

Yolo County Health and Human Services Agency

BEHAVIORAL HEALTH SERVICES

Local Mental Health Board Mental Health Director's Report September 26, 2016

Homelessness

Tracey Dickinson gave a presentation to the Board of Supervisors during their meeting on Tuesday, September 13 regarding the status of our local homeless system. The staff report ([LINK HERE](#)) highlights funding and accomplishments. You can also watch the presentation online ([LINK HERE](#)). Just click the fast forward button on the video screen until you reach agenda item number 39. The presentation, with Q&A, lasted about 30 minutes. Additionally, on August 31, I joined HHSA staff on a Tiny Homes site visit in Marysville. The cities of Davis, West Sacramento & Woodland continue discussions about Bridge to Housing 2.0 projects.

Integration

The staff moves associated with integration have been mostly completed. We now have the Child, Youth and Family Branch housed together, the Adult and Aging Branch housed together, and the Community Health and Service Center Branches co-located. We continue to focus on strengthening integration and creating a culture of quality and making data driven decisions.

MHSA Housing

Demolition work has begun on the Woodland old hospital site. Staff have met with the architect regarding site designs. We are the recommended project set to go before [California Tax Credit Allocation Committee](#). We anticipate going out to RFP for tax credit partners next week. Mercy Housing and New Hope Housing are working to finalize the partnership agreement and the land lease for later this year. If all goes as expected, we have an anticipated start date by the end of February. See below for a map of site.



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Public Guardian

The item regarding Public Guardian transitioning to HHSA will not be heard by the Board of Supervisors until October. We have temporarily loaned two part time staff to the Public Guardian’s office to assist with the current vacancies. Staff continue to meet to discuss the transition. The [draft Dispute Resolution Protocol](#) and the [draft LPS Conservator Staff Responsibilities MOU](#) are attached for review.

Continuum of Care Workgroup

This workgroup continues to meet to discuss ways our system can improve to reduce the disproportionate number of persons with mental illness in the criminal justice system. We have begun to discuss a systems map to evaluate gaps. We are in conversations with the National Stepping Up Initiative and hope to have a group attend the next Stepping Up Summit in California.

CWS Facilitated Discussions

LMHB members are invited to attend any of the upcoming Child Welfare facilitated discussions. Some of you had mentioned an interest in this subject matter. See below for more information.

Our proposal for this project include two components:

- A series of four educational sessions for the Board of Supervisors, to take place on the afternoon of regularly scheduled Board meeting in July, September and October from 1:00 to 4:30 PM. 3 sessions will consist of didactic presentations with opportunities for feedback, questions and answers. One session will consist of a structured conversation about what the Board has learned, followed by the development of specific recommendations for program improvement.
- An assessment and evaluation of Yolo County’s Child Welfare Services Division, to consist of 15 key informant interviews, staff survey and focus groups, stakeholder/community partner focus groups, the collection of Yolo County quantitative performance data and comparative data from statewide and national sources, and an analysis of the results of this qualitative and quantitative data collection.

We propose the following schedule of activities to accomplish the goals of this project, with associated costs:

Date	Activity	Cost
July 26, 2016	Board Workshop #1 <ul style="list-style-type: none"> • CWS Overview/CWS Workflow (state and federal requirements) • Legal System 	\$4800
August, 2016	Evaluation and Assessment of Yolo County’s Child Welfare Services program <ul style="list-style-type: none"> • Coordination with UC Berkeley Data System • Max 20 Key Informant interviews • 4 Focus Groups <ul style="list-style-type: none"> ○ Social Workers ○ Social Work Supervisors ○ Resource Family ○ Stakeholders, Parents, Youth • Resource Family Survey • Analysis of data 	\$16,800
September 27, 2016	Board Workshop #2 <ul style="list-style-type: none"> • Presentation of Quantitative and Qualitative Data • Yolo Data in comparison to state and federal data measures • Results of August Evaluation and Assessment 	\$4800
October 11, 2016	Board Workshop #3 <ul style="list-style-type: none"> • Structured Decisions Making (SDM) • Other Best Practices • County Partnerships • Staff Training—Core Curriculum & Specialized Training 	\$4800

