

Director's Report

December 20, 2017



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DEPARTMENT AND COUNTY NEWS

Thomas Fire Update and Impact on Behavioral Wellness: The Thomas fire began at 6:26 pm on December 4 in Ventura County. Immediate impact on Santa Barbara County was power outage, air quality and evacuees (animal and people) utilizing shelter services in Santa Barbara County. The Emergency Operation Center (EOC) was activated immediately. The Governor declared a State of Emergency for Ventura County on December 5 and for Santa Barbara County on December 7. A Presidential State of Emergency was declared for Santa Barbara County on December 8 and a Local Proclamation was made on December 8 (reviewed by the Board of Supervisors on December 12). As the fire spread into Santa Barbara County, local impact was felt more broadly with power outage, road closures, school closures, evacuations, displacement of individuals and families, and air quality.

Additional impact directly effecting the Department of Behavioral Wellness includes the news received during early morning hours of December 5th that Vista Del Mar hospital had been destroyed by the fire necessitating the evacuation of 70 patients to the Ventura shelter, 10 of which included Santa Barbara County residents. Behavioral Wellness staff immediately began development of a plan to pick up Santa Barbara County residents and transfer to the PHF or safely transition to other care. This plan required working with the State to allow the PHF to go over census to accommodate the immediate and short term client needs given the loss of Vista Del Mar hospital. The Behavioral Wellness crisis system continues to feel the impact from the loss of psychiatric hospital beds and continues to place client needs first in maximizing use of the CSU when possible, working collaboratively with the SLO psychiatric hospital as well as other hospitals further away.

In addition, numerous Behavioral Wellness staff have been involved in other areas of support related to the Thomas fire. Behavioral Wellness staff have been working at the EOC, on a 24/7 operational period, since activation began. Staff have helped to distribute masks at distribution sites. Staff have worked collaboratively with the Red Cross in providing mental health support at the UCSB Shelter on a daily basis. With contingency planning for possible power outage or evacuation needs, staff have facilitated disaster drills for the CSU, Casa Del Mural, and PHF. In addition to ongoing support of the Thomas fire impact within our county, departmental staff have been directly impacted by the fire. Our appreciation goes to all who have been providing 24/7 support to this incident and our thoughts remain with our departmental staff who are experiencing direct personal impact from the fire's devastation.

2017 Diverse December Calendar: As we embark on the holiday season, Yaneris Muniz, Ethnic Services and Diversity Manager reminds Behavioral Wellness to take a moment to recognize the many traditions, festivities, religious observances, and cultural celebrations that occur during the month of December. Behavioral Wellness invites you to observe, honor and celebrate a Diverse December! A calendar which captures the diversity of this month can be found [here](#).

New Regional Manager Join the Behavioral Wellness Leadership Team: There are several new staffing appointments within the management of program operations within Behavioral Wellness. We welcome to **John**, **Veronica** and **Shana** to their new assignments.

Effective January 15, 2018, **John Winckler, MFT** will assume the role of the **Lompoc Regional Manager**. John will retain his current role as the Crisis Services Manager in addition to his new position.

Veronica Heinzelmann, LCSW has accepted the appointment to the role of the **Santa Barbara Regional Manager**. Veronica has been acting as the interim regional manager for Santa Barbara since September.

Effective December 4, 2017, **Shana Burns, MFT** assumed the role of the **Santa Maria Regional Manager**. Shana is licensed as a Marriage and Family Therapist and has been working in the Behavioral Health field for over 17 years, with 10 years in an administrative/leadership role. Shana received her Master's Degree in Counseling Psychology from the California Institute of Integral Studies (CIIS) in San Francisco. Her background experience includes working as the Program Director for Bonita House, Inc which is a Dual Diagnosis Residential Treatment Program in Berkeley, administrator for Telecare Corporation, and Assistant Director of the San Francisco Bay Area Clinics and Forensic Clinician for Sharper Future – Pacific Forensic Psychology Associates, Inc. Shana has experience as a trainee working in both Clinical and Chemical Dependency programs.

New and Revised Policies Approved: Behavioral Wellness frequently updates policies to reflect enhancements and changes to programs and practices. The following policies were recently approved and are available on the Behavioral Wellness website at <http://countyofsb.org/behavioral-wellness/policies>. Click "View Only RECENT Policies" to see policies approved within the last 6 months, or search by keyword or policy name.

