Mobile Mental Health Crisis Response Models

Board of Supervisors December 5, 2023

Jei Africa, BHRS Director





Agenda

- SMC Behavioral Health and Recovery Services (BHRS)
- 911 Dispatch/Public Safety Communications
- Community Wellness and Crisis Response Team (CWCRT)
- Crisis Assistance and Response Evaluation Services (CARES)
- New California Department of Health Care Services MediCal Mandate: Mobile Crisis Response
- Law Enforcement Collaboration
- SMC Behavioral Health Commission
- Support Team Assisted Response (STAR)
- Questions



Presenters

- Jei Africa, Director, San Mateo County Behavioral Health and Recovery Services (BHRS)
- Shirley Chu, Clinical Services Manager, BHRS
- Ziomara Ochoa, Deputy Director, Children and Youth Services, BHRS
- Natasha Claire-Espino, Director, San Mateo Public Safety Communications (PSC)
- Ametrius Sidney, Assistant Director, PSC
- Ed Barberini, Chief of Police, San Mateo Police Department
- Cathy Maguire, StarVista CWCRT Program Manager
- Patricia Baker, CWCRT Clinician, Redwood City
- Captain Matt Lethin, Police Department, City of San Mateo



Presenters

- Julissa Acosta, Management Analyst, Community Services, City of Half Moon Bay
- Michael Akana, Executive Director, El Centro de Libertad/The Freedom Center, Inc.
- Karen Krahn, Deputy Director, Adult and Older Adult Services, BHRS
- Christina Corpus, Sheriff, SMC Sheriff's Office
- Chris Rasmussen, Chair, Behavioral Health Commission
- Sheila Brar, Co-Chair, Behavioral Health Commission
- Sam Rabins, Associate Director of Clinical Services, Wellpower
- Marion Rorke, Access to Care Manager, Denver Department of Public Health and Environment



Overview and Context: Behavioral Health Crisis Response



Introduction

Nationally

Substance Abuse Mental Health Services Administration (SAMHSA) (2020) created national guidelines

988 rollout (2022)

Consolidated Appropriations
Act 2022

Worsening behavioral health issues, tragic incidents with law enforcement and psychiatric boarding in Emergency Department

Statewide

Governor Newsom's focus on behavioral health

Department of Health Care Services (2022): crisis response as part of Behavioral Health continuum

Locally

Range of responses and partners to meet different needs and population

Responses that are community focused and some are for Behavioral Health and Recovery clients



Crisis Response Highlights

Required to use Evidence Base Practices (EBP)

Braided funding: MHSA, grants, MediCal

Initiated
Request for
Proposals
(RFP) process
to select the
most qualified
provider



Crisis Response Highlights

Engaged in robust community process

Preference to having licensed clinician as part of response

Ongoing review of outcomes and compliance with State



Crisis Continuum Highlights



Prevention: Evidence-Based Trainings

- Applied Suicide Intervention Skills Training (ASIST)
 - 2 days skill training
- Mental Health First Aid (MHFA)
 - 8 hours
- Be Sensitive Be Brave (BSBB)
 - 2 hours High School age+
 - Suicide Prevention focused

FY 2023-24 (relaunch) 6 ASIST scheduled 31 participants to-date

> 15 MHFA classes 213 participants

7 BSBB classes 128 participants



Prevention: Crisis Intervention Training (CIT)



- Combined efforts between Sheriff's Office, BHRS, National Alliance on Mental Illness (NAMI), and community partners
- Goals: increase officers' ability to recognize signs of mental illness, increase empathy, reduce officer anxiety and implicit bias
- Offered since 2005; 40-hour training course, 4 series per year
- 1500+ officers and medics trained
- Enhanced Crisis Intervention Training (ECIT)



Early Intervention: Crisis Line (1-650-579-0350)

- Operated by StarVista through BHRS contract
- 24/7 answered by "live" counselors
- Provide crisis de-escalation, emotional support, resources referral for callers
- Receive 988 calls: accredited by the American Association of Suicidology & belongs to Suicide Prevention Lifeline national network
- Screen for in-person response by Youth Stabilization and Support (Youth SOS) & Family Urgent Response Services (FURS)
- FY 22-23: 12,600 calls



Early Intervention: 988



- 24/7 National Suicide & Crisis Lifeline used across the US
- Provides crisis and warm line services from 200+ local crisis centers
- 650 area code
- Serves all ages regardless of insurance
- Dedicated lines for veterans and LGBTQI+ populations
- Text, chat & videophone for hard-of-hearing



Response/Intervention: Youth Stabilization Opportunity & Support (SOS): Youth Mobile Crisis