Fiscal Update

There is an approximate \$2.5 million deficit projected in the Mental Health budget for this year. This amount assumes a projected \$1.5 million increase in the Behavioral Health re-alignment funds that are still in an allocation process from the State. In order to balance the budget and avoid drawing down these significant reserves of between \$2.5 and 4 million from County general fund, HHSA has developed the following fiscal and program strategies to mitigate expense and create savings within the Mental Health budget and services:

- In recent years, HHSA’s census of clients living in high-end, locked institutional settings has increased to over 50 individuals. HHSA is initiating an IMD Diversion Team consisting of two Clinicians, a Clinical Supervisor and Clinical Manager (all existing staff) who will coordinate with the Public Guardian on project implementation. The team will identify 10 Conservatees currently living in high-end institutional settings who can be assisted to safely step down into intensive community-based services. HHSA will expend \$450,000 (new annualized contracted expense) to provide augmented community-based services to these 10 individuals through two full time case managers and housing support funds.
- In the 2015 triennial Medi-Cal audit, HHSA had a 67% disallowance rate due to inadequate documentation of service delivery. HHSA is increasing/augmenting Quality Management staff to include two Clinicians, one electronic health records technician and one Compliance staff (4 new FTE’s), along with re-aligning existing administrative support staff, to improve record keeping and minimize audit disallowance and risk. Multiple internal strategies, including trainings, service authorization reviews and increasing staff who submit Medi-Cal billings to the State have also been implemented.
- With the implementation of the Affordable Care Act, many individuals who were previously unable to access inpatient psychiatric services are now insured with Yolo County Medi-Cal. As a result, the numbers of hospitalizations annually has increased over the past three years by 69.02% from 326 in FY 12/13 to 551 in FY 15/16. Many of these individuals are not already linked to services, and although given follow-up appointments, do not engage and are experiencing repeat, sometimes lengthy, inpatient stays. To decrease length of stays, as well as promote community-based aftercare/linkage, HHSA is embedding a Quality Management RN (existing staff, moving from APS) in the regional hospitals. The expense for this position is partly funded through social services Federal Financial Participation (FFP), between .50 and .75.
- In addition to this RN embedded in the regional hospitals to assist with decreasing both length of stay and re-admission rates, HHSA will be approaching overall inpatient utilization from a more cost-effective stance, guiding the location for admission and treatment whenever possible and appropriate. Yolo County’s inpatient psychiatric services unit is located within a full-care hospital, allowing for treatment of both psychiatric and medical conditions for any patient on the psychiatric unit. As a result, the daily rates for care (\$1,300/day) are twice that of free-standing psychiatric hospitals. However, most services provided in this hospital are .50 reimbursable by Medi-Cal, whereas services at the regional free-standing psychiatric units (\$700-\$800 /day) are not reimbursable. An alternative to both of these options are Medi-Cal-certified Psychiatric Health Facilities (PHF’s \$850-\$900/day) that provide acute psychiatric treatment for up to 30 days, and are .50 reimbursable by Medi-Cal, making these facilities the most cost-effective location for individuals to receive acute psychiatric care. To assure the availability of these options for Yolo County clients, HHSA is contracting to purchase six beds at two separate facilities. In addition, HHSA will be contracting to purchase four beds at the local crisis residential facility, a cost-effective (\$310/day, .50 reimbursable to Medi-Cal) option that is a community-based diversion from inpatient altogether.

