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## Behavioral Health Advisory Board

### Board Letter Summary and Discussion Questions

### October 1, 2020

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On October 27, 2020, Behavioral Health Services (BHS) will update the Board of Supervisors on progress within the Behavioral Health Continuum of Care and the Drug Medi-Cal Organized Delivery System (DMC-ODS). In advance of this update, BHS requests the Behavioral Health Advisory Board (BHAB) review and comment on the draft recommendations that will be put forward in the Board Letter which are subject to change.

#### Recommendations\*

1. Receive the update on Advancing the Behavioral Health Continuum of Care.
2. Receive the update on implementation of the Drug Medi-Cal Organized Delivery System.
3. Approve and authorize the Clerk of the Board to execute, upon receipt, the Drug Medi-Cal Organized Delivery System (DMC-ODS) Intergovernmental Agreement in the estimated amount of \$\_\_\_\_\_ million from the State of California and accept the funding for Fiscal Years 2020-21 through 2022-23. *NOTE: Dollar amount to be populated upon receipt from the State.*
  - a. Approve and authorize the Clerk of the Board, subject to the approval of the Agency Director, Health and Human Services Agency, to execute, upon receipt, amendments to the DMC-ODS Intergovernmental Agreement with the State of California, as required, and to reflect revised revenue amounts allocated by the State.

*\*subject to change*

To support your review of these recommendations, a summary document of the Board Letter content is attached to this informational item with discussion questions that will inform future planning.

### Continuum of Care Summary

In 2018, the San Diego County Board of Supervisors initiated several actions to enhance, expand, and innovate behavioral health programs and services in the region. This body of work is broadly referred to as the Behavioral Health Continuum of Care (Continuum of Care). Updates are provided to the Board of Supervisors (BOS) and the Behavioral Health Advisory Board (BHAB) on distinct projects within the Continuum of Care, categorized as follows: Diversionary Services, Investments to Support Individuals with Behavioral Health Conditions Long-Term, and Care Coordination Efforts.

#### Diversionary Services

**Regional Crisis Stabilization Units (CSUs)** provide 24/7 walk-in mental health and substance use disorder services for those in behavioral health crisis. Services in these CSUs include law enforcement drop-offs as a safe alternative to a jail or hospital, psychiatric services, medication, peer support, and transition planning, with stays of less than 24 hours. The 10/27/20 Board Letter will provide an update on progress of the following four new or expanded CSUs:

- North Coastal Community-Based CSU in Vista,
- North Coastal Live Well Health Center Community-Based CSU in Oceanside,
- South Region Hospital-Based CSU at Paradise Valley Hospital in National City,
- North Inland Hospital-Based CSU at Palomar Hospital in Escondido.

BHAB discussion question

As many of you are aware, the District Attorney's Blueprint for Mental Health Reform includes a call to expand community-based CSUs across the county. These services are a complement to hospital-based CSUs. There are key differences bet the two, primarily in the community-based CSUs are more accessible to law enforcement.

**Should the County prioritize one setting over another?**

**Mobile Crisis Response Teams (MCRT)** were approved by the BOS through two actions. The first occurred in June 2019, to establish a pilot MCRT in the North Coastal Region; the second in June 2020, to fully fund an expedited rollout countywide. MCRTs are comprised of a trained clinician and peer support specialist that can be deployed through a community helpline or be mobilized by 9-1-1 dispatch, thereby reducing the extent of law enforcement response when there are emergencies related to mental health or substance use disorders. The 10/27/20 Board Letter will offer an update on progress of both pilot program and the additional teams.

BHAB discussion question

There are numerous models for non-law enforcement mobile crisis response, and they are variably coordinated with law enforcement response. A key design decision will be the extent to which non-mobile crisis response is coordinated with 9-1-1 dispatch. **Would BHAB prioritize such coordination or would you prioritize the development of a standalone services?**

## Investments to Support Individuals with Behavioral Health Conditions Long-Term

**Behavioral Health Impact Fund (BHIF)** was established in April 2020 with appropriations of \$25 million for capital projects to support community-based behavioral health organizations in increasing their capacity to support long-term treatment. One-time funds for capital projects through a competitive procurement process will strengthen the regional Continuum of Care. The BHIF request for proposal (RFP) was issued in May 2020, inviting offerors to submit proposals for capital funds to support critical service areas:

- Licensed adult residential facilities, also known as board and care facilities,
- Temporary and transitional housing and support for people with substance use disorders,
- Residential mental health treatment services,
- Residential substance use disorder treatment programs, inclusive of withdrawal management and detoxification services,
- Other temporary and transitional housing for homeless populations with behavioral health needs that may include a focus on youth who are victims of commercial sexual exploitation; and
- Information technology to support telehealth, data integration and innovation to optimize access and care for individuals with behavioral health care needs.

The 10/27/20 Board Letter will offer an update on progress of the pilot program and additional teams.

**Long-Term Care** needs continue to be a priority in Continuum of Care planning to increase the availability of step-down and long-term care capacity to ensure clients are placed in the most appropriate levels of care during and after psychiatric crisis. The 10/27/20 Board Letter will offer an update on long-term care projects including the addition of 29 beds through a contract with Lakeside Skilled Nursing Facility Special Treatment Program.

BHAB discussion question

A key component of the long-term care continuum are board and care programs however, there are fundamental economic challenges with this service. **Would BHAB recommend an alternative approach or pursuing adjustments to the board and care model in order to make it more viable?**



## Care Coordination Efforts

**Care Coordination** is a guiding principle in the Behavioral Health Continuum of Care to support clients most in need of continuous services. It aims to reduce the number of hand-offs between providers by offering a single point of contact for the client. The 10/27/20 Board Letter will offer updates on the following projects related to care coordination:

- Children’s Behavioral Health Hub in Partnership with Rady Children’s Hospital
- Care Coordination Services Through a Joint Venture Between County and UC San Diego

BHAB discussion question

The County has taken a relational approach to this service highlighting the significance of peer support providers, for example. **To what extent does BHAB feel the involvement of licensed clinical providers is necessary?**

## Other Continuum of Care-Related Updates

**Assisted Outpatient Treatment (AOT)**, also known as Laura’s Law, is treatment mandated by court-order for individuals with serious mental illness (SMI) who are resistant to treatment and meet criteria pursuant to California WIC Sections 5345-5349.5. A court-order is typically regarded as a last resort after numerous attempts to engage and connect the individual to services have been unsuccessful. In-Home Outreach Teams (IHOT) serve as the starting point of a treatment continuum with the goal of linking and connecting individuals with SMI to appropriate services, and if eligible, referring individuals to AOT. The 10/27/20 Board Letter will have an update on IHOT and AOT services.

The **Coronavirus Aid, Relief, and Economic Security (CARES) Act** supports the County’s response to the COVID-19 pandemic through funding for city expenses, economic recovery, behavioral health, child welfare, and childcare for essential workers. One of the approved recommendations established \$15.0 million in appropriations dedicated to supporting costs related to telehealth capabilities, electronic health record upgrades and care coordination, outreach and engagement and workforce recruitment and retention in support of the behavioral health services. The 10/27/20 Board Letter will have an update on CARES Act progress.

## Drug Medi-Cal Organized Delivery System

In March 2018, the BOS approved the implementation of Drug Medi-Cal Organized Delivery System (DMC-ODS), beginning July 1, 2018. DMC-ODS implementation dramatically transformed the entire substance use disorder (SUD) system to better serve individuals with SUD by offering comprehensive, evidence-based care. The implementation of DMC-ODS provided an unprecedented opportunity to accelerate the integration of SUD specialty care with the mainstream healthcare system to improve access to services and drive better outcomes.

Additionally, DMC-ODS implementation enabled more local control and accountability, provided greater administrative oversight, created utilization controls to improve care and efficiency, and implemented evidence-based practices in SUD treatment. The 10/27/20 Board Letter will provide a DMC-ODS progress update reflecting on the second year of implementation, including a component on withdrawal management as summarized below.

**Medically Monitored Withdrawal Management Services** provide 24-hour evaluation and withdrawal management in a permanent facility with inpatient beds and are delivered by medical and nursing professionals. On August 25, 2020, BHS issued a request for information to identify interested and capable providers but received no responses from interested parties.