

# Minutes

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**Present:** Micki Archuleta, Chair; Darrell Hall, Vice-Chair; Mary Ellis, Secretary; Iris Mojica de Tatum; Sally Ragonut; Keng Cha; Norma Cardona; Bruce Metcalf

**Absent:** Supervisor Lor; Vicki Humble; Vince Ramos; Audrey Spangler

**Others Present:** Yvonnia Brown; Jacqui Coulter; Lanetta Smyth; Tabatha Haywood; Janinda Gunawardene; Kimberlee Bledsoe; Sharon Mendonca; Carol Hulsizer, Recorder

## **Call to Order / Flag Salute / Roll Call**

Chair Micki Archuleta called the meeting to order at 3:02 p.m. Flag salute was done. Roll call was taken.

## **Mission Statement**

The Mission Statement was read by Micki Archuleta.

## **Approval of Minutes from March 5, 2019 (BOARD ACTION)**

**Recommendation/Action:** M/S/C (Mojica de Tatum / Ragonut) to approve the March 5, 2019 minutes.

**Opportunity for public input. At this time any person may comment on any item which is not on the agenda.**

**Discussion/Conclusion:** No comments

**Recommendation/Action:** None

## **May Strategic Planning Meeting Discussion**

- a. Date / Time
- b. Agenda Topics

**Discussion/Conclusion:** Yvonnia explained that the Board needs to agree on a date, time and agenda topics for a Strategic Planning meeting in May. a. After lengthy discussion it was decided to hold the Strategic Planning meeting on Tuesday, May 7, 2019 from 3:00 to 6:00 pm. This is the date of the regularly scheduled monthly meeting – just one hour longer. b. The agenda will be revisiting the Strategic Plan from last year. Iris clarified that items to be discussed would be: looking at the Board of Supervisors' form (application), expectations for new members (onboarding), review the Strategic Plan document, dedicate some time on what are the elements that should be on the board development, specify the objectives (what are the deliverables and by what date). Yvonnia continued that the Board has not really established what the Board development looks like and this will give the ad-hoc committee the opportunity to outline and make a recommendation to the full Board. Expectations for new members can also be developed. It was decided that a meeting with the Director and the Executive Committee would not be needed in order to establish the May agenda because they had just basically put the agenda together. Micki commented that she would like to talk with the Director. She has been thinking about staying on a second year as the Chair. One thing she really wants to accomplish is some kind of a facilities review so that it can be documented as to what is going on, in particular at the Wellness Center. She is concerned about the lack of secular services and she would like that documented. Yvonnia commented that they can talk. Iris concluded that the tools that will be needed for the Strategic



## BEHAVIORAL HEALTH AND RECOVERY SERVICES

### Behavioral Health Board Meeting

301 E. 13<sup>th</sup> Street

Merced, CA 95341

April 2, 2019

Planning meeting are: 1. Copy of last year's Strategic Plan; 2. Copy of current County application for new applicants; 3. Copy of current Behavioral Health Board application; 4. Copy of By-Laws; and 5. Bring Board binders.

**Recommendation/Action:** M/S/C (Metcalf / Ellis) to hold the Strategic Planning meeting at the next regularly scheduled Board meeting – May 7, 2019 from 3:00-6:00pm.

### Crisis Stabilization Unit Update

**Discussion/Conclusion:** Lanetta Smyth, Division Director for the Community Access to Recovery Services (CARS) Division, was present. The Crisis Stabilization Unit (CSU) is part of this Division. They have hired a new Program Manager, Rachelle Garcia, and she is stationed at the CSU. They just had a site certification. The State came and checked out the facility – they passed with flying colors. They also did a site certification for the Crisis Outpatient Services (Mobile Triage and Mobile Crisis Response Team). Both of those teams dispatch out of the CSU also. Mobile Triage responds mostly to the hospital and Mobile Crisis responds to law enforcement. They passed both certifications. They have been working on enhancing services and doing training with the staff. They are developing a training schedule. They have done customer service trainings for all staff at BHRS. They are looking at enhancing trainings with Dual Diagnosis trainings, trainings on Advanced Directives, Access logs services, and telephone services. They are also restructuring the schedule as they add staff. Within the next few months the CSU will be moving into the old Wellness Center once the remodeling of the building is complete. They will be going from four beds to eight beds. There will also be a Children's CSU that will be contracted out and this will be in the old CSU area. They are looking at collaborations with outside agencies - working with law enforcement a little more closely. They are enhancing services – referring them to the Crisis Residential Unit (CRU) since it opened. They are also working more closely with the Substance Use Disorder (SUD) services to refer people to inpatient programs and also to the Innovative Strategist Network (ISN) program. The Crisis Team has hired a Mental Health Worker who has been able to do case management and linkage with people as they are leaving Triage or the CSU to make sure they are actually getting into services.

-Lanetta was asked to describe what takes place when someone walks through the doors of the CSU. Lanetta replied that on staff they have a nurse and a clinician. They will do a quick overview of what they are presenting and what they need. They do a nursing assessment to check and make sure there is not a medical emergency; then there is a psycho-social assessment (like a crisis assessment / a mental health assessment). The clinician comes in and does a diagnostic assessment. Someone can also ask to stay voluntarily. They cannot keep people who are medically compromised, intoxicated, or minors; there are times they have to send people to the emergency room (ER) first. If there is a question about whether something might be due to a medical issue, they are sent to the ER to be medically cleared. Some things may look like a mental health issue and it could be medical. If someone is admitted, there are four beds and they are assessed regularly. They don't like to release people until they have some collateral information to make sure there is safety for others that are involved. If there are drug and alcohol issues, they have an assessment tool and determine what referrals and linkages can be done. Lanetta was asked if they leave with an appointment and she responded that often times they are. If they are not already linked to services, they would give them a first-time-appointment. If they are already linked to services and have someone they are already seeing, staff will contact that person and check to see if they already have an upcoming appointment. If they don't, they would try to get them an appointment scheduled.

