MINUTES

San Bernardino County

BEHAVIORAL HEALTH COMMISSION MEETING

July 7, 2022 - 12:00-2:00 pm

<u>Commissioners Present:</u> Monica Caffey, Lorrie Denson, Michael Grabhorn, Pastor Mark Graham, Jennifer Spence, Veatrice Jews, Gil Navarro, Lynn Summers, Kimberly Mesen on behalf of Supervisor Col. Cook.

Excused Absence: May Farr, Jennifer Silvestri, Catherine Inscore, Victoria Ogunrinu, Akin Merino.

Absent:

Guests: Michael Knight, Dr. Timothy E. Hougen, Dr. William Oglesby, Raquel Ramos, Karina Urena, Aaron Saubel, Allison Cunningham, Afarah Board, Amanda Vann, Toni Harris, Arthur Shawiii, Ashley Patterson, Todd Holder, Carol McDonald, Christina Entz, Christina Peters, Pathways Clubhouse, Derrick Cannon, Diana Alexander, Liz Maldonado, Erica Ochoa, Erica Banks, Erin Zamora, Fabiola Yanez, Favielle Garibaldi, Gayle Morrow, Linda Hart, Hunter Fields, Jamesia Brown, Jacari Brandon, Jennifer Alsina, Jennifer Esparza, Jennifer Pacheco, Jennifer Weed, Jonathan Ortiz, Josh Lopez, Justine Rangel, Jeramy Sanquist, Dr. Joshua Taylor, Karen Cervantes, Kelsey Conroy, Kimberly Morrow, Kristen Mungcal, Leilana Lopez, Linda Lopez, Linda Titus, Lindsey Drake, Lizette Vazquez, Luz Razo, Maribel Gutierrez, Marlen Hernandez, Matthew Wong, Michelle Dusick, Metra Jaberi, Micah Lee, Miriam Clark, Marcelina Shackleford, Nicole Rice, Oneta Wilson, Paola Daloia- Pascuzzo, Patricia Moore, Paul Cook, Rafael Villa, Debbie Franklin, Noella Buchanan, Robyn Gantsweg, Sean Colony, Sheena Felix, Sonia Rubio, Steven Jackson, Susan Achuff, Tristan Alfred, Teri Morrell, Tricia Navarro, Terrance Stone, Vanessa Miranda, Vivian Bermudez, Vernon Motschman, Valerie Dobesh, Zakiya Otis.

Minutes recorded by Raquel Ramos, Clerk of the Behavioral Health Commission (BHC).

CALL TO ORDER/ PLEDGE OF ALLEGIANCE/ROLE CALL

Vice Chair Gil Navarro called the meeting to order at 12:05 p.m. and roll call followed. Vice Chair Gil Navarro led the group in the pledge of allegiance.

Tab 8: Review Minutes of June 2, 2022.

APPROVED

Motion/Second: Pastor Mark Graham, Lynn Summers

AYES: Michael Grabhorn, Monica Caffey, Veatrice Jews, Gil Navarro,

ASBSTAIN: Lorrie Denson, Jennifer Spence

ABSENT: May Farr, Jennifer Silvestri, Catherine Inscore, Victoria Ogunrinu, Akin Merino.

PUBLIC COMMENTS

Linda Hart, CEO and Founder of the African American Coalition, stated she is openly opposing the newly elected provider serving the African American community and will be campaigning to ensure that the community is correctly and appropriately being represented when it comes to presentations and not just handing out brochures. Linda Hart mentioned looking at the MHSA PEI: African-American/Black Participant data and stated 1% outreach is unacceptable.

CHAIRPERSON'S REPORT

Chair Monica Caffey shared she attended the District Five DAC meeting and expressed that the meeting was very informative with resources and the opportunities to have more outreach programs throughout the county. Chair Monica Caffey encouraged all Program Directors to share and join the District Advisory Committee meetings scheduled throughout the month. Lastly, Chair Monica Caffey shared she is looking forward to attending the Student Wellness Conference this month and will bring back information and resources to help the community improve mental health statistics.

Tab 9: Prevention and early Intervention Budget/ Fiscal Information - Data was provided to Commissioners.

