

**Sacramento County  
Department of Health Services  
Division of Behavioral Health Services  
Mental Health Services Act (MHSA) Steering Committee**

**Meeting Minutes**

July 16, 2020, 6:00 PM – 8:00 PM

**Meeting Location**

Webinar and phone conference

**Meeting Attendees:**

- MHSA Steering Committee members: Ann Arneill, Emily Bender, Michelle Callejas, Karen Cameron, Genelle Cazares, Ebony Chambers, Shaunda Cruz, Daniela Guarnizo, Hafsa Hamdani, Erin Johansen, Lynne Keune, Ellen King, Karly Mathews, Ryan McClinton, Ruth McKenzie, Lori Miller, JP Price, Ryan Quist, Christopher Williams
- General Public

<b>Agenda Item</b>	<b>Discussion</b>
<b>I. Welcome and Member Introductions</b>	The meeting was called to order at 6:03 p.m. MHSA Steering Committee members introduced themselves.
<b>II. Agenda Review</b>	The agenda was reviewed; no changes were requested.
<b>III. Approval of Prior Meeting Minutes</b>	The May 2020 draft meeting minutes were reviewed; no changes were requested.
<b>IV. Announcements</b>	<p><b>Christopher Williams</b>, Sacramento County Office of Education (SCOE) is launching a school-based mental health partnership. The vision is to put a licensed mental health clinician into or proximate to every school across Sacramento County over the next several years. This is a scale-up model. Sacramento County has roughly 350 schools in total across 13 school districts. We are starting with 11 schools this fall across seven of the 13 districts and plan to scale up to 30 next year.</p> <p><b>Daniela Guarnizo</b>: There is an upcoming series of three free Zoom workshops hosted by Family Hui: <a href="#">Creating a Beloved Community: Parenting, Race, and Advocacy</a>. I hope to see you all there.</p> <p><b>Katherine Ferry</b>: Cal Voices held its 24<sup>th</sup> Annual Peer Empowerment Conference on Zoom on June 19, 2020. The keynote address by Lishia Rahman can be viewed online at <a href="https://youtu.be/RXkTLr048U">https://youtu.be/RXkTLr048U</a></p>
<b>V. Executive Committee / MHSA Updates</b>	<p><b>Executive Committee Update</b></p> <p>SC Co-Chair Emily Bender announced this would be her last meeting serving as Co-Chair and that it had been a wonderful two years. She announced Ebony Chambers has been elected as the new Co-Chair coming in behind her.</p>

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	<p>The SC thanked Emily for her leadership and commitment as Co-Chair and congratulated Ebony and welcomed her as the new Co-Chair.</p> <p><b>MHSA Update</b></p> <p>Dr. Quist provided the following updates.</p> <p><u>African American Trauma Informed Wellness Program</u>            Behavioral Health Services (BHS) is awaiting contract authority from the Board of Supervisors to move forward with this program.</p> <p><u>Youth Drop-In Center</u>            BHS was awarded an opportunity to create a youth drop-in center in Sacramento County and is building an application to enable forward motion on that.</p> <p><u>Innovation (INN) Project 5: Forensic Behavioral Health Program</u>            The INN Project 5 Plan was approved by the Mental Health Services Oversight and Accountability Commission (MHSOAC) on June 25, 2020. BHS will next submit a Board Letter and begin developing the competitive bid process. This project will be called Forensic Behavioral Health Program and will focus on supporting consumers involved with the criminal justice system.</p> <p><u>BHS Budget Update</u>            Dr. Quist shared statewide information regarding the impacts of COVID-19 on behavioral health revenues. The three primary sources of behavioral health funding are 1991 realignment, 2011 realignment, and MHSA, all of which are tied to economic indicators.</p> <p>1991 and 2011 realignment are tied to sales tax revenue and vehicle license fees. MHSA funding is tied to state income tax, specifically the tax on income in excess of \$1 million per year. As a result of everything going on with COVID and the economic downturn, a 13% decrease is projected in funding over the next few years. That is a total decrease of \$15.7 million for Sacramento County BHS. We had a drop in revenue from Fiscal Year (FY) 2018-19 to FY 2019-20 due to economic challenges and a change in the rules for tax deferrals. This fiscal year (FY 2020-21) there was a slight increase, which did not make up for last year's loss. After this fiscal year, we will see a larger drop in behavioral health revenues.</p> <p>We are working hard with downtown to figure out what our plan will be to cope with this. Sacramento County was allocated \$181 million from the federal Coronavirus Aid, Relief, and Economic Security (CARES) Act for responses to the COVID emergency. As a part of the COVID response, the county took on a lot of</p>

