



Stanislaus County
Behavioral Health and Recovery Services
MEETING MINUTES

Type of Meeting:	Behavioral Health Services Act (BHSA) Advisory Committee	Date: 12/18/2024
Place:	Hybrid: Zoom & SCOE – Martin G. Peterson Event Center, 720 12th Street, Modesto, CA 95354	Starting Time: 1:00 pm
Attendees:	<p>Representatives: Esperanza Gonzales, Rosana Gonzalez, Margie Johnson, Shantel Johnson, Vanessa Lopez-Asaah, Jeff Davis, Davaun Ferreira</p> <p>Observers/Guests: John Black, Ann Ameral, Juan Perez, Laura Urzua, James Devlin, Socorro Arriola, Silvia Lemus, Sally Eberhard, Irene Hooper, Ismael Saucedo, Dr. Jacqueline Forte, Janelle Cardoso, Jennifer Pena, Karina Franco, Seny Madriz, Elizabeth Alvaraz, Marcela Pacheco, Denise Echevarria, M. Landeros</p> <p>BHRS Staff: Maribell McCarroll, Michele Benedix, Abraham Andres, Tameika Easter-Griffin, Michael Miller, Alma Torres, Leonor Sierra, James Yarnell, Kong Vang, Karina Luna, Pam Esparza, Brittany Kirkland, Teresa Alvarez, Adriana Torres, Mayra Hernandez, Cristina Ramirez, Luz Pulido, Erika Reyes, Mimi Nguyen, Nicole Portillo, Hamed Jalali, Amber Hayslett-Atkison, Vanessa L. Portillo, Carlos Cervantes, Katie Cosner, Travis Curtiss, Betty Campidonica, Robert Housden, Jose Lopez-Higareda, Janet Ruiz, Janelle Villalba, Estefania Hermosilla, Stephanie Navarette, Aurelia Vazquez, Jennifer Selby, Maria Hernandez, Marcela Berber, Anthony DiBella, Manuel Rivera, Natalie Legorreta, Nicole Cox, Karen Servas</p>	Ending Time: 3:30 pm
Order of Agenda Items	Discussion	Action Items
Welcome, Introductions, and Ice Breakers	Introductions were made and followed by an ice breaker.	
BHRS/BHSA Staffing Structure	The BHSA team and BHRS organizational chart were presented for informational purposes.	
Embedded Mental Health Services Team Presentation – presented by La Familia	Juan Perez from La Familia Central Valley presented on their Stan Connect program, a five-year initiative to establish and operationalize an Embedded Neighborhood Mental Health Team and support system across multiple communities in Stanislaus. The goal of the initiative is to serve 1,250 individuals in the designated neighborhoods over the 5-year period.	
Suicide Prevention Education Coalition (SPEC) Presentation	Tameika reported on the Suicide Prevention Education Coalition (SPEC), including a brief history on its formation and purpose: (1) develop an action plan and (2) design an effective and sustainable coalition of partners to collectively monitor and respond to suicide	The SPEC flyer will be sent via email to online participants who have requested it.

	<p>data across the county. SPEC has developed the Blueprint for Action, outlining six strategic focus areas to address priority populations based on data learning:</p> <ul style="list-style-type: none"> • LGBTQ+ • People between the ages of 25 and 44 • Veterans • White Men <ul style="list-style-type: none"> ○ A focus will be given to Hispanic men as trendline indicates death by suicide is increasing over time. <p>BHRS Staff will present the Blueprint for Action recommendations to BHRS Leadership for approval and adoption.</p> <p>Tameika invited committee members to attend SPEC's monthly hybrid meeting. Some Q&A followed.</p>	
Mental Health Services Act (MHSA) Reports	Maribel provided the timelines for the FY 2023-2024 Annual update and PEI 3-Year Evaluation/Report, which must be submitted to the DHCS and MHSAAC by June 30, 2025.	The Advisory Committee can expect to see these written reports in future meetings.
Behavioral Health Transformation	<p>Maribel reported that in March 2024, California voters passed Proposition 1, resulting in significant changes to the Mental Health Services Act (MHSA). The proposition repurposes MHSA, changing the name to Behavioral Health Services Act (BHSA), re-structuring the use of funding, and expanding on existing requirements. The most significant change under BHSA involves the funding component. BHSA eliminates the current five MHSA funding components and introduces the new housing component as outlined in the slides presented. She introduced the Behavioral Health Transformation timeline highlighting the following:</p> <ul style="list-style-type: none"> • January 1, 2025: integrated planning commences upon guidance from the state. • June 30, 2026: the 1st integrated plan is due. • July 1, 2026: performance contracts with BHSA requirements begin. • June 30, 2027: the first annual update is due. <p>Some discussions and Q&A followed.</p>	The PowerPoint presentation will be emailed to the BHSA Advisory Committee.
Table Discussion and Feedback, Report Out	The committee engaged in table discussions to provide feedback on the presented information, focusing on facilitating conversations with the following questions:	

1. What did you hear?
2. What did you like?
3. Other reactions or comments?

Feedback and questions included:

- Concerned about certain populations, particularly those without Medi-Cal and those who are undocumented, who have been disadvantaged due to barriers.
- Provide an update on the feedback collected for the past two years, detailing the comments and actions taken to guide future work.
- How can we overcome barriers and foster relationships within Managed Care Plans and streamlining processes to improve overall efficiency.
- Do we have the right individuals at the table to perform our best collaborative work?
- How will these changes impact our work/programs?
- Concerned about the unhoused population. What services they may require.
- Concerns about losing funding and staff due to changes.
- Need a better understanding of the BHSA funding process.
- Need more key partners and individuals at future meetings.
- How often will community meetings be held?
- The initial stage of the process is overwhelming with a large amount of information to absorb.
- Do we know if the state will be using the, now 10%, to fund programs such as Crisis Care Mobile units as Emergency Mental Health First Responders?
- The Crisis Mobile Unit works alongside Law Enforcement. We have been making great progress keeping consumers out of jail and out of mental hospitals. LE has expressed their appreciation for our program and would be devastated if it wasn't picked up.
- Appreciate any information and training about community-based organizations billing to Medi-Cal, and how that could potentially look/work for grant funded programs.
- There was a lot of good information about this but there will be a lot to digest. I can see why some of these programs are concerned. I'm thankful you are transparent about what we can possibly expect for all departments. A

	<p>lot of research will go into this, thank you for sharing all this information to keep us up to speed and on the same page.</p> <ul style="list-style-type: none"> • Willingness to continue to engage other agencies. • MH and SUD particularly for adolescents. • Policies that allow teens to access SUD treatment especially if parents forbid it. • Like the Early Prevention Intervention. • Repetition: Our community is struggling with the same issues. • Provide contractors with comprehensive information regarding BHSA. • Understand members' needs and provide support accordingly. • Housing First. • Identify barriers to ensure that the most vulnerable aren't overlooked. • Train the housing support staff with the skills to connect clients to the housing support funding that is available through the Medi-Cal Health Plans. 	
Meeting Evaluation	A QR code was provided to complete a voluntary evaluation form.	
Next Meeting: TBD		
Submitted By:	Nicole Portillo	