



COUNTY OF YOLO

Health and Human Services Agency

137 N. Cottonwood Street • Woodland, CA 95695
(530) 666-8940 • www.yolocounty.org

Local Mental Health Board Monday, April 24, 2023, 6:00 PM–8:00 PM 25 N Cottonwood Street, Woodland Location: Community Room

All items on this agenda may be considered for action.

Jonathan Raven
Chair

Vacant
Vice-Chair

Vacant
Secretary

*District 1
(Oscar Villegas)*
Joe Galvan
Maria Simas
Mathew Hargrove

*District 2
(Don Saylor)*
Serena Durand
Nicki King
Inesita Arce

*District 3
(Gary Sandy)*
Sue Jones
John Archuleta
Warren Hawley

*District 4
(Jim Provenza)*
Carol Christensen
Chris Bulkeley
Jonathan Raven

*District 5
(Angel Barajas)*
Brad Anderson
Vacant
Robin Rainwater

*Board of
Supervisors
Liaisons*
Oscar Villegas
Jim Provenza

CALL TO ORDER ----- 6:00 PM – 6:30PM

1. Public Comment
2. Approval of Agenda
3. Approval of minutes from [February 27, 2023](#), and [March 27, 2023](#)
4. Chair Report-Jonathan Raven
 - Welcome new board members
 - LMHB Celebrating 30 Years
5. Approve meeting time change to 5:30 PM and to be held in same location
6. Member Announcements
7. Correspondence

TIME SET AGENDA ----- 6:30 PM – 7:00 PM

8. MHSA Budget Updates-Brian Vaughn

CONSENT AGENDA ----- 7:00 PM – 7:30 PM

9. [Mental Health Director's Report](#) – Karleen Jakowski
 - a. CalAIM
 - b. K-12 Services
 - c. Upcoming [RFP](#)
 - d. Crisis Now
 - e. QM Audits/Reviews
 - f. MHSA Reform Proposal
 - g. Healthy Work Survey
 - h. IST Growth Cap Penalty

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REGULAR AGENDA ----- 7:30PM – 7:50 PM

- 10. Board of Supervisors Report
- 11. Criminal Justice Update- Jonathan Raven
- 12. Public Comment- on tonight's agenda Items

PLANNING AND ADJOURNMENT ----- 7:50 PM – 8:00 PM

- 13. Future Meeting Planning and Adjournment

Next Meeting Date and Location

May 22nd, 2023, 6:00PM

In-Person:

25N Cottonwood Street, Woodland CA
Community Room

I certify that the foregoing was posted on the bulletin board at 625 Court Street, Woodland CA 95695 on or before Friday, April 21, 2023. Christina Grandison Local Mental Health Board Administrative Support Liaison Yolo County Health and Human Services

Local Mental Health Board Meeting

Monday, February 27th, 2023

Online/Call-in ZOOM

Members Present: Jonathan Raven, Nicki King, Sue Jones, Brad Anderson, Chris Bulkeley, Maria Simas, Inesita Arce (Arrived Late), Joh Archuleta (Arrived Late)

Members Absent: Carol Christensen, Warren Hawley

CALL TO ORDER

1. **Welcome and Introductions:** Meeting called to order by Board Chair Jonathan Raven at 6:02pm
2. **Public Comment:** none
3. **Chair Report:** Welcome Chris Bulkeley our new Veterans Services Rep for Local Mental Health Board appointed by Supervisor Provenza. Jonathan is currently attending CA Association of Collaborative Courts annual conference; he was asked to sit on a panel discussing what Yolo County is doing in Mental Health Court.
4. **Approval of Agenda:** moved for approval by Nicki King, Maria Simas 2nd

Yea "I"	Nay	Abstention
7	0	0

Motion: approved

5. **Approval of Meeting Minutes from January 23, 2023:** moved for approval by Maria Simas, Brad Anderson 2nd

Yea "I"	Nay	Abstention
5		3

Motion:

6. **Member Announcements:**
 - **Brad Anderson**-waiting on a response about Bob Schelen memorial. Want to be sure he attends if something is planned. Sheila Allen will check in with Odd Fellows to see if they are planning something.
7. **Correspondence:** none received
8. **Time Set Agenda: Crisis Intervention Training (CIT) Presentation-Karleen Jakowski**

