

BEHAVIORAL HEALTH ADVISORY BOARD
YOUTH & FAMILY COMMITTEE
MINUTES ■ Wednesday, May 10, 2017

<p>Present Denise Nielsen, Chair Martie Miles, Aspiranet Marika Collins, Casa Pacifica Kim Bennett, Casa Pacifica Daisy Polido, New Dawn Laurie Jordan, Rainbow Connection Regina Reed, SELPA Dr. Steve Graff, Tri-County Regional Center Sheri Long, Vista Real Charter High School</p>	<p>VCBH Managers/Staff Present Pete Pringle, Youth & Family Division Manager Felicia Skaggs, RISE Hilary Carson, MHSA Pam Roach, Transformational Liaison Gracie Lopez, Youth & Family Division Assistant</p> <p>NEXT MEETING: Wednesday, June 14, 2017, 10:00 a.m. – 12:00 pm Ventura County Behavioral Health 1911 Williams Drive, Training Room (first floor), Oxnard</p>
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Note: The committee has not yet approved these minutes. There may be additions/deletions or corrections before the minutes are accepted in final form.

	DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ ACTIONS	RESPONSIBLE
I.	Call to Order Chair Nielsen called the meeting to order at 10:10.		
II.	Approval of the Agenda Ms. Nielsen asked the Committee to review and approve today's agenda.	The agenda was approved as written. M/S/C	
III.	Approval of the Minutes Ms. Nielsen asked the committee to review and approve the minutes of the April 12, 2017 meeting.	The minutes were approved as written. M/S/C	
IV.	Welcome and Introductions Ms. Nielsen welcomed everyone and asked for introductions.		
V.	Chair Announcements Ms. Nielsen encouraged anyone with an interest in the children population and time to devote to the cause to apply for a position on the BHAB. Appointments are made by the Board of Supervisors.		
VI.	Public Comments None.		
VII.	<p>Presentation: Rapid Integrated Support and Engagement (RISE) – Felicia Skaggs, Clinic Administrator RISE started in 2014 as part of the SB82 triage funds. Initially it focused on adults, outreaching to people who would not come to treatment on their own, including the homeless. RISE takes referrals from various sources in the community. Staff include clinicians and bilingual community services coordinators.</p> <p>About a year ago, VCBH took over the crisis contact for youth. RISE was tasked with all the intensive follow-up for youth. It received an additional clinician position and a community services coordinator who does the intensive follow-up with youth.</p> <p>One of the community services coordinators, Xochitl Donaldson, works full time with the youth and their families. She goes into the schools and follows up post-hospitalization, covering the entire county. One clinician works part-time at the Children's Crisis Stabilization Unit (CSU); she connects the youth and their families to services; she helps those already enrolled reconnect to services. Two</p>	Information	

	<p>parent partners, who work through United Parents, help provide support to the families at the CSU and at the VCBH building on Williams Drive in Oxnard and working in the field.</p> <p>RISE helps youth who are taken to the CSU connect successfully to their private insurance providers. RISE provides services free of charge.</p> <p>The follow-up response time is 24 hours for youth who are being discharged from a hospital or the CSU.</p> <p>Once a youth is connected to services, RISE steps back. This makes it clear where the ongoing care is provided. All RISE staff use their county cell phones to send and receive text messages to/from the youth.</p> <p>Anyone can ask for assistance from RISE by calling the main phone number for STAR at 981-4233. Referrals can also be made by emailing a referral form to RISE at RISEProgram@ventura.org</p>		
<p>IX.</p>	<p>Old Business</p> <p>A. Suicide Prevention workgroup – Kiran Sahota In Kiran Sahota's absence, Hilary Carson provided the following information on the Suicide Prevention meeting that took place on May 5th:</p> <ol style="list-style-type: none"> 1. Discussion regarding the work by the Superintendent's office to put in place a suicide prevention school policy prior to the start of the 2017-18 school year. Community feedback is welcome. 2. Discussion of the next Innovation project: a suicide targeted media campaign that would target staff in bars and other places that sell alcohol and emergency rooms workers; train them in Mental Health First Aid (MHFA). 3. Discussion on a show on Netflix, 13 Reasons Why, which covers a young girl's suicide and other sensitive subject matters. Save.org and JedFoundation.org have created talking points to help parents discuss the show with their children. <p>B. Parent workgroup – Lori Litel Lori Litel was not present.</p> <p>C. VCBH update – Pete Pringle The department has been taking a hard look at its budget. Reasons for this are: VCBH has been overspending its MHSA budget, the Continuum of Care Reform is an unfunded mandate, and there is uncertainty regarding possible changes to the Affordable Care Act and Medi-Cal/Medicaid.</p> <p>VCBH evaluated funding and outcomes for all programs. As a result, two programs in the Youth & Family Division will lose their funding:</p> <ol style="list-style-type: none"> 1. Triple P programs: funding did not appear to be used the way it was intended, the outcomes were not as strong as hoped, and these programs are also funded by First Five. 2. The Solutions program: this mental health court program which serves the high-acuity, high-intensity youth on probation, is a \$500,000 program that serves only about nine youth at a time. 		

