INTRODUCTION

Dear Chief Probation Officer Benton and the Santa Barbara County Board of Supervisors,

The mission of Behavioral Wellness is to promote the prevention of and recovery from addiction and mental illness among individuals, families and communities, by providing effective leadership and delivering state-of-the-art, culturally competent services.

Decision and service delivery reflect the following values:

- Quality services for persons of all ages with mental illness and/or substance abuse
- Integrity in individual and organizational actions
- Dignity, respect, and compassion for all persons
- Active involvement of clients and families in treatment, recovery, and policy development
- Diversity throughout our organization and cultural competency in service delivery
 - A system of care and recovery that is clearly defined and promotes recovery and resiliency
- Emphasis on prevention and treatment
- Teamwork among department employees in an atmosphere that is respectful and creative
 - o Continuous quality improvement in service delivery and administration
- Wellness modeled for our clients at all levels; i.e., staff who regularly arrive at the workplace healthy, energetic and resilient
- Safety for everyone

The Department of Behavioral Wellness' Juvenile Justice Mental Health Services (JJMHS) team is honored to collaborate with Probation to serve our mutual, juvenile justice involved youth throughout Santa Barbara County. We greatly appreciate the opportunity to partner with you.

Respectfully,

Jon Masuda, LMFT Justice Services Program Manager, Department of Behavioral Wellness

MENTAL HEALTH OVERVIEW

The Department of Behavioral Wellness' Juvenile Justice Mental Health Services (JJMHS) program provides clinical treatment services for youth held in probation juvenile detention facilities, specifically the Juvenile Justice Center (JJC) and Los Prietos Boys Camp (LPBC), in compliance with accreditation standards as determined by probation, including the National Commission on Correctional Health Care (NCCHC) Standards for Juvenile Detention and Confinement Facilities.

The JJMHS team also includes the Transitions Team, practitioners funded by Juvenile Justice Crime Prevention Act (JJCPA) and the Youthful Offender Block Grant (YOBG) to provide post custody outreach & engagement support and linkage to youth.

JJMHS clinical staff provide the following treatment services utilizing evidenced-based, best practices principals to include:

- Clinical assessment (to include risk assessment) treatment planning
- Individual and group psychotherapy
- Eye Movement Desensitization and Reprocessing (EMDR) therapy
- Crisis intervention
- Family counseling psychiatric evaluation and medication monitoring case management
- Female specific trauma-informed programming, including Seeking Safety curriculum
- Substance abuse counseling (individual and group) co-facilitation of Moral Reconation Therapy (MRT) and Interactive Journaling (IJ) group curriculums.
- Post-custody community-based assessment, outreach & engagement support and linkage to long-term treatment
- JJCPA assessments in adherence to court and/or probation orders

JJMHS clinical staff also provide trainings on various mental health topics to probation facility staff at a minimum of four (4) times per year.

Probation and Behavioral Wellness align the below goals and objectives in serving juvenile justice involved youth:

- Embrace and nurture collaboration, shared accountability and increased community and family engagement.
- Promote public safety and reduce juvenile delinquency by developing individual responsibility and accountability.
- Bolster reduction in juvenile recidivism through therapeutic outreach and engagement efforts, trust-building and warm hand-offs to community-based programs addressing substance abuse and/or mental health needs, positive mentorship, gang-involvement, etc.

From July 1, 2022 to June 30, 2023, the Juvenile Justice Center and Los Prietos Boys Camp mental health service provision included the below types of service and frequency:

	JJC	LPBC	TOTAL
PSYCHIATRY SERVICES			
# psychiatry assessments in person	408	101	509
# initial psychiatrist visits	43	9	52
# follow up psychiatrist visits	365	92	457
# Safety Status Checks	276	N/A	276
INDIVIDUAL THERAPY			
# individual therapy sessions	987	329	1316
# hours of individual therapy	1523	404.5	1927.5
FAMILY THERAPY			
# family therapy sessions	22	16	38
# hours of family therapy	22	20.75	42.75

# parent/caregiver collateral sessions	12	87	99
GROUP THERAPY			
# group sessions	108	3	111
# hours of group sessions	108	4.5	112.5
# of programming groups	38	1	39

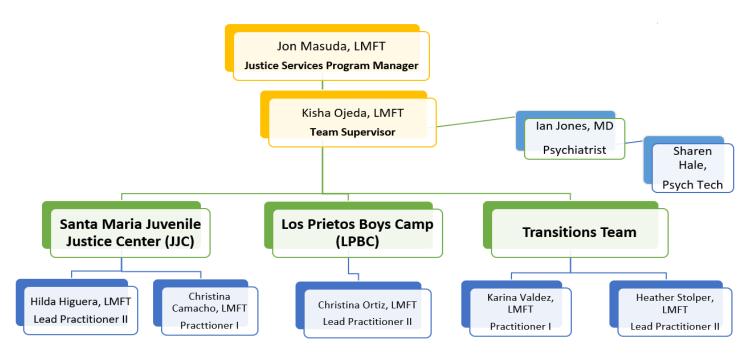
For FY 22-23, below is a snapshot of admissions and services rendered for each correctional facility, in addition to transitional, post-incarceration support services and linkage.

