Meeting Agenda:

**Behavioral Health Advisory Board Meeting;**

**Monday August 8th, 2022 from 3:00-4:30**

Zoom meeting:

Link: <https://monocounty.zoom.us/j/7609242222>

Call in: +1 669 900 6833

Meeting ID: 760 924 2222

Attendees: Lauren Plum, Marcella Rose, Amanda Greenberg, Carolyn Balliet, Krista Cooper, Stacy Corless, Dirk Solo, Laura Stark, Ingrid Braun, Rolf Knudson

Called to order at 3:06pm

1. Public Comment
	1. None
2. Approval of minutes from June 6th, 2022
	1. Approved at end of meeting
3. AB 361 Resolution: Stacy (Action)
	1. Approved at end of meeting
4. Behavioral Health Department Updates
	1. Community program update: Lauren
		1. SUD campaign
			1. Campaign strategy of reducing use of alcohol and cannabis, targeted for adults aged 21-25. Expected to launch in the next month or so.
			2. Potential collaboration with Mammoth Hospital, Mammoth Mountain, Cerro Coso – if anyone has ideas for other collaborative partners (incentivized) let Lauren know.
		2. MyStrength
			1. Self-paced, passive exploratory wellness approach
			2. Free subscription for all Mono County residents through beginning of next year – access code *Mono*
	2. Staff Changes: Amanda (Peer Support Specialist Update, Budget Update)
		1. Welcome Wendy Reynolds, new Benton Wellness Associate!
			1. Providing in-person programming to Benton 1-2x/wk and partnering with Social Services for events. Programming to be held at the Benton Community Center or on Tribal Reservation.
			2. CB wants to connect w/ WR re: Angel Giving Tree
		2. Welcome Monce Cruz, Fiscal Technical Specialist! (FTS)
		3. Congratulations on your promotion, Esmeralda Curiel! Previous FTS, now Behavioral Health Service Coordinator.
		4. Congratulations on your promotion, Tajia Rodriguez! Now a Case Manager I in addition to continuing her wellness programming in Bridgeport, CA.
		5. Welcome back Salvador Montanez! Previous MCBH clinical staff, now the new WRAP coordinator. Will be working closely with social services and probation.
		6. Three recent staff departures – on current hiring spree (see newly hired positions above)
			1. Hiring freeze until the budget is brought before the BOS
				1. Plans for promoting current staff and hiring for more positions. Positions expected to be listed in September.
			2. Still recruiting for FTS, entry level position – if you know anyone qualified let Amanda know.
		7. Peer support specialist update – Peer Support Specialist is a peer with lived experience, using that experience to help others. Will focus on connecting with clients as a peer, sharing MH challenges, aiding in navigation of services.
	3. Other updates: Amanda (CCMU Grant and MOU, MHSSA Grant)
		1. Crisis Care Mobile Units (CCMU) (Mobile Crisis Response) Grant
			1. Tuesday 8/16 – Robin Roberts, Ingrid Braun (Mono Sheriff), Bryan Bullock (Interim EMS Chief) – presentation to BOS re: Mobile Crisis Response Grant MOU.
			2. Robin and Suzi Bains (MH First Aid) will begin training for Mono EMS, MLPD, Mono Sheriff re: introduction to Mobile Crisis Response – refining details of mobile crisis response workflows and challenges.
			3. IB: Expresses that this grant is needed and will help clarify the role of BH staff during crisis (ex. Field support)
			4. DA: Question about the roll out of new 988 phone number, and data tracking capabilities for 988:
				1. IB: 988 calls will not be directed to Mono Sheriff; 988 is a dialing shortcut to the National Suicide Hotline. Expresses that CA is not well prepared re: staffing for the roll out of 988.
		2. Mental Health School Services Act (MHSSA) Grant
			1. Collaboration with Mono County Office of Education (MCOE) to re-introduce a new & improved North Star School Based Counseling Services program.
				1. Expected to launch mid-October, serving MSUSD + ESUSD; working w/ MCOE to get grant documents ready.
				2. Anticipated hiring of additional staff: Case Managers and Therapist.

Focusing on hiring students or trainees in school for MFT or LCSW certifications. If you know of anyone interested, connect them with Stacy Adler of MCOE.

1. Quality Improvement Discussion Topic –
	1. Review of Data notebook 2022
		1. Requirement of the CA Behavioral Health Planning Council in collaboration w/ CA Association of Local BH Boards/Commissions – they oversee the CA Behavioral Health Advisory Boards.
		2. Topic focuses on the impacts of COVID-19 on vulnerable populations and on service delivery.
			1. Collaborated with staff and reviewed internal data for initial responses.
		3. Today’s review focuses on the part II topics of how BH service delivery was affected by COVID-19, answering for both children & youth, and adult age groups separately.
			1. CB: What age cut off defines youth?
				1. MR: Unclear in data notebook. Commonly 18 and younger, but referenced in data notebook in some instances including young adults (early 20s)
		4. Q12: **Stresses on BH services for children and youth**:
			1. Data for selecting option “g. Decreased access/utilization of mental health services for youth” was based on an analysis of an internal registration log that tracks service inquiries over time.
		5. Q13: **Ranking of stressors** (Q12), children and youth:
			1. Consensus that things that risk life are most important – decided in order of importance: d. ED Admissions; f. Increased crisis interventions; g. decreased service utilization
		6. Q14: **Comments or concerns re: COVID-19 impact on BH services for children and youth:**
			1. Board expressed benefit of getting feedback from Lois Klein; MR to email Lois for feedback on children and youth questions.
			2. SC expressed need of increasing awareness of services offered and efforts made by MCBH. Expressed potential need for more MH related trainings (ex. Suicide Prevention training).
				1. LP: MCBH will be working with Susi Bains to offer Mental Health First Aid (MHFA) in next few months; both certifiable and non-certifiable courses planned.

