

**Sacramento County
 Department of Health Services
 Maternal, Child, and Adolescent Health Advisory Board**



Meeting Minutes

March 12, 2024
 8:30 AM - 10:30 AM

Zoom Meeting

Facilitator: Effie Ruggles
Scribe: Shai Davis

Meeting Attendees:

- Angelica Quach
- Asya Anderson
- Christina Newport
- Danielle Jackson
- Donyale Abe
- Dr. Melody Law
- Fay Bursch
- Jackie Washington-Ansley
- Kirbee Brooks-Gomez
- Leesa Hooks
- Lisa Hooks
- Nyuieko Bansah
- Patsy Jimenez
- Rebecca Lewis
- Robert Hickman
- Robin Blanks-Guster
- Tosha Ulicni
- Vanessa Cummings

Absent:

- Charles Taylor
- Dr. Harry Wang
- Dr. Kevin Keating
- Fienishia Wash
- Katie Andrew
- Paula Kuhlman

Welcome and Introductions	The meeting was called to order at 8:32am by Effie Ruggles.
Agenda and Minutes	The November 2023 meeting minutes were approved following revision of attendance to add Christina Newport.
Public Health Officer’s Report: Presented by Dr. Melody Law, Deputy Health Officer	Respiratory Illnesses <ul style="list-style-type: none"> - COVID, RSV and flu data numbers are both down in Sacramento County and the state. - Dr. Law shared the website information about wastewater data in response to Dr. Wang’s inquiry at the last meeting. - CDC updated the COVID guideline to completely get rid of the 5-7 days quarantine. The protocol now is that if one is sick, wear a mask, and stay home from work. A person can return to work after being symptom-free for 24 hours, just like other respiratory viruses.

	<p>Measles Exposure at UC Davis Emergency Department</p> <ul style="list-style-type: none"> - There was a measles exposure at UC Davis ED on March 5th, with about 200-300 contacts potentially exposed. Unvaccinated people or those with unknown vaccine status were at risk of developing measles from 7-21 days after exposure. - This does not necessarily mean that the case exposed this number of people; the number of contacts was larger to account for an expanded period of time – 2 hours after – that the person was in the facility. - For those who might have gone out and might have been exposed due to a measles outbreak, or if there is any suspicion, Dr. Law recommended having them evaluated and getting a blood test. Dr. Law also recommended getting vaccinated. <p>Substance Abuse Roundtable</p> <ul style="list-style-type: none"> - Dr. Law will present about substance abuse and treatment services for birthing people on March 28th at 11:30am.
<p>MCAH Updates: Presented by Leesa Hooks, MCAH Director</p>	<p>MCAH Needs Assessment</p> <ul style="list-style-type: none"> - Thank you so much to Patsy Jimenez for facilitating the Spanish speaking listening sessions! <p>CalAIM MOUs with the Managed Care Plans</p> <ul style="list-style-type: none"> - DHS continues to work with the MCPs to galvanize the relationship with our managed care plans. At present, MCAH is working closely on the birthing care pathway that would spell out some of the CPSP transition components. <p>CPSP Transition</p> <ul style="list-style-type: none"> - The CPSP transition is still scheduled to take place July 1, 2024. They have released FAQs on both DHCS and CDPH websites. - More than 500 individuals applied to be a part of the listening sessions for the birthing care pathway statewide. There is more focus on wanting to hear from the voice of the members receiving managed care plan services. - At a listening session attended by 50 participants, Bob was available to participants if their participation triggered any difficult emotions and need immediate support, and Bob would also connect them with resources as needed. DHCS is working towards a client-centered approach towards CPSP. <p>Guaranteed Income Pilot Project</p> <ul style="list-style-type: none"> - DCFAS will be going to the BOS for approval. The guaranteed income project is specifically for parents/legal guardians who are primary caregivers of a Black/African American or American Indian/Alaska Native child ages 0-5, and reside in the following zip codes: 95815, 95821, 95823, 95825, 95828 or 95838.

