

Plumas County Behavioral Health Commission Meeting
6/11/2025 1 pm Plumas County Board of Supervisors' Room, Quincy, CA
Approved at 8/6/2025 meeting.

STANDING ORDERS

Call to Order / Roll Call

Call to Order: Mimi Hall called the meeting to order at 1:00 pm.

Roll Call/Attendance:

Commissioners: Bill Cook, Kendrah Fredricksen, Kristin Gyford, Mimi Hall, Megan McCrorey, Merle Rusky, Stephanie Swithenbank, Kristy Tucker (quorum established)

Commissioners Absent: Liberty Gott, Valerie Sheldon

PCBH Staff: Jacob Grigg, Jessica McGill, Kristy Pierson, Gary Sanderson, Sharon Sousa

County Counsel: N/A

Public in Attendance (in-person): Jesslan Avlos (EPHC), Rhonda Wayson, Ericka Thompson (PDH SLS), Denise Pyper, Lisa Beck (PCBH)

Public in Attendance (by Teleconference): “iwojek”

Pledge of Allegiance

Additions to or Deletions from the Agenda/Approval – *For urgent items only. Merle moved to approve. Megan seconded. Motion carried.*

Public Comment – N/A

ACTION AGENDA

1. Behavioral Health Commission

a. Review and approve draft PCBHC minutes of May 7, 2025

i. **Bill moved to approve the minutes. Megan seconded. (Merle, Stephanie, and Kristin abstained.) Motion carried.**

b. Public Hearing for MHSA FY24-25 Annual Update

i. Kristi – did not receive any public comments prior to today; on page 35 of report re: housing purchase – amount will change to \$350,000 (from \$800,000) – was originally for purchase of a hotel for FSP – working with RCHDC – we can now only provide pre-development costs (not FSP which requires 51% CN&S portion 1.7 million of total). The funding will change with BHSA, and the remaining portion will roll over to new funding.

ii. Comments: Denise – Pg. 11 re: Family Members on BH Commission – must be at least 20%; pg. 42 Ali McKenna – is she still a provider? – yes, as telehealth; pg. 50 Crisis Support – what will happen to this money? Money not used will be rolled over into BHSA. Veterans Service Report – she said is a great report! Pg. 68 table – Denise asked for clarification (Kristi clarified). Pg. 72 WET funding – some have moved, others have stayed – money is paid out after they have worked the hours. Pg. 58 typo – 2nd paragraph (interesting). Kristin “Cultural

Competency” – how to change wording? If it comes from State/Feds, it has to go through them.

iii. Kendrah moved to recommend the MHSA Annual Update to the Board of Supervisors with the changes noted today, Bill seconded. Motion carried.

2. Informational Announcements & Reports

a. Commissioners Reports and Announcements

- i. Stephanie – QHS using Neuro-sequential model via Scott Cash, Wendy James – Prevention coordinator; will work on graphs showing how to meet students’ needs which will be shared with staff.
- ii. Kendrah – Pride month – see local events on FB and flyers in town. It is important to support the LGBTQ+ community, especially from a MH/BH perspective.
- iii. Kristin – Rite Aid is closing July 2nd; Mimi has been working with Karen Shad to make sure folks have access for insurance as well as physical access; Rob Thorman has contacted Caltrans – need encroachment modification permit for parking; new hours will be 9 am to 6 M-F; 9 am to 2 pm Saturdays.
- iv. Kristin – official PDH pet assistance therapy – “Wonder” (dog) is ADA approved.

b. Presentation by PCBH system of care stakeholders

i. Ericka Thompson – PDH Senior Life Solutions

1. Supporting Seniors’ Mental Health Together – opened in 2021, with a second program in 2024
2. 14% of adults over 60 have MH disorder – common symptoms: depression, anxiety, grief, loss of independence, coping with new health diagnosis, etc.
3. Symptoms and risk factors – for loved ones and clients
4. Voluntary outpatient program for those 65 and over; therapy and support tailored to meet older adults’ needs
5. Coping and communication skills; 36% overall improvement at discharge; 56% improvement on depression scale, 51% improvement on clinical outcomes in evaluation
6. Other outpatient programs show 84% reduction in hospitalizations, 58% reduction in ER visits, which reduce health care costs
7. BH providers and family – can see changes in client’s mood, behavior, daily activities; early intervention is best
8. Older adults’ decline in activities – not making appointments, not doing self-care or errands, not cleaning, loss of sleep, sadness, fatigue, difficulty making decisions, feeling of worthlessness
9. 2 therapists (CBT), physical care: Ericka is RN – monitoring vitals, addressing sleep quality, hygiene; coordinator with doctors
10. Case Management, transportation, provide resource lists
11. Referral Process – anyone can make a referral; observe symptoms, collect client’s contact info (phone #), submit to SLS (name, DOB, reason)
12. MH is just as important as physical health, especially for seniors
13. Be proactive, reach out to SLS with referrals/questions; together a meaningful difference can be made (see hand-outs: business cards, pamphlets, etc.)