LP will pass MHFA training info onto RK and BHAB.

* + - 1. CB: Inquired about procedure for referring youth to MH services from school
				1. AG The MHSSA grant will help clarify and refine the referral process. Traditionally a referral form was submitted to the North Star Case Manager. This will be expanded with the hiring of additional clinical staff for NS (case managers, therapist).
				2. North Star Program Coordinator presented to superintendents of schools re: what a successful referral process looks like. More info to come.
			2. LP, anecdotal: Schools have noticed an increase in anxiety attacks, potentially related to COVID.
		1. RK expressed concern for crisis protocol, citing conversations with MLPD regarding frustration around the lack of response from BH during crisis calls, especially if the person in crisis is intoxicated
			1. IB stated that it is not MCBH’s role to go to the field for intoxicated individuals. That the Mobile Crisis Response Grant will equip LE and EMS with tablets to quickly connect those in crisis with BH staff, when appropriate. Overall call volume for these scenarios does not support paying for a position to have in-person field response from BH staff.
			2. AG stated that MCBH has not received that feedback before, and that cooperation and collaboration with MLPD is going really well. AG expressed importance and timeliness of Mobile Crisis Response grant and upcoming introductory trainings as an opportunity to gather feedback and refine process as necessary. AG suggested using this as a future BHAB discussion topic after introductory trainings have been hosted.
				1. IB suggested setting up a process for off-hours response to these types of calls (intoxicated, potential crisis)
		2. Q15: **Stresses on BH services for adults**:
			1. RK inquires MCBH Crisis procedure – how do those in crisis get connected with BH staff, and what about those in crisis who don’t get a response?
				1. AG: MCBH is alerted of crises via Emergency Departments. Person in crisis is transported to ED; ED screens for substances; if client is intoxicated they are given time to sober up, then BH is asked to perform an assessment.
				2. RK expressed concerns for those who go into crisis and don’t get a response; consequences can be severe

AG will send RK the Mobile Crisis Response Grant MOU to clarify BH’s role in crisis procedures

RK expressed wanting to help (outside of professional capacity)

LP recommended MHFA courses

* + 1. Q16**: Ranking of stressors** (Q15), adults:
			1. Consensus similar to children and youth ranking, that risk of life is most important – decided in order of importance: d. ED Admissions; e. ED visits related to SUD; f. Increased crisis interventions;
		2. Q17: **Comments or concerns re: COVID-19 impact on BH services for adults:**
			1. CB the Coping with COVID series was really good for supporting the community with stressors resulting from pandemic: Isolation, inability to work, lack of sick time, etc.
			2. DA inquired about metric of how many people during COVID accessed telehealth, and if telehealth has been successful (client retention)
				1. MR: Data notebook last year and this year touches on success of telehealth services – expanded service availability for certain populations, made it more difficult for others, but overall feedback (internal, anecdotal, and data from Data Notebook) seems to deem it a success
			3. CB stated consideration of Mono’s tourist driven economy and transient populations
		3. Q25: **Populations whose service delivery was adversely affected by COVID-19:**
			1. CB expressed that Latino/Hispanic and Native American/Alaskan Native populations were adversely affected. Perspective in part from Health Department and COVID 19 screening.
				1. DA asks CB how Latino/Hispanic populations were affected: Poor messaging, cultural stigma and attitudes towards MH?

CB Does not have experience for this answer. From Health Dept perspective, hours for testing and vaccinations were a barrier for those with long work hours

* 1. Approval of authorizing staff to finalize and submit Data Notebook responses
		1. Motion to Approve – S. Corless
			1. Second – D. Addis
				1. S. Corless – Yay
				2. D. Addis – Yay
				3. C. Balliet – Yay
				4. R. Knutson – Yay
				5. I Braun – Yay
			2. Motion Carries! MCBH Staff authorized to submit responses for Data Notebook.

1. Action Items: Circling back to approval of minutes from last meeting + AB361 resolution
	1. Motion to approve both action items – I. Braun
		1. Second – R. Knutson
			1. CB – Yay
			2. RK – Yay
			3. IB – Yay
			4. DA – Yay
		2. Motions seemingly carry…we need to confirm what number constitutes a quorum (4 or 5 board members)?
			1. CB Quorum is the amount of board members divided by half + 1
				1. MR expresses lack of clarity in how many board members we have right now; AG and MR will look into this
			2. IF a quorum was not met, these will become action items at next meeting.
2. Board Member Reports
	1. CB – Salvation Army now giving out perishable food items; thank you to RK for help transporting items. Interested in attending the BOS meeting re: MMCU grant
	2. RK – Previously expressed update re: LE stating lack of response from BH staff during crisis
	3. IB – nothing to report
	4. DA – nothing to report
3. Participant Reports: K
	1. KC (social services): Looking forward to collaborating with Wendy in Benton. Requested copy of MMCU MOU, see if there is cross over with Adult Protective Services (APS) and crisis.

4:16 meeting adjourned.

1. Confirm date and adjourn to next meeting
	1. **October 10th 2022 3:00 – 4:30pm**

Link: <https://monocounty.zoom.us/j/7609241729>

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In compliance with the Americans with Disabilities Act, anyone who needs special assistance to attend this meeting can contact the Behavioral Health Department at 760-924-1740 within 48 hours prior to the meeting in order to ensure accessibility (see 42 USCS 12132, 28CFR 35.130). MONO COUNTY BEHAVIORAL HEALTH DEPARTMENT P. O. BOX 2619 MAMMOTH LAKES, CA 93546 (760) 924-1740 FAX: (760) 924-174