**Process and Evaluation Workgroup**

**Meeting Minutes**

**November 6, 2019**

**In attendance:**

**Rodney Brooks:** Alameda County Public Defender’s Office

**Darris Young:** Urban Strategies Council

**Myrna Schwartz:**  Faith in Action East Bay (FIAEB) Live Free

**Richard Speiglman:** Faith in Action East Bay (FIAEB) Live Free

**Charlie Eddy:**  Urban Strategies Council

**Bob Britton:** Faith in Action East Bay (FIAEB) Live Free

**Timothy Smith:** Building Opportunities for Self Sufficiency (BOSS)

**Charles Hendrickson:** Santa Clara County, Public Defender

**Tony Tullys:** Director, Behavioral Health Services, Santa Clara Valley Health and Hospital System

Toni Tullys and the Charles Hendrickson were invited to attend the November meeting to share how Santa Clara addresses the issue of Med-Cal reinstatement for people who are in custody. At the start of the meeting they provided an overview before responding to the list of questions provided to them prior to the meeting. A summary of what they said is listed below.

**Charles Hendrickson:**

* Santa Clara County has eligibility workers in the jails. They would like to have eligibility workers staffing court appearances for people in custody who have had Medi-Cal turned so they can start to address the issue earlier. Identifying people prior to their need to utilize the services (get released) is the key in working with people in custody.
* Santa Clara County is doing a good job with people who are eligible who have never been on Medi-Cal and with people who are undocumented. The County is having a challenge with people who have Medi-Cal outside of Santa Cara County – getting it transferred. In those situations, the provider does not know how they are going to get paid.

**Toni Tullis:**

* The eligibility workers are Social Services employees; staff and management were required to go through the meet and confer process.
* Santa Clara County Social Services has a Criminal Services Unit and they collaborate with public safety partners and Behavioral Health; to enroll clients with limited criminal history, and mental health issues into services.

Next Toni and Charles addressed each of the questions provided to them prior to the meeting. The questions and a summary of their responses are listed below (Some of the questions and answers were taken out order from the list as initially submitted.)

**Question:** **What were your biggest successes and what were your biggest challenges (i.e. HR, changing county policies etc.), how did you address them?**

**Summary of the response:**

* Trying to get HR to increase our staff.
* Getting data from the Sheriff, i.e. people in custody who have health issues.
* Working with people with immigration issues.
* Much of the leadership in Santa Clara County wanted the people leaving jail to get on to Medi-Cal.

**Question:** **How does your initiative if at all address the over criminalization of black and brown people?**

**Summary of the response:**

* The largest ethnic group that we serve are Latinx. African Americans are 3% of the Santa Clara County population, yet African Americans are 15% of the jail population.
* Over criminalization is not specifically part of the plan, but cultural competency is included in the way services are delivered.
* People go to faith-based run services, which is a way of integrating culture into the service delivery. The County has a Re-Entry Center near the jail. Faith-based organizations are stationed in the Re-Entry Center.
* In addition, the County has a homeless van that comes to the Re-Entry Center a few times a week.
* The have faith-based leaders (many are leaders of the color) have been working with this population; and continue to have their contracts increased due to their success.
* Santa Clara County’s budget includes $30 Million for criminal justice services.

**Question:** **Was not including this initiative in your State three plan prohibitive? If so, how did you address that? Is there anything we should add to our three-year plan to assist in getting Medi-Cal tuned on when leaving incarceration.**

* It is in the plan, we are using MHSA money

**Question:** **What actions in the development and implementation of your initiative re: getting Medi-Cal turned on when leaving incarceration resulted from your understanding of the local political climate?**

* Initially two Board Members we not supportive.
* The CAO had questions about the fiscal impacts.
* All of our contractors are required to give extensive report backs.
* We are fortunate to have a strong group of public safety partners.
* Our County has strong relationship between the PD and Behavioral Health.
* We have staff on our team who have the ear of the Board of Supervisors, the County Executive, and Behavior Health.
* Tony Tullys meets with the Police Chiefs and Sheriff’s monthly.
* The County has a contract with retired law enforcement officers who liaison with Behavior Health; one of their responsibilities is to Communicate during a crisis which include clients who are having a mental health episode.
* One challenge is that people who do not touch Behavioral Health are not enrolled in our services. County staff tries to get them to the Re-Entry Center – which is next to the jail.
* People come to their attention in Mental Health Court/Behavioral Health Court, so as they are released from custody, they get their Medi-Cal turned on. There is still the issue of the 30-day lag time having it turned on.

**Question:** **What relationship do you have with DMV & Social Security?**

* Toni or Charles would need to consult members of their staff on this issue.

**Question:** **Who were allies in your County that helped you make this initiative successful.**

* We have been very intentional about who we collaborate with. For example, when working with high need clients, the collaboration is with Social Services, Probation and Behavioral Health.
* Contracts are run out of the CAO’s office.
* The staff requires documented results from the service providers.

The group thanked Tony and Charles for coming to the meeting and asked if they would be open to follow up questions. They responded that they are open to any future discussions.

The meeting adjourned at 12:07