DEPARTMENT AND COUNTY NEWS

The Mental Health Impact of COVID-19 Among Young Adults: Recently we have seen the serious and severe complications of COVID-19 impacting not only older adults, but young adults as well. While concern over contracting COVID-19 is worrisome enough, according to the Center for Disease Control (CDC), one in four adults between the ages of 18-24 say that they have considered suicide in the past month because of the pandemic.

A survey conducted by CDC with over 5,000 young adult participants in June, shows a surge of anxiety and substance abuse was noted as well with more than 40% saying they have experienced a mental or behavioral health condition related to the pandemic. In addition, many young adults are experiencing concerning financial challenges. Many are losing jobs they had on college campuses, or other part time work due to closures. Recent graduates are struggling with the stress and worry of lack of income paired with paying back school loans. In addition to financial worries, many students are losing their internships or jobs which are considered to be necessary steps in their career paths and create purpose in life.

In Santa Barbara County, 74% of total positive cases are under the age of 50 with nearly 8% being children under the age of 18 and over a quarter of our cases between the ages of 18 and 29. Nearly 40% are between ages 30 and 49. It is clear that our young adults are contracting COVID-19 at an alarming rate, but why?

Here are some possibilities that have been shared:

There is a perception of invincibility among young adults. Thinking that one is healthy is relative. Young adults tend not see doctors as often and therefore are less likely to learn of underlying health conditions until something goes wrong. Underlying health conditions can often contribute to the impact COVID has on a person; even a young person.

The social activities of young adults also play a big part. Sporting events, parties, concerts, bars, restaurants, beaches and large gatherings with friends are the norm for young adults and where social connections are made. All of these activities are known to increase exposure to the virus. Adults who are more aware of underlying health conditions tend to be more aware of their limitations and are taking safety precautions against COVID. Young adults are also more likely to stray from wearing face coverings and socially distancing.
As we continue living life within a pandemic, we have found yet another area we simply must change our thinking on. **Young adults are pre-symptomatic or mildly symptomatic and are not only spreading the virus but becoming ill themselves at an alarming rate (ill both physically and with mental health needs).** This age group is the largest group to be going about life as normal and beginning to re-engage in the community.

It is important that young people model ways to stay connected and have fun during our current chapter in life in a safe manner. Our **whole community** needs you right now – and we want you to be safe. It has become very clear that young adults can be the key to flattening the curve in our community. If you have young adults in your life, please help underscore this message. If you are a young adult (or any age person) struggling with the emotional impact of COVID-19, know that **you are not alone**.

**Here are some things you can do to take care of yourself:**

- **Find a way to help.** Volunteer in the community. There are many opportunities for this right now in our community – helping with meals or just connections with older adults. Volunteer to tutor a K-12 grade student who are really going to need the extra help right now with online learning. Even reaching out via a text, phone call, Zoom or FaceTime with a friend or family member is very helpful right now.

- **Take care of yourselves** – take breaks, find ways to carve out regular exercise; create a schedule for your week that includes safe activities that keep you engaged and moving. Keep in mind the long-term health effects that can be caused as result of having had COVID and be a warrior for following Health Orders.

- **Talk to others.** At some point, everyone needs a little help. Please reach out for support – we have so much support available in our community. If you need help connecting to resources, you can call the **Community Wellness Team at 805-364-2750** or the **Behavioral Wellness 24/7 Access Line at 888-868-1649**.

- **We will get through this!** Have hope that there are better days ahead and we will get through this pandemic together.

