



# County of Santa Cruz

## HEALTH SERVICES AGENCY

### BEHAVIORAL HEALTH DIVISION

#### MINUTES – Approved

January 15, 2026



Salud Mental y  
Tratamiento del Uso  
de Sustancias

### BEHAVIORAL HEALTH ADVISORY BOARD

NOVEMBER 20, 2025, 3:00 PM – 5:00 PM

HEALTH SERVICES AGENCY, 1400 EMELINE, ROOMS 206-207, SANTA CRUZ 95060

MICROSOFT TEAMS (831) 454-2222, CONFERENCE ID 183 340 820#

Present: Dean Kashino, Hugh McCormick, Jeffrey Arlt, Kaelin Wagnermarsh, Michael Neidig, Natalie Stott, Rachel Montoya, Valerie Webb, Xaloc Cabanes, Supervisor Kimberly De Serpa

Absent: Antonio Rivas, Jennifer Wells Kaupp

Staff: Marni Sandoval, Amy Rhoades, Jane Batoon-Kurovski

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- I. Roll Call – Quorum present. Meeting called to order at 3:05 p.m. by Chair Xaloc Cabanes.
  - II. Public Comment – 1 addressed the BHAB in the conference room.
  - III. Board Member Announcements
    1. New Transitional Age Youth Member – Natalie Stott
    2. County Strategic Plan – Mike and Jeffrey attended meeting
    3. No BHAB meeting in December
  - IV. Approve October 16, 2025 Minutes  
Motion / Second: Rachel Montoya / Dean Kashino  
Ayes: Kashino, McCormick, Arlt, Wagnermarsh, Neidig, Montoya, Webb, Cabanes, De Serpa  
Nays: None  
Abstain: Stott  
Result: Approved
  - V. Secretary's Report
    - Attendance issue – Jenny missed two consecutive meetings without an excuse, resulting in a vacancy in her seat. Xaloc will reach out to Jenny to ask about her intentions regarding the BHAB.
  - VI. Patient's Rights Report – George Carvalho, Advocate  
October report was provided. George attended the meeting.
    - AB2275 clarification – law that became effective last January. Advocacy Inc is contacted when a person is placed on second 5150 hold and within one week the person must be advised of their right to file writ and have a hearing scheduled on that issue.
    - Advocacy, Inc. and the County have agreed that Advocacy, Inc. will provide services to minors. The first floor of the Hope Forward facility will be designated for individuals placed on a 5855 hold, while the second floor will be for voluntary placements, not subject to a hold. There remains the same concern regarding

long-term care for individuals under a hold. George stated that this facility will not provide 14-day hold service for minors, which could result in a potential increase in the number of 5855 holds, which may lead to an increased number of hearings compared to current levels.

VII. Board of Supervisors Report – Supervisor Kimberly De Serpa

- The entire MHCAN board resigned, and there is currently no one working with the County to resume operations. Two former board members may be willing to return.
- Provided Letter of support for \$100M grant that Janus is seeking, to provide a facility and services in South County. The facility would provide a variety of care in the substance use continuum and serve folks that have medical complications, dual diagnosis issues, medication assisted treatment, services for seniors. The Grant is to construct and start up the facility, but ongoing costs would be covered by the revenue that would be generated from the service delivery from the various payer sources.
- Children’s Crisis Center – continue to hire staff. Anticipate early 2026 opening.

VIII. Behavioral Health Director’s Report – Dr. Marni Sandoval, Behavioral Health Director

1. Launch of Recovery Incentives Program

- It is a 24-week outpatient pilot program for people with stimulant use disorders. Participants are tested twice weekly during weeks 1–12 and weekly during weeks 13–24, followed by 6 months of recovery support. Participants receive cash incentives for each negative stimulant test, earning up to \$599 total. Eligibility requires enrollment in Medi-Cal and participation in a county behavioral health or contracted SUD program.

2. Aspiranet Youth Crisis Center (Hope Forward) Project Update

- Aspiranet is making progress with hiring and has begun training new staff. They are participating in the monthly Crisis Continuum State group. Final facility updates are underway to enhance safety. The main delay is multi-layered licensing for the Crisis Stabilization Unit on the first floor. Importantly, the facility is now designated to receive youth on involuntary holds, allowing diversion from hospitals.
- The second-floor crisis residential treatment program requires multiple licenses from different agencies, including the CA Departments of Social Services, as well as county Medi-Cal certification. These approvals are currently with the state, causing some delay.

3. BHSA Community Planning Process Updates

- A system mapping session was held on the 12th with internal staff to review program crosswalks as funding transitions from MHSA to BHSA, which includes a 5% reduction. This process will help determine which MHSA-funded programs align with BHSA categories, identify gaps, and inform funding decisions going forward.

4. Emergency Food Bank Distribution Support

- On November 4th, Santa Cruz County declared a local emergency due to disruptions in federal CalFresh benefits, prompting emergency food distributions by local food banks. Community members are experiencing significant food insecurity along with anxiety and fear. At the request of Second Harvest Food Bank, Behavioral Health and Clinic staff volunteered at these events to provide trusted support and resources.

- IX. Site Visit – Telecare on 11/04/25. Attendees: Dean, Kaelin, Mike, Jeffrey
- Discussed programs and toured the facility (built 2012–2013). Interior is somewhat dated, and space is limited. The center is now adults-only. They are working to improve through staff development, including de-escalation, violence response, CPR, and expanding bilingual/bicultural care.
  - The PHF does not feel welcoming – more like a locked facility with plexiglass, occasional uniformed guards, and minimal lobby space. Staff are dedicated, professional, and knowledgeable but are working in an underfunded and unsupported system.
  - Some individuals have been there for up to a year due to lack of placement options, though services are provided that allow them to remain.
  - Operational issues include no space for officers to complete paperwork, and separate EHR systems between CSP and PHF requiring manual data entry during transfers, creating a need for better record sharing.
  - There is a shortage of local placements and step-down services, resulting in 60–70% of clients being sent out of county at higher cost. They recommended expanding NAMI and adding skilled nursing facilities in Watsonville to better connect services. Housing was cited as a major driver of recidivism. There are no local services for postpartum depression, requiring referrals to Fremont Hospital.
  - Recommendation for January meeting– propose that each consumer entering high-end services be assigned a peer support specialist at admission. The peer would engage during the residential stay to build rapport and begin service linkages, addressing silos and reducing recidivism caused by gaps in follow-up care.
  - Next site visit in December: 7<sup>th</sup> Avenue
- X. Funding Ad Hoc Committee
- The initial research was on Santa Cruz County Behavioral Health’s capacity and funding needs but felt a need to respond to HRI’s severe cuts to services. Reports that were reviewed were from the Grand Jury Criminal Justice Council, BHSA legislation, Mike Beebe’s report, and the county budget.
  - Slides were shared and after discussion, they decided to wait for the mapping to be completed, and then the ad hoc committee will meet with Marni to review and identify any information that may have been missing in the slides and identify gap areas.
- XI. 2025 Data Notebook
- The Data Notebook has been submitted to the State and will be forwarded to the Board of Supervisors to be included in the Written Correspondence for the December 9, 2025, BOS meeting.
- XII. Adjournment
- Meeting adjourned at 5 p.m.