



**BOARD OF SUPERVISORS
AGENDA LETTER**

Agenda Number:

Clerk of the Board of Supervisors
105 E. Anapamu Street, Suite 407
Santa Barbara, CA 93101
(805) 568-2240

Department Name: Behavioral Wellness
Department No.: 043
For Agenda Of: April 6, 2021
Placement: Administrative
Estimated Time:
Continued Item: No
If Yes, date from:
Vote Required: Majority

TO: Board of Supervisors
FROM: Department Alice Gleghorn, Ph.D., Director
Director(s) Behavioral Wellness, 805-681-5220
Contact Info: Laura Zeitz, R.N., Division Chief
Behavioral Wellness, 805-452-2760

SUBJECT: Behavioral Wellness – Psychiatric Health Facility (PHF) Update

County Counsel Concurrence

As to form: Yes

Other Concurrence:

As to form: N/A

Auditor-Controller Concurrence

As to form: N/A

Recommended Actions:

That the Board of Supervisors:

- A. Receive and file a report on the **Psychiatric Health Facility (PHF)**, providing an annual update from the PHF Governing Board regarding operations of the PHF, including quality of care and other program activities; and
- B. Determine that the above actions are exempt from the California Environmental Quality Act (CEQA) pursuant to section 15378(b)(5) of the CEQA guidelines, as organizational or administrative activities of governments that will not result in direct or indirect physical changes in the environment.

Summary Text:

This item is on the agenda pursuant to the Board of Supervisors’ (BOS) Resolution establishing a PHF Governing Board and requiring the PHF Governing Board to make annual reports to the BOS, which retains authority to set general policy on fiscal and personnel matters within the County. The PHF Governing Board was originally created by action of the BOS on August 30, 2016, as amended on September 20, 2016 and October 10, 2017, to provide oversight of the County’s PHF. The PHF is a 16-bed, locked inpatient psychiatric facility that provides comprehensive services to individuals in need of acute psychiatric care. This Board Agenda Letter provides information about actions taken during this reporting period by the PHF Governing Board to further its commitment to improving PHF operations and providing quality client care.

Background:

The Santa Barbara County PHF is a 16-bed locked inpatient psychiatric facility that provides 24-hour acute comprehensive care to individuals with severe mental illness who require, per California Welfare and Institutions Code (WIC) Section 5150, psychiatric hospitalization at a Lanterman-Petris-Short (LPS) designated facility. The PHF is licensed by the State Department of Health Care Services (DHCS) as a "psychiatric health facility" and, in addition, is also eligible under Health and Safety Code section 1250.2(d) to participate as a hospital in the federal Medicare program if it meets all the federal conditions of participation. The PHF license only allows for adult clients (ages 18 and over).

Participation in Medicare qualifies the facility for designation as a "Super-PHF," meaning that it can bill both Medicare and Medi-Cal for services provided to qualified client beneficiaries. To maintain its eligibility to participate in the Medicare program, the PHF is subject to inspection approximately every five years by the Federal Centers for Medicare and Medicaid Services (CMS); Inspections entail a review that the PHF has met the conditions of participation for hospitals pursuant to federal regulations at 42 CFR Part 482. In addition to CMS inspection, the PHF regularly participates in unannounced reviews of specific requirements for DHCS licensure as set forth in California regulations at Title 22 California Code of Regulations (CCR) Division 5, Chapter 9. All these reviews provide important monitoring of PHF services and facilities, identifying both areas of strength and improvement. Both state and federal regulations require an effective governing body that is legally responsible for the oversight of the facility.

PHF Governing Board

The PHF Governing Board provides oversight of the PHF to ensure it is in compliance with state and federal regulations.

On August 30, 2016, the BOS authorized the formation of the PHF Governing Board, as modified on September 16, 2016 and October 10, 2017. As of March 1, 2021, the PHF Governing Board consists of seven county officials: Assistant County Executive Officer of Health and Human Services, Director of General Services, Public Health Director, Chief Deputy of Custody Operations for the Sheriff's Department, a Public Guardian Representative, a Public Health Doctor, and one Supervisor from the County of Santa Barbara Board of Supervisors (and alternate). Fourth District Supervisor Bob Nelson serves on the PHF Governing Board, with Third District Supervisor Joan Hartmann as the alternate.

