

VENTURA COUNTY BEHAVIORAL HEALTH ADVISORY BOARD

**GENERAL MEETING**

MINUTES

**September 20, 2021**

**NEXT MEETING:**

Monday, October 18, 2021

1:00 p.m. – 3:30 p.m.

VIRTUAL MEETING VIA ZOOM

Note: The Behavioral Health Advisory Board has not yet approved these minutes. There may be additions/deletions or corrections before the minutes are accepted in final form.

**BHAB Members Present**

Claudia Armann  
Soledad Barragán  
Ratan Bhavnani  
Nancy Borchard, Member-At-Large  
Gane Brooking  
Kevin Clerici  
Jesse Finkbeiner  
Genevieve Flores-Haro  
Cmdr. James Fryhoff  
Janis Gardner, Secretary  
Jerry Harris, Member (Chair) Emeritus  
Cheryl Heitmann  
Carol J. Keavney  
Supervisor Matt LaVere  
Patricia Mowlavi  
Joe S. Ramirez, 1<sup>st</sup> Vice Chair  
Michael Rodriguez, Chair  
Chris Tejeda, 2<sup>nd</sup> Vice Chair  
Carol Thomas

**BHAB Members Absent**

Jose Estrada  
Jennifer Morrison  
Marlen Torres

**Others Present**

Sherri Block, VCMC/Inpatient Psychiatric Unit  
David Deutsch, Cal State University-Northridge  
Roberta Griego, NAMI Ventura County  
Mary Haffner, Haffner Law Group  
Melissa Hannah, United Parents  
Jeffery Hayden, Hayden Consultants  
Sue Hughes, County Executive Office  
Martha Johnson, Health Care Agency  
Tim Lanquist, Ventura County Sheriff's Office  
Chrissy Ortega, County Executive Office  
Supervisor Linda Parks  
Gina Petrus, Petrus Psychology  
Carole Shelton  
Mark Stadler, Crisis Intervention Team  
Elizabeth R. Stone  
Lorena Suarez, Homeland Language Services  
Tina Wang, County Executive Office  
Liz Warren, Client Network  
Barry Zimmerman, Health Care Agency Director

**Ventura County Behavioral Health (VCBH) Managers and Staff Present**

Dr. Sevet Johnson, VCBH Director  
Tina Coates, Patients' Rights Advocate  
Dr. Loretta Denering, Substance Use Services Division Chief  
Dan Hicks, Substance Use Services Prevention Manager  
Dr. John Schipper, Adult Services Division Chief  
Vickie Poliquin, Temporary BHAB Assistant

	DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ ACTIONS	RESPONSIBLE
I.	<p><b>Call to Order</b> Chair Rodriguez called the meeting to order at 1:03 pm.</p> <p>Joanna Peterson provided specific details on how meeting attendees can access interpretation services.</p>		
II.	<p><b>Board Member Roll Call</b> Ms. Gardner conducted the calling of the roll and confirmed that a quorum of the Board members exists.</p>		
III.	<p><b>Welcome and Introductions</b> Mr. Rodriguez welcomed everyone, introduced himself and asked that BHAB members briefly introduce themselves.</p>		
IV.	<p><b>Approval of the Agenda</b> Mr. Rodriguez asked the Board to review and approve the agenda. Ms. Gardner moved to approve the agenda as written; Ms. Armann seconded. The motion to approve the agenda as written carried unanimously through roll call.</p>	Agenda approved as written. <b>M/S/C</b>	
V.	<p><b>Approval of the Minutes</b> Mr. Rodriguez asked the Board to review and approve the minutes of the August 16, 2021, meeting. Mr. Harris moved to approve; Ms. Keavney seconded. Ms. Barragán requested an amendment to the minutes regarding her public comment under agenda item XVIII to read: Ms. Barragán commented to provide feedback regarding the need for staff to speak more slowly and noted that there are times when BHAB members may have difficulty accessing interpreter services through the Zoom feature due to technical difficulties. Dr. Johnson reminded attendees of the importance of Ms. Flores-Haro’s comment from the August 16 minutes stating that attendees need to ensure that their Zoom accounts are updated to be able to access the interpretation services that are available at all meetings. The motion to approve the minutes as amended carried unanimously through roll call.</p>	General Meeting minutes approved as amended. <b>M/S/C</b>	
VI.	<p><b>Recognition</b> Mr. Rodriguez presented a Certificate of Commendation to Supervisor Linda Parks following Ms. Gardner’s congratulatory words expressing appreciation for her extensive work and advocacy in the areas of mental health over many years. Supervisor Parks thanked the BHAB for the recognition and for their work to help people with mental health challenges. Supervisor Matt LaVere and Ms. Borchard spoke in recognition of Supervisor Linda Parks’ passion for enhancing mental health services over the years.</p>		
VII.	<p><b>Public Comments</b> Elizabeth R. Stone made a public comment regarding her Psychiatric Inpatient Unit (IPU) and Crisis Stabilization Unit (CSU) service data questions that were shared at the BHAB’s August General meeting.</p>		
VIII.	<p><b>Presentation</b> Mark Stadler, Crisis Intervention Team (CIT) Program Administrator provided a comprehensive presentation and update of the CIT Program.</p>		
IX.	<p><b>Chair Comments</b></p> <ul style="list-style-type: none"> <li>• Impressed with the BHAB’s collaborative spirit to work together to move items forward.</li> <li>• Stressed the importance of reviewing pre-crisis care when evaluating the County’s Continuum of Care under the proposed Needs Assessment.</li> <li>• Noted that the Needs Assessment is a tool that will be used to improve meaningful access to behavioral health services and will propose the formation of two Workgroups later in the agenda—one to review and finalize the letter to the Board of Supervisors and one to identify and study potential funding sources.</li> </ul>		
X.	<p><b>Director’s Report</b> A copy of the Director’s update and August 2021 data on VCBH clients served and open episodes is attached for reference.</p> <p>Mr. Harris inquired about the status of the BHAB’s request to the Board of Supervisors to establish a BHAB budget. Dr. Johnson advised that the BHAB budget was approved by VCBH and a letter was provided to the Chair with instructions on tracking and managing the budget.</p>		

