

Summary

Merced County Behavioral Health and Recovery Services Ongoing Planning Council

March 30, 2023

9:00am – 10:00am

Behavioral Health & Recovery Services Department

Teleconference via Zoom

Present:

Sharon Jones, Bacilia Mendez, Cindy Mattox, Nicole Duarte, Monica Adrian, Fernando Granados, Maria Colomer, Griselda Vasquez, Jaz Chima, Jose Chavez, Irene Cacho, Jesse Ornelas, Lorena Samano, Cheryl Welch Mitchell, Nikki Carrasco, Heydi Herrera, Conor Maloney, Christy McCammon, Rebecca McMullen, Iris Mojica, Khi Moua, Iohana Tapia, Ye Thao, Sonia Vasquez, Katalina Zambrano

Presentation and Discussion:

All Members

I. Call to Order / Roll Call

II. Approval of Minutes

Conor Maloney made a motion to approve the minutes from February 23, 2023, and Jose Chavez Diaz seconded. The motion was approved.

III. Update Planning Council Contact List

Sign in with your full name and the agency you are representing, so that we can keep a record of your attendance for this meeting.

IV. Notice to the Public

Christy, Housing Program Manager for the City of Los Banos, stated that two new positions have been created for Los Banos. The positions are Housing Program Manager and Outreach Coordinator. These positions are intended to help the homeless population within the city of Los Banos. The City of Los Banos is committed to the overall well-being of their community and hope to become a part of the MHSA initiative.

V. Chair's Report

Governor Newsom is proposing a 2024 ballot initiative that will require Merced County to look closely at MHSA funding. The proposal includes the following: additional housing for the unhoused, closer examination of PEI funds, one billion dollars annually required for behavioral health housing, the inclusion of those with substance use disorders, focused funding of services for those most seriously ill, requirements of counties to bill Medi-Cal first for reimbursement of services, as well as improved local accountability and increased transparency. The goal is to modernize MHSA funding and distribution. This proposal will greatly affect programs under PEI should funding be decreased or cut.

VI. BHRS Report

BHRS has yet to lift the mask mandate for staff. Conversations are taking place regarding the north county clinic so that services can be maximized. BHRS is reforming and rebuilding teams as multiple Leadership, including the previous Director, have relocated to other counties. New Director, Kimiko Vang, has a platform that emphasizes inclusion and diversity. She has been meeting with Leadership and staff. As Fernando mentioned, the Governor is going to modernize MHSA. The local community stakeholder process will still be the people who shape what happens in your county and identify the needs of the county.

VII. New Assistant Director

New Assistant Director, is Julianne Sims. In the past, she worked briefly with BHRS, but most of her time with the County was with the Human Services Agency.

VIII. Update on MHSA Program Review

Cindy Mattox, MHSA Staff Analyst, has already submitted the plan of correction. The review went very well. There were only minimal findings related to the PEI report for the three-year plan and annual update. The only correction was that instead of the PEI report embedded into the plan, it was requested to be listed as an appendix. This speaks volumes to the MHSA team and staff who rallied with passion in the preparation and execution of the program review.

IX. Update on Community Program Planning Process (CPPP)

We are in Community Program Planning Process for our three-year plan, the fiscal year 2023-2026. The Director's vision is inclusion and diversity, and conversations are taking place in regard to the program. Programs are being reviewed for impact and to ensure we are providing a benefit to the community. The Community Program Planning Process is going well.

X. Focus Groups/Key Informants

There have been ten focus groups including Veterans/families, Merced County Office of Education-Caring Kids staff playgroups, Turning Point staff/members, Human Services Agency staff members, PEI providers, Area Agency on Aging, and the South East Asian Community. Also, key informant interviews were conducted with Gloria Morris from Hope and Harvest Church and Dr. Sandoval from Public Health. There will be a Focus Group on 4/6/2023 for Livingston. Some common themes in the focus groups are boots on the ground, navigating the system, early intervention, culturally specific programs, and veterans.

XI. Discussion on Quality Improvements Needs.

Monica- Request for this meeting to return to in person rather than Zoom.

Sharon-Focus more on inclusion and diversity. How are we welcoming people? When individuals leave do they feel better?

Nikki-We need to improve language access for medical professionals. Non-English speakers aren't receiving the proper translation during appointments with their providers, therefore, hindering care.

Christy- Programs are hurting due to the lack of providers. Creating a cohort with schools would be beneficial to home grow providers. We are in an area that is underserved in terms of healthcare. A current barrier is we do not have licensed practitioners. Continuing education on best practices and evidence-based practices led by guest speakers would be very helpful.

Sharon-In regards to what Christy shared, typically we have four stipend students. Now the program has been expanded to where there will be four first-year CSU Stanislaus stipends for social workers and six second-year CSU Stanislaus stipends for social workers. Jennifer Johnson, LCSW, will provide the first-year students with their training. Then when they become second-year students they will be placed here at BHRS. Lastly, there is the hope that we can develop a social worker trainee program so that once licensed they can become a part of the BHRS workforce. As Christy said, we are in a professional shortage area. Our programs cannot operate unless we have qualified culturally responsive people to work in these programs.

