

RIVERSIDE COUNTY BEHAVIORAL HEALTH COMMISSION

MEETING MINUTES FOR MARCH 4, 2020 | 12:00 pm to 2:00 pm

CALL TO ORDER, PLEDGE OF ALLEGIANCE, AND INTRODUCTIONS – Chairperson, Richard Divine called the Behavioral Health Commission (BHC) meeting to order at 12:00 pm, lead the Pledge of Allegiance, and commenced introductions.

CHAIRPERSON'S REMARKS – Mr. Divine requested to have everyone finish grabbing their lunches and please turn their phones on silent, vibrate, or airplane mode during the meeting.

COMMISSION MEMBERS REMARKS – Jose Campos reported that he attended the California First Five Healthcare Summit. One of the presentations discussed during the Summit is how First 5 funding in Santa Clara County is being used to support Behavioral Health and how Behavioral Health are leveraging the funds for 0-5 services.

Anindita Ganguly reported that she attended a committee meeting for Feeding America, which is one of the largest foodbanks for San Bernardino and Riverside County.

Rick Gentillalli reported that a health rehabilitation hospital has recently opened in Murrieta called Encompass. The facility cares for patients struggling with severe physical and neurological illnesses, injuries, and disorders.

PUBLIC REMARKS – Dr. Vernita Black introduced herself as the newly elected president for NAMI Western in Riverside County. Dr. Black announced that they will be holding general meetings on the first Monday of every month at Kaiser Permanente, located on Magnolia Avenue in Riverside. Flyers were provided for more information.

MINUTES OF THE PREVIOUS MEETING – Minutes were accepted as written.

CELEBRATE RECOVERY – For this month's Celebrate Recovery presentation, Substance Abuse Prevention and Treatment Program invited three individuals to share their story of recovery and to demonstrate the empowering impact of peer supports. ****For the purpose of these minutes and in an effort to protect the privacy of each speaker, they have been given fictional names.*

The speakers were James, Steve, and Daniel. James first shared his experience. For as long as James could remember, he always felt different, less than, insecure, inadequate, and insignificant. At age 12, he was placed in his first inpatient institution. For many years after, James' life was plagued with intense symptoms, which lead to self-medicating and multiple suicide attempts. He also cycled in and out of foster homes, institutions, jails, and prisons. With the support of his family and treatment, he was able to find hope and make positive changes in his life. James was then introduced to Peer Employment Training, which he completed and began volunteering for Riverside County's Substance Abuse Prevention and Treatment Program. Later, he was able to secure a position in AB109's New Life Programs located at the Day Reporting Center (DRC).

James' work allowed him to use his past to carry hope and be an example of recovery for those entering the program and one of the many individuals James worked with was Steve, who also shared his story. Steve was released from prison in 2012. He found himself wanting to do more to determine the root problems causing him to cycle in and out of the prison system for the past 33 years. The

Probation Department sent him to the DRC where he met James, who encouraged him to commit and work towards recovery. Steve took advantage of every service that the DRC had to offer. He completed several classes, completed his GED, and graduated from the program. Steve worked diligently towards his recovery and credits much of his success to James. Steve noted that James' own recovery story and success motivated and encouraged him to continue working towards his own recovery journey. He later participated and completed the Peer Employment Training, which was a long process for Steve due to his background. He's been able to connect with Probation and attend many of their meetings and trainings where he speaks to dozens of Probation Officers about the benefits of peer supports. Steve emphasized the benefits of peer supports and the very meaningful impact it has for people like him. Seeing someone who experienced and overcome similar struggles as him is incredibly inspiring and motivating. The same was true for the next speaker, Daniel.

Daniel's behavioral health challenges began at age 6 and by age 16 he began cycling in and out of jails and prisons until he was 40 years old. Daniel stated that he spent 18 years incarcerated and experienced a great deal of traumatic events. He didn't know how to deal with the trauma he experienced, so he began self-medicating. Daniel tried committing himself to recovery in the past, but couldn't find his way. When he was released from Norco State Prison, he learned about the DRC and asked his probation officer about how to get in the program. When Daniel got into the DRC, he met Steve, and similarly to Steve's story, Daniel was inspired by Steve's success in recovery that he committed himself to succeeding in his own recovery journey. After completing his program, Steve introduced Daniel to Peer Employment Training, which he completed. Daniel worked with RI International for a little over a year and has transitioned over to the new DRC as a full-time Peer Support Specialist.

