



County of San Diego

NICK MACCHIONE, FACHE
AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY
BEHAVIORAL HEALTH SERVICES
3255 CAMINO DEL RIO SOUTH, MAIL STOP P-531
SAN DIEGO, CA 92108-3806
(619) 563-2700 • FAX (619) 563-2705

LUKE BERGMANN, Ph.D.
DIRECTOR, BEHAVIORAL HEALTH SERVICES

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TO: Behavioral Health Advisory Board (BHAB)

FROM: Luke Bergmann, Ph.D., Director, Behavioral Health Services (BHS)

BEHAVIORAL HEALTH SERVICES (BHS) DIRECTOR'S REPORT – MAY 2023

Behavioral Health Crisis Services

The vision of the Behavioral Health Continuum of Care (CoC) is to achieve a transformational shift from a model of care driven by crises to one driven by chronic or continuous care and prevention through the regional distribution and coordination of resources to keep people connected, stable, and healthy.

To achieve this vision, BHS is focused on developing immediate and long-term strategies to expand chronic and continuous care capacity, which includes coordination of ongoing care, linkages to housing, and seamless connections to integrated primary care. Regionally distributed services will be designed to work in coordination with various partners, including hospitals, community-based providers, cities, law enforcement, and many others.

Implementation of the Behavioral Health CoC supports the development of effective preventive solutions, along with the design of a more cohesive, efficient care and treatment system that optimizes patient outcomes and achieves overall cost-savings. The CoC adopts the Triple Aim objectives of improving the patient experience, improving population health outcomes, and reducing long-term costs.

Mobile Crisis Response Team (MCRT) Program

On June 25, 2019, the County Board of Supervisors approved a recommendation to enhance crisis intervention options available to the community by establishing a MCRT pilot program which became operational in January 2021. MCRT was designed to help people who are experiencing a mental health or substance use crisis by dispatching behavioral health experts to emergency calls instead of law enforcement, when appropriate. These situations are often more effectively addressed by trained clinicians or peers and with less risk of trauma to already vulnerable service recipients. MCRTs are comprised of licensed mental health clinicians, case managers, and peer support specialists who respond to behavioral health crisis calls that do not involve known threats of violence or medical emergencies. On June 23, 2020, the Board of Supervisors further expanded the MCRT program by approving an expedited rollout of MCRT services countywide. In June 2021, the regional MCRT contract was established and, through a phased roll out approach, the MCRT program was expanded to all regions in the County. As of March 13, 2023, the MCRT program has responded to over 4,600 referrals.

MCRT and BHS staff are currently in the planning and development phase of MCRT expansion and integration with Fire/Emergency Medical Services, Tribal leadership, colleges and universities, and school districts.

Crisis Stabilization Units

Crisis Stabilization Units (CSUs) provide immediate mental health support and treatment services in a therapeutic setting to individuals in acute behavioral health distress who require urgent care beyond what an outpatient clinical service can provide. Services are tailored to each person and are provided on a short-term basis, up to 24-hours, and include crisis intervention, mental health assessment, medication assistance, therapy, and peer support. CSUs are designed to be relaxing and quiet, with a calming environment to support mental wellness. The goal is to connect to ongoing care and divert from higher levels of care. In Spring of 2021, BHS opened a new community-based CSU co-located inside the North Coastal Live Well Center.

In Fiscal Year (FY) 2021-2022, over 8,500 unique clients were served by the six regional CSUs. Of those, over 83% of people admitted were diverted from inpatient hospitalizations.

In 2025, we will be opening a community-based CSU located in the East Region, which will be co-located with a new Recovery Bridge Center (RBC). The RBC will provide short-term services, usually about four hours but not exceeding 24-hours, in a supervised, non-medical environment to intoxicated individuals whose level of public intoxication puts themselves or others at risk. Outpatient substance use services will also be available to ensure continuity of care. The CSU and RBC divert individuals in need of immediate care and stabilization from unnecessary emergency room visits or involvement with law enforcement. For more information on this new East Region facility, visit: <https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/csu/eastcsu.html>.

Children, Youth, and Families (CYF) System of Care

[Assembly Bill \(AB\) 153](#) (Chapter 86, Statutes of 2021), signed into law in July 2021, mandated the creation of the Children's Crisis Continuum Pilot Program to be jointly implemented by the California Department of Social Services (CDSS) and the Department of Health Care Services (DHCS). The Children's Crisis Continuum Pilot Program provides a framework for a highly integrated continuum of care for foster youth with high acuity needs to be modeled across California. The purpose of the Children's Crisis Continuum is to fully integrate the system of care for foster youth enabling a seamless transition between service settings and to provide stabilization and treatment to foster youth with high acuity needs within the least restrictive setting possible. The County of San Diego was awarded \$8.5 million in grant funding to support the pilot program over the first five years. BHS, in collaboration with the Department of Child and Family Well-Being and the Probation Department, is working to initiate several new services as part of the pilot continuum.