COMMISSIONERS' REPORT

First District:

First District Commissioner Lorrie Denson shared she attended the First District DAC meeting with presenter Kristen who shared on Peer Support Specialist certification process. Commissioner Lorie Denson shared she attended a Juneteenth celebration sponsored by Community Health Action Network at Trinity Lutheran Church. Lastly, Commissioner Lorrie Denson shared she attended the Apple Valley Sheriff work group committee meeting.

First District Commissioner Michael Grabhorn thanked InnROADS for all their help they have provided with Rescue Mission, Homeless, and Clients throughout the County. Commissioner Michael Grabhorn shared he attended the Tabaco coalition meeting, which is being combined with the High Desert Coalition, to help with early intervention with drug and alcohol abuse. Commissioner Michael Grabhorn shared he attended the following events: the Behavioral Health Commissioner Training, the Sheriff Workgroup meeting where Commissioner shared on CCRT, TEST program, and Crisis Intervention Training program, Abundant Living awareness event on tabaco in the African American community, and the California Mental Health Equality project meeting where they spoke on misinformation given regarding mental health equality.

First District Commissioner Pastor Mark Graham shared that due to a family crisis during the month of June was unable to be involved as much with the community. Commissioner Pastors Mark Graham shared being able to join the Behavioral Health Criminal Justice Consensus meeting, which correlates with the services that Abundant Living Church provides by transporting individuals from the High Desert Detention Center and provide 6-12 months' worth of case management, which includes: housing, counseling, and employment assistance. The Behavioral Health Criminal Justice committee's goal is to assist the criminal justice individuals that are living with behavioral health conditions to become a productive and responsible men of their families and community by providing expedited court processing, placement services, and behavioral health treatment.

Second District:

No report provided from Second District.

Third District:

No report provided from Third District.

Fourth District:

Commissioner Jennifer Spence shared on her continued work with NAMI and combining services with Department of Behavioral Health and providing services to the community. Lastly, Commissioner Jennifer Spence shared there will be a training on suicidal prevention provided online and will be sharing more information through email.

Fifth District:

Commissioner Veatrice Jews shared on her continued work with the Ministerial Pilot Program and the churches involved with the PEI system. Commissioner Veatrice Jews shared having District Five DAC meeting and discussing the mental health influences in all aspects of life. Commissioner Veatrice shared looking forward to the Student Wellness Conference in Palm Desert starting on July 11. Lastly, Commissioner Veatrice Jews shared District Five July's DAC meeting will be held on July 25, 2022.

Commissioner Lynn Summers shared joining several committees' meetings that spoke about mental health. Commissioner Lynn Summers spoke at the Inland Empire Community Foundation and shared on the work the local women in the area are doing. Commissioner Lynn Summers shared she participated in a Juneteenth event in the city of Redlands. Lastly, Commissioner Lynn Summers shared she participated in the African American Episcopal Churches Behavioral Health Conference to bring awareness of the challenges and issues the youth across the Unites States are facing with mental health.

Commissioner Gil Navarro shared he attended District Five DAC meeting where the presenter spoke on mental health awareness and issues in general. Commissioner Gil Navarro shared he attended the California Association of Local Behavioral Health Boards and Commissions meeting where they spoke on eliminations of cultural and ethnic disparities. Lastly, Commissioner Gil Navarro

recommended to host an in-person refreshments to thank Commissioner May Farr for her many years as a Commissioner with the San Bernardino County Behavioral Health Commission.

SUBJECT MATTER PRESENTATION:

Presenters: Sonia Rubio, Program Manager-DBH and Jacari Brandon, Community Health Worker Prevention Educator- Riverside San Bernardino County Indian Health, Inc. (RSBCIHI)

Public Comment: Community attendee Linda Heart asked for clarification regarding who will be presenting the subject
matter presentation at today's general session meeting. Sonia Rubio clarified the presentation will be provided by both
DBH staff and the contracted provider.

