

**MINUTES – Mental Health Services Act (MHSA) Steering Committee 07/10/2018**  
**Location: Eric Rood Center, Providence Mine Room, Nevada City, CA**

**1. Welcome & Introductions/Announcements.**

The meeting was called to order by Priya Kannall. Self-introductions were made. A sign in sheet was placed on the table for all to sign. Priya announced the Section 8 (Housing Choice) waitlist is open. Annette announced Discount Prescription Cards can save money on prescriptions that are not covered by insurance. The card can be used for pet meds. Cards were handed out at the meeting. Contact Annette if you need more cards. Teresa Crimmens announced the Truckee Family Resource Center is recruiting for a bilingual (Spanish and English) family advocate.

**2. Public Comment.**

Priya Kannall asked if there were any public comments related to the Mental Health Services Act (MHSA). There were no public comments.

**3. Director of Behavioral Health – Phebe Bell.**

Behavioral Health received approval from the State Department of Health Care Services and Federal Government to go live with the Organized Delivery System (ODS). This will allow us to bill for services that we were not able to bill for in the past. Medi-Cal participants are now eligible for up to 3-30 days stays in residential treatment, case management and post recovery services. Medical necessity criteria must be met in order to assign someone to a certain level of treatment. The criteria are from the American Society of Addiction Medicine (ASAM). A screening tool and an in-depth assessment are used to determine what level of treatment is the most appropriate. Medication Assisted Treatment (MAT) is another treatment option available under ODS. Behavioral Health will have to pay the Medi-Cal match for treatment services and board and care cost costs for residential services. There is also accountability, regulation and oversight that come along with ODS that staff are busy complying with. We are one of two small Counties in the State that was approved to implement ODS.

The California State budget was passed. There were some last minute additions to the budget that will benefit mental health services and services for those who are homeless with mental illness.

There have been several grant funding opportunities that relate to keeping those with mental illness out of jail.

**4. Mental Health Services Act (MHSA) Updates – Priya Kannall. Handouts.**

**MHSA Overview**

Priya presented a PowerPoint on MHSA basics. MHSA is funded by a 1% tax on personal income of over one million per year. Funding can be volatile based on economic factors. Five percent of Nevada County's total allocation is set aside for Innovation. Eighty percent of the remaining funds must be spent on Community Services and Supports (CSS). From the eighty percent at least fifty one percent must be spent on Full Service Partnerships (FSP). Twenty percent must be spent on Prevention and Early Intervention (PEI). From the twenty percent at least fifty one percent must be spent on individuals 25 years old or younger.

Other MHSA requirements include: Three-Year Program and Expenditure Plans with Annual Updates, Community Program Planning Process with stakeholder involvement, Annual Progress Reports, and Local Review of Plans (30-day Public Comment Period and a Public Hearing).

General Standards of MHSA Programs/Services are Community Collaboration; Cultural Competence; Client Driven; Family Driven; Wellness, Recovery and Resilience Focused; and Integrated Service Experiences for Clients and Families.

The Suicide Prevention Coordinator Kim Honeywell is retiring. Future plans are to separate this position into a prevention focused position and a separate postvention focused position.

**Legislation Update.**

SB 1004 would establish new PEI program priorities determined by the Mental Health Services Oversight and Accountability Commission (MHSOAC). There has been advocacy for suggested changes. If passed most likely this would take effect in 2020.

No Place Like Home – would provide two billion in bond proceeds to build permanent supportive housing for individuals and families with severe mental illness. No Place Like Home diverts a portion of MHSA funds and would mean a 6% decline in local MHSA funds. It will be on the November ballot. Nevada County intends to apply for the non-competitive (\$500,000) and the competitive funds (funding amounts are unknown).

**New MHSA Regulation Updates Prevention and Early Intervention (PEI) and Innovation.**

Previously providers only had to track referrals to other mental health programs, now PEI providers will also need to track referrals to County Mental Health Programs. Referrals must now be a recommendation in writing to a service provider.

For both PEI and Innovation Programs we are no longer required to collect demographic information on sexual orientation, gender identity and veteran status from children age 12 and under.

