



COUNTY OF SAN MATEO
Inter-Departmental Correspondence
County Manager



Date: August 29, 2015

Board Meeting Date: September 1, 2015

Special Notice / Hearing: None

Vote Required: Majority

To: Honorable Board of Supervisors

From: John L. Maltbie, County Manager

Subject: 2014-15 Grand Jury Response – Treatment for Adult Mental Illness in San Mateo County: What Exists? What Should Exist?

RECOMMENDATION:

Approve the Board of Supervisor's response to the 2014-15 Grand Jury report "Treatment for Adult Mental Illness in San Mateo County: What Exists? What Should Exist?"

BACKGROUND:

On June 18, 2015, The Grand Jury filed a report "Treatment for Adult Mental Illness in San Mateo County: What Exists? What Should Exist?". The Board of Supervisors is required to submit comments on the findings and recommendations pertaining to the matters under control of the County of San Mateo within 90 days. The County's response to the report is due to the Honorable Carole Groom no later than September 16, 2015.

Acceptance of this report contributes to the Shared Vision 2025 outcome of a Collaborative Community by ensuring that all Grand Jury findings and recommendations are thoroughly reviewed by the appropriate County departments and that, when appropriate, process refinements are made to improve the quality and efficiency of services provided to the public and other agencies.

DISCUSSION:

Findings:

F1. As of May 2015 there are 812 inmates in the County jail. Approximately 19% are diagnosed with mental health illness. Seventy-eight of these inmates have been diagnosed with severe mental illness (SMI) and 27 of them are kept in administrative segregation away from the general population.

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Response: Respondent agrees with this finding.

F2. Studies have shown assisted outpatient treatment (AOT) to be effective in reducing the incidence and duration of hospitalization, homelessness, arrests and incarceration, victimization, and violent episodes.

Response: Respondent agrees in part. While there are some studies that confirm this finding there are other studies that have questioned these results and have determined that voluntary treatment produces greater positive outcomes.

F3. Laura's Law, California's form of AOT, has not been implemented by the County's Board of Supervisors.

Response: Respondent disagrees with this finding. The Board of Supervisors voted to adopt Laura's Law on June 16, 2015. The program will be implemented and available for referrals of potential clients after the Health System Chief reports to the Board of Supervisors that the Behavioral Health and Recovery Services Division (BHRS) has hired staff, contracted for services and developed protocols.

F4. Mental health jail diversion programs have emerged as a potential solution to the criminal detention of individuals with mental disorders. The County of San Mateo does not have a pre-plea mental health diversion program.

Response: Respondent agrees that pre adjudication and sentencing interventions for individuals with mental health challenges have proven effective in reducing incarceration and would be beneficial to implement in San Mateo County.

F5. Medical record keeping is not consistent among the Health System divisions. In particular, BHRS and the San Mateo Medical Center Psychiatric Emergency Services have separate electronic medical record keeping systems. The Correctional Health division, which provides services to the County's jails, does not have a computerized system for medical records.

Response: Respondent agrees with this finding. However the San Mateo Medical Center Psychiatric Emergency Services and Correctional Health Division have access to the BHRS electronic health record to support continuity and coordination of care.

F6. The County's network of mental health services is highly complex and difficult to navigate with no central point of access. As an example, there are three Health System divisions that deal with adult mental health: San Mateo Medical Center, BHRS and Aging and Adult Services, as well as many private mental health service providers that contract with the County.

Response: Respondent disagrees in part with this finding. Because there is a wide array of mental health services that are offered by San Mateo County primarily by

BHRS or contracted to BHRS, navigation may be challenging. However, as noted in the Grand Jury report, BHRS operates a toll free phone number staffed by Access Team members who help people navigate the system including referrals to private providers contracted to BHRS and services embedded in San Mateo Medical Center. The Network of Care website provides comprehensive information on mental health issues and local resources. Clients receive a welcome packet when entering BHRS services that includes more information about services at the particular site. An “ACCESS to Care” brochure that is posted at BHRS sites and on the BHRS website has consumer/family friendly information developed by the Office of Consumer and Family Affairs. BHRS collaborates with Health Plan of San Mateo to assure that publicly insured clients have information on how to access care. In addition, BHRS provides case management, peer and family supports to assist clients and family members. For example, BHRS offers a Family Assertive Support Team (FAST) that identifies prospective clients in the field and connects them to ongoing services.

In addition, Aging and Adult Services, which does not offer mental health services but is involved in other ways with mental health clients, operates a TIES phone line to assist clients and family members navigate the system.

F7. Public awareness of mental health services is insufficient. Websites regarding County services to the mentally ill are difficult to navigate. There is an information deficit for mental health services.

