Members Present: Judy Blue, 2nd District, Chris Burtness, 3rd District; Sharon Byrne, 1st District; Barry Keenan, 1st District; Jim Laponis, 1st District; Sharon Rumberger, 2nd District, Kati Smith, 3rd District; (Absence) James Rohde, 3rd District; Kenneth Bell, 4th District

I. Call to Order
   - Advisory Board Chair, Sharon Byrne called the meeting to order at 3:05 p.m. Advisory Board members and attendees introduced themselves.

II. Introductions/ Announcements
   - Advisory Board Chair Sharon Byrne spoke to Steve Lavagnino, 5th District Supervisor about recruiting a 5th District representative. Mr. Lavagnino is considering a representative that is located in San Luis Obispo but was a former SMPD officer. Approval for the representative will be needed by County of Santa Barbara Staff if it is permitted with County rules and the Bylaws.
   - Advisory Board Chair Sharon Byrne spoke to Doreen Farr, 3rd District Supervisor about recruiting an Advisory Board member from Isla Vista.
   - Chair Byrne announced the DEA has ended the Drug Take Back Day program.

III. Approval of Minutes
   - Corrections to the February 2nd, 2015 minutes: Include the words, “for Education and Prevention.”
   - Include the words, “previously screened at Santa Barbara County town meetings in 2013 and 2014.”
   - Changed the date of the next meeting to, “March 2nd, 2015.”
   - In the bold section for the voting of elections take out, “as amended.”
   - Include the name, “Dawn Dunn”

A motion to approve the minutes as amended was made by Board member Kati Smith and seconded by Board member Chris Burtness. The minutes were approved.
IV. Public Comment

- No public comment.

V. Education and Prevention Sub Committee

- Advisory Board member, Chris Burtness discussed the possibility of presenting to School Administrations on the various drug products that are being sold throughout the county. County of Santa Barbara might put an ordinance to the drug companies due the end of Drug take-up day.

- Erin Weber representative of Doreen Farr, 3rd District Supervisor announced DEA will not be doing Drug Take Back day at the meeting. Advisory Board member, Chris Burtness will report more on this subject to the Advisory Board Members.

- Advisory Board member, Sharon Rumberger reported that she suggested to the CEO of Cottage Hospital that Cottage be willing to be participate in the program. Ms. Rumberger stated that other counties might become part of the lawsuit taking place between Alameda County and pharmaceutical companies.

- Advisory Board member, Kati Smith spoke on her understanding of the lawsuit between Alameda County and drug companies.

- Chair Byrne reported on the County of San Francisco’s consideration of an ordinance that will require the pharmaceutical companies to be part of the disposal process of the drugs they manufacture and sell. Possible future presentation for the Advisory Board members on this topic was entertained. In addition, the Board agreed that educating the public on the Drug Take Back program is important.

VI. Chair Report:

- Advisory Board Chair Sharon Byrne reported on the joint MH Commission-ADP Advisory Board meeting. An agenda would be created with Mental Health Commission. She reported that this will be the first joint meeting since she has been on the Advisory Board. Chair Byrne met with chair of Mental Health, Michael Gorodezky to draft an agenda for the joint meeting. The first item will presentations by and about both programs – Alcohol & Drug program and Mental Health – to provide a brief introduction on what each program does and the clients they serve. Also included on the agenda will be how Mental Health may develop evaluation reports like Alcohol and Drug Program Evaluation. Chair Byrne announced that the joint session will present an actual case about a client who needed services from both programs. Confidentiality and HIPAA requirements must be followed with this presentation.

- Advisory Board member, Kati Smith suggested inviting Annmarie Cameron to the joint meeting.

- Advisory Board member, Jim Laponis, with his experience working at the county for 37 years, observed that the Mental Health Commission in the past has been a powerful group for influencing decisions in the County.

- Chair Byrne also welcomed new Advisory Board member, Megan Cerney to the board. Ms. Cerney mentioned her job in relation to the discussion regarding the joint meeting. She is affiliated with the Air force’s Drug and Alcohol Program and has previously worked with Mental Health.

- Chair Byrne stated our new Director Alice Gleghorn has worked with integrated
programs. Mental Health Chair, Michael Gorodezky and Sharon Byrne made an agreement that five action items will be presented about every two months for measureable progress. ADP Program Manager, John Doyel mentioned the purpose of the Joint ADP and Mental Health is finding the commonality between both programs. Advisory Board member, Jim Laponis suggested getting another PHF (Psychiatric Health Facility) unit in Santa Barbara. Michael Craft cautioned that if such a unit were developed, MHSA funding can’t be used. Michael Craft concluded this agenda item by commenting that (health care) integration will help both programs establish methods that will work for both areas.

