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## Memorandum

To: Local Behavioral Health Advisory Boards (MHAB/ADAB)

- From: Emery Cowan, LPCC, Interim BH Director
- Date: September 13, 2022
- RE: Monthly report of significant issues

This report is shared across advisory boards on a monthly or at least quarterly frequency. Any questions can be sent to <u>ecowan@solanocounty.com</u>

## Integrated MH & SUD Capacity:

- Medication Assisted Treatment (MAT): As previously shared, Solano BH will be working with FHS to establish a Medication Assisted Treatment (MAT) program to support Jails and BH clients through approved medications for treatment alcohol, opioid and other. BH will be coordinating with Partnership and the provider network under the DMC-ODS waiver, as well as looking forward to upcoming Opioid Settlement Distribution <u>Funds</u> (total amounts pending, re: county allocation and potentially some cities) to create a robust plan to address overdose prevention and opioid use.
- Withdrawal Management (aka Detox): BH and PHC are looking to support applicants who have applied for the state's Behavioral Health Continuum Infrastructure Program (BHCIP) funds to build a facility that expands medically assisted withdrawal management and SUD residential beds; discussions include match funding and continued DMC-ODS reimbursement of services.

**Managed Care Plan Collaboration**- Solano BH reached out to Partnership Health Plan of California (PHC) to establish monthly meetings to improve managed care and mh plan coordination, communication processes, and shared responsibilities. As we continue to meet, an area of focus currently is the use of the MCP's Housing and Homelessness Incentive Program (HHIP) program state funding in alignment to our county and CAP Solano JPA Homeless Housing Assistance Program (HHAP) state grant allocations and COC Local Homeless Action Plan.

**Children's Crisis Continuum-** Solano BH and surrounding counties are supporting and working with several providers who applied or are applying for Behavioral Health Continuum Infrastructure Program (BHCIP) funds to build/rehab facilities to support increasing beds for crisis residential and respite. If fully funded, these projects can support our need for children's specific crisis stabilization services (diverted from CSU or hospitals) and stabilize near their families.

**MH Workforce Crisis-** BH has a 19-20% vacancy rate which totals 43 positions, 16 of which are clinicians, 6 psychiatrists/NP/PA, 2 nurses, and 6 mh specialists/case managers (hardest to fill critical positions). Recruitment and retention continue to be an issue and direct service staff are taking on extra work from the vacant positions to ensure we serve clients per state timeline



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requirements. We are seeing a higher acuity in the need of our clients and community and crises happening more frequently. Our administrative staff are overloaded with the increasing state mandates, grants, reporting and requirements (Kaiser Carve out, CalAIM, etc.) One solution is that BH is working on developing an Internship Proposal to address some of the recruitment issues by creating a Learning Site program across disciplines to recruit directly from schools, offer internships/hours, and jobs upon completion. However, we are asking HR for help in updating classifications and salaries to ensure there is parity with competitors and growing demand. We have submitted a recruitment/retention plan to administration and HR.

**Community Mobile Crisis Update**- the community based mobile crisis team, through Pacific Clinics, has served 420 people since inception (May 12, 2021) and 79 people this fiscal year, with an average community stabilization rate of 60%. This program is particularly impacted by the national workforce challenges within behavioral health. As such, they are currently short staffed and will be putting the program on a temporary reduced capacity starting 9/27/22. This will negatively impact the number of people that would be diverted from crisis and ED visits by mobile crisis interventions and law enforcement's intended reliance on this much needed service. During this reduction in programming, they will partner with law enforcement directly to cross-train, provide support with crisis assessments as much as possible and train existing staff. During this time, SCBH will be making a proposal to the BOS to consider increasing salaries with CCMU grant dollars to improve recruitment and retention. Once staffing is stabilized, the program looks forward to a community access line to services. We have reached out to support Vallejo PD and coordinate in relation to their mobile crisis plans/funds and have not heard recent news on their progress- there were plans to focus on a mobile health team concept to not duplicate mental health mobile crisis efforts.

**MH Facility Ribbon Cutting-** The Ribbon cutting ceremony is scheduled for 2 pm on 10/25/22 to inaugurate the new MH Treatment Facility housed in the Beck campus. The contractor, Yolo Community Care Continuum (YCCC) or Y3C, was approved by the Boad of Supervisors on 9/13/22 and is on target for submitting the board and care Community Care Licensing (CCL) application and will begin planning staffing and program plans as well as coordination with referral sources for residents to move in for the facility to open in January 2023. Board members are invited to join.

**Newsletter-** In line with BH's communication and social marketing plan, we launched our first community newsletter in September 2022. You can view it <u>here</u> and anyone in the community can go to our website and sign up to get future emails https://www.solanocounty.com/depts/bh/default.asp

AUGUST 2022 FORENSIC TRIAGE TEAM Referral Breakdown				
MH Diversion	MH Court	MH Services	AOT	Drug Court
5	1	9	1	1
Total: 17				

## Forensic Referrals