

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**ITEM: 2.3  
(ID # 26517)**

**MEETING DATE:**  
Tuesday, December 10, 2024

**FROM :** RUHS-BEHAVIORAL HEALTH

**SUBJECT:** RIVERSIDE UNIVERSITY HEALTH SYSTEM - BEHAVIORAL HEALTH: Receive and File the Behavioral Health Commission Annual Report for FY 2023/2024, All Districts. [\$0]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Receive and File the Behavioral Health Commission Annual Report for FY2023/2024.

**ACTION:**Policy


  
Matthew Chang, Director 11/19/2024

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**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Spiegel seconded by Supervisor Jeffries and duly carried by unanimous vote, IT WAS ORDERED that the above matter is received and filed as recommended.

Ayes: Jeffries, Spiegel, Washington, Perez and Gutierrez  
Nays: None  
Absent: None  
Date: December 10, 2024  
xc: RUHS-BH

Kimberly A. Rector  
Clerk of the Board  
By:   
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

<b>FINANCIAL DATA</b>	<b>Current Fiscal Year:</b>	<b>Next Fiscal Year:</b>	<b>Total Cost:</b>	<b>Ongoing Cost</b>
<b>COST</b>	\$ 0	\$ 0	\$ 0	\$ 0
<b>NET COUNTY COST</b>	\$ 0	\$ 0	\$ 0	\$ 0
<b>SOURCE OF FUNDS: N/A</b>			<b>Budget Adjustment: No</b>	
			<b>For Fiscal Year: 2024/2025</b>	

**C.E.O. RECOMMENDATION:** Approve

**BACKGROUND:**

**Summary**

The Behavioral Health Commission (BHC) was established under the provisions of California Welfare and Institutions (W&I) Code Sections 5604 et seq., and Health and Safety Code Sections 11800-11803 et seq. The BHC serves as a liaison between the community, Riverside University Health System - Behavioral Health (RUHS-BH), and the Riverside County Board of Supervisors. It is the function of the BHC, under the W&I Code 5604.2 and BHC Bylaws, Article I, Section 3, to review the services of the local mental health and substance abuse system and assess programs to make sure they meet the needs of our residents and ensure the citizens of Riverside County receive prompt, effective, efficient, and culturally competent community-based services. The BHC offers critical examination and review of services and proposes recommendations concerning the delivery of services.

As required under the W&I Code, BHC Bylaws, and the Riverside County Board of Supervisors, Policy A-21, the Behavioral Health Commission respectively submit its annual report to the Board of Supervisors covering the needs and performance of Riverside County's behavioral health system.

The BHC's commitment to maintaining its duties and responsibilities has always been met with cooperation and enthusiasm. Serving those diagnosed with a mental illness and those struggling with substance abuse is the ongoing goal of the Riverside County BHC.

The BHC would like to take this opportunity to thank the Board of Supervisors for their continuing support related to the needs of RUHS-BH, which in turn, allows them to provide effective and efficient mental health and substance abuse services to the citizens of Riverside County.

**Impact on Residents and Businesses**

The BHC serves as an oversight committee of RUHS-BH to advocate as a united voice for consumers of substance abuse and mental health services and to promote improvement in

SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA

the quality, quantity, and cultural competency of behavioral health services delivered to the residents of Riverside County.

A handwritten signature in black ink that reads "Gregg Gu". The signature is written in a cursive, flowing style.

Gregg Gu, Chief of Deputy County Counsel 11/19/2024

COUNTY OF RIVERSIDE

RIVERSIDE UNIVERSITY HEALTH SYSTEM – BEHAVIORAL HEALTH

# BEHAVIORAL HEALTH COMMISSION

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## ANNUAL REPORT FY 23/24

7/1/2023 – 6/30/2024

### BOARD OF SUPERVISORS

DISTRICT I – KEVIN JEFFRIES

DISTRICT II – KAREN SPIEGEL

DISTRICT III – CHUCK WASHINGTON

DISTRICT IV – V. MANUEL PEREZ

DISTRICT V – YXSTIAN GUTIERREZ



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# BEHAVIORAL HEALTH COMMISSION INTRODUCTION

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The Riverside County Mental Health Advisory Board was created on August 15, 1966 and transitioned to become the Mental Health Board on April 6, 1993. The purpose of the Mental Health Board was to review and evaluate the County's mental health needs, services, facilities and special matters; advise the Board of Supervisors and Director of Mental Health; review certain behavioral health related agreements; assess the impact of realignment of services from the state to the County; report to the State regarding the County's performance outcome data; and perform other enumerated tasks.

The Riverside County Substance Use Advisory Committee was formed on June 2, 1994 through the consolidation of the Riverside County Alcohol Advisory Committee and the Riverside County Advisory Committee on Drug Abuse. The purpose of the Substance Use Advisory Committee was to advise the Board of Supervisors and Director of Mental Health on the prevention, treatment, and recovery programs within the County; encourage and educate the public on the nature of drug and alcohol programs; and review the County's needs to address the ongoing problems associated with drug and alcohol abuse.

As these two issues are often so intertwined, the state legislature dissolved the State Department of Mental Health and the State Department of Alcohol and Drug Programs and merged them into the Department of Healthcare Services (DHCS) in 2013. Following suit, on November 24, 2014, Riverside County's Board of Supervisors approved the consolidation of the Mental Health Board and Substance Use Advisory Committee, establishing the Behavioral Health Commission (BHC).

The Behavioral Health Commission is committed to overseeing, evaluating, and reviewing Riverside University Health System – Behavioral Health's delivery of services to people struggling with mental illness and/or substance abuse residing within the county. It is the function of the BHC to ensure that citizens of Riverside County are provided with prompt, effective, efficient, and culturally competent community-based services. The BHC provides critical examination and review of services and provides recommendations concerning the delivery of services.

The BHC serves as a liaison between the community, Riverside University Health System – Behavioral Health, and the Riverside County Board of Supervisors. The Commission consists of consumers, family members of consumers, and public interest representatives from the medical, educational and other professional fields, as well as law enforcement, whose aim is to educate, advocate for ready access to services, and guide consumers through the mental health and substance abuse system.

The BHC is committed to ensuring that culturally competent services are provided to people of all ethnic, cultural, racial, and linguistic backgrounds through program review and appropriate recommendations.

## MISSION STATEMENT

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“The mission of the Riverside County Behavioral Health Commission is to provide public, consumer, and family member input into the planning process of mental health and substance abuse services and to assist the Riverside County Department of Behavioral Health in carrying out its mandated functions, to advocate as a united voice on substance use and mental health consumer issues, and to promote improvement in the quality, quantity, and cultural competency of behavioral health services delivered to the residents of Riverside County.”

## THE MISSION OF THE CALIFORNIA MENTAL HEALTH MASTER PLAN

*(Passed as part of the Bonzan-McCorquodale Act of 1991)*

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“The mission of California’s mental health system shall be to enable persons experiencing severe and disabling mental illnesses and children with serious emotional disturbances to access services and programs that assist them in a manner tailored to each individual, to better control their illness, to achieve their personal goals, and to develop skills and supports leading to their living the most constructive and satisfying lives possible in the least restrictive available settings.”

## RECRUITMENT EFFORTS

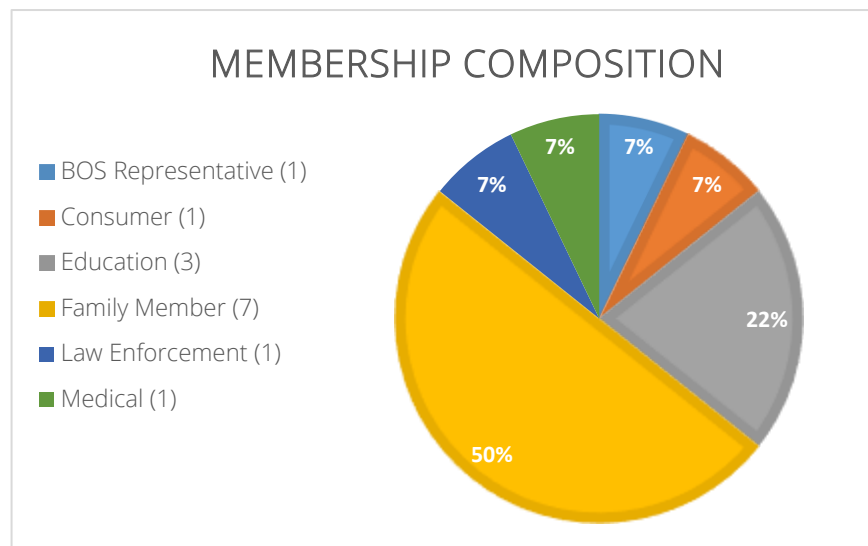
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The Behavioral Health Commission continually supports recruitment efforts and encourages new members to join the Commission through a variety of methods that include community outreach and solicitation through diverse venues. These include postings on the Riverside University Health System – Behavioral Health and Board of Supervisors websites and distribution of information at community events such as the annual May is Mental Health Month Fair and other community gatherings.

## COMPOSITION OF THE COMMISSION AND BOARDS

In accordance with Welfare and Institutions Code, Sections 5604, as amended by Chapter 1374: The Behavioral Health Commission (BHC) for the County of Riverside shall consist of 15 members appointed by the Board of Supervisors. An additional member of the BHC shall be a member of the Board of Supervisors or his/her formal designee. Fifty percent (50%) of the board membership shall be consumers, or the parents, spouses, siblings, or adult children of consumers who are receiving or have received mental health services. At least twenty percent (20%) of the total membership shall be consumers, and at least twenty percent (20%) shall be families of consumers. Each member of the Board of Supervisors shall appoint three people from their district to the BHC.

The BHC for the County of Riverside also consists of three Regional Behavioral Health Advisory Boards: Western, Mid-County, and Desert. The purpose of the Regional Behavioral Health Advisory Boards is to serve in an advisory capacity to the Regional Administrators and the BHC, and to ensure that all County mental health and substance abuse programs and services of the respective geographical areas are responsive to community needs. The Regional Boards convey the goals and programs of service to the community. They also represent and serve as a two-way communication link between the regional services and the general public, key segments of the community, and geographic areas within the county. Each Regional BHC focuses on specific Supervisorial Districts. The Desert Regional Board focuses on District 4 and parts of 5; the Mid-County Regional Board concentrates on Districts 3, and parts of 1 and parts of 5; and the Western Regional Board addresses Districts 1, 2, and parts of 5.



As of June 30, 2024  
Total No. of Members: 12  
Number of Vacancies: 4



## 2023 BEHAVIORAL HEALTH COMMISSION ROSTER

### EXECUTIVE COMMITTEE

<b>VICTORIA ST. JOHNS – CHAIR</b> Family Member/Education District 4 – V. Manuel Perez	<b>DARYL TERRELL – VICE CHAIR</b> Family Member/Public Interest District 5 – Yxstian Gutierrez	<b>RICK GENTILLALLI - SECRETARY</b> Law Enforcement/Veteran Advocate District 5 – Yxstian Gutierrez
<b>GREG DAMEWOOD</b> Family Member/Public Interest District 5 – Yxstian Gutierrez	<b>RICHARD DIVINE</b> Family Member District 2 – Karen Spiegel	<b>BEATRIZ GONZALEZ</b> Education District 4 – Manuel Perez
<b>DR. WALTER HAESSLER</b> Public Interest/Medical Field District 3 – Chuck Washington	<b>DEBBIE ROSE</b> Board of Supervisor Representative District 2 – Karen Spiegel	<b>CAROLE SCHAUDT</b> Public Interest District 4 – Manuel Perez
<b>BRENDA SCOTT</b> Family Member District 3 – Chuck Washington	<b>APRIL SMITH</b> FamilyMember/Education/Consumer District 3 – Chuck Washington	<b>LAUNA WILSON</b> Family Member District 1 - Kevin Jeffries
VACANT	VACANT	VACANT
VACANT	VACANT	VACANT

Total No. of Members: 12  
 Number of Vacancies: 4

## 2023 DESERT REGION ADVISORY BOARD ROSTER

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<b>RICHARD DIVINE - <i>Chair</i></b> Family Member District 4	<b>JANICE L. QUINN, MD - <i>Vice Chair</i></b> Public Interest District 4	<b>MARK MILLER - <i>Secretary</i></b> Public Interest District 4
<b>JOSEPH A. BUTTS</b> Public Interest District 4	<b>MAURA FISHER</b> Public Interest District 4	<b>BEATRIZ GONZALEZ</b> Education/Public Interest District 4
<b>EVA GUNTHER-JAMES</b> Public Interest District 4	<b>JIM JONES</b> Public Interest District 4	<b>SANDRA NEJA</b> Family Member District 4
<b>TORI ST. JOHNS</b> Family Member District 4	<b>CAROLE SCHAUDT</b> Public Interest District 4	<b>BRUCE SHERR</b> Consumer District 4
<b>VACANT</b>	<b>VACANT</b>	<b>VACANT</b>

Total No. of Members: 12  
 Number of Vacancies: 3

## 2023 MID-COUNTY REGION ADVISORY BOARD ROSTER

<b>BRENDA SCOTT – Chair</b> Consumer / Public Interest District 3	<b>RAMON AMADO – Vice Chair</b> Consumer District 3	<b>JENNIFER WOODWORTH – Secretary</b> Family Member/ Public Interest District 3
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<b>VERNITA BLACK</b> Family Member / Public District District 3	<b>DOLORES DEMARTINO</b> Family/ Public Interest District 3	<b>WALTER T. HAESSLER, MD</b> Public Interest District 3
<b>DON KENDRICK</b> Consumer District 2	VACANT	VACANT
VACANT	VACANT	VACANT
VACANT	VACANT	VACANT

Total No. of Members: 7  
 Number of Vacancies: 8

## 2023 WESTERN REGION ADVISORY BOARD ROSTER

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GREG DAMEWOOD - <i>Chair</i> Family Member District 5	VACANT - <i>Vice Chair</i> Category District	VACANT- Secretary Category District
RICHARD YARBROUGH Consumer/ Family Member/ Public Interest/ Rep. of Alcohol & Drug Com DISTRICT 5	VACANT	VACANT
VACANT	VACANT	VACANT
VACANT	VACANT	VACANT
VACANT	VACANT	VACANT

Total No. of Members: 2  
Number of Vacancies: 13

# COMMITTEE AND REGIONAL BOARD REPORTS

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The Behavioral Health Commission has regional boards and a number of committees tasked with assessing programs, their functions, and effectiveness.

## REGIONAL BOARDS:

DESERT REGIONAL BOARD

MID-COUNTY REGIONAL BOARD

WESTERN REGIONAL BOARD

## STANDING COMMITTEES:

ADULT SYSTEM OF CARE COMMITTEE

CHILDREN'S COMMITTEE

CRIMINAL JUSTICE COMMITTEE

EXECUTIVE COMMITTEE

HOUSING COMMITTEE

LEGISLATIVE COMMITTEE

OLDER ADULT INTEGRATED SYSTEM OF CARE COMMITTEE

VETERANS COMMITTEE

An annual summary of each regional board and committee's activities are drafted and submitted by the Committee Chairs, Supervisors, and Administrators, which are included on the following pages.

# ADULT SYSTEM OF CARE COMMITTEE

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Brenda Scott – Behavioral Health Commissioner – Adult System of Care Committee Chairperson

Jacqueline Markussen – Riverside University Health System – Behavioral Health Services Administrator for  
Mid County Region

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## MISSION STATEMENT

“To promote, support, and advocate for high quality and culturally appropriate services for severely and persistently mentally ill adults and their families residing in Riverside County through formal recommendations.”

## GOALS

“To provide Riverside University Health System – Behavioral Health and the Behavioral Health Commission with feedback from community stakeholders, consumers, and family members about the mental health and substance abuse needs of adults and their families, to make recommendations about services to best meet the needs of adult consumers and their families, to provide input about policies and advise of necessary changes to existing policies to ensure the delivery of high quality and culturally competent services, to review performance outcomes of mental health programs to determine if they meet the goals of Riverside University Health System – Behavioral Health, to improve coordination of services to consumers who receive services from multiple agencies and enhance interagency collaboration.

The committee has been working on and will continue to work on the following goal(s):

- Increase membership and utilize social media to promote the committee

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The Adult System of Care Committee currently has an average regular attendance of 15-25 people at these meetings. The meetings are attended by RUHS support staff, Behavioral Health Adults Regional Administrators, Deputy Directors, Board Members, Cultural Competency Liaisons, Community Agencies IEHP Liaison, Consumers and Public Members. Administrators for Western, Mid-County and Desert Region Adult Clinics provide monthly updates.

Guest speakers from different agencies provided the following presentations:

Shannon McCleerey-Hooper, Deputy Director of Peer Support Services presented Peer Support Services and The Peer Resource Centers. Centers in all three regions. They provide resources, groups and one-on-one peer support.

Laurence Gonzaga, Program Manager BH for Molina Healthcare of CA presented, WeConnect Health Management App. Offered to Molina Healthcare members that offers supplemental behavioral health support. Members receive incentives to encourage participation.

Violetta Clarke, Director of IEHP Riverside Community Resource Center presented, IEHP Riverside Community Resource Center. The center's focus is to assist social determinants of health. The resource center is designed to maintain, educate and improve individual health. They have free workshops that fall under 5 pillars of health: fitness,

health education, wellness, nutrition, and collocate partners. They also have an enrollment unit on site in case anyone walks in and has no insurance.

Heather Sylvester, Supervisor for Mobile Response Program presented 24/7 Mobile Crisis. The team will go out and meet with anyone experiencing any kind of behavioral health crisis. They are a diversion focus program and try to keep people safe in the lowest level of care possible but will 5150 someone if they are a danger to themselves or others. They have teams in all three regions.

Nisha Elliott, Administrative Services Manager for MHSA WET provided an annual MHSA update. She went over the 5 components of the MHSA plan: Community Services and Supports, Prevention and Early Intervention, Workforce Education and Training and Capital Facilities and Technology. Nisha also provided information on the new BHSA plan and some of the changes our department will have.

