

Director's Report

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DEPARTMENT AND COUNTY NEWS

Hail & Farewell: Mental Health Commission Chair Retires and New Chair Named:

Longtime family advocate Jan Winter has been named the new Chair of the Santa Barbara County Mental Health Commission and she assumed leadership on July 1. We welcome her in her new role. We also extend our deepest appreciation to outgoing Chair Mike Gorodezky, MSW, Ph.D., for his outstanding service to the Commission and community. He made great contributions to the focus and functioning of the Commission during his membership and time as Chair, particularly encouraging the use of data to guide review of departmental accomplishments. Our thanks to Mike!

Behavioral Wellness HR Manager Hired: After many months without a dedicated, full-time HR Manager for our department, and following an extensive search, we are delighted to welcome Kathy Acosta-Smith to the Department of Behavioral Wellness as Human Resources Program Manager. Kathy was selected through a competitive recruitment process. Kathy has more than 20 years of experience in the management of human resources departments. Originally from Boston Massachusetts, Kathy is fluent in Spanish after living in both Ecuador and Venezuela, and she attended University City High School in San Diego. She earned a B.A. in Psychology from University of Houston in Texas and a Master of Arts in Human Resources Management from National University in San Diego. She is delighted to move to Santa Barbara with her son, who is starting a doctoral program in Anthropology at UCSB in the fall.

Kathy has served as the Director of Human Resources for Kedren, an Acute Psychiatric Hospital and Community Health Center in Los Angeles, Director of Human Resources for Executive Human Resources Management based in Los Angeles and Riverside and Director of Human Resources for the Printing Industry Association of Southern California in Los Angeles.

Kathy brings an in-depth knowledge of Human Resources trends and insights that equip her to focus on improved retention and turnover, staff recruitment, labor relations, and other key human resources concerns. We are optimistic that bringing Kathy on board will boost our efforts to fully staff our HR department and increase the speed and efficiency of filling critical department vacancies.

Preparation for AOT Pilot Moves Forward: As noted in last month's *Director's Report*, a 10-person feasibility pilot program for Assisted Outpatient Treatment (AOT) was authorized by the Board of Supervisors in May. The program seeks to improve the quality of life of participants, support them on their path to recovery and wellness, prevent decompensating of symptoms, and prevent incarceration and cycling through acute services (e.g., psychiatric hospitalization).

The goals are to (a) identify persons with serious mental illness who are not engaged in treatment, (b) determine if there is substantial risk for deterioration and/or involuntary detention (under WIC § 5150) that could be mitigated by provision of appropriate services and (c) petition the court to order participation in such services if the individual is not able to be successfully engaged by other means.

In preparation for this small pilot program's launch, anticipated for January 2017, Behavioral Wellness has convened a community stakeholder workgroup composed of representatives from parent and peer organizations, the Latino Advisory Committee and community-based organizations (CBOs) currently operating Assertive Community Treatment (ACT) programs. This workgroup will help draft practical and philosophical parameters of the AOT program that will be presented to a larger stakeholder group of system partners (courts, law enforcement etc.) for feedback.

Forensic Action Team Focuses on Key Issues: The Forensic Action Team recently met to review accomplishments and set new goals following a long hiatus. As detailed below, many of the original goals have been met and are continuing to be monitored for improvement. Action Team members collaboratively identified new goals that will be discussed at the next meeting in September. Interested staff, system partners, and community members are encouraged to attend and participate.

The completed goals are:

- ✓ *Hire a Forensic Manager to provide leadership to forensic teams and support to the Forensic Action Team.* Stacy McCrory, MFT, was hired to oversee Juvenile Justice Mental Health Services (JJMHS), Resiliency Interventions for Sexual Exploitation (RISE), the Justice Alliance and AB-109 – all countywide programs.
- ✓ *Re-initiate the diversion of individuals found Incompetent to Stand Trial (IST) from hospitals or jail to community-based settings for competency restoration.* The numbers of IST clients at any given time varies. We have established outpatient restoration programs combined with safe and stable housing through the Mental Wellness Center and have seen positive impact on reducing hospitalizations as a result. However, we have experienced a relatively high rate in the past year. We have identified some measures to help reduce the number of IST clients and appreciate all efforts made to collaborate on early treatment interventions.
- ✓ *Review the operations of the AB-109 program and ensure that clients receive appropriate mental health and substance abuse treatment.* The department assigned a clinician to conduct screenings and assessments, identify treatment needs and provide linkage to appropriate services. AB-109 programs are currently being assessed by a consultant, and we look forward to reviewing their feedback.
- ✓ *Improve the tracking of incarcerated people served by Behavioral Wellness.* We have developed an internal tracking system to further improve our notification process and are continuing to improve this process. Justice Alliance is visiting clients in jail and communicating daily with Corizon Health, the provider of jail mental health services, to coordinate early treatment interventions and linkage to aftercare.