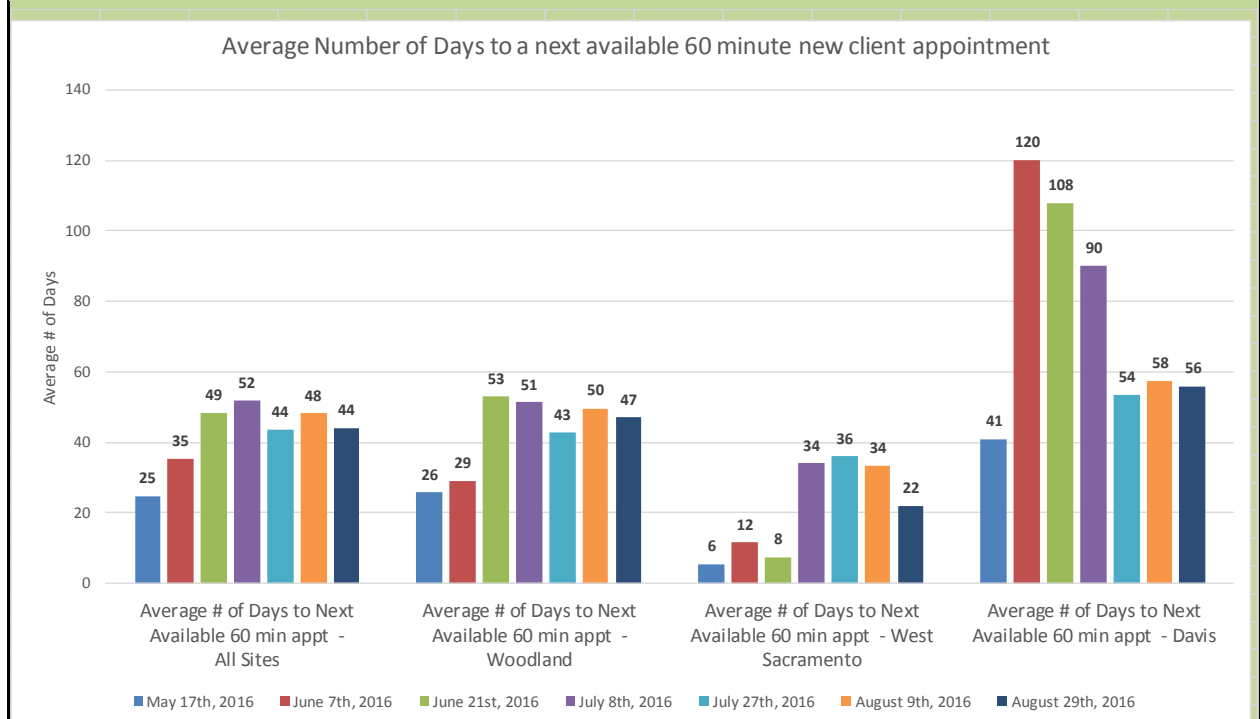
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- Finally, HHSA will be continuing to review quality of care and services with all contracted providers and will decrease contract funding amounts where appropriate, and pursue follow-up to cost report exceptions, assuring timely reimbursement when payment overages occur.

Psychiatric Access

See the following information per the Program Committee’s request.

