

# HHSA Ten Year Roadmap Behavioral Health Services

## Accomplishments: Year Two

In July 2016, Health and Human Services Agency (HHSA)/Behavioral Health Services (BHS) presented the Ten Year Roadmap – a strategic document which outlines a path to address the most serious behavioral health issues affecting San Diego County over the next ten years. The Roadmap guides BHS planning to provide quality behavioral health services and to empower individuals with behavioral health needs to live healthy, safe and thriving lives. The Roadmap is a dynamic, living document, updated annually to incorporate new priorities from our community partners and HHSA/BHS leadership.

OUR VISION, MISSION AND VALUES	OUR GUIDING PRINCIPLES	OUR COMMITMENT
<p><b>Vision:</b> <i>Live Well San Diego</i> – A region that is Building Better Health, Living Safely and Thriving</p> <p><b>Mission:</b> To efficiently provide public services that build strong and sustainable communities</p> <p><b>Values:</b> Integrity – Stewardship – Commitment</p>	<p>Promote Recovery, Resiliency, Discovery and Well-Being; Provide Trauma-Informed and Culturally Competent Services; Collaborate with Partners, Stakeholders and the Community; Maximize Funding; Make Data Driven Decisions; Ensure Regulatory Compliance; Utilize Evidence Based/Informed Practices; Embrace Diversity and Inclusion</p>	<p>Work in partnership with our communities to provide quality behavioral health services that empower individuals with behavioral health needs to live healthy, safe and thriving lives.</p>

The table below outlines the **Accomplishments** for the Roadmap in Year Two (Fiscal Year 2017-18) as related to **12 Priorities**. Each **Priority** is guided by a **Ten Year Vision** with clear **Strategies** that outline efforts to accomplish the Vision.

TEN YEAR ROADMAP ACCOMPLISHMENTS: YEAR TWO <i>Fiscal Year 2017-18</i>	
<p><b>Aging Population</b></p> <ul style="list-style-type: none"> <li>o Vulnerable older adults with serious mental illness receive integrated, geographically accessible, age-appropriate services to address their complex needs. <ul style="list-style-type: none"> <li>◆ Support caregivers in their role and prevent the onset or progression of their mental health conditions by educating and connecting them to resources. <ul style="list-style-type: none"> <li>➤ Performed 465 assessments and evaluations through the Caregivers of Alzheimer’s Disease and other Dementia Clients Support Services program, and served 375 caregivers who reported 96% satisfaction in classroom training</li> </ul> </li> <li>◆ Continue and expand training of geriatric specialist staff to include early identification of cognitive deficits in older adults receiving treatment in mental health programs. <ul style="list-style-type: none"> <li>➤ Held two geriatric training academies with 32 graduated</li> <li>➤ Held classroom and eLearning training on geriatric behavioral health issues with 194 participants</li> </ul> </li> </ul> </li> </ul> <p><b>Care Coordination</b></p> <ul style="list-style-type: none"> <li>o Persons with serious mental health and/or substance use disorders have all needs met in a timely manner through an integrated continuum of care. <ul style="list-style-type: none"> <li>◆ Apply whole person-centered principles to intensify and further develop care coordination models that are tailored to the needs and level of care for the individual. <ul style="list-style-type: none"> <li>➤ Included care coordination and “warm handoff” language in all BHS contracts, including Opioid Treatment Programs under the Drug Medi-cal Organized Delivery System (DMC-ODS), and the BHS provider handbooks</li> <li>➤ Improved post discharge outpatient follow up by more than 50%</li> <li>➤ Incorporated mental health screenings and provided training to providers of Driving Under the Influence (DUI) programs</li> </ul> </li> </ul> </li> </ul>	<p><b>Priority</b></p> <ul style="list-style-type: none"> <li>o Ten Year Vision <ul style="list-style-type: none"> <li>◆ Strategy <ul style="list-style-type: none"> <li>➤ Year Two Accomplishment</li> </ul> </li> </ul> </li> </ul>