- 24/7 Mobile Crisis Response Team accessible via Crisis Line (650-570-0350)
 - Response can be in-person or via phone
- Serves youth ages 0-25 located in the County experiencing increase in mental health symptoms
- Service that prevents youth from psychiatric hospitalization
- Response teams consist of both a clinician and family partner or youth peer partner (5 clinicians, 5 family partners, peer partner)



Response/Intervention: Family Urgent Response Services (FURS)

California
Cal-FURS

Filtroent Responses

1-833-939-FURS

- Embedded within Youth SOS
- State mandated service
- Goal: Maintain and support stability in current living situation for current and former youth in foster care and their caregivers
- Increase stability in placement, decrease placement changes, decrease placement to out of home facilities
- Improve trust and relationship between youth and caregiver



Response/Intervention: Psychiatric Emergency Response Team (PERT)

- Partnership of Sheriff's Office and BHRS
- Two PERT teams of clinicians and detectives
- Field-based services: investigation, assessment, mental health intervention, follow-up, provide case management services
- Goals: manage current crisis, reduce hospitalization, connection to service and treatment, improve outcome
- (2022): Received 634 referrals; followed up 291 cases
- Referrals come from Sheriff's Office



Response/Intervention: Crisis Response Team (CRT)

- County staff with specialized crisis response training
- Respond to major community crises or natural disasters
- Provide short-term crisis management, psychological first aid, crisis assessment, resources referrals
- Goals: mitigate psychological reactions, prevent more serious emotional consequences, stabilization, & referrals
- Request for activation to BHRS available 24/7
- Recent response: Half Moon Bay shooting



Response/Intervention: San Mateo Mental Health Assessment & Referral Team (SMART)

- Partnership with American Medical Response (AMR) and BHRS
- Daily 8 AM 8 PM
- San Mateo County service area
- Services: CIT-trained paramedics providing 5150 evaluation, involuntary hold, and needed transportation; paramedics can medically clear individuals, so they don't have to go to the Emergency Department
- Deployed by Public Safety Communications activated by law enforcement only
- (FY22-23): 286 SMART calls
- (FY21-22): 577 SMART calls



Response/Intervention: Integrated Medication Assisted Team (IMAT)

- SMMC & Field-based county staff serving those with chronic, harmful Alcohol & Opioid use
- Responds to acute intoxication and overdose survivors at San Mateo Medical Center (SMMC)
- Provides Medication Assisted Treatment (MAT) screening, case management, recovery supports, brief therapy; initiates warm handoffs to substance use providers
- Embedded:
 - SMMC Emergency Dept: 7 days/week, 7am 9pm
 - Navigation Center: 3 days/week
 - Correctional Health, in custody: 2 days/week
- Referral sources
 - SMMC (primarily ED/PES), overdose alerts, detox and substance use providers, county jail, shelters, self & families



911 Dispatch/Public Safety Communications



911 Dispatch and Public Safety Communications (PSC)

- PSC's role with Mental Health
 - Contracted dispatch agency providing services for residents and other public safety partners for mental health service request
- What qualifies as a Mental Health call for service?
 - Anyone reporting themselves or others in a state that would signify a mental health crisis
 - Could include threats of suicide, acting irrationally, agitated, violent or any phrases that would potentially need a mental health assessment



911 Dispatch and Public Safety Communications (PSC)

- Process when receiving a Mental Health call
 - Calls are triaged and classified to determine an appropriate dispatch response based on the reporting party
 - A dispatch response is inclusive of first responders which could include law enforcement, medical (including fire), SMART, or mental health response units (CARES or mental health clinicians) or a combination of responses



911 Dispatch and Public Safety Communications (PSC)

- Mental Health Response Teams
 - SMART Car
 - A County resource requested when first responders are on scene; based on availability
 - Mental Health Clinician Program
 - Launched in 2021; PSC contracted with Daly City
 - San Mateo, RWC, SSF participates in program; dispatches through their PSAP
 - January October 2023 data: 129 calls (Daly City)
 - PSC does not have data for non-contracted cities
 - CARES
 - Launched in 2022
 - January October 2023 data: 227 calls



Community Wellness and Crisis Response Teams (CWCRT)



Crisis Wellness and Crisis Response Teams (CWCRT)

- Collaboration between cities, BHRS and StarVista
- 4 city pilot: Daly City, Redwood City, San Mateo and South San Francisco
- Implement a co-response model that partners sworn lawenforcement officers with mental health clinicians in a firstresponder framework