Brenda Hamamoto, manager of Telecare Riverside County Mental Health Urgent Care presented Perris Mental Health Urgent Care. They are a contracted agency who serves people in a mental health crisis regardless of their insurance status. They are open 24/7 and people can stay up to 24hours. Their goal is to decrease hospitalizations and incarcerations due to mental health. They practice psychosocial recovery model, meeting people where they are and asking them what they want and giving them a choice and collaboration in the services that they want.

Kendra Theroith, supervisor of Enhance Care Management presented Enhanced Care Management. The program is a whole person approach to comprehensive care management and addresses the clinical and non-clinical needs of high need, high cost MCP members. Interdisciplinary, high-touch, person-centered, and provided primarily through in-person interactions with members where they live, seek care, or prefer to access services. This program is a part of the Cal-Aim goal to offer Californians a more equitable, coordinated and person-centered approach to maximize their health and life trajectory.

Lavonne Moemino and Denise Leeper, case workers for Perris SAPT presented RUHS Substance Abuse Prevention Treatment. The program offers placement services, individual and family prevention services. Substance abuse treatment, individual and family counseling, and group counseling. The program offers medication assisted treatment that helps with the craving of alcohol and/or drugs to help consumers with recovery. They have a MOMS Perinatal program which is an intensive outpatient treatment program for pregnant and parenting substance abusing women. They also offer Collaborative Court and Drug Court that is a collaborative approach. The team includes the Supervisor Court, Probation, District Attorney, Public Defender, DPSS and Behavioral Health.

Cheath Rough and Sasha Trejos, Supervisors for Homeless Housing Opportunities, Partnership and Education program, presented HHOPE a housing and homeless service. HHOPE has seven different programs: HomeConnect a Coordinated Entry System, Housing Crisis Response, Emergency Housing and Rental Assistance, Permanent Supportive and Affordable Housing, Mainstream 811 Housing, AB-109 Housing and Life Support.

Adai Taylor, Health Equity Program Liaison for Inland Empire Health Plan presented Connect IE. Connect IE is a free website to find community resources and help link people to the resources/programs. In addition, you can track the progress of the referral.

- In FY 23/24, the ASOC Committee actively participated in the following events: NAMI Walks on November 4, 2023, at Diamond Valley Lake Marina in Hemet CA. Recovery Happens on October 12, 2023, at Fairmount Park. Caring Across Cultures a Multicultural Symposium on Mental health on November 16, 2023 @ SRCAR in Murrieta CA. NAMI Mt. San Jacinto Christmas Party on December 14, 2023, in Hemet CA. The Longest Night- Mid County on December 21, 2023, at the Hemet Adult Behavioral Health Clinic. 1 Life/Heart Poisoning and Overdose Awareness 5K walk: March 27, 2024 @ Palm Desert Civic Desert, April 13, 2024 @ Fairmont -

Park and April 27, 2024 @ Murrieta Town Square Park. Received May is Mental Health Month Proclamation from City of Hemet on April 23, 2024. Received May is Mental Health Month Proclamation from City of San Jacinto on May 7, 2024. The Art of Wellness Mental Health Awareness Fair: May 9, 2024, at Valley-Wide Recreation Park in San Jacinto and May 23, 2024, Fairmount Park in Riverside. MHSA Update Public Hearing on May 23, 2024, at ELK's Lodge in Hemet CA. Wellness Village Groundbreaking ceremony on June 12, 2024, in Perris CA. CARE ACT Virtual Town Hall Meeting on June 26, 2026.

- Adult System of Care Committee worked on goals to increase Membership. Some of the efforts to increase membership have been to continue to announce the meeting on the department's social media accounts the week of the meeting. A reminder email is sent to supervisors of adult programs within the department asking them to share with staff and consumers. Committee member to bring clinic consumers and families to the meetings. We have also added Spanish interpreters for all the meetings and added a hybrid TEAMS option.
- Ms. Scott regularly attended the Behavioral Health Commission (BHC) meetings and reported on committee information and suggestions to the BHC. Jacqueline Markussen is the Behavioral Health Services Administrator for Adult Services and the RUHS-BH Liaison for this Committee. Jacqueline continues to communicate information, findings, and suggestions to RUHS-BH Administration. This ensures that resolutions and recommendations are provided to both the BHC and RUHS-BH, and any necessary follow-up actions are taken, if needed. In turn, feedback is also provided to the ASOC Committee. Administrators for Western Adult BH, Desert Adults BH, Mature Adults, Care Court, Peer Consumers and Crisis attend meetings and provide monthly updates.

Respectfully submitted,

Brenda Scott, BHC Adult System of Care Committee Chairperson  
Jacqueline Markussen, Adult Behavioral Health Services Administrator for Mid-County Region



# CHILDREN'S COMMITTEE

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Tori St. Johns – Behavioral Health Commissioner – Children's Committee Chair

Janine Moore – Riverside University Health System – Behavioral Health – Deputy Director, Children's and TAY Services

\* \* \* \* \*

**Reporting Period - July 2023 through June 2024**

**Committee's Vision:** Collaborating with different agencies, and Contract Providers, not only in Riverside County, but in the surrounding counties as well, to provide Behavioral Health services to all that require it.

**Mission Statement:** The Children's Committee is a standing committee of the Riverside University Health System - Behavioral Health Commission (BHC). The Committee is comprised of consumers, parents/caregivers of consumers, as well as public and private sector representation. The Committee advocates for the needs of children who have been identified as, or at risk of, having emotional/behavioral challenges. Advocacy extends to their families and/or caregivers. The Children's Committee presents important issues to the BHC as well as involved agencies, encourages increased family/caregiver input, and networks with local community agencies.

**Committee's Goals:** For communities to have access to behavioral health services, by providing fast and simple resources, classes, trainings (in individual needed languages), transportation to behavioral health facilities and mobile crisis units in all the communities.

**July 2023:** Stacy Zapata, Juvenile Probation Supervisor and Denise Costales-Stroschein, Juvenile Probation Officer, Riverside County/Corona, shared information and answered questions concerning Formal and Informal Probation:

Children's Youth Programs (PEI, PS&T, and TAY) are open for further discussions and collaboration with Probation.

**RUHS-BH Updates:**

The 24/7 Mobile Crisis Management benefit will launch on January 1, 2024. The program will be operated by county staff as well as a contracted provider for overnight response. The Mobile Crisis Management Teams currently continue to respond to all ages.

Riverside University Health System established a Naloxone Distribution Program (NDP) through the RUHS Emergency Department Pharmacy that makes Naloxone in the form of nasal Narcan available to visitors for free.

The department has worked in collaboration with the new director for the Carolyn E. Willey Center, Javier Garcia, to allow them to provide ED (Eating Disorder) Services due to the expanded need for such services across the age span.

**August 2023: Dark**

**September 2023: Parent Support & Training Program:** The Nurturing Fathers is a 13-week program that focuses on parenting discipline and nurturing. For the first 3 weeks the focus is on the barriers, the anger, and the challenges. How are they at fathering?

By the end of week three, the barriers are coming down, they are learning about why they are the fathers they are now, and how to forgive themselves moving forward.

The program started with 15 fathers and 8 of those fathers stayed, completed the training, and graduated. 3 of those 8 participants shared virtual testimonials.

**RUHS-BH Update:** RUHS-BH is working on a MHSA Innovation Proposal to open the first County operated Eating Disorder Intensive Outpatient Program. RUHS-BH teams are headed to Valenta in Rancho Cucamonga to observe how their program is structured.

NAMI Family to Family classes are offered on Tuesday nights from 5:30-8 p.m. in Hemet. The program is offered in both English and Spanish and the classes have been full.

The departments' equine Program, EAGALA, continues to be available for the Mid-County and Western Regions. Most of the programs have a Community Services Assistant to arrange transportation for families in need of services.

**October 2023:** Presentation: Heather Sylvester - Mobile Crisis System of Care Overview

The Mobile Crisis Management Team (MCMT) newly developed response teams that combine crisis response for mental health, substance abuse, homeless outreach, and placements in 13 locations.

The team responds to crisis calls in the community for all ages and all community agencies with a focus on calls from law enforcement and hospitals.

**November & December 2023 Meeting Combined**

The IOP-ED (Intensive Outpatient Program Eating Disorder) proposal was posted on the department website to solicit stakeholder feedback. Staff encourage members of the committee to review it and offer feedback.

California Mentor opened a children's outpatient clinic in San Jacinto.

**Parent Support & Training:** New in-person Spanish Nurturing Fathers classes will start in February 2024 and will also be available online in January.

**January 2024:** Presentation: The Law Offices of the Public Defender, County of Riverside, Juvenile Division: Janate Valenzuela, Dep Public Def, Tatiana Klunchoo, Dep Public Def, and Teresa Ruiz Lorenzo, Social Worker. **The SPARK (Support, Partnerships, Advocacy and Resources for Kids) Unit.**

The Juvenile Justice Coordinating Council approved a grant to the Riverside County Law Offices of the Public Defender, establishing - **SPARK** – the (Support, Partnerships, Advocacy, and Resources for Kids).

SPARK is an intervention and prevention program designed to benefit students in middle school and high school, and Transitional Age Youth (TAY) in the community ages 16-25 who reside in Riverside County.

- The Team consists of resource attorneys, social workers, and trained support staff located in three key regions throughout Riverside County.
- In partnership with RUHS-BH, the team provides services to the TAY Drop-In centers in the cities of Riverside, Perris, and La Quinta.
- The SPARK Team assist with consultations, resources, and technical assistance for:
  - Educational Services, Criminal Cases and Community Referrals.
- The referring party must complete a SPARK Community Request for Assistance Form (Flyers, and brochures handed out at the meeting).

SPARK is voluntary and is dedicated to collaborating with schools and community-based service providers to create resource "bridges" to connect youth with local resources and programs.

For further information please contact your local SPARK region office as indicated on the SPARK flyer and PowerPoint provided.

**RUHS-BH Update:** Mandatory Narcan Training has rolled out in the department. Staff will be trained in the use of Narcan and Narcan will be available at all the sites.

Beginning January 1, 2024: 24/7 Mobile Crisis Response for Behavioral Health rolled out.

- Day time is the Mobile Crisis Management Teams that have been in place for quite some time.
- RUHS-BH has partnered with Sycamores to provide Mobile Crisis Response Service for overnight coverage.

**February 2024: Presentation:** Harry Freedman, Region Manager, DPSS/CSD Families First Prevention Services (FFPSA) Act Part I:

- Riverside County's CPP (Comprehensive Prevention Plan) developed by Interagency Workgroups, and in collaborative efforts with various workgroups and departments, was approved by the State in July 2023.
- Initial emphasis: Screen/assessment tools and training for PS Team, Family Care Plans and Motivational Interviewing.
- Part I provides an opportunity to expand the prevention services to the communities and build collaborative efforts.
- Supporting the range of services for families EO (evaluated out) of investigations.
- The CPP is aligned with the Integrated Services Delivery Model and is an extension of the County's existing and ongoing prevention efforts.
- The County's Implementation Team will collect data from several sources and review it on a quarterly basis.

#### **RUHS-BH Updates:**

The plans for the Wellness Village and all the buildings have been submitted to the County for approval, with the possibility of breaking ground in the Spring.

The MHS Innovation proposal to develop an IOP-ED (Intensive Out-Patient Eating Disorder Program) is awarded - \$29 million dollars.

- The program will train the medical providers, doctors, nurses, county staff, contract provider's staff, professionals who are currently involved in ED work and cultural competency liaisons.
- Educate the community, reaching out to the school districts with in-service outreach, Church, family members, consumers and creating a resource library.
- The location will be in Perris and eventually transition to the Wellness Village in 2026.
- Planning for a medical doctor and a psychology intern to work with the program.

**Substance Abuse Prevention and Treatment:** 11-sites continue to be open for youths 12 and up, OT, IOT, Recovery Services, Residential and referrals of all ages.

- Providing prevention and treatment services to a few more schools.

**DPSS Children Services shared their appreciation for** the collaboration with RUHS-BH.

The "Red Phone Policy" and "Mapping" seeing the agencies that follow the child when a youth is potentially coming out of Juvenile Hall, ETS, or coming back from AWOL, to have all necessary programs/departments come together and collaborate on how to assist the child in terms of placement and services.

**March 2024 – Presentation** – Diana Gutierrez, Administrative Services Manager, Prevention and Early Intervention presented the MHSa 3-Year Plan and Annual Update FY 23/24 – 25/26.

**RUHS-BH Updates:**

The FEP (First Episode Psychosis) Supervisor applied for the CYBHI Grant to expand the program, and with the help from the Research Department, the \$1,000,000 grant was awarded. The program will expand to the Mid-County area.

The Youth Family Community Services Program is working closely with DPSS/Children's Services Division to connect the high need/high risk youth that are being housed at the Harmony Haven Emergency Shelter with Mental Health Case Managers.

**April 2024 – PowerPoint Presentation** – Suzanna Juarez-Williamson, Administrative Services Manager, Research & Evaluations presented the Who We Serve Report Summary for FY 2022-2023.

**Chairperson Remarks:** The Commission is again participating in site visits and recently visited the Telecare Riverside Crisis Stabilization Unit in Indio, which now houses the Crisis Team. While there, the Commission was able to see first-hand and states that it is amazing what RUHS-BH, and all the programs are participating in.

**RUHS-BH Updates:**

**The department is developing** a proposal to utilize the MDFT Team to train staff in the Family Based Therapy model. A leadership group was established to plan, develop, and implement the training and support staff in doing family therapy.

The Family Therapy Champions will take the lead in providing regular consultation to therapists who are working on difficult cases.

The training will be 2 days and when the training is completed, therapists will be required to take on a minimum of 2 family therapy cases, attend monthly debriefing group for at least 6 months, and will receive a certificate of completion when they demonstrate competency in doing family therapy.

The Pre-School Program is hosting The First Annual Growing Healthy Minds Symposium "Life after Lockdown for Littles" refers to "Life after COVID19".

**May 2024 - PowerPoint Presentation** – Celeste Gasio, Customer Success Manager, Soluna Kooth Digital Health. Funded by DHCS

- Soluna is a virtual behavioral health platform to support youth ages 13-25.
- The platform offers live support as well as information on coping skills and will connect youth to additional behavioral health services as needed. The committee explored other collaborations to connect this opportunity to.

**Substance Abuse Prevention and Treatment:** Substance Use & Prevention Treatment Clinics, providing prevention out-patient 2 levels of care and out-patient intensive and recovery services to individuals 12 years of age and up.

- Most of the clinics are sending out counselors/BHS III to the School Base Prevention and Treatment Services and are currently serving over 60 schools.
- Some schools are reaching out to see if SAPT can provide Prevention and Substance Use Treatment Services during the summer. SAPT can do that, and if the consumers choose to, they are welcome to come to the clinics so as not to interrupt care.

**Friday Night Live:** Is a school year-based program, however, the program has 5 recreational centers that are open year around.

**June 2024 – PowerPoint Presentation:** Ti’Fani Law, Program Manager IE-CHI (Inland Empire-Community Health Initiative), Medi-Cal for Children & Families.

IE-CHI was formed in the fall of 2005 by a group of individuals who shared a concern for the children in San Bernadino County who did not have access to health insurance.

The program is funded with grants from Kaiser Foundation & First 5-SB provided support, enrollment, and utilization of health coverage for children from ages 0-17.

In 2011, The Steering Committee expanded the scope to include children/families living in Riverside County.

**RUHS-BH Updates:**

The groundbreaking for the Mead Valley Wellness Village was held and construction has begun. The campus will include the following children’s programs:

- Eating Disorder Intensive Outpatient Program
- Youth Mental Health Urgent Care
- Psychiatric Residential Treatment Facility
- Short Term Therapeutic Residential Program
- Children’s Outpatient Clinic

Respectfully submitted,

Tori St. Johns, BHC Children’s Committee Chair

Janine Moore, RUHS – BH Deputy Director, Children’s Services

Saida Spencer, Executive Assistant II RUHS-BH Staff overseeing Committee

# CRIMINAL JUSTICE COMMITTEE

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Greg Damewood – Behavioral Health Commissioner – Criminal Justice Committee Chair

Deborah Johnson – Riverside University Health System – BH Director of Innovation and Integration

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## VISION

To address housing issues by increasing beds and augmenting Board and Care facilities, to provide Law Enforcement Personnel Training, to promote integration and collaborate with different agencies, to monitor competency programs, and improve safety in jails.

## MISSION STATEMENT

To facilitate the recovery of people in the Criminal Justice System, who have behavioral health needs which can include mental health and/or substance use disorders, by enhancing programs in our community through collaboration with County partners, community stake holders, families, and other support systems.

\* \* \* \* \*

## GOALS OF THE CRIMINAL JUSTICE COMMITTEE

1. Housing – Increase Beds and Adult Residential Facilities: Monitor and provide feedback regarding housing; including detox, diversion beds such as short-term transitional residential programs, board and care beds with or without special programs such as dual diagnosis.
2. Training for Law Enforcement Personnel: Monitor training provided to all Riverside County law enforcement and other agencies on crisis intervention. Work towards getting the training to more staff and other Law Enforcement agencies and expanding the training curriculum.
3. Promote Integration and Collaboration with Different Agencies: Work with different agencies in order to promote communication and collaboration.
4. Restoration of Competency Placement and Incompetent to Stand Trial: Monitor the current restoration to competency program and bring forth any concerns for the benefits of inmates with behavioral health needs.
5. Safety in Jails: Discuss safety issues occurring in the jails involving inmates with behavioral health issues with the goal of providing feedback, identifying trends and issues, and providing information to the appropriate persons with the goal of a safer incarceration period.

6. Health and Human Services:

- A. Decrease Positive Drug Tests: Riverside University Health System-Behavioral Health has set the goal to reduce positive drug tests of AB109 offenders by 10%. This can be achieved by providing comprehensive screening for substance abuse, linkage to substance abuse services, providing those involved with the Criminal Justice System with appropriate guidance and support to maintain sobriety such as attending substance abuse groups, 12-step Hazeltown's My Ongoing Recovery Experience curriculum, Planning for Success, residential treatment, educational groups such as "Facing Up" that help empower offenders to "face" challenges to sobriety and maintaining good mental health.
- B. Increase Attendance at Graduation Ceremonies: The goal for 2022 is to improve attendance of upcoming graduations (e.g. – Recovery Opportunity Court, Family Preservation Court, Mental Health Court, etc.) for both the graduates and those in attendance to celebrate successful re-engagement into the community without formal supervision.