Psychiatric Health Facility (PHF) Policies

1) Emergency Facility Evacuation – The Centers for Medicare & Medicaid Services (CMS) released the Emergency Preparedness Final Rule (42 CFR 482.15) on November 15, 2016 with a compliance date of one year later. Several emergency preparedness policies are required as part of a comprehensive emergency plan. The *Emergency Facility Evacuation* policy establishes evacuation criteria, decision-making protocols, and evacuation procedures based on an all-hazards and vulnerability assessment conducted by the County's Risk Management division in collaboration with PHF leadership.

- 2) **Shelter-in-Place During Emergency** – Similar to the *Emergency Facility Evacuation* policy, this policy supports hazard identification and decision-making processes for the safe sheltering of patients, on-duty staff, and visitors onsite at the PHF in an emergency situation.
- 3) **Emergency Subsistence Management** – This policy describes the subsistence measures the PHF has pre-planned to ensure adequate food, water, medical, and pharmaceutical supplies as well alternate sources of energy are available in the event of a disaster.

Department Policies

- 4) **Psychiatric Medication Consent for Adults (REVISED)** – The Mental Health Plan contract with the Department of Health Care Services (DHCS) requires documentation of informed consent for all psychotropic medications prescribed by physicians, physician’s assistants, and psychiatric mental health nurse practitioners. **Revision: Informed consent requires that a full explanation of the proposed course of treatment be given to the client in his/her preferred/primary language. Prescribers must inform the client of all 10 required elements listed in Section 4.1 of the policy. Contrary to popular belief, informed consent does not have to be reviewed annually.**
- 5) **Nondiscrimination** – Consistent with the requirements of applicable federal and state law, the Department and its contracted providers shall not engage in any unlawful discriminatory practices in the admission of clients, assignments of accommodations, treatment, evaluation, employment of personnel, or in any other respect on the basis of race, color, gender, religion, marital status, national origin, age, sexual preference, mental or physical handicap, health status, or need for health care services.

No Place Like Home 2017: The State’s No Place Like Home (NPLH) program will bring much needed funding to the County to be used to create permanent housing for low-income persons with chronic mental illness. About \$2.7 million will be awarded, which may be used to purchase single-family style shared-housing or to develop mid-sized apartment buildings (e.g. 5 – 20 units). The funds also may be used to leverage tax credits and other financing (including about \$245 million in NPLH competitive funds) to develop larger, multi-family housing (e.g. 30 units or more). Pescadero Lofts in Isla Vista is one such example. Funding may also be allocated toward each of these two approaches. What type of housing do you think would be the best fit for this population and where should the housing be sited? Please provide your input by sending your response in as soon as you are able. Responses are due by December 31, 2017. For questions or to send your response, please contact Laura Zeitz at lazeitz@co.santa-barbara.ca.us

Which area of Santa Barbara is your first choice for development of new housing?

- Southern region (including Goleta and Carpinteria)
- Santa Maria region
- Lompoc region
- Central county (including Santa Ynez)

NATIONAL AND STATE NEWS

Available Now - Recordings of Stepping Up Six Questions Webinar Series: The *Stepping Up* partners are excited to announce that all webinars and network calls in the Six Questions series are now available in the **Stepping Up Resources Toolkit**.

In January 2017, the Stepping Up partners released **Reducing the Number of People with Mental Illnesses in Jail: Six Questions County Leaders Need to Ask** (Six Questions), which outlined a framework for counties to use when assessing their existing efforts to reduce the number of people who have mental illnesses in jail by considering specific questions and progress-tracking measures. Throughout 2017, the Stepping Up partners hosted a series of webinars and network calls focusing on each of the Six Questions. Each webinar is led by a national expert who outlines key strategies pertaining to that question, and features county officials who provide examples of how their counties have addressed or shown progress toward addressing that question.

ACA Enrollment is Up: According to the National Association of County Behavioral Health and Developmental Disability Directors, the start of the ACA's 5th Open Season on November 1 began slowly. Publicity about the Health.gov website was subdued, if not altogether absent. Yet, people somehow knew and signed up in droves. On the very first day of Open Season, over 1 million people visited the HealthCare.gov site, a 1/3 increase over 2016. That day alone, more than 200,000 individuals chose a plan through the federal marketplace website—double the number in 2016! In the first week, a 4-day week, 601,462 people selected plans using the HealthCare.gov platform.