A Collaborative Partnership

























Program Design

- A Star Vista mental-health clinician embedded in each of the four-city law-enforcement agencies
- Police officers and the clinicians respond in real time to crisis incidents
- An approach that balances safety considerations with connecting those in crisis with trained experts as quickly as possible
- The importance of communication, coordination, and strong networks
- Independent program evaluation with the John W. Gardner Center of Stanford University
- Transparency with program data, sharing with governing bodies and the community directly



Program Evaluation

John W. Gardner Center of Stanford University

john w. gardner
Center for youth and their communities

Key Findings to Date Now 2 years into the pilot program, key findings and themes have been identified:

Significant Community Need

- Over 1,200 crisis calls in first 18 months of the program
 - Across 4 cities, clinicians respond to 10-25 crisis calls every month

Policing Practices in Mental Health Crisis Response

- Police initiated crisis detentions ('5150s') have declined
- Police embracing holistic and multi-disciplinary approach to client needs

Continuum of Care

 Clinicians consistently follow-up with served individuals, their families and support networks, and other service providers



CWCRT: Moving Forward

- CWCRT continues
 - Until July 2024 and will be re-evaluated for the future
- Expansion
 - Bringing additional clinicians for more cities
- Potential for program evolution
 - How can the program improve to optimally serve our community?



Crisis Assistance Response and Evaluation Services (CARES) Program, Half Moon Bay



City of Half Moon Bay and El Centro - CARES

- Provide an alternative response to mental health-911 calls
- 2-person, bilingual mobile unit: trained behavioral health professional and emergency medical technician (EMT)
- Launched in March 2022 and initially within HMB and Moonridge Farmworker Housing Community
- Beginning July 2022 began responding across the entire Mid-Coast and then in September 2022 began operating 8 am to 6:30 pm



City of Half Moon Bay and El Centro – Crisis Assistance Response and Evaluation Services (CARES)











City of Half Moon Bay and El Centro - CARES

- CARES team response is an alternative to law enforcement, fire, or other first responders
- Services provided: assessment, de-escalation and stabilization; linkage to care; provides next day follow-up
- Types of calls received: suicidal ideation, persons under the influence of drugs and alcohol, individuals experiencing a mental health crisis, parents calling with concerns from an adolescent exhibiting unusual behavior, community members reporting persons in some form of emotional distress



City of Half Moon Bay and El Centro - CARES

- Successful law enforcement collaboration
- Lots of community support
- Successfully recruiting mental health professionals
- Offer lived experience/peer support





SUMMARY PILOT DATA (MARCH 15, 2022 - JUNE 30, 2023): 453 CALLS FOR SERVICE



CALL **RESPONSE TYPES**

232

221

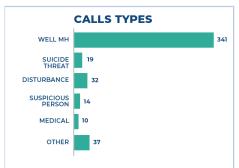
Note: Co-Response = CARES and Law Enforcement

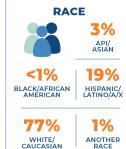
AVERAGE RESPONSE TIME (In Minutes) Note: Calls to areas outside of the HMB City limits have increased the Average

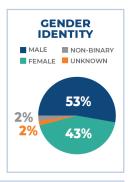
REFERRAL INFO

118

237 Note: A successful referral is when a client is able to connect to services that the CARE Team recommends



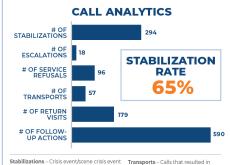




5%

18-24 YEARS

UNKNOWN



OF CALLS WITH

NON-ENGLISH SPEAKERS

OTHER

not resulting in incarceration or involuntary

Escalation – Calls where CARES Team called for Law Enforcement or medical assistance Refusal - Potential participant declined

SPANISH

Return visit - Subsequent/additional Follow-up Actions - Contacts made by CARES Team members to check on participants and status of referrals

UNKNOWN

39% 25% 16% 45-64 YEARS 65+ YEARS 25-44 YEARS

2%

11 YEARS

IF EXPERIENCING **HOMELESSNESS, LOCATION**

STREET

people

AGE

people

people

12-17 YEARS

32 people

INSURANCE STATUS



INSURED

UNINSURED UNKNOWN

Half Moon Bay CARES

Final Evaluation Report

September 2023





New CA Department of Health Care Services (DHCS) MediCal Mandate: Mobile Crisis Response



MediCal Mobile Crisis Outreach Highlights

- Regulation specified in Behavioral Health Information Notice (BHIN) 23-025
 - 5-year MediCal state plan amendment
- San Mateo County required to implement by December 31, 2023
- Launched Response for Proposals (RFP) for contractor(s) to provide service, currently in procurement
- Funding:
 - Enhanced Medicaid federal medical assistance percentage (FMAP) of 85% for 12 quarters
 - Additional funding sources: Realignment, Net County Cost
 - \$300,000 Crisis Care Mobile Unit (CCMU) grant for start-up infrastructure



