

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

Our Mission

To provide a culturally competent system of care that promotes holistic recovery, optimum health, and resiliency.

Our Vision

We envision a community where persons from diverse backgrounds across the life continuum have the opportunity to experience optimum wellness.

Our Values

Respect, Compassion, Integrity • Client and/or Family Driven • Equal Access for Diverse Populations • Culturally Competent, Adaptive, Responsive and Meaningful • Prevention and Early Intervention • Full Community Integration and Collaboration • Coordinated Near Home and in Natural Settings • Strength-Based Integrated and Evidence-Based Practices • Innovative and Outcome-Driven Practices and Systems • Wellness, Recovery, and Resilience Focus

August 15, 2024, Meeting Minutes		
Time: 6:00-8:00 PM		Location: Virtually (Zoom) and phone conference
Meeting Attendees - General Public and MHSA Steering Committee members:		
Stakeholder Group	Primary	Alternate
Mental Health Board	x Patricia Wentzel	Brad Lueth
Mental Health Director	Ryan Quist	x Jane Ann Zakhary
Service Provider - Children	x Laurie Clothier (River Oak)	Mary Sheppard (Uplift Family Svcs)
Service Provider - Adults	x Marlyn Sepulveda (Hope Cooperative)	x Alexis Bernard (Turning Point)
Service Provider - Older Adults	x Genelle Cazares	Cindy Xiong
Law Enforcement	Corey Jackson	Laura Mueller
Senior and Adult Services	x Heidi Richardson	Mary Parker
Education	x Christopher Williams	Brent Malicote
Department of Human Assistance	Julie Field	Carmen Briscoe
Substance Use Prevention and Treatment	Lori Miller	Kimberly Grimes
Cultural Competence	x Lakshmi Malrouth	Jessie Armenta
Child Welfare	x Melissa Lloyd	Kim Pearson
Primary Health	x Andrew Mendonsa	Noel Vargas
Public Health	x Olivia Kasirye	Staci Syas
Juvenile Court	Andi Mudryk	Sarah Davis
Probation	x Lynsey Semon	David Linden
Veterans	x Rochelle Arnold	Michael Restivo
Consumer - TAY	Vacant	Vacant
Consumer - TAY	Vacant	Vacant
Consumer - Adult	Christeana Zamora	Vacant
Consumer - Adult	Clarissa Laguardia	Chezia Tarleton
Consumer - Older Adult	x Janet Green	Vacant
Consumer - Older Adult	x Sharon Jennings	Vacant
Family Member/Caregiver of Child age 0-17 Yrs	x Chris Marzan	Vacant
Family Member/Caregiver of Child age 0-17 Yrs	Crystal Harding	Vacant
Family Member/Caregiver of Adult age 18-59 Yrs	Susan McCrea- LOA	Ellen King
Family Member/Caregiver of Adult age 18-59 Yrs	Ryan McClinton	x Diana Burdick
Family Member/Caregiver of Older Adult age 60+ Yrs	Vacant	Vacant
Family Member/Caregiver of Older Adult age 60+ Yrs	Anatoliy Gridyushko	x Vacant
Family Member/Consumer At-large	Karly Gonzalez- LOA	Evin Johnson