-A Board member questioned a public comment made at the March 2019 meeting regarding the services received at the CSU. The Director, Yvonnia Brown, responded that those comments/concerns were looked into and been addressed. She cannot share the outcome of those particulars to this Board because of confidentiality.

-A Board member asked what the issue is when there are illegal drugs in someone's system and yet they voluntarily go into the CSU because they are feeling suicidal or feeling like they will hurt themselves or others. Lanetta responded that this is looked at case-by-case and she cannot respond to this particular case. In general, if someone comes in intoxicated to the point they are impaired, it is difficult to tell if it is substance or mental health issues. Those people are not turned away to the street; they are often sent to the hospital because they have to be medically cleared for substances. They also cannot keep people safe that are grossly intoxicated in the CSU. Also, they don't have the medical ability to handle this. An intoxicated person could go through withdrawals, they could become sick, they can OD (overdose).



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Recommendation/Action: Information only

### Substance Use Disorder Report

- a. Organized Delivery System (ODS) Waiver Update – Impact to Service Delivery System
- b. Services / Programs

**Discussion/Conclusion:** Tabatha Haywood, SUD Division Director, was present today to discuss Substance Use Disorder (SUD) services. Tabatha went through her PowerPoint presentation. On January 1, 2019 Merced County went live with the new Drug Medi-Cal Organized Delivery System (ODS). Merced County is one of many counties in California that opted to go live. ODS was developed to have parity with mental health services. It is also a pilot program in California to see if better substance use disorder care can be provided with better outcomes. It is consumer focused, evidence based. They want a standardized process no matter which county you are in. Every county that provides substance use disorder services has to use the American Society Addiction of Medicine (ASAM) level of care. They are looking at a standardized system of assessment and level of care within the quality of services provided making sure they have evidenced-based practices and everyone is on the same page. Tabatha discussed what the old services provided then continued with what the new services will provide. Merced County was just recently certified for Withdrawal Management in this facility. Individuals that need a low-level of detox, will be able to go through Withdrawal Management services. It used to be that the only people who could benefit from Medi-Cal paying for treatment was pregnant/postpartum women. Now all men and all women, regardless of whether they are pregnant or not, get the residential benefit, if that level of care is needed based on the ASAM assessment. This opens a huge array of services for individuals that would not otherwise be able to have that benefit. Using the Substance Abuse Prevention and Treatment (SAPT) Block Grant dollars, they have always provided residential treatment. But there was only so much they could do; they did it in 30-day or 60-day stints based upon the need. This now allows an individual to have a maximum of two 90-day stays within a year period. They have worked with the residential providers to make sure the treatment authorization process is streamlined; they have a 24-hour turnaround that they have to mandate by the State. Another big change is they can now go to the schools, meet in the homes, or meet at the park, etc. They are not tied to the clinic anymore. This will be very helpful for the youth and connecting easier with them. From January 1, 2018 to March 22, 2018 they opened a total of 118 new consumers into the system (pre DMC-ODS). For that same period in 2019 they opened a total of 221 new consumers to the outpatient system (post DMC-ODS); this is a 53% increase.

-A Board member asked what happens when an individual has both mental health and substance abuse issues. Tabatha stated that when someone has substance abuse (primary) and mental health (secondary), they have a clinician who is co-located with them two days a week, who will also see them there. If they need medications, they are linked with the Mental Health doctor system.

-A Board member asked if they work with RAFT (Recovery Assistance for Teens). Tabatha stated that everything that is provided for adults is also provided for youth – there has to be parity.

Recommendation/Action: Information only

### Chair's Report

**Discussion/Conclusion:** Micki had nothing new to report. She stated that she would like to be Chair for another year.

Recommendation/Action: None

### Supervisor's Report

**Discussion/Conclusion:** Supervisor Lor was not present.

Recommendation/Action: None



**BEHAVIORAL HEALTH AND RECOVERY SERVICES**

**Behavioral Health Board Meeting**

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**Director's Report**

- a. Update on Housing and Homeless Initiatives (B Street Housing Project)

**Discussion/Conclusion:** a. Yvonna did not have an update on housing and homelessness. Everything is status quo.

**Recommendation/Action:** Information only

**Announcements**

**Discussion/Conclusion:** Sally spoke with Vince Ramos today. He is still not feeling well. Sally also commented that the new By-Laws do not have an adopted date. Yvonna will make sure that a copy with the finalized date is ready for the Strategic Planning meeting.

Mary Ellis questioned the procedure for the new officers. Yvonna stated this will be discussed at the Strategic Planning meeting. Iris commented that new officers have to be voted on every year.

Norma Cardona announced that she will be dropping off this Board due to other commitments. This will be her last meeting.

**Recommendation/Action:** This will be added to the May agenda.

**Adjournment:** The meeting ended at 4:14 pm.

Submitted by:           Signed          

Carol Hulsizer  
Recording Secretary

Approved by:           Signed          

Mary Ellis, Secretary  
Merced County Behavioral Health Board

Date:   5/8/19  

Date:   5/7/19