Public Comment on CIT Presentation-

- Sheila Allen-is any training for Alzheimer's and Dementia-Yes, Older Adult Course primarily covers age related disorders and Alzheimer's and Dementia. We adhere to post standards, but we are also building on top of that for training that could be even more useful for officers
- Christy Correa-Its module units set up on hospital campus that can be set up as interim until Crisis Now is up and running. If it's going to take

years for people in West Sac, what resources are there for people in West Sac. Is there any consideration and be flexible in considering other solutions. When 1 Or 2 crisis counselors are on duty its fine but when they are off duty, we have nothing. Is HHSA willing to modify their plans? Look at using extra MHSA funding to expand the programs that are already working in the meantime until crisis now can get up and running.

- Linda Wight-happy we are looking at other options, will HHSA be extra vigilant to tracking success, look at calls that come in when social worker isn't available, and people decline to have officers come. She doesn't see that reflected in the statistics. Look at advertising is done to city merchants, apartment complex, shopping centers so they can request a Mental Health response instead of police response. Want to be proactive in changing something before the program is lost.
- Jen Danzer-thank you to Karleen, Mario, and Rob for presentation. Thanks, Rob, for providing refresher training on behalf of NAMI. Had valuable conversations with officers. The officers were engaged and plea for the crisis services. ER is not the place to take someone who is having mental health crisis. Often when they take clients to ER Department is evaluated and released before officers can complete their paperwork. They want to see more help offered to the folks in crisis.

Board Comment on CIT-

- Sue Jones-What kind of training do staff get when dealing with children? Developmental disorders are covered as part of training and staff from Alta Regional also provide a portion of the training.
- Nicki King-40-hour training is initial how often do they do additional training. Robert Villareal states training lasts for two years then officers receive an 8-hour refresher training which is more intensive and collaborative and focuses on personality disorders and stigma. 8-hour refresher is a deeper dive, meant to tailor training to each individual need for the community.
- Sue Jones-what's the biggest problem? Space? -Karleen states physical space is significant as well as cost and construction timelines. Also issue with long-term funding model with program. Yolo is committed to making program available to anyone in community regardless of insurance.
- Robin Rainwater-what type of things led to arrest on crisis intervention calls? Secondary issues such as warrant? Robert Villareal states he can't speak specifically to protect privacy, but the crisis responders respond to disturbance calls, violence calls, and varied other calls and then evolution for criteria is done. If they meet criteria, they can be assisted by Crisis Responders and if not, they are turned over to law enforcement. Calls

start as a mental health call and then the call can turn into something different and require transition to officers need to take over.

- Brad Anderson-attending a crisis call with Turning Point (SB82) as a Peer Support Worker and Rob Villareal was present. It was difficult to find client next day to provide services.
- Robin Rainwater-need for expansion of FSP slots, why would an FSP client wait in jail for housing. Per Karleen, FSP has been expanded and there are plans to add additional slots but wants to be considerate of staff and ensure adequate staffing to support expansion. Mario had suggested an idea that HHS plans on piloting which would add funding to support housing for those coming into ACCESS as a bridge to until they get into permanent housing. That will come in the form of either holding beds or supplementing payment. Into on building this into MHSA 3-year plans. Jonathan Raven also notes that while housing in custody isn't ideal, returning them to community is worse place to be. Keeping in custody is a safe option and the jail expansion will help change a lot of the issue that are currently be experienced, there will be much better services offered.