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	<p>expenses and it is my understanding and hope that the county may make our budget whole using a part of that money.</p> <p>As a part of the California Behavioral Health Directors Association, we partnered with the California State Association of Counties (CSAC) and other organizations to put forward a proposal to the state that would ask for \$3.3 billion to backfill all the lost realignment revenue counties are experiencing. State legislators were sympathetic; they did not fund the entire requested \$3.3 billion, but with the governor's approval did backfill \$1 billion statewide with realignment. This is only a third of what we needed, but at least we got something.</p> <p>In addition, there is a cost report process by which the state settles with counties years after we close the books on a fiscal year to ensure we are paid the correct amounts. Sacramento County is due some money from the state as a result. I am optimistic we might be able to be made whole this coming year, although we will need to think about how we will deal with budget shortfalls in future years.</p> <p>Jane Ann Zakhary, Division Manager, presented the following updates.</p> <p><u>Assembly Bill 81 (AB 81)</u>        AB 81 was a trailer bill passed at the end of June. Guidance from the state Department of Health Care Services was just issued to counties on the interpretation of that bill. AB81 creates some flexibilities in MHSA during the COVID crisis. It touches on four key areas: 1) the Annual Update and/or Three Year Plan process, 2) accessing the county Prudent Reserve in light of the declines in revenue, 3) how the Community Services and Supports (CSS) component is directed toward full service partnerships and the other categories of programming within CSS, and 4) placing an extension on MHSA funds subject to reversion. We are awaiting additional guidance from state Department of Health Care Services and will bring this back for more conversation at upcoming meetings.</p> <p><u>No Place Like Home award</u>        We also wanted to share the great news that we received a formal award for No Place Like Home in Round 2. This was for Mutual Housing on the Boulevard, which still has to undergo construction, but will be a large apartment complex on Stockton Blvd that will include 50 dedicated units for No Place Like Home MHSA-eligible clients. It will be at least two years, perhaps three, before this construction is complete and these apartments are leased out, but this is a future commitment to provide housing units for individuals and families who are homeless or at risk for</p>

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	homelessness and also living with serious mental illness. It is very exciting to make more headway in that area.
<p><b>VI. Executive Committee Nomination for Consumer/Family Member Seat</b></p> <p>Members/Alternates will vote via online survey. Results will be announced at next meeting.</p>	<p>Julie Leung, Acting MHSA Program Manager, provided context on this item. See <a href="#">Attachment B - Executive Committee Vacant Member Seat Nominations</a>.</p> <p>Emily Bender was acknowledged for all of her work and commitment to the Steering Committee. Ebony Chambers was welcomed as the new Co-Chair.</p> <p>We are embarking on this Executive Committee member nomination process as current Executive Committee member Karen Cameron is unavailable to continue to serve. Karen was acknowledged for her valuable input at Executive Committee and appreciated for continuing to serve on the Steering Committee.</p> <p>MHSA SC members were asked to put forth nominations to fill this Executive Committee position, with emphasis on consumer and family members. All SC members and alternates will have the opportunity to vote on nominations via an online survey. Members and alternates can submit additional nominations via email before the vote.</p> <p><u>Nominations:</u> Hafsa Hamdani Ryan McClinton JP Price</p> <p>Vote results will be shared at the next MHSA SC meeting.</p>
<p><b>VII. MHSA Prevention and Early Intervention Program Presentation – Homeless Teens and Transition Age Youth Respite Program</b></p>	<p>Maryam Nateghi, BHS Mental Health Program Coordinator, and Robynne Rose-Haymer, Executive Director at Wind Youth Services, presented on the Homeless Teen and Transition Age Youth (TAY) Program. See <a href="#">Attachment C – Homeless Teen and TAY Respite Program presentation</a>.</p> <p><b>Member Questions and Discussion</b></p> <p>When you referred to “unique” youth served in your presentation, what does that mean? <i>That is the way we characterize unduplicated youth who are not counted more than once.</i></p> <p>How many shelter beds does Wind Youth Services have? <i>Wind has three different shelters with a combined total of 34 beds. The shelter for adolescents, designed for runaway and homeless youth ages 12 to 18 has six beds. The emergency 30-day shelter has 20 beds and the TAY shelter has eight beds.</i></p> <p>Are you seeking donations of goods or volunteers?</p>