VII. Site Reviews

- ADP Program Manager, John Doyel described the ADP monitoring schedule and the State and Federal requirement mandating that sites must be monitored at least once a year. Mr. Doyel explained that each monitoring visit involved much more than a site visit. Invariably site visits include technical assistance, training and consultation. It is not uncommon for site visits to become weeks and months long quality improvement projects with individual providers. In other words, other than site reviews, training, file overview, and technical assistance are offered to providers.
- ADP needs electronic health records – named Clinician’s Gateway – to vastly increase the amount of quality control monitoring and to make preparing for site visits easier.
- Re: Site visits and monitoring, Mr. Doyel explained that Katarina Zamora works in the prevention side of ADP. Melissa Wilkins does some prevention monitoring and consultation but mostly works with Drug Medi-Cal in the treatment area. Jenaro Valdez works with providers for the PC 1000 Program (DUI). Stephanie Diaz is the quality control supervisor of ADP and often will go on site visits as well.
- Advisory Board member, Jim Laponis questioned how performance is measured. Mr. Doyel responded the contract, the laws, and regulation are all elements used to measure provider performance. He explained that contracts include legal requirements, for example to abide by laws such as Title-22. Mr. Doyel went on to explain that all evidenced-based practices have objective fidelity requirements that providers must also follow. In other words, there are many ways in which performance is objectively measured.
- Mr. Doyel explained that integration with Mental Health will be valuable for those providers currently contracting from ADP and Mental Health. Advisory Board member, Megan Cerney asked if ADP will be able to see Mental Health’s information within the electronic health record. Mr. Doyel no due to legal confidentiality protections. Michael Craft, spoke about the electronic health records (EHR). Advisory Board, Chris Burtness remarked that integration will be difficult because of the need to share information and the inability to do so with such laws. Advisory Board, Jim Laponis asked if there was a national organization for Mental Health and ADP which can set an example and ideas to follow for integration with EHR. Mr. Doyel stated yes, SAMHSA.
- Advisory Board member, Kati Smith explained the site visit calendar process to the new people on the board. Advisory Board member, Kati Smith questioned if there was oversight on Central Coast Headway since it is not on the calendar. Mr. Doyel replied in the affirmative and explained that CCH had been reviewed perhaps more than any
other single provider. Not having them on the list was an oversight. Chair Byrne announced commissioners to schedule their own site visits by signing up with ADP staff. If a site a visit is done by a commissioner it should be reported to the rest of the board members the site visit worksheet can be retrieved from John Doyel or Lucero Garcia.

VIII. ADP/ADMHS System Changes Update

- ADP Program Manager, John Doyel introduced Michael Craft as the Assistant or Deputy Director of Clinical Services for AMHS. Mr. Craft spoke about partnering with consultants for observing regional meetings about service integration. He introduced a model called “sequential intercept” which identifies what clients are most at risk at what times and where such clients originate. Some communities implement a shared setting for information on primary care, substance abuse and mental health services that can be accessed together. Mr. Craft stated that it is important to gather teams together on specific protocols to improve the client experience. He stated Dr. Gleghorn’s experience working with consultants in San Francisco and her understanding of system changes are beneficial to the department.

- At the recent Leadership Meeting the two main focuses were health care integration and “change agentry”. Mr. Craft briefly explained the concept of change agents and that the Change Agent meeting will provide a hub for clients, providers, and all employees from Mental Health and Alcohol and Drug Programs to collaborate and create recommendations to inform our system of care.

- Mr. Craft reported on SB 82 and the Crisis System of Care. The crisis grant involves three elements: Crisis triage teams, crisis residential facility (South County), and crisis stabilization unit (South County). The crisis residential facility is a 30-day unit for clients who are at risk, in crisis, about to be hospitalized, or discharged. The crisis stabilization unit facility is a 23 hour care facility with a need for medication access. At present the crisis team is almost fully staffed at about 80 percent.

- Mr. Craft continued. Two important open positions are Division Chief for Clinical Programs and Forensic Manager. Mr. Doyel remarked that he is glad integration is moving forward it will help with quality control, system changes, and co-occurring disorders training. Mr. Craft added that in August 2014 Mr. Doyel wrote a good research report on health care integration and how other counties have proceeded with integration. Mr. Craft concluded the Systems Change agenda item by briefly touching on Laura’s Law, how the Sheriff’s Department was collaborating with ADMHS and the upcoming Crisis Intervention Training (CIT) in July.