Consent Agenda

9. Mental Health Directors Report:

- **K-12 School Partnership**-is intended to be a supplement to the services they are already funding. Some of schools have had issues with critical vacancies and this has filled the need for those schools who lack a school counselor. Schools will not be getting rid of positions; services will continue to be filled until position is filled. It's not a long-term permanent coverage.
- **Placer County System of Care/Lotus Center**-coordinated a visit to Lotus Center after Placer County System of care conference. It's a receiving care model implement about 6 months ago. It was a takeaway from Crisis Service Continuum. They have a much larger funding structure. It's a pilot for them, it was beautiful and has been very well received. Individuals are benefiting from services that are being provided. They aren't currently billing for any services, it entirely funded through contributions and privately funded. No sustainable plan for revenue.
- **MHSA**-not a specific listening session planned at this juncture. Jonathan recommends anyone interested reach out and if it can be arranged it will be scheduled for this board.
- **Suicide Prevention of Yolo County SPYC Hotline Closure**-hotline closed abruptly, and it was unexpected. Unable to sustain the business model. Assured by Well Space that all calls original directed to Yolo were being rerouted to their call center. 988-routing based off area code from call number.

Regular Agenda

10. **Board of Supervisors Report:** Chris Bulkeley will inquire on salary for Crisis Clinicians. Sheila Allen states there will be a series of community input requested on how to use remaining ARP funds for children. If you are up for it, we are looking for participants. Yolo county Aging Alliance

is hearing form caregivers on what they need. Most responses are in need for housing so that children can move to area and offer assistance.

11. **Criminal Justice Update:** none

12. **Public Comment on Agenda Items:** none

13. Future Meeting Planning and Adjournment:

Next Meeting: March 27,2023 at 6pm-In Person at 137 N. cottonwood Street, Woodland in Thomson Room

Adjourned: 8:20pm

Local Mental Health Board Meeting

Monday, March 27th, 2023

Online/Call-in ZOOM

Members Present: Brad Anderson, John Archuleta, Chris Bulkeley, Robin Rainwater, Nicki King

Members Absent: Jonathan Raven, Carol Christensen, Warren Hawley, Maria Simas, Inesita Arce, Serena Durand, Sue Jones, Joe Galvan

CALL TO ORDER

1. **Welcome and Introductions:** Meeting called to order by Nicki King 6:19pm. Board did not have a quorum and chose to continue with public comment and review of Mental Health Directors report. All action items will be moved and reviewed at next meeting on April 24th.
2. **Public Comment:**
 - Christy Correa-NAMI California has son that consumer, she is a consumer son in MH Diversion Program in being in experience I've et other mothers who have had their children Charise Pompeii participated in many listening sessions, lost her son Jamal Langley he was 33 years old. Cherice stayed on phone during listening session with Supervisor Villegas, was so fired up about having crisis clinician s available. It took Cherice 6 hours to get her son into hospital, there was no crisis clinic or behavioral health staff and her son ended up out in the streets and died. Letter shared from family member will be included as attachment to meeting minutes.
3. **Chair Report:** Nicki King has been representative for board and on Yolo County Health Council. Health council is interested in knowing more about Mental Health Services. Particularly concerned about in school programs. Would like to plan a joint meeting with Health Council and Local Mental Health Board.
4. **Approval of Agenda:** None, Board did not have a Quorum

Yea "I"	Nay	Abstention
0	0	0

Motion: None

5. **Approval of Meeting Minutes from February 27, 2023:** None, Board did not have a Quorum. Will review on April 24, 2023

Yea "I"	Nay	Abstention
0	0	0

Motion: None

6. **Member Announcements:**
 - Robin Rainwater-On Amazon Prime there is a movie/documentary called The Disruptors is a focus on ADHD and it follows five families at elementary age dealing with ADHD. There were some real MH components that were about the integration with schools.

Things affecting children and not getting assistance in the communities. Often schools are misunderstanding that.

7. **Correspondence:** None received

Consent Agenda

8. **Mental Health Directors Report:**

- Upcoming RFPs were released on the dates noted. Karleen discussed RFP's and proposals. List will remain updated.
- Crisis Now-Karleen states HHSA needs to go to BOS supervisors for update in April and then we will come with more detailed report to LMHB at that time. Original vision for crisis now is the Cadillac version. Not interested in sending up a program that goes away in 3 years. We need the program to be sustainable. Reconfiguring at this time. Committed to delivering Crisis Now and the approach we are working on will be sustainable.
- MHSA 3-year plan-Care consulting working on a full analysis to provide us feedback from listening sessions. Have in interest in increasing spending in FSP. Exact numbers we don't have yet. Some we will offer internal and some we will contract out. Some additional funding coming to county Bridge Housing Funding. Provide 4 million in funding. Intent to increase access to immediate housing while they are working on permanent housing. Looking at how we can build off some of the success of Project Roomkey/Homekey.

