

Sacramento County Mental Health Board
Community Wellness Response Team (CWRT) Advisory Committee
MINUTES – IN PERSON MEETING
HYBRID PARTICIPATION OPTION
Tuesday, June 10, 2025
6:00 PM – 8:00 PM

Members Present: Patricia Wentzel, Elizabeth Kaino Hopper, Corrine McIntosh Sako, Mykel Gayent, Katie Houston

Absent: Elijah Orr, Terry Sharp

BHS Staff: Stephanie Kelly, Arys Scott, Christina Irizarry

Agenda Item
<p>I. Welcome and Introductions</p> <ul style="list-style-type: none">• Introductions:<ul style="list-style-type: none">- Committee Members- CWRT Partners• Review MHB Conduct Agreement• Announcements by CWRT Advisory Committee Members <p>• Chair Sako commenced the meeting at 6:02pm. Members introduced themselves; a quorum was established. MHB Conduct Agreement was reviewed and acknowledged.</p>
<p>II. Public Comments related to the Community Wellness Response Team (CWRT)</p> <ul style="list-style-type: none">• Public Comment #1: Member Hopper spoke as a member of the public and as a volunteer on the NAMI Helpline. I wanted to take a few moments to honor the family of the young man, Rick Donnelly, who died on Saturday, June 7, 2025, who received CWRT services more than once. H and his family were satisfied with the services received but unfortunately due to the severity of his illness, had fallen through the cracks. He and his family were vigilant about attempting to seek services. I wanted to honor how hard Rick Donnelly worked during his periods of lucidity to volunteer. I wanted to honor the family who did utilize all of the county services the best they can. I wanted to bring this up because we still have a large amount of work ahead of us. We do still have gaps in services where people are falling into this severe level of impairment when their symptoms are so strong.

III. Update on Behavioral Health Commission

- Chair Sako: I sent an email out to the advisory committee members prior to the Board of Supervisors meeting on May 20th to let you all know what was being considered and what was being recommended for the integration of the Mental Health Board and the Alcohol and Drug Advisory Board as part of Prop 1. This will be the Behavioral Health Advisory board that looks at both the mental health component as well as the substance use prevention and treatment services. As a result, there will be a Behavioral Health Commission that will be in effect this September. The Behavioral Health Commission will be a 22-member commission composed of 5 consumers, 5 family members, 10 public interest members, 1 board of supervisor's representative, 1 veteran representative and 1 representative from a local education agency that can either be a family, consumer or public interest. The last meeting of the Mental Health Board will be the first Wednesday in August and the last meeting for this committee will be in July. Under the Behavioral Health Commission, there will be committees, the Adult Prevention and Treatment Committee, Children Prevention and Treatment committee and a Crisis and Justice Involved committee where programs such as CWRT will continue to be discussed. For those who have an interest in sitting on the Behavioral Health Commission, I encourage you to apply.

Member Discussion/Comments:

- Co-Chair Houston: I appreciate you bringing all that information forward and having a clear picture is helpful.
- Member Gayent: Are there going to be real differences in how the commission operates as opposed to how the board operates now?
- Chair Sako: That is a good question, I don't know. There are bylaws that have been approved and are on the Behavioral Health Commission website and when I read them, they read similar to the Mental Health Boards bylaws but how it will be actually implemented will depend on who is on the board.
- Member Gayent: I feel as a member of the Mental Health Board I should have advocated more, especially when it comes to the veterans. I am talking to everyone I can to see how I can better represent them and to evaluate how I am serving the people. I put my application in, and I am hoping I am still considered.
- Member Sako: I appreciate you saying that and I would like to say that I have seen you work so hard in both spaces and in the community. This is something I am also reviewing for myself on how I can do better, how can I show up more and I would reckon that those of us who are passionate about what we do are also thinking the same way.
- Co-Chair Houston: How will what we do here be continued? Will the new subcommittee continue to follow up on data and other work we have done?
- Chair Sako: I would certainly hope so. The part I neglected to report on previously, everyone in the current board will have to reapply so anything I say here is based on my best guess. I wonder if our BHS partners have any feedback on this.
- Stephanie/BHS: When considering our current subcommittees, members choose what they are interested in learning about. It can be presentations on a group of programs or specific programming data, outcomes. There are many programs within both continuums, so I think members will have opportunity to learn about those programs and where they want to focus each month. Perhaps even standing agenda items, if there is specific interests of the subcommittee members.

