

Sacramento County Public Health Advisory Board

Meeting Minutes

May 1, 2019 (12:00 - 1:30 PM)

Meeting Location

Primary Care Center
4600 Broadway
Sacramento, CA 95820
Conference Room 2020

Moderator: Dr. Steven Orkand

Scribe: Theresa Vinson

Board Attendees: Jennifer Anderson, Sandy Damiano, Paula Green, Steve Heath, Farla Kaufman, Barbara Law, Steven Orkand, Jeff Rabinovitz, Phillip Summers, Kathleen Wright, Jack Zwald

Guests: Peter Beilenson, Cindy Myas

Board Members Excused: Jofil Borja, Olivia Kasirye, Christina Slee, Kimberly Sloan

Board Members Absent: Emanuel Petrisor

Guest Speakers: Liseanne Wick, MS, D. Div. Director,
Suicide Prevention & Crisis Services, Wellspace Health
Suicide Statistics and Prevention Efforts

Meeting Opened

12:00 PM

Welcome and Introductions

Dr. Orkand welcomed PHAB members, speakers, and guests.

Review of Minutes

The minutes of the April 2019 meeting were approved w/1 abstention.

PHAB Vacancies and Appointments

The Board has one opening (Felicia Bhe resigned in March); the Executive Committee is full.

Announcements

Public Health Division Update

Dr. Beilenson provided the update for the Division of Public Health

Measles

New case(s): A Ukrainian family has come to Sacramento via Los Angeles. All members are unimmunized. Three members of this family have measles. All agencies have been contacted.

Research of the number of schools with under 90% of kids immunized indicate there are fifteen schools. Dr. Beilenson spoke to Dr. David Gordon, Superintendent of Sacramento County Schools; a list of the schools was sent to him today. He will review to see if there are any common themes (i.e. charter schools, schools that are harder to get to), etc. Hopefully clinics will be set-up at those schools to give immunizations to kids needing it, and also to their younger siblings. An effort will be made during summer, prior to enrollment for the new school year to check immunization records. There is a problem with anti-vaccination groups; however, Senator Pan has introduced legislation, SB276, making it much harder to get medical exemptions since this process has been abused. Dr. Beilenson supports this bill and suggests sending a letter of support to Senator Pan, who is Chair of the Senate Health Committee.

TB

We have a case where the patient was non-compliant with taking treatment (missing doses) and was taken into custody for violating a Health Officer Order.

STDs

Recent findings indicate there is a connection between Syphilis, Opioids and Meth use.

Needle Exchange

The California Department of Public Health (CDPH) may authorize needle exchange in any jurisdiction, even without Board of Supervisor approval. This requires a request from the County's Health Officer, which has been done here. Authorization was recently granted by CDPH for Sacramento County. Harm Reduction Services can extend its services to the County. Dr. Beilenson plans to announce this to the Board of Supervisors, and hopes for their support. The City of Sacramento already has three entities that do needle exchange. We are also going to provide needle disposal boxes, to be placed in high use areas. This will probably start in June.

Primary Health Division Update

Emergency Medical Services (EMS) Proposed Programs & Fees. Programs and fees are being revised. We will send an email notice for an EMS Stakeholders Meeting when ready to review. This means the board item will be delayed. At the recommendation of the Hospital Systems we will convene an Emergency Medical Advisory Group with stakeholder representation.

Geographic Managed Care Medi-Cal (GMC).

The State is acknowledging the complexities of this program.

Their plans include a Managed Care Procurement for all plans in 2020. They could have less plans but not lower than three. Two other major areas of focus include Quality and Network Adequacy.

Quality the metrics were changed again for measurement year 2019 (calendar year) with sanctions starting in 2020. The plans have not had time to ramp up with all the changes. Sanctions now posted: Healthnet received a \$335,000 sanction, their commercial plan is located in several counties, including Sacramento. A local initiative, Health Plan of San Joaquin had a \$135,000 sanction. There is one other plan under sanction, but they are under appeal so it is not public.

Network adequacy ensures adequate providers/types based on population. Many County Mental Health plans have received financial sanctions for inadequate networks. This does not include Sacramento.