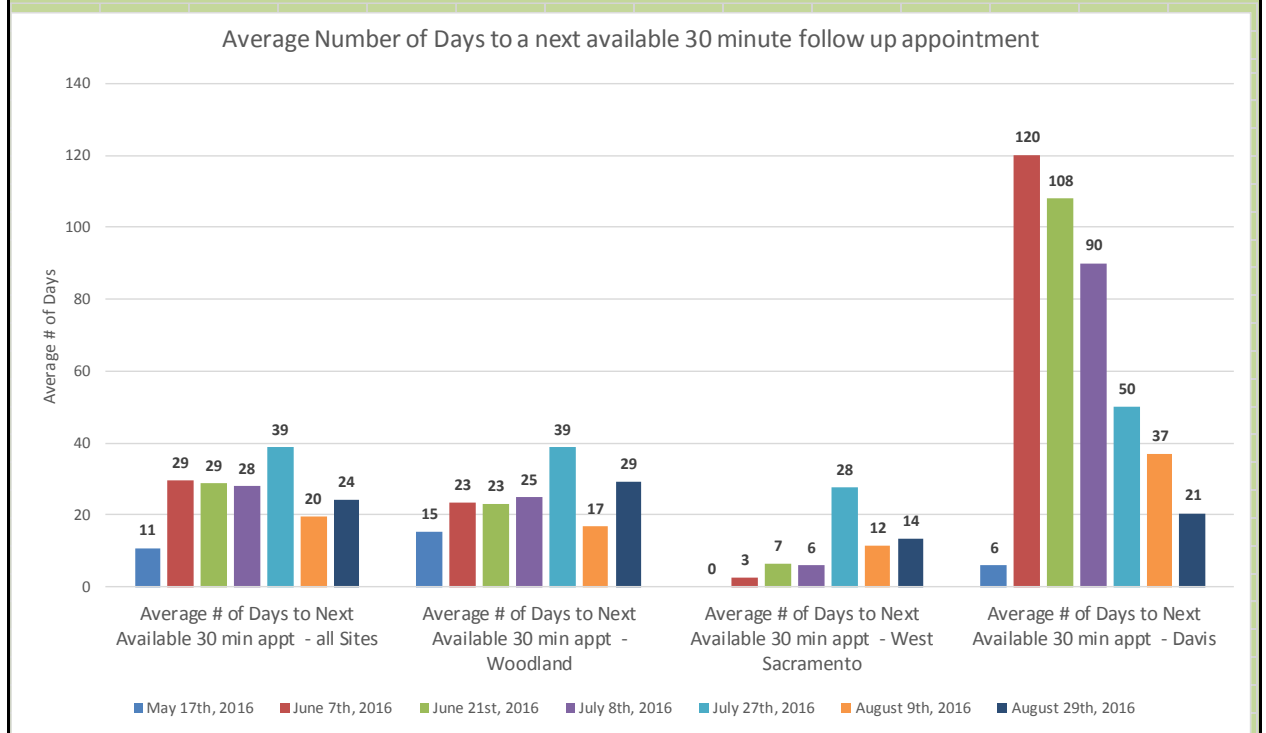
	05/17/16	06/07/16	06/21/16	07/08/16	07/27/16	08/09/16	08/29/16
Average # of Days to Next Available 30 min appt - all Sites	11	29	29	28	39	20	24
Average # of Days to Next Available 30 min appt - Woodland	15	23	23	25	39	17	29
Average # of Days to Next Available 30 min appt - West Sacramento	0	3	7	6	28	12	14
Average # of Days to Next Available 30 min appt - Davis	6	120	108	90	50	37	21



New clients are given a 60 minute initial appointment with their psychiatrist after being assessed by an HHSA clinician. This graph shows the average number of days a client may have to wait for an initial appointment with a psychiatrist following their clinical assessment at each clinic location. After the initial visit with the psychiatrist, all follow up appointments are 30 minutes. During the month of June in the Davis clinic we lost our primary psychiatrist working in that location, so number of days to next available new client appointments went up significantly. We were able to staff that location again in July, where you can see the numbers start to recover.