**Mental Health Services Act (MHSA) Fiscal Year 2020-23 Three Year Plan Update:** The Behavioral Wellness Commission and **MHSA Chief, Lindsay Walter**, hosted a Public Hearing for the Mental Health Services Act (MHSA) Fiscal Year 2020-23 Three Year Plan in July 2020 and the Plan was approved by the County Board of Supervisors on August 18, 2020. The Plan will be sent to the Department of Health Care Services and the Mental Health Oversight and Accountability Commission by end of August. The Department would like to thank everyone for their contributions in developing the Plan and looks forward to accomplishing the Key Proposals identified. During the month of August, the Peer initiatives will be discussed at the Client and Family Member Action Team.
New Behavioral Wellness and County Schools Partnership Receives $4 Million in Grant for Increasing Access to Youth Mental Health Services: Behavioral Wellness, the Santa Barbara County Education Office (SBCEO), and the county’s 20 school districts have been awarded a $4 million, four-year grant funded by the Mental Health Services Oversight and Accountability Commission. Behavioral Wellness, SBCEO, and public schools serving students from transitional kindergarten through 12th grade will partner to increase access to youth mental health services in education. This grant focuses on crisis services for children and youth with a specific focus on underserved populations, including students identifying as LGBTQ+, students who have been suspended or expelled, and foster youth. “Mental health is one of the most critical areas we can support, particularly during this pandemic, and we are so grateful for these funds to serve youth, families, and educators over the next four years,” said Susan C. Salcido, Ed.D., Santa Barbara County Superintendent of Schools. “This grant will provide new opportunities for our county’s students and their families to navigate and engage in mental health services through Behavioral Wellness and community organizations.”

Partnering together, Behavioral Wellness and SBCEO will be planning with schools and community partners in the coming weeks to use the grant funding effectively. The team’s approach includes navigators and clinicians to support students and families working through a complex system of services. Clinicians will also facilitate support groups based on student needs in areas such as grief and trauma. Additionally, educators and school staff will receive training on Mental Health First Aid (MHFA) through this funding opportunity. “Behavioral Wellness is excited to partner with the education community to better meet the needs of students and their families. This newly established partnership will help with early identification and linkage to specialty mental health services for youth who need this most,” said Alice Gleghorn, Ph.D., Director for the Department of Behavioral Wellness. “The unique mental health needs for students and families related to the pandemic is recognized as significant as we enter the coming school year,” stated Gleghorn.

Forty counties applied for this grant, and Santa Barbara County was one of eight counties that received funding for new or emerging partnerships. The application team included representatives from Behavioral Wellness, SBCEO, YouthWell, and the Mental Wellness Center. Behavioral Wellness will be taking this funding award to the Board of Supervisors as soon as it can be agendized.

COVID-19 Modifications to DMC-ODS Residential Treatment Limits: Temporary modifications to existing limits on DMC-ODS Residential Treatment episodes for Medi-Cal beneficiaries have been established. Due to the COVID-19 public health emergency (PHE), the limitation on 2 non-continuous 90-day regimens per year and the current 30-day (for adolescents) and 90-day (for adults) maximums for a single residential stay have been suspended during the public health emergency. This modification will allow further treatment, when medically necessary, in light of the unforeseen impact of COVID-19. Please see below for further details and guidance. On April 3, 2020, California submitted an application that would amend its Medi-Cal 2020 section 1115(a) demonstration to address the COVID-19 public health emergency (PHE). After several discussions with the state and Subject Matter Experts, Centers for Medicare and Medicaid Services (CMS) determined that the state could effectuate the requested changes to the outlined programs through a revision to the state’s Standard Terms and Conditions (STC) and the associated protocols. In accordance with this determination, CMS approved the following modifications:
• Drug Medi-Cal Organized Delivery Systems (DMC-ODS) Modifications
• Modification to suspend the following limits on residential treatment for DMC-ODS beneficiaries impacted by the COVID-19 emergency:
  o Modification to the STCs to suspend the limitation on 2 non-continuous 90-day regimens per year during the PHE
  o Modification to the STCs to suspend the current 30-day (for adolescents) and 90-day (for adults) maximums for a single residential stay, during the PHE.

