

Sacramento County Public Health Advisory Board

Meeting Minutes

October 7, 2020, 12:00 PM - 1:30 PM

Meeting Location

Zoom Meeting (Open to the Public)

Moderator:

Dr. Farla Kaufman

Scribe:

Theresa Vinson

Board Attendees:

Sandy Damiano (ex-officio), Paula Green, Steve Heath, Olivia Kasirye (ex-officio) Farla Kaufman, Steven Orkand, Sonal Patel, Jeff Rabinovitz, Tina Slee, Phil Summers, Annie Tat, Jack Zwald

Guests:

Christina Bourne, Courtney Hanson, Niki Jones, Dr. Ryan Quist, Iliana Ramos, MK Ursulak, and 2 other unidentified guests.

Board Members Excused:

Jofil Borja, Barbara Law

Board Members Absent:

Jennifer Anderson, Emanuel Petrisor

Guest Speakers:

Ryan Quist, Ph.D. Behavioral Health Director
Department of Health Services, Behavioral Health Services

Meeting Opened:

12:03 PM

Welcome and Introductions:

Dr. Kaufman welcomed all Board members and guests. There were online introductions.

Review of Minutes: The September minutes were approved as written, with one abstention

Vacancies and Appointments: The resignation of Kathleen Wright has created one vacancy

Announcements: There will likely be 3 additional vacancies at the end of December. Board members were encouraged to spread the word to qualified candidates.

Division of Public Health Update

COVID-19 numbers continue to decline. According to the State Tier System, last week we met the criteria for being in the red tier, which is a less restrictive tier. The Health Officer Order was updated, and as a result some gyms and restaurants are able to operate indoors. We are still working on the 'Turn Sacramento Orange' by Halloween Campaign, which is kind of a play on the color scheme for the tier system. This week states added an additional layer called an Equity Metric we have to meet, and is an effort to ensure counties are looking at those zip codes and census codes in areas heavily impacted that tend to be areas with higher percentages of minorities and low income communities. Sacramento looks pretty good according to the data we have now. We also have to submit a plan as to how we are going to dedicate resources and we are waiting for the template. On an on-going basis, at each Board of Supervisors (BOS) meeting, Dr. Beilenson and Dr. Kasirye provide updates on how the 45M is being spent; MOUs and contracts have been signed.

Division of Primary Health and Correctional Health Update

Women, Infants & Children (WIC)

- For September Q & served 99.2% of caseload. Pre-COVID in February, 73.7%.
- WIC programs received a program flexibility waiver through February 2021. This means they can continue their phone appointments and only provide face to face appointments when needed.
- First Five released the RFP for grant funds. Funding is for 2021 – 2024 (3 year) and includes a reduction in funding as part of their fiscal strategy. WIC will be applying with CRP WIC.

Emergency Medical Services

- State is transitioning to a new State ordering system for PPE. This means staff will not need to man a PPE warehouse. Staff will input directly into the system and the supply will be sent by the state.
- Emergency Medical Advisory Group reconvened August and will be meeting every two months. They want to focus on increasing funding for EMS for program monitoring and quality improvement (data).

Adult Correctional Health

- COVID Data as of 09/30/20:
 - o Total number of COVID-19 tests: 4,410
 - o Total number of confirmed cases: 101
 - o Total number of COVID-19 positive currently in custody: Main Jail - 3 / RCCC – 0
 - o SSO Link: https://secure-web.cisco.com/1hEMhHUb5LBnXeuj-Jf_uhN1Gumfw7JHrSCieGE9bFaORS0cqCq8BGd0sZyxqtzYqec-bxia-AS6KBUnsSgpZvROLMioTP9g889FPA6V9u2mF9lwxRt0aArsHa8pHks-f8_pO7AJ_8PfdbSWoSw9BmwPTx1XBF2HQTnDvjV1bxAlV9nK41cjh68QpQUUp9hkMEAv9zS-pMQzB5zknsvn-uHRPzKJaQsDvh1nwzxBt5UZyhwZLSF_GEsVki7iaMgE5U_C5nX-Ph_LzSaEjmBqjumsOHDXfdCZlbgIDOdS3eM/https%3A%2F%2Fwww.sacsheriff.com%2FPages%2FOrganization%2FCorrections%2FCOVID19.aspx
- Influenza Clinics
 - o Influenza Clinics are planned at each jail for staff and inmates.
- Adopted Budget FY 2020/21
12 FTE Positions and a contract augmentation with UC Davis.
 - o 2 FTE Physicians – *midyear*
 - o 5 FTE Registered Nurses
 - o 1 FTE Dental Hygienist
 - o 1 FTE Pharmacist
 - o 1 FTE Pharmacy Technician

- o 1 FTE Administrative Services Officer 3 (E.H.R.)
- o 1 FTE Administrative Services Officer 2 (Contracts)
- o Enhanced Outpatient Mental Health Services for the Outpatient Psychiatric Pod. Includes mental health services, medication evaluation and monitoring, case management and discharge planning. Adds a new level of service.