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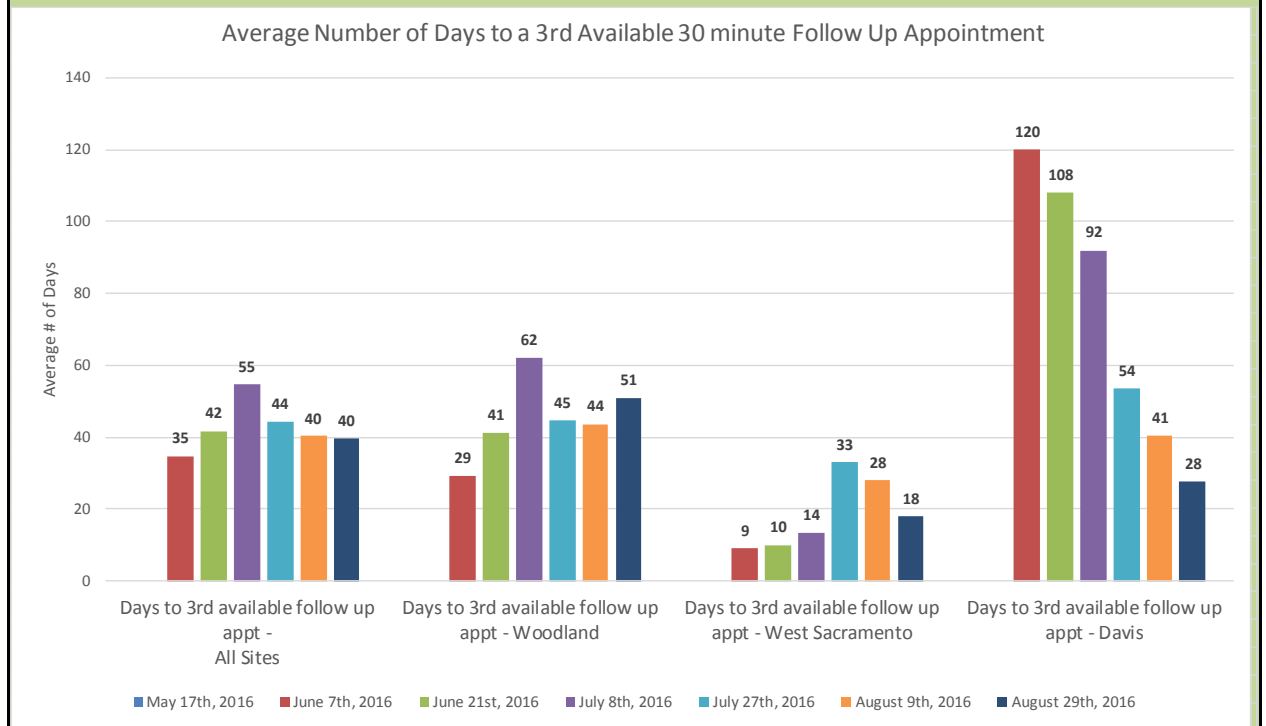
	05/17/16	06/07/16	06/21/16	07/08/16	07/27/16	08/09/16	08/29/16
Average # of Days to Next Available 60 min appt - All Sites	25	35	49	52	44	48	44
Average # of Days to Next Available 60 min appt - Woodland	26	29	53	51	43	50	47
Average # of Days to Next Available 60 min appt - West Sacramento	6	12	8	34	36	34	22
Average # of Days to Next Available 60 min appt - Davis	41	120	108	90	54	58	56



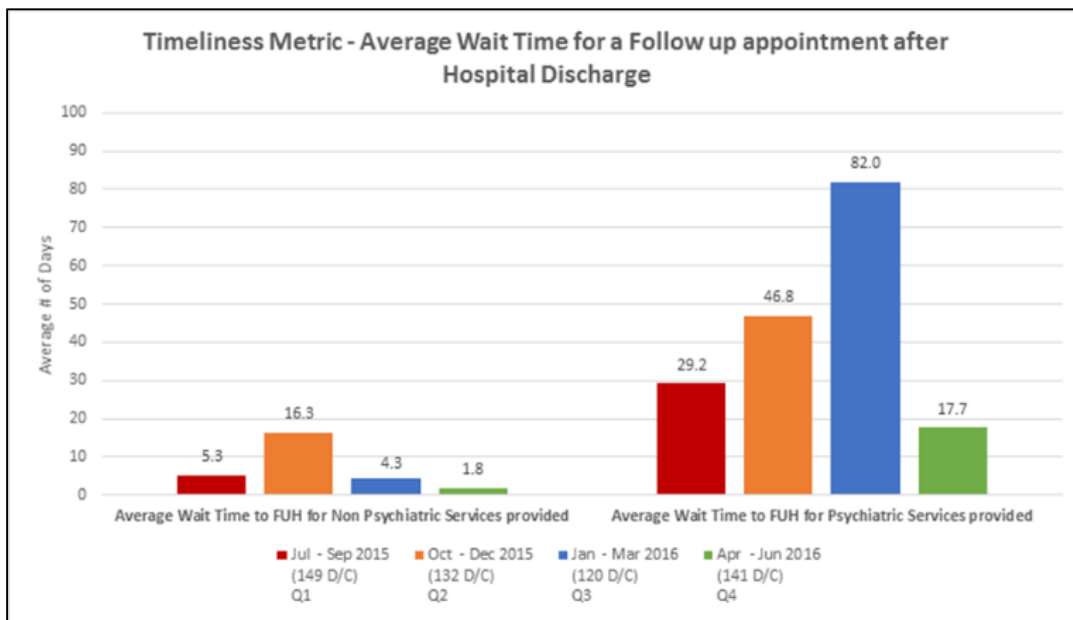
This graph shows the average number of days a client may have to wait between appointments with their psychiatrist. Depending on the client's current level of psychiatric stability, doctors typically ask clients to return for a follow up visit anywhere from two weeks to 90 days. As mentioned in the previous graph, during the month of June in the Davis clinic we had lost our primary psychiatrist working in that location, so number of days to next available follow up appointments went up significantly. We were able to staff that location again in July, where you can see the numbers start to recover.