**Fiscal Update.**

Fiscal handouts were handed out at today's meeting. Priya asked for feedback on the fiscal information: is it helpful? Is it clear? Is it too much information? Feedback: the font size is too small. There was a question on how much in MHSA funds go to homelessness. There is funding under Hospitality House and Project Mana for a homeless outreach worker. There was a question as to if a mental health therapist visits the homeless camps. There is not a therapist visiting the camps and warming center. Service Coordinators visit the camps for outreach, engagement and building relationships. Our MHSA plan includes everything we may want to do if we had unlimited funding. For Fiscal Year 2018/19 it is projected there will be a 6% decrease in MHSA funding. Our goal is to spend prior year funding and use current year funding as a buffer against fund fluctuation. There was feedback that the information presented is helpful. A preference to see the budget information after all of the invoices have been turned in.

**Community Planning Process.**

Priya reviewed the Regulation for community involvement.

Counties shall demonstrate a partnership with constituents and stakeholders throughout the process that includes meaningful stakeholder involvement on mental health policy, program planning and implementation, monitoring, quality improvement, evaluation and budget allocations. Priya is looking at how to expand the community planning process beyond the group that typically attends the MHSA Steering Community Meetings.

There was a comment that we never see a Board of Supervisor member or City Officials attend the meetings. To know about the mental health needs of our community that includes mentally ill

homeless it would be great to have elected officials attend our meetings.

Ideas include: creating one page fact sheets on MHSA, a list of providers and programs, individual and/or group trainings or focus groups, surveys and polling. Priya asked attendees for other ideas. You can email any ideas you have to [Priya.Kannall@co.nevada.ca.us](mailto:Priya.Kannall@co.nevada.ca.us). There was a comment to make better use of social media. Another comment for a fact sheet to list providers with information on services would also be a great resource for case managers and providers. Adult Services attends many health fair events and Tamaran Cook offered to take any resource materials we have to events they participate in. Priya took a poll on holding some evening meetings. There was some feedback that it might bring new people to the meetings and help educate the public about MHSA Programs.

**5. Turning Point Presentation – Carol Stanchfield. Handout.**

Carol brought copies of the Fiscal Year 2016/17 Annual Report and brochures. Turning Point Community Programs Providence Center is a program that provides intensive services to adults with severe and persistent mental illness that began in 2008 in Nevada County. The Insight Respite Center is peer run and managed by Turning Point. Turning Point also contracts with Nevada County for Integrated Services that include service coordinators to provide outreach and engagement. Turning Point is a Full Service Partnership (FSP) that provides services to adults 18 years and older who need more intensive services than an outpatient program can provide. Services address mental health issues, homeless status, basic needs, applying for benefits, medical issues and substance use disorder. Outcome data includes hospitalization, crisis contacts, homelessness, and incarceration. Turning Point has a ratio of no more than 10 clients for one staff person and uses a team approach. Clients see a psychiatrist at least once a month and more often when they are new. There are at least two contacts per week with every client. One third of the clients receive medication outreach, it provides social contact and support for clients who struggle with symptoms and may get confused about their medication. Limited insight is one of the biggest barriers to individuals engaging in treatment. Turning Point has an Assisted Outpatient Treatment (AOT) Program. There are approximately 5 people per year who meet the criteria for this program. Since 2008 there have been 142 referrals for AOT resulting in 55 court orders. Client outcomes even for individuals who do not believe they have a mental illness, 87% feel they are doing better. Carol announced the Insight Respite Center has been billing Medi-Cal as of July 1<sup>st</sup>.

**6. Innovation Update – Priya Kannall**

Based on stakeholder input Behavioral Health staff has met to work on ideas for an Innovation Plan that would focus on homelessness. There will be more information and some focus group meetings coming soon. Our current Innovation Plan includes a case manager Katie Rendinaro in the Tahoe Truckee area. This position is funded by Placer and Nevada County. Her current caseload for Nevada County is approximately 8 people. Katie helps individuals with daily living activities, job development, housing and connecting to treatment.

**7. Next Community Meeting: November 1, 2018 from 1:00 – 2:30 pm in the Empire Room.**

Minutes by Annette LeFrancois, Administrative Assistant with the Health and Human Services Agency.