COUNTY OF SAN LUIS OBISPO HEALTH AGENCY
BEHAVIORAL HEALTH DEPARTMENT

Michael Hill, *Health Agency Director*
Anne Robin, LMFT *Behavioral Health Director*

TO: Wade Horton, Administrative Office

FROM: Michael Hill, Health Agency Director
Anne Robin, LMFT, Behavioral Health Administrator

DATE: May 22, 2018

SUBJECT: Department Response to the 2017-2018 Grand Jury Report "A Look at County Behavioral Health Services: The Time for Improvements is Now"

On May 10, 2018 the Health Agency received a report from the 2017-2018 County Grand Jury addressing issues associated with the provision of behavioral health services in San Luis Obispo County.

The Grand Jury requires the Health Agency/Behavioral Health to respond to Findings F1, F3, F4, F5, F6, F8, F9, F10, and F12; and Recommendations 1-7. The following are the required responses.

FINDINGS

Finding 1: The current number of Mental Health Evaluation Teams is inadequate to serve the County with reasonable response times and effective intervention.

Response: The respondent disagrees partially with the finding. The Department agrees that while additional mobile crisis response capacity in the County would provide efficiencies and faster response times, the current provider does meet the stipulated response times required in the contract.

The Department has sought and will continue to seek additional funding to increase mobile crisis response, including grant and other state or federal funds. Mental Health Services Act (MHSA) funds continue to support a County Health Agency staff member to provide crisis response services to the two hospitals located in the City of San Luis Obispo. This position was maintained after prior grant funding expired. The County was recently awarded a grant for children's triage which will increase crisis response for youth in FY 2018-19. Additionally, a clinician was approved to be added to the San Luis Obispo Police Community Action Team in the summer of 2018, through Mental Health Services Act (MHSA) funding.

Finding 3: There is a wide disparity in the compensation between the State of California psychiatrists, *locum tenens* psychiatrists, and San Luis Obispo County psychiatrists.

Response: The respondent agrees with this finding.

Finding 4: The current organizational structure of the County Health Agency, and specifically, Behavioral Health appears convoluted based upon the maze of funding streams and regulatory requirements.

Response: The respondent partially disagrees with this finding. Funding and regulations related to public behavioral health services are complicated. The organizational structure of the Health Agency and Behavioral Health Department are similar to that of many other California counties.

Finding 5: The consumer satisfaction/perception survey imposed by the State is not relevant to assessing service needs.

Response: The respondent agrees with this finding.

Finding 6: Expansion of supportive and community housing programs would reduce the number of crisis situations.

Response: The respondent agrees with this finding.

Finding 8: Current efforts to reduce stigma are not having the magnitude of impact within our community.

Response: The respondent partially disagrees with this finding**.** Reduction of stigma against behavioral health is a multi-faceted, multi-generational problem. Great strides have been made to educate the public on the benefits of behavioral health treatment.

In the past three years the Department has increased its data collection and reporting to monitor the impact of MHSA stigma reduction programs and activities. Since 2014, over 7,500 individuals have been served, with 3,264 individuals surveyed. The primary stigma reduction campaign (including "SLO the Stigma") and educational events (e.g. "Journey of Hope") have yielded the following individual participant/respondent results, on average:

- 11% increase in empathy
- 17% increase in understanding mental illness challenges
- 17% increase in knowledge of recovery and wellness concepts

Some stigma reduction activities target populations are known to have high levels of stigma. Some results over the past three years include:

- 90% of veterans reported a reduction in stigma association with mental illness after participating in County outreach programs.
- 87% of college students report more understanding of mental health issues and stigma after completing program activities.

Finally, community partners focus on stigma reduction education as part of ongoing services to engage consumers and family members seeking mental health services. The County contracts with Transitions Mental Health Association (TMHA) using MHSA resources to provide a vast menu of education programs. This includes the Family Orientation and Education programs, developed by the National Alliance on Mental Illness (NAMI). On average, TMHA trains over 100 family members annually who, when surveyed, demonstrated a 32% increase in improved responses to the stigma associated with their loved one's mental illness.

Finding 9: Expansion of the system navigator and case manager roles will result in improved comprehensive care.

Response: The respondent agrees with this finding. Funding through MHSA for three case managers for Adult Mental Health Services is included the FY 2018-19 recommended budget. Additional peer designated system navigator positions will be considered by MHSA stakeholders as additional funding becomes available.

Finding 10: A limited number of law enforcement personnel have taken the full 40-hour Crisis Intervention Training (CIT), which is more effective than a shorter course in de-escalating crisis situations involving the mentally ill.

Response: The respondent agrees with this finding. However, the first 40 hour CIT class was just completed, graduating 26 Sheriff's Office law enforcement personnel. The Sheriff and other local law enforcement agencies have goals to train a majority of their personnel, and 6-9 additional classes are being planned. Additionally, the CIT class has been recertified by the California Commission on Peace Officer Standards and Training (POST).

Finding 12: The closure of Vista Del Mar in Ventura County, due to the Thomas Fire, has had a negative impact due to the lack of nearby facilities to treat crisis patients who need longer term care.