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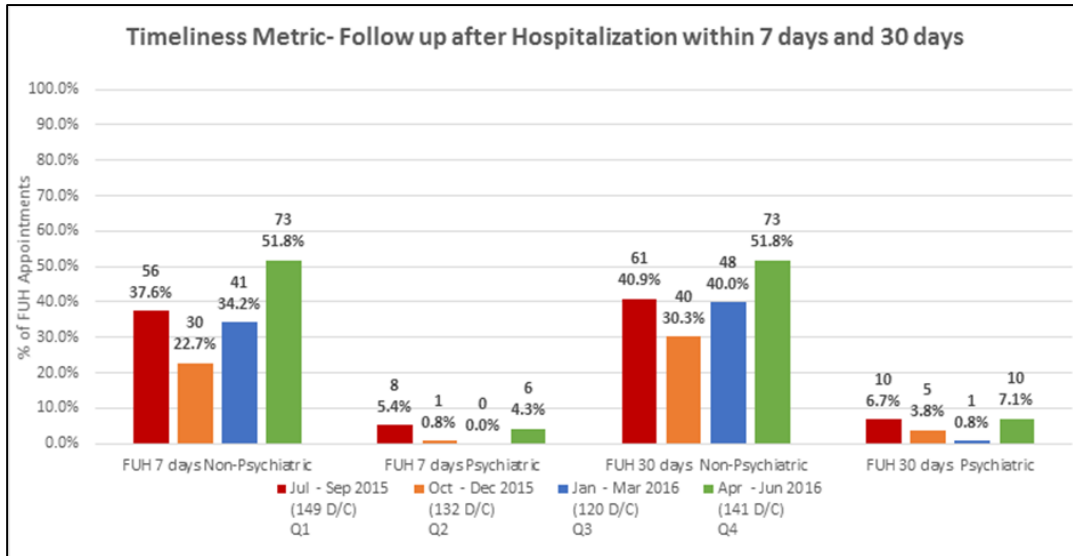
	05/17/16	06/07/16	06/21/16	07/08/16	07/27/16	08/09/16	08/29/16
Days to 3rd available follow up appt -All Sites		35	42	55	44	40	40
Days to 3rd available follow up appt - Woodland		29	41	62	45	44	51
Days to 3rd available follow up appt - West Sacramento		9	10	14	33	28	18
Days to 3rd available follow up appt - Davis		120	108	92	54	41	28



We decided to collect data on the number of days to the third next available 30 minute follow up appointment due to the possibility of sudden client cancelations impacting the data when looking at the first next available slot. You can see that the averages in depicted here are higher than in the previous graph that showed average number of days to next available 30 minute appointments. The numbers in this graph are likely to be more representative of the true average number of days between next available 30 minute slots.



