



COUNTY OF ORANGE
HEALTH CARE AGENCY
BEHAVIORAL HEALTH
ADVISORY BOARD

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**Mental Health and Substance Use Disorder
System of Care Meetings
NOTES**

Wednesday, November 10, 2021

9:00 a.m. – 10:45 a.m.

Teleconference meeting via Zoom

By Computer: <https://zoom.us/j/819682651>

By Phone: +1 301 715 8592

Meeting ID: 819-682-651

Members Present: Supervisor Katrina Foley, Karyl Dupee, Matthew Holzmann, Mara James, Steve McNally, Kristen Pankratz, Michael Rose, Courtney Smith, Nita Tewari, Duan Tran, Frederick Williams,

Members Absent: Jim Taylor, Supervisor Foley, Lauren Deperine

I. Welcome & Introduction: Michael Rose

- Meeting began at 9:02 a.m. Members of the Behavioral Health Advisory Board (BHAB) introduced themselves via roll call.

II. Public Comment

- NA

III. SUDSOC and MHSOC Breakout Sessions

Substance Use Disorder System of Care (SUDSOC)

Mental Health System of Care (MHSOC)

- **SUDSOC Breakout session:**

Two general topics were discussed. One was that there are fewer people attending the SUD breakout session versus the mental health breakout session. The second was a clarification that the notes for the System of Care (SOC) Meetings do not have to be approved by the Behavioral Health Advisory Board (BHAB) as do the notes from the BHAB General Meeting.

The group focused on health inequality as they felt that the topic has not been covered in the past. There were questions about public policies regarding health inequality and the group felt that inviting Hieu Nguyen from the Office of Population and Health Equity (OPHE) and Teresa

Renteria from Behavioral Health Training Services (BHTS) to speak on what they are working on in this area regarding both mental health and substance use disorders would be a great idea. There was also a discussion on how money could be set aside for smaller agencies to provide services to underserved groups. There was also a concern that the Behavioral Health Equity Committee does not hold public meetings and that the committee consists of mostly county staff and not community members. Another concern was that SUD funding is less than mental health funding and this does not support this population well and that more community members are needed to get their voices heard and to encourage stakeholders to work together. Different ways to reach out to the Orange County recovery community were discussed including reaching out to AA and other support groups, reaching out to treatment providers via provider meetings and to community members via social media outlets such as Facebook recovery communities. April Thornton was asked to provide a list of the contracted SUD providers to formulate a contact list. These contacts could help with reaching out to the recovery community.

Fred Williams also noted that minorities can be treated unfairly in private pay sober living homes. He has seen that within some homes, African American men have not been allowed to participate in certain areas, can receive less support and can be separated from the rest of the group. The group agreed that this should be addressed in their health equity discussions as well as in the discussions around Sober Living changes as mentioned by Supervisor Foley. All felt that there should be a support system in place for clients to go to and a resource list to guide them. There was further discussion around the Sober Living Alliance and their focus on health equity and bias.

Regarding opioid overdoses, there was discussion around increased penalties for drug dealers, but that not enough is being done for opioid users. Annette Mugrditchian mentioned that the DA is creating a diversion program with the Health Care Agency (HCA) and the Social Services Agency (SSA) to reach those before they have a chance to get to court, but it has not yet launched. It was also mentioned that the Musick Facility could become a Behavioral Health facility. Concerns were noted that families are still saying that people are being released from the jails in the middle of the night without reentry plans. It was asked if MHSA funds can be used for reentry. Mark Lawrenz discussed PEI's new "Life is Greater than Drugs" prevention campaign that will provide information and videos, including Fentanyl, to youth in a social media type format that is familiar to them. There will be a focus in the schools and ADEPT will also get the word out about the dangers of opioids. He also noted that he can follow up with OCDE if Narcan will be available on school campuses.

The group noted that they have not received a response from the Board of Supervisors (BOS) regarding their Fentanyl letter and it was asked if the letter had been sent. They also would like to know the BOS thoughts on the issue. Matt suggested that the BHAB present the letter in person to the BOS.

- **MHSOC Breakout Session:**

Michael Rose opened the BHAB Breakout session by allowing attendants to announce issues they would like addressed. Karyl Dupee shared her feelings about mental health marketing and how it influences everything the board wants to accomplish. Kristen Pankratz asked about SB 803, a law that will decree Peer Support Specialist Certification. She expressed concern that a proactivity report, included in the law, might put additional pressure on peers.

