

**Sacramento County  
Public Health Advisory Board**

**Meeting Minutes**

June 2<sup>nd</sup>, 2021, 12:00 PM - 1:30 PM

Recording can be found here: <https://www.youtube.com/watch?v=OjM8UCSFO2M>

**Meeting Location**

Zoom Meeting (Open to the Public)

**Moderator:**

Tina Slee (Standing in for Farla Kaufman)

**Scribes:**

Gabrielle Ortiz

**Board Attendees:**

Tina Slee, Larissa May, Farla Kaufman, Sonal Patel, Libby Abbott, Steve Heath, Annie Tat, Barbie Law, Ashley Sterlin, Sandy Damiano (ex-officio) Dr. Kasirye, (ex-officio)

**Board Members Excused:**

Jofil Borja

**Meeting Opened:**

12:05 PM

**Welcome and Introductions:**

Tina Slee welcomed everyone to the meeting and outlined the goal of our time together. Chevon Kothari, Director Department of Health Services, was introduced.

**Review of Minutes:**

Minutes of the April 7<sup>th</sup> Meeting 2021 were approved as submitted.

Minutes of the Special April 21<sup>st</sup>, 2021 Meeting on the Board of Supervisors letter were approved as submitted

Minutes of the May 5<sup>th</sup> Meeting 2021 were approved as submitted

Appointment request for Jacob Bradley-Rowe to the HIV Health Services Planning Council was approved

**Guest Speaker – Andrew Mendonsa, Pys. D., MBA**

Tina introduced Andrew Mendonsa. Andrew is a Health Program Manager with County of Sacramento Behavioral Health Services – Substance Abuse Prevention and Treatment.

Andrew's presentation gave a high level overview presentation to the board of the continuum of care for substance users in Sacramento County during COVID-19 and beyond. Andrew Mendonsa introduced Lori Miller, Divison Manager of Substance Abuse Prevention and Treatment Unit, who will be assisting in the presentation.

An overview of Andrew's presentation can be found by clicking on the PDF link below:



SUPT Overview  
(6-1-2021).pdf

Farla: What do you feel is the biggest challenge you face overall? Are people able to get into treatment programs when they need? Do you feel that you are able to get people the care they need?

Andrew: About 80% of the continuum of care is treatment on demand. People can get in right away – same day requests. We have need in some of our high level services of care, such as residential and withdrawal management where we do need some expansion. We are continuing to seek out providers. We are working diligently to expand in those areas in our system.

Farla: Are some individuals in correctional health able to be diverted from some of the courts programs so that they are not in the jails and instead in these programs that are available? Is anyone who is deemed able, diverted from the jail able to get serviced from these programs? Is the judicial system utilizing the programs as much as they can to divert individuals into rehabilitation instead of being incarcerated?

Andrew: Absolutely, we have a presiding meeting with our presiding judges and the bench and we are constantly informing them of our services so they know what we have to offer. The judges continuously utilize these programs if they think there is a good opportunity for the case to be referred to us. We always say “when in doubt refer, and we can always educate you if there is a reason that we can’t help, but most of the time we can help.”

Lori: We know that there are some great programs in the jail and we want to recognize those programs. People are getting more help while they are in custody and those who are working with the DA or public defender, those are the ones referred into our collaborative court.

Tina: How do you prioritize methamphetamine users? I see in these federal priorities that there is an emphasis on injection drug use but it’s not apparent to me how methamphetamine fits in amongst those priorities.

Lori: Certainly meth is the number one abused substance here in Sacramento County so I see your point. There are lots of times where people are poly-substance users and that’s where we are prioritizing that. The federal priorities are not set by the County of Sacramento, they are set by the federal government. We would certainly prioritize meth users if we were able to, but they are getting prioritized to the top of the list due to the poly-substance abuse or high risk factors.

Tina: What’s the philosophy of your programs? Does the user have to agree to abstain from use or do you use more of a harm reduction approach?

Andrew: We utilize harm reduction. We do not have an abstinence approach. Our harm reduction providers recognize that relapse happens and that’s a normal part of recovery. Kicking out an individual because they relapsed would not be something we embrace from a philosophical standpoint. Our providers embrace the harm reduction method.

Steven: I appreciated your comments about prevention. How is your program tackling the legalization of marijuana and the issue of vaping?

Lori: With the legalization of marijuana, most of our programs our focused on underage use of alcohol and marijuana use. We have some decline in rates with the youth with our prevention programs from the data we receive from the school systems.

**Update from PHAB Working Committee – Libby Abbott**

Currently setting up a series of stakeholder interviews with members from the jails to see what the COVID19 situation is in jails with the consent decree and the oversight mechanism. Committee has a call set up with Rick Heir, county council, and a few other advocates. Libby is asking if anyone would like to join or suggest anyone who wants to join. Participation and suggestions is welcome.

**Committee Executive Member Nominee – Larissa May**

Dr. Larissa May approved to Executive PHAB committee

**Public Comment**

Tina: Do we have any public comments?

Public: Thank you Larissa for joining the PHAB committee

**Adjournment**

The meeting was adjourned at 1:17PM

Submitted by Gabrielle Ortiz, scribe