IV. Schedule Site Visit of WellSpace Health's 988 Call Center

- Chair Sako: Before we wrap up what we are doing here, we are looking to visit the WellSpace 988 Call Center. This is something we have been trying to do for a while so let's try and do this before this committee goes away. There are 3 options, Friday, July 9th 9:00am-11:00am, Tuesday July 15th 3:00pm-4:00pm or Tuesday July 22nd 5:30pm-6:30pm. Out of those dates, which ones are interested in participating in the site visit?
- Member Houston: I can do the 15th or the 22nd
- Member Hopper: I can do any of those
- Member Gayent: So can I
- Member Wentzel: I can do the 22nd
- Chair Sako: Okay, Tuesday July 22nd at 5:30pm
- Member Houston: I have a conflict, so sorry.
- Member Wentzel: For the 15th, I have the helpline until 5:00pm that day but I can see if anyone can cover me for that day.
- Chair Sako: The final date of the site visit will be Tuesday, July 15th at 3:00pm
- Member Wentzel: Where is the call center?
- Terri/WellSpace: It is in South Sacramento near Sam's Club, but I will send out the address.

V. Presentation: Community Health In Action (CHIA) Mental Health Initiative and Possible 988/CWRT Promotion

- Member Wentzel: Kaino and I participate in the Community Health In Action (CHIA) subcommittee of the subcommittee that is looking at how to do mental health-oriented interventions or promotions in a particular tract of the county that has been identified through public health records as having very low participation in Medi-Cal. It is a part of the county that has very high needs and very low participation in the programs designed to meet those needs. They are looking at how to promote 988 and CWRT in this particular tract in the Fruitridge area.
- Christina/BHS: The tract is 44.01. I know we have been collecting data as part of CWRT and are trying to make meaning of it as well. With CHIA and Public Health, there is a grant of \$25,000 that can be leveraged for marketing and advertising of 988 and CWRT in that area. They want to invest in this so people are aware of services, since mental health can also impact physical health. Ely and Crystal are doing a lot of work on advertising and will be using some of the current marketing strategies already being used and look into what is not being done yet. Crystal and Ely will be presenting these ideas.
- Ely/BHS: For CWRT, we did not have any funding before for advertising, so we have been doing a lot of free options. This next round of promotional work that will go until September – we will be trying to reach the target audience this committee is interested in. Our goals are to increase website traffic by 30%; Increase 988 calls that result in CWRT responses by targeted communities by 20%; and increase positive sentiment and recognition of CWRT by 25%. Some of the free efforts that has been done since April has been changing out social media graphics and including more staff. We post on Facebook, Instagram, X and BlueSky. On Facebook, we had a reach of 3,124 individuals and Instagram we had 2,597 views. On Instagram Reels, we post 30 second clips of what is going on and our message and we had a watch time of 2 hours and 34 minutes. We are also posting lobby posters at 700 H street and there have been about 5,700 views of people just walking by. Crystal will speak more on the stickers.
- Crystal/BHS: We will go over the options with CHIA as to what is possible for this funding. We don't have any additional funding, so we have to stick with the guidelines set by CHIA. Out of the options (on the handout), we would love your feedback on what stands out to you and your priorities. There are QR code data analytics that will help us track data more effectively. It promotes insight into which outreach methods are the most efficient and will track where the QR codes are being scanned. The estimated cost for this is \$400 a year. DHS is looking to acquire this so we might not need funding for this option, but it is still pending. The second option is bus wraps that are advertisements that will go on the sides and back of a bus. This is mobile advertising across all of the target areas to increase visibility and awareness. In the past, the wraps have been around \$5,000 for a 4-week campaign but this is just an estimate as cost is determined by length and reach. The next option is a billboard, this is unfortunately one of the more costly options, with past billboards costing around \$7,500 for a 4-week campaign. Lastly, we have the paid social media outreach that allows us to reach a diverse population, including individuals who are unhoused but have access to a cellphone. This option would broaden our reach to better penetrate target communities. The cost for this is a much larger range depending on how it's used. I am going to open up the floor for comments and feedback on these options.

