

Nevada County Mental Health and Substance Use Advisory Board Minutes

Date:	October 02, 2020
Time:	9:30 a.m. – 12:00 p.m.
Place:	Zoom and Telephone

STANDING ORDERS

- 1. Call to Order and Introductions** – Self-introductions were made. Suzanne Nobles and Donna Tully potential Mental Health and Substance Use Advisory Board Members introduced themselves.
- 2. Public Comment.**
Members of the public may address the board on items not appearing on the agenda. Please understand that no action shall be taken on items not appearing on the agenda. There were no public comments during the Zoom Meeting Public Comment Period in the Zoom Chat or on the HSA@co.nevada.ca.us email address.
- 3. Announcements**
There were no announcements.
- 4. Mental Health and Substance Use Advisory Board (MHSUAB) Minutes September 4, 2020.**
Amanda Wilcox emailed the California State Auditor’s recent report on the Lanterman-Petris-Short Act to MHSUAB members. A motion was made by Ann Kelley to approve the September 4th minutes. The motion was seconded by Iden Rogers. All members present were in favor.
- 5. Mental Health Services Act Public Hearing 3-Year MHSA Plan Amendment FY 2020/21 through FY 2022/23 – Priya Kannall. PowerPoint**
Priya Kannall presented an overview of the MHSA Plan Amendment.
 - Incorporate the full active Innovation Plans per Department of Health Care Services finding.
 - HOME Team Innovation Plan Update – Due to master-leased housing budget savings, fund HOME Team Supervisor (Joe Naake) through Innovation instead of PEI – no change to overall HOME budget.
 - Add missing program – Youth Empowerment under Stigma Reduction (Eastern County Only) - \$9,682.
 - Fiscal cleanup items: Increase OSHPD contribution amount for regional Workforce Education and Training (WET) Program. Increase CalMHSA contribution amount for regional suicide prevention hotline.

Amanda Wilcox opened the Public Hearing and asked if there was any public comment. There were no comments. The Public Hearing was closed. Ann Kelley made a motion to approve the MHSA Plan Amendment. The motion was seconded by Janice Deardorff. All members present were in favor.

6. Stanford Sierra Youth and Families – Sara Busse.

Stanford Sierra Youth and Families used to be known as Sierra Forever Families. One year ago they merged with Stanford Youth Solutions a mental health organization based out of Sacramento. In Nevada County their program is known as family preservation. The main goal is to preserve the family unit. Stanford Sierra Youth and Families has five clinicians and three family support specialists. They serve approximately 100-110 clients per year. Therapeutic Support Services (TSS) are available for children in the process of becoming adoption. Half of their clinicians have been trained in Child Parent Psychotherapy (CPP) an evidence-based practice and useful tool for children five and under who experienced a trauma and don't have an understanding of how to verbalize it. It is an opportunity for the child, parent and therapist to work together creating a language to work through the trauma. Staff are also trained in Eye Movement Desensitization Reprocessing (EMDR) a tool to help people move past their trauma. Trauma Focused CBT and Filial Play Therapy, and Motivational Interviewing are other modalities.

7. Gateway Mountain Center – Daniel Clements and Peter Mayfield. PowerPoint.

Gateway Mountain Center's mission is to transform the lives of youth through nature based learning and wellness adventure. In 2011 they started a Behavioral Health program called Whole Hearts, Minds and Bodies; a nature based therapeutic program. After several years of working with youth they created a framework with what was working. Four roots for growing a human: root one is authentic relationships, root two is a nature connection, root three embodied peak experience (present in the moment) and root four is helping others. Gateway Mountain Center is different from typical clinical services in that a trained clinically supervised therapeutic mentor may pick the youth up from school with a kayak on their car. There is a lot of research on the impact of sensory inputs of nature and how healing it can be. There is one licensed therapist who will supervise 4 or 5 trained therapeutic mentors who work with 1 to 3 youth.

Daniel Clements, Program Director reported their current caseload is 48 youth. There are 8 youth on the waitlist. Seventy percent of the youth they work with reside in Nevada County. Forty percent of the case load is Latinx youth. Youth that have participated in the program for 6 or more months had a significant reduction in symptomatic distress. Gateway Mountain Center noticed an increase in overall distress in the early stages of the pandemic. They were able to take on 13 mentees with generous funding from donors and provide over 1500 hours of service.

Gateway Mountain Center is starting a new clinical program for outpatient services. They are currently waiting on approval to join the mental health provider network. They are also opening a youth wellness center across the street from Sierra High School.

