

# Director's Report

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## DEPARTMENT AND COUNTY NEWS

**Santa Maria Adult Outpatient Clinic Successfully Graduates DBT Group Participants:** The Santa Maria Adult Clinic team completed the first offered 6 month Dialectical Behavioral Therapy (DBT) Skills Training Course resulting in the graduation of 5 clients on June 26. This course required weekly individual therapy on top of weekly group attendance. Thanks and recognition to the clinicians who successfully facilitated this group process, **Alisa Lopez, ASW** and **Nikki Esquivel, IMF**. Geoffrey Bernard, MFT, Team Supervisor shares “since the group ended, we continue to see the clients using the skills learned through the group and we have seen a reduction in crisis service contacts with graduating participants.”

“All clients reported the DBT group being very helpful in learning how to strengthen their relationships, set boundaries and in learning healthy alternatives to managing overwhelming emotions”, states group facilitator Alisa Lopez, ASW. Ms. Lopez continues to share, “The group was a success and group members found a lot of support and acceptance in participation. It was great to see the clients recognize their own positive growth and confidence improve.”

The group is expected to take place next in October. “We hope to offer the next DBT group uniquely to men,” shares Mr. Bernard.

**Lompoc Children and TAY Teams Celebrate Success:** The Lompoc Children and TAY team set a goal of completing and finalizing all their documentation before the end of the 2017-2018 fiscal year. **Thelma Macias-Guerra**, LMFT and Team Supervisor of the Lompoc Childrens and TAY clinic shares of this success, “They did it! They encouraged, supported, and pushed each other to complete every note, assessment, and document on GATEWAY, all while their supervisor was on vacation.” This huge accomplishment will be honored and celebrated with a Mexican theme party at the home of The Guerra’s.

**Improvements in Access to Care:** The Department of Health Care Services is increasing their focus on Access to Care within County Mental Health Plans, and appropriately so. It is important for service systems to offer the right continuum of services, but all the more important to assure that those in need of these services are able to access them in a timely manner. Behavioral Wellness is proud say that we are showing tangible improvement in this area, as is demonstrated by our recently completed timeliness self-assessment prepared for the Department of Health Care Services (DHCS) annual review. Each year, DHCS contracts with an external quality review organization (EQRO) to facilitate this annual site visit, which occurred in May in Santa Barbara County.

The Quality Improvement Committee did an overhaul of data gathering and reporting for FY 18-19. Many changes were made and the data is now consistent with CalEQRO metrics and recent changes in regulatory information notices. The Quality Improvement Committee is expanding its scope and membership by integrating Alcohol and Drug Programs data. We look forward to continuing the focus of improving our Access to Care throughout our system including Access to Care for our Alcohol and Drug programs as well as our Mental Health system.

## Changes within Behavioral Wellness Crisis Services:

### Adult Crisis Services

Countywide CARES and Triage services are now being referred to as “Crisis Services” (further referenced by region of North, West or South). But the changes to this system go far beyond the name change alone. As example, Santa Barbara Mobile Crisis and Crisis Triage programs merged and moved to their new location at 315 Camino del Remedio. This new office is located just below the Psychiatric Health Facility (PHF) and across the driveway from the Crisis Stabilization Unit (CSU). This location will allow for greater integration between the Crisis Services staff and the PHF and CSU.

Sheriff Brown, Undersheriff Melekian and SBPD Chief Luhnnow toured the new “crisis hub” and learned about the services offered there. Crisis Services and CSU staff worked to develop a protocol for law enforcement drop-offs at the hub. During business hours individuals in crisis who do not appear to meet criteria for a 5150 can be brought to South County Crisis Services offices for screening and evaluation. Individuals will be able to receive immediate evaluation to determine need for in-patient hospitalization vs. stabilization in the CSU or more rapid stabilization and return to the community with ongoing services and linkage to treatment by the Crisis Services team members. During weekends and afterhours individuals in crisis who do not appear to be meeting criteria for a 5150 can be brought directly to the CSU where they can be screened for CSU admission.

