

**BEHAVIORAL HEALTH ADVISORY BOARD**  
**General Meeting**  
Monday, May 20, 2019, 1:00 – 3:30 p.m.  
Ventura County Behavioral Health (VCBH)  
1911 Williams Drive, Training Room • Oxnard, CA 93036

**AGENDA**

- I. Call to Order and Pledge of Allegiance
- II. Approval of the Agenda – **ACTION**
- III. Approval of the April 15, 2019 Minutes – **ACTION**
- IV. Welcome and Introductions
- V. Public Comments (3 min. per speaker)
- VI. Recognition: Frances O’Sullivan, M.D.
- VII. Chair’s Report (5 min.)
  - A. Events and Announcements – Janis Gardner, Secretary (5 min.)
- VIII. Board Members Comments and Announcements (3 min. per speaker)
- IX. Presentation: Assist Update – Dr. John Schipper, VCBH Adult Division Chief (20 min.)
- X. Director’s Report – Dr. Sevet Johnson (10 min.)
- XI. Secretary’s Report – Janis Gardner (5 min.)
- XII. BHAB Committees Reports (5 min. each)
  - A. Adult Services Committee – Nancy Borchard and Gane Brooking, Co-Chairs
  - B. Prevention Committee – Janis Gardner, Chair
  - C. Transitional Age Youth (TAY) Committee – Margaret Cortese, Chair
  - D. Youth & Family Committee – Denise Nielsen, Chair
- XIII. New Business
  - A. Slate of Officers for Fiscal Year 2019-20 – Nominating Committee
  - B. Overview of the 2017 Data Notebook for Older Adults and Overview of the 2016 Project on Behavioral Health Services for Children and Youth in California
  - C. Transitional Age Youth (TAY) Committee BHAB Membership
  - D. Request for California Association of Local Behavioral Health Boards & Commissions (CALBHB/C) Training – Update
  - E. CALBHB/C Los Angeles/Southern Region Meeting and Training, June 21-22, Santa Ana
  - F. Annual Report Preparation – Review Mission, Vision and Objectives
- XIV. Old Business
  - A. Mental Health Services Act (MHSA) Plan Annual Update – Public Hearing
  - B. 2018 Data Notebook - BHAB Letter to California Behavioral Health Planning Council
  - C. Follow-up to the BHAB Letter to the Board of Supervisors Regarding Institutions for Mental Diseases (IMD) Exclusion Waiver
  - D. VCBH Budget Presentation Update
  - E. Crisis Stabilization Unit (CSU) Update
  - F. Future Presentations
  - G. Future Recognitions

Members of the public making oral presentations to the Board in connection with one or more agenda or non-agenda items at a single meeting are limited to a cumulative total time not to exceed (5) minutes for all of their oral presentations at such meeting unless otherwise provided. The entire public comment period is limited to no more than (20) minutes total for all speakers. NOTE: The Chair may limit the number or duration of speakers on a matter. In compliance with the Americans With Disabilities Act, if you need special assistance to participate in this meeting, please contact Behavioral Health Administration at (805) 981-6830. Reasonable advance notification of the need for accommodation prior to the meeting (48 hours advance notice is preferable) will enable us to make reasonable arrangements to ensure accessibility to this meeting.

XV. Contracts

- A. Board of Supervisors Approved Agreements – April 9, 2019
  - 1. Mental Health Services Act (MHSA): Conocimiento Innovations Project
- B. Board of Supervisors Approved Agreements – April 23, 2019
  - 1. Alcohol and Drug Programs (ADP): Dennis M. Giroux & Associates, Inc. (DMG) First Amendment
  - 2. No Place Like Home (NPLH) Program Noncompetitive Allocation Funds
- C. Board of Supervisors Approved Agreements – April 30, 2019
  - 1. Telecare Corporation Assisted Outpatient Treatment Services Amendment

XVI. Public Comments (3 min. each)

XVII. Adjourn

**Next Meeting: Monday, June 17, 2019**

Members of the public making oral presentations to the Board in connection with one or more agenda or non-agenda items at a single meeting are limited to a cumulative total time not to exceed (5) minutes for all of their oral presentations at such meeting unless otherwise provided. The entire public comment period is limited to no more than (20) minutes total for all speakers. NOTE: The Chair may limit the number or duration of speakers on a matter. In compliance with the Americans With Disabilities Act, if you need special assistance to participate in this meeting, please contact Behavioral Health Administration at (805) 981-6830. Reasonable advance notification of the need for accommodation prior to the meeting (48 hours advance notice is preferable) will enable us to make reasonable arrangements to ensure accessibility to this meeting.