NEW BUSINESS

1. **NAVIGATION CENTER:** Natalie Schmitz, Behavioral Health Services Supervisor, gave an overview of the Navigation Center and the type of service it provides. The Navigation Center opened approximately two years ago and is charged with engaging clients released from psychiatric hospitalization to outpatient behavioral health care. The Navigation Center is a peer support centered program that perform intensive FSP (Full-Service Partnership) outreach to clients in need. When the program first opened, they initially assumed it would be an easy transition for clients and that they would come freely on their own, but quickly learned the opposite. Clients released from psychiatric care typically have a history of severe and persistent mental illness stemming from some form of abuse and they tend to self-medicate with street drugs or alcohol. Some clients also struggle with homelessness and have a general distrust of authority figures or anything related to government. Ms. Schmitz noted they had to get creative with interacting with clients to help link them to appropriate levels of treatment and service. Staff had to determine what the causal links were to clients' cycles of hospitalizations, what their barriers were and their goals. Staff concluded the best way to reach clients is to spend time with them, so they decided to spend some time at the units in ETS daily and interact with clients one-on-one.

Ms. Schmitz shared a story of one client to illustrate some of their work. About a year and a half ago, they met a 27-year old male client at ETS (Emergency Treatment Services) who was raised in homelessness and gang activity. The client self-medicated with methamphetamines in an attempt to treat his auditory and visual hallucinations and overwhelming paranoia and grandiose delusions. The first time staff tried to engage the client, he showed no interest and wanted nothing to do with

them. On the second day, the client observed the staff leading a group session and began to warm up to the idea of seeking help. The client spoke to one of the staff members and shared that he and his father lived in a nearby park, to which he gave the location. Both the client and his father were heavily engaged in gang activity and drugs; it was their way of life. The client made it clear in his own way that he would like to be removed from the situation, but didn't really know how. Afterwards, the client was admitted to ITF (Intensive Treatment Facility) and the staff that engaged him from ETS continued working with him. He was later discharged to LAGOS, which is a 14-day crisis stabilization unit, and the same staff that worked with him at ETS and ITF continued engaging him and doing follow-up visits. It was then that the client realized that the staff from the Navigation Center truly cared about his well-being and wanted him to succeed in his recovery. The client had already been receiving treatments to help him with his psychosis and was doing well. The Navigation Center staff then linked him to Substance Abuse Program that helped place him in a residential rehabilitation facility to continue his treatment. While the client made strides in his recovery, the Navigation Center staff helped him obtain a driver's license, a social security card, and CalFresh food stamps. After he completed his rehabilitation treatment at the residential facility, he was transferred to a sober living program and a pastor offered to rent him a room at his house. Some time afterward, the client struggled with a relapse, but did not allow himself to succumb to his addiction. The client immediately informed the staff from the Navigation Center and they helped him get back on track. Today this client is doing very well and is maintaining his sobriety. Ms. Schmitz noted that prior to the Navigation Center's engagement with the client, he had over 60 hospitalizations. Since the Navigation's Center began working with him, the client has not had a single hospitalization.

The Navigation Center focuses on The Stages of Change Model and works diligently with each client through each stage – pre- contemplation, contemplation, preparation, action, and maintenance. Ms. Schmitz noted that they also try to identify each client's barriers and goals to help connect them to the appropriate resources and levels of care. The Navigation Center is a temporary program that works with clients for 60-90 days and once they are stable and choose to continue their behavioral health treatment program, they are transferred to a sister clinic in the area. Since the program started, they have helped transition over 200 clients from repeated hospitalizations to a primary provider.

2. COMMISSION MEMBER ATTENDANCE: Mr. Divine opened up the topic for discussion as there are concerns surrounding member attendance and absences. Mr. Divine stated that the Behavioral Health Commission holds ten meetings a year and members may only miss three meetings within the year. It was suggested that once a member has missed their second meeting, a form letter should be sent to them as a warning and to contact either the Membership Committee or the Chair to inform them of what is causing their absences. Many believed that the "3 and out" rule is far too rigid and that there should be some leniency, especially if the reason for their absences are health related.

April Jones suggested having a form of evaluation for Commissioners to determine if members are meeting expectations, which include attendance.

3. BEHAVIORAL HEALTH COMMISSION ANNUAL TRAINING: Commission members chose two tentative dates and times – Saturday, April 18 or Saturday, April 25, which will be held either 9:00 am to 2:00 pm or 9:00 am to 2:30 pm. Date and time is contingent upon Susan Wilson and Mary Stetkevich's

availability. The date and time for the training will be finalized at the next Commission meeting.

DIRECTOR'S REPORT: Dr. Chang provided an update on the Department's efforts surrounding homelessness and mobile health clinics. Homelessness is understandably an issue for folks in our communities and the Department is exploring various options to get them off the streets and into care. Notably those struggling with mental health and substance use disorders. One of the options is to expand what the Department is currently doing, which is working with different landlords to get more apartment units, hotels, and motels. Another option they're exploring is a "build or buy" piece and they are looking at the possibility of either building or buying an apartment complex, hotels, or motels. Dr. Chang stated that there are certainly pros and cons to this option and they are open to input and feedback from the community.