MEDICAL NECESSITY: While this modification allows Behavioral Wellness increased flexibility in authorizing additional or extended residential treatment, beneficiaries must demonstrate a continued medical necessity for the corresponding level of care. Residential Treatment Services is a 24/7 non-medical, short-term residential program that provides rehabilitation services to beneficiaries with a substance use disorder diagnosis when determined by a Medical Director or LPHA as medically necessary and in accordance with the individual treatment plan. Please refer to the ADP DMC-ODS Practice Guidelines & Procedure Manual for more information on Medical Necessity. As always, this will be individualized and documented in the client record with a comprehensive assessment and/or an ASAM demonstrating the need for residential SUD treatment, and reviewed by QCM for approval. The existing procedure for treatment providers to request initial or extension authorization will remain the same. Should an extension be indicated, the request should be received by QCM no later than 5 days prior to the last authorized day of current treatment period. QCM authorizations will continue to be for up to 30 days maximum at a time. Please do not hesitate to reach out with questions to bwellqcmdp@sbcbwell.org.

Help@Hand Appy Hours: The Help@Hand team partnering with the Painted Brain invite you to join the community as we bridge the digital divide through virtual engagement sessions and develop Digital Peer Navigators. Digital Peer Navigators will serve as Digital Wellness Ambassadors at the PHF and within the project’s target populations which include Transition Age Youth (TAY) enrolled in colleges/universities; Adult Recipients of Crisis Services and/or PHF and geographically isolated communities.

The August series will cover the project’s Digital Empowerment Toolbox - *Teaching you the basics of Gmail and Downloading Mobile Applications*. The upcoming September/October series will cover the project’s Digital Wellness Toolbox - *Teaching you how to connect to Behavioral Wellness services, contracted Community Based Organizational Providers and trusted peer partners, digitally, via web-searches which use Google, QR codes and much more*.

For more information Contact: Vanessa Ramos with the Help@Hand Project at 805-319-9851 or email at vramos@sbcbwell.org. *Hablo Español*

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](http://countyofsb.org/behavioral-wellness/policies). You can find policies approved within the last 6 months under the tab “View Only RECENT Policies”. You can also search alphabetically, by category, or by keyword.
1. **Relocation, Replacement, or Destruction of Electronic Equipment Containing Protected Health Information (PHI) (Revised)** – This policy establishes procedures for the handling of electronic equipment containing Protected Health Information (PHI).

2. **Maintaining a Compliance Program for the Behavioral Health System (Revised)** – The purpose of this policy is to ensure that the Department maintains a Compliance Program that promotes compliance with statutes, regulations and policies and procedures; effective reporting of fraud, waste and abuse; and system-wide program integrity.

3. **Maintaining a Compliance Plan (Revised)** – The purpose of this policy is to ensure the Department’s Compliance Program maintains a Compliance Plan that sets forth the manner in which the Compliance Program operates.

4. **Annual Compliance Audit Plan (Revised)** – The purpose of this policy is to ensure that the Department’s Compliance Program prepares an annual Compliance Audit Plan which identifies areas that need to be tracked and improved to promote high functioning Department operations.

5. **Medication Disposal (Revised)** – The purpose of this policy is to establish medication disposal procedures that will assist in managing medication safety and minimizing the risk of medication diversion.

**Santa Barbara Regional Partnership:**

**Children:** Maria Chesley, Executive Director from the Carpinteria Children’s Project presented on their services for all members of the community, creating new opportunities and activities. All agencies and services can be reached within the family resource center which operates as a collaborative model. Through the center, families can be linked to many different services including parenting classes, child development classes, support groups, utility assistance, Medi-Cal, Cal-Fresh, mental health services, and more. Also presenting at July’s meeting was Jose Moctezuma, a Home Visitor from CALM. Jose’s role includes leading parent education classes, grandparent’s support groups, Mommy & Me class, Parent Café, and Parenting Tools. Classes have been offered through zoom as result of COVID-19. Through a partnership with Family Service Agency, a senior assistance program has been developed which offers support during the pandemic for older adults.