	<p>Ms. Borchard asked questions regarding funding Peer positions through the 4-year, \$1.5M Mental Health Block Grant, regarding the \$1M Grant for infrastructure purchases for operating the crisis care mobile units and the Department of Health Care Services Information Notices. Dr. Johnson provided responses and Dr. Schipper noted that a response to VCBH’s application for the \$1M Grant funding is pending.</p> <p>Ms. Gardner inquired about the status of the Mobile Mental Health Innovation Program vehicle. Dr. Johnson advised that specifications and program details continue to be worked on by the MHSA team prior to launching the program and Dr. Schipper noted that a Request for Proposal is being prepared to obtain responses from interested contractors for the program.</p>		
<p><b>XI.</b></p>	<p><b>Board Members Comments and Announcements</b></p> <p>Mr. Harris:</p> <ul style="list-style-type: none"> <li>• Voiced his thoughts on the important work of the BHAB and urged the BHAB to solidify and reestablish trust and positive and transparent working relationships for the betterment of the community and those that are served.</li> <li>• Expressed concern regarding BHAB recommendations that are transmitted to the Board of Supervisors that are placed as “Receive and File” on its agendas and requested that County administrative staff provide the BHAB with a presentation that clearly explains the review process for recommendations to the BOS and requested County Counsel’s opinion regarding Welfare &amp; Institutions Code (WIC) compliance.</li> </ul> <p>Mr. Tejada:</p> <ul style="list-style-type: none"> <li>• Spoke regarding the WellPath contract scheduled for review on the Board of Supervisor’s September 21 agenda and time he spent reviewing and learning more about the contract. Inquired whether it would be possible for the BHAB to review contract in “real time” versus the current system of reviewing contracts already approved by the Board of Supervisors to provide opinions and feedback. Dr. Johnson clarified that the WellPath contract is through the Sheriff’s office for providing mental health services within the jails and would not fall under BHAB review.</li> </ul> <p>Ms. Flores-Haro:</p> <ul style="list-style-type: none"> <li>• Noted and highlighted the release of a report entitled, A Right to Heal: Mental Health in Diverse Communities led by the California Pan-Ethnic Health Network (CPEHN), who contracted with the Mental Health Services Oversight and Accountability Commission (MHSOAC) in 2020 to lead a 3-year effort around the topic, including hosting listening sessions with Statewide groups. She encouraged BHAB members to read the report which will be sent out the BHAB members.</li> </ul> <p>Ms. Heitmann:</p> <ul style="list-style-type: none"> <li>• Asked about the process for BHAB members to bring their ideas forward and how those ideas are tracked and placed on BHAB agendas. Mr. Rodriguez noted that ideas can be discussed at the BHAB Executive Committee to determine feasibility and placement on the General meeting agenda. She further noted the importance of BHAB members having a clear understanding of its responsibilities under the Welfare &amp; Institutions Code (WIC) related to recommendations to the BOS.</li> </ul> <p>Dr. Johnson provided clarification in response to the request for County administration to provide a presentation to the BHAB outlining the review process for recommendations, stating that the process is defined and outlined in the County Administrative Manual.</p>		
<p><b>XII.</b></p>	<p><b>Secretary’s Report</b></p> <p>Ms. Gardner reported that attendance at BHAB meetings is excellent and on behalf of the BHAB, congratulated its 1<sup>st</sup> Vice Chair, Mr. Tejada, for his re-appointment. She noted that one other member’s term is up in October.</p> <p>Ms. Gardner pointed out that per the Bylaws, all BHAB members are required to join one of the four standing BHAB Committees and urged those BHAB members who have not become a member to do so to be active in the Committee’s work and to comply with the Bylaws.</p>		

<p><b>XIII.</b></p>	<p><b>BHAB Committee Reports</b> (listed in error under agenda item XIV – New Business)</p> <p>A. Transitional Age Youth (TAY) (August 26 meeting) – Joe S. Ramirez, Chair</p> <ol style="list-style-type: none"> <li>1. The Committee met however a quorum was not reached, therefore business items were not addressed and no action was taken.</li> <li>2. Due to lack of a quorum over the past two Committee meetings, setting achievable goals for the fiscal year has been delayed.</li> <li>3. A plan has been developed to survey Committee members before the next Committee meeting to inquire about members lack of attendance.</li> <li>4. The date and/or time may need change to improve attendance.</li> </ol> <p>B. Adult Services Committee (September 2 meeting) – Gane Brooking, Co-Chair</p> <ol style="list-style-type: none"> <li>1. Information was provided from the jail regarding its safety rooms.</li> <li>2. Peter Schreiner, Older Adults Clinic Administrator, provided a presentation regarding the Older Adults program.</li> </ol> <p>C. Prevention Committee (September 14 meeting) – Janis Gardner, Co-Chair</p> <ol style="list-style-type: none"> <li>1. A presentation was provided by Jeanne Spencer of Idea Engineering entitled, “Suicide Prevention – VCBH Outreach Campaign”, noting that Idea Engineering helps create and implement numerous media campaigns for VCBH.</li> <li>2. Mentioned the 1,251 overdose reversal efforts with Naloxone and the no Overdose Program.</li> <li>3. One Committee member commented on the contract for the Memorandum of Understanding between VCBH and California State University at Channel Islands asking who provides psychological services guaranteed to the students—whether it is VCBH or CSUCI and what the collaboration effort entails. Ms. Gardner asked that VCBH provide a response to the Committee member’s question.</li> </ol>	<p>VCBH to response with an answer to a contracts question.</p>	<p>Terri Yanez</p>
<p><b>XIV.</b></p>	<p><b>New Business</b> (due to an error with the agenda items, New Business began with item D.)</p> <p>D. Establish a Workgroup to Review and Finalize Board of Supervisors Letter for the Comprehensive Needs Assessment Request for Proposal (RFP) for BHAB Review on October 18</p> <p>Mr. Rodriguez noted he submitted a draft Board Letter to the Executive Committee to be reviewed and recommended that a Workgroup be formed to revise and finalize the draft for the BHAB’s review and action at its October 18 General meeting. Mr. Rodriguez advised that he would Chair the Workgroup and invite a maximum of four BHAB members interested in being on the Workgroup. Mr. Tejada, Ms. Borchard, Ms. Gardner and Mr. Bhavnani volunteered for the Workgroup. Mr. Rodriguez noted that he will coordinate a date for the Workgroup to meet prior to the October 18 General meeting.</p> <p>E. Establish a Workgroup to Study and Identify Funding Sources for Comprehensive Needs Assessment</p> <p>Mr. Rodriguez explained that it is his understanding that neither the BOS or VCBH are bound by any of the Workgroup’s suggestions for potential funding sources, however, that providing potential funding sources could increase the probability of conducting the Needs Assessment and it will assist with the approval process. Ms. Armann, Ms. Gardner, Ms. Brooking, Ms. Keavney and Ms. Heitmann volunteered for the Workgroup and Ms. Armann agreed to be its Chair.</p> <p>F. Announcements</p> <ul style="list-style-type: none"> <li>• Ms. Gardner: <ul style="list-style-type: none"> <li>• NAMI will celebrate its 40<sup>th</sup> Anniversary on Saturday, October 9, in person at Camarillo Grove Park from 11:30 AM to 3:30 PM.</li> <li>• Ventura County Office of Education will host an Embracing Change and Transformation Mental Health Youth Conference for grades 9 through 12. Date and details to follow.</li> <li>• California is launching a “988” hotline for mental health crises, noting that VCBH also has its crisis and suicide hotline numbers available.</li> <li>• Save the date on October 25 for the virtual Night in Oaxaca event celebrating 20 years of the Mixteco Indigena Community Organizing Project (MICOP). Contact MICOP via the web at <a href="https://mixteco.org/">https://mixteco.org/</a> if interested in attending.</li> </ul> </li> </ul>		

