on a suicide watch and who had a lot to say about the facility. She suggested reaching out to them and possibly doing a promotional video. Sharon knows Youth Leadership Institute does videos and a lot of this in their program already. Sharon mentioned having a more robust presence in the community – coming together we're powerful and strong in this MHSA meeting. Sharon discussed on a report about young people showing up in the ER room for evaluation. They are having suicidal ideations, not wanting to live anymore, and wanting to end it all. Sharon thinks now is the time to say that we can have a suicide safer community. We can help others be more alert to suicide, create that space where individuals can feel safe to talk about how suicide is coming to their lives, and reconnect them to life.

Nancy Reding thinks that family members and friends need to be involved as well. Sharon agreed and added that maybe something needs to be specific for older adults who often have very high suicide thoughts and rates.

Sharon shared comments from the Zoom chat. Suicide is across all geographic locations, racial ethnic identities, and social economic statuses. Sharon asked everyone to come together for a suicide safer community involving all the feedback found in family members, thinking of our older adults, our youth, utilizing their resources, and keeping it going year round.

XIII. Administrative Updates and Changes

Nancy Reding shared that the LGBTQ Pride event on September 18th will be during Suicide Prevention month. Sharon Jones said she would like to participate and would need the details. Nancy said she is not the contact person. Sharon asked if Nancy could link them to the contact person to try to connect.

Cesar Garcia, Dignity Health, thinks a special emphasis should be placed on those who lost a loved one to COVID. One of the contributories leading to a person having thoughts of suicide is death and loss of a loved one.

XIV. Announcements

Jose Chavez-Diaz, Golden Valley Health Centers, shared that Golden Valley Health Centers continues to move forward with COVID vaccines in Merced County. They have a COVID-19 mobile van willing to go to different areas in the community of Merced County to give out vaccines. They currently have a list of underserved zip codes that they try to target such as Livingston, Hilmar, Atwater, Gustine, Stevinson, and Belico. If anyone knows of any organizations or groups that would like GVHC to travel with their COVID-19 van team, they will go out there and give them the vaccines. He shared that the nursing director agreed to go to an individual's house and give out the COVID-19 vaccine. If anybody knows any community member, organization, or groups, he asked to please let him know to pass it on to the team and see if they can organize something to go out there. They currently do not have a van flyer for COVID-19 vaccine advocacy material. Jose will email the list of zip codes to Caitlin today. Sharon thinks they should be in this community especially since Mental Health Services Act is about our unserved and underserved communities.

Christy McCammond shared with the group how grateful they are for BHRS and their participation in the regional plan to address homelessness in Merced County activities as part of the continuum of care and the collaborative applicant role they serve at Human Services Agency. They must create a regional plan for their initiatives regarding homelessness, which would intersect with Mental Health, Substance Abuse Disorders, and the co-occurring of the two. They are hosting 3 workshops to create this regional plan. In the first 2 workshops they identified elements of the plan. Sharon and her coworkers at BHRS were involved in an infinity diagram to discover and identify the major elements that would be necessary for a meaningful and relevant plan in Merced County to address homelessness. After the first workshop meeting, they went on to workshop #2 where break out groups according to content expertise and interest further developed those major elements into working narratives. The break out groups' work has now been combined to one document and Christy will be working on making it a cohesive narrative. A glossary of standardized terms and shared terminology will also be added. They hope to involve info graphics so that the plan is easy to read and understand. In the 3rd workshop, they will be identifying measurables associated with each major area of the regional plan and applying those measurables against a score card. Christy mentioned Bernard's book "Business at the Speed of Now" where a great methodology was developed for organizations to monitor their work. Christy briefly shared about the state of Oregon using that methodology. This will be used in Merced County as well where they can identify the core areas of their regional plan, develop measureables within each, and track their progress in a quarterly meeting. They know the intersections of those populations is important to pay attention to, so they got people from all sectors of expertise within Merced County community based organizations they know: Healthy House, Community Action Agency, Turning Point, Merced Rescue Mission; all of them are on board, as are the county and city leaders with great participation from the mayor and board of supervisors like Lloyd Pareira. They want to create a rough draft for this regional plan and share it with stake holders that may not have been involved in the workshops because they know there's expertise and contribution they still need. She noted that if they are a stakeholder in this round, they might see this regional plan. She appreciates their feedback and expertise. Their promise is that this plan is a living document – they can follow their journey, review, and adjust as they have the advice of people with lived experience, especially for those experiencing homelessness, mental health issues, emotional