Karyl Dupee presented information related to her Older Adults Behavioral Health Committee. Their primary goal is to integrate a pilot program for those with both a mental health disorder and a

neurocognitive disorder like dementia. This underserved population will often age out of whatever program they were participating in without another resource to take its place. Housing is a problem for this demographic all over the country. Her proposal consisted of incorporating those who experience these issues with treatment and housing through an all-inclusive full-service-partnership. The proposal would be supported by organizations like the County, Cal Optima, and Be Well. The group discussed the potential cost for the program including money for staff and other expenses. In the short term, the endeavor was estimated to be relatively expensive. However, inaction was deemed to be far costlier. Questions and comments about the proposal were heard. The feedback from the field had been mostly positive and BHS Director Dr. Jeff Nagel is interested in pursuing it. When asked about the impact this might have on board-and-care facilities it was recognized that the program would not be immediately available for that population. The importance of long-term care for neurocognitive disorders like dementia was stressed. Alzheimer's OC and The Alzheimer's foundation will be approached for involvement.

Michael Rose instigated a dialogue on marketing resources related to Behavioral Health Services. She proposed ways to tidy up marketing campaigns by making them more intentional and formal. Johnice Williams acknowledged the high cost of effective marketing but contrasted it with the greater human cost of allowing people experiencing a mental health crisis to cope without adequate resources. She led a short conversation on how to keep the cost of marketing down. Bhuvana Rao described past efforts for marketing existing resources and how expensive they had been. She demonstrated how some forms of outreach were more applicable to their corresponding demographic and how having a designating agency had streamlined that process. She stressed the fact that money appropriated to marketing efforts will necessarily reduce funding in other areas. A discussion ensued about several forms of marketing, the efficacy of each one, and how best to link them to appropriate communities. It was established that these efforts might reduce stigma along with connecting individuals with appropriate help. The need to overcome obstacles and address pertinent issues related to marketing was stressed as well as ensuring that resources are advertised accurately, and that labor is set up to distribute information. Kristen Pankratz pointed out the advantages of appealing to the media as a free method for continued outreach. Karyl Dupee proposed the possibility of creating a marketing department, the barriers it might face, and what uses it might provide. Michael Rose demonstrated how this BHAB breakout group could continue to enhance advocacy efforts especially around the subject of BHS marketing.

IV. Feedback from Breakout Sessions:

- The members returned to the main session and shared some of the items and topics that each committee discussed during their breakout sessions.

V. System of Care Shared Items:

- Public comment (s) Received:
 - Members of the public at the last general meeting on 10/27/21 expressed concern that the Mental Health Services Act Steering Committee meetings were cancelled prior to having a replacement structure in place and that without community input, there was no one to question the MHSA programs and budgets. They questioned who will provide this oversight. Annette Murgditchian responded that Dr. Nagel will address this topic and the bylaws at the next BHAB general meeting. She noted that the BHAB will still have an active role with holding the public hearings for the MHSA plan before it goes to the Board of Supervisors for approval. She stated that the goal of the change is to expand the planning process. Dr. Rose stated that questions can also be addressed at the next general meeting.

- New advocacy issue
 - Karyl Dupee noted that the Older Adult Mental Health Committee recognizes that there is no one place for older adults living with a mental health disorder, a neurocognitive disorder, and a housing need, to go for services. There are many barriers to services and the committee is proposing a pilot program for funding and services for this population. She stated that older adults are a fast-growing group and includes veterans who may be experiencing these challenges, also. They would like to partner with OASIS and their wraparound services for their program. Min Suh will send out a draft proposal letter to the BHAB members on Wednesday or Thursday, November 10 or 11, for their review and feedback. They request that the members return their feedback to Karyl by Monday November 15, 2021, for her to have ready to take to the Older Adult Committee meeting on Wednesday November 17. Steve McNally noted that community care licensing will be overseeing 800 million dollars for board and care facilities, and that she could look for housing support within this funding. He also asked if it is known how many older adults are experiencing these 3 issues. She noted that they don't know the numbers and will learn more from this pilot project.
 - Matt Holtzmann noted that the Meeting of the Minds Conference will be held in person on April 15, 2022, in Anaheim. He noted that speakers can get free passes. He also suggested that the BHAB write a letter to BOS to suggest having the HCA Behavioral Health Services become a primary supporter for the conference. Annette Mugrditchian noted that the HCA does sponsor around 50 peers each year to attend the conference.

VI. Announcement:

- Kristin Pankratz noted that the Depression and Bipolar Alliance now has a Mandarin language support group at Mariners church. The facilitator is a trained peer worker, and he will work with MECCA and OCAPICA to promote these groups. Dr. Rose suggested that they send a flyer to Stigma Free OC and Be Well to have these groups added to their calendar. She also suggested that the flyer be sent to the group at the BHAB meetings to add to their distribution list.
- Dr. Rose confirmed that voting will take place at the next meeting for the BHAB Chair and Vice Chair positions. Nita Tewari will send out the statements from the candidates running for these positions.

VII. Adjournment

- Meeting ended at 10:43 a.m.
- The next meeting will be the BHAB General Meeting on November 24, 2021.