### Care Coordination (continued)

- ◆ Promote integration of Whole Person Wellness by advancing relationships with the community including private, public, family, consumer and education partners.
  - Developed MOAs with the seven Health Plans to strengthen care coordination and relationships under DMC-ODS
  - Collaborated with Public Health Services to administer Hepatitis A vaccines for high-risk BHS clients
  - Participated in various community forums to advance the Whole Person Wellness model
  - Promoted information sharing and partnership through the BHS System of Care Councils, with topics impacting San Diego County communities
- ◆ Utilize and broaden the use of various IT systems, including ConnectWellSD and San Diego Health Connect, to promote care coordination and to offer those in need of services innovative platforms including digital solutions.
  - Participated in planning, testing, training and implementation of ConnectWellSD
  - Created a DMC-ODS Project Team that developed both a Substance Use Disorder (SUD) consumer website and a DMC-ODS provider-facing website (landing page), that strategically links providers to various care coordination forms and resources
  - Enhanced the SanWITS application to collect data for the July 2018 rollout of DMC-ODS

### Children and Youth Population

- Children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families.
- ◆ Ensure a full continuum of care through family-centered and youth-informed services that are compassionate and sensitive to the unique developmental needs of children and youth.
  - Designed and secured funding for the Center for Child and Youth Psychiatry which expands the array of services to include a centralized medication clinic supporting children and youth with complex medication needs
  - Expanded countywide telepsychiatry capacity
  - Provided Positive Parenting Seminars and Prevention and Early Intervention services to more than 4,500 children throughout the county
- ◆ Provide services that empower children and youth to build a healthy sense of self and have confidence to make sound decisions so they thrive in an ever-changing world.
  - Collaborated with Child Welfare Services and Probation to develop a Child Family Team Facilitation service that elevates the family voice and promotes wellbeing
  - Aligned service practices with state requirements to ensure timely access of mental health services for foster youth placed out of their county of jurisdiction
  - Advanced Continuum of Care Reform by facilitating system transformation from Group Homes to Short-Term Residential Therapeutic Programs with a goal of transitioning youth back into a family environment
- ◆ Strengthen partnerships with children/youth's circle of influence to create a supportive environment.
  - Created the infrastructure and system training to implement a State-mandated outcome measures which will serve as a common language to support children, youth and families identify their areas of need and build on their strengths

### Crisis Services

- All persons experiencing a psychiatric emergency have access to timely and appropriate services to ensure their safety and that of the community.
- ◆ Develop a service model that ensures timely, trauma-informed, culturally-competent crisis intervention services while considering the unique needs across the lifespan.
  - Enhanced BHS services by securing funding to increase Psychiatric Emergency Response Teams (PERT), as well as telepsychiatry treatment programs as an alternative to other outpatient care for both youth and adults who are transitioning out of inpatient care
- ◆ Utilize community-based, peer-driven and family-informed crisis intervention models to reduce the reliance on law enforcement intervention and emergency department utilization.
  - Supported clients seeking outpatient care and/or community-based services via the NAMI Next Steps program; nearly 50% of those tracked at intake did not need emergency interventions by their 30-day follow-up
  - Established a Memorandum of Understanding between North Region Children, Youth and Families crisis response providers and a hospital which allow program staff to provide services onsite at the hospital, alleviating reliance on law enforcement and emergency departments
- ◆ Ensure all crisis centers can serve as a point of entry in the full continuum of care.
  - Completed the youth crisis stabilization buildout and expansion project by increasing available beds from 4 to 12 in a central location, resulting in a 32% increase in crisis stabilization service utilization

