

INYO COUNTY HEALTH AND HUMAN SERVICES
BEHAVIORAL HEALTH ADVISORY BOARD
MONDAY, December 14, 2020
10:00-11:15 am
Virtually Held via Zoom
Minutes

Informational Only/No Quorum

CALL TO ORDER

The Meeting was called to order at 10:03 a.m.

INTRODUCTIONS

All present via Zoom introduced themselves.

APPROVAL OF MINUTES

November 9, 2020 Minutes – Informational Only, No quorum.

COMMUNITY & STAFF Virtually PRESENT

Supervisor Dan Totheroh
Dr. Gail Zwier
Lynn Martin
Karen Colter
Lucy Vincent
Peter Charley
Jennifer Ray

Lisa Trunnell
Dan David
Jane Gillam
Peter Charley
Vanessa Ruggio
Stephanie Tanksley

CHAIRPERSON'S REMARKS

Jane Gillam, acting as Chairperson.

DIRECTOR'S REMARK

Dr. Zwier shared that on the Federal level (SAMHSA), there's been some discussion about, and a proposal to add an additional number to the 911 for medical emergencies. It would be 988, as a mental health emergency number for behavioral health emergencies. It is not in place yet. A lively discussion ensued about how this might be an improvement in parity between physical and mental-health concerns and how they are handled. Perhaps a mobile crisis team might be dispatched in response to a behavioral health emergency. Discussed how it might result in a look at ways to further build out behavioral health crisis systems.

Dr. Zwier also informed the group that we are looking for ways of streamlining our referral process. A lively discussion ensued. Stephanie Tanksley talked to the group about how forms, such as the release of information and referral form, have been

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shortened to ease the process. Jane Gillam is happy to hear that this is being addressed, as we are an organization set up to help people, and we need to remove barriers to help people feel welcome and trust us to provide this assistance. She is grateful for sensitivity and awareness around this.

PUBLIC COMMENT

Among other things, the group discussed the fact that our annual Holiday Party at Progress House has been cancelled due to Covid19 restrictions against gatherings. Participants expressed regret that this would not take place. It was suggested that perhaps doing “Christmas in June” or at a later in the summer, in anticipation that Covid19 restrictions may be over by then and we could celebrate coming out from the pandemic. This will be brought back to the table at a later time.

Lynn Martin brought up and the group also discussed the usefulness of mindfulness and yoga or other types of movement to address anxiety or other issues. Jane Gillam expressed gratitude that Behavioral Health is open to concepts and ideas that will be used beyond the pandemic; finding the energy to forge ahead despite the constraints of the pandemic.

REPORTS AND ACTION ITEMS

QI Committee Meeting Report

- Shifts in staffing: Mikaela Torres informed the group that Ralph Cataldo will be helping more with QIC, beginning in January. More QIC reporting then. Stephanie Tanksley added that Kristen Pfeiler has been reassigned full time to public health Covid19-related activity and Mikaela Torres has taken on her workload.
- Audits and reviews: the Triennial review will take place in July and the SUD and yearly external quality review (EQRO) will take place in April. We are in the midst of preparing for those.
- Diversity/Inclusion Committee – Cultural Competency Plan: the pandemic and related incidents have highlighted racial/cultural inequities. A workgroup has been recently started made up of HHS staff to look at ways for our organization to shift to being more equitable, inclusive and diverse. The work will start internal to the organization and will move to the broader community.
- Bilingual training in Bishop – every employee who has self-identified as being bilingual will attend a 40 hour basic training. There will be an additional special training for HHS. We also have a Language Line Application which has been pushed out to County iPhones so access to interpreters is instant.
- PIPs – Performance Improvement Projects. Two are due yearly. This year we will do a non-clinical PIP on Hospitalizations and a second PIP – Engagement & Satisfaction Survey done with youth. We investigated what kids want and where they would prefer to meet. We are trying to increase community engagement by linking group activities with community events.
- Resiliency Collaborative: a community-wide collaborative bringing a focus on trauma-informed care. This is also an avenue to address equity issues.

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SUD Prevention Services Report: received from April Eagan

- The Mentor Program continues to engage with mentees and parents by any means necessary. It is our goal to let them know that this program is still continuing. Some of the mentors are staying in contact with their match, but as you can imagine it has been a struggle for everyone. The program did have another mentor pass her background check. We are waiting for youth to sign up for the Mentor Program. We do have 4 available female mentors waiting to be matched. This month we did match male mentor with a male youth!!

We are planning another drive thru take home holiday dinner for the youth and families.

The light is at the end of tunnel, and it's not a train.
Happy Holidays!

PROGRESS HOUSE RESIDENT MEETING REPORT by Gina McKinzey:

- Population this past month remained at 7 residents. Guidance and restrictions around new admissions both for new residents and for people in need of respite. Staff and residents are healthy and well.
- We are sheltering in place for the most part, due to the current restrictions.
- We still have a couple of groups that meet via Zoom weekly: a music group with Orion and a craft or daily living skills group with Carri.
- After hour calls – we are receiving calls from persons who are experiencing loneliness in addition to persons in crisis.

WELLNESS CENTERS: Vanessa Ruggio and Dr. Zwier shared the following:

- Field based services – Case managers continue to assist clients to stay engaged and help them keep their appointments.
- Showers by appointment only – persons sign-up to use the shower or to do laundry. Only one person is admitted at a time.
- Case managers are still delivering meals to people in hotels
- Case managers serve in crisis on-call response.
- Case managers assist in medication delivery.
- Vanessa and Gina attended three days of Strengths model training last week.