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Recruitment

We are excited to announce the selection of Nolan Sullivan as the Branch Director for the HHSA Service Centers, the position vacated by Nancy O’Hara and filled in the interim by Ed Smith. Nolan has been with Yolo County since June of 2007. During this time he has held several supervisory titles in the realms of Support Services, Human Resources, Fiscal Services, and Eligibility. Since December of 2011, Nolan has served as the Division Manager over Eligibility Services, taking on the management of Medi-Cal, CalFresh, CalWORKS, General Assistance and Foster Care Eligibility teams. Nolan’s diverse experience with the department gives him insight into both the program and support functions of our operations. He prides himself on getting to know all staff and embodies the spirit of integration by working to coordinate across the Agency to provide the best services to our clients. Nolan holds a Bachelor’s Degree in Business Administration, a Master’s Degree in Public Administration, and recently completed the UC Davis Extension Management Development program. Nolan has the passion and vision needed to lead this critical piece of our Agency. Outside of work Nolan is very active with his family and in his home community of Vacaville. Nolan will assume his new role on September 18, under the support and mentorship of our Interim Service Center Director, Ed Smith. We are still in the process of filling our Child, Youth and Family Branch Director position.



County of Yolo Health and Human Services Policy

TITLE: DISPUTE RESOLUTION PROTOCOL

DEPARTMENT: HEALTH AND HUMAN SERVICES AGENCY

TYPE: **POLICY**

DATE: 8/29/2016

A. **PURPOSE**

The purpose of this policy is to ensure conservatorship investigation and administration be conducted independently from any person or agency which provides mental health treatment for conservatees, and to avoid a conflict of interest between the treatment needs of the conservatee and the investigation and administration of the conservatorship, in accordance with Welfare & Institutions Code Section 5371.

To mitigate disputes, Welfare & Institutions Code Section 5371 instructs the person or agency responsible for mental health treatment of conservatees to execute a written agreement or protocol with the conservatorship investigator and administrator for the provision of services to conservatees. This agreement or protocol is to specify the responsibilities of each person or agency who is a party to the agreement or protocol and specify a procedure to resolve disputes between agencies or persons.

B. **DEFINITION**

- o **Dispute:** Conflict or controversy, disagreement.

C. **POLICY STATEMENT**

If a dispute or a conflict of interest arises under the Yolo County Health and Human Services Agency, between Public Guardian staff and staff responsible for mental health treatment, regarding any of the services provided to persons conserved pursuant to the Lanterman-Petris-Short Act, this Dispute Resolution Protocol shall be followed as a means to resolve the dispute or conflict of interest.

D. **RESPONSIBILITIES**

Yolo County Health and Human Services Agency staff providing investigative, administrative and/or treatment services for persons conserved pursuant to the Lanterman-Petris-Short Act shall have the responsibilities more fully described in the LPS Conservator Staff Responsibilities MOU, which is incorporated by this reference

E. **PROCEDURE**

If a dispute or a conflict of interest arises under the Yolo County Health and Human Services Agency, between Public Guardian staff and staff responsible for mental health treatment, regarding any of the services provided to persons conserved pursuant to the LPS Act, the following means shall be used to resolve the dispute or conflict of interest:

1. The Conservatorship Officer and mental health clinician/case manager involved in the dispute shall immediately notify the Assistant Public Guardian and Supervisor of the mental health clinician/case manager of the dispute and provide the following information:
 - a. The nature of the dispute as seen by each side;
 - b. Documentation in support of each side's position;
 - c. The proposed resolution advanced by each side; and,
 - d. The reasoning behind each side's proposed resolution.
2. The Assistant Public Guardian and the Supervisor of the mental health clinician/case manager, shall review the documentation provided in paragraph one (1) and meet within two (2) working days to resolve the dispute. If, after

the meeting, the dispute is not resolved, the parties shall immediately submit the documentation provided in paragraph one (1), along with any additional documentation, to the Adult and Aging Branch Director.

