

County of El Dorado

See meeting locations
listed below

Minutes

Behavioral Health Commission

Jim Abram, Chair, West Slope Council / Countywide
Denise Burke, Chair, Tahoe Council
John Hidahl, Board of Supervisors Representative
Dr. Richard Lynn, Vice-Chair, Tahoe Council
Dr. Stephen Clavere, Vice-Chair, West Slope Council
Brookes A. Heil-Blackburn, Commissioner, West Slope Council
Jan Melnicoe, Commissioner, West Slope Council
Norman Nester, Commissioner, West Slope Council
Craig Therikildsen, Commissioner, West Slope Council
Shawn Allan, Commissioner, West Slope Council
Arturo Salazar, Commissioner, West Slope Council
Vacant (3), Commissioner, Tahoe Council
Vacant (3), Commissioner, West Slope Council

Wednesday, January 10, 2018

5:00 PM

Meeting Locations (in person and connected via
tele/video-conferencing):

- Health and Human Service Agency, 3057 Briw Road, Sierra Room, Placerville, CA
 - Mental Health Office, 1900 Lake Tahoe Blvd., Suite 103, South Lake Tahoe, CA
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5:00 PM CALLED TO ORDER AND ROLL CALL; INTRODUCTIONS

Guests: Marsha Ticas, Michael Tino, Val Akana, Jeanne Nelson

HHSA Staff: Katy Eckert, Ren Scammon, Jamie Samboceti, Heather Longo, Tami Smith, Sabrina Owen

Associate Members: Norma Santiago, Henry Sandigo

Present: 7 - Richard Lynn, Denise Burke, Jan Melnicoe, Craig Therikildsen, Jim Abram, Norman Nester and Arturo Salazar

Absent: 2 - Stephen Clavere and Brookes Heil-Blackburn

ADOPTION OF THE AGENDA

A motion was made by Commissioner Lynn, seconded by Commissioner Melnicoe to adopt the agenda as written.

Yes: 8 - Richard Lynn, Denise Burke, Jan Melnicoe, Craig Therikildsen, Jim Abram, Norman Nester, Arturo Salazar and John Hidahl

Absent: 2 - Stephen Clavere and Brookes Heil-Blackburn

PUBLIC COMMENT

None.

DISCUSSION ITEMS

1. [18-0030](#) Approval of the November 29, 2017 Meeting Minutes

A motion was made by Commissioner Nester, seconded by Commissioner Burke, to adopt the minutes as written, with the correction to the spelling of Commissioner Allan's name.

Yes: 8 - Richard Lynn, Denise Burke, Jan Melnicoe, Craig Therkildsen, Jim Abram, Norman Nester, Arturo Salazar and John Hidahl

Absent: 2 - Stephen Clavere and Brookes Heil-Blackburn

2. [17-1168](#) Election of 2018 Mental Health Commission Officers

A motion was made by Commissioner Melnicoe, seconded by Commissioner Salazar, to elect the 2018 Mental Health Commission Slate of Officers as proposed at the November 29, 2017 Mental Health Commission meeting.

Yes: 8 - Richard Lynn, Denise Burke, Jan Melnicoe, Craig Therkildsen, Jim Abram, Norman Nester, Arturo Salazar and John Hidahl

Absent: 2 - Stephen Clavere and Brookes Heil-Blackburn

3. [17-1303](#)**New Mental Health Service Act Innovations Program Update/Discussion**

Heather Longo, MHSA Coordinator, presented the Innovation ideas submitted to MHSA to date.

Commissioner Melnicoe stated it would be helpful to know the question that the Innovation idea answers. Heather Longo stated that all proposals included that information.

Ren Scammon, Program Manager, explained the State process for approving the Innovation Plan, from submission of the idea through implementation of the idea. Innovation funds subject to AB 114 must be spent by 2020.

MHSA staff will update the Commission on the narrowed list, and will include what question the Innovative idea proposed to answer, to the extent possible, and what issue the Innovation idea targets.

Commissioner Abram reminded everyone that we need to consider the impact of sustaining the program or elimination of the program after Innovation funding is no longer available.