#### Priority

- Ten Year Vision
  - ◆ Strategy
    - Year Two Accomplishment

## Homeless Population

- All persons with serious mental health and/or substance use disorders who are experiencing homelessness have treatment and housing to support their recovery.
  - ◆ Ensure the appropriate level of care for persons experiencing homelessness and implement an array of housing options that promote community integration.
    - Implemented 335 new treatment slots for homeless persons with serious mental illness (SMI) in support of Project One for All
    - Secured 75 new treatment slots for homeless persons with Substance Use Disorders
    - Secured permanent and/or bridge housing for 365 clients with SMI
    - Implemented the Tenant Peer Support Services (TPSS) program to provide housing navigation and ongoing tenancy-related supportive services for clients receiving treatment through outpatient mental health clinics in the East, South, North Inland and North Coastal Regions
    - Participated in the Youth Homelessness Subcommittee of the Regional Taskforce on the Homeless to form a Youth Homelessness Demonstration Project grant proposal, which was subsequently awarded to San Diego to assess and address local needs
  - ◆ Work in partnership with housing authorities and developers to acquire permanent supportive housing.
    - Acquired permanent supportive housing, provided housing vouchers and increased permanent housing stock for clients enrolled in Full Service Partnership / Assertive Community Treatment (FSP/ACT), Strengths-Based Case Management and outpatient mental health programs, specifically:
      - Housing and Community Development Services (HCDS) housing vouchers were provided to 25 homeless BHS clients
      - An additional 320 housing vouchers from San Diego Housing Commission (SDHC) and HCDS were distributed to FSP/ACT programs throughout the county working with homeless clients
      - 25 additional housing units were created at the Mission Cove and New Palace Hotel developments
  - ◆ Reduce stigma through education, as well as incentivize and collaborate with landlords to increase housing inventory.
    - Worked with HCDS to educate and incentivize landlords to secure permanent supportive housing for formerly homeless BHS clients with HCDS housing vouchers
    - Utilized resources through SDHC's Landlord Engagement and Assistance Program (LEAP) for clients with SDHC vouchers
    - Hosted a special training for over 200 attendees on "Understanding the Unique Needs of Children Youth and Families Experiencing Homelessness"

## Justice-Involved Population

- Persons with serious mental illness or substance use disorders who are justice-involved have access to integrated treatment and supportive services to increase public safety and reduce recidivism.
  - ◆ Increase access and connectivity between the justice system and behavioral health to ensure clients are receiving the appropriate level of care.
    - Augmented two existing outpatient SUD programs and initiated a new contract resulting in service to 55 additional clients to begin July 1, 2018
    - Provided unfunded collaborative support for approximately 25 defendants on the Behavioral Health Oversight Treatment (BHOT) calendar to address problems presented by offenders with mental illness
    - Advanced the Stepping Up Initiative to develop a justice-focused ACT program and mapping process within DMC-ODS to maximize positive outcomes and reduce anticipated implementation problems
    - Collaborated with justice partners to enhance care coordination by developing and procuring a new program supporting youth involved in the Juvenile Justice System to begin July 1, 2018
  - ◆ Deliver best practice services demonstrated to improve wellness and reduce recidivism for justice-involved individuals, including those transitioning from custody to the community.
    - Participated in Probation's Corrections Program Checklist reviews and trained/certified two new Behavioral Health Program Coordinators
    - Produced and promoted the Justice-Involved Services Training Academy
    - Continued to work with the Sheriff's Department to design the PROGRESS program - a residential program serving individuals with moderate mental illness and co-occurring diagnoses transitioning out of custody into the community
    - Initiated the Health and Justice Integration Committee to anticipate and address concerns associated with DMC-ODS implementation
    - Expanded Project In-Reach, the East Region Successful Treatment and Re-Entry Pilot, and Faith-Based bridging programs to offer in-custody engagement and bridging services to individuals with serious mental illness

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### Justice-Involved Population (continued)

- ♦ Evaluate impact and pursue process improvement using standard data and definitions to improve outcomes and support recovery.
  - In preparation for Drug Medi-Cal implementation, multiple SUD treatment providers attended American Society of Addiction Medicine (ASAM) and Medication Assisted Treatment (MAT) trainings to better serve clients involved in the justice system

