

SACRAMENTO COUNTY ALCOHOL AND DRUG ADVISORY BOARD MEETING

Minutes for June 1, 2011

Members Present: Burke Adrian, Melinda Avey, Nikki Buckstead, Harry Carlson, Heike MacKenzie, Jessica Rodriguez, Yvonne Rodriguez, Anne-Marie Rucker, Paul Tanner, Steve Wirtz

Members Absent: Lt. Raymond Bechler, Judy Cooperrider, Madalyn Craviotto

Alcohol and Drug Services Staff: Maria Morfin, Marguerite Story-Baker, Walter Wyniarczuk

Guests: Tom Avey (Avey & Associates), Kris Clinton (DHHS), Alan Lange (CSPC), Dana Martinez (Bridges/STARS), Pamela Ng (DHHS), Joelle Orrock (SCOE-FNL), Staci Syass (DHHS), Barbara Thompson (NCADD), Deborah Vogel (Alpha Oaks/Cornerstone)

I. **Introductions:** The meeting was called to order at 5:40 PM by **Paul Tanner**. Introduction of Board members, ADS staff, and guests.

II. **Advisory Board Actions**

Moved, seconded and passed May minutes with corrections to: IV. Presentation – “Serna Village” was changed to “the Village”.

III. **Provider Presentations:** Dana (Bridges/STARS) handed out personal invitations to the upcoming July 26th Sacramento Juvenile Dependency Drug Court graduation and described the tremendous team efforts involved in each client success. Maria acknowledged Sharon DiPirro-Beard’s efforts to put together a Board of Supervisors letter of support. She introduced Barbara Thompson as NCADD’s new Executive Director, and Barbara provided a brief statement on her background. Maria attended the Friday Night Live Lip Sync event, reporting it was a lot of fun.

IV. **Advisory Board Announcements:** Paul announced the upcoming MADD Mi Casa event - Comedy Show Fundraiser at on June 3rd, 7:00 PM at the 24th Street Theater. Paul also mentioned the ongoing NIATx webinars. Steve mentioned a new Department of Justice report on the economic impact of drug use (see their website).

Board Action item: Moved, seconded and passed motion to approve the Executive Committee sending a letter to the Board of Supervisors on behalf of the Advisory Board recognizing the joint efforts of all of the participating agencies in the Proposition 36 Collaborative to keep the Prop. 36 program going through cooperation and creativity in times of limited funds.

V. **Presentation:** The Board had two presentations. First, Staci Syass (HIV/Communicable Disease Program Director for County DHHS) and Kris Clinton (AIDS Prevention Program manager) presented on the Alcohol and Drug HIV Testing Project. The project funded from HIV Set-Aside Funds provides HIV testing and counseling (taken over since the loss of the County’s CARAVAN unit). Stacy reported an overall 9.7% HIV rate among intravenous drug users, but indicated results of recent testing of ~ 750 county clients from July 1, 2010 through May 31st 2010 (handout provided) suggest overall HIV rates are down. This may be due in part to the ability of clients to purchase syringes in stores.

However, Hepatitis C (HCV) rates are still high (17.8% versus 22% last year). Two problems have surfaced: 1) there are no places to refer clients who are positive, as they can go only to the Primary Care Clinic or the Tribal Clinic. However the HIV/CD Program still provides prophylactic care and nutrition intervention; and 2) the County has run out of home access testing kits for HCV. This also means they cannot test on-site the population

sleeping in shelters. In response to a question about using HIV Set-Aside Funds for HCV testing, Staci anticipated that the federal syringe exchange program will have funding for testing as well.

Staci also discussed their education and outreach efforts through 14 County sites and 8 Harm Reduction Services sites with HIV testing two days a week using a Rapid Test that provides results in 20 minutes. Counseling is also provided for risk assessment and reduction efforts at two youth sites (ACAC at Juvenile Court and Wind Youth Center), but DHHS would like to expand to more youth sites. Some youth service providers have expressed interest in this and Marguerite suggested they present to the Youth Treatment Provider meeting.

Staci handed out a flyer on the upcoming STD/HIV training for AOD Providers to be held June 28th from 9:00 AM to 3:00 PM at the Sierra Health Foundation, 1321 Garden Hwy. The question of whether CEUs were available for the training was raised and several helpful suggestions were provided to help get CEUs for this and future HIV trainings for AOD providers (i.e., CAADAC, CAS, LCSW, and new LAADAC). For example, the new LAADAC certificate requires six hours of HIV training.

Maria mentioned the significant changes she has seen over the years in how HIV/AIDS is handled within the AOD field. In the past, HIV-positive clients were not allowed into treatment programs. There has also been a shift in the at-risk populations, with increased risks not only for people of color (especially African-Americans) but also older groups and heterosexuals.

