RIVERSIDE COUNTY BEHAVIORAL HEALTH COMMISSION



Meeting Minutes September 7, 2016 12:00 pm – 2:00 pm

BHC MEETING ATTENDANCE SEPTEMBER 7, 2016

MEMBERS PRESENT					
Richard Divine, District 4, Chair	Rick Gentillalli, District 3, Vice Chair				
Ric Riccardi, District 5	Carole Schaudt, District 4				
Daryl Terrell, District 5	Greg Damewood, District 5				
Victoria St. Johns, District 4	Walter Haessler, District 1				
Jason Farin, BOS Representative	George Middle, District 2				

MEMBERS NOT PRESENT				
Julie Crouch, District 2, Secretary	Beatriz Gonzalez, District 4			

OTHERS PRESENT							
Andrew Williams, RUHS-BH	Dawn Gordon, Guest						
Kathryn Mauro, Guest	Tony Ortego, RUHS-BH						
Saundra Luna, RUHS-BH	Richard Bolter, RUHS-BH						
Julie Curran, RUHS-BH	Brenda Scott, NAMI						
Cynthia Oma Gray, SHOH	Ryan Quist, RUHS-BH						
Dr. Dildar Ahmad, Guest	Luther Thomas, Guest						
Deborah Johnson, RUHS-BH	Claudia Smith, RUHS-BH						
Brian Betz, RUHS-BH	Laura Miles, VA Loma Linda						
Ron Hoffman, Art Works	Sharon Lee, RUHS-BH						
Kevin Festa, RI	April Jones, Guest						
May Farr, NAMI	Gloria Gaitan, High Road						
Laurence Gonzaga, IEHP	Thomas Peterson, RUHS-BH						
Lauren McSherry, Guest	Tiffany Keeler, RI						
Vicki Redding, RUHS-BH	Maureen Dopson, RUHS-BH						
Rhyan Miller, RUHS-BH	Lilia Escobedo, BOS Representative, District 4						
Maria Mabey, RUHS-BH	Joe Zamora, RUHS-BH						
Nichol Sheffield, PGH	Rachel Douglas, RUHS-BH						
Jane Beamer, RUHS-BH	B. Mitchell, Guest						
Kim McElroy, MCRB	Guillermo Gonzalez, Guest						
Araceli Ruiz, BOS Representative, District 1	Bill Brenneman, RUHS-BH						
Leslie Fellows	Lupe Stoneburner						
Dana Thomas	Mark Towns						

CALL TO ORDER AND INTRODUCTIONS – Chairperson, Richard Divine called the Behavioral Health Commission (BHC) meeting to order at 12:03 pm. Commission members and the public made self-introductions.

CHAIRPERSON'S REMARKS – Richard Divine announced that due to District 4 being over capacity, he has been re-districted to District 2 and James Stuart was transferred to the Palm Springs Airport Commission.

COMMISSION MEMBERS REMARKS – Carole Schaudt announced that Veterans Affairs has a mobile unit with doctors serving veterans in the Coachella Valley. Greg Damewood announced that the Inland Empire Disability Collaborative holds a meeting at Rustin on the third Tuesday of every month.

PUBLIC REMARKS – Brenda Scott announced that the 11th Annual NAMI Walk will be held on October 29. The NAMI Walk Kick-Off Luncheon will be held on September 13 at the Benedict Castle; all were invited to attend. The honorary guest will be Mia St. John; a professional boxer with an incredible story, which she will share at the NAMI Walk.

Rachel Douglas announced that the Parent Support and Training Program is preparing for their Thanksgiving and Snowflake Banner Holiday Projects. Ms. Douglas reported that each year, the Parent Support and Training Program provides over 100 Thanksgiving food baskets and over 1,000 toys and gifts to children and families. Holiday projects are donor based and all items received are donated to families who receive behavioral health services in Riverside County. Flyers were provided for more information.

Lupe Stoneburner from Soroptimist House of Hope announced they are holding their 35th Anniversary Open House on Saturday, September 17 from 10:00 am to 4:00 pm. All were invited to attend and encouraged to visit their website for more information: www.recoveryhouseofhope.org.

