



RRH Workshop #2

Navigating Behavioral Health
Services

May 20, 2020

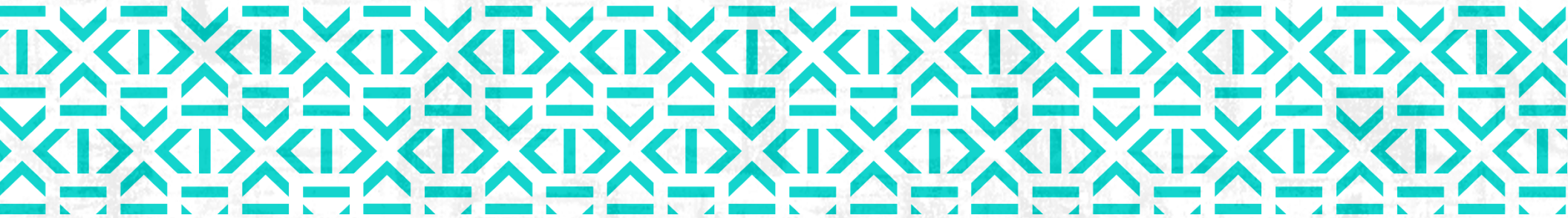
Agenda

- I. Welcome & Introductions
- II. Overview: Behavioral Health & Housing Stability
- III. Behavioral Health Services in Santa Clara County
 - I. With 5-minute break
- IV. Talking to Clients About Behavioral Health
- V. Discussion: Challenges
- VI. Wrap-up

Learning Goals

- 1) Know what resources are available & how to refer clients
- 2) Feel more confident communicating with clients about behavioral health services

Behavioral Health & Housing Stability



Housing & Healthcare

- Being in housing supports health
- Healthcare supports housing stability
- People with behavioral health conditions can, and do, remain housed without long-term subsidies

CoC Quality Assurance Standards

- Applies to CoC, ESG, and many locally funded programs
- Policy for Participant Termination (p. 28)
 - Role of Case Manager & OSH Program Manager
 - Eviction Proceedings by a Landlord
 - Due Process for Participant Appeals of Program Termination

CoC Quality Assurance Standards

- Key take-aways:
 - May terminate assistance to a client who violates program requirements or conditions of occupancy
 - Assistance may be terminated only in the most severe cases
 - **Programs should make every effort to help clients avoid jeopardizing program participation**
 - There is a process in place

Challenges You Identified

- Finding free behavioral health services
- Waitlists and other barriers to accessing care
- Having the time to dedicate to more intensive case management
- Affirming behavioral health services for trans/nonbinary/gender nonconforming clients
- Knowing where to refer, what resources are appropriate
- Case management, referrals, & accessing care during COVID-19, tele-health services

Challenges You Identified

- Need for more training, tools, & resources
- How to approach the topic, how to help the client recognize a behavioral health need
- How to identify if a client may have behavioral health needs
- How to respond to behavioral health crises, crisis intervention
- Understanding & helping clients address the effects of trauma
- Effective communication

Challenges You Identified

- Difficulty understanding important information, like a lease
- Not following through, losing focus or interest
- Behaviors that could lead to threat of eviction
- Behaviors that can feel frightening or make relationship-building difficult
- Actions that are threatening or dangerous
- Stigma keeping clients from identifying need, accessing services

Behavioral Health Department Mental Health Services

Overview of Programs and Levels of Care



5/2020

Scope of Services

Specialty Mental Health are services and programs for individuals who are experiencing **serious mental illness (SMI)**

- Services include case management and rehabilitation services

Mild and moderate issues are provided at FQHC's (Federally Qualified Health Centers)

Provided in collaboration with several community agencies ("CBOs")

Primary Groups Served

Individuals with Medi-Cal

- Un-sponsored clients may access County sites

Specialized funding and programs for individuals involved with:

- Criminal Justice Programs (AB109 funding)
- Housing (Supportive Housing Services)

Levels of Care

Mild to moderate (FQHC)

Outpatient Specialty Mental Health Services

MHSA Full-Service Partnership (FSP)

ACT (Assertive Community Treatment)

Residential Mental Health Services

- SNF Skilled Nursing Facilities
- IMD Institutes of Mental Disease

Acute Psychiatric Services

Outpatient Services Array

Clinic-based Outpatient Programs

Services are
be accessed
through Call
Center

1-800-704-
0900

17
Contractor
agencies
and several
County
Clinics
provide
outpatient
services
throughout
all regions of
Santa Clara
County

Services
are provided
in all
threshold
languages

Evidence-
based
practices
and/or
person-
centered
initiatives
are utilized
by all
providers

Most adult
services
include
psychiatry

Outpatient Services, cont'd

Specialized Outpatient Programs

Other Programs:

Culturally
Specific
Services

Older Adult
(60 years+)

TAY
(Transitional
Aged Youth)
16-25

- LGBTQ
-Specialized
shelters

Faith Based
Services

Access

All services should be accessed ***by the client*** through the 24/7 Call Center
1-800-704-0900

Expect a brief benefit and symptom screening over phone

Client should be ***offered*** an appointment in 10 working days

- May take longer if client has certain requirements/ requests

Usually no charge for services, unless client has a Share of Cost Medi-cal plan

- Some clients may get a bill. Never advise clients that they won't get a bill!

