



**ANNUAL REPORT ON THE
SACRAMENTO COUNTY MENTAL HEALTH BOARD**
Calendar Year 2019

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Executive Summary

The Sacramento County Mental Health Board (MHB) is fulfilling its mission regarding children with serious emotional disturbances and adults with severe mental illness. Its activities are guided by its statutory mandate. It is comprised of consumers, family members, public interest representatives, and a Board of Supervisors representative. This diverse membership guarantees that multiple perspectives are included in the work conducted by the MHB.

The MHB has had many accomplishments in 2019. It participated in the hiring of the new Behavioral Health Director, Ryan Quist, Ph.D.; conducted the Mental Health Services Act Public Hearing; wrote reports; testified at Board of Supervisors hearings; amended its Bylaws; and trained its new members on their roles and responsibilities. It has successfully completed its six goals for 2019 related to community outreach; the homeless population; the Sacramento Maternal Mental Health Collaborative; and advocacy for mental health services for children and youth, adults, and older adults. In its advocacy for these target populations, the MHB identified unmet needs and developed recommendations to meet those needs. In addition, the MHB has apprised itself of many important programs in the community through the presentations it has had at its General Meetings throughout the year.

The MHB has extensive representation on Behavioral Health Services committees and has liaison relationships with other committees and community-based organizations. These relationships provide opportunities to share the viewpoints the MHB and to ensure that the MHB is informed of the policies adopted by these entities and of trends in the community.

MHB Mission

The mission of the Sacramento County Mental Health Board (MHB) is to enable children with serious emotional disturbances and adults with severe mental illness to access services and programs that assist them, in a manner tailored to each individual, to better manage their illness, to achieve their personal goals, and to develop skills and supports leading to their living the most constructive and satisfying lives possible in the least restrictive available settings.

MHB Statutory Mandate

The statutory mandate for mental health boards is found in Section 5604.2(a) of the California Welfare and Institutions Code (WIC):

(a) The local mental health board shall do all of the following:

(1) Review and evaluate the community's public mental health needs, services, facilities, and special problems in any facility within the county or jurisdiction where mental health evaluations or services are being provided, including, but not limited to, schools, emergency departments, and psychiatric facilities.

(2) Review any county agreements entered into pursuant to Section 5650. The local mental health board may make recommendations to the governing body regarding concerns identified within these agreements.

(3) Advise the governing body and the local mental health director as to any aspect of the local mental health program. Local mental health boards may request assistance from the local patients' rights advocates when reviewing and advising on mental health evaluations or services provided in public facilities with limited access.

(4) Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process. Involvement shall include individuals with lived experience of mental illness and their families, community members, advocacy organizations, and mental health professionals. It shall also include other professionals that interact with individuals living with mental illnesses on a daily basis, such as education, emergency services, employment, health care, housing, law enforcement, local business owners, social services, seniors, transportation, and veterans.

(5) Submit an annual report to the governing body on the needs and performance of the county's mental health system.

(6) Review and make recommendations on applicants for the appointment of a local director of mental health services. The board shall be included in the selection process prior to the vote of the governing body.

(7) Review and comment on the county's performance outcome data and communicate its findings to the California Behavioral Health Planning Council.

(8) This part does not limit the ability of the governing body to transfer additional duties or authority to a mental health board.

(b) It is the intent of the Legislature that, as part of its duties pursuant to subdivision (a), the board shall assess the impact of the realignment of services from the state to the county, on services delivered to clients and on the local community.

The composition of mental health boards is also specified in statute in WIC Section 5604(a)(2). It is to have 50% consumers (persons with lived experience of mental illness) or the parents, spouses, siblings, or adult children of consumers. At least 20% shall be consumers, and at least 20% shall be family members of consumers.

MHB Membership

The table below includes MHB members by appointment category and Board of Supervisor district as of April 16, 2020.

- District 1: Phil Serna
- District 2: Patrick Kennedy
- District 3: Susan Peters
- District 4: Sue Frost
- District 5: Don Nottoli

| Member | Appointment Category | District |
|----------------------------|----------------------|----------|
| Ann Arneill, Chair | Consumer | 1 |
| Maria Padilla-Castro | Public Interest | 1 |
| Loran Sheley | Family Member | 1 |
| Laura Bemis | Consumer | 2 |
| Supervisor Patrick Kennedy | Board of Supervisor | 2 |
| Caroline Lucas | Family Member | 2 |
| Mike Nguy | Public Interest | 2 |
| Vacant | Consumer | 3 |
| Viva Asmelash | Family Member | 3 |
| Dan Niccum | Public Interest | 3 |
| Bryan Richter | Family Member | 4 |
| Bradley Lueth | Public Interest | 4 |
| Vacant | Consumer | 4 |
| Theresa Riviera | Family Member | 5 |
| Silvia Rodriguez | Public Interest | 5 |
| Mark Hoover | Consumer | 5 |
| Supervisor Don Nottoli | Alternate | 5 |

MHB General Meeting Date and Location

The MHB meets the first Wednesday of every month from 6:00 p.m. to 8:00 p.m. at the County Administration Building at 700 H Street, Sacramento, CA 95814.