Member Discussion/Comments:

- Chair Sako: What do we know about the people living in the census tract?
- Ely/BHS: We are currently working with CWRT to decide if we want to go into the areas where there is little activity or if we want to go into areas that have more CWRT calls. Until we have what area we would like to go into, we won't have final costs for advertisements.
- Chair Sako: So, the census tract we are talking about is the area in general but not necessarily the area we are trying to advertise in?
- Crystal/BHS: We will know more after we meet with CHIA. We will get a better understanding of the guidelines.
- Chair Sako: Did CHIA used to be CHIP (Community Health Improvement Plan)?
- Ely/BHS: CHIA is a part of CHIP and is interconnected.
- Chair Sako: We had CHIP come in April 2024 and they gave a comprehensive presentation about their program and how that specific census tract was picked. Personally, I like the mobile bus wraps and would be interested in seeing how many we get. Does the cost you mention include the front and back of the bus and does it include light rails? This and billboards would be best.
- Member Houston: I think the billboards are helpful and expensive. I like all of the free outreach that is currently being used. Where would QR codes be located? On the bus? Billboard? Or just social media posts?
- Ely/BHS: We try not to add QR codes on billboards to prevent people using phones while driving. The QR codes can be on the bus or on the flyers. The QR codes will all be the same, but the tracking tool would be able to tell us what marketing strategies are working or not.
- Member Hopper: I also like the bus wraps. My memory of some of the statistics on the census

tracts were on single parent families who weren't necessarily using mass transit.

- Member Wentzel: I found online that census 44.01 was chosen because it has low income and economic opportunities. Residents of this census tract are significantly less likely to have incomes above 200% of the poverty level, lower employment rates and lower per capita income compared to the rest of the county. I think CHIA is wanting something that focuses on that census tract versus something that is roaming the whole city like a bus. I don't know if there are billboards in that area, but I am personally wondering if we can stretch that \$25,000 toward door-to-door canvassing.
- Christina/BHS: I am not fully certain, but we will get a better sense when we meet with CHIA next.
- Member Wentzel: With the population heavily Hispanic, having billboards and bus wraps in English might not be the best option. This should be something we pay attention to since majority of those in this census are Hispanic. I think door-to-door canvassing with flyers in multiple languages would be a good option. We can also have schools send children home with flyers or have a booth at back-to-school night in September. Are these types of events effective?
- Member Gayent: I am starting to connect more with the faith community to establish mental health ministries. Can we somehow bring this demographic into the mix as well?
- Chair Sako: Would the bus wraps look like the ones on the handout?
- Ely/BHS: Not necessarily, these were just ones done in the past. It is a part of our plan to include multilingual adverts, but we will get a better understanding of what is needed when we meet with CHIA. We can pass out flyers at churches, grocery stores and other places and use the QR data analytics to get a better sense of which areas are getting the most scans.
- Member Hopper: Does BHS go out to the community to promote services?
- Christina/BHS: Yes, we do. Anyone can contact me to set up these opportunities. I connect with my admin team to set these up.
- Member Wentzel: Does BHS have staff that reach out to community partners first to do outreach instead of people reaching out to you all first?
- Christina/BHS: Yes. One of our counselors has even looked up and contacted school districts and went to schools to provide information. Aside from BHS, our partners, like BACS, will also do outreach as well. All of this is tracked on our promotional outreach spreadsheet.

