



# COLUSA COUNTY BEHAVIORAL HEALTH ADVISORY BOARD MINUTES

Meeting was held on

**July 12th, 2022**

At Colusa County Department of Behavioral Health

Room 102

162 E. Carson St., Colusa, CA 95932

and via Zoom

1. Meeting was called to order at 3:03pm
2. Establish Quorum
  - a. Board Members in attendance: Debbie Hickel, Leona Satterburg, Rob Wilson, Walter Osborn
  - b. Board Members not in attendance: Diane Bransford
  - c. *Quorum established*
3. Meeting Participants
  - a. Behavioral Health Staff in attendance: Mayra Puga, Jeannie Scroggins, Heather Bullis-Cruz, Bessie Rojas, Tony Hobson, Haley Amundson
  - b. Others in attendance: Kent Boes, Colusa County Board of Supervisor; Jesse Marquez, Community Member
4. Public Comment:
  - a. N/A
5. Old Business:
  - a. Mrs. Satterburg brought the bylaws to our attention and asked if we need to discuss anything further on this topic. Ms. Amundson replied that the bylaws were given out last month as a refresher to be prepared when voting comes around in November.
6. New Business:
  - a. N/A
7. Action Item:



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- a. Mrs. Hickel made a motion to approve the Behavioral Health Advisory Board minutes from June 2022. Mrs. Satterburg seconded the motion. All present members were in favor.
8. MHSA Update:
- a. Ms. Puga shared the grand opening for Bright Vista Youth Center, July 20<sup>th</sup>, 2022 from 12:00pm to 3:00pm located at 304 5<sup>th</sup> Street.
  - b. Ms. Puga discussed the data notebook. Please see attachment for full details of the data notebook.
    - i. Mrs. Satterburg asked question regarding the percentage increase for certain items listed in the date notebook.
      1. Ms. Scroggins reported the numbers 2021 – 15 clients who scored 3 on anxiety scale of CANS. 3 Is highest. 2021-22 only 3. Increase for suicide risk one client with a score of 3 this year, 32 clients with a score of 2. Previous year 23 clients with a score of 2. Non injurious behavioral client with 3 and one client with a score of 2.
      2. Ms. Puga reported we have not seen an increase in telehealth services for therapy/rehab services. 604 services in 2020. In year 2021 there was 399 services. In 2022 there was 66 services to date. Clients seem to prefer coming in person. However, for psychiatry appointments we saw an increase in telehealth services. In year 2020 – 40 services. 2021 – 276 services. 2022 – 711 services.
        - a. Mrs. Satterburg mentioned that it is common across counties seeing an increase in medication telehealth.
    - ii. Can we coordinate routine drug testing, no. Clients are referred out of county.
    - iii. It was asked if CCBH has telehealth appts for MAT, we do not.
      1. Mr. Osborn asked how many MATs are in our county, how many clients using services? Mrs. Rojas stated there are 5 or 6. Mr. Hobson said we don't provide that service in-house so we don't track it. Jail is starting and Ampla Health may start provided this service. We have sites in Chico or Marysville, methadone treatment. Suboxone is from Wellpath in Yuba.
9. Director's Report:



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- a. Mr. Hobson said that we are two-thirds of the way done with painting the clinic building. The exterior is done and we are waiting to finish the interior.
- b. Mr. Hobson stated the plan was to paint and carpet at the same time. However, there has been a supply delay with the carpet. It is possible that we may receive the carpet in August.
- c. Mr. Hobson stated he has been introducing himself to our community partners. He stated that he wants to continue the relationships that are in place. Mr. Hobson reported that he met with the probation chief, sheriff, and assistant sheriff to discuss jail-based services on Thursday. Mr. Hobson stated he did an observation and met with county jail medical staff; there are a few things we can do to help provide more consistent care in jail. Mr. Hobson stated he will be meeting with the Department of Health & Human Services director soon and also meeting with Mike West of Colusa County Office of Education.
- d. Mr. Hobson reported one of the problems he found in the jail is prescription of psychotropics. There is a medication management problem in jail, and hopefully working with Wellpath to operate within limits will resolve this.
  - i. Mrs. Satterburg asked if they are using long acting injectables. Mr. Hobson replied this is the preferred way but some medications do not have that option available.
- e. Mr. Hobson reported on the Innovation program - PATH program. He stated he was noticing there was funding issues. We were not able to purchase things that we need to effectively operate program. Mr. Hobson learned we budgeted under \$500,000 to get program approved. We pulled money out of block grant and realignment, and that shouldn't have to happen with an Innovation Project. We are coming up at the end of first year this October and are seeing positive results. People who don't normally engage are engaging in this program. There are only two years left, so questions are being asked as to how do we sustain this. Mr. Hobson reached out to the OAC in hopes to add two more years and increase the budget to \$1 million instead of \$500,000 so we can adequately fund this program and figure out a sustainability plan.
- f. OAC has given Mr. Hobson successful examples on extending these programs. Mr. Hobson stated in the next week or two he will be putting a letter together to send to the OAC to officially request an extension of this program.