	<ul style="list-style-type: none"> - If one is enrolled in the guaranteed income pilot, it will not impact current aid and it will not impact TANF, Medi-Cal, food stamps or social security. - The program goal is to close the gap with some of the health disparities, as the disparities are predicated on the social determinants of health, primarily economic factors. - Once approved, there will be about two weeks for folks to apply. Leesa will make sure to give the details as soon as possible to spread the word to the families being served.
<p>Nurse-Family Partnership Updates Presented by Faye Bursch, Supervising PHN</p>	<p>Staffing</p> <ul style="list-style-type: none"> - NFP is now fully staffed has been funded for 10 nurses and 1 Sr. PHN, Angelica Quach and 1.5 clerical support staff. The last nurse started on February 13th and is currently working on her training. She also speaks Spanish which would make it very beneficial for clients who don't speak English as the first language. Currently, NFP is using interpretation services. <p>Capacity</p> <ul style="list-style-type: none"> - With this staffing, NFP has a capacity for 250 total clients, and current caseload is at 206. The newer nurses are continuing to build up caseloads while completing their education. - Because the team has grown, there is no waitlist. NFP is also conducting lots of community outreach to maintain the caseloads. <p>CQI Project</p> <ul style="list-style-type: none"> - For this year's CQI project, NFP is focusing on expanding referrals. They will report to the state every two months about the status of the project. <p>New Electronic Health Record</p> <ul style="list-style-type: none"> - NFP has transitioned to the OCHIN Epic electronic health record on February 20th. <p>Site Visit</p> <ul style="list-style-type: none"> - NFP state consultants conducted a site visit in December. They attended one of the staff meetings and ask about how the site was doing. The site visit was a success and no follow-up was needed. - HRSA will be conducting a site visit to see a local NFP in action in July. It will likely be similar to the CHVP site visit and a home visit may be scheduled with one of the NFP staff. <p>Trainings</p> <ul style="list-style-type: none"> - NFP will be attending a two-day motivation interviewing training. <p>The Board provided potential outreach opportunities for NFP to attend, including Kids' Day, International Kids Festival and the Wellness and Community Resource Fair.</p>

<p>Sutter Teen Programs, Nyuioko Bansah, Manager</p>	<p>Sutter Teen Programs aim to reduce incidence of low birth weights for babies and improve health outcomes for the infants and mothers using a youth-centered approach by engaging youth in defining their own life plan and goals, increase social and emotional support and build resiliency. The programs focus on strength-based activities and empowering youth to build personal autonomy.</p> <p>The case managers provide sex education, mental health support and referrals to programs, including virtual tutoring services, jobs through Job Corps, community-based mental health supports and basic needs such as food boxes.</p> <p>Nyuioko provided an overview of the teen home-visitation programs. Cal Learn is for young and pregnant/parenting people receiving CalWORKs, age 19 or younger. Adolescent Family Life Program (AFLP), a free voluntary program with case management support offered to teen/young adults age 21 or younger.</p> <p>Here is the link to the referral form and flyer.</p> <p>Bob recommended the Be Mom Aware website as a resource for using referral pathways to connect birthing parents to mental health services, as well as the contact to get connected to the Maternal Mental Health Collaborative.</p>
<p>MCAH Needs Assessment and Health Needs Prioritization, Shai Davis and Jackie Washington-Ansley</p>	<p>Shai provided a review of the data as part of the needs assessment, including the current County demographics, economic well-being, health indicators, and disparities in health outcomes.</p> <ul style="list-style-type: none"> - Housing and child care are large economic needs faced by many families. - While poverty rates vary through the county, the areas of high poverty have higher likelihood of disease and premature death, lower high school graduation rates, more single parent households and higher unemployment. - Compared to 2016-2018 data, the latest data show that birthing parents experienced higher hypertension, diabetes and asthma at delivery, higher prenatal depression symptoms, and higher maternal mortality. Preterm birth, low birth weight and infant mortality rate also increased. Congenital syphilis incidence rate substantially increased. The County met the HP 2030 goals for early prenatal care and pre-term birth. - Black families have been disproportionately affected by obstetric deaths and infant deaths. Black and Pacific Islander babies had higher percentages of preterm birth and low birth weight. <p>Jackie facilitated the listening session. The Board discussed about most important health priorities for MCAH and potential solutions.</p> <p>Most important health priorities to focus on for MCAH:</p> <ul style="list-style-type: none"> - Prenatal/postpartum depression - would there be a way to disaggregate the data for those experiencing depression?

	<ul style="list-style-type: none"> - Substance use, particularly rise in opiate and fentanyl use with young people - Mental health among adolescents - Mental health stigma - Fragmented and poorly coordinated system - Mental health among immigrant newcomer communities <p>Potential solutions:</p> <ul style="list-style-type: none"> - Need for advocacy on knowing one's rights - Need for training on system navigation - Establishing a mental health task force to look at how to build a coordinated system - Clinics that are easily accessible to children and youth for their mental health and oral health needs - Extracurricular activities within the county to practice sports, take nutrition classes at low to reasonable costs - Constant education on the danger signs of pregnancy and emphasizing the right to advocate for themselves - Creating visibility so that the community knows where to access doulas, especially doulas that speak other languages - Navigators in the community that can point them in the right places - Making mental health check-ups routine, similar to physicals - Awareness of legislative updates related to health that could potentially impact certain communities - Lobbying to strongly recommend licensing boards of mental health professionals to require clinicians to receive training on perinatal mood and anxiety disorders as a continuing education component - Funding for prevention programs (e.g. teen pregnancy programs) - Connecting with the Mental Health Board to address maternal mental health and partnership opportunities to collectively move mental health efforts forward
Adjournment	The meeting was adjourned at 10:34 am by Effie Ruggles.