VI. Presentation: CWRT and Folsom Police Department Pilot

- Jessica/BACS: The pilot for CWRT and Folsom PD is working on a bilateral process in cases where a mental health call goes to Folsom PD and they assess it is more appropriate for CWRT. Looking at how those calls are handled and vice versa when CWRT determines a call is too unsafe to take is part of the pilot. They are looking at ways to respond, including co-responding. The purpose of the program is to increase coordination of mental health calls between CWRT and Folsom PD, reduce law enforcement involvement in mental health calls and community and program safety. We want a direct line for a smooth transfer process to minimize negative experiences and from bouncing calls back and forth from CWRT and Folsom PD. This program is going to also focus on safety so calls can be redirected appropriately and improve psychoeducation. This pilot program began earlier this year and was officially launched in April 2025. Unfortunately, we did have a low number of calls, so it was extended to another 30 days until the end of May 2025. As for data, 988 referrals by call takers were 1,911 to 988. Transfers from Folsom were 3 and our transfers from 988 to 911 were handled by an allied agency and were 4. CWRT referrals by officer were 1, CIT unit handled were 5, hold placed were 10, no further action required were 2 and resolved by officer were 7. As for the next steps, the collaboration will continue, and data will be reviewed to determine gaps in the program.

Member Discussion/Comments:

- Chair Sako: When looking at the data and I see that 10 holds were placed and 7 were handled by officers, I think we still have a way to go as far as education goes. I wonder if the pilot will continue to grow the awareness.
- Member Houston: I was happy to hear that at least transfers to 988 are happening.
- Member Wentzel: Are we doing a similar thing with Elk Grove PD?
- Stephanie/BHS: Elk Grove PD is not part of our pilot program. Our next pilot is with Sac PD. Elk Grove PD does attend our Bi-Lateral monthly meeting.

VII. Discussion Item: Recommendation Log Review & Requested Action Items Follow Up

a. Requested Action Items Follow Up

b. Recommendation Log

Arys/BHS

- Reminder that CWRT flyer and brochure are published on the webpage.
- Provided the committee members printed flyers and brochures (75) for each committee member.
- Provided the committee with printout of CWRT stickers.
 - Christina/BHS: There is a copy of what the CWRT sticker can potentially look like. From your previous response, we really heard about the font size, updating the phone image and making sure to highlight that there is a response team as an option. Feedback is welcome.

VIII. Discussion: CWRT Program Implementation, Including Data & Response Outcomes

a. 988/WellSpace Health

b. Bay Area Community Services (BACS)

c. Sacramento County Behavioral Health Services CWRT

Terri/WellSpace 988:

- The Someone to Call part of 988 received 1,735 calls from Sacramento, we transferred 142 to CWRT, there were 19 incidents where we could not warm transfer (this number no longer means the person was not served), 8 emergency interventions, leaving 91% of calls resolved last month. We did initiate 4 calls to the Sheriffs department and 2 were responded to.
- Chair Sako: Can you define what emergency interventions are?
- Terri/WellSpace 988: This includes suicide in progress or an imminent risk situation and EMS or law enforcement is called.
- Shared Success story.

Jessica/BACS:

- Shared success story.

Christina/DAT/BHS

- CWRT received 155 calls, 51 of those were mobile dispatches for the month of May. April dashboard is available on the website and the May dashboard will be published by the 15th.
 - Chair Sako: Do we know disposition?
 - Christina: I do not, unfortunately – it will be included in the May dashboard.
 - Chair Sako: it seems like there has been a huge decline in responses.
 - Member Wentzel: The data seems too erratic to draw any conclusions at this time.
 - Stephanie: We saw a spike after the policy change with the Sheriff's department but the responses did decrease the last two months.
 - Christina: Now that we have the dashboard, we will hopefully be able to make more sense of the patterns.

IX. Adjournment

Next CWRT Advisory Committee Meeting Scheduled for Tuesday July 8, 2025 6pm-8pm

- Chair Sako adjourned the meeting at 7:46pm.

X. Requested Action Items from AC Committee Meeting

1. No Requested Action Items