The Criminal Justice Committee (CJC) currently has a total of six (6) members with an average regular attendance of 18 people at these meetings. The Committee contains representation from a number of agencies including Behavioral Health Detention Services, Riverside County Sheriff's Department, Probation Department, Public Defender's Office, National Alliance on Mental Illness (NAMI), Behavioral Health Peer Support Specialists, Western and Mid-County Regional Behavioral Health Advisory Boards, and Detention Health Services. Consumers and family members also attend CJC meetings. Throughout the past year, the CJC was involved in a variety of activities and had a number of accomplishments.

Director of Innovation and Integration, Deborah Johnson has continuously advocated for the mentally ill in the criminal justice system and has been an integral part in implementing accepted best practices, resulting in the decriminalization of persons with serious mental illness.

#### HOUSING

*Please see Housing report on pages 31-34*

#### LAW ENFORCEMENT COLLABORATIVE

The Law Enforcement Collaborative is a cooperative relationship between RUHS-BH and Riverside County law enforcement agencies and first responders. The collaborative is currently coordinated and maintained under the administration of RUHS-BH Crisis Support System of Care and the Crisis Intervention Training (CIT) Program.

#### *CIT Program – Crisis Intervention Training Program:*

Crisis Intervention Training (CIT) has been a collaborative effort with RUHS BH and Law Enforcement for over 15 years. In the CIT course, RUHS-BH collaborates with Riverside Sheriff's Office (RSO) and Police Departments throughout Riverside County to develop and facilitate Crisis Intervention Trainings.

CIT is a curriculum designed to enhance law enforcement response to people in mental health crisis. The goal of CIT is to provide mental health education and awareness, empower law enforcement personnel, maintain safety for all, and strengthen de-escalation skills in hopes of diverting consumers from involuntary interventions and instead partnering with them to access voluntary care. CIT was created specifically for correctional and patrol officers but -

has also been successfully adapted to meet the training needs of dispatchers, probation officers, school resource and community service officers and other criminal justice professionals.

Although our initial partnership had been with RSO and Riverside Police Department (RPD) for only the CIT course, enrollment and/or requests for specific mental health education courses from both inside and outside law enforcement and allied agencies continues to increase. As a result of the ongoing collaborative, CIT has developed into the CIT Program as opposed to only a training. The CIT Program, with the support of an additional instructor, includes POST certified instruction with the Advanced Officer Training unit, Core Correctional Academies, and Juvenile and Adult Probation Departments.

The CIT Program continues to support mental health and substance use disorder education and awareness through instruction, modification and development of new curriculum and courses. The CIT Program team consists of law enforcement, two behavioral health lead trainers and multiple guest speakers from various County Behavioral Health programs. In addition, Peer Support Specialists, Parent Partners and Family Advocates provide lived experience as consumers and family members who have required law enforcement intervention.

From July 1, 2023, to June 30, 2024, fiscal year, the Crisis Intervention Training program trained over 300 number of staff on Crisis Intervention and on average the trainees rated the training at a number 5 which indicates that it was an excellent training and stated that it meets their learning objective expectations.

CBAT – Community Behavioral Assessment Team:

The Community Behavioral Assessment Team (CBAT) is a co-responder crisis team comprised of a clinical therapist and a law enforcement officer (Sheriff or PD). Recognizing the role of law enforcement and the mental health needs of community members, this particular crisis response model was first implemented over seven years ago with the Riverside Police Department, followed by the Hemet Police Department in 2017. CBAT functions as a special unit that responds to 911 behavioral health related crisis calls, mental health emergencies/5150, substance abuse and homeless related crisis. CBAT provides rapid response field-based risk assessment, crisis intervention and de-escalation, linkage and referrals. One of the goals of CBAT is to provide field officers with a resource for calls that require more time and specialized attention. In addition, the goal of CBAT is to divert and decrease psychiatric inpatient hospitalizations whenever possible, decrease incarceration, decrease ED admissions, reduce repeated patrol calls, make appropriate linkages to care and resources and strengthen partnerships between the community, law enforcement and behavioral health.

CBAT locations expanded from two teams working with the Riverside Police Department and the Hemet Police Department, to 17 teams:

Riverside Police Department	Temecula Sheriff Station
Hemet Police Department	Cabazon Sheriff Station
Indio Police Department	Hemet Sheriff Station
Murrieta Police Department	Perris Sheriff Station
Beaumont Police Department	Jurupa Sheriff Station
Cathedral City Police Department	Lake Elsinore Sheriff Station
Corona Police Department	Palm Desert Sheriff Station
Menifee Police Department	Thermal Sheriff Station
Moreno Valley Sheriff Station	Temecula Sheriff Station

In addition, we implemented the County's first Community Assessment and Transportation Team (CATT) which is another co-responder crisis model but with a Clinical Therapist and Emergency Medical Technician (EMT). This team will be located in the city of Hemet and will respond to mental health crisis with a focus on substance abuse.



Additionally, collaboration has begun with RUHS-BH and selected college campuses throughout Riverside County to implement CBAT located on site to work with college health services and security for students and others in crisis.

### Program Update

In addition to providing CIT training to law enforcement, RUHS-BH CIT Program has expanded to provide Mental Health Awareness Training (MHAT) for other first responders who work closely with law enforcement. This program expansion is part of a SAMSHA grant. The MHAT curriculum will train firefighters, paramedics and EMTs from our State Fire Department (CalFire) and Riverside County Emergency Management Department (EMD) provider agencies (fire departments, EMTs and paramedics). For FY 23/24, we have already trained about (30) EMTs and paramedics. We plan to expand our scope of training to include students in fire and EMT/paramedics as well.

### RUHS-BH NEW LIFE (AB109) PROGRAM

RUHS-BH has provided the following Realignment services during FY 23/24 to AB109 offenders, including those incarcerated in the county's five detention facilities:

- Mental health and substance use disorder screenings
- Crisis management and triage
- Adult full assessments
- Development of an individualized client care plan
- Individual therapy
- Case management
- Family therapy
- Group therapy
- Substance use treatment groups
- Mental health groups
- Educational groups
- Recreational therapy
- Psychotropic medication management
- Urinalysis testing (UA drug testing)
- Withdrawal management
- Substance Use Disorder (SUD) Recovery Services
- SUD Residential Services
- Recovery Residences (Sober Living)
- Medication Assisted Treatment (MAT) Services
- Comprehensive discharge planning including recovery services
- Coordination of prison releases with the Probation Department for PRCS offenders
- Emergency and Transitional housing
- Transportation

Behavioral Health Screenings for mental health and substance use are conducted at Probation sites, Behavioral Health (BH) outpatient clinics, and detention facilities to identify the AB109 offenders' needs and determine the course of treatment and linkage to services. Behavioral Health screenings consist of questions related to mental health, substance use, housing, legal history, and treatment history. The BH screening form generates a referral based on the consumer's response to determine if there are any safety risks, if a risk assessment is necessary, and the acuity level which will dictate the level of care and referral. The BH screening form also determines if a substance use referral is necessary which would lead to a Substance Use Disorder screening to determine the level of care needed for substance use treatment.

Behavioral health staff are dispatched to detention facilities to provide collaborative jail in-reach. Jail in-reach involves an AB109 case manager, Justice Outreach Team (JOT) staff that consist of a drug and alcohol counselor and peer support specialist, detention staff, and inmates with open BH cases who are approaching discharge. BH staff provide inmates with New Life services available and provides collaborative linkage and referral as needed to Day Reporting Centers (DRCs), New Life AB109 outpatient Behavioral Health clinics or Forensic Full-Service Partnerships (FFSPs).

Adult full assessments are completed on all AB109 offenders entering treatment with RUHS-BH. This assessment includes a thorough assessment of mental health and substance use treatment needs and identifies problem areas, medical necessity, treatment goals, and interventions to improve identified impairments. Reassessments are completed annually.

Client care plans establish treatment focus by identifying treatment goals and interventions to be utilized. Goals are required to be specific, measurable, attainable, realistic and time bound. Goals may include improvements in mental health, substance use, educational, occupational, housing, relationships, etc.

Individual therapy, family therapy, group therapy, and BH groups (mental health and substance use) are offered at our New Life clinics, DRCs, and FFSP. In addition, educational groups are offered to AB109 consumers which include:

- Courage to Change (facilitated by DRC Probation)
- Substance Use Education (New Direction)
- Release and Re-integration (New Direction)
- Criminal and Addictive Thinking (New Direction)
- Anger Management (SAMSHA)
- Planning for Success (formerly WRAP)
- Wellness and Empowerment in Life and Living (WELL)
- Facing Up (empowerment to 'face' life circumstances previously avoided)
- Triple P Parenting Classes

Comprehensive discharge planning is essential to continuity of care and the client's treatment success and maintenance. Discharge planning includes, when applicable, substance use recovery services which are used when the client is no longer requiring primary treatment and is ready for discharge. Recovery services occur in a variety of settings such as outpatient aftercare, relapse/recovery groups, 12-step and self-help groups as well as sober living housing.

Riverside University Health System- Behavioral Health collaborates with Enhanced Care Management (ECM) nurses, (formerly known as Whole Person Care), to provide screenings at probation sites to identify the physical needs and behavioral health needs of consumers. ECM is a state funded program designed to identify newly released probationer needs and provide linkage to services.

We have established Medication Assisted Treatment (MAT) Services in the detention centers and New Life Full-Service Partnerships (FFSPs) for those who need medication to assist with recovery from drug addiction. Also, to assist with referrals from jail and prisons, we established a Substance Use Disorder referral system where referrals for MAT services are provided to the RUHS-BH CARES Line to streamline referrals. We have also hired a registered nurse (RN) to assist with injections.

When appropriate, clients are linked to a RUHS-BH psychiatrist for assessment and medication management. AB109 staff work very closely with the psychiatrist to collaborate with the management of psychotropic medications and keep psychiatrists informed of outcomes including improvements or side effects.

## STATISTICS:

During FY 23/24, RUHS-BH has provided 145,122 mental health services and 163,755 substance use services. RUHS-BH served 2,183 unduplicated clients with mental health diagnoses (which is a 10% increase from prior FY 22/23) while also serving 1331 unduplicated clients with substance use diagnoses (which is a 33% increase from prior FY 22/23). Services provided include mental health and substance use screenings and assessments, medication services (6,667 for FY 23/24, which is a 42% increase from FY 22/23), substance use disorder residential and detox services, intensive outpatient services and comprehensive full-service partnership wraparound services.

Emergency housing and transitional housing also remains a core basic need for AB109 offenders. During FY 23/24, there were beds available to AB109 offenders through the Behavioral Health HHOPE Program.

During FY 23/24, AB109 Housing was provided as follows:

- Mental Health Emergency Housing Bed Nights – 6,045
- Mental Health Rental Assistance Bed Nights – 521 (increase from 30 nights FY 22/23)
- Probation (Non-MH) Emergency Housing Bed Nights – 4,624 (which is a 393% increase from the 938 nights in FY 22/23)
  
- Probation (Non-MH) Transitional Housing Bed Nights – 10,877 (which is a 277% increase from FY 22/23)
- Total Served in FY 23/24:
  - 1027 - Males
  - 93 - Females
  - 0 - Children
  - Grand Total= 1120

## ACCOMPLISHMENTS – FY 23/24:

The following is a summary of goals for FY 23/24 with progress updates on goal attainment.

- **Develop New Outcome Reports:** RUHS-BH will develop new outcome reports using the newly developed I-CAN, which is the (23) core outcome measures for AB109 programs to demonstrate consumer progress (e.g., risk behaviors, behavioral health symptoms, medical, psychiatric crises and hospitalizations, legal, housing, education, employment, and coping skills). Such reports will allow New Life to demonstrate measurable improvement in consumer's mental health and substance use, as well as overall functioning.

**Goal Attained:** New outcome reports are being developed and tested at this time. New outcome reports will highlight consumer progress as mentioned above.

- **Expansion of New Life Clinic in Indio:** RUHS-BH aims to expand New Life services in the Desert Region, namely Indio New Life. Previous New Life clinics in the desert were in remote areas where the volume of services was relatively low. This year, the goal is to expand to New Life Indio clinic to allow additional coverage areas for consumers who need intensive New Life services. Indio tends to be a high-volume area for services.

**Goal Partially Attained:** Partial completion of goal as staffing positions have been identified and approved; however, expansion is pending due to construction delays. Awaiting construction on new building for Indio SAPT to relocate, opening this vacating office space for Indio New Clinic.

- **Expansion of Justice Outreach Teams in San Jacinto and Indio:** RUHS-BH aims to expand the Justice Outreach Teams (JOT), which are field-based screening and referral teams, which help with linkage to New Life programs. Presently, JOT has (2) teams located in Riverside that provide countywide services. The goal -

for FY 23/24 is to expand (2) additional JOT teams for San Jacinto and Indio.

**Goal Attained:** Justice Outreach Teams have successfully expanded to San Jacinto and Indio Regions. All staff positions have been filled and teams are active countywide.

#### GOALS – FY 24/25:

- **Enhance 90 Day Pre-Release Engagement:** RUHS-BH will enhance pre-release discharge planning by establishing Justice In-reach Teams (JIT) that will primarily work inside the jails to engage with inmates and provide linkage and referrals to our outpatient forensic programs, New Life.
- **Expansion of New Life Clinic in Indio:** Due to construction delays beyond our control, this goal was partially met last year. Hence, it will remain one of our primary goals as we understand the importance of BH services in the desert region. RUHS-BH aims to expand New Life services in the Desert Region, namely Indio New Life.

**San Jacinto New Life Relocation & Expansion of MD services:** RUHS-BH aims to acquire a new San Jacinto New Life location that will house San Jacinto New Life clinic staff, San Jacinto Forensic FSP and San Jacinto Justice Outreach Team. The building is currently pending construction and will allow all three programs under one roof. In addition, San Jacinto will expand its medication services offering by utilizing residents' program and hiring a new RN to provide vitals and other pre-work up in addition to injections for consumers.

#### RUHS-BH SUBSTANCE ABUSE PREVENTION AND TREATMENT PROGRAM, DRUG COURTS, AND FAMILY PRESERVATION COURT

The Collaborative Courts are an evidence-based drug court model, which establishes a court team that builds on a long-lasting partnership of community provided services that involve county government departments and Superior Court administration. The Collaborative Courts work with individuals and families in the criminal justice and child welfare systems who have been met with the challenge of substance abuse, mental illness and other social welfare issues. Clients are supervised by judicial officers who oversee the consumer treatment progress through regular court hearings, which includes the use of incentives and sanctions. It is vital that this community collaborative creates access to substance abuse and mental health treatment along with a myriad of additional agencies that provide academic and vocational programming, social services for offenders and their families, housing resources and other resources needed for a successful reentry into the community. The goal of the Collaborative Courts is to improve consumer outcomes, reduce recidivism and improve public safety.

The Recovery Opportunity Center (ROC) program is a collaborative effort between Riverside University Health System-Behavioral Health (RUHS-BH) and our partners in the Riverside Superior Court, Riverside County Public Defender and District Attorneys' offices, local private attorneys, Probation Department, Family Advocate, RUHS-BH community services, as well as private insurance services. Together with our partners, we work to develop a comprehensive 18 – 24-month program for each participant (must be at least 18 years of age) consisting of a stable place for the person to live, linkage to outpatient/community services to address their substance use/mental health treatment needs as well as frequent oversight by the Probation Department and the Court. Substance Abuse Prevention and Treatment Program (SAPT) operates four adult Drug Courts in the County located in Riverside, San Jacinto, Indio and Blythe. These long-standing adult collaborative courts boast high outcomes and work in proximity with the judicial courts for the best guidance and treatment possible for consumers. The ROC Program faced a decrease in referrals with the passing of AB1950 on January 1, 2021, which reduces probation supervision to a maximum of two years; however, our Collaborative Teams worked diligently to address these changes and modify the program to continue the same quality services and make the program enticing for those that could benefit from it. More recently, the Collaborative Teams have focused on increasing access to high risk and high need individuals, -

while maintaining public safety. For the fiscal year 2023 – 2024, the ROC program received 361 referrals. Of those potential participants, 89 (25%) agreed to and were accepted into the program.

SAPT has continued to work with the Riverside Court to serve the Juvenile Drug Court (JUST). This endeavor has been serving the youth that are referred to Juvenile Drug Court since January 2017. Though referrals were low, RUHS-BH SAPT served qualified candidates from three Clinics located in Riverside, Moreno Valley and Corona. The Collaborative Team suspended the program this past year to determine if there was still a need for the program. After the six-month suspension, the team determined that the program did not serve enough consumers to continue to dedicate staff to it and the program was terminated. It was determined that there were adequate services available to the youth outside of court.

The Family Preservation Court (FPC) seeks to do what is in the best interest of the family by providing a safe and secure environment for the child while intensively treating the parent's substance abuse and other related issues. FPC aims to protect children and to reunite families by providing parents with support, treatment and access to services. The Family Preservation Court has been operated for the County by a contractor since 2007 and as of April 2017, the Department has taken back all treatment services for this population. These Family Preservation Court treatment services are now located in RUHS-BH SAPT Clinics in Corona, Moreno Valley, Riverside, San Jacinto, Perris, Temecula, Indio, Palm Springs and Desert Hot Springs. The collaboration between SAPT and Children & Family Services (CFS) works to address and serve pre-filing and post-filing cases to reunite and keep families together. In late 2022, RUHS-BH SAPT and the Department of Public Social Services (DPSS) partnered to pilot, and later launched, a Centralized Screening program aiming to increase referrals to FPC. Within this program, DPSS refers candidates who are in need of a substance use disorder (SUD) screening. SAPT then completes the SUD screening and recommends a level of treatment. If suitable, candidates are offered FPC and linked to SAPT Clinics for services. For the fiscal year 2023 – 2024, the FPC program received 144 referrals. Of those potential participants, 78 (68%) agreed to and were accepted into the program.