- 14. EPHC is developing a similar (but separate) program – hope to open in the fall (interviewing for program director and therapist).
- ii. Schedule is in process, with the next few months as follows:
 - 1. July: Plumas Rural Services (PRS)
 - 2. August: Eastern Plumas Health Care (Jesslan, EPHC)
- c. Housing projects/plans for BH clients
 - i. Sharon reported that RCHDC sent an email saying they may not be able to complete a project for PC due to short timeline and lack of funding.
 - ii. We will have to do an RFP to find another developer. Mimi knows someone who might be willing to consult with us.

3. Behavioral Health Department

- a. Director's Report (Sharon Sousa)
 - i. Staffing – good news: Keegan Hood is now licensed – now have 3 licensed therapists; new site coordinator: Dakota; posted for a CM and Continuum Care Coordinator (for housing, court reports, IMD's, etc.); bad news – practicum student Mahlia Armitage has resigned (was pursuing MSW); PC has some teenage girls who need long-term providers (one has had 6 therapists); 2 social services staff will become practicum students (short-term).
 - ii. Greenville/Taylorsville numbers: 55 residents receiving services (from 2023) – only 5 sessions held in shared PDH Greenville office. Mimi said the BoS is talking about rebuilding public buildings. There are other offices/spaces which may be able to provide space for case management (Vets Hall, Indian Valley School, Round-house council, etc.).
 - iii. Budget time – SUD and MHSA funding is okay, MH program is expanding more than bringing in revenue (Cal-AIM's amount is going down). Lack of therapists means not enough billable hours. Our provider contracts are very expensive, and they often have waitlists (e.g. after-hours psychiatrists, telehealth therapists). \$4 million shortfall.
 - iv. Big audit seems to have gone well; still submitting some paperwork; it will be some months before we know the results.
- b. Quality Assurance Improvement (Jessica McGill) – see separate report
 - i. May was very busy. EQRO review was heavy on data – they are waiting for results (probably will not hear anything until September 2025). Triennial review – seemed to go well.
 - ii. DHCS Correspondence and BHINs
 - 1. 25-018 Payer of Last Resort – DNA
 - 2. 25-019 Transgender, Gender Diverse, Intersex Cultural Competency – required training (will be done in August) – will be open to other providers in community (at Vet's Hall)
 - 3. 25-020 Adult & Youth Screening – required to use this new tool which allows more flexibility for “screening-in” especially for SMI population
 - 4. 25-021 MHSA county population – for funding allotment
 - 5. 25-022 Launch of web-based MH forms
 - 6. 25-023 supersedes 22-045 regarding sanctions for non-compliance
 - iii. Access and Utilization for May
 - 1. 274 open charts, 205 unduplicated clients, 75% penetration rate (goal = 80%)

2. 84 youth (big increase from previous month); 122 adults
3. New Intakes: 27
4. Crisis Services: 48 (21% in jail)
5. Mobile Crisis Unit: 4
6. Psych Placements: 4
7. 5150's: 10
- iv. Grievances – 1 confidentiality, 1 change of provider
- v. Next QIC meeting will be August 28th at 10 am

c. MHSA Report (Kristy Pierson)

- i. May was MH Awareness month – gave out wellness kits to specified grade levels (some leftover kits are available)
- ii. MHSA did their audit – they received one finding re: individuals getting connected with services in the community

d. BH Commission Information and Improvement – N/A

Public Comment – N/A

Adjourned as BH Commission and reconvened as AOD commission.

Alcohol and Other Drug Advisory Board

1. Action Agenda
 - a. N/A
2. Informational Announcements & Reports
 - a. AOD Report (Gary Sanderson) – see separate report
 - i. Very busy with the big audit – preliminarily there were 9 corrective actions (down significantly from previous years); they are working on this.
 - ii. Monitoring for contract providers (e.g. Granite, Aegis narcotic treatment program, PDH)
 - iii. Open Substance Use Block Grant CAP – 6 open years of CAPS – working on corrective action plan for 2023-24; they have submitted plan for 2022-23.
 - iv. Charles Abernathy is new staff – in training and co-facilitating groups.
 - b. Quality Assurance Improvement
 - i. BHINs – nothing new
 - ii. Access and Utilization for May
 1. 48 SUS charts open, 30 unduplicated clients, 62% penetration rate
 2. 5 youth (voluntary), 25 adults
 3. New intakes: 7 (up from last month)
 4. 0 residential placements
 5. No grievances to report

Adjournment: Meeting adjourned by Mimi @ 2:53 pm

Next meeting: **July 2, Courthouse: Supervisors' Board Room**, 1 pm to 3 pm.

Respectfully submitted, Kendrah Fredricksen,

Secretary, Plumas County Behavioral Health Commission