Commissioner Lynn shared that whatever the program, if the client has increased comfort and feels better about themselves, it is a success.

Supervisor Hidahl requested an update on the State's response.

Submitted Innovation ideas include:

A) Shower/laundry trailer that goes to warming/cooling centers; coordinated efforts with community partners to focus on topics like life, self-sufficiency, art, animals, etc.

B) Mental Health urgent care clinic like the Sac County Mental Health Urgent Care Clinic.

C) "Tracts" in high school to get high school and college credit for taking social work type classes – integrated with healthcare services.

D) Permanent supportive housing with peers as a manager.

E) Community paramedicine to provide mental health services on ambulances or responding concurrently.

F) Tie in Innovation to the Community Peer Wellness Center.

G) Use Innovation to implement MHSOAC report on justice.

H) Equine therapy to heal trauma through relationship and connection with horses.

I) Equine therapy to build resiliency through regulation and connection through the horse to heal PTSD, then add rhythmic riding to assist clients in forming cross brain connections at a deeper level to heal trauma.

J) Mind, Body Health Class for Everyone: Kaiser has a "Mind, Body Health" class that can be expanded upon and modified to tailor it for different groups (e.g., students, parents, grandparents, vets, minorities, seniors, etc.).

K) ACES: Expand the ACES training to all parents of school age children.

L) Form alliance consisting of 2 elected representatives (opinion leaders) from all sectors of county services and various communities ("bottom & top") to engage in 3 part process to first build understanding, shape choices, and finally consent to county-wide trauma informed practices.

M) Build Resiliency: Two ideas for building resilience – 1) Host an experiential resilience-building fair open to everyone. 2) Create a mobile exhibit that can be used to let people experience ways to build their resilience. It would have interactive, experiential components.

N) Outdoor Therapeutic Experiences for At Risk Youth: hiking, kayaking, river rafting, rope challenge courses to create a series of activities where youth and a clinical therapist/MFT as well as a trained guide, experience building trust and taking risks, addressing anxiety, etc. to improve wellness/mental health, while undertaking outdoor activities.

O) Middle School Support Groups: Ongoing support groups at middle schools to help kids deal with bullying and learn how to be supportive of their peers experiencing bullying. It could eventually turn into a peer led program and possibly a leadership program students could also get academic credits for.

P) Build Provider Awareness of Needs of LGBTQ Clients: A pilot project would be to put together a short training and tip sheet that could be delivered to the providers in the County who serve the LGBTQ community i.e., CPS, Probation, Community Health Centers, Public Health nurses, etc.

Q) Early Intervention – Neuro Reorganization: Pilot program targeting children ages 2-8, educating parents/caregivers in tandem about neuro re-organization (program includes initial screening and assessment to evaluate where skills are at 7 levels of brain development, then develop a program to help the child go through the normal developmental sequence of reflex-sensory-movement activities.)

R) Mobile Health: Buy and outfit a van or motor home that can serve our rural and underserved populations by traveling to them and offering: Telemedicine, checking vitals, administer medications, sign people up remotely for Medi-Cal, CHIP, or Covered California, bring food and clothing from the Food Bank/Clothes Closet, provide showers.

S) Monitoring Bracelets: Work with Google, Apple, Fitbit, etc. to experiment with tech "bracelets" that allow clients and their doctors to monitor their medication levels and vital signs.

T) Expand the pool of providers through telemedicine, tapping in to providers in other locations, especially crucial to find providers who accept Medi-Cal.

U) Enhance Law Enforcement's CIT Training: Expand upon the basic CIT training by piloting a program on both slopes to have a mental health provider ride along with every officer on mental health related calls to help coach and train officers in best practices.

V) Grief Processing: Partner with local artists and students of art therapy programs to create an art program that would be targeted to those who are experiencing grief due to loss of an adopted or foster child.

W) Alternative/Complimentary Therapies/Approaches: Some of these ideas can also serve our goal of creating understanding, awareness and acceptance of people with mental illnesses.

