

Orange County Children's Partnership (OCCP) Committee Minutes

Date: March 21, 2019

Location: HOA Conference Room A
333 W. Santa Ana Blvd, Santa Ana, CA 92701

Committee Members/Alternates Attendees:

Eldon Baber, Debra Baetz, Anne Bloxom, Karen Christensen, Kim Goll, Melanie Hertig Tracy LeSage, Stefanie Marangi, Rick Martin, Joanne Motoike, Paula Noden, Lynda Perring, Denise Schleicher, Dawn Smith

Non-Committee Attendees:

Chris Avventino, Lisa Burke, Denise Churchill, Eric Handler, Debra Kegel, Raina Lee, Luzvianeth Lopez, Lori Maze, Jackelyne Sanchez, Kristina Traw, Carol Wiseman

1. Introductions / Announcements

- Self-introductions were made.
- Debra Baetz will Chair and attend meetings moving forward.
- Dr. Handler has retired; Nichole Quick is the Interim Director.
- New members and alternate members need to complete ethics training prior to December 31 however, training is encouraged to be completed as soon as possible.
- Conflict of Interest forms are due by April 2, 2019. If they are not completed by then, the Clerk of the Board will charge a daily fee.

2. Action Item: Approval of Minutes

Meeting minutes from January 17, 2019 were approved.

3. Mental Health Screening for All 11 Year Olds – Dr. Alan Cortez, MD

There is a huge impact of adolescent depression and suicide in Orange County. The American Academy of Pediatrics recommends screening for depression in adolescents ages 12 and over. Five years ago, Dr. Handler and Dr. Alan Cortez, Pediatrician from Kaiser Permanente, did a pilot screening program for 11-12 year olds. When they started the pilot, they realized that a lot of medical professionals were not assessing for depression even for that age group. Dr. Cortez believes that the earlier you can identify adolescents at risk for depression, the less treatment is likely needed, and the more successful treatment will be. His recommendation was to expand the program from age 12-17 down to age 11 because medical paradigms and understanding of human development do not greatly differentiate 11 from 12 year olds and 11 years of age is where there is the most success in getting people to do well-visits during which depression screenings can take place. Now, all Southern Kaiser Permanente offices have adopted to screen 11 year olds for depression. The screening program for 11-12 year olds includes a PHQ-A, 13 question tool, which is completed by the adolescent without assistance and scored by the provider. The parents also fill out a standard well-visit questionnaire that includes a question about their belief whether their child seems sad, depressed or anxious and the provider looks at the patient's mental health history by reviewing a few easily seen relevant items in the electronic medical record. They

also can easily see if risk factors for depression are present like autism or diabetes, or problems such as bullying or abuse. Dr. Cortez's recommendation is to get every medical practice in Orange County to screen 11-17 year olds for depression and suicide. He suggests using tools and concepts that are simple, fast, and compatible with the existing infrastructure of the medical practice, and work with primary care providers to be certain they understand the referral programs and resources available for various degrees of mental dysfunction. Most adolescents do not need a psychiatrist and many do not need an individual therapist. Based on his experience, the simple act of screening can be therapeutic as it opens a parent's and adolescent's eyes to problems that can be addressed at home, school, and with simple advice from the provider.

4. OCCP Ad Hoc Subcommittee Secured Facility for Youth Report and Recommendation: Specialized Residential Treatment and Learning Facility – Karen Christensen and Denise Schleicher

Orange County does not currently have a placement where youth who suffer from complex trauma with severe mental health, substance use disorder, and co-occurring disorders can be safely placed and most effectively treated. As of February 2019, the Probation Department supervised 35 youth with acute mental health issues. The Social Services Agency had 43 youth with acute mental health issues. There are 12 dual jurisdiction youth amongst this population. These youths have been hospitalized or are at risk of psychiatric hospitalization. For the last 15 years or more, there has been no integrated facility in Orange County that has contained all the treatment and education elements necessary to meet these youths' needs. The Ad Hoc Committee has considered a variety of options to best meet the needs of this population. There are several options for where such a placement could be implemented including: a locked facility, repurposing of modules at Juvenile Hall (RFP or intra-county), remote facility implemented via RFP, and remote facility intra-county multi-agency implementation. A locked facility will probably not happen in California. Welf. & Inst. Code section 5585 allows for the involuntary placement of children in a locked psychiatric hospital only if they are an imminent danger to themselves or others. This is typically a three-day hold. Juvenile Justice youth can only be in a locked facility as part of a Welf. & Inst. Code section 602 court ordered commitment. Juvenile Hall is not designed to treat the acute and/or underlying mental health issues presented by these youths. The above options are time-limited and are not designed to provide long-term mental health treatment. Absent a commitment pursuant to Welf. & Inst. Code sections 5585 or 602, the law does not allow the involuntary placement of a dependent or Juvenile Justice youth in a locked facility. A change of state law would be required to enable the creation of a locked Specialized Residential Treatment and Learning Facility. The Ad Hoc Committee recommends a secure, but not locked facility for approximately 24 youth broken into smaller units. This would most likely require a Short-Term Residential Treatment Placement (STRTP) license from the State, but with a longer anticipated length of stay, up to one year. Minimal programming requirements of STRTP will be met with additional innovative elements to be added. There will be higher staffing needs than the 1:3 ratios currently required of STRTPs. It is anticipated that it would generally serve youth ages 13-17. Youth who turn 18 while placed in the facility may remain to complete their treatment plan. Each youth has a treatment plan that is implemented across all disciplines including, school, outside activities, and family involvement. The location of the facility could be local or remote. Some possible funding sources are Innovation Grant-State Funds, MHSA, Juvenile Justice Crime Prevention Act-State

