

CCJBH February Council Meeting  
 Thursday, February 6, 9:00 AM – 3:00 PM  
 California Department of Veterans Affairs (CalVet)  
 1227 O Street  
*Medal of Honor Conference Room*  
 Sacramento, CA 95814

Call in information  
 Conference line: 1-888-363-4734  
 Participant Code: 3232557

### Meeting Minutes

#### I. 9:00 AM Welcome & Introductions, Roll Call

**Council Members Present:** Secretary Ralph Diaz, Brenda Grealish, Hon. Stephen Manley, Tracey Whitney, Stephanie Clendenin, Jessica Cruz, Mack Jenkins, Tony Hobson

**Council Members Absent:** Matthew Garcia (joined via conference call), Danitza Pantoja

**Staff Present:** Stephanie Welch, Executive Officer, Monica Campos, Catherine Hickinbotham, Sheron Wright, Claudia Desmangles, and Marie Villalba

#### II. 9:05 AM Approval of November Meeting Minutes (continued after lunch)

##### Minutes for approval from 11/6/2019

*Stephanie Welch, Executive Officer, Council on Criminal Justice and Behavioral Health*

Motion to approve the minutes made by Tracey Whitney and seconded by Jessica Cruz.

Ayes-6

Nays-2

Abstentions—2

Minutes were approved

#### \*\*\*\*\*PUBLIC COMMENT\*\*\*\*\*

No public Comment

#### III. 9:15 AM Update and Highlights on Key Budget Items from the Governor's Proposed

Budget 2020-21

*Amy Jarvis, California Department of Finance*

*Kris Cook, California Department of Finance*

\$550 million slated for rehabilitative programs; this is double from 2012-13. High level goal is for inmates to obtain gainful employment upon reentry. Reference Budget Snapshot.

#### COUNCIL MEMBERS

**Ralph M. Diaz, Chair**  
 Secretary, California  
 Department of  
 Corrections and  
 Rehabilitation

**Bradley P. Gilbert, MD, MPP**  
 Director, California  
 Department of Health  
 Care Services

**Stephanie Clendenin**  
 Director, California  
 Department of State  
 Hospitals

**Jessica Cruz, MPA**  
 Chief Executive Officer,  
 National Alliance on  
 Mental Illness (NAMI)  
 California

**Matthew Garcia**  
 Field Training Officer,  
 Sacramento  
 Police Department

**Tony Hobson, PhD**  
 Behavioral Health  
 Director, Plumas  
 County

**Mack Jenkins**  
 Chief Probation  
 Officer, Ret.  
 San Diego County

**Stephen V. Manley**  
 Santa Clara County  
 Superior Court Judge

**Danitza Pantoja, PsyD**  
 Coordinator of  
 Psychological Services,  
 Antelope Valley Union  
 High School District

**Tracey Whitney**  
 Deputy District  
 Attorney, Mental  
 Health Liaison,  
 Los Angeles County



**Key budget goals as they relate to the justice-involved population:**

- Increase the number of inmates that receive their GED
- Provide 40,000 inmates that are engaging in vocational/academic programs with laptops
- Expand post-secondary educational opportunities for those that have received their AA
- Expand visitation to include a 3<sup>rd</sup> day
- Roll out ISUDT program by 2021-22 to all prisons
- Improve training for CDCR workforce
- Expand use of tele psychiatry within the prisons to improve access to MH services
- Retrofit intake cells for suicide prevention
- Expand video surveillance program
- Establish youth offender rehab communities that house individuals under age 26 in a campus style setting. This is consistent with goal to move DJJ out of CDCR into its own department within CCHCS. This should occur by 7/1/20
- Budget includes \$60 million from the general fund for 3 years, then reduces to \$30 million in 2023-24. This money intended to provide stabilized funding for probation and counties. This is a continuation of efforts from SB678
- The savings this year because of Prop 47 is estimated at \$123 million. 65% of this is set aside for BSCC, to administer MH programs, ISUDT, and/or diversion for adults and juveniles
- Budget is allowing for more general fund resources for local law enforcement training with regard to de-escalation tactics and MH crises