Dana Thomas, Community Advocate, requested the support of the Commission regarding the implementation of AB1424 as it is not being followed. Ms. Thomas stated that lives are severely impacted because AB1424 is not being implemented in a number of hospitals and clinics, but primarily in hospitals. Rick Gentillalli responded that there is some confusion with AB1424 as the bill was initially introduced in 2002 as a mental health bill and then reintroduced as a taxation bill when the mental health bill expired. Assembly Bill numbers are re-used when bills expire. Mr. Gentillalli suggested, with approval and support from the Board of Supervisors, the Commission can contact local Assembly men and women and Senators and inform them of the current situation with AB1424 and ask that it is properly enforced. Richard Divine asked to have someone from the Department look into whether it is being followed within the Department and report back to the Commission.

Richard Bolter announced that September is National Recovery Month and in honor of this movement, Substance Abuse Prevention and Treatment Program is holding a Recovery Happens Event on Friday, September 30, at Rustin. All are invited to join and celebrate with the Department. Flyers were provided for more information.

MINUTES OF THE PREVIOUS MEETING – Walter Haessler requested an addition to the minutes, under Old Business, Item 1, to clarify that the DSM 5 and ICD 10 both do not use the term "abuse" and at some point the Department may want to follow DSM 5 and move toward "substance use disorder" because the term "abuse" is obsolete. Ric Riccardi moved to approve the minutes as amended and Rick Gentillalli seconded the motion. All were in favor, none opposed, and the minutes were approved as amended.

CELEBRATE RECOVERY – Jane Beamer introduced the Celebrate Recovery Speaker, Amy Howard. Ms. Howard's son Max, who will turn 14 on September 26, was diagnosed with Asperger Syndrome, ADHD, Oppositional Defiant Disorder, and had physically aggressive tendencies from the age of three. Despite Max's diagnoses, he is very intelligent. When Max first started kindergarten, he was immediately transferred to the first grade as he was too academically advanced. The first few years of school Max attended a private school that specialized in students with behavioral health challenges. In the third grade, Max was transferred to Castle View Elementary; a public school that offered an "ED" program (Emotionally Disturbed), which is where Ms. Howard and her husband were introduced to the behavioral health services through Riverside University Health System – Behavioral Health (RUHS-BH). Services included Parent Support and Training Program, where they first met with Ben Wilson. Mr. Wilson introduced the Howards to the array of services provided by RUHS-BH. Ms. Howard and

her husband attended the orientation and later participated in the Parent Support and Training classes. Ms. Howard stated that the classes did not just educate and give them the tools they needed to care for their child; it also became a support group. Ms. Howard noted that it was the most positive experience in their life; it allowed them to learn that they are not alone in their struggles and gain the knowledge and support they needed to move forward.

NEW BUSINESS

- 1. <u>BEHAVIORAL HEALTH COMMISSION ANNUAL REPORT FY15/16 APPROVAL:</u> Greg Damewood motioned to approve the Behavioral Health Commission Annual Report FY15/16; Rick Gentillalli seconded the motion; eight members were in favor; one abstained; the Annual Report was approved as written.
- 2. <u>BEHAVIORAL HEALTH COMMISSION TRAINING:</u> Mr. Divine tabled the topic for October upon Julie Crouch's return. Mr. Divine recommended everyone identify topics they would like discussed along with date and time options.
- 3. <u>CREST/REACH UPDATE:</u> Rod Verbeck, from Crisis Services started by providing a quick overview of CREST, REACH, and CSU for those not yet familiar with the programs. CREST stands for Community Response Evaluation Support Team. CREST works in conjunction with law enforcement; primarily with police departments, sheriff department, and highway patrol. Their role is to respond and assist officers with understanding the situation and evaluating whether an individual experiencing a crisis situation requires hospitalization or if they can be placed in outpatient services. REACH stands for Regional Evaluation and Assessment at Community Hospitals. REACH works with hospital staff and doctors to help determine if an individual needs to be placed on a 5150 hold or placed in outpatient services. CSU stands for Crisis Stabilization Units and its purpose is to serve individuals who choose to volunteer and seek behavioral health services on their own. The main goal of all the programs is to alleviate the number of people admitted in emergency rooms to avoid overcrowding and to place or link individuals to the appropriate services.