**Adults:** Joshua Woody, Behavioral Wellness Quality Care Management Program Manager joined July’s meeting and provided an overview of the Access Line. In addition to a thorough overview of the operations of the Access Line, details were provided on the flow of how various calls are handled following mental health and substance use disorder screenings by access screeners. Following the overview of the Access line and screening process, the Medication Assistance Treatment (MAT) Access Point program was overviewed. This program is intended to serve clients with untreated Opioid Use Disorder who have a history of lack of follow-through to treatment and/or who have a high risk for Overdose. The location of the MAT access point is still under construction, but will be located on the first floor of the main campus building, under the PHF. The anticipated referral sources will be from the CSU, Calle Real Clinic and the jail, which is likely the primary referral source. Clients will be treated for a short period of time within the SUD Wellness and Recovery ACCESS point clinic, with the goal of induction, stabilization, and transition to a DMC-ODS provider who also prescribes to MAT.
**Change Agents:** Change Agents met this month to discuss current process improvement projects and gain support and encouragement from one another. The Calle Real clinic reported developing new signage adding recovery language to the mandatory COVID-19 signage as a way to help enhance and beautify the lobby. This team plans to explore peer art to be added to the signage going forward. Santa Barbara’s Children’s Clinic is exploring ways to increase groups via Zoo and telehealth options. The Lompoc Children’s clinic is measuring the decrease in no-show psychiatry appointments with the launch of RxNT’s application of automatic text/email/phone reminders. The Quality Care Management (QCM) team will be working with Human Resources to add a checkbox for Service Provider Identification (SPID) paperwork upon staff departure from the department to see if that increases the number of completed forms returned to QCM (as requested). The Justice Alliance Team is working on a streamlined referral form to better inform the courts and ensure that the correct individuals are being referred to departmental services. Other programs are in various stages of development of a project or collecting data.

**Children’s System of Care (CSOC) Action Team:** The Children’s System of Care Action Team meeting took place on July 23, 2020. The meeting focused on identification of two to three action goals that would be the focus for the group for the upcoming fiscal year. The group also continued to discuss ways to effectively serve our children and families with the impact of COVID-19 on service delivery and accessibility. The next meeting will take place on August 27 and will begin focused work on the identified goals of the workgroup.

**Cultural Competency and Diversity Action Team (CCDAT):** The monthly CCDAT took place on July 10, 2020. The meeting focused on the four primary goals identified by this group in alignment with the Cultural Competency Action Plan. The goals being focused on include a) Language Access Services, b) Outreach & Engagement, c) Cultural Competency Trainings, and d) ADP Program – Collaboration with Santa Ynez Tribal Health. Additional updates were provided on the Help@Hand Project by Vanessa Ramos and on the Consumer Perception Survey by Shereen Khatapoush, PhD. The next meeting occurs on August 14.

**Consumer and Family Member Action Team (CFMAT):** The Consumer Family Member Action Team (CFMAT) monthly meeting featured special guests from the Department: Behavioral Wellness Research and Evaluation Team, Shereen Khatapoush, PhD, Lindsay Walter, J.D., Deputy Director of Administration and Operations and Tristan Scremin from the Peer Organization known as Painted Brain. Dr. Khatapoush discussed the results of the Consumer Perception Survey Report (Nov.2018/Spring 2019) with the CFMAT members. Mr. Scremin shared that Painted Brian has a “Speakers Bureau” that provides public speaking trainings for peers who would like to engage in public engagements and share their story. Lindsay Walter provided an update on MHSA Community Planning process, the status of the MHSA three-year plan and encouraged CFMAT members to join Behavioral Wellness Action Teams. Additional updates during the meeting included the interest of the Behavioral Wellness Commission in getting perspectives from the Transition-Age Youth (TAY) Community, the Help@Hand project continuing to work with the Painted Brian to build a digital mental health empowerment tool box and Chuck Hughes extended thanks to Behavioral Wellness for hosting the Access Leadership training and Community Empowerment Workshop. The CFMAT meets the 3rd Thursday of each month from 1 to 2:30PM via a Zoom platform.
**Forensic Action Team:** The Forensic Action Team Meeting seeks to connect a wide variety of leaders and stakeholders invested in cross-sector collaboration and ongoing systemic enhancements for services provided to criminal justice-involved juveniles and adults. Meetings occur monthly on the 4th Wednesdays @ 1:30-3:00 pm (via Zoom until further notice). The July meeting included a presentation by Brian Swanson, Probation Manager (Juvenile Field Services) regarding the community-based supportive services that probation offers its youth and their families throughout the county. The next Forensic Action Team meeting is scheduled for **Wednesday, August, 26th @ 1:30-3:00 pm**. Please contact Shana Burns, LMFT, Forensics Services Manager, at (805) 335-4263, with any questions and/or if you would like to be added to the invite list.