**High level overview of homelessness package as detailed in the budget:**

- \$1 billion was provided over the last 2 years in emergency funds. This year's budget includes an additional \$1 billion to address the homelessness crisis
- Companion programs include Medi-Cal Healthier California for All, a 6 year community care pilot program (collaborative effort with DSH for individuals deemed IST)
- Launched Housing Services Fund: \$750 million general fund one-time investment. DSS will provide data measures to track outcomes. This program has to comply with Housing First principles. Funds are intended to:
  - Develop affordable units
  - Supplement rental subsidies
  - Stabilize board and care system
  - Prioritize parolees and those released from incarceration
  - These funds can be used for shallow subsidies for individuals on the verge of homelessness
- To jumpstart action surrounding homelessness, the Governor released an executive order on 1/8/20, which outlined the following:
  - DGS to identify all properties of excess state land that can be used by local partners for short term emergency use to provide homeless services
  - DGS to provide 100 surplus trailers to locals
  - EMSA will be providing tents for emergency services
  - A multi-agency strike team is to be established to provide technical assistance to locals to help connect social services for homeless individuals

IV. 9:45 AM Policy and Budget Priorities for 2020

*Jessica Cruz, Chief Executive Officer, NAMI California*

*Michelle Cabrera, Executive Director, County Behavioral Health Directors Association*

**Highlights/Key Points**

- Ms. Cruz reviewed an overview of NAMI's mission and went on to discuss the following policy issues:
  1. MHSA conversations do not always include family or client voices
  2. LPS reform
    - o Focused on the 5150 piece
    - o There is a need for further discussions surrounding the definition of 'gravely disabled'
    - o There is a need to continue the discussion surrounding conservatorships
- Ms. Cabrera discussed CBHDA priorities and how they link with the Governor's priorities. She noted that Medi-Cal gives \$8 billion to counties for BH services. \$5 billion of that goes to beneficiaries for SMI and SUD's. Due to the IMD exclusion, there is no federal match for inpatient facilities with over 16 beds, therefore counties must incur the entire cost. How can we maximize the federal match so as to not exhaust counties' limited funding?
- CBHDA wishes to expand access to children and foster youth (individuals up to 21). It would be helpful if they were not required to provide a diagnosis for children.
- There are some exciting reforms with regard to Medical Necessity that should help with the problem of provider burnout due to excessive documentation requirements. Move counties towards outcomes accountability instead of having to over document care that is given.
- There needs to be greater standardization of law, including IMD waivers.
- CBHDA has questions surrounding ECM and in lieu of services because they are going to be dictated by managed care plans.
- CBHDA would like to see MHSA explicitly state that funds can be used for primary substance use disorder treatment because MHSA still needs to be used for SMI populations that are not homeless or justice involved.
- Regarding LPS reform, CBHDA would like to see the state begin to collect data surrounding conservatorship. We need to understand for whom a conservatorship is a useful tool?
- There is a national problem with providers not wanting to take on our Medi-Cal or justice-involved populations.
- The state needs to help fund public guardians so they can do a better job.
- CBHDA would like to see better data collection. Need data driven process for MHSA outcomes.
- If someone is considered an inmate (i.e. alternative custody, including treatment programs) then they do not qualify for Medi-Cal. Further discussion surrounding the lack of capacity and resources to treat SUD's and those that are considered gravely disabled.
- CBHDA budget priorities include:
  - o More money going into board and cares, especially for SMI's, possibly in the form of a waiver.



- Support for AB1810 is a core priority.
- Co-sponsoring Medi-Cal peer certification bill (SB803) this year.
- Co-sponsoring a bill that will help build BH relationships with schools by figuring out ways to get private insurance to provide BH funds for students that are fully insured.