BHS is exploring two additional levels of care to support children and youth. The service models include an Intensive Outpatient Program (IOP) and Partial Hospitalization Program (PHP). IOP provides a structured milieu of services to youth with mental health and co-occurring disorders several days a week after school hours, while a PHP offers intensive short-term services five days a week. Both an IOP and a PHP can be offered through a Day Treatment Intensive model, with the goal of stabilization, skill-building, and medication management.

Emergency Screening Unit

The Emergency Screening Unit (ESU), operated by New Alternatives, Inc. on behalf of the County, provides crisis stabilization services to children and youth experiencing an acute psychiatric crisis. The ESU team offers comprehensive screening services, crisis stabilization, referrals, and facilitates inpatient hospitalization when clinically necessary.

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In FY 2021-22, ESU had an overall increase in utilization of 7% when compared to the prior fiscal year; crisis stabilization services increased by 6%, and direct admissions increased by 16%. ESU screened 1,818 children and youth in total, with a diversion rate of 69.5%; a 9.8% increase when compared to the prior fiscal year.

In FY 2022-23 through Quarter 2 (Q2), ESU screened 779 children and youth with a diversion rate of 66.6%. Comparatively, ESU screened 952 children and youth through Q2 of FY 2021-22. The diversion rate is in line with pre-pandemic norms and represents a 6.9% increase in diversion compared to FY 2020-21 (i.e., during the COVID pandemic) and a decrease of 2.9% diversion compared to FY 2021-22.

The following table provides a summary of the data including the variance from FY 2020-21 to FY 2021-22, and FY 2021-22 through Q2 to FY 2022-23 through Q2, with anticipated projections through Q4 for FY2022-23.

	FY 20-21**	FY 21-22	Variance from FY 20-21 to FY 21-22	Through Q2 of FY 21-22	Through Q2 of FY 22-23	Variance from Q2 FY 21-22 to Q2 FY22-23	FY 22-23 Projection***	Projected Variance from FY 19-20 to FY 22-23	Projected Variance from FY 21-22 to FY22-23
Crisis Services Admissions	1489	1575	6%	826	670	-19%	1340	-10%	-15%
Direct Admissions	210	243	16%	126	109	-13%	218	4%	-10%
Total Admissions	1699	1818	7%	952	779	-18%	1558	-8%	-14%
Diversion Rate	59.7%	69.5%	9.8%	69.5%	66.6%	-2.9%	66.6%	6.9%	-2.9%

**Services were available during the COVID-19 pandemic 7 days a week, 24 hours a day.

***The projections for FY 22-23 are based on actual data through Q2 of current fiscal year.

The ESU is located at 4309 Third Ave, San Diego, 92103. The phone number is (619) 876-4502.

Acute Psychiatric Inpatient Services for Children and Adolescents (CAPS)

Acute Psychiatric Inpatient Services for Children and Adolescents (CAPS), operated by Rady Children's Hospital of San Diego is an acute care inpatient psychiatric unit serving adolescents and children with mental health disorders. Eleven County beds are dedicated to treating minors referred from the County's ESU. Services are provided 24-hours per day, 7-days a week and include intensive physical and mental assessment, evaluation, treatment, psychosocial, rehabilitation and education services for children and adolescent clients that includes family/caregiver involvement.

In FY 2021-22, CAPS served 650 clients and had an average length of stay of 5.47 days; a decrease from FY 2020-21 where the program served 684 clients and had an average length of stay of 5.56 days. There were 3,238 bed days utilized/produced for Medi-Cal and indigent clients reflecting a decrease from FY 2020-21's 3,334 total bed days utilized/produced, and 96% of discharged clients avoided re-admission to an inpatient setting within 60 days of their discharge, a 1% decrease from FY 2020-21.

In FY 2022-23 through Q2. CAPS served 321 clients with an average length of stay of 4.86 days, and 1,743 bed days utilized/produced for Medi-Cal and indigent clients.

The following table provides a summary of the data including the variance from FY 2020-21 to FY 2021-22, with anticipated projections through Q4 for FY 2022-23.

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	FY 20-21	FY 21-22	Variance from FY 20-21 to FY21-22	Through Q2 of FY 21-22	Q2 YTD FY 22-23	Variance from Q2 FY 21-22 to Q2 FY22-23	FY 22-23 Projection ***
# Of Clients Served	684	650	-5%	339	321	-5%	642
Average Length of Stay	5.56	5.47	-2%	5.29	4.86	-8%	4.86
Total Bed Days	3334	3248	-3%	1619	1743	8%	3486
% Of Clients Avoiding Re-admission to an Inpatient Setting Within 60 days of Discharge	97%	96%	-1%	N/A	N/A	N/A	N/A

**Services were available during the COVID-19 pandemic 7 days a week, 24 hours a day.

***The projection for FY 22-23 is based on actual data through Q2 of current fiscal year.

CAPS is located at 3020 Children's Way, San Diego, CA 92123. The phone number is (858) 576-1700.