### Child Crisis Services

SB Behavioral Wellness was awarded a Children’s Triage Grant through the MHSOAC. Unfortunately due to amendments in the Governor’s budget effecting MHSO funding the grant award has been placed on hold at this time. If the program does eventually receive MHSO funding, we intend to use the funds to place Practitioners and Parent Partners in each of the 3 regional Emergency Departments to work with children who are on 5585 holds in the ED and awaiting placement in an LPS facility. Due to lack of LPS beds for children and youth, wait times for placement can be long, causing kids to “board” in the ED’s for days. The goal of the Children’s Triage Grant staff is to begin MH treatment with these youth right away and hopefully rescind holds and prevent need for placement in an LPS hospital. In addition, Children’s Triage grant staff will provide pro-active MH services

**July is Minority Mental Health Month:** According to the Mental Health Association in Californian, even though most of the things we need to be mentally healthy are universal — like safe housing, supportive relationships and good health care — a one-size-fits-all approach to mental health care just isn’t enough.

We know that people from ethnic and cultural communities are, in general, less likely to receive necessary mental health services and those who are in treatment often receive poorer-quality care. Many factors likely play a role in the difference seen in system and clinical outcomes which include socioeconomic

differences as well as the fear of experiencing a double burden of discrimination based on one's race and mental health condition. Those who do seek help also may have difficulty obtaining mental health care from professionals who speak their language and/or understand and respect their cultural values.



*What is being done about it?* New approaches to healing and supporting people in times of distress, as well as changing conversations about mental health, have been developed by California's many ethnic and cultural communities. In addition, leaders from five of these groups (outlined by the California Reducing Disparities Project) have created resources to help change attitudes and improve mental health outcomes in a way that is meaningful to each community.

**Mixtec Culture Training Now Available on Relias:** The Behavioral Wellness Cultural Competency & Diversity Action Team is pleased to announce the debut of a new online training on Relias. The **Mixtec Culture & Mental Health** training was created by the Department in response to requests for information on how to better serve this local under-served population. The training examines ways to adapt your treatment to suit the cultural needs of a Mixteco-speaking client.

This training is now available for **free in Relias Portal and Relias Academy**. To register, please follow the instructions below

#### **FOR PROVIDERS & PARTNER ORGANIZATIONS**

To find the course and register, follow these steps:

1. Click this direct course link: [CLICK HERE](#)
2. Alternately, enter "Mixtec" in the search bar on the top left. Click the magnifying glass symbol to search.
3. Click the green **Add to Cart** button below. **The training is free.**
4. On the bottom right, click the green **Checkout** button.
5. Log in using your email and password.
6. If you have not yet created an account, register by entering your name and email, creating a password, and then entering your billing address.

#### **FOR BEHAVIORAL WELLNESS STAFF**

To find the course and register, follow these steps:

1. Log in to Relias at the following link: [CLICK HERE](#)
2. Make sure that you're on the "My Learning" page, with "My Learning" in black on the top left.
3. Click the green **+ Browse Elective Courses** button on the top left.
4. Enter "Mixtec" in the search bar on the top left. Click the magnifying glass symbol to search.
5. The training should appear. Click **Enroll**.

If you encounter any difficulties, please contact Yaneris Muñiz ([ymuniz@co.santa-barbara.ca.us](mailto:ymuniz@co.santa-barbara.ca.us)) for assistance.

## NATIONAL AND STATE NEWS

**Transforming Our Shock into Action - Alarming Suicide Rates:** The National Association of County Mental Health Directors (NACBHD) published a recent article titled, “Transforming our Shock into Action,” recognizing the very tragic deaths of fashion designer Kate Spade and international chef Anthony Bourdain. The author goes on to state that the national suicide rate is skyrocketing, and now exceeds the annual number of deaths due to car accidents. Further content of this article follows below.

At almost the same time, the CDC released [alarming new suicide statistics](#) that confirm our concerns. This new information shows that suicide rates have increased by more than a shocking 25% from 1999 to 2016. In the latter year, nearly 45,000 lives were lost to suicide. Further, suicide rates went up more than 30% in more than half of the states since 1999, and more than half of those who died by suicide did not have a known mental health condition.