Tab 10: Community Health Worker Program Presenter Sonia Rubio, Program Manager-DBH:

- WIC § 5840(a)(b) states that counties shall design programs that prevent mental illnesses from becoming severe and disabling, emphasizing improvement on timely access to services for underserved populations.
- Purpose of prevention and early intervention is for access and linkage to medically necessary care. Outreach to recognize
 the early signs of potentially sever and disabling mental illness. Reduction in stigma associated with diagnosed with mental
 illness or seeking services. Reduction in discrimination against those with a mental illness. Programs that provide mental
 health treatment services, including programs successful in reducing the duration of untreated severe mental illness.
- 19% of MHSA funding is allocated to prevention and early intervention programming. Prevention and early intervention
 programs serve Californians of all ages. Counties (except small counties) are required to direct 51% pf PEI funds on
 individuals between the ages of 0 and 25.
- There are a total of 15 Pei programs, including two newly approved programs. they are categorized into five different state programs: Native American Resource Center, Promotores de Salud/ Community Health Worker, Behavioral health Ministerial Pilot Project, Inland Empire Opioid Crisis Coalition, and Child and Youth Connection.
- State requirements are outreach to potential responders, program must use effective methods to bring about intended outcomes, and all PEI programs must include 3 strategies.
- The Community Health Workers (CHW) program provides outreach and education about recognizing and responding to early signs of mental illness by increasing mental health awareness in culturally diverse communities. The CHW program promotes mental health awareness, provides education about mental health, and connects community member to mental health. The CHW program relies on trained Community Health Workers who share many of the same social, cultural, and economic characteristics as the target population. Peer Providers/CHWs draw upon their lived experience to help individuals access mental health services, navigate the mental health system, and reduce stigma associated with accessing services.
- CHW program services as an outreach to community members to provide education on recognizing and responding
 effectively to early signs of potentially severe mental illness. CHW Programs provide presentations on behavioral health
 topics, crisis interventions, linkage and referrals, case management, and collaborate with community partners to increase
 access to services.
- CHW program has a goal to provide outreach and education services to 30,500 diverse residents across the County to
 reduce the stigma associated with seeking behavioral health services, as measured by reflective surveys, decrease
 stigmatizing attitudes, as measured by the Measure, Outcomes, and Quality Assessment (MOQA) survey, and increase
 the recognition of early signs of mental illness and substance use disorder, as measured by PEI Outreach Survey.
- CHW program objectives are to educate and promote behavioral health prevention and wellness in cultural communities, grow community knowledge of local resources, improve information and help seeking behaviors, and increase access to care.
- CHW program goals are to serve 30,500 unduplicated participants per fiscal year. 70% survey completion rate for Stigma Reduction Surveys replaced the MOQA.

Participants often elect to not to disclose because it is easier than responding. We are working with DBH to improve
methods of obtaining demographic information. A significant portion of participants indicated that they are multi-racial,
meaning some of these individuals may identify as African American and another race.

Public Comment:

Community attendee Linda Heart asked if there will be an opportunity to address guestions before next presenter.

Presenter Sonia Rubio, Program Manager-DBH:

 Presenter Sonia Rubio attempted to review results from the survey given to the community and commissioners in the beginning of the presentation.

Chair Monica Caffey:

- Chair Monica Caffey commented that the survey is inaccurate due to lack of time for completion on her end and suggested for survey not to be used as an example during today's presentation.
- Chair Monica Caffey emphasized how important subject matter presentations are for the commission and would not like the poll inaccuracy to be a distraction from the presentation.

Presenter Sonia Rubio continued with the presentation material:

- CHW Modular Presentation Surveys are one of the tools used to evaluate effectiveness of the CHW program. CHW
 Modular Presentations provide an overview on various mental health topics such as anxiety disorders, bipolar disorder,
 depression, schizophrenia, and substance use disorders.
- The Measures, Outcomes, and Quality Assessment (MOQA) surveys are another tool that is used to determine success.
 The results demonstrate that the stigma reduction education resulted in overall reduction of stigma surrounding mental
 health including an increased willingness to seek support for mental health concerns, talk to a friend or family member if
 experiencing emotional distress, and actively and compassionately listen to someone who is experiencing emotional
 distress.
- CHW program established relationships with over 40 local cultural groups and organizations to better connect with diverse populations. Provides approximately 13,000 comprehensive, culturally relevant education, and outreach services per year for the prevention and treatment of behavioral health concerns. Recruits an average of 13 Community Health Workers per year who share similar social, cultural, and economic characteristics as the target population. Delivers culturally appropriate education and outreach sessions to reduce stigma. Maintains a robust repository of local resources for Community Health Workers to use in community outreach, access, and linkage. Peer Providers assist community members in accessing mental health services.
- CHW program provider face challenges like rebuilding trust with the community after the Covid-19 Pandemic, encouraging participants select accurate demographic information rather than the undisclosed option on surveys, challenges in obtaining fully complete demographic information on surveys, difficulties accessing demographic surveys through web applications (QR Codes and Online Surveys), and indoor events are still limited to smaller numbers to reduce the spread of Covid-19 in large groups. CHW program provider may resolve the challenges by having open discussions with DBH on optimal ways to obtain demographic data, continuous program monitoring and improvement to identify strength and areas of improvement, discuss purpose of survey in presentations to ease concerns, offer options for completing surveys, improve strategies to increase participation, and expand networking efforts to increase reach to all target populations.