**California Association of Local Behavioral Health  
Boards and Commissions**

**Registration:** [www.calbhbc.com](http://www.calbhbc.com)

**Questions:** [info@calbhbc.com](mailto:info@calbhbc.com)

Registration for all sessions is open to mental/behavioral health board/ commission members and staff liaisons.

**CALBHB/C Los Angeles/Southern Region Meeting & Training  
Friday, June 21 and Saturday, June 22, 2019 in Santa Ana, CA**

*Location changes Friday at 12 pm. (Short walk between neighboring hotels.)*

**FRIDAY, June 21, 2019 – CBHPC Meeting - Embassy Suites, 1325 East Dyer Road, Santa Ana**

**8:30 am – CBHPC General Session**

*The CBHPC General Session is open to the public. CBHPC is a state council.*

**8:40 am – CALBHB/C Update to CBHPC**

**9:00 – 11:00 am – CBHPC Small Group Discussions: Community**

**Mental/Behavioral Health needs. Stakeholder input**

**encouraged** to inform the Federal SAMHSA Block Grant Application

**12:00 pm – CALBHB/C Meeting \* Holiday Inn, 2726 South Grand Avenue, Santa Ana**

- **CALBHB/C Regional Meeting Working Lunch** (provided by CALBHB/C)
  - Welcome and Introductions **CALBHB/C President Benny Benavidez**
  - Update from **MHSOAC** – Update on Policy Projects (*TBA*)
  - MHSOAC Stakeholder Presentation (*TBA*)
  - Update from **CBHPC Executive Officer, Jane Adcock**

**1:30 pm – 4:30 pm ACCESS CA Training: MHSOAC Community Program Planning, Ensuring Community Stakeholder Input.**

Access CA is a program of NorCal MHA.

*Access CA Director of Advocacy Andrea Crook and Assistant Statewide Advocate Tiffany Carter*

**SATURDAY, June 22 – CIBHS Training - Holiday Inn, 2726 South Grand Avenue, Santa Ana**

**8:30am – Coffee & Sign-In**

**9:00 am – Introductions & Resource Overview**

*CALBHB/C Executive Director, Theresa Comstock*

**9:30 am – 2:30 pm – Mental/Behavioral Health Board Training - “Responsibilities & Reality” & “Tools of Effective Boards/Commissions”**

Lunch provided by CIBHS. *Instructor: Susan Wilson*

**ACRONYMS:**

**CALBHB/C:** CA Association of Local Behavioral Health Boards & Commissions

**CIBHS:** CA Institute for Behavioral Health Solutions

**CBHPC:** CA Behavioral Health Planning Council

**MHA:** Mental Health America

**MHSOAC:** Mental Health Services Oversight and Accountability Commission

*CALBHB/C supports the work of CA's 59 local Mental/Behavioral Health Boards & Commissions*

**VENTURA COUNTY**  
**BEHAVIORAL HEALTH ADVISORY BOARD**  
For Review During the BHAB General Meeting of May 20, 2019

**MISSION**

6/18/18

The mission of the Behavioral Health Advisory Board is to advocate for members of the community living with mental illness and/or substance use disorders and their families. This is accomplished through the assessment of data, support, review and evaluation of evidence-based treatment services provided and/or coordinated through the Ventura County Behavioral Health Department, with consumers, community and stakeholder involvement.

**VISION**

6/18/18

A society where equity exists in the provision and funding for behavioral health services. Mental wellness is achieved by Ventura County Behavioral Health's commitment to ensure that every client receives appropriate housing, whole person care which includes, but is not limited to, behavioral health services, a primary care physician, preventive and dental care, and the elimination of the stigma that surrounds Behavioral Health clients.