PHF Medicare Survey Completed: From June 20-27, Medicare reviewers surveyed the Psychiatric Health Facility (PHF). This routine survey is conducted every five years and evaluates all aspects of patient care based on Medicare standards. Areas for improvement resulting from this survey were physical plant improvements and processes with the contracted pharmacy. This review found far fewer areas for improvement compared to the Medicare audit in 2011.

The PHF staff and various divisions within Behavioral Wellness, Ernest Thomas, Behavioral Wellness Facilities Manager and his team and Quality Care Management responded quickly to this review and provided invaluable support to a number of projects. County HR and Behavioral Wellness HR also provided much appreciated, essential support.

The PHF thanks staff members for continuing to provide excellent patient care during the survey. The Department appreciates the following staff members for going above and beyond to facilitate seamless interactions with the reviewers and ensuring continuity of care: Mark Lawler, LPT, Team Supervisor and PHF Safety Officer, Mark Martinez, Recovery Assistant and Carmen Leva, LPT. The PHF staff recognizes Ernest Thomas and Carlos Lopez with Behavioral Wellness Facility Management and Joseph Padilla Jr. from General Services for their prompt and professional support. We also commend Charlotte Balzer-Gott, R.N. for her primary role in leading the PHF through the audit.

New Online Training Platform Launched: One of the commitments of the Department of Behavioral Wellness is to provide employees and community partners with the resources they need to do their jobs to the highest standards. On July 5th, Behavioral Wellness launched its new online training platforms, Relias Portal and Relias Academy. Staff members will now use the Relias websites to browse and sign up for online and classroom trainings. In addition to the trainings that Behavioral Wellness offers, staff will also have access to hundreds of other professional development and online clinical trainings. One of the goals of the Training Division is to offer staff and community-based organizations (CBOs) the opportunity to build skills that help them succeed. Relias trainings will help achieve this goal. In addition, Relias also provides excellent tools for tracking compliance and record-keeping. For more information and to download the Relias user guides, please visit the [training web page](#).

Department Reaches 100% Compliance with Yearly Training Requirements: According to Compliance Chief Celeste Andersen, 99.996% of staff (442 people) completed mandatory training before the June 30th deadline, and the one civil service staff member who did not complete the training on time was able to complete it by July 1. Staff members were required to complete training in the areas of Code of Conduct, Cultural Competence and Consumer and Family Culture. Ensuring that staff complied with the Department's mandatory Training Policy & Procedure was one area that the Compliance Committee had elected to monitor as part of its yearly Audit Plan.

Celeste observed that once staff members are aware of the Department's expectations, they want to do the right thing and get the work done. Special thanks goes to Talia Lozipone, Training Coordinator, who sent out regular reminders to staff, assisted with log-in issues, and other technical difficulties, while simultaneously preparing for the department's July 5th launch of the new Relias Systems training platform. In addition, Tina Wooton, Consumer Empowerment Manager, made the tests available in alternative formats for those not comfortable with online testing. Silvia Perez, Peer Recovery Specialist, assisted with translation of the tests for some staff.

Carpinteria Children’s Pilot Program Deemed Valuable Community Resource: In the fall of 2015, Behavioral Wellness initiated an outreach program to provide screening, assessment and treatment services in Carpinteria. This program began as a pilot to assess the volume of need for Carpinteria children and families who may have specialty mental health service needs. Now, nearly a year in operation, those who provide the services say they are of great value to the community. Above all, screening and assessment services are critical.

Most children are determined that they do not meet the criteria for specialty mental health services, but may be referred to lower levels of care and services through “warm hand-offs.” A small number of children who meet criteria for specialty mental health services receive weekly counseling through the program. According to Sara Bazan, MFT, Santa Barbara Children’s Team Supervisor for Behavioral Wellness, “having a presence in Carpinteria on a consistent basis, with the ability to offer screening, has been very valuable.”

The Carpinteria Children’s Project Screening and Assessment occurs in the main school between 10:30 am – 4:30 pm on the 2nd and 4th Thursday of each month. Every Tuesday clinical services are available by appointment in the main school between 3 pm and 7 pm.

Continuum of Care Planning Meetings Launched: The Continuum of Care Reform (CCR) seeks to improve California’s child welfare system by using comprehensive initial child assessments, expanding the use of child and family teams (CFT), increasing the availability of services and supports in home-based family care settings, reducing the use of congregate care placement settings and creating faster paths to permanency resulting in shorter durations of involvement in the child welfare and juvenile justice systems. Following a stakeholder process, the California Department of Social Services (CDSS) worked in collaboration with other state departments, county welfare and probation departments, county behavioral health plans, FFAs, group homes, children, parent partners, advocates and others to develop recommendations for the implementation of the CCR. A joint meeting of county Mental Health and Social Service directors was held July 13th in Sacramento.