	JJC	LPBC	Transitions Team		
# admissions	199	33	36		
# unique clients	151	25	31		
Services provided in FY 22/23					
Total # services	3,266	744	403		
Average # services per admission in FY	17.4	22.5	11.2		
Services provided in full admission through 6/30/23					
Total # services	4,417	914	724		
Average # services per admission	23.5	27.7	20.1		
Average length of admission (days) Closed admissions only	64 days	103 days	163 days		

STAFFING

Behavioral Wellness' Juvenile Justice Mental Health Services (JJMHS) program consists of the below staffing structure (totaling 7.40 FTE):

- 1.0 FTE Team Supervisor
- 2.0 FTE Practitioners (Transitions Team -IT)
- 2.0 FTE Practitioners (JJC)
- 1.0 FTE Practitioner (LPBC)
- 0.75 FTE Psychiatric Technician (JJC & LPBC)
- 0.65 FTE Psychiatrist (JJC & LPBC)



Staffing Requirements

- 2.0 FTE (JJC) practitioner staff in this class must be in possession of a valid license as a Licensed Clinical Social Worker (LCSW) or a Licensed Marriage and Family Therapist (LMFT) or Licensed Professional Clinical Counselor (LPCC) issued by the California Board of Behavioral Sciences, or be a registered intern with the California Board of Behavioral Sciences as an Associate Marriage and Family Therapist (AMFT) or Associate Clinical Social Worker (ASW) or Associate Professional Clinical Counselor (APCC). At least one (1) of the two (2) FTEs are required to be fully licensed as a LCSW or LMFT.
- 1.0 FTE (LPBC) practitioner staff in this class must be in possession of a valid license as a Licensed Clinical Social Worker (LCSW) or a Licensed Marriage and Family Therapist (LMFT) or Licensed Professional Clinical Counselor (LPCC) issued by the California Board of Behavioral Sciences.
- 0.65 Psychiatric Technician (Psych Tech LVN or LPT) at JJC and LPBC.

Suicide Prevention

The Department of Behavioral Wellness provides leadership in organized public and private partnership activities and education to advance strategies for suicide prevention. Suicide Prevention activities, provided through Behavioral Wellness county wide, include public and targeted information campaigns, stakeholder involvement in action teams, training, school postvention support and response (the provision of psychological support, crisis intervention and other forms of assistance to those affected by a campus suicide or other traumatic event. Suicide postvention involves a series of planned interventions with those affected by a campus suicide with the intention to facilitate the grieving or adjustment process, stabilize the environment, reduce the risk of negative behaviors, limit the risk of further suicides through contagion), first responder and community support surrounding deaths by suicide, outreach and education. Suicide is a serious public

health problem that causes immeasurable pain, suffering, and loss to individuals, families, and communities throughout our nation. Suicide is complicated and tragic, but is often preventable. Though the warning signs may be subtle, they are there. Knowing the warning signs for suicide and how to get help can help in saving lives.

JJMHS staff provide safety checks in both correctional facilities per custodial regulations when warranted, which also includes thorough risk assessments and linkage to mobile crisis 5585 evaluations when appropriate to determine whether a youth is to be placed on a hold for potential psychiatric hospitalization. Suicide prevention is an integral part of Behavioral Wellness service provision. Suicidality and suicidal history is a primary component to the youth's intake and initial assessment process, as well as ongoing to ensure safety of the youth both in custody and in the community.

Youth with Substance Use Disorders

The JJMHS team provides substance abuse counseling to include the evidence-based practice curriculum, Interactive Journaling, both individually and in a group treatment setting to address substance use and abuse with youth. Clinical staff simultaneously utilize a variety of effective modalities and techniques, such as "Motivational Interviewing" to encourage youth to explore the negative consequences and legal impacts resulting from their substance use/abuse in the community. JJMHS staff assess for substance use disorders using the American Society of Addiction Medicine (ASAM) screener, to identify the appropriate level of care for substance use disorder treatment for the youth. JJMHS services promote abstinence and harm reduction, meeting the youth where they are to establish trust and therapeutic alliance to promote prosocial decision-making, alternative coping strategies and self-care. JJMHS practitioners regularly support youth with calling the Behavioral Wellness - Access Line to be screened for substance abuse services in the community in preparation for their release, often partnering in advance with substance abuse providers to facilitate warm hand-offs.

Discharge/Reentry Planning and Services

The JJMHS and Probation teams pursue an integrative team-based approach to developing individually tailored discharge plans for youth being released to the community. TT practitioners in particular are responsible for engaging youth and family members, while in custody, as well as after youth are released, in order to offer assessment, short-term, supportive rehabilitation, therapy and case management services, level-of-care determination and linkage to long-term treatment and community-based resources to promote successful probation outcomes.

Continuous Quality Improvement and Accreditation

The Department of Behavioral Wellness' Quality Care Management (QCM) division actively reviews client charts and provides documentation trainings to ensure clinical staff are adhering to state regulations, mandates and internal policies of high-quality documentation standards to maintain the integrity of the electronic health record for each client. Practitioners, both pre-licensed and licensed, are credentialed upon hire by QCM and recredentialed on an annual basis based upon their licensure status and overall job performance.