V. 10:30 AM Overview of the "Estimating the Size of the Los Angeles County Jail Mental Health Population Appropriate for Release into Community Services" Report

*Stephanie Brooks-Holliday, PhD, Behavioral Scientist, RAND Corporation*

**Highlights/Key Points**

- In 2015, LA County established the Office of Diversion and Reentry. Since their inception ODR has diverted more than 4,400 individuals from jail into community based programs.
- Big picture question surrounding this research was to determine what does the community based capacity need to look like in order to serve all of the individuals at the county jails that might be appropriate for diversion and what is the full spectrum of services needed to serve this population?
- RAND looked at how many individuals in the mental health population of the jail might be appropriate for diversion? ODR decides on the clinical consideration and courts weigh in with the legal consideration. Both clinical and legal considerations are used to determine if someone is appropriate for diversion efforts.
- Research stratified diversion population into 3 categories: 1) likely divertible, 2) potentially appropriate for diversion and 3) not likely appropriate for diversion. This criteria was developed by working closely with stakeholders to decide what reflected the reality of diversion in LA County. This criteria was used on a test sample and found that 61% would be potentially divertible.
- The recommendations concluded:
  - Limitations included what type of data was available
  - There is a need for data
  - One notable obstacle to diversion is that individuals must plead guilty or no contest to charges and it is agreed that diversion requires a long commitment for the offender.

VI. 1:00 PM Request for Proposals (RFP's)

A. State Contracting Process

*Nicole Finch, SSMII, Contract Services, Acquisitions Management Section, CCHCS*

*Sharon Prindle-Bush, SSMI, Contract Services, Acquisitions Management Section, CCHCS*

**Highlights/Key Points**

- RFP's are processed for all non-IT healthcare services contracts. This is a topic today since we are asking council to adopt 3 RFP's. CCJBH budget lives within CCHCS.
- Overview of proposal process: AMS can execute contracts up to \$150,000 without DGS approval. They receive proposals and facilitate evaluation process. AMS chooses evaluation committee. CCJBH council members can act as subject matter



experts but cannot vote. Notice for intent to award is determined based on highest scoring RFP. Final authority lies with DGS if there is a protest. Protests can take 2-3 months to resolve. Once contract is awarded, CCJBH can begin to communicate with that entity.

- Takeaway: Have good evaluation criteria established to avoid delays and protests.

## VII. B. Lived Experience Contracts Process

*Cathy Hickinbotham, HPSI, Council on Criminal Justice and Behavioral Health*

### Highlights/Key Points

- Status update: Working with AMS unit to develop scope of work. Hope to release RFP in late February/early March. Proposals slated to be out for 6-8 weeks. These will be due sometime in April. Scoring should occur late April/early May. Shooting for executed contracts by June 30, 2020. Detailed content of this RFP can be found in the recently released Annual Report.
- Review of funding details: Funding concerns have been addressed by revising ratio of state to local funds. State funding down to \$270,000/year and local has been raised to \$150,000/year for 5 local contracts in each BH region (same as CBHDA regions). Both run on 3 year contract cycle. After 3 years, this won't be sustainable since we had some re-appropriated funds to be used now. Ratio is now 74% local to 26% state; it was previously 65% local to 35% local.
- Questions/Concerns: Council expressed some concern that managing 6 contracts is a lot of work for 1 person; suggestion was made to ask for more assistance.

## VIII. C. Data-Informed State-Level Framework

*Stephanie Welch, Executive Officer, Council on Criminal Justice and Behavioral Health*

### Highlights/Key Points

- This proposal is part of BCP to develop statewide monitoring framework that will operate as an informational tool to provide guidance to the state to reduce the prevalence of mental illness and substance use disorders in jails, prisons, and state hospitals.
- Overview: System will track trends and identify gaps in service provision for California's BH population and provide public safety outcomes by linking and analyzing a wide variety of indicators of available and existing datasets. This is a onetime project which calls for one \$450,000 RFP. Want contract to end no later than December 2022. Similar timeline as LEC, with execution by end of June 2020.
- Goals include: 1) identify datasets that can shed light on policy relevant questions about California's investment in criminal justice and behavioral health, 2) understand how available datasets can be linked and analyzed to generate policy relevant information about criminal justice and behavioral health in California, and 3) identify multiple framework models and understand how CCJBH council members, staff, and stakeholders can use each framework model to inform policy.
- Question/concerns: Who are potential bidders (academia, private firms, non-profits)? Answer: Bidders will be sharing how to provide best product and advising the council on how to populate the framework. They will be mapping out options for us.