Both the Behavioral Wellness Implementation Team and the Joint (DSS, Probation and Behavioral Wellness) Implementation Team have begun working on a county action plan for implementation. These team meetings will continue and then likely transition to steering committees that meet less frequently. The required target date for implementation is January of 2017. DSS is actively seeking additional foster families to provide services needed for the upcoming changes.

STATEWIDE NEWS

“No Place Like Home” Legislation Passed: On June 30, the California Legislature gave final approval to Assembly Bill 1618, the “No Place Like Home” initiative, a first-of-its kind plan to assist local communities in preventing and addressing homelessness. This proposal provides \$2 billion for the construction and rehabilitation of permanent supportive housing for homeless individuals with mental illness. The “No Place Like Home” initiative takes a “housing first” approach, which has been used successfully in other states and is considered best practice by many homeless advocates and social service experts.

This legislation re-purposes funding from designated income tax revenues from Proposition 63 (the Mental Health Services Act or MHSA), and leverages billions of additional dollars from other local, state, and federal agencies. The re-purposing of Prop 63 funds will impact counties proportionally based on their MHSA allocation. Counties will compete for housing funds based on county size, but are not guaranteed funding through this mechanism. These funds will not be fully diverted until the state has awarded funds in response to applications, so the local impact of fund diversion is not expected to impact counties until housing projects have been initiated.

Santa Barbara anticipates the local impact to reach \$1.4 million annually based on state projections. The Department must take this impact into consideration during the MHSA planning process. Locally, this initiative allows stakeholders interested in increasing housing for homeless to begin to organize efforts to develop collaborative proposals for this funding.

California Peer Certification SB 614 (Leno) Stalled: Senate Bill 614 would have required the Department of Health Care Services (DHCS) to establish a program for certifying peer and family support specialists (PFSS), to collaborate with interested stakeholders and to allow DHCS to seek any federal waivers or state plan amendments to implement the certification. The legislation was intended to authorize a statewide peer, parent, transition-age youth and family support specialist certification program, as a part of the state's comprehensive mental health and substance use disorder delivery system under Medi-Cal. The bill was sponsored by state senator Mark Leno (D-San Francisco) based on advocacy of the California Behavioral Health Directors Association (CBHDA).

SB 614 would have included four certification categories for peer support specialists: adults, transition-age youth, family and parent. The certification program's components would have defined responsibilities and practice guidelines, determined curriculum and core competencies, specified training and continuing education requirements and established a code of ethics and certification revocation process. The bill would have also required an applicant for the certification as a peer, parent, transition-age, and family support specialist to meet specific training requirements.

Unfortunately, the State Department of Health Care Services made a number of amendments to the bill that significantly altered the scope and impact of this legislation. After consulting with multiple concerned community stakeholder groups, CBHDA withdrew the bill rather than move forward with this amended legislation. Despite this setback, CBHDA, as well as all counties and stakeholders throughout the state, look forward to the next opportunity to see passage of appropriate statewide peer certification.

NATIONAL NEWS

President Expected to Sign New Opioid Legislation: On July 13 the Senate approved a bill to address the nation's opioid crisis, sending to the President's desk what the *New York Times* describes as "the most sweeping drug legislation in years in a rare instance of consensus in Congress." President Obama is believed likely to sign the bill into law.

According to the *Times*, the Comprehensive Addiction and Recovery Act will "strengthen prevention, treatment and recovery efforts, largely by empowering medical professionals and law enforcement officials

with more tools to help drug addicts. It would also expand access to a drug that emergency medical workers could use to help reverse overdoses and improve treatment for the incarcerated.”

The bill designates about \$720 million over five years in federal grants to state and local governments to try new approaches to preventing and treating opioid addiction. However, the measure itself does not include funding for those grants, which will have to be authorized by future congressional action. More information [is here](#).

July is National Minority Mental Health Awareness Month: According to the Office of Minority Health (OMH), minorities are less likely to receive diagnosis and treatment for their mental illness and have less access to quality mental health care. In May 2008, the US House of Representatives designated July as Bebe Moore Campbell National Minority Mental Health Awareness Month to enhance public awareness of mental illness and mental illness among minorities. More information is [here](#).

CIBHS Response to the Orlando Tragedy: Sandra Naylor Goodwin, PhD, MSW, President and CEO of the California Institute of Behavioral Health Solutions (CIBHS), issued this statement following the tragic shooting in Orlando on June 12: “Early Sunday morning, each of us woke up to the news of the worst mass shooting in our country’s history. The senseless, inexplicable acts of violence of one man against the predominantly Latino LGBTQ men and women attending the nightclub Saturday night have forever changed the lives of all of us.