	<ul style="list-style-type: none"> <li>The Department of Health Care Services will host a public Behavioral Health Continuum Infrastructure Project Listening Session, including Counties, tribal, nonprofit and for-profit organizations. Email Ms. Gardner for the link to join if interested.</li> </ul> <p>G. Presentation Requests Mr. Harris requested a presentation from the County administrative staff on the process used to submit the BHAB's recommendations to the Board of Supervisors.</p> <p>H. Recognition Award Recommendations None.</p>		
<b>XV.</b>	<p><b>Contracts</b> No contracts were reviewed due to the Board of Supervisors being dark in August.</p>		
<b>XVI.</b>	<p><b>Public Comments</b> Elizabeth R. Stone made a public comment announcing that she had responded to a Request for Proposal based upon her work on the Homeless Outreach Program within the downtown Ventura area and that the Program was awarded a Grant from the Department of Health Care Services for an 18-month expansion for training and incorporation of Peer workers to support people that have experienced homelessness, have had interaction with the criminal justice system and for mental health and substance abuse services. She offered to provide a brief presentation and update to the BHAB regarding the Peer services workforce and Mr. Rodriguez asked her to provide him with detailed information about her proposed update.</p> <p>Mr. Harris noted that Jerry Weaver sent him a public comment that he indicated did not go through to BHABAdmin. Mr. Harris forwarded the item to Mr. Rodriguez and asked that it be read at the next General meeting. Mr. Rodriguez noted receipt of the email and will plan to have it read at the next General meeting. Mr. Harris noted that Mr. Weaver also stated that he has a problem hearing and may need accommodations at BHAB meetings. Mr. Rodriguez and Dr. Johnson advised that accommodations are available and need to be requested through VCBH.</p>		
<b>XVII.</b>	<p><b>Adjourn</b> The meeting adjourned at 3:30 pm.</p>		

## Behavioral Health Advisory Board GENERAL Meeting Attendance

2021-22	Terms	Members	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
District 1	3/11/21 – 3/10/24	Claudia Armann	e	X	X									
District 5	9/15/20 – 9/15/23	Soledad Barragán	e	X	X									
District 2	2/24/19 – 2/23/22	Ratan Bhavnani	X	X	X									
District 3	1/26/21 – 1/26/24	Nancy Borchard	X	X	X									
District 3	1/13/19 – 1/12/22	Gane Brooking	X	X	X									
District 1	10/7/21 – 10/6/24	Kevin Clerici	X	X	X									
District 5	3/23/21 – 3/22/24	Jose Estrada	X	X										
District 4	10/14/21 - 10/13/24	Jesse Finkbeiner	X	X	X									
District 1	4/27/21 – 4/26/24	Genevieve Flores-Haro	X	X	X									
LE	9/10/19 – 9/10/22	Cmdr. James Fryhoff	e	X	X									
District 3	4/15/21 – 4/14/24	Janis Gardner	X	X	X									
District 4	9/17/19 – 9/17/22	Jerry Harris	X	X	X									
District 1	5/11/21 – 5/10/24	Cheryl Heitmann	X	X	X									
District 2	7/21/20 – 1/7/22	Carol J. Keavney	X	X	X									
BOS	1/1/21 – 12/31/21	Supervisor Matt LaVere	X	e	X									
District 4	2/9/21 – 2/9/24	Jennifer Morrison	X	X	e									
District 2	3/15/20 – 3/15/23	Patricia Mowlavi	X	X	X									
District 3	12/1/20 – 12/1/23	Joe S. Ramirez	X	X	X									
District 5	1/25/20 – 1/24/23	Michael Rodriguez	X	X	X									
District 4	9/18/21 – 9/17/24	Christopher Tejada	X	X	X									
District 2	9/17/19 – 9/16/22	Carol Thomas	X	X	X									
District 5	1/11/20 – 1/24/23	Marlen Torres	e	X										
Optional: Practicing Psychiatrist		VACANT												

Present = X

- District 1: Supervisor LaVere
- District 2: Supervisor Parks
- District 3: Supervisor Long
- District 4: Supervisor Huber
- District 5: Supervisor Ramirez

Aplicación de la ley del Condado  
de Ventura  
Equipo de Intervención en Crisis



Administrador del programa Mark Stadler  
Asistente de programa Scott Walker



VENTURA COUNTY  
BEHAVIORAL HEALTH



NAMI  
National Alliance on Mental Illness

Ventura  
County



Hillmont Psychiatric Center



USA  
MENTAL  
HEALTH  
FIRST AID®



SENECA  
FAMILY OF AGENCIES | UNCONDITIONAL CARE



**Ventura County Law Enforcement's Crisis Intervention Team**

# CIT del Condado de Ventura

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- **Agencias que apoyan financieramente el programa**
- Oficina del Alguacil (ciudades contratadas y no incorporadas)
- Ventura PD
- Paladio de Oxnard
- Puerto Hueneme PD
- Santa Paula PD
- Pd del valle de Simi
- Salud conductual del Condado de Ventura
  
