



JUNE 21, 2022

4:30 – 6:00 PM

**MENTAL HEALTH ADVISORY BOARD
MINUTES**

Board of Supervisors Appointee: Supervisor Monica Brown (not present).

Mental Health Advisory Board Members Present: Denise Coleman, Heather Theaux-Venezio and Michael Wright.

Absent: Daniel Cotton and Rachele Jackson, Chair (excused).

Behavioral Health Services Division Members: Emery Cowan, Behavioral Health Director, Interim.

Absent: Leticia De La Cruz Salas, Behavioral Health Services Administrator, Kate Grammy, Behavioral Health Services Administrator, and Tracy Lacey, Senior Mental Health Manager.

DISCUSSION & ACTION ITEMS

I. CALL TO ORDER/ROLL CALL

The meeting was called to order by Denise Coleman at 4:40 pm. A quorum was attained.

II. CONFIRMATION OF VIRTUAL DISCUSSION: Consider adopting a resolution of the Mental Health Advisory Board authorizing remote teleconference meeting for August 16, 2022 as a result of the continuing Covid-19 pandemic state of emergency.

Denise Coleman motioned approval of Mental Health Advisory Board authorizing remote teleconference for the August 2022 meeting. The motion was properly moved, seconded and passed with a unanimous vote of 3 in favor and 0 against.

III. ITEMS FROM THE PUBLIC

Jennifer Elsas of Adventist Health asked for information on how to become a member of the Mental Health Advisory Board. Marisol Lopez sent Ms. Elsas information and bylaws via email. Staff from contractor is ineligible to due to conflict of interest as recipient receiving county funds, Section I (D) of bylaws.

IV. APPROVAL OF JUNE 21, 2022 AGENDA

Denise Coleman motioned to approve the June 21, 2022 Agenda. The motion was properly moved, seconded and passed with unanimous vote of 3 in favor and 0 against.

V. APPROVAL OF MAY 17, 2022 MINUTES

Denise Coleman motioned to approve the May 17, 2022 Minutes. The motion was properly moved, seconded and passed with unanimous vote of 3 in favor and 0 against.

VI. SCHEDULED CALENDAR

1 Routine Business

a Laura's Law Assisted Outpatient Treatment (AOT) Referrals
Please refer to the attached Director's Report.

b MH Related Legislation
There were no updates during this meeting.

c LPS/PES Meeting Discussion
Emery Cowan shared that the meeting took place with good attendance from our crisis continuum and partners; there were no significant new items to share.

d New Business
There were no updates during this meeting.

VII.	<p>PUBLIC COMMENTS</p> <p>There were no items from the Public on matters listed on the Agenda.</p>
VIII.	<p>STAFF REPORTS</p> <p>1 Director's Report Emery Cowan provided highlights from the attached Director's Report.</p> <p>2 MHSA Report Tracy Lacey was not in attendance. Emery Cowan provide brief updates on MHSA media campaigns and mobile crisis.</p>
IX.	<p>COMMITTEE REPORTS</p> <p>1 Executive Board Denise Coleman provided an update on the Alcohol & Drug Advisory Board (ADAB).</p> <p>2 Membership There were no updates during this meeting.</p> <p>3 Outreach and Education There were no updated during this meeting.</p>
X.	<p>BOARD DISCUSSION</p> <p>Board members provided updates or concerns relating to mental health issues affecting our community.</p>
XI.	<p>ADJOURN</p> <p>The meeting was adjourned by Michael Wright at 5:11 pm.</p>

DEPARTMENT OF HEALTH & SOCIAL SERVICES
Behavioral Health Services Division

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Memorandum

To: Local Behavioral Health Advisory Board, Solano County
From: Emery Cowan, LPCC, Interim BH Director
Date: June 13, 2022
RE: Monthly report of significant issues

Integrated MH+SUD- Solano BH will be working with FHS to establish a Medication Assisted Treatment (MAT) program to support Jails and BH clients through approved medications for treatment alcohol, opioid and other. BH in partnership with the DMC-ODS waiver, has been working to expand access to integrated, co-occurring services across all programs. MAT services are reimbursed through the ODS waiver via Partnership.

Eating Disorders- Solano BH is developing eating disorders services as the referrals for this need has increased, especially among youth. The costs of these services are high, with the requirement for medical intervention along with specialty therapy, nutrition, and often residential treatment. We will be repurposing some of the time from a Nurse, Clinician and we are recruiting a half time Dietician from our PH Nutrition Team. Our Behavioral Medical Team (BMT) will establish new screening, referral criteria, and training for our staff. We are also working on contracts with treatment providers with Partnership Health plan, who per the All Plan Letter [22-003](#), managed care plans are required to have shared responsibility for costs.

Partnership Health Plan of California (Managed Care Plan) Collaboration- Solano BH has reached out to PHC to establish monthly meetings in order to improve managed care and mh plan coordination, communication processes, and shared responsibilities. Several topics will be on the standing agenda:

1. Eating Disorders- MOU and cost sharing- regional approach
2. Housing and Homelessness Incentive Program (& connection to our county HHAP allocations and COC coordination)
3. Student Behavioral Health Incentive Program – Solano BH involvement
4. CalAIM- “No wrong door” processes, ECM/Community Supports roll out, Data exchange (hospital data)
5. DMC-ODS- Substance use navigators’ sustainability, State Audits, Fiscal impacts and UM
6. Transportation cost sharing
7. Beacon call line- both MH + SUD issues

Children’s MH Crisis- increased referrals for services for children’s mental health while we have the highest vacancy of children’s clinicians. Data shows that new requests for services Last FY Compared to this FY:

- FY2020/21 there were 3,414 total calls of which 28% (966) were for children/youth 18 and under;

Administrative
Services

Behavioral
Health Services

Child Welfare
Services

Employment &
Eligibility Services

Medical
Services

Older & Disabled
Adult Services

Public Health
Services

- FY2021/22 (thru May 11, 2022) there have been 3,398 total calls of which 33% (1,135) were for children/youth 18 and under.

This continues to be an issue and we have tried by starting to recruit volunteer staff to hold children’s cases while we attempt to hire, this in turn puts a load on other staff taking the volunteer staff’s work.

Staffing retention and hiring problems continue– as of 5/28/22, we are at a 14.9% vacancy rate, down from 19% in Dec. 2021, which is promising however our hard to fill positions (Clinician, specialist, nurse, psychiatry) continue to get an insufficient number of applicants in recruitments. We have 35 vacancies and 17 (49%) of those are clinicians.

We have submitted a recruitment/retention plan to administration and HR. This continues to have an impact on direct service work, timeliness, and other staff having to take on more cases.

Forensic Referrals

MAY 2022 FORENSIC TRIAGE TEAM Referral Breakdown			
MH Diversion	MH Court	MH Services	AOT
6	0	4	1
Total: 11			