The Department is also looking into expanding their behavioral health mobile clinics. Currently, there are three mobile clinics serving each region of the County. The motivation behind the expansion is that it will allow the Department to provide onsite services in locations that would otherwise not be able to accommodate them in a physical space. An example of this are the various schools interested in having behavioral health services available on their campus. Riverside Community College and Moreno Valley Unified School District have all expressed interest in having behavioral health services available for their students on campus, however, they lack the physical space to accommodate staff and equipment. The expansion of the Department's behavioral health mobile clinics can also help improve the efforts surrounding homelessness and housing. Dr. Chang reported some landlords are concerned that housing clients may cause some problems in their complex, but by having a mobile clinic on site, it can help alleviate their concern and provide immediate assistance to consumers should a crisis occur.

Dr. Walter Haessler asked Dr. Chang about what the Department is doing to prepare for the Coronavirus (aka COVID-19). Dr. Chang first expressed his thanks to staff and the Crisis Teams who responded and stayed at the March Air Reserve Base when a flight arriving in Ontario was re-directed to the military base for testing and quarantine. In terms of preparation, the Department is following the lead of Dr. Kaiser, Riverside County's Public Health Officer and RUHS – Public Health Department. The current message is to stay home if you're feeling ill, avoid handshakes, avoid touching your face, and wash your hands. They are also looking at possibly postponing some outreach events and altering other schedules until the Department has a better sense of what is going on.

OLD BUSINESS

1.) REGIONAL ADVISORY BOARD BYLAWS: Kim McElroy went over the changes made in the Regional Board Bylaws. Ms. McElroy explained that changes included updating some verbiage (i.e. "mental health" to "behavioral health") and mirroring certain sections of the main Commission's Bylaws making both sets of documents more consistent. Greg Damewood suggested giving the responsibility of appointing members to Regional Boards and give Dr. Chang the option to delegate membership local boards, supervisors and the Membership Committee. Mr. Damewood's reason being that Dr. Chang doesn't know who the candidates are and has no way of meeting them. Brenda Scott and Jose Campos stated that bylaws are ever changing documents and may be amended periodically. The discussion over Dr. Chang's appointment of members may continue, however, the current document should be finalized and approved. Mr. Divine recommended

finalizing the amended bylaws with the changes made by Ms. McElroy and to have the Commission vote for its approval at the next meeting.

2.) MHSA UPDATE: Sheree Summers, Manager for Workforce Education and Training, presented an Employee Recognition Award. Ms. Summers' team is in charge of the Department's Employee Recognition Program, celebrating some of our outstanding service stories happening throughout RUHS-BH. Each year they receive hundreds of submissions about compassionate service being provided by our hardworking staff. Ms. Sheree shared a video highlighting the recipient's hard work and testimonials from staff, then presented the Employee Recognition Award plaque to Cynthia Rumford-Jones.

3.) SAPT UPDATE: Rhyan Miller reported that SAPT has released the Prevention RFPs to Purchasing. The RFPs are seeking for SAPT services in three general areas. The first RFP is seeking for prevention services to be embedded inside a school system, but applicants must be an existing contractor for SAPT services. The second and third RFP are seeking prevention services for the LGBTQ youth and community based prevention. Mr. Miller noted that all those interested may contact him or Purchasing as they must first register as a vendor prior to submitting an application.

Mr. Miller shared that there are two upcoming ASAM trainings. Both trainings center around Medication Assisted Treatment (MAT), but one is specific to doctors and prescribers and the second is organization-focused. Both trainings are scheduled for March 10 and is funded by Health Management Associates in conjunction with RUHS-Medical Center and Behavioral Health. Mr. Miller added that the trainings are free of charge and the Department will cover the cost of travel for those who choose to attend.

Mr. Miller reminded everyone that the SAPT Provider meeting will be held on March 12 at Rustin. April Marier has invited the California Rural Indian Health Board to the meeting and they will be doing a presentation regarding opioid use and overdose of Native Americans. Riverside County has 12 Native American tribes within its borders and Ms. Marier sits as the Chair of the Tribal Task Force for Substance Abuse Prevention and Treatment. Mr. Miller shared that he will also be providing an update regarding DMC-ODS at the SAPT Provider meeting.

COMMITTEE UPDATES:

CRIMINAL JUSTICE COMMITTEE: Mr. Damewood shared that they are having a meeting on Wednesday, March 11 at noon and all are welcome to attend.

QUALITY IMPROVEMENT COMMITTEE: Daryl Terrell reported that SAPT services is now available at 20 schools in addition to prevention services. Screenings are now available and additional treatment services can be provided on site.