MHB Standing Committees

MHB Budget Committee

MHB Members: Ann Arneill, Viva Asmelash, Mike Nguy, Silvia Rodriguez

Purpose: To advise the MHB on budget concerns and to provide recommendations for consideration by the MHB.

MHB Executive Committee

MHB Members: Ann Arneill, Chairperson; Immediate Past Chairperson (vacant); Bryan Richter, Vice-Chairperson; Dan Niccum, Public Information Secretary; Maria Padilla Castro, At-large Member; Mike Nguy, At-Large Member

Purpose: To prepare an agenda for the retreat and to carry out any responsibilities delegated to it by the MHB for any activities that do not require approval of the full MHB. To fulfill the MHB's responsibilities only when sensitive matters arise and urgent response is required but the entire MHB cannot be convened. These actions must be approved by the MHB at a subsequent meeting.

MHB Accomplishments 2019

- Chairperson Ann Arneill participated in a hiring panel interview for the new Behavioral Health Director in February 2019 as required by WIC Section 5604.2(a)(6)
- The MHB conducted Public Hearings on the Draft Mental Health Services Act Fiscal Year 2018-19 Annual Update at the March 6, 2019 meeting and on the Draft Mental Health Services Act Fiscal Year 2019-20 Annual Update at the December 18, 2019 meeting
- The MHB developed a report, "Mental Health Board Recommendations for Expenditure of Mental Health Services Act Funds," and submitted it in June 2019 to Behavioral Health Services (BHS) and in August 2019 to the Board of Supervisors. The report can be accessed at <https://dhs.saccounty.net/BHS/Documents/Advisory-Boards-Committees/Mental-Health-Board/MHB-Reports-and-Workplans/RT-MHB-Spending-Recommendations-for-MHSA-Funds-2019.pdf>. To implement Goals 4-6 for 2019, the MHB created committees for children and youth, adults, and older adults. These committees met from March 2019 through June 2019 with BHS staff and community experts to identify unmet needs for the target populations and develop program recommendations to meet those needs. (See the section on the Status of MHB Goals 4-6 for 2019 for the recommendations)
- Chairperson Ann Arneill conducted Roles and Responsibilities training in July 2019 for new members
- The MHB amended Article IV, Section 2 of its Bylaws at the May 2019 meeting to reflect current statutes so that board members who are employees or paid members of the governing body of a county mental health contracting agency may be appointed to the board provided they do not have any interest, influence, or authority over any financial or contractual matter concerning their employer
- Chairperson Ann Arneill testified at the Board of Supervisors meeting on August 6, 2019 in support of BHS's proposal to allocate unspent Mental Health Services Act (MHSA) funds
- The MHB approved a report, "Performance of the County's Mental Health System," in October 2019 developed to comply with WIC Section 5604.2(a)(5). The report can be accessed at <https://dhs.saccounty.net/BHS/Documents/Advisory-Boards-Committees/Mental-Health-Board/MHB-Reports-and-Workplans/RT-MHB-Performance-Report->

[2019.pdf](#). Chairperson Ann Arneill testified about the report at Board of Supervisors meeting on December 17, 2019. The report addressed the following aspects of system performance:

- ✓ Outpatient Services, including Timeliness and Client Satisfaction
 - ✓ Crisis Services, including the Mental Health Treatment Center Intake Stabilization Unit, Mobile Crisis Support Teams, and Mental Health Triage Navigator Program
 - ✓ Inpatient Services
 - ✓ MHS Full Services Partnerships Outcomes
 - ✓ Capacity of Services
 - ✓ Penetration Rates
 - ✓ Retention Rates
 - ✓ Human Resources
- The MHB completed the 2018 Data Notebook “General Survey of Services” as required by WIC Section 5604.2(a)(7) and approved it at its November 6, 2019 meeting. The Data Notebook is a requirement of the California Behavioral Health Planning Council for gathering information on performance data from county mental health programs and for obtaining interpretation of that data from local mental health boards
 - Three MHB members attended the Annual Mental Health & Aging Conference in November 2019
 - Chairperson Ann Arneill attended three stakeholder meetings to recruit new mental health board members
 - The MHB sent out letters to community-based organizations to recruit consumers and family members to apply for mental health board membership

MHB Annual Retreat

The MHB held its Annual Retreat on February 2, 2019 at the Grantland L. Johnson Center for Health & Human Services from 10:00 am – 2:00 pm. The MHB Goals for the 2019 calendar year were established