- **Agencias que son socios**
  - NAMI
  - CSUCI PD, Colegios Comunitarios
  - Fuego, AMR
  - Base Naval Condado de Ventura
  - CHP, Parques Estatales, Lago Casitas
  - Investigadores del Fiscal de Distrito
  - FBI



# Historia del CIT

- Memphis, 1988
  - Oficial involucrado en tiroteos
- Condado de Ventura, antes de 2001
  - Factores únicos de nuestra comunidad
    - Cierre del Hospital Estatal
    - Buen tiempo
    - Servicios
  - Tiroteos de oficiales involucrados
    - Demandas
    - PTSD



# Declaración de Objetivos

La misión del programa VC CIT es desarrollar asociaciones con consumidores de salud mental y sus familiares, y otras agencias y organizaciones.

Los oficiales de CIT responderán a las personas que están en crisis como resultado de un trastorno de salud mental y evaluarán y ayudarán a esas personas de la manera más efectiva y compasiva posible.



## Declaración de Política

Es política de las agencias de aplicación de la ley del Condado de Ventura utilizar oficiales de CIT en llamadas de servicio que involucren a personas con enfermedades mentales conocidas o sospechosas cuando el oficial (s) están disponibles y las circunstancias son apropiadas.



## Aplicación de la ley

- De-escalate crisis situations.
- Reducir la necesidad de uso de la fuerza.
- Reducir el uso de la cárcel.
- Disminuir la reincidencia.
- Facilitar el empoderamiento de las personas con enfermedades mentales mediante el aumento de su autosuficiencia legal y comportamientos que mejoran la salud.

# Llamadas de Servicio

- Quién es la mejor persona para responder en una crisis de salud mental?
  - **Bombero?**
  - **Paramédico?**
  - **Trabajador de salud mental (terapeuta, médico, etc.)?**
  - **Policía?**
- La realidad es que el oficial de policía está disponible 24/7, llega a la escena primero, y puede manejar a alguien que está agresivamente fuera de control.

# Por qué entrenar a la policía?

- 1. Es lo correcto**
- 2. Los socorristas pueden evaluar y estabilizar**
- 3. Desmitificar las enfermedades mentales y reducir la ansiedad**
- 4. Enséñeles a conectar a las personas con los recursos**
- 5. Disponibilidad limitada del equipo de crisis**



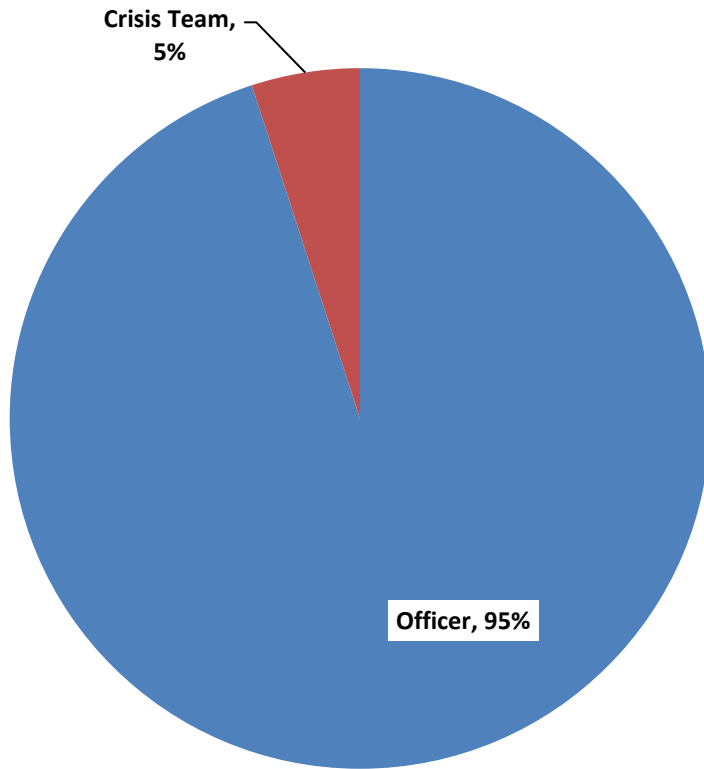
# Estadística

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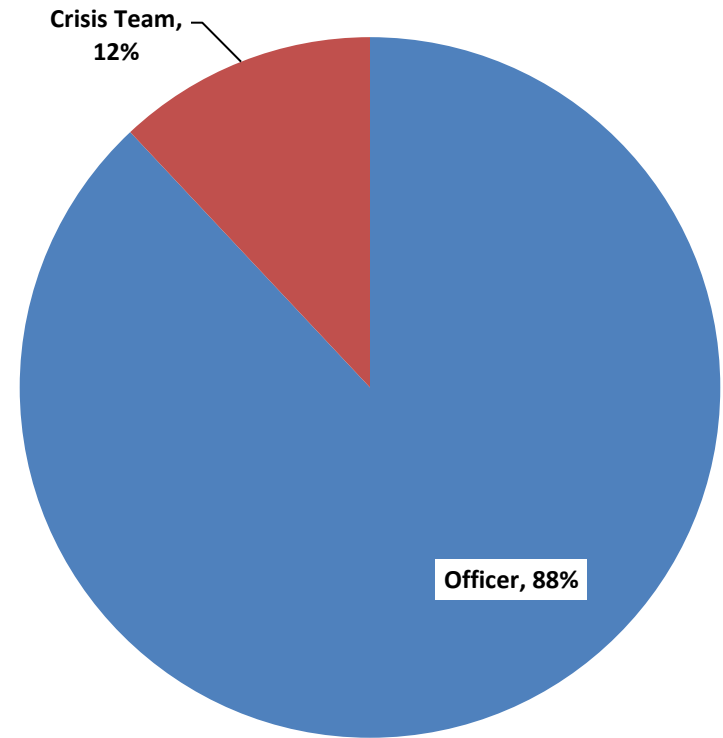


# Crisis de Salud Mental 911 Llamadas

**PRIMER AÑO**



**SEGUNDO AÑO**



# Qué tan prevalente es enfermedad mental en nuestro condado?

NIMH estima que el 4.2% de la población estadounidense tiene una enfermedad mental grave.