	<p>VCBH intends to build a Full Service Partnership (FSP) program for youth at risk of incarceration so that they can receive wraparound services. The planning will include a stakeholder process.</p> <p>Hilary Carson clarified the stakeholder process that was used to evaluate the programs, which included a BHAB evaluation workgroup and a BHAB planning workgroup. These groups did not feel knowledgeable enough to make recommendations regarding the youth programs. Feedback is being accepted this month regarding gaps in services.</p> <p>Mr. Pringle noted that the Compass program at the CSU currently serves one youth. For the last few weeks, the CSU has been running at capacity. Since its opening in December 2016, there have been over 120 admissions, and the diversion rate averages about 60%, with children going home instead of being hospitalized.</p> <p>Regarding the implementation of the Continuum of Care Reform (CCR), an Innovations proposal will be presented for approval to the Mental Health Services Oversight and Accountability Commission (MHSOAC) in late May. The proposal focuses on an expedited assessment and referral of all children and youth entering the foster care system.</p> <p>A state-wide challenge of the CCR is finding Therapeutic Foster Care homes and short-term residential treatment facilities.</p> <p>VCBH underwent a three-day Medi-Cal audit, which takes place every three years. The exit interview indicates that VCBH did well. The official report will be available in about six weeks.</p> <p>D. VCBH Youth & Family Division Medical Director's update – Dr. Thurber Dr. Thurber was not present.</p>		
<p>X.</p>	<p>Committee Members' Comments, Activities, updates, items of interest</p> <p>A. Marika Collins stated that the former bill AB741 is now AB501. It deals with crisis residential programs. Letters of support would be helpful. Ms. Collins also noted that Casa Pacifica is still accepting prom dresses for its prom night.</p> <p>B. At the request of Marika Collins, the committee reviewed the BHAB Objectives for 2017-18, which were presented to the BHAB at its April General Meeting. Suggestions included:</p> <ul style="list-style-type: none"> - Add SED (Severely Emotionally Disturbed) to objective 1. - Include prevention and early intervention for families and youth. - Add youth and families, the CSU and Compass to objective 9. - Add an objective: advocate for the provision of mental health services, including prevention and early intervention, in schools and at home. <p>Ms. Nielsen will contact Janis Gardner, BHAB Chair, and Cmdr. Ron Nelson, Objectives Workgroup Chair, to request that the above suggestions be added to the BHAB Objectives.</p>		
<p>XI.</p>	<p>Items for the Next Meeting Agenda Not discussed.</p>		
<p>XII.</p>	<p>Adjourn The meeting adjourned at 11:25.</p>		



Ventura County Behavioral Health
RISE Referral
Rapid Integrated Support & Engagement

CLIENT INFORMATION

Name: _____ DOB: _____ Age: ____ M F Phone #: _____
 If a minor, parent/guardian name: _____ Phone #: _____
 Verbal consent given to leave messages at (phone #): _____
 Language: English Spanish Other: (specify) _____
 SSN _____ Insurance: Self-pay Medi-Cal Medi-Care Medi-Medi Private Ins
 Address: _____ City & Zip: _____
 Homeless - In what city & neighborhood? _____
 Where in the neighborhood can we find them?

REFERRAL FROM

Self Family MD Community Agency APS/CPS Law Enforcement
 Referring person: _____ Agency: _____ Phone #: _____
Community partners working with client:

SAFETY CONCERNS FOR STAFF No Unusual History

History of:

SERVICES REQUESTED

Services Requested

SIGNIFICANT RISK FACTORS

Homeless Danger to others Suicidal ideation Recent suicide attempt
 Paranoia Hallucinations Substance abuse Delusions Mania
 Recent hospitalization (when & where) _____
 Other behaviors of concern:

Staff completing form: _____ Date: _____

BHAB Objectives 2017-18

Presented to General Meeting on 4/17/17

1. As funding and resources diminish, stay focused on caring for the SPMI.
2. Support efforts to streamline access to mental health and substance abuse services.
3. Advocate for increased supported housing, and partner with cities to open a year-round homeless shelter with wrap-around services for the SPMI population.
4. Advocate for integrated programs and residential settings for those in all age groups with both mental health and addiction challenges.
5. Support local efforts to divert those with severe mental illness from the criminal justice system.
6. Advocate for local alternative treatment facilities for inmates within the Justice system in order to expedite their treatment to help them regain trial competency and return them to court for adjudication.
7. Conduct at least six site visits in the fiscal year, including reviewing each relevant contract, per Site Visit Protocol.
8. Advocate for the older adult population with mental illness and physical issues.
9. Explore ways to better meet the needs of adults in crisis by supporting cooperation between Ventura County Behavioral Health, hospitals and the Crisis Residential Treatment (CRT).
10. Advocate for Ventura County Behavioral Health to provide services to meet the culturally diverse needs of the community.