Dr. Zwier shared how using the Strengths model helps caseworkers work with clients to help them identify their strengths, believe in themselves and discover and take steps towards meeting their own goals. Incorporating racial and cultural equity is important – making sure that all persons are lifted up and treated equally. She stated, “We need to take measures to address when we see racial inequities.” For example; there is an over-representation of persons of color in the jail.

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In discussing Wellness Center services, Dr. Zwier told the group about a report that came out of San Bernardino County which pertained to approaching persons who have mental illness and who are homeless. They found that it takes around 40 outreach encounters before trust can develop. She said Wellness Center Staff can attest to the fact that it takes many outreach efforts to gain people's trust. "When you add cultural differences to this, it can make it even trickier." It takes persistence and perseverance! Participants voiced support for these efforts and the need to continue to use the strengths model in the work.

Reports received from Chrystina Pope, LMFT:

Youth Services

- ❖ Child and Family team continues to be flexible in meeting youth needs in our community. Changes in school setting, fluctuating between distance learning and in school has proven stressful for youth and family. Some families seem to have found a rhythm with this and are open to 'regular' services, yet others remain in a crisis due to the disruption of the school structure. It is a continual struggle to access some youth in this situation, we continue to provide services via phone, zoom and in person. The stay at home order has restricted some of our services as we would transport the youth for session, which provided the youth with some relief and space to process. We continue to meet all of our clients where they are at and offer rehab-services/ individual/ family therapy.
- ❖ The refining of the referral process has been a great support to our community. There is more ease in adding/combining services that most fit the family's needs at this time. There seems to be a need for more wrap around services for the high severity families we serve.
- ❖ Child and Family team is introducing an invitation to Create Art for our clients, the theme is Belonging. The art will then serve as a background for posters/ book marks for Inyo County 1-800 access line phone number. This is to support new suicide prevention measures put in place by Northstar counseling center. The need to have the 1-800 access line number available became apparent in outlining suicide prevention protocol with teachers. Our plan is to place the posters/book marks showcasing youth art in school offices county wide and other places seen fit to support suicide awareness and build more ease to accessing our services.
- ❖ There continues to be a steady stream of intakes for the child and family team.
- ❖ Perla Gastelum is providing Spanish speaking services which are assisting many youth with parents who are monolingual to understand more about mental health. She is building communication between the youth and parent, as well as for the parent and community services. This is valuable and much needed community support.

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Adult Therapeutic Services

- ❖ Adult staff continues to assist our clients and deepen into their clinical skills. They are focusing on intake procedure and medical necessity to inform the needs of the client and referrals needed to support overall care for the client. This is enabling them to continue to navigate the weekly intakes they are experiencing.
- ❖ There is more interagency support throughout the teams and communication when necessary with CPS/SUD/ Child and family team as we are at times serving one family in many ways. With a ROI the family's needs and strengths are more readily highlighted.
- ❖ Adult therapist will be facilitating more groups in January, beginning with co-facilitating in the SUD program, specifically in treatment groups: Co-Occurring, Woman's and developing a family group. Perla Gastelum is offering a Spanish Woman's support group beginning mid-December.

SUD Treatment Services

- ❖ The SUD program is in the process of creating newness within the program, beginning with co-lead groups in January and further collaboration with Prevention.
- ❖ Spanish speaking DUI group provided by Perla Gastelum begins mid-December.
- ❖ There are two possible interns awaiting background clearance for volunteering in the SUD program. This will also allow for some innovation in the SUD program.
- ❖ A new coverage protocol has been established for therapists covering groups for addiction counselors which have eased stress within the program.

OLD BUSINESS

MHSA priorities – Dr. Zwier noted that our funding will not be increasing this year, due to the effects of the pandemic. Although we may not offer different types of services, we want to focus on how we can make our services more welcoming to persons of different cultural backgrounds, including LGBTQ, the Latinx population and the Native American population. We are excited to find that the time is right for us to look at what would make more people interested in coming to the Wellness Center or to Progress House. Do we have more persons of color going to jail rather than addressing their behavioral health issues in a different way?

Stephanie Tanksley shared that Mikaela Torres is working on some key informant surveys. We will pick experts from our partner agencies to find out how we can become more welcoming to diverse groups. Ms. Torres shared some of the questions contained in these surveys with the group. She explained that this will be a conversational rather than a written survey. The surveys will help us determine community awareness of current services offered, how we can disseminate the information better, where our efforts should be focused; based on stakeholder input. Specific questions will be answered to get specific answers so that improvements can be made in meeting the needs of the diverse

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populations in our community. The group conversed about ways to increase awareness of the Wellness Center and resources available there. The group also explored sharing information across community partners, by way of website links or community bulletin boards.

A community member brought up some concerns with the use of “Behavioral Health” as suggesting that it connotes behaving as this may be stigmatizing. This will be discussed further in coming meetings.

NEW BUSINESS

AGENDA ITEMS FOR NEXT MEETING

The QIC Report

The next meeting to be virtually held will be held on January 11, 2020 at 10 am.

The meeting adjourned at 11:16 am.

Transcribed by:

Lucy Vincent