MediCal Mobile Crisis Specifications

- Anyone, anytime, anywhere all ages, 24/7/365, all geographic areas of county
- Single crisis hotline Star Vista Crisis Line (650-579-0350), which integrates with 988
- 911/Law enforcement/Emergency Medical Services (EMS) coordination - for MH/SUD crisis calls involving safety concerns or emergency medical needs
- Enhances and merges current youth mobile crisis response into "all ages" response model
- Demographic, process and outcomes data collection & reporting required, including client satisfaction surveys



MediCal Mobile Crisis Response Teams

- Provide dispatch, mobile response, face-to-face crisis assessment & de-escalation, crisis plan, 5150 evaluation & hold - if indicated, transport, warm hand-off, referrals to ongoing community services/resources, follow-up post-crisis
- 2-person mobile teams: Behavioral Health Clinician, Peer Support Specialist
- At least one mobile crisis team member carries and trained to administer naloxone
- Mobile team members receive extensive State-mandated training on crisis intervention & de-escalation, harm reduction, trauma-informed care, culturally responsive crisis care, crisis response for special populations (children, youth & families, tribal communities, individuals with intellectual/developmental disabilities)



Law Enforcement Collaboration



PERT



PSYCHIATRIC EMERGENCY RESPONSE TEAM

- The San Mateo County Sheriff's Office, in collaboration with the Behavioral Health and Recovery Services, introduced a co-response model in 2015.
- PERT is not a one-stop solution; rather, it is a comprehensive service model that aims to provide wraparound support for community members dealing with mental illness and their families.
- PERT envisions ongoing collaboration with allied agencies, community organizations, and families to support community members grappling with mental illness.



BENEFITS



- It aims to reduce incidents and enhance community relations.
- Seeks to divert individuals from hospitalization and incarceration.
- Works towards lowering recidivism by breaking the cycle of repeated encounters.
- Highlights positive outcomes resulting from collaborative efforts across different disciplines.





FUTURE OBJECTIVES



- One key future goal is to expand the reach and availability of PERT services.
- We envision a future where PERT can provide equitable coverage to all areas within the Sheriff's Office jurisdiction.
- Our goal is to increase our impact through extensive training initiatives and further to strengthen collaboration and integration within behavioral health systems.
 - We aim to address service gaps by deploying additional PERT clinicians.



The CARES team stands as a testament to success, excelling not only in responding to 911 calls concerning individuals in mental health crises but also in its collaborative partnership, bolstering and enhancing the efforts of our Deputies.

"Working in partnership with the CARES Team has broadened the availability of resources for the coast community. CARES has responded enthusiastically to a multitude of calls for service and collaborated with the Sheriff's Office to provide support and recourses for community members in crisis and their families."

"The reason why CARES and the Sheriff's Office have a great working relationship is because we have the same common goals... service above self!"

Deputy Lomu

Deputy Ballard



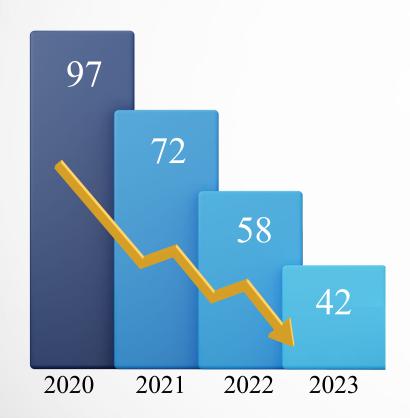
HALF MON BAY POLICE BUREAU

"The Cares Team has been a wonderful resource for the community and for the Coastside Police Bureau, as they allow us to provide those experiencing psychological crisis, a specially trained helping hand that is often times, just what's needed. I am so proud of the partnership we have with the Cares Team and hope the great work we have been able to do together on the Coast can be a model for other communities as to the possibilities that can be achieved through nontraditional partnerships."

Chief Rebecca Albin

5150 WELFARE AND INSTITUTIONS CODE





5150 Code is designed to address mental health crisis.

From 2020 to 2023, the number of cases handled by the Sheriff's Office in the North fair Oaks area, has significantly dropped to 42, reflecting a substantial improvement in addressing 5150 cases.

These statistics indicate a commendable trajectory, showcasing successful efforts in addressing and mitigating the challenges associated with the cases over the given period.