### DETENTION STAFFING AND PROGRAM UPDATES

During fiscal year 2023-2024, Detention staffing levels remained steady. Staffing positions were added to ensure rollout of Medication Assisted Treatment projects and so that increases in group services across the jails and DCU could be implemented efficiently. In addition, we made significant improvements in service array and completion of program policies and procedures.

#### **Behavioral Health Detention Improvements for FY 23/24:**

- **May 2024 Rollout, April 2023 Final Written:** Wrote the initial involuntary medication policy (PC 2603) – July 2021 and helped with rewrites of the involuntary medication policy which is now signed off and ready for implementation.
- **May 2024:** Justice Involved Enhanced Care Management (ECM) Teams requested, modeled and out for recruitment.
- **May 2024:** Updated all Detention policies along with creating new policies with a completed drafted BH Program Guide.
- **April 2024:** DCU groups initiated congruent to PLO findings/request.
- **April 2024:** DCU daily treatment huddles with BH, CHS, Psychiatry, RSO initiated, workflow written congruent to PLO findings/request.
- **April 2024:** Added recreation therapist to service milieu at DCU; recreation therapist groups now running.
- **April 2024:** Rolled out RUHS-BH Detention Services Brochures to all jails which will be placed in every inmate's property box.
- **January 2024:** DCU Queue with required forms Clinical Therapist must complete (admission note, daily progress note, and discharge note) so jails can follow the progress of the consumer. We also created a safety plan that can be filled out and given to the consumer upon return to the jail.

- **April 2023 through February 2024:** MAT Reboot; Phase I roll out – April 2023, Phase II roll out – January 2024.
  - **February 2024:** Added Methadone as MAT available – February 2024 (Not part of the Consent Decree).
  - Assisted with putting together material and writing some sections for MAT grants that have been awarded to BH detention. Recently awarded BSCC grant for MAT.
- **Last 6 Months:** Staffing improvements include added MAT Coordinator (BHSIV), additional BHSIII AOD Counselor, BH Medical Director Oversight, Nurse Practitioners and recruiting/retaining psychiatrist positions by our New Medical Director.
- **Last 12 Months:** Worked with RSO to establish some high observation cells for close monitoring after being discharged from safety cell and DCU – ready to implement full pilot at RPDC **June 2024**.
- **January to May and ongoing 2024:** Working to help implement justice involved Cal-AIM DHCS Mandate, developed a draft BH readiness plan to be implemented.
- **October 2023 Through May 2024:** Increased BH Detention staffing to 90% (at threshold). For the last 8 months, all the PLO metrics have been holding above 90%.
- **Last 12 Months:** Created and implemented stepdown procedures for safety cells (piloted several cases at RPDC and one or two at SCF). Piloted within the last year, now have a full drafted policy on the procedures.
- **November 2023:** DCU Queue with required forms Clinical Therapist must complete (admission note, daily progress note, and discharge note) so jails can follow the progress of the consumer. We also created a safety plan that can be filled out and given to the consumer upon return to the jail.
- **July and Aug 2023:** Supervised and implemented confidential contacts at DCU. Added a Recreation Therapist and changed work schedules for better coverage.

Finally, we continue to provide discharge planning and upon release inmates with an open mental health case are referred to a Day Reporting Center (DRC) or a Behavioral Health outpatient mental health or substance use program. We are working to increase the number of successful re-entry experiences for its consumers to community based mental health programs. The new CalAim Justice Involved initiative for re-entry planning will only enhance in reach re-entry services for consumers before being released into the community. Behavioral Health is also preparing to staff up the Enhanced Care Management in reach teams that will elevate the quality and connections for our discharging consumers to community treatment.

#### Behavioral Health Collaborative Courts and Diversion Programs

Mental Health Court Program: Riverside County's first Mental Health Court program came into existence in November 2006, under Proposition 63, MHSA funding is located in the Downtown Riverside area. The Mental Health Court program expanded its service area to include the Desert Region in 2007 and the Mid-County Region in 2009. The Mental Health Court program is a collaborative effort between Riverside University Health System Behavioral Health (RUHS – BH) and our partners in the Riverside Superior Court, Riverside County Public Defender and District Attorneys' offices, local private attorneys, Probation Department, Family Advocate, RUHS-BH community services, as well as private insurance services. Together with our partners we work to develop a comprehensive 12-month program for each participant (must be at least 18 years of age) consisting of a stable place for the person to live, linkage to outpatient/community services to address their mental health/substance use treatment needs, as well as frequent oversight by the Probation Department and the Court. During FY 23/24 there were a total of 146 referrals received across all three regions of which 32 were accepted into the program and a total of 38 successfully "promoted" from the program. In order for the court to consider a participant ready to "promote" from the Mental Health Court program, certain criteria must be met. The criteria requires that a participant have a stable place to live, actively engaged in their outpatient treatment for at least 90 consecutive days, have not produced a positive urinalysis over the last 90 days and have never been charged with a new crime during their time in the program.

Mental Health Diversion (MHD) Program: On July 1, 2018, Penal Code 1001.36, also known as Mental Health Diversion, came into effect as Governor Brown signed the budget into law. With the passage of this new pretrial diversion law, individuals who are accused of committing a crime may now be eligible to postpone any further action from taking place in their case(s), in lieu of receiving mental health treatment. During FY 23/24 MHD received 591 referrals, across all regions, from the Riverside County Superior Court to assess individuals and assist the court in determining whether the person met the necessary criteria to be considered eligible for mental health diversion. As part of the assessment process, BH staff will provide the court with a detailed treatment plan for their consideration, which outlines recommended services for the individual as well as available housing options. Of the 591 referrals received, the court granted MHD in 160 of those cases. Because the treatment and case management portion of the program may last anywhere from 12 – 24 months, the treatment plan prepared must take a phased approach to level of care placement and treatment changes as the member progresses through their recovery. While in the program, participants are expected to be actively engaged in their treatment, remain abstinent from all illicit substances and alcohol, as well as report to the court at least every 30 – 90 days for a progress hearing. During this reporting period, 38 of participants successfully completed the Mental Health Diversion program, in doing so members may have their charges dismissed and their record of arrest sealed.

Veterans Treatment Court/Military Diversion: Veterans Treatment Court continues to have a positive impact in the lives of the men and women who so valiantly served our country, along with those closest to them and the communities in which they live. From July 1, 2023, through June 30, 2024, the Veterans Treatment Court program received 58 new referrals. In addition, 164 referrals were received to assess Active Duty, Reserve, and Veterans who were interested in the Military Diversion program, which is also offered through Veterans Treatment Court. Unlike Veterans Treatment Court, Military Diversion offers participants the opportunity to enter the program without having to plead guilty which is a unique benefit as it will allow those on Active Duty and in the Reserves to remain serving while they are also receiving treatment. During FY23/24 there was a total of 82 participants who graduated from Veterans Treatment Court or Military Diversion.

Incompetent To Stand Trial (IST) Diversion:

Riverside County typically has an average of 55 individuals who were found incompetent to stand trial and are awaiting transfer to a State Hospital for competency restoration with Felonies. These individuals spend an average of 43 days in Riverside County Jail waiting for an available State Hospital bed. The County's mission is to provide intensive community-based psychiatric treatment for these individuals. Rather than allowing them to remain in custody awaiting transfer to a State Hospital for competency restoration, they will be transferred to residential mental health treatment step-down programs where they will receive a wide array of behavioral health services.

The ultimate purpose of this program is not restoration for adjudication but rather long-term psychiatric stabilization such that following completion of the Felony Incompetent to Stand Trial (FIST) program, one's legal charges can be dismissed, and he or she may reside in the community with on-going supportive behavioral health services.

During the course of this review period, the IST Diversion program received 40 referrals, of which 22 candidates were found to meet the requisite criteria and accepted into the program. A frequent challenge encountered by behavioral health staff during the assessment and review process is finding out that the client has no interest in receiving mental health/medication services. Knowledge of this is a determining factor for the Court and often leads to a swift rejection of the program, so that the Department of State Hospitals is aware that the person will not be diverted and to move forward with placement at one of their facilities.

Assisted Outpatient Treatment (AOT) Program (Laura's Law) – is a community-based referral program for immediate family members, treating agencies, licensed mental health professionals, peace officers and judicial officers, who believe someone they know could potentially benefit from court-ordered mental health/substance use services. As part of this process, a team consisting of a clinical therapist, case manager and peer support specialist will engage the consumer and offer the person outpatient services to address their needs. If the consumer continues to reject efforts to involve them in outpatient services, then the AOT staff are able to escalate the referral to the AOT Review Committee and AOT Psychologist for further review and determination. If the AOT Committee and Psychologist believe court-ordered services are recommended as a means of stabilizing the consumer in the community, a petition will be filed by County Counsel in the Civil Court. Should the Court agree with the treatment plan submitted as part of the petition, the Court will order the Consumer to follow through and participate in the recommended plan for up to six months.

During the period of July 1, 2023 – June 30, 2024, the Assisted Outpatient Treatment Program received 57 referrals.

HOME (Homeless Outreach, Mediation and Education) Court – is an alternative sentencing program developed for those who are facing criminal prosecution and are suffering from homelessness. The program promotes community-based treatment to assist those individuals struggling with homelessness, or are in imminent danger of becoming homeless, and who are facing prosecution for quality-of-life infractions, misdemeanors and low-level felonies. The overall goal of this program is to reduce recidivism and protect public safety by collaboratively working together with our justice partners, to address and treat the underlying needs of the participants, through engagement in FSP level services, intensive case management and ongoing support from all members of the program, to ensure that each participant has the resources and opportunity they need to succeed in the community. This will be accomplished through recognizing each participant's accomplishments and efforts they have made to resolve their cases and work towards re-integration as a successful and productive member of the community. While in the program, participants will focus on gaining residential stability, employment and/or education, substance and mental health rehabilitation, learning life skills, counseling and family reunification.

During the period of July 1, 2023 – June 30, 2024, the HOME Court Assisted Program received 98 referrals, of whom 30 of those consumers were accepted into the program.

Overall Program Challenges: Obtaining safe, secure, and recovery-oriented housing for our members participating in the various collaborative courts and diversion programs continues to be a challenge as we are often presented with individuals who are coming directly out of our community jails, who have no income or credit and have criminal charges. This causes landlords in an already tight housing market to not desire to rent to our members. There is also a constrained supply of beds for individuals for whom we are seeking housing in facilities that have an intensive wrap around model of service structure like an Adult Residential Facility.

#### PATTON STATE HOSPITAL WAITING LIST

The wait time for State Hospital beds has decreased to 43 days. The Liberty Healthcare Restoration of Competency (ROC) Program has allowed clients to receive services competency restoration within the jail (RPDC). Those who successfully complete the Liberty Health ROC program are deemed competent to stand trial by the Court and to move forward with the adjudication of their case and avoid a State Hospital sentence.



A total of 94 inmates were referred and admitted to Liberty Health for restoration of competency during the fiscal year. Of those referred and admitted, 75 (79%) were successfully restored to competency by the RPDC-based Liberty Health Program. Some of the those admitted to the Liberty Health program were determined not to be restorable at Robert Presley Detention Center (RPDC) and were transferred to a Department of State Hospital for competency restoration.

In addition, the EASS program through the Department of State Hospital was operational at Smith Correctional Facility and Robert Presley Detention Center for the female inmates to assist with competency restoration while awaiting transfer to State Hospital. EASS program wide has restoration percentage is 7.1% for a total of 83 patients out of a total of 1170 served.

Finally, RUHS-BH felony IST Diversion program has expanded in the number of consumers found eligible by collaborative court teams. Currently we have 24 consumers actively participating in the FIST program. As of June 2024 20, of these 20 participants are receiving treatment at our newly opened MHRC, Restorative Transformation Center (RTC). We believe this program will continue to help alleviate the extended wait time for State Hospital treatment and provide an alternative to DSH competency restoration.

Respectfully submitted,

Greg Damewood, Criminal Justice Committee Chair  
Deborah Johnson, LCSW, Director of Innovation/Integration

# EXECUTIVE COMMITTEE

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Tori St. Johns – Behavioral Health Commission – Chair

Brenda Scott – Behavioral Health Commission – Vice-Chair

Walter Haessler – Behavioral Health Commission – Secretary

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While reviewing this past 2023/2024 fiscal year, I am reminded of the critical importance of our collective mission: to advance the behavioral health and well-being of our Riverside County community. With each decision we make, we have the opportunity to positively impact countless lives, fostering resilience, compassion, and equity in Riverside County. Our commitment to excellence and innovation in behavioral health services stands as a beacon of hope for those we serve.

Returning to in-person meetings after the Covid-19 pandemic has been a welcomed change and a continued learning curve with the hybrid option, available to the public only, with the “owl” and Microsoft Teams meetings. Our February meeting was held virtually due to a weather state of emergency.

After two unsuccessful attempts to find a suitable location for the new Behavioral Health Wellness Center, a perfect location was found in Mead Valley. The Wellness Village will offer outpatient and residential services for mental health and substance use disorders, primary healthcare, and behavioral health urgent care. The facility will serve children, youth, families, veterans, urgent care centers, healthy market, and pet care.

The Behavioral Health Department is over the top amazing. They work hard as an incredible team to keep the Behavioral Health Commission informed of updates from fiscal, Mental Health Services Act (MHSA), Proposition 1 changes, Substance Abuse Prevention and Treatment (SAPT), Bylaws, Prevention and Early Intervention (PEI), site reviews, Eating Disorder IOP, Recovery Happens events, May is Mental Health Month (3 events), Integrated Service Delivery Initiative, Employee Appreciation, Care Court, Mobile Crisis Team, Community Behavioral Health Assessment Team (CBAT) and many more.

Dr. Chang always keeps the Commission up to date with his monthly Director’s Report. Answering any and all questions asked by the Commission and Public.

Celebrate Recovery is an incredible time during every meeting where consumers share their stories, experiences, and journey of recovery. Hearing their story of finding hope, strength, and restoration reminds all of us, there is light at the end of the tunnel and to never give up.

In conclusion, the Riverside University Health Systems Behavioral Health Commission has made significant progress in addressing the mental health and substance use needs of Riverside County. Through collaboration with stakeholders, implementation of innovative programs, and dedication to continuous improvement, strides in providing accessible and effective services for individuals in need. Moving forward, we will continue to prioritize the well-being of our community and work towards creating a more inclusive and supportive environment for those struggling with mental health and substance use challenges. Thank you to all who have contributed to our efforts, and we look forward to building upon our successes in the future.

Respectfully Submitted,

Tori St. Johns – Chair – Behavioral Health Board

Daryl Terrell – Vice Chair – Behavioral Health Board

Rick Gentillalli – Secretary – Behavioral Health Board

# HOUSING COMMITTEE

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Brenda Scott – Behavioral Health Commissioner – Housing Committee Chair

Marcus Cannon – Riverside University Health System – Behavioral Health – Deputy Director

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Reporting Period: FY 23-24 July 1, 2023 – June 30, 2024

## GOALS

The goal of the Housing Committee is to provide input on housing crisis strategies, housing planning, and provide input to staff on emergent issues and concerns that impact consumers of the Riverside University Health System – Behavioral Health (RUHS-BH). The Housing Committee members also serve as key stakeholders in reviewing Behavioral Health (RUHS-BH) housing development projects. The Housing Committee continues to meet monthly with community members, RUHS-BH staff, and Commission members.

## OVERVIEW

The Mental Health Services Act (MHSA) provides is used for multiple needs including for the development of permanent supportive housing for people who are living on the street in a housing crisis, or those who remain at risk of homelessness and have a chronic, persistent, and disabling mental health challenge. RUHS-BH, with input from our stakeholders and the committee, has implemented a balanced countywide strategy to ensure that a continuum of housing and street engagement services are available for those in a housing crisis. These services are provided across the County and ensure that the housing and outreach response opportunities address the housing crisis needs of all ages and populations. RUHS-BH department practices Housing First principles and recognizes that safe and stable living conditions are essential for wellness and recovery.

The Behavioral Health Commission Housing Committee holds monthly meetings to inform, educate, and plan future homeless and housing services. Due to the Brown Act, meetings returned to an in-person format as of May 2023. Highlights of presentations during FY23-24 included presentations on housing development, transitional housing for restorative justice, tenants’ rights, and licensed care type housing from: RUHS-BH Homeless Housing Opportunities, Partnership & Education (HHOPE) program, CalAIM Community Supports, Starting Over Inc., Housing and Workforce Solutions (HWS), and Lamas Housing Project to name a few.

The Behavioral Health Commission Housing Committee has been dedicated to assisting Riverside County in establishing a peer-led Room and Board Coalition. To enhance their understanding and identify best practices, the HHOPE program has appointed a liaison to attend San Bernardino’s peer-led Room and Board Coalition meetings.

## CONTINUUM OF HOUSING PROGRAMS

Using available funding, the HHOPE Program provides access to multiple opportunities for housing. The Housing Committee has been part of guiding those opportunities and provided valuable input on program priorities.

During FY23/24, a Continuum of Housing was provided through United States Department of Housing and Urban Development (HUD), MHSA and other State and community grants. Services included:

- Prevention
- Temporary emergency housing
- Short term rental assistance
- Rapid Re-Housing programs
- Permanent Supportive Housing
- Licensed Residential Care
- Street outreach and field-based clinical services needed to connect individuals to housing and healthcare
- Housing Development

HUD – Permanent Supportive Housing – Utilizing a Housing First Approach, RUHS-BH HHOPE supports chronically homeless individuals with awarded HUD funding for longer and more permanent housing in two primary models: 1) project-based housing and 2) scattered site Permanent Supportive Housing (located in the community of the individual's choice). Permanent supportive housing for individuals with behavioral health challenges is an integral part of the solution to homelessness in Riverside County and is a cornerstone of our consumers' long-term wellness and recovery. These HUD funded projects operate at 90+% occupancy.

RUHS-BH HHOPE program partnered to secure an additional \$21,724,000.00 Homekey award in FY 23/24 to provide PSH in Cathedral City to homeless individuals with disabilities. The HHOPE Program will also be adding 50 transitional housing and recovery residence beds to assist with the San Jacinto River bottom encampment response effort.