3. The Adult and Aging Branch Director shall review the documentation provided in paragraph two (2) and take whatever steps necessary to resolve the dispute. This may include, but does not have to include, a meeting with one or both sides to the dispute or conflict of interest. The Adult and Aging Branch Director will issue a written decision, within two working days, which will be delivered to the Assistant Public Guardian as well as the Supervisor of the mental health clinician/case manager.
4. This decision may be appealed by either party and brought to the Director of the Health and Human Services Agency/Public Guardian, within two (2) days of receipt. The Director of the Health and Human Services Agency/Public Guardian will make a final decision within two working days.

(See W&I Section 5371)

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**LPS CONSERVATOR STAFF RESPONSIBILITIES MEMORANDUM OF
UNDERSTANDING**

Purpose:

The purpose of this agreement is to detail the separate responsibilities of mental health and Public Guardian/LPS Investigator staff within the Yolo County Health and Human Services Agency (HHSA) in order to provide Lanterman-Petris-Short (LPS) or potential LPS conservatees with appropriate, timely and independent conservatorship services. A Dispute Resolution Protocol has also been developed in accordance with Welfare & Institutions Code Section 5371 to mitigate potential disputes between staff regarding the provision of services to conservatees. This Memorandum of Understanding (MOU) serves as the accompanying document to that protocol in order to list the separate responsibilities of the mental health and Public Guardian/LPS Investigator staff.

Responsibilities:

The services provided by mental health and Public Guardian/LPS Investigator staff regarding LPS conservatorship clients is as follows:

Task #	Mental Health Staff	Public Guardian/LPS Investigator Staff
1	N/A	Receive referral from statutorily authorized source, log in and review incoming referral (timeliness, complete, etc.) Determine if petition will be filed Forward to County Counsel if accepted Notify referring facility if declined
2	N/A	If accepted, begin Investigation for LPS Conservatorship Prepare report, to be submitted to County Counsel 5 days prior to general hearing or notify County Counsel 5 days prior to hearing if PG no longer wishes to pursue conservatorship
3	Receive notification from County Counsel of t-con hearing date	Receive notification from County Counsel of t-con hearing date
	Notify PG of MH Case Manager	Notify MH of assigned PG Deputy

4		
5	Provide all relevant information for completion of LPS investigation report, including allowing LPS investigator access to all necessary documents, information regarding treatment plan, change in placement, appointment of an appropriate relative, mental health needs, unmet needs and fiscal issues	Investigator/Deputy PG initiates discussions with MH clinicians, facility representatives and other necessary staff
6	Staff placement options with PG	Staff placement options with MH Sign consent/admission packets Provide County Counsel with notification of change of address/location of conservatee
7	Transport conservatee to placement Transport conservatee to court	N/A
8	Provide expert witness where available	N/A
9	Provide ongoing services for conservatees utilizing HHS approved providers	Request assistance in engaging conservatee in services
10	Provide individual treatment plan within ten working days from receiving Letters of Conservatorship	Provide individual treatment plan within ten working days from receiving Letters of Conservatorship
11	Provide intervention and/or evaluation to LPS Conservatees in crisis Facilitate medication management as necessary Coordinate hospital admissions where necessary	Provide general management of food, clothing and shelter
12	Provide the PG with a copy of the County Mental Health Plan and a copy of all state reviews, regulations and statistical reports to and from the state regarding the LPS Conservatorship program	Maintain records consistent with Short-Doyle reporting requirements, including quarterly reports
13	Staff cases coming up for renewal (three months prior to expiration) Obtain renewal declaration/affidavit	Notify MH of upcoming expiration of conservatorship (at least three months prior to expiration) or of request for rehearing

		Staff cases coming up for renewal (three months prior to expiration)
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Dispute Resolution:

If a dispute or a conflict of interest arises under the Yolo County Health and Human Services Agency, between Public Guardian staff and staff responsible for mental health treatment, regarding any of the services provided to persons conserved pursuant to the LPS Act, the procedure established in the HHSA Dispute Resolution Protocol shall be followed.

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