The second presentation was made by Alan Lange from the Community Services Planning Council, who is under contract with the County to facilitate the ADS Strategic Planning process. Alan provided a brief overview of the process and of the Steering Committee made up of ADS staff, Board members and AOD providers. He then presented the Strategic Goals and Objectives draft for discussion and feedback (see handout). He explained input was being sought through forums such as this, one-on-one contacts, and interviews and offered several ways to provide input including by e-mailing him at alange@communitycouncil.org.

Discussion highlighted several issues, some specific to goals and objectives:

Goal 1, Objective A (G1-OA): Federal Health Care Reform (all aspects of HCR) – stress on the need for all providers to be ready to go when it is implemented in 2014; Maria pointed out ADS has a new Program Coordinator to work with non-Drug MediCal providers to train them on using AVATAR and electronic health records which will be a requirement for all AOD Providers under HCR. We need to be able to give people what they need to be successful.

G3- OE: Given the impact and overlap of AOD clients among systems/agencies (e.g., DA, Court, Mental Health, Probation, CPS, primary health care), we need to identify and collaborate with more partners who share similar clients.

G4-All objectives: It is very important to improve accountability/outcomes, but we face many challenges (e.g., expensive to buy and implement “best practice” models, including training on them and the cost for evaluation); the State CalOMS does not include follow up; some narrowing of program selection to best practice has begun and allows for more clarity of measurement and outcomes.

G6 - All objectives: Limit number of objectives to narrow focus on consistent programs and consistent training and measures.

General comment: It will be hard to limit clients from Prop. 36, given it is a State mandate.

VI. Administrator's Report: Maria reported on several items from the recent County Association of Alcohol and Drug Program Administrators of California meeting. Michael Mulcaney, Under Secretary of the State HHS Agency, affirmed the Governor's proposed elimination of both State Alcohol and Drug Programs and MH, with ADP Drug MediCal moving to State Department of Health Care Services. The dismantling of ADP is based on an assumption that the tax extension/package would pass (leaving additional uncertainties if it does not pass). The status of HCR was also discussed at CADPAAC, but there are still many unknowns and thus uncertainties. CADPAAC appears to favor a separate State Department of Behavioral Health over placing ADP into HCS. The status of the Substance Abuse Treatment and Prevention Block Grant is also uncertain. Currently, funding for the State Parolee Services Network and the County's share of federal Substance Abuse Prevention and Treatment will run out soon for outpatient services, so indigent Prop. 36 clients will only have self-pay options.

Maria also answered questions from providers. In response to concerns over the State Budget impasse, she explained contracts will continue based on last year. In preparation for new HCR requirements, she stated one priority within ADS would be to bring up standards for provider records documentation.

VII. Board's Chiefs of Staff Meeting – Next meeting is scheduled for June 16th or 23rd at 2:30 PM (Paul will clarify the date). New members are encouraged to attend. Providers may be invited to attend as well if the topic seems appropriate.

VIII. Advisory Board Committee Reports - Paul reported committee reports are summarized in the handout.

1. **Executive Committee** – In addition to normal administrative planning business, the primary topic was the increasing number of criminal justice clients entering the treatment system and their potential impact on services and outcomes.
2. **Prevention and Education Committee** –May 10th meeting addressed the status of the Social Host Liability Ordinance, engaging law enforcement, and planning for a "Pie Chart" prevention meeting with Dr. Chris Borbely on improving evaluation efforts.
3. **Treatment Committee** –May 11th meeting was focused on the Strategic Plan.
4. **Membership Committee** – One interview was held for a new member, but there are still several vacancies and outreach efforts continue. Suggestion to hold a "dinner get together" for the August meeting, perhaps again at the Spaghetti Factory. Plans are moving ahead on the Harold Cole Award event.
5. **Budget, Planning and Evaluation (BPE) Committee** –May 12th meeting addressed Strategic Planning issues.
6. **Strategic Planning Committee** – Alan Lange served as facilitator for the May 26th meeting to complete the draft Goals and Objectives in preparation of seeking feedback from stakeholders, partners, and the broader community.

IX. Reports from other Boards

1. **Human Services Coordinating Council** – No report.
2. **First 5 Advisory Committee** –With the State Budget crisis, Sacramento 1st 5 is still facing \$48.5 million in cuts over the next 5 years.

X. New Business – The annual Recovery Happens event will be held this year on September 1st. The Advisory Board will have a table and volunteers were solicited.

XI. Future Month's Agenda items - Presentations by current providers of County public AOD services will continue. Planning for an August "get together" dinner for the Advisory Board instead of the regular format for the meeting. Public will still be invited but the meeting will be a more informal setting for open discussion.

XII. Adjournment: The meeting adjourned at approximately 7:30 p.m.