It is very well known that depression is a major cause of suicide. Common factors in depression include loss of a relationship, job or housing, personal financial problems, poor academic performance, social isolation, failure to meet one’s own expectations, or many other factors. Less well known is the fact that opioid use can lead to depression in as little as 30 days. Hence, persons who use opioids frequently are at high risk of suicide. A similar linkage can occur for excessive alcohol use.

Read more at: <https://www.behavioral.net/blogs/ron-manderscheid/prescription-drug-abuse/transform-our-shock-action>

**California Council of Community Behavioral Health Agencies (CBHA) Succeeds at Extending WET Programs for 2018-2019:** The California Council of Community Behavioral Health Agencies (CBHA), representing over 75 behavioral health organizations across the state, led a successful advocacy campaign to extend the Workforce, Education and Training (WET) funding for 2018-19. Last month, the Budget Conference Committee voted to approve the extension of the WET funding and appropriate \$10 million of MHS Administrative funds for: loan repayment, stipends, residency slots, and recruitment and retention efforts for professionals working in the public mental health system.

Thanks are extended to Assemblymember Kansen Chu who [championed the effort](#) and garnered the support of fellow Assemblymembers: Anna Caballero, Chris Holden, Ash Kalra, Evan Low, Freddie Rodriguez and Marc Steinorth. This victory could not have been achieved without the support of CBHA’s member agencies and the [23 associations who signed our letter](#) and advocated for this important budget proposal.

**The California Health Care Foundation (CHCF) Provides Updates on Opioid Safety in California:** In May, CHCF reported preliminary numbers released from the California Department of Public Health (CDPH). But preliminary numbers are exactly that: preliminary. CDPH further reviewed the numbers and found that fentanyl deaths in 2017 were up 57% — not 300% as had been reported. While not as shocking a statistic, 57% is still a sobering increase. CHCF continues to step up our efforts to build a system of care in California where treatment is easier to get than street drugs.

There is some good news. Per CHCF, total opioid deaths dropped slightly statewide. Alameda County recently reported that its overdose deaths had dropped by half. Officials credited the coordinated work of the opioid safety coalition that led to a countywide decline in prescribing and greater access to buprenorphine. Wide availability of naloxone has meant 300 lives have been saved from opioid overdose. The statistics broken out by county, including those of Santa Barbara county can be viewed [here](#).

### [Naloxone Policy Updates](#)

#### [Standing Order for Naloxone](#)

Karen Smith, MD, MPH, director of the California Department of Public Health, has issued a standing order for naloxone. This order serves as a prescription for all community organizations — such as needle exchange programs or libraries — that wish to dispense naloxone. [Learn more and complete a short application](#).

#### [Updated Naloxone Guide for Community Pharmacists](#)

This comprehensive guide covers appropriate use of opioids, explanations of buprenorphine and other FDA-approved medication-assisted treatments, and background on naloxone. Any community pharmacist may furnish naloxone after following a few steps outlined in the guide. This update includes the important information that Ordering, Referring, and Prescribing (ORP) registration is no longer necessary to bill Medi-Cal for naloxone. Only a National Provider Identifier (NPI) is required. [Read the updated guide \(PDF\)](#).

### [Upcoming Webinars](#)

#### [Opioids: Current Status of the Crisis, Response, and Future Direction](#)

This webinar from the American Dental Association will address opioid prescribing trends and steps being taken to address the opioid crisis. Eligible professionals may receive one hour of continuing education credit. Thursday, July 19, 12–1:00 PM (PT). [Register now](#).

#### [Resource Catalog for Health Plans](#)

Smart Care California and CHCF recently published an online [Opioid Safety Resource Catalog](#) was designed to allow clinics, provider groups, and health plans connect with firms and consultants who can provide expert guidance on MAT integration, academic detailing, and health plan opioid safety initiatives.