### Long-Term Care

- Persons receiving treatment for serious mental illness in long-term care settings successfully reintegrate into the community.
  - ♦ Support recovery in the least restrictive level of care.
    - Added 22 more beds at skilled nursing facilities (SNF) across four different locations
    - Extended the contract at Vista Knoll SNF for 27 neurobehavioral health beds
    - Initiated discussions with CalMHSA regarding utilizing a facility in Paso Robles for 20 LPS beds and an additional 10 to serve as an alternative to State Hospital beds
  - ♦ Strengthen existing transitional step-down care to maximize the individual's reintegration into the community.
    - Added seven transitional residential beds and issued a Request for Proposal for an additional 16
  - ♦ Evaluate and develop preventative treatment and housing strategies to minimize the need for long-term care.
    - Developed treatment and housing strategies to minimize Long Term Care (LTC) by implementing a three-year LTC Expansion Plan focusing on resource development and issuing a Request for Information to receive provider input related to minimizing the need for acute care

### Organized Delivery System for Substance Use Disorders

- An integrated, whole person system of care that utilizes best practices based on an individual's specific needs and within the appropriate level of care to promote successful recovery.
  - ♦ Support those on the recovery journey by implementing best practices to increase access, ensure treatment effectiveness and improve outcomes.
    - Developed educational materials to support providers in implementing best practices on a new DMC-ODS website
    - Developed and implemented training and system expectations around evidence-based practices, including motivational interviewing, MAT and ASAM training
    - Developed an SUD consumer-facing website
    - Established written guidance for Recovery Residences to improve access to housing for those in treatment
    - Expanded the BHS SUD provider handbook and Substance Use Disorder Uniform Record Manual to include whole person assessment, person-centered treatment planning, evidence-based practices, and warm-handoff process to assist clients moving through the continuum of care based on their unique needs
  - ♦ Promote a culture of acceptance for persons needing services.
    - Amended the statements of work for SUD providers to include recovery-oriented language
    - Conducted multiple DMC-ODS presentations and monthly SUD Provider meetings to promote Medication Assisted Treatment and reinforce trauma-informed, person-centered and recovery-oriented principles
    - Developed a written policy of acceptance of all clients
  - ♦ Advocate for federal legislative change to allow for appropriate, timely sharing of vital health information to optimize quality care.
    - Incorporated federal regulations related to sharing of health information into the BHS SUD provider handbook and delivered provider training to mitigate information sharing barriers

### Prevention

- All persons are connected within their community and empowered to take action before there is a need.
  - ♦ Pursue policy and community change to ensure all persons live in an environment free of substance use harm.
    - Promoted prevention and environments free of substance use harm by releasing the 2017 Meth Strike Force (MSF) and Prescription Drug Abuse Task Force (PDATF) Report Cards and provided stakeholder education on opioid and methamphetamine use within the County
  - ♦ Champion efforts to train individuals to be able to recognize and support fellow community members impacted by mental health and/or substance use issues.
    - Coordinated the "Active Minds Send Silence Packing" exhibit to educate college students, staff and faculty on suicide prevention
    - Sponsored the annual May is Mental Health Awareness Month campaign and resource fair
    - Contracted with NAMI's Family Adult Peer Support program to establish services in 39 hospital and psychiatric treatment locations, provided the In Your Own Voice presentations to 1,485 people, and served over 3,300 family members and friends

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## Prevention (continued)

- ◆ Foster communities free of stigma in which persons affected by mental health and/or substance use issues are able and willing to seek services.
  - Provided Mental Health First Aid trainings to over 5,000 individuals and the two-day “It Takes a Village” training on gang prevention
  - Served over 2,700 clients and provided depression screenings to 740 individuals through the Positive Solutions program, achieving an 83% reported reduction in symptoms of depression

## Suicide Prevention

- There are zero suicides in San Diego County.
  - ◆ Foster an ongoing expectation of organizations to implement zero suicide strategies.
    - Through the San Diego Youth Services HERE Now program, presented Signs of Suicide Curriculum to over 32,000 students who learned about the warning signs and support strategies for dealing with depression
    - Over 4,800 students participated in an individual assessment for suicidal ideation and other safety concerns; over 500 of those students received a referral for additional services
  - ◆ Advance goals consistent with the recommendations from the San Diego County Zero Suicide Strategic Plan.
    - Updated the Suicide Prevention Plan and trained over 5,000 community members to enhance awareness of the warning signs of suicide and mental health crises and available resources
    - Organized the County Suicide Prevention Forum which provided training on suicide prevention, building resiliency, clinical interviewing and improving medication adherence
    - Initiated the utilization of the Columbia Suicide Severity Rating Scale in the BHS SUD system of care
  - ◆ Leverage innovative methods to measure the impact of prevention and intervention strategies.
    - Longer term strategy