The PHF Governing Board is part of the PHF's governance structure that also includes the PHF Medical Practice Committee, and the Quality Assessment and Performance Improvement (QAPI) team. The PHF Governing Board meets monthly. Regular agenda items include:

- **Report on Quality Indicators.** At their monthly meetings, the PHF Governing Board receives a report on the Quality Assessment and Performance Plan and Indicators. Information is provided by staff about the following Indicators: Complaints and Grievances; Infection Prevention and Control; Patient Services, Care and Safety; Restraint/Seclusion; Medication Use/Pharmacy Services; Significant Adverse Outcomes; Food and Nutritional Services; Physician and Allied Health Professionals and Related Services; Environmental Services; Environment of Care (Facilities); Social Services; Nursing Services; Treatment Plans; QAPI Indicator List; Process Improvement Projects; PHF Status Report (Patient Status (UR) Report); Contract Monitoring; and Significant Areas/Key Events occurring at the PHF (e.g., patient care). If there are areas that are not in compliance, corrective action is taken.

- ❑ **Policies and Procedures.** The PHF Governing Board considers all new and revised policies and procedures. The PHF Governing Board recently considered new and revised policies such as Admissions Criteria and Conditions; Care of Suicidal Patients; Medication Wasting and Destruction; Credentialing, Appointment, Reappointment, and Appraisal of Medical Staff; Pain Management; and various policies regarding infection prevention and control.
- ❑ **Medical Staff Bylaws.** The PHF Governing Board reviews any revisions to the Medical Staff Bylaws.
- ❑ **Staff Credentialing/Privileging.** The PHF Governing Board reviews recommendations of the Medical Practice Committee to approve credentialing of candidates and recredentialing of medical staff and to approve requests for medical staff privileges.

2020 Highlights

Highlights at the PHF this reporting period include:

- ❑ **490 Hospitalizations (7/1/2019 to 6/30/2020)**
- ❑ **PHF Bed Day Mix for 2020**

Attachment A, PHF Bed Day Mix: Acute v Administrative, shows quarterly billing categories for PHF beds over time including days utilized by Incompetent to Stand Trial (IST) Misdemeanor clients. During this reporting period the PHF experienced challenges in discharging individuals to congregate living and shelters due to COVID-19. Facilities throughout the state were unable to accept admissions and as such during this period the Administrative stay days at PHF were increased due to lack of step-down options.

- ❑ **Contract completed for Champions Healing Center in Lompoc**

On March 10, 2020 the BOS authorized the Chair to execute a Memorandum of Understanding with Crestwood Behavioral Health for the Champion Healing Center in Lompoc reserving 32 new in-county MHRC beds for County clients. The Champion Healing Center opened in November 2020 and began accepting transfers of individuals from the PHF and other out of county facilities. In addition, we anticipate housing individuals at the Champion Healing Center who are awaiting establishment of permanent conservatorships, thus reducing Administrative stay days at the inpatient unit, and preserving PHF beds for acute needs.

- ❑ **Implementation of technology solutions and services to maintain operations and allow remote communications**
- ❑ **Compliance with and collaborate with Public Health to adhere to all Public Health Officer orders in response to COVID-19**
- ❑ **During the COVID-19 challenges the PHF has safely remained open and serving the community.** (*See Attachment C, Challenges Due to COVID*)

The larger Behavioral Wellness Department has made this possible by sharing nursing staff throughout the pandemic to maintain required and safe staffing ratios. While the PHF faced many challenges arranging satisfactory discharge plans and placements for conserved and justice involved individuals during the pandemic our length of stay for acute patients remained low.

❑ **Successful Recruitments for Hard to Fill PHF Positions**

The PHF experienced many staff losses this past year, from which it continues to recover. Weekly planning meetings with Departmental HR are held regarding recruitments and retention for hard to fill PHF positions. Significant challenges remain for recruiting Registered Nurses and Licensed Psychiatric Technicians. Two positions were filled this reporting period and new hires include a Director of Social Services, and a permanent 0.75 Infection Control RN.

❑ **Average Length of Stay for 2020** (*See Attachment B, Length of Stay Analysis Preliminary Data*)

The Average Length of Stay (LOS) for IST clients was 26.4 days, for Non-IST clients it was 8.6 and for conserved clients the average LOS was 42.4 days. This increase in length of stay for both conserved and IST clients is due in large part to COVID-19 and the freeze on admissions to larger locked or secured congregate settings that are typical destinations for inpatient step-down.

❑ **DHCS Virtual Audit – Rescheduled to 2021**

DHCS rescheduled its audit of the PHF to January 2021. Overall the audit went well. Staff is awaiting the final audit report and will provide an update on this DHCS virtual audit in the 2021 PHF Annual Report.