**OBJECTIVES 2018-2019**

6/18/18, updated 10/15/18

**Youth & Family Committee**

Advocate for the re-creation of psychiatric hospital beds in the county for the pediatric population.

**Transitional Age Youth (TAY) Committee**

Identify strategies, including advocacy, to address gaps in services for the Transitional Age Youth (TAY) population related to mental health and substance abuse treatment, housing options, work and volunteer opportunities, and the justice system.

**Adult Services Committee**

1. Advocate for effective assessment and referral for individuals in crisis at the Hillmont Psychiatric Center in cooperation with local hospitals and law enforcement, with particular emphasis on developing a Crisis Stabilization Unit and increasing inpatient beds, both public and private, within the community.
2. Advocate for increased services to the older adult population.

**Prevention Committee**

Promote cannabis education and awareness.

## Ventura County Behavioral Health

### Board Letter Summary of Contracts for April 2019

Board Date	Contractor	Amount	Term	Description
4/23/2019	Dennis M. Giroux & Associates, Inc. (DMG)	\$180,969	12/1/18 to 6/30/19	The DMG contract was amended to decrease the maximum contract amount from \$322,013 to \$180,969 (a decrease of \$141,044) and to modify unit rates.
4/30/2019	Telecare Corporation	\$1,062,226	11/1/16 to 6/30/18	The Telecare Corporation Assisted Outpatient Treatment (AOT) Services contract was amended to: (1) increase the Ventura County Maximum Allowance (VCMA) unit rates, (2) decrease the start-up and outreach and engagement budgets, and (3) reduce the maximum amount of the agreement from \$1,188,032 to \$1,062,226 (a decrease of \$125,806).

## MEMORANDUM

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**DATE:** May 7, 2019  
**TO:** Behavioral Health Advisory Board  
**FROM:** Contracts Administration  
**SUBJECT:** Board of Supervisors Approved April Agreements/Board Items

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### Executive Summary

#### Board of Supervisors Approved Agreements – April 9, 2019

##### **1. Mental Health Services Act (MHSA): Conocimiento Innovations Project.**

*This item recommended that the Board of Supervisors authorize the Ventura County Behavioral Health (VCBH) Director or designee to sign and submit the MHSA Innovation Project, Conocimiento: Addressing Adverse Childhood Experiences (ACE) through Core Competencies, to the Mental Health Services Oversight and Accountability Commission (MHSOAC). The project amount is \$1,047,100 over the four-year period of FY 2019-23.*

Under the MHSA, counties are expected to develop innovative projects and use the information learned from such projects to improve the behavioral health care system. VCBH has developed a four-year MHSA Innovations Project titled Conocimiento: Addressing ACEs through Core Competencies.

Years of research show a correlation of experiences in childhood, Adverse Childhood Experience (ACE), as having predictive health and functioning risks for adulthood. An ACE is defined as childhood physical, verbal, or sexual abuse, witnessing parental domestic violence, parental divorce, and living with someone who was experiencing mental illness, abused drugs or alcohol or who had been incarcerated. Prolonged experience of poverty has also been considered an ACE. Protective experiences and well-developed coping skills are effective equalizers to a significant ACE and the ongoing stress of living in poverty. One way to build these skills is through regular family dinners, which incorporate many of the resiliency strategies naturally; however, given the irregular schedules of the working poor, regular family dinners are not always feasible.

Core competencies can be developed at any age. The proposed MHSA Innovations Conocimiento Project is designed to promote the development of the following four competencies, as developed through research by The Center for the Developing Child at Harvard: (1) facilitating supportive adult relationships, (2) building a sense of self-efficacy and perceived control, (3) providing opportunities to strengthen adaptive skills and self-regulatory capacities, and (4) mobilizing sources of faith, hope and cultural traditions. Focus on each of these areas will take place over a four-year period to build resilient youth between the ages of 13 to 19 years of age.

VCBH recommended approval for the VCBH Director or designee to sign and submit the MHSA Innovation Conocimiento Project for MHSOAC approval.