## Unserved and Underserved Populations

- Diverse unserved and underserved communities are aware, empowered and able to access services appropriate to their unique needs.
  - ◆ Recognize the impact of social determinants of health, disproportionality and health disparities to align prevention and systems of care strategies.
    - Incorporated Adverse Childhood Experiences (ACEs) and Trauma-Informed language requirements into all SUD prevention contracts
    - Participated in health fairs for East African Communities and other activities to address service gaps
    - Ensured SUD treatment contracts include Trauma-Informed language requirements
  - ◆ Foster an inclusive, accepting and culturally-competent environment that celebrates diversity.
    - Provided outreach to hard-to-reach populations and updated the Cultural Competence Handbook to reflect community input and changes in existing tools
    - Reduced language barriers through the adoption of Farsi as another threshold language, as well as translated key survey findings into Spanish
    - Embraced Culturally and Linguistically Appropriate Services (CLAS) standards set forth by the State’s Cultural Competency Quality Improvement Strategic Plan by adopting two of the Plan’s assessment tools
    - Facilitated outreach and needs assessments to enhance services in the East African and Refugee communities, including special focus on youth
    - Provided outreach and needed services to support LGBTQ community through the “Our Safe Place” program
    - Coordinated and participated in the HHSA Cross-Border Health Committee at the October Bi-National Health Symposium in Tijuana
  - ◆ Offer culturally relevant and accessible services to address the needs of diverse populations.
    - Opened the iCare program and participated in the development of the RISE Court for commercially sexually exploited youth
    - Procured a countywide program to provide cultural and language-specific outpatient services for Asian Pacific Islanders, Latino Youth, and LGBTQ youth
    - Served over 1,100 seniors, including 216 senior refugees/asylees
    - Ensured all BHS staff completed annual cultural competency training

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## Workforce

- Our system of care has a skilled, adaptive and diverse workforce that meets the needs of those we serve.
  - ◆ Advocate for policies and processes that establish innovative recruitment, hiring and retention of a skilled and diverse workforce.
    - Worked with the San Diego Workforce Partnership to develop and implement strategies to improve hiring and retention of Transition Age Youth (TAY) clients as well as recruitment of individuals with a serious mental illness
    - In collaboration with Southern Counties Regional Partnership, developed a recruitment video that highlights working in the public behavioral health system
    - Provided training to BHS staff and providers focused on cultural competency and trauma informed care
  - ◆ Pursue team based care and innovative workforce solutions to increase access, improve outcomes and increase efficiency.
    - Developed an implementation plan for the Supported Employment-Individual Placement and Support Model
    - Expanded the number of psychiatry residents exposed to the public mental health system, increased the number of hours each resident is placed at community sites, and included a Nurse Practitioner component
  - ◆ Develop a career ladder for assisting individuals with lived experience in competitive employment as well as designated peer positions.
    - Conducted a Peer Support Specialist Focus Groups to obtain feedback on program effectiveness
    - Offered a countywide recovery-oriented Peer Specialist and Peer Employment Training for TAY, adults and older adults
    - Offered a Public Mental Health Certification program (with 36 graduates to date) which provides academic and career counseling, mentorship and field placement assistance

### Priority

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## Community Partners

BHS would like to thank the many partners within the behavioral health community who continue to improve the lives of San Diego County residents struggling with serious mental illness and/or substance use disorders through their heartfelt work and compassion for these vulnerable populations. Complete details of the Ten Year Roadmap, including an archive of prior years, can be found on the Network of Care: [www.sandiego.networkofcare.org/mh](http://www.sandiego.networkofcare.org/mh) (click on **HHSA/BHS Ten Year Roadmap**).