## 10. Program Integrity:



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- a. Mrs. Bullis-Cruz emailed out her data and provided hard copies.
- b. Mrs. Bullis-Cruz reported our current numbers are mostly drop-in intakes, and we haven't had too many recently. Ms. Scroggins stated we had our children's team in Anaheim so that was a reason for the reduced number of intakes; also this is the reason for wait days going up. Our no shows/cancellations are on a good path. Mrs. Bullis-Cruz reported that May had the highest number of intakes so far.

## 11. Quality Assurance:

- a. Mrs. Rojas emailed out her data.
- b. Mrs. Rojas stated there is a new Performance Improvement Project (PIP) for parents/caregivers of youth clients to increase collateral sessions.
- c. Penetration/parity rate YTD 355 clients – 56%. Mrs. Rojas states this is below parity and we need some outreach and engagement to bring numbers back up.
- d. Mrs. Satterburg asked if there was a formal referral for Safe Haven or Bright Vista. Mrs. Rojas informed her there was no formal referral process as these programs are open to all community members. However, our clinical team is always informing clients of these resources.
- e. Mrs. Rojas reported that she has drafted up QI Work Plan for next fiscal year and it will be posted to our county website in the next couple weeks.
- f. Mrs. Rojas reported on CalAIM helping DHCS move from a quantity of services to a quality of services model, meaning lots of changes to the way we currently operate. She stated we have adapted and trained our clinicians to do progress notes and we will be changing our intakes. Questions that we ask will be similar but in a different order and more concise. Mrs. Rojas reported that the state will be auditing for quality of care rather than small minor details; they will now be auditing more solely on fraud, waste, and abuse. There will be less paperwork for clinicians and more time for clients. Mrs. Rojas stated we need to make sure we are serving the severely mentally ill population; we don't want to make people think they are more ill than they really are.
- g. Mrs. Satterburg asked what other resources are available for people that don't qualify for our behavioral health department? Mrs. Rojas responded that we refer to managed care plan (MCP) to find a different provider. We only have one private practice in Colusa and they do not take Medi-Cal but they will refer. Mrs. Rojas stated we will arrange transportation for the client to and from the appointment.

## 12. PRA Report:



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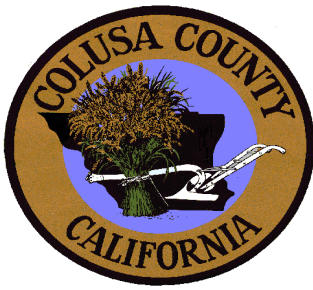
- a. Mrs. Bullis-Cruz stated that there were no grievances since our last board meeting.

## 13. Safe Haven Report:

- a. Ms. Scroggins reported that Safe Haven is operating very smoothly. We are up to 12 different groups throughout the month. Safe Haven is still looking to increase attendance; we have about 30 members. We are looking at taking a field trip for members which was discussed during Safe Haven leadership meeting.

## 14. State Required Contract Review:

- a. Mr. Hobson stated last month he would pull contracts the board wanted to discuss or ones that are being modified. Today, Mr. Hobson brought a draft contract for the drug medical treatment program. CBHDA made a lot of great changes.
- b. Mr. Hobson reported some highlights that are most fundamental: in the past if someone wanted drug and alcohol treatment, they would see a MFT or LCSW or KDAC, go through assessment and create cumbersome treatment plan. Client would then have to go to medical doctor to be able to prescribe the treatment. Mr. Hobson stated that now a LMFT or LCSW can approve the medically necessary treatment, making the doctor requirement obsolete.
- c. Mr. Hobson reported that medication assisted treatment (MAT) and reimbursement has changed for reimbursement purposes. Full ASAM criteria, good set of standards to determine appropriate level of care. MAT suboxone is completely covered. Counseling for opioid use, group treatment, case management, peer support is all a covered benefit, which they were not before. Mr. Hobson stated we do not have to opt in to all of these options though.
- d. Mr. Hobson reported that instead of treatment plan now there is a problem list which aligns with mental health side of things for CalAIM. He stated there is the same network adequacy standards on both sides (MH & SUD).
- e. Mr. Hobson stated payment reform is next. He stated reimbursable rates are very outdated and not current to reflect rates in 2022.
- f. In a nut shell, services are streamlined, reimbursements have expanded.
- g. Mr. Hobson stated when the document becomes final it would come to our board.
- h. Mrs. Satterburg asked if there were any big things we did not like? Mr. Hobson said there was nothing he did not agree with, everything looked good. Parity with mental health side.



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- i. Mr. Hobson stated we will need a medical director with a psychiatrist and someone to prescribe the MAT. He stated we have one physician that does a little bit now. Would like to see a provider, or a contract with a provider, to provide suboxone. Mr. Hobson stated sending these people so far to have to get their medication needs to change.

15. Chairperson's Report:

- a. N/A

16. Board of Supervisor Report:

- a. Mr. Boes stated he is currently working on budgets. Mr. Boes has nothing else to report at this time.

17. Adjournment – Meeting adjourned at 4:02pm

**Next meeting scheduled for: August 9<sup>th</sup>, 2022 at 3:00pm**

Minutes completed by: Haley Amundson