health issues, and behavioral health issues. They want to make sure that the regional plan is informed with the advisory committee of people with lived experiences and throughout all of their journey giving generous assumptions, jumping to the best conclusion, giving the benefit of the doubt in waves, and understanding that what they know today might be different than what they know a month from now. The regional plan needs to be able to flex and adjust based on those experiences and on what they learned each and every day. Christy is very grateful for the group that has worked so hard on this. More to come. The big idea is that they have to get together as a team and work not in silos, but together because they are all touched by this.

Lastly, Christy shared that they are working on a huge data project: the cost of homelessness in Merced County. They want to understand the costs not only financially but human being costs of homelessness, and gather how much they are now spending to address the problem. This is important because when they are evaluating new initiatives and new projects, they want to be able to compare it to what they're having success with now, where moneys are being devoted now compared to what this new initiative is being proposed so that they can evaluate it both in dollars and in human being outcomes. Sharon had participated and gave some real life community based comments – she reversed her role from being the MHSA Coordinator to living in the Livingston community; they had a wonderful group. Christy stated that Sharon's contribution was over the top and valuable. They were glad that BHRS was there because they understand the direct correlation. Christy thanked everyone.

Bao Vang, Merced Lao Family, announced a food drive today at Merced Lao Family for the whole community. They will be distributing food boxes, drive food, and vegetables. It is first come, first served basis. They are distributing at 10am – 1pm, or until food runs out. Everyone is invited to stop by. They will close for lunch 12pm-1pm. Merced Lao partnered up with a few other organizations in regards to the COVID-19 mobile vaccination clinic. There will be one on Sunday, August 1st, 9am – 1pm, at the Lake Community Flea Market, right off of 15th street. The Hlub Hmong Center is also a part of it, as well as other organizations. For any questions, please call Merced Lao or directly call Pang Lua.

Siouxouwee Vue, Hlub Hmong Center, announced that in partnership with the Fresno Center they are looking for 2 AmeriCorps members to support the access to cultural health care program in Merced. It is a 1 year opportunity with a small financial stipend, along with financial support to pay off student loans. They are currently in search for 2 members that will work within the Southeast Asian communities in Merced to increase the knowledge and access of primary preventative care, affordable health care programs, and health care and COVID education. The application has been extended until August 13th. Siouxouwee shared her contact information for those who are bilingual and interested. Participants must be 18 years or older.

Jenna Nunes shared that Sierra Vista has a new program in collaboration with Merced County Public Health – *Road to Resiliency*. It is to provide case management support to women with a past or present substance use disorder, who are pregnant or post-partum up to 12 months. They will receive in-home case management support from case managers. Sierra Vista is currently outreaching to different agencies about this program and accepting referrals. Jenna shared her contact information for agencies interested in outreach and information, or any identified individuals that would benefit from the program. Sharon asked if they will give away the book "Raising Emotionally Healthy Children." It is not in their program, but in the toolkit of things they are bringing to those families.

XV. Possibilities and Success Stories

Fernando encouraged everyone to become familiar with CalAIM - the executive summary and the other information, especially if they provide mental health services because that is going to reshape how all services are delivered in California. This reminds Sharon of when Mental Health Services Act first came and how it was going to be a huge change. CalAIM is also connected to billing for services and it is bringing back the philosophy of evidence-based practices. If providers can't show the evidence-based practice or community defined practice, it may impact the billing. Sharon thinks they need a presentation to this stakeholder group in regards to those changes. Fernando said it will affect outcomes and billing – it will be billing based on contact and not by the number of minutes spent with the client. It will reshape the whole mild, moderate and severe, where it's not just going to be medi-cal being billed by the county, but other organizations as well. Fernando recommended visiting the website and becoming familiar with it as it will reshape the whole mental health system. Sharon suggested that it be on the agenda to keep the conversation going.

XVI. Next Steps

The next meeting is scheduled for Thursday, August 26, 2021.

XVII. Adjournment

Meeting adjourned at 9:55am