At the start of December, 2.3 million people had signed up for ACA plans which is 900,000 more people over the same time period than last year. And, those figures do not count the number of people who signed up through marketplaces in the 12 states and the District of Columbia that run their own marketplaces. In those states, early publicity and consumer engagement have led to a spike in early enrollments as well. This tells us our Congress that the public very much wants to keep the ACA alive and improve its reach, scope and benefits to people of all ages, without regard to their existing or potential future health status. Remember, open enrollment through HealthCare.gov ends December 15.

Tax “Reform” Has Large Adverse Implications for Medicare and Medicaid: In its effort to pass a \$1.5 trillion tax cut, the Republican House and Senate could trigger automatic cuts to major mandatory spending programs like Medicare, student loans, and health and social services block grant programs, among others, by triggering a 2010 law, known as the “PAYGO” (aka pay-as-you-go) rule. Under the PAYGO rule, over the course of a year, the cumulative cost of enacted legislation may not collectively increase the estimated national debt. Put simply, every cost increase must be matched by a comparable decrease.

Thus, if Congress wanted to boost federal funding for an entitlement program like Medicare or Social Security, it would need to increase taxes. Collaterally, the federal funding loss from major tax cuts would need to be offset by decreases in entitlement spending. [That, for example, is why Senate Republicans want to end the ACA individual mandate...saving \$315 billion against their proposed tax cuts.] Failure to “pay-as-you go” would result in mandatory sequestration of funds across major mandatory spending programs and the end of each calendar year. According to the Congressional Budget Office, the \$1.5 trillion tax cut, if adopted, could well trigger a mandatory \$25 billion sequestration of Medicare funds, the

maximum allowable under law, and another \$111 billion in cuts to other programs. The only good news in this dreadful scenario is that Medicaid, Social Security, food stamps, and social safety net programs are exempt from this sequestration.

No Changes to CURES Act Opioid Grant Allocation Formula: SAMHSA will maintain the Opioid State Targeted Response (STR) grant funding allocation formula for the program's second year. Created by the 21st Century Cures Act, the Opioid STR grant program expands access to evidence-based



prevention, treatment and recovery support services; reduces unmet treatment needs; and helps to prevent opioid overdose deaths. As was the case in the program's first year, the new-year's funding will be allocated according to a formula that takes into

account the needs of each jurisdiction, including the number of overdose deaths and people with an unmet need for treatment. Instead of submitting new applications, grantees will be required to submit a noncompeting continuation application for the second year of funding. Additionally, SAMHSA is working with grantees to ensure that evidence-based practices are being employed and will be providing feedback on grantees' strategic plans. A further funding announcement, released October 27, has been designed to help capitalize on local clinical expertise to improve treatment outcomes.

Behavioral Wellness Staff Response During the Thomas Fire: Gratitude and appreciation goes to the many Behavioral Wellness staff who have been providing extraordinary efforts in response to the impact of the Thomas fire. The dedication and commitment to our clients was evident throughout the day by so many and in so many ways. With the unpredictability of the fire as well as the needs of our many displaced clients, staff showed incredible responsiveness and flexibility amidst a rapidly changing environment.

It was in the early morning hours following the start of the Thomas fire, that Behavioral Wellness staff learned that Vista Del Mar hospital had been burned to the ground, requiring a reported 70 patients to be evacuated and sheltered at the Fairgrounds in Ventura County. Among those evacuated were many from our community. Behavioral Wellness staff Bonnie Zant immediately drove to the Fairgrounds to help with assessment while plans were quickly developed by PHF and CSU staff to accommodate individuals who were unable to return home or be transported to other acute care hospitals. Under the "can-do" ethic of Michael Allen, Lompoc joined in bringing vans to aid in transportation efforts to return clients to Santa Barbara County. The PHF, working in collaboration with the CSU, prepared itself to go above normal census to accommodate those in need including the rapid ordering of all necessary extra supplies for this plan. The State was notified and in support of these efforts. Additional staff responded to the UCSB shelter to provide support for evacuees. Thank you to Karen Campos, Tina Wooten, Maria Xique, Celeste Anderson and Allison Anderson for their caring support of the numerous displaced fire victims. Additional thanks to the many Behavioral Wellness staff who have worked to support the Emergency Operation Center including Maria Xique and Karen Campos who joined the Operations team in handing masks out to the community and Yaneris Muniz who served in the Joint Information Center. Other crisis staff have also supported county residents as they return to their neighborhoods following evacuations to learn the fate of their homes.

It is expected that the events that began in Ventura were only the beginning of unexpected events to come as the Thomas fire continues to burn, likely through the holidays, with limited containment. We

are well staffed throughout the crisis system, and ready to meet additional client needs. Emergency hiring procedures for displaced staff from Vista Del Mar has also been initiated to assist in needs that may extend our capacity beyond our usual census for crisis care and psychiatric bed availability.