8. Review Children's Services – Cindy Morgan.

Children's Behavioral Health is offering services virtually and in person. Some therapy services are provided outside at the child's home. For some children it is easier for them to open up during a virtual appointment. Children where family conflict is an issue are not doing as well. Kids struggling with depression and anxiety related to task demands at school or peer interactions are doing better having more time with their parents and people they feel supported by. Staff are using interactive online therapeutic visual activities where both the therapist and child can work online together at the same time. It is more difficult to work with children age 0 to 5 online. One of the therapists' is able to work online in activities that include the parent and

child together. Some of the children come into to the office for parent child interaction therapy (PCIT) which provides coaching to the parent while they are playing with their child. In person services are offered to every family, though there are families who prefer to do virtual meetings. Children's Behavioral Health is able to provide smartphones and chromebook loaners for virtual therapy and psychiatry sessions for situations where the family does not have the technology or a family has been exposed to Covid. There is also a chromebook set up in the office for families to use to connect with the therapist. There are also virtual groups: art therapy and a parenting skill group (no drama discipline).

In a typical year, Children's Behavioral Health receives 12 to 15 requests for services per week. In the first four to five months of Covid requests for services dropped to 0 to 2 per week. Behavioral Health is working with community partners to find other ways to identify and reach families that are needing services. Children's Behavioral Health has been providing presentations to schools, law enforcement, childcare providers, and community partners. As a result of the outreach and schools back in session referrals are now 8 to 10 per week.

Victor Community Support Services has expanded to serve the Truckee area to provide WRAP around and case management services for youth and case management services for adults. Currently Victor is serving 5 adults and 4 youth. Victor is doing outreach with schools and the community to let them know these intensive services are available.

A Transition Age Youth (TAY age 16-26) Taskforce was started to strengthen our capacity to serve high risk youth.

9. Behavioral Health Directors Report – Phebe Bell.

Behavioral Health continues to see lower than normal crisis numbers. In August there were 160 assessments; typically, there are 185 – 200. The number of hospitalizations is average to above average.

Accidental overdose deaths are a concern. There is an increase in overdose deaths (ages 18-60) that appears to be tied to percocet pills that have fentanyl in them and other fentanyl related overdoses. Public Health is gathering data that will be shared at upcoming community meetings. Behavioral Health will be meeting with Public Health, substance use disorder providers and healthcare providers to brainstorm prevention strategies. There will be efforts to get naloxone, narcan and fentanyl test strips out in the community. There has been a significant demand for substance use disorder services throughout COVID.

Yvonne Foley-Trumbo, Quality Assurance Manager will be retiring at the end of October. There are some interviews scheduled for next week. Dr. Darryl Quinn, Adult Services Program Manager will be retiring at the end of December. There is a recruitment out for this position. With two out of four managers in the department retiring it will be difficult until we hire these positions and they gain experience and expertise. Priya Kannall will be going out on leave at the end of this month.

Behavioral Health is working closely with Child Welfare and Youth Probation. There is a State and Federal push for ongoing reform of children's system of care particularly for children involved in the child welfare system and foster youth in particular. The goal is to better integrate Child Welfare, Juvenile Probation and Behavioral Health. Something new is the

Family Urgent Response System a way to provide real time 24/7 support to families who take foster youth into their homes. Foster youth often fail out of placements. The goal is to help foster settings be as successful as possible with support. Guidance and funding are just being released. Behavioral Health will be working closely with partners to implement.

Behavioral Health has been working with the Sheriff's Office on how to better support law enforcement in some of the difficult community situations they encounter that often involve a mental health crisis. Behavioral Health and the Sheriff's Office will be going to the Board of Supervisors on October 13th to present a potential mobile crisis pilot program. Behavioral Health has been in discussion with their crisis provider to have them be responsive to law enforcement partners within the existing system capacity.

Phebe Bell and Cindy Morgan participated in a training from Stanford University supported by Mental Health Services Oversight and Accountability Commission to roll out strategies to help communities deal with mental health needs and build resiliency during this time. We need to do more broad based community resiliency work.

A new therapist has been hired to work out of the jail.

SB803 the peer support bill has been signed by the Governor. It will take a couple of years to roll this out. The State has to get a waiver to allow us to add peer billing. There will be certification standards and oversight. Being able to bill for peer services in our respite program will help us with sustainability for that program.