Status of MHB Goals for 2019

Goal 1: Community Outreach

Educate community members on the role of the MHB

- Meeting announcements and agendas for monthly MHB General Meetings are distributed by email to approximately 100 recipients consisting of community members, contracted service providers, and other system partners
- Monthly meeting agendas are posted on the County MHB website, at the Sacramento County Mental Health Treatment Center, the kiosk at 700 H Street, and the lobby of the Grantland L. Johnson Center for Health & Human Services
- An MHB member staffed an information table at the Peer Empowerment Conference on June 14, 2019. MHB brochures and applications were distributed to community members and mental health consumers in attendance

Goal 2: Homeless Population

Advocate for mental health services for the homeless

- Presentation on No Place Like Home (Proposition 2) was given at the January 2019 MHB General Meeting
- Presentations on County Homeless Initiatives, County Homeless Plan, and BHS Homeless Mental Health Services were given at August 2019 meeting
- Presentation on Whole Person Care, City of Sacramento, at September 2019 Meeting
- Maria Padillo Castro met with Cindy Cavanaugh, Director, Homeless Initiative, County of Sacramento, and Sheri Green, LMFT, Health Program Manager, BHS, to receive a briefing on the status of county services and programs and updated the MHB

Goal 3: Sacramento Maternal Mental Health Collaborative

Advocate for funding for the Sacramento Maternal Mental Health Collaborative mission

- Referred this goal to the Ad Hoc Adult Committee created to implement Goal 5

Goal 4: Children and Youth

Advocate for mental health services for children and youth

- Created Ad Hoc Children and Youth Committee
 - ✓ Goal: Increase satisfaction with psychiatric crisis services and reduce out-of-county placements
Recommendation: Establish Children's Crisis Residential Program using MHSA Community Services and Supports (CSS) funds
 - ✓ Goal: Prevent onset of serious behavioral disorders in children and reduce expulsions from pre-school and childcare for children age 0-5
Recommendation: Expand early childhood mental health consultation services provided to pre-schools and childcare providers using MHSA Prevention and Early Intervention (PEI) funds
 - ✓ Goal: Prevent the development of serious emotional disturbances in children in future years
Recommendation: Expand screening and referral services for children age 0-5 who have developmental and behavioral problems using MHSA PEI funds

Goal 5: Adults

Advocate for mental health services for adults

- Created Ad Hoc Adult Committee
 - ✓ Goal: Increase the number of Board and Care beds and mental health services for consumers in Board and Care facilities
Recommendation: Establish an Augmented Care and Treatment Program using MHSA CSS funds
 - ✓ Goal: Increase services for maternal perinatal depression
Recommendation: Establish a MHSA Early Intervention and Prevention Program for maternal perinatal depression

Goal 6: Older Adults

Advocate for mental health services for older adults

- Created Ad Hoc Older Adults Committee

- ✓ Goal: Reduce isolation and loneliness experienced by older adults
Recommendation: Increase MHSA PEI funding for programs that help to reduce isolation and loneliness in the lives of older adults.
- ✓ Goal: Reduce homelessness among older adults with serious mental illnesses
Recommendations: BHS should allocate some of the new 87 units funded by the No Place Like Home grant for older adults with serious mental illness experiencing homelessness
Sacramento County's Homeless Initiatives and BHS Homeless Services should increase outreach to older adults with serious mental illness experiencing homelessness

Presentations Made at MHB General Meetings

January Meeting

No Place Like Home—Cindy Cavanaugh, Director, Homeless Initiatives, County of Sacramento

This program makes \$2B in bond funding from the State available for permanent supportive housing for persons with serious mental illness in need of mental health services and/or substance abuse services for persons who are homeless or at risk of homelessness. The County is submitting applications for two additional projects for these funds for a total of 87 beds.

February Meeting

Crisis Residential Programs—Leslie Springer, Regional Director, Turning Point Community Programs

A crisis residential program (CRP) is a comprehensive, short-term residential program that provides a less restrictive alternative to hospitalization for adults experiencing a mental health crisis who requires 24-hour support in order to return to community living. CRPs empower clients to become agents of change in their own recovery. Services provided are time-specific, member-focused, strength-based, and routinely avert the need for hospitalization.

August Meeting

Homeless Solutions in Sacramento County-- Cindy Cavanaugh, Director, Homeless Initiatives, County of Sacramento

The 2019 Point-in-Time Count identified 5,570 homeless individuals in the county. The County has a variety of homeless initiatives for developing housing. It has strategies to expand shelters, develop a flexible housing pool with supportive services, and other strategies to improve the homeless system. The County also has a Homeless Plan that describes the problem, inventories existing efforts and partners, describes current resources and gaps, and lays out plans to address unmet needs.