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	<p><i>Always. We love volunteers and donations. Anyone seeking more information may contact me at <a href="mailto:Robynne@windyouth.org">Robynne@windyouth.org</a>.</i></p> <p><i>How long is the intake process for a youth unaffiliated with Wind? Intake is a delicate balance and depends on the immediate services a youth needs. Our primary goal is that youth get supportive and safety net services immediately, so our initial intake is very quick, about five to ten minutes. If youths are seeking shelter or respite services, there is a lengthier in-depth intake after that involving many more questions and assessments. For instance, If they are interested in a longer term housing program, we have to check eligibility and ensure we have a good match in terms of the length of the program they are looking for.</i></p> <p><i>What is the occupancy rate in the 20-bed emergency shelter? Right now, this is the first time in about seven months we are not 100% full with a waiting list. We just opened the emergency bridge housing program and were able to refer in several youths quickly within the last week or so. Currently we have one open shelter bed. However, that is very unusual.</i></p> <p><i>What is the age range at the transition age youth shelter? 18 to 24.</i></p> <p><i>What are your relationships with foster homes? Are youth with difficult living situations placed into foster care? We are connected with Sacramento County's social services programs, including foster care agencies. We do not do any placements. Our adolescent shelter is a 21-day runaway and homeless facility. If a youth is experiencing difficulties in a foster placement, they can come and stay at the shelter. We immediately contact the social worker so they can start making other arrangements because the emergency shelter is only licensed for youth staying up to 21 days.</i></p> <p><i>What housing programs do the clients exit to? Any place there is a spot. We are constantly seeking housing options for people to go. As part of the Coordinated Entry System, I am very proud that the youth programs really started the first case conferencing situation. We have been efficient as a community and subpopulation in placing youth into available housing quickly for coordinated entry. That group meets every other week. We have our five housing programs, Adolfo has a Transitional Housing Program for Former Foster Youth, and all the other housing programs available in the community. We work hard to ensure that if there is an opening, youth are able to transition into that program quickly.</i></p>



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	<p>Wind has been a great resource for child welfare system-involved youth and responsive to individual needs and situations.</p> <p>I want to commend Wind for its comprehensive services that are not fragmented. Are you familiar with Patrick McGorry, Founding Director of Australia’s National Youth Mental Health Foundation called <a href="#">headspace</a>. I heard him speak about a year ago at UC Davis.</p> <p><i>I am not familiar with headspace, but will look it up. Thank you for the referral.</i></p> <p>Has your bed capacity been reduced due to COVID? <i>No.</i></p> <p>Is there any conflict with foster care youth who receive AB12 support using WIND services? <i>Absolutely not.</i></p> <p>Have the needs of the youth changed since COVID? <i>Youth needs have deepened, expanded, widened, enlarged during the pandemic. Wind changed our service model in response, so at the drop-in center we are only seeing homeless youth. This is different than the robust numbers we discussed we had in 2019. We were seeing more than 50 youth per day then. Right now we are seeing far fewer, but with intensive needs because they are not housed in shelter in place. We are helping them and working hard to educate them on what shelter in place means. This is difficult for a group of young people who are unaccustomed to having agency. We are trying to provide support and agency, while also trying to keep these homeless youth and our own staff safe. The needs have changed inasmuch as we are working daily with youth who do not have a home to return to every night and helping them remedy that situation through shelter services or an available housing program for which they are eligible.</i></p> <p>The SC thanked Wind Youth Services for the presentation.</p>
<p><b>VIII. General Steering Committee Comment</b> (Up to 3 minutes per speaker, related to MHSA)</p>	<p><b>Karen Cameron:</b> That was a great presentation to see what is being done for homeless youth.</p> <p><b>JP Price:</b> As an older adult consumer, I encourage everybody during this pandemic to reach out to three people a day just to check in, especially those who are single or living alone or in unique situations. A phone call means a lot, especially to those in our age group.</p>
<p><b>IX. General Public Comment</b></p>	<p>None.</p>

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<b>X. Adjournment / Upcoming Meetings</b>	The meeting was adjourned at 7:32 p.m. Upcoming meetings will be held on <ul style="list-style-type: none"> <li>• August 20, 2020</li> <li>• September 17, 2020</li> </ul>

Interested members of the public are invited to attend MHSA Steering Committee meetings and a period is set aside for public comment at each meeting. If you wish to attend and need to arrange for an interpreter or a reasonable accommodation, please contact Anne-Marie Rucker one week prior to each meeting at (916) 875-3861 or [ruckera@saccounty.net](mailto:ruckera@saccounty.net).

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