Aprox. 854.223 residentes en 2017

**NIMH estima que casi 1 de cada 5 estadounidenses sufrirá de alguna forma de enfermedad mental en su vida. = 170.845**



# PRISONS AND JAILS

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**1 IN 5 PEOPLE HELD IN AMERICA'S PRISONS AND JAILS HAS A RECENT HISTORY OF MENTAL ILLNESS**

**7 IN 10 YOUTH IN THE JUVENILE JUSTICE SYSTEMS HAVE AT LEAST ONE MENTAL HEALTH DISORDER**



# Tiroteos de oficiales involucrados

- **“Las personas con enfermedades mentales no tratadas tienen 16 veces más probabilidades de morir durante un encuentro policial”.**
- **- Treatment Advocacy Center, diciembre de 2015**
- **Personas con enfermedades mentales tienen 16 veces más probabilidades de morir durante un encuentro policial”.**
- **- Treatment Advocacy Center, diciembre de 2015**

**Los oficiales contactan a  
aproximadamente 1500 adultos con  
problemas de salud mental en un año**

...



**y 350 niños**

Cada 24 horas en  
Condado de Ventura (Condado de  
Ventura)

Aplicación de la ley  
será...

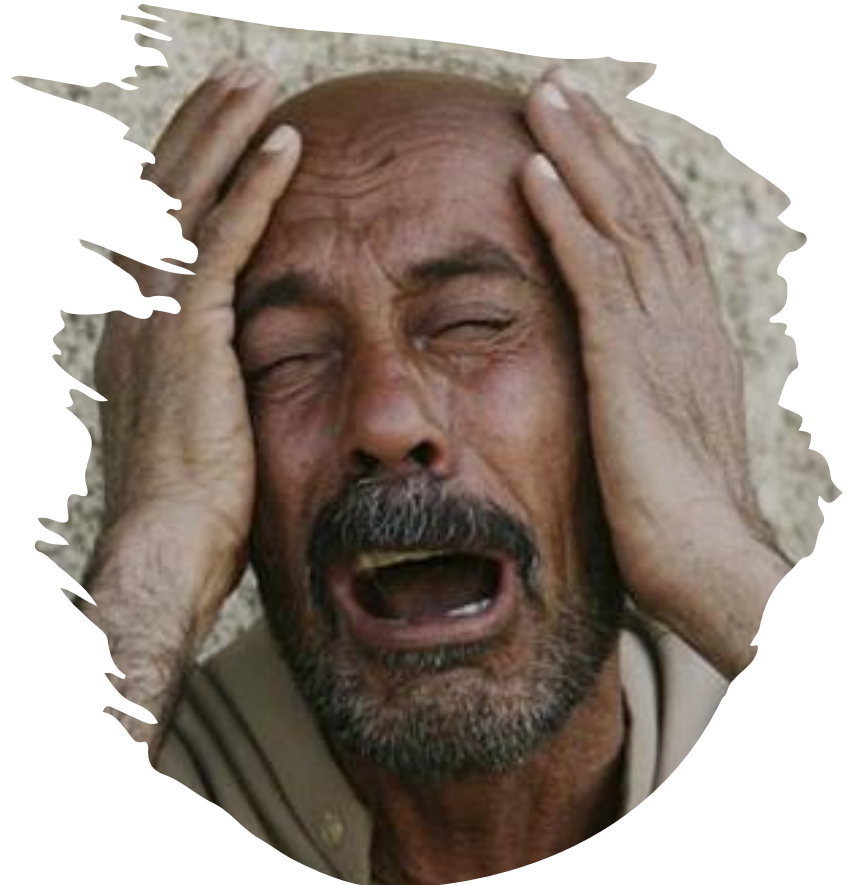
- Póngase en contacto con 4 adultos en una crisis de salud mental
- Contacto 1 Niño en una crisis de salud mental
- Lleve 3 de los anteriores a un hospital para necesidades psiquiátricas



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# Cuáles son los comportamientos más comunes relacionados con la crisis?

- **Charla Suicida (41%)**
- Estado de ánimo severo, deprimido, llanto
- Ansiedad
- Comportamiento extraño
- Agitación y estimulación
- Pensamiento/discurso absurdo e ilógico