**Board of Supervisors Approved Agreements – April 23, 2019**

**1. Alcohol and Drug Programs (ADP): Dennis M. Giroux & Associates, Inc. (DMG)  
First Amendment.**

*This item recommended approval of an amendment to the DMG agreement to decrease the maximum contract amount from \$322,013 to \$180,969 (a decrease of \$141,044) and to modify unit rates, effective December 1, 2018 through June 30, 2019.*

VCBH contracts with DMG to provide outpatient and intensive outpatient services, in accordance with federal regulations and Department of Health Care Services (DHCS) substance use disorder (SUD) services standards. Services are provided to Drug Medi-Cal eligible beneficiaries and non-Medi-Cal eligible Criminal Justice referred clients. These treatment standards pertain to quality and effectiveness through a system of documented continuous review, evidence-based practices and program improvements based on established outcome measures and performance.

In December of 2018, VCBH transitioned to the Drug Medi-Cal Organized Delivery System (DMC-ODS) service delivery model. DMG estimated that with the new service delivery model, more beneficiaries would receive SUD services and the contract budget was estimated based on the increased number of clients and units of service. The implementation of the new service delivery model for DMC-ODS was difficult to estimate. Since December 1, 2018, DMG has served fewer clients than previously estimated. As a result, through the First Amendment to the Agreement, VCBH reduced the maximum Agreement amount to \$180,969 and revised the DMC-ODS treatment service unit rates.

VCBH recommended approval for the VCBH Director or designee to sign the First Amendment to the Agreement for DMC-ODS SUD services with DMG, to decrease the maximum contract amount from \$322,013 to \$180,969 (a decrease of \$141,044) and modify unit rates, effective December 1, 2018 through June 30, 2019.

**2. No Place Like Home (NPLH) Program Noncompetitive Allocation Funds.**

*This item recommended approval for the VCBH Director or County Executive Officer (CEO), in conjunction with Development Sponsor(s), to apply for and, if awarded, to accept the NPLH Program Noncompetitive Allocation. The NPLH Program Noncompetitive Allocation amount for Ventura County is \$1,600,000 and is for eligible costs of development.*

On July 1, 2016, Governor Brown signed legislation enacting the NPLH Program to dedicate \$2 billion in bond proceeds to acquire, design, construct, rehabilitate, or preserve permanent supportive housing for persons who are in need of mental health services and are experiencing homelessness or chronic homelessness or who are at-risk of chronic homelessness. The NPLH Program takes a “housing first” approach which is considered a best practice by many homeless advocates and social service experts. Counties that receive NPLH Program Noncompetitive Allocations for permanent supportive housing must offer flexible, voluntary, and individualized supportive services. Counties must commit to provide mental health supportive services to tenants for at least twenty years and help coordinate access to other community-based supportive services, including, but not limited to, substance use disorder services.

Of the \$2 billion in funding available, \$190 million are to be distributed as noncompetitive allocations. These allocations are loans administered by the California Department of Housing and Community Development (DHCD), allocated pursuant to Welfare and Institutions Code section 5849.8, and shall be in the form of secured deferred payment loans for eligible costs of development. The noncompetitive allocation is based on the County’s proportional share of the state’s homeless population as measured by the U.S. Department of Housing and Urban Development’s most recent published unsheltered and sheltered Point-In-Time Count. The NPLH Program Noncompetitive Allocation amount for Ventura County is \$1,600,109.

The County will have until February 2021 to identify and submit the project application(s), in conjunction with Development Sponsor(s), to DHCD for the NPLH Program Noncompetitive Allocation and is planning on releasing a request for proposals to developers in June 2019. To receive the allocation, the County is required to submit a resolution from the Board authorizing, among other things, the VCBH Director or CEO to submit one or more Project applications, within 30 months of the August 15, 2018 issuance of DHCD’s initial Notice of Funding Availability, proposing utilization of any NPLH Program Noncompetitive Allocation awarded to the County. If awarded, the resolution would authorize the VCBH Director or CEO to sign appropriate NPLH Program Documents which include, but are not limited to, the DHCD’s standard agreement which may include provisions related to supportive services, regulatory agreements, deeds of trust, and promissory notes.<sup>1</sup>

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<sup>1</sup> Since NPLH Program Noncompetitive Allocations are allocated in the form of loans directly to the Development Sponsor(s), any promissory notes and related documents will be signed by and be the responsibility of the Development Sponsor(s).

