

**Sacramento County  
Children's System of Care Committee**

**MINUTES – TELECONFERENCE MEETING  
June 23, 2022, 4:00PM – 6:00PM**

Members Present: Silvia Rodriguez, Ann Arneill, Jasmine Morales (staff: Glenda Basina)  
Members Absent: Lourdes Santana-Sanchez

AGENDA ITEM
<p>1. Welcome, Introductions and Purpose, Silvia L. Rodriguez, Chair</p> <ul style="list-style-type: none"><li>• Chair Rodriguez convened the meeting at 4:04pm, provided background and purpose for the day's meeting agenda; presentations on 3 points of disconnect with focus on 3 questions.</li></ul>
<p>2. Legal Aid of Northern California - Liza Thantranon, Regional Counsel</p> <ul style="list-style-type: none"><li>• Liza introduced herself and provided background on their organization, for families with trouble accessing school-based system. She covers 32 counties in California. Spoke from her experience on the 32 counties she work with, not specifically Sacramento. Issue is the same with difficulties in referrals. People call them when they have problems. Works with families with kids with mental health. Lots of coordination issues with county and managed health plans. Having multi-players become a game of hot potato; kids being sent back/forth between systems. Every county has an MOU with Medi-Cal. Also legal requirements for person to get MH services while parties dispute resolution is happenng. Usually person goes without MH services until it's resolved.</li><li>• Had a case where a client was having an acute mental health episode, called her county and was denied because they had no service available. No assessment was done by the county, just no service. This should not have been denied. If the service is unavailable, it is the County's responsibility to find them one.</li><li>• Another is consumers are being informed of limited amount of appointment for services. Keeping people from accessing services.</li><li>• Need robust community education of what services are available and how to access. Need someone to help navigate through the various systems until they get care. There needs to be a more robust referral system. Process is so complicated that people give up.</li><li>• If any questions, contact her at <a href="mailto:LThantranon@LSNC.net">LThantranon@LSNC.net</a>.</li></ul>
<p>3. River Oak Center for Children - Laurie Clothier CEO and Mary Bush, Director of Youth Advocacy</p> <ul style="list-style-type: none"><li>• Laurie shared powerpoint slides with information on their organization and the services they provide.</li><li>• Response to the 3 questions;<ul style="list-style-type: none"><li>○ Helping parents to keep first appointment - Receives referral, contacted and connected to agency the same day. As time lapses, engagement is not as viable; problems working with ACCESS and what can be done, parents/caregivers unable to get to them funneled to a different provider.</li><li>○ Barriers to remove barriers in accessing - Allow service to occur on campus and have streamlined approval/access points. Working out clearances, streamlining process to provide services at the campuses.</li><li>○ Disconnects – 1, if school personnel makes the referral, parents does not realize the referral has been made or may not be open to the referral when Access calls them. 2, school instructs the parent that child needs MH services, the parent may not follow through in contacting the Access</li></ul></li></ul>

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team. 3, if Access team determines the child is eligible, the parent/child may not follow through and attend the appointment.

- Found Telehealth is more effective for some.
- Member Arneill asked about communicating when families get calls from blocked/unknown callers, they may not want to take the calls. Per Mary, they do texting. Member Arneill asked if appointment times are texted as this is better. There's a record. Per Laurie, they're now using ClickSoft a HIPAA app-based system but families would need to download the app. ACCESS does not identify due to HIPAA. Per Mary, has seen a lot of emailing as a communication since Covid.

#### 4. La Familia Counseling Center - Rachel Rios, Executive Director and Jessica Armenta

- Rachel shared powerpoint slides with information on their agency and the services/programs they provide - A behavioral health provider for children.
- On disconnect questions. Parents did not realize children are being referred to mental health. This is not okay. There should be a dialogue so parents aren't surprised and have understanding. Schools need to know the services available.
  - Continue engagement.
  - A resource directory for schools.
  - Have someone to connect in the language families understand for success in engagement.
  - Give the family space and follow up. Maybe not ready yet but to keep the connection. Member Arneill asked amount of time case normally stays open or closes case. Per Jessica, an average of 8 months depending on medical needs.
- Upon receipt of referral, connects to a clinicians within 3 days with family's flexibility to choose. Families love the texting reminders.
- When parents doesn't want to engage, has programs with mentors. When families feel connection/trust, more willing to participate in MH services. Have counseling services for children. Clinicians that provide various MH cares/counseling. Have youth mentors that are at the same age level.
- A lot of referrals/walk-in. No wrong door approach, connecting people to appropriate services.
- Seeing a lot of serious cases and working with counties. Shortage of mental health clinicians. "Grow our Own", taking interns and growing them but challenged in keeping them with salaries offered outside.
- Supports navigation and warm handoff.
- Mixed success with Telehealth. Worked for some but not others. Some want one on one in person. Now a little bit of both.

#### 5. Public Comment

- None. No members of the public present.

#### 6. Adjournment

- Chair Rodriguez adjourned the meeting at 5:50pm.