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Agenda Item	Discussion
I. Welcome and Member Introductions	The meeting was called to order at 6:00p.m. MHSA Steering Committee (SC) co-chairs and members introduced themselves.
II. Agenda Review	The agenda was reviewed. No changes were made.
III. Review of Prior Meeting Minutes	The June 2024 draft meeting minutes were reviewed. No changes were made.
IV. Announcements	<p>Patricia Wentzel, SC Member: NAMI Sacramento now has 13 consumer support group meetings a month and 11 meetings for families including a Spanish language support group. For information about NAMI Sacramento support groups for consumers and for families, both in person and online, visit Nami Sacramento.</p> <p>Heidi Richardson, SC Member: Sacramento County Agency on Aging Area 4 (AAA4) in partnership with the ACC Senior Service (formerly known as The Asian Community Center of Sacramento Valley) for Independent Living operate the Sacramento County Aging and Disability Resource Connection (ADRC). ADRC is a "No Wrong Door" resource for older adults and people with disabilities that provides guidance and assistance accessing care and services options in Sacramento County. There is an ADRC available in most, if not all, counties in California. For more information about Sacramento County's ADRC visit ADRC4.org. To learn more about the State programs that service older adults and adults with disabilities, visit Aging.ca.gov.</p> <p><u>Announcements from the Public</u> None.</p>
V. Executive Committee / MHSA Updates	<p>Executive Committee Updates: Sharon Jennings, SC Executive Member and Co-Chair: In honor of National Recovery Month, the Substance Abuse and Mental Health Service Administration (SAMHSA) Office of Recovery hosts the Art for Recovery Project. My artwork has been a large part of my recovery journey and will be featured in the online exhibit titled The Gallery of Hope: Artistic Expressions of Recovery Across the Nation. It is amongst over 280 selected artworks that will be showcased. The gallery launches in September and will remain online until the end of the month. To learn more, visit 2024 Gallery of Hope.</p> <p>At the June SC meeting, Ms. Leslie Napper shared two requests on behalf of the African American/Black/of African Descent Ad Hoc Committee (AA/B/AD Ad Hoc Committee): See Attachment A – Ms. Leslie Napper Comment</p> <ol style="list-style-type: none"> In partnership with the MHSA SC, the ability to co-design an updated BHS stakeholder process that emphasizes authentic community engagement.

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	<p>a. Response: First, we want to thank you for your thoughtful requests. Currently, we are awaiting guidance from the state. We will take the recommendations into consideration as we look at the future design and planning of the Behavioral Health Services Act.</p> <p>2. Requested a new seat on the MHSA SC for AA/B/AD Ad Hoc Committee members.</p> <p>a. Response: The MHSA Steering Committee is comprised of 30 primary seats with over 50% of SC seats designated for clients, family members and/or caregivers. The MHSA SC works to ensure that cultural competence be included in the planning, implementation and evaluation of all MHSA activities. We invite individuals to share ideas, concerns, etc. with SC members, as well as Division staff. Additionally, we encourage individuals to attend SC meetings and participate as guests and keep an eye out for vacancies within our peer and family member seats.</p> <p>MHSA Updates: Jane Ann Zakhary, BHS Division Manager, and SC Member: <u>MHSA Program Update</u></p> <ul style="list-style-type: none"> • August is back to school month. This is a stressful time for a lot of individuals. Please remember to be kind to yourself and one another. • As the Presidential Elections draw near, remember to practice self-care because election anxiety is real. • The Sacramento County Mobile Crisis Support Team (MCST) is hiring a new Program Coordinator to oversee the program. The new program coordinator will be starting this month. The previous program coordinator, Jennifer Reiman, has been promoted to a Health Program Manager overseeing APSS, CPS MH, QCCC, QI CalWorks and YDF. MCST plans to pilot extended hours of service operation in partnership with the Sacramento County Sheriff's Department. Once the dates are finalized, the information will be disseminated to the community. • The Sacramento County Community Outreach and Empowerment (CORE) Programs are working to implement outreach teams. Currently, there are outreach workers at 9 of the 11 CORE program sites. During the recent heat waves, the CORE Community Wellness Centers offered places of respite to those who are unhoused, becoming cooling centers that allowed community members to escape the heat. • Full-Service Partnership (FSP) Programs are preparing to implement Individualize Placement and Support which is an evidence-based practice that focuses on employment. It will be implemented once the training is in place. • The Flexible Integrated Treatment Programs (FIT) are going to be supporting outreach and engagement efforts to improve access and connection to communities and neighborhoods. • The Behavioral Health Peer Specialist Program Managers have continued to present on the Psychiatric Advance Directives (PADs) across the behavioral health system. They are providing support to providers as they work with clients to create their unique PADs. PADs are available to individuals in both English and Spanish.