“Our hearts go out to those who lost friends and loved ones and are likely dealing with the intense pain and shock that can come from such a sudden tragic loss. We pray for the speedy recovery of the wounded. And we fervently hope for healing for all who are suffering from the trauma this incident has caused. While there is still much we don’t know and many questions to answer in the coming days and weeks, one thing is very clear: We are stronger together. We are stronger when we strive for healing and for a better tomorrow. This ruthless attack demonstrates why we must continue our commitment to promoting equity, understanding, and wellness and wellbeing for all.”

Helpful resources: 1) A web page within SAMHSA for the Disaster Distress Hotline: <http://store.samhsa.gov/shin/content//PEP12-DDHBRO/PEP12-DDHBRO.pdf> 2) A SAMHSA webpage dedicated to the aftermath of mass shootings: <http://www.samhsa.gov/find-help/disaster-distress-helpline/disaster-types/mass-violence>

New Resource on Achieving Healthcare Parity Published: The Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act, or “federal parity law,” forbids health insurers from discriminating against people with substance use or mental disorders. On June 30 the Legal Action Center released [Health Insurance for Addiction and Mental Health Care: A Guide to the Federal Parity Law](#). This free, downloadable guide explains patients’ and providers’ rights to insurance coverage for substance use and mental disorders.

Included are a summary of the federal parity law, a list of “red flags,” or signs that an insurer might be violating the law, a tool to help determine what type of health plan a beneficiary has, how to obtain health insurance coverage for substance use or mental health care. Sample downloadable appeals, letters, and complaints are also provided.

The federal parity guide is an invaluable resource for beneficiaries, family members, patient advocates and clinicians seeking to help individuals access treatment for mental health conditions and/or substance use disorders.

SYSTEMS CHANGE CALENDAR

- **July 21, 2016 - Santa Barbara Children's Regional Partnership Meeting**, 1:30 - 2:30 pm, Children's Clinic Room 127. Questions: Crystal Ramirez, cramirez@sbcbswell.org; 884-6887.
- **July 27, 2016 - Change Agent Meeting**, 9 - 11 am, Santa Barbara Children's Clinic Room 127m Lompoc ACT conference room, Santa Maria Annex via videoconferencing. Crystal Ramirez, cramirez@co.santa-barbara.ca.us
- **July 28, 2016 - Children's System of Care Action Team**, 10:30 am - 12 noon, SELPA Conference Room, 240 East Highway 246, Suite 200, Buellton. Questions: Ana Vicuña, avicuna@sbcbswell.org; 698-0385.
- **July 28, 2016 -Steering Committee**, 1:30 - 4:00 pm, Santa Barbara and Santa Maria Board of Supervisors' Conference Rooms. Questions: Kathie Cisek, kcisek@sbcbswell.org; 681-4773.
- **August 1, 2016 – Peer Action Team**, 10 – 11 am, MHSA Conference Room, Santa Maria Annex and Lompoc ACT Conference Room via videoconference. Details: Tina Wooton, twooton@sbcbswell.org; 681-5323.
- **August 10, 2016 – Housing (HEART) Action Team**, Santa Barbara Behavioral Wellness Bldg. 3, Conference Room 216, Santa Maria Annex via videoconference. Questions: Laura Zeitz, lazeitz@sbcbswell.org; 722-0136
- **August 12, 2016 – Cultural Competency Action Team**, MHSA Conference Room, Santa Maria Annex via videoconference. Questions: Yaneris Muñoz, ymuniz@sbcbswell.org, 884-1660.
- **August 15, 2016 – Children's Regional Partnership Meeting**, Santa Maria, 10 – 11 am. Foster Road conference room. Amanda Pyper, MFT, 981-6510, ampyper@sbcbswell.org.
- **August 15, 2016 – Adult Regional Partnership Meeting**, Santa Maria, 11 am – 12 noon. Foster Road conference room. Amanda Pyper, MFT, 981-6510, ampyper@sbcbswell.org.
- **August 18, 2016 – Children's Regional Partnership Meeting**. 1:30 – 2:30 pm. Santa Barbara Children's Clinic Room 119. Crystal Ramirez, cramirez@sbcbswell.org; 884-6887.
- **August 18, 2016 –Adult Regional Partnership Meeting**. 2:30 – 4:00 pm. Santa Barbara Children's Clinic Room 119. Crystal Ramirez, cramirez@sbcbswell.org; 884-6887.
- **August 24, 2016 – Change Agents**, 9 – 11 am, Santa Barbara Children's Conference Room 127, Lompoc ACT Conference Room, Santa Maria Annex via videoconference. Kathie Cisek, kcisek@sbcbswell.org, 681-4773.
- **August 25, 2016 – Children's System of Care**, 10:30 am – 12 noon. SELPA Conference Room, Buellton, Ana Vicuña, avicuna@sbcbswell.org; 698-0385.