Behavioral Health Services for Persons Experiencing Homelessness—Sheri Green, LMFT, Health Program Manager, BHS

People experiencing homelessness access a variety of services, including individual and group therapy, medication support, case management, psycho-social rehabilitation, and supportive housing. There are multiple walk-in access points in the community in

addition to calling the Access Team and the Community Support Team. BHS has built 161 housing units in 8 projects and has an additional 102 units coming on line. Many other housing supports are available, such as rent gap payments, master leases, security deposits, credit repair, and utilities assistance.

September Meeting

Whole Person Care: Pathways to Health and Home—Emily Halcon, Homeless Services Coordinator, City of Sacramento

Whole Person Care (WPC) is a statewide pilot for vulnerable Medi-Cal patients to improve health outcomes and reduce utilization of high cost services. Its goal is to align services with homeless Point-in-Time Count needs, integrate WPC with existing resources, and use WPC to leverage funding and programs to increase capacity throughout the entire homeless system of care.

BHS Committee Membership and Liaison Activities

MHB members serve as members of BHS committees and as liaisons to BHS committees and to community-based organizations. These members provide the MHB perspective on the committees on which they are members, and they report back to the MHB on the important policies discussed and adopted by these committees. The liaisons to committees and community-based organizations monitor the activities of these entities and report back to the MHB so that it can stay abreast of those activities and concerns in the community.

BHS: Mental Health Services Act Steering Committee

MHB Member: Ann Arneill; Alternate: Mike Nguy

Purpose: Makes recommendation to BHS for MHSA programs and funding by:

- Engaging clients, family members, and other community stakeholders to develop MHSA plans;
- Reviewing and ranking proposals developed with stakeholder input; and,
- Making specific program recommendations consistent with MHSA goals, guidelines, and requirements.

BHS Quality Improvement Committee

MHB Member: Ann Arneill

Purpose: The Mental Health Plan (MHP) Quality Improvement Committee (QIC) is chaired by the MHP Quality Management Program Manager. The QIC meets on a monthly basis. It includes consumers; family members; representatives of the contracted service provider system; Mental Health Access Teams; Research and Evaluation, Quality Management; Cultural Competence; psychiatry; pharmacy; and Alcohol and Drug Services Unit. The QIC structure is the umbrella for standing subcommittees, ad hoc subcommittees, and/or workgroups that are developed to meet the changing needs of the MHP. Subcommittees report to the monthly QIC meetings where information is reviewed and comments are received from all parts of the system. These deliberations result in approval, new initiatives, and recommendations for new directions and constitute a critical communication forum for the MHP.

BHS Cultural Competence Committee (CCC)

MHB Liaison: Viva Asmelash

Purpose: A subcommittee of the Quality Improvement Committee. Acts as an advisor to BHS on cultural competence issues, including outreach, accessibility, linguistic requirements, human resources, and strategies to improve penetration rates. The CCC takes an active role in the continued monitoring of current state-mandated Cultural Competence Plans (CCPs) and the development of subsequent CCPs in Sacramento County. The CCC also reviews all services and programs, Quality Assurance Annual Workplan Reports, and MHSA Annual Update plans with respect to cultural competence issues.

Alcohol and Drug Advisory Board

MHB Liaison: Silvia Rodriguez; Alternate: Maria Padilla Castro

Purpose: Promotes a healthy community and reduces the harmful effects associated with alcohol and drug use.

First Five Sacramento Commission

MHB Member: Silvia Rodriguez

Purpose: Makes strategic investments based on best practices and a community-driven plan. Investments are made into programs that meet the highest needs of children and families in Sacramento County.

Human Services Coordinating Council

MHB Members: Caroline Lucas, Dan Niccum

Purpose: Serves as an advisory body to the Board of Supervisors on matters relating to health and human services planning and policy issues.

Sacramento County Maternal Mental Health Collaborative

MHB Member: Silvia Rodriguez

Purpose: Increases knowledge of maternal mental health disorders and resources available to address them among mothers, healthcare providers, policy makers, and other stakeholders.

Older Adult Coalition

MHB Liaison: Maria Padilla-Castro

Purpose: The Older Adult Coalition (OAC) provides an educational forum regarding Sacramento County community-based services and supports to promote older adult mental health recovery. The OAC meets every other month, including at the Annual Mental Health & Aging Conference. The OAC is comprised of a broad cross-section of the mental health, health, and social service professional community in the public and private sector. Its voluntary membership also reflects public citizens, consumers, family members, retired professionals, and mental health and older adult advocates.

National Alliance on Mental Illness (NAMI)

MHB Liaison: Laura Bemis

Purpose: A grassroots organization that provides a community of support, education, resources, and outreach activities to families, friends, and persons with mental illness so as to improve their general welfare and to reduce the stigma of mental illness.