Response: Respondent agrees in part with this finding. Public awareness of mental health services is a challenge partly because the stigma of mental illness discourages people from learning more about the problem and resources to address it. However, over the past ten years BHRS has invested considerable attention and resources to increasing awareness of mental health issues and services.

In addition, there has been a statewide campaign “Each Mind Matters” to raise awareness of mental illness and effective treatments sponsored by CalMHSA, a joint powers authority of which San Mateo BHRS is a member. Locally, BHRS has worked with partners to raise awareness of mental illness and services among diverse populations including Latino, African-American, Chinese American, Filipino, Pacific-Islanders, lesbian, gay, bisexual, transgender, and queer (LGBTQ), and in specific areas of the County including East Palo Alto and North County.

BHRS also has a widely distributed electronically newsletter “Wellness Matters,” a blog and an evolving anti-stigma campaign aimed to broaden awareness and participation by training and supporting individuals with mental health challenges to speak publicly about their recovery, through powerful communication tools such as Digital Storytelling and Photovoice. BHRS also works closely with the local chapter of the National Alliance on Mental Illness on stigma awareness activities.

Recommendations:

R1. Implement AOT, known as Laura's Law in California.

Response: The recommendation has been implemented. The Board of Supervisors adopted Laura's Law by resolution on June 16, 2015. The County anticipates a start-up phase of up to six months, BHRS will begin taking referrals at that time.

R2. Implement coordinated and computerized medical records systems across its divisions (including but not limited to the San Mateo Medical Center, BHRS, and the Correctional Health Services division) to the extent consistent with existing law.

Response: This recommendations will be implemented. The Health System will continue to explore what medical records solution will be most appropriate for Correctional Health Services.

To facilitate care coordination for clients served in multiple Health System divisions, the Health System is in the process of implementing technology that will result in the establishment of an enterprise master patient index (EMPI) that will make it easier to understand if a client is served in more than one division of the Health System and what care they are receiving (to the extent allowed by law). The Health System estimates the EMPI will be implemented by June 2016. Once implemented, the EMPI will make it possible for the Health System to coordinate different medical records systems and improve cross divisional care. This is a practical solution to support care coordination that complements the continued use of computerized medical records and other systems that are tailored to meet divisional needs. After the EMPI is fully implemented, the Health System has plans to implement a health information exchange (HIE) solution. The HIE will augment care coordination efforts by incorporating demographic, clinical and social data elements captured in division-specific systems into a single longitudinal patient record, viewable by clinicians across the Health System. The Health System expects initial HIE capability by the end of calendar year 2016.

R3. Design County Health System division websites to be more useful for individuals who need immediate help with behavioral issues and emergencies. Links to all providers should be well-placed and easy to access.

Response: This recommendation requires further analysis. The website is being redesigned to make it easier to find contact information and the navigation tools for all pages is being updated. While the website is an important tool for disseminating information, BHRS relies heavily on its network of providers, consumers, family members and organizations such as the National Alliance on Mental Illness (NAMI), Heart and Soul and Voices of Recovery to deliver information to current and prospective clients.

R4. Develop a public awareness campaign regarding mental health services including which services are available to individuals with private insurance. The public should be aware of existing programs such as FAST and San Mateo County Mental Health Assessment and Referral Team (SMART) as well as other programs.

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Response: The recommendation requires further analysis. BHRS supports the importance of broadening the public's awareness of mental health issues and the private and public services increase awareness. It is critical that the general public know that as a result of federal health insurance reform most private insurance includes mental health services. The publicly funded services offered by the Health System, including BHRS, are primarily targeted at people who are publicly insured or uninsured. BHRS has an expansive network that increases awareness particularly among people who are publicly insured or uninsured. However, BHRS does not have the means to address public awareness across all private insurers. The large private insurers in our region are responsible for increasing awareness among their members of the services they offer and how to access them.

R5. Develop a pre-plea mental health diversion program. To the extent that such a pre-plea diversion program requires the cooperation of the Superior Court, the Grand Jury recommends that the District Attorney's Office and the Health System coordinate their efforts to obtain such cooperation.

Response: The recommendation requires further analysis. As of June 1st, the District Attorney has implemented a "deferred entry of judgment" program for individuals who have been arrested for certain misdemeanor offenses. The Health System supports this effort and will work closely with the District Attorney to ensure that those with mental health challenges are included and supported. Over the past few years considerable progress has been made to more effectively intervene when adults living with a mental illness become involved in the criminal justice system. Several of the elements identified by the Grand Jury are already in place including screening detainees for mental health disorders and collaborative planning on community based solutions. Within approximately one year, BHRS will be opening a crisis residential "respite" center that will provide a potential option to incarceration.

FISCAL IMPACT:

There is no net county cost associated in accepting this report.