Partner with Master Gardeners to teach clients how to grow food and care for plants in the Demonstration Garden behind Folsom Lake College-El Dorado Center. Create a restaurant that enables clients to use the food they grow to make meals for sale to the public.

Partner with the Senior Center Meal Program to learn how to cook and perform food service duties at the Senior Centers.

Find commercial building owners willing to let clients design and paint murals on their buildings.

Allow clients paired with students and artists to create artistic panels (e.g., painted murals) that would then be mounted onto the fence on the overpass over Hwy 50 overpass emanating from Placerville City Hall.

Let clients organize and staff fundraisers to help raise funds for community projects they want to do, like mural painting, or planting pop up gardens around town.

Explore the possibility of leveraging one or more of the Apple Barns where clients can volunteer, or staff their own crafter tent and sell items they make.

Start a weekly class around using laughter as medicine.

Leverage all forms of movement as therapy. Consider partnering with the Senior Center to offer mixed-client activities (i.e., seniors and mental health clients). Dance – e.g., line dancing (no partner required); Sports/athletics – basketball, pickle ball, swimming, use of fitness centers; Outdoor activities such as birding, kayaking, hiking, biking; Boot camps – rigorous, immersion in physical activity like in the Army; Meditative and physical activities such as yoga, tai chi, etc.; Animal therapy – e.g., horseback riding

X) Treat the whole person first; housing first ideas:

Take existing buildings and set them up as temporary housing until more permanent housing can be found or built. Examples: basement of County Building C at Fairlane has showers, set up cots and tents; churches, existing motels.

Re-purpose an existing property and/or use the County's 'hardship mobile home' ordinance to add to the housing stock quickly. County's hardship mobile home ordinance could be used to allow "tiny houses on wheels" to house clients, even if they are not immediate family members. Or, take the Habitat for Humanity model and apply it to building tiny houses for clients to live in. Clients and volunteers build their tiny houses under supervision from Habitat for Humanity.

Work with multiple partners to acquire, fund and build a new mixed use property that includes permanent supportive housing, as well as all the services residents require so that they don't have to drive and so that they can benefit from being connected to others in a self-sustaining community.

PUBLIC COMMENT:

Jeanne Nelson stated it is important to have measurable outcomes and suggests that the County include a neuroscience tip sheet to accompany each program and contracted service.

5:35 PM ROLL CALL

Present: 8 - Richard Lynn, Denise Burke, Jan Melnicoe, Craig Therkildsen, Jim Abram, Stephen Clavere, Norman Nester and Arturo Salazar

Absent: 1 - Brookes Heil-Blackburn

4. [17-1304](#)

Stepping Up Initiative Update/Discussion

Chair Abram reported that Chief Probation Officer (CPO) Brian Richart, was not prepared to present on the "Stepping Up Initiative" tonight, but will do a presentation in the next couple of months. Chair Abram stated that CPO Richart said the first thing they will focus on is the intake process at the Jail. They have developed a mission and vision statement.

Supervisor Hidahl will follow up with CPO Richart to determine whether CPO Richart has the time to commit to this project.

Sabrina Owen, Program Manager, shared that MIOCR is part of the Stepping Up Initiative and they have had the transitional house in South Lake Tahoe for about two years.

Supervisor Hidahl stated that the key factors of this program is to have good interaction with the Sheriff's Dept. and Probation.

Chair Abram stated that CFMG should be part of the goal in the Stepping Up Initiative.

Commissioner Clavere suggested a timeline be established to meet with CPO Richart.

Associate Member Santiago asked what the linkage is between the mission/vision and the CFMG contract. Chair Abram stated more intervention is needed prior to inmates release from jail and Commissioner Clavere reminded everyone that Captain Jackie Noren will forward written recommendations for the CFMG contract renewal. Assistant Director Katy Eckart stated that she believes it is beneficial to try to work collaboratively with CFMG as there are not many jail providers.

Deputy Director Jamie Samboceti explained that the Jail on the West Slope is expanding and it will include a re-entry program, not a Behavioral Health program.