**NATIONAL AND STATE NEWS**

**The New Role of Virtual Care in Behavioral Health:** The National Council for Behavioral Health recently released a report on the new role of virtual care in Behavioral Health. Patients seeking behavioral health treatment and services faced barriers to access prior to the COVID-19 pandemic. The pandemic made those barriers more imposing. It also made behavioral health treatment more urgent because the pandemic has fueled anxiety, fear and trauma.

“The National Council for Behavioral Health and Qualifacts recently surveyed a nationwide group of more than 1,000 behavioral health executives and staff on the topic of virtual care. Survey respondents shared their insights on the challenges around virtual care, as well as their hopes for its continued use in the coming months and years,” the new report says.

**The New Role of Virtual Care in Behavioral Health** shares how providers are embracing technology and virtual care as an ongoing part of their treatment toolbox rather than a short-term solution during a national emergency.

“Telehealth has always eliminated barriers to access. With the pandemic erecting substantial new barriers to in-person care, patients and providers embraced telehealth in historic numbers,” said National Council President and CEO Chuck Ingoglia. “That’s because virtual care allows patients to overcome those obstacles and have access to the life-saving care they need. Virtual care isn’t just convenient. It also represents the safest most efficient means to provide behavioral health treatment and services during the pandemic. While virtual care has many benefits, it is acutely apparent that due to digital disparities it is not accessible for all patients. However, this timely survey, done in partnership with Qualifacts, clearly demonstrates that virtual care is here to stay and will remain a viable option for treatment long after the pandemic.”

**SYSTEMS CHANGE CALENDAR**

**Please Note:** Due to COVID-19, to protect the health and safety of our staff and other partners, no Action Team meetings will be held in person for the foreseeable future. All will be held remotely.

- **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, Santa Maria Clinic Conference Room and the Lompoc Children’s Clinic Newport Harbor Room. Questions: Jacob Ibrahim at jibrahim@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; and the Santa Maria Adult Clinic large conference room located at 500 West Foster Road, Santa Maria. Questions: Janal Lopez, janlopez@co.santa-barbara.ca.us

- **Lompoc Regional Partnership Meeting**: Meetings occur every other month on the third Tuesday at 301 N. R Street. Questions: Anthony Hollenback, ahollenback@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: Roberto Rodriguez at robertor@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: Questions: John Winckler at jwinckler@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@sbcbwell.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, Santa Maria Annex and Lompoc B St. Contact Maria Arteaga at 805-681-5208 or marteaga@co.santa-barbara.ca.us or Anthony Hollenback at 805-737-6610 or ahollenback@co.santa-barbara.ca.us to get zoom log in information.

- **The Consumer and Family Member Action Team** meets the third Thursday of the Month from 1 – 2:30pm. Locations: Behavioral Wellness Santa Barbara Conference Room 261, Lompoc Children’s New Port Room the Santa Maria Annex Room via videoconference. Contact Maria Arteaga at 805-681-5208 or marteaga@co.santa-barbara.ca.us
• **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 Jeff Shannon, jeshannon@sbcwell.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 Anthony Hollenback at ahollenback@co.santa-barbara.ca.us

• **Forensic Action Team** will be meeting every other month on the 4th Wednesday from 1:30 - 3. Meetings are held at the Behavioral Wellness Children’s Mental Health Services building, room 119, located at 429 N. San Antonio Rd in Santa Barbara. For questions or Zoom log in information, please contact Shana Burns at sburns@co.santa-barbara.ca.us or Celeste Andersen at candersen@sbcwell.org