

Sacramento County Public Health Advisory Board

Meeting Minutes

September 4, 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, Olivia Kasirye, Barbara Law, Steven Orkand, Emanuel Petrisor, Jeff Rabinovitz, Christina Slee, Phillip Summers, Kathleen Wright, Jack Zwald

Guests:

Richard Bauer, Liz Blum, Pam Harris, Niki Jones, Asantwaa Boykin, MacKenzie Wilson
Carolyn Rueben

Board Members Excused:

Jofil Borja

Board Members Absent:

Guest Speakers:

Sandy Damiano, PhD, Deputy Director
Sacramento County – Primary Health Division
Adult Correctional Health Overview

Meeting Opened

12:00 PM

Welcome and Introductions

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

Review of Minutes

The minutes of the August 2019 meeting were approved w/ one correction and two abstentions.

PHAB Vacancies and Appointments

Two opportunities are open, interviews have been held and appointments are anticipated soon. The Executive Committee is full.

Announcements and Information

PHAB Meeting Date Change 2020

A vote was taken to move the January 2020 meeting from January 1 to January 8 – vote passed with no abstentions.

Women, Infants & Children (WIC)

Dr. Damiano distributed a copy of the 2019 Sacramento County Department of Health Services WIC Report. This report is also posted on the website at https://dhs.saccounty.net/PRI/Documents/WIC/WIC%20Report%202019_FINAL.pdf
A presentation of this report is scheduled for the Public Health Advisory Board in January 2020.

Sacramento County Emergency Medical Services (EMS)

A report is due out soon and copies will be provided to the Public Health Advisory Board.

Public Health Division Update

Serratia Infection: A local hospital reported thirteen (positive) individuals were admitted and treated for serratia, a bacteria generally found in contaminated water, however the hospital has been unable to confirm the source. Some of these patients were in the hospital for cardiac procedures, so were very sick. This is a high number for a single hospital. In the literature, serratia has been attributed to people with fake nails or poor handwashing habits. An inspection of the hospital is being scheduled with the California Department of Public Health (CDPH), and these cases are being tracked.

Mycobacteria: A second hospital, found a mycobacteria, Mycobacterium fortuitum (a cousin of TB). Mycobacterium fortuitum does not cause TB, but can cause some respiratory problems. This is generally, not reportable however, eight cases were diagnosed so it was reported to the County. Public Health is working with the hospital to identify the source; water testing and environmental testing has gone forward, but there is nothing positive to report as of now.

Mercury in skin cream: Public Health participated on a call today with the State regarding a Sacramento resident using skin cream formulated for skin lightening and/or removing spots. It is widely known that when these creams are made (especially homemade or adulterated products), it could be contaminated with lead or mercury. Usually the mercury is in a salt form, which can be removed from the body through chelation. Methylmercury was found, and this is a much more potent and dangerous form of mercury. This is the first time this mercury is known to have appeared in the U.S. The Center for Disease Control (CDC) and State is involved and we are developing a plan to conduct outreach as it is going to take some work to make sure there are no more of these products out there. This patient presented at the hospital with severe symptoms, and is in a coma and currently unable to communicate.

PRESENTATION

**Adult Correctional Health Overview – Sandy Damiano, PhD, Deputy Director
Primary Health Division**

Copies of the Power Point Presentation were distributed. See attachment.

There are two adult jails; (Main Jail – downtown / Rio Consumnes Correctional Center (RCCC) - South Sacramento). The buildings are old and not designed for health care or mental health care. There are places in the jail that also need to be updated for compliance with the Americans with Disabilities Act (ADA), as well as privacy concerns for interviews and

exams. Building changes are in process for both buildings with different target dates. RCCC new building will not house all health/behavioral health services. Some will remain in the existing buildings. The Main Jail Annex will be located in the parking lot (behind the jail) and will include a new booking area and floors for health care and mental health care. It is loosely targeted for 2022-2023. Some areas in the jails are not functional and cannot be corrected which is why there is an expansion.