Crisis Action & Connection (CAC)

The Crisis Action and Connection program, operated by New Alternatives, Inc. on behalf of the County, provides rapid response to unconnected children and youth who have had a recent acute psychiatric episode in need of intensive support and linkage to services and community resources. This program improves access to mental health services to children, youth, and their families, which helps to divert or prevent use of acute services.

In FY 2021-22, CAC served 355 children and youth; a decrease from 516 in FY 2020-19. CAC received 1,195 referrals in total; a decrease from 1,208 in FY 2020-19. One of the program outcomes is for a minimum of 90% of clients served who discharged from inpatient services to avoid re-admission to inpatient services within 30 days post discharge from the hospital. In FY 2021-22, CAC achieved a rate of 97% of clients avoiding re-admission to inpatient services within 30 days of inpatient discharge.

In FY 2022-23 through Q2, CAC served 198 children and youth and received 473 referrals in total. As CAC receives referrals, the program screens these referrals for evaluation and treatment, and provides linkage for youth/families to community resources. Additionally, program reports linking a significant number of referrals received back to their existing outpatient treatment providers, as well as those families that are not responsive to outreach despite multiple attempts by program to engage into services. CAC's primary referral sources are from ESU, CAPS, and PERT.

In FY 2021-22, the program received 1,195 referrals in total. Approximately 35% of program referrals were received as a step down from the ESU, 14% as a step down from children and youth inpatient services (CAPS and Sharp Mesa Vista), 31% from PERT, 19% from community Emergency Departments, and 1% were referrals received by other referral sources.

In FY 2022-23 through Q2, the program received 473 referrals in total. Approximately 36% of program referrals have been received as a step down from the ESU, 22% as a step down from inpatient services (CAPS and Sharp Mesa Vista), 38% from PERT, 1% from community Emergency Departments, and 3% were referrals received by other referral sources.

The average length of stay at CAC has remained consistent throughout the last few fiscal years. The average length of stay at CAC was at 68.7 days in FY 2020-21, 69.8 days in FY 2021-22, and 65.5 days in FY 2022-23 through Q2 YTD.

The following table provides a summary of the data including the variance from FY 2020-21 to FY 2021-22, and FY 2021-22 through Q2 to FY 2022-23 through Q2, with anticipated projections through Q4 FY 2022-23.

	FY 20-21	FY 21-22	Variance from FY 20-21 to FY21-22	Q1 YTD FY 22-23	Q2 YTD FY 22-23	Variance from Q2 FY 21-22 to Q2 FY22-23	FY 22-23 Projection ***
Clients Served	516	355	-31%	188	160	-15%	320
Referrals	1208	1195	-1%	693	473	-32%	946
Average Length of Stay	68.7	69.8	2%	N/A	65.5	N/A	65.5

CAC is located at 730 Medical Center Court, Chula Vista, CA 91911. The phone number is (619) 591-5740.

BHS SPECIAL EVENTS AND ANNOUNCEMENTS

MHSA Three-Year Plan 30-Day Public Review Closes May 4, 2023

The MHSA Three-Year Program and Expenditure Plan for FY 2023-24 through 2025-26 and the Public Behavioral Health Workforce Development and Retention Program- MHSA Innovation Program proposal were posted on the BHS and the Clerk of the Board webpage on April 4th for a 30-day public review and comment period. The MHSA Plan outlines all MHSA-funded programs and expenditures for the next three fiscal years. The Public Behavioral Health Workforce Development and Retention Program, if approved, will implement a combination of tested professional development programs and new strategies tailored to the County's most pressing workforce needs. The public review period opened on April 4, 2023, and ends May 4, 2023, with final public input provided through a public hearing held at the May BHAB meeting. The MHSA Three-Year Plan will be presented at the June 13, 2023, Board of Supervisors meeting for review and approval, as required by the Mental Health Services Oversight & Accountability Commission (MHSOAC).

For more information on the MHSA visit the following link:

https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_act/mhsa.html

National Alliance on Mental Illness (NAMI) San Diego Community Advocacy Program

The NAMI-San Diego Community Advocacy Program will host the 9th annual Children and Youth Mental Health Well-Being Celebration on Saturday, May 13, 2023, from noon to 5:00 p.m. at the courtyard of the Grossmont Center mall. This is one of the "Mental Health Matters Month" events. This celebration is free of charge and will offer games, interactive art projects, opportunity drawings, and more. Everyone is welcome and BHAB members are encouraged to attend.

Respectfully submitted,



LUKE BERGMANN, Ph.D., Director
 Behavioral Health Services

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- c: Nick Macchione, Agency Director
- Aurora Kiviat Nudd, Assistant Director and Chief Operations Officer
- Cecily Thornton-Stearns, Assistant Director and Chief Program Officer
- Nadia Privara Brahms, Assistant Director and Chief Strategy & Finance Officer