Locally, Dr. Richard Pan, Senator, and Dr. Peter Beilenson, Director of Health Services (DHS), have convened local stakeholders on GMC Managed Care. The second of three convening's was held and this time the invitation extended to members of the Medi-Cal Managed Care Advisory Committee including health plan, physician representatives, IPAs, etc. Key priorities included access to care (primary care, specialty, mental health, and alcohol & drug services), physician recruitment/participation, and services to the uninsured. There will be a paper issued prior to the third meeting which is expected to be held in late June.

PRESENTATION

Suicide Statistics and Prevention Efforts - Liseanne Wick, MS, D. Div. Director, Suicide Prevention, Wellspace Health

The 24-Hour Suicide Prevention Crisis Line services in California is 50 years old, and started in Sacramento, serving 50 out of 58 counties. Wellspace has dual accreditation nationally through the American Association of Suicidology and the Joint Commission on Behavioral Health. They are the Regional provider for the National Suicide Prevention Lifelines serving as primary and/or back up for 50/58 counties in California. Calls are routed based on the area code of your phone number. Wellspace Health is the provider with a national Spanish lifeline serving California and the nation. In the Crisis center there are several different languages being spoken and interpreters are available via the language support line.

A Maternal Support Line is available for moms who have had a positive screening for perinatal mental health disorders, they can be referred for an assessment and emotional support to help them through the pregnancy. At the Crisis centers, chat and texting services are offered for help. A person can text 'Help' to 916.668.iCAN, and it will go the call center computer or they can go to: www.suicideprevention.wellspacehealth.org to chat.

In Sacramento County there is a great collaborative, through County Mental Health called Supporting Community Connections. It is a wide variety of different cultural groups, all addressing suicide prevention in their own individual ways. Currently, there are nine agencies involved in this effort. The suicide prevention program, through WellSpace Health, serves as the subject matter expert, and also receives funding for the hotline through that collaborative.

Early upstream confidential free anonymous mental health screenings are available via the website. Users can be assessed for depression, bipolar disorder, substance abuse, anxiety, PTSD, Psychosis. This is not for diagnosis, but it can help an individual identify or match symptoms to any of these conditions, and suggest they could benefit by going to a facility or seeing a mental health physician. The website will also give them handouts that provide great information about where to seek help, how to deal with certain conditions, and provide hotline numbers they can call.

Innovative Emergency Department (ED) Follow-Up Program (post discharge)

One service provided at the Sacramento crisis center, via a small grant, is ED follow-up for individuals who are hospitalized or evaluated for either suicide ideation or an attempt. Regardless of where they are discharged to, they are offered 30 days of healthy follow-up with Sutter Hospital. Sutter picked up the program and began providing the same service. They began providing support for WellSpace to be able to provide this service at all Sutter sites in Sacramento as well as Amador, Placer and Yolo. They are provided 30 days of telephone support which includes risk assessment and monitoring for ideation – 10-20% of follow-up patients still have ongoing ideation at that time, which is exactly why it's done; going home does not necessarily equate to no longer being 'at risk.'

Primary Care Follow-up Program (for suicidal patients at WellSpace)

When a patient comes in to any of the WellSpace 34 sites, for adults they all receive a PHQ9 screening (for adolescents it's PHQ9-A). If they are positive, then a referral is made, which offers 30 day telephone follow-up, same as the risk assessment, ongoing monitoring, and additional referrals, and there is always the option of connecting with their providers. The idea is to bridge the gap between the initial visit, and when they actually see a clinician. There will be a face-to-face evaluation when they come in, but this is in support of that first therapy appointment; which builds a safety net. WellSpace is the only group doing this in the nation. This program is approximately five years old.

Outreach Presentations and Materials.

Community based Trainings (generally done by request and is free of charge).

POST (Police Officer Standard Training) Academy to create training for Law Enforcement & Dispatchers in California in handling suicidal contacts/callers – this program is new and just launched in April 2019.

CIT (Crisis Intervention) Training for Sacramento City PD.

Wellspace is part of a California Network of Suicide Prevention Crisis centers. Wellspace is not the only crisis center in California, but it is one of the largest. Benefits to being part of the network include; consistency among centers, adherence to national standards, best practices, and advocacy.

Public Comment – there was none.

The meeting was adjourned at 1:30 PM

Submitted by Steven Orkand, Chair