

Yolo County Health & Human Services Agency

Mental Health Director's Report

March 28th 2022 (6-8pm)

- a) **COVID19 update** - For more information please visit our Dashboard on our County Webpage, here is the [LINK](#).
- b) **ARP Rescue Plan Workgroups** –No update for homelessness.
- c) **Cal AIM-** HHS is in the process of convening a CalAIM workgroup that will bring together representatives from various BH clinical teams and quality management with HHS fiscal, IT, and contracts. This workgroup will be tasked with operationalizing and meeting the specific steps/goals needed for the County to meet a number of upcoming DHCS CalAIM deliverable dates, beginning in September 2022. This way, we keep current on the necessary state Medi-Cal reforms as well as pull down any available incentive funds to support our CalAIM work. The idea is the workgroup will begin meeting twice monthly in milestone specific workgroups to achieve the necessary building blocks for the work.
- d) **K-12 Services-** The K-12 School Partnerships project formally launched on November 15, 2021 with the execution of behavioral health contracts to serve the identified catchment areas:
- Davis Catchment Area: CommuniCare Health Care Centers
 - West Sacramento Catchment Area: Victor Community Support Services
 - Woodland Catchment Area: CommuniCare Health Centers
 - Rural Areas: Rural Innovations in Social Economic, Inc.

HHS has been working closely with the Office of Education, the individual Districts, and the contracted providers to develop referral processes, data sharing agreements, data collection mechanisms, and outcome measures. Additionally, the partnership has been working collectively to develop a communication strategy and provided a presentation to stakeholders of the local NAMI affiliate on March 16, 2022.

The partnered entities are continuing to explore funding opportunities, including the Student Behavioral Health Incentive Program (SBHIP), additional MHSA funding, and additional MHSSA grant funding. There are other potential funding opportunities for the partnership to explore, including the [California Community Schools Partnership Program Implementation Grant](#).

- e) **Upcoming RFPs-**Please see linked page for information on upcoming RFPs. [LINK](#)
- f) **Public Media Campaign(s)-**

Mental wellness campaign- EMRL Group to present at meeting

Overdose Awareness/Prevention- HHS staff and the District Attorney also presented to the Yolo County Opioid Coalition on February 24th. The meeting had robust participation and lots of great feedback on how HHS, DA, and local partners can collaborate on a robust campaign. Partners will work to finalize plans to ensure a comprehensive approach to this effort. HHS staff are working on purchasing fentanyl testing strips and Narcan to distribute to providers and partners in the community with the hope that these get into the hands of clients to prevent overdose. HHS and DA teams will continue building out other pieces of the campaign.

- g) **Crisis Now-** Staff continue to finalize development of the Crisis Now RFP which is planned for release in the next several weeks. Given the RFP timelines, steps needed to finalize contracts, hire staff, and launch programs of this magnitude we anticipate Crisis Now launching in several phases throughout 2022 and likely into 2023. The current 24/7 Crisis and Access line provider, Heritage Oaks Hospital, has agreed to extend their contract through September 2022 which will ensure no disruption in this service while the RFP and contracting process progress. The Committee on Capital Investments was supportive of staff pursuing the buildings proposed to them in February, staff toured them the week of March 14th and will continue with next steps which, if given final approve, will include remodeling to ensure the facilities meet the needs for the 10 crisis receiving chairs and 16 short-term stabilization beds. Additionally, HHS staff are working with Woodland PD on adding a second Co-Responder position to Woodland after their successful award of a grant that will partially fund this position at the same level as the existing Co-Responder positions throughout the county.
- h) **Department of State Hospital Programs-**In California, an individual facing felony charges deemed mentally incompetent (IST) (unable to understand the nature of the criminal proceedings or to assist counsel in the conduct of a defense) due to a Serious Mental Illness or Serious Emotional Disturbance (SED) is traditionally sent to a state hospital to be restored to competency.

The goal of the DSH diversion program is to recognize that people with serious mental illness have a right to treatment instead of criminalization. This program offers community-based services with assistance from a Mental Health Clinician, a Mental Health Case Manager, a Probation officer, and the full supports of an integrated specialty court team.

The DSH program targets people whose mental illness, or condition of homelessness, is significantly related to the charged offense and who may benefit from treatment in the community.