Fernando asked if the students that receive the stipend are able to work with outside contractors or if they will only be able to work with BHRS. Sharon stated that as part of the contract, individuals could either work with BHRS or contract providers. If they cannot get hired for the payback in Merced County then determinations would be made to approve to work in another county. The goal is to streamline this program so that first-year students get training under Jennifer and then from there get further training with BHRS. Fernando also asked if we have looked into other universities outside of Stanislaus due to only three cohorts being offered. Sharon stated yes, that we do get other interns here at BHRS, but it is as resources allow and infrastructure allows.

Interviews for a new Program Manager will be Monday, this position will oversee workforce development. Sharon will share updates and stated this is great feedback that everyone is saying.

Jose- The flood that occurred in Planada did have a lot of damage to the Golden Valley Health Center. A mobile clinic has been set up to serve the community. There is a community health worker stationed there to help residents navigate and ensure that everyone has access to necessary services. If services cannot be done in Planada they are referred to Merced campus.

Irene- Being present in our community and bringing stackable layers of services back to our families. There is a huge need for barriers that are in our underserved communities. Yesterday, there was a reading at the Cesar Chavez Library in

collaboration with the Children's System of Care. This is a chance for whole families to get services from housing to coping skills. Further service opportunities will be set up in the local park for the youth.

XII. Discussion on ways to Develop and Maximize the Program

Apart from funding, how can you tailor your program in a manner to which people will still have some benefit? Sharon oversees the Strengthening Families program where Irene works. There was a workshop a month ago where each partner came in and shared what they offered to the community and how they offered it. The diversity in which each partner is doing leads to quality things and ways to help people. Those are the build boards and checkpoints we have to ensure that we are really chipping away and having an impact.

XIII. Community Services and Supports (CSS) Quarterly Meeting

Someone proposed that we have a Community Services and Supports (CSS) quarterly meeting and wanted more opinions if we want to include this on the calendar. In addition to the Prevention and Early Intervention (PEI) meeting. This would allow us to come together face to face, improve the quality of what we are doing, and maximize the impact of our programs.

XIV. Inclusion and Diversity

This is the platform of our new Director, Kimiko Vang. Taking a look at our programs are we inclusive? Who is coming in for services? Who do we feel comfortable serving? How are we setting it up? We want to ensure we are not putting anything into action that might be perceived as doing harm.

Griselda- We participated Tuesday, on the LGBTQ Minds Matter Training with Katalina. It was great, two of my colleagues were able to come out of the clinic and join me. I have mentioned before that it is not heavily participated in. I think it would be beneficial for everyone who has the opportunity to attend to join these types of conversations. When we are talking about inclusion and diversity this is a necessary opportunity for all of us to be in the room to learn, share, and expand.

Katalina- I am always that individual that says if they're made mandatory then individuals have to be there. We always say "Sign up if you want to". The people that don't usually sign up for these are the ones who need it the most. However, if you make it mandatory, especially for upper management and individuals working hand in hand, it would benefit everyone. Also, input from surveys is important. We can always create a presentation on what we feel is needed, but if you feel a certain topic wasn't hit or the space wasn't comfortable let us know. Then we can come back and do a recap.

Nikki- My suggestion would be to collaborate with other community-based organizations and agencies. In-person meetings help a lot. It creates connections and friendships that create unification. A "no wrong door" outlook when helping in our community. If we can't help, we know someone who can. Shaking someone's hand leads to friendship. I think we need to get closer and lock arms so our community is well taken care of.

Conor asked for further details regarding the Community Services and Support Quarterly Meeting. Sharon replied it would be a meeting four times a year. Discussion would include things that are related to our community services, new regulations, and business. There would be a standard agenda. If it goes forward agenda and notification will be sent out.

XV. State-Level Discussion on MHSA

In summary, the Governor is proposing for the 2024 ballot-

- 30% for housing and enhanced care in residential settings for those with serious mental illness/serious emotional disorders/substance use disorder
- 35% for full-service partnerships
- 35% for CSS, PEI, capital facilities, technological needs, workforce education and training and the prudent reserve

XVI. Administrative Updates and Changes

New Assistant Director, is Julianne Sims. In the past, she worked briefly with BHRS, but most of her time with the County was at the Human Services Agency. As time permits she may join a future meeting to be introduced. Also, Lupe Garcia is the new Secretary to Director, Kimiko Vang.

XVII. Announcements

Maria-The behavioral health services that we provide our Alliance members have changed names. Carelon Behavioral Health is the new name, formerly known as Beacon Health Strategies.

Griselda-We have successfully found three behavioral health clinicians to join us. One is onboarding now, one scheduled for Monday, and one in mid to late April. This is great news for us to be able to expand services to Merced and Stanislaus County. We may be at a number where we can provide one full time provider at a site rather than part time covering multiple areas. These providers are all licensed and do not require supervision.

XVIII. Possibilities and Success Stories

No Report

XIX. Next Steps

No Report

XX. Adjournment

10:05 AM