IX. ADP Program Manager’s Report

- Contracts: In the spirit of system change, providers are now collaborating on contract development. Mr. Doyel reported that he has not heard from Family Service Agency (FSA) to schedule a fiscal meeting. Lisa Brabo, present from FSA, expressed keen interest in meeting and discussing fiscal issues and proposals further with Mr. Doyel. An appointment will be scheduled. FSA as made proposals on how they plan to use their budget to provide services. The fiscal meetings are being scheduled currently and the first 14-15 contract amendments are taking in place. Mr. Doyel explained that
ADP is fiscally conservative but we have a good system of providers in place that will ensure a solid client centered prevention and treatment system in FY 15-16.

- **Addressing Opioid Overdose:** To address this issue ADP has begun implementing an overdose prevention program. Contract language has been included in next year’s contracts, brochures are being developed and naloxone is being researched. Essentially, ADP will require providers to be trained on the basics of overdose prevention and make available pamphlets on overdose prevention. Mr. Doyel reported about an Organization in San Francisco called DOPE (Drug Overdose Prevention and Education) as a cutting edge overdose prevention program. He reported that he may use their exact pamphlets with the County ADMHS logo. Advisory Board member, Jim Laponis spoke about his understanding of the opioid overdose. Mr. Doyel reported several groups that will be targeted for immediate interventions are heroin addicts coming out of custody, opioid dependent individuals in treatment programs, families and significant others of opioid individuals and general clients in all prevention and treatment programs to educate and empower individuals to recognize opioid ODs and intervene where possible. The next and final phase of OD prevention will be naloxone distribution.

- **Prevention in Isla Vista (IV):** Mr. Doyel reported he met with the downtown SB sobering center (SC) provider named Thresholds for Recovery. Thresholds has expressed interest in bidding for a (SC) contract in IV. In order to employ a Sheriff to be a Community Service Officer in the 3rd District commitment from the 3rd District representatives will be necessary. Advisory Board member, Jim Laponis asked if the SC will be only for alcohol or also for other drugs. John stated it can be for other drugs as well but primarily it will be for alcohol abuse. The proposed SC will be open to anyone in the community who needs the services. In addition to the SC in IV, a sober living home called the Haven is scheduled to open in IV for the fall quarter, providing another protective factor in the IV community.

- **Fiscal Update:** Fiscal representatives will formally present to the Advisory Board on the April or May meeting.

- **1115 ODS Demonstration Waiver (Waiver):** Mr. Doyel introduced and began to explain the Waiver to the Board. The County of Santa Barbara has decided to opt into the Waiver, which, if and when approved, will bring changes to the ADP Department and continuum of care. The Waiver requires all counties to assume responsibility and control of developing a complete continuum of care which will include residential and case management services which are currently not covered benefits. Individual counties will be held responsible for negotiating DMC rates and for the certification and recertification of DMC facilities.

- **Changes to DMC and SAPT Rules:** There have been two proposed changes DMC and SAPT funding requirements. First DMC group size appears to have been changed from a minimum of 4 and a maximum of 10 clients to 2 and 12 respectively. We are waiting for final authorization before making the announcement. Another change which is only proposed at this time is the allowance of using SAPT Block Grant funding to buy sober or transitional living beds to clients in treatment. More TBA.

- **Integration Efforts:** Already covered in previous agenda item on Systems Change.

- **EHR, Dashboard and Beyond:** Already covered in previous agenda item on Systems Change.
X. New Business

- Chair Byrne would like to make site visits a standing agenda item
- Chair Byrne suggested adding the ADP/MH Joint Meeting Debriefing as an agenda item for April. This item should take about 20 minutes.
- Chair Byrne asked for Erin Weber to present on the SB County Drug Take-Back Initiative law modeled after an Alameda County regulation.
- Chair Byrne asked Barry Keenan to present the first state marijuana legalization ballot measure for 2016.
- Vice Chair Laponis asked for the annual cost for the Advisory Board meetings at Pea Soup.

XII. Adjournment

- Chair Byrne entertained a motion to adjourn, Jim Laponis’ motioned and it was seconded by Barry Keenan to adjourn the meeting.
- The meeting adjourned at 4:58 PM.
- The next ADP Advisory Board meeting will take place on April 6th, 2015 from 3:00 PM – 5:00 PM.