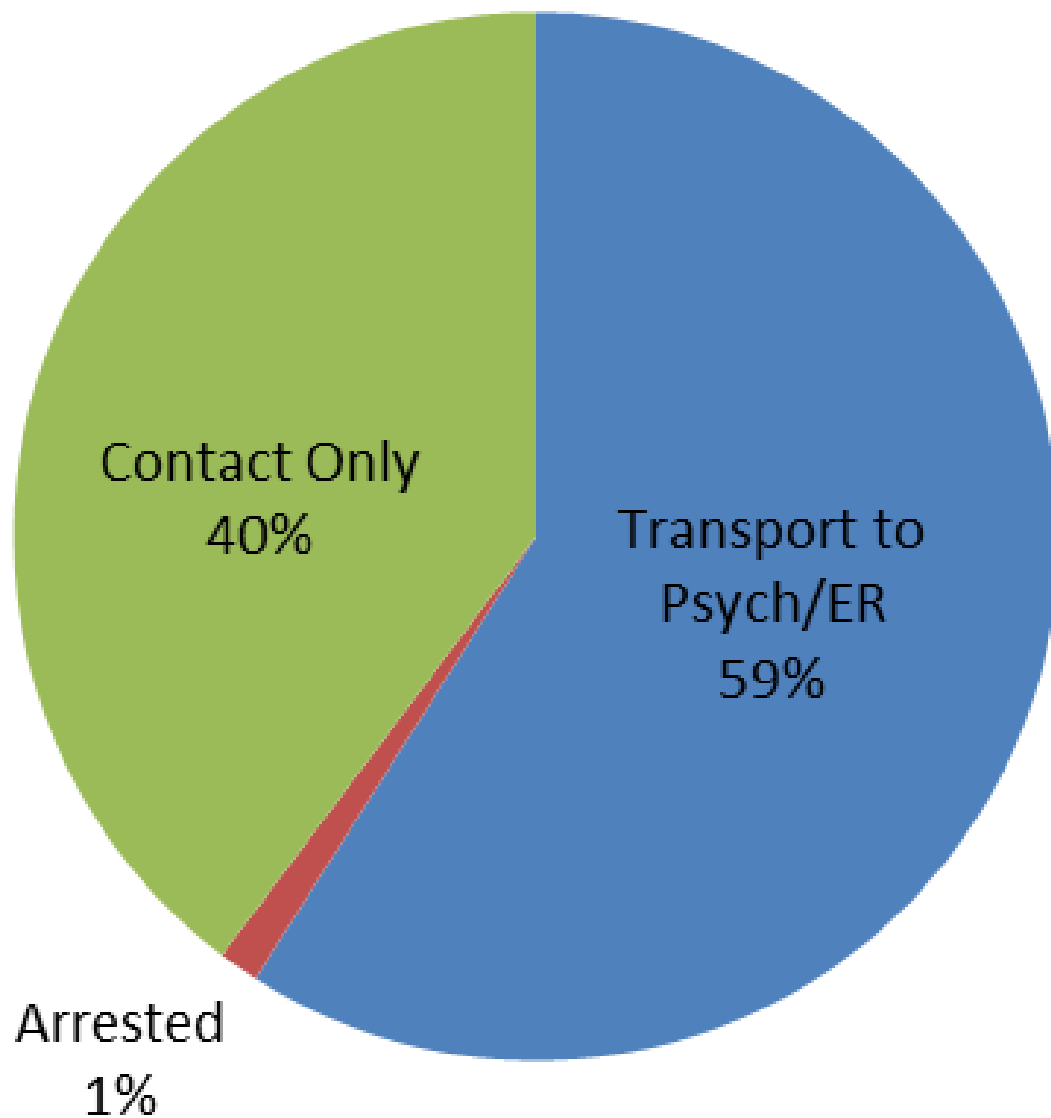


# *Cuéntanos más sobre la persona en crisis*

- El 15% son personas sin hogar
- El 10% de las personas en crisis tienen un arma
  - La mayoría son armas afiladas/ de filo(cuchillo, navaja, tijeras)



Qué sucede  
después de que  
un oficial  
contacta a  
alguien con una  
enfermedad  
mental?



# Qué califica para un 5150 / 5585?

- Peligro para uno mismo
- Peligro para los demás
- Gravemente discapacitados
  - Comida, Refugio, Ropa debido a una enfermedad mental
- Son realmente 72 horas?
  - Aplicación
  - Reevaluación por el profesional de MH
  - Conversión voluntaria
- Transporte a ER\*\*\*





*Cuándo considera un oficial hacer un arresto de alguien que tiene una enfermedad mental?*

- Conoce el oficial el historial de salud mental?
- Infracción, Delito menor, Delito grave
- Delitos graves (por ejemplo, agresión) que resultan en lesiones
- Deseo de la víctima de ser enjuiciada
- Uso de un arma
- Semejanza de que el comportamiento se repetirá en el futuro inmediato si se libera
- Disponibilidad de servicios de salud mental

# Acciones de los oficiales

- **El 88%** de los contactos resultan en verbalización solamente versus uso de la fuerza
  - Los oficiales del CIT son menos propensos a usar la fuerza, y ...
    - **Aprox. 3 veces más probabilidades de tener "solo contacto"**
    - **Aprox. 2 veces menos probabilidades de usar la cárcel**





## CIT Academy Stats

- Las Academias CIT son clases de 40 horas
- Celebrado 2-3 veces al año
- 50 alumnos máximo por clase
- 54 Academias CIT desde 2001
- 1900+ entrenados desde 2001
- >90% de los oficiales de patrulla
- 50% del personal de custodia
- 76% de TODOS los oficiales
- 67% de los despachadores
- Clase 55 24-29 de mayo de 2021 (17 de Centros de Custodia)

# Se necesitan hasta 75 instructores/voluntarios por clase

**Crisis Intervention Team (CIT) Academy #55: May 24th-28th, 2021**

(Schedule as of 5/18/2021)