Across the continuum of housing services, RUHS-BH serves over 2,000 distinct consumers annually and provides over 350,000 total nights of housing.

### HOUSING DEVELOPMENT ACTIVITIES

RUHS-BH and the HHOPE program received an award of \$82 million in Round 1- 4 of California Department of Housing and Community Development's (HCD) No Place Like Home Program (NPLH). The funds will create 428 units of permanent supportive housing for individuals with severe and persistent mental illness who are homeless, chronically homeless, or are at risk of homelessness. The housing units will be embedded within 12 affordable apartment communities that will be newly constructed or will undergo rehabilitation. Two new projects that opened in FY 23/24 were Vista Sunrise II in Palm Springs and Vista De La Sierra in Riverside. Rancho Las Bolsas in Temecula is expected to open in August of 2024.

An exciting development expected in FY 24/25 is the opening of a new augmented adult residential facility (ARF) in the City of Riverside. The program is expected to be known as Franklin Residential Care. It will be an 81 bed ARF licensed by the California Department of Social Services through the Community Care Licensing branch. Integrated within the facility will be a full-service partnership (FS) clinic known as Franklin Behavioral Health. This clinic will serve both the residents of the building and surrounding areas. The building is currently undergoing significant renovation to convert it from its former use as a bank into an adult residential facility. Facility operations will be contracted out to a community-based organization. The FSP clinic will be operated by RUHS-BH staff. The campus is expected to open by March of 2024.

RUHS-BH has expended all available MHSA housing development funds held in trust by the California Housing Finance Agency (CalHFA). RUHS-BH leveraged more than \$19 million in MHSA funds for permanent supportive housing to support the development efforts associated with the creation and planning of more than 850-units of affordable housing throughout Riverside County. Integrated within each of these unique MHSA-funded projects,

were 15 units of affordable housing for those at-risk individuals served by the Department Full Service Partnerships. MHSA-funded RUHS-BH apartment models include 15 integrated supportive housing units within the complexes and supportive services including on-site services in an on-site private dedicated office for our at-risk individuals. The MHSA units within each of these communities operate at near 100% occupancy and experience very little turnover. There continues to be a wait list of over 400 eligible consumers for housing of this kind. Existing units of MHSA permanent supportive housing will remain available to eligible residents for a minimum period of 20 years from the date of initial occupancy.

### AGENTS OF CHANGE

RUHS-BH continues to actively engage community stakeholders and partners in order to facilitate an active dialogue and community conversations, which allows us opportunities to be Agents of Change in our community.

- RUHS-BH continues close partnerships with local community agency partners such as the Riverside County HUD Continuum of Care (CoC) to increase the ways in which to meet the housing needs for those living on the streets or at risk and served by our programs and educate on the special needs of an individual with a behavioral health challenge.
- The HHOPE Program continues to serve as the lead agency of Riverside County's Coordinated Entry System. The program named HomeConnect serves as a 24/7 access, assessment, and referral system for those who are homeless. HomeConnect staff connect those who are homeless to services and use a vulnerability assessment to identify those with the longest lengths of homelessness and highest severity of service need to prioritize those for the first available housing resources. HomeConnect received over 28,000 calls in FY 23/24.
- HHOPE continues to support and facilitate bi-weekly Coordinated Entry System (CES) meetings with a multitude of public, private, and non-profit stakeholders in the homeless system to coordinate homeless and housing services. Average weekly attendance is 100+ (though meetings are now held virtually due to the COVID-19 pandemic). This has been an exciting opportunity to be Agents of Change to our community partners on the needs and priority for housing for our individuals.
- In November of 2016, this group of our community partners, including the Veterans Administration and Services programs, as well as HHOPE was recognized by the Board of Supervisors, HUD and Veterans program leaders in Washington D.C. for reaching Functional Zero in veterans' homelessness. As the first large community in the nation to do so, we now strive forward to ensure the sustainability of that achievement.

### LOOKING AHEAD TO FY 24/25

HHOPE started offering Enhanced Care Management (ECM) and Community Supports (CS) services in 2022 and continues to expand services to serve more households. These two programs follow the CalAIM initiative, which is designed to improve the quality of life and health outcomes of Medi-Cal enrollees, including those with the most complex health and social needs. This continues to allocate additional funding for HHOPE to increase housing deposits, housing transition and housing tenancy services.

There are now 880 units of permanent supportive housing provided by the HHOPE program and delivered to behavioral health consumers in Riverside County. Permanent supportive housing, for people with a behavioral health challenge, remains an integral part of the solution to homelessness in Riverside County. The need for this housing continues to outpace the supply. While there remains much community uncertainty about the ability to -

expand upon the success of the MHSA permanent supportive housing program due to the loss of various state and federal funding, such as Redevelopment Agency funding in recent years (without any viable alternative), together with the continuing transformation of the complex financial structures that are necessary to develop affordable housing, we continue to press forward and seek every opportunity to provide needed housing opportunities. There are ongoing efforts to collaborate and join with developers and community partners to capture any funding opportunity that will support the production of affordable housing, which includes units of permanent supportive housing for MHSA-eligible consumers. One such effort is the No Place Like Home Program.

The HHOPE program in collaboration with Riverside County Housing Authority submitted five separate applications to California Housing and Community Development in the amount of \$27,688,025 for No Place Like Home (NPLH) Round 1 funding. RUHS-BH was funded for four of these projects for a total award of 23.6M dollars. Round 1 of funding created 162 new units of permanent supportive housing within a total of 419 extremely affordable apartment units. These four projects are now complete and open for occupancy. RUHS-BH also applied for Round 3 and 4 of NPLH funds and was awarded 55.1M dollars for the development of 8 additional permanent supportive housing projects. Two of the eight projects are now complete and open for occupancy. The remaining six of the eight are expected to open between now and Summer 2026.

Continued community education remains a goal of the Housing Committee. This education covers all facets of homelessness and housing topics. In particular, the committee remains interested in augmenting existing room and board coalition efforts and beginning new ones if needed.

**"WELLNESS BEGINS WITH A HOME"**

RUHS-BH recognizes the integral part that housing plays in the recovery and wellness of those we serve and with the Housing Committee to guide us.

We are committed to continuing our efforts to be a leader and innovator in serving those housing needs, as we strive to hold open the door to healing and recovery.

Respectfully submitted,

Brenda Scott, Housing Committee Chair  
Marcus Cannon, RUHS-BH Deputy Director, Forensics

# LEGISLATIVE COMMITTEE

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April Jones, LMFT - Behavioral Health Commissioner – Legislative Committee Chair

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## MISSION STATEMENT

To bring the Behavioral Health Commission abreast of all pertinent issues or topics currently being discussed in Federal, State, County, or Local government legislation

## GOALS

To keep the Behavioral Health Commission informed of legislative activities whether Federal, State, County, or local governments that would be beneficial to our community.

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April Smith continues to lead the Legislative Committee, which meets once a month but is dark in August. The Committee reviews and discusses legislative reports from NAMI California, the California Behavioral Health Directors Association (CBHDA), and the California Association of Local Behavioral Health Commissions and Boards (CALBHC/B). The committee will also explore recent events that impact current legislation. 2200 new bills were introduced into legislation. Below is a summary of the relevant topics discussed this year by the committee.

- Prop 1 and the BHSA Plan:
  - Prop 1 was certified on April 12th. According to the Mental Health Services Act, Counties will receive 90% of MHSAs funds, with mandatory spending categories for housing, workforce development, and early intervention supports. including changes to BHSA and the expansion of scope to cover substance use disorders. he discussed the \$6.38 billion infrastructure bond measure for behavioral health treatment, which will create \$2.9 billion for voluntary and involuntary treatment, \$1.5 billion for grants to counties, cities, and tribal entities, and \$922 million for loans and grants toward supportive housing programs.
- SB 43:
  - Passed Sept 2023. The existing law, the Lanterman-Petris-Short Act, provides for the involuntary commitment and treatment of a person who is a danger to themselves or others or who is gravely disabled. Existing law, for purposes of involuntary commitment, defines “gravely disabled” as either a condition in which a person, as a result of a mental health disorder, is unable to provide for their basic personal needs for food, clothing, or shelter or has been found mentally incompetent, as specified. This bill expands the definition of “gravely disabled” to also include a condition in which a person, as a result of a severe substance use disorder, or a co-occurring mental health disorder and a severe substance use disorder, is, in addition to the basic personal needs described above, unable to provide for their personal safety or necessary medical care
- AB 2376:
  - Passed by Assembly on 4/2024 and Passed by Senate on 7/3/2024. Existing law establishes the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law sets forth a schedule of benefits under the Medi-Cal program.

- This bill would state the intent of the Legislature to enact legislation to allow for acute care hospitals that accept Medi-Cal coverage to directly bill for inpatient detox services and Medically Assisted Treatment for substance abuse issues, as specified.
- The Summary of the bill's contents from the Assembly Health Committee is as follows:
  - Expand the definition of "chemical dependency recovery services (CDRS)" to include medications for addiction treatment and medically managed voluntary inpatient detoxification.
  - Deletes the requirement for chemical dependency recovery as a supplemental service to be provided in a distinct part of a general acute care hospital (GACH) or acute psychiatric hospital (APH), and instead would authorize those facilities to provide CDRS as a supplemental service within the same building or in a separate building on campus that meets specified structural requirements of a freestanding chemical dependency recovery hospital (CDRH).
  - Deletes the requirements for chemical dependency services to be provided in a hospital building that provides only CDRS or has been removed from general acute care use.
- May Revision of the Governor's Budget:
  - On May 14, Governor Newsom's office will release the revision of the budget, followed by negotiations following what will likely include additional cuts to General Fund items. The projections are unlikely to be close to the Governor's initial projections as the Franchise Tax Board is reporting that tax receipts are low again for April with the net corporate taxes being the heaviest anchor. Legislators will struggle with the budget as there are fewer than ten total between both houses that have experienced trimming the budgets.
  - Deadlines for May:
    - May 3, 2024 – All non-fiscal bills must clear policy committees
    - May 14, 2024 – Expected Release of the Revised Budget by Governor's Office
    - May 17, 2024 – Announcement of any bills that will exit the suspense file
    - If bills don't exit at this point, they are confirmed to be shelved as there will not be another opportunity before the close of the session
    - For an idea of the chances of a bill exiting the file, on average 70%+ of bills that enter remain in the file and are considered permanently shelved.

SB 1017 will be on available Facilities for Inpatient and Residential Mental Health or Substance Use Disorder Treatment. The bill was heard on April 2nd, in the Senate Judiciary Committee, and it would create a bed inventory solution that would allow hospitals, and practitioners, to see the availability of behavioral health treatment beds. The Bill has received a lot of pushback in the past from CBHDA because it needs a lot of maintenance. This bill requires input from different groups. The supporters of the bill are the American Medical Association and the Psychiatrists Association.

S.B 1300:

Health Facility Closure: Public Notice: Inpatient Psychiatric and Maternity Services. The Current procedure, for the public notice period for closing a maternity Hospital is 90 days. This bill would change it so that you have to provide notice 120 days in advance (for both Maternity and Psychiatric) and provide a report on the community impacts. The hospital associations are not in favor of the Bill.



A.B 2561:

Local Public Employee Vacant Positions. It is an important Bill not just for behavioral health but for anybody who works for a public agency. The Bill stipulates that if you are a public agency, city, state, or county, any of them with 10% or more of your positions open, they must go to the largest representative union and create a report on how they are going to fill those positions within the next 180 days. It has to be posted publicly; it has to be ready for public consumption.

S.B. 999:

Health Coverage, Mental Health, and Substance Use Disorder will require a health plan, or disability insurer to ensure compliance with specific requirements for utilization review. It was supposed to be heard on March 30 but has been postponed.

SB 26:

The CARE Scholarship Program has gone through all of its routes in the Senate, it is in the assembly desk, it is awaiting committee assignment. It is currently going through the senate for updates.

A.B 365 -Medical Diabetes Management, and S.B 819 Medical Certification, have both went to the inactive file.

SB 402 clarifies that licensed mental health providers when designated by a county Behavioral Health Director, are authorized to initiate 5150 holds for individuals who are a danger or gravely disabled.

Respectfully submitted,

April Smith, LMFT, Behavioral Health Commissioner, Legislative Committee Chair

# OLDER ADULT INTEGRATED SYSTEM OF CARE COMMITTEE

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Brenda Scott – Behavioral Health Commissioner – Older Adult Integrated System of Care Committee Chair

Tony Ortego – Riverside University Health System (RUHS) – Behavioral Health  
Behavioral Health Administrator, Older Adult Integrated System of Care Co-Chair

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## VISION

“To value self-determination and independence of the older adult and culturally diverse consumers.”

## MISSION STATEMENT

“To enable older adult consumers, who are impaired by a mental health condition, to access the services that will promote empowerment and recovery.”

## GOALS

“To reduce discrimination and disparities, increase utilization of services through education, awareness and family involvement, and to support the mission of RUHS to provide high quality care to residents of Riverside County.”

## OBJECTIVES

“Older Adult Integrated Services seeks to assist consumers in their recovery by maintaining a physically and emotionally healthy lifestyle, so they are able to remain in their home or community-based housing for as long as possible. Services are provided by a multi-disciplinary staff with specialized training in evaluating and addressing both mental health conditions and issues of aging.”

*“Empowering lives to promote wellness and recovery”*

[www.rcdmh.org/Mature-Adult-Services](http://www.rcdmh.org/Mature-Adult-Services)

The Older Adult Integrated System of Care Committee (OASOC) meets monthly with consumers, community stakeholders, other local agencies, and staff to increase understanding, educate, and inform members of available Riverside University Health System – Behavioral Health (RUHS-BH) Older Adult services and resources, to share common concerns, and to advocate and promote quality services to all consumers.

Guest speakers from various agencies provide 30–40-minute presentations on their area of expertise. During the past year, presentations were provided by partnering agencies and Riverside County Departments committed to the empowerment of the mature adult population such as David Dai, Executive Director of IHSS Public Authority who shared information about the recruiting, screening and training of in-home caregivers and consumers’ eligibility for services; Ivet Woolridge, Chief Operating Officer of Independent Living Partnership shared about the TRIP program which empowers the elderly and persons with disabilities to remain independent and active despite mobility challenges; Alexis Coro, Molina Healthcare discussed the basics of Medicare; Myeshia Bobo and Rebecca Antillon presented the work of the Suicide Prevention Coalition; Julie Curan, from Substance Abuse Prevention and Treatment Program discussed the Behavioral Health Integration (BHI) Navigation Teams’ coordination of care through partnerships with RUHS Medical Center and treatment providers, the referral process, and linkage to -

community-based services; Marie Vernon, Program Director of All Hours Adult Care discussed the Assisted Living Waiver and its relationship with Riverside County skilled nursing facilities and Medi-Cal Share of Cost; Kimberly Spiegel, Senior Program and Operations Manager, Alzheimer's Association, Coachella Valley gave a presentation on Alzheimer's care, support and research ; Diana Gutierrez and Andreea Deaton, RUHS-BH Prevention and Early Intervention, presented the Mental Health Services Act (MHSA) 3-Year Plan and all participants were encouraged to provide feedback; Senior Family Advocate Elizabeth Aguilar, from RUHS-BH was joined by Family Advocates Netoshu Dennis and Omara Moreno to provide information on the RUHS-BH Older Adult Family Advocate Program; John Cahill, Behavioral Health Specialist III (BHS III) from RUHS-BH Older Adults Program – Western Region gave a presentation on Substance Use and Co-Occurring Disorders in Older Adults. Every month, stakeholders are engaged in the presentations and often ask questions and submit ideas and feedback.

Meetings are typically held at Riverside University Health System – Behavioral Health's (RUHS-BH) Conference Center on Rustin Avenue in Riverside and occasionally in Mid-County and Desert Regions. OASOC meetings were held in virtual forums during the COVID-19 Pandemic and now are held in person and also accessible virtually. RUHS-BH Older Adult Integrated System of Care regional staff members are encouraged to participate in and promote many local events and health fairs to increase awareness of treatment, access to services and reduce stigma. Consumers have actively participated in the OASOC Committee and have contributed valuable perspectives thus promoting an authentic community and consumer led direction.

Community Events this year included RUHS-BH May is Mental Health Awareness Month Fairs which took place at community parks in Riverside, San Jacinto, and Indio; the MIMHM Art Show held in Coachella Valley on May 14th which showcased the artwork of our Desert Region Older Adult clinic consumers from the Banning, Indio, and Desert Hot Springs clinics; the Annual NAMI Walk 2024 which took place at Diamond Valley Lake; the 2024 Annual Hope Event which was held at the RUHS-Behavioral Health Rustin facility; the 2024 Lunar Festival, a celebration of Asian American culture which took place in downtown Riverside; and the annual Riverside County Elder Abuse Awareness Symposium which was sponsored, in part, by RUHS-BH Older Adult program. OASOC presents Older Adults program information on an on-going basis at the Rotary Club in Desert Hot Springs for outreach and engagement, as well as at the Monthly Senior Collaborative meeting through Jewish Family Services of the Desert. In addition, RUHS-BH Older Adult program was invited by the Board of Supervisors Fifth District Supervisor, Yxstian Gutierrez to present OASOC information and to participate at the Health and Wellness Expos in Hemet and Banning.

Notable initiatives include partnering with Riverside County Office on Aging and Riverside County Department of Public Social Services (DPSS) – Adult Protective Service's Elder Abuse Forensic Center on several initiatives aimed at identifying older adult consumers who may be in need of assistance, as well as collaboration with Inland/SoCal United Way and 211+ to create partnerships that are familiarized with the needs of the mature adult population and to increase the utilization of services available through the 211 network. Tony Ortego, Behavioral Health Services Administrator, represented OASOC as Co-Chair of the Cultural Competency Program Asian American Task Force (AATF), served on the Planning Committee for the 2024 Annual Hope Event and the 2024 Lunar Festival, a celebration of Asian American culture which takes place in downtown Riverside. He represented OASOC while serving on the Planning Committee for the Annual Riverside County Elder Abuse Symposium held on June 13, 2024, which raises awareness of the cultural, social, economic, and demographic processes affecting elder abuse and neglect. Representatives/participants from the OASOC participated in these events as well. Tony Ortego helps chair the Inland Empire – Master Plan for Aging Behavioral Health Workgroup in the development of a three-year "Roadmap for Aging Well" for the Inland Empire covering the years 2025 through 2028. Tony Ortego provides Mature Adults program information through ongoing participation in the Riverside County Advisory Council on Aging meetings. This Council acts in an advisory capacity to the Riverside County Office on Aging and the Board of Supervisors on issues affecting older persons and adults with disabilities in the County, including, but not limited to, health, education, employment, housing, transportation, and recreation. In addition, Tony Ortego represents RUHS-

BH Older Adult program and the OASOC as a member of Riverside County's Desert Healthcare District & Foundation committee.