Regular Agenda

9. **Board of Supervisors Report:** Sheila Allen shares that the memorial luncheon for Bob Schelen and his sister Delilah Schelen will be held on Saturday, April 22, 2023, from noon to 3 pm at the Oddfellows Hall, 415 2nd Street, Davis CA 95616. Please share this information with interested parties. Remembrances will be shared at 1:30 pm. Lunch will be served at 12:30 pm.

10. **Criminal Justice Update:** None- Jonathan attending Conference

11. **Public Comment on Agenda Items:** None

12. **Future Meeting Planning and Adjournment:**

- Propose changing start time of meeting to 5:30 pm and vote on to rotate locations

Next Meeting: April 24, 2023

Adjourned: 7:52

Yolo County Health & Human Services Agency

Mental Health Director's Report

April 24th, 2023

a) **CalAIM**

A dedicated HHS Payment Reform workgroup, made up of fiscal, leadership, and program staff are working with both substance use disorder and specialty mental health contracted providers to set service rates for next Fiscal Year based on the upcoming service code changes per DHCS as of July 1, 2023.

Yolo HHS has received all its state-determined, County-specific reimbursement rates (for all service types) and is in the process of comparing them to contractor-reported program costs to determine reasonable service rates across the board. This takes the place of former annual cost settlement processes between HHS and each provider agency.

From there, the new rates will be built into each contract, our electronic health record, and provider claim forms. This monumental change in how each staff person will document client services, how each provider organization will claim for services provided, and how HHS will get reimbursed by DHCS is complicated and such a departure from current processes that it has created some unknowns as HHS prepares its budget for FY23-24 services.

b) **K-12 School Partnerships Project**

The K-12 School Partnerships project continues operating in the four geographical catchment areas of Woodland, Davis, West Sacramento, and the Rural communities. The implementation of the programs is specific to the needs of each region and designed in collaboration with the local educational agency and the Health and Human Services Agency. The K-12 school-based mental health services are operational year-round and to this end, all catchment areas are currently collaborating with the providers to design programming and service delivery over the coming summer break.

As previously reported, due to the differences in needs in the Woodland region, the decision was made to separate the contracts between Woodland Joint Unified School District (WJUSD) and the Yolo County Office of Education (YCOE). YCOE will continue to be served by CommuniCare Health Centers. A Request for Proposal (RFP) was issued on March 28th to procure services specifically to serve WJUSD. Proposals are due on May 2nd and will be reviewed by a panel including representatives from HHS and WJUSD.

c) **Upcoming RFPs**-Please see linked page for information on upcoming RFPs. [LINK](#)

RFP Title	Release/Anticipated Release Date	End Date
Jail/JDF Behavioral Health and Medical Services	3/2/23	4/13/23 3pm
Substance Use Disorder Adult Continuum of Care	3/3/23	5/5/23 4pm
K-12 School Partnerships Program- WJUSD	3/28/23	5/2/23 2pm
High Tech Call Center	April 2023	TBD
Crisis Residential	April 2023	TBD
Professional Support Services-Mental Health Services Program (MHSA)	4/7/23	5/11/23

d) **Crisis Now**

HHSA Staff continue to work on Crisis Now implementation. The Crisis Now Model includes: 1) High-tech Call center, 2) Mobile Crisis Response 3) Receiving Chairs/Sobering Center, and 4) Short-term Crisis beds. The initial proposal and timeline created in 2020 has been delayed in favor of a phased approach with the intent to create a more sustainable model. The phased approach will include each component of Crisis Now with the addition of systems evaluation after the 3-year pilot and adjustments to the size and location of each component. The following provides an overview of the phased approach, pending Board of Supervisors approval.