Fiscal and Facilities Impacts: Budgeted:

This agenda item is for information and administrative purposes only. There are no current budget impacts

Special Instructions:

Please send one (1) minute order to: mejohanson@co.santa-barbara.ca.us and the BWell Contracts Division at bwellcontractsstaff@co.santa-barbara.ca.us

Attachments:

Attachment A: PHF Bed Day Mix: Acute v Administrative

Attachment B: Length of Stay Analysis Preliminary Data

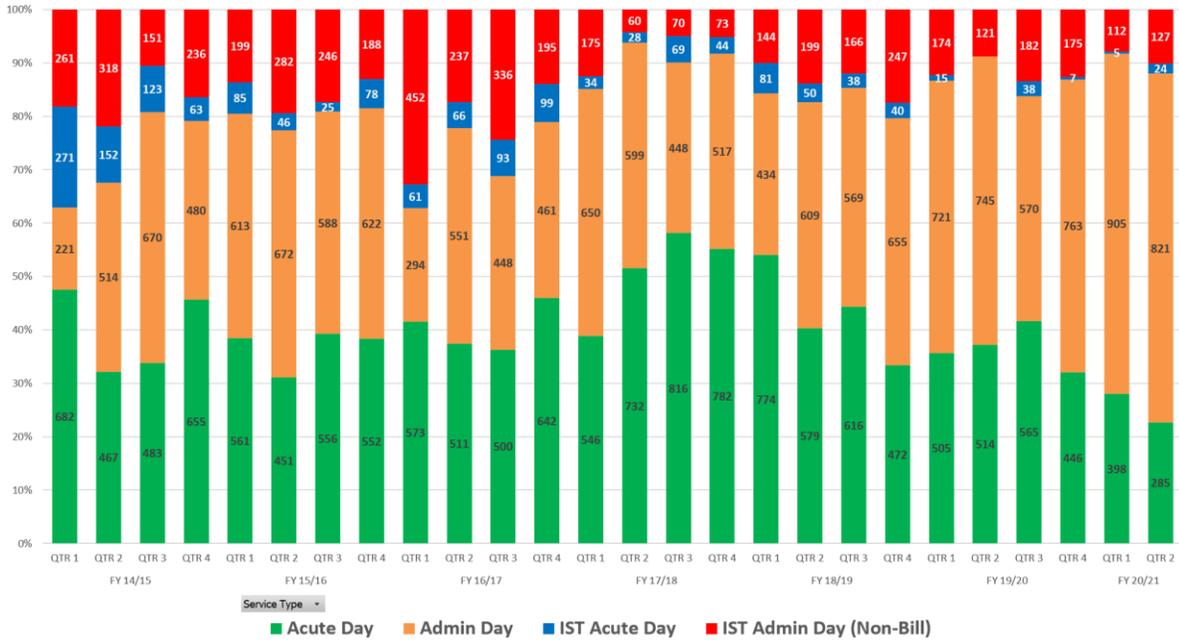
Attachment C: Challenges Due to COVID

Authored by:

Melanie Johnson, Laura Zeitz

ATTACHMENT A

PHF Bed Day Mix: Acute v Administrative



ATTACHMENT B

Length of Stay Analysis Preliminary Data

2020			
Month	IST	Non-IST	Conserved
January	23.3	9.8	25.3
February	9.3	6.8	12.1
March	21.7	5.9	28.0
April	20.0	9.1	33.0
May	28.0	5.6	31.0
June	57.5	11.9	55.4
July	32.5	8.4	0.0
August	0.0	6.6	26.7
September	49.0	6.5	14.0
October	21.0	9.4	65.5
November	24.0	15	149.7
December	30.0	8.2	68.6
Average	26.4	8.6	42.4



ATTACHMENT C

Challenges Due to Covid

- ❑ Covid-19 caused closures in many facilities state-wide that are common destinations for PHF clients upon discharge
- ❑ Lack of placement beds caused unusually long PHF stays
- ❑ Opening of Crestwood Behavioral Health's Champion Healing Center in Lompoc gave immediate relief, but protocols for transfers due to quarantines delayed admissions
- ❑ Staff infections impacted admissions and discharges due to staff shortages and Health Orders
- ❑ Frequent testing of staff and patients with rapid results have been conducted up to twice weekly
- ❑ CSU, crisis and outpatient staff have augmented the crisis continuum to maximize acute and crisis beds and keep facilities open