## [SYSTEMS CHANGE CALENDAR](#)

- **Behavioral Wellness Commission:** The Behavioral Wellness Commission meets on the third Wednesday of every month from 3:00pm – 5:00pm. Video conferencing is available at the Santa Barbara Children’s Clinic large conference room and the Santa Maria Clinic Conference Room. Questions: Karen Campos, [kcampos@co.santa-barbara.ca.us](mailto:kcampos@co.santa-barbara.ca.us)
- **Change Agent Meeting:** Change agents meet the fourth Wednesday of every month 9 – 11 am except during quarterly in-person meetings, which are 9 am – 12 noon. Video conferencing is available at the Santa Barbara Children’s Clinic, Small conference room; Lompoc Conference Room, ACT, upstairs, 401 E. Cypress and Large conference room, 500 West Foster Road, Santa Maria. Questions: Nathan Post, [npost@sbcbswell.org](mailto:npost@sbcbswell.org).

- **Lompoc Regional Partnership Meeting:** Meetings occur every other month on the third Tuesday. The next meeting is November 21, 3:30-4:30 at 301 N. R Street. Questions: Nicole Becker, [nbecker@co.santa-barbara.ca.us](mailto:nbecker@co.santa-barbara.ca.us).
- **Santa Barbara Adult Regional Partnership:** meets every 3rd Monday of the month from 10:00 am – 11:00 am at the Santa Barbara Children’s Clinic, large conference room. Questions: Veronica Heinzelmann, [vheinzelmann@co.santa-barbara.ca.us](mailto:vheinzelmann@co.santa-barbara.ca.us).
- **Santa Barbara Children’s Regional Partnership:** 3th Thursday of the month from 2:00 pm – 3:00 pm at the Santa Barbara Children’s Clinic, large conference room. Questions: Veronica Heinzelmann, [vheinzelmann@co.santa-barbara.ca.us](mailto:vheinzelmann@co.santa-barbara.ca.us).
- **Santa Maria Children’s Regional Partnership Meeting** is held every 3<sup>rd</sup> Monday of the month at 10 am in the large meeting room at the Foster Road Clinic. Questions: Arlene Altobelli, [aaltobe@co.santa-barbara.ca.us](mailto:aaltobe@co.santa-barbara.ca.us)
- **Santa Maria Adult Regional Partnership** occurs every 3rd Monday of the month at 11 am in the large meeting room at the Foster Road Clinic. Questions: Elodie Patarias, [epatari@co.santa-barbara.ca.us](mailto:epatari@co.santa-barbara.ca.us) or Geoff Bernard, [gbernard@co.santa-barbara.ca.us](mailto:gbernard@co.santa-barbara.ca.us)
- **The Housing, Empowerment, Action and Recovery Team (HEART)** meets the second Wednesday of every other month, 1:00-2:30 p.m. Locations: Behavioral Wellness Conference Room 261 and Santa Maria Annex via videoconference. Contact Laura Zeitz, [lazeitz@sbcbswell.org](mailto:lazeitz@sbcbswell.org).
- **The Cultural Competency and Diversity Action Team (CCDAT)** meets the second Friday of each month, 9:30-11:00 am, Locations: Santa Barbara Children’s Clinic Large Conference Room 119, Lompoc B St.
- **The Peer Action Team** meets the second Thursday of the Month from 2 – 4:00 pm. Locations: Behavioral Wellness Santa Barbara Conference Room 261, Lompoc Children’s New Port Room the Santa Maria Annex Room via videoconference. Contact Tina Wooton, [twooton@sbcbswell.org](mailto:twooton@sbcbswell.org), regarding the location.
- **The Crisis Action Team** meets the second Thursday of the month, 2:30 – 4:00 pm, Santa Barbara Children’s large conference room 119. Contact John Winckler, [jwinckler@sbcbswell.org](mailto:jwinckler@sbcbswell.org).
- **The Children’s System of Care Action Team** meets the 4th Thursday of the month, 10:30 am - 12:00 noon. SELPA Conference Room, 240 E. Hwy. 246, Suite 200, Buellton CA 93127. Contact Ana Vicuña, [avicuna@sbcbswell.org](mailto:avicuna@sbcbswell.org)
- **The Forensic Action Team** will be meeting every other month on the 4<sup>th</sup> Wednesday. Next meeting is July 25. The meeting is available through video conference in SB Room 261, Lompoc B St Conf Room and the SM Annex. For questions, please contact Celeste Andersen, [candersen@co.santa-barbara.ca.us](mailto:candersen@co.santa-barbara.ca.us)