10. Client Satisfaction Survey – Yvonne Foley-Trumbo. PowerPoint.

The State mandates we do a client perception survey. The spring 2020 survey consists of seven domains. There was a total of 500 surveys completed by adult and older adult Behavioral Health clients and contract provider clients. There were 150 to 200 surveys completed by family and youth. General Satisfaction Domain 91% of adults and older adults were satisfied with the services they were receiving. Perception of Quality and Appropriateness Domain 88% of adults and older adults felt they were receiving the appropriate services. Perception of Access Domain 87% of adults and older adults were able to access services when needed. Social Connectedness Domain 70% of adults and older adults felt connected socially in their lives. Perception of Outcomes Domain 72% of adults and older adults felt the outcomes were what they wanted. Participation in Treatment Planning Domain 78% of adults and older adults participated in their treatment plan. Functioning Domain 74% of adults and older adults

General Satisfaction Domain 98% of family and youth were satisfied with services they were receiving. Social Connectedness Domain 66% of family and youth felt connected socially. Annette LeFrancois will email the PowerPoint to board members.

Behavioral Health also did a telehealth survey. The survey was done in August and was completed by 103 people: 77% were 18 and older, 17% were younger than 18 and 6% were the parent of a client younger than 18. The goal of the survey was to get a sense of how clients were doing since COVID; were they getting the services they needed and were they happy with the services they were getting. Clients wanted more services by phone 48%. Clients wanted more services in person-outside at the clinic 29%.

Clients felt less connected to their provider since COVID 16% strongly agreed and 34% strongly disagreed. Refer to the PowerPoint for more information. Annette LeFrancois will email the PowerPoint to board members.

11. California Association of Local Behavioral Health Boards and Commissions – Shera Banbury and Annette LeFrancois.

Shera Banbury reported there will be a Performance Outcomes Committee Meeting on October 20 from 2:00 pm to 3:30 pm. There is a link for the meeting with more information in the CALBHBC October Newsletter: https://www.calbhbc.org/uploads/5/8/5/3/58536227/e-update_october_2020.pdf.

a) CALBHBC Annual Report to MHSOAC

The report was emailed to board members.

b) Passage of SB803, SB855, AB1976 and AB2265.

AB890 psychiatric nurse practitioner was part of the workforce legislation. AB1766 residential legislation regarding data tracking was passed. AB2377 would allow local governments to purchase adult residential facilities at risk of closure. AB855 access and parity for mental and physical health. AB1976 requires counties to offer Assisted Outpatient Treatment (Laura’s Law) unless they opt out. The bill also repeals the expiration of Laura’s Law.

c) Data Notebook – Use of Telehealth during the 2020 Public Health Emergency.

Annette LeFrancois will email board members when the Data Notebook is released. Mental Health and Substance Use Advisory Board Members who want to participate in a subcommittee to work on the Data Notebook, please email Annette LeFrancois.

12. Mental Health Services Act (MHSA) Report – Priya Kannall.

Priya Kannall gave an update on the MHSA fiscal impacts related to COVID 19.

The true impact is delayed by two years when personal income taxes on millionaires is trued up. Most likely this will occur in Fiscal Year 2022/23. A PowerPoint slide with the projections from a fiscal expert at the State was shown. Fiscal Year 2019/20 Statewide 14% decrease in MHSA revenue due to decreased personal income tax and higher unemployment. Throughout the year our revenue is based on everyone’s income tax (1.76% of statewide income taxes comes to us monthly). Annually in July there is a true-up that we receive in August (what millionaires paid in taxes) typically it is a two-year delay. Fiscal Year 2020/21 projects a 19% increase. Fiscal Year 2021/22 projects a 3% decrease. Fiscal Year 2022/23 projects a 24% decrease. At this time, we are not making changes to contracts. Not all counties have been able to do this. We are keeping a close eye on revenue and expenditures each month.

13. Communication – Future Mental Health Board Agenda Items.

Email future agenda items to Annette LeFrancois at annette.lefrancois@co.nevada.ca.us.

Currently we are following the Mental Health and Substance Use Advisory Board Calendar for future presentations and speakers.

Below is a list of future presentations and speakers that Mental Health and Substance Use Advisory Board members have suggested.

- a) Toby Guevin, Suicide Prevention Coordinator
- b) Medication Issues
- c) Sheriff Shannan Moon

- d) 211/Connecting Point
- e) Project Heart
- f) Lynn DeMartini, PhD

ATTENDANCE:

Members Present: Amanda Wilcox, Iden Rogers, Janice Deardorff, Laura Preston, Shera Banbury, Ann Kelley, Supervisor Hall, Lori Malone.

Excused Absent: Anne Rarick.

BH Staff: Phebe Bell, Annette LeFrancois, Priya Kannall, Cindy Morgan, Yvonne Foley-Trumbo.

Visitors: Gayatri Havighurst, Sara Busse, Pauline Abrons, Suzanne Nobles, Amy Rudkin, Donna Tully, Daniel Clements, Peter Mayfield.

Minutes by Annette LeFrancois