OASOC continues to work with the RUHS-BH HHOPE Program to assist older adults moving into the Cathedral Canyon Apartments and other supportive housing apartments in the Desert area such as Verbena and Legacy Apartments in efforts to support individuals who are experiencing homelessness and have need of mental health services. OASOC continues to present updated program information to County partners, such as the Riverside County Department of Social Services/Adult Protective Services, the C.A.R.E. Program, RUHS-BH Medical Center, Riverside County Public Health Department, multiple local law enforcement agencies, and other community partners.

Other notable collaborative services include: Maintained status as Title V clinics throughout the Mature Adult Wellness and Recovery Clinics, which enabled our clinics to be training grounds for the Senior Community Service Employment Program – a program that is funded by The California Department of Aging and the US Department of Labor. Additionally, with emphasis on local interagency fluidity of services, OASOC established and maintained close relationships with partners at Legacy Apartments (Desert Region), Snowberry (Western Region) and the Vineyards (Mid-County Region) supporting the highly specialized needs of the Full Service Partnership (FSP) consumers who reside there. On site services include monthly partnership meetings and case management services on premises. OASOC also continues to expand intra-county collaborative efforts by embedding RUHS-BH Older Adult program staff at two Office on Aging locations (Western and Desert regions) in Riverside County. In addition, OASOC continues to work collaboratively with DPSS Adult Protective Services, which also includes embedded DPSS staff in our Wellness and Recovery for Mature Adults clinic located in Riverside.

OASOC continues to promote and highlight services provided by the RUHS-BH Older Adult program on-site Substance Abuse Prevention and Treatment programs in Lake Elsinore, Temecula, San Jacinto, Desert Hot Springs, and the Riverside Wellness and Recovery for Mature Adults clinics. In response to the national opioid epidemic, the DHCS Naloxone Distribution Project has made it possible for all Mature Adults clinics to be stocked with Naloxone/Narcan in case of emergency need. During the past year, Desert, Mid-County and Western Riverside Mature Adults programs provided Full Service Partnership (FSP) services to members with the most critical need. The FSP programs specialize in reaching disenfranchised mature adults who are at risk of being homeless or hospitalized and those with co-occurring disorders.

Respectfully submitted,

Brenda Scott, Behavioral Health Commissioner, Committee Chair

Tony Ortego, Riverside University Health System – Behavioral Health, Behavioral Health Administrator, Older Adult Integrated System of Care Committee Co-Chair

# VETERANS COMMITTEE

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Rick Gentillalli, M.Ed., LPI, NCPT – Behavioral Health Commissioner – Veterans Committee Chair  
David Schoelen, LCSW – Riverside University Health System – Behavioral Health – MHS Administrator

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## VISION

We continue to work and plan for a day when a grateful nation will fully recognize and meet the needs of its veterans and their families. We envision this happening and plan to use every resource and ability we have to serve our veterans and their families. Our committee is dedicated, concerned, hopeful, and ready to serve our veterans as they have served and sacrificed for our nation.

## MISSION STATEMENT

To address and alleviate the mental health and substance abuse disorder needs of veterans and their families, and to recommend and propose related helpful services. We have joined our meetings with neighboring counties as well as the United States of America Veteran Affairs and Cal-Vet to accomplish our goals.

*“...The Veterans Committee is sponsored by the Riverside County Behavioral Health Commission and consists of one Behavioral Health Commissioner, several Riverside County Department employees, neighboring county employees, the U.S. Department of Veteran Affairs, and the California Department of Veterans Affairs; with a group of volunteers. Its purpose is to identify strategies for improving support reducing the stigma of mental illness and improving the quality of life for veterans and their families dealing with mental illness. Its function is to advise and foster a collaboration of veteran's families and mental health support organizations to address and alleviate the mental health and substance abuse problem needs of veterans and their families, as well as recommend and propose related services...”*

## GOALS

To monitor and assure that all veterans requesting Riverside University Health System – Behavioral Health (RUHS-BH) services receive those services according to department policy and veteran needs; to continue our expansion of the committee and welcome members from diverse backgrounds and positions to participate in meeting our goals. We set four areas of importance to address; however, the dynamics of our society have recently changed, and we are addressing areas of concern as they become a priority. Our goal is to continue the focus on 1.) Opioid Abuse; 2.) Veteran Suicide; 3.) PTSD; and 4.) Stigma. The cultural dynamics have enhanced the issues veterans face, and our goal is to help the veterans, and their families overcome and succeed in a time of added adversity. In addition, the previous years we had been challenged with the COVID-19 health crisis, which has increased the demands on our veterans. Also, we went live with our meetings on or about May 2023. The attendance crumbled tremendously at the in-person meetings, along with the retirement of Mr. Aurelio Sanchez LCSW, and Tonica Robinson, LL.M., MPP – transferring to another agency.

As committee Chair, and respectfully, on behalf of our committee members, since we are now under the umbrella of MSHA and Cultural Competency, we request funding to hire a Behavioral Health Specialist and Case Manager to assist the Veteran Service Liaison to better serve the 125,000 (plus) Veterans in Riverside County.

We have learned and noticed that with the **past** COVID epidemic, Veterans have had a very rough go of it, even more so than the general public. To begin with, veterans have had difficulties getting appointments with the Loma Linda VA Hospital. This problem continues to date because of the backlog of veterans needs to see health care providers.

Another critical issue has been the Department's commitment to providing services to veterans who elect to receive assistance from the County instead of Veterans Affairs (VA). However, our Director has committed to receiving Veterans at our local Substance Abuse and Mental Health Clinics, and they will not be turned away, regardless of medical benefits.

The Veterans Committee continues to collaborate with the Veterans Court and attended one of the graduation ceremonies. The mission of Riverside County Veterans Court is to provide an inter-agency, collaborative treatment strategy for veterans in the criminal justice system suffering from mental health and/or substance abuse disorder problems. The committee receives regular input on this matter from representatives from the County and Behavioral Health Department's Family Advocates, who are regular attendees at committee meetings.

The Committee continued to grow significantly, and the energy level and camaraderie remained with an increase in attendance at in-person meetings. The Riverside County Department of Veteran Services has since attended a few times.

The Adult Protective Service Director, and DPSS Director attending and collaborating with our committee have ceased because of the workload and other commitments. However, DPSS has a representative attending our meetings regularly. We still have our counterpart from San Bernardino County Behavioral Health, the Department of Veterans Affairs Representative, and the California Department of Veterans Affairs, CalVet, which has built a solid foundation with a wealth of exchange of information for our committee to build on. To better understand the effort put forth by the members - such as driving a long distance to attend our meetings since the COVID ban has been lifted, members being the patriots they are with the will to help and put forth a heartfelt commitment to better serve our veteran population. I am proud to be associated with all of the members who attend and serve on our committee.

This writer has attended several meetings (round table) with Ranking Member Congressman Mark Takano, as well as one meeting with U.S. Senator Alex Padilla, California Senator Roth, and Assembly Woman Sabrina Cervantes, regarding Viet Nam Veterans and the PACT Act implementation.

In conclusion, with our sincere efforts and personal stake in serving and saving veterans, our goal is to make a positive impact on our veteran population and give back to them for their service as best we can.

Respectfully submitted,

Rick Gentillalli, M.Ed., LPI, NCPT – Behavioral Health Commissioner – Chair, Veterans Committee

David Schoelen, LCSW – Riverside University Health System – Behavioral Health – MSHA Administrator

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# REGIONAL BEHAVIORAL HEALTH ADVISORY BOARDS

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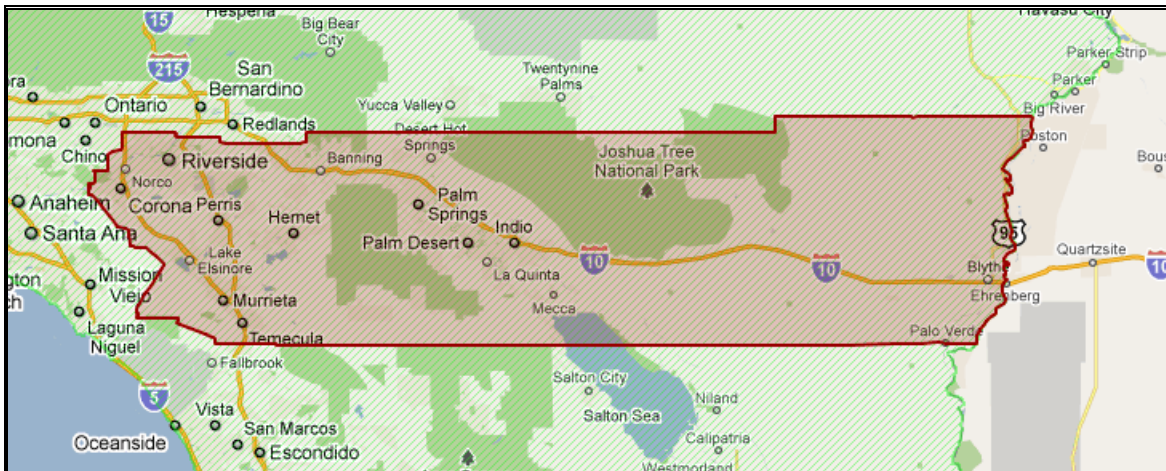
Richard Divine, Desert Region Board Chair  
DESERT REGIONAL BOARD

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Brenda Scott, Mid-County Region Board Chair  
MID-COUNTY REGIONAL BOARD

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Greg Damewood, Western Region Board Chair  
WESTERN REGIONAL BOARD



# DESERT REGIONAL BEHAVIORAL HEALTH BOARD

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Richard Divine – Desert Regional Board – Chair

Rachel Gileno – Riverside University Health System – Behavioral Health Adult Services Administrator for  
Desert Region

Kelly Grotsky – Riverside University Health System – Behavioral Health Children and TAY Services  
Administrator for Mid County Region

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## VISION

The Desert Region Behavioral Health Board’s vision is a region where our consumers receive the services they need in a timely and effective manner. Our vision includes a region where the words “Stigma and Nimby (Not in my back yard) are forgotten.

## MISSION STATEMENT

To support the Behavioral Health Commission’s goal providing the County of Riverside and its consumers with the best Behavioral Health Services possible. The Advisory Board advocates and promotes services for all citizens and cultures residing in our region. It is our mission to become a voice for our community, to make sure they receive the programs and clinics they deserve.

## GOALS

To reduce stigma and increase utilization of recovery-oriented services through education and awareness, to support the mission of the Riverside University Behavioral Health System. Our goal is to help empower our consumers to take advantage of the programs that the County provides.

The Desert Regional Behavioral Health Advisory Board is one of three (3) regional boards that covers Riverside County. Because of the size of our County, the original Mental Health Director appointed 3 regional boards to represent and advocate for all citizens in this large area. Our region covers from Calimesa, through Banning and Beaumont, the Coachella Valey out to Blythe. Our board meets the second Tuesday of the month, 10 months of the year. The board is dark for the months of August and December. Each month we have presentations provided by the Behavioral Health Department focused on services or clinics provided throughout the County. Our regional director might also provide an update on items impacting our distinct region. During our meetings we are also updated by of our Substance Abuse, Transitional Age Youth and Older Adult programs.

During the month of May the Desert Region hosted 2 “May is Mental Health” programs. On May 2<sup>nd</sup>, the County Department hosted their “Mental Health Awareness Fair at the Coachella Valley History Museum. This event was a great success. On May 14<sup>th</sup>, the Desert Regional Behavioral Health Board hosted our annual John J Benoit Art



and Creative Writing Festival. Over 400 pieces of art were displayed, and the event was attended by over 300 consumers and vendors attended. Thanks to Dr. Janice Quinn and Mark Miller for making this event such a wonderful festival

The Desert Regional Behavioral Advisory Board has maintained a wonderful group of members who represent all of our communities and consumers throughout the Coachella Valley. Our membership consists of people from all professions and walks of life. They are active throughout our region in community affairs and programs provided by the department. Our members' main concern is making sure that our consumers are receiving the best services the Department can provide.

The Board would like to thank Dr. Chang and the Department for keeping our members apprised of the programs and provide the staff that makes our region work. We would also like to thank our new Regional Manager Ms. Rachel Gileno and our TAY & Children's manager Ms. Kelly Grotsky.

Respectfully Submitted,

Richard Divine, Chair, Desert Regional Advisory Board

# MID-COUNTY REGIONAL BEHAVIORAL HEALTH ADVISORY BOARD

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Brenda Scott —Mid-County Regional Behavioral Health Advisory Board - Chair  
Ramon Amado – Mid-County Behavioral Health Advisory Board- Co-Chair  
Jennifer Woodworth – Mid-County Behavioral Health Advisory Board - Secretary

Beverly McKeddie—Mid-County Regional Behavioral Health Services Administrator-Children's Services/TAY Services

Jacqueline Markussen – Riverside University Health System – Behavioral Health Adult Services Administrator for Mid County Region (Promoted September 2023)

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## MISSION STATEMENT

To support the Behavioral Health Commission's mission with our input, voice, advocacy, and promotion of quality services for the culturally diverse communities of the Mid-County Region.

## REGIONAL ADVISORY BOARD GOALS

To reduce stigma and increase utilization of services through education and awareness; to support the mission of Riverside University Health System – Behavioral Health (RUHS-BH) to provide recovery-oriented services; to empower consumers of the Mid-County Region to achieve greater independence; to advise the Mid-County Region and the Behavioral Health Commission; and to promote Board membership.

## MID-COUNTY REGIONAL BEHAVIORAL HEALTH ADVISORY BOARD ANNUAL GOALS

To reduce stigma and increase utilization of services through education and awareness; to support the mission of Riverside University Health System – Behavioral Health (RUHS-BH) to provide recovery-oriented services; to empower consumers of the Mid-County Region to achieve greater independence; to advise the Mid-County Region and the Behavioral Health Commission; and to promote Board membership.

## FY24 ANNUAL GOALS

- a. Assess the efficacy and quality of current BH programs/services to minorities and diverse groups within the Mid-County Region.
- b. Monitor the growth/quality of the FSP program in Mid-County
- c. Monitor any cuts planned for Mid-County programs due to reduction of monies coming to the county for BH services.

- d. Support the development of programs and services specific to victims, survivors and family members of COVID-19.

### INTRODUCTION

The Mid-County Regional Behavioral Health Advisory Board continued the goals established. The purpose of this was to focus the Mid-County Board on specific areas of concern that fell within their region. In doing so, the Board can focus its attention on how RUHS serves its diverse populations and how it has worked to preserve its funding and staffing to better serve the County and its various regions effectively. Meetings were scheduled to be held at three locations; Perris Adults, Temecula Adults, and Hemet Adults, with the many agencies and programs within the Mid-County Region scheduled for a presentation to this Board. Representatives were invited to inform the Board of what was happening within the region and to share their successes and challenges. Through questioning and discussion with the various individuals connected to programming the Board stayed abreast of the overall fundings as well as staffing within the region and consistently explored and supported the development of services.

Changes within management include Toni Robinson, Administrator for Adult Services left the Department and Jacqueline Markussen took that position in September 2023.

### BOARD PRESENTATIONS

Mid-County Regional Behavioral Health Advisory Board of Riverside University Health Systems invited speakers from various agencies and programs throughout the county to advise the Board as to the services available through their programs for the residents of Mid-County. The agencies scheduled to host the Board presented their programs and activities. The site/program supervisor typically attended the meeting to provide the Board with an overview of the services and to share updates regarding any staff changes, funding issues, or new programs. It was also an opportunity to share any challenges the program was experiencing. Each site shared a celebrate recovery moment, where they invited a consumer of their program to share their story and provide information about their experience with the services received. Board members asked questions of both staff and the consumers to find ways to further improve services.

Presentations included the following programs:

- Victor Community Support Services
- Transforming Our Partnerships for Students' Success (TOPSS)
- La CLAVE
- Hemet Adult Program
- California Mentor Family Support Services
- Care Court Program
- Temecula Adult Program
- Riverside County Department of Child Support Services
- Youth Hospital Intervention Program (YHIP)
- Enhance Care Management Program
- San Jacinto Mature Adults
- Suicide Coalition

- Temecula SAPT
- MHSA Annual Update FY24/25
- Perris Adult Program
- Crisis Support System of Care Mobile Crisis Response Teams
- Veterans Center

In addition to specific agency presentations, the Mid-County Board has Administrators and/or Supervisors from Adults, Children, Substance Abuse, and Older Adults Services attend Board meetings monthly, bi-monthly, and/or quarterly where they present updates on their programs and answer any questions Board members may have. This procedure supports the relationship between the Board, Mid-County program staff and the area programs. The Board sees this as an opportunity to provide a forum for programs to share their concerns as well as their successes.

### BOARD MEMBER ACTIVITIES

Mid-County Regional Behavioral Health Board Members are actively involved in both community and department activities. They participated in the following events.