Over the years Criminal Justice reforms have changed the jail population. Some of these include realignment (legislation transferred responsibility for some adult offenders from the State to the Counties. This means jails are taking some inmates that would normally go to prisons and they have longer sentences than the traditional jail population. Prop 36 (2012) revised the three strikes law, Prop 47 (2014) reclassified certain drug and property offenses from felonies to misdemeanors, Prop 57 (2016) expanded parole for non-violent offenders; and as of October 29, 2019, Senate Bill (SB) 10 eliminates cash bail which will have significant changes for the jail. As a result of reforms, the jail population has changed and treatment needs have changed. Some of the patients are in the jails for longer sentences and counties are required to provide more health care and behavioral health services. The jails were not designed for this so numerous changes are needed. In addition to all of the work designed to improve services within the jails, the County is also working on several initiatives to reduce the jail population. There are alternatives to jail, diversion programs (misdemeanors/felonies), and some new programs starting soon (Probation Pretrial Diversion and Felony IST Diversion). A consultant is working on a regional feasibility study for a separate facility / program to serve adults who are incarcerated with mental illness.

This population has a disproportionate use of emergency department care. Also has very high rates of serious mental illness, substance use disorders and chronic health diseases compared to the general population. There are high rates of poverty, unemployment, homelessness, and low-health literacy. This population largely became eligible for Medi-Cal in 2014 during the Affordable Care Act but does not really know how to use organized delivery systems for health care system. In general, these service delivery systems are complex and can be difficult for people to navigate. There are separate delivery systems for physical health care, County mental health specialty, and County alcohol & drug services. Medi-Cal Managed Care has five health plans for physical healthcare.

There are a range of services provided at the jails including physical health care, mental health care, substance use disorders services, dental, pharmacy, and ancillary services.

Physical Health Care: primary care, chronic disease management, specialty services (onsite and offsite), pharmacy services, ancillary (laboratory, x-ray), emergency services/inpatient hospitalization (off site) and dental (on site). All provider appointments require custody escorts. County provides primary care, pharmacy and dental. All other services are contracted.

Mental Health: The County works in partnership with University of California, Davis (UCD) Department of Psychiatry. These are contracted on site services. There is an 18-bed acute psychiatric unit, one 20 bed Intensive Outpatient Program (IOP) for males, Outpatient Psychiatric Pod, medication monitoring, crisis services, and a Jail Based Competency Program. The latter program is contracted with the State for those deemed incompetent to stand trial. State hospital beds are backlogged so we are providing some of those services. Two more IOP programs will open late October (15-bed female; 24-26 bed male). These will help improve access.

Alcohol and Drug Services (ADS): There are some limited ADS services on site such as detoxification or SSD programs (support/education groups). Medication Assisted Treatment (MAT) has been targeted at pregnant women and some of the sentenced population that is in the Sacramento Sheriff's Department (SSD) Re-entry program participate and are started on Vivitrol. This is a collaboration with SSD, Correctional Health and WellSpace. Prior to release they receive 1 – 2 injections and work with WellSpace during and post incarceration. There is a small amount of Vivitrol treatment for alcoholism. We are participating in a MAT Learning Collaborative for jail based care. This is in the very early stages of development. There are about 29 counties participating.

Legal: County and Plaintiffs in a recent lawsuit have reached agreement about jail conditions. The county litigation followed lawsuits against the State of California (Department of Corrections and Rehabilitation), which had lawsuits on medical, dental, mental health, and ADA. Several counties have been sued and reached settlement, and some have not. This is taking place throughout California and nationwide, and is not unique to Sacramento County.

Will provide periodic updates as we work on a multi-year plan to improve service delivery.

Note: Primary Health also provides health care services to youth at the Youth Detention Facility (YDF). Probation has oversight of YDF operations.

Public Comment

Guest, Carolyn Rueben, informed PHAB that she will be a guest speaker at the California Association of Collaborative Courts re meth use at end of October. Carolyn stated she would like to present to PHAB her expertise and what she knows about treating meth use with nutritional supplements. Carolyn stated Dr. Stephen Schoenthaler is a Professor of Criminal Justice and Sociology at the California State University Stanislaus, and has done 30 years of research that is published in medical literature, and reported in various places about the connection in prisons, jails and juvenile detention facilities, and how within 3 days the administration has seen a difference in behavior of the offenders with nutritional change.

The meeting was adjourned at 1:30 PM - Submitted by Steven Orkand, Chair