Chair Monica Caffey offered the opportunity for questions and comments:

• Commissioner Gil Navarro suggested DBH staff increase awareness within the community by providing more presentations to families and the community by using one line item to focus each month.

Chair Monica Caffey provided the following comments:

- Chair Monica Caffey referenced the Prevention and Early Intervention Budget and inquired how or who determines the budget allocation for the PEI services between Promotores de Salud/ Community Health Case Worker and Behavioral Health Ministries Pilot Project. As Promotores' estimated total expenditures is \$968,165 and the Ministries Pilot Project estimated total expenditures is \$100,000. This is a very large difference.
- Chair Monica Caffey noted the budget item allocating the specific dollar amount of \$995,597 to Resilience in Promotion in African American Children and inquired as to what programs are provided throughout the county given that amount of funding.

Presenter Sonia Rubio, Program Manager-DBH:

 Sonia advised allocations for budgets are according to the services that are provided, what types of services are needed and how much those services might cost to be implemented.

Chair Monica Caffey provided the following comments:

She has made an observation that the budget provided, and the statistical data provided specifically for the African
American community are not aligned and would like to suggest for contracted providers to change strategies to reach all
the County of San Bernardino as currently some districts are not receiving any programs or services for the African
American community.

Public Comment:

Community attendee Linda Hart made a statement based on the information provided by Sonia Rubio regarding the work
of the contracted provider within the community. She deemed Sonia's statement is inaccurate as they have not contacted
her organization for any type of collaboration or for any strategies to help better serve the African American community
throughout the County of San Bernardino.

Presenter Sonia Rubio, Program Manager-DBH:

Presenter Sonia Rubio acknowledged both Chair Monica Caffey and Linda Hart's concerns and agrees that there is a lot
more work to be done to help the African American and all underserved communities and assured the program is constantly
reaching out to multiple programs throughout the county and is always open to work with organizations who want to
collaborate and strategize new ways to better serve the community.

Presenter Jacari Brandon, Community Health Worker Prevention Educator- Riverside San Bernardino County Indian Health, Inc.:

- CHW program host the following events: Summer Meals, Tea at the Tay, Sisters Circle, Community Garden, Express
 Yourself Youth Showcase, My Hair My Health, African American Awareness Subcommittee Meetings, After School
 Programs, Back to School Programs, National Black Grads, Black and Brown Conference, Earth 2 fork, Juneteenth Events,
 and Turkey Giveaway.
- RSBCIHI disseminated behavioral health information to 21,498 individuals of various age and demographic groups throughout our service areas by partnering with local vaccination clinics in 2021 and 2022. Given the mental health challenges the community was going through because of the pandemic, RSBCIHI seized the opportunity to provide education about mental health issues by distributing information about mental health and resources available within the community. These light touch services did not afford the opportunity to collect demographic data, however, by providing information and resources, these services helped to raise awareness about mental health issues and available resources.
- For questions or comments, please contact Sonia Rubio, Program Manager- Prevention and Early Intervention <u>DBH-PEI@dbh.sbcounty.gov</u> (909) 252-4067.
- To report any concerns related to MHSA Community Program Planning, please refer to the MHSA Issue Resolution Process located at: https://wp.sbcounty.gov/dbh/wp-content/uploads/2021/08/COM0947.pdf To report concerns related to receipt of behavioral health services, please contact the DBH Access Unit at: (909) 386-8256 Toll Free 1 (888) 743-1478 or 7-1-1 for TTY users.