\*\*\*\*\*PUBLIC COMMENT\*\*\*\*\*

No public Comment

**Motion to approve LEC and Data Informed State-Level Framework**

*Stephanie Welch, Executive Officer, Council on Criminal Justice and Behavioral Health*

Motion to approve was made and seconded.

Ayes-8

Nays-0

Abstentions—2

Both motions were approved

**IX. 2:00 PM CCJBH Policy and Budget Priorities for 2020**

*Stephanie Welch, Executive Officer, Council on Criminal Justice and Behavioral Health*

**CCJBH Key Policy Issues:**

**1) Medi-Cal Healthier California for All:**

It is the obligation of the council to try to bring criminal justice into conversations around health policy in a responsible way.

**2) Homelessness:**

Housing Policy Brief is in packet. CCJBH is partnering with the CSG Justice Center via grant from Melville Charity Trust to further explore the items identified in the Policy Brief. First scope of work meeting to occur next week.

**3) Behavioral Health Transformation:**

Governor's Taskforce has been formed and will be administered by HHS. Continue LPS reforms conversations. Parity within Medi-Cal system is critical (between managed care organizations and county Behavioral Health). Discussion regarding MHSA funds to support parolees. Making sure that folks that are re-entering communities have proper linkage to services and have a consistency of care. If everything falls to county, we will not be able to meet need. Engage with managed care plans and introduce ourselves.

**4) Juvenile Justice:**

Sheron will be reaching out to determine one single project we can agree on.

**X. 3:00 PM Business Meeting**

*Stephanie Welch, Executive Officer, Council on Criminal Justice and Behavioral Health*

**1. CCJBH Workplan**

- CCJBH staff to circle back with council members to further discuss priorities for 2020.
- Suggestion to focus on less projects.

**2. Annual Legislative Report Update**

- Report is complete and can be located in packet. This will be widely disseminated.

**3. Capitol Education Day**

- Sheron to reach out to interested council members to discuss dates/agenda.

#### 4. 2020 Council Meeting Dates

- Possibility of moving next council meeting to 4/30 & 5/1. Will discuss with council members offline.

#### Motion to adopt workplan with modifications

*Stephanie Welch, Executive Officer, Council on Criminal Justice and Behavioral Health*

Motion to adopt made by Tony Hobson and seconded by Mack Jenkins

Ayes-7

Nays-0

Abstentions—3

Motion approved

#### XI. 3:45 PM Announcements

We have \$150,000 left pre-trial diversion funds. Possibly bring together a state level advisory committee to come up with some recommendations on how to sustain and grow the impact of AB1810. This RFP has not been written yet. Title/name of project would be something along the lines of How are we going to support statewide implementation of pre-trial diversion? Could use funds for education rather than for coming up with policy recommendations. Circle back on this with council.

#### XII. 3:55 PM Public Comment on Matters Not on the Agenda

#### XIII. 4:00 PM Adjourn

#### **THE ORDER OF BUSINESS MAY BE CHANGED WITHOUT NOTICE**

Notice is hereby given that all times indicated and the orders of business are approximate and subject to change.

#### **PUBLIC COMMENT**

Public comment is taken prior to a vote on any agenda item as well as at the end of the meeting. If you so choose, prior to making comments, please state your name for the record and identify any group or organization you represent. Depending on the number of individuals wishing to address the Council, the Chair and/or Vice Chair may establish specific time limits for these presentations.

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Questions and/or requests for additional information prior to the CCJBH meeting may be referred to Marie Villalba at (916) 990-6788 or [marie.villalba@cdcr.ca.gov](mailto:marie.villalba@cdcr.ca.gov). To view these minutes online, visit our web site at: <https://sites.cdcr.ca.gov/ccjhb/>