Phase	Crisis Now Component	Timeline
1	Systems Planning: HHSA will consult with RI International for Technical Assistance in building out a phased approach, budget, and implementation strategies.	Spring-Fall 2023
2	High Tech Call Center: The original proposal intended to create a standalone 24/7 call center that would be constructed by the county, on county property. The revised plan proposes to consolidate services: 1) 24/7 Access and Crisis, 2) 988/Local suicide prevention hotline, and 3) Crisis Now Mobile Dispatch all into one service. This would be contracted out to a local call center provider.	Winter 2023
3	Mobile Crisis: Projected costs and primary functions of current co-responder teams will not change. There may be an expansion to include after-hours coverage aligned with a mobile crisis Medi-Cal benefit implementation later this year.	N/A
4	Short Term Beds: 16 beds were suggested in the original proposal. HHSA will start with a smaller number of beds (~6) and intends to contract out beds with a local provider in lieu of the original plan to build a county bed facility. This would increase transportation costs but significantly decrease construction and ongoing facility costs.	Fall/Winter 2023
5	Receiving Chairs/Sobering Center: Reduction of chairs from 10-12 to 6-8. Chairs will not be co-located with short term beds.	Spring/Fall 2024
6	Systems Evaluation: System evaluation was not built into the original budget. HHSA recommends including a small budget for 3rd party evaluation after the 3-year pilot is complete.	2025/26

e) **QM Audits/Reviews**

Behavioral Health Quality Management has been working on various audits, submissions, and Corrective Action Plan (CAP) responses which include the following:

- SABG DMC-ODS Audit – CAP submitted to DHCS, awaiting initial findings and on-site/virtual review.
- DMC-ODS NACT CAP – CAP items completed and submitted to the state per DHCS timelines. We are awaiting confirmation from DHCS.
- The Quarterly Test Call (to our 24/7 Access line) Report is in process. Test calls are actively occurring and being reviewed; report submitted to DHCS on April 21, 2023.
- DCHS TA audit – Required document submitted to DHCS on April 19, 2023.
- DRAFT EQRO Mental Health Plan report was received, reviewed, and feedback submitted back to BHC. We are awaiting the final report.

f) **IST Growth Cap Penalty**

Senate Bill (SB) 184 (Chapter 47, Statutes of 2022) established a growth cap for all counties for individuals committed as Incompetent to Stand Trial (IST) on felony charges and includes a county penalty if a county exceeds its growth cap. Yolo County's growth cap is 35 individuals per year. Based on DSH estimates we averaged 2.9 referrals month during the time frame selected by DSH will face our first penalty payments in the Fall of 2023.

The funds collected via penalties will be dispersed back to the county and used for the purpose of activities that will divert individuals with serious mental illnesses (SMI) from the criminal justice system and lead to the reduction of felony IST determinations. HHS Staff are working with the County Administrators Office and Criminal Justice partners to plan for these changes and discuss strategies to reduce penalty payments. (See attached one-page fact sheet for more information.)

g) **MHSA Reform Proposal**

On Sunday, March 19th the Governor announced a three-pronged strategy to reform California's Behavioral Health System, consisting of the following:

1. A Bond to Fund Behavioral Health Residential Capacity and Housing for Homeless Veterans (
2. Mental Health Services Act (MHSA) Reform
3. "Making Today's System of Care Work Better for All Californians" – Alignment of benefits and accountability across Medi-Cal and Commercial Insurance

Additional details have been posted on the CalHHS website at: <https://www.chhs.ca.gov/behavioral-health-reform/>

1. Facilities Bond: Bond to Fund Behavioral Health Capacity and Housing for Homeless Veterans

This 2024 ballot general obligation bond would fund anywhere from \$3-5 billion for:

- Housing for Homeless Veterans
- Multi-Property Settings
- Cottage Settings
- Home Settings

2. Mental Health Services Act (MHSA) Reform and Reprioritization

- Changes the existing 5 MHSA funding components (CSS, PEI, INN, WET and CFTN) to 3 funding categories: Housing, FSP and Other and allocates the funding for each component as follows:
 - Housing- 30%
 - Full-Service Partnership (FSP)- 35%
 - Other- 35%
- Expands the target population to also serve those with only an SUD diagnosis.
- Will require a focus on vulnerable populations as defined:
 - Adults with serious mental illness (SMI) or substance use disorder (SUD) who are or at risk of experiencing homelessness or are or are at risk of being justice- involved, and/or meet the criteria for behavioral health linkages under the CalAIM Justice-Involved Initiative.