Sabrina Owen, Program Manager discussed criminogenics and how it relates to offenders and mental illness. She reported that Probation Officers are receiving training on this.

5. [18-0010](#) Community Wellness Center Update/Discussion

Chair Abram shared that on 12/5/17, the Board of Supervisors approved moving forward to explore the possibility a Community-Based Wellness Center on Andler Road in Placerville. On 12/14/17, the Community Wellness Center Ad Hoc Committee, comprised of Commissioners Abram and Melnicoe, met with Assistant Director Katy Eckert, Deputy Director Jamie Samboceti, Program Manager Ren Scammon and MHSA Coordinator Heather Longo, to discuss potential programming for the facility. The Ad Hoc Committee explored programs/topics/rules that should be considered necessary to the programming, versus items that could be considered "nice" to include.

Assistant Director Eckert reported there has been no update from Facilities to date.

6. [18-0011](#) Health and Human Services Agency Service Integration Update/Discussion

Assistant Director Eckert reported that staff is still discussing the next steps and timeline for HHSA Service Integration.

7. [18-0012](#) Discussion / Selection of Mental Health Commission 2018 Goals and Priorities

An Ad Hoc Committee consisting of Commissioners Melnicoe, Clavere, Abram, and Salazar, and Associate Member Santiago will meet to discuss the Mental Health Commission 2018 Goals and Priorities. Associate Member Santiago recommended revisiting the Commission's 2017 goals and outcomes. The Ad Hoc committee will present their ideas at the February Mental Health Commission meeting.

PUBLIC COMMENT:

Jeanne Nelson offered to send Chair Abram the South Lake Tahoe Community Mental and Behavioral Health Cooperative goals for 2018-2019.

8. [18-0013](#) Questions / Comments on the Behavioral Health Division Monthly Report

There was discussion, comments, questions and clarification regarding the BHD November Update.

Chair Abram noted that the caseloads and demands for services on both slopes, as noted on page 4 of the BHD Report, seem to be equal to the proportion of the population on each slope.

Chair Abram would like to know if there is a way to list repeat visits to the Psychiatric Health Facility (PHF). The BHD will see if repeat visits to the PHF can be captured. Commissioner Salazar also wanted to know how to determine if admissions to the PHF are out-of-county residents. Assistant Director Eckert said that out-of-county residents are identified by their Medi-Cal. Out-of-county placements are identified on the reports.

Commissioner Clavere also requested that a section be added to the BHD Update that addresses the Alcohol and Drug Program.

Assistant Director Eckert stated that the County's Drug Medi-Cal Organized Delivery System Plan has been approved by the State. HHSA will develop a Request for Quotes from prospective Drug Medi-Cal contractors.

There also was discussion regarding the "Psychiatric Emergency Response Team" (PERT). Deputy Director Samboceti stated the MOU between the Sheriff's Office and HHSA has been signed and will be operational on January 20, 2018. A Deputy and Clinician have been selected and the team will work Tuesday through Friday, 11AM to 9PM, which is the prominent time of need based on data collected. A meeting is scheduled for next week to discuss outcomes of this program. This is a pilot program. Deputy Director Samboceti clarified that this team will not be first responders. They will be called by the Sheriff, if appropriate. The Deputies have been given smartphones on both slopes and the BHD has also ordered smartphones for each slope so they can Skype with the Crisis Worker, if needed.

Deputy Director Samboceti said the BHD is currently structuring the new "Brief Model of Care" program. It will be an academy of learning with different tracts. There will be clear goals, based on client needs and goals. Groups will be added as needed.

COMMISSIONER'S COMMENTS

The Ad Hoc Bylaws Committee, comprised of Commissioners Abram, Clavere and Lynn have been working on the Bylaws and have completed a rough draft. They hope to finalize and bring to the Mental Health Commission meeting in February.

DETERMINE NEXT MENTAL HEALTH COMMISSION MEETING DATE

The next regular meeting of the Mental Health Commission is scheduled for February 28 at 5:00 PM.

ADJOURNMENT 6:50 PM