Response: The respondent agrees with this finding.

RECOMMENDATIONS

Recommendation 1: Increase financial support to Behavioral Health from the County General Fund to accomplish the following within the next fiscal year. (Note: Some of this expense is reimbursable by Medi-Cal.):

a. **Reduce the wait time to enter the Full-Service Partnership program from months to weeks.**
b. **Add clinicians and case managers to the mental health clinics thereby reducing wait time below the 10-day requirement and reducing the time between maintenance appointments.**
c. **Add full time system navigators to all mental health clinics and encourage Cen-Cal (the local Medi-Cal affiliate) to add them at medical clinics.**
d. **Add two additional Mental Health Evaluation Teams, one in North County and one in South County.**

Response: This recommendation will not be implemented as it is not reasonable. The County will continue to seek additional funding sources to expand mental health services through grants, federal, and state funds.

Three new case managers for the Adult Mental Health services division are included in the FY 2018-19 recommended budget, with funding from MHSA. The County recently received a Children's Triage Grant which will expand crisis response for youth in FY 2018-19. A Clinician was approved to be added to the San Luis Obispo Police Community Action Team for outreach to homeless and crisis response, and will start during the summer of 2018. The Adult Full Service Partnership will increase its open caseload to 40 slots at all times, and additional funding for "service slots" will be evaluated through the MHSA stakeholder process

Recommendation 2: Increase funding and support for the community and supportive housing programs.

Response: This recommendation will not be implemented at this time due to fiscal constraints. However, the County will continue to seek additional funding to expand housing supports through grants, and through other Federal and State funds. Recently, the County allocated grant funding to Transitions Mental Health Association to develop the Bishop Street Studios project, which will result in 34 one-person units of affordable housing for adults living with mental illness. The Department will continue to partner with agencies in the community whose main focus is to build, rehabilitate, or acquire housing.

Recommendation 3: Improve efforts to reduce stigma through County sponsored educational programs and public service announcements.

Response: This recommendation has been implemented. There are a number of State MHSA funded media materials which have included public service announcements. The Department is also implementing a "Tell our Story" project to send personal stories of perseverance, resilience, and recovery to local media outlets to encourage accurate portrayals of individuals and their families impacted by mental illness and addiction.

In the past three years the Department has increased its data collection and reporting to monitor the impact of MHSA stigma reduction programs and activities. Since 2014, over 7,500 individuals have been served, with

3,264 individuals surveyed. The primary stigma reduction campaign (including "SLO the Stigma") and educational events (e.g. "Journey of Hope") have yielded the following individual participant/respondent results, on average:

- 11% increase in empathy
- 17% increase in understanding mental illness challenges
- 17% increase in knowledge of recovery and wellness concepts

Some stigma reduction activities target populations are known to have high levels of stigma. Some results over the past three years include:

- 90% of veterans reported a reduction in stigma association with mental illness after participating in County outreach programs.
- 87% of college students report more understanding of mental health issues and stigma after completing program activities.

Finally, community partners focus on stigma reduction education as part of ongoing services to engage consumers and family members seeking mental health services. The County contracts with Transitions Mental Health Association (TMHA) using MHSA resources to provide a vast menu of education programs. This includes the Family Orientation and Education programs, developed by the National Alliance on Mental Illness (NAMI). On average, TMHA trains over 100 family members who, when surveyed, demonstrated a 32% increase in improved responses to the stigma associated with their loved one's mental illness.

Recommendation 4: Combine drug and alcohol treatment with mental health treatment, having all clinicians cross-trained to manage dual-diagnosis patients.

Response: This recommendation will not be implemented because it is not warranted. The County's contracts with the State Department of Health Care Services are very prescriptive for the provision, documentation, and billing for mental health and substance use disorder services. Professional certification and licensure for addiction treatment and for mental health treatment are also specialized and require concentration in specific areas of practice. Clients served within behavioral health may present with needs for co-occurring treatment. Other clients may not be impacted by either substance use disorder or serious mental illness and would not require co-occurring treatment. However, the respondent has increased the number of staff who have training in both mental health and substance use disorder treatment and offers trainings in both specialties to all treatment staff, including contract agency staff.

Recommendation 5: Reorganize the agency to concentrate on the complete behavioral health treatment process.

Response: This recommendation will not be implemented because it is not reasonable. The organization of the Agency is not a factor on the ability to provide appropriate treatment services. As reflected in Recommendation 4, the County is obligated to provide specific treatment services based on diagnosis and functional needs to clients through highly regulated and monitored processes.

Recommendation 6: Use innovation and incentives, such as County backed bonds or tax breaks to support the building of private psychiatric and substance abuse facilities within the County.

Response: This recommendation will not be implemented as written. However, the County continuously seeks methods and funding to enhance behavioral health services to the public.

Recommendation 7: Adopt more aggressive and innovative recruitment strategies for key positions such as Psychiatrists, Nurses, and Nurse Practitioners.

Response: This recommendation has been implemented.