**Location: Sheriff Training Center (106 Durley Ave., Camarillo 93010) - Classroom #2**

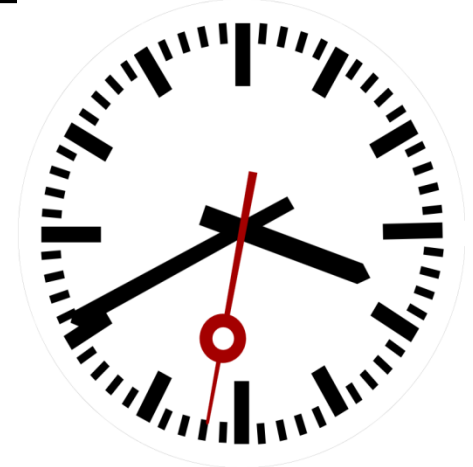
	MONDAY 5/24	TUESDAY 5/25	WEDNESDAY 5/26	THURSDAY 5/27	FRIDAY 5/28
LE O/D	VCSO Sgt. Daniel Gonzales	Cmdr. Varner / NBVC Sgt. Garcia	VCSO Sgt. Pat Ruby	<i>vacant</i>	
MH O/D	Rebecca Carpenter	Rebecca Carpenter	Rebecca Carpenter	Rebecca Carpenter	
8 : 0 0	<b>8:00 - 8:30 Introduction</b> VCSO Sheriff Bill Ayub	<b>8:00 - 9:00 Military &amp; Veterans</b> Chrystal Crawford 146th Airlift Wing	<b>8:00 - 10:00 Psychosis, Mood, and Personality Disorders</b> CIT Prog. Asst. Scott Walker	<b>8:00 - 8:15 Prior Day Debrief</b>	<b>8:00 - 12:00 Scenario Testing</b>
9 : 0 0	<b>8:30 - 9:15 Course Overview</b> CIT Prog. Admin. Mark Stadler CIT Prog. Asst. Scott Walker	<b>9:00 - 10:00 Officer Involved Incident</b> SPPD Cmdr. Scott Varner	<b>or</b> <b>De-Escalation #3</b> <b>FOS Scenarios/Group Work</b> <b>BRING BELTS</b>	<b>8:15 - 8:45 Group Projects</b> Student Presentations	
	<b>9:15-9:45 Bias &amp; Discrimination</b> Regan Mew			<b>8:45 - 9:45 Suicide Intervention</b> Rebecca Carpenter Kaj Swanson	
10 : 0 0	<b>9:45 - 11:15 NAMI / Consumer</b> National Alliance on Mental Illness In Our Own Voice (IOOV) Cultural Component Kimberly Quinn-Colvin @ 9:45 Patricia "Patti" Pape @ 10:45	<b>10:00 - 10:45 Officer Wellness</b> Shane Norwood	<b>10:00 - 12:00 Psychosis, Mood, and Personality Disorders</b> CIT Prog. Asst. Scott Walker	<b>10:00 - 10:30 Group Activity</b> 5150 Tabletop Scenarios / Videos	
11 : 0 0	<b>11:15 - 11:45 Group Activity</b>	<b>10:45 - 11:45 Post Traumatic Stress</b> Ret. OPD Sgt. Jeff McGreevy	<b>or</b> <b>De-Escalation #3</b> <b>FOS Scenarios/Group Work</b> <b>BRING BELTS</b>	<b>10:30 - 11:30 De-Escalation #4</b> VPD Det. Alyse Quiroz VPD Det. Stephanie Avila	
	<b>11:45 - 12:00 Morning Debrief</b>	<b>11:45 - 12:00 Morning Debrief</b>		<b>11:30-11:45 Vista Del Mar Hosp.</b>	<b>11:45 - 12:00 Morning Debrief</b>
LE O/D	<b>12 - 1 LUNCH on your own</b>	<b>12 - 1 LUNCH on your own</b>	<b>12 - 1 LUNCH on your own</b>	<b>12 - 1 LUNCH on your own</b>	<b>12 - 1 LUNCH on your own</b>
MH O/D	<i>vacant</i>	OPD Ofc. David Castillo	VCSO Sgt. Greg Cadman	SVPD Sgt. Frank Panza	VCSO Sgt. Pat Ruby
1 : 0 0	Rebecca Carpenter	Rebecca Carpenter	Rebecca Carpenter	Rebecca Carpenter	Rebecca Carpenter
2 : 0 0	<b>1:00 - 1:45 VCBH Services</b> STAR & Crisis Team: Dr. Boscarelli RISE & Assist: Felicia Skaggs	<b>1:00 - 1:15 Group Activity</b>	<b>1:00 - 1:15 Scenario Debrief</b>	<b>1:00 - 2:00 Officer Panel</b> VCSO Sgt. Jason Cantrall VCSO Sr. Dep. Virginia Tinoco	<b>1:00 - 1:15 Scenario Debrief</b>
	<b>1:45 - 3:15 Traumatic Brain Injuries (TBI)</b> Mike and Bill Yarnall, and VCSO Dep. Nick Gildroy, and Lisa Morris observing	<b>1:15 - 2:15 Neurocognitive Disorders</b> Dementia, Alzheimers, etc. Dr. Erik Lande	<b>1:15 - 3:00 Developmental Disabilities</b> Tri-Counties Regional Ctr. overview Dr. Steven Graff Guest Speakers @ 2:30 Bill & Lee Burke, and Carly Fulgham	<b>2:00 - 2:30 LE &amp; Homelessness</b> VCSO Dep. Josh Richter	<b>1:15 - 2:15 Weapon Prohibition</b> Emily Gardner, County Counsel and VCSO Sgt. Chris Zapata
3 : 0 0	<b>3:15 - 3:30 BI Center (Chrissy)</b>	<b>2:15 - 2:45 Adult Protective Svcs</b> APS Worker Joanne Giacopuzzi	<b>3:00 - 5:00 5150 W&amp;I Basics</b> Tina Coates	<b>2:30 - 3:30 Psych Meds and Substance Abuse</b> Dr. Joseph Vlaskovits	<b>2:15-2:30 Firearm Tidbits (Walker)</b>
4 : 0 0	<b>3:30 - 4:45 De-Escalation #1</b> CIT Prog. Admin. Mark Stadler	<b>2:45 - 3:45 Youth Mental Health</b> Dr. Kathleen Van Antwerp and Senta Green <b>VCBH Y&amp;F observing</b>		<b>3:30 - 4:30 Suicide-By-Cop</b> CIT Prog. Admin. Mark Stadler	<b>2:30 - 2:45 Children's CSU</b> <b>2:45 - 3:00 TAY Tunnel (Anthony)</b> <b>3:00 - 3:15 LGBTQ+ (Michelle)</b> <b>3:15 - 3:30 CONREP (Walker)</b>
	<b>4:45 - 5:00 Afternoon Debrief</b>	<b>3:45 - 4:45 De-Escalation #2</b> OPD Sr. Ofc. Mike Wood		<b>4:30 - 4:45 Scenario Prep</b>	<b>3:30 - 3:45 Afternoon Debrief</b>
		<b>4:45 - 5:00 Afternoon Debrief</b>		<b>4:45 - 5:00 Afternoon Debrief</b>	<b>3:45 - 5:00 Conclusion</b> Written Test Evaluations Graduation

## Definición de desescalada (CA-POST 2019)

La desescalada es el proceso de utilizar estrategias y técnicas destinadas a disminuir la intensidad de una situación.

# Técnicas de intervención en crisis

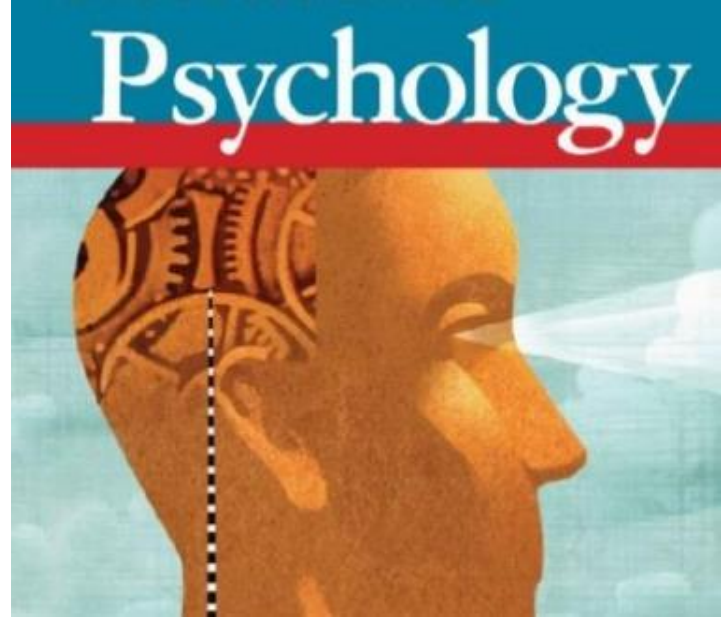
- Tiempo y Espacio
- Comportamiento humano
  - Teoría de Maslow
  - Lucha, huida, congelación o apaciguamiento
- Técnicas de escucha activa
- Reducir los estímulos excesivos
- Alcance para pequeñas metas concretas
  - Usar estrategias de ganar-ganar