Please know how much the dedication and hard work of the department staff is appreciated. We are a department prepared to respond to unexpected and changing needs because of the staff who make up Behavioral Wellness. The actions taken by staff during the early days of the fire and all the days that have followed exemplify who we are as a department.

Our thoughts go out to our many staff who have been personally impacted by the devastation of this fire.

Thank you all. Protect your rest and time with loved ones. We will continue to monitor the fire and needs in the days ahead.

SYSTEMS CHANGE CALENDAR

- **Behavioral Wellness Commission:** The Behavioral Wellness Commission meets on the third Wednesday of every month from 3:00pm – 5:00pm. Video conferencing is available at the Santa Barbara Children’s Clinic large conference room and the Santa Maria Clinic Conference Room. Questions: Karen Campos, kcampos@co.santa-barbara.ca.us
- **Change Agent Meeting:** Change agents meet the fourth Wednesday of every month 9 – 11 am except during quarterly in-person meetings, which are 9 am – 12 noon. Video conferencing is available at the Santa Barbara Children’s Clinic, Small conference room; Lompoc Conference Room, ACT, upstairs, 401 E. Cypress and Large conference room, 500 West Foster Road, Santa Maria. Questions: Nathan Post, npost@sbcbswell.org.
- **Lompoc Regional Partnership Meeting:** Meetings occur every other month on the third Tuesday. The next meeting is November 21, 3:30-4:30 at 301 N. R Street. Questions: Nicole Becker, nbecker@co.santa-barbara.ca.us.
- **Santa Barbara Adult Regional Partnership:** meets every 3rd Monday of the month from 10:00 am – 11:00 am at the Santa Barbara Children’s Clinic, large conference room. Questions: Veronica Heinzelmann, vheinzelmann@co.santa-barbara.ca.us.
- **Santa Barbara Children’s Regional Partnership:** 3th Thursday of the month from 2:00 pm – 3:00 pm at the Santa Barbara Children’s Clinic, large conference room. Questions: Veronica Heinzelmann, vheinzelmann@co.santa-barbara.ca.us.
- **Santa Maria Children’s Regional Partnership Meeting** is held every 3rd Monday of the month at 10 am in the large meeting room at the Foster Road Clinic. Questions: Arlene Altobelli, aaltobe@co.santa-barbara.ca.us
- **Santa Maria Adult Regional Partnership** occurs every 3rd Monday of the month at 11 am in the large

meeting room at the Foster Road Clinic. Questions: Elodie Patarias, epatari@co.santa-barbara.ca.us or Geoff Bernard, gbernard@co.santa-barbara.ca.us

- **The Housing, Empowerment, Action and Recovery Team (HEART)** meets the second Wednesday of every other month, 1:00-2:30 p.m. Locations: Behavioral Wellness Conference Room 261 and Santa Maria Annex via videoconference. Contact Laura Zeitz, lazeitz@sbcbswell.org.
- **The Cultural Competency and Diversity Action Team (CCDAT)** meets the second Friday of each month, 9:30-11:00 am, Locations: Santa Barbara Children's Clinic Large Conference Room 119, Lompoc B St. Adult Clinic Conference Room, and Santa Maria Annex via videoconference. Contact Yaneris Muñiz, ymuniz@sbcbswell.org.
- **The Peer Action Team** meets the second Thursday of the Month from 2 – 4:00 pm. Locations: Behavioral Wellness Santa Barbara Conference Room 261, Lompoc Children's New Port Room the Santa Maria Annex Room via videoconference. Contact Tina Wooton, twooton@sbcbswell.org, regarding the location.
- **The Crisis Action Team** meets the second Thursday of the month, 2:30 – 4:00 pm, Santa Barbara Children's large conference room 119. Contact John Winckler, jwinckler@sbcbswell.org.
- **The Children's System of Care Action Team** meets the 4th Thursday of the month, 10:30 am - 12:00 noon. SELPA Conference Room, 240 E. Hwy. 246, Suite 200, Buellton CA 93127. Contact Ana Vicuña, avicuna@sbcbswell.org
- **The Forensic Action Team** will be meeting on November 29 from 3:15 – 4:45. The meeting is available through video conference in SB Room 261, Lompoc B St Conf Room and the SM Annex. For questions, please contact Celeste Andersen, candersen@co.santa-barbara.ca.us