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<p>VI. BHS Permanent Supportive Housing Overview Presentation</p>	<p>BHS Permanent Supportive Housing: An Overview Presentation</p> <p>Jane Ann Zakhary, BHS Division Manager, and Alex Trac, MHSA Program Planner</p> <p>See Attachment B – BHS Permanent Supportive Housing: An Overview.</p> <p><u>Member Questions, Discussion, and Collective Comment:</u></p> <p>During the building phases of these projects was there a lot of opposition to the apartments being built? <i>We have not encountered many challenges with having dedicated apartments within these affordable housing complexes.</i></p> <p>How many Permanent Supportive Housing (PSH) units are active and/or available? <i>There are 401 units that are active and 75 additional units that will become available.</i></p> <p>What is the age requirement for the senior units? <i>In the Mental Health Services Act a senior is considered 60 years old or older. However, we have been successful in having the senior age requirement reduced down to 55 and older. This allows us to consider those who are in the transition ages of 55 to 60 years old.</i></p> <p>Are there currently any PSH units in Rancho Cordova? If not, is this something that can be considered in the future? <i>Currently, there are no PSH units in Rancho Cordova. However, we are always looking for new opportunities to partner in the effort to get more PSH units built.</i></p> <p>What are some of the supportive services provided within the PSH units? <i>Every development has different supportive services they offer. At Hope Cooperative developments, funding was built into the projects operation funding that will cover staff onsite for a minimum 20 years. One upcoming project will have up to three staff on site. The larger upcoming project for seniors will have up to five staff onsite. This is because this property will have 124 units. Some of the onsite staff include case managers and residential service coordinator. In addition to this, the designated BHS Full-Service Partnership (FSP) program has a 1:15 ratio of staff to client (i.e., if they have 30 units, they will have two staff there). Hope Cooperative has three projects becoming available soon, and all properties have services built into the operation funding of the project.</i></p> <p>Are the existing properties, separate from Hope Cooperative, staffed in a similar way? <i>Supportive services will vary at each property. For example, some of the earlier properties MHSA partnered on include Workforce Housing. This means not all units are dedicated for special populations and individuals in a lower socioeconomic status. In general, the housing developer ensures that there will be property management at each site. There are also</i></p>

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	<p><i>resident services for all the units, including our MHSA/No Place Like Home (NPLH) units. There may be (depending on the population) supportive services for other units outside of our MHSA/NPLH units. Some of the upcoming properties are designed as 100% for the unhoused population. Therefore, deeper supportive services are built into those properties' operating budgets, as well as from other service providers and FSP providers providing services on site for the MHSA units.</i></p> <p>How are the existing properties funded? <i>The FSP services for the dedicated MHSA and NPLH units are funded through a blend of MHSA, Medi-Cal and other local/state funds. It takes a lot of funding (millions) to renovate and/or build an apartment complex and those capital financing sources are also blended.</i></p> <p>There have been some concerns with the performance of the SmartCare system. Is the county aware of this and what is being done to fix it? <i>The county is aware of the challenges around the performance of SmartCare over the past couple weeks. Unfortunately, these challenges are not unique to Sacramento County. We are working with CalMHSA (our contractor for SmartCare) and they in turn are working with the vendor to troubleshoot and get the issues resolved as soon as possible.</i></p> <p>Who will be responsible for making changes to the Steering Committee membership/design to take into account the need to address substance use disorder issues? <i>This is something that we will begin discussing at the MHSA SC meetings in the upcoming months as we receive more guidance from the State and began participating in the workgroups the State has organized around BHSA.</i></p> <p>Public Comment: None.</p>
VII. General Steering Committee Comment	None.
VIII. General Public Comment	<p>Leslie Napper I am here speaking on behalf of the African American/Black/Of African Descent (AA/B/AD) Ad Hoc Committee. First, thank you for taking our requests into consideration and responding at this meeting. I am disappointed that there wasn't an invite to learn more about what the ask is. We would love to work in collaboration with MHSA to collaborate and co-design an updated BHSA stakeholder process. Although we don't have directives from the State around Behavioral Health Transformation (BHT), this would be a great opportunity to think ahead about the stakeholder process. To ensure the community and the members are heard, and things are implemented from a race/equity lens. The recommendation is to wait; however, we have community members who are in need now. I am going to share the responses with the AA/B/AD Ad</p>

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	Hoc committee at our upcoming meeting August 22, 2024. We would love if BHS staff and partners are able to attend this meeting to discuss this further.
IX. Adjournment/ Upcoming Meetings	Upcoming Meetings: <ul style="list-style-type: none">• September 19, 2024• October 17, 2024

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