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## Otros entrenamientos

- Formación básica de la Academia MIDD
  - Uso de la fuerza/desescalada
  - OIS
- Actualización/actualización de CIT de 8 horas
- Capacitación sobre autismo de 4 horas
- Capacitación informativa



## Qué es la desconexión táctica?

La desconexión es la decisión táctica de;

- Salir
- Retrasar contacto
- Demorar la custodia
- Planifique la re-participación en un momento futuro

Esta táctica debe considerarse cuando un oficial cree razonablemente que el contacto continuo puede resultar en un riesgo irrazonable para la persona en crisis, el público y / o los miembros de esta agencia.

*“Así que si sé  
que alguien  
está  
experimentan  
do una crisis  
de salud  
mental... qué  
debo hacer?”*

En busca de ayuda:

211 and 1-866-998-2243

- Pensamientos suicidas PERO ningn plan suicida:

1-877-727-4747 or 1-800-273-8255 (best for Vets)

•Suicidal thoughts & plan, BUT not imminent:

1-866-998-2243

•Imminent plans to hurt themselves:

911, pregunte por un oficial capacitado por CIT

# Programa CIT del Condado de Ventura

Para preguntas generales  
acerca de la llamada del programa:

(805) 383-4806

[VenturaCo.CIT@ventura.org](mailto:VenturaCo.CIT@ventura.org)



**SALUD CONDUCTUAL DEL CONDADO DE VENTURA**

Cientes atendidos  
Episodios abiertos en agosto  
de 2021 a partir del  
09/15/2021

Todo VCBH	Programas de tratamiento de VCBH
SUS - Condado y Contratista MH Adulto - Condado y Contratista MH Y&F - Condado y Contratista ESTRELLA VCBH Crisis de adultos	Condado y Contratista Incluye ambulatorios y residenciales

\*\*Solo clientes inscritos en VCBH

	Grupo del Programa VCBH							
	Todo VCBH	SUS	MH Adulto	MH Juventud y Familia	ESTRELLA VCBH	Crisis de adultos	CSU**	UIP**
<b>Total de clientes con episodio abierto</b>	<b>11,435</b>	<b>1,217</b>	<b>5,751</b>	<b>3,879</b>	<b>956</b>	<b>726</b>	<b>41</b>	<b>47</b>

\*\*Solo clientes inscritos en VCBH

Total de clientes con episodio abierto Grupo de edad *	Grupo del Programa VCBH							
	Todo VCBH	SUS	MH Adulto	MH Juventud y Familia	ESTRELLA VCBH	Crisis de adultos	CSU**	UIP**
0-15	2,805	14		2,655	198	53		
16-25	2,153	212	735	1,102	209	135	7	6
26-59	5,222	932	3,929	122	496	419	31	34
60+	1,255	59	1,087		53	119	3	7
<b>Total general</b>	<b>11,435</b>	<b>1,217</b>	<b>5,751</b>	<b>3,879</b>	<b>956</b>	<b>726</b>	<b>41</b>	<b>47</b>

\* Edad del cliente al 31 de agosto de 2021

\*\*Solo clientes inscritos en VCBH

Total de clientes con episodio abierto Idioma preferido	Grupo del Programa VCBH							
	Todo VCBH	SUS	MH Adulto	MH Juventud y Familia	ESTRELLA VCBH	Crisis de adultos	CSU**	UIP**
Inglés	9,999	1,145	5,036	3,336	824	655	38	44
Español	1,139	60	551	475	99	30	2	3
Otro	100	4	70	18	10	8	1	
Desconocido / No reportado	196	8	94	49	23	33		
Hebreo	1			1				
<b>Total general</b>	<b>11,435</b>	<b>1,217</b>	<b>5,751</b>	<b>3,879</b>	<b>956</b>	<b>726</b>	<b>41</b>	<b>47</b>

\*\*Solo clientes inscritos en VCBH

Total de clientes con episodio abierto	Grupo del Programa VCBH							
	Todo VCBH	SUS	MH Adulto	MH Juventud y Familia	ESTRELLA VCBH	Crisis de adultos	CSU**	UIP**
Origen étnico								
Latinx	5,799	637	2,527	2,486	477	229	18	22
No Latinos	4,238	440	2,761	871	320	282	21	22
Desconocido / No reportado	1,398	140	463	522	159	215	2	3
<b>Total general</b>	<b>11,435</b>	<b>1,217</b>	<b>5,751</b>	<b>3,879</b>	<b>956</b>	<b>726</b>	<b>41</b>	<b>47</b>

\*\*Solo clientes inscritos en VCBH

Total de clientes atendidos en cada ubicación ***	Grupo del Programa VCBH								
	Ubicación del servicio del programa	Todo VCBH	SUS	MH Adulto	MH Juventud y Familia	ESTRELLA VCBH	Crisis de adultos	CSU**	UIP**
CAMARILLO	585			103	483				
FILLMORE	141		48		95				
MOORPARK	19				19				
OXNARD	6,144		1,004	2,794	1,346	934	706		
SANTA PAULA	749			484	266				
VALLE DE SIMI	1,237		79	725	458				
MIL ROBLES	1,261		43	877	354				
VENTURA	2,366		75	1,171	1,141			32	47
Fuera del Condado de Ventura (Contratista)	199		169	24	6				
<b>Total general</b>	<b>12,701</b>		<b>1,418</b>	<b>6,178</b>	<b>4,168</b>	<b>934</b>	<b>706</b>	<b>32</b>	<b>47</b>

Los clientes pueden ser contados en múltiples ubicaciones