Funds, Medi-Cal, STRTP Federal Funds, County Funds, and Homelessness Prevention Funds. This proposed Specialized Residential Treatment and Learning Facility will provide a longer term option not currently available. It will be an important part of the system of care for high needs youth by providing them with the innovative, intensive, and prolonged services they require. These services will change the trajectory of their lives to prevent them from negative outcomes as adults such as homelessness, incarceration, substance abuse, losing their own children, suicide, or early death. The Ad Hoc Subcommittee recommends the Specialized Residential Treatment and Learning Facility with as much county multi-agency involvement as possible. Paula Noden requested more data to support the need for a facility for example, denials from providers. Debra Baetz directed the Ad Hoc Committee to prepare a program statement, provide supporting data and research, determine CDSS's position on the funding, identify barriers to justify the level of care, include information on the population served, identify STRTP challenges even while fully implemented, include information on how the county is currently serving those children, develop a policy framework, and create vignettes. Include an action item at the next OCCP meeting to approve the direction for the Ad Hoc Committee.

5. Budget Update – Anne Bloxom

State funding for the In-Home Supportive Services (IHSS) program has improved. Foster care special funding streams are reduced. The County projected budget is more than county available funds, therefore, SSA is currently on a hiring freeze.

6. Annual Conditions of Children's Report – Lisa Burke

In partnership with the OCCP, the Fifth District Supervisor hosted a community forum regarding the 24th Annual Report on the Conditions of Children in Orange County on February 15, 2019 at the Mission Hospital. There were 130 people in attendance. People were really engaged. There were speakers and a panel of youth representatives from the Be Well Orange County Youth Committee that interacted well with the participants. The 2019 report is kicking off now. Robin Robyn Odendahl from Health Management Associates (HMA) will be reaching out to agencies in April, May and June to gather data and update the text. The steering committee for the report will kick off this month. Development of the report will be an iterative process. By July/August, the steering committee will have the initial layout for the report, and following their review, the draft report will be available to the full OCCP for review and comment before it is finalized for publication and presentation to the Board of Supervisors in October. The obesity prevention working group of the OC Health Improvement Partnership wants to have more input on the report. Lisa said that all agencies working on the report and providing data are free to share the report drafts with their colleagues for additional feedback and input. If there are other specific groups that want to review the report, Lisa will work with the HMA team to incorporate their review.

7. 2018 OCCP Areas of Focus/Goal

a) Legislative Updates – Kristina Traw

- *AB12 Firearms: gun violence restraining orders* - This bill would change the duration of the gun violence restraining order and the renewal of the gun violence restraining order from one year to a period of time between one to 5 years, subject to earlier termination or renewal by the court.

- *AB 339 Gun Violence Restraining Orders: law enforcement procedures* - This bill would require some law enforcement agencies to develop and adopt written policies and standards regarding the use of gun violence restraining orders.

Kristina shared that the Administration and Legislature is currently focusing Early and Periodic Screening, Diagnosis, and Treatment (EPSDT), child care and early schooling, and children living in deep poverty. She asked what bills the committee was interested in receiving updates for and Debra suggested providing two to three updates for each of the following categories: Juvenile Justice, child welfare, and early childhood and mental health. Kim Goll will be reaching out to Kristina regarding coordination pertaining to early childhood and follow up with OCDE to have them provide relevant updates. Kristina will reach out to the legislative manager from HCA for childhood mental health bills.

b) Secured Facility Committee Updates – Anne Bloxom
Discussed under Item # 4.

c) Suicide Prevention Initiatives – Anne Bloxom

Dawn Smith provided an update on the free Safe Talk training provided by Did-Hirsch. The training does not offer CEU (Continuing Education Units) and Didi-Hirsch is booked through the end of the year. LivingWorks trainers provide SafeTALK and ASIST training for a fee and can provide CEU credits for attending. \$600K was allocated by MHSA to Be Well OC to leverage and align suicide prevention. HCA will coordinate a suicide prevention campaign to boost it so there is a broader reach with private. The Directing Change Contest link will be distributed.

8. General Committee Member Comments

- Kim Doyle and Lori Maze will present on the gun violence law once it has been fully vetted.
- Eldon Baber encouraged attendance at the 25th Annual Blue Ribbon Month Kick-Off Ceremony event at the Bowers Museum on March 27, 2019 at 9a.m.

Public Comments

None

Next Meeting

The next meeting will be held on April 18, 2019 at the Hall of Administration Office.

Minutes taken by Jackie Sanchez