PRESENTATION

Ryan Quist, Ph.D., Behavioral Health Services Director
Sacramento County Behavioral Health Services

COVID Update

Behavioral Health (BH) is responsible for Medi-Cal services for Mental Health and Substance Abuse Disorders services, Prevention and Early Intervention. The majority focus is on the seriously mentally ill population. The system is complex from prevention services to supporting community connections programs, which are organizations embedded in our diverse communities to get services to them (Asian, Slavic and Russian communities). There is respite care where people can drop in for support. Outpatient services range from low intensity (how intense and how frequent services are received) to high intensity (full service partnership programs). There are crisis services: urgent, crisis residential, crisis stabilization unit (at Mercy San Juan), acute care (in-patient), sub-acute care (step down from in-patient).

Substance Abuse disorder services: Last year we implemented drug Medi-Cal Organized Delivery System (ODS) - the State introduced and Sac County opted in – so we receive a broader array of services like case management, residential for full age range. Since that time we saw a 90% increase in people being serviced and we expect to continue to increase over subsequent years as we add providers. Before this getting into residential treatment would take up to three months, but we are now down to 7-10 days on average. Overall, BH over the last few years has become more recognized and acknowledged for having a nexus role in the community; Homeless, Criminal Justice (for community members involved in that system), Crisis Continuum (in-patient services). The Youth programs focus on school based services and strong relationships with Child Welfare and Probation.

COVID-19 has impacted BH services but we are essential so we continue to deliver services, and were quick to convert services to telephone and video services, though we do still provide in-person services (please refer to slides for details).

We worked closely with State to implement Medi-Cal flexibilities and apply for waivers with (CMS) in order to be reimbursed for some new formats being provided (telework). We worked on Personal Protective Equipment (PPE), hospitals received first priority, but working with Public Health (PH) we were able to make the case that BH is essential so we had to have access to PPE. There were some workforce challenges when the second spike of COVID-19 began in our county, some employee families were impacted and some were unable to report to work, some challenges still remain but recently PH has supported BH in providing testing for BH providers and the consumers they serve.

Currently, we are in the middle of more than one local crisis; COVID-19, school closures, wildfires, smoke in air, and shootings. There is a lot going on in our County as well as the economic crisis. BH funding is extremely tied to economic indicators. Some forms of BH revenue are 1991 realignment, 2011 realignment, both tied to sales tax and vehicle license fees. During these difficult economic times the Mental Health Services Act (MHSA) funding is impacted. At this time, we know there is increased demand for BH services due to stress and other these other factors, we expect more demand for the next five years and a decrease in resources. One other significant challenge is our Realignment and MHSA funds are used as the local match to be able draw down federal financial participation. So every time we cut a local funding source (Realignment or MHSA) for every 1M cut for lack of local funds, it results in cutting 2M in actual programs because we don't get that additional federal financial participation that matches local funds.

Part of recent budget discussions include the collaboration between BH and law enforcement, which is the Mobile Crisis Support Teams (MCST), which is our ride-along model where a clinician will ride-along with law enforcement to respond to BH related calls they receive. We had 6 teams last year and we increased it to budget for 11 teams. There has been some challenges with recruiting, and a recruitment flyer was provided to PHAB to share in the community. In addition, we have Community Support Teams wherein Sacramento Police Department send us referrals. We respond 24-48 hours, and go out, support people in the community, engage with them and link them to services. What we all can do. Stay connected: reach out to 3 people each day. Support each other. Get the word out that services are available.

Answers to questions for Dr. Quist (added by Dr. Kaufman)

- Sac County youth providers are working with schools and the goal is to provide one clinician in each school.
- In the County 90% of out-patient providers are contracted.
- Mobile outreach – regarding non-law enforcement outreach for mental health crisis. Community support teams do some of this. Mental Health has been asked by Board of Supervisor Kennedy to develop a 1.5 million pilot in collaboration with the Sheriff. Mobile crisis support team came through the Mental Health Services Act planning process.
- Peer-led services are present in Sacramento County. Mental Health First (non-law enforcement community responders) has received some funding from the County. The County will continue to leverage partnerships.
- In the jails, nurses do intake for all arrestees for any mental health issues, Persons with a mental health issue are seen by a licensed social worker or MSW. 24-hour consultation is available.
- Behavioral health programs for the criminal justice population work with collaborative courts to engage persons with services for early releases and subsequent support in the community. A new program in forensic behavioral health is focused on supporting this.

- There is a mental health urgent care clinic intended for people with Medi-Cal.
- Community engagement opportunities are through the Mental Health Board and the MHSA Steering Committee.
- Mental Health access line 1-916-875-1055 toll-free 1-888-881-4881 Urgent Care Clinic 2130 Stockton Blvd Building 300 1-916-520-2460.
- Services for the homeless includes the Guest House and wellness and recovery centers. Outreach to homeless is challenging under restrictions due to COVID-19.
- The County is working with Sacramento County Office of Education to distribute materials about mental health. They are trying to get the word out about mental health challenges and services available.
- Link to resources <https://dhs.saccounty.net/BHS/Pages/COVID-19-Resources.aspx>

Updates

@sacyouthinaction campaign is now funded and working on the social media campaign.

The forum via webinar with Dr. Beilenson had 130-150 separate connections and 50-60 questions. These forums will continue every 2 weeks on Thursday evening from 6-7 pm.

Public Comment

None.

Adjournment