- The Annual NAMI Walk is on Saturday, November 4, 2023, at Diamond Valley Lake Marina in Hemet. Recovery Happens on October 12, 2023, at Fairmount Park.
- Caring Across Cultures a Multicultural Symposium on mental health on November 16, 2023, in Murrieta.
- NAMI Mt. San Jacinto Holiday Celebration on December 21, 2023, in Hemet.
- The Longest Night- Mid County on December 21, 2023, at the Hemet Adult Behavioral Health Clinic.
- 1 Life/Heart Poising and Overdose Awareness 5K walk: March 27, 2024, in Palm Desert Civic Desert, April 13, 2024, in Fairmont Park and April 27, 2024, in Murrieta Town Square Park.
- Received May is Mental Health Month Proclamation from City of Hemet on April 23, 2024.
- Received May is Mental Health Month Proclamation from City of San Jacinto on May 7, 2024.
- The Art of Wellness Mental Health Awareness Fair: May 9, 2024, at Valley-Wide Recreation Park in San Jacinto and May 23, 2024, Fairmount Park in Riverside.
- MHSA Update Public Hearing on May 23, 2024, at ELK's Lodge in Hemet CA.
- Wellness Village Groundbreaking ceremony on June 12, 2024, in Perris CA.
- CARE ACT Virtual Town Hall Meeting on June 26, 2026.

In addition, Regional Board members are assigned to one of the Behavioral Health Commission's Sub-Committees and attend those meetings monthly and/or bimonthly. Some Board members attend several committee meetings on behalf of the Regional Board.

Mrs. Brenda Scott, Chairperson of the Mid-County Regional Board, attends the monthly Commission meetings, Membership Committee, Older Adults Committee, Adult System of Care Committee, and Housing Committee. Dr. Walter Haessler serves on the Behavioral Health Commission and the Legislative Committee. Dr. Vernita Black serves on the Veterans Committee and Mr. Don Kendrick serves on the Criminal Justice Committee.

## SUMMARY

The Mid-County Regional Behavioral Health Advisory Board continues to examine the needs of our area and the services that were being provided. As an Advisory Board to the Behavioral Health Commission, we will continue our growth to discover new ways to be of assistance to our region, the Commission and the Department. We are thankful for the opportunity to serve. We are looking forward to continuing to provide the support and advocacy for our region in the upcoming fiscal year.

Respectfully submitted,

Brenda Scott, Chair, Mid-County Regional Advisory Board

# WESTERN REGIONAL BEHAVIORAL HEALTH ADVISORY BOARD

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Greg Damewood – Western Regional Board – Chair

Vacant - Western Regional Board – Vice Chair

Vacant – Western Regional Board - Secretary

Alea Jackson - Adult Western Region Mental Health Services Administrator

Novanh Xayarath – Western Region Children’s Behavioral Health Services Administrator

James Ortego - Western Region Mature Adults Administrator

Francisco J. Huerta - Western Region Senior Family Advocate

Maria T. Gonzalez, Western Region Children’s Senior Behavioral Health Peer Specialist – Parent Partner  
And other administrators, supervisors and managers contributing to meetings this year.

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## MISSION STATEMENT

To support the Behavioral Health Commission’s mission with our input, voice, advocacy, and promotion of quality services for the culturally diverse communities of Western Region.

## GOALS

To reduce stigma and increase utilization of services through education and awareness, and to support the mission of Riverside University Health System – Behavioral Health (RUHS-BH) to provide high quality care to residents of the Western Region within its charter.

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## ANNUAL REPORT JUNE 2023– JULY 2024

The Western Region Behavioral Health Advisory Board (WRBHAB) members and attendees supported the efforts of the Behavioral Health Commission (BHC) to the best of its abilities. The Western Region Behavioral Health Advisory Board Envisions a community where mental well-being is prioritized, supported, and accessible to all. Our dedication and mission are to foster a compassionate and inclusive environment that promotes mental health awareness, reduces stigma, and provides resources for prevention, intervention, and ongoing support. The Strategic Plans of the County of Riverside are all inclusive and the Western Region participants have participated as best possible over the last fiscal year.

Face to face, services were needed to meet clients' needs, as study numbers found interpersonal interaction were critical for ongoing wellness or recovery. The front-line staff met the guidance of management and proceeded meeting in person with clients to ensure progress made for mental health was not lost and to help prevent such challenges as self-injury by clients and to their families as much as possible. Housing and facilities continued to the best of everyone's abilities and funding. Creativity and devotion to new ways to serve our population is a testament to the dedication of all involved in the Western Region and all county services for those needing mental health and substance abuse treatment and support.

Our ten regional meetings provided an opportunity for attendees to share positive efforts to have the same level of services throughout this challenging service period of report as largely affected by covid and staffing needs. Celebrations such as May is Mental Health Month were again celebrated and joined by our Chair. Western Region and all the County of Riverside Behavioral Health System looks forward to any way to provide and support the best methods to serve its population with Western Region ready to continue and find even more ways to help our consumers be the best they can achieve to be.

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- For the month of July 5<sup>th</sup>, 2023, no special guest speaker was available at that time.
  - For the month of September 6, 2023, a special guest speaker Rachael Douglas, Sr. PSS, Open doors presenting about Parent Support Group. Parent support group is a non-traditional supportive BH service for children and their families. The program offers free training, support groups, parent-to-parent, and sibling support, to the community. Open Doors provides parents/caregivers who are raising a child/youth with mental health, emotional behavioral challenges, and a safe place to vent, share support, information, solutions, and resources. They offer training, workgroups, and specific topics which are held every 4th Thursday of the month from 5:30 PM -7:30 PM, in English & Spanish and are led by Parent Partners. Youth empowerment groups offer activities that focus on social skills, and a safe place to be themselves
  - For the month of October 4<sup>th</sup>, 2023, no special guest speaker was available at this time. Recovery Happens took place on October 12 at Fairmount Park from 11:00am – 4:30pm.
  - On November 1<sup>st</sup>, 2023, a guest speaker Lacy Fourlong, BHSS, presented on New Life. New Life began in 2011 due to the impacted detention centers for those with felonies and offenses so they could receive treatment in substance abuse and mental health. They are branching in the desert region as there are currently no programs. There are day reporting centers where we have substance abuse and behavioral health staff co located on site. There is one in Riverside, Indio, and Temecula. In the last 10-12 years New Life has grown doing one on one therapy, and groups. Groups are run by the Peers or case management staff. The process groups are facilitated by CTs. Our staff is invested in this tough population and work with clients coming out of local county jails, prisons, and state hospitals. They come to us wearing next to nothing, smelling, and speaking very foul. Then we have to navigate but I am a firm believer in behavior modification. They meet clients where they are but also let them know the expectations and try to get them into shelters, emergency housing, and food. I want this program to be a welcoming environment for the staff but also for the consumers as we are seeing them on the worst day of their life. It is important to provide support for the staff and send them on trainings that will give them the upper hand on how to work with these consumers.

- On January 3<sup>rd</sup>, 2024, a guest speaker Celeste Stadelman, BHS presented Enhancement Care Management (ECM). They service homeless, severe mental illness, substance use disorder, elderly that are exiting the skill nursing facilities and may need extra support. They are recently serving the incarcerated returning back into society from jail and prison. IEHP has a new sub program that will allow pregnant mothers to receive Dual services at no cost to our IEHP members. The program also provides after delivery care for up to six weeks and also includes stillbirths. They also service different regions and our encashment for other zip codes. There is a referral process and have a dedicated ECM email where they receive referrals.
- On February 7, 2024, a special guest speaker David Schoelen BHSA, MHSA, presented about the Mental Services Act and the opportunity to share thoughts regarding the public behavioral healthcare, members, and county. The Mental Health Act was a proposition on the 2004 California ballot in 2005, creating 1% tax on millionaires to generate a dedicated funding stream for public mental health care. The department must follow rules and regulations in order to be able to spend the money within the parameters of each of the components. By law, the county must look at other funding sources first before using MHSA Dollars. The next largest component on MHSA is PEI or prevention and early intervention. It represents about 19% of the misallocation. PEI's unique in that it provides education and engagement to the general community. At least 51% of PEI funds must focus on programs for youth under the age of 25 or their families. The next component is workforce, education and training. Our current challenge was designed to address the recruitment, retention, and development of the public mental health workforce and to help allied professions better serve people who carry a diagnosis. The last component is CTN, better known as capital facilities and technology. This component funds new buildings or electronic technology to support the infrastructure of service delivery.
- On March 6, 2024, a guest speaker was Shirley Guzman, Cultural Competency Liaison, presented to establish collaborations with partners and support systems within the target population, serve as a bridge between RUHS-BH and underserved populations, reducing stigma, increase understanding of and trust in the behavioral health system, address barriers due to cultural and language differences, identify key community leaders with in the target population to promote behavioral health information, collect data to document the quality of behavioral health services especially as it relates to the population.
- On April 3<sup>rd</sup>, 2024, a special guest speaker was Carina Gustafsson, Children's BHSA, presented about the Care Court which is a court-ordered CARE plan that supports the respondent in accessing treatment through community-based services and supports. Focused on individuals, 18 years of age or older, with a diagnosis of schizophrenia or other psychotic disorders, who are substantially deteriorating and unlikely to survive safely in the community without supervision. In addition, CARE Act is designed to help divert individuals from entering more restrictive conservatorships or incarceration. A court petition is required to start the process of assessing the individual's eligibility for CARE Act. A judge will initially determine whether the person for whom treatment is sought is eligible. Once a petition is filed and reviewed, and the respondent is eligible, the court will set an initial appearance within 14 days. During that time the case is investigated. If we are unable to complete this by the deadline, we can get an extension. Progress hearings are conducted throughout the year and there is also a one-year status hearing. If the participant is doing well, they will graduate or there will be an extension.



- On May 1<sup>st</sup>, 2024, a guest speaker was Cynthia Ferreiro, CBAT Supervisor, spoke about the Community Behavior Assessment Team, also known as CBAT. CBAT is a specialized unit and what it does, it pairs up a clinical therapist with a designated Law Enforcement Officer. They have either licensed clinical therapist or associate clinical therapist that are reporting to their shift every day to the station. They do briefings with the rest of the rest of the law enforcement partners. They pair up with one specific designated partner that is known as the CBAT deputy or see about officer depending on the station and they go out to calls in the community. Their duties are to have a rapid response evaluation and risk assessment, and we also do want to link to appropriate resources. Their clinicians are skilled and utilize resources to get the person connected to services. The intent is to connect individuals with continued mental health. Their goals are to avoid unnecessary incarcerations, so if they have housing for unsheltered individuals can avoid habitually trespassing because they are unhoused, then the person is linked to available shelter services, so that unlawful trespassing is avoided or taken into custody unnecessarily for trespassing if they're under the influence for being habitually intoxicated. The person is introduced to work with substance abuse services.
- May is Mental Health Month and was successful and fully supported by everyone who attended. This year several Behavioral Health Administrators from various regions were responsible for planning the guests, vendors, food, music and being present the day of the event to make sure that everything ran smoothly. The Western Region Chair helped open this event. As well, the Western Region was excited and geared up for May is Mental Health Month that was held on May 23, 2024, at Fairmont Park from 11:00 AM – 4:30 PM and was accessible to the public and invited everyone to join. A day of activities, local resources and services for mental health, substance use and all-around wellness was shared and celebrated. Many exhibitors registered and attended supporting information and leadership to the community. Staff also attended, having had their own tables representing each region and handing out swag to participants and information about their specific programs. This celebration was reviewed as a huge success which even brought KOLA Radio to our celebration. We are looking forward to next year's event.
- For June 2024, there was a special guest speaker available at this time. It was shared that Life Stream was offering incentives to donate blood throughout the summer. One incentive was a raffle to potentially win a 2024 Toyota SUV and each week for 13 weeks and one person was to win a cruise.
- Fairmount Park – May is Mental Health as stated above – Our Chair helped open the event.
- Fairmount Park - Recovery Happens and other names like a Walk. Also attended by our Chair.
- Directing Change - Attended as Commissioner and WR Chair for County Behavioral Services.
- Friday Night Live – WR represented by Commissioner, Greg Damewood, the Western Region Chair.
- MHSA - held in Moreno Valley - helped to lead the Public Input Meeting by Commissioner and WR Chair.
- Collaborated with Adult FSP/Western Region staff and HHOPE to facilitate ***The Longest Night Event***, which provided blankets, grooming kits, hats, and gloves to over 100 homeless Consumers during the coldest night of the year.

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Over the past year, the Board has made significant strides in fulfilling its assigned mission, demonstrating commendable dedication and effectiveness. Key accomplishments include partnering with stake holders to effect change within the system of care and notable increase in community engagement and satisfaction. Customers of Behavioral Health were welcomed and provided both feedback and ideas for services.

*Our Board also asks for support regarding more volunteers as our membership has been diminished by members: moving out of our area, job hour conflicts, leaving volunteerism, and due to passing away.*

## Shared Reports from Western Region:

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### *Alea Jackson, M.S., LMFT- Mental Health Services Administrator Western Region Adult Programs*

The adult programs are prioritizing filling the vacancies for the following positions: BHSS, BHS II/III, CTI/II, and PSS. We are actively participating in the recruitment process and working on the current candidate list(s) to expedite hiring. The Western region's 3-year MHA goal includes expanding the region's Full-Service Partnership programs at Jefferson Wellness and Blaine Street Clinic.

#### **Jefferson Wellness Center-Full-Service Partnership (JWC FSP)**

The JWC leadership participated in the Longest Night Ever, Recovery Happens, and May is Mental Health Month. JWC FSP program currently has 309 members enrolled. The program has worked collaboratively with ITF to enroll adult ITF patients in FSP level of care prior to psychiatric hospitalization discharge. We have assigned a BHS II from Jefferson Wellness Clinic and Corona Wellness Clinic to the Arlington campus to liaise the warm hand off process for patients discharging from ITF. The Liaison is on site Monday-Friday 7:30 AM – 6:00 PM.

#### **Enhanced Care Management (ECM)**

There are 101 members who are actively enrolled in ECM, and we continue to work toward the goal of reaching maximum capacity of 250. The program has a 5 staff care team. The programs focus is to address the complex care needs of those diagnosed with both a mental illness and medical condition. The program participated in May is Mental Health Month and provided resources to the community.

#### **Blaine Street Clinic**

The adult outpatient program provides outpatient treatment services to 1,902 general mental health consumers and 115 FSP members. The program has focused on increasing FSP capacity and has grown from 22 members enrolled in December 2022 to 115 present date. Blaine is also working collaboratively with the BH ITF Liaisons to enroll adult ITF patients in the Blaine FSP program. The Blaine leadership and staff participated in Recovery Happens and May is Mental Health Month.

#### **Pathways to Success (PTS)**

The program collaborates with the California Department of Rehabilitation (DOR). The program will participate in a site review with DOR in June 2024 to address the objectives and goals to sustain the program, enhance, and maximize service delivery for Riverside County consumers. The program is expanding its collaboration to the transitional aged youth FSP programs. The program staff is currently conducting orientation in the western, mid-county, and desert regions.

### *Novanh Xayarath LMFT -- Mental Health Services Administrator Western Region Children's Programs and TAY Stepping Stone.*

**First Episode Psychosis (FEP)** – FEP program continues to develop and expand services. Program received CYBHS grant funding to expand services to mid county region. The grant will allow the program to hire a clinical therapist, parent partner, Peer, Behavioral Health Specialist I and II. The program continues to get support and guidance from the state. The team completed training on how to do cognitive remediation and has implemented skills in groups. Referrals for FEP services have increased in the last year.

There is also a vacancy in CT position to cover FEP services in the desert area. The desert CT position has been very difficult to recruit given the limited pool of candidates in that area.

**Youth Hospital Program-** YHIP is fully staffed and continues to provide excellent care to individuals discharging from local hospitals. YHIP is an intense field-based program providing short-term therapy and case management services to stabilize youth coming out of area hospitals. The program continues to receive steady referrals.

**ISF Wraparound** – The program is almost fully staff. There is one clinical therapist vacancy. The program has opened more slots for Medi-Cal recipients, although our primary partner is still the Probation Department. ISF continues to plan and prepare to transition to high fidelity wraparound services as mandated by the state of CA. Transition has been delayed to early 2024.

**Multidimensional Family Therapy (MDFT)** – MDFT western program is fully staff. The program supervisor splits her time between MDFT western and MDFT Mid County. The program hired a Senior Clinical Therapist to assist with supervision and training of new staff. The program outcome measures continue to show that MDFT is effective with good outcomes and steady referrals from probation and school partners.

**Children's Treatment Services (CTS)** – Program is close to being 100% staff. There is one CT and BHSII vacancy. CTS is the largest children's outpatient program in the west region. It serves as the hub for Trauma Focus – Cognitive Behavioral Therapy (TF-CBT) as well as eating disorders. CTS also provide significant coverage for surrounding programs and contract providers who need support with medication services or specialized treatment services such as eating disorder or TF-CBT.

**TAY Stepping Stones** - The program had been fully staffed but in recent months, had two of 4 therapists left for other opportunities. The program added a Family Advocate position and has put in request for a community services assistant to provide transportation services to consumers. The program continues to provide online groups and some in person activities. Therapy and med services continue to be provided. Stepping Stones collaborated with the Public Defender's office to have lawyer and paralegal at TAY Stepping Stones to help TAY Youth with probation/court related issues. Stepping Stone also collaborates with Riverside County Office of Education (RCOE) to do Care Space program to provide MH services to RCOE students under a special grant. This collaboration has resulted in additional referrals coming into the program.

**Moreno Valley Children's Interagency Program (MVCHIP)** - The program's clinical and peer positions are fully staffed. There is a vacancy in OAI and psychiatrist position. The program hired a Senior Clinical Therapist to support the program supervisor with clinical supervision and administrative support. The clinical staff are trained in TF-CBT and eating disorders. Referrals for MVCHIP had more acute needs requiring many services for stabilization. The program also saw increase of referrals and had to divert some of the referrals to nearby clinics or contract providers in the area. Because of the increase, the program has developed additional groups and expanded assessment intake slots.

**Riverside Family Wellness Center (RFWC)** – A new supervisor was hired to lead the program. It's in a rebuilding mode. 4 of 5 therapists are new to the department. New therapists are in training to provide eating disorders, Trauma Focused Cognitive Behavioral therapy, and an incredible year's program for the very young consumers. RFWC continues to provide services that include individual, family, group, and medication services. The program continues to see a steady stream of referrals.

***Additional notes:***

The department received Innovation funding to develop an intensive outpatient program for eating disorders. The new program will be housed at The Village once it is completed in 2026. In the meantime, a temporary location is being sought out in the Perris area. It's anticipated that the program will open to new consumers in later fall or winter of 2024.