NEW BUSINESS – ACTION ITEM(S)

Identify Commissioner to Prepare Presentation Findings:

Chair Monica Caffey volunteered to complete this month's memo of findings.

DIRECTOR'S REPORT

Assistant Director Michael Knight provided the following report on behalf of the Interim Director Dr. Georgina Yoshioka:

- Dr. Yoshioka and Dr. Caffey meeting monthly.
 - Working on BH Commission Executive Session calendar draft timeline and schedule for the upcoming CPP process for the Three-Year Plan.
 - DBH intends to take a deeper dive into both the PEI and Innovation programs in this upcoming year and are exploring opportunities for expanding housing and support for our homeless consumers.

Behavioral Health Commission to Review (Reminder):

- Vendors are encouraged to register in ePro to be notified of all possible bid opportunities. For more information on this process and how to register: https://wp.sbcounty.gov/purchasing/vendor-registration/.
 - Reminder to Commissioners if you participate on a review panel, the importance of confidentiality during the review
 process. Reviewers remain confidential. Attendees are not confidential, if requested during the Q &A portion, the Agency
 attendees are listed publicly.
- Reminder public comments are not to be responded to directly, however will be documented in the minutes for the official record.
 - Reminder public inquiries including requests for data are to be made: DBH-PublicRealtions@dbh.sbcounty.gov.
 - Public Records Act Request Policy: https://wp.sbcounty.gov/dbh/wp-content/uploads/2021/05/BOP3007.pdf

Legislation Updates:

AB 2288 Advance health care directives: mental health treatment - Authorizes an adult having capacity to give an individual health care instruction. Existing law authorizes a written advance health care directive to include the individual's nomination of a conservator of the person or estate or both, or a guardian of the person or estate or both, for consideration if protective proceedings for the individual's person or estate are thereafter commenced. Existing law defines "health care decision" and "health care" for these purposes to mean any care, treatment, service, or procedure to maintain, diagnose, or otherwise affect a patient's physical or mental condition. This bill clarifies health care decisions under those provisions include mental health conditions. The bill would revise the statutory advance health care directive form to clarify that a person may include instructions relating to mental health conditions.

DBH Updates:

- Evening with the Stars Behavioral Health Commission Workgroup Ashley Patterson provided an update.
- Board of State and Community Corrections Local Advisory Committee Dr. William Oglesby shared information.
- Community Health Worker Program Riverside/San Bernardino Indian Health provided a brief introduction to their presentation taking place during several sessions.
- As of July 16, 2022, the National Suicide Prevention Lifeline number will transition from the longer 1-800 phone number to
 the three-digit 988 number. However, what is available to callers under 988 will not change in July. Callers will continue to
 access what they can today, which is most often a volunteer crisis counselor trained in taking calls with individuals who
 may have suicidal ideation.
- AB 988, a policy bill addressing a tax to help pay for a portion of the costs associated with 988 has recently been amended and was heard in the Senate on June 28, 2022. Will continue to provide updates.
- Videos: Hiding in Plain Sight: Youth Mental Illness Youth Mental Illness 101, Season 1 Episode 1 and Hiding in Plain Sight: Youth Mental Illness Resilience, Season 1 Episode 2 Raquel will email links.
- Curtain of Courage Memorial Unveiling event on June 17, 2022. Memorial honoring victims, survivors and first responders (remembrance and healing) of the December 2, 2015, terror attack in San Bernardino. Located outside of the San Bernardino County Administration Building.

OUTSIDE AGENCY REPORTS

Maribel Gutierrez on behalf of the Behavioral Health Cultural Competency Advisory Committee, invited the commission and community to attend their meetings every third Thursday of the month. July's meeting topic will be an update on the Ministerial Pilot Project.

Terrance Stone shared there will be two community backpack giveaway events in the county. First event will be held July 21st in the High Desert area and the second will be held at Valley Community College on July 30th; more info will be sent out.

Department of Behavioral Health

Behavioral Health Commission

Meeting adjourned at 2:00 p.m.

Monica Caffey- Chair

Karina Urena, Office Assistant III