Clients must consent to treatment!

Supporting your Client in Treatment

Be aware of any negative feelings you may have about mental health treatment

Get signed Release of Information (ROI) to talk to clinician

Know treatment goals so your work is aligned with clinician's goals

No splitting behavior!

Reminders of appointments are beneficial

Report major change in behavior to clinician (if ROI is in place)

Important Numbers!

Suicide and Crisis Hotline:

1-855- 278- 4204

Mobile Crisis 1-800-704-0900 (option #2)

Call Center 1-800-704-0900

In Crisis?
Text RENEW to 741741

CRISIS TEXT LINE |

Free, 24/7, Confidential

Thank You!

- Questions, Discussion

Lauren Gavin, LMFT
Sr. Program Manager
Supportive Housing Services
Lauren.gavin@hhs.sccgov.org



SUTS SERVICES

RAPID REHOUSING TRAINING

MAY 20 2020

PRESENTER: KAKOLI BANERJEE, SUTS

SUTS System of Care – things to know

SUTS operates a Drug Medi-Cal Organized Delivery System based on 2017 DHCS guidelines

The services are organized according to a continuum of care, based on service intensity & other factors, and informed by the American Society of Addiction Medicine framework

Services are provided by a combination of county and contract providers (mainly CBOs)

Service standards, Reimbursement and other requirements are based on county's contract with DHCS

SUTS services

Outpatient

- 3 levels (OP, IOP, Partial Hospitalization)
- Post-discharge –Recovery Services

Residential

- One level (LOS usually 30-45 days) with Step down to OP

Withdrawal management

- Short stay stabilization (3-7 days)

NTP/OTP

- Medically managed withdrawal from Opioids
- Methadone/buprenorphine

Recovery Residences

- Sober living environments for clients in OP treatment only

Eligibility criteria for treatment in the SUT system of care

To receive treatment in the SUTS network of care, a client must meet criteria for treatment:

1. Must meet the diagnostic criteria for treatment
2. Must meet criteria for treatment within a SUTS level of care
3. Must be a resident of Santa Clara County (some exceptions)

Eligibility criteria- diagnosis



It is important to understand that the SUTS network of care is mandated to treat **only persons who meet the DSM 5 diagnostic criteria for a substance use disorder.**



A diagnosis is established by a licensed clinician, who conducts a clinical interview to determine a precise diagnosis.



The DSM 5 recognizes substance-related disorders resulting from the use of 10 separate classes of drugs



So, it is possible that someone who is using substances may not meet the diagnostic criteria for treatment

2nd eligibility criteria-ASAM

Clients are assessed on 6 ASAM dimensions for placement into a level of care.

There are specific criteria for residential services. Residential services must be authorized by SUT QI.



SANTA CLARA COUNTY IS GENEROUS PROVIDER OF BEHAVIORAL HEALTH SERVICES.



SUTS PROVIDES SERVICES TO CLIENTS WITH MEDICAL, VALLEY HEALTH PLAN, SANTA CLARA FAMILY HEALTH PLAN-MEDICAL, ANTHEM MEDICAL & MOST IMPORTANTLY, UNINSURED PERSONS



COUNTY FUNDS ARE USED TO PAY FOR MOST OF THE TREATMENT FOR UNINSURED PERSONS. BUT CLIENTS WILL BE ASSESSED FOR THEIR ABILITY TO PAY FOR PART OF THEIR TREATMENT.



