

# Co-Response Teams



## Joint Metrics Developed



Joint metrics and targets collaboratively developed with the Sheriff's Office. Examples include date and time of call, clearing time of call, disposition, location, and more. Examples of joint targets ensure progress toward the joint goals of the program including the provision of safe, effective and compassionate response, avoiding unnecessary hospitalization or incarceration, and more.

## Joint Dashboard



A collaboratively developed joint dashboard is currently under development.

## Commitment to Regular Meetings



Monthly meetings occurring among management and staff from each agency. Quarterly meetings with Behavioral Wellness and the Sheriff's Office to collaboratively review real time data for identification of trends, opportunities and/or challenges with continual quality improvement in mind.



# Mobile Crisis



## Expanded Medi-Cal Mobile Crisis Teams

Expanded Medi-Cal Mobile Crisis Benefit implementation plan approved by the State with new services currently active



## Stationing Staff in High Volume Areas

Efforts continue to station crisis staff in high volume areas, including the jail (pending Union meet and confer process)



## Placement of Staff in High Volume Areas

Placement of staff in Emergency Departments across the county (included in the change in crisis clinic service delivery model) is pending Union engagement



## More to Come...

Further detail on changes in place with the new Mobile Crisis Benefit will be outlined in the following slides



# Crisis Clinics



## Shift from Clinic Based to Field Based

Shift in model from being predominantly clinic-based to field based in order to meet client needs

## Redeployment of Staff

Crisis clinic staff have been redeployed to areas of increased need

## Crisis Clinics Leveraged

Crisis clinics are being leveraged to offer bridge care for those in need, while transitioning to ongoing care





SANTA BARBARA COUNTY  
DEPARTMENT OF  
**Behavioral Wellness**  
A System of Care and Recovery

# **Expanded Medi-Cal Mobile Crisis Benefit**

**Santa Barbara County  
Department of Behavioral Wellness**

February, 2023



# Mobile Crisis Benefit in California

County Behavioral Health Departments throughout the State are required to implement the **new** Expanded Medi-Cal Mobile Crisis Benefit. Services are designed for Medi-Cal beneficiaries experiencing a behavioral health crisis, but will respond for any member of the community in need. Mobile Crisis Teams exist in addition to Co-Response Teams in the community.

Services are community-based, provide rapid response, assessment, de-escalation, reduce immediate risk of danger and subsequent harm, and avoid unnecessary emergency department care, psychiatric inpatient hospitalizations and law enforcement involvement.



Offers an alternative to calling 9-1-1 (when possible), option to have mental health response without law enforcement present, address increase in symptoms early, and reduce use of emergency departments.

# When to Call the Mobile Crisis Team

## Thoughts of Self Harm

When there is an immediate risk of someone hurting themselves or others



## Increased Mental Health Symptoms

A person is upset, crying, and exhibiting increased mental health symptoms



## Focus is on Safety Planning

Law enforcement not involved and aim is to focus on safety planning, warm hand-offs and follow-up check ins.



## Always Available

The mobile crisis services benefit ensures that Medi-Cal beneficiaries have access to coordinated crisis care 24 hours a day, 7 days a week, 365 days per year.



# The Mobile Crisis Team is NOT for These Situations



- If there is a weapon on scene
- If a person has already overdosed
- If the person is in the process of taking immediate steps to harm self or others

**Call 9-1-1**

When calling 9-1-1, a  
**Law Enforcement First Responder**  
will respond to the scene.

# New Medi-Cal Expanded Crisis Benefit



## Reduce Use of Emergency Departments and Law Enforcement Involvement

Mobile crisis services are designed to provide relief to beneficiaries experiencing a behavioral health crisis, including de-escalation and stabilization to reduce the immediate risk of danger and subsequent harm; and avoid unnecessary emergency department care, psychiatric inpatient hospitalizations and law enforcement involvement.



## Individualized Rapid Response

Mobile crisis services are a community-based intervention designed to provide rapid response, individual assessment and community-based stabilization to Medi-Cal beneficiaries who are experiencing a behavioral health crisis.



## 24 hrs./day 365 days/year

The mobile crisis services benefit will ensure that Medi-Cal beneficiaries have access to coordinated crisis care 24 hours a day, 7 days a week, 365 days per year.



## Community Based

Mobile crisis services are a community-based intervention to provide de-escalation and relief to individuals experiencing a mental health or substance use crisis wherever they are, including at home, work, school, or on the street.



# Team Structure



01

## Meets Minimum State Requirements

2 staff are available on team response, at all times. At least one staff trained in the admin of naloxone. Team of two must include or have access to a licensed mental health professional. A peer may be on the team if having a State-approved Medi-Cal Peer Support Specialist certification

02

## Various Service Components

Mobile crisis response, crisis assessment, safety planning when appropriate, warm hand off to referrals and ongoing care, and follow up check in's with client/family/caregiver

03

## Telehealth Permitted

Telehealth may be used for translation, to help connect to specialist providers, psychiatry and/or medication support services.

# Service Components



## Mobile Crisis Response

Mobile crisis response services provide rapid response, individual assessment and community-based stabilization to Medi-Cal beneficiaries who are experiencing a behavioral health crisis.



## Crisis Assessment

Initial face-to-face crisis assessment to determine if there is an immediate risk to self or others. Must occur within a minimum 60 minute timeframe from call for help.



## Safety Planning

Safety Planning as appropriate to assist in preventing further crisis situations.



## Warm Hand-Off to Referrals and Ongoing Care

A warm handoff is a handoff that is conducted in person, between two members of the health care team. Referrals for ongoing care are provided for all clients having had contact with a mobile crisis team.



## Follow Up Check-Ins

Mobile Crisis Teams will attempt to engage all individuals who receive an initial mobile crisis assessment with follow-up check in visits and provide assistance with linkage to resources.

# Community Engagement

Behavioral Wellness is redesigning the entire crisis branch to better meet consumers needs by engaging with consumers where they are vs. in the office.

## Staff Redeployment

Crisis clinic staff have redeployed to areas of increased need.

## Bridge Care

Crisis Clinics are being leveraged to offer bridge care for those in need while transitioning to ongoing care.

## Field Based Needs

Model shift allowing for full capacity to meet field based needs.

## Timely Response

Increase staff in order to reduce response time and address high no show rates



**24/7 Access Line**

**888-868-1649**



# **It is recommended that the Board of Supervisors:**

- Receive and file a report on KPMG's Operational and Performance Review of the Santa Barbara County Crisis Services;
- Receive and file a report on the State required Expanded Medi-Cal Mobile Crisis Services Benefit;
- Provide direction as appropriate; and
- Find that the proposed actions do not constitute a "Project" within the meaning of the California Environmental Quality Act, pursuant to 14 CCR 15378(b)(2), as it consists of general policy and procedure making