- Children and youth with serious emotional disturbance or SUD, who are experiencing homelessness, are involved or at risk of being justice involved, meet the criteria for behavioral health linkages under the CalAIM Justice-Involved Initiative or are in or transitioning out of the child welfare system.
- Overhaul county accountability and transparency including 3-year plan and planning process requirements.
- Changes prudent reserve cap for small and large counties; shortens timeline to reassess prudent reserve to every 3 years.
- Moves the Mental Health Services Act Oversight and Accountability Commission (MHSOAC) under the California Health and Human Services Agency (CalHHS) to increase coordination and improve outcomes.

3. Broader Behavioral Health Reform

- Medi-Cal Managed Care (MCP) and Commercial Insurance: Align behavioral health benefits across all health plans in California so All Californians enjoy access to the care they need. This will require close partnership with both Medi-Cal and commercial health plans to address opportunities to build needed programs and capacity.
- County Behavioral Health: Significantly increase accountability for services provided and outcomes achieved for all Californians through greater reporting expectations and transparency around access, quality, equity, and cost/revenue data applied to all county behavioral health plans.

INCOMPETENT TO STAND TRIAL GROWTH CAP AND PENTALTY PAYMENTS

Summary

Senate Bill (SB) 184 (Chapter 47, Statutes of 2022) established a growth cap for all counties for individuals committed as Incompetent to Stand Trial (IST) on felony charges pursuant to Section 1370 of the Penal Code and includes a county penalty if a county exceeds its growth cap. **Yolo County's growth cap is 35 individuals per year. Based on DSH estimates we averaged 2.9 referrals month during the time frame selected by DSH.**

WIC section 4336 also creates the Mental Health Diversion (MHD) Fund in the State Treasury for deposit of penalty payments collected from counties. The funds collected in the MHD Fund shall be dispersed back to the county and used for the purpose of activities that will divert individuals with serious mental illnesses (SMI) from the criminal justice system and lead to the reduction of felony IST determinations.

Penalty Payments and Repayments

Payments: Beginning in FY 2022-23, if Yolo County's total number of annual felony IST determinations exceeds our baseline of 35, the county will be subject to a penalty payment per determination over 35. Based on the first two quarters of FY 2022/23, Yolo's projection is 46 ISTs. **Accordingly, the first penalty payment is estimated at \$451,360 which will be invoiced in November 2023 and is due 90 days after receipt.** The county may make penalty payments from any local funding source.

Repayments: DSH will subsequently make payment back to a county from the MHD Fund equivalent to the penalty payment amount paid by the county. All funds a county receives from the MHD Fund must be used to support local initiatives designed to prevent the arrest of individuals with SMI

Use of Funds

All counties will be required to submit a spending plan in accordance with one or more of the activities outlined below prior to disbursement.

Allowable use of funds (one or more):

- Pre-booking MHD to serve those with SMI and prevent their felony arrest.
- Post-booking MHD, which may include treatment, support services, and housing, to serve those with serious mental illness and who are likely to be found IST, to prevent the IST determination and divert the individual from incarceration.
- Re-entry services and support, which may include housing, to serve those restored to competency following a felony IST commitment and directly released to the community.

Staff Concerns and Recommendations

Concerns: Initial concerns include: 1) the amount of Yolo's anticipated penalty and where these funds may be pulled from while the repayments have specific and designated uses, 2) the additional workload of implementing new programs, reporting, and tracking required for compliance, and 3) the baseline determined by DSH include COVID years and may not be representative of Yolo's realities now and in the future.

Recommendations: Staff believe some IST determinations can be prevented by programmatic solutions such as reducing bookings through community supports including receiving chairs for acute mental health crisis, wraparound programs for adults, and increased training for patrol officers to identify SMI and be equipped to consider other options when public safety doesn't require jail booking. Staff recommend utilizing a current consultant to provide support in addressing the challenges these new penalty payments pose. Consulting may include presentations to CCP, providing data analysis, and programmatic recommendations.