THE TYPICAL PAYMENT IS MADE ON A SLIDING SCALE, BASED ON AN ABILITY TO PAY



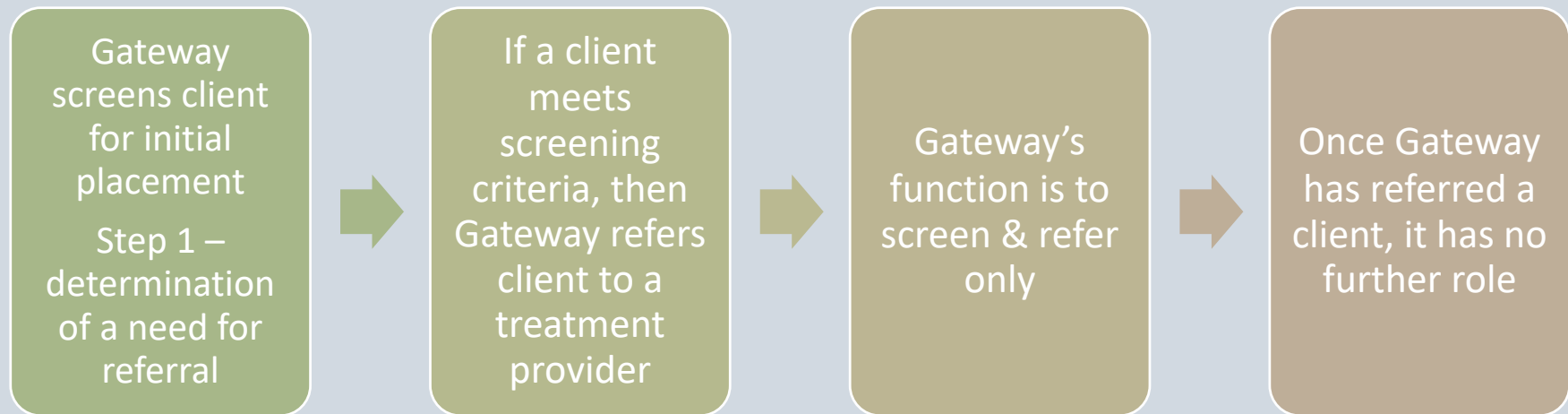
CLIENTS WILL NOT BE TURNED AWAY BECAUSE THEY CANNOT PAY FOR SERVICES.



CLIENTS WILL NOT BE TURNED AWAY BECAUSE OF THEIR IMMIGRATION STATUS.

Paying for services/Immigration status

What happens when a client call Gateway





For NTP/OTP, clients will be given an appt for an intake date. Some clients also walk in although this usually means a long wait.



OP providers offer both open access & appointments for the initial visit - waits could be from 1 to 14 days (sometimes longer)



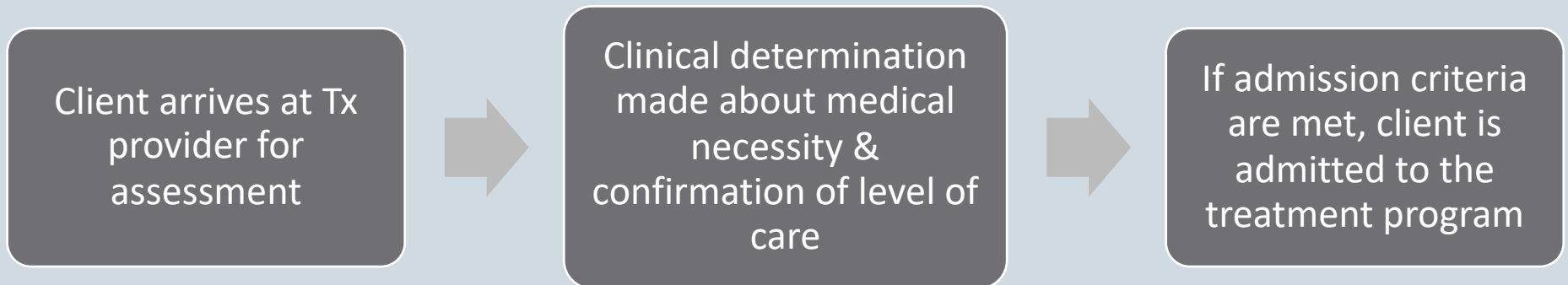
For Residential treatment, Gateway passes the referral to SUTS residential placement coordinator who places clients- currently there is no wait list for this service



Detoxification services now called Withdrawal Management is open 24/7. WM beds are usually occupied and clients need to call every 2 hours until a vacant bed can be found

Gateway to providers

Treatment provider –if admission criteria are met



When admission criteria for the referred level of care are not met

**Client needs
different type of
treatment**

- Client is referred to another treatment program

**Client does not
have a diagnosis
for a substance
use disorder**

- Client is referred for other services

**Client does not
show up**

- 3 attempts are made to contact client

SUTS Service Categories-what to expect

Outpatient services
(lowest level) – weekly
individual or group tx

IOS & Partial
Hospitalization- 9 to 20
+ hours per week of
treatment

Withdrawal
Management (3-7
days)– social
detoxification, no
medication

Medication Assisted
Treatment – lengthy
eval by MD before
dosing, daily dosing is
typical

Residential services –
24/7 in a facility for 30
days up to 90 days



Barriers to succeeding in treatment

Not being able to attend treatment regularly due to transportation barriers, inconvenient clinic times, forgetting appointments or group times, etc.

- Many clinics provide telehealth options, but many clients lack communication devices

Being homeless makes it difficult to focus on treatment, so SUTS provides sober living facilities for clients in outpatient treatment

Sometimes, the counselor and the client do not develop a therapeutic alliance to work on the client's issues



Support for clients

1. Connecting them with other services- education, employment training, employment, permanent housing, drivers license, record expungement, food, clothes (whatever the current need)
2. Reminders about appointments
3. Transportation support (bus tokens, rides, bicycles)
4. Cellphone/computer (to connect with providers)



Questions?

Contact information

Kakoli.Banerjee@hhs.sccgov.org

Homebase

SantaClaraCoC@homebaseccc.org