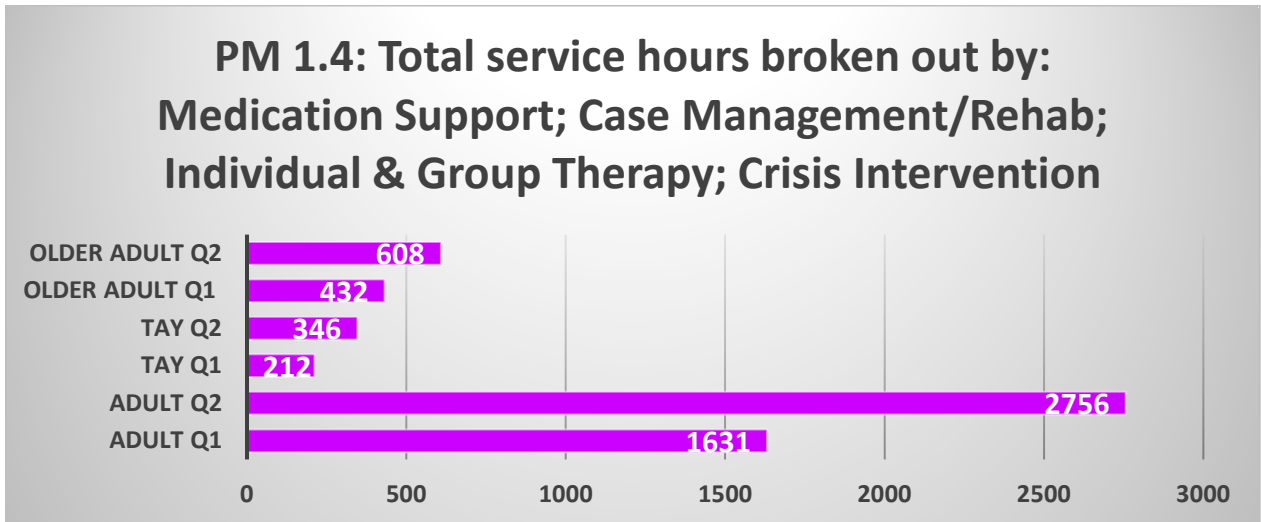
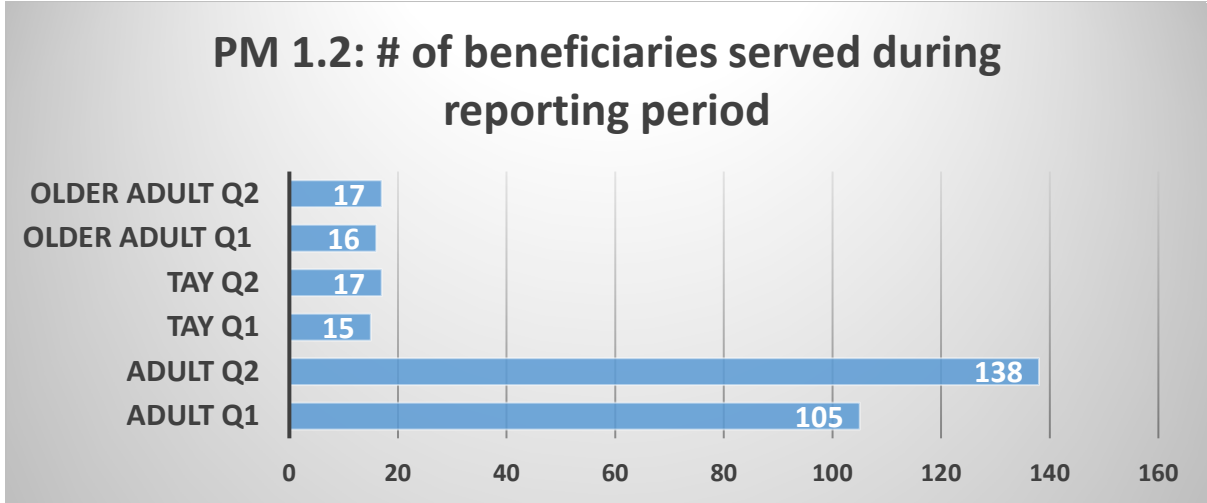
The individual receives a community risk assessment from HHS and Probation, a mental health evaluation and must meet the diagnostic criteria for the DSH program. The diversion program serves individuals up to two years and offers supportive housing services and intensive specialty mental health services.

We serve up to 8 clients and soon will serve up to 10 with the expansion of DSH.

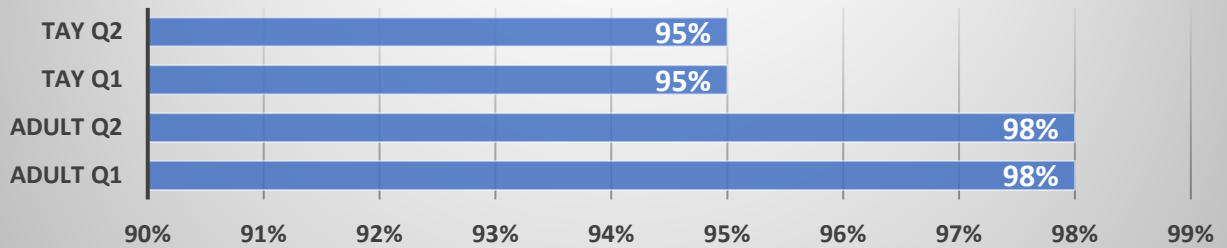
- i) **QM Audits/Reviews-**The MHP participated in our annual MH EQRO review in mid-February 2022. While all meetings were remote, we did have two consumer/family member groups, as well as a peer staff group and a well-attended contract provider group. We are awaiting the report now. Our

DMC and SABG annual audits are upcoming in June 2022 and we are awaiting information as to what format that review will take (i.e., remote vs. onsite) this year.

j) **FSP FY21-22 Data – Telecare and Hope Cooperative programs**



PM 2.6: % of beneficiaries who are contacted within 4 hours of hospital or jail notification for discharge



PM 2.8: % of referred beneficiaries contacted within 2 calendar days from HHSA referral