A new round of trauma focused cognitive behavioral therapy training will occur July 30<sup>th</sup> and 31<sup>st</sup>. Training will lead to TF-CBT national certification for staff who are licensed, completed the training, and pass the TF-CBT certification program knowledge-based test.

Thank you for your time and consideration - *Novanh Xayarath LMFT*

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***Francisco J. Huerta -- Senior Behavioral Health Peer Specialist***

As the Western Region Senior Family Advocate, I am very happy to report that things are looking great in our region. Our Family Advocate Program has been supporting all RUHS BH-OP clinics, SAPT Clinics, as well as BH Crisis Centers, ETS/ITF, Law Enforcement, and the community at large.

In the Western Region we receive over 20 new referrals weekly, while providing continuous support to existing families and making ourselves available to BH staff, Hospital staff, Crisis Team, Law Enforcement and Community Providers. We facilitate weekly evening Zoom family support groups (English/Spanish), including an in-person weekly family support group at Blaine St Clinic and at the TAY Stepping Stones Center. Due to the pandemic, we just started to provide in-person educational presentations to the community and are excited to do many more. We are in several collaboration committees/meetings (Inpatient/Outpatient Communication, Housing, Western Region BHC, Western Region Sups, and TAY Collaborative). We are also involved in our RUHS BH-OP clinics' weekly treatment team meetings.

We have been able to decrease hospitalizations and incarcerations (Recidivism), by providing support, resources, and education to families/caregivers. Our TEAM has been able to assist families/caregivers to understand and navigate the BH system. Continuously collaborate and develop effective relationships with Behavioral Health providers, programs, clinics, and community organizations to promote family integration into our behavioral health services delivery. Assist Behavioral Health clinics, hospitals, and other behavioral health service facilities by being a liaison for clinic staff and the Family Advocate Program.

We continue to be an essential role in the Adult Behavioral Health clinics as family members and caregivers of the adult consumers need to have someone who advocates, informs, trains, supports and empowers families/caregivers who directly or indirectly receive behavioral health services. We participate in FSP teams to help communicate, represent, and promote the families/caregiver's perspective within the behavioral health system and FSP teams.

The Family Advocate Program strives to remove barriers associated with gaining access to support systems for families. This involves meeting them where they are, whether that is in the community or home visits. Having support staff explore resources has proven to be more effective than providing a list of possibly helpful phone numbers for families to call. Establishing trust with families/members by meeting them where they are often leads to regular clinic visits where staff can engage and re-engage families/members.

Our goal is to continue adding Family Support Groups, Sibling Support Groups and Family Educational trainings. Current available curriculum includes DBT for Families, Family WRAP, and Real Recovery for Families, from Crisis to Stabilization Family Groups, Mental Health First Aid and Recovery Management for Families.

We recently created a FAMILY ADVOCATE PROGRAM email, aimed specifically at receiving referrals from our Hospitals, Crisis Teams, and Law Enforcement. We hope this will reduce recidivism in hospitalizations and incarcerations, by supporting those families/caregivers that are in current crisis mode.

**UPDATE:** We have received over 300 referrals since we created the FAP crisis email on 6/28/23.

Thank you for your time and consideration - *Francisco J. Huerta*

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*Maria T. Gonzalez -- Western Region Senior Behavioral Health Peer Specialist – Parent Partner*

The Children’s Western Region Senior in Parent Support and Training Program (PS&T Program), supports all BH Peer Specialists - Parent Partners in RUHS BH children outpatient clinics and Children Contract Providers. PS&T program has continued to partner with the Department of Public Social Services (DPSS) and Probation regarding Pathways training for new staff. PS&T and DPSS have incorporated the changes in both systems to ensure that all children entering the child welfare system receive behavioral health services as needed. As well as providing support to the community at large.

PS&T Program facilitates weekly in-person and virtual parenting classes such as Educate, Equip and Support, Nurturing Parenting, Triple P, and Teen Triple P. PS&T Programs facilitate in-person monthly Spanish and English “Open Doors” Support Groups and participate in outreach events such as Children's MH Awareness, and May is MH Month. We collaborate with other community fair organizations to bring awareness and resources to the community. PS&T Program has a Boutique with clean and gently used clothing donated by staff and outside donations for families receiving services in one of our clinics. In this fiscal year, 29 parents and 25 youths came by and benefited from these donations.

PS&T Program organizes several community outreach projects, including the Backpack Drive, Thanksgiving Basket giveaway, and Snowman Banner Holiday drives. These initiatives aimed to provide support and resources to families, children, and transition-age youth (TAY) in RUHS BH children outpatient clinics, Children Contract Providers, and the community at large.

PS&T Program Manager and Senior Parent Partners participate in various committees and collaborations throughout the County, such as Southwestern and Western Regional Child Care Consortium (Committee), HOPE Prevent Child Abuse Board, United Neighbors Involving Youth (UNITY), IECHI Task Force, QPI, Growing Healthy Minds, Perinatal Collaborative, Child Abuse Prevention Council HOPE (Moreno Valley, Corona, Riverside, Temecula, Desert Hot Springs), SELPA Interagency Meeting, Riverside County Department of Mental Health Committees/Boards, Cultural Competency Committee, Translation and Interpretation Committee,, Cultural Awareness Celebration Committee, Pathways to Wellness/CCR - Collaboration with DPSS, TAY Collaborative Committee, Pathways to Wellness/CCR - Family Perspective Presentation, Mental Health Children’s Committee, Western Region Supervisors Meeting, Central Region Supervisors Meeting, Mid-County Region Supervisors-

Meeting, Desert Region Supervisors Meeting, Pathways to Wellness (CSOC) CORE Meeting, Pathways to Wellness (CSOC) Steering Committee, Pathways to Wellness (CSOC) Work Groups Leader Orientation, TAY Collaborative, AAFWAG, Coalition Youth Experiencing Homelessness, DPSS FSS/HSP, Youth Homelessness Committee, CES Navigation Council, Healthy Jurupa Valley, Latino Commission, IEHP/BH, Suicide Prevention Coalition, WRAB Meeting, Trauma Informed System Champions, MCAH Community Advisory Board, DRC, QSRC Consortium, Housing Support Section 8 Meeting, PEI Steering Committee, Children's Coordinator, YAC/YAB (COC Housing workforce Solutions), and CES Community Partnership Meeting.

PS&T Program Behavioral Health Peer Specialists- Parent Partners (PP) across the RUHS BH Children's outpatient clinics are the voice of the families as we advocate for their child's BH needs. We hold hope as families enter the Behavioral Health system and go through their child's recovery journey. It is crucial to have trained BH Peer Specialist-PP across the RUHS-BH children's outpatient clinics to bring awareness and education on Behavioral Health to parents seeking services and simultaneously decrease hospitalization recidivism.

Thank you for your time and consideration – **Maria T. Gonzalez**

**Please see OASOC Report**

*Tony Ortego, LMFT – Behavioral Health Services Administrator Western Older Adult Integrated System of Care program*

The Older Adult Integrated System of Care Committee (OASOC) meets monthly with consumers, community stakeholders, other local agencies, and staff to increase understanding, educate, and inform members of available Riverside University Health System – Behavioral Health (RUHS-BH) Older Adult services and resources, to share common concerns, and to advocate and promote quality treatment and services to all consumers.

Meetings are typically held at Riverside University Health System – Behavioral Health's (RUHS-BH) Conference Center on Rustin Avenue in Riverside and occasionally in Mid-County and Desert Regions. OASOC meetings were held in virtual forums during the COVID-19 Pandemic and now are held in person and accessible virtually. RUHS-BH Older Adult Integrated System of Care regional staff members are encouraged to participate in and promote many local events and health fairs to increase awareness of treatment, access to services and reduce stigma. Consumers have actively participated in the OASOC Committee and have contributed valuable perspectives thus promoting an authentic community and consumer led direction.

Community Events this year included RUHS-BH May is Mental Health Awareness Month Fairs which took place at community parks in Riverside, San Jacinto, and Indio; the MIMHM Art Show held in Coachella Valley on May 14th which showcased the artwork of our Desert Region Older Adult clinic consumers from the Banning, Indio, and Desert Hot Springs clinics; the Annual NAMI Walk 2024 which took place at Diamond Valley Lake; the 2024 Annual Hope Event which was held at the RUHS-Behavioral Health Rustin facility; the 2024 Lunar Festival, a celebration of Asian American culture which took place in downtown Riverside; and the annual Riverside County Elder Abuse Awareness Symposium which was sponsored, in part, by RUHS-BH Older Adult program. OASOC presents Older Adults program information on an on-going basis at the Rotary Club in Desert Hot Springs for outreach and engagement, as well as at the Monthly Senior Collaborative meeting through Jewish Family Services of the Desert. In addition, RUHS-BH Older Adult program was invited by the Board of Supervisors Fifth District Supervisor, Yxstian Gutierrez to present OASOC information and to participate at the Health and Wellness Expos in Hemet and Banning.

Notable initiatives include partnering with Riverside County Office on Aging and Riverside County Department of Public Social Services (DPSS) – Adult Protective Service’s Elder Abuse Forensic Center on several initiatives aimed at identifying older adult consumers who may be in need of assistance, as well as collaboration with Inland/SoCal United Way and 211+ to create partnerships that are familiarized with the needs of the mature adult population and to increase the utilization of services available through the 211 network. Tony Ortego, Behavioral Health Services Administrator, represented OASOC as Co-Chair of the Cultural Competency Program Asian American Task Force (AATF), served on the Planning Committee for the 2024 Annual Hope Event and the 2024 Lunar Festival, a celebration of Asian American culture which takes place in downtown Riverside. He represented OASOC while serving on the Planning Committee for the Annual Riverside County Elder Abuse Symposium held on June 13, 2024, which raises awareness of the cultural, social, economic, and demographic processes affecting elder abuse and neglect. Representatives/participants from the OASOC participated in these events as well. Tony Ortego helps chair the Inland Empire – Master Plan for Aging Behavioral Health Workgroup in the development of a three-year “Roadmap for Aging Well” for the Inland Empire covering the years 2025 through 2028. Tony Ortego provides Mature Adults program information through ongoing participation in the Riverside County Advisory Council on Aging meetings. This Council acts in an advisory capacity to the Riverside County Office on Aging and the Board of Supervisors on issues affecting older persons and adults with disabilities in the County, including, but not limited to, health, education, employment, housing, transportation, and recreation. In addition, Tony Ortego represents RUHS-BH Older Adult program and the OASOC as a member of Riverside County’s Desert Healthcare District & Foundation committee.

Community Events this year included RUHS-BH May is Mental Health Awareness Month Fairs which took place at community parks in Riverside, San Jacinto, and Indio; the MIMHM Art Show held in Coachella Valley on May 14th which showcased the artwork of our Desert Region Older Adult clinic consumers from the Banning, Indio, and Desert Hot Springs clinics; the Annual NAMI Walk 2024 which took place at Diamond Valley Lake; the 2024 Annual Hope Event which was held at the RUHS-Behavioral Health Rustin facility; the 2024 Lunar Festival, a celebration of Asian American culture which took place in downtown Riverside; and the annual Riverside County Elder Abuse Awareness Symposium which was sponsored, in part, by RUHS-BH Older Adult program. OASOC presents Older Adults program information on an on-going basis at the Rotary Club in Desert Hot Springs for outreach and engagement, as well as at the Monthly Senior Collaborative meeting through Jewish Family Services of the Desert. In addition, RUHS-BH Older Adult program was invited by the Board of Supervisors Fifth District Supervisor, Yxstian Gutierrez to present OASOC information and to participate at the Health and Wellness Expos in Hemet and Banning.

Other notable collaborative services include maintained status as Title V clinics throughout the Mature Adult Wellness and Recovery Clinics, which enabled our clinics to be training grounds for the Senior Community Service Employment Program – a program that is funded by The California Department of Aging and the US Department of Labor. Additionally, with emphasis on local interagency fluidity of services, OASOC established and maintained close relationships with partners at Legacy Apartments (Desert Region), Snowberry (Western Region) and the Vineyards (Mid-County Region) supporting the highly specialized needs of the Full-Service Partnership (FSP) consumers who reside there. On-site services include monthly partnership meetings and case management services on premises. OASOC also continues to expand intra-county collaborative efforts by embedding RUHS-BH Older Adult program staff at two Office on Aging locations (Western and Desert regions) in Riverside County. In addition, OASOC continues to work collaboratively with DPSS Adult Protective Services, which also includes embedded DPSS staff in our Wellness and Recovery for Mature Adults clinic located in Riverside.

OAISOC continues to promote and highlight services provided by the RUHS-BH Older Adult program on-site Substance Abuse Prevention and Treatment programs in the Riverside/Western region, Lake Elsinore, Temecula, San Jacinto, Desert Hot Springs, Wellness & Recovery Clinics for Mature Adults. In response to the national opioid epidemic, the DHCS Naloxone Distribution Project has made it possible for all Mature Adults clinics to be stocked with Naloxone/Narcan in case of emergency need. During the past year, Western Riverside, Desert, and Mid-County Mature Adults (Older Adult) programs provided Full-Service Partnership (FSP) services to members with the most critical need. The FSP programs specialize in reaching disenfranchised mature adults who are at risk of being homeless or hospitalized and those with co-occurring disorders.

Respectfully submitted for all that have served and are committed to the services of the County of Riverside,

Greg Damewood, Chair, Western Regional Advisory Board

Alea Jackson, Western Region Adult Behavioral Health Services Administrator

Novanh Xayarath, Western Region Children's Behavioral Health Services Administrator

James Ortego, Western Region Older Adult Senior Behavioral Health Services Administrator

Francisco J. Huerta, Senior Family Advocate

Maria T. Gonzalez, Western Region Children's Senior Behavioral Health Peer Specialist – Parent Partner

*In addition, to all others contributing and attending as outlined by this report listed at the introduction and in the body of this report, a deep appreciation is expressed for your volunteerism, care, compassion, and professionalism. The Western Regional Advisory Board would appreciate any ideas, references and support for more volunteers to serve as a board member or as the attendee would prefer to volunteer in the matters of behavioral health efforts.*



## SITE REVIEWS

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The goal of the Behavioral Health Commission and its Regional Advisory Boards is to visit all service locations within a three-year time period to assess the community's mental health and substance use needs, to evaluate the extent to which these needs are being met, and to make any necessary recommendations regarding policy and procedural matters.

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**Site Name & Address:** ABC Recovery Center  
44359 Palm Street  
Indio, CA 92201  
(760) 342-6616

**Supervisor:** Joe Knyvett  
**Completed by:** Victoria St. Johns  
**Date Completed:** 3/29/2024

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**Site Name & Address:** California Work Opportunity & Responsibility to Kids (CalWorks)/ Greater Avenue for Independence (GAIN Program)  
541 North San Jacinto Avenue  
Hemet, CA 92543  
(951) 358-4414

**Supervisor:** Jody Ruggiero  
**Completed by:** April Smith  
**Date Completed:** 3/26/2024

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**Site Name & Address:** Hemet Behavioral Health Clinic  
650 N. State Street  
Hemet, CA 92543  
(951) 791-3300

**Supervisor:** Sandy Idle  
**Completed by:** Brenda Scott  
**Date Completed:** April 23, 2024

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**Site Name & Address:** John Benoit Detention Center  
82675 Hwy. III  
Indio, CA 92201  
(760) 863-8252

**Supervisor:** Maria Maduena  
**Completed by:** Victoria St. Johns  
**Date Completed:** 3/28/2024

**Site Name & Address:** Mental Health Court  
3499 10<sup>th</sup> Street  
Riverside, CA 92501  
(951) 955-1560

**Supervisor:** Sean Fredriksen

**Completed by:** Daryl Terrell

**Date Completed:** April 17, 2024

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**Site Name & Address:** Moreno Valley Children's Interagency Program (MVCIP)  
23119 Cottonwood Avenue, Bldg. A, #100  
Moreno Valley, CA 92553  
(951) 413-5678

**Supervisor:** Ana Murcia

**Completed by:** Daryl Terrell and Greg Damewood

**Date Completed:** March 20, 2024

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**Site Name & Address:** Moreno Valley Substance Abuse Prevention & Treatment Program  
23119 Cottonwood Avenue, Bldg. A, #100  
Moreno Valley, CA 92553  
(951) 413-5130

**Supervisor:** Rose Rayfield

**Completed by:** Daryl Terrell and Greg Damewood

**Date Completed:** March 20, 2024

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**Site Name & Address:** San Jacinto Substance Abuse Prevention & Treatment  
1370 S. State St., Suite A  
San Jacinto, CA 92583  
(951) 791-3350

**Supervisor:** Diana Pham

**Completed by:** April Smith

**Date Completed:** March 26, 2024

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**Site Name & Address:** San Jacinto Wellness & Recovery Clinic for Mature Adults  
1370 S. State St., Ste. B  
San Jacinto, CA 92583  
(951) 791-3283

**Supervisor:** Rebeckah Birkinsha

**Completed by:** Brenda Scott

**Date Completed:** 4/17/2024

**Site Name & Address:** Southwest Detention Center – Jail (Cois Byrd)  
30755 – B, Auld Road  
Murrieta, CA 92563  
(951) 696-3112

**Supervisor:** C. Sgt. Ferguson  
**Completed by:** Rick Gentillalli  
**Date Completed:** 4/23/2024

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**Site Name & Address:** Telecare Riverside Crisis Stabilization Unit  
47-915 Oasis Street  
Indio, CA 92201  
(760) 863-8600

**Supervisor:** Ro Soltani  
**Completed by:** Victoria St. Johns  
**Date Completed:** 4/18/2024

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**Site Name & Address:** The Ranch Recovery – Hacienda Valdez  
12890 Quinta Way  
Desert Hot Springs, CA 92240  
(760) 329-2959

**Supervisor:** Liz Sanchez  
**Completed by:** Victoria St. Johns  
**Date Completed:** 3/29/2024

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**Site Name & Address:** The Ranch Recovery, INC.  
7885 Annandale Avenue  
Desert Hot Springs, CA 92240  
(760) 329-2924

**Supervisor:** Mike Smith  
**Completed by:** Victoria St. Johns  
**Date Completed:** 3/29/2024