CHILDREN'S COMMITTEE: Tori St. Johns shared that Diana Brown came and provided an update on Prevention and Early Intervention (PEI).

DESERT REGION ADVISORY BOARD: Mr. Divine reported they are planning their 18th Annual Art Show for May is Mental Health Month. The Rivers in Rancho Mirage has agreed to hang the artwork in their storefronts to give this year's Art Show a "gallery" feel. The Rivers is allowing them to hang the artwork for two weeks and will assist in advertising the event on the radio, dubbing it as "Art Walk at The Rivers."

EXECUTIVE COMMITTEE RECOMMENDATIONS: None

ADJOURN: The Behavioral Health Commission meeting adjourned at 1:54 pm.

Maria Roman

Tori St. Johns, BHC Secretary

Maria Roman, Recording Secretary

FY 2019/20 BEHAVIORAL HEALTH COMMISSION ATTENDANCE ROSTER

MEMBERS	JUL	SEP	OCT	NOV	JAN	FEB	MAR	APR	MAY	JUN
Anindita Ganguly, District 2	✓	✓	✓	A	✓	A	✓			
April Jones, District 3	✓	✓	A	✓	A	✓	✓			
Beatriz Gonzalez, District 4	✓	✓	✓	✓	✓	✓	✓			
Brenda Scott, District 3	✓	✓	✓	A	✓	✓	✓			
Carole Schaudt, District 4	A	A	✓	✓	A	A	✓			
Daryl Terrell, District 5	A	✓	✓	✓	✓	✓	✓			
Debbie Rose, BOS Rep. Dist. 2							A			
Dildar Ahmad, District 1	✓	A	✓	✓	A	✓	A			
Greg Damewood, District 5	✓	✓	✓	✓	✓	✓	✓			
Jose Campos, District 2		✓	A	✓	✓	A	✓			
Paul Vallandigham, District 5				✓	✓	✓	✓			
Richard Divine, District 2 (Redist. 4)	✓	✓	✓	A	✓	✓	✓			
Rick Gentillalli, District 3	ML	✓	✓	✓	✓	✓	✓			
Victoria St. Johns, District 4	✓	✓	✓	✓	✓	✓	✓			
Dr. Walter Haessler, District 1	✓	✓	✓	✓	✓	✓	✓			

Present = ✓ | 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.

OTHERS PRESENT		
Akram Razzouk, MD, RUHS-BH	Amy McCann, RUHS-BH	Andrew Williams, RUHS-BH
Annie Leicht, RUHS-BH	Antonio Martinez, RUHS-BH	Ashley Hanson, RUHS-BH
Bernadette Regan, RUHS-BH	Bill Brenneman, RUHS-BH	Brandon Jacobs, RUHS-BH
Brian Betz, RUHS-BH	Carlos Chavez, Guest	Chris Duffy, Guest
Cynthia Rumford-Jones, RUHS-BH	David Schoelen, RUHS-BH	Deborah Johnson, RUHS-BH
Diana Brown, RUHS-BH	Dylan Colt, RUHS-BH	Gregory Burks, Guest
Jacob Penland, Guest	Janice Rooths, Guest	Janine Moore, RUHS-BH
Jeremy Goodland, Guest	Johnnie Gray, Guest	Joshua Korhely, RUHS-BH
Julie Stewart-Cleaveland, Guest	Kim McElroy, Guest	Kirk Yale, RUHS-BH
Kristen Duffy, RUHS-BH	Laurence Gonzaga, RUHS-BH	Lisa Morris, RUHS-BH
Lucy Lopez, RUHS-BH	Maria Martha Moreno, RUHS-BH	Maria Roman, RUHS-BH
Mariah Andrews, RUHS-BH	Matthew Chang, MD, RUHS-BH Director	Maureen Dopson, RUHS-BH
Maureen Martinez, RUHS-BH	Melinda Drake, Guest	Melissa Noone, RUHS-BH
Mo Martinez, Guest	Natalie Schmitz, RUHS-BH	Pamela Norton, RUHS-BH
Pedro Arciniega, RUHS-BH	Pierre Scott, RUHS-BH	Praise Okoh, RUHS-BH
Ravae Battest, RUHS-BH	Rhyan Miller, RUHS-BH	Richard Bolter, RUHS-BH
Rick Algarin, RUHS-BH	Robert Youssef, RUHS-BH	Samuel Murillo, RUHS-BH
Sarah Rodriguez, BOS Rep. Dist. 3	Sean Frederickson, RUHS-BH	Sheree Summers, RUHS-BH
Sylvia Aguirre-Aguilar, RUHS-BH	Tammy Moringlane, Guest	Tiffany Ross, RUHS-BH
Tony Ortego, RUHS-BH	Vernita Black, MD, Guest	Vicki Redding, RUHS-BH
Zach Tucker, RUHS-BH		