Support Team Assisted Response (STAR), County of Denver



Support Team Assisted Response (STAR) Program

Began as a pilot June 1st, 2020, after community members, city employees, and program partners visited Eugene, Oregon to learn about their alternative response program

Program/contracts were housed in Department of Safety until mid-2021

The program now includes both the immediate van response, as well as follow up services through a network of community-based providers



STAR Program Partners

- STAR Community Advisory Committee
- Servicios de La Raza & STAR Community Coalition
- WellPower
- Denver Health Paramedics Division
- Denver 9-1-1



STAR - Community Coalition













Provide culturally responsive, linguistically specific, and geographically appropriate wraparound services personalized to individual needs

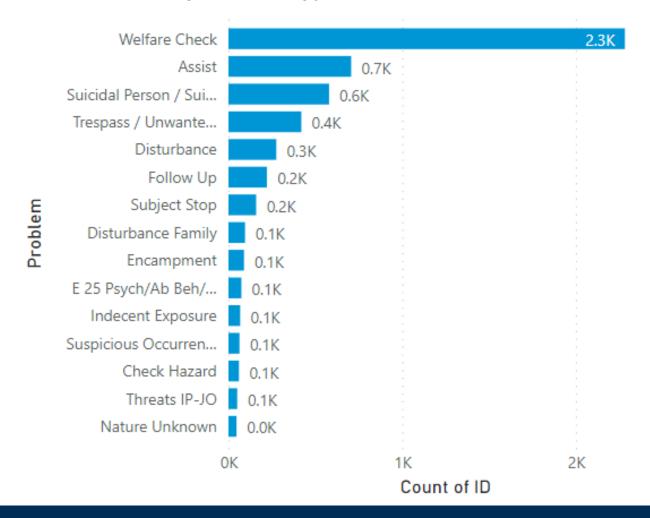
STAR Program Data 2022

Calls responded to: 5,719

Total Clinical encounters: 2,667

Transportation provided: 1,185 times

STAR Incidents by Problem Type



911 Integration

- Denver 9-1-1 controls all emergency calls within the City & County of Denver
- As entity controlling emergency operations, Denver 9-1-1 controls the operations of STAR vans from call-taking, to dispatch, and beyond

- Staff training is key
- Identification of specific nature codes for eligibility of STAR-response
- Robust matrix to assess safety based on nature codes
- Continually exploring additional nature codes that could be eligible

Funding

Clinical Reimbursement

 WellPower funding info (including Medicaid reimbursement as a CMHC)

STAR Funding

- General Funds
- Caring for Denver

Denver's Mental Health Services

WellPower

- Co-Responders
- Walk-In Crisis Center
- Behavioral Health Solutions Center
- Therapy Direct
- CMHC Services

City

- Wellness Winnie
- Substance Use Navigator
- Additional Behavioral Health Contracts

SMC Behavioral Health Commission



Crisis Response Recommendations

In July 2022 the Behavioral Health Commission issued recommendations to the Board of Supervisors regarding Crisis Response services. The four recommendations included, updated current dispatch protocols, the integration of a mental health professional on the dispatch floor, the creation a stand alone, non-armed crisis team, and the creation if crisis stabilization centers across the County.

Major findings include:

- The need for mental health service to be inserted into the 911 system
- The need to triage mental health calls for service early
- The need for consistent, County wide services for mental health crisis
- The need for County wide standards on dealing with mental health crisis
- The need for comprehensive integrated system of services accessible to anyone, anywhere, and anytime, providing "No Wrong Door"



Recommendation #1

Mental Health Integrated Dispatch

 911 dispatch diversion, sometimes called crisis call diversion, means embedding clinicians in their dispatch centers who can respond to behavioral health crisis calls over the phone and resolve the issue through crisis counseling, needs assessment, referral to ongoing services, or diverting crisis calls to non-law enforcement responders





Recommendation #2

Stand Alone, Non-Armed, Crisis Services

- Stand-alone, non-armed, 24/7, mobile mental health crisis response unit designed to independently serve the entire County
- Teams consist of a clinician, peer support, or community members with knowledge of veteran services, and/or a paramedic/EMT





Closing/Request

Very few communities offer anything close to the standard of care for these services. Without adequate crisis response services, communities are left to depend on law enforcement and emergency departments that are ill-equipped to help someone experiencing a mental health crisis. Making sure there is a range of services to help anyone in crisis, no matter where they live in San Mateo County, will help ensure no one in a mental health crisis fall through the cracks.

We urge the Board of Supervisors to adopt these recommendations to ensure that our neighbors who need community support receive <u>equal</u> access to the care, compassion, and properly qualified support that they deserve, **county-wide, regardless of law enforcement jurisdictions**.



Questions