VCBH recommended approval for the VCBH Director or CEO, in conjunction with Development Sponsor(s), to apply for and, if awarded, to accept the NPLH Program Noncompetitive Allocation. VCBH further recommended adoption of a resolution authorizing the actions described above. In addition, VCBH also recommended authorization for the VCBH Director or CEO to sign and submit appropriate NPLH Program Documents required for acceptance of the NPLH Program Noncompetitive Allocation, subject to County Counsel approval.

**Board of Supervisors Approved Agreements – April 30, 2019**

**1. Telecare Corporation Assisted Outpatient Treatment Services Amendment.**

*This item recommended approval of an amendment to the Telecare Corporation Assisted Outpatient Treatment (AOT) Services contract to: (1) increase the Ventura County Maximum Allowance (VCMA) unit rates, (2) decrease the start-up and outreach and engagement budgets, and (3) reduce the maximum amount of the agreement from \$1,188,032 to \$1,062,226 (a decrease of \$125,806), effective November 1, 2016 through June 30, 2018.*

Pursuant to an agreement with the County, Telecare provided AOT services through an assertive community treatment (ACT) model (in what was called the "Assist Program") to clients who met the AOT requirements defined under Laura's Law, codified in California Welfare and Institutions Code section 5345 *et seq.* (Upon the expiration of the agreement on June 30, 2018, VCBH took the Assist Program "in-house" and is providing the AOT services.) All of Telecare's referrals were from VCBH clients who had a serious mental illness and are most at risk for psychiatric hospitalization, homelessness, or incarceration. Due to mental health and/or alcohol and drug issues, clients qualifying for the Assist Program required treatment in order to live safely and productively in the community. The Assist Program includes a strong outreach and engagement component to overcome the many treatment participation barriers experienced by individuals whom the Assist Program was intended to serve. Assist Program services include: mental health treatment, physical health education and assistance, alcohol and other substance abuse education and treatment, assistance with safe and appropriate housing, life skills training, vocational training and counseling, advocacy in criminal justice and social services settings, collaboration and coordination with interagency partners and family/friends, and linkage with peer support programs/wellness and recovery centers. During the period between November 1, 2016 and the end of the agreement on June 30, 2018, Telecare provided services to 6 clients in year one, Fiscal Year (FY) 2016-17 (the first client was enrolled in April of 2017), and an additional 65 clients in year two, FY 2017-18, for a total of 71 Assist Program clients served by Telecare.

During the first eight (8) months of the Assist Program, November 1, 2016 to June 30, 2017, Telecare hired staff to provide services for a projected 30 clients to be referred by VCBH. Unfortunately, over half of the referrals made by VCBH in that period were not made until June of 2017, preventing Telecare from providing enough units of service in FY 2016-17 to cover Telecare's actual costs, even with costs being lower because of a slow start up. During the cost settlement process, VCBH uncovered this issue and worked with Telecare to review all of

MEMORANDUM

Board of Supervisors Approved April Agreements/Board Items

May 7, 2019

Telecare's costs, units of service, and referral numbers and dates. A review by VCBH's Fiscal, Operations, and Contracts divisions determined that Telecare's cost were justified and that referrals from VCBH were less than initially anticipated. To reimburse Telecare for its actual costs, VCBH recommended that the Board approve an increase to the unit rate for each of the contracted service categories to an amount above the VCMA rate in the agreement. The shortfall in reimbursement to Telecare will be covered with a one-time payment in the amount of \$28,566. In addition to the change in the unit rate, VCBH also amended the agreement to reduce the start-up and outreach and engagement budgets in Exhibit "B-1" to reflect the actual costs that were determined in the cost settlement process.

VCBH recommended approval for the VCBH Director or designee to sign the third amendment to the agreement for AOT services with Telecare, to increase the VCMA unit rates and decrease the start-up and outreach and engagement budgets, reducing the maximum amount of the agreement from \$1,188,032 to \$1,062,226 (a decrease of \$125,806), effective November 1, 2016 through June 30, 2018.