The CREST program started off well but later hit a plateau. Officers informed Mr. Verbeck that part of the reason for the plateau is that officers rotate shifts every few months. New officers working a different shift may not be aware of CREST and those who rotate to different shifts conflict with CREST's hours of operation. Mr. Verbeck reported that they are actively pursuing more participation from law enforcement by having ongoing conversations with chiefs, lieutenants, and officers. They also attend the morning and evening briefings to inform law enforcement that services are available to help assist in crisis situations. Currently, 70-74% of the calls received are successfully diverted away from emergency rooms and people are placed or linked to appropriate services.

The REACH program is doing well; they continue to receive calls from emergency rooms that need assistance. For officers unaware of the program they typically bring individuals to the emergency room, this allows the REACH team to conduct a second evaluation to help assist doctors and nursing staff determine if an individual requires a hold. The REACH team includes a Peer Support Specialist, Behavioral Health Specialist, and a Clinical Therapist. They work with the doctors, nursing staff, consumer, and the consumer's family and friends when making a decision regarding a hold or treatment. Currently, 42% of cases are diverted away from a psychiatric hold and individuals are placed in appropriate treatment and/or services.

The Department plans to open three Crisis Stabilization Units in the county, one of which is already open and available for services. The CSU that is currently open is located in Riverside and can assist up to 12 consumers at any given time. Staff is rotated throughout the day and work in conjunction with Recovery Innovations. CSU follows a recovery model with peer navigation and peer informed care. The CSU program has provided services to well over a thousand consumers since the beginning of the year. Satisfaction scores from consumers are usually 95% and above, which is remarkable for a crisis program. The Department will be opening the second facility in Palm Springs in October and the third will be located in Perris, which will be open early next year.

Lastly, Mr. Verbeck reported that the Department has introduced a new position in Crisis Services to help further assist law enforcement working in the field. The Riverside Police Department Liaison is a Clinical Therapist that works in the field with a patrol officer and they respond to behavioral health and homeless

related calls. This provides direct assistance to law enforcement without contacting CREST and they are able to conduct evaluations immediately for individuals that may need to be placed in a psychiatric hold.

OLD BUSINESS

- 1. WRB/BHC MERGE: Tabled indefinitely.
- 2. <u>MHSA UPDATE:</u> Bill Brenneman reported that the Auditor Controller's Office has approved the MHSA Annual Plan Update and it will be placed on the Board of Supervisor's agenda for approval. Once approved, the Plan will be submitted to the Mental Health Services Oversight and Accountability Commission (MHSOAC).

Mr. Brenneman announced that Janine Moore, Prevention and Early Intervention (PEI) Administrative Services Manager and Coordinator, has promoted to the Central Children's Program Administrator position. Mr. Brenneman noted that Ms. Moore did a fantastic job with the PEI Program and is confident that she will do wonderful things with the Children's Program.

There is a new Innovation project that MHSA is preparing to introduce to the MHSOAC. The project is a mobile response team for children that have been sexually exploited. Paul Thompson is working in collaboration with the Research Department to craft a proposal to present to the MHSOAC for approval.

Lastly, MHSA is recalculating the component plan for Capital Facilities and Technology, which will increase funding to allow for expansion. MHSA proposes to leverage funds with the Crisis Program to allow the development of the Crisis Stabilization Unit. Additionally, it will also allow MHSA to expand on their Technology Component. Initially the Department began with ELMR and they are now in the process of transitioning to a new system called "Epic". The new system will allow for patient information to be shared more efficiently with the medical center, which will help improve patient care and increase staff efficiency. Mr. Brenneman noted that both proposals will require a 30-day posting for the public to review and a Public Hearing hosted by the Commission.

3. <u>SUBSTANCE ABUSE PREVENTION AND TREATMENT PROGRAM UPDATE:</u> Rhyan Miller announced that the rates for the Drug Medi-Cal Waiver have been approved by the state and the Department plans to roll out the new enhanced services by November 1. Mr. Miller asked all contract providers in attendance to anticipate a Request for Qualifications (RFQ), which will include all service modalities that the Department will be contracting for and/or for services under current contracts. Mr. Miller will begin working with the Purchasing Department to develop a bidder's conference. More information regarding these matters will be reviewed at the Provider's Meeting, which will be held on Thursday, September 8, at Rustin. Mr. Miller added that they will also be discussing the "Incidental Medical Services" which recently went back into effect July 1.

Lastly, Mr. Miller provided an update regarding the CARES Line. The CARES Line for Substance Abuse has been in operation for over a year and is available to the public between the hours of 9:00 am to 5:00 pm, and rolls over to 211 in the evening and weekends. As of Friday, September 9, at 5:00 pm, services will transition to a 24-hour, 7-days a week, 365-days a year service. Executive Management recently approved this transition with the hope of making access much easier for the community. The Department will be hiring two additional staff members for the CARES Line to accommodate this change.

DIRECTOR'S REPORT – Assistant Directors Angela Igrisan and Joe Zamora provided the Director's Report on behalf of Steve Steinberg. Ms. Igrisan reported that there have been two personnel changes in the last few months. Janine Moore has promoted to Ms. Igrisan's previous position as Children's Program Administrator and Sylvia Aguirre-Aguilar has filled the Cultural Competency Manager position.

Ms. Igrisan addressed a newspaper article regarding the California State Auditor's report on the use of psychotropic medications and children in foster care. A member of legislature in Sacramento commissioned the State Auditor to investigate the matter and selected four counties to evaluate – two small counties and two large counties. Riverside County was chosen as one of the larger counties and studies showed that we have a low percentage of children on psychotropic medication. It was a long and extensive audit and the Department made an effort to educate the auditors about Riverside County's behavioral health and foster care systems. However,

the Auditor's report yielded somewhat inaccurate results. The report did not include the Department's case management services and various other services regularly provided to foster youth. Ms. Igrisan noted that the report paints a more dire picture than what is really going on. The report analyzed the Department's efforts in terms of the new guidelines set forth by the state – not the regulatory requirements. The Auditor's timing was somewhat amiss as during their audit the Department was in the process of implementing these new guidelines. Dr. Chang and the Medical Team have successfully completed the implementation of the new guidelines for reviewing the psychotropic medication based on the state's requirements.

Ms. Igrisan announced that the Children's Program will also be releasing an RFQ for different types of children's services throughout the County.

Mr. Zamora reported how the 1991 Realignment Plan is severely impacting the Department's ability to provide proper and sufficient services to the County's citizens. The 1991 Realignment was a state initiative that transferred fiscal responsibility to the counties for community-based mental health programs, state hospitals, and Institutions for Mental Disease (IMD's). Funds distributed by the state were based on the percentage of population that was utilizing services in 1991. This percentage has not been adjusted since, which has placed the County in a considerable financial predicament. Since the implementation of the 1991 Realignment, Riverside County experienced the largest and fastest growth in population throughout the state. In the last 25 years, Riverside County's population has increased by 94%, which is double the growth rate of our neighbor San Bernardino County, which experienced a 45-46% growth in population.

This is a significant disadvantage for the County because there have been no adjustments made to the way revenue is delegated between counties. The 1991 Realignment is funded by a percentage of California's sales tax. While sales tax revenues have increased due to increases in sales tax over the last two decades; monies distributed to counties throughout the state have stayed locked to 1991 statistics for population, need, and usage. Riverside County stands with the fourth highest population in the state, yet ranks second to last (57 out of 58) in revenue per capita, which does not accurately represent the funds that should be received by the County. Riverside County receives only half of what other counties receive; and not counties with population similar to ours, but by smaller counties. This has placed a tremendous burden on the County's inpatient facilities, local hospitals, local emergency rooms, and the array of services that the Department was able to provide prior to the 1991 Realignment.

In 2004, the implementation of Mental Health Services Act (MHSA) allowed the Department to restore some of the services offered in clinics, but has not closed the gap. To put things in perspective, Mr. Zamora explained that by the year 2000 the County was receiving 3.3% of the statewide revenue but the population had already grown to 4.5%, which left the County \$12 million a year short to fund services. In 2010, 19 years after the 1991 Realignment the County was up to approximately 3.5% of the statewide revenue but our population has grown to 5.8%, which places us \$23-30 million a year short to properly fund and expand services as needed to accommodate our growing population. In the last 25 years, this has added up to approximately between \$280-400 million a year in Realignment funds that the County has not received and is being distributed elsewhere. Mr. Zamora stated that the Department typically leverages funds for programs and if that money were received accordingly it would be leveraged with federal monies as well and the County could potentially be receiving \$500-700 million to fund programs, facilities, and services.

This issue has been on the County's legislative platform for several years. Orange County has also filed some lawsuits to try and reverse this as they are also suffering from the outcomes of the 1991 Realignment and many are learning that the biggest obstacle in this issue is politics. The Department is actively working on this issue and continues to work with the Board of Supervisors and County Legislative staff.

COMMITTEE UPDATES:

<u>DESERT REGIONAL BOARD:</u> Mr. Divine reported that the Desert Regional Board is currently working on preparing for the 2017 May is Mental Health Month event and determining location, date, and proclamation pickups strategies.

MID-COUNTY REGIONAL BOARD: Kimberly McElroy reported that they are also preparing for the 2017 May is Mental Health Month event. The Mid-County Regional Board has also formed a subcommittee to explore and

better understand the responsibilities of the regional boards. They are also exploring ways to better learn about issues occurring in Mid-County and how to best present them to the main Commission. Ms. McElroy also requested to have the regional boards be included in the upcoming Behavioral Health Commission Training. Mr. Divine assured Ms. McElroy that regional boards will continue to be included as they have been in the past. Lastly, Dr. Haessler reported that they recently received a site review that detailed some major issues in a facility, which they have turned over to the Regional Administrator to address.

<u>WESTERN REGIONAL BOARD:</u> Mr. Damewood reported that they are continuing to work on their membership and address any issues that arise within their region.

<u>ADULT SYSTEM OF CARE:</u> Kathy Mauro reported that RTA has placed a bus stop at County Farm Road. This bus stop will serve individuals that participate and receive behavioral health services in the area. Carole Schaudt reported that issues with transportation in the Coachella Valley continue, but now there is an app available that shows bus schedules and bus stops throughout the Valley.

<u>CHILDREN'S COMMITTEE:</u> Tori St. Johns reported that Lisa Everson from the Lehman Center presented on the training activities for graduate students working in the Lehman Center. Substance Abuse Prevention and Treatment has made an agreement with Tarzana and are now able to refer youth clients to their services. Ms. Igrisan reported that the foster care system is changing due to a massive group home reform that will occur on July 1, 2017. Their current level system will change from a 14-level system to a 2-level system. The first level will be children who are in home-based foster care and the second level will be for children who are in short-term residential treatment centers. The Department's Quality Improvement team will perform several Medi-Cal Certifications and help train foster parents with behavioral health techniques as well as further address the topic of foster care psychotropic medication oversight.

<u>CRIMINAL JUSTICE COMMITTEE:</u> Mr. Damewood reported that they received some surprising statistics at their last meeting. It was reported that approximately 49% of the jail population struggles with some form of behavioral health diagnosis. Staffing in the jail is currently at 95%, which is much closer to meeting the goal of 100% full staff capacity.

<u>LEGISLATIVE COMMITTEE:</u> Dr. Haessler reported that the Legislative Committee did not meet due to extremely low attendance. He invited others to join the Committee, which meets at 10:30 am on first Wednesday of each month. It was recommended that the Legislative Committee Secretary send an appointment notice for these meetings to all the Commission and Regional Board members.

During the dark month of August, the BHC Liaison contacted County Counsel and learned that the bylaws can be amended to allow the Behavioral Health Commission to take a position on behavioral health related legislations.

Also related to the AB1424 discussion, an article published in July by the Press Enterprise addressed the "gut and amend" practice. In California, a bill can start in the legislature with a title "The Prosperity For All" Act and later become the law for regulating the manufacture, sale, and use of dog leashes or floor tiles. A Legislature Transparency Amendment measure will be on the November ballot that would require 72-hours of online publishing before a vote on any legislative measure. This would aid transparency and allow feedback from constituents prior to a legislative vote.

OLDER ADULT SYSTEM OF CARE COMMITTEE: Ric Riccardi reported on a presentation from the CARE Team about curtailing abuse related to the elderly (defined those of 65 or older). A brochure entitled: "When Trust is a Weapon", provided helpful information about elder fraud. Information was also provided on services available to the elderly called In-Home Supportive Service (IHSS). Qualified individuals may receive assistance with various household tasks such as cleaning, preparing meals, and laundry. Another topic covered during the meeting, which most found disheartening is Elder Abuse. Elder Abuse comes in many forms including physical, sexual, verbal, neglect, self-neglect, psychological abandonment, financial, isolation, mental suffering, and consumer fraud.

<u>VETERANS COMMITTEE:</u> Rick Gentillalli reported that attendance for the Veteran's Committee has doubled. Meetings occur on the first Wednesday of each month from 10:30 am to 12:00 pm at Rustin. Veterans Services Director, Grant A. Gautsche, was unable to attend and in his absence Kelley Anderson, the Acting Director, attended the meeting. Mr. Gentillalli reported that one of the biggest concerns surrounding veterans is suicide. The number of veterans killed in wars compared to the number of veterans who commit suicide is about 3 to 1. The leading cause of veteran suicide is related to behavioral health issues such as post traumatic stress disorder (PTSD). Mr. Gentillalli announced that there is a Veteran's Awareness Committee meeting held the first Monday of every month in San Bernardino at 303 East Vanderbilt Way, San Bernardino, from 3:00 pm to 5:00 pm and all are welcome to attend. Mr. Gentillalli noted that a majority of the veterans are from the Vietnam War era and for many of them, their symptoms of PTSD are only now beginning to show, 40 years later.

EXECUTIVE COMMITTEE RECOMMENDATIONS – Dr. Haessler requested to have the Legislative Committee topic, regarding the amendment of the current bylaws, added to the agenda. Mr. Damewood suggested that the Commission allow for public comments to be submitted in writing for those that would prefer not to speak in public. Mr. Divine stated that if there are other items that the Executive Committee should consider, they should be sent to the BHC Liaison on or before Monday, September 12.

ADJOURN - The Behavioral Health Commission meeting adjourned at 2:05 pm.

<u>Maria Roman</u>

Julie Crouch, BHC Secretary Maria Roman, Recording Secretary

2016 BEHAVIORAL HEALTH COMMISSION ATTENDANCE ROSTER

MEMBERS	JAN	FEB	MAR	APR	MAY	JUN	JUL	SEP	ост	NOV
Beatriz Gonzalez, District 4	1	1	1	Α	1	1	1	Α		
Carole Schaudt, District 4	1	Α	1	1	1	1	1	1		
Daryl Terrell, District 5	1	1	1	1	1	1	1	1		
George Middle, District 2				1	Α	\	1	1		
Greg Damewood, District 5	1	\	\	\	1	\	1	1		
Jason Farin, District 2	\	\	\	A	1	/	1	1		
Julie Crouch, District 2	1	Α	1	\	1	/	Α	Α		
Ric Riccardi, District 5	\	\	\	\	1	/	1	1		
Richard Divine, District 4	1	\	1	\	1	/	\	1		
Rick Gentillalli, District 3	1	1	<	1	<	\	1	/		
Victoria St. Johns, District 4	1	1	1	1	1	1	1	1		
Walter Haessler, District 1	1	1	1	1	1	1	1	1		

Present = A Absent = A Medical Leave = (ML)

Minutes and agendas of meetings are available upon request and online at www.rcdmh.org. To request copies